

The Urinary System

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Lecture 1

Organs of the Urinary System

kidneys

ureters

urinary bladder

-urethra

Kidney Functions



- Filters blood plasma, eliminates waste, returns useful chemicals to blood
- Regulates blood volume and pressure
- Regulates osmolarity of body fluids
- Secretes renin, activates angiotensin, aldosterone
 controls BP, electrolyte balance
- Secretes erythropoietin, controls RBC count
- Regulates P_{CO_2} and acid base balance
- Detoxifies free radicals and drugs

Anatomy of Kidney

- Position, weight and size
 - retroperitoneal,
 - level of T12 to L3
 - about 160 g each
 - size
 - 10 cm long,
 - 5 cm wide,
 - 2 cm thick
 - The left kidney is always
 higher and nearer to the median
 - plane than the right



- Shape
 - lateral surface convex; medial concave
- CT coverings
 - renal fascia: binds to abdominal wall
 - adipose capsule: cushions kidney
 - renal capsule: encloses kidney like cellophane wrap



- Concave medial hilum leads to concave renal sinus containing renal vessels, lymphatics, sympathetic nerves, fat and renal pelvis.
- Renal pelvis (expanded upper end of ureter) is divided into 2-3 major calyces, each divided into 2-3 minor calyces. Minor calyx: cup over papilla collects urine



Anatomy of Kidney



- Renal cortex: outer 1 cm
- Renal medulla: renal columns, pyramids papilla

Cortex & Medulla

- Cut section reveals outer cortex and inner medulla .
- Cortex is granular due to RC,PCT & DCT.
- Medulla is striated due to LOH, CT & CD.

Medullary pyramids:

- 10-18.
- Bases towards cortex & apices towards hilum forming renal papillae.
- Separated by cortical tissues called columns of Bertini.

Medullary rays: extend from bases of pyramids to cortex.

lobes & lobules

- Each kidney is divided into lobes & lobules.
- **Renal lobe:** 1 medullary pyramid + associated cortical tissue .
- **Renal lobule:** 1 medullary ray + associated cortical tissue No C.T. septa between renal lobe & lobules.



Each kidney contains over 1 million nephrons and thousands of collecting ducts



renal cortex

renal medulla

Histological aspects

Stroma

- C.T capsule surrounded by fat.
- Very little CT around BV
- & reticular tissue between parenchyma

Parenchyma

Uriniferous tubules:

- Nephron
- Collecting tubule & duct



NEPHRON

- Structural and functional unit of kidney .
- Each kidney formed of 1-4 million nephrons .
- 2-3 nephrons drain by 1 CT that join forming duct of Bellini .

Types :

- Cortical under capsule.
- Juxtamedullary near medulla.

Parts:

- 1- Renal corpuscle (Malpighian corpuscle)
- 2- Proximal convoluted tubule (PCT)
- 3- Loop of Henle (LOH)
- 4- Distal convoluted tubule (DCT)



Renal corpuscle (RC)

• **Present in:** cortex.

• Formed of:

- a) Glomerulus (tortuous tuft of capillaries).
- b) Bowman's capsule (double layer epithelial capsule)
- Has two poles:
- a) Vascular pole: afferent arteriole enters & efferent leaves.b) Urinary pole: PCT begins.
- **Diameter:** 200 um.
- Function: filtrate blood and form urine.

a) Glomerulus

- Tuft of anastomosing capillaries.
- Afferent arteriole
- enters RC at vascular pole
- gives glomerulus
- unite forming
- Efferent arteriole

Glomerular capillaries

- lined by fenestrated endothelium
- no diaphragm
- rest on basement membrane



Basement membrane

- 300 nm thick.
- Formed of 3 layers:
- Middle lamina densa (collagen IV)
- Outer and inner laminae rarae
 -less electron dense.
- -glycoproteins: laminin+fibronectin -proteoglycans.

Afferent & Efferent arterioles

 Lumen width is the same but diameter of afferent is larger due to thicker muscle layer to regulate hydrostatic pressure in glomerular capillaries.



Intraglomerular mesangial cells

- Present inbetween loops of capillaries
- to support them where a basement membrane is lacking.

b) Bowman's capsule

Two layers:

- A-Outer parietal layer: simple squamous epithelium .
- B-Inner visceral layer: podocytes adherent to glomerular capillaries.

The capsular space

- between parietal & visceral layers
- receives glomerular filtrate
- continuous with PCT.

Podocyte L/M

- Star shaped
- multiple processes.



Podocyte E/M

Large cell:

- Body
- 1ry processes (major)
- 2ry processes (minor)



- Cell body:
- Central nucleus (extended chromatin),
- Cytoplasm: mitochondria, Golgi, RER, microtubules & microfilaments.
- Processes: microtubules & microfilaments

1ry process:

- parallel to long axis of blood capillary.
- gives rise to numerous 2ry processes.
- . 2ry processes:
- end in feet like structures on basement membrane of glomerular capillaries and hence name of cell.

 Inbetween the feet, there are filtration slits covered with diaphragm.

- Podocyte Function
- Blood renal barrier.
- Regeneration of basement membrane.

Podocytes team up to make filtration slits



Blood-renal barrier

Formed of: 1- Fenestrated endothelium of glomerular capillaries: Hold back RBCs, WBCs & platelets.

2- Thick basement membrane: (the only continuous layer).
High molecular weight protein (> 68,000) can not pass.
Small molecular weight sugar, amino acids & protein can pass.

3- Filtration slits (60-100nm) **& overlying diaphragms:** Prevent molecules according to their electrostatic charge.

Function: Formation of glomerular filtrate.

Renal Corpuscle and the Filtration Membrane



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Lecture 2 Proximal convoluted tubules

- Begins in cortex at urinary pole of renal corpuscle. •
- At first highly convoluted then straightens to continue with descending thick segment of LOH in medulla.
- Small lumen with 60 um diameter and 14 mm long.
- Lined with single layer of pyramidal cells •
- Rest on basement membrane.



L/M & E/M

• Cells 4-5 pyramidal acidophilic.



- Lumen narrow.
- Boundaries indistinct (Lateral interdigitations).
- Nuclei rounded central.
- Apical brush border (microvilli).
- Basal acidophilic striations (Mitochondria inbetween infoldings).

Functions

- Reabsorption of:
- 85% of sodium activly and 85% of water passivly.
- all glucose & amino acids.
- low molecular weight protein by pinocytosis \rightarrow endosomes \rightarrow amino acids.
- Excretion of:
- metabolites, dyes, drugs, urea and uric acid.
- The end result is isotonic solution.

Loop of Henle

- U shaped tube present mainly in medulla .
 Four parts :
- Thick & thin descending.
- Thin & thick ascending.



1-Thick descending part

- Starts in cortex and extends to medulla.
- Similar to PCT in structure and function.

2-Thin descending part

- In medulla.
- Lined with simple squamous epithelium
- Similar to capillary wall but with no blood cells in lumen.
- Permeable to water.
- Impermeable to sodium.
- Urine becomes hypertonic.

3-Thin ascending part

- In medulla.
- Lined with simple squamous epithelium.

4-Thick ascending part

- Starts in medulla and extends to cortex.
- Similar to DCT in structure and function.

- Permeable to sodium.
- Impermeable to water.
- Urine becomes hypotonic.

- Subcapsular nephrons (short LOH) → turn of LOH in thick ascending part.
- Juxtamedullary nephrons (long LOH) → turn of LOH in thin descending part.

Distal convoluted tubules

- In corticomedullary zone: continuation of thick ascending LOH.
- In cortex: joins collecting tubules.

Three parts:

1-Straight part: continuous with ascending thick limb of LOH.

2-Macula densa: close to afferent and efferent arterioles. A part of juxtaglomerular apparatus.

3-Convoluted part: opens in collecting tubules .

L/M & E/M

- Cells: 5-8 cubical small acidophilic.
- Lumen: wide.
- **Boundaries:** distinct (Less lateral interdigitations).



- Nuclei: rounded central.
- Apical surface: no brush borders (few short microvilli).
- **Basal** acidophilic striation (mitochondria inbetween infoldings).





- Reabsorb 15% sodium (activly) under control of aldosterone.
- Reabsorb 15% water (convoluted part) under control of ADH.
- Excrete hydrogen, ammonium & potassium ions.
- Maintain acid-base balance of body.



Juxtaglomerular apparatus

- Is formed at the site of the contact between the distal convoluted tubules with the afferent arterioles Composed of:
- 1-Juxtaglomerular cells.

2-Macula densa.

3-Polar cushion.

Afferent arteriole

 Tunica intima: endothelium + C.T. + internal elastic lamina.

• Tunica media: smooth muscle cells.

• Tunica adventitia

1- Juxtaglomerular cells

- Modified smooth muscle cells of tunica media of afferent arterioles.
- Cells: large cubical cells + rounded nuclei + cytoplasm containing many PAS+ve secretory granules.
- EM: RER, Golgi and mitochondria.
- Internal elastic lamina is absent,
- so juxtaglomerular cells are in contact in one side with blood and endothelium
- and in other side with macula densa due to absence of its basement membrane.

Function

1-Secrete renin \rightarrow

- converts plasma angiotensinogen into angiotensin I \rightarrow
- by converting enzyme in lung \rightarrow angiotensin II \rightarrow
- produce aldosterone by adrenal cortex \rightarrow
- acts directly on DCT \rightarrow
- water & sodium retention \rightarrow
- increase blood pressure.

2-Secrete erythropoietin \rightarrow formation of erythrocytes in bone marrow.



Macula densa

- The part of DCT in concavity between afferent & efferent arterioles of same nephron.
- Cells: columnar with packed nuclei + numerous microvilli and infranulear Golgi.

Functions

 Sensitive to chloride ion content of tubular fluid → signals for constriction of glomerular afferent arteriole → regulates rate of glomerular filtrate.

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COLLECTING TUBULES

Lecture 3

- Not part of nephron.
- Different embryonic origin.
- Union of 2-3 DCT \rightarrow collecting tubule \rightarrow medullary ray in cortex \rightarrow main collecting tubule in medullary pyramid \rightarrow
- Several medullary collecting tubules form straight papillary ducts of Bellini \rightarrow apex of renal papillae \rightarrow minor calyx.
- 2-4 minor calyces \rightarrow major calyx \rightarrow renal pelvis.

L/M & E/M

L/M :

- Lined with simple cubical epithelium (in small tubules) or simple columnar epithelium (in large tubules).
- Cytoplasm pale acidophilic.
- Cell borders distinct.
- Lumen wide.
- Nuclei dark central.

E/M :

- Few organelles.
- Interdigitations between cells not marked.
- Few microvilli and basal infoldings.





• Water is reabsorbed under control of antidiuretic hormone.

Collect, concentrate and conduct urine to calyces.





Renal interstitial tissue

- The kidney is invested by C.T capsule easily stripped.
- Medullary interstitial CT cells are macrophages, fibroblasts & interstitial cells.

Interstitial cells:

- more numerous
- elongated nuclei
- numerous lipid droplets
- Synthesize medullipin I converted in liver into medullipin II (potent vasodilator lowers blood pressure).

Renal Circulation

Renal Artery

Segmental arteries Interlobar arteries **Arcuate arteries** Interlobular arteries Afferent arterioles Glomerulus Efferent arterioles **Peritubular capillaries**

Renal Vein

Segmental veins Interlobar veins Arcuate veins Interlobular veins Venules



Excretory passages

- Minor calyces, major calyces, renal pelvis, ureter, urinary bladder and urethra.
- Urine collected from ducts of Bellini \rightarrow minor calyces.
- 2-4 minor calyces \rightarrow major calyx \rightarrow renal pelvis.



Histological structure

1-Mucosa:

a- Epithelium: transitional.*b- Lamina propria:* loose C.T.

2-Muscle layer: Smooth muscle that becomes thicker from minor calyces to renal pelvis .

3-Adventitia: CT covering urinary passage except upper part of urinary bladder (peritoneum).

URETER

- 2 ureters
- Starts from renal pelvis.
- Ends in urinary bladder.

- 4 mm in diameter & 30 cm long.
- Thin wall +
 star shaped lumen.





10 Transitional epithelium (basal layer)

12 Adipose tissue and fibroelastic connective tissue (subserous fascia)



Histological structure

- 1- Mucosa: longitudinal folds
- a- Epithelium: transitional.
- b- Lamina propria: dense CT, BV and lymphatic nodules.

2- Muscle layer: smooth muscles

- a- In upper two thirds: 2 layers, inner longitudinal & outer circular.
- b- In lower third: 3 layers, inner & outer longitudinal & middle circular.

3- Adventitia: C.T.



URINARY BLADDER

- a temporary storage reservoir for urine.
- Thick wall with wide lumen.
- It is located in the pelvic cavity, posterior to the symphysis pubis, and below the parietal peritoneum.
- Empty (Folded).
- Full (Folds disappear).



Histological structure

1-Mucosa:

- A-Epithelium: transitional.
- Special stratified epithelium where numbers of layers change according to state of organ.
- Surface cells are large rounded (dome-shaped) with 1-2 nuclei.
- In empty bladder (epithelium has 6-8 layers).
- In distended bladder (epithelium has 2-3 layers).
- The surface epithelial layer has thick plasmalemma.
- Cells are attached together by interdigitation called plaques allowing cells to overlap each other when bladde is empty.

B-Lamina propria: loose to dense C.7



Empty (Folded). Full (Folds disappear).









2-Muscular layer:

- Thick smooth muscle fibers.
- inner & outer longitudinal. middle collectively these circular. are called the detrusor muscle.
- Contraction of this muscle expels urine from the bladder.

\transitional epith.

- **3-Adventitia:** C.T.
- The superior & posterior surface of the bladder covered by peritoneum

URETHRA

Urethra of female differs from male in structure and length.

Urethra of female

- 5 cm in length.
- Extends from internal orifice at urinary bladder
- To external orifice above & anterior to vagina.

Histological structure

1-Mucosa :

a) Epithelium:

- Transitional at internal orifice.
- Stratified squamous at external orifice.
- Stratified columnar inbetween.
- a) Lamina propria: fibroelastic along its length .

2-Muscle layer: smooth muscle

- Inner longitudinal.
- Outer circular.
- As urethra pierces uro-genital diaphragm, skeletal muscle forms sphincter for voluntary control of micturition.

Urethra of male

- 20 cm tube
- Conducts urine from urinary bladder & seminal fluid from male genitalia to outside body.
- Many glands open in course of male urethra. These are prostate, bulbo-urethral and littre glands.
- Three parts: prostatic, membranous & penile.

1- Prostatic urethra

- Present within prostate.
- Lined by transitional epithelium.
- An elevation (verumontanum) projects into its interior.
- Ejaculatory ducts open at sides of this elevation.

2- Membranous urethra

- 1 cm
- Lined by stratified and pseudostratified columnar epithelium.
- Surrounded by the voluntary external sphincter.

3- Penile urethra

Two portions:

- a) Bulbous:
 - Passes through corpus spongiosum.
 - Lined by pseudostratified or stratified columnar epithelium.

b) Pendulous:

- Passes through glans penis.
- Lined by stratified squamous epithelium.

THANK YOU