# Introduction Blood

## Components of blood

- Blood –collection of fluid and cells
- Fluid component- plasma
- Cells- red cells, white cells and platelets

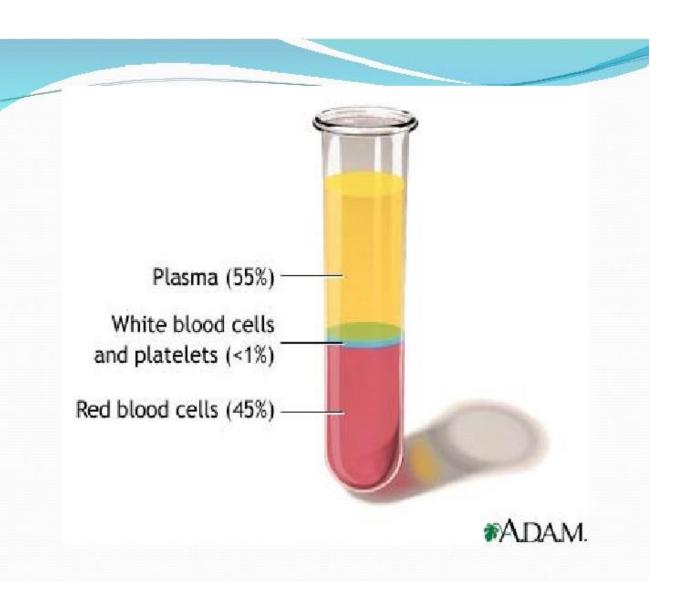
# Components of blood

Separation of components

- -Collect blood samples in to a tube and centrifuge it
- -Cells go to bottom
- -Liquid component remains on top of the cell coloumn

# Components of blood

- Red cells 45%
- Plasma 55%
- White cells less than 1%
- Plasma containing clotting factors
- Removal of fibrin and clotting factors from plasma results serum



- Packed cell volume \_ haematocrit (PCV-Hct)
  - Height of red cell column as a percentage of total column
  - Done by using Winthrob tube and anticogulted blood
- Rate depends on
  - Number o red cells in plasma
  - Negative charge on red cells
  - Presence of ibrin and rouleaux formation

#### **ESR**

- Erythrocyte sedimentaion rate
- is the rate at which red blood cells sediment in a period of one hour
- Done using anticoagulated blood and wetergen tube





# Haematopoiesis

Dr. K. Medagoda

## Functions of Blood

- Blood performs a number of functions dealing with:
  - Substance distribution
  - Regulation of blood levels of particular substances
  - Body protection

#### Blood Functions: Distribution

#### • Blood transports:

- Oxygen from the lungs and nutrients from the digestive tract
- Metabolic wastes from cells to the lungs and kidneys for elimination
- Hormones from endocrine glands to target organs

# Blood Functions: Regulation

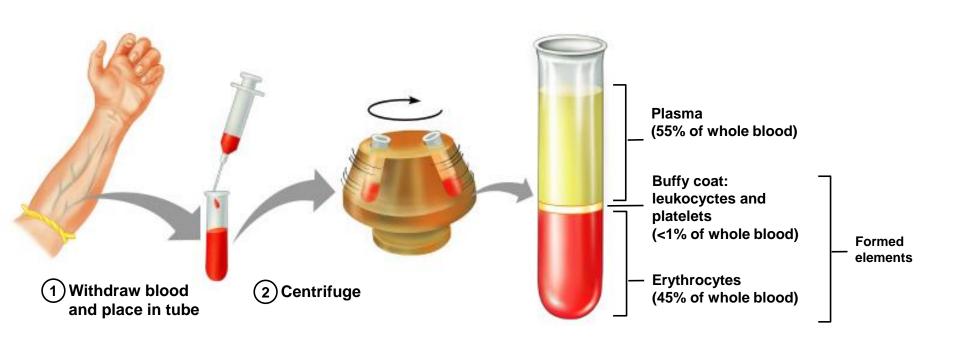
#### • Blood maintains:

- Appropriate body temperature by absorbing and distributing heat to other parts of the body
- Normal pH in body tissues using buffer systems
- Adequate fluid volume in the circulatory system

### **Blood Functions: Protection**

- Blood prevents blood loss by:
  - Activating plasma proteins and platelets
  - Initiating clot formation when a vessel is broken
- Blood prevents infection by:
  - Synthesizing and utilizing antibodies
  - Activating complement proteins
  - Activating WBCs to defend the body against foreign invaders

# Components of Whole Blood



#### • Hematocrit

• Males: 47% ± 5%

• Females: 42% ± 5%

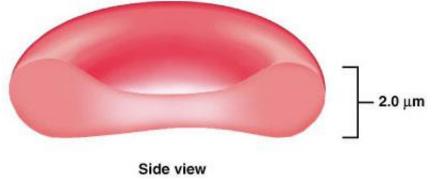
### Formed elements in blood

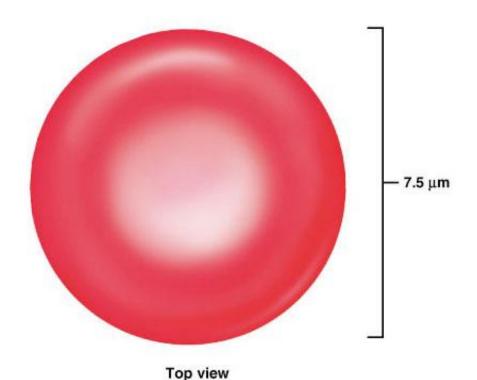
- Formed elements comprise 45% of blood
- Erythrocytes, leukocytes, and platelets make up the formed elements
  - Only WBCs are complete cells
  - RBCs have no nuclei or organelles, and platelets are just cell fragments
- Most formed elements survive in the bloodstream for only a few days
- Most blood cells do not divide but are renewed by cells in bone marrow

# Erythrocytes (RBCs)

- Biconcave disc
  - Folding increases surface area (30% more surface area)
  - Plasma membrane contains *spectrin* 
    - Give erythrocytes their flexibility
- Anucleate, no centrioles, no organelles
  - End result no cell division
  - No mitochondria means they generate ATP anaerobically
    - Prevents consumption of O<sub>2</sub> being transported
- Filled with hemoglobin (Hb) 97% of cell contents
  - Hb functions in gas transport
    - $Hb + O_2 \longleftrightarrow HbO_2$  (oxyhemoglobin)
- Most numerous of the formed elements
  - Females: 4.3–5.2 million cells/cubic millimeter
  - Males: 5.2–5.8 million cells/cubic millimeter

# Erythrocytes (RBCs)





## Fate and Destruction of Erythrocytes

- The life span of an erythrocyte is 100–120 days
- Old erythrocytes become rigid and fragile, and their hemoglobin begins to degenerate
- Dying erythrocytes are engulfed by macrophages
- Heme and globin are separated
  - Iron is removed from the heme and salvaged for reuse
    - Stored as hemosiderin or ferritin in tissues
    - Transported in plasma by beta-globulins as *transferrin*

# Haematopoiesis

- Formation of red cells, white cells and platelets
- Occurs in the bone marrow
  - -Medullary erythropoiesis
- Haematopoiesis blood cell formation
  - -Erythropoiesis formation of red cells
  - -Granulopoiesis- formation of white cells

## Erythropoiesis – formation of red cells

- Occurs in the red bone marrow
  - Axial skeleton and girdles
  - Epiphyses of the humerus and femur
  - Marrow contains immature erythrocytes
  - Composed of reticular connective tissue

- Extra-medullary erythropoiesis
  - Formation of blood cells in the liver and spleen
  - Normally in fetal life
  - Abnormal in adult life
- Active marrow-red marrow
- Inactive marrow yellow marrow

- Bone marrow has
  - Myeloid series white cells producing precursors
  - erythroid series maturing red cells

- Normally
  - 75% of the marrow belongs to myeloid series
  - 25% erythroid series
- The difference reflects life span of the respective cells

- In children the marrow cavities of all bones actively produced blood cells
- By age 20 the marrow cavities of long bones become inactive.
  - Except humerus and femur

# Erythropoiesis- cell series

 Multipotent uncommitted stem cells committed stem cells

Early erythroblast

Pronormoblast

Early normoblast

Late normoblast

Reticuloyte

Erythrocyte

# Erythropoiesis- cell series

- Multipotent uncommitted stem cells
  - Can differentiate in to committed stem cells
- Committed stem cells
  - Differentiate in to various cells types
    - Erythroid cells
    - Granulocytes
    - Monoytes
    - Megakaryocytes

#### Normal red cell maturation involves

- 1. Successive increase in number of cells
- 2. Diminution of cell size
- 3. Reduction of nuclear size and condensation of chromatin
- 4. Extrusion of nucleus
- 5. Loss of cytoplasmic RNA
- 6. concurrent production of haemoglobin

# Erythropoiesis- cell series

- Early erythroblast
  - Finely depressed chromatin and basophilic cytoplasm
- Pronormoblast
  - The earliest morphologically recognizable precursor of red cell series
    - Basophilic cytoplasm
    - Early condensation of chromatin

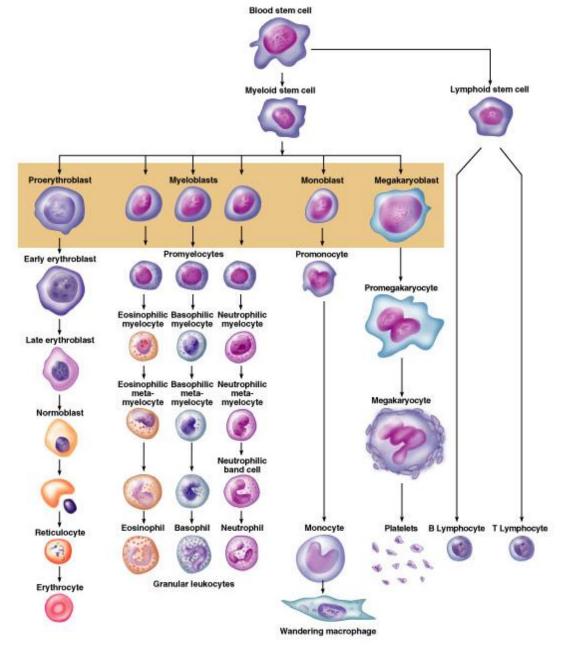
# Erythropoiesis- cell series

- Early normoblast
  - Basophilic cytoplasm
  - Well marked condensation of chromatin
- Late normoblast
  - Haemoglobinisation
  - Marked nuclear condensation
  - Shred the nucleus to become a reticuloyte
- Reticuloyte
  - Immature red cell following extrusion of nucleus
  - Maturation takes 48-72 hours
- Erythrocyte mature red cell

- Reticuloyte
  - Immature red cell following extrusion of nucleus
  - Maturation takes 48-72 hours
  - Final 24hours in the circulation
- Contains
  - Polyribosomes, RNA and mitochondria
  - Gives polychromasia with Romanowsky staining

- Reticulocytes make up about 1 -2 % of all circulating erythrocytes
  - Reduced in marrow failure
  - Increased in when there is increased red cell production

#### Stages of Differentiation of Blood Cells



# Erythropoiesis

- The developmental pathway consists of three phases
  - − Phase 1 − ribosome synthesis in early erythroblasts
  - Phase 2 hemoglobin accumulation in late erythroblasts and normoblasts
  - Phase 3 ejection of the nucleus from normoblasts and formation of reticulocytes
- Reticulocytes then become mature erythrocytes
  - Reticulocytes make up about 1 -2 % of all circulating erythrocytes

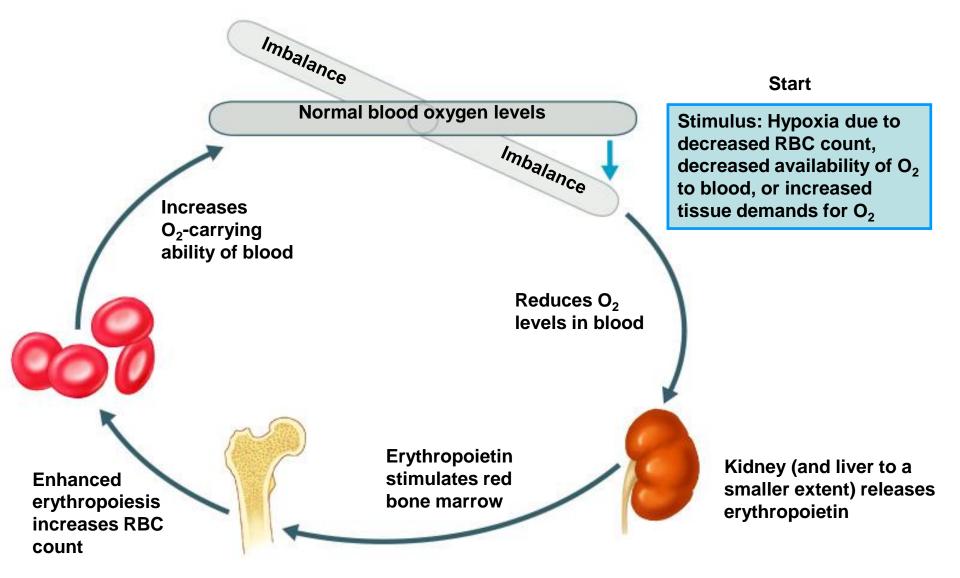
# Regulation and Requirements for Erythropoiesis

- Circulating erythrocytes the number remains constant and reflects a balance between RBC production and destruction
  - Too few red blood cells leads to tissue hypoxia
  - Too many red blood cells causes undesirable blood viscosity
- Erythropoiesis is hormonally controlled and depends on adequate supplies of iron, amino acids, and B vitamins

# Hormonal Control of Erythropoiesis

- Erythropoietin
  - A glycoprotein
  - Released from kidney and the liver
- Erythropoietin (EPO) release is triggered by:
  - Hypoxia due to decreased RBCs
  - Decreased oxygen availability
  - Increased tissue demand for oxygen
- Enhanced erythropoiesis increases the:
  - RBC count in circulating blood
  - Oxygen carrying ability of the blood

## Erythropoietin Mechanism



# Requirements for Erythropoiesis

- Erythropoiesis requires:
  - Proteins, lipids, and carbohydrates
  - Iron, vitamin  $B_{12}$ , and folic acid
  - Trace metals cobolt
  - Hormones androgens and thyroxine
  - interleukins
- The body stores iron in Hb (65%), the liver, spleen, and bone marrow
- Intracellular iron is stored in protein-iron complexes such as ferritin and hemosiderin
- Circulating iron is loosely bound to the transport protein transferrin