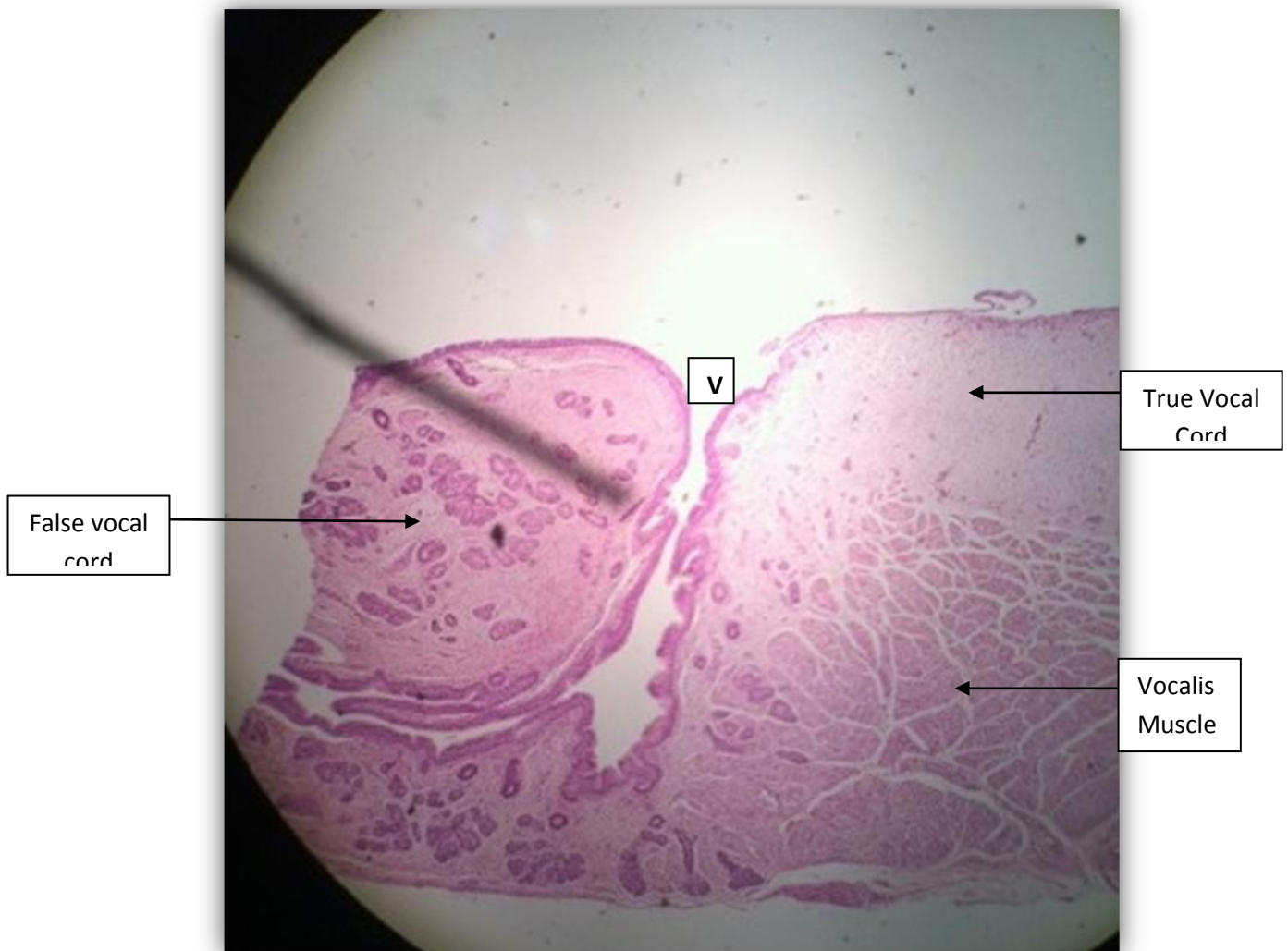


Upper Respiratory Histology

- Today we'll discuss the histology of larynx, trachea, primary, secondary, and tertiary bronchus.

*First: The Larynx:

-The picture below represents a section in the larynx, the land mark and the first thing you look for is the **ventricle**. You can see at 3 o'clock is the true vocal cord, at 9 o'clock is the false vocal cord, at 6 o'clock there's hyaline cartilage, and we can also see vocal ligament and vocalis muscle.



The larynx is a box of cartilage which contains true and false vocal cords separated by ventricle, and lined by respiratory epithelium.

1) Ventricle: is a space between true and false vocal cords, its lining is respiratory epithelium.

2) True and false vocal cord:

*How to differentiate between them??

False >> -contain glands
-respiratory epithelium.

True >> -No glands
-epithelium is stratified squamous non-keratinized..Why non-keratinized? Because we use our vocal cords alot so the epithelium is susceptible to injury and must be regenerated by mitosis when that happens.
-Vocal ligament for vibration of true vocal cords.
-Vocalis muscle is a striated (skeletal) muscle.

Respiratory Epithelium:

is a pseudostratified ciliated columnar epithelium, usually rests on a thick basement membrane, and has several cell types; columnar, basal, and goblet cells

Now for a closer look:

*This picture represents **false vocal cord**, u can see the abundant glands, these glands secrete seromucus secretions for lubrication of true vocal cords.

GLAND

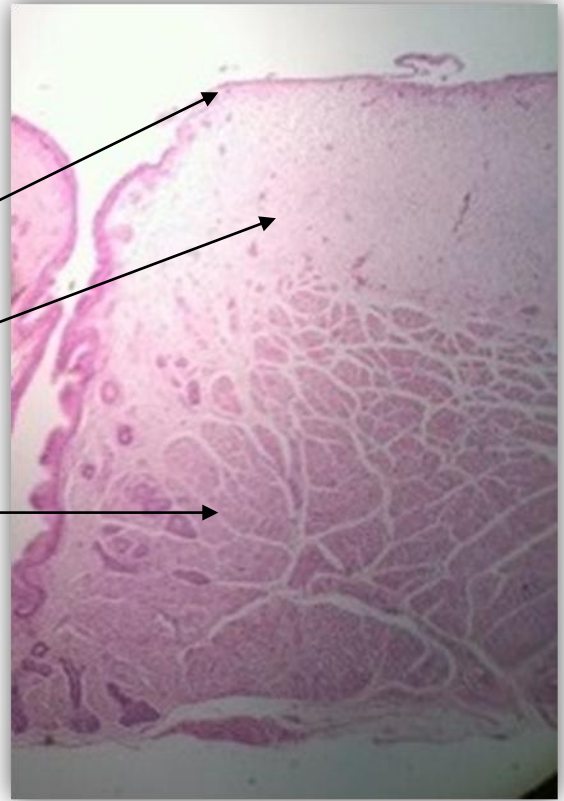
Capillary blood vessel in C.T



*This picture represents the **true vocal cord**, Layers from above to below are:

1. Epithelium: stratified squamous non-keratinized.
2. C.T and elastic fibers (vocal ligament).
3. Vocalis muscle
4. Hyaline cartilage

*Notice: there's no submucosa, no lymphatic vessels, so no edema in true vocal cord.



*This picture shows a transverse section in vocalis muscle, notice peripheral nuclei.



*Notice hyaline cartilage (chondrocyte inside lacunae, basophilic, form a nest).

*At the surface is the pericondrium which contains chondroblast cells.



****NOTE:** Glands are only absent in true cord so when glands reappear and epithelium becomes respiratory again, this is the infraglottic space below true cord.

*Second: **Trachea:**

-Trachea lies anterior to esophagus.

Hyaline cartilage
is C-shaped,
always open

Mucosa is star shaped,
collapsed, opens only
when pharynx get down

Note: as we move distally...

- Goblet cells and Glands become less
- Smooth muscles become smaller and more
- Lymphocytes aggregate into lymphatic nodule

-Posteriorly between trachea and esophagus cartilage is replaced by **Trachialis muscle** (smooth muscle, innervated by ANS, spindle in shape, central nuclei).

- 4 Layers:

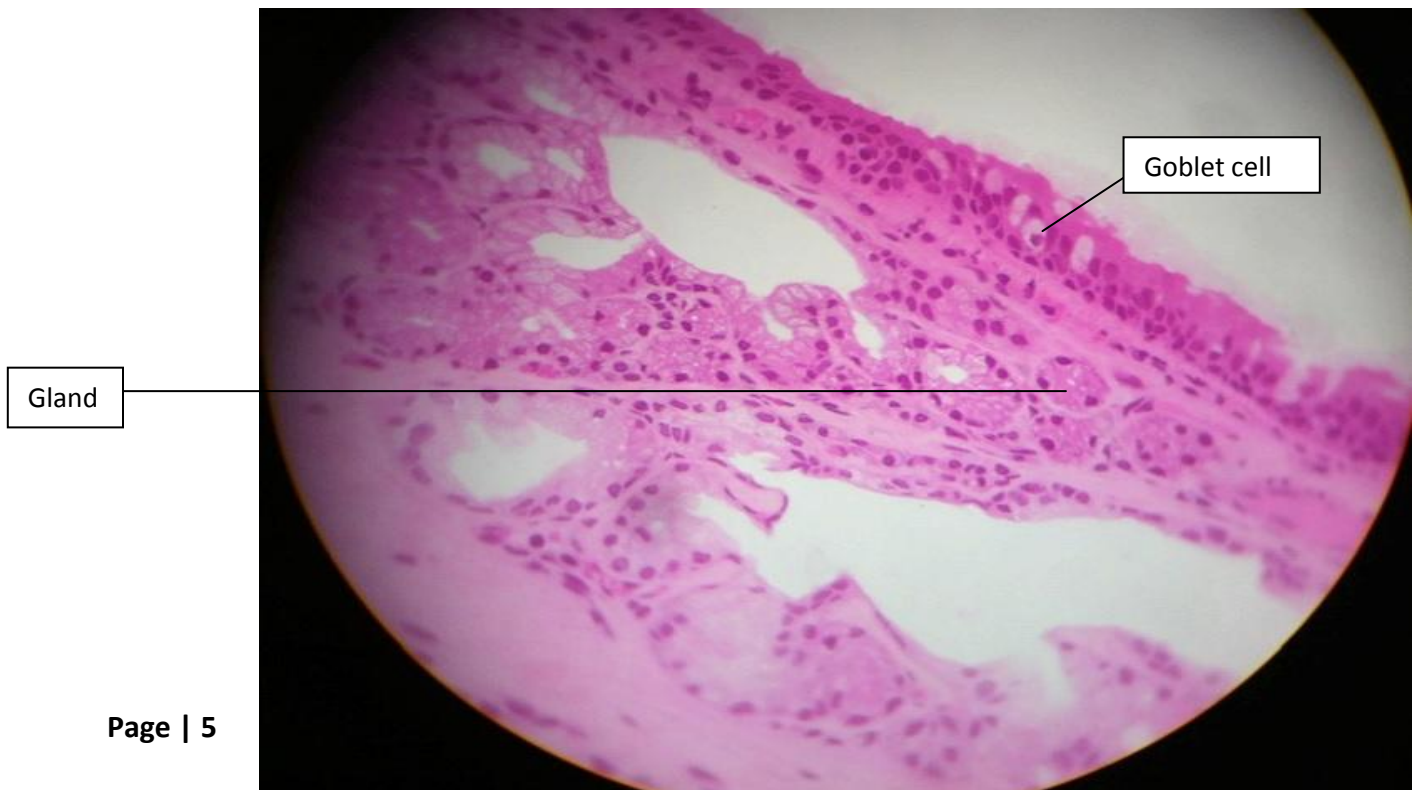
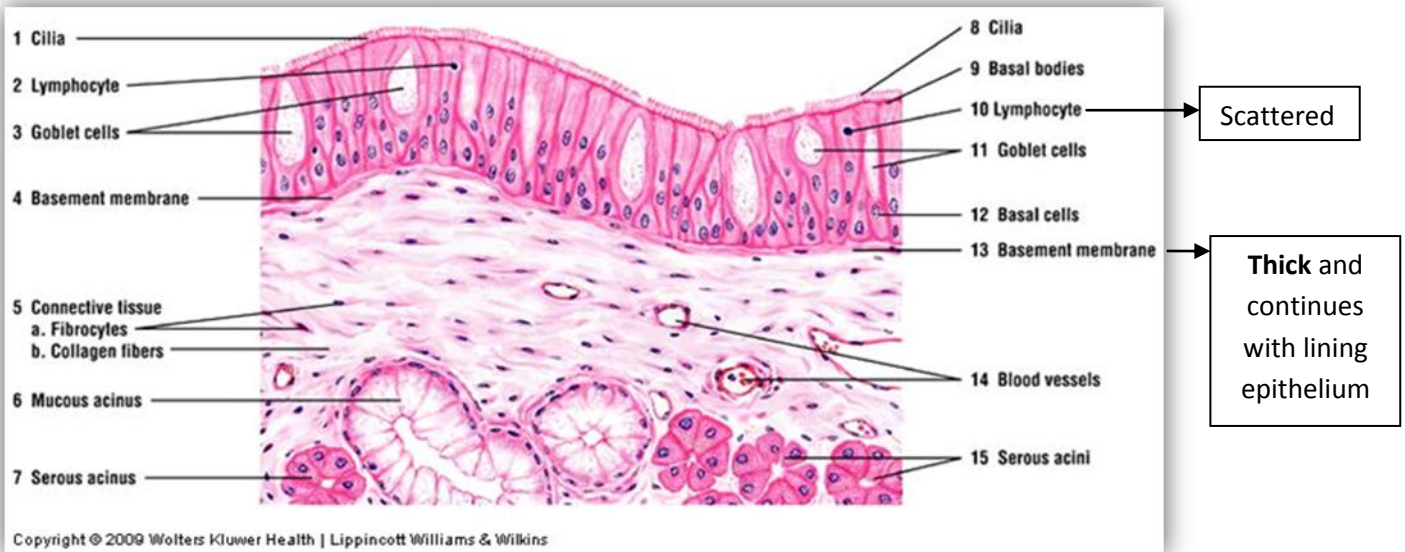
Mucosa > Submucosa > Supportive layer > Adventitia

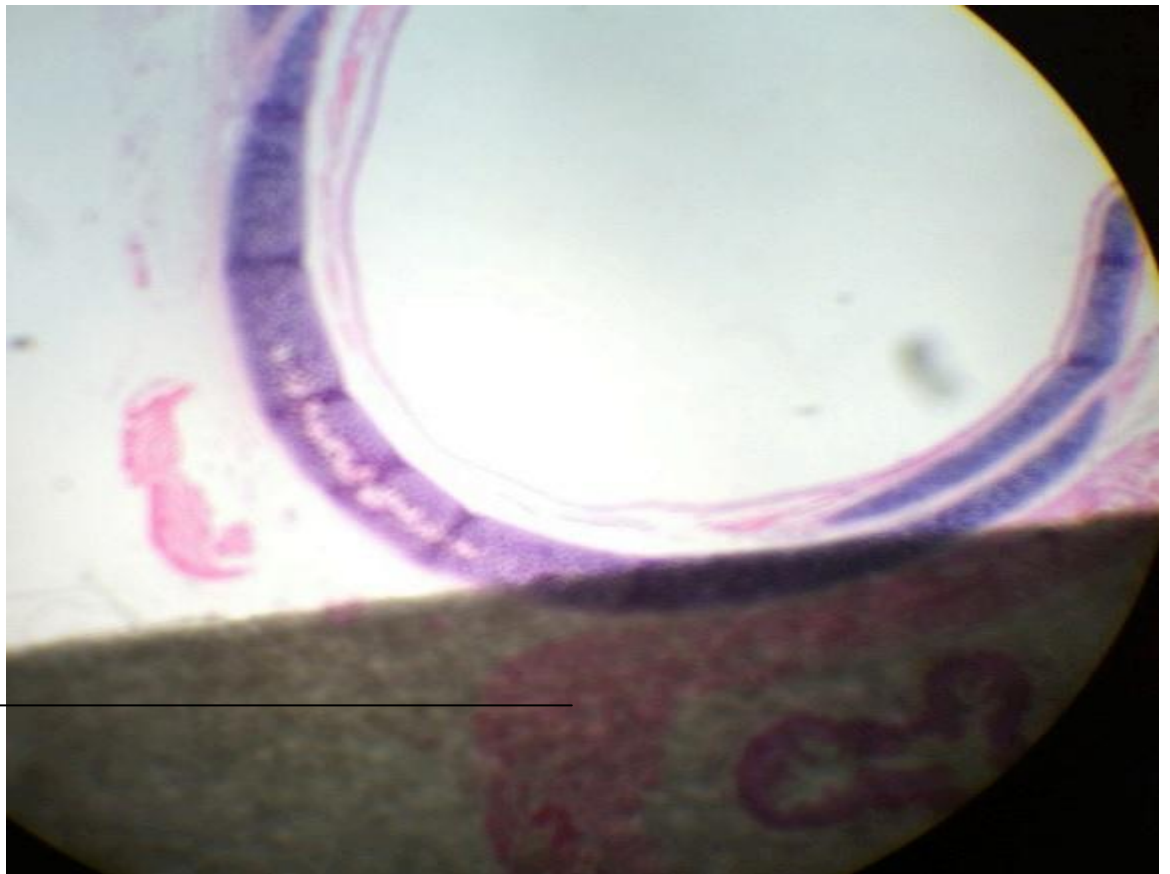
-Lining Epithelium:
Pseudostratified
ciliated columnar.
-**Goblet cells: less.**

-Blood vessels
-**glands: less**

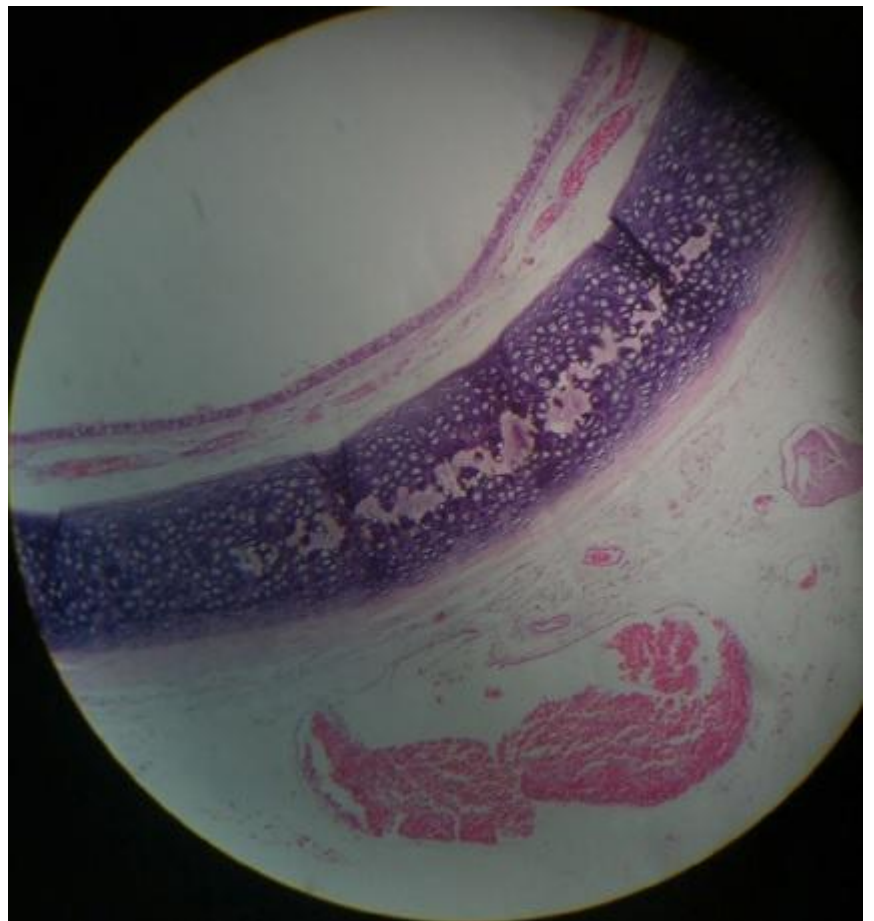
Hyaline Cartilage
-perichondrium and
chondroblast
-chondrocyte nests

Connective
tissue





Esophagus



Trachea

*Third: **Primary Extrapulmonary Bronchus:**

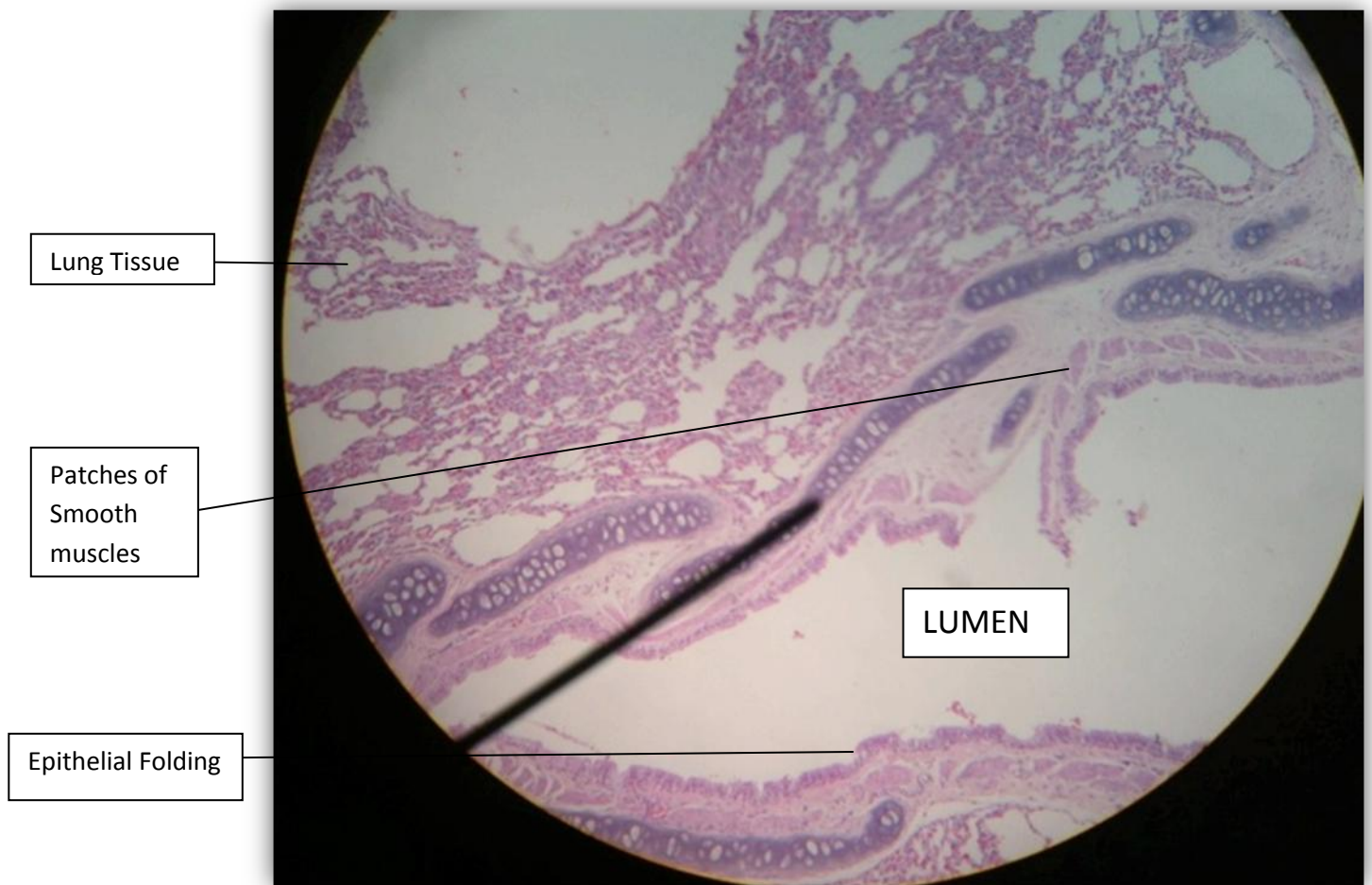
Extrapulmonary → No lung tissue yet

- Exactly the same as trachea except that Hyaline cartilage is now pieces with small spaces in between instead of C-shaped cartilage in trachea.



*Forth: **Secondary Intrapulmonary Bronchus:**

- Intrapulmonary → Lung tissue appears.
- Respiratory epithelium starts to have foldings (because of less cartilage and increased smooth muscles and elastic fibers).
- Hyaline Cartilage: Plates with wider spaces in between.
- Lymphocytes start to aggregate into lymphatic nodule.
- Patches of smooth muscles appear around lumen.
- Glands and Goblet cells fewer.

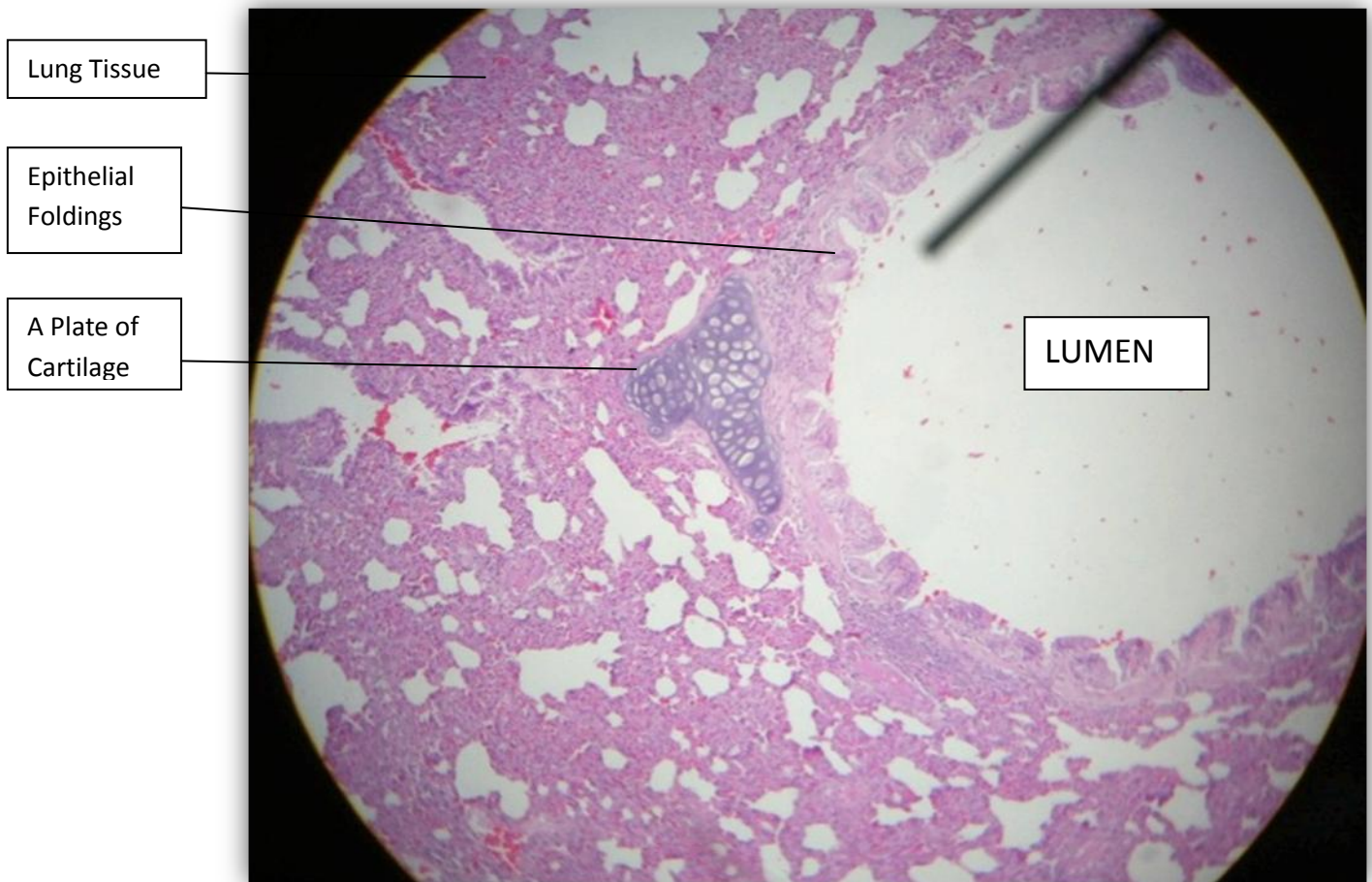


***Fifth: Tertiary Intrapulmonary Bronchus:**

- Increase folding in respiratory epithelium.
- Hyaline cartilage: replaced by smooth muscles and elastic fibers, only 1 or 2 plates remain.
- Goblet cells and seromucus Glands: Very Rare.
- Smooth muscles: increased and continuous with lumen.
- Lymphatic nodules present.

** Ofcourse as we move distally, bronchus diameter become less:

Primary > Secondary > Tertiary



***REMEMBER:**

Goblet cell > Mucus secretions

Glands > Seromucus secretions

Cartilage appear
thin and faint in
plastic sections
and thick in
paraffin sections.

*Please refer to slides to see the rest of them.