



# Pathology

3<sup>rd</sup> Stage

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2024-2025

Lecture 4

## Mechanisms of cell injury and cell death

**2. Disturbances in calcium homeostasis:** Injury (specially by **ischemia** and certain **toxins**) can increase intracellular calcium concentration, causing:

**1. Activation of enzymes** (**phospholipase** causing membrane damage, **protease** breaks down membrane and cytoskeleton proteins, **endonuclease** causing DNA and chromatin fragmentation and **ATPase** (adenosine triphosphatase) speeding ATP depletion).

**2. Apoptosis** initiation (by direct activation of **caspases** or increasing **mitochondrial permeability**).

## 3. Membrane Damage

\*Is a **consistent feature** of **most** forms of cell injury that end in necrosis

\*Several mechanisms may contribute to membrane damage:

**1. ROS production** **2. Decreased phospholipid synthesis** (due to decrease ATP production) **3. Increased phospholipid breakdown** (probably due to activation of phospholipase) **4. Cytoskeletal abnormalities** (proteases activation)

\*Membrane damage may affect all cellular membranes:

**1. Mitochondria membrane damage** leading to **decreased ATP** generation and release of proteins that trigger **apoptosis**.

**2. Plasma membrane damage** results in loss of osmotic balance and **influx of fluids** and ions, as well as **loss of cellular contents**.

**3. Injury to lysosomal membranes** results in leakage of their enzymes into the cytoplasm and activation of **lysosomal hydrolases** (**RNases**, **DNases**, **proteases**, **phosphatases** and **glucosidases**, which degrade **RNA**, **DNA**, **proteins**, **phosphoproteins**, and **glycogen**, respectively).

## 4. Damage to DNA and proteins

Cells have a repair mechanism to correct DNA damage. If the damage is too severe to be corrected i.e. DNA damage is beyond repair, cell initiates **apoptosis**

(abnormal DNA has the potential to induce **malignant transformation**). Similar reaction is triggered by accumulation of **improperly folded protein**.

**Hypoxia and Ischemia:** Persistent or severe hypoxia and ischemia eventually lead to **failure of ATP** generation, **mitochondrial damage** and **ROS** accumulation.

ATP depletion results in:

- Reduced activity of plasma membrane ATP-dependent pumps causing **cell swelling**, **ER dilation** and **influx of  $Ca^{2+}$** .
- Compensatory increase in anaerobic glycolysis leads to lactic acid accumulation, decreased intracellular pH and **decreased activity of many enzymes**.
- **Prolonged** or **worsening** depletion of ATP causes structural disruption of the protein synthetic apparatus with **reduction in protein synthesis**.
- Finally, there is **irreversible** damage to mitochondrial and lysosomal membranes and necrosis occurs.

• **Apoptosis** is a **pathway of cell death** in which cells activate enzymes that degrade the cells' own nuclear DNA and nuclear and cytoplasmic proteins (**programmed cell death {suicide program}**). Fragments of the apoptotic cells **break off** (apoptosis=falling off).

\*The **plasma membrane** of the **apoptotic** cell remains **intact**, but is altered in such a way that the fragments (apoptotic bodies) will undergo rapid consumption by phagocytes, so dead cells are rapidly cleared before the leakage of cellular contents thus, apoptosis **does not** produce an **inflammatory** reaction. Apoptosis is an **ATP dependent** process.

**Causes of Apoptosis:** Apoptosis could be **\*physiological** or **pathological**.

**\*Physiological apoptosis** occurs in many normal situations (to eliminate cells no longer needed and to maintain constant number of cells in tissues)

1. Programmed destruction of cells during **embryogenesis** (during normal development of an organism, some cells die and are replaced by new ones).
2. Involution of hormone-dependent tissues on **hormone withdrawal**, such as endometrial cell breakdown during the menstrual cycle.

3. Cell loss in **proliferating cell populations** (e.g., intestinal epithelium) to maintain a constant cell number.
4. Elimination of cells that have **served their useful purpose**, e.g. neutrophils in acute inflammation and lymphocytes at end of the immune response.
5. Elimination of potentially harmful lymphocytes to **prevent reactions against the body's own tissues** (autoimmune diseases).

**\*Pathological apoptosis** (when cells are damaged beyond repair).

1. Severe DNA damage, e.g. after exposure to radiation and cytotoxic drugs, and **repair mechanism cannot** repair the injury
2. The accumulation of **misfolded proteins** e.g. due to mutations in the encoding genes
3. Certain infections, particularly **some viruses**, in which apoptosis of the infected cell is induced by the virus (human immunodeficiency virus), or by the host immune response (e.g. viral hepatitis).

### **Mechanisms of Apoptosis**

\*The main event in apoptosis is activation of enzymes called **caspases** which eventually activate enzymes that degrade the cells' proteins and nucleus.

\*Two distinct pathways end in caspase activation: **the mitochondrial (intrinsic)** pathway and the **death receptor (extrinsic)** pathway.

### **Morphology of apoptotic cells**

Apoptotic cells form **shrunk masses** with intensely **eosinophilic cytoplasm** and condensed **chromatin**. The nucleus eventually undergoes karyorrhexis. The apoptotic cells fragment into **apoptotic bodies** that are rapidly phagocytosed **without** provoking an **inflammatory** response

**GOOD LUCK**