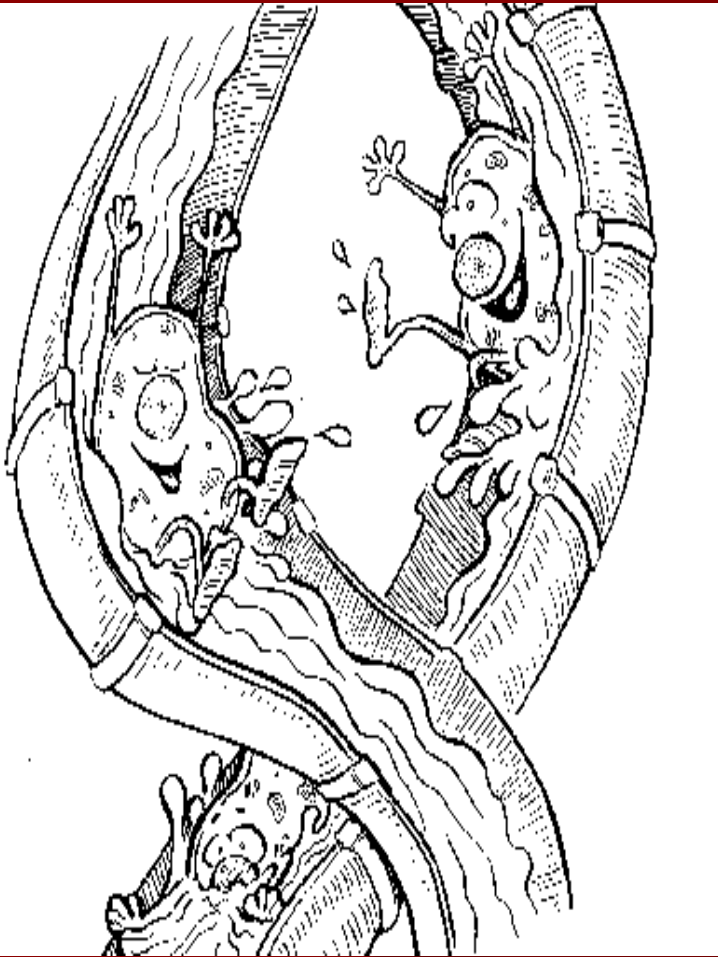


Attention

- Don't manipulate the light microscopes, please.
- They are prepared for your work following presentation.
- You'll receive an instruction how to use the LM and how to study blood smears.

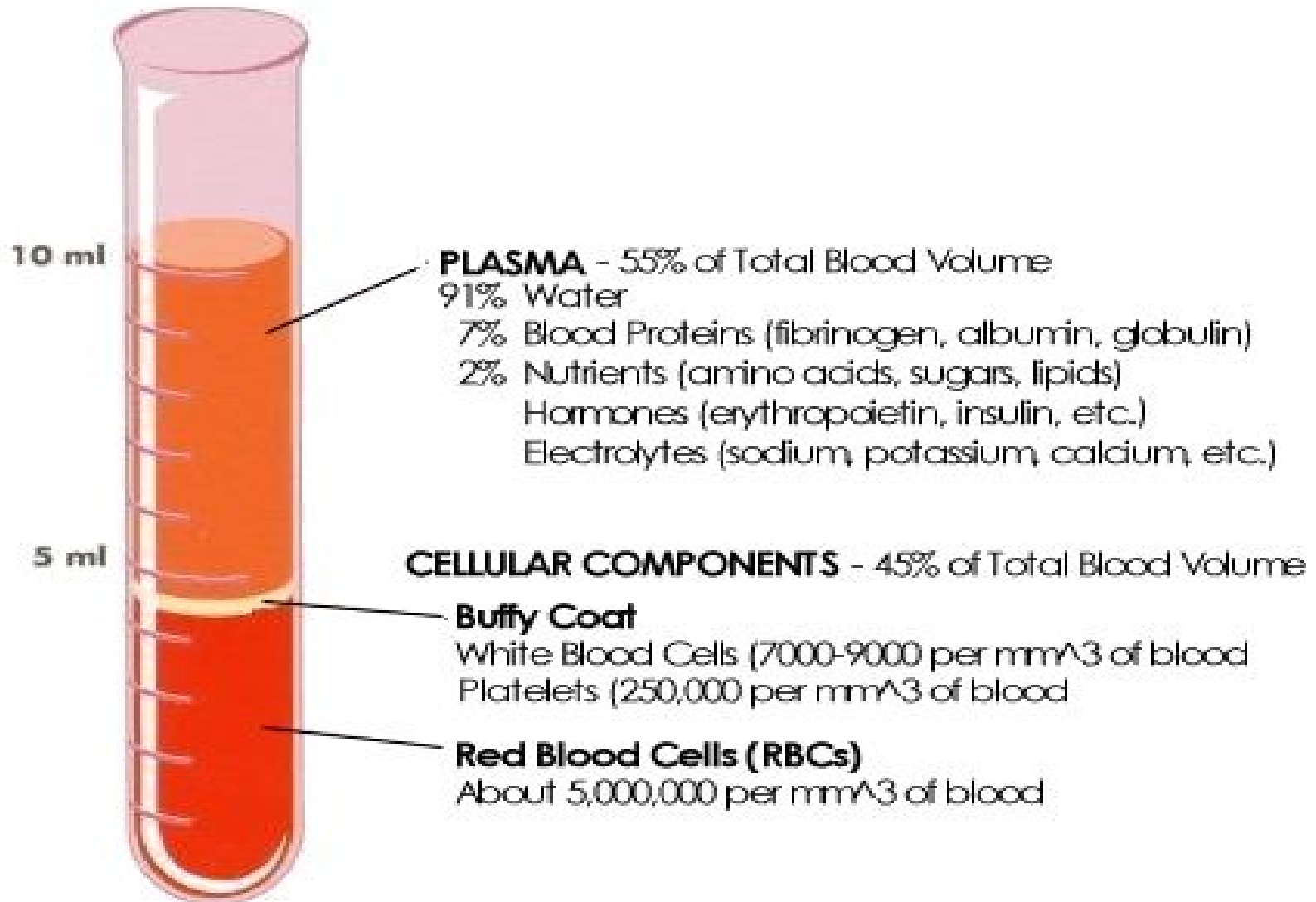


Blood

Plasma ■ Blood cells

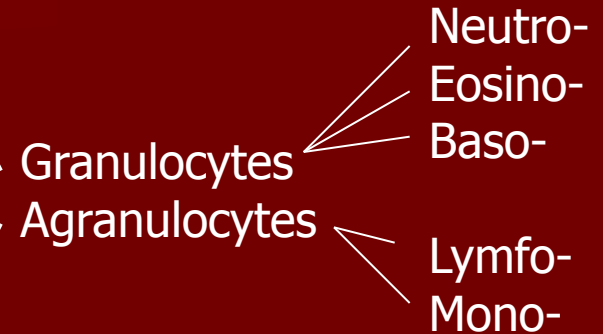
Hematocrit:

the volume of blood cells per unit volume of blood

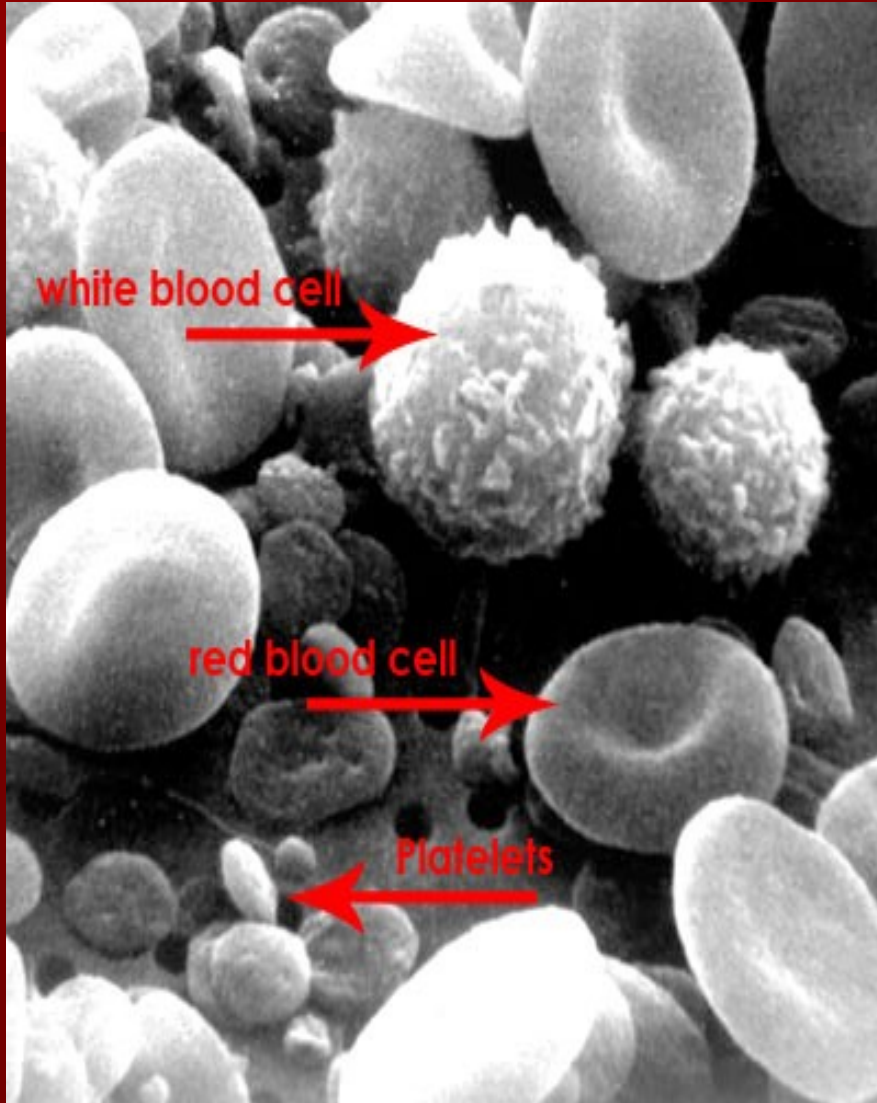


Blood cells (formed elements)

- Red blood cells – **erythrocytes**
- White blood cells – **leukocytes**
- Platelets – **thrombocytes**



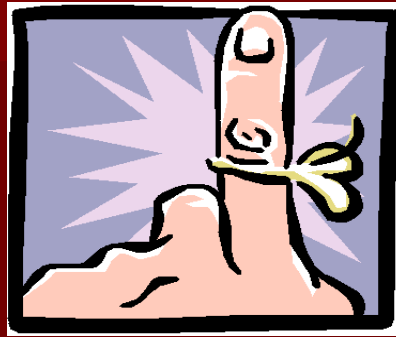
REM



TEM




REMEMBER!



- Erythrocytes: 4 – 6 millions/ 1 of blood
- Leukocytes: 5,000 – 9,000 / 1
- Thrombocytes: 150,000 – 250,000/ 1

ERYTHROCYTES

- 4 – 6 million/ μl
- Shape: biconcave disc,  dumble-shaped (*cross section*)
- Size: 7.4 μm in diameter (= normocyte)
- Structure: plasmalemma, cytoplasm + hemoglobin 33 %
absence of the nucleus and cell organelles
- Lifespan: 120 days

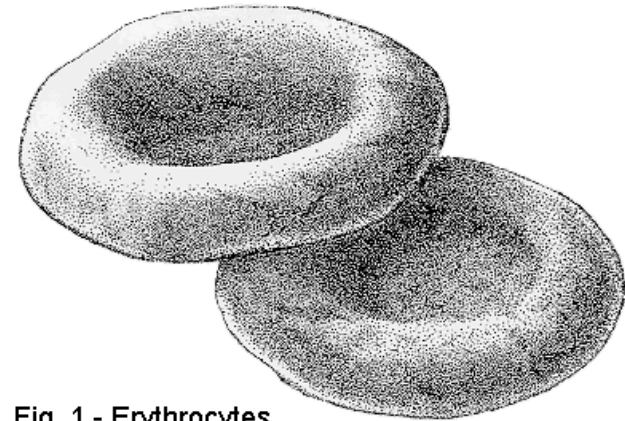
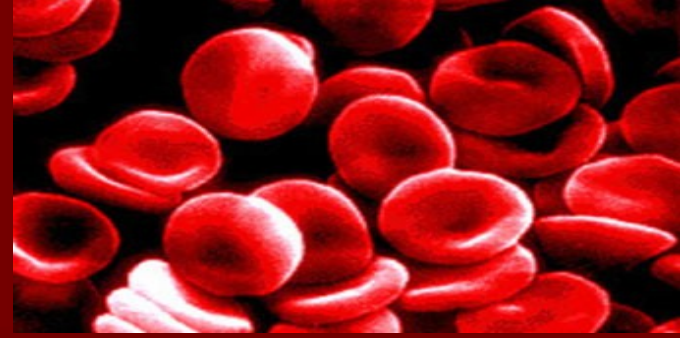
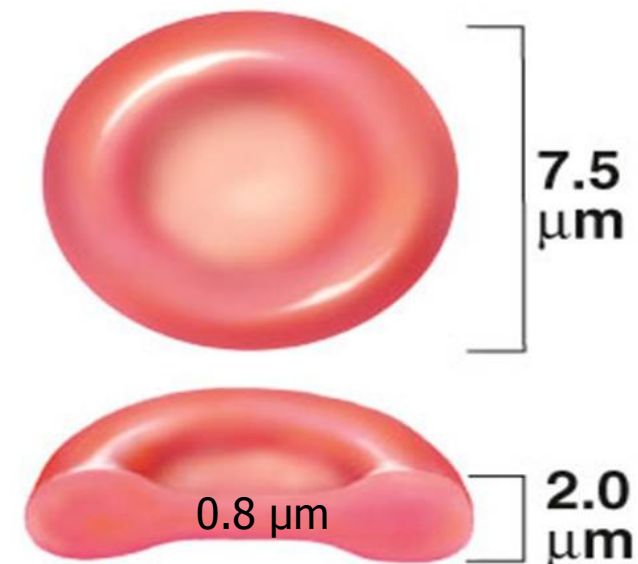


Fig. 1 - Erythrocytes



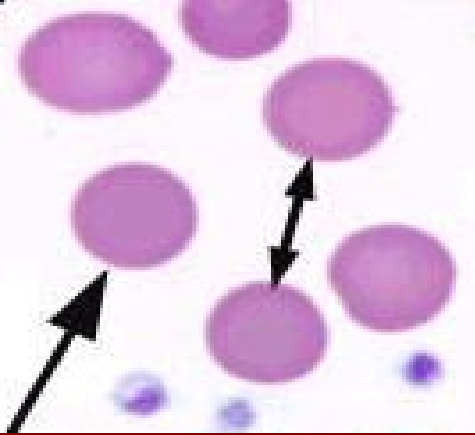
<Important terms>

- **Polyglobulia** – *an increased number of ery*
- **Anemia** – *a decreased number of ery*

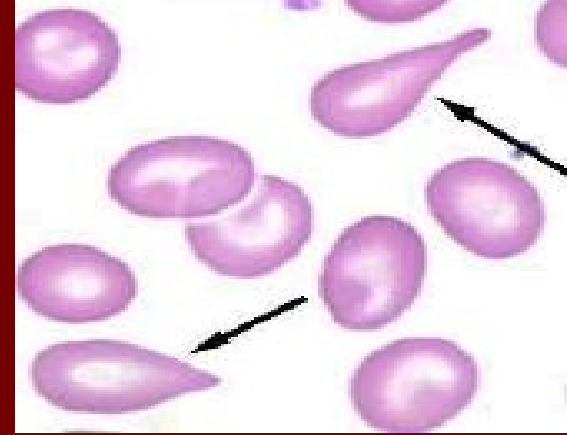
- **Poikilocytosis** – *an occurrence of variously shaped ery (spherocytes, elliptocytes, drepanocytes = sickle cells, etc.)*
- **Anisocytosis** – *an occurrence of variously sized ery (microcytes, macrocytes)*

poikilocytosis

drepanocytes



spherocytes

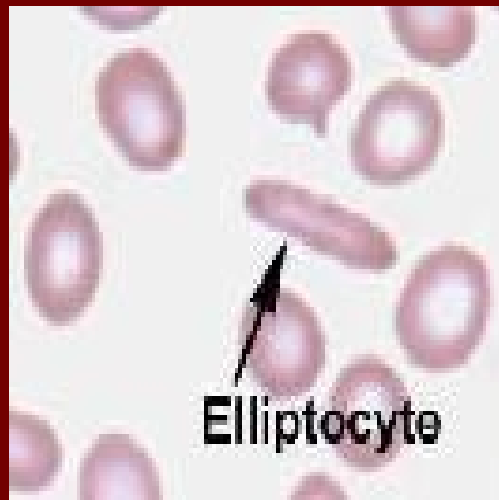


dacryocytes
(teardrop)



schistocytes
(keratocytes)

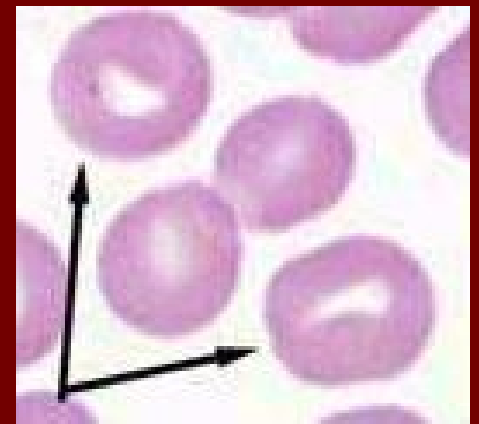
elliptocytes



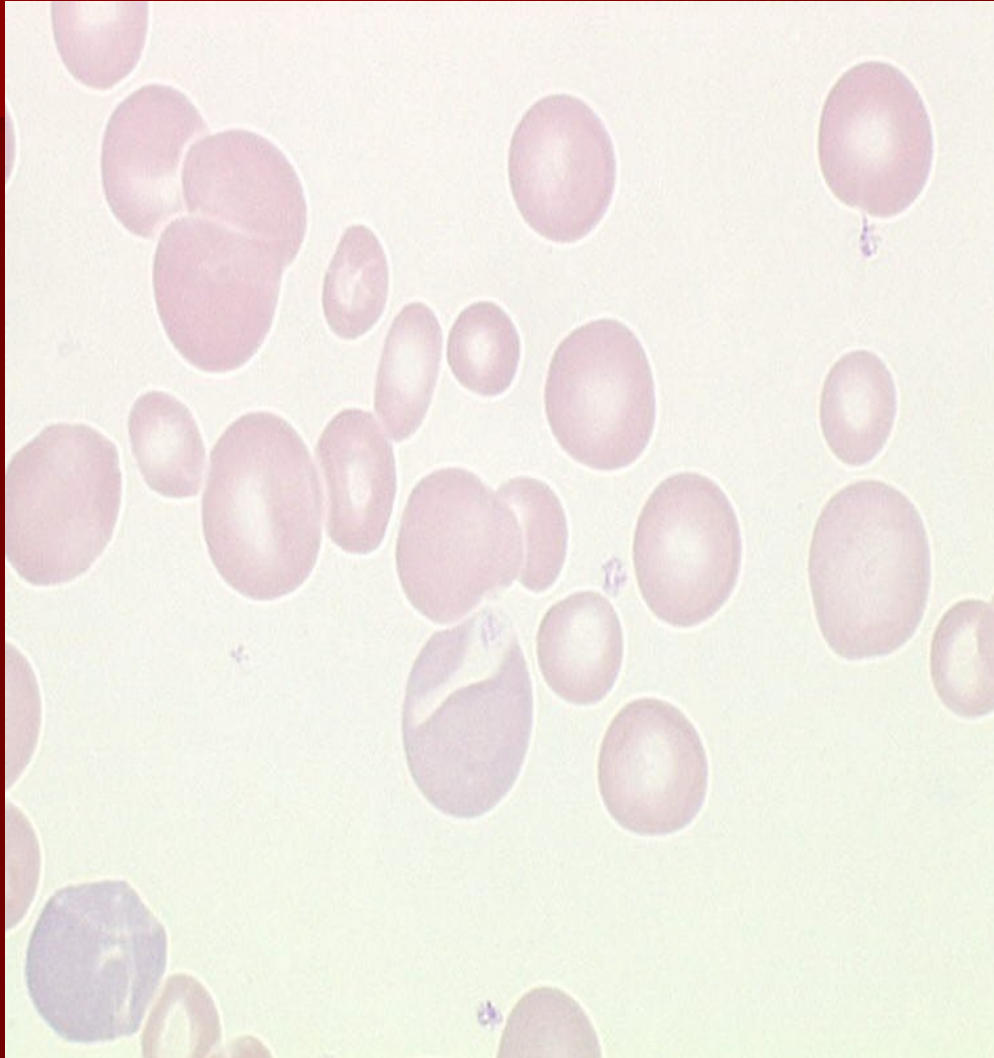
Elliptocyte



stomatocytes



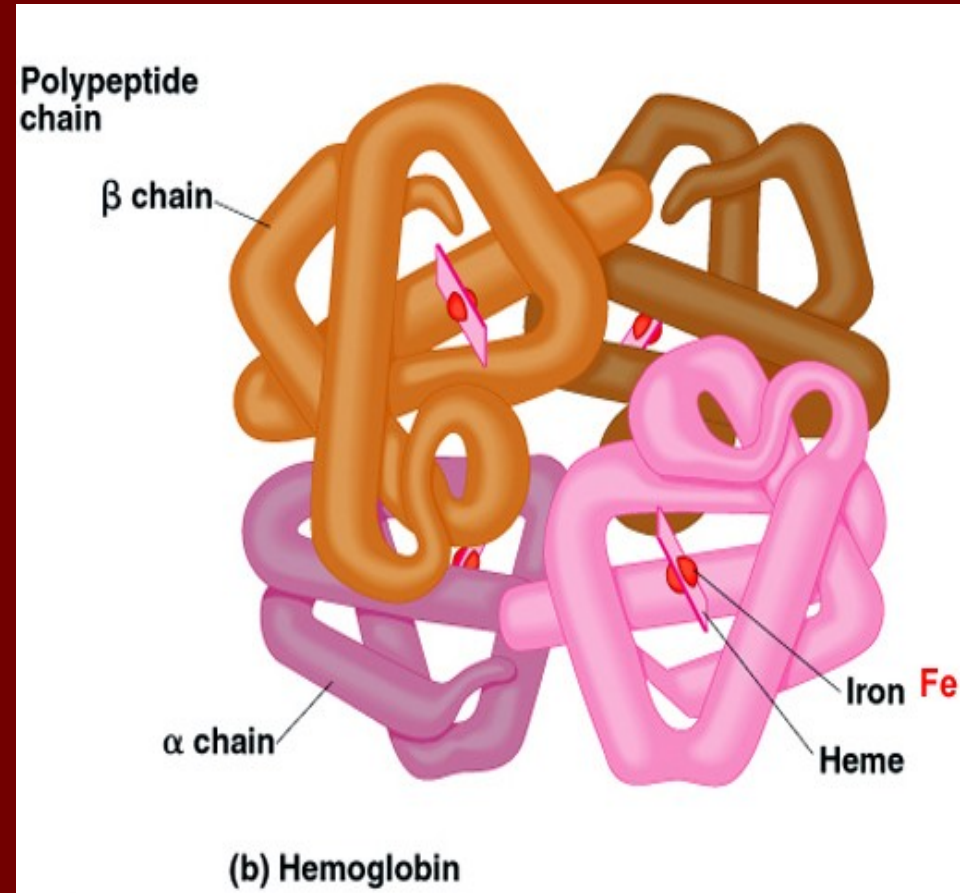
Anisocytosis



- Microcytes
■ $\leq 6.5 \mu\text{m}$
- Normocytes
■ $\approx 7.4 \mu\text{m}$
- Macrocytes
■ $\geq 8 \mu\text{m}$

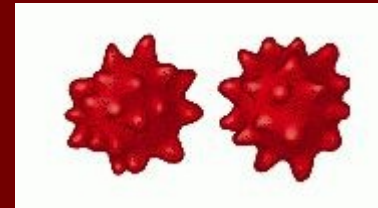
Hemoglobin

- a conjugated protein:
4 polypeptide chains + heme groups = protoporphyrin ring with ferrous iron (Fe^{2+})
- Hb F (fetal)
- Hb A (adult)
- normochromatic ery:
 32 ± 2 picogramms
(*hyper-*, *hypo-*)

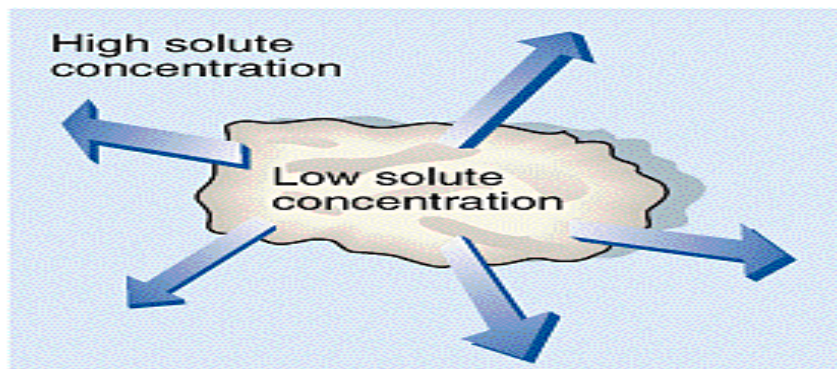
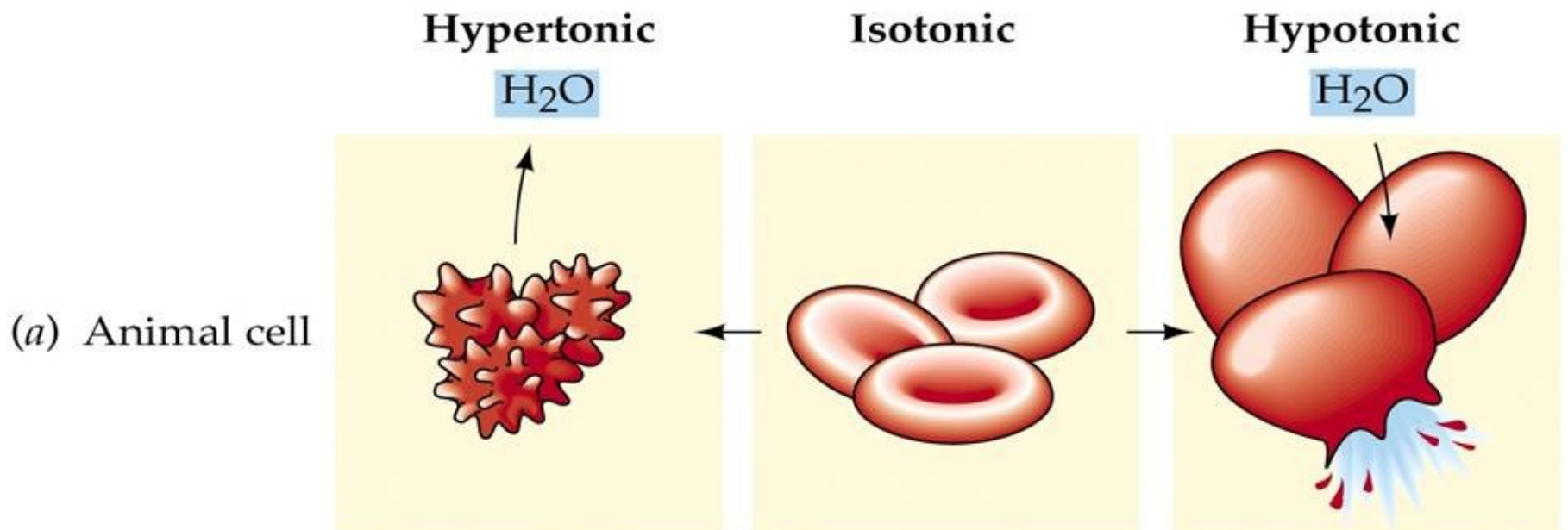


<Important terms>

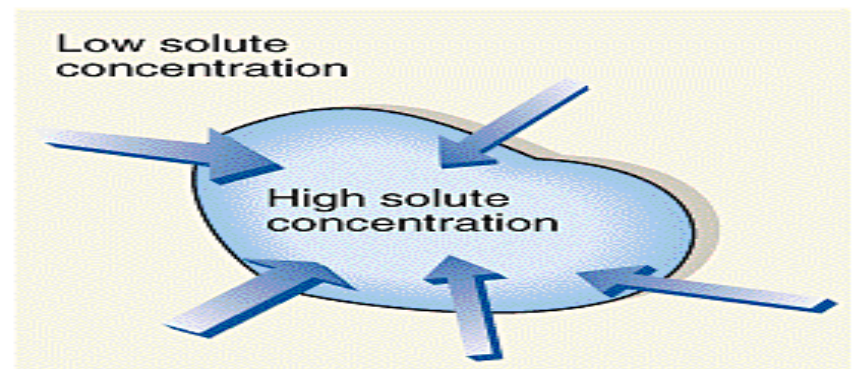
- Osmotic resistance and hemolysis
(osmotic pressure has a great effect on living cells, because their walls are semipermeable membrane)
- Isotonic conditions
- in hypertonic solution – ery shrink irregularly and become crenated
- in hypotonic solution – ery swell, their plasmalemma come to the rupture, Hb is released – **hemolysis** – (the rest of ery = ghost)



- (a) *crenation* is caused by **water** movement **out of** a cell in a *hypertonic* solution.
(b) *hemolysis* is caused by **water** movement **into** a cell in a *hypotonic* solution.

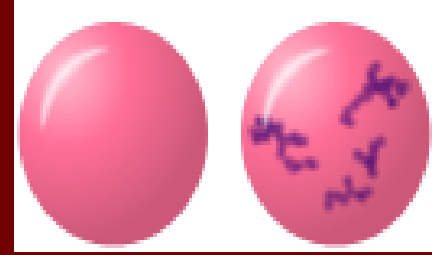


(a)



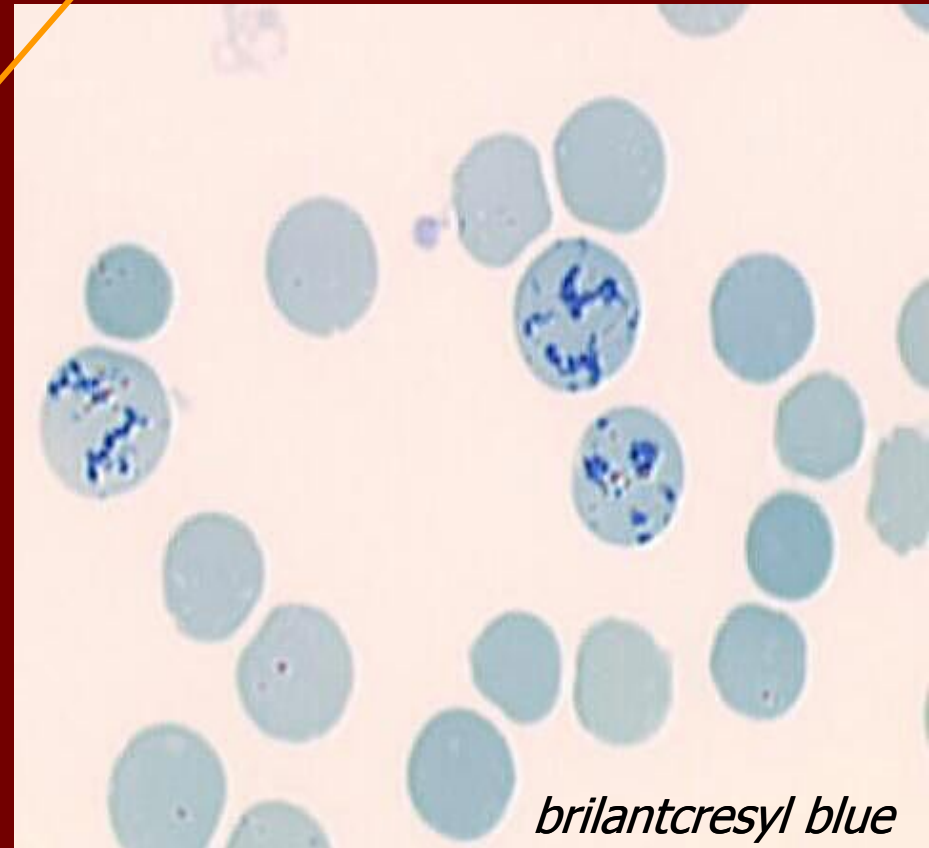
(b)

Reticulocytes



- Immature ery are released from the bone marrow into the peripheral blood (0.5 – 1.5 %)
- the rests of organelles – ribosomes, mitochondria
- maturation into ery during 24 hours

substantia reticulofilamentosa



brilantcresyl blue

Functions of ery

- transport of oxygen from the lungs
- transport of carbon dioxide from the tissues

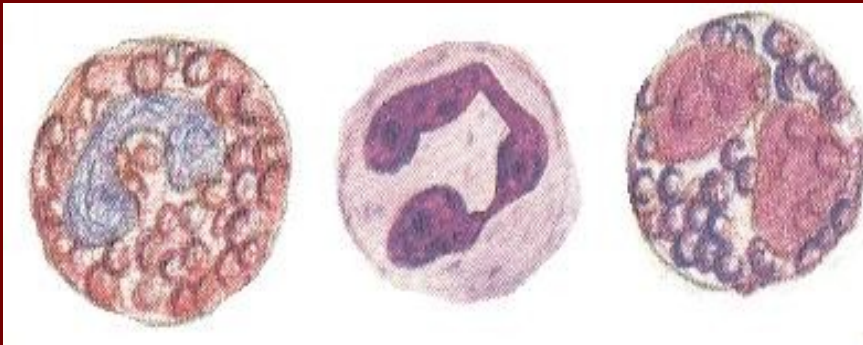
LEUKOCYTES

■ Granulocytes:

- neutrophils
- eosinophils
- basophils

General characteristic:

Polymorphonuclears with
acidophilic cytoplasm and
Specific + azurophilic granules



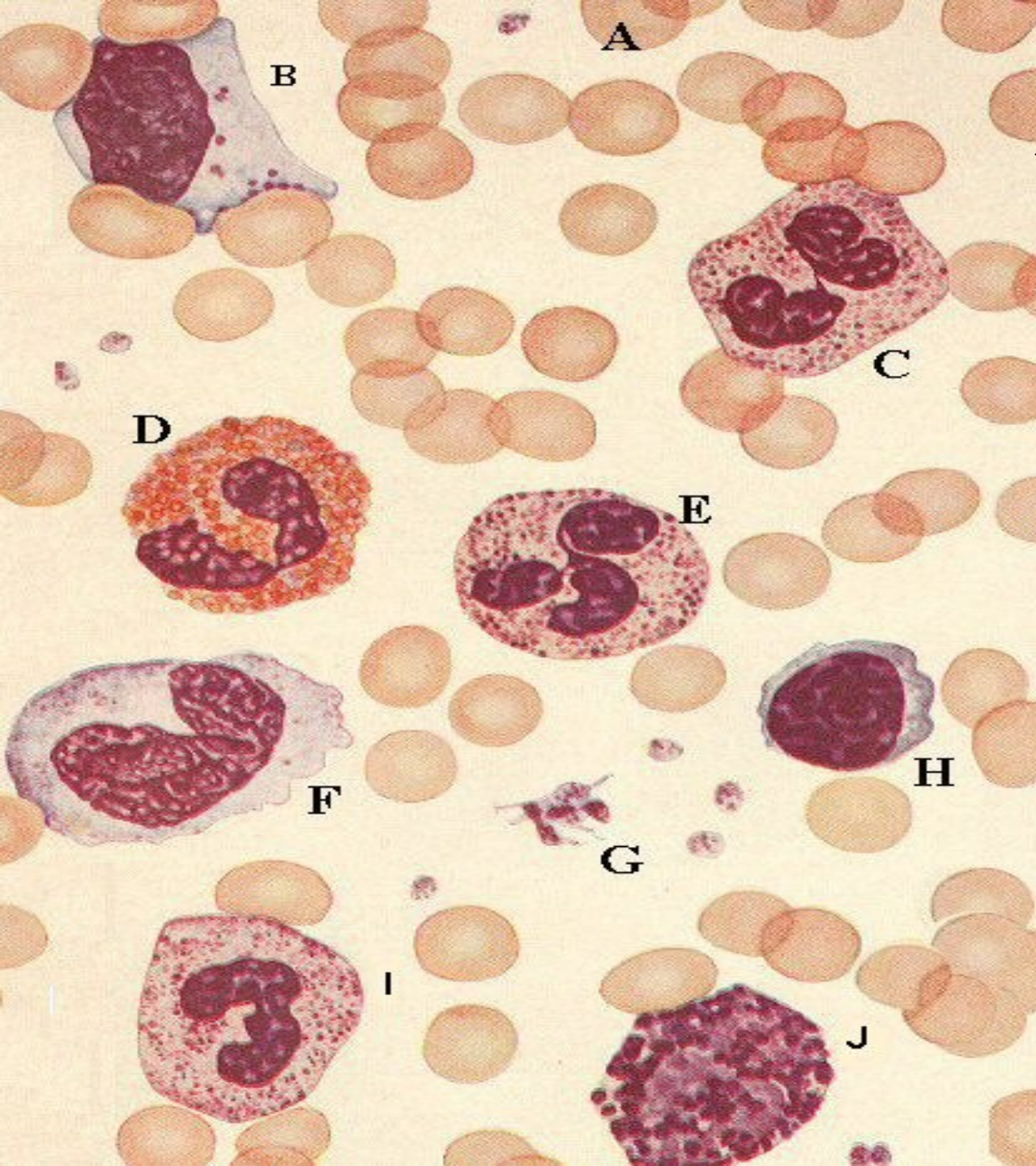
■ Agranulocytes

- lymphocytes
- monocytes

General characteristic:

Mononuclears with
basophilic cytoplasm and
azurophilic granules





Erythrocytes (A)

Thrombocytes (G)

Granulocytes:
(pink cytoplasm,
specific granules)

neutrophil segment (E,C)
neutrophil band (I)
eosinophil (D)
basophil (J)

Agranulocytes:
(blue cytoplasm,
azurophilic granules)

lymphocyte (H, B)
monocyte (F)

Granulocytes

■ General characteristic:

- polymorphonuclears – different shape of nuclei



band

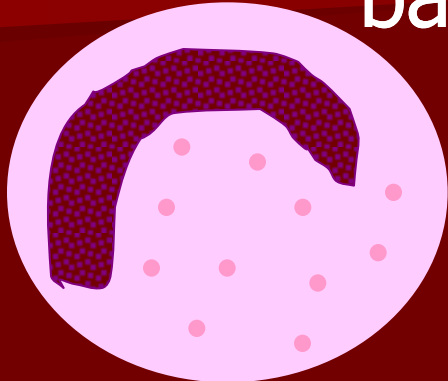
segmented with chromatin bridges

- **acidophilic cytoplasm** – bright-pink
- **specific granules** – with special enzymes
- **azurophilic granules** – with lysosomal enzymes
- all granulocytes are able to migrate from the vessels and by diapedesis invade a site of inflammation

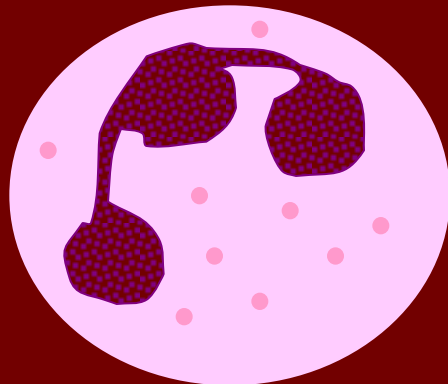
Granulocytes

neutrophils – eosinophils – basophils

band

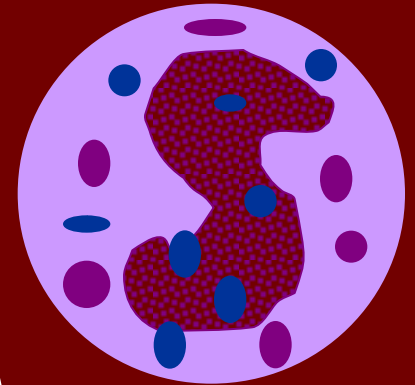
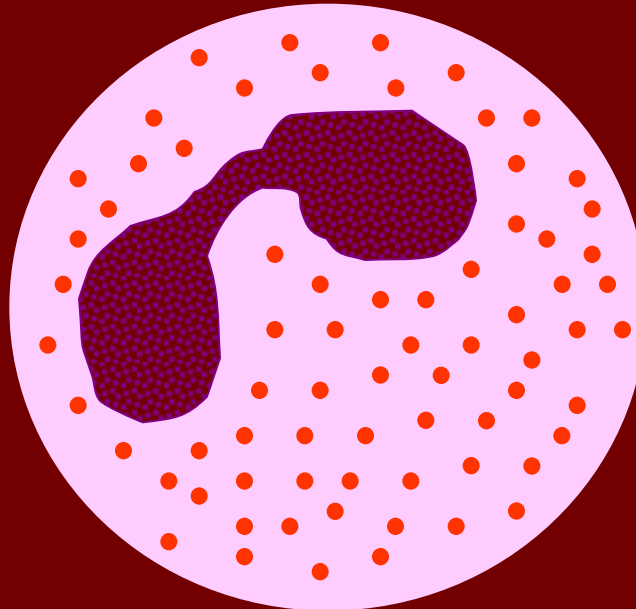


10-12  h



segment

12-14  h



10  h

Differential white cell count (DWCC)

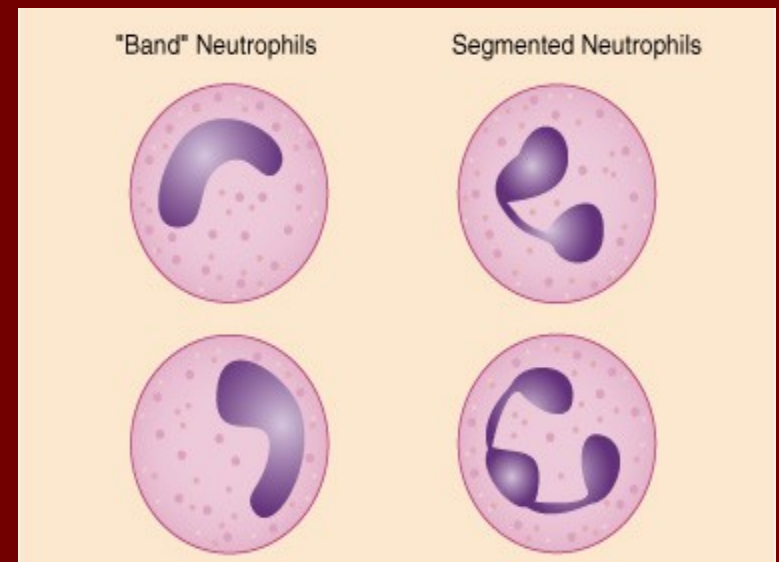


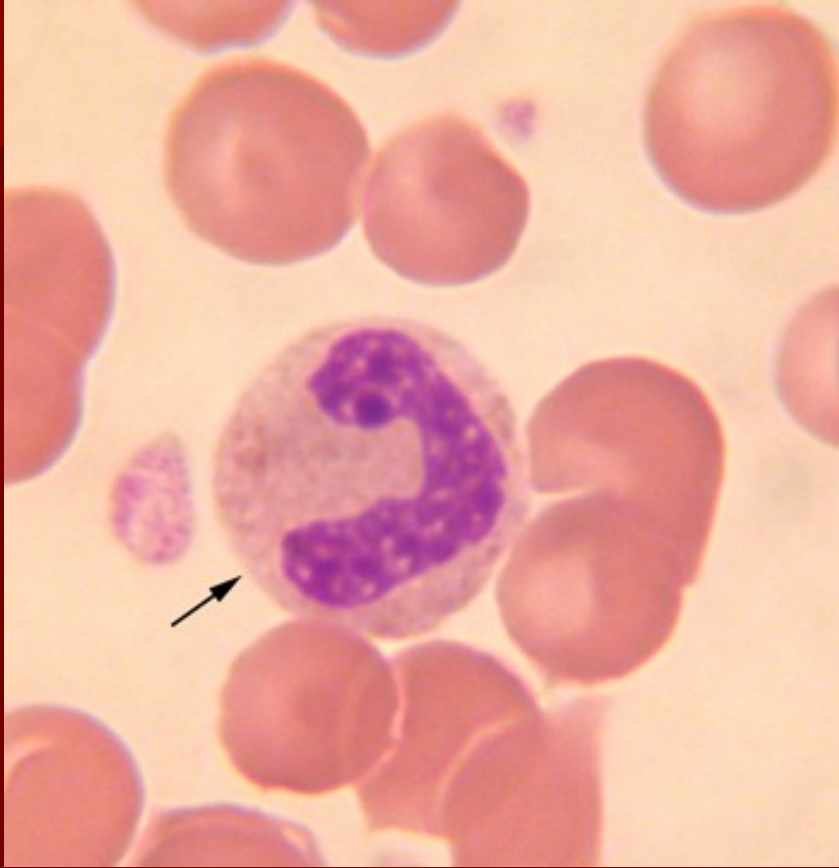
- Total number of leukocytes: normal values

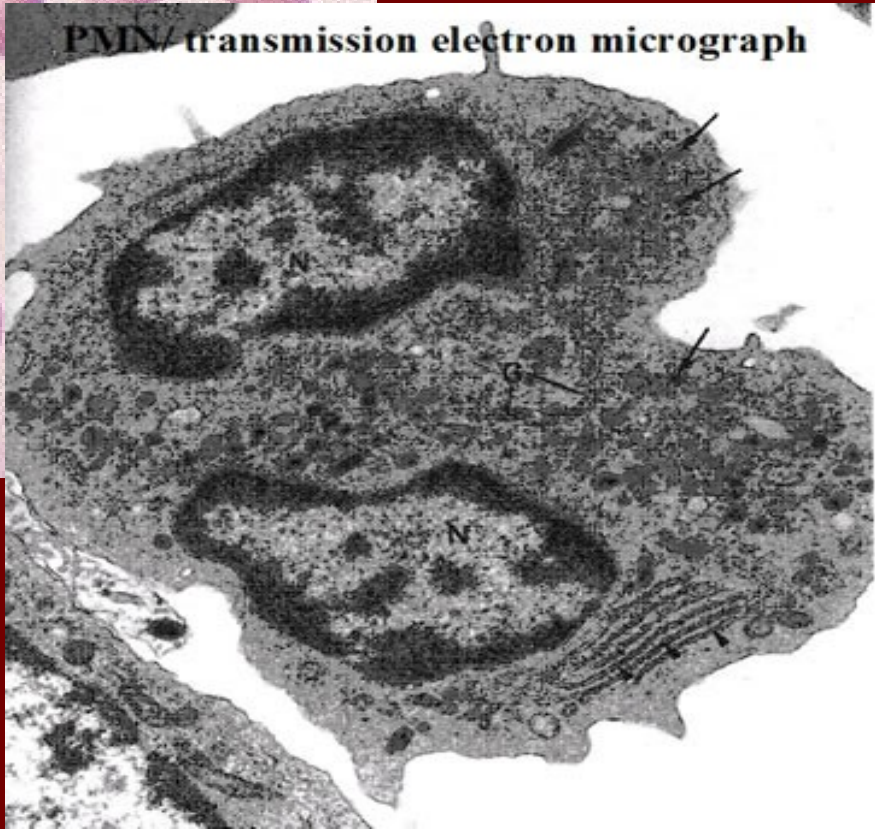
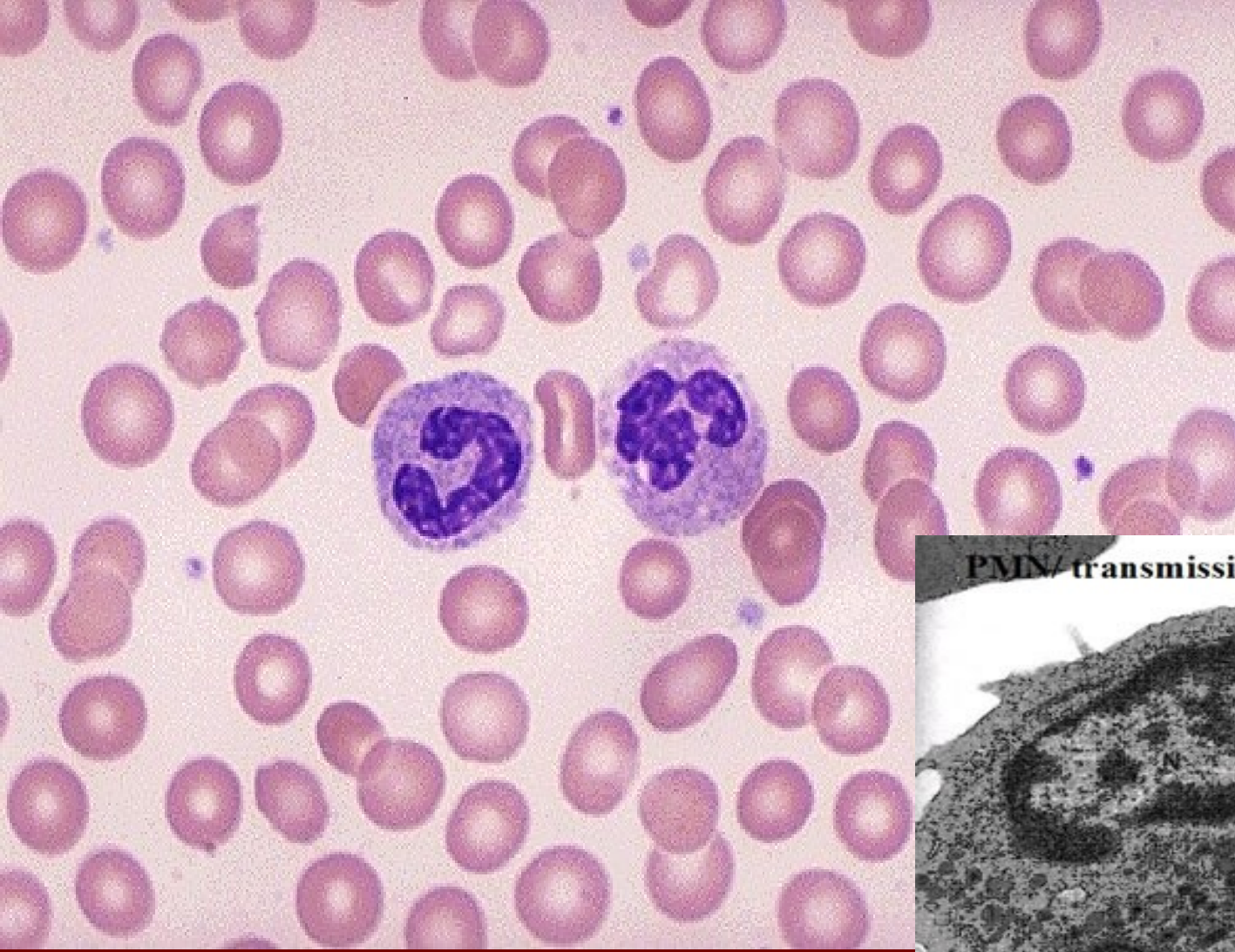
Neutrophils - bands	4 %
- segments	68 %
Eosinophils	3 %
Basophils	1 %
Lymphocytes	20 %
Monocytes	4 %
	$\Sigma = 100 \%$

Neutrophil granulocytes (neutrophils)

- 71 % of all white blood cells (DWCC)
- 0 – 12 h
- Cytoplasm: bright pink (eosinophilic = acidophilic)
- Specific granules: neutrophilic (0.3 h)
(enzymes: alkaline phosphatase, collagenase, lysozyme, ...)
- Nucleus:
band-shaped (4 %)
or segmented (67 %)
(2-5 segments)







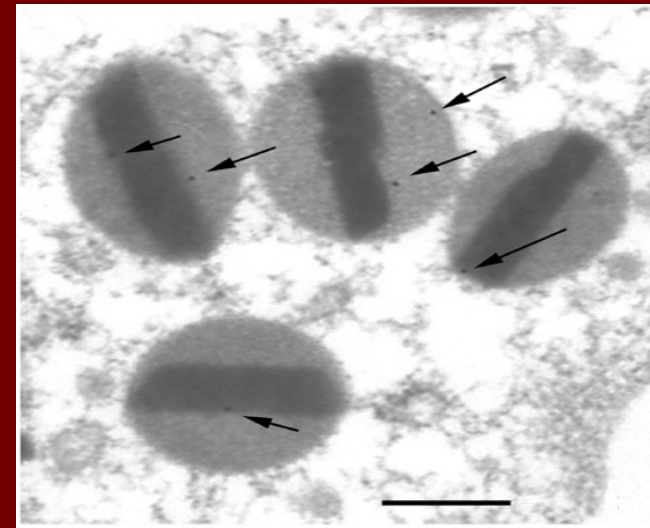
Functions of Neu

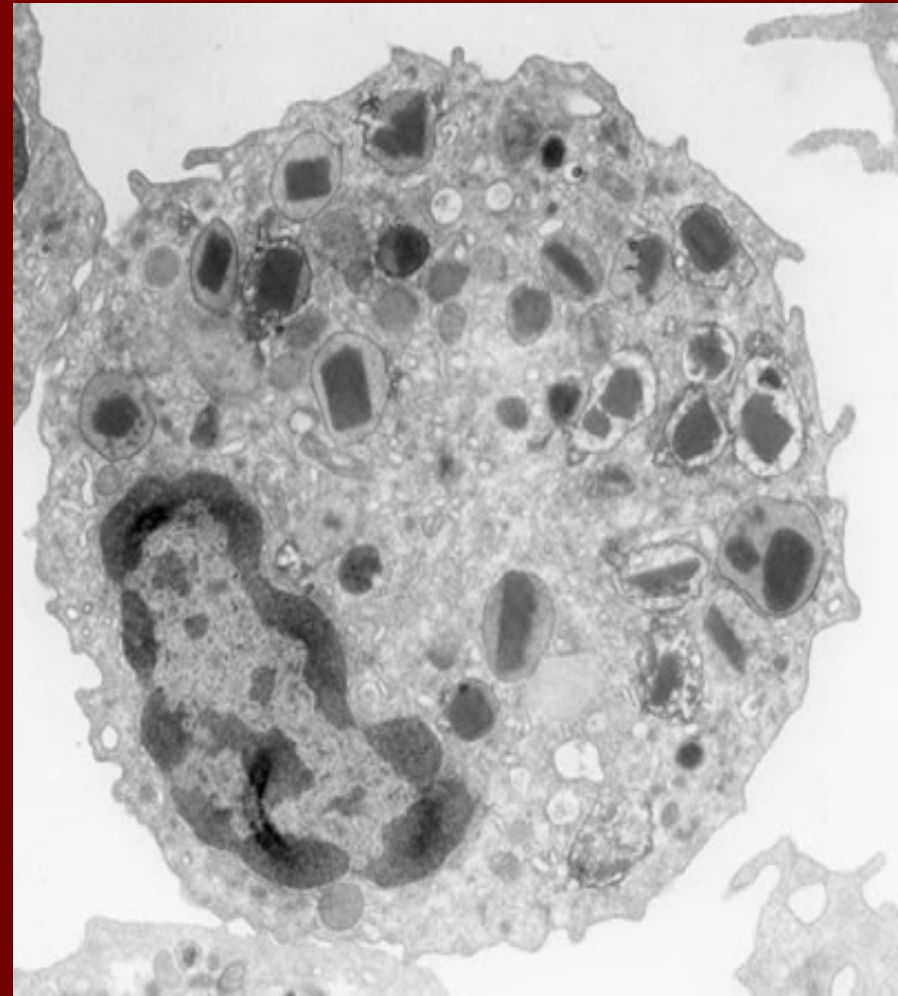
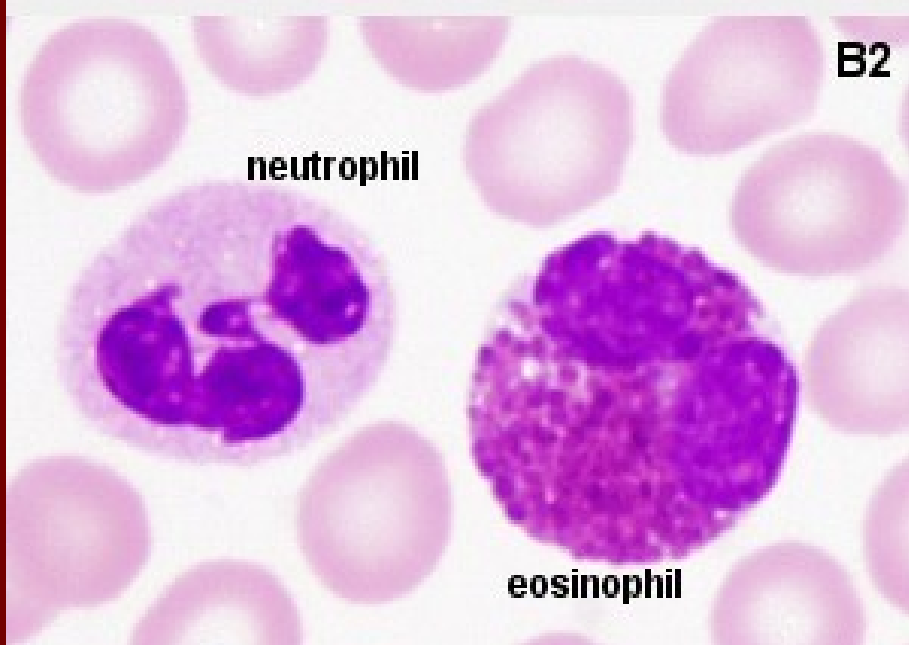
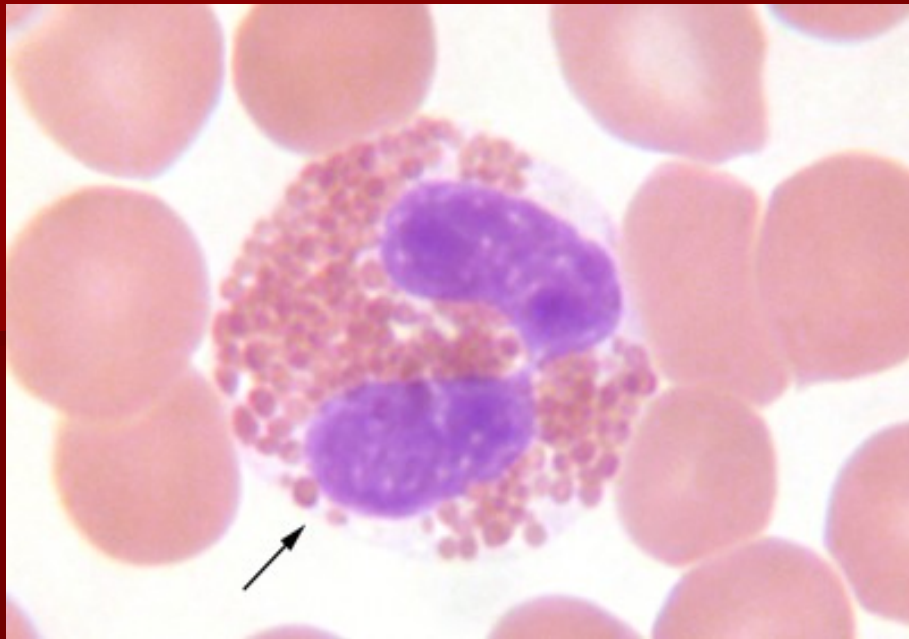
- a central role in inflammatory processes – Neu invade, by diapedesis from the vessels into sites of infection and release some factors (e.g. cytokines)
- cell membrane receptors allow Neu to recognise foreign bodies (bacteria, tissue debris), which they begin to phagocytose and destroy.

The Neu die once their supply of granules has been exhausted. Their lifespan is only about one week. Dead neutrophils and tissue debris are the major components of pus.

Eosinophil granulocytes (eosinophils)

- 1– 4 % of all white blood cells (DWCC)
- 2 – 14 h
- Cytoplasm: bright pink (eosinophilic = acidophilic)
- Specific granules: eosinophilic (0.5 – 1 h)
(enzymes: acid phosphatase, peroxidase, histaminase, arylsulfatase ...)
- Nucleus:
dumb-belt,
(2 segments)
chromatin bridge





Functions of Eos

- phagocytosis of antibody-antigen complexes and prevention of the immune system from "overreacting,,
- eos are involved in the response of the body against parasitic infections, which are accompanied by an increase in the number of eosinophils.

Basophil granulocytes (basophils)

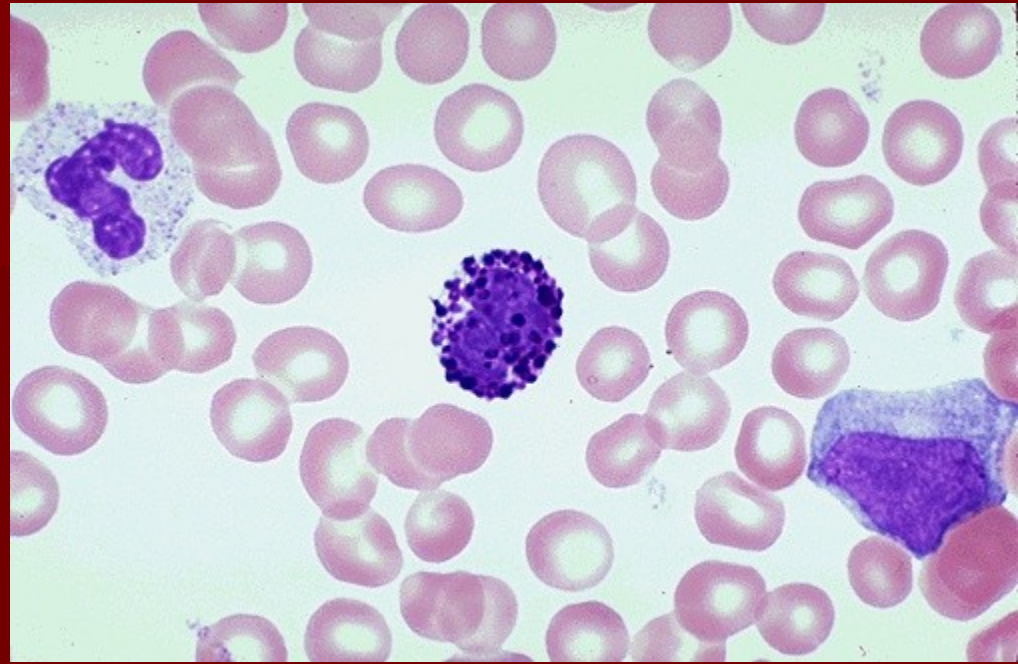
- up to 1 % of all white blood cells (DWCC)
- 120 p to 10 n
- Cytoplasm: bright violet-pink (lightly basophilic)
- Specific granules: (■ ■)
(heparin, histamin, ...)
- Nucleus:
„shape of dick S“

Blood Smear - Leishman

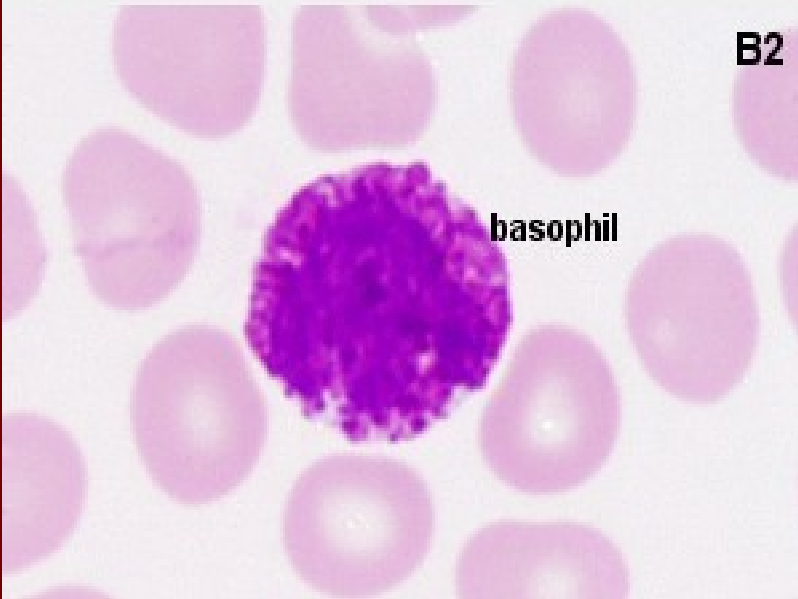
B1



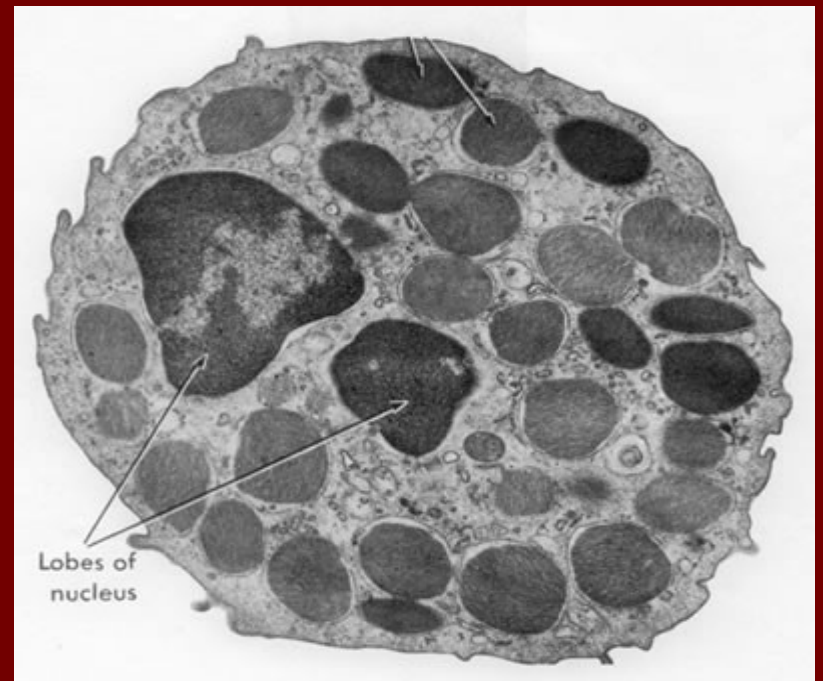
basophil



B2



basophil



Lobes of nucleus

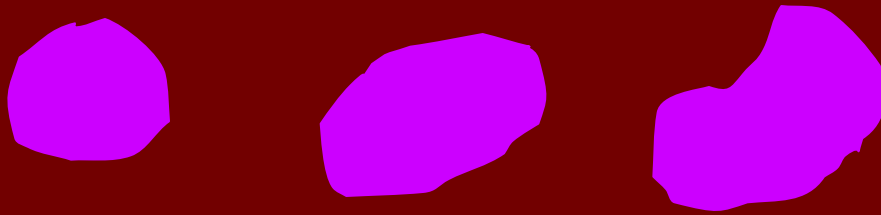
Functions of Baso

- heparin and histamine are vasoactive substances. They dilate the blood vessels, make vessel walls more permeable and prevent blood coagulation. They facilitate the access of heparinocyte in a site of infection.
- antibodies produced by plasma cells (activated B-lymphocytes) bind to the receptors on the plasma membrane of basophils. If these antibodies come into contact with antigens, they induce the release of the contents of the basophil granules.

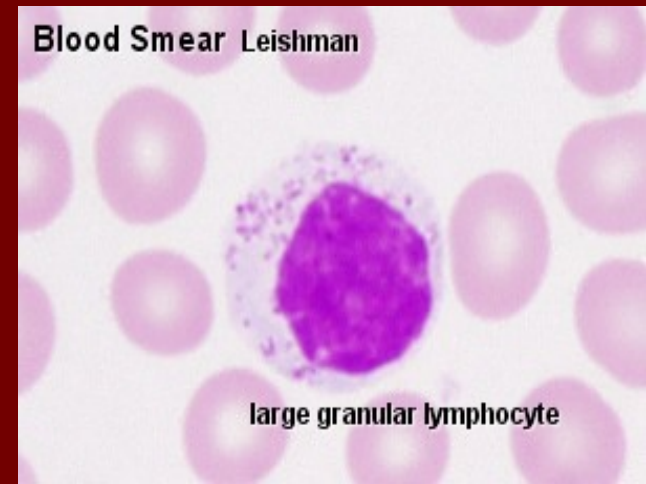
Agranulocytes

■ General characteristic:

- mononuclears – shape of nuclei is spherical (*in Ly*), oval or bean-shaped (*in Mono*)



- basophilic cytoplasm – blue
- NO ~~specific granules~~
- azurophilic granules
– with lysosomal enzymes



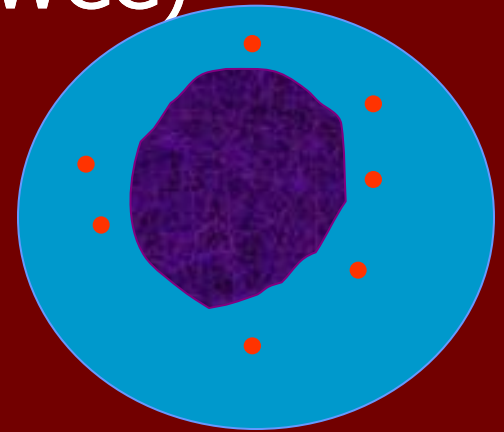
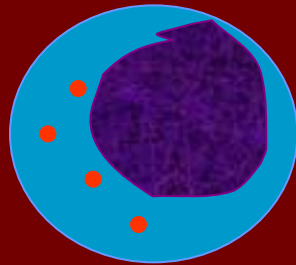
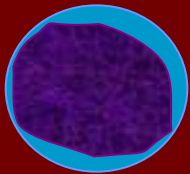
LYMPHOCYTES

■ Classification:

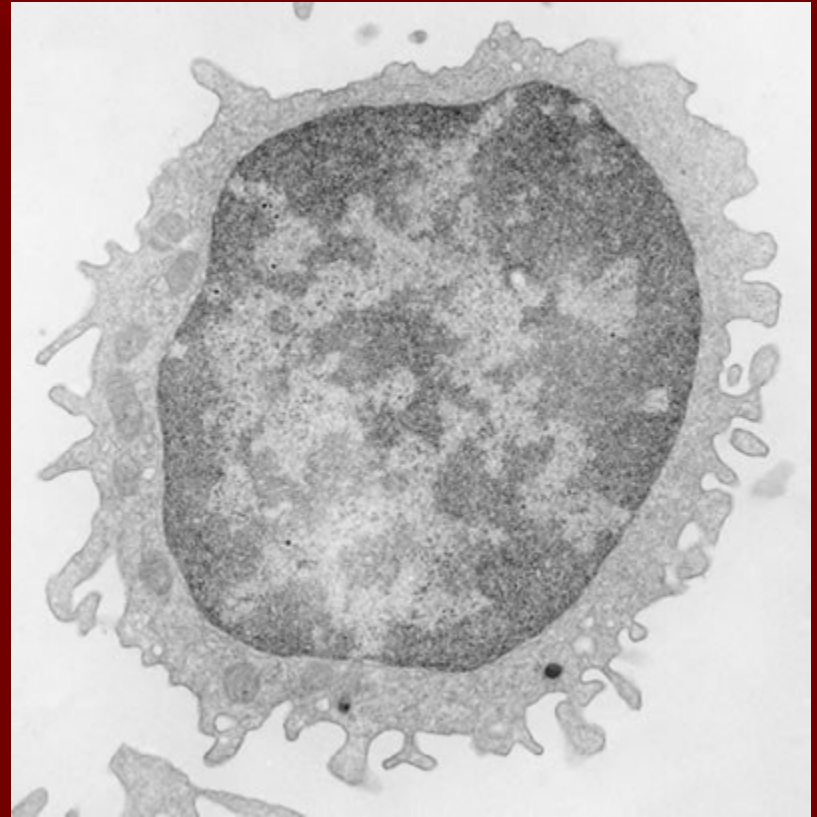
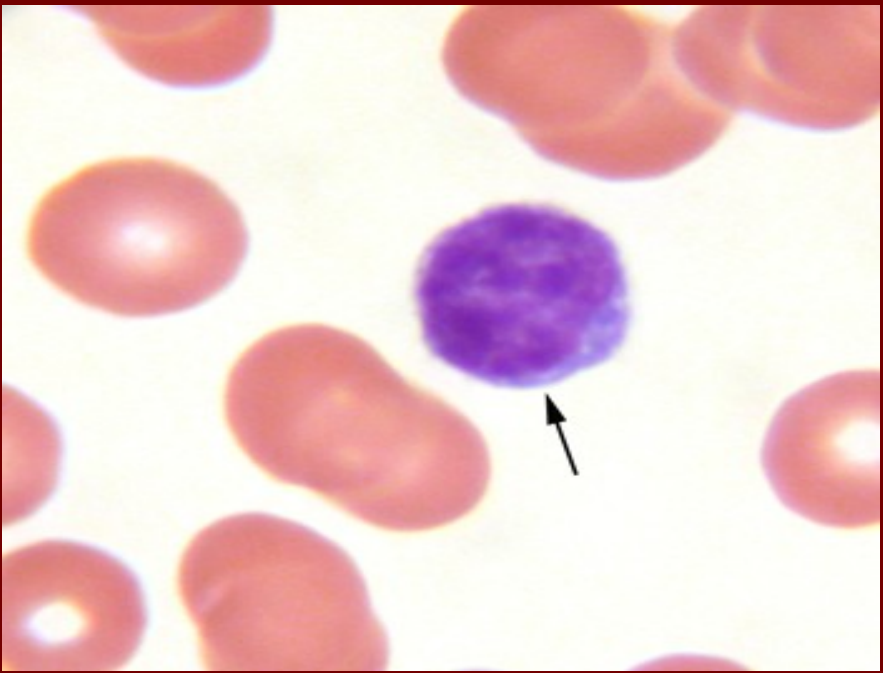
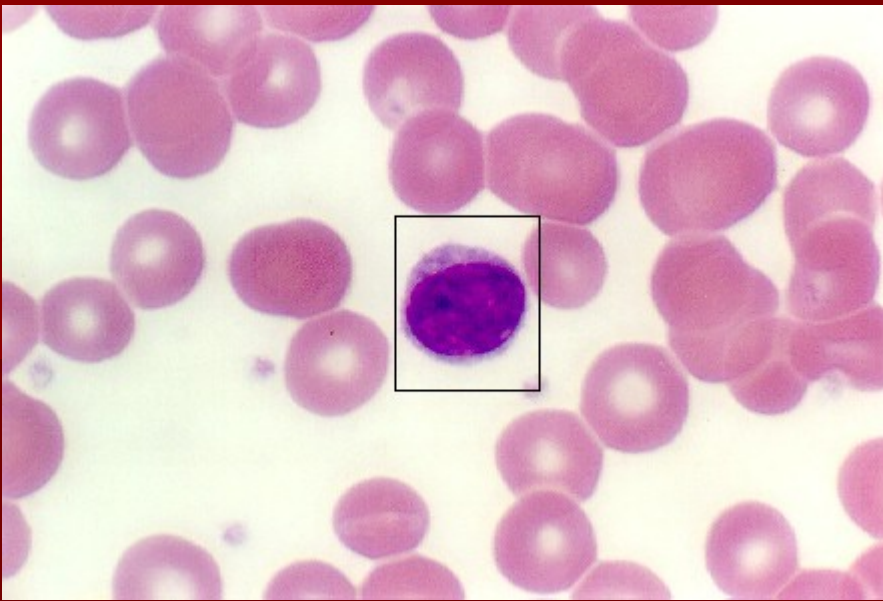
- according to origin – T-Ly (*thymus*), B-Ly (bone marrow ■ bursa of Fabricius in birds)
- according to the size – small (\varnothing 8 μm), medium (\varnothing 10-12 μm), large (\varnothing 16-18 μm),
- according to the function – natural killer cells, helper cells, memory cells, suppressor cells,
- according to life-span (long, short)

Lymphocytes - structure

- 20 % of all white blood cells (DWCC)



- small, medium-sized, large Ly
- cytoplasm – dark blue, contains non-specific azurophilic granules with lysosomal enzymes (**hydrolases**) and numerous ribosomes
- nucleus – round, hyperchromatic – coarse grains of heterochromatin (*dark violet colour*)

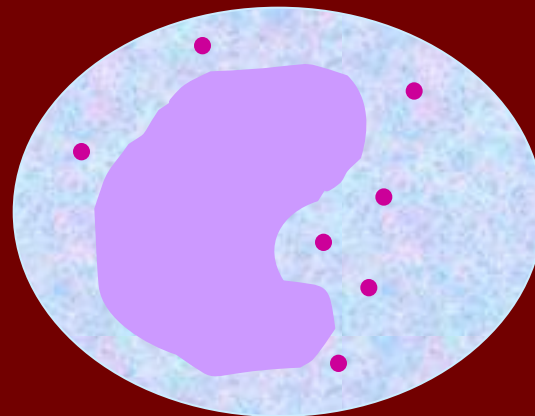
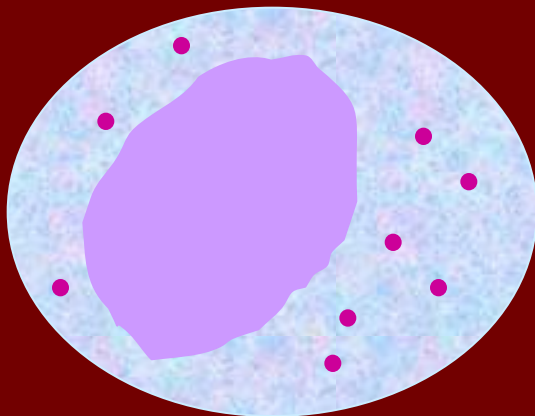


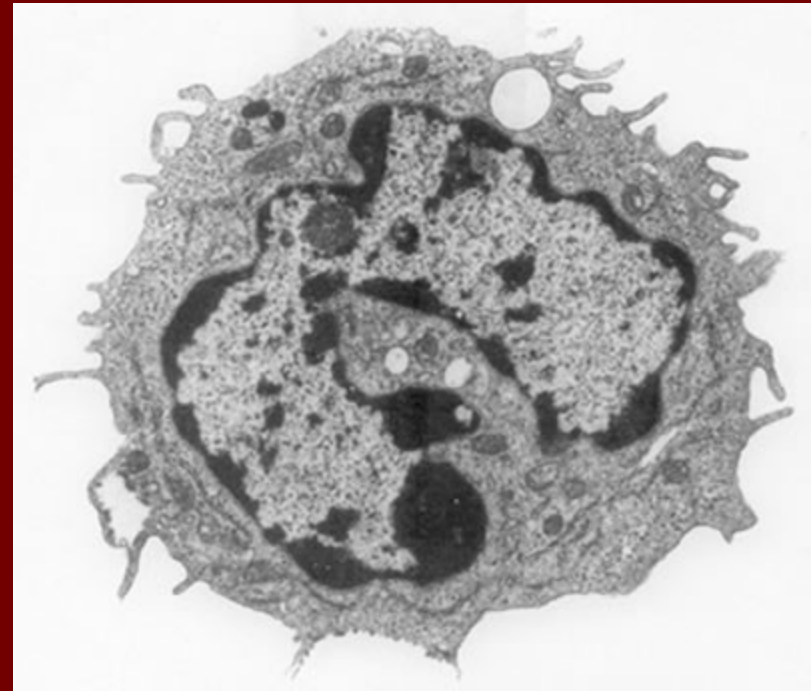
Functions of Ly

- B-lymphocytes differentiate into antibody producing **plasma cells** and so they represent "humoral immunity"
- T-lymphocytes represent the "cellular immunity" and may attack foreign cells, cancer cells and cells infected by e.g. a virus

MONOCYTES

- 5 % (DWC), ■ 5 – 20 ■ h
- cytoplasm – voluminous, bright blue, contains non-specific azurophilic granules with lysosomal enzymes (**hydrolases**) and numerous ribosomes
- nucleus – oval to bean-shaped, finely dispersed chromatin





Functions of Mono

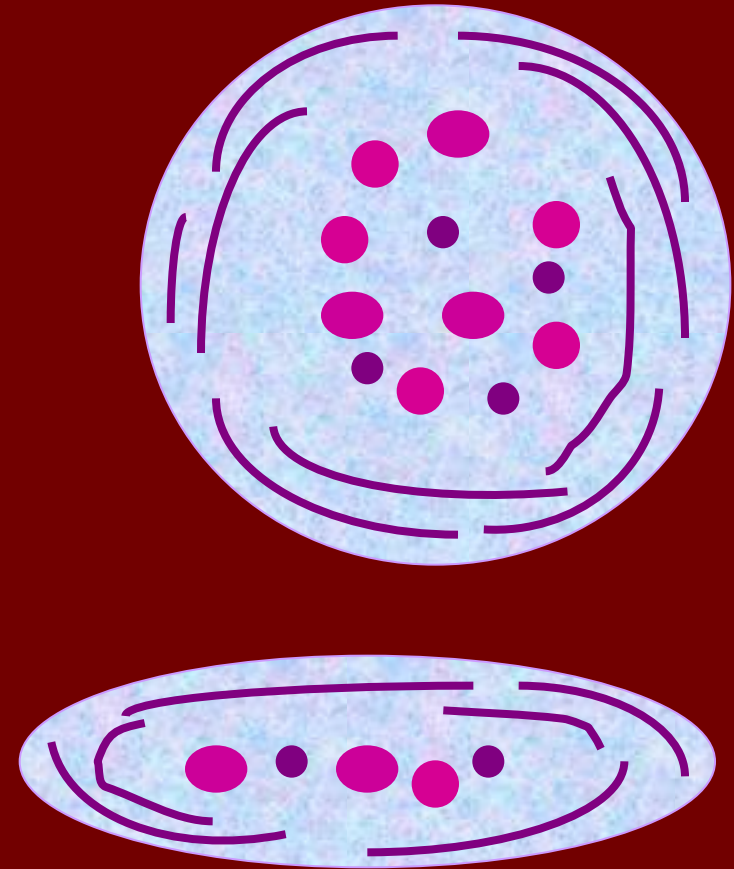
- *monocytes enter the connective tissue they differentiate into **macrophages**. At sites of infection macrophages are the dominant cell type after the death of the invading neutrophils.*
- *macrophages phagocyte microorganisms, tissue debris and the dead neutrophils.*
- *mono also give rise to **osteoclasts**, which are able to destroy bone. They are of importance in bone remodelling.*

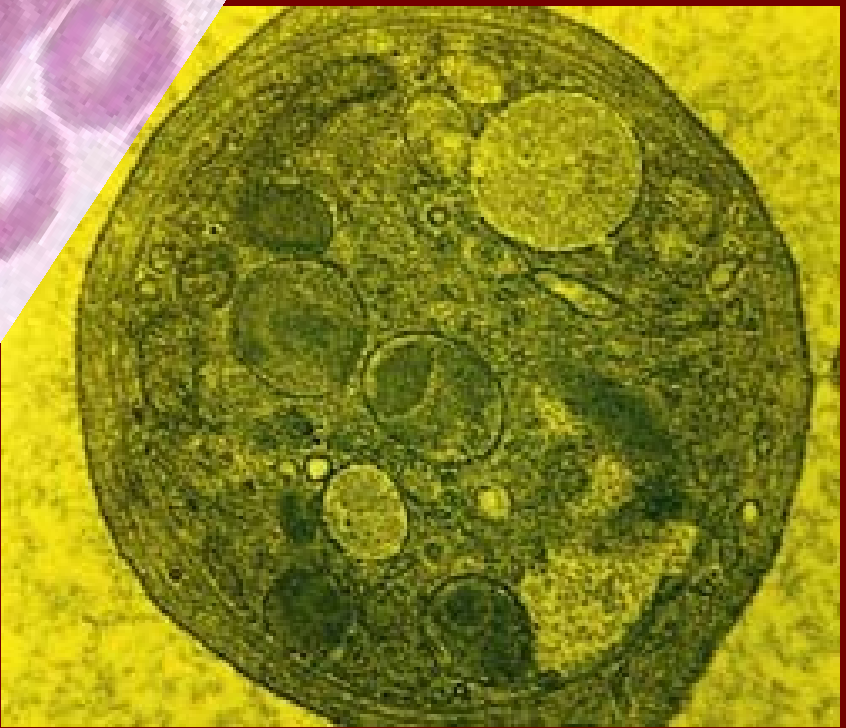
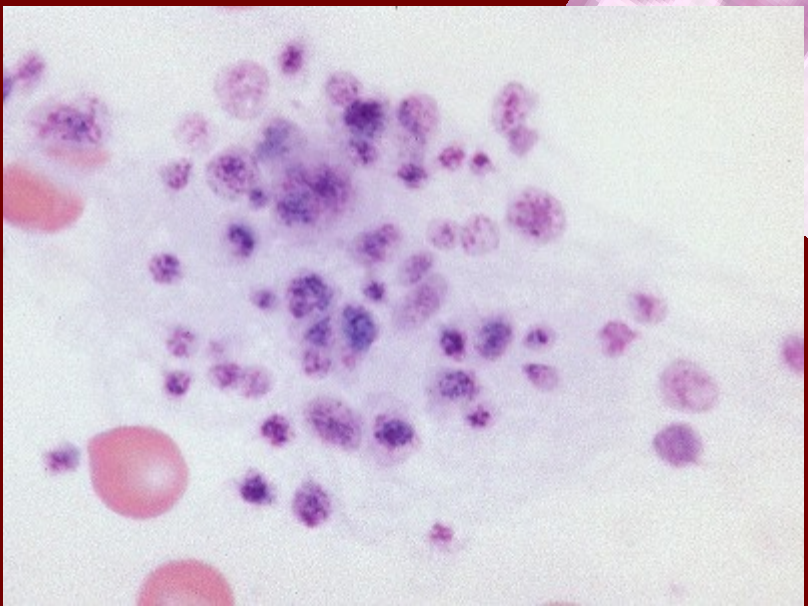
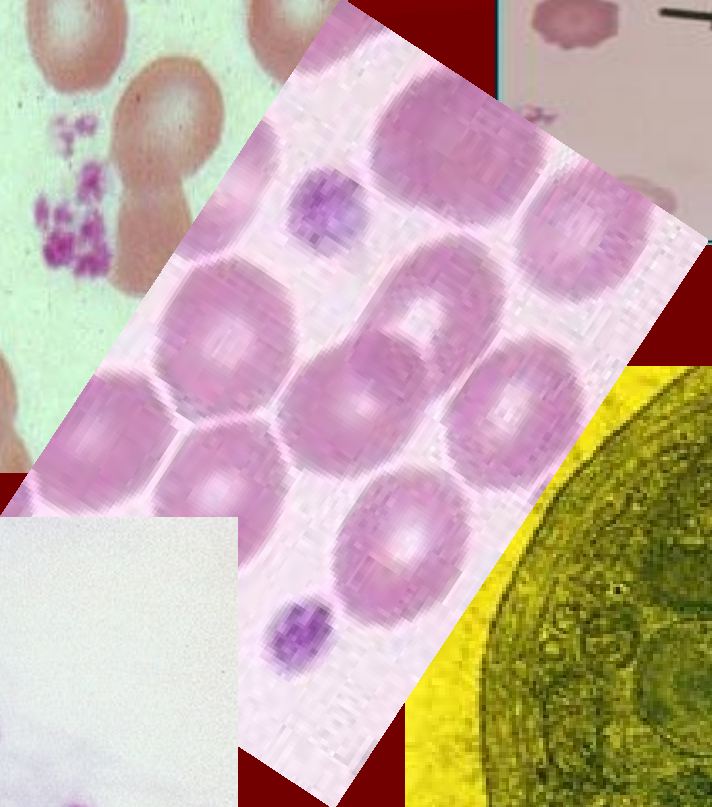
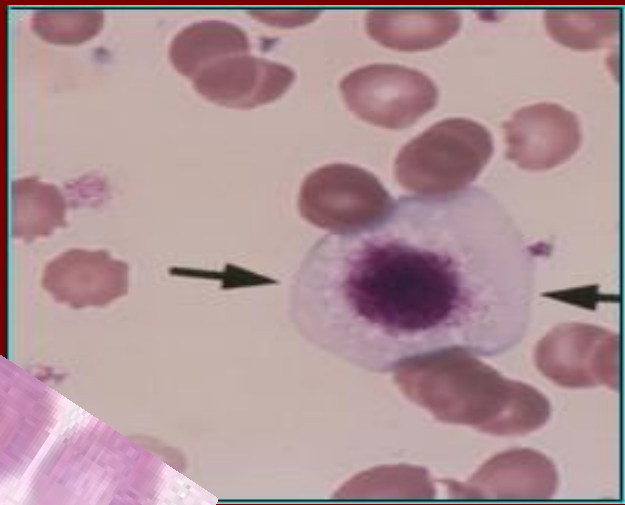
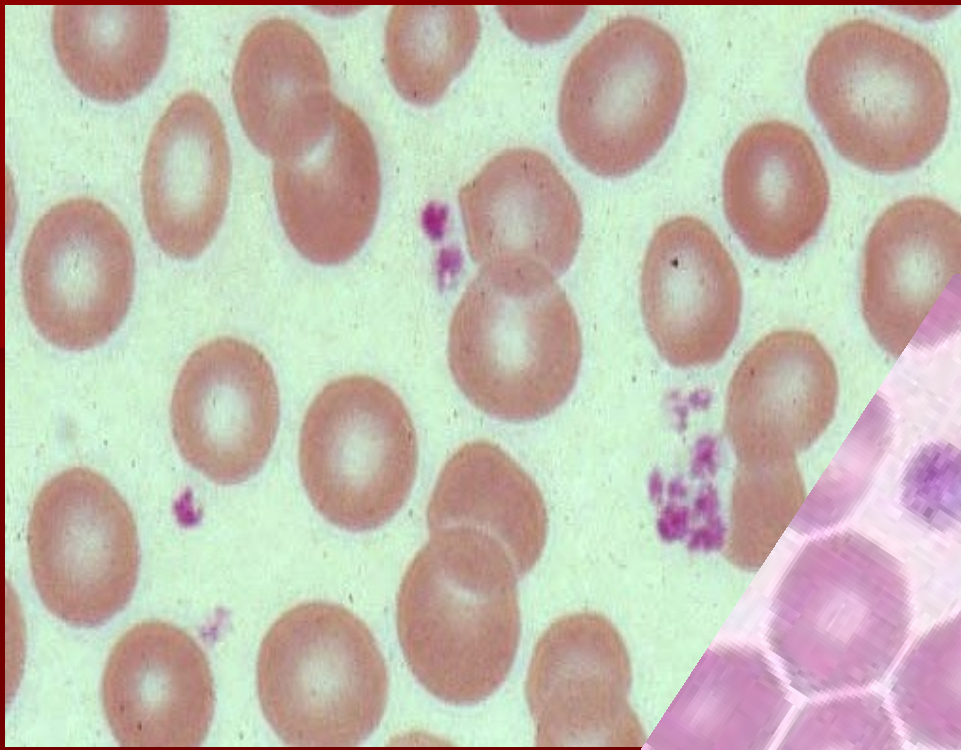
THROMBOCYTES (blood platelets)

- 150,000 – 300,000 / 1 μL of blood
- thrombocytosis X thrombocytopenia
- - are not cells, but cytoplasmic fragments of large cell (megakaryocyte) in bone marrow
- shape: spindle-shaped discoid plate
- size: 2 – 4 μm
- cytoplasm – basophilic (bright violet-blue), contains microtubules and α, δ and λ granules:
 - alpha granules – fibrinogen, ...
 - delta granules – serotonin, Ca ions, ATP and ADP, ...
 - lambda granules – are small lysosomes

Platelet structure

- **Hyaloplasm** contains microtubules (on the periphery of platelet)
- **Granuloplasm** contains granules

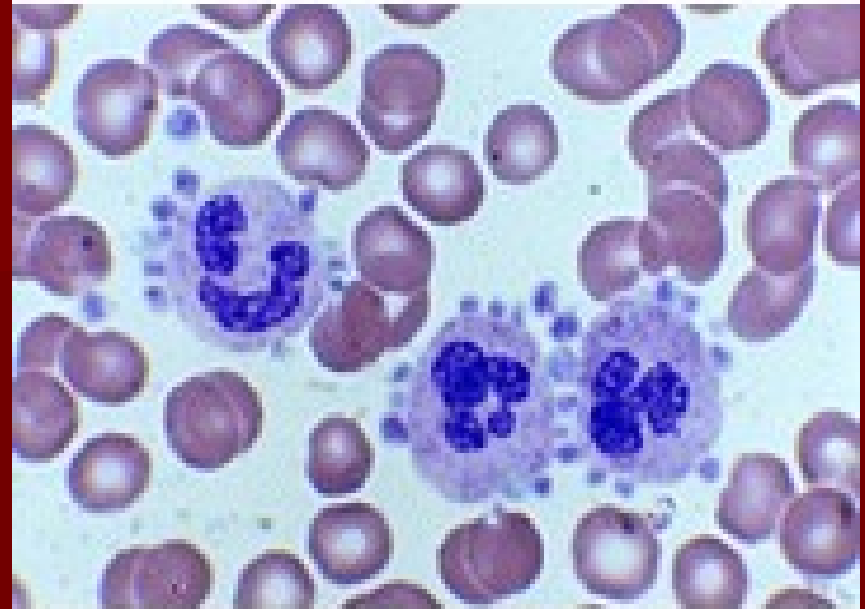
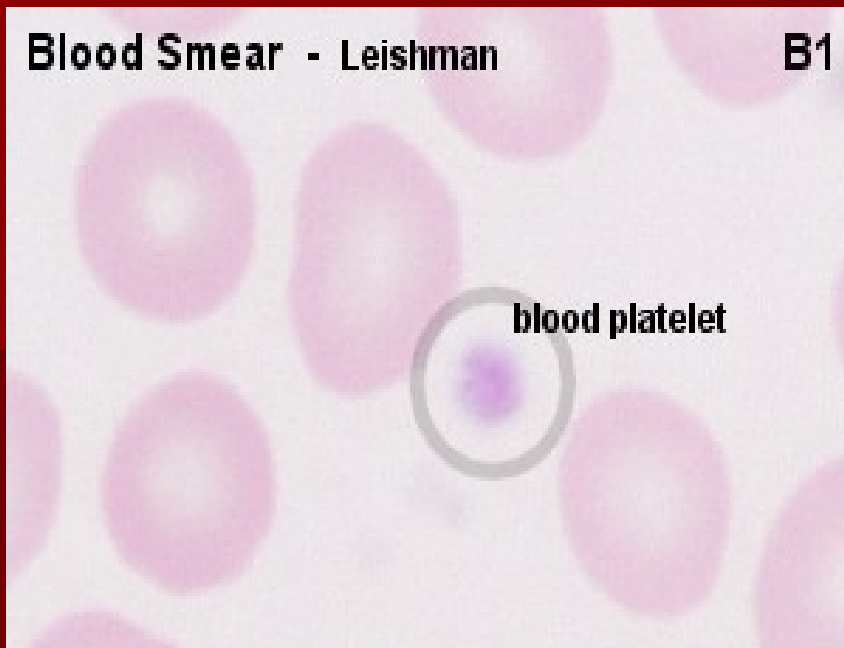




Blood Smear - Leishman

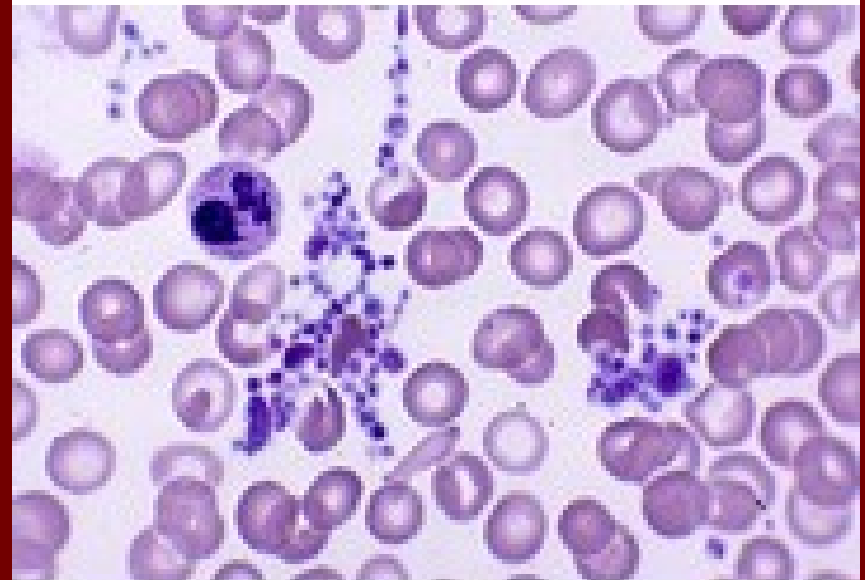
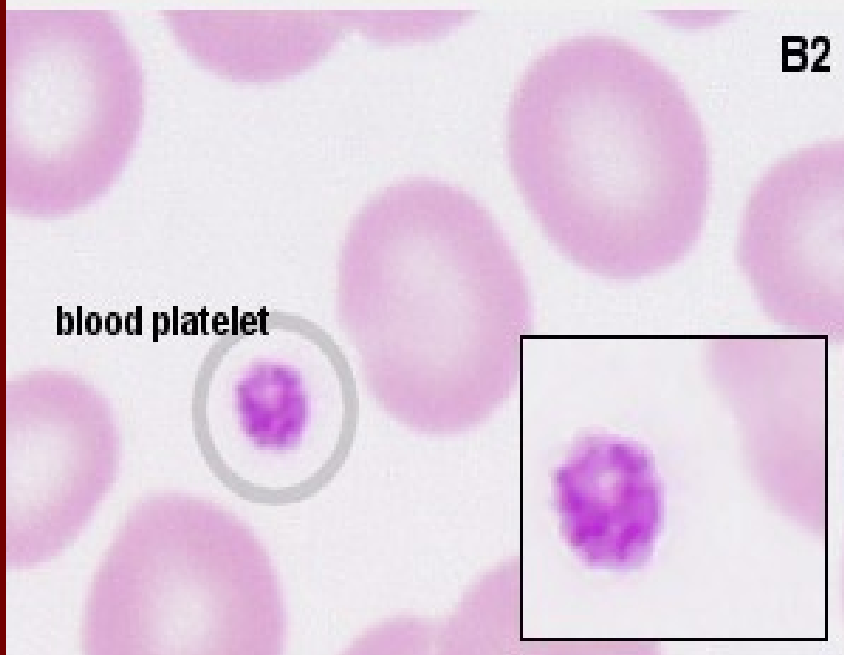
B1

blood platelet



B2

blood platelet



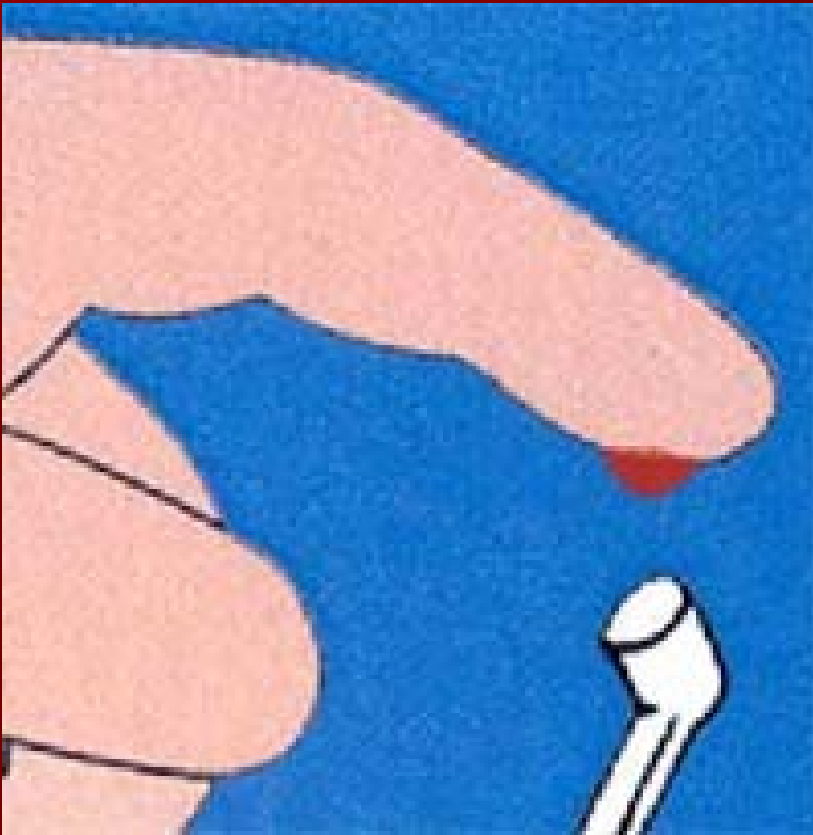
Functions of thrombocytes

- Platelets assist in *haemostasis*, the arrest of bleeding.
- **Serotonin** is a vasoconstrictor. Its release from thrombocytes, adhering to the walls of a damaged vessels, is sufficient to close even small arteries. Platelets, which come into contact with collagenous fibers in the walls of the vessel, swell, become "sticky" and activate other platelets to undergo the same transformation. This cascade of events results in the **formation of a platelet plug (or platelet thrombus)**. Finally, activating substances are released from the damaged vessel walls and from the platelets. These substances mediate the conversion of the plasma protein *prothrombin* into *thrombin*. *Thrombin catalyzes the conversion of fibrinogen into fibrin*, which polymerizes into fibrils and forms a fibrous net in the arising blood clot. Platelets captured in the fibrin net contract leading to *clot retraction*, which further assists in haemostasis.



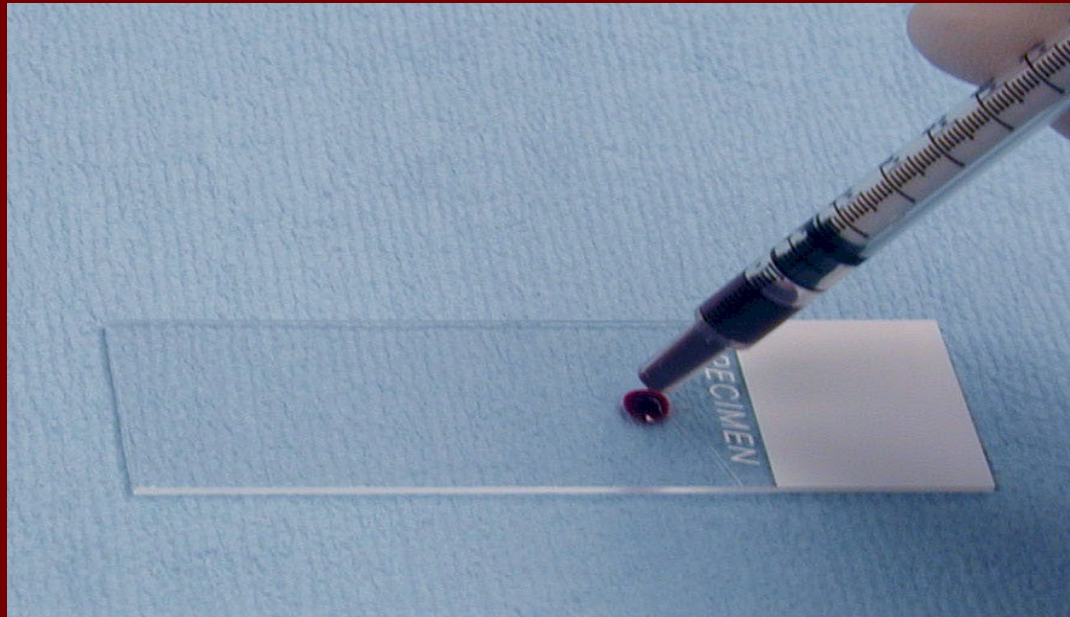
*Please,
note the following instructions*

How to prepare blood smear?



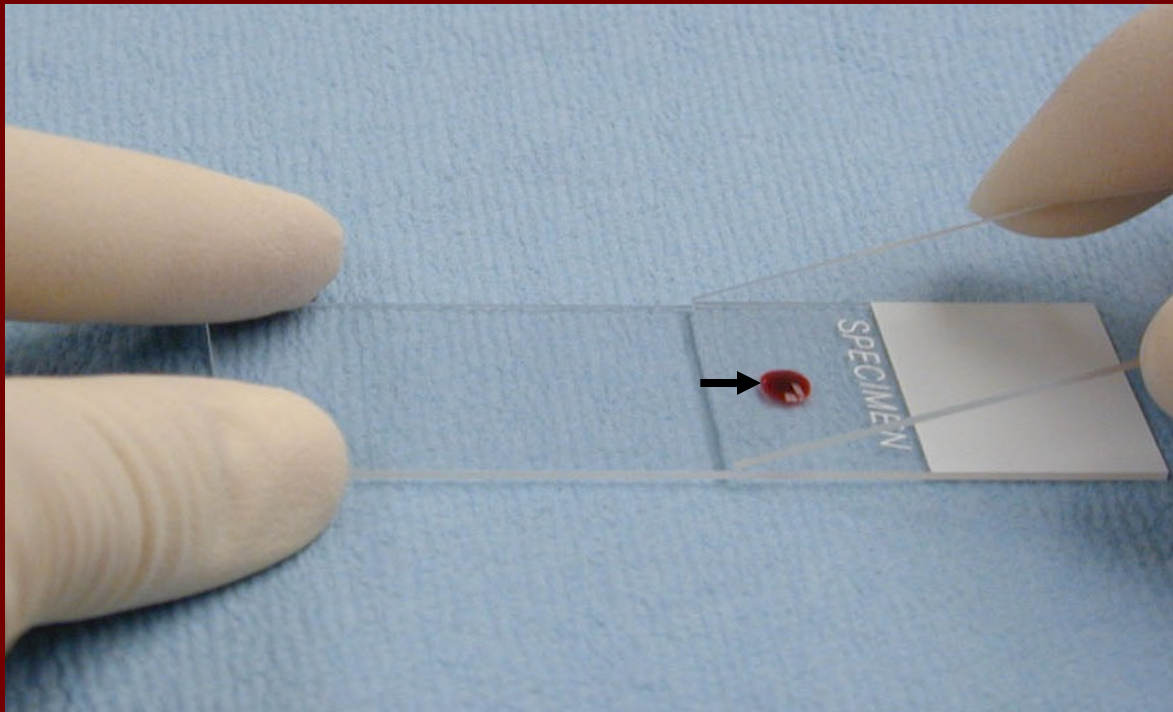
How to prepare blood smear - I

- Smears of peripheral blood must be made immediately.
- Step 1: Place drop of blood about 1cm from the frosted end of a clean slide.



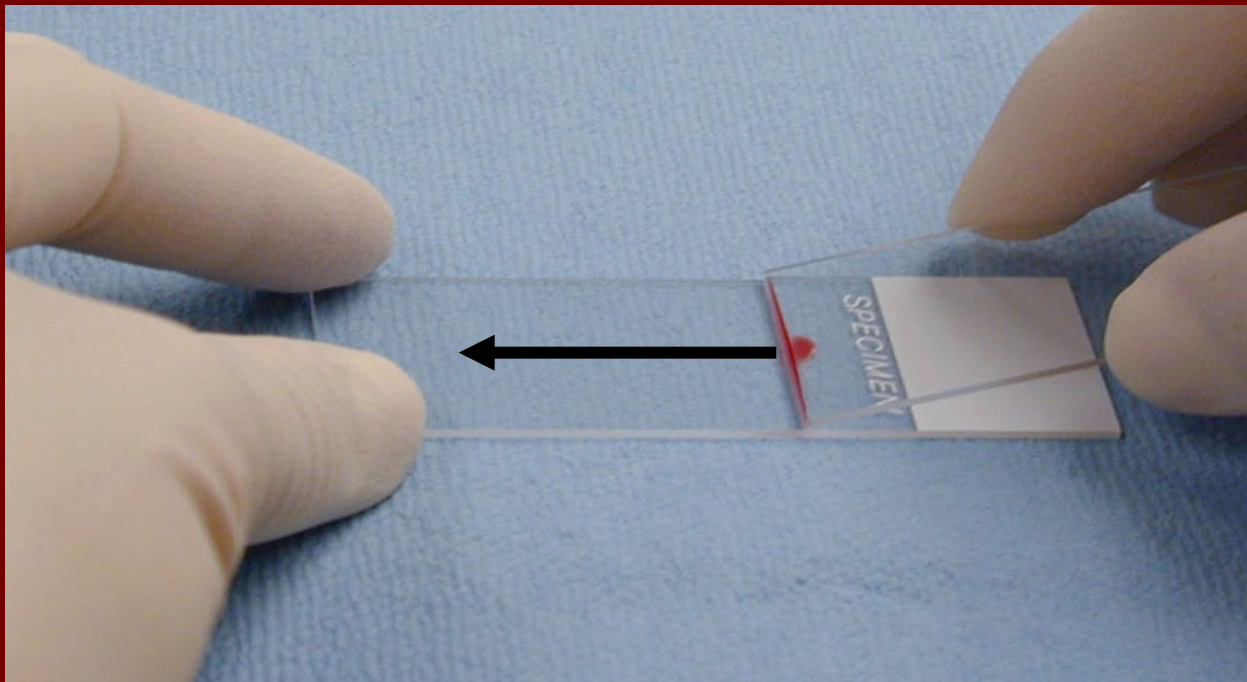
How to prepare blood smear - II

- Step 2: hold the end of a second slide ("spreader") against the surface of the first slide at an angle of 30-45 degrees.



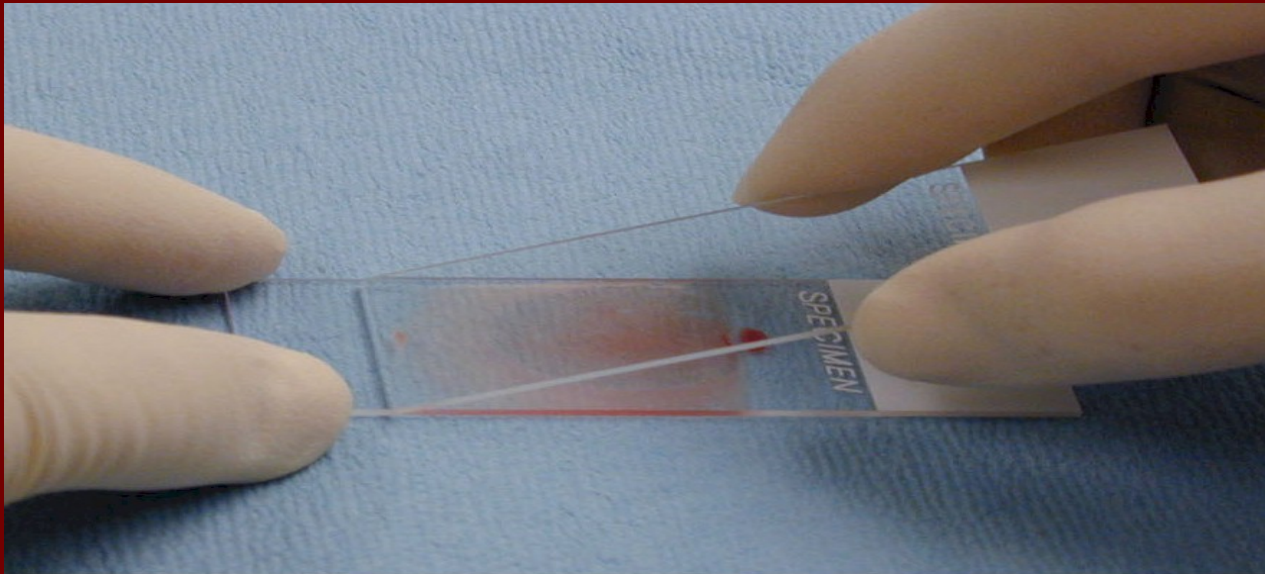
How to prepare blood smear - III

- Step 3: draw it back to contact the drop of blood. Allow the blood to spread and fill the angle between the two slides.



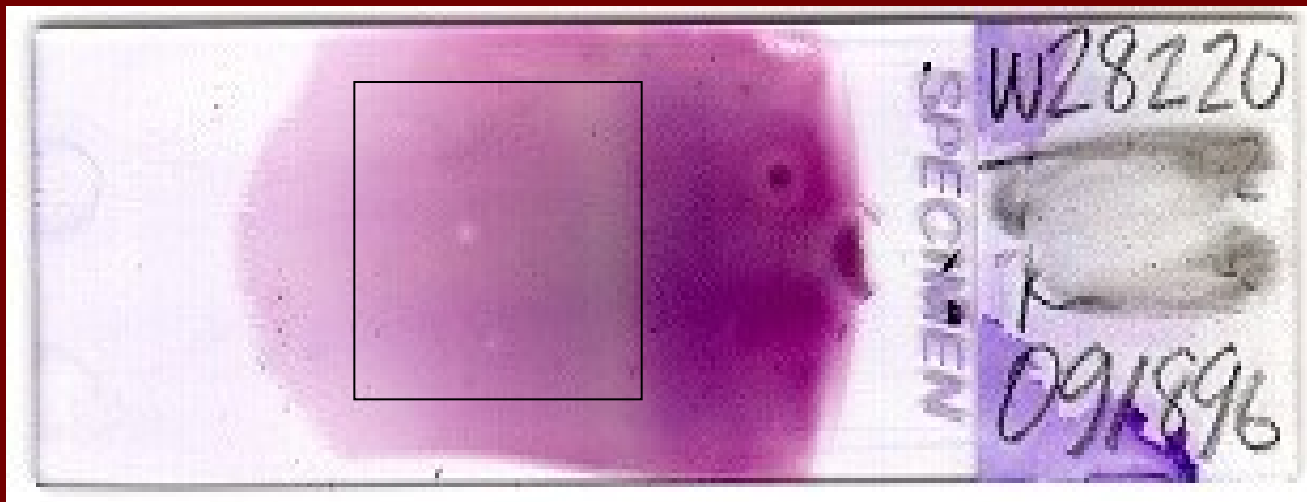
How to prepare blood smear - IV

- Step 4: Push the “spreader” slide at a moderate speed forward until all of the blood has been spread into a moderately thin film.



How to prepare blood smear - V

- Smear is prepared for fixation (methyl alcohol, 3-5 minutes) and staining (special panoptic method according to Pappenheim can be used)



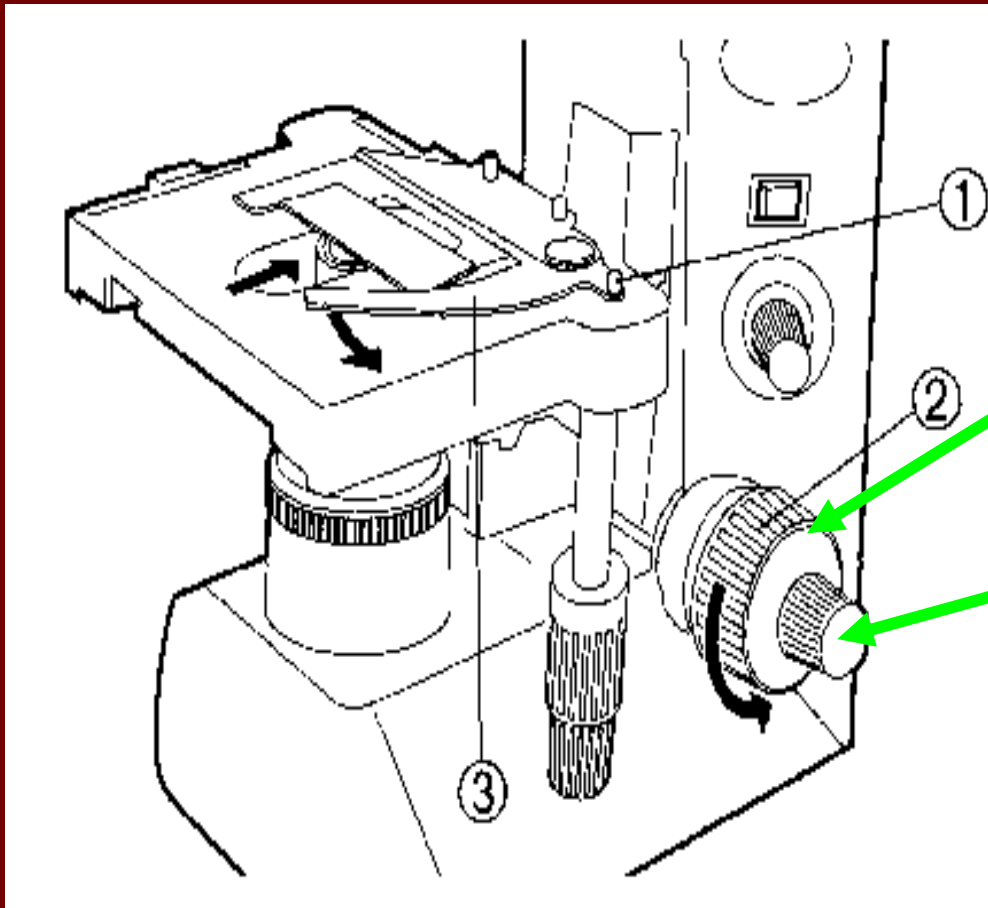


How to study blood smear in the light microscope (LM)?

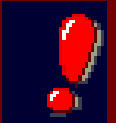
- the lense of immersion objective (magnif. 100x) is immersed into a drop of oil and blood smear is prepared for study in the LM;
- **switch on** your LM and see into the eypice: blood cells should be visible in the light field
- if not, try to focuse picture – you may use **ONLY** the fine adjustment knob!
- if you are not succesfull, ask for help your teacher, **do NOT** use the coarse adjustment knob!

Light microscope manipulation

Stage with slide holder (3)
Lever of holder (1)
Focusing knobs (2).



Course adjustment knob
don't use today



Fine adjustment knob
only that can be used
to focus the image

neutrophil – band
Ø 10-12 µm

thrombocyte
Ø 2-4 µm

eosinophil
Ø 12-14 µm

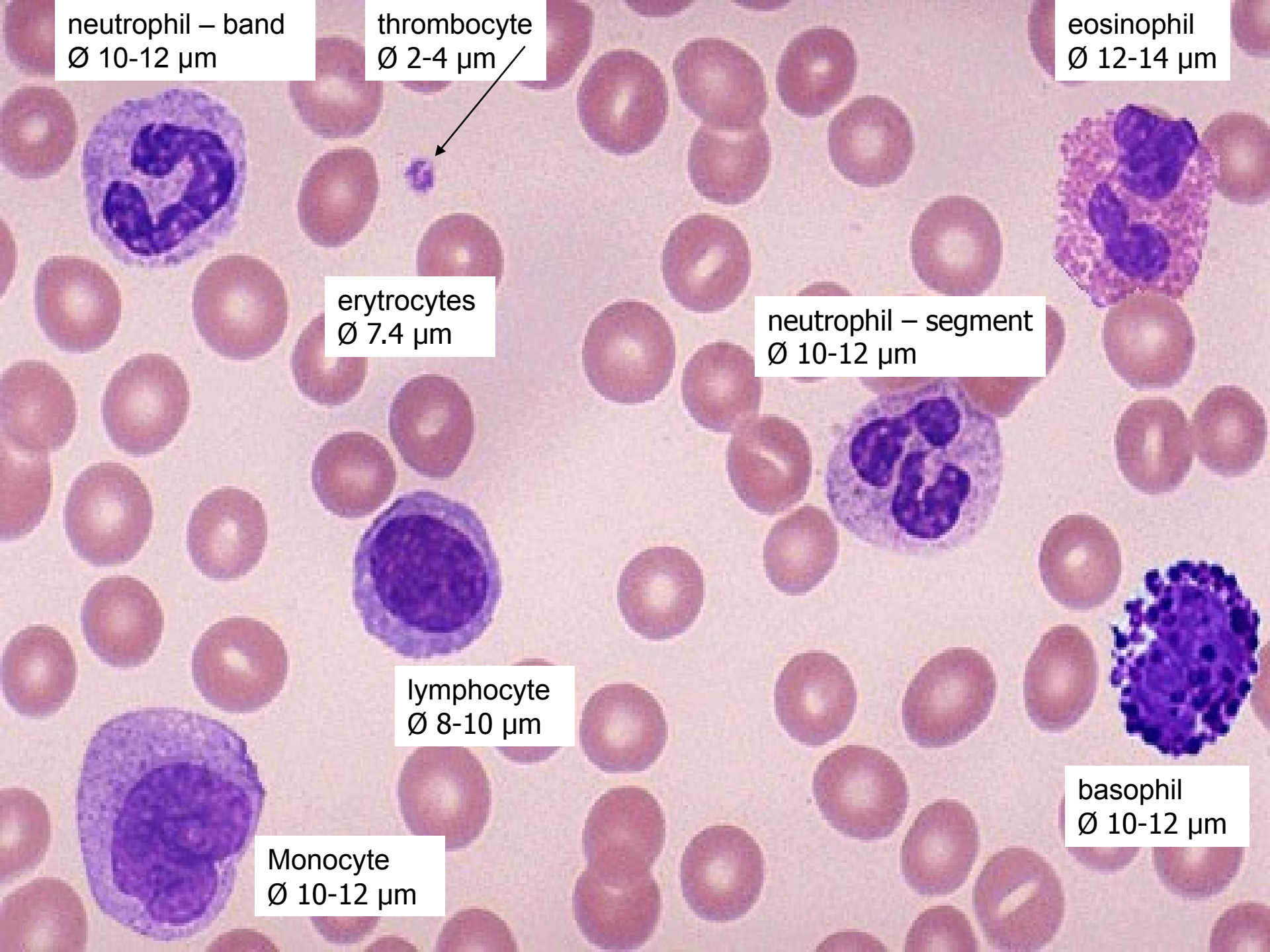
erythrocytes
Ø 7.4 µm

neutrophil – segment
Ø 10-12 µm

lymphocyte
Ø 8-10 µm

Monocyte
Ø 10-12 µm

basophil
Ø 10-12 µm



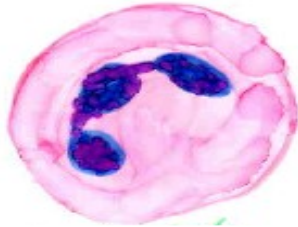


Erythrocytes (\varnothing 7,4 μ r)

Thrombocytes (2-4 μ m)



Granulocytes:



neutrophilic
10-12 μ m

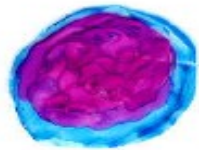


eosinophilic
12-14 μ m

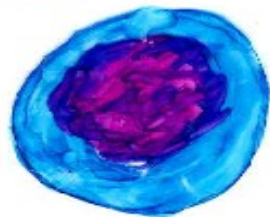


basophilic
10 μ m

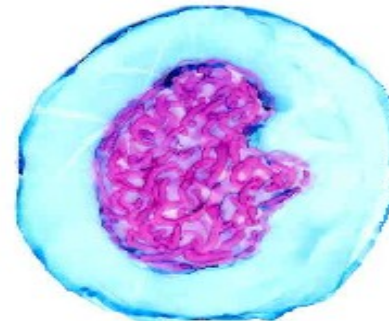
Agranulocytes:



Lymfocytes (8-10 μ m)



Monocyte (15-20 μ m)

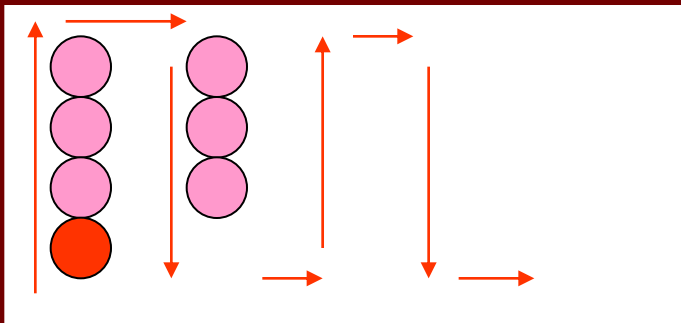


How to count leukocytes in blood smear?

- differential white cell count (DWCC) is an important hematologic screening which helps to diagnose
- leukocytes percentage is the result of this investigation
- 100 white cells must be count and registered in the table prepared for all types of leukocytes (Neu-bands, Neu-segments, Eos, Baso, Ly, Mono)
- arithmetic sum of each type of leukocytes represents their percentage (%)

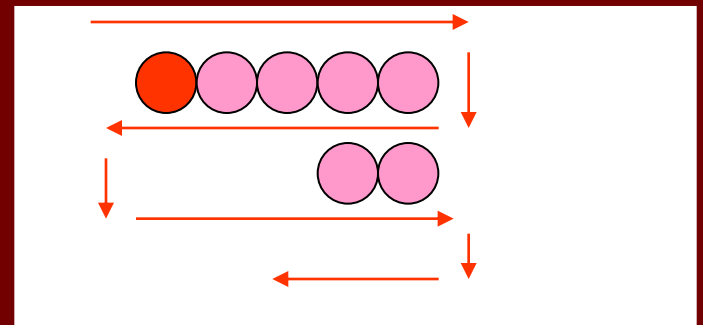
How to count leukocytes in blood smear?

- blood smear have to be systematically viewed (it avoids repeatedly count the same cells)



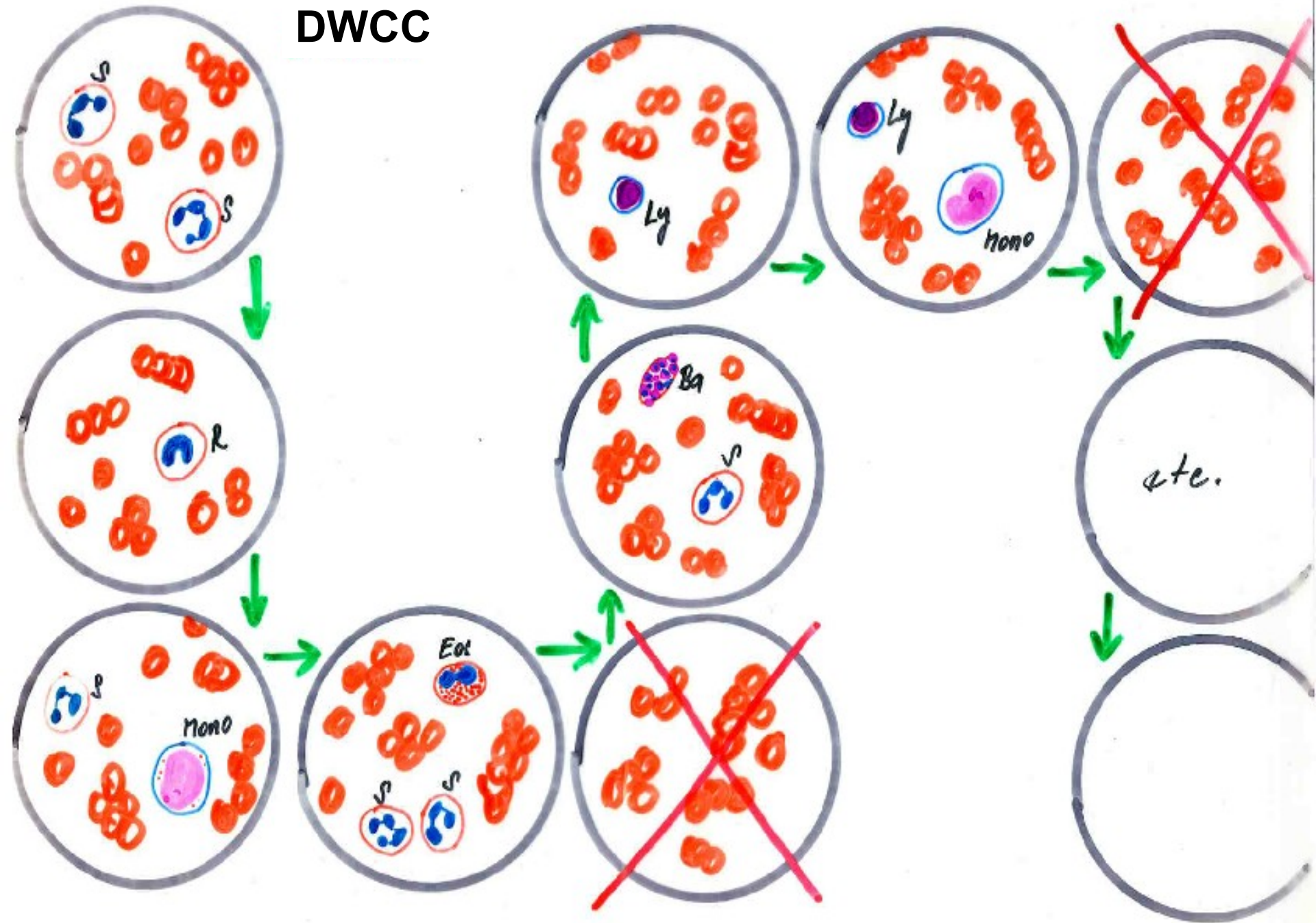
vertical browsing

or



horizontal browsing

DWCC



Table

	1	2
Neu bands	/	
Neu segments	### //	///
Eos		/
Baso		
Ly	//	////
Mono		//
	10 cells	10 cells



9	10	results	norm
//			4 %
### /	///		68 %
/	//		3 %
	/		1 %
/	###		20 %
			4 %
10 cells	10 cells	100%	100 %

Differential white cell count (DWCC)



- Total number of leukocytes: normal values

Neutrophils - bands	4 %
- segments	68 %
Eosinophils	3 %
Basophils	1 %
Lymphocytes	20 %
Monocytes	4 %
	$\Sigma = 100 \%$

Anomalies of DWCC

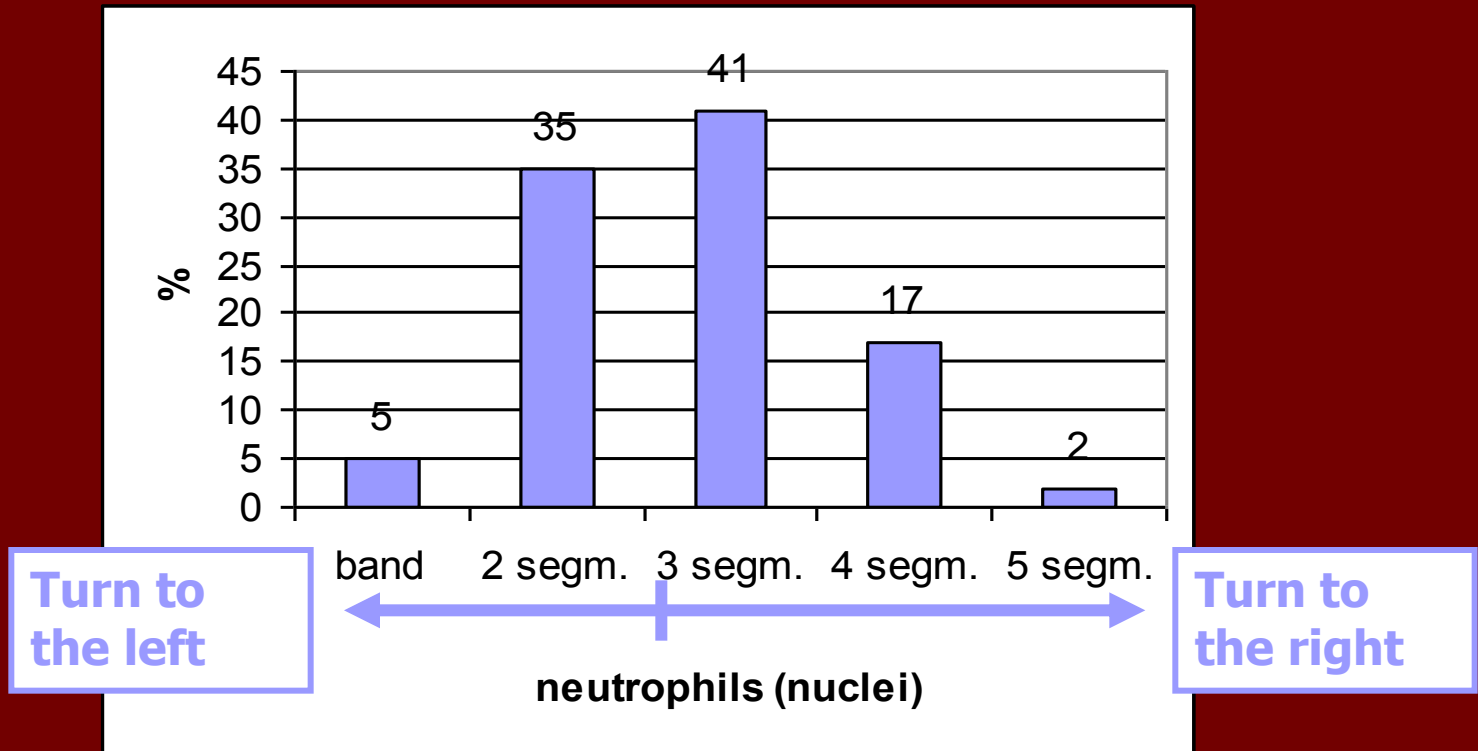
	↑ Increased number	↓ Decreased number
Neutrophils*	neutrophilic granulocytosis	neutrophilic granulocytopenia
Eosinophils	eosinophilic granulocytosis	eosinophilic granulocytopenia
Basophils	basophilic granulocytosis	basophilic granulocytopenia
Lymphocytes	lymphocytosis	lymphocytopenia
Monocytes	monocytosis	monocytopenia

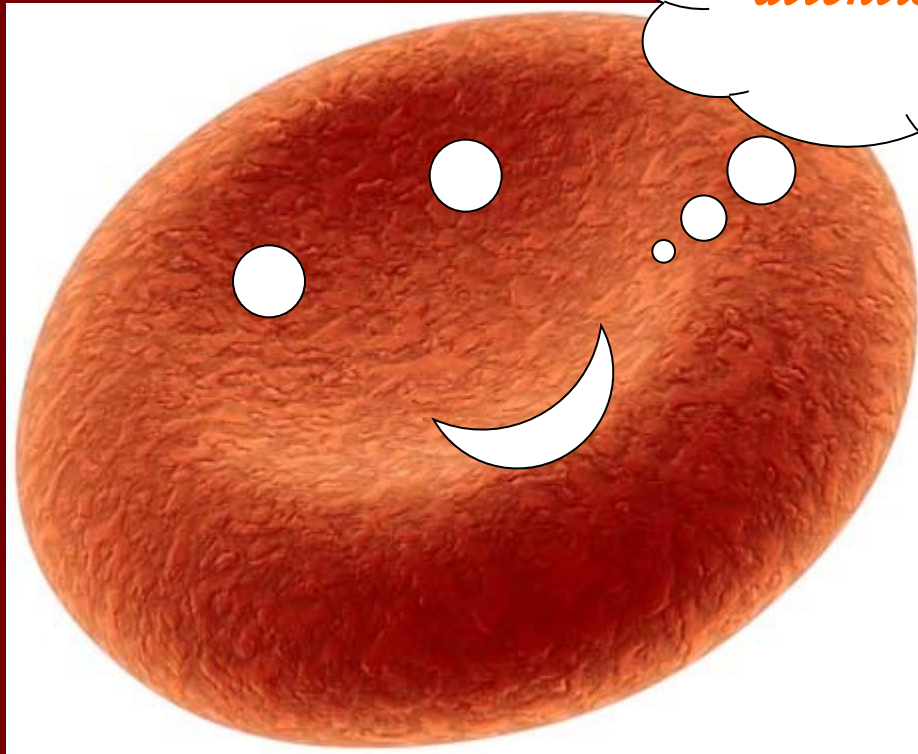
* sum total of bands and segments has to be compared with norm; normal value is 71 % (4 % bands + 68 % segments)

Normal ratio of neutrophil bands and segments

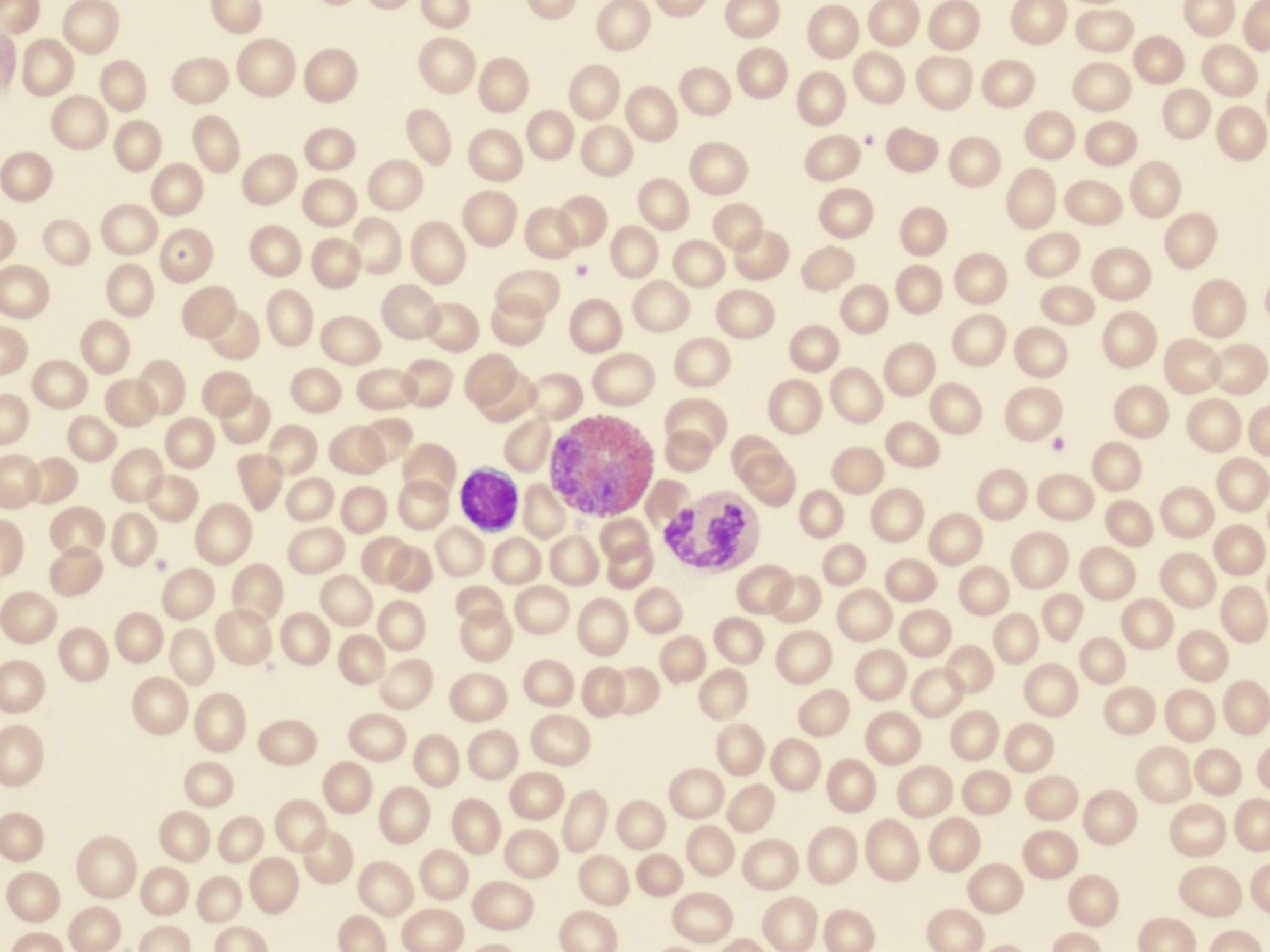
Bands : Segments ratio is 4 % : 68 % = 1 : 17

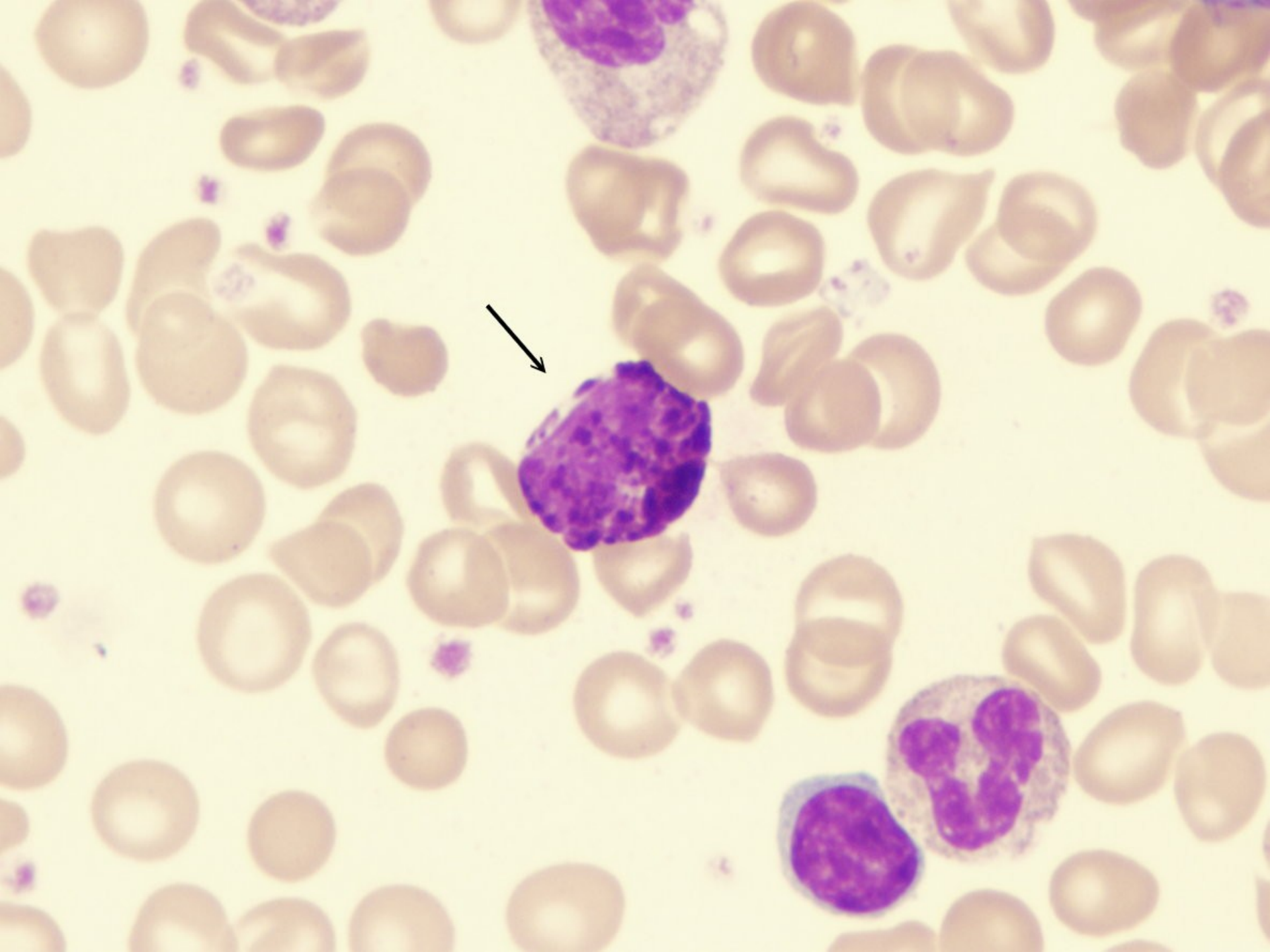
- **Turn to the left** – bands are increased
- **Turn to the right** – segments are increased in peripheral blood

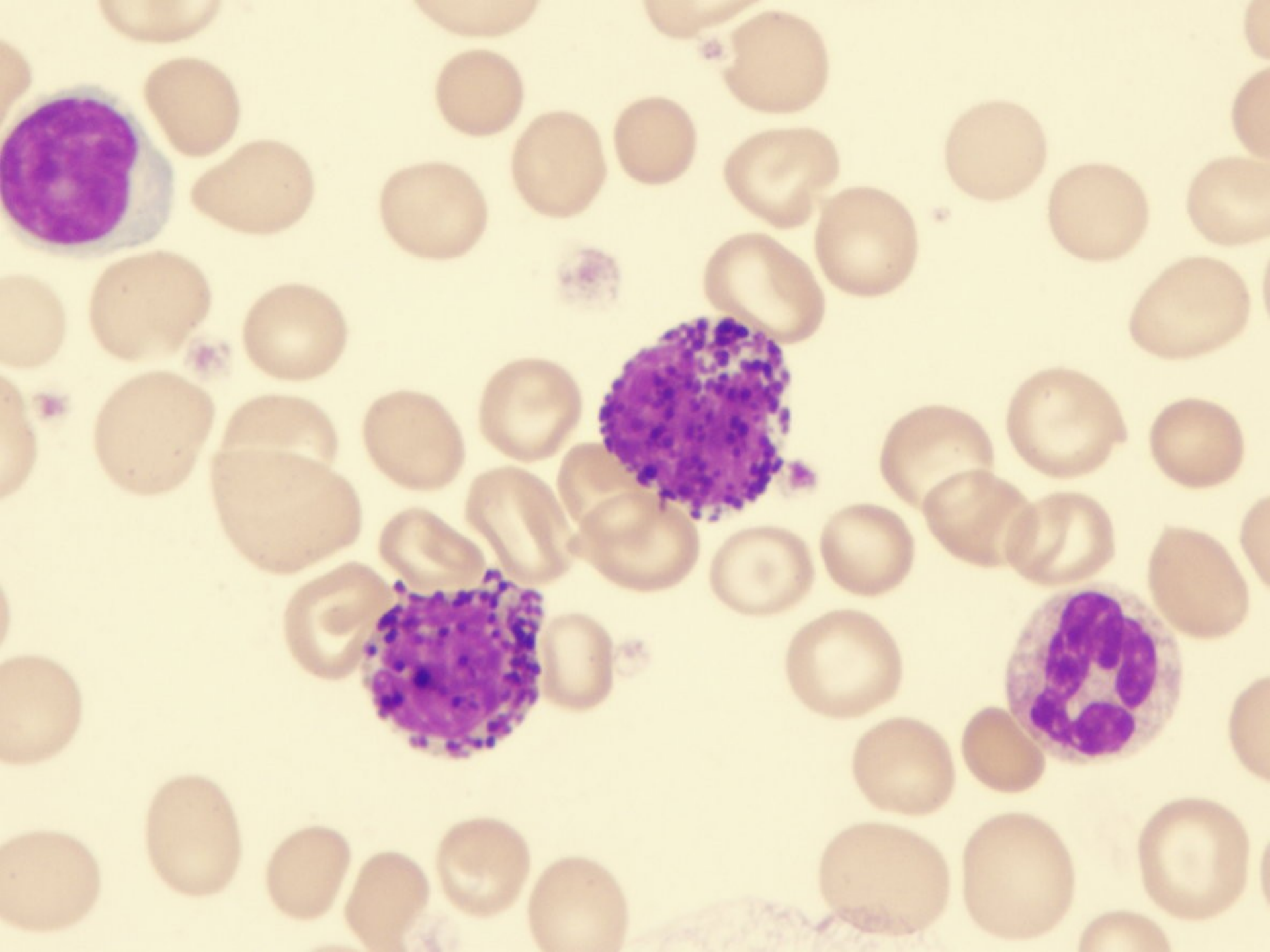


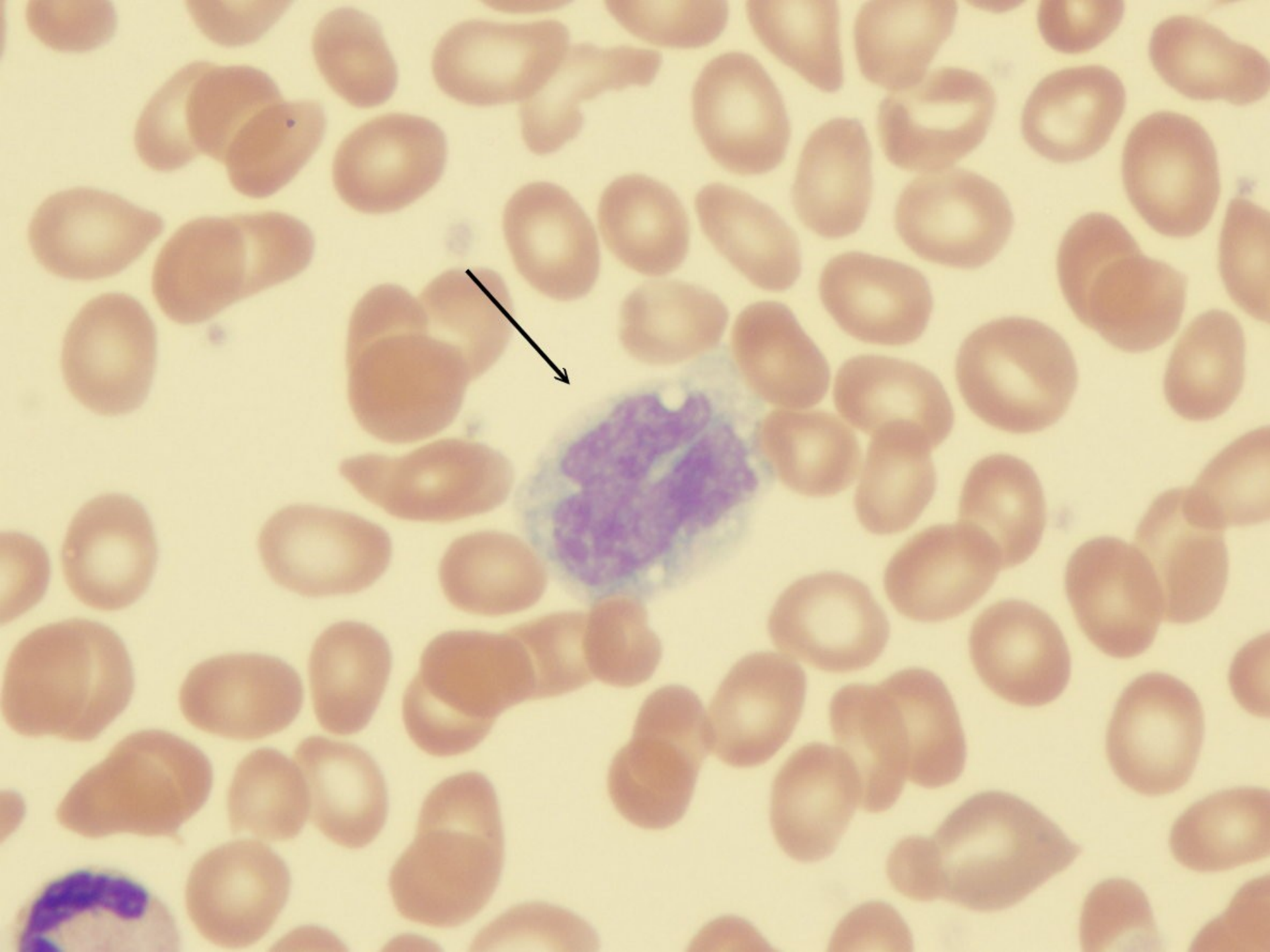


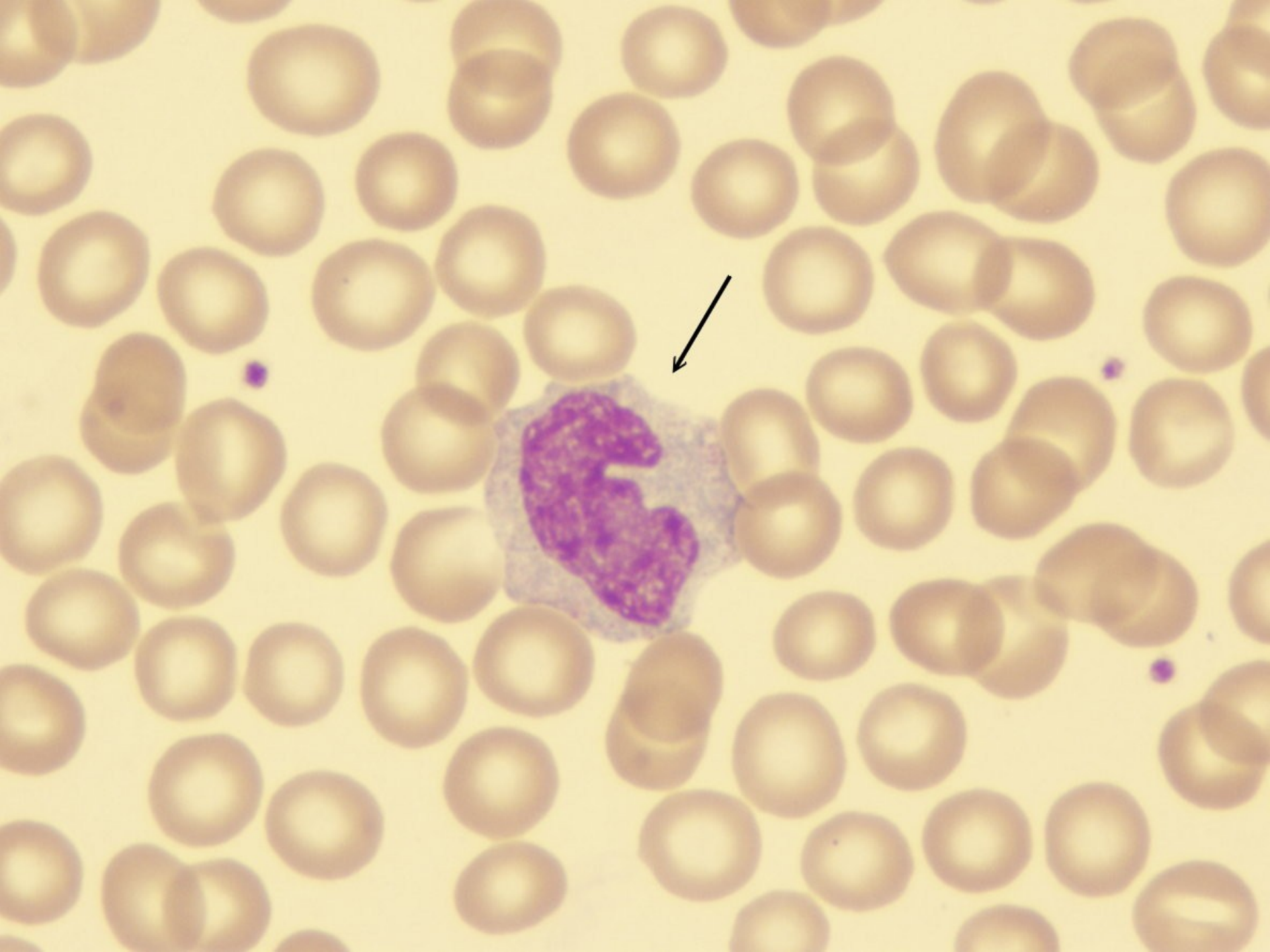
*... thank you for
attention ...*

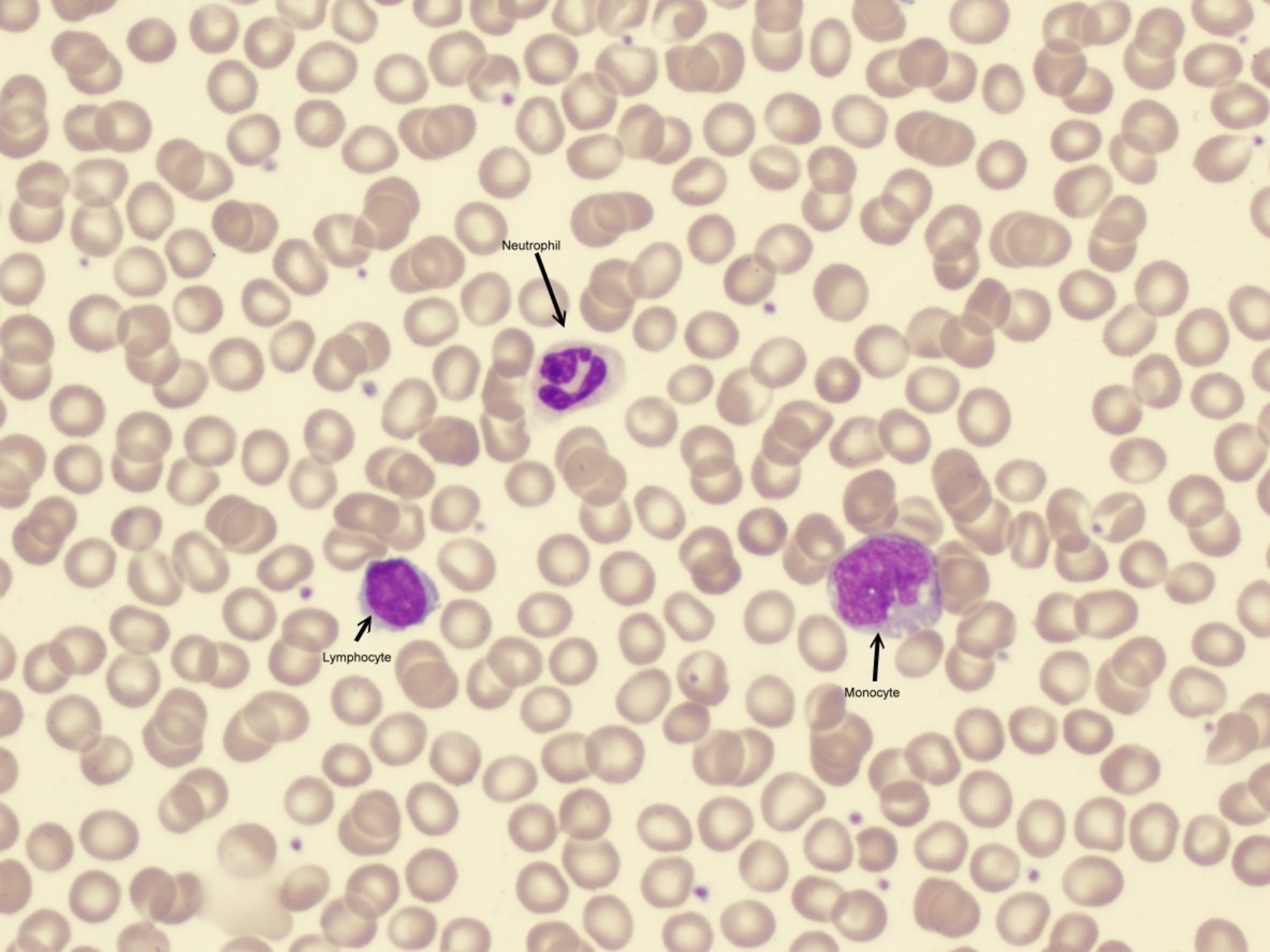












Neutrophil



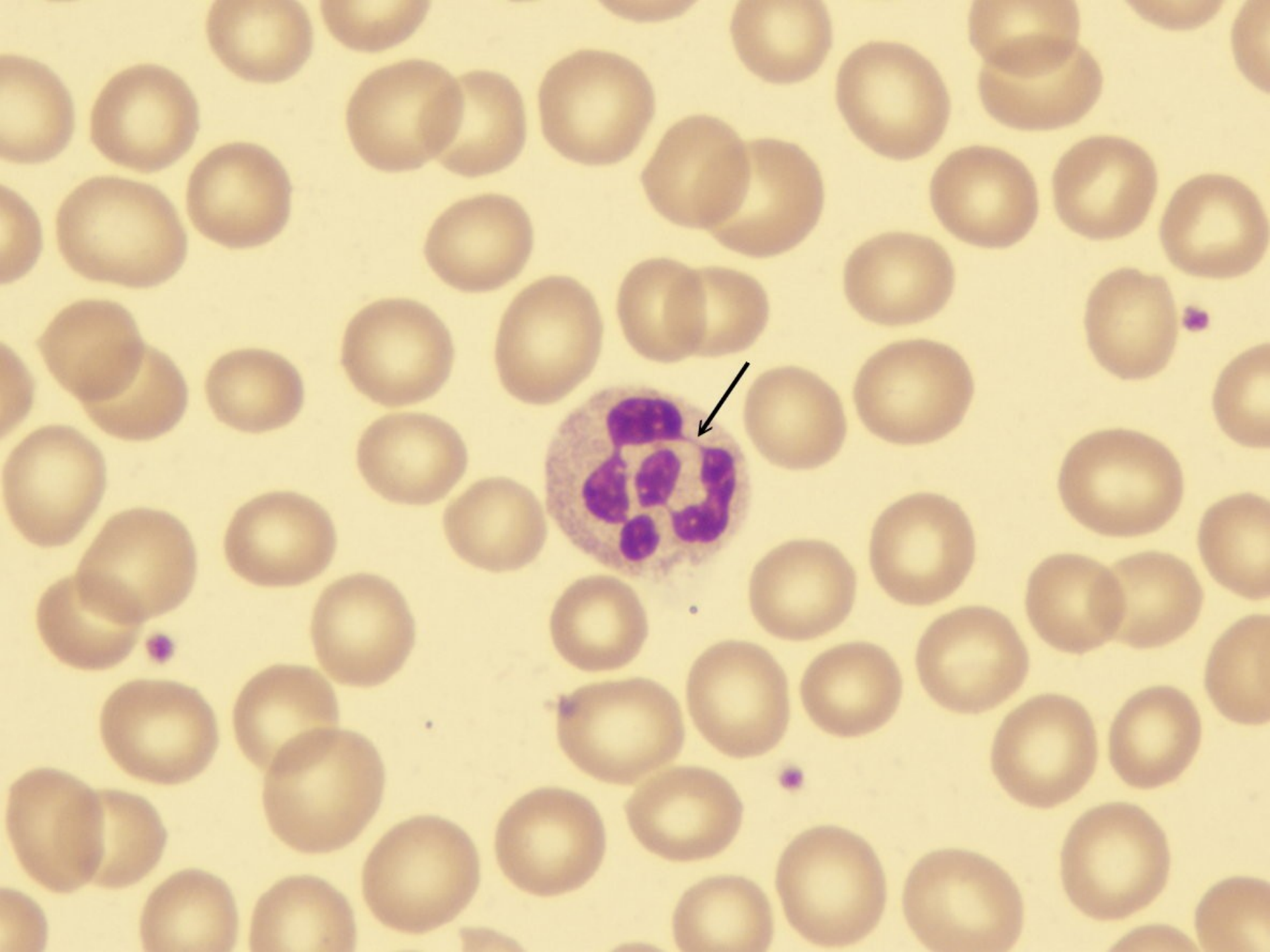
Lymphocyte

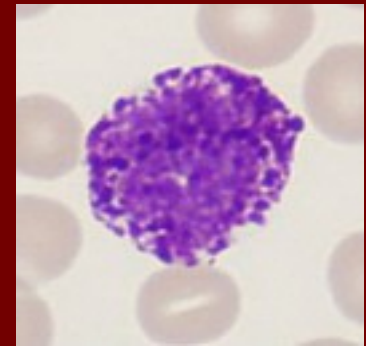
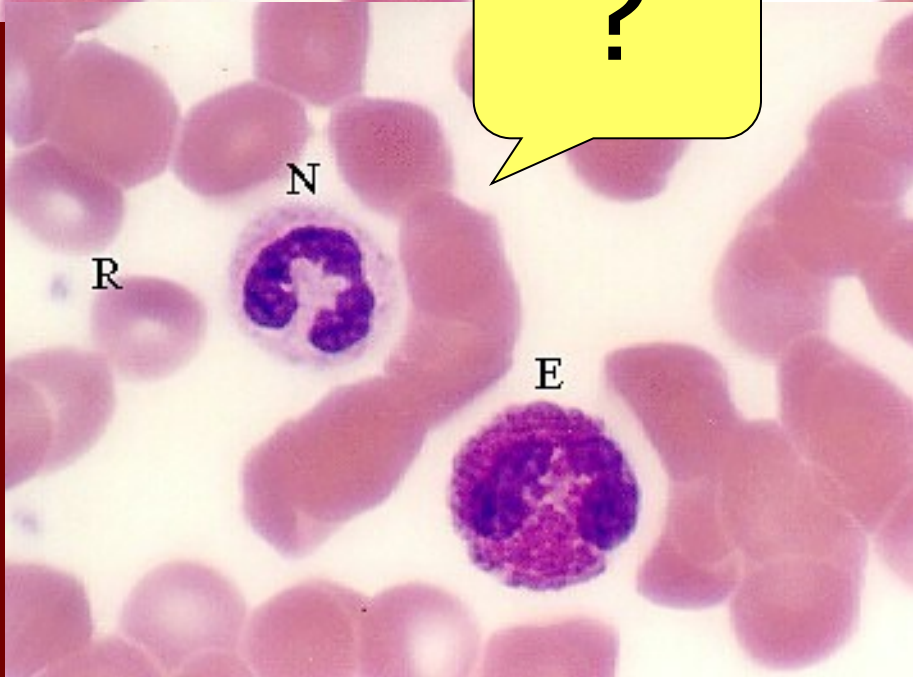
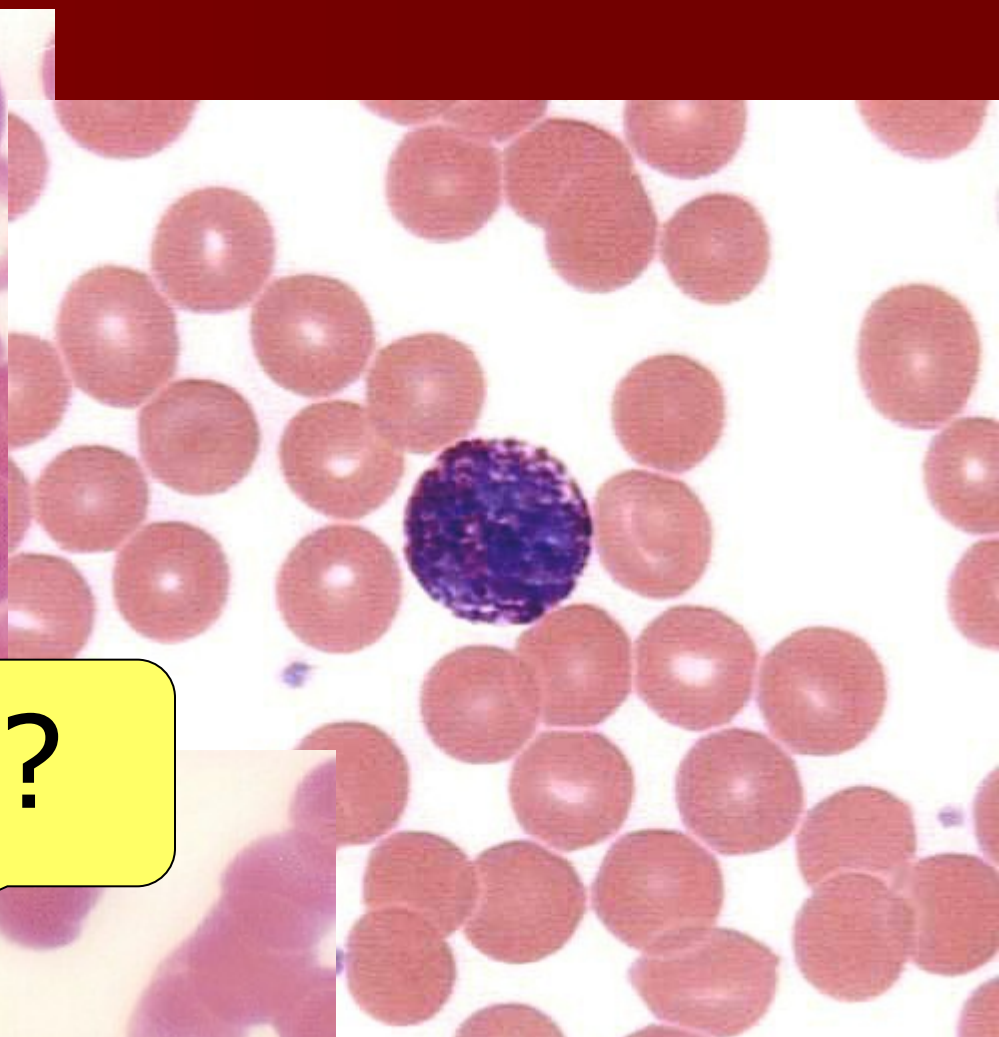
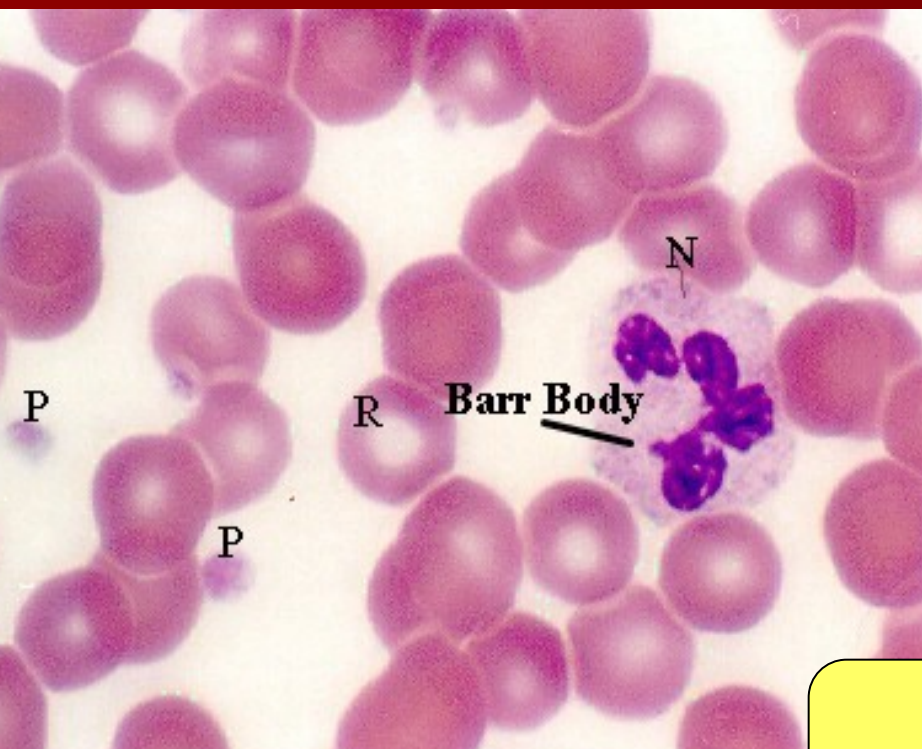


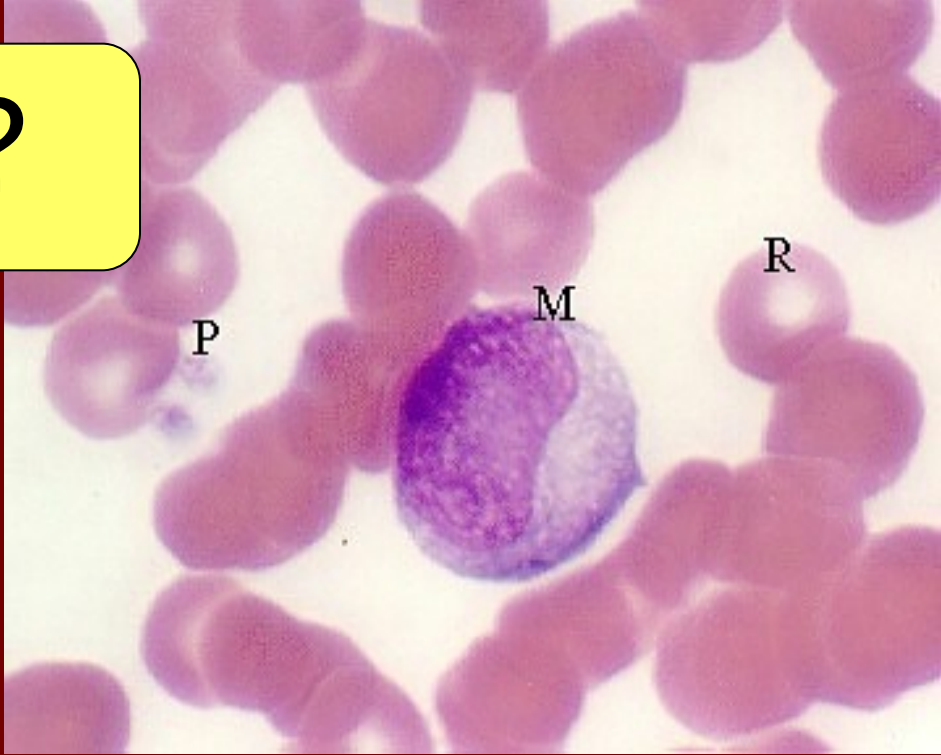
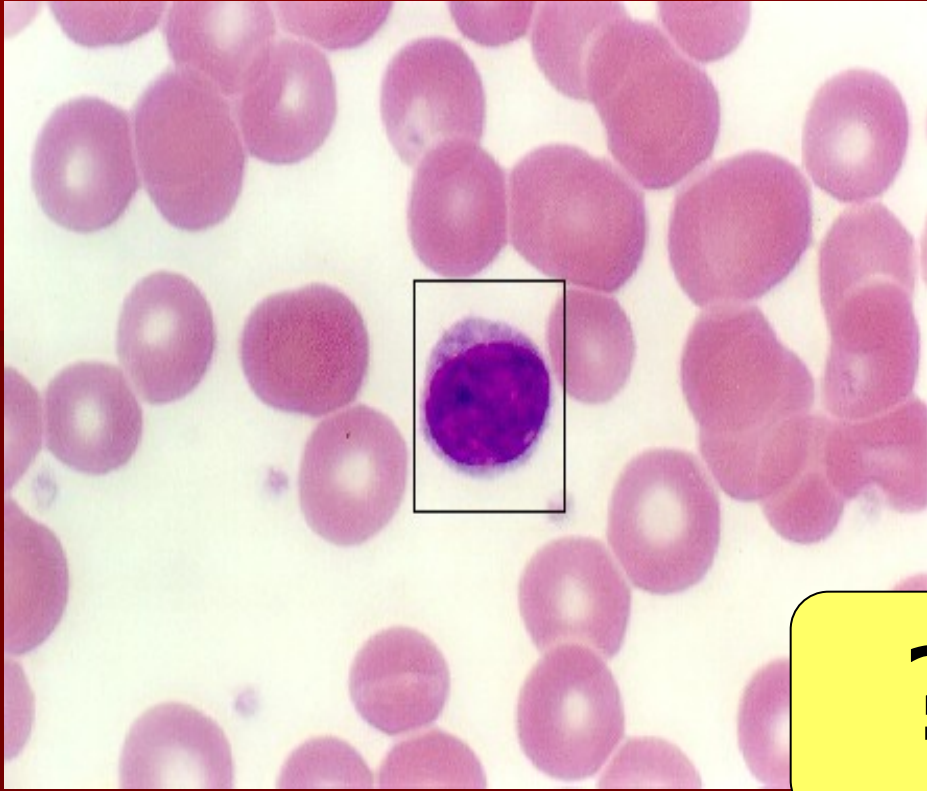
Monocyte

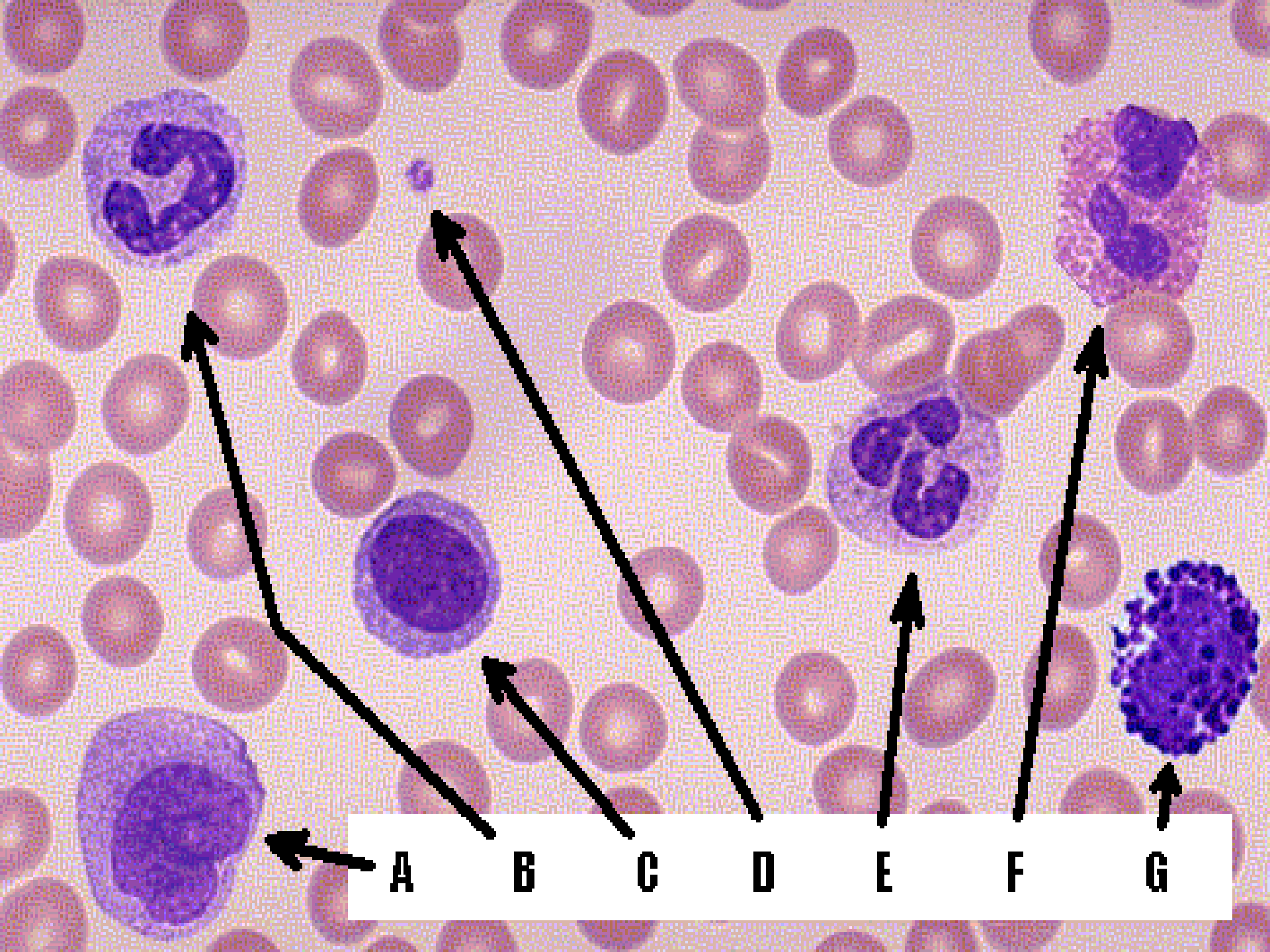




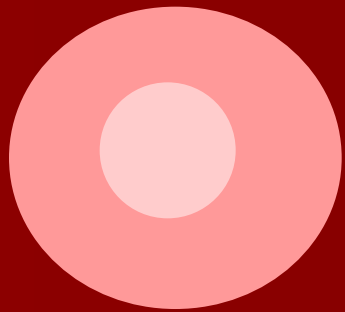




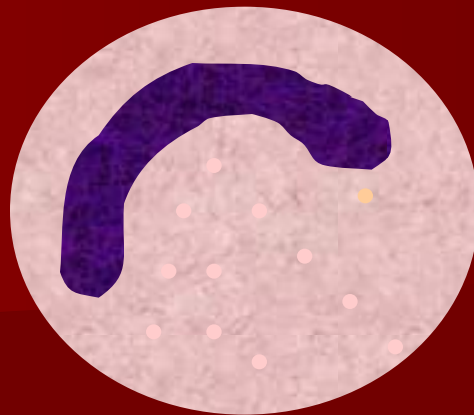




A B C D E F G



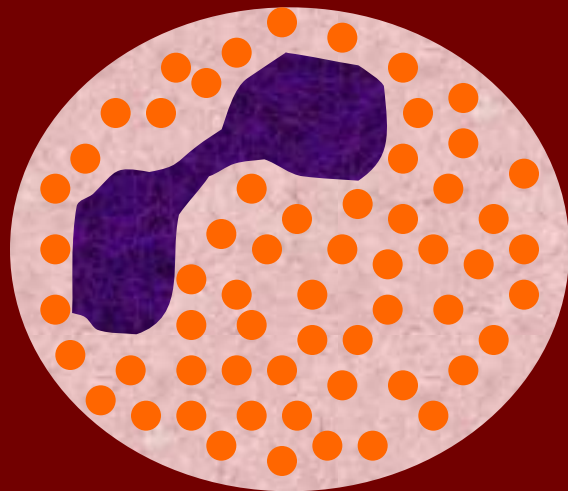
Ery 7.4 h



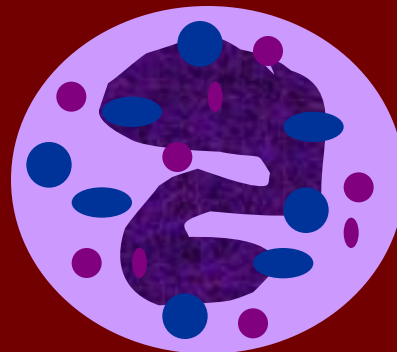
Neu – band

10 – 12 h

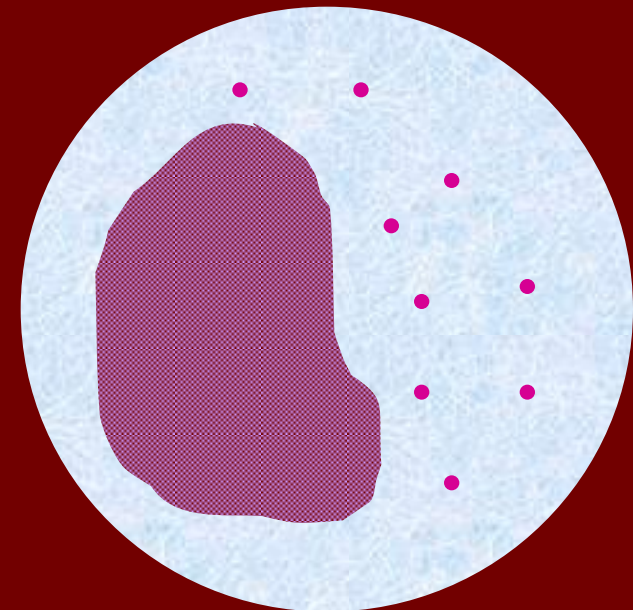
Neu – segment



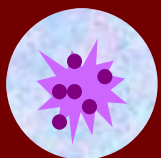
Eos 12-14 h



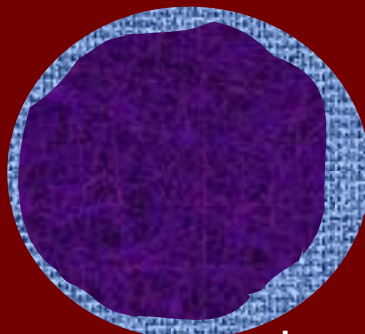
Baso 10 h



Mono 15 – 20 h

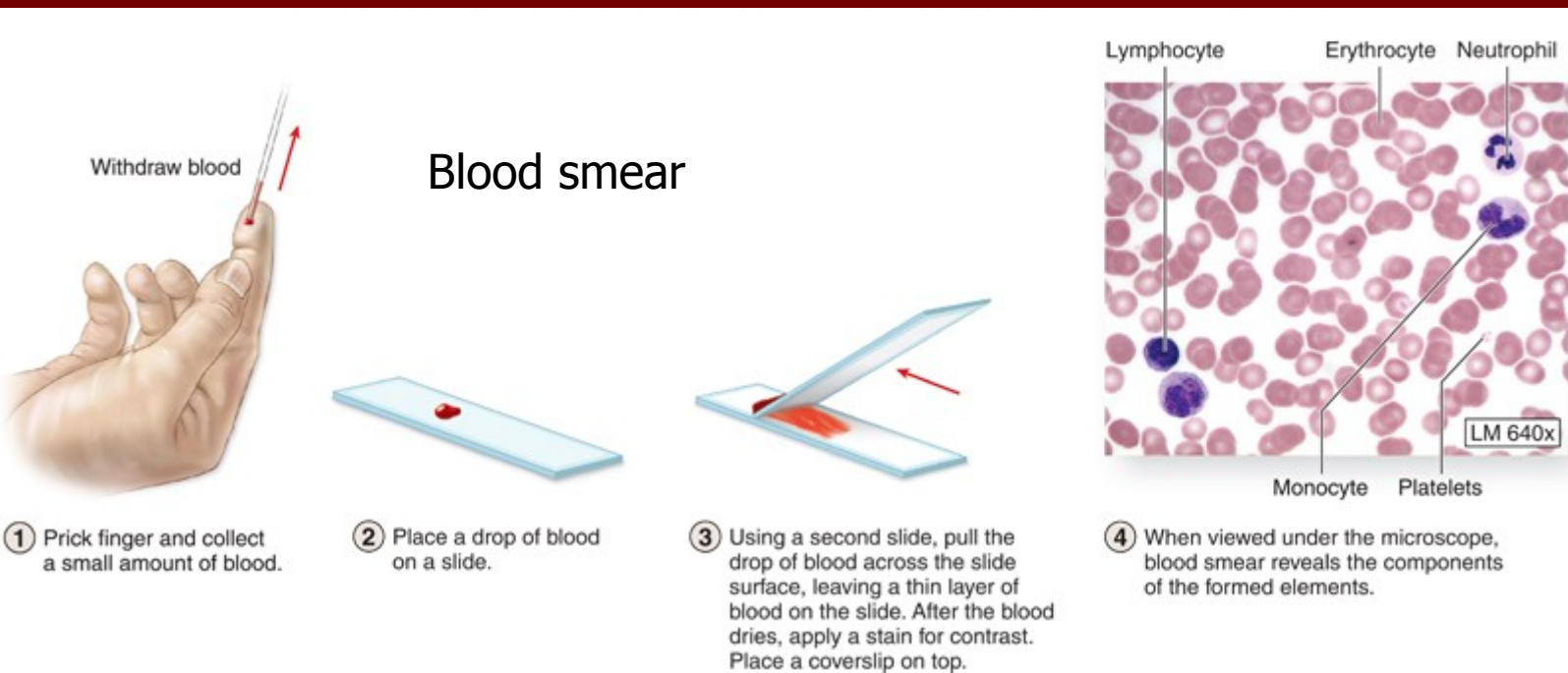
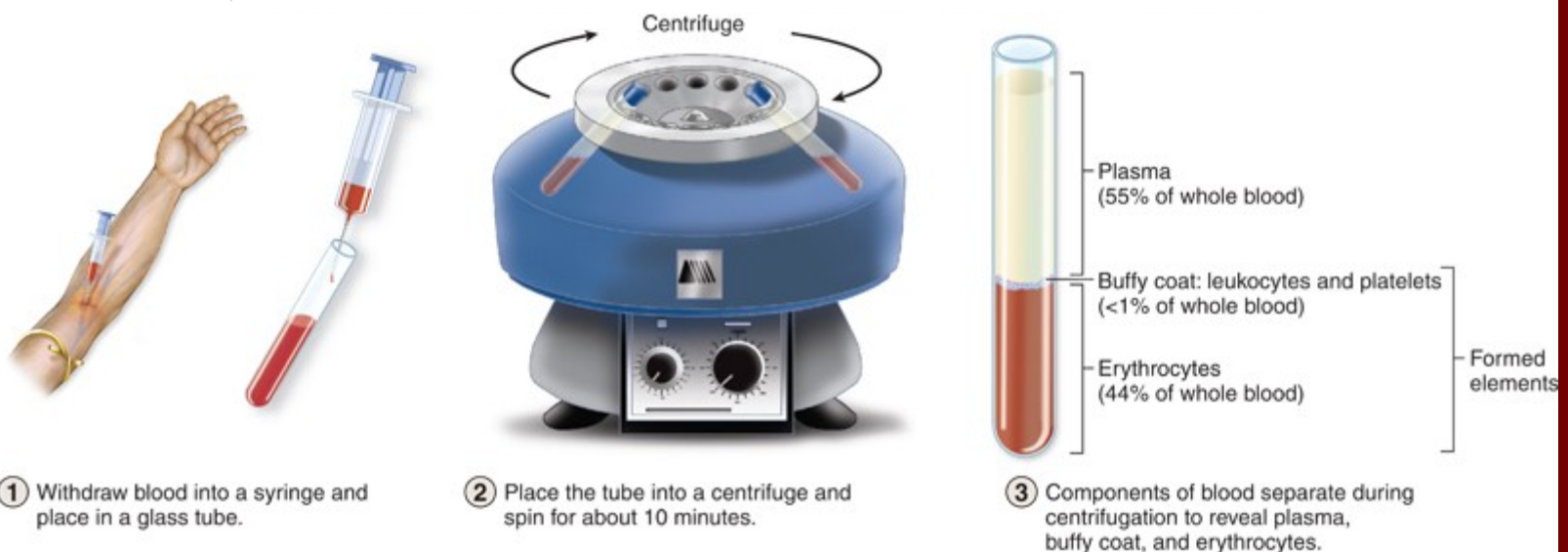


Platelet 2 – 4 h



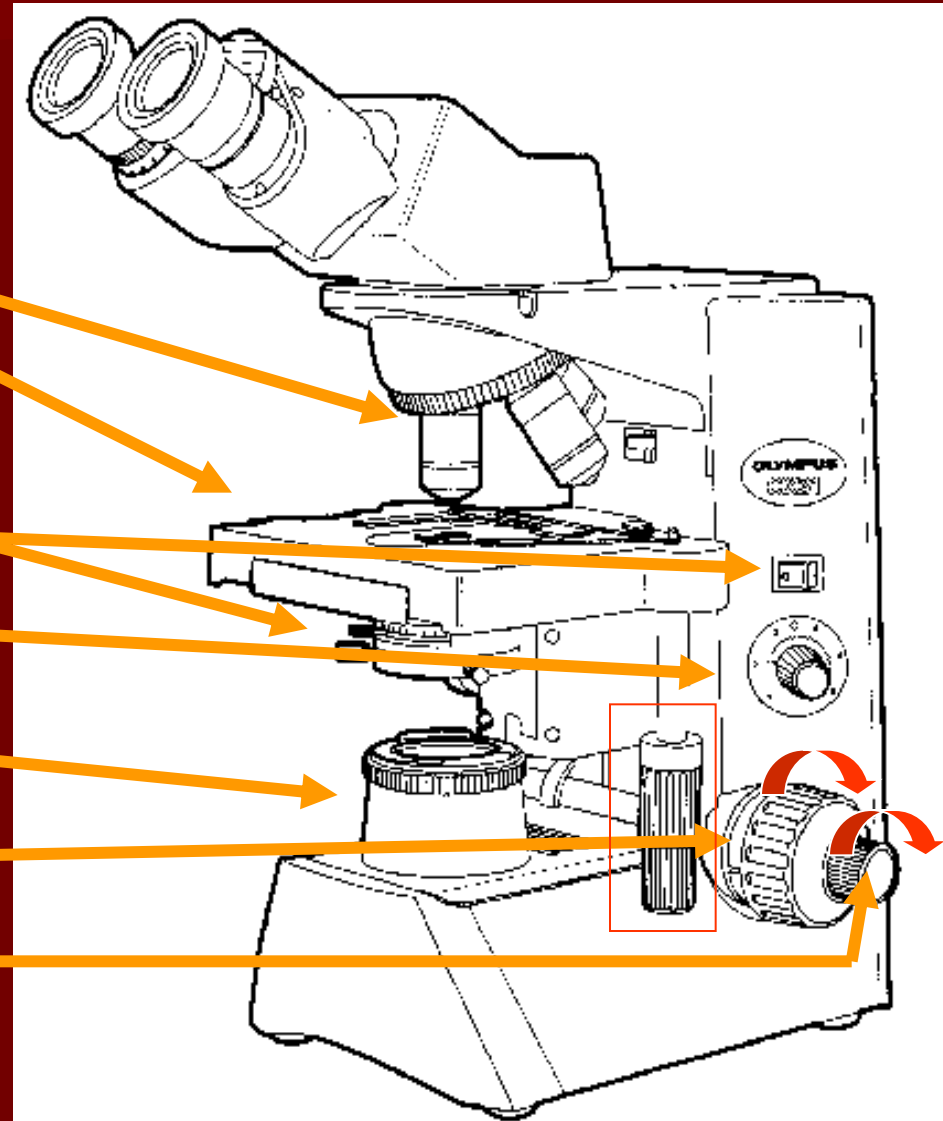
Lymfo 8 h

Blood investigation



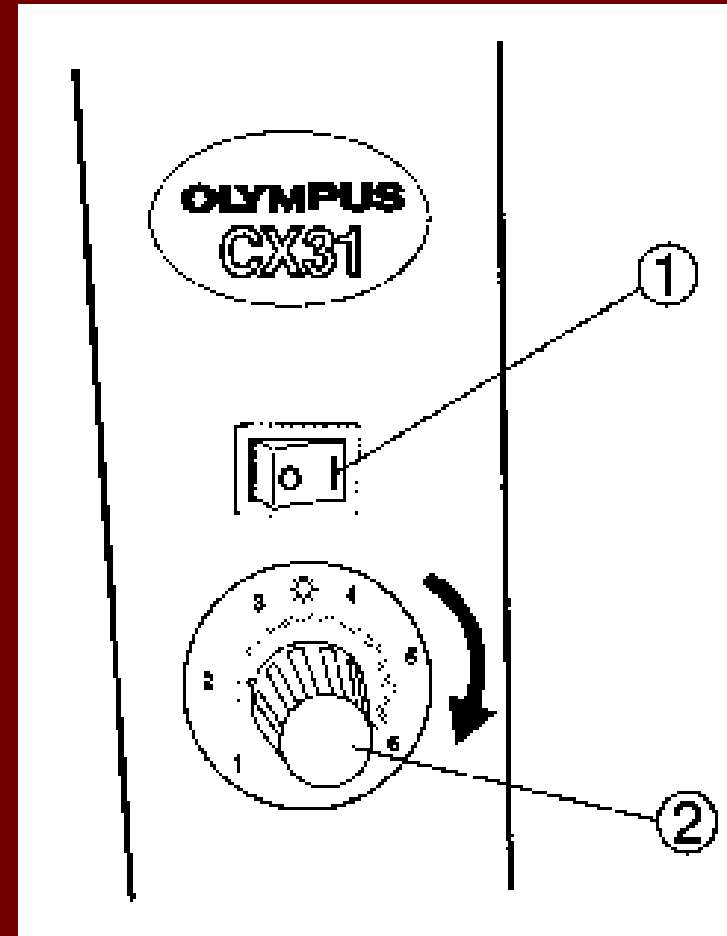
Light microscope

- Eyepieces
- Objective lens
- Stage with slide holder
- Condenser
- On/off switch
- Light intensity control
- Source of light beam
- Course adjustment knob
- Fine adjustment knob



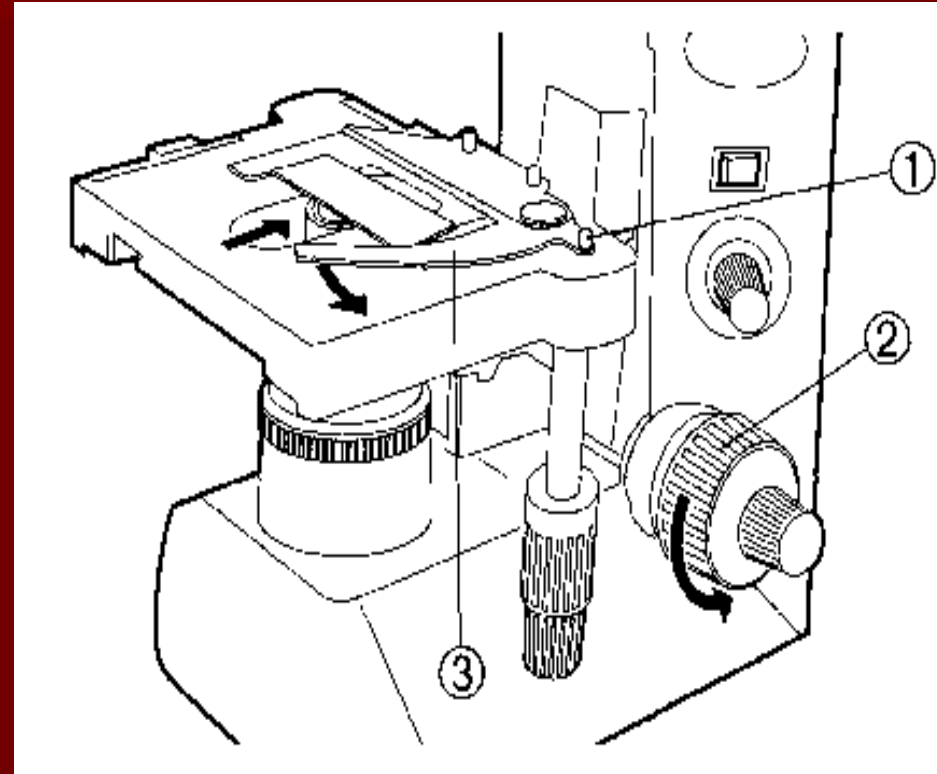
Light microscope manipulation

- on/off switch knob (1) (rocker or wheel SW)
- pivoted potentiometer (2) regulate intensity of emitted light



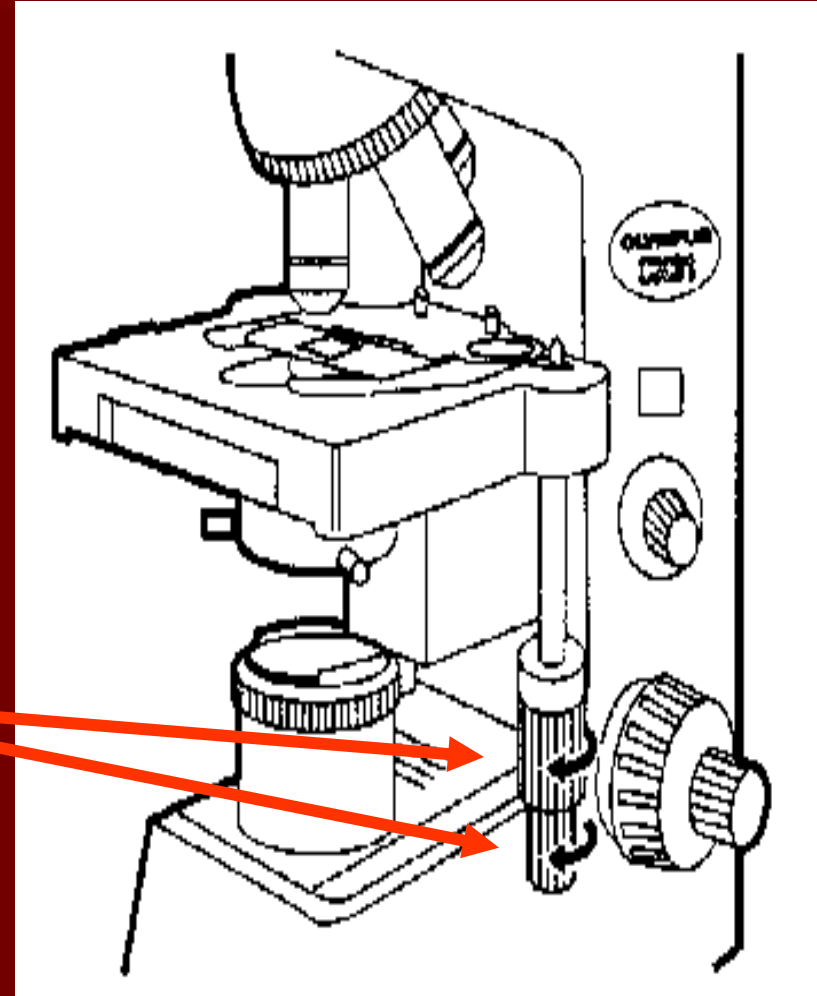
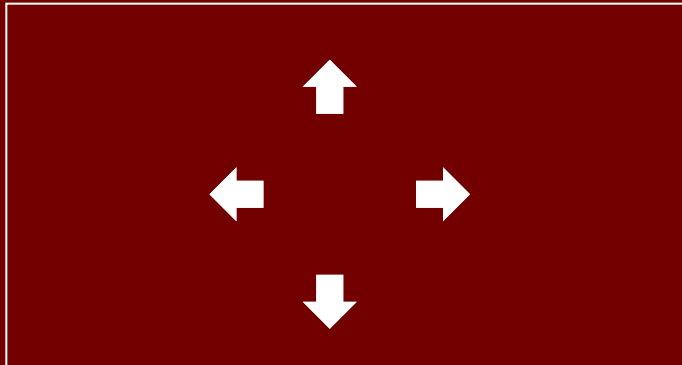
Light microscope manipulation

- Stage with slide holder (3)
- Lever of holder (1)
- Focusing knobs (2).



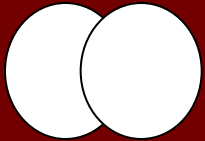
Light microscope manipulation

- Use mechanism of cross shift for shift of the slide on the stage



Light microscope manipulation

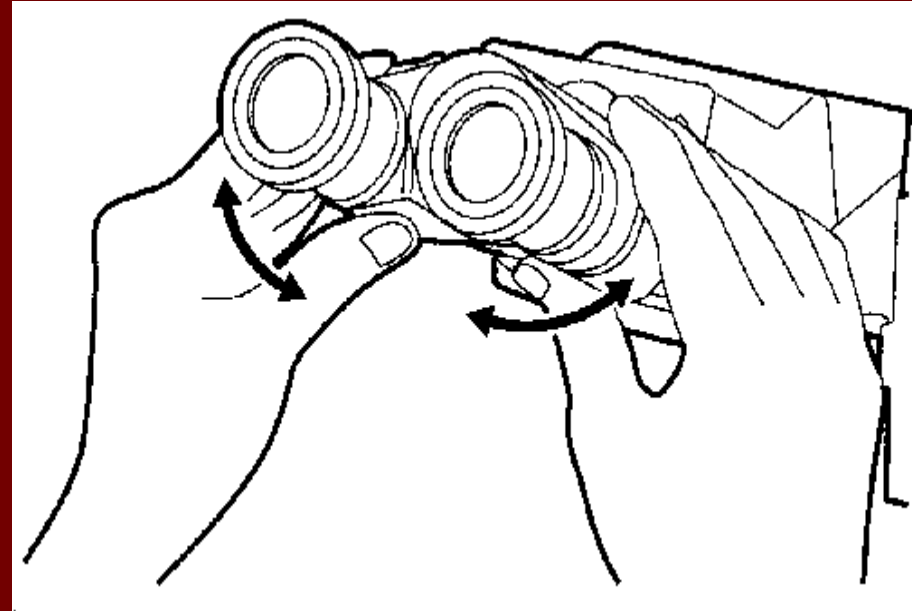
- focus a picture in LM and look at it with both eyes
- regulate a distance between the eyepieces so, you can see one focused circular field



bad

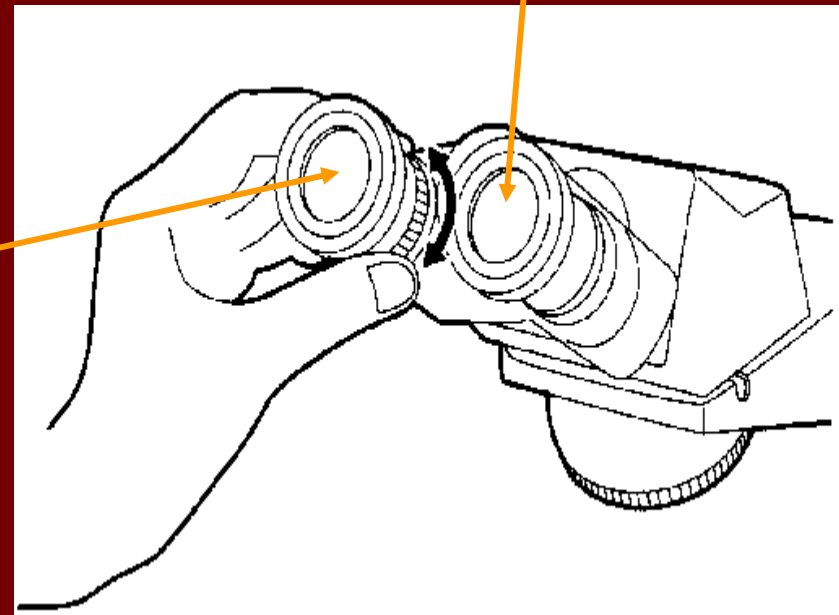


correct



Light microscope manipulation

- Look at the slide only through the right eyepiece and focus some point in the picture.
- Without refocusing, look at the left eyepiece.
- In doing so, screw the ring below the left eyepiece to focus the same point.
- So, the dioptric correction is set up.



Now, you can start to study blood smear in your LM 😊

Basophil

