

SECRETION

- Salivary glands
- Gastric glands
- Small glands of esophagus and intestine
- Exocrine pancreas
- Liver

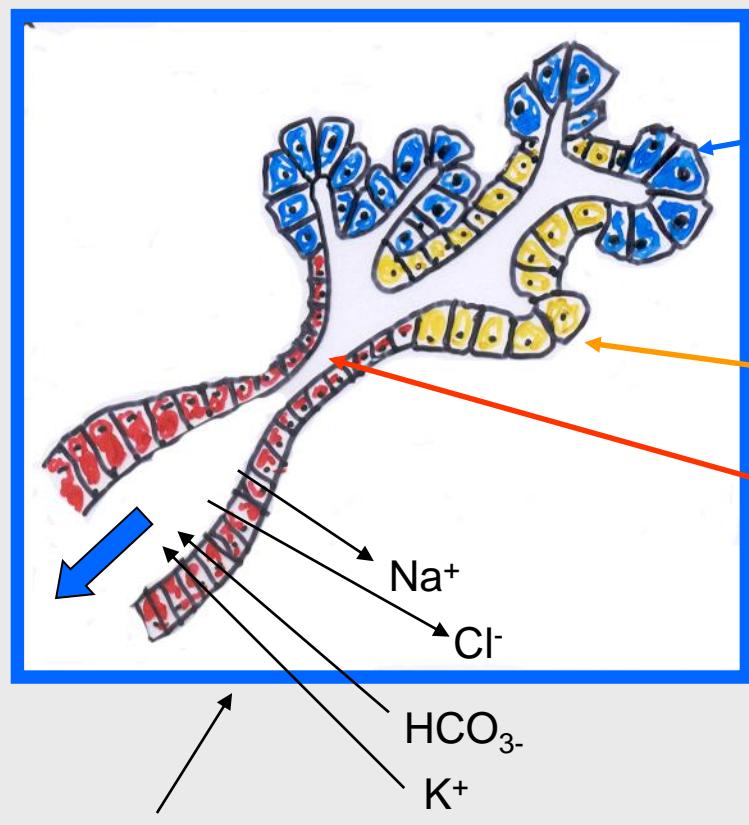
- Lubrication of food
- Swallowing
- Mechanical protection of GIT
- Chemical protection of GIT
- Enzymes
- Immune function(s)
- Articulation

STIMULATION OF SECRETION

1. Neurocrine
2. Endocrine
3. Paracrine

PRODUCTION OF SALIVA

- Mucinous vs. serose secretion
- Gl. parotis, gl. submaxilaris, gl. sublingualis, small salivary glands in mouth
- 1 litre / day (1ml/min/g)
- High resting blood flow – 10 x contracting muscle, high metabolic exchange
- pH: 7 – 8 (at rest rather acidic, increase in HCO_3^- - alkalization)
- Parasympathetic stim. – Ach, VIP, VII. a IX.n., ; vasodilatation



PRIMARY SALIVA

ACINES

Serose secretion (H_2O , ions; isotonic)(gl.parotis)
Salivary amylase (zymogenic granules – exocytosis)
Over pH 4!!!
Mucinose secretion (glykoproteins) (gll.submaxilaris and sublingualis)

DUCTUS

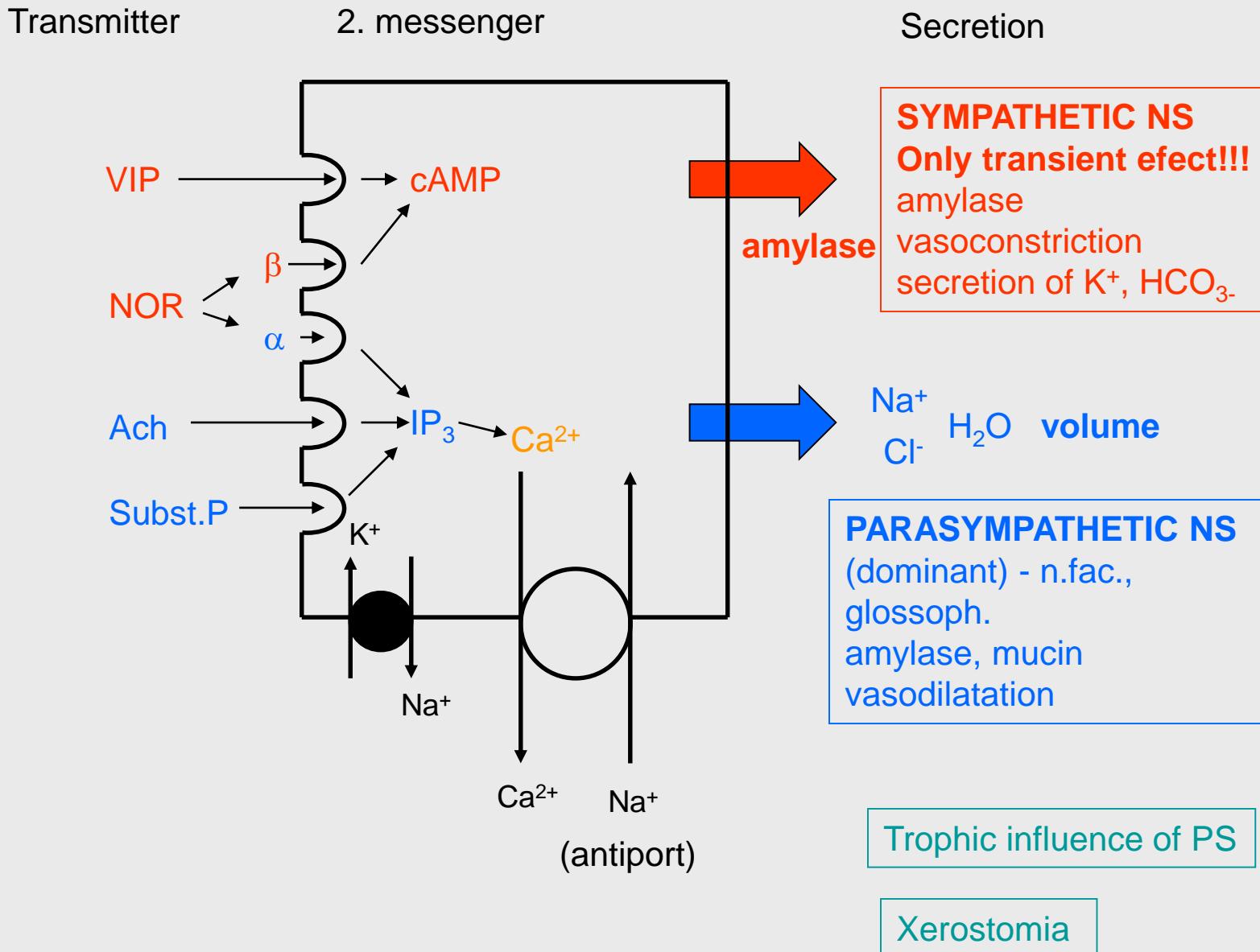
SECONDARY SALIVA

pH ~ 8

(hypotonic, after stimulation – increased tonus)

Resembles exocrine pancreas

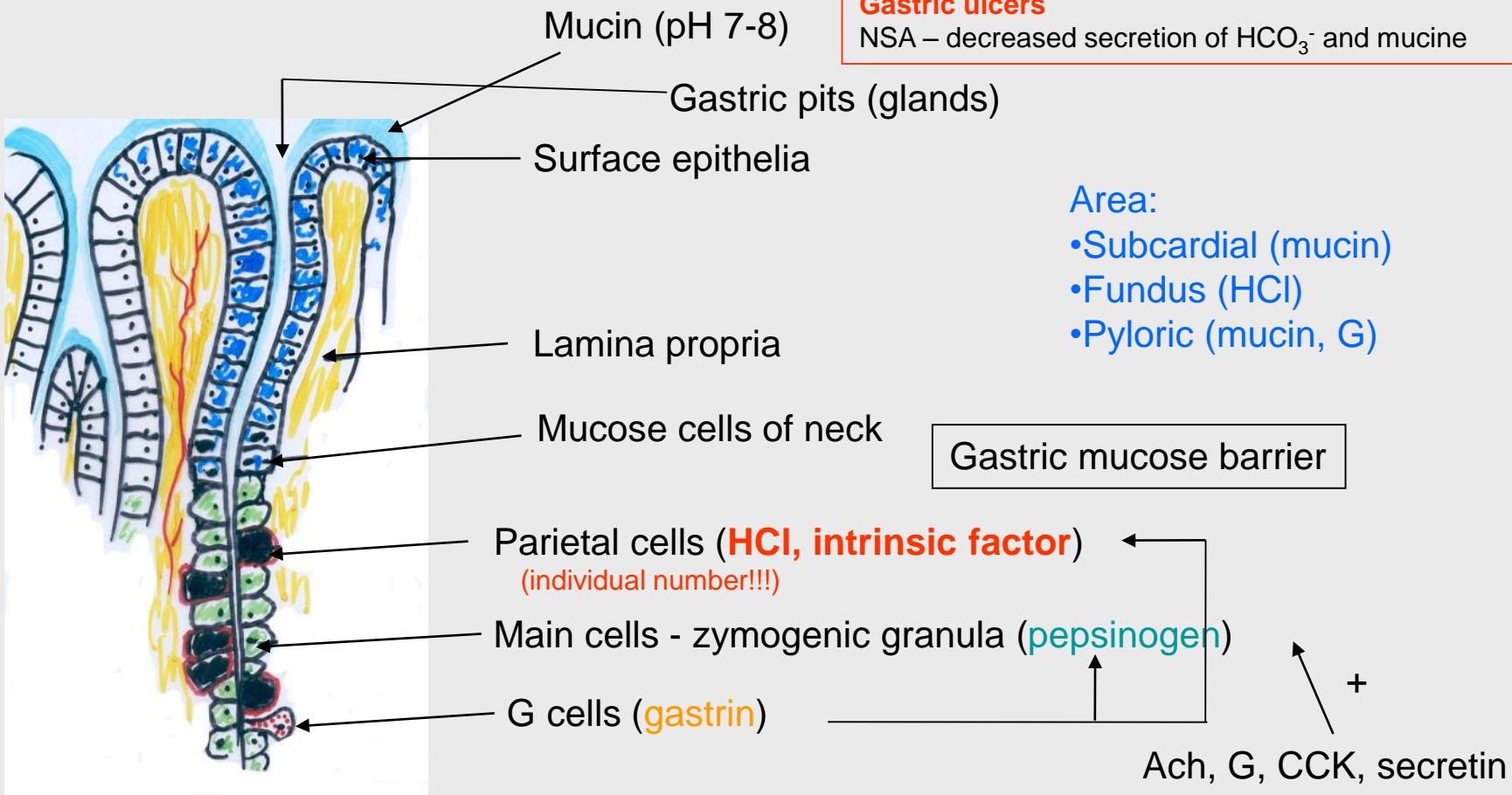
REGULATION OF SALIVA PRODUCTION



SECRETION OF GASTRIC JUICE

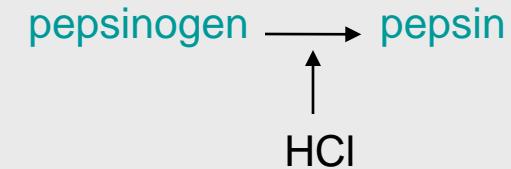
pH 2, high concentration of K^+ (vomiting) a Cl^-

Stimulation of α -receptors – decreased secretion of HCO_3^-
Gastric ulcers
NSA – decreased secretion of HCO_3^- and mucine

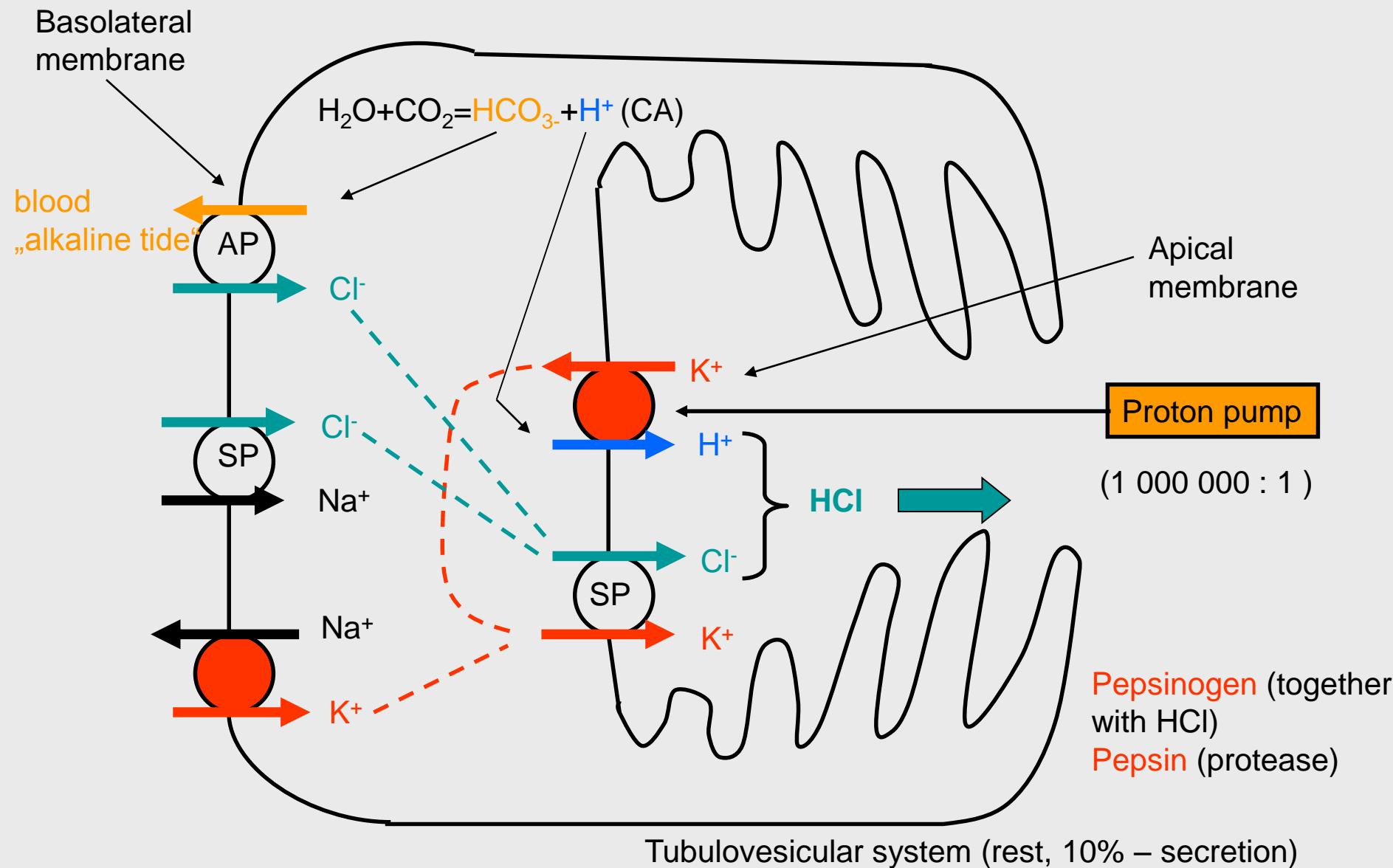


Gastric juice: water, salts, HCl, pepsin, intrinsic factor, mucin
Production increases after meal

Higher secretion – lower pH, lower secretion – more Na^+ , (always more K^+ than in plasma)

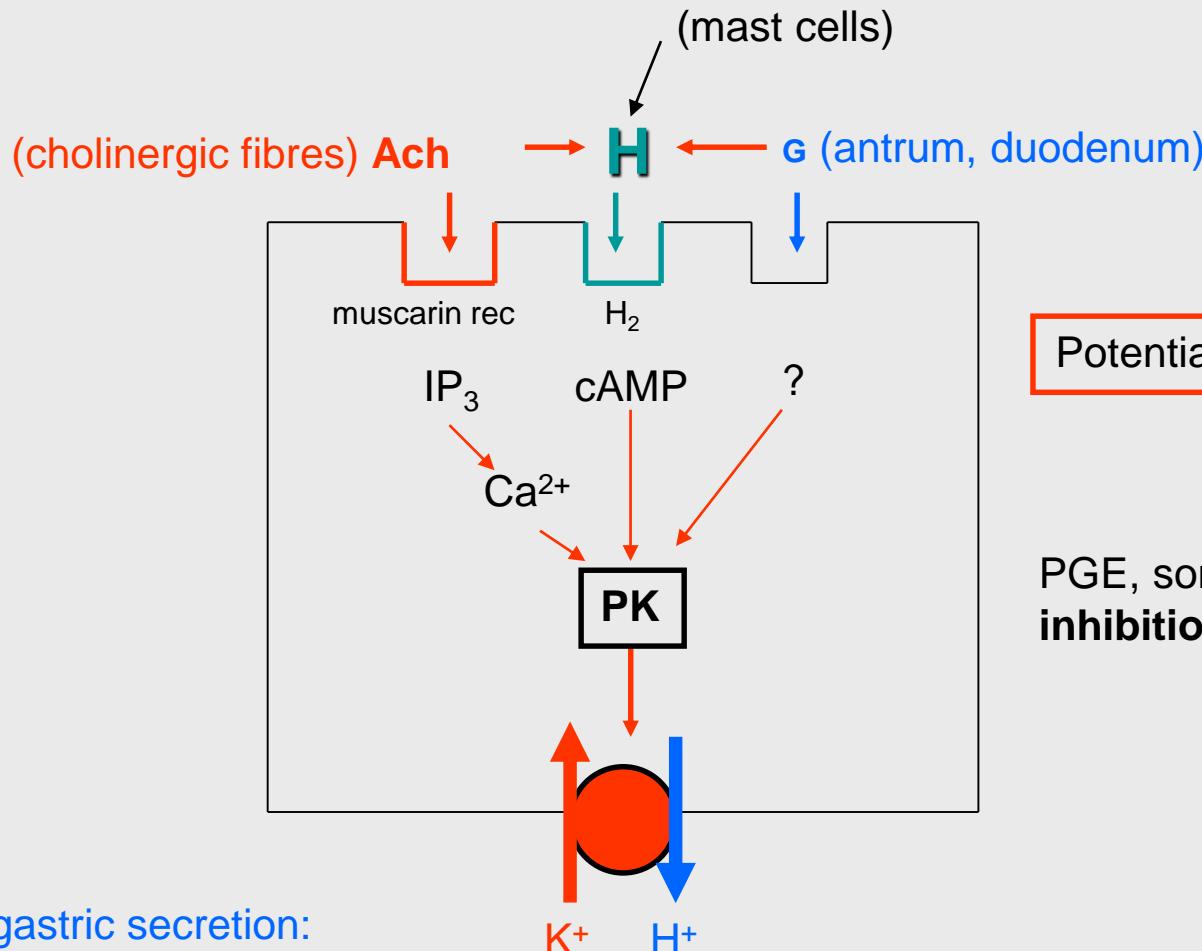


HCl PRODUCTION IN parietal cell



INTRINSIC FACTOR: binding protein (glycoprotein) for vitamin B₁₂ (pernicious anaemia)

CONTROL OF HCl PRODUCTION IN parietal cell



Phases of gastric secretion:

- **Cephalic** (vision, smell, taste)(X.)(directly, G, H)
- **Gastric** (distension of stomach; peptides, AA)(mechanorec.-local and centr. reflexes; trypt., fentanyl, caffeine, alcohol – G)
- **Intestinal** (distension of duodenum, peptides, AA)(G from duodenum and jejunum)

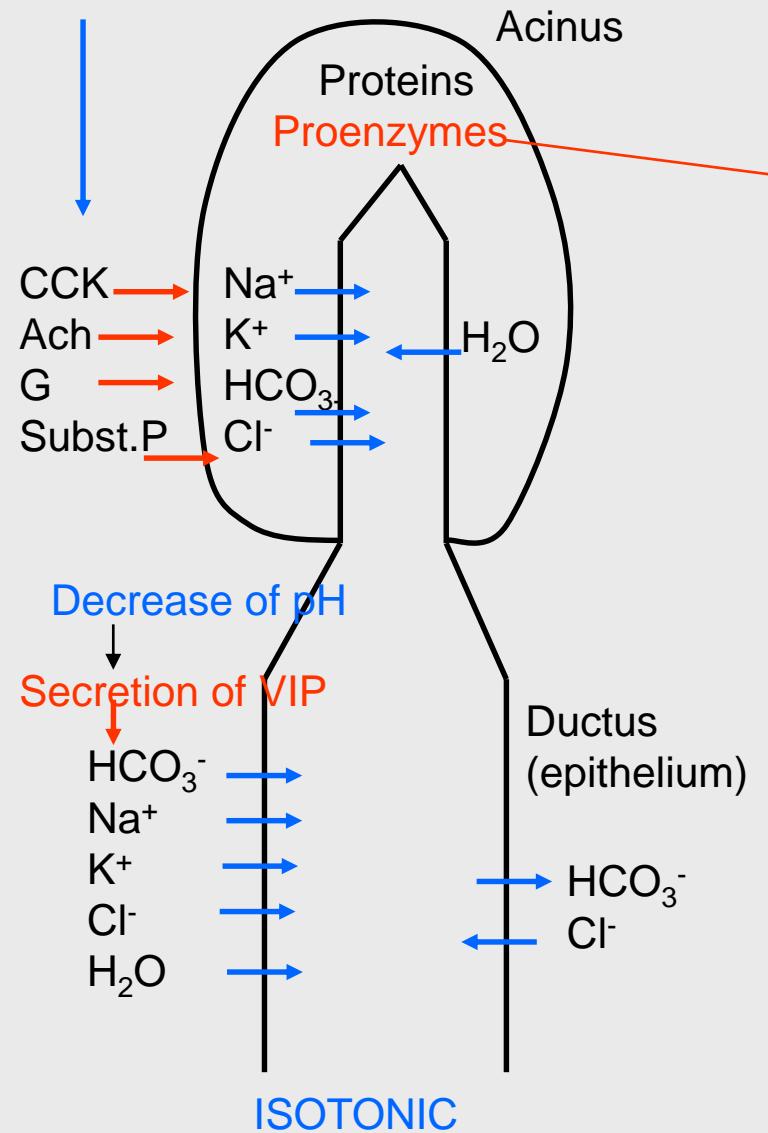
Inhibition of gastric secretion:

Low pH, FA, hypertonia v duodenum and jejunum; secretin, bulbogastron, GIP, CCK

CONTROL OF PANCREATIC JUICE SECRETION

100 gr
1 l/day
exo-endo
n. X.

Digestion products
(lipids, peptides)



1. Water phase (HCO_3^-) - secretin
2. Enzymatic phase - CCK

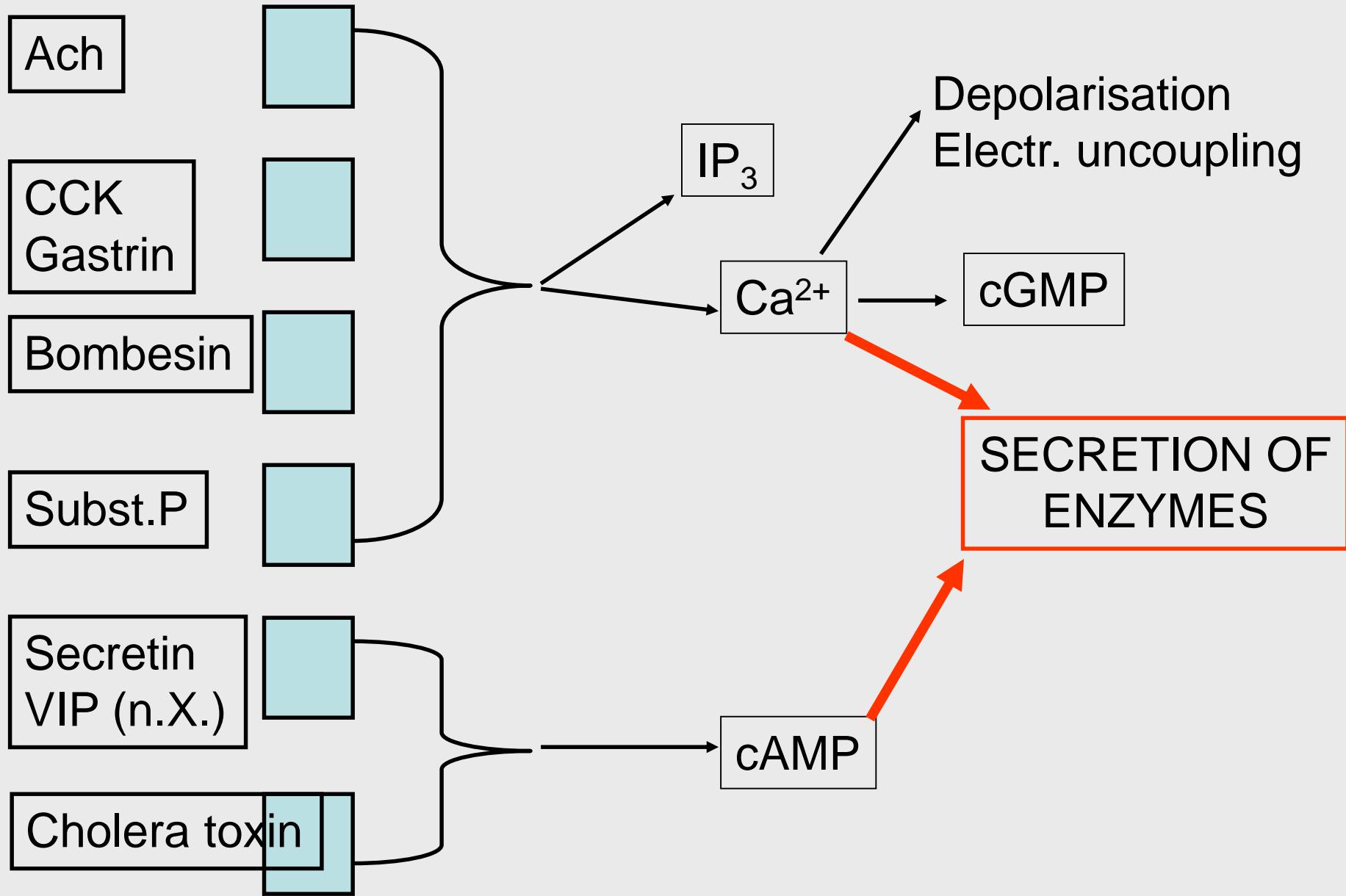
1. Trypsinogen (trypsin activates 1, 2, 3)
2. Chymotrypsinogen
3. Prokarboxypeptidase
4. Trypsin-inhibitor
5. α -amylase
6. Pancreatic lipases
 - Enterokinase – activates trypsinogen

Regulation of secretion:

1. Phase cephalic (n.X. – gastrin)
2. Phase gastric (distension of stomach – gastrin)
3. Phase intestinal (acid in duodenum and jejunum – secretin; peptides, AA = trypt., fenykalanin, FA – CCK)

Oddi sphincter (X. rel.)
Pancreatitis acuta

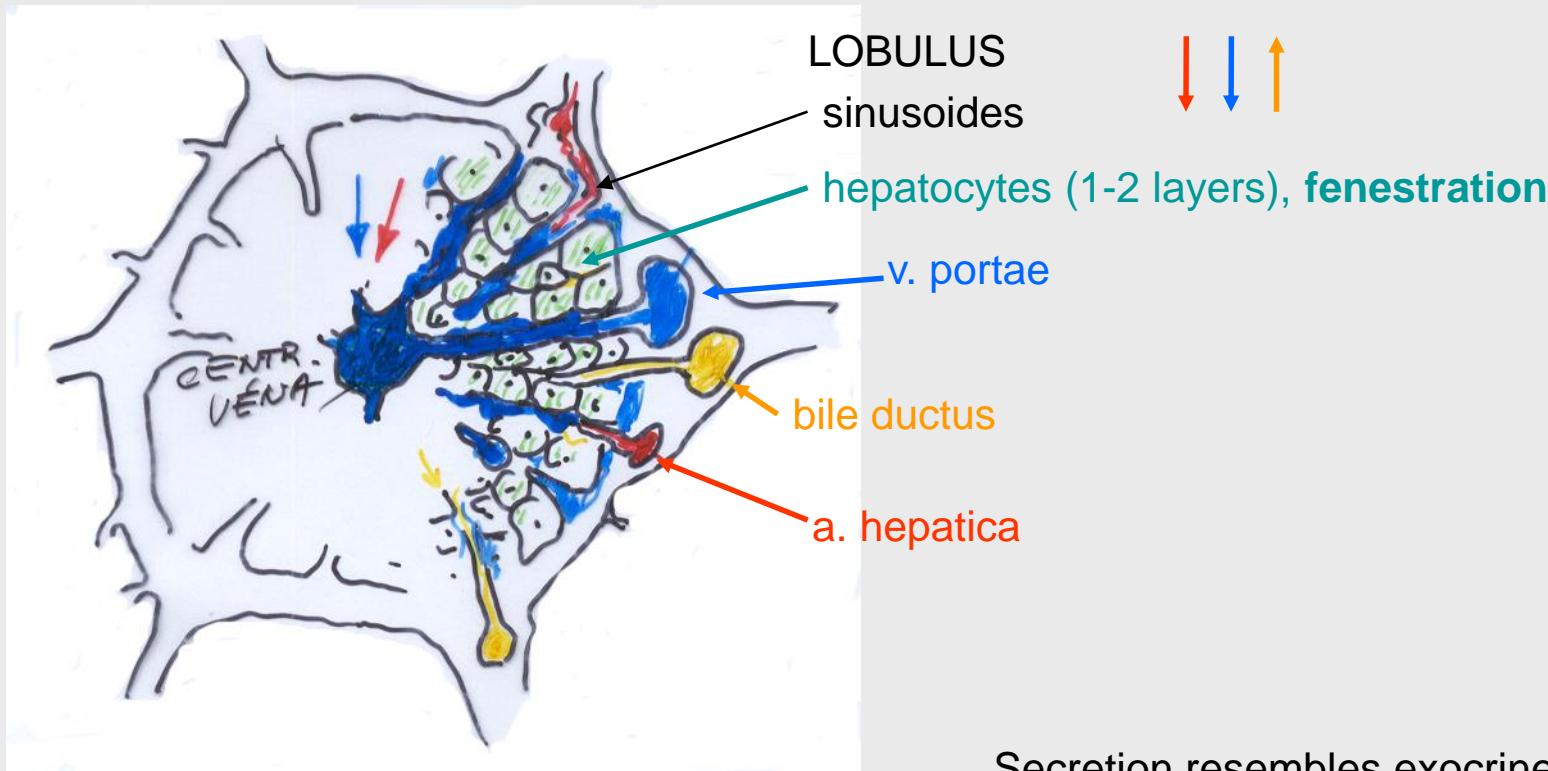
REGULATION OF SECRETION IN ACINAR CELL



LIVER FUNCTION

- **Regulation of metabolism** (saccharides – glycogenolysis, gluconeogenesis; lipids – chylomicrons, lipoprotein lipase, VLDL, cholesterol and triglycerides; ketone bodies; proteins – synthesis of urea)
- **Proteosynthesis** (non-essential AA, lipoproteins, albumins, globulins, fibrinogen and other proteins of blood clotting cascade)
- **Storage** (glycogen, vitamins – A, D, B₁₂, iron)
- **Degradation** (hormones – epinephrin, norepinephrin, steroids, polypeptidic hormones)
- **Inactivation and excretion** (remedies, toxins) – detoxication by conjugation with glucuronic acid, glycine and glutathion

BILE PRODUCTION

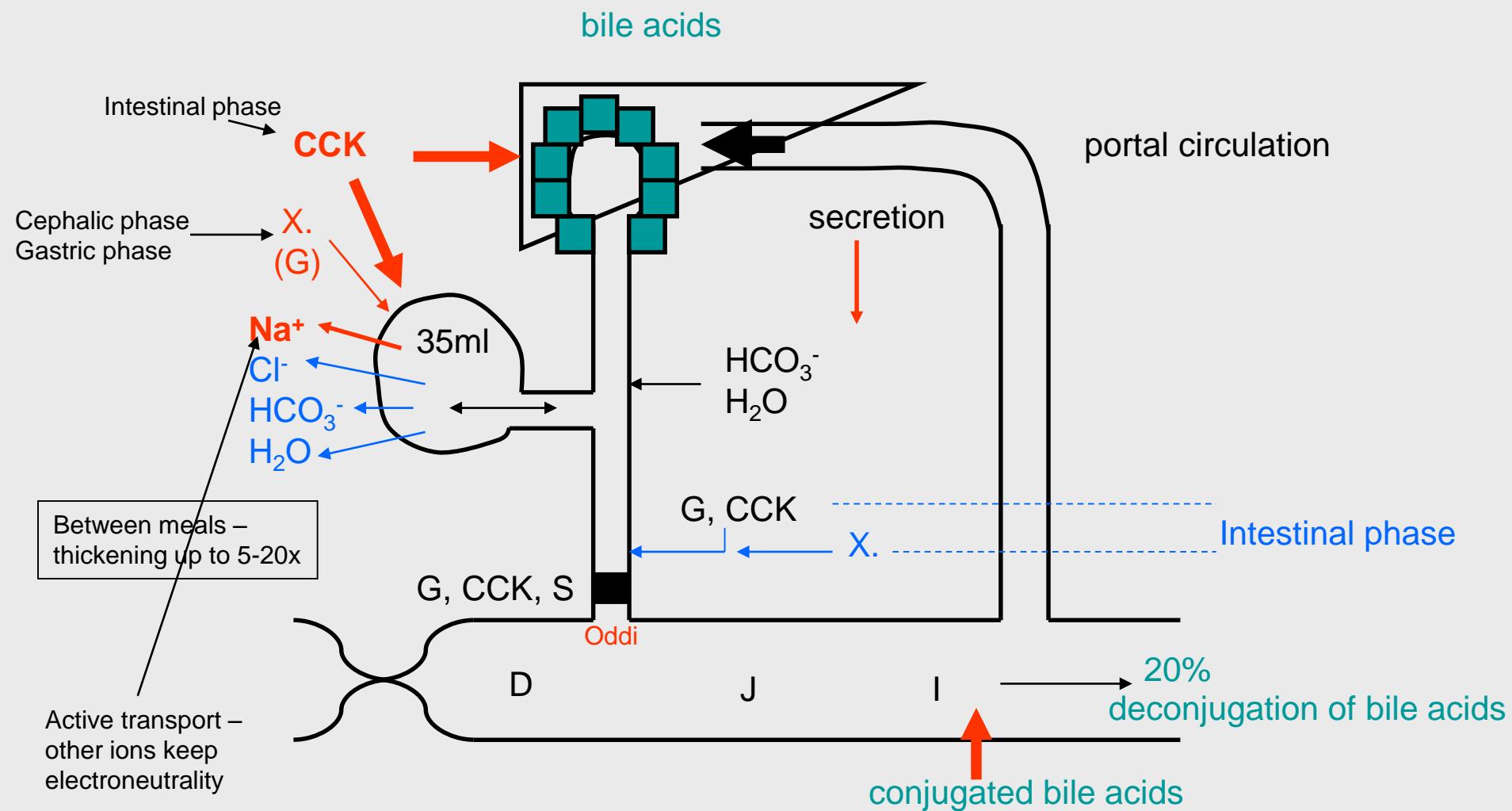


Secretion resembles exocrine pancreas

Bile

- 250-1500ml/day, isotonic, **primary secretion** – resembles plasma, CCK; modification - **secretin**
- bile acids (salts – Na^+) – conjugated (glycin, taurin) – soluble in H_2O , 50% of dry, micels
- cholesterol (crystals, lithiasis)
- lecithins
- bile pigments (bilirubin – glucuronid) – **yellow colour of bile** (lithiasis)
- Na^+ , K^+ , Cl^-
- H_2O , HCO_3^- (secretin)

ENTEROHEPATIC CIRCULATION



SECRETION FUNCTION OF GIT AND ITS HUMORAL CONTROL

