FEATURES OF MORPHOFUNCTIONAL CONDITION OF THE THYROID GLAND AND REGIONAL LYMPH NODE IN NORMAL AND IN HYPOTHYROIDISM

Abstract. The article presents data on the ratio of the functional structures of the lymph nodes in thyroid failure. Taking mercazolilum within 30 days led to a disorder of the morphofunctional condition of the thyroid gland and cervical lymph node. According to histological and morphometric analysis of the thyroid gland, a high sensitivity to monthly exposure of mercazolilum is shown, which is expressed in a synchronous morphological rearrangement of the tissue microdistrict of the thyroid gland and lymph node. Changes were identified especially in the peripheral zones of the thyroid lobes, which led to a decrease in the size of follicles, and in thyrocytes to a change in cellular elements, which caused a decrease in the production of thyroid hormones and developmental disability of reactive and compensatory changes in the thyroid gland. The structurally functional component related to both the thyroid gland and the lymph node is the extracellular space with vascular and non-vascular paths of microcirculation, a change in which leads to disruption of the vesicular-colloid transport in the thyroid cytoplasm and to a change in the functional state of the thyroid gland.

There are changes in the regional lymph node, which are characterized by a change in the ratio of cortical and medullary substance, in which the proportion of structures of the cortical substance decreases; there was an increase in the number of macrophages in the lymphoid nodule, the medullar sinus, a decrease in the number of mature plasmocytes, in the paracortex and Billroth’s stand. These changes indicate an immunosuppressive effect on the lymph node. On sections of the lymph node, capsule infiltration with lymphoid elements was often observed. The value of paracortex was statistically significantly reduced. The decrease in the area of the paracortical zone is relative, since it occurs due to the formation of sinuses. Blood vessels are blood-filled in the lymph node. There was an increase in the volume of the lymph node, which leads to a uniform development of the structures of the cortical and medullar substance of the lymph node.

Keywords: hypothyroidism, blood, rats, lymph node, thyroid gland.

Introduction. The prevalence of hypothyroidism is one of the first among all endocrine diseases, and its prevalence increases with age. The pathology of the thyroid gland is reflected in the provision of endocrine, immunological, energetic homeostasis of the body \cite{1, 2}. It has been established that hypothyroidism develops disturbances in the mechanisms of oxidative homeostasis, and spontaneous luminosity in the liver decreases. Studies have shown that with hypothyroidism, the enzymatic activities of malate dehydrogenase, glutamate dehydrogenase, glucose-6-phosphate dehydrogenase, arginase and activation of succinate dehydrogenase are reduced \cite{3, 4}.

The lymphatic system is one of the main links in the chain of humoral blood-tissue-lymph-blood transport \cite{5, 6, 7}, and taking into account the important role of the lymphatic system in maintaining homeostasis in the body with thyroid insufficiency is relevant. It is known that lymph nodes play an
important role in the formation of humoral and cellular immunity [8, 9]. Among the most important and universal functions of the lymph nodes, regardless of their localization and organ affiliation, their hematopoietic and immunopoietic, protective and filtering roles in the body are especially distinguished [10, 11].

The role of the lymphatic system and its lymphoid organs is one of the little studied problems in biology, in the protective reactions of the body under the influence of negative environmental factors on the human body. Of interest is the study of the condition of the lymphatic system in hypothyroidism.

Lymph nodes play an important role in the life of humans and animals [12]. Lymph nodes are the main homeostatic organs of the internal environment of the body [13, 14]. Due to the fact that their structural and functional response to environmental influences has the features of general stereotype, the morphological and functional status of lymph nodes can be a marker of environmental pressure on the lymphatic system [15]. In the modern concept of the lymphatic region, to determine the condition of the organ drained by it, great prognostic significance is given to the structural and functional condition of the lymph node [16, 17].

Lymph nodes are organs of lymphopoiesis and peripheral organs of immunogenesis. The inflow lymphatic vessels, which carry lymph both directly from the organs and from other lymph nodes run into them. The effluent lymphatic vessels go out of the lymph nodes, heading to other nodes or to the trunks and ducts.

The thyroid gland is the only endocrine organ in which bi-directional movement of products intended for secretion into the blood occurs. The thyroid gland is a tissue microdistrict that combines a group of follicles with an autonomous system of blood and lymph circulation. The aim of this research was to study the morphological and functional features of the thyroid gland and regional lymph nodes in animals at hypothyroidism.

Material and methods of research. The experiments were performed on 35 white laboratory rats males weighing 250 ± 3 g. Experimental hypothyroidism in experimental rats was modeled according to the method of Orlov, 2002 [18, 19]. To develop the condition of experimental hypothyroidism, mercazoilum dissolved in water at a dose of 20 mg per 100 g of animal body weight was administered to rats of the experimental group daily for 30 days. Animals were divided into two groups. Rats of the 1st group (15 rats) were control. In rats of the 2nd group (20 rats), a condition of hypothyroidism was induced for 30 days. The duration of the experiment is 31 days. All groups of animals were in the same conditions of feeding and keeping. All experiments with animals were carried out in strict accordance with the rules developed and approved by the local ethical commission of KazNMU named after S.D. Asfendiyarov, as well as in accordance with the rules and requirements stipulated by the 1986 directive of the European Parliament and set out in the "Guide for the Care and Use of Laboratory Animals."

For histological examination, lymph nodes were taken from rats. They were then fixed in a 10% solution of neutral formalin, then the samples were washed with tap water and dehydrated in alcohol with increasing concentration and pouring material into paraffin, followed by preparation of histological sections 4-5 μm thick, obtained using a ThermoScientificHM 325 microtome. Histological sections of lymph nodes were stained with hematoxylin and eosin, azure and eosin [20]. Drugs were viewed under a Leica 1000 light microscope with a camera.

Morphometric analysis was carried out using a morphometric grid [21], which was superimposed on a section of the lymph node. The intersections of the network occurring across the entire section of the lymph node, as a whole and separately, for each of its structures — the capsule, cortical plateau, lymphoid nodules, paracortex, meat strands and sinuses, with recalculcation in percent were calculated [22, 23]. During cytological analysis of the structure of lymph nodes and plaques, the number of cells in a standard area of 1600 μm2 with their differentiation into blasts, medium and small lymphocytes, plasmocytes, macrophages, and others were calculated. For some structural and functional zones, reference values for cells were used.

The data obtained were subjected to statistical processing with determination of arithmetic mean (M), arithmetic mean error (± m) and significance of differences at P<0.05 using the statistical analysis program StatPlus Pro 2009, AnalystSoft Inc.

The results and their discussion. The work provides material on the study of the state of the thyroid gland and lymph nodes in control animals and groups after experimental hypothyroidism. Rats with hypothyroidism were distinguished by the presence of characteristic symptoms - low mobility, lack of
appetite, drowsiness, hair slip from the face surfaces of the body. The average mass of the thyroid gland of the rats of the control group is 0.014±0.001 g. The mass of the left lobe is 0.008±0.002 g, the right is 0.006±0.004 g. The length of the left lobe is from 0.5±0.014 to 0.7±0.011 mm, the right lobe it is between 0.32±0.007 and 0.34±0.009 mm. The obtained digital data indicate the prevalence of the parameters of the left lobe over the right lobe of the thyroid gland in rats.

The control group of animals has a thyroid gland of elastic consistency, red in color with a reddish-brown and sometimes pink hue. The thyroid gland is of normal structure with the preservation of its basic structural elements. In this group, the thyroid gland contains rounded and oval follicles, in the cavity of which a colloid is located. When stained with hematoxylin-eosin, the thyroid tissue was represented by the same type of follicles, the wall of the follicles was formed by a flattened cubic epithelium located on the basement membrane. The blood supply to the thyroid gland is clearly visible. In the connective tissue between the follicles, blood vessels filled with the formed elements of the blood were determined (figure 1).

Hemocapillaries, intrafollicular colloid, thyroid structure are clearly seen. Hematoxylin and eosin stain. Increase approx. 10x0.25; About. 10x20

Figure 1 – The histological structure of the thyroid gland of rats is normal

In the histological structure of the thyroid gland, the control groups are dominated by medium and large follicles, which is characterized by a normoplastic version of the structure with different sizes of follicles, which different sizes of follicles reflect the functional activity of the thyroid gland. The gland parenchyma is represented by rounded, oval or angular follicles. Follicles look like closed vesicles lined with a single-layer epithelium formed by cubic thyrocytes. The nuclei of thyroid cells have a round or oval shape.

An autopsy in all animals with hypothyroidism showed an increase in the mass of the thyroid glands by 63-34% (p <0.01), i.e. the proportion of the thyroid gland in hypothyroid rats is 1.5-2 times larger than the proportion of glands in rats from the control group. In experimental hypothyroidism, the thyroid follicles were stretched and their sizes were increased, epithelial cells had a flat and elongated shape, the walls of the follicles acquire fuzzy outlines, enlarged, swollen, slightly stained. In lobes of the thyroid gland, single follicles with a small amount of colloid are found. Blood vessels, especially venous ones, are dilated, characterized by plethora and stagnation of blood.

The results of the study showed that in animals with experimental hypothyroidism, destructive processes are detected. With hypothyroidism in the thyroid gland, there were significant changes in its structure and an increase in wall thickness, violation of the shape of the nuclei, desquamation of epithelial cells, which is reflected in a decrease in the diameter of the follicles, the total volume, volumes of the colloid and follicular epithelium. At the same time, swelling and rounding of the thyroid gland itself were observed. The follicles are small in size, some of them lack colloid and are filled with a clear fluid (figure 2).
Hyperplasia of the parenchyma, a change in the newly formed and deformed follicles, an increase in the thickness of the follicle wall, partial desquamation of the epithelium, abnormal shape of the nuclei, vacuolization of the cytoplasm, expansion of the interfollicular space. Stained hematoxylin and eosin.

Increase Approx. 10x0.25; About. 10x20

Figure 2 – The histological structure of the thyroid gland of rats with experimental hypothyroidism

In animals, the cervical lymph nodes are normally covered with a thin, dense capsule. The subcapsular (marginal) sinus is well defined, densely filled with cells. Normally, the structure of the cervical lymph nodes is represented by a uniform development from the main structural and functional zones, there is a clear cortex-brain border in the cervical nodes, an intermediate morphotype of the lymph node is observed, in which there is a slight predominance of cortical substance over the brain substance of the lymph node, and the cortical/medullary ratio of the cervical node is 1.36±0.07 (figure 3, table 1).

Paracortex is normal. Hematoxylin-eosin stain. Increase approx. 10x0.25; About. 10x20

Figure 3 – Paracortex, located between the cortical and medullary substance of the cervical lymph node in the control group of animals

Table 1 - The structure of the cervical lymph node and indices under normal and with hypothyroidism

<table>
<thead>
<tr>
<th>Lymph node structures and indices</th>
<th>Control group</th>
<th>Hypothyroidism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capsule</td>
<td>1.26±0.05</td>
<td>0.96±0.03</td>
</tr>
<tr>
<td>subcapsular sinus</td>
<td>0.71±0.09</td>
<td>0.25±0.04*</td>
</tr>
<tr>
<td>Cortical plateau</td>
<td>2.33±0.14</td>
<td>1.36±0.12</td>
</tr>
<tr>
<td>Lymphoid nodules without a germinal center(F2)</td>
<td>1.56±0.06</td>
<td>0.96±0.13*</td>
</tr>
<tr>
<td>Lymphoid nodules with a germinal center (F1)</td>
<td>2.43±0.13</td>
<td>1.45±0.39*</td>
</tr>
<tr>
<td>paracortex</td>
<td>5.55±0.25</td>
<td>3.74±0.42**</td>
</tr>
<tr>
<td>Billroth's strand</td>
<td>7.19±0.36</td>
<td>6.72±0.29</td>
</tr>
<tr>
<td>Medullar sinus</td>
<td>2.01±0.15</td>
<td>4.33±0.27**</td>
</tr>
<tr>
<td>The total cross-sectional area of the lymph node</td>
<td>22.91±1.57</td>
<td>19.91±1.26*</td>
</tr>
<tr>
<td>Index K/M</td>
<td>1.36±0.07</td>
<td>0.72±0.01*</td>
</tr>
<tr>
<td>Index F1/F2</td>
<td>1.54±0.08</td>
<td>1.50±0.06*</td>
</tr>
</tbody>
</table>

Note: significantly compared with control at P <0.05 *, P <0.01 **
In the literature, such a morphotype indicates sufficient detoxification-transport and immune function of the lymph node regional for the thyroid gland [24, 25]. Their ratio often changes depending on the state of the internal environment of the body, on the influence of environmental factors, which reflects a change in the functional state of the lymph nodes. The cortical zone contains lymphoid nodules with or without a germinal center, as well as paracortex. The cortical substance contains lymphoid nodules without a germinal center (primary follicles) and lymphoid nodules with a germinal center (secondary follicles). The ratio of lymphoid nodules with a germinative center to lymphoid nodules without a germinative center is on average 1.56±0.06 and indicates the predominance of lymphoid nodules with a germinative center. The deep cortex (paracortex) has an ovoid shape and occupies an area equal to 5.55±0.25%, on the border of the cortical and medullary substance (figure 3, table 1). The initial area of the lymph node averages 22.91±1.57%. Initially, intranodular structures are developed and occupy a certain area in the general structure of the lymph node. The subcapsular sinus is quite wide and occupies an area equal to 0.71±0.09%. In the medullar substance, the largest part is occupied by the Billroth's strand 7.19±0.36%; the cerebral sinus accounts for a small part of the area, equal to 2.01±0.15% (table 1).

The medullar substance of the node contains Billroth's strand cerebral sinus, the ratio of the areas of which can also change in an alarming environment or the influence of adverse environmental factors. The indicated functional zones of the cervical lymph node are responsible for the immune and drainage-detoxification function in the body.

After the use of mercazolyl, we observed a decrease in the total area of the lymph node by 13.1% compared with the control group of animals. In experiments, it was shown that at hypothyroidism, the cortical/medullary ratio decreases to 0.72 ±0.01, which indicates the predominance of the brain substance in the structure of the lymph node. In the brain substance of the lymph nodes after the use of mercazolil, there is a statistically significant increase in the area of the cerebral sinus by 2.15 times. An increase in the area of the cerebral sinus is associated with a decrease in the lymphoid parenchyma of the node caused by the intake of mercazolil.

The results indicate a high sensitivity not only of the bloodstream (which is consistent with the literature), but also of the lymphatic channel to a hypothyroid state. The parallelism between the progressive damage of some endocrineocytes, impaired lymphatic drainage and activation of the proliferative processes of the preserved epithelium and stroma is regarded as a compensation mechanism in the thyroid gland. The histological and equivalents of impaired hormonal synthesis of the thyroid gland, leading to its hypofunction, have been obtained. There is a certain relationship between changes in the thyroid gland and lymph node, suggesting the priority of the latter in the implementation of drainage and detoxification function in the lymphatic region.

Changes in the structure of the lymph node are observed, a shift of the lymphoid nodules inward, with their placement at the border of the superficial and deep cortex, is noted. At the same time, the area of lymphoid nodules with a germinal center and without it when taking mercazolil decreases 1.6-1.67 times. Characteristic intracortical sinuses with a dense arrangement of lymphocytes are found, lymphoid nodules are oriented into the lumen of the sinus. In the cortical substance, the area of the subcapsular sinus, in which lymphoid cells are densely located, is statistically significantly reduced by 2.8 times (figure 4).

On sections of the lymph node, capsule infiltration with lymphoid elements is often observed. The value of paracortex is statistically significantly reduced by 1.4-1.48 times when taking mercazolil. The decrease in the area of the paracortical zone is relative, since it occurs due to the formation of sinuses. Blood vessels are blood-filled, this indicates an increased vascularization of the lymph node in the presence of mercazolil. Within a month of the use of mercazolil, an increase in the area of the lymph node occurs, which leads to a uniform development of the structures of the cortical and brain substances of the lymph node.

The results obtained are consistent with the results of other authors who studied the structural state of the thyroid gland and indicate a weakening of its functional activity in hypothyroidism [26].

Thus, the use of mercazolil leads to a violation of the morphofunctional state of the thyroid gland and cervical lymph node. Changes were identified especially in the peripheral zones of the thyroid lobes, which led to a decrease in the size of follicles, and in thyrocytes to a change in cellular elements, which caused a decrease in the production of thyroid hormones and impaired development of reactive and compensatory changes in the thyroid gland. The structurally functional component related to both the
thyroid gland and the lymph node is the extracellular space with vascular and non-vascular paths of microcirculation, a change in which leads to disruption of the vesicular-colloid transport in the thyroid cytoplasm and to a change in the functional state of the thyroid gland.

There are changes in the regional lymph node, which are characterized by a change in the ratio of cortical and medullary substance, in which the proportion of structures of the cortical substance decreases, an increase in the number of macrophages in the lymphoid nodule, the medullar sinus, a decrease in the number of mature plasmocytes, in the paracortex and Billroth's strand were observed. Changes in the cortex-brain ratio with the predominance of the brain substance in the lymph node and a decrease in the proportion of structures of the cortical substance against the background of ectopic lymphoid nodules. These changes indicate manifestations of an immunosuppressive effect on the lymph node. On sections of the lymph node, capsule infiltration with lymphoid elements was often observed. The value of paracortex was statistically significantly reduced. The decrease in the area of the paracortical zone is relative, since it occurs due to the formation of sinuses. Blood vessels are blood-filled in the lymph node. There was an increase in the volume of the lymph node, which leads to a uniform development of the structures of the cortical and medulla of the lymph node.

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КАЛЫПТЫ ЖӘНЕ ГИПОТИРЕОЗ КЕЗІНДЕГІ КАЛКАНША БЕЗІ МЕН АЙМАҚТЫҚ ЛИМФА ТУЙІНДЕРІНІҢ МОРФОФУНКЦИОНАЛДЫ ЕРЕКШЕЛІКТЕРІ

Аннотация. Макалада тиреоидді жеткіліксіздік кезінде лимфа туйіндерінің функционалдық құрылымының арақатынасы туралы дерекетер көрсетілген. Мерказуолиді 30 күн ішінде қабылдау калқаша безінің және мойын лимфа туйінінің морфофункционалды қажетді бұзады. Гістологіялық, морфометриялық талдама моліметр і бойынша калқаша безінің мерказуолідің айық есеріне қарай сәзімдәдьылығы көрсетілген, бұл калқаша безі мен лимфа туйінің ұлттарының ұшын аударының синхронды морфологиялық қайта құрылу барысынан кориңеді. Өтерістер есіресе калқаша безінің шetyкті аймақтарында пайда болады, бұл фолликул молшерінің әзайына, ал тиреоидтірде жасушалық элементтердің өзгеруіне екеледі, бұл өз
кезегінде тиреоидты гормондар онімін азайтып, калқанша безде реактивті және компенсаторлық зегірістің дамуына закым келтіреді. Калқанша бездегі және тиреоидты және тиреоидтың жағдайына және барлық мезендегі, жетілген плазмонтер саны мен паракорtekес пен жұмыс тінің түсінілгені болады. Бұл зегірістер тиреоидтың имуносупресивті зегірісін пайдаланып, сіздердің ізгеуіме және бірқалғанда, микроциркуляцияның арқасында аткаратын мезендегі және лимфа тұйынның құрылымынә, везікуларлы-коллоидты тасымалдануының бұзылуына, микроциркуляцияның тамырлы және тамырлы емес жолдары клеткадан тыс кенісітке функционалдық жағдайына зегіріне байланысты аныкталады.

Айнымалык тіріңіңде, сыртқы және мілі затты затар кайтарылдығына және мілі тұйынның калқанша безде реактивті және компенсаторлық зегірістердің дамуына закым келтіреді. Калқанша бездегі және лимфа тұйынның құрылымынә, везікуларлы-коллоидты тасымалдануың бұзылуына, микроциркуляцияның тамырлы және тамырлы емес жолдары клеткадан тыс кенісітке функционалдық жағдайына зегірінің байланысының аныкталады.

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Тіріңің зегірісі: гипотиреоз, қан, ізгеуілеу, лимфа тұйын, калқанша без.

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ОСОБЕННОСТИ МОРФОФУНКЦИОНАЛЬНОГО СОСТОЯНИЯ ЩИТОВИДНОЙ ЖЕЛЕЗЫ И РЕГИОНАРНОГО ЛИМФАТИЧЕСКОГО УЗЛА В НОРМЕ И ПРИ ГИПОТИРЕОЗЕ

Аннотация. В статье приведены данные о соотношении функциональных структур лимфатических узлов при тиреоидной недостаточности. Прием мерказолила в течение 30 дней приводил к нарушению морфофункционального состояния щитовидной железы и шейного лимфатического узла. По данным гистологического, морфометрического анализа щитовидной железы показана высокая чувствительность к месячному воздействию мерказолила, что выражается в синхронной морфологической перестройке тканевого микрорайона щитовидной железы и лимфатического узла. Изменения выявлены особенно в периферических зонах долей щитовидной железы, что приводило к уменьшению размеров фолликулов, а в тиреоцитах – к изменению клеточных элементов, что вызывало снижение продукции тиреоидных гормонов и нарушение развития реактивных и компенсаторных изменений в щитовидной железе. Структурно функциональным компонентом, относящимся одновременно к щитовидной железе и к лимфатическому узлу, является внеклеточное пространство с сосудистыми и несосудистыми путями микроциркуляции, изменение которого приводит к нарушению везикулярно-коллоидному транспорту в цитоплазме тиреоцита и к изменению функционального состояния щитовидной железы.

Наблюдаются изменения в регионарном лимфатическом узле, которые характеризуются изменениям в соотношении коркового и мозгового вещества, при котором уменьшается доля структур коркового вещества, наблюдалось увеличение числа фолликулов в лимфоидном узлеке, мозговом синусе, уменьшение числа зрелых плазмозидов, в паракортеке и микотых тяжах. Эти изменения говорят о превалировании иммуносупрессивного действия на лимфатическом узле. На срезах лимфатического узла часто наблюдалась инфильтрация капсулы лимфоидными элементами. Величина паракортика статистически значимо снижалась. Уменьшение площади паракортальной зоны имеет относительный характер, так как происходит за счет формирования синусов. Кровеносные сосуды кровенаполнены в лимфатическом узле. Происходило увеличение объема лимфатического узла, что приводит к равномерному развитию структур коркового и мозгового вещества лимфатического узла.

Ключевые слова: гипотиреоз, кровь, крысы, лимфатический узел, щитовидная железа.

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