

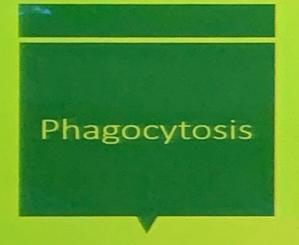


### Granulocytes + macrophages:

Bone marrow derived cells that engulf & digest particulate matter

Essential for host response to infection, inflammation.

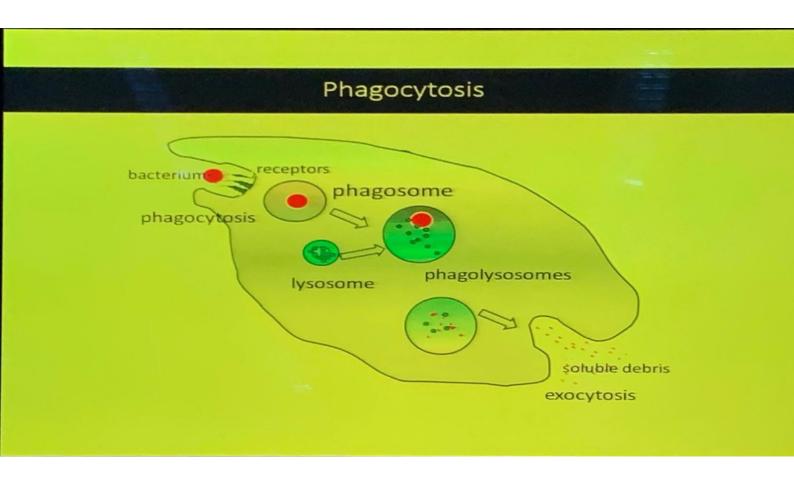
Secrete cytokines, digest senescent cells, debris.

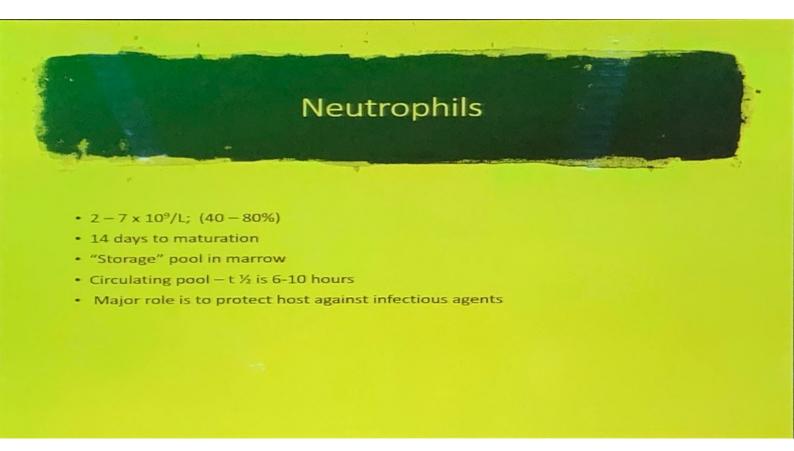


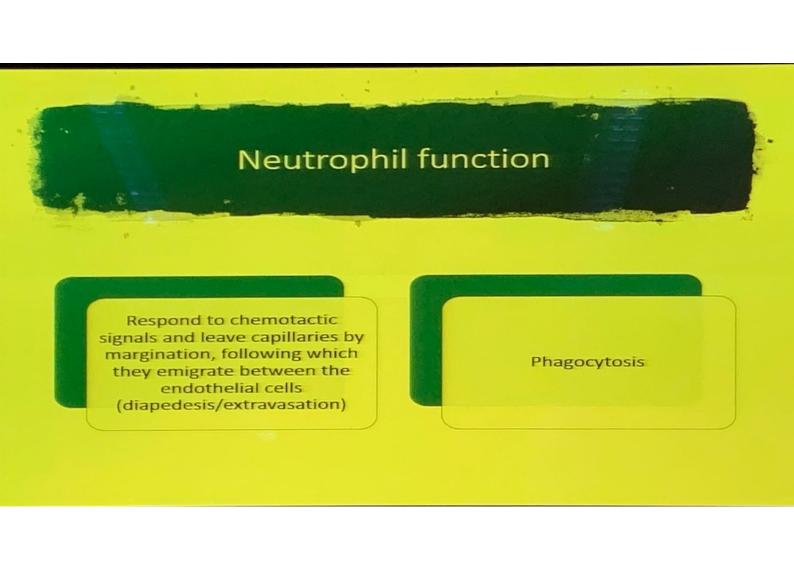
- Phagocytosis is mediated by macrophages and polymorphonuclear leucocytes
- It involves the ingestion and digestion of the following:
  - microorganisms
  - · insoluble particles
  - damaged or dead host cells
  - · cell debris
  - activated clotting factors

### There are several stages of phagocytosis:

- Chemotaxis
- Adherence
- Pseudopodium formation
- Phagosome formation
- Phago-lysosome formation
  - Lysosome contains hydrogen peroxide, active oxygen species (free radicals), peroxidase, lysozyme and hydrolytic enzymes
  - Oxidative burst leads to digestion of the phagolysosomal contents, and later elimination by exocytosis.

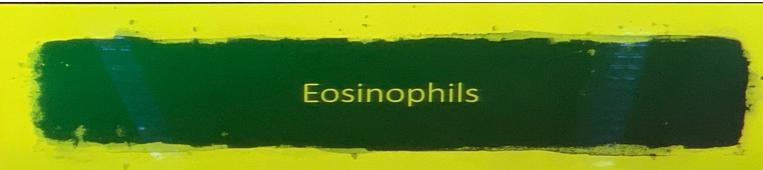






### Regulation of neutrophil function

- · Cytokines are basic regulators of all neutrophil functions
- Neutrophils also synthesize and secrete small amounts of some cytokines including IL-1, IL-6, IL-8, TNF-, and GM-CSF
- These are pyrogenic, pro-inflammatory and neutrophil activating
- Cytokines also increase the microbiostatic and killing capacities of neutrophils against bacteria, protozoa and fungi.



- $0.02 0.6 \times 10^9$ /L (1 6%)
- Produced in BM
- "Storage" pool in BM
- IL-5 key role in proliferation and differentiation
- T ½ in circulation similar to neutrophils
- Life span in tissues up to several weeks
- Localise to areas exposed to external environment
- Charcot-Leyden crystals seen in areas of eosinophil degeneration





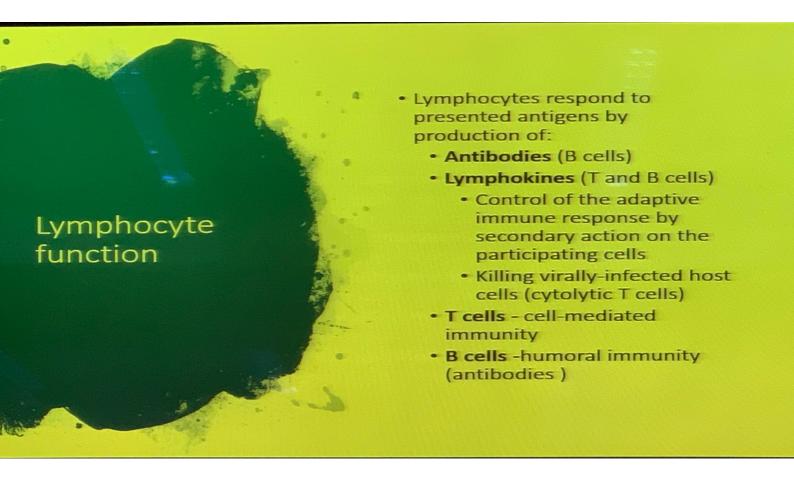
- <0.1 x10<sup>9</sup>/L (< 1- 2%)
- · Mature in 7 days in marrow
- Have vasoactive & immunomodulatory chemicals in granules
  - Histamine, released by circulating basophils and tissue mast cells causes capillary and venular dilatation
- Are effecter cells in certain hypersensitivity reactions (possess membrane receptors for IgE & C<sup>I</sup>)

## Monocytes

- $0.2 1.0 \times 10^9$ /L (2-10%)
- Monocytes circulate in the peripheral blood prior to emigration into the tissues to become tissue macrophages
  - Kupfer cells (liver)
  - Microglia (brain)
  - Mesangial cells (kidney)
  - Osteoclasts (bone)
- Phagocytosis is mediated by macrophages and polymorphonuclear leucocytes.

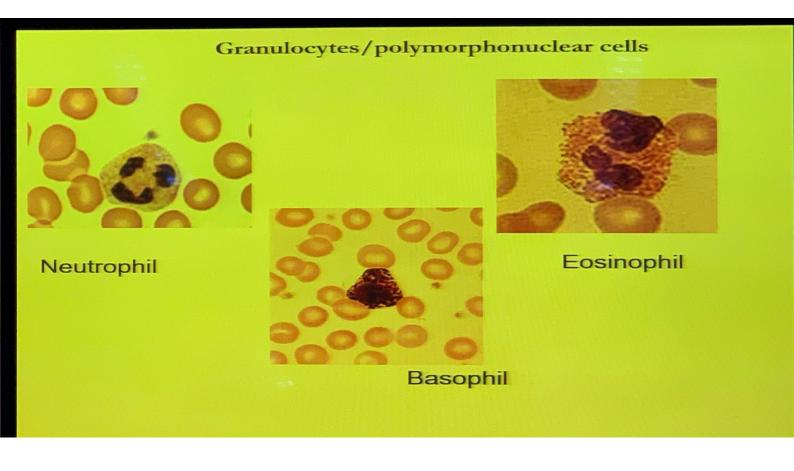
# Lymphocytes

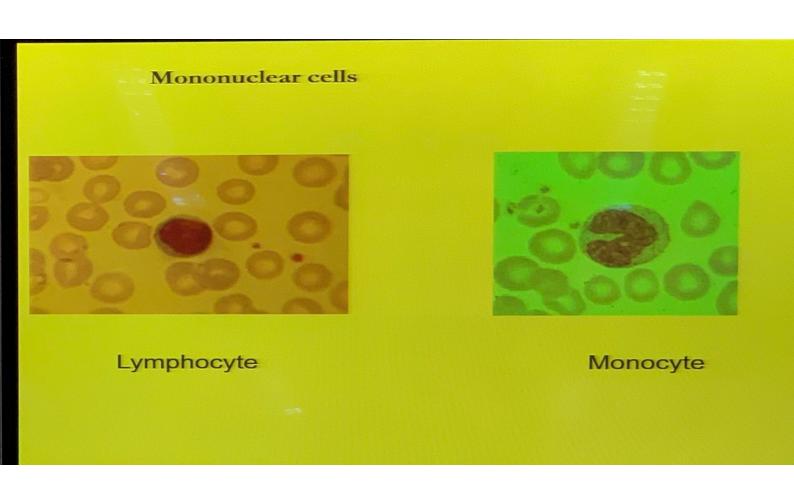
- 1.0 4.0 x 10<sup>9</sup>/L (20 40 %)
- Two broad categories of lymphocytes:
  - Small lymphocytes —T and B-cells
  - · Large granular lymphocytes Natural killer cells
- B-lymphocytes are produced within bone marrow (a primary lymphoid organ)
- T-lymphocytes are produced in the thymus (also a primary lymphoid organ)
- Secondary lymphoid tissue Spleen, lymph nodes, adenoids, tonsils and mucosa associated tissue (MALT).

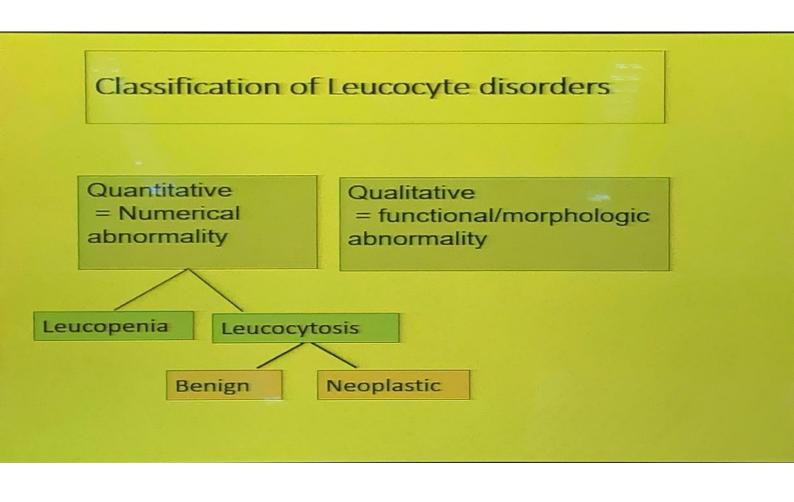




- NK cells Part of cell-mediated immunity (CMI) and act during the innate immune response
- Attack host cells displaying a foreign (e.g. viral) peptide on particular cell surface







# Tests for white cells

- Blood counts: WBC Total/differentials
- Peripheral smear
- Bone marrow
- Cytochemistry (Special cellular chemistry)
- Functional tests
- Molecular biology
- Cytogenetics

# Investigation for white cell disorders

- TBC
  - WBC Total/differentials
  - Other parameters: HB, RBC, Plats, RBC indices
- Peripheral smear
  - Morphologic assessment of cells
- Bone marrow examination
- Cytochemistry
  - Special cellular chemical staining
- Functional tests
- Cytogentics and Molecular biology