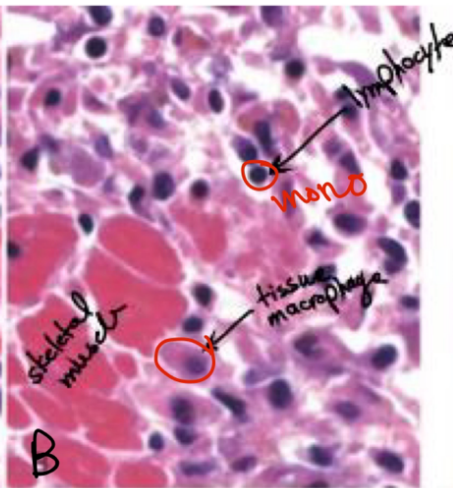
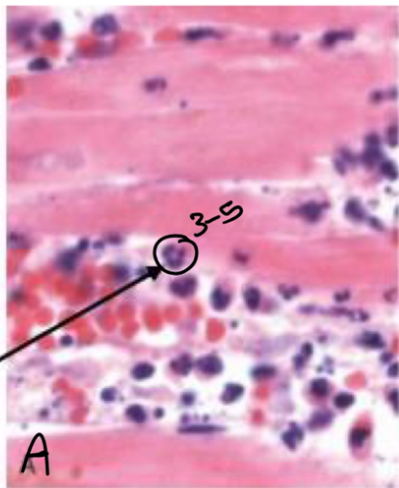


Submucosal tissue

Squamous epithelium

تندوبان
→
inflammation



A → acute inflammation
B → chronic inflammation

Neutrophil

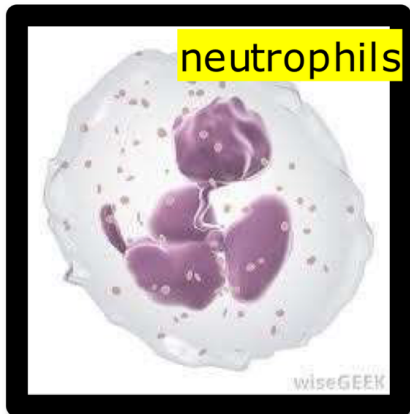
3-5

lymphocyte

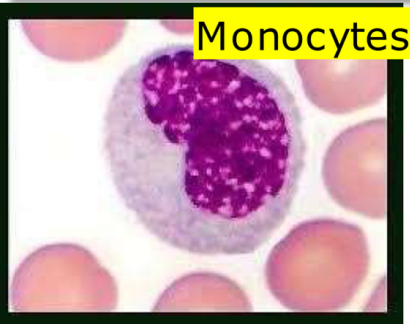
mono

skeletal muscle

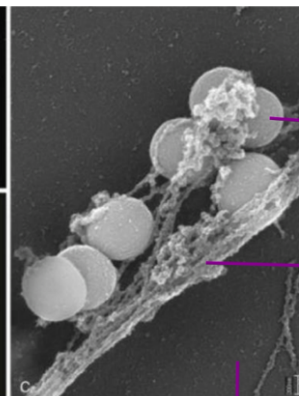
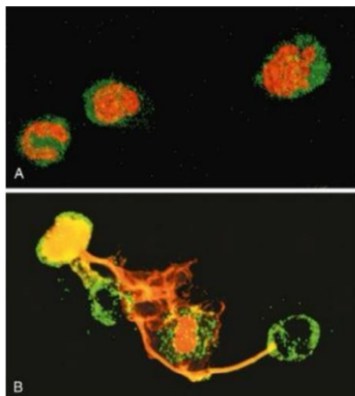
tissue macrophage



neutrophils



Monocytes



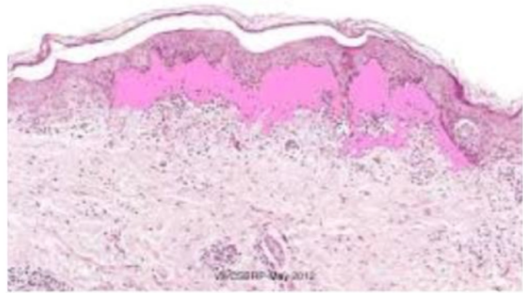
Coccus bacteria

mucus

FIG. 3.8 Neutrophil extracellular traps (NETs). (A) Healthy neutrophils with nuclei stain...

Electron microscopic scanning picture

Serous inflammation



-Cell poor fluid(transudate)

*it looks clean, yellow and it's solidarity is low.

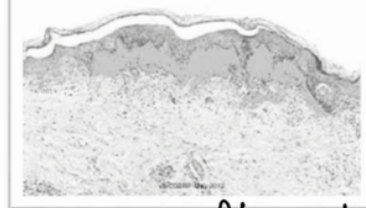
A – serous effusion: the bilateral pleural effusion due to heart failure or hypoproteinemia from liver failure causes the osmotic pressure to decrease so more fluid will leak out into the interstitium.

B – serous blisters: caused by the first degree burns of skin.

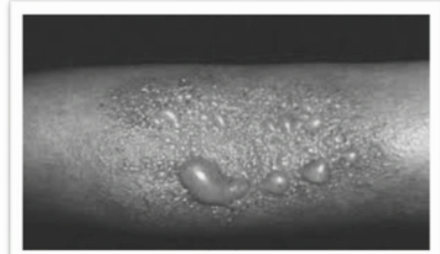
C – seromas: is a sac or collection of serum which is a transudate inflammatory fluid. They are common after certain surgeries like hernia repair and breast surgery

Serous inflammation

Serous blister

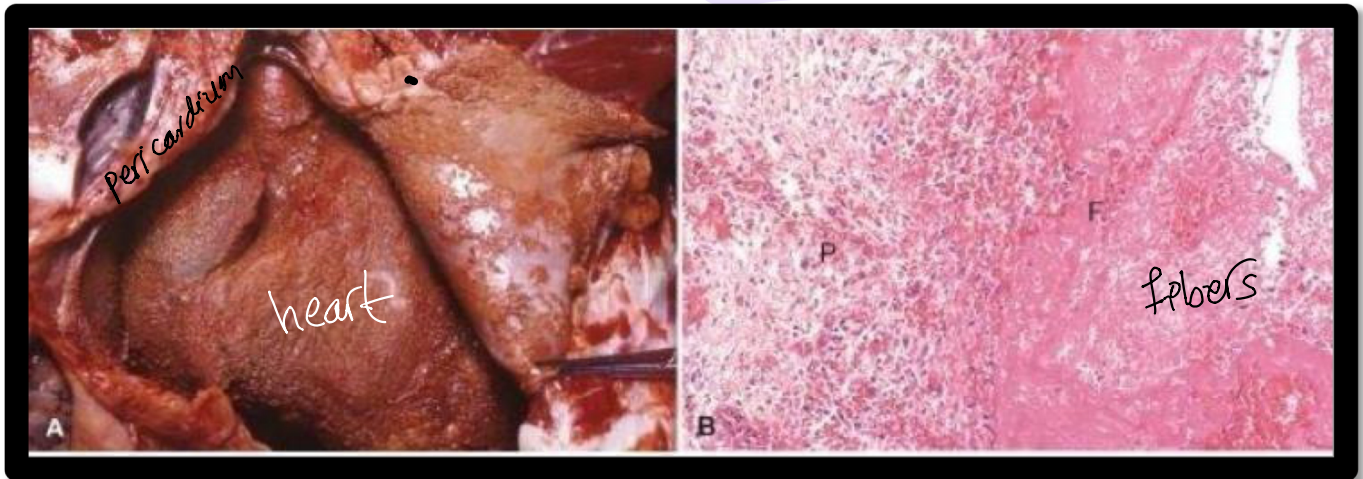


Serous inflammation



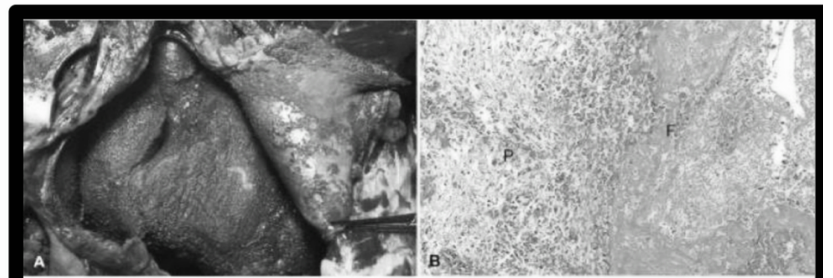
This type happen Specificity in body cavities

Fibrinous inflammation

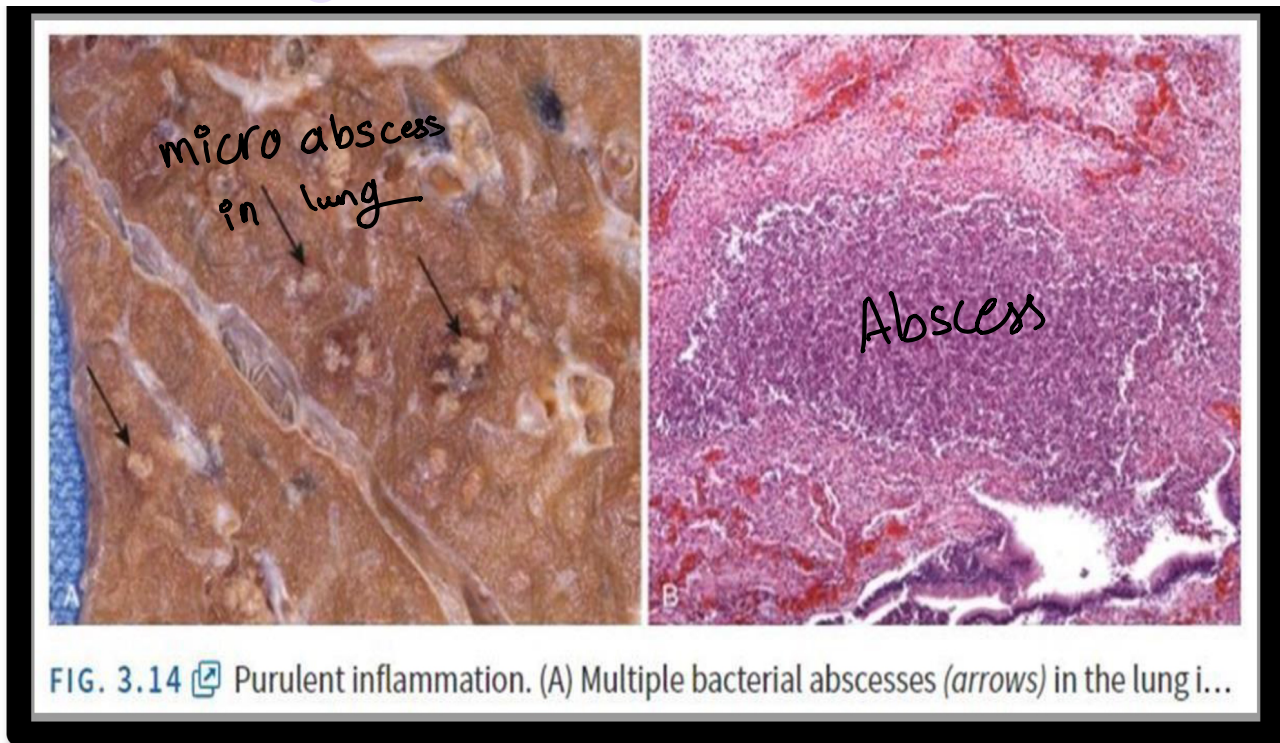


- full of fibrin & protein products.

- Large vascular leakage + coagulation ^{تخثرات}
- Body cavities: pericardium (in fibrinous pericarditis the patient needs to be treated quickly)



Purulent inflammation.



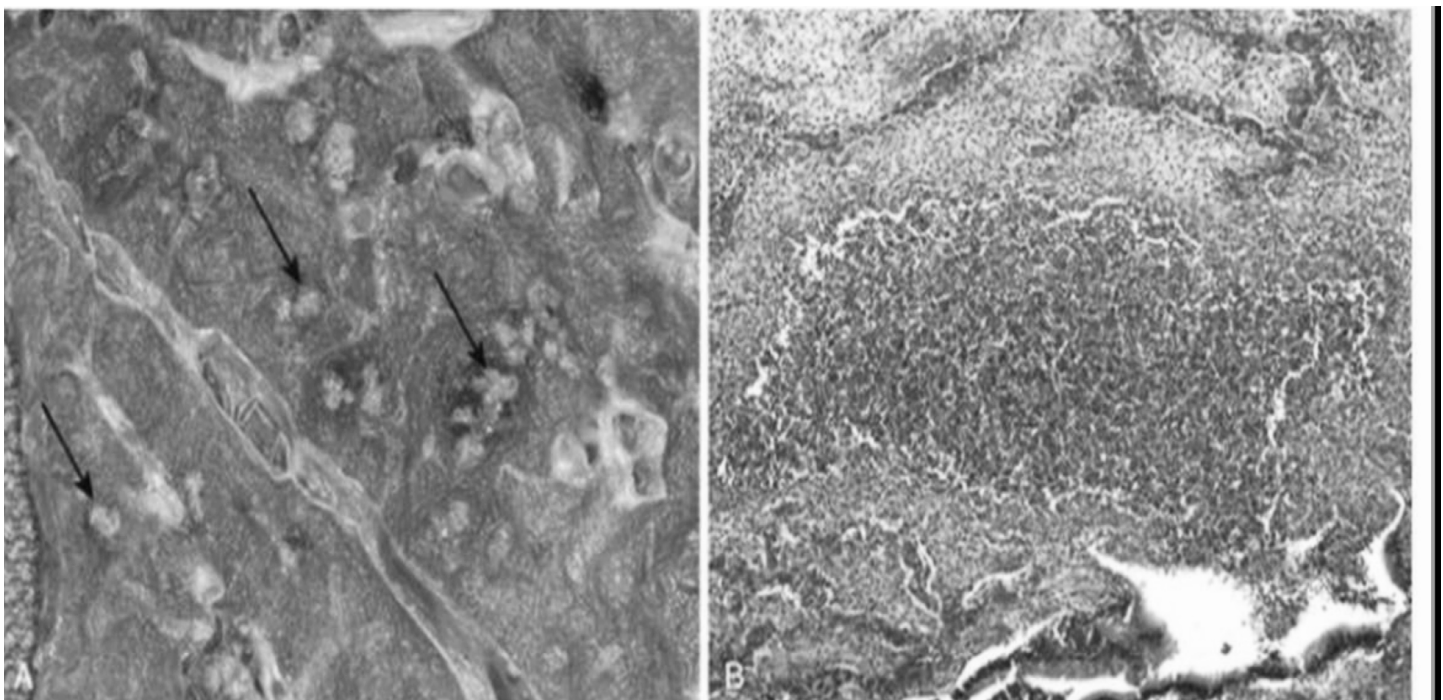
Severe acute suppurative inflammation (full of pus, bacteria and proteins)

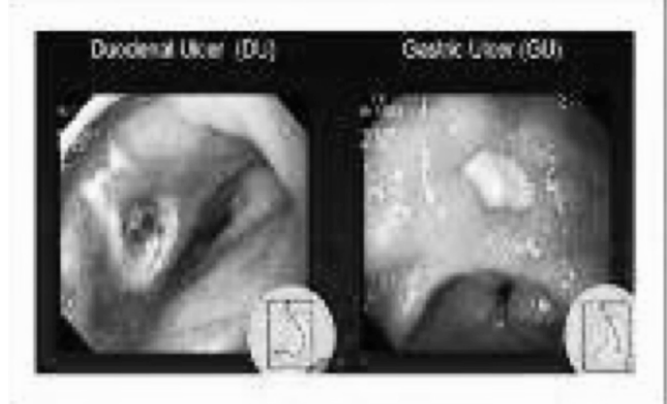
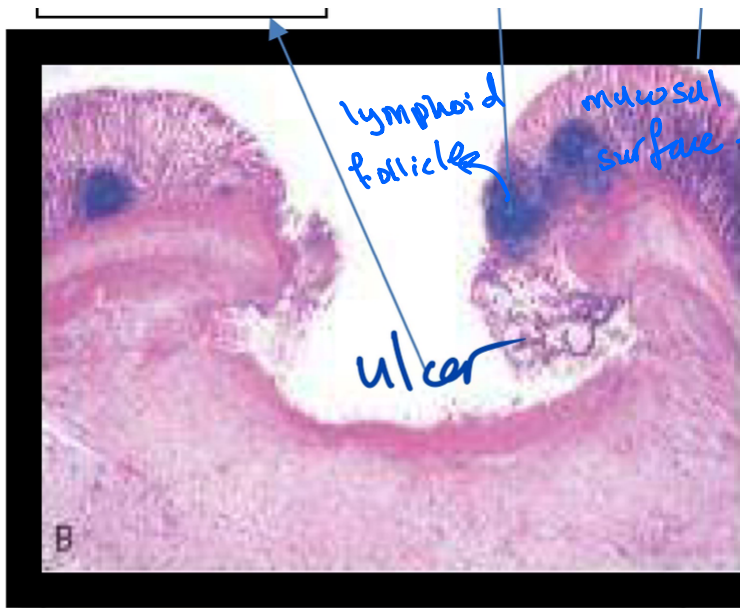
It caused by some type of bacteria such as staphylococci (from the book) .

Abscess : localized collection of pus (exudate) (pus formation) .

Treatment of an abscess is incision and drainage.

pus: exudate rich in PMNs + debris + edema

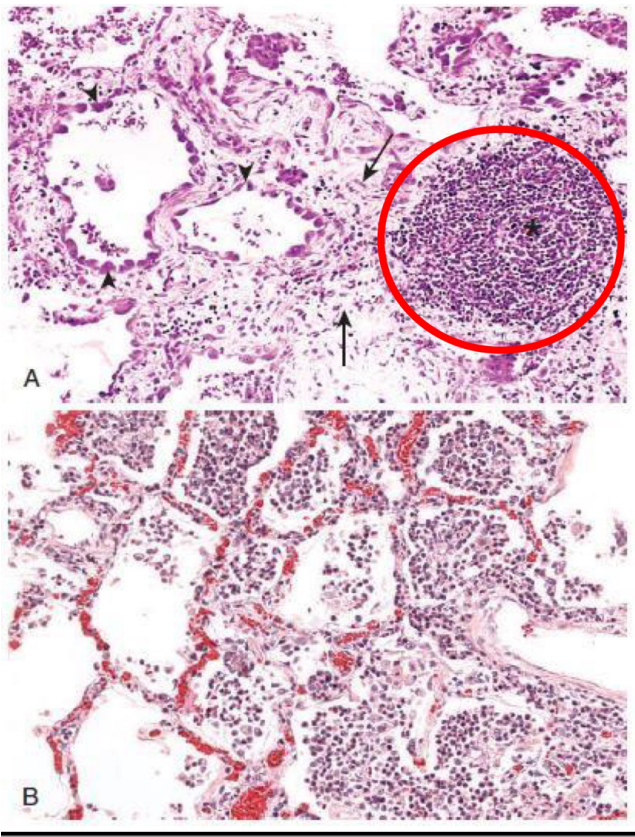




ULCERS

- * (morphological form of inflammation)
- * **Defect on a surface** (loss of continuation)
- * **Common in mucosal surfaces** and skin
- * Mostly acute and chronic inflammation

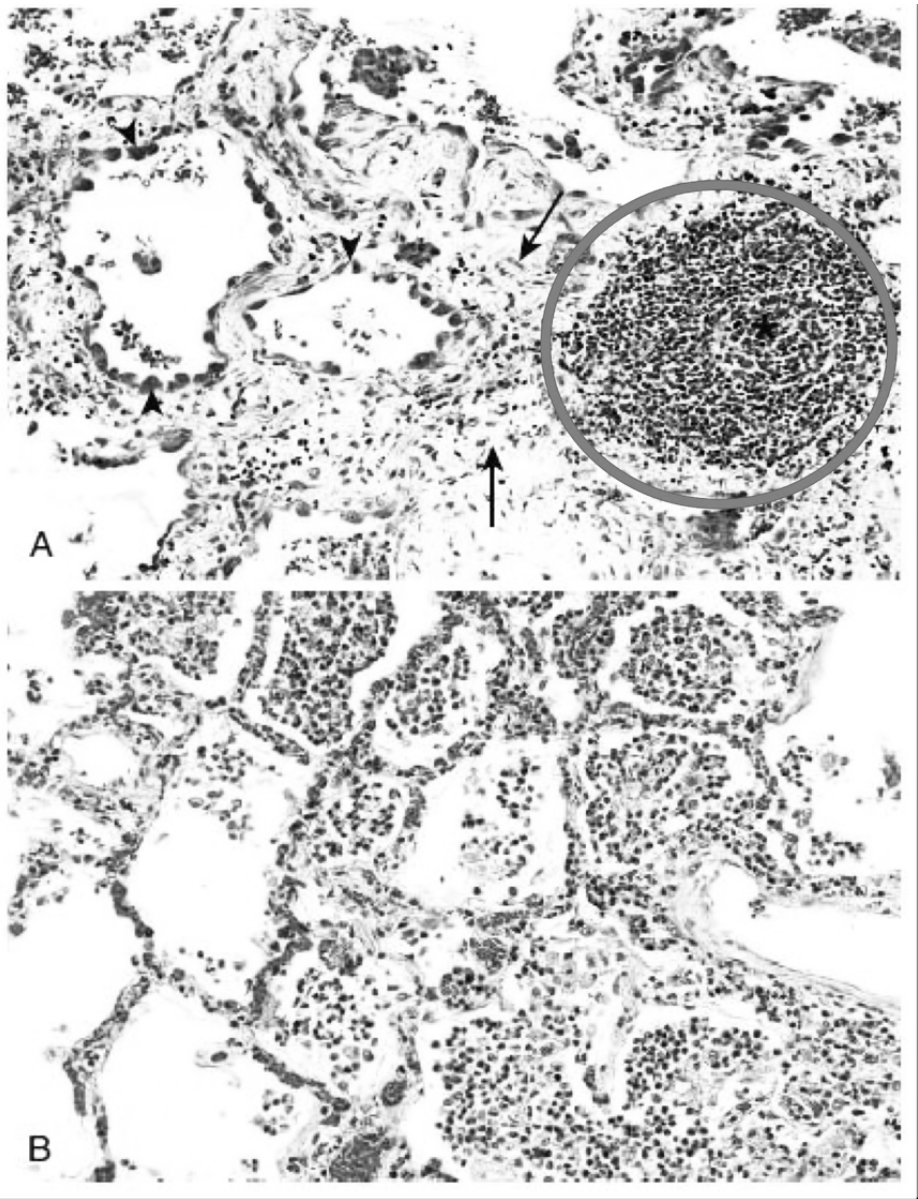
H&E stain



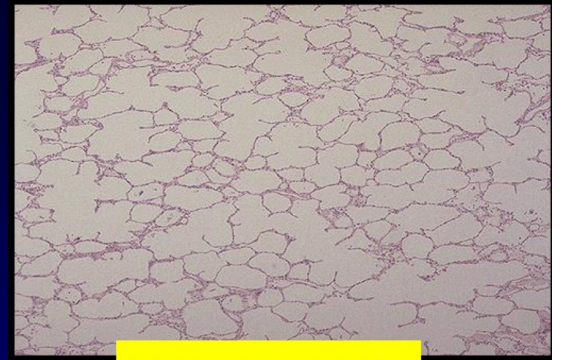
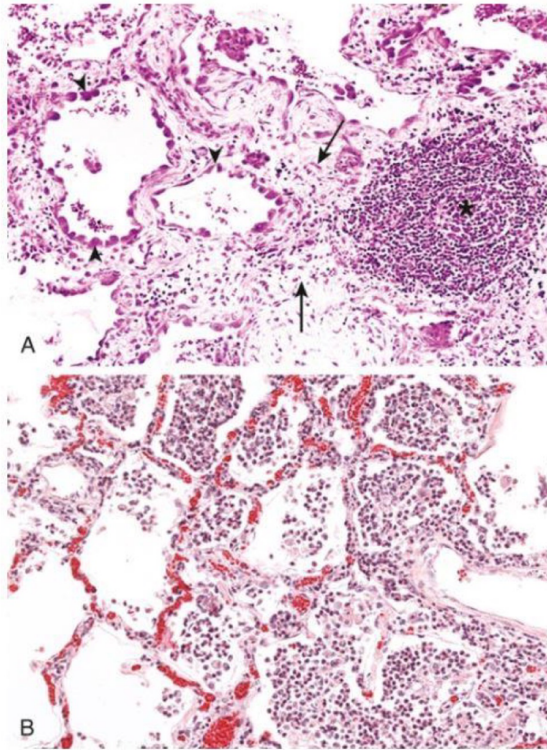
(B) In acute inflammation of the lung (acute bronchopneumonia), neutrophils fill the alveolar spaces.

(A) Chronic inflammation in the lung, showing all three characteristic histologic features: (1) collection of chronic inflammatory cells:

Red circle: Chronic inflammatory follicle full of macrophages, lymphocytes & plasma cells.
destruction of normal alveoli and replacement by Fibrous connective tissue,



Chronic pneumonia



NORMAL

Acute pneumonia

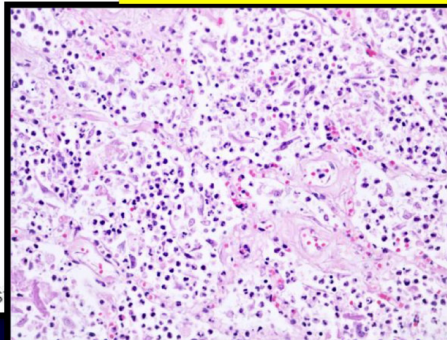
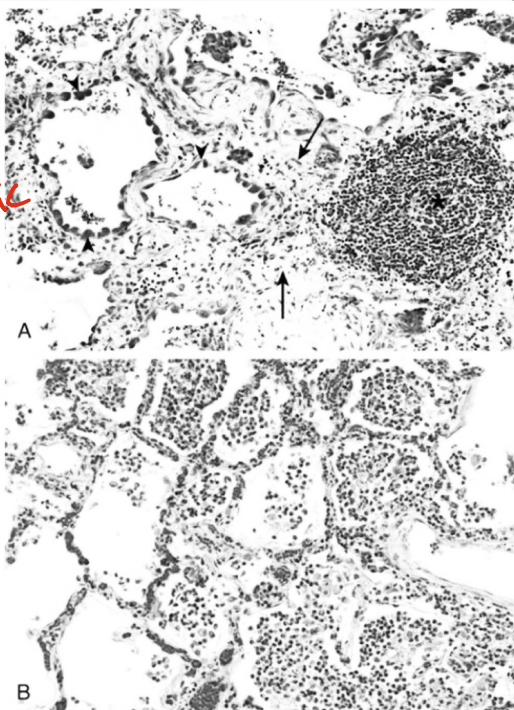


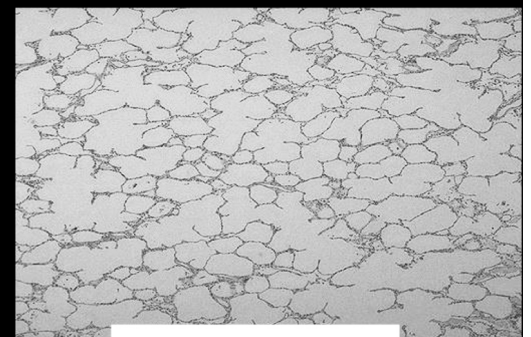
FIG. 3.17 (A) Chronic inflammation in the lung, showing all three characteris

Chronic pneumonia



Chronic

Acute



NORMAL

Acute pneumonia

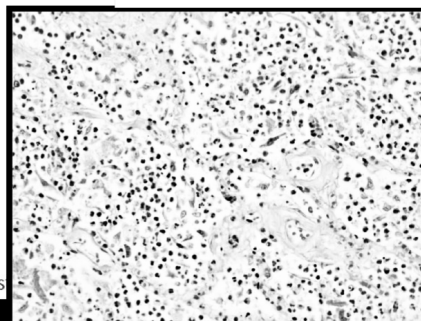
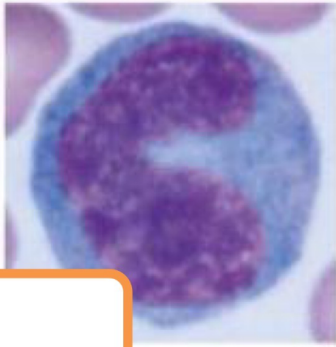
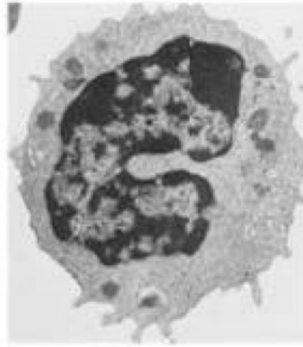


FIG. 3.17 (A) Chronic inflammation in the lung, showing all three characteris

Mature



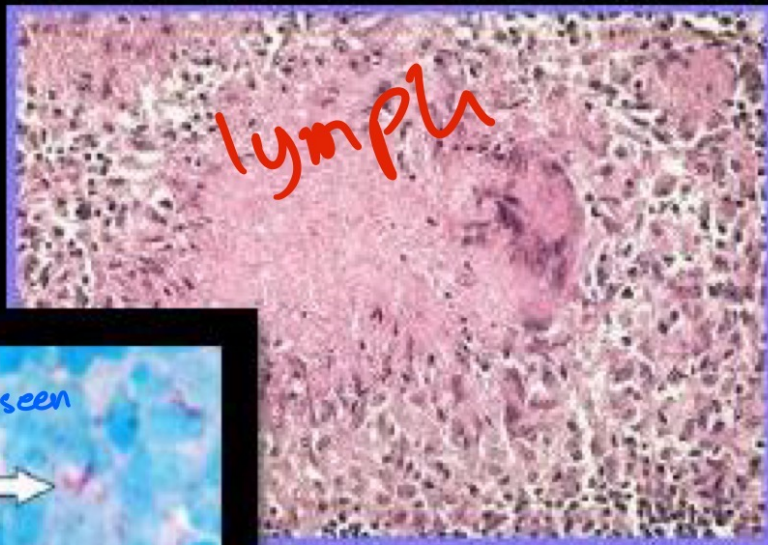
Monocyte



Activated macrophage

Immature

NECROTIZING GRANULOMA



Acid fast stain

NON-NECROTIZING GRANULOMA

