Pituitary Hormone Review



A: ADH B: Oxytocin C: Oxytocin D: hGH

- E: ACTH F: TSH G: FSH & LH H: FSH & LH
- I: PRL

How to Remember the Pituitary Hormones:

GH Posterior Oxytocin pituitary ADH **TSH FSH** LH ACTH **PRL (prolactin)**

Homework:

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BOOKLET 2 TARGET GLANDS

- 1) Thyroid gland
- 2) Parathyroid gland
- 3) Adrenal gland

THYROID GLAND

- Located at the base of the neck, in front of the trachea
- Stimulated by TSH from the anterior pituitary
- Produces 2 important hormones:
 - Thyroxine (T⁴) and calcitonin (and Triiodothyronine (T³), but you do not have to know this one)
- 1) Thyroxin **increases metabolism** (how fast we **burn calories**)
- 2) Calcitonin (rhymes with calci-bone-in)
 lowers blood calcium by putting
 calcium into bones

Adam's apple thyroid gland windpipe (trachea)

THYROID GLAND Thyroxine (T₄)

Target: the body cells



<u>Function:</u> increases rate of metabolism, which is the rate at which the body converts glucose into energy

= cellular respiration

oxygen + glucose \rightarrow carbon dioxide + water + ATP

Would thyroxine increase or decrease blood glucose? It would **decrease it because it is converting it into ATP!!!

THYROID GLAND- DISORDERS Thyroxine (T₄)

Affects tissues behind the eye

 <u>Hypersecretion</u>: Hyperthyroidism – high metabolic rate, can't sit still, always warm, and tend to be thin , Grave's disease

Grave's Disease: a severe state of hyperthyroidism that results when the body's immune system attacks

the thyroid. Antibodies attach to TSH receptors on thyroid cells, causing the thyroid gland **to produce too much thyroxine.**

- Some symptoms include: anxiety, irritability, heat sensitivity, weight loss, goiter, bulging eyes

 <u>Hyposecretion:</u> Hypothyroidism – low metabolic rate, less energy, intolerant of cold, dry skin and gain weight, <u>goiter</u>

http://www.mayoclinic.com/health/graves-disease/DS00181



THYROID GLAND Disorder: Goiter (insufficient dietary iodine)



- The body uses iodine to make thyroxine
- Iodine is found in fish and salt
- Goiter = enlargement of the thyroid gland due to no thyroxine being produced
- The pituitary continues to make TSH so that thyroxine can be produced

TSH buildup is what causes the thyroid to enlarge

• In this case, the negative feedback system is not working properly





If Ava is missing half her thyroid gland, how would this affect her thyroxin levels? What about her TSH levels?

- a. Thyroxin levels would be not as high
- TSH levels would go up because of not enough thyroxin being produced

THYROID and PARATHYROID GLAND

- The thyroid gland is also involved in regulating calcium levels in the blood
- The thyroid and parathyroid gland are separate structures that function closely together to control calcium



Control of Calcium

Calcitonin

(PTH) Parathyroid hormone

- Production site: thyroid gland
- <u>Targets:</u> bones, kidneys and small intestine
- Function: decreases blood calcium by depositing calcium in bones
- Excess Ca²⁺ is excreted in urine

- <u>Production site</u>: parathyroid gland
- <u>Targets:</u> bones, kidneys and small intestine
- Function: increases blood calcium by removing calcium from bones
- Lactation stimulates the release of PTH







Low levels of calcium ions in the blood cause

- A. decreased secretion of PTH and increased deposition of calcium in the bones
- B. decreased secretion of calcitonin and increased deposition of calcium in the bones
- C. increased secretion of PTH and movement of calcium from the bones to the blood
- D. increased secretion of calcitonin and movement of calcium from the bones to the blood

THE ADRENAL GLAND

- Above each kidney
- The adrenal gland Is made up of 2 glands
 - Adrenal medulla

(middle) – regulated by the nervous system

Adrenal cortex
 (outside) – regulated by
 hormones



Adrenal <u>MEDULA</u>

- activated by the sympathetic nervous system
- <u>Adrenal medulla</u> produces 2 hormones during immediate stress (initiates the fight-or-flight response)
- 1) Epinephrine (adrenaline)
- 2) Norepinephrine (noradrenaline)

Short term Stress

Increase blood glucose by converting glycogen to glucose

- Increase heart rate
- Increase breathing rate
- •Blood vessels dilate (get bigger)
- •Pupils dilate



The Adrenal Gland



Cortisol

<u>Ald</u>osterone

-Activated by the pituitary

Adrenal CORTEX produces 2 hormones

- 1) Aldosterone
- 2) Cortisol

Stimulated by **ACTH** from the anterior pituitary



Adrenal CORTEX -Cortisol-

Long term stress

- <u>Targets: Liver and muscles</u>
- Function: increases levels of amino acids which are then converted to glucose by liver = more energy

**Does cortisol increase or decrease blood glucose? It <u>increases</u> it.

Hyposecretion: Addison's disease Hypersecretion: Cushing's Syndrome

Can Stress Actually Kill You?

Adrenal CORTEX

Too little Cortisol: Addison's Disease

Symptoms:

Weight loss, low energy, low blood pressure, occasionally areas of hyper-pigmentation







Bronzing of the skin

Adrenal CORTEX Long term stress Too much Cortisol: Cushings Syndrome

Symptoms : -moon face, -osteoporosis, -pendulous abdomen, -bruise easily



Adrenal CORTEX Too much Cortisol: Cushing Syndrome

Due to hypersecretion of cortisol in the adrenal cortex



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Sympathetic Nervous system

Flow Chart for Epinephrine (and norepinephrine)

Adrenal Medulla

Epinephrine & Norepinephrine

Increases heart rate & breathing rate



Increases Amino acids in blood, which goes to liver to be converted to glucose

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Adrenal CORTEX -Aldosterone-

- Production site: adrenal cortex
- <u>Target:</u> the kidneys
- Function: increases sodium (Na⁺) retention and with it water though osmosis
- -essentially increases blood volume and therefore blood pressure

(similar to ADH \rightarrow Increases blood pressure)

- Hyposecretion: water loss or dehydration
- Hypersecretion: increased
 water retention

WATER RETENTION



Aldosterone vs. ADH

ADH released in response to dehydration.

Aldosterone is released in response to low blood pressure.

What happens if you stop drinking water?

http://www.youtube.com/watch? v=zCheAcpFkL8&safe=active&safety_mode=tru Which of the following rows identifies the source of cortisol, the hormone that stimulates the release of cortisol, and an effect of cortisol?

Row	Source	Hormone	Effect
А.	Adrenal gland	ACTH	Increased conversion of amino acids to glucose
В.	Pituitary gland	ACTH	Increased protein synthesis
C.	Adrenal gland	ADH	Increased conversion of glycogen to glucose
D.	Pituitary gland	ADH	Increased water reabsorption

Use the following information to answer the next two questions.

Thyroid cancer can develop slowly over many months or even years. Because the symptoms are frequently overlooked, diagnosis is often delayed. However, thyroid cancer is usually treated successfully with a combination of surgery, radioactive iodine, and thyroid medication.

Surgical removal of the thyroid gland results in

- A. a decrease in thyroxine levels and TSH levels
- **B.** an increase in thyroxine levels and TSH levels
- an increase in thyroxine levels and a decrease in TSH levels
- **D.** a decrease in thyroxine levels and an increase in TSH levels

The release of thyroxine from the thyroid is directly regulated by



A characteristic symptom of hyperthyroidism is



lethargy weight loss

- . intolerance to cold
- D. slowed mental processes