

TULBURARILE CIRCULATORII

Tulburari circulatorii – devieri fata de normal a circulatiei sanguine si limfatice in aparatul cardio-vascular

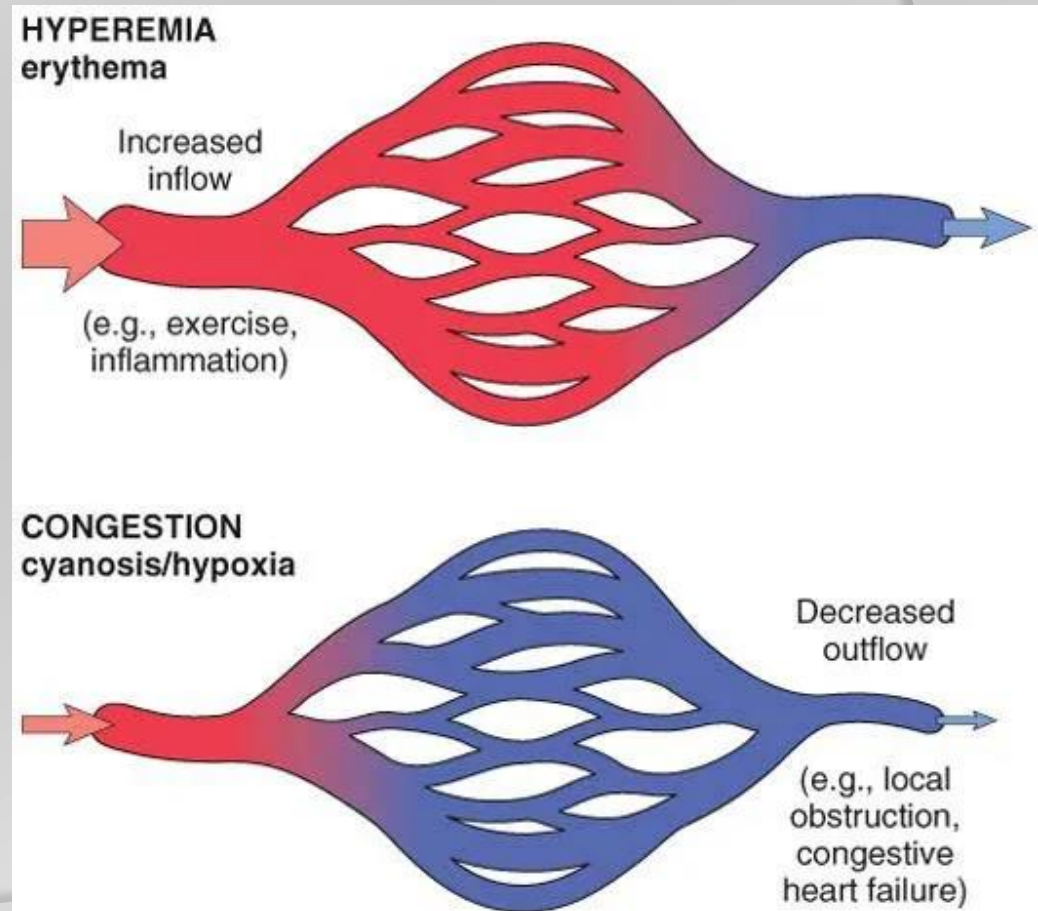
- **Tulburari prin modificarea volumului si distributiei sangelui in diferite tesuturi si organe:**
 - hiperemia
 - ischemia
 - Infarctul
 - hemoragia
- **Tulburari de cauza obstructiva:**
 - tromboza
 - embolia/embolismul
- **Tulburari ale circulatiei limfei**
- **Tulburari in distributia apei si electrolitilor:**
 - edemele.

➤ Hiperemia

Exces al masei sanguine intravasculare la nivelul unui tesut sau organ.

❖ **Hiperemia activa** = creșterea afluxului de sange arterial.

❖ **Hiperemia pasiva** = scăderea drenajului venos.



❖ Hiperemia activa

- raspuns **fiziologic** la stimulare functionala;
- **patologica** – factori: – fizici
 - chimici
 - biologici exogeni sau endogeni.



- accentuarea desenului vascular (dilatarea arteriolelor si capilarelor)
- amplificarea pulsului si a proceselor oxidative (metabolismului celular).
- consecintele functionale – minime.



https://upload.wikimedia.org/wikipedia/commons/thumb/0/0d/Sunburn_Treatment_Practices.jpg/450px-Sunburn_Treatment_Practices.jpg



https://upload.wikimedia.org/wikipedia/commons/thumb/0/0b/Sunburned_knee.png/1280px-Sunburned_knee.png

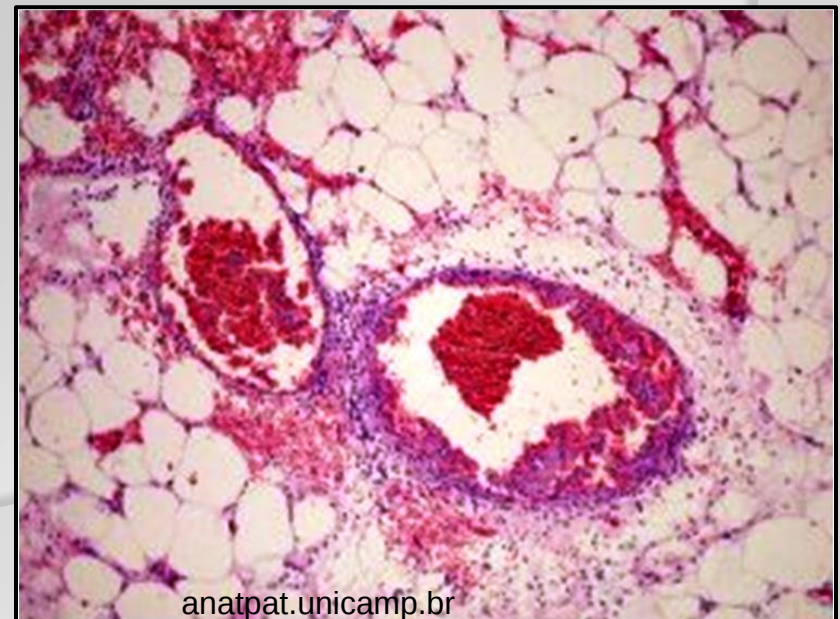
Macroscopic:

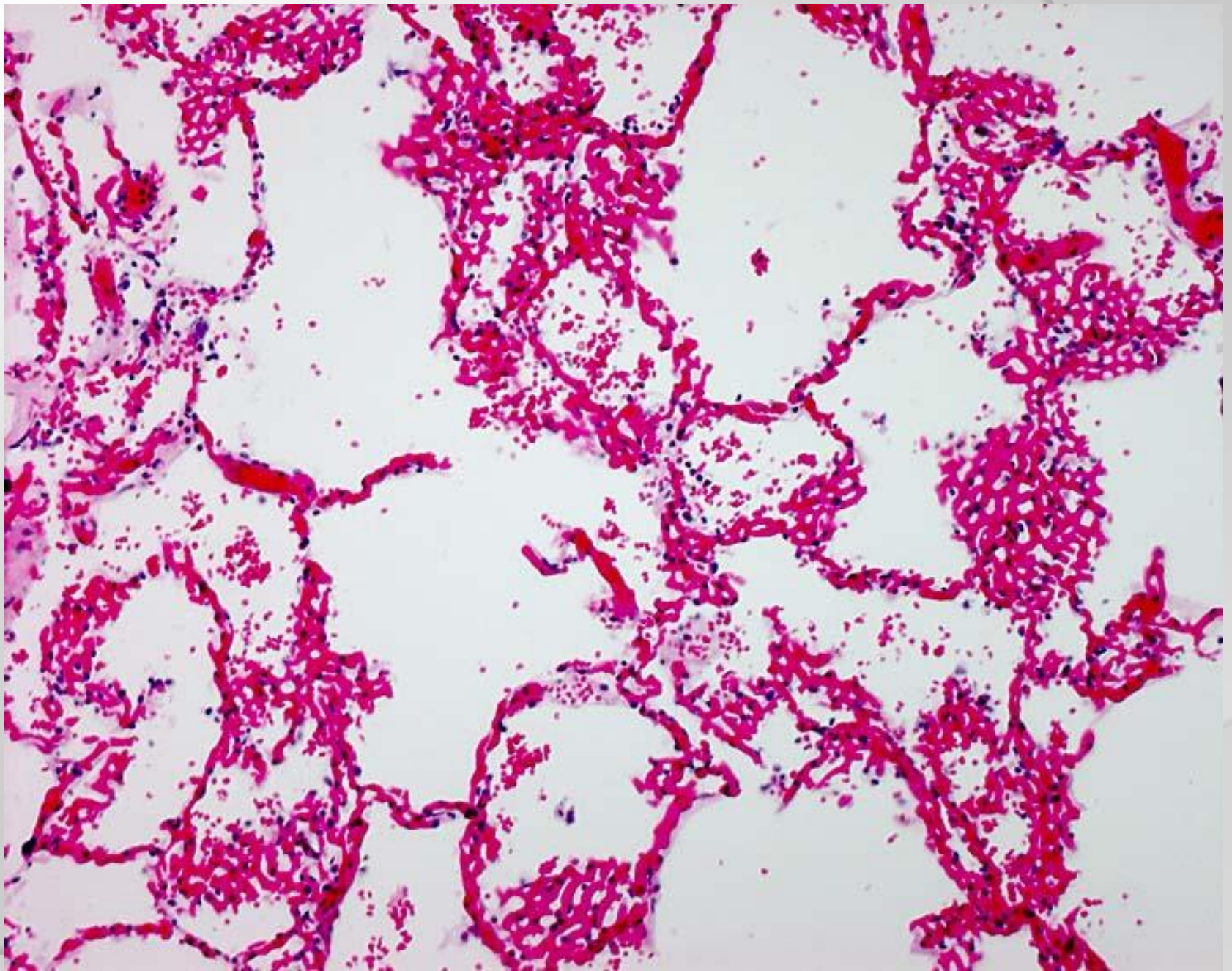
eritem (culoare rosie-vie) + temperatura locala crescuta.

Microscopic:

- arteriole si capilare dilatate, cu endoteliu turgescent, pline cu hematii bine conturate si egal colorate;
- ↑ presiunii hidrostatice → edem perivascular + eritrodiapedeza.

Ex: inflamatie acuta.





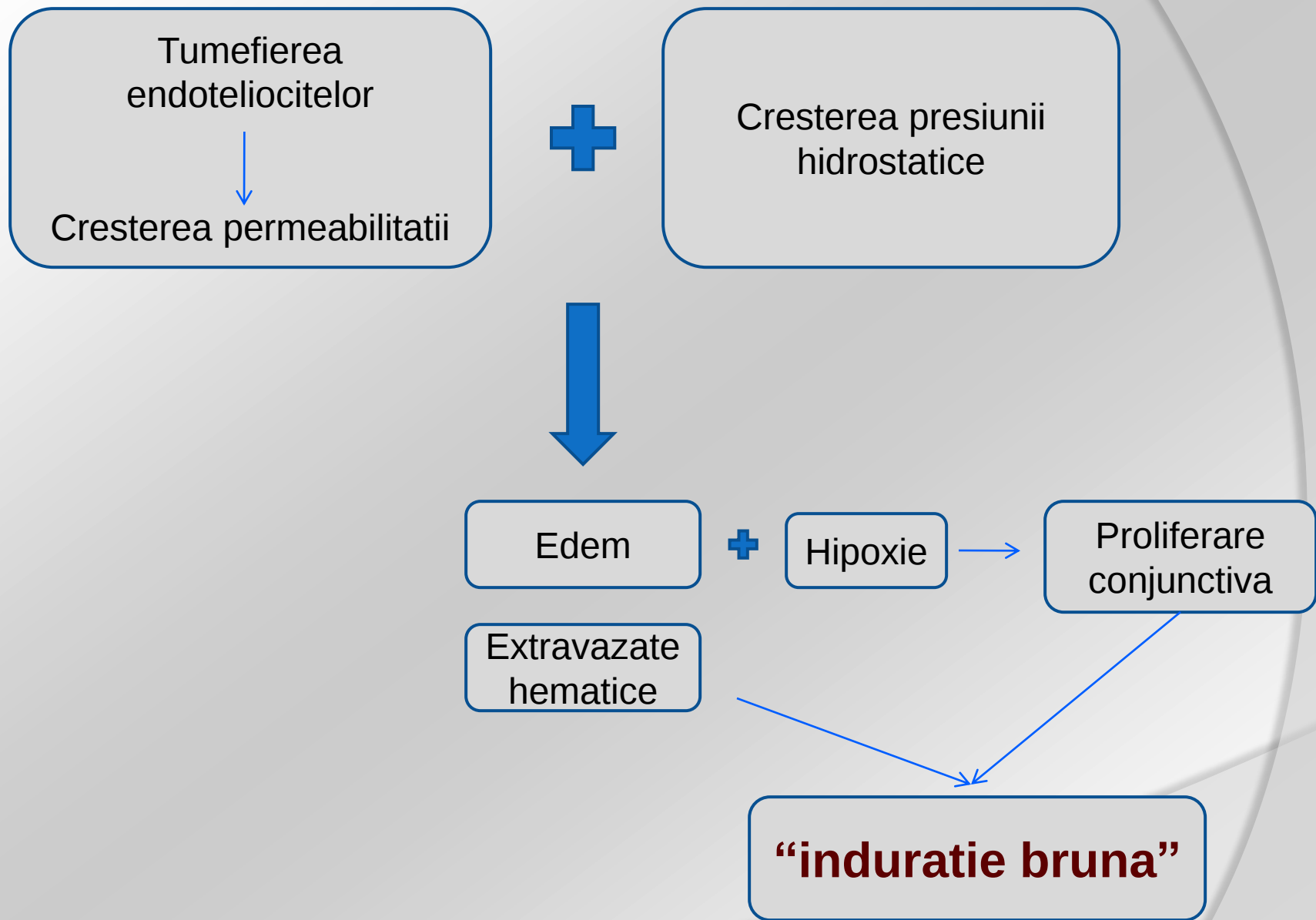
❖ **Hiperemia pasiva** (congestia pasiva, staza)

= acumularea sangelui venos intr-un organ sau tesut (capilare, venule).

→ hipoxie de staza, ↑ Hb redusa (>5 g/100 ml sg) → **cianoza**.

Microscopic:

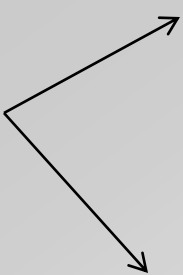
- accentuarea desenului vascular, capilare si venule dilatate, pline cu hematii adesea conglutinate, inegal colorate.



Modificările celulare:

- staza acuta - necroza extinsa a unui grup de celule (**infarct**);
- staza cronica - necroza unor celule izolate, cu fibroza (**scleroza**) si cu **atrofia** organului.

Dupa factorul cauzal si extinderea procesului:

- congestia pasiva 
 - generalizata (sistemica) - IC**
 - localizata** la un teritoriu/organ

Insuficienta cardiaca

= esecul inimii de a asigura in orice moment distributia satisfacatoare a sangelui in tesuturi si organe, in functie de nevoile lor metabolice.

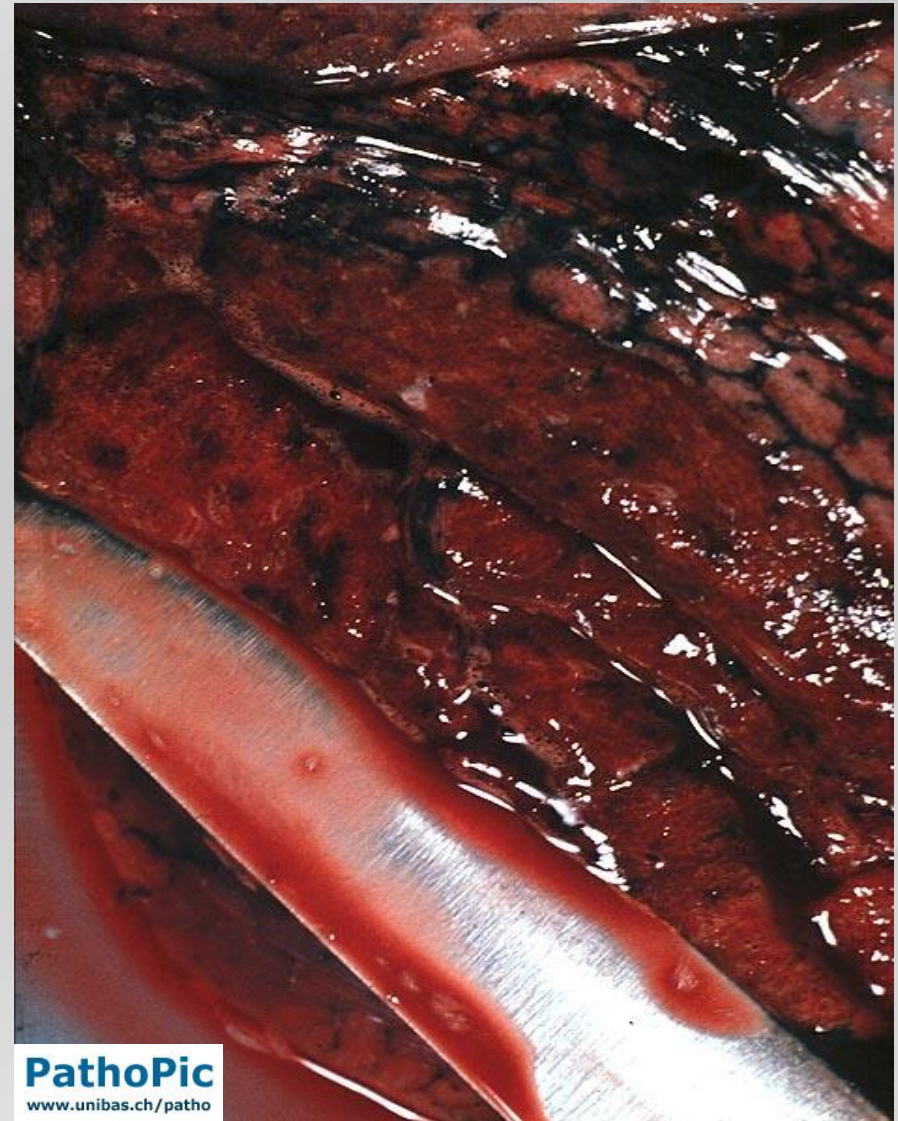
- ⦿ IC stg → plaman cardiac.
- ⦿ IC dr (congestiva sau globala) → congestia pasiva generalizata a viscerelor (ficat, splina, rinichi de staza).

Plamanul de staza

✓ **Macroscopic:**

- turgescent;
- edematos;
- marit de volum si greutate;
- rosu-violaceu;
- pe suprafata de sectiune – se scurge sange negricios;
- bronhii -secretii cu tenta sanguinolenta;
- mucoasa bronhiilor – violacee (venule dilatate);
- staza cronica: culoare rosie-bruna, consistenta crescuta

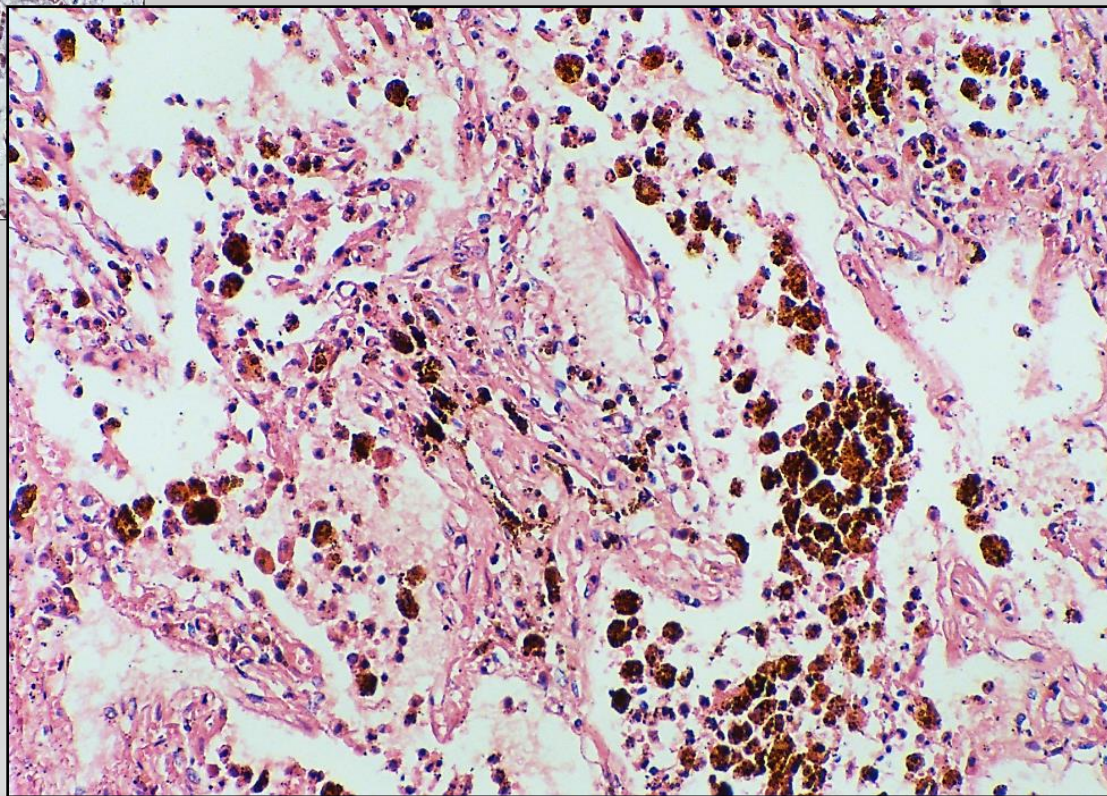
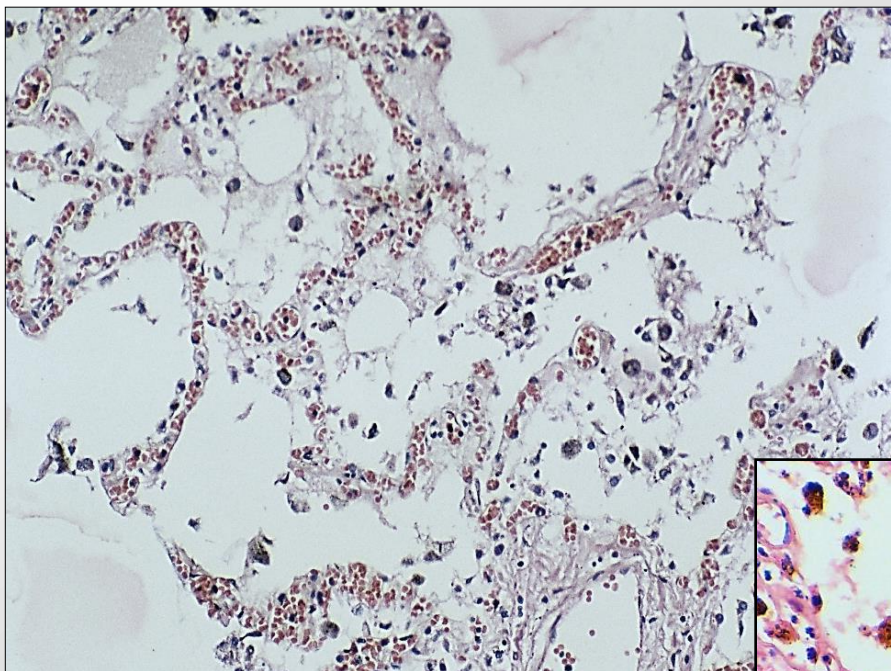
➡ INDURATIA BRUNA.





✓ **Microscopic:**

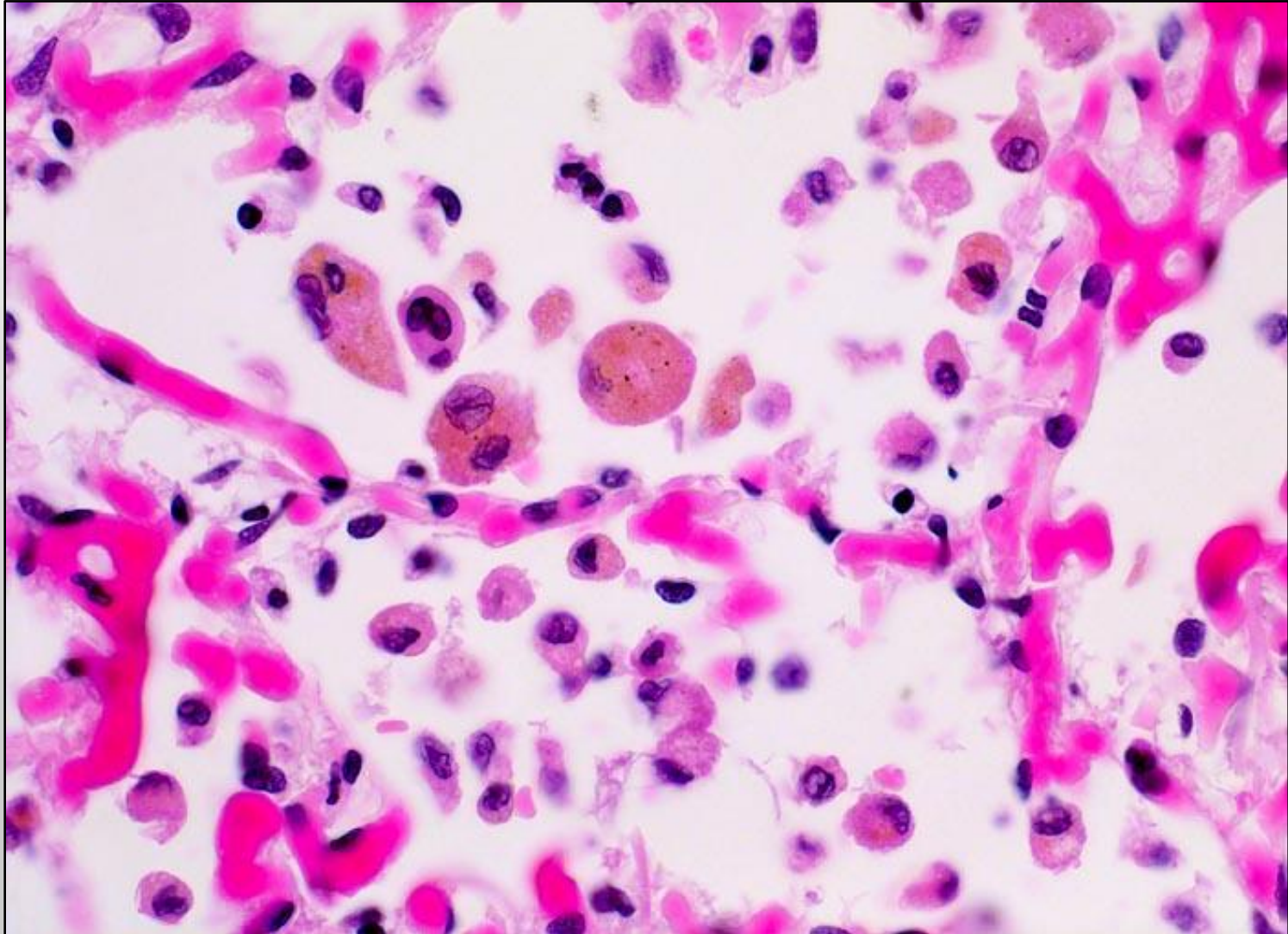
- septuri interalveolare mult ingrosate;
- distensia capilarelor;
- extravazarea eritrocitelor – fagocitate de macrofage (granule brun- ruginii de hemosiderina) = “**celulele insuficientei cardiace**”;
- acumulare de lichid in alveole → perturbarea schimburilor gazoase;
- “**induratie bruna a plamanului**”;
- hipertensiune pulmonara cu IC dr. si congestie venoasa generalizata.



Imagini din arhiva Disciplinei de Morfopatologie

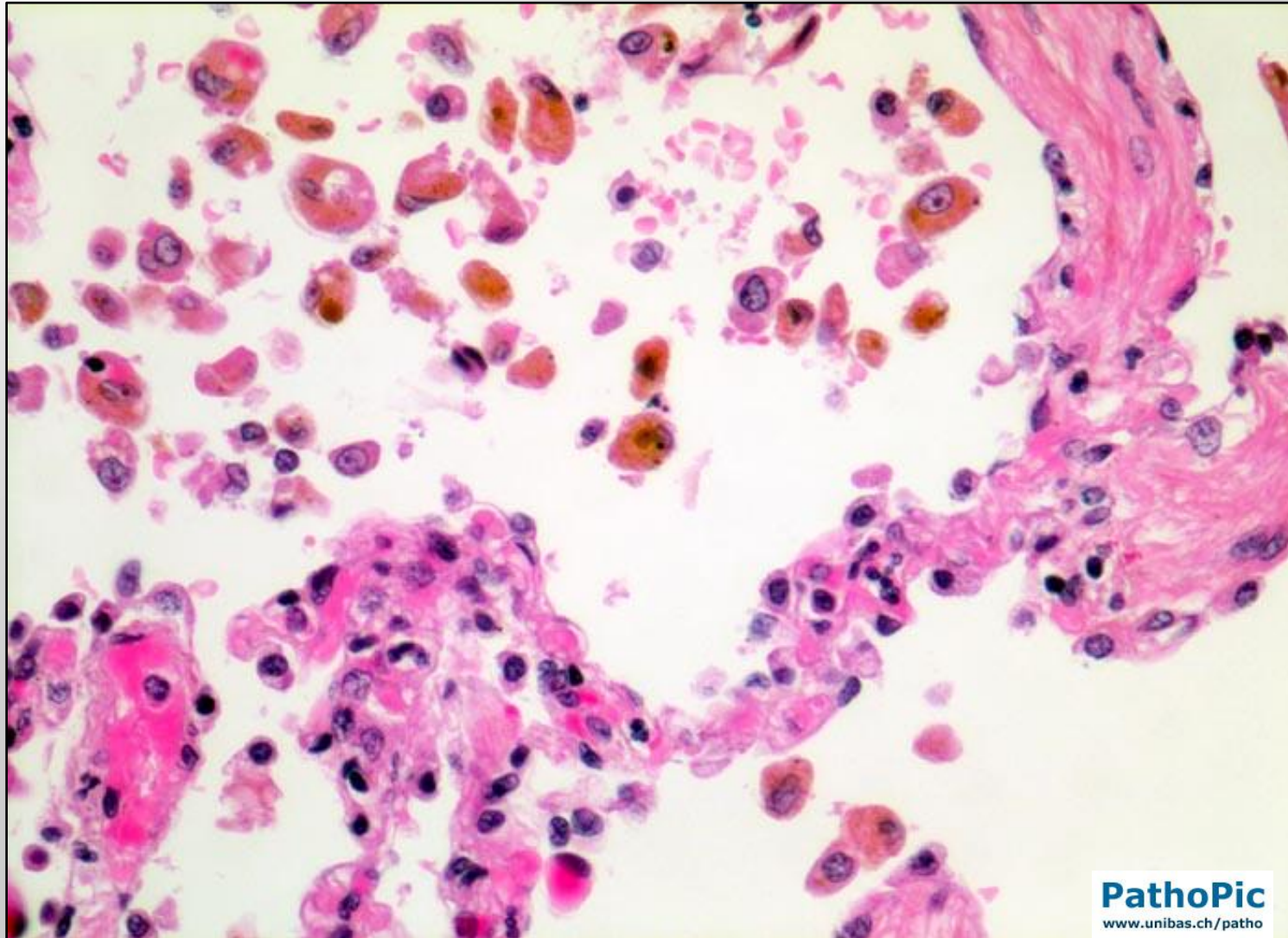
Staza cronica

- macrofage alveolare incarcate cu pigment hemosiderinic;
- capilare dilatate in septurile alveolare.



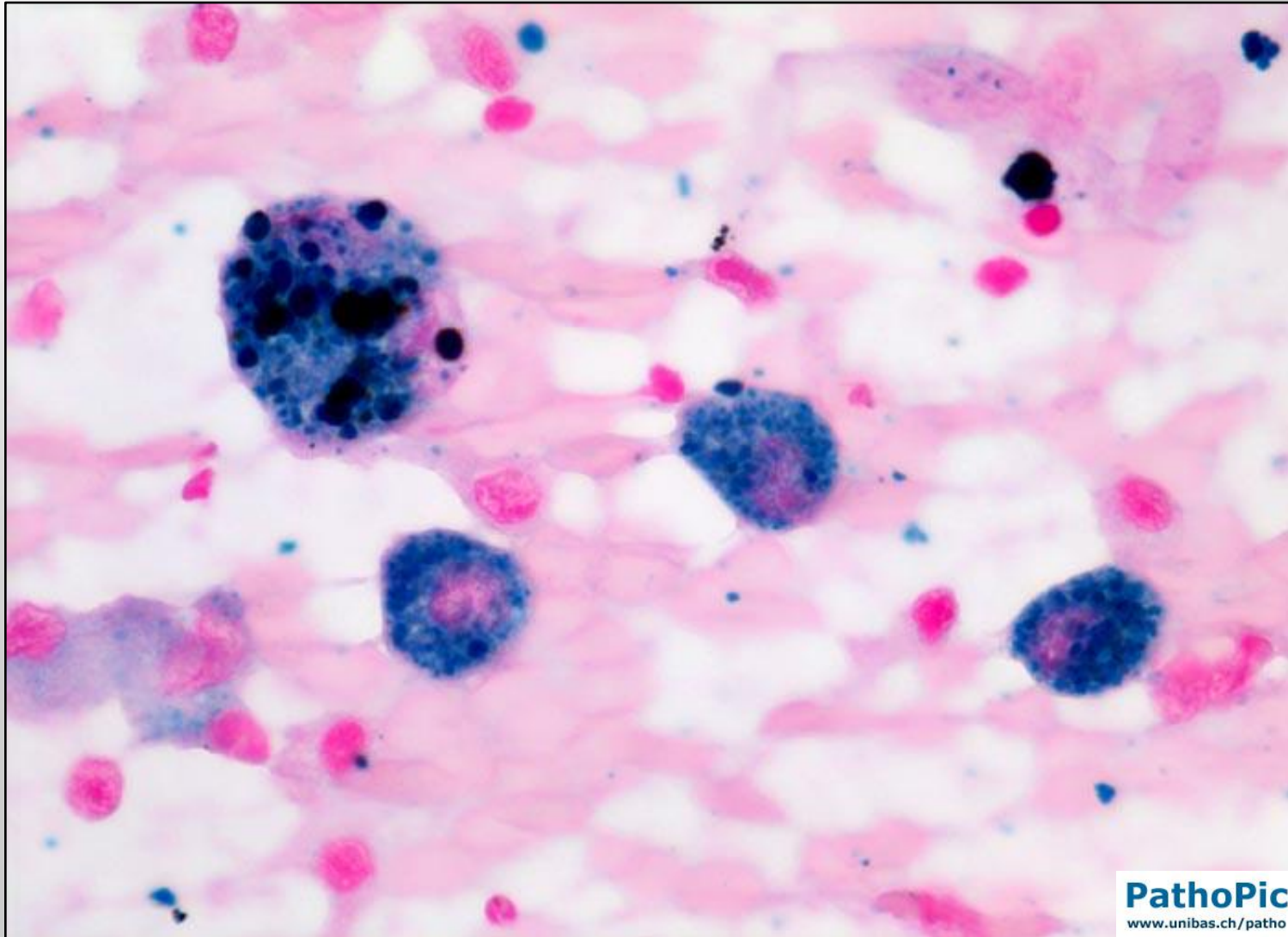
Staza cronica

- macrofage alveolare incarcate cu pigment hemosiderinic;
- fibroza in septurile alveolare.



Reactia Pearls

- macrofage alveolare incarcate cu pigment hemosiderinic

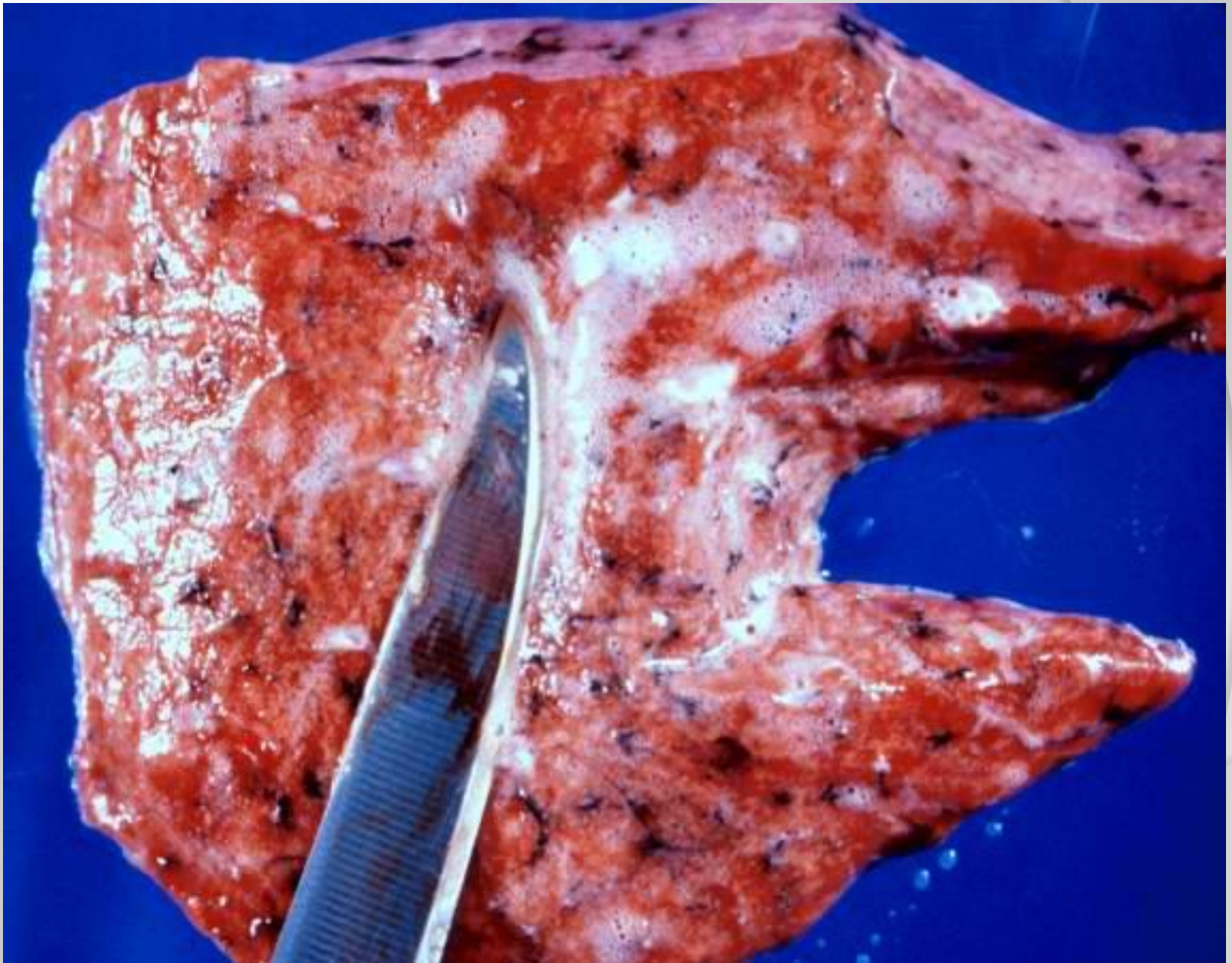


Edemul pulmonar acut

- ⦿ complicatie majora a plamanului de staza;
- ⦿ transudare anormala a plasmei spre alveolele pulmonare si in interstitiu;
- ⦿ macro:
 - cresterea in volum si greutate;
 - consistenta usor crescuta;
 - pe sectiune – serozitate spumoasa, roz-hemoragica.



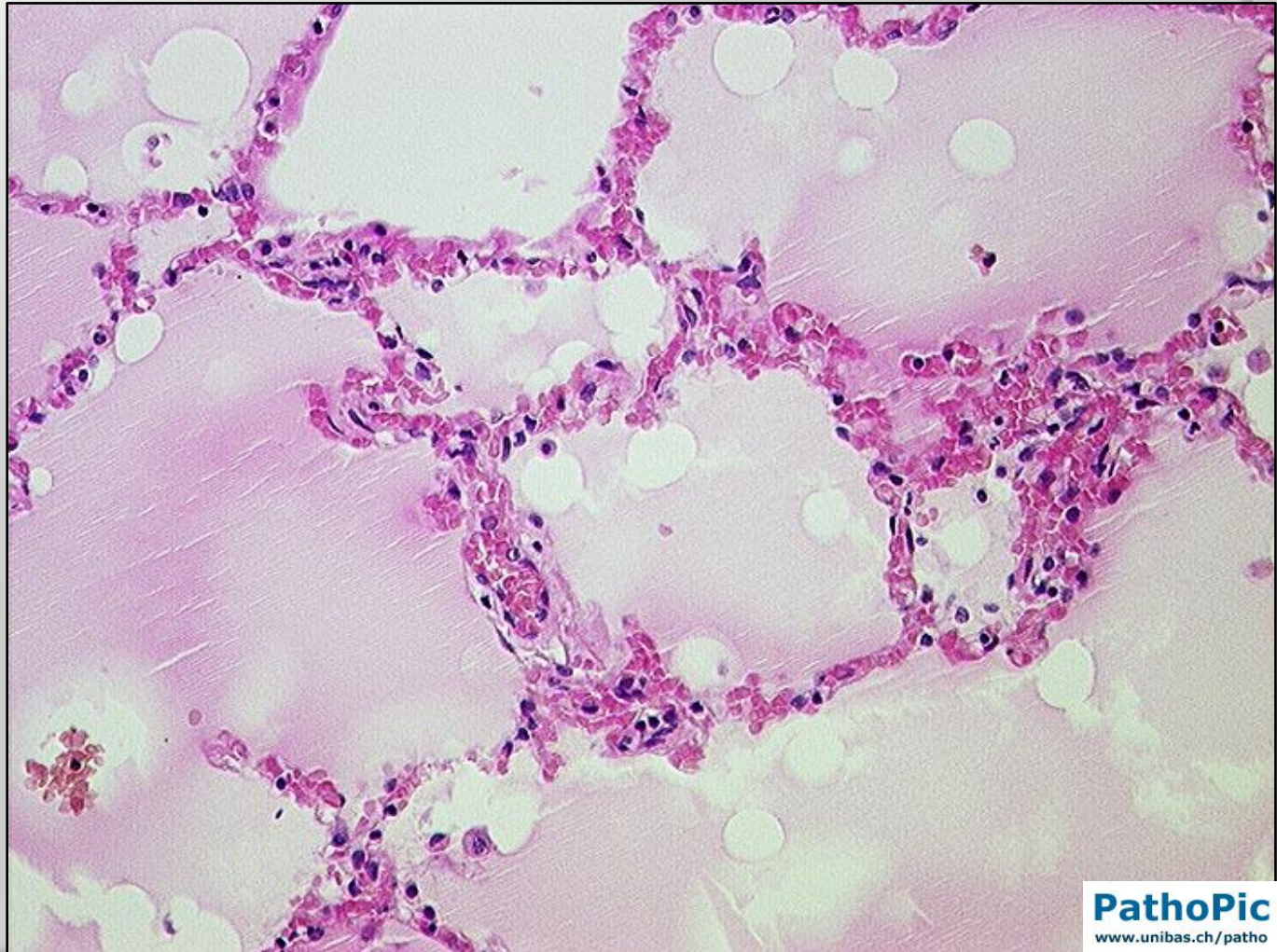
Imagine din arhiva SCJUTM



https://www.wikidoc.org/images/e/ea/Pulmonary_edema_case_1.3.jpg

✓ *microscopic*:

- capilarele septurilor interalveolare hiperemiate;
- alveole: lichid de edem (pelicula omogena, eozinofila) cu bule de aer si cateva hematii.



Manifestari clinice:

- hipoxie
- hipercapnie
- sufocare brutala a bolnavului
- polipnee
- tuse
- expectoratie spumoasa
- raluri crepitante.



URGENTA MEDICALA!

<https://www.wikihow.com/Treat-a-Pulmonary-Edema-at-Home#/Image:Treat-a-Pulmonary-Edema-at-Home-Step-1-Version-2.jpg>

Staza hepatica/ "Ficatul cardiac"

✓ *Macroscopic:*

- ficat marit in volum si greutate, cu marginea anterioara rotunjita, dur, neted, rosu-violaceu;
- la sectionare – sange negricios;
- ficat "muscad".



<https://www.flickr.com/photos/smitten/2040734923/>

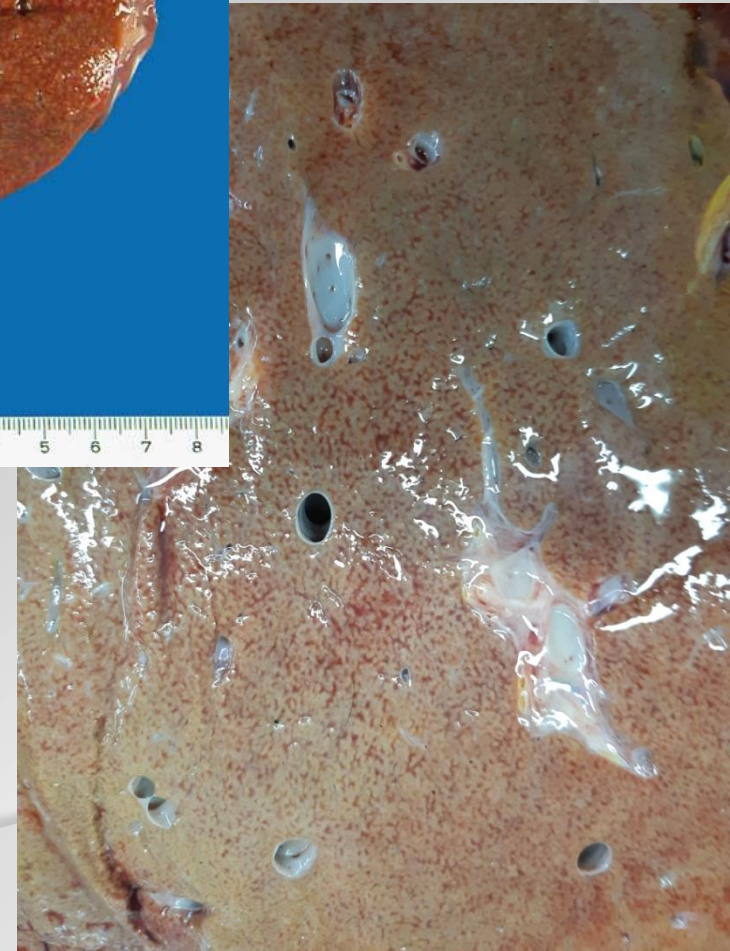


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<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=9439>



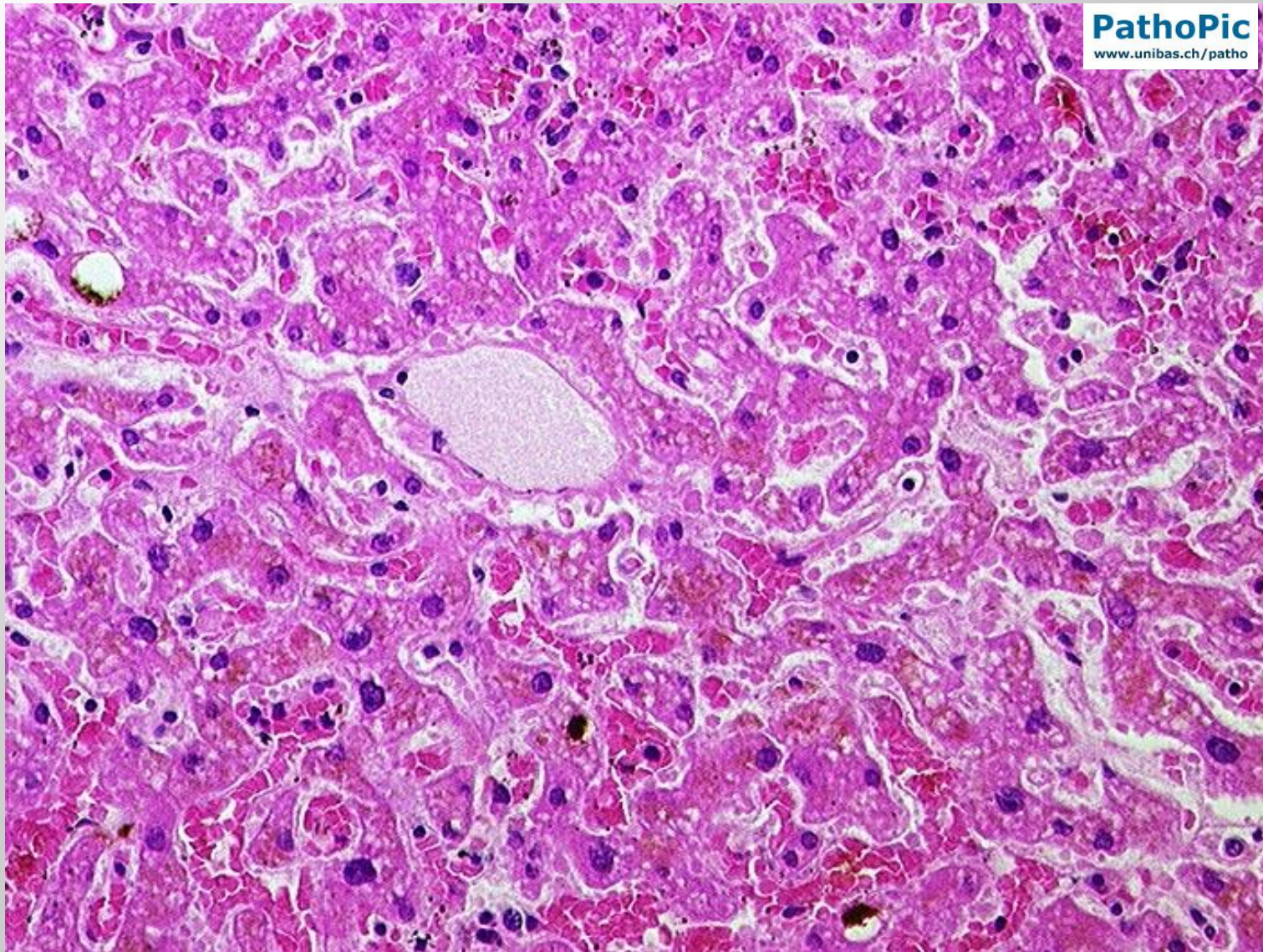
Arhiva SCJUTM



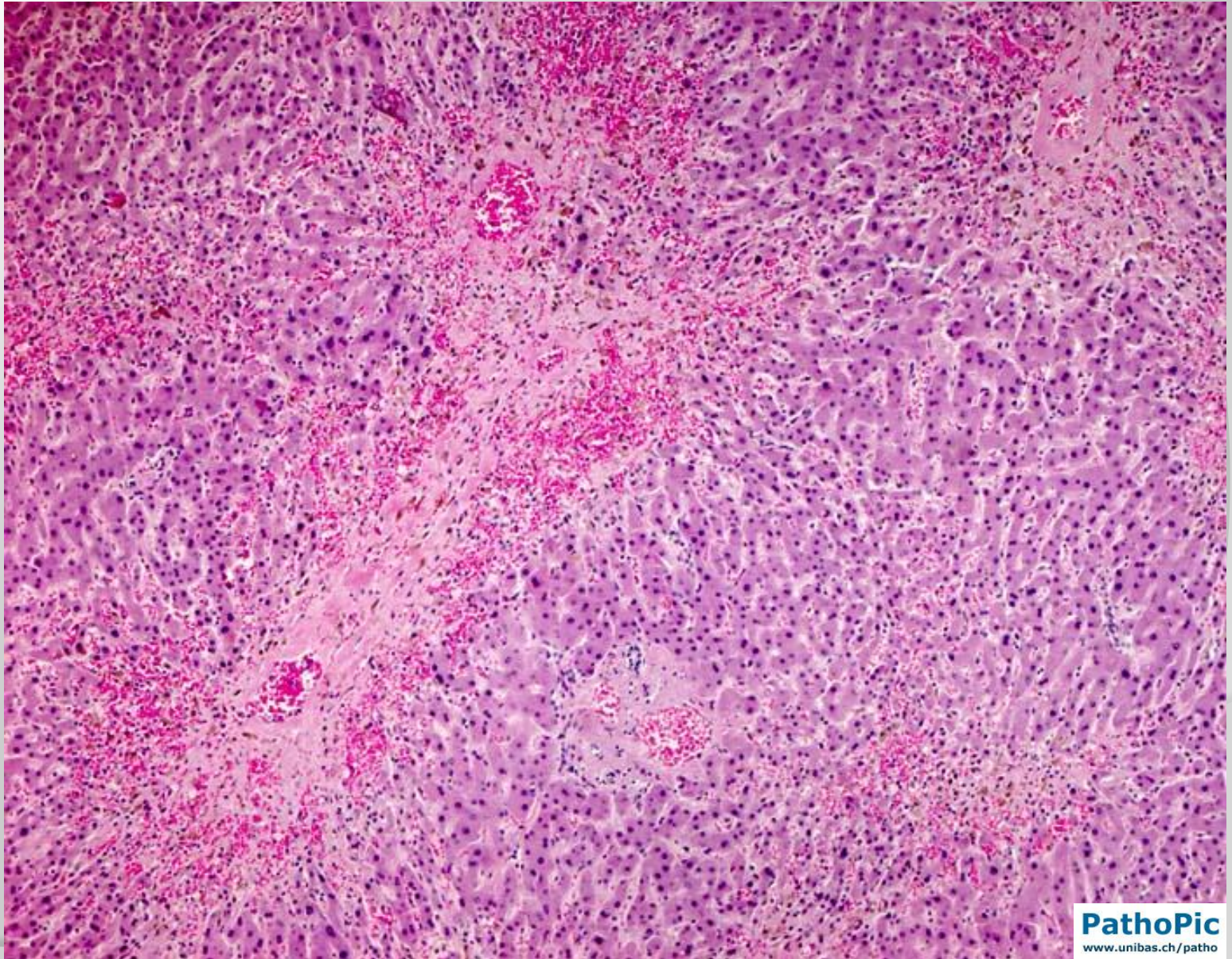
✓ ***Microscopic:***

- distensia venulelor centrolobulare si a sinusoidelor pericentrolobulare;
- ficat “**in cocarda**”:
 - **zona centrolobulara** – modificari degenerative, hepatocitele se atrofiaza, dispar; sufuziuni hemoragice;
 - **zona mediolobulara** – steatoza micro-, macrovacuolara;
 - **zona exolobulara** – aspect normal.

Staza hepatica



Staza hepatica cronica si usoara fibroza



- ficat “**invertit**”- spatiile porte si hepatocitele exolobulare centreaza “noi lobuli”
- ingrosarea peretilor venelor centrolobulare si fibroza pericentrolobulara → “**ciroza cardiaca**”.

Clinic:

- hepatalgia de efort;
- marginea anterioara a ficatului palpabila mult sub rebordul costal;
- sindrom de citoliza.

➤ ***Splina de staza***

- marita de volum si greutate, tensionata;
- suprafata de sectiune violacee-intunecata;
- congestia pasiva de lunga durata:
 - fibroza difuza;
 - depuneri de hemosiderina;
 - calcificarea focarelor vechi de hemoragie (corpusculii Gamna-Gandy);
- +/- hipersplenism (tulburari hematologice).

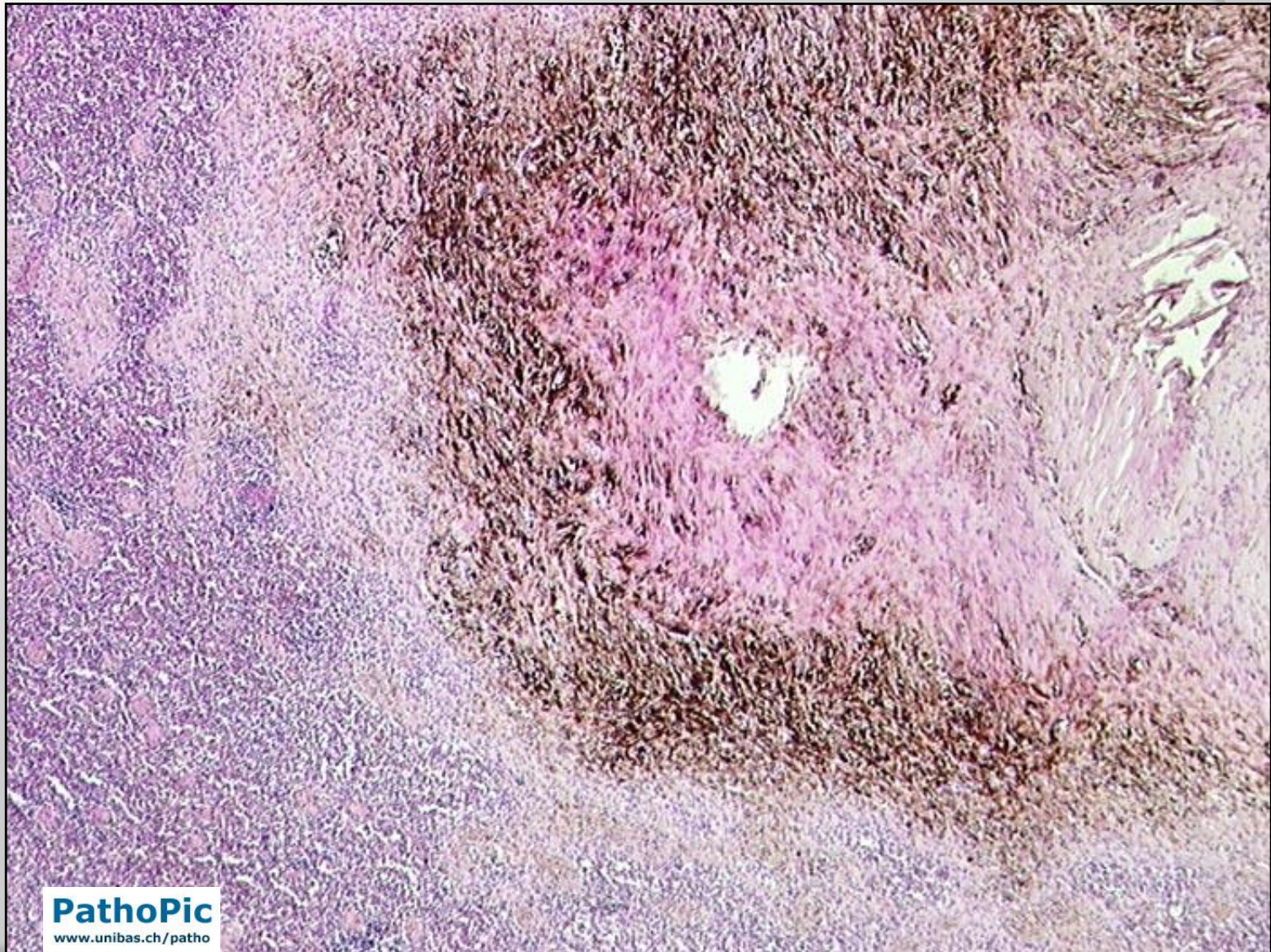
Splina de staza



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www.unibas.ch/patho

<http://peir.path.uab.edu/library/picture.php?/11311/category/70>

Corpusculi Gamna-Gandy: noduli fibrotici cu abundente depozite de pigment hemosiderinic din staza splenica cronica



Congestia pasiva localizata

Obliterarea unui colector venos principal prin:

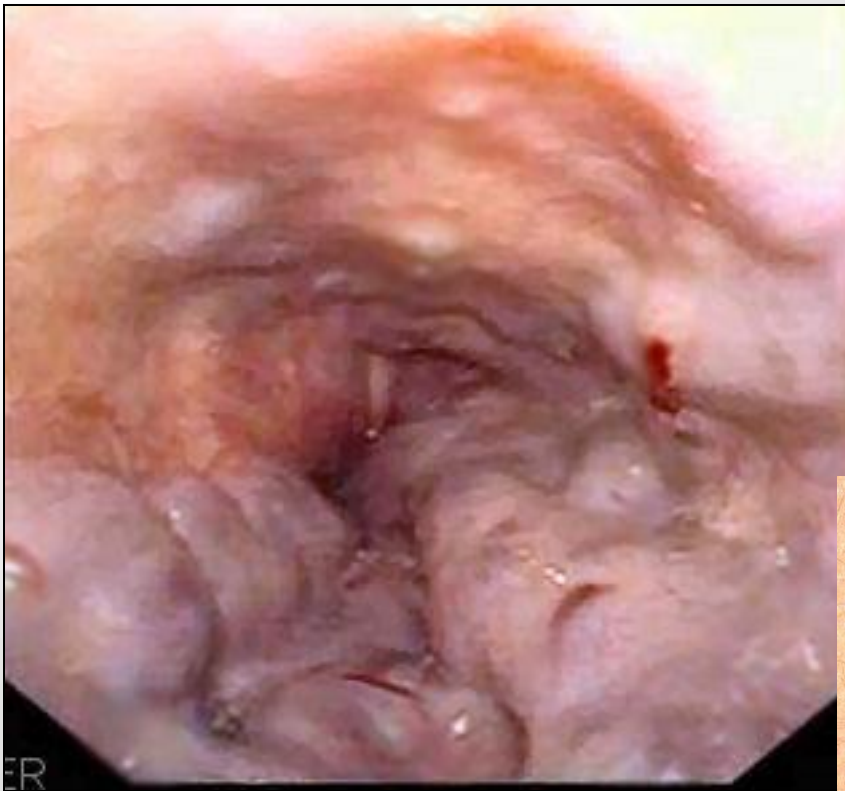
- tromboza;
- compresiune prin tumori, cicatrici fibroase;
- torsiunea mecanica a pediculului vascular;
- anomalii ale peretelui venos.

Obstructia:

- rapida → infarct;
- cronica → dezvoltarea circulatiei colaterale.

Ex: hipertensiunea portala din ciroza hepatica

- dilatatii varicoase ale venelor subcutanate
- hemoroizi
- varice esofagiene.



https://en.wikipedia.org/wiki/Esophageal_varices#/media/File:Esophageal_varices_-_wale.jpg



https://en.wikipedia.org/wiki/Hemorrhoid#/media/File:M_44_anus_22.jpg

Ex: vene varicoase ale membrelor inferioare



https://en.wikipedia.org/wiki/Varicose_veins#/media/File:Leg_Before_1.jpg



https://en.wikipedia.org/wiki/Venous_stasis#/media/File:Chronicveno usinsufficiency.jpg

HEMORAGIA

= iesirea sangelui in afara sistemului cardiovascular, fie in afara organismului (hemoragii externe), fie in spatiile nevasculare ale acestuia (hemoragii interne), prin intreruperea continuitatii peretilor acestui sistem sau prin cresterea marcata a permeabilitatii capilarelor si venulelor.

Clasificarea hemoragiei:

- *segmentele vasculare*: capilare, venoase, arteriale, cardiace;
- *evolutie*: acuta, cronica;
- *localizare*:
 - externa;
 - interna:
 - interstitiala;
 - in cavitati serosae;
 - in organe cavitare.

Cauzele hemoragiilor:

Alterari localizate ale peretelui vascular:

- traumatice: plagi, contuzii, sectionari, intepaturi, zdrobiri, fracturi;
- spontane: ateromatoza, arterite, flebite, anevrisme, erodarii vasculare, varice.

Leziuni vasculare difuze +/- tulburari de coagulare:

- hemoragii prin diapedeza (sdr. hemoragipare, diateze hemoragice)
- cresterea permeabilitatii vaselor mici: staza cronica, toxine bacteriene, agenti fizici, chimici
- tulburarea mecanismului coagularii: fibrinoliza, terapie anticoagulanta, hemofilie, avitaminoza K, PP, C, hipoprotrombinemia, hipo-/afibrinogenemia, trombocitopenia

Forme anatomo-clinice de hemoragie

Externe: aparute pe suprafata corpului

Interne

Interstitiale:

- petesii
- purpura
- echimoza
- hematom
- apoplexie

In cavitati seroase:

- hemopericard
- hemotorax
- hemoperitoneu
- hemartroza
- hematocel

In organe cavitare:

- epistaxis
- hemoptizie
- gingivoragie
- hematemeza
- melena
- rectoragie
- hematurie
- menoragie
- metroragie

Petesii + purpura



<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=1295>



<https://dermnetnz.org/topics/meningococcal-disease/>

Purpura



<https://dermnetnz.org/imagedetail/20798?copyright=&label=Suction+bruise&caption=Suction+bruise>

Echimoza



Hematom



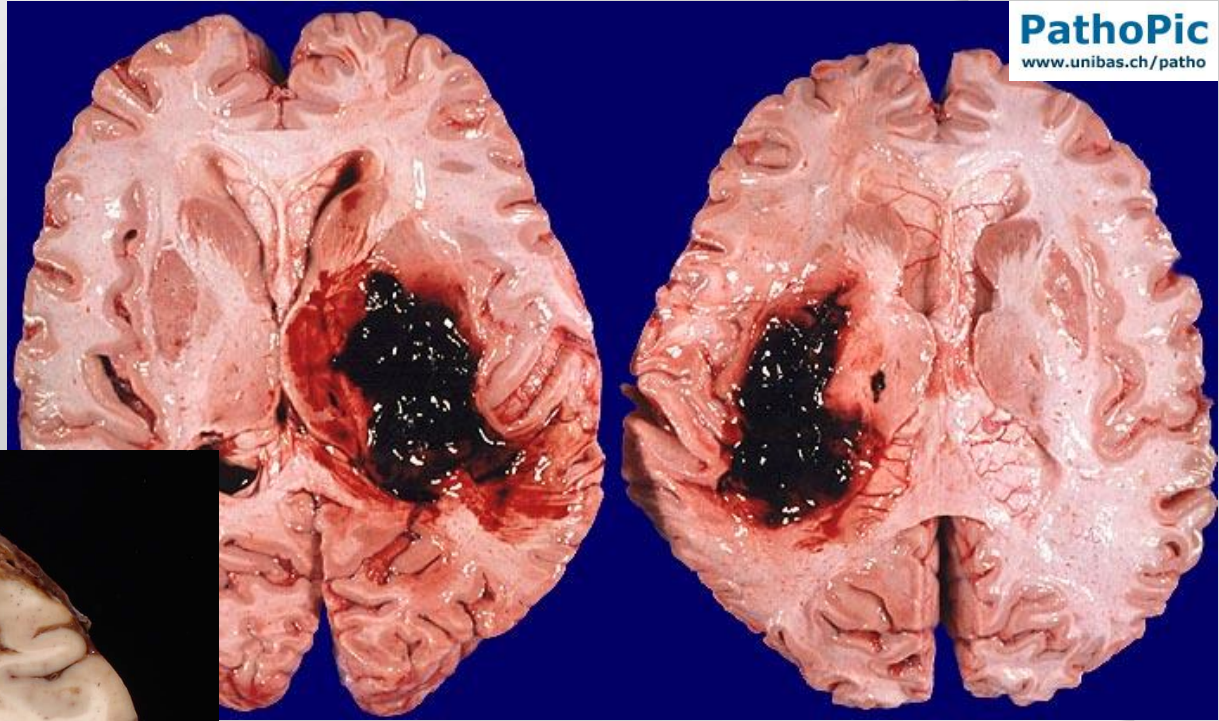
https://commons.wikimedia.org/wiki/File:Bruise_Hematoma_from_abuse_of_spouse.jpg

Hematoma subdural

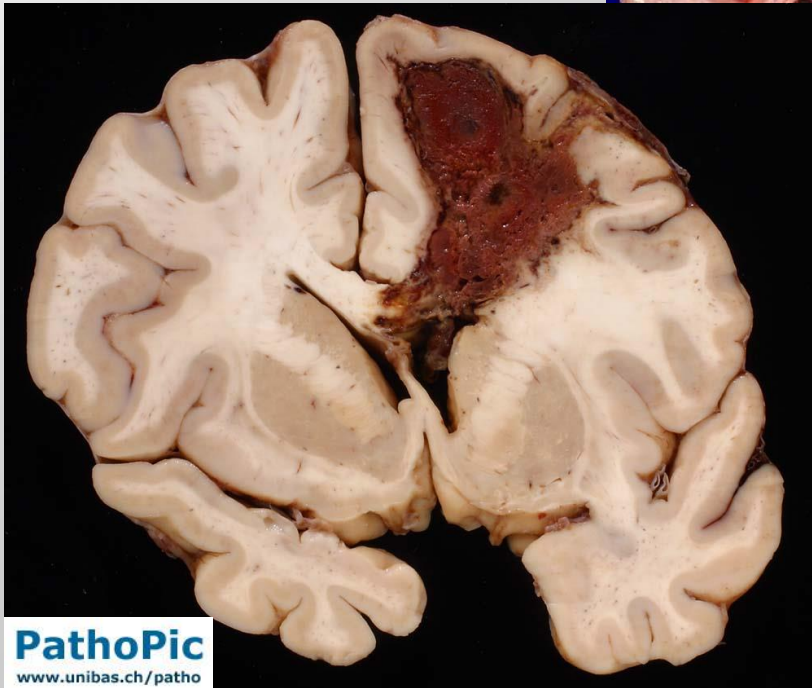


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Hemoragie cerebrala

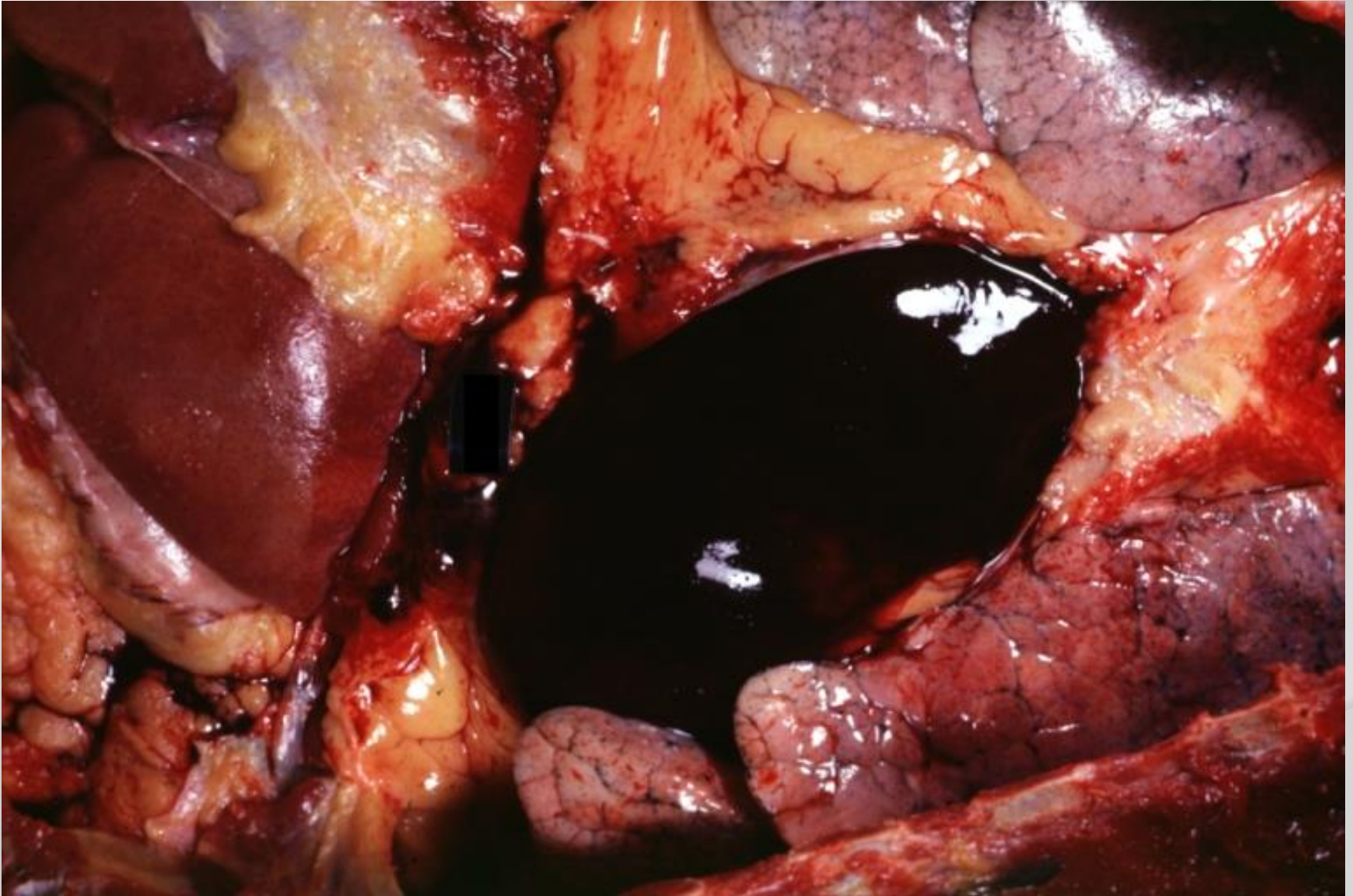


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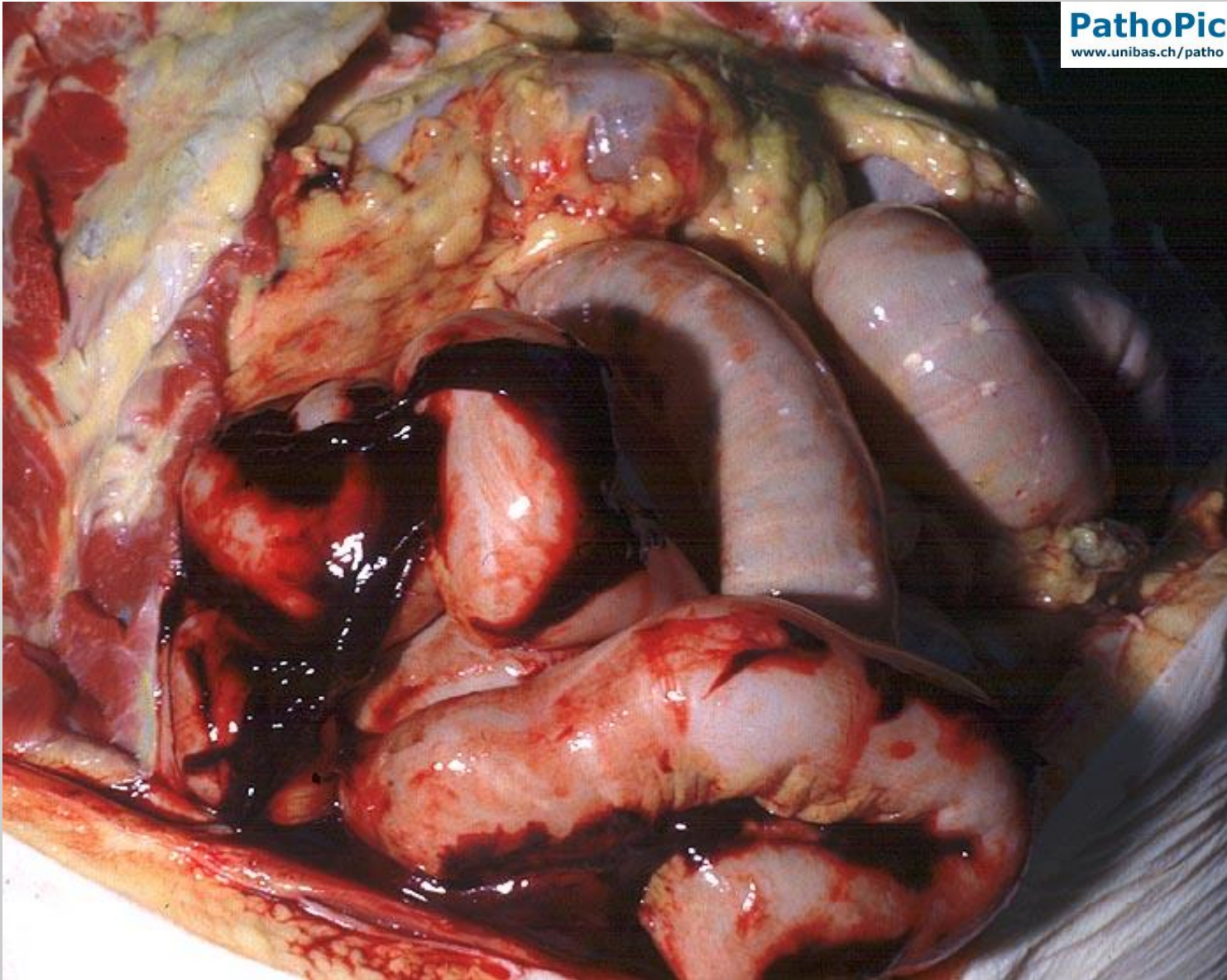
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Hemopericard



https://www.wikidoc.org/index.php/File:Hemopericardium_001.jpg

Hemoperitoneu



<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=360>

Evolutia focarului hemoragic

- Hemoragiile mici (petesii, echimoze, purpura): fagocitoza si drenaj limfatic si hematogen.
- Hematoamele voluminoase:
 - resorbtia si drenarea sangelui la periferia colectiei;
 - masa centrala se retracta, se densifica, se calcifica;
 - la periferie – teaca de tesut conjunctiv → hematom inchistat.

TROMBOZA

Procesul formarii in sistemul circulator, in timpul vietii, a unor mase solide/semisolide denumite trombi, alcatuite din trombocite, fibrina si ceilalti constituinti ai sangelui.

Cheagul de sange

- suprafata lucioasa, neteda, umeda
- consistenta elastica
- structura omogena
- neaderent de peretele vasului
- se extrage cu usurinta din lumen



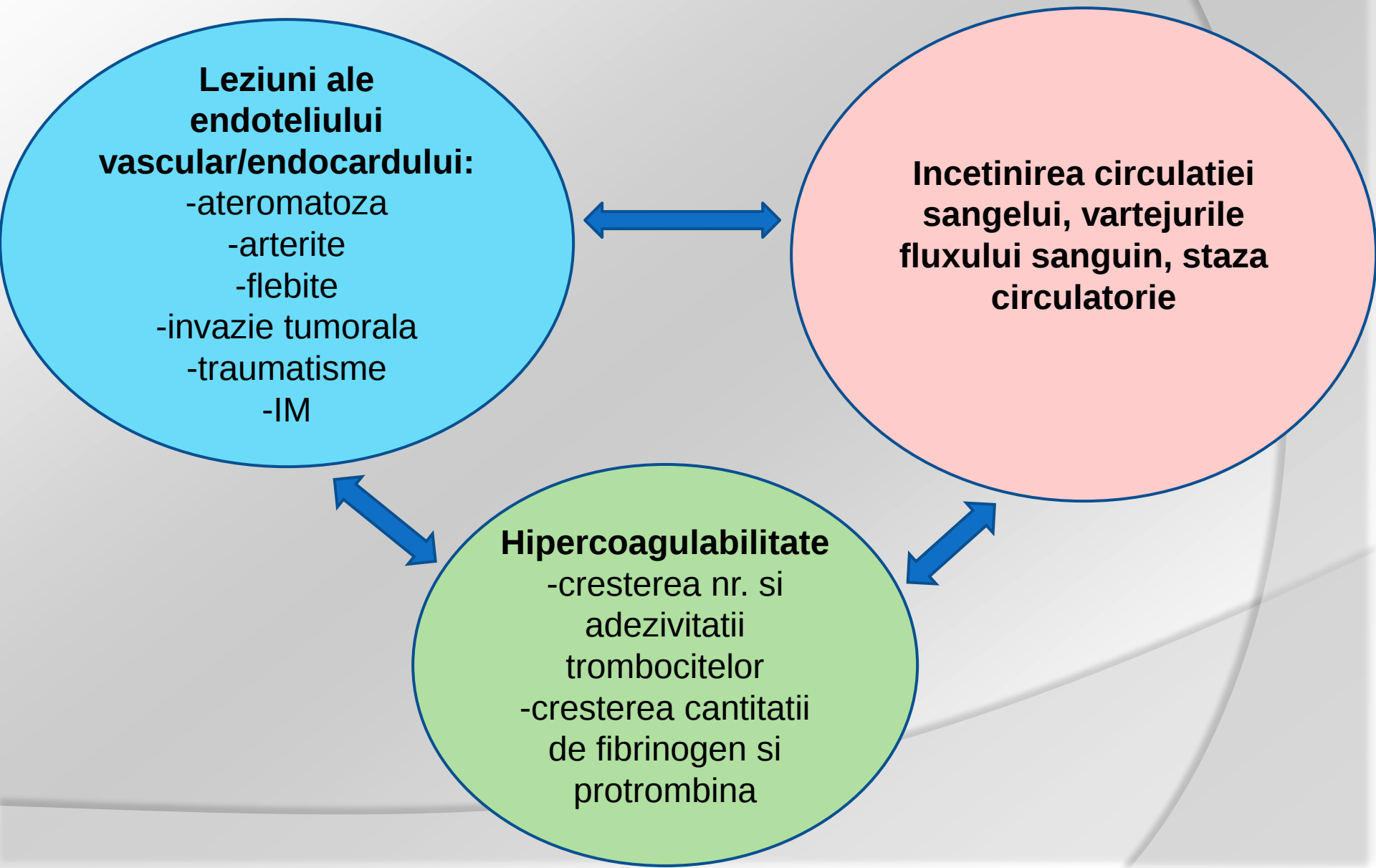
Trombul

- suprafata neregulata "dune de nisip"
- uscat, sfaramicios
- aderent de peretele vasului

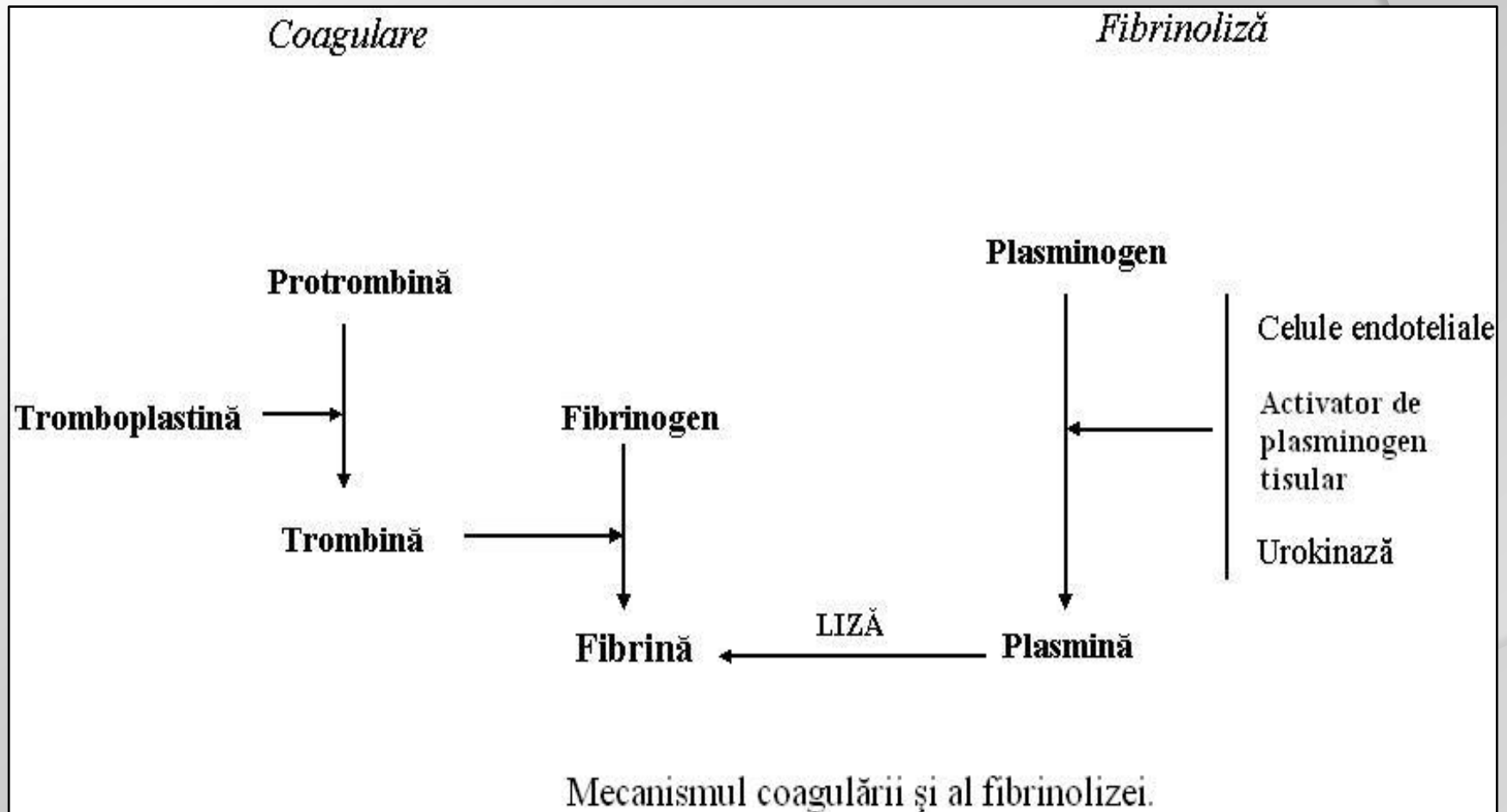


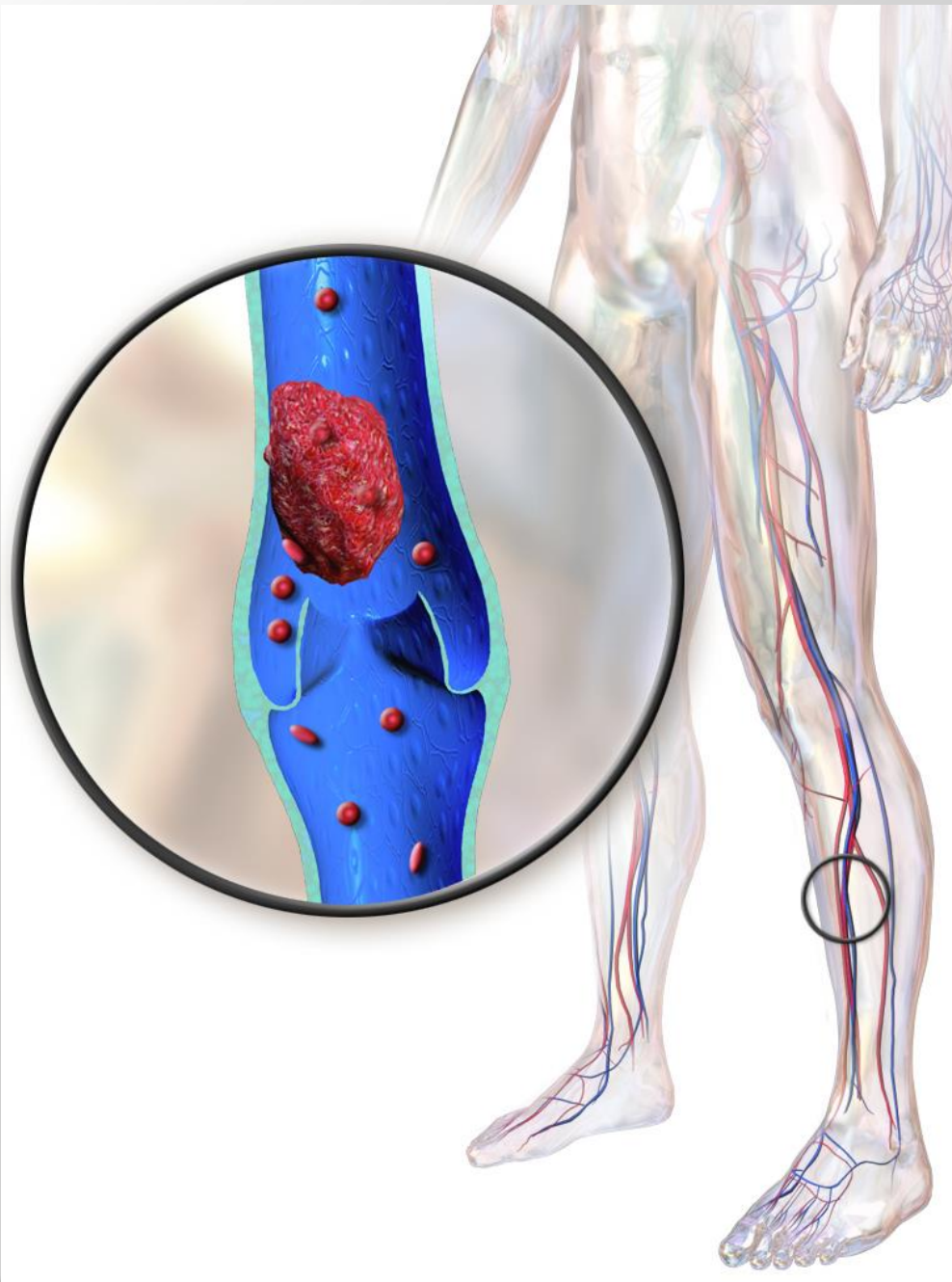
Cauzele trombozei

“Triada trombogena a lui Virchow”

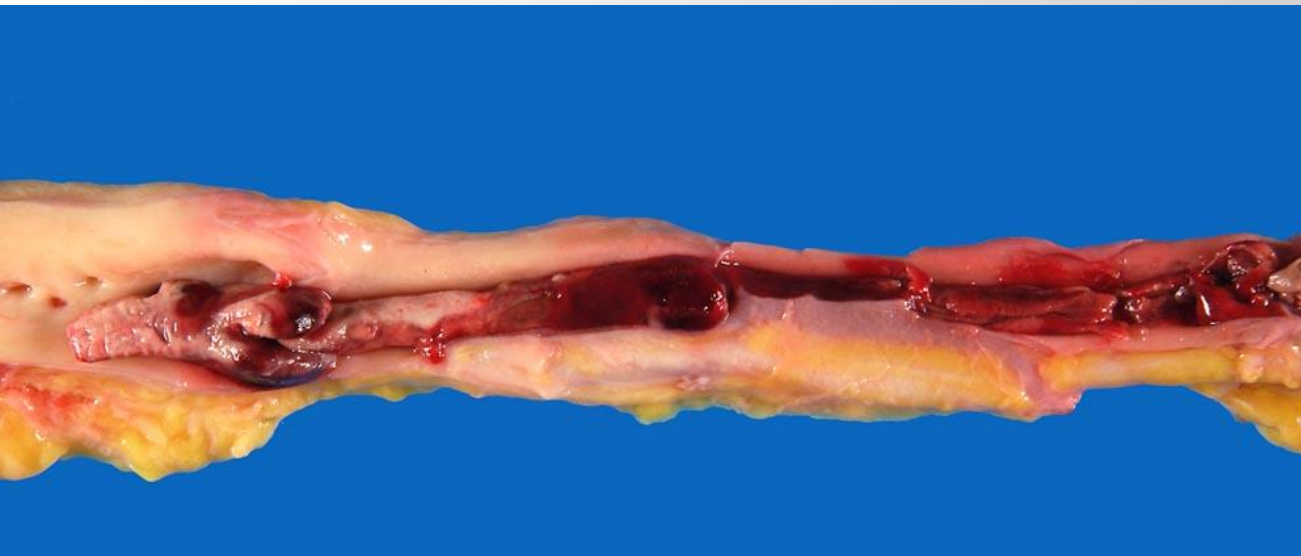


Mecanismul formarii trombilor





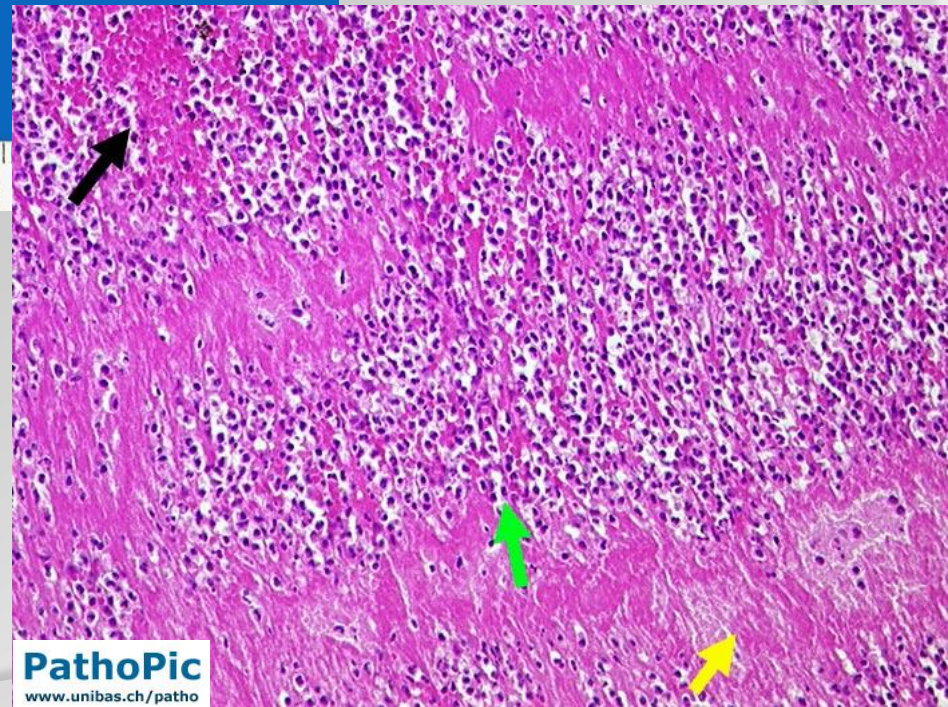
Tromboza venoasa profunda - liniile Zahn



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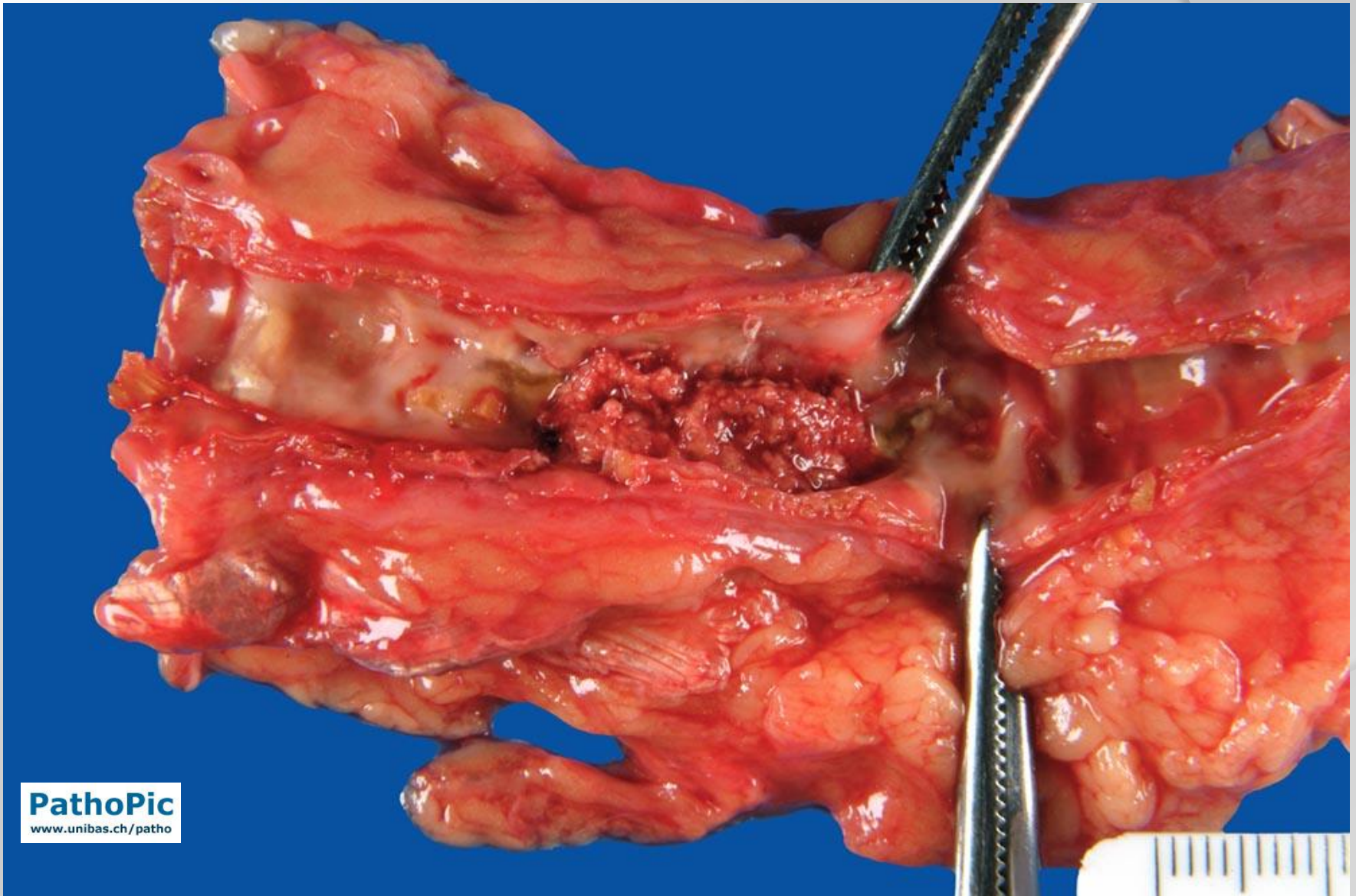
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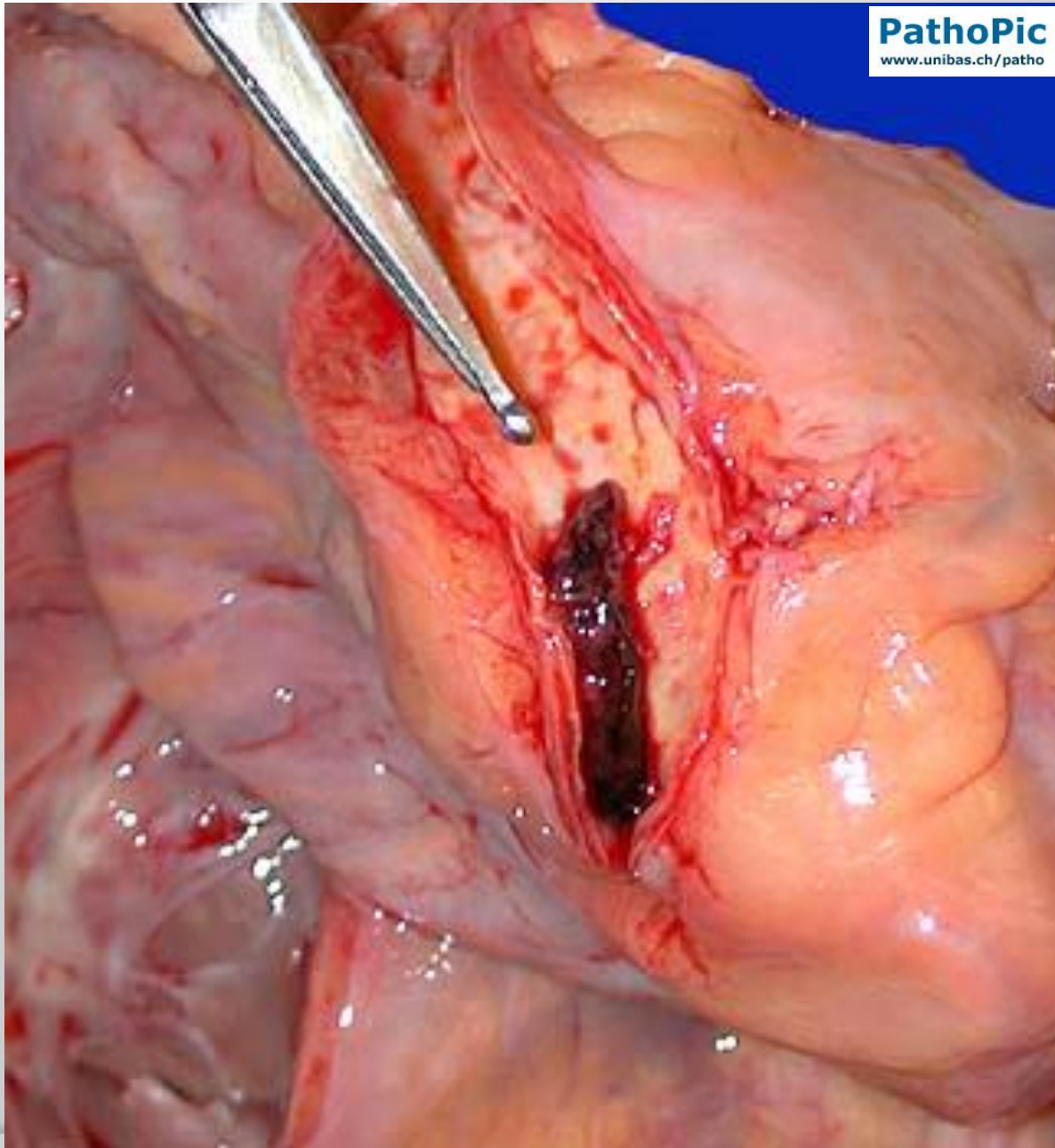
<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=737>

Clasificarea trombilor

1. *Trombul alb* (trombocitar, trombul de conglutinare):
 - trombocite+fibrina;
 - circulatie sanguina rapida (artere);
 - tromb neocluziv (mural, parietal).
 2. *Trombul rosu* (de coagulare, fibrino-cruoric):
 - fibrina+hematii+leucotite+trombocite;
 - coagulare in bloc a sangelui stagnant, (in special in vene);
 - tromb obstructiv.
 3. *Trombul mixt* (laminat) :
 - straturi alternante de trombi rosii si albi;
 - in vene si pungi anevrismale.
 4. Trombul fibrinos:
 - in cursul CID;
 - compus din retea de filamente de fibrina.
- *Trombul agonal:*
- mase galbui sau rozate de fibrina;
 - varful VD pana la orificiul valvular.

Tromb arterial - tromb vechi, neocluziv in a. poplitee

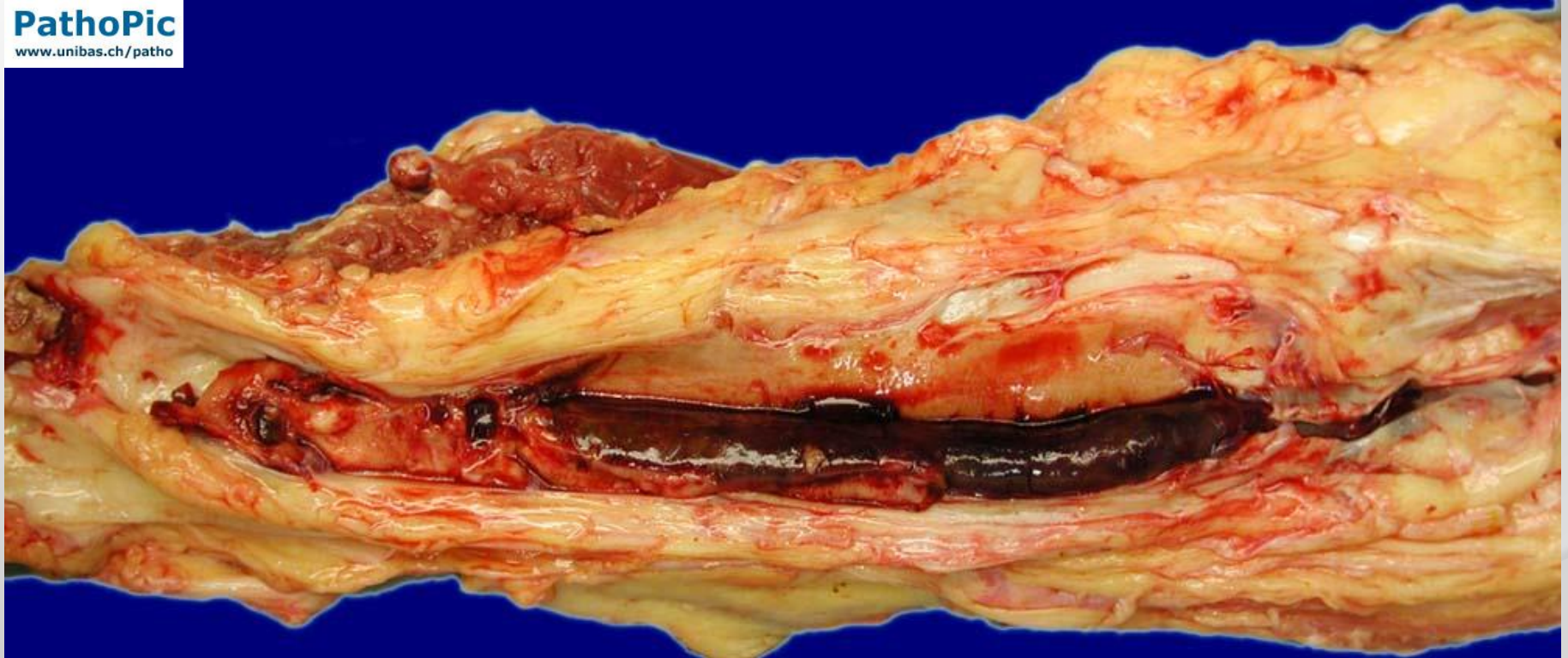




Tromboza coronariana

Tromb recent in vena femurala

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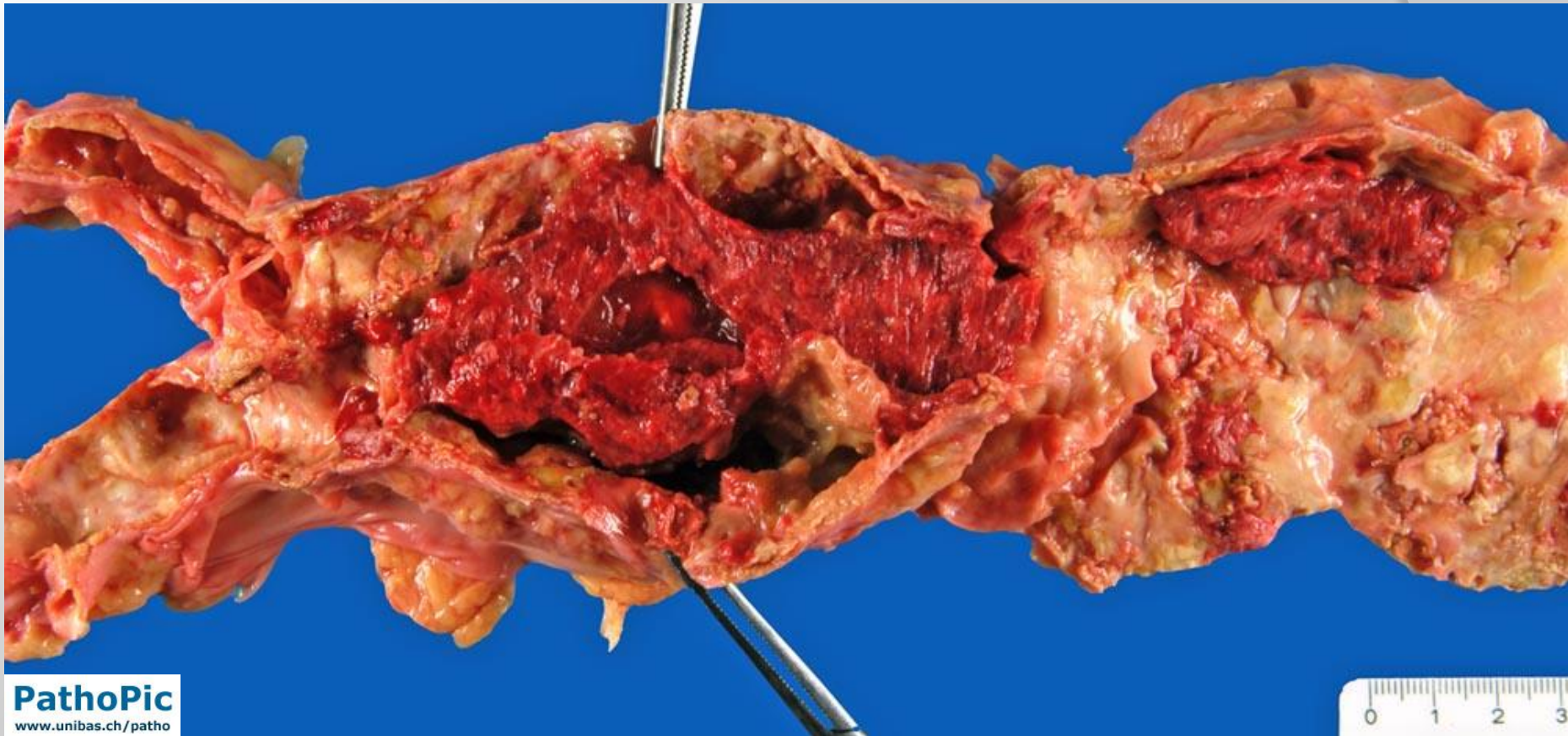


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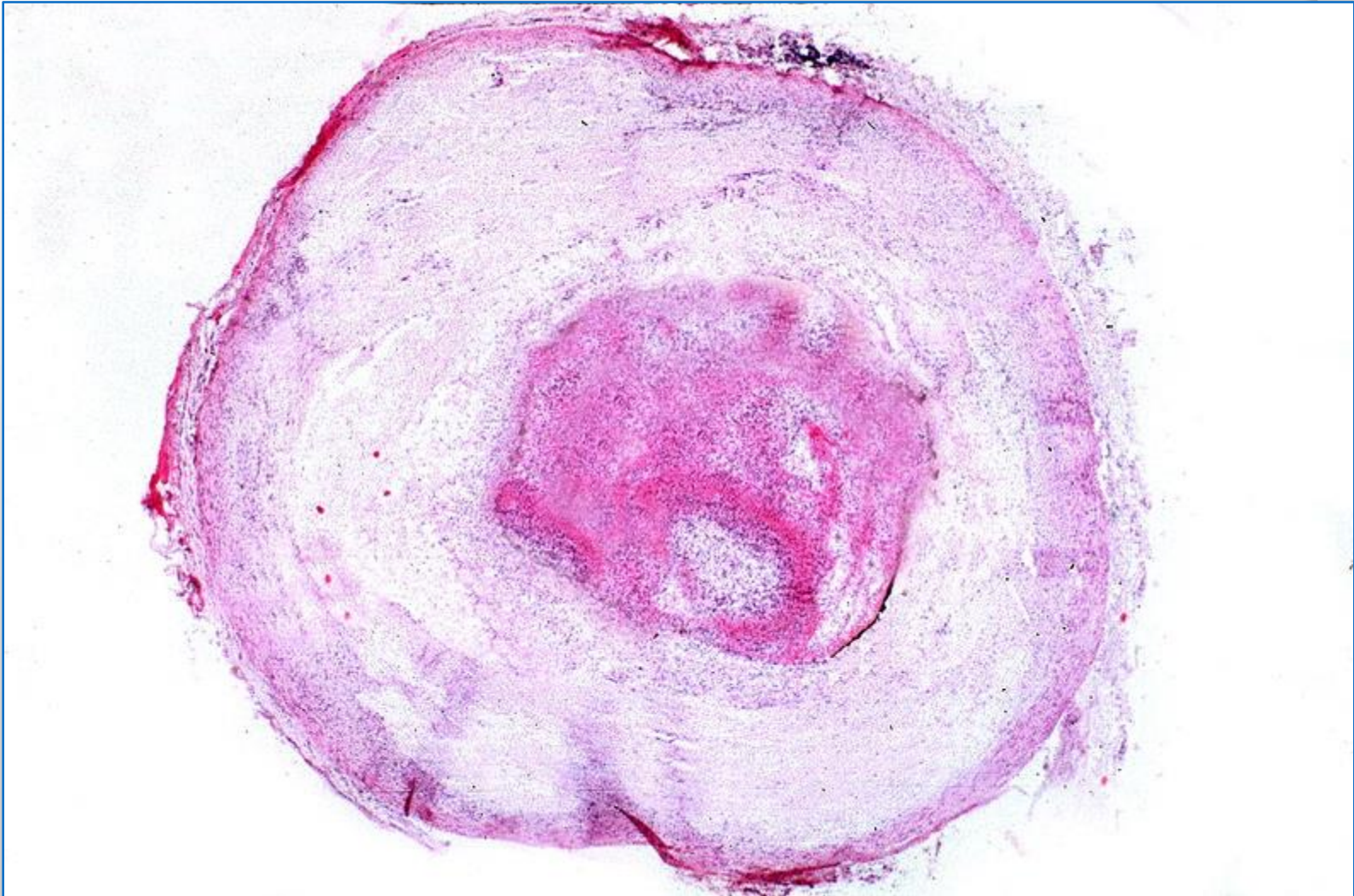
Tromboza venoasa profunda



Tromb mixt dezvoltat pe anevrism aterosclerotic de aorta abdominala

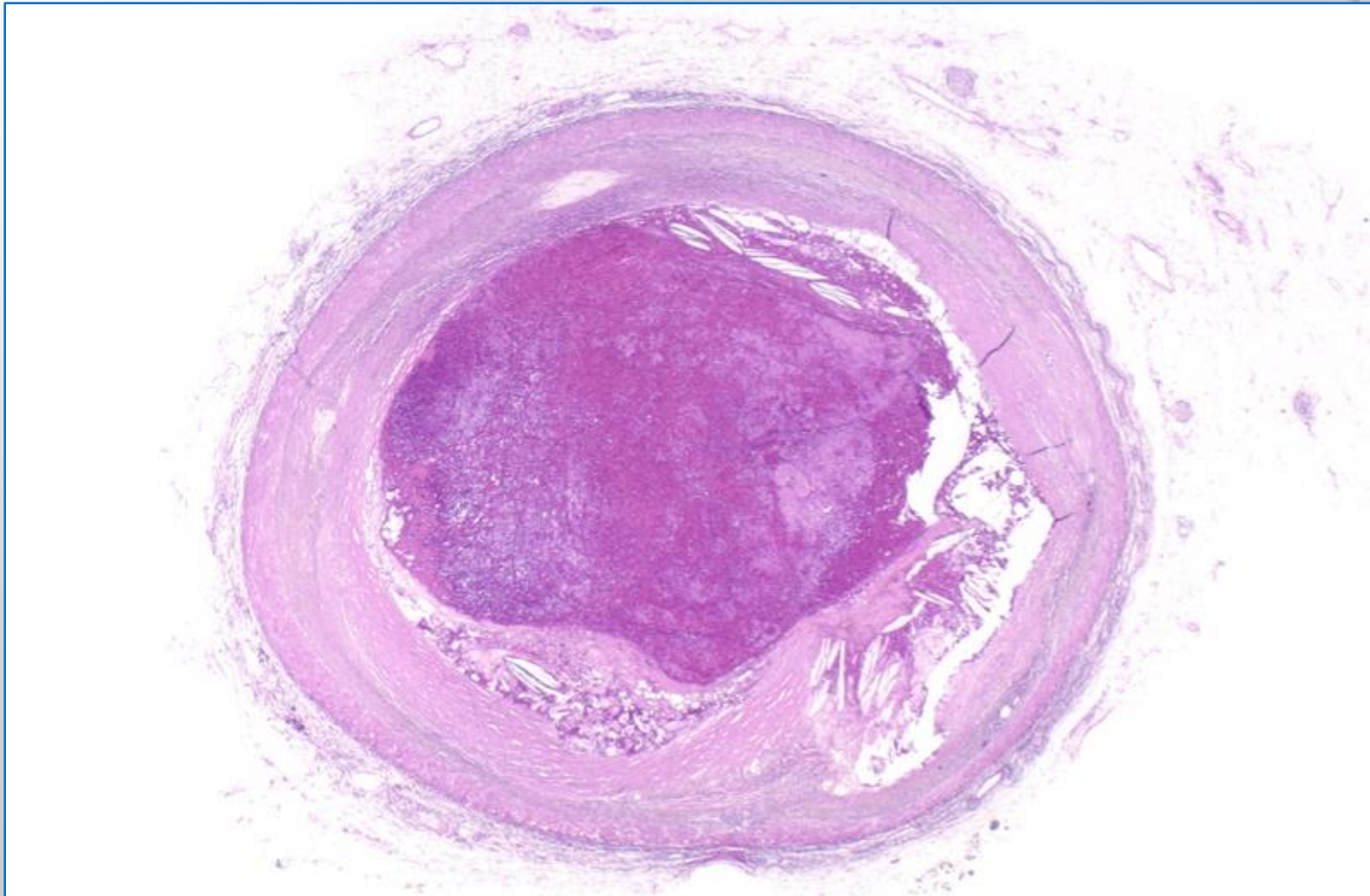


Tromboza coronariana ocluziva



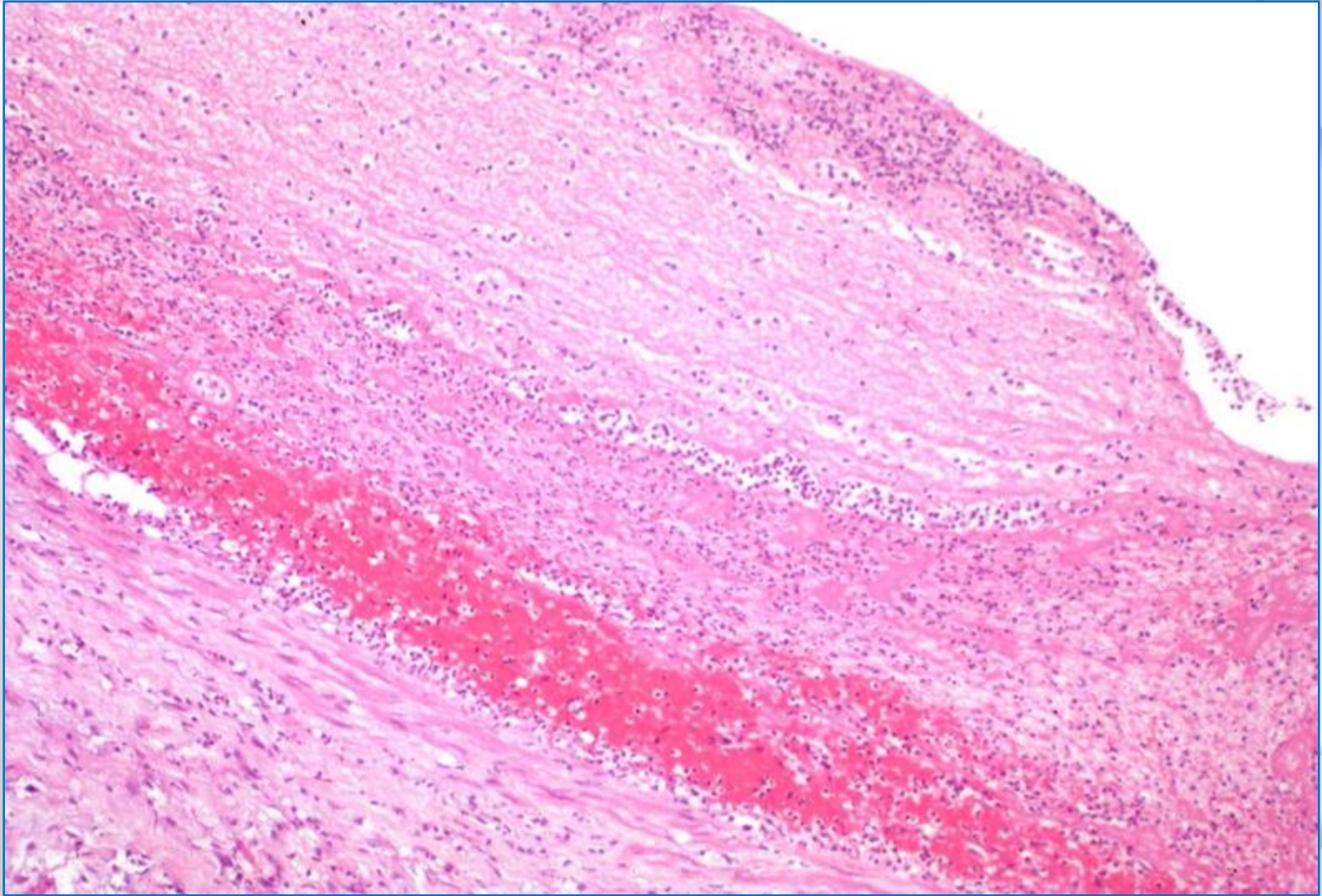
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Tromb recent dezvoltat pe placa de aterom



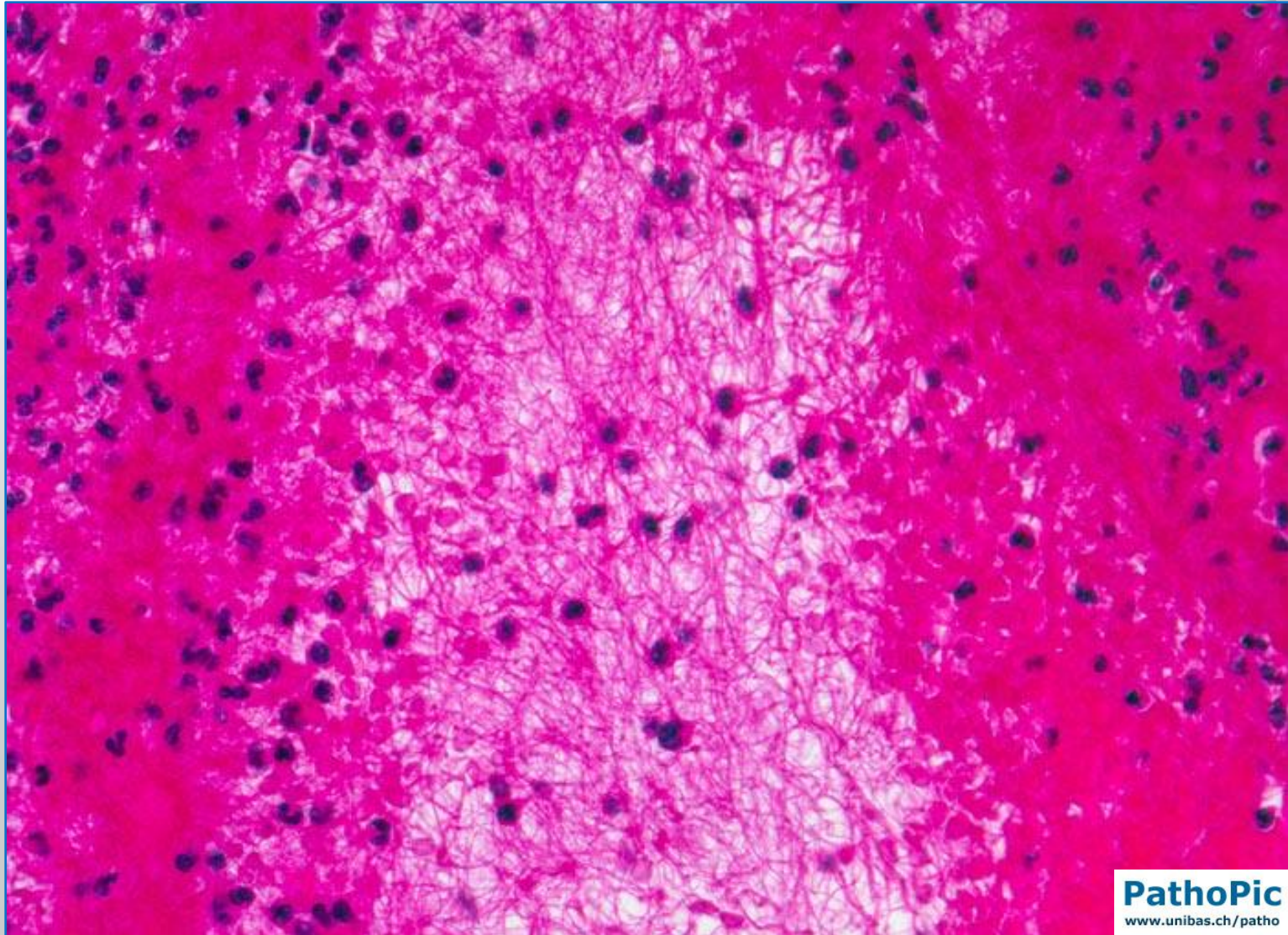
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Constituentii trombului



<https://peir.path.uab.edu/library/picture.php?/10347/category/39>

Constituentii trombului



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Forme anatomo-clinice de tromboza

I. Tromboza cardiaca

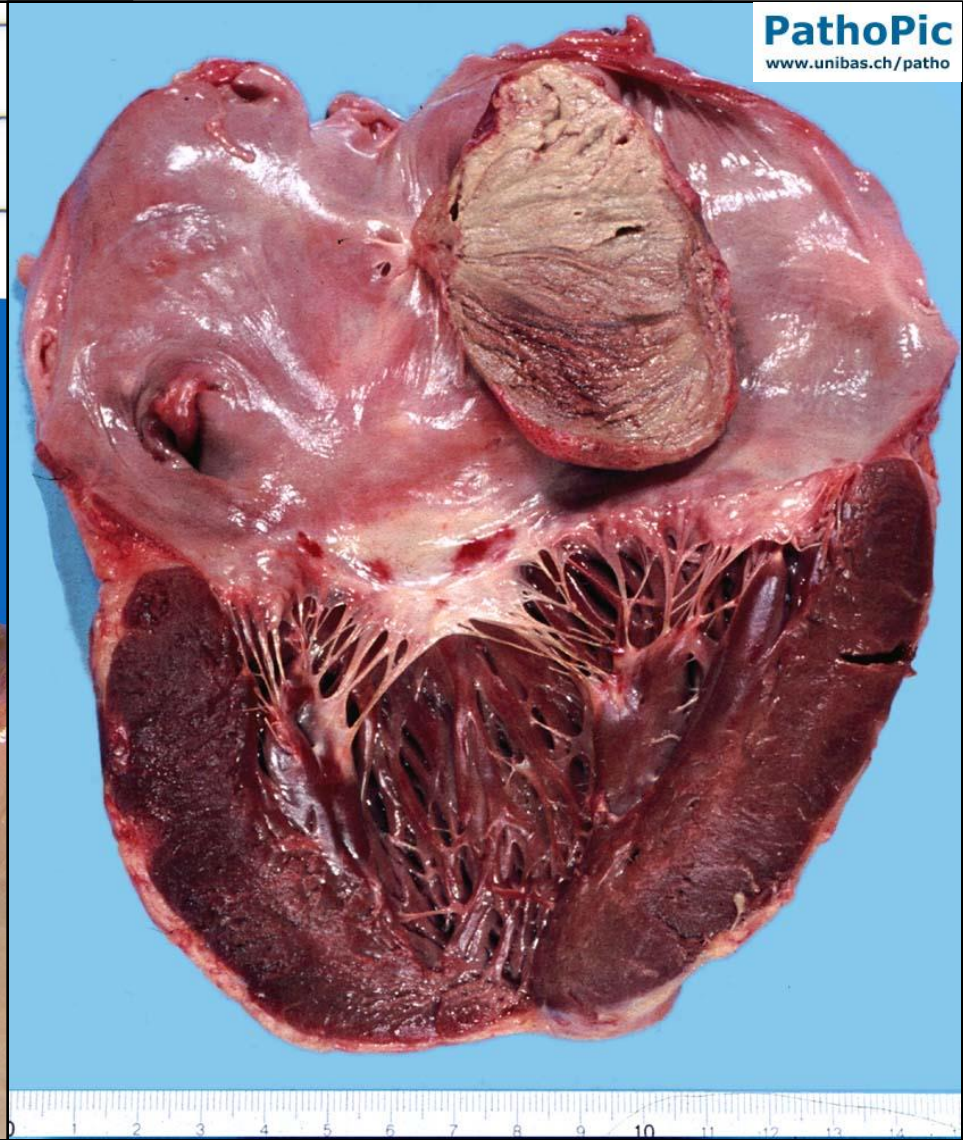
- *atriala* – trombi mari, rosii sau mici, albi, globulosi;
 - cauze: FA, stenoza mitrala;
- *ventriculara* – trombi albi sau rosii;
 - cauze: IMA, sechela unui IM (anevrismul cardiac), cardiomiopatiile;
- *valvulara* – in endocardite: bacteriana – trombi mari, micsti, friabili;
 - reumatismala – trombi mici, palizi, cenusii;
 - marantica – trombi mari, friabili.

Tromb atrial

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www.unibas.ch/patho



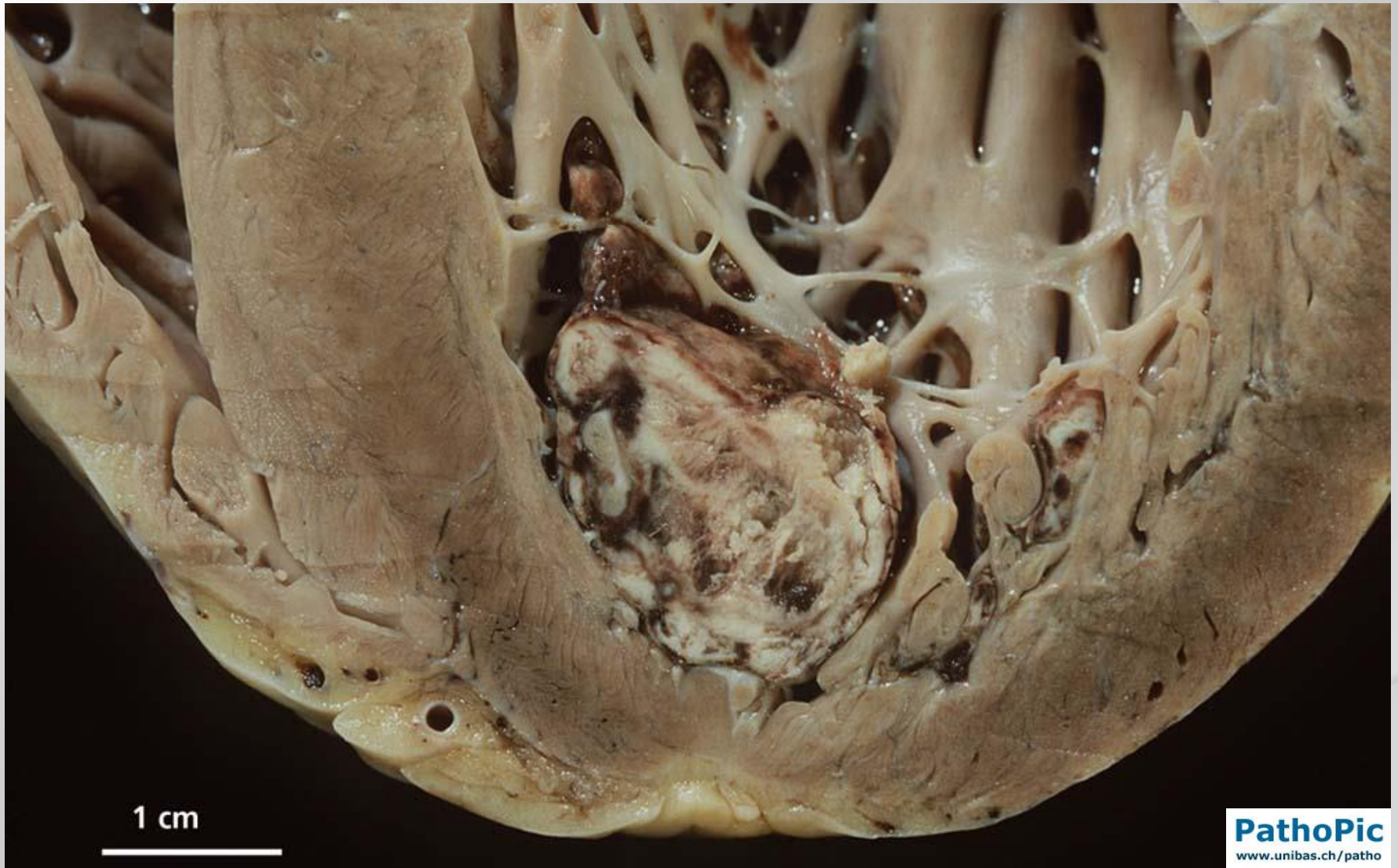
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www.unibas.ch/patho



<http://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=010003>

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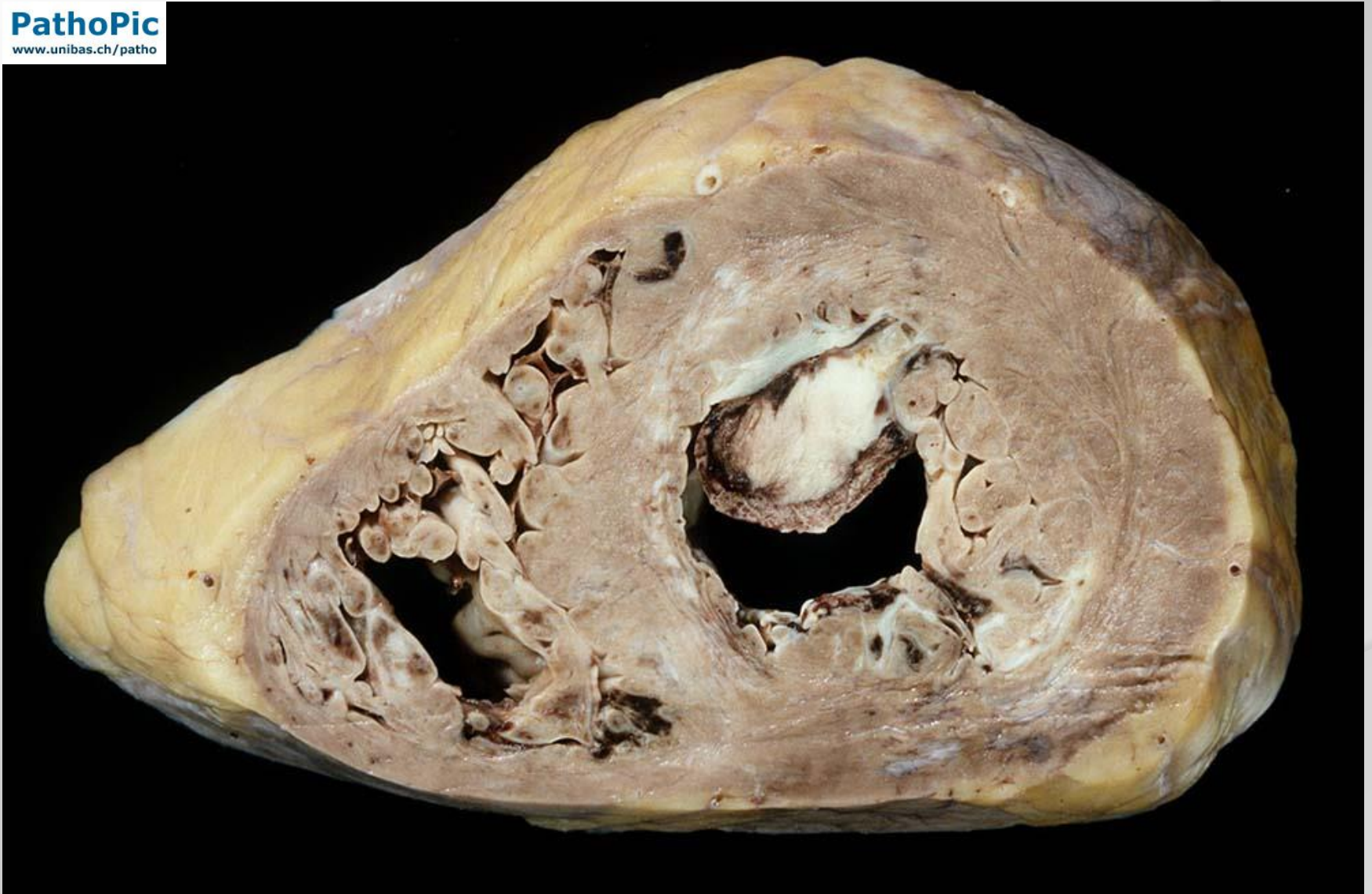
Tromb ventricular



<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=9214>

Tromb ventricular

PathoPic
www.unibas.ch/patho



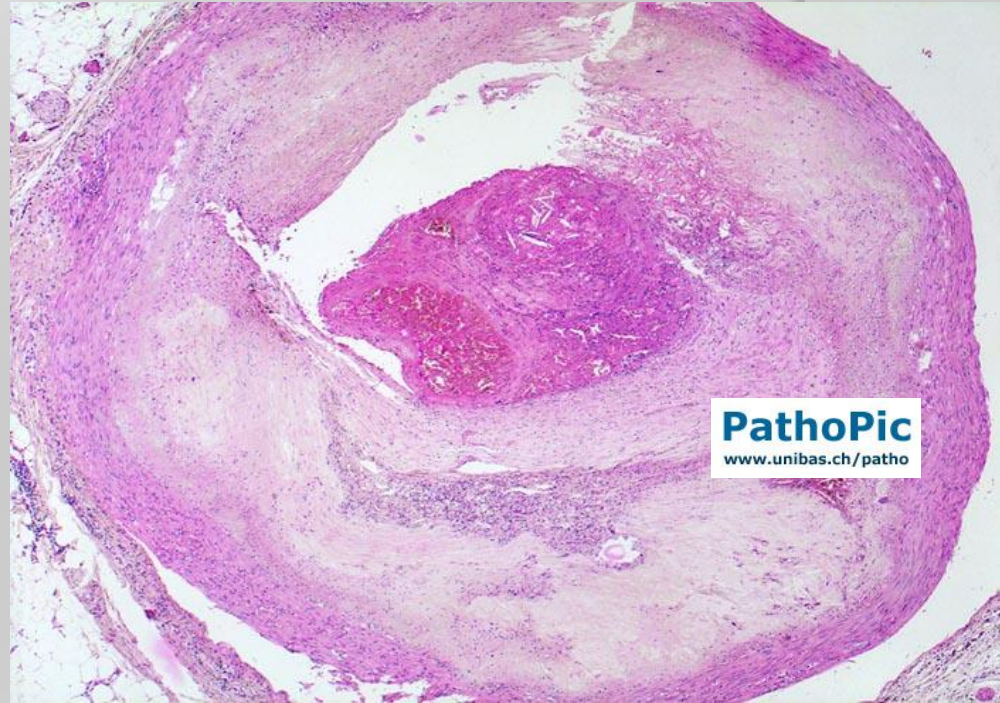
<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=9099>

Tromboza valvulara - endocardita bacteriana



II. Tromboza arteriala

- leziuni ale peretelui vascular;
- cauze: ateromatoza, dilatatii anevrismale, arterite, traumatisme, HTA maligna;
- complicatii:
 - obstructie completa → infarctizare;
 - embolizare.



III. Tromboza venoasa

- conditii favorizante ale trombozei venoase profunde:
 - staza;
 - alterarile peretelui venos;
 - hipercoagulabilitatea sangelui;
 - varsta inaintata;
 - anemia falciforma;
- **tromboflebita** si **flebotromboza**;
- trombii mici → asimptomatici;
- tromboza ocluziva → congestie, edem, cianoza;
- insuficienta venoasa cronica → pigmentatie, edem, induratie, ulceratii cronice trenante;
- complicatia de temut → **embolizarea trombilor**.



Tromboza venoasa profunda

<https://www.wikiwand.com/en/Thrombophlebitis>



https://en.wikipedia.org/wiki/Deep_vein_thrombosis#/media/File:PCD2016.jpg

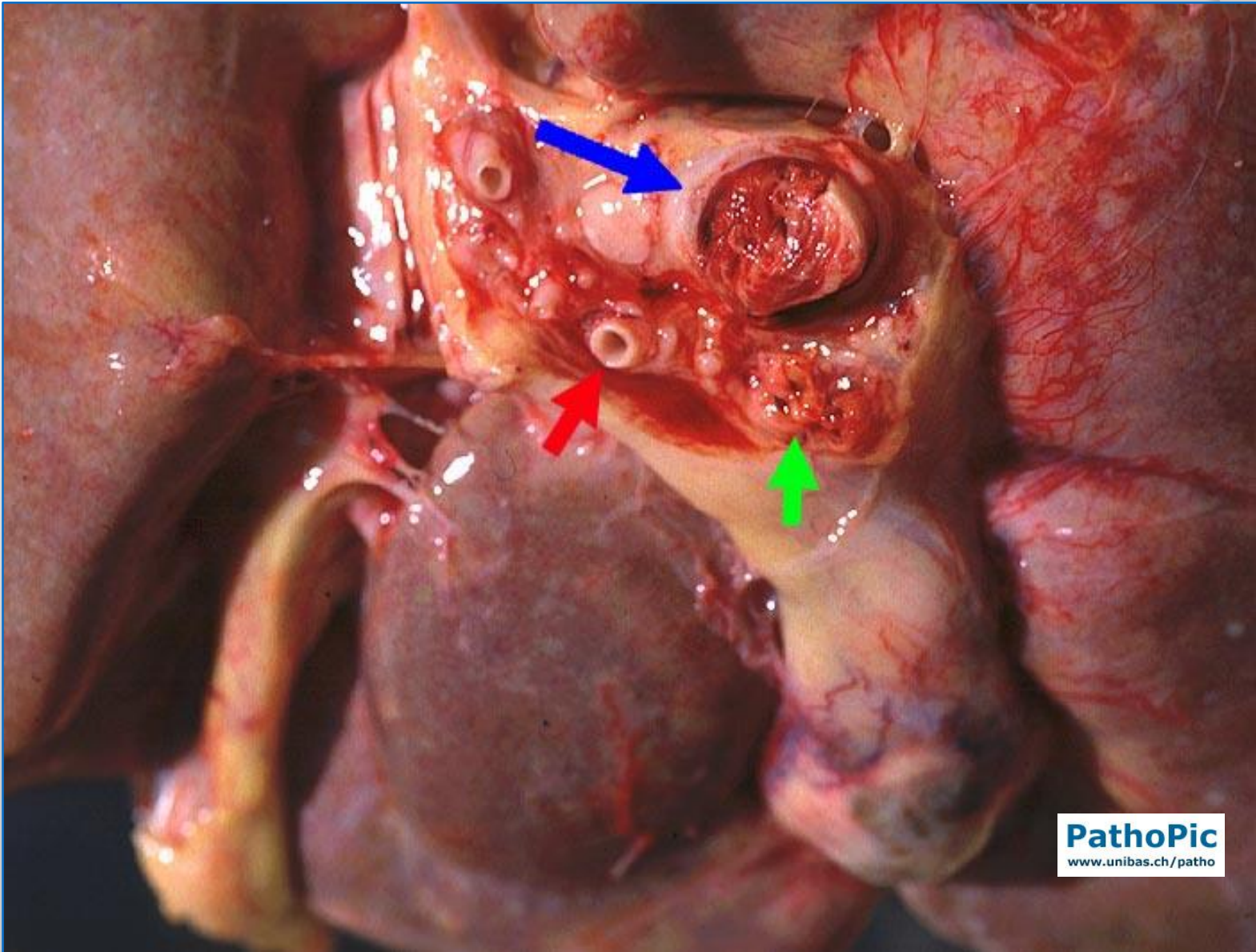
Tromb pe vena femurala

PathoPic
www.unibas.ch/patho



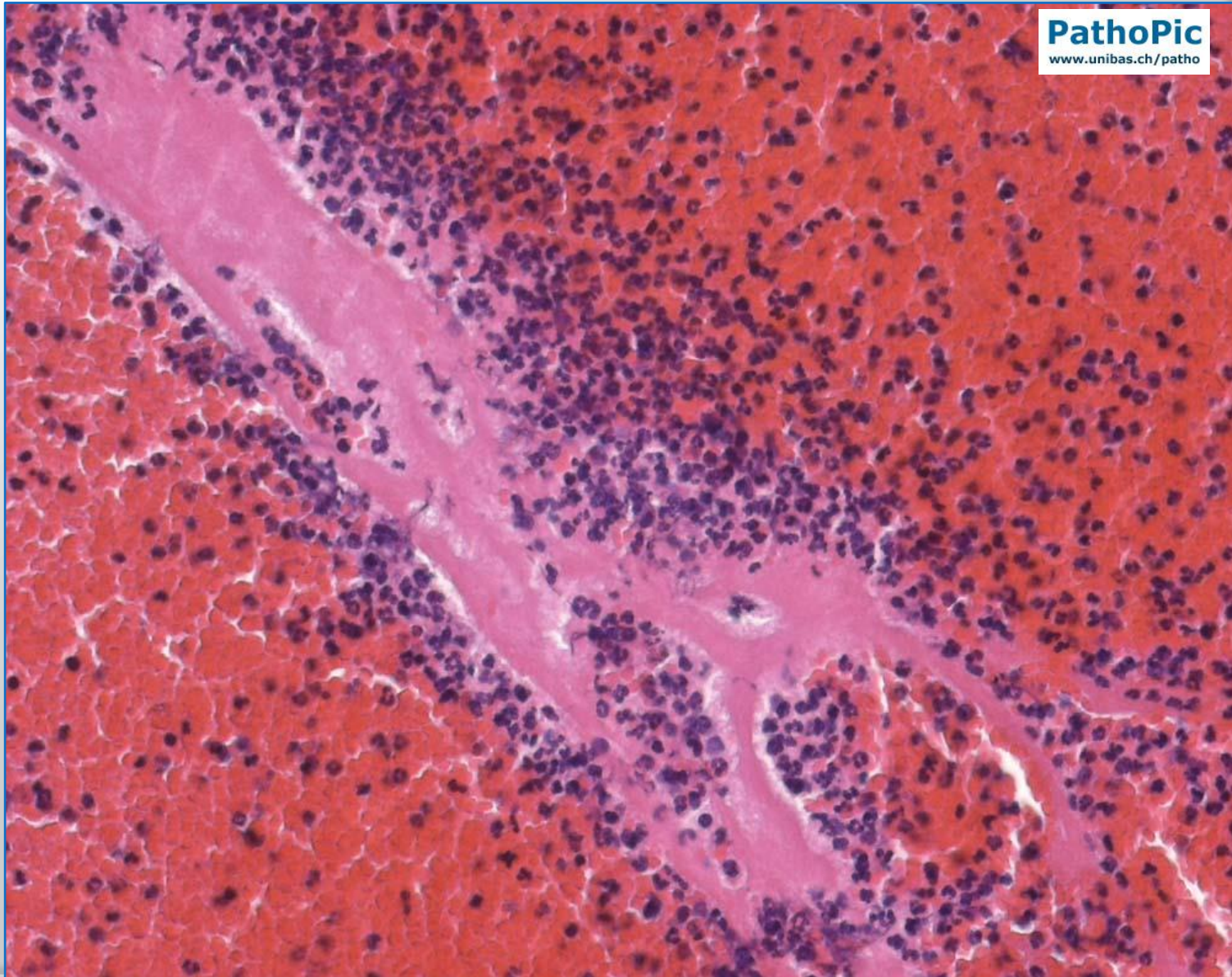
<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=9100>

Tromb ocluziv ce obstrueaza complet vena porta



PathoPic
www.unibas.ch/patho

Tromb venos

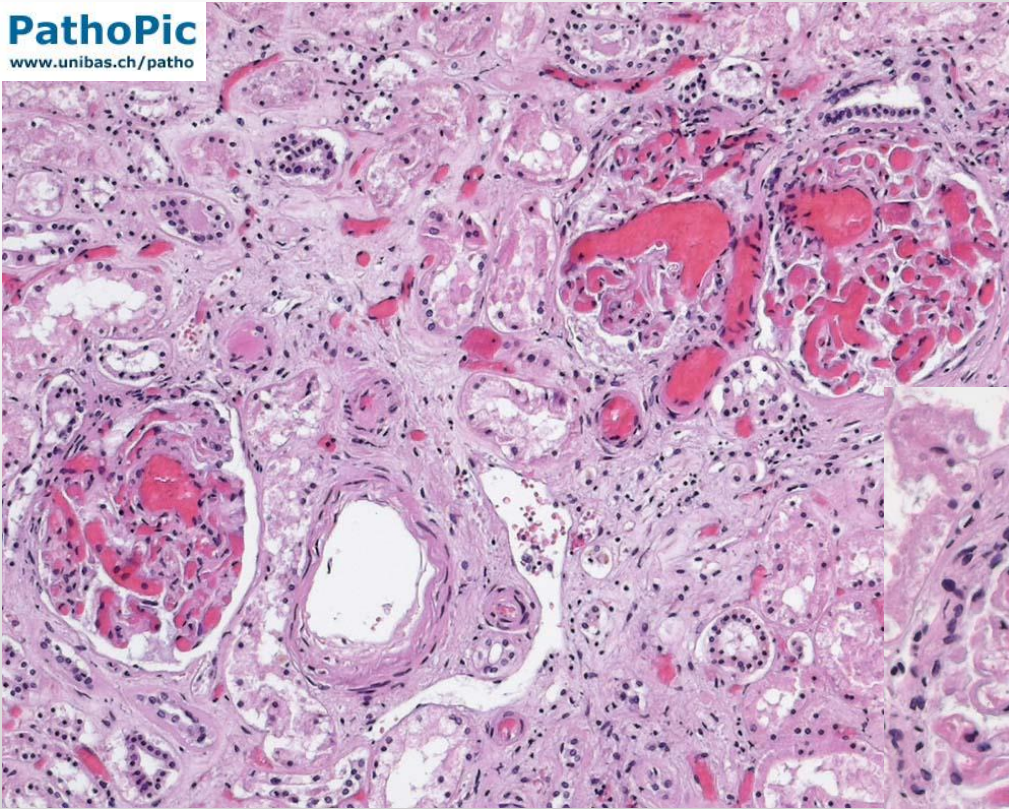


IV. Tromboza capilara

- in inflamatiia acuta, datorita hemoconcentratiei si alterarii endoteliului → trombi compusi din pachete (fiscuri) de hematii;
- in sindromul coagularii intravasculare diseminate → trombi fibrinosi.

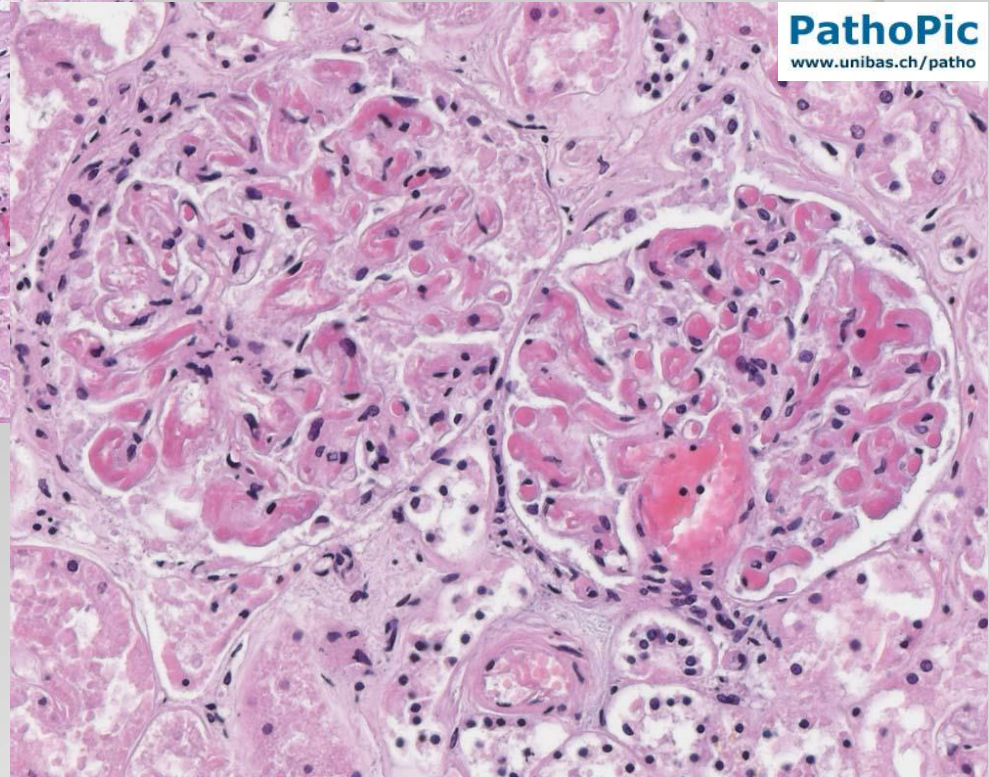
Trombi fibrinosi in capilarele glomerulare

PathoPic
www.unibas.ch/patho



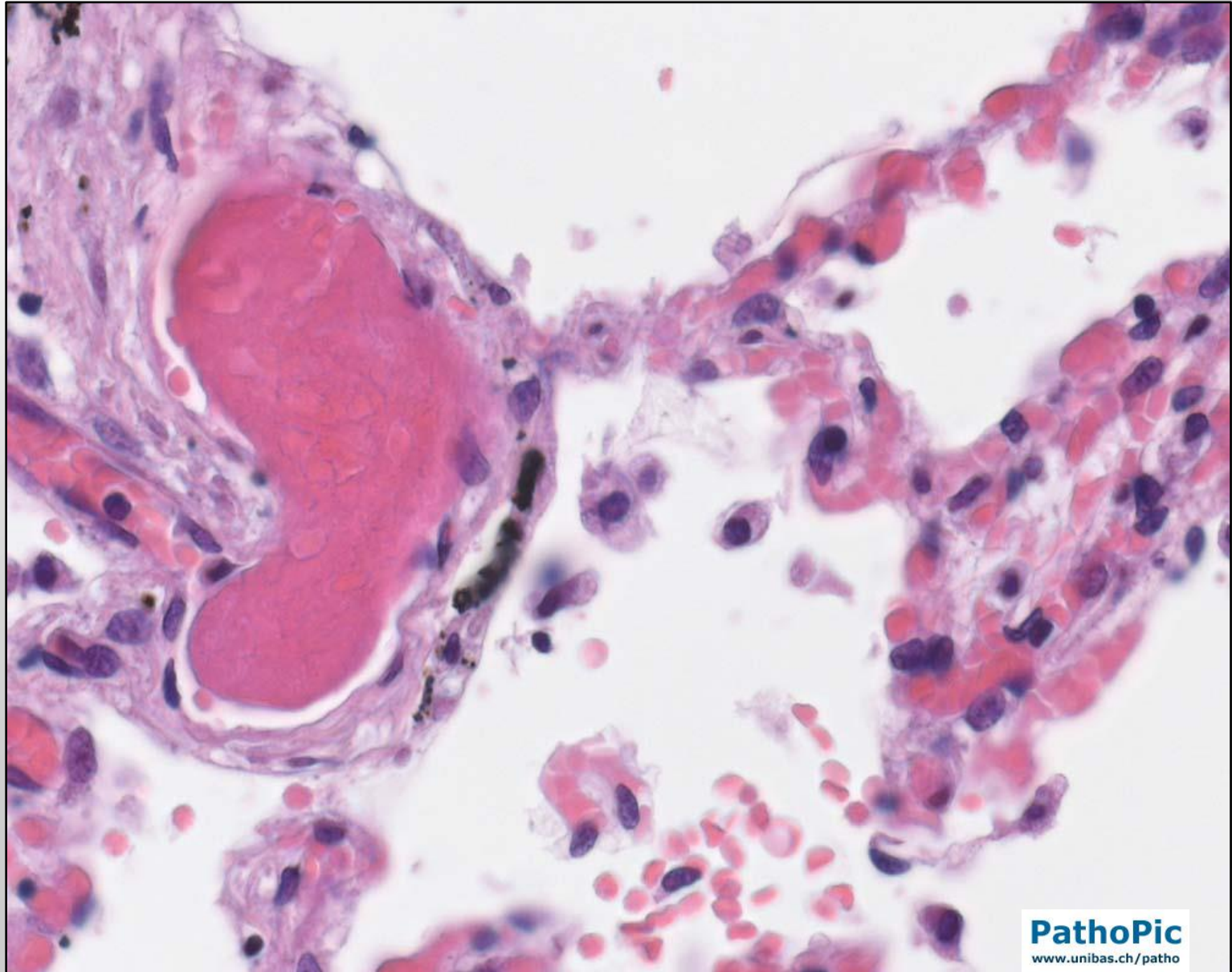
<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=9390>

PathoPic
www.unibas.ch/patho



<https://alf3.urz.unibas.ch/pathopic/e/getpic-fra.cfm?id=9393>

Tromb fibrinos in capilarele alveolare



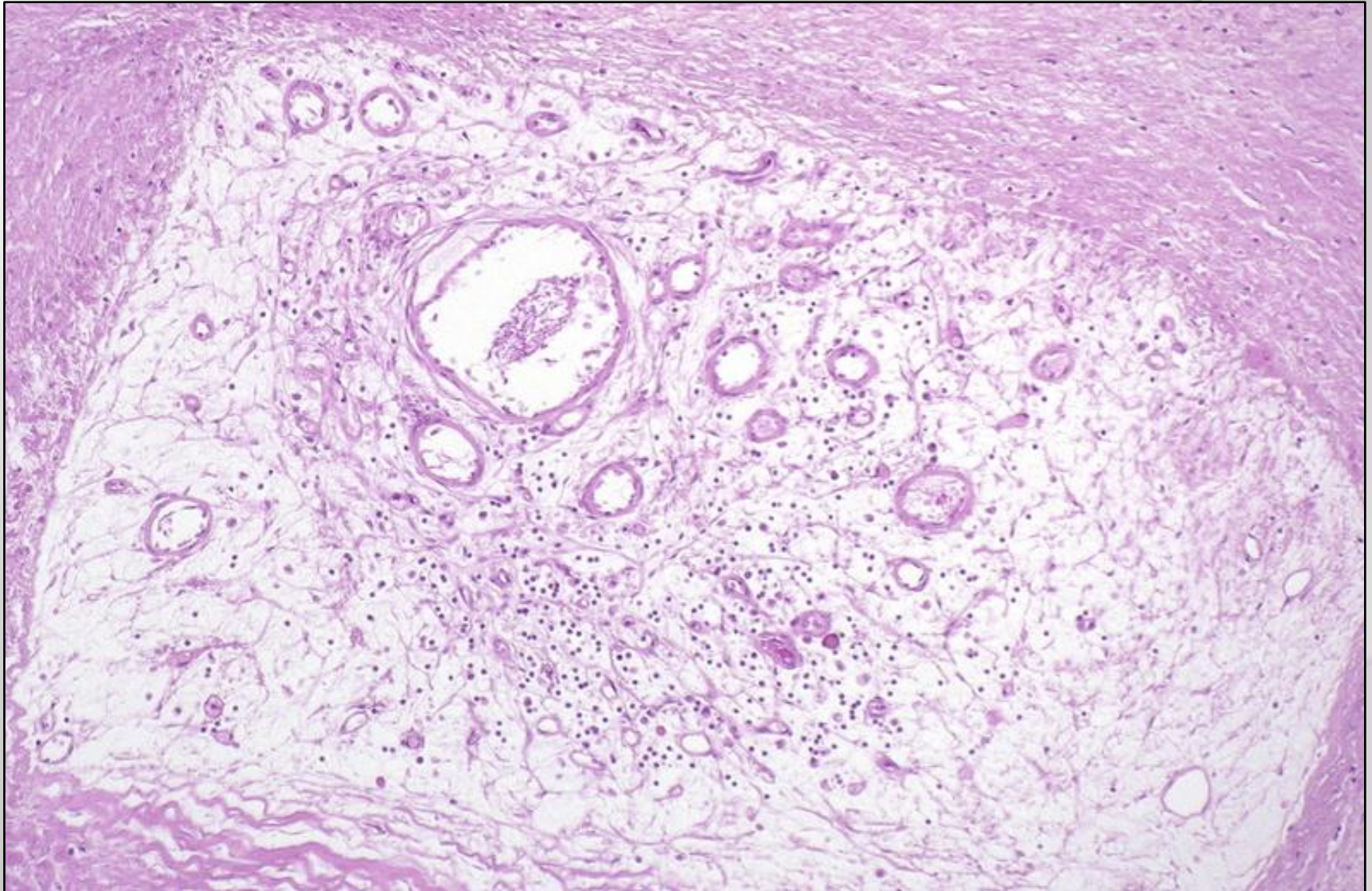
Modalitati evolutive ale trombilor

1. *retractia trombului* → recanalizare unicanalara;
2. *tromboliza spontana* – sub actiunea plasminogenului plasmatic activat (plasmina) - doar in 6-12 ore;
3. *persistenta si organizarea trombului*:
 - transformare hialina;
 - organizare conjunctivo-vasculara (tesut de granulatie) → recanalizare multicanalara;
 - flebolit, arteriolit;
4. *mobilizarea trombului* = embolizarea;
5. *supuratia trombului*;
6. *efect benefic local* – previne hemoragia.

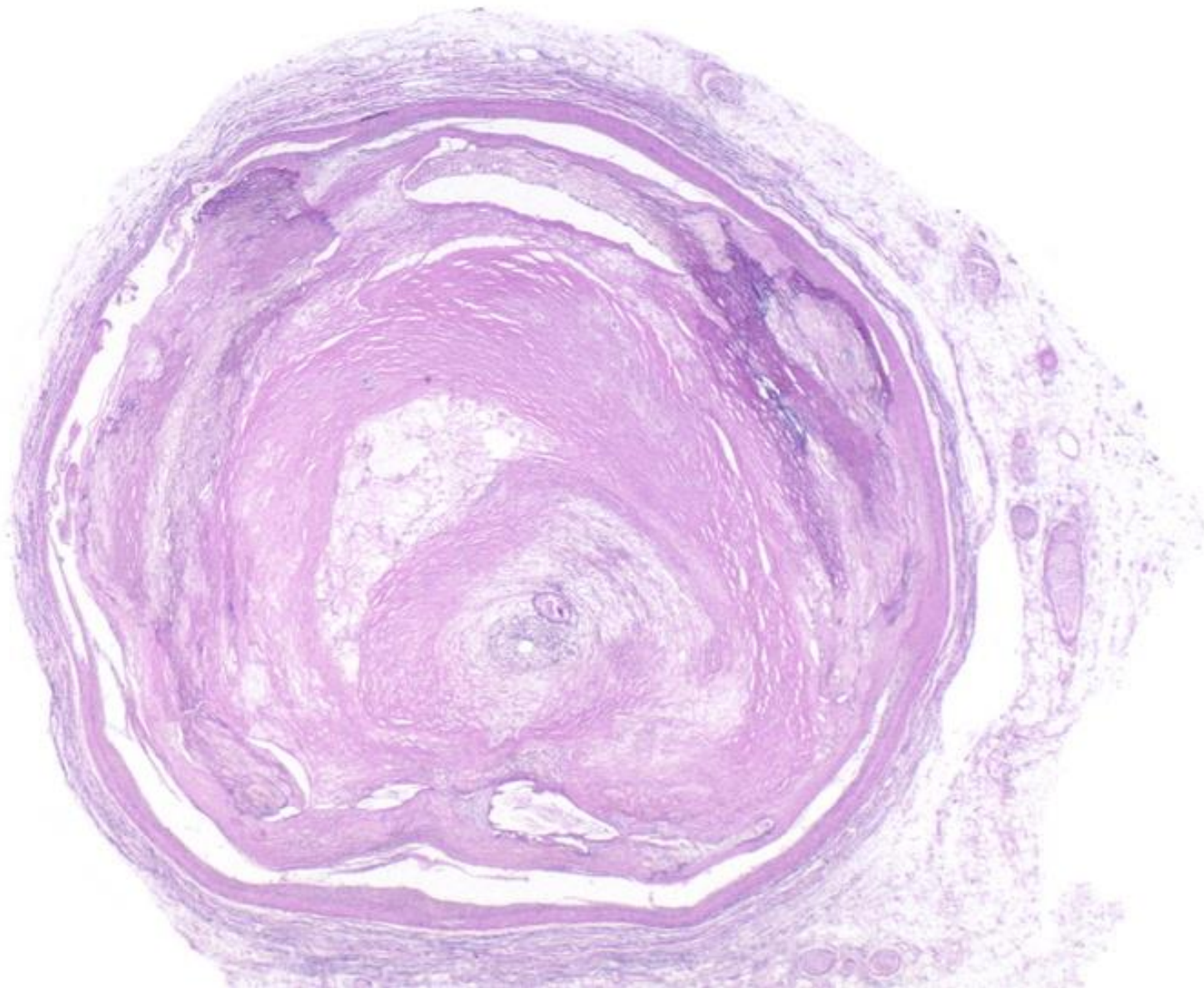
Tromboza coronariana - complicatie a placii de aterom



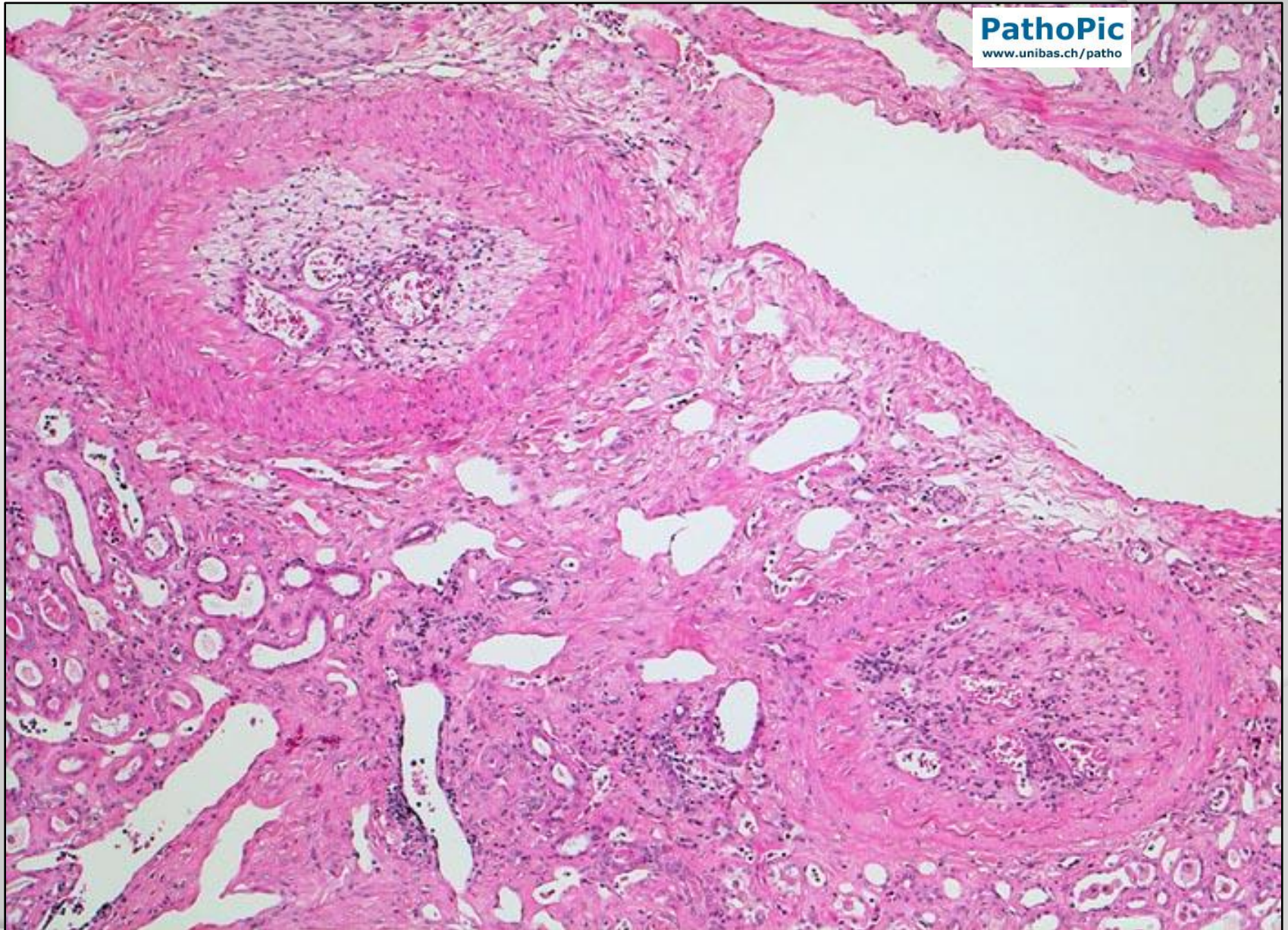
Organizarea trombului



Tromb organizat



Doua artere renale cu recanalizare multicanalara



Recanalizare multicanalara

