

HİPOTALAMO-HİPOFİZER HORMON FİZYOLOJİSİ VE HAYVAN MODELLERİ

2 BÖLÜM

Özgür ARAT

GİRİŞ

Hipofiz fonksiyonel olarak homeostaz ve büyüme, metabolizma, üreme, cinsel gelişim, gebelik hali, emzirme ve stres tepkilerinin düzenlenmesinde görev alan endokrin bir dokudur. Hipofiz bezi, periferik hedef dokular için uyarıcı faktörler olarak işlev gören büyüme hormonu, prolaktin, tiroid uyarıcı hormon, luteinize edici hormon, folikül uyarıcı hormon, vazopressin (antidiüretik hormon) ve oksitosin üretir. Hipofizin fonksiyonel kısımları, hipotalamus (hipotalamo-hipofizer aks) ve hormonal hedef dokulardan feedback mekanizmaları ile fonksiyonel olarak düzenlenir. Fare deneyleri ile yapılan çalışmalar, insan hipofiz bezinin fonksiyon bozukluğunun önemli bir şekilde anlaşılmasını sağlamış olup hipofiz yanıtlarının homeostazın korunmasındaki değişkenliği hakkında değerli bilgiler sağlamıştır.

EMBRİYOLOJİ

Fare hipofiz bezi, ön ve arka lobdan oluşur. İki lobun farklı embriyolojik kökenleri vardır. Ön hipofiz (adenohipofiz) Rathke kesesinden (bir orofaringeal divertikül) kaynaklanırken, arka hipofiz (nörohipofiz) 3. ventrikül tabanındaki nöroektodermden (diensefalon) oluşur [1; 2; 3]. Farede postkoital yaklaşık 8,5 ila 9. gün-

de temel bir Rathke kesesi oluşumu izlenir [4; 5]. Kortikotrop, tirotrop, somatotrop, laktotrop ve son olarak gonadotrop hücreler, postkoital 12,5 ila 16,5. gün arasındaki spesifik gen ekspresyonu ile ilişkili olarak gelişir [4]. Yaklaşık postkoital 14. günden başlayarak, iç karotid arter hipotalamik bölgeye dallar sağlar ve sonuçta ön hipofiz için ana kan kaynağı sağlamak üzere hipofizer portal sistemi oluşturur [3]. Hipofiz ve hipofiz sapı, üst hipofiz arterlerinden kan alır. Tiroid uyarıcı hormon (TSH), folikül uyarıcı hormon (FSH), luteinize edici hormon (LH) ve büyüme hormonu (GH) üreten granüler hücrelerin ultrastrüktürel gösterimi, SMA farelerinde GH üreten hücrelerde oransal bir artış ile 16. gebelik gününde mevcuttur [6]. Hipofiz organogenez sürecinde, çoklu büyüme ve transkripsiyon faktörlerinin etkisi altında progenitor hücrelerin aktif göçü, hücre modellemesi ve hücre farklılaşması vardır [7; 8; 9; 10]. Doğumdan sonra, hormon üreten hücrelerin çoğalması ve farklılaşması ve ayrıca progenitor hücrelerin oluşturulması devam eder [11; 12; 13].

ANATOMİ

Fare hipofizi, sella turcica'da bulunur, sella turcica bazifenoid kafatası kemiğinin dorsal yüzeyinde yer alır. Hipofiz bezinin büyük kısmını adenohipofiz oluşturur. Adenohipofiz pars tube-

yollarda daha büyük bir bozulma olabileceğini, ancak kanıt bulunmadığını varsaymışlardır. Birlikte ele alındığında, HPA üzerindeki travmatik patlama etkisinin, klinik ve terapötik olarak önemli olabilecek cinsel olarak iki şekilli olduğu görülmektedir.

Sonuç

Hipotalamo-hipofizer aksın endokrin bozukluğuna neden olan etkilerin temelleri tam olarak bilinmemektedir. Travmatik beyin hasarı ve bunun sonucunda oluşan hipotalamo-hipofizer aks bozuklukları ciddi sonuçlara yol açmaktadır. Bu nedenle travmatik beyin hasarı nedeniyle oluşan hipofiz hormon değişimlerinin nedenini tespit etmek için çok sayıda çalışmaya ihtiyaç vardır. Ayrıca bazı hastalarda gözlenen spontan düzelme göz önüne alındığında, buna neden olan onarıcı mekanizmaların ve hipofizer kök hücrelerin travmatik beyin hasarına cevabı sonrası oluşan doku rejenerasyonunun ortaya çıkması araştırılmaya değerdir. Panhipopituitarizm için yeni tedavi seçenekleri sunabileceği düşünüldüğünde, rejeneratif süreçlerin anlaşılabilmesi hala önemini korumaktadır.

KAYNAKLAR

- Kerr, T. (1946). The development of the pituitary of the laboratory mouse. *Q.J. Microsc. Sci.* 87, 3-29.
- Kaufman, M. (1994). The atlas of mouse development. Academic Press, London.
- Kaufman, M., Nikitin, A., and Sundberg, J. (2010). Histologic basis of mouse endocrine system development. CRC Press, Boca Raton.
- Kelberman, D., Rizzoti, K., Lovell-Badge, R., Robinson, I. C., and Dattani, M. T. (2009). Genetic regulation of pituitary gland development in human and mouse. *Endocr Rev* 30, 790-829.
- Dubois, P. M., and Elamraoui, A. (1995). Embryology of the pituitary gland. *Trends Endocrinol Metab* 6, 1-7.
- Sano, M., and Sasaki, F. (1969). Embryonic development of the mouse anterior pituitary studied by light and electron microscopy. *Z Anat Entwicklungsgesch* 129, 195-222.
- Zhu, X., Gleiberman, A. S., and Rosenfeld, M. G. (2007). Molecular physiology of pituitary development: signaling and transcriptional networks. *Physiol Rev* 87, 933-63.
- Dasen, J. S., and Rosenfeld, M. G. (1999). Signaling mechanisms in pituitary morphogenesis and cell fate determination. *Curr Opin Cell Biol* 11, 669-77.
- Dasen, J. S., and Rosenfeld, M. G. (2001). Signaling and transcriptional mechanisms in pituitary development. *Annu Rev Neurosci* 24, 327-55.
- Rizzoti, K., and Lovell-Badge, R. (2005). Early development of the pituitary gland: induction and shaping of Rathke's pouch. *Rev Endocr Metab Disord* 6, 161-72.
- Levy, A. (2002). Physiological implications of pituitary trophic activity. *J Endocrinol* 174, 147-55.
- Levy, A. (2008). Stem cells, hormones and pituitary adenomas. *J Neuroendocrinol* 20, 139-40.
- Nolan, L. A., Kavanagh, E., Lightman, S. L., and Levy, A. (1998). Anterior pituitary cell population control: basal cell turnover and the effects of adrenalectomy and dexamethasone treatment. *J Neuroendocrinol* 10, 207-15.
- Liebelt, A. G. (1994). Tumours of the pituitary gland. *IARC Sci Publ*, 527-63.
- Sasaki, F., and Iwama, Y. (1988). Sex difference in prolactin and growth hormone cells in mouse adenohypophysis: stereological, morphometric, and immunohistochemical studies by light and electron microscopy. *Endocrinology* 123, 905-12.
- Baker, B.L. and Gross, D.S. (1978), Cytology and distribution of secretory cell types in the mouse hypophysis as demonstrated with immunocytochemistry. *Am. J. Anat.*, 153: 193-215.
- Allaerts, W., Jeucken, P. H., Hofland, L. J., and Drexhage, H. A. (1991). Morphological, immunohistochemical and functional homologies between pituitary folliculo-stellate cells and lymphoid dendritic cells. *Acta Endocrinol (Copenh)* 125 Suppl 1, 92-7.
- Allaerts, W., Jeucken, P. H., Bosman, F. T., and Drexhage, H. A. (1993). Relationship between dendritic cells and folliculo-stellate cells in the pituitary: immunohistochemical comparison between mouse, rat and human pituitaries. *Adv Exp Med Biol* 329, 637-42.
- Vankelecom, H., Matthys, P., Van Damme, J., Hermans, H., Billiau, A., and Denef, C. (1993). Immunocytochemical evidence that S-100-positive cells of the mouse anterior pituitary contain interleukin-6 immunoreactivity. *J Histochem Cytochem* 41, 151-6.
- Roux, M., and Dubois, M. P. (1976). Immunohistochemical study of the pars intermediate of the mouse pituitary in different experimental conditions. *Experientia* 32, 657-8.
- Jarskar, R. (1977). Electron microscopical study on the development of the nerve supply of the pituitary pars intermedia of the mouse. *Cell Tissue Res* 184, 121-32.
- Rizzoti, K. (2015). Genetic regulation of murine pituitary development. *J Mol Endocrinol* 54, R55-73.
- Rizzoti, K., Akiyama, H., and Lovell-Badge, R. (2013). Mobilized adult pituitary stem cells contribute to endocrine regeneration in response to physiological demand. *Cell Stem Cell* 13, 419-32.
- Andoniadou, C. L., Matsushima, D., Mousavy Ghavary, S. N., Signore, M., Mackintosh, A. I., Schaeffer, M., Gaston-Massuet, C., Mollard, P., Jacques, T. S., Le Tissier, P., Dattani, M. T., Pevny, L. H., and Martinez-Barbera, J. P. (2013). Sox2(+) stem/progenitor cells in the adult mouse pituitary support organ home-

- ostasis and have tumor-inducing potential. *Cell Stem Cell* 13, 433-45.
25. Vankelecom, H. (2010). Pituitary stem/progenitor cells: embryonic players in the adult gland? *Eur J Neurosci* 32, 2063-81.
26. Fauquier, T., Rizzoti, K., Dattani, M., Lovell-Badge, R., and Robinson, I. C. (2008). SOX2-expressing progenitor cells generate all of the major cell types in the adult mouse pituitary gland. *Proc Natl Acad Sci U S A* 105, 2907-12.
27. Yoshida, S., Kato, T., & Kato, Y. (2016). EMT Involved in Migration of Stem/Progenitor Cells for Pituitary Development and Regeneration. *Journal of clinical medicine*, 5(4), 43.
28. Hashimoto, H., Ishikawa, H., and Kusakabe, M. (1998). Three-dimensional analysis of the developing pituitary gland in the mouse. *Dev Dyn* 212, 157-66.
29. Capen, C. (1996). Functional and pathological interrelationships of the pituitary gland and hypothalamus in animals. In *Monographs on Pathology of Laboratory Animals. Endocrine System* (T. Jones, C. Capen and U. Mohr, eds.), pp. 3-33. Springer, Berlin.
30. Yamada, K., Sano, M., and Ito, T. (1957). A postnatal histogenetic study of the anterior pituitary of the mouse. *Okajimas Folia Anat Jpn* 30, 177-95.
31. Schaeffer, M., Hodson, D. J., Lafont, C., and Mollard, P. (2010). Functional importance of blood flow dynamics and partial oxygen pressure in the anterior pituitary. *Eur J Neurosci* 32, 2087-95.
32. Fauquier, T., Guérineau, N. C., McKinney, R. A., Bauer, K., and Mollard, P. (2001). Folliculostellate cell network: a route for long-distance communication in the anterior pituitary. *Proc Natl Acad Sci U S A* 98, 8891-6.
33. Jin, L., Zhang, S., Burguera, B. G., Couce, M. E., Osamura, R. Y., Kulig, E., and Lloyd, R. V. (2000). Leptin and leptin receptor expression in rat and mouse pituitary cells. *Endocrinology* 141, 333-9.
34. Oishi, Y., Matsumoto, M., Yoshizawa, K., Tsubura, A., and Morii, S. (1992). Spontaneous pituitary adenomas of the pars intermedia in mice and rats: Histopathological and immunocytochemical studies. *J. Toxicol Pathol* 5, 223-231.
35. Eurenus, L., Jarskär, R. Electron microscope studies on the intermediate lobe of the embryonic mouse. *Cell Tissue Res.* 164, 11-26 (1975).
36. Von, Gall, C., Weaver, D.R., Moek, J., Jilg, A., Stehle, J.H. and Korf, H.-W. (2005). Melatonin Plays a Crucial Role in the Regulation of Rhythmic Clock Gene Expression in the Mouse Pars Tuberalis. *Annals of the New York Academy of Sciences*, 1040: 508-511.
37. Unfried, C., Ansari, N., Yasuo, S., Korf, H.W. & von Gall, C. (2009) Impact of melatonin and molecular clockwork components on the expression of thyrotropin beta-chain (Tshb) and the Tsh receptor in the mouse pars tuberalis. *Endocrinology* 150, 4653- 4662.
38. Morgan, P. J., and Williams, L. M. (1996). The pars tuberalis of the pituitary: a gateway for neuroendocrine output. *Rev Reprod* 1, 153-61.
39. Jilg, A., Moek, J., Weaver, D. R., Korf, H. W., Stehle, J. H., and von Gall, C. (2005). Rhythms in clock proteins in the mouse pars tuberalis depend on MT1 melatonin receptor signalling. *Eur J Neurosci* 22, 2845-54.
40. Hatton, G. I. (1988). Pituitocytes, glia and control of terminal secretion. *J Exp Biol* 139, 67-79.
41. Brown, C. H. (2016). Magnocellular Neurons and Posterior Pituitary Function. *Compr Physiol* 6, 1701-1741.
42. Samson, W. K., and Schell, D. A. (1995). Oxytocin and the anterior pituitary gland. *Adv Exp Med Biol* 395, 355-64.
43. Faul M, Xu L, Wald MM, Coronado VG (2010) Traumatic brain injury in the United States: emergency department visits, hospitalizations and deaths 2002–2006. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. <https://www.cdc.gov/TraumaticBrainInjury>. Accessed 7 Dec 2018
44. Dewan MC, Rattani A, Gupta S, Baticulon RE, Hung YC, Pun-chak M, Agrawal A, Adeleye AO, Shrimel MG, Rubiano AM, Rosenfeld JV, Park KB (2018) Estimating the global incidence of traumatic brain injury. *J Neurosurg* 1:1–18
45. Pervez M, Kitagawa RS, Chang TR (2018) Definition of traumatic brain injury, neurosurgery, trauma orthopedics, neuroimaging, psychology, and psychiatry in mild traumatic brain injury. *Neuroimaging Clin N Am* 28:1–13
46. Cyran E (1918) Hypophysenschädigung durch Schädelbasisfraktur. *Dtsch Med Wochenschr* 44:1261
47. Tanriverdi F, Schneider HJ, Aimaretti G, Masel BE, Casanueva FF, Keleştimur F (2015) Pituitary dysfunction after traumatic brain injury: a clinical and pathophysiological approach. *Endocr Rev* 36:305–342
48. Benvenga S, Campenni A, Ruggeri RM, Trimarchi F (2000) Hypopituitarism secondary to head trauma. *J Clin Endocrinol Metab* 85:1353–1361
49. Lieberman SA, Oberoi AL, Gilkison CR, Masel BE, Urban RJ (2001) Prevalence of neuroendocrine dysfunction in patients recovering from traumatic brain injury. *J Clin Endocrinol Metab* 86:2752–2756
50. Schneider HJ, Kreitschmann-Andermahr I, Ghigo E, Stalla GK, Agha A (2007) Hypothalamic-pituitary dysfunction following traumatic brain injury and aneurysmal subarachnoid hemorrhage: a systematic review. *JAMA* 298:1429–1438
51. Tan CL, Alavi SA, Baldeweg SE, Belli A, Carson A, Feeney C, Goldstone AP, Greenwood R, Menon DK, Simpson HL, Toogood AA, Gurnell M, Hutchinson PJ (2017) The screening and management of pituitary dysfunction following traumatic brain injury in adults: British Neurotrauma Group guidance. *J Neurol Neurosurg Psychiatry* 88:971–981
52. Kokshoorn NE, Wassenaar MJ, Biermasz NR, Roelfsema F, Smit JW, Romijn JA, Pereira AM (2010) Hypopituitarism following traumatic brain injury: prevalence is affected by the use of different dynamic tests and different normal values. *Eur J Endocrinol* 162:11–18
53. Dusick JR, Wang C, Cohan P, Swerdloff R, Kelly DF (2012) Pathophysiology of hypopituitarism in the setting of brain injury. *Pituitary* 15:2–9
54. Fu Q, Gremeaux L, Luque RM, Liekens D, Chen J,

- Buch T, Waisman A, Kineman R, Vankelecom H (2012) The adult pituitary shows stem/progenitor cell activation in response to injury and is capable of regeneration. *Endocrinology* 153:3224–3235
55. Fu Q, Vankelecom H (2012) Regenerative capacity of the adult pituitary: multiple mechanisms of lactotrope restoration after transgenic ablation. *Stem Cells Dev* 21:3245–3257
56. Willems C, Fu Q, Roose H, Mertens F, Cox B, Chen J, Vankelecom H (2016) Regeneration in the pituitary after cell-ablation injury: time-related aspects and molecular analysis. *Endocrinology* 157:705–721
57. Briones TL (2015) Animal models of traumatic brain injury: Is there an optimal model that parallels human brain injury? In: Conley YP (ed) *Annual review of nursing research*, vol 33. Springer, New York, pp 31–73
58. Lifshitz J (2008) Fluid percussion injury model. In: Chen J, Xu ZC, Xu X-M, Zhang JH (eds) *Animal models of acute neurological injuries*. Humana Press, New York, pp 369–384
59. Roe SY, McGowan EM, Rothwell NJ (1998) Evidence for the involvement of corticotrophin-releasing hormone in the pathogenesis of traumatic brain injury. *Eur J Neurosci* 10:553–559
60. Grundy PL, Harbuz MS, Jessop DS, Lightman SL, Sharples PM (2001) The hypothalamo-pituitary-adrenal axis response to experimental traumatic brain injury. *J Neurotrauma* 18:1373–1381
61. King LR, McLaurin RL, Lewis HP, Knowles HC Jr (1970) Plasma cortisol levels after head injury. *Ann Surg* 172:975–984
62. Bouzarth WF, Shenkin HA, Feldman W (1968) Adrenocortical response to craniocerebral trauma. *Surg Gynecol Obstet* 126:995–1001
63. Griesbach GS, Hovda DA, Tio DL, Taylor AN (2011) Heightening of the stress response during the first weeks after a mild traumatic brain injury. *Neuroscience* 178:147–158
64. Bornstein SR, Engeland WC, Ehrhart-Bornstein M, Herman JP (2008) Dissociation of ACTH and glucocorticoids. *Trends Endocrinol Metab* 19:175–180
65. Rowe RK, Rumney BM, May HG, Permana P, Adelson PD, Harman SM, Lifshitz J, Thomas TC (2016) Diffuse traumatic brain injury affects chronic corticosterone function in the rat. *Endocr Connect* 5:152–166
66. Scranton RA, Baskin DS (2015) Impaired pituitary axes following traumatic brain injury. *J Clin Med* 4:1463–1479
67. Kopczak A, Kilimann I, Von Rosen F, Krewer C, Schneider HJ, Stalla GK, Schneider M (2014) Screening for hypopituitarism in 509 patients with traumatic brain injury or subarachnoid hemorrhage. *J Neurotrauma* 31:99–107
68. Taylor AN, Rahman SU, Sanders NC, Tio DL, Prolo P, Sutton RL (2008) Injury severity differentially affects short- and long-term neuroendocrine outcomes of traumatic brain injury. *J Neurotrauma* 25:311–323
69. Taylor AN, Rahman SU, Tio DL, Sanders MJ, Bando JK, Truong AH, Prolo P (2006) Lasting neuroendocrine-immune effects of traumatic brain injury in rats. *J Neurotrauma* 23:1802–1813
70. Osterstock G, El Yandouzi T, Romanò N, Carmignac D, Langlet F, Country N, Guillou A, Schaeffer M, Chauvet N, Vanacker C, Galibert E, Dehouck B, Robinson IC, Prévot V, Mollard P, Plešnila N, Méry PF (2014) Sustained alterations of hypothalamic tanycytes during posttraumatic hypopituitarism in male mice. *Endocrinology* 155:1887–1898
71. Kasturi BS, Stein DG (2009) Traumatic brain injury causes long-term reduction in serum growth hormone and persistent astrogliosis in the cortico-hypothalamo-pituitary axis of adult male rats. *J Neurotrauma* 26:1315–1324
72. Kelly DF, McArthur DL, Levin H, Swimmer S, Dusick JR, Cohan P, Wang C, Swerdloff R (2006) Neurobehavioral and quality of life changes associated with growth hormone insufficiency after complicated mild, moderate, or severe traumatic brain injury. *J Neurotrauma* 23:928–942
73. Lavernja I, Trifunovic S, Ajdzanovic V, Pekovic S, Bjelobaba I, Stojiljkovic M, Milosevic V (2014) Sensorimotor cortex ablation induces time-dependent response of ACTH cells in adult rats: behavioral, immunohistomorphometric and hormonal study. *Physiol Behav* 125:30–37
74. Lavernja I, Ajdzanovic V, Trifunovic S, Savic D, Milosevic V, Stojiljkovic M, Pekovic S (2014) Cortical ablation induces time-dependent changes in rat pituitary somatotrophs and upregulates growth hormone receptor expression in the injured cortex. *J Neurosci Res* 92:1338–1349
75. Cernak I (2005) Animal models of head trauma. *NeuroRx* 2:410–422
76. Shohami E, Bass R, Trembovler V, Weidenfeld J (1995) The effect of the adrenocortical axis upon recovery from closed head injury. *J Neurotrauma* 12:1069–1077
77. McDaniel WF (1993) The influences of fragments and analogs of ACTH/MSH upon recovery from nervous system injury. *Behav Brain Res* 56:11–22
78. Greco T, Hovda D, Prins M (2013) The effects of repeat traumatic brain injury on the pituitary in adolescent rats. *J Neurotrauma* 30:1983–1990
79. Ives JC, Alderman M, Stred SE (2007) Hypopituitarism after multiple concussions: a retrospective case study in an adolescent male. *J Athl Train* 42:431–439
80. Greco T, Hovda DA, Prins ML (2015) Adolescent TBI-induced hypopituitarism causes sexual dysfunction in adult male rats. *Dev Neurobiol* 75:193–202
81. Tan H, Yang W, Wu C, Liu B, Lu H, Wang H, Yan H (2017) Assessment of the role of intracranial hypertension and stress on hippocampal cell apoptosis and hypothalamic-pituitary dysfunction after TBI. *Sci Rep* 7:3805
82. Russell AL, Richardson MR, Bauman BM, Hernandez IM, Saperstein S, Handa RJ, Wu TJ (2018) Differential responses of the HPA axis to mild blast traumatic brain injury in male and female mice. *Endocrinology* 236:2375