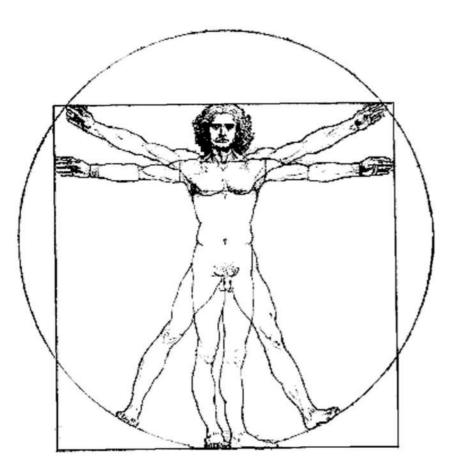
Embryology lecture 4:

A sense of proportion

Vitruvian Man



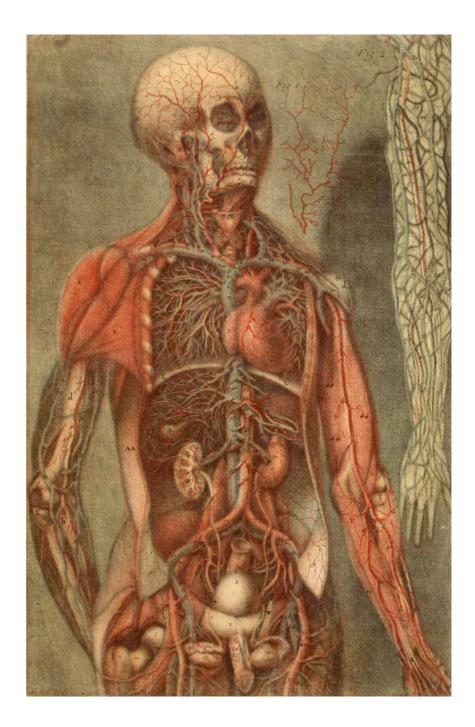
span of the out-stretched arms = height distance from hairline to chin = 10% height elbow to the tip of the hand = 25% height length of foot = 1/6 height, length of an ear = 1/3 length of the face

etc, etc

(don't bother learning these)

Internally, too, everything is (has to be) in proportion:

if it were not – if one organ were too small to serve the needs of others that depend on it – the body would be in trouble.



As so often happens in medical science, our first clues came from examining outliers – exceptions to the usual norms of size and proportion.

Outliers:

Some are Vitruvian in proportion:

And some are not:

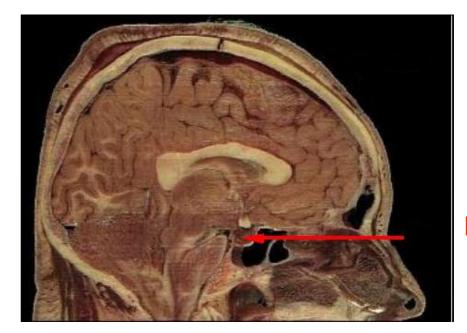






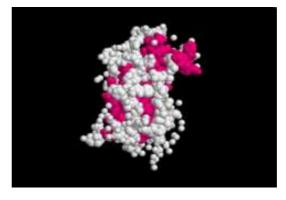
Pituitary tumours are associated with gigantism





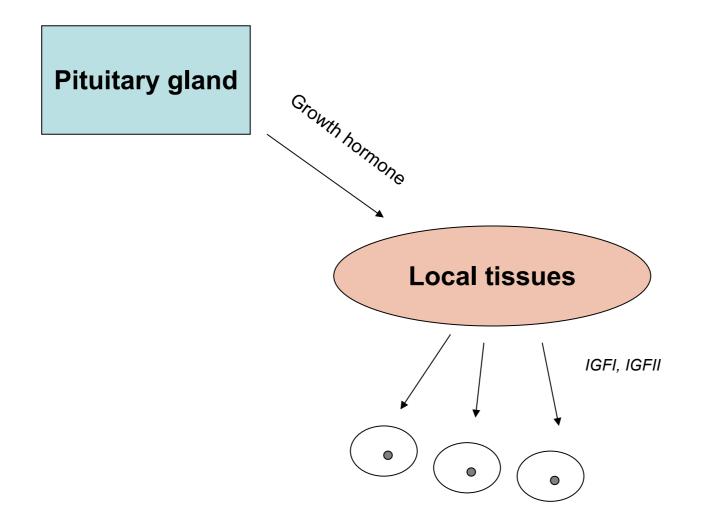
Pituitary

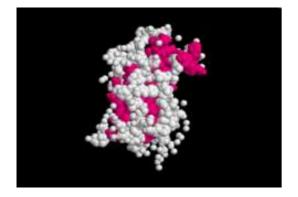
Anna Haining Bates and her parents (who are typical in size)



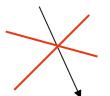
Growth hormone

Mammalian body size



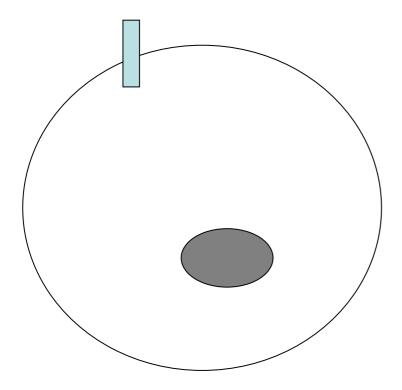


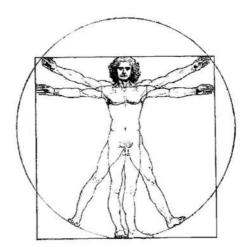
Growth hormone



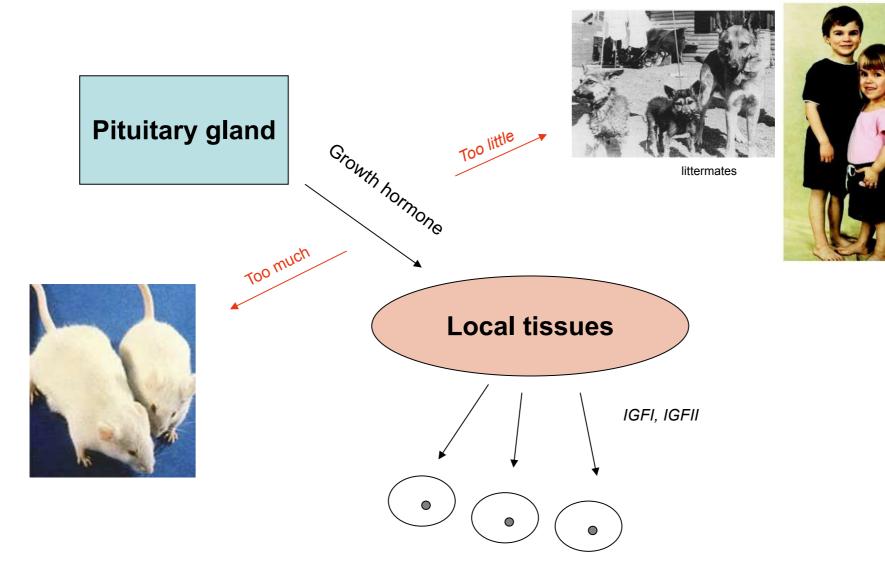


Zvi Laron, and Laron syndrome people.

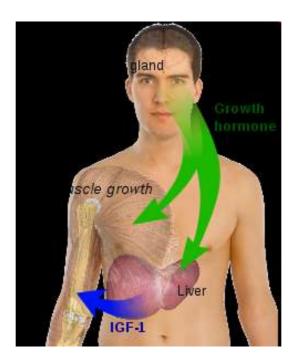


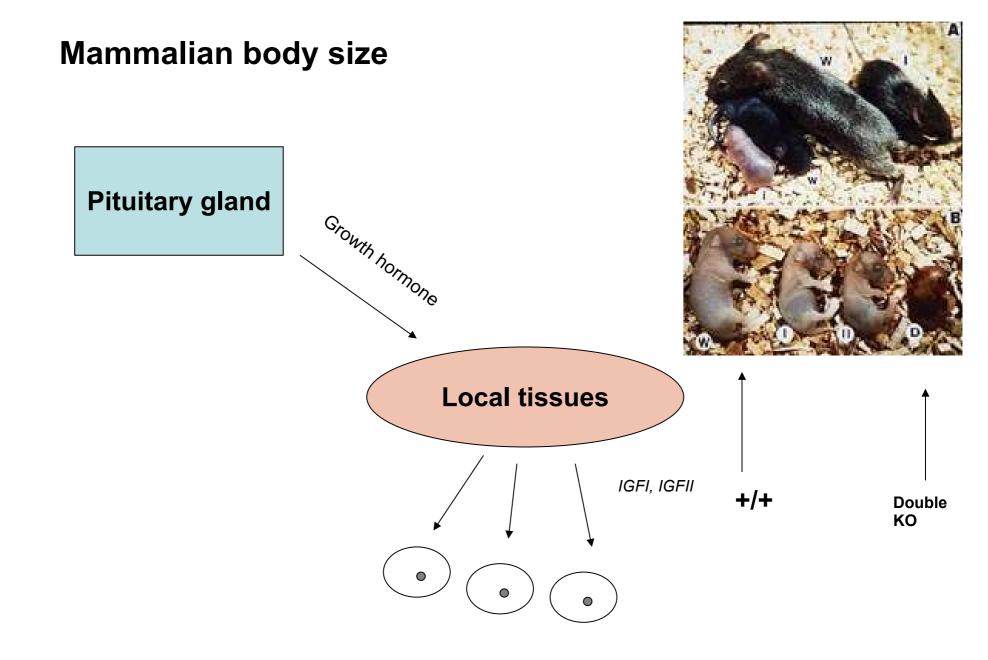


Mammalian body size



Growth hormone itself affects post-natal muscle growth directly, but other tissues only indirectly.



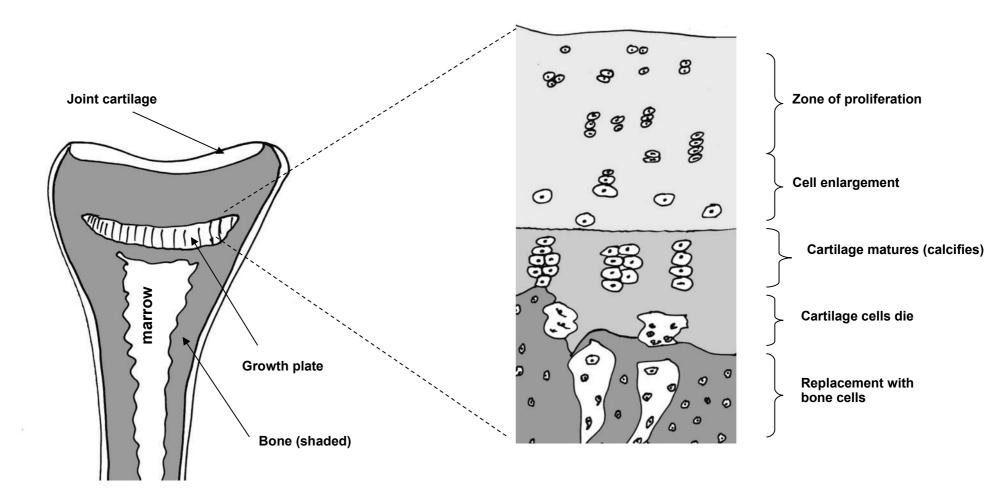


limb growth and its limits

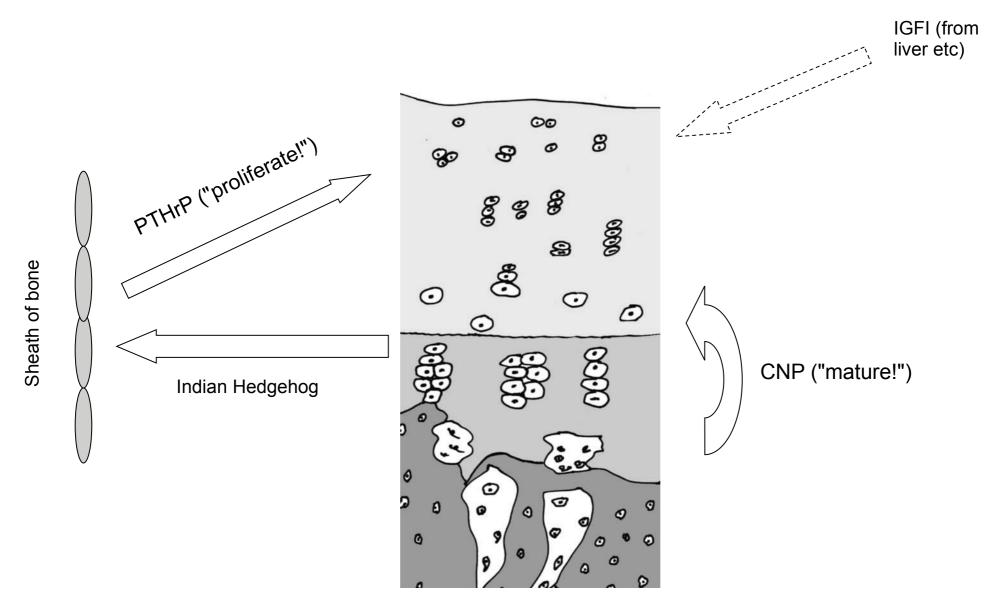
Rabbit leg experiment



- Inhibit the growth of *one* leg of a young rabbit
- Contralateral leg grows normally (-> lop-side bunny)
- Release the inhibition -> inhibited leg catches up.
- -> The leg 'knows' how big it must be (it is not just a matter of grow until time x)

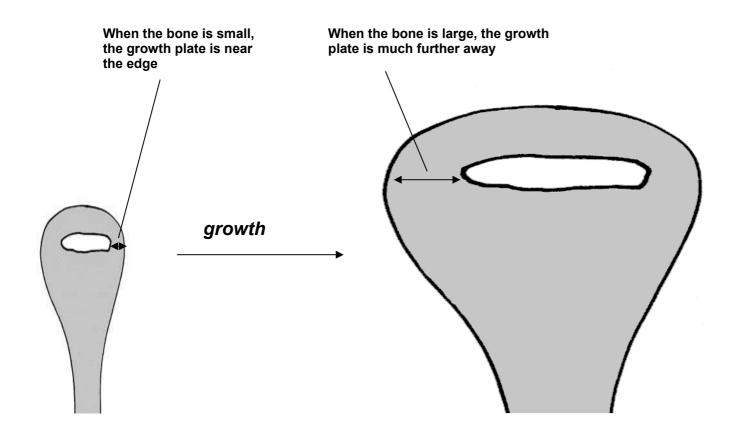


The growth plate maintains itself using internal and external signals



You will not be tested on these protein names: just see the underlying logic

A possible explanation for rate of growth falling away with size



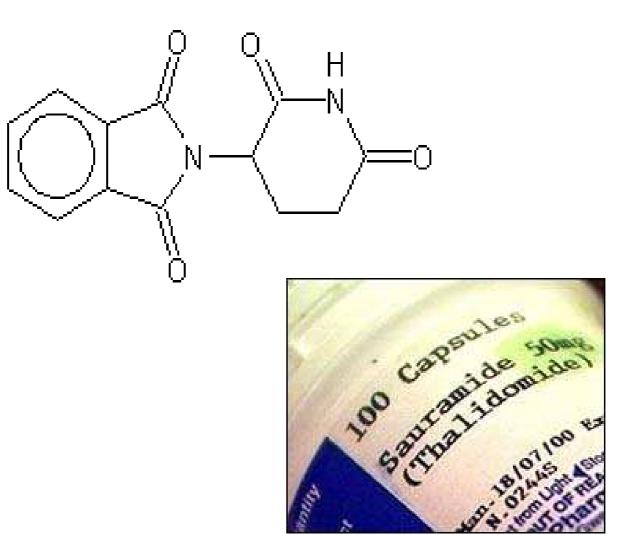
Non-Vitruvian phenotypes

Limb growth has a peculiar vulnerability: it takes place very rapidly, and makes high demands for oxygen.

It therefore needs the vascular system to grow very quickly into the elongating limbs.

Limb growth is therefore uniquely vulnerable to anything that impairs vascular growth.

Anyone recognize this?



Phocomelia ('seal limb')



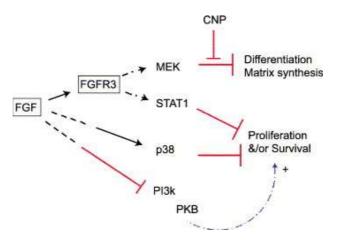


How about genetic 'non-Vitruvian' conditions?

Achondroplasia: activating mutation in FGFR3



FGF signalling via FGFR3 usually inhibits both proliferation and differentiation of chondrocytes (it's complicated).



Activating mutations in FGFR3 cause growth plates full of chondrocytes, and premature closure of the growth plates.

In contrast, *fgfr3*-/- mice show over-long bones

References: Pubmed PMID: 17950653, 17630040, 15748888

This kind of mutation makes two points;

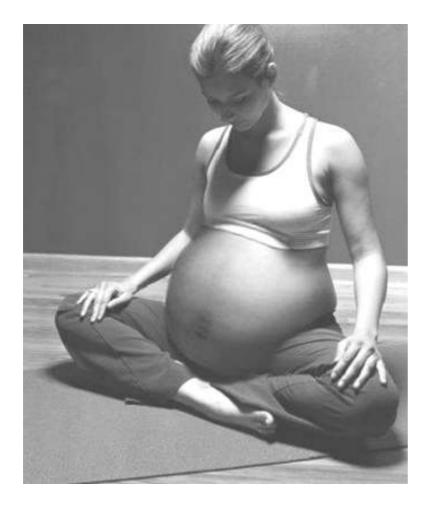
- 1) Some parts of the body keep growing anyway (so it is *not* that every part keep up with every other part)
- 2) The amount of skin, tendon, muscle, etc is still correct for a peculiar shortened limb, so tissues cannot be independent for each other.

Why is the amount of skin always right for the leg length?

... or any other growth?

Why is the amount of skin always right for the leg length?

... or any other growth?



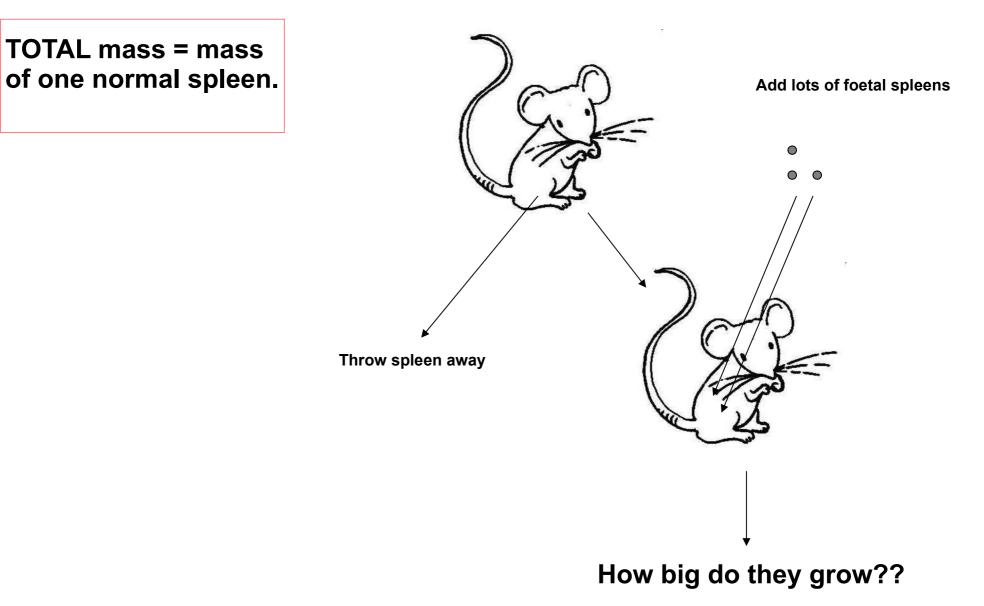


We can get a hint from the fact that applying a mechanical force (excessive stretch) to human skin drives skin growth



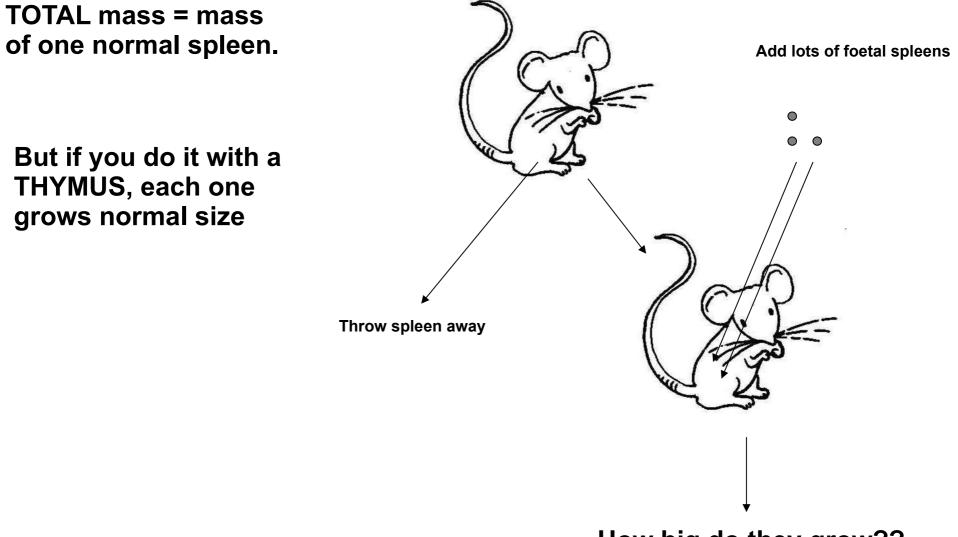
How about 'mechanically isolated' organs?

Spleen:



How about 'mechanically isolated' organs?

Spleen:



How big do they grow??