

## Differential staining of cartilage & bone

Types of stains used

Alcian Blue

Alizann Red

Why the staining is used:

1) Study ossification (osteogenesis)

2) Study abnormal skeleton, which occur due to:

↳ Intrinsic - genetics

↳ extrinsic - drugs...

→ Study of abnormal development known as tetralogy

\* embryo is up to week 10-11 after that it is called fetus

↳ due to organogenesis

Principle of the stain:

• Alizann Red - ionic stain "negatively charged"

↳ will stain positively charged ions

→ such as  $\text{Ca}^{++}$

↳ so, all BUNY structures will stain Red

→ occurs in intramembranous ossification AKA flat bones

↳ lacrimal bones      ↳ sternum

↳ hip bone      ↳ scapula

↳ skull (cranial bone)      ↳ clavical

↳ vomer      ↳ mandible

Steps of Intramembranous ossification

1) Anesthetize the pregnant rat (by diethyl anesthesia)

2) dislocate the head

3) Dissect & isolate the embryos

4) Identify the fetus & the umbilical cord & placenta

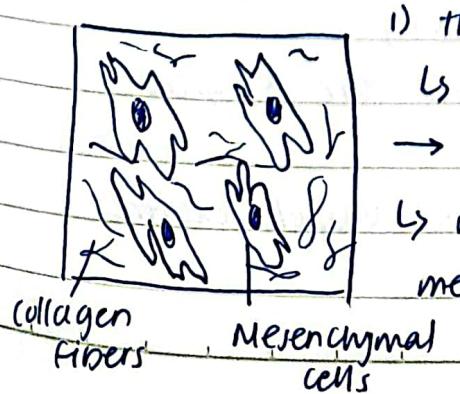
→ isotonic solution

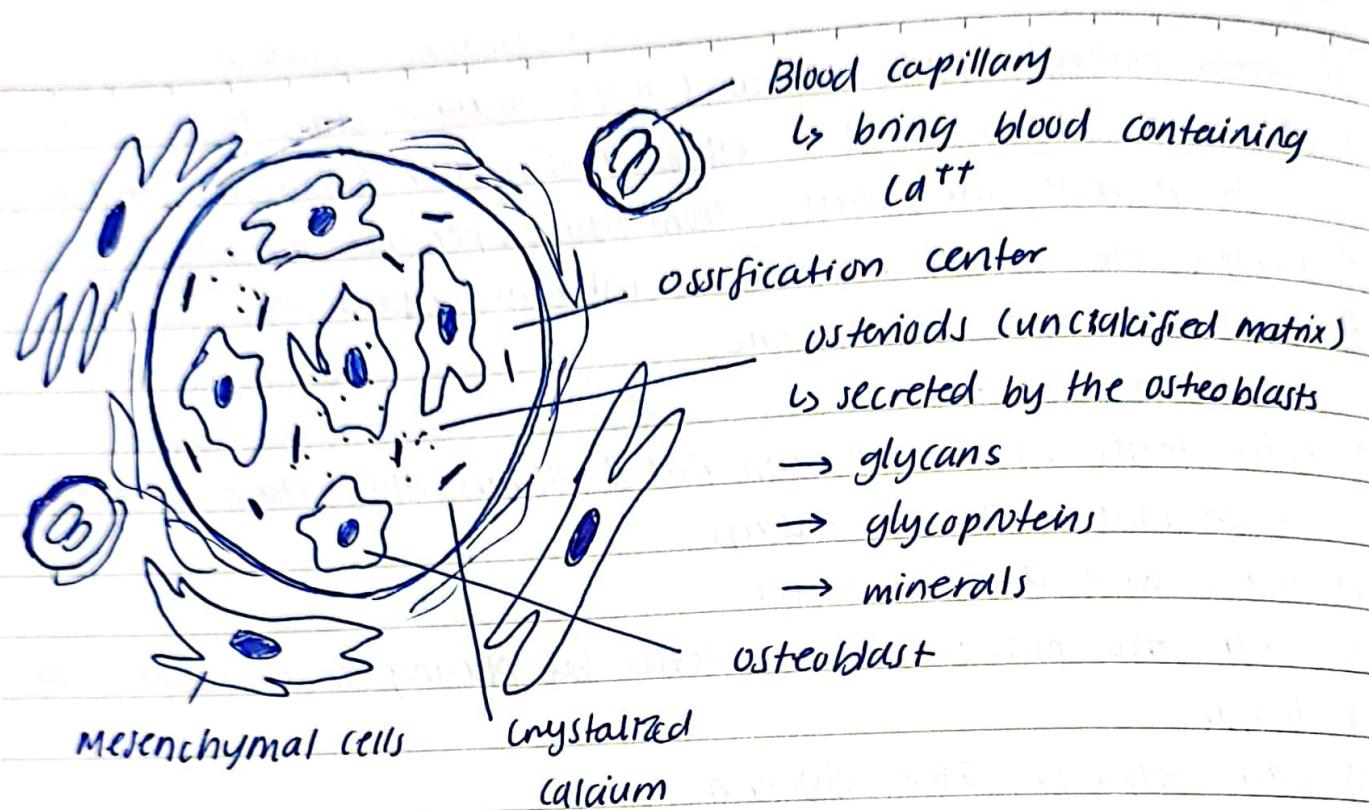
- 5) wash embryos with saline (0.9% sodium chloride)
- 6) Fix the fetuses in 95% ethyl alcohol (or formalyn) for 7 days  
↳ to prevent the fetuses from lysis (preserve the fetus)
- 7) Remove the skin & remove all internal organs <<sup>internal</sup><sub>thoracic</sub>
- 8) place the fetus in acetone  
↳ to remove fats
- 9) place fetus in the Alizarin Red & Alcian Blue stain at 37°C  
(in an incubator) for 7 days
- 10) wash with distilled water
- 11) clear the muscles in the fetus by placing in 1% potassium hydroxide
- 12) place fetus in 25% glycerin
- 13) Add 50% glycerin, gradually dilute the 1% potassium hydroxide & until we get 100% glycerin

### Types of Osteogenesis

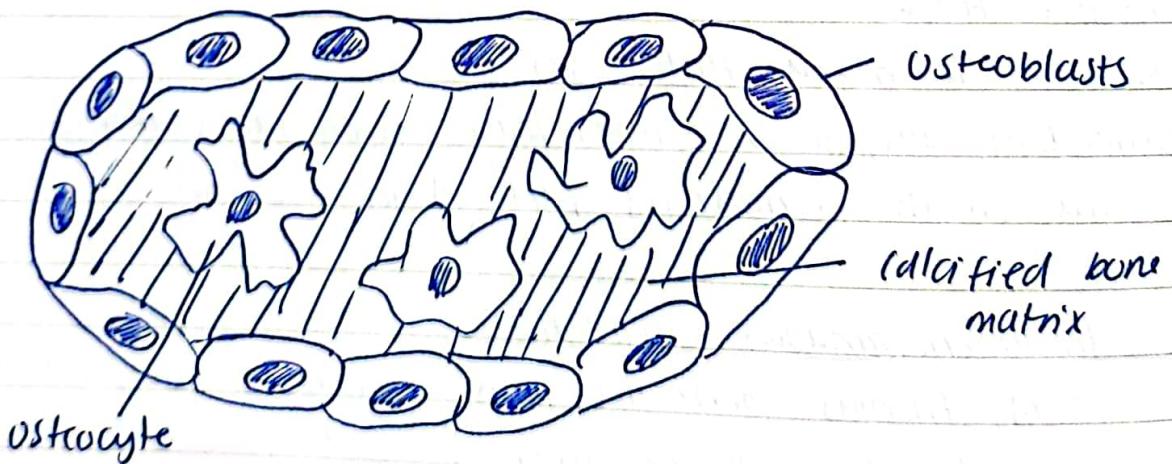
- 1) Intramembranous ossification - takes place within fibrous connective tissue  
↳ occur in many flat bones
- 2) Endochondral ossification - takes place within cartilage model  
↳ occur in the remaining part of the skeleton

### Steps of Intramembranous ossification

- The (FCTM) Fibrous connective tissue membrane is formed by mesenchymal cells, collagen fibers & blood vessels
- 1) the mesenchymal cells will Aggregate  
↳ start to proliferate by mitosis  
→ In a region known as ossification center  
↳ result in a bone spicule that contain differentiated mesenchymal cells known as osteoblasts → bone forming cells
- 



- osteoblasts use the blood  $\text{Ca}^{++}$  & crystalize the  $\text{Ca}^{++}$  ions using the enzyme Alkaline phosphatase
  - ↳ the crystalized  $\text{Ca}^{++}$  make the matrix hard
  - the osteoblasts are trapped, forming a cavity around it
    - ↳ differentiate to ~~osteocyte~~ osteocyte
    - cavity known as lacuna



- mature bone cells - live inside the cavity
- \* Many bone spicules will form, they will fuse & grow around blood vessels → bone trabeculae
  - formation of bone bars around blood vessels cavities AKA spongy (cancellous) bones

In humans, ossification begins about the third month of fetal life & is completed by late adolescence

- Bone spicules will fuse together & form bone trabeculae around blood vessels
  - ↳ Bones are highly vascularized
    - Supplying nutrients, minerals & oxygen

### Bone Remodeling

- ↳ Osteocytes rearrange at the periphery of the bone into a compact bone structures known as osteons
  - forming compact (hard) bone
- The mesenchymal cells at the periphery condense & develops into periosteum
  - ↳ The periosteum is formed of:
    - Outer fibrous layer of collagen fibers
    - Inner osteoblast cells

