

# GRANULATION TISSUE

DR ANJUM

# GRANULATION TISSUE

# INTRODUCTION

**GRANULATION TISSUE** ..... highly vascularized tissue composed of :

1. Newly vascularized capillaries,
2. Proliferating fibroblasts and
3. Residual inflammatory cells

**GRANULATION TISSUE FORMATION..... A YOUNG SCAR**

❖ **GRANULATION TISSUE....is new connective tissue and tiny blood vessels** that forms on the surfaces of wounds during healing process.



# PHASES OF GRANULATION TISSUE FORMATION

**1. PHASE OF INFLAMMATION.** Following trauma, **blood clots** at the site of injury. There is acute inflammatory response with **exudation of plasma, neutrophils** and some **monocytes** within 24 hours.

**2. PHASE OF CLEARANCE.** Combination of

- Proteolytic enzymes liberated from **neutrophils**,
- autolytic enzymes from dead tissues cells, and
- phagocytic activity of macrophages **clear off** the necrotic tissue, debris and red blood cells.

- Process of repair begins early – **24 hours**
- It begins as a proliferation of young connective tissue cells (fibroblast) and proliferation of new blood vessels – **3 to 7 days.**
- Two types of granulation tissue present based on duration of repair: **Early ( Vascular) and Late**

# PHASE OF INGROWTH OF GRANULATION TISSUE

This phase consists of 2 main processes:

- i. **angiogenesis** or neovascularisation, and
  - ii. **fibrogenesis**.
- i) Angiogenesis** (neovascularisation).

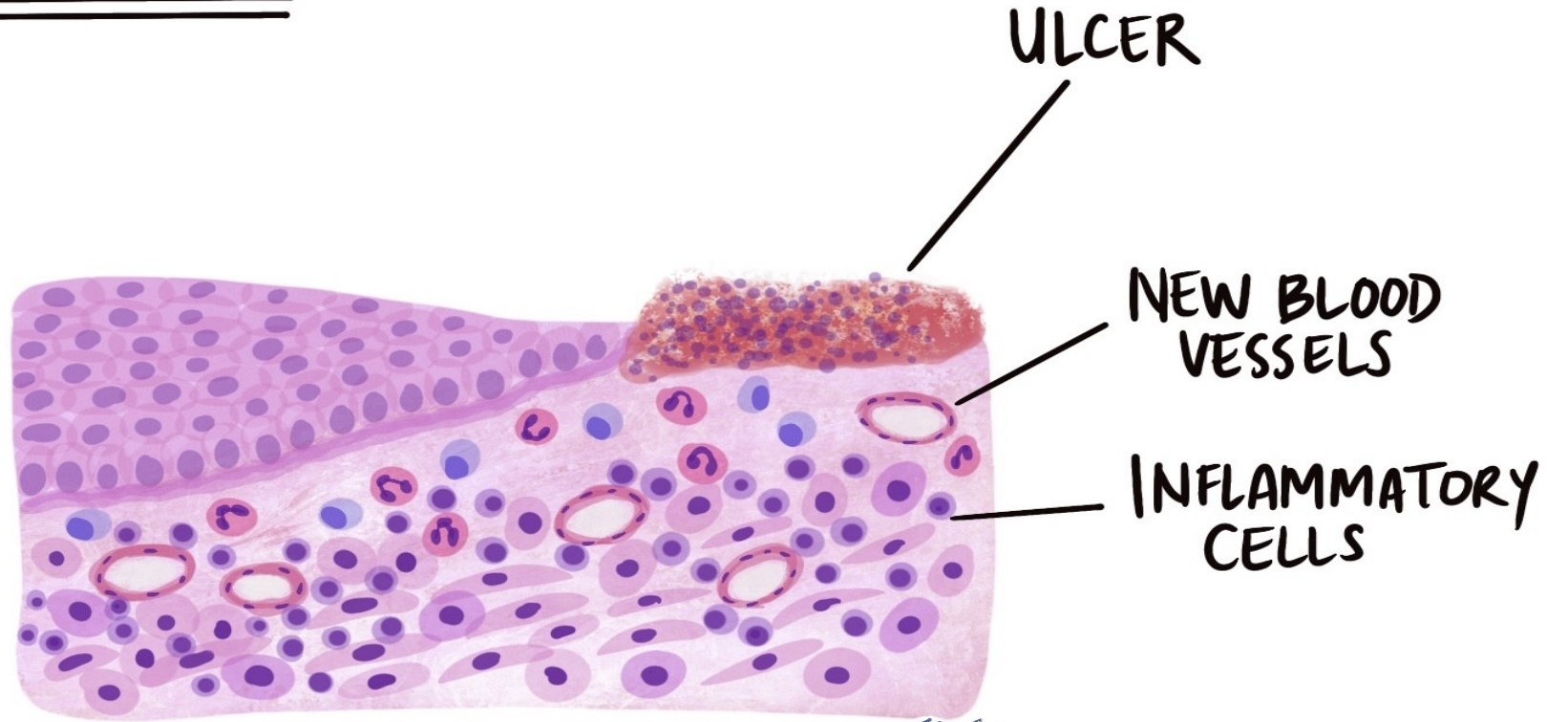
Formation of new blood vessels at the site of injury takes place by proliferation of endothelial cells from the margins of severed blood vessels.

Initially, the proliferated endothelial cells are solid buds but within a few hours develop a lumen and start carrying blood.

The newly formed blood vessels are more leaky, accounting for the oedematous appearance of new granulation tissue.

Soon, these blood vessels differentiate into muscular arterioles, thin-walled venules and true capillaries.

# GRANULATION TISSUE



*Z. Gorski*  
MY PATHOLOGY REPORT, CA



# GROSS MORPHOLOGY

During the migratory phase of wound healing, granulation tissue is:

- **light red** or dark pink in color, being perfused with **new capillary loops** or "buds";
- **soft** to the touch;
- **moist**; and
- **bumpy** (granular)/pebbly in appearance, due to punctate hemorrhages.
- **pulseful** on palpation,
- **painless** when healthy.

# GROSS MORPHOLOGY

## 5 P's of granulation tissue:

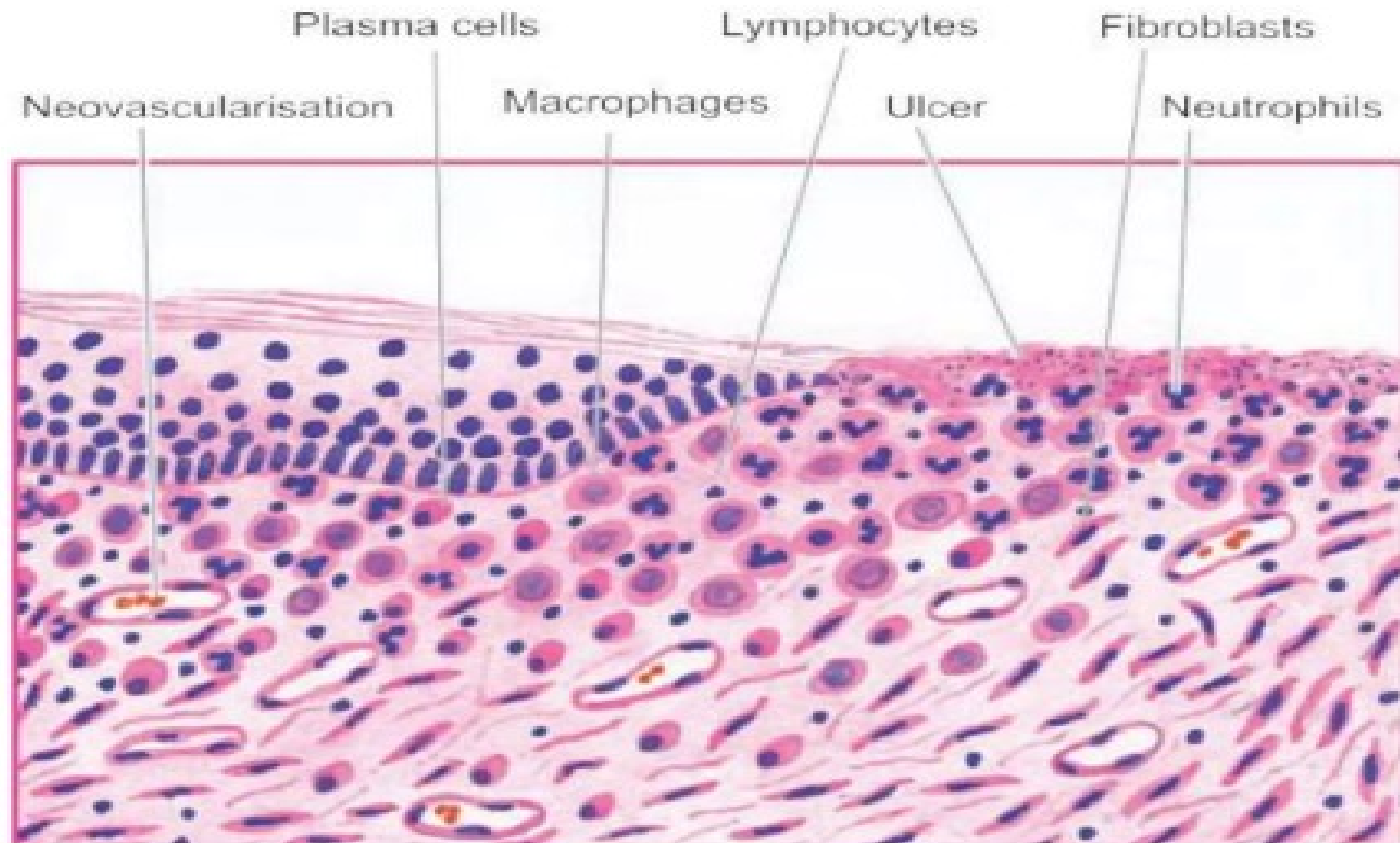
- Pink,
- Punctate hemorrhages,
- Pulseful,
- Painless,
- Pin head granulation.

# MICROSCOPY

- Microscopic examination shows thin-walled **capillaries** lined by endothelium and surrounded by **fibroblasts**.

**Residual inflammatory cells:** Neutrophils, lymphocytes, plasma cells & macrophages

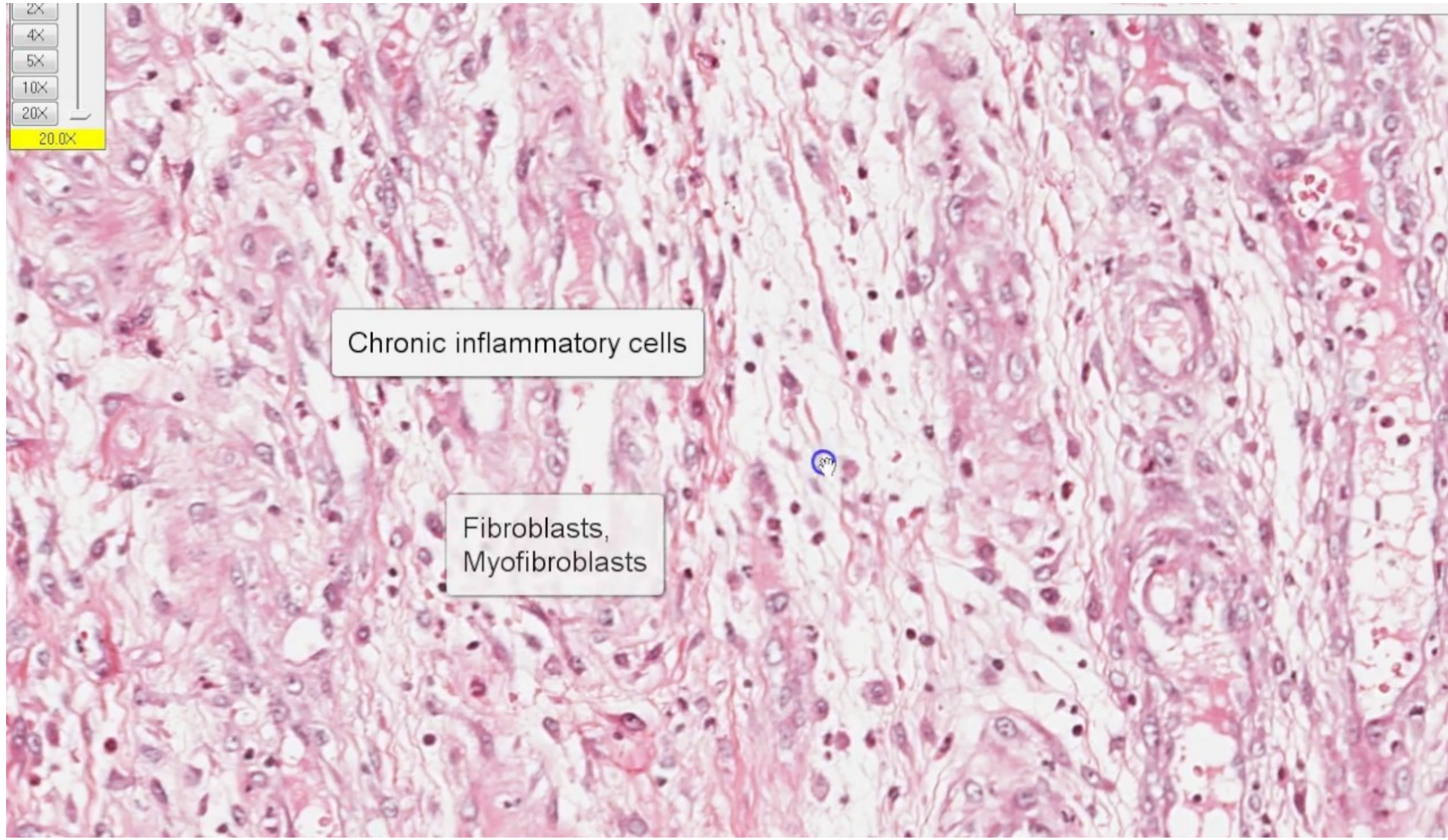
Active granulation tissue has **inflammatory cell infiltrate**, **newly formed blood vessels** and **young fibrous tissue** in loose matrix.

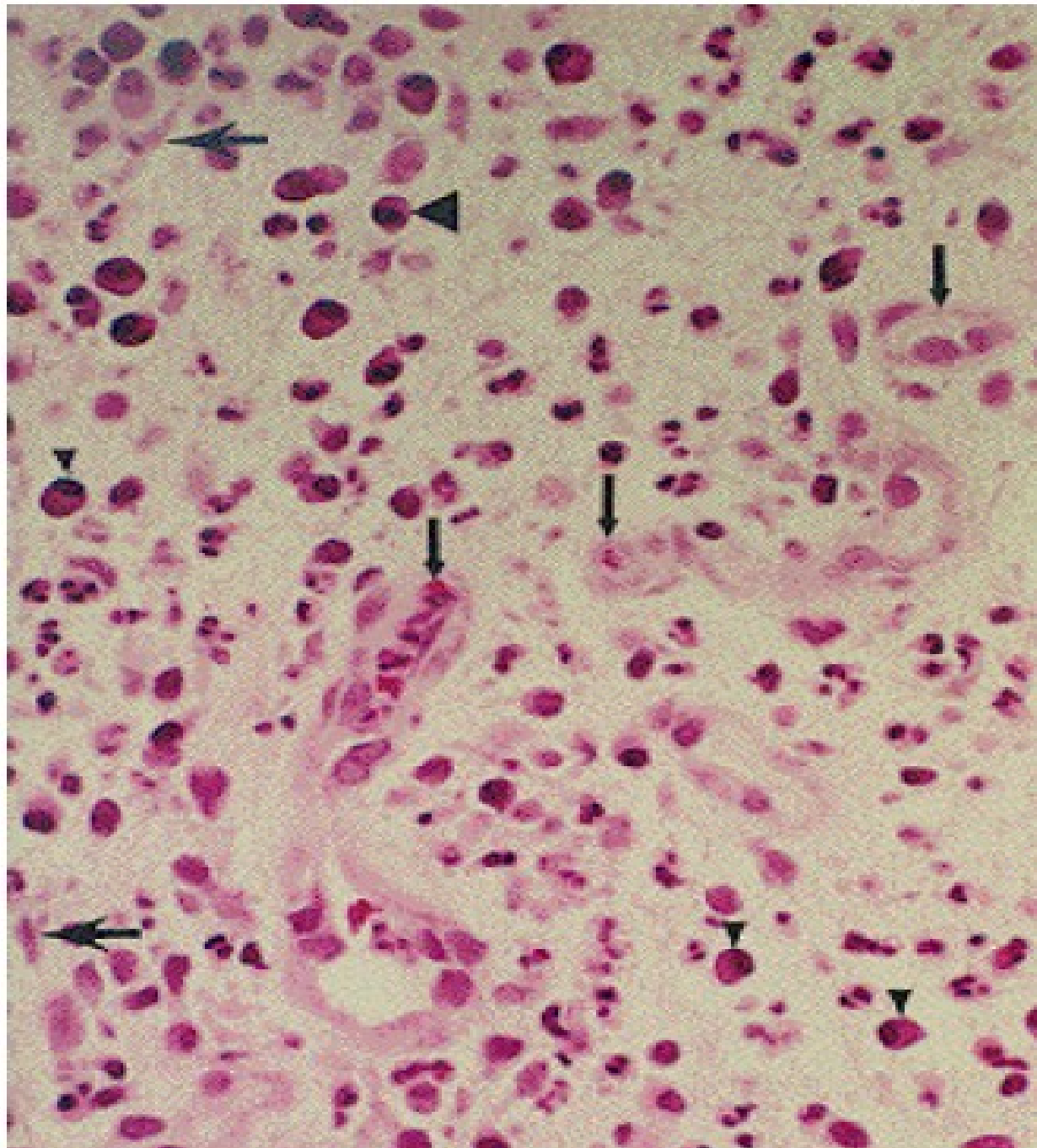


2X  
4X  
5X  
10X  
20X  
20.0X

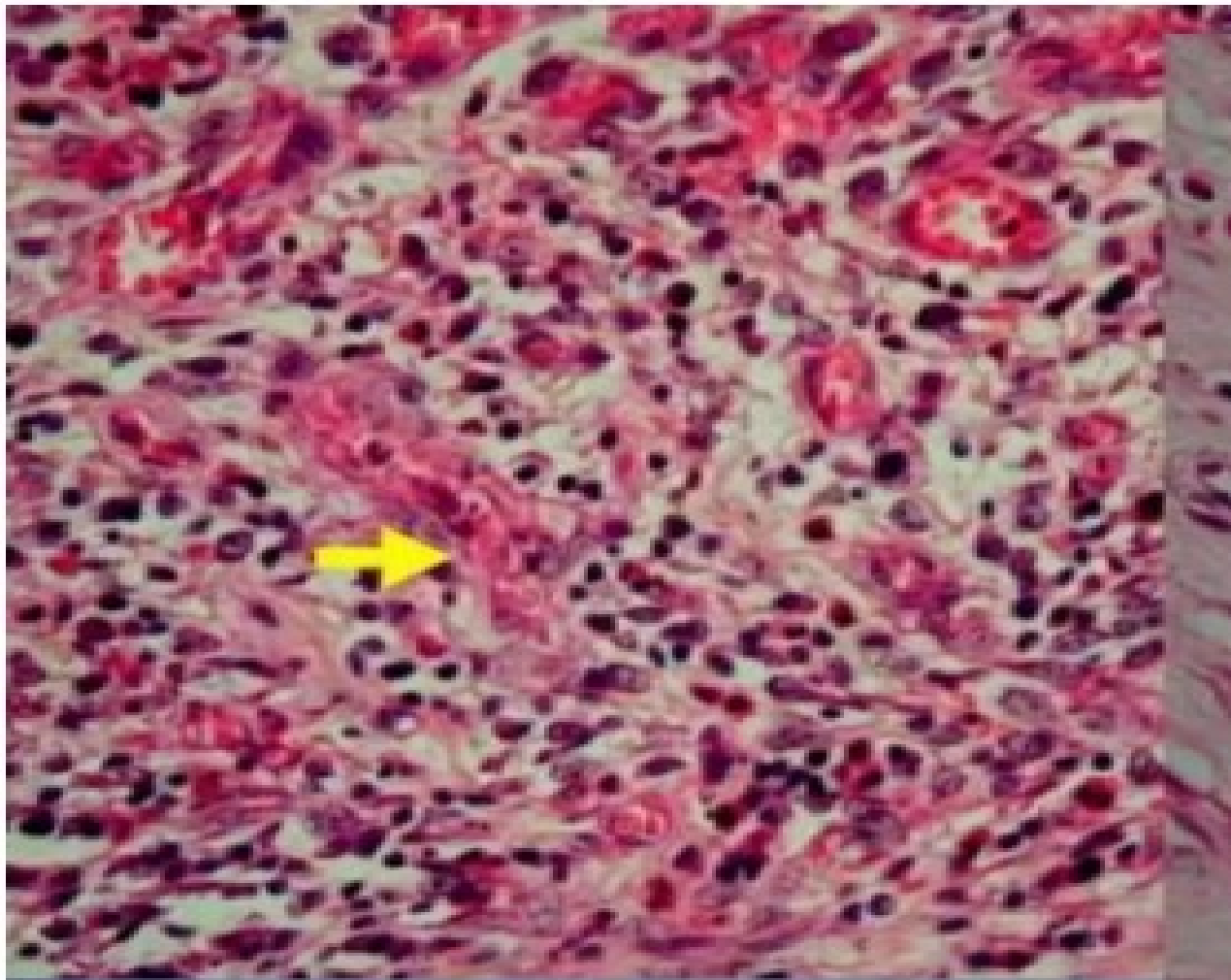
Chronic inflammatory cells

Fibroblasts,  
Myofibroblasts



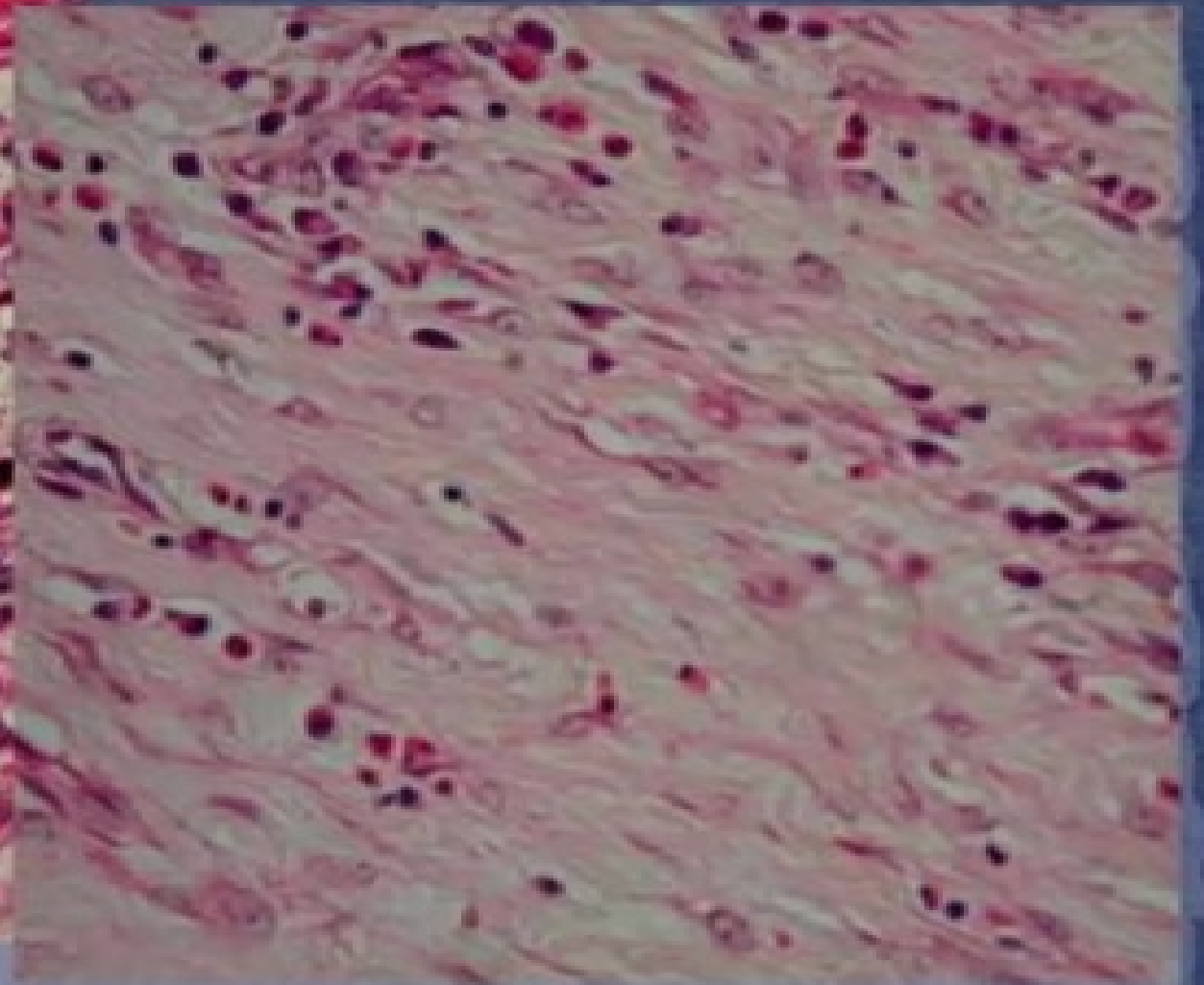


- Granulation tissue, pyogenic; small capillaries are forming (small arrows), some as yet without lumens.
- Plasma cells (triangle) and lymphocytes predominate. Large arrows indicate fibroblasts.



**Figure 4). Granulation tissue in the ulcer base.**

**New blood vessels lined by plump endothelial cells (arrow). Edema and inflammatory infiltrate are also seen.**



**(Figure 5). Fibrotic tissue beneath the ulcer base**

# ROLE OF GRANULATION TISSUE

- **Anti infection** and **protecting the wound** from further injury .
- **Filling** incision, wound and any defect of tissue.
- **Replacing necrotic tissue** , effusion and other foreign body.