



Tissue repair consists of two main pathways: **regeneration** and **scar formation**.

- **Tissue Regeneration:**
 - Regeneration occurs when tissues recover completely through the interaction of growth factors and the extracellular matrix, depending on the tissue's regenerative capacity:
 1. Labile tissues: Continuously regenerate (e.g. skin).
 2. Stable tissues: Cells in G₀ phase proliferate upon damage (e.g., liver, kidney, pancreas).
 3. Permanent tissues: No regeneration (e.g., neurons, cardiac and skeletal muscle).
 - Liver Regeneration:
 - Via hepatocyte proliferation or progenitor cell differentiation.
 - Complete regeneration without scarring occurs in mild injuries (first intention).
 - Severe injuries lead to scarring (second intention).

- **Scar Formation:**

Scar formation occurs when regeneration is insufficient, involving fibrosis (granulation tissue formation and remodeling).

Steps in Scar Formation:

1. Hemostatic Plug: Clot formation to control bleeding.
2. Inflammation: Macrophages release mediators that induce repair process.
3. Cell Proliferation:
 - Angiogenesis: Formation of new capillaries via:
 - VEGF-A, FGF-2, and TGF- β .
 - Steps include degradation of the basement membrane, pericyte detachment, sprouting, and capillary stabilization.
 - Fibroblast Activation and ECM Deposition:
 - Driven by PDGF, FGF-2, and TGF- β (potent fibrogenic agent).
 - Fibroblasts migrate, proliferate, and deposit type III collagen.
4. Tissue Remodeling:
 - Cross-linking of collagen and conversion from type III to type I.
 - Matrix metalloproteases (MMPs), inhibited by TIMPs, regulate ECM degradation.
 - Reduction in blood vessels and scar maturation.

Factors Impairing Repair:

1. Infection: Prolongs inflammation.
2. Diabetes Mellitus: Impairs angiogenesis.
3. Malnutrition: Deficiency in essential nutrients (e.g., vitamin C).
4. Mechanical Factors: Wound dehiscence in obese patients.
5. Foreign Bodies: Persist at injury sites.
6. Injury Severity: Extensive damage delays repair.
7. Site of Injury: Dependent on blood supply.
8. Poor Perfusion: Reduces oxygen and nutrient delivery.
9. Steroids: Decrease inflammation.



Defective Repair:

Defective repair results in complications due to:

1. Defective Scar Formation:

- Examples:
- Venous leg ulcers (superficial).
- Arterial ulcers (deep).
- Diabetic ulcers (deep).
- Pressure sores (bed sores in back)
- Wound dehiscence.(like abdominal wound in obese pateint (Mech.factors))

2. Excessive Scar Formation:

- Examples:
- Hypertrophic Scars: Excess ECM
- Keloids: Consist of excess collagen type I, common in darker-skinned individuals.
- Exuberant Granulation Tissue: (proud flush)
- Desmoid Tumors: Aggressive fibromatosis.

3. Contractures:

- Excessive wound contraction leading to deformities (e.g., in hands and legs).

Organ Fibrosis:

Severe or continuous injury results in excessive scarring and loss of organ function, seen in:

- Liver Cirrhosis
- Idiopathic Pulmonary Fibrosis
- End-Stage Kidney Disease (ESKD)

“ With hope in your heart and persistence in your steps, no dream is too distant ”