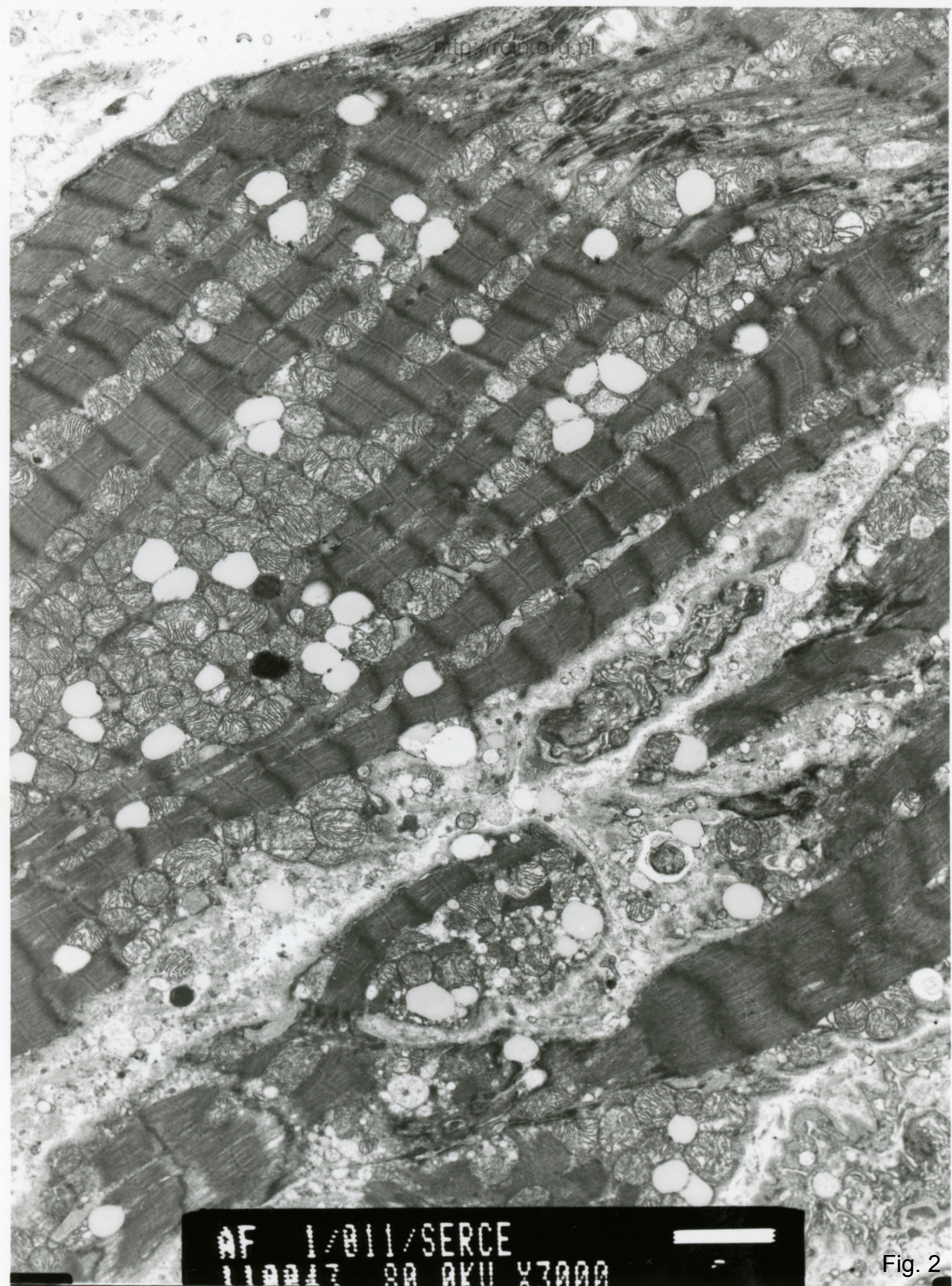


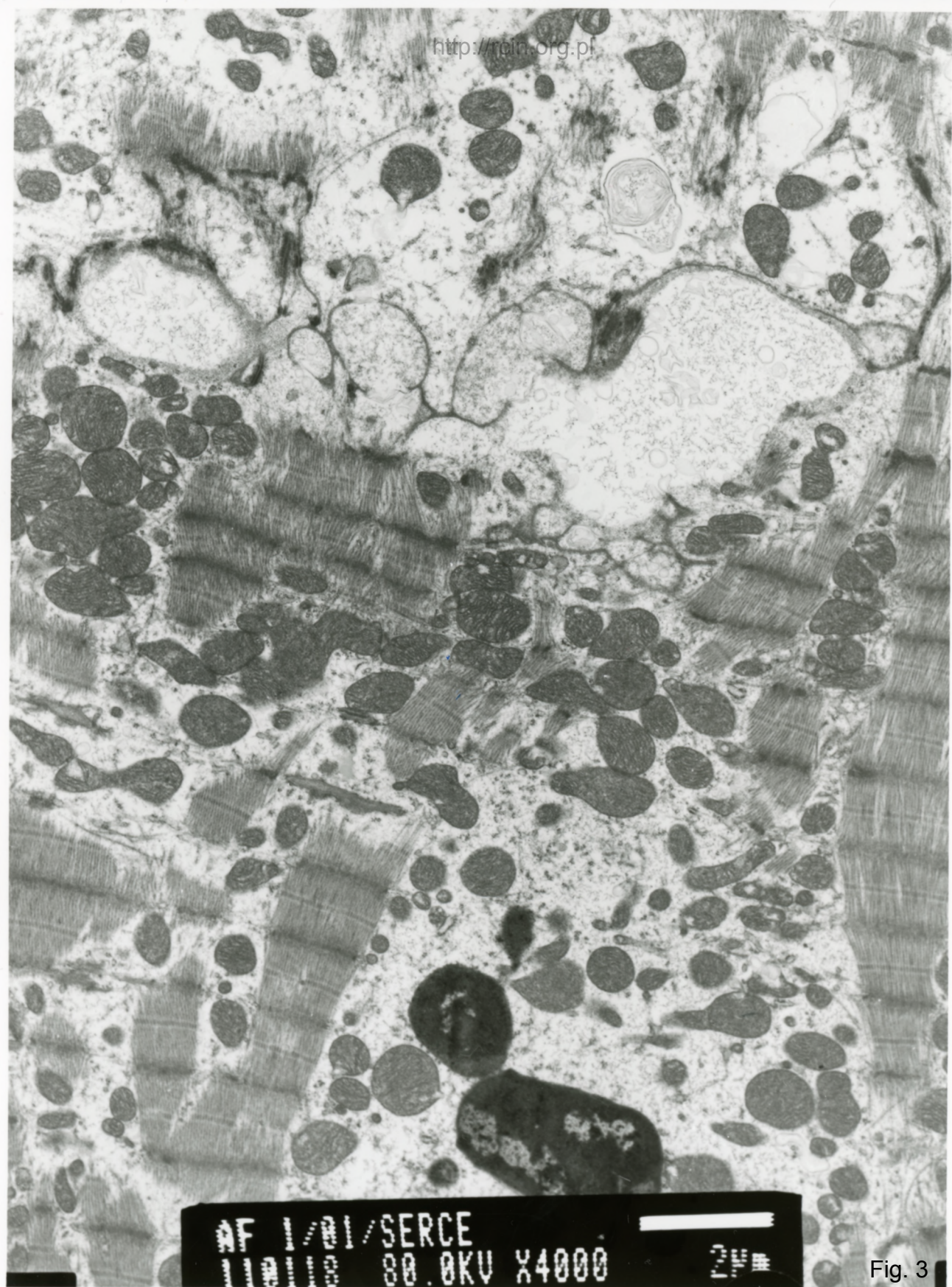
AF 1/011/SERCE
110011 80 AKU X3000

Fig. 1



AF 1/011/SERCE
110017 00 AKU X3000

Fig. 2



AF 1/01/SERCE
110103 80.0KV X4000

Fig. 3

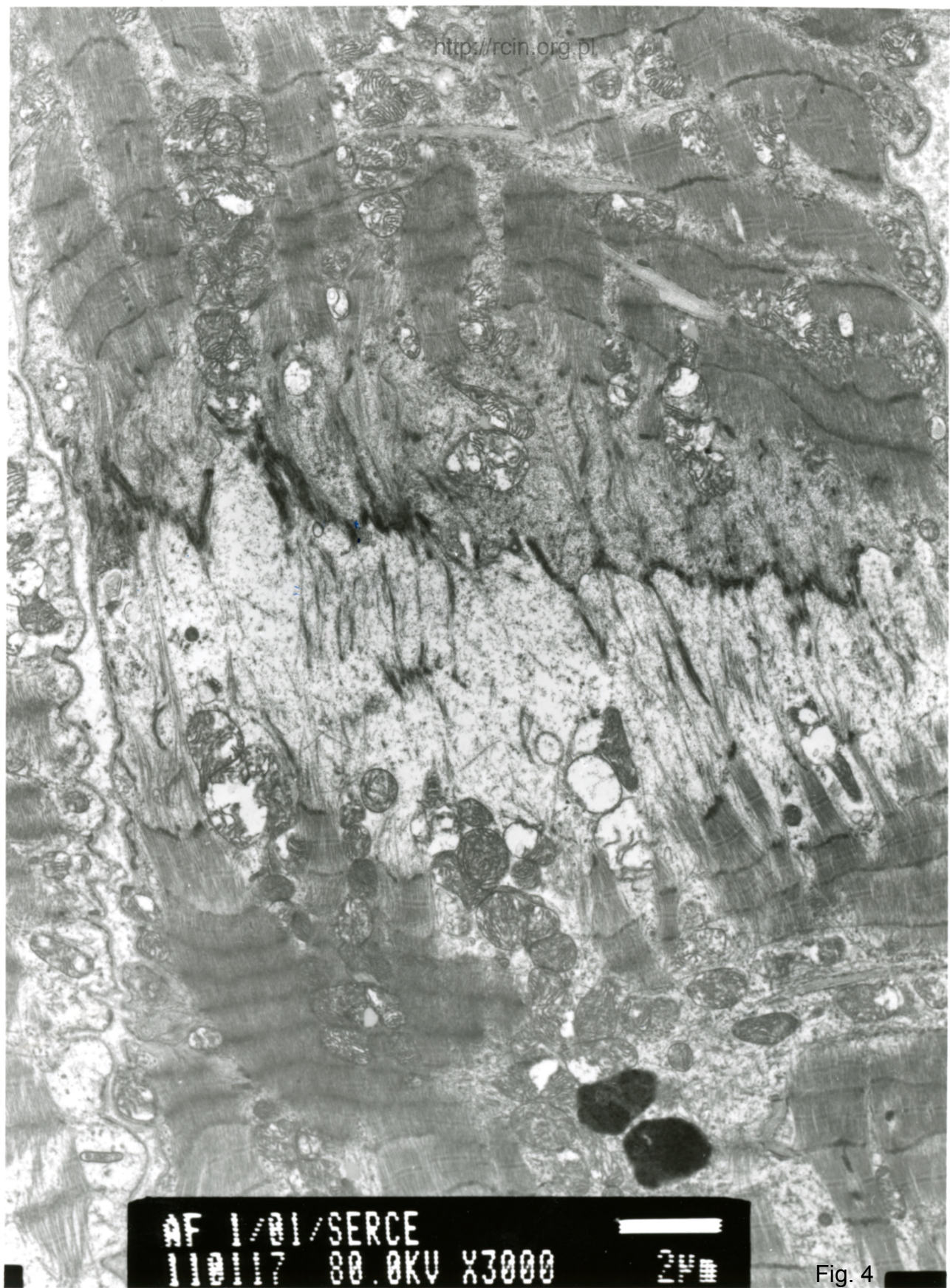
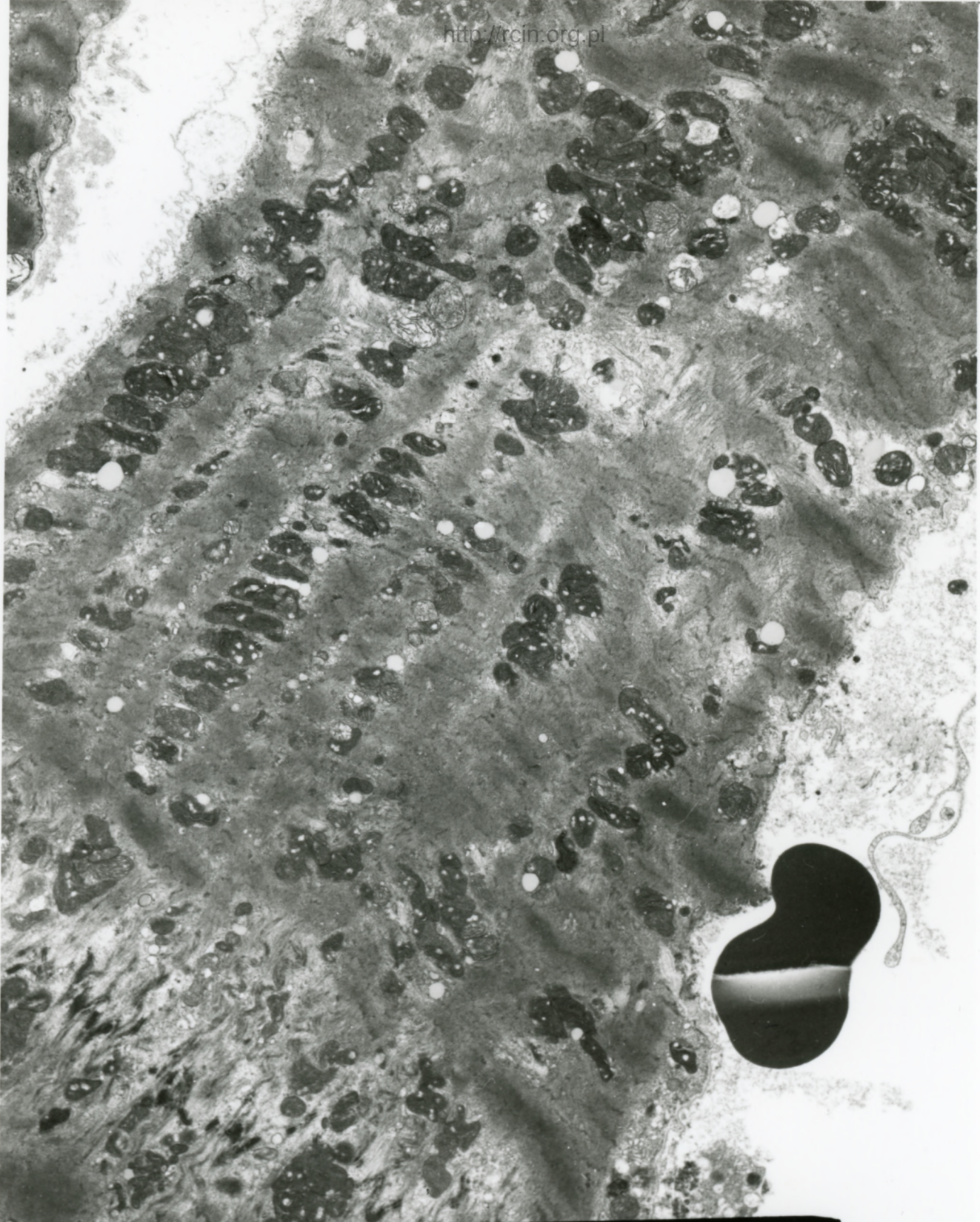
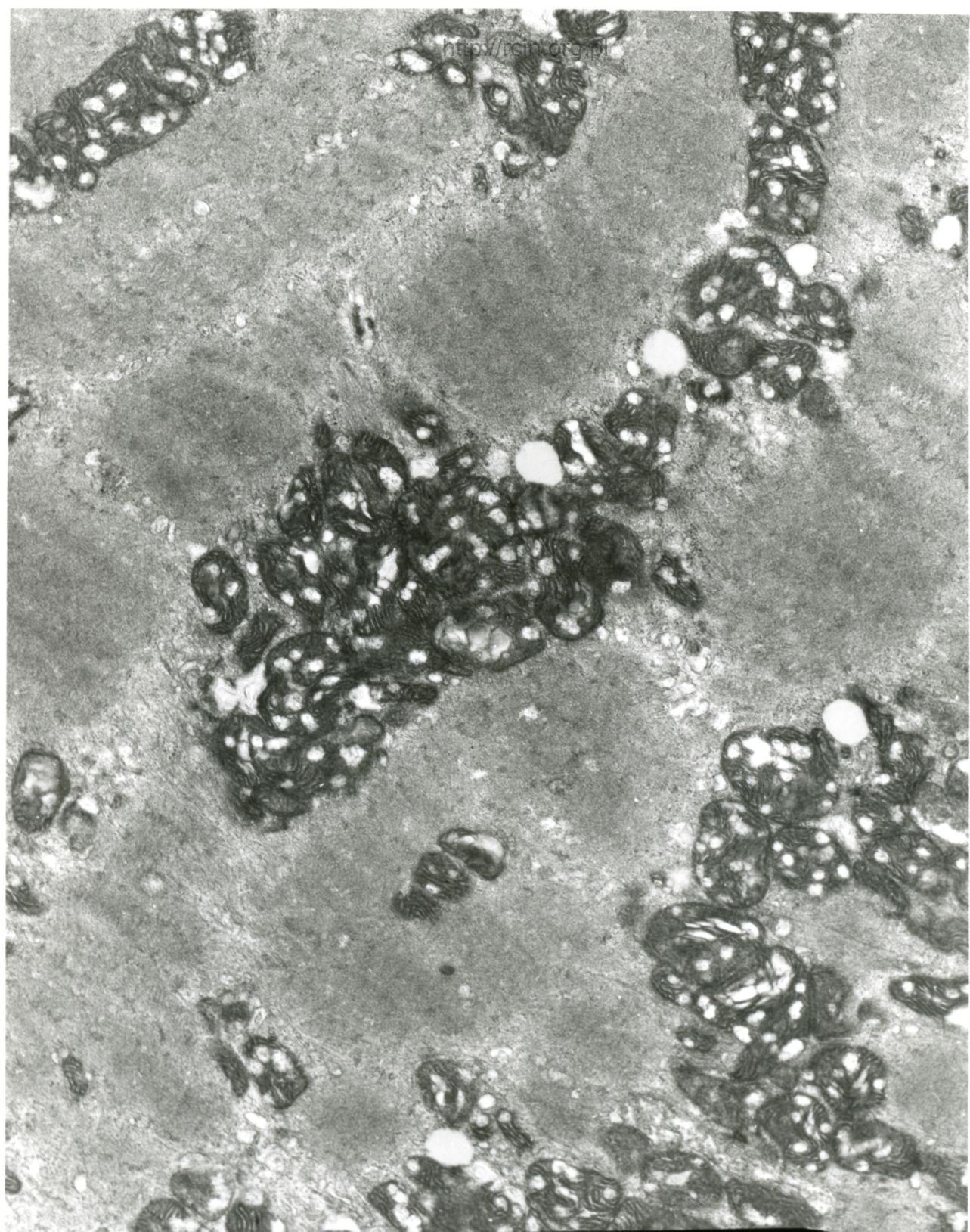


Fig. 4



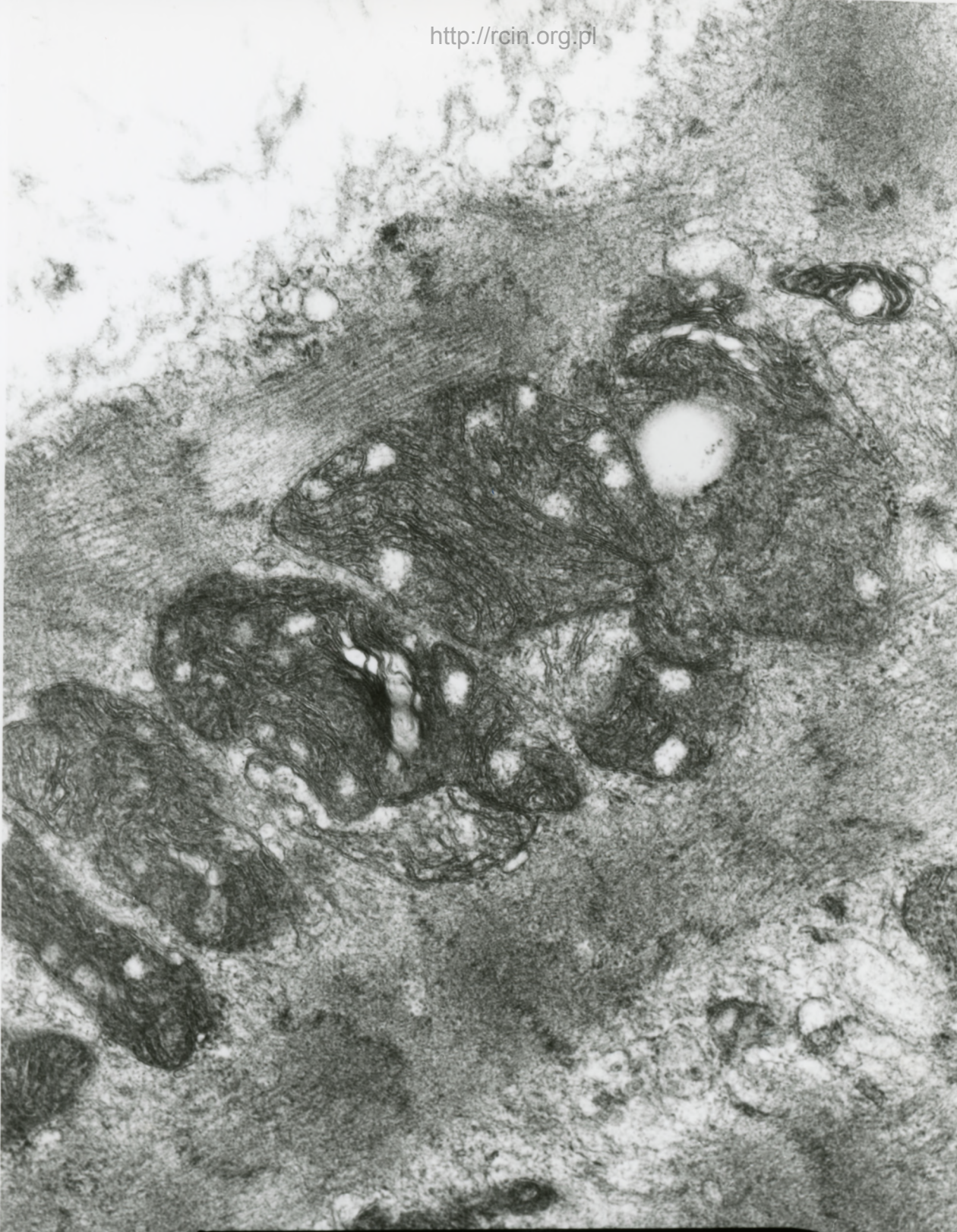
AF 1/011/SERCE
110045 80 BKU X2500

Fig. 5



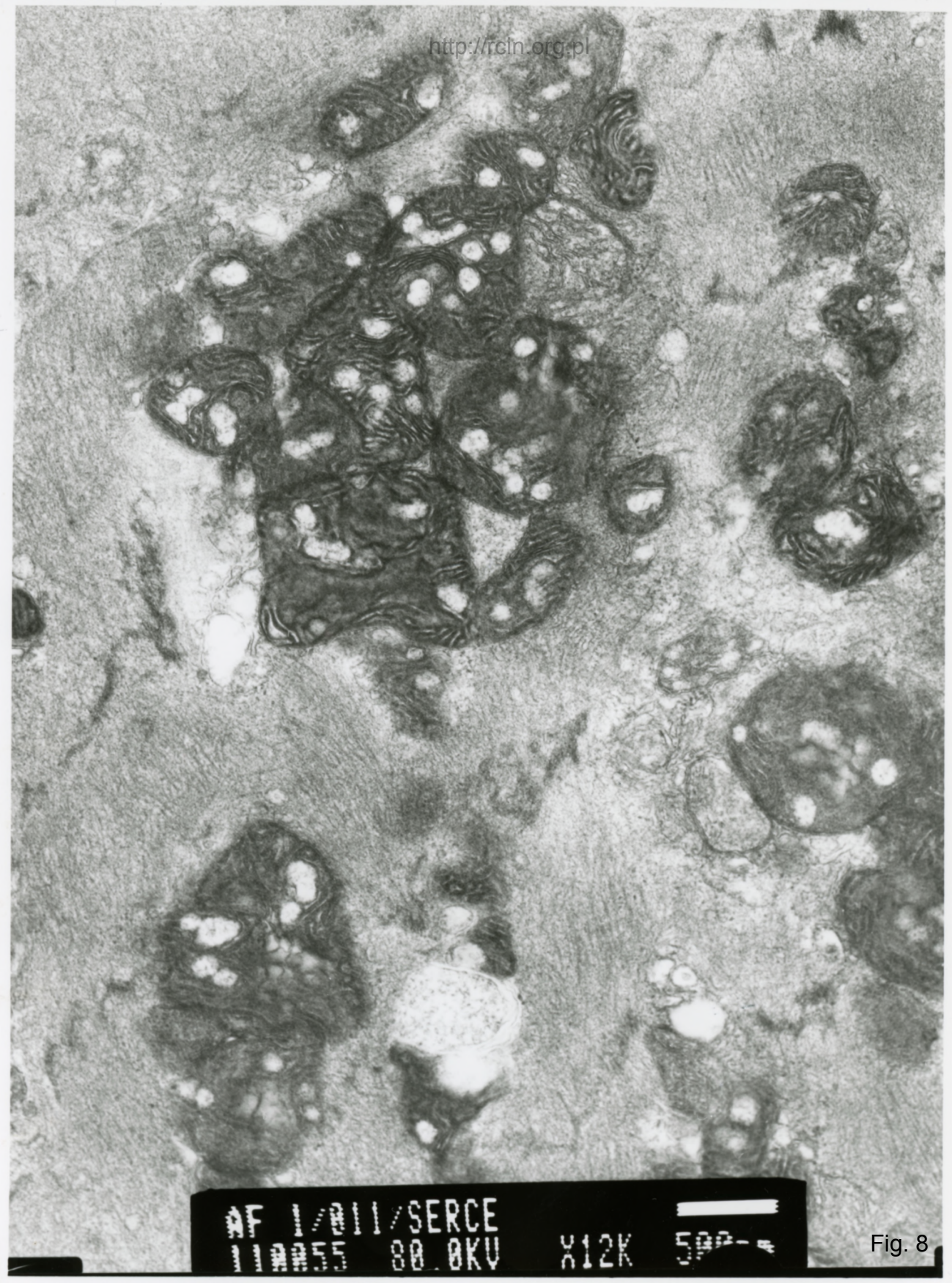
AF 1/011/SERCE
110050 80 0KV X7500

Fig. 6



AF 1/811/SERCE
110047 80 AKU 815K 500-µ

Fig. 7

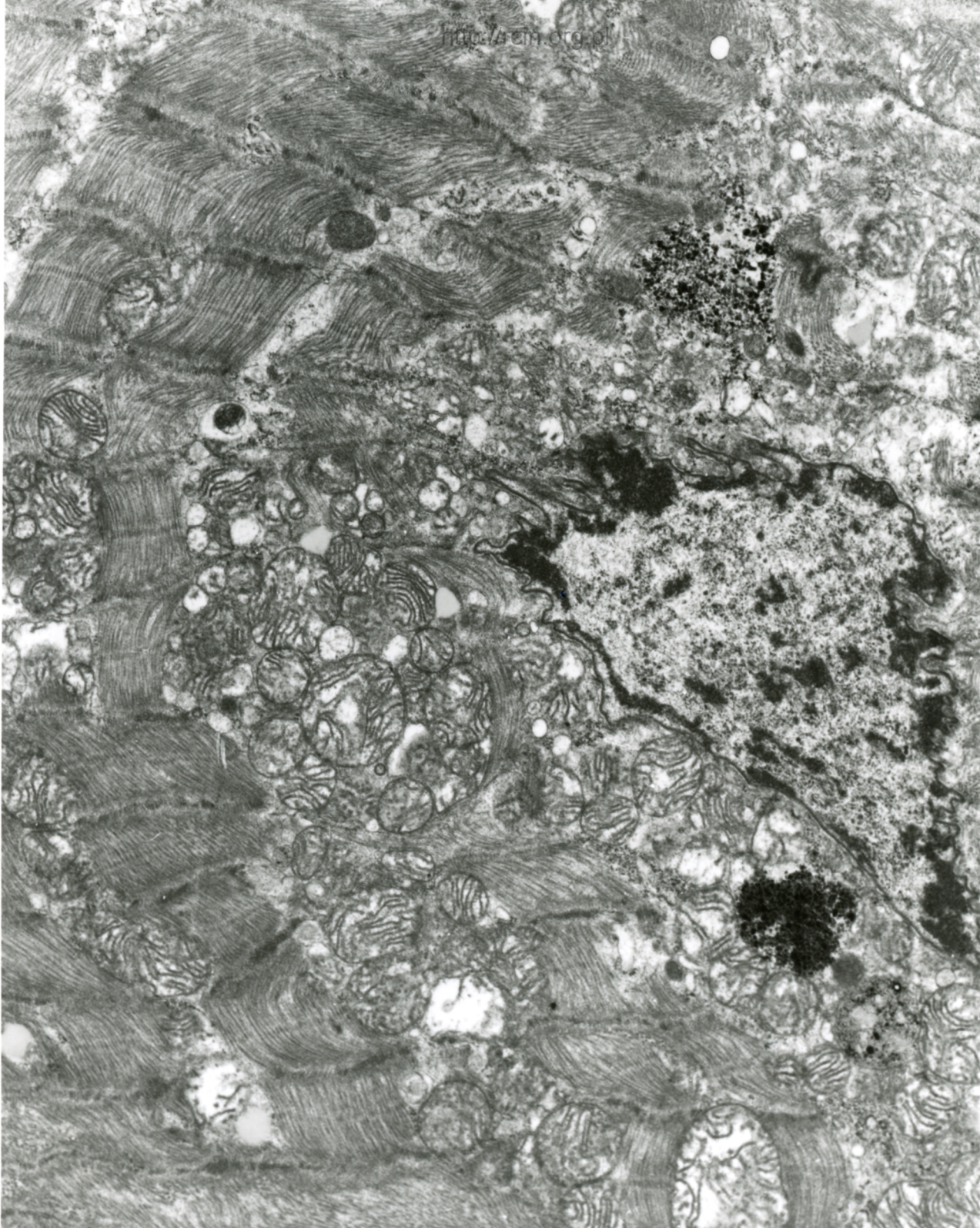


AF 1/011/SERCE
11A055 80.0KV

X12K

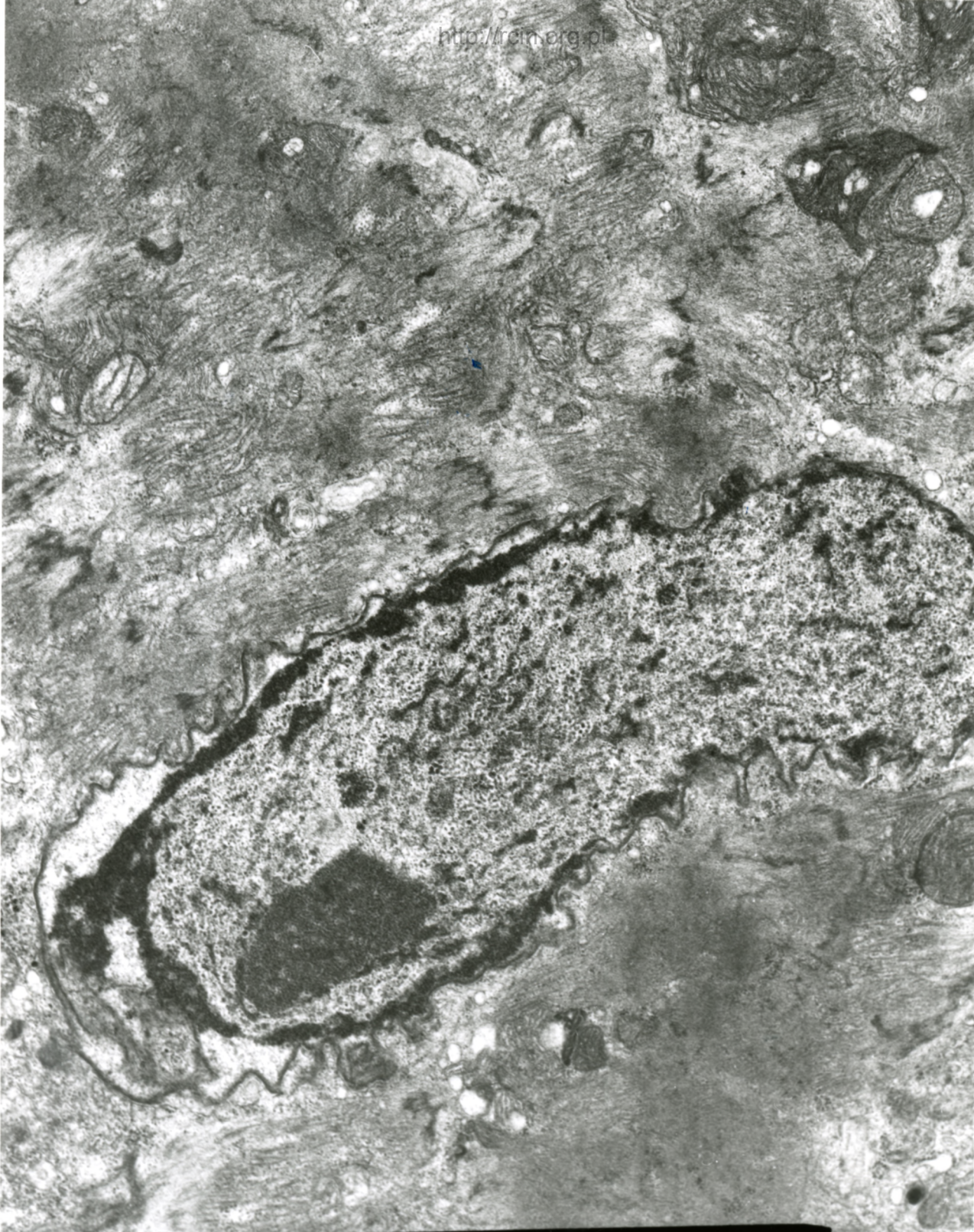
500-
500

Fig. 8



AF 1/011/SERCE
110045 RA 0KU X6000

Fig. 9



AF 1/011/SERCE
110054 RA AKU X7500

Fig.10

1/11

1. 18

Zapalenie mięśnia sercowego

Analiza ultrastrukturalna wykazała dezorganizację sarkomerów (Fig. 1,2,3,4). W sarkoplazmie obecne były liczne zmienione mitochondria (Fig.5,6,7,8). Jądra kardiomiocytów charakteryzowały się nieregularnym kształtem i ogniskowym poszerzeniem między zewnętrzną i wewnętrzną błoną otoczki jądrowej (Fig. 9,10).

Myocarditis

Ultrastructural analysis revealed a disorganization of the sarcomeres (Figs. 1, 2,3,4). Numerous altered mitochondria were present in the sarcoplasm (Figs. 5,6,7,8). Cardiomyocyte nuclei were characterized by an irregular shape and focal widening between the outer and inner membranes of the nuclear envelope (Fig. 9, 10).