Functional anatomy of the genital (reproductive) systems

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Plan:

- Development of the male and female genitalia
- Abnormalities of the male and female genitalia
- Male genital system (or male genitalia) structural peculiarities, functions
- Female genital system (or female genitalia) structural peculiarities, functions

According to TA (1998)

The genital systems include:

- female genital system (or female genitalia);
- male genital system (or male genitalia).

Development of the male and female genitalia

It includes two stages:

- Indifferent stage (up to the 6th week of the embryogenesis);
- Stage of sexual differentiation (starts at the 7th – 8th weeks of embryonic life).

Development of the male and female genitalia

The internal genitalia develop from the *intermediate mesoderm* and *urogenital sinus* (endoderm).

The external genitalia develop from the caudal eminence of **ectoderm**.







Development of the internal genitalia: indifferent stage

During the indifferent stage the following structures develop from intermediate mesoderm:

- indifferent gonads;
- mesonephric (or Wolffian) ducts;
- paramesonephric (or Müllerian)ducts;
- and *urogenital sinus* (from endoderm).

Development of the internal genitalia: indifferent stage



Gonads: indifferent stage

- The gonads arise from two very different kinds of cells that originate in embryo:
- The *primordial germ cells* will form the *gametes* (spermatozoa and oocytes). These cells come from *ectoderm*.
- The *somatic cells* which surround the primordial germ cells and form the somatic gonadal blastema. These cells come from *mesoderm*.

Gonads: stage of differentiation

Up to the 6th week male and female gonads cannot be distinguished.

The testes differentiate themselves earlier than the ovaries namely in the course of the 7th week (44 days).
Responsible for this is the SRY gene of the Y chromosome, that induces the development of the testes through the activation of a series of further genes (sex-determining genetic factors and hormones).

Gonads: stage of differentiation

The differentiation of the **ovaries** happens later than that of the testes, taking place during the **8**th week.

Since females lack the Y chromosome, they have no SRY gene.



Descent of the testes

Between the 3rd month of pregnancy and its end the testes become transferred from the lumbar area into the future scrotum.

This transfer is due to a combination of **growth processes** and **hormonal influences**. The **gubernaculum testis** also plays a decisive role in this phenomenon.

Descent of the testes





Descent of the testes

The region, where the testes pass through the abdominal wall, is called the *inguinal canal*.

Between the 7th and 12th weeks the *gubernaculum shortens* and pulls the testes downwards.

Between the 3rd and 7th months the **testes** stay in the area of the inguinal canals so they can enter into them.

They reach the scrotum at roughly the time of the birth under the influence of the *androgen hormone*.

Displacement of the ovaries

The ovaries are also moved slightly from their location in the middle of the abdomen to the pelvis.

The influence of the *gubernaculum* in this process is not entirely clear.

Genital ducts and urogenital sinus: stage of differentiation

In males:

- The mesonephric duct (of Wolff) gives rise to the epididymis, ductus deferens, seminal vesicles, ejaculatory duct.
- The paramesonephric duct (of Müller) atrophies due the effect of the antimullerian hormone.
- The urogenital sinus gives rise to the prostate and bulbourethral glands (Cowper`s).

Genital ducts and urogenital sinus: stage of differentiation

In females:

- The mesonephric duct (of Wolff) atrophies.
- The paramesonephric duct (of Müller) gives rise to the **uterine tubes, uterus, vagina** (upper part).
- The urogenital sinus gives rise to the vagina (lower part), vestibule of vagina and vestibular glands.

Genital ducts and urogenital sinus: stage of differentiation





The external genitalia: indifferent stage

From the caudal eminence of the **ectoderm** develop the following structures:

- genital tubercle;
- genital (or urogenital) folds;
- genital (or labioscrotal) swellings.



The external genitalia: indifferent stage





The external genitalia: stage of differentiation

Under the effects of **androgen** in males:

- the genital tubercle becomes longer and forms the penis (corpora cavernosa);
- from the fused genital (or urogenital) folds the penile spongy body (corpus spongiosus) arises in the penis;
- the two genital swellings also fuse in the middle and form the scrotum.

The external genitalia: stage of differentiation

In females:

- the genital tubercle form the **clitoris**;
- the *urogenital folds* do not fuse and give rise to the *labia minora*;
- the genital swellings also do not fuse and give rise to the labia majora.

The external genitalia: stage of differentiation



Abnormalities of the male and female genitalia

- True hermaphroditism an individual possesses both testicular and ovarian tissues simultaneously as ovotestis.
- Pseudohermaphroditism an individual possesses male or female gonads with ambiguous external genitalia.

Abnormalities of the male and female genitalia

- Aphallia agenesis (absence) of penis or clitoris (L. phallus - penis or clitoris).
- Micropenis unusual small penis.
- Bifid penis or clitoris or diphallia two genital tubercles have been developed.
- Cryptorchidism (cryptos hidden, orchis testis) the testes remain in the abdominal cavity or somewhere on their way to the scrotum – most frequently in the inguinal canal (60% of the cases).
- Ectopia of testicles the testes take on an abnormal location due the deviant migration.

Cryptorchidism and ectopia of testis



Cryptorchidism

- The first treatment step consists in giving gonadotropic hormones with a success rate of 20 - 30%.
- If this remain unsuccessful the treatment consists of in a surgical intervention (*orchidopexy*). Here the testis is surgically brought down into the scrotum.

Abnormalities of the male and female genitalia

- **Testicular torsion** is connected with a congenital anomaly of the testicular fixation in the scrotum.
- Anorchism (anorchidism, anorchia) congenital absence of testicles.
- Monorchism (monorchidism) the condition of having one testis into the scrotum.
- Polyorchism (polyorchidism) presence of one or more supernumerary testes.
- **Hypospadias** the urinary meatus is located on the inferior side of the penis.
- **Epispadias** the urinary meatus is situated on the superior side of the penis.

Epispadias and hypospadias

External urethral

opening

Abnormalities of the male and female genitalia

- Supernumerary ovary an accessory (the third) ovary.
- Uterus didelphys double uterus (fusion of the Mullerian ducts fails to occur).
- Uterus bicornis a uterus that is more or less divided into two lateral horns as a result of imperfect union of the paramesonephric ducts.
- Uterus septus septate uterus (absent of resorption of the medial wall of two paramesonephric ducts).
- Absent perforation of the hymen can leads to the hematometrocolpos in adolescence.

Uterus didelphys, uterus bicornis, uterus septus

Male genital system

- Male internal genitalia:
- male gonads (testes or testicles);
- 2. spermatic ways (pathway of sperm);
- 3. accessory glands (prostate seminal vesicles, bulbourethral glands).
 - Male external genitalia:
- I. penis;
- 2. scrotum.

The testes are located in the scrotum. The **scrotum** regulates the temperature of the testes and maintains it at **35°** *C* (two degree below the body temperature). <u>Higher temperatures affect</u> <u>spermatogenesis</u>.

Temperature control is accomplished by the smooth muscles of scrotum (*cremaster* and *dartos muscles*) moving the testes closer to or further away from the abdomen dependent on the ambient temperature.

The testes perform two functions:

- produce sperm cells (spermatogenesis);
- **produce androgens** (primarily testosterone). The testis (pl. testes) is ovoid in shape and has:
- two **surfaces**: **medial** and **lateral**;
- two borders: anterior and posterior;
- two ends (poles or extremities): superior and inferior.

- The testis (L. testis, didymis, orchis) is covered by three tunics:
- **tunica vaginalis testis** consists of two layers, the visceral layer covers the testis;
- tunica albuginea is the middle tunic, it also forms the mediastinum of testis;
- tunica vasculosa is the inner tunic and it consists of blood vessels and connective tissue.
The male gonads (testes or testicles) – internal structure

From the mediastinum of testis a series of *fibrous septa* extend towards the tunica albuginea.

- These septa divide the testis into the *lobules* (250 300 lobules).
- Within each lobule there are 1 4 convoluted seminiferous tubules, which continuous with straight seminiferous tubules.
- These tubules open into a network called *rete testis* (in mediastinum of testis).
- Small *efferent ductules* connect the *rete testis* with head of epididymis.

The male gonads (testes or testicles) – internal structure





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The epididymis

Epididymis, an elongated structure connected to the posterior border of testis, consisting of:

- head (L. caput) (receives the spermatozoa via the efferent ductules);
- body (L. corpus);
- tail (L. cauda).

The body and tail contain a very convoluted duct – **duct** of epididymis (*ductus epididymis*), which continuous with ductus deferens.

The epididymis transports, stores and matures the spermatozoa between testes and ductus deferens.

The epididymis



The ductus deferens

- The **ductus deferens** (deferent duct, vas deferens) has 4 parts:
- scrotal part (ascends posterior to the testis and epididymis);
- funicular part (is the primary component of the spermatic cord = funiculus spermaticus);
- 3. *inguinal part* (penetrates the anterior abdominal wall via the inguinal canal);
- 4. pelvic part (passes along the lateral wall of the pelvis).
 It begins at the tail of the epididymis and ends by joining the duct of the seminal vesicle.



The ductus deferens





Male sterilization

The common method of the male sterilization is the **deferentectomy** (popularly called a *vasectomy*). The ductus deferens is cut and ligated.





The spermatic cord (L. funiculus spermaticus) is the cord-like structure that suspends the testis into the scrotum.
It runs from the <u>deep inguinal ring</u> down to the <u>testicle</u>.
It is formed by the **ductus deferens** (or vas deferens) and surrounding tissue.





It contains:

- ductus deferens (or vas deferens);
- arteries: testicular artery, deferential artery, cremasteric artery;
- pampiniform (venous) plexus;
- lymphatic vessels;
- nerves.

It is surrounded by:

- I. external spermatic fascia;
- 2. cremaster muscle and cremasteric fascia;
- 3. internal spermatic fascia.



The ejaculatory ducts

The *ejaculatory ducts* are tubes that arise by the union of the ducts of the seminal glands with the ductus deferentes (approximately 2 cm long). They open on the seminal colliculus (male urethra).

Pathway of sperm (spermatic ways)

The convoluted seminiferous tubules are the sites of **sperm production** (spermatogenesis).

The sperms travel through:

- straight seminiferous tubules;
- rete testis;
- efferent ductules;
- duct of epididymis;
- ductus deferens;
- ejaculatory duct;
- male urethra.

Pathway of sperm (spermatic ways)





The prostate

The **prostate** is the largest accessory gland of the male reproductive system.

Prostatic fluid, a thin, *milky fluid* provides approximately 20% of the volume of semen and plays a role in activating the sperms.

The seminal glands (or seminal vesicles)

Each seminal gland is an elongated structure (approximately 5 cm long).

The seminal glands do not store sperms, as their names implies. They secrete a thick **alkaline fluid** with **fructose** (an energy source for the sperms).

The duct of the seminal gland joins the ductus deferens to form the *ejaculatory duct*.



The bulbourethral glands

The **bulbourethral glands** (Cowper's glands) are small pea-size glands. Their **mucus-like secretion** enters the male urethra during sexual arousal.

The accessory glands





Penis

The main parts of penis are:

- root of the penis;
- body of the penis;
- glans penis (covered by foreskin, in circumcised men the foreskin is removed).

Internal structure. It is made up of three columns of tissue:

- two corpora cavernosa;
- one corpus spongiosum.



Scrotum

The scrotum houses the testicles.

- The following structure enclose the contents of the scrotum (from outside to inside):
- I. skin of the scrotum;
- 2. tunica dartos;
- 3. external spermatic fascia;
- 4. cremasteric fascia;
- **5.** cremaster muscle;
- 6. internal spermatic fascia;
- 7. tunica vaginalis testis (lamina parietalis and lamina visceralis) provides the serous cavity of the testis.

Female genital system

- Female internal genitalia:
- I. female gonads (ovaries);
- 2. uterine tubes;
- 3. uterus;
- 4. vagina.
 - Female external genitalia:
- I. vulva or pudendum;
- 2. vestibular glands.





Ovary

The **ovary** (ovarium, oophoron) is:

- I. an ovum-producing organ (ovogenesis);
- **2.** an endocrine gland.

It has:

- two **surfaces**: **medial** and **lateral**;
- two borders: mesovarian (anterior) and free (posterior);
- two ends (or extremities): tubal and uterine.



Ovary



Ovary – fixation apparatus

It is located in the peritoneal cavity, on the posterior surface of the *broad ligament of uterus* to which it is attached by the **mesovarium**.

The tubal extremity of the ovary is connected to the wall of the pelvic cavity via the **suspensory ligament of ovary** (lig. suspensorium ovarii).

The uterine extremity is attached to the uterus via the *ligament of ovary* (*lig. ovarii proprium*).

Ligaments of the ovary





Structure of the ovary

- The ovarian cortex consists of the ovarian follicles, corpus luteum, corpus albicans and stroma.
- The ovarian medulla contains blood vessels, lymphatics and nerves.



Structure of the ovary



The ovarian cycle (28 days)

The **ovarian cycle** has two phases:

- the *follicular phase* (the developing follicle produces the *oestrogen*);
- the *luteal phase* (the ruptured follicle transforms into the *corpus luteum*, which produces the *progesterone*).

These two phases are separated by the **ovulation** (the I4th day of cycle) – expulsion of an ovum from the ovary on spontaneous rupture of a mature (Graafian) follicle.

PS. The few days surrounding ovulation (from 10th to 18th of a 28 day cycle) constitute the most fertile phase.

Uterine tubes (salpinx, formerly called fallopian tubes)

There are 4 parts of the uterine tubes:

- uterine part (the short intramural segment of the tube);
- 2. isthmus (the narrowest part of the tube);
- ampulla (the widest and longest part of the tube);
- 4. *infundibulum* (the funnel-shaped distal end).

Uterine tube (or salpinx)



Uterine tubes (salpinx)

There are two orifices of the tubes:

- the uterine ostium (opens into the uterine cavity);
- the *abdominal ostium* (opens into the peritoneal cavity).

Ectopic tubal pregnancy

The uterine tubes provide the usual site of fertilization.

The blastocyst may implant in the mucosa of the uterine tube, producing an **ectopic tubal pregnancy**.



Uterus (or metra, hystera)

The uterus (or womb) is a pear-shaped, hollow muscular organ.

The adult uterus is usually **anteverted** (tipped anterosuperiorly to the axis of the vagina) and **anteflexed** (flexed or bent anteriorly to the cervix of uterus).



Uterus





Uterus

The uterus has two main parts:

- I. body of uterus;
- **2.** cervix of uterus.

The body is demarcated from the cervix by the *isthmus of uterus*.

Uterus




Uterus

The **body of the uterus** (superior 2/3 of the organ) has:

- I. fundus of uterus;
- 2. two *surfaces* (*vesical* and *intestinal*);
- 3. two **borders** (**right** and **left**).

The **cervix of the uterus** (inferior 1/3 of the organ) has two parts:

- I. supravaginal part;
- 2. vaginal part.

Uterus

Figure 27.15a The Uterus



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Uterus – structure of the walls

The wall of the uterus consists of the three coats, or layers:

- *perimetrium* (the outer, serous coat);
- myometrium (the middle coat of smooth muscles);
- endometrium (the inner, mucous coat).



Uterus – structure of the walls



Ligaments of the uterus

- The *round ligament of the uterus*;
- The **broad ligament of the uterus** (it has three parts: mesometrium, mesovarium, mesosalpinx);
- The transverse cervical (or cardinal) ligament;
- The **uterosacral ligament**.

The principal support of the uterus is the **pelvic diaphragm** (part of perineum).

Ligaments of the uterus





Ligaments of the uterus



Menstrual cycle (28 days)

The *menstrual cycle* is the monthly series of changes in the female's uterus. It takes an average of 28 days, but this can vary from 21 to 35 days.

There are three phases of the menstrual cycle:

- menses (or menstrual phase);
- proliferative phase (or postmenstrual phase);
- secretory phase (or premenstrual phase).

Ovarian and menstrual cycles





Vagina (colpos)

The **vagina**, a musculomembranous tube, extends from the cervix of the uterus to the vestibule (the cleft between two labia minora).

The vagina is usually collapsed so that its *anterior* and *posterior walls* are in contact, except its superior end (superior wall).

The **vaginal fornix** (superior wall), the recess around the cervix, has *anterior*, *posterior and lateral parts*.

Vulva (or pudendum)

It includes:

- mons pubis;
- Iabia majora and cleft between them called pudendal cleft:
- Iabia minora and area between them called vestibule of vagina (or vulval vestibule);
- clitoris (homologue of corpora cavernosa penis) and bulb of vestibule (homologue of corpus spongiosus);
- greater (Bartholin`s) and lesser vestibular glands.

Vulva (or external genitalia)





Genital systems





Female urethra

- It is a short fibromuscular tube (3 5 cm).
- It lies anterior to the vagina.
- It begins at the neck of the urinary bladder by the internal urethral orifice (or internal urinary meatus).
- It opens into the vestibule of vagina by the external urethral orifice (or external urinary meatus).
- It has two parts:
- intramural (or pelvic) part (located in the pelvic cavity, at the bladder neck);
- 2. *perineal part* (which pierces the urogenital diaphragm of perineum).

Male urethra

- It is a fibromuscular tube that begins at the neck of the urinary bladder (*internal urethral orifice* or *meatus*) and ends at the level of the glands penis (*external urethral orifice* or *meatus*).
- It is significantly longer in males than females (20 cm).
- It consists of four parts:
- I. intramural (or preprostatic) part (0.5 cm);
- prostatic part (3 cm);
- 3. *membranous* (or intermediate) *part* (1 cm);
- spongy part (16 cm) (with bulbar part and penile part of spongy urethra).

Male urethra

Male urethra can be divided in anterior and posterior portions.

- The **posterior urethra** is composed of the preprostatic, prostatic and membranous urethra.
- The anterior urethra is composed of the spongy urethra (that comprises the bulbar and penile parts).
 It also can be divided in:
- fixed portion, which comprises the posterior urethra and the bulbar urethra;
- *mobile portion*, which comprises only the penile urethra.

Male urethra

Male urethra has 2 curvatures:

- I. subpubic curvature (or angle);
- 2. prepubic curvature (or angle).

It has 3 constictions:

- I. external urethral orifice (or external urinary meatus);
- 2. membranous part;
- *internal urethral orifice* (or *internal urinary meatus*).It has 3 dilatations:
- I. at the level of glans penis (navicular fossa);
- 2. at the level of *bulbus penis* (intrabulbar fossa);
- 3. prostatic part.

