EMBRYOLOGY Foundation block



Second lecture Fertilization and Implantation

By:

BASIL ALSUWAINE

Asma Al-Mohizea

Thekra Al-Olayyan

Fertilization:

- Fusion of male sperm and female oocyte to form zygote.
- It begins with contact between sperm and ovum where chemical signals from the oocyte attracts sperms. Oocyte: cannot be fertilized after 24 hours ,Sperm: does not survive for more than 48 hours.
- Ends up with intermingling of maternal and paternal chromosomes.
- Site: It usually occurs in the ampulla of uterine tube Ampulla (the widest part of the uterine tube) or it may occur in another part of the tube. Never occurs in the uterine cavity.

Stages:

1) Passage of sperm through corona radiata: The sperms passes first through cells of corona radiata by the effect of hyaluronidase enzyme + the movement of its tail.

2)Penetration of Zona Pellucida: Acrosomal enzymes allow only one sperm to create a tract through the zona pellucida.

- **Zonal reaction:** it is a change in properties of zona pellucida that makes it **impermeable** to *other* sperms after fertilization.
- 3) Fusion of plasma membranes of the ovum and sperm: Sperm content enters into the oocyte. Sperm undergoes morphological changes.
- 4) Completion of 2nd mitotic division and formation of pronucleus.
- 5) Formation of male pronucleus.
- 6) Fusion of the two pronuclei.

Results:

A)The diploid number of chromosomes is restored.

B)Embryo's sex is determined at the time of fertilization depending on the type of sperm from the father (X or Y).

C) Cleavage initiation.

- **Cleavage:** Repeated mitotic divisions of the zygote. Begins 30 hours after fertilization. During cleavage, zygote is still within the zona pellucida. Normally occurs in the uterine tube with rapid increase in the number of the cells. Resulting in smaller embryonic cells are now called <u>*Blastomeres*</u>.
- Zygote is genetically unique. This is because of the new combination formed. This biparental inheritance leads to genetic variation.
- After the 8 cell stage, cells are compactly arranged (compaction).
- Spherical Morula (12-32 blastomeres) is formed **3 days** after fertilization.
- After the 5th day of fertilization zona pellucida degenerates.
 - Blastocyst stage: Morula develops into blastocyst with a (1)blastocystic cavity (blastocele) + (2)outer cell layer (Trophoblast) and (3) inner cell layer mass (embryoblast) or the embryonic pole.
- It is nourished by the secretions of the uterine wall. Now it is ready for implantation.



IMPLANTATION:

- It occurs at 6th day till 12th day in the posterior wall of the uterus, near the fundus. Blastocyst (usually from the embryonic pole)penetrates endometrium using proteolytic enzyme. It is implanted in the superficial compact layer of the endometrium.
- 7th day: Now the T*rophoblast* is differentiated into 2 layers:

a) <u>Cytotrophblast</u>, inner layer, mitotically active.

B)<u>Syncytiotrophoblast</u> (outer multinucleated mass, with indistinct cell boundary) It **erodes** the endothelial lining of the maternal capillaries which are known as sinusoids with finger-like processes. At day 12, the defect in the endometrial epithelium is filled by a closing plug (a blood clot).

- Blood-filled Lacunae appears in the Syncytiotrophoblast which communicate forming a network by the <u>10th or 11th day</u>. Now blood of maternal capillaries reaches the lacunae so *Primitive uteroplacental circulation* is stablished by 11th or 12th day.
 - *Endometrial cells* undergo apoptosis (programmed cell death)
 - **Implantation** is detected ultra sound & hCG secreted by the Syncytiotrophoblast about the <u>end</u> of 2nd week.

Possible implantation sites and corresponding condition:

- Normally occurs in *posterior wall* of **endometrium of uterus**.
- Placenta Praevia: implantation occurs in the lower uterine segment.
- Extrauterine(Ectopic): ectopic pregnancy in (ovary-abdomen-cervical).
 95% to 97% occurs in the uterine tube especially in the ampulla and isthmus.
- Early pregnancy factor:
 - a) An immunosuppressant protein.
 - b) Secreted by trophoblast cells.
 - C) Appears in the maternal serum within 24-48 hours.

- It is the basis of EPT in the first 10 days of development.
- On the graph below:
- Normal site (X)
- The approximate order of pregnancy of ectopic implantations in indicated alphabetically (A, most common, H, least common).
 A to F, Tubal pregnancies. G, Abdominal pregnancy. H, Ovarian pregnancy. Tubal pregnancies are the most common type of ectopic pregnancy. Although appropriately included with uterine pregnancy site,

a cervical pregnancy is often considered to be an ectopic pregnancy.



Check point! Can you:
Define terms "fertilization" and "implantation"?
Describe phases and outcome of fertilization?
Describe cleavage and iat which stage implantation occures?
Define the normal and abnormal sites for implantation?

	,		
	•Where does fertilization occur ? Ampulla of the uterine tube.		
•	•Which one of the following is the result of fertilization ? Initiation of cleavage.	l	
•	· ·		
	•Where does implantation occur? Posterior wall of the body of uterus.		
	•Implantation begins ?6 days after fertilization.		
	• • • • • • • • • • • • • • • • • • •		
•			
		•	
	•Implantation happens at which stage? Blastocyst.		
	•Which cell layer is concerned with implantation? Syncytiotrophoblast.		

 Timeline:

 Fertilization & Implantation

 30 hours - Cleavage

 3rd day - Morula

 5th day - Morula

 5th day - ZP degeneration

 6th day - Implantation

 7th day - Implantation

 7th day - Trophoblast differentiated

 8th day - The blastocyst is embedded in the compact layer of the endometrium.

 12th day - Uteroplacental circulation formed

 13th day - Proliferation of Cytotrophblast cells

 14th day - HCG detection