

Development of Reproductive System

Embryology

Sex Differentiation

- Genetically, with fertilization:

(Y) sperm → male ... (X) sperm → female

- (Y) chromosome has SRY gene $\xrightarrow{\text{encodes}}$ **TDF**

TDF causes the gonad to differentiate into testis

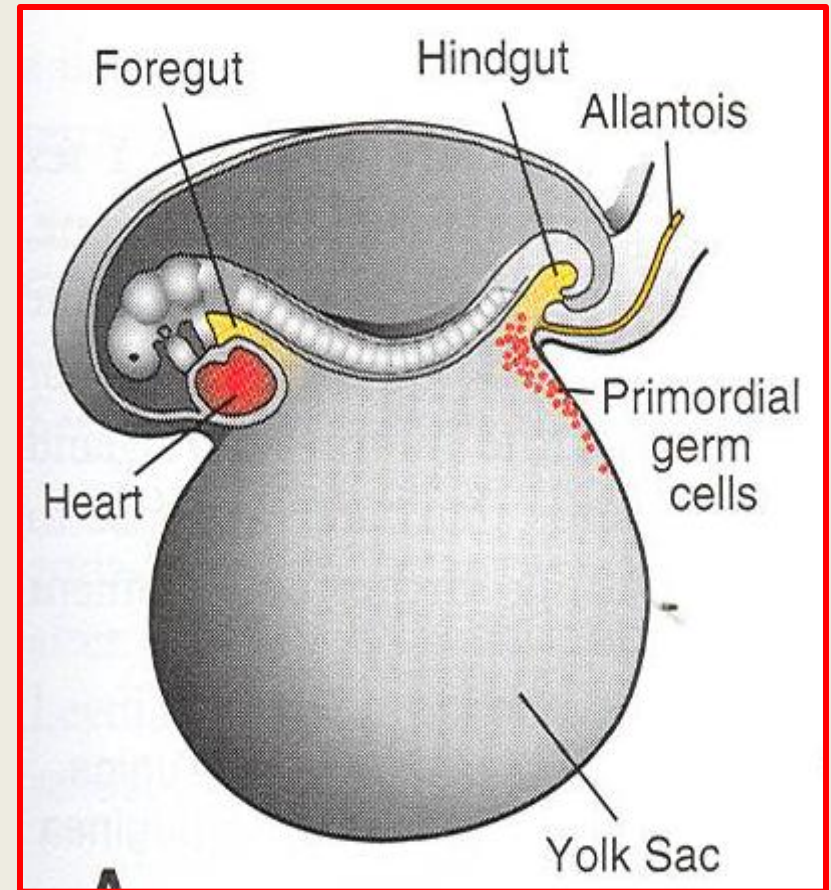
- Ductal system and ext. genitalia differentiate under hormonal influence (Testosterone & Estrogen)

Indifferent Gonad

- *is Derived from:*
- Mesothelium (mesodermal epithelium) lining the posterior abdominal wall.
- Mesenchyme (embryonic connective tissue).
- Primordial Germ cells.

Primordial Germ Cells

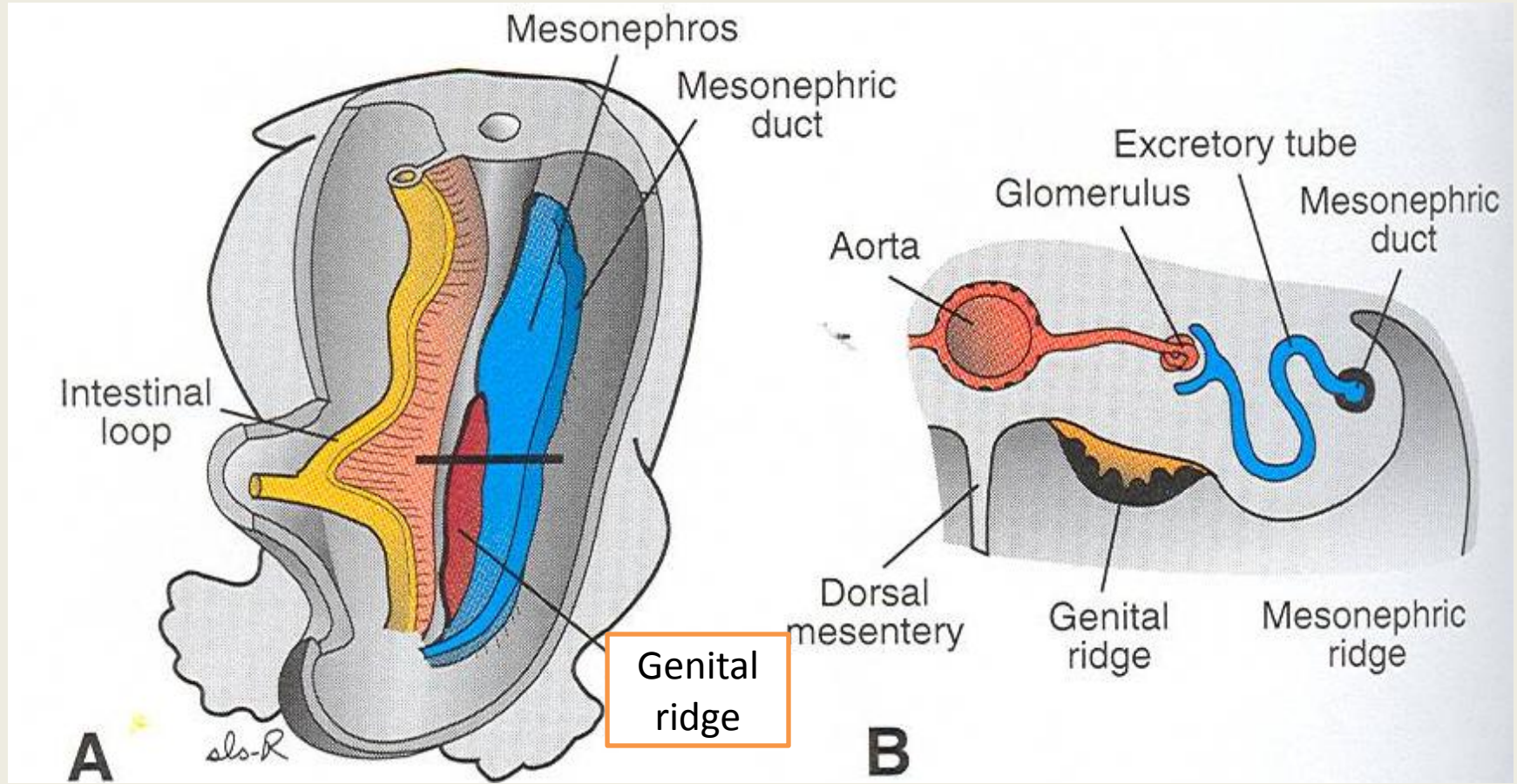
- Appear early in the **4th week**
- among the Endodermal cells in the wall of the yolk sac close to the Allantois.
- The primordial germ cells have an Inductive Influence on the differentiation of the gonad into ovary or testis



Genital (Gonadal) Ridge

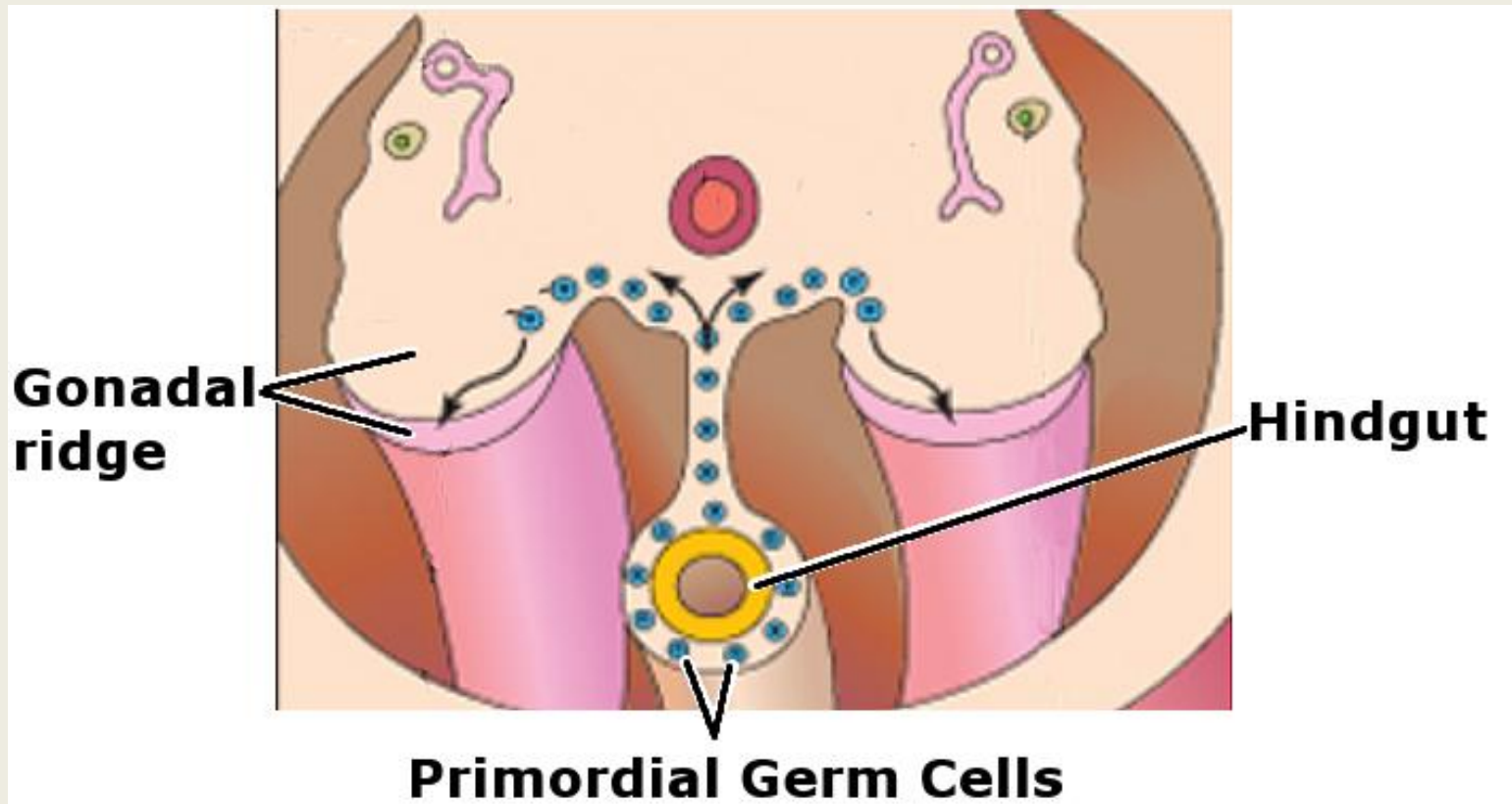
- It appears during the *5th week*
- as a pair of longitudinal ridges, on the medial side of the **Mesonephros**.
- They are formed by proliferation of (Mesothelium) and condensation of underlying Mesenchyme. (epithelium + C.T.)

Genital (Gonadal) Ridge



Primitive (Primary) Sex Cords

- *In the 6th week*, primordial germ cells migrate along the dorsal mesentery of the hind gut to invade the gonadal ridge which result in the formation of Primary Sex Cords.
- Primary sex cords = indifferent gonad
= mesothelium + embryonic mesenchyme
+ primordial germ cells



Gonadal Differentiation

- **Gonads acquire male or female morphological characteristics about the *7th week* of development.**

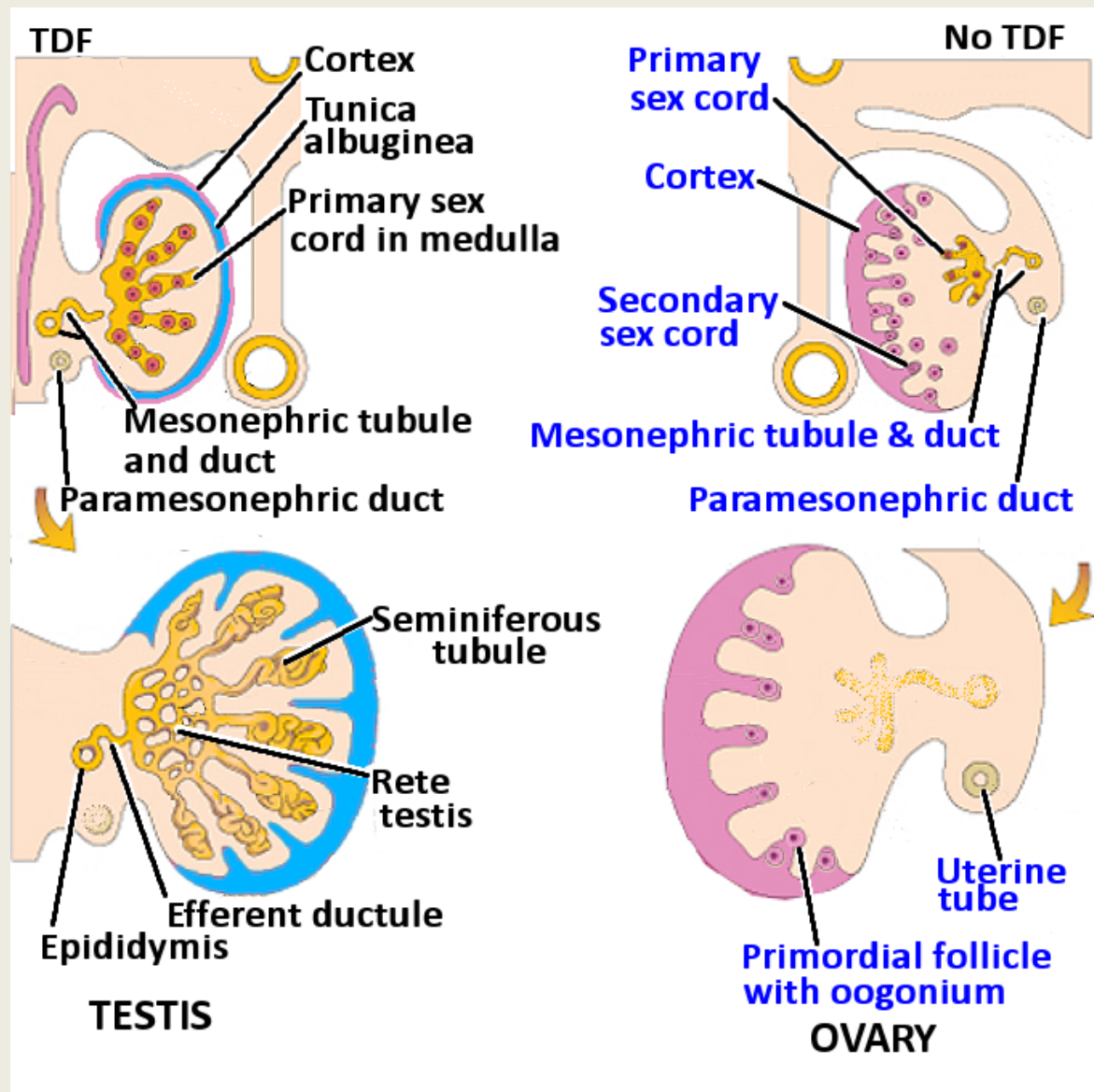
Indifferent Gonad

- *Consists of*
 - *External Cortex*
 - *Internal Medulla.*
- *Embryos with XY Sex Chromosomes:*
- *Medulla differentiates into Testis and the Cortex Regresses.*
- *Embryos with XX Sex Chromosomes:*
- *Cortex differentiates into Ovary and the Medulla Regresses.*

10th week

- Y → medulla develop & cortex regress
→ thick T.albugenia
- X → cortex develop & medulla regress
→ no T.albugenia

T
D
F



Male System

Development of Testes

- *Primordial Germ Cells → Spermatogonia*
- *Surface Epithelium → Sertoli cells*
- *Mesenchyme → interstitial cells of leydig*
⇒ *Secrete by the 8th Week Androgenic Hormones*

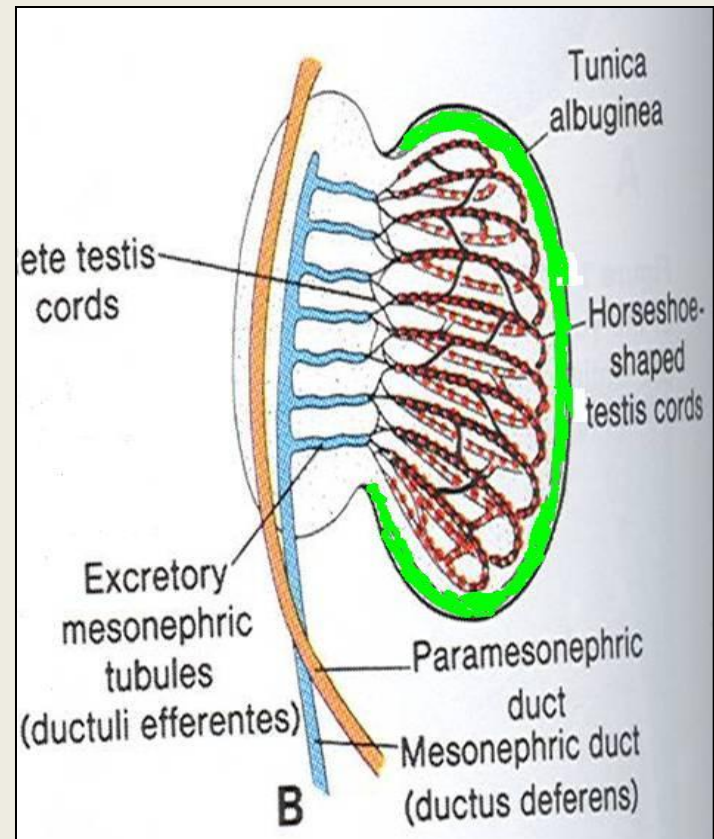
Development of Testes

- At Fourth Month :

The cords become Horse Shoe Shaped.

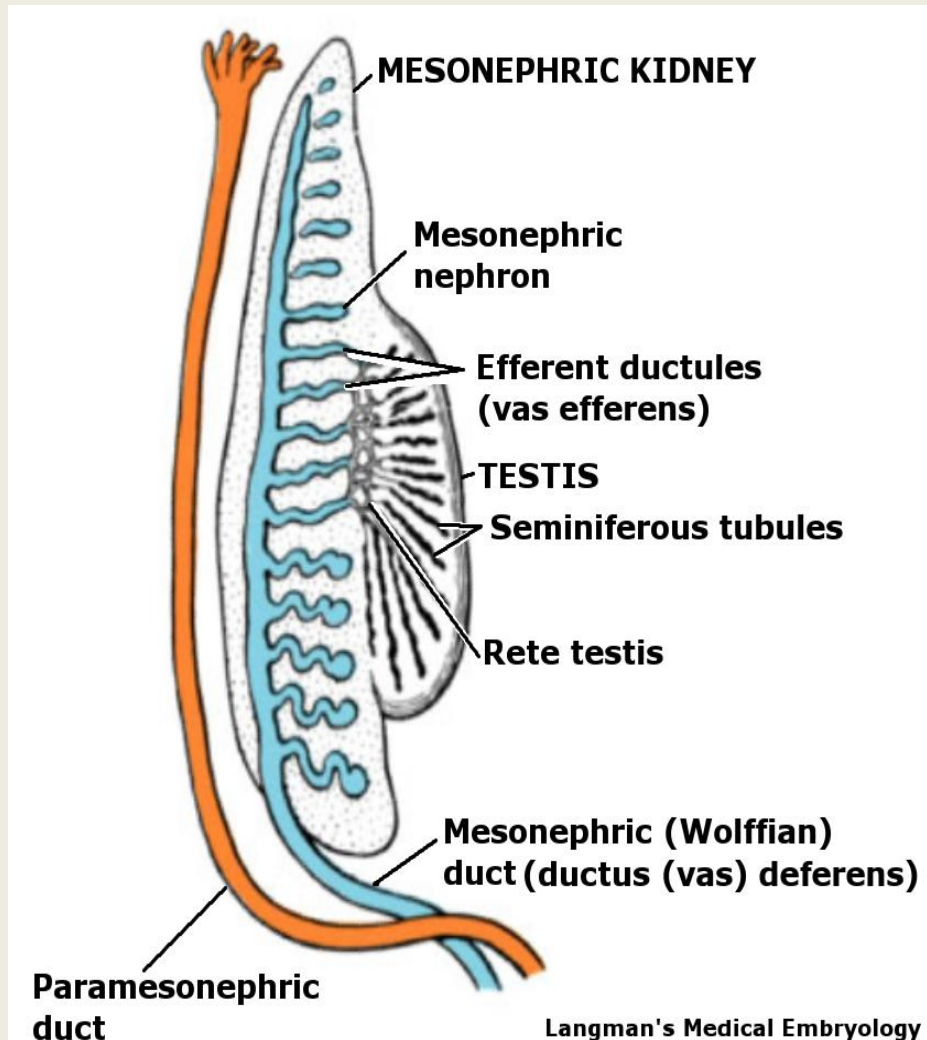
- They Develop into :

- *Seminiferous Tubules.*
- *Rete Testis.*



Maturation of the Testis

- **Surface epithelium** is flattened to form **mesothelium** on the external surface of the adult testis.
- **Seminiferous Cords** acquire a Lumen and become **Tubules**.
- **Rete Testis** canalized and Joined Seminiferous Tubules.
- **Mesonephric Tubules (Efferent Ductules)**(15 –20) link the rete testis to **Mesonephric Duct**.



Genital Ducts

- Indifferent stage: 4th – 5th week, two pair of ducts:

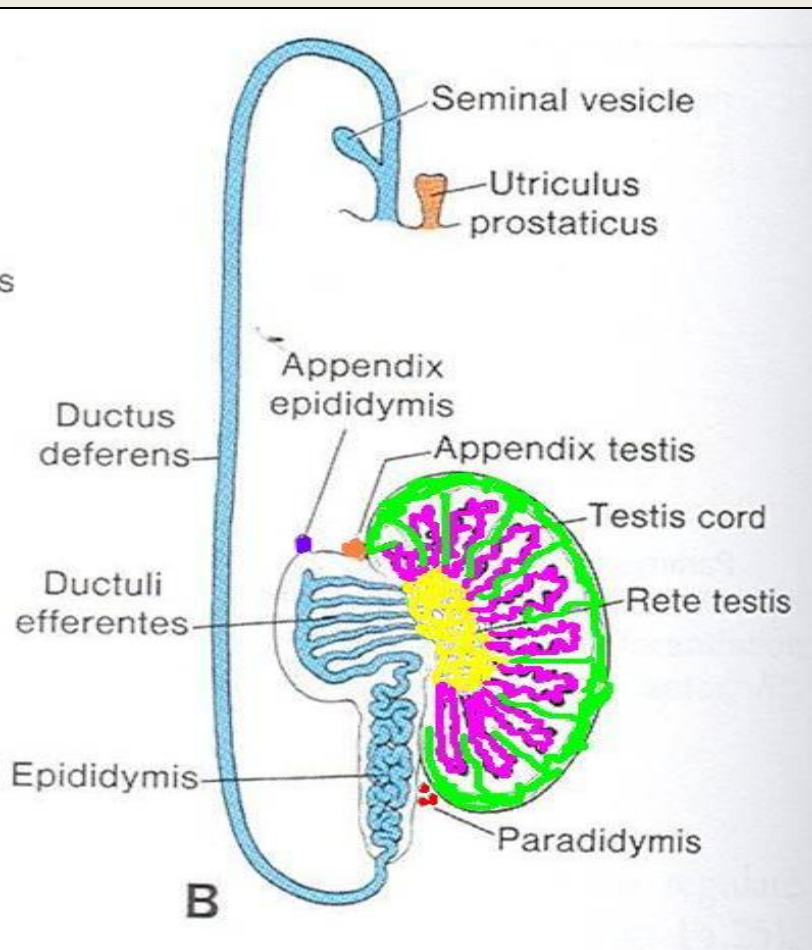
**1. Mesonephric
(Wolffian) Ducts:**
**Important for the
Development of Male
Genital System.**

**2. Paramesonephric
(Mullerian) Ducts:**
**Important for the
Development of Female
Genital System.**

Paramesonephric Ducts

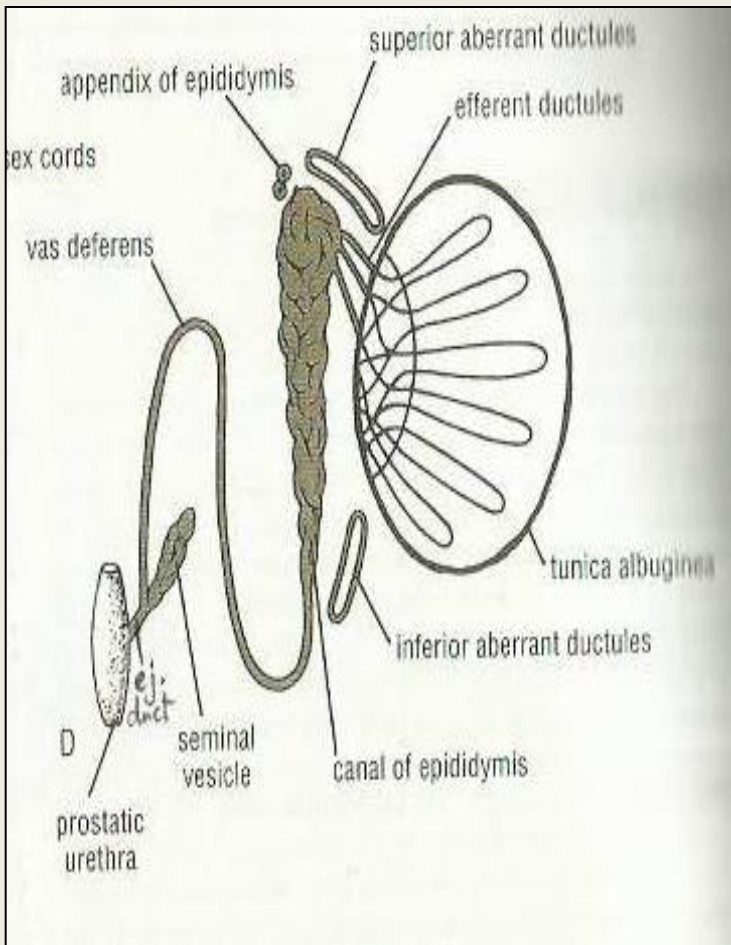
- *They Disappear by the effect of mullerian inhibiting substance (MIS) produced by Sertoli cells of the Testes.*
- *Their Remnant is Appendix of Testis*

Mesonephric Ducts



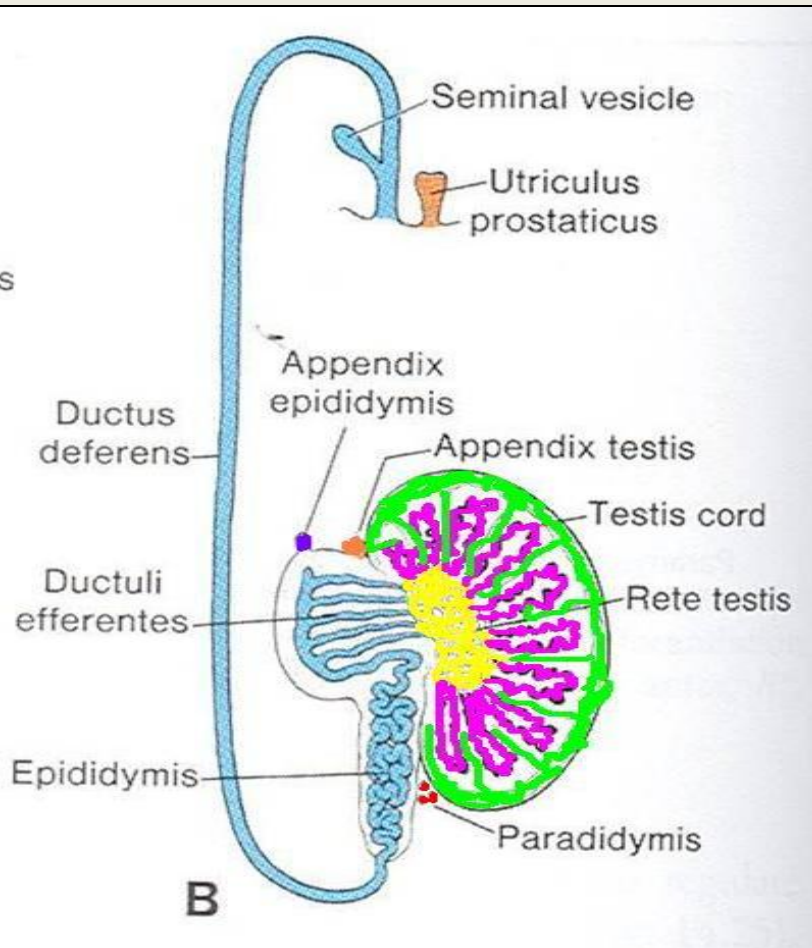
- ***Testosterone Differentiates Mesonephric (Wolffian) duct into :***
 - ***1. Epididymis :***
 - ***Proximal Highly Convoluted part of the duct.***
 - ***2. Ductus Deferens :***
 - ***The part of the duct Distal to the Epididymis.***

MESONEPHRIC DUCTS (Cont.)



- **3. Seminal Vesicles :**
 - **Lateral Outgrowth from the Caudal End of the mesonephric duct.**
- **4. Ejaculatory Duct :**
 - ***The part of the Mesonephric duct that lies Between the Duct of Seminal Vesicle and the Urethra.***

Embryologic Remnants



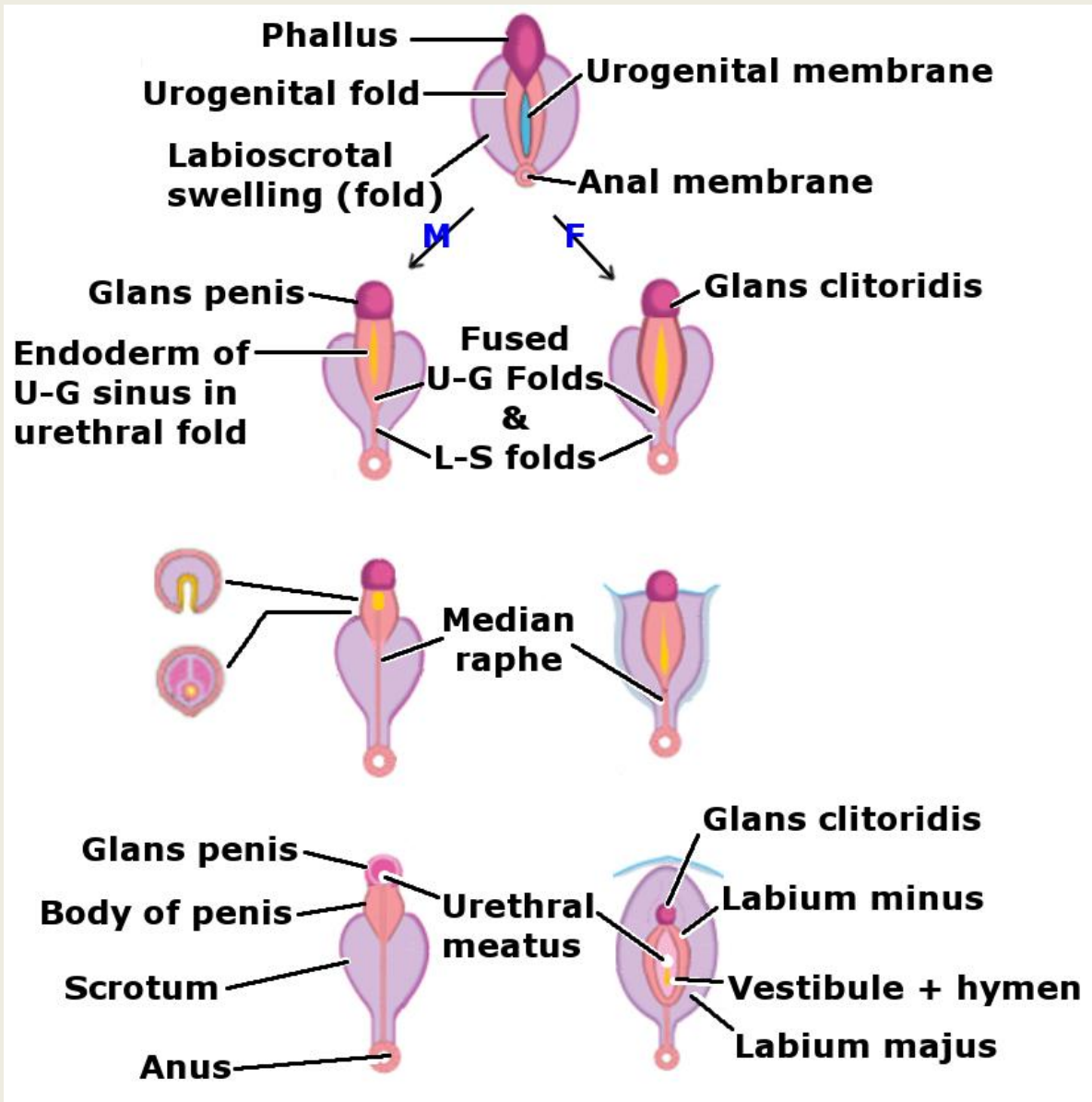
- **1. Appendix of Epididymis:**
 - **Remnants of mesonephric duct.**
 - **Lies at cranial pole.**
- **2. Paradidymis**
 - **Remnants of Tubules which do not join the Rete Testis.**
 - **Lies at the Caudal Pole of the Testis.**
- **Appendix of Testis.**
 - **Remenant of paramesonephric duct**

Glands

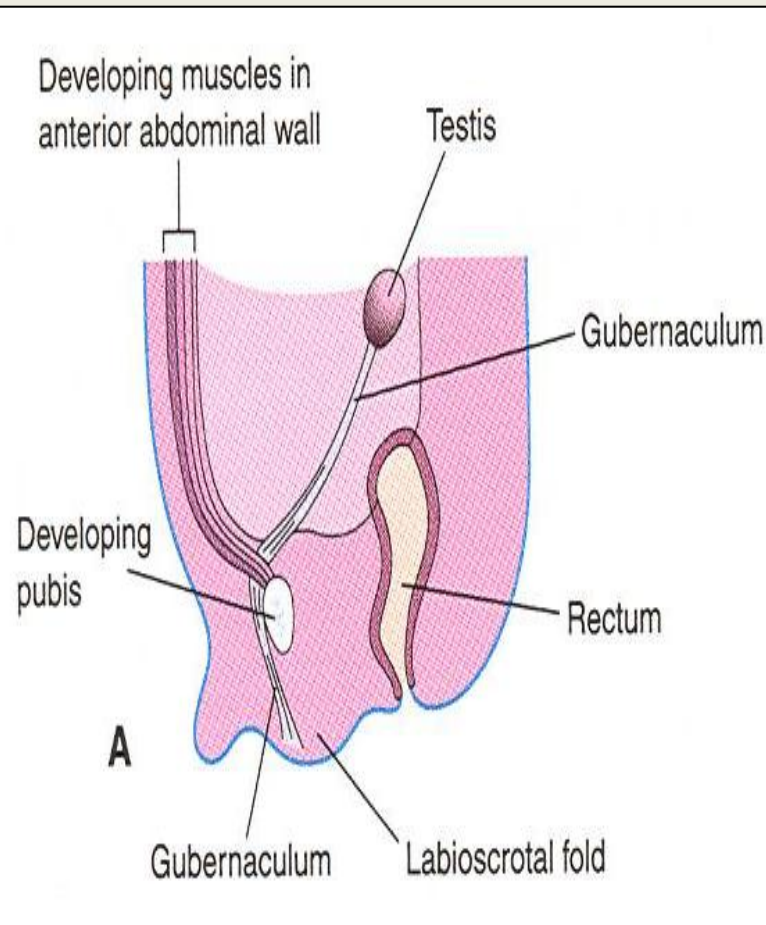
- **Prostate:** develop from multiple **endodermal** outgrowths from **prostatic urethra**.
- **Bulbourethral gland:** **endoderm** of **spongy urethra**
- Adjacent **Mesenchyme** will form :
Stroma and Smooth Muscle of the Glands.

Development Of External Genitalia

- It is stimulated by testosterone, and it is fully differentiated at 12th w.
- **It passes through 2 stages :**
- **Indifferent stage :**
- Genital tubercle develops from **mesenchyme** at the cranial end of cloacal membrane forming **the Phallus.**
- 2 inner urogenital folds develop.
- 2 outer labioscrotal folds develop.
- **Differentiation stage :**
- The phallus enlarges to form penis.
- The 2 urogenital folds fuse forming **Penile (spongy) urethra.**
- The 2 labioscrotal folds fuse to form **Scrotum.**



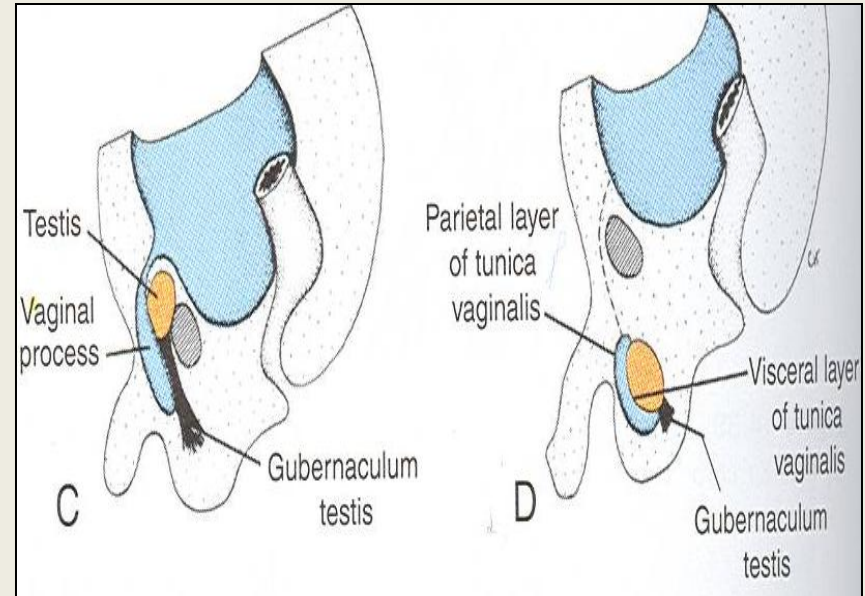
Inguinal Canal



- It is the pathway for the descend of the testis from the intra-abdominal position to the scrotum.
- A band of mesenchyme (**Gubernaculum**) extends from the inferior pole of the gonad to the **labioscrotal swelling**.
- This ligament passes obliquely through the site of the future inguinal canal.

Descent Of Testes

- Begins during the **26th week**
- It takes **(2 -3) days**.
- About (97%) of Full Term New Born Boys have Both Testes in the Scrotum.
- Within the scrotum, the testis projects into the distal end of **the processus vaginalis**.
- During the intrauterine life, the connecting stalk of process normally obliterates, isolating the **tunica vaginalis**.



Causes Of Descent

- ***(1) Stimulating effect by Androgens produced by the Fetal Testes.***
- ***(2) Enlargement of the Testes and Atrophy of the Mesonephric Kidney.***
- ***(3) Atrophy of the Paramesonephric Ducts.***
- ***(4) Processus Vaginalis.***
- ***An Evagination of Peritoneum.***
- ***It herniates through the abdominal wall along the path formed by gubernaculum.***

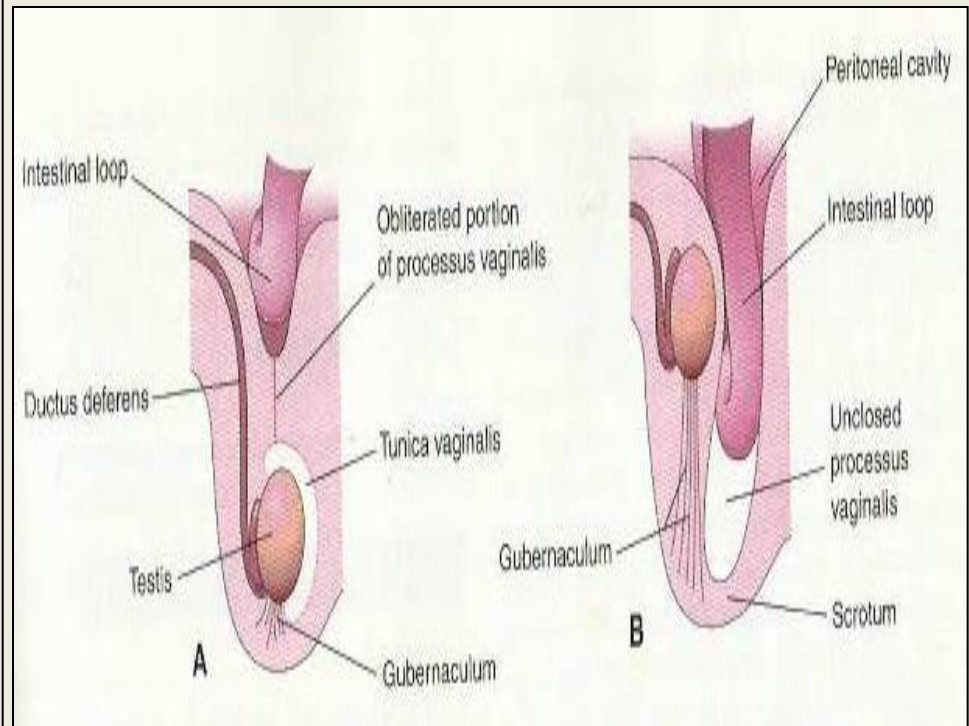
Cryptorchidism

- **Undescended Testis :**
- 30% of Premature and in 3 - 4 % of Full Term Males.
- It can be Unilateral or Bilateral.
- The cause is not well known but a Deficiency of **Androgen production** by the Fetal Testes is an important factor.
- **Common Sites :**
- **The Abdominal Cavity.**
- **Usually Along the path of the Testes in the Inguinal Canal.**
- **Complications :**
- **1. Sterility In Bilateral Undescended Testes.**
- **2. Testicular Cancer (20-44%).**

Congenital Inguinal Hernia

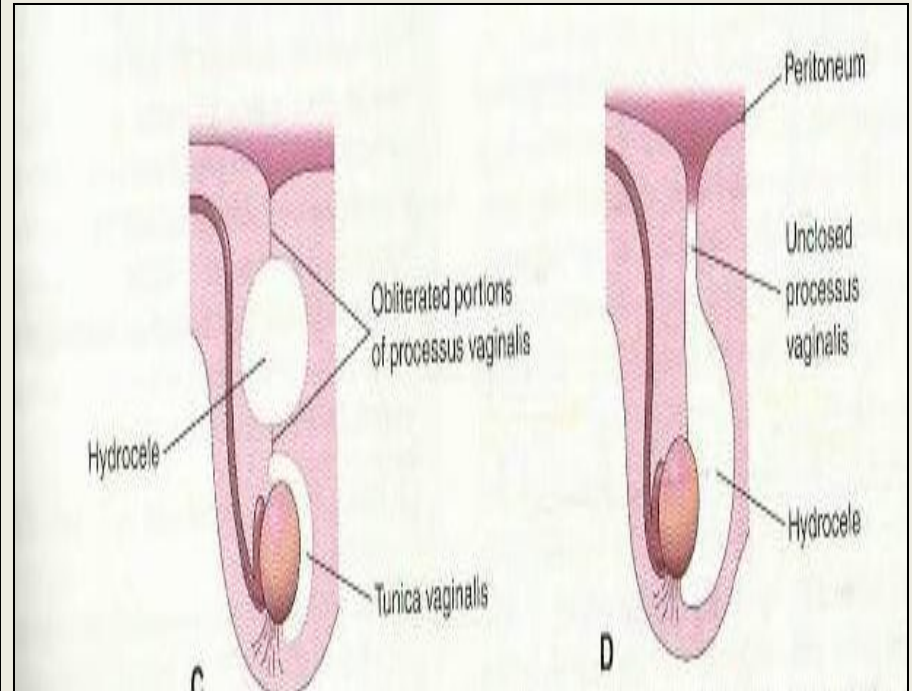
- **The processus vaginalis** remains in open communication with the peritoneal cavity.
- A loop of intestine may herniate through it into the scrotum.

A (incomplete) & B (complete).



Hydrocele

- If the middle part of the processus vaginalis remains open, fluid may accumulate forming a **hydrocele of spermatic cord (C)**.
- If the abdominal end of processus vaginalis remains open but is too small to permit herniation of intestine. Peritoneal fluid passes into patent processus vaginalis forming a **hydrocele of testis(D)**.



Female System

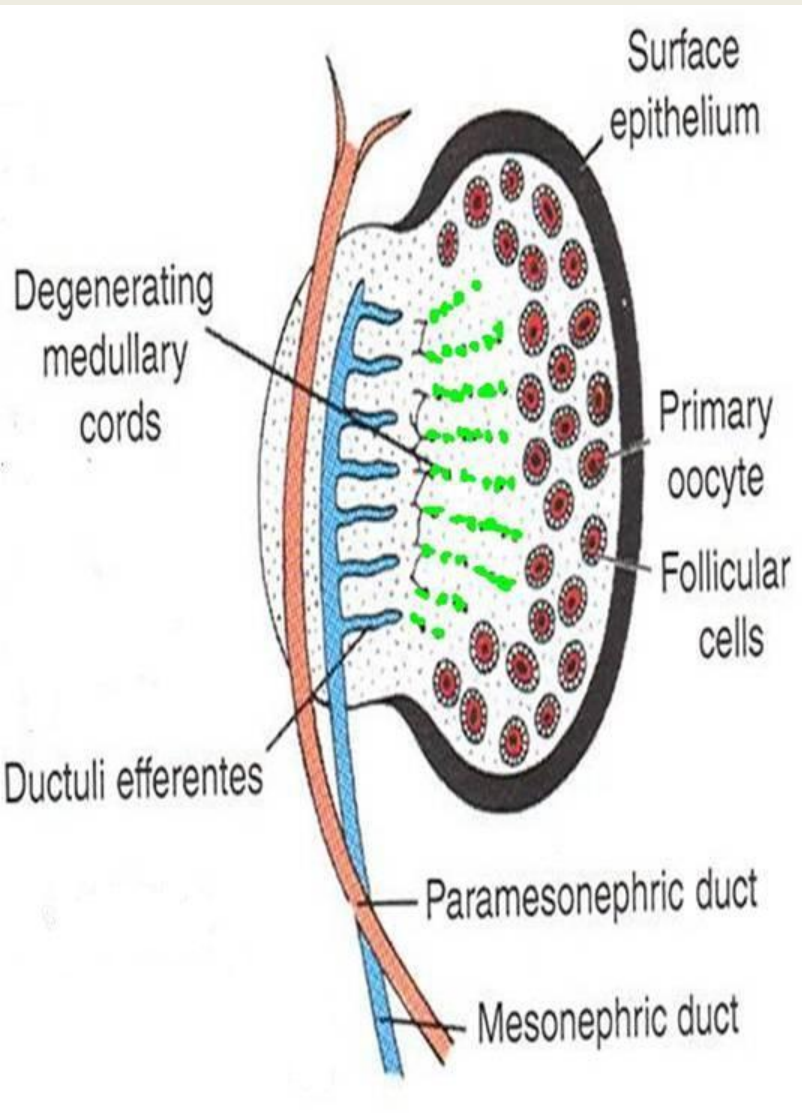
Review

- 4th week:
- 5th week:
- 6th week:
- 7th week:
- 10th week:

Differentiation of the Ovary (10th week)

- The Primary sex cords dissociate into irregular cell clusters (Rete ovarii).
- Which extend into the Medulla and form (Medullary Cords)
- Both the medullary cords and rete ovarii degenerate and disappear.
- Cortical Cords: [secondary sex cords]
- Formed from proliferating surface epithelium.
- They penetrate the mesenchyme.

Primary Oocytes

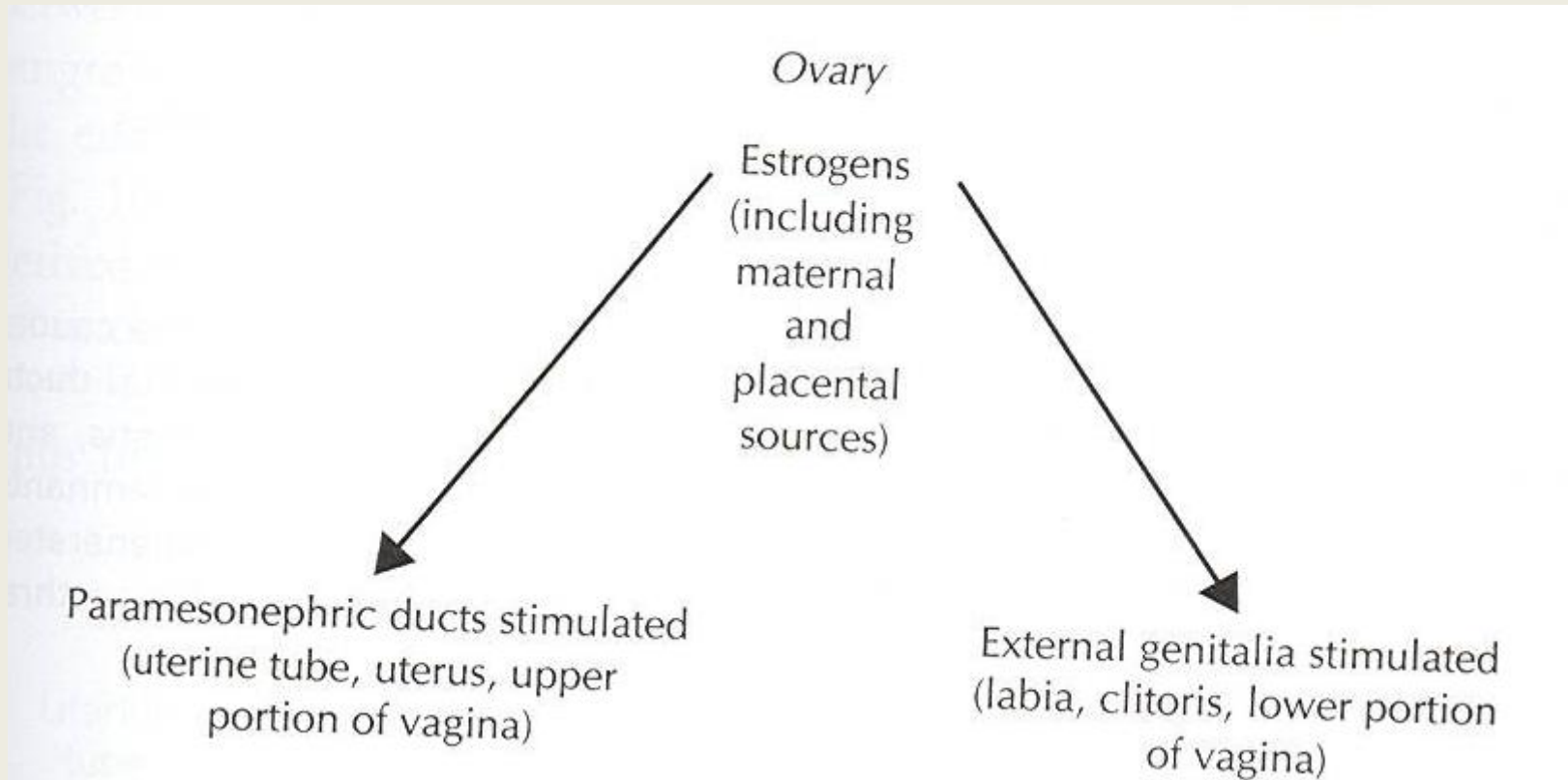


- *Isolated cell clusters.*
- *Formed in the 4th month (16 weeks)*
- *From **splitting of secondary sex cords.***
- *They contain **oogonia** (derived from the **primitive germ cells**).*
- *They are surrounded by **follicular cells** (derived from the **sex cords**).*
- *Their number increases up to thousands by active mitosis of oogonia.*

Changes of the Ovary After Birth

- Surface Epithelium:
- *Flattened into a single layer and Separated from follicles in the cortex by A thin tunica albuginea.*
- No new oogonia are formed
- *The ovaries descend from the posterior abdominal wall into the pelvis; just inferior to the pelvic brim.*

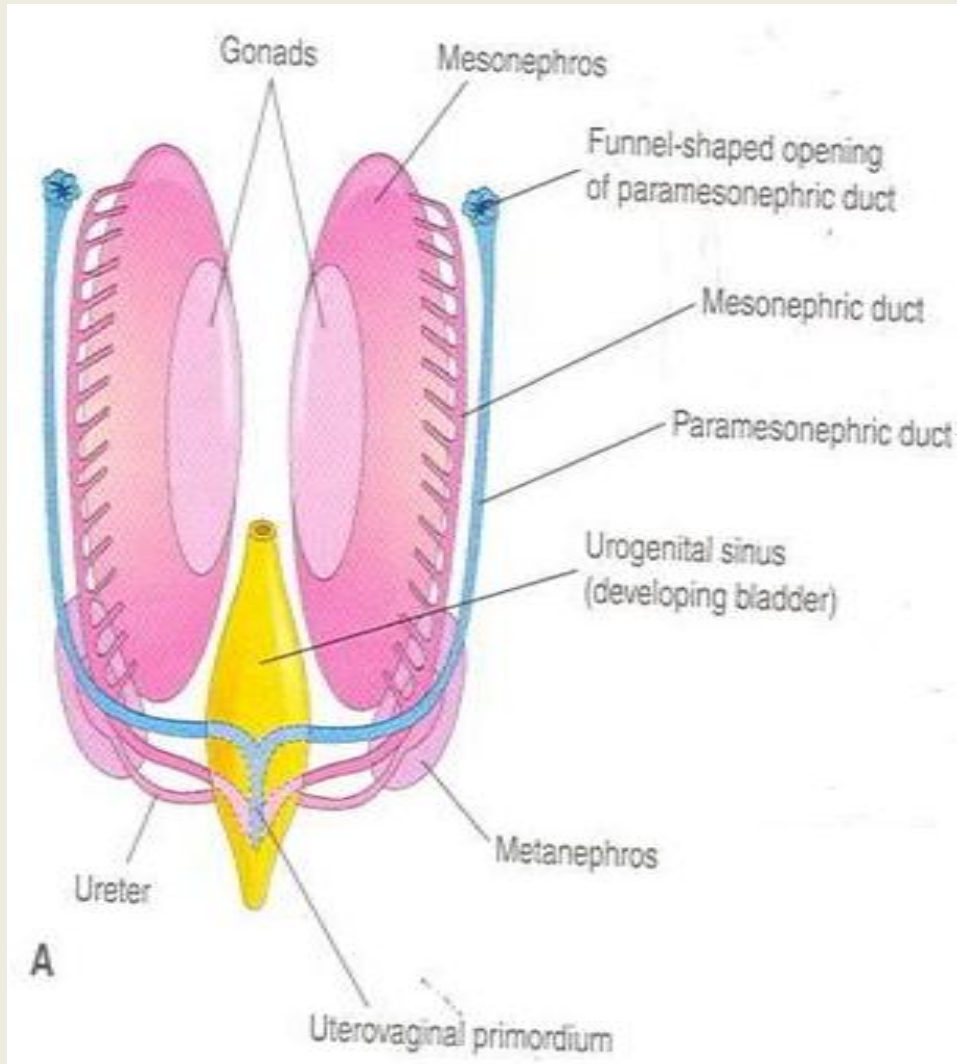
Internal Genital Organs



Paramesonephric Ducts

- Absence of **Mullerian Inhibiting Substance** (MIS)
→ Paramesonephric ducts *are formed from longitudinal invagination of epithelium lateral to the mesonephroi.*

Paramesonephric Ducts



- **Cranially**; their funnel shaped ends open into the peritoneal cavity.
- **Caudally**; they run lateral to the mesonephric ducts, crossing them **ventrally**.
- *They descend caudo medially and approach each other in the median plane.*
- *They form the y-shaped Uterovaginal Primordium:*
- *It opens in the dorsal wall of the Urogenital Sinus (developing urinary bladder)*

Derivatives Of Paramesonephric Ducts

- *Uterine Tubes*
 - *from the cranial unfused parts of the ducts.*

 - *Uterus* (body and cervix)
 - *Superior* portion of the *vagina*.
- } *UteroVaginal Primordium*
- *lower portion of vagina* from the *Urogenital sinus*.

Development of Vagina

- Upper part from Urovaginal Primmordium
- Lower part:
- ***The site of enterance of the paramesonephric ducts to the urogenital sinus produces two solid evaginations (SinoVaginal Bulbs); they grow out from the pelvic part of the sinus.***
- ***The bulbs proliferate and fuse to form a solid Vaginal Plate.***
- ***The Proliferation continues and it increases the distance between the urogenital sinus and the uterus.***

Development of Vagina

- *The central cells of the vaginal plate break down to form the lumen of the vagina.
[canalization]*
- *The lining of the entire vagina is derived from the vaginal plate.*

Summary of Female Development

OVARY

Urogenital sinus

Mullerian ducts

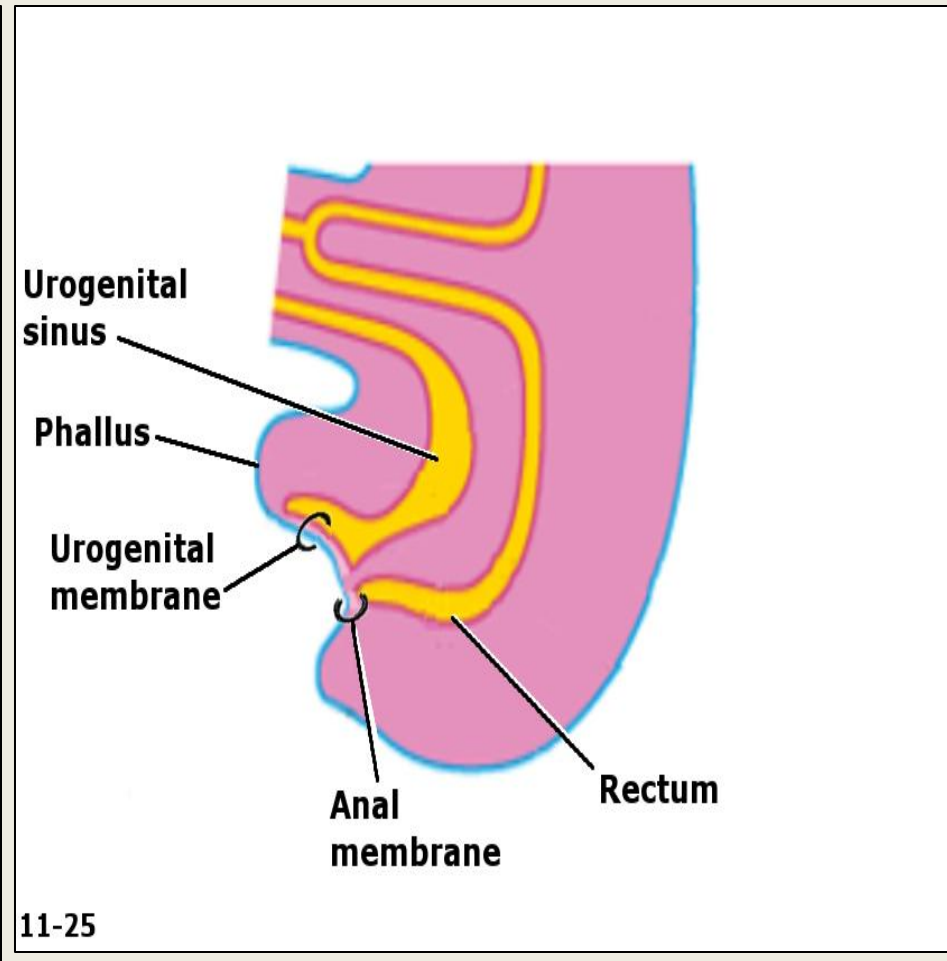
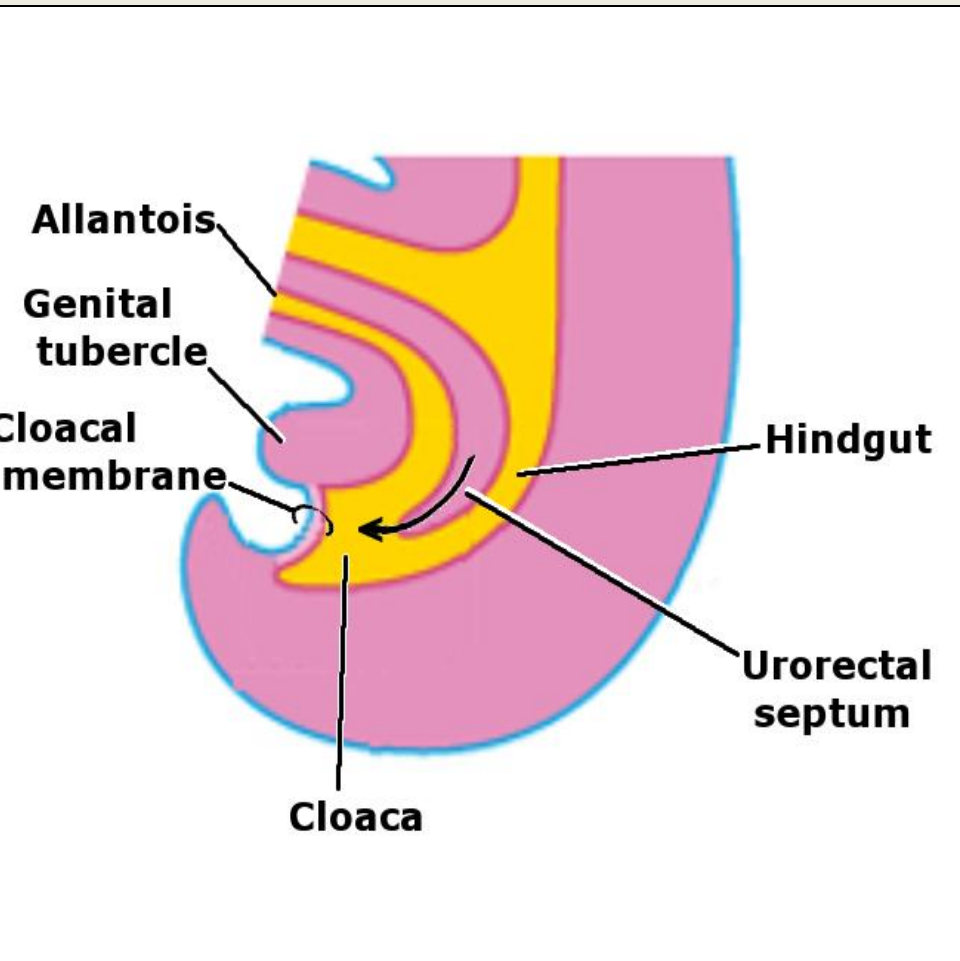
Female external genitalia
· Lower part of vagina

Absence of androgen exposure

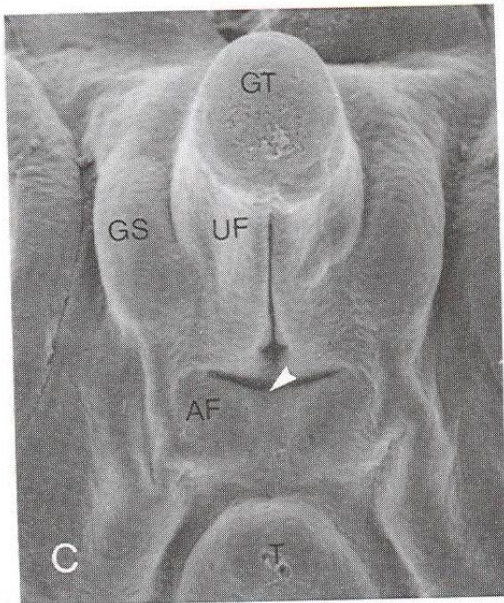
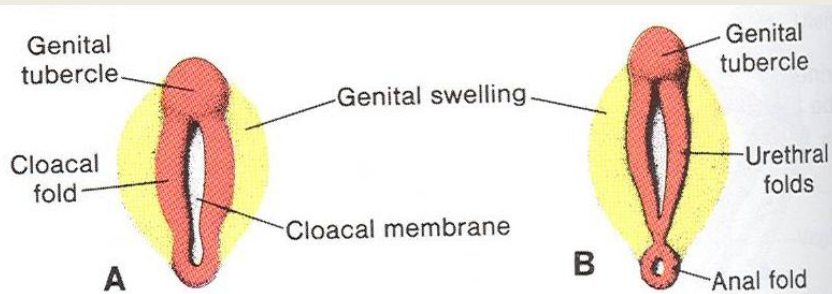
**Female internal genital
Organs**
· Most of upper vagina
· Cervix and uterus
· Fallopian tubes

Indifferent Ext. Genitalia

- They are similar in both sexes up to the 7th week. They are fully differentiated by the 12th week.
- Mesenchyme **cranial** to the cloacal membrane proliferates to form **Genital Tubercle**
- The genital tubercle elongates to form the **phallus**.
- Urorectal septum fuses with the cloacal membrane, it divides the cloacal membrane into,
 - a. Dorsal **anal membrane**.
 - b. Ventral **urogenital membrane**.
- The urogenital and cloacal membranes **rupture about the 7th week** to form the urogenital orifice and the anus.

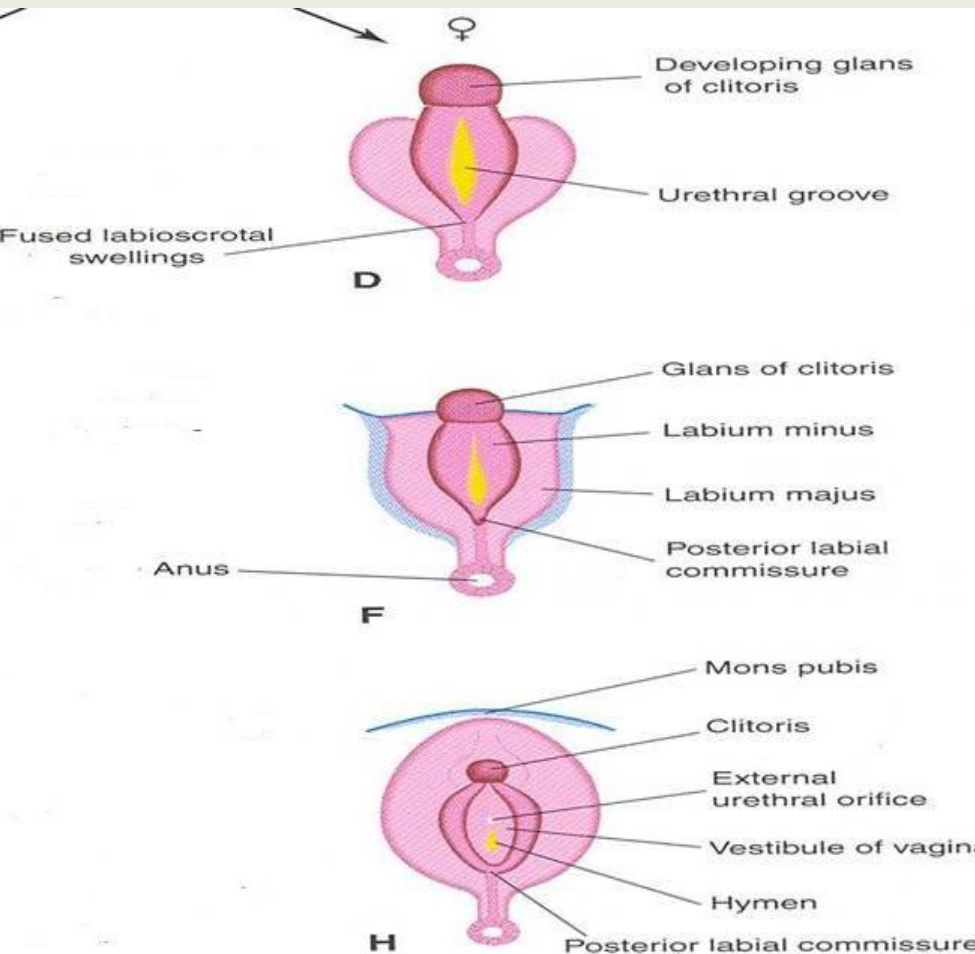


Development Of External Genitalia



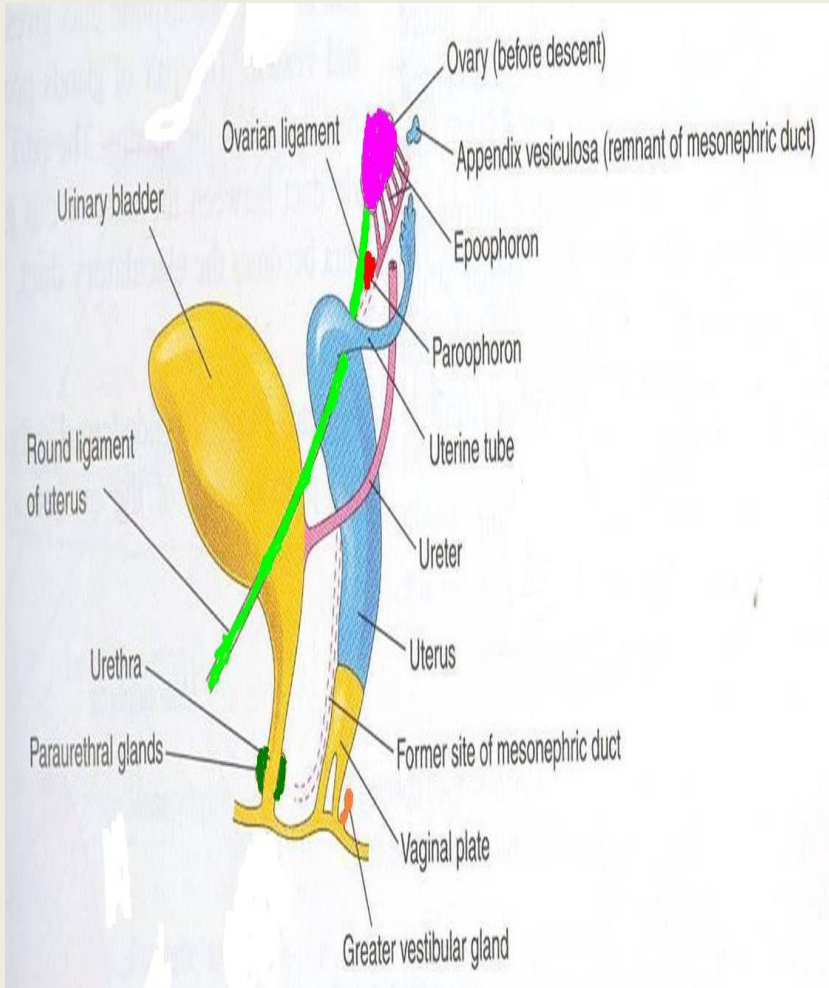
- On each side of the cloacal membrane, it proliferates to form
 - Labioscrotal swellings (Genital Swellings).
 - Urogenital Folds (Urethral Folds).

Development Of External Genitalia



- Genital tubercle elongates only slightly to form the **Clitoris**
- The **Urethral Folds** do not fuse and form the **Labia Minora**.
- The **Labioscrotal Folds** form the **Labia Majora**, they fuse to form the posterior labial commissure and the anterior labial commissure.

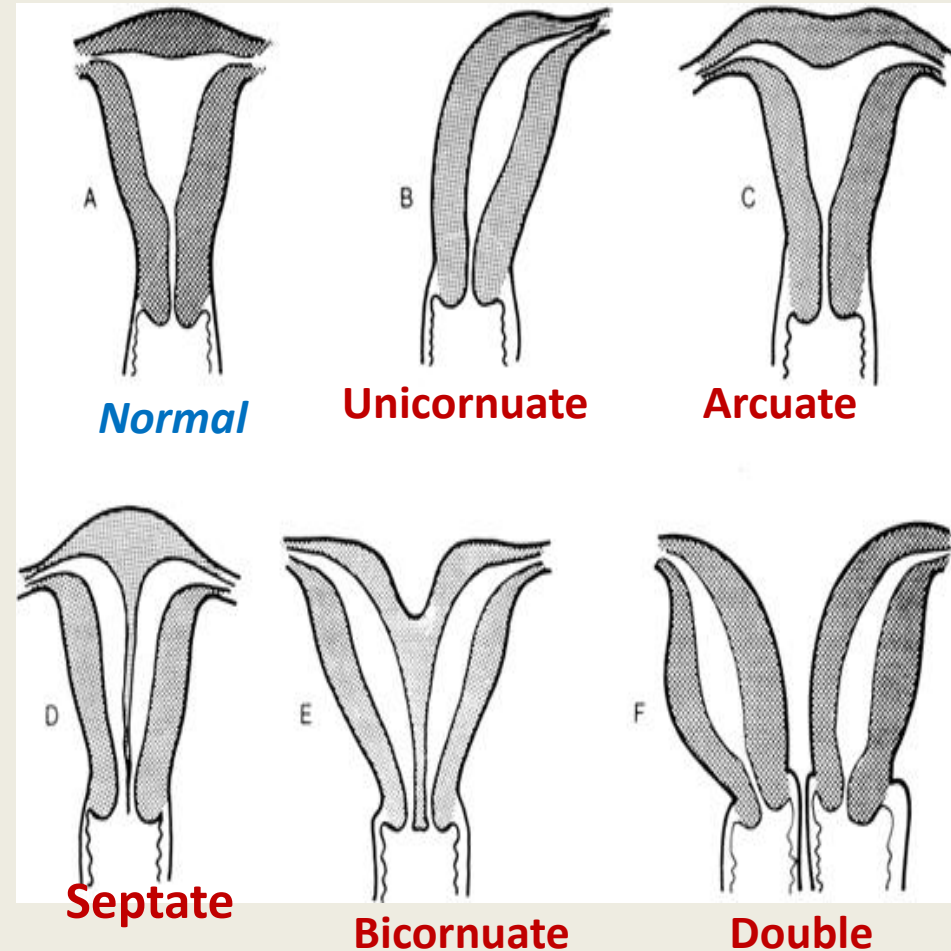
Glands



- **Urethral & Paraurethral Glands:**
- ***They grow from the urethra.***
- ***They are corresponding to the Prostate Gland of the male.***
- **Greater vestibular glands:**
- ***They are outgrowths of the urogenital sinus.***
- ***They are corresponding to the Bulbourethral Glands of the male.***

Uterine Malformations

- ❑ Double uterus (Uterus Didelphys).
 - Due to failure of fusion of inferior parts of the paramesonephric ducts.
 - May associated with double or single vagina.
- ❑ Bicornuate uterus.
 - The duoblication involves the superior segment.
- ❑ Unicornuate Uterus.
 - One paramesonephric ducts fails to develop.
- ❑ Arcuate Uterus.



□ *Cervical Atresia.*

- This may be combined with incomplete development of the upper vagina or lower uterus.

▪ *Vaginal Anomalies*

- *Atresia* (Partial or complete).

□ *Double vagina.*

□ *Transversely septate vagina.*

- Results from faulty canalization of the fused müllerian ducts.

