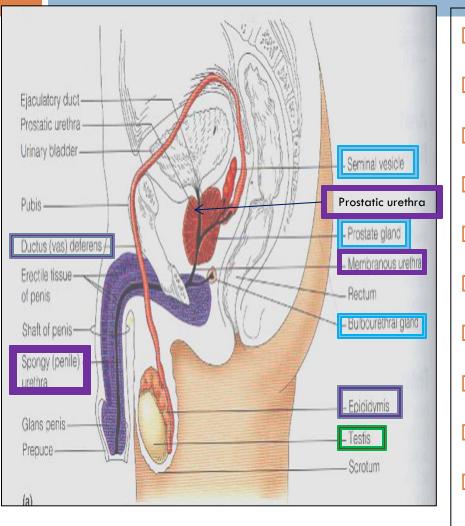
DEVELOPMENT OF MALE GENITAL SYSTEM

By : Associate Prof. : Dr.Sanaa Alshaarawy

OBJECTIVES

- At the end of the lecture, students should be able to:
- List the <u>causes of differentiation</u> of genitalia into the <u>male type.</u>
- Describe the <u>origin of each part of the male</u> internal & external genitalia.
- List the <u>causes</u> & describe the <u>events</u> of <u>descent of testis</u>.
- List the <u>common anomalies</u> of male genital system & describe the <u>causes</u> of each of them.

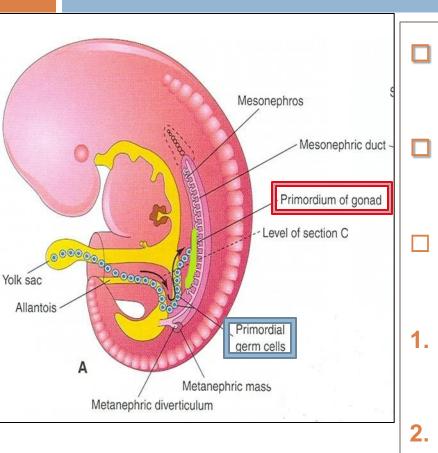
MALE GENITAL SYSTEM



□ <u>Gonad :</u> ☐ Testis. Genital Ducts: **Epididymis.** □ Vas deferens. Urethra. Genital Glands: □ Seminale vesicle. Prostate. Bulbourethral Glands.

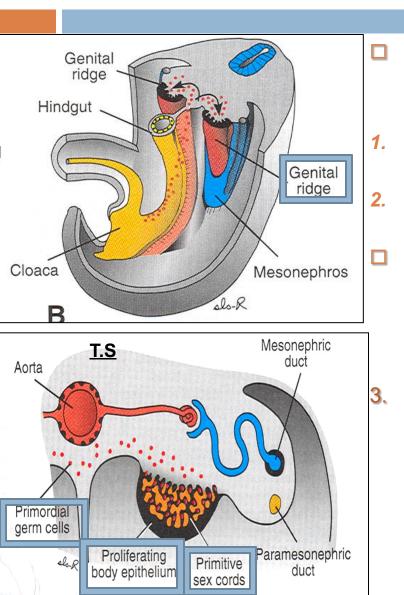
DEVELOPMENT OF GONADS

3.



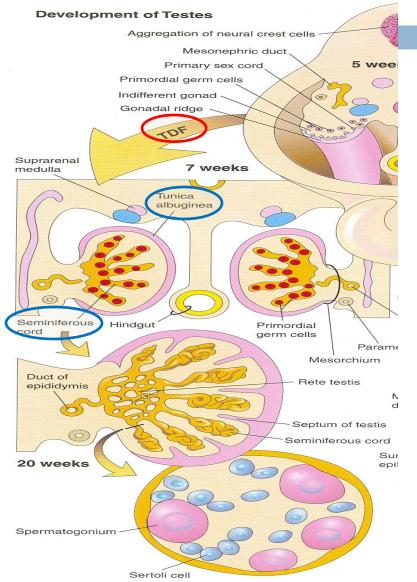
During 5th week: gonadal development occurs. **Until 7th week: gonads** are similar in both sexes **Gonads are derived from** 3 sources: **Mesothelium** (epithelium lining the coelomic cavity) **Underlying mesenchyme Primordial germ cells**

INDIFFERENT GONADS



Gonadal ridge: a bulge on the medial side of mesonephros produced by: **Proliferation of mesothelium** cortex) **Proliferation of mesenchyme** (medulla) Gonadal (primary sex) cords: The proliferating mesothelial cells fuse and penetrate the underlying mesenchyme to form primitive gonadal cords. **Primordial germ cells:** endodermal cells of the yolk sac migrate along dorsal mesentery of hindgut to gonadal ridge & become incorporated into gonadal cords.

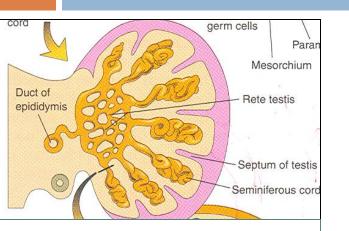
DEVELOPMENT OF TESTIS



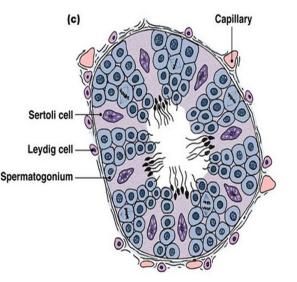
- The Y chromosome has a testisdetermining factor (TDF) that differentiates primitive gonad into testis.
- At 7th week:
- Regression of cortex & differentiation of medulla (of primitive gonad) into testis... How ?
- Gonadal cords condense & extend into all the medulla (Medullary cords) to form <u>Seminiferous cords.</u>
- The characteristic feature is the development of a thick fibrous capsule (tunica albuginea) that separates the enlarging testis from mesonephros.

Section of seminiferous tubule

DEVELOPMENT OF TESTIS



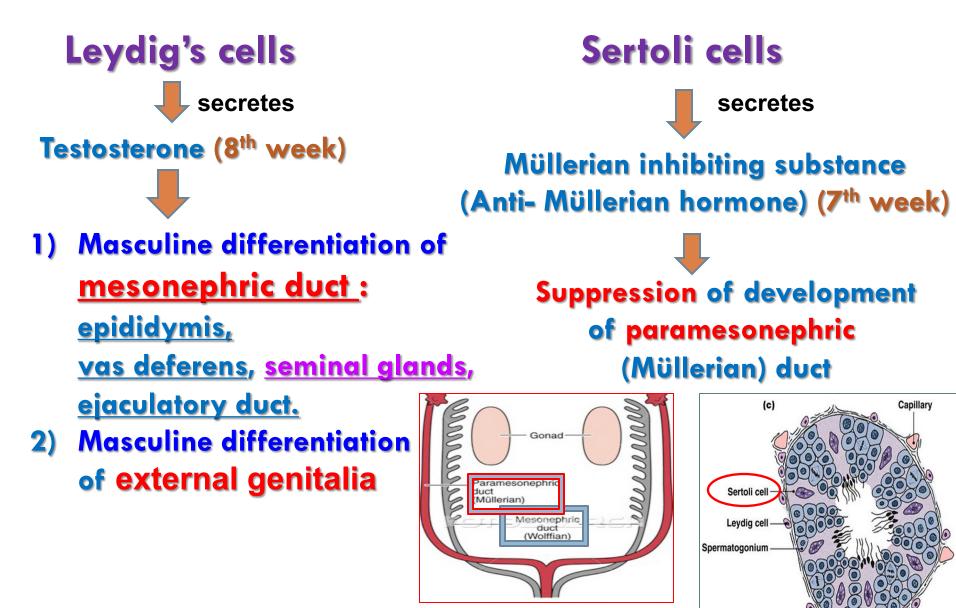
The Seminiferous Tubule



Seminiferous cords develop into: Semineferous <u>tubules</u>

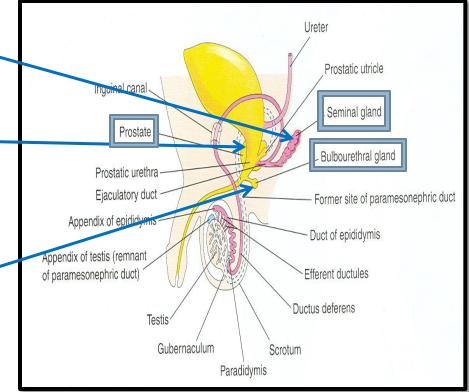
- Semineferous tubules <u>remain</u> <u>solid</u> until puberty. <u>Its walls</u> are <u>composed of:</u>
- 1. Sertoli cells: <u>derived from</u> surface epithelium of testis (mesothelial cells)
- 2. Spermatogonia: derived from primordial germ cells (endodermal in origin).
- By eighth week, <u>mesenchyme</u> <u>surrounding</u> semineferous cords <u>gives rise</u> to *interstitial cells* (of Leydig) secreting testosterone.

DEVELOPMENT OF MALE GENITAL DUCTS

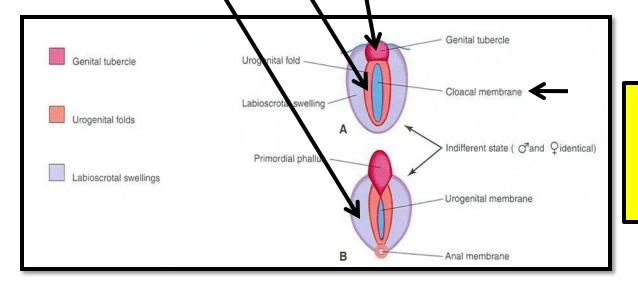


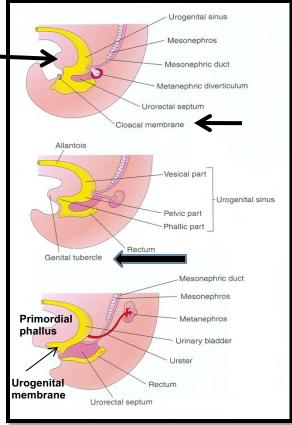
DEVELOPMENT OF MALE GENITAL GLANDS

- 1. SEMINAL GLAND: <u>mesodermal</u> outgrowth from mesonephric duct.
- 2. PROSTATE GLAND: <u>endodermal</u> outgrowth from prostatic urethra.
- 3. BULBOURETHRAL GLAND: endodermal outgrowth from spongy urethra.
 - Stroma & Smooth muscles in
 - 2 & 3 are derived from <u>surrounding mesenchyme</u>



Genital tubercle: produced from <u>mesenchyme</u> at the cranial end of cloacal membrane. It <u>elongates</u> to form a primordial phallus Urogenital folds: develop on each side of cloacal membrane Labioscrotal swellings: develop on each side of urogenital folds

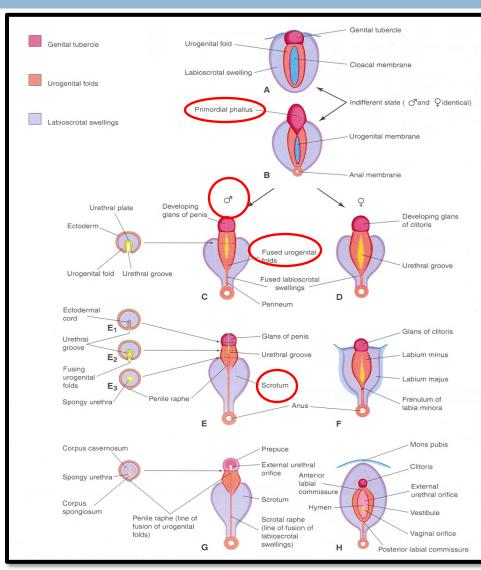




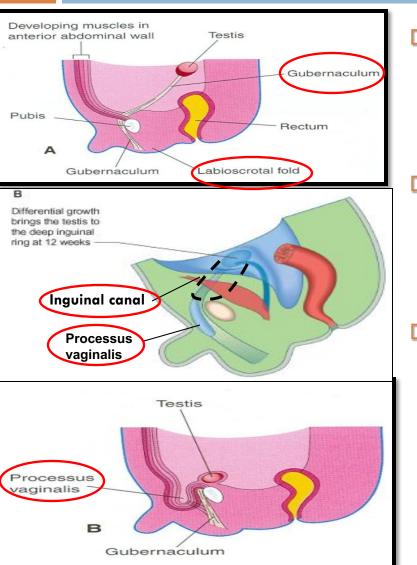
INDIFFERENT STAGE OF EXTERNAL GENITALIA (from 4th to 7th week)

DEVELOPMENT OF MALE EXTERNAL GENITALIA (stimulated by testosterone)

- Begins at 9th week
- Complete differentiation at 12th week:
- The phallus enlarges to form the penis
- The urogenital folds fuse to form the spongy (penile) urethra
- The labioscrotal folds (swellings) fuse to form the scrotum



DESCENT OF TESTIS

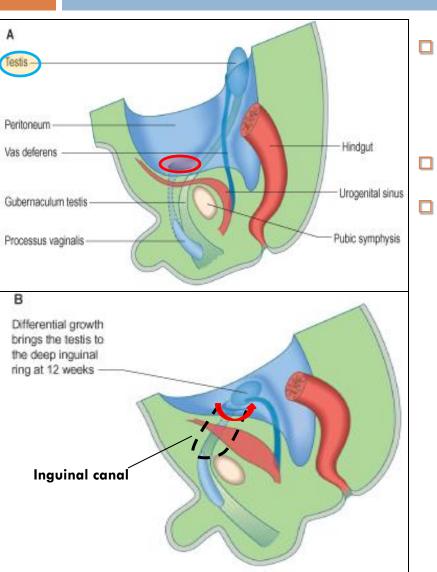


- Gubernaculum:

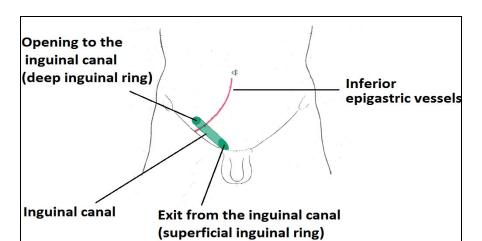
 a mesenchymal band extending from inferior pole of gonad to labioscrotal fold.

 Inguinal canal: a pathway formed by gubernaculum through layers of anterior abdominal wall.
- Processus vaginalis: a peritoneal fold passing through inguinal canal before testis, to facilitate its descent.

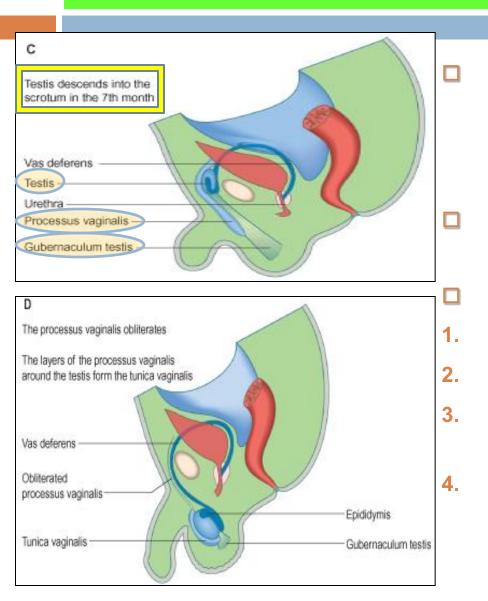
INTERNAL DESCENT OF TESTIS



- **Definition:** Descent of testis from posterior abdominal wall <u>to deep</u> inguinal ring.
- Time: During 12th week
- Cause: a *relative movement* resulting from <u>elongation</u> of <u>cranial</u> <u>part of abdomen</u> away from its caudal part (future pelvic cavity).

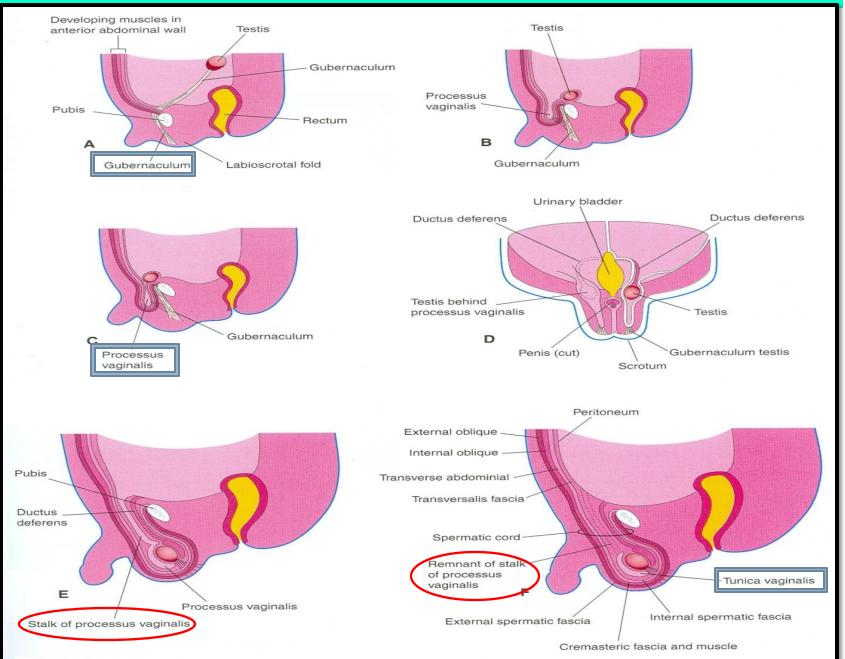


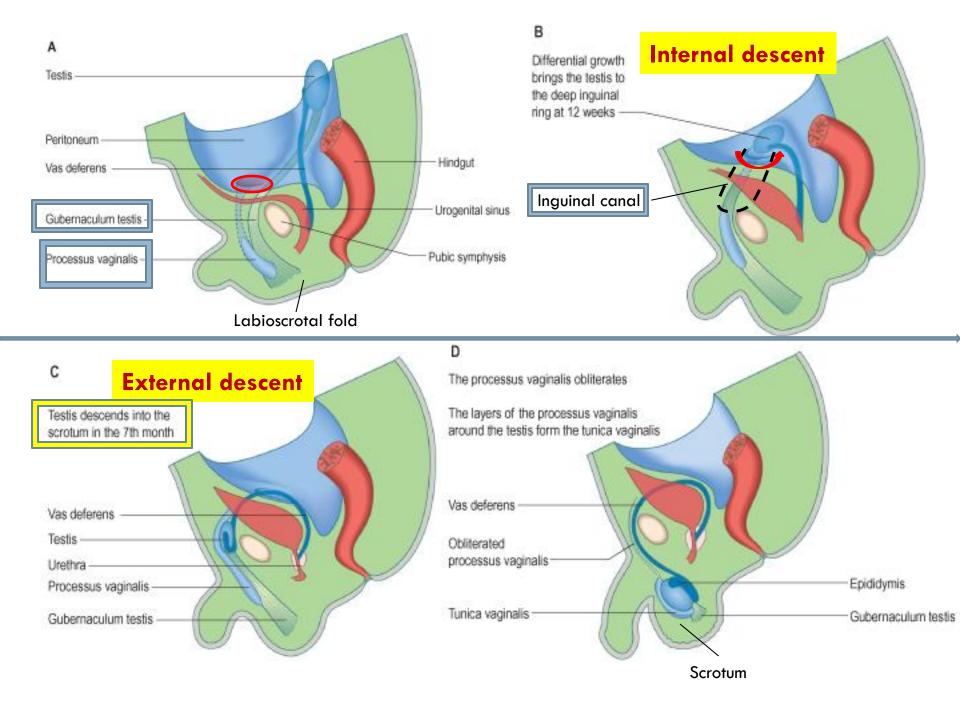
EXTERNAL DESCENT OF TESTIS



Definition: Descent of testis from deep inguinal ring, through inguinal canal, to scrotum Time: Begins in 7th month and takes 2 to 3 days Causes: **Controlled by androgens.** Guided by gubernaculum. Facilitated by processus vaginalis. Helped by increased intra-abdominal pressure resulting from growth of abdominal viscera.

DESCENT OF TESTIS

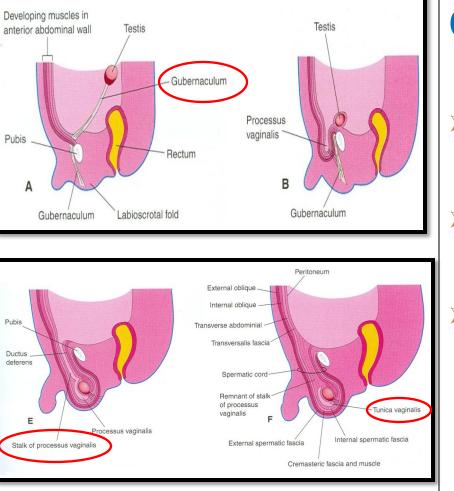




EXTERNAL DESCENT OF TESTIS

- 1. <u>More than 97% of full-term</u> new born males have both testes in scrotum.
- 2. <u>During first 3 months after birth</u>, most undescended testes <u>descend into scrotum</u>.
- 3. <u>No spontaneous descent occurs</u> <u>after the age of 1 year.</u>

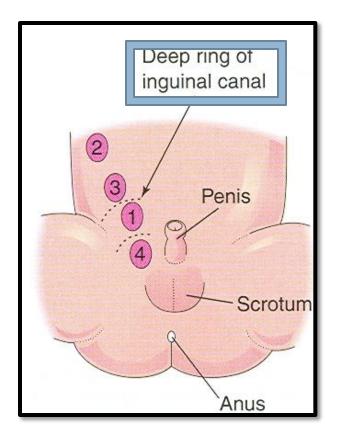
EXTERNAL DESCENT OF TESTIS



Complete descent of testis is associated by: **Degeneration of** gubernaculum. > Obliteration of stalk of processus vaginalis. **Persistence** of part of processus vaginalis surrounding the testis in the scrotum to form "tunica vaginalis"

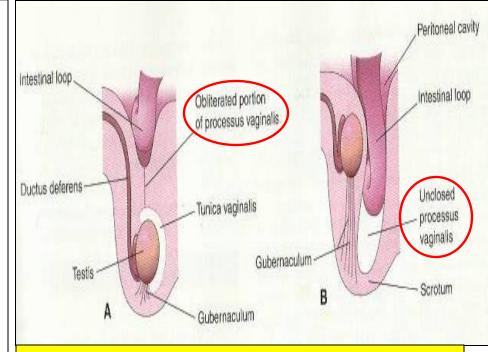
CRYPTORCHIDISM (UNDESCENDED TESTIS)

- Incidence: is up to 30% of premature & 3-4% of <u>full term</u> males
- Cause: deficiency of androgens.
- Common sites: look to figure
- Complications:
- 1. Sterility, if bilateral.
- 2. Testicular cancer (20-44%).



CONGENITAL INGUINAL HERNIA

- Definition: Herniation of a loop of intestine through a <u>non-</u> <u>obliterated processus</u> <u>vaginalis.</u>
 - A: incomplete B: complete (in scrotum)
- Cause: The processus vaginalis does not obliterate & remains in open communication with the peritoneal cavity.



Failure of closure of processus vaginalis

