

Female perineum and external genitalia

Reproductive block-Anatomy-Lecture

Editing file
Summary file



Color index:

Girls' slides
Main content

■Boys' slides ■ Extra

Important Drs' notes













Objectives

At the end of the lecture, students should be able to describe the:

- Boundaries of the perineum.
- Division of perineum into two triangles.
- Boundaries & Contents of anal & urogenital triangles.
- Lower part of Anal canal.
- Boundaries & contents of Ischiorectal fossa.
- Innervation, Blood supply and lymphatic drainage of perineum

Perineum

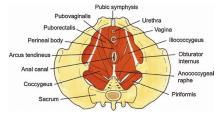
- It is the region of the body below the pelvic diaphragm (The outlet of the pelvis)
- It is a diamond shaped area between the thighs

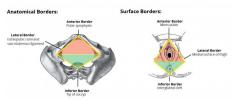
Perineum Contents:

- 1. Lower ends of urethra, Vagina, Anal canal
- 2. Perineal body & Anococcygeal body.
- 3. External genitalia

Mons pubis

Relations	Anterior	Posterior	Lateral		
Bony Boundaries	Symphysis pubis	Соссух	 Ischiopubic rami "anteriolateral" Ischial tuberosities Sacrotuberous ligaments "Posteriolateral" 		
Boundaries	Mone pubic	Inter aluteal folds	Madial surfaces of the thinks		





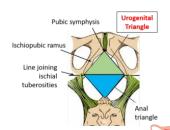
By an imaginary line passing through two ischial tuberosities it divided into:

Inter gluteal folds

Anteriorly: urogenital triangle

Posterior: Anal triangle

Medial surfaces of the thighs



Perineum Contents

Anococcygeal Body Perineal Body Female External Genitalia (Vulva) It is a complex It is an irregular fibromuscular mass of variable size and Mons pubis : a collection of fat musculotendinous structure overlying the pubes. consistency Located at midpoint of the line between the ischial tuberosities Clitoris Located in the floor of the Lies in the subcutaneous tissue, posterior to vaginal vestibule Labia majora. and anterior to the anal canal & anus pelvis between the anterior Labia minora. aspect of the coccux & the ☐ Forms the central point of the perineum & blends anteriorly Vestibule of vagina: The interval posterior wall of the with the perineal membrane between the two labia minora. anorectal canal Function: Vagina & urethra open into the Gives attachment to perineal muscles vestibule through urethral orifice **Function:** Plays an important role in visceral support especially in anteriorly and vaginal orifice Receives insertion of female posteriorly. fibers of levator ani muscle Mons pubis Perineal body Ischiocavernosus Bulbocavernosus External urethral Transverse perineal Bartholin glands (frenulum of labia majora) (greater vestibular glands)



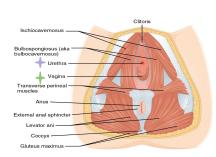
Urogenital Triangle

Boundaries

- Anterior → symphysis pubis
- Posterior → transverse line passing through the 2 ischial tuberosities
- Lateral → ischiopubic rami & ischial tuberosities

Contents

- Lower parts of urethra& Vagina
- External genitalia (Vulva)



Fascia of Urogenital Triangle (Perineal Fascia)

is continuous anteriorly with the fascia of abdomen and consists of:

01 Superficial layer

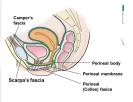
consists of

02 Deep layer

Deep perineal fascia invests the muscles in the superficial perineal pouch

Superficial fatty layer **(Camper's fascia)** makes up the substance of mons pubis & labia majora and extends into the anal region

Deep membranous layer (Colle's fascia): Does not extend to anal region. Becomes fused with the posterior margin of the perineal membrane



Urogenital Diaphragm

- A triangular musculofascial diaphragm (2 muscles & 2 fascias) located in the anterior part of the perineum (in the urogenital triangle).
- Fills in the gap between the pubic arch.

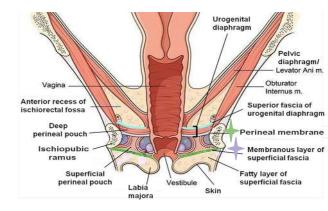
- Composed of: Sphincter urethrae and the deep transverse perineal muscle enclosed within the superior and inferior layers of fascia of the urogenital diaphragm
- The inferior layer of the fascia is formed by perineal membrane

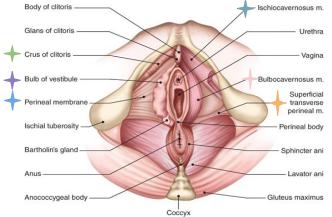


Perineal Pouches

Superficial perineal pouches

It is the space between the deep membranous layer of superficial fascia of perineum (Colle's fascia) and the perineal membrane Superior → perineal membrane Inferior → membranous layer of superficial fascia Lateral → ischiopubic rami Bulbs of vestibule: on each side of vaginal orifice Crura of clitoris Superficial perineal muscles: Contents Bulbospongiosus muscle, surrounds orifice of vagina and covers vestibular bulb Ischiocavernosus muscle, covers crus of clitoris on each side III. Superficial transverse perineal muscles * Greater vestibular glands: on each side of vaginal orifice Perineal branch of pudendal nerve supplying muscles & skin







Perineal Pouches

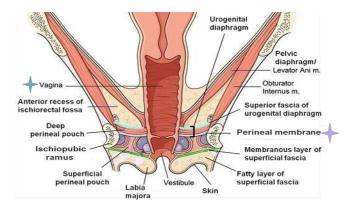
Deep perineal pouches

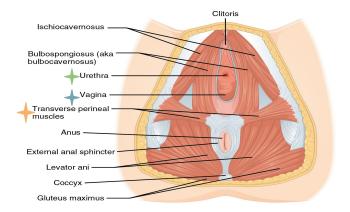
It is a completely closed space deep to the perineal membrane Superior → superior fascia of the urogenital diaphragm Inferior → inferior fascia of the urogenital diaphragm (perineal membrane) Lateral → inferior portion of obturator internus fascia Lower part of urethra Lower part of vagina Contents Sphincter urethrae and Sphincter vaginae muscles, which is pierced by urethra & vagina Deep transverse perineal muscles

Dorsal nerve of clitoris (branch of Pudendal nerve)

Internal pudendal vessels

*

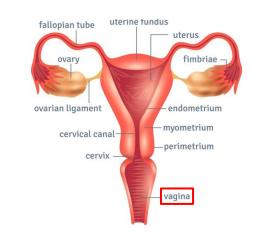






Vagina

- is a muscular canal that extends from the uterus to the external orifice of the genital canal
- It measures about 3 in. (8 cm) long.
- It serves as the excretory duct for the menstrual flow & forms part of the birth canal.
- The vaginal orifice in a virgin possesses a thin mucosal fold, called the hymen, which is perforated at its center. It lies (vaginal orifice) posterior to the urethral orifice.

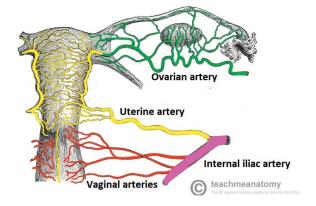


Arterial Supply

- Vaginal arteries: a branch of the internal iliac artery
- Vaginal branch of the uterine artery

Venous Drainage

drain into the internal iliac veins.





Anal Triangle

Boundaries:

Anterior → Transverse line passing through the 2 ischial tuberosities

- Lateral → ischial tuberosity & sacrotuberous ligament
- 3 Posterior → coccyx

2-Contents:

A. Lower part of Anal canal

Anal canal

 It is about 1.5 in. long, descending from the rectal ampulla to the anus.

Relations (In female):

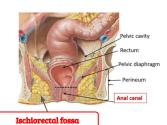
- Anteriorly → Perineal body, urogenital diaphragm, and lower part of vagina
- Posteriorly → Anococcygeal body.
- Laterally → Ischiorectal fossae.

Divided into: (by the pectinate line)

- Upper half: derived from hindgut (endoderm)
- Lower half: derived from the Proctodeum (ectoderm)

The two parts have different blood supply, nerve supply and lymphatic drainage

B. Anococcygeal body





C. Ischiorectal fossa on each side

 A fascial lined wedge-shaped space on each side of the anal canal

Boundaries:

- Base → Skin of the perineum
- Medial wall → Levator ani & anal canal
- Lateral wall → Obturator internus, covered with fascia

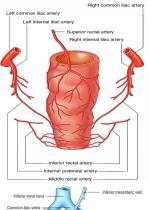
Contents:

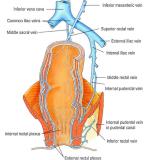
- Dense fat
- Pudendal nerve & internal pudendal vessels within the pudendal canal (A fascial canal formed by obturator fascia, located on the lateral wall of the ischiorectal fossa)
- Inferior rectal nerve & vessels crossing the fossa to reach anal canal

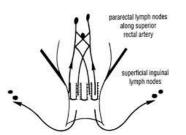


Anal canal supply:

	Arterial supply	Venous drainage	Lymphatic drainage	Nerves ★
Upper half	Superior rectal artery (continuation of the inferior mesenteric artery)	Superior rectal vein drained into the inferior mesenteric vein (portal circulation)	Para-rectal nodes drained into inferior mesenteric lymph nodes and internal iliac lymph nodes	(sensitive to stretch) Autonomic nerve Visceral motor (Inferior Hypogastric Plexus) (sympathetic & parasympathetic)
Lower half	Inferior rectal artery. (branch of internal pudendal artery)	Inferior rectal vein drained into the internal pudendal vein (Systemic circulation)	Superficial inguinal lymph nodes	(sensitive to pain) Somatic spinal motor & sensory nerves - (Inferior rectal nerve branch of pudendal nerve) supplies external sphincter muscle of the anus and the skin of the anal region







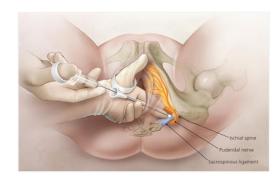


Pudendal Nerve Block





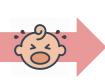
- It is used in providing **analgesia** for the second stage of labour and to provide **anesthesia** of the perineum in order to create and repair an episiotomy.
- Can be done by transvaginally or through perineal approach.



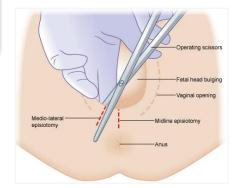
it divided into

Transvaginal method: The needle is passed through the vaginal mucous membrane toward the ischial spine. After the needle is passed through the sacrospinous ligament, the anesthetic solution is injected around the pudendal nerve

Perineal method: The ischial tuberosity is palpated subcutaneously through buttock. The needle is inserted on the medial side of the ischial tuberosity to a depth of about 1 in. (2.5 cm) from the free surface of the tuberosity. The anesthetic solution is injected around the pudendal nerve.



An episiotomy is a surgically planned incision on the perineum and the posterior vaginal wall during second stage of labor to prevent perineal tear.







D. Ischiorectal fossae

QUIL		
Q1: which of the following bony boundaries is located in the anterior to perineum?	Q5: Crura of clitoris is one of the content of?	
A. Coccyx	A. Deep perineal pouch	
B. Symphysis pubis	B. Anal triangle	
C. Ischiopubic rami	C. Pudendal canal	
D. Ischial tuberosities	D. Superficial perineal pouch	
Q2: Vagina & urethra open into the vestibule through urethral orifice &vaginal orifice	Q6: which of the following is posterior to anal canal?	
A. Laterally, posteriorly	A. Anococcygeal body	
B. Anteriorly , posteriorly	B. Vagina	
C. Anteriorly. Laterally .	C. Ischiorectal fossae	
D. posteriorly , anteriorly	D. Perineal body	
Q3: In transvaginal method, the needle is passed through thetoward the	Q7: which of the following vein drains into inferior mesenteric vein?	
A. Vaginal mucous membrane, ischial spine	A. Middle rectal vein	
B. Vaginal mucous membrane , ischial tuberosity	B. Internal pudendal vein	
C. Buttock , ischial spine	C. Inferior rectal vein	
D. Buttock , ischial tuberosity	D. Superior rectal vein	
$\mathbf{Q4}$: Which of the following is considered a landmark during a transvaginal pudendal \mathbf{n} .	Q8: which of the following boundaries is located in the base of Ischiorectal fossa?	
block?	A. Levator ani	
A. Ischial spine	B. skin of perineum	
B. Ischial tuberosity	C. Pudendal nerve	
C. Pubic rami	D. Obturator internus	

Members board

This amazing lecture was originally done by 438's team

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