Lecture 2

Reproductive biology and Embryology

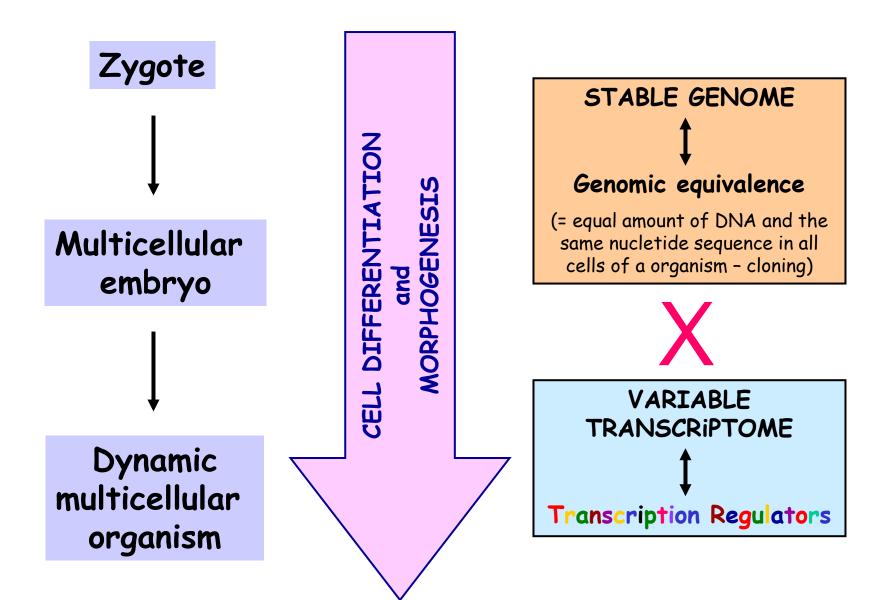
Gametes

- · Meiosis
- Structure and development
- Differences between oogenesis and spermatogenesis
- Regulation of gametogenesis
- Ovarian and menstrual cycles
- Ovulation
- · Transport of gametes, sperm capacitation, acrosome reaction

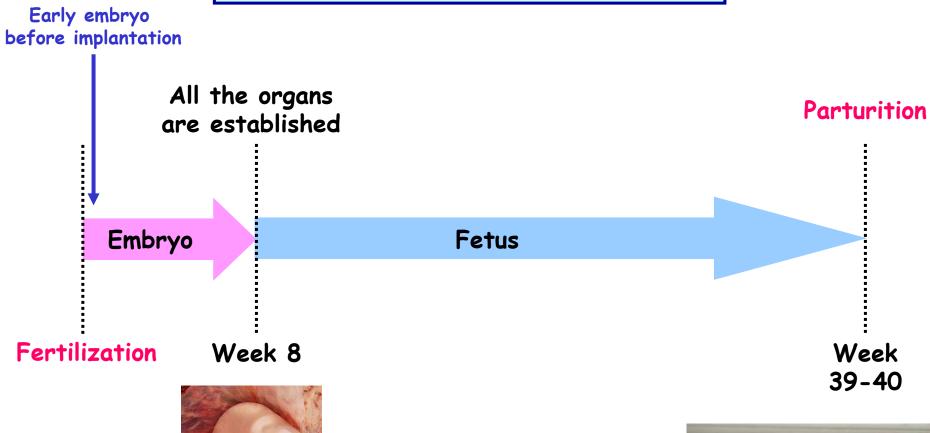
Fertilization and Early Embryogenesis

- Cortical reaction
- Cleavage, morula, blastocyst
- Activation of embryonal genome
- Embryonic stem cells, nuclear transfer (cloning)

Embryology: what does it cover?



Embryonal x Fetal Development

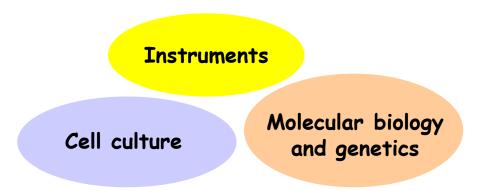


The primitive heart starts beating at 4 weeks.





Any use of understanding principles of reproduction and embryonal/fetal development?



- · Infertility treatments
- · Contraception
- Avoidance of developmental abnormalities

Genetic basis of gamete development
Examination of genetic status (amniotic fluid)
Understanding the effects of teratogenic compounds
Intrauterine examination - sonography
Intrauterine surgeries
Others to come

Reproduction

- allows for continuity of a given species via propagation of its individuals
- key element in reproduction is the transfer of DNA duplicate from parents onto progeny

Indviduals of different sex produce different gametes

Key element in sexual reproduction

Sexual reproduction mediated by gametes

may seem to be too complicated and much less effective than asexual but

serves very significant adaptation role.

This adaptation role realizes via unique genetic processes, which take place during development of gametes - eggs and sperm.

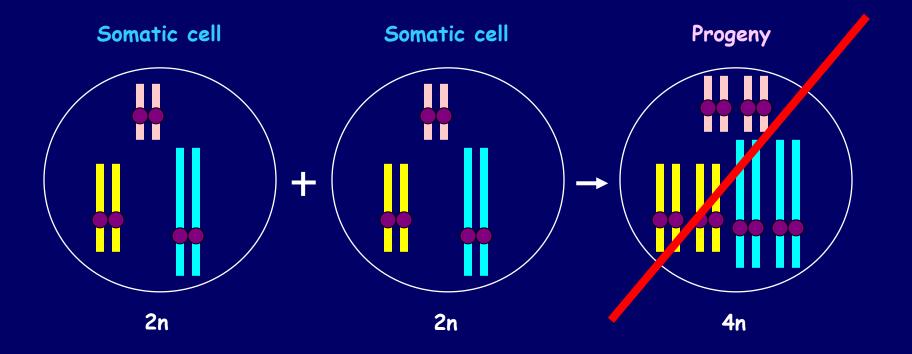
Although development of eggs and sperm differ in many morphogenetic details, key genetic processes taking place in both types of gamates are principally the same.

Genetic processes that are crucial for gametogenesis take place during meiotic cell division - <u>MEIOSIS</u>

These genetic processes include:

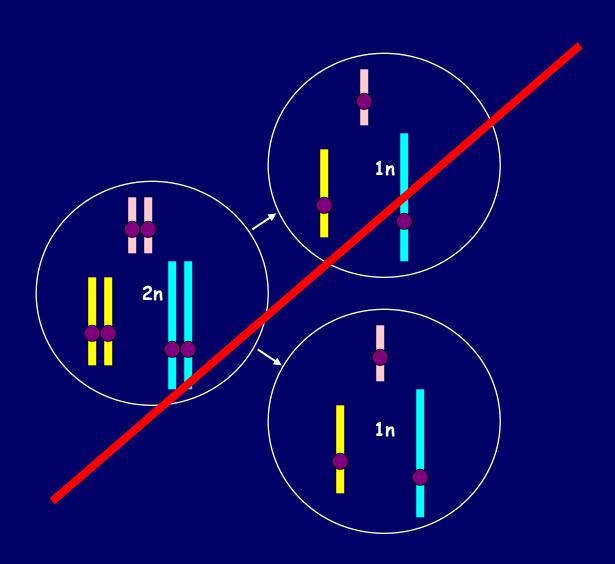
- · "Crossing over"
- · Independent segregation chromosomes
- · Reduction of the number of chromosomes

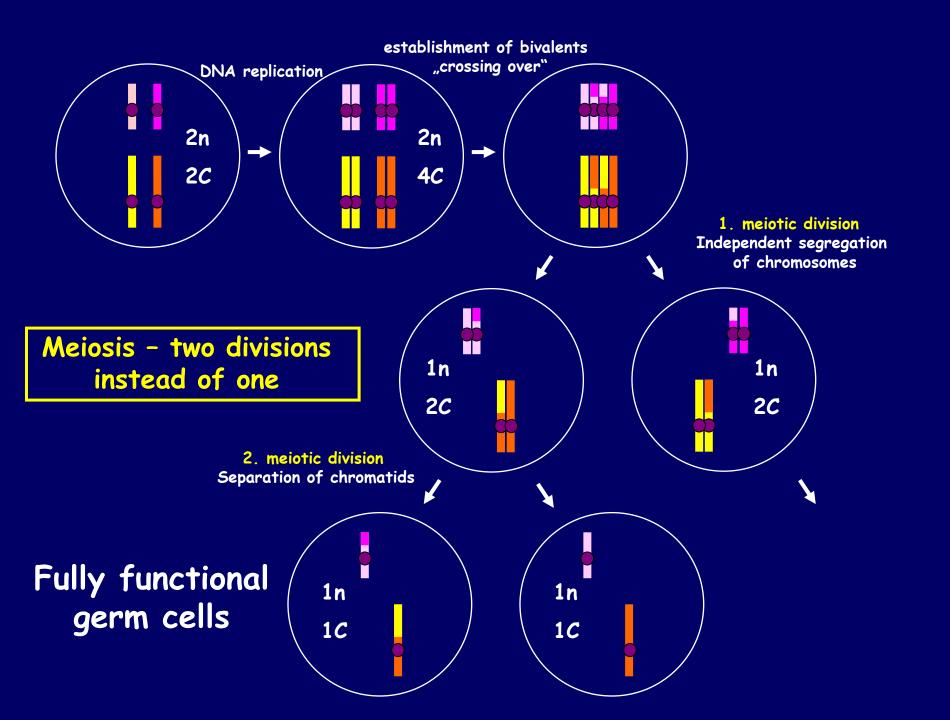
Reduction of the number of chromosomes Why?



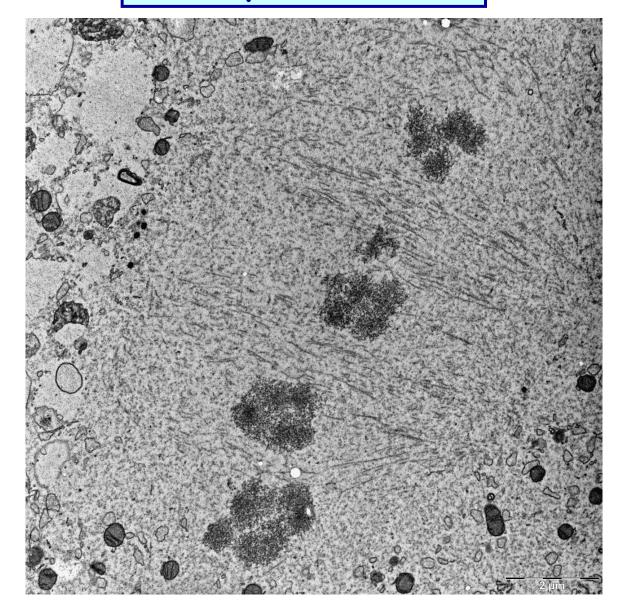
Gametes have to contain haploid number of chromosomes (n) in order to prevent multiplication of chromosomes in progeny above a diploid number (2n)

In principle, the number of chromosomes could be reduced in one step by just separating homologous chromosomes without preceding replication of DNA (DNA synthesis)





MI oocyte - tetrades



- · "Crossing over"
- · Independent segregation of chromosomes
- · Fertilization

are sources of genetical diversity, that underlies adaptation of living organisms.

Genetic function



X



Eggs

Significance for embryogenesis (reproduction)

Morphological and physiological properties

Development and underlying regulatory mechanisms

DIFFERENT

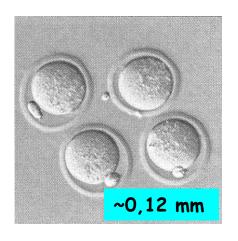
Primordial germ cells - PGC



- stem cells, which are common to both sperm cells and oocytes
- originate in yolk sac (extraembryonally)
- divide mitotically while migrating into gonad anlagen (genital ridges) (due to signals from surrounding environment laminin, kit-ligand, TGF-beta1, ...)
- in man PGCs are sexually indifferent until the 6th week of embryonic development

DEVELOPMENTAL PROCESSES

- after reaching puberty, sperm cells are produced in testes continuosly until high age (two testes of man produce about 1000 spermatozoa every second)
- numbers of ocytes (follicles) in ovary is given at the time of birth and do not increase (in woman ~500 000)
- only small number of oocytes develop into fertilizable eggs (in woman ~400)
- at the time of menopause, ovary contains only small number of remaining oocytes (in woman ~100-1000)





One of the biggest and most "precious" (by both number and significance) cells.

Paradoxical cell

Highly specialized cell.

The only cell in the female body that can undergo meiosis and fertilization, and thus give rise to a new individual.

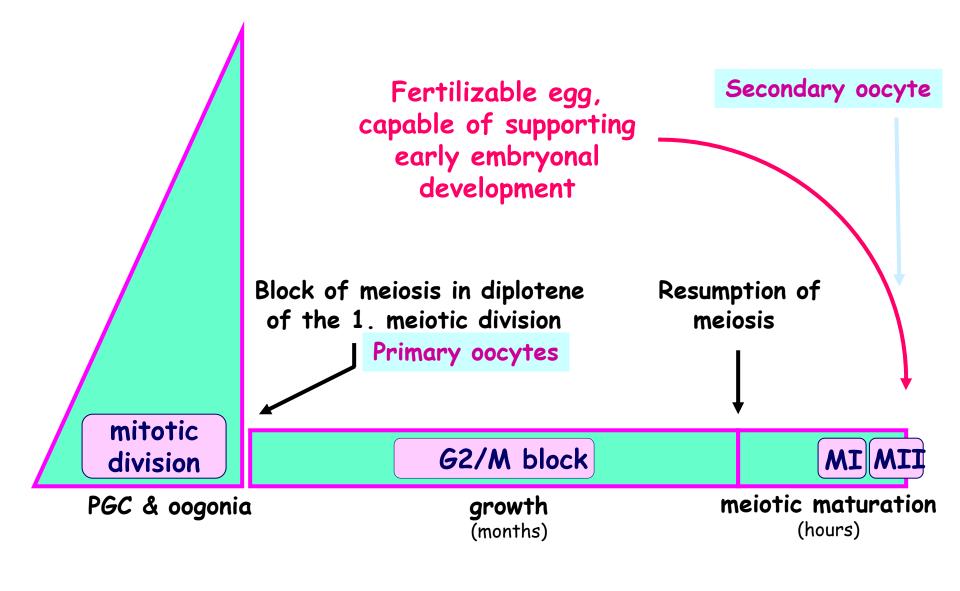


"Totipotent" cell It can generate all the cellular

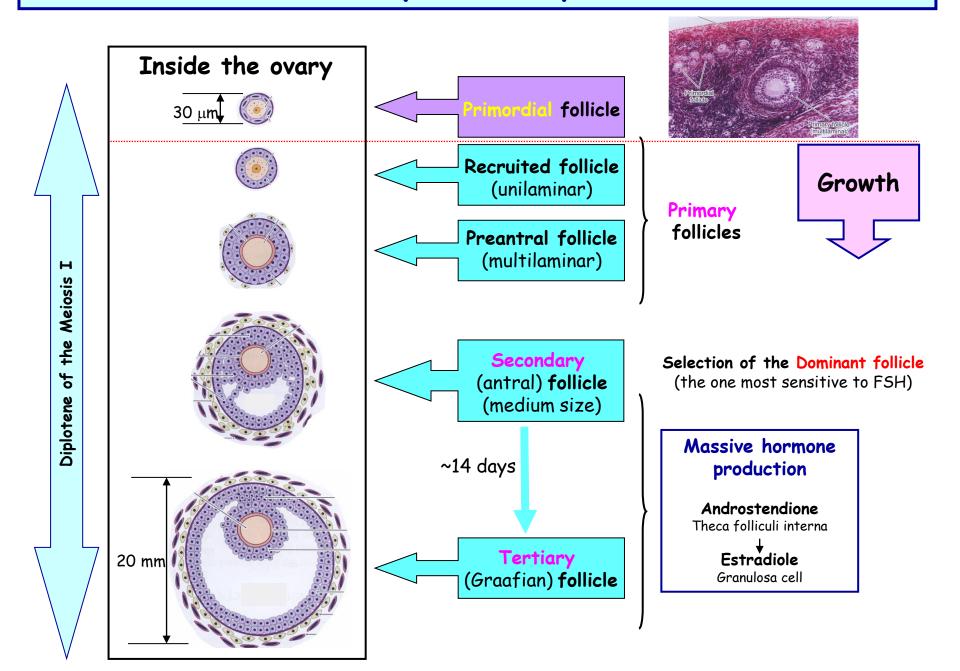
diversity that si typical for multicellular organism.

Even the era of cloning did not replace the functions of egg!

Key periods of oocyte development



Where and how the oocyte development is achieved? (1)



Where and how the oocyte development is achieved? (2)

Ooocyte growth

Takes place in ovary (along with the growth of follicle)

&

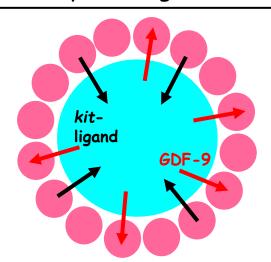
Signal that initiates growth is not known (it is not FSH - hypophysectomy does not prevent growth)

&

It is fully dependent on the contact of oocyte with granulosa cells of the follicle (mediated for example by the gap junction protein connexin-37)

&

Communication between oocyte and granulosa cells is bidirectional



Where and how the oocyte development is achieved? (3)

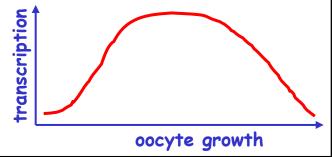
Ooocyte growth

Slow process (several months in woman)

100x increase in volume - accumulation of organelles a molecules providing egg with the ability to support early embryogenesis until reaching autonomy (about 10⁵ mitochondria accumulated in oocyte supports embryogenesis until blastocyst stage)

Intensive transcription – accumulation of mRNA in dormant state (regulated by polyadenylation and ?)

Fully grown oocyte - ~2,5 ng total mRNA



Intensive translation - many proteins (very limited knowledge)

Example: ZP1, ZP2, ZP3 - proteins of zona pellucida

Fully grown oocyte - ~120 ng total protein

Transkriptome
and proteome –
underlie unique
properties of
oocyte

Where and how the oocyte development is achieved? (4)

Epigenetic changes occuring during oocyte growth

Reactivation of X chromosome

- somatic cells one X chromosome is inactivated by hypermethylation of cytosine residues in molecule of DNA
- growing oocyte both X chromosomes are active (crucial for oocyte development karyotype 45, X0 results in an abnormal development of ovaries)

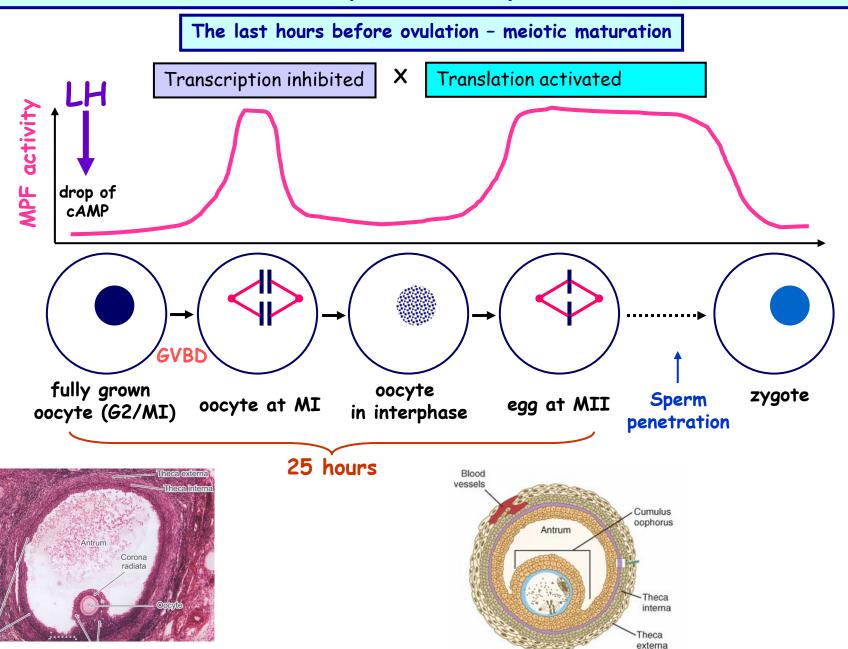


Genomic imprinting

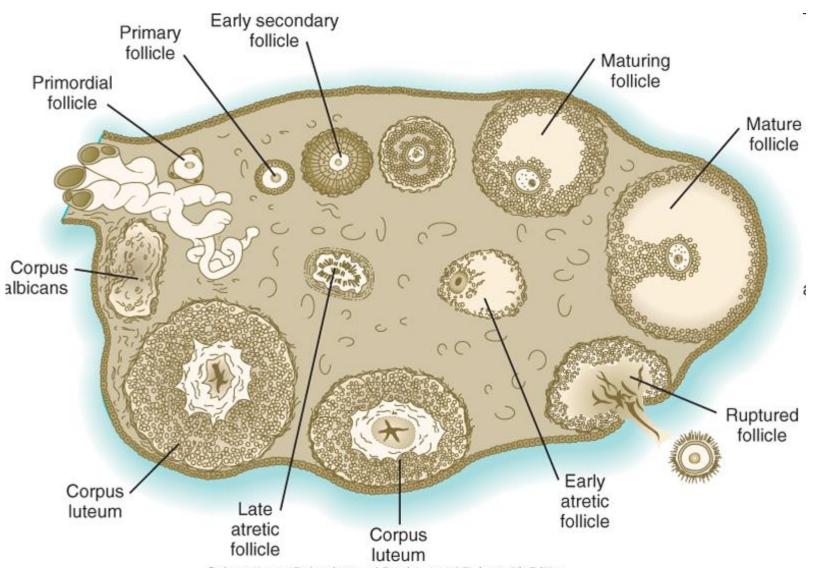
- epigenetic modification of autosomal chromosomes that leads to monoallelic expression of genes - due to activity of enzyme DNA methyltransferase
- PGCs are globally demethylated
- imprinting is newly established during oocyte growth (about 70-80 genes)

Abnormalities in imprinting may result in spontanneus abortions in assisted reproduction !!! (in vitro manipulation with gametes and embryos may produce abnormalities in imprinting)

Where and how the oocyte development is achieved? (5)

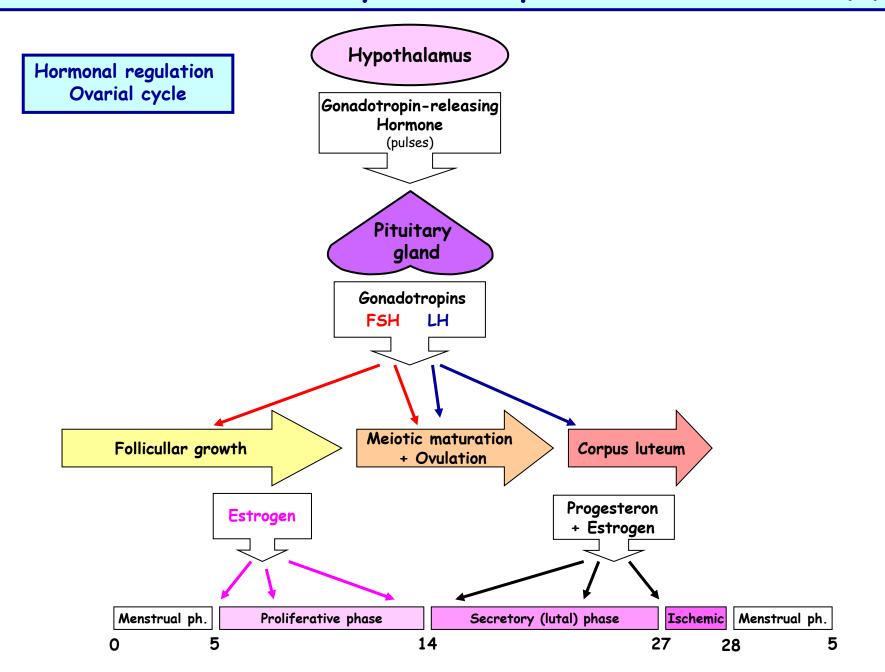


The final look into the ovary

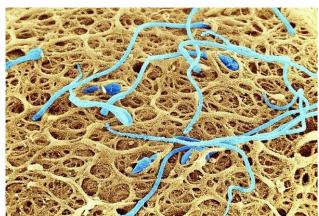


Carlson: Human Embryology and Developmental Biology, 4th Edition.
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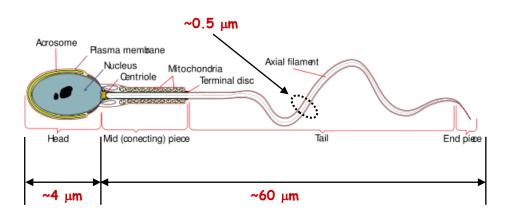
Where and how the oocyte development is achieved? (6)



Sperm cell development - Spermatogenesis (1)



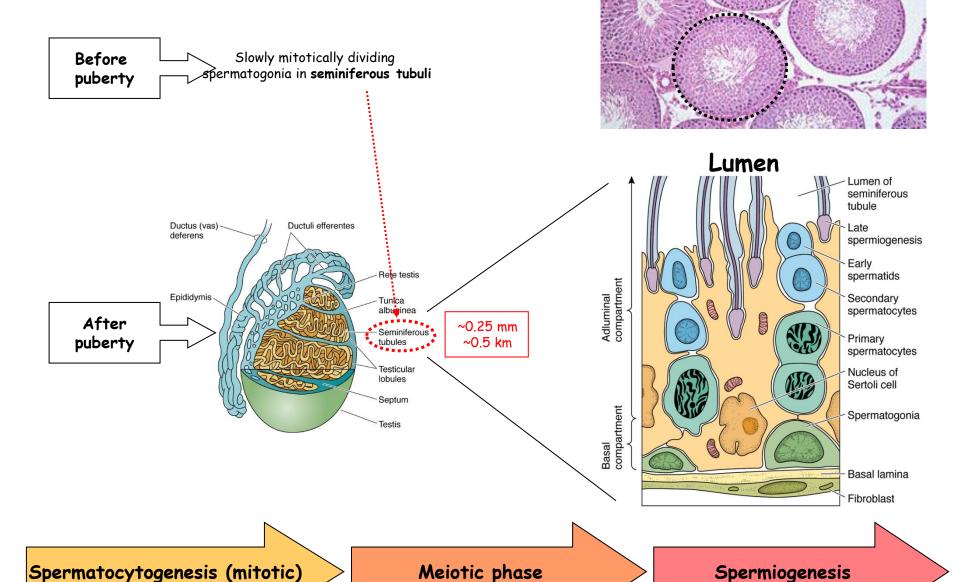
Sperms on the oocyte



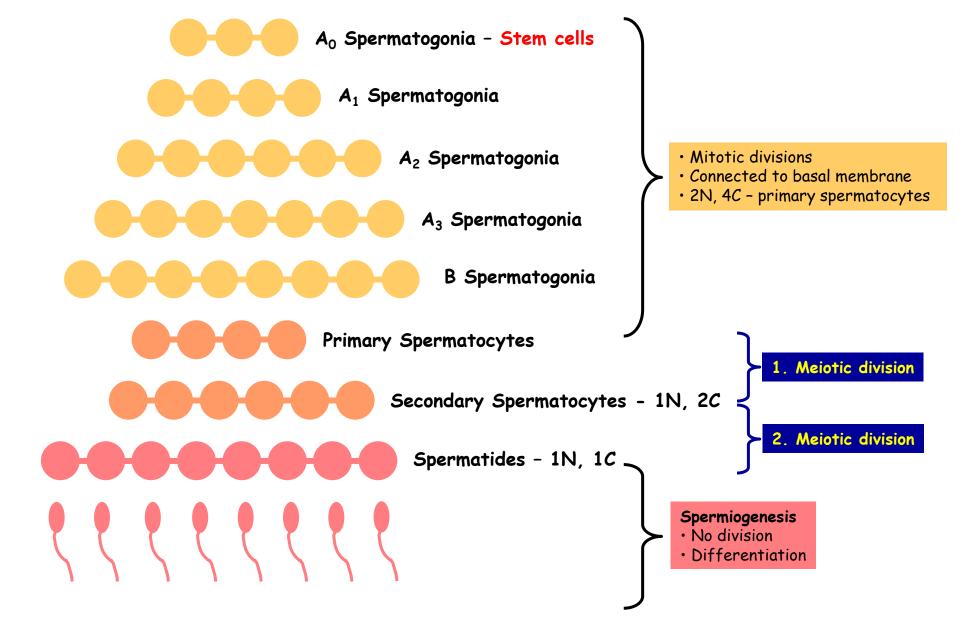
Minimal ejaculate (WHO)

- · Volume 1.5 ml
- Sperm number 15.1 millions/ml
- Motility 40%

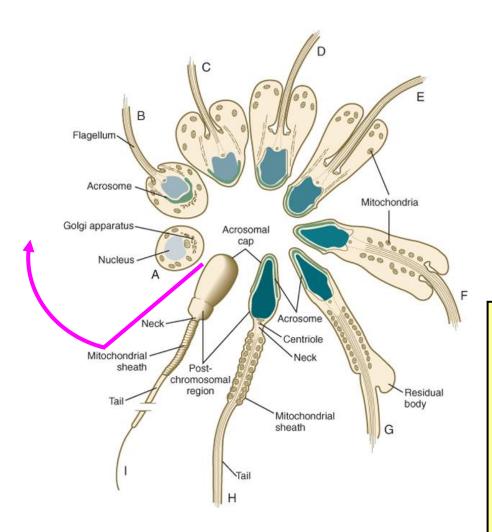
Sperm cell development (2)



Sperm cell development (3)



Sperm cell development (4) - Spermiogenesis

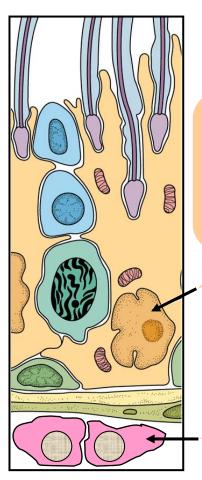


Histones to Protamines Genome inactivation Loss of cytoplasm

Sperm production

- · 1 million sperms every hour
- Spermatogenesis takes ~70 days
- Transport through epididimis ~8-17 days
- Cyclic character
 (Cycle of the seminiferous epithelium 16 days)
- the same developmental stage at the same place)

Sperm cell development (5) - Regulation

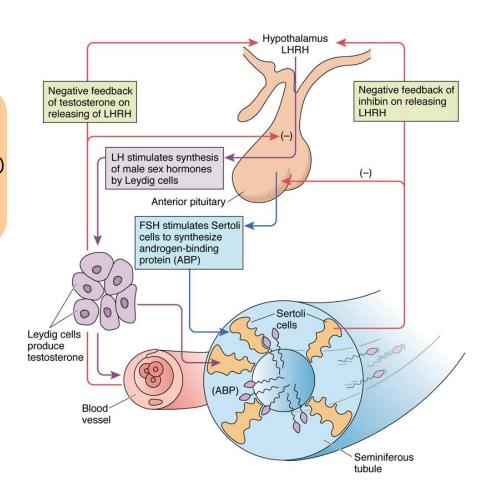


Sertoli cells

- ·Support , protect, and nourish
- Phagocyte
- ·Blood-testis barrier (zon. occlud.)
- ·Produce anti-mullerian hormone
- Produce fructose
- ·Produce inhibin (inh. FSH prod.)

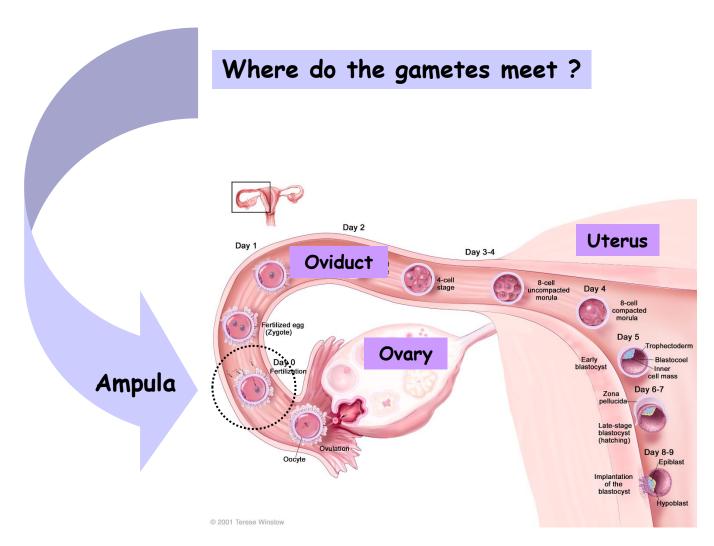
Leydig cells

- ·In interstitium
- ·10 % of testis
- ·Produce testosteron



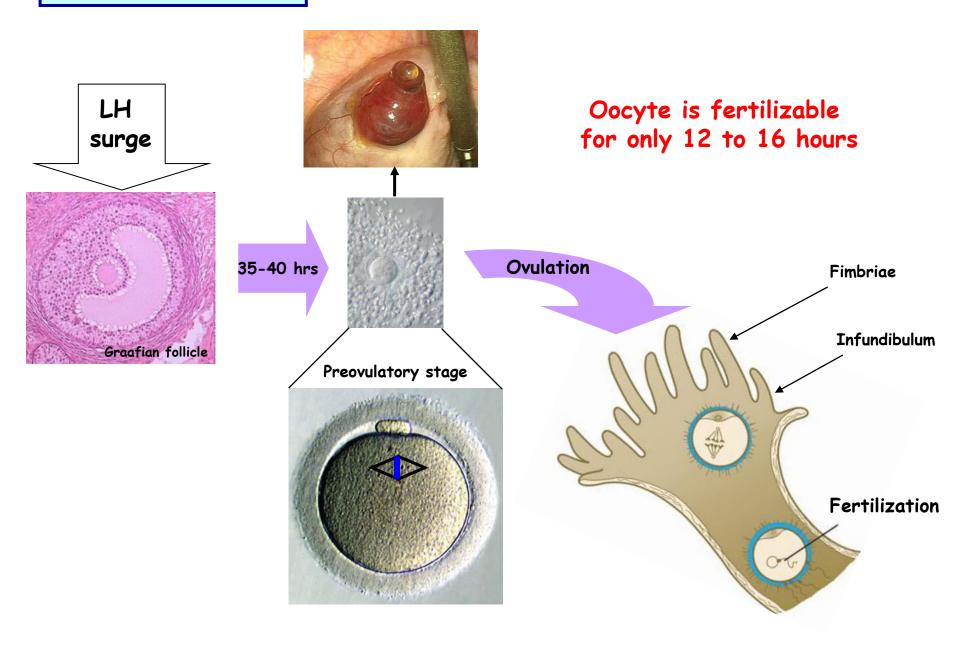
Fertilization (1)

= the process that culminates in the union of one sperm nucleus with the egg nucleus within the activated egg cytoplasm



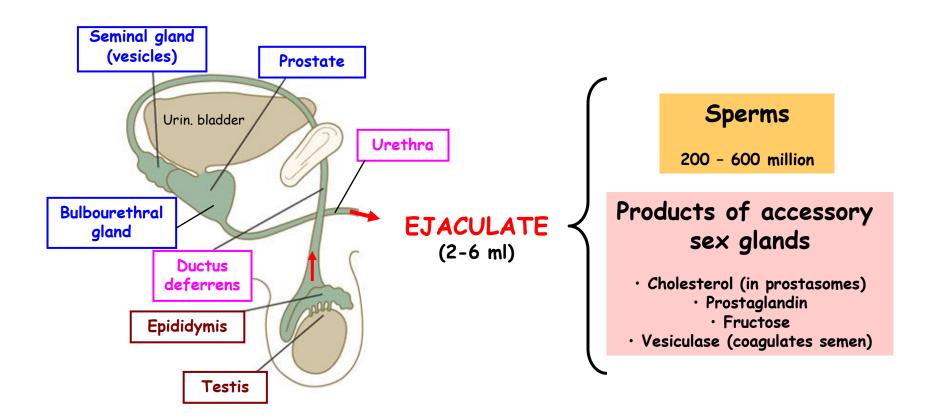
Fertilization (2)

Oocyte makes itself ready for being penetrated



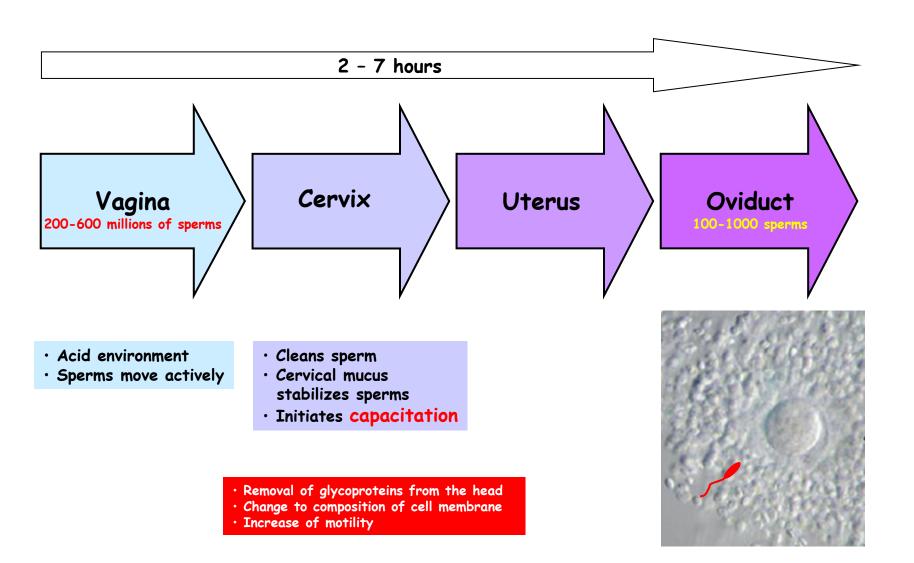
Fertilization (3)

Travel of sperm to the site of fertilization



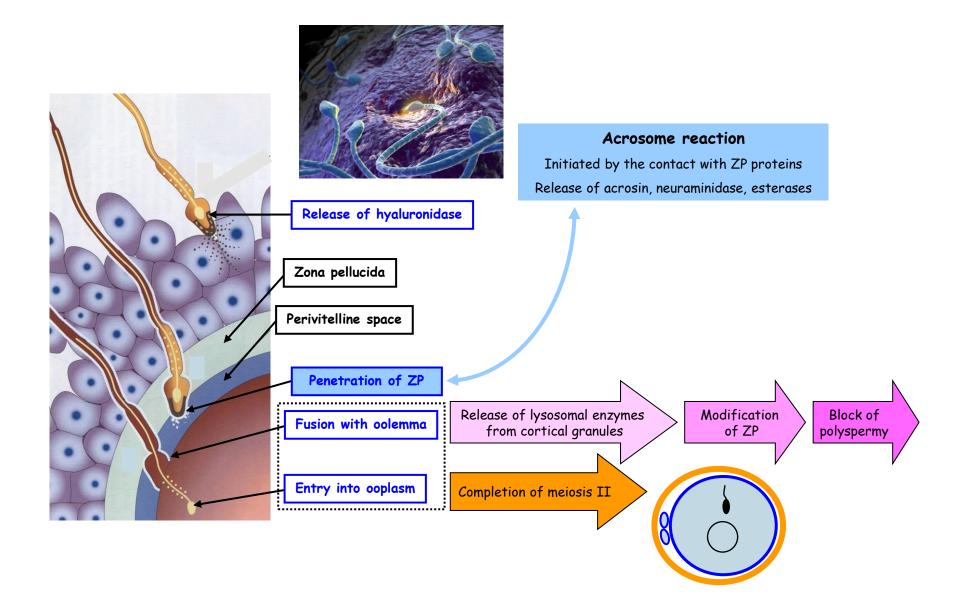
Fertilization (4)

Travel of sperm to the site of fertilization



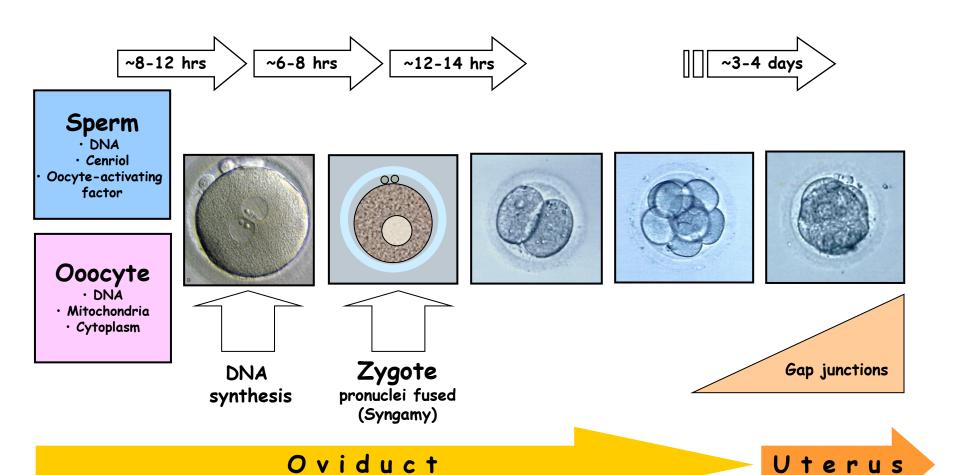
Fertilization (5)

Entry of sperm into the oocyte

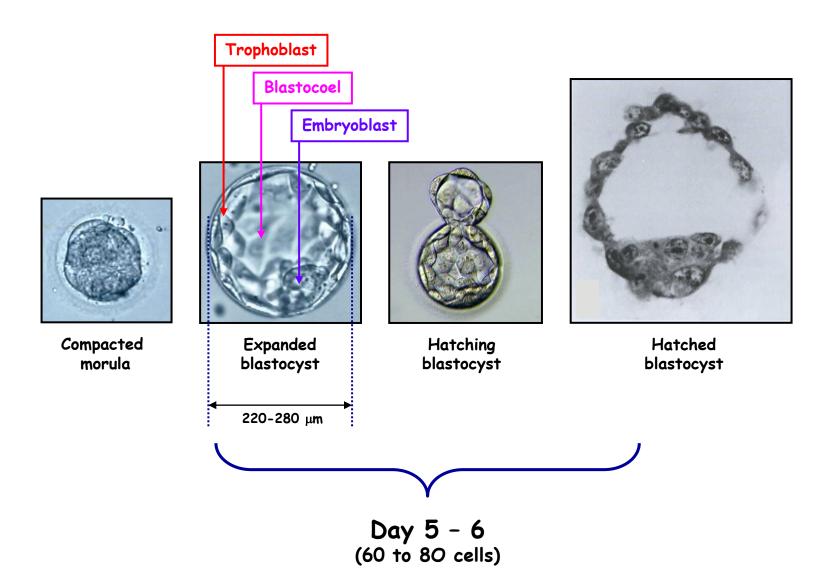


Fertilization (6)

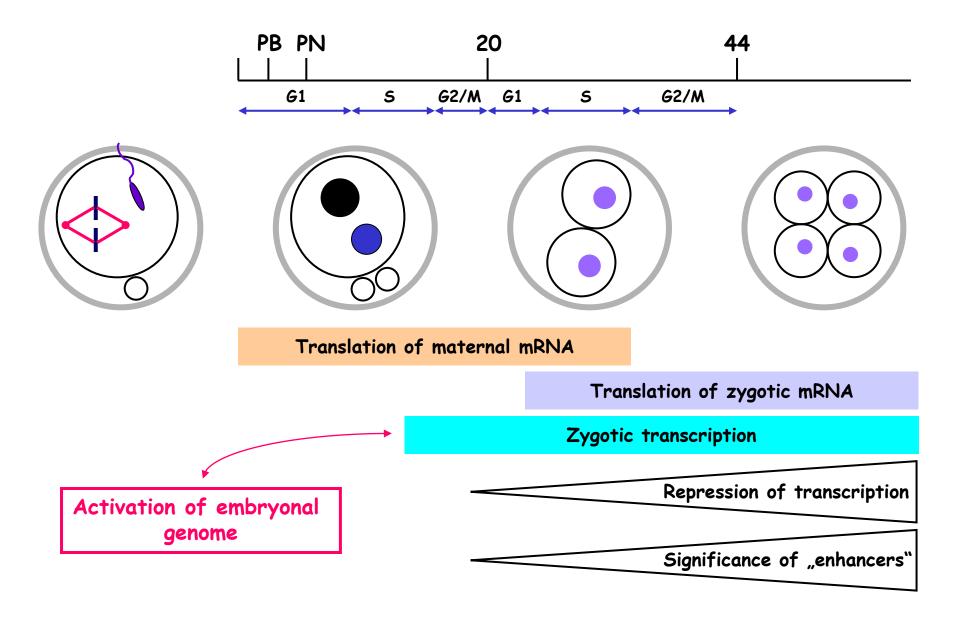
Zygote formation and the first cleavages



Blastocyst formation



A potency of oocyte cytoplasm



Activation of embryonal genome

It is not a single discrete event (first signs occur in zygote, in man it reaches its maximum in 4- to 8-cell embryo)

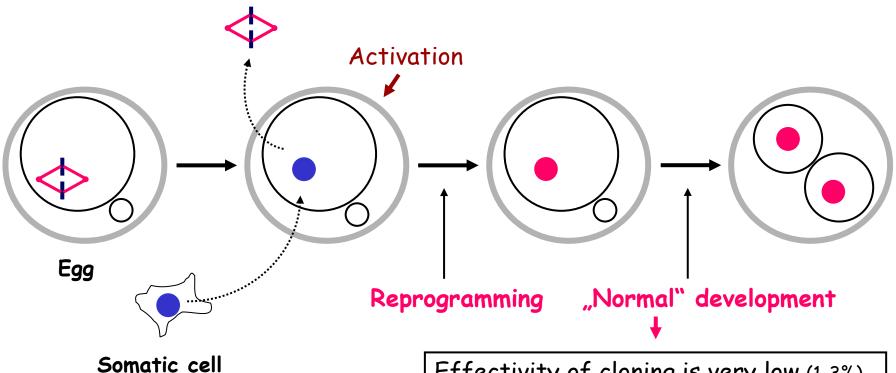
Transcrips that replace degraded maternal mRNAs

Novel transcripts that underlie new pattern of gene expression

It is "responsible" for establishment of totipotency of blastomeres &

It represents phenomenon known as genome REPROGRAMMING

Nuclear transfer (cloning) - principle



Effectivity of cloning is very low (1-3%)

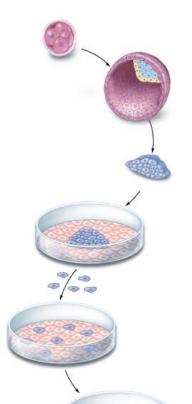
Reprogramming is slow and most likely incomplete (as the result, gene expression is often abnormal)

Effectivity of reprogamming depends on many factors (type of somatic cells, position in cell cycle phase, ...)



Human Embryonic Stem (hES) Cells

(Thompson et al, 1998)



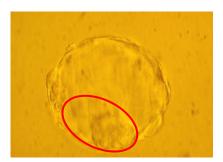
Early embryo at blastocyst stage

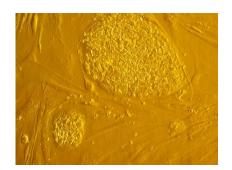


Isolated embryoblast after placing to in vitro conditions (+ feeder cells + FGF2)



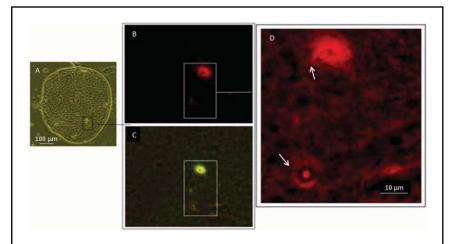
Propagation in culture by enzymatic disaggregation (repeated passaging)



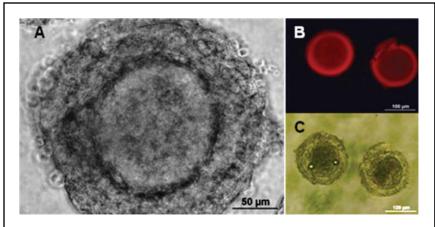


Derivation of postmeiotic germ cells from hESC

Prof. Harry Moore, University of Sheffield, 2009



- B) C-KIT
- C) I-97 antigen
- D) Cells with condensed chromatin and signs of flagellum



Structures that are highly reminiscent to oocyte-granulosa complexes (zona pellucida is not developed)

Thank you for your attention!

Questions and comments at: ahampl@med.muni.cz