# The female reproductive system

Aleš Hampl

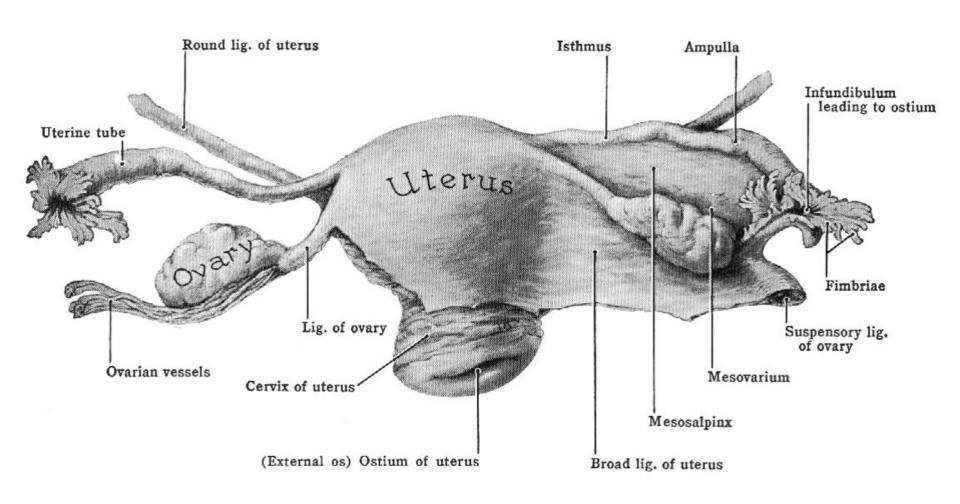
November 2023



#### Functions of the female reproductive system

- 1. Oogenesis
- 2. Copulation receives sperm from male
- 3. Hormone production
- 4. Provides sites for egg fertilization, implantation, and development
- 5. Acts as birth canal

## Female genital organs - Gross anatomy 1

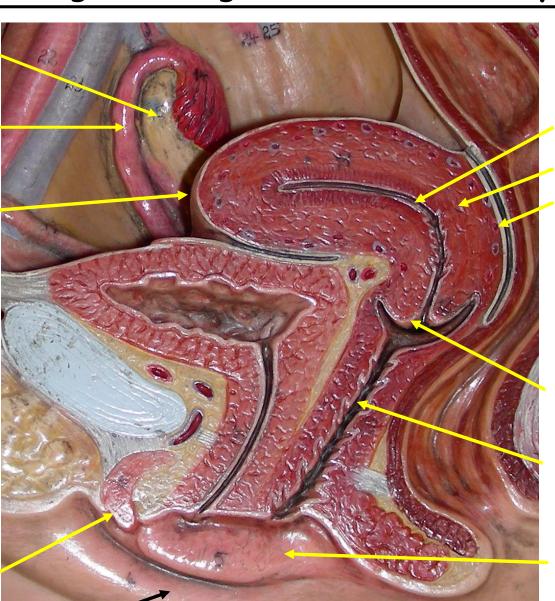


## Female genital organs - Gross anatomy 2

Ovary

Uterine tube (fallopian)

Fundus of **uterus** 



Endometrium Myometrium Epimetrium

Cervix of uterus

Vagina

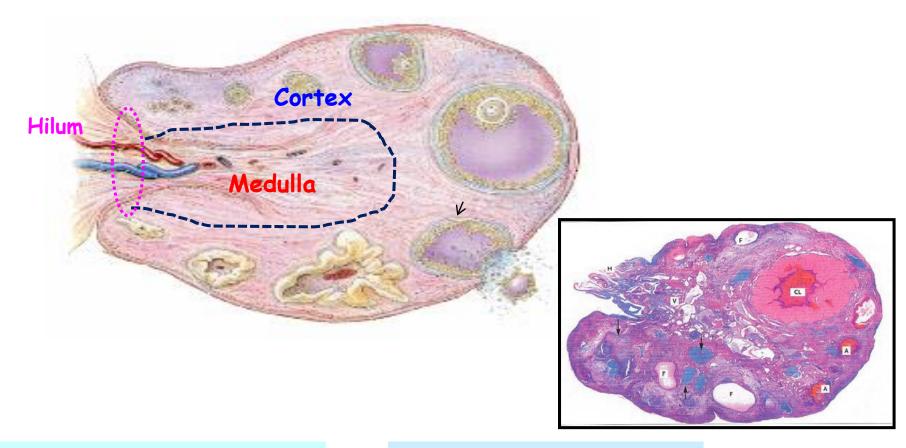
Labia minora

Clitoris

Labia majora

Length - 3 cm Width - 1.5 cm Thickness - 1 cm

## Ovary - Overall structure



#### Cortex

- Follicles
- · Highly vascularized stroma

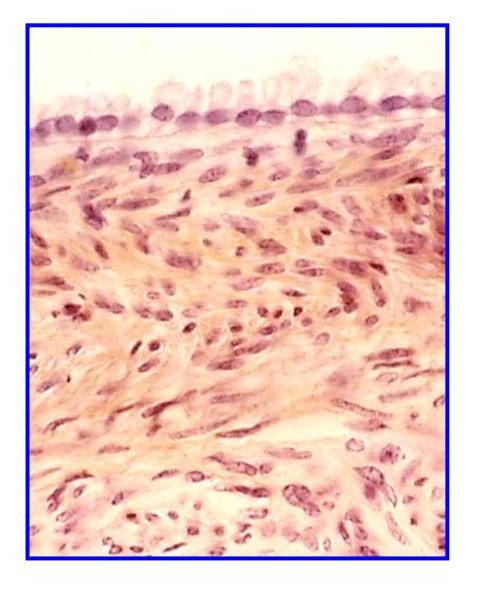
#### Medulla

- Vessels
- Loose connective tissue

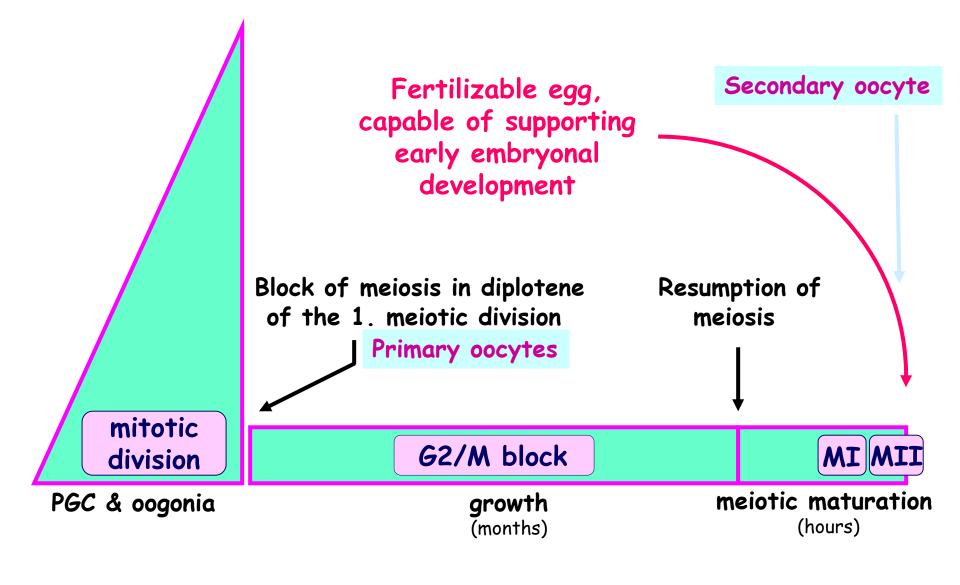


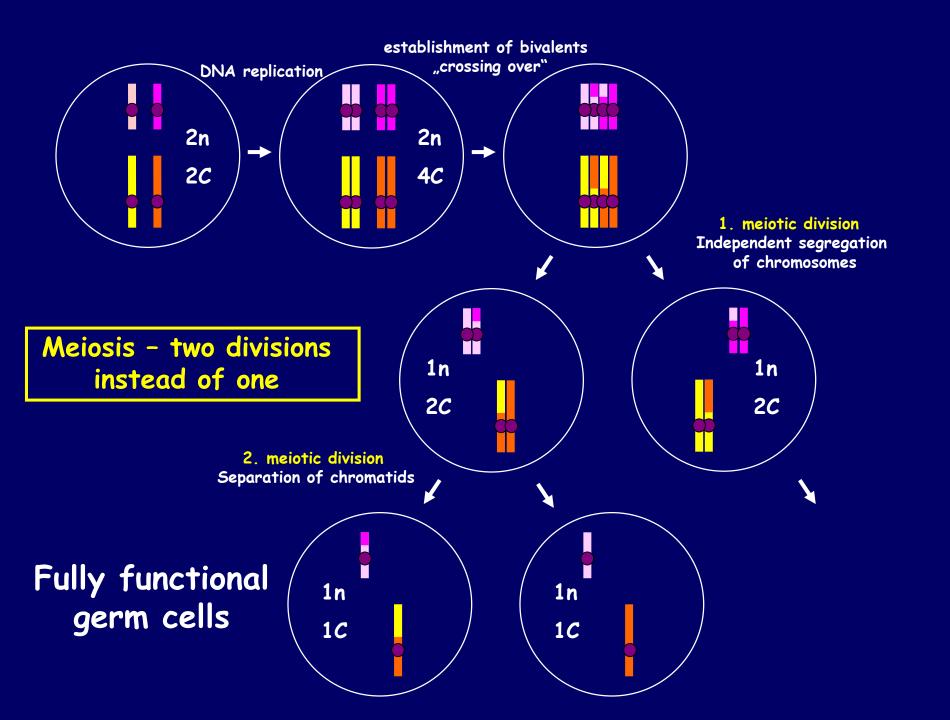
# Surface epithelium (germinal) cuboidal cells Tunica albuginea dense connective t.

# Ovary - Surface



#### Oogenesis - Key periods





#### Oogenesis - Lifetime summary

At the end of 6 month of fetal development ~ 6 - 7 millions of primary oocytes



Atresia

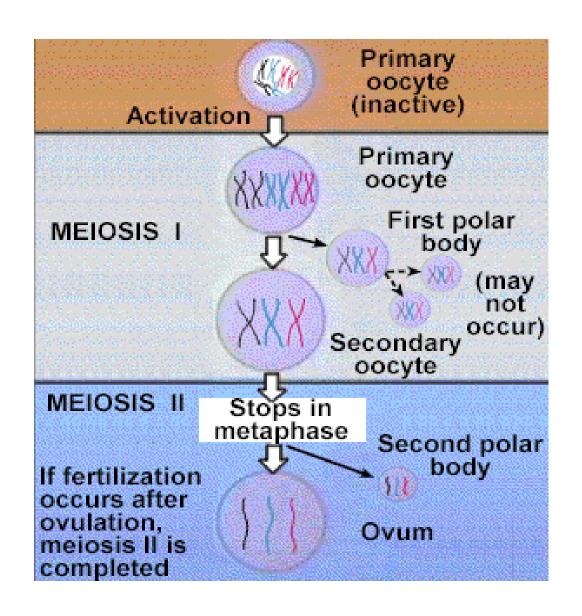
At the time of birth ~ 500 thousands of primary oocytes



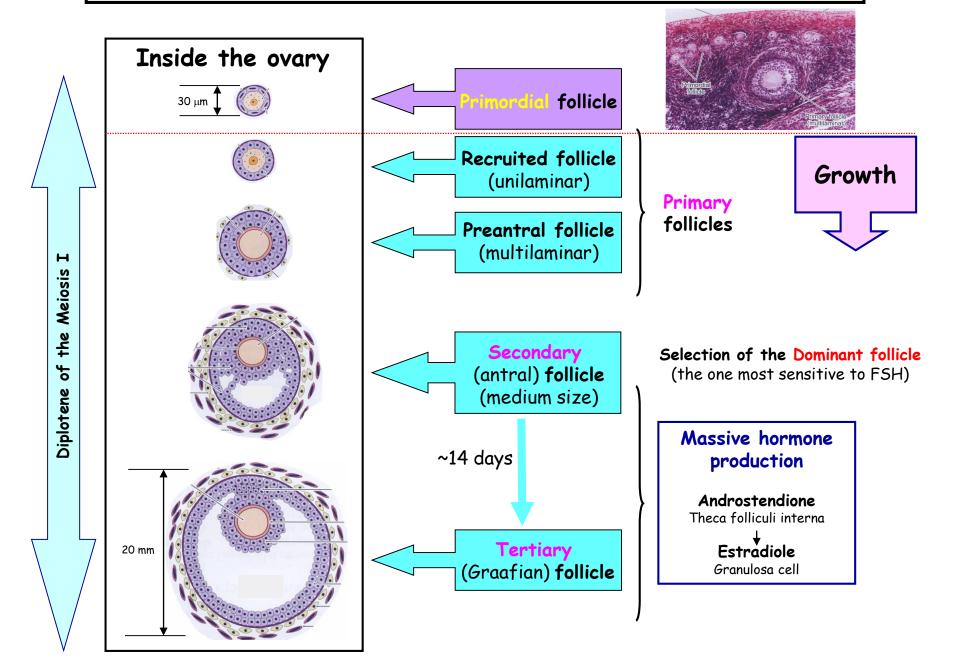
Atresia
Ovulation (~ 500 oocytes)

At the time of menopause max. 100 - 1000 remaining oocytes

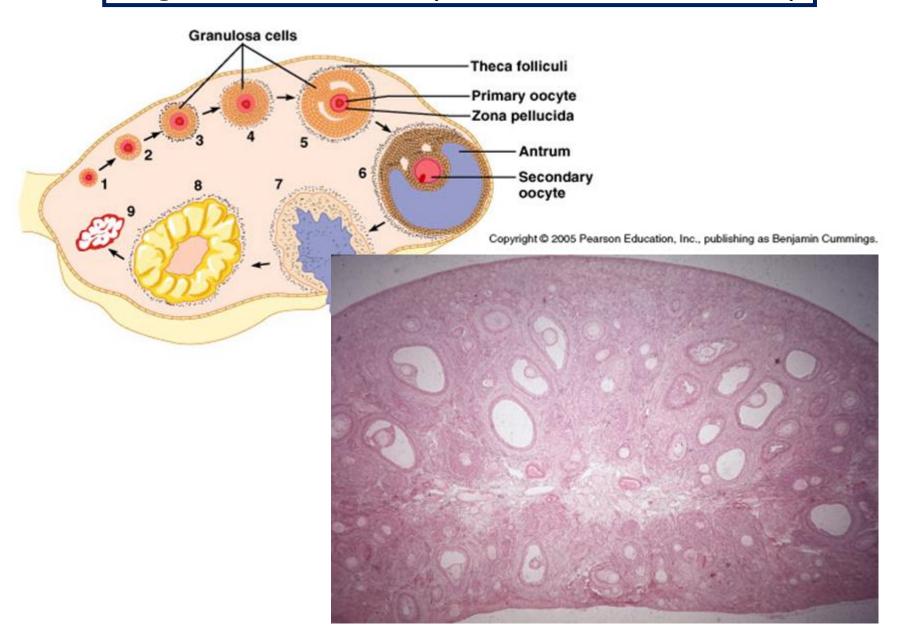
#### Oogenesis - Polar body production



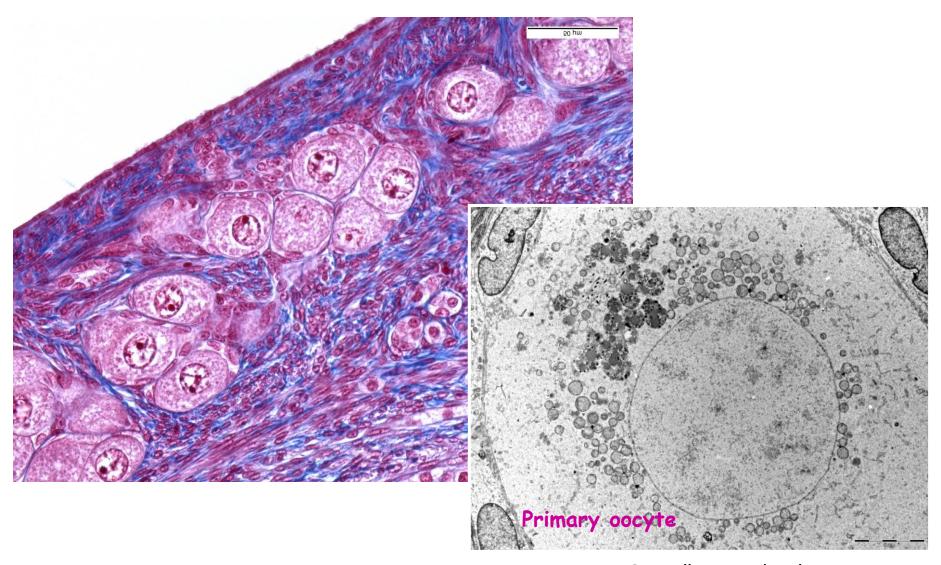
#### Ooogenesis - stages of the oocyte development



## Oogenesis - Overall picture inside the ovary

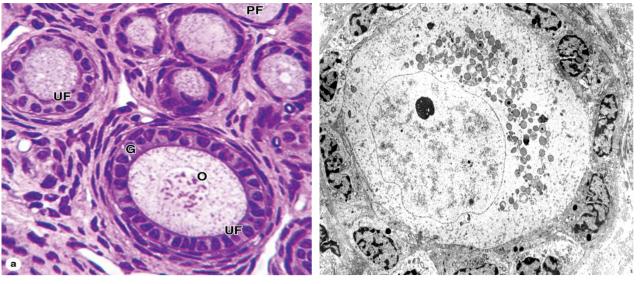


## Oogenesis - Primordial follicles

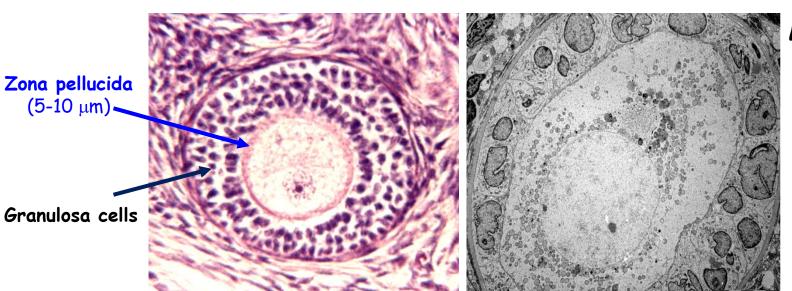


- · Organelles around nucleus
- · Abundant mitochondria
- · Abundant RER

## Oogenesis - Primary follicles

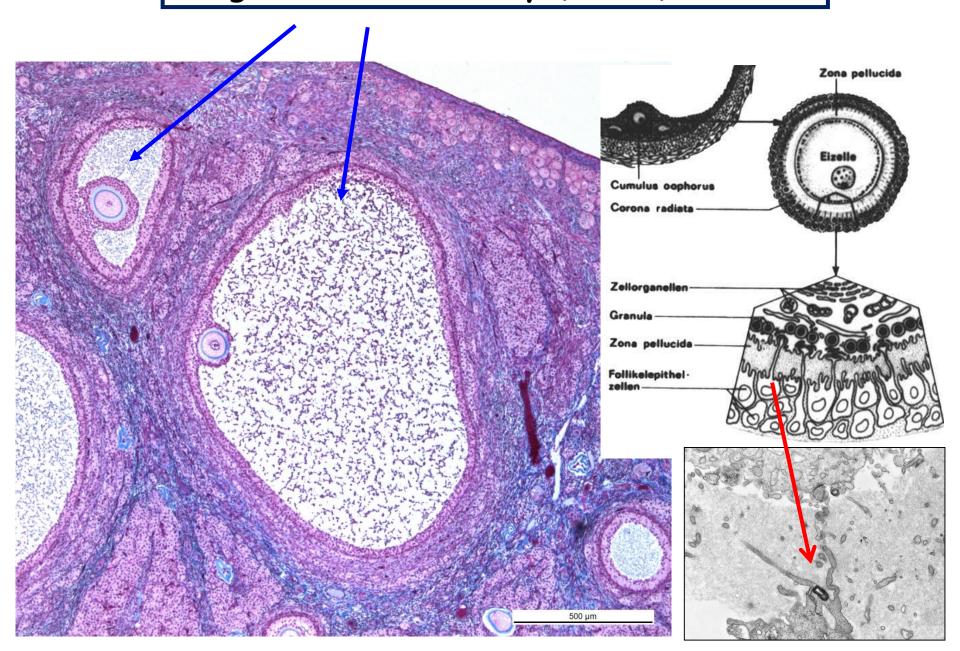


Unilaminar

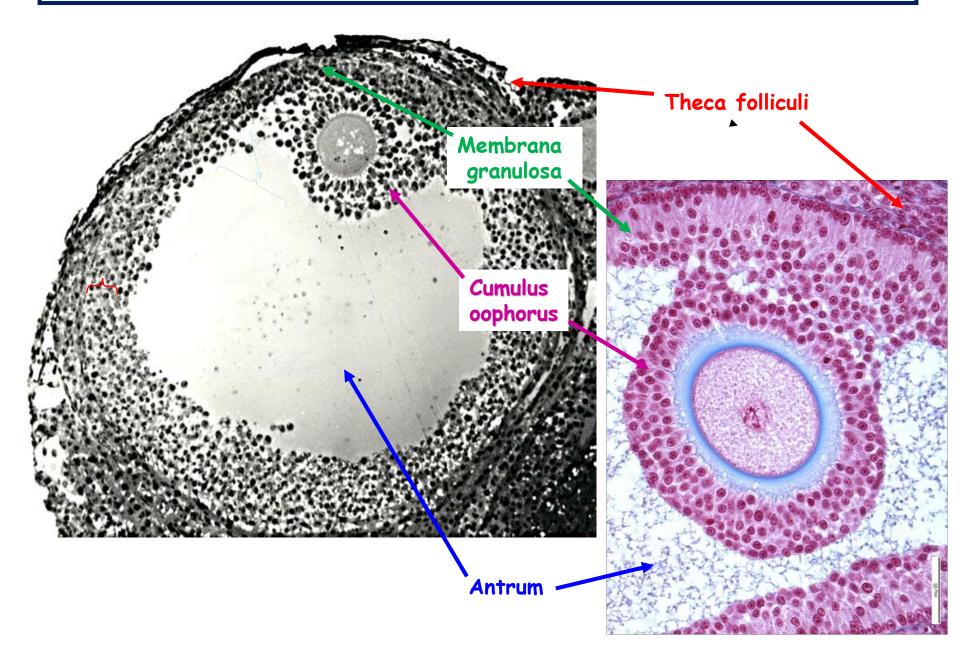


Multilaminar

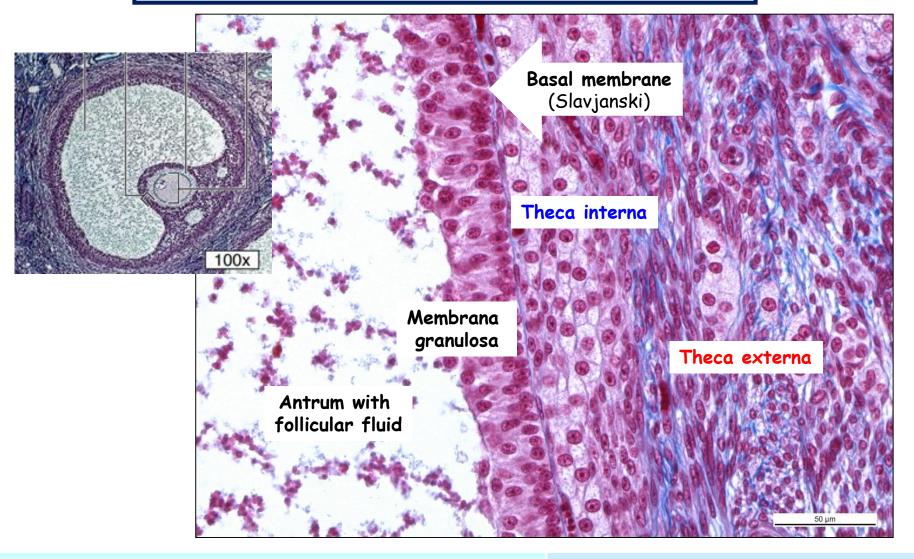
## Oogenesis - Secondary (antral) follicles



## Oogenesis - Tertiary (Graafian, preovulatory) follicle



## Oogenesis - Wall of tertiary follicle



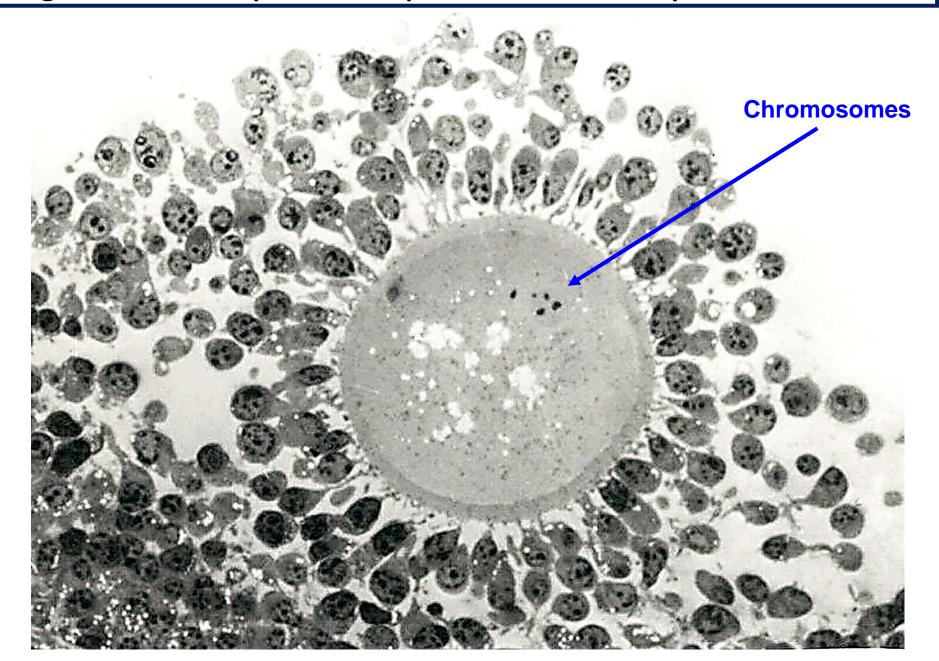
#### Theca interna

- Vascularized
- Androstendione to granulosa cells estradiol

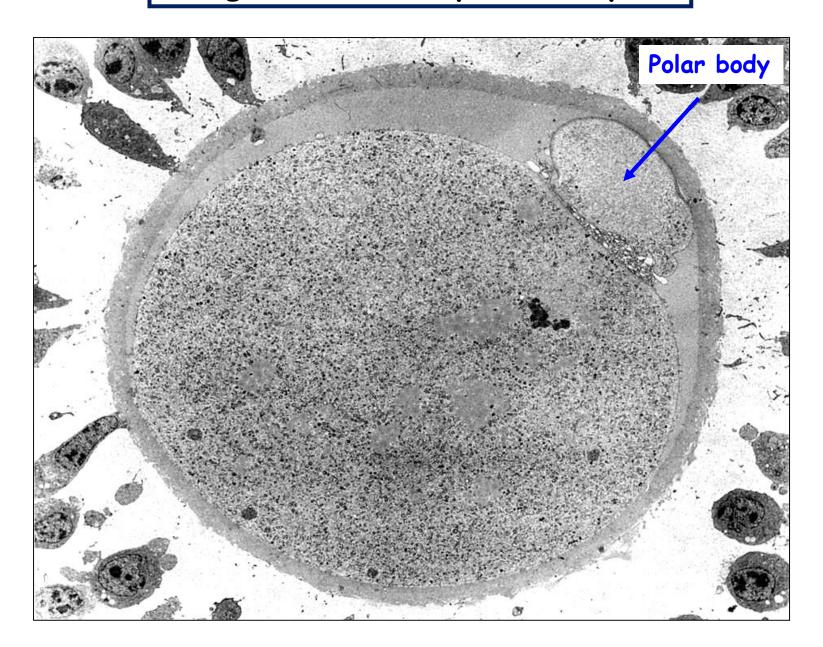
#### Theca externa

• Fibrous with smooth m. cells

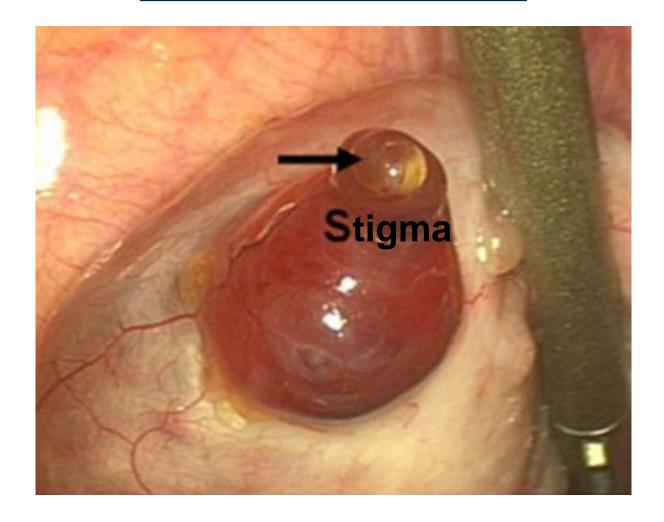
# Oogenesis - MI phase oocyte surrounded by corona radiata



## Oogenesis - MII phase oocyte



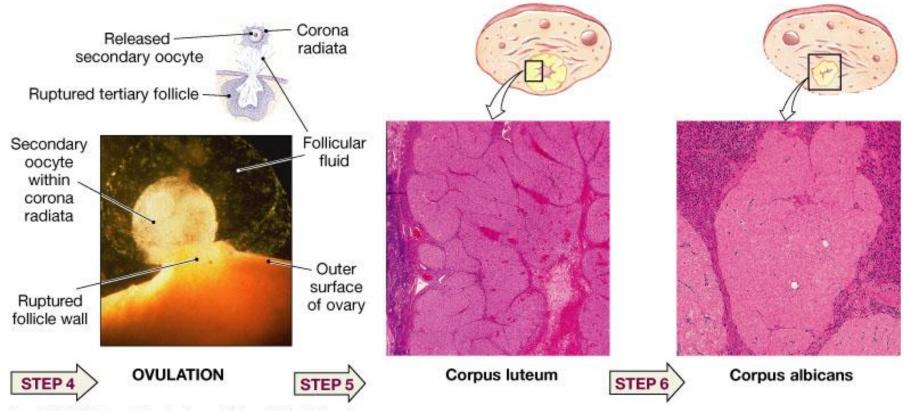
## Oogenesis - Ovulation



- initiated by LH surge no blood flow at stigma ischemia smooth muscle contractions theca f. externa

# Oogenesis - Ovulated oocyte





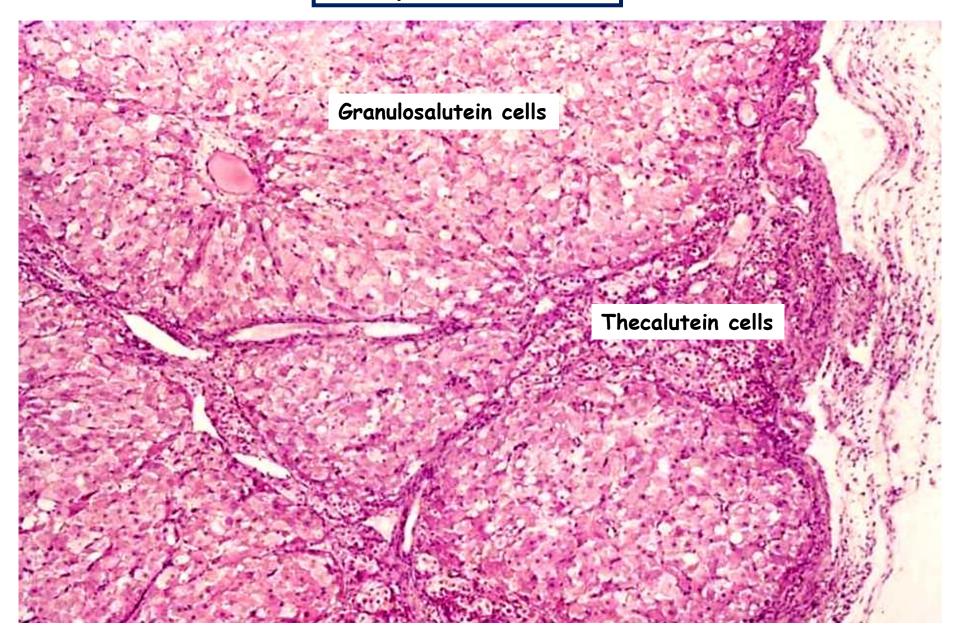
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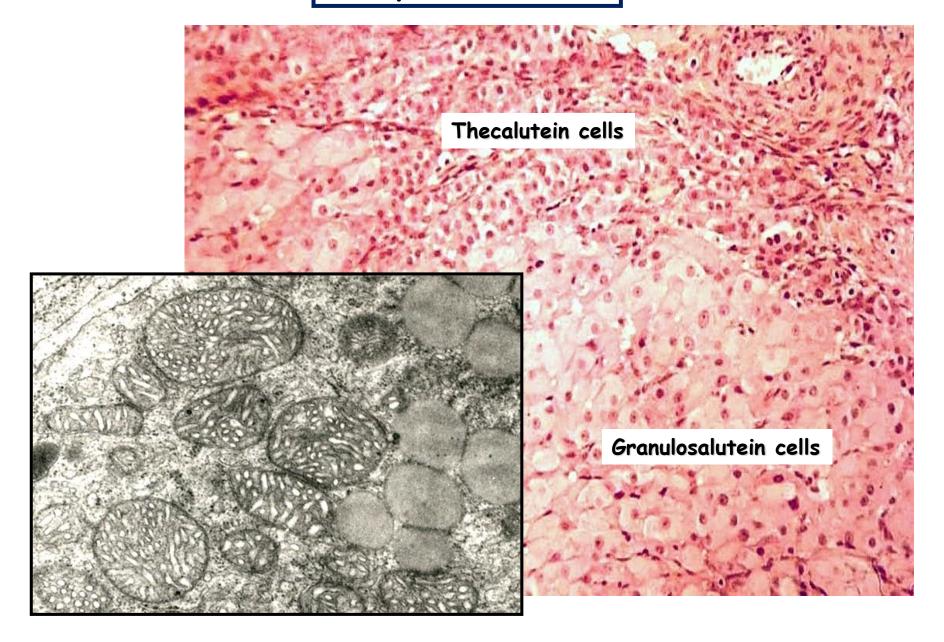
#### Granulosa cells - Granulosa lutein cells

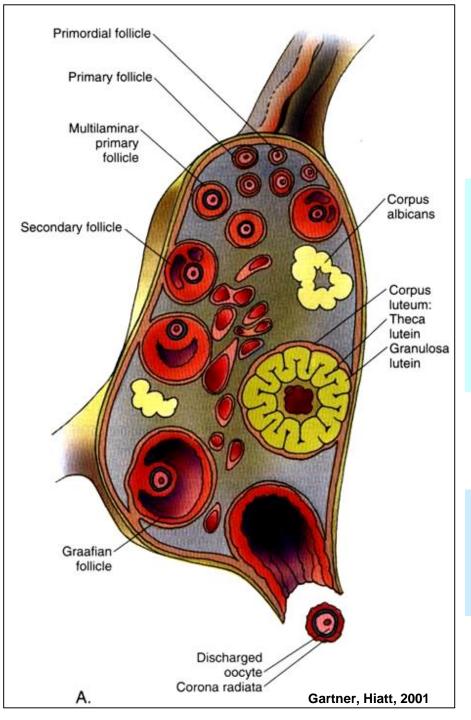
- large (20-30 μm)
- 80 % of CL
- convert androstendione to progesterone and estradiol

#### Theca interna cells - Theca lutein cells

- smaller (10-15 μm)
- production of steroids
- vascularized fenestrated caps.







#### CL graviditatis

- diameter 2 3 cm
- maintains pregnancy
- mantained by chorionic gonadotropin (HCG)
- maximal at 2 months
- changes to c. albicans at month 4-5

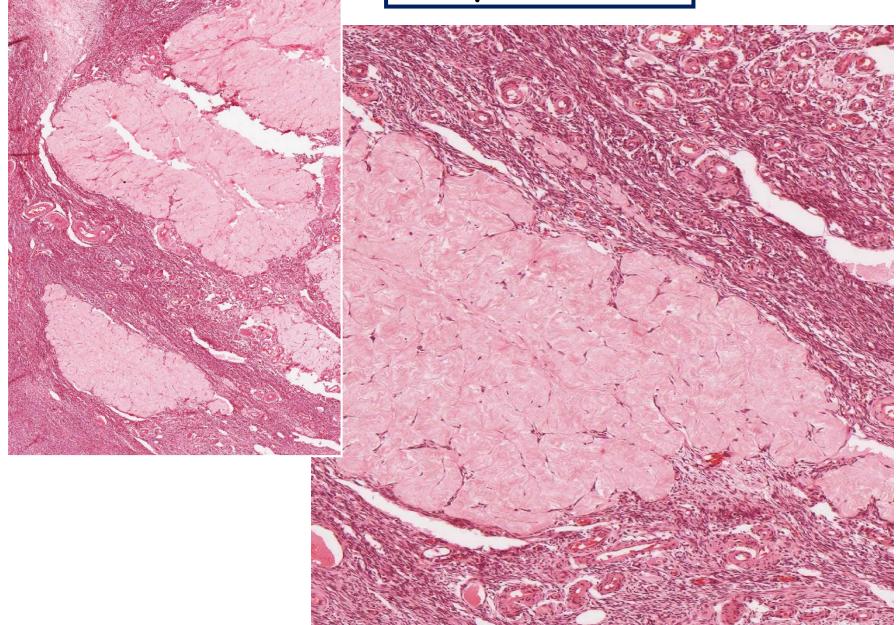
#### CL menstruationis

- 10 12 days
- changes to c. albicans
   (dense connective tissue collagen + fibroblasts)

## Corpus luteum & albicans

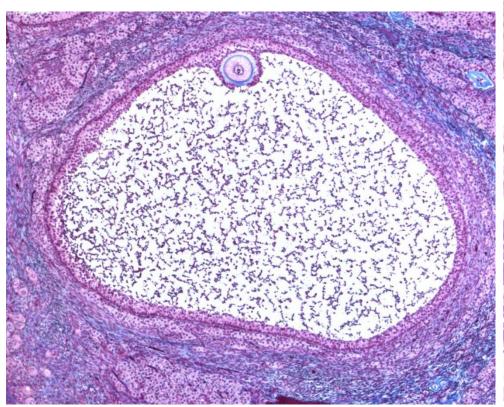


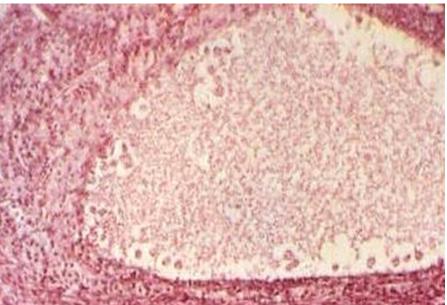
# Corpus albicans

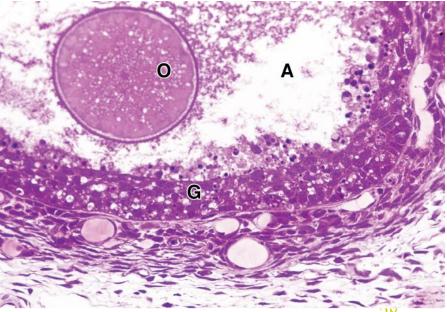


## Follicular atresia

- all types of follicles
  apoptosis of follicular cells
  autolysis (autophagy) oocytes
  phagocytosis by macrophages
  zona pellucida and basal lamina persist the longest time







#### Ovarian cycle - 28 days

#### Preovulatory phase

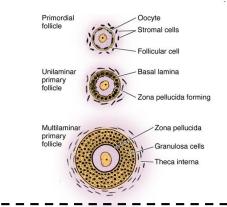
- days 1 to 14
- growth and maturation of follicles
- production of streid hormones

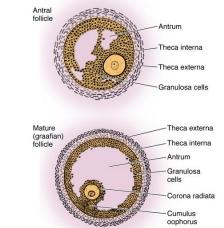
#### **Ovulation**

at day 15

#### Postovulatory phase

- days 16 to 28
- corpus luteum
- production of progesterone



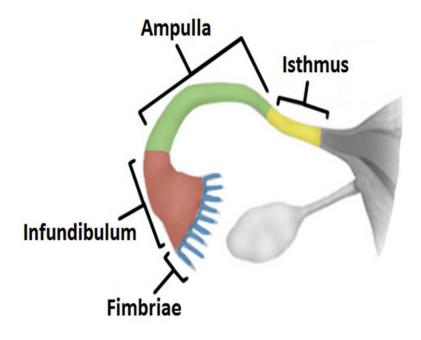


Mescher, 2010

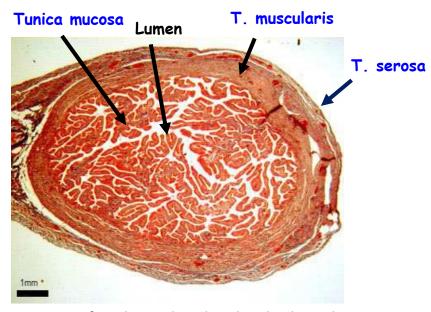


#### Uterine tubes = Fallopian tubes = Oviducts

- connect the ovaries to the uterus
- 12 to 15 cm long x 0.7 to 5 cm in diameter
- location of fertilization and early embryonic development

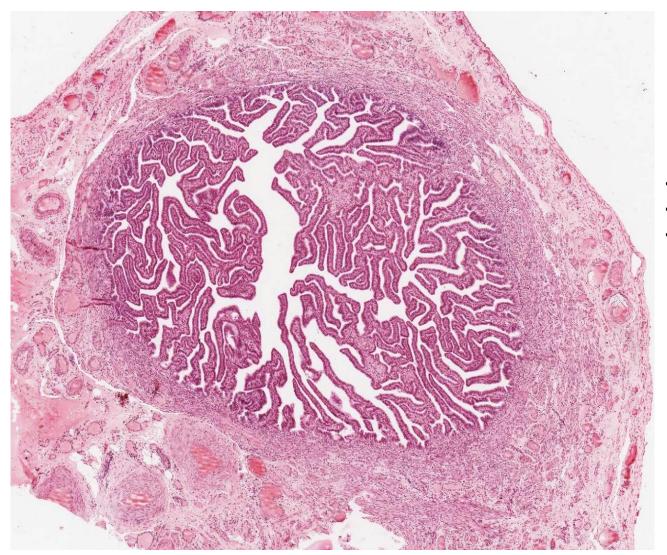


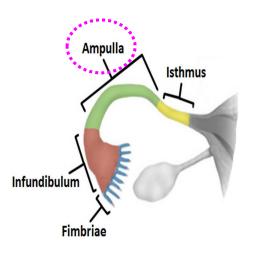
Teachmeanatomy.info



University of Leeds Histolgoy, histology.leeds.ac.uk

## Oviduct – Ampula

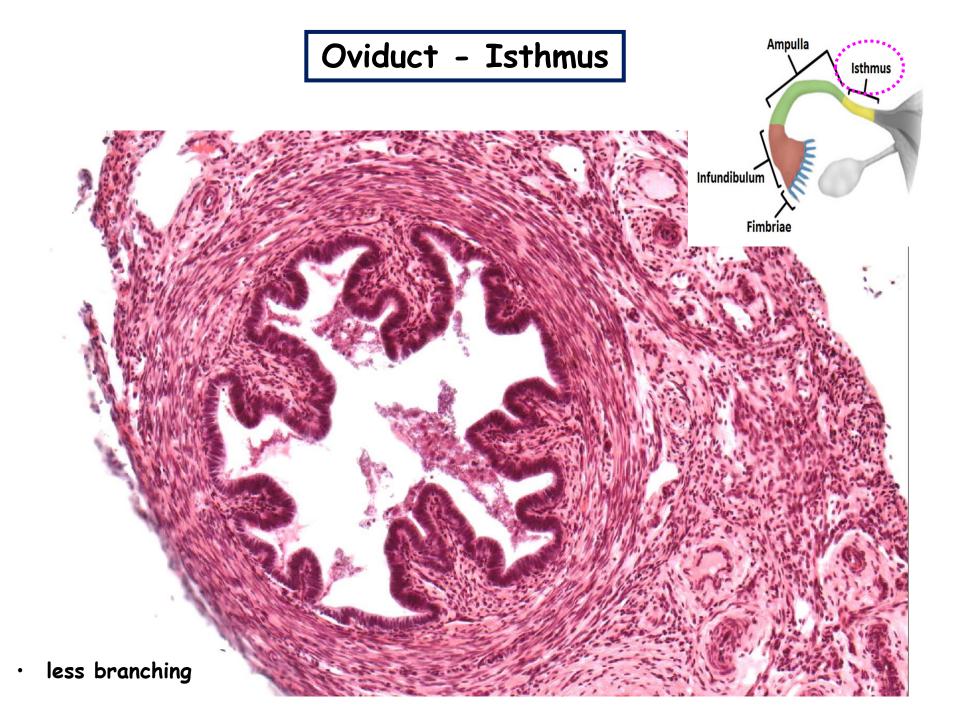




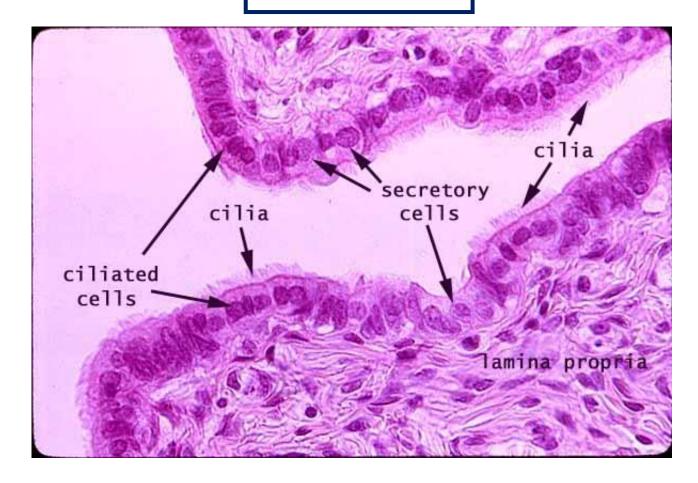
- highly branched mucosa
- longitudinal folds
- · labyrinth







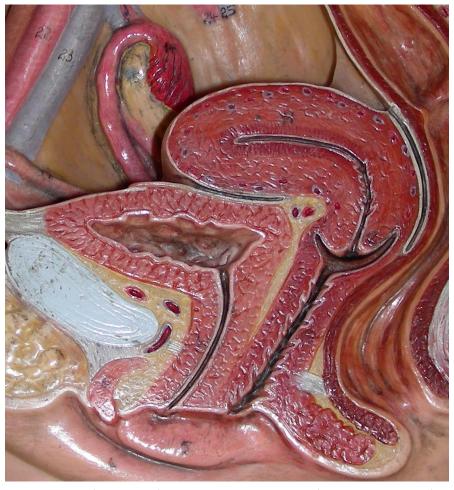
#### **Oviduct**



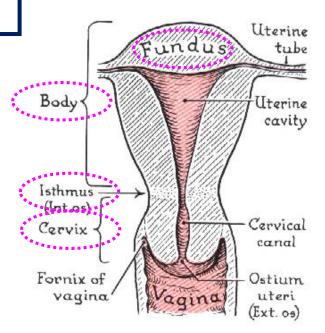
#### Tunica mucosa

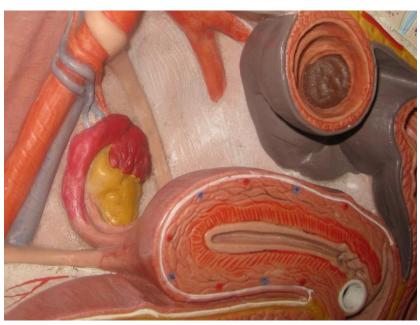
- lamina epithelialis simple columnar epithelium
- 1.) CILIATED CELLS -possess many cilia- transport of the ovum and embryo
- 2.) SECRETORY CELLS (PEG) secrete a nutrient rich medium
- lamina propria loose connective tissue (is richly vascularized!)

#### Uterus 1



- Mechanical protection and nutritional support to developing embryo
- Bends anteriorly (anteflexion)
- Stabilized by broad, uterosacral, round, and lateral ligaments

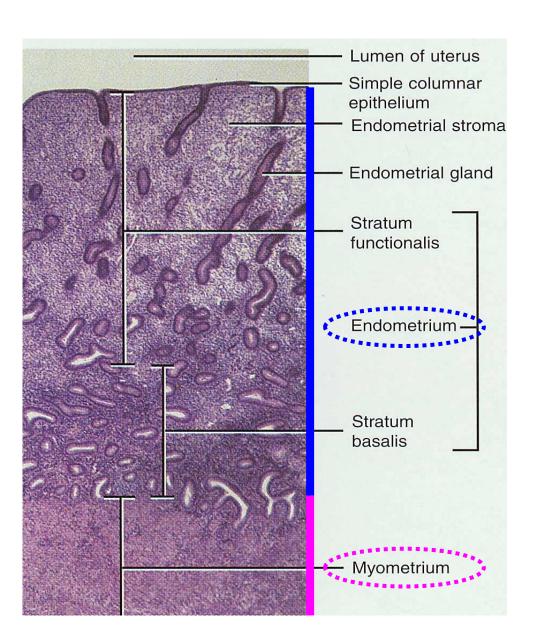




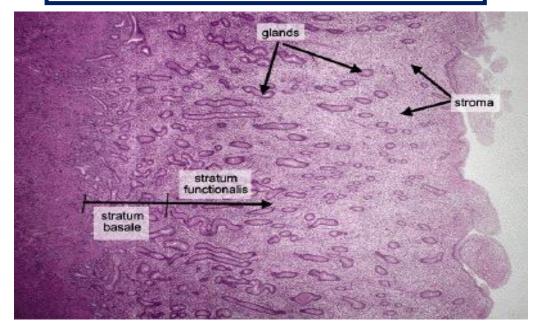
#### Uterus 2

#### Uterine wall ~ 1.5 - 2 cm

- 1. Endometrium T. Mucosa
- 2. Myometrium T. muscularis
- 3. Perimetrium T. Serosa



#### Uterus - Endometrium 1



Dartmouth Medical School, Virtual Histology http://www.dartmouth.edu/~anatomy/Histo

- consists of lamina epithelialis and lamina propria
- epithelial lining simple columnar epithelium containing secretory and ciliated cells
- lamina propria loose connective tissue with many stellate fibroblasts, contains abundant amorphous ground substance uterine glands simple tubular glands (covered by simple columnar epithelial cells)

#### 1. Stratum functionalis (~ 5 mm)

- o exhibit dramatic changes during menstrual cycle every month (hormone-driven)
- shed during menstruation!

#### 2. Stratum basale (~ 1 mm)

- o undergoes little changes during the menstrual cycle
- o not shed during menstruation!
- o provides a new epithelium and lamina propria for the renewal of the endometrium!

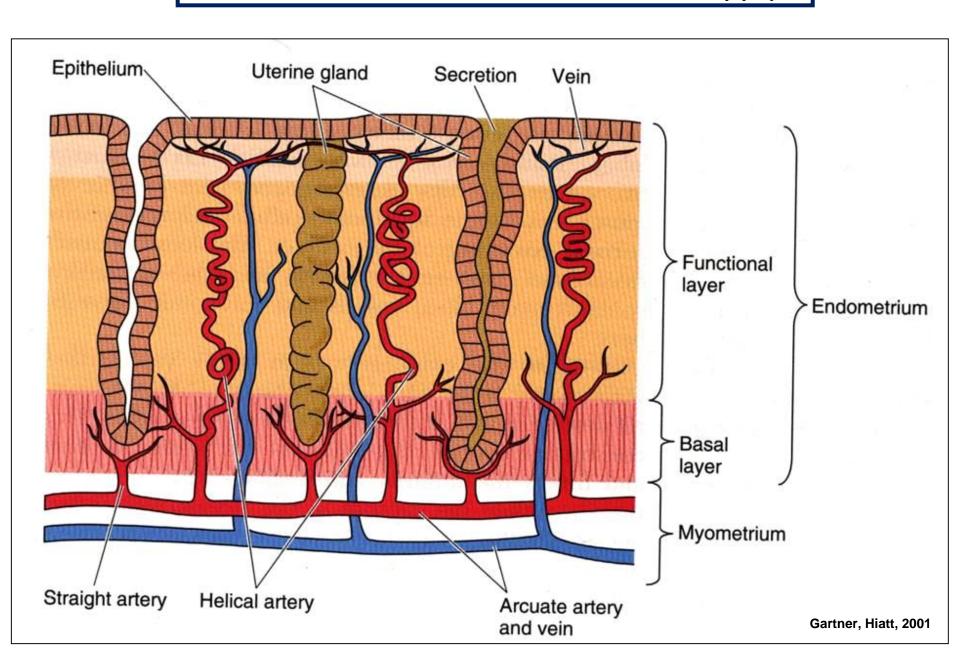
## Uterus - Endometrium 2

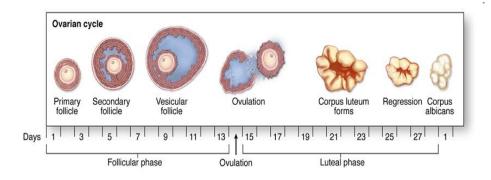
Simple columnar epithelium

Endometrial glands

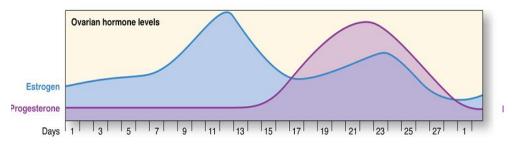


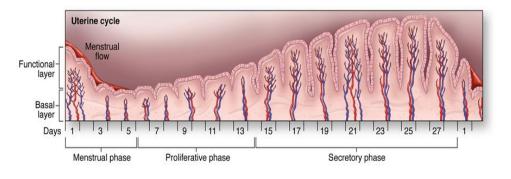
# Uterus - Endometrium - Blood supply





# Gonadotropin levels PSH LH Days The state of the stat





#### Uterus - Menstrual cycle

(28 days)

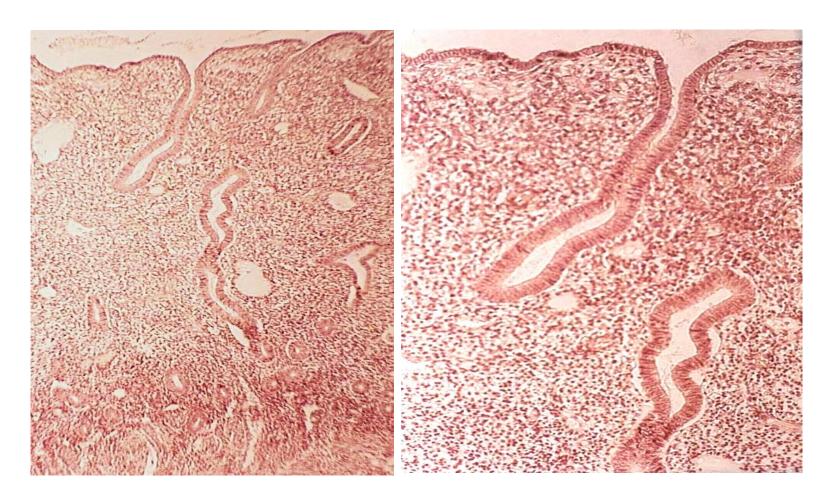
Menstrual phase (days 1 - 4)

Proliferative phase (days 5 - 15) (driven by estrogens)

Secretory phase (days 16 - 27) (driven by progesteron)

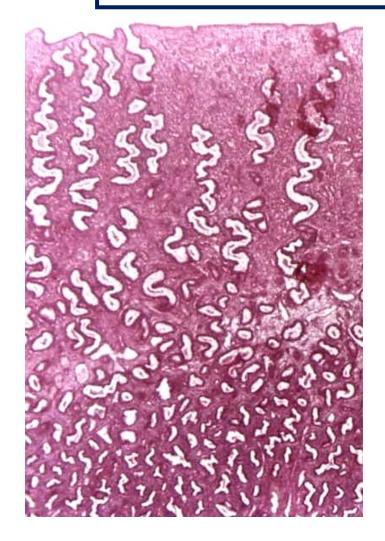
Ischemic phase (day 28)

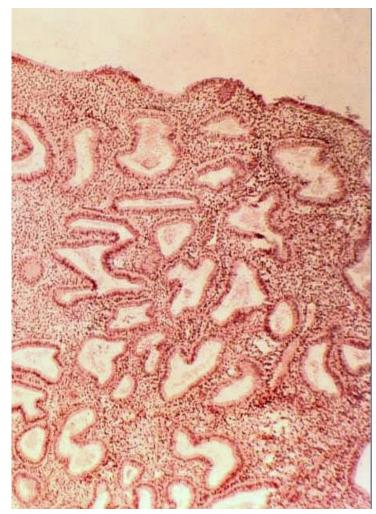
## Endometrium - Proliferative phase



- · rising estrogen from the developing follicles
- · the stratum basalis is regrowing the stratum functionalis new glands form
- · long and straight uterine glands which are not yet functional

#### Endometrium - Secretory phase

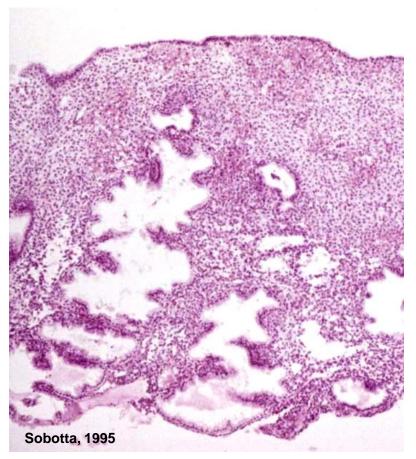


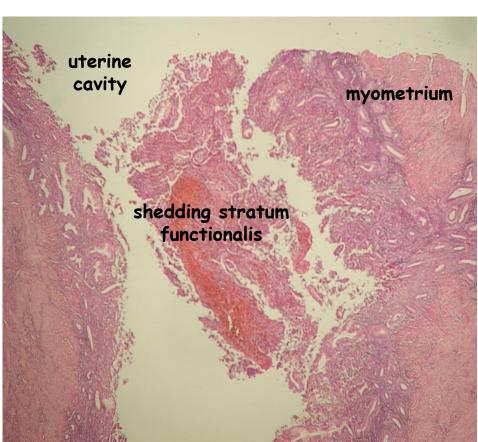


Sobotta, 1995

- · under the control of estrogen and progesterone from the corpus luteum
- · the uterine glands of the stratum functionalis begin to function, producing glycogen
- · the curvy and dilated glands and elongated spiral arteries

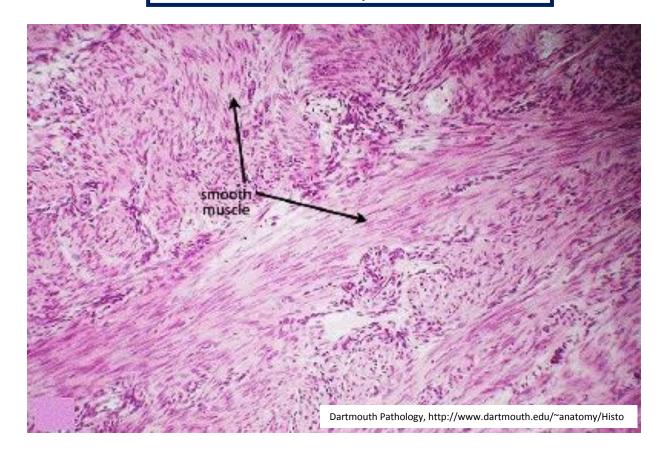
#### Endometrium - Menstrual phase





- · lack of estrogen and progesterone from the dead corpus luteum
- the stratum functionalis dies and loses its anatomical integrity, breaking lose and shedding from the stratum basalis

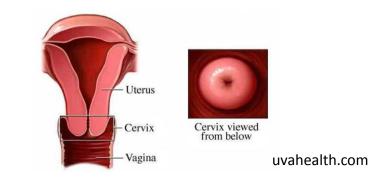
## Uterus - Myometrium

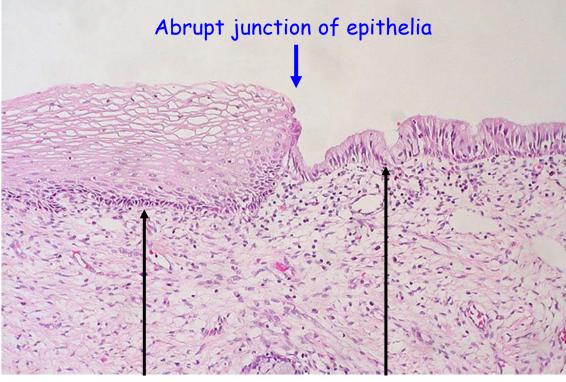


- three interwoven layers of smooth muscle
- · during pregnancy smooth muscle cell hyperplasia + hypertrophy
- · contract in response to oxytocin during labor to expel the fetus from the uterus

#### The Cervix + Orificium externum uteri

- 2-3 cm in length
- cylindrical shape
- cervical canal connects lumen of uterus to lumen of vagina
- numerous mucous glands
- changes thickness throughout ovulation cycle
- important for pregnancy and childbirth
- contributes to capacitation

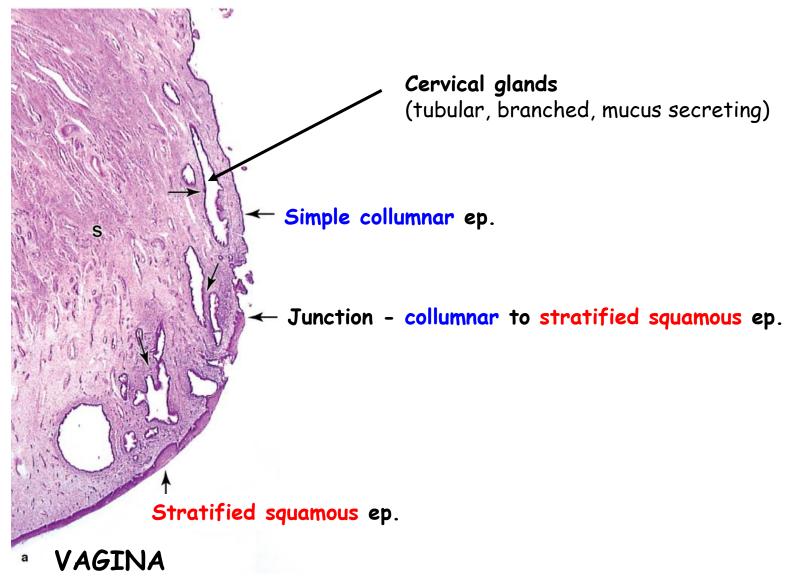




Stratified squamous ep.

Columnar ep.

## The Cervix

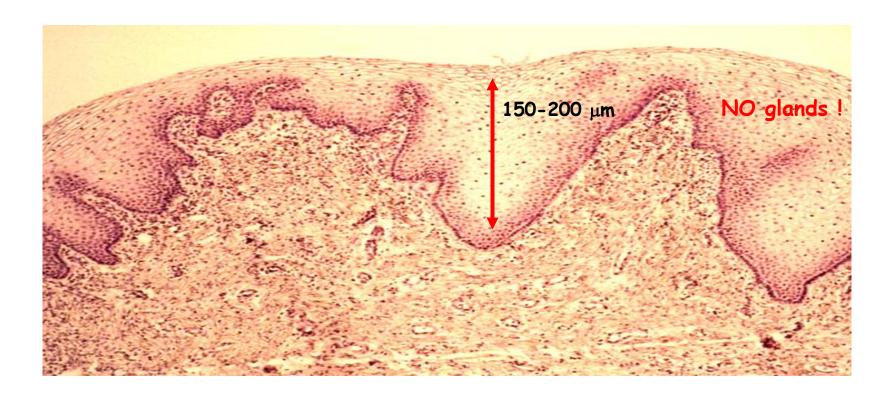


# Vagina 1

- receives sperm during copulation
- serves as birth canal

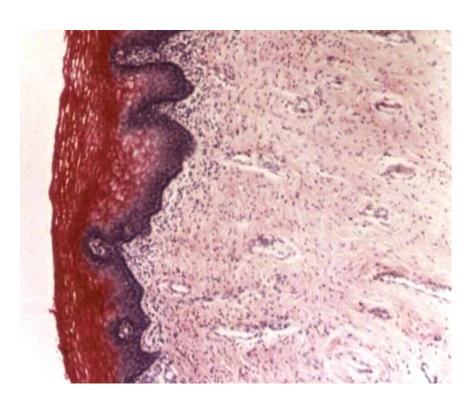
#### 3 tissue layers

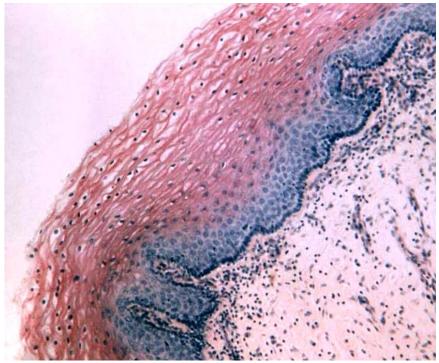
- a) mucosal layer inner layer; non-keratinizing stratified squamous
- b) muscular layer middle layer; smooth muscle in two layers
- c) adventitia outer layer; areolar connective tissue



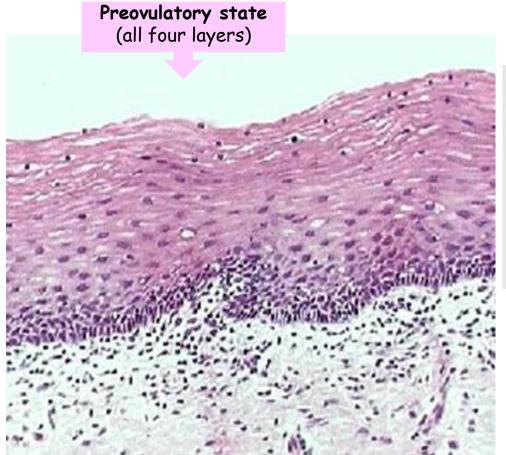
# Vagina 2

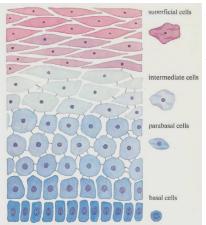
Epithelial cells sythesize and accumulate glycogen (upon stimulation by estrogens)





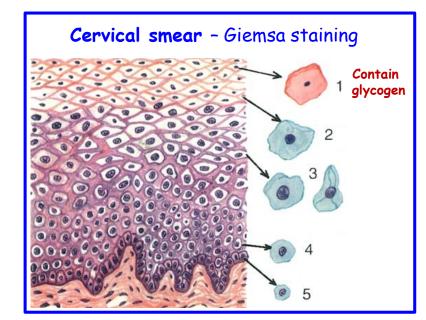
# Vagina 3





#### Released after ovulation

- glycogen Lactobacillus
- acidification





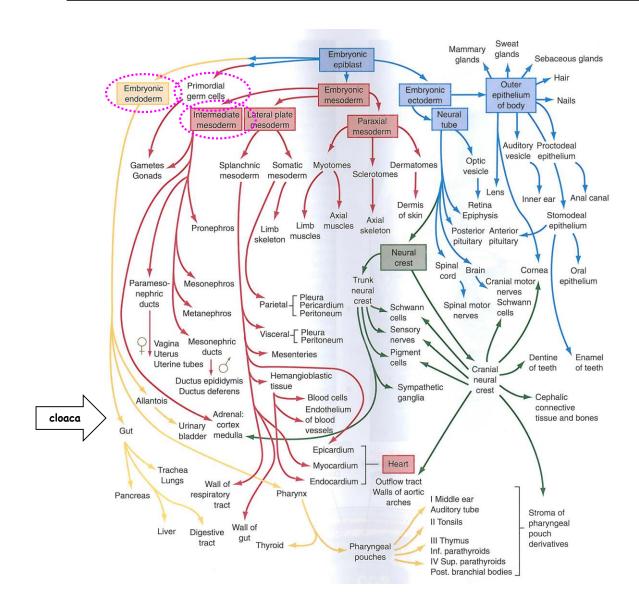
Covered by hairless skin

Nerves Veins

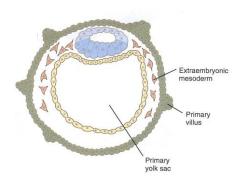


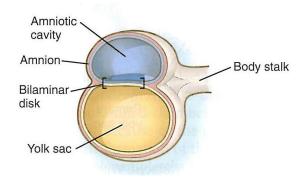


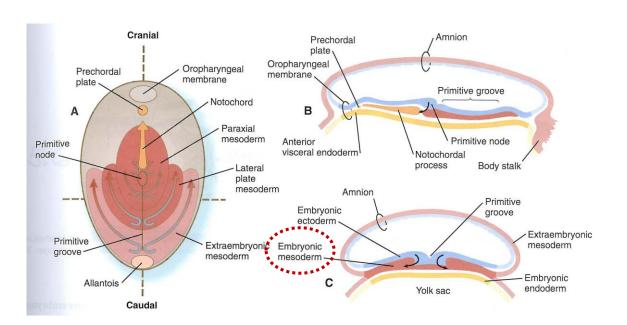
# Urogenital system - Overall picture



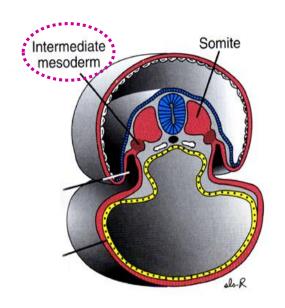
## Urogenital system - Reminder

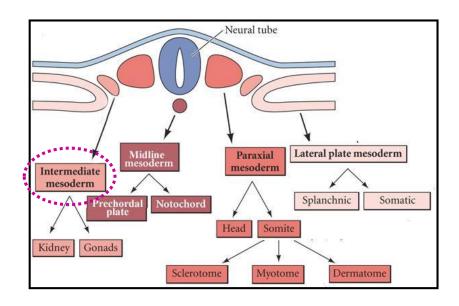


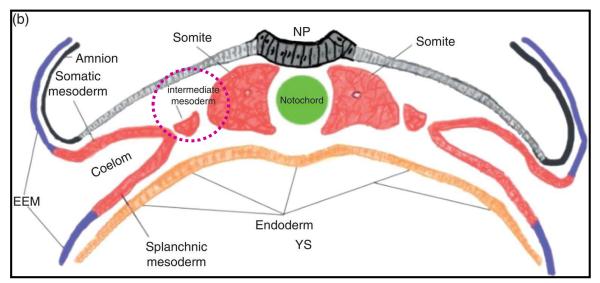




# Urogenital system - Intermediate mesoderm





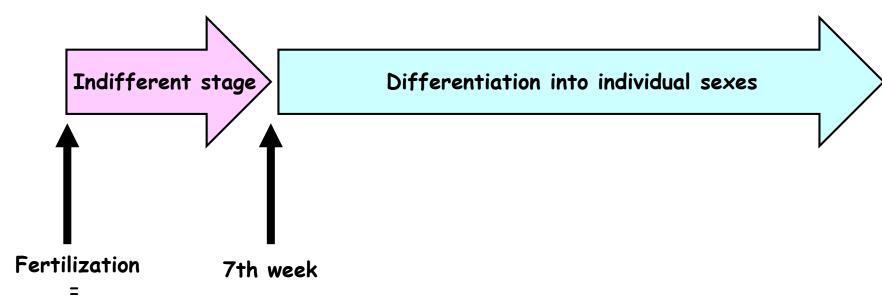


## Genital system

Sexual dimorfism - individual can only have one type of genital organs

#### Genetic determination:

- Heterogametic (XY) male
- Homogametic (XX) female

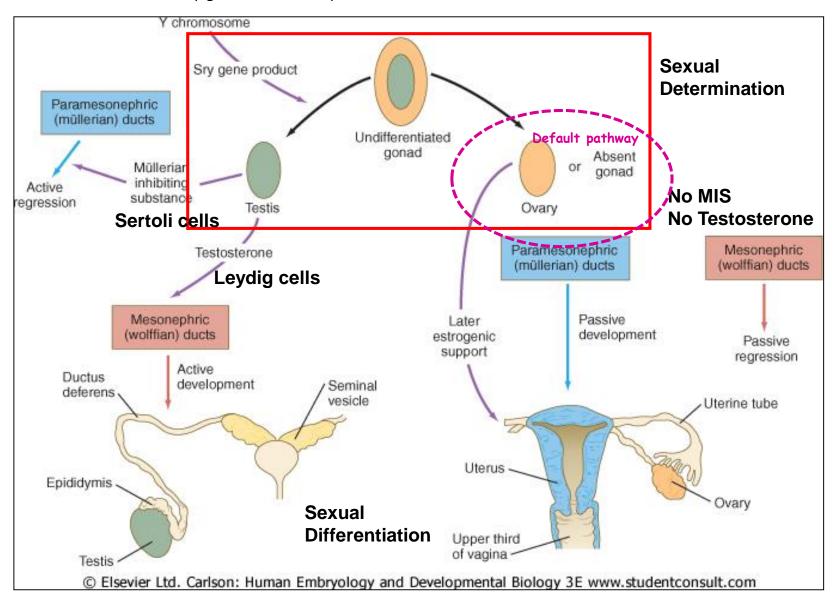


genetic gender established (Barr body)

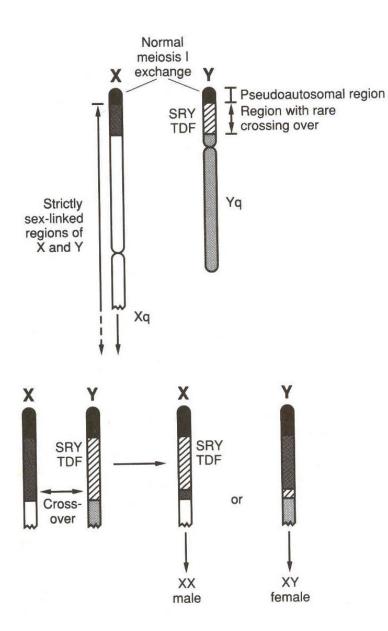
## Genital system - Sry gene

Y chromosome decides XXY - male X0 - female

Sry gene - Sox family TF - on short arm of Y chromosome

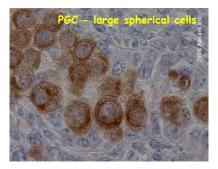


## Genital system - Sry gene

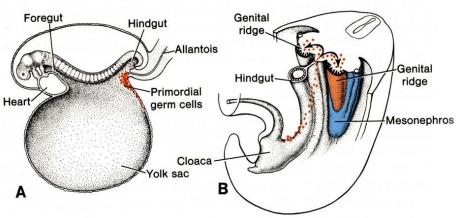


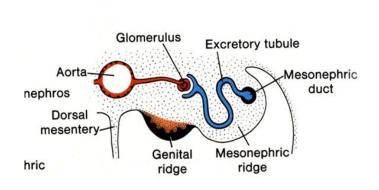
Pairing of X and Y chromosomes in pseudoautosomal region during meiosis

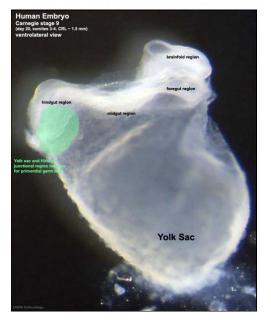
Rare crossing-over causes translocation of SRY to X chromosome: XY females or XX males



## Genital system - Primordial germ cells

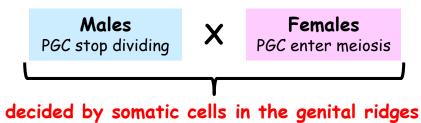




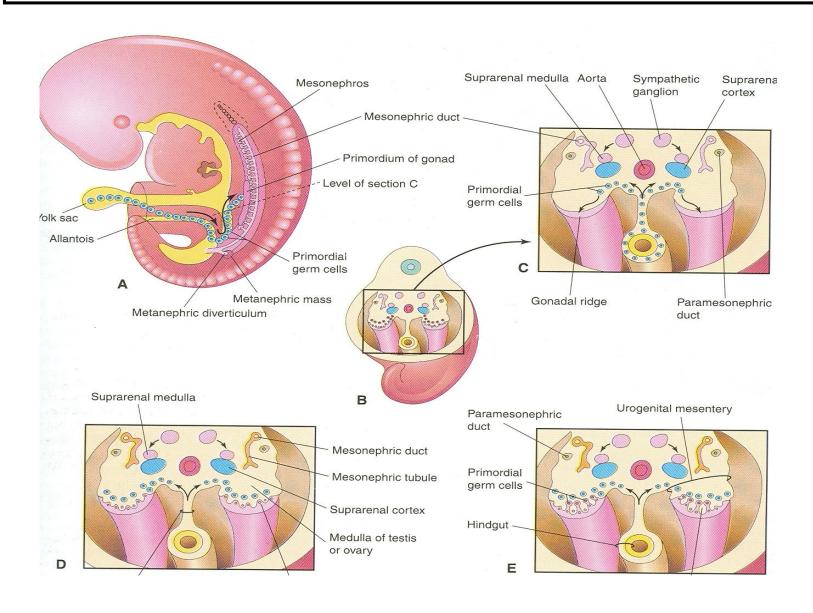


#### Primordial germ cells (PGC)

- · first recognizable at day 24
- from epiblast-derived extraembryonic msoderm
- · few cells among endodermal cells of the yolk sac
- they migrate through the dorsal mesentery of the hindgut
- · migrate towards genital rigdes (plicae genitales)
- proliferate during migration
- reach (1-2 thousands) genital ridges on week 6 of gestation



## Genital system - migration of PGC into gonadal anlagen

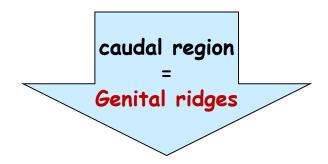


## Genital system - gonadal anlagen

#### Steroidogenic mesoderm

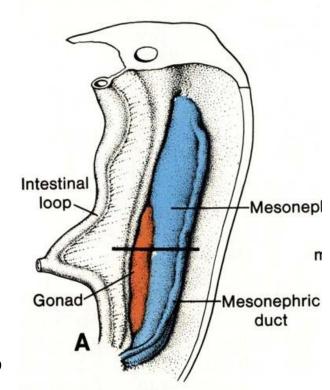
along the ventromedial border of the mesonephros

cranial\_region Adrenocortical primordia



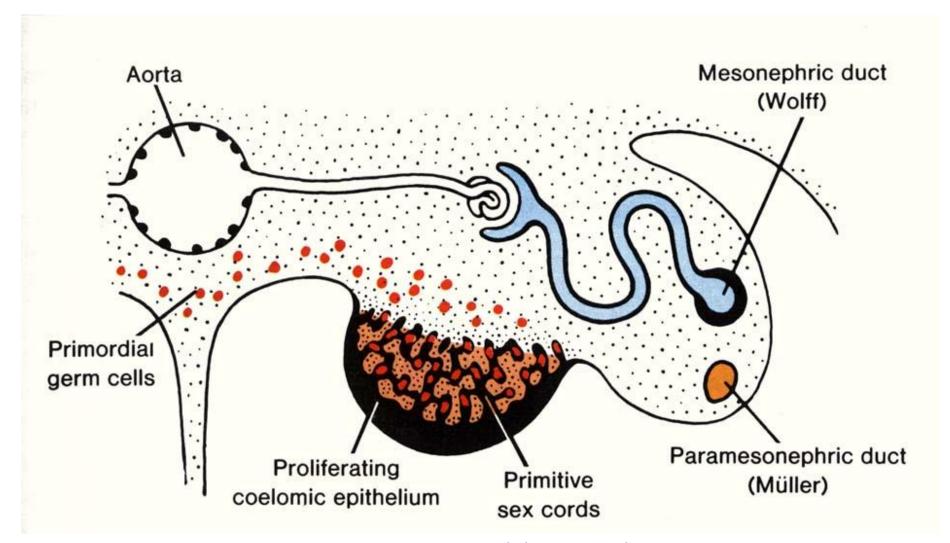
cells of coelomic epithelium
+
cells from mesonephric ridge

Week 4 - Th6 to S2 cranial + caudal parts involute
Week 6 - L3 to L5



become populated by PGC at week 6

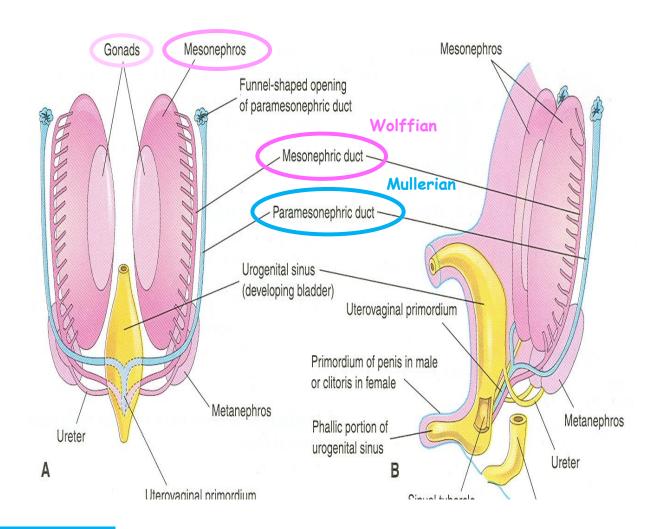
## Genital system - indifferent gonade (week 6)



Medulary cords

## Genital system - Sexual duct system - Indifferent stage

Week 7



Paramesonephric duct
Develops at days 44 to 48
Cranially opens to coelomic cavity

### Genital system - Differentiation of the testes

#### Late 6th week

#### Cord cells differentiate to Sertoli cells

(meiosis-inhibiting factor, anti-mullerian substance, androgen binding factor)

#### Tunica albuginea develops

(sets barrier between coelomic epithelium and testis cords)

Cord cells form seminiferous tubuli, tubuli recti, and rete testis

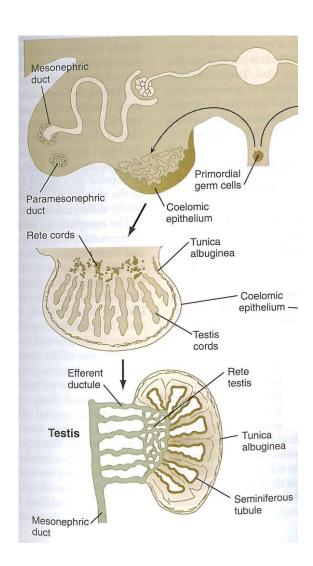
Rete testis joints ductuli efferentes that are derived from mesonephric ducts

(5th to 12th)

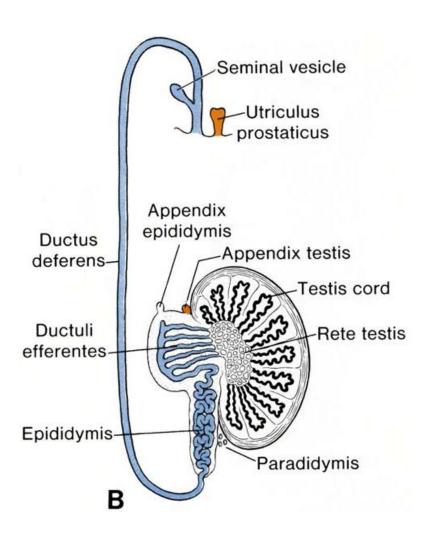
#### Week 8 to 18

#### Leydig cells develop and function in developing testis

- from coelomic epithelia and mesonphros
- produce testosteron
- · support development of Wolfian (mesonephric) duct
- · support development of external genitalia



#### Genital system - Sexual duct system - Male



#### Mesonephric ducts (Wolffian)

- · Ductus epididymis
- Ductus deferens
- Ductus ejaculatorius
- · Seminal vesicle

#### Paramesonephric ducts (Mullerian)

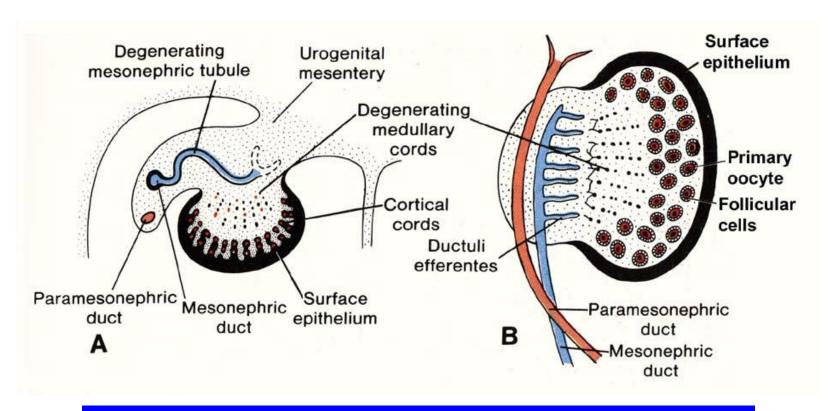
regresses in week 8 (anti-M hormone)

- Appendix testis (cranial part)
- Utriculus prostaticus (caudal part)

#### Mesonephros

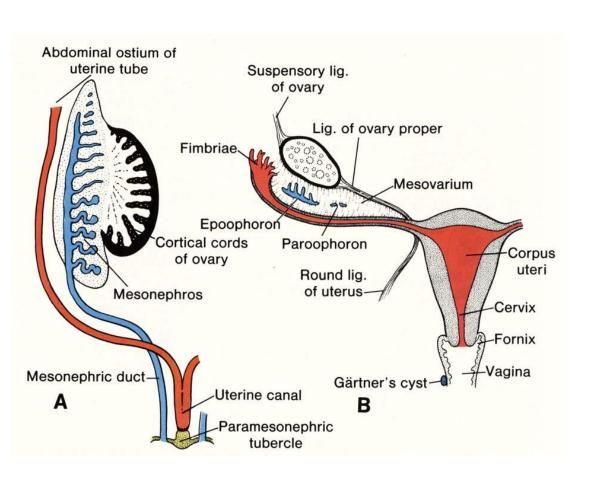
- Ductuli efferentes
- Paradidymis (under the testis, nonfunctional)

#### Genital system - Differentiation of the ovaries



- PGC concentrate in the cortical region
- PGC proliferate (max until week 22) and then enter meiosis arrest in prophase
- Ovarian follicles develop (somatic cell contribution is not understood)
- Transient rete ovarii develops in medullary region
- Medulla contains connetive tissue and vasculature derived from mesonephros

#### Genital system - Sexual duct system - Female



#### Mesonephric ducts (Wolffian)

regresses (absence of testosterone)

• Gartners cyst (caudal part)

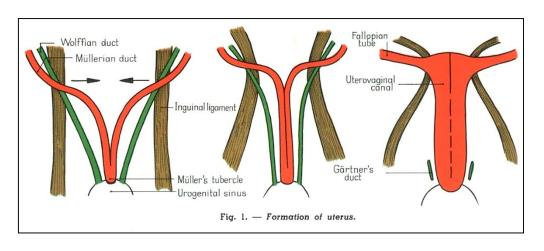
#### Paramesonephric ducts (Mullerian)

- Uterine tubes (falopian t.)
- Uterus
- Vagina

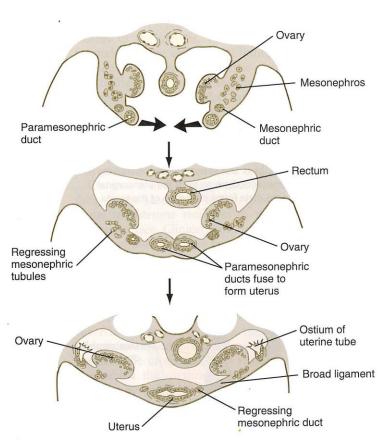
#### Mesonephros (+Mesonephric duct)

- **Epoophoron** (appendix of ovary)
- · Paraophoron

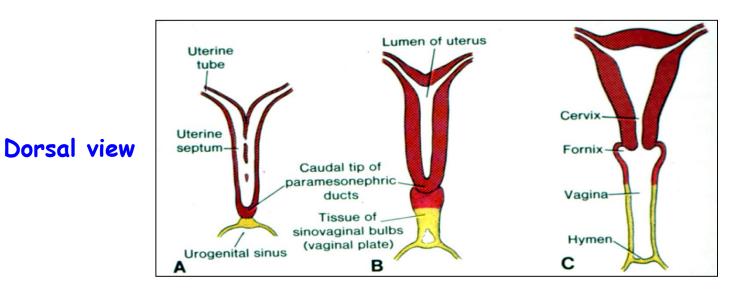
## Genital system - Sexual duct system - Uterus



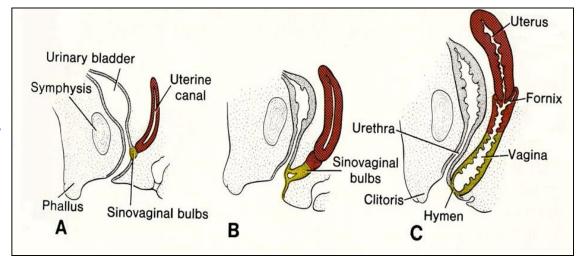
Uterovaginal canal



## Genital system - Duct system - Uterovaginal channel

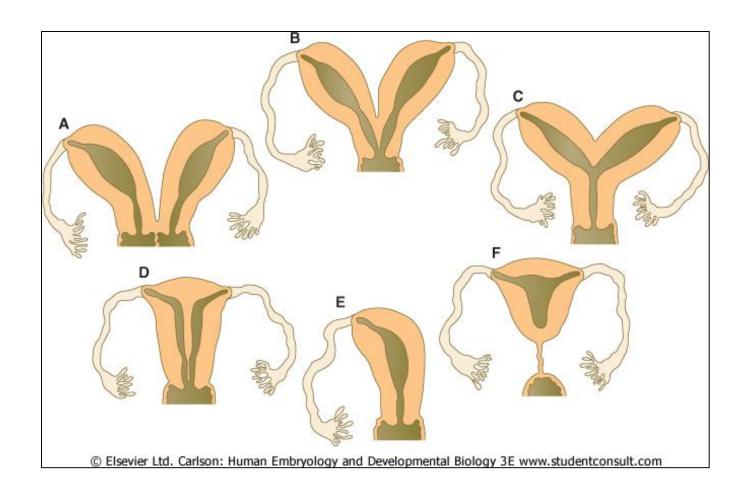


Lateral view



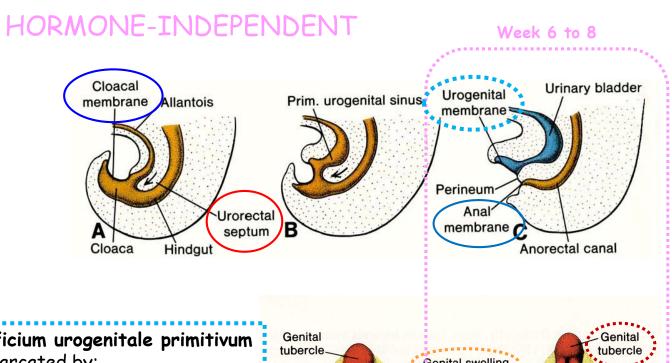
Paramesonephric (Mullerian) ducts fuse to form uterus and upper 1/3 of vagina

## Genital system - Uterovaginal channel - Anomalies



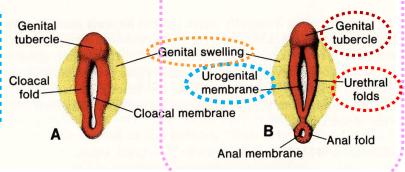
## Genital system - External genitalia - Indifferent stage

They are derived from a complex mesodermal tissue located around cloaca.



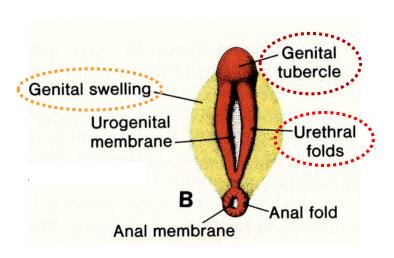
Orificium urogenitale primitivum demarcated by:

Genital tubercle - Phallus Urethral (genital) folds - Plicae urogenitales Genital swellings - Tori genitales



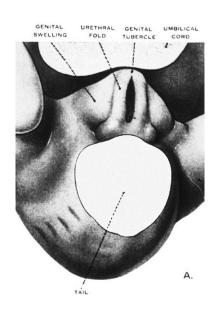


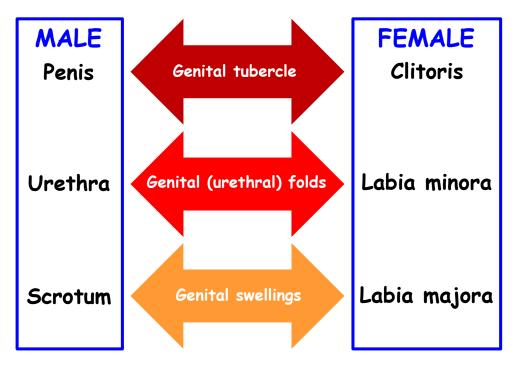
## Genital system - External genitalia - Dimorphism



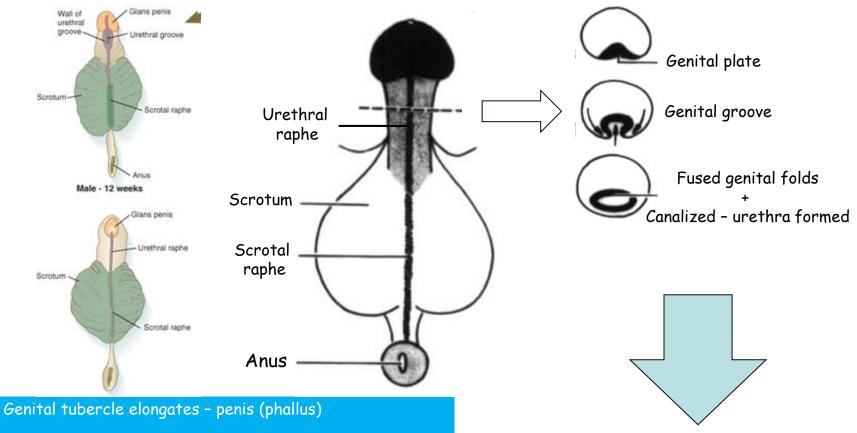
#### Week 9 to 13

Weeks 12 + 13 are particularly critical = fusing of urethral folds





## Genital system - External genitalia - Male



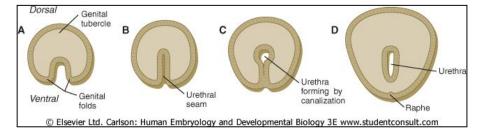
Genital swellings enlarge - scrotum

Genital folds form the lateral walls of the urethral groove

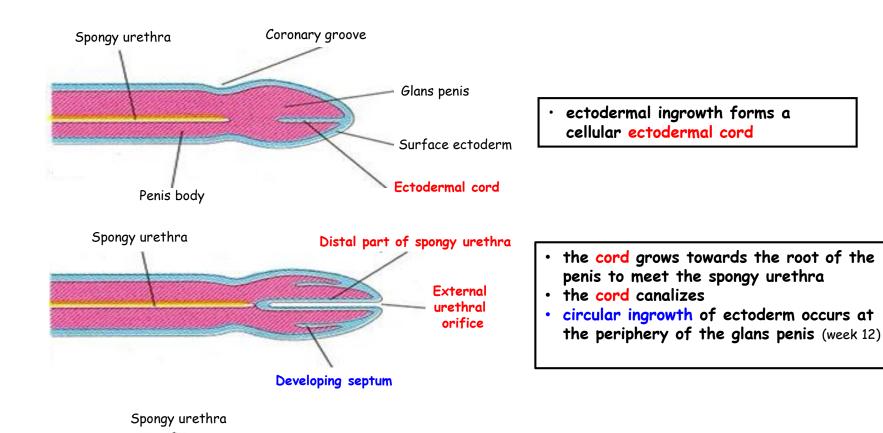
Genital folds form the spongy urethra

Ventral epithelium of genital folds - urethra proper

Corpora cavernosa develop from mesenchyme



## Genital system - External genitalia - Urethral orifice

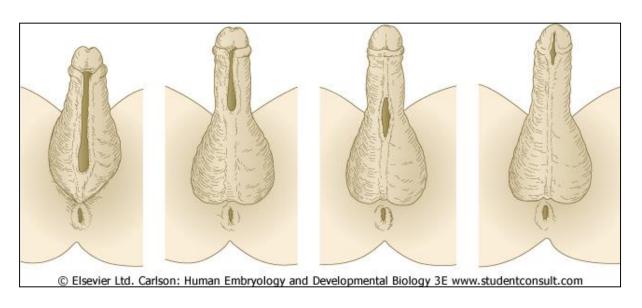


Prepuce

Glandular part of urethra

circular ingrowth breaks down
forming prepuce (for some time adherent
to the glans penis, hard to retract at birth)

# Genital system - External genitalia - Male hypospadia



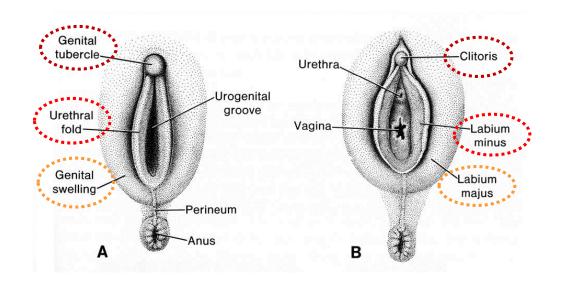


Normal midline raphe

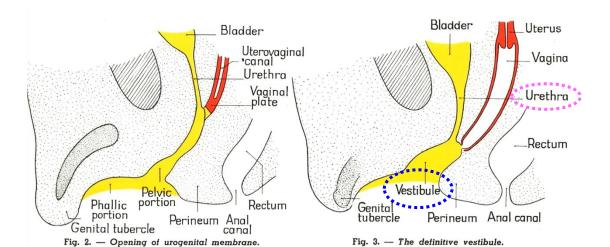


Raphe off center

## Genital system - External genitalia - Female



urethra and vagina open into **vestibule** = from urogenital sinus



urethra develops from the more cranial part of urogenital sinus - equivalent to prostatic urethra

# Thank you for your attention!

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