

Embryology /organogenesis/

Week 4: 06. 04 - 10. 04. 2009

Development and teratology of reproductive system. Repetition: blood and hematopoiesis.

- 19. Indifferent stage in development of reproductive system.
- 20. Development of male and female gonad.
- 21. An overview of development of male and female genital duct.
- 22. Development of external genital organs.
- 23. Developmental malformations of urogenital system.



Male or female <u>sex is determined</u> by spermatozoon Y in the moment of fertilization



SRY gene, on the short arm of the Y chromosome, initiates male sexual differentiation.

- The SRY influences the undifferentiated gonad to form testes, which produce the hormones supporting development of male reproductive organs.
- Developed testes produce testosterone (T) and anti-Mullerian hormone (AMH).
- Testosterone stimulates the Wolffian ducts development (epididymis and deferent ducts).
- AMH suppresses the Mullerian ducts development (fallopian tubes, uterus, and upper vagina).



- Indifferent stage until the 7th week
- Different stage

- Development of gonads
- Development of reproductive passages
- Development of external genitalia

Development of gonads



mesonephric ridge (laterally)

genital ridge (medially), consisting of

mesenchyme and coelomic epithelium Glomerulus Excretory tubule Aorta Mesonephric Intestinal duct loop -Mesonephros Dorsal mesentery Mesonephric Genital Gonad Mesonephric ridge ridge duct В (Wolffian duct) gonad

Three sources of gonad development:

- 1 condensed mesenchyme of gonadal ridges (plica genitalis)
- 2 coelomic epithelium (mesodermal origin)
- 3 gonocytes (primordial cells)



Primordial germ cells – gonocytes – appeare among endoderm in dorsal wall of yolk sac. Gonocyte migrate along dorsal mesentery of hindgut into the gonadal ridges and induce (!) gonad development.



Indifferent gonad development

 Gonocytes penetrate coelomic epithelium and mesenchyme



Together with gonocytes, also cells of coelomic epithelium penetrate mesenchyma:

primary (primitive) sex cords

of indifferent gonad



TESTIS:

Primary sex cords ⇒ tubuli semuniferi contorti

Gonocytes ⇒ spermatogonia Coelomic cells ⇒ Sertoli cells Mesenchyme ⇒ Leydig cells, interstitial connective tissue



Tunica albuginea

OVARY:

Primary sex cords ⇒ degenerate in ovarian medulla

Secondary sex cords ⇒ disintegrate into the follicles: Gonocytes ⇒ oogonia Coelomic cells ⇒ follicular cells Mesenchyme ⇒ ovarian stroma





Development of reproductive passages (indifferent – differentiated stage)

Plica urogenitalis (urogenital ridge) – 2 ducts:
 Ductus mesonephricus (Wolffi)
 Ductus paramesonephricus (Mülleri)







Differentiated stage of development:





+ RUDIMENTARY STRUCTURES







Development of external genatalia (indifferent – differentiated stage)

Genital tubercle [tuberculum genitale] Urethral (cloacal) folds [plicae genitales]

Labio-scrotal swellings [tori genitales]











GLANS

LABIUM



Seminal vesicles – develop as diverticles of ductus deferens (from Wolffian duct)

Prostate – develops as numerous diverticles off urethra (from pelvic part of sinus urogenitalis)

Accessory glands development



Position of gonads during development

- Gonad develops in only short, <u>lumbal</u> part of genital (gonadal) ridge (Th6 – S2)
- Cranial part disappeares
- Caudal part transforms into gubernaculum

- Testes descensus into the scrotum
- Ovaries change also their position due to fusion of Müllerian ducts and formation of broad ligament

Testis – descens into the scrotum





Ovaries – change their position due to fusion of Müllerian ducts and formation of broad ligament



Congenital malformations - 1

- Genetic anomalies:
- Gonad(s) agenesis
- Hermafroditism (ovotestes, ovary+testis)
 + chromosomal aberations (45X/46XX, 45X/46XY, 47XXY/46X, etc.)
- Pseudohermafroditism karyotype and gonads do not correspond to external genitalia
- Gonadal hypolasia Turner sy. (45X0), Klinefelter sy. (47XXY)

Congenital malformations - 2

- Kryptorchism
- Hydrocele testis
- Hypospadias, epispadias

• Developmental defect of uterus (and vagina) uterus et vagina separatus, uterus bicornis, uterus septus or subseptus, uterus unicornis etc.

















Repetition of blood

- Composition of the blood
- Hematocrit
- Hemoglobin
- Erythrocytes shape, size, density per 1 μl
- Reticulocytes
- Anisocytosis
- Poikilocytosis
- Polycythemia (= polyglobulia)

- Granulocytes
- Agranulocytes
- Number of leukocytes per 1μl
- Anemia
- Leukocytopenia
- Thrombocyte
- Number of thrombocytes per 1μl
- Hyalomere, granulomere

- Bone marrow structure
- Erythropoiesis
- Granulocytopoiesis
- Megakaryocyte
- Endomitosis
- Differential white cell count (DWCC) !!!
- Shift to the left or to the right

Neutrophilic granulocytes: 10-12 μ m in Ø



Basophilic granulocyte: 8 μ m in \emptyset , only 1 % in DWCC



Eosinophilic granulocyte: up to 14 μ m in \emptyset , 3 % in DWCC



Lymfocyte

















































