HISTOLOGICAL STUDY ON THE PRENATAL AND NEONATAL DEVELOPMENT OF THE HUMAN UTERINE BODY AND UTERINE TUBES

THESIS

SUBMITTED FOR PARTIAL FULFILMENT
OF MASTER DEGREE
IN HISTOLOGY

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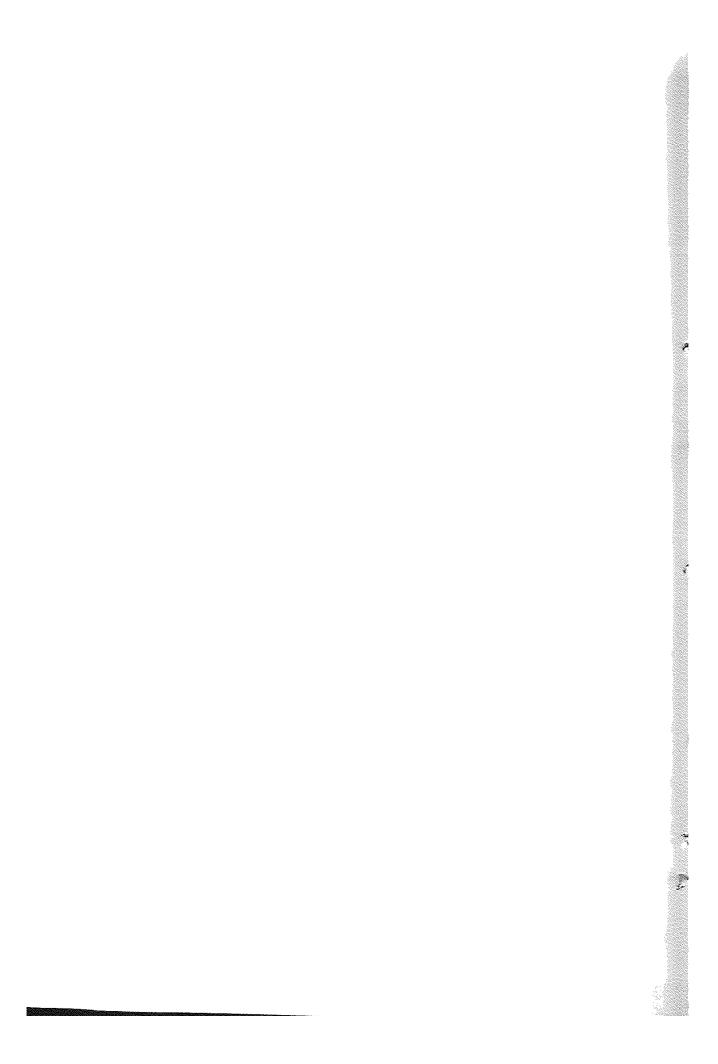


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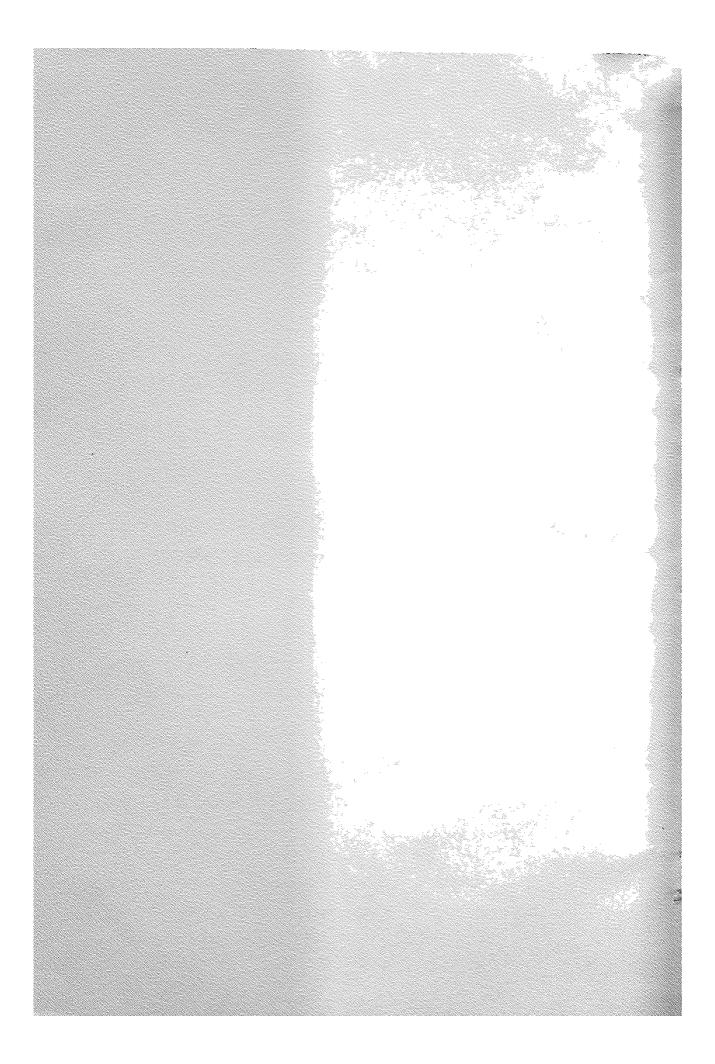
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INTRODUCTION AND

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NTRODUCTION AND AIM OF THE WORK

During the early stages of uterine development, the genital canal was found to be formed by the fusion of paramesonephric ducts. The eventual shape of the uterus was the result of proliferation of the surrounding mesenchymal cells. However, differentiation of the myometrium, and endometrial stroma during the later stages of foetal development was not clearly defined [Konishi, Fujii, Okamura and Mori 1984].

The cellular heterogenecity within the uterus which was not widely investigated in the past, had to be seriously considered since 1-2% of women had abnormal uterine development due to non unification of the Mullerian ducts in the embryonal period [Cunha, Chung, Shannon, Taguchi, and Fujii, 1983; and Funk and Fendel, 1988].

Brody and Cunha (1989) stated that the uterine development in the perinatal period occurred through a reciprocal epithelial - mesenchymal interaction. So, teratogenic agents might elicit profound abnormalities of uterine epithelium, endometrial stroma, and/or myometrium, leading finally to infertility.

Furthermore, the functional uterine capacity was determined in part by success of growth, morphogenesis, and cytodifferentiation of uterine tissues. [Bartol, Wily, Spencer, Vallet and Christensson, 1993].

The uterine tubes provided the environment for sperm transport, and capacitation in addition to oocyte transport, and maturation, fertilization, and early embryonic cleavage. Gamete interactions in the tube occurred in

contact with the tubal epithelium where its secretion might play a role in early reproductive events occurring within the oviduct [Ellington, 1991; and Rapisarda, Mavrogianis, Bowman, Fazleabas and Verhage, 1993].

During the last years, considerable new knowlege was obtained about the uterine tubal structure and function. Reviewing the available literature, it was found that special attention was paid to the histology of the human adult uterine tube with less concentration on its picture during prenatal, and neonatal periods.

So, the aim of this work is to study the normal morphogenesis, and development of the uterus that will serve as a basis for understanding the abnormal events taking place during the perinatal life. Concurrently, the histological picture of the uterine tubes will be investigated during the various stages of development.



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REVIEW OF LITERATURE

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I. Embryology

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The female ducts (paramesonephric or Mullerian ducts) were found to play an important role in the development of the female reproductive system , but they did not begin to develop until the sixth gestational week (g .w.) . Each was known to commenc as a groove like invagination (the female duct groove) of the coelomic epithelium lateral to the mesonephric ridge near its cranial end, the blind end of this groove grew caudally as a solid rod of cells which acquired a lumen as it lengthened. By the 8th g . w. , it reached the caudal end of the mesonephros where it turned medially ventral to it to enter the genital ridge . In the genital ridge , it bent caudally in close apposition to its fellow on the opposite side .

This was followed by meeting of the paramesonephric ducts, and their fusion in the urogenital septum. The fusion was initially partial, but gradually the septum disappeared leaving a single utero - vaginal canal.

Each paramesonephric duct was found to be subdivided into three parts: a cranial longitudinal part, an intermediate transverse part, and a caudal longitudinal part. The cranial parts were mentioned to form the uterine tubes. The intermediate portions fused to form the uterus, while the caudal portions united, and contributed to the vaginal development.

The utero - vaginal canal, and cells derived from its lower end gave rise to the epithelial lining of the uterus. The mesenchyme surrounding the fused Mullerian ducts formed the thick muscular coat of the uterus known as the myometrium, and its peritoneal covering; the perimetrium.

The entire mesonephric system in female was found to undergo loss or atrophy. The fusion of the paramesonephric ducts to form the uterus, the retrogression of the mesonephros, and the descent of the uterine tube, in association with that of the ovary, resulted in the transformation of the urogenital mesentry into the corresponding broad ligament. The uterine tubes remained in the free edge of this ligament. [Hamilton and Mossman, 1972; and Moore, 1988].