Menstrual Cycle

Prepared by: Besir Zeneli

The Four Key Hormones

FSH (Follicle Stimulating Hormone): Stimulates follicle development.

LH (Luteinizing Hormone): Triggers ovulation.

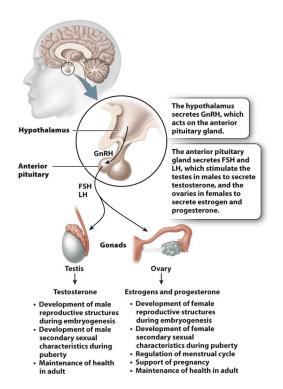
Estrogen: Prepares endometrium and stimulates secondary sex characteristics.

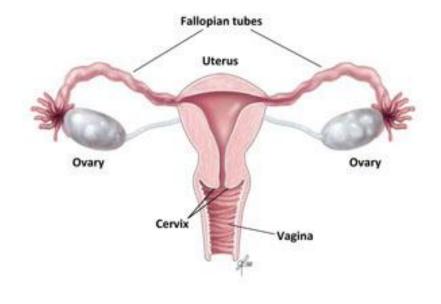
Progesterone: Maintains endometrium.

Phases of the Menstrual Cycle Follicular Phase (Day 1–14): Follicle develops, and Estrogen levels rise.

Luteal Phase (Day 15–28): Ovulation and Corpus luteum forms and secretes progesterone.

Luteal phase = Always 14 days, regardless of cycle length.





Key Structures Involved

Brain:

- *Hypothalamus:* GnRH (Gonadotrophin Releasing Hormone)
- Anterior Pituitary: FSH, LH

Pelvic Organs:

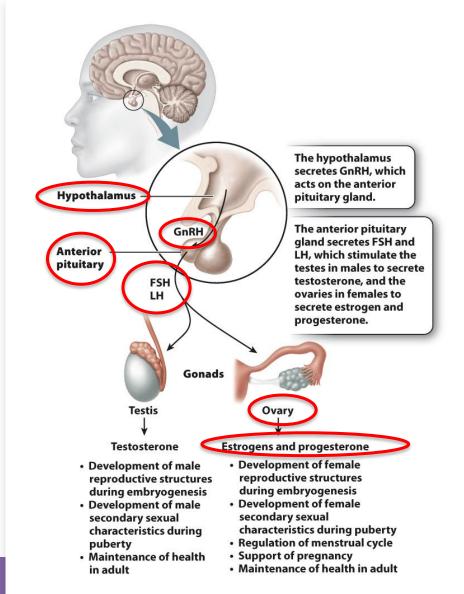
- Vagina, Uterus, Cervix, Fallopian Tubes, Ovaries

Cycle Day 1: The Start

Hypothalamus \rightarrow *GnRH* (Gonadotrophin Releasing Hormone) \rightarrow *FSH* & *LH* release

FSH → stimulates development of 15–20 follicles

Follicles → Secrete **estrogen**.



Role of Estrogen

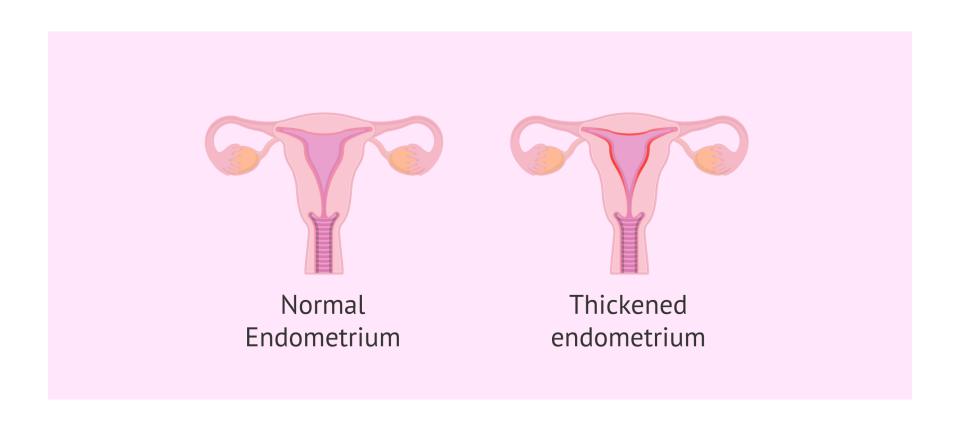
Promotes secondary sex characteristics (breast tissue, vulva, vagina, and uterus)

Endometrial thickening.

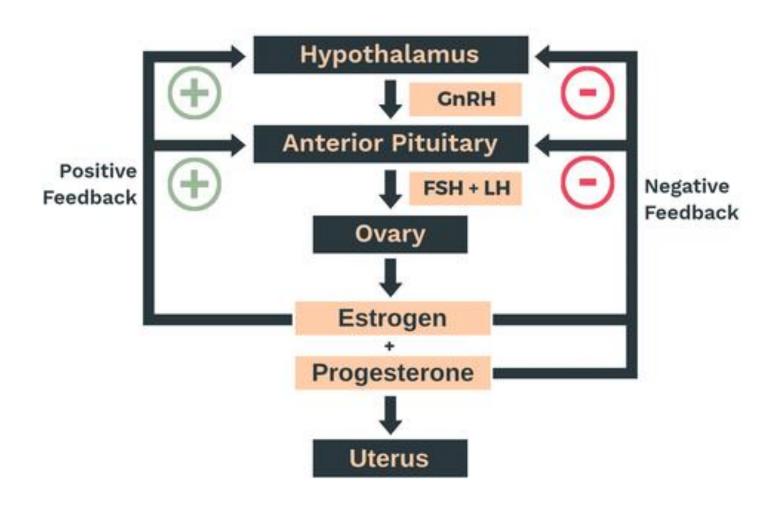
Cervical mucus thinning for sperm penetration.

Negative feedback:
High Estrogen
initially suppresses
FSH & LH

Endometrial thickening



Estrogen – Negative Feedback

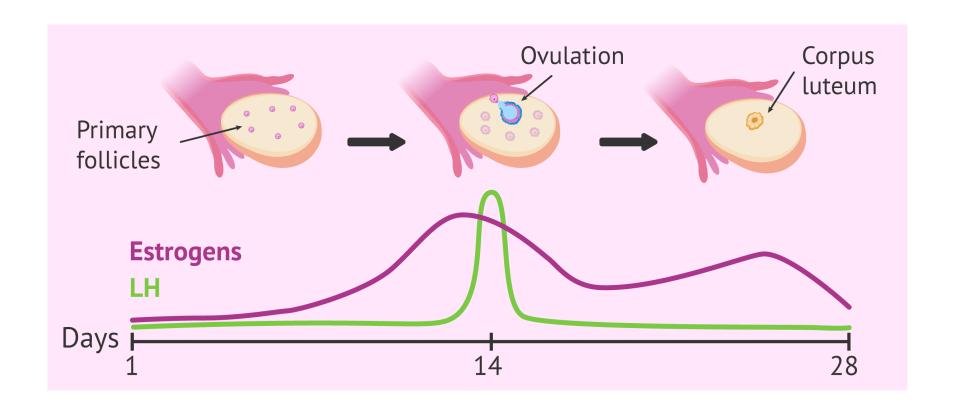


Ovulation (Day 14)

Estrogen dips → **LH surge**

LH surge → Ovum (egg) released from dominant follicle

Ovulation (releasing of the egg) marks the start of the **luteal phase**



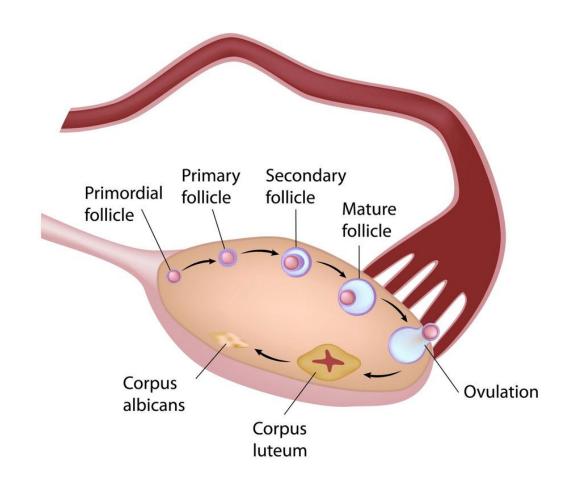
The Luteal Phase

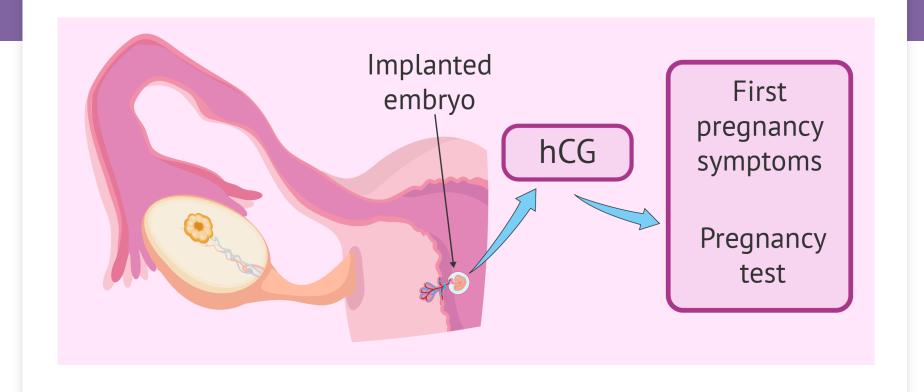
Corpus luteum forms from *collapsed follicle.*

Secretes **progesterone** and some **estrogen**.

Function of progesterone:

- Maintains endometrium.
- Thickens cervical mucus.
- Raises body temperature



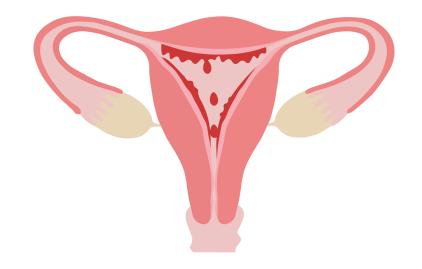


If Fertilization Occurs

- Embryo → secretes hCG (Human Chorionic Gonadotropin); this is the lab test for pregnancy → Maintains corpus luteum.
- Progesterone secreted by corpus luteum, continues, supporting pregnancy.

If Fertilization Does Not Occur

- Corpus luteum degenerates
- Drop in progesterone & estrogen.
- Endometrium sheds → Bleeding -> Menstruation
- **FSH rises** → New cycle



SHINESA

Summary of Hormone Changes

FSH: Rises at start

LH: Spike at ovulation

Estrogen: Rise before ovulation, small luteal

rise

Progesterone: High

after ovulation

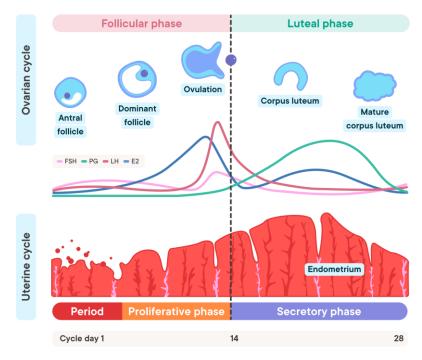


Figure adapted from Critchley HOD, Maybin JA, Armstrong GM, Williams ARW. Physiology of the Endometrium and Regulation of Menstruation. Physiological Reviews. 2020 Jul;100(3):1149-79.



Hormone Pattern

Rises at cycle start, small spike before

ovulation

LH Sharp spike triggers ovulation

Estrogen Rises before ovulation, dips, slight rise in

luteal phase

Progesterone Low until after ovulation, then rises, falls if

no pregnancy

Final Recap

Hypothalamus: GnRH

Anterior Pituitary: FSH & LH

Follicles: Estrogen

Corpus Luteum: Progesterone & Estrogen

Embryo: hCG

Wisdom in Nature

 "The menstrual cycle is a monthly symphony of precision, balance, and renewal — a perfect example of nature's wisdom in orchestrating life."

Everything about Menstrual Cycle

https://www.youtube.com/watch?v=3Lt9I5Lr
 WZw&t=1s