## Sex: Hormonal and Neural Basis (Ch 12) III

- Sexual Development and Differentiation
- Neural and Hormonal Regulation of Sexual Behaviour in Adults
  - Activational effects of hormones
  - Neural circuits in males and females
  - Human studies of the neurobiology of sexual behaviour
- For next class: Start reading Ch 13- Food and energy regulation (sec 13.4)



## Sexual Orientation (1)



- Sexual *orientation* is not the same as sexual *identity* 
  - Developmental/neural basis of sexual identity even less well understood than sexual orientation
- Vast majority of researchers agree that sexual orientation (hetro/ homosexuality) is determined early in development, and is due to biological factors
  - Near impossible to rule out social factors, but no firm evidence suggests this plays a major role
- Prevalence difficult to determine, but in Western countries, typically ranges between 2-10%
- Genetics: Males= 52% of monozygotic, 22% of dizygotic twins both homosexual.
  - There may be a gene near the end of the X-chromosome (Xq28) that influences male sexual orientation.
- Females = 46% monozygotic, 16% dizygotic are homosexual.

# Sexual Orientation (2)

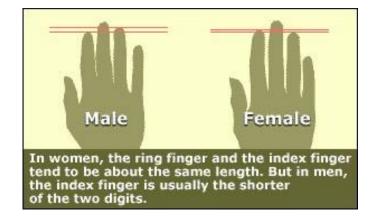
- Hormones: Homo- and heterosexuals do not differ in hormone levels.
- In animals, certain hormone manipulations made during development (neonatal castration or perinatal T) can cause same sex preference in many species
  - -Homosexual tendencies have been observed in many species





## Sexual Orientation (3)

- In humans, evidence is much weaker
  - Lesbians tend to show markers indicative of fetal androgen exposure (eg; longer ring fingers)
    - Early exposure to synthetic estrogens may lead to women being more amenable to same-sex encounters

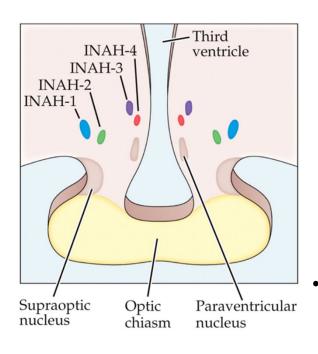


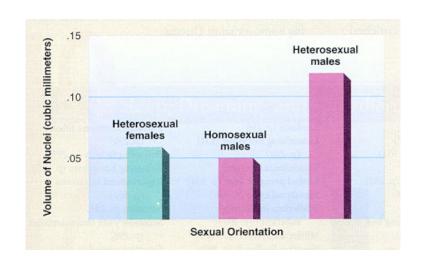
- For gay men, fetal androgen exposure (or lack thereof) data inconclusive
- Other indicators not necessarily correlated with early hormones also linked to homosexuality (birth order, handedness)

## Sexual Orientation (4)

**Brain Differences**: A study by Simon LeVay showed region of the anterior hypothalamus (3<sup>rd</sup> interstitial nucleus) is larger in hetero- vs homosexual males.

- Problems with samples (many were from AIDS victims); should be interpreted cautiously.



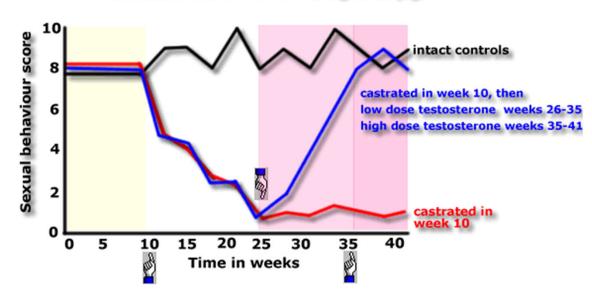


- More recent imaging studies suggest some anatomical differences in brain structures in hetro- vs homosexual men and women
- Other studies have shown differences in brain connectivity between homosexual vs transgender individuals

### **Activational Effects of Hormones- Male Sex Behaviour (1)**

- Removing T effects (castration, drugs) eventually reduces sex drive (you need SOME T)
  - Replacement T brings sex drive back to normal levels



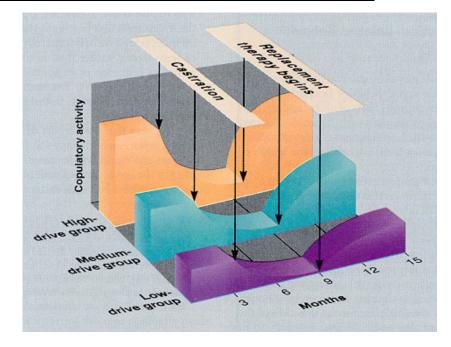


- However, relative sex drive and T levels are uncorrelated in normal males.
  T injections do not increase sex drives
  - (males have more than 10 times what they need)

### **Activational Effects of Hormones- Male Sex Behaviour (2)**

### •Guinea Pig Experiment:

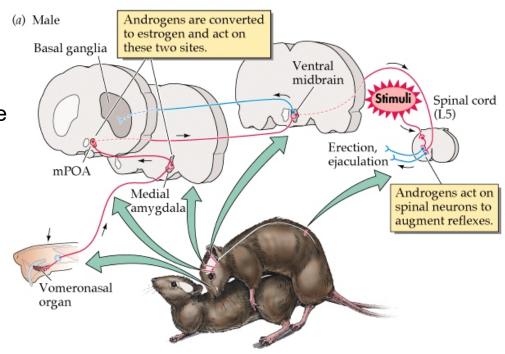
- •Rated "sexual activity" of males (ranked as Low, Medium and High Groups).
- •Castrated all males, then monitored sexual activity.
- •All males THEN receive same large dose of testosterone injections.



- •The (large) test dose of T restored all males to **PREVIOUS** level of sex drive.
- Conclusion: OTHER FACTORS control individual differences in sex drive
- •SOME T is necessary, but more T does not mean more sex drive

## Neural Regulation of Male Sex Behaviour (1)

- •Sufficient levels of T in bloodstream, "primes" certain brain regions to make them receptive to sexual stimuli
- •In males, T is **converted to an estrogen in brain**, and stimulates mPOA, medial amygdala

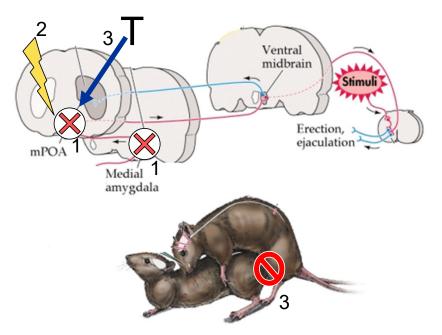


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When estrogens prime these cites, they can response to sexual stimuli

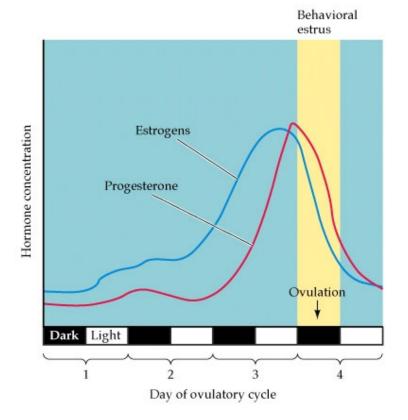
- Olfactory signals go though medial amygdala, then to mPOA
- mPOA signals ventral midbrain → motor centers → spinal cord

### Neural Regulation of Male Sex Behaviour (2)



- ➤ Evidence for Testosterone/Estradiol regulation of male sexual behavior
- 1) mPOA/medial amygdala lesions disrupt sexual behaviour (but NOT sexual motivaton)
- 2) mPOA stimulation initiates sexual behaviour
- 3) in *castrated males* administration of T (or estradiol) into just the mPOA reinstates sexual behaviour
- •Androgens gets these brain regions ready to act in response to sexual stimuli. Do not cause behaviour, but are necessary for it
- •Example of an activational effect of hormones on sexual behavior

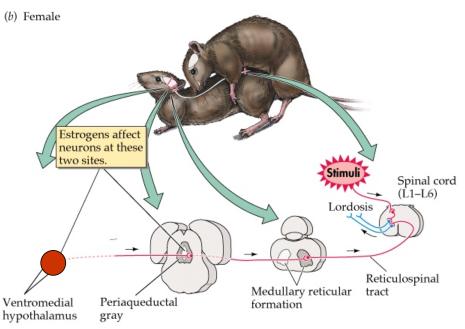
## Hormonal Regulation of Female Sex Behaviour



- In female rats, estradiol increases ~ 2 days before ovulation
  - One effect is that this causes brain to make progesterone receptors
- Progesterone then starts to increase
- When both peak, ovulation occurs:
  - at this point, female is fertile and shows sexually stereotyped behaviours
- Both estrogens and progesterone increasing in this order is required for these events to occur.

#### Neural Regulation of Female Sex Behaviour (1)

- •The ventromedial hypothalamus (VMH) monitors changes in hormonal levels
  - Estradiol causes VMH neurons to alters dendrites and make progesterone receptors
  - Stimulation of progesterone receptors causes VMH cells to produce proteins necessary for lordosis
- •Hormones hitting their peaks activates multisynaptic pathways that include motor areas.
  - Changes in VMH makes these downstream nuclei more excitable

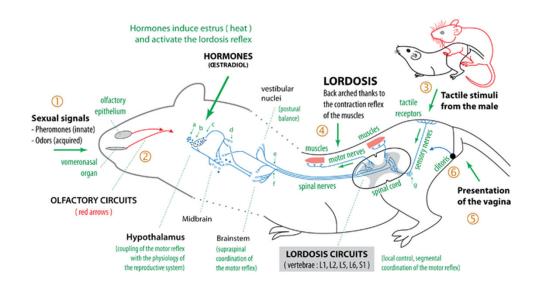


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•Eventually, signals output through spinal cord, and promote lordosis in response to stimulation from mounting

### Neural Regulation of Female Sex Behaviour (2)

- Evidence for estradiol regulation of female sexual behavior:
- 1) VMH/PAG lesions disrupt lordosis
- 2) implantation of estrogens into VMH reinstates lordosis in ovarectomized females

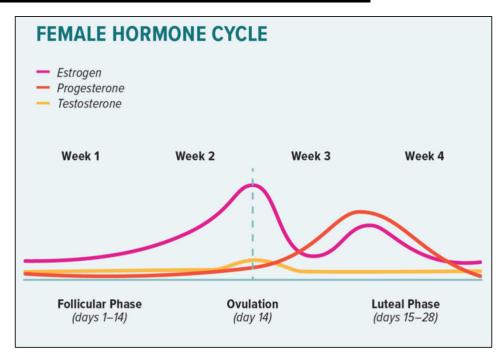


- •This pathway is for particular motor program. Other sexual/maternal behaviours are mediated by other, more complicated brain circuits.
- ·Again, hormones do not cause behaviour, but are necessary for it.

## Hormones and Human Female Sex Behaviour

### > Estrogens:

- Human female sexual motivation/ behavior may or may not be as tightly linked to <u>estrogens</u> released during menstrual cycle.
  - HUMAN females are different from most other mammals in this respect
- Ovariectomy does not have reliable effects on sexual motivation/behavior.



#### > Androgens:

- Testosterone levels can correlate with measures of sexual motivation.
- Following ovariectomy, replacement injections of testosterone (not estradiol), rekindles sexual motivation.

## Menstrual Cycle and Female Sexual Behaviour

#### •However...

- •Women DO SHOW some changes in sexual behaviour patterns during menstrual cycle
- •Greater probability of having intercourse and achieving orgasm as ovulation approaches
- •Other, more subtle changes in behaviour also occur during ovulation....

