

# REPRODUCTION & GENETICS

## Notes:

→ Sexual Reproduction is characterized by Diversity and polymorphism

- Atrophied; non-punchial and small in size.
- Causes of diversity : meiosis ; random fertilization and mutation ; random separation and segregation of homologous chromosome while crossing over during prophase I.

spermatogenesis → Female Reproductive Systems

- in male is continuous.
- 1- Ovaries They are the female gonads function : They produce oocyte by a process called Oogenesis.
  - \* They secrete estrogen and progesterone

Estrogen and Progesterone : Female sexual hormone that are responsible for the appearance and growth of the female sexual characteristics.

Primary characteristics : general organs : testicles & ovaries

Secondary sexual characteristics : Characteristics that appear at the age of puberty.

• Abortion : in L.P.L

## 2- Oviducts or Fallopian tubes:

function: It's the site of fertilization

implantation

+ It conducts the ova and later on the nurturing embryo (in case of fertilization) from ovaries of embryo toward the uterus.

(when

the embryo In Females Each month one ovary only is active  
rest in the In some cases, 2 ovaries are active & in this (endometrium) case non-identical twins are produced.

Menopause: Total depletion of OO-cytes (Arrest and stoppage of menstruation).

Bleeding, menstruation & abortion are due to the decrease in the amount of progesterone.

## 3- Uterus or Wombs

function: It's the house of the embryo.

It has 3 layers:

1- Endometrium: supplies the implanted embryo with the needed nutritive substances during pregnancy. (It's richly vascularized).

2- Myometrium: muscular layer.

3- Serous layer: Outer layer.

Note: The OOcyte remains alive for 24 hr while the sperm survives on the Fallopian tube 48-72 hr.

The sperm in the male body is inactive. It becomes active when it enters the genital organs of the female.

. The sperm is mobile while the oocyte is immobile.

. If there is no fertilization the oocyte degenerates by atresia.

Atresial Degeneration of Oocyte while menstruation (अस्त्रीय अवृत्ति)

4- Cervix: It is the neck of the uterus.  
functions: It possesses cervical gland that release mucus all the month.

During ovulation: The mucus is thin, smoothy and liquid to facilitate the penetration of sperm.

Before & After ovulation: (Pre & Post ovulatory phases). The mucus is thick, viscous to prevent the penetration of sperm.

The follicle releases the oocyte during ovulation.

Oxytocine: A hormone that stimulate the contraction of myometrium.

Diploid : All body cells except gametes. (chromosomal no = 2n).

Haploid : Gamete cells (chromosomal no = n).

**Definition** : Objectives of Karyotype.

Definition : Karyotype is the process of counting and arranging of chromosomes depending on certain criteria.

### Objectives:

1. To determine the sex of an organism / fetus.
2. To determine the characteristics of chr. of species.
3. " " if the organism or fetus is normal or abnormal (chromosomal numerical abnormalities)
4. To classify as diploid or haploid.

### Chromosomal Formulas:

1. Normal male : 46, XY
2. Normal female : 46, XX
3. Missing X chromosome : Turner Syndrome : 45, XO
4. Extra X chromosome : Klinefelter Syndrome : 47, XXX
5. Trisomy 21 : 47, XY, +21 / 47, XX, +21
6. Monosomy 13 : 45, XY, -13 / 45, XX, -13
7. Translocation b/w 1 & 18 : 46, XX, t(1;18)
8. Oocyte : 23, X      Sperm : 23, Y or 23, X.

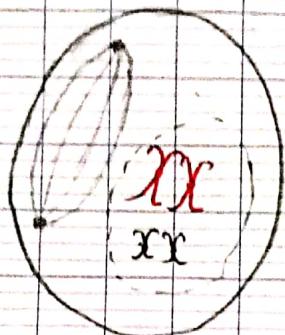
**Note:** During translocation the chromosomal genetic information is conserved (abnormal karyotype but normal phenotype).

**Sterile** : when the abnormality is at the level of sex chromosomes.

**Fertile** : when the abnormality is at the level of autosomes (chr. 1 → 22)

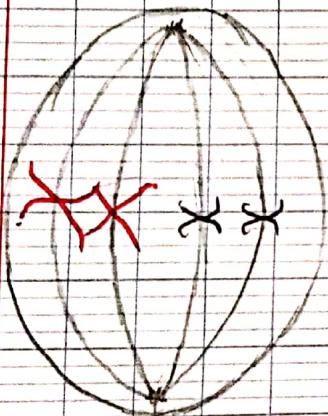
## Mitosis & Division / Multiplication of all body cells

### Prophase:



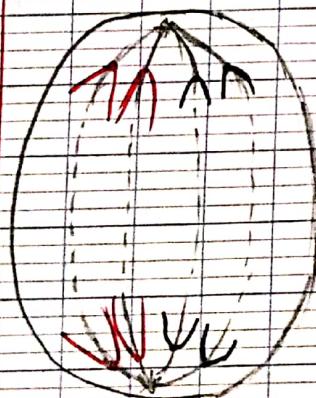
- Formation of asters joined by spindle fibers
- formation of 2 chromosomes with 2 chromatids each.
- $2n$  chr,  $2C$  corresponds to quantity of DNA:  $2Q$

### Metaphase:



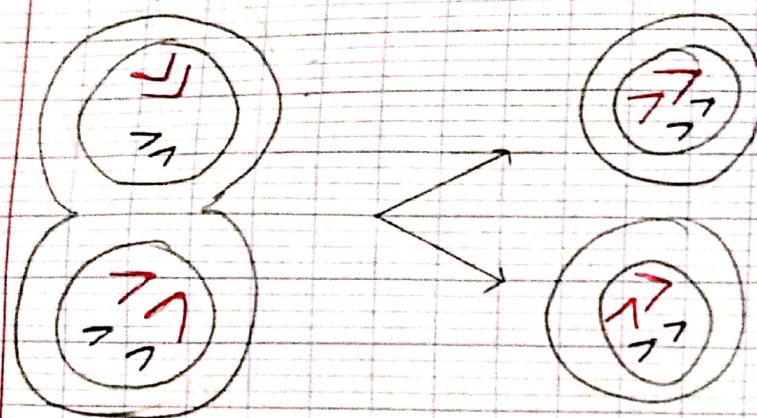
- The chromosomes occupy the middle of the cell to form the equatorial plate.
- $2n$  chr,  $2C$  corresponds to quantity of DNA:  $2Q$

### Anaphase:



- Separation of sister chromatids to the opp. poles of the cell
- $2n$  chr,  $1C$  / pole corresponds to quantity of DNA  $Q$  / pole.

## Telophase &

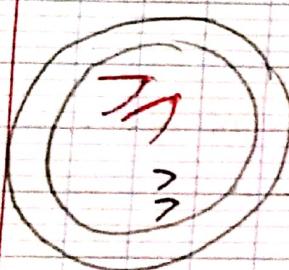


2nchr, 1C corresponds to quantity of DNA: Q

- Construction of cytoplasm.
- Cytokinesis

- Formation of 2 daughter cells

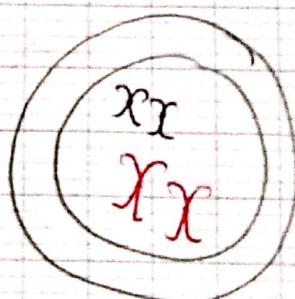
## Cell Cycle & Interphase + Mitosis.



End of 1<sup>st</sup> mitosis

## Interphase

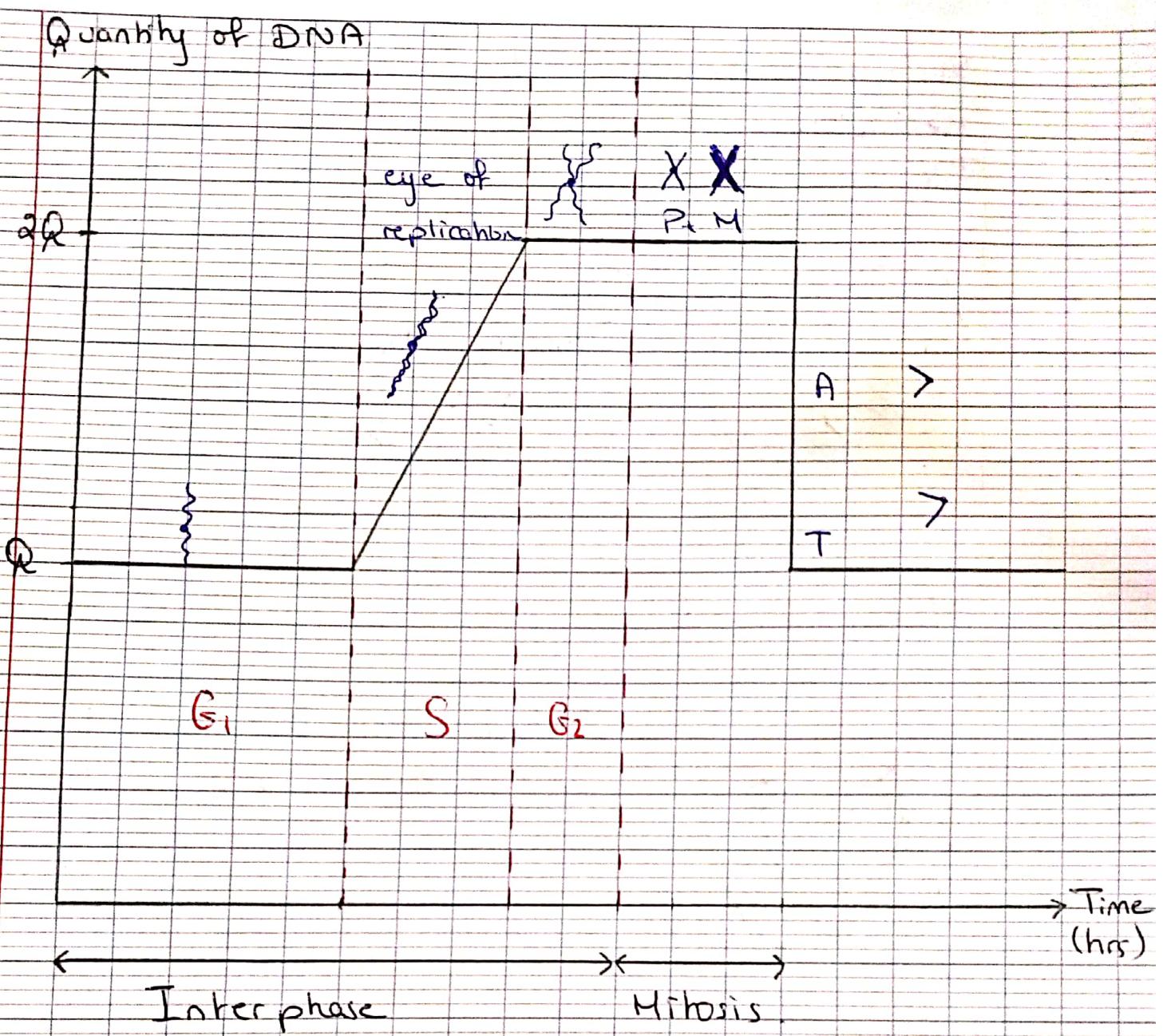
- Duplication of chromosomes
- Replication of DNA
- Each chromosome with 1 chromatid becomes a chromosome with 2 chromatids.



End of interphase  
beginning of new mitosis

→ These 2 cells are genetically identical.

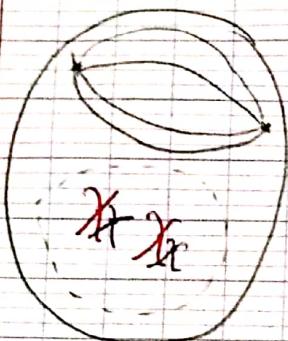
Interphase: The reason for which the 2 sister chromatids are genetically IDENTICAL.



## Meiosis & Formation of Gametes (Sperm + Oocyte)

### Reductional Division

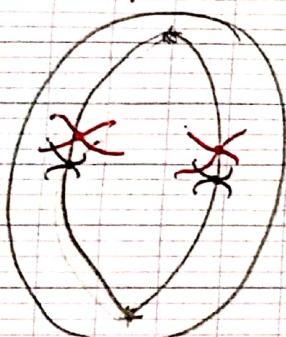
#### Prophase I:



- Chiasma or Chiasmata
- Crossing Over
- Exchange of Genetic material
- Formation of tetrads.

2nchr, 2C      2Q

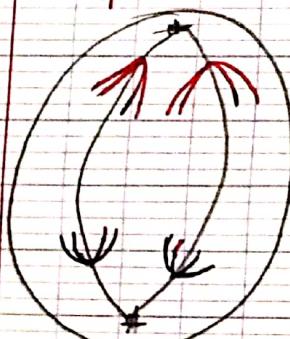
#### Metaphase I



- Tetrads form the equatorial plate

2nchr, 2C      2Q

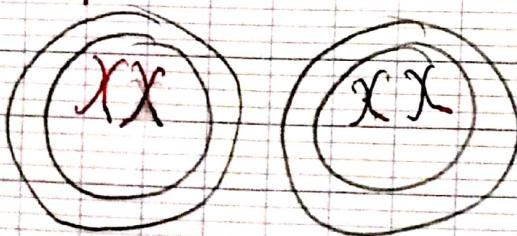
#### Anaphase I



- The homologous chromosomes

n chr, 2C 1 Pole

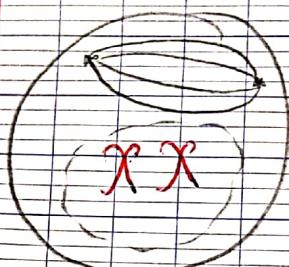
#### Telophase I



- Formation of 2 daughter cells
- The number of chromosomes is reduced to half

n chr, 2C      Q

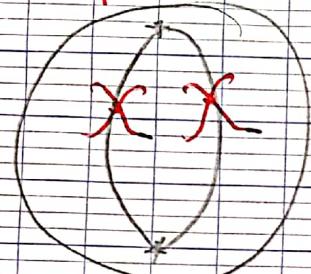
Equatorial Division  
Prophase II



n chr, 2C

Q

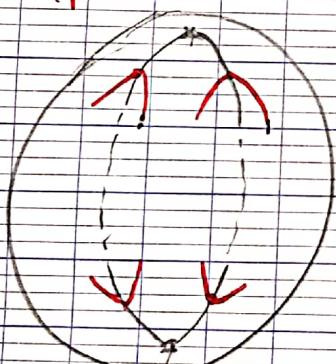
Metaphase II



n chr, 2C

Q

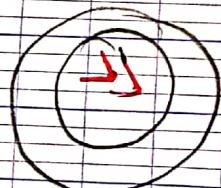
Anaphase II



n chr, 1C/pole

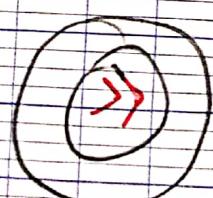
Q/2

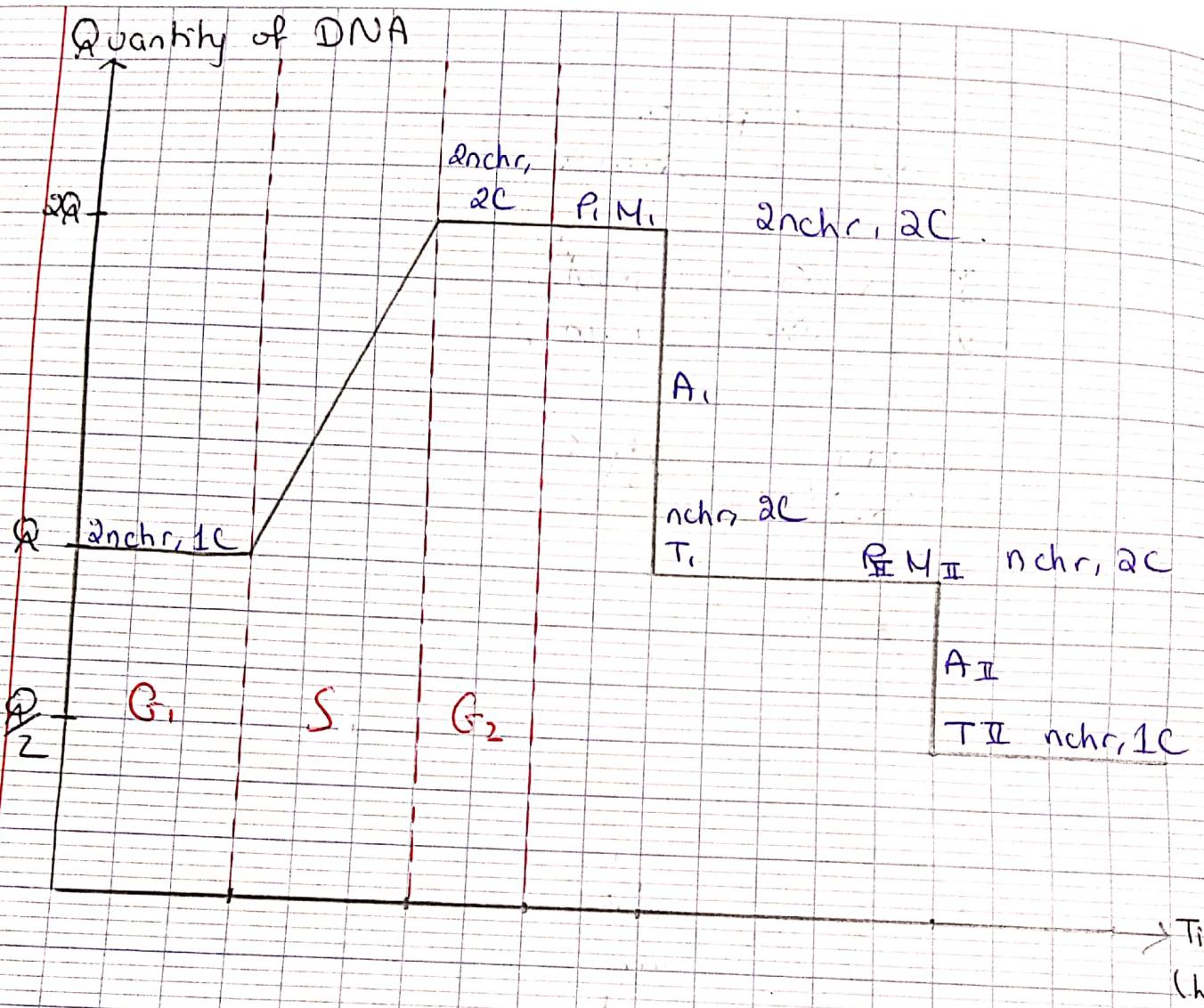
Telophase II



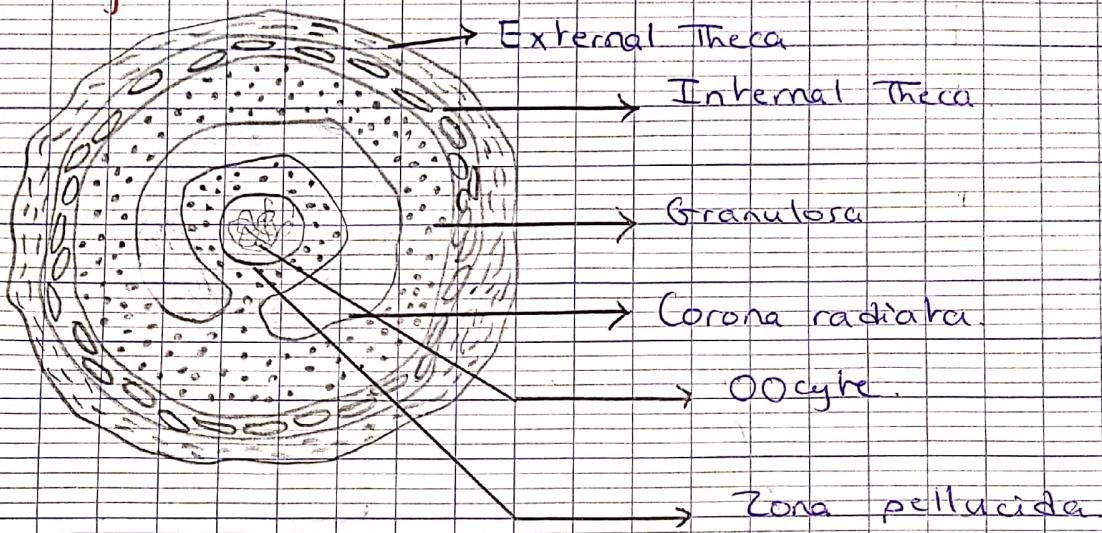
n chr, 1C

Q/2





Oogenesis :-



Follicles :-

Primordial  $\rightarrow$  Primary  $\rightarrow$  Secondary  $\rightarrow$  Tertiary  
(cavitated)  $\rightarrow$  Graafian follicle.

Note :-

Primordial :-

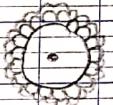


During embryonic life we obtain only Oocyte I blocked at prophase I

Primary :-



Secondary :-



Tertiary :-

Graafian :- Has a very important role in ovulation

Folliculogenesis and Oogenesis start during embryonic life.

But during embryonic life we obtain only primordial follicles.

At birth the female has inside the ovaries primordial follicles enclosing (inside it) oocyte I blocked at prophase I.

**Ovulation:** Is the release of oocyte II blocked at met II in the pavilion of the oviduct.

. The blocked oocyte I retains its meiosis before 12 hrs from ovulation to become oocyte II blocked at metaphase II waiting for fertilization in the Fallopian tube.

. The ruptured graafian follicle becomes yellow body.

. If there is no fertilization, the yellow body degenerates within 7 to 8 days and becomes a white body (degenerate by atresia).

. If fertilization took place, the yellow body persists to 3 to 4 months to secrete progesterone necessary for the maintenance of pregnancy; then it degenerates because the placenta becomes able to secrete its own progesterone.

**Note:** The hormone HCG (pregnancy hormone) maintains the persistence of yellow body.

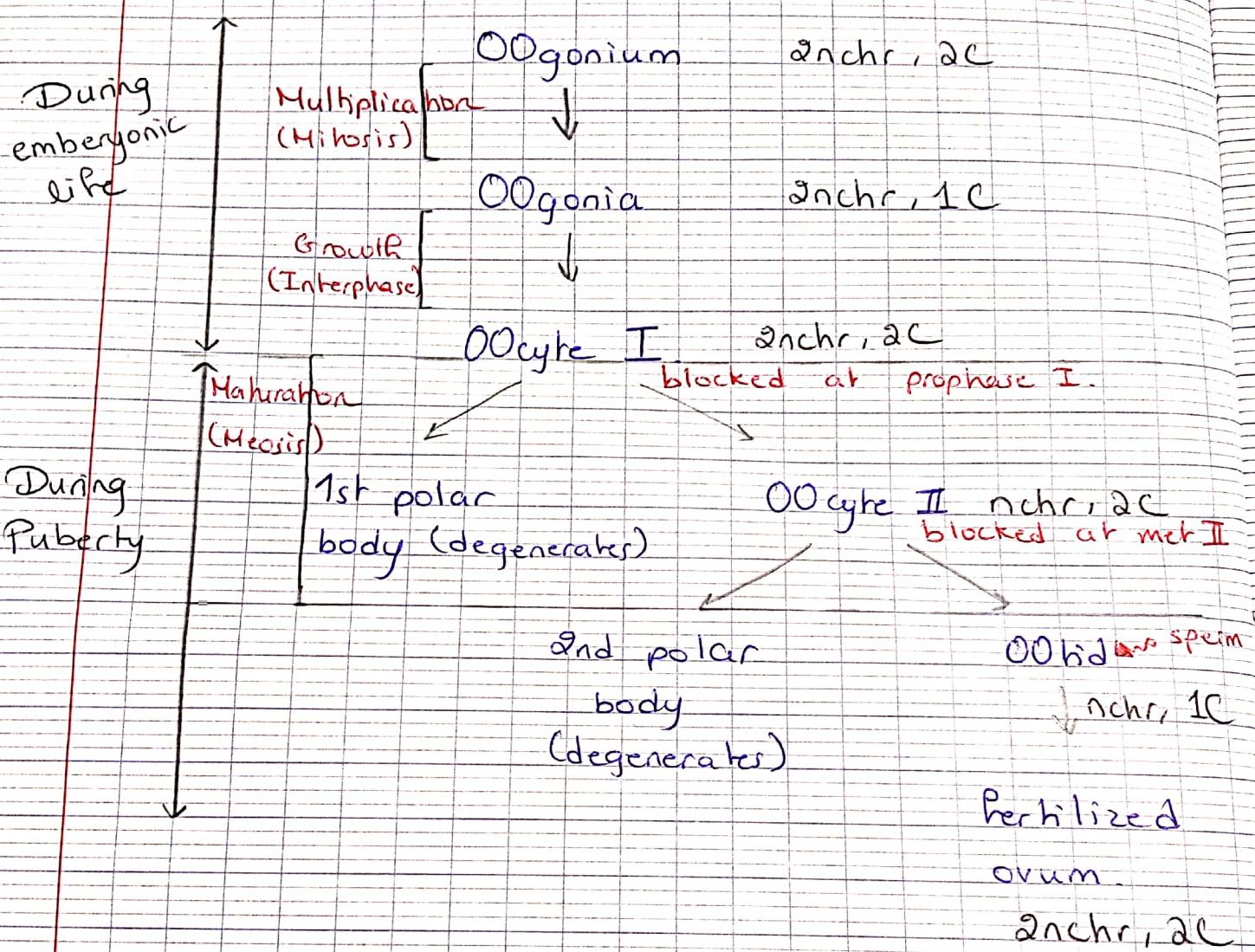
## Notes

- In female every month before puberty 500 primordial follicles enter in activity but only one completes to become a graafian follicle ready to release oocyte during ovulation.
- At puberty folliculogenesis and oogenesis resume to give a graafian follicle enclosing an oocyte II blocked at metaphase II.

## Fertilization

Is the process of union or fusion b/w the haploid male gamete (sperm) and female haploid gamete (ovum or oocyte) to reestablish or restore the diploidy of a new organism.

## Oogenesis Process (Phases)



At the end of Oogenesis only one ovum is obtained.

**Note:** Karyogrammy is the pronucleus of the sperm united with the pronucleus of the oocyte.

## For reading :

Oogenesis Vs. Folliculogenesis

An ovum, released by a 40 years old woman is itself more than 40 years old. In fact, a large number of oocytes are formed very early, by the 15th week of embryonic life.

The ovaries of a five month old embryo contain more than 6 million oocytes.

A large number of these degenerate during embryonic life (follicular atresia).

Each oocyte is surrounded by few follicular cells to form a primordial follicle.

At puberty, each female possesses in her ovaries around 400 thousand oocytes & releases by ovulation not more than 400.

The total depletion of these oocytes corresponds to menopause.

# Regulation of Female Sexual Hormones

## Ovarian Cycles

Menstrual Cycle: Ovaries, endometrium, cervix & temperature.

Ovulation.

Preovulatory phase

Follicular Phase

(development of follicles)

Postovulatory phase

Luteal Phase

Primordial  $\rightarrow$  Graafian  $\xrightarrow{\text{transforms}}$  corpus luteum  
(yellow body).

{ If no fertilization  
corpus albicans

0

28

During post ovulatory phases

Corpus luteum secretes estrogen and progesterone

Ovarian cycle: In the ovary, follicles develop from primordial till graafian at day 14 and to corpus albicans at day 28

- follicles release estrogen in the first 2 weeks, then the corpus luteum release estrogen & progesterone.

Gonadotropic hormones: LH & FSH stimulate ovaries

FSH: Follicular stimulating hormone (development of follicle)

GnRH: Gonadotropic releasing hormone.

## Endometrial Cycle:

Proliferative phase Before Ovulation.

Estradiol stimulates

- 1- Development of endometrium (uterine mucosa).
- 2- Formation of tube-like glands
- 3- Growth of blood vessels.
- 4- Preparation of receptors of progesterone.

Secretory phase After ovulation.

Progesterone stimulates

- 1- More development of endometrium covered by uterine lace.
- 2- Nutritive Glands produce nutrients.
- 3- Blood vessels become spiral.

It's called secretory phase since nutrients are secreted

During endometrial cycle:

After bleeding (mensis) endometrium (uterine mucosa) starts developing & supplies O<sub>2</sub> via blood.

All of these are prepared for a possible implantation of a new embryo.

If no fertilization, then this endometrium will slough off causing bleeding.

## Cervical mucus cycles

Cervical gland release thick mucus to prevent the entrance of sperm in the days where no ova are available, while it release a thin mucus to facilitate the entrance of sperm in the days of ovulation.

### Thermal Cycle:

The temperature of the female fluctuates between  $36 + 36.8^{\circ}\text{C}$  while after ovulation the temperature increases to  $37.2^{\circ}\text{C}$  & it remains high till the end of the cycle.

### Cyclic Evolution of Ovarian Hormones

Ovarian hormones Estrogen & Progesterone.

Ovariectomy & Ablation of ovaries.

### Activity 15 page, 490

- 2 The ovaries are indispensable for the development of endometrium.
- 3 Ovaries act independently of its location (act via blood).
- 4 Ovarian extract contains chemicals that stimulates the development of endometrium.

### Conclusion:

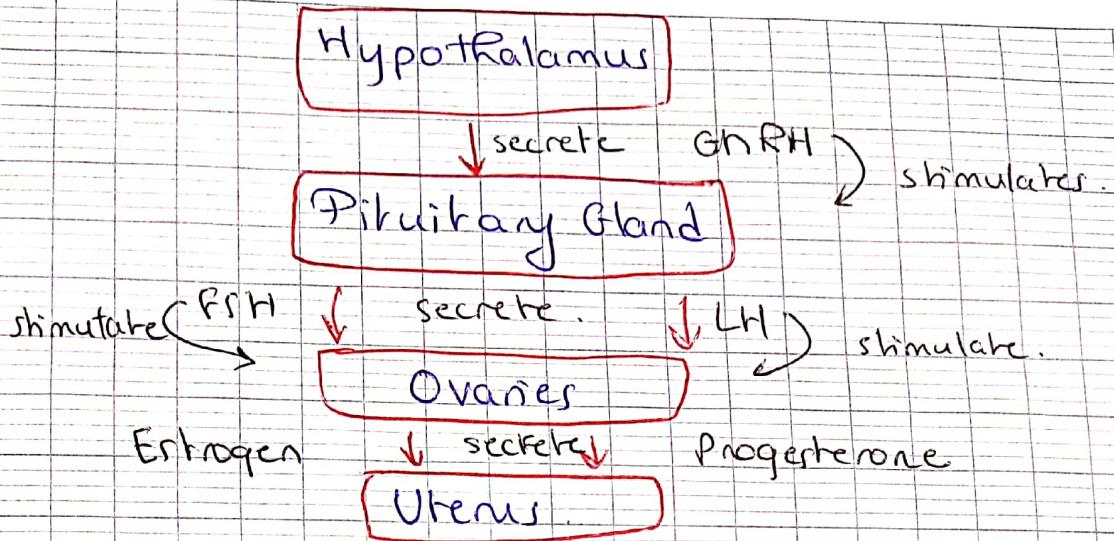
Ovaries are endocrine glands that secrete chemicals that stimulate the development of endometrium.

### During Follicular Phase:

Estrogen is secreted by the internal theca of developing follicles & by granulosa.

### During Secretory Phase:

Progesterone is secreted by yellow body.



**Note :** FSH & LH are secreted by the anterior pituitary gland.

### Ques. 3 Page: 491

Exp. 28 This indicates that anterior pituitary is indispensable for the development and cyclic activity of ovaries and its cyclic activity.

Exp. 38 This indicates that anterior pituitary gland acts via blood in the pituitary area.

**Conclusion :** Anterior pituitary is an endocrine gland that stimulates the activity of ovaries and uterus.

Important  
Indicates

## Hypothalamic Control on Pituitary Secretions

Exp. 1 & 2: This indicates that hypothalamic neurons are indispensable for the stimulation of the anterior pituitary to secrete FSH & LH.

Exp. 3: The connection between hypothalamic and anterior pituitary gland is indispensable for the stimulation of anterior pituitary to secrete LH and FSH by the hypothalamus.

Exp. 4: The hypothalamus stimulates the pituitary gland by GnRH.

### Doc e1:

This indicates that the hypothalamus is indispensable for the secretion of LH.

### Doc e2:

This indicates that the hypothalamus is indispensable for the secretion of FSH.

Pulsatile manner: Discontinuous Injections.

Ques 8:

This indicates that the continuous injection of GnRH inhibits the release of LH and FSH while the discontinuous injections of GnRH stimulates the release of LH and FSH.

Hypothalamus release the GnRH discontinuously (in a pulsatile manner) to activate the pituitary gland leading to the secretion of LH and FSH.

The FSH will stimulate the development of follicles which will increase in volume and secrete a large amount of estrogen.

Doc 4 Page # 492  
Ovarian feedback control on the hypothalamo-pituitary axis.

Exp 1

The fall in estrogen level leads to a rise in LH and FSH was detected after bilateral ovariotomy. This indicates that the ovaries are indispensable for the secretion of estrogen. Moreover, the presence of estrogen and progesterone inhibits the secretion of FSH & LH.

Exp 2:

This indicates that moderate amount of estrogen inhibits the secretion of LH.

This indicates that high amount of estrogen stimulates LH peak.

Conclusion (on the feedback).

Moderate estrogen exerts a negative feedback on LH secretion

High estrogen exerts a positive feedback on LH secretion