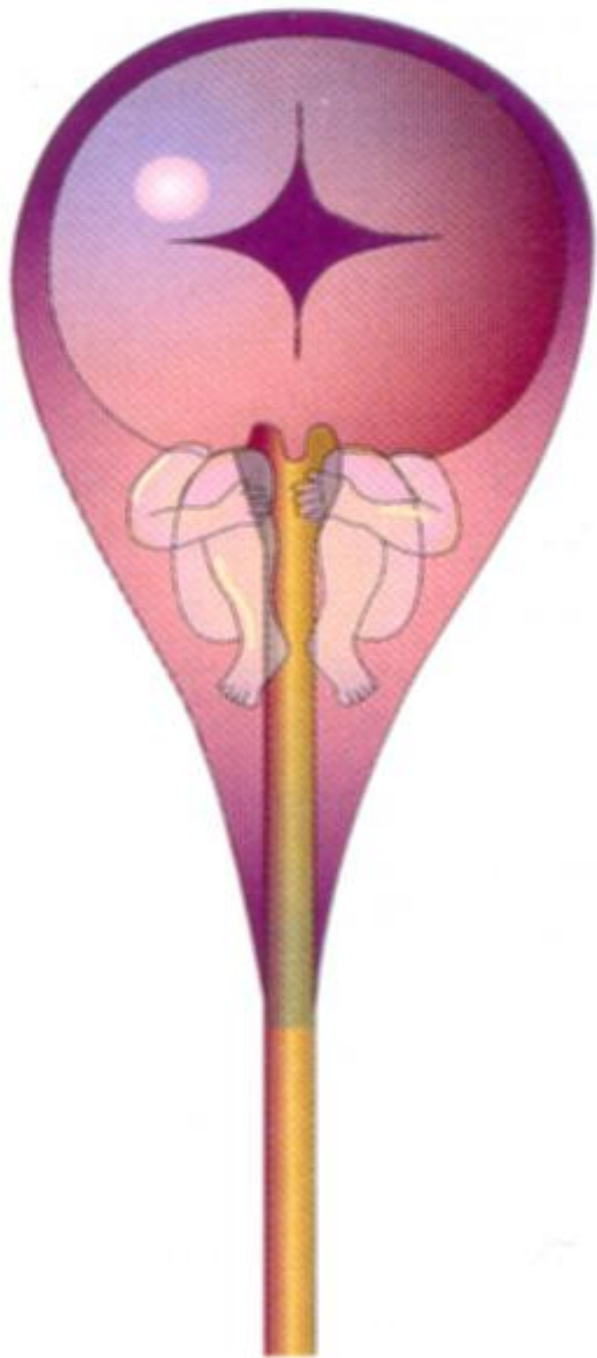
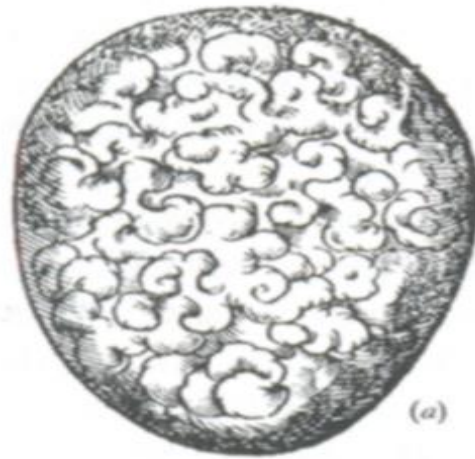


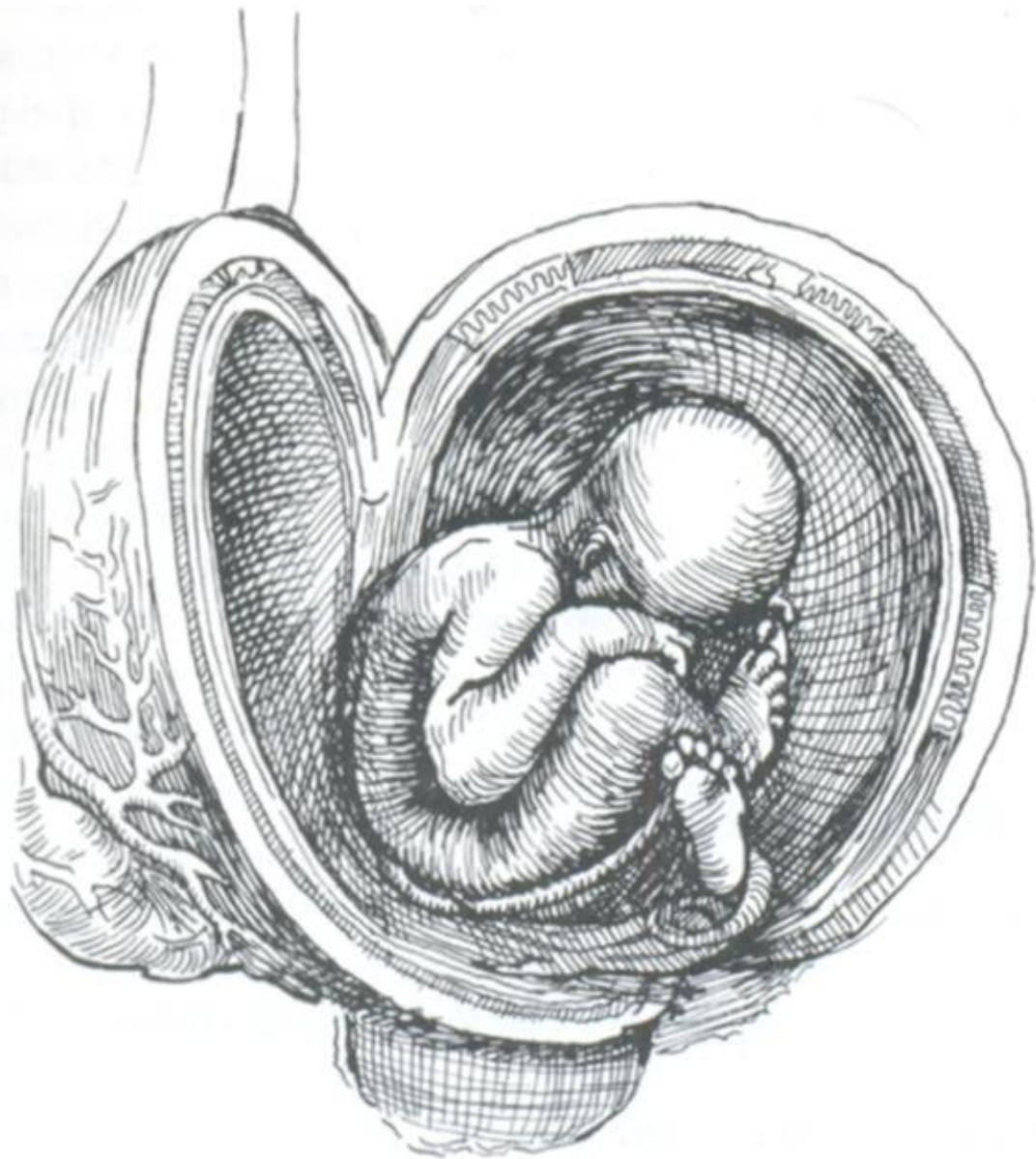
Life is a miracle



GENERAL EMBRYOLOGY







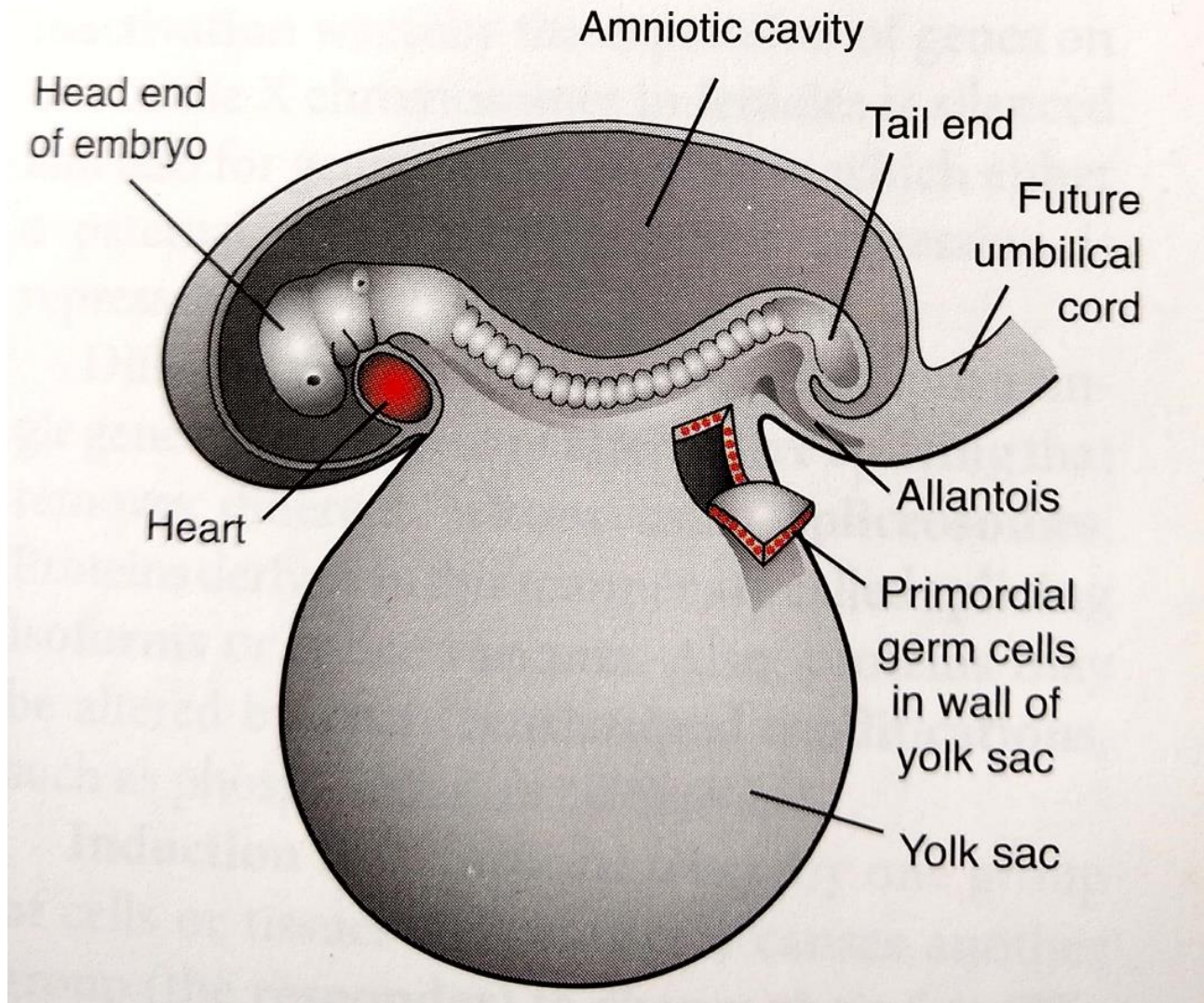
Gametogenesis

Spermatogenesis

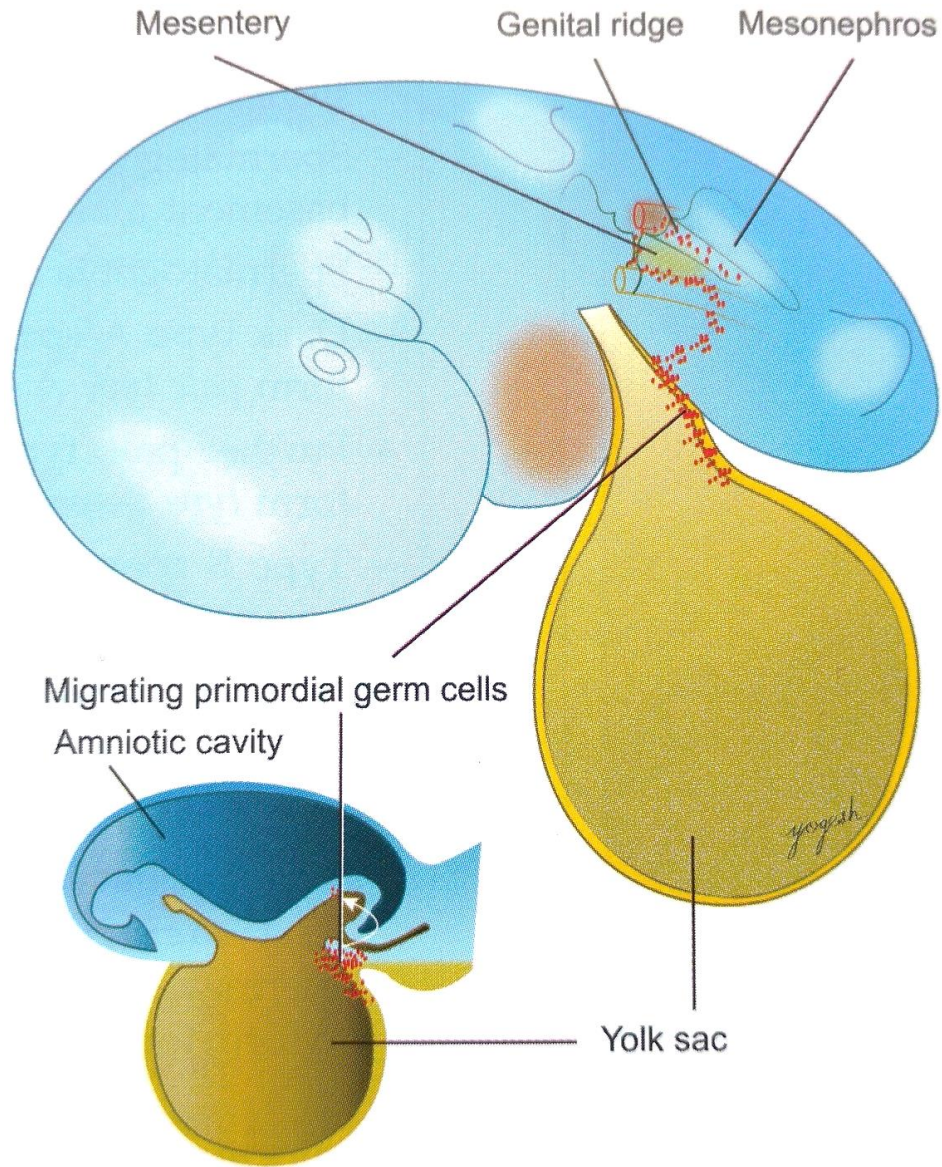
Oogenesis

- Development begins with **fertilization**
- Fertilization – union of **Male & Female gametes**
i.e. **spermatozoa & oocyte**
- Gametes are derived from **primordial germ cells**
(**PGCs**)
- **PGCs** : formed in the **epiblast** – **2nd wk** of gestation
 - : move through **primitive streak** during gastrulation – **3rd wk**
 - : migrate to the **wall of yolk sac**
 - : **4th wk** - migrate towards developing gonads
 - : **5th wk** – arrive at **developing gonads**
 - : **mitotic division** increase the number

Embryo – 3 weeks



Migration of Primordial Germ Cells



Primordial germ cells



Formed in the epiblast in the 2nd week



Move toward the primitive streak in the 3rd week



Migrate to the wall of the yolk sac in the 4th week



Migrate toward the developing gonads and reach by the 5th week



Mitotic divisions increase the number of cells



In gonadal ridge, they undergo gametogenesis which includes meiosis to reduce the number of chromosomes



Cytodifferentiation completes maturation of the male and female gametes

At Birth

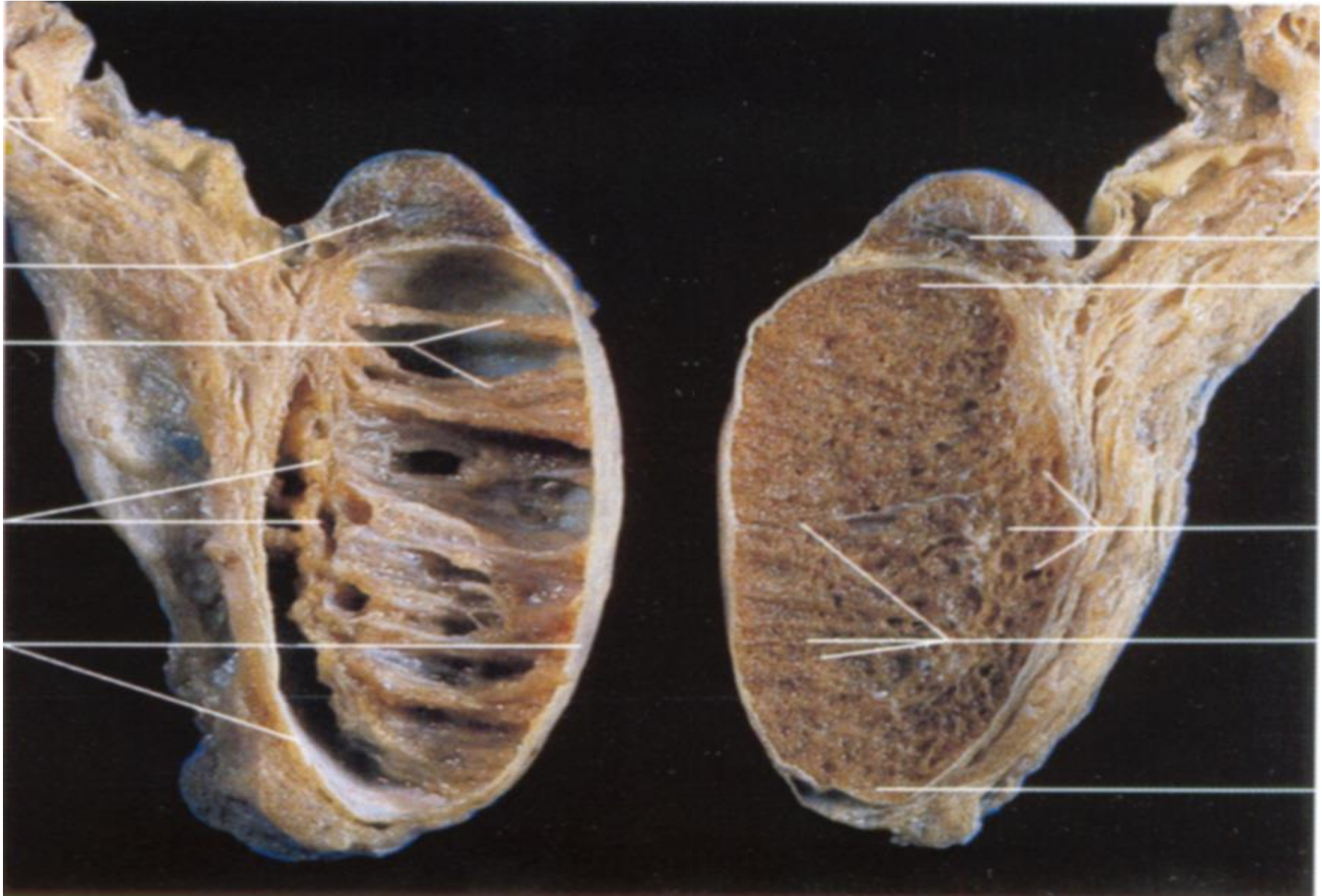
Sex cords of Testis have

- 1) Primordial Germ cells
- 2) Cells of Sertoli

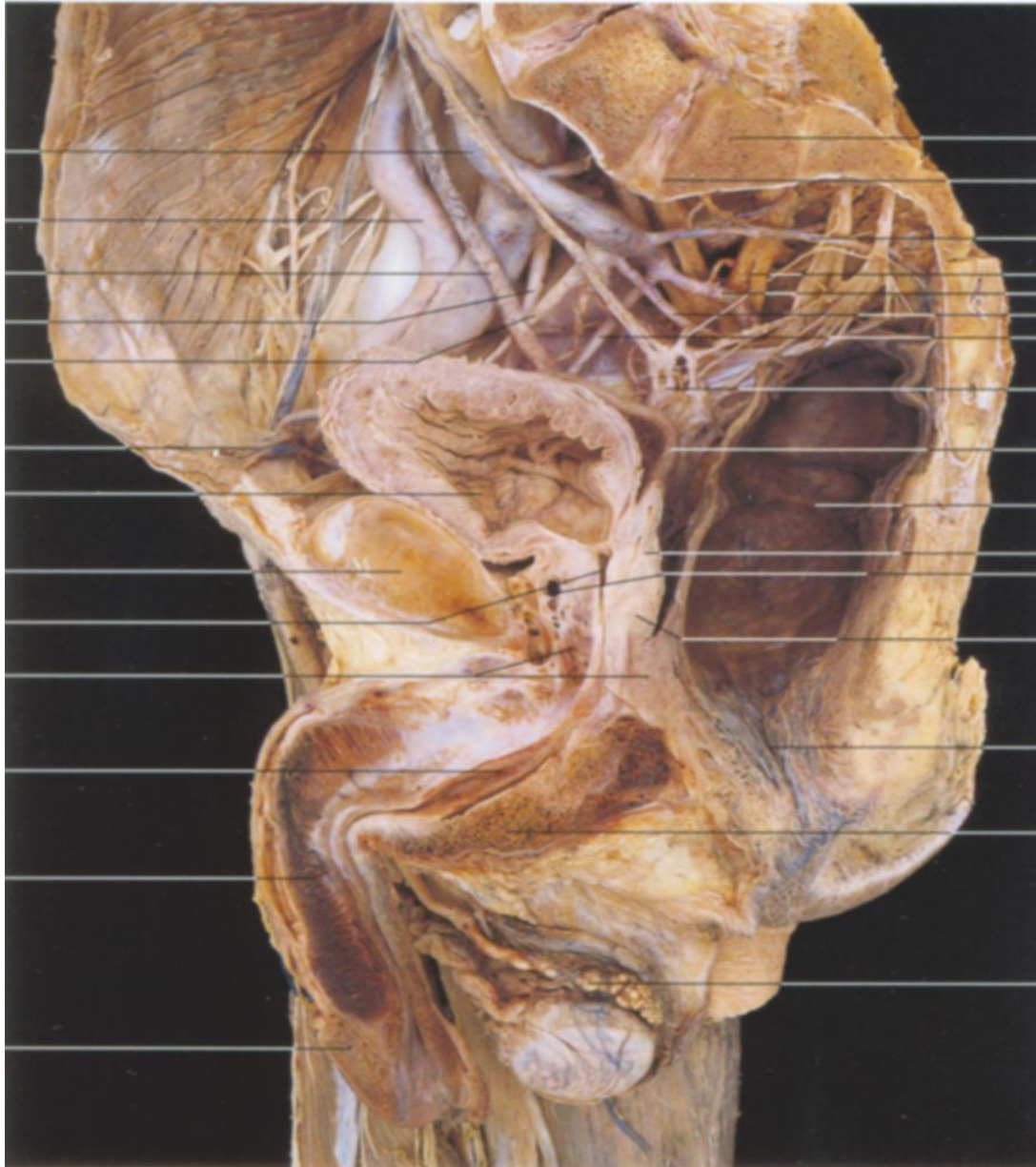
Sex cords acquire lumen just before Puberty

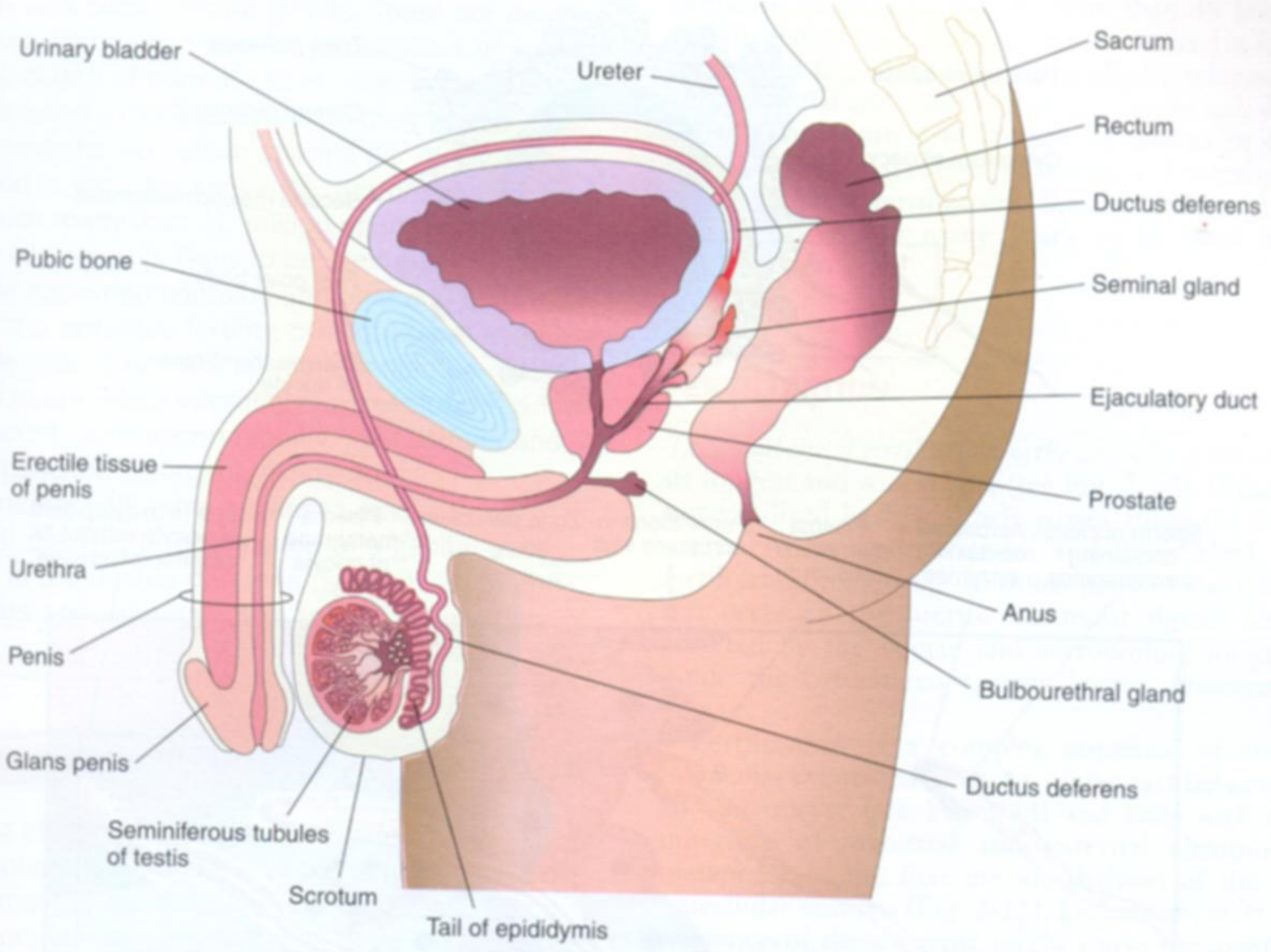
Maturation begins at Puberty

Testis-Interior, Spermatic cord



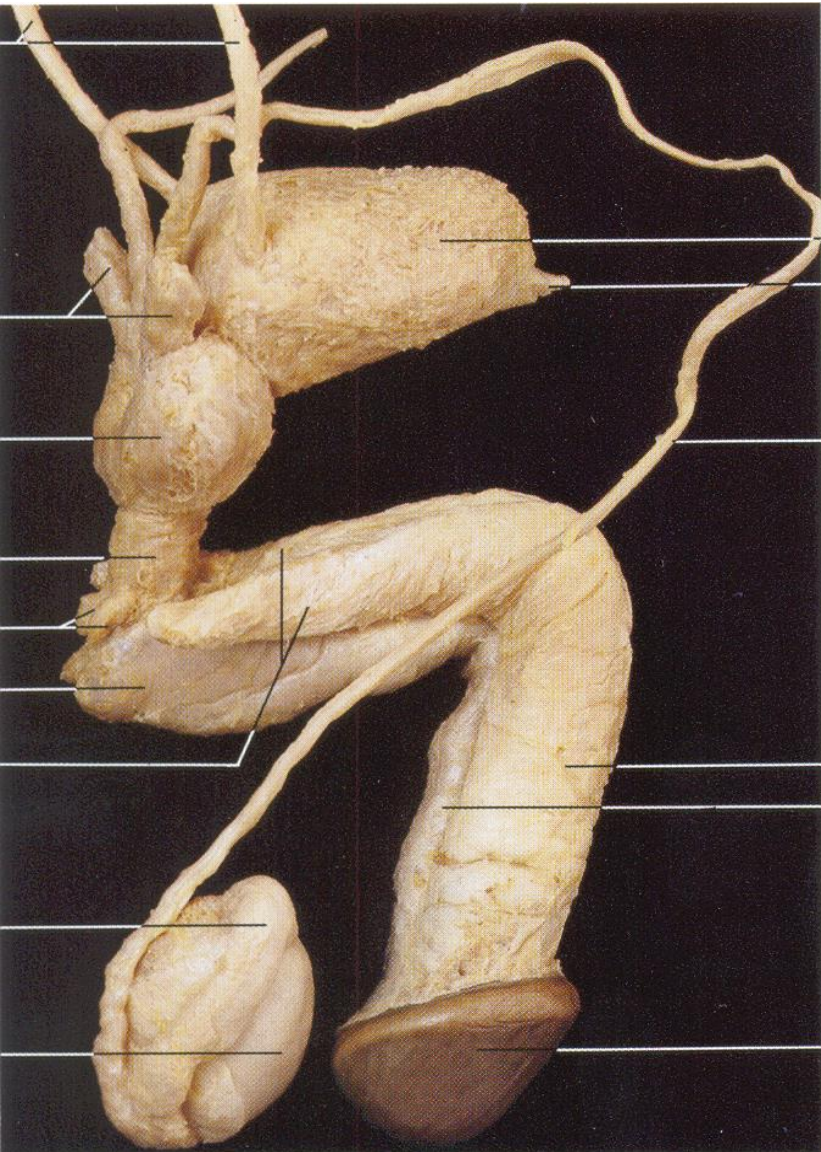
Male Pelvis –Sagittal Section







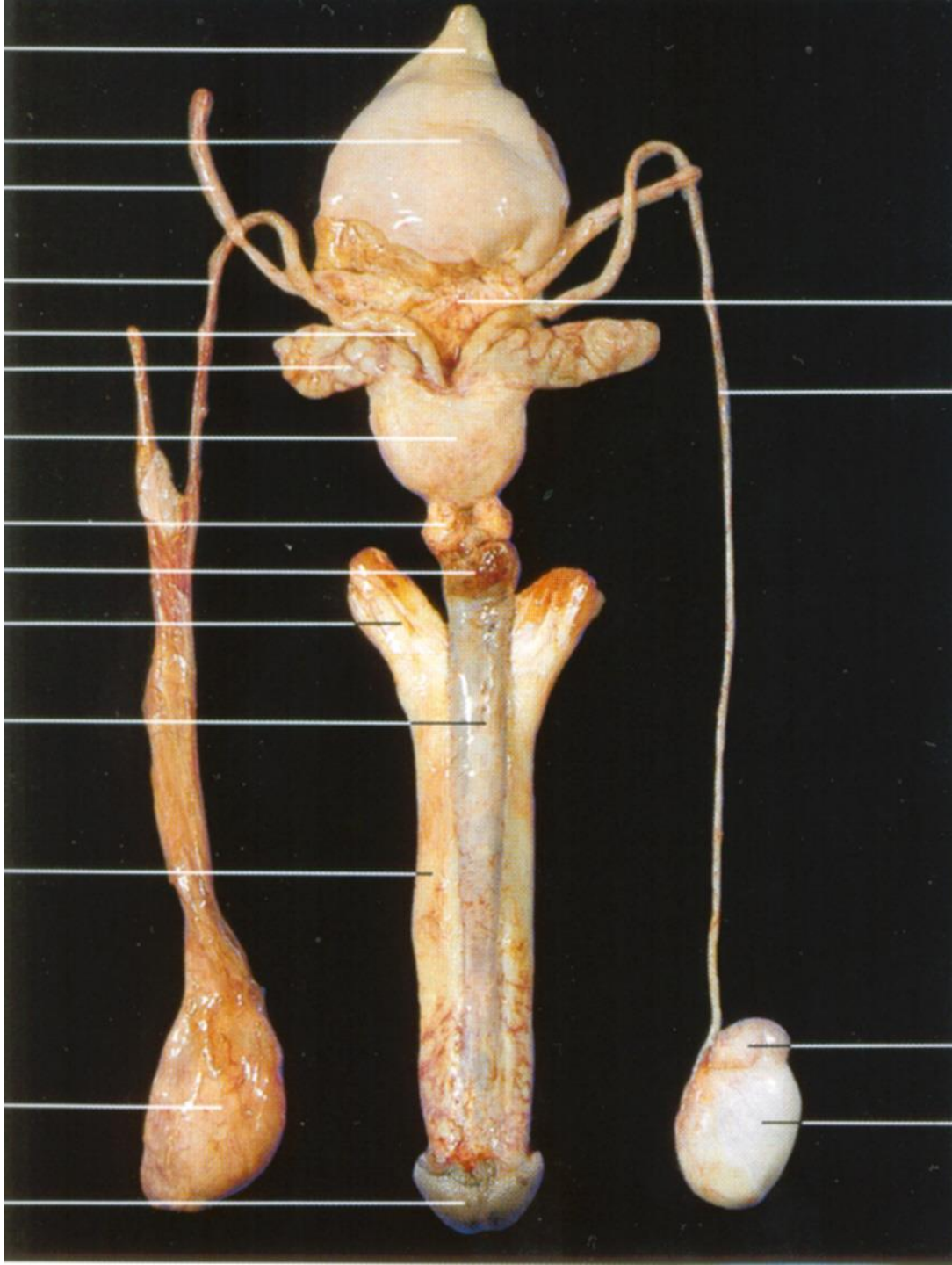
Male Reproductive System



Secretory- Gonads –Testis
(Spermatozoa)

Conducting Epididymis
Vas deferens
Ejaculatory Duct
Urethra

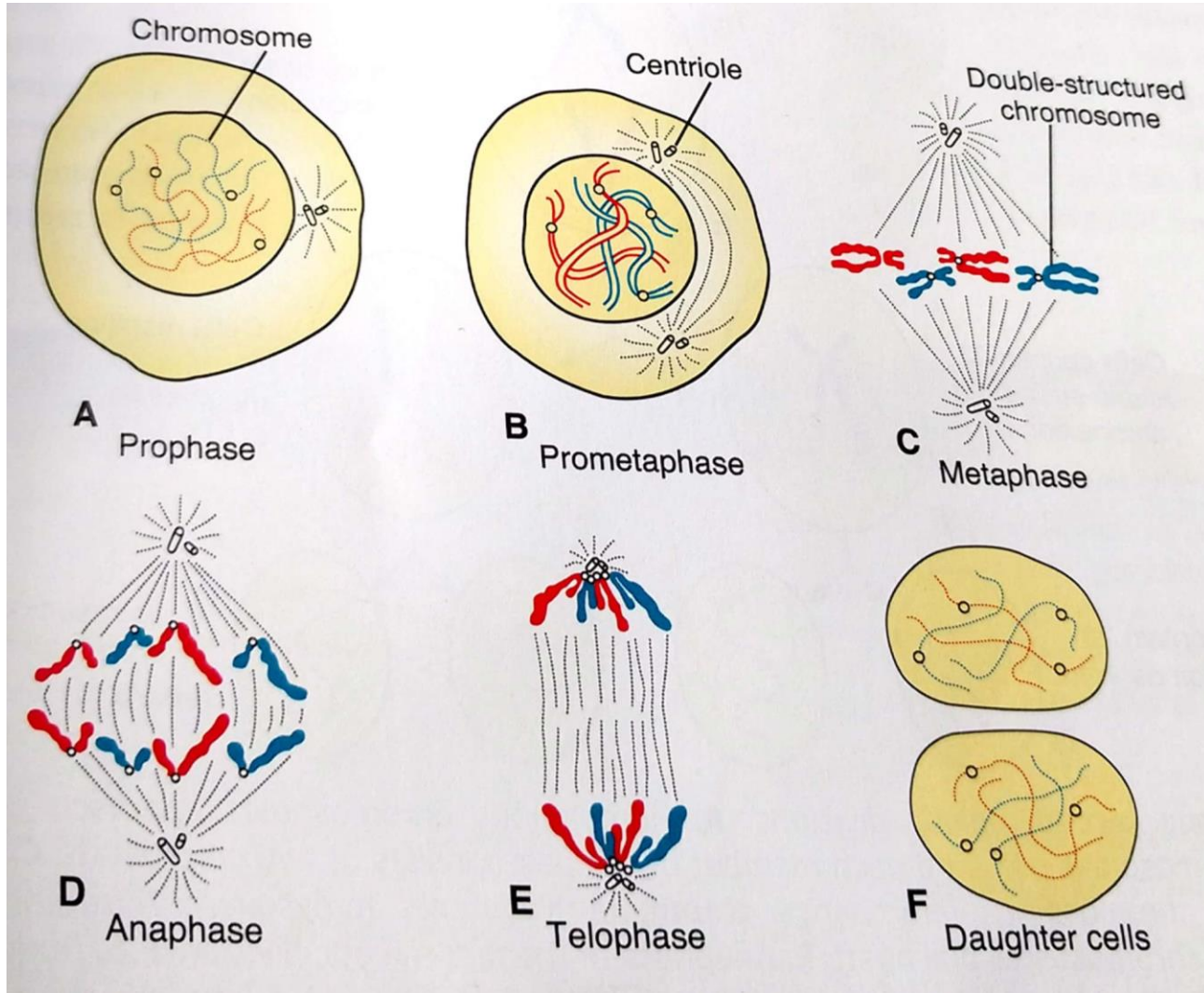
Associated glands
Seminal Vesicles
Prostate,
Bulbourethral glands



- Right -Testis- with Spermatic cord
- Left—Testis with Epididymis, Vas.def
- Bladder with ureters
- Seminal vesicles
- Prostate
- Penis

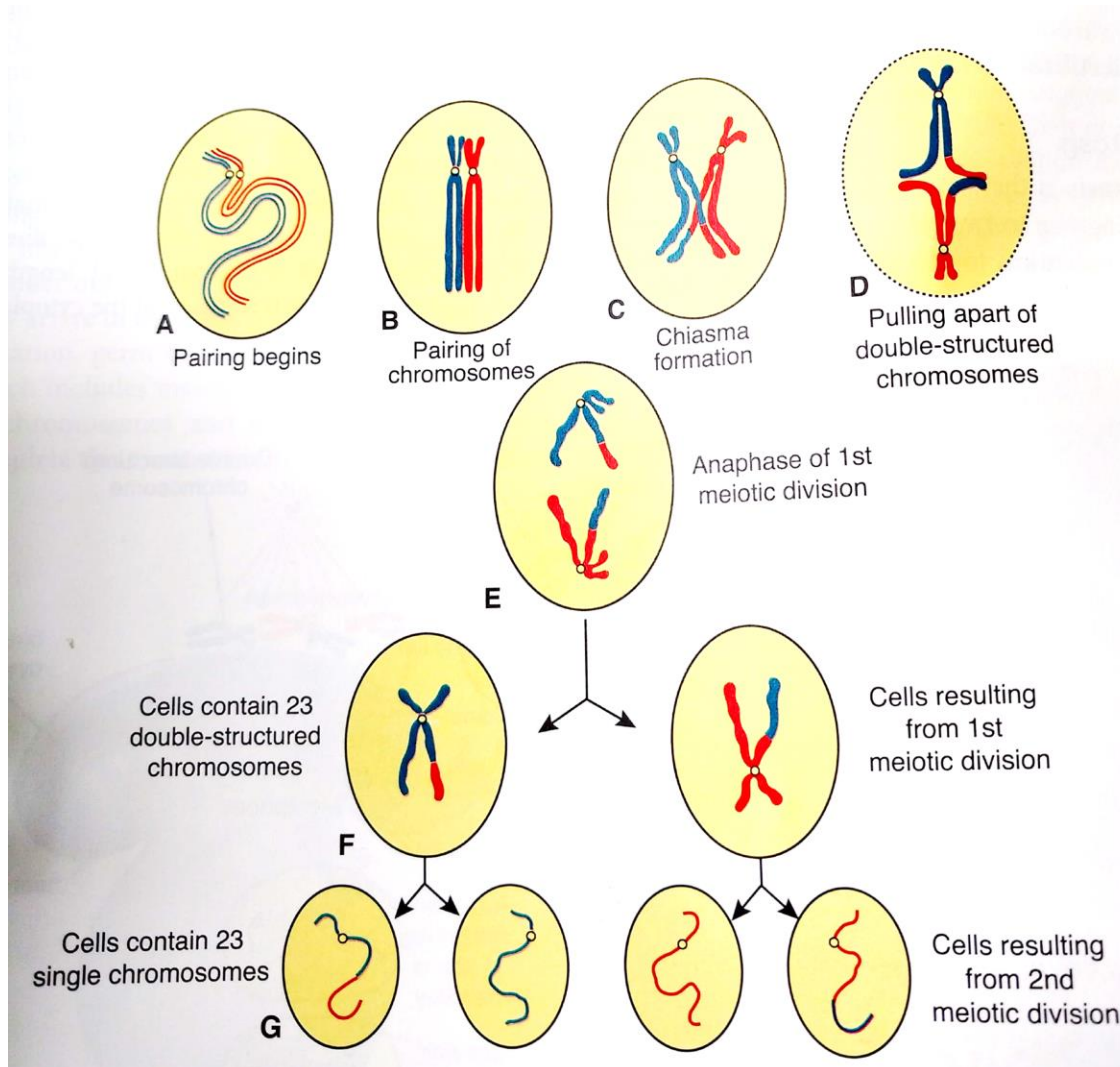
Mitosis

A process whereby one cell divides, giving rise to two daughter cells that are genetically identical to parent cell



Meiosis

A process that takes place in germ cells, requires two cell divisions, to reduce the no. of chromosomes to haploid no. of 23

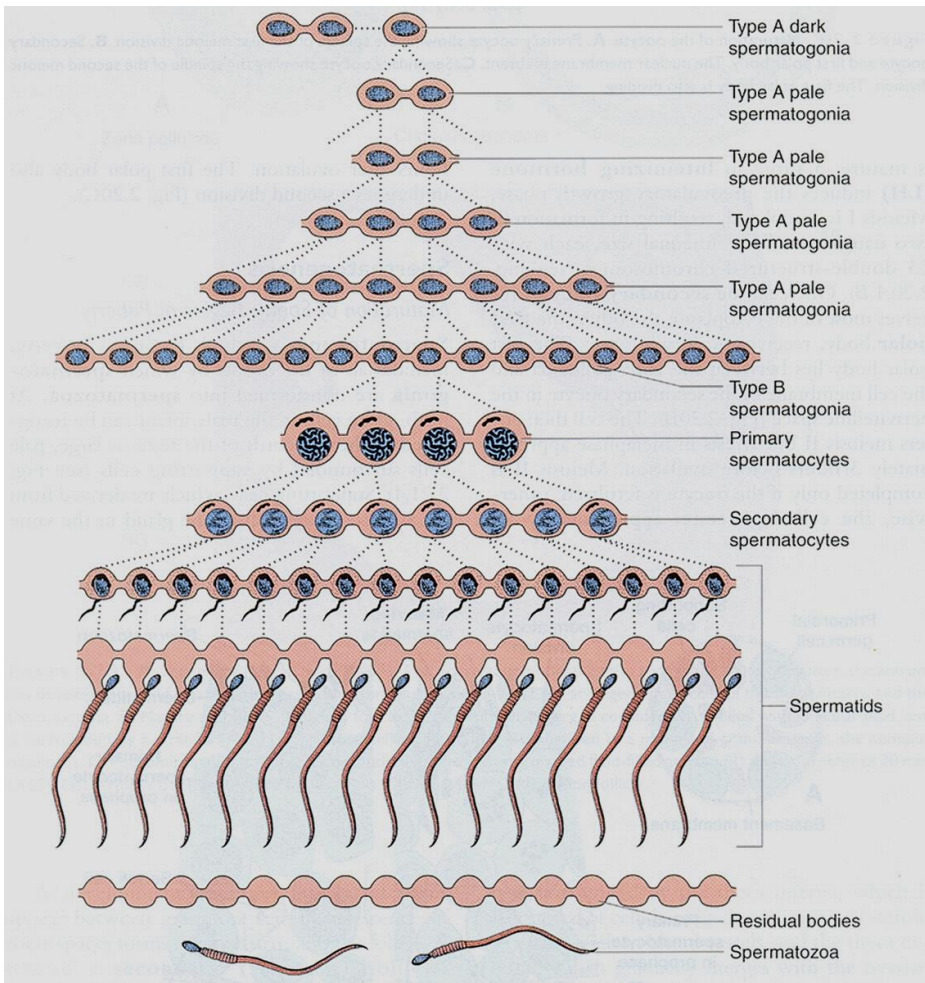


Result of Meiosis

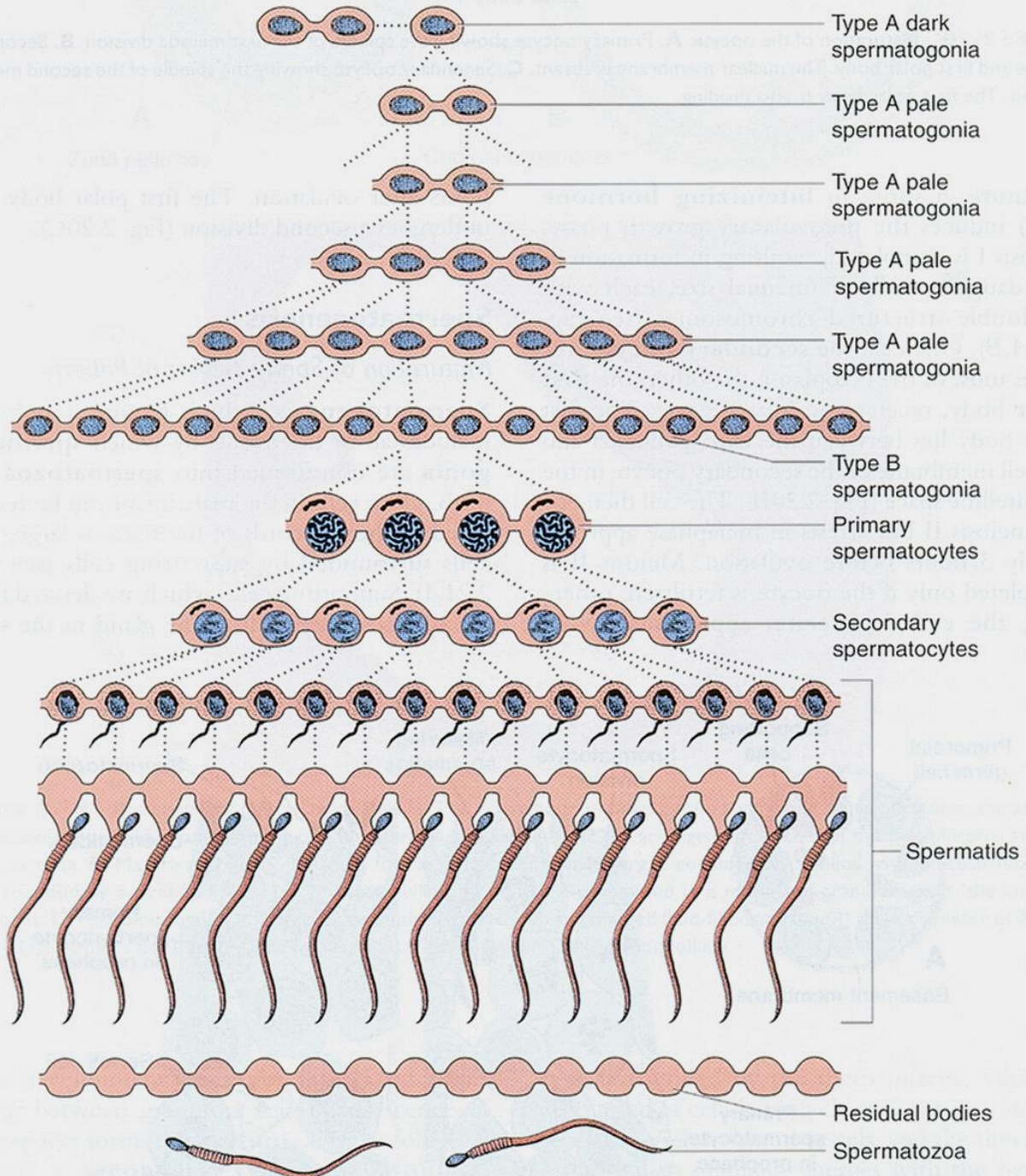
- **Genetic variability** is enhanced through
 - Crossover, which redistributes genetic material
 - Random distribution of homologous chromosomes to the daughter cells
- Each germ cell contains a haploid no. of chromosomes so that at fertilization, **the diploid no. of 46 is restored**

Spermatogenesis — 74 days

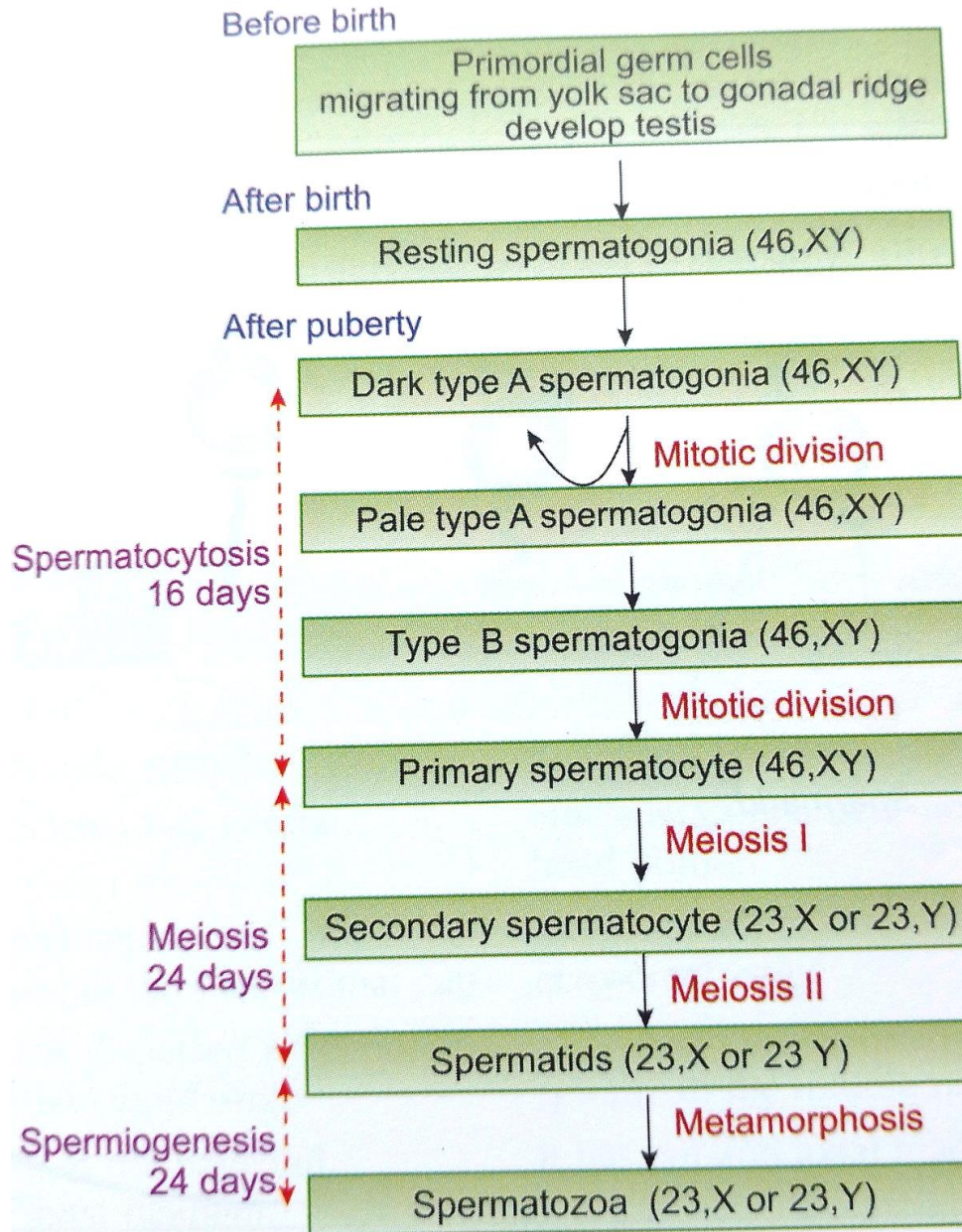
Begins at Puberty & continues till old age



- **Primordial Germ Cells**
- **Spermatogonia**
 - A-dark** – Stem cells
 - A-pale**
- **Spermatogonia B**
- **I ry Spermatocyte**
 - Meiosis I**
- **II ry Spermatocyte**
 - Meiosis II**
- **Spermatid**



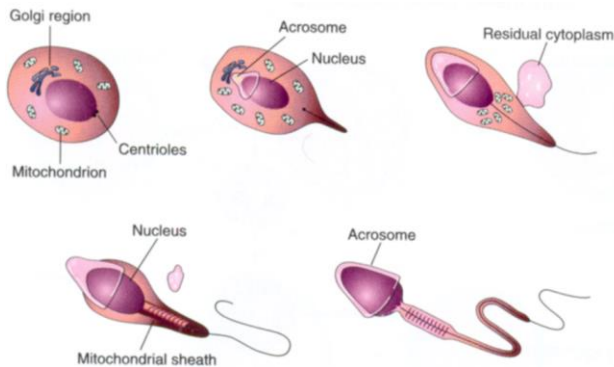
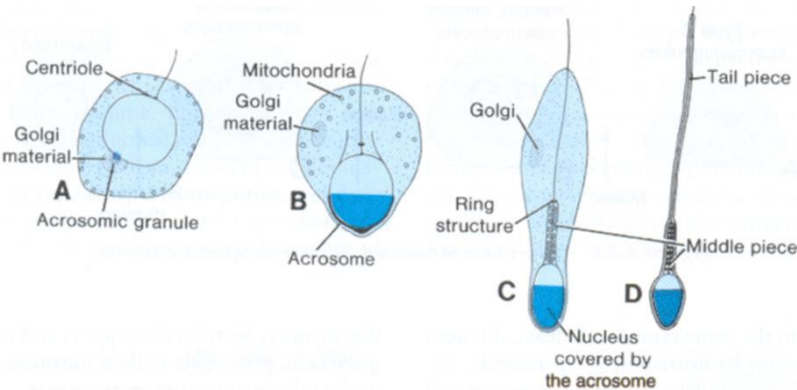
Spermatogenesis

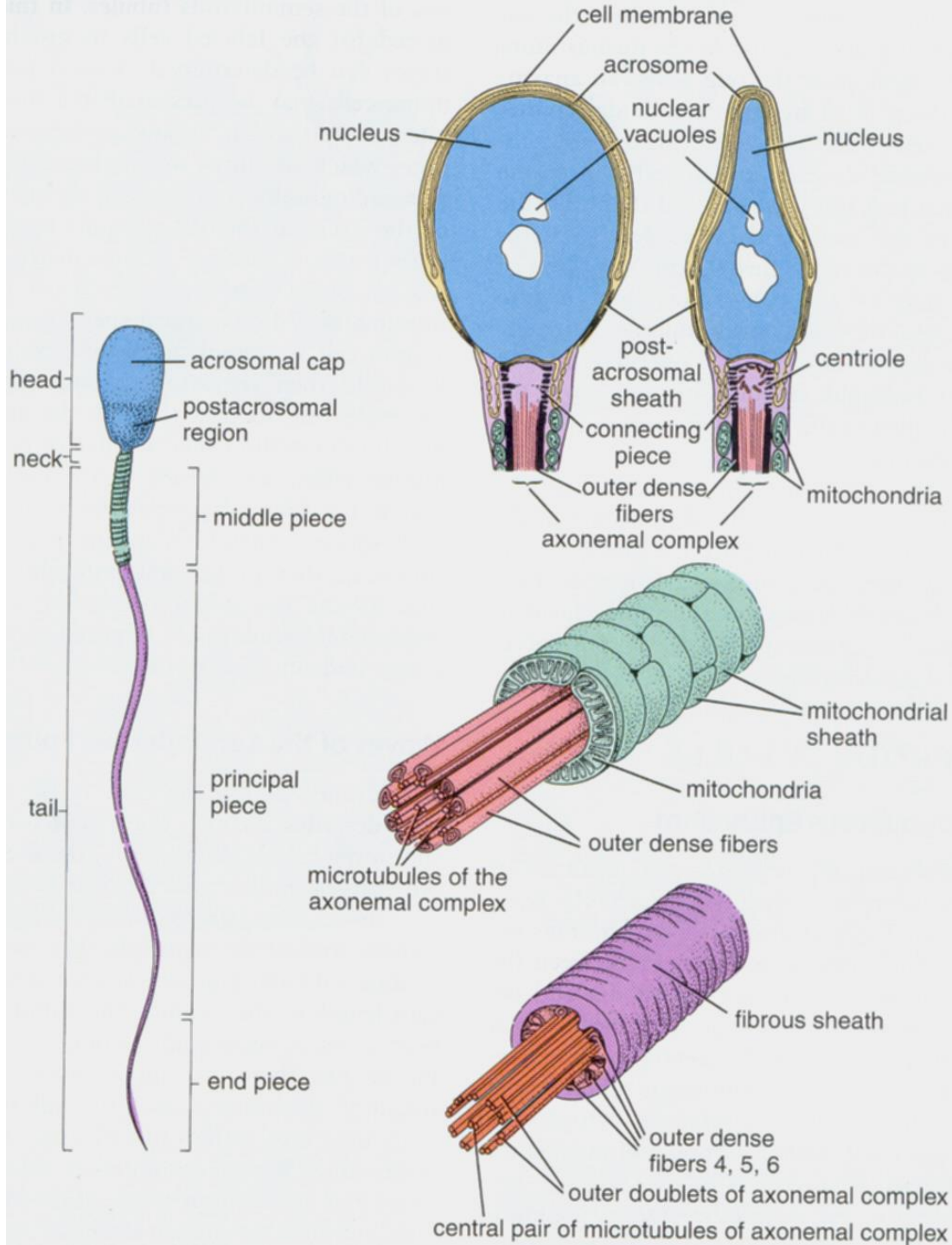


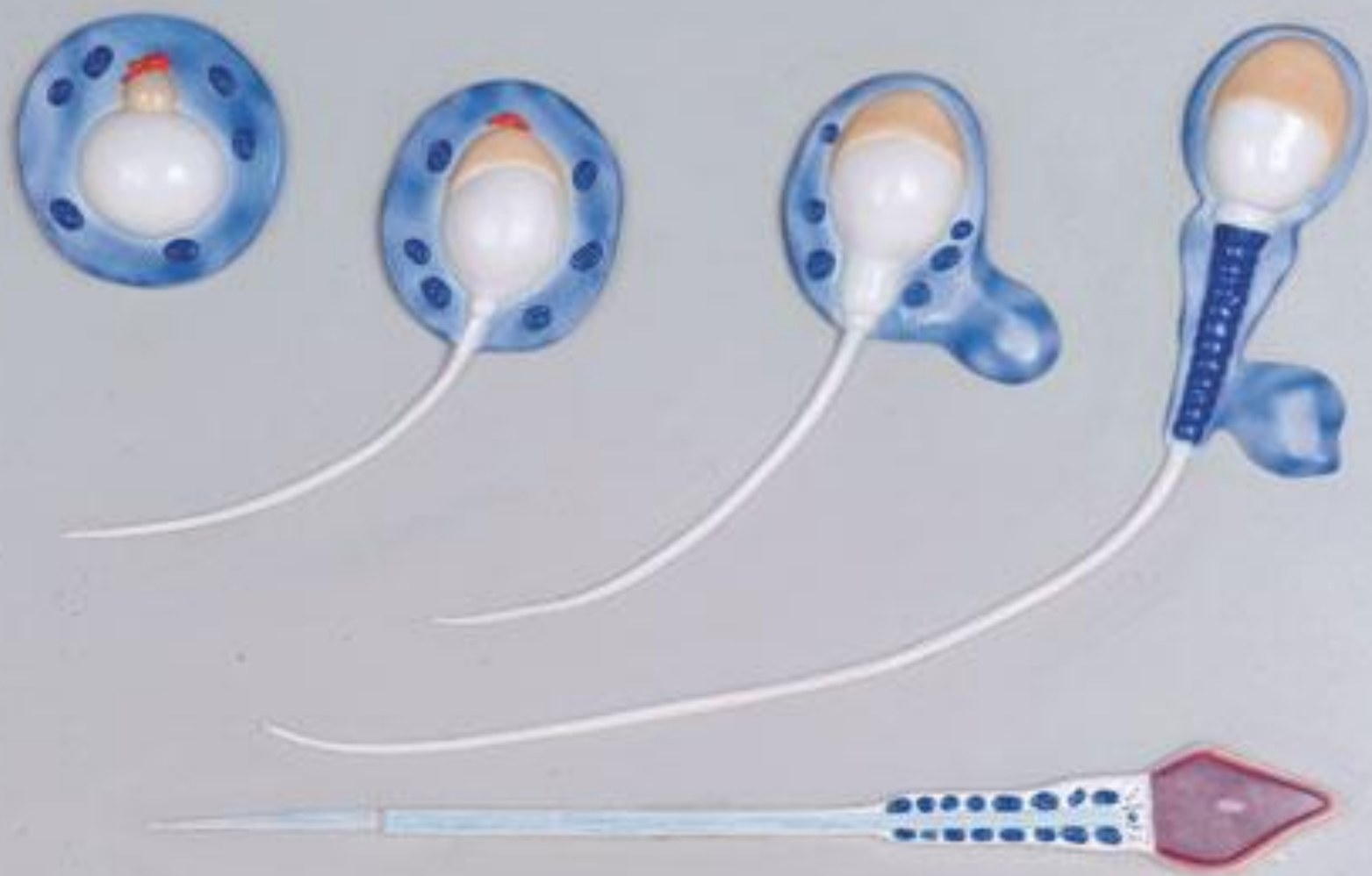
Spermiogenesis

Spermatid → Spermatozoon

1. Nucleus condensation
2. Acrosome formation : covers half of nuclear surface,
: enzymes assist penetration of egg & its surrounding layers during fertilization
3. Shedding of cytoplasm
4. Formation of head, neck, middle piece, principal piece & tail
5. Free swimming
6. Gain motility – epididymis







Sertoli Cell

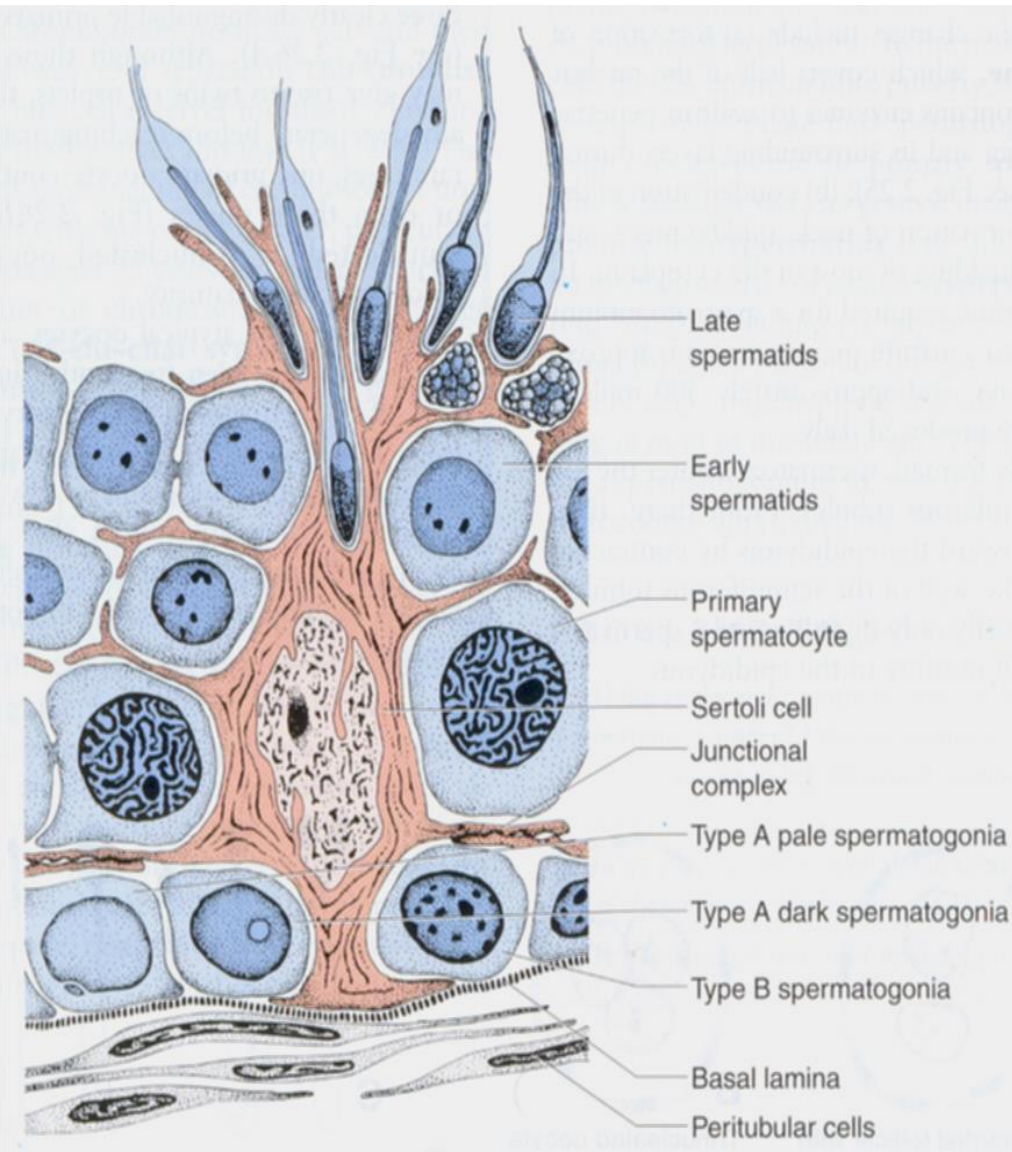
- **Support**

Throughout the development from Spermatogonia

to

Spermatids-

Cells are embedded in the deep recesses of **Sertoli** cells

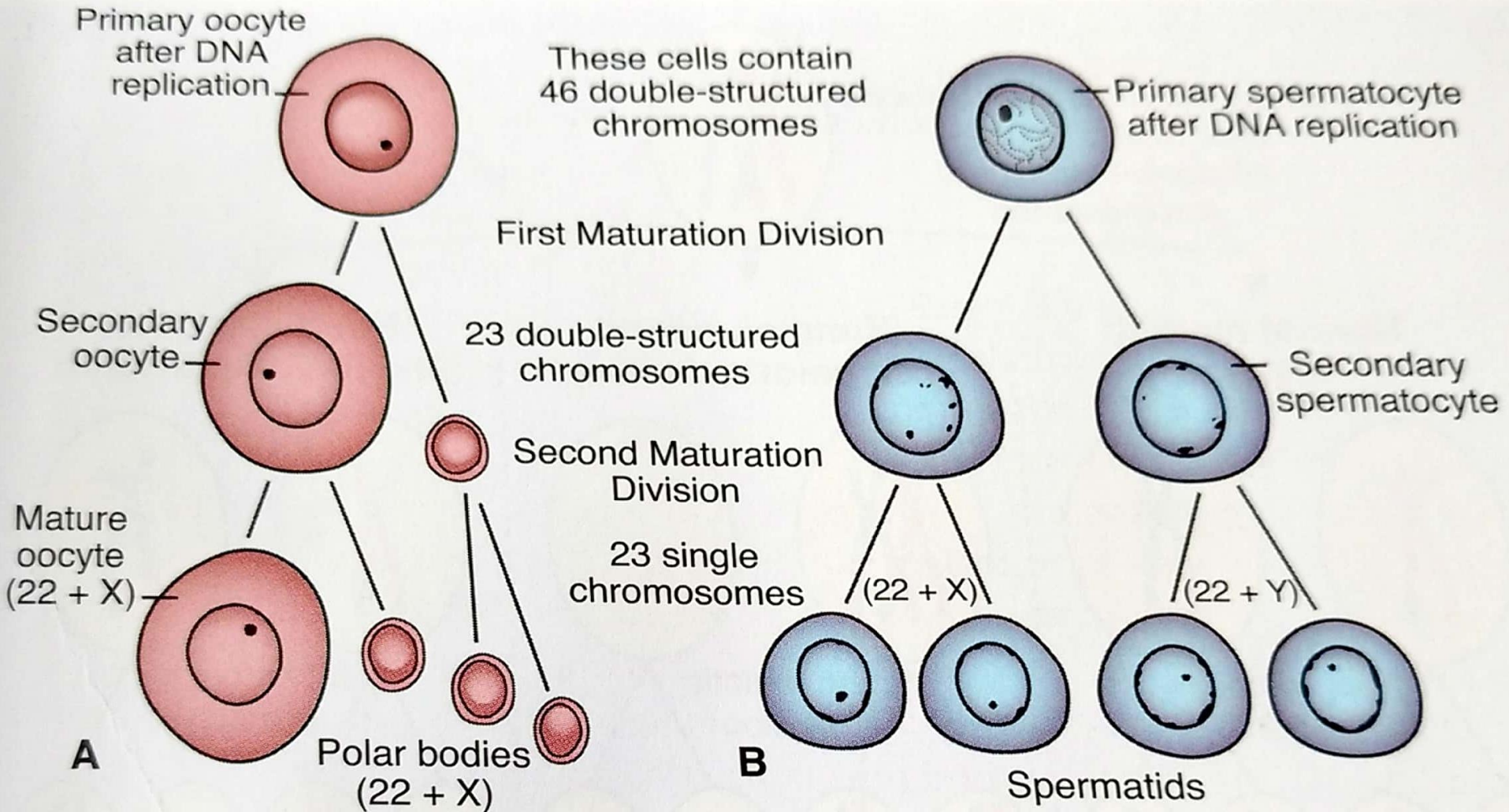


Sertoli Cell

Functions

- Protection
- Nutrition
- Assist in Release of Sperms
- Release of hormone for maturation of the sperms
- Phagocytosis of residual bodies
- Blood testis Barrier

Spermatogenesis & oogenesis



SEMEN-Seminal Fluid

- Semen- **10% sperms**
90% fluids --60% -Seminal vesicle,
30%- Prostate,
10% - Bulbo-Urethral glands
- 100-300 million /ml
- Proteolytic Enzymes, Sugars, Prostaglandins
- Fluid secretion is from-Testes, Epididymis, prostate
Seminal Vesicle, Bulbourethral glands

Anomalies

Normal Sperm Count- 200-600 million/ejaculate

- **Abnormal count**

Oligo-zoospermia - Less sperm count

Azoospermia - No sperms

- **Abnormal motility**

Less Motility--40% sperms have to be motile

- **Abnormal Morphology**

- 1) Cytoplasmic bridges

- 2) Double head

Male Infertility

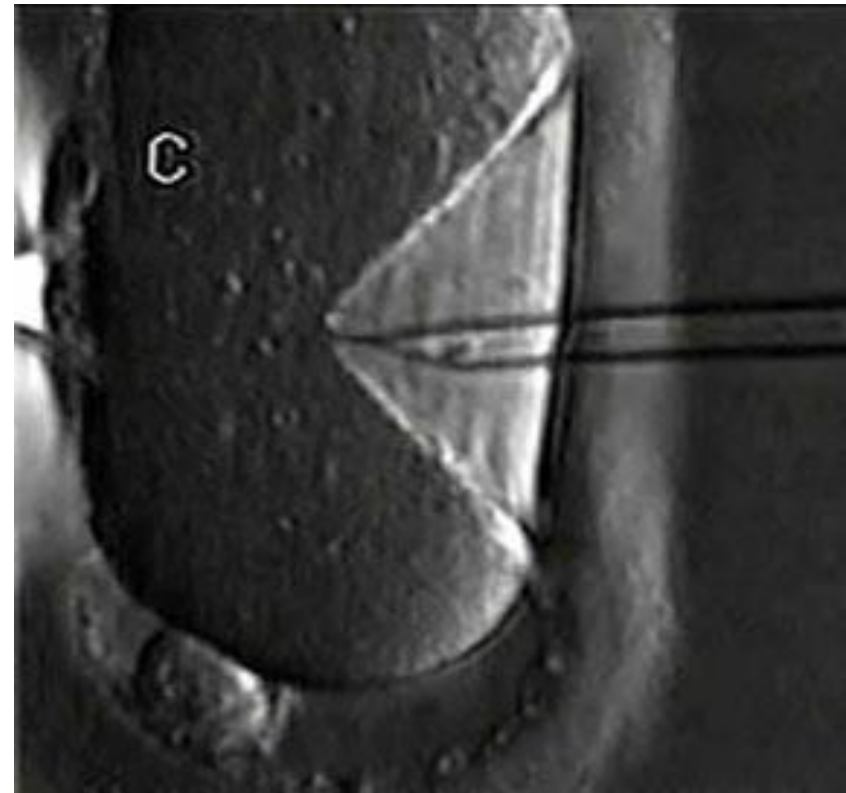
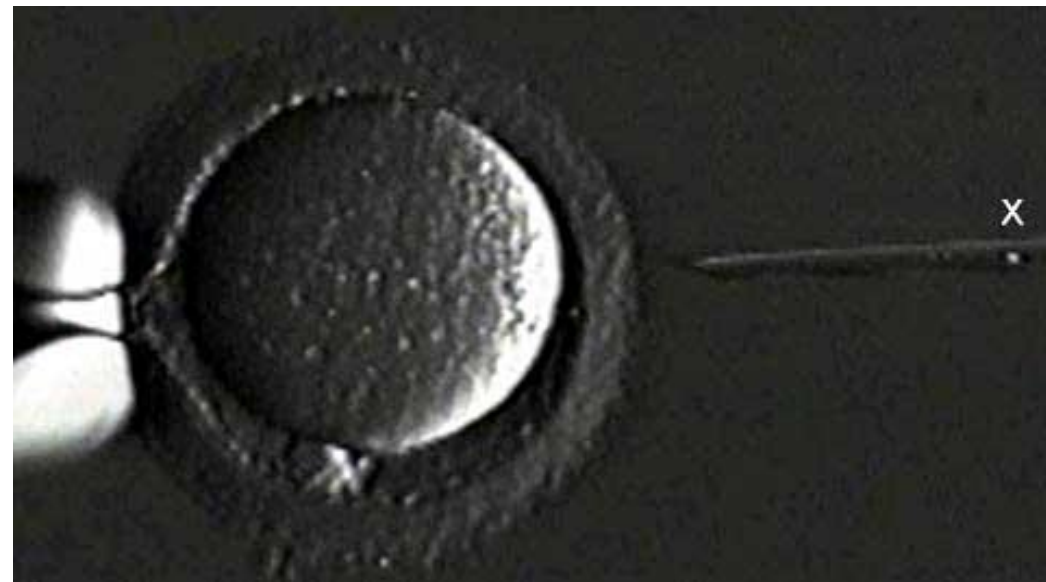
- **Genetic** Disorders – **Klinefelter** syndrome
- **Endocrine** Disorders
- Abnormal Spermatogenesis
- Obstruction of Ductus Deferens

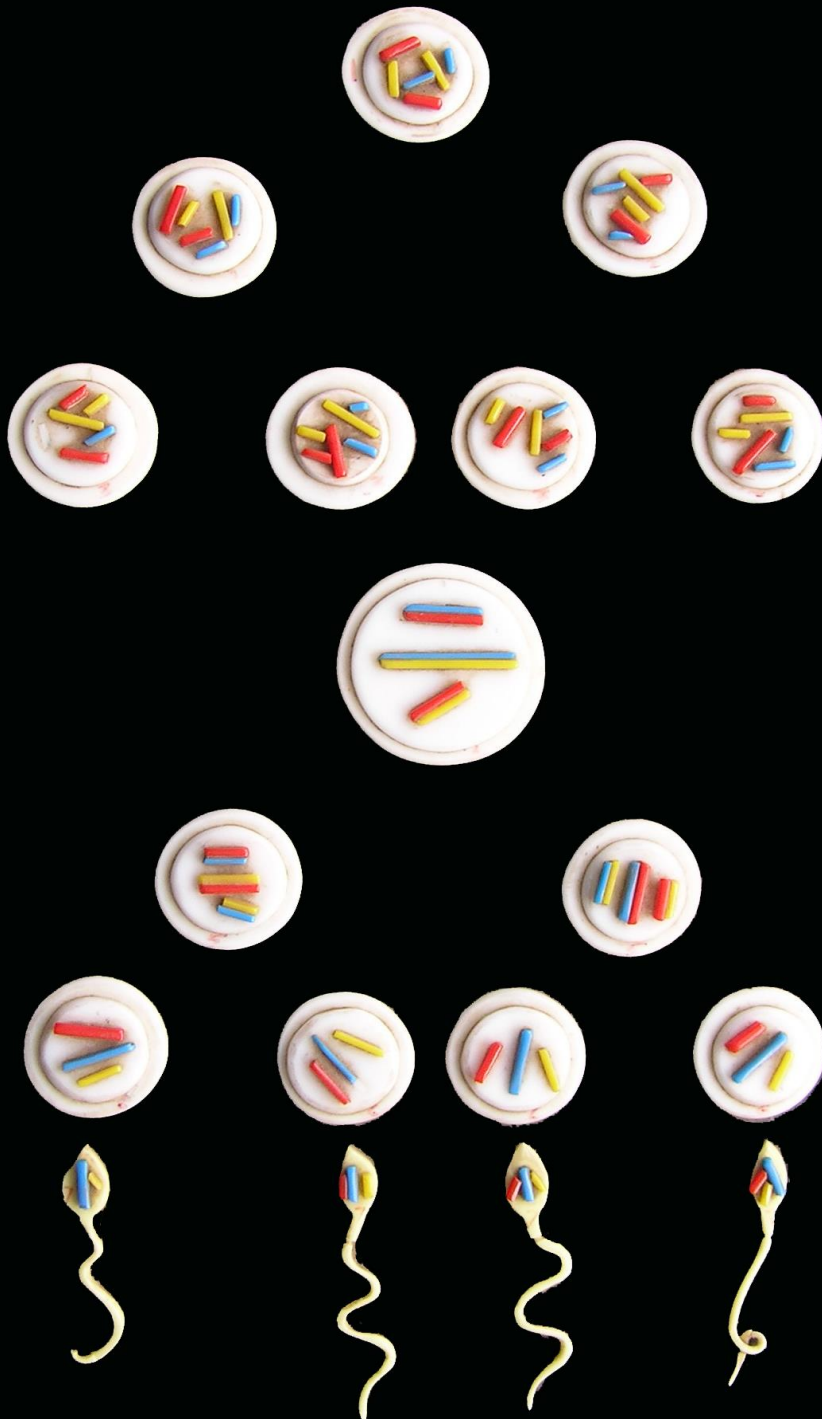
Clinical Correlates

- **Vasectomy** - reversible in 50%
- **Cryopreservation** - at **-70 C**
- **Non viable after 48 hrs in Female Genital Tract**
- **ICSI** - Intra **Cytoplasmic Sperm Injection**-
oligospermia

I.C.S.I

Intra Cytoplasmic Sperm Injection





- Spermatogonium
- A-Dark-stem cells,
- A-Light
- B- Spermatogonia

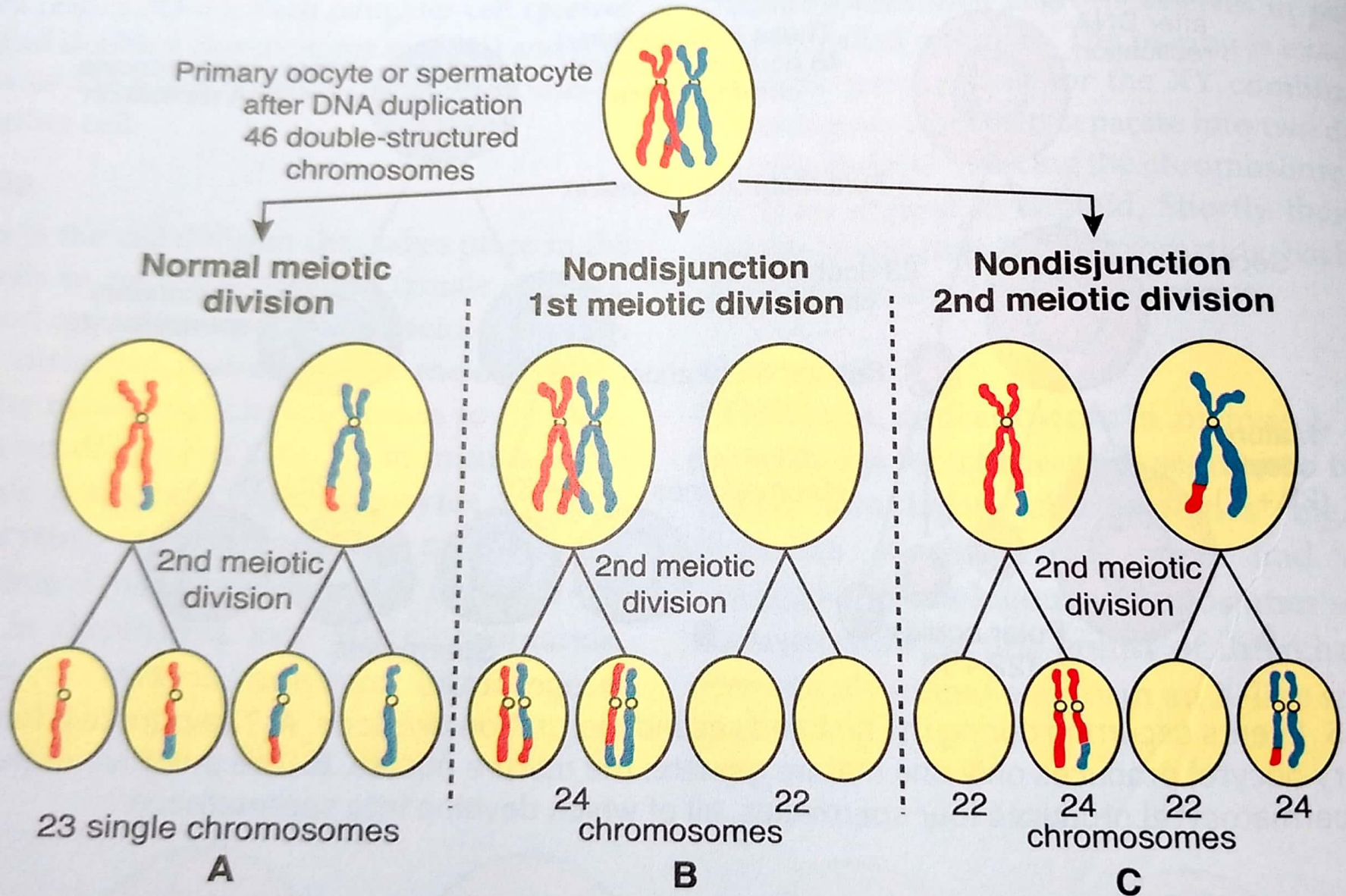
- Primary Spermatocyte
- Secondary spermatocyte
- Spermatids

- Spermatozoa

Spermatogenesis

- What it is – **Definition**
- Where it takes place - **Site**
- How many days are required – **Duration**
- How it takes place – **Steps involved**
- **Clinical aspect**

Meiosis : Normal & Abnormal



Thank You