

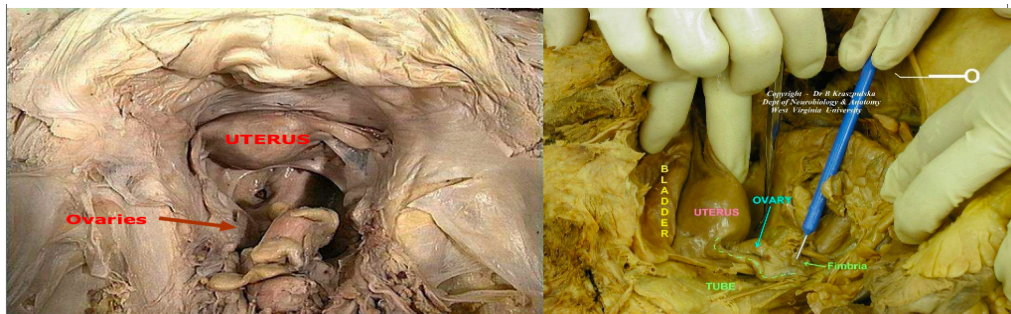
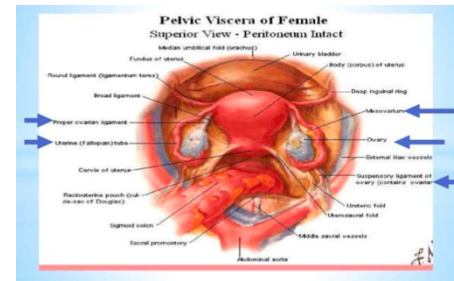
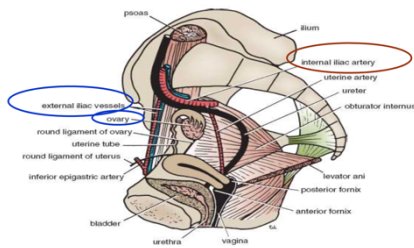
Female genital system part 1

Female Genital Organs

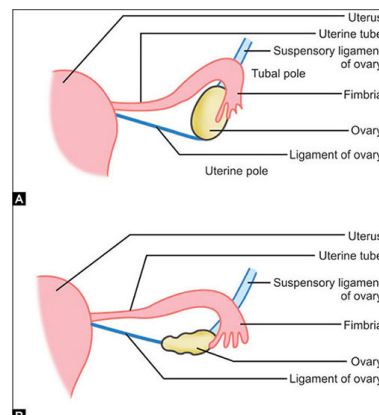
- This includes :
 - Ovaries
 - Fallopian tubes
 - Uterus
 - Vagina
 - External genital organs

Ovaries

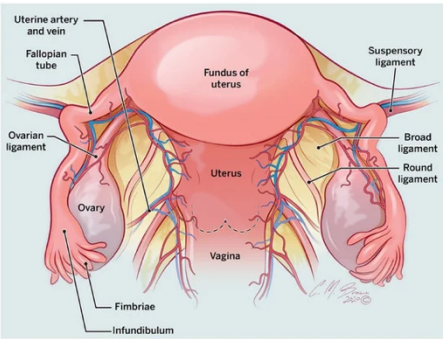
- **Site of the Ovary:** In the ovarian fossa in the lateral wall of the pelvis which is bounded:
 - Anteriorly : External iliac vessels.
 - Posteriorly : internal iliac vessels and ureter



- **Shape :** the ovary is almond-shaped.
- **Orientation :**
 - In the nullipara : long axis is vertical with superior and inferior poles.
 - In multipara : long axis is horizontal, so that the superior pole is directed laterally and the inferior pole is directed medially.



- **Description** : In nullipara, the ovary has :
 - **Two ends** : superior (tubal) end and inferior (uterine) end.



□ **A. Ends of the Ovary :**

- **Superior (tubal) end :**
 - is related to the ovarian fimbria of the uterine tube and is attached to side wall of the pelvis by the **ovarian suspensory ligament**.
- **Inferior (uterine) end :**
 - it is connected to superior aspect of the uterotubal junction by the **round ligament of the ovary** which runs within the broad ligament

- **Two borders** : anterior (mesovarian) border and posterior (free) border.

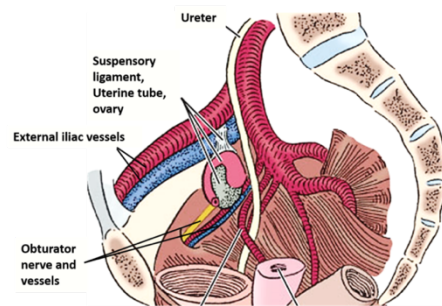
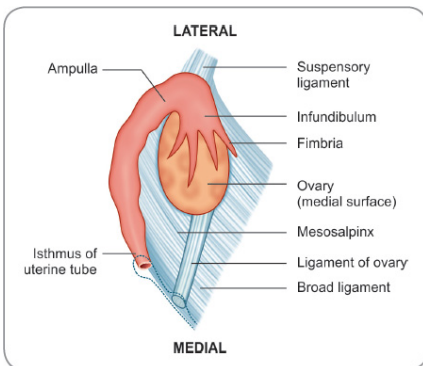
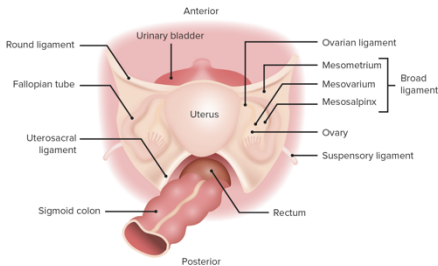
□ **B. Borders of the Ovary :**

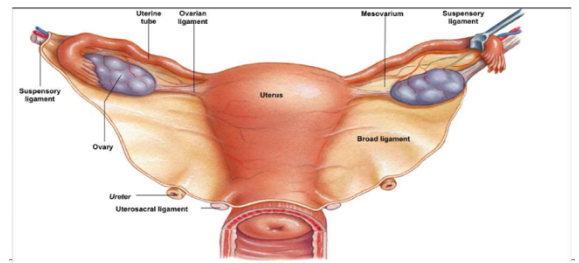
- **Anterior (mesovarian) border :**
 - presents the hilum of the ovary and is attached to the posterior layer of the broad ligament by a short peritoneal fold called the **mesovarium**.
- **Posterior (free) border :**
 - is related to the lateral curved end of the uterine tube.

- **Two surfaces** : lateral and medial.

□ **C. Surfaces of the Ovary:**

- **Lateral surface:**
 - is related to the parietal peritoneum of the ovarian fossa which separates the ovary from obturator nerve and vessels.
- **Medial surface:**
 - is related to the uterine tube.
 - **N.B:** Uterine tube has triple relation to the ovary : the tube is related to the tubal end, the posterior border and medial surface of the ovary.





○ **Ligaments of the ovary**

▪ **1.Round ligament of the ovary :**

□ extends between the uterine end of the ovary and uterotubal junction.

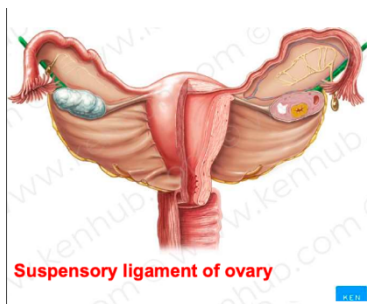
▪ **2.Mesovarium :**

□ is a short peritoneal fold between the anterior border of the ovary and posterior layer of the broad ligament.

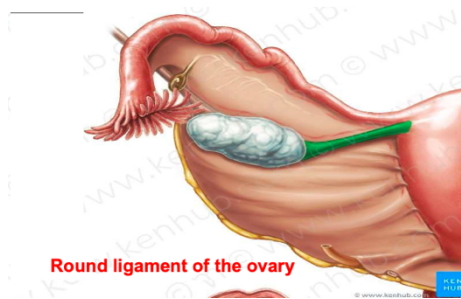
▪ **3.Suspensory ligament of the ovary :**

□ is a short peritoneal fold between the superior end of the ovary and side wall of the pelvis (it is a part of the broad ligament).

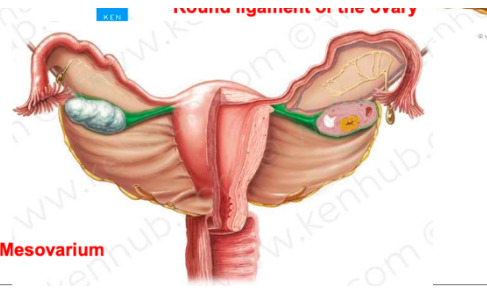
□ It conducts vessel ,nerves and lymphatics to and from the ovary



Suspensory ligament of ovary



Round ligament of the ovary



Mesovarium

○ **Arterial Blood Supply:**

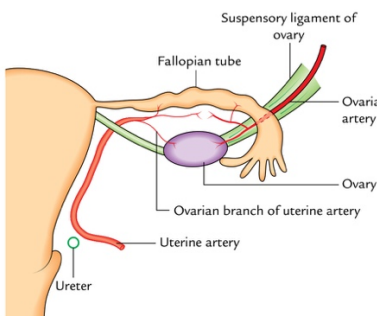
▪ By the ovarian artery .

▪ The ovarian artery arises from the abdominal part of the aorta at the level L2.

▪ The artery passes through the suspensory ligament of the ovary, then through the mesovarium to enter the hilum of the ovary at its attached border.

▪ Distribution :

□ it supplies the ovary, lateral part of uterine tube and anastomoses with the uterine artery within the broad ligament.



○ **Venous Drainage:**

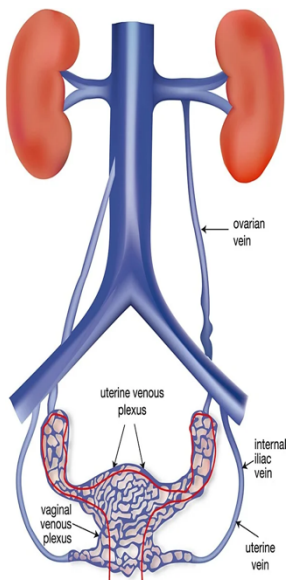
▪ The veins emerge at the hilum of the ovary as a pampiniform plexus which gives rise to the ovarian vein.

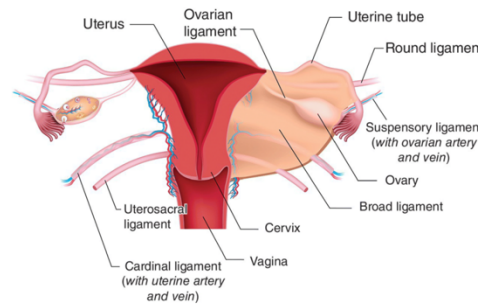
▪ The right ovarian vein → I.V.C.

▪ The left → left renal vein.

○ **Lymphatic Drainage :** to lateral aortic lymph nodes,

○ **Nerve Supply :** by autonomic nerves along the ovarian artery. They are derived from coeliac and aortic nerve plexuses. They are sensory and vasomotor.





○ Uterine Tubes

○ Features

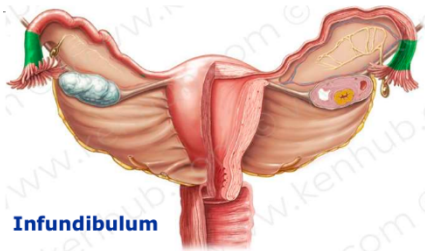
- Location:
 - It lies in the medial 4/5 of the upper free border of the broad ligament.
- Length:
 - is about 10 cm.
- Communications:
 - **Laterally**, the tube pierces the upper layer of the broad ligament to open into the peritoneal cavity near the ovary (it is the abdominal ostium).
 - **Medially**, it opens into the superior angle of the uterine cavity

○ Parts of the Tube:

- From lateral to medial, it has four parts;

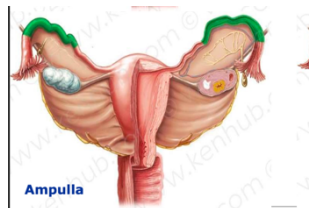
□ 1. Infundibulum :

- It is the funnel-shaped lateral part of the tube which is closely related to the ovary.
- It is about 2 cm long.
- Its bottom presents the abdominal ostium which is 3 mm in diameter.
- Its margins have 20-30 irregular processes called fimbriae which spread over the surface of the ovary.
- During ovulation, the fimbriae trap the oocyte into the uterine tube.



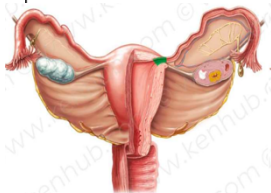
□ 2. Ampulla :

- It is the **widest** (4 mm in diameter) and longest part of the tube (about 5 cm long).
- It is thin-walled and tortuous.
- It is the site of fertilization.



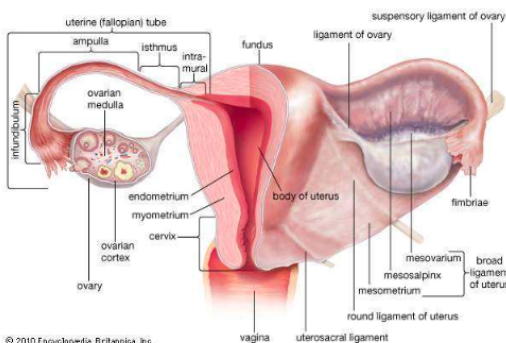
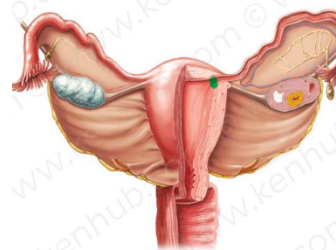
□ 3. Isthmus:

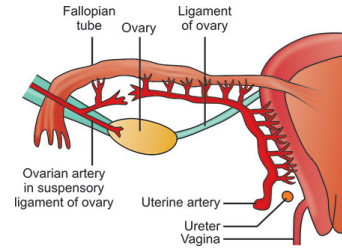
- It is **narrow** (2 mm) , short (2 cm) and thick-walled.



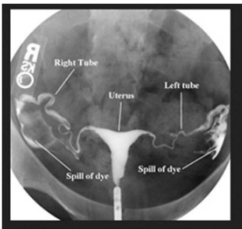
□ 4. Uterine (intramural) part :

- It is the **short** segment (1 cm) that passes through the wall of the uterus.
- It is the **narrowest** part of the whole tube (1 mm in diameter).
- It opens in the uterine cavity through the uterine ostium



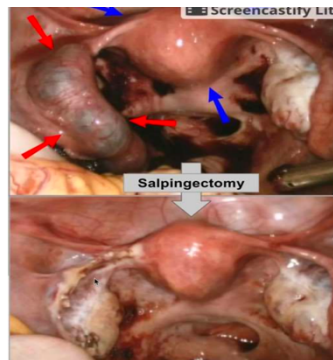


- **Blood Supply :**
 - Medial 2/3 by uterine vessels.
 - Lateral 1/3 by ovarian vessels
- **Nerve Supply :**
 - Medial 2/3 by uterine nerve plexus.
 - Lateral 1/3 by ovarian nerve plexus
 - Sympathetic and parasympathetic nerves from the inferior hypogastric plexuses.
- **Functions of the Tube :**
 - 1. They carry the oocyte from the ovaries and sperms from the uterus to the ampulla which is the site of fertilization.
 - 2. The uterine tube conveys the dividing zygote to the uterine cavity.
- **Applied Anatomy :**
 - 1. Blockage of the tubes (due to infection) is the main cause of sterility in women.
 - 2. The tube is the most common site for ectopic pregnancy. It usually ruptures with hemorrhage into the abdominal cavity.
 - 3. The abdominal ostium of the uterine tube communicates the female genital tract directly with the peritoneal cavity. Infections in the uterus and tubes may result in peritonitis.
 - 4. Ligation of the uterine tubes is one method of birth control.



Hysterosalpingography

Tubal Ectopic pregnancy

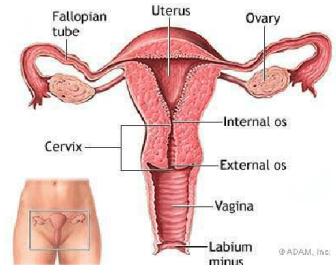
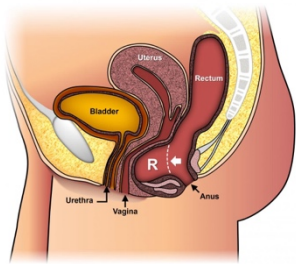


○ UTERUS

- The uterus is a hollow thick-walled, pear-shaped muscular organ situated in the lesser pelvis between the urinary bladder and rectum. It is piriform in shape.

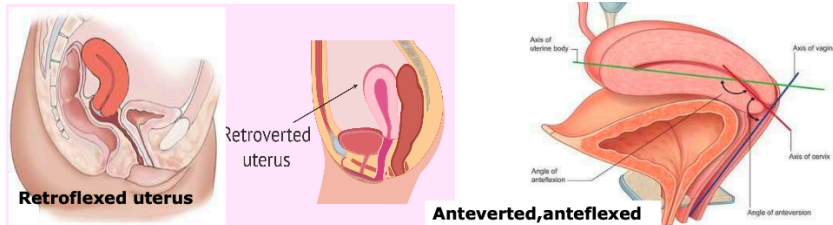
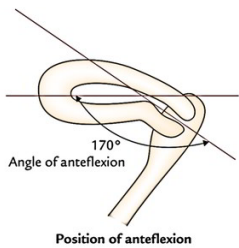
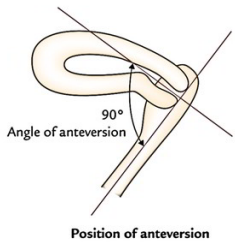
Communications :

- **Superolateral angles** : the uterus receives the uterine tubes.
- **Inferiorly** : it opens into the vagina at external os.



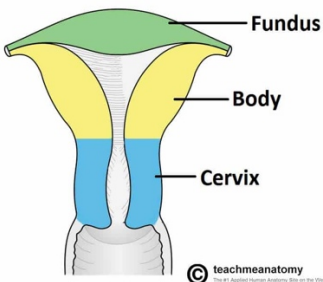
○ Normal Position of the Uterus :

- Normally, the uterus is anteverted, anteflexed.
 - Angle of **anteversion** : it is the angle between long axis of the cervix and long axis of the **vagina**. It is about 90°
 - Angle of **anteflexion** : it is the angle between long axis of the body of the uterus and long axis of the **cervix**. It is about 170°



○ Description of the Uterus :

- The external surface of the uterus presents a transverse constriction called the **isthmus** which divides the uterus into a large upper part called the body and a smaller lower part called the cervix
- **A. Body of the Uterus :**
 - It forms upper 2/3 of uterus. It is two inches long,
 - It has a fundus, two surfaces (anterior and posterior) and two lateral borders :

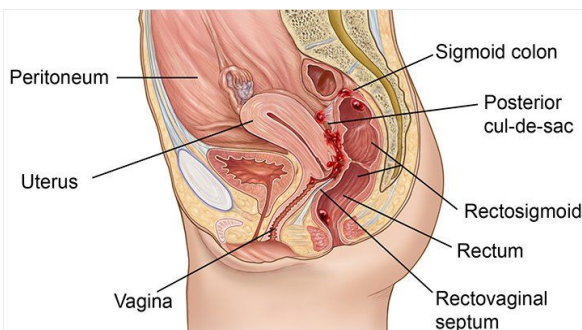


○ 1- Fundus:

- It is that part of the body above the entry of the uterine tubes.
- It is completely covered by peritoneum.
- It is related to coils of small intestine and sigmoid colon

○ 2- Anterior (vesical) Surface :

- Is covered by peritoneum down to the level of internal os * Is related to the urinary bladder, with uterovesical pouch in between.

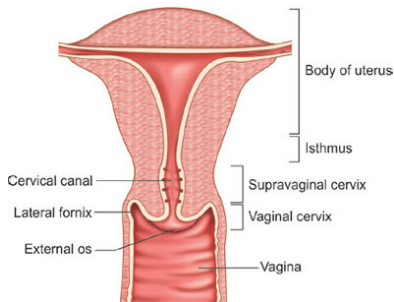


○ **3- Posterior (intestinal) Surface :**

- Is covered by the peritoneum which is continued down onto the cervix and posterior vaginal fornix.
- Is related to sigmoid colon and coils of small intestine.

○ **4- The lateral borders :**

- Each receives the uterine tube at its upper end.
- **Anteroinferior** to the uterotubal junction it is attached to **round ligament of uterus**
- **Posterosuperior** to the uterotubal junction, it is attached to the **round ligament of the ovary**.
- The uterine tube and the two ligaments are all running in the broad ligament which stretches from the lateral border to the lateral pelvic wall.

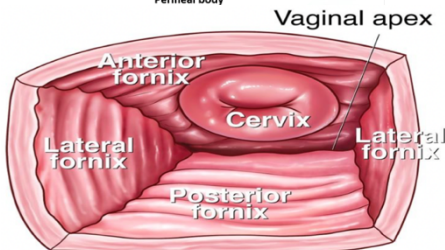
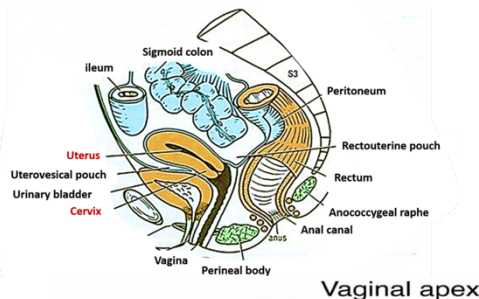
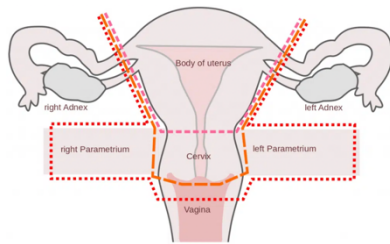


▪ **B- Cervix of the Uterus :**

- It forms the lower 1/3 of the uterus. It is one inch long.
- Cervix protrudes into the upper part of the vagina, thus the cervix has supravaginal and vaginal parts :

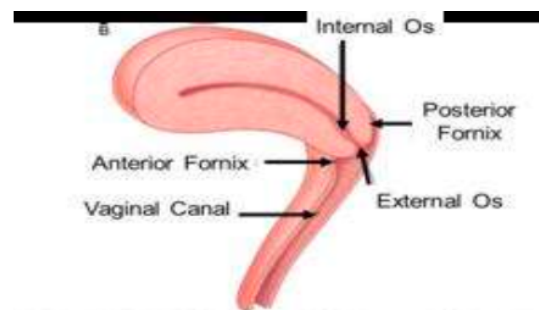
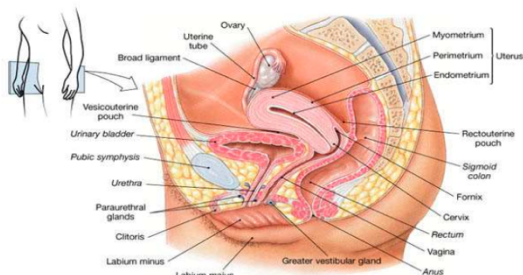
○ **1- The Supravaginal part of the cervix :**

- **Anteriorly :**
 - it is not covered by peritoneum.
 - It is related to urinary bladder with a cellular connective tissue in between called parametrium.
- **On each side :**
 - it is related to parametrium, in which the uterine artery crosses the ureter 2 cm from the supravaginal cervix.
- **Posteriorly :**
 - is covered by peritoneum and related to the rectum with Douglas pouch in between.



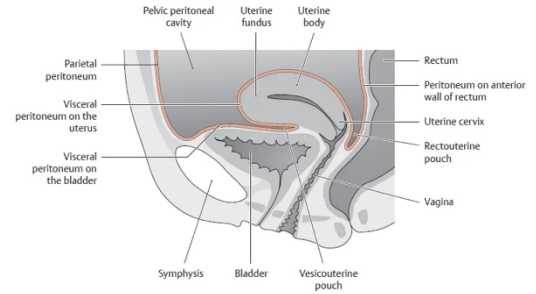
○ **2- Vaginal part of the cervix :**

- It projects into upper part of the vagina, dividing that part of vagina into four vaginal fornices
- The posterior vaginal fornix is the **deepest** and the only one **covered by peritoneum**.



○ **Peritoneal Covering of the Uterus :**

- The posterior surface and fundus of body of uterus are covered by peritoneum
- The peritoneum descends to cover its anterior surface down to the level of internal os, where it is reflected on to the bladder.
- The supravaginal cervix is covered by peritoneum only posteriorly.
- The front and sides of The supravaginal cervix are **bare** of peritoneum and related to cellular connective tissue, the parametrium.



○ **Uterine Cavity :**

▪ **A.Cavity of the Body :**

- in coronal section is triangular, with its base between the openings of the uterine tubes and its apex is the internal os leading to the cervical canal .

▪ **B. The cervical canal:**

- Is fusiform, broad at its mid-level.
- It communicates with the cavity of the body at the **internal os** and with the vagina by the **external os**.

○ **Anatomical significance of the internal os :**

- It corresponds to the isthmus of the uterus.
- It is the site of junction between uterine cavity and cervical canal.
- It is the level of the angle of anteflexion.
- It is the level at which the peritoneum is reflected anteriorly on to the bladder

