# Male genital system part 1

## o Male External Genital Organs

- o 1. Scrotum
- o 2. Testis
- o 3. Epididymis
- o 4. Spermatic cord
- o 5. Penis

## • The scrotum

- o The scrotum is a cutaneous pouch
- Contents :
  - Testis
  - epididymis
  - lower part of the spermatic cord (of both sides).
- o Layers of scrotum
  - Skin :-
    - The skin of the scrotum is pigmented, rugose and is marked by a longitudinal median raphe.
  - Superficial fascia of the scrotum:-
    - The **fatty layer** is absent (to assist heat loss) and is replaced by the subcutaneous involuntary muscle fibers called dartos muscle.
      - The muscle aids heat regulation of testis and scrotum.
    - The **deep membranous** layer of the scrotum is called Colles' fascia.
      - It is continuous superiorly with Scarpa's fascia of the anterior abdominal wall

## • Dartos muscle

- Smooth muscle of the fat-free subcutaneous tissue of the scrotum (dartos fascia), which inserts into the skin, assisting testicular elevation as it produces contraction of the skin of the scrotum.
- It is supplied by sympathetic nerve fibres reaching it through the genital branch of the genitofemoral nerve

## o Cremaster muscle

Is formed by the lowermost fascicles of the internal oblique muscle arising from the inguinal ligament



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- The cremaster muscle reflexively draws the testis superiorly in the scrotum, particularly in response to cold.
- In a warm environment, the cremaster relaxes and the testis descends in the scrotum
- It is supplied by **genital branch** of the genitofemoral nerve

## **Cremasteric Reflex :**

- Contraction of the cremaster muscle is caused by lightly stroking the skin on the medial aspect of the superior part of the thigh leads to rapid elevation of the testis on the same side
- Afferent:
  - o Ilioinguinal nerve
- Efferent :
  - o Genital branch of the genitofemoral nerve

#### A comparison between layers of scrotum and that of anterior abdominal wall

Layers of the anterior abdominal wall	Layers of the scrotum
Skin	Skin
Superficial fascia Superficial fatty layer Deep membranous layer (Scarpa's fascia)	Superficial fascia Replaced by Dartos muscle Deep membranous layer (Fascia of Colles)
External oblique muscle	External spermatic fascia
Internal oblique muscle	Cremastric muscle and fascia
Transversus abdominis	No corresponding layer
Transversus fascia	Internal spermatic fascia
Extraperitoneal tissue	Loose connective tissue
Peritoneum	Tunica vaginalis around the testis









#### • Blood supply :-

- Cremastric branch of the inferior epigastric artery
- Superficial and deep external pudendal branches of femoral artery
- Scrotal branches of **internal pudendal artery**.

## • Nerve supply :-

- Anterior 1/3: Ilioinguinal nerve (L1 dermatome) + genital branch of genitofemoral N.
- Posterior 2/3: Scrotal branches of pudendal nerve and posterior cutaneous nerve of the thigh (S3 dermatome).

## • Lymphatic drainage :-

Superficial inguinal lymph nodes.



## • <u>Testis</u>

- o Testis is the male primary sex organ, suspended in the scrotum by the spermatic cord.
- o The testis develops at the upper part of posterior abdominal wall, then descends into scrotum
- *Testis has 2 poles,* (the upper and lower), *2 borders,* (anterior and posterior), and *2 surfaces,* (medial and lateral).
- The epididymis (which is a long coiled duct) forms a cap at the upper pole of the testis, descending down lateral to the posterior border towards its lower pole.

## • Coverings (tunics) of the testis : From outside inwards

- 1. Tunica vaginalis:
  - It is the lower part of the processus vaginalis of the peritoneum.
  - It is invaginated by the testis from behind
  - It has parietal and visceral layers with a cavity in between .
  - The tunica vaginalis covers the whole testis except its posterior border.
  - **Sinus of epididymis** is that part of the cavity of tunica vaginalis which extends between lateral side of testis and the epididymis .







## 2. Tunica albuginea:

- It is the tough white fibrous coat which covers the testis all around.
- 3. Tunica vasculosa:
  - It is formed of vascularized connective tissue, deep to the tunica albuginea and extends between the lobules of the testis

## o Structure of the testis

- The postero-superior part of tunica albuginea is thickened to form the *mediastinum testis.*
- Numerous septa pass from the mediastinum to the inner surface of the rest of tunica albuginea dividing the testis into 200-300 lobules.
- Each lobule contains 2-3 seminiferous tubules with *interstitial cells of Leydig* in between the tubules.
- Near the mediastinum testis, the seminiferous tubules join together to form 20- 30 straight tubules, which enter the mediastinum anastomosing with each other to form a network of tubules called "rete testis"
- The rete testis gives rise to 12-20 *efferent ductules* which emerge from the upper pole of the testis to form head of epididymis.



**Parietal layer of tunica** 

vaginalis







Visceral layer of tunica vaginalis

Tunica albuginea of testis

Setae

Convoluted seminiferous tubules Straight seminiferous tubules







Vas deferens Epididymis

Lateral view of right testis

Rete testis

**Efferent ductules** 

Epididymis

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Posterior view of right testis

# • The epididymis

- It is the highly coiled comma shaped tube which is attached to the postero-lateral aspect of the testis. It may act as a reservoir for sperms.
- Length:
  - In the comma shaped coiled form it is about 1.5 inches long.
  - When it is uncoiled, it measures about 6 meters in length.
- o It has 3 parts
  - Head:
    - forms a cap at upper pole of the testis, to which is connected by efferent ductules. These ductules form head of the epididymis
  - Body:
    - is the intermediate part and is made up of the single coiled tube
  - Tail:
    - is the lower end of the tube and it continues as vas deferens which ascends medial to the epididymis.

## $\circ$ $\;$ Arterial blood supply of the testis and epididymis $\;$

- By testicular artery, a branch of abdominal aorta at L2 vertebra.
- It descends on the posterior abdominal wall to reach the deep inguinal ring where it runs in the spermatic cord in the inguinal canal.
- It supplies epididymis and enters the testis
- It anastomoses with cremastric artery and artery of the vas .

## • Venous drainage

- Venous blood from testis and epididymis drain into the pampiniform plexus.
- It surrounds and accompanies the testicular artery up to the superficial inguinal ring.
- In the inguinal canal, it gives rise to a single testicular vein.
- The **right** vein ends in the inferior vena cava and the **left** one ends in left renal vein.

## $\circ$ Varicocele

- A varicocele is a condition in which the veins of the pampiniform plexus are elongated and dilated.
- It is a common disorder in adolescents and young adults
- It is more common occurring on the left side because :
  - 1-The right testicular vein joins the low-pressure inferior vena cava (by acute angle)
    - The left vein joins the left renal vein, in which the venous pressure is higher (by right angle)
  - 2- The Left side drained by left renal vein which receive left suprarenal vein contains adrenaline and noradrenaline which causing vasoconstriction of Left testicular vein







## Sereen Draghmeh



- 3- The left renal vein is compressed between aorta and superior mesenteric artery
- 4- Left testicular vein may be compressed by heavy left colon
- 5-The left testis is lower than right one with elongated left testicular vein

## • Lymphatic drainage :

Into lateral aortic lymph nodes.

## • Nerve supply of the testis

## Superior spermatic nerves :

- Composed of fibers from the renal and intermesenteric plexus follow the testicular artery to the testis.
- This association between the intestinal (intermesenteric) and testicular nerves may explain the "kick in the stomach" feeling accompanying testicular injury.

## **Middle spermatic nerves**

- arise from the **superior hypogastric plexus**, pass to the mid-ureter and travel alongside the vas deferens to join the **spermatic cord**.
- The ureteral proximity may explain pain radiation to the scrotum of an obstructing ureteral stone.

## Inferior spermatic nerves :

- Originate from **inferior hypogastric plexus**, and join the middle spermatic nerves at the prostate-vesical junction.
- Some afferent and efferent fibers decussate to the contralateral pelvic plexus

## • Thermoregulation of the testis

- The process of spermatogenesis needs a temperature 2-3°C below the body temperature. This is achieved through the following 3 mechanisms;
  - 1. Cutaneous mechanism;
    - The scrotal skin is very vascular and rich in sweat glands.
    - Fat is absent in its subcutaneous tissue, all aid heat loss.
  - 2 .Muscular mechanism:
    - o Includes 2 muscles, dartos and cremastric.
    - In cold cremastric muscle elevates the testis near the body, so preventing heat loss.
    - In warm weather, the opposite effects are obtained.
  - 3. Vascular mechanism:



• The pampiniform plexus aids heat loss by radiation, so helps to maintain low temperature around the testis.



# o The spermatic cord

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- It is a group of structures which meet at deep inguinal ring and traverse the inguinal canal down to posterior border of the testis.
- **Coverings**: The spermatic cord is invested by 3 coverings; *internal spermatic fascia, cremastric muscle and fascia, and external spermatic fascia*.
- Constituents of the spermatic cord (A, V, N, L)
  - 1. Testicuiar Artery (from aorta)
  - 2. Cremastric Artery (from inferior epigastric artery)
  - **3.** Artery of the vas (from the inferior vesical artery)
  - 4. Vas deferens
  - **5.** Pampiniform **v**enous plexus
  - 6. Vestige of processus vaginalis.
  - 7. Genital branch of genitofemoral Nerve,
  - 8. Sympathetic plexus around the testicular artery and artery of the vas
  - Lymphatics of testis and epididymis ascending to lateral aortic lymph nodes and Loose areolar tissue.





#### **o** Torsion of the Testis

- Torsion of the testis is a rotation of the testis around the spermatic cord . It is often associated with an excessively large tunica vaginalis.
- The patient complains from severe pain.
- It is an emergency case, the testicular artery may be occluded, followed by necrosis of the testis





## • Hydrocele

- It is an accumulation of fluid within the tunica vaginalis.
- Haematocele
  - It is an accumulation of blood within the tunica vaginalis.



