PHYSIOLOGY OF OVARIAN

CYCLE

GUYTON & HALL, CHAPTER 82

EBAA M ALZAYADNEH, PHD

ASSISTANT PROFESSOR, PHYSIOLOGY AND BIOCHEMISTRY DEPARTMENT/SCHOOL OF MEDICINE

THE UNIVERSITY OF JORDAN

OBJECTIVES

By the end of this lecture, you should be able to:

- 1. List the hormones of female reproduction and describe their physiological functions
- 2. Describe the changes that occur in the **ovaries** during the menstrual cycle
- 3. Describe the hormonal control of the development of ovarian follicles, mature oocytes and corpus luteum
- 4. Recognize the *pituitary-ovarian-axis* and the changes that occur in the ovaries leading to ovulation

PHYSIOLOGIC ANATOMY OF THE FEMALE SEXUAL ORGANS



Monthly Menstrual Cycle

Normal reproductive years of female \rightarrow Monthly rhythmical changes in the rates of secretion of female hormones & corresponding physical changes in the ovaries & other sexual organs.

Duration of the cycle averages 28 days (20-45 days).

2 results of the female sexual cycle:

- 1. Single ovum is released from the ovaries each month
- 2. Uterine endometrium is prepared for implantation of the fertilized ovum.

OOGENESIS

 A developing egg (oocyte) differentiates into a mature egg (ovum) through a series of steps called oogenesis.



Regulation of Ovarian Function

- 1. Gonadotropin-releasing hormone (GnRH)
- 2. The anterior pituitary sex hormones, follicle stimulating hormone (FSH) and luteinizing hormone (LH), stimulated by the GnRH.
- 3. The ovarian hormones, estrogen and progesterone, which are secreted by the ovaries in response to FSH and LH
- The ovarian changes during the sexual cycle depend completely on FSH & LH secreted by AP.
- Source Both FSH and LH stimulate their ovarian target cells by combining with highly specific receptors leading to an increase in the cells rates of secretion, growth & proliferation.



Ovarian Cycle



• "Follicular" phase of the ovarian cycle:

 In female child each ovum is surrounded by single granulosa cell sheath called *primordial follicle* which provides nourishment for the ovum & secrete oocyte *maturation-inhibiting factor* which keeps the ovum in its primordial state

 After puberty, AP secretes FSH and LH resulting in ovum to increase in size & growth of additional layers of granulosa cells of some follicles known as primary follicles



theca externa. 2.

layers.

Figure 82-5. Stages of follicular growth in the ovary, also showing formation of the corpus luteum.

During *the first few days* of the monthly female sexual cycle there is an increase secretion of FSH and LH

 FSH increase is slightly more & earlier than LH which causes the <u>acceleration of growth of</u> <u>many primary follicles</u> each month.





EFFECT OF ESTROGEN AND PROGESTRONE ON GONADOTROPINS



Figure 82-4. Approximate plasma concentrations of the gonadotropins and ovarian hormones during the normal female sexual cycle. FSH, follicle-stimulating hormone; LH, luteinizing hormone.



2-7. Synthesis of the principal female hormones. The chemical structures of the precursor hormones, including progesterone, are Figure 78-2.

Few days after proliferation & growth of the follicles, the granulosa cells secrete <u>follicular fluids</u> that contain high concentration of **estrogen**. This fluid accumulates to form <u>antrum</u> within the mass of the granulosa cells Zona pellucida Antral Preovulatory



The early growth of the primary follicle up to the antral stage is under <u>FSH</u> stimulation only. Then there is **accelerated growth** of the follicle to larger follicle called <u>vesicular follicle</u> (Graffian) caused by:

 estrogen secreted into the follicle caused the granulosa cells to increase FSH receptors which causes **positive feedback effect** both estrogen & FSH combine to promote LH receptors on the original granulosa cells in addition to FSH stimulation, allowing more rapid increase in follicular secretion
the increasing estrogen from the follicle plus increasing LH

from the AP causes proliferation of the follicular theca cells & increase their secretion



- The antral follicles begin to grow. The ovum enlarges & remains embedded at one pole of the granulosa cells of the follicle
- During all the reproductive years of adult life, between about 13 and 46 years of age, 400 to 500 of the primordial follicles develop enough to expel their ova—<u>one</u> each month.
 - The remaining follicles (5 to 11) undergo

atresia or involute





LH is necessary for final follicular growth and ovulation:

2 days before ovulation \rightarrow rate of LH secretion \uparrow to 6-16 fold & peaks about 16 hrs before ovulation.



Ovulation

- FSH also \uparrow 2 to 3 fold & acts synergistically with LH to cause swelling of the follicle before ovulation.

LH has specific effect on the granulosa cells & theca cells converting them to progesterone-secreting cells → rate of estrogen secretion ↓ about 1 day before ovulation while progesterone secretion begin to ↑







Figure 82-4. Approximate plasma concentrations of the gonadotropins and ovarian hormones during the normal female sexual cycle. FSH, follicle-stimulating hormone; LH, luteinizing hormone.

Initiation of ovulation

Large quantity of LH causes rapid secretion of progesterone from the follicle. Within a few hours <u>2 events occur which are</u> <u>necessary for ovulation:</u>

- the theca externa begins to secrete proteolytic enzyme and weakens the wall resulting in swelling of the follicle & degeneration of the stigma
- 2) rapid growth of new blood vessels into the follicle wall & prostaglandins are secreted into the follicular tissue.



OVULATION



Figure 82-6. The postulated mechanism of ovulation.

Ovulation

It occurs 14 days after the onset of

menstruation in 28 days cycle.

During ovulation, stigma

protrudes & fluids ooze from the

follicle & the stigma ruptures

allowing more viscous fluid outward

carrying with it the ovum

surrounded by mass of granulosa

cells called corona radiata





Figure 82-5. Stages of follicular growth in the ovary, also showing formation of the corpus luteum.

The granulosa cells with the theca cells are called corpus luteum.

Ovulation



Secretion of progesterone during the latter half of the cycle raises the body temperature about 0.5°F, with the temperature rise coming abruptly at the time of ovulation.

"Luteal" phase of the ovarian cycle

- After expulsion of the ovum from the follicle, the remaining granulosa & theca interna cells change to <u>lutein cells</u> & become filled with lipid inclusions giving them yellowish appearance.
- The granulosa cells in corpus luteum form large amount of progesterone & estrogen. The theca cells form mainly androgens which are converted by granulosa cells into female hormones.



Luteinizing function of LH:

1- Extrusion of the ovum from the follicle.

2- Change of granulosa and theca interna cells into **lutein cells**.

3- Secretion of progesterone & estrogen from the corpus luteum.

- <u>If pregnancy occurs</u>, the hCG from the placenta acts on the corpus luteum to prolong its life for 2 to 4 months of pregnancy

Involution of the corpus luteum and onset of the next ovarian cycle:

- 1- Estrogen & progesterone from corpus luteum (luteal phase) have strong negative feedback effect on AP to inhibit the secretion of FSH & LH.
- 2- The <u>Iutein cells</u> secrete small amounts of inhibin which inhibit secretion of FSH by AP. ↓ FSH & LH & loss of these hormones >> complete degeneration of corpus luteum (involution)
- 3- Around **26th days** of normal sexual cycle & after involution of corpus luteum, sudden cessation of estrogen, progesterone & inhibin removes the negative feedback inhibition of the AP & allowing ↑ secretion of FSH & LH again.

