UTERINE TUBE

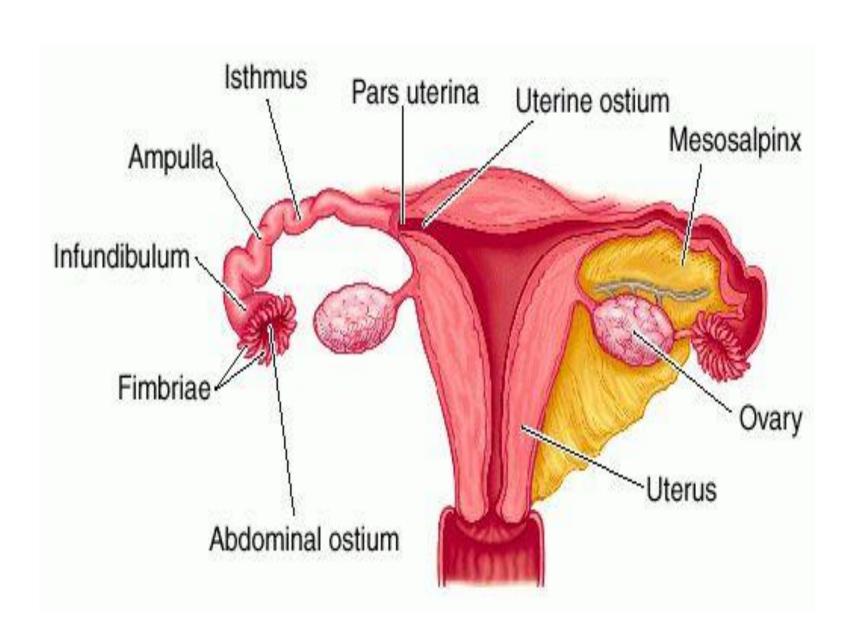
Other name:- fallopian tube, oviduct, salpinx

The uterine tubes are a pair of ducts transport the ovum released from the ovary to the uterus.

situation: These are situated in the free upper margin of the broad ligament of uterus.

At the lateral end, the uterine tube opens inter peritoneal cavity through its abdominal ostium this ostium is about 3mm in diameter.

uterine (fallopian) tube ampulla isthmus intramural ovarian infundibulum medulla endometrium myometrium cervixovarian cortex ovary



Lenth-10cm

Subdivision of uterine tube:-

Each uterine tube present with parts from medical to lateral side.

Intramural or interstitial or uterine

Isthmus

Ampulla

Infundibulum

- Intermural part:- the medial most part of uterine tube which is embed in the muscle wall of the uterus at the junction of the fundus and body of uterus.
- ➤ It is 1 cm long.
- ▶ Isthmus:- it is thick walled and has a narrow lumen so that it is cord like.
- > it is 3 cm long.
- > Ampulla:- it is thin wall and dilated part. fertilization of the ovum takes place in this part.
- **→** It is 5 cm long.

- ➤ Infundibulum:- the lateral end of the uterine tube is funnel shapped and is called the infundibulum
- \triangleright It is 1 cm long.
- > The wall of the infundiblum are prolonged into a number of irregular processes called the fimbre.
- ➤ One of the fimbre is large than the others and is in close contact with the ovary. It is called the ovarian fimbria.
- **➤ Blood supply:-**
- The uterine artery supplies approximately the medial two third and the ovarian artery supplies the lateral one third of the tube.
- The veins run parallel with arteries and drain into the pampiniform plexus of the ovary and into the uterine veins.

Nerve supply:-

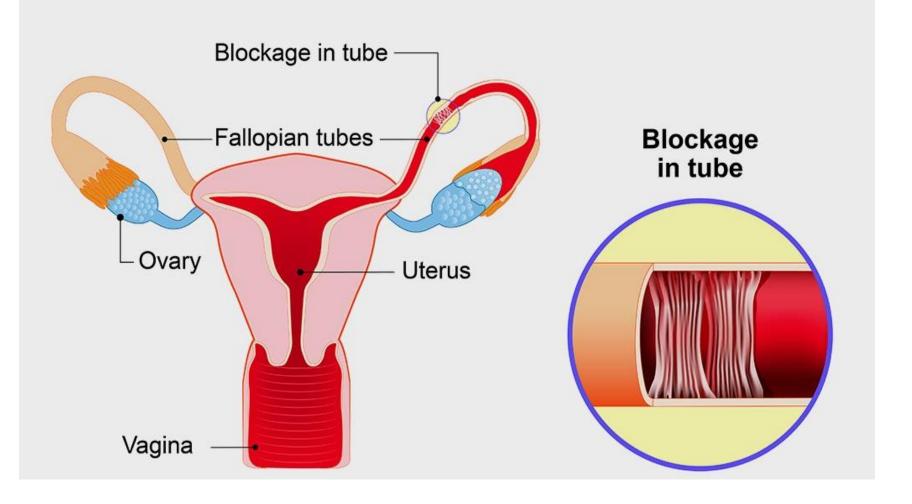
- > Both sympathetic and parasymphatic nerve
- ➤ Parasympathetic innervations for the lateral half is form vagus nerve and for medical half is from the pelvic splanenic nervs.
- >Sympathetic innervations is derived from the spinal segments T10 to L12

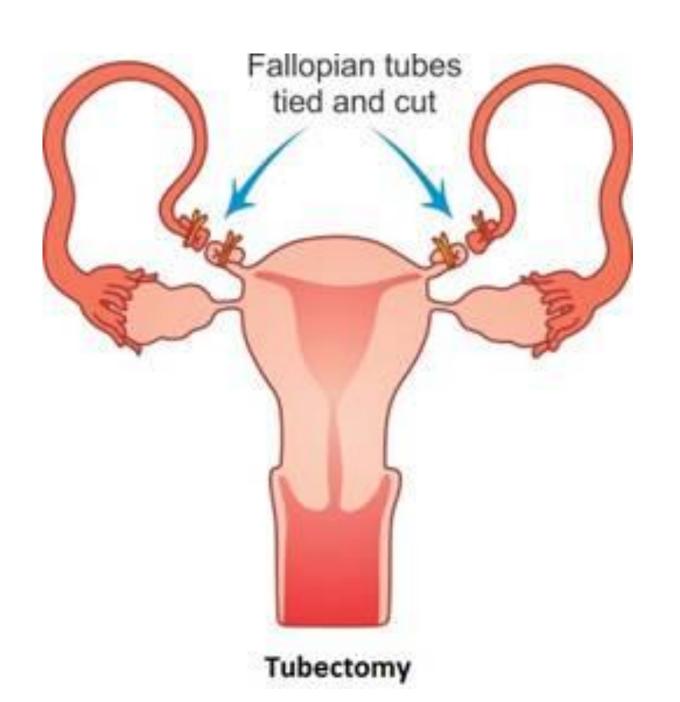
Clinical anatomy:

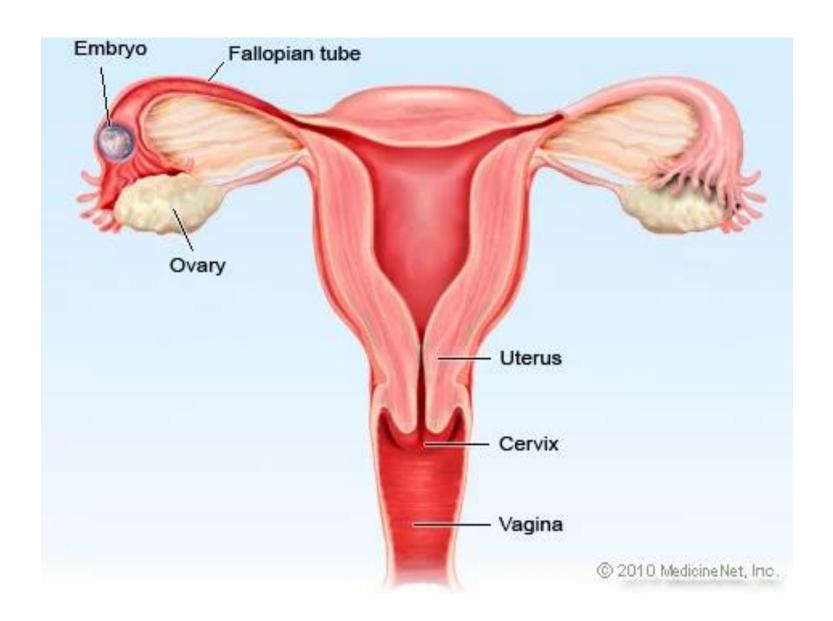
- > Salpingitis: inflammation of the uterine tube is called salpingits
- > Sterility: inability to have a child is called sterility the most common cause of sterility in the female is tubal blockage which may be congenital, or caused by infection.
- Tubal pregnancy: sometimes the fertilized ovum instead of reaching the uterus adheres to the walls of the uterine tube and starts developing there.
- This is known as tubal pregnancy. The enlarging embryo may lead to rupture of tube.

- Tubectomy: for purposes of family planning a women can be sterilized by removing a segment of the uterine tube on both sides.
- This can be done by laparoscopy or through an incision in abdominal wall.
- Transport of ovum: the transport of ovum is chiefly due to muscular contractions.

Fallopian tube obstruction







Thank you!