Male Genital Organs The Prostate, Vas Deferens, Seminal Vesicles & Ejaculatory Ducts Dr. Aiman Qais Afar Surgical Anatomist

College of Medicine / University of Mutah 2022-2023

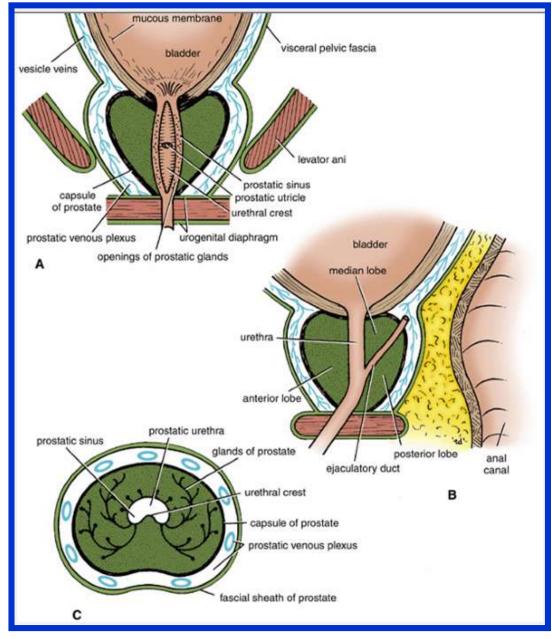
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Male Genital Organs

Prostate

- **❖**The prostate is a fibromuscular glandular organ that surrounds the prostatic urethra
- ❖The glandular part makes up approximately two thirds of the prostate; the other third is fibromuscular.
- ❖ It is about 1.25 in. (3 cm) long and lies between:

The neck of the bladder above and The Urogenital diaphragm below

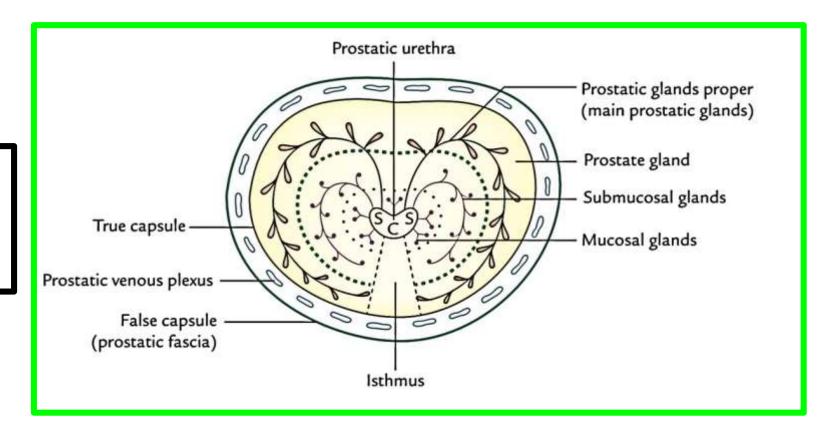


** The prostatic capsule:

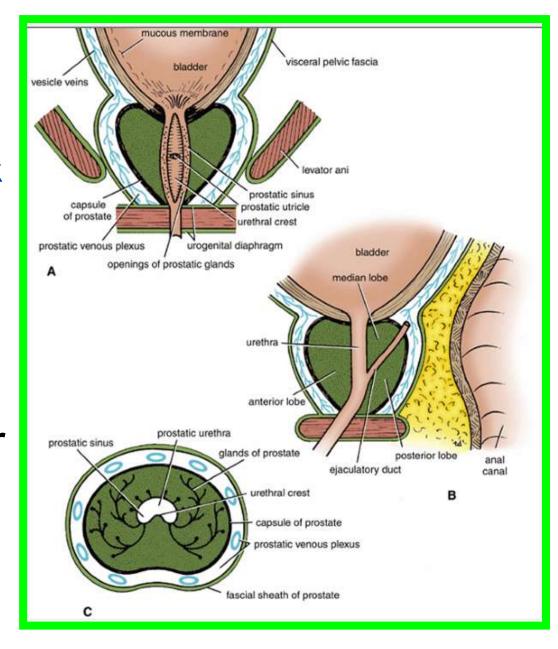
- 1- True capsule: thin fibrous sheath surrounds the gland.
- 2- False capsule: the visceral layer of pelvic fascia. (continuous anterolaterally with the puboprostatic ligaments, and dense posteriorly, continuous with the

rectovesical septum).

☐ The prostatic venous plexus lies between both capsules.



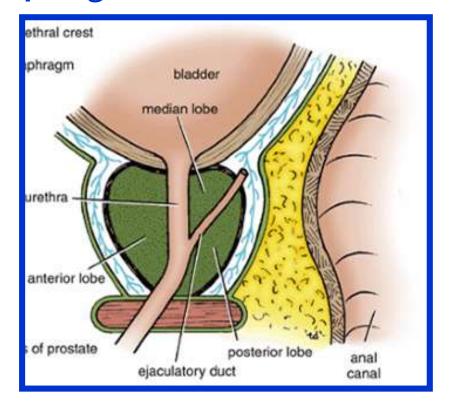
- The somewhat conical prostate has:
- **♦** A base, which lies against the bladder neck above
- **❖An apex,** which lies against the urogenital diaphragm below.
- The two ejaculatory ducts pierce the upper part of the posterior surface of the prostate to open into the prostatic urethra at the lateral margins of the prostatic utricle.

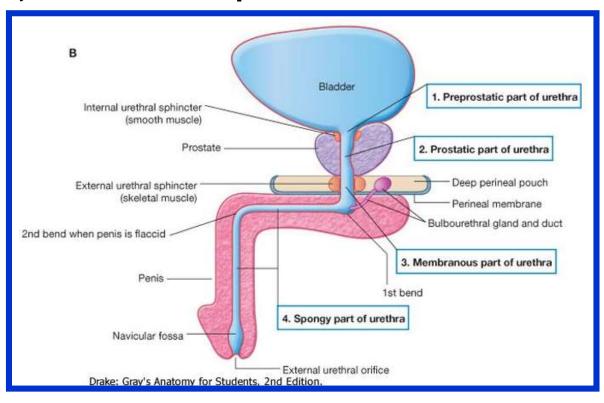


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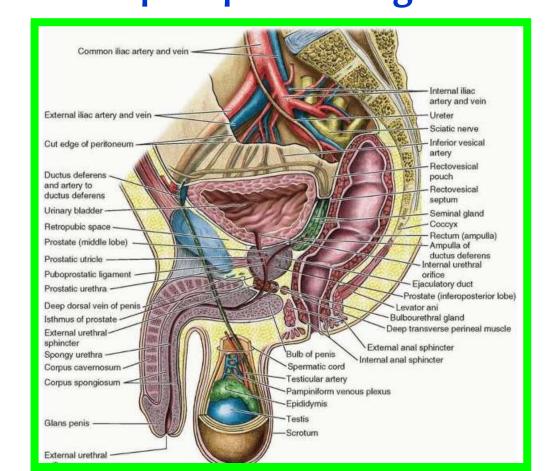
Relations

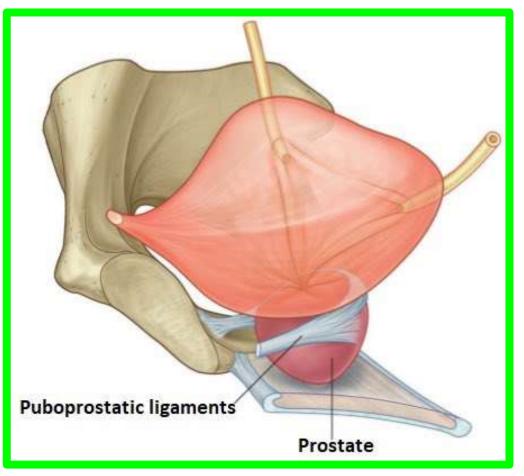
- * Superiorly: The base of the prostate is continuous with the neck of the bladder, the smooth muscle passing without interruption from one organ to the other.
- The urethra enters the center of the base of the prostate
- Inferiorly: The apex of the prostate lies on the upper surface of the urogenital diaphragm. The urethra leaves the prostate just above the apex on the anterior surface





- ❖ Anteriorly: The prostate is related to the symphysis pubis, separated from it by the extraperitoneal fat in the retropubic space (cave of Retzius).
- ❖ The prostate is connected to the posterior aspect of the pubic bones by the fascial puboprostatic ligaments

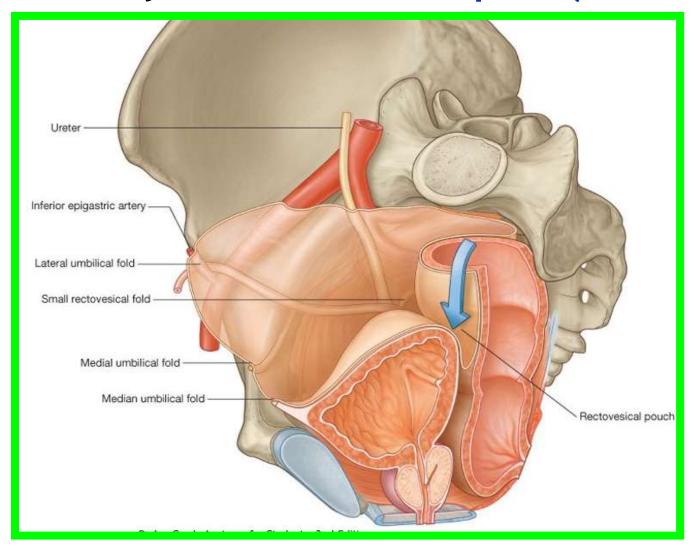




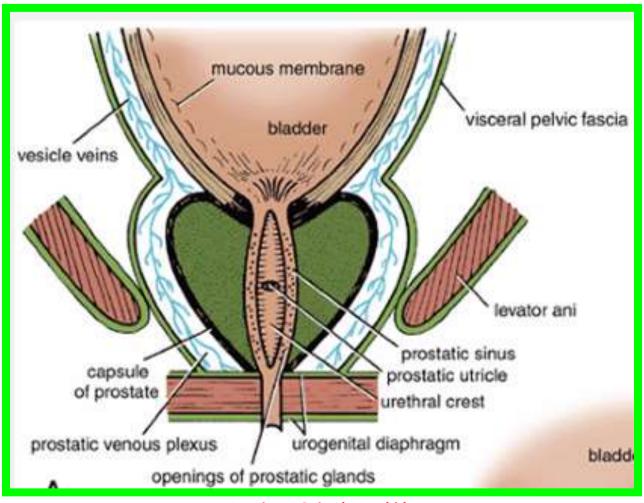
Posteriorly: The prostate is closely related to the anterior surface of the rectal ampulla and is separated from it by the Rectovesical septum (fascia

of Denonvilliers)

This septum is formed in fetal life by the fusion of the walls of the lower end of the Rectovesical pouch of peritoneum, which originally extended down to the perineal body



Laterally: The prostate is embraced by the anterior fibers of the levator ani as they run posteriorly from the pubis



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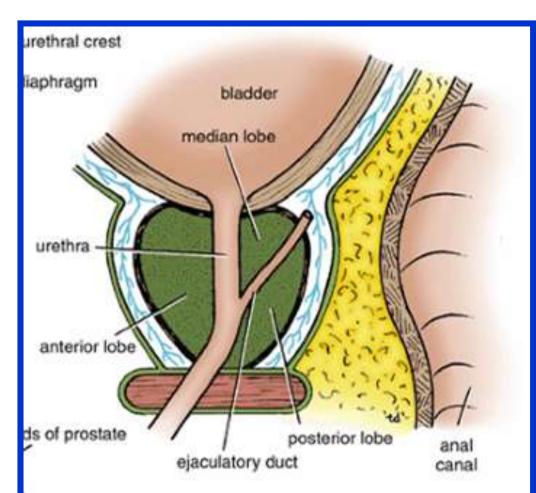
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** Structures of the Prostate:

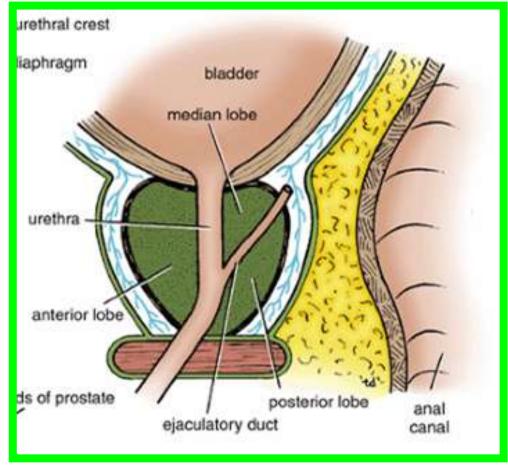
- 1- Glandular tissues are formed of glands. Their ducts open into the prostatic sinus.
- 2- Muscular tissue are arranged into 3 layers:

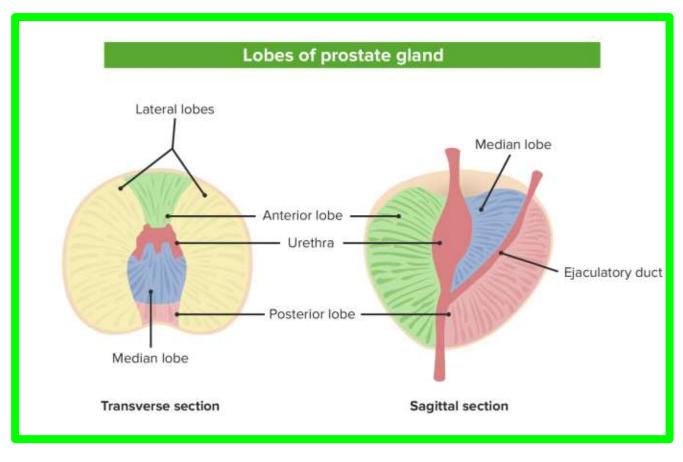
A. Peripheral, immediately beneath the fibrous capsule.

- B. Central, around the urethra
- C. Intermediate layer form meshes in which the glandular structure embedded.



- The prostate is incompletely divided into five lobes.
- **❖The anterior lobe** lies in front of the urethra and is devoid of glandular tissue..

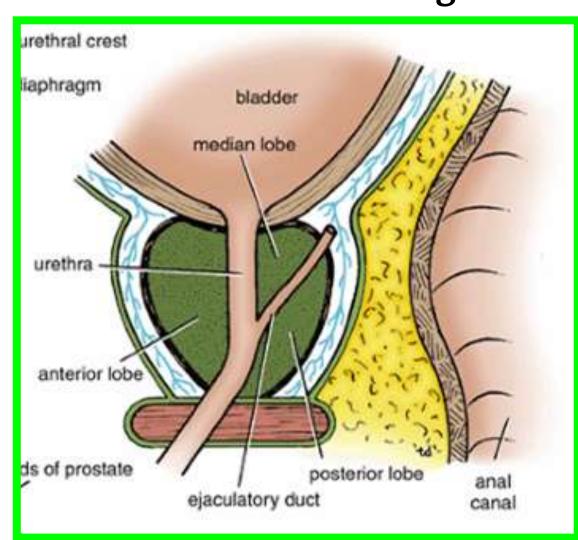




❖The median, or middle lobe is the wedge of gland situated between the urethra and the ejaculatory ducts. Its upper surface is related to the trigone

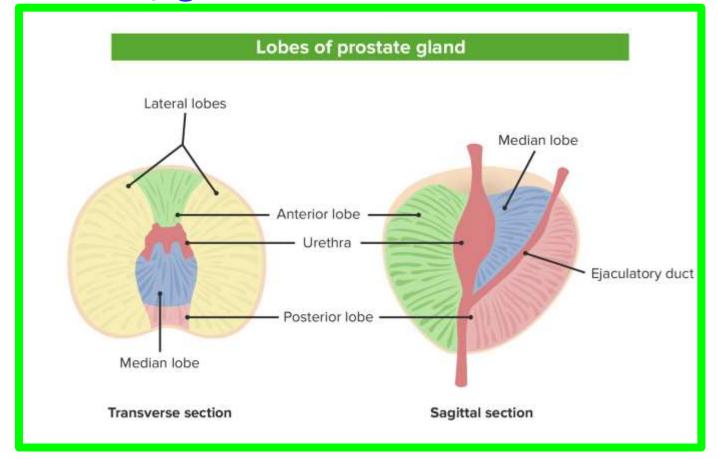
of the bladder; it is rich in glands.

❖ The posterior lobe is situated behind the urethra and below the ejaculatory ducts and also contains glandular tissue. (is readily palpable by digital rectal examination).





- The right and left lateral lobes lie on either side of the urethra and are separated from one another by a shallow vertical groove on the posterior surface of the prostate.
- The lateral lobes contain many glands.

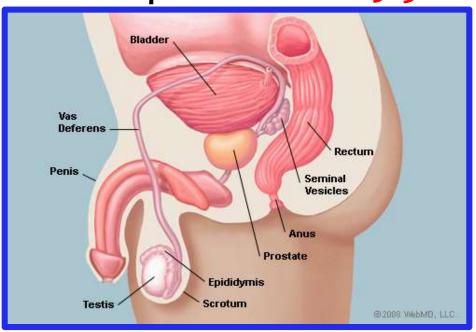


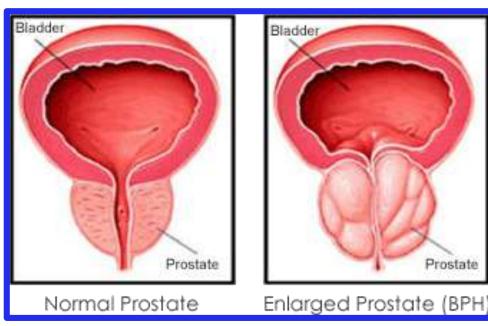
Male Genital Organs

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Function of the Prostate

- √ The prostate produces a thin, milky fluid containing citric acid and acid phosphatase
 that is added to the seminal fluid at the time of ejaculation.
- ✓ The smooth muscle, which surrounds the glands, squeezes the secretion into the prostatic urethra.
- ✓ The prostatic secretion is alkaline and helps neutralize the acidity in the vagina.
- ✓ Prostatic fluid provides about 15–30% of the volume of semen.

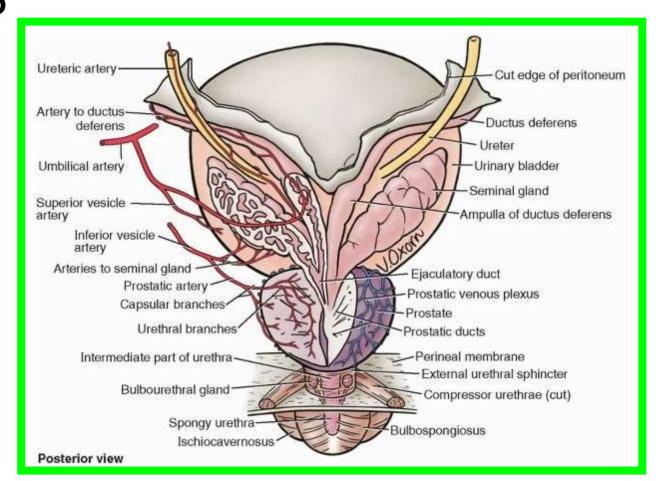




** Arterial supply

The prostatic arteries are mainly branches of the internal iliac artery especially:

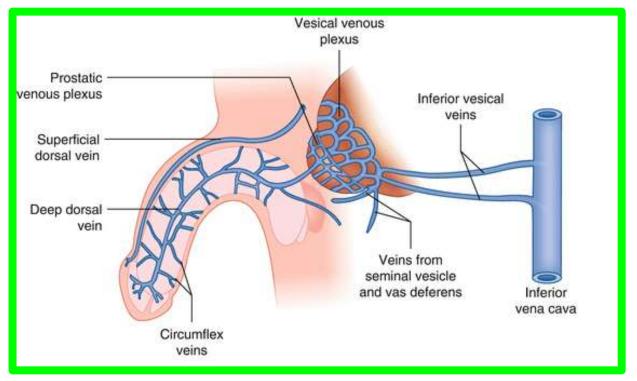
- the inferior vesical arteries and also
- the internal pudendal
- the middle rectal arteries.





** Venous drainage: The veins form the prostatic venous plexus, between the fibrous capsule of the prostate and the prostatic sheath

The prostatic plexus receives the deep dorsal vein of the penis and numerous vesical veins and drains into the internal iliac veins.



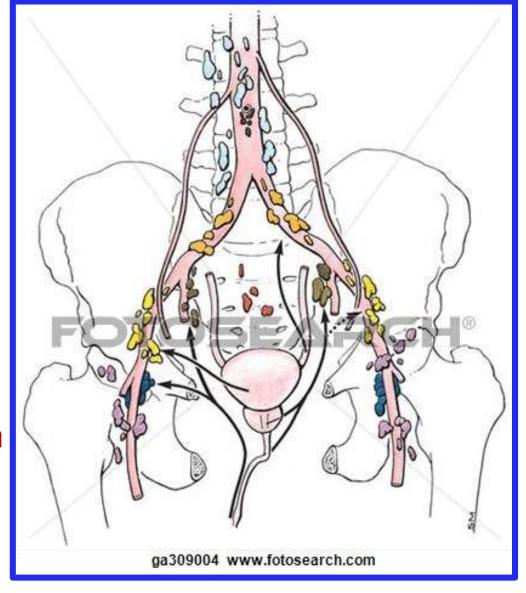
The plexus is continuous superiorly with the vesical venous plexus and communicates posteriorly with the internal vertebral venous plexus

Lymph Drainage

Drain chiefly into the internal iliac nodes, but some pass to the sacral lymph nodes

Nerve Supply Inferior hypogastric plexuses.

The sympathetic nerves stimulate the smooth muscle of the prostate during ejaculation

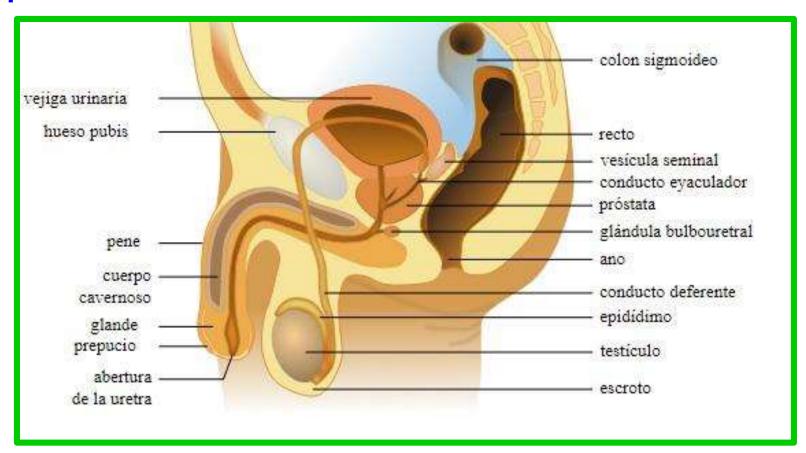


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BULBO-URETHRAL GLANDS

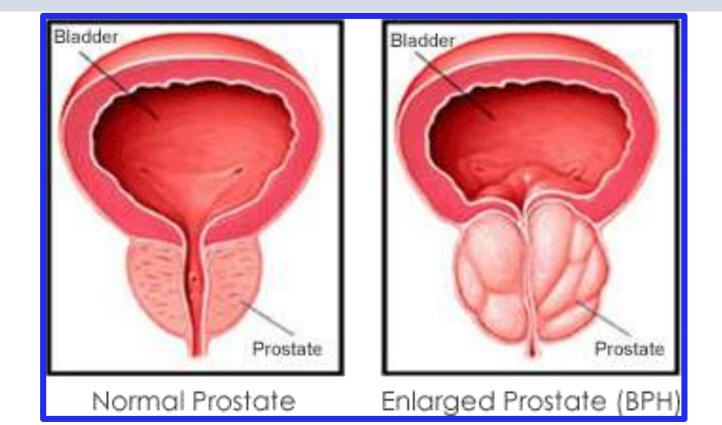
The two pea-size bulbo-urethral glands (Cowper glands) lie posterolateral to the intermediate part of the urethra, largely embedded within the external urethral sphincter. The ducts of the bulbo-urethral glands pass through the perineal membrane adjacent to the intermediate urethra and open through minute apertures into the proximal part of the spongy urethra in the bulb of the penis.

Their mucus-like secretion enters the urethra during sexual arousal, contributing less than 1% of semen.



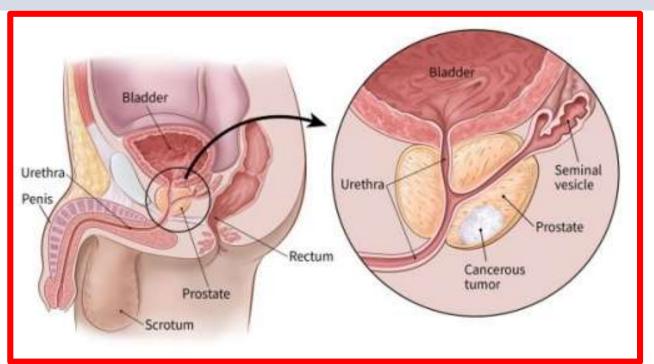
Prostatic Enlargement

The prostate is of medical interest because benign enlargement or benign hypertrophy of the prostate (BHP) is common after middle age. An enlarged prostate projects into the urinary bladder and impedes urination by distorting the prostatic urethra. The median lobe usually enlarges the most and obstructs the internal urethral orifice.



Prostatic Cancer

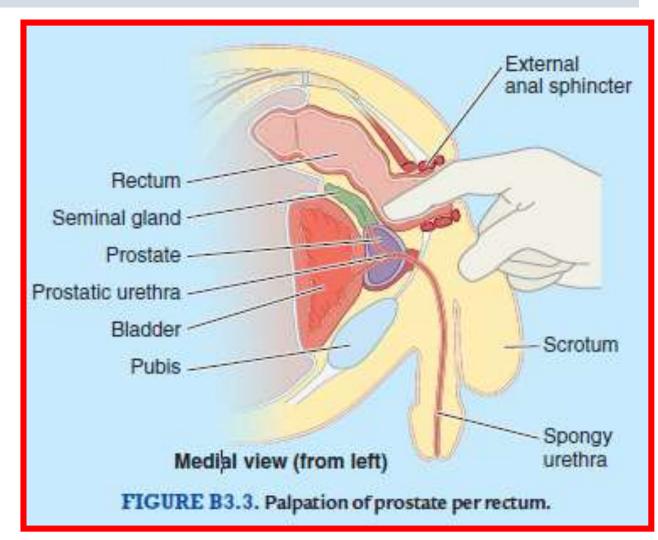
□Prostatic cancer is common in men older than 55 years of age. In most cases, the cancer develops in the posterolateral region. This may be palpated during a digital rectal examination. A malignant prostate feels hard and often irregular. In advanced stages, cancer cells metastasize (spread) to the iliac and sacral lymph nodes and later to distant nodes and bone. The prostatic plexus, closely associated with the prostatic sheath, gives passage to parasympathetic fibers, which give rise to the cavernous nerves that convey the fibers that cause penile erection



Prostatectomy

☐ A major concern regarding prostatectomy is that impotency may be a consequence.

□All or part of the prostate, or just the hypertrophied part, is removed (transurethral resection of the prostate [TURP].



Vas (Ductus) Deferens

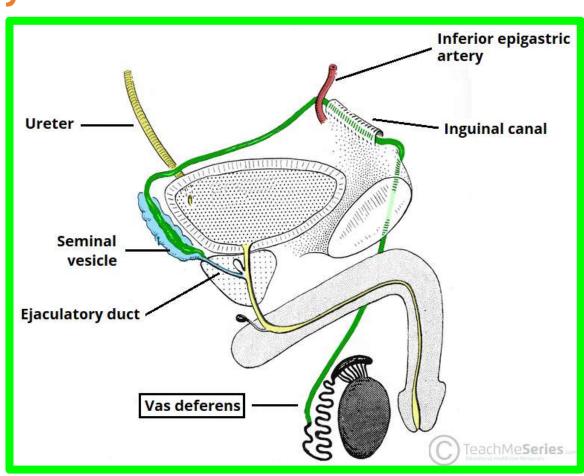
- ✓ It is a thick cord-like tube, about 45 cm long.
- ✓ It carries and stores the sperms.
- ✓ It begins from the tail of the epididymis.

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** Course and relations:

- 1- Scrotal part: ascends on the back of the testis and medial to the epididymis.
- 2- Inguinal part: runs in the inguinal canal through the spermatic cord.
- 3- Pelvic part: curves around the inferior epigastric artery.



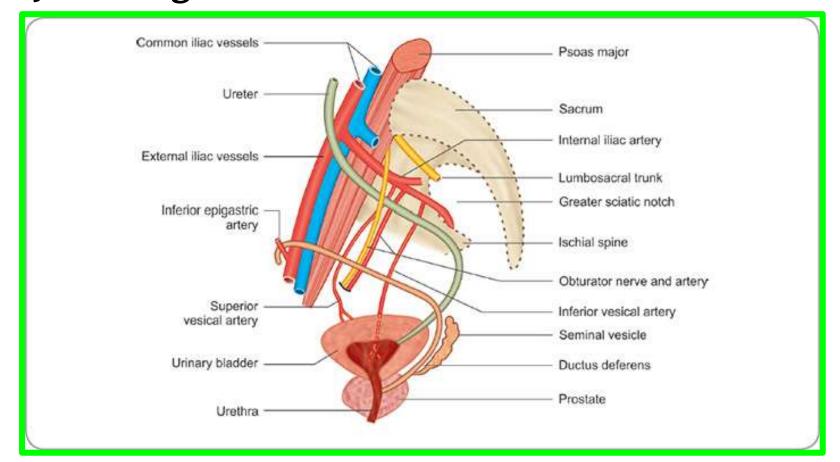
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Vas (Ductus) Deferens

- Then, it descends downwards and backwards on the following structures;
 - 1- External iliac vessels. 3- Obturator nerve.
 - 2- Superior vesical (obliterated umbilical) artery 4- Obturator vessels.

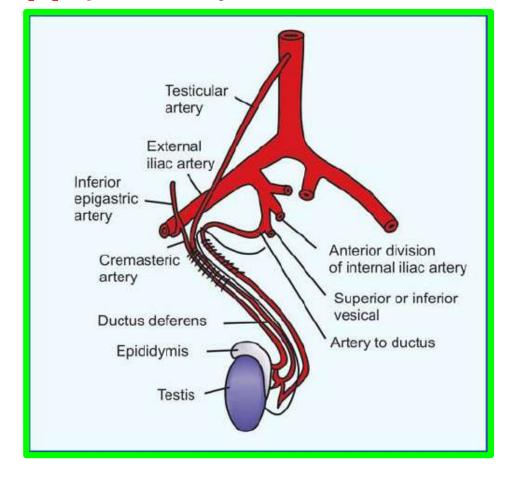
Then, It curves medially crossing above the ureter then behind the base of

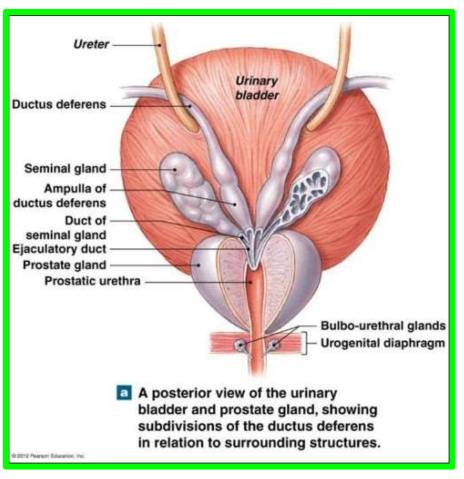
the urinary bladder.



Vas (Ductus) Deferens

- ** Termination: it ends by forming the ampulla which join the seminal vesicle to form the ejaculatory duct.
- ** Arterial supply: artery of the vas deferens.

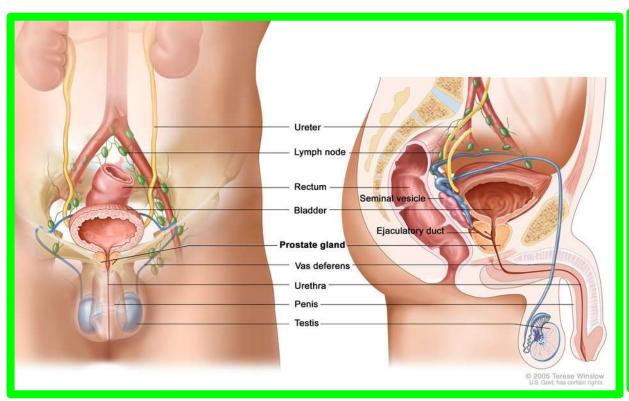


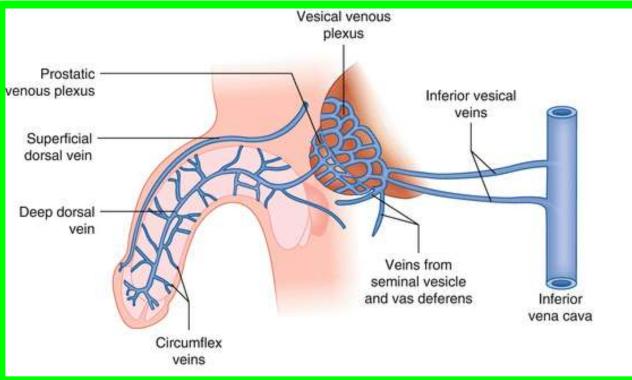


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Vas (Ductus) Deferens

- ** Venous drainage: vesical plexus of veins.
- ** Nerve supply: vesical plexus of nerves.
- ** Lymphatic drainage: into the external iliac lymph nodes.

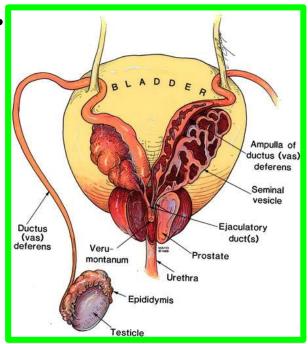


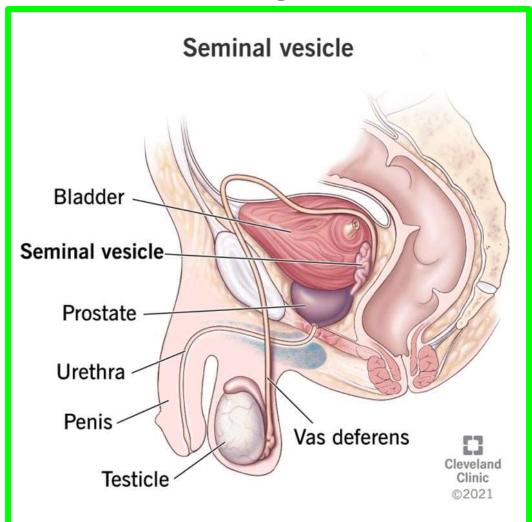


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Seminal Vesicles

- ❖ One on each side
- It is a sacculated and coiled pouch which is nearly 5 cm in length.
- ** Relations:
 - a- Anteriorly: base of the urinary bladder
 - b- Posteriorly: the rectum.
 - c- Medially: ampulla of the vas deferens.
 - d- Laterally: levator ani.



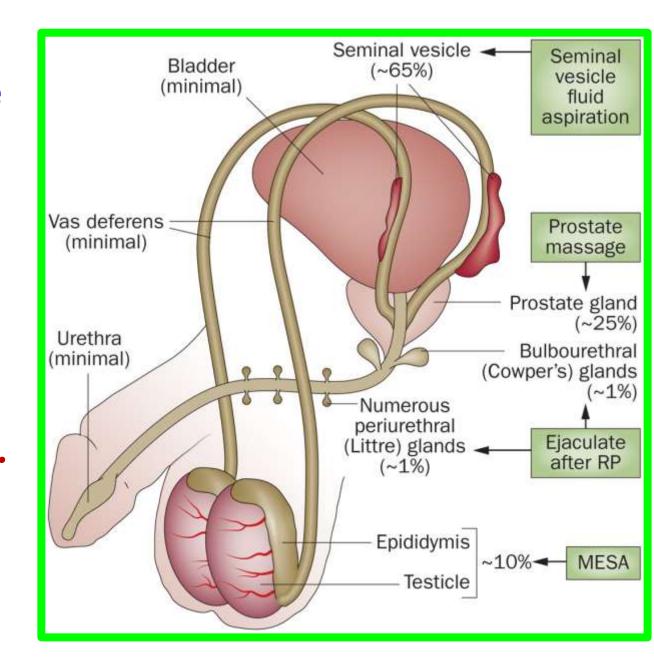


Seminal Vesicles

** Ends: It unites with ampullae of the vas deferens to form ejaculatory duct.

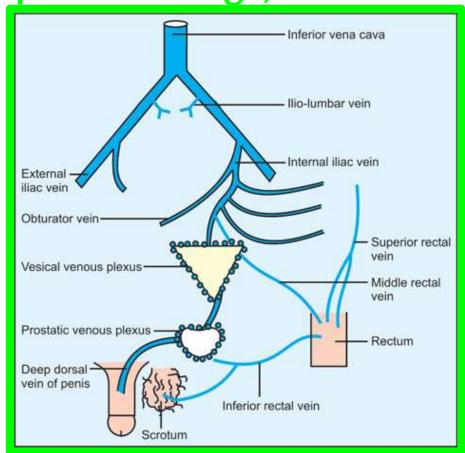
** Function: the seminal vesicles are glands which contract during ejaculation.

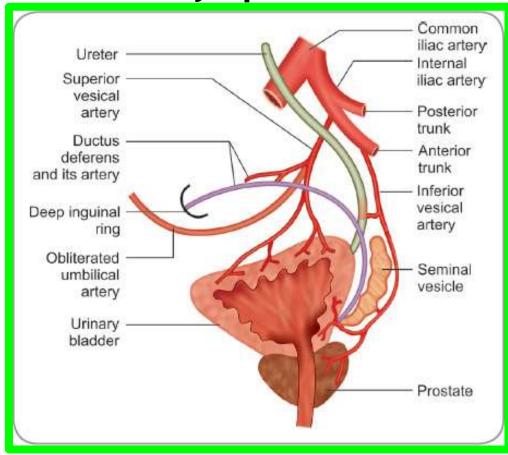
Their secretions constitute the greater amount of the seminal fluid.



Seminal Vesicles

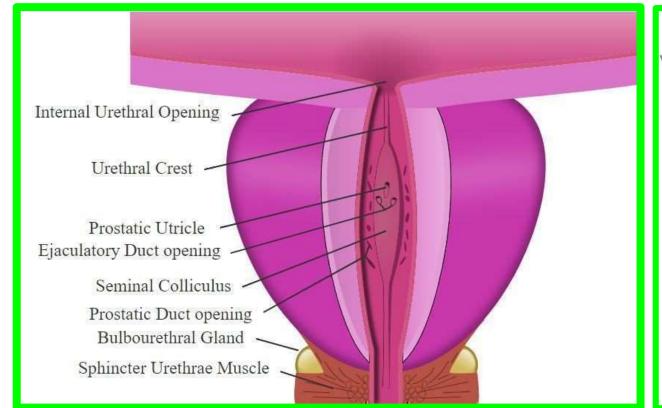
- ** Arterial supply: from the inferior vesical artery.
- ** Venous drainage: into the vesical venous plexuses.
- ** Nerve supply: the vesical plexus of nerves.
- ** Lymphatic drainage; into the internal and external iliac lymph nodes.

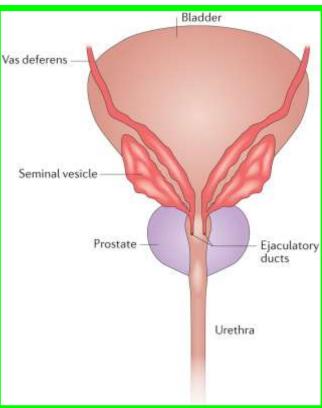




Ejaculatory Ducts

- ** Formation; it is formed by the union of the ampulla of the vas deferens with the seminal vesicle behind the neck of the urinary bladder.
- ❖ It is a very narrow duct, 2 cm long which immediately passes through the base of the prostate gland.
- It opens into the seminal colliculus of the prostatic urethra.





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