

Urogenital Module Dr. Gamal Taha Abdelhady Assistant Professor of Anatomy & Embryology







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

- Know the anatomy of the kidneys
- Get a hint knowing the nephron
- Identify the blood flow (supply) of the kidney
- Recognize the anatomy of the ureters, the urinary bladder, and the urethra
- Enumerate the functions of the urinary system







Urinary System

- Kidneys produce urine
- Ureters –transport urine to bladder
- Urinary bladder stores urine
- Urethra transports urine to exterior





The kidneys are bean like retroperitoneal structures. The 2 kidneys lies on each side of the vertebral column. Each is at the size of a tightly clenched fist.

The kidneys occupies the epigastric , hypochondrial, lumbar & umbilical regions, with the left kidney slightly nearer to the midline





 Vertically they extends from upper border of twelfth thoracic vertebra towards the center of the body of third lumbar vertebra inferiorly.

The right kidney is slightly lower than the left, & the left kidney is little nearer to the median plane than the right.





Receive 20-25% of the resting cardiac output

Consume 20-25% of the O2 used by the body at rest

 (In fetus the kidney is lobulated & is made up of about 12 lobules. After birth the lobules fuse , so that in adults the kidney is uniformly smooth)

Location and External Anatomy of Kidneys

- Lateral to T₁₂-L₃ vertebrae
- Average kidney
 - 12 cm tall, 6 cm wide, 3 cm thick

Hilus

- On concave surface
- Vessels and nerves enter and exit
- Renal capsule surrounds the kidney



Location and External Anatomy of Kidneys

- The right kidney is slightly lower than the left due to the presence of the liver
- Attached to ureters, renal blood vessels, and nerves at renal hilus
- On top each kidney is an adrenal gland





- 1. Each kidney is bean shaped.
- 2. It has upper & lower poles, medial and lateral borders, and anterior and posterior surfaces.
- 3. The upper pole is broad & is in close contact with the corresponding suprarenal glands.
- 4. The lower pole is pointed.

Anatomy of the Urinary System



The kidneys are located in the abdominal cavity, with the right kidney just below the liver and the left kidney below the spleen. A ureter extends from each kidney to the urinary bladder within the pelvic cavity. An adrenal gland is located at the superior pole of each kidney.



Covering of the Kidney

Renal fascia (Outer most)

Anchors the kidneys to nearby structures. It is dense connective tissue, has anterior and posterior layers. Superiorly the two layers enclose the supra renal gland & then merge with diaphragmatic fascia, that is why the kidneys move with respiration

Covering of the Kidney

Adipose capsule/Perirenal Fat (Middle layer -Sides and Back)

Mass of fat tissue that surrounds renal capsule

Functions

- Keeps kidney in place
- Provide cushion effects

Renal capsule (Inner most - whole through)

Layer of soft transparent sheet of dense fibrous connective tissue that surrounds kidney and supports the soft internal tissues giving it its shape. Figure 26.1c An Introduction to the Urinary System



Surface Anatomy – Morris Parallelogram



Surface Anatomy – Morris Parallelogram

- The four points are joined to delineate a parallelogram and the outline of kidney is drawn on each side
- The medial border of the kidney is represented by a line joining *three points*, <u>first</u> point <u>2.5</u> cm away from midline (at <u>111</u> on left and <u>112</u> on right), <u>second</u> point (at <u>11</u>) <u>5</u> cm away and <u>third</u> (at <u>13</u>) <u>7.5</u> cm away from the midline.
- Joining the first and third points at 4.5 cm from the medial border (width of kidney) marks the convex lateral border.





It is an angle between the lower margin of twelfth rib and lateral margin of erector spinae muscle. At this angle, the kidney lies close to the body surface.

Clinical Relevance of Renal Angle

- Renal pain is felt at renal angle as a dull ache.
- Perinephric abscess causes swelling and tenderness at renal angle.



Relations of the Kidneys

Anteriorly the **right kidney** is related to the **Liver**, **duodenum** and **hepatic flexure** of ascending colon

Anteriorly the **left kidney** is related to **Stomach**, **Jejunum**, **Pancreas**, **Spleen** and **descending Colon**

Adrenal gland is **superior** and **anterior** to the Kidneys



Right Kidney is related to the <u>12th</u> rib posteriorly resting on <u>diaphragm</u>

The *left kidney* rises to as high as the <u>**11th thoracic rib**</u> posteriorly, <u>extending from T11-L3</u>, resting on diaphragm

Both kidneys are related **posteriorly** to **psoas major**, **quadratus lumborum**, **and transversus abdominis** in addition to **subcostal**, **ilioinguinal and iliohypogastric nerves**

Inferiorly, both kidneys are related to coils of small intestine

Anterior Relations







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- On a sagittal section you can see that the kidneys is divided into outer cortex and inner medulla which surrounds the renal sinus.
- Hilum: it is the concave medial border or deep fissure of the kidney where the renal blood & lymph vessels , ureter & nerve enters
- The <u>sinus</u> is a cavity within the hilum. It contains blood vessels, urine collecting chambers and fat.







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Kidney Structures

Medullary pyramids

 Triangular regions of tissue in the medulla, bases of the renal pyramids are directed outward, toward the cortex, while the apex of each renal pyramid projects inward, toward the renal sinus.

Renal columns

 Extensions of cortex-like material inward between the pyramids

Calyces

Cup-shaped structures that funnel urine towards the renal pelvis






- The kidney contains *minor calyces* (8-20 in number) and in turn several minor calyces collect to form *major calyces* (2-3 in number)
- The major calyces converge to form the renal pelvis which is surrounded by the <u>renal sinus</u>.
- The renal pelvis narrows into a small diameter tube that is the ureters which exit the kidney through the hilum and ends into the urinary bladder



Renal Lobe

Consists of:

- One renal pyramid
- Overlying area of renal cortex
- Adjacent tissues of renal columns







The structural & functional units of the kidneys

- Responsible for formation of urine
- Main structures of the nephrons
 - Glomerulus
 - Renal tubule

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A specialized capillary bed

- Attached to arterioles on both sides (maintains high pressure)
 - Large afferent arteriole
 - Narrow efferent arteriole





The glomerulus sits within a glomerular capsule (the first part of the renal tubule)



Renal Tubule

Glomerular (Bowman's) capsule

- Proximal convoluted tubule
- Loop of Henle
- Distal convoluted tubule





85% of nephron lie in the cortex and are called cortical nephrons while 15% lie at the border between cortex and medulla and are called therefore juxtamedullary nephron.

These <u>JM</u> nephrons plays an essential role in the regulation of blood pressure

Blood Flow through the Kidney





The renal arteries supply the kidneys.

They arise from the abdominal aorta opposite L2, <u>enters the hilum of the kidney between the vein anteriorly</u> and the ureter posteriorly.

The Blood Supply of the Kidney

Renal arteries branches to give rise to afferent arterioles which break into renal glomerulus then efferent arterioles.

Efferent arterioles gives rise to peritubular capillaries that surrounds proximal and distal tubules. The part that surrounds loop of Henle is called Vasa recta.

Blood Flow – Arteries & Veins

- Renal arteries
- Segmental arteries
- Lobar arteries
- Interlobar arteries
- Arcuate arteries
- Interlobular arteries
- Afferent arterioles

- From nephron
- Interlobular veins
- Arcuate veins
- Interlobar veins
- Renal vein

Blood Flow in the Kidneys



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- Venous Drainage: Renal veins (most anterior in the hilum), ends in inferior vena cava. The left renal vein is longer than the right and receives Lt. suprarenal and gonadal veins.
- Nerve Supply: Sympathetic fibers derived from T10,L1 segments and parasympathetic fibers from vagus nerve.
- Lymphatic drainage: into lateral aortic nodes.









Arterial supply

Venous drainage

Ureters and Urinary Bladder

- The ureters are small tubes that carry urine from the kidneys (*most posteriorly located in renal hilum*) to the urinary bladder. They enter the bladder through the *posterior wall*.
- The urinary bladder is a hollow muscular organ that lie in the pelvic cavity just posterior to the symphysis pubis.
- In *males* it *lies anterior* to the *rectum* while in *females* it *lies anterior* to the *vagina* and anterior and inferior to the uterus.





The Ureters

- Pair of muscular tubes –
 25 cm in length, mm in diameter
- Extend from renal pelvis to the bladder (*From the site of origin to pelvic brim - abdominal part while from pelvic brim to entry into urinary bladder - pelvic part*)



The Ureters

 Peristaltic contractions force urine from the kidneys to the urinary bladder

Retroperitoneal in position, runs behind the peritoneum





The upper half lies in the abdomen and the lower half in the pelvis.

It measures 3mm in diameter, but it is slightly constricted at three places.

- 1. At the pelvi-ureteric junction
- 2. At the brim of lesser pelvis
- 3. At its passage through the bladder wall

CONSTRICTIONS Kidney Renal pelvis pelvic brim Ureter vesico ureteric junction —— Urinary bladder Urethra

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The Ureters - Relations

Anterior:

- Duodenum,
- Terminal part of the ileum,
- Right colic vessels,
- Iliocolic vessels,
- Right testicular or ovarian vessels.

Posterior:

- Right psoas muscle,
- Bifurcation of the right common iliac artery





The Ureters

Ureter is supplied by branches of

- » Renal artery
- » Abdominal aorta
- » Gonadal artery
- » Common iliac artery
- » Internal iliac artery
- » Inferior vesical artery

Nerve Supply

Autonomic nervous system

Urinary Bladder

A collapsible muscular sac

Stores and expels urine

- Full bladder spherical
 - Expands into the abdominal cavity
- Empty bladder lies entirely within the pelvis







The mean capacity of the bladder is 220 ml, filling beyond 220ml causes a desire to micturate. Filling up to 500ml may be tolerated, but it becomes painful.

Spontaneous evacuation occurs at 600 ml





- Pelvic floor
- Posterior to public symphysis
- Anterior to
 - Rectum in males
 - Vagina & uterus in females



Urinary Bladder - Shape

An empty bladder is 4 sided pyramid in shape and has 4 angles: an apex, neck & 2 lateral angles

4 surfaces

- Base (posterior surface)
- 2 inferolateral surfaces
- Superior surface

When distended it is ovoid in shape




Prostate gland:

Found in in males

- Lies directly inferior to the bladder
- Surrounds the urethra



Urinary Bladder - Structure

Outer layer: Loose connective tissue

Middle layer: Smooth muscle (detrusor muscle) and elastic fibers

Inner layer: Lined with transitional epithelium



Urinary Bladder - Interior

- The mucous membrane is <u>straw</u> colored & is thrown into folds.
- When bladder is distended, these folds disappear.
- The posterior wall shows a *smooth triangular* area called *trigone*. <u>There</u> <u>are no mucous folds in this region</u>.



Urinary Bladder - Interior

- At the upper lateral angles of the trigone are the ureteric openings.
- At its inferior angle is the internal urethral orifice
- Trigone of the urinary bladder has three openings:

Two openings from the *ureters One opening* to the *urethra*



(a) Urinary bladder, anterior view

Urinary Bladder

- The vasculature of the bladder is primarily derived from the *internal iliac* vessels through *superior vesical* branch.
- In males, this is supplemented by the *inferior* vesical artery, and in females by the vaginal arteries.
- In both sexes, the obturator and inferior gluteal arteries may also contribute small branches.

Urinary Bladder

Venous drainage is achieved by the vesical venous plexus, which empties into the internal iliac veins.

The vesical plexus in males is in continuity at the retropubic space with the **prostate venous plexus** (plexus of Santorini), which also receives blood from the dorsal vein of the penis





Sympathetic: hypogastric nerve (T12 – L2). It causes relaxation of the detrusor muscle, promoting urine retention.

- Parasympathetic: *pelvic nerve (S2-S4).* Increased signals from this nerve causes contraction of the detrusor muscle, stimulating micturition.
- Somatic: <u>pudendal nerve</u> (S2-4). It innervates the external urethral sphincter, providing voluntary control over micturition.



The urethra is a canal extending from the neck of the bladder to the exterior , at the external urethral orifice.

Male: about 20 cm (8") long (<u>from the</u> bladder neck)

Female: 3-4 cm (1.5") long

Short length is why females have more urinary tract infections than males - ascending bacteria from stool contamination

Female Urethra

- Internal urethral sphincter, detrusor muscle thickened, smooth muscle, under involuntary control
- External urethral sphincter, skeletal muscle, voluntary control
- External urethral orifice, between vaginal orifice and clitoris





Internal urethral sphincter

External urethral sphincter

3 regions

- 1. Prostatic urethra, inside the prostate gland
- 2. Membranous urethra, passes through perineum
- 3. Penile urethra



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The urethra



Arrangement of Pelvic Viscera

The human pelvic contains 3 major organs.

- The most anterior organ in any pelvis behind the pubic bone is the urinary bladder
- The most posterior organ in any pelvis is the rectum as part of the gastrointestinal tract

Arrangement of Pelvic Viscera

In females, the pelvis contains the uterus and the vagina in between the urinary bladder to the front and the rectum to the back.



Normal Anatomy



oayman view







- 1. Excretory function through forming urine
- 2. Regulatory function: blood pressure, acidbase balance, water balance, electrolyte balance
- 3. Endocrine function: erythropoietin
- 4. Activation of vitamin D





Kidney-urinary bladder X-ray





Figure 1



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Note renal outlines easily seen, some gas and stool obscures detail









Intravenous Pyelography -IVP






















For further inquiries <u>PLZ</u> feel free to contact at any time through email

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Thank You