

ORIGINAL STUDY

**THE VASCULOGENESIS OF THE FETAL OVARY –
MORPHOLOGICAL AND IMMUNOHISTOCHEMICAL STUDY**

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ABSTRACT

The ovarian function is dependent on an intense vascular morphology which includes cyclic phenomena of angiogenesis, angioregression and angiolysis. The vascular morphogenesis goes through the mechanisms of the vasculogenesis and is associated with the differentiation and the ovarian maturation. The literature information concerning the morphological and immunohistochemical characteristics of the ovarian vasculogenesis is quite scarce, that is why we considered this study to be of great importance. The aim of this study is to establish a correlation between vasculogenesis and the differentiation of the ovarian structures with the redefining the morphofunctional unit.

KEYWORDS: *fetal ovary, fetal vasculogenesis, immunohistochemistry, morphofunctional unit.*

1.Introduction

The formation of the blood vessels at the embryo, fetus and then adult involves complex processes of differentiation, regression and functional remodeling. Angiogenesis is defined as the formation of new blood vessels from preexisting ones. [1]. It is obvious now that angiogenesis plays a key role during folliculogenesis and the formation of the corpora lutea. [2, 3] It is now clearly evident that angiogenesis play a key role in the ovary during folliculogenesis and corpus luteum formation.

Angiogenesis is preceded by vasculogenesis [4]. Vasculogenesis involves the development of the vascular system in the embryo and is caused by in situ differentiation of endothelial progenitors or angioblasts. During development, the expansion capacity of the vasculogenesis process implies the mesenchymal-derived angioblastes should be able to unite in the primitive mesenchyme. The primitive mesenchyme produces VEGF – Vascular Endothelial Growth Factor which induces the formation of hemangioblasts, precursor cells that are common for the blood vessels and the blood cells. [5,6] The first blood isles appear during the third week of

development in the mesoderm that surround the vitelious wall. It is well known that the hemangioblasts located in the centre of the blood isles are responsible for the creation of the hematopoietic cells, while the peripheral ones differentiate in angioblasts. The angioblasts proliferate and, under the influence of the VEGF they transform into endothelial cells. [7, 8]. These are unified under the action of the same factor, they tuneliasate and transform into primitive blood vessels.

2. Materials and methods

The material used in this study consisted in ovaries (9) with the age between 12 to 24 weeks antepartum, that were obtained through necropsies and therapeutical abortions. This was preceded by the obtaining of an informed consent from every patient and the protocol was aproved by the Ethic Commission of the U.M.F. Craiova. The material used was processed through the classic method of parafine inclusion. The series sections that were formed were usual coloured with hematoxiline-eosine. The immunohistochemical processing was done on serial sections using the classical method ABC (Avidine- Biotin Complex)/ Horse Radish Peroxidase (HRP). A cocktail of primary monoclonal antibodies produced in mice against the human antigens CD31 (clona JC 70 A, IgG1 Kappa, Dako), CD34 (clona QBEnd 10, IG1 Kappa, Dako) and Von Willebrand factor (clona F8/F6, Ig G1 Kappa, Dako) was used and also, the anti-human monoclonal mouse antibody VEFF (clona VG1, IgG1 Kappa, Dako). The dilution of the primary antibodies was 1:50, while the incubation was made during the night at a temperature of -4°C . The antigenic recovery was established with the help of the microwave heat (HIER) for 12 minutes, 800 W, with pH 6 citrate for the cocktail and Tris-EDTA pH9 in the VEGF case.

The secondary antibody Goat Anti-Mouse (GAM) was used at a dilution of 1: 100 for two hours and then it was amplified with the Avidine- Biotin Complex for a hour. The reaction was developed with diaminobenzidine (DAB) for ten minutes and it was followed by a contracolouring with hematoxilin. In order to verify the immunoreaction, it was used both the external negative control (by leaving out the primar antibody) and the external positive control (sections of renal parenchimosus for CD31, CD34, VEGF and from the palatine tonsils level for the VIII Von Willebrand factor).

The acquisition of the images was made from the research microscope Nikon with the help of a video camera Sony through an acquisition board Matrox- Compet and a Pentium-MMX / 233Mhz system.

3. Results

The microscopic study of the histological preparations examined at 12 weeks ovaries, outlined many neofomation capillari vessels, especially immature, difusely spreaded among the ovocytes and the primordially folliculis and creating a homogeneous, monomorph aspect. (figure 1).

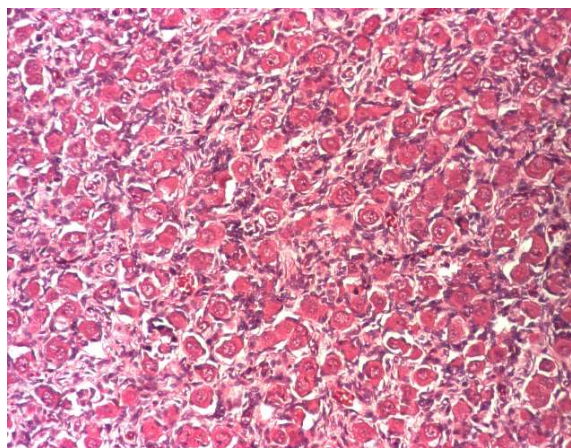


Figure 1. *Fetal ovary 12 S numerous outbreaks of stromal vasculogenesis Ob. 10 Col HE*

At 23-24 weeks ovaries it can be identified the presence of an extended vascular network in the stroma. You can observe mature vessels of arterial and capillar type, hiperplasics, expanded with a turgent endothelium and obvious pericytes. A weak intrafollicular vascular differentiation can be seen at the level of the follicular structures (figure 2).

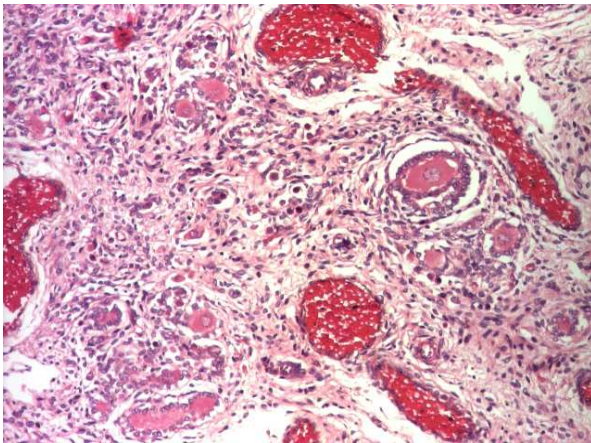


Figure 2. *Fetal ovary 24 s outbreaks of perivascularogenesis and intrafollicular Ob. 10 Col HE*

The immunohistochemical study of the vasculogenesis process created by a panel of antibodies outlines a positive, intense immunomarking on the capillar endothelial cells which are many especially at the fetal ovary of 12-13 weeks old. In addition to this, it can be observed a positive immunomark on conglomerates of endothelial cells or isolated endothelial cells, separated by microvessels that are adjacent to the primordial folliculi. That is why the VEGF is positive on the capillar endothelial, outlining the immature vessels which present a basal, thin and discontinuously membrane in the 12 weeks fetal ovary's stroma. Also, the VEGF is negative at the primordial foliculli level (figures 3,4). On the doubled coloured sections: CD31/FVIII and CD34/FVIII can be seen frequently interfollicular, immature vessels. At the 23-24 weeks old ovaries, it can be identified a weakly positive immunomarking on the capillar adjacent to the primordial foliculli. It is also outlined

immunohistochemically the development of a perifollicular capillar network (figures 5,6).

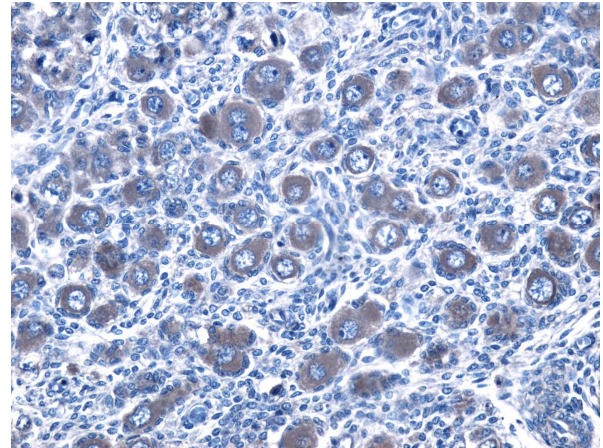


Figure 3. *Fetal ovary 12 s VEGF slightly positive in primordially folliculi Ob.10*

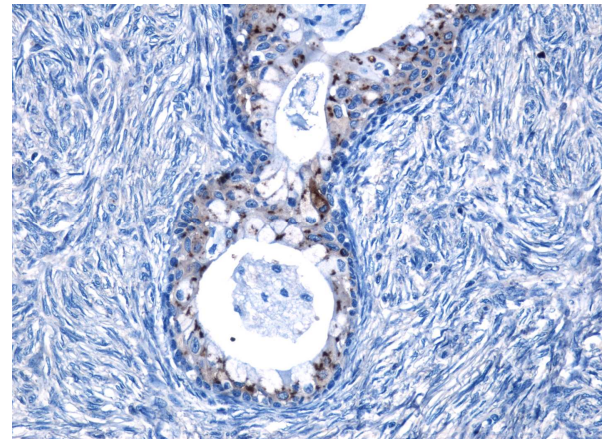


Figure 4. *Fetal ovary 24 s VEGF positive in the active primary folliculi Ob.20*

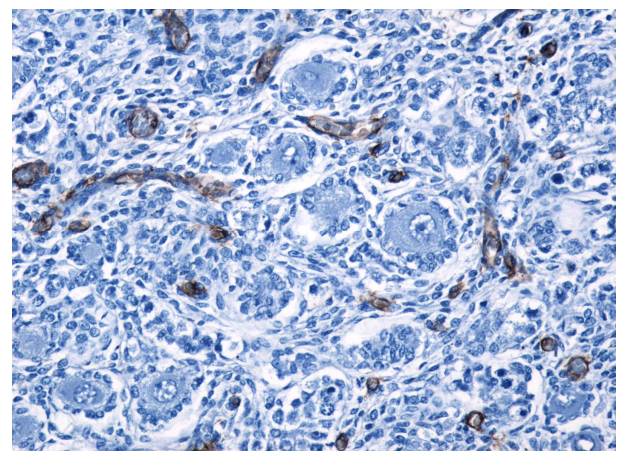


Figure 5. *Fetal ovary 12 s interfollicular immature vessels CD31 – CD34 Ob. 20*

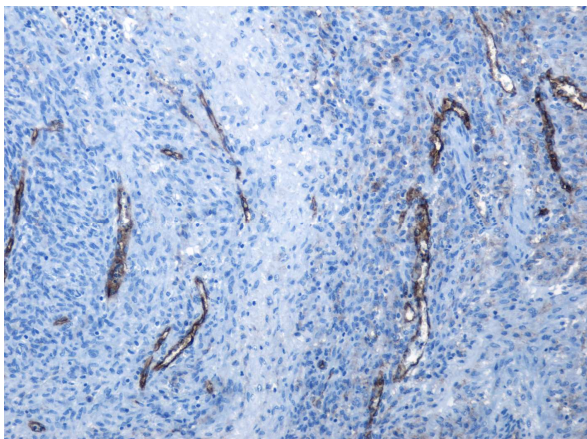


Figure 6. *Fetal ovary 24 s mature vessels in the ovarian hilum CD 31-CD34 Ob. 10*

4. Discussion

The vasculogenesis process starts with the hemangioblasts appearance in the extraembryonic mesoderm surrounding the vitelline sac in the third week of development. Their formation is induced by the vascular endothelial growth factor (VEGF) which is produced by the surrounding mesodermic cells [11]. Under the influence of the vascular endothelial growth factor, the peripheral hemangioblasts differentiate in angioblasts, the predecessors of the blood vessels. The maturation from the embryonic stem cells in the endothelial cells was outlined in vitro in a model of the angiogenesis [12]. The existing studies have demonstrated that during the vasculogenesis, the vascular endothelial growth factor (VEGF) acts through two types of receptors (VEGFR1 and VEGFR2), interposed by the Flk 1. The interaction between the endothelial cells and the mural cells (pericytes and the smooth muscle cells) is essential for the vascular development. The endothelial cells are formed by the mesodermic cells of the Flk 1, while the mural cells are believed to arise from the mesoderm, the neural crest or epicardial cell and migrate in order to contribute to

the formation of the vascular wall. [13,14]. The formation of the endothelial tubes is dependent on cadherin 5 and CD31 which interacts with the actin filaments from the mural cells. [15]

The ovarian vasculogenesis is characterized by the appearance of primary immature networks of ectatic capillaries dissociated by oögonies. These capillary networks develop in the primitive mesenchyme which produces VEGF. The ovarian vasculogenesis in the early fetal period is located in the ovarian stroma of a mesenchymal origin [16,17]. Afterwards, the appearance and the differentiation of the primordial follicles leads to the perfollicular vasculogenesis. During the differentiation and the ovarian maturation, the vasculogenesis will take place intrafollicular. The vasculogenesis is rapidly replaced by angiogenesis which develops around the ovarian follicles through differentiation and maturation [18, 19]. It creates a homogeneous aspect of the newborn ovary and while the organ matures, the vasculogenesis becomes more intense at the selected follicle level to become dominant and capable of ovulation. Due to the fact all the processes of ovarian remodeling take place with the stromal and follicular participation it is necessary to redefine the ovarian morphofunctional unit. This is not only formed from the ovarian follicles but is also realized by a morphological triad consisting in: follicle, stroma and the adjacent vessels [20].

5. Conclusions

The ovarian vasculogenesis from the early fetal period (12-14 weeks), identified through morphological and immunohistochemical methods is intense at the hilum and the stroma level. Subsequently, during the ovarian differentiation, the vasculogenesis takes place perfollicular. The ovarian maturation implies the development of an intrafollicular vascular network. The differentiation

of the blood vessels interposed and controlled by the VEGF produced by the surrounding stromal cells imposes the redefining of the ovarian morphofunctional unit. The morphofunctional unit consists in the folliculi and the adjacent stroma which represents the decisive factor of the ovarian folliculi cyclemorphosis.

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