

Principles of Anatomy and Physiology

14th Edition

CHAPTER 29

Development and Inheritance

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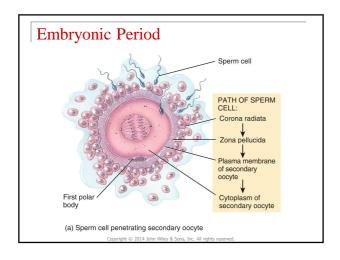
Embryonic Period

- The embryonic period extends from fertilization through the eighth week of development.
- Fertilization—merging of genetic information from sperm and secondary oocyte.
- Sperm swim from the vagina to the cervix using their tails.
- Sperm pass through the uterus and uterine tubes mainly due to contraction of the walls of these structures.

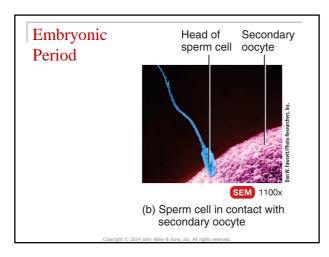
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Embryonic Period

To fertilize an egg, sperm must penetrate the **corona radiata** (granulosa cells) and the **zona pellucida** (glycoprotein layer outside of the oocyte's plasma membrane).



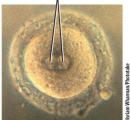
- The enzymes of the sperm's acrosome, along with tail movement, allow the sperm to penetrate the corona radiata.
- Glycoprotein ZP3 in the zona pellucida is a receptor for the sperm.
- Membrane proteins in the sperm head bind to ZP3 and acrosomal enzymes are released to digest a path in the zona pellucida.



- The haploid nucleus in the head of the sperm becomes the male pronucleus.
- The haploid nucleus of the fertilized ovum becomes the female pronucleus.
- When the two merge (syngamy), the diploid zygote is formed.

Embryonic Period

Pronuclei

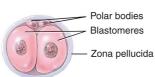


(c) Male and female pronuclei

Embryonic Period

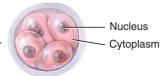
After fertilization (at about 24 hours), the zygote begins mitotic division called cleavage. The first division takes about 6 hours. Successive divisions take less time.

CLEAVAGE OF ZYGOTE, TWO-CELL STAGE (day 1)



By the second day after fertilization, a **second cleavage** is completed yielding **4 cells**.

CLEAVAGE OF ZYGOTE, FOUR-CELL STAGE (day 2)



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Embryonic Period

- By the end of the third day there are 16 cells.
 Each division yields smaller and smaller cells (blastomeres).
- By the fourth day the cluster of cells resembles a mulberry and is called a morula. It is still surrounded by the zona pellucida and is still the size of the zygote.

MORULA (day 4)



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Embryonic Period

- On day 4 or 5, the morula enters the uterine cavity and is nourished by uterine milk, a glycogen-rich secretion from endometrial glands in addition to stored nutrients from the cytoplasm.
- At the 32-cell stage, the fluid now inside the morula, rearranges the blastomeres into a large, fluid filled blastocyst cavity (blastocoel). The mass is now called a blastocyst (still the same size as the original zygote).

BLASTOCYST, EXTERNAL VIEW (day 5)



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Embryonic Period

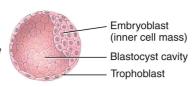
As the blastocyst formed, two different cell populations arose:

- The embryoblast (inner cell mass) will develop into the embryo.
- The trophoblast (outer cell mass) will develop into the outer chorionic sac surrounding the fetus, and the fetal portion of the placenta.

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Embryonic Period

BLASTOCYST (sectioned), INTERNAL VIEW (day 5)

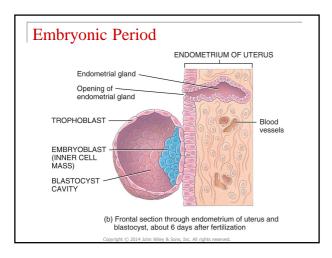


The blastocyst remains free in the uterine cavity for about 2 days and then **implants** by attaching to the **endometrium** at around 6 days after fertilization.

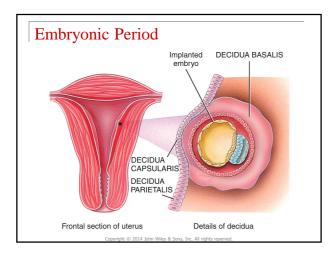


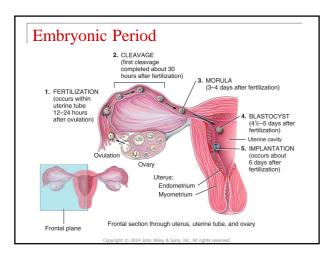
Embryonic Period

- Implantation usually occurs in either the posterior portion of the fundus or the body of the uterus.
- The inner cell mass orients toward the endometrium.



- After implantation, the endometrium is called the **decidua**. It separates from the endometrium after the fetus is delivered.
- The decidua has different regions named based on their positions relative to the site of the implanted blastocyst.





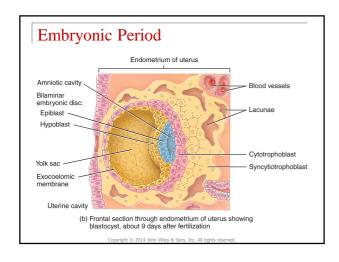
- About 8 days after implantation, the trophoblast develops into the syncytiotrophoblast and cytotrophoblast.
- At around 8 days, the embryoblast also develops into two layers: the hypoblast (primitive endoderm) and epiblast (primitive ectoderm).
- Cells of these structures form a flat disc called the bilaminar embryonic disc.
- The amniotic cavity forms from the epiblast.

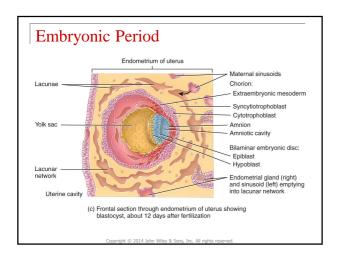
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Endometrial gland Formation of exocoelomic membrane Bilaminar embryonic disc: Hypoblast Epiblast Bilastocyst cavity Uterine cavity Blood vessel (a) Frontal section through endometrium of uterus showing blastocyst, about 8 days after fertilization Copyrigits © 2014 bla willing its Sons, Inc. All rights reserved.

Embryonic Period

- The amnion forms from the roof of the amniotic cavity.
- Eventually, it surrounds the entire embryo and fills with amniotic fluid.
- Also on the 8th day, the exocoelomic membrane forms that, together with the hypoblast forms the yolk sac.
- On the 9th day, small spaces called lacunae form.
- By the 12th day, they fuse to form lacunar networks.





- About the 12th day after fertilization, the extraembryonic mesoderm develops.
- The cells form a connective tissue layer around the amnion and yolk sac.
- Large cavities develop that fuse and form the extraembryonic coelom.

The extraembryonic mesoderm together with the trophoblast forms the **chorion** which surrounds the embryo and, later, the fetus. The chorion

- Blocks antibody production by the mother
- Promotes production of T lymphocytes to suppress the immune response in the uterus
- Produces human chorionic gonadotropin (hCG)

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Embryonic Period

- The first major even of the 3rd week of development is gastrulation.
- The two-layered embryonic disc transforms into a trilaminar (threelayered) embryonic disc (ectoderm, mesoderm, endoderm)
- Gastrulation is associated with the rearrangement and migration of cells from the epiblast.
- The first step in gastrulation is formation of the **primitive streak**.

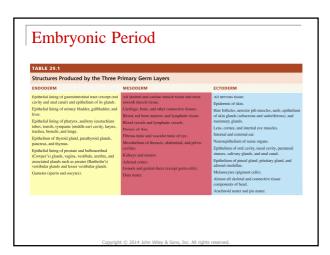
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Embryonic Period Dorsal surface of bilaminar Transverse plane embryonic disc Primitive node Oropharyngeal membrane (future) Amnion Connecting stalk HEAD mouth) END END Primitive streak Yolk sac -Bilaminar embryonic Epiblast (a) Dorsal and partial sectional . Hypoblast views of bilaminar embryonic disc, about 15 days after fertilization

- The primitive streak establishes the head and tail ends of the embryo.
- Next, cells of the epiblast move inward below the primitive streak and undergo invagination.
- Following this, the three germ layers form.

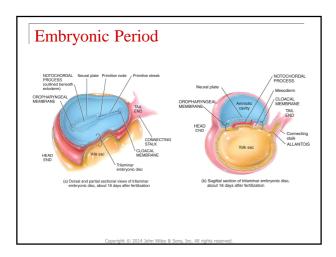
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Primitive streak Trilaminar embryonic disc: Ectoderm Mesoderm Endoderm (b) Transverse section of trilaminar embryonic disc, about 16 days after fertilization



- About 16 days after fertilization, the notochordal process forms.
- By days 22–24, the process becomes the solid cylinder called the **notochord**.
- The notochord is important for induction, the process whereby the inducing tissue stimulates development of a responding tissue to develop into a specific structure.
- The notochord induces the development of vertebral bodies and the nucleus pulposus of vertebral discs.

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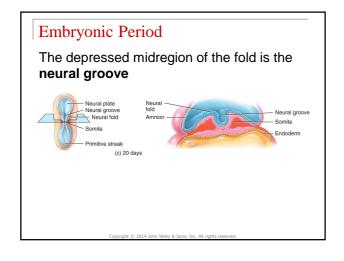
Embryonic Period

Also during the 3rd week of development, the following structures form:

- Oropharyngeal membrane
- Cloacal membrane
- Allantois

Embryonic Period The notochord also induces development of the neural plate. HEAD END Neural plate Transverse plane Cut edge of amnion Primitive streak Tall END (a) 17 days Copyright © 2014 John Wiley & Sons, Inc. All rights reserved.

Embryonic Period The plate develops the neural fold as the lateral edges become more elevated. Neural grove Neural fold Primitive node Primitive node Primitive streak (b) 19 days Capyright © 2014 John Willey & Sons, Inc. All rights reserved.



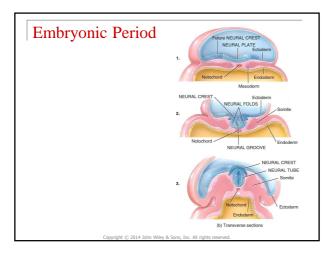
As the neural folds approach each other and fuse, the **neural tube** is formed. The process for the formation of all of these structures is **neurulation**.



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Embryonic Period

As the neural tube forms, some of the ectodermal cells from the tube migrate to form several layers of cells called the **neural crest**.

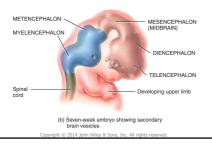


At about 4 weeks after fertilization, the head end of the neural tube develops into three enlarged areas called **primary brain vesicles**.



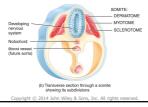
Embryonic Period

The vesicles are called the: **prosencephalon** (forebrain), **mesencephalon** (midbrain) and **rhombencephalon** (hindbrain).



Embryonic Period

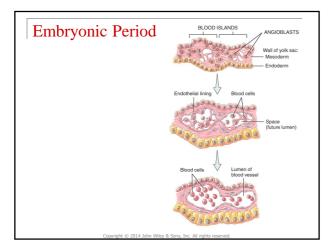
- By about the 17th day after fertilization, paired, cube-shaped structures called **somites** form. By the end of the 5th week, 42–44 pairs are present.
- Each somite differentiates into a myotome, a dermatome and a sclerotome.



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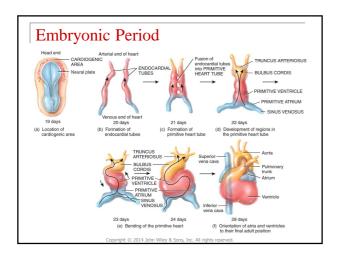
At the beginning of the 3rd week, the formation of blood vessels (angiogenesis) begins with the development of blood islands.

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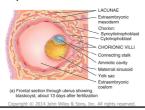


Embryonic Period

- On days 18 and 19, the heart begins to develop in the head end of the embryo. It begins in a region of mesodermal cells called the cardiogenic area.
- A pair of **endocardial tubes** forms.
- The tubes fuse to form a primitive heart tube.



- Embryonic tissue invades the uterine wall and erodes uterine blood vessels. Blood fills spaces called lacunae.
- By the end of the second week, chorionic villi develop.



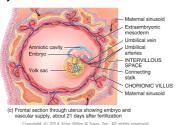
Embryonic Period

By the end of the 3rd week, **blood vessels** develop in the chorionic villi. They connect to the **embryonic heart**.



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The vessels connecting to the heart do so by way of the **umbilical arteries** and **umbilical vein** through the body stalk which eventually becomes the **umbilical cord**.



Embryonic Period

- Placentation is the process of forming the placenta. This structure is the site of exchange of nutrients and wastes between the mother and fetus.
- The placenta produces hormones used to sustain the pregnancy.

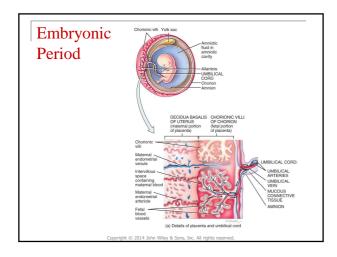
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Embryonic Period

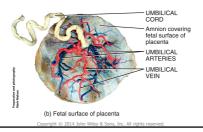
By the beginning of the 12th week, the placenta has two parts:

- 1. The **fetal portion** (chorionic villi)
- 2. The **maternal portion** (decidua basalis of the endometrium)

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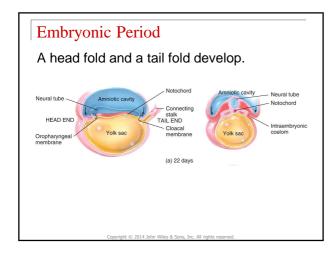


When fully developed, the placenta is shaped like a pancake. It is able to **protect the fetus from microorganisms** as well as its other functions.

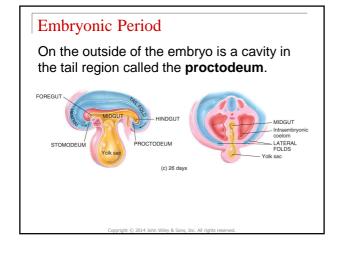


Embryonic Period

- All major organs develop between the 4th through 8th weeks (organogenesis).
- Embryonic folding occurs during the 4th week. This involves the flat embryo folding into a three-dimensional cylinder.

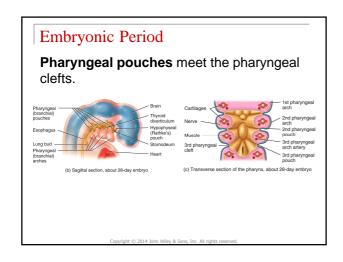


Embryonic Period Lateral folds form and as they move toward the midline they incorporate the yolk sac into the embryo as the primitive gut. Heart Primitive gut (b) 24 days



Embryonic Period Separating the cloaca from the proctodeum is the cloacal membrane. Future pharynx Oropharyngeal membrane STOMODEUM Future umbilical cord Sagittal sections CLOACAL MEMBRANE PROCTODEUM Future umbilical cord Sagittal sections (d) 28 days Transverse sections

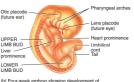
Embryonic Period Five pairs of pharyngeal arches (branchial arches) also develop on each side of the future head and neck regions during the 4th week. Each arch is separated by a pharyngeal cleft. Otic placode Pharyngeal Clefts (a) External view, about 28-day embryo



By the middle of the 4th week, upper limb buds begin to develop.

By the end of the 4th week, lower limb buds and the heart prominence form.

At the end of the 4th week, the embryo has a tail.



(b) Four-week em free limb buds

Embryonic Period

During the 5th week, the brain and head develop rapidly and the limbs develop further.



Embryonic Period

By the 7th week, the regions of the limbs become distinct and digits appear.



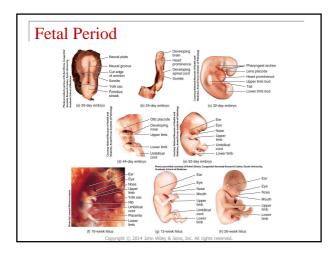
(d) Seven-week embryo showing development of arm, forearm, and hand in free upper limb bud and thigh, leg, and foot in free lower limb bud

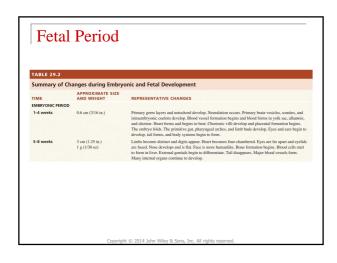
By the end of the 8th week, **eyelids** come together, the **tail disappears**, **external genitals** begin to differentiate and **digits are distinct** and are **no longer webbed**.



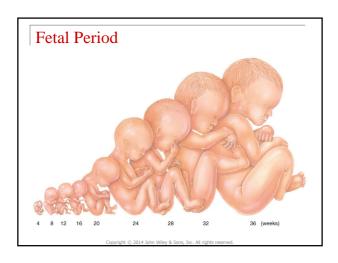
Fetal Period

- The fetal period begins at the 9th week after fertilization.
- Tissues and organs that developed during the embryonic period grow and differentiate.
- Very few new structures appear during this period.









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Fertilization and Development	
Interactions Animation:	
Fertilization and Development	
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Teratogens	
Any agent or influence that is able to	
cause developmental defects in an embryo or fetus is a teratogen .	
 Any number of chemicals and drugs may be considered teratogens. Alcohol is the 	
most common (fetal alcohol syndrome). Others include viruses, industrial	
chemicals, some hormones, antibiotics,	
cocaine and many others.	
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Teratogens	
Cigarette smoking during pregnancy	
has also been implicated as a cause of low infant birth weight, cardiac	
abnormalities, anencephaly and higher infant and fetal mortality rates.	
 Ionizing radiation in many forms is also teratogenic. Exposure of the mother to x- 	
rays or radioactive isotopes during pregnancy may cause microcephaly	
(small head), mental retardation and skeletal deformities.	

Prenatal Diagnostic Tests

- During pregnancy, several medical tests are used to detect fetal abnormalities, genetic disorders and well-being.
- Fetal ultrasonography is used to determine a more accurate fetal age when the date of conception is in doubt.
- It is also used to confirm pregnancy, determine fetal position, identify multiple pregnancies and other uses.

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Prenatal Diagnostic Tests

- Amniocentesis involves removing some amniotic fluid surrounding the developing fetus and analyzing it and fetal cells for genetic abnormalities. It is usually performed between 14–18 weeks.
- The needle used to collect the fluid is guided by ultrasound to avoid damage to the fetus or umbilical cord.

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Prenatal Diagnostic Tests NEEDLE Ultrasound Transducer Amnion AMNIOTIC FLUD Uterus FETUS (14-16 weeks) Placenta (a) Amniocentesis Copyright © 2014 20th Wiley & Sons, Inc. All rights reserved.

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Prenatal Diagnostic Tests

- Chorionic villus sampling may be performed as early as 8 weeks of gestation.
- It is also done under ultrasound guidance, but the usual procedure is to insert a catheter through the vagina and cervix to collect a tissue sample from the chorionic villi.
- The goal is to identify the same genetic defects as seen with amniocentesis.
- The procedure may be done through the abdominal wall as with amniocentesis.

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Prenatal Diagnostic Tests NEEDLE CHORIONIC VILLI FETUS (8-10 weeks) Aminotic fluid Uterine cavity Catheter Urinary bladder Vagina (b) Chorionic villi sampling (CVS)

Prenatal Diagnostic Tests

- Noninvasive prenatal tests may also be performed, but they are currently not as informative as amniocentesis and chorionic villus sampling.
- The maternal alpha-fetoprotein (AFP) test requires a blood sample from the mother. It is used to detect AFP (a protein produced by the fetus at its highest levels between weeks 12-15) after the 16th week of pregnancy when levels go to zero. High levels at this point indicate a neural tube defect.

Maternal Changes During Pregnancy

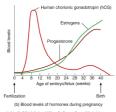
- During the first 3 to 4 months of pregnancy, the corpus luteum secretes progesterone and estrogens in low levels.
- From the 3rd month to the end of the pregnancy, the placenta produces high levels of these hormones.
- The chorion secretes human chorionic gonadotropin (hCG) to stimulate the corpus luteum to produce estrogens and progesterone to inhibit menstruation until the placenta takes over.

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Placenta Placenta Placenta Placenta Placenta Placenta HUMAN CHORIONIC GONADOTROPIN (n:Cg) RELAXIN Human chorionic somatomammotropin (h:Cs) PRESQUES corpus luteum from degeneration until the 3rd or 4th month of pregnancy 1. Maintain endometrium of uterus during pregnancy 2. Helps prepare mammary glands for lactation 2. Propare mother's body for birth of baby 2. Negreta mother's body for birth of baby 3. Pograre mother's body for birth of baby 3. Occreases gluces us and increases tilty add use for ATP production (a) Sources and functions of homomes Copyright © 2014 librh Wiley & Sons, Inc. All rights reserved.

Maternal Changes During Pregnancy

- hCG levels peak at about the 9th week of pregnancy.
- The chorion secretes estrogens after the first
 3 or 4 weeks of pregnancy and progesterone
 by the 6th week



N.	Iaternal	Changes	During	Pregnancy
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- Relaxin is secreted by the corpus luteum and later by the placenta. It increases flexibility of the pubic symphysis and ligaments of the sacroiliac and sacrococcygeal joints and also helps dilate cervix during labor.
- Human chorionic somatomammotropin (hCS), also known as human placental lactogen (hPL), probably helps prepare the mammary glands for lactation, helps maternal growth and regulates metabolism in mother and fetus.

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Maternal Changes During Pregnancy

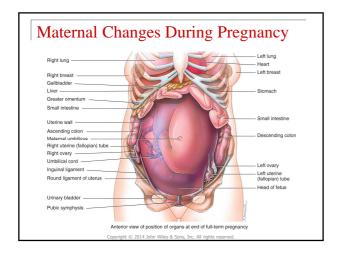
- The hormone recently discovered to be secreted by the placenta is corticotropinreleasing hormone (CRH). It is secreted in nonpregnant people by the hypothalamus. It is involved in the timing of birth.
- CRH is also needed to increase secretion of cortisol which is needed for maturation of fetal lungs and production of surfactant.

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Maternal Changes During Pregnancy

- The uterus continues to expand throughout the pregnancy moving upward into the abdominal cavity until it almost fills
- The organs are pushed out of the way and pressure on the stomach may cause food to be displaced causing heartburn.

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Hormonal Regulation of Pregnancy and Childbirth

Interactions Animation:

 Hormonal Regulation of Pregnancy and Childbirth

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Exercise and Pregnancy

- Different factors during pregnancy may interfere with the ability to exercise.
- In early pregnancy, the mother tires easily and may suffer from morning sickness.
- Weight increases and posture changes as the pregnancy continues.
- Increased relaxin levels cause a change in gait.

Labor

- Labor is the process that expels the fetus from the uterus through the vagina.
- Labor is initiated by the interaction of several hormones.
- Control of contractions occurs via a positive feedback cycle.

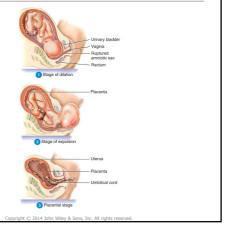
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Labor

- True labor begins when uterine contractions occur at regular intervals.
- False labor is associated with irregular contractions and no "show" (a discharge of blood with mucus).
- True labor is divided into three stages:
 - 1. Stage of dilation
 - 2. Stage of expulsion
 - 3. Placental stage

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Labor



Labor

- Following delivery, it takes about 6 weeks for the maternal reproductive organs and physiology to return to the prepregnancy state. This period is the puerperium.
- The reduction in size of the uterus is involution.

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Adjustments of the Infant at Birth

- During development, the baby is totally dependent on the mother for survival.
- At birth, the fully developed newborn body begins to function independently.
- At birth, the lungs are able to exchange oxygen and carbon dioxide thanks to surfactant that began to develop by the end of the 6th month.
- The respiratory rate at birth is 45 breaths per minute, dropping to the normal 12 breaths per minute within 2 weeks.

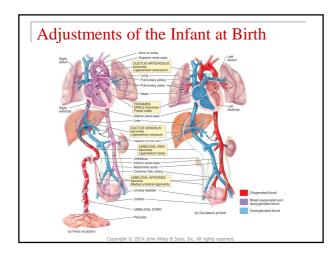
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Adjustments of the Infant at Birth

After the baby's first breath, many changes must be made in the cardiovascular system over time.

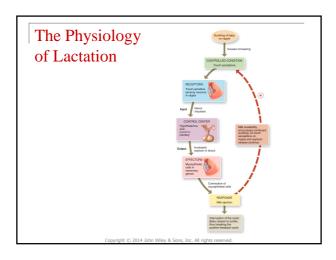
- The foramen ovale closes to become the fossa ovalis.
- The ductus arteriosus closes to become the ligamentum arteriosum.
- The umbilical arteries fill with connective tissue.
- The umbilical vein becomes the ligamentum teres of the liver.

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The Physiology of Lactation

- Lactation is the production and ejection of milk from the mammary glands.
- Prolactin (PRL) (secreted by the anterior pituitary gland) is the main hormone in stimulating milk production.
- Oxytocin causes release of milk into the mammary ducts via the milk ejection reflex.



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- There are benefits associated with breast feeding an infant:
 - The chemical composition of mother's milk is ideal for the baby's brain development, growth and digestion.
 - Several types of white blood cells (for immunity) are in the milk.
 - Antibodies are present.
 - Breast feeding supports optimal infant growth.
 - Breast feeding leads to a reduction in several diseases.

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Inheritance

- Inheritance is the passage of hereditary traits from one generation to the next.
 Genetics is the study of inheritance.
- Humans have 23 pairs of homologous chromosomes; one in each pair from the father and one from the mother.
- Genes for the same trait that are in the same location on each homologue are alleles.
- A mutation is a permanent heritable change in an allele.

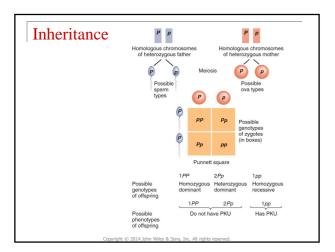
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Inheritance

- One genetic disorder caused by a mutation is phenylketonuria (PKU).
- People with PKU cannot make the enzyme phenylalanine hydroxylase which is needed to break down phenylalanine.
- A Punnett square is used to show the possible genes inherited from two parents.

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- The genotype is the actual genetic makeup relating to a trait.
- An allele that dominates or masks the presence of another allele is a dominant allele (represented by an upper case letter)
- The allele whose presence is completely masked is the recessive allele (represented by a lower case letter).
- Phenotype is the physical expression of the genotype.



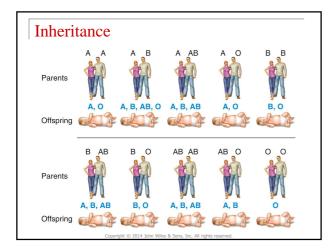
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TABLE 29.3	
Selected Hereditary Trait	s in Humans
DOMINANT	RECESSIVE
Normal skin pigmentation	Albinism
Near- or farsightedness	Normal vision
PTC taster*	PTC nontaster
Polydactyly (extra digits)	Normal digits
Brachydactyly (short digits)	Normal digits
Syndactylism (webbed digits)	Normal digits
Diabetes insipidus	Normal urine excretion
Huntington disease	Normal nervous system
Widow's peak	Straight hairline
Curved (hyperextended) thumb	Straight thumb
Normal Cl ⁻ transport	Cystic fibrosis
Hypercholesterolemia (familial)	Normal cholesterol level
*Ability to taste a chemical compound Copyright © 2014 John Wiley	

- Most patterns of inheritance don't conform to the simple dominant-recessive inheritance pattern.
- Incomplete dominance is a situation where neither member of the pair of alleles is dominant over the other.
- An example of incomplete dominance is the inheritance of sickle cell anemia.

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Inheritance

- Multiple-allele inheritance occurs when genes have more than two alternative forms.
- Inheritance of the ABO blood group is an example of this.
- Within this inheritance pattern there is also codominance. In this case, two genes (type A and type B blood) are expressed equally.



- Polygenic inheritance is seen when a trait is controlled by the combined effects of two or more genes.
- Complex inheritance is seen when a trait occurs due to the combined effects of many genes and environmental factors.

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Inheritance

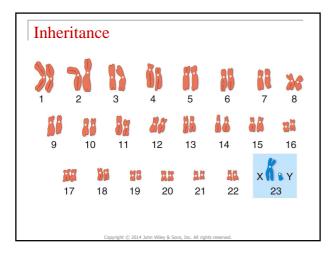
Examples of complex traits include:

- Skin color
- Hair color
- Eye color
- Height
- Metabolic rate
- Body build

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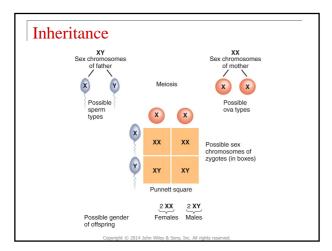
Inheritance	P generation			BCC dark)	×	aab very		,			
	F ₁ generation offspring Possible ova	ı İ		Aa	BbC med	c	(inte	laBbe ermed	Cc	,	
	Possible	6									
	sperm	*	00					00	00	00	
	Possible										
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- The 46 human chromosomes (23 pairs) are identified by their size, shape and staining pattern.
- An entire set of chromosomes arranged in decreasing size order and according to the position of the centromere, is called a karyotype.



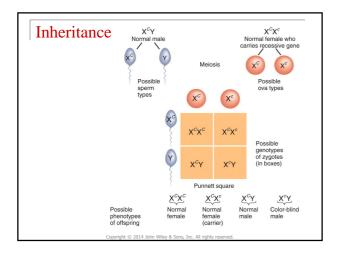
- The 23 pairs of human chromosomes include 22 pairs of autosomes and one pair of sex chromosomes (X and Y).
- Males have an X and a Y chromosome.
- Females have two X chromosomes (one is automatically inactivated—X-chromosome inactivation—and becomes a Barr body).
- Whether the sperm that will fertilize an egg is carrying an X or a Y chromosome will determine the gender of the zygote. An egg will only have one X chromosome under normal circumstances.

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Inheritance

- Some non-sexual traits are inherited on the X chromosome. These are called sexlinked traits.
- Red-green color blindness is an example of a sex-linked trait.



End of Chapter 29

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