Oviduct – Atrophy

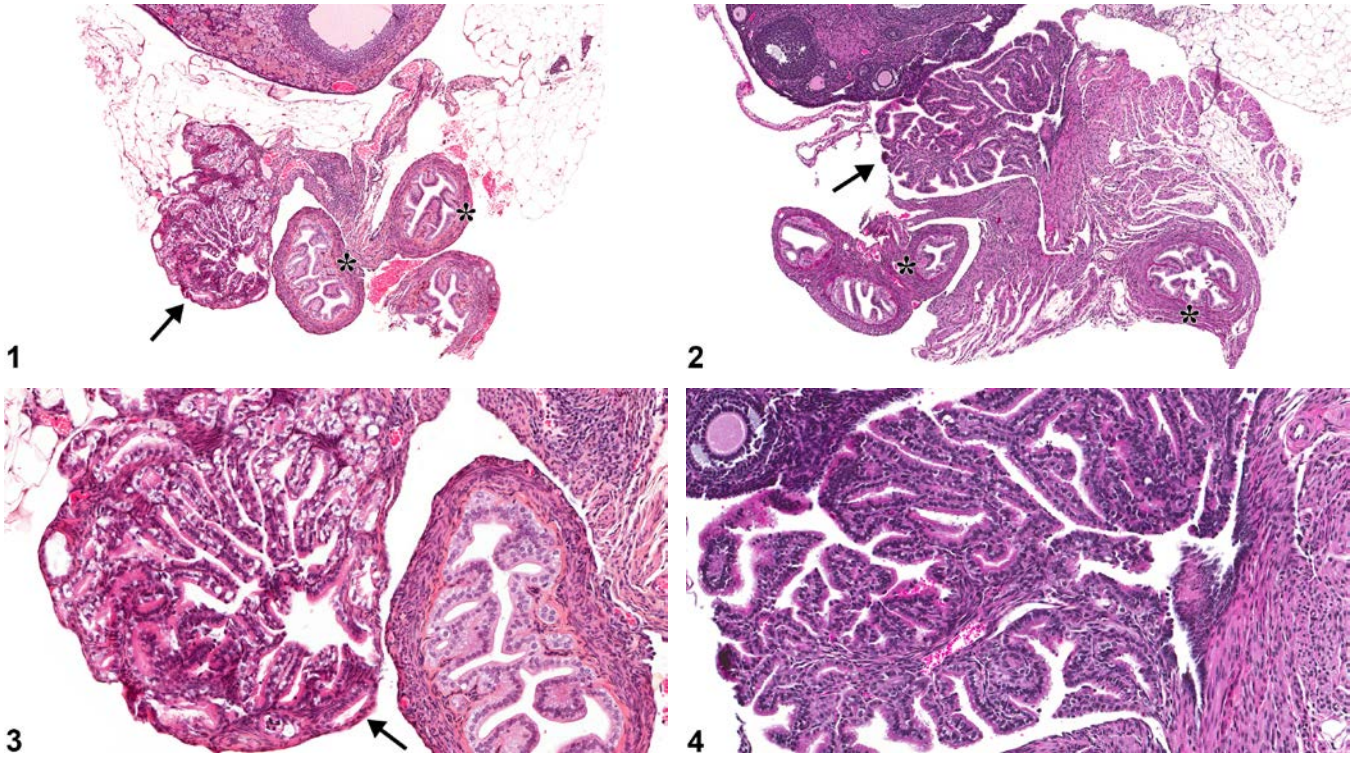
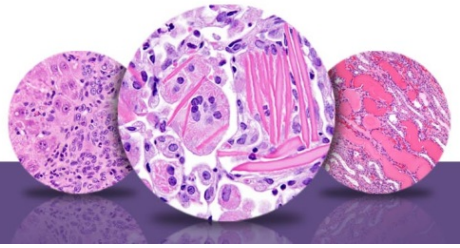


Figure Legend: **Figure 1** Oviduct - Atrophy in a female B6C3F1/N mouse from a chronic study. The fimbria in the infundibulum are small and collapsed (arrow) and the folds of epithelium in the isthmus are blunted (asterisk). **Figure 2** Oviduct - Normal in a female B6C3F1/N mouse from a subchronic study. The fimbria in the infundibulum (arrow) and epithelial folds in the isthmus (asterisk) are well formed (compare to Figure 1). **Figure 3** Oviduct - Atrophy in a female B6C3F1/N mouse from a chronic study (higher magnification of Figure 1). The cells in the infundibular fimbria (arrow) are vacuolated. **Figure 4** Oviduct - Normal in a female B6C3F1/N mouse from a subchronic study. The cells of the infubdibular fimbria lack vacuoles (compare to Figure 3).

Comment: Oviduct atrophy is an uncommon lesion and would be expected to occur in association with atrophy of the ovary and uterus or with inflammation. Features of oviduct atrophy include a decrease in the cross-sectional diameter of the oviduct, decreased thickness of the smooth muscle wall, decreased epithelial height, and flattened fimbria and/or mucosal folds (Figure 1 and Figure 2). This lesion must be differentiated from hypoplasia.



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Recommendation: Oviduct - Atrophy should be diagnosed and graded whenever present.

Reference:

National Toxicology Program. 1999. NTP TR-481. Toxicology and Carcinogenesis Studies of Oleic Acid Diethanolamine Condensate (CAS No. 93-83-4) in F344/N Rats and B6C3F$_1$ Mice (Dermal Studies). NTP, Research Triangle Park, NC.
Abstract: http://ntp.niehs.nih.gov/go/9764

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