



*A “Joint Effort” Production:*

# *Inclusive Anatomy*

Challenging Tradition, Reconstructing Language



Western



# *Our Supervisor*



**Dr. Charys Martin**

**Assistant Professor**

Dept. of Anatomy and Cell  
Biology

## **Primary Role:**

- Educate medical students in clinically relevant anatomy and embryology
- Curriculum development for medical students

## **Interests**

**Medical Education  
Scholarship**

Using evidence to guide  
the integration of the  
basic sciences

**Clinically Related  
Anatomical Research**

Anatomical considerations to  
preventing atrial-esophageal  
fistula



# *What is an Eponym?*

- A person after whom a discovery is named
- Used to honour the scientist who played a major role in the identification of the anatomical structure

**Uterine Tubes**



**“Fallopian” Tubes**



Gabriele Fallopio. Line engraving, 1688.


# *Inclusive Anatomy*


**Inclusive Anatomy**


[Home](#) [Eponym Directory](#) [Sex & Gender Diversity](#) [Inclusive Resources](#) [About](#)

## Explore the Site

Embark on a journey of linguistic exploration and cultural understanding with Inclusive Anatomy. Join us in celebrating the diverse tapestry of human experience woven into the fabric of words

[Eponym Dictionary](#)

[Sex & Gender Diversity](#)

[Inclusive Resources](#)

## Eponym Directory Guide

The eponym directory provides historical and anatomical context for medical eponyms. Search below for an eponym or scroll through the directory.

[Head & Neck](#)

[Thorax](#)

[Abdomen](#)

[Pelvis & Perineum](#)

[Embryological](#)

[Histological](#)





# Uterine Tubes

Eponym: Fallopian Tubes

Navigate through the eponym by choosing to learn about its history or anatomy.

History

Anatomy

## History

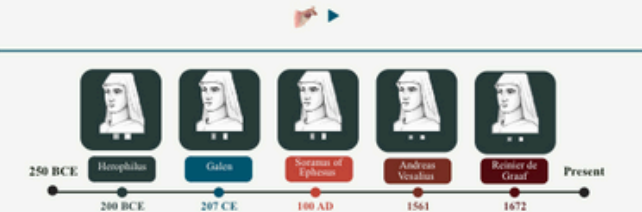
[Back to Main Page](#)

[Anatomy Page](#)

### Uterine Tubes

*/yoo-tah-ryne toohs/*

Eponym: Fallopian Tubes



#### Eponym:

The uterine tubes are eponymously known as fallopian tubes, named after anatomist, Gabriel Falloppio (1523-1562). Falloppio was born in Modena, Italy, and received his medical doctorate from the University of Modena. He held professorships at various Italian Universities, including Ferrara, Pisa, and Padua. [1]

#### Scientific Contributions:

Falloppio conducted dissections primarily at the University of Pisa and the Medici Zoo of Florence, making significant contributions to the anatomy of head, reproductive organs in both sexes, and urology. [2] Various anatomical structures related to fallopian tube, including fallopian canal and fallopian ligament, was described by Falloppio as well. He also corrected this misconception, stating that females do not have an epididymis, and emphasized that the fallopian tube is an independent organ that links the uterine horns to the ovary. [2]



Gabriele Falloppio. Line engraving, 1688. Obtained from: Wellcome Collection – Reference: 28351. This image was cropped.

#### References

1. Stolberg, M. (2022). Gabrielle Falloppia, 1522/23-1562: The Life and Work of a Renaissance Anatomist. Routledge.
2. Mortazavi MM, Adeeb N, Latif B, et al. (2013). "Gabriele Falloppio (1523-1562) and his contributions to the development of medicine and anatomy." *Child's Nervous System*, 29(6): 877-80.
3. Thierry, M. (1993). Vesalius and the anatomy of the female genital tract. *Verhandelingen-Koninklijke Academie Voor Geneeskunde van België*, 55(6), 609-682.

## Anatomy

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[History Page](#)

### Uterine Tubes

*/yoo-tah-ryne toohs/*

Eponym: Fallopian Tubes



#### Structure:

The uterine tubes are a set of paired tubes extending from the **uterus** to the **ovaries** in the phenotypic female assigned at birth pelvis. [1] These tubes are components of the reproductive system. Each tube is a muscular hollow structure, typically measuring between 10 to 14 cm in length, with an external diameter of approximately 1 cm. Each tube possesses two openings: a proximal opening, which connects to the uterus, and a distal opening, which opens into the peritoneal cavity adjacent to the ovary. [1]

##### Each tube consists of four parts:

- The **intramural** part is situated in the muscular wall of the uterus. This is the narrowest part of the tube that crosses the uterus wall to connect with the isthmus. [2]
- The **isthmus** links the tube to the uterus and connects to the ampulla. [2]
- The **ampulla** is the widest part of the tube and is the primary site for fertilization. [2]
- The **infundibulum** opens into the abdomen at the distal tubal opening, positioned above the ovary. The opening is surrounded by **fimbriae**, aiding in the collection of the oocyte after ovulation. The fimbriae are a fringe of densely ciliated tissue projections around the distal tubal opening, oriented towards the ovary. [2]



#### Function:

In days 10 to 18 of a 28-day cycle an oocyte is captured by the fimbriated end of the fallopian tube and travels to the ampulla. In Ampulla the egg can become fertilized with sperm. [3] The uterine tube transfers the zygote from the ovary to the uterus with the aid of the hairlike cilia and the activity of the muscle of the fallopian tube. [3] The release of an oocyte does not follow a specific pattern between the two ovaries; it appears to occur randomly. Roughly one-third of infertility cases are attributed to issues related to the uterine tubes, such as inflammation, tubal obstructions and ectopic pregnancies. [3]

#### References

1. Moore, K. L., Dalley, A. F., & Agur, A. (2010). Clinically oriented anatomy (6th ed.). Lippincott Williams and Wilkins.
2. Standing, S. (2016). Gray's Anatomy: The Anatomical Basis of Clinical Practice (41st ed.). Elsevier.
3. Briceag I, Costache A, Purcarea VL, Cergan R, Dumitru M, Briceag I, Sajin M, Ispas AT (2015). "Fallopian tubes--literature review of anatomy and etiology in female infertility." *Journal of Medicine and Life*, 8(2): 129-31.

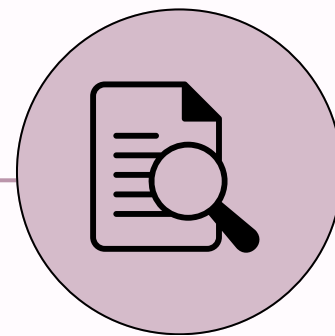
# Timeline



## PHASE I

### General Administration:

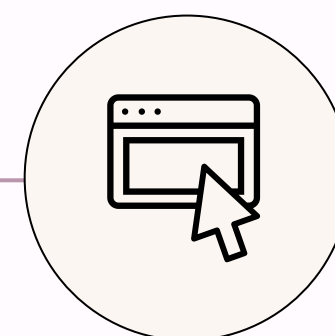
- Reorganizing Teams
- Creating a Tracker
- Cross-Reference Form



## PHASE II

### Eponym Research:

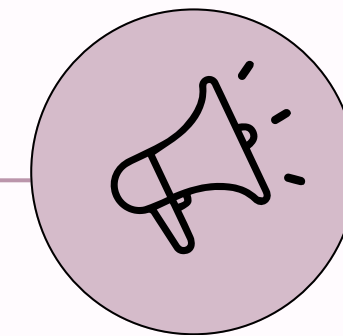
- Start researching the different clinical anatomy eponyms
- Send them through a round of revisions
- Editing previous work



## PHASE III

### Website Editing:

- User-friendly
- Personal touches
- Embedding Pages



## PHASE IV

### Promotion:

- Promote the Website
- Create different campaigns
  - Varying methods



# *Finding a Purpose*

## **Importance**

- Recognizing and valuing differences in race, ethnicity, gender, sexual orientation, disability and SES
- Equity in access and outcomes
- Improved communication
- Building trust, reducing mistrust
- Innovation and representation

## **Moving Away From Eponyms**

Ethical Concerns

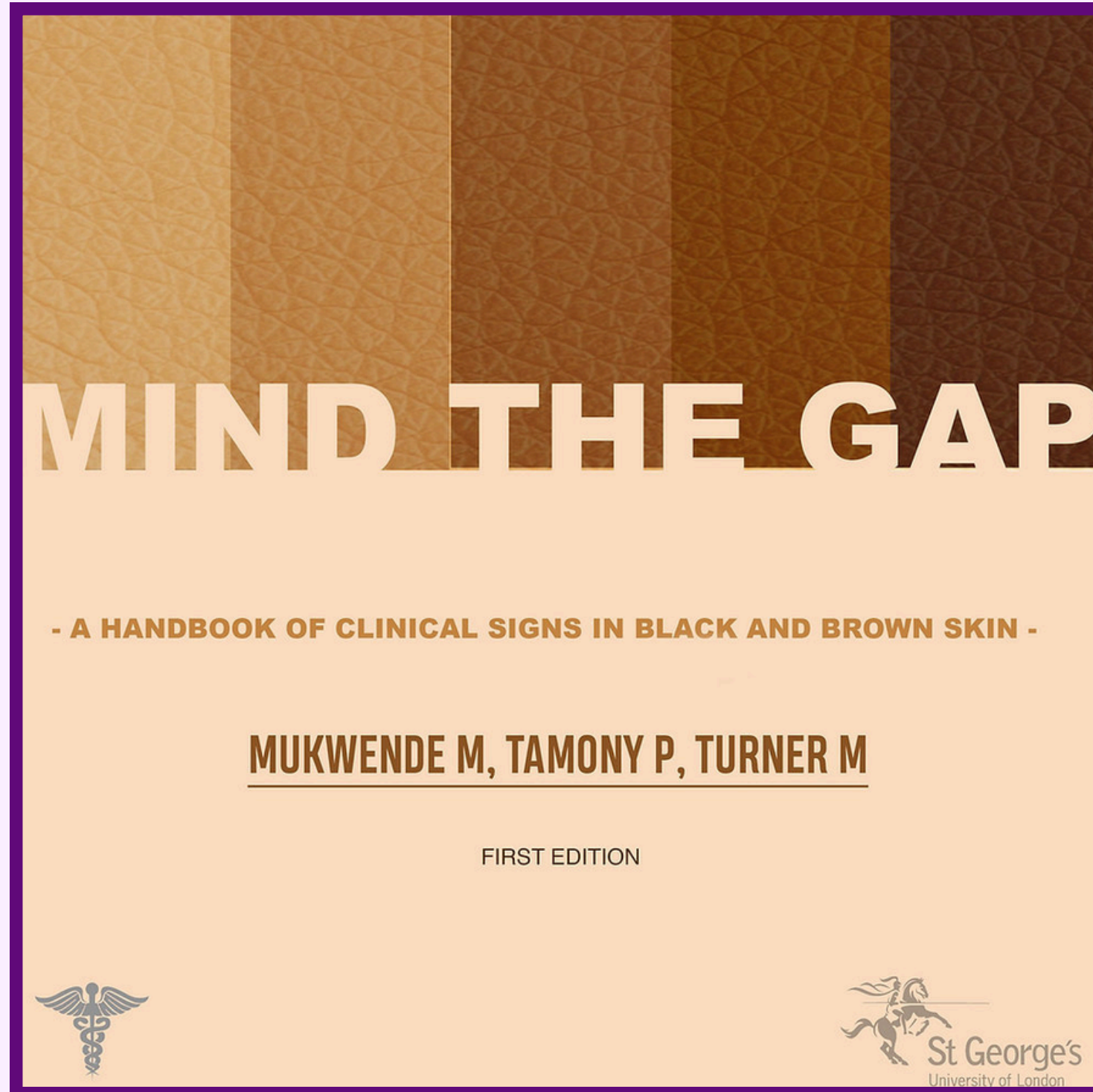
Lack of Descriptive Clarity

Exclusion and Inequity

Confusion

Patient-Centered Care

# *The Bigger Picture*



Reshaping medical education &  
patient-centred care

Understanding anatomy & illness  
from an inclusive lens

Challenging the cis-gendered, white  
male paradigm

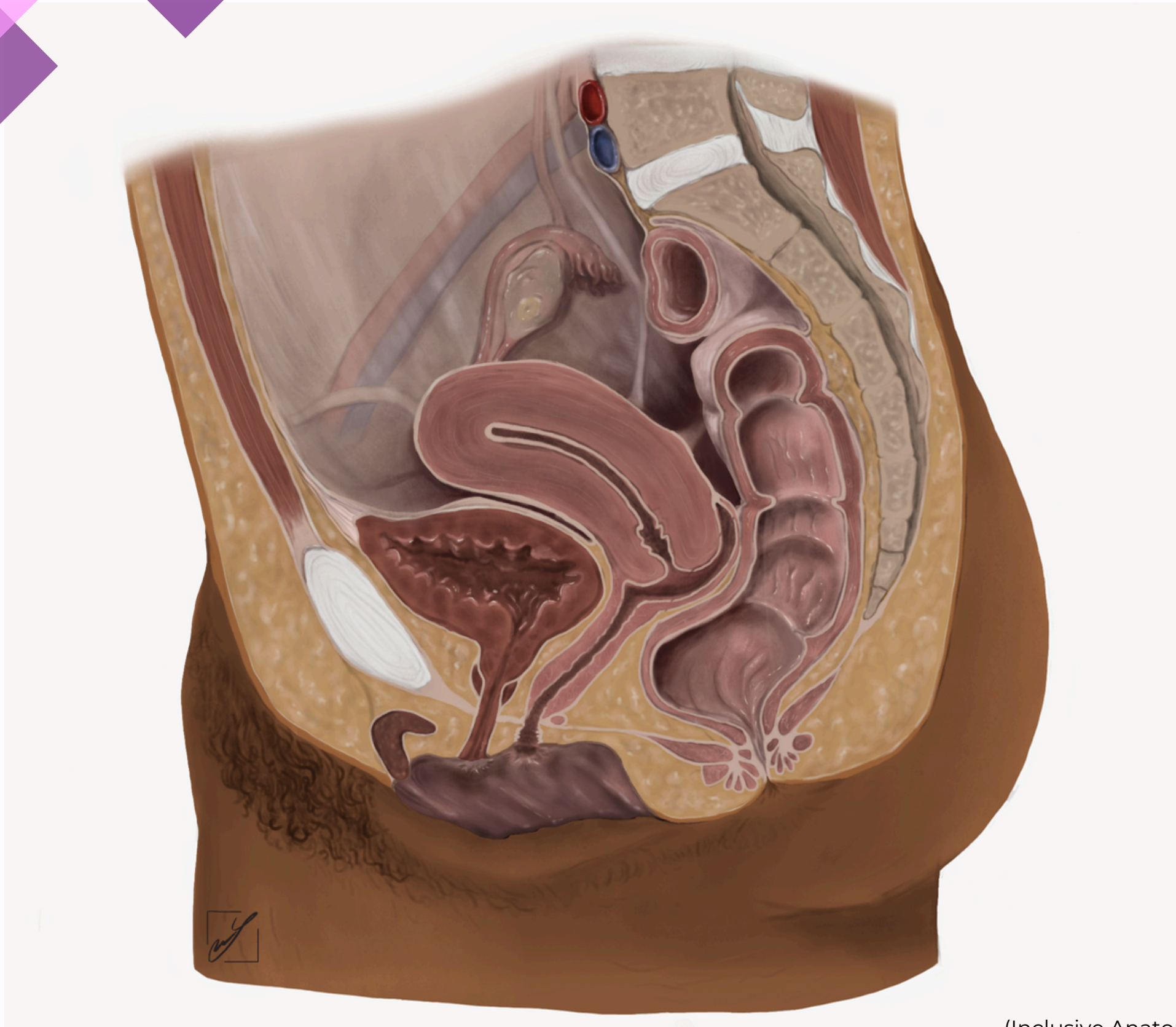




# *Inclusive Anatomy Images*

## **Example 1: Recto-Uterine Pouch**

- Finished image currently on the website
- Melanated skin in the image increases inclusivity
- Often, anatomy images display no pigmentation

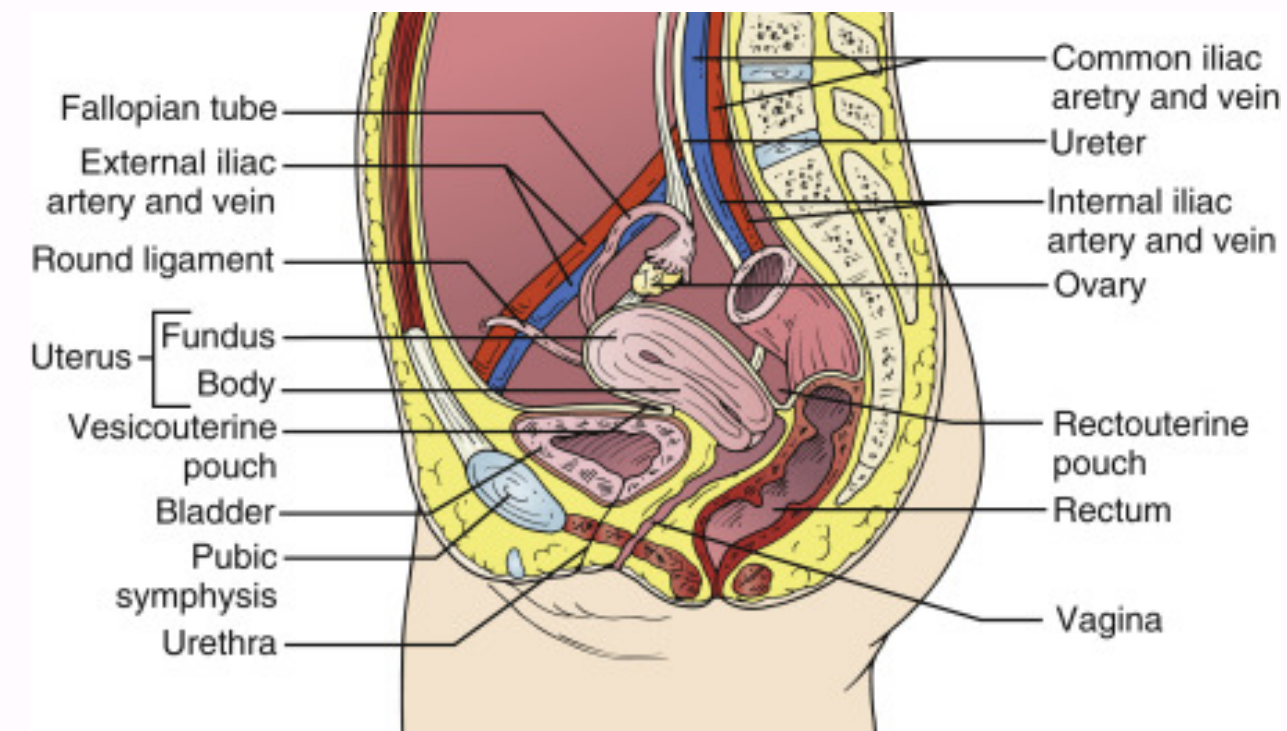


(Inclusive Anatomy)

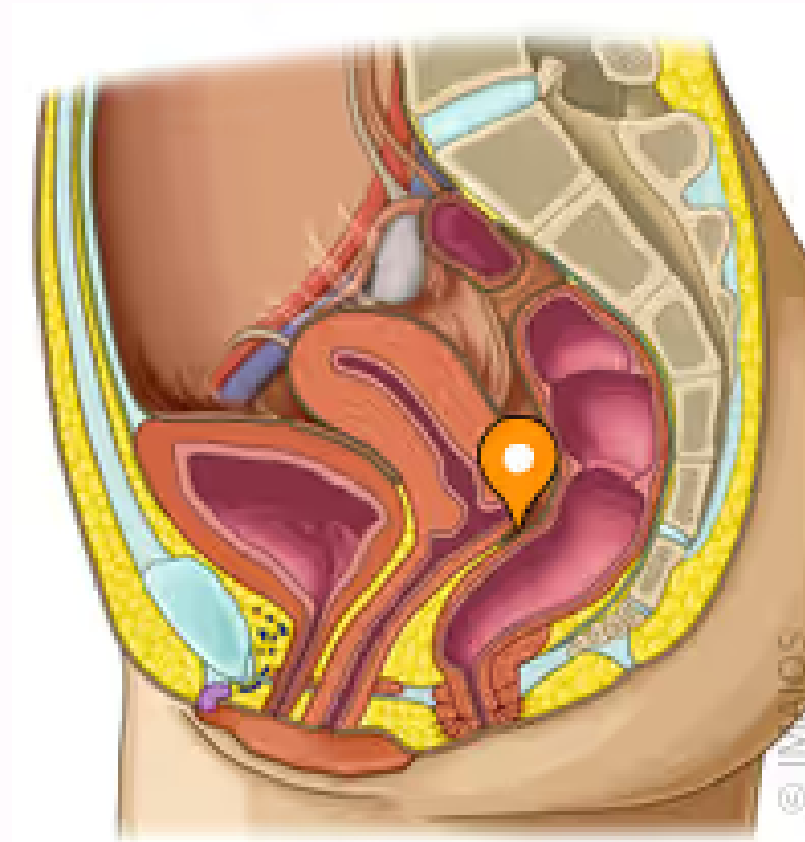
# Inclusive Anatomy Images

## Example 1: Recto-Uterine Pouch

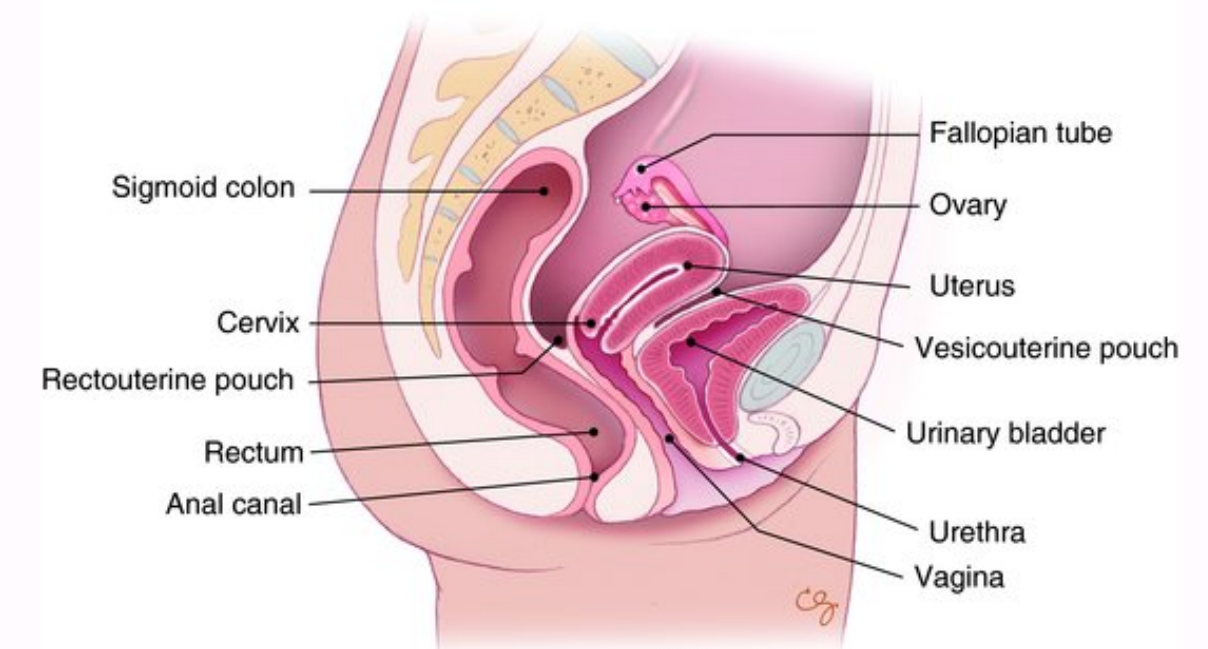
- The same organ as shown in other anatomy sources



(RadiologyKey.com)



(IMAIOS)



(Cambridge University)



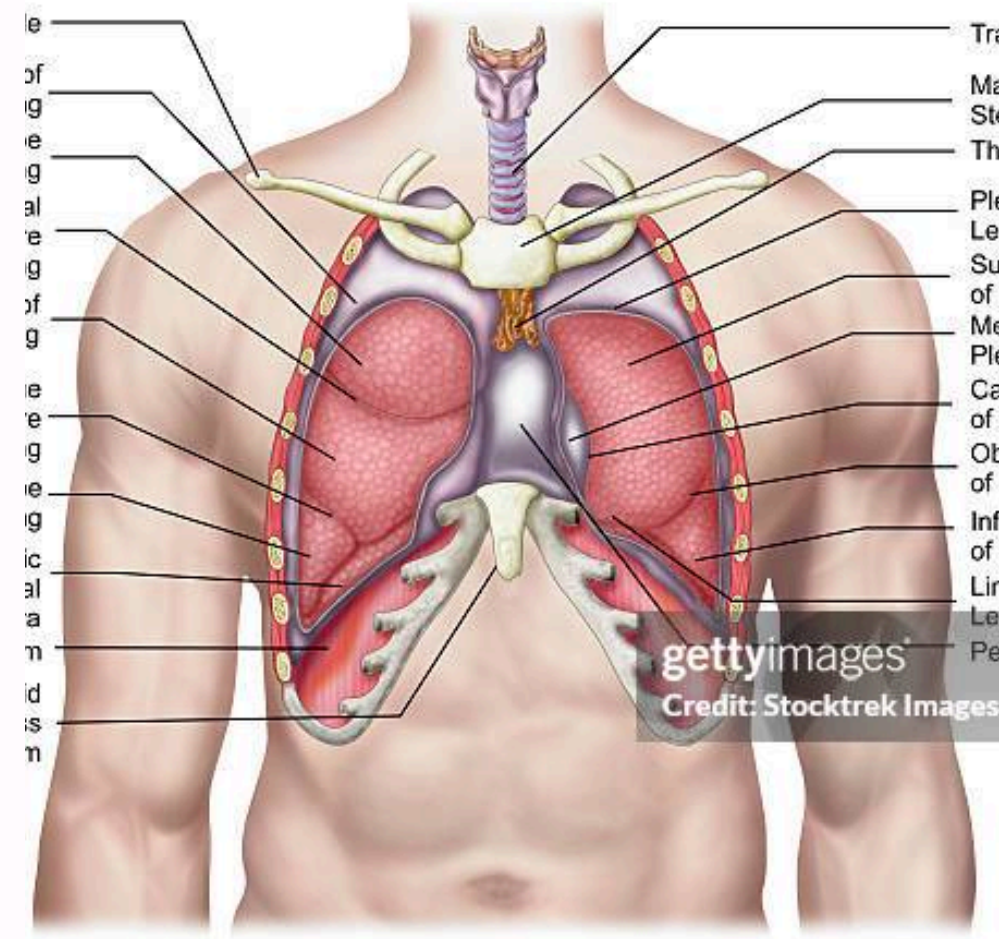
# *Inclusive Anatomy Images*

## **Other Key Points:**

- Many images under development
- Other diverse bodies will be shown

## **Example:**

- Illustrations of chest may include chest masculinization scars
- Representation for transgender bodies



(Getty Images)



(PinkMantaRay.com)

# *Our Hurdles*

## **Problem:**

- Difficulties taking over a previous group's work
- Had their systems and work but could not consult them

## **Result:**

- Used previous group's systems as a model
- Added to the system so that it is cohesive for us





# *Writing Template*

## **Anatomy Page**

### **Structure**

Location & Components  
Important Spatial Relationships

### **Function**

Function of Structure  
Clinical Relevance of the  
Structure

## **History Page**

### **Timeline**

When the Structure was Described  
& Eponym was Coined












### **Eponym**

Life & Academic History

### **Scientific Contributions**

Contributions to the Field & the  
Eponymous Term.

# *Revision Process*

 Abdomen  
 Embryological  
 Head & Neck  
 Histological  
 Pelvis & Perineum  
 Thorax 1. Dr. Martin - Waiting for Feedback  
 2. Needs Feedback  
 3. Requires IMS Edits  
 4. Working Files  
 5. Finalized, Ready to Publish

- Feedback provided by experts
- Multiple rounds of editing ensures content credibility

# *Eponyms in Action*

## Uterine Tubes

/yoo-tuh-ryne toob/

**Eponym: Fallopian Tubes**

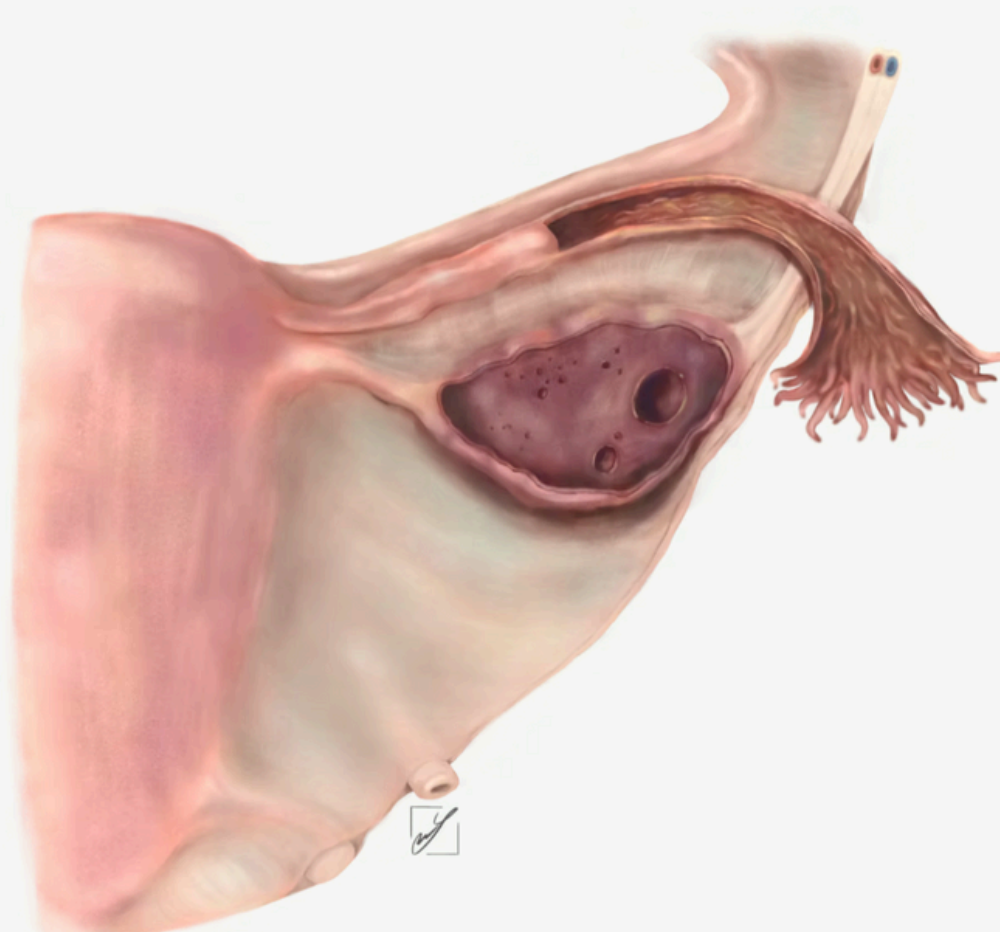


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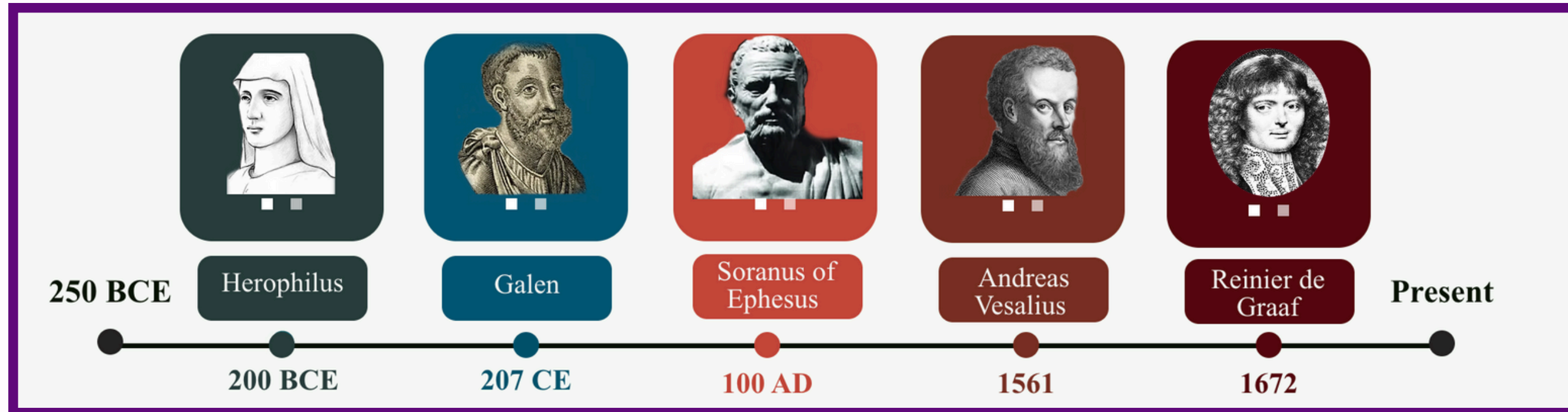
**Accessible Design**

**Open-Access  
Illustrations**

**Informative  
Anatomical Content**



# *Eponyms in Action*



## **Eponym:**

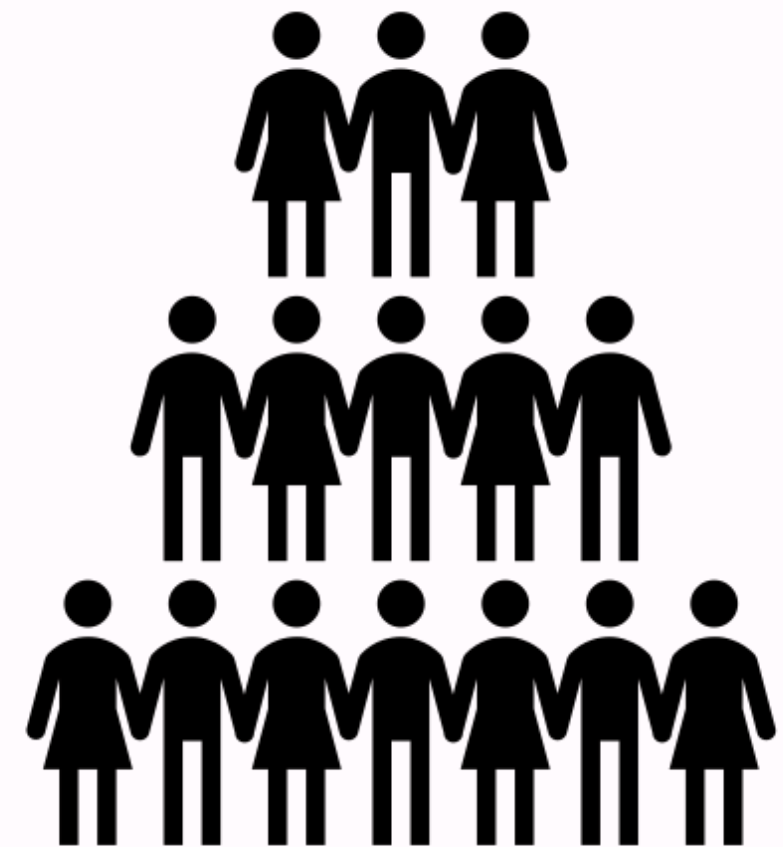
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# *Future Directions*





*Thank You!*

**A Special Thank You to Dr. Martin, Hana Zhang, IMS Faculty and Peers**



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