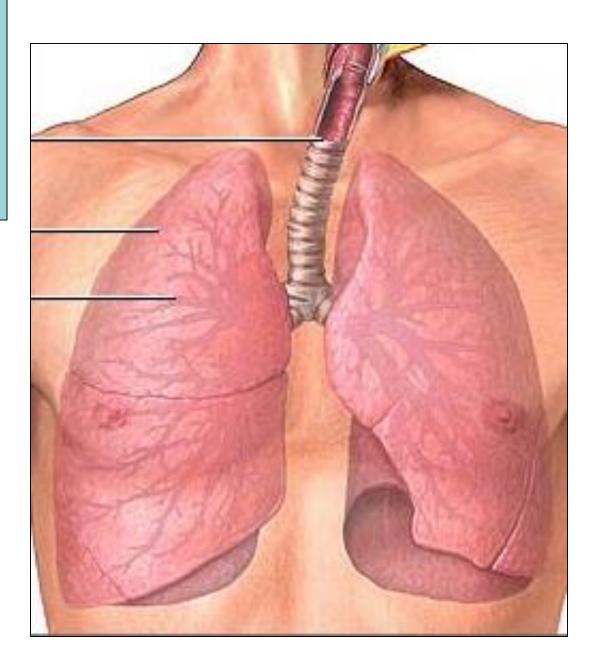
PLEURA & LUNG

Prof. Saeed Abuel Makarem



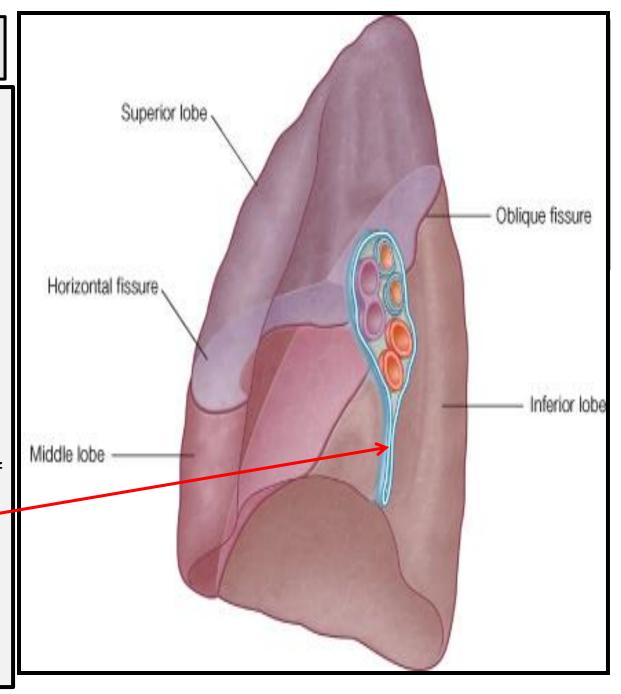
Objectives

By the end of the lecture, you should be able to:

- Describe the anatomy of the <u>pleura</u>:
 <u>Subdivisions</u>: parietal & visceral pleurae, <u>nerve supply</u> of each part.
- List the <u>parts of parietal pleura</u> and its <u>recesses</u>.
- Describe the <u>surface anatomy</u> of both pleurae and lungs.
- Describe the <u>anatomy of lungs</u>: shape, relations, nerve supply, blood supply.
- Describe the <u>difference between right & left lungs.</u>
- Describe the formation of <u>bronchopulmonary segments</u> and the <u>main characteristics</u> of these segment in the lung.

What is Pleura?

- Double-layered serous membranous sac enclosing the lung.
- Has two layers:
 - Parietal layer,
 which lines the thoracic walls.
 - Visceral layer,
 which covers the surfaces of the lung.
- The two layers continue
 with each other around
 the root of the lung,
 where it forms a loose cuff
 hanging down called the
 pulmonary ligament.
- The space between the 2 layers, is the pleural cavity,
- It contains a very thin film of pleural fluid (5-10 ml.).

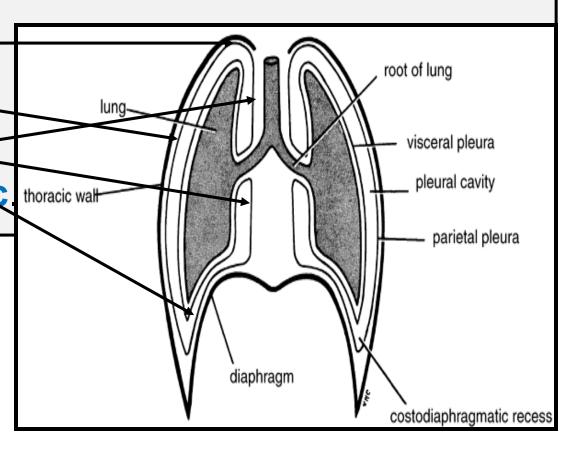


Parietal Pleura

• It is divided according to the region in which it lies and the surfaces it covers, into:



- 2- Costal.
- 3- Mediastinal
- 4- Diaphragmatic thoracic wall



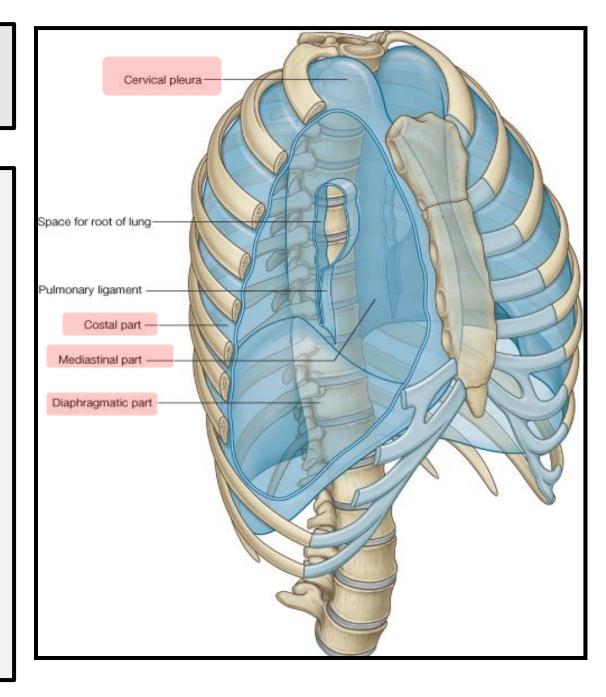
Parietal Pleura

Cervical Pleura:

- Projects upward into the root of the neck, about one inch above the medial 1/3rd of clavicle.
- It lines the under surface of the suprapleural membrane..

Costal pleura:

- lines, the back of the:
- Sternum,
- Ribs.
- Costal cartilages,
- Intercostal spaces,
- Sides of vertebral bodies.



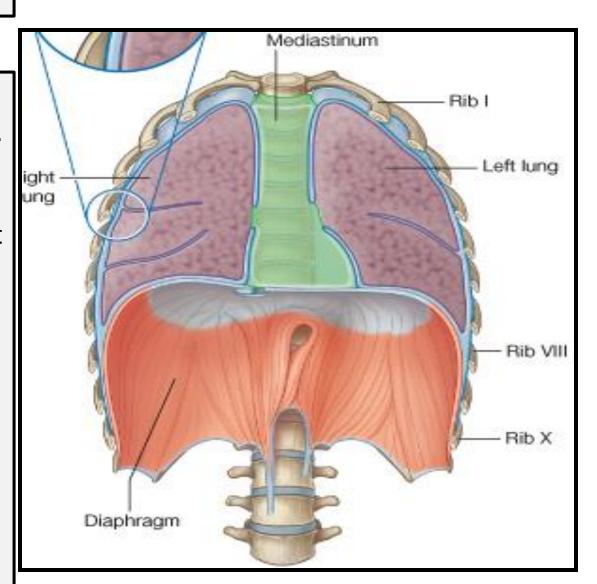
Parietal Pleura

Mediastinal pleura: Covers the mediastinum.

- At the hilum, it is reflected on to the vessels and bronchi, that enter the hilum of the lung.
- It is continuous with the visceral pleura.

Diaphragmatic pleura:

 Covers the upper (thoracic) surface of the diaphragm.



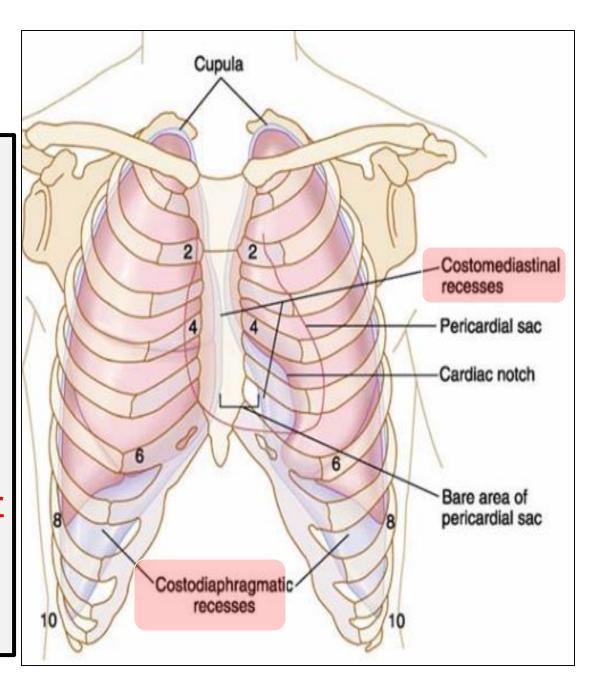
Pleural Recesses

Costodiaphragmatic:

- Slit like space between costal & diaphragmatic pleurae, along the <u>inferior</u> <u>border</u> of the lung.
- The lung enters through it only in deep inspiration.

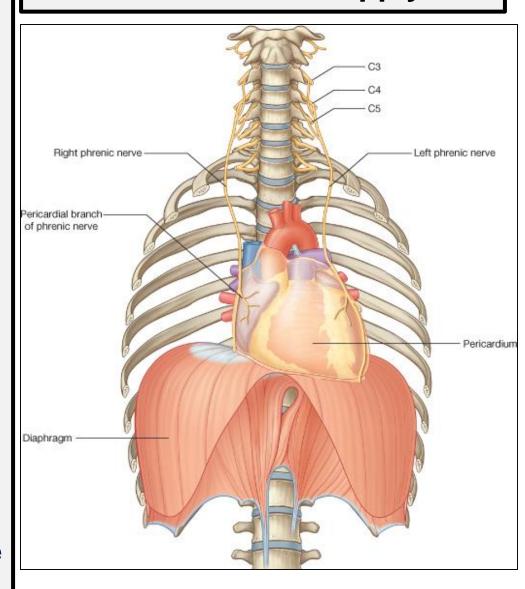
Costomediastinal:

- Slit like space between costal and mediastinal pleurae, along the <u>anterior</u> <u>border</u> of the lung.
- The lung enters through it only in deep inspiration.

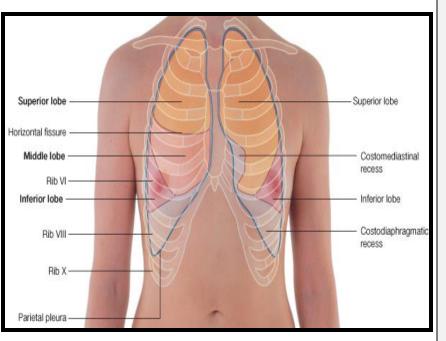


- Parietal pleura: (PPTT).
- It is sensitive to <u>pain</u>, <u>pressure</u>, <u>temperature</u>, and <u>touch</u>.
- It is supplied <u>as follows</u>:
 - Costal pleura is segmentally supplied by the intercostal nerves.
 - Mediastinal pleura is supplied by phrenic nerves.
 - Diaphragmatic pleura is supplied <u>as follow</u>:
 - central part (over diaphragmatic domes) by phrenic nerves.
 - Around the periphery by lower 6 intercostal nerves.
- Visceral pleura sensitive only to <u>stretch</u> and is supplied by the autonomic fibers from the pulmonary plexus.

Pleura: Nerve Supply

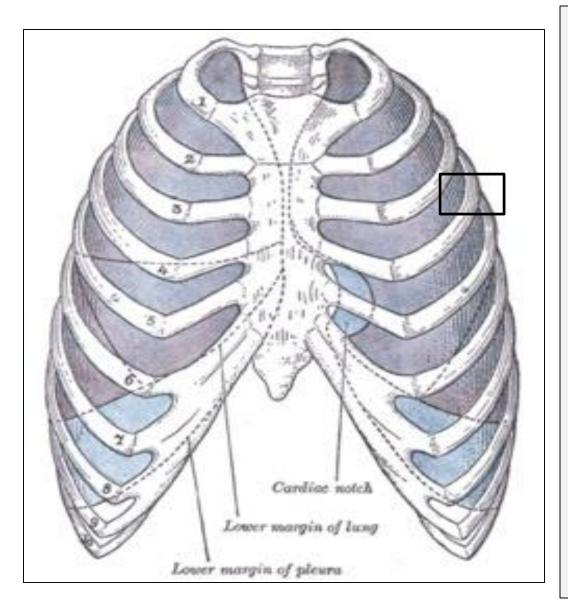


SUFACE ANATOMY OF PLEURA



- Apex:
- Lies one inch above medial 1/3 of clavicle.
- Right pleura:
- The anterior margin extends vertically from sternoclavicular joint to 6th costal cartilage.
- Left pleura:
- The anterior margin extends from sternoclavicular joint to the 4th costal cartilage, then deviates for about 1 inch to left at 6th costal cartilage to form the cardiac notch.
- Inferior margin:
- Passes around the chest wall, on the 8th rib in midclavicular line, 10th rib in midanid-axillary line and finally reaching to the last thoracic spine.
- Posterior margin: along the vertebral column from apex to the inferior margin.

SURFACE ANATOMY OF LUNG

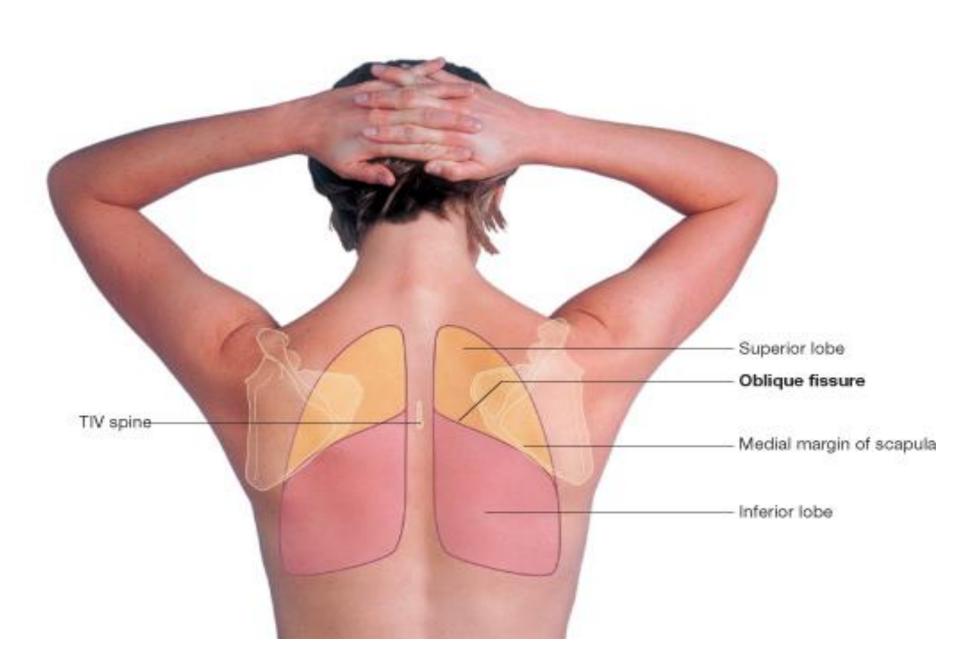


- Apex, anterior border and posterior border correspond nearly to the lines of pleura but are slightly away from the median plane.
- Inferior margin: as the pleura but more horizontally and finally reaching to the 10th thoracic spine.

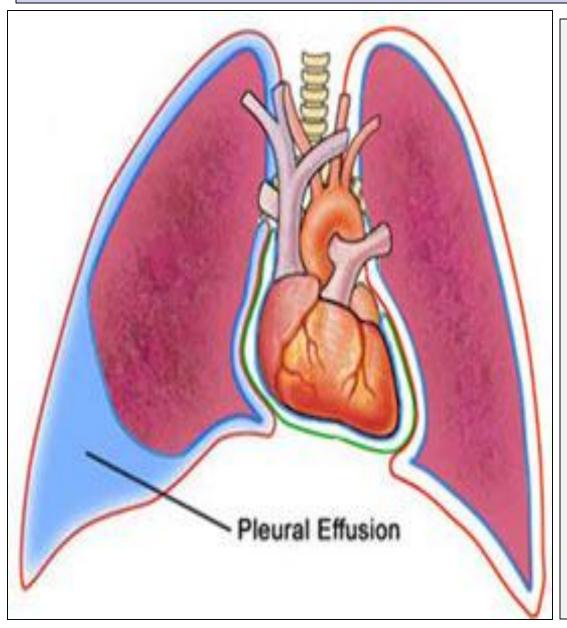
Oblique fissure:

 Represented by a line extending from 3rd thoracic spine, obliquely ending at 6th costal cartilage.

Transverse fissure: Only in the right lung: represented by a line extending from 4th right costal cartilage to meet the oblique fissure.



Pleural Effusion



- It is an <u>abnormal</u> accumulation of pleural fluid <u>about 300 ml</u>, in the Costodiaphragmatic pleural recess, (normally 5-10 ml fluid).
- Causes:
- 1. Inflammation,
- 2. TB,
- 3. Congestive heart disease.
- 4. Malignancy, (mesothelioma of the pleural sac).

The lung is <u>compressed</u> & the bronchi are narrowed.

- Auscultation would reveal faint & decreased breathing sounds over compressed or collapsed lung lobe.
- Dullness on percussion over the effusion.

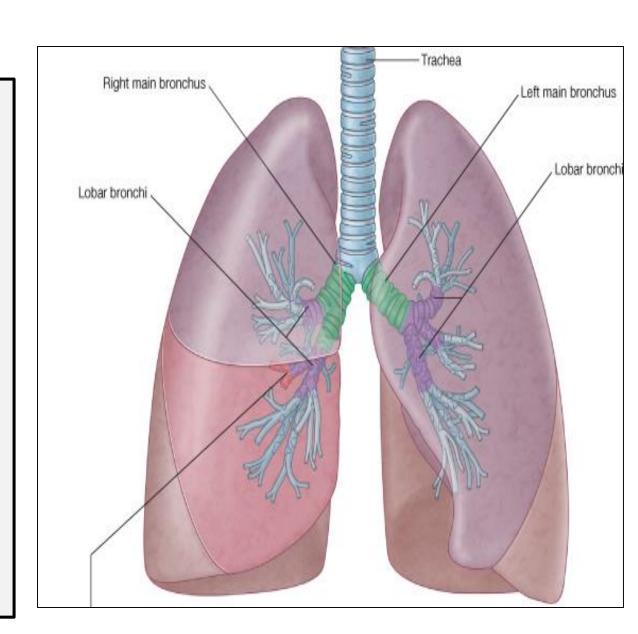
Lungs

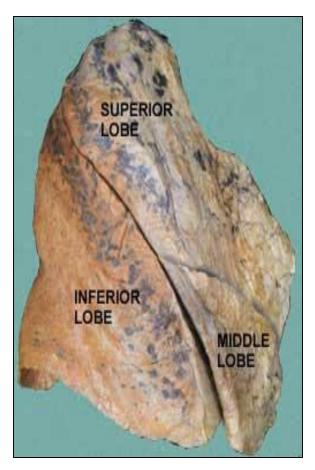
- Located in the thoracic cavity, one on each side of the mediastinum
- Each lung is:

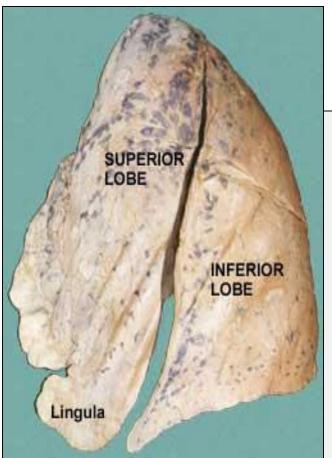
Conical in shape.

Covered by visceral pleura.

Suspended free in its own pleural cavity.
Attached to the mediastinum only by its root.



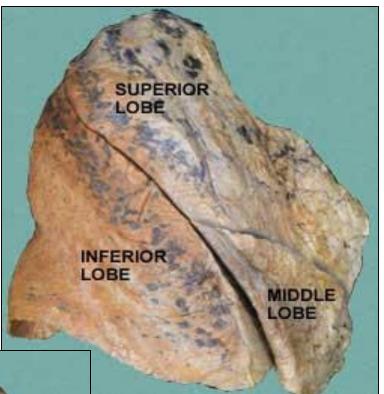


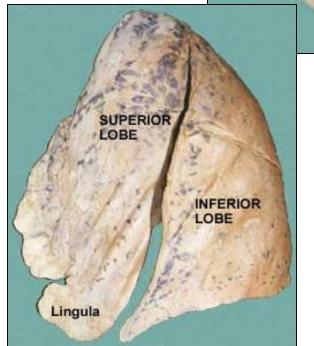


LUNGS

- Each lung has:
- Apex and base: identify the top and bottom of the lung, respectively.
- Costal surface: surrounded by the ribs and intercostal spaces from front, side & back).
- Medial surface:
- Where the bronchi, blood vessels, and lymphatic vessels enter or leave the lung at the hilum.
- It is also related to the structures forming the mediastinum.

LUNGS





Apex:

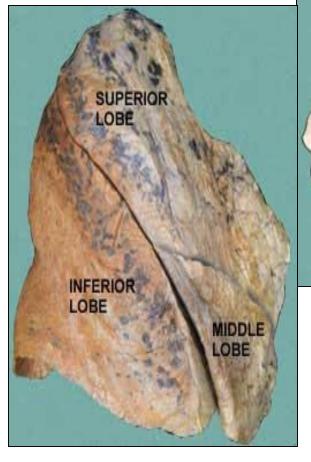
- Projects into the <u>root</u> of the neck.
- (1/2 an inch above medial 1/3 of the clavicle).
 It is covered by cervical pleura.

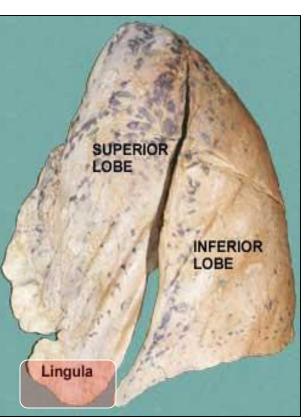
It is grooved <u>anteriorly</u> by <u>subclavian artery.</u>

• Base:

 Inferior, (diaphragmatic surface) is <u>concave</u> and rests on the <u>diaphragm</u>.

Borders: Anterior & Posterior





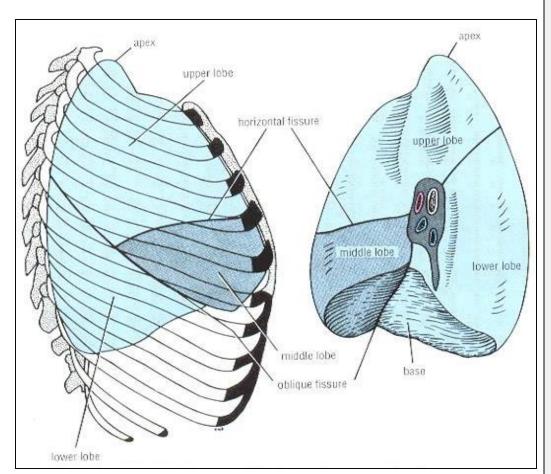
Anterior border:

- It is <u>sharp</u>, thin and overlaps the heart.
- Anterior border of <u>left lung</u> presents a <u>cardiac</u> <u>notch</u> at its lower end.
- It has a thin projection called the lingula below the cardiac notch.

Posterior border:

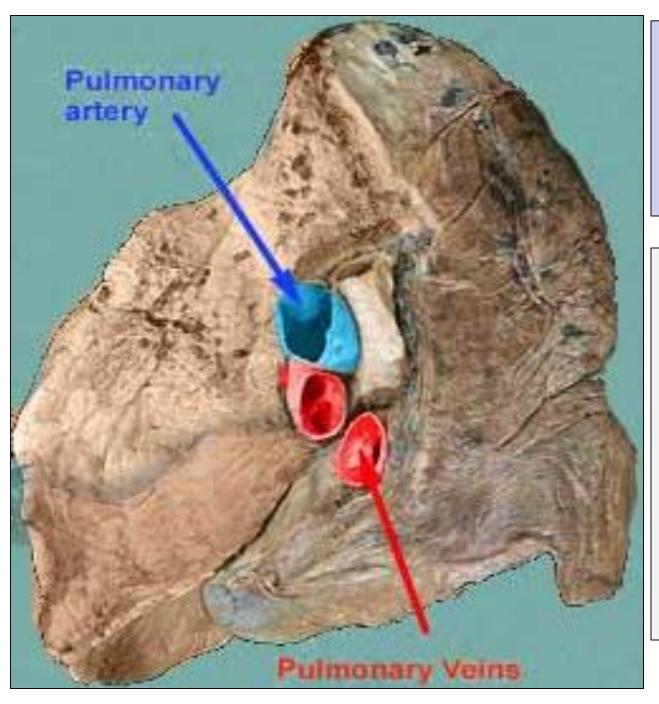
 It is thick and <u>rounded</u>, and lies along the vertebral column.

Surfaces: Costal & Mediastinal



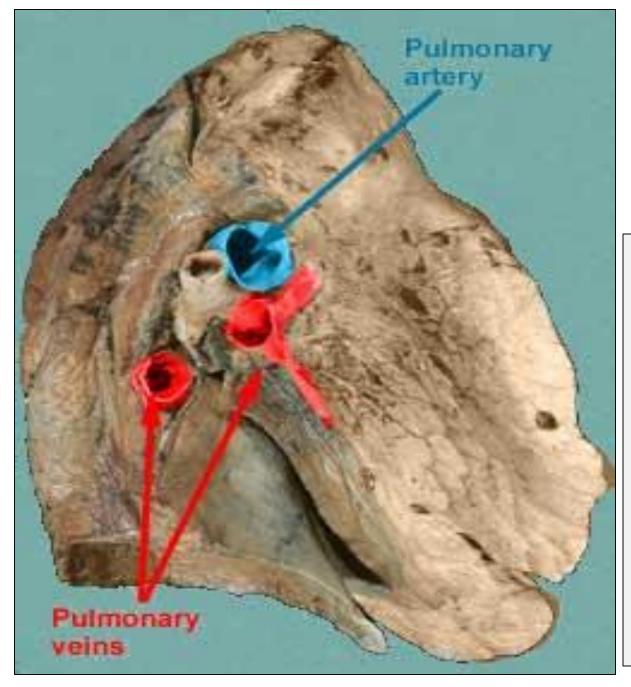
Lateral & medial surfaces of right lung

- Costal surface:
- Convex.
- Covered by <u>costal pleura</u>
 which <u>separates the lung</u>
 <u>from:</u> ribs, costal cartilages & intercostal muscles.
- Medial surface:
- It is divided into 2 parts:
- Anterior (mediastinal) part:
- Contains a <u>hilum</u> in the middle (it is a depression in which <u>bronchi</u>, <u>vessels</u>, & <u>nerves</u> forming the root of lung).
- Posterior (vertebral) part:
- It is related to:
- Bodies of thoracic vertebrae,
- Intervertebral discs,
- Posterior intercostal vessels,
- Sympathetic trunk.



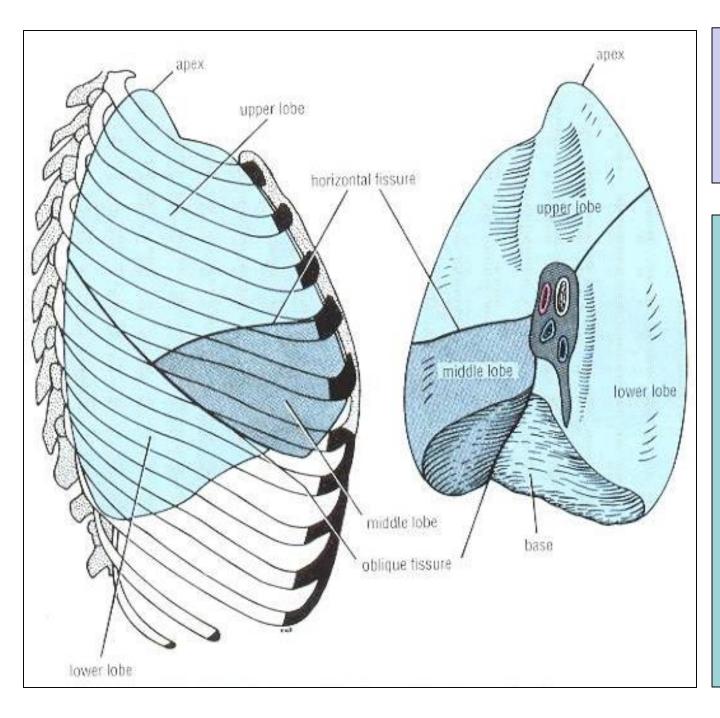
RIGHT LUNG ROOT

- 2 bronchi: Most posterior.
- Pulmonary artery: Most superior.
- 2 Pulmonary veins:
- Are most anterior and most inferior.



LEFT LUNG ROOT

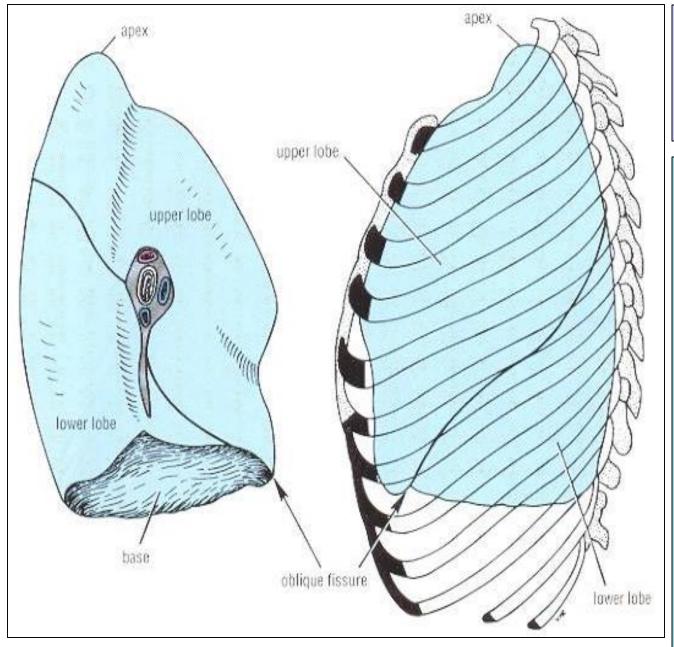
- One bronchus:
 Most posterior.
- Pulmonary artery:
 Most superior.
- 2 Pulmonary veins:
- Are most anterior and most inferior.



Right lung

- <u>Larger &</u>
 <u>shorter than</u>

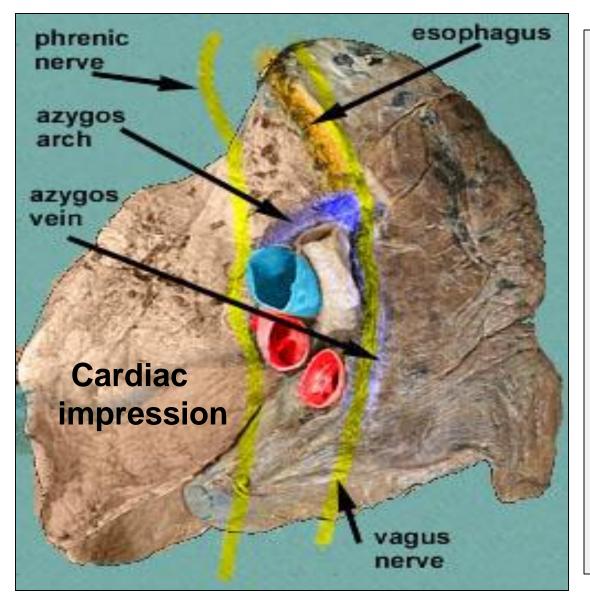
 left lung.
- Divided by
 2 fissures
 (oblique & horizontal)
 into 3 lobes:
- Upper,
- Middle,
- Lower.



Left Lung

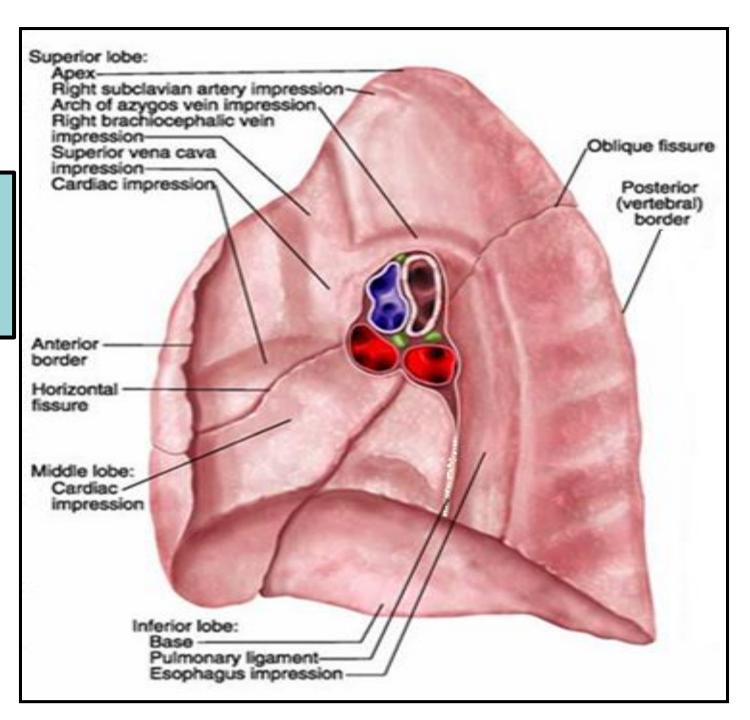
- Divided by only one oblique fissure into 2 lobes:
- Upper
- Lower.
- It has a cardiac notch at the lower part of its anterior border.
- NB. There is <u>No</u> horizontal fissure.

Mediastinal surface of right lung

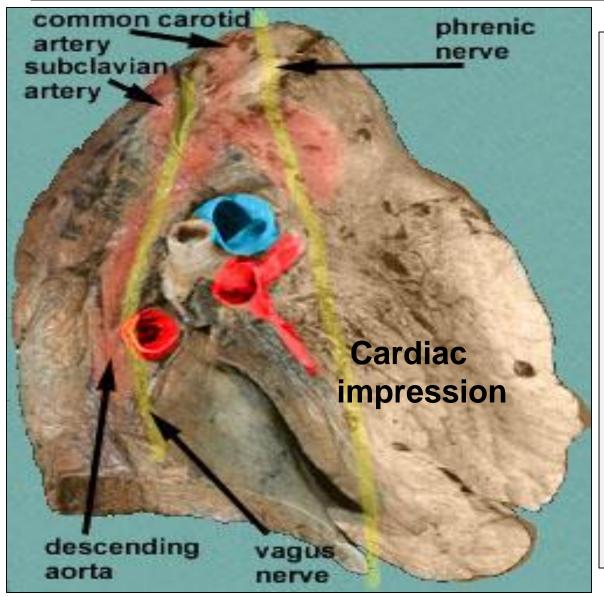


- On the mediastinal surface of the lung, you find these structures:
- Azygos vein and its arch (just posterior and over the root of the lung).
- Vagus nerve posterior to the root of the lung.
- Esophagus posterior to the root.
- Phrenic nerve anterior to the root of the lung.
- Cardiac impression: related to right atrium of the heart.
- Below hilum and in front of pulmonary ligament: groove for LV.C.

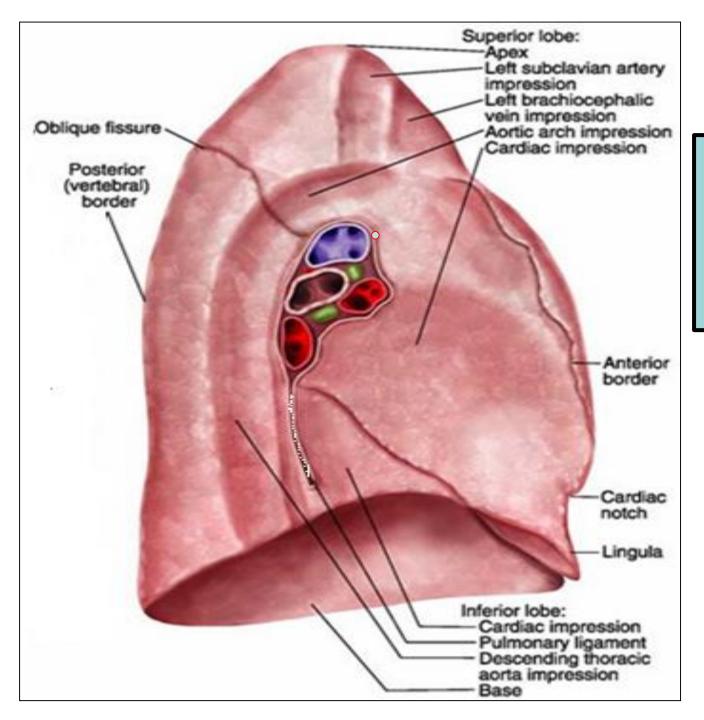
Mediastinal surface of the right lung



Mediastinal surface of left lung



- On the mediastinal surface of the lung, you will find these structures:
- Descending aorta Just posterior to the root.
- Vagus nerve posterior to the root of the lung.
- Arch of the aorta just over the root of lung.
- Groove for:
- Left common carotid a.
- Left subclavian artery.
- Phrenic nerve anterior to the root of the lung.
- Cardiac impression: related to left ventricle.



Mediastinal surface of the left lung

Blood supply of lung

- Bronchial arteries (From descending thoracic aorta).
 It supply oxygenated blood to bronchi, lung tissue & visceral pleura.
- Bronchial veins: drain into azygos & hemiazygos veins.
- Pulmonary artery which carries non-oxygenated blood from right ventricle to the lung alveoli.
- 2 pulmonary veins: carry <u>oxygenated blood</u> from <u>lung alveoli</u> to the <u>left atrium</u> of the heart.

Nerve Supply of the lung

 Pulmonary plexus at the root of lung....is formed of <u>autonomic nervous system.</u> (sympathetic & parasympathetic fibers).

1- Sympathetic Fibers:

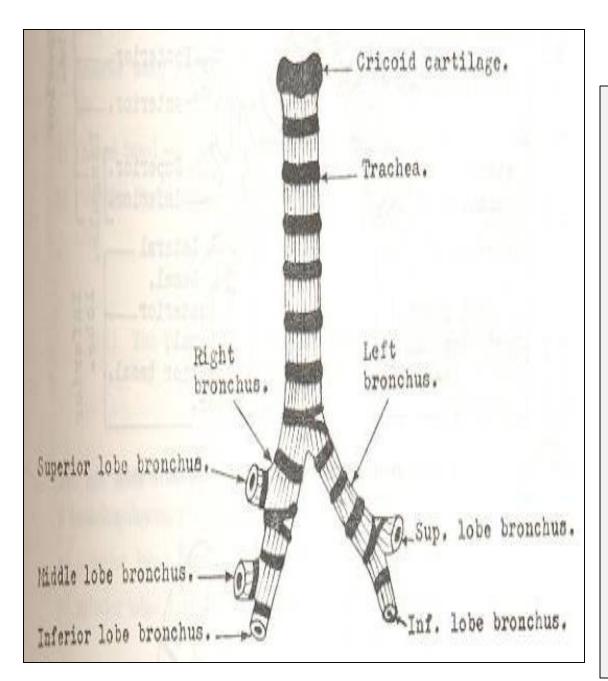
From ... Sympathetic trunk.

Action: broncho-dilatation and vasoconstriction.

2- Parasympathetic Fibers:

From.....Vagus nerve.

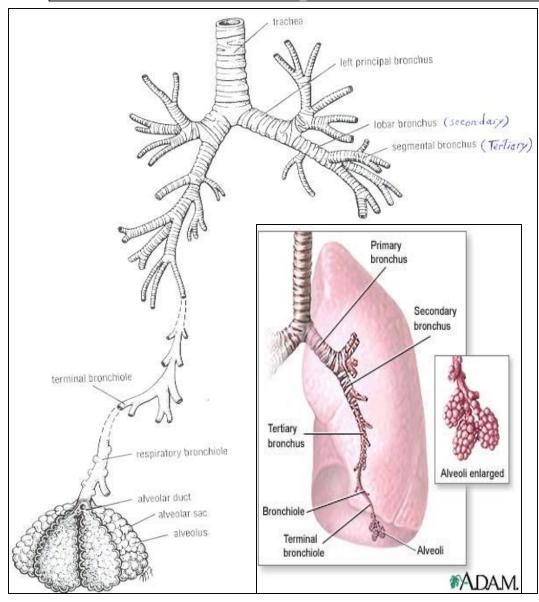
Action: Broncho-constriction and secretomotor to bronchial glands and vasodilatation.



Bronchi

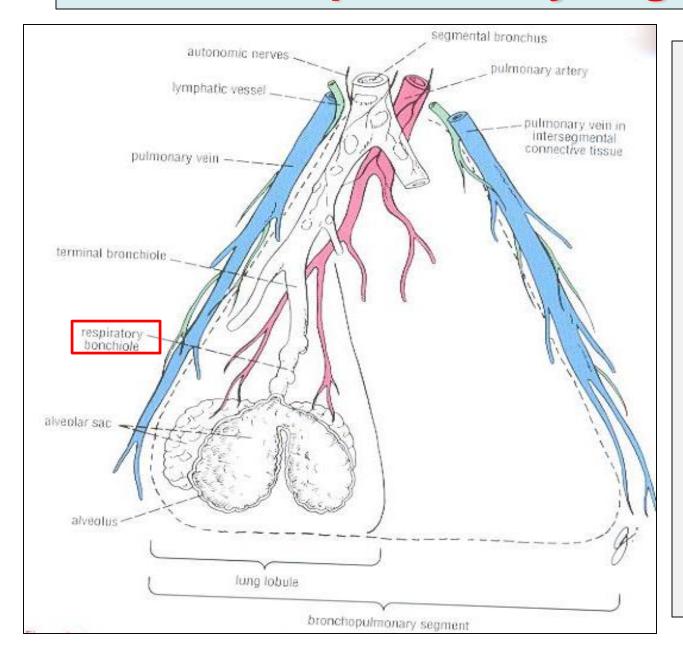
- The trachea divides into 2 main bronchi:
- Right main bronchus: which divides before entering the hilum, it gives: superior lobar (secondary) bronchus.
 On entering hilum, it divides into middle & inferior lobar bronchi.
- Left main bronchus:
 On entering hilum, it
 divides into superior
 & inferior lobar
 bronchi.

Bronchopulmonary segments



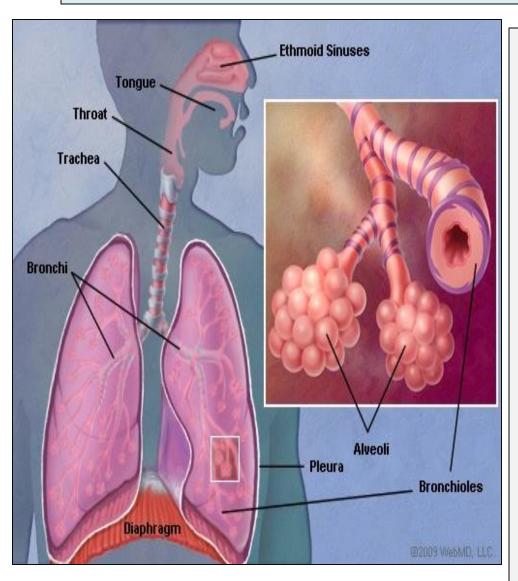
- These are the anatomical, functional, and surgical units of the lungs.
- Each lobar (secondary) bronchus gives segmental (tertiary) bronchi.
- Each segmental bronchus divides repeatedly into bronchioles.
- Bronchioles divide into terminal bronchioles, which show delicate outpouchings 'the respiratory bronchioles'.

Bronchopulmonary segments



- The respiratory bronchioles end by branching into alveolar ducts, which lead into alveolar sacs.
- The alveolar sacs consist of several alveoli.
- Each alveolus is surrounded by a network of blood capillaries for gas exchange.

Bronchopulmonary segments

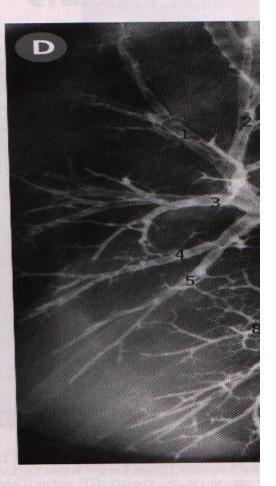


- The main characteristics of a bronchopulmonary segment:
- It is a subdivision of a lung lobe.
- It is pyramidal shaped, its apex toward the lung root.
- It is surrounded by connective tissue septa.
- It has a <u>segmental bronchus</u>, a <u>segmental artery</u>, <u>lymph</u> <u>vessels</u>, and <u>autonomic</u> nerves.
- The segmental vein lies in the inter- segmental connective tissue septa between the segments.
- A diseased segment can be removed surgically, because it is a structural unit.

nchopulmonary segments the left lung from the lateral side



Left bronchog



Superior lobe

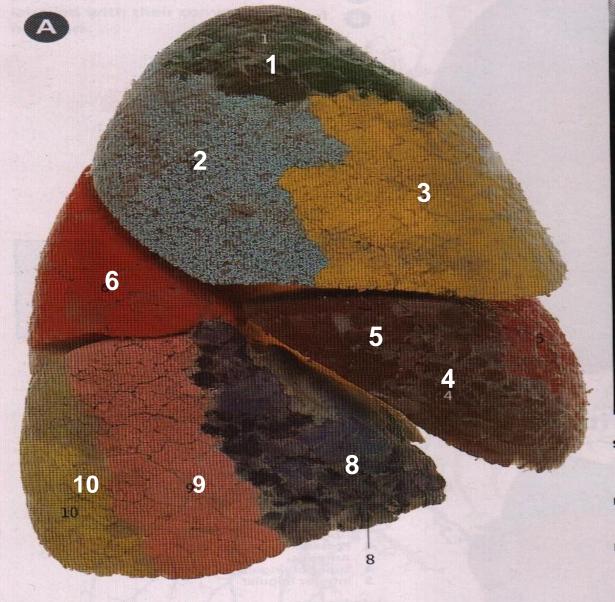
- 1 Apical
- 2 Posterior
- 3 Anterior
- 4 Superior lingular 5 Inferior lingular

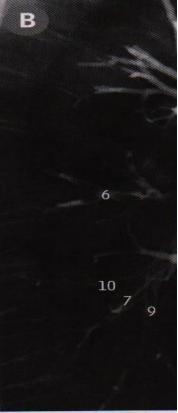
Inferior lobe

- 6 Apical (superior)7 Medial basal (cardiac)
- 8 Anterior basal
- 9 Lateral basal
- 10 Posterior basal

Bronchopulmonary segments of the right lung from the lateral side

Right brond





Superior lobe

- 1 Apical
- 2 Posterior
- 3 Anterior

Middle lobe

- 4 Lateral
- 5 Medial

Inferior lobe

- 6 Apical (superior)
- 7 Medial basal
- 8 Anterior basal
- 9 Lateral basal10 Posterior basal

