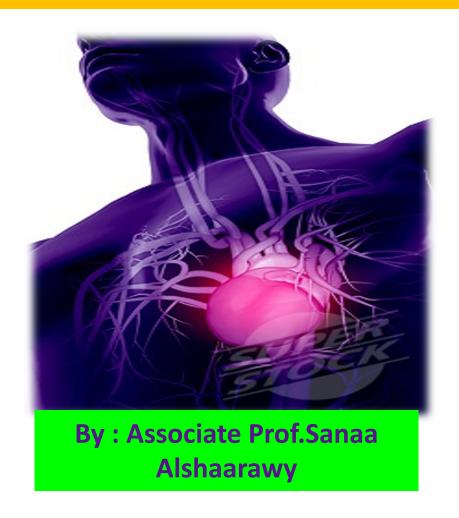
Major Blood Vessels-Veins



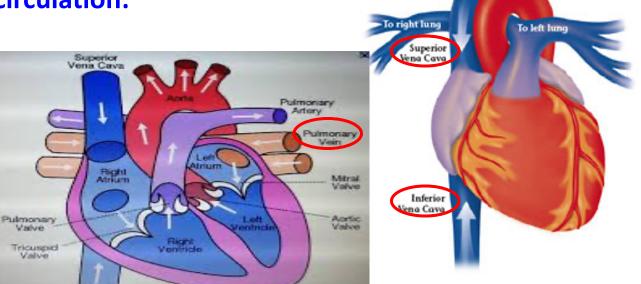
Objectives

At the end of the lecture, the student should be able to:

- ❖ Define the veins, and understand the general principle of the venous system.
- Describe the superior & inferior Vena Cava and their tributaries.
- List major veins and their tributaries in the body.
- Describe the Portal Vein.
- Describe the Portocaval Anastomosis.

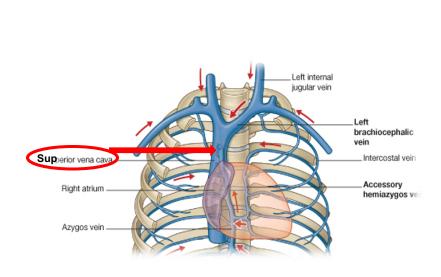
Veins

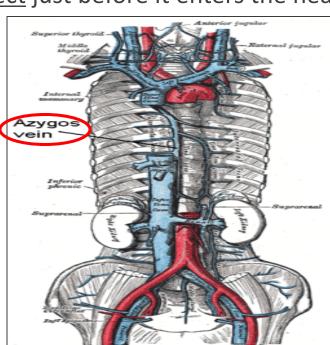
- Veins are blood vessels that bring blood back to the heart.
- All veins carry deoxygenated blood
 - with the <u>exception</u> of the <u>pulmonary veins</u> and <u>umbilical vein</u> (during fetal development).
- There are two types of veins:
 - Superficial veins: close to the surface of the body
 - ✓ NO corresponding arteries
 - Deep veins: found deeper in the body
 - ✓ With corresponding arteries
- Veins of the systemic circulation:
 - > Superior and Inferior vena cava with their tributaries
- Veins of the portal circulation:
 - Portal vein



Superior Vena Cava

- Formed by the union of the right and left Brachiocephalic veins.
 - Brachiocephalic veins are formed by the union of internal jugular and subclavian veins.
- Drains venous blood from :
 - Head &neck
 - Thoracic wall
 - Upper limbs
- It Passes downward and enter the right atrium.
- Receives azygos vein on its posterior aspect just before it enters the heart.

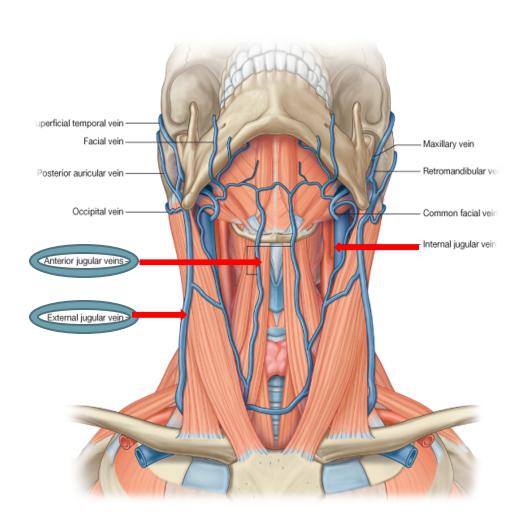




Veins of Head & Neck

Two divisions:

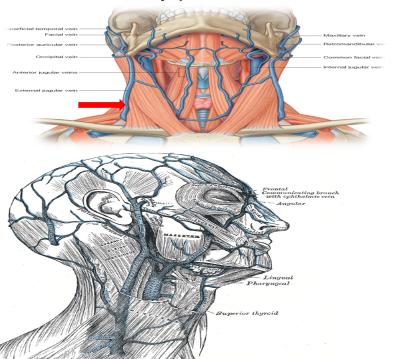
- > Superficial Veins
 - ✓ External Jugular veins
 - ✓ Anterior jugular veins
- Deep Veins
 - ✓ Internal Jugulars veins.

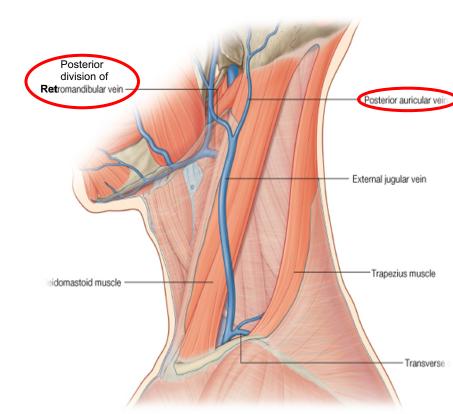


Superficial Veins of Head & Neck

External Jugular Vein:

- <u>Lies</u> superficial to the sternomastoid muscle
- **Begins** just behind the angle of mandible **by union of** posterior auricular vein with the posterior division of retromandibular vein.
- > It passes down the neck and it is the only tributary of the subclavian vein.
- > It drains blood from:
 - ✓ Outside of the skull
 - ✓ **Deep** parts of the **face.**

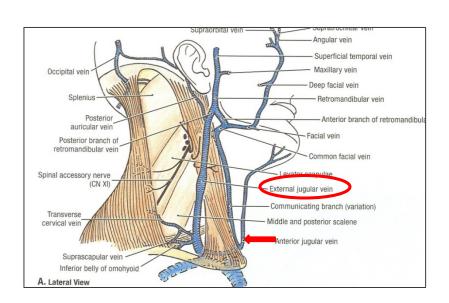


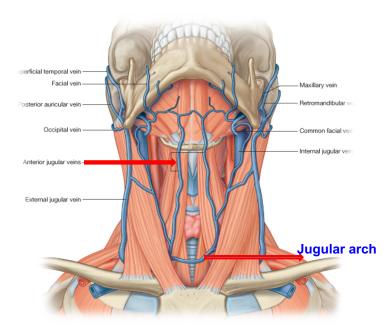


Superficial Veins of Head & Neck

Anterior jugular veins:

- It begins in the upper part of the neck by the union of the submental veins.
- lt descends close to the median line of the neck, medial to the sternomastoid.
- At the lower part of the neck, it passes laterally beneath (deep to) sternomastoid muscle to drain into the external jugular vein.
- > Just above the sternum the two anterior jugular veins communicate by a transverse vein to form the jugular arch.





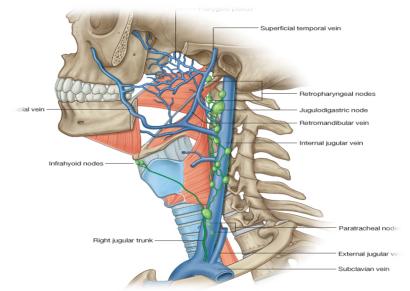
Deep Veins of Head & Neck

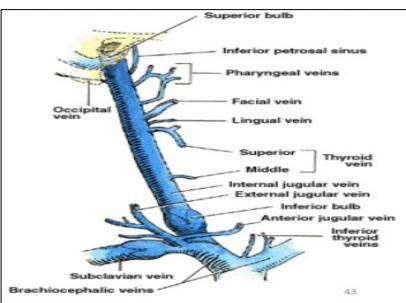
Internal Jugulars vein:

- Drains blood from the brain, face, head & neck.
- ➤ It descends in the neck along with the internal and common carotid arteries and vagus nerve, within the carotid sheath.
- Joins the subclavian vein to form the brachiocephalic vein.

Tributaries:

- ✓ Superior &middle thyroid.
- ✓ Lingual
- ✓ Facial
- ✓ Pharyngeal.
- ✓ Occipital veins
- Dural venous sinuses (inferior petrosal sinus).



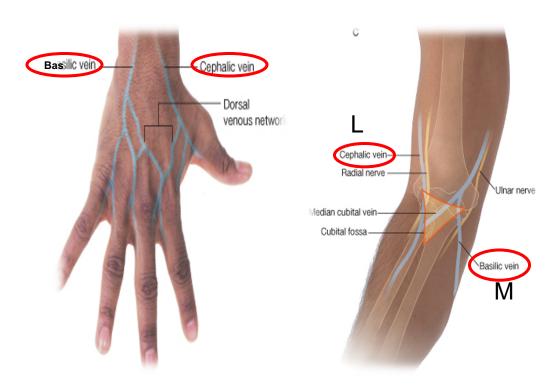


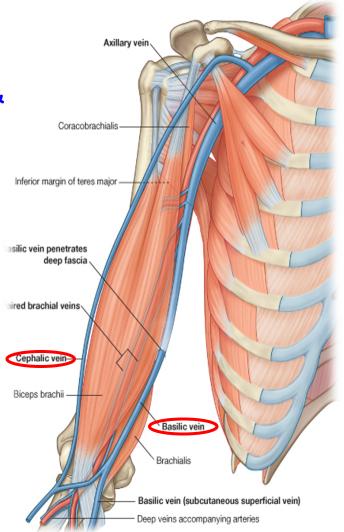
Veins of Upper Limbs

Two divisions:

Superficial Veins: Cephalic & Basilic

Deep Veins: Venae commitantes & Axillary.





Veins of Upper Limbs

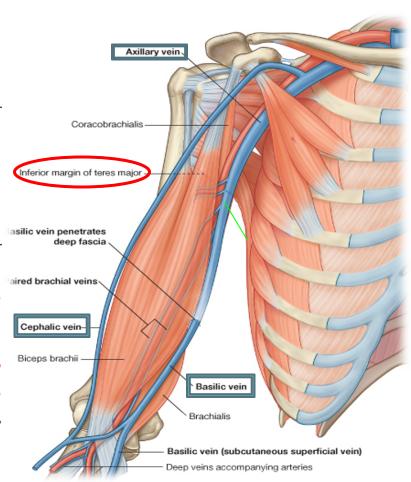
Superficial Veins

Cephalic vein

- Ascends in the <u>superficial fascia</u> on the <u>lateral side</u> of the <u>biceps</u>.
- Drains into the Axillary vein.

Basilic vein

- Ascends in the <u>superficial fascia</u> on the <u>medial side</u> of the <u>biceps</u>.
- Halfway up the arm, it pierces the deep fascia
- At the lower border of teres major; it joins the venae comitantes of the brachial artery to form the Axillary vein.



Veins of Upper Limbs

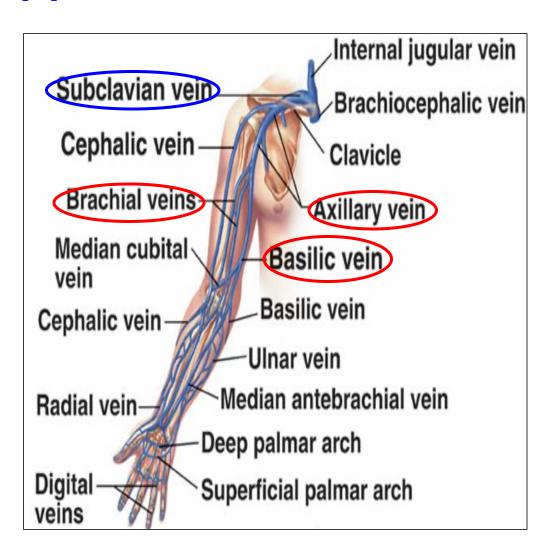
Deep Veins

Venae commitantes

Which accompany all the large arteries, usually in pairs.

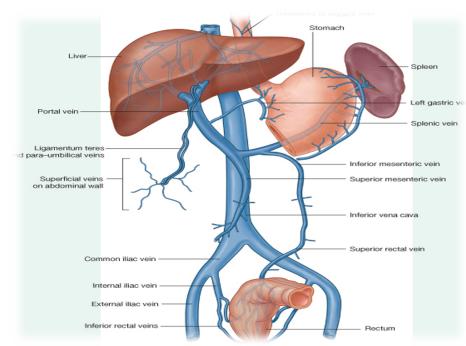
Axillary vein

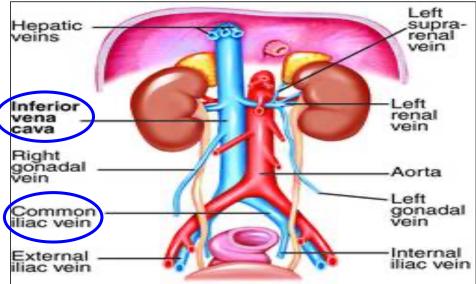
- Formed by the union of basilic vein and the venae comitantes(brachial veins) of the brachial artery.
- > It drains <u>finally into</u> the subclavian vein.



Inferior Vena Cava

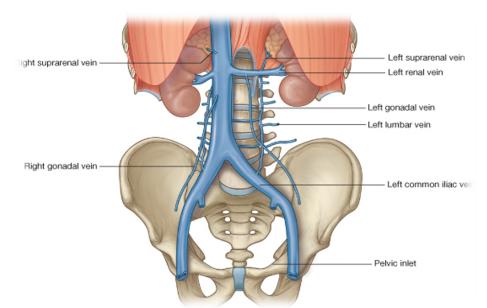
- Drains most of the blood from the body <u>below the diaphragm</u> to the right atrium.
- Formed by the union of the
 - 2 common iliac veins behind the right common iliac artery at the level of the 5th lumbar vertebra (L5).
- Ascends on the right side of aorta.
- Pierces the central tendon of diaphragm at the level of the 8th thoracic vertebra (T8).

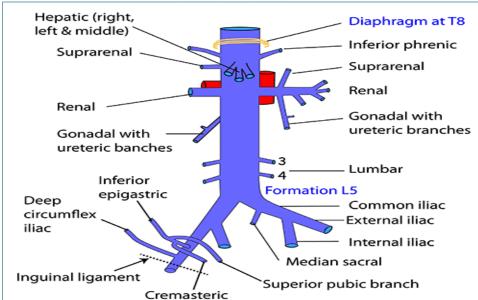




Tributaries of Inferior Vena Cava

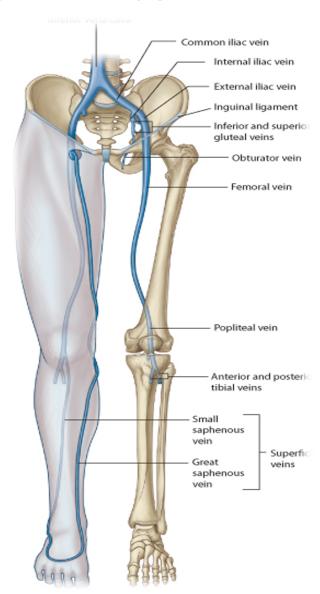
- Two common iliac veins
- Median <u>sacral</u> vein
- Four paired <u>lumbar</u> veins
- Right gonadal vein
 - the left vein <u>drains into</u> the left renal vein
- Paired <u>renal</u> veins
- Right <u>suprarenal</u> vein
 - the left vein <u>drains into</u> the left renal vein
- Hepatic veins
- Paired <u>inferior phrenic</u> veins.





Veins of Lower Limbs

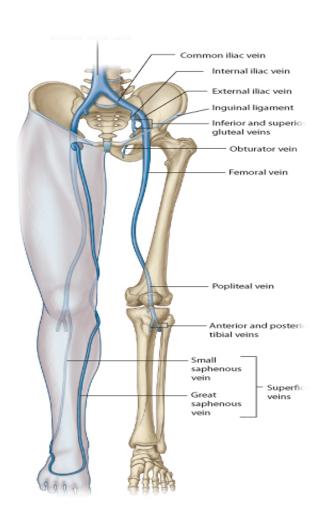
- Two divisions:
 - Superficial Veins
 - Deep Veins



Veins of Lower Limbs

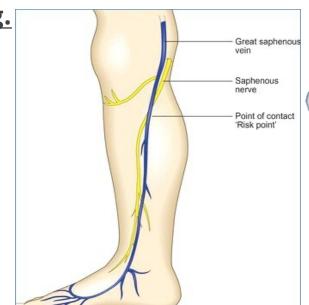
Superficial Veins

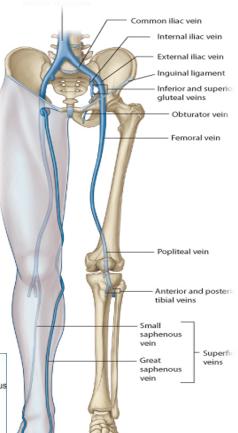
- Iying in the subcutaneous tissue.
- They are :
 - Great (long) saphenous vein
 - > Small (short) saphenous vein



Great Saphenous Vein

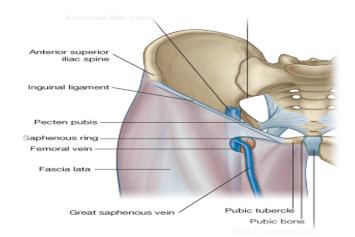
- The longest vein
- Begins from the medial end of the dorsal venous arch of the foot.
- Passes upward <u>in front</u> of the <u>medial</u> <u>malleolus</u> with the <u>saphenous nerve</u>.
- Then it <u>ascends</u> in accompany with the <u>saphenous nerve</u> in the <u>superficial fascia</u> over the <u>medial side of the leg.</u>

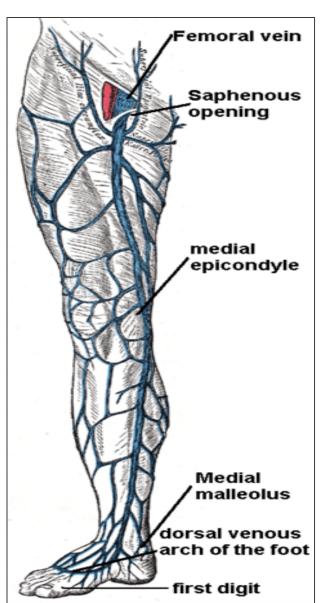




Great Saphenous Vein

- Ascends obliquely upwards, passing behind the knee and curves forward around the medial side of the thigh.
- Hooks through the lower part of the saphenous opening in the deep fascia to join the femoral vein about 1.5 in. (4 cm) below and lateral to the pubic tubercle.

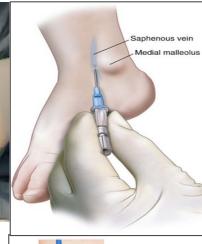


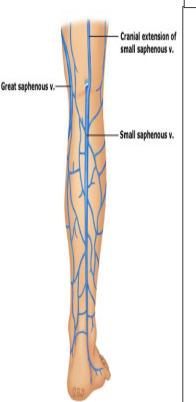


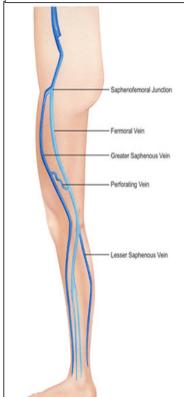
Great Saphenous Vein

- It is <u>connected to</u> the <u>small saphenous vein</u> by one or two branches that pass behind the knee.
- It is <u>connected to the deep veins by</u> numerous perforating veins.
- The perforating veins have valves which allow blood flow from superficial to deep veins.
- It is <u>clinically significant</u> in coronary bypass surgery and in intravenous delivery of fluids due to other venous collapse.
- So, <u>The great saphenous vein</u> is <u>used in</u> venous grafting and <u>saphenous vein cutdown</u> may be necessary for inserting the neddle or canula (take care of the <u>saphenous nerve</u>).



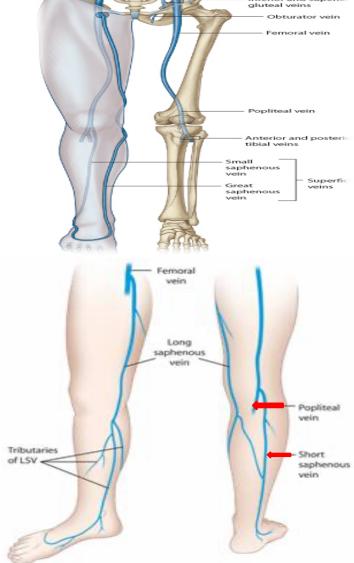






Small Saphenous Vein

- Arises from the lateral end of the dorsal venous arch.
- Ascends <u>behind</u> the <u>lateral malleolus</u> in company with the <u>sural nerve</u>.
- Ascends along the <u>lateral border</u> of the <u>tendocalcaneus</u> and then runs up to the <u>back of the leg.</u>
 - Pierces the deep fascia in the lower part of the popliteal fossa
 - Drains into the popliteal vein
 - Has numerous valves along its course.
 - Anastomosis freely with great saphenous vein.



Internal iliac vein External iliac vein Inguinal ligament

Veins of Lower Limbs

Deep vein

Incision site

These veins

Superficial

vein

Deep

vein

Normal

Perforating vein

Damaged

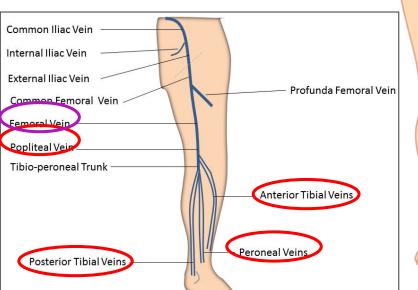
valve

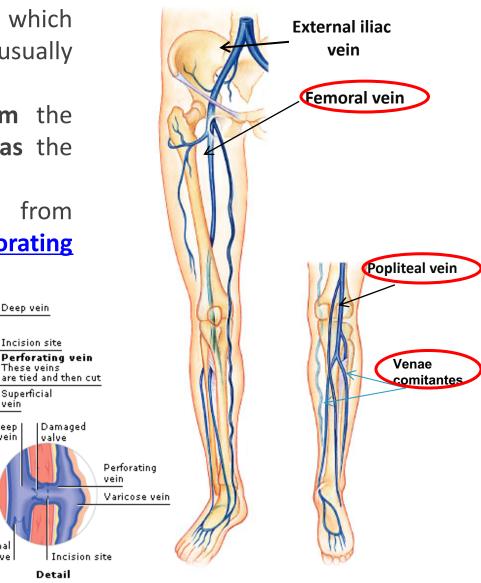
Detail

Deep Veins

- Comprise the **venae comitantes**, which accompany all the large arteries, usually in pairs.
- Venae comitantes unite to form the popliteal vein, which continues as the femoral vein.

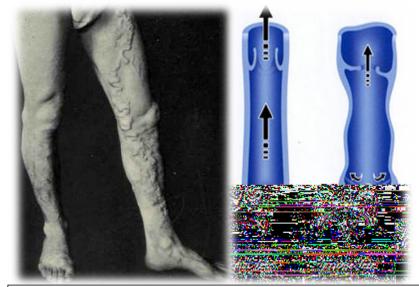
Deep veins Receive blood from superficial veins through perforating veins.

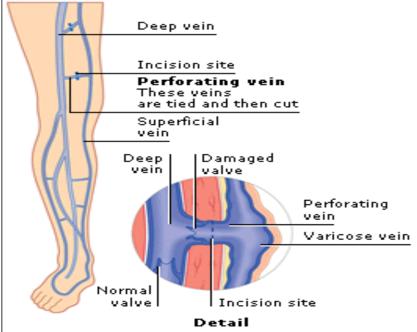




Mechanism of Venous Return from Lower Limb & Varicose Veins

- Much of the saphenous blood passes from superficial to deep veins through the perforating veins
- The blood is pumped upwards in the deep veins by the contraction of the calf muscles (calf pump).
- This action of 'calf pump' is assisted by the tight sleeve of deep fascia surrounding these muscles.
- Vericose veins: If the valves in the perforating veins become incompetent, the direction of blood flow is reversed and the veins become varicosed. Most common in posterior & medial parts of the lower limb, particularly in old people.





Portal Circulation

Inferior hypophyseal

A portal venous system is a series of veins or venules that directly connect two capillary beds (of arteriole & venule).

Examples of such systems include the <u>hepatic</u> portal vein and <u>hypophyseal</u> portal system.

Superior hypophyseal artery

Hypophyseal portal veins

Secondary plexus of the -hypothalamo-hypophyseal

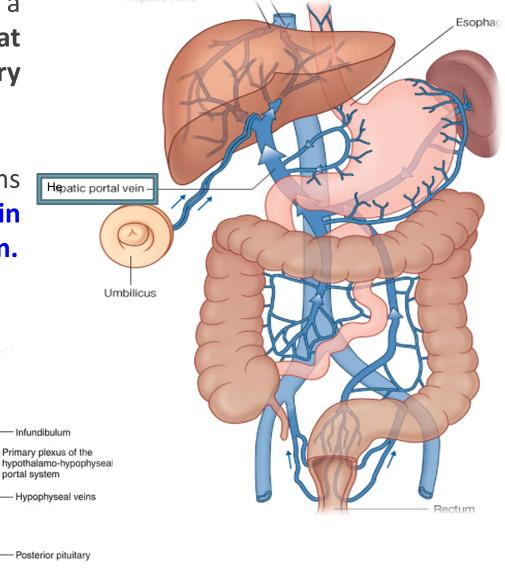
Anterior hypophyseal veir

Anterior pituitary

Hypophyseal vein

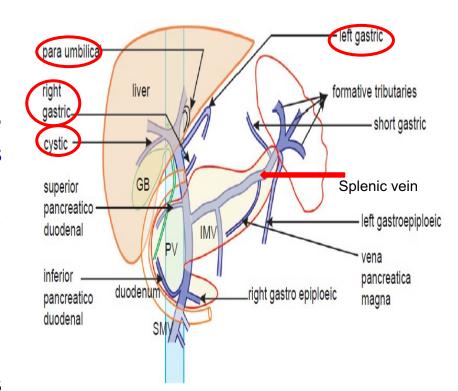
portal system

Hypothalamus



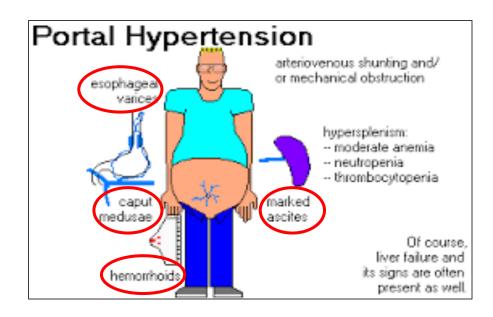
Hepatic Portal Vein

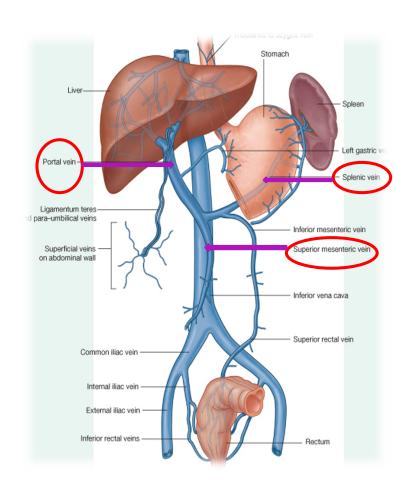
- Drains blood from the gastrointestinal tract and spleen to the liver.
- It is formed by the union of the superior mesenteric and splenic veins behind the neck of pancreas.
- Immediately before reaching the liver, the portal vein divides into right and left that enter the liver.
- **Tributaries:**
- Right and Left Gastric veins.
- Cystic vein from the gall bladder joins its right branch..
- Para-umbilical veins that drain veins from skin of anterior abdominal wall to the hepatic portal vein.



Portocaval Anastomosis

- A portocaval anastomosis (also known as portal systemic anastomosis) is a specific type of anastomosis that occurs between the veins of portal circulation and those of systemic circulation (IVC).
- The anastomotic channels become dilated (varicosed) in case of portal hypertension.





Sites of Portocaval Anastomosis

- Lower end of esophagus: (esophageal varices)
- Lower part of rectum: (Hemorrhoids)
- Para umbilical region : (Caput Medusae)
- Retroperitoneal : without any clinical sign.
- Patent ductus venosus (intrahepatic portosystemic shunt) during fetal development:

Portosystemic shunts may be **congenital** or may be **acquired** with diseases that cause portal hypertension.

Umbilical vein & portal vein shunt blood via patent ductus venosus into IVC.

(Hepatomegaly, ascitis and signs of portal hypertension).

