



blood circulation of
THE HEART

Khaleel Alyahya, PhD, MEd
www.khaleelalyahya.net



RESOURCES



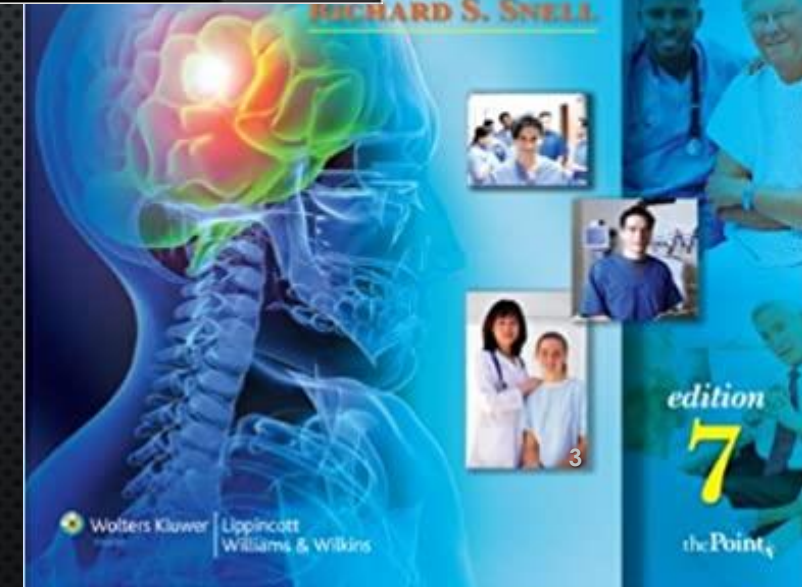
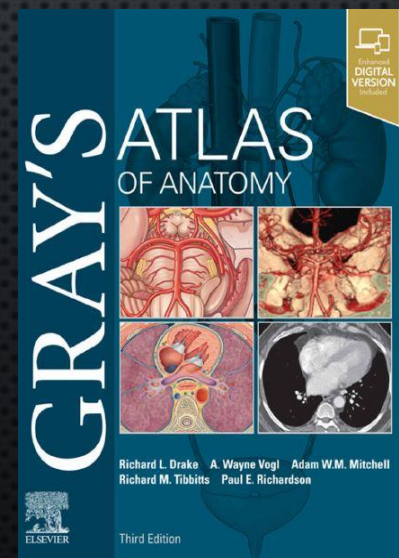
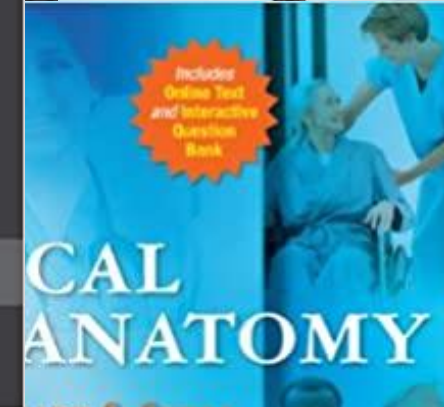
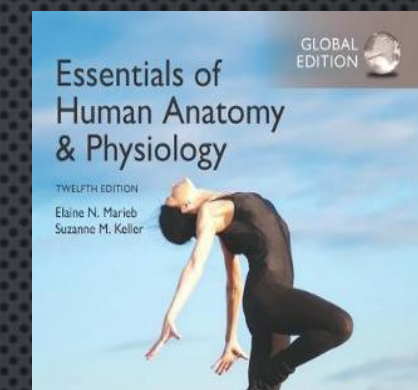
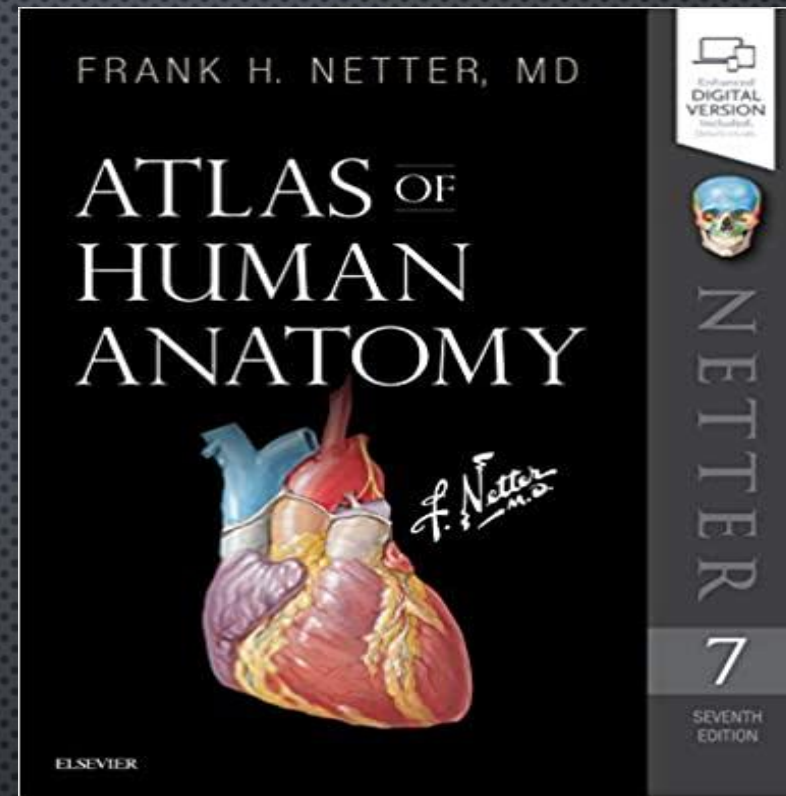
Essential of Human Anatomy & Physiology



Atlas of Human Anatomy



GRAY'S Atlas



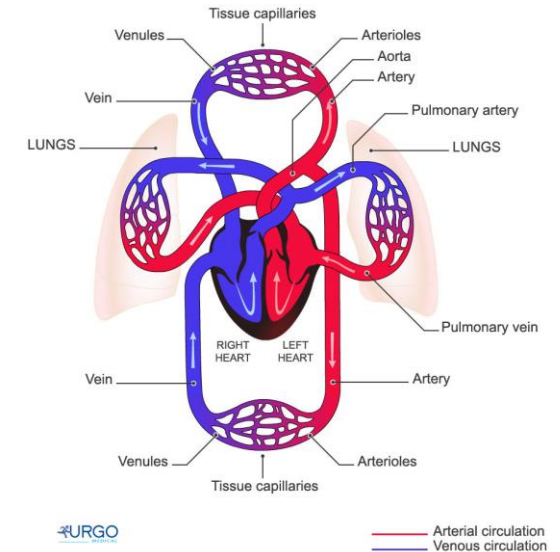
Objectives

- The arterial supply of the cardiac muscle regarding (origin, course, distribution and branches).
- The coronary anastomosis.
- The arterial supply to the conducting system of the heart.
- The venous drainage of the heart regarding (origin, tributaries and termination).
- Coronary artery disease, diagnoses and treatment.



Introduction

- The human heart is an organ that **pumps** blood throughout the body via the circulatory system.
- The blood **carries** oxygen, nutrients, cell wastes, hormones and many other substances vital for body homeostasis.
- The heart provides **forces** to move the blood around the body by the beating Heart.
- The coronary circulation refers to the vessels that **supply** and **drain** the heart.
- Coronary arteries are named due to the way they encircle the heart, much like a **crown**.

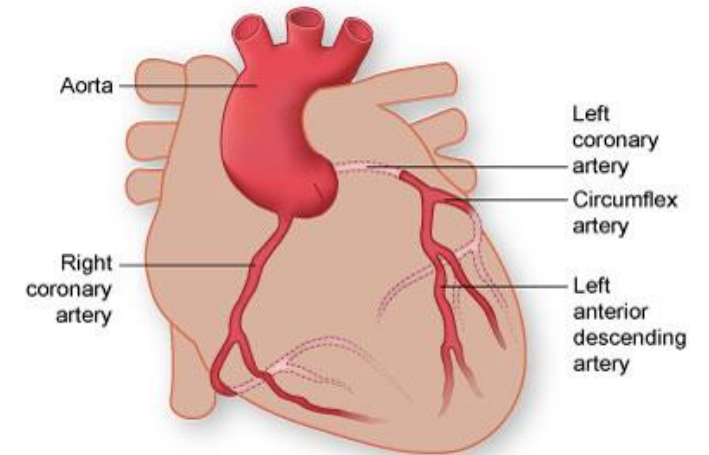




Arterial Supply

Introduction

- The arterial supply of the heart is provided by Two Coronary Arteries:
 - Right Coronary artery &
 - Left Coronary artery
- They are distributed over the cardiac surface, within the subepicardial connective tissue.
- They arise from the initial part of the ascending aorta (aortic sinuses), immediately above the aortic valve.
- The aortic sinuses are small openings found within the aorta behind the left and right flaps of the aortic valve.
- The aortic valve has three semilunar cusps, also known as the **sinuses of Valsalva**
- When the heart is relaxed, the back-flow of blood fills these valve pockets, therefore allowing blood to enter the coronary arteries.



Right Coronary Artery

- Arises from the **anterior aortic cusp** of the ascending aorta.
- Descends in the **right atrioventricular groove** between the right auricle and the pulmonary trunk.
- At the inferior border of the heart, it continues posteriorly to anastomose with the **left coronary**.
- It supplies the followings:
 - Right atrium
 - Right ventricle
 - Part of left atrium
 - Left ventricle and atrioventricular septum
 - Most of conducting system

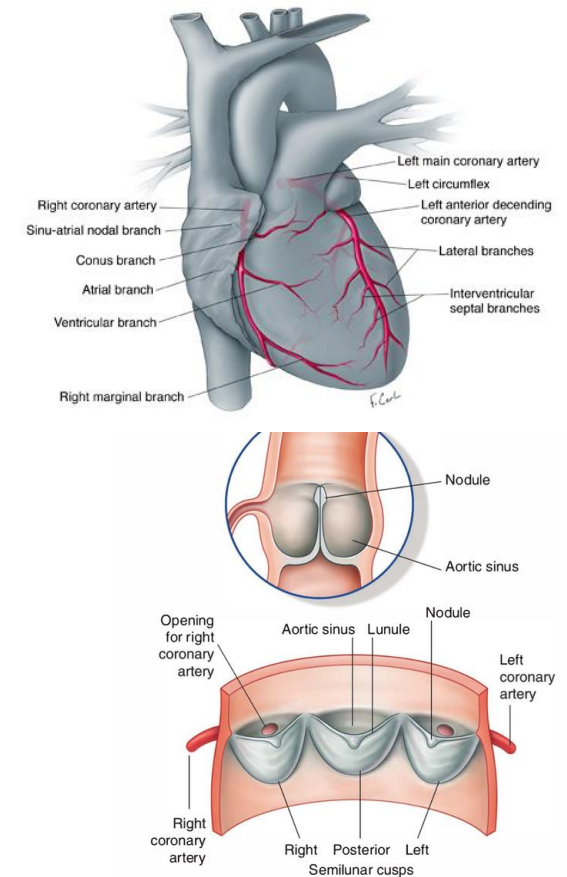
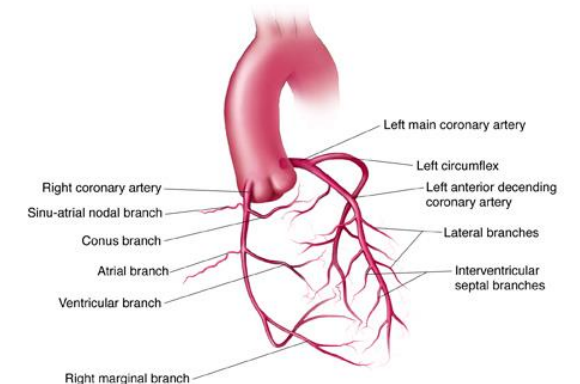
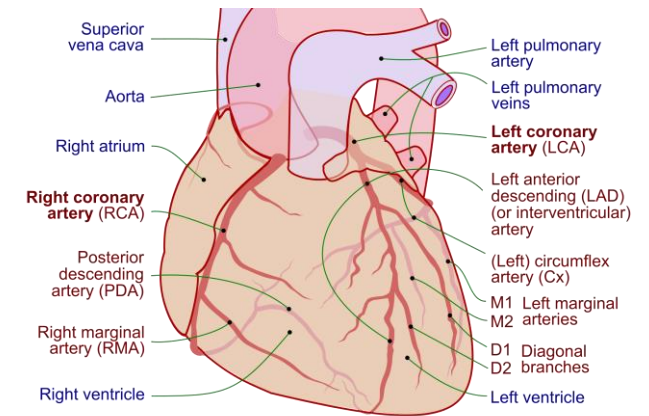


Fig. 3.68 Anterior view of the aortic valve.

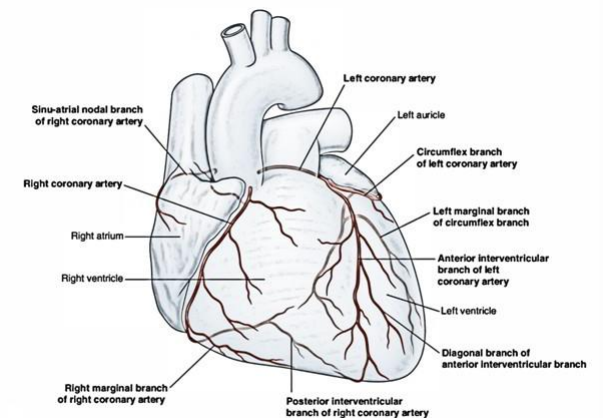
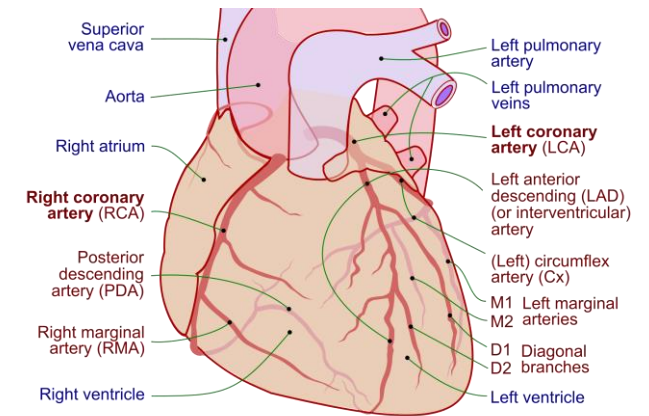
Branches of RCA

- Right Conus artery
 - Sometimes, it is called conus arteriosus branch
 - For infundibulum and upper part of anterior wall of the right ventricle.
- Right anterior ventricular branches
 - 2-3 branches supply anterior surface of the right ventricle.
- Atrial branch
 - Supply anterior and lateral surfaces of the right atrium.
 - One branch supplies posterior surface of both atria.
- Right marginal artery
 - It is the largest branch, runs along the lower margin of the sternocostal surface.
 - It is accompanied by the Small Cardiac vein.



Branches of RCA

- Artery of the Sinoatrial Node
 - Supplies the SAN and both atria.
 - In 35% it arises from the left coronary.
- Posterior ventricular branches
 - About 2 supply the diaphragmatic surface of the right ventricle.
- Posterior Interventricular (descending) artery
 - Accompanied by middle cardiac vein.
 - Lies in the posterior interventricular groove.
 - It supplies the right and left ventricles, including their inferior wall, posterior part of ventricular septum.



Left Coronary Artery

- The largest of the two coronary arteries.
- Arises from the left **posterior aortic cusp** of the ascending aorta.
- Descends:
 - Between the pulmonary trunk and the left auricle.
 - Run in the atrioventricular groove and then down to the apex of the heart.
 - Divides into two terminal branches:
 - Anterior Interventricular artery.
 - Circumflex artery.
 - Left Marginal artery

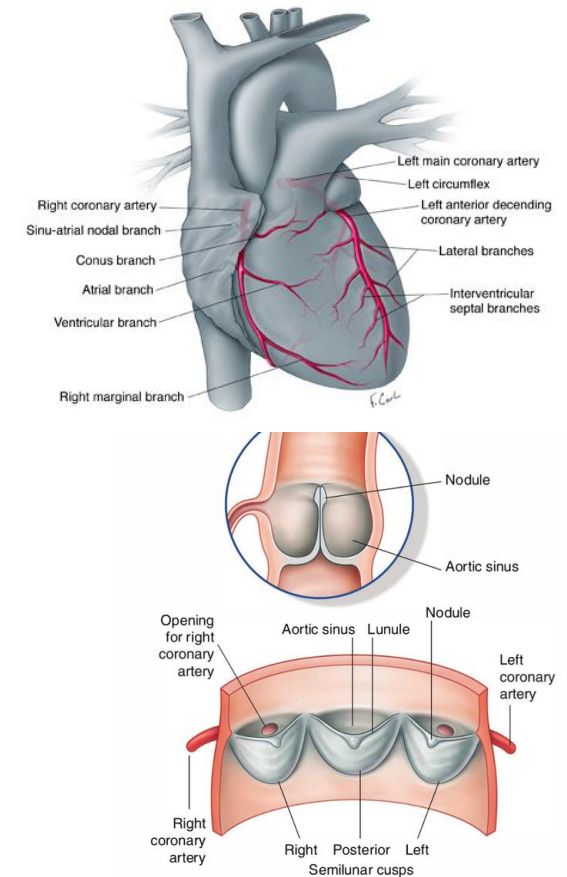
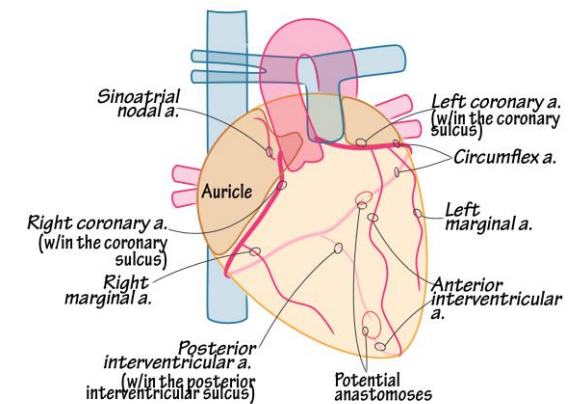
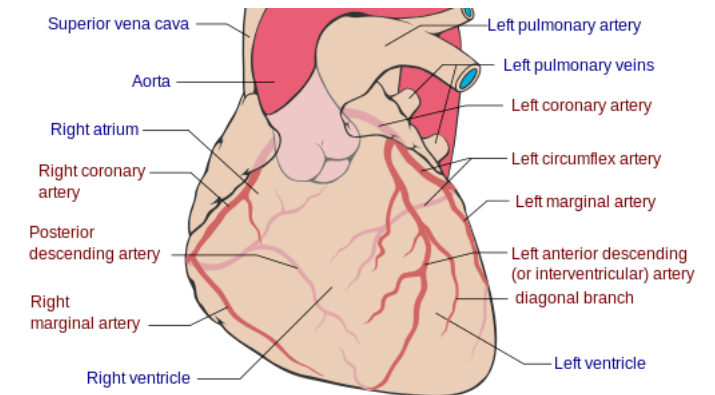


Fig. 3.68 Anterior view of the aortic valve.

Branches of LCA

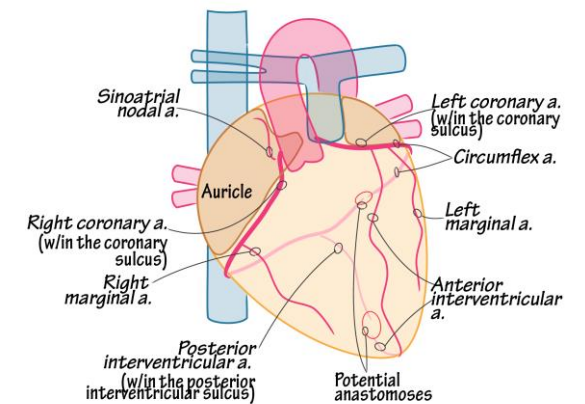
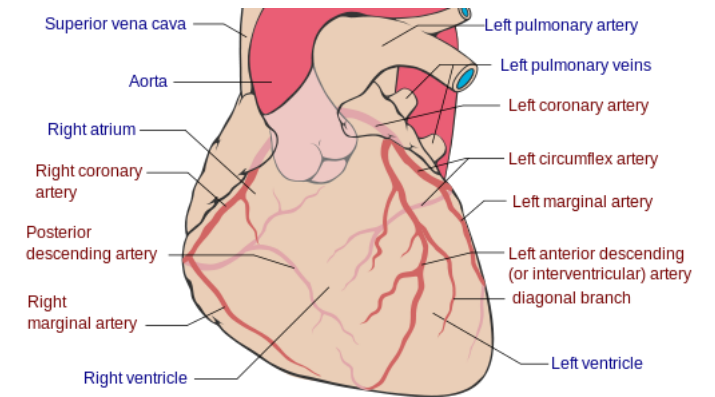
■ Anterior Interventricular Artery

- Descends in the anterior interventricular groove to the apex of the heart (accompanied by the great cardiac vein).
- In most individuals, it passes around the apex to anastomose with terminal branches of the right coronary.
- It supplies the right and left ventricles and anterior part of ventricular septum.
- It gives:
 1. Left conus artery for pulmonary conus.
 2. Anterior ventricular and posterior ventricular.
 - Supply left ventricle.
 3. Atrial branches.
 - Supply greater part of left atrium.
 4. Left diagonal artery
 - One of the ventricular branches or may arise from left coronary.



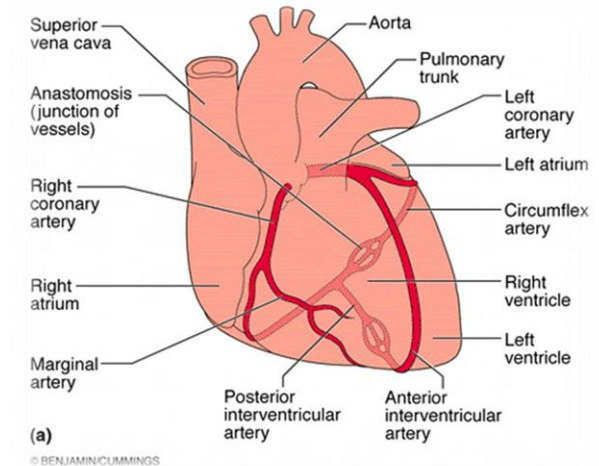
Branches of LCA

- **Circumflex Artery**
 - Winds around the left margin of the heart in the atrioventricular groove.
- **Left Marginal artery**
 - Supplies the left margin of the left ventricle down to the apex.



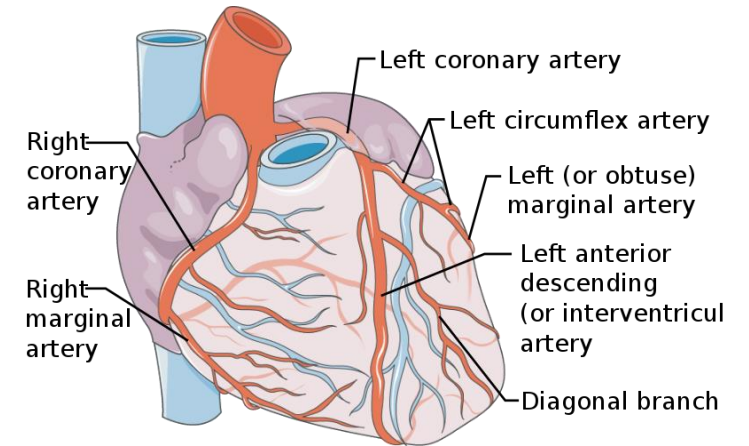
Variations of the Coronary Arteries

- Right Dominance:
 - In (90%) of population, the **posterior interventricular artery** is a branch of the **right coronary artery**.
- Left Dominance:
 - In the rest (10%), the **posterior interventricular artery** arises from the **circumflex branch** of the **left coronary artery**.



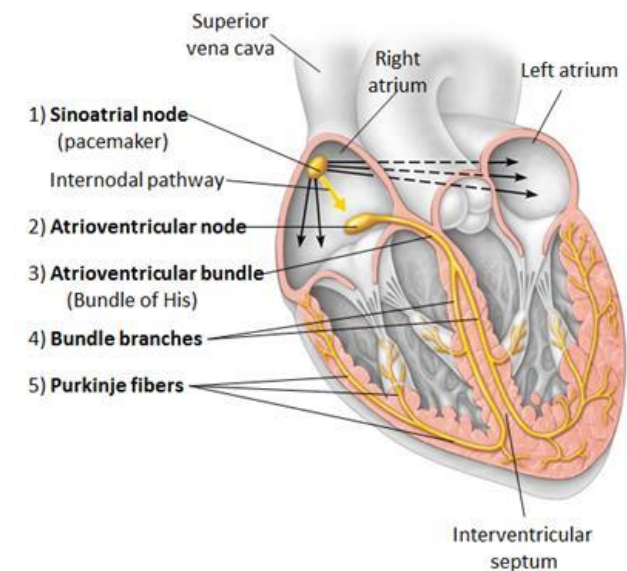
Variations of the Coronary Arteries

- In most people, the terminal branches of the right and left coronaries anastomose in the posterior part of the **interventricular groove**.
- However, this anastomoses is not large enough to provide adequate blood supply in case of **coronary occlusion**.



Arterial Supply of Conducting System

- Sinoatrial node (SAN), atrioventricular node (AVN) and atrioventricular bundles (AVB) are usually supplied by **right coronary**.
- Right bundle branch (RBB) of atrioventricular bundles is supplied by **left coronary**.
- Left bundle branch (LBB) of atrioventricular bundles is supplied by both **right** and **left coronary arteries**.

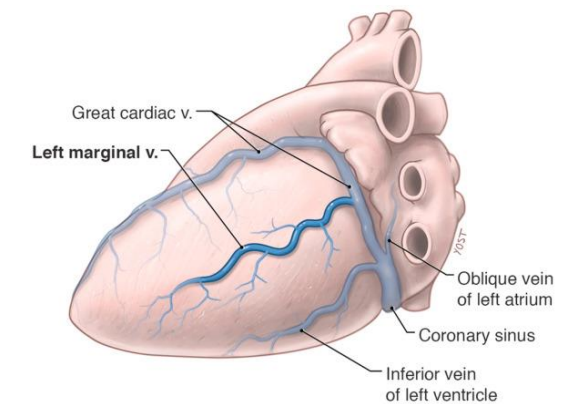
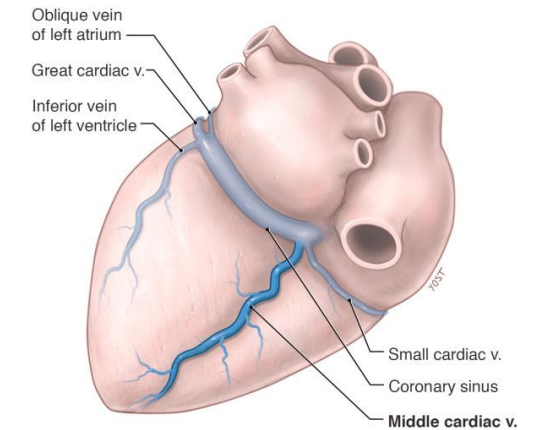




Venous Drainage

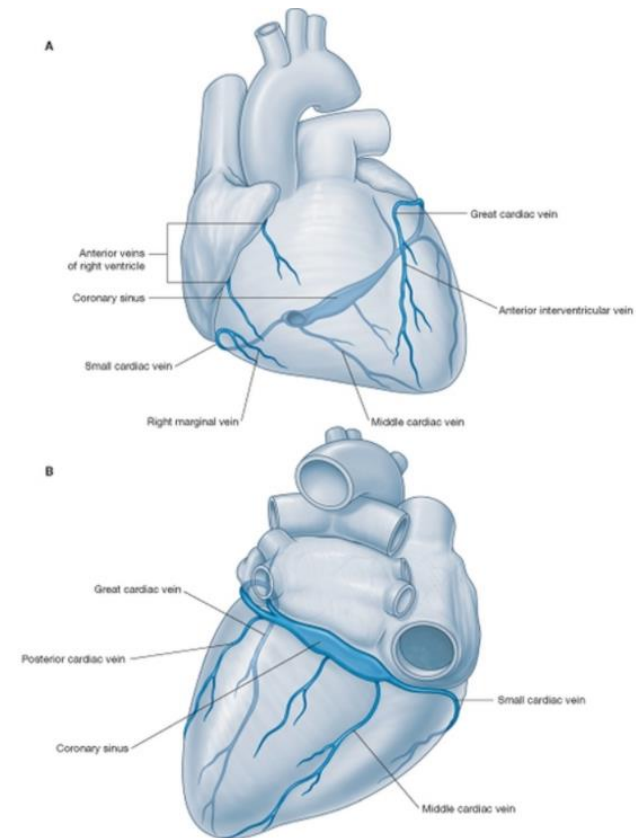
Coronary Sinus

- The main vein of the heart.
- It lies in the posterior part of the **atrioventricular groove**.
- Drains most of the venous blood of the heart.
- Origin:
 - It is the direct continuation of the Great Cardiac Vein.
- Tributaries:
 - Great cardiac vein
 - Middle cardiac vein
 - Small cardiac vein
 - Oblique vein of left atrium (vein of Marshall).
- Termination:
 - It empties into right atrium.
 - Its opening is inferior and to the left of the IVC opening.
 - It is guarded by a valve.



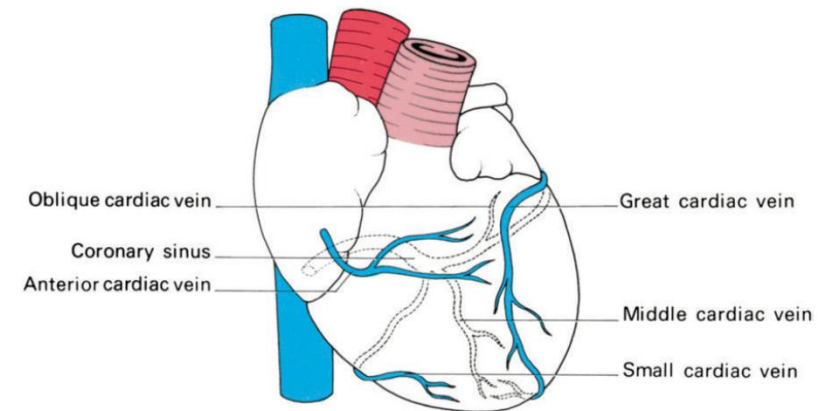
Cardiac Veins

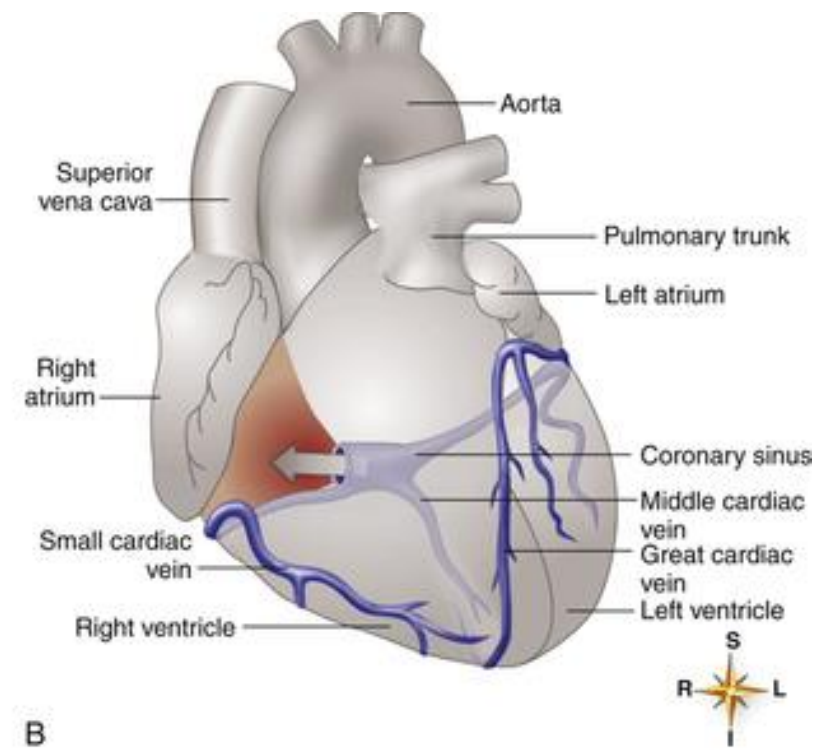
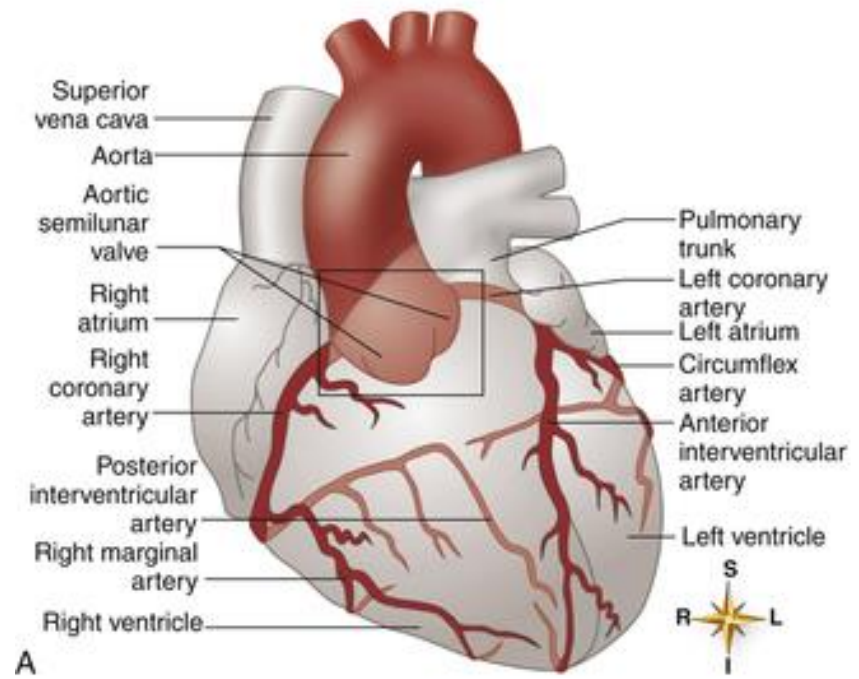
- Great cardiac vein
 - The main tributary of coronary sinus.
 - It originates at the apex of the heart and follows the anterior interventricular groove into the coronary sulcus and around the left side of the heart to join the coronary sinus.
- Middle cardiac vein
 - Located on the posterior surface of the heart.
 - Drains the right side of the heart.
- Small cardiac vein
 - Located on the anterior surface of the heart.
 - It passes around the right side of the heart to join the coronary sinus.
- The final two cardiac veins
 - Left marginal vein on the left posterior side.
 - Left posterior ventricular vein which runs along the posterior interventricular sulcus to join the coronary sinus.



Veins Draining Outside Coronary Sinus

- Anterior cardiac veins
 - Open directly into the right atrium.
- Venae Cordis minime (small cardiac veins)
 - Open into the heart chambers.



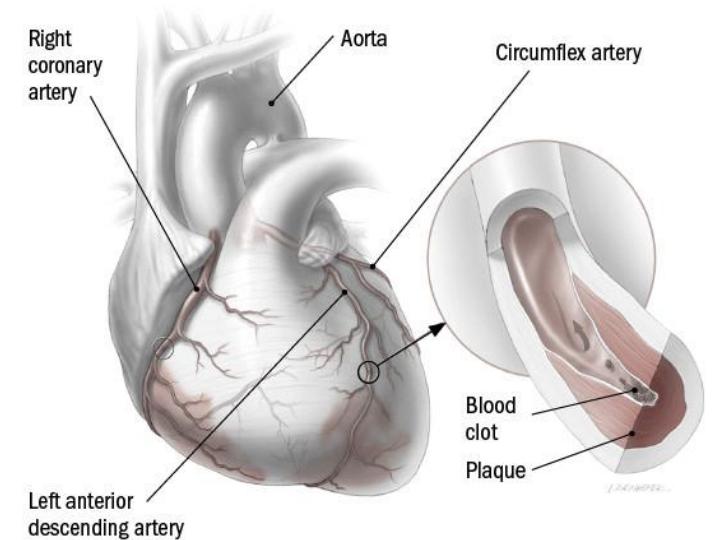




Clinical Notes

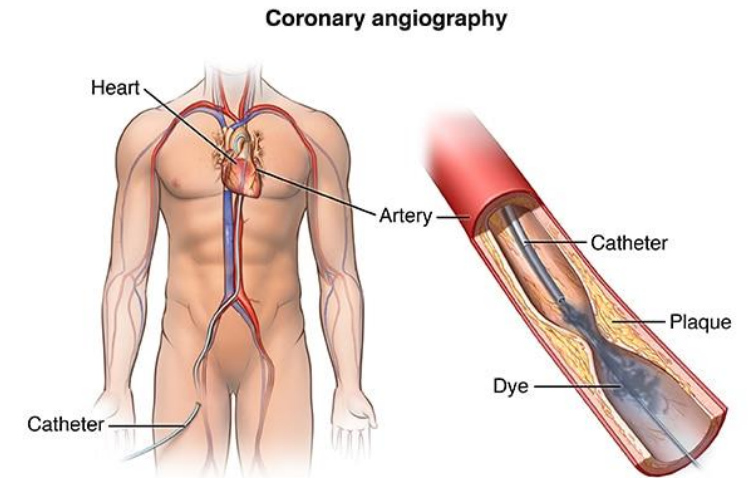
Coronary Artery Disease

- It is also called **coronary heart disease**
- It occurs when the arteries that supply blood to heart muscle (the coronary arteries) become hardened and narrowed.
- This is due to **atherosclerosis** which is the buildup of cholesterol-rich **plaque** on the inner walls of the vessels.
- Hardened plaque narrows the coronary arteries and reduces the flow of oxygen-rich blood to the heart.
- This reduced blood supply to the heart muscle is called **ischemia**.
- When the heart muscle doesn't get enough blood, chest pain known as **angina** may occur.
- Angina is the most common symptom of CAD.
- As the disease progresses, CAD can lead to ischemic heart disease.
- CAD may also result in **myocardial infarction**.



Diagnose and Treatment

- A blockage in a coronary artery can be rapidly identified by performing a coronary **angiogram**.
- The imaging modality involves the insertion of a **catheter** into the aorta via the femoral artery.
- A contrast dye is injected into the coronary arteries and x-ray based imaging is then used to visualise the coronary arteries and any blockage that may be present.
- Immediate treatment of a blockage can be performed by way of a coronary angioplasty, which involves the inflation of a balloon within the affected artery.
- The balloon pushes aside the atherosclerotic plaque and restores the blood flow to the myocardium.
- The artery may then be supported by the addition of an intravascular stent to maintain its volume.





QUESTIONS?

ALKHALEEL@KSU.EDU.SA