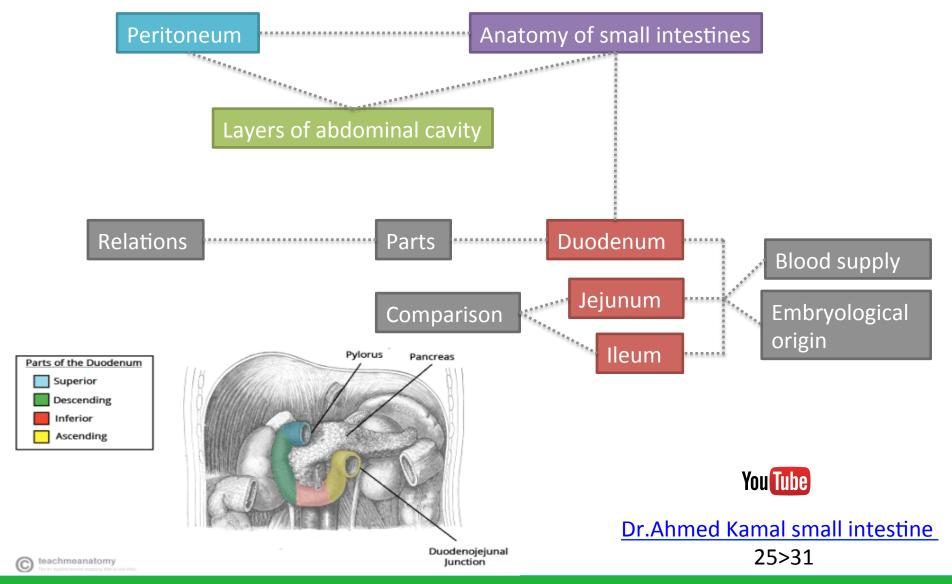


MIND MAP





Peritoneum

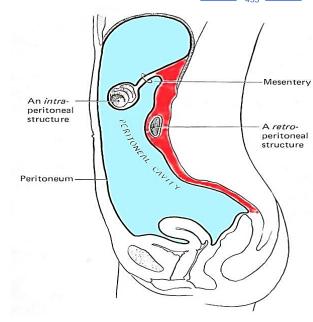
Reatony Team

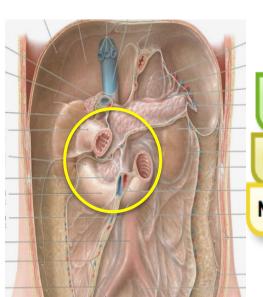
*Will be discuss in details in omentum lecture

- Fluid filled sac in the abdominal cavity.
- Some Structures of the abdomen are invaginated into it.
- Function: facilitate movement (lubricate) of the abdominal structures.

Peritoneal structures: stomach, liver, jejunum, ileum, transverse colon.

Retroperitoneal structures: **duodenum**, pancreas, ascending colon, descending colon, kidneys, aorta, inferior vena cava,...etc.





small intestine

DUODENUM

Retro peritoneal

NO MESENTERY

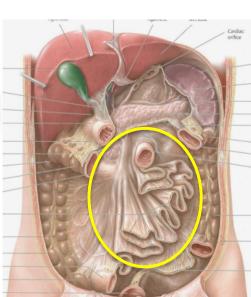
FIXED

JEJUNUM & ILEUM

Peritoneal

WITH MESENTERY

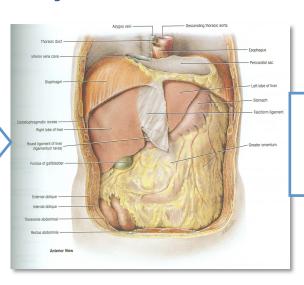
FREE (MOVABLE)



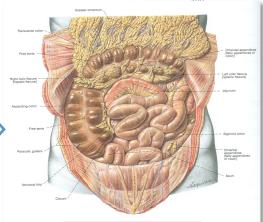
Layers of the abdomen



Remove abdominal wall

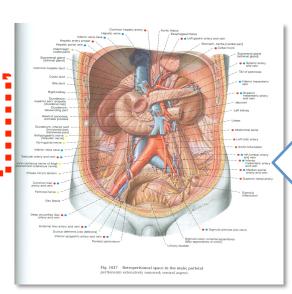


Remove greater omentum

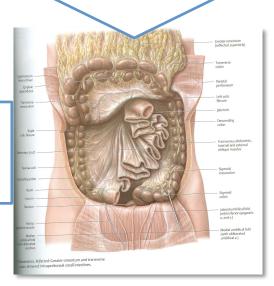


Remove jejunum and ileum

Retroperitoneal organs can now be seen



Remove all peritoneum



Duodenum



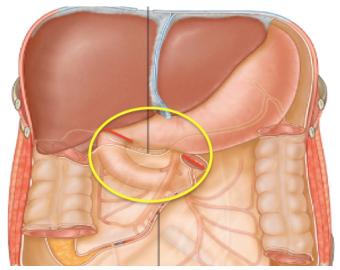
C-shaped loop, 10 inches long, begins at pyloro-duodenal junction, ends at duodeno-jejunal flexure, retroperitoneal, and has 4 parts.

Embryological origin: foregut, and midgut

Arterial supply: coeliac, and superior mesenteric

Venous Drainage to: Superior mesenteric& Portal veins.

Lymphatic drainage: coeliac, and superior mesenteric



Horizontal (Superior)

2nd part:

Length: 3 in

Level:

L1

Descending

to L3 1st part:

Length: 2 inches

Level: L1 (transpyloric plane)

PARTS

Horizontal

3rd part:

Length: 4 inches

Level: L3 (subcostal plane)

duodeno-jejunal flexure

4th part:

Length: 1 in Level: L3

to

pyloro-

duodenal junction

L2

Ascending

1st part relations:

Most common site for ulcer



Posterior (most commonly injured during rupture of ulcer):

- Bile duct.
- Gastroduodenal artery.
- Portal vein.
- Neck of pancreas.

Anterior:

Liver

2nd part relations:

Lateral:

Right colic flexure.

Posterior:

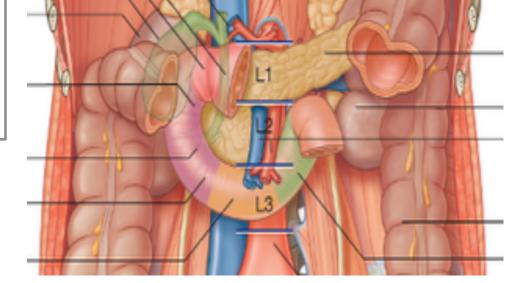
Right kidney.

Medial:

Pancreas.

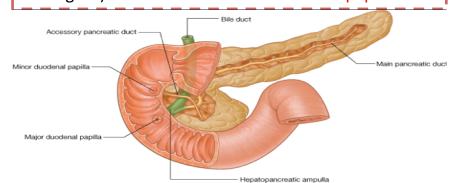
Anterior:

- Liver.
- Transverse colon.
- Other parts of small intestines.



Openings in 2nd part of duodenum:

- Common opening of bile duct & main pancreatic duct: on summit of major duodenal papilla.
- Opening of accessory pancreatic duct (one inch higher): on summit of minor duodenal papilla.



3rd part relations:

Anterior:

- Other parts of <u>S</u>mall intestines.
- <u>Superior mesenteric</u> vessels.

Posterior:

- Right psoas major.
- Inferior vena cava.
- Abdominal aorta.
- Inferior mesenteric vessels.

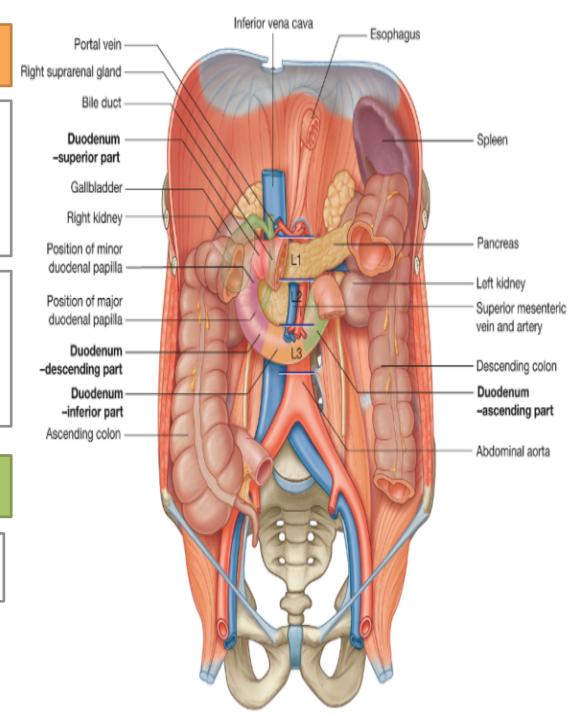
4th part relations:

Anterior:

Other parts of small intestines

Posterior:

Left psoas major



Jejunum and ileum

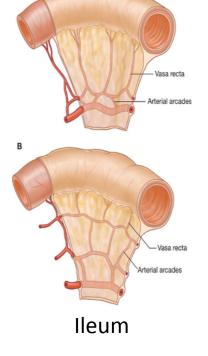


Coiled tube, 6 meters (20 feet) long, begins at duodeno-jejunal flexure, terminate at ileocaecal junction, and are peritoneal organs (fold is called mesentery of small intestines).

Embryological origin: midgut

Arterial supply: superior mesenteric artery & vein Lymphatic drainage: superior mesenteric lymph nodes

Jejunum		lleum
Shorter (proximal 2/5)	Length	Longer (distal 3/5)
Wider	Diameter	Narrower
Thicker (more plicae circulares)*	Wall	Thinner (less plica circulares)
Dark red (more vascular)	Appearance	Light red (less vascular)
Less arcades (long terminal branches)	Vessels	More arcades (short terminal branches)
Small amount away intestinal border	Mesenteric fat	Large amount near intestinal border
Few aggregations	Lymphoid tissue	Numerous aggregations (Peyer's patches)



Jejunum

^{*} Folded of the wall to increase surface area

MCQs



1- Which one of the following is anterior to the third part of duodenum?

- A. Superior mesenteric vessels.
- B. Right kidney.
- C. Right posas major muscle.
- D. Abdominal aorta.

2- Which one of the following structures could be injured in case of perforated duodenal ulcer?

- A. Right kidney.
- B. Right colic flexure.
- C. Gastroduodenal artery.
- D. Inferior mesenteric vessels.

3- which part of duodenum is descending?

- A. 1st part.
- B. 2nd part.
- C. 3rd part.
- D. 4th part.

4- Blood supply to the duodenum comes from?

- A. Superior mesenteric artery.
- B. Coeliac artery.
- C. Inferior mesenteric artery.
- D. A & B.

5- embryological origin of jejunum and ileum is?

- A. Foregut.
- B. Midgut.
- C. Hindgut.
- D. Ectoderm.

6- Regarding the lymphoid tissue in small intestines which is NOT correct?

- Peyer's patches can be found only in the ileum.
- B. Few aggregations can be found in the jejunum.
- C. Aggregations are more in the ileum.
- D. Peyer's patches can be found throughout the small intestines.



GOOD LUCK

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