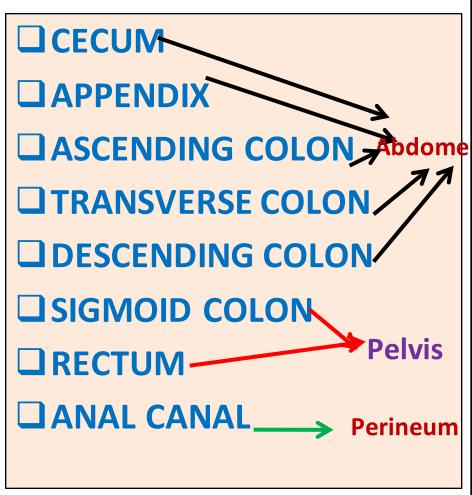


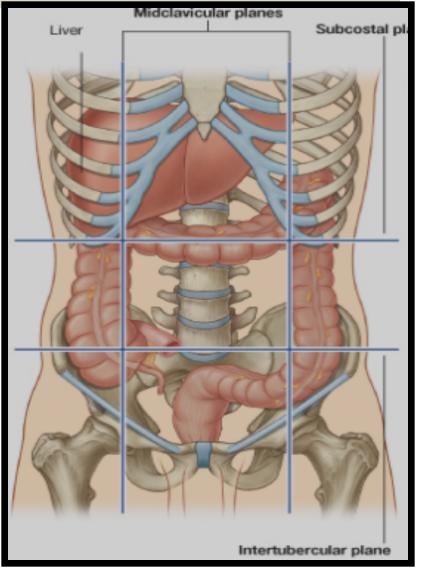
Dr. Ahmed Fathalla Ibrahim Dr. Jamila El-Medany

OBJECTIVES

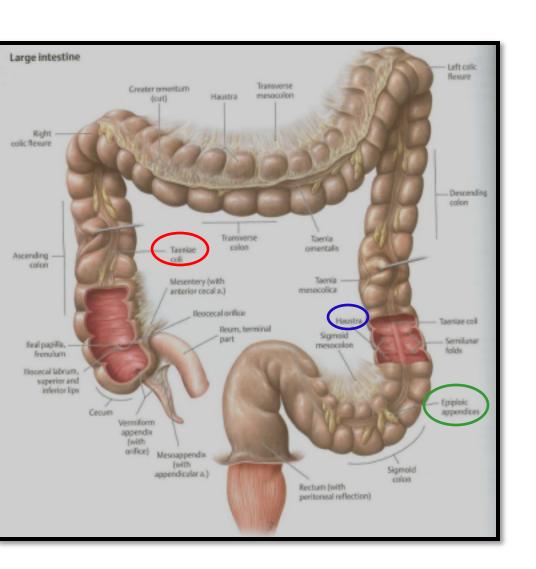
At the end of the lecture, students should: ☐ List the different parts of large intestine. ☐ List the characteristic features of colon. **■** Describe the anatomy of different parts of large intestine regarding: the surface anatomy, peritoneal covering, relations, arterial & nerve supply.

Parts of Large Intestine





Characteristics of COLON (NOT FOUND IN RECTUM & ANAL CANAL



1. Taeniae coli:

(3) longitudinal muscle bands

2. Sacculations (Haustra):

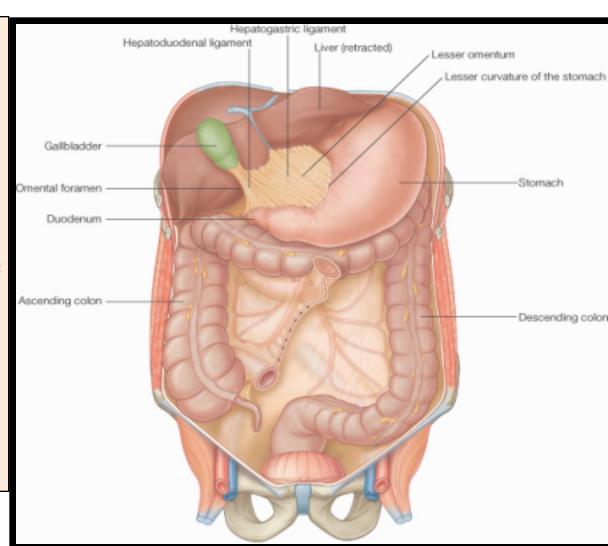
Because the Taeniae coli are shorter than large intestine

3. Epiploic Appendices: Short peritoneal folds filled with fat

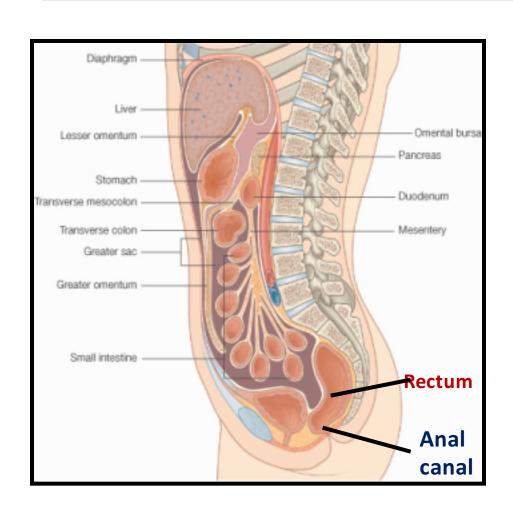
Peritoneal Covering

■ PARTS WITH MESENTERY:

- 1. Transverse colon
- 2. Sigmoid colon
- 3. Appendix
- 4. Cecum
- RETROPERITONEAL PARTS:
- 1. Ascending colon
- 2. Descending colon
- 3. Upper 2/3 of rectum



Peritoneal Covering

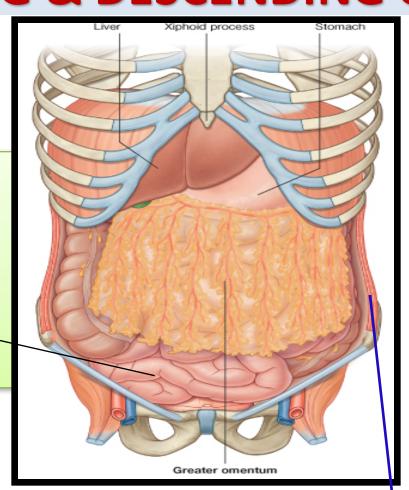


PARTS DEVOID OF PERITONEAL COVERING:

- 1. Lower 1/3 of rectum
- 2. Anal canal

Anterior Relations of (CECUM – ASCENDING & DESCENDING COLONS)

□Greater
omentum
□Coils of small
intestine



☐Anterior abdominal wall

Posterior Relations (CECUM – ASCENDING & DESCENDING COLONS)

□Cecum:

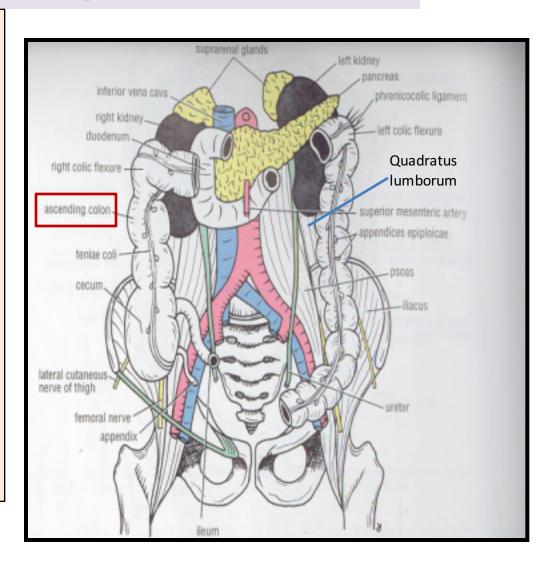
- 1. Psoas major
- 2. Iliacus

□Ascending colon:

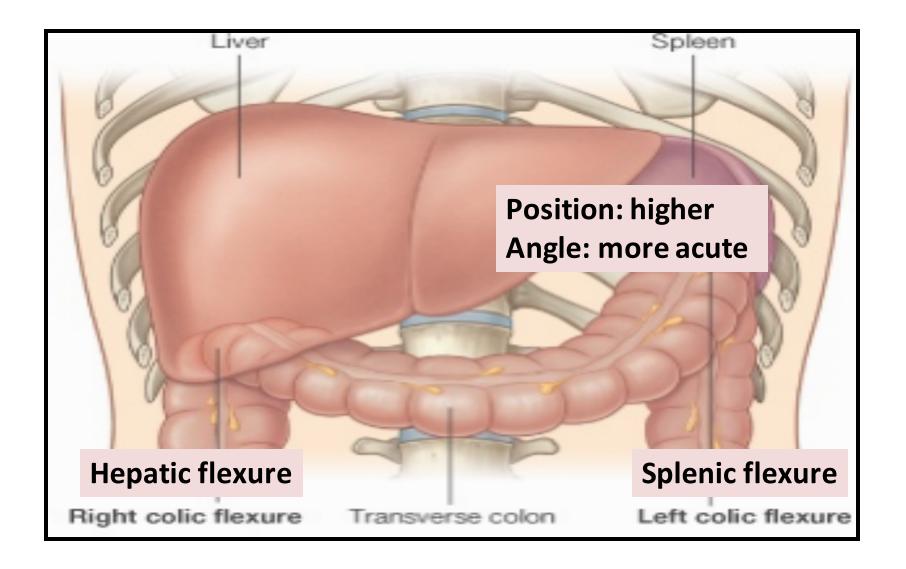
- 1. Iliacus
- 2. Quadratus lumborum
- 3. Right kidney.

□Descending colon:

- Left kidney
- 2. Quadratus lumborum
- 3. Iliacus



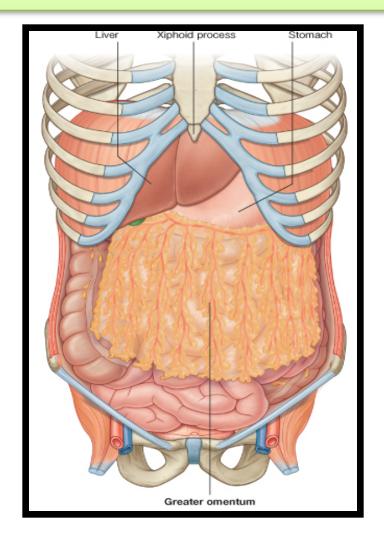
COLIC FLEXURES

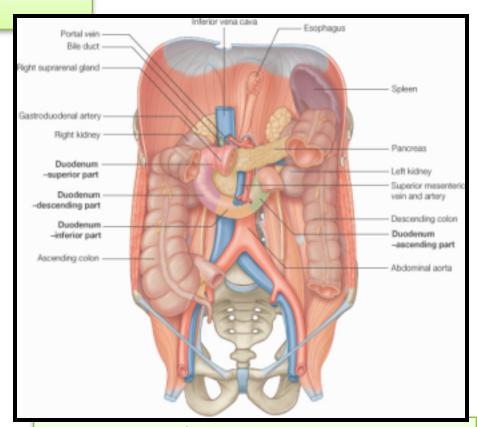


Relations of Transverse Colon

Anterior: greater omentum, anterior abdominal

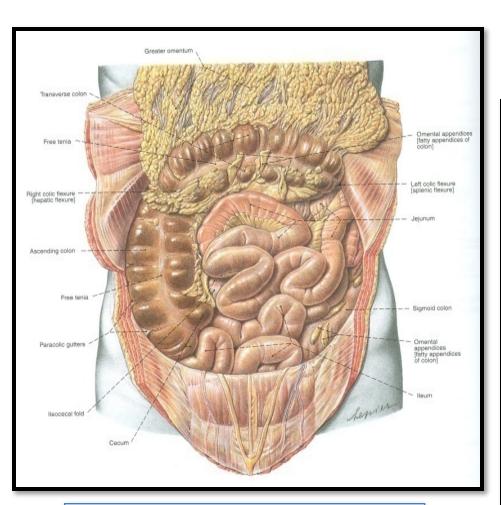
wall



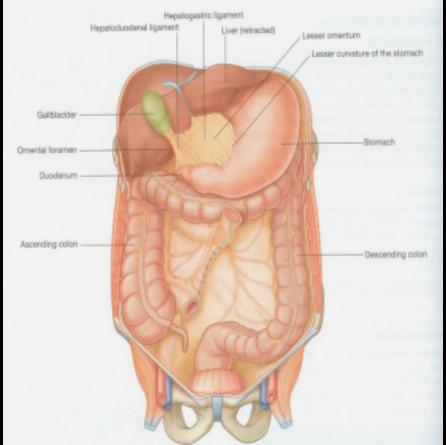


<u>Posterior</u>: 2nd part of duodenum, pancreas & superior mesenteric vessels.

Relations of Transverse Colon



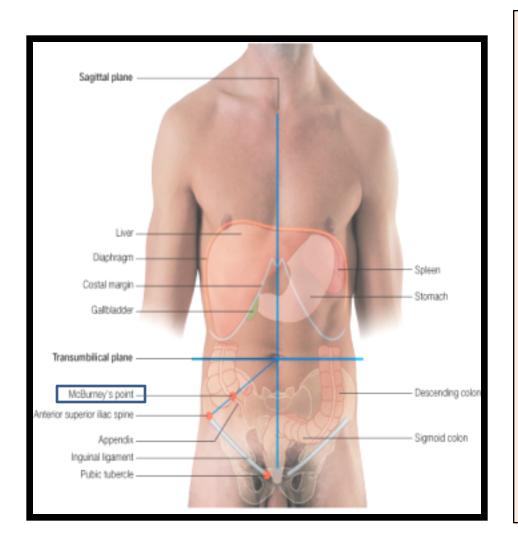
Superior: liver, gall bladder, stomach



Inferior: coils of small

intestina

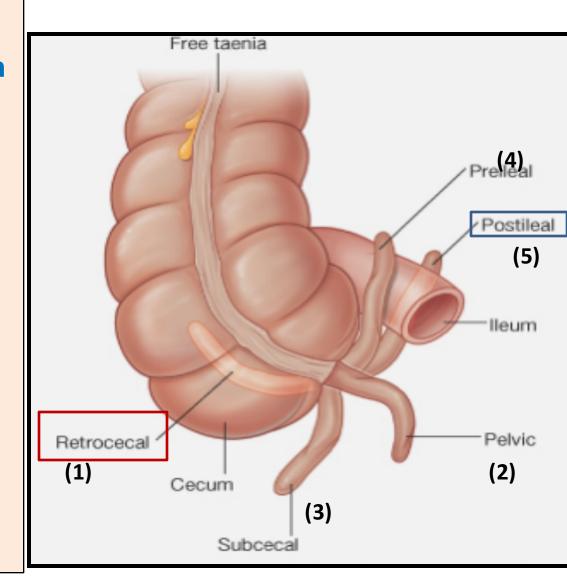
APPENDIX



- Surface anatomy:
- the base of appendix is marked by <u>Mc'Burney's</u> <u>point</u>:
- A point at the junction of lateral 1/3 & medial 2/3 of a line traced from right anterior superior iliac spine to umbilicus

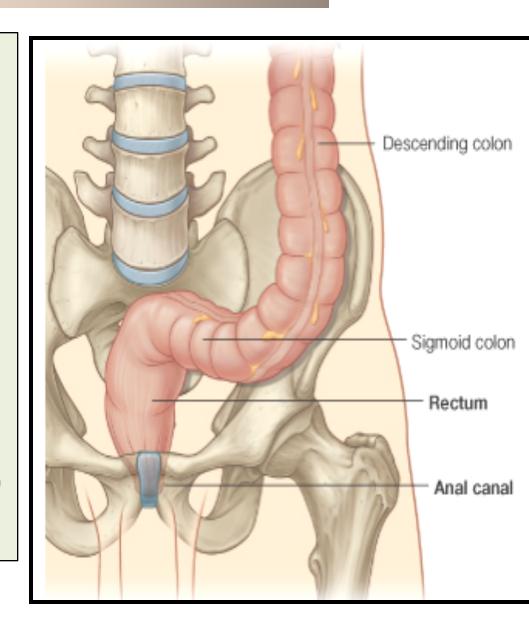
APPENDIX

- Opening:
- At posteromedial aspect of cecum, 1 inch below ileo-cecal junction
- Positions:
- 1.Retrocecal : (most common)
- 2.Pelvic
- 3.Subcecal
- 4.Preilieal
- 5.Postileal: least common



RECTUM

- □ Beginning: as a continuation of sigmoid colon at level of S3.
- Termination: continues as anal canal, one inch below & in front of tip of coccyx. Its end is dilated to form the rectal ampulla.
- □Length: 13 cm(5 inches)



Relations of Rectum in Pelvis

MALE PELVIS

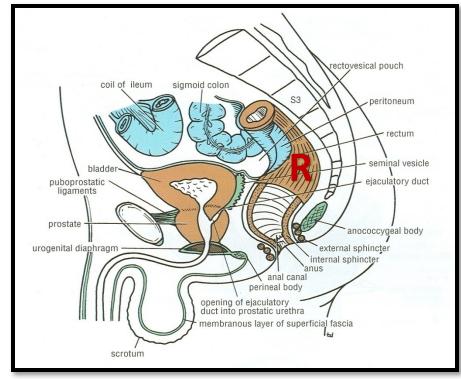
Anterior: seminal vesicles, posterior surfaces of urinary bladder & prostate gland

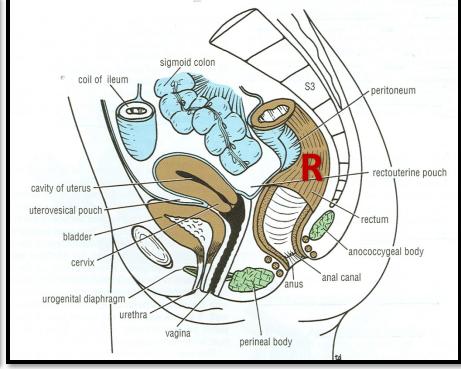
Posterior: sacrum, sacral plexus & coccyx

FEMALE PELVIS

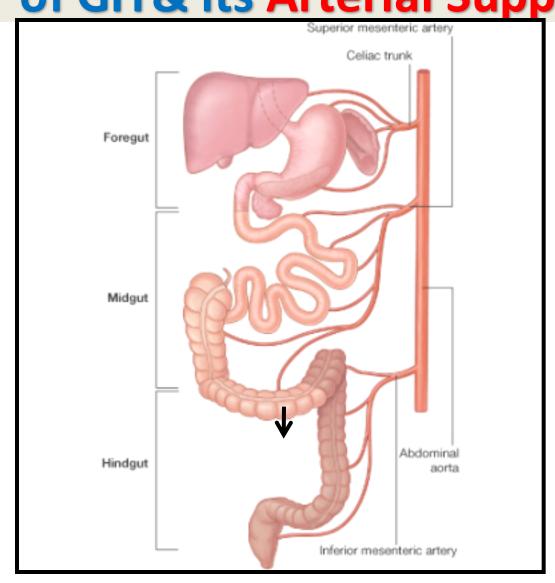
Anterior: posterior wall of vagina

□<u>Posterior:</u> sacrum, sacral plexus & coccyx

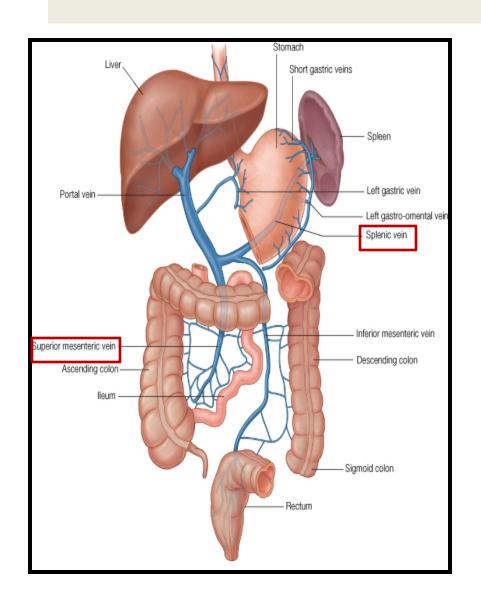




Relation Between Embryological Origin of GIT& its Arterial Supply

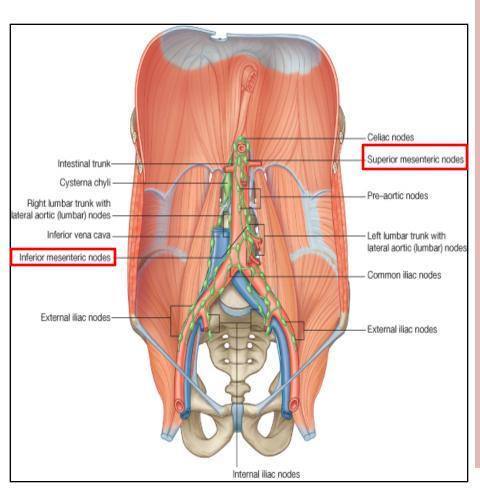


VENOUS DRAINAGE OF GIT



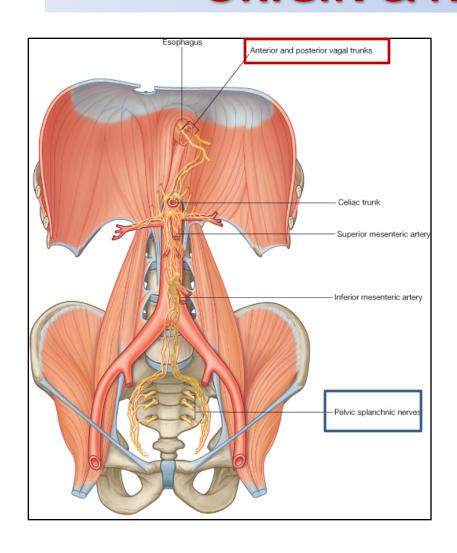
 The veins of the gut form the tributaries of the portal vein which enters the liver and drains into the portal circulation.

Lymph drainage of GIT



- The lymph vessels follow the arteries.
- Ultimately, all the lymph is collected at the Preaortic lymph nodes (Superior & Inferior mesenteric).

RELATION BETWEEN EMBRYOLOGICAL ORIGIN & NERVE SUPPLY



Origin: Midgut (endoderm) ☐ Nerve supply: (Autonomic): Sympathetic + Vagus ☐ Origin: Hindgut (endoderm) **☐** Nerve supply: (Autonomic): Sympathetic + pelvic splanchnic nerves ☐ Origin: ectoderm (lower 1/3 of anal canal) ☐ Nerve Supply: Somatic (inferior

rectal)

