

### Introduction:

It is an <b>elongated soft pinkish</b> structure.	<b>Weight:</b>	<b>Length:</b>	<b>It is lobulated?</b>
	(60-100) gram	(6-10) inch	Because it is surrounded by a <b>fibrous tissue capsule</b> from which <b>septa</b> pass into the gland and divide it into <b>lobes</b> → The lobes are <b>divided</b> into lobules.

### LOCATION:

<b>Retro-</b> Peritoneal	<b>Posterior abdominal wall</b> in the: <b>Epigastrium &amp; Left upper quadrant</b> of the abdomen.	<ul style="list-style-type: none"> <li>➤ Extends in a <b>transverse oblique</b> direction at the <b>transpyloric plane (1st lumbar vertebral)</b> from the <u>concavity of the duodenum</u> on the right to the <u>spleen</u> on the left.</li> <li>➤ Because of its oblique direction the tail is <b>higher than the head (at T12)</b>.</li> </ul>
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### Functions:

<b>The Exocrine portion</b>	<b>The Endocrine portion Islets of Langerhans</b>
Small ducts <u>arise from</u> the <b>lobules</b> and enter the <b>main pancreatic duct</b> (which begins in the tail), and passes through the <b>body</b> and <b>head</b> where it <u>meets the bile duct</u> .	Produce <b>insulin &amp; glucagon</b> .

### Pancreatic ducts:

<b>Main P duct :</b>	<b>Accessory P duct (of Santorini)</b>
<ul style="list-style-type: none"> <li>➤ <u>Joins common bile duct</u>.</li> <li>➤ They open into a <b>small hepatopancreatic ampulla</b> in the duodenal wall "<b>2nd part --&gt; Posteromedial</b> " (<b>Ampulla of Vater</b>).</li> </ul>	<ul style="list-style-type: none"> <li>➤ Drains <b>superior</b> portion of the head.</li> </ul>
The ampulla opens into the <b>lumen of the duodenum</b> through ( <b>Major Duodenal Papilla</b> ).	It empties separately into <b>2<sup>nd</sup> portion of duodenum</b> at ( <b>minor duodenal papilla</b> ) " <b>superior to the major duodenal papilla</b> "

### Blood supply:

Arterial supply:			Venous supply:	
<b>Superior pancreaticoduodenal</b>	<b>Inferior pancreaticoduodenal</b>	<b>Splenic A</b>	<b>Anterior and posterior arcades</b>	<b>Splenic vein</b>
<b>TO HEAD</b> & neck of pancreas + <b>Duodenum</b>		supplies the <b>Body</b> and <b>Tail</b> of pancreas by about <b>10</b> branches	<b>Drain head and the body</b>	<b>Drains the body and tail</b>
<b>Celiac trunk</b> → common hepatic artery → <ul style="list-style-type: none"> <li>○ Right gastric.</li> <li>○ Hepatic A.</li> <li>○ <b>Gastroduodenal</b> <ul style="list-style-type: none"> <li>○ Superior</li> <li>○ Pancreatico-duodenal.</li> <li>○ <b>Right gastroepiploic</b>.</li> </ul> </li> </ul>	From <b>superior mesenteric artery</b>		Form the superior and inferior pancreaticoduodenal veins which follows the corresponding arteries (to superior mesenteric vein)	Ultimately <b>both splenic + superior mesenteric</b> , ends into <b>Portal Vein</b>

### Nervous & Lymphatic supply:

Nervous:		Lymphatic:
<b>Sympathetic</b>	<b>Parasympathetic</b>	<ul style="list-style-type: none"> <li>• Rich network drains into nodes along the <b>upper border</b> of the pancreas</li> <li>• <u>Ultimately</u> the <b>efferent</b> vessels drain into <b>celiac nodes</b>.</li> <li>• Lymph vessels from the region of the <b>Head</b> pass to <b>Superior mesenteric nodes</b>.</li> </ul>
<b>from the splanchnic N</b>	<b>from the Vagus</b>	
predominantly <b>inhibitory effect</b> .	<b>stimulate</b> both exocrine and endocrine secretions.	

## PARTS

	Head:	Neck:		Body:		Tail:	
I N F O	It is <b>disc</b> shaped	It is the <u>constricted</u> portion <u>connecting</u> the <b>head &amp; body</b> of pancreas. <b>Narrowest part of the pancreas</b>		It is <b>triangular</b> in cross section.		A <b>narrow, short</b> segment. Ends within the <b>splenic hilum</b>	
	Lies within the <b>concavity of the duodenum</b> . Related to the <b>2nd</b> and <b>3rd</b> portions of the duodenum.			It runs <b>upward</b> and to the <b>left</b> .		Lies in the <b>*Splenicorenal ligament</b>	
	<b>On the right:</b>	<b>On the left:</b>	<b>Antero-superior surface</b>	<b>Inferior border</b>	<b>Post. Surface:</b>	<b>Upper border:</b>	Anteriorly: related to: <b>splenic (Left) flexure of colon</b>  *May be injured during <b>Splenectomy</b>
	Emerges into the <b>neck</b>	Includes <b>Uncinate Process</b> ( an <u>extension</u> of the lower part of the head <u>behind</u> the <b>superior mesenteric vessels</b> ).	supports the <b>pylorus</b> of the stomach	The <b>superior mesenteric vessels</b> emerge from its <u>inferior border</u> .	The <b>Splenic Vein</b> is embedded in its <b>post. Surface</b>	<b>Splenic Artery</b> runs to the <u>left</u> along the <b>upper border</b> of the pancreas.	
A N T.	-				<b>1-Stomach</b> separated from by lesser sac. Ulcers in the <b>post. wall</b> of stomach → <b>splenic artery</b> → reach pancreas → <b>pancreatitis</b> . <b>2- Transverse colon.</b> <b>3- Transverse mesocolon.</b>		
P O S T.	<b>1-Bile Duct</b> runs <u>downwards</u> and may be embedded in it. <b>Caner of head of pancreas can lead to obstructive jaundice.</b> (compression applied on Bile duct) <b>2- IVC</b> runs <u>upwards</u> .		<b>1-Aorta.</b> <b>2-Origin of Superior. Mesenteric artery</b> <b>3- the confluence of the Portal Vein</b> Behind the neck of the pancreas, the SMV combines with the splenic vein to form the hepatic portal vein.		<b>1- Left Psoas muscle</b> <b>2- Left Adrenal gland</b> <b>3- Left Renal vessels</b> <b>4- Upper 1/3<sup>rd</sup> of Left kidney</b> <b>5- Hilum of the spleen.</b> <small>الكلىة اليسرى و غدها و اوعيتها + السوايس + السبيلين لانها تنتهي فيها</small> During <b>nephrectomy</b> → <b>tail of pancreas can get injured</b> → acute pancreatitis		

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