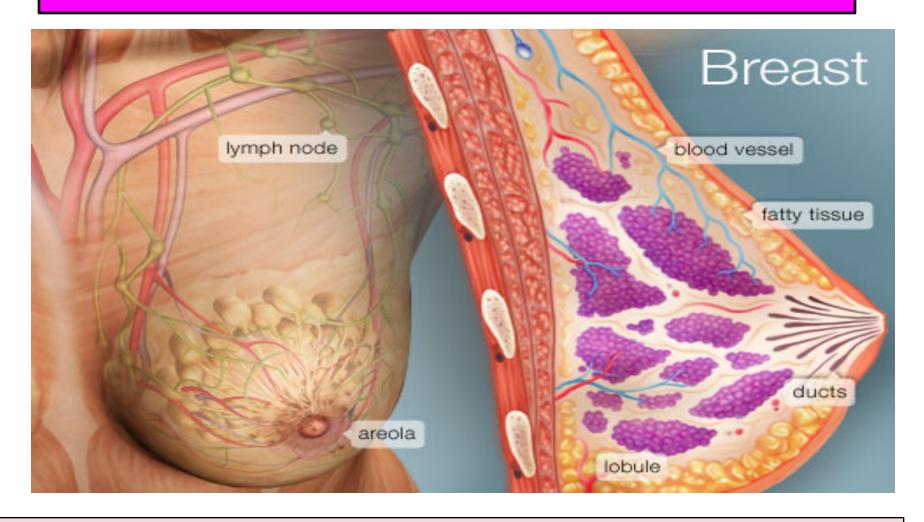
FEMALE BREAST



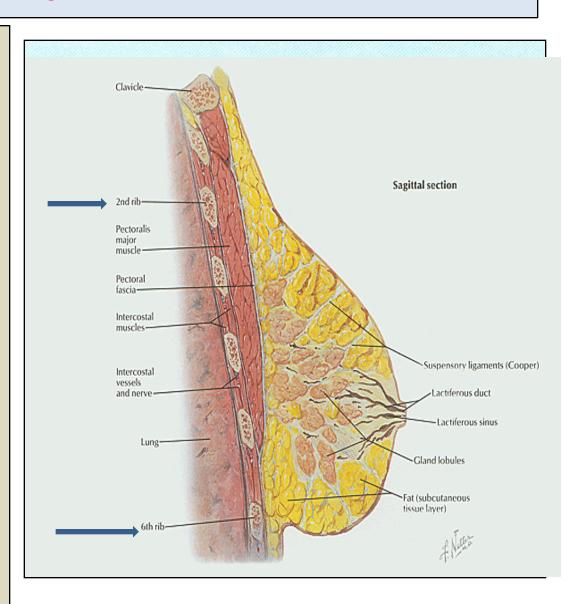
PROF. Saeed Abuel Makarem & DR.SANAA AL-SHAARAWI

OBJECTIVES

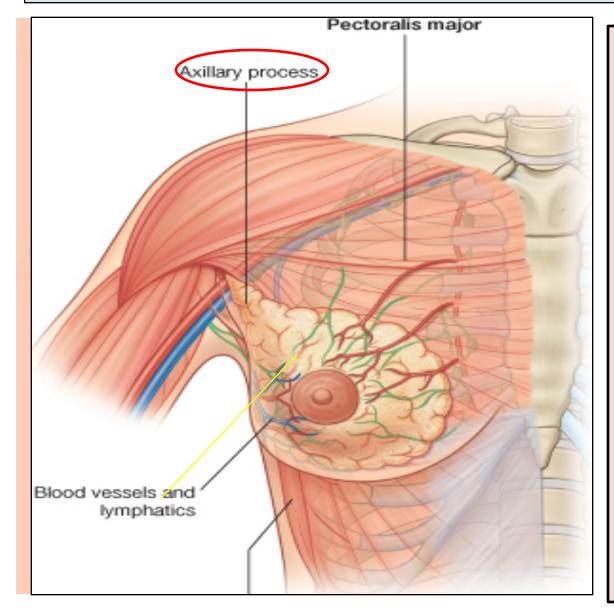
- By the end of the lecture, the student should be able to:
- Describe the <u>shape and position</u> of the female breast.
- Describe the <u>structure</u> of the mammary gland.
- List the <u>blood supply</u> of the female breast.
- Describe the lymphatic drainage of the female breast.
- Describe the applied anatomy in the female breast.

Parts, Shape & position of the Gland

- It is conical in shape.
- It lies in superficial fascia of the front of chest.
- It has a base, apex and tail.
- Its base:
- extends from 2nd to 6th
 ribs.
- It extends from the sternum to the midaxillary line laterally.
- It has no capsule.



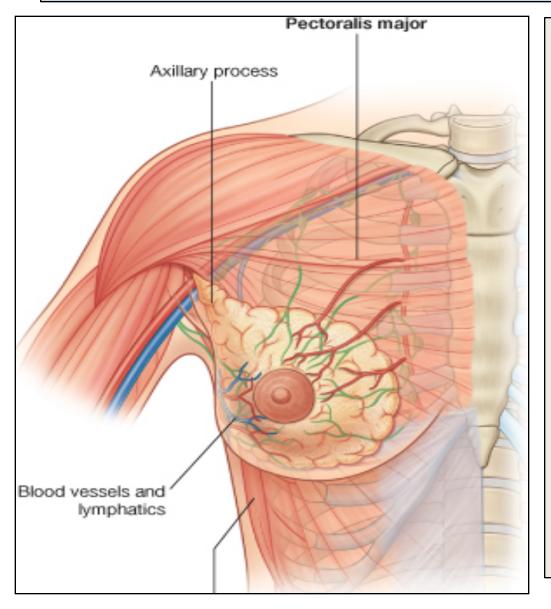
POSITION OF FEMALE BREAST



- 2/3 of <u>its base</u> lies on the <u>pectoralis</u> major muscle, while its inferolateral 1/3 lies on:
- Serratus anterior &
- External oblique muscles.
- Its <u>superolateral</u>

 part sends a process
 into the axilla called
 the <u>axillary tail or</u>
 axillary process.

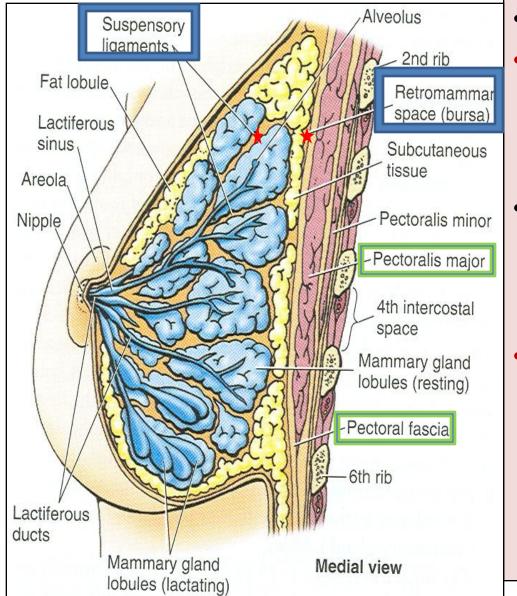
SHAPE AND POSITION OF FEMALE BREAST



Nipple:

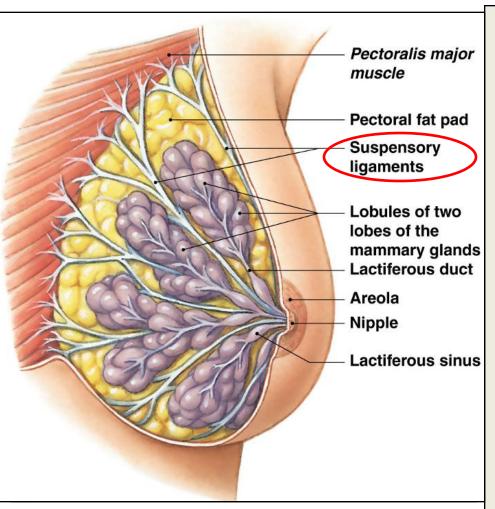
- It is a conical eminence that projects forwards from the anterior surface of the breast.
- The nipple <u>lies</u> opposite <u>4th</u> intercostal space.
- It <u>carries</u> 15-20 narrow pores of the lactiferous ducts.
- Areola:
- It is a dark pink brownish circular area of skin that surrounds the nipple.
- The subcutaneous tissues of nipple & areola are <u>devoid of</u> fat.

STRUCTURE OF MAMMARY GLAND

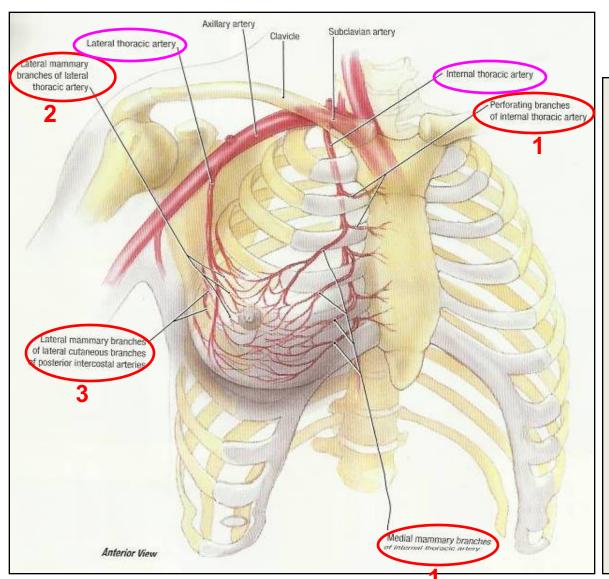


- It is non capsulated gland.
- It consists of lobes and lobules which are embedded in the subcutaneous fatty tissue of superficial fascia.
- It has <u>fibrous strands</u>
 (<u>ligaments of cooper</u>) which
 connect the <u>skin</u> with <u>deep</u>
 <u>fascia of pectoralis major.</u>
- fascia covering the underlying muscle by a layer of loose areolar tissue which forms the retromammary space.? What is its Importance? (allows the breast to move freely).

STRUCTURE OF MAMMARY GLAND



- It is formed of 15-20 lobes.
- Each lobe is formed of a number of lobules.
- respectated by interlobar and interlobular fibrous & fatty tissue, called ligaments of Cooper. (Importance)? These ligaments give the breasts support by connecting the skin of the breast to the deep facia of underlying pectoralis muscle.
- It has from 15-20 lactiferous
 ducts which open by the
 same number of openings on
 the summit of the nipple.

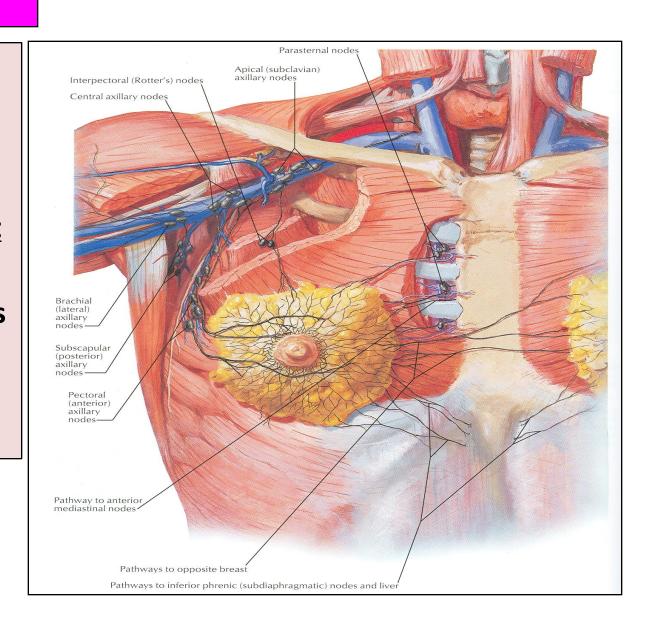


ARTERIAL SUPPLY

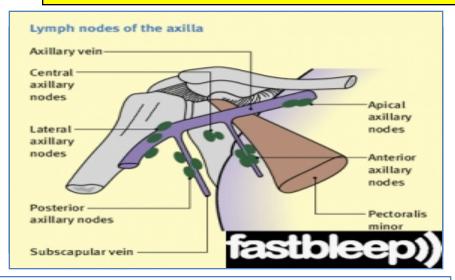
- 1. <u>Perforating</u>
 branches and
 <u>mammary</u> branches
 of internal thoracic
 (internal mammary)
 artery.
- 2. <u>Mammary</u>
 branches of lateral
 thoracic artery.
- 3. <u>Mammary</u>
 branches of
 Intercostal arteries.

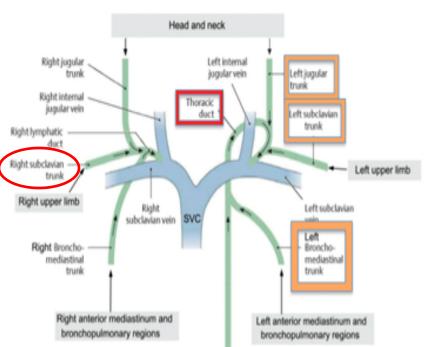
VENOUS SUPPLY

- Veins are corresponding to the arteries.
- Circular venous
 plexus are found <u>at</u>
 the base of nipple.
- Finally, veins of this plexus drain into axillary & internal thoracic veins.



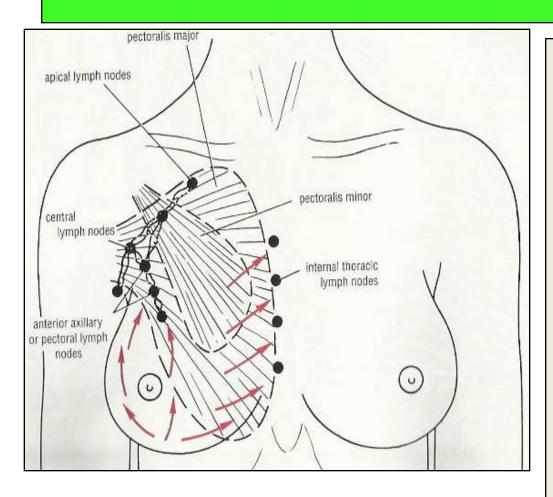
AXILLARY LYMPH NODES





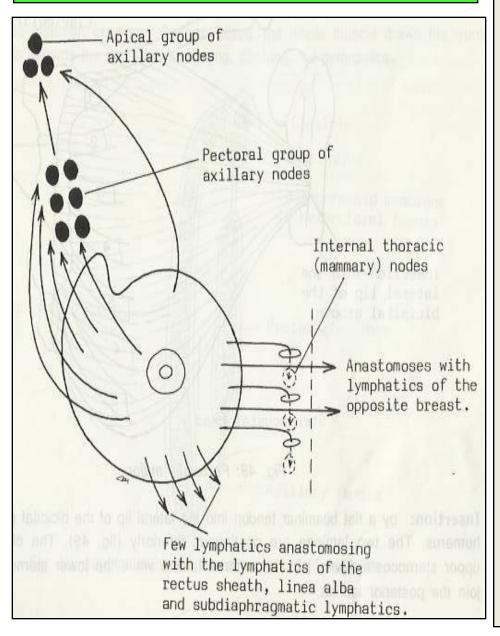
- They are arranged into <u>5 groups</u>
 which lie in axillary fat:
- Pectoral (Anterior) group: which lies on the <u>pectoralis minor</u> along lateral thoracic vessels.
- Subscapular (Posterior) group:
 which lies on posterior wall of axilla
 on lower border of subscapularis
 along subscapular vessels.
- Brachial (Lateral) group: lies on lateral wall of axilla along 3rd part of axillary vessels.
- Central group: lies in <u>axillary fat</u> at the base of axilla.
- Apical group: lies at apex of axilla.
- Subclavian lymph trunk:
- It is formed by union of efferent lymph vessels of apical group. On the right side, It usually opens in subclavian vein. On the left side it usually opens into thoracic duct.

LYMPHATIC DRAINAGE OF BREAST



- Subareolar lymphatic plexus:
- Lies beneath the areola.
- Deep lymphatic plexus:
- Lies on the deep fascia covering pectoralis major.
- Both plexuses radiate in many directions and drain into different lymph nodes.

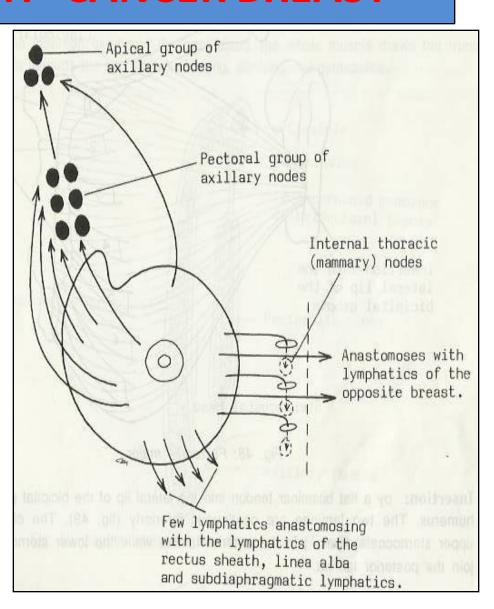
LYMPHATIC DRAINAGE



- Central & lateral parts of the gland (75%) drain into <u>pectoral group</u> of axillary lymph nodes.
- Upper part of the gland drains into apical group of axillary lymph nodes.
- Medial part drains into internal thoracic (parasternal) lymph nodes, forming a chain along the internal thoracic vessels.
- Some lymphatics from the medial part of the gland pass across the front of sternum to anastomose with that of opposite side.
- Lymphatics from the inferomedial part anastomose with lymphatics of rectus sheath & linea alba, and some vessels pass deeply to anastomose with the sub diaphragmatic lymphatics.

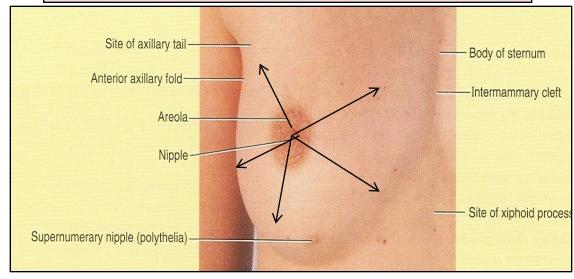
APPLIED ANATOMY- CANCER BREAST

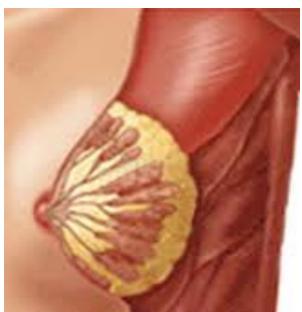
- It is a <u>common surgical condition</u>.
- 60% of carcinomas of breast occur in the upper lateral quadrant.
- 75% of lymph from the breast drains into the axillary lymph nodes.
- In case of carcinoma of one breast, the other breast and the opposite axillary lymph nodes are affected because of the anastomosing lymphatics between both breasts.
- In patients with localized cancer breast, a simple mastectomy, followed by radiotherapy to the axillary lymph nodes is the treatment of choice.

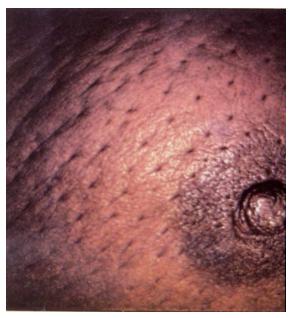


- The lactiferous ducts are radially arranged from the nipple, so incision of the gland should be made in a radial direction to avoid cutting through the ducts.
- Infiltration of the ligaments of Cooper leads to its shortening giving peau de'orange appearance of the breast.

Applied Anatomy







Mammary ridge

- Mammary ridge
 extends from the <u>axilla</u>
 to the inguinal region.
- In human, the ridge disappears EXCEPT for a small part in the pectoral region.
- In animals, several mammary glands are formed along this ridge.

