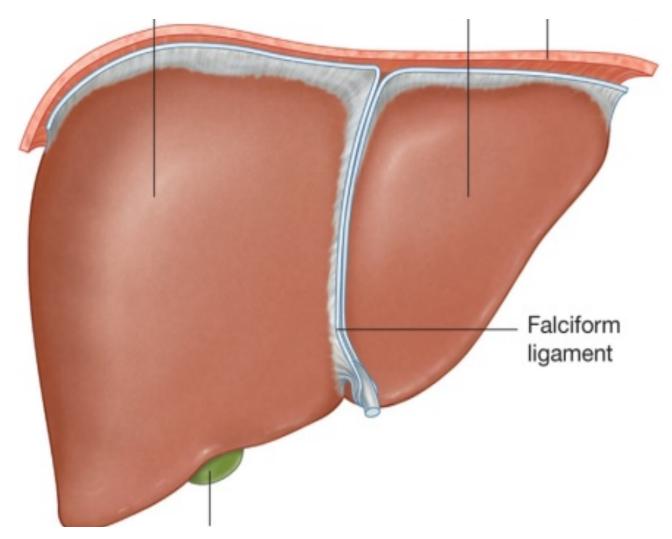
Liver & Spleen



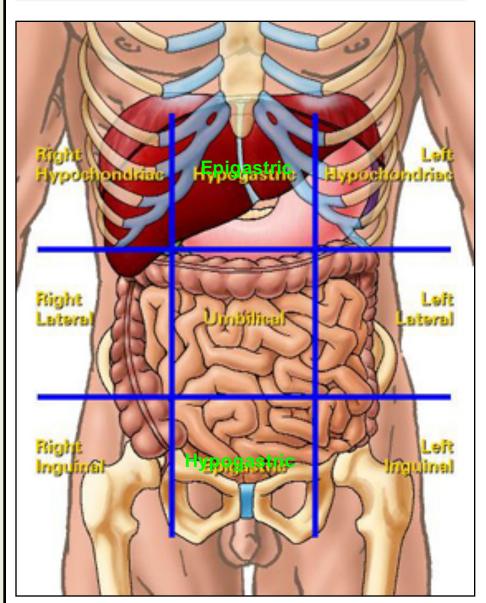
Objectives

By the end of the lecture, you should be able to describe the:

- Location, subdivisions and relations and peritoneal reflection of liver.
- Blood supply, nerve supply and lymphatic drainage of liver.
- Location, subdivisions and relations and peritoneal reflection of spleen.
- Blood supply, nerve supply and lymphatic drainage of spleen.

- The largest gland in the body.
- Weighs approximately 1500 g.
 (2.5% of adult body weight).
- Lies mainly in:
- Right hypochondrium,
- Epigastrium and
- Left hypochondrium.
- Protected by the thoracic cage and diaphragm, lies deep to ribs 7-11 on the right side and crosses the midline toward the left nipple.
- Moves with the diaphragm and is located more inferiorly in erect posture because of gravity.

Liver



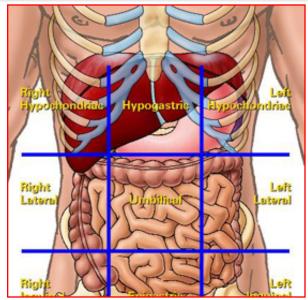
Anterior:

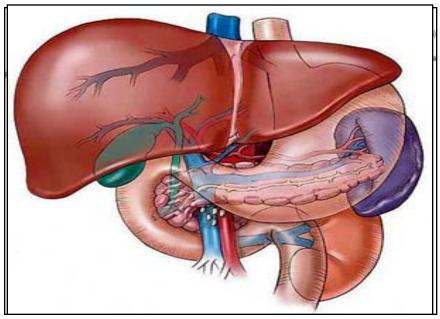
- 1. Diaphragm,
- 2. Right and left costal margins,
- 3. Right and left pleura,
- 4. Right and left lungs,
- 5. Xiphoid process,
- 6. Anterior abdominal wall.

Posterior:

- 1. Diaphragm,
- 2. Right kidney,
- 3. Right suprarenal land,
- 4. Right colic (hepatic) flexure,
- 5. Duodenum,
- 6. Gallbladder,
- Inferior vena cava,
- 8. Esophagus and
- 9. Fundus of the stomach.

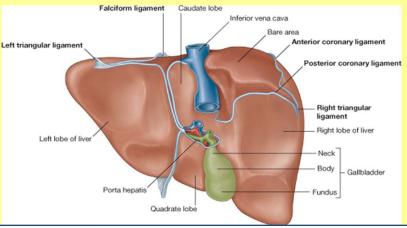
Relations of Liver

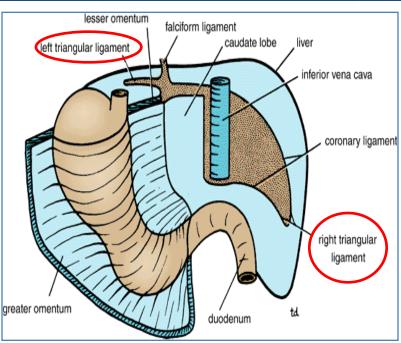




Peritoneal Reflection

POSTERIOR SURFACE OF LIVER





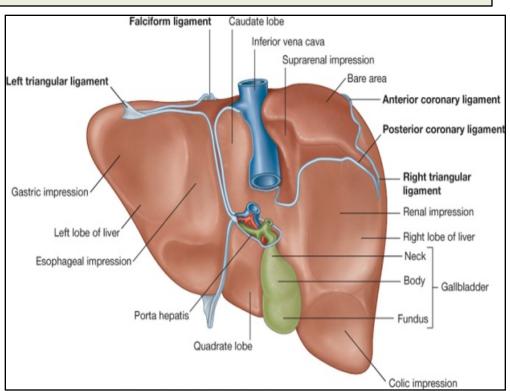
- The liver is completely surrounded by a fibrous capsule.
 - It is partially covered by peritoneum.
- The bare area of the liver is an area lying on the diaphragmatic surface (on posterior surface of right lobe) where there is no peritoneum between the liver and the diaphragm.
- Boundaries of Bare area:
 - > Anterior: Superior layer of coronary ligament.
 - Posterior: Inferior layer of coronary ligament.
 - > Right: Right triangular ligaments.
 - > Left: Groove for inferior vena cava.

Other bare areas of the liver include:

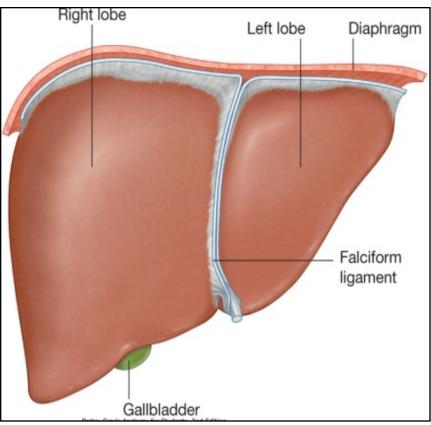
- 1. Porta hepatis,
- 2. Gall bladder fossa.&
- 3. Grooves for IVC.

The liver has two surfaces:

- A convex <u>diaphragmatic</u> surface, (superior, anterior and right lateral surface).
- A relatively flat or even concave <u>visceral</u> surface. (posteroinferior).

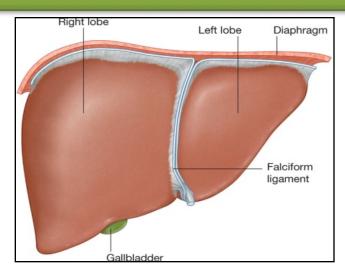


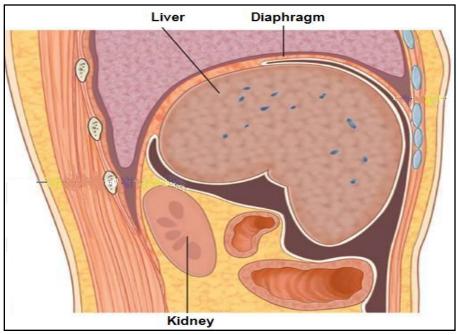
Surfaces of Liver



Diaphragmatic Surface

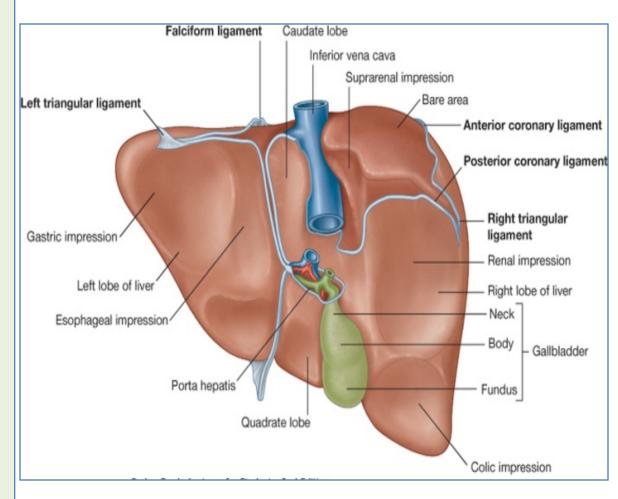
- The convex upper, anterior and right lateral surface is smooth and molded to the undersurface of the domes of the diaphragm.
- The diaphragm separates the liver from pleurae, base of both lungs, pericardium, and heart.
- It is covered with visceral peritoneum, except posteriorly in the bare area of the liver, where it lies in direct contact with the diaphragm.





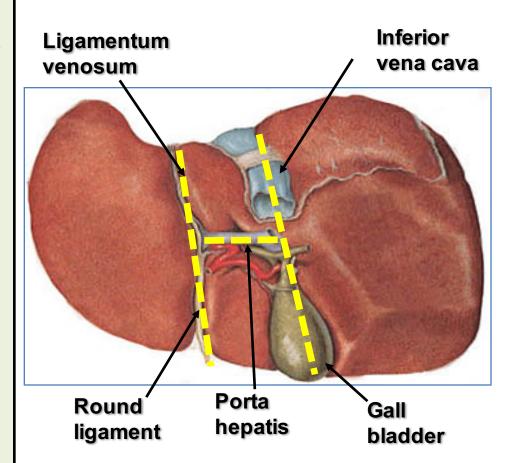
- The visceral or the posteroinferior surface, is related to the abdominal viscera.
- It is covered with peritoneum, except 3 areas:
- Gallbladder fossa,
- Porta hepatis.
- I.V.C groove.
- It bears multiple fissures and impressions due to contact with other organs.

Visceral Surface



- Two sagittally oriented fissures, linked centrally by transverse porta hepatis, form the letter H on the visceral surface.
- The <u>left fissure</u> is the continuous groove formed:
 - Anteriorly by the fissure for the round ligament, (teres).
 - Posteriorly by the fissure for the ligamentum venosum.
- The <u>right fissure</u> is the continuous groove formed:
 - Anteriorly by gallbladder fossa.
 - Posteriorly by the groove for the inferior vena cava.

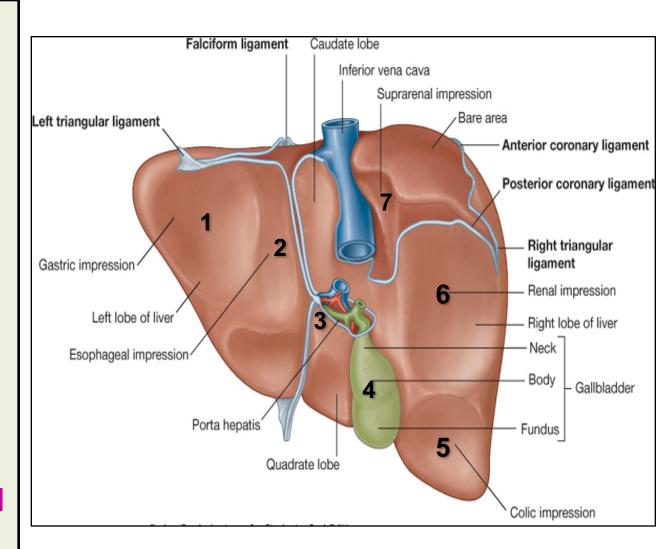
Fissures



Relations of Visceral Surface of the Liver

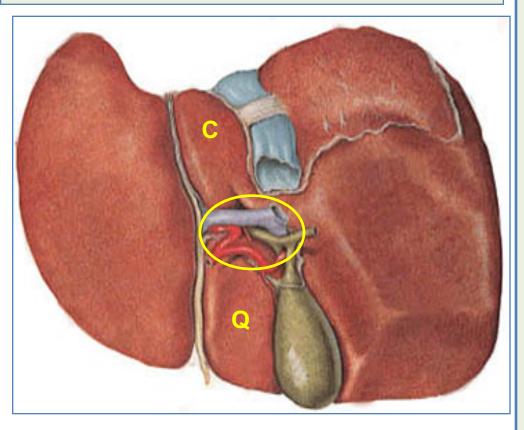
The visceral surface is related to:

- 1. Stomach.
- 2. Esophagus.
- 3. Lesser omentum.
- Gallbladder.
- 5. Right colic flexure
- 6. Right kidney.
- 7. Right suprarenal gland.



Porta Hepatis (Hilum of the Liver)

- A transverse fissure on the visceral surface which lies <u>between</u> caudate and quadrate lobes.
- Its margins is attached to the upper part of lesser omentum



Structures passing through the porta hepatis include:

- Right and left hepatic ducts.
- Right and left branches of the hepatic artery.
- Right and left branches of the portal vein.
- Sympathetic and parasympathetic fibers.
- A few hepatic lymph nodes lie here; they drain the liver and gallbladder and send their efferent vessels to the celiac lymph nodes.
- NB. The 2 hepatic veins open in the posterior surface on the groove for IVC.

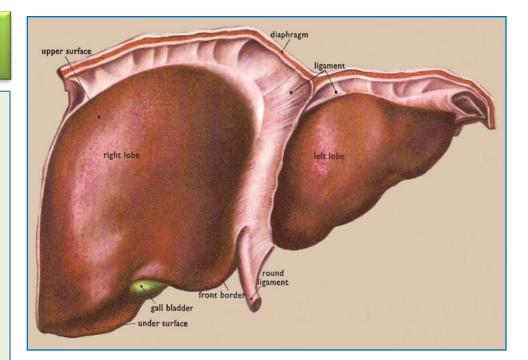
Ligaments of the Liver

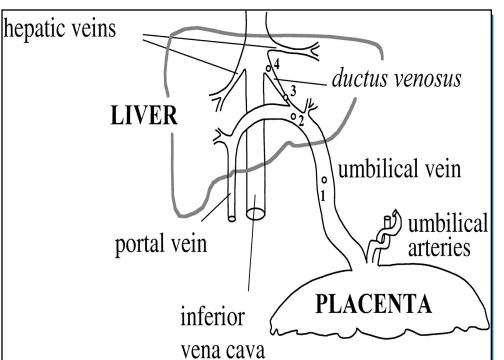
Falciform ligament

- It is a two-layered fold of the peritoneum, connects the liver to the diaphragm; anterior abdominal wall & umbilicus.
- Its sickle-shaped free margin contains the ligamentum teres (round Ligament) of liver.
- It is obliterated umbilical vein, which carried oxygenated blood from the placenta to the fetus.

Ligamentum venosum

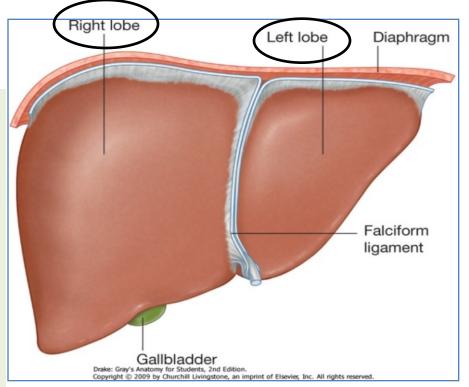
It is the fibrous remnant of fetal ductus venosus, which shunted blood from the umbilical vein to the IVC in intrauterine fetal life.

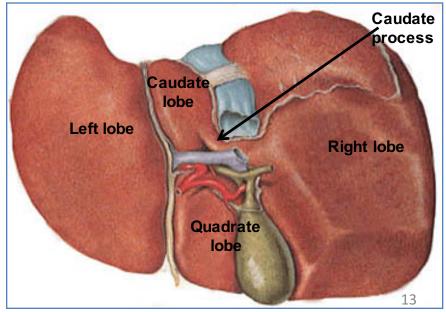




Lobes of The Liver

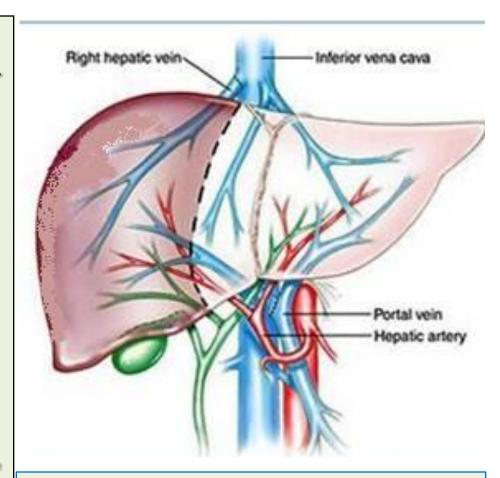
- The liver is divided into a large right lobe and a small left lobe by the attachment of the falciform ligament.
- The <u>right lobe</u> is further divided into a quadrate lobe and a caudate lobe <u>by</u>:
- Gallbladder,
- Fissure for the ligamentum teres,
- Groove for inferior vena cava,
- Fissure for ligamentum venosum.
- The caudate lobe is connected to the right lobe by the caudate process.
- The quadrate and caudate lobes are a <u>functional</u> part of the <u>left lobe</u> of the liver. (because of its supplying with left branches of C.H.Duct; Portal v.& Hepatic Ar.).





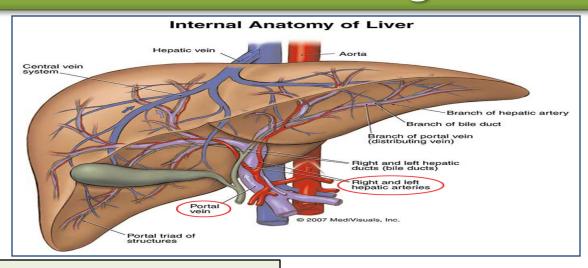
Blood Circulation through the Liver

- The blood vessels conveying blood to the liver are:
- Hepatic artery (30%)
- Portal vein (70%).
- The hepatic artery brings oxygenated blood to the liver.
- The portal vein brings
 venous blood rich in the
 end products of digestion,
 which have been absorbed
 from the gastrointestinal
 tract.



The venous blood is drained by 2 hepatic veins which drain into the inferior vena cava.

Blood Circulation through the Liver



- At or close to the porta hepatis, the hepatic artery and portal vein terminate by <u>dividing into</u> right and left primary branches to the corresponding lobe of the liver.
- Within the liver, the primary branches divide to give secondary and tertiary branches to supply the hepatic segments independently.
- The <u>hepatic veins</u>, are intersegmental in their distribution and function, draining parts of adjacent segments.
- The attachment of these veins to the IVC helps to hold the liver in position. (The peritoneal ligaments and the tone of the abdominal muscles play a minor role in liver support.

Lymph Drainage

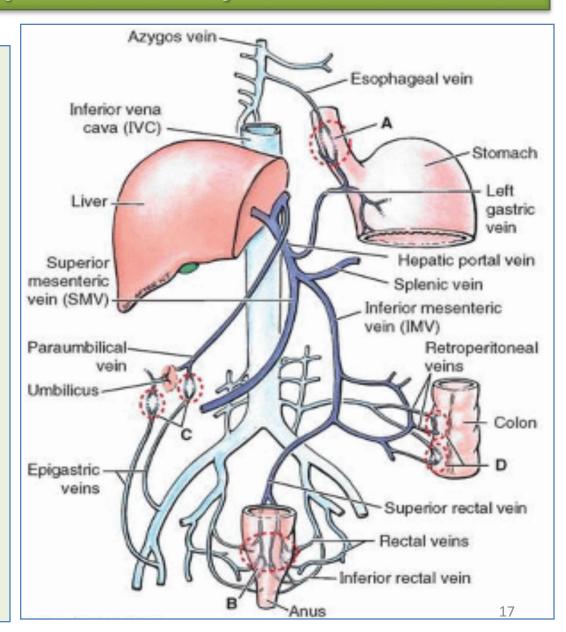
- The liver produces a large amount of lymph—about one third to one half of all body lymph.
- The lymph vessels leave the liver to enter several lymph nodes in the porta hepatis.
- The efferent vessels pass to the celiac lymph nodes.
- A few vessels pass from the bare area of the liver through the diaphragm to the posterior mediastinal lymph nodes.

Nerve Supply

- Sympathetic and parasympathetic nerves from :
- The celiac plexus and
- The anterior vagal trunk gives rise to a large hepatic branch, which
 passes directly to the liver.

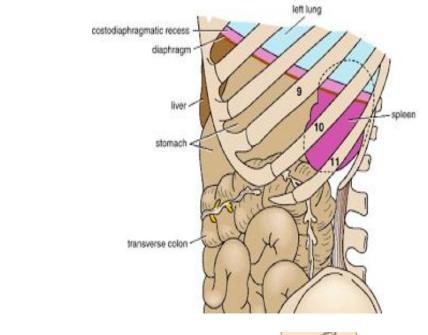
Portal-Systemic (Portocaval) Anastomosis

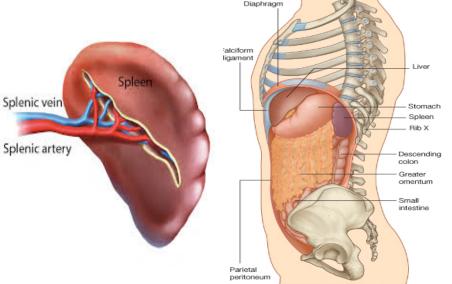
- It is a specific type of anastomosis that occurs between the veins of portal circulation and those of systemic circulation.
- In portal hypertension, these anastomosis open and form venous dilatation called varices.
- Sites:
 - A. Esophagus (lower end).
 - B. Anal canal (upper end).
 - C. Paraumbilical region.
 - D. Retroperitoneal.
 - E. Intrahepatic (Patent ductus venosus).



Spleen

- Largest single mass of lymphoid tissue.
- Located in the left hypochondrium, deep to the ribs 9, 10 & 11.
- Long axis lies along the shaft of the 10th rib.
- It is separated from the ribs by the diaphragm and the costodiaphragmatic pleural recess (space in pleural cavity).
- It is ovoid in shape with a notched anterior border.
- Lower pole extends forward as far as the midaxillary line.
- Normal size spleen can not be palpated on clinical examination.



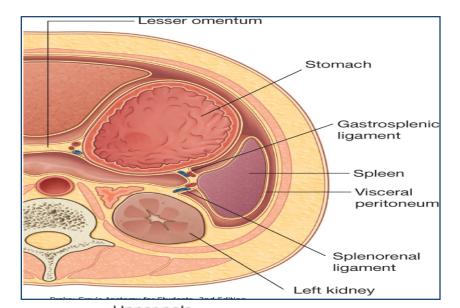


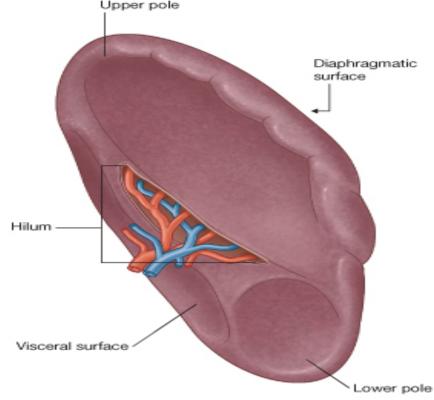
Surfaces:

- Diaphragmatic surface:
- It is convexly curved to fit the concavity of the diaphragm and curved bodies of the adjacent ribs.
- Visceral surface:
- Related to viscera.

Borders:

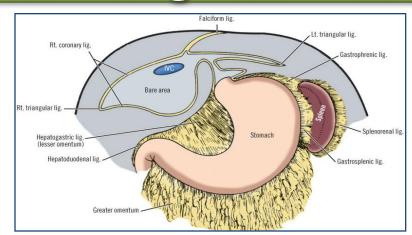
- The anterior and superior borders are sharp.
- Anterior border is notched.
- The posterior (medial) and inferior borders are rounded.

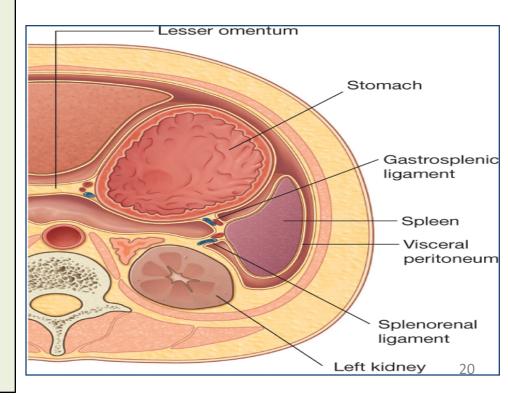




Peritoneal Reflections/Ligaments

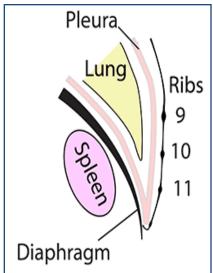
- Spleen is completely surrounded by peritoneum which passes from its hilus as:
 - Gastrosplenic ligament to the greater curvature of stomach, <u>carrying</u>:
 - Short gastric vessels,
 - Left gastroepiploic vessels.
 - Lienorenal ligament to the front of left kidney carrying:
 - Splenic vessels and
 - Tail of pancreas.

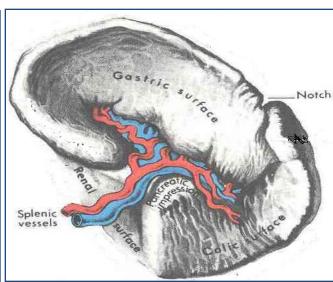


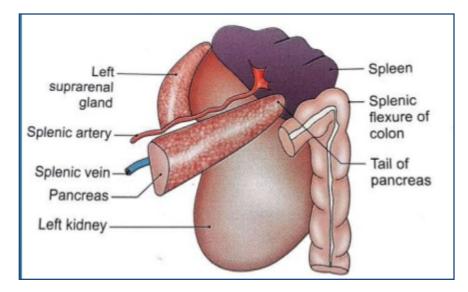


Relations

- Anteriorly: (visceral surface):
- Stomach,
- Tail of pancreas,
- Left colic flexure &
- Left kidney.
- Posteriorly:
 Diaphragm, that separates it from,
- Left pleura (left costodiaphragmatic recess)
- Left lung &
- 9, 10 & 11 ribs.
- Inferiorly:
- Left colic flexure.
- Medially: Left kidney.



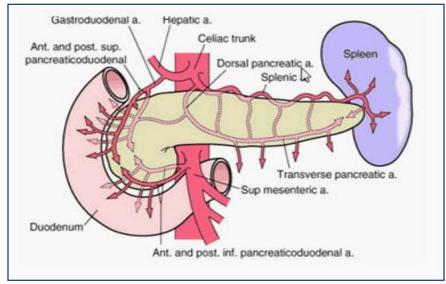


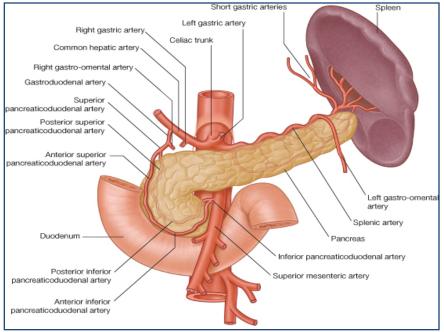


Arterial Supply

Splenic artery

- Largest branch of the celiac artery.
- Runs a tortuous course along the upper border of the pancreas.
- Passes within the lienorenal ligament.
- Divides into 4-5
 branches, which enter
 the spleen at its hilus.





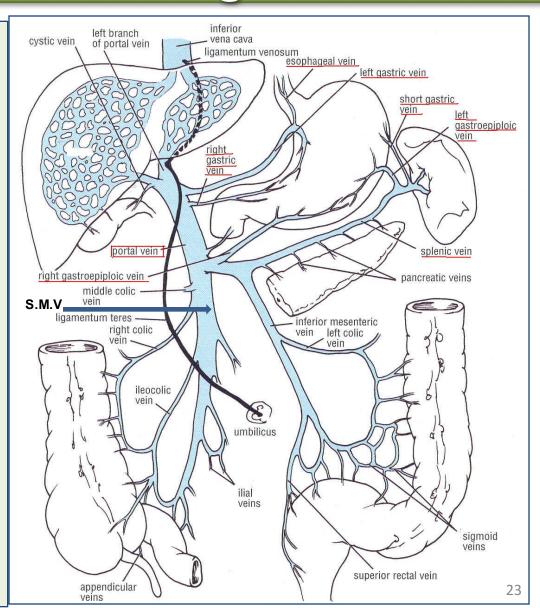
Venous Drainage

Splenic vein

- Leaves the hilus.
- Runs behind the tail & body of the pancreas.
- Reaches behind the neck of pancreas, where it joins the superior mesenteric vein to form the portal vein.

Tributaries:

- Short gastric vein.
- left gastroepiploic vein.
- Pancreatic veins.
- Inferior mesenteric vein.



Lymph Drainage

- Lymphatics emerge from the hilus and drain into several nodes lying at the hilum.
- Efferents from the hilar nodes pass along the course of splenic artery, and drain <u>into</u> the <u>celiac lymph nodes</u>.

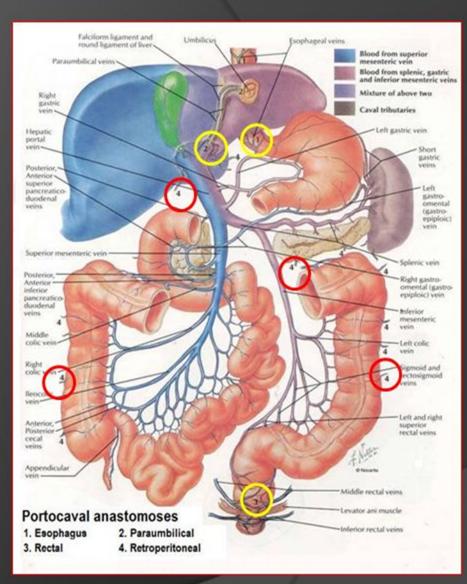
Nerve Supply

- Derived from the celiac plexus.
- Are distributed mainly along branches of splenic artery, and are vasomotor in function.

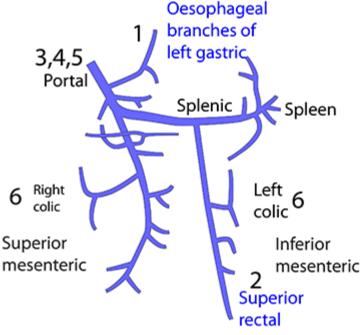
Thank You And Good Luck

SITES OF PORTOCAVAL ANASTOMOSIS

- Lower end of esophagus: left gastric vein & azygos vein
- Lower part of rectum: (Hemorrhoids) superior and middle rectal veins & inferior rectal vein
- Paraumbilical region: (Caput medusae) Paraumbilical veins & superficial epigastric vein
- Retroperitoneal: Veins draining colon & veins of the posterior abdominal wall
- Patent ductus venosus: Left branch of portal vein & inferior vena cava



PORTOSYSTEMIC ANASTOMOSES



1 Lower oesophagus

Portal: Oesophageal branches of left gastric veins Systemic: Azygos veins

2 Upper anal canal

Portal: Superior rectal vein Systemic: Middle/inferior rectal veins

3 Umbilical

Portal: Veins of ligamentum teres Systemic: Superior/inferior epigastic veins

4 Bare area of liver

Portal: Hepatic/portal veins Systemic: Inferior phrenic veins

5 Patent ductus venosus (rare)

Postal: Left branch of portal vein Systemic: Inferior vena cava

6 Retroperitoneal

Portal: Colonic veins Systemic: Body wall veins

