

## **Esophagus And Stomach**

Gastrointestinal block-Anatomy-Lecture 3

**Editing file** 



## **Objectives**

At the end of the lecture, students should be able to:

- Describe the anatomy of the esophagus; extent, length, parts, strictures, relations, blood & nerve supply and lymphatic.
- Describe the anatomy of the stomach; location, shape, parts, relations, blood & nerve supply and lymphatic.

**Color guide :** Only in boys slides in **Green** Only in girls slides in **Purple** important in **Red** Notes in **Grey** 



# Esophagus

- It is a tubular structure about 25 cm long and is divided into three parts
- Extends from C6 (end of pharynx)  $\rightarrow$  In the thoracic part it bends to the left but at the level of the sternal angle, aortic arch and left main bronchus push it again to the midline  $\rightarrow$  Until it pierces diaphragm at T10  $\rightarrow$  Crosses the diaphragm for 1.3 cm to join the stomach in the abdomen = (end in the level of T11)



Abdominal

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#### Cervical Thoracic **Relations** Relations **Relations** Anterior: Anterior: Anterior: Left lobe of the liver Trachea Left principal bronchus Trachea Left Recurrent laryngeal nerve Left atrium and pericardium **Recurrent** laryngeal **Posterior: Posterior:** nerves Left crus of the diaphragm Thoracic Duct **Bodies of Thoracic Vertebrae Descending Thoracic aorta** Azygos vein **Posterior:** •Fibers from the right crus form a (end onlu) Vertebral column sling around the esophagus **Right posterior intercostal arteries** •At the opening of the diaphragm Lateral: Lateral: it's accompanied by: **Right**: Left: Two vaqi Lobes of Thyroid gland . Left gastric vessels Left Mediastinum pleura • **Right Mediastinum pleura** Lymphatic vessels Aortic arch • Terminal end of azugos vein Left subclavian artery Thoracic duct

## **Clinical Aspects: Esophagus**

- There's a close relationship between the esophagus and left atrium.
- A barium swallow will help physicians assess the size of the left atrium (Dilation) in case of heart failure or long standing mitral stenosis

## The esophagus has <u>3</u> anatomic constrictions:

#### First one (16 cm):

• Located at the junction with the pharynx

#### Second one (23 cm):

• Located at the crossing with the aortic arch and left main bronchus

#### Third one (38 cm)

• Located at the junction with the stomach



1. They might cause difficulties in passing a gastroscope

2. In case of swallowing of caustic liquids (mostly in children), this is where the burning is the worst and strictures develop.

## 3. Esophageal strictures are common place for esophageal carcinoma

The importance of this scale is that when a doctor inserts the gastroscope, they can know where the levels of constriction is so they can move the gastroscope with caution





# **Esophagus Supply**



## Stomach

- It is the most dilated part of the alimentary canal and roughly resembles the letter "J".
- It is located in the upper part of the abdomen.
- It extends from beneath the left coastal region into the epigastric and umbilical regions
- Much of the stomach is protected by the lower ribs

Relations									
Anterior			Posterior (Stomach bed)						
1. 2. 3. 4. 5. 6.	Anterior abdominal wall Left costal margin Base of the left pleura Base of the left lung Diaphragm Left lobe of the liver	1. 2. 3. 4. 5. 6. 7. 8.	Left crus of diaphragm Left suprarenal gland Part of left kidney Spleen Splenic artery Pancreas Transverse colon and mesocolon Lesser sac						

• All structures on the posterior aspect are separated from the stomach by the peritoneum of lesser sac except the spleen which is separated by the greater sac



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#### 2 Orifices

#### 1) Cardiac Orifice

- Gastro-esophageal sphincter (physiological)
- Consist of circular smooth muscles under vagal and hormonal control
- lies opposite to the left seventh costal cartilage 2.5 cm from the sternum
- Prevents esophageal reflux (regurgitation)

#### 2) Pyloric Orifice

#### 2 Borders

#### 1) Lesser curvature

- Right border
- Extends from the cardiac orifice to the pylorus.
- Attached to the liver by lesser omentum (gastrohepatic ligament)

#### 2) Greater curvature

- Left border
- Extends from the cardiac orifice to the pylorus.
- At upper part it's attached to the spleen by gastrosplenic ligament
- At lower part it's attached to the transverse colon by greater omentum

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2 Surfaces

**Stomach Parts** 

 Anterior surface (anterosuperior)
 Posterior surface (posteroinferior)



#### 1) Fundus

• Dome shaped part that is full of gases

3 Parts

• Located to the left of the cardiac orifice at the left 5th intercostal space just below the apex of the heart

#### 2) Body

- Extends from Fundus to incisura angularis
- Incisura angularis is a constant notch on the lesser curvature

#### 3) Pylorus

#### Pylorus Formation

Tubular part of stomach lies in the transpyloric plane L1 (1 cm) to the right of the midline

#### Made of:

#### 1) Pyloric Antrum

• Extends from incisura angularis to the pylorus

#### 2) Pyloric canal

• cavity of the pylorus

#### 3) Pyloric Sphincter

• Thick muscular End

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# **Stomach Supply**

#### Arterial Supply (5)

#### Runs on:

#### Lesser curvature: Right gastric (hepatic artery of celiac) Left gastric (a branch of celiac artery)

- Greater curvature: Right gastroepiploic (from gastroduodenal artery of hepatic)
- Gastrosplenic ligament: Short gastric arteries and Left gastroepiploic (from splenic artery)

#### Venous Drainage (5)

Corresponds to the arteries and all of them drain in the portal vein

- Right and left gastric drain directly into the portal vein
- Short gastric and left gastroepiploic veins drain into the splenic vein
- Right gastroepiploic vein drain into the superior mesenteric vein









# **Stomach Supply**

#### Nerve supply

- Sympathetic: derived from celiac plexus
- Parasympathetic: from both Vagus nerves
  - Anterior vagal trunk: Formed from the left vagus, supplies the anterior surface of the stomach and gives a hepatic branch that gives a branch to pyloric
  - Posterior vagal trunk :Formed from the right vagus supplies the posterior surface of the stomach and gives a branch to the celiac and superior mesenteric plexuses

#### Lymphatic drainage

- The lymph vessels Follow the arteries and drain first into:
  - Left and right gastric nodes
  - Left and right gastroepiploic nodes
  - Short gastric nodes
- Ultimately they drain into the celiac nodes









Q1: At which level does the esophagus ends?

A. T8
B. T10
C. T11
D. C6
Q2: Which of the following is a lateral relation of the cervical Esophagus?
A. Trachea
B. Aortic arch
C. Lobes of thyroid gland
D. Pericardium
Q3: Which of the following is a direct branch of the celiac artery?

A. Left gastric artery

B. Right gastric artery

C. Short gastric artery

D. Right gastroepiploic artery

Q4: barium swallow will help to assess which of the following?

A. left ventricle dilation

B. left atrial dilation

C. RIght atrial dilation

D. Right ventricle dilation

	С	C	A	В	C	A	В	A				
<b>Q5:</b> Which one is from the posterior relations of the stomach :												
A. Anterior abdominal w	all											
B. Diaphragm												
C. Left crus of diaphragn	ı											
D. Base of the left pleura												
<b>Q6</b> : The Lesser curvature is attached to which of the following?												
A. liver by gastrohepatic ligament												
B. liver by gastrosplenic	ligamer	nt										
C. Colon by lesser omente	um											
D. Colon by gastrosplenie	c ligame	nt										
<b>Q7:</b> The Fundus of the sto	mach is	located	at whic	h level?								
A.4th intercostal space just below the apex of the heart												
B. 5th intercostal space just below the apex of the heart												
C. 5th intercostal space j	ust abov	ve the ap	ex of the	e heart								
D. 6th intercostal space j	ust abov	ve the ap	ex of th	e heart								
Q8: Second esophageal co	onstrict	ion is lo	cated at	which o	f the fol	lowing?						
A. at the crossing with the aortic arch and left main bronchus												
B. at the junction with the stomach												

Q1

C. at the junction with the pharynx

D. at the junction with the Larynx

Q2

Q3

Q5

Q4

Q6

Q7

Q8

10

## Members board

#### **Team leaders**

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- Nouf Al Hussaini
- Danah Al Halees
- Rema Al Mutawa
- Maha Al Nahdi
- Razan Al zohaifi
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