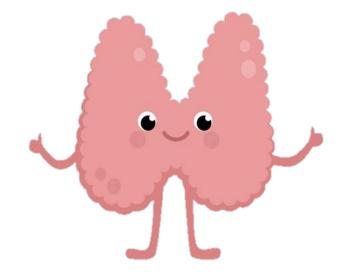
# Anatomy & Embryology of Adrenal Glands

**Endocrine block-Anatomy-Lecture 3** 

Editing file







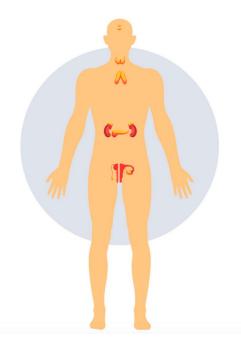


# **Objectives**

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

- Location, shape and relations of the right and left adrenal glands.
- Blood supply, lymphatic drainage and nerve supply of right and left adrenal glands
- Parts of adrenal glands and function of each part.
- Development of adrenal gland and common anomalies.

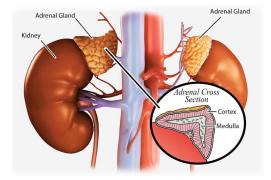
**Color guide :** Only in boys slides in **Green** Only in girls slides in **Purple** important in **Red** Notes in **Grey** 



# **Suprarenal Glands**

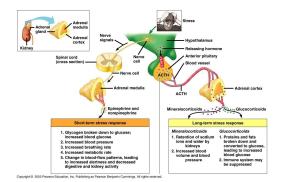
## Structure

- They are yellowish retroperitoneal organs located at the upper poles of each kidney at the level of T12
- They are surrounding by renal fascia with kidney and separated from the kidney by perirenal fat (kidney is covered by 4 layers: capsule, perirenal fat, renal fascia and pararenal fat.)
- Each gland is composed of an outer yellow cortex and an inner dark brown medulla



# Function

- It is a component of the hypothalamic-pituitary-suprarenal axis that is responsible for coordinating stress response and metabolism
- The cortex secretes hormones that include:
  - mineralocorticoids: concerned in fluid and electrolyte balance
  - glucocorticoids: concerned in metabolism of carbohydrates, fats, and proteins
  - sex hormones: Small amounts, play a role in the prepubertal development of the sex organs
- The medulla secretes the catecholamines: epinephrine and norepinephrine



# Suprarenal Glands: Shape, location and Relations

### **Right Suprarenal Gland**

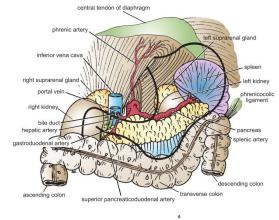
- <u>Shape</u>: Pyramidal or triangular
- **Location**: caps the upper pole of the right kidney
- <u>Relations</u>:
  - Anterior: right lobe of the liver and IVC
  - **Posterior: diaphragm**
  - Medial: celiac plexus and ganglia

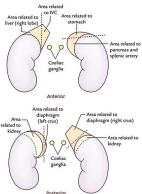
### Left Suprarenal Gland

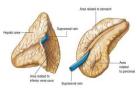
- <u>Shape</u>: crescentic or semilunar
- <u>Location</u>: Extends along the medial border of the left kidney from the upper pole to the hilum
- <u>Relations</u>:

7

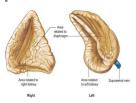
- Anterior: pancreas, stomach and lesser sac
- **Posterior: diaphragm**
- Medial: celiac plexus and ganglia









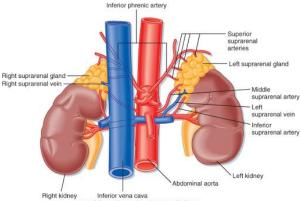


# Suprarenal Glands: Supply

## **Arterial Supply**

### Each gland is supplied by three arteries

- Superior suprarenal artery
  - origin: inferior phrenic a branch from abdominal aorta
- Middle suprarenal artery
  - origin: abdominal aorta single branch
- Inferior suprarenal artery
  origin: renal arteries



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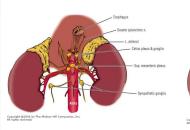
### Venous Drainage

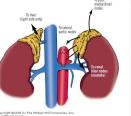
A single vein emerges from the hilum of each gland

- Right Suprarenal vein
  - drain into: inferior vena cava
- Left suprarenal vein
  - drain into: left renal vein

## Nerve Supply

- Sympathetic: preganglionic sympathetic fiber
  - derived from: splanchnic nerves
  - Most of the nerves end (postganglionic) in the medulla





## Lymph Drainage

 drains into: lateral aortic lymph nodes

5

# **Origin of Adrenal Glands**

# **Adrenal Glands**

• The two parts of the adrenal gland develop from two different origins

### Adrenal Cortex:

- is mesodermal in origin
- Develops from the coelomic epithelium from the posterior abdominal wall

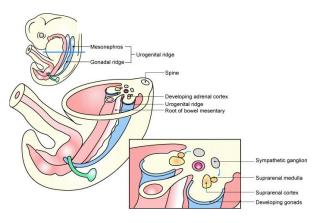
### Adrenal Medulla:

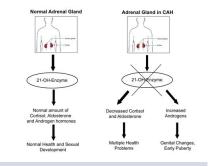
- is ectodermal in origin
- Develops from the neural crest cells (chromaffin cells)

# **Congenital Disorders**

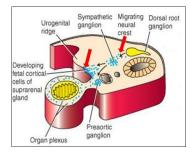
## Congenital Adrenal Hyperplasia (CAH)

- Abnormal increase in cortical cells resulting in excessive androgen production during fetal period
- In females, it may lead to  $\rightarrow$  muscularization of external genitalia and enlarged clitoris
- In males, it may remain undetected in early infancy
- In both sexes, later in childhood, this may lead to → rapid growth and accelerated skeletal maturation





# **Development of Adrenal Gland**





# • Derived from the neural crest cells of the adjacent sympathetic ganglia

• it forms a mass medial to the fetal cortex (fetal cortex is C-shaped)

The Medulla

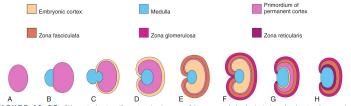
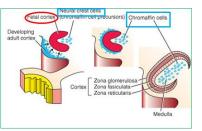


FIGURE 12-27 Schematic drawings illustrating development of the suprarenal glands. A, At 6 weeks, showing the mesodermal primordium of the fetal cortex. B, At 7 weeks, showing the addition of neural crest cells. C, At 8 weeks, showing the fetal cortex and early permanent cortex beginning to encapsulate the medulla. D and E, Later stages of encapsulation of the medulla by the cortex. F, Gland of a neonate showing the fetal cortex and two zones of the permanent cortex. G, At 1 year, the fetal cortex has almost disappeared. H, At 4 years, showing the adult pattern of cortical zones. Note that the fetal cortex has disappeared and that the gland is much smaller than it was at birth (f).

# The cortex

- During 6th week of development, mesenchymal tissue aggregate forming the fetal cortex
- The fetal cortex is derived from mesothelium tissue between the developing gonads (gonadal ridge) and the dorsal mesentery



### Permanent cortex

- A second wave of mesenchymal cells arise from the mesothelium
- This encloses the fetal cortex forming a thinner permanent (definitive) cortex

## Differentiation

- Differentiation begins mainly during the late fetal period
- The cortex differentiate into 2 zones:
  - Zona glomerulosa
  - Zona fasciculata
  - These 2 zones are presented at birth while a 3rd zone appears at the end of the third year called:
    - Zona reticularis

is not recognizable until the end of 3rd year

# **Clinical notes**

• The suprarenal gland is enclosed within the renal fascia with the kidney but in a separate compartment

• This allows the two organs to be separated easily during surgery

- The suprarenal gland of the fetus is 10-20 times larger than the adult's glands relative to the body weight, and are large compared with the kidneys
- This is due to the extensive size of the fetal cortex (The medulla remains relatively small until after birth)
- The glands size rapidly decreases during the first 2-3 weeks after birth due to the regression of the fetal cortex

# 3

- It's involution (shrinkage) is largely completed in the first year of life
- During this process, the cortex is very susceptible to trauma at birth leading to severe hemorrhage

# QUIZ

Q1: Which of the following structures lies anterior to the Right Adrenal gland ?

A. abdominal aorta

B. Right lobe of the liver

C. diaphragm

D. superior vena cava

- **Q2:** Nerve fibers that are supplying the adrenal gland are?
- A. Preganglionic sympathetic
- B. Postganglionic parasympathetic
- C. Preganglionic parasympathetic
- D. Postganglionic sympathetic
- Q3: The suprarenal gland is separated from the kidney by:

A. Adrenal fascia

**B.** Perirenal fat

C. Peritoneal fat

D. renal fascia

Q4: Adrenal gland is derived from \_\_\_\_\_

A. Endoderm

**B. Mesoderm** 

C. Endoderm ,Ectoderm and mesoderm

D. Ectoderm and mesoderm

Q5: postganglionic fiber that supply adrenal gland end in								
A. coeliac gangila								
B. medulla								
C. cortex								
D. the hilum of the adrenal								
<b>Q6:</b> Which of the following structures lies posterior to the Left Adrenal gland ?								
A. diaphragm								
B. lumbar vertebra								
C. right lobe of the liver								
D. celiac plexus and ganglia								
Q7: Adrenal Medulla Develops from								
A. posterior abdominal wall								
B. coelomic epithelium								
C. neural crest								
D. neural tube								
<b>Q8:</b> adrenal gland supplied by								
A. supraspinatus arterie	2S							
B. superior phrenic								
C. splenic artery								
D. abdominal aorta								

Q1

Q2

Q3

Q5

Q4

Q6

Q7

Q8

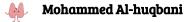
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# Members board

### **Team leaders**

• Abdulrahman Shadid

### Boys team:



- Salman Alagla
- Ziyad Al-jofan
- Ali Aldawood
- Khalid Nagshabandi
- Sameh nuser
- Abdullah Basamh
- Alwaleed Alsaleh
- Mohaned Makkawi
- Abdullah Alghamdi



• Ateen Almutairi

Girls team :

- Ajeed Al Rashoud
- Taif Alotaibi
- Noura Al Turki
- Amirah Al-Zahrani
- Alhanouf Al-haluli
- Sara Al-Abdulkarem
- Renad Al Haqbani
- Nouf Al Humaidhi
- Jude Al Khalifah
- Nouf Al Hussaini
- Danah Al Halees
- Rema Al Mutawa
- Maha Al Nahdi
- Razan Al zohaifi
- Ghalia Alnufaei

