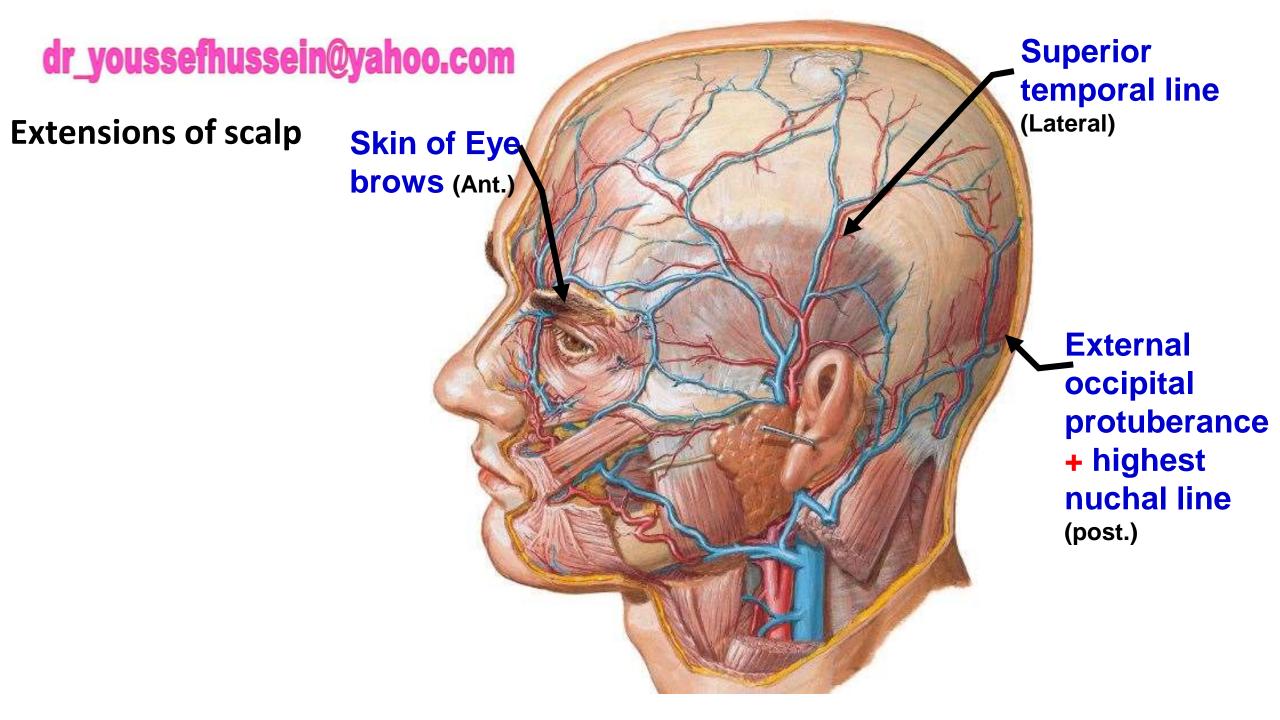
# Dr.Yousef & Dr.Abulmaaty labs

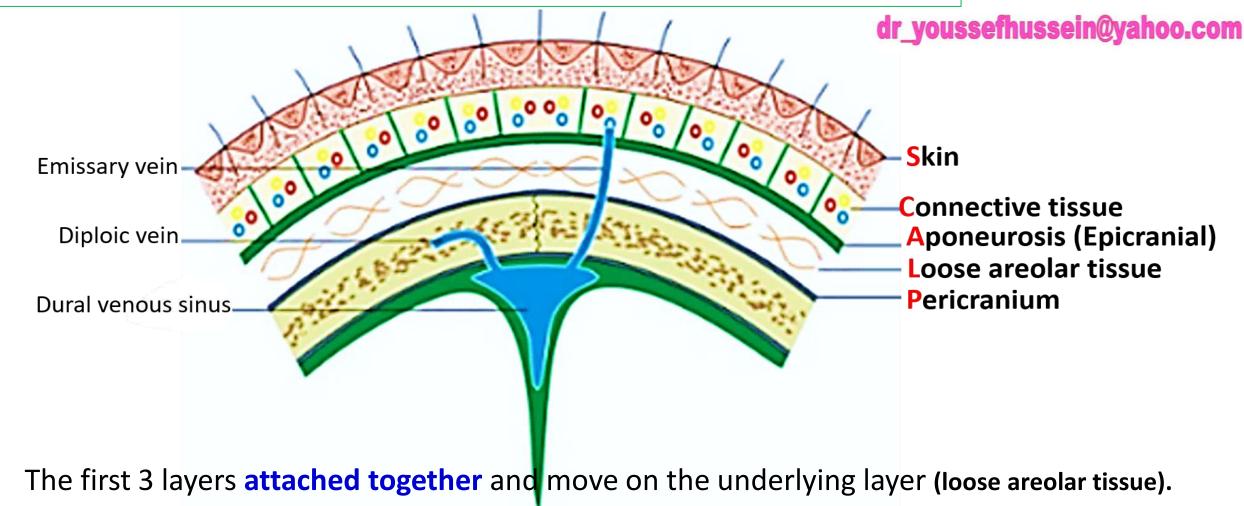




dr\_youssefhussein@yahoo.com

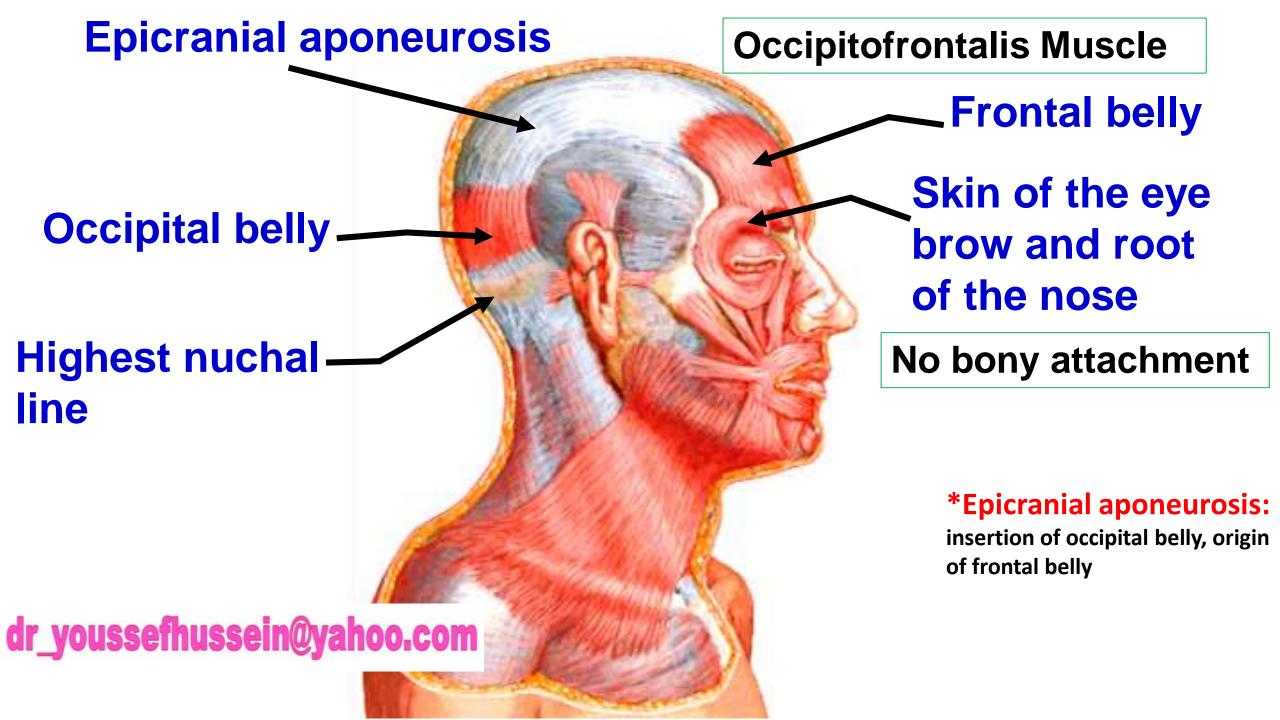


# Layers of the scalp: 5 layers (S.C.A.L.P.)



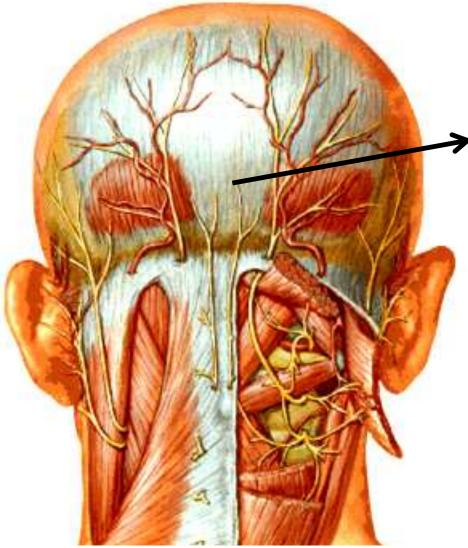
- \*Loose areolar tissue = dangerous zone
- Pericranium (periosteum): adherent at the sutures of the skull



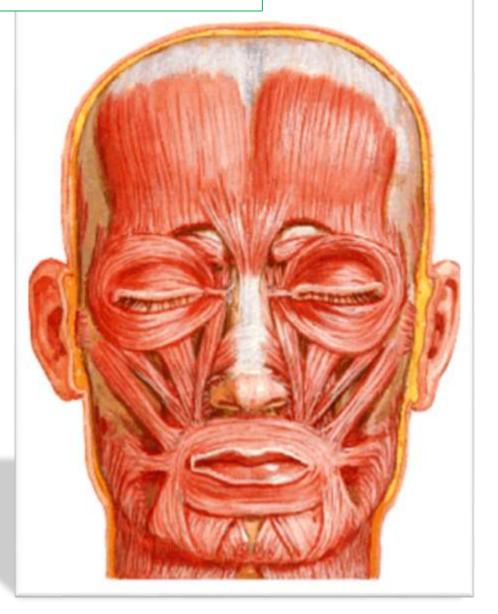


# **Occipital bellies**

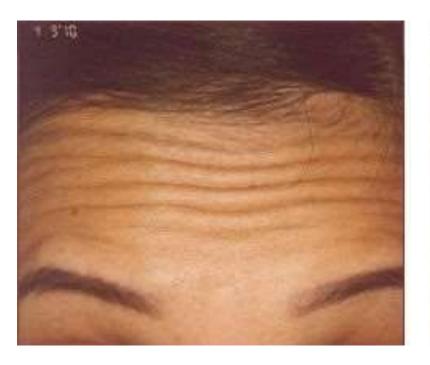
# **Frontal bellies**



epicranial aponeurosis (galea aponeurotica).



dr\_youssefhussein@yahoo.com\_





- \* Action of occipital belly
- Pull the scalp backward leading to smooth skin of forehead.

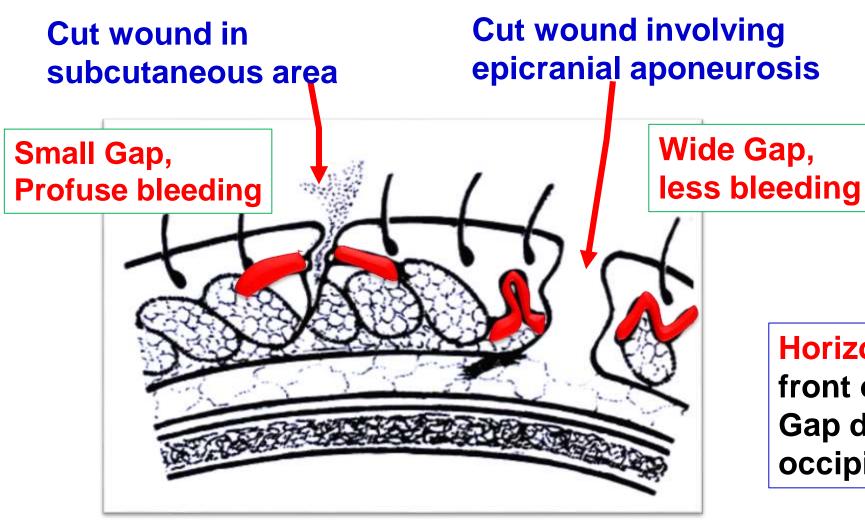
- \* Action of frontal belly
- Elevate the eye brows (expression of surprise).



- Bleeding under the first 3 layers forms diffuse hematoma extending throughout the scalp and reach the upper eye lids (Black eye).



- Fracture of the skull bone produces a localized hematoma because the periosteum is firmly attached to the sutures.

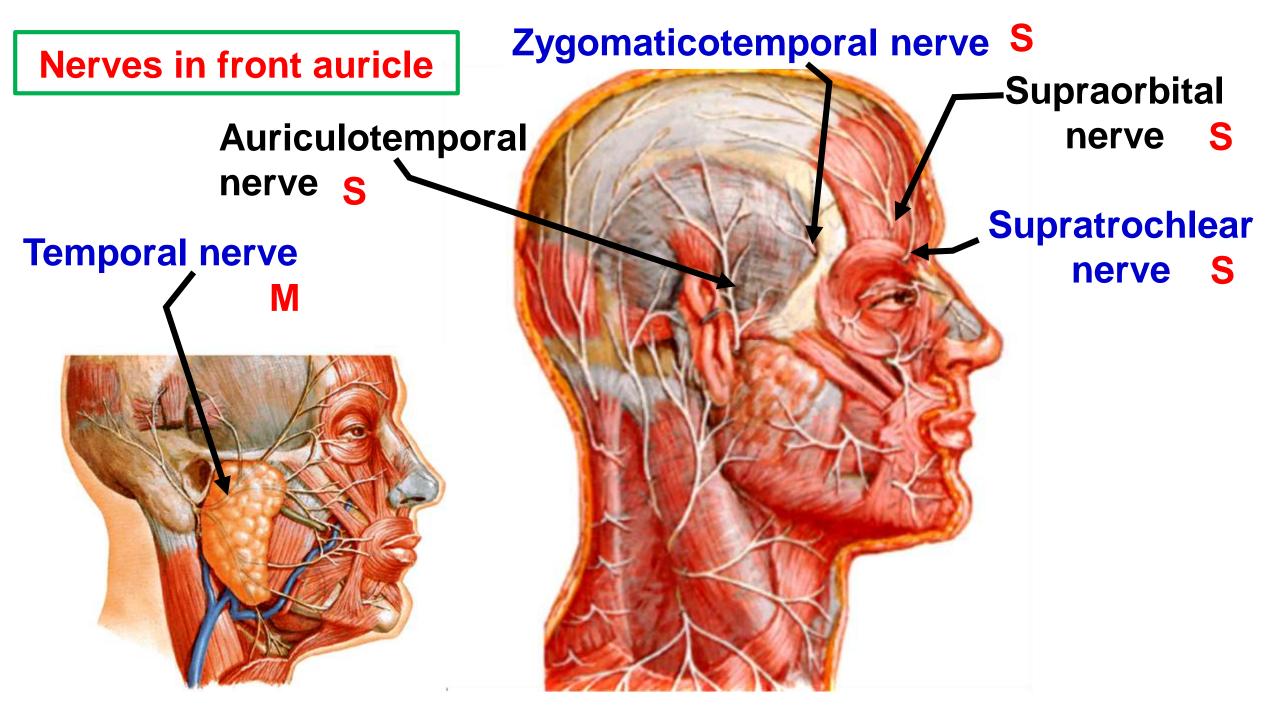


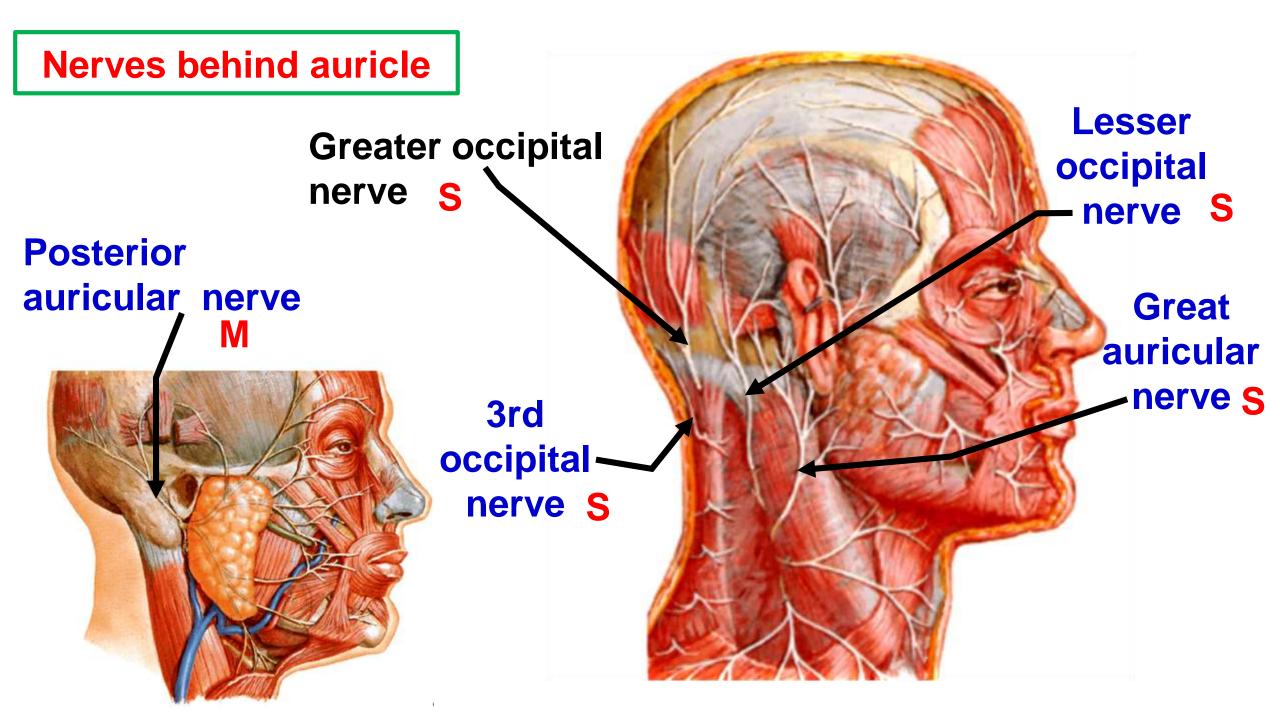


Horizontal Cut wound of The front of scalp leading to Wide Gap due to retraction of occipitofrontalis muscle

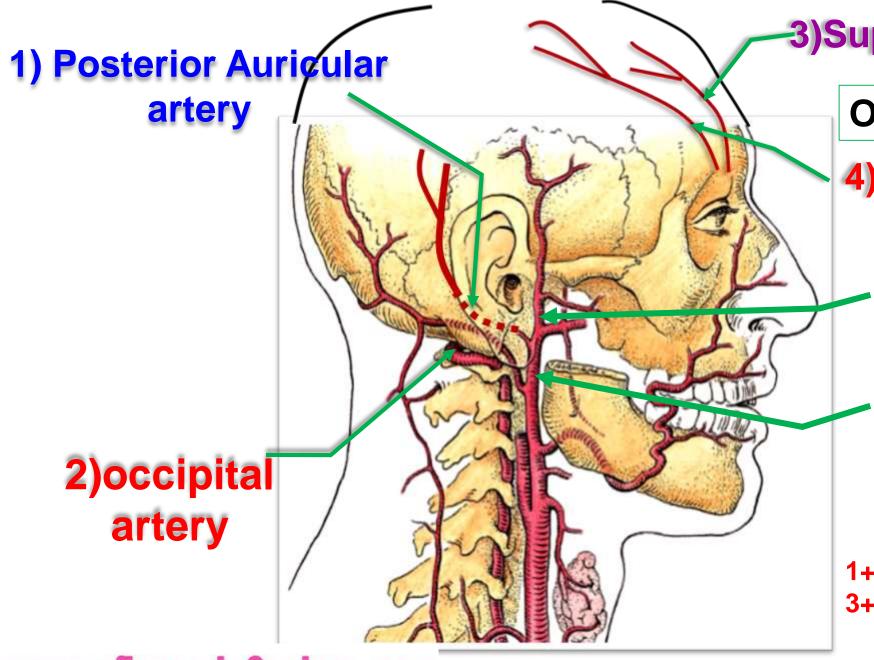
dr\_youssefhussein@yahoo.com











-3)Supratrochlear artery

**Ophthalmic artery** 

4)Supraorbital artery

5)Superficial temporal artery

External carotid artery

1+2: behind the auricle

3+4+5: in front of the auricle

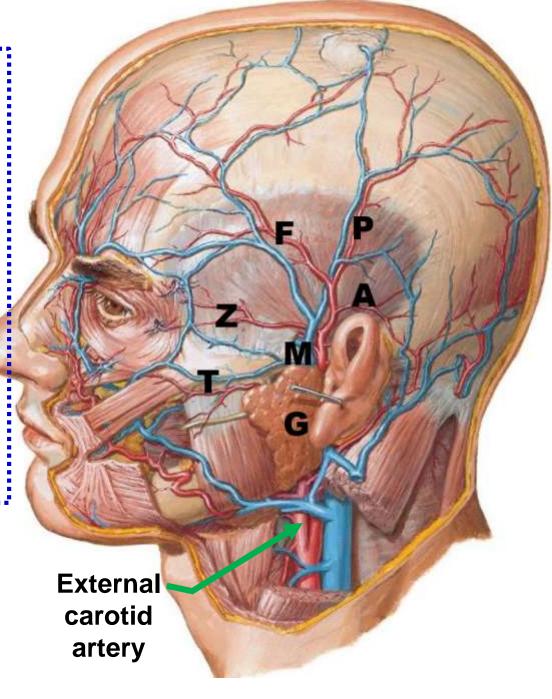
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#### Superficial temporal artery:

-Smallest terminal branches of the external carotid artery

#### • Branches:

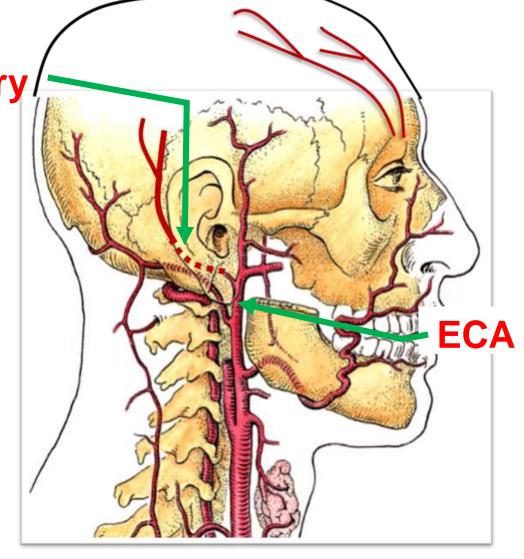
- (1) Glandular to the parotid gland.
- (2) Transverse facial artery.
- (3) **Zygomaticoorbital** artery.
- (4) Anterior auricular artery.
- (5) Middle temporal artery (the largest branch)
- (6)Terminal branches (Frontal & Parietal): to scalp.



Posterior auricular artery

Posterior auricular artery

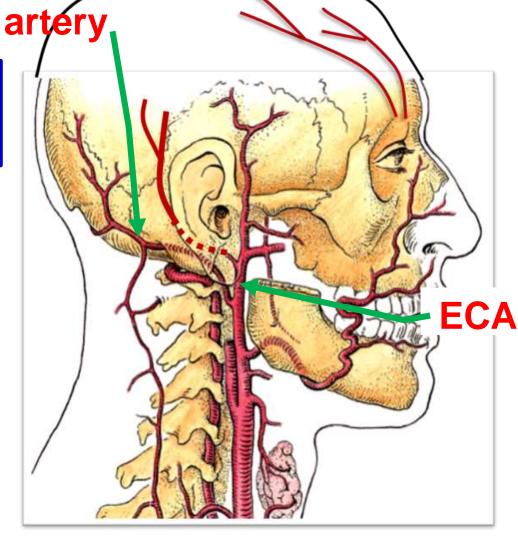
-branch of the external carotid artery.

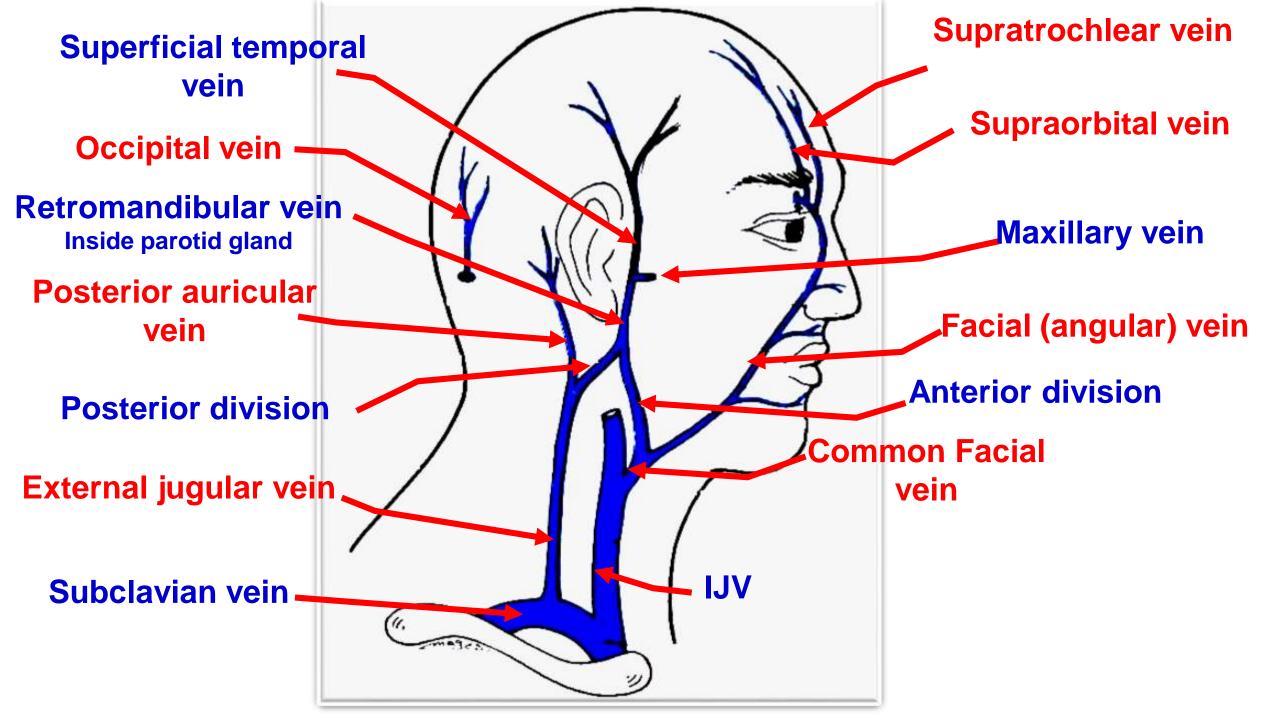


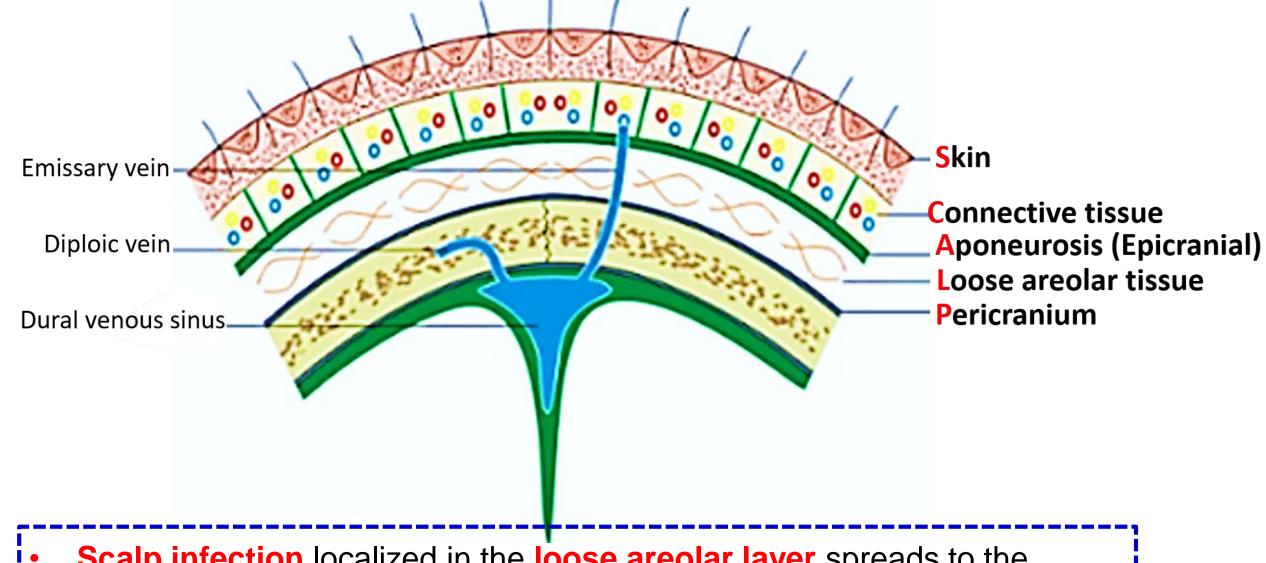
Occipital artery

Occipital artery

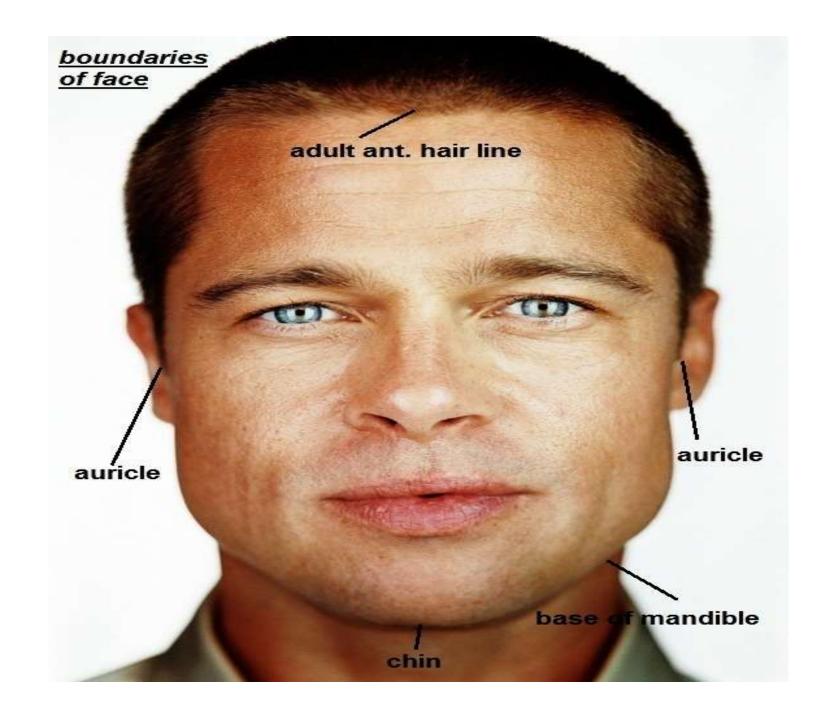
-: branch of the external carotid artery.







 Scalp infection localized in the loose areolar layer spreads to the intracranial dural venous sinuses through emissary veins (valveless), causing meningitis or septicemia.



#### STRUCTURE OF SKIN:

## 3 layers:

- 1) skin
- 2) superficial fascia
- 3) muscles of face

#### Fascia:

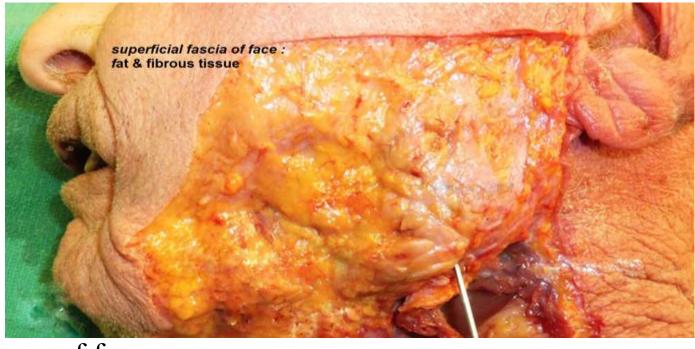
#### superficial:

-contains fat, muscles of face, vessels and nerves of face.

#### deep:

absent







### STRUCTURE \*\*\*

#### skin:

1-wounds of face tend to gap.

2-Horizontal wrinkles of forehead

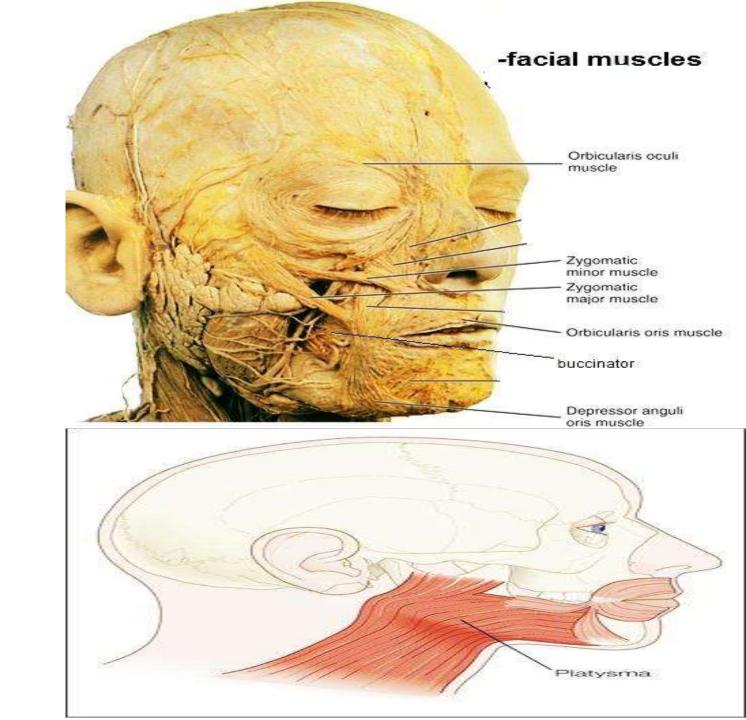
3-Crow's foot wrinkles at lateral angle of the eye.



#### **Muscles**

• present in superficial fascia

\*platysma included in muscles of facial expression.

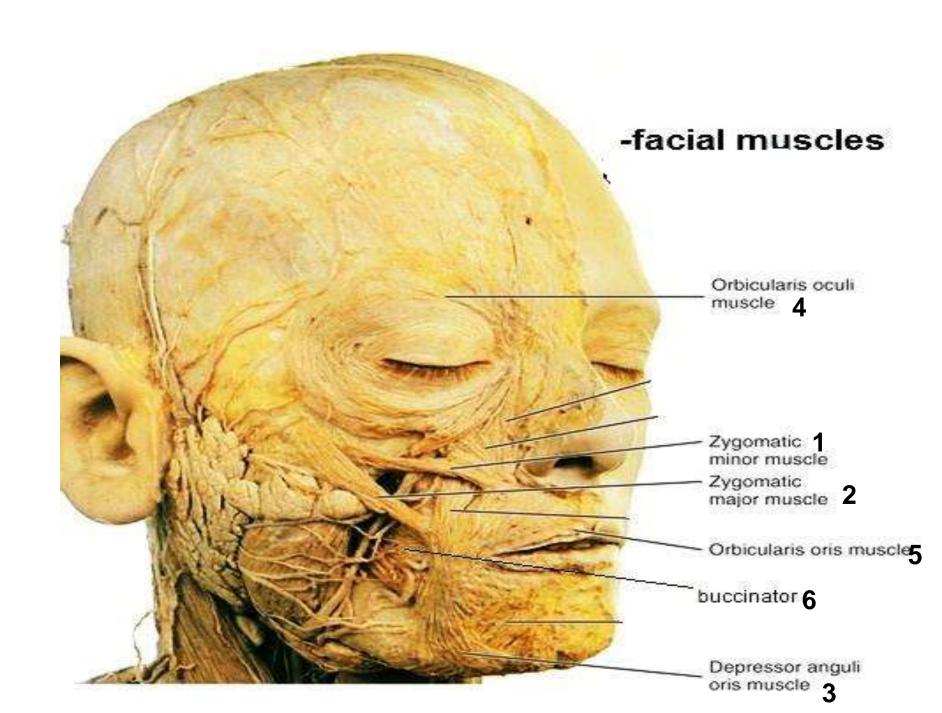


#### **Muscles**

Small muscles

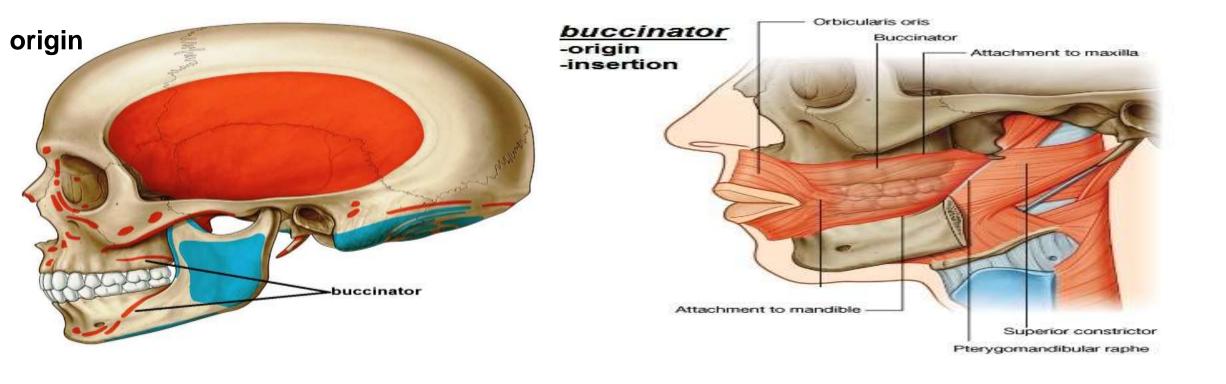
$$1+2+3$$

Large muscles



#### Muscles

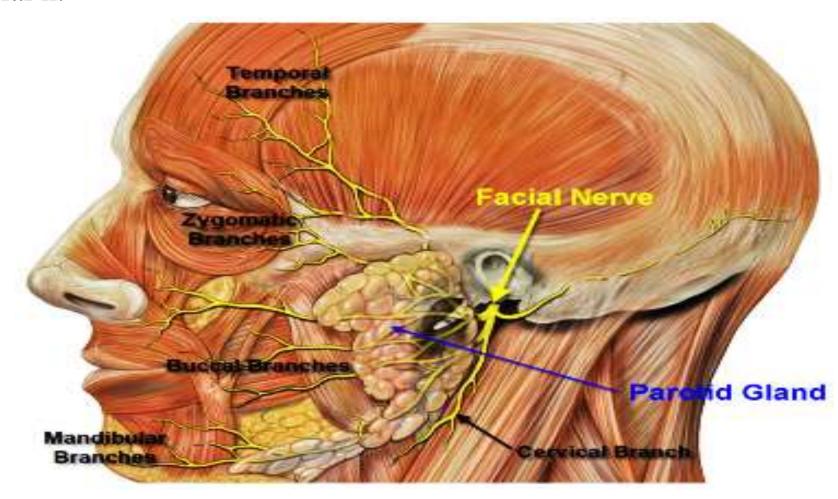
**Buccinator:** muscle of cheek



#### **Muscles**

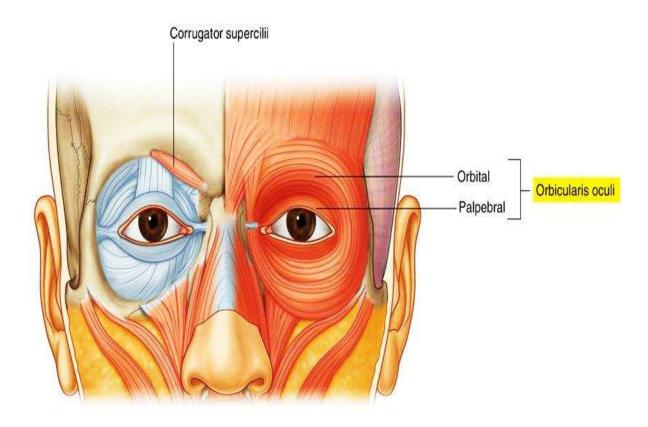
#### **N.S of Buccinator**

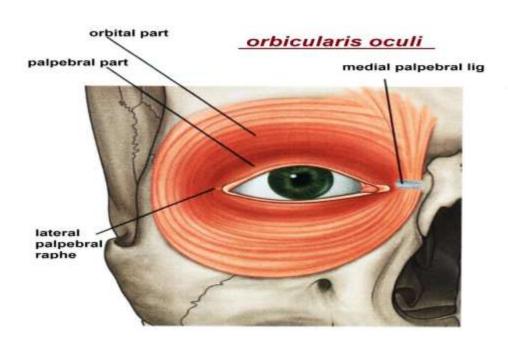
buccal br. of facial n.



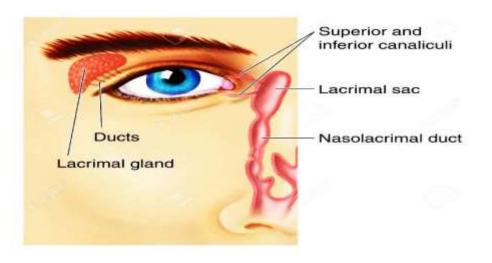
## **Muscles**

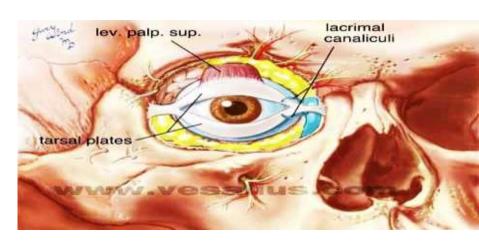
#### Orbicularis Oculi: sphincter of eye

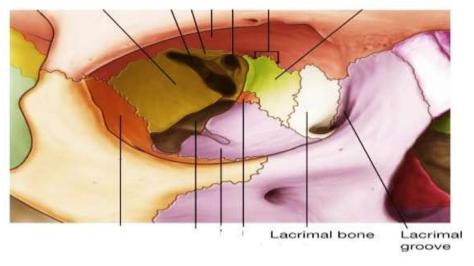




# Muscles orbicularis oculi.







Muscles

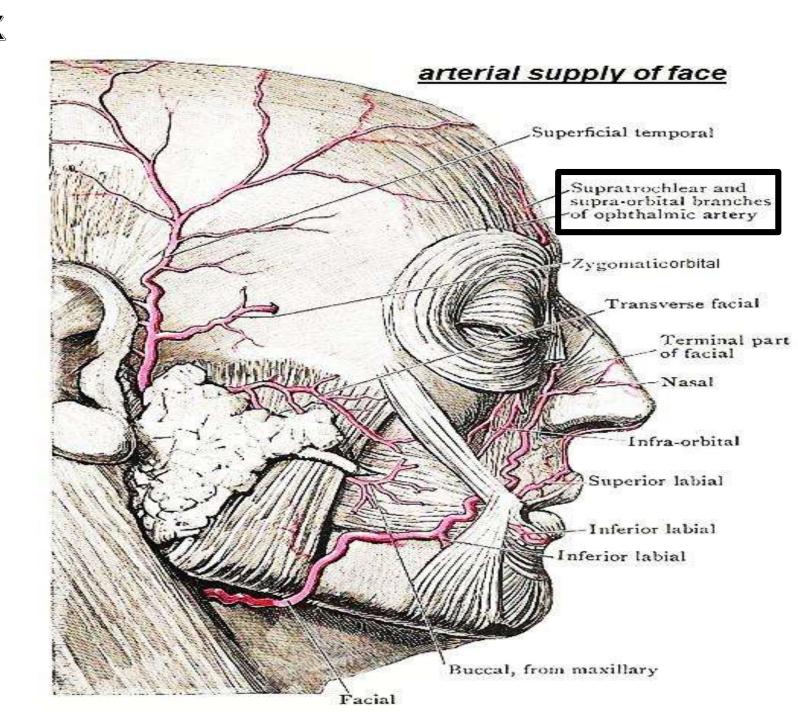
Orbicularis oris: sphincter of mouth



### ARTERIAL SUPPLY OF FACE

internal carotid art: gives
ophthalmic art. Which gives

- supratrochlear art.
- -supraorbital art.



### ARTERIAL SUPPLY OF FACE

**External carotid art:** gives

superficial temporal art. gives

transverse facial art.

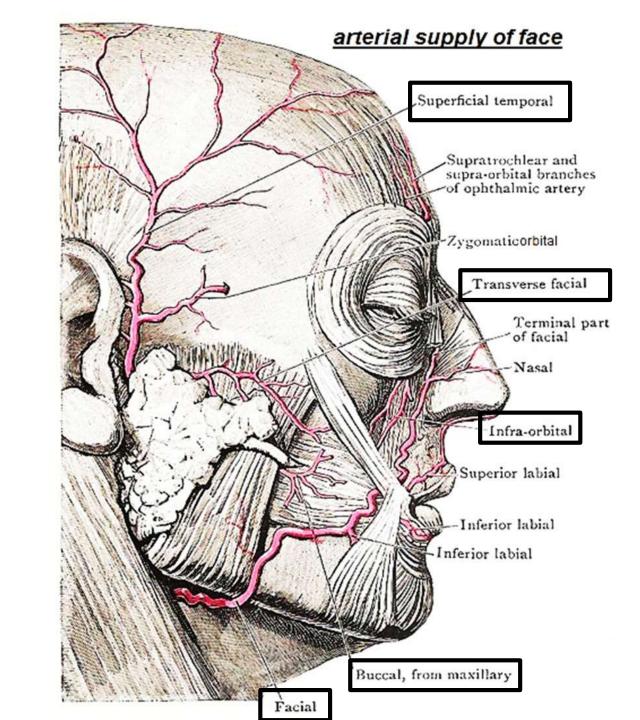
maxillary art.: gives

infra orbital art.

inferior alveolar art.

buccal art.

facial art. (main)



## ARTERIAL SUPPLY OF FACE

facial art. (main)

**Brs:** in face

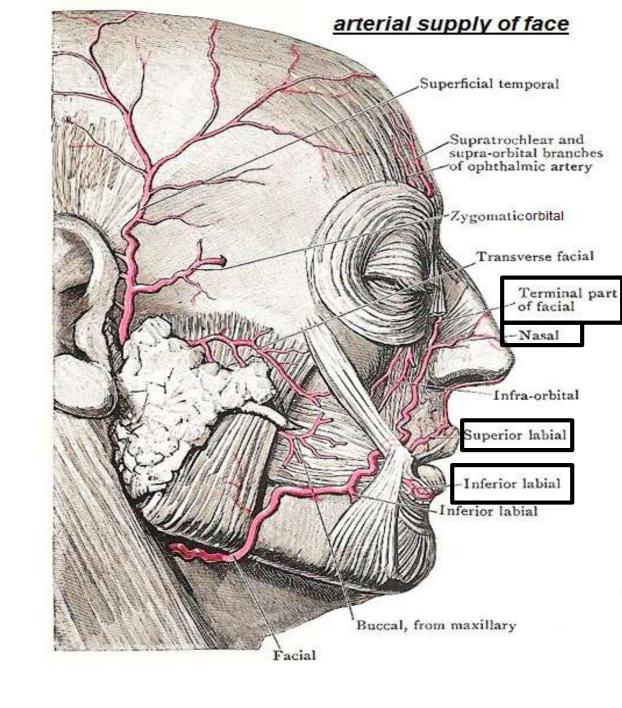
inferior labial:

superior labial: gives septal br

<u>lateral nasal</u>:

angular: the terminal part at

medial angle of eye



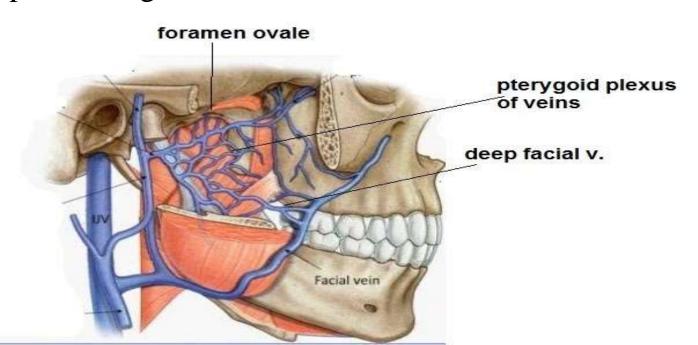
#### VENOUS DRAINAGE OF THE FACE

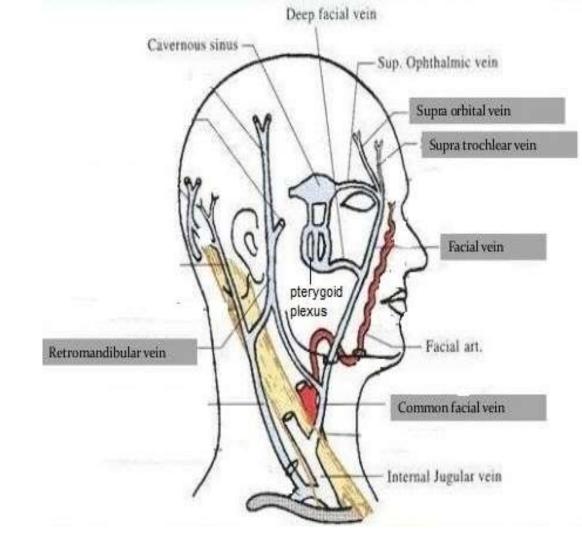
#### **Connections:**

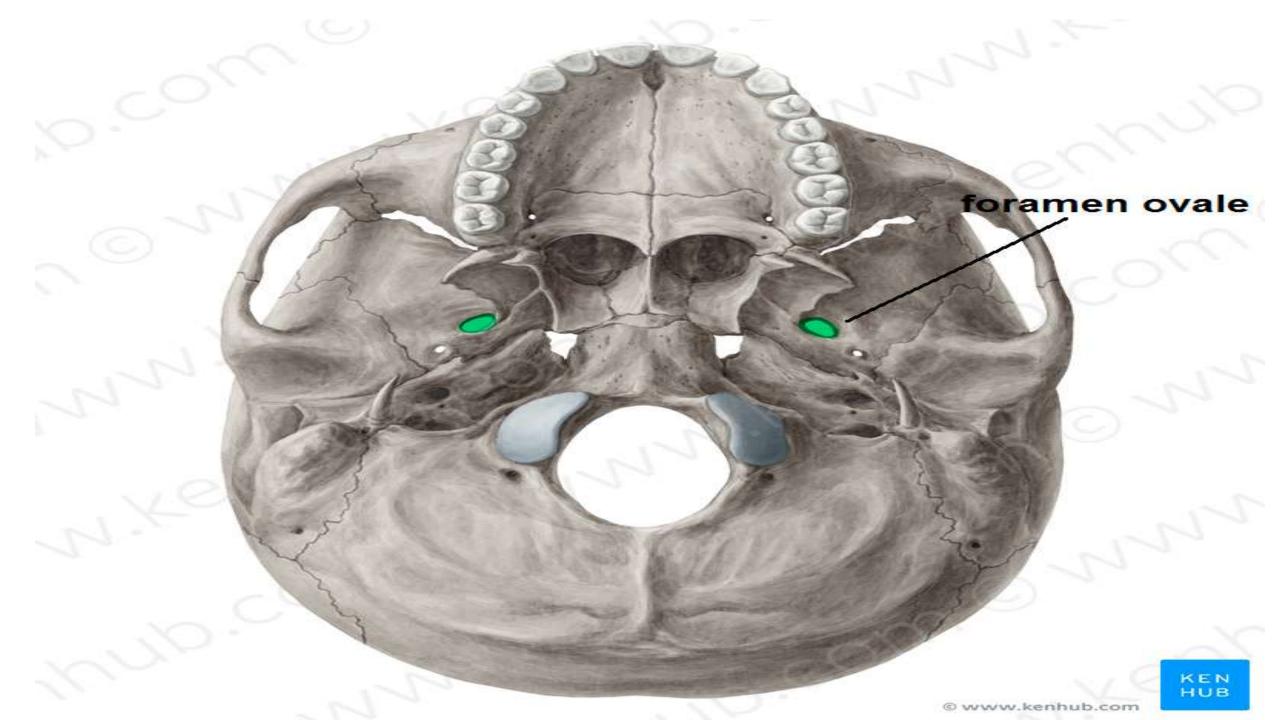
ant. facial v. is connected to **cavernous sinus** by 2 valveless veins

1-superior ophthalmic v.

2-deep facial v. to pterygoid plexus of veins to cavernous sinus through emissary v. pass through foramen ovale







## APPLIED ANATOMY:

Danger Triangle of Face





# الأستاذ الدكتور يوسف حسين

أستاذ التشريح وعلم الأجنة - كلية الطب - جامعة الزقازيق - مصر

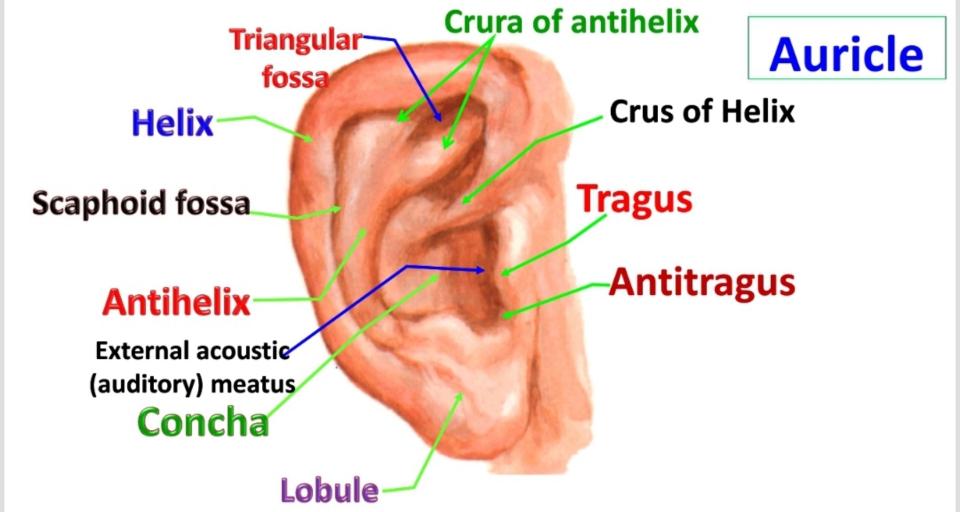
رئيس قسم التشريح و الأنسجة و الأجنة - كلية الطب - جامعة مؤتة - الأردن

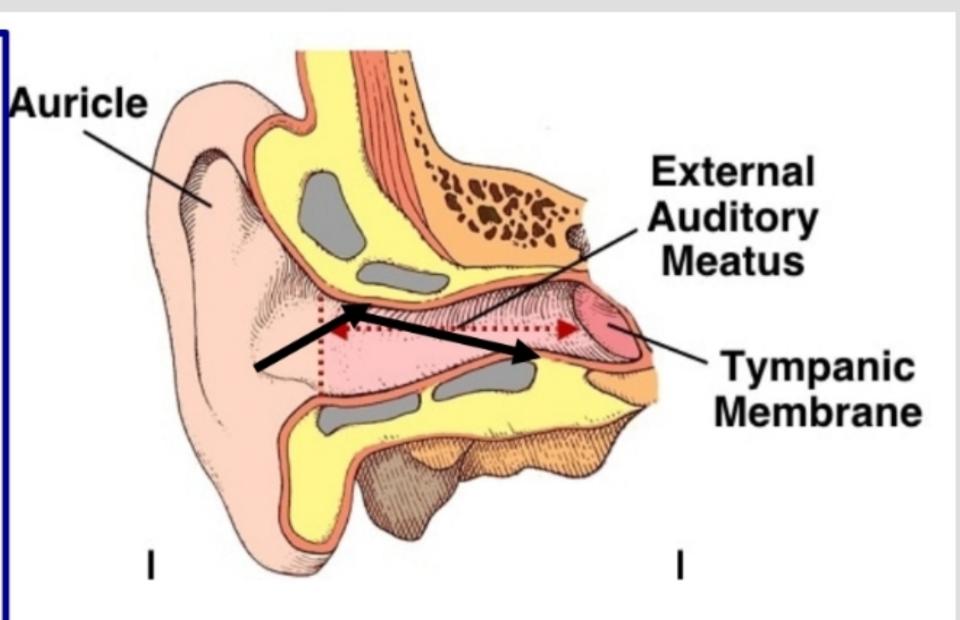
كتوراة من جامعة كولونيا المانيا

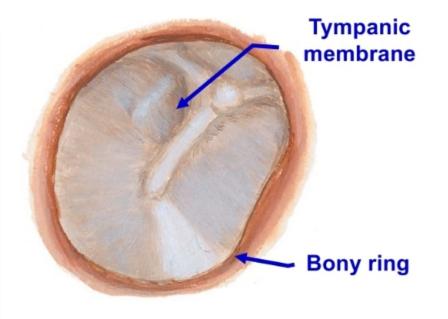
Prof. Dr. Youssef Hussein Anatomy اليوتيوب

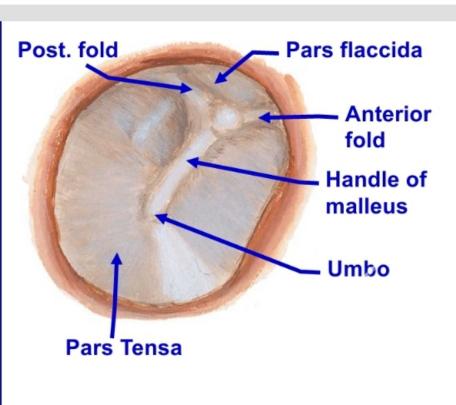
جروب الفيس د. يوسف حسين (استاذ التشريح)



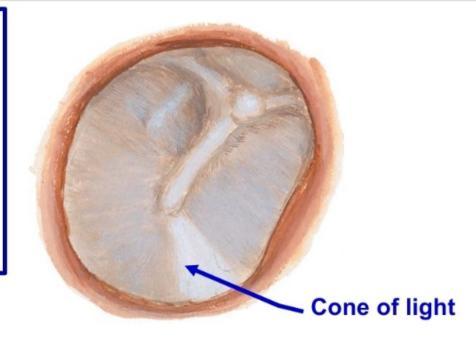








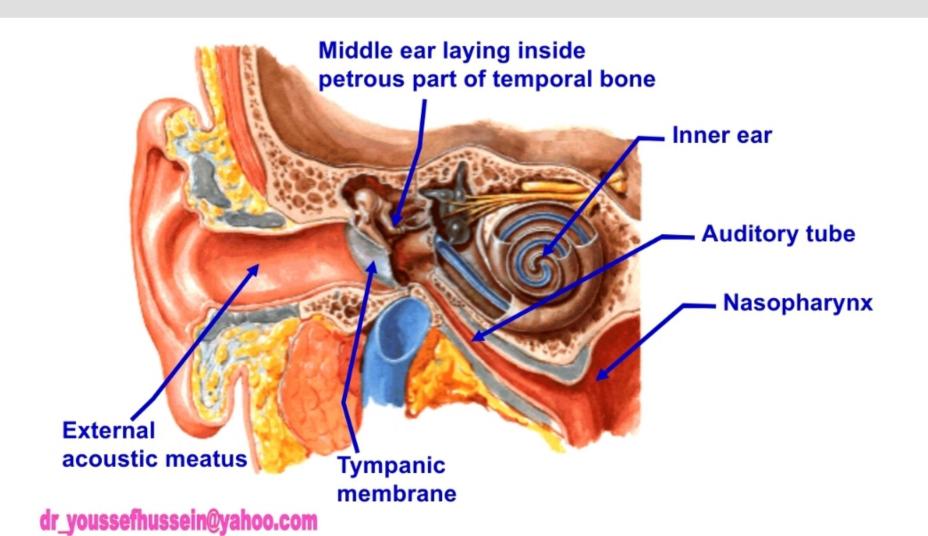
 Cone of light, Shining light on tympanic membrane causes a cone-shaped reflection of light in anterior inferior quadrant during examination of tympanic membrane with an Otoscope.

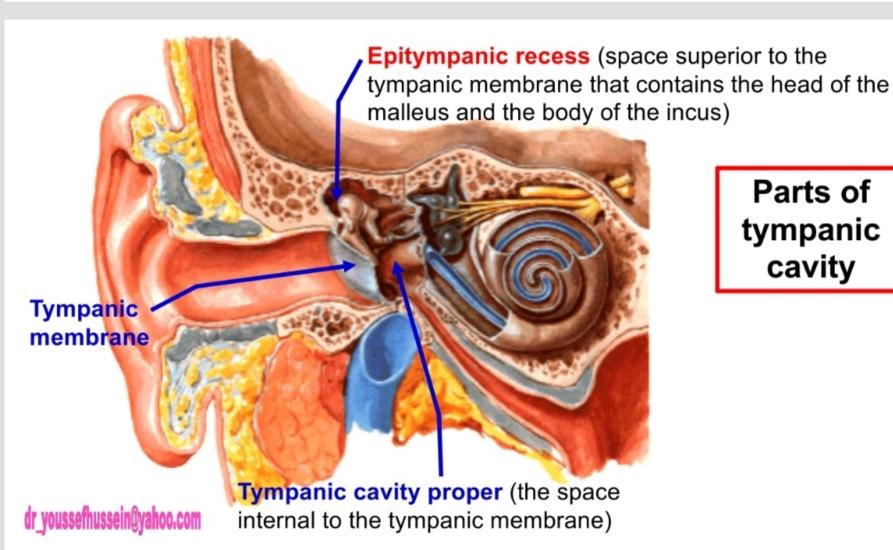




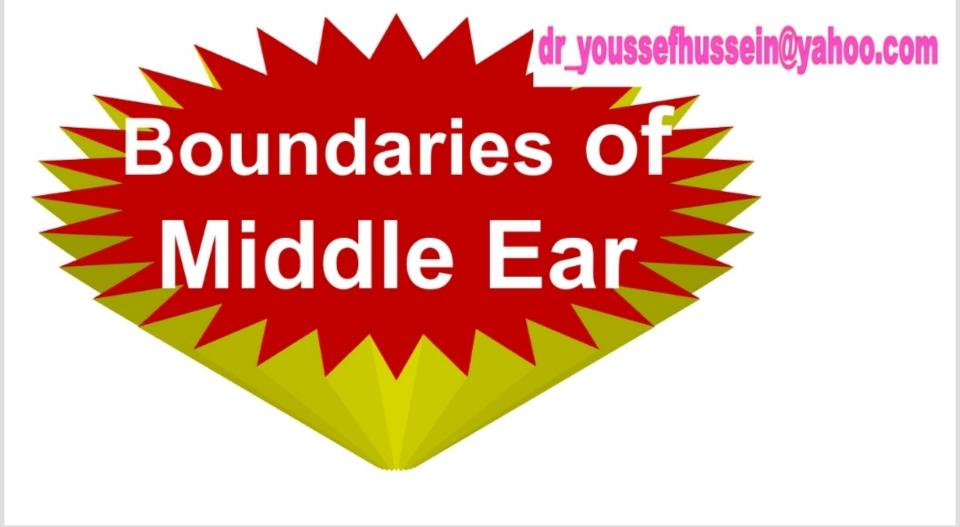
Otoscopic examination

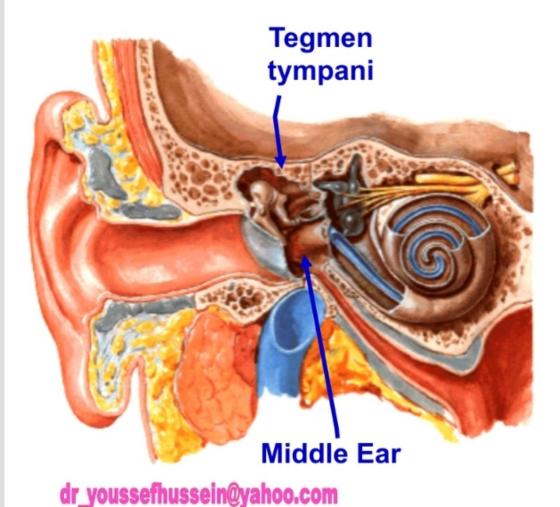




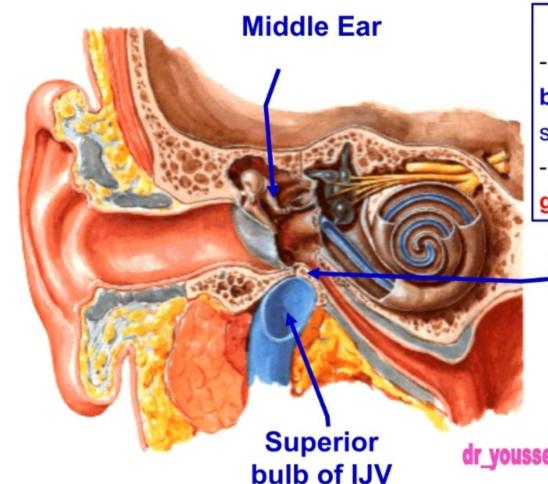


Parts of tympanic cavity





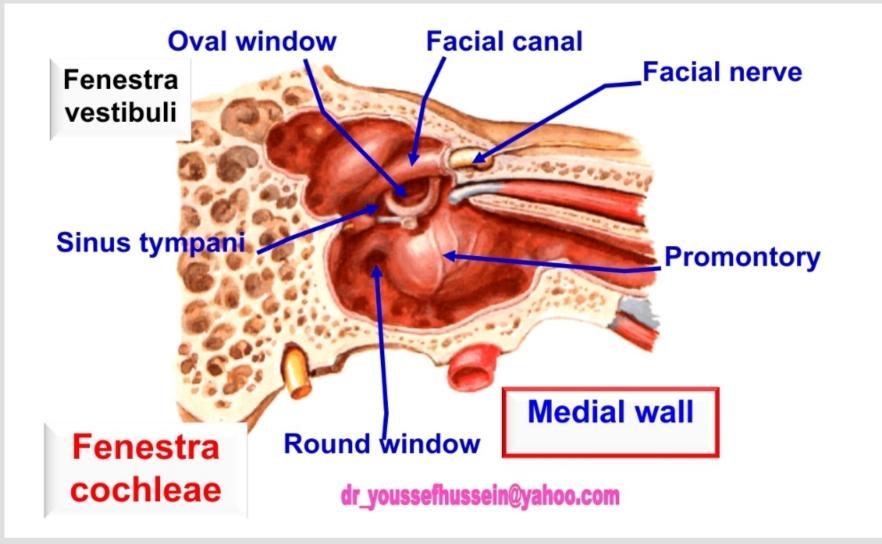
- Roof (tegmental wall)
- It is formed by a thin plate of the petrous part of the temporal bone (called tegmen tympani) which separates it from the middle cranial fossa.



#### Floor (jugular wall)

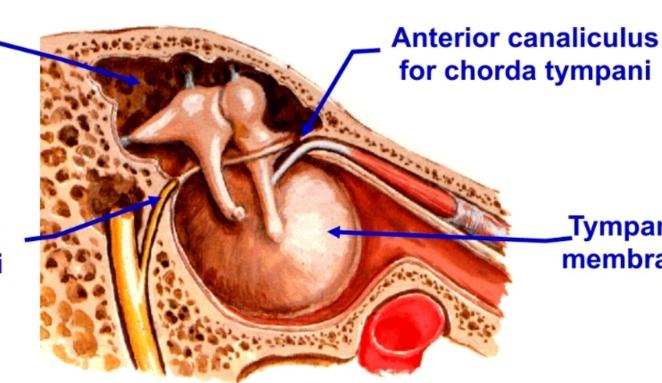
- It is formed by a thin plate of bone which separates it from superior bulb of internal jugular vein.
- It is pierced by tympanic branch of glossopharyngeal nerve.

Thin plate of bone



**Epitympanic** recess

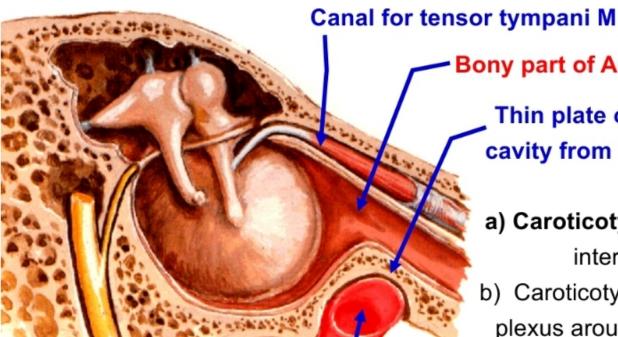
**Posterior** canaliculus for chorda tympani



Tympanic

membrane

Lateral wall



Bony part of Auditory (Eustachian) tube

Thin plate of bone which separates cavity from ICA within carotid canal.

It is pierced by:

- a) Caroticotympanic artery (branch of internal carotid artery).
- b) Caroticotympanic nerve (sympathetic plexus around internal carotid artery).

Anterior wall

Internal carotid artery

Elevation of lateral semicircular canal

Aditus to mastoid antrum

Pyramid containing stapedius muscle

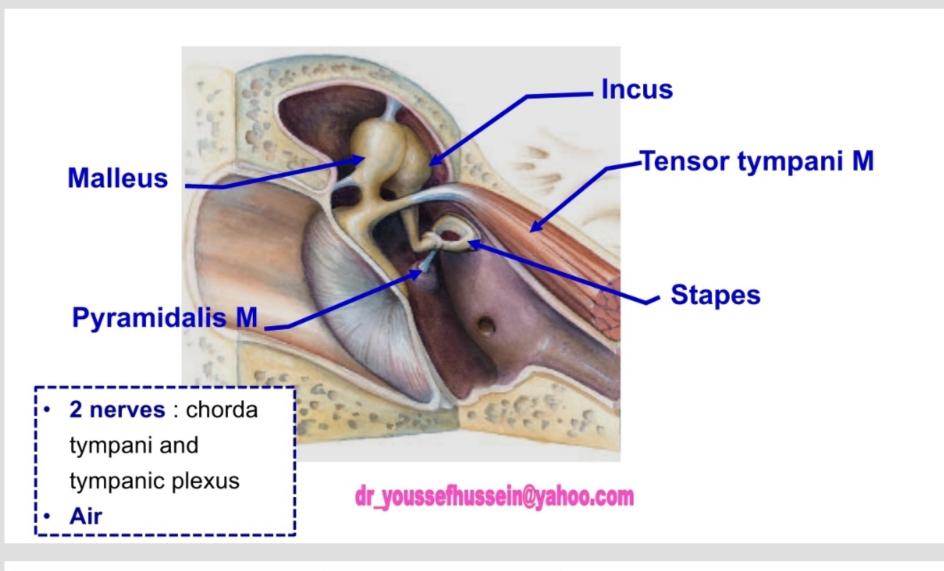
Vertical part of facial canal

**Facial nerve** 

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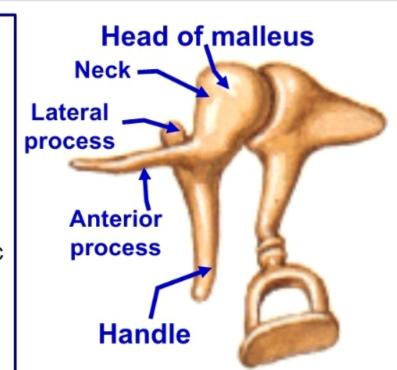
**Posterior wall** 



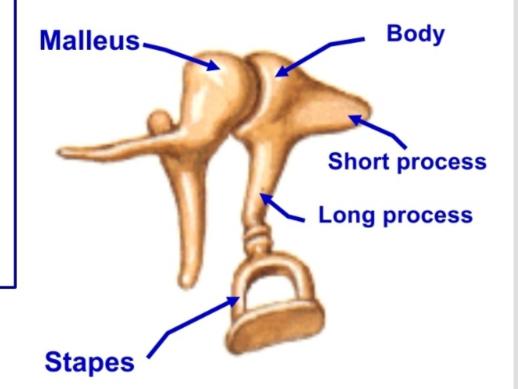


#### Malleus: المطرقة

- It is hammer-shaped. It is the largest one.
- It is formed of
- a- Head articulates with the incus.
- **b- Neck** is the narrow constriction just below the head.
- **c- Handle** is attached to inner surface of tympanic membrane.
- \* The handle receives the **insertion** of the **tensor tympani** muscle.
- **d- Anterior process** connected to the petrotympanic fissure by a ligament.
- e- Lateral process attached to the tympanic membrane. dr\_youssefhussein@yahoo.com

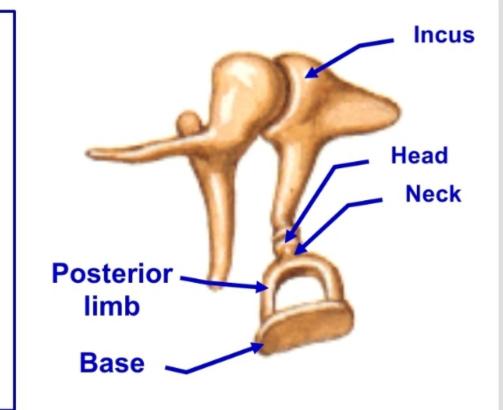


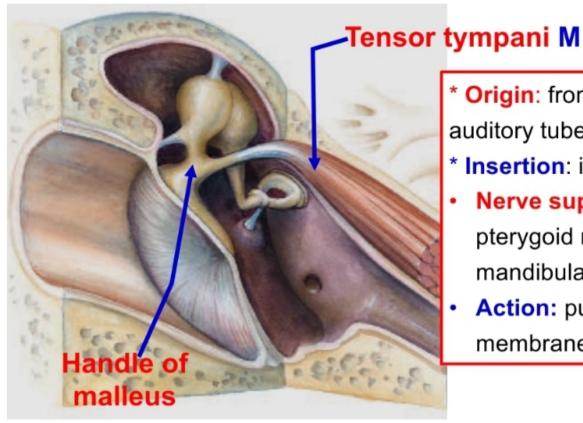
- Incus: (intermediate ossicle):
   السندان
  - It is anvil-like
  - \* It is formed of
  - \* **Body** articulates with the malleus.
  - \* Long process articulates with the head of stapes.
  - \* Short process conical in shape.



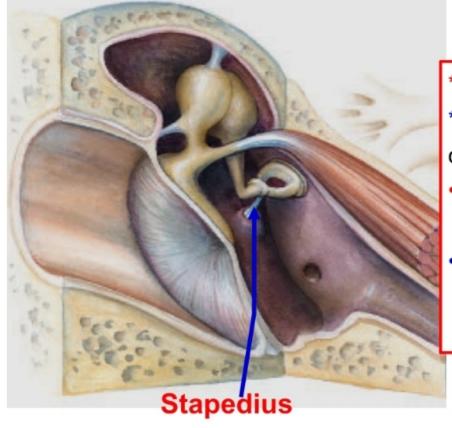
- Stapes: (the medial ossicle):الركاب
  - It is stirrup- like.
  - It is formed of.
  - \* **Head** articulates with the long process of the incus.
  - \* Neck is a narrow part below head, revived insertion of stapedius muscle.
  - \* Two limbs (posterior and anterior) extend from the neck to the base.
  - \* Base (foot plate) closed the

Fenestra vestibule of the inner ear.

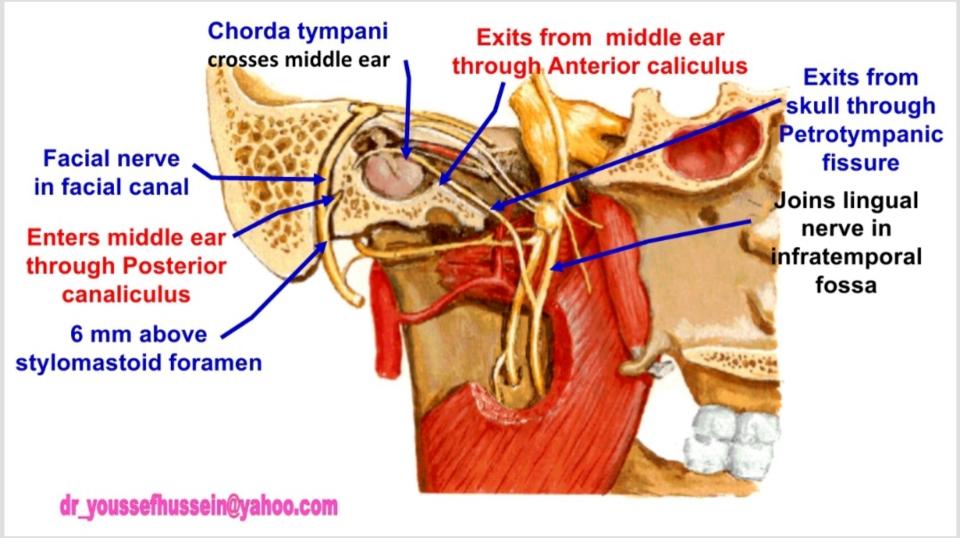




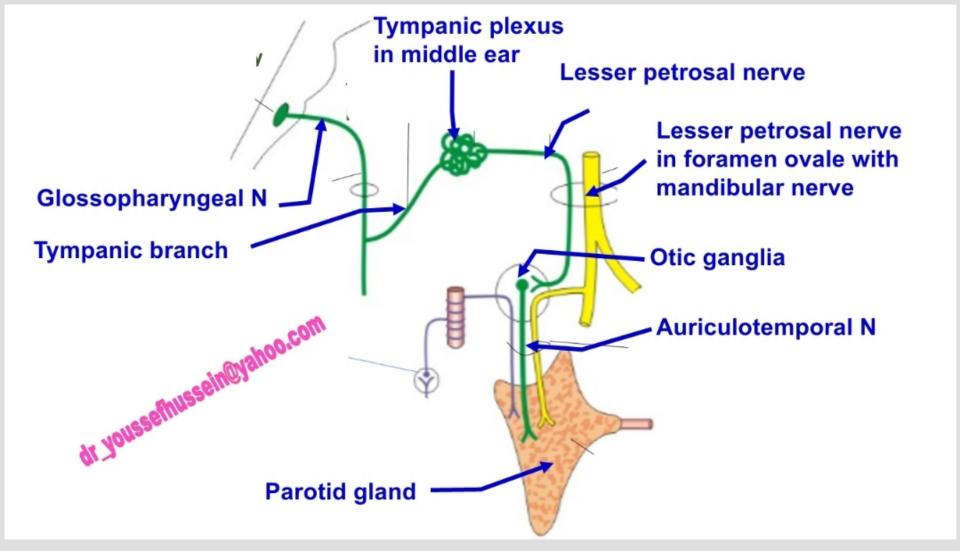
- \* Origin: from cartilaginous part of the auditory tube.
- \* Insertion: into the handle of malleus.
- Nerve supply: nerve to the medial pterygoid muscle (from trunk of mandibular nerve)
- Action: pulls and tens the tympanic membrane



- \* Origin: from the inner walls of the pyramid.
- \* **Insertion**: into the posterior aspect of neck of stapes.
- Nerve supply: branch from the facial nerve within the facial canal.
- Action: pulls the stapes, damping down (protective effect against high pitched sound vibration).

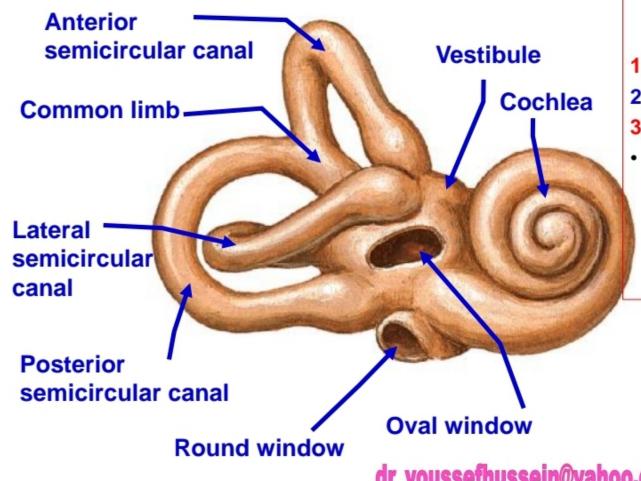


Chorda tympani crosses tympanic cavity, related to tympanic membrane, between handle of Handle of malleus malleus and long process of incus **Tympanic** membrane Long process of incus dr\_youssefhussein@yahoo.com

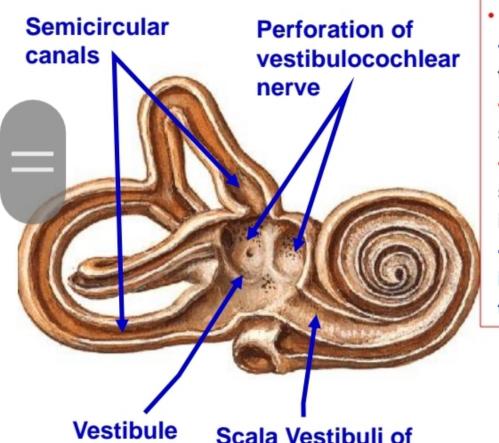




- it consists of 2 parts:
- (1) Bony labyrinth: boney cavities inside the petrous part of temporal bone.
- (2) Membranous labyrinth: interconnected sacs and ducts inside the bony labyrinth.



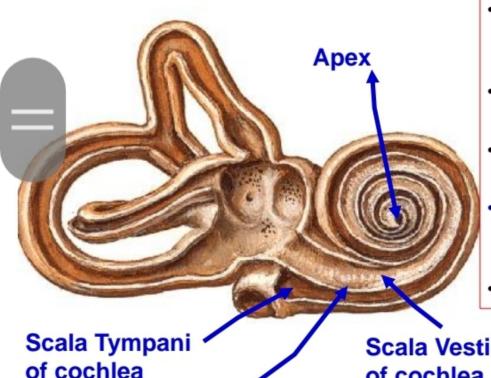
- 3 arched Semicircular canals
- 1) Anterior in vertical plane.
- 2) Posterior in vertical plane.
- 3) Lateral in horizontal plane.
- These 3 canals open in the posterior aspect of the vestibule by 5 orifices (common limb from anterior and posterior canals).



cochlea

- Vestibule: central part of bony labyrinth.
  - Its posterior wall receives the 5 openings of the 3 semicircular canals.
  - Its anterior wall shows the opening of the scala vestibuli of the cochlea.
  - Its lateral wall is related to the middle ear and shows fenstera vestibuli (oval window) which is closed by the foot of stapes.
  - Its medial wall forms the bottom of the internal auditory meatus and is perforated by the 8th cranial nerve.

Stibuli of



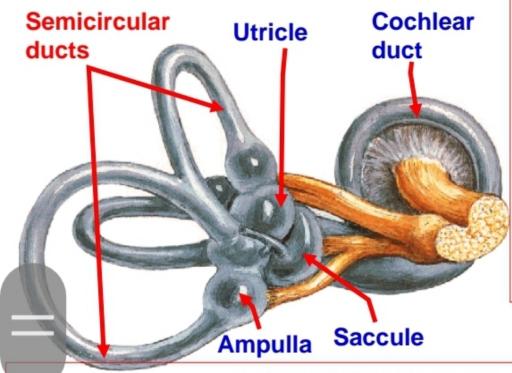
Spiral bony

lamina

#### Cochlea القوقعة

- Anterior part of boney labyrinth
- It resembles shell of a common snail forming 2 and 1/2 turns around its axis called modiolus.
- Its apex is directed laterally towards tympanic cavity.
- Its base is directed medially and is perforated by cochlear nerve.
- Spiral bony lamina projects from the modiolus dividing cochlear canal into Scala vestibuli above and Scala tympani below.
- The cochlear canal lodges cochlear duct.

Scala Vestibuli of cochlea

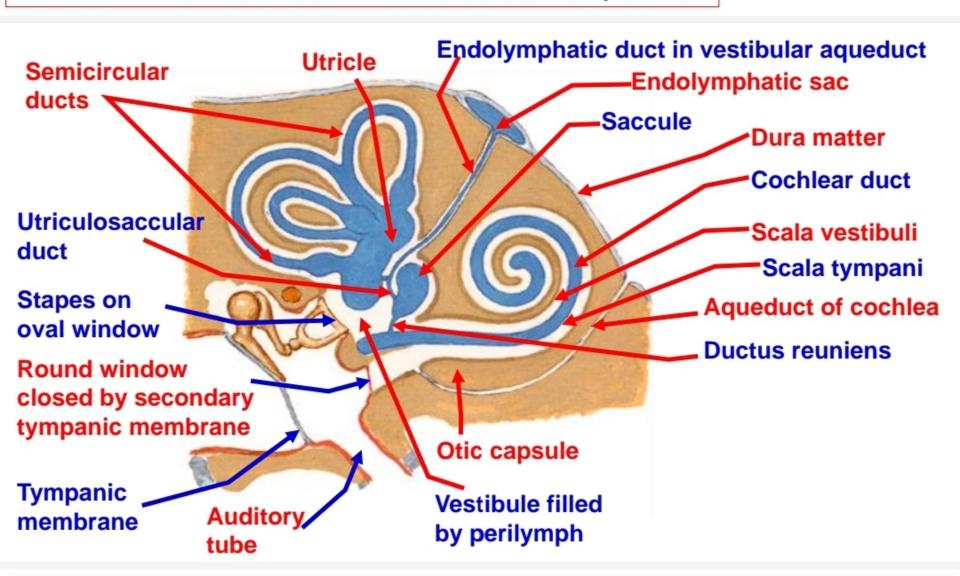


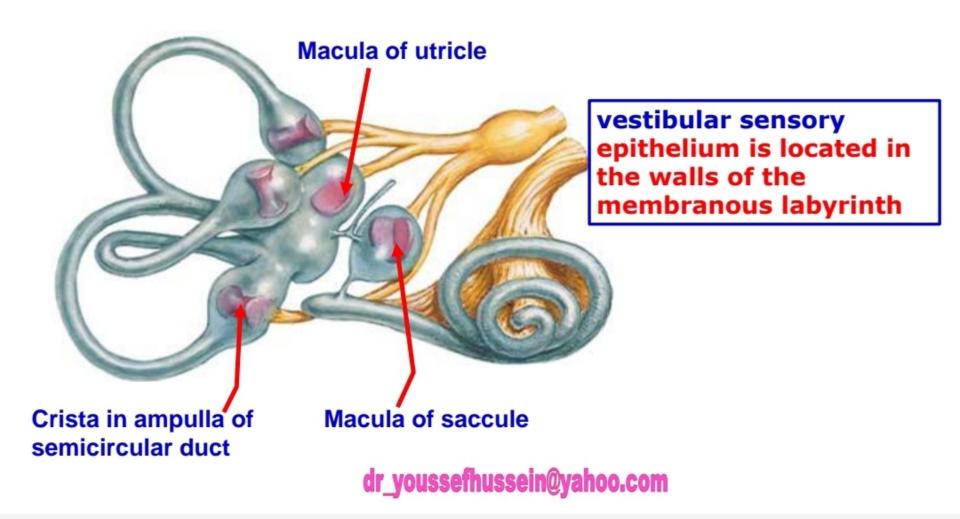
### **\* MEMBRANOUS LABYRINTH**

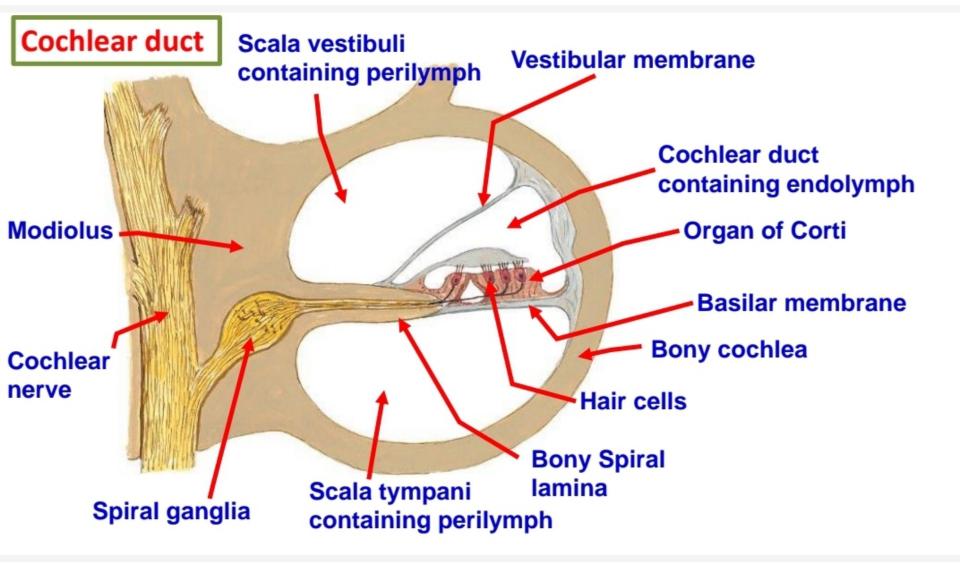
- \* It consists of number of membranous cavities inside the bony labyrinth.
- These cavities are filled with fluid called endolymph.
- They are separated from the bony labyrinth by fluid called **perilymph** that **communicate with subarachnoid space** through **aqueduct of cochlea**

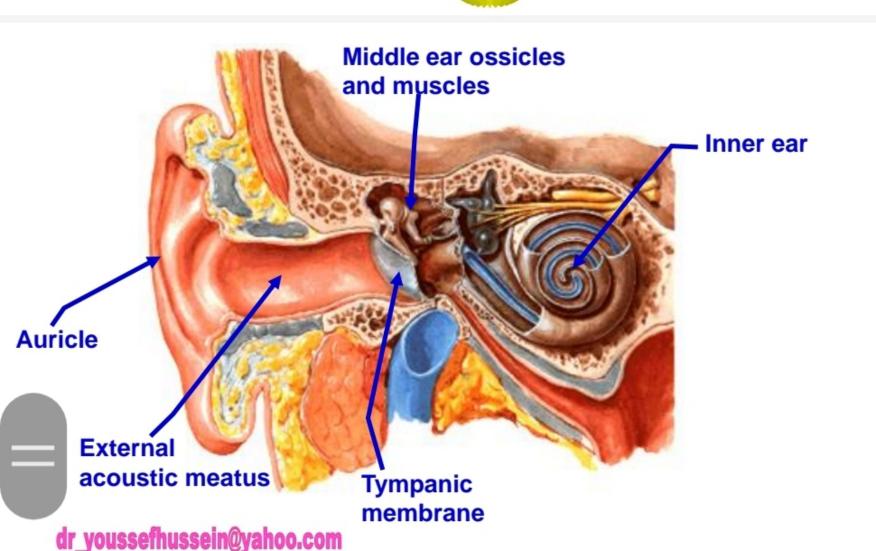
#### 3 semicircular ducts

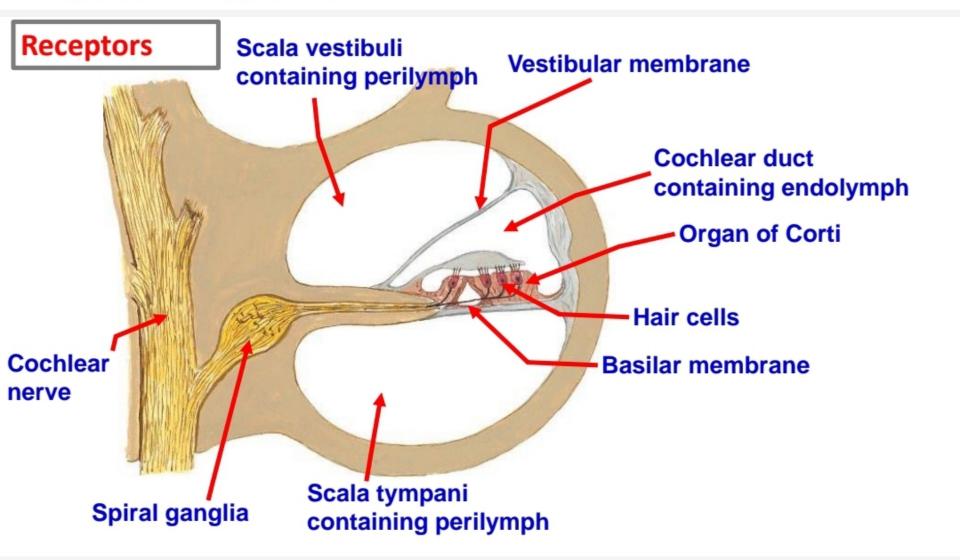
- They lie within the corresponding semicircular canals.
- They open in the utricle.
- Each duct has a dilatation at one of its ends called ampulla

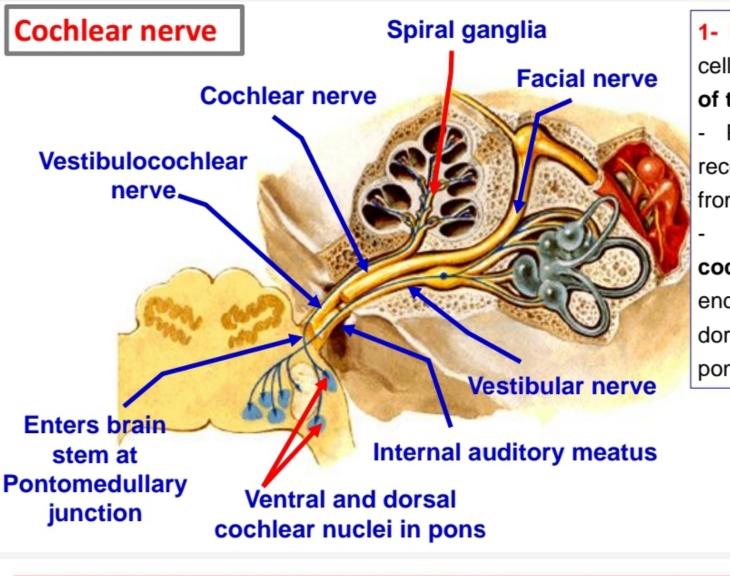






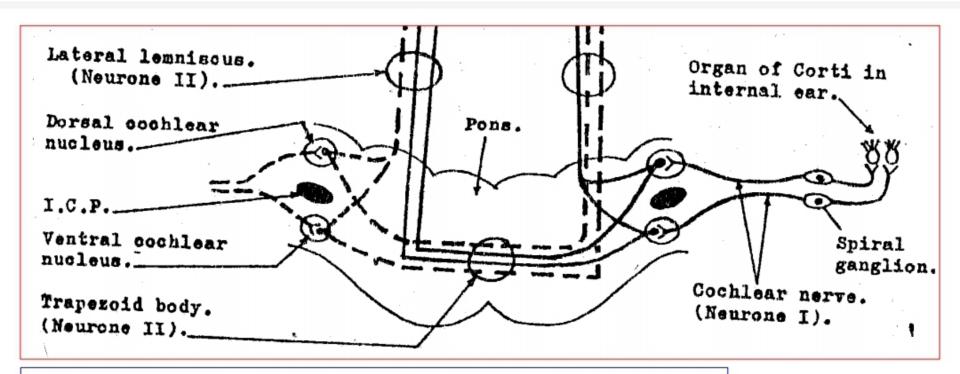






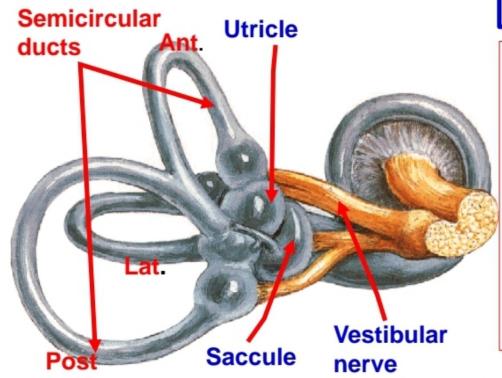
- 1- First neuron: bipolar cells of spiral ganglion of the cochlea.- Peripheral processes
- receive the sensation from the receptors.

   Their axons form
- cochlear nerve which ends in ventral and dorsal cochlear nuclei in pons.



- 2- Second neuron: ventral and dorsal cochlear nuclei.
- Most of the axons of these cells cross to the opposite side →
  decussate with their fellows of the opposite side to form trapezoid
  body → ascend as a lateral leminscus with some fibres from the
  same side → medial geniculate body of the thalamus.



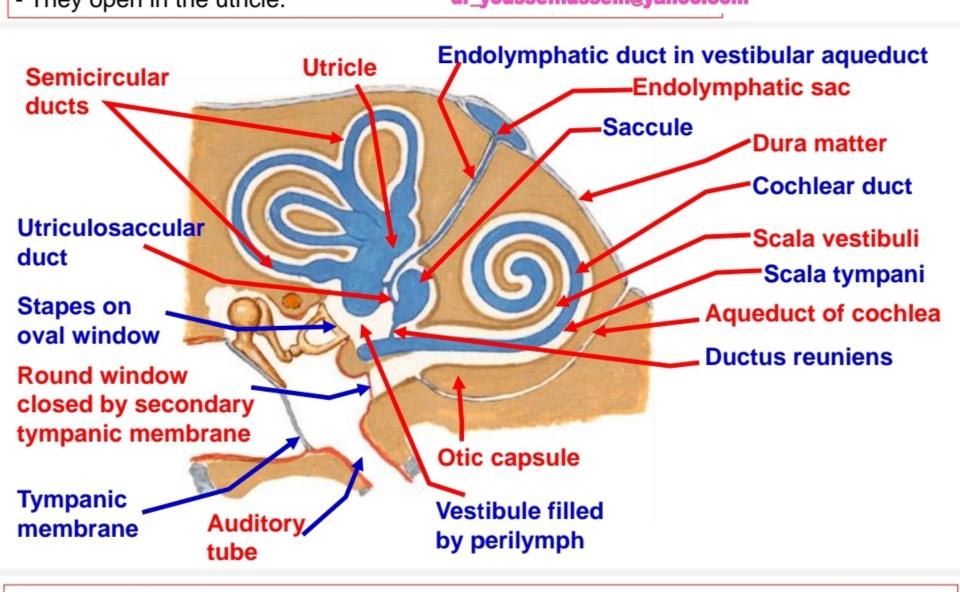


# ❖ Vestibular apparatus

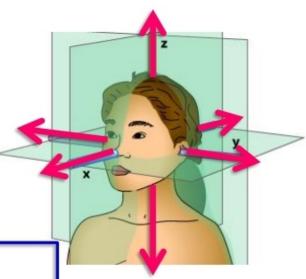
- 3 semicircular ducts (anterior, posterior and lateral)
- Otolith organ (utricle and saccule)
- These cavities inside the bony labyrinth.
- These cavities are filled by endolymph.
- They are separated from the bony labyrinth by perilymph

#### 3 semicircular ducts

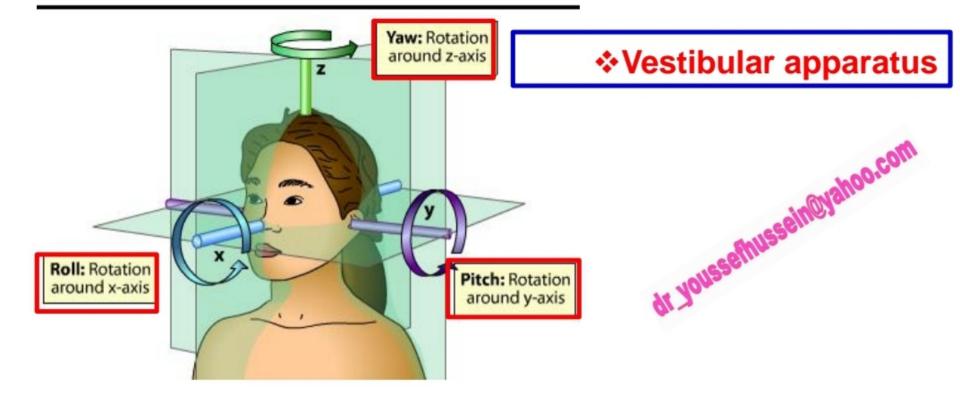
- They lie within the corresponding semicircular canals.
- They open in the utricle. dr\_youssefhussein@yahoo.com



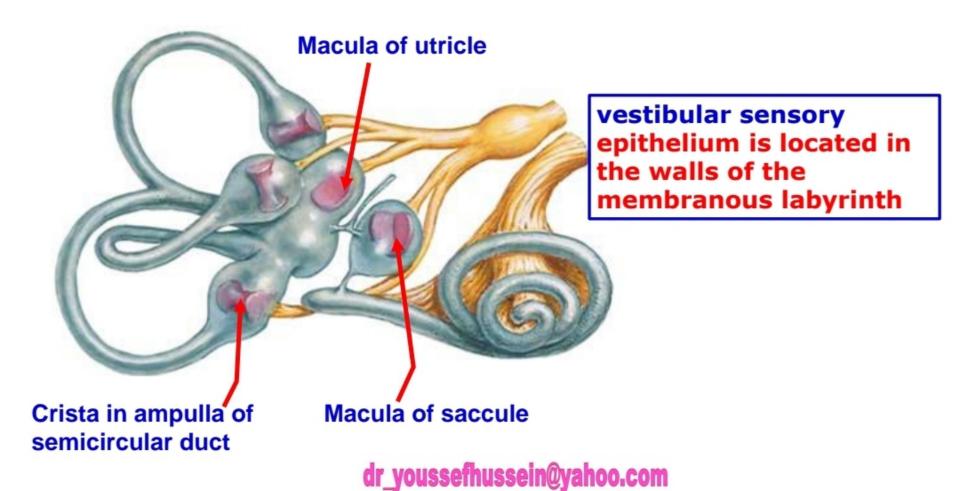
 Utricle senses acceleration in the horizontal plane: forward and backward, right and left movement or combination. ❖Vestibular apparatus



 Saccule senses acceleration in the sagittal vertical plane: up and down



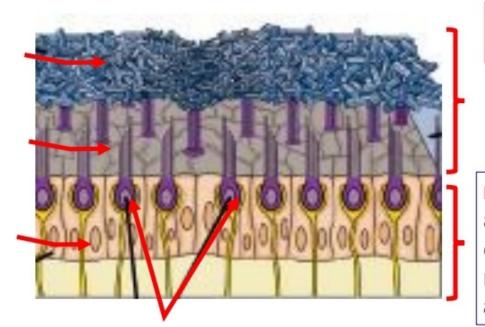
3 semicircular canals are sensitive to angular accelerations (head rotations) around 3 axes.



## **Otoconia**

Gelatinous layer

Supporting cells



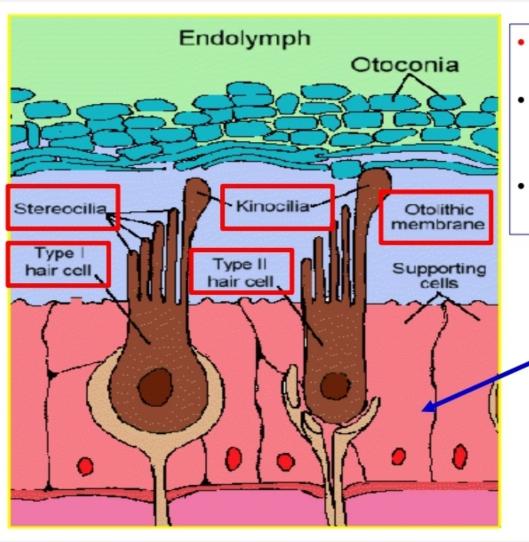
## Vestibular Sensory Epithelium

Otolithic membrane

macula is a specialized area of neurosensory epithelium lining the membranous wall of utricle and saccule

### Hair cells

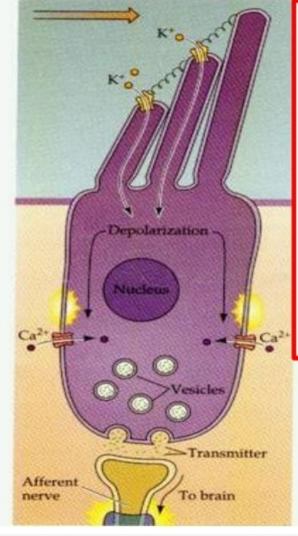
- The epithelial surface is covered by a gelatinous layer
- Above this layer is a fibrous structure, in which many small crystals of calcium carbonate, are embedded (otoconia) dr\_youssefhussein@yahoo.com



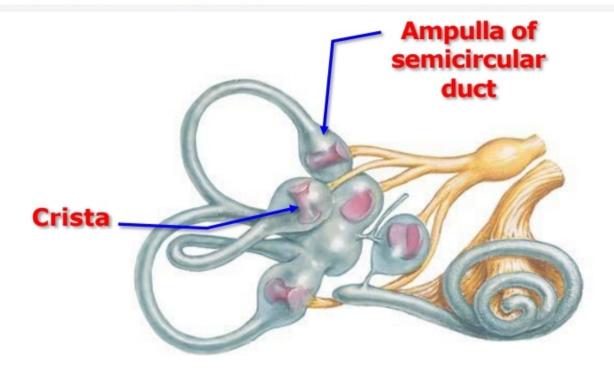
- Macula showing Type I and Type II hair cells
- Their hair bundles which are embedded in otolithic membrane called stereocilia.
- The large cilium in each bundle is called kinocilia.

Macula

dr Yousselhusselhoyahoo.com

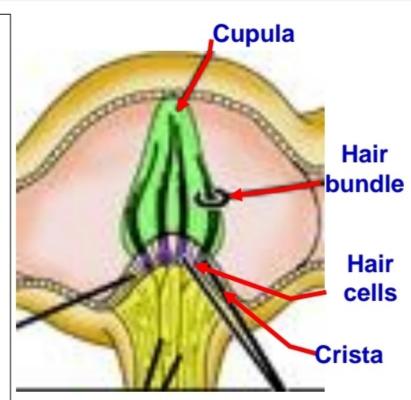


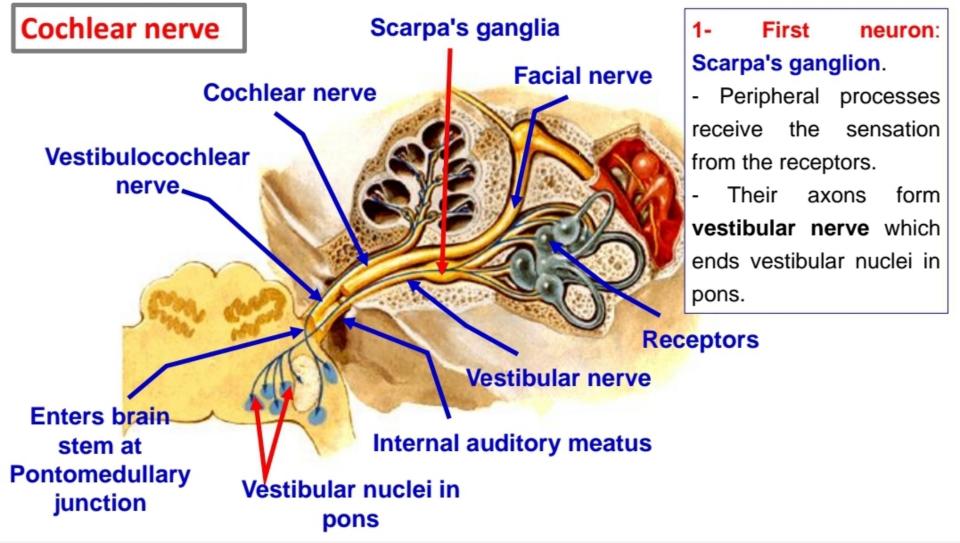
- Depolarized (stimulation) or Hyperpolarized (inhibition) depending upon movements of the stereocilia
- Movement of stereocilia towards kinocilium open potassium channels and depolarization of hair cells thus causing neurotransmitter release and so increasing vestibular activity afferents to brainstem
- Movement of stereocilia away from kinocilium closes potassium channels with hyperpolarization of hair cell and thus reducing vestibular activity



- The lateral end of each semicircular ducts dilated to form an ampulla
- The crista lies within the ampulla of each duct

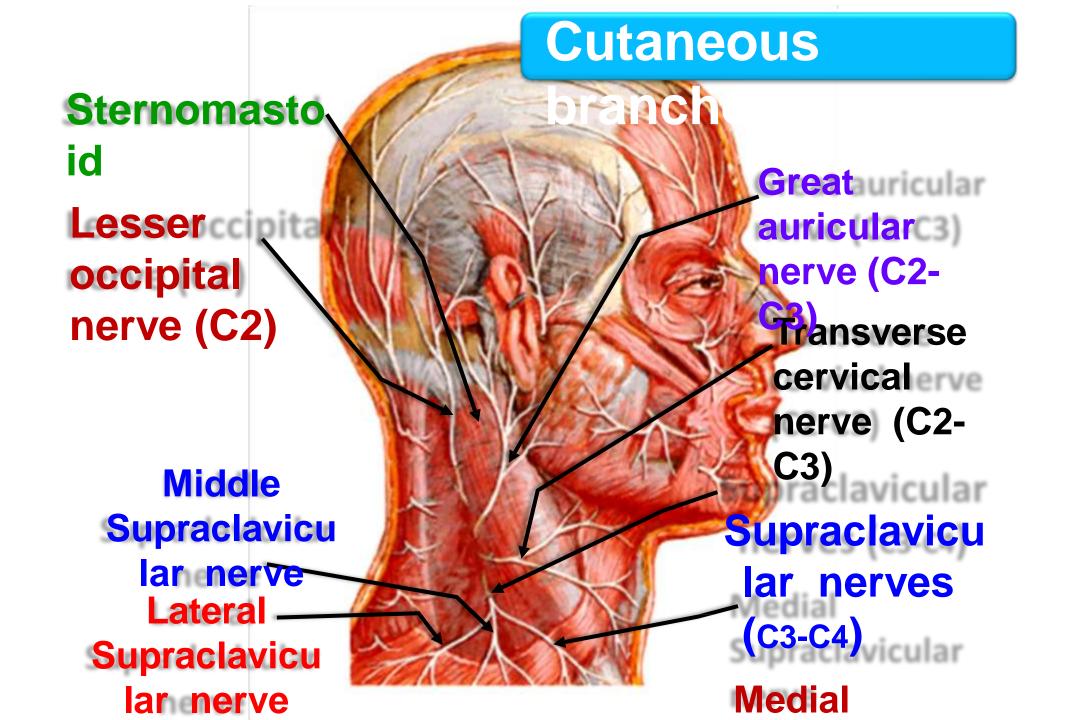
- The Crista has many hair cells
- Hair bundles are covered by a gelatinous structure, cupula.
- The cupula forms a viscous barrier through which the endolymph cannot circulate.
- When the head turns to the left, For example: the cupula is pushed toward the kinocilia in the left lateral (horizontal) canal, So depolarization occurs and the firing rate of left vestibular nerve increases. In contrast, the cupula in the right lateral canal is pushed away from kinocilia, So hyperpolarization occurs
- If the head turns to the right, the result is the opposite.

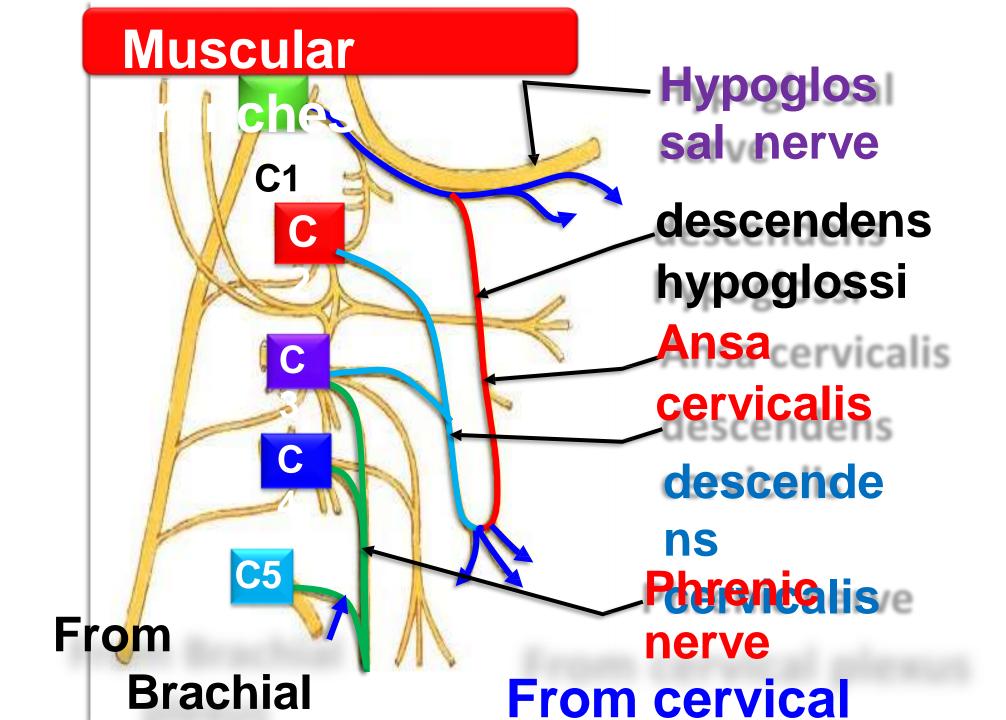




# Cervic

- It is formed by the ventral rami of upper four cervical nerves (C1 to C4)
- It is formed in the posterior triangle

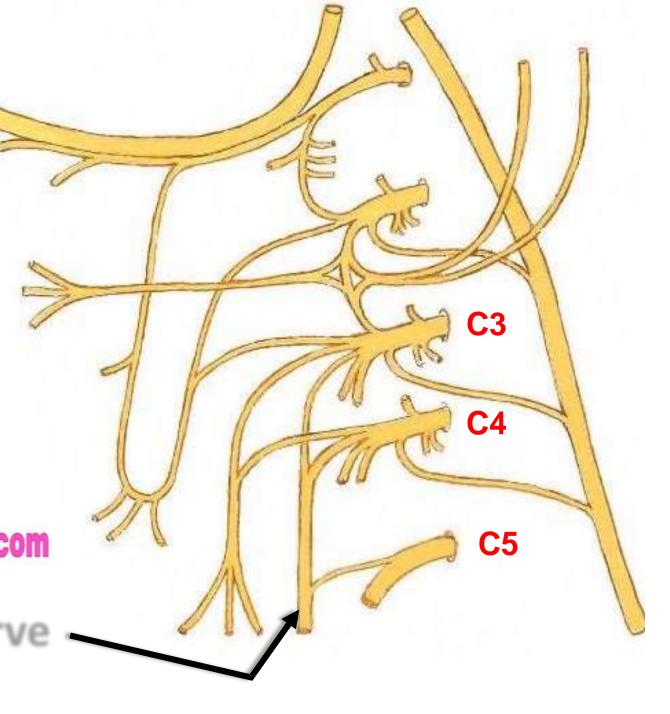






- Phrenic nerve is a mixed nerve.
- Roots, they arise from the ventral rami of C3, C4 and C5 (mainly from C 4).
- C3 and C4 from cervical plexus
- C5 from brachial plexus

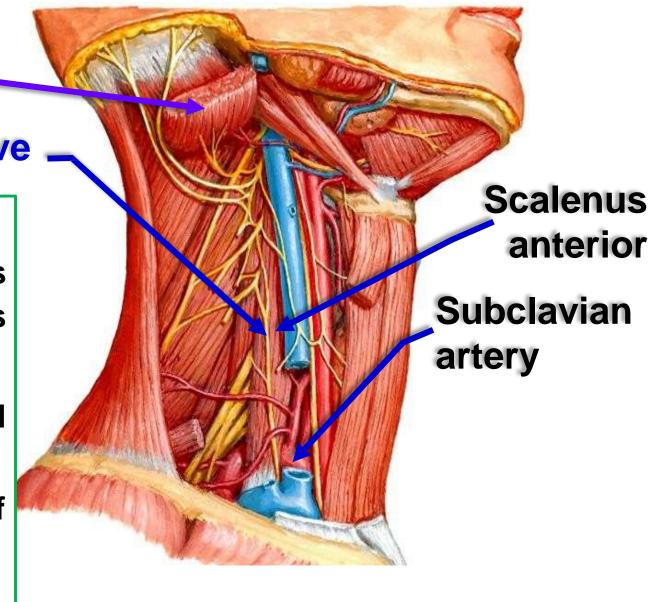
Phrenic erve nerve

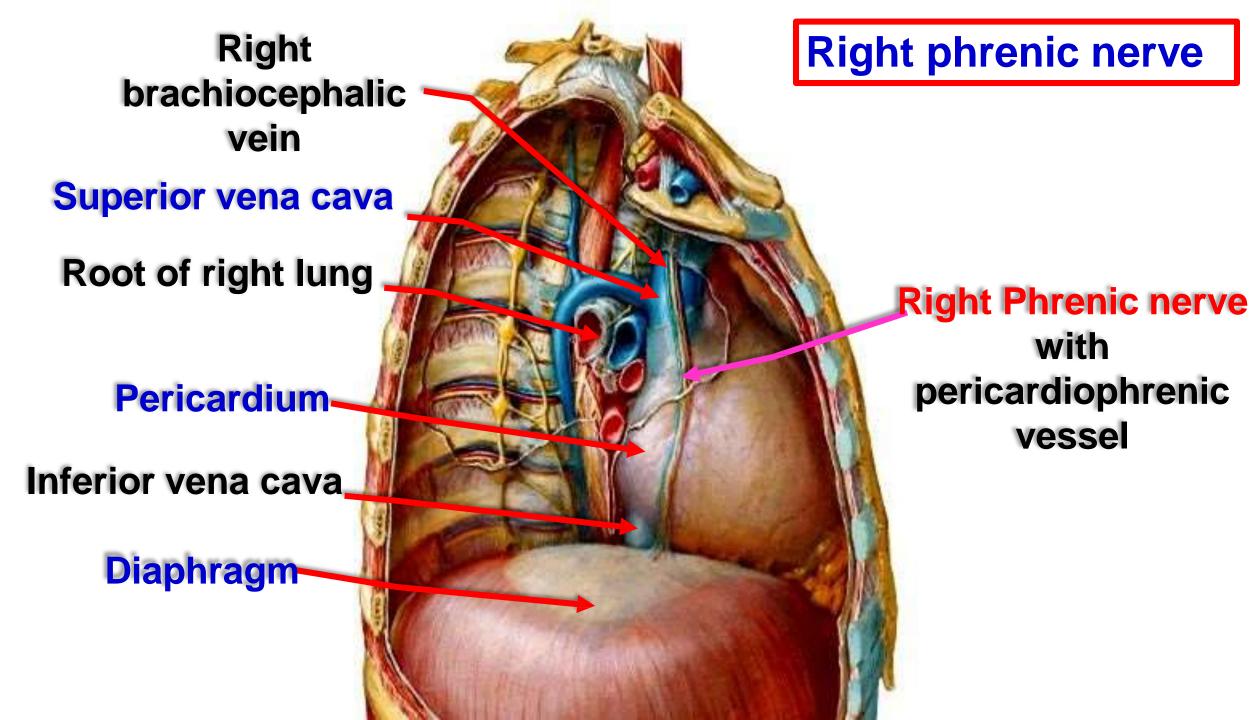


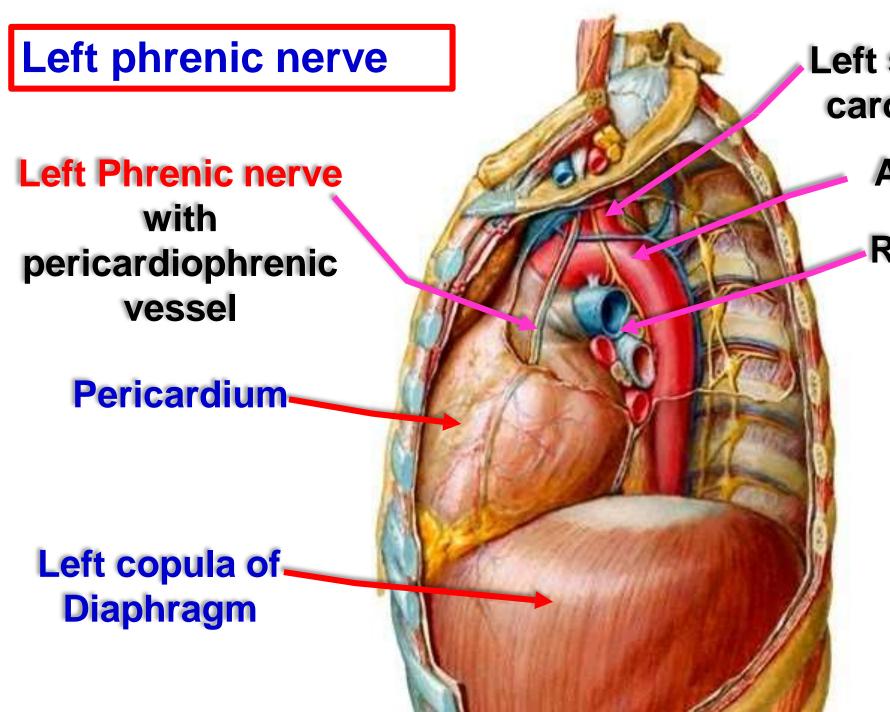
## **Sternomastoid**

**Phrenic nerve** 

- Course In the neck,
  - It descends in front of scalenus anterior between muscle and its fascia.
  - Behind carotid sheath and sternomastoid muscle.
  - -Then cross the first part of subclavian artery.
  - -It enters the thorax by crossing the internal thoracic artery.







Left subclavian carotid artery

Arch of aorta

Root of left lung

تعلَّمُوا العلمَ فإنَّ تعلَّمهُ لله خِشيةٌ وطَلبَهُ عِبادةٌ، ومُذاكرتَهُ تَسْبيحٌ، "والبَحثَ عنهُ جِهاد

• معاذبن جَبل -رضي الله عنه

