

أهلا

يُمنع أخذ السไลدات بدون إذن المحرر واي اجراء يخالف ذلك يقع تحت طائلة المسؤولية القانونية جميع المعلومات للاستخدام التعليمي فقط



الأستاذ الدكتور يوسف حسين

رئيس قسم التشريح والأنسجة والأجنة

كلية الطب - جامعة مؤتة - الأردن

دكتوراة من جامعة كولونيا المانيا

Prof. Dr. Youssef Hussein Anatomy - YouTube

الواتسون 00201224904207

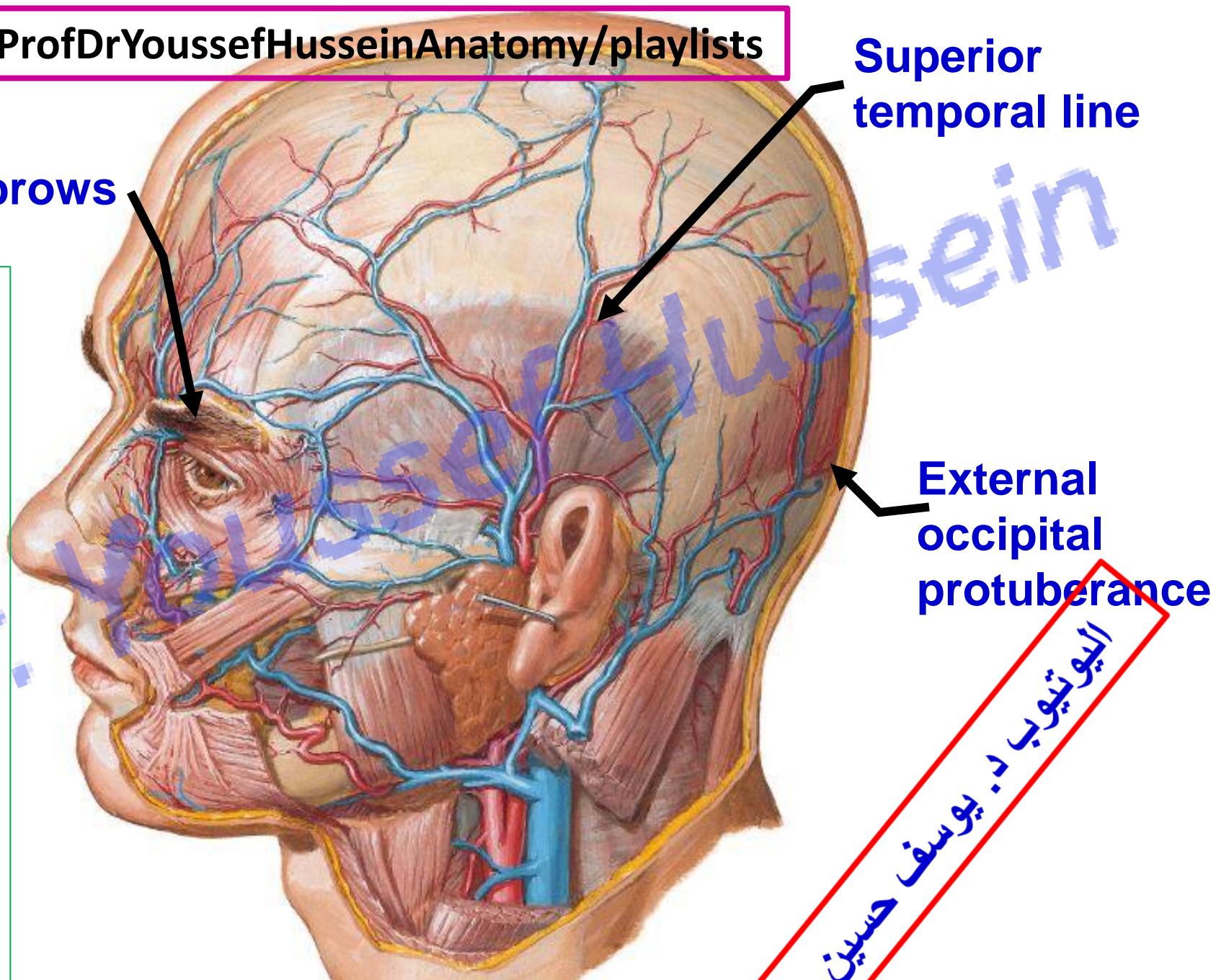
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Scalp

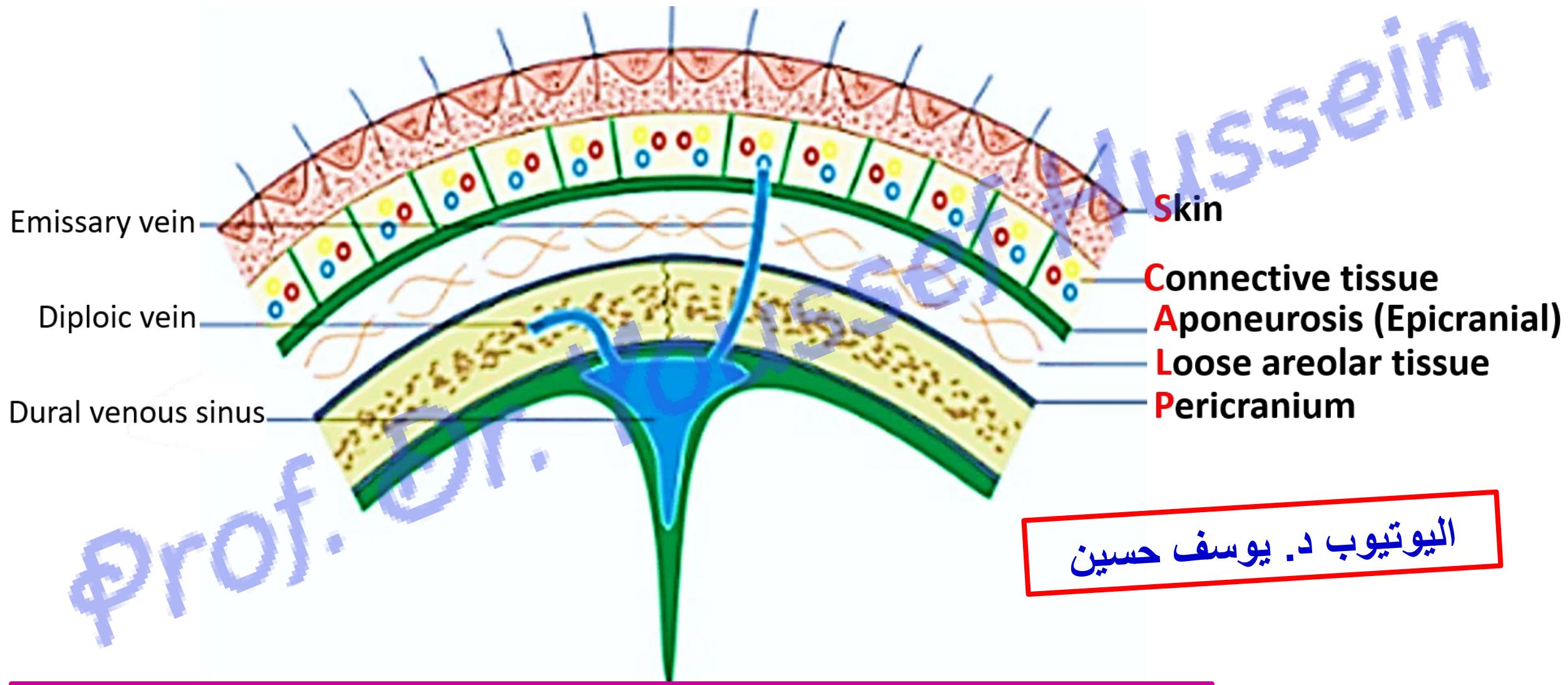


Eye brows

- **Scalp**
- The soft tissues covering skull cap (calvaria).
 - **Extension**
 - **Anteriorly;** Skin of the eye brows.
 - **Laterally;** superior temporal lines.
 - **Posteriorly;** external occipital protuberance and **highest nuchal lines.**

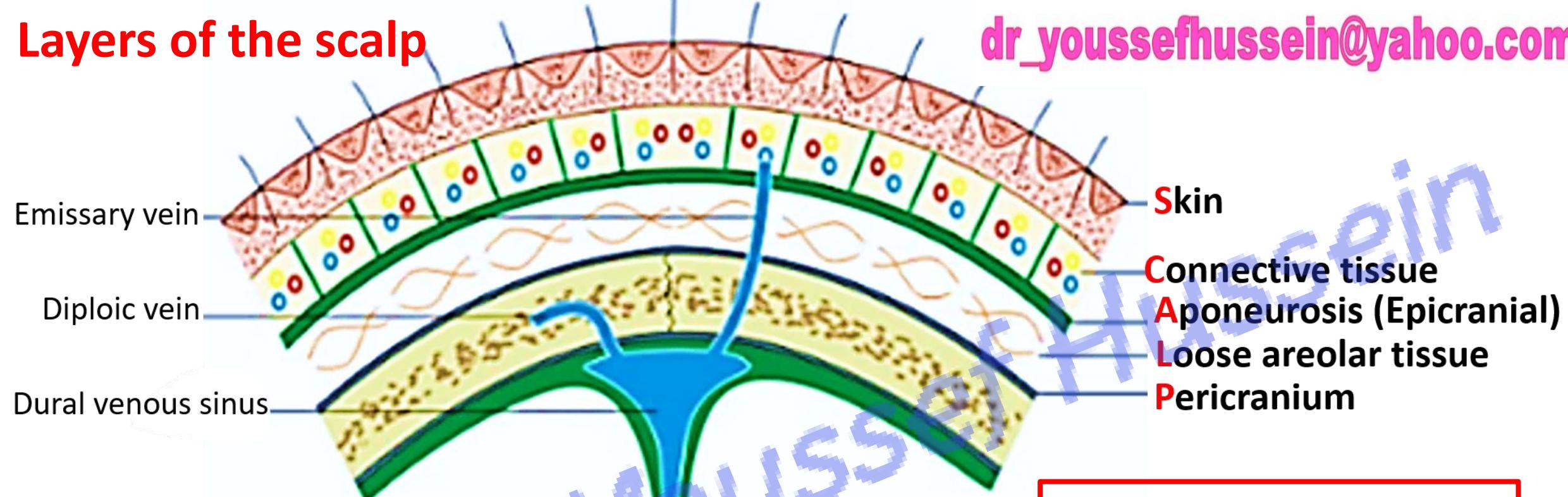


Layers of the scalp : 5 layers (S.C.A.L.P.)



Layers of the scalp

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1- **Skin**: thick, tough and rich in hair follicles, sweat and sebaceous glands.

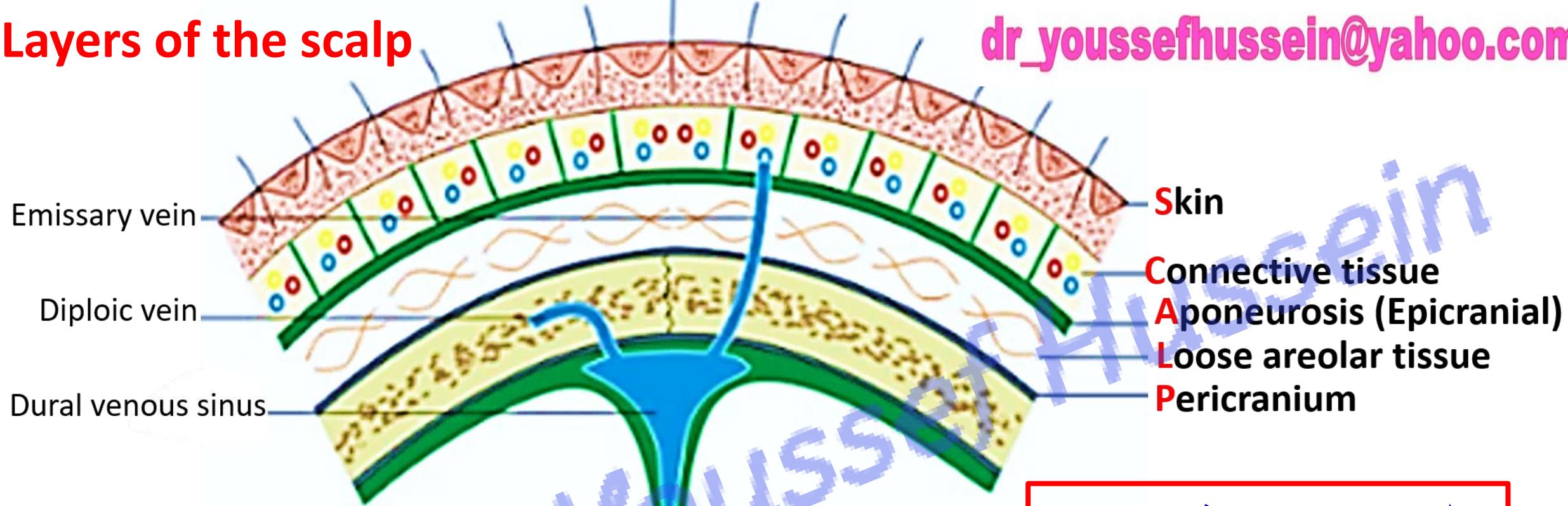
2- **Connective tissues**: formed of **dense fibrous tissue**, contains blood vessels, nerves and lymphatic.

3- **Aponeurosis of occipitofrontalis muscle (galea aponeurotica)**.

- The first 3 layers **attached together** and move on the underlying layer.

Layers of the scalp

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4- **Loose areolar tissue (dangerous zone)**: allows **mobility** of the scalp on the skull, site of collection of pus and blood

5- **Pericranium (periosteum)**: it does not adhere to the skull bones but adherent at the **sutures** of the skull by band of the fibrous tissue called **sutural ligaments**.

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Occipitofrontalis muscle

Prof. Dr.
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Epicranial aponeurosis

Occipitofrontalis Muscle

Occipital belly

Frontal belly

Skin of the eye
brow and root
of the nose

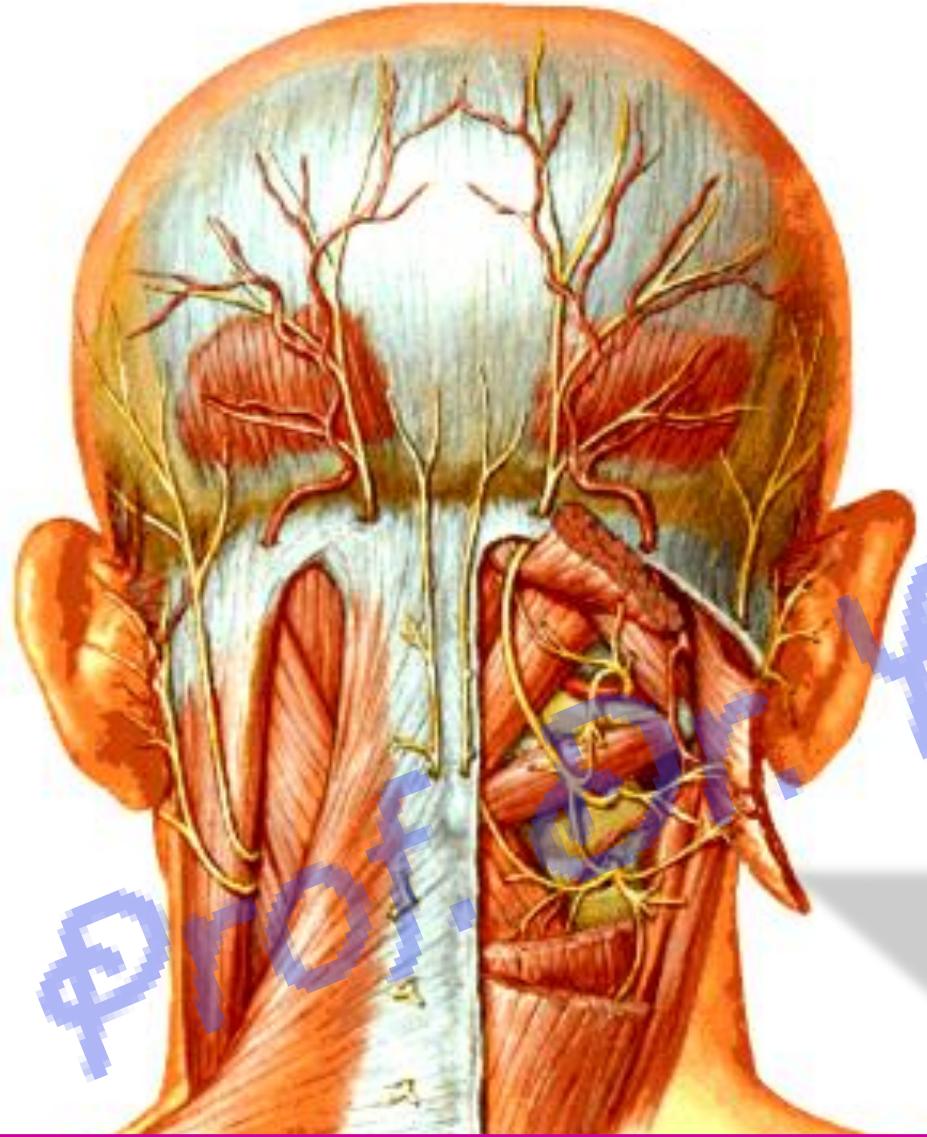
Highest nuchal
line

No bony attachment

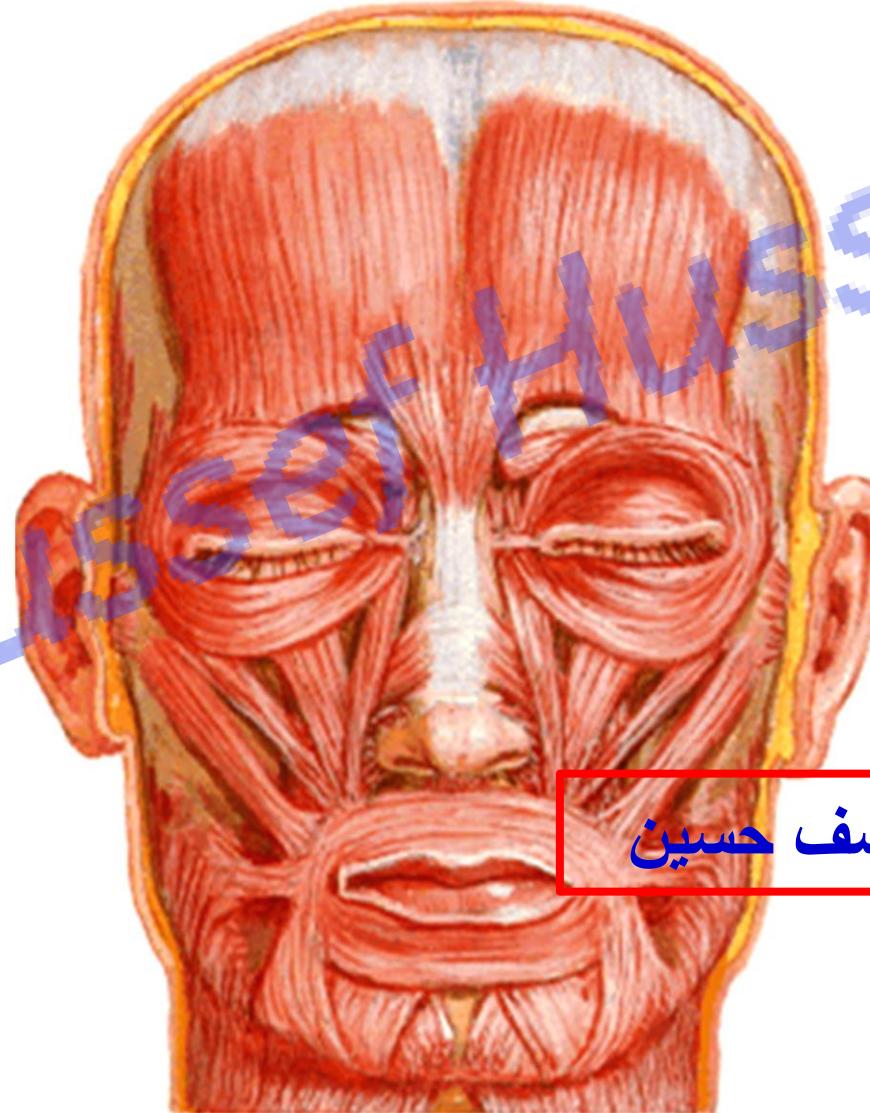
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Nerve supply is facial
nerve (2nd pharyngeal
arch)

Occipital bellies



Frontal bellies



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* Occipitofrontalis Muscle

- It is formed of **2 frontal bellies and 2 occipital bellies** connected together by the epicranial aponeurosis.
- The two **frontal** bellies are much **larger** than the occipital bellies.
- The two frontal bellies come **close together** in the median plane, while the two occipital bellies are separated by a **gap** of epicranial aponeurosis (**galea aponeurotica**).

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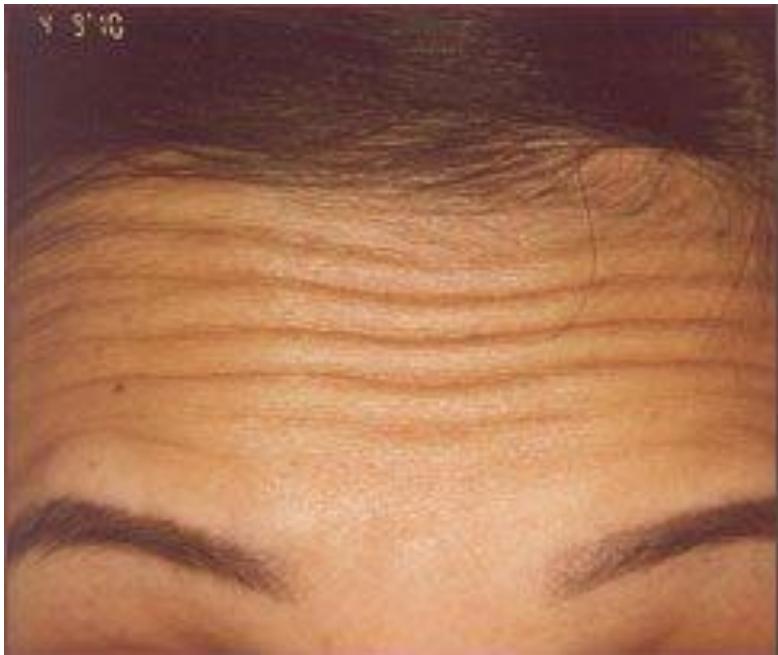
a- The occipital bellies

- * **Origin**; from the highest nuchal lines.
- * **Insertion**; epicranial aponeurosis.
- * **Nerve supply**, posterior auricular branch of facial nerve.

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b- The frontal bellies

- * **Origin**; from epicranial aponeurosis.
- * **Insertion**; to the skin of the eye brows and root of the nose (no bony attachment).
- * **Nerve supply**; temporal branches of the facial nerve.



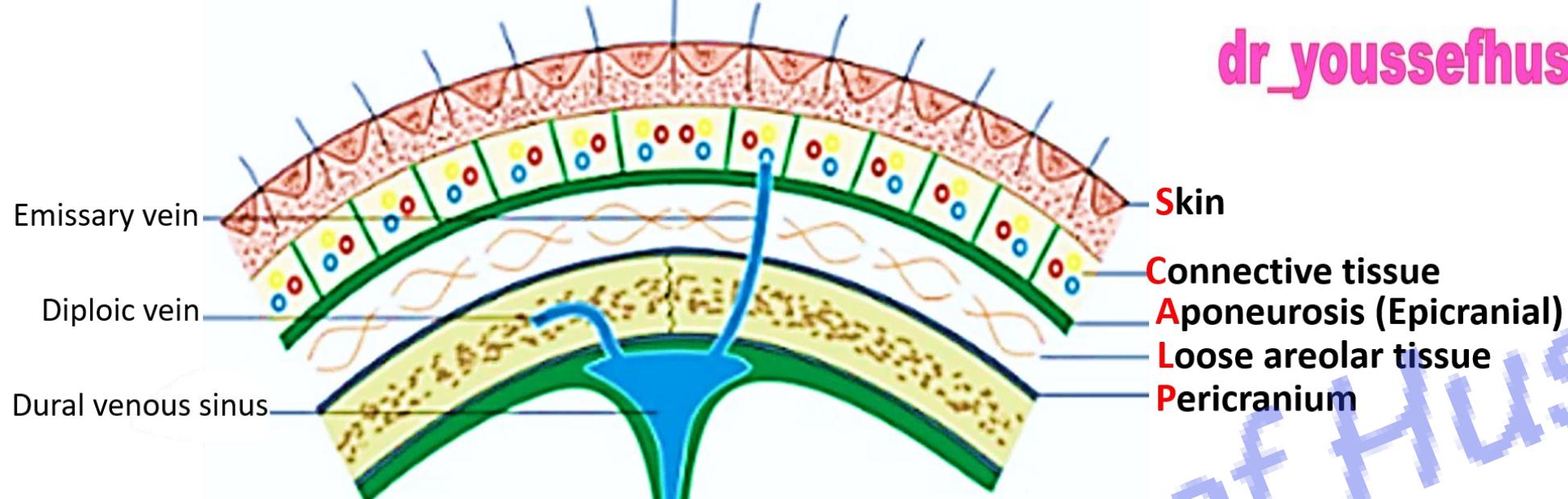
* Action of frontal belly
- Elevate the eye brows producing transverse wrinkles of skin of the forehead (*expression of surprise*).

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

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- The first 3 layers attached together and move on the underlying layer.

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

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



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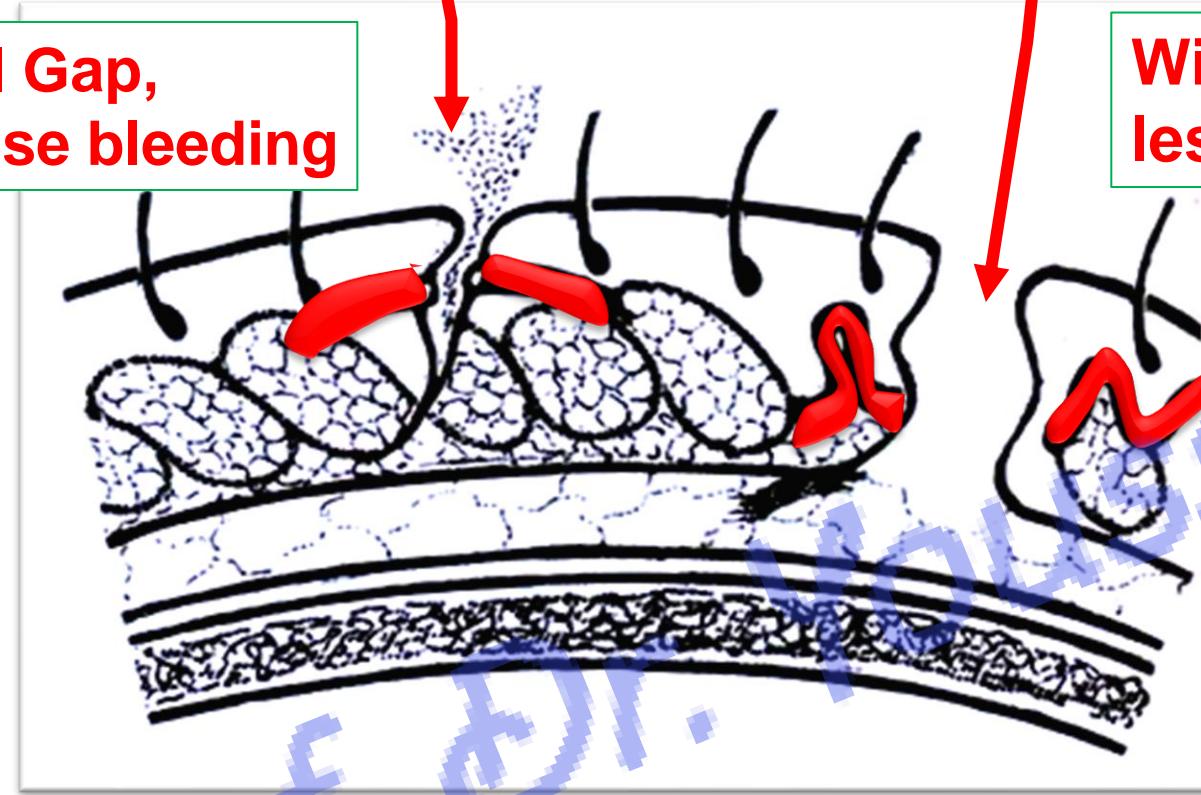
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Cut wound in
subcutaneous area

Cut wound involving
epicranial aponeurosis

Small Gap,
Profuse bleeding

Wide Gap,
less bleeding



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

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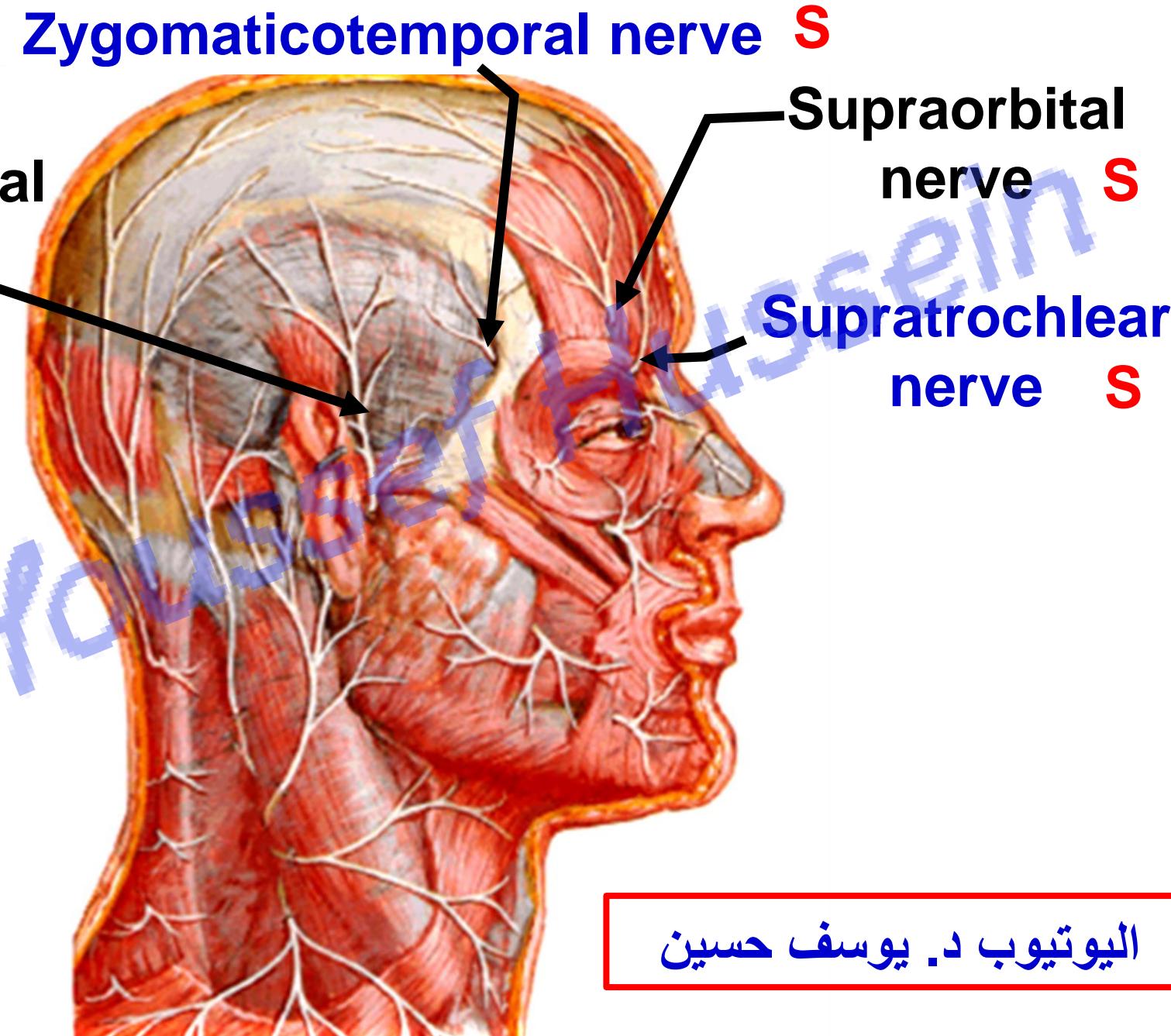
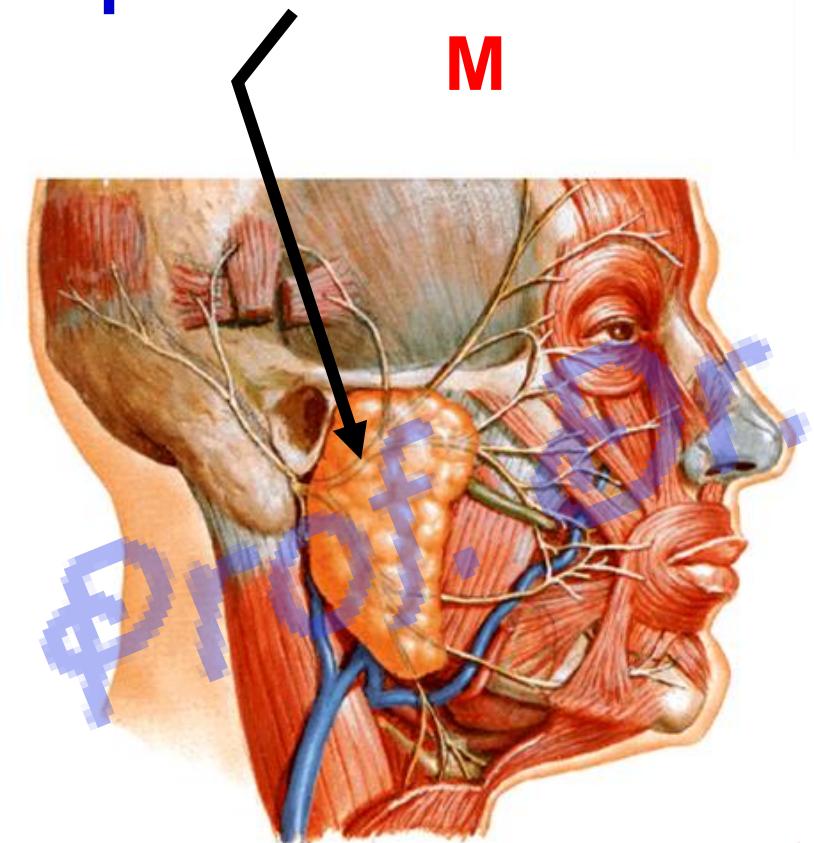
- Clinical anatomy
- Cut wound involving epicranial aponeurosis
- Wide gap and less bleeding: when epicranial aponeurosis is cut in coronal plane (Deep wound), because of Retraction of the frontal and occipital bellies of the occipitofrontalis muscle in opposite directions (anteriorly and posteriorly) leading to wide gap and close the vessels.
 - Cut wound in subcutaneous area
- Profuse bleeding: The connective tissue is dense fibrous and adherent to the wall of the blood vessels so prevents their contraction or retraction following injury., The arteries supplying the scalp anastomose freely with each other.
- Small gap: Attachment of the skin to the epicranial aponeurosis keeps the edges of superficial wounds together

Nerve supply of scalp

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- Scalp is supplied by 10 nerves on each side.
- Five nerves in front the auricle
- Five nerves behind the auricle.
- Each 5 nerves, 4 sensory and 1 motor.

Nerves in front auricle



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A- Nerves in front the auricle

A- Branches of the ophthalmic nerve (frontal nerve).

- a. **Supratrochlear nerve (Sensory)**: leaves the orbit through supratrochlear notch
- b- **Supraorbital nerve (Sensory)**: leaves the orbit through supraorbital notch or foramen

B- Branch of the maxillary nerve (Zygomatic).

- **Zygomaticotemporal nerve (Sensory)**

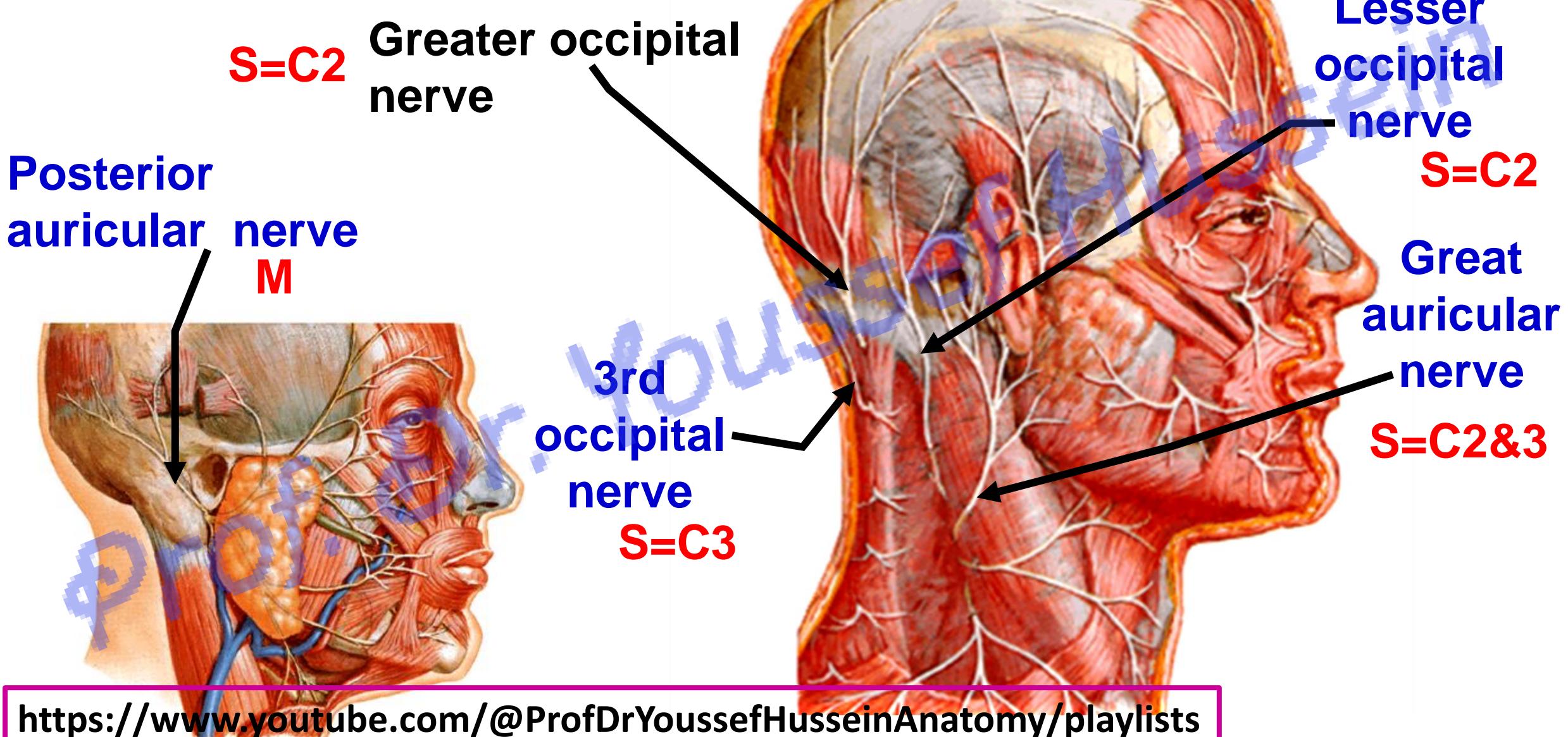
C- Branch of the mandibular nerve. Auriculotemporal nerve (Sensory) enters the parotid gland and leaves it through the upper end to the scalp

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D-Temporal branch of the facial nerve (motor):

- It leaves the parotid gland through the upper end.
- It supplies **frontal** belly of occipitofrontalis and auricularis muscles.

Nerves behind auricle



B- Nerves behind the auricle

- 1- **Great auricular nerve (sensory)**: Branch of cervical plexus (**ventral rami** of C2&3).
- 2- **Lesser occipital nerve (sensory)**: Branch of cervical plexus (**ventral rami** of C2).
- 3- **Greater occipital nerve (sensory)**: Branch of the **dorsal rami** of C2.
 - **The thickest cutaneous nerve of the body**, supplies greater part of the back of the scalp.
- 4- **Third occipital nerve (sensory)**: branch from the **dorsal rami** of C3.
- 5- **Posterior auricular nerve (motor)**: a branch of the **facial nerve**.
 - It supplies **occipital** belly of occipitofrontalis and auricularis muscles.

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Blood supply of scalp

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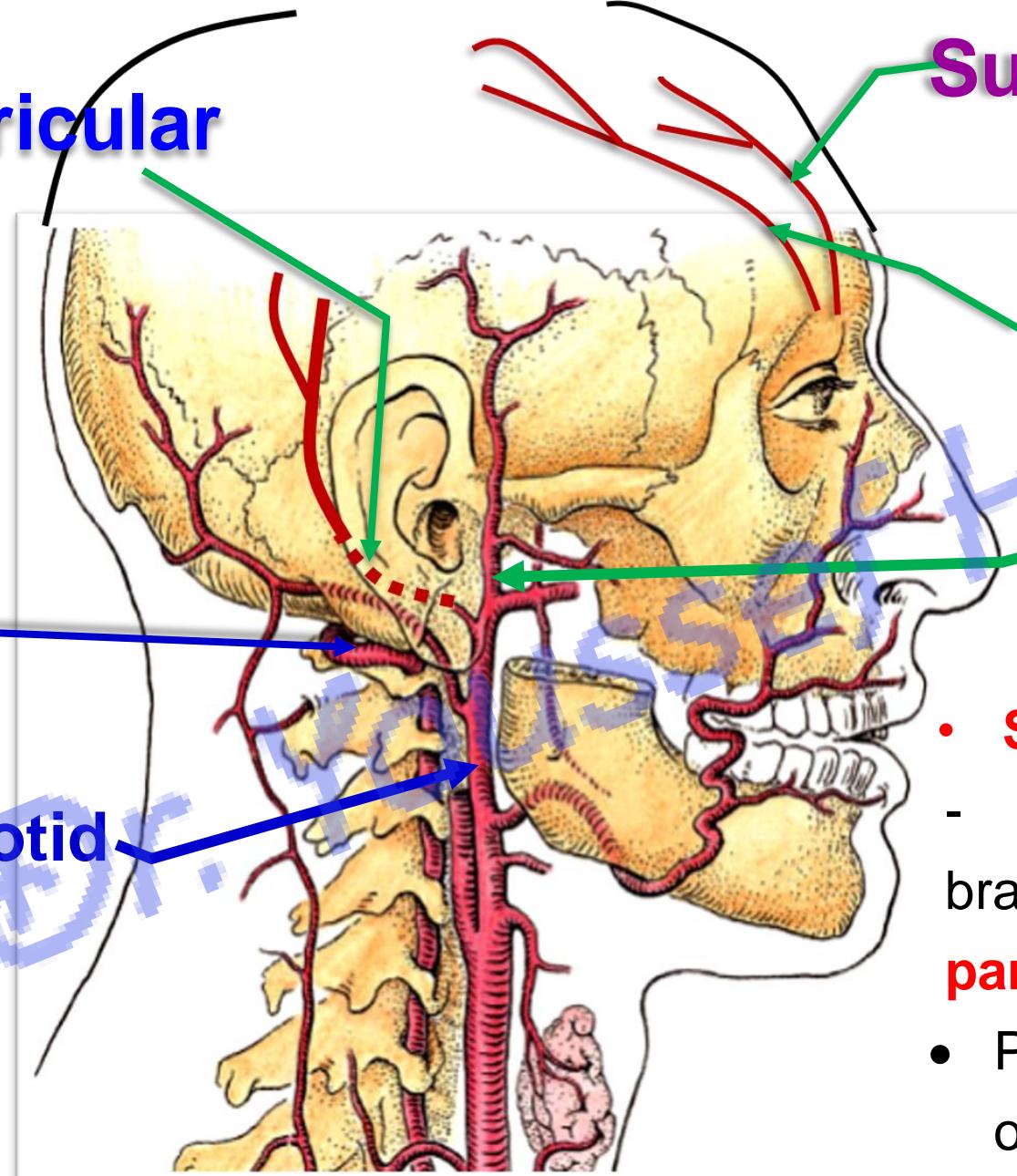
- The scalp is supplied by **5 arteries** on each side.
- 3 **in front** of the auricle
- 2 **behind** the auricle

**Posterior Auricular
artery**

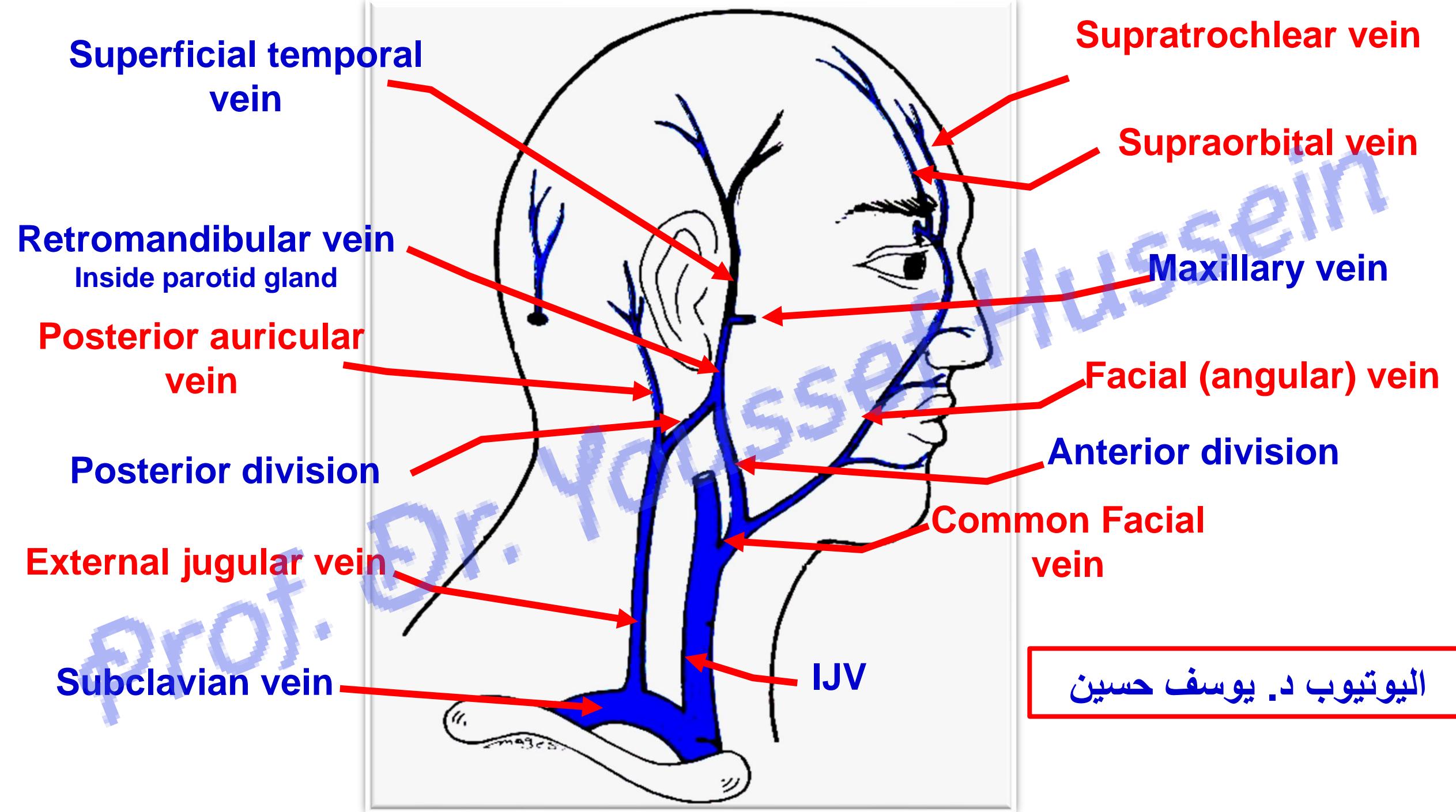
**occipital
artery**

**External carotid
artery**

Prof.



- Supratrochlear artery**
- Ophthalmic artery**
- Supraorbital artery**
- Superficial temporal artery**
- **Superficial temporal artery:**
 - The smallest terminal branches of ECA **inside the parotid gland**.
 - **Pulsation** can be felt in front of auricle.



- Veins of the scalp

1- Supraorbital and supratrochlear veins;

- They unit at the medial angle of eye to form **anterior facial vein (angular)**.

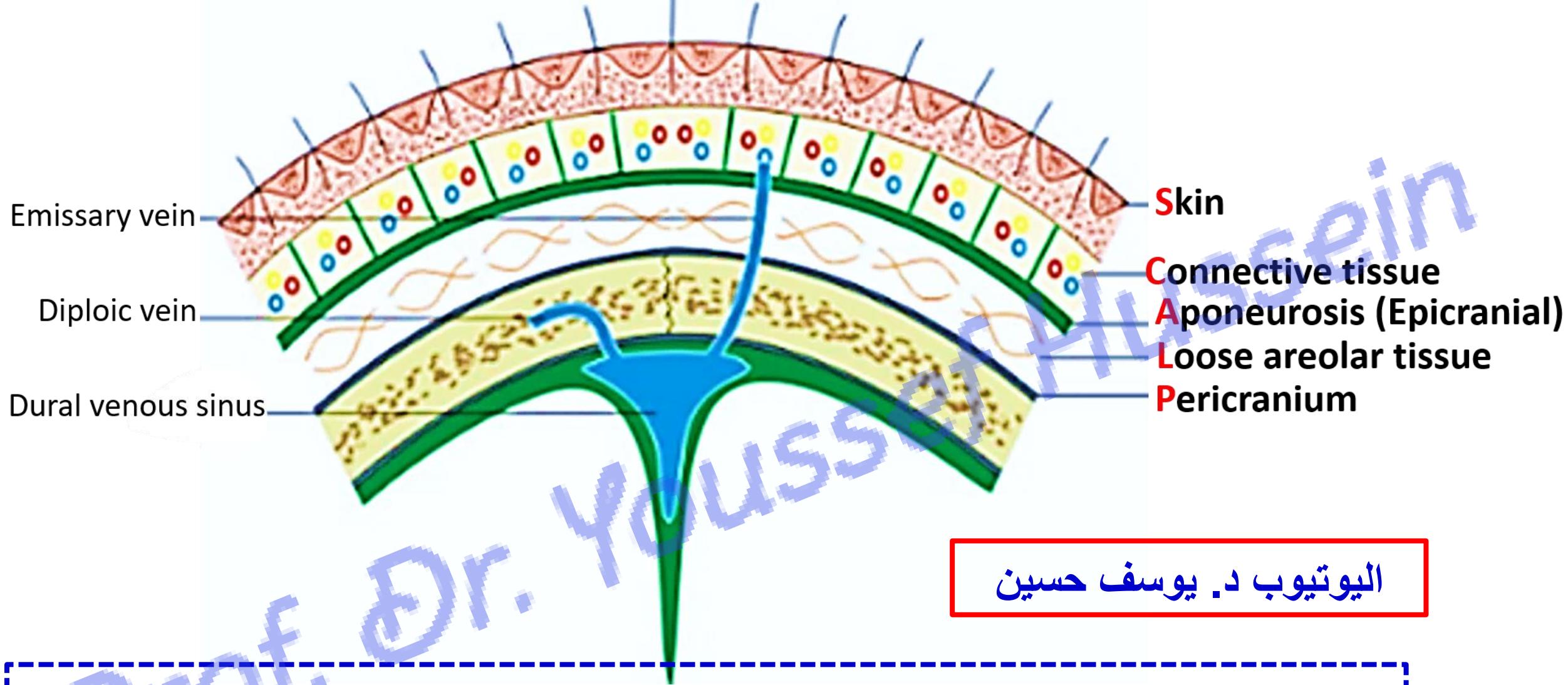
2- Superficial temporal vein; enters the parotid gland.

- Inside the gland, it fuses with the **maxillary vein** to form the **retromandibular vein** that divided into anterior and posterior divisions.

3- Posterior division of retromandibular vein unites with Posterior auricular vein to form the **external jugular vein** that ends in the **subclavian vein**.

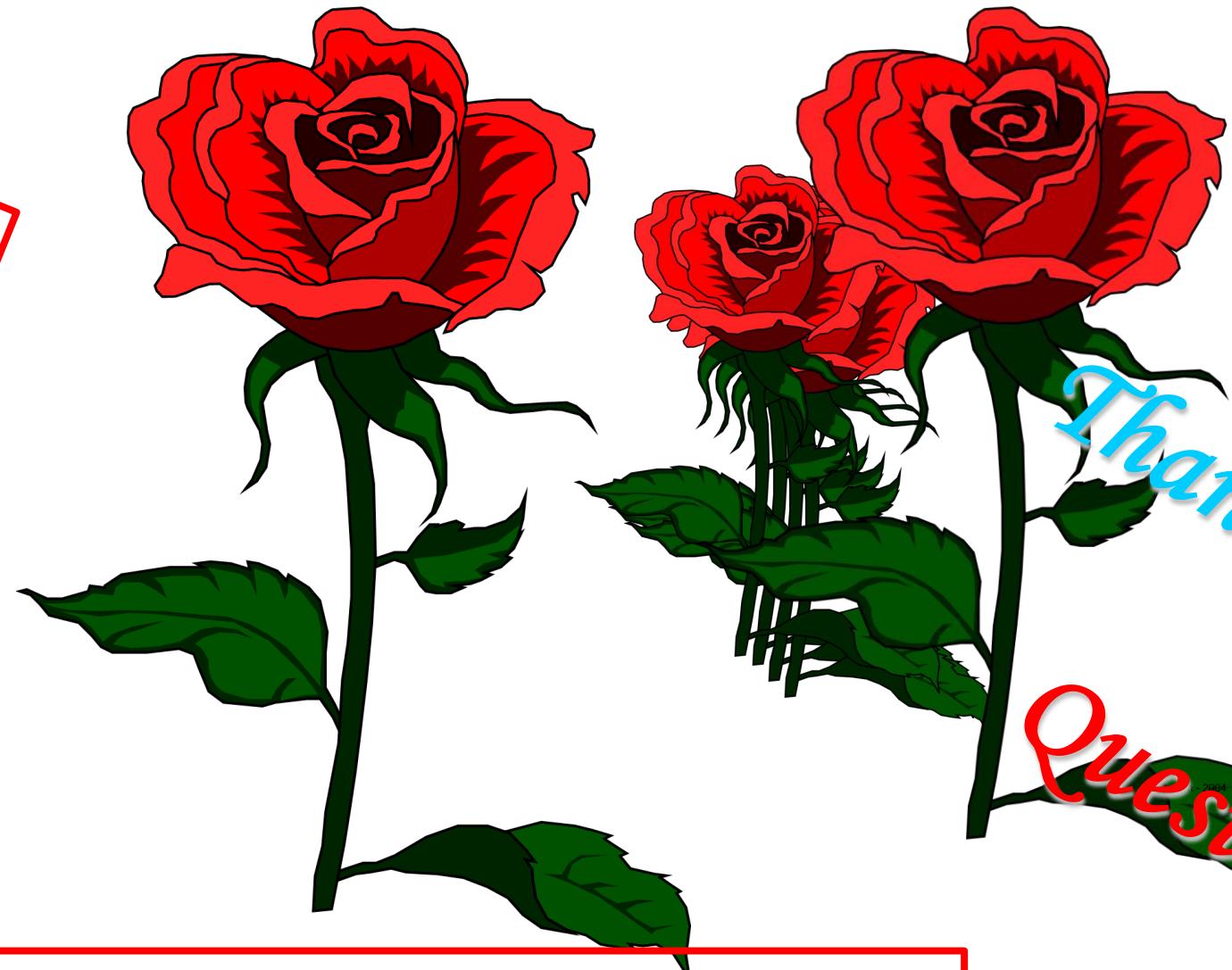
** **Anterior division of the retromandibular vein** unites with the **anterior facial vein** forming the **common facial vein** that ends in the **internal jugular vein**.

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

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