Anatomy "6"

The peritoneum

* Serous membrane / Lines the wall of abdominal cavity

Clothes the viscra

against wich organs are pressed ← as aballon ;) *

From outside

* parietal peritoneum → lines the wall
* Viscral peritoneum → covers the organs.
* peritoneal cavity → the space between viscral layers and parietal
* In males → closed cavity / * females → there is communication with the exterior
* extraperitoneal tissue:

layers of CT between the parietal peritoneum and fascial lining of the abdominal and pelvic walls

* In the kidney there is alarge amount of fat to support
* The peritoneal cavity is the largest cavity
* it is divided into 2 parts:

① greater sac: the main + extend from diaphragm to pelvic

② lesser sac: smaller, lies behind stomach

* intraperitoneal organ: fully covered with viscral peritoneum liver/stomach/spleen/transverse/ilium 1st part of deudinum/segmoid/jujinum
* retroperitoneal organ: lies behind peritoneal and partially covered:

pancreas, ascending and descending colon.

* stomach is attached to other organs by omentum.
* No organ is actually within the peritoneal cavity

[peritoneal ligaments]

① 2 layerd folds of peritoneum that connect an organ with another organ or to the abdominal wall.

liver

* Liver is connected to diaphragm by: Falciform lig, Coronary Lig, Rt and Lt triangular lig's
* = = = to stomach by hepatogastric lig (the membranous portion of lesser omentum)
* = = = = the deudinum by hepatoduodinal lig (the thickened free edge of the lesser omentum which conduct portal triad → portal vein, hepatic artery, bile duct)

the stomach

* inferior surface of the diaphragm by gastrophrenic lig
* with spleen by gastrosplenic wich reflects to the helium of spleen
* with transverse colon by gastrocolic lig the apron like part of the greater omentum wich descends from greater curvature, turns under and then ascends to the transverse colon.

② omenta

omentum: passes from the stomach and proximal part of deudinum to adjacent organs.

the greater omentum: 4 layered peritoneal fold that hangs down like apron from the greater curvature and the proximal parts of the stomach, after descending it folds back and attaches to the ant surface of transverse colon and it's messentry.

* important function of the greater omentum is to attempt to limit the spread of the intraperitoneal infections

the lesser omentum

is much smaller / double layered peritoneal fold that connect the lesser curvature of the stomach and proximal part of the deudinum to the liver / it also connects the stomach to a triad of structures that run between deudinum and liver in the free edge of the lesser omentum

③ Messentries

* is a double layer of peritoneum that occurs as a result of the invagination of peritoneum by an organ and constitutes a continuity of the viscral and parietal peritoneum
* it provides a neurovascular communications between the organ and the body wall

④ Subdivisions of peritoneal cavity

transverse mesocolon divides the abdominal cavity into:

- supracolic containing the stomach liver spleen
- infracolic containing SI, ascending, descending colon.

→ ⑤

* the inferior infracolic lies post to greater omentum / and divided into Rt and Lt infracolic by mesentry of SI

* free communication occurs between the supracolic and infracolic compartment through the paracolic gutters

→ ⑥

[تقريباً]