Peripheral Nervous System

THE EYELIDS, EXTRAOCULAR MUSCLES & 3rd, 4th,6th CRANAIL NERVES

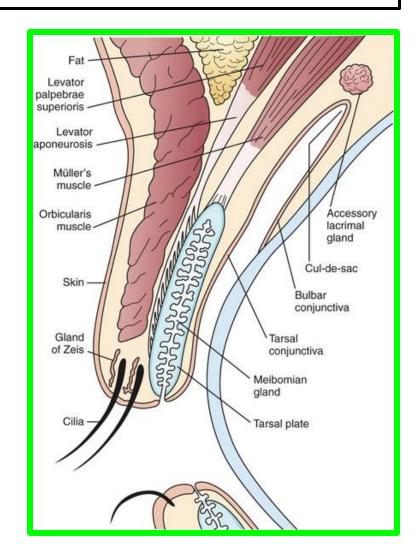
Dr. Aiman Qais Afar Surgical Anatomist

College of Medicine / University of Mutah 2024-2025

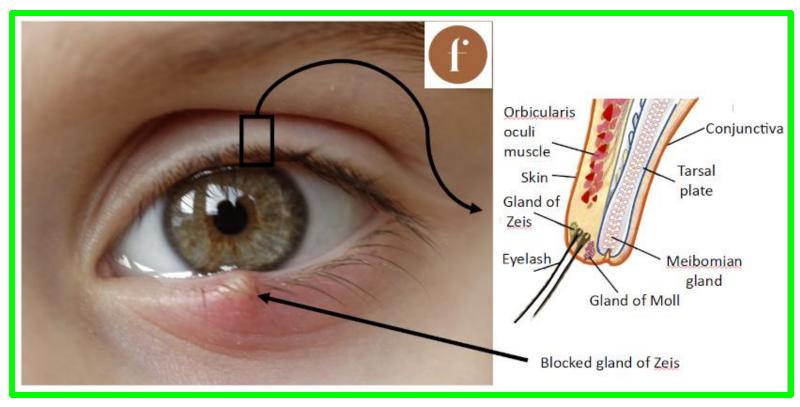
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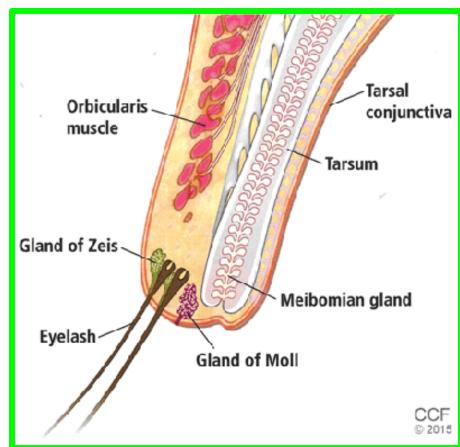
✓ The superficial surface of the eyelids is covered by skin, and the deep surface is covered by a mucous membrane called the conjunctiva.

- ✓ The eyelashes are short, curved hairs on the free edges of the eyelids
- √ They are arranged in double or triple rows at the mucocutaneous junction.



- ✓ The sebaceous glands (glands of Zeis) open directly into the eyelash follicles.
- ✓ The ciliary glands (glands of Moll) are modified sweat glands that open separately between adjacent lashes.

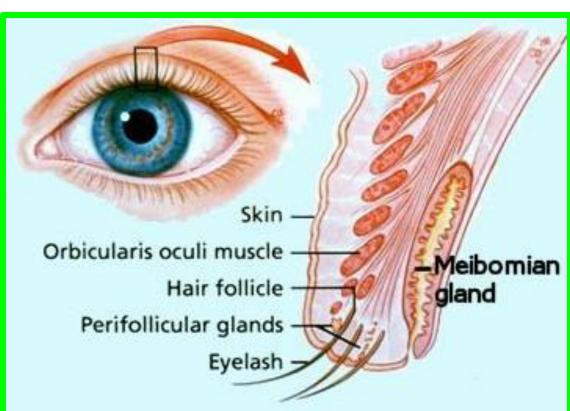




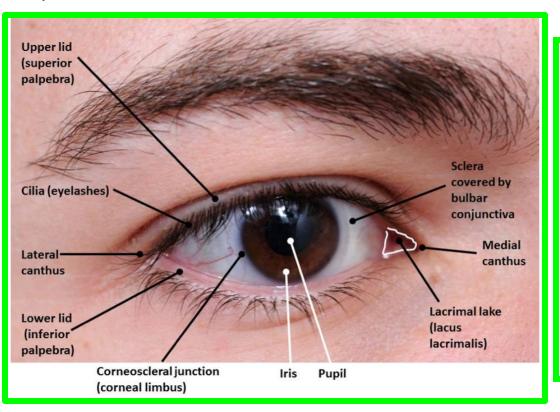


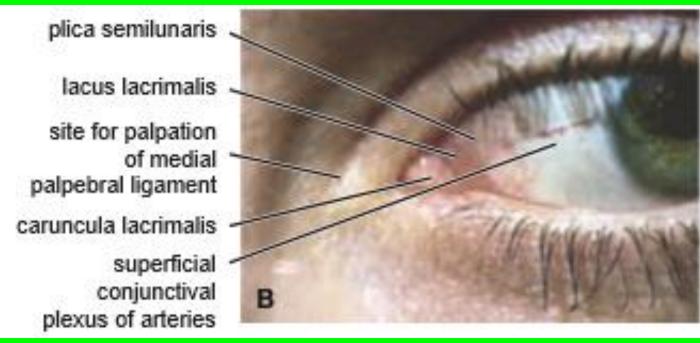
✓ The tarsal glands are long, modified sebaceous glands that pour their oily secretion onto the margin of the lid; their openings lie behind the eyelashes





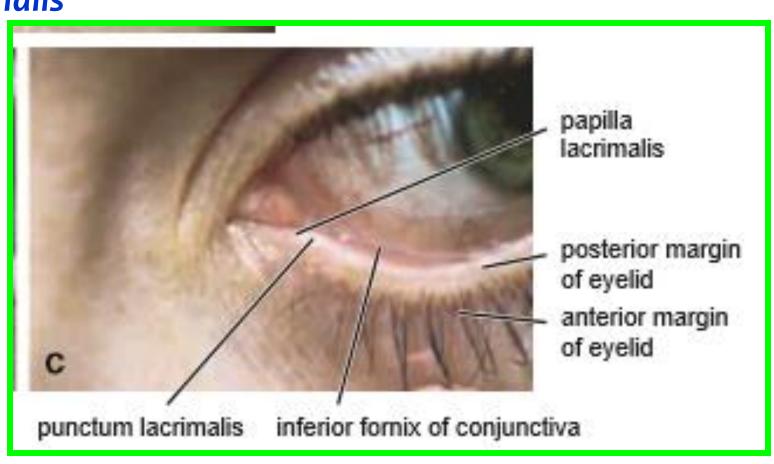
- ✓ The more rounded medial angle is separated from the eyeball by a small space, the lacus lacrimalis, in the center of which is a small, reddish yellow elevation, the caruncula lacrimalis
- ✓ A reddish semilunar fold, called the plica semilunaris, lies on the lateral side of the caruncle.





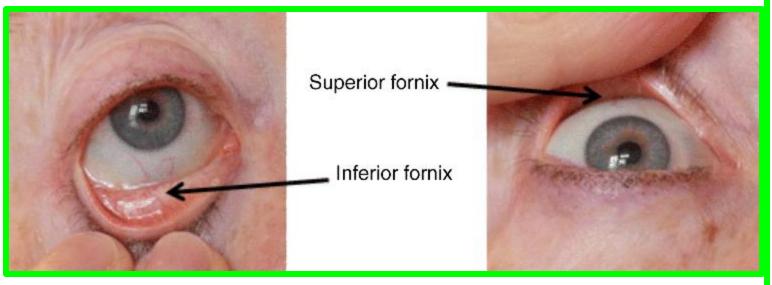
- ✓ Near the medial angle of the eye a small elevation, the papilla lacrimalis, is present.
- ✓ On the summit of the papilla is a small hole, the punctum lacrimale, which leads into the canaliculus lacrimalis
- √ The papilla lacrimalis projects into the lacus,
- ✓ the punctum and canaliculus carry tears down into the nose

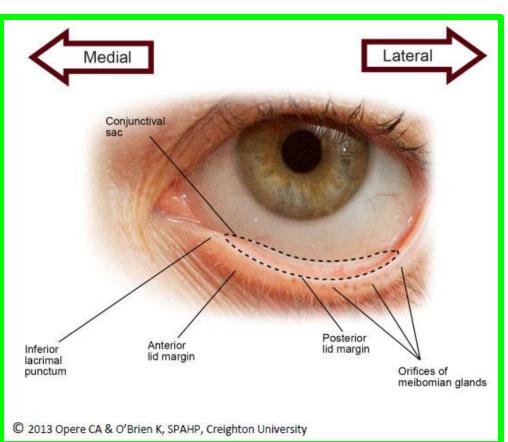
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The conjunctiva

- \checkmark is a thin mucous membrane that lines the eyelids and is reflected at the superior and inferior fornices onto the anterior surface of the eyeball
- ✓ Its epithelium is continuous with that of the cornea.

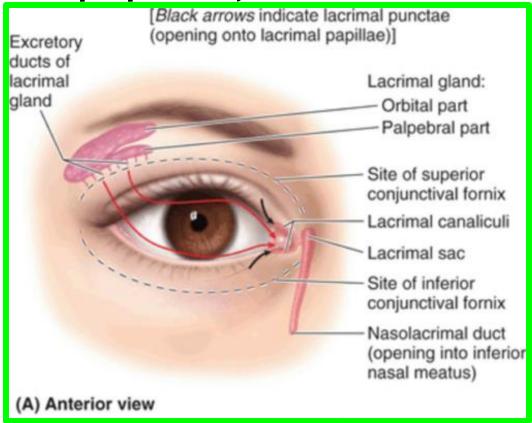


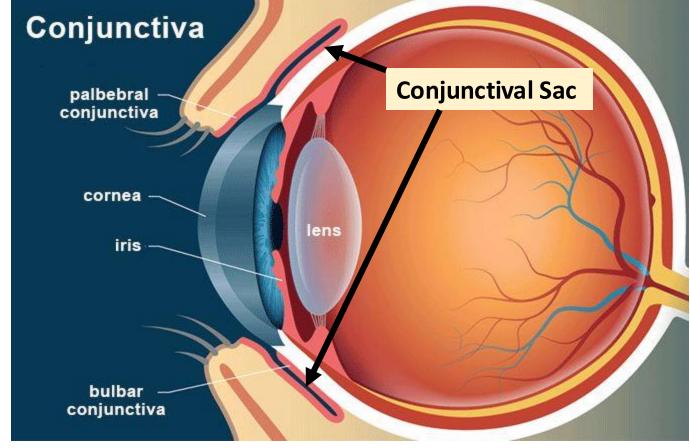


√ The upper lateral part of the superior fornix is pierced by the ducts of the lacrimal gland

The conjunctiva thus forms a potential space, the conjunctival sac, which is open

at the palpebral fissure.





√ The framework of the eyelids is formed by a fibrous sheet, the orbital septum

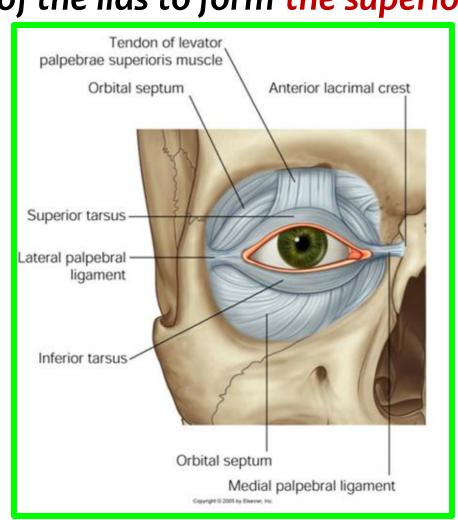
√ This is attached to the periosteum at the orbital margins.

✓ The orbital septum is thickened at the margins of the lids to form the superior

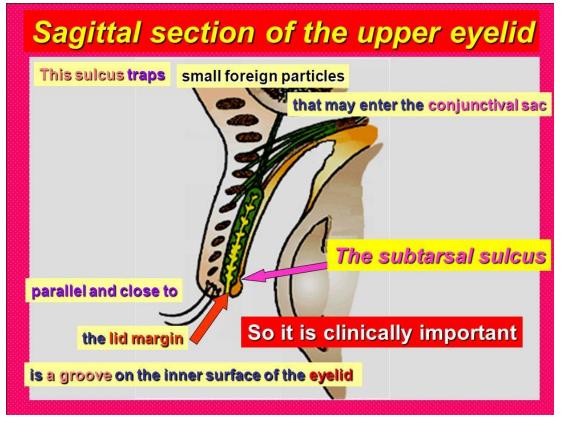
and inferior tarsal plates.

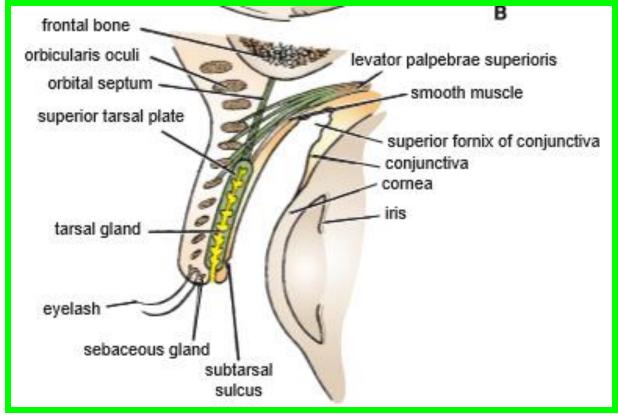
√ The tarsal glands are embedded in the posterior surface of the tarsal plates.

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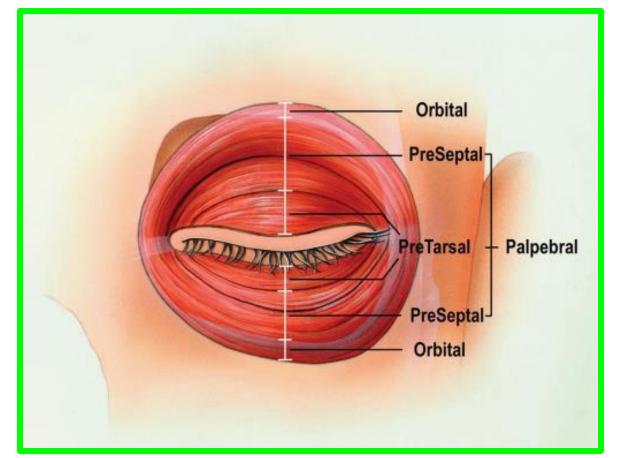
- ✓ Beneath the eyelid is a groove, the subtarsal sulcus, which runs close to and parallel with the margin of the lid.
- √ The sulcus tends to trap small foreign particles introduced into the conjunctival sac and is thus clinically important.

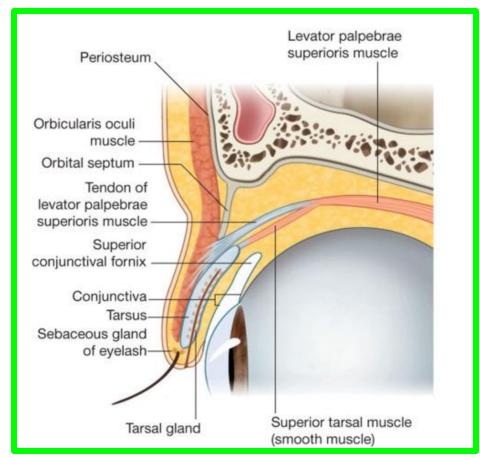




- √ The superficial surface of the tarsal plates and the orbital septum are covered
 by the palpebral fibers of the orbicularis oculi muscle
- ✓ The aponeurosis of insertion of the levator palpebrae superioris muscle pierces the orbital septum to reach the anterior surface of the superior tarsal plate and

the skin





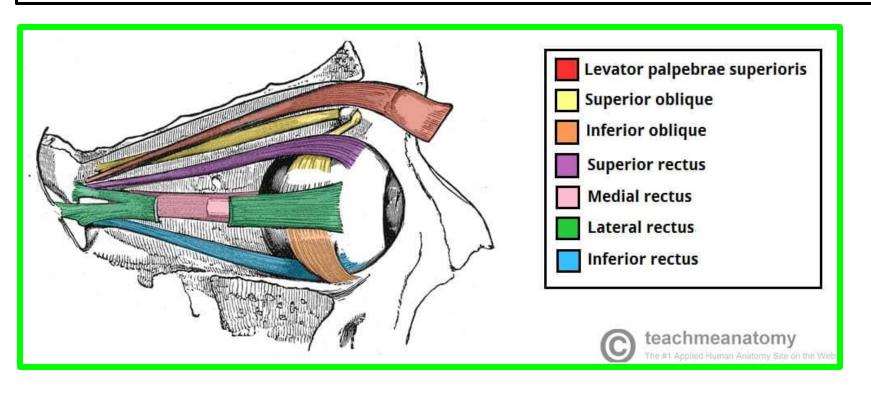
Muscle: Superior rectus

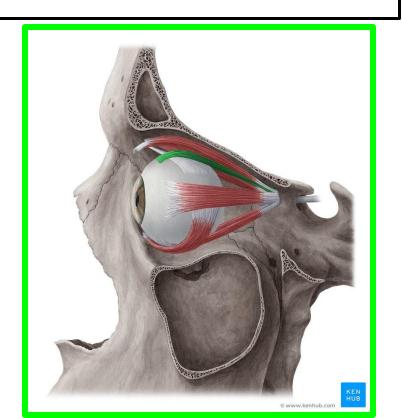
Origin: common tendinous ring

Insertion: Superior surface of eyeball just posterior to corneoscleral junction

N. Supply: Oculomotor nerve

Action: Raises cornea upward and medially





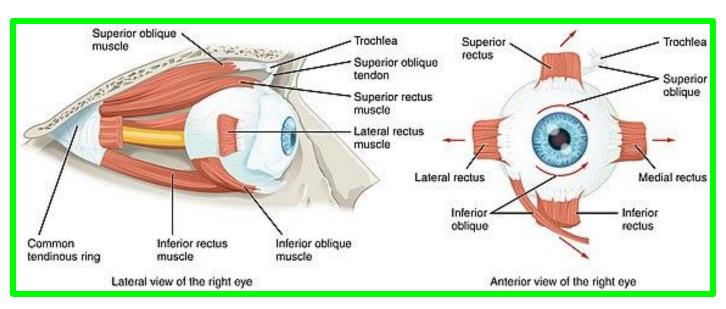
Muscle: Inferior rectus

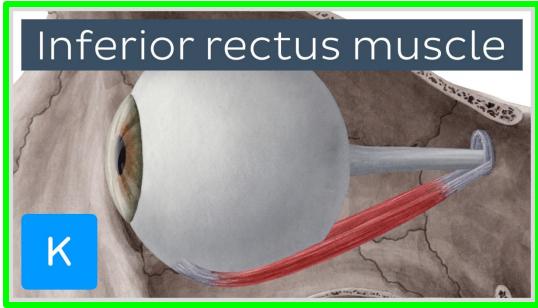
Origin: common tendinous ring

Insertion: Inferior surface of eyeball just posterior to corneoscleral junction

N Supply: Oculomotor nerve (3rd cranial nerve)

Action: Depresses cornea downward and medially





Muscle: Medial rectus

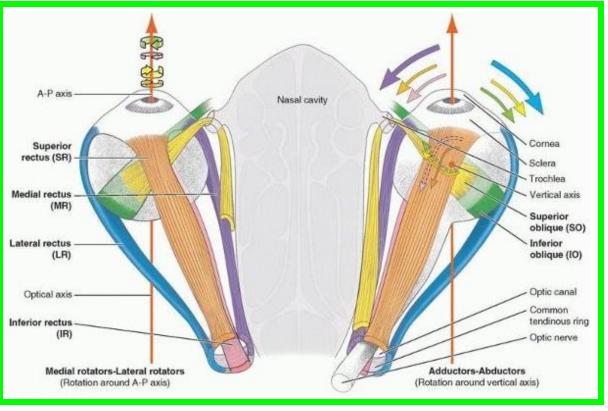
Origin: Common tendinous ring

Insertion: Medial surface of eyeball just posterior to corneoscleral junction

N. Supply: Oculomotor nerve (3rd cranial nerve)

Action: Rotates eyeball so that cornea looks medially





Muscle: Lateral rectus

Origin: Common tendinous ring

Insertion: Lateral surface of eyeball just posterior to corneoscleral junction

N. Supply: Abducent nerve (6th cranial nerve)

Action: Rotates eyeball so that cornea looks laterally



Muscle: Superior oblique

Origin: Posterior wall of orbital cavity

Insertion: Passes through pulley and is

attached to superior surface of eyeball

beneath superior rectus

N. Supply: Trochlear nerve (4th cranial nerve)

Action: Rotates eyeball so that cornea looks

downward and laterally



Muscle: Inferior oblique

Origin: Floor of orbital cavity

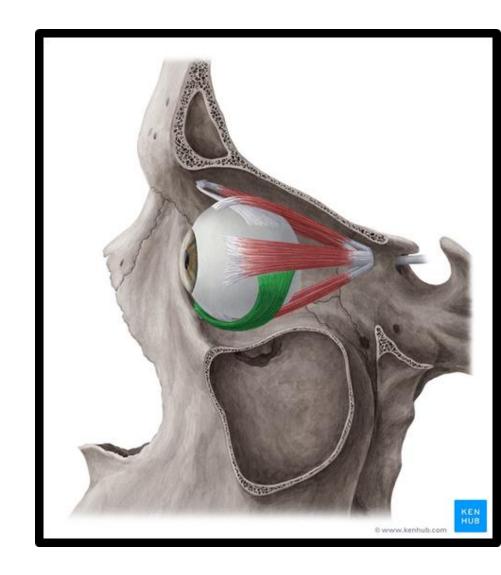
Insertion: Lateral surface of eyeball deep to

lateral rectus

N. Supply: Oculomotor nerve (3rd cranial nerve)

Action: Rotates eyeball so that cornea looks

upward and laterally



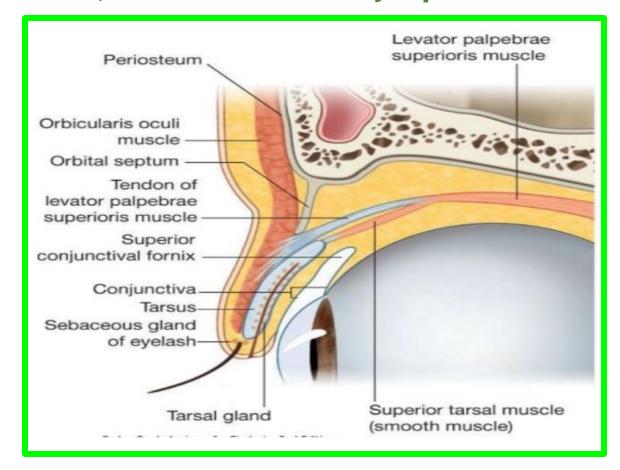
Muscle: Levator palpebrae superioris

Origin: Back of orbital cavity

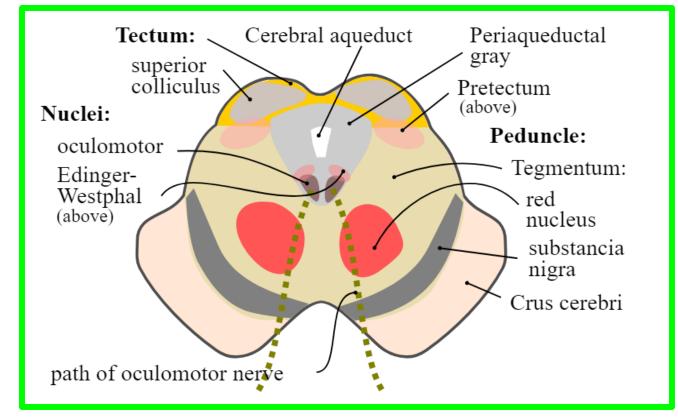
Insertion: Anterior surface and upper margin of superior tarsal plate

N. Supply: Striated muscle oculomotor nerve, smooth muscle sympathetic

Action: Raises upper lid

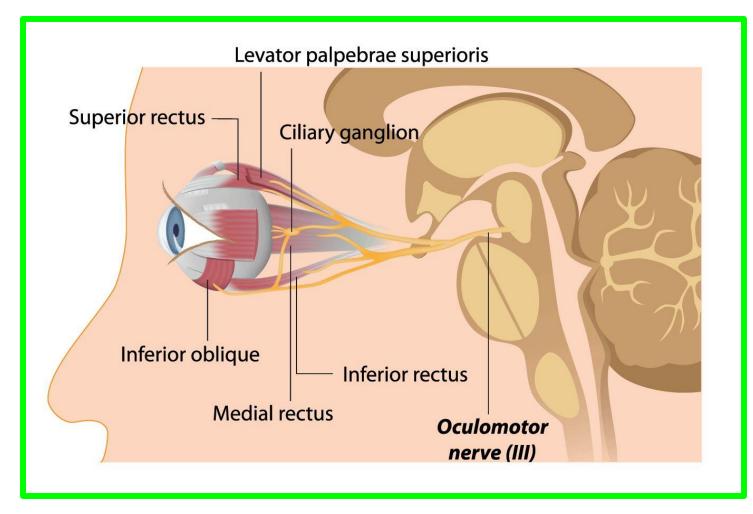


- Nucleus: It lies in the midbrain and formed of;
 - A. Motor nucleus: It supplies all the extra ocular muscles except lateral rectus and superior oblique
 - B. Edinger-westphal nucleus: (Parasympathetic) to the constrictor pupillae muscle and ciliary muscle.



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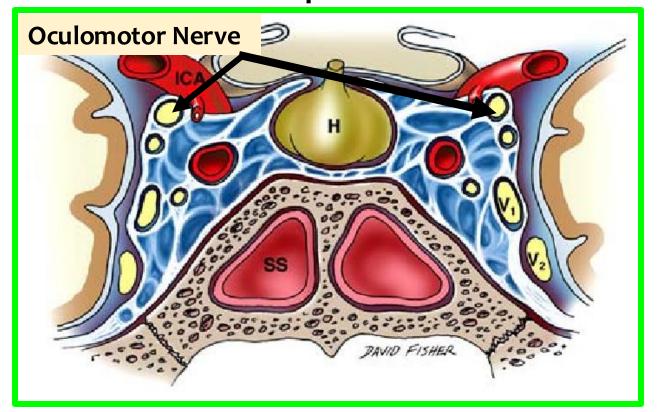
• Exit from the brain stem: arises from the medial aspect of the cerebral peduncle in the inter-peduncular fossa.

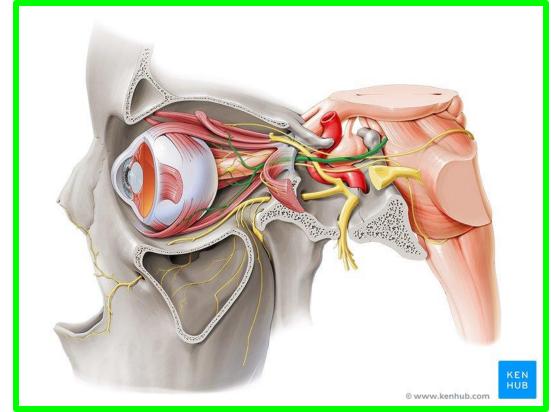


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Course:

- 1- It pierces the dura mater in front of the point of crossing of the free border with the attached border of the tentorium cerebelli.
- 2- It passes forwards in the lateral wall of cavernous sinus above the trochlear nerve.
- 3- Then it enters the orbit through the superior orbital fissure inside the tendinous ring where it divides into superior and inferior divisions:

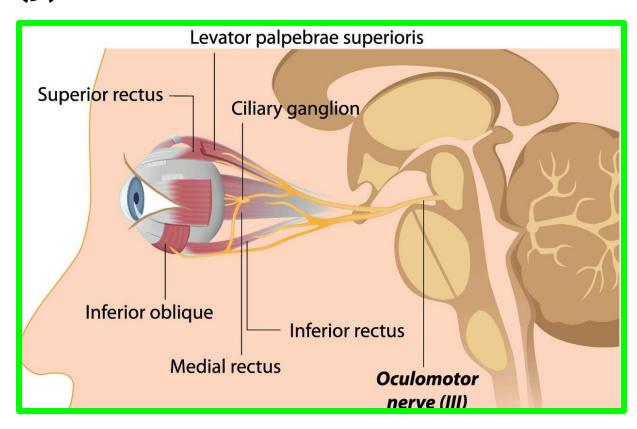




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- ***Branches:**
- (a) The superior division supplies:
- (1) Superior rectus (2) Levator palpebrae superioris.
- (b) The inferior division supplies:
- (1) inferior oblique (2) Inferior rectus (3) Medial rectus.

(c) The nerve to inferior oblique gives a parasympathetic root to the ciliary ganglion to supply the constrictor pupillae muscle and ciliary muscle.

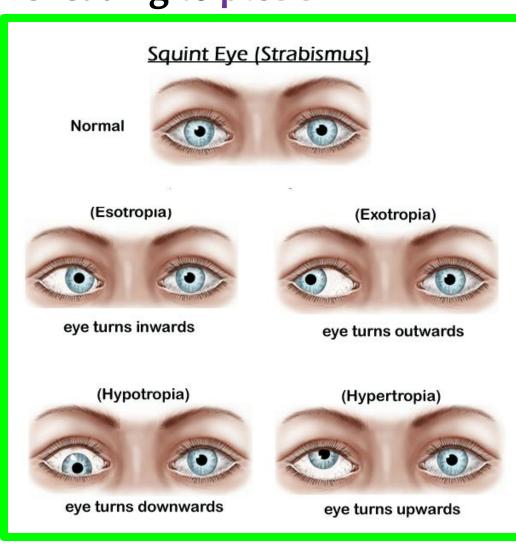


- **❖** Applied anatomy: injury of the nerve
 - 1- Paralysis of the levator palpebrae superioris leading to ptosis.

2- Squint.

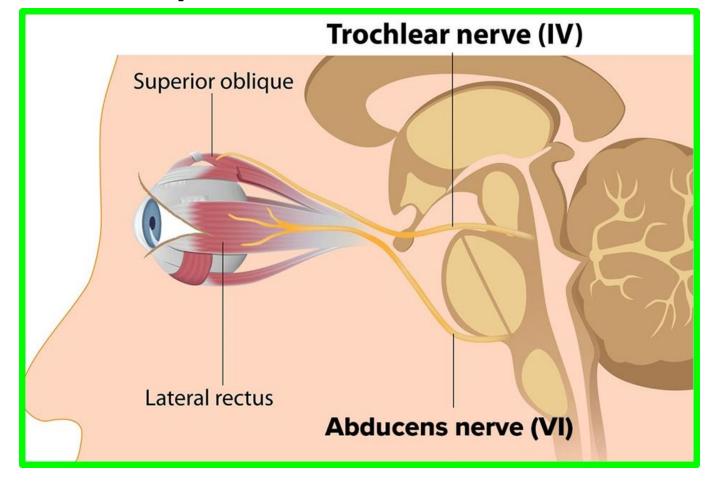


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TROCHLEAR NERVE / (4th) Cranial Nerve

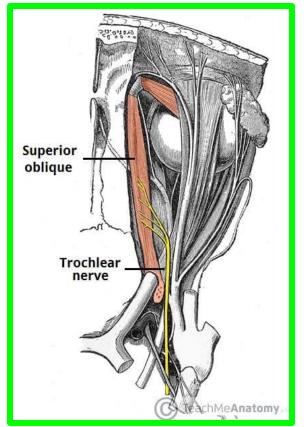
- Nucleus: Motor nucleus in the midbrain.
- **Exit:** arises from the posterior aspect of midbrain.

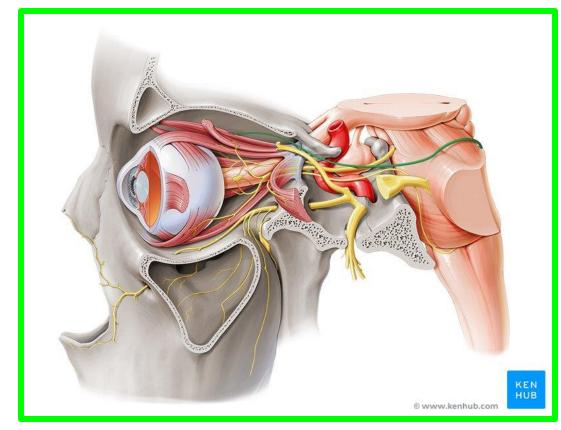


TROCHLEAR NERVE / (4th) Cranial Nerve

Course:

- (1) It turns forwards around the midbrain.
- (2) It pierces the dura mater at the point of decussation of the tentorium cerebelli.
- (3) It passes forwards in the lateral wall of cavernous sinus.
- (4) Finally it enters the orbit through the superior orbital fissure outside the tendinous ring.

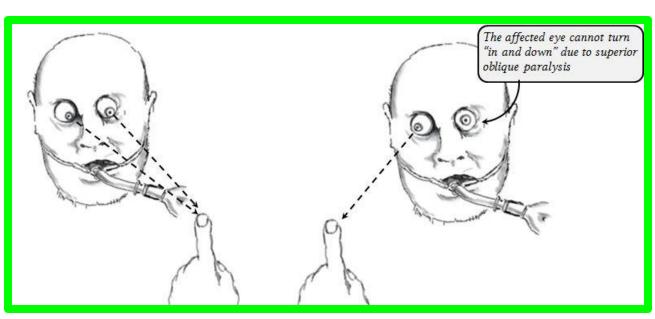


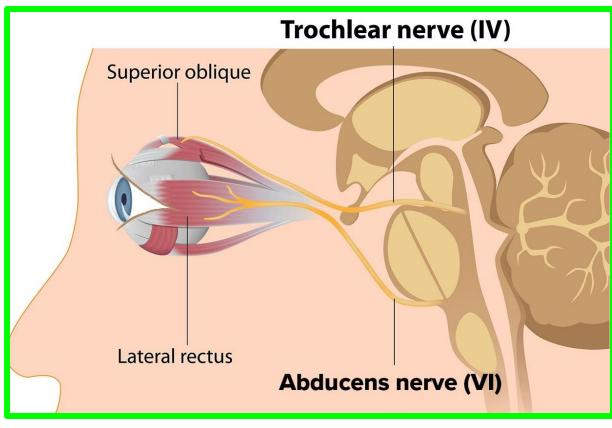


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TROCHLEAR NERVE / (4th) Cranial Nerve

- **Branches:** it supplies the superior oblique muscle.
- Applied anatomy; injury of the trochlear nerve the cornea cannot be directed downwards and laterally.





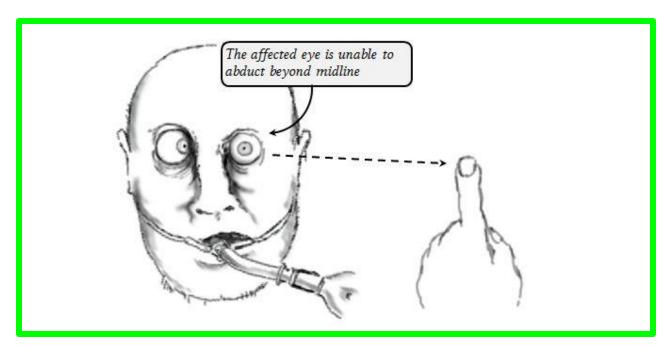
ABDUCENT NERVE (6th) / Cranial Nerve

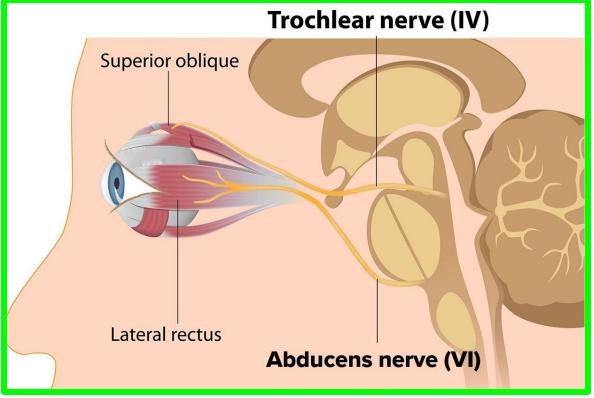
Nucleus: motor nucleus in the pons.

Exit: from the groove between lower border of the pons and upper border of the pyramid.

Applied anatomy: Abducent nerve Lesion: leads to medial deviation of

the cornea.





ABDUCENT NERVE (6th) / Cranial Nerve

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course and relations:

(1) It pierces the dura at the apex of the petrous part of the temporal bone.

(2)It enters the cavernous sinus infero-lateral to the internal carotid artery.

(3) Then it enters the orbit through the superior orbital fissure inside the tendinous ring.

(4)It supplies the lateral rectus muscle.

