

وسهلا



أهلا

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

الأستاذ الدكتور يوسف حسين

كلية الطب - جامعة مؤتة - الأردن

دكتورة من جامعة كولونيا المانيا

Prof. Dr. Youssef Hussein Anatomy - YouTube

الواتس 00201224904207

Intended Learning Outcomes (ILOs)

- **Development and congenital anomalies of the Skull**
- **Development and congenital anomalies of the Limbs**

dr_youssefhussein@yahoo.com

Development of skull

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Metopic suture **Frontal suture**

Bregma

Anterior fontanelle

Parietal bone

Lambda

Posterior fontanelle

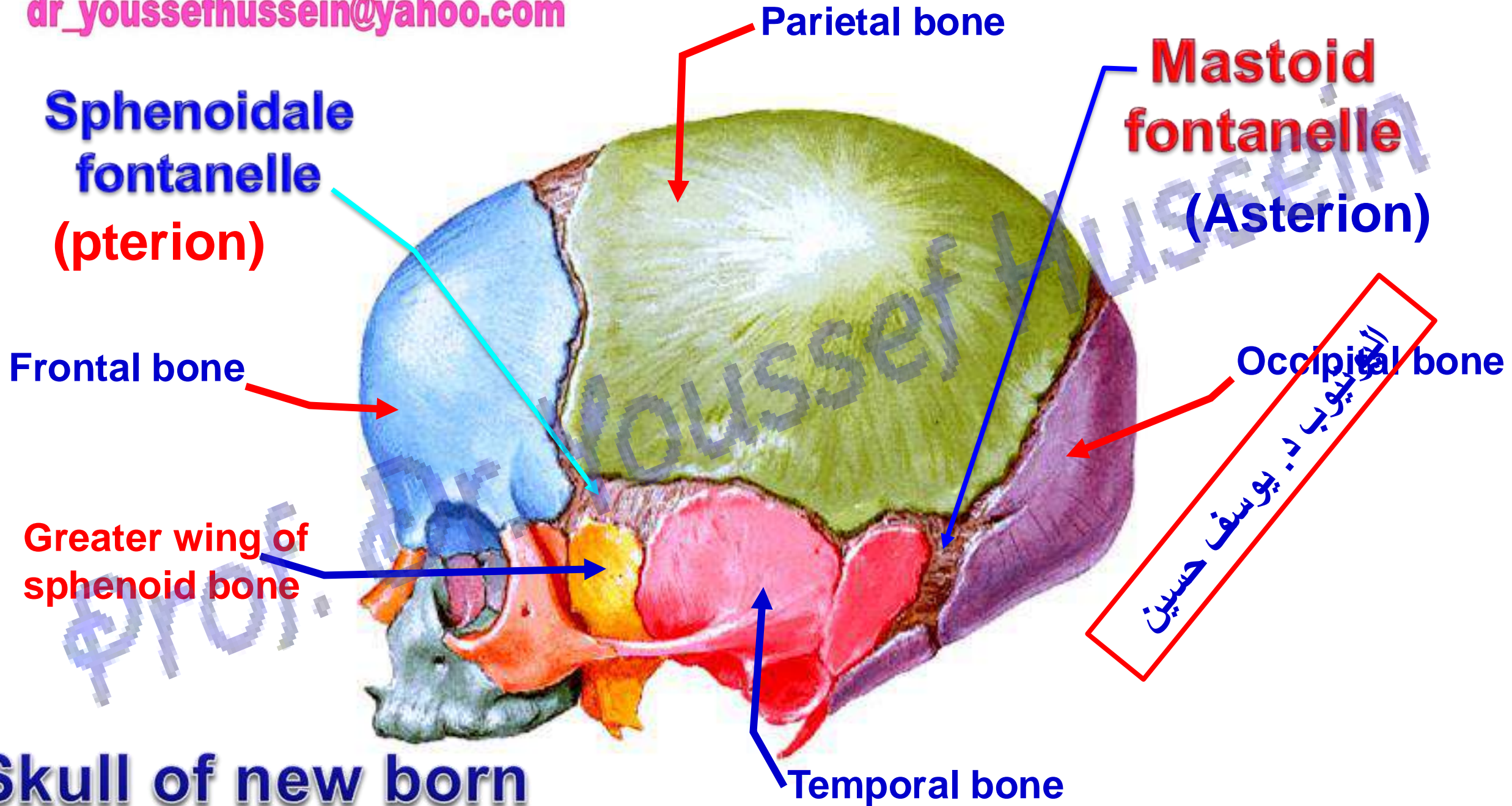
Frontal bone

- **Vault of skull (Flat bones)**
 - **(Neurocranium)**
- It develops from the **mesoderm** around the developing brain.
- These bones included the frontal, parietal, and occipital
- These bones ossified in membranes.

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Occipital bone

dr_youssefhussein@yahoo.com



Skull of new born

**** The newborn skull**

- The bones of the newborn skulls are separated from each other by sutures.
- At The meeting of more than 2 bones there is membranous parts called the

fontanelle. They include:

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1- Anterior fontanelle: between the frontal and 2 parietal bones. It is closed about 18 months (**Bregma at adult**).

2- Posterior fontanelle: between the occipital and 2 parietal bones. It is closed about 6 months (**Lambda at adult**).

3- Sphenoid fontanelle: between the frontal, sphenoid, temporal and parietal bones. It is closed about 3 months (**pterion at adult**).

4- Mastoid fontanelle: between the occipital, parietal and mastoid part of temporal bones. It is closed about 3 months (**asterion at adult**).

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Norma basalis interna

Cribriform plate of ethmoid bone

Body of sphenoid

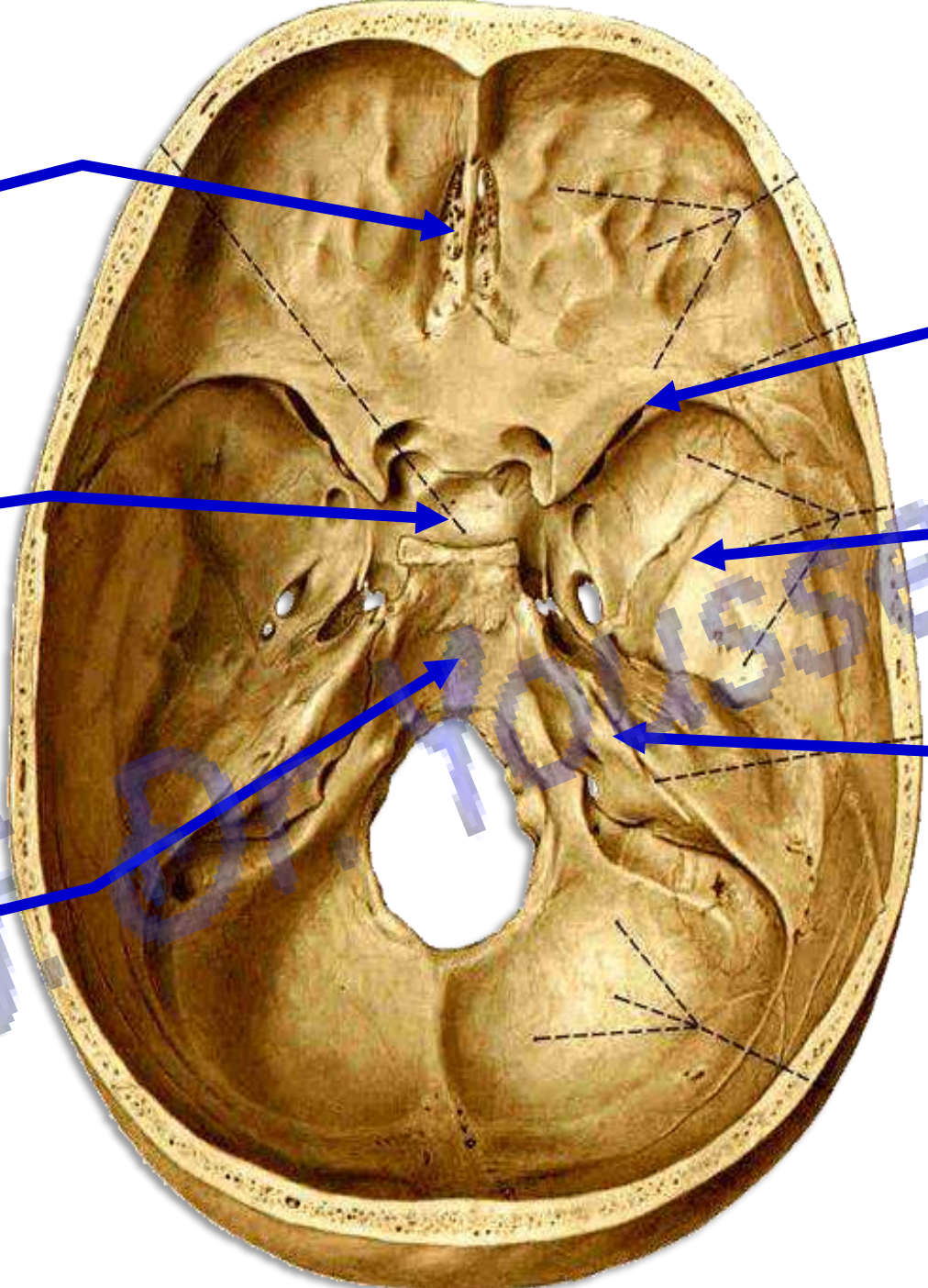
Basilar part of occipital bone

Lesser wing of sphenoid

Greater wing of sphenoid

Petrous part of temporal cone

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Base of skull

3 Median mesodermal masses

Trabecula cranii cartilage:
form the cribriform plate of ethmoid bone

Hypophyseal cartilage:
form the body of sphenoid

Pituitary gland

Parachordal (Basal) cartilage: It forms the basilar part of occipital bone

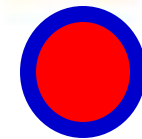
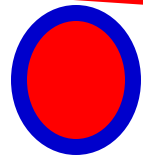
Notochord

3 Lateral mesodermal masses

Ala orbitalis: forms lesser wing of sphenoid bone

Ala temporalis: forms greater wing of sphenoid

Periotic capsules:
form petrous and mastoid parts of the temporal bone



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Congenital anomalies of skull

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- **Microcephaly** small skull and cerebral hemisphere

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- **Hydrocephalus** excessive accumulation of C.S.F. in the ventricular system due to closure in the CSF circulation



- **Anencephaly:**

failure of development of greater part of the brain and vault of the skull due to failure of cephalic part of the neural tube to close

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Meningocele

herniation of a part of the meninges



For Information,
Visit: www.epainassist.com



- **Meningoencephalocele** herniation of a part of the brain and its covering meninges.
- **Meningohydroencephalocele**: herniation of the meninges and part of the brain and its ventricle containing CSF

Meningoencephalocele



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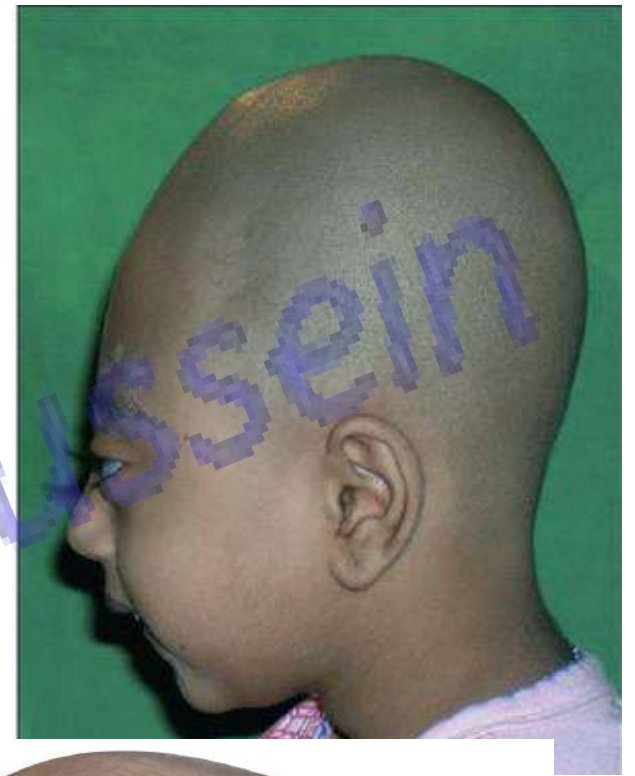
Scaphocephaly: the skull is elongated anteroposterior due to early closure of the **sagittal suture**



Acrocephaly: high skull due to early closure of the **coronal suture**

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Plagiocephaly: Asymmetrical shape due to early closure of the **coronal and lambdoid sutures**



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Development of limbs

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• DEVELOPMENT OF THE LIMBS

- * They develop as 4 buds (2 cranial and 2 caudal) at 4th week.
- * Each limb bud is formed of a **mass of mesoderm**, its **central** part changes into **cartilage** then into **bone** while the **surrounding mesoderm** forms the **muscles**.
- * The **upper limb** divides into arm, forearm and hand with 5 fingers.
- * The **lower limb** divides into thigh, leg and foot with 5 toes.
- * Each limb bud forms **right angle (90 degree) with the trunk** and has a **preaxial** border cranially (**radius, and thumb for the upper limb** and **tibia and big toe for the lower limb**) and a **postaxial** border caudally.



** Rotation of the limbs

- **Upper limb** rotates **laterally** so that the preaxial border (radius and thumb) becomes lateral and the flexor surface becomes anterior.
- * **Lower limb** rotates **medially** so that the preaxial border (tibia and big toe) becomes medial and the flexor surface becomes posterior.



الدكتور يوسف حسين

dr_youssefhussein@yahoo.com

Congenital anomalies of limbs

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Meromelia (Phocomelia): The limbs represented only by foot or hand attached to the trunk



Amelia: Absence of one or more limbs



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Micromelia: short segments of the limb



Lobster hand: A central fissure or cleft divides the hand or foot into 2 parts



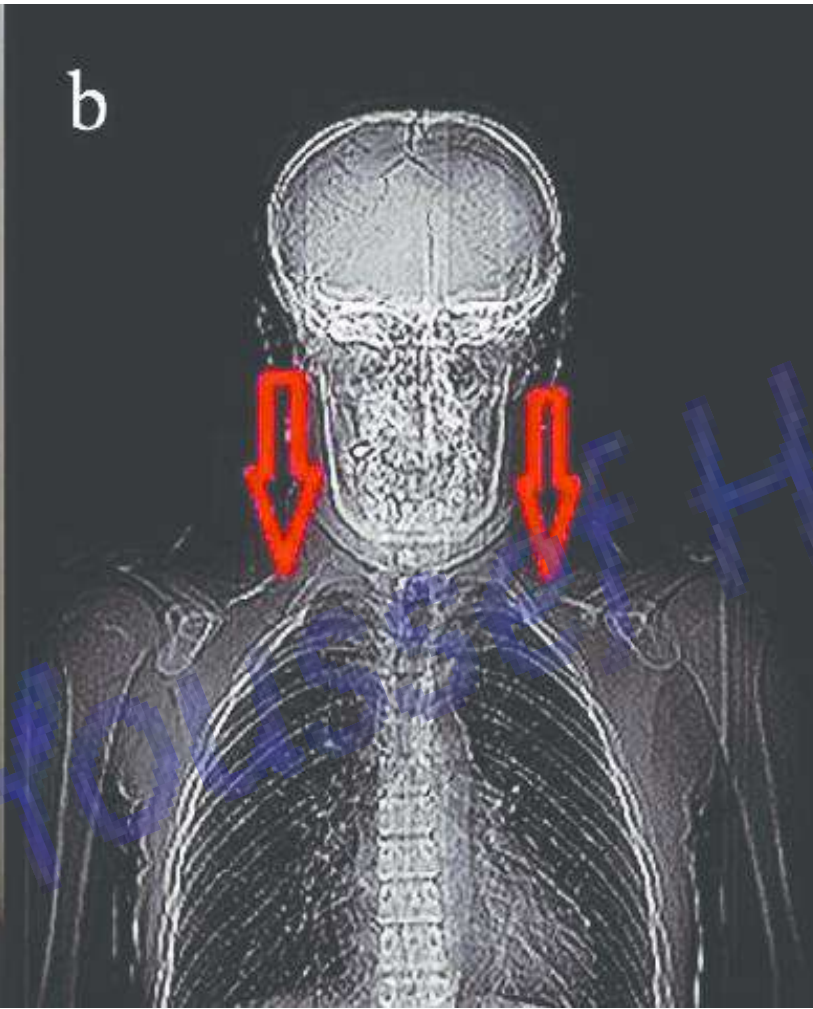
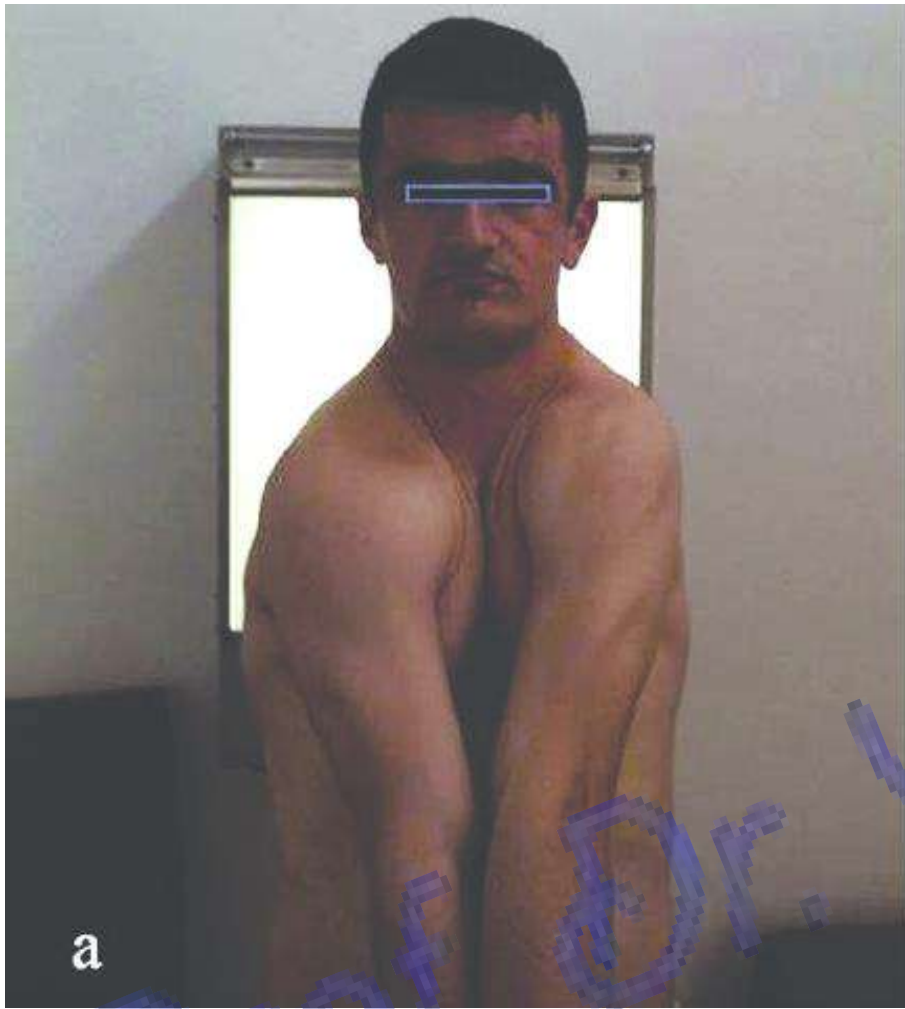
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Polydactyl: Extra number of the fingers or toes.

Syndactyl: Abnormal fusion of the fingers.

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Congenital absence of some bones as **clavicle**

Hussein

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Congenital anomalies of foets

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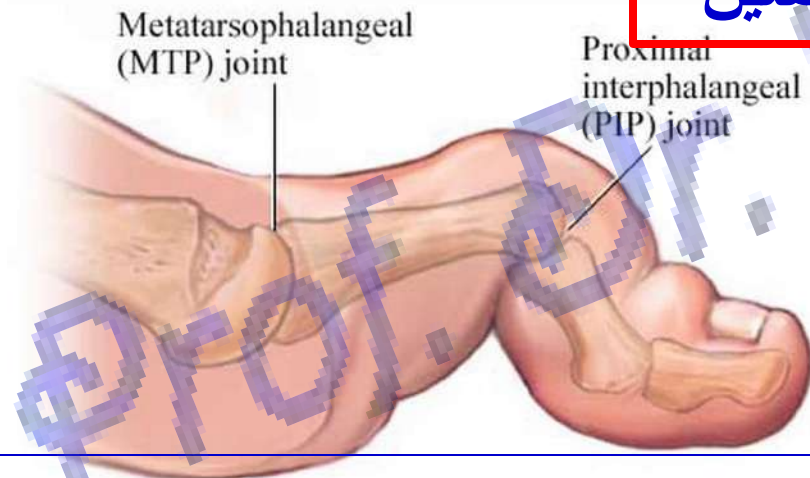


- **Flat Foot:** loss of the arch of the foot



- **Pes Cavus:** Arch of the foot is high

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- **Hammer Toe:** extension of metatarsophalangeal joint and flexion of proximal interphalangeal joint.



- **Hallux Valgus:** lateral deviation of the big toe at the metatarsophalangeal joint.

- **Talipes Equinus**, permanent plantar flexion, walking is done on toes without touching the heel to ground



- **Talipes Calcaneus**, permanent dorsiflexion, the heel rests on the ground and the toes pointed upwards

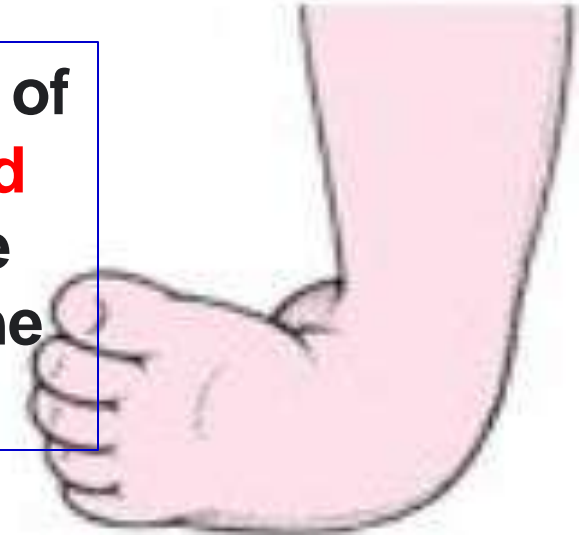


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Talipes valgus: the sole of the foot inclined **outward** so that walking is done on the **medial** side of the foot



Talipes varus: the sole of the foot inclined **inward** so that walking is done on the **lateral** side of the foot



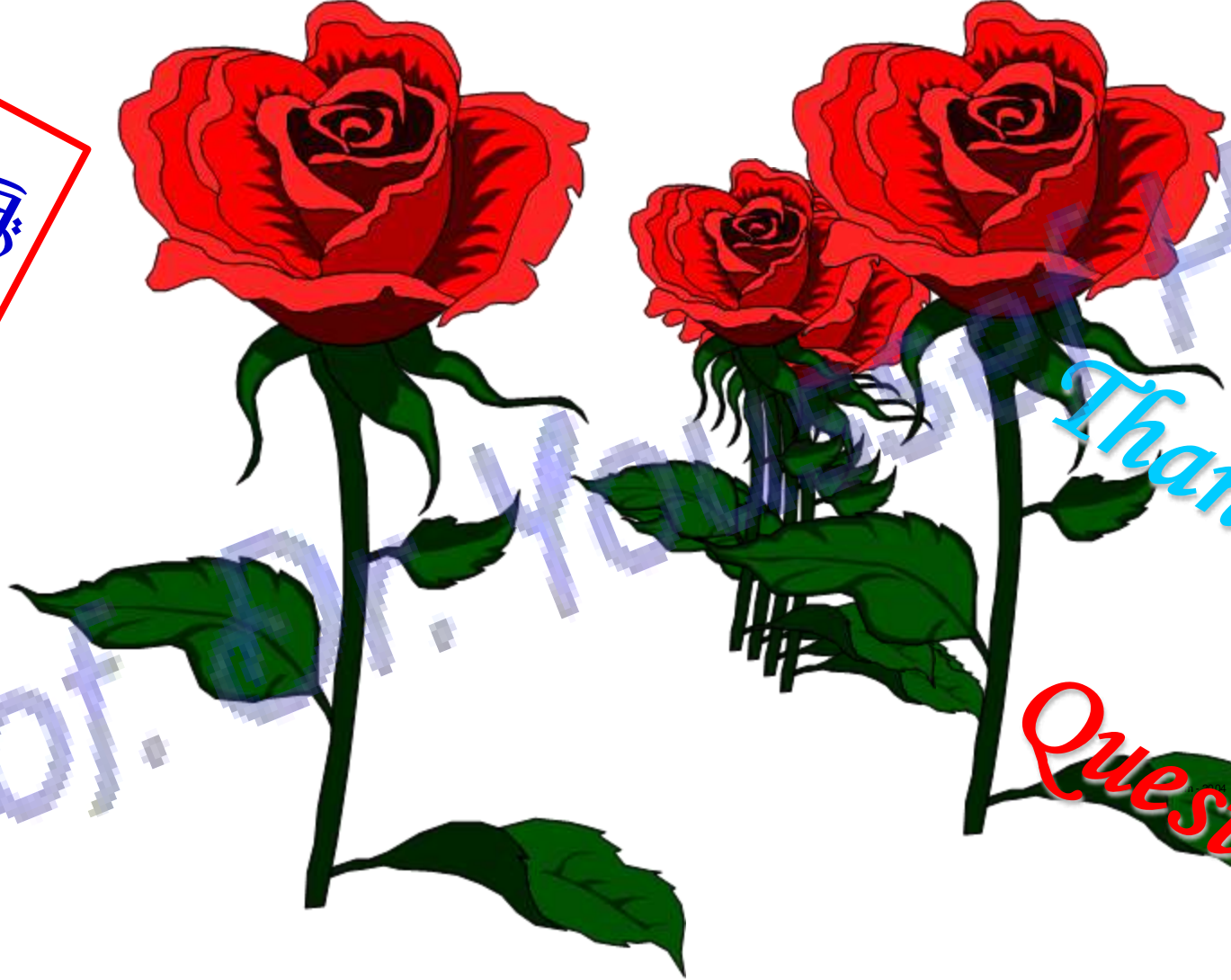
Intended Learning Outcomes (ILOs)

- **Development and congenital anomalies of the Diaphragm**
- **Development and congenital anomalies of the Nose**
- **Development and congenital anomalies of the Trachea and Lungs**

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Thank You

Questions

<https://www.youtube.com/@ProfDrYoussefHusseinAnatomy/playlists>