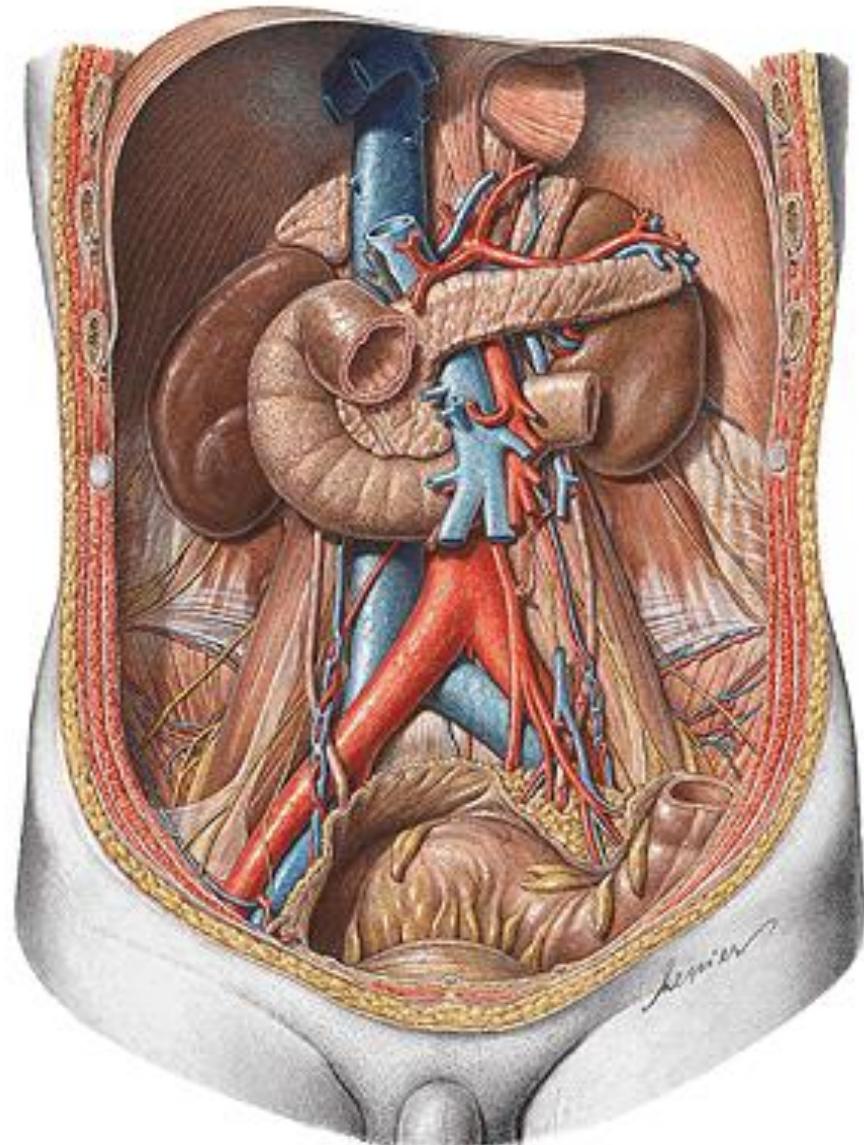
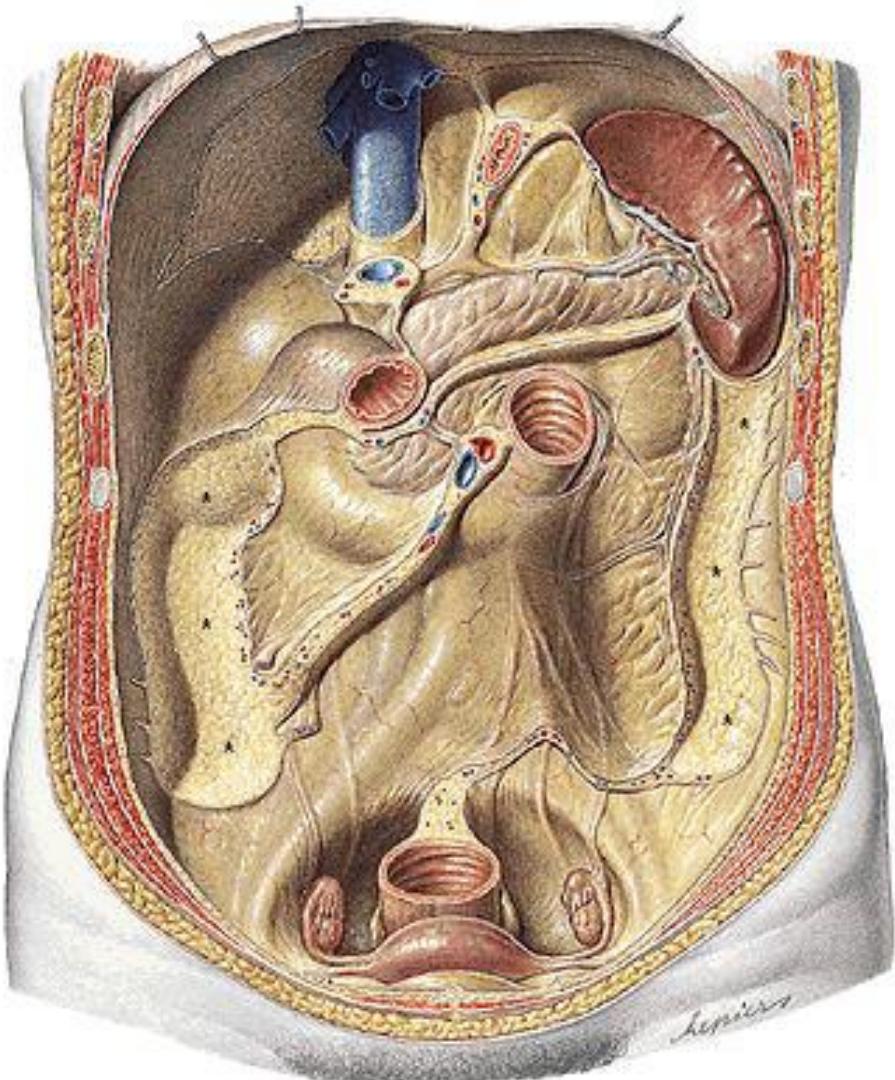


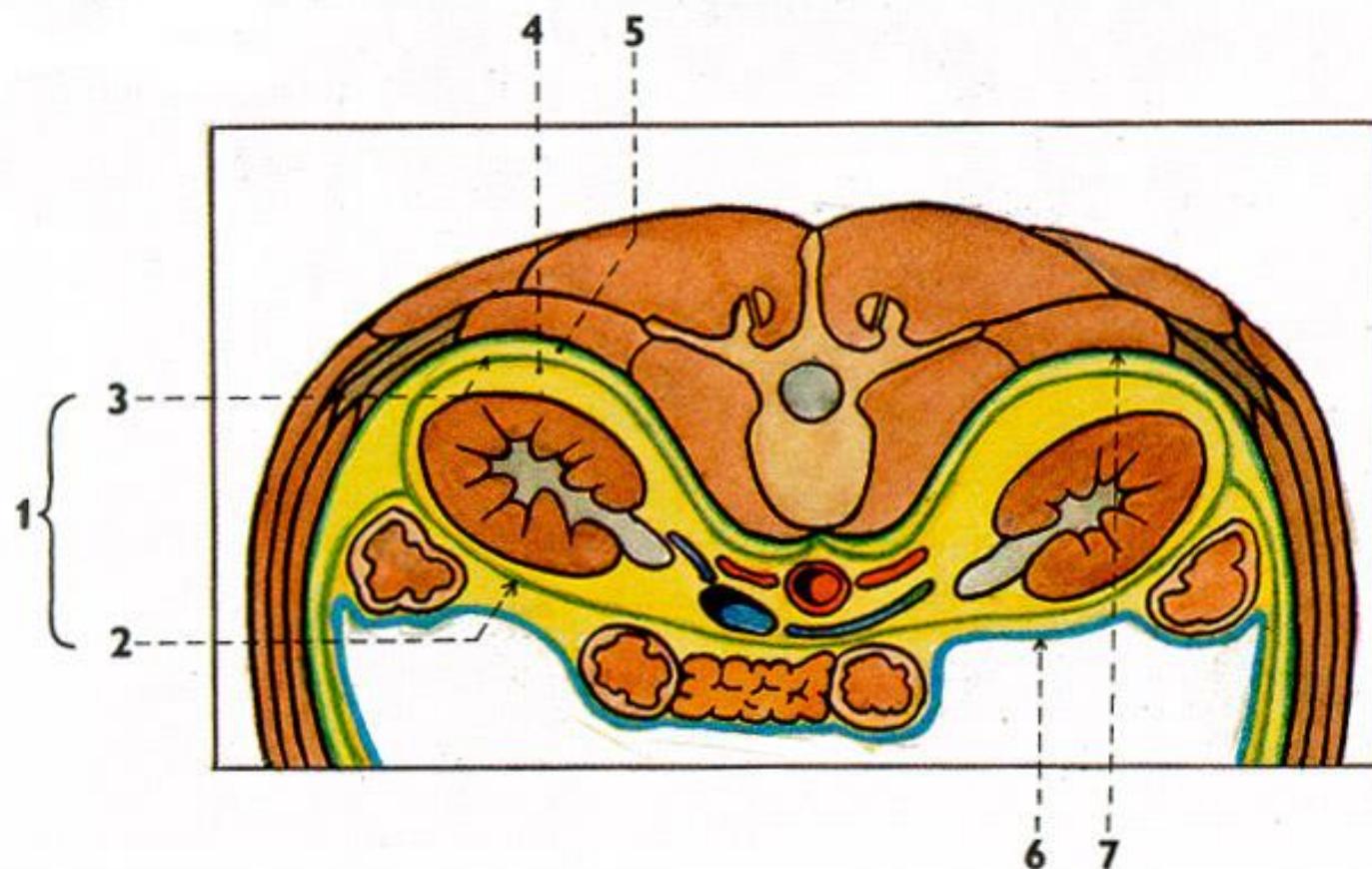
Anterior Cut-away View

Retroperitoneum



Position, fixation and renal covers

Transverse section at the level of L1



1 - fascia renalis *Gerotae*

2 - lamina prerenalis *Toldti*

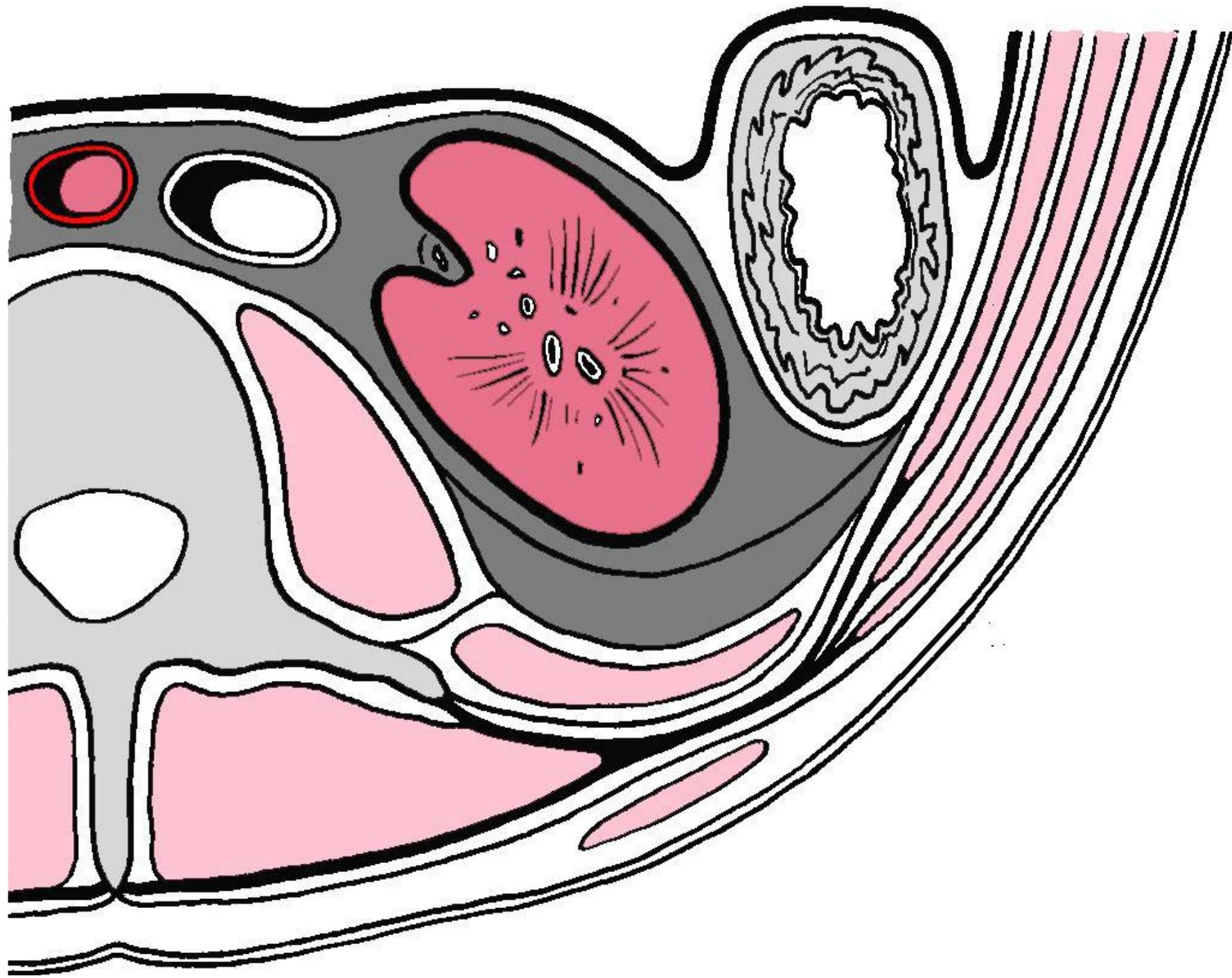
3 - lamina retrorenalis *Zuckerkandeli*

4 - corpus adiposum perirenale

5 - corpus adiposum pararenale

6 - peritoneum

7 - fascia transversalis

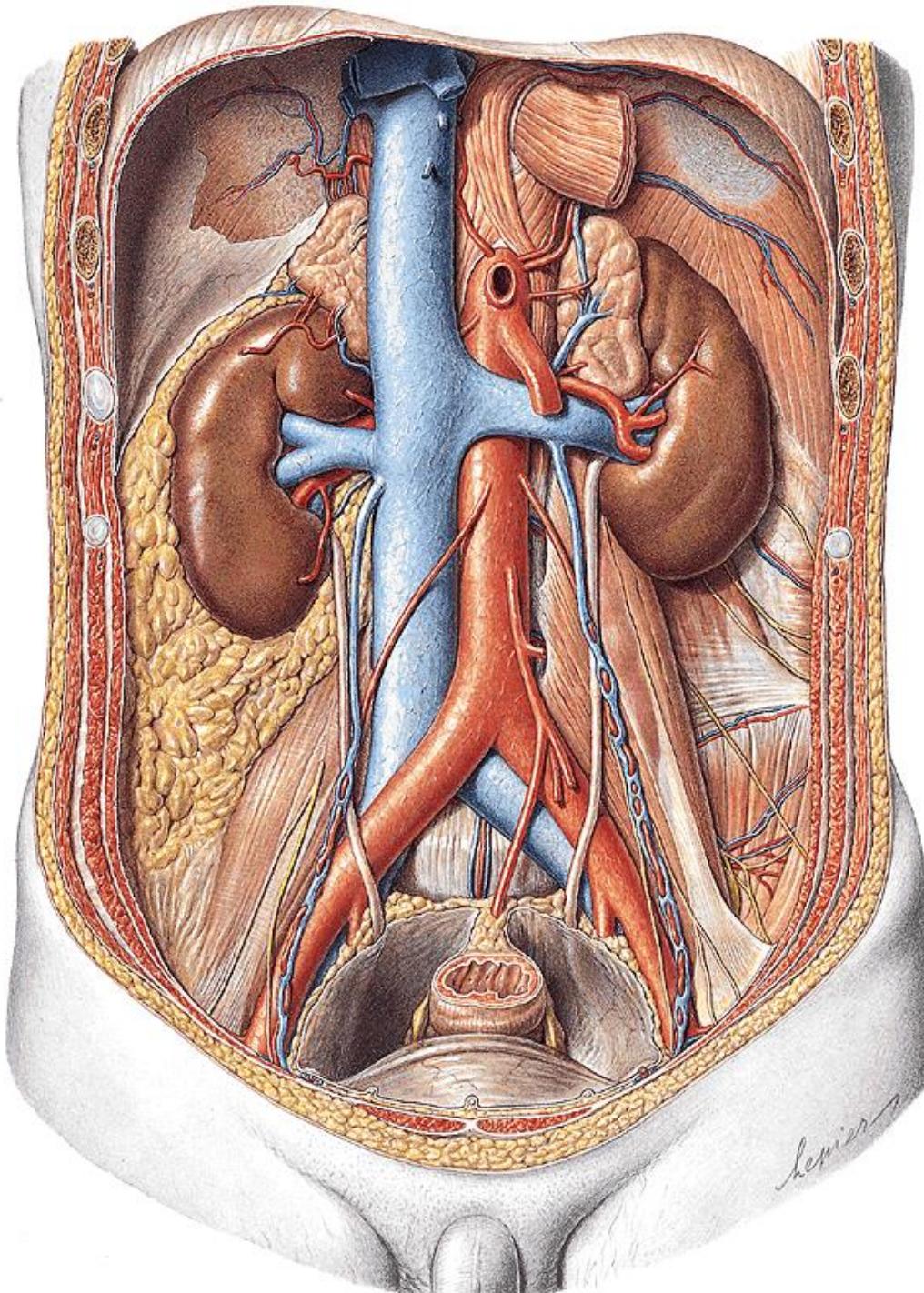


Aorta abdominalis

origin: hiatus oesophageus
diaphragmatis

end: bifurcatio aortae L4

- retroperitoneum, slightly left to vertebral column
- v. cava inferior + ductus thoracicus right to aorta abdominalis



Aorta abdominalis

parietal branches: paired

- a. phrenica inf.
- aa. lumbales 1st - 4th
- rr. retroperitoneales (6-7)

visceral branches: paired

- a. suprarenalis media
- a. renalis
- a. renalis accessoria (30%)
- a. testicularis♂ / ovarica♀

AORTA ABDOMINALIS

a. suprarenalis sup.

a. suprarenalis media

a. suprarenalis inf.

a. renalis

a. ovarica /
testicularis

a. phrenica inf.

truncus coeliacus

a. mesenterica sup.

a. mesenterica inf.

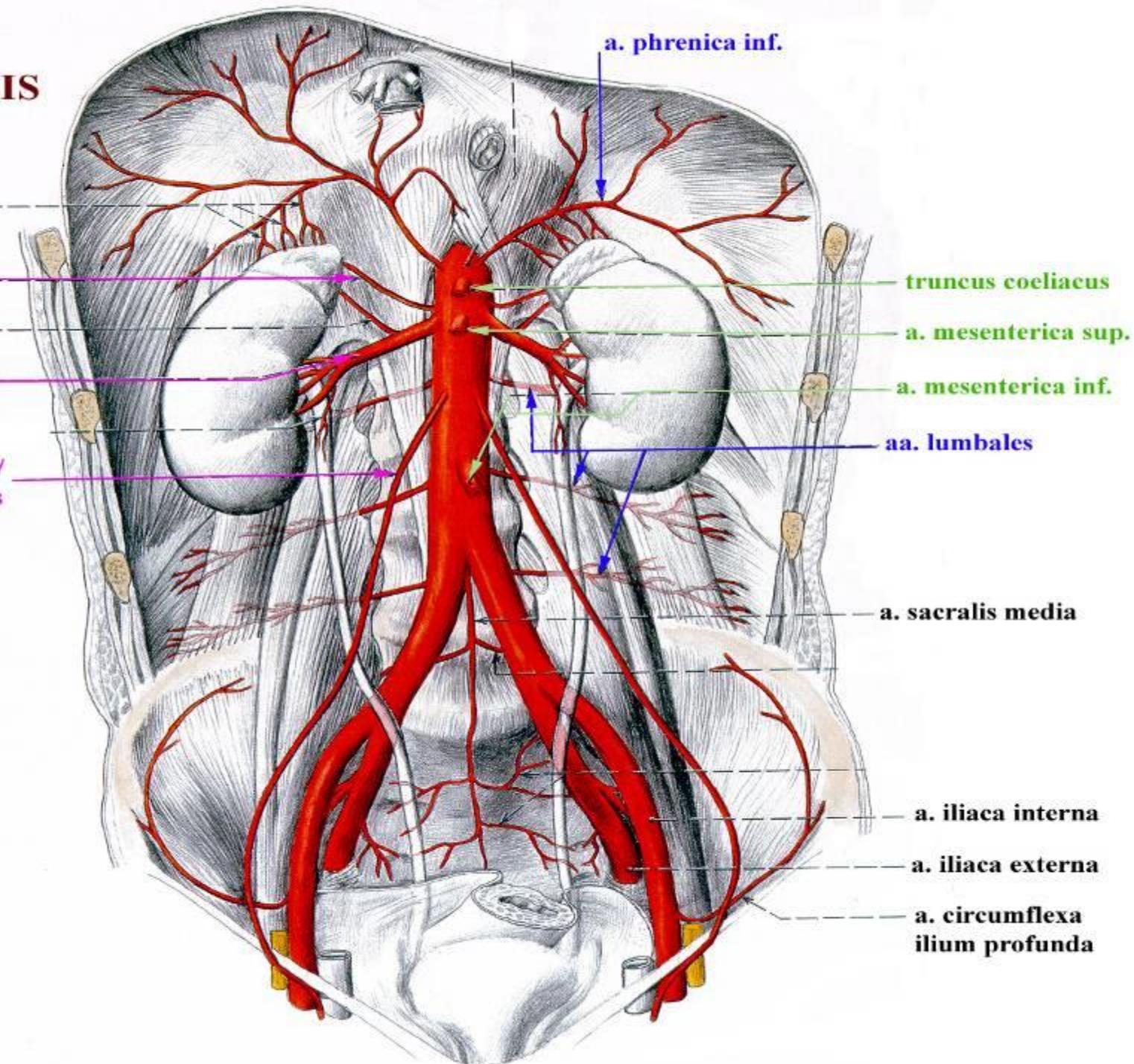
aa. lumbales

a. sacralis media

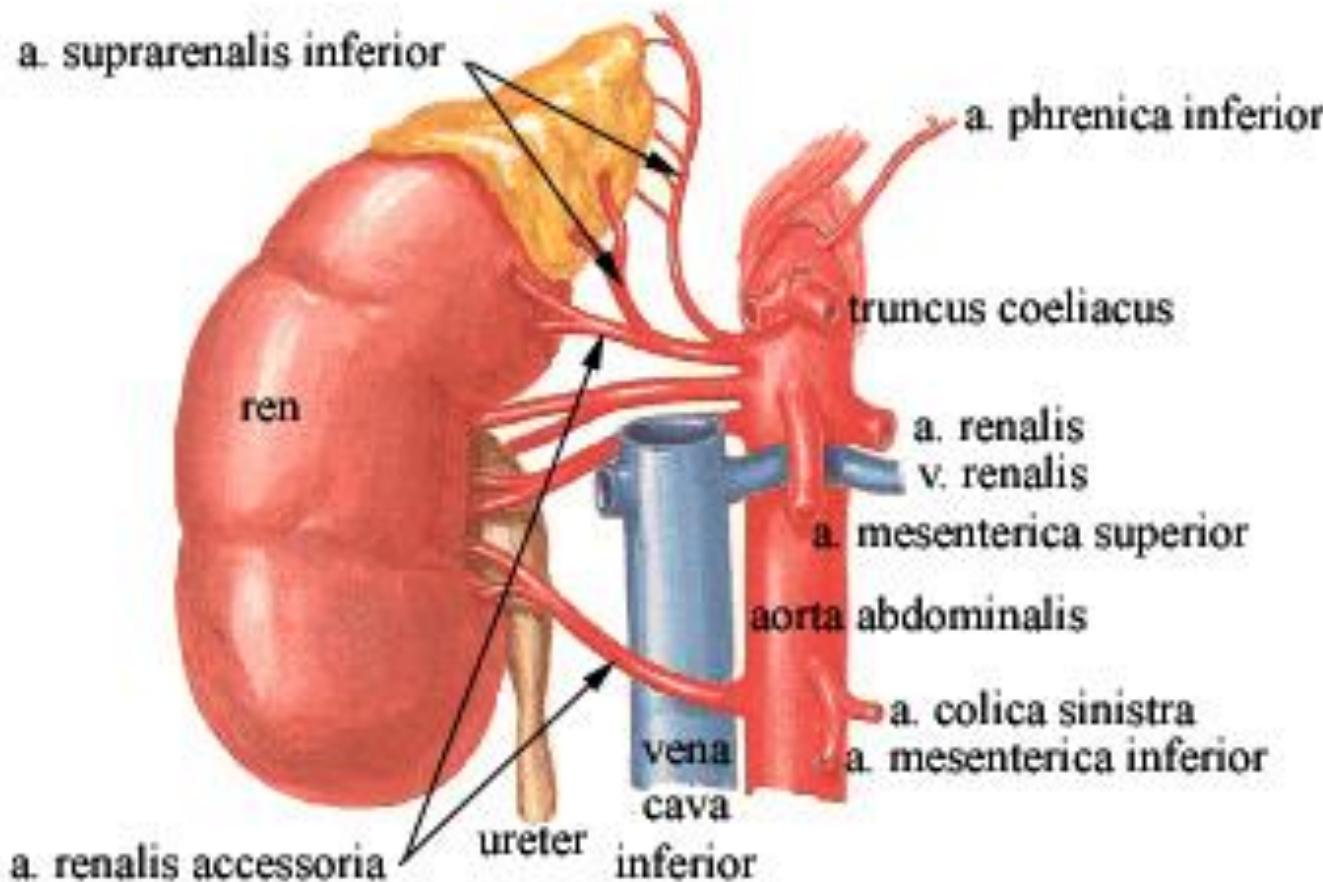
a. iliaca interna

a. iliaca externa

a. circumflexa
ilium profunda



ARTERIA RENALIS ACCESSORIA



- enters upper pole (less), hilum or inferior pole (more) of kidney
- incidence 30%

Aorta abdominalis

terminal branches: *paired*

- a. iliaca communis

terminal branches: *unpaired*

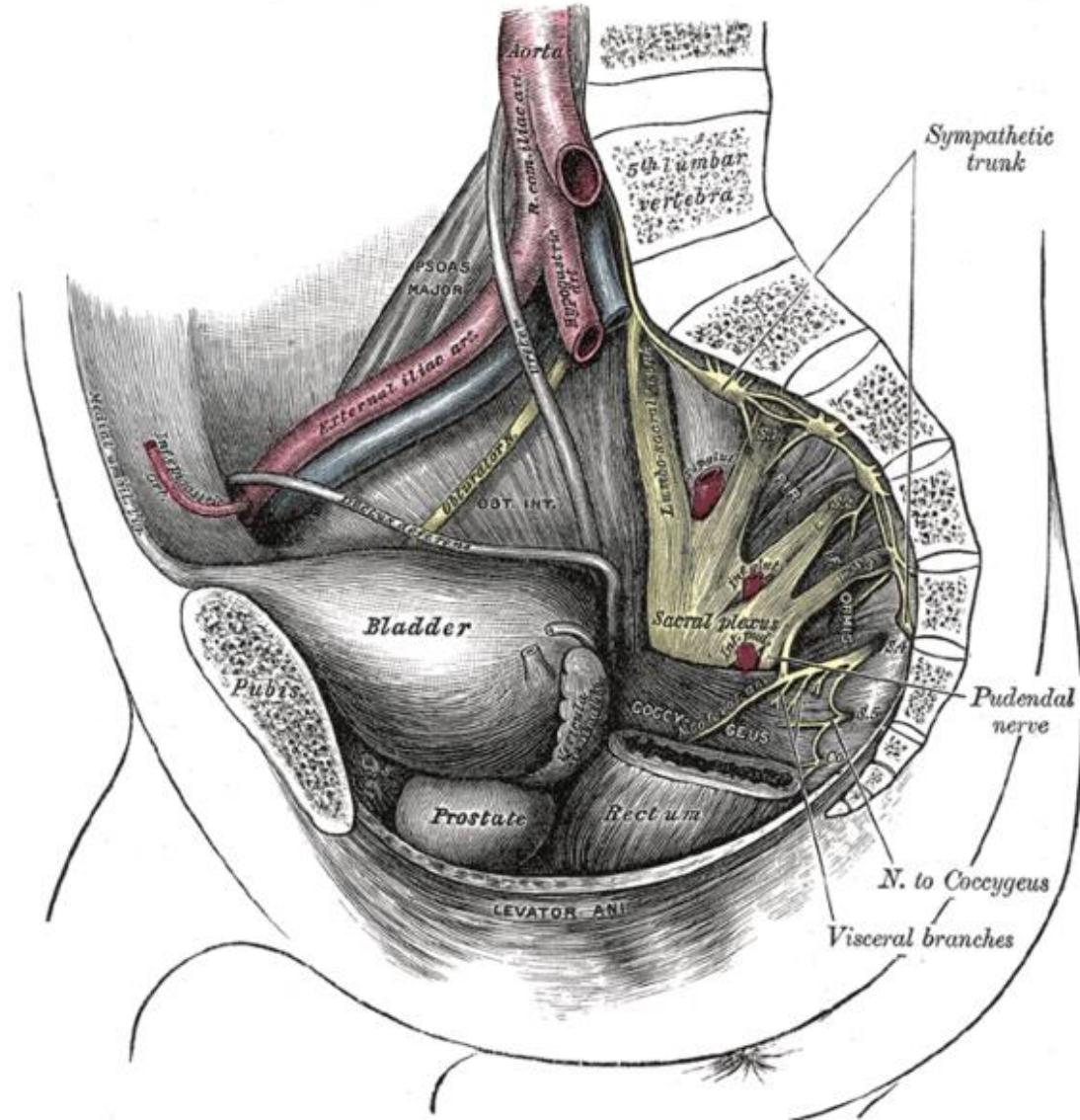
- a. sacralis mediana

visceral branches: *unpaired*

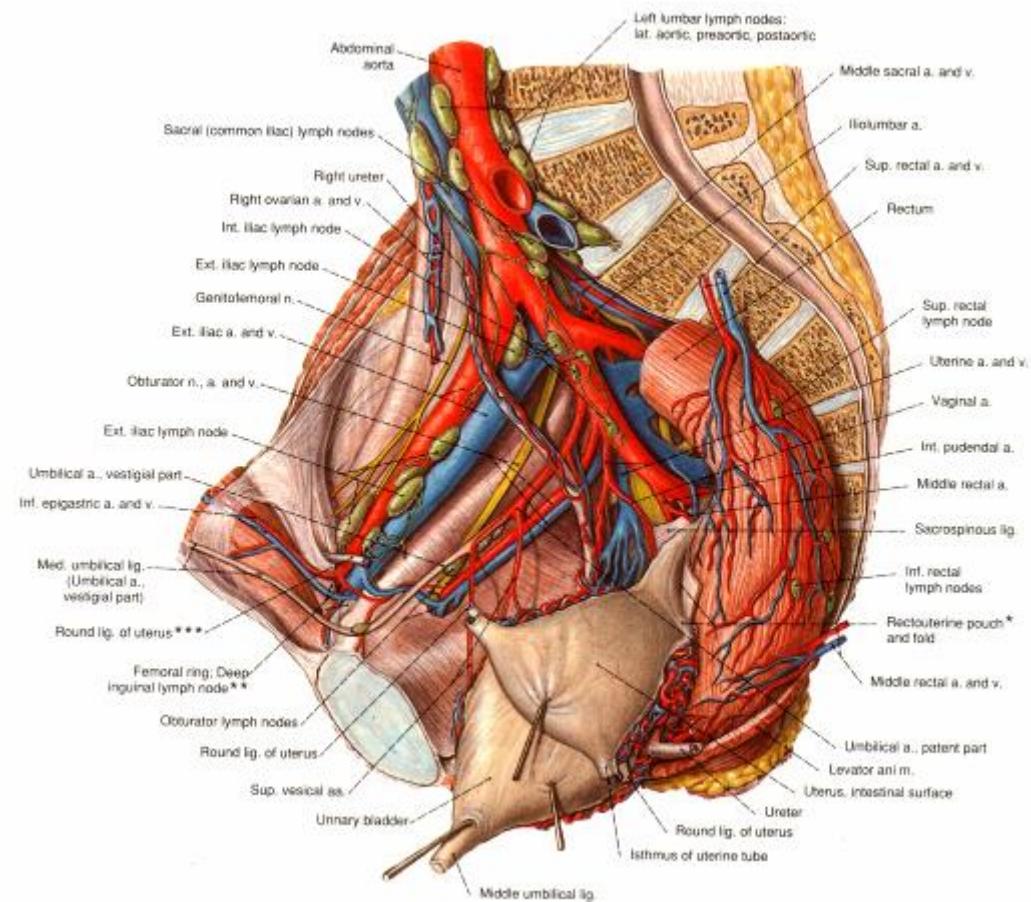
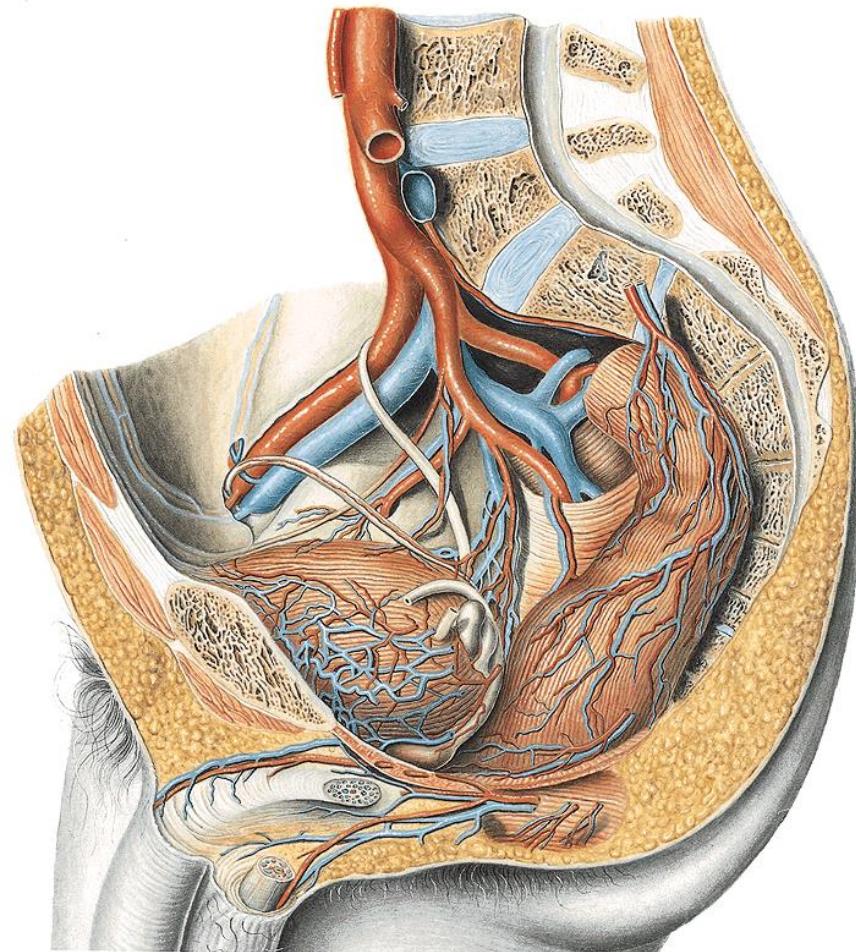
- truncus coeliacus
- a. mesenterica superior
- a. mesenterica inferior

Arteria iliaca communis

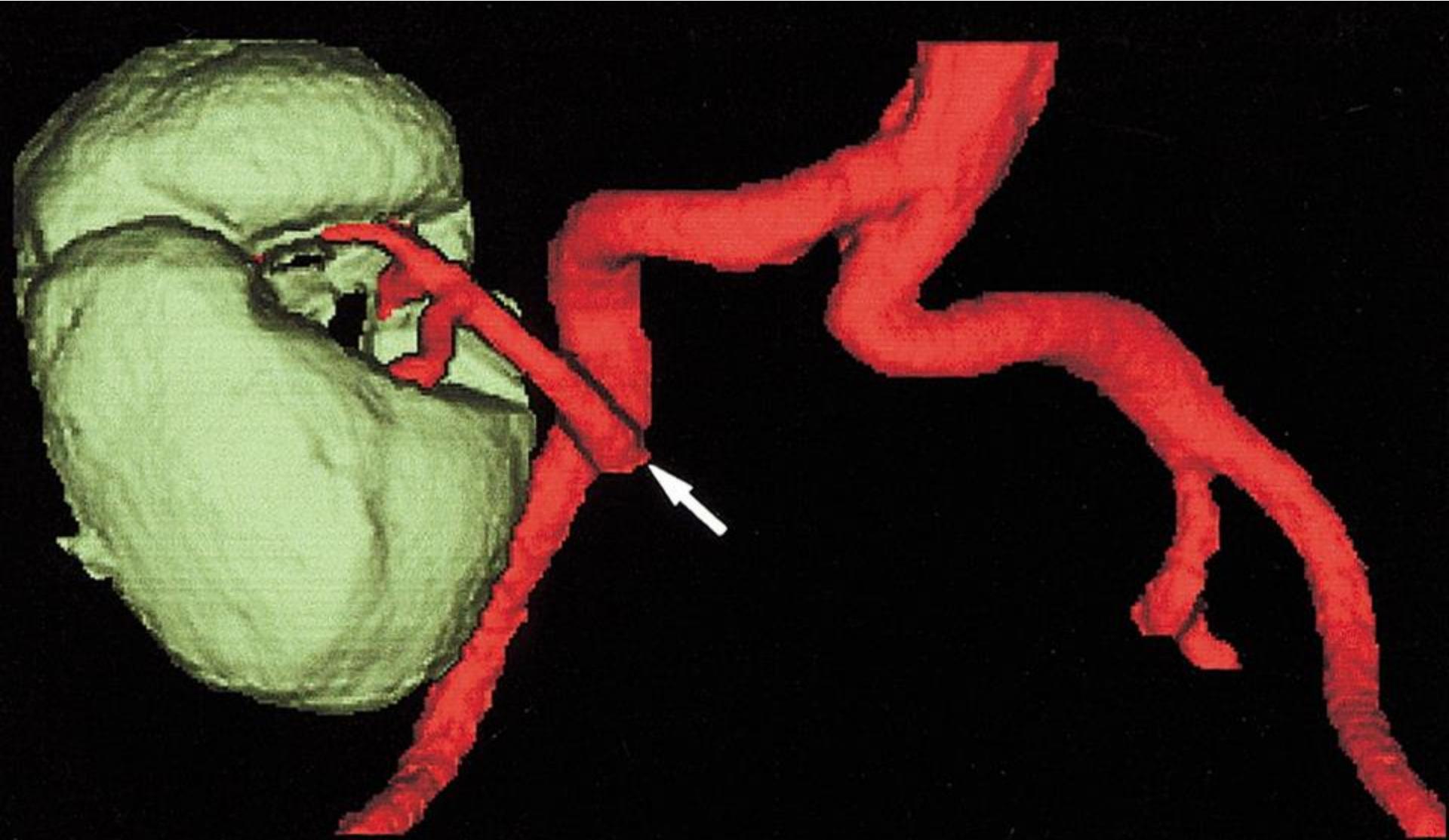
- 4 cm long
 - 1 cm wide
- origin: L4
- medial to m. psoas major
 - dorsal to ureter
- end: bifurcation ventral to articulatio sacroiliaca
- a. iliaca externa
 - a. iliaca interna



Arteriae iliaceae



Transplanted kidney to AIC



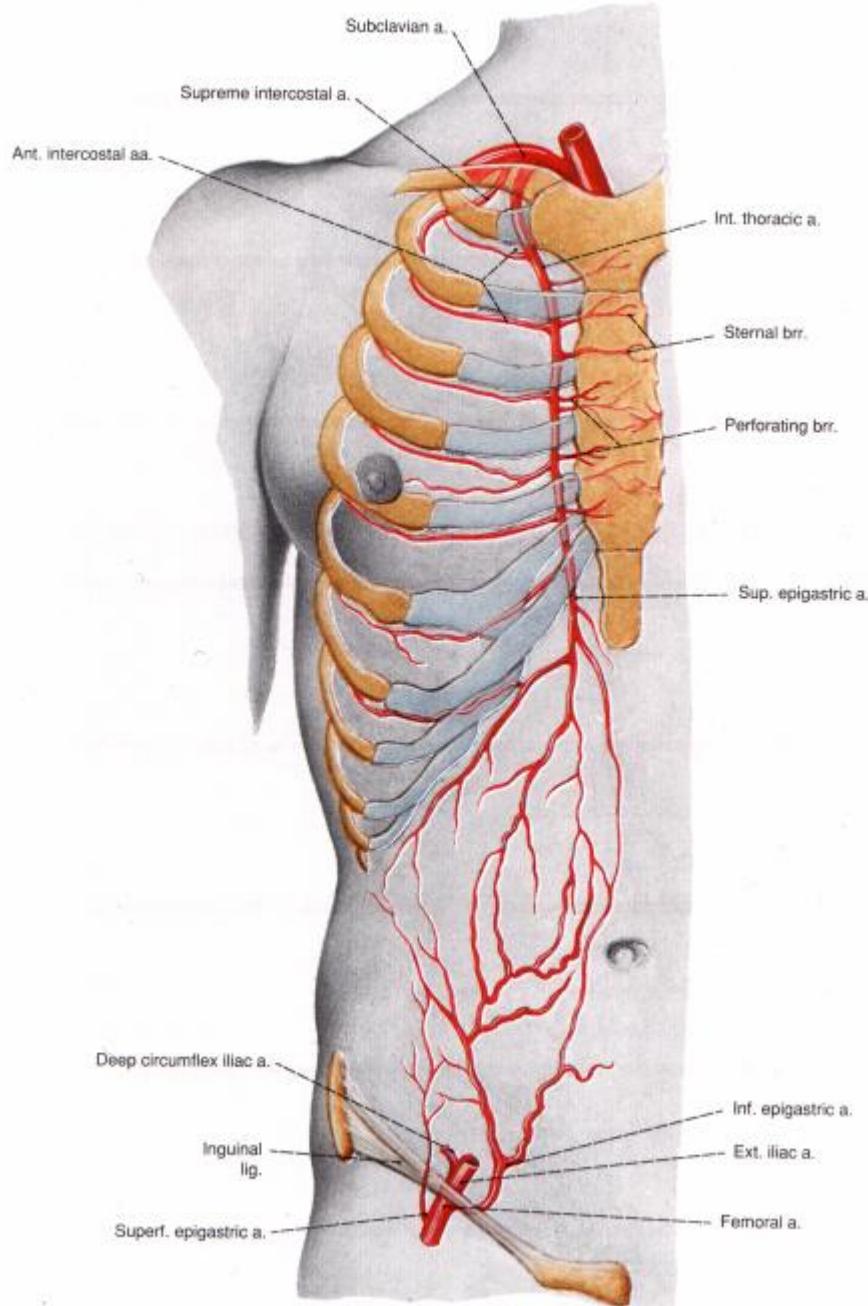
Arter

articl

1

dorsal

- •
•
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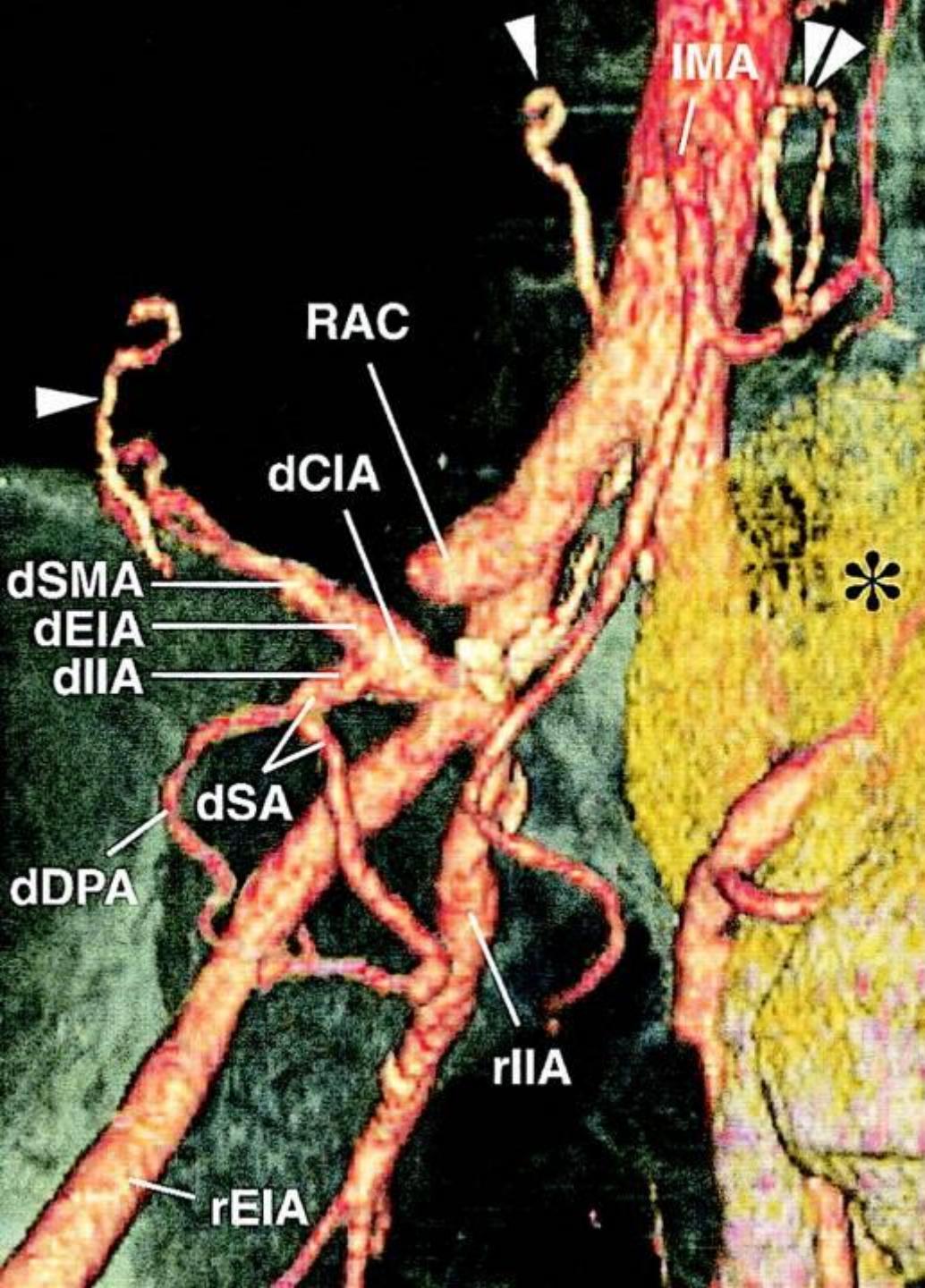
im (→



: *corona*



5



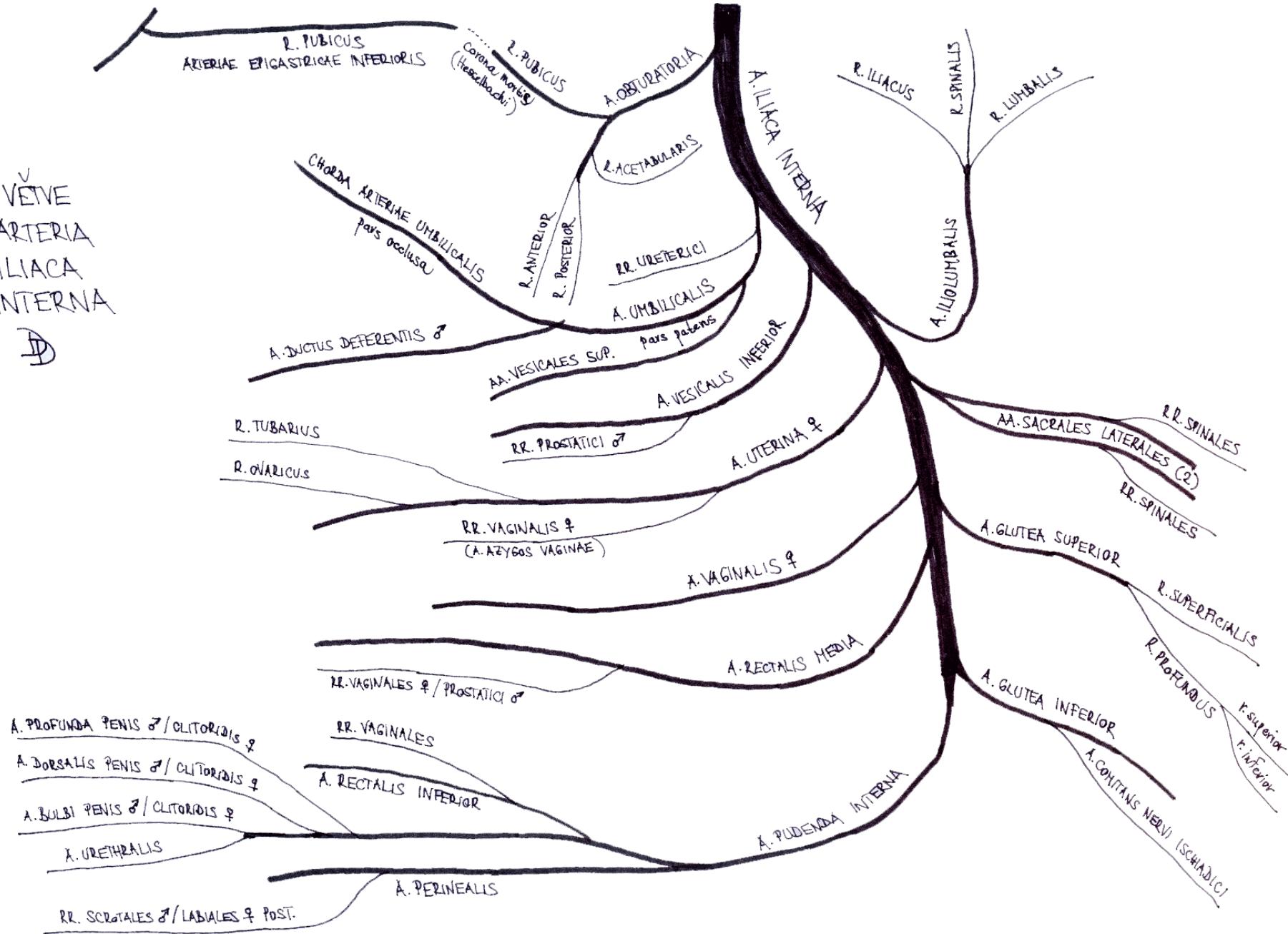
Two separate pancreas transplantations at different times

d = donor's, r = right, l = left

CIA = common iliac artery, CIVB = common iliac vein bifurcation, DPA = dorsal pancreatic artery, EIA external iliac artery, IIA = internal iliac artery, IMA = inferior mesenteric artery, SA = splenic artery, SMA = superior mesenteric artery, asterisk = renal graft.

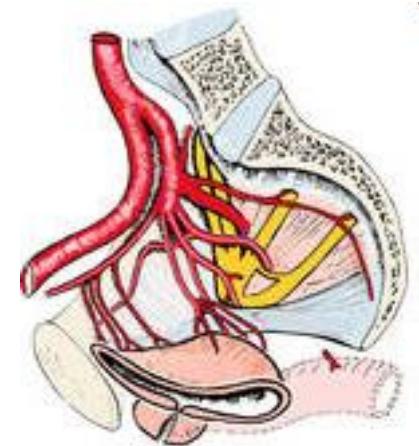
Three-dimensional volume-rendering image of contrast-enhanced MDCT during dominant arterial phase, obtained 5 days after sequential pancreas-after-kidney retransplantation after vascular failure and pancreatectomy of initial pancreatic graft, shows normal posttransplantation arterial anatomy, residual arterial conduit (RAC) after pancreatectomy of initial pancreatic graft, hyperdense staple line (*single arrowheads*) of donor's duodenum, and hyperdense circular staple line (*double arrowheads*) of duodenojejunostomy (intestinal wall structures and grafted pancreatic parenchyma are not seen because of applied electronic thresholds).

V
VENE
ARTERIA
ILIACA
INTERNA



Arteria iliaca interna

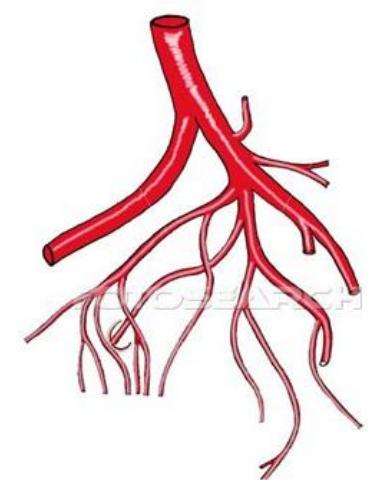
- lesser pelvis + buttocks
- obsolete term „a. hypogastrica“
- short (3-4 cm)
- anterior division
 - 3 branches
- posterior division
 - all organs of lesser pelvis
 - *ligation in postpartal haemorrhage*



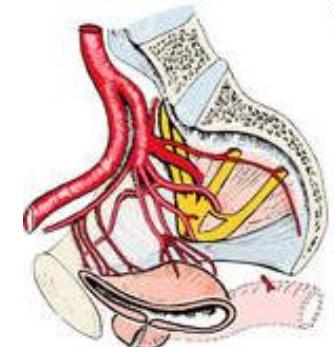
Arteria iliaca interna - branches

parietal branches: 5

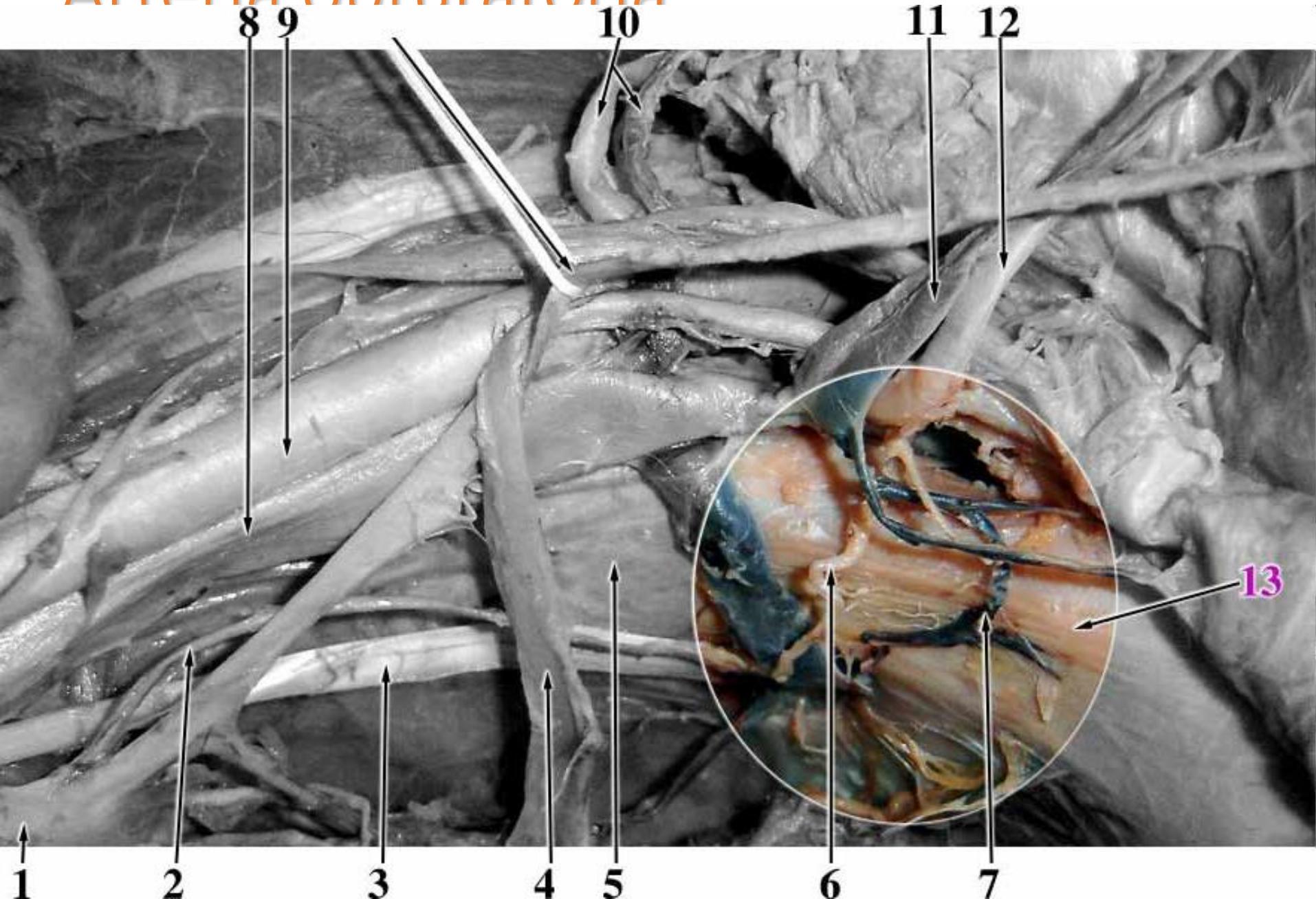
- a. iliolumbalis
 - r. iliacus, lumbalis, spinalis
- a. obturatoria
 - *canalis obturatorius*
- aa. sacrales laterales sup. + inf. (→2)
 - *foramina sacralia anteriors*
 - rr. spinales
- a. glutea superior
 - *foramen suprapiriforme*
 - r. superficialis + profundus
- a. glutea inferior
 - *foramen infrapiriforme*
 - a. comitans nervi ischiadicci



gd304006 www.fotosearch.com



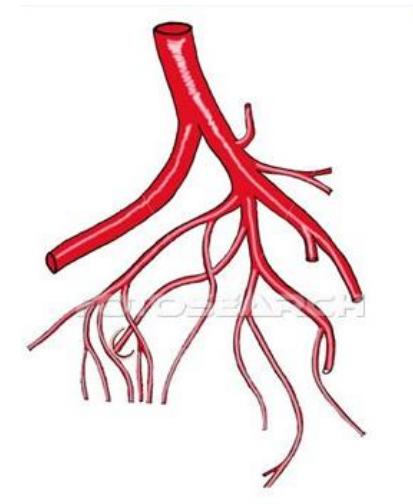
Arteria obturatoria



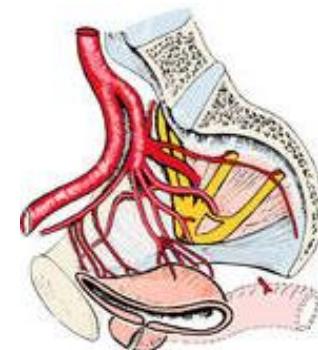
Arteria iliaca interna - branches

visceral branches: 6

- a. umbilicalis
 - aa. vesicales superiores
 - a. ductus deferentis ♂
- a. vesicalis inferior
 - rr. prostatici ♂
- a. uterina ♀
 - r. ovaricus
 - r. tubarius
 - ventral to ureter
- a. rectalis media
 - rr. prostatici ♂ / rr. vaginales ♀
- a. vaginalis ♀
- a. pudenda interna



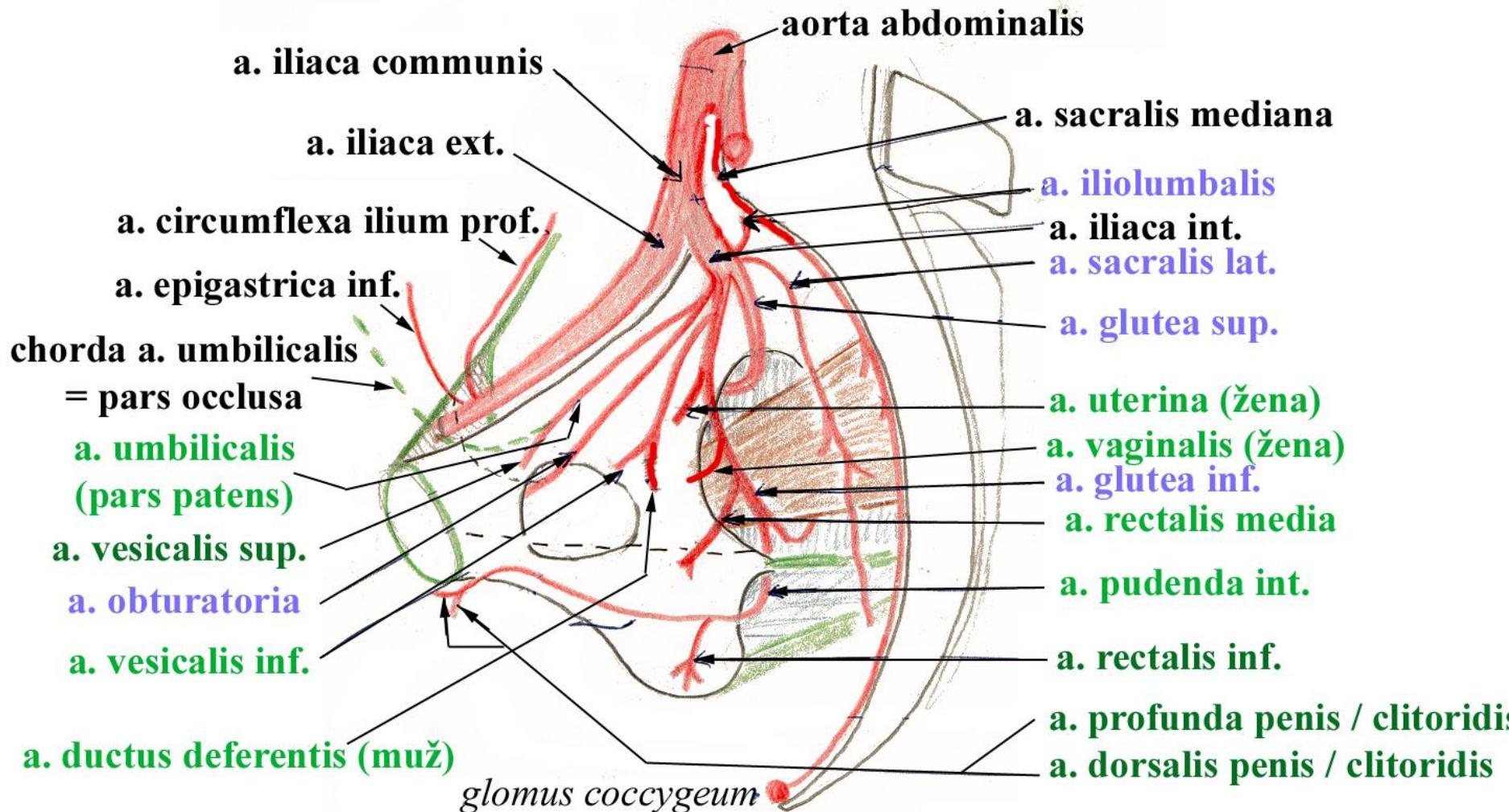
gd304006 www.fotosearch.com



parietální větve

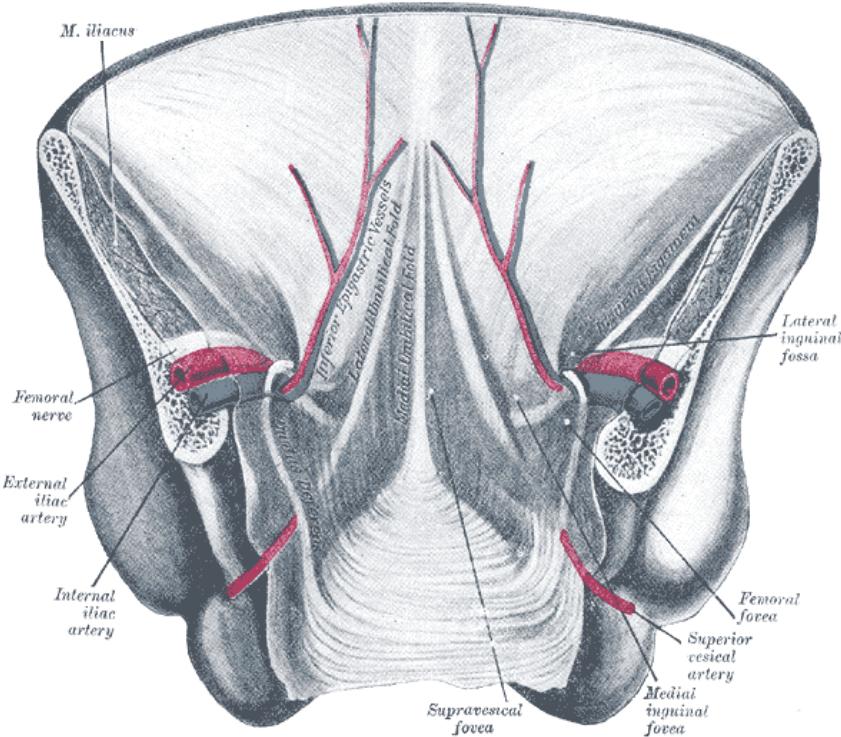
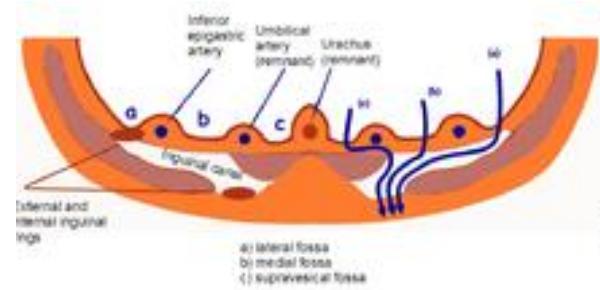
TEPNY PÁNVE

viscerální větve



Arteria umbilicalis

- pars patens
 - aa. vesicales superiores
 - a. ductus deferentis ♂
- pars occlusa
 - fetal vessel with unoxygenated blood leading to placenta
 - lig. umbilicale mediale (chorda a. umbilicalis)
 - fascia vesicoumbilicalis



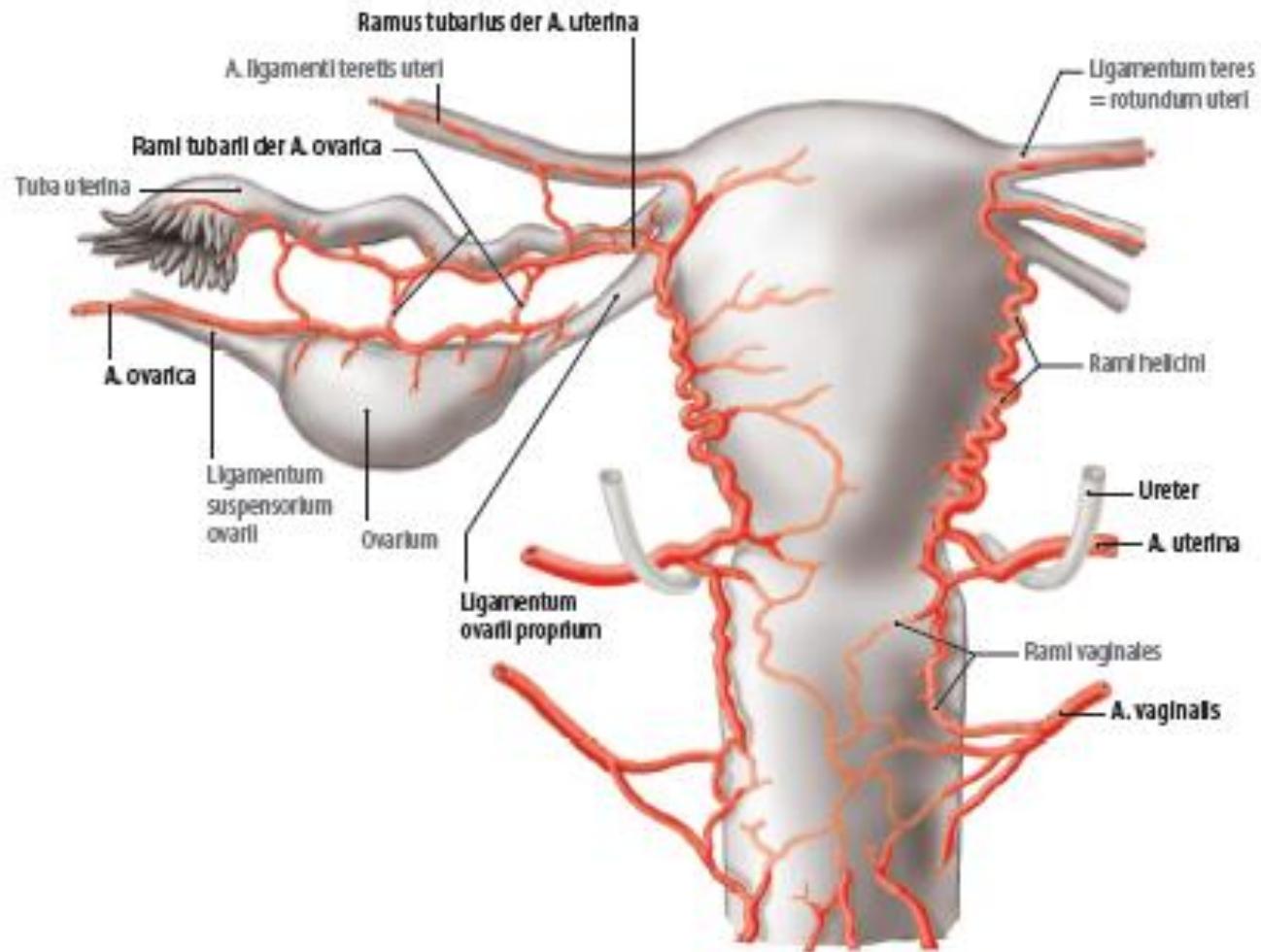
Arteries of female internal genital organs

Ao. abdominalis:

- a. ovarica

A. iliaca interna:

- a. uterina
- a. vaginalis
- (a. pudenda int.)

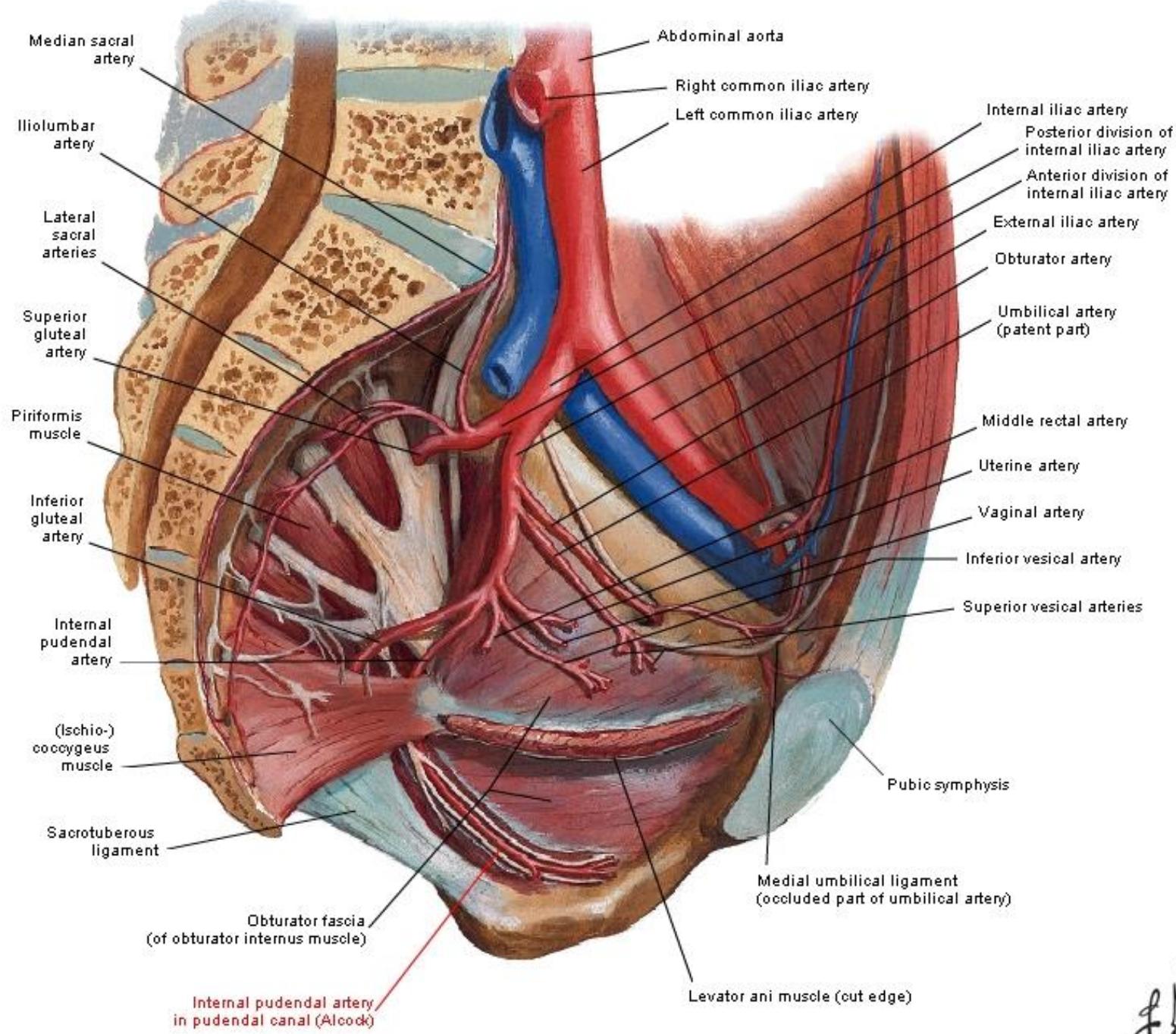


Arteria pudenda interna

topography: foramen infrapiriforme → foramen ischiadicum minus → fossa ischioanalis (canalis pudendalis *Alcocki*)

branches:

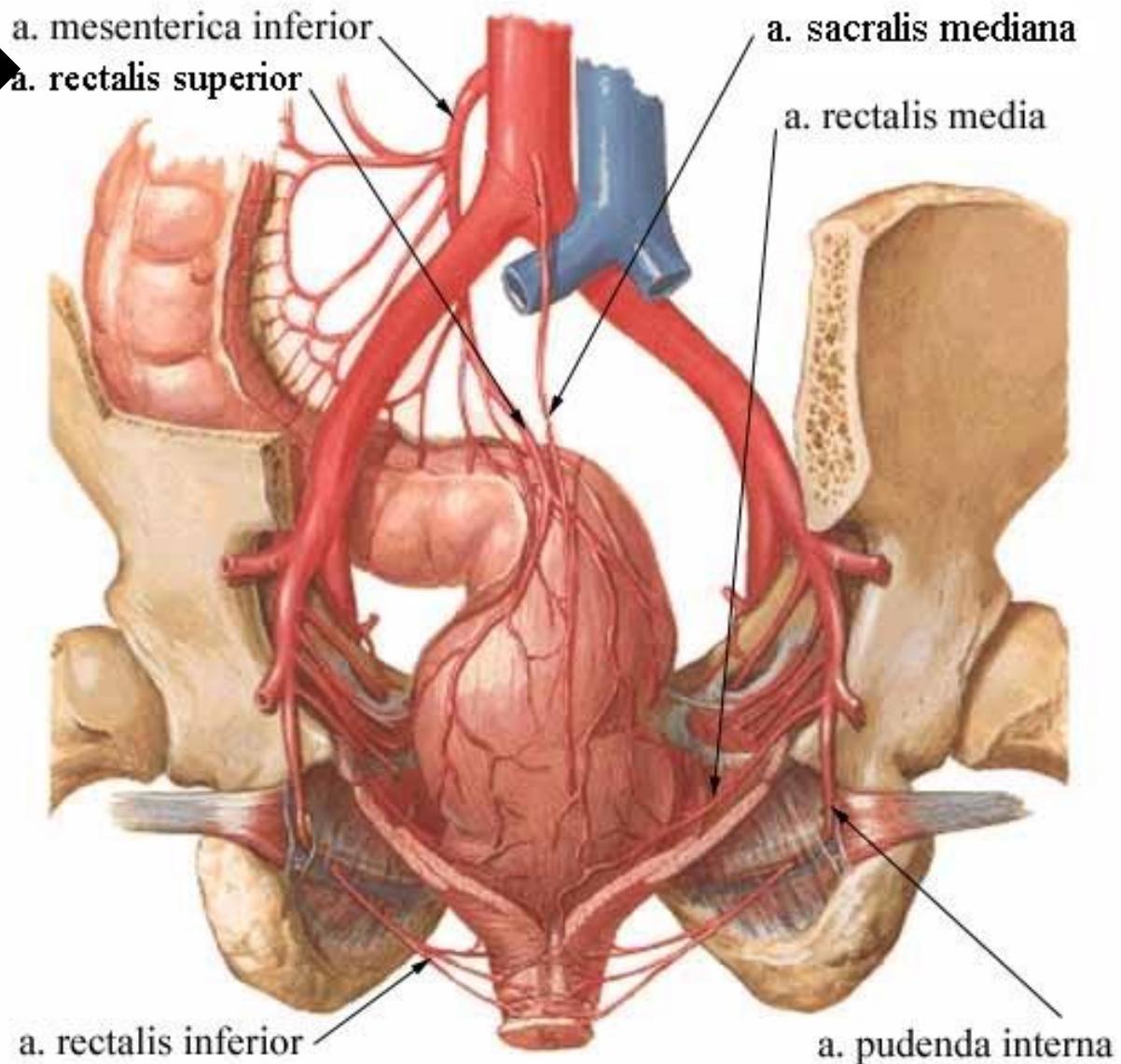
- a. rectalis inferior
 - rr. vaginalis ♀
- a. perinealis
- rr. scrotales ♂ / labiales ♀ anteriores
- a. urethralis
- a. bulbi penis ♂ / vestibuli ♀
- a. dorsalis penis ♂ / clitoridis ♀
- a. profunda penis ♂ / vestibuli ♀



f. Net

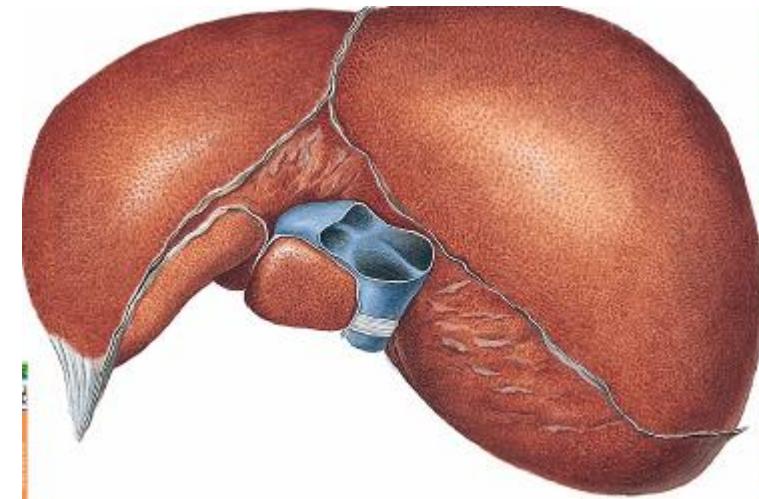
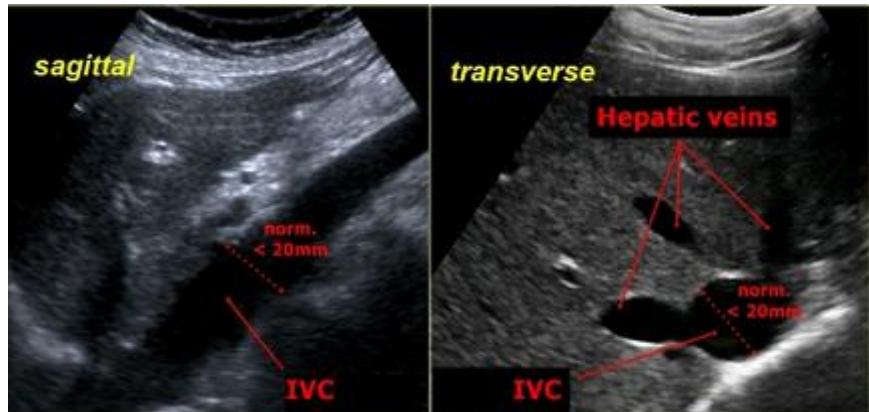
Rectum

- a. mesenterica inf. →
a. rectalis sup.
- a. iliaca int. → a.
rectalis media
 - present in 50%,
insignificant for
rectum
- a. iliaca int. → a.
pudenda int. → a.
rectalis inf

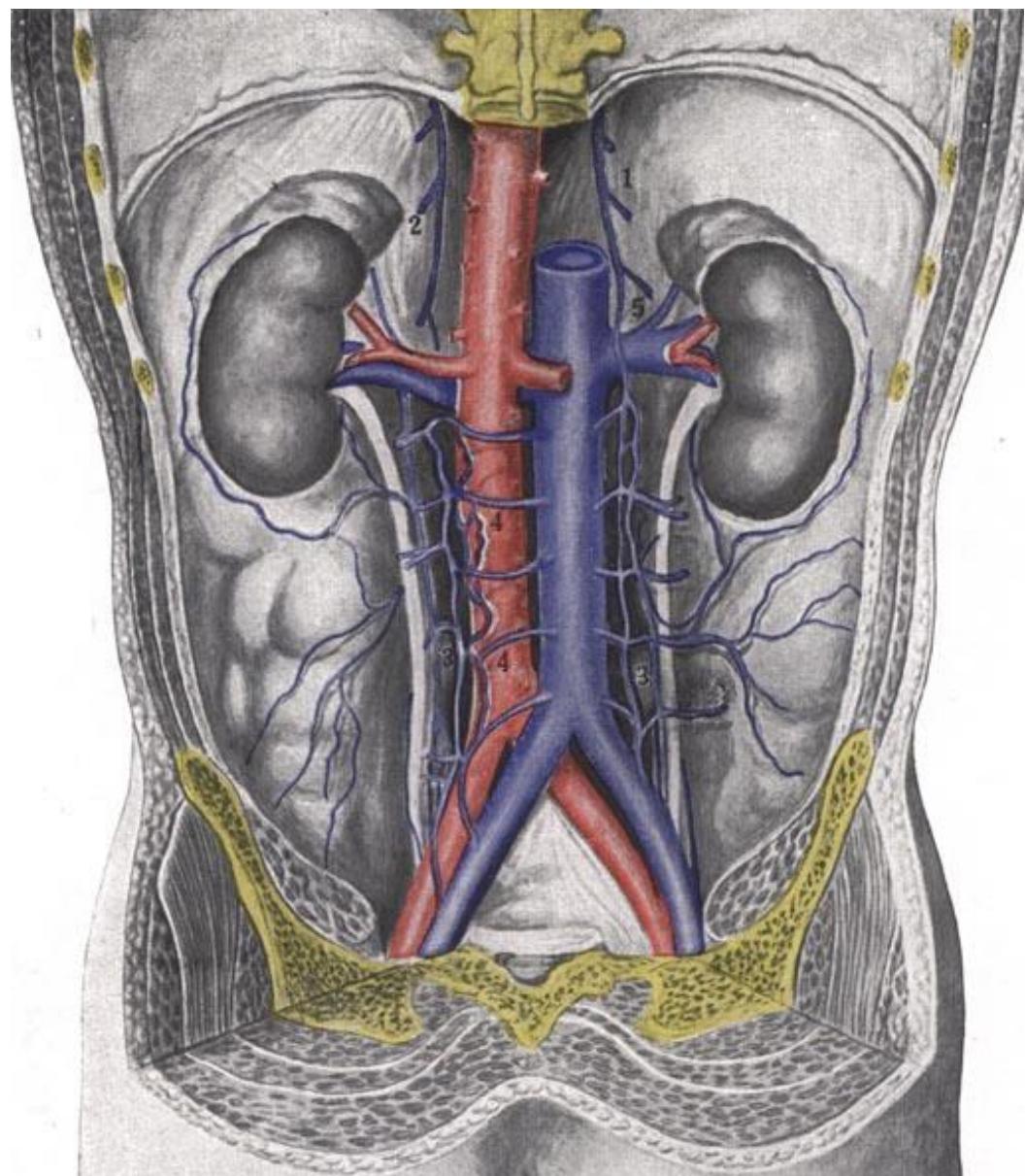
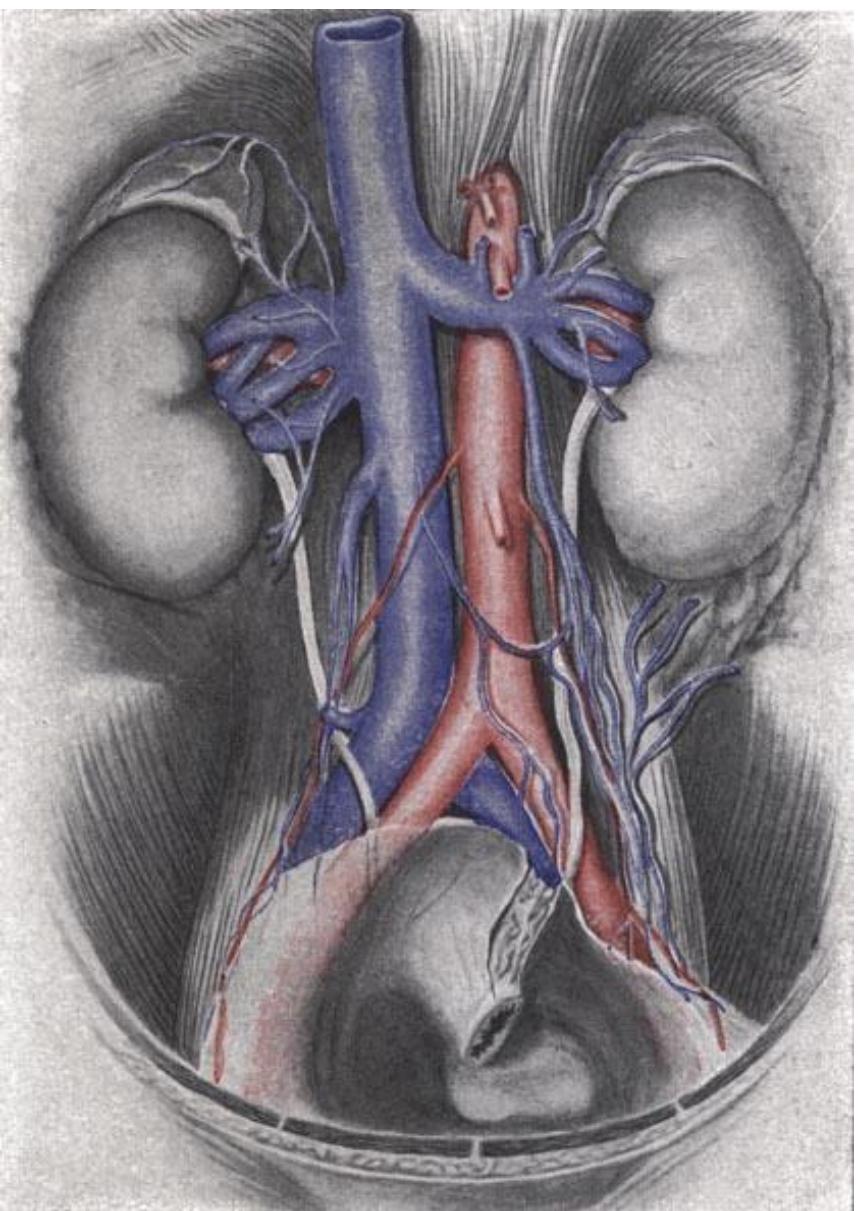


Vena cava inferior

- origin: confluence of vv. iliaceae communes (L4)
- right to aorta abdominalis, in retroperitoneum
- no valves, rarely doubled
- sulcus venae cavae hepatis
- foramen venae cavae diaphragmatis
- caliber: 2 cm at liver, 3.5 cm at heart
- end: atrium dextrum (T8)



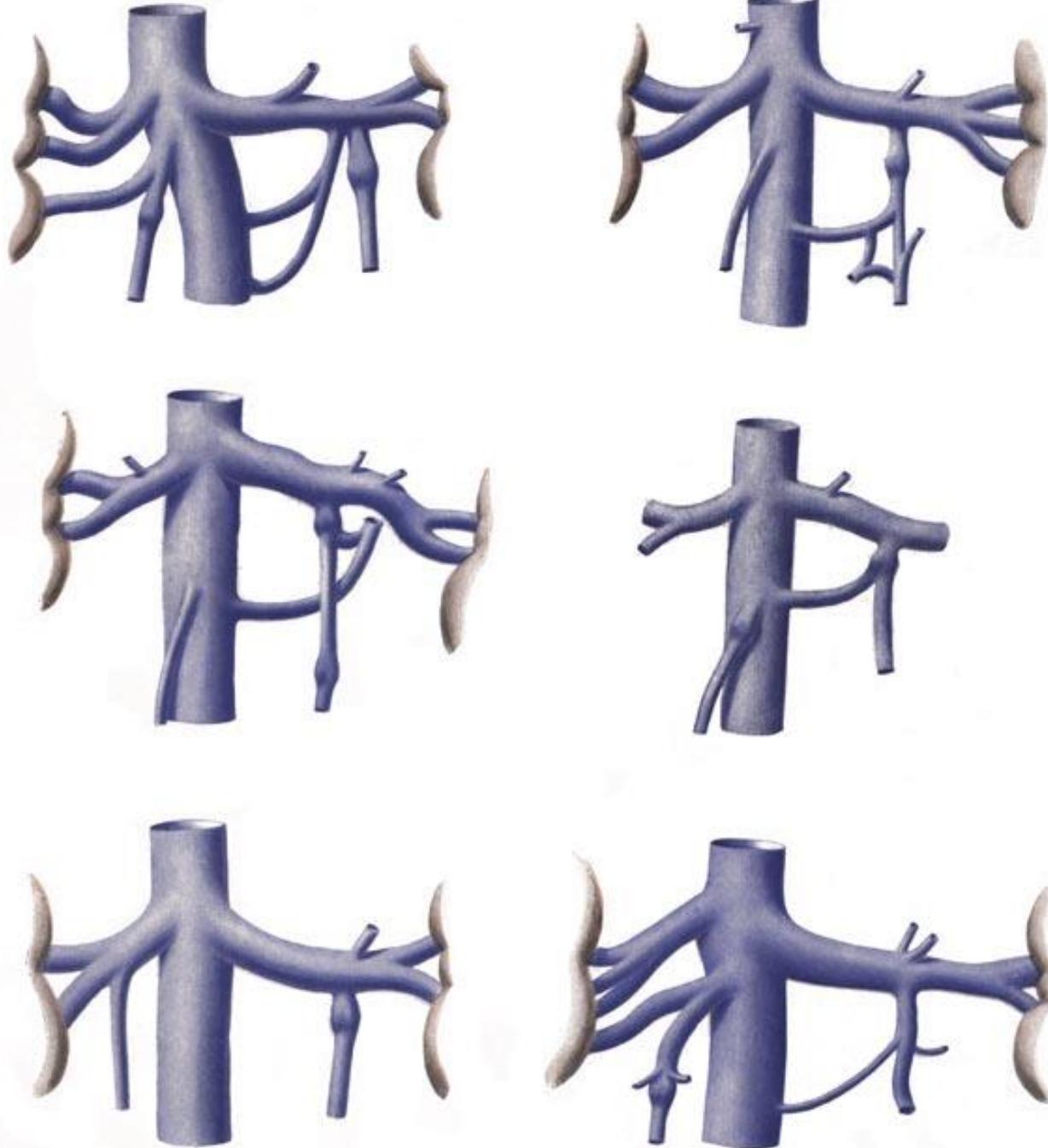
Vena cava inferior



Vena cava inferior - tributaries

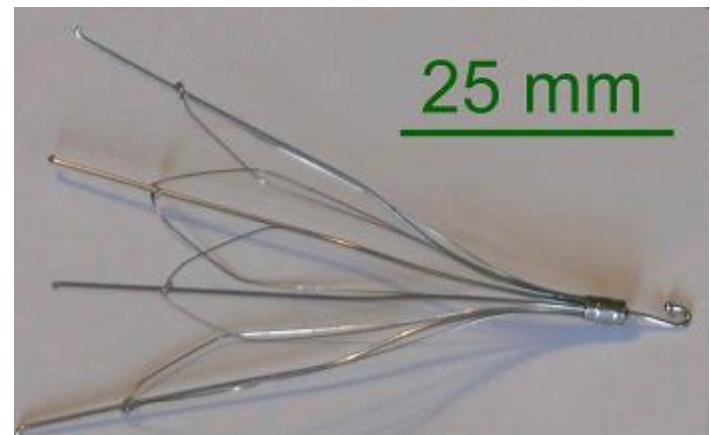
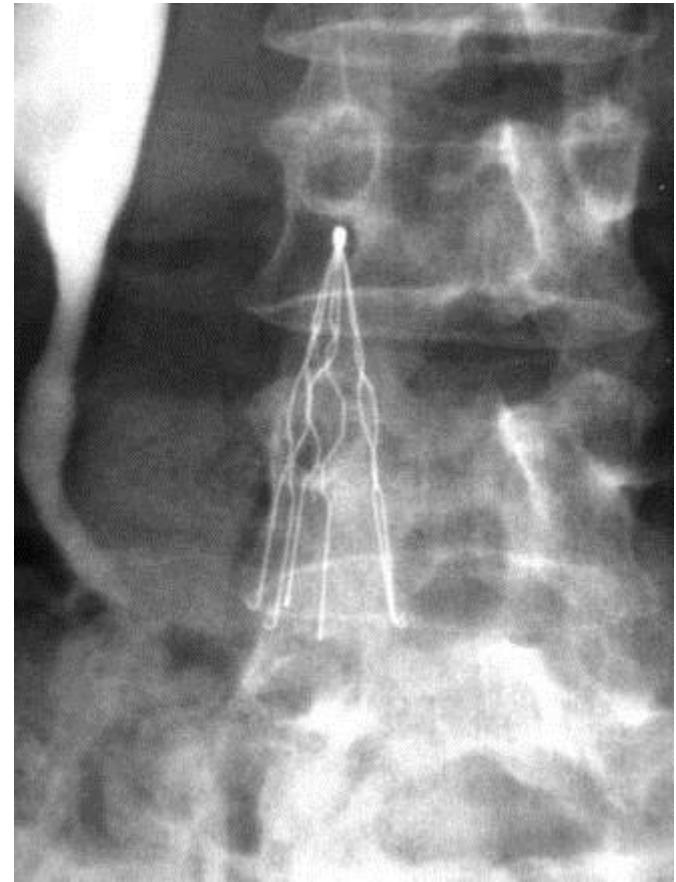
- variation of VCI course, arrangement and tributaries
- parietal:
 - vv. iliaceae communes, vv. lumbales I-IV (*interconnected with v. lumbalis ascendens*), vv. phrenicae inf., v. sacralis mediana
- visceral:
 - vv. renales
 - v. testicularis ♂/ ovarica dx. ♀ (begins as plexus pampiniformis)
 - v. suprarenalis dx.
 - vv. hepaticae dextra, intermedia, sinistra (ductus venosus *Aranzii*)

Variability of formation of VCI visceral tributaries

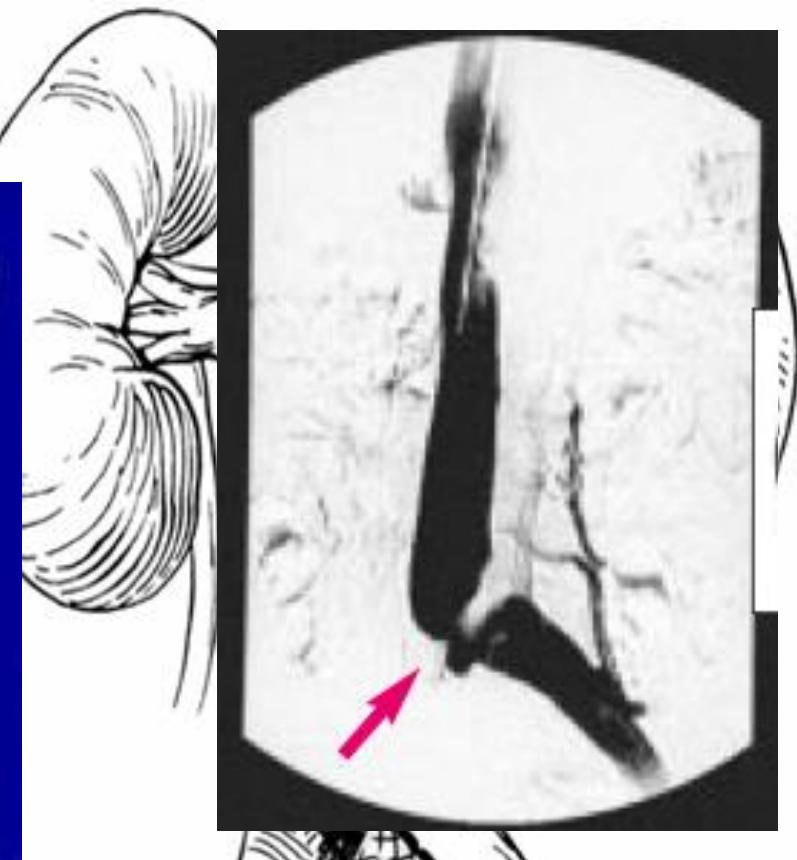
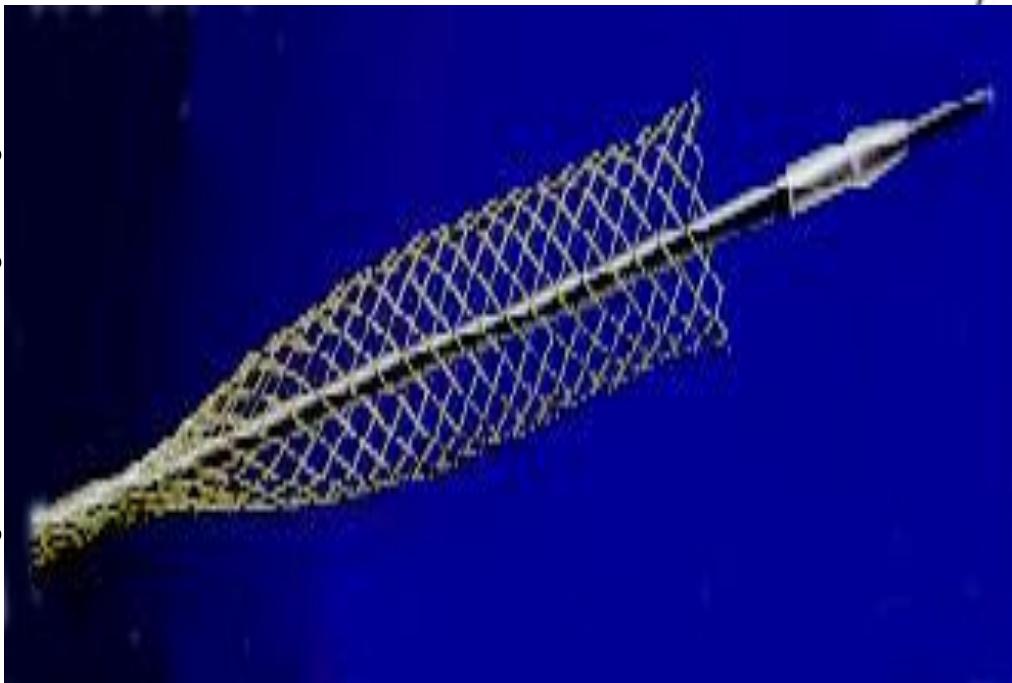


VCI – clinical relevance

- compression
 - aortal aneurysm
 - pregnant uterus
 - abdominal tumours
- thrombosis
- prevention of fatal pulmonary embolism – Greenfield's filter
 - in venous thromboembolic disease + contraindication of anticoagulation treatment

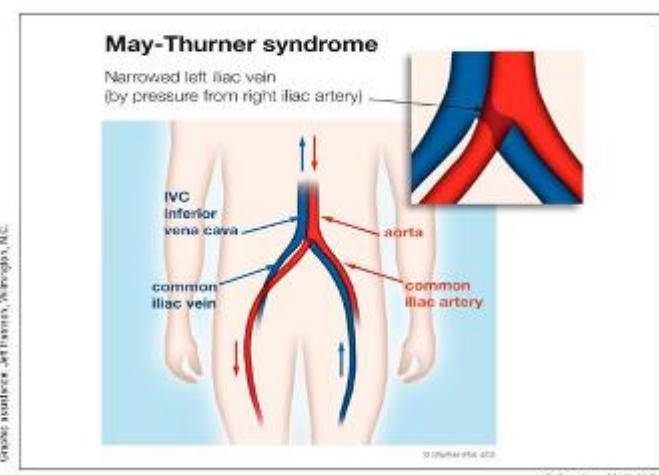


Vena iliaca communis



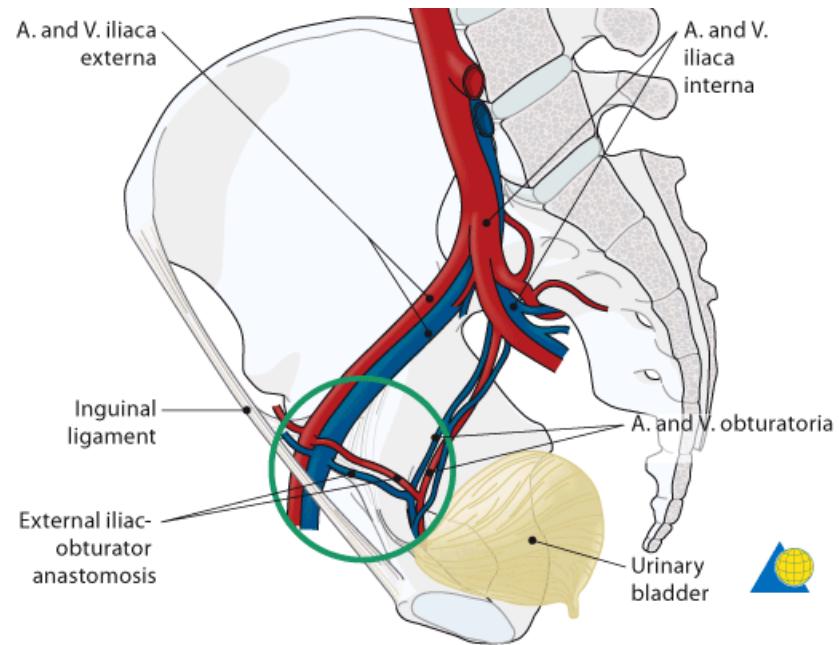
(AIcax.)

- thrombosis follows
- treatment: stent



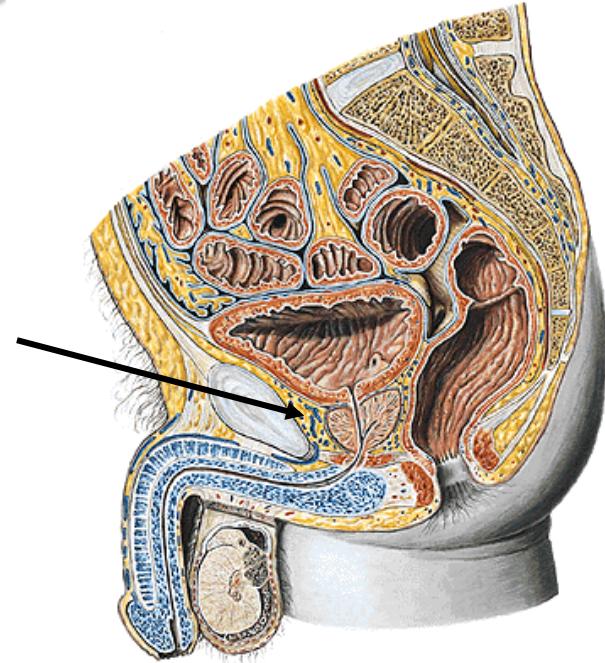
Vena iliaca externa

- branches correspond to arterial
- venous corona mortis present in 75%
- valves present in 20%
 - usually rudimentary



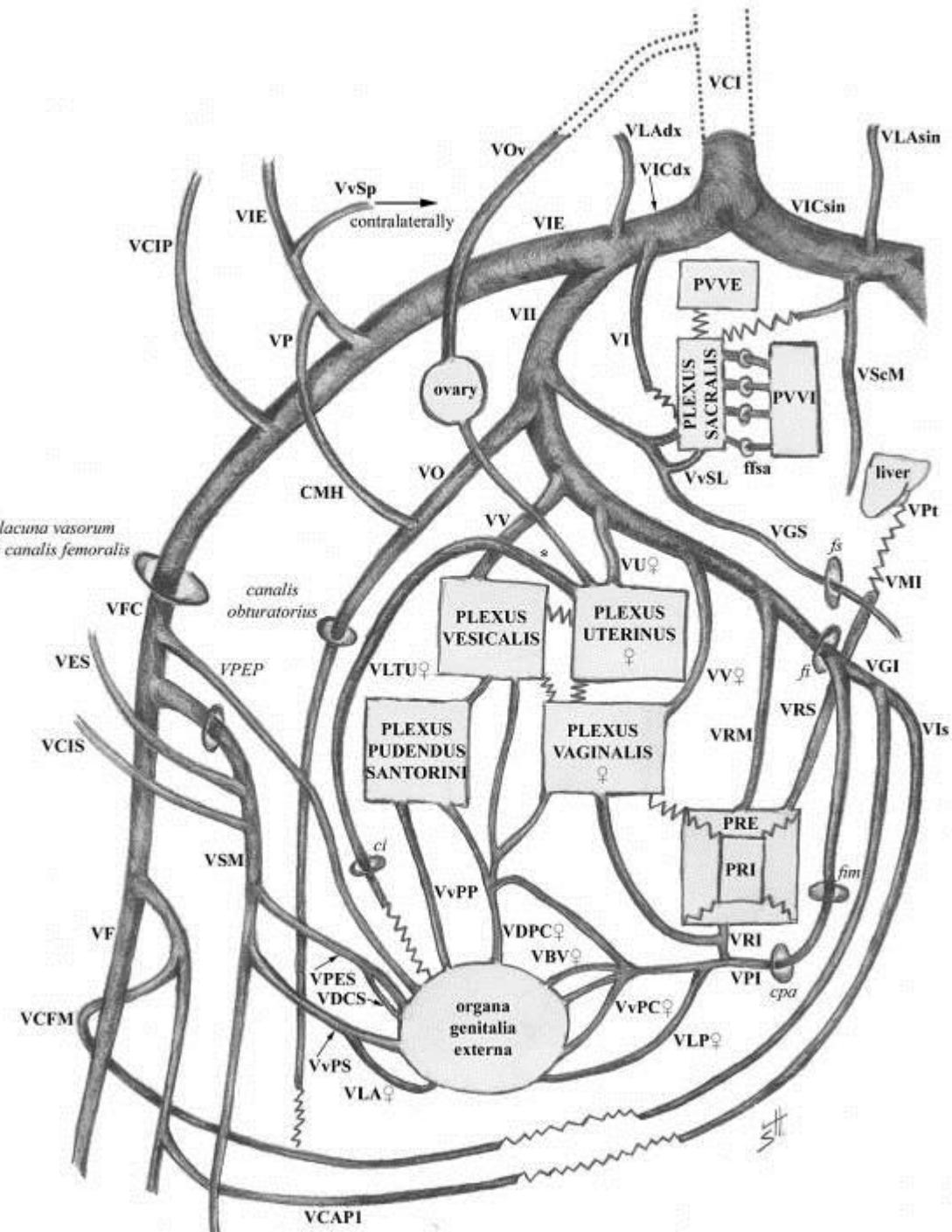
Vena iliaca interna – pelvic veins

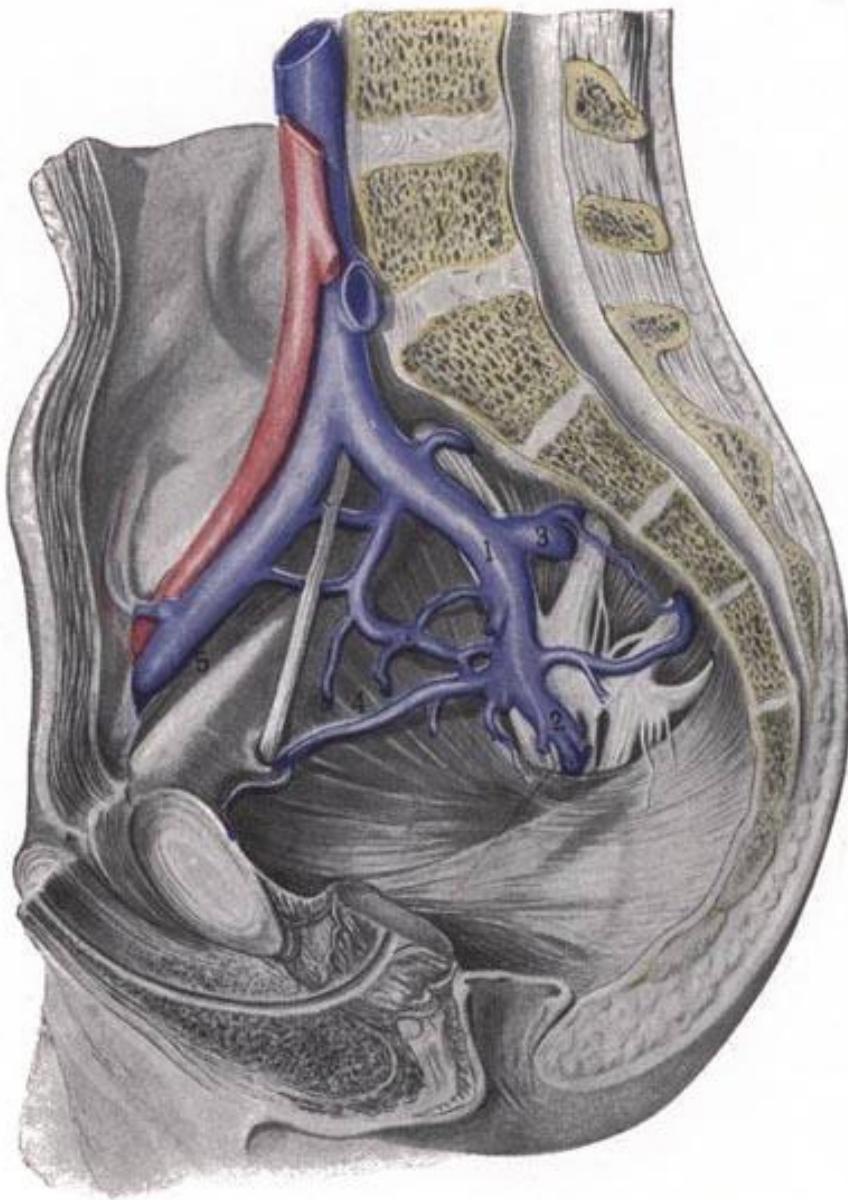
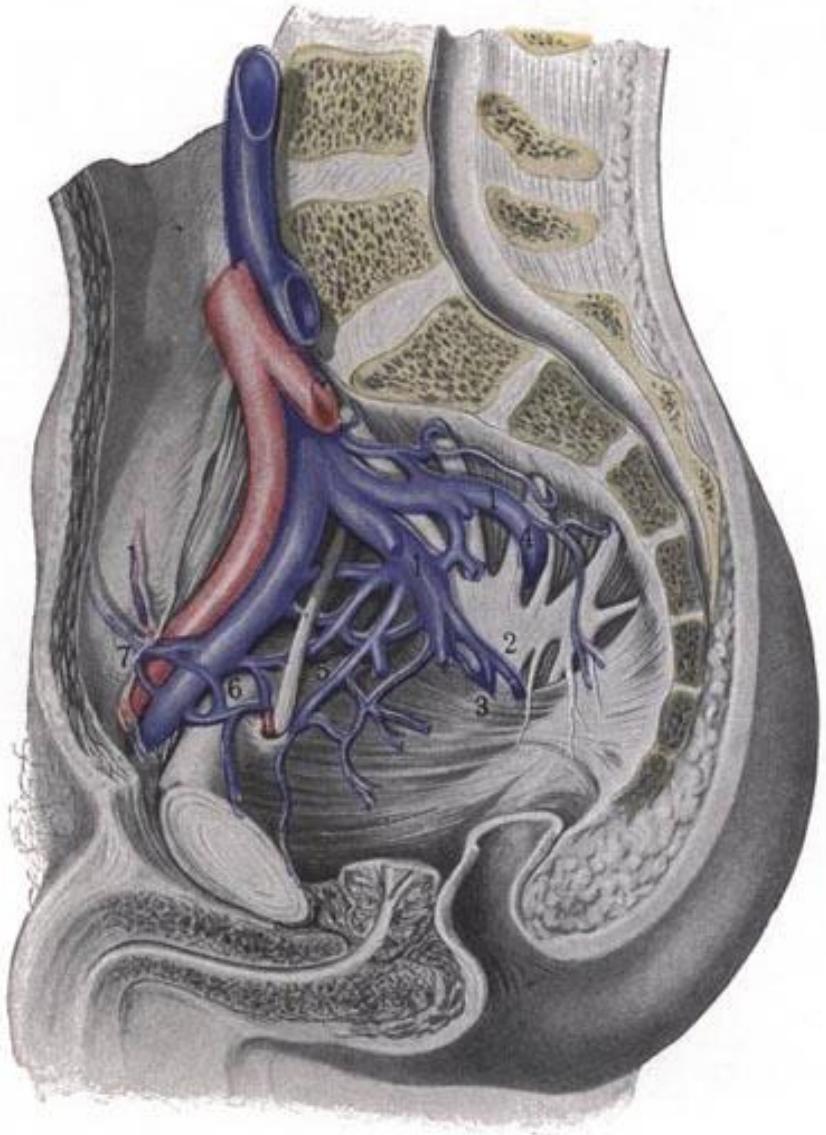
- *parietal*: correspond to arteries
- *visceral*: plexuses
 - plexus venosus pudendus (*Santorini*)
 - within spatum retropubicum (*Retzii*)
 - p.v. vesicalis + prostaticus
 - p.v. uterinus + vaginalis (uterovaginalis)
 - p.v. rectalis
 - p.v. rectalis externus (within tunica adventitia)
 - p.v. rectalis internus = p. haemorrhoidalis (within tunica submucosa)
 - p.v. sacralis (interconnected with vv. sacrales lat. + mediana)

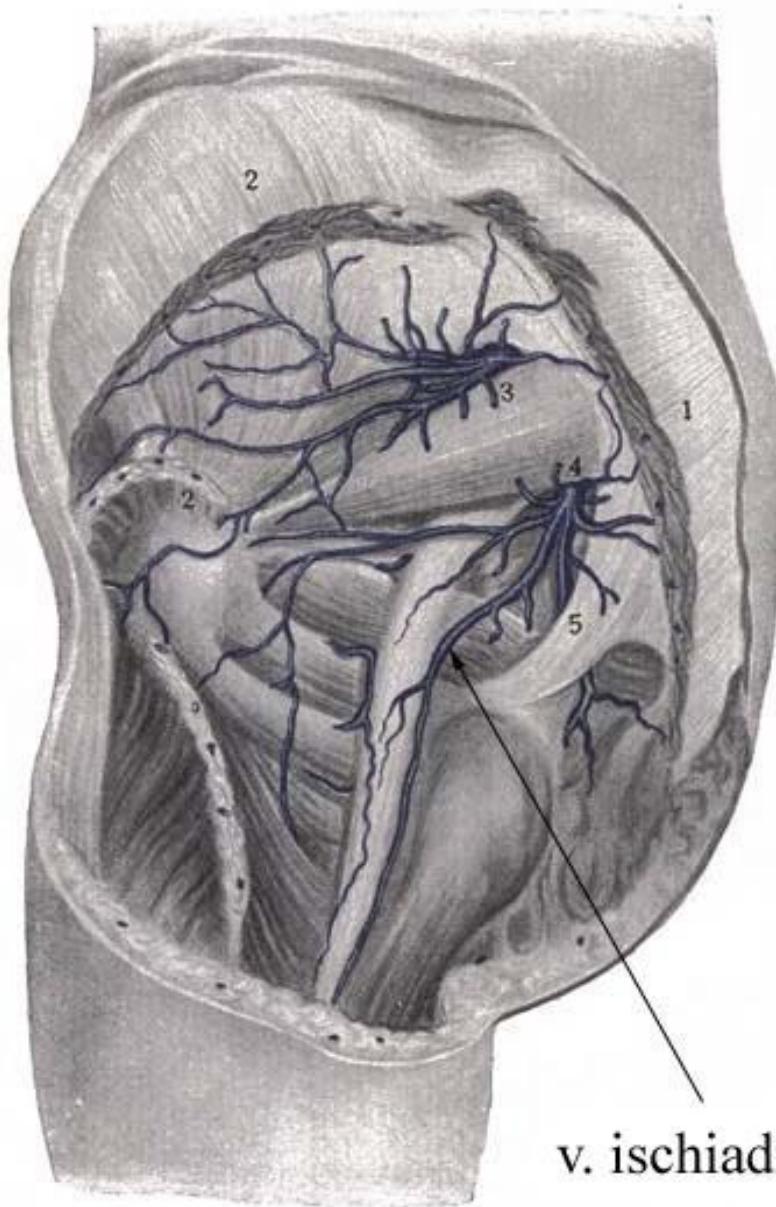
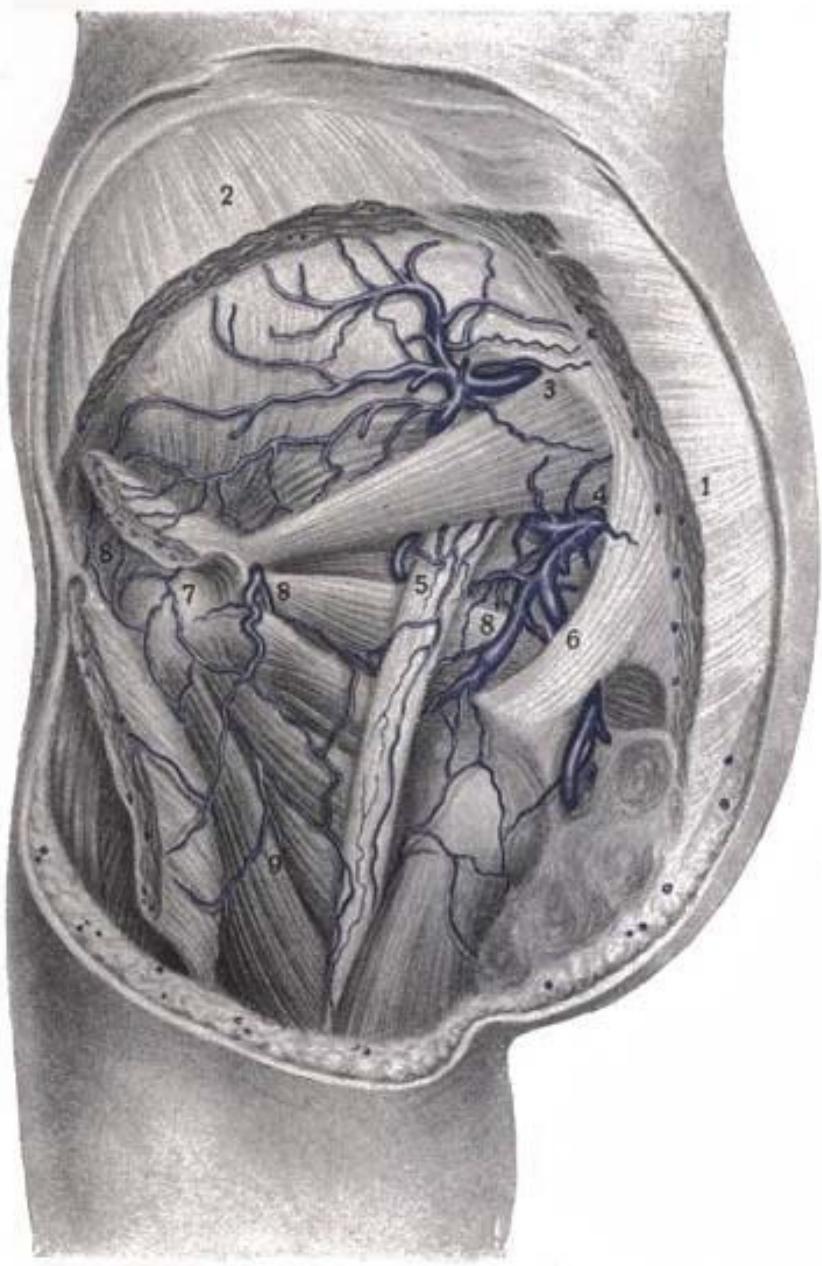


Veins of pelvis

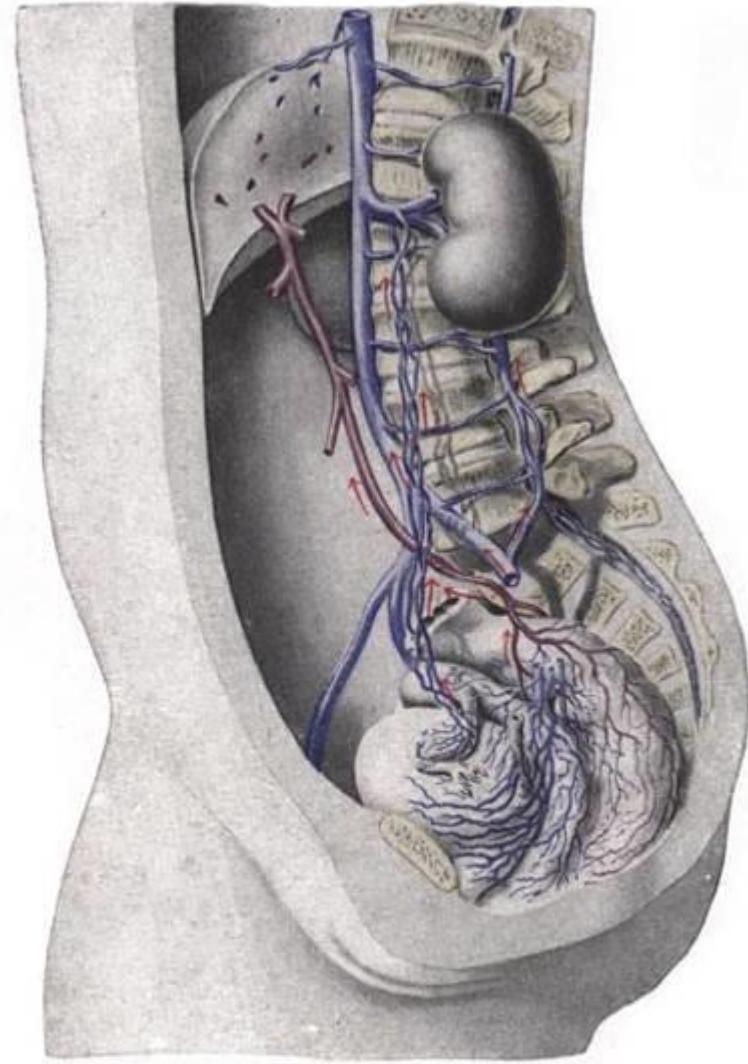
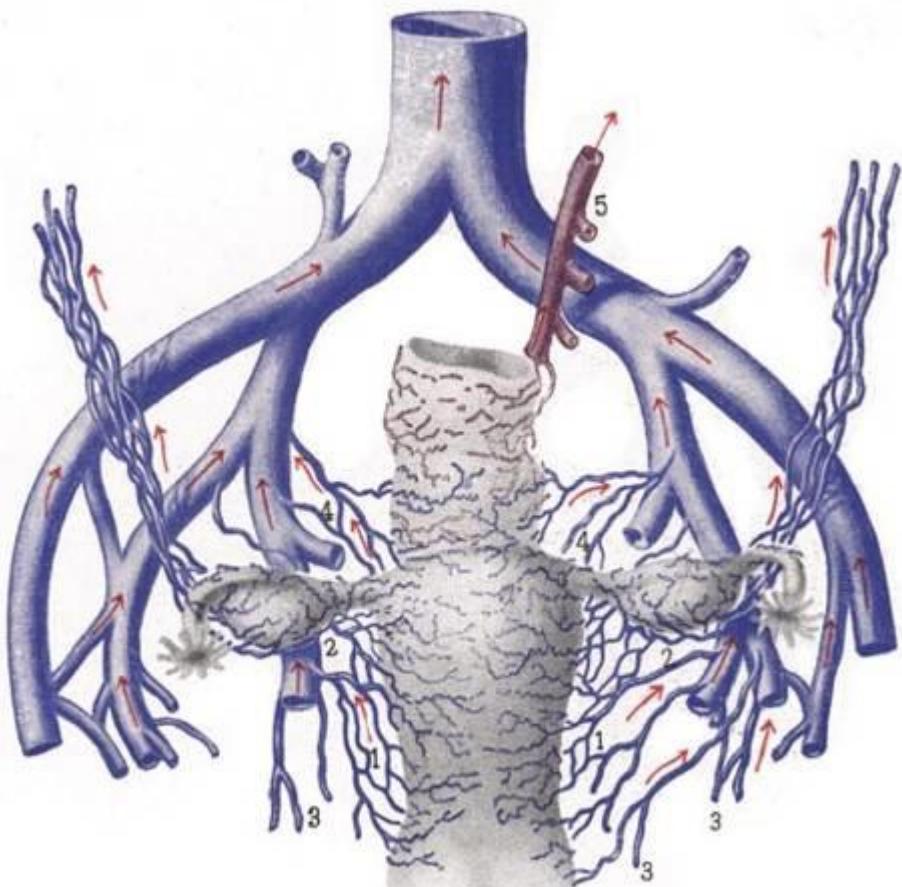
- v. lig. teretis uteri ♀
 - vv. lig. lati uteri ♀
 - vv. suprapublicae
 - v. ischiadica







Direction of venous outflow from pelvis

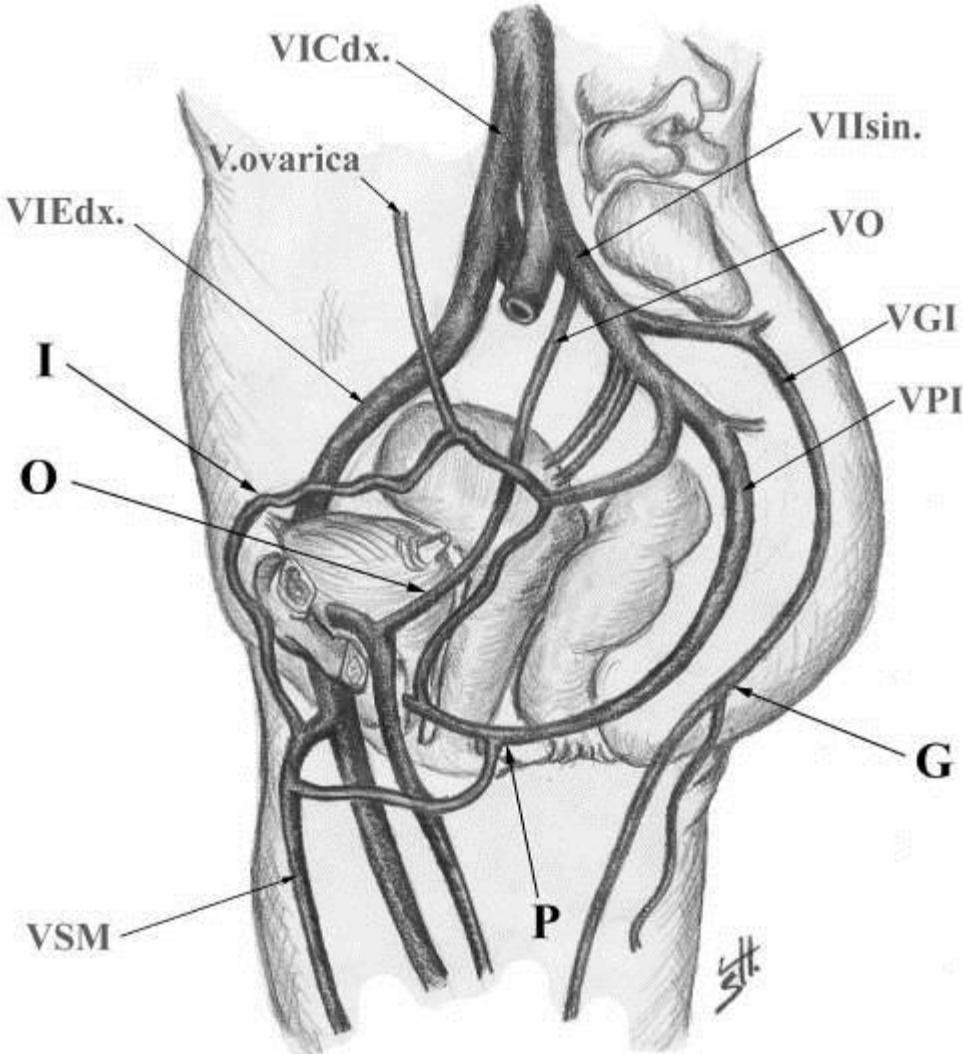


Veins of pelvis – clinical relevance

- pelvis fractures → heavy bleeding
- slowed blood flow → thrombosis → embolism
- uptake of calcium in thrombi → phleboliths (visible in X-ray snaps)
- pelvic varices – connections with LL veins
- v.iliaca int. and its tributaries are not moveable → easy bleeding and difficult closure in surgery

Site od connections between pelvic and LL veins

- canalis inguinalis
- canalis obturatorius
- foramen infrapiriforme
- perineum
- *change of flow direction in varices*



Cavo-caval anastomoses

VCI

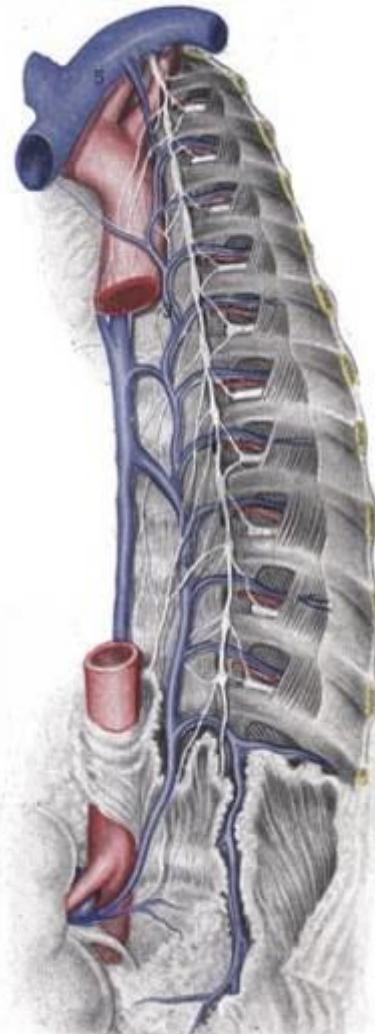
VCS

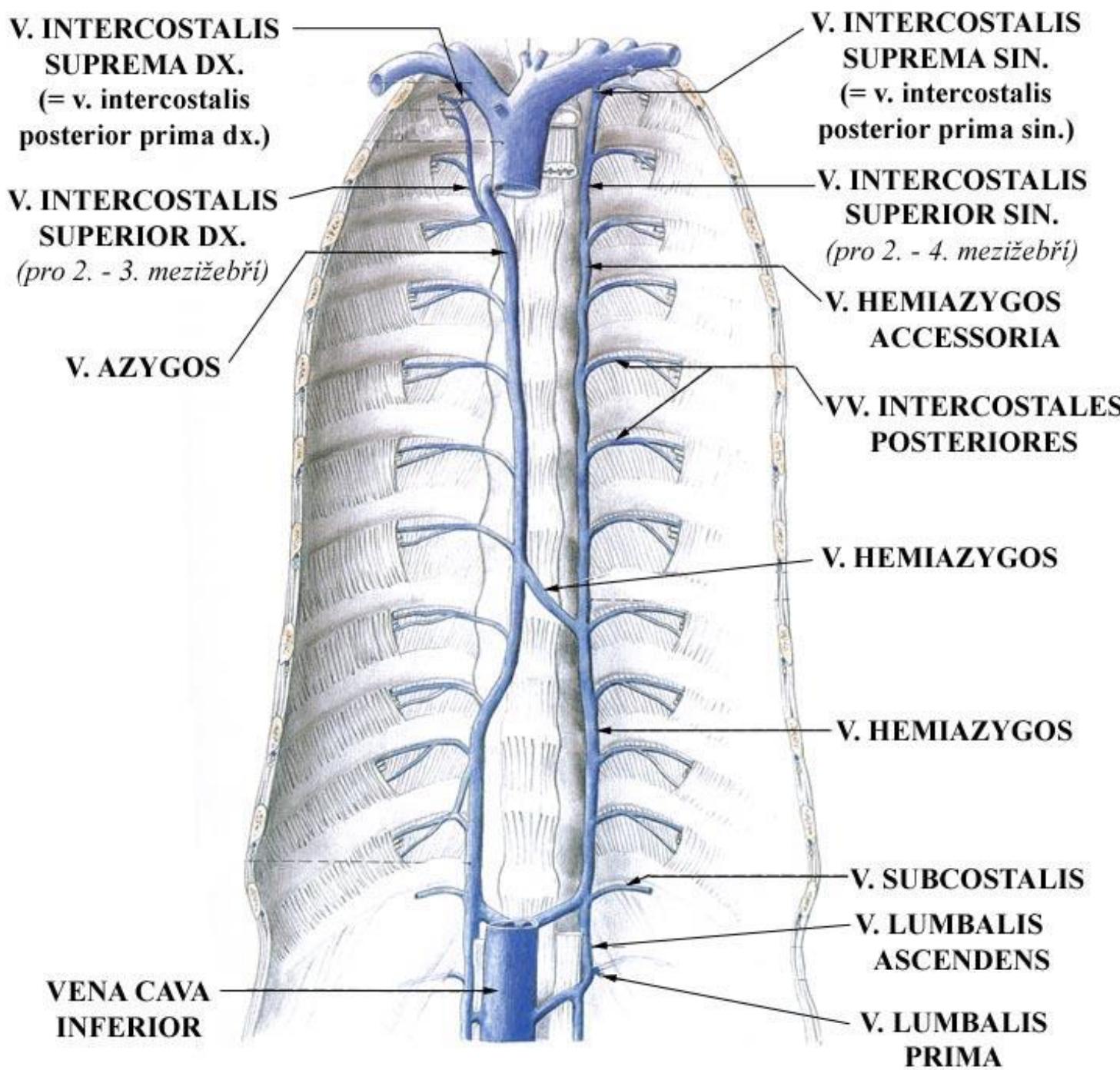
- vv. lumbales – v. azygos + hemiazygos
- v. epigastrica inf. – v. epigastrica sup.
- v. epigastrica spf. – vv. thoracoepigastricae
- plexus venosi vertebrales (*Batson's*)

Vena azygos system

v. azygos + hemiazygos

- accompany aorta thoracica
- no valves
- mediastinum posterius inferius → m. superius
- origin: v. lumbalis ascendens + v. subcostalis
- pass through diaphragm: via pars lumbalis or hiatus aorticus
- end: v. hemiazygos opens into v. azygos at level of T7-9
- v. azygos opens into VCS
 - arcus v. azygos





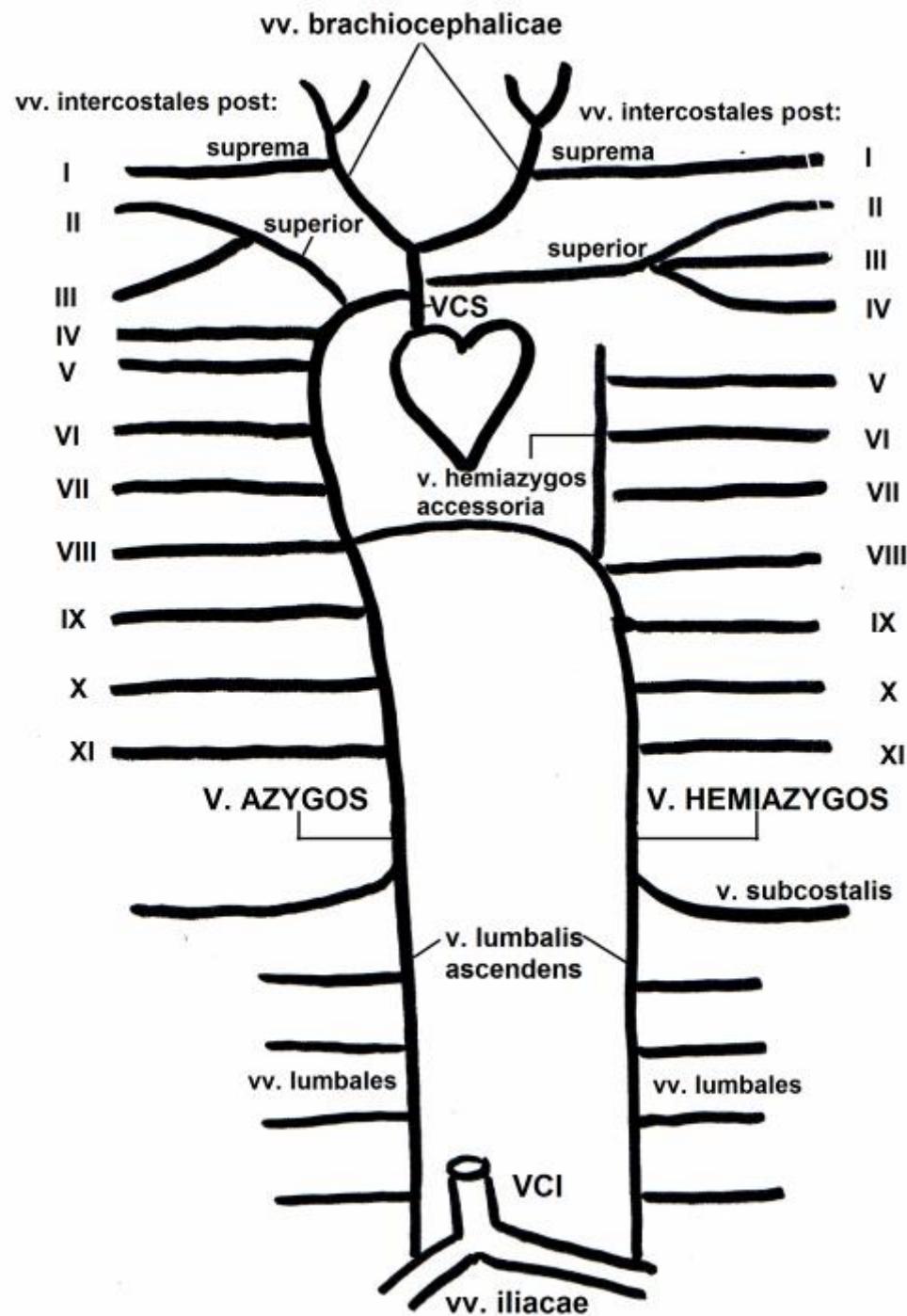
Tributaries of vena azygos system

- parietal:

- vv. intercostales posteriores
- v. intercostales sup. dx.
- v. hemiazygos accessoria
- vv. phrenicae sup.

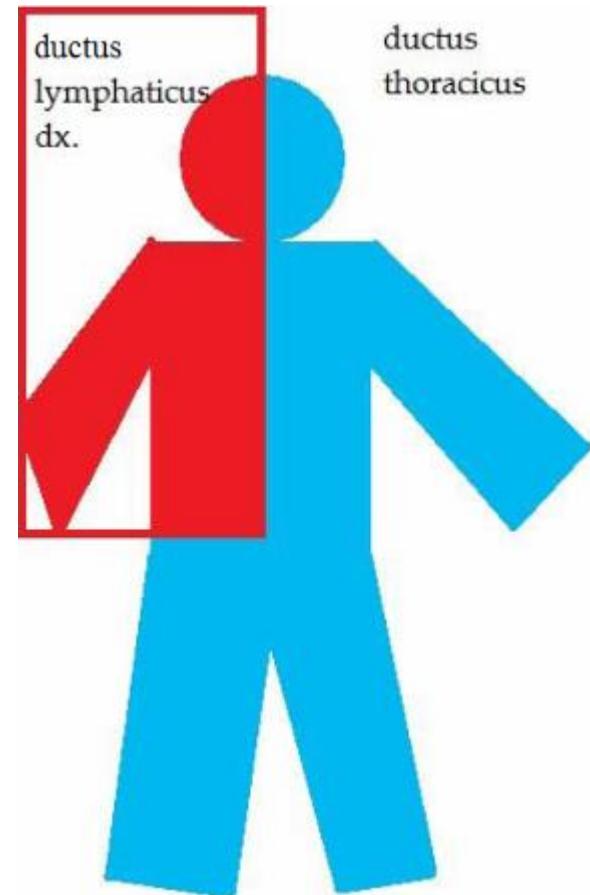
- visceral:

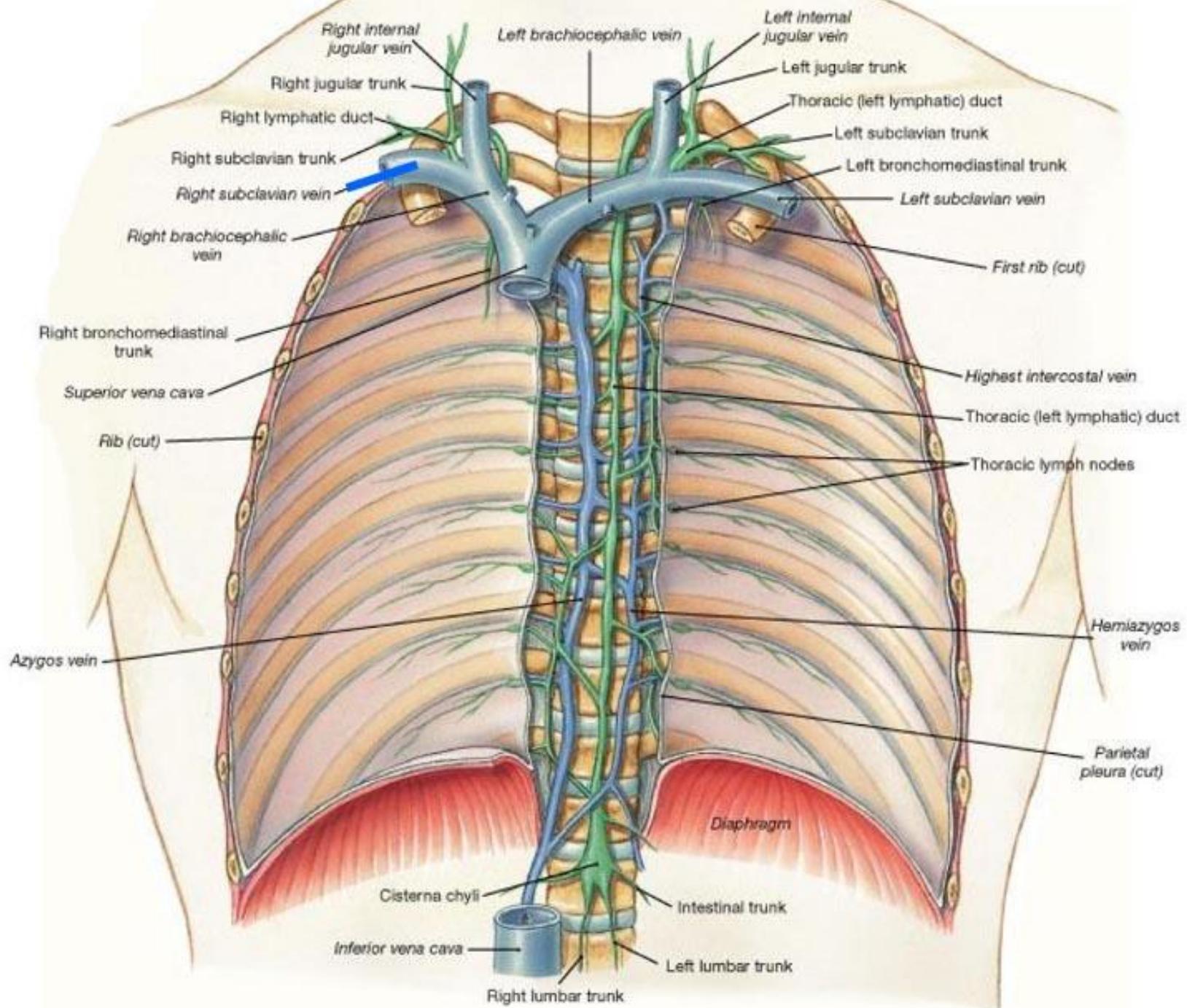
- vv. oesophageales,
bronchiales, mediastinales

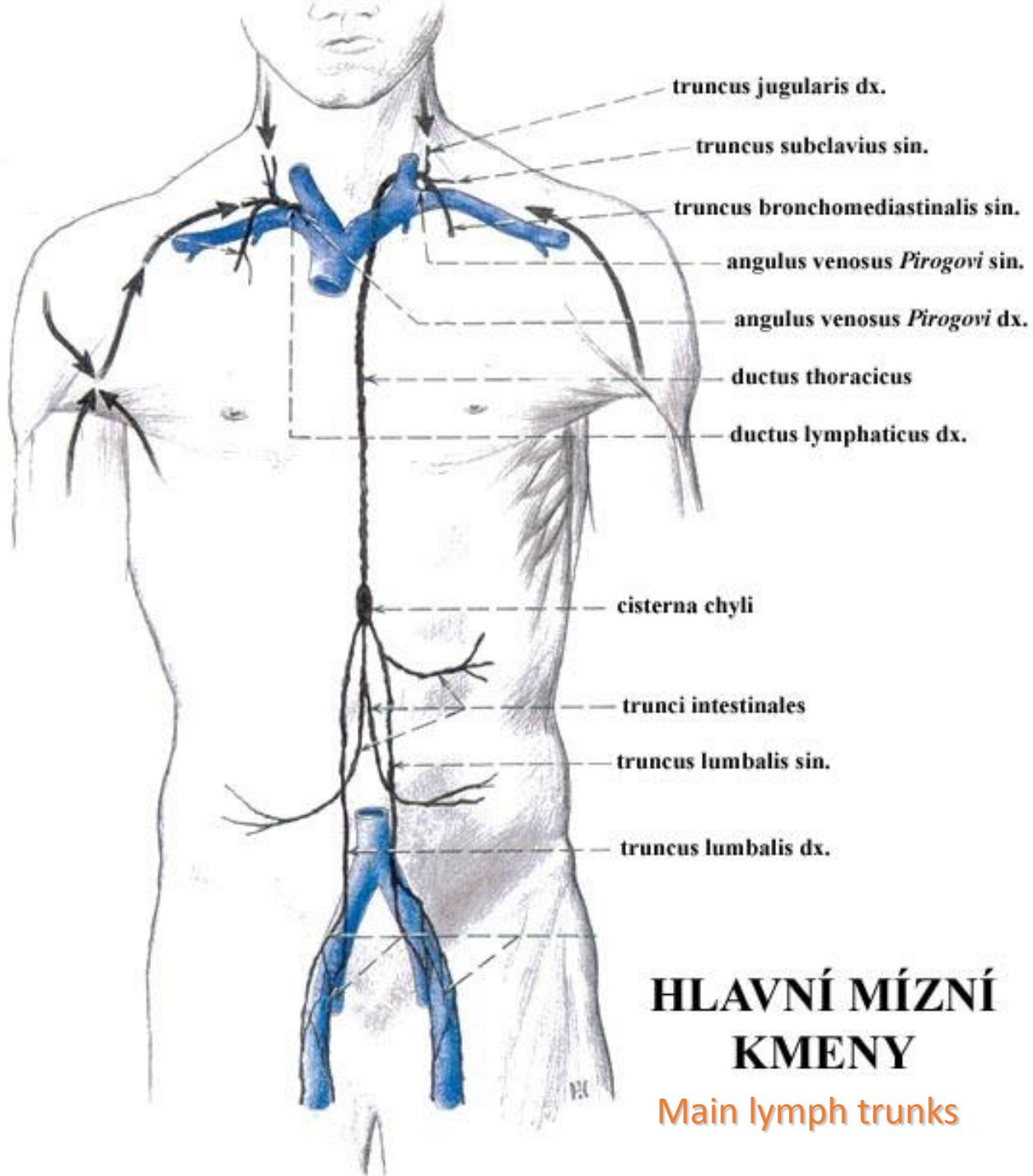
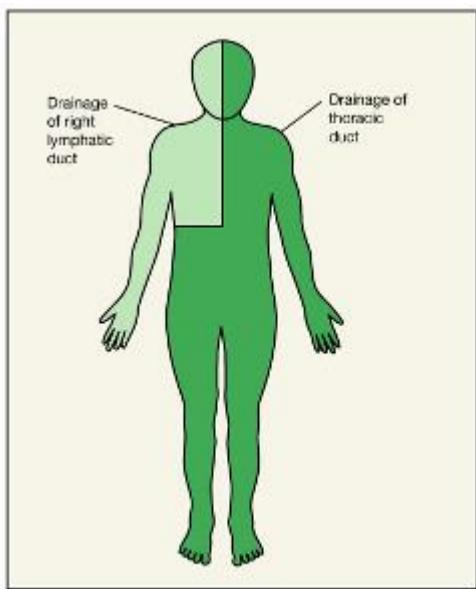
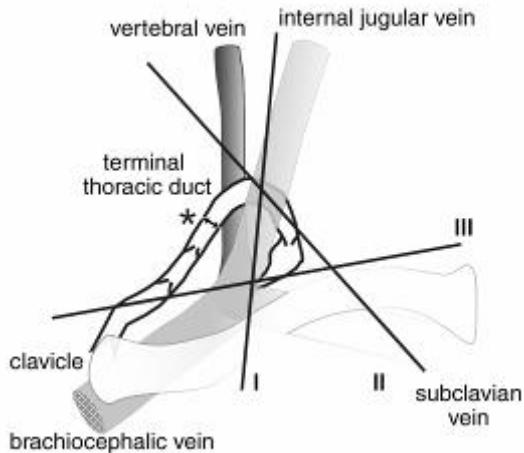


Lymph vessels general arrangement

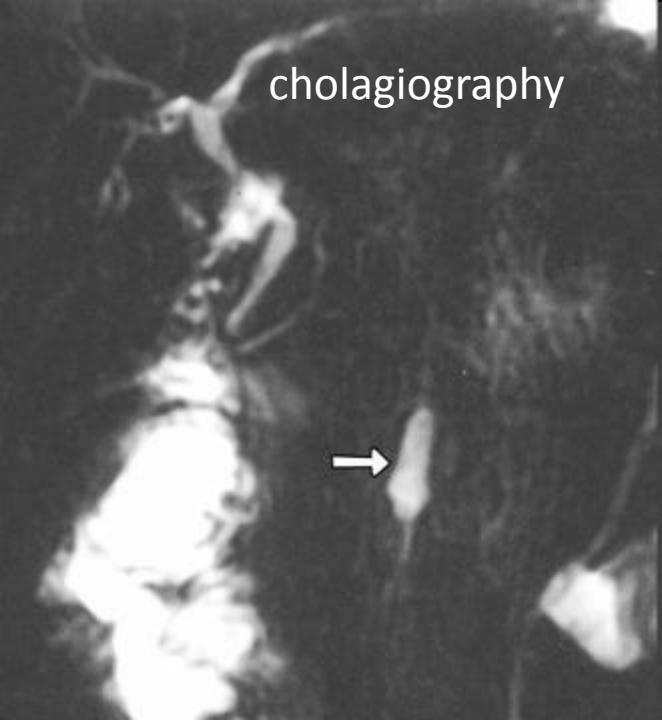
- lymph capillaries → lymph vessels
- limbs (collectors): superficial → deep vessels
- organs: plexuses (subcapsular + deep) → lymph trunks → lymph ducts
- lymph nodes put in vessels



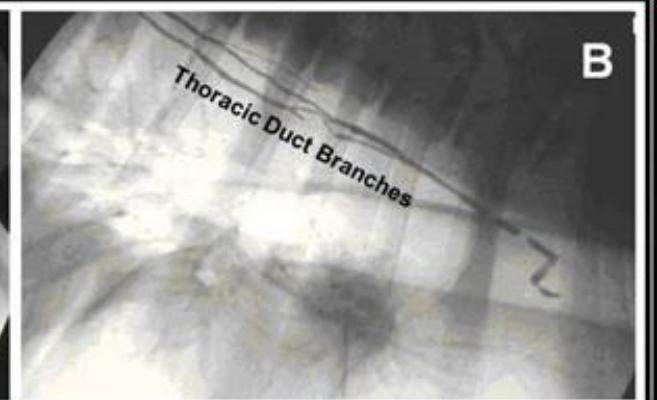
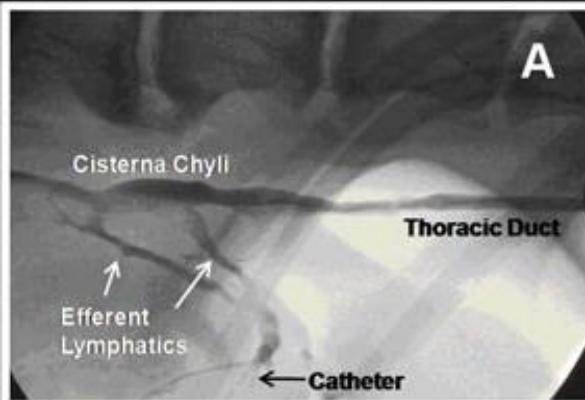




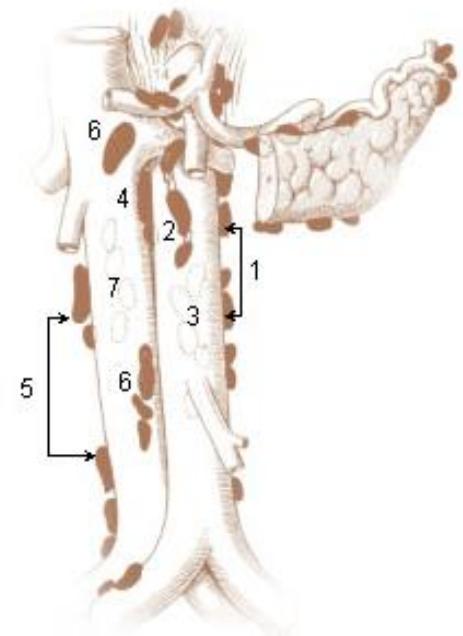
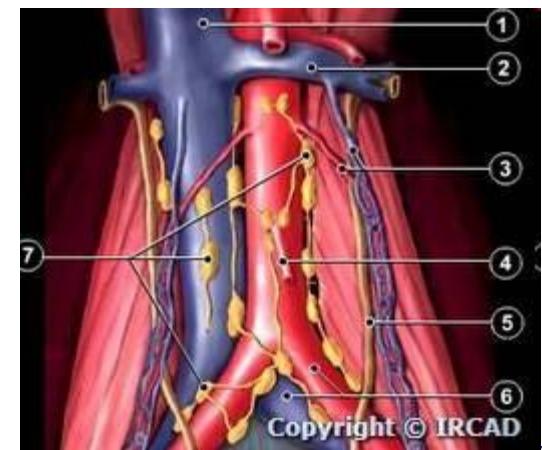
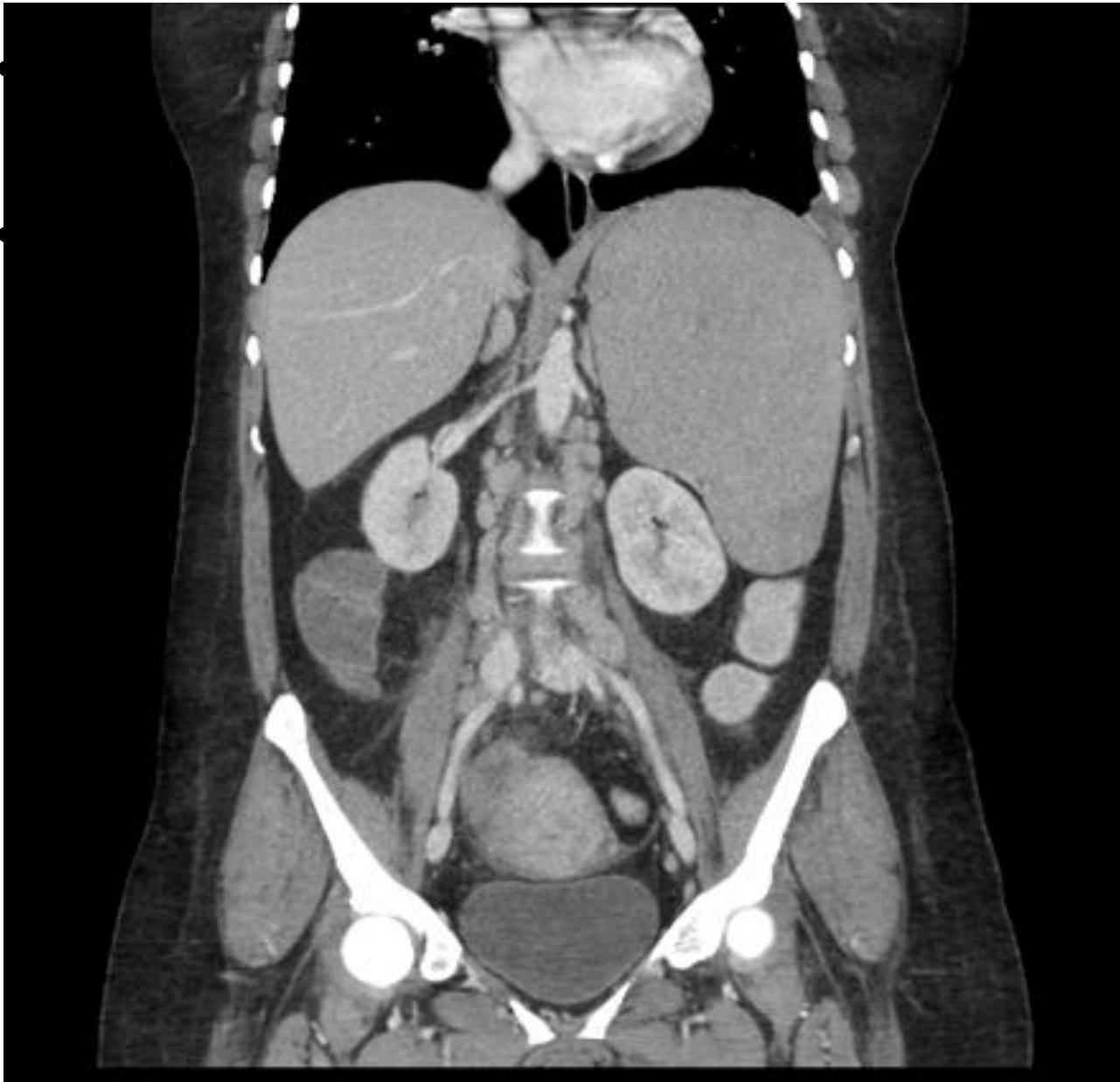
cholangiography



CISTERNA
CHYLI



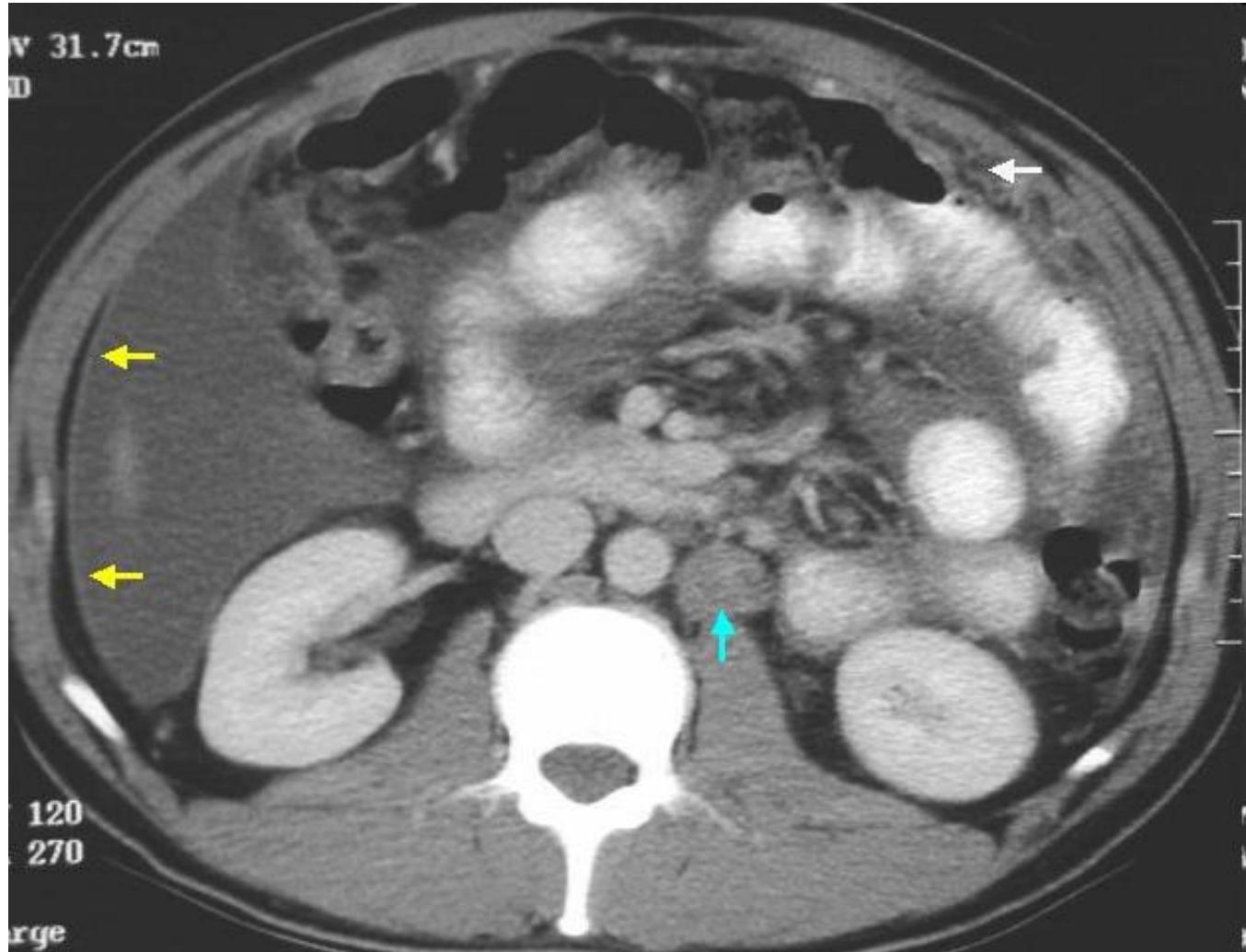
Abdomen



Colorectal metastasis



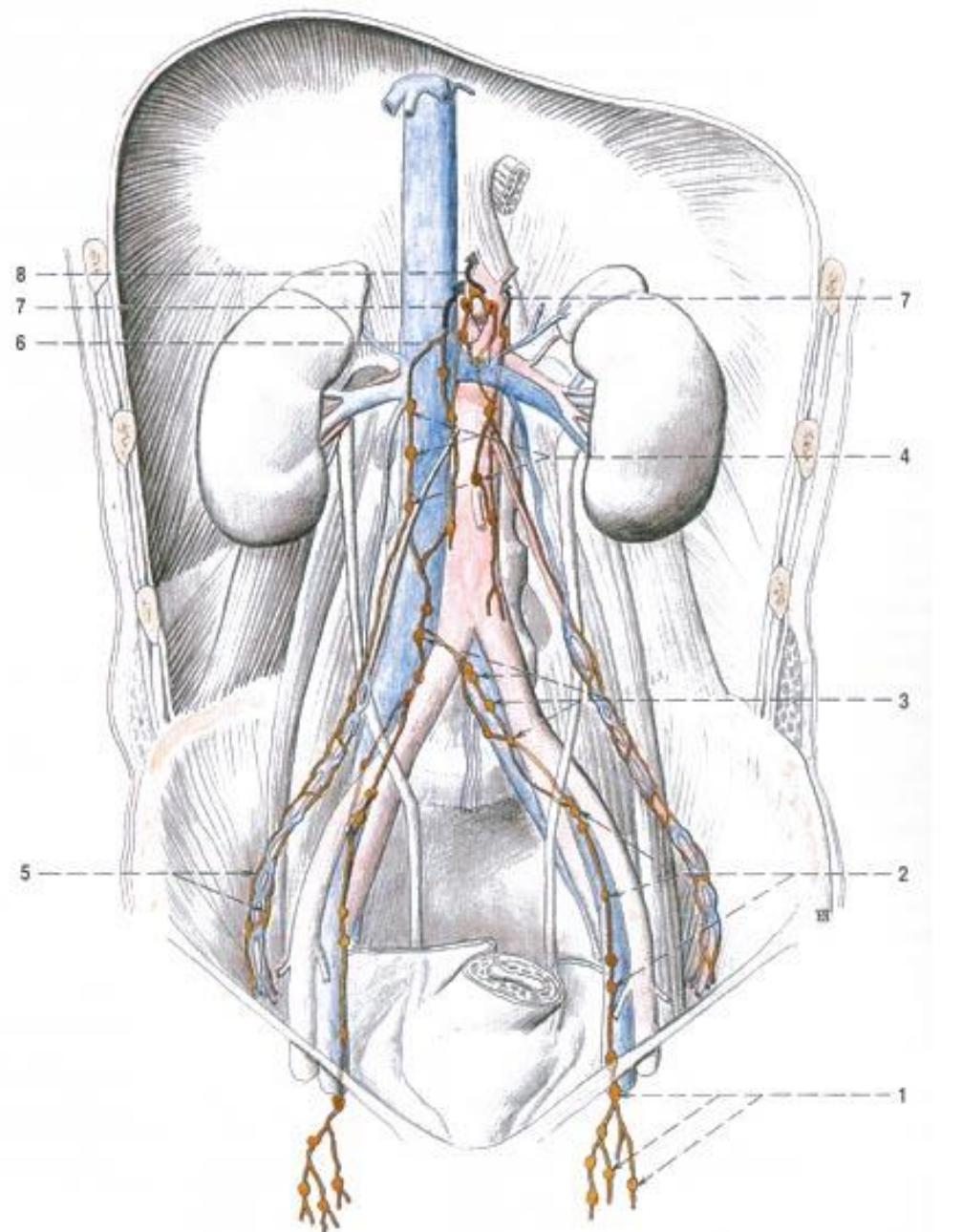
Tuberculosis



Testis ♂

Ovary ♀

- n.l. lumbales
- *L2 – development*
- *scrotum → n.l. inguinales superficiales*
- *! no puncture !*



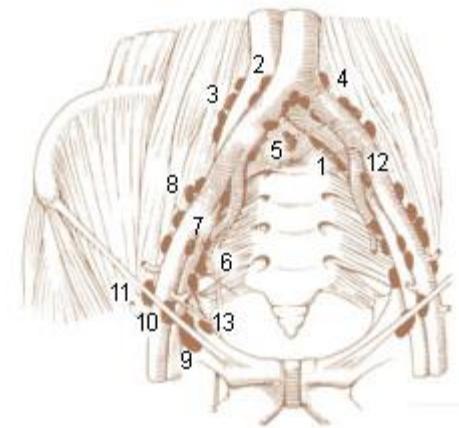
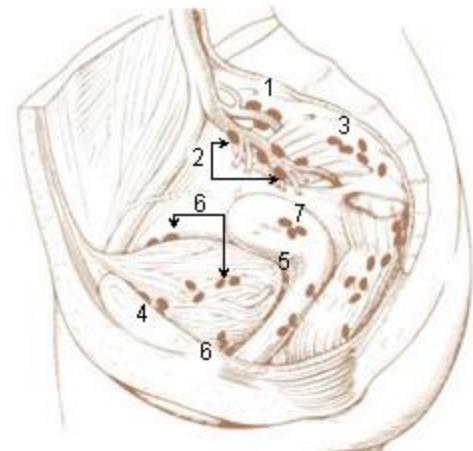
Obr. 138. NODI ILLIACI EXTERNI ET NODI LUMBALES

1 nodi inguinales superficiales et profundi
 2 nodi iliaci externi
 3 nodi iliaci communes
 4 nodi lumbales

5 mizní kolektory z varlete / ovaria; jdoucí podél vasa testicula / ovarica do nodi lumbales
 6 nodi coelasci
 7 odtok mezi cestou trunci lumbalis do cisterna chyli
 8 odtok mezi cestou trunci lumbalis do cisterna chyli

Pelvis

- n.l. parietales
 - communes
 - externi (obturatorii)
 - interni
 - gluteales sup.+inf.
 - sacrales (rectum, prostata, cervix uteri, fornix vagi)
- n.l. viscerales
 - paravesicales
 - parauterini ♀, paravaginales ♀
 - pararectales



Abdomen and pelvis clinical relevance



Uterus

anatomical classification:

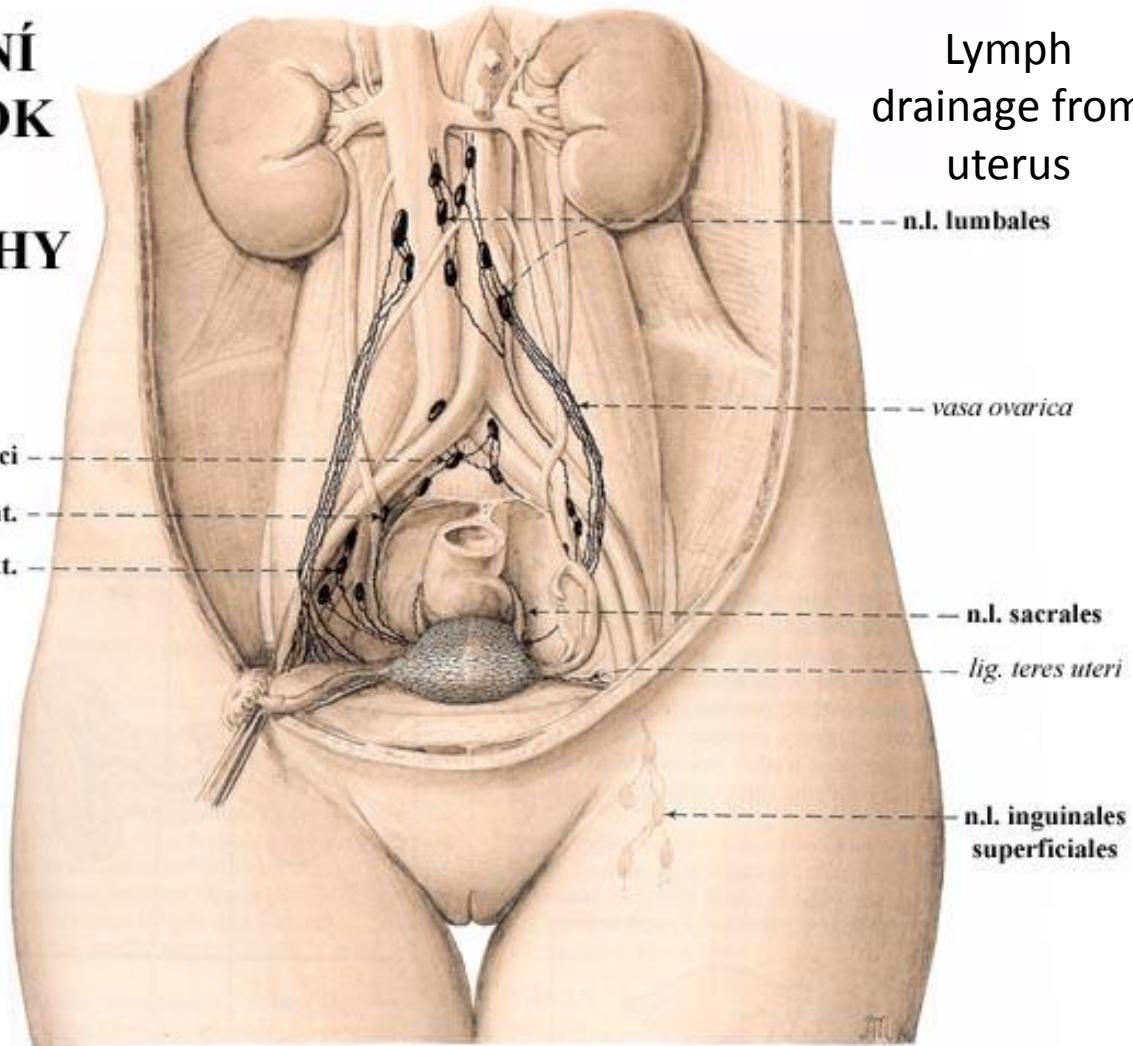
- n.l. lumbales ← fundus + corpus
- n.l. iliaci interni (iliaci externi, iliaci communes, obturatorii) ← corpus, isthmus + cervix
- n.l. sacrales ← isthmus, cervix
- n.l. inguinales superficiales ← margines + cornua (exceptionally!)

clinical classification: according to corpus and cervix cancer

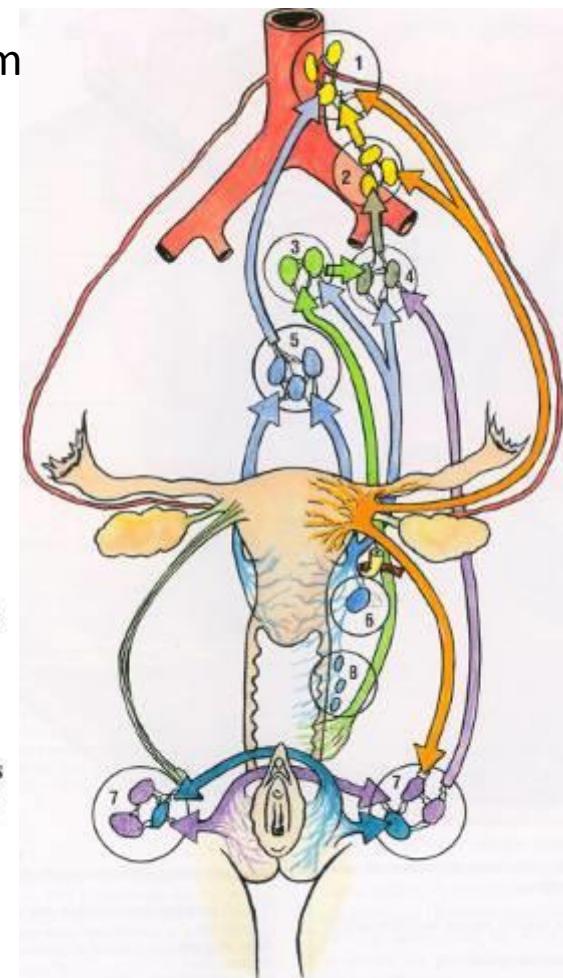
- corpus uteri → n.l. iliaci int.+ lumbales + (inguinales superficiales)
- cervix uteri → n.l. iliaci int.+ sacrales

Uterus

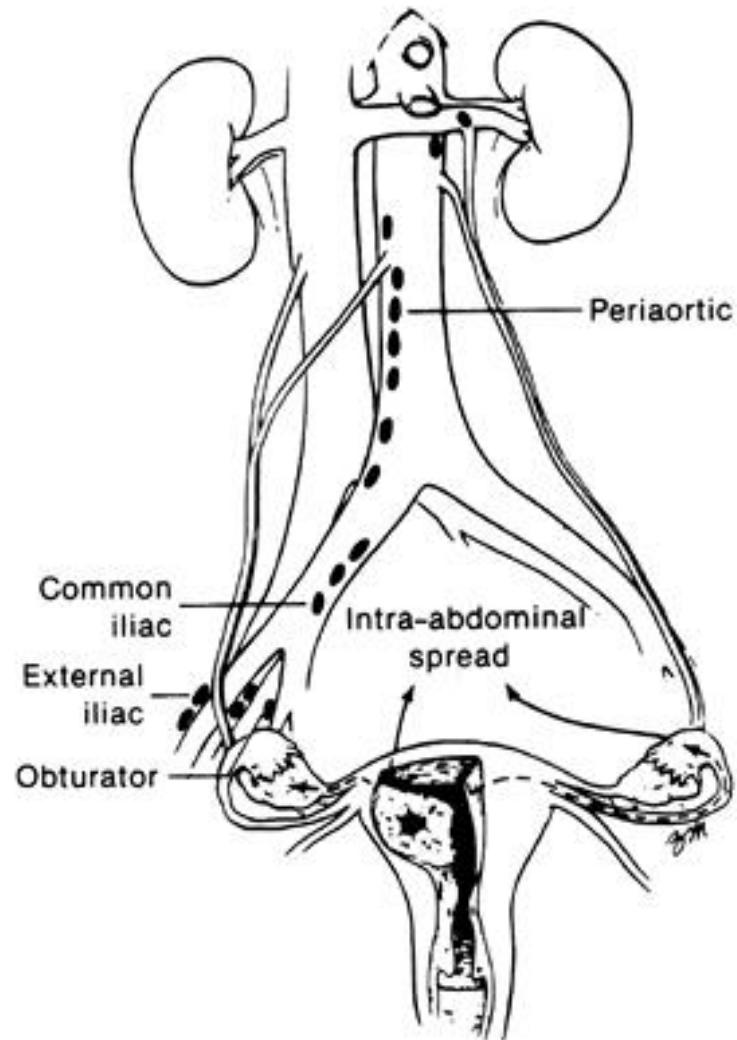
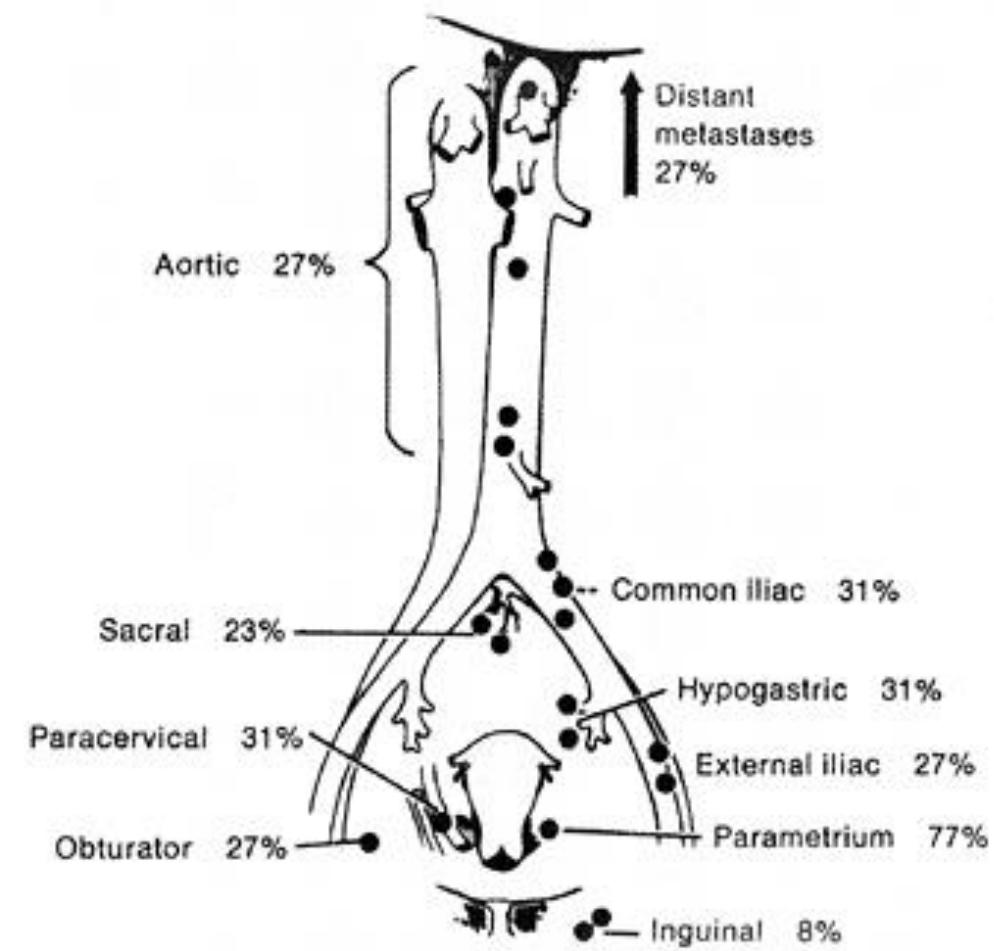
MÍZNÍ ODTOK Z DĚLOHY



Lymph
drainage from
uterus



Cervix cancer – lymph nodes involvement



Prostate

- n.l. iliaci int. + ext.
- n.l. sacrales



Lymph vessels and nodes of pelvis

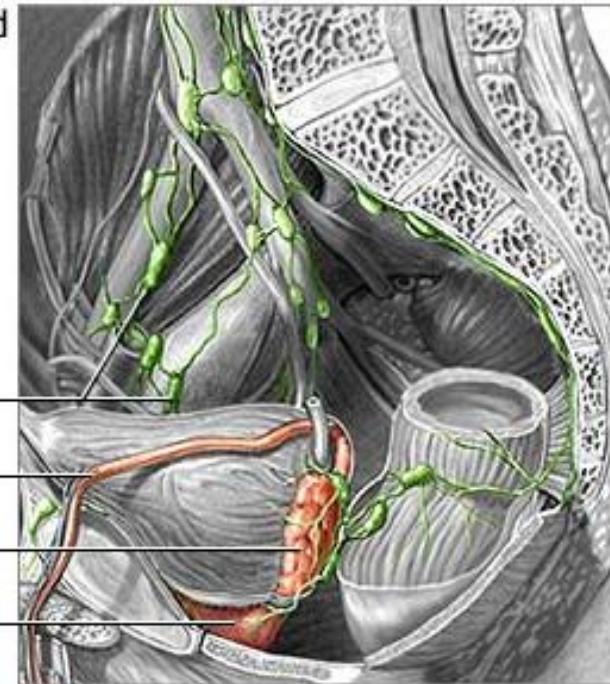


Lymph nodes

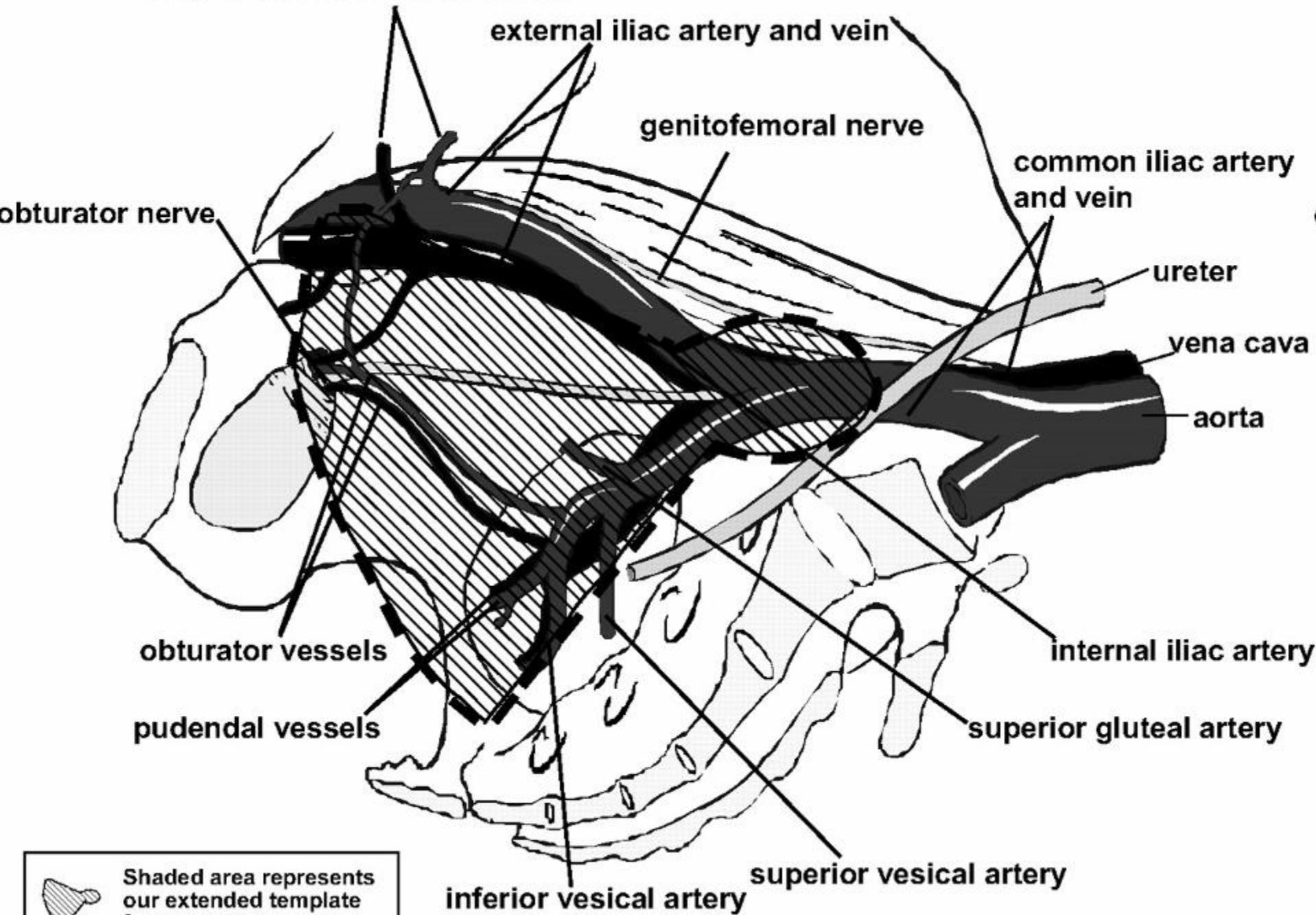
Vas deferens

Seminal vesicle

Prostate gland



deep circumflex ileum vessels



Shaded area represents
our extended template
for prostate cancer

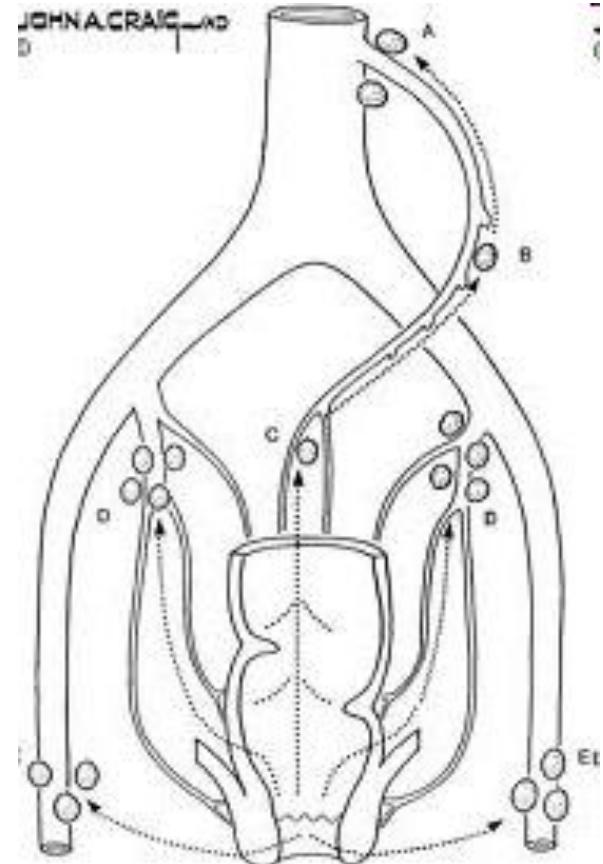
Rectum + anal canal

- ampulla

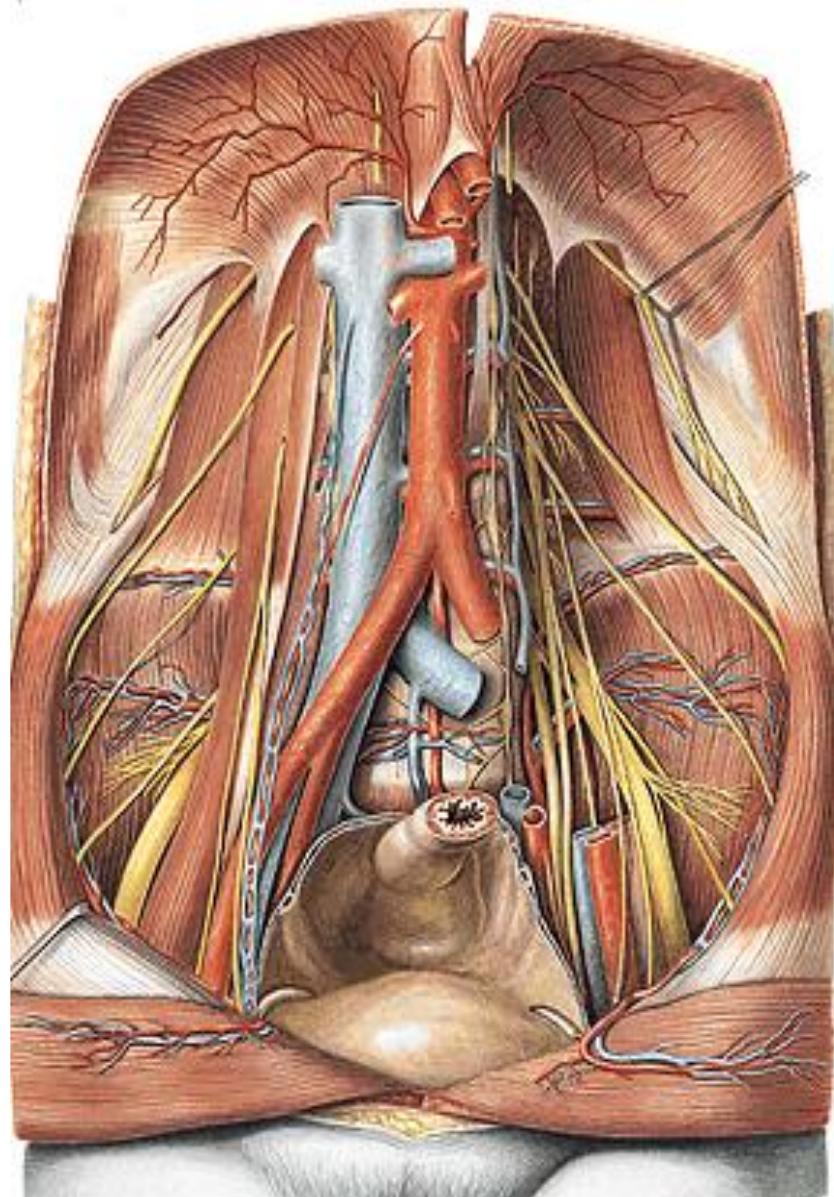
- oral part: → n.l. rectales sup. → n.l. mesenterici inf.
- aboral part: → n.l. pararectales → n.l. iliaci interni
- *n.l. obturatorii, sacrales*

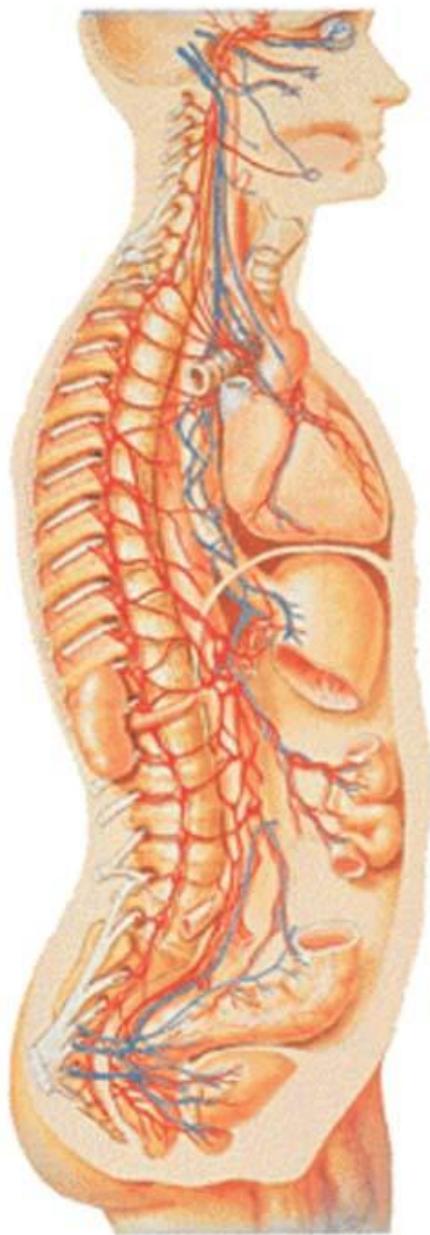
- canalis analis

→ n.l. pararectales + n.l. inguinales superficiales

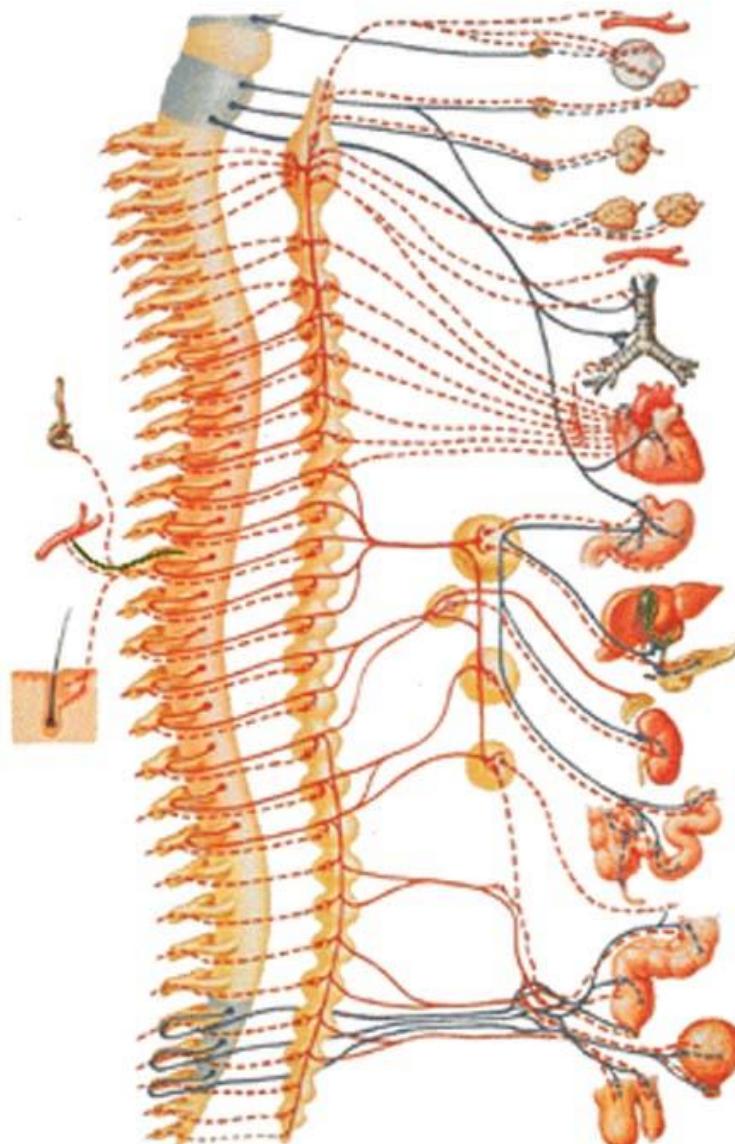


Nerves of retroperitoneum





— Sympathetic fibers
— Parasympathetic fibers

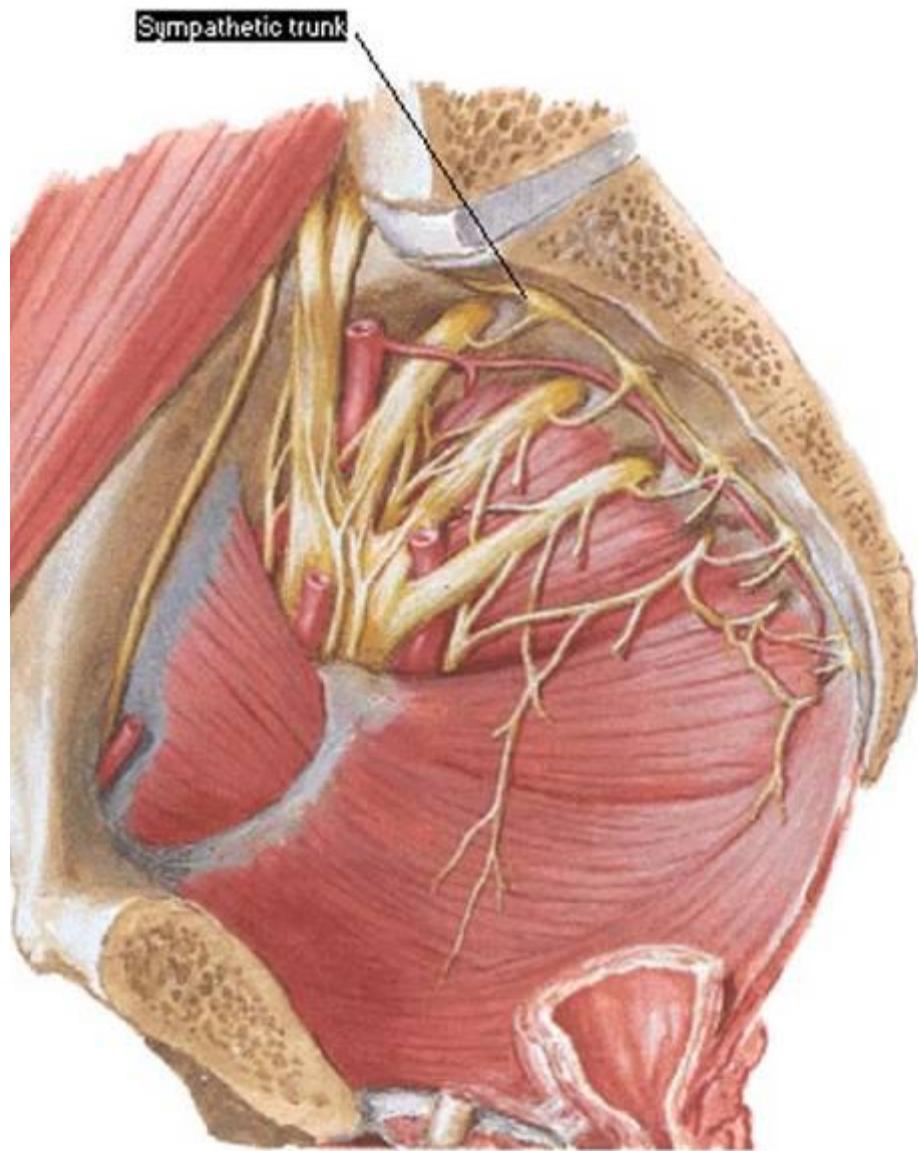
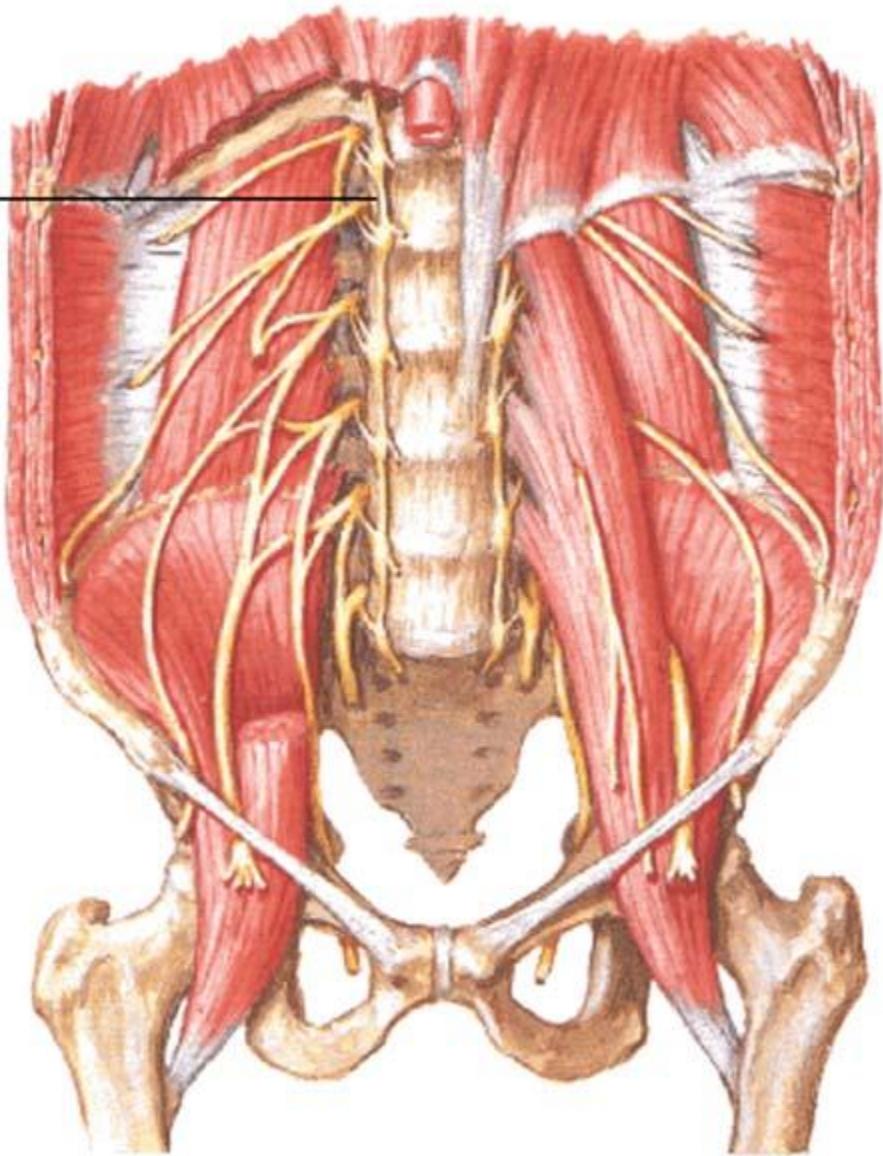


Sympathetic fibers Presynaptic —
 Postsynaptic - - -

Parasympathetic fibers Presynaptic —
 Postsynaptic - - -

Antidromic conduction —

Sympathetic trunk



Plexus aorticus abdominalis

sympathetic fibers: nn. splanchnici thoracici (major, minor, imus), lumbales 1-3

parasympathetic fibers: rr. coeliaci nn. vagorum

mixed plexus around aorta abdominalis + prevertebral ganglia

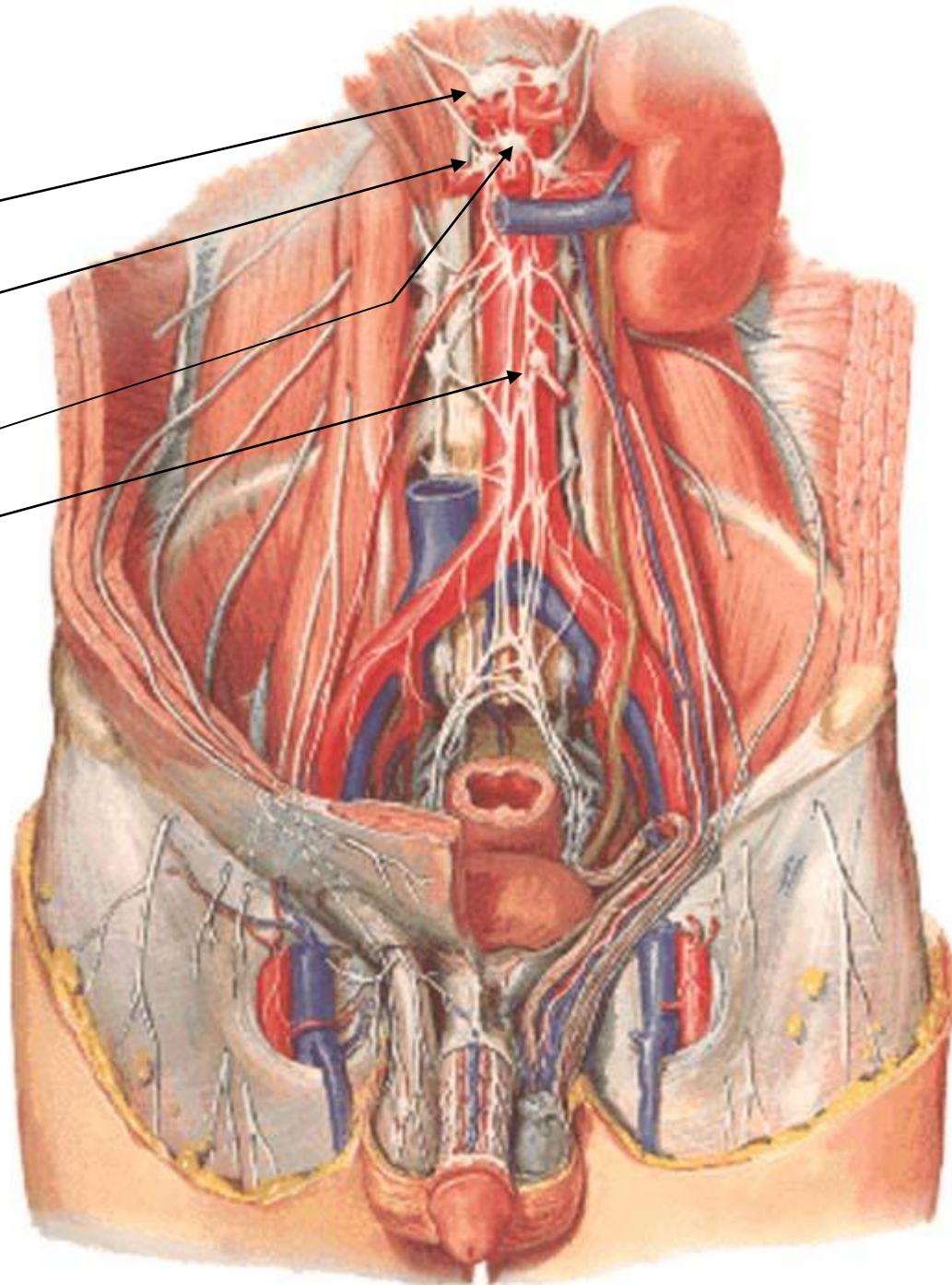
- paired **ggl. coelicum** + **ggl. aortorenale**
 - unpaired **ggl . mesentericum sup. + inf.**
- along arteries → homonymous plexuses
- stomach → oral majority of rectum (**enteric system**), pancreas, liver
 - spleen, suprarenal glands, kidneys, ureters, testes♂ / ovaries♀, uterine tubes (1/2) ♀

ggl. coeliacum

ggl. aorticorenale

ggl. mesentericum sup.

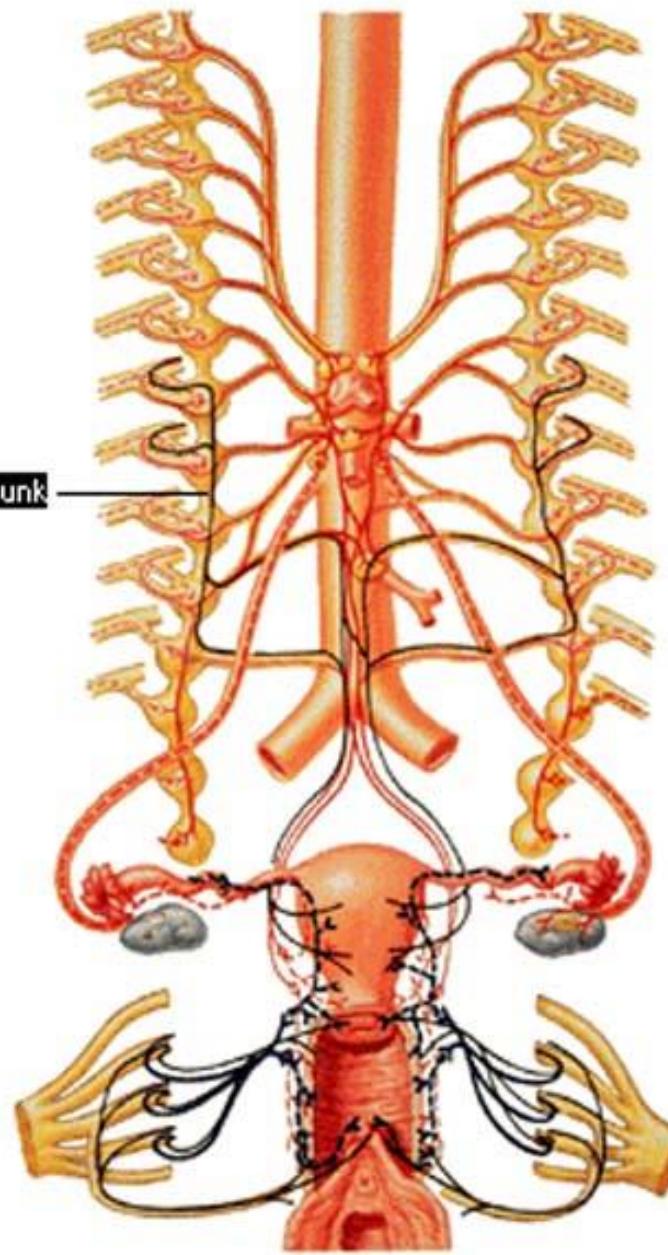
ggl. mesentericum inf.



Plexus aorticus abdominalis continuation

- **plexus hypogastricus superior** (**pure sympathetic** (from bifurcatio across promontorium))
→ n. hypogastricus dx. + sin. → **plexus hypogastricus inferior** s. pelvicus (**mixed plexus**) → pelvic organs except ovaries ♀, uterine tubes (1/2) ♀, fundus uteri ♀ and urinary bladder
- **plexus iliacus** dx. + sin. (**pure sympathetic**) → lower limb

Innervation of Female Reproductive Organs



Sympathetic fibers

Presynaptic _____

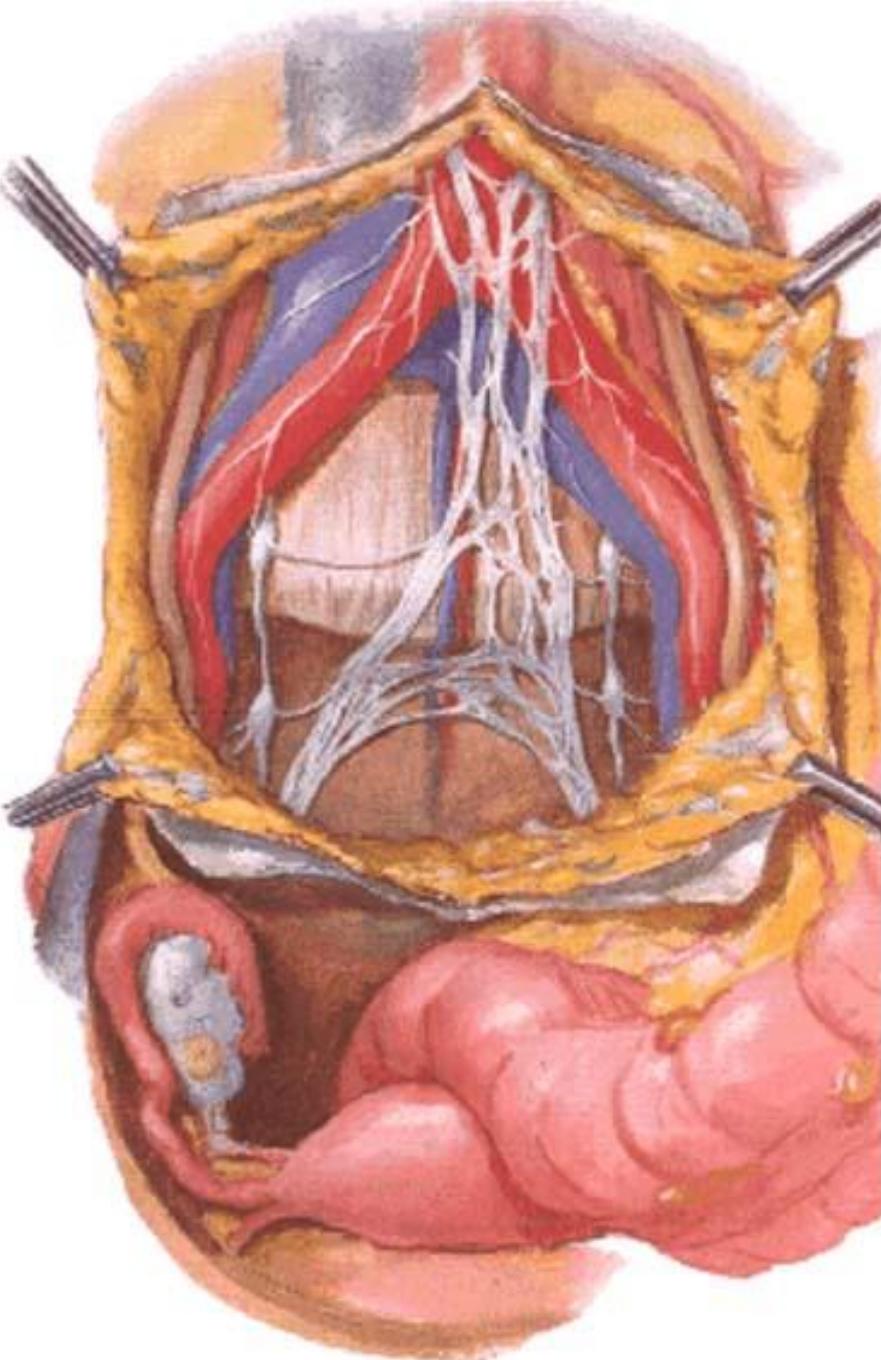
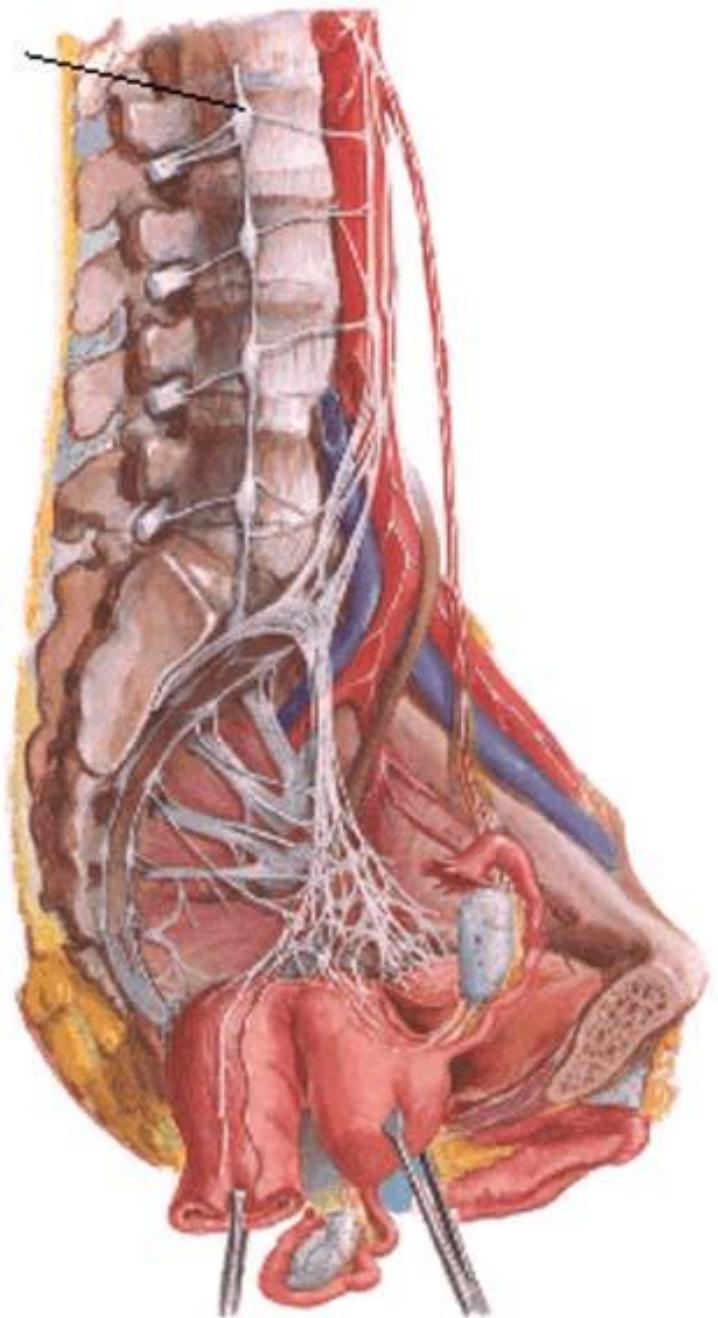
Postsynaptic -----

Parasympathetic fibers

Presynaptic _____

Postsynaptic -----

Afferent fibers _____



Plexus hypogastricus inferior s. pelvis

mixed plexus

AF-PS: nn. splanchnici pelvici S2-4 (*obsoletely nn. erigentes*)

AF-S: truncus sympatheticus → plexus aorticus abdominalis → plexus hypogastricus superior → nn. hypogastrici

AF-S: truncus sympatheticus → ganglia sacralia → nn. splanchnici sacrales

- pelvic organs except ovaries ♀, uterine tubes (1/2) ♀, fundus of uterus ♀ and fundus of urinary bladder

EF (mixed): → plexus rectalis (aboral minority of rectum)

→ parasympathetic fibers ascend as orally as *Cannon-Bőhm's point* = hindgut

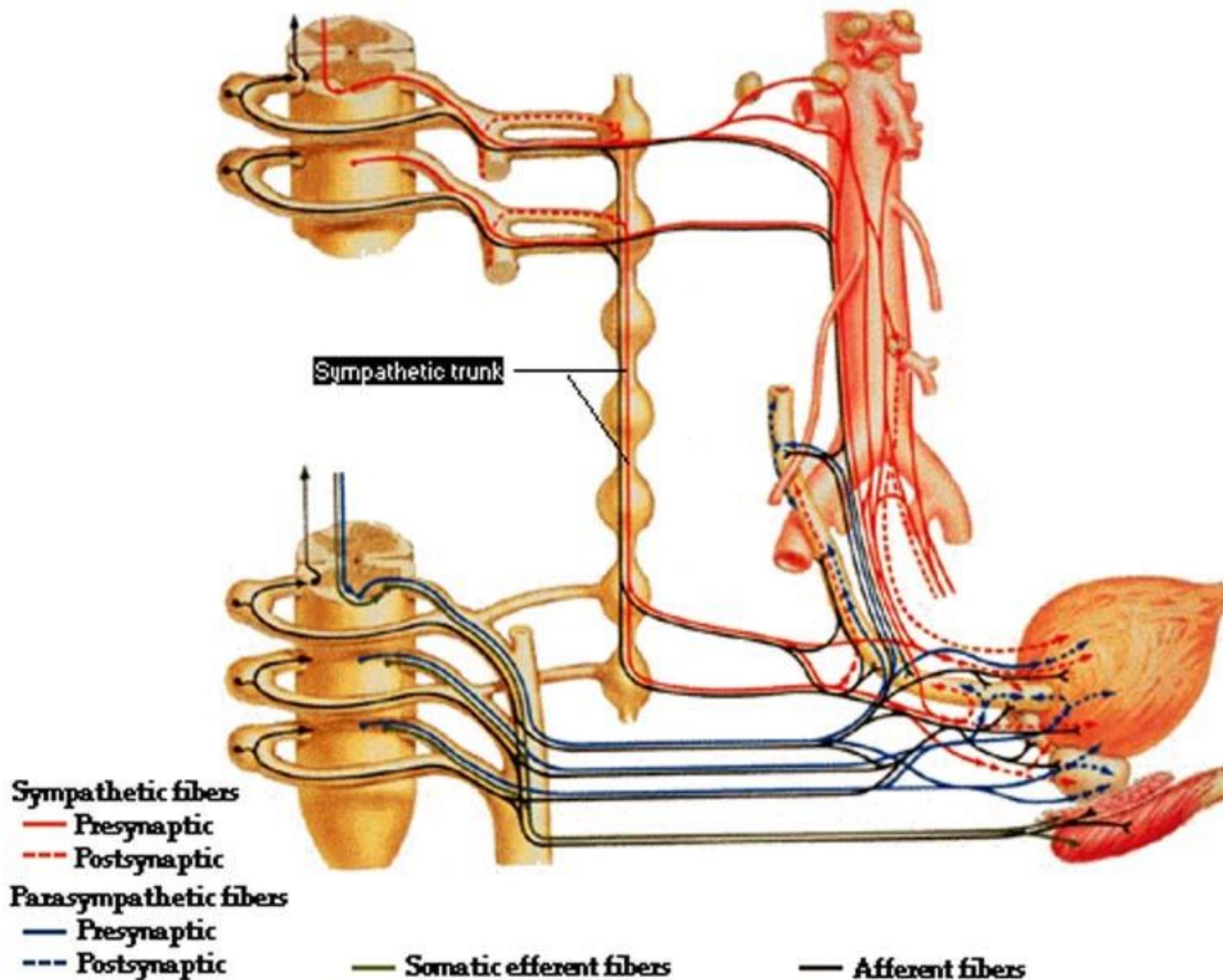
→ plexus prostaticus + deferentialis ♂ / uterovaginalis ♀

→ plexus vesicalis

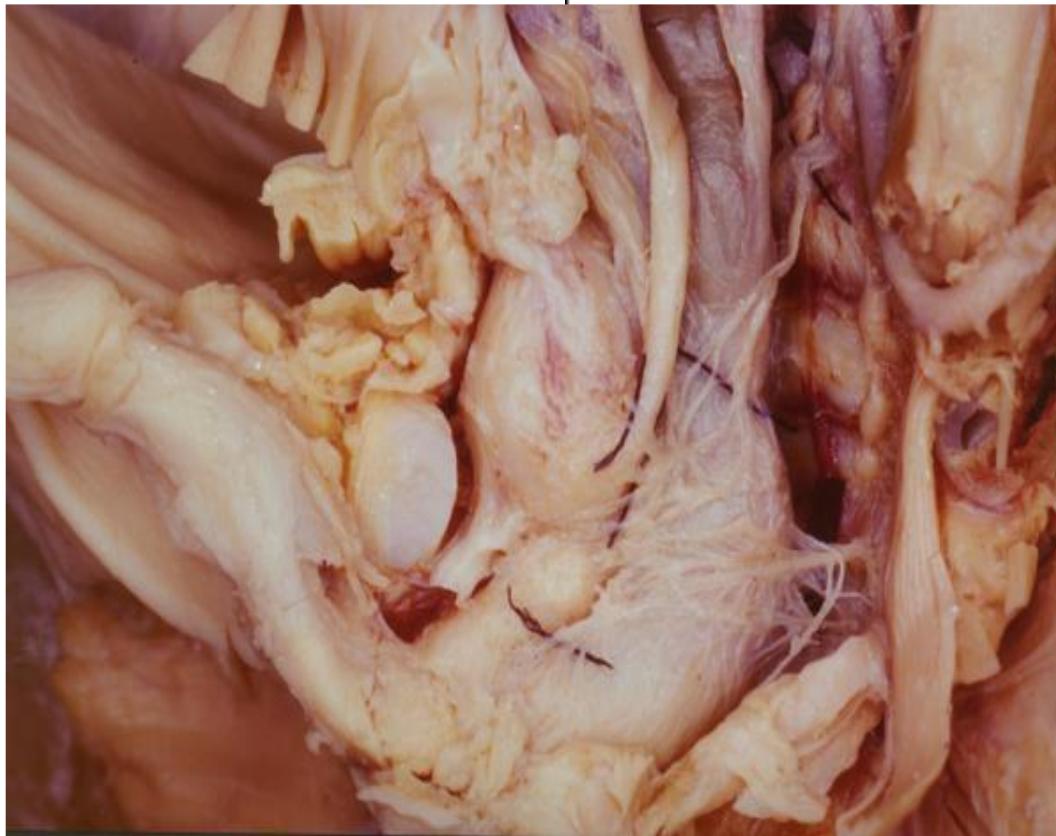
- m. sphincter urethrae (nucleus n. pudendi *Onufi* in spinal cord segments S2-4)

→ n. cavernosus penis ♂ / clitoridis ♀ (erectile bodies)

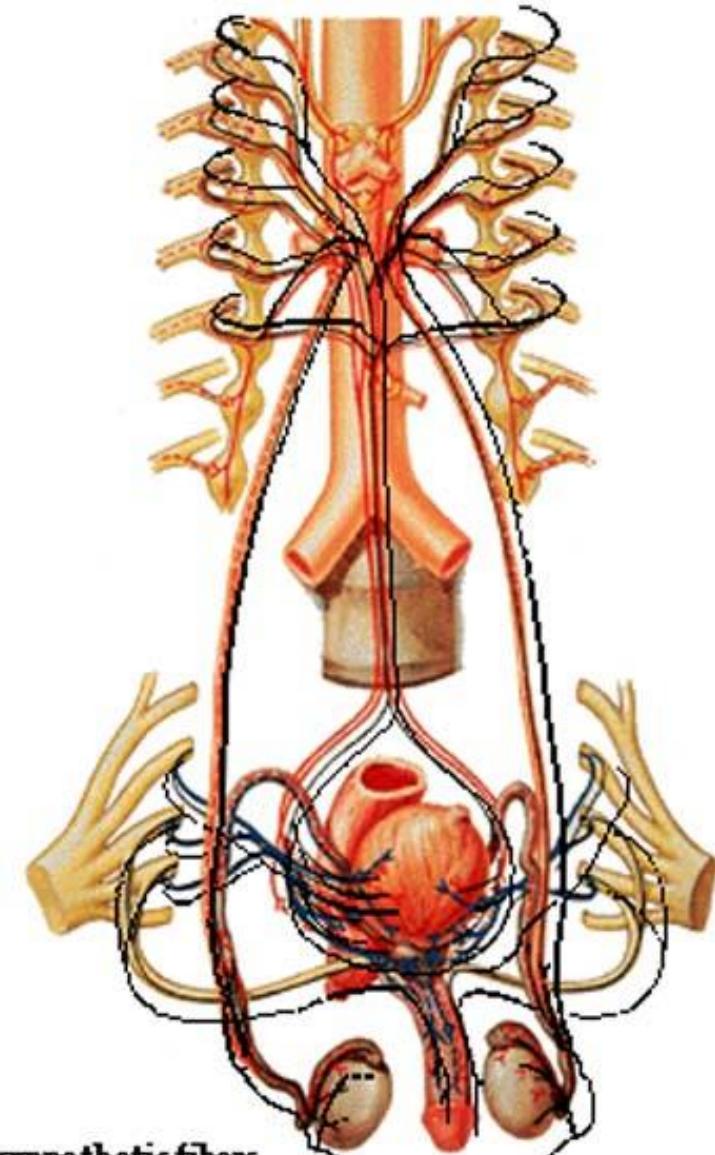
Innervation of Urinary Bladder



Innervation of Male Reproductive Organs



Plexus hypogastricus inferior s. pelvis



Sympathetic fibers
— Presynaptic
--- Postsynaptic

Parasympathetic fibers
— Presynaptic
--- Postsynaptic
— Afferent fibers