

The abdominal oesophagus, stomach and the duodenum

#### Prof. Oluwadiya KS www.oluwadiya.com

#### Viscera of the abdomen

- Abdominal esophagus: Terminal part of the esophagus
- The stomach
- Intestines: Small and Large intestines
- Spleen
- Pancreas
- Liver
- Gallbladder
- Kidneys
- Suprarenal (adrenal) glands

# The abdominal esophagus

- Short distal part of the esophagus located in the abdominal cavity.
- Enters abdomen through the right crus of the diaphragm, at the level of vertebra TX
- Passes from the esophageal hiatus to the cardial orifice of the stomach just left of the midline

# The abdominal esophagus

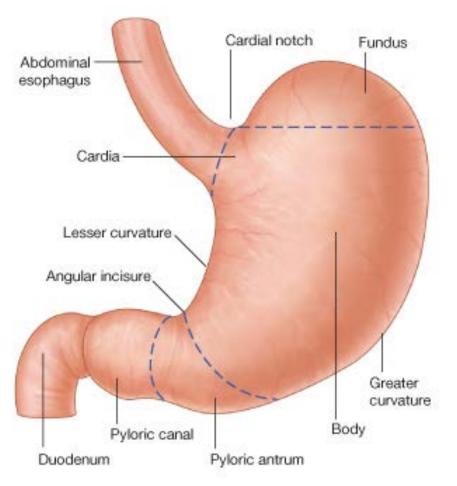
Accompanying structures:

- Anterior vagal trunk consists of several smaller trunks whose fibers mostly come from the left vagus.
- Posterior vagal trunk consists of a single trunk derived from the right vagus nerve

#### The stomach

- The most dilated part of the alimentary track
- Lie between the abdominal esophagus and the duodenum
- J-shaped.
- Position varies according to:
  - o Body build (habitus)
  - o Fullness of the stomach
  - o Position of the patient
  - o Movements of the diaphragm
- Can be found in the epigastric, umbilical, and left hypochondrium regions of the abdomen

#### Stomach: Parts



- Cardia surrounds the opening of the esophagus into the stomach
- Fundus= most superior portion area above the level of the cardial orifice.
   Related to the left dome of the diaphragm
- **Body**= largest portion
- Pyloris= Distal consisting of the pyloric antrum and pyloric canal

## **Stomach: Inlet and outlet**

#### The Inlet is the Cardiac Orifice.

- Left of the midline at the level of the 7th left costal cartilage and T11 vertebra.
- The outlet is the pyloric orifice
- Marked on the surface of the organ by the pyloric constriction
- Surrounded by the pyloric sphincter: a thickened ring of circular muscle
- Located just to the right of midline in the transpyloric plane.

#### Stomach: Curvatures

#### • Lesser curvature:

- Forms the shorter concave border of the stomach
- Angular incisure (notch) is the sharp indentation approximately two thirds the distance along the lesser curvature that indicates the junction of the body and the pyloric part of the stomach
- Greater curvature:
  - o forms the longer convex border of the stomach

#### Relations of The Stomach

- Entirely covered by peritoneum, except where blood vessels run along its curvatures and in a small area posterior to the cardial orifice.
- Has two omental attachment:
  - i. Lesser omentum at the lesser curvature
  - ii. Greater omentum at the greater curvature

#### Relations of The Stomach

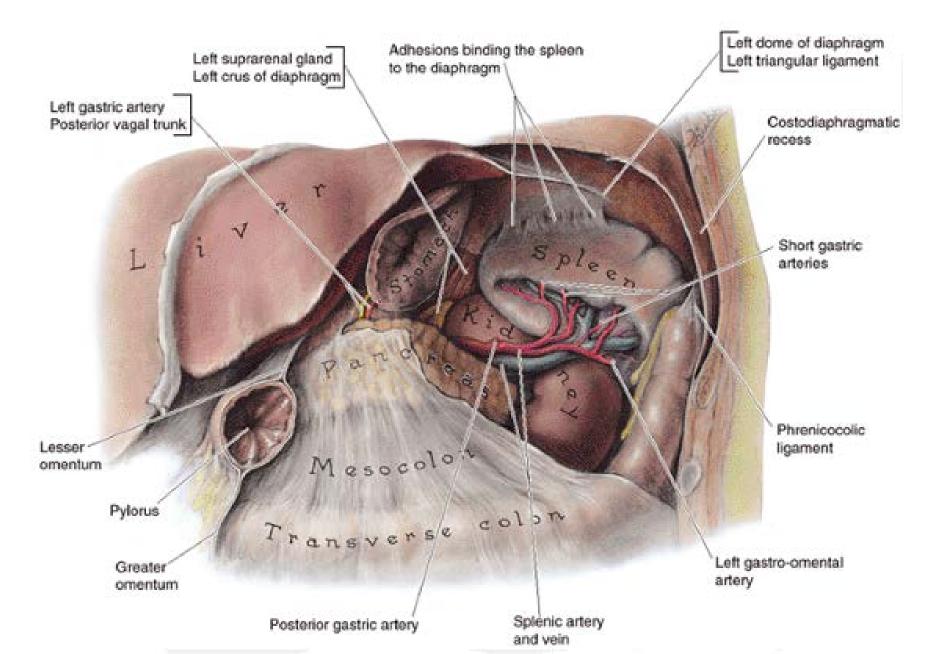
- Anteriorly: Diaphragm, the left lobe of liver, and the anterior abdominal wall.
- **Posteriorly**: Omental bursa and the structures forming the stomach bed

#### Relations of The Stomach

#### The Stomach bed:

- Stomach rests on this organs in supine position
- Formed by the structures forming the posterior wall of the omental bursa. (Stomach is the anterior wall of the bursa)
- From superior to inferior, the stomach bed is formed by the left dome of the diaphragm, spleen, left kidney and suprarenal gland, splenic artery, pancreas, and transverse mesocolon and colon

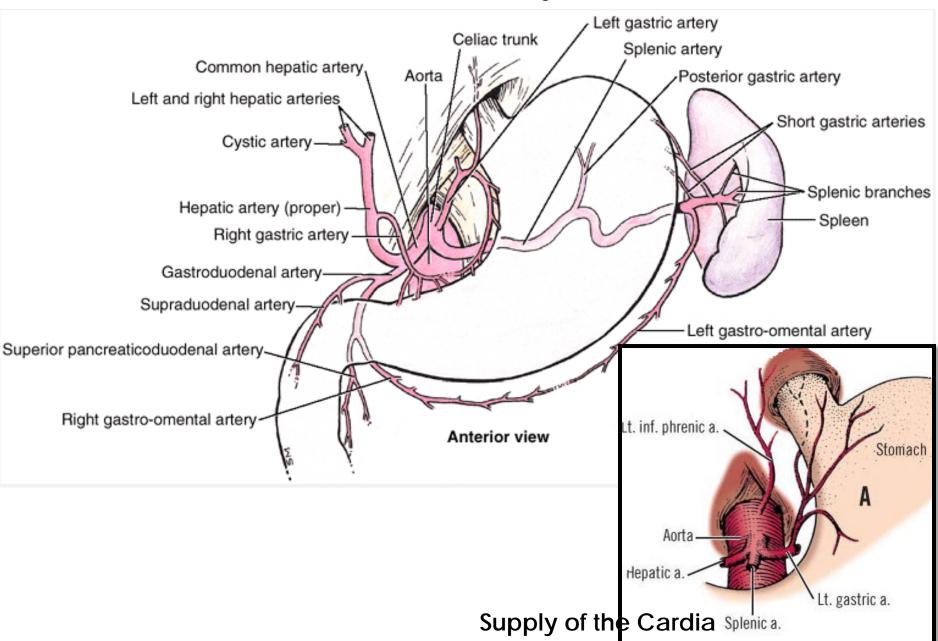
#### The Stomach bed



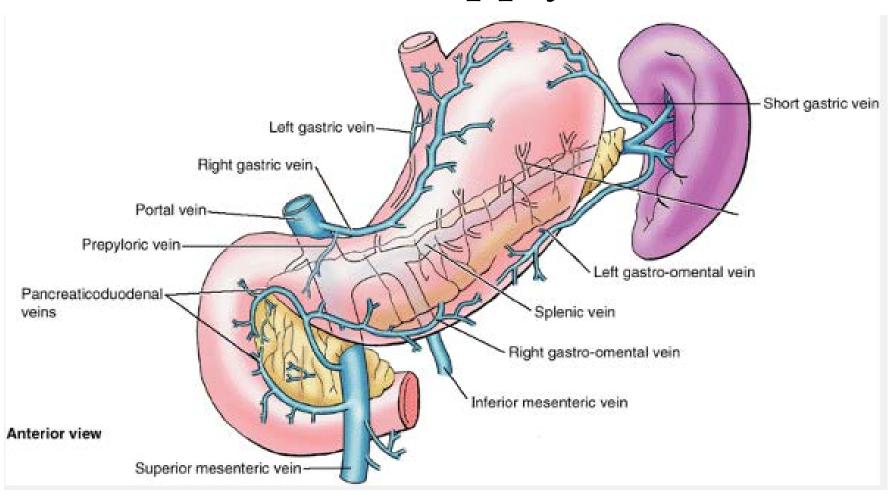
# Vascular Supply

- Right and left gastric arteries
- Right and left gastro-omental arteries
- Short gastric arteries
- Inferior phrenic artery
- Gastroduodenal artery
- Venous drainage:
- Right and left gastric veins drain to the portal Vein
- Right gastro-omental drains to the Superior mesenteric vein
- Left gastro-omental drains to the splenic

## Vascular Supply: Arteries



#### Vascular Supply: Veins



The prepyloric vein ascends over the pylorus to the right gastric vein. Surgeons use it for identifying the pylorus because it is easily identified.

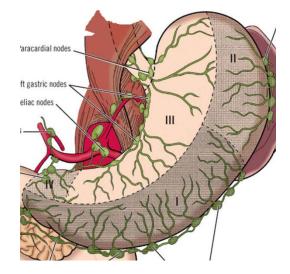
# The Stomach: Lymph drainage

- The gastric lymphatic vessels accompany the arteries along the greater and lesser curvatures of the stomach.
- They drain lymph from its anterior and posterior surfaces toward its curvatures, where the gastric and gastro-omental lymph nodes are located

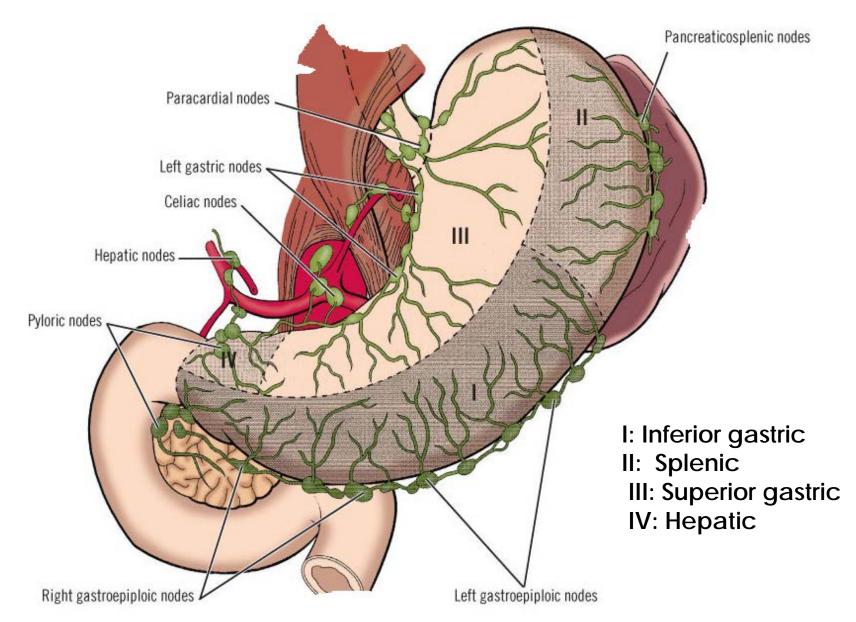
# The Stomach: Lymph drainage

#### Arranged into 4 zones

- i. Zone I (inferior gastric) drains into the subpyloric and omental nodes
- ii. Zone II (splenic) drains into the pancreaticosplenic nodes
- iii. Zone III (superior gastric) drains into the superior gastric nodes
- iv. Zone IV (hepatic) drains into the suprapyloric nodes
- Almost all eventually drains into the celiac group of lymph nodes



# The Stomach: Lymph drainage

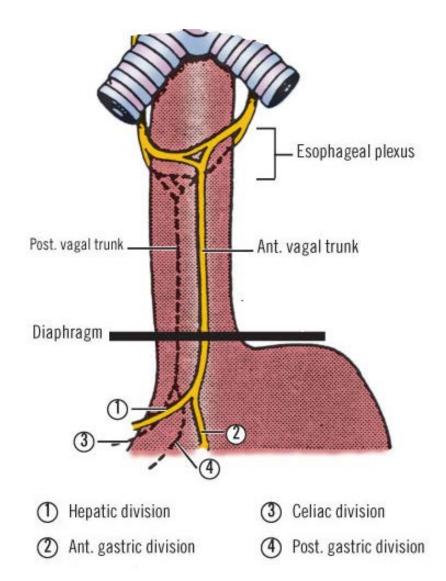


# Nerve supply

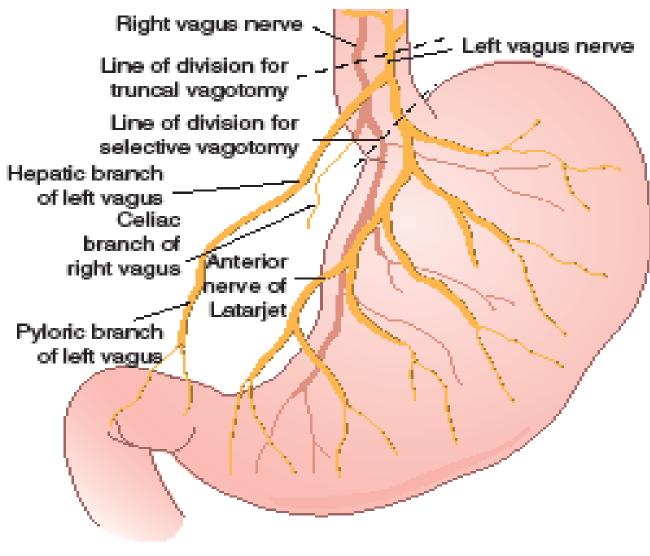
- Parasympathetic supply

   Anterior Vagus Trunk
   Posterior Vagus Trunk
- Sympathetic supply:
  - o Derived from T6-T9.
  - Through the Greater Splanchnic
     Nerve to the Coeliac Plexus and
     finally to the stomach

#### The vagus nerve



# Nerve supply

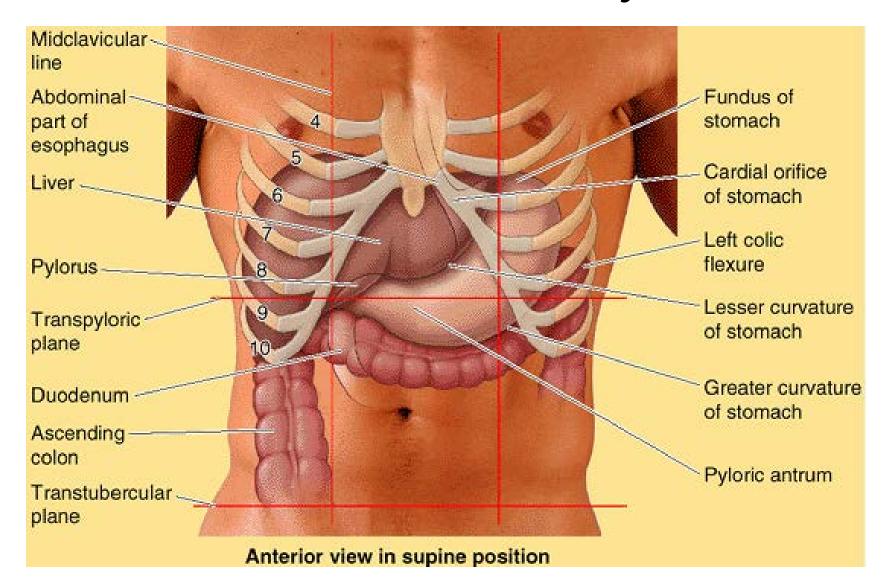


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#### Surface Anatomy

- **Cardial orifice:** posterior to the 6th left costal cartilage, 2 to 4 cm from the median plane at the level of the T11 vertebra. This is the most fixed part of the stomach.
- Fundus: posterior to the left 6th rib in the plane of the MCL.
- **Greater curvature**: which passes inferiorly to the left as far as the 10th left cartilage before turning medially to reach the pyloric antrum.
- Lesser curvature: which passes from the right side of the cardia to the pyloric antrum; the most inferior part of the curvature is marked by the angular incisure, which lies just to the left of the midline.
- **Pylorus** in the supine position: lies at the level of the 9th costal cartilages at the level of L1 vertebra; the pyloric orifice is approximately 1.25 cm left of the midline.
- **Pylorus** in the erect position: lies on the right side; its location varies from the L2 through L4 vertebra.

#### Surface Anatomy



#### Duodenum

- First part of the intestine
- Shortest part of the intestine: 25 cm
- Most fixed part of the intestine
- Begins at the pylorus (L2 Vertebral, 2-3 cm to the left)
- Ends at the duodenojejunal flexture
- Rougly c-shaped and relates to the pancreatic head
- Partly retroperitoneal

#### Duodenum: Divisions

- Superior (first) part: short (approximately 5 cm) and lies anterolateral to the body of the L1 vertebra.
- Descending (second) part: longer (7-10 cm) and descends along the right sides of the L1 to L3 vertebrae.
- Horizontal (third) part: 6-8 cm long and crosses the L3 vertebra.
- Ascending (fourth) part: short (5 cm) and begins at the left of the L3 vertebra and rises superiorly as far as the superior border of the L2 vertebra

- The first 2 cm of the duodenum is called the Ampula and it is the only part that has a mesentery
- The remaining parts have no mesentery and are therefore retroperitoneal and immobile

# Relations of the first part

- Posteriorly: common bile duct, portal vein, inferior vena cava, and gastroduodenal artery;
- Anteriorly: quadrate lobe of the liver;
- **Superiorly:** the epiploic foramen;
- Inferiorly: the head of the pancreas.

#### Duodenum: Second part

- Forms an acute angle with the first part
- Runs inferiorly around the head of the pancreas, to the right of the IVC
- Entirely retroperitoneal
- Receives the bile and pancreatric duct (pancreaticobiliary duct) at the Ampula of Vater at about its mid point, posteromedially

## Relations of the second part

- Superiorly: Gallbladder
- **Posteriorly**: to the hilum of the right kidney, the right ureter, the right renal vessels, the psoas major, and the edge of the inferior vena cava.
- Anteriorly to the right lobe of the liver, the transverse colon, and the jejunum.
- **Right side** is related to the ascending colon and the right colic flexure.

## The Horizontal (3<sup>rd</sup>) Part

- Begins about 5 cm from the midline, to the right of the lower end of the third lumbar vertebra, at about the level of the subcostal plane
- Measures 10 cm in length
- Crosses from the right to the left

#### The Horizontal (3<sup>rd</sup>) Part: Relations

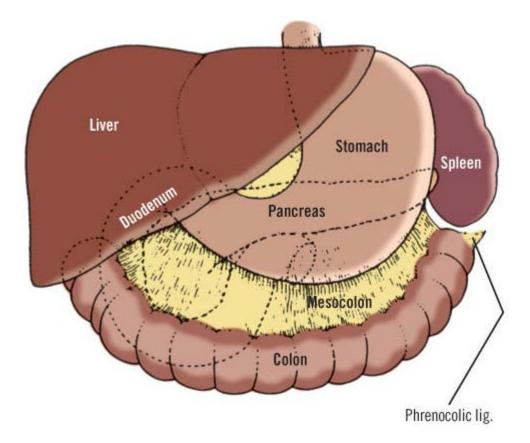
- Anteriorly: Superior mesenteric vessels and the root of the mesentery and the jejunum.
- **Posteriorly**: ureter, the right gonadal vessels, the psoas muscle, the inferior vena cava, the lumbar vertebral column, and the aorta.
- Superiorly: The head and the uncinate process of the pancreas. The inferior pancreaticoduodenal artery lies in a groove at the interface of the pancreas and the duodenum.
- Inferiorly: the small bowel, primarily to the jejunum.
- It ends to the left of the third lumbar vertebra.

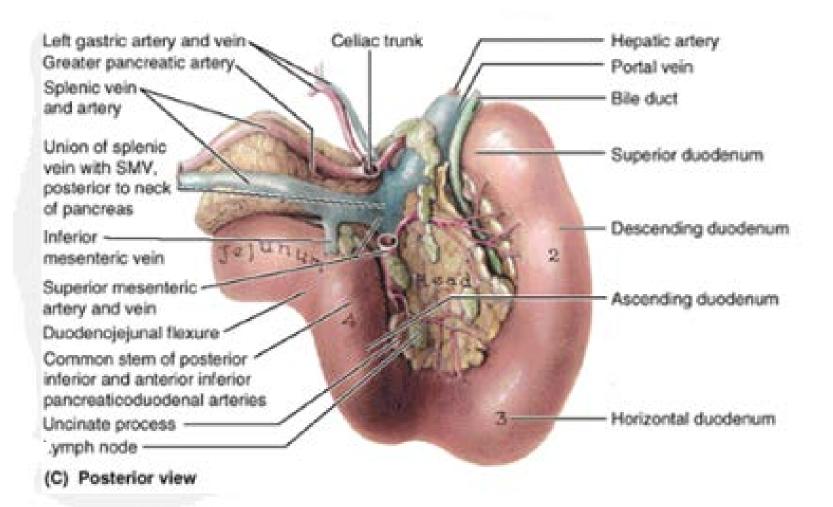
# 4<sup>th</sup> or ascending duodenum

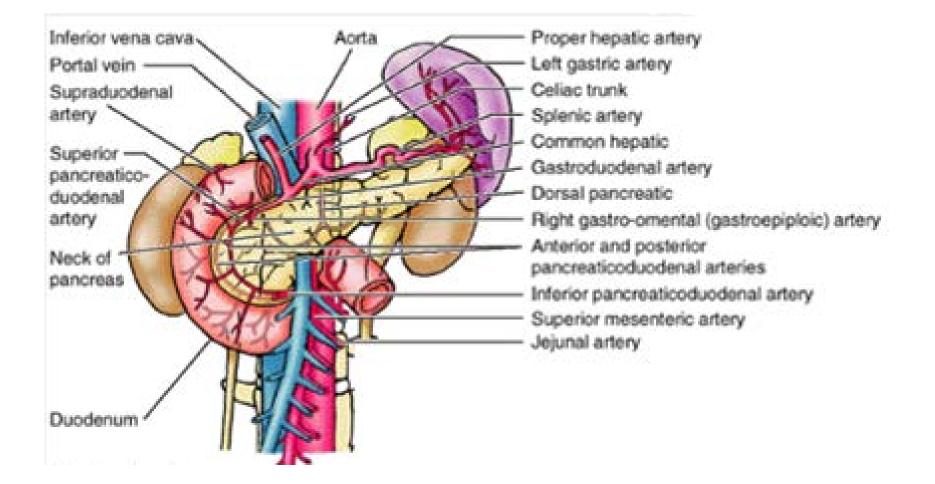
- Directed obliquely upward.
- Ends at the duodenojejunal junction to the left and at the level of the second lumbar vertebra at the root of the transverse mesocolon

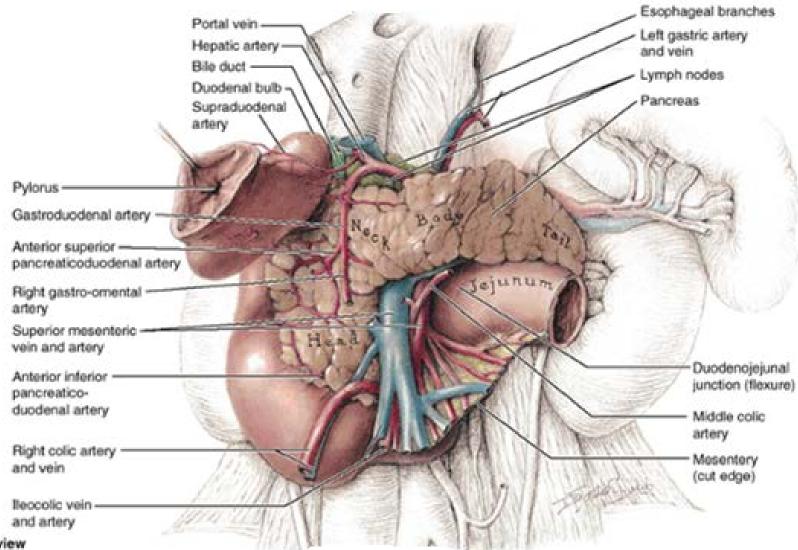
# 4<sup>th</sup> or ascending duodenum

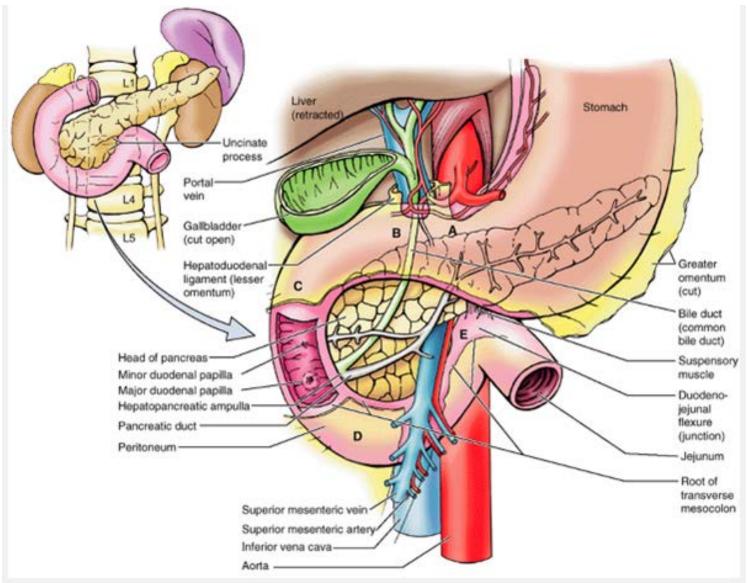
- **Posteriorly** to the left sympathetic trunk, the psoas muscle, and the left renal and gonadal vessels.
- Laterally (to the left): Terminal part of the inferior mesenteric vein, the left ureter, and the left kidney.
- The duodenojejunal junction is suspended by the ligament of Treitz, a remnant of the dorsal mesentery, which extends from the duodenojejunal flexure to the right crus of the diaphragm
- The upper end of the root of the mesentery also attaches close to the junction.

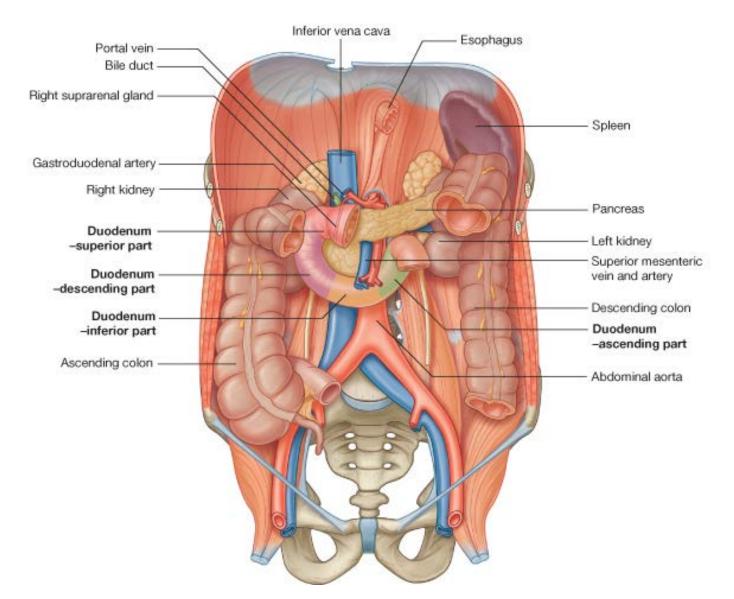




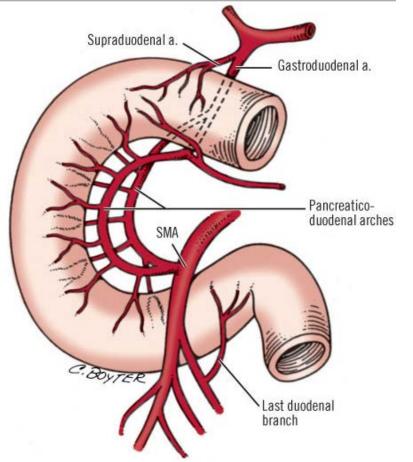








# Duodenum: Arterial supply

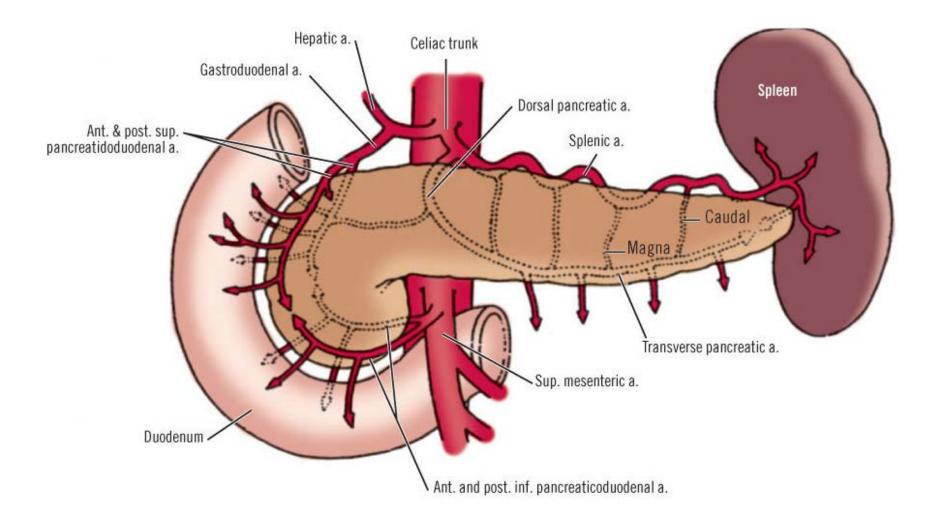


- Branches of Celiac trunk and the superior mesenteric artery
- Celiac trunk: gastroduodenal artery and its branch, the superior

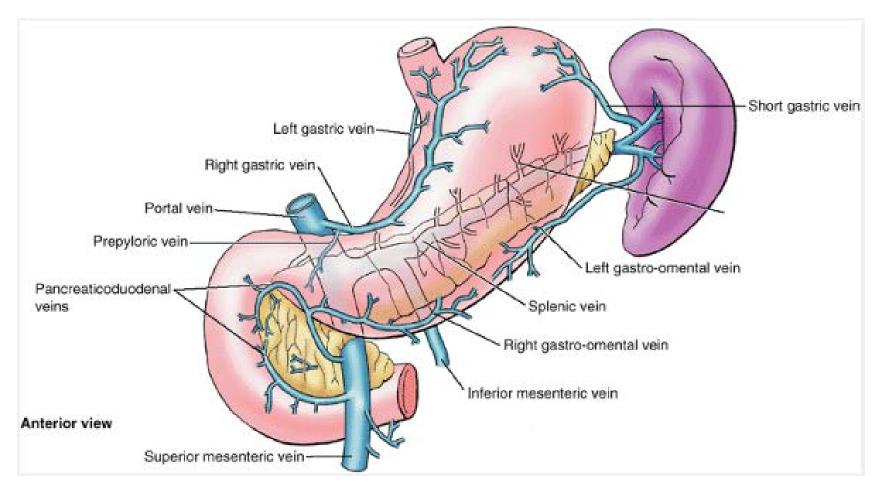
pancreaticoduodenal artery

 SMA: inferior pancreaticoduodenal artery
 Note: demarcation between CT and SMA is the entry of the bile duct

## Duodenum: Arterial supply



## Venous supply



• The veins follow the arteries

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