

Cardiovascular system

DR. AHMED SALMAN

Associate professor of anatomy & embryology

Cardiovascular system

```
graph TD; A[Cardiovascular system] --> B[Heart]; A --> C[Blood vessels];
```

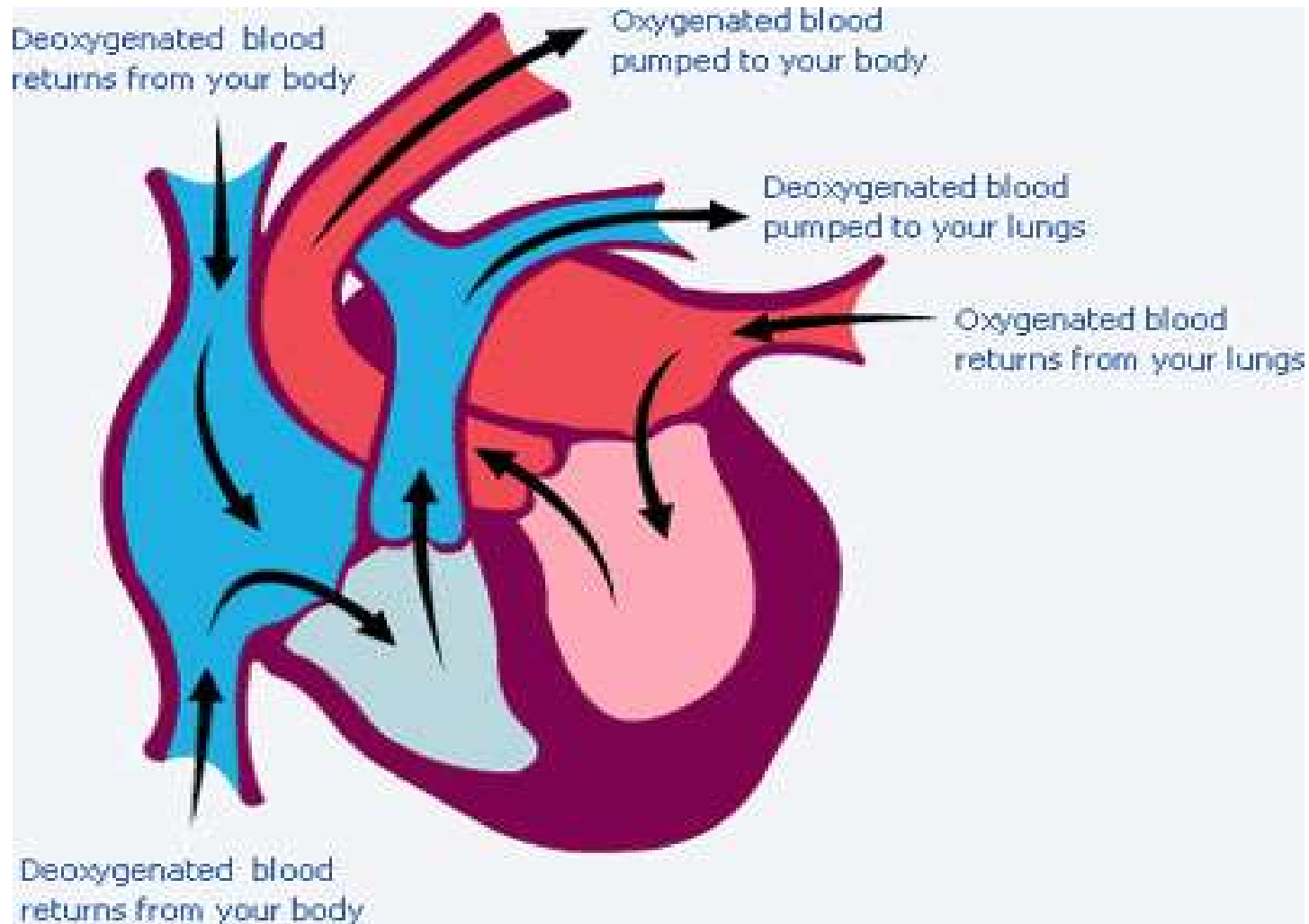
Heart

Pumps blood over the body

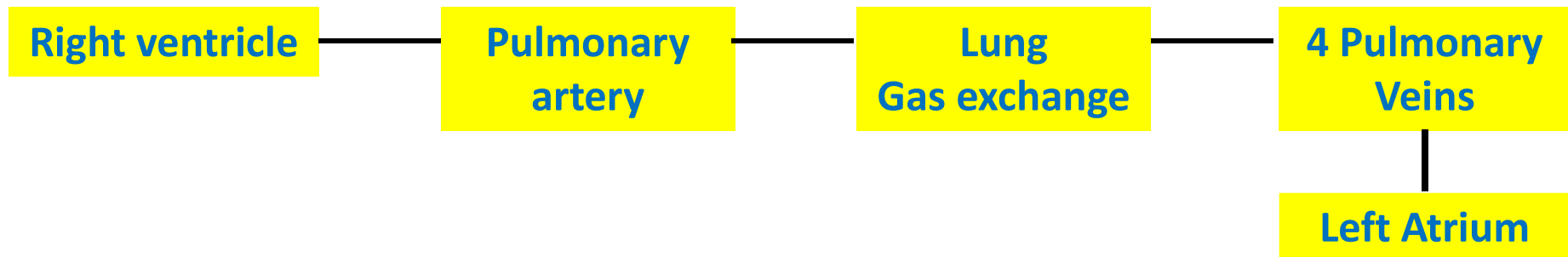
Blood vessels

Circulate the blood to all parts of the body

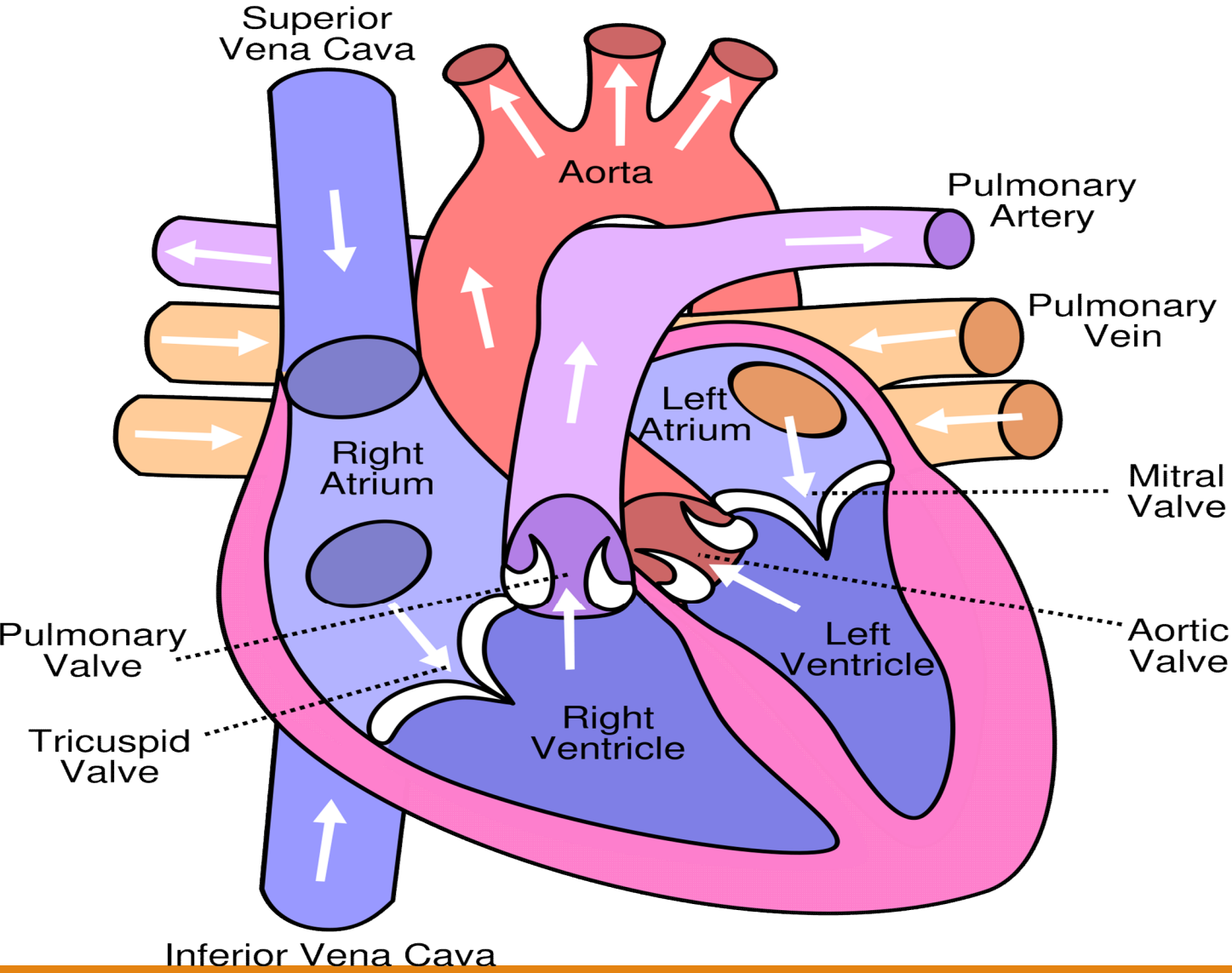
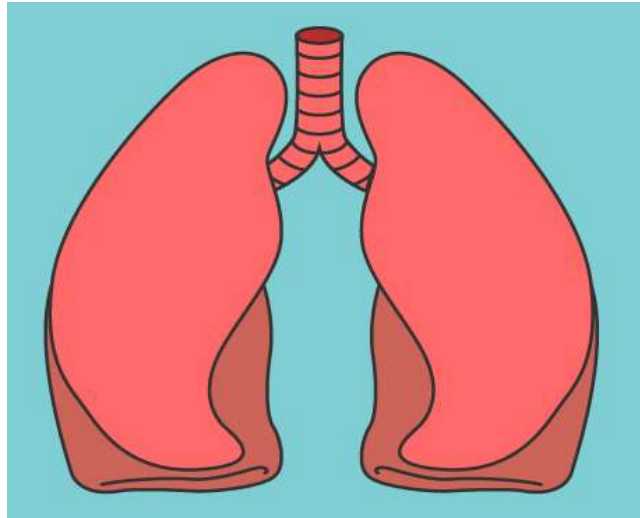
The function cardiovascular system is to carry oxygen and nutrients and to eliminate carbon dioxide and other waste products from the body.



Pulmonary Circulation

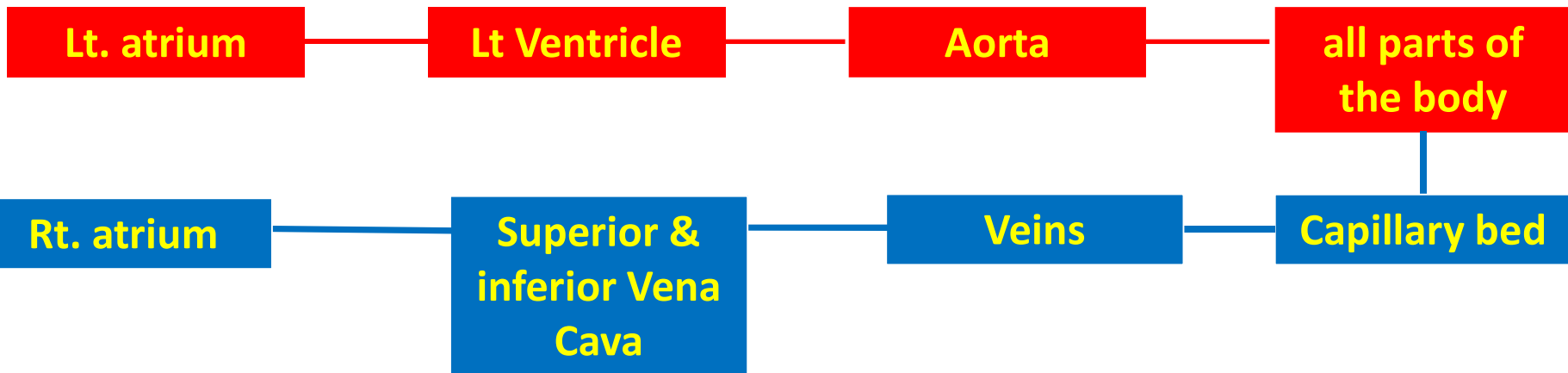


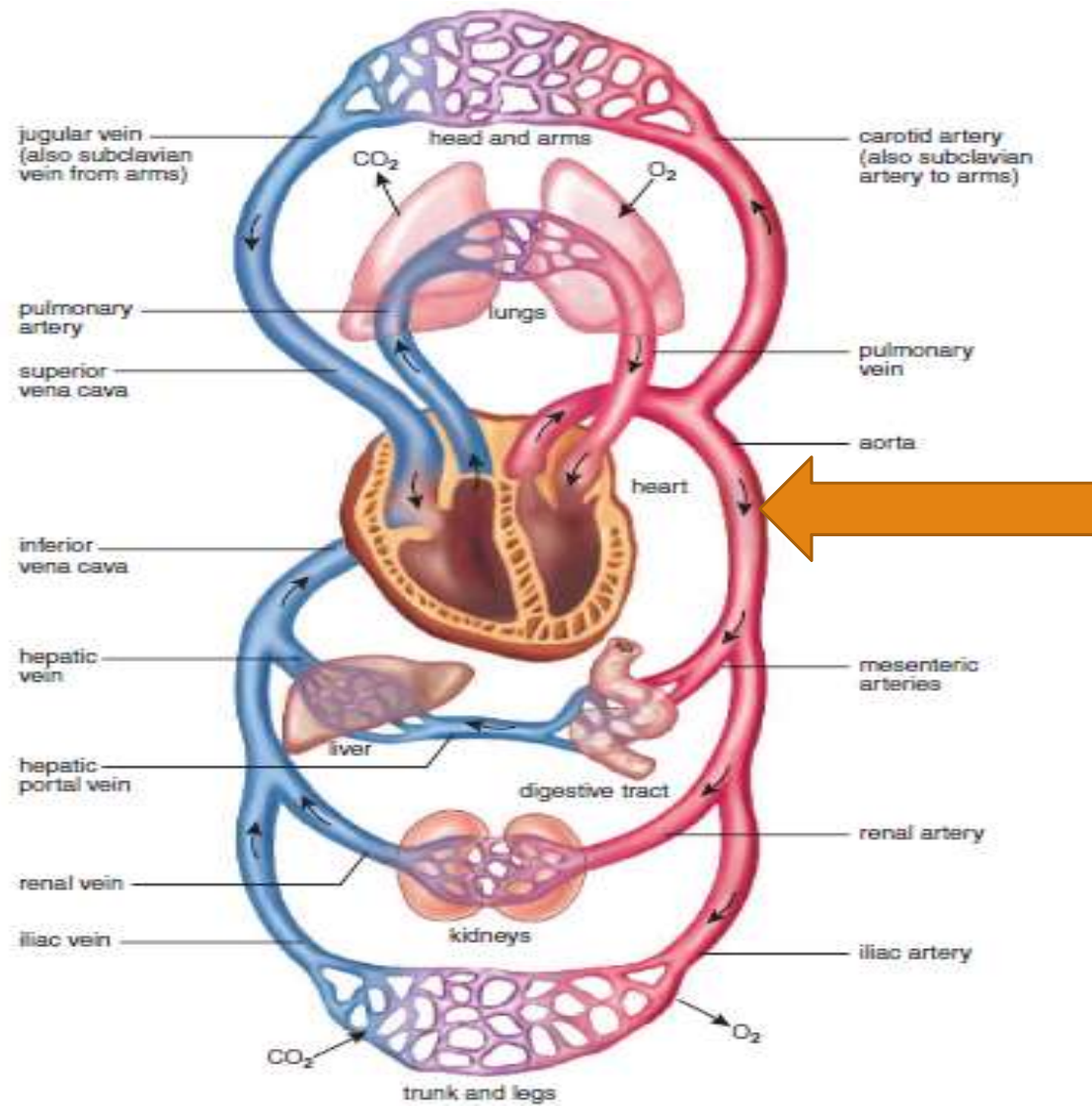
- Pulmonary veins are the only veins that carry oxygenated blood
- Pulmonary arteries are the only arteries that carry deoxygenated blood



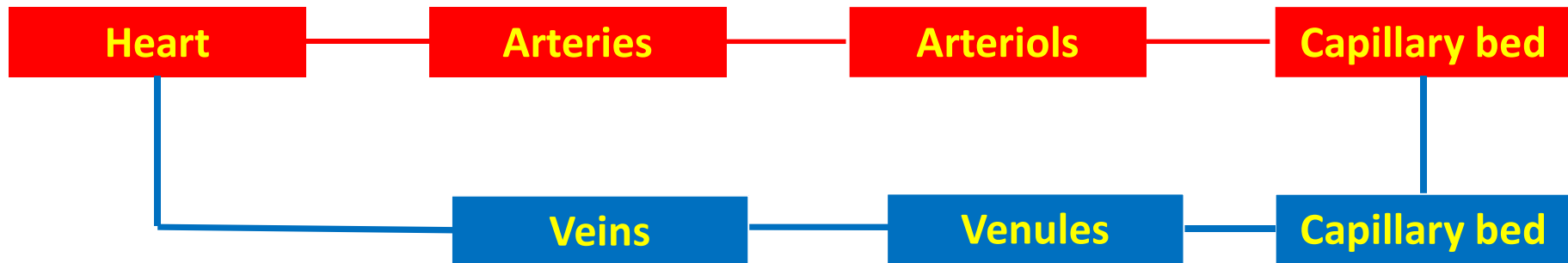
Systemic Circulation

It carries the oxygenated blood from the heart to the body.
And return deoxygenated blood from the body to heart.

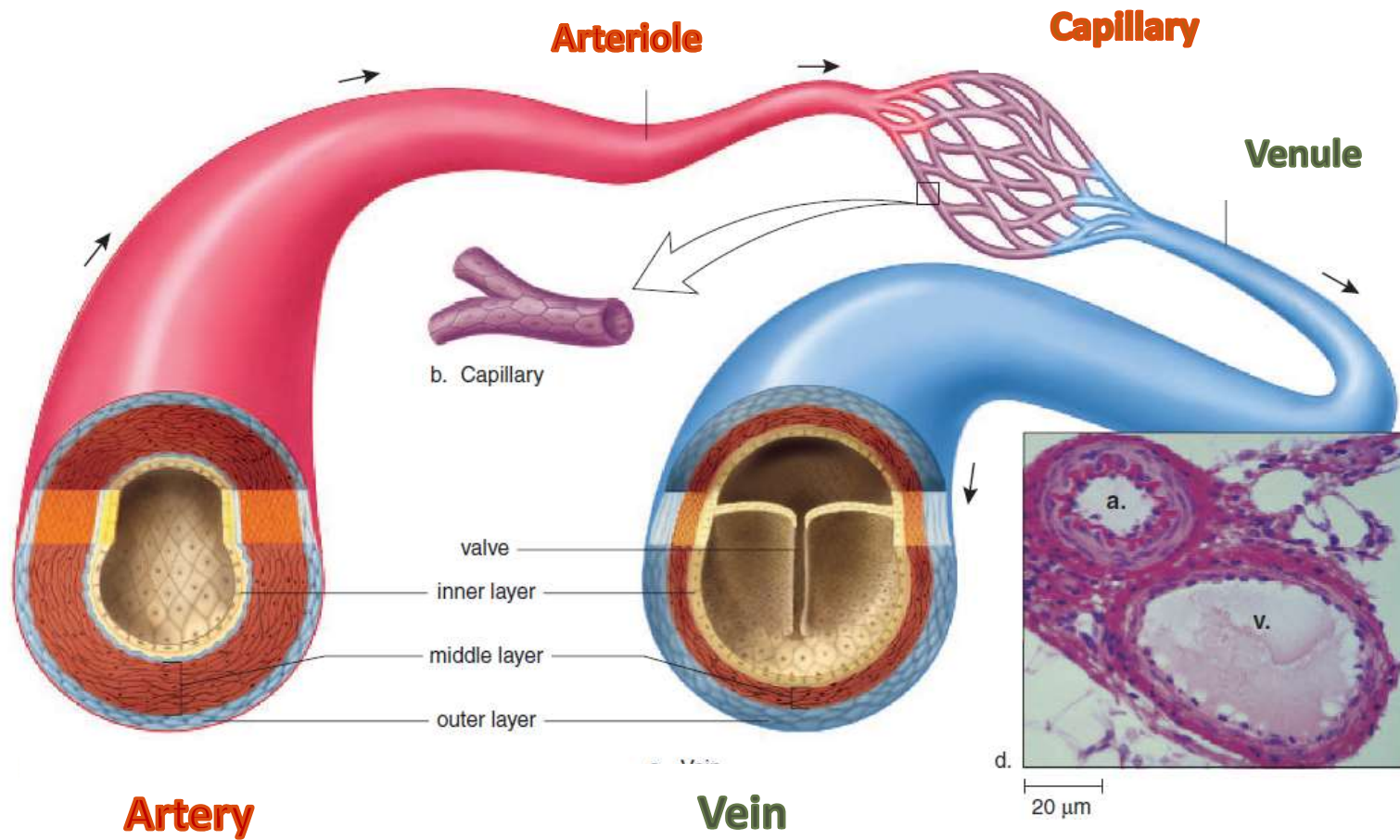




Peripheral Circulation

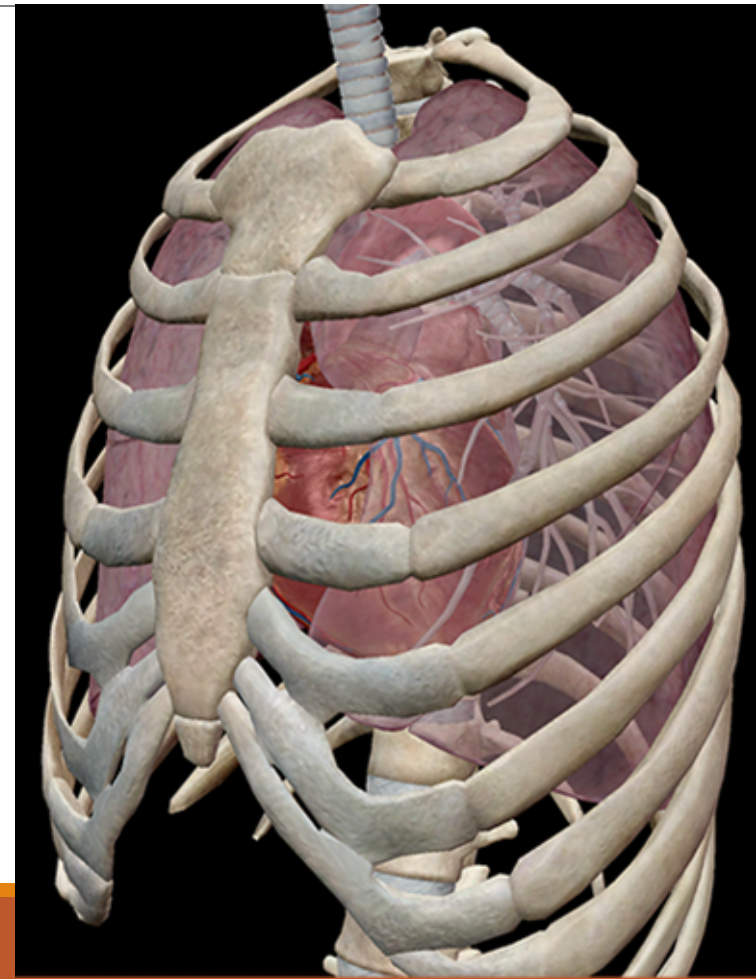


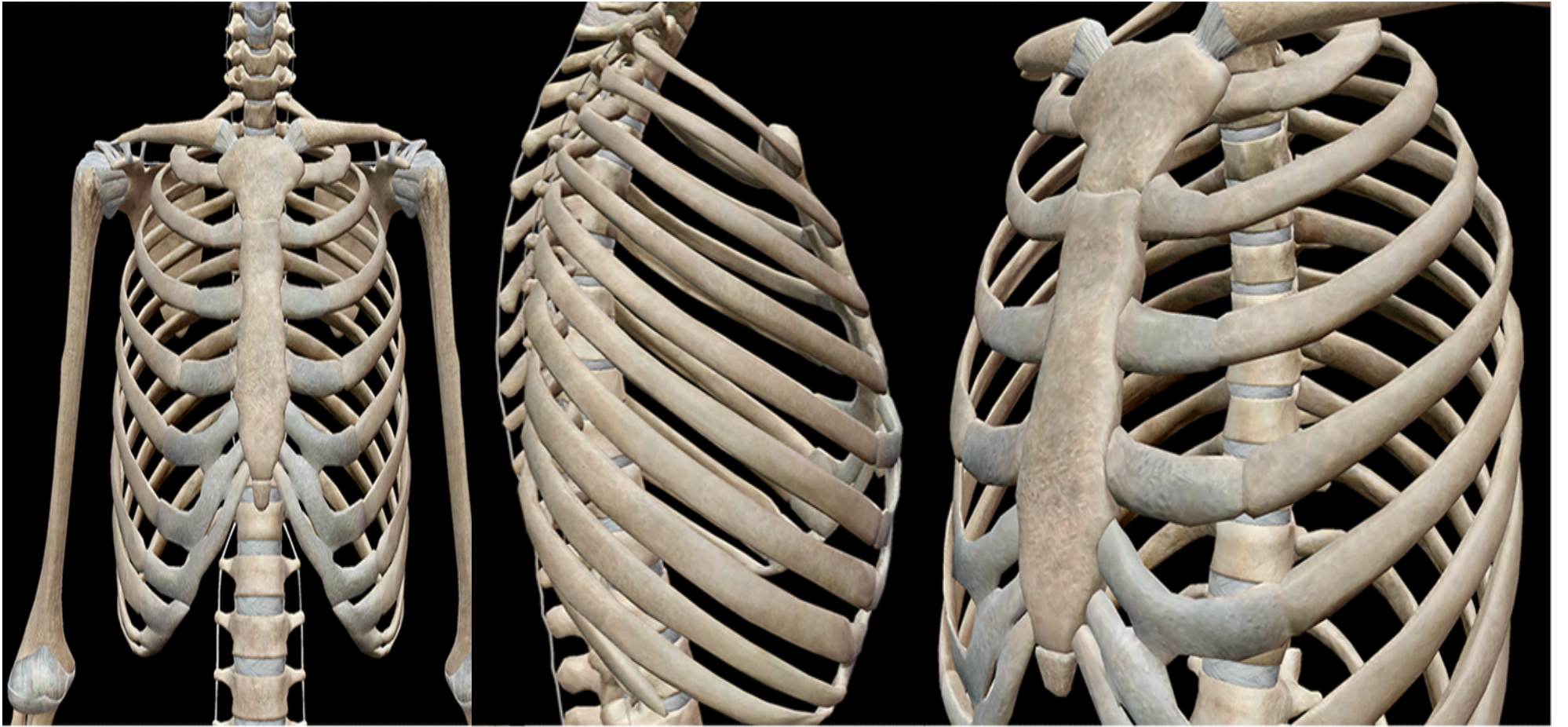
- ✓ Blood flow in capillaries is regulated by smooth muscle sphincter called precapillary sphincter
- ✓ Vein with large diameter have valves that allow blood flow in one direction only (to the heart)



Thoracic cavity

- ❑ It bounded by thoracic cage (Sternum ,ribs and vertebrae),diaphragm.
- ❑ It extends upward into the root of the neck
About one finger breadth above the clavicle on each side
- ❑ It contains two pleural cavities containing lungs and mediastinum





Watch this video

<https://www.youtube.com/watch?v=FSbQHigjCG4&t=4s>

Mediastinum

It is the region between the two pleural cavities.

Boundaries :

Superior: Thoracic Inlet

Inferior: Diaphragm

Anterior: Sternum

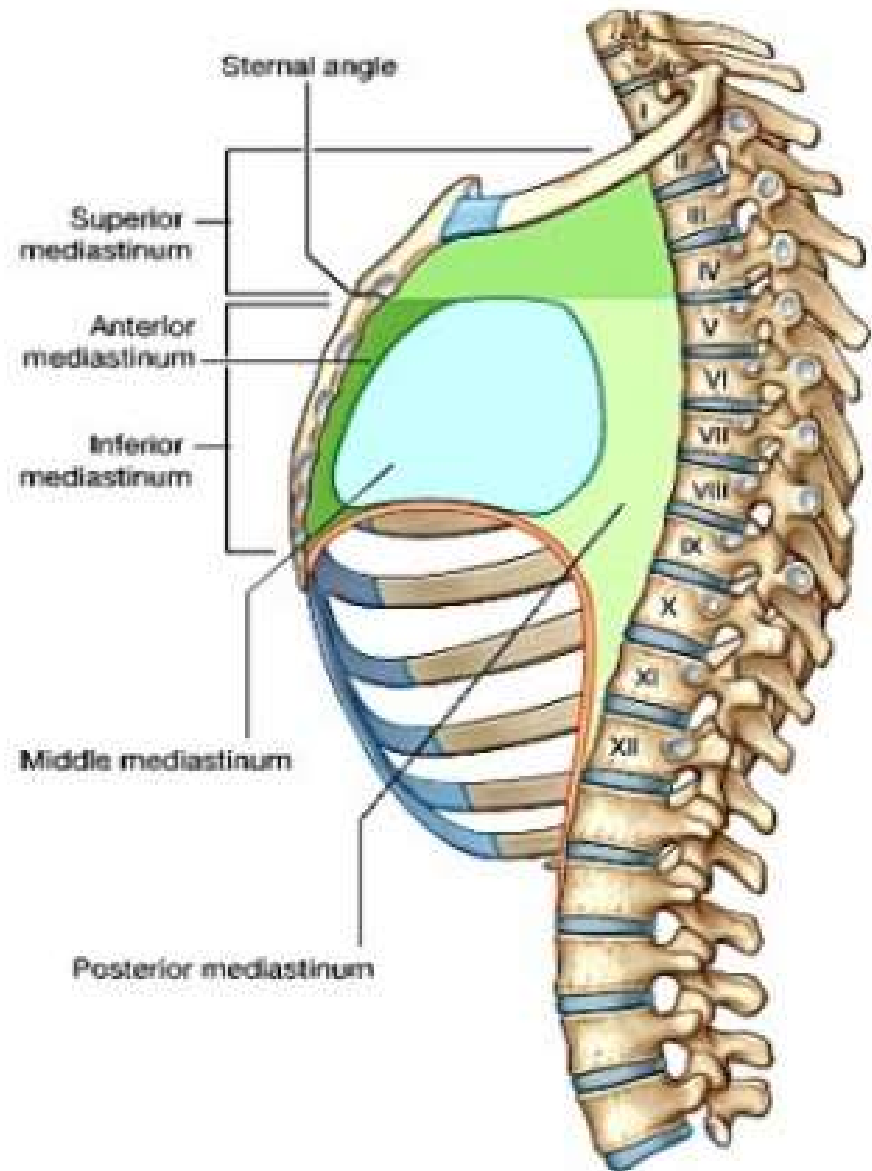
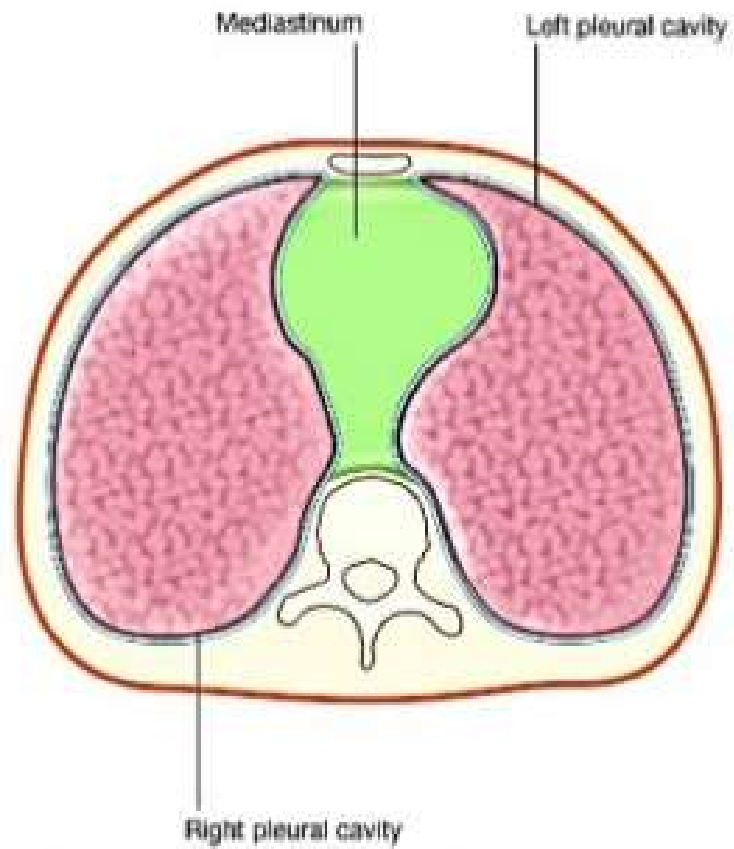
Posterior: Vertebral column

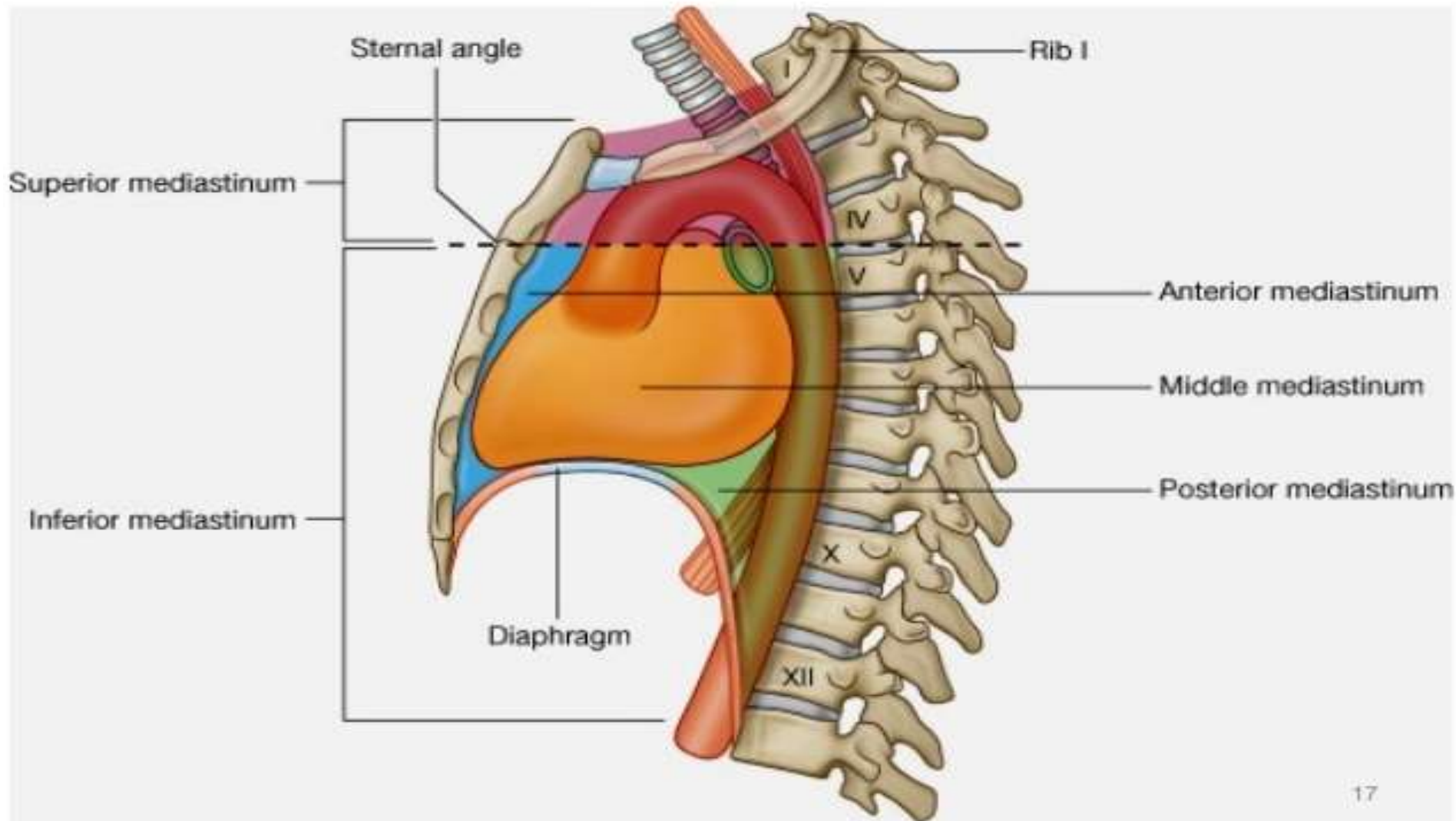
REED ONLY

N.B:

Anatomists refer to the superior thoracic aperture as the thoracic inlet because non-circulating substances (air and food) may enter the thorax only through this aperture.

When clinicians refer to the superior thoracic aperture as the thoracic outlet, they are emphasizing the arteries and T1 spinal nerves that emerge from the thorax through this aperture to enter the lower neck and upper limbs





Subdivisions

Division :

An imaginary line from sternal angle to lower border of 4th thoracic vertebra divide mediastinum into :

- ✓ **Superior mediastinum** above the line and inferior mediastinum below the line.
- ✓ **Inferior mediastinum** divided into ;
 - **Middle mediastinum** contains heart and pericardium
 - **Anterior mediastinum** in front middle mediastinum
 - **Posterior mediastinum** behind middle mediastinum

Mediastinum

```
graph TD; A[Mediastinum] --> B[Superior]; A --> C[Inferior]; C --> D[Anterior]; C --> E[Middle]; C --> F[Posterior]
```

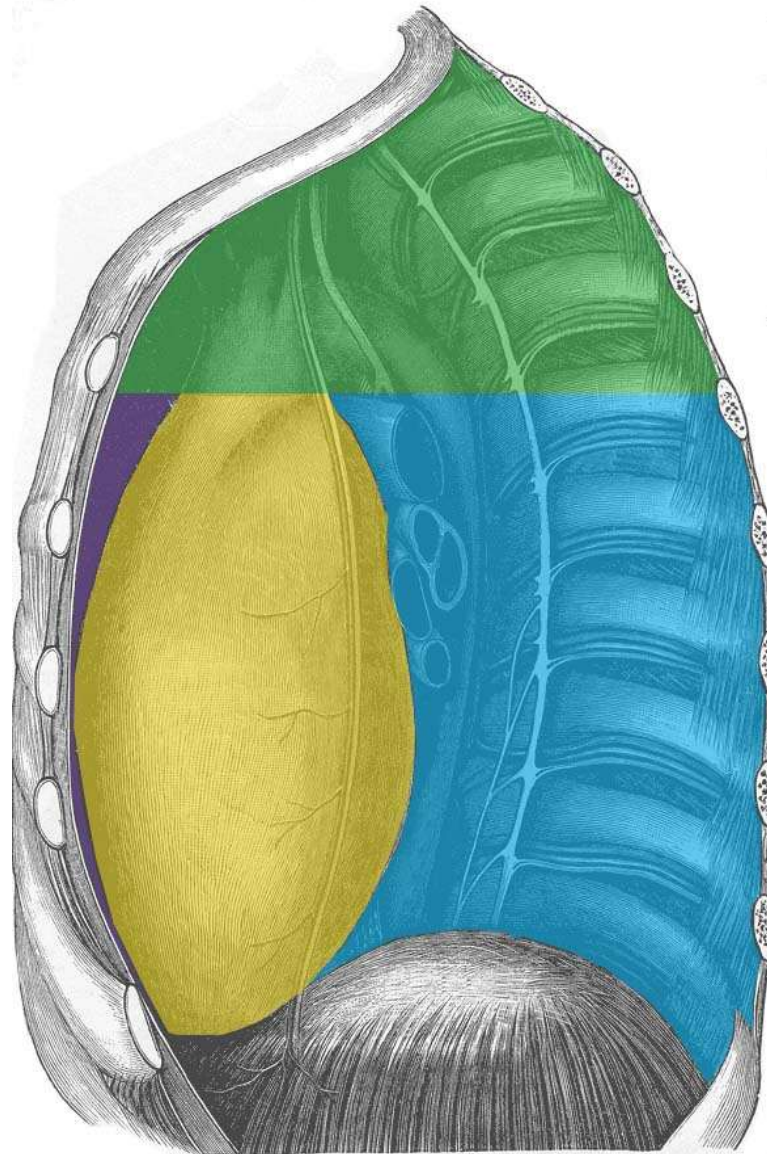
Superior

Inferior

Anterior

Middle

Posterior



- Superior mediastinum
- Anterior mediastinum
- Middle mediastinum
- Posterior mediastinum

The Superior mediastinum

Boundaries:

Anteriorly: manubrium sterni.

Posteriorly: upper four thoracic vertebrae.

Superiorly: thoracic inlet.

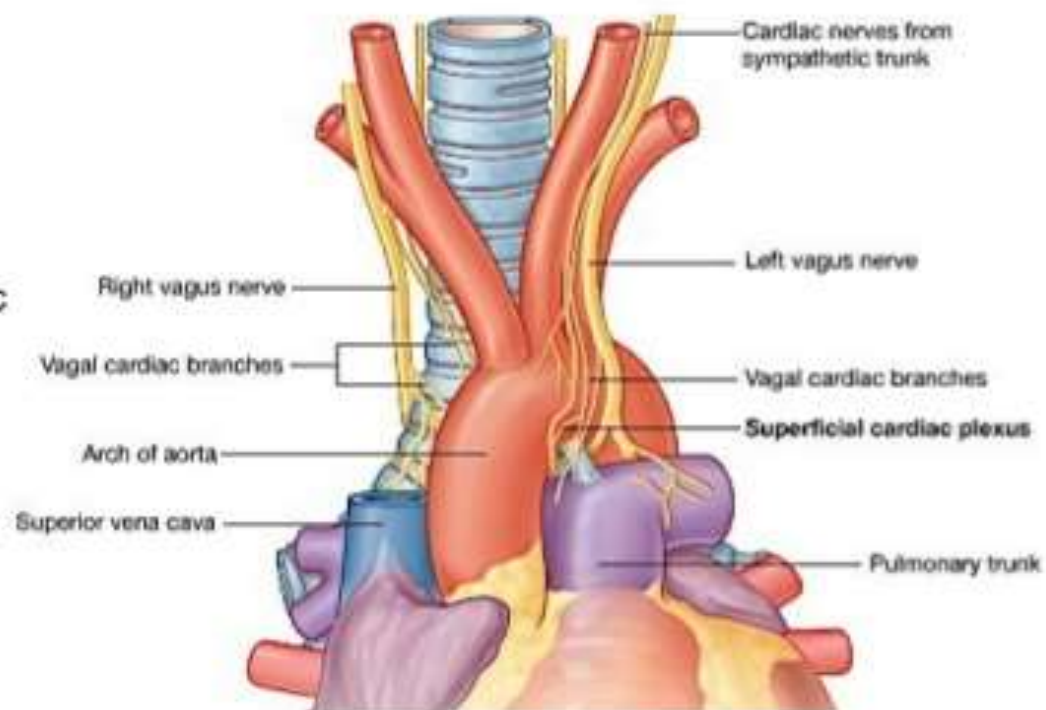
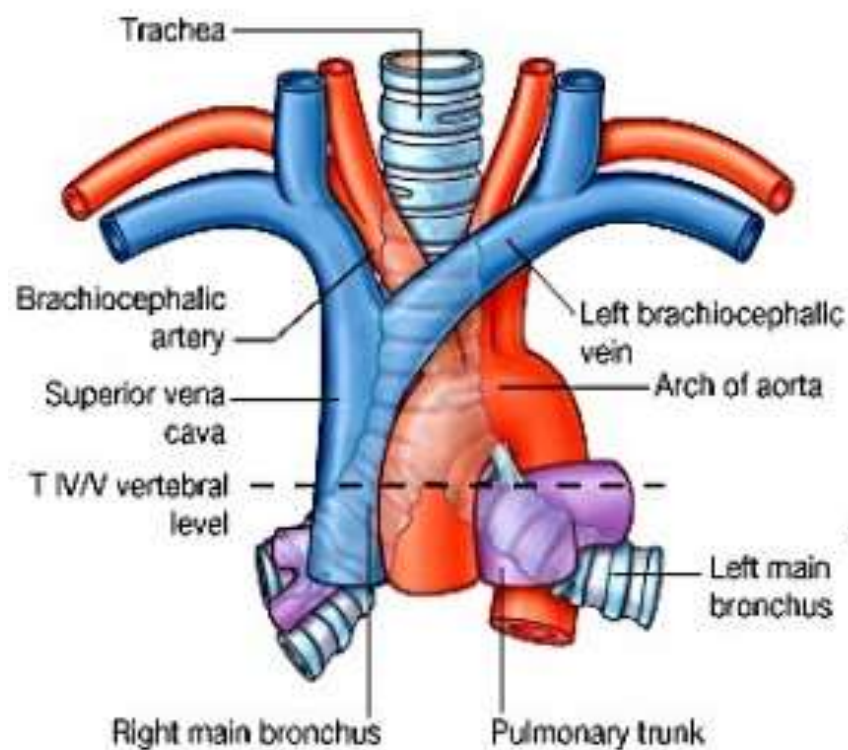
Inferiorly: imaginary plane.

On each side: mediastinal pleura.

Contents of superior Mediastinum

- 1- Arch of Aorta and its branches
- 2- Brachiocephalic veins and superior vena cava
- 3- Thoracic duct
- 4- Thymus
- 5- Phrenic and vagus nerves
- 6- Trachea
- 7- Oesophagus

Superior Mediastinum - contents



Brachiocephalic vein (Right and left)

Formation : By union internal jugular and subclavian veins

Beginning : Posterior to the sternoclavicular joint

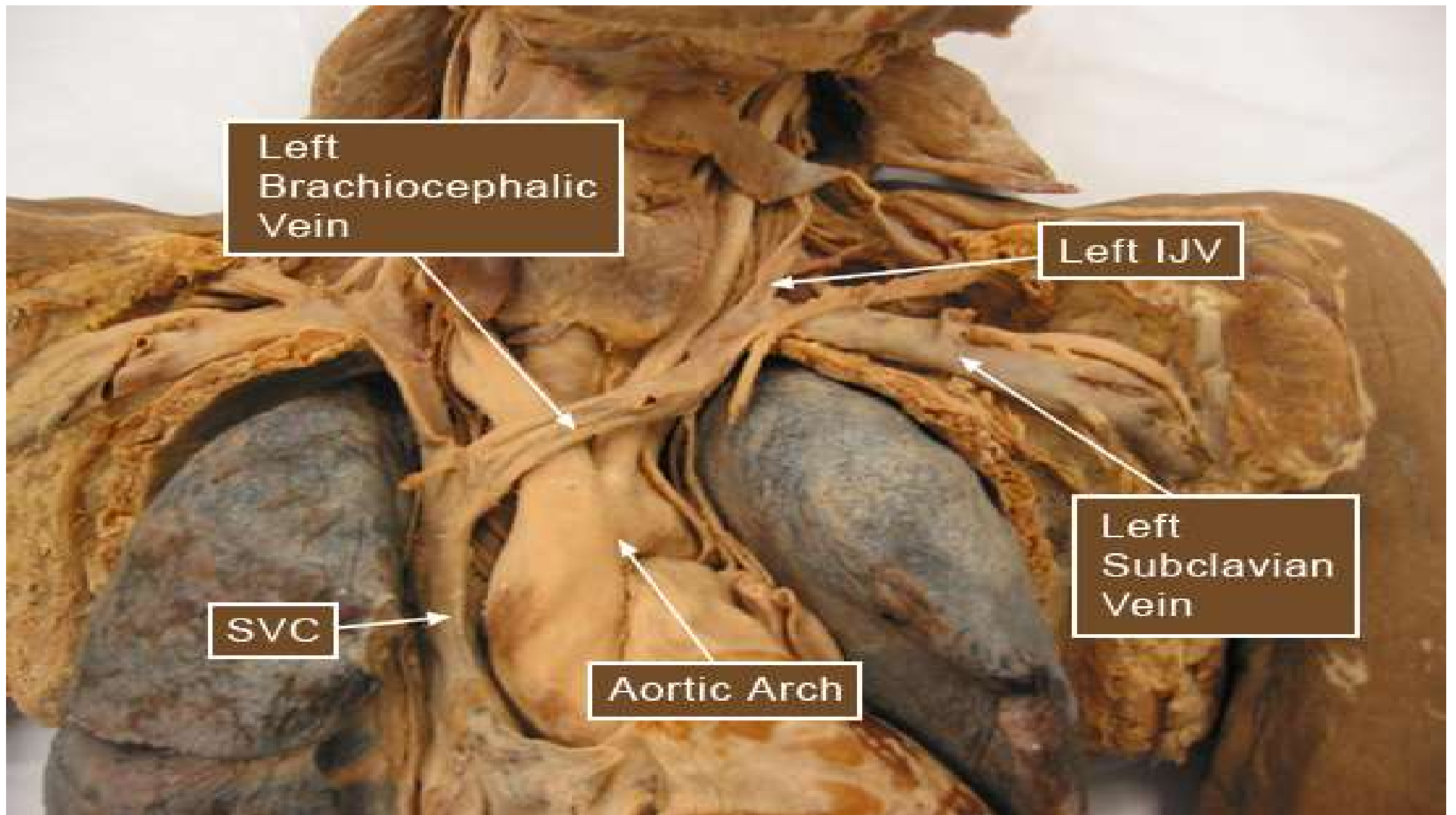
Termination : 1st right costal cartilage

Both right and left Brachiocephalic veins joined together to form superior venae cava

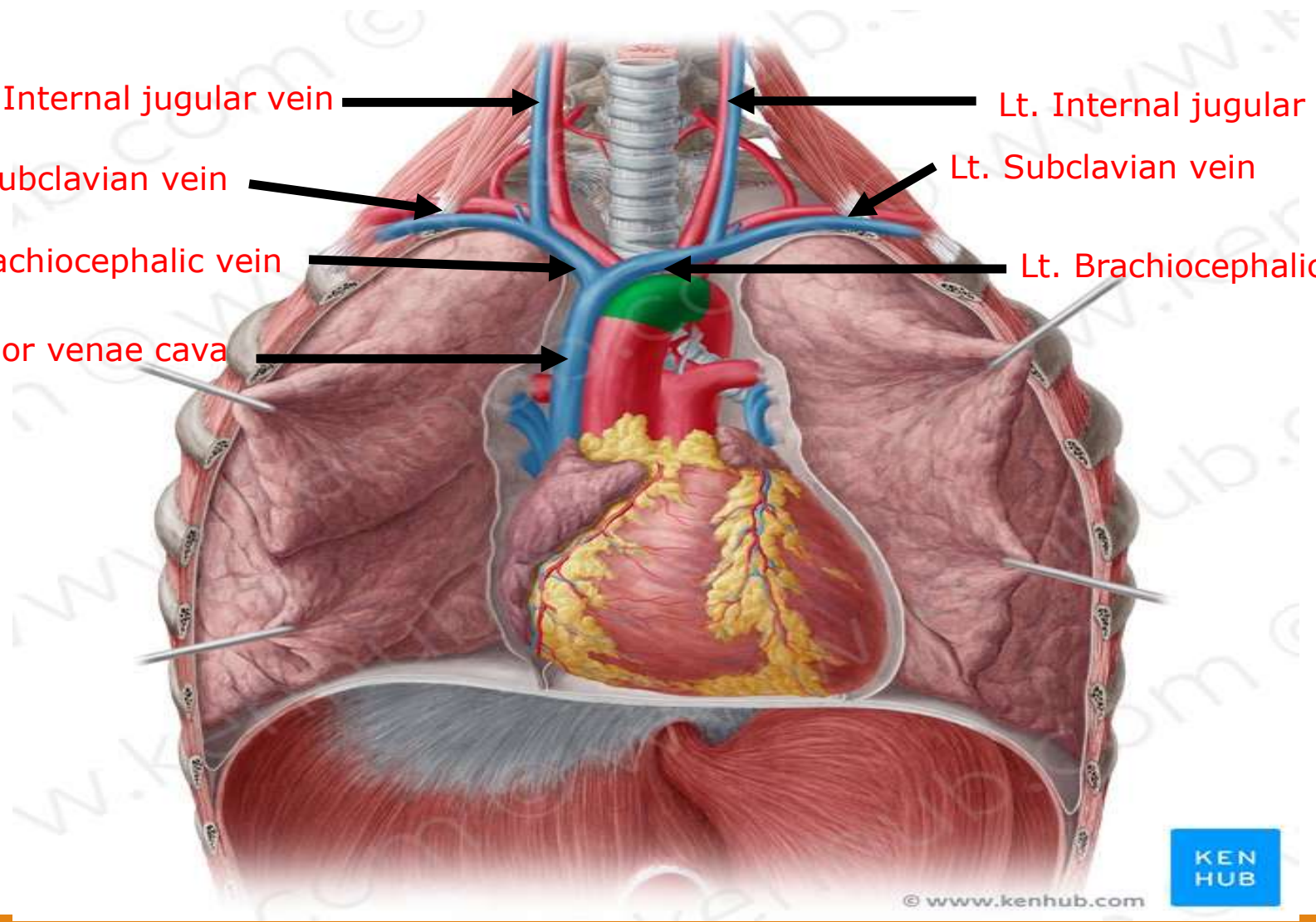
N.B : The left Brachiocephalic vein is longer than the right

Brachiocephalic vein **WHY ??**

It passes from the left to the right side, anterior to the roots of the three major branches of the arch of the aorta

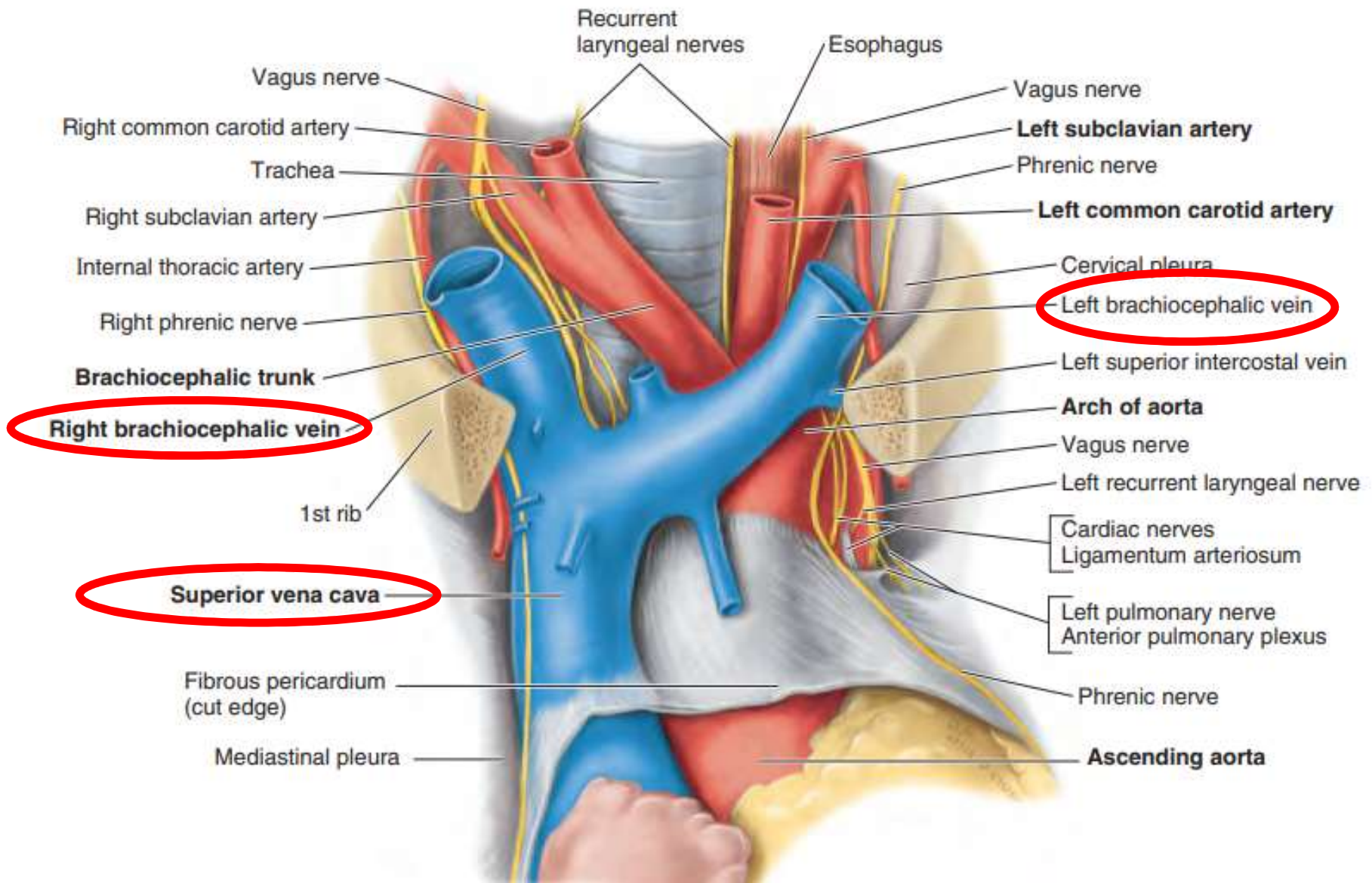


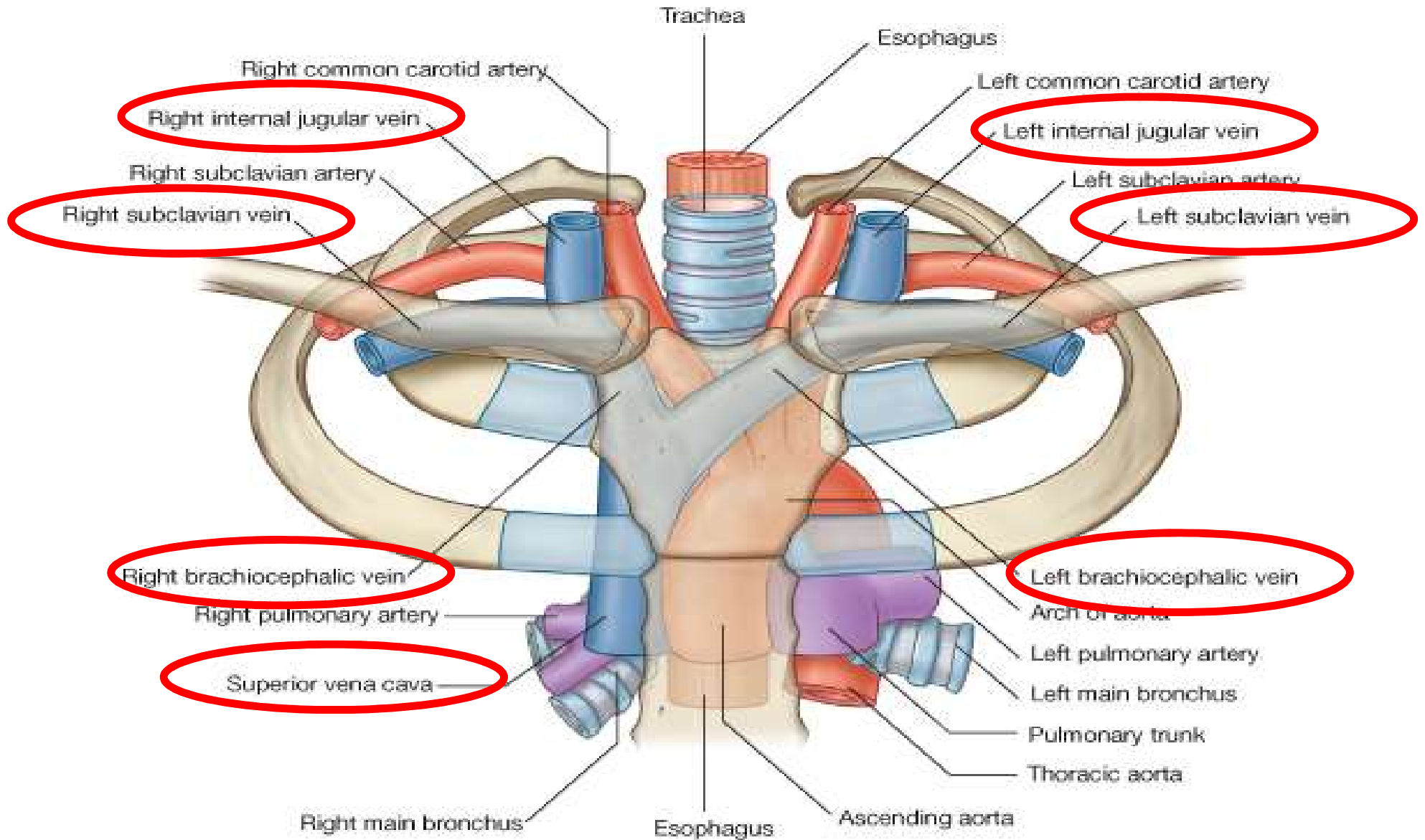
Rt. Internal jugular vein → ← Lt. Internal jugular vein
Rt. Subclavian vein ← Lt. Subclavian vein
Rt. Brachiocephalic vein ← Lt. Brachiocephalic vein
Superior venae cava →



© www.kenhub.com







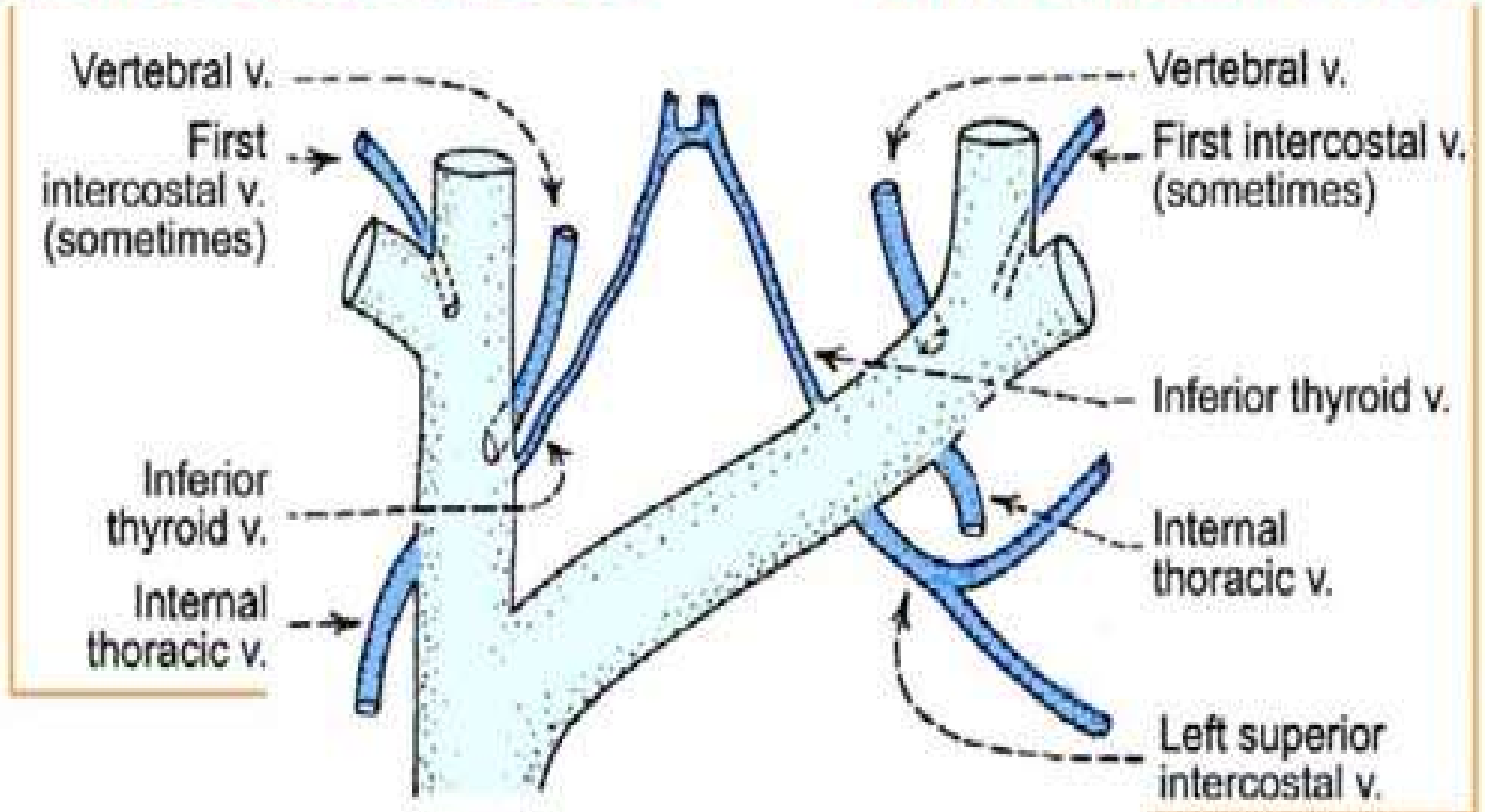
© Elsevier. Drake et al: Gray's Anatomy for Students - www.studentconsult.com

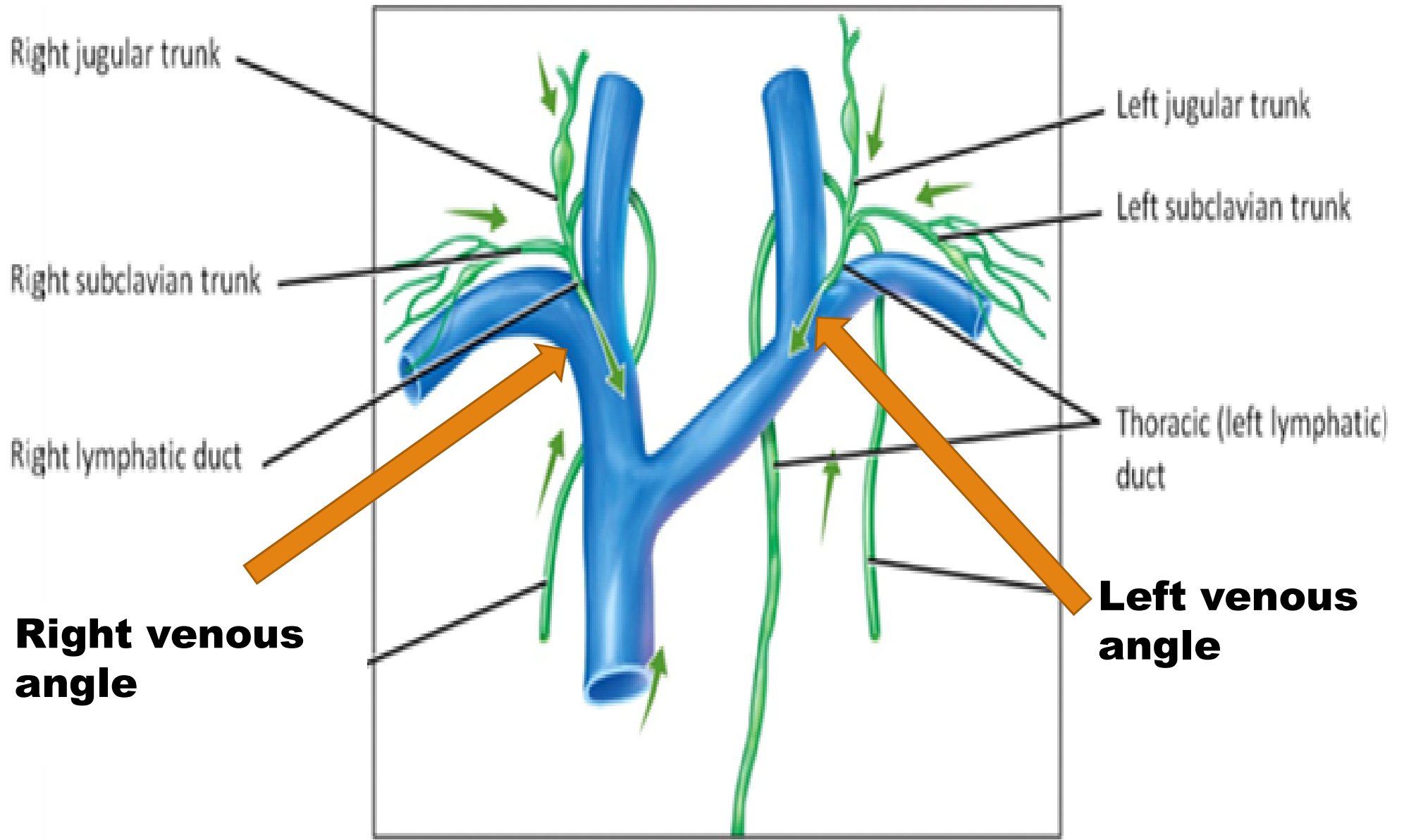
Tributaries of Brachiocephalic vein

Rt. Brachiocephalic vein	Lt. Brachiocephalic vein
Right vertebral vein	Left vertebral vein
Inferior thyroid vein	Inferior thyroid vein
Right Internal thoracic vein	Left Internal thoracic vein
Right first posterior intercostal	Left first posterior intercostal vein
	Left superior intercostal vein

Tributaries of RIGHT BRACHIOCEPHALIC VEIN

Tributaries of LEFT BRACHIOCEPHALIC VEIN





Superior venae cava

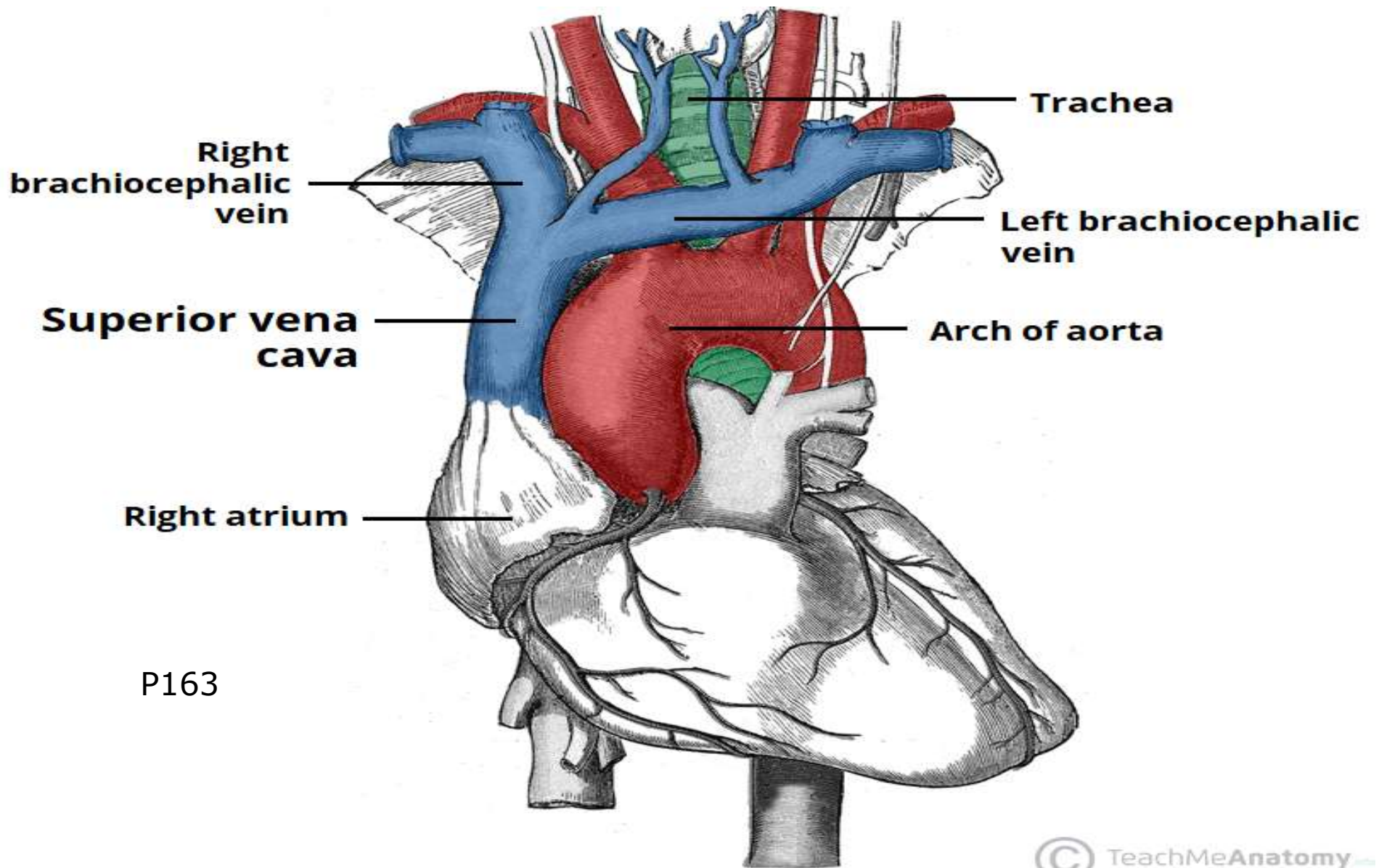
Formation : By union the right and left Brachiocephalic veins

Beginning : 1st right costal cartilage

Termination : 3rd right costal cartilage

as it enters the right atrium of the heart

It receives the venous return from the upper half of the body,
above the diaphragm



P163

Arteries of the superior mediastinum

I-Arch of the aorta

Beginning : Right border of sternum at 2nd right costal cartilage

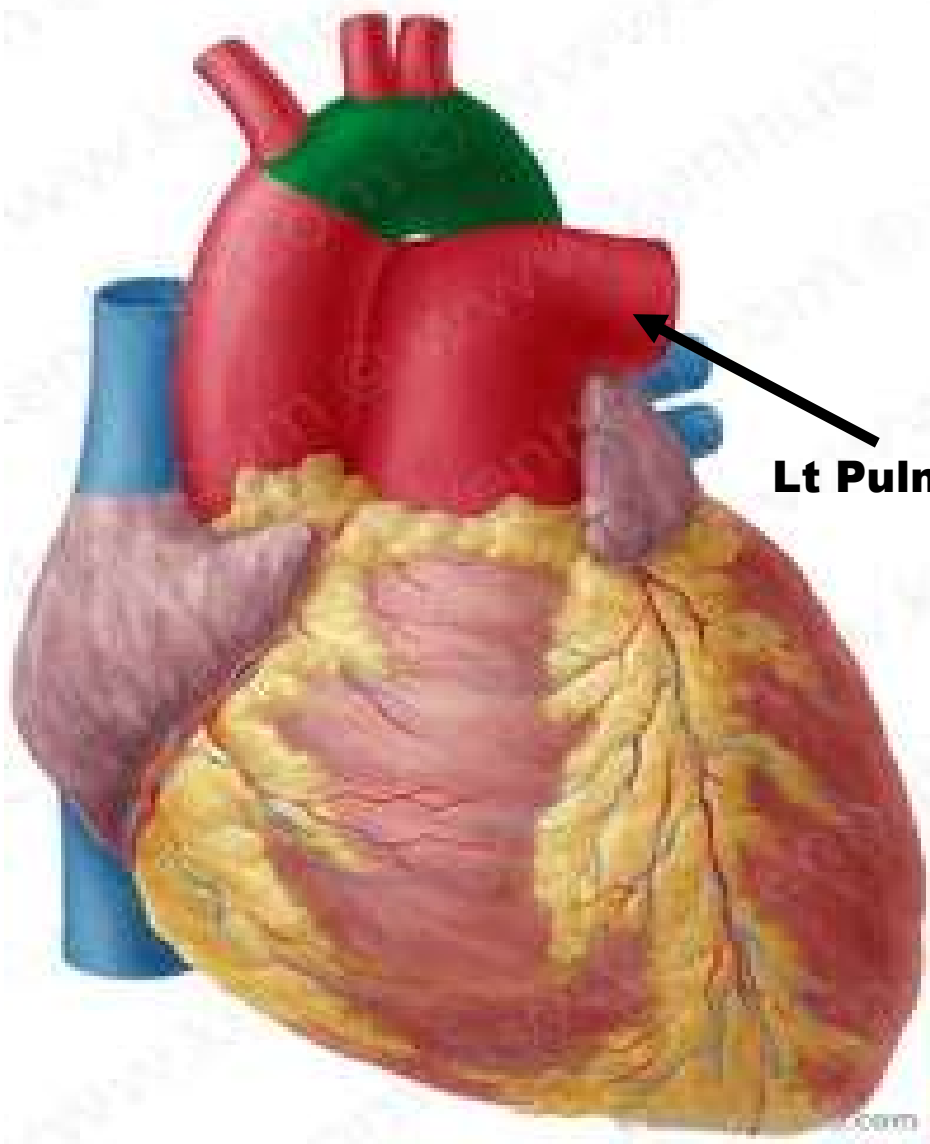
Termination: Lower border 4th thoracic vertebra
by becoming the thoracic (descending) aorta

Course:

- It arches superiorly, posteriorly and to the left, and then inferiorly.
- The arch ascends anterior to the right pulmonary artery and the bifurcation of the trachea.
- It passes over the root of the left lung to become at the left side of the trachea and esophagus

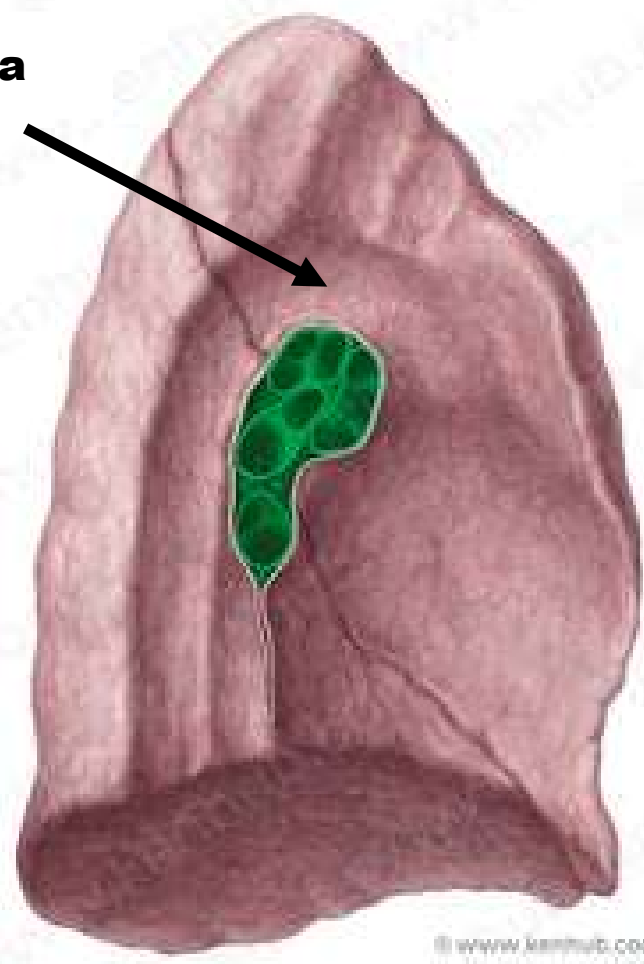
N.B The ligamentum arteriosum :

- it is the remnant of the fetal ductus arteriosus.
- It passes from the root of the left pulmonary artery to the inferior surface of the arch of the aorta

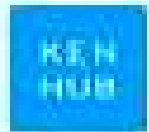


Arch of Aorta

Lt Pulmonary A



© www.kenhub.com



Relations

Anteriorly and to the left:

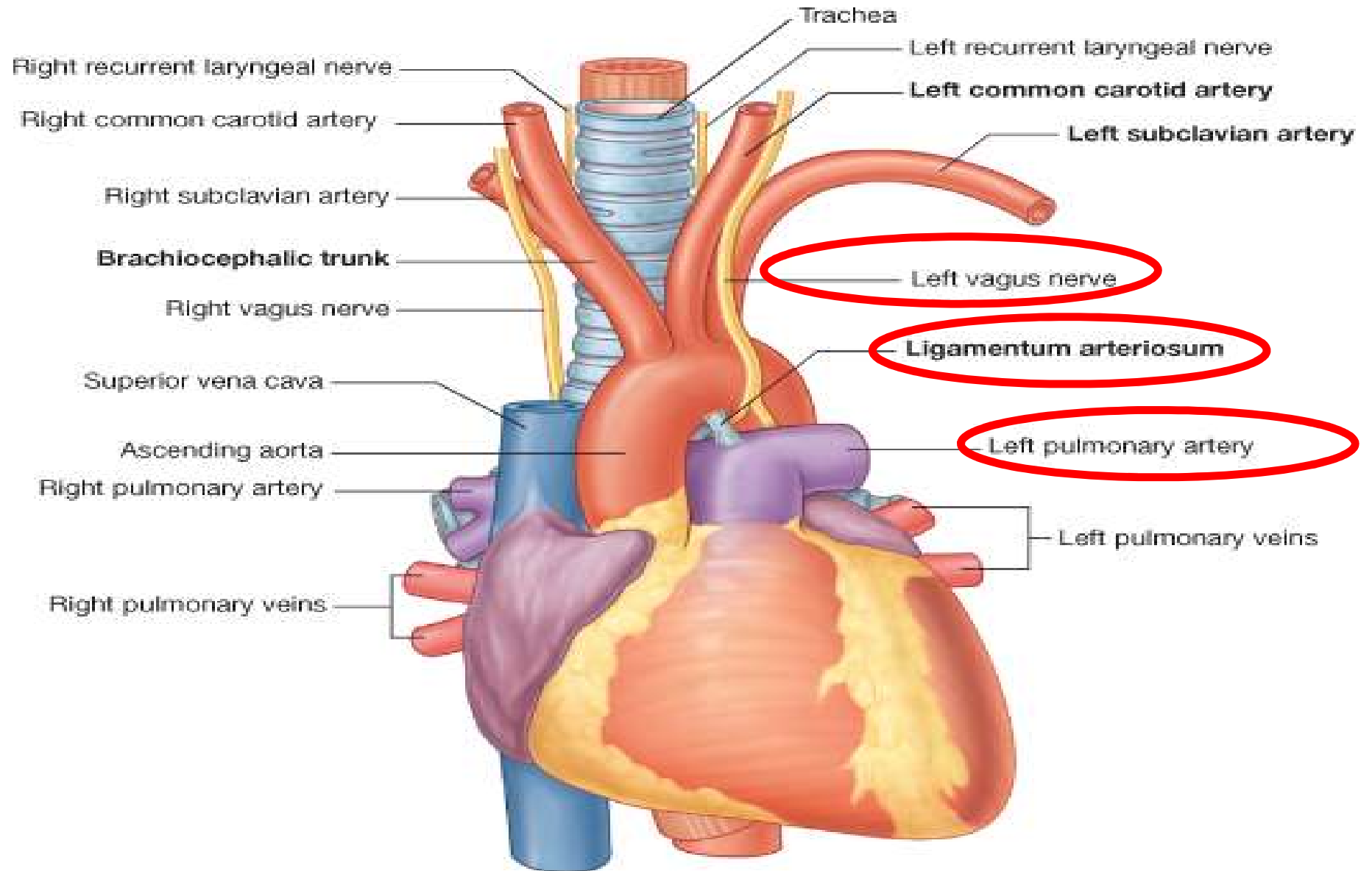
left phrenic, left vagus and left superior intercostal vein

Posteriorly and to the right:

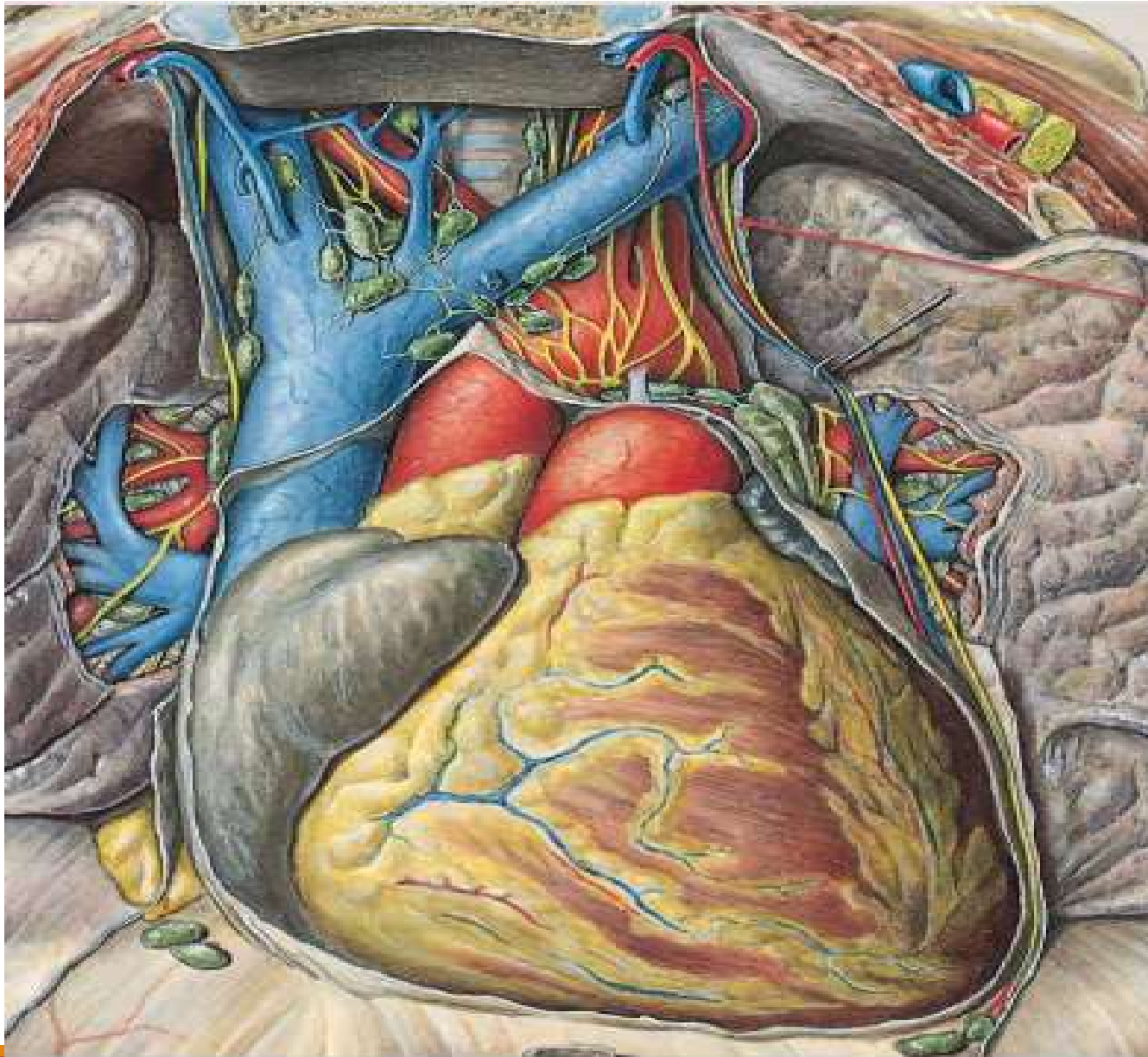
Esophagus, trachea, left recurrent laryngeal nerve and thoracic duct

Inferiorly :

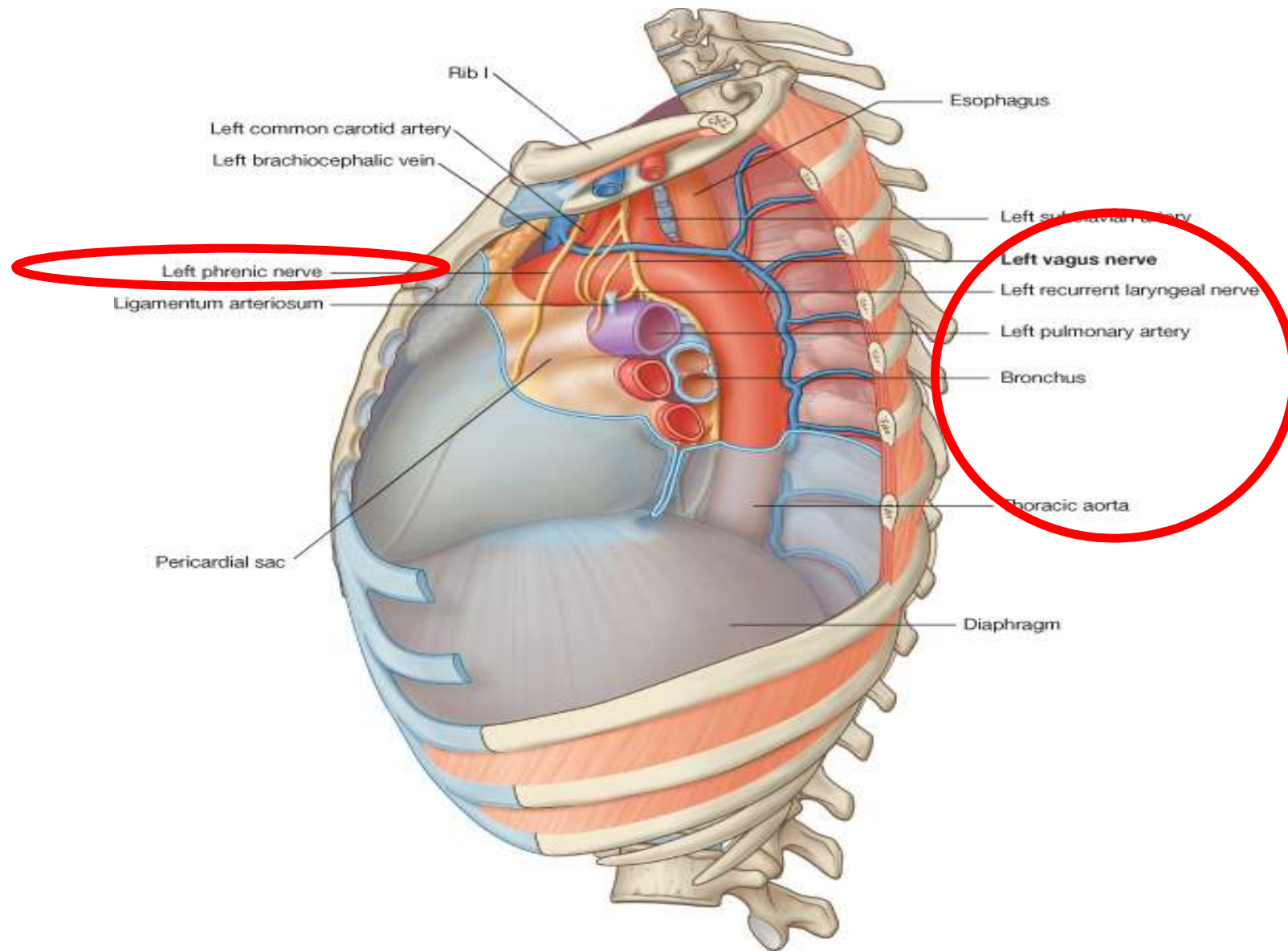
- ✓ Bifurcation of pulmonary trunk
- ✓ Ligamentum arteriosum.
- ✓ Superficial cardiac plexus
- ✓ left recurrent laryngeal nerve.
- ✓ Left main bronchus



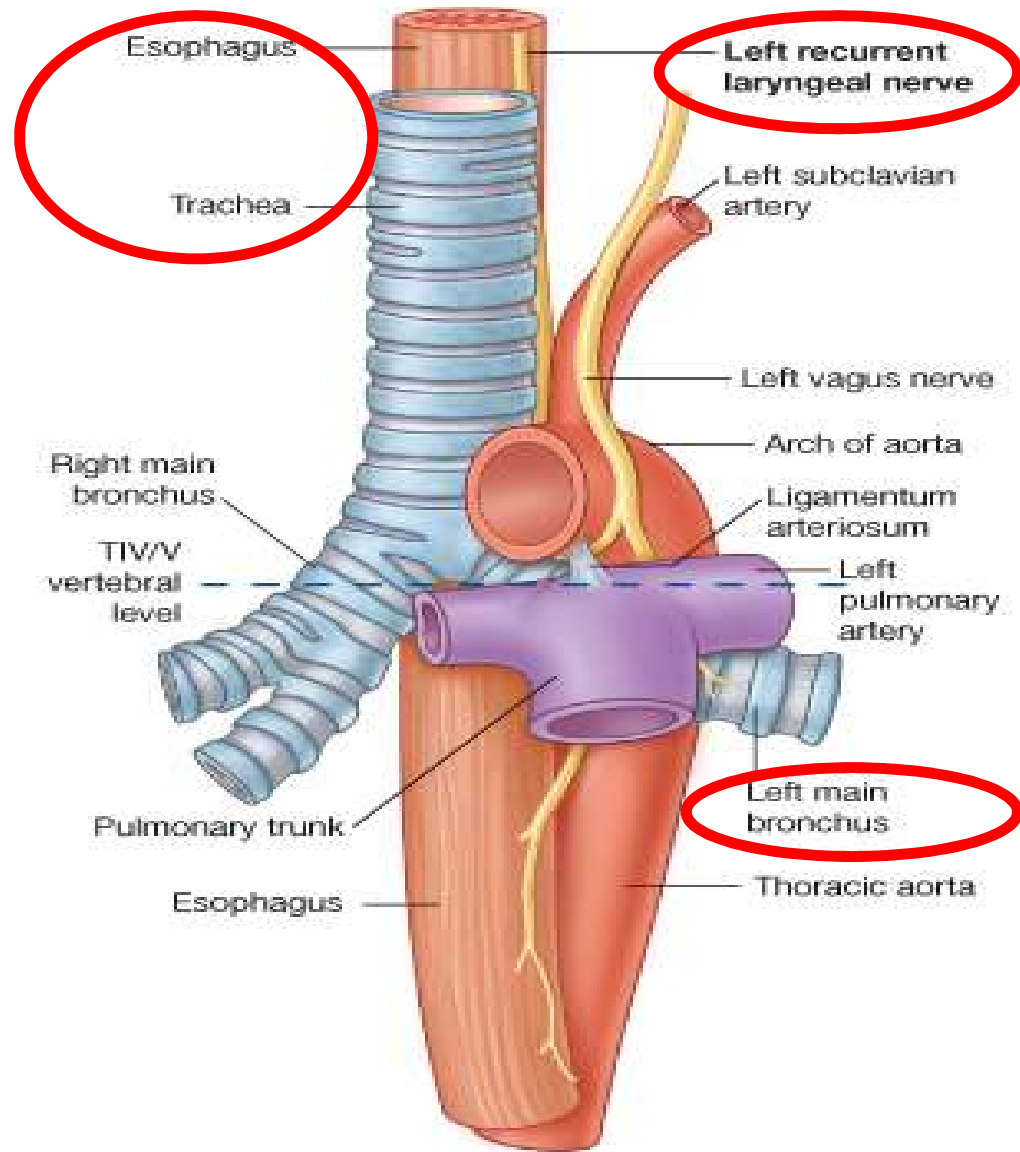
© Elsevier. Drake et al: Gray's Anatomy for Students - www.studentconsult.com



Left phrenic nerve



© Elsevier. Drake et al: Gray's Anatomy for Students - www.studentconsult.com

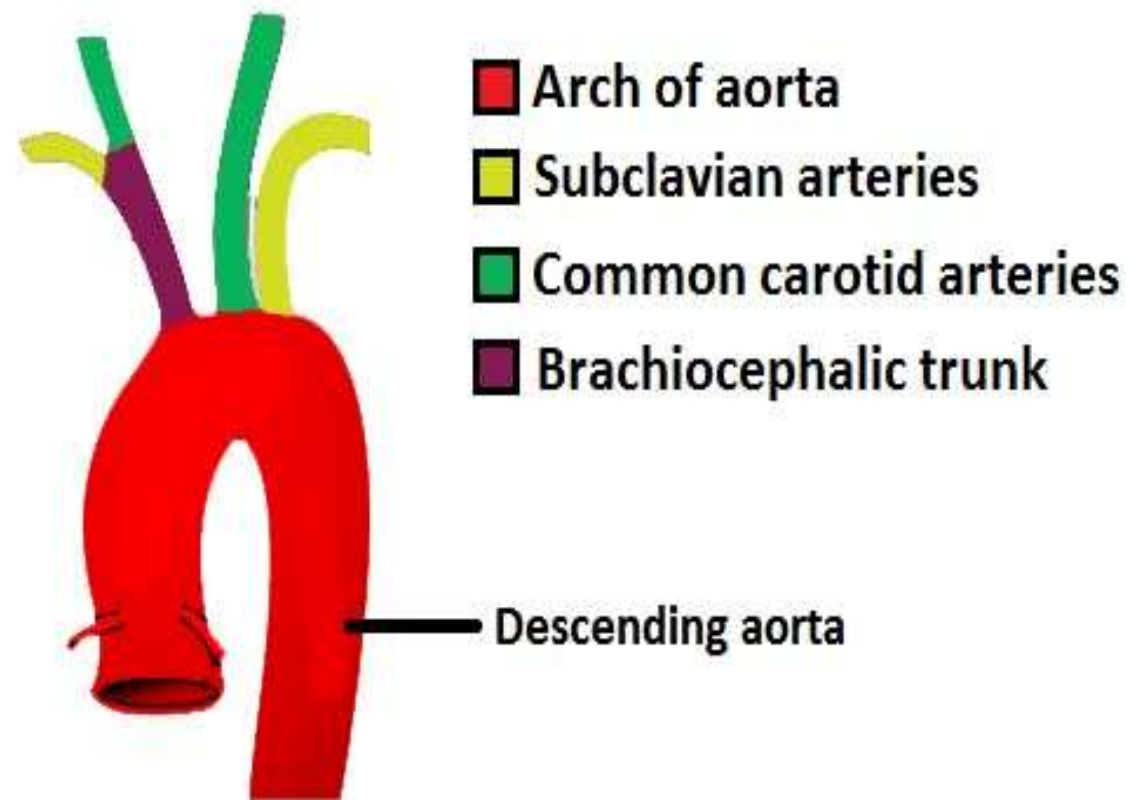


© Elsevier. Drake et al: Gray's Anatomy for Students - www.studentconsult.com

Aortic arch branches

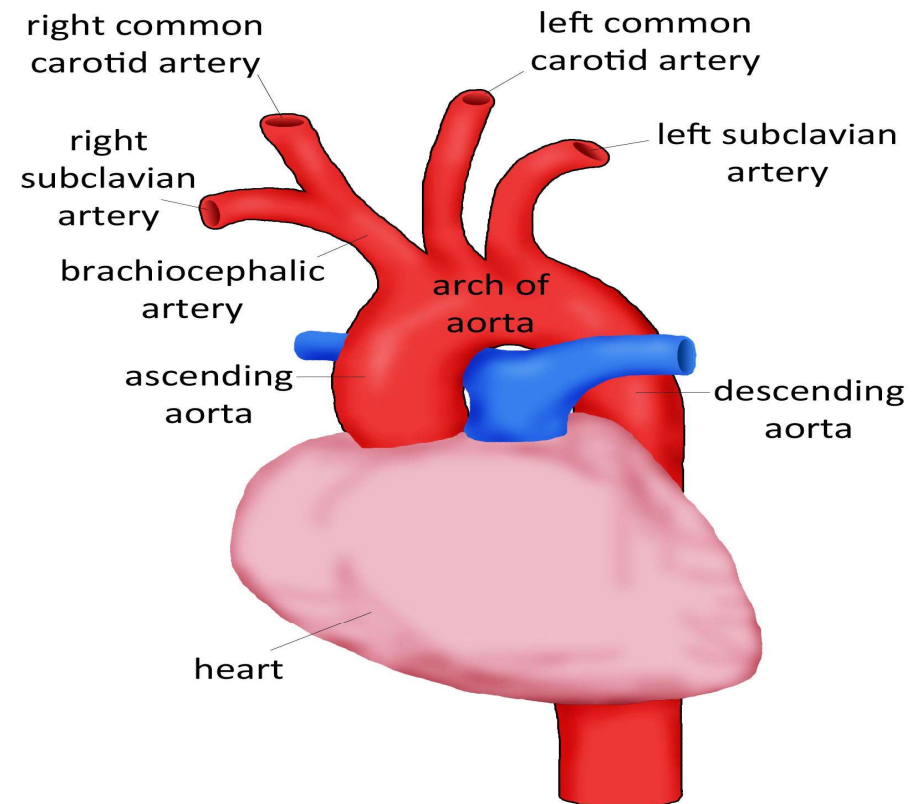
Three branches

1. Brachiocephalic trunk
2. Left common carotid artery
3. Left subclavian artery



The brachiocephalic trunk:

- It arises posterior to the manubrium, where it is anterior to the trachea and posterior to the left brachiocephalic vein
- At the **right sternoclavicular (SC) joint**, it divides into the right common carotid and right subclavian arteries.

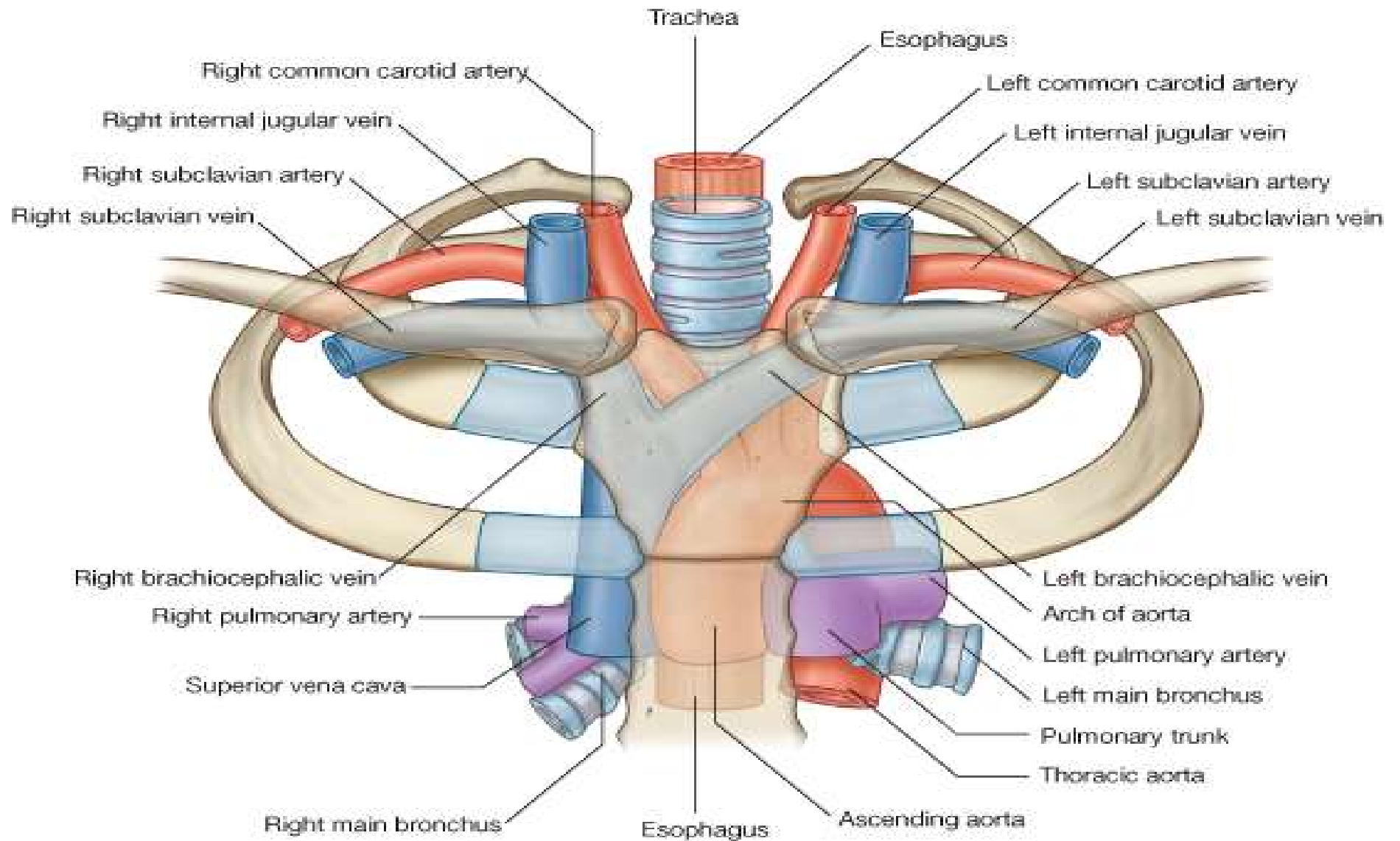


The left common carotid artery:

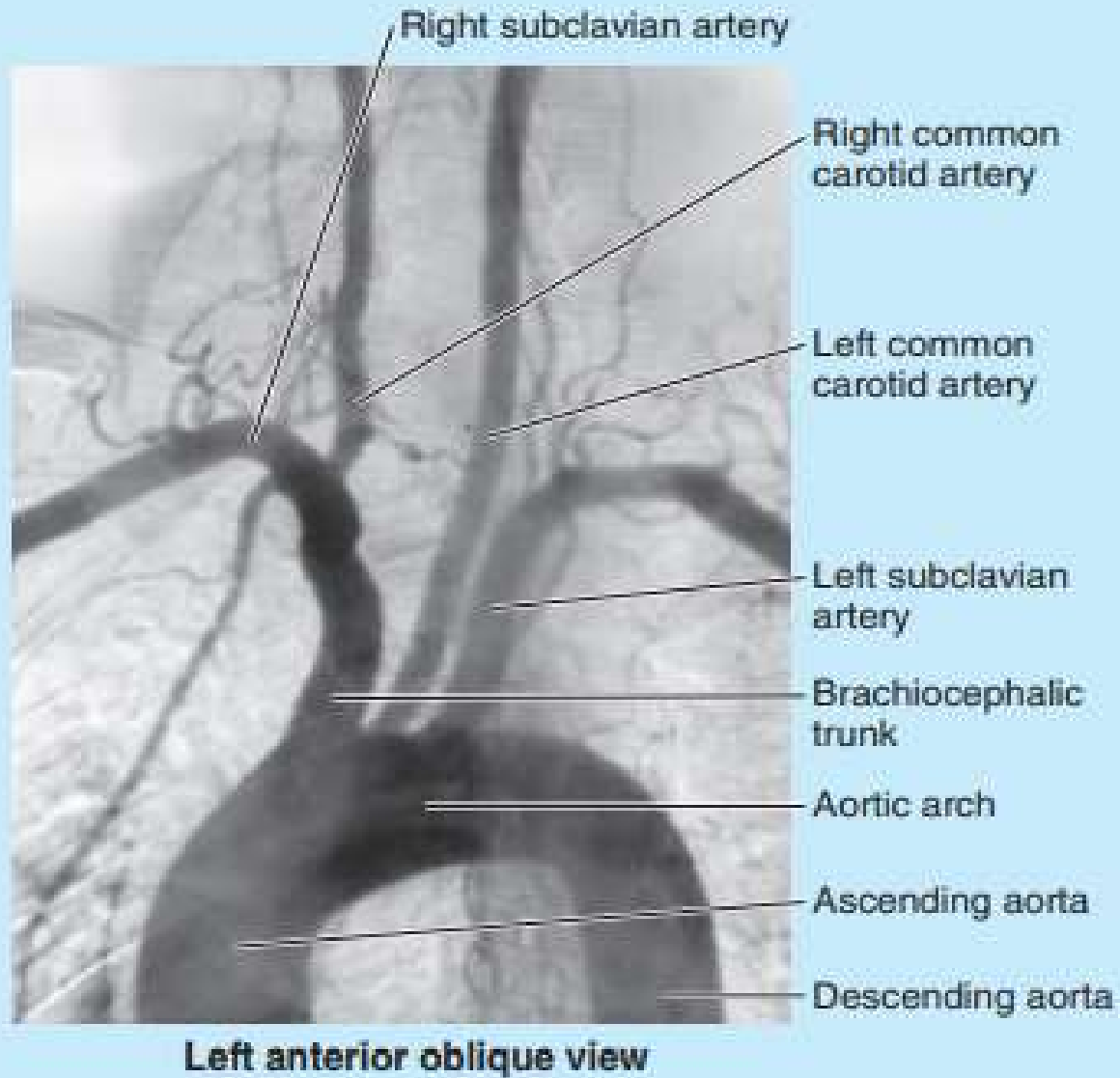
- It arises posterior to the manubrium
- It enters the neck by passing posterior to the **left SC joint.**

The left subclavian artery :

- It arises from the posterior part of the arch behind left common carotid artery
- It leaves the thorax and enters the root of the neck by passing posterior to the **left SC joint.**



© Elsevier. Drake et al: Gray's Anatomy for Students - www.studentconsult.com



Aortic angiogram (aortogram)
Clinically Oriented Anatomy. Keith Moore.

Nerves of the superior mediastinum

I-Vagus Nerve

Right vagus nerve

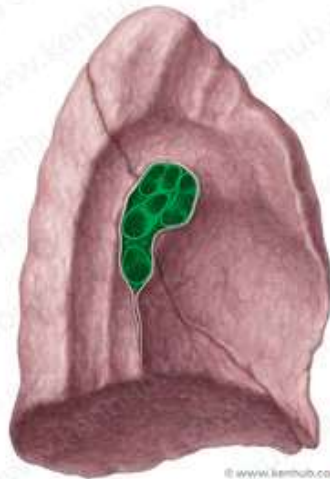
- ❑ Passes on the right side of the trachea ,then posterior to the right brachiocephalic vein, SVC
- ❑ It contribute to Rt. pulmonary, esophageal and cardiac plexuses
- ❑ It gives right recurrent laryngeal nerve ,which hooks around the right subclavian artery and ascends between the trachea and esophagus to supply the larynx

The left vagus nerve

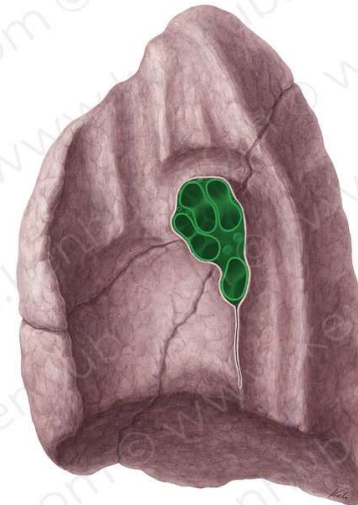
- ❑ It enters the mediastinum between the left common carotid artery and left subclavian artery.
- ❑ It gives left recurrent laryngeal nerve which hooks around the arch of the aorta, lateral to the ligamentum arteriosum, and ascends in the groove between the trachea and the esophagus to supply the larynx

Both vagi are passing behind the root of the lung

Left Lung



Right Lung



The phrenic nerves : is motor and sensory nerve supply for the diaphragm and sensory to the pericardium and mediastinal pleura.

The right phrenic nerve : passes along the right side of the right brachiocephalic vein, SVC, and the pericardium over the right atrium and descends on the right side of the IVC to passes through caval opening of the diaphragm.

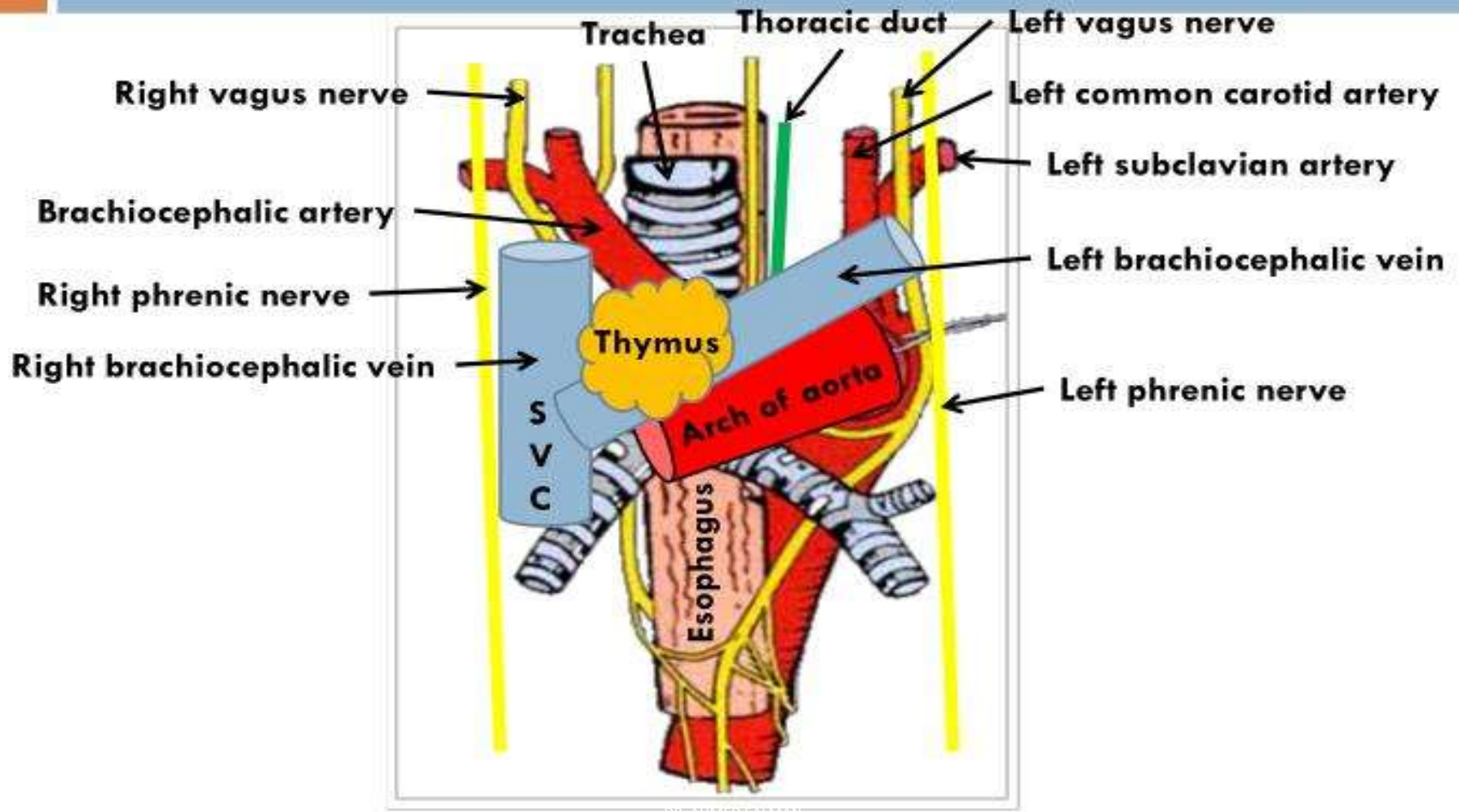
The left phrenic nerve :

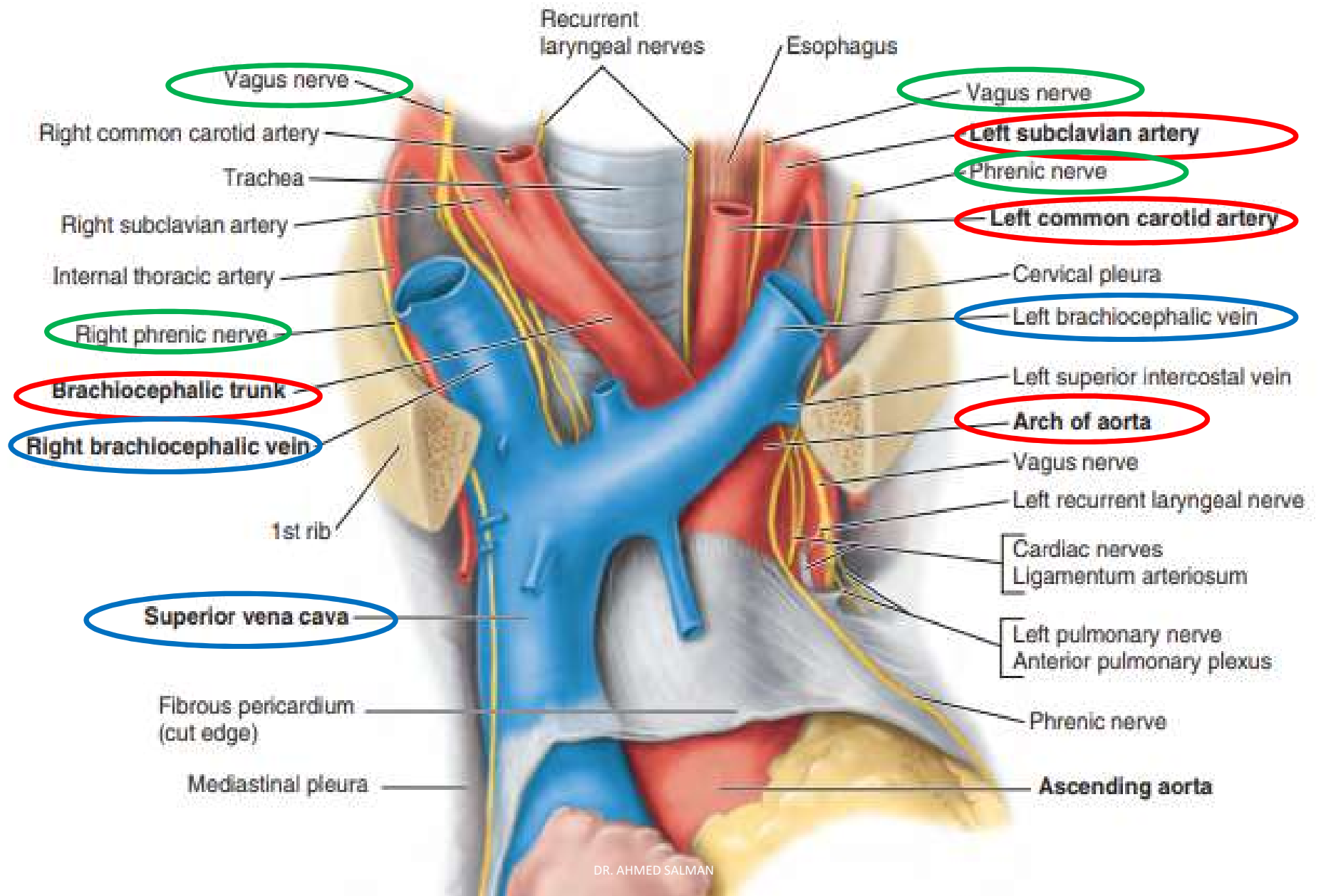
It crosses the left vagus ,then ,it runs along the fibrous pericardium , the left atrium and ventricle of the heart.

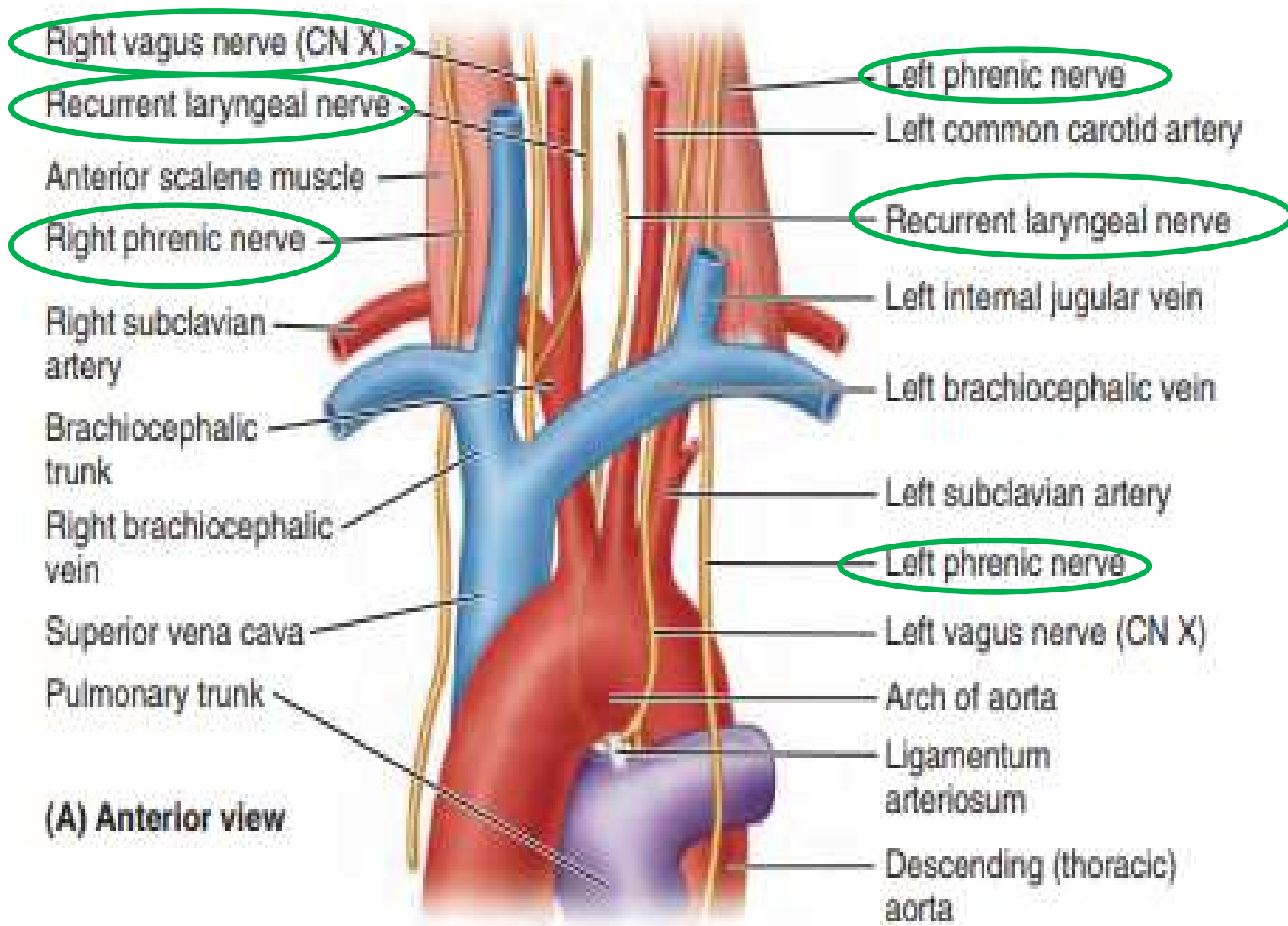
It pierces the diaphragm to the left of the pericardium

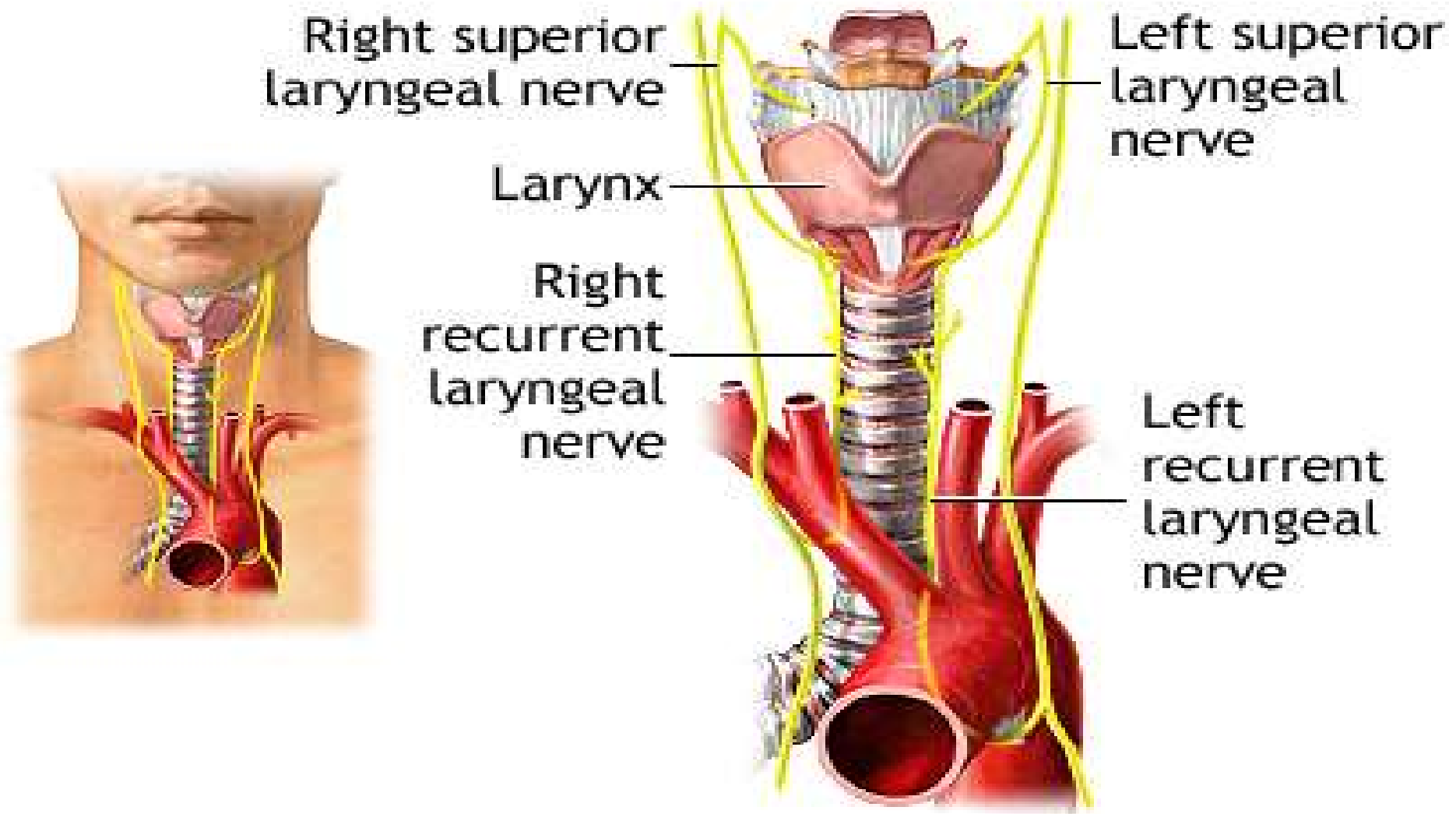
Both phrenic nerves are passing anterior to the root of the lungs

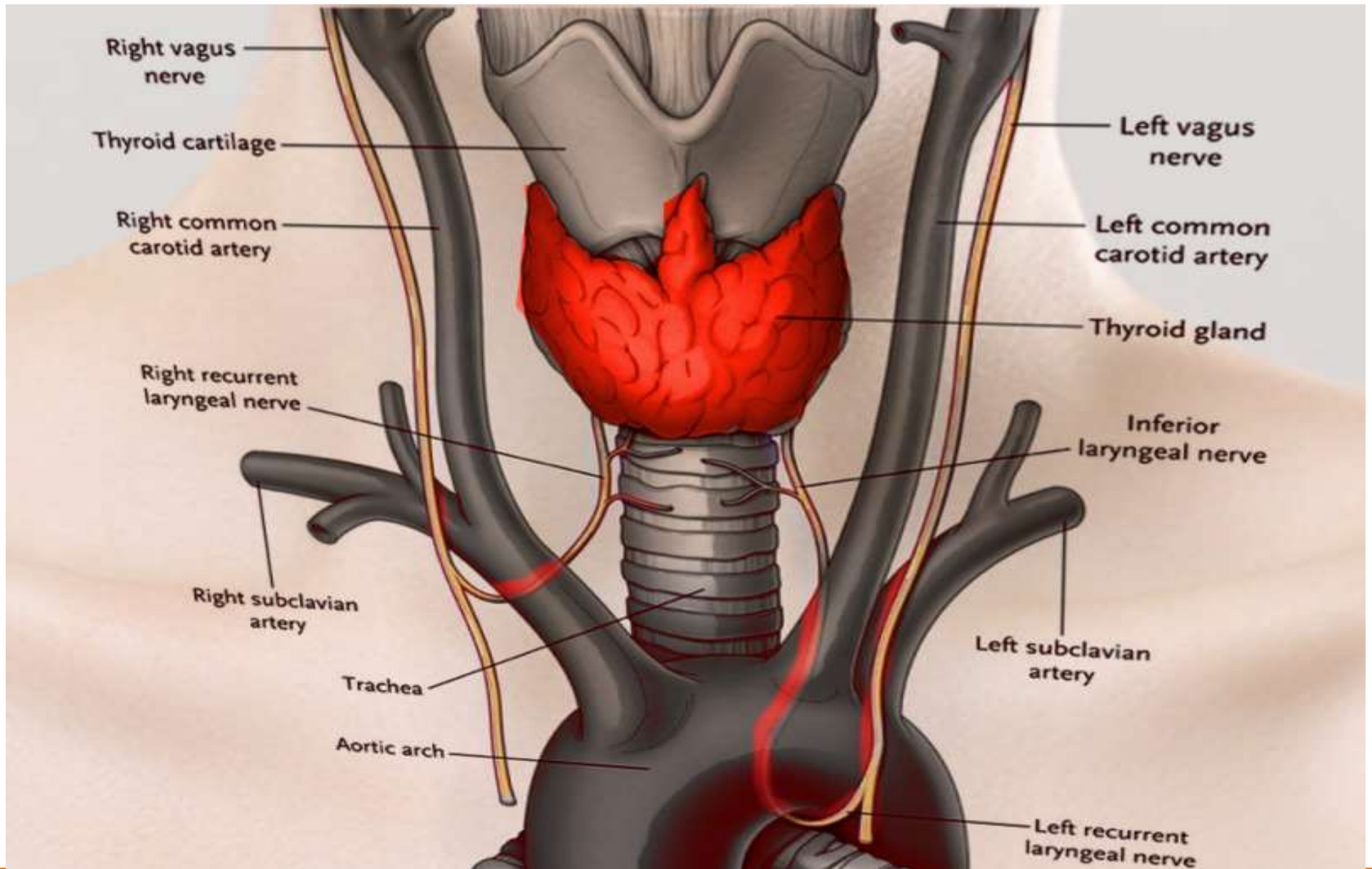
CONTENTS OF SUPERIOR MEDIASTINUM

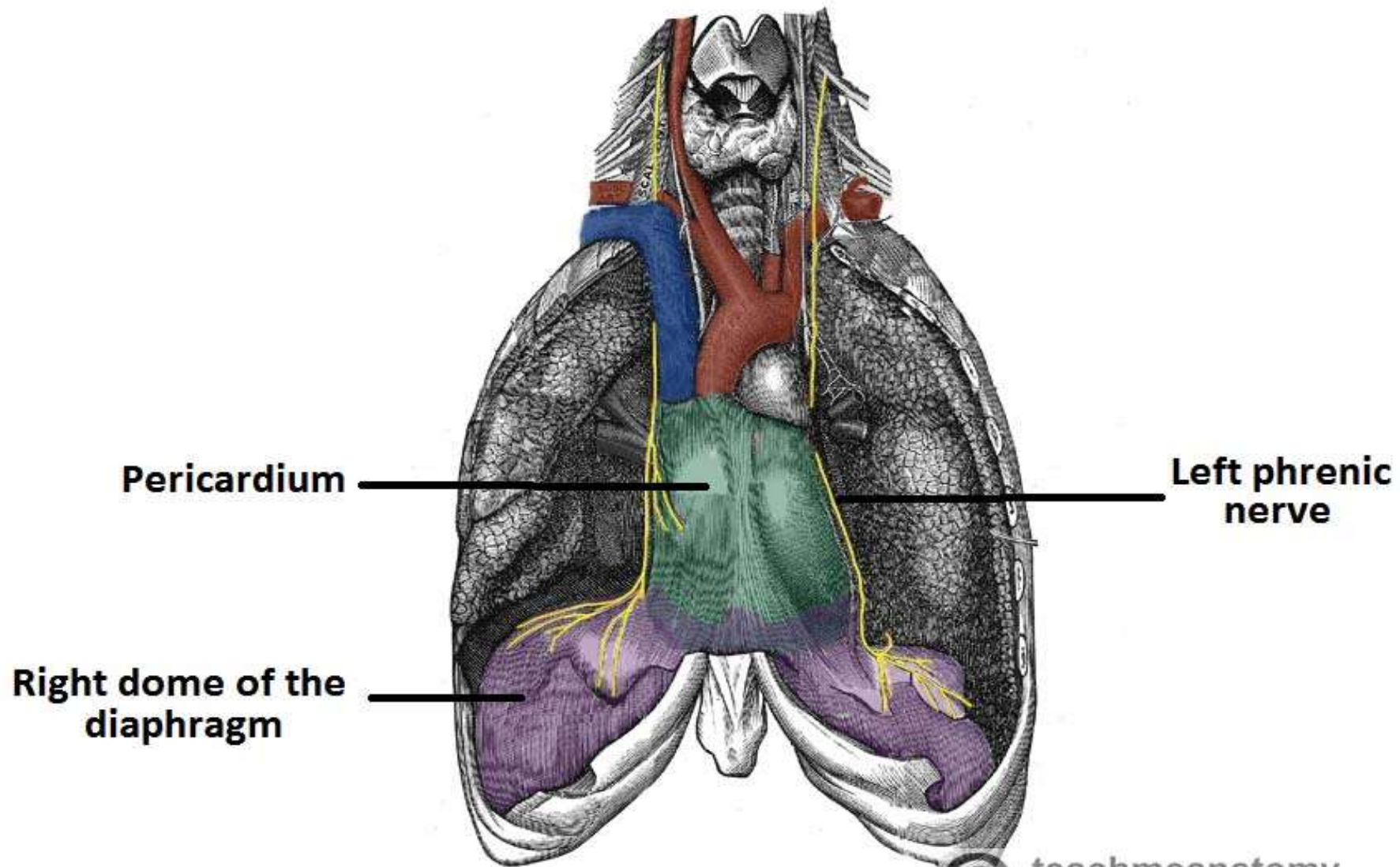










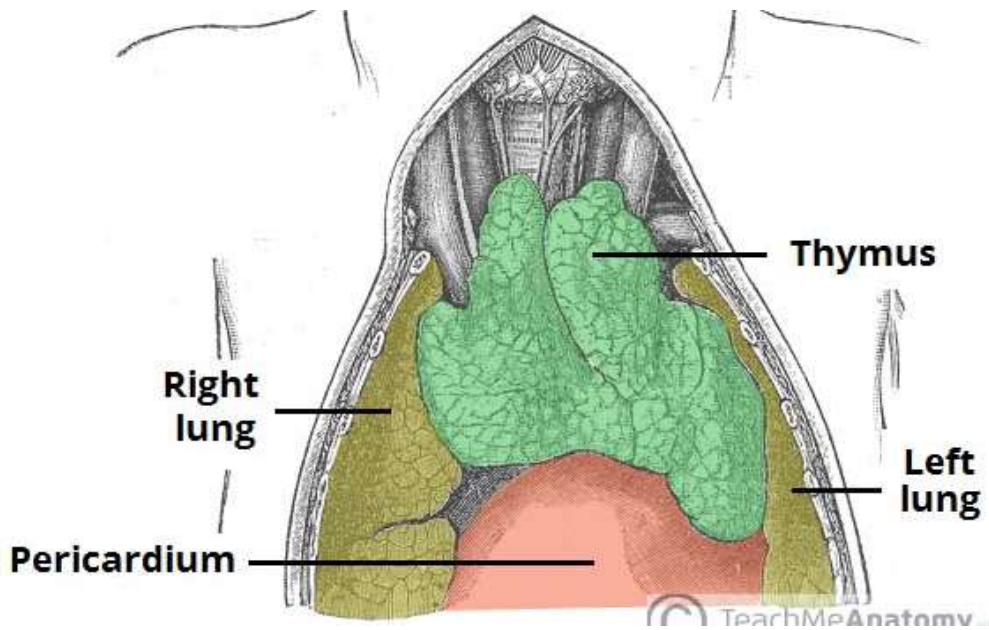


Anterior Mediastinum

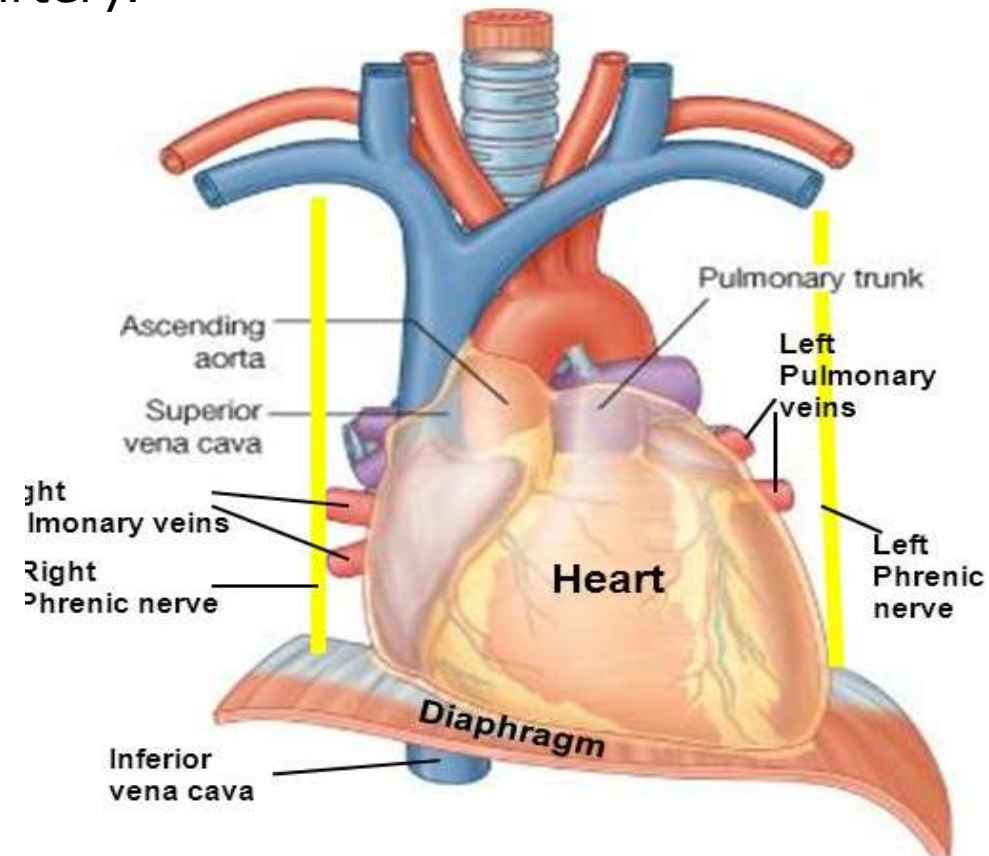
It lies between pericardium and sternum

Contents :

- 1- Remains of thymus gland.
- 2- Superior and inferior sterno-pericardial ligaments
- 4- Mediastinal branches of internal thoracic artery.
- 5- lymph nodes.



Anterior Mediastinum



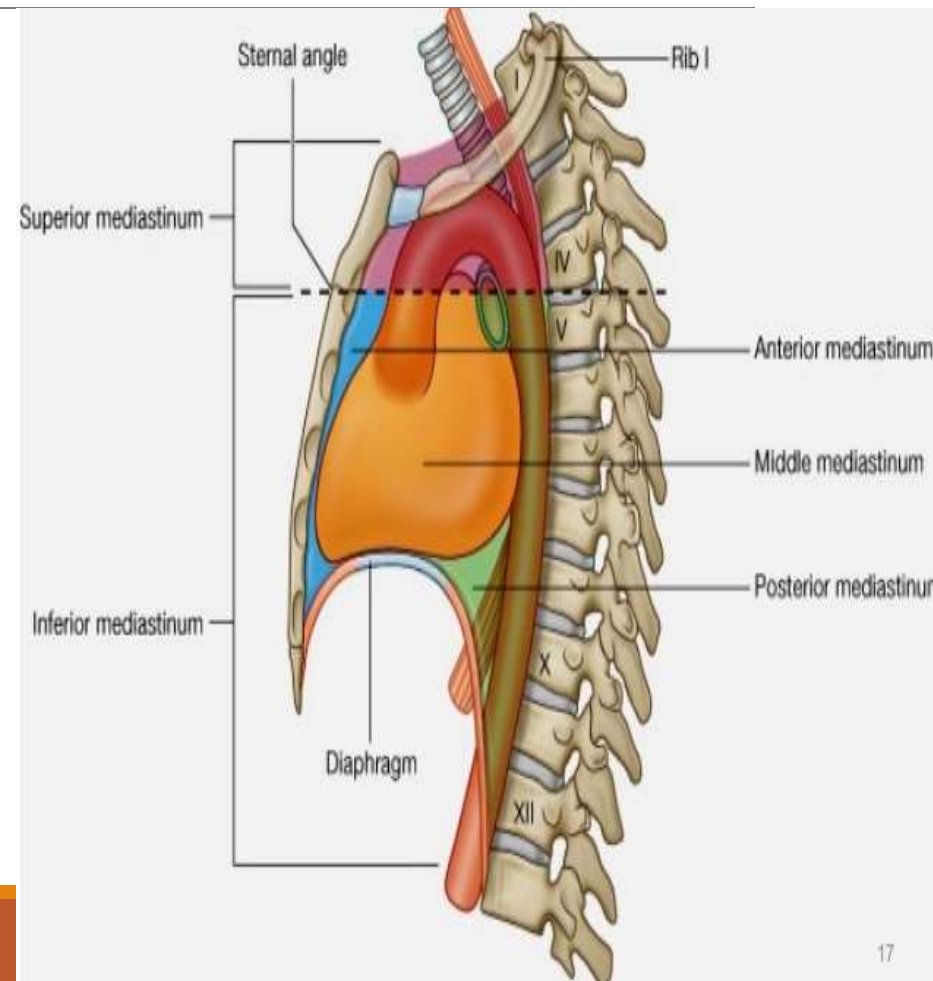
Posterior mediastinum

Boundaries:

Anteriorly : Pericardium & heart.

Posteriorly: Lower 8 thoracic vertebrae. (T5-T12)

Laterally : Mediastinal pleura on each side.



Contents of posterior mediastinum:

1. Descending thoracic aorta (**Artery**)
2. Azygos vein (**Vein**)
3. Superior and inferior hemiazygos veins (**Vein**)
4. Thoracic duct (**Lymph**)
5. Posterior mediastinal lymph nodes (**Lymph**)
6. Right and left vagi (**Nerve**)
7. Esophagus (**Tube**)

Descending thoracic aorta

Beginning : as a continuation of the arch of the aorta on the left side of the inferior border of the body of the **T4** vertebra

Course : It descends on the posterior mediastinum on the left sides of the **T5–T12** vertebrae

- It lies posterior to the root of the left lung and pericardium.
- The esophagus descends on the right side of aorta then crosses in front of it at level of **T7**.

Termination : It becomes abdominal aorta as it enters abdomen at **T12** vertebra through the aortic hiatus in the diaphragm

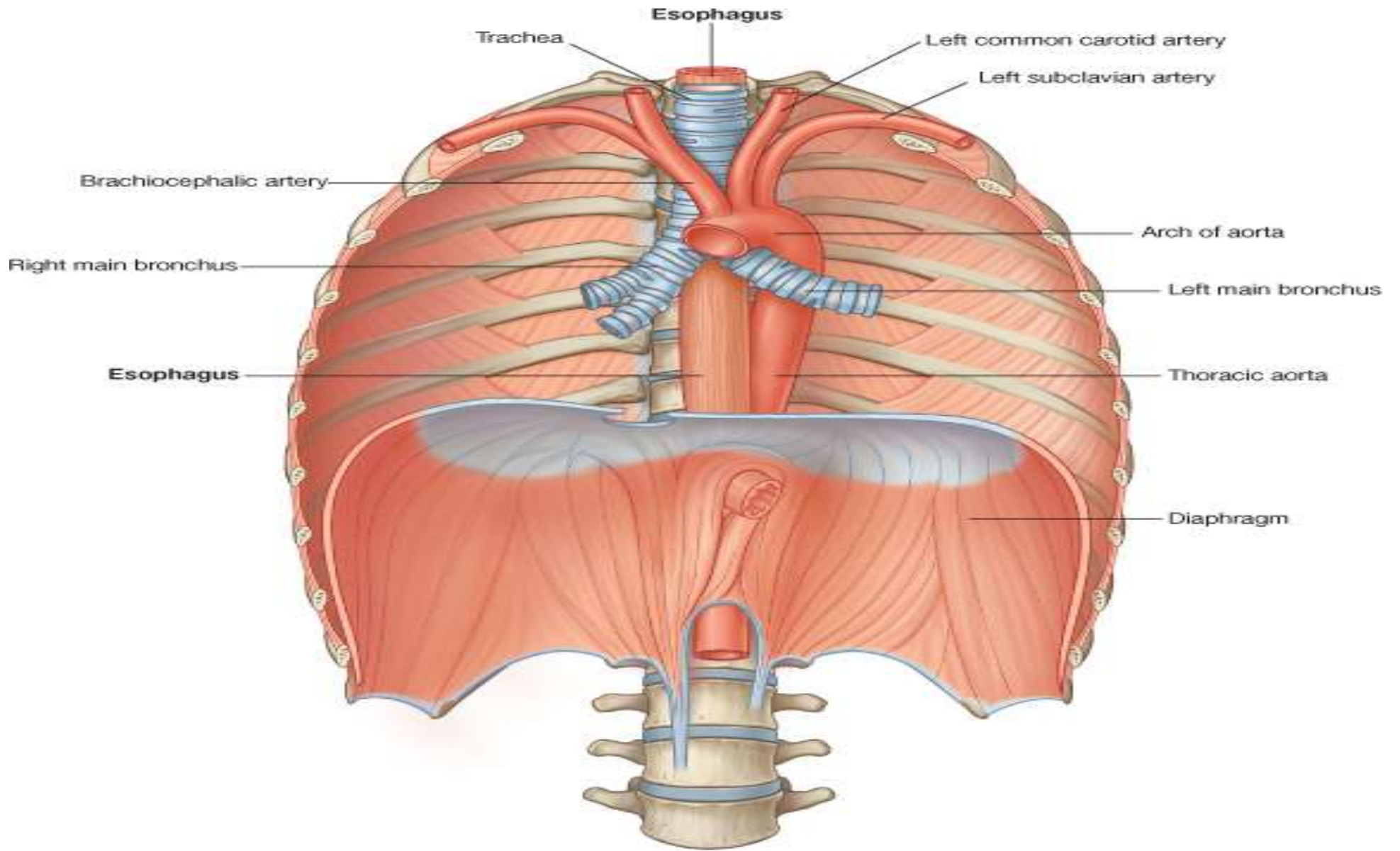
Branches:

➤ **Parietal branches:**

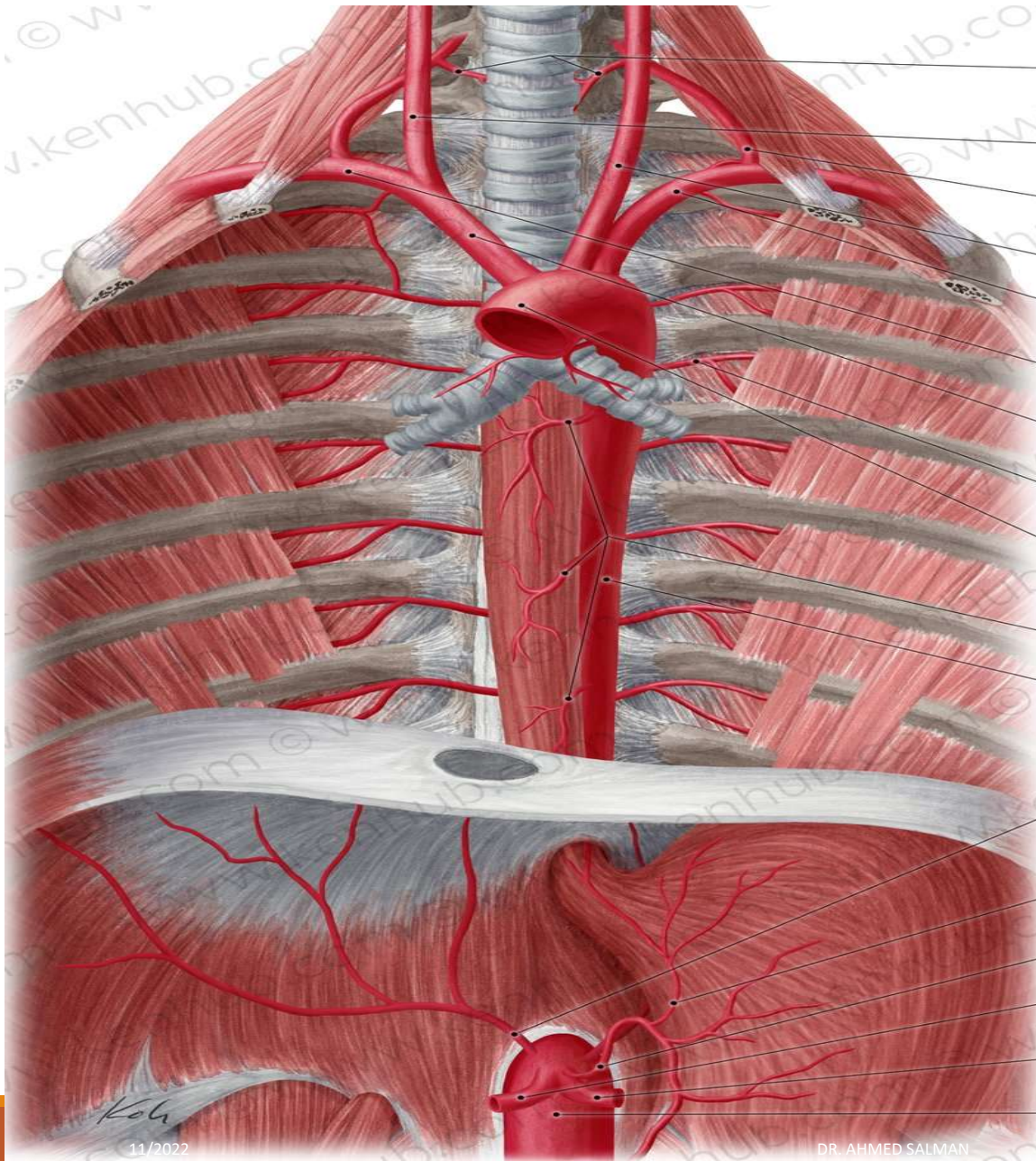
1. Posterior intercostal arteries from 3-11.
2. Subcostal artery.
3. Superior phrenic artery.

➤ **Visceral branches:**

1. Two left bronchial arteries.
2. Esophageal branches.
3. Pericardial branches.
4. Mediastinal branches.



© Elsevier. Drake et al: Gray's Anatomy for Students - www.studentconsult.com



Right common carotid artery

Thyrocervical trunk

Left common carotid artery

Left subclavian artery

Right subclavian artery

Brachiocephalic trunk

Posterior intercostal artery

Ascending aorta

Esophageal branches of aorta

Descending thoracic aorta

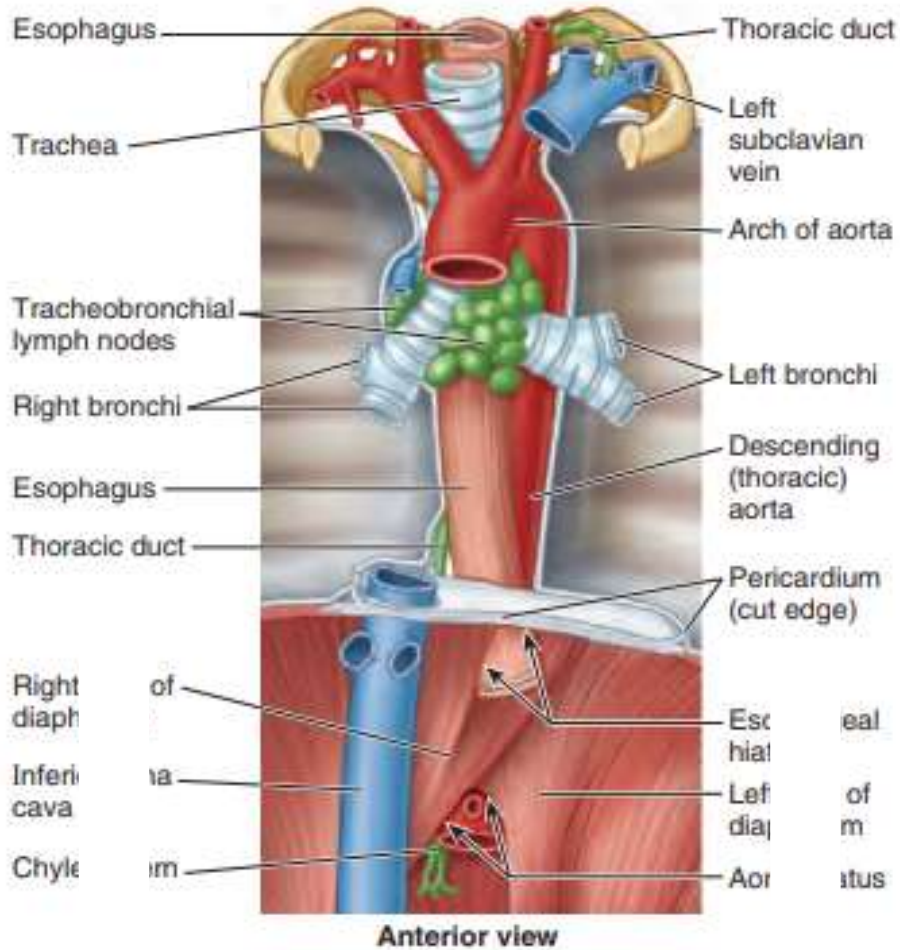
Inferior phrenic artery

Left gastric artery

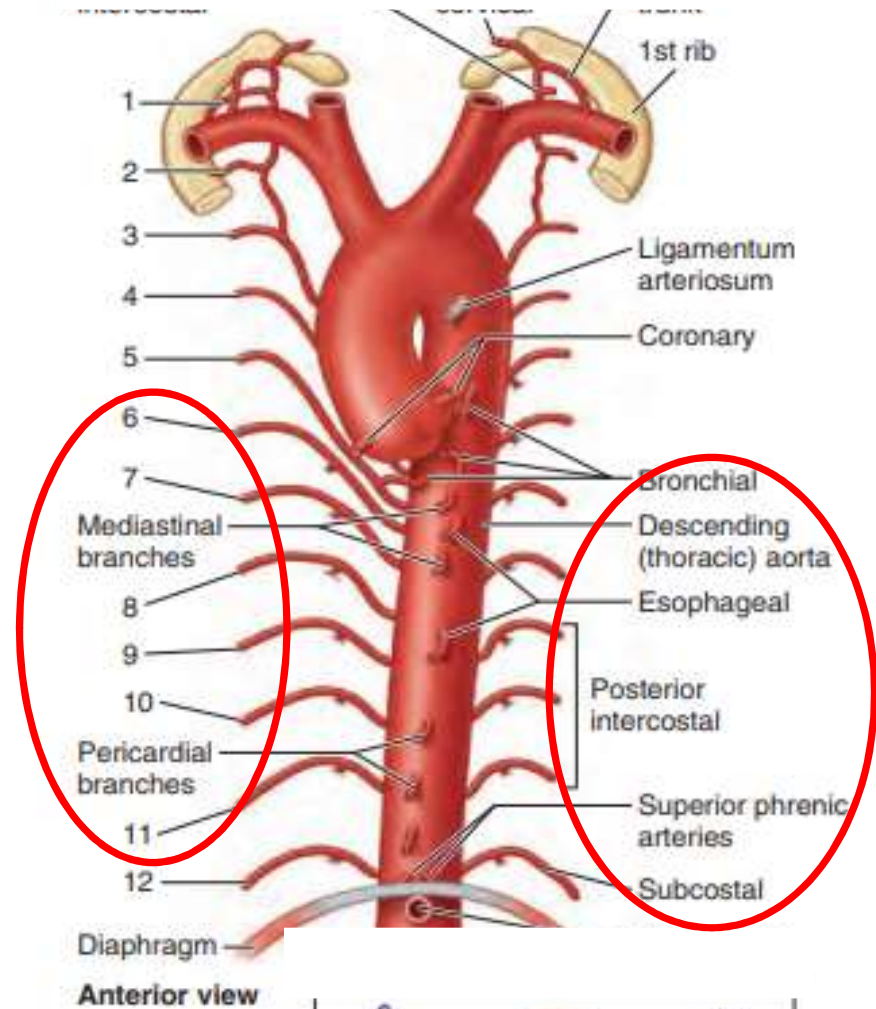
Common hepatic artery

Splenic artery

Abdominal aorta



and esophagus. Enlargement of the inferior tracheobronchial (carinal) nodes may widen the angle between the main bronchi. In this specimen, the thoracic duct enters the left subclavian vein.



Azygos Vein

Beginning :

- From the back of IVC opposite **L2** (level of renal vein)
- Or by union of right subcostal and right ascending lumbar veins.

Course:

- It ascends through **aortic** opening of diaphragm.
- Then it ascends in posterior mediastinum till T4 where it arches forwards above right bronchus

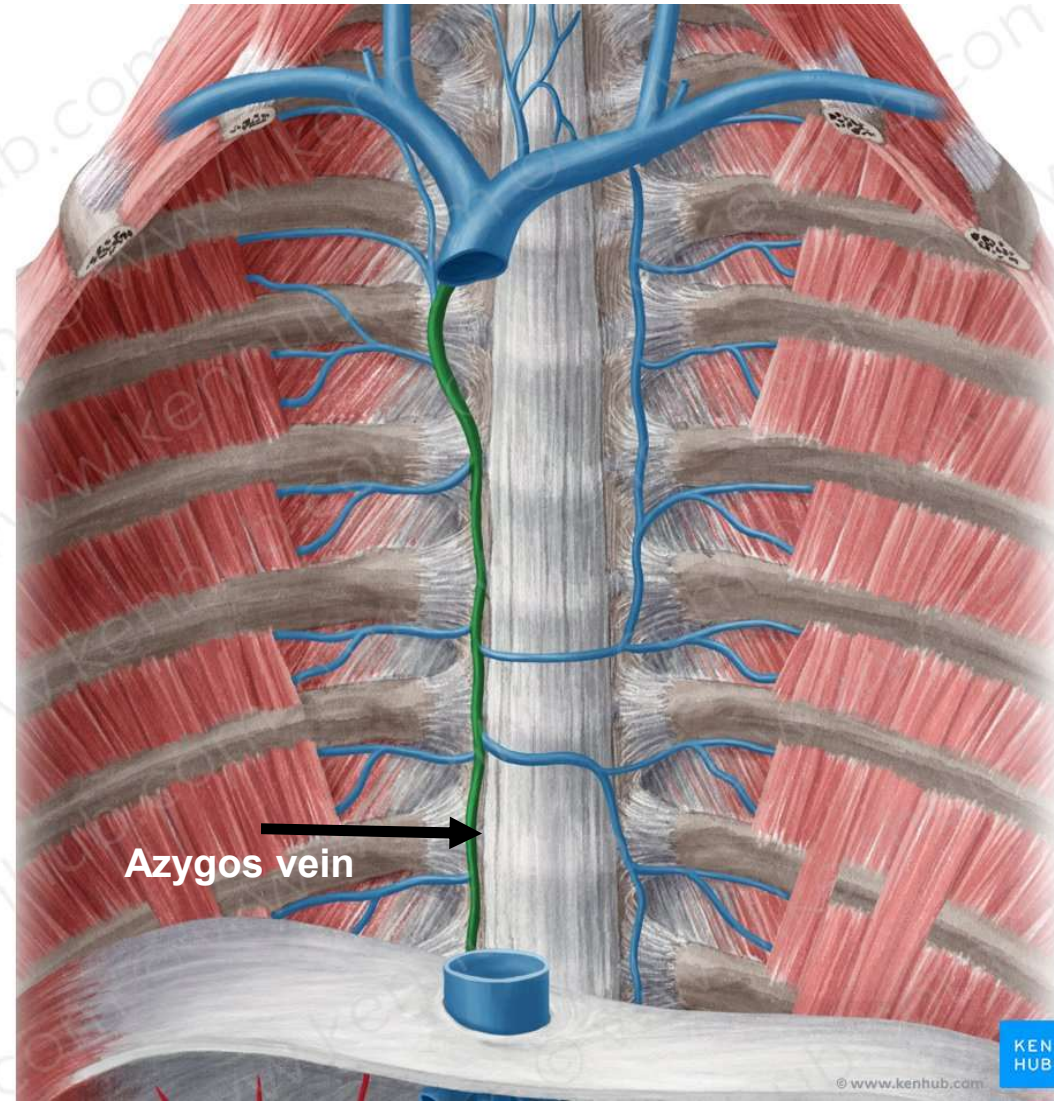
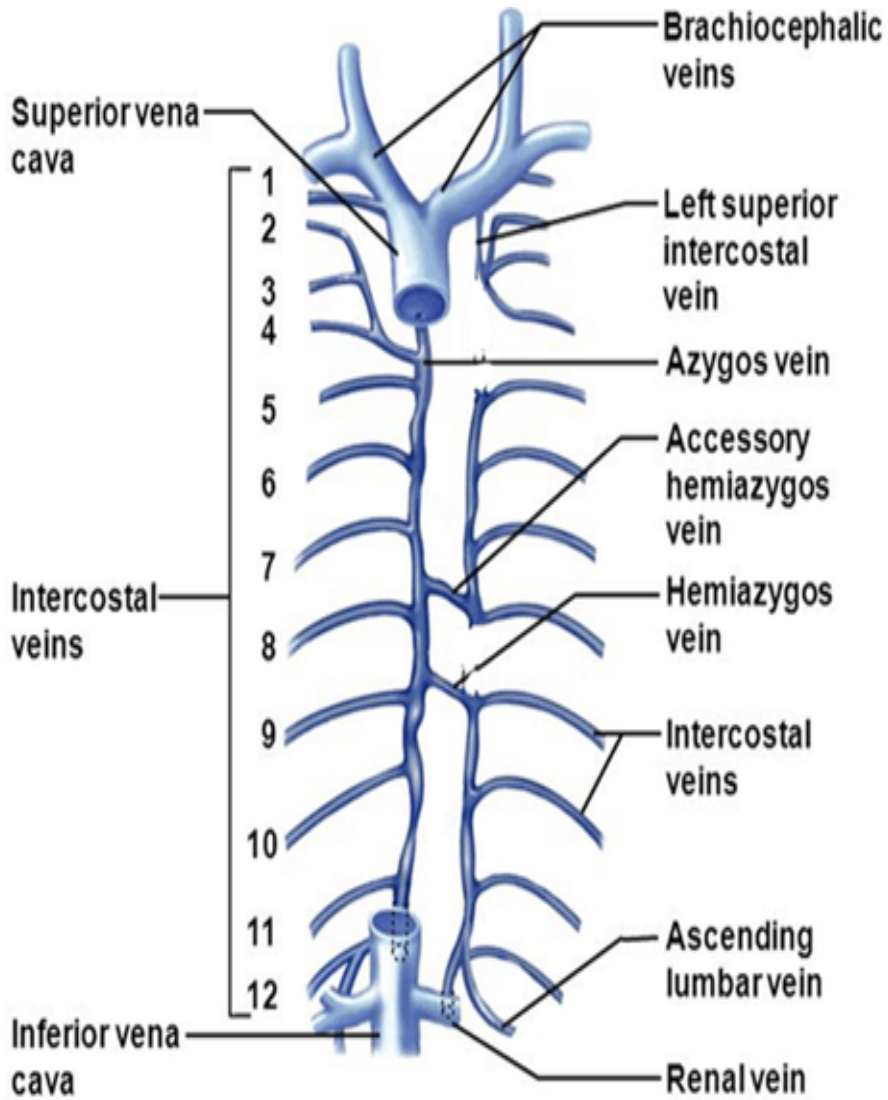
Termination: the back of SVC opposite **right 2nd costal cartilage.**

Tributaries:

1. Right subcostal vein.
2. Right ascending lumbar vein.
3. Right posterior intercostal veins from 2-11.
4. Superior and inferior hemiazygos veins.
5. Right bronchial veins.
6. Esophageal veins.
7. Pericardial veins.
8. Mediastinal veins.

Clinical note:

- Azygos vein is a direct link between SVC and IVC .So, it can help in cases of thrombosis of SVC or IVC
- The azygos vein communicates with the vertebral venous plexuses that drain the back, vertebrae, and structures in the vertebral canal.



Superior hemiazygos

It is a longitudinal venous channel that descends on the left side of vertebral body

Termination:

At the level of T7, it curves to right to end in azygos vein.

Tributaries:

1. Left posterior intercostal veins from 4-8.
2. Left bronchial veins.

Inferior hemiazygos vein

Beginning : From the back of the left renal vein opposite L2.

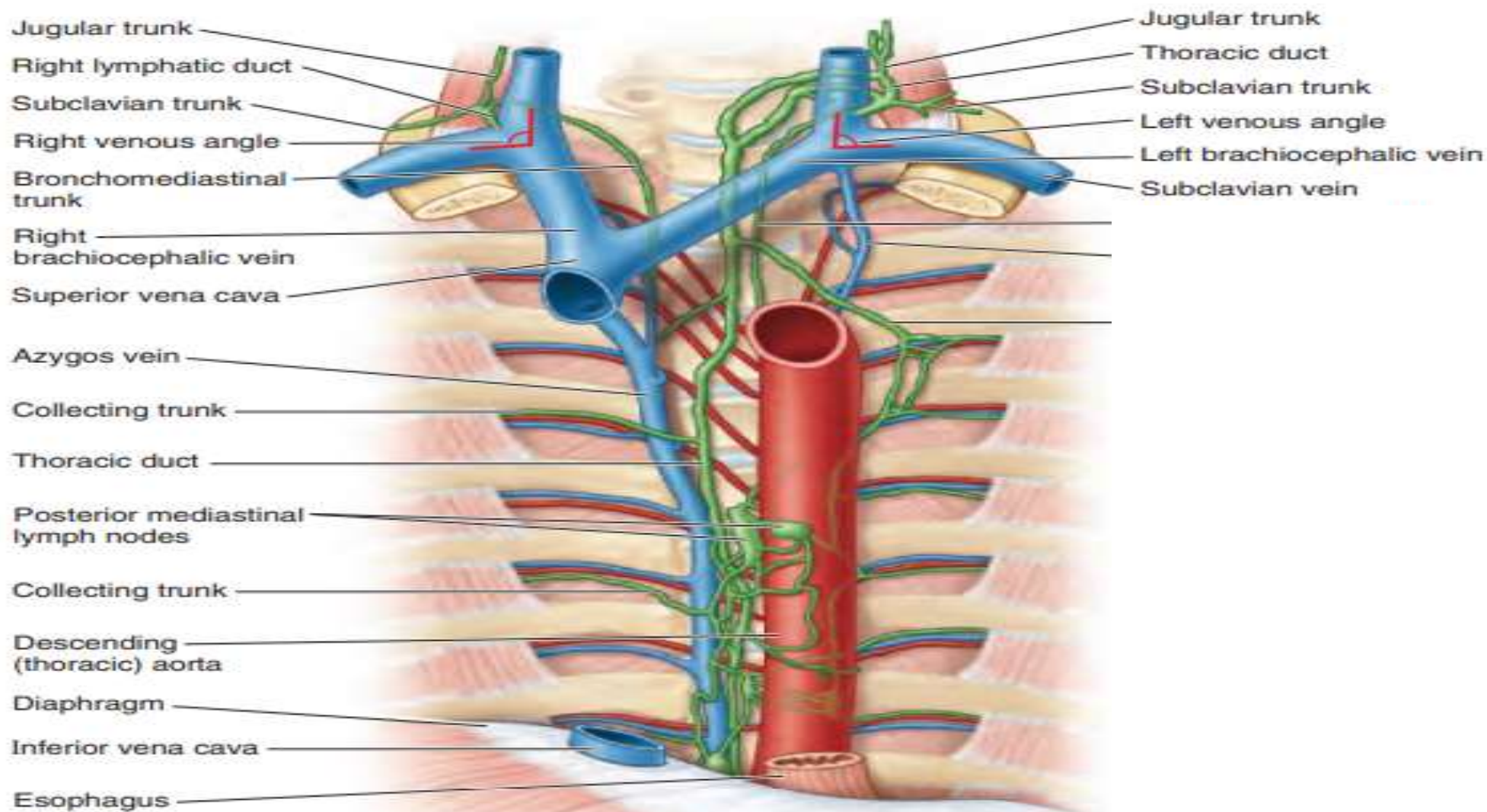
- Or by union of left subcostal and left ascending lumbar veins.

Termination :

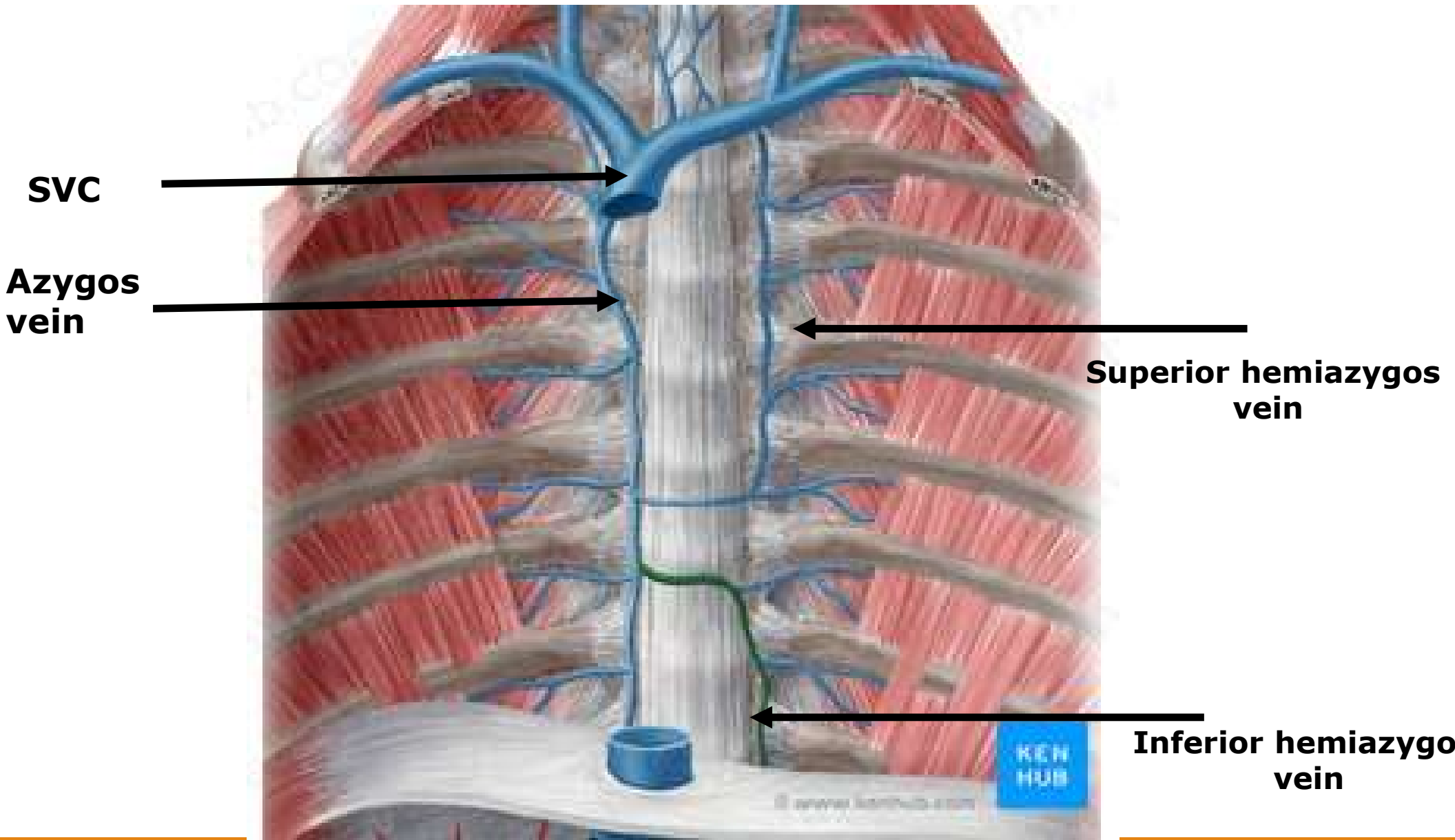
- At the level of T8, it curves to the right to end into azygos vein.

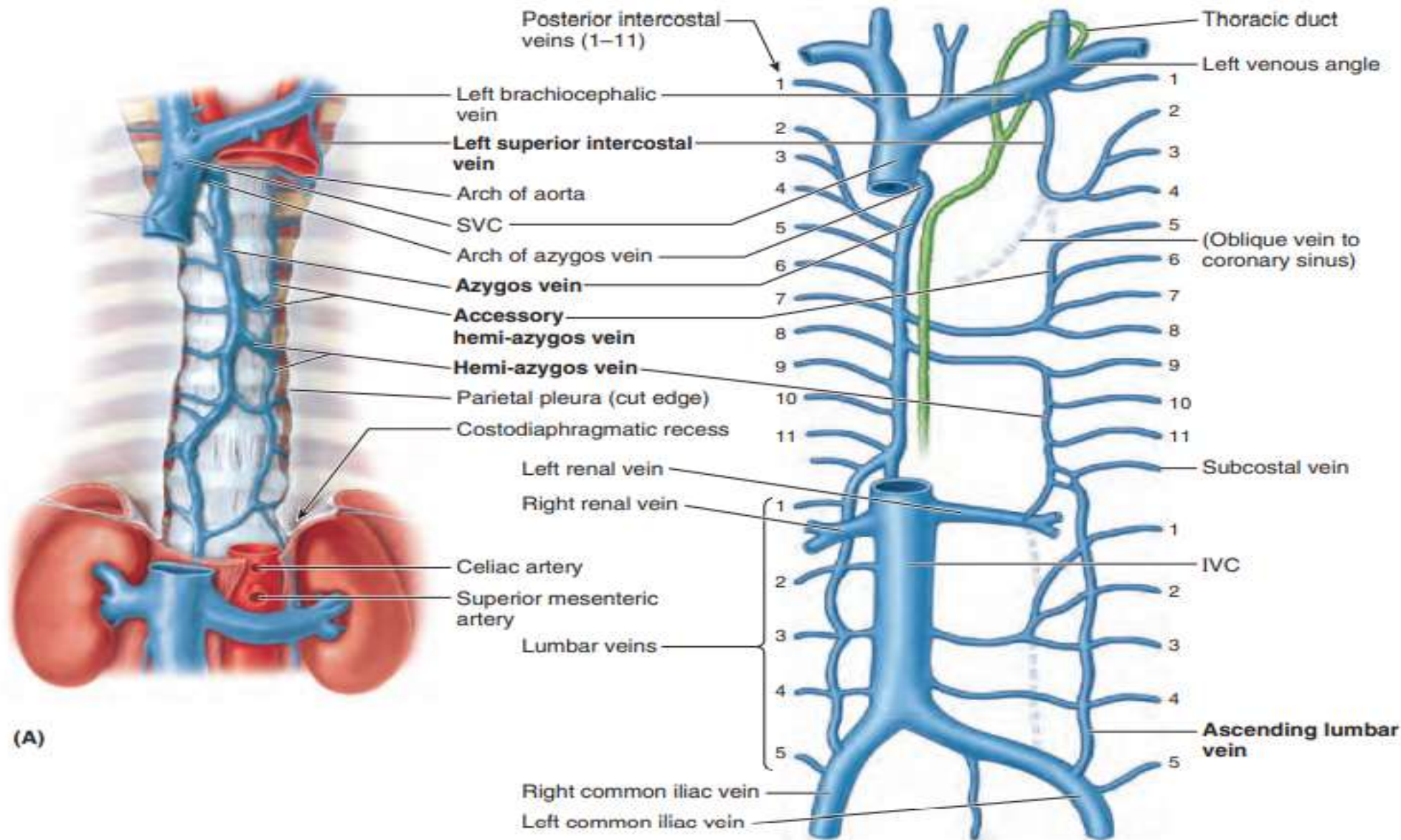
Tributaries:

1. Left posterior intercostal veins from 9-11.
2. Left subcostal and left ascending lumbar veins.

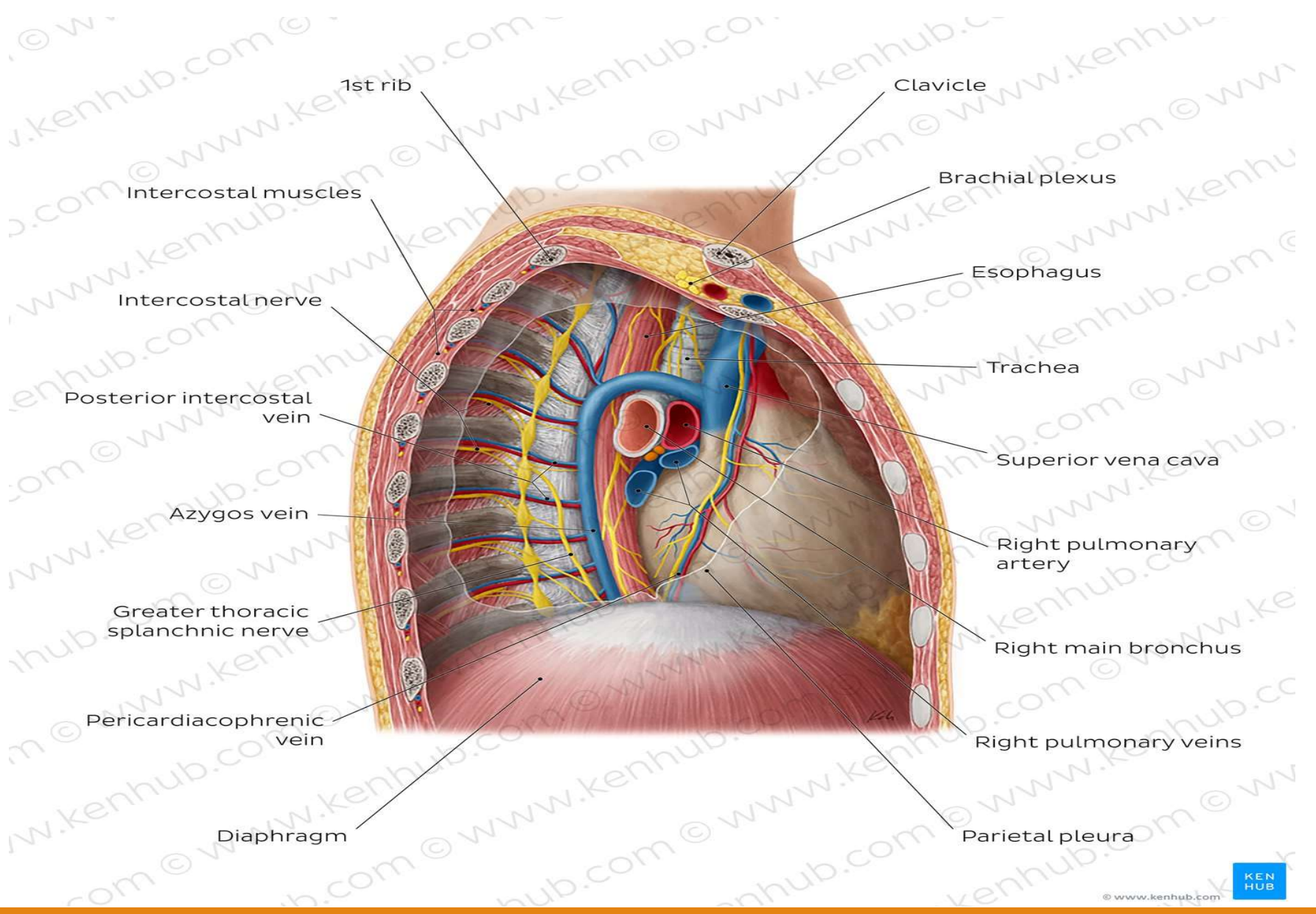


(A) Anterior view





(A)

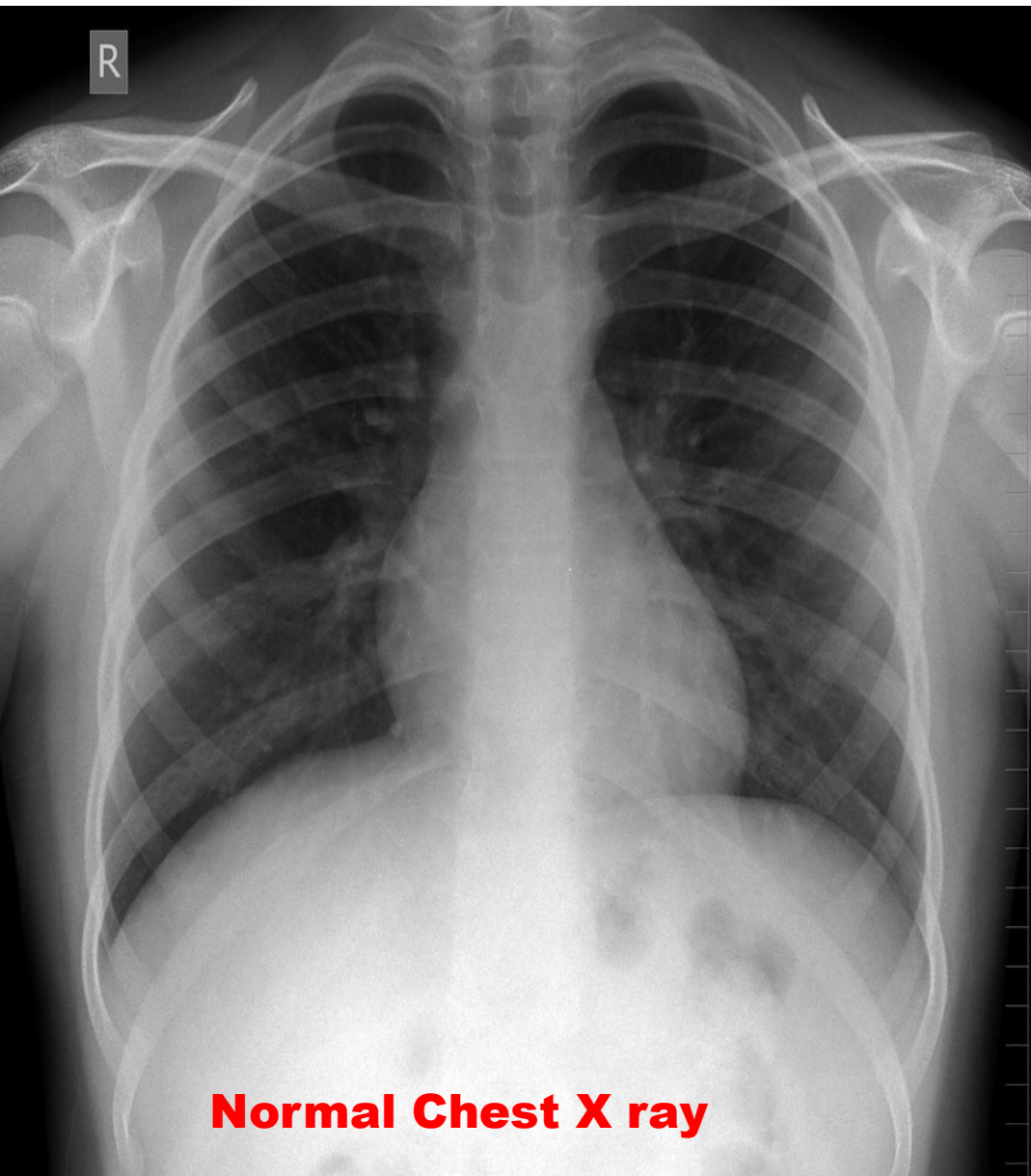


Mediastinal syndrome

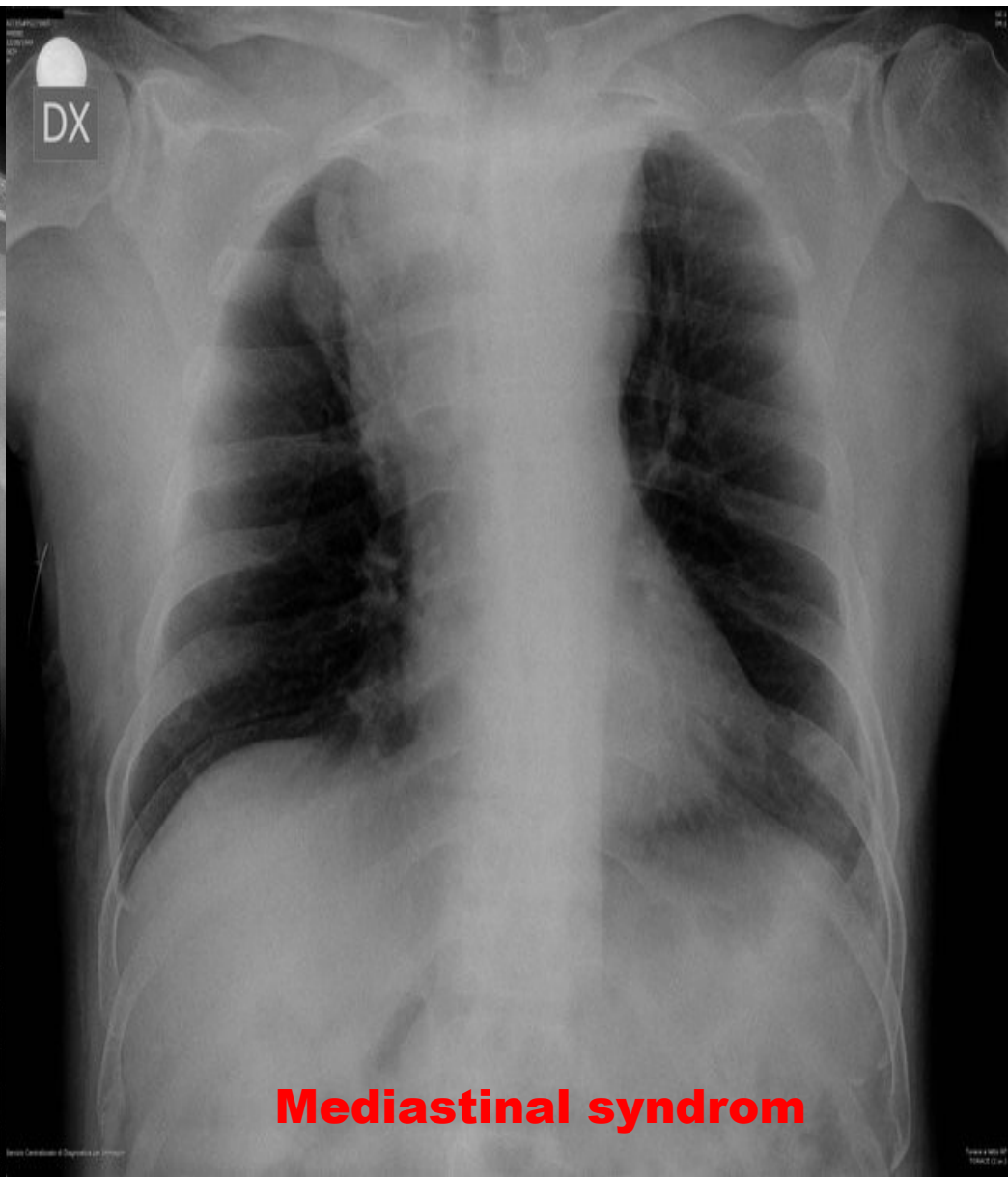
Definition: group of symptoms due to compression of the mediastinal contents by a space-occupying lesion.e.g. malignant tumour as lung cancer or non-Hodgkin's lymphoma

Symptoms:

- **Dyspnea:** due to compression of **trachea.**
- **Dysphagia:** due to compression of **esophagus.**
- **Congestion of veins:** due to compression of **SVC.**
- **Ischemia:** due to compression of **branches of arch of aorta.**
- **Hoarseness of voice:** due to compression on **left recurrent laryngeal nerve.**
- **Paralysis of hemi-diaphragm:** due to compression on **phrenic nerve.**



Normal Chest X ray



Mediastinal syndrom

Superior vena cava syndrome

Due to obstruction of Superior vena cava

Manifestation

Dyspnea and edema in the face and arms

Pemberton sign:

Ask the patient to raise both arms above head , facial edema or cyanosis indicates SVCS

<https://www.youtube.com/watch?v=dz4CEkntWPM>



Jugular venous pressure (JVP)

- ✓ It provides an indirect measure of central venous pressure.
- ✓ The internal jugular vein connects to the right atrium without any intervening valves ,thus acting as a column for the blood in the right atrium.

Difference between carotid and jugular pulse

The jugular venous pulse is:

Not palpable.

Obliterated by pressure.

Variable with respiration - it decreases with inspiration.

Causes of increased Jugular venous pressure

Heart failure.

Constrictive pericarditis

Pulmonary hypertension.

Fluid overload – eg. renal disease.

Superior vena cava obstruction .

<https://www.youtube.com/watch?v=4YBXaWWG3Ns>

Jugular venous pressure

