

## Objectives

By the end of the lecture, the student should be able to :
$\checkmark$ Describe the anatomy of the pleura:
subdivisions into parietal \& visceral pleurae, nerve supply of each of them.
$\checkmark$ List the parts of parietal pleura and its recesses.
$\checkmark$ Describe the surface anatomy of both pleurae and lungs.
$\checkmark$ Describe the anatomy of lungs: shape, relations, nerve supply \& blood supply.
$\checkmark$ Describe the difference between right \& left lungs.
$\checkmark$ Describe the formation of bronchopulmonary segments and the main characteristics of each segment in the lung.

## Pleura

- Double-layered serous membrane enclosing the lung.
- Has two layers:
- Parietal layer, which lines the thoracic walls.
- Visceral layer, which covers the surfaces of the lung.

- The two layers continue with each other around the root of the lung, where it forms a loose cuff hanging down called the pulmonary ligament.
- The space between the two layers, the pleural cavity, contains a thin film of pleural serous fluid ( 5-10 ml.)

[^0]

## Parietal Pleura

It is divided according to the region in which it lies and the surfaces it covers, into:
1- Cervical (or cupular)
2-Costal
3- Mediastinal
4- Diaphragmatic


## 1- Cervical Pleura:

- Projects up into the root of the neck about one inch above the medial $1 / 3^{\text {rd }}$ of clavicle.
- It lines the under surface of the suprapleural membrane.


## 2- Costal pleura:

- It lines, the back of the:

1. Sternum,
2. Ribs \& costal cartilages,
3. Intercostal spaces \&
4. Sides of vertebral bodies


## Parietal Pleura

## 3- Mediastinal pleura:

- covers the mediastinum.
- At the hilum, it is reflected on to the vessels and bronchi that enter the hilum of the lung, and continuous with the visceral pleura*.


## 4- Diaphragmatic pleura:

- covers the thoracic (upper) surface of the diaphragm.
* The lung root is a collection of structures (vessels, nerves, lymphatics) that leave the lung and suspend it from the mediastinum. All these structures enter or leave the lung via the hilum - a wedge shaped area on its mediastinal surface. The parietal and visceral pleura meet and join around the hilum.



## Pleural Recesses

Recess: a small, empty space or cavity

## 1- Costodiaphragmatic Recess:

Slit like space between costal and diaphragmatic pleurae, along the inferior border of the lung which enters through it in deep inspiration.

## 2- Costomediastinal Recess:

Slit like space between costal and mediastinal pleurae, along the anterior border of the lung which enters through it in deep inspiration.

[^1]

## Pleura: <br> Nerve Supply

## Parietal pleura:

- It is sensitive to pain, pressure, temperature, and touch.
- It is supplied as follows:
- Costal pleura is segmentally supplied by the intercostal nerves.
- Mediastinal pleura is supplied by phrenic nerves.
- Diaphragmatic pleura is supplied in the central part (over the diaphragmatic domes) by phrenic nerves, around the periphery by lower 6 intercostal nerves.


## Visceral pleura:

- sensitive to stretch only and is supplied by the autonomic fibers from the pulmonary plexus.



## Surface Anatomy of the Pluera

- Apex: lies one inch above the medial $1 / 3$ of the clavicle.
- The anterior margin:
-Right pleura: The anterior margin extends vertically from sterno-clavicular ioint to $6^{\text {th }}$ costal cartilage.
-Left pleura: The anterior margin extends from sternoclavicular ioint to the $4^{\text {th }}$ costal cartilage, then deviates for about 1 inch to left at $\underline{6}^{\text {th }}$ costal cartilage to form cardiac notch. ${ }^{\text {Because }}$ on the left side
- Inferior margin : passes around the chest wall, on the $8^{\text {th }}$ rib in midclavicular line, $10^{\text {th }}$ rib in mid-axillary line and inally reaching to the last thoracic spine (T12 spine). The inferior margin of lung: above in T10.
- Posterior margin : along the vertebral column from the apex to the inferior margin ( T12 spine).



## Surface Anatomy of the Lungs

- Apex, anterior border and posterior border correspond nearly to the lines of pleura but are slightly away from the median plane.
- Inferior margin : as the pleura but more horizontally and finally reaching to the $\mathbf{1 0}^{\text {th }}$ thoracic spine. (The inferior margin of pleura: T12.)
- Oblique fissure: (both right and left lungs)

Represented by a line extending from $\underline{3}^{\text {rd }}$ thoracic spine, obliquely ending at $6^{\text {th }}$ costal cartilage.

- Transverse (or horizontal) fissure: Only in the right lung:

Represented by a line extending from $4^{\text {th }}$ right costal cartilage to meet the oblique fissure.


## Pleural Effusion

- It is an abnormal accumulation of pleural fluid about $\mathbf{3 0 0} \mathbf{~ m l}$, in the
Costodiaphragmatic pleural recess, (normally 5-10 ml fluid)
- Causes: inflammation, TB, congestive heart disease and malignancy.
- The lung is compressed \& the bronchi are narrowed.
- Auscultation would reveal only faint \& decreased breathing sounds over compressed or collapsed lung lobe.
- Dullness on percussion over the effusion.

Extra information:
Treatment of pleural effusion is
aspiration of the fluid (thoracentesis).



Percussion: (by the hand) the act or technique of tapping the surface of a body part to learn the condition of the parts beneath by the
resulting sound.

## Lungs



- Located in the thoracic cavity, one on each side of the mediastinum .
- Each lung is:
- Conical in shape. (شكل مخروط)
- Covered by the visceral pleura.
- Suspended free in its own pleural cavity.
- Attached to the mediastinum only by its root.
- Each lung has:

1-Apex and base: identify the top and bottom of the lung, respectively.
2-Costal surface: surrounded by the ribs from front \& back. 3-Medial surface: Where the bronchi, blood vessels, and lymphatic vessels enter the lung at the hilum.

- It is also related to the structures forming the mediastinum.



## Lungs

## Apex and Base

## Apex:

- Projects into the root of the neck
(1/2 an inch( 1.27 cm ) above medial $1 / 3$ of clavicle)
o It is covered by cervical pleura.
o It is grooved anteriorly by subclavian artery.


## Base:

- inferior or diaphragmatic surface is concave
$o$ and rests on the diaphragm



## Lungs <br> Borders

## Anterior border :

- Is sharp, thin and overlaps the heart.
- Anterior border of left lung presents a cardiac notch at its lower end, has a thin projection called the lingula below the cardiac notch.



## Posterior border :

- is rounded, thick and lies beside the vertebral column.



## Lungs

Surfaces

## Costal Surface:

- Convex.
- Covered by costal pleura which separates lung from: ribs, costal cartilages \& intercostal muscles.


[^2]
## Mediastinal Surface: <br> It is divided into 2 parts:

## Anterior (mediastinal) part:

Contains a hilum in the middle (it is a depression in which bronchi, vessels, \& nerves forming the root of lung).

## Posterior (vertebral) part:

## It is related to:

- Bodies of thoracic vertebrae,
- Intervertebral discs,
- Posterior intercostal vessels
- Sympathetic trunk.


## Lungs

Right Lung Root (hilum)

- 2 bronchi: (middle \& inferior lobar bronchi) Lies most posterior.
- Pulmonary artery: is most superior
- Pulmonary veins: are inferior and anterior.


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Left Lung Root
(hilum)

- One bronchus: lies posterior
- Pulmonary artery: is most superior
- Pulmonary veins: are inferior and anterior


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\begin{aligned}
& \text { ملاحظة :الدكتورة نبهت على أن هذي الصور } \\
& \text { تجي كثير في امتحان OSPEوقالت مهم } \\
& \text { تعرفون الفُرق بين arteries \& veins }
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Pulmonary Circuit


## Systemic Circuit

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    ركزت على هذي الأجزاء أثناء المحاضرة
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## Lungs

## Right lung

- Larger \& shorter than left lung.
- Divided by 2 fissures (oblique \& horizontal) into 3 lobes (upper, middle and lower lobes).


Left Lung

- Divided by one oblique fissure into 2 lobes, Upper and lower.
- There is No horizontal fissure.
- It has a cardiac notch at lower part of its anterior border.


## Lungs

## Mediastinal surface of right lung

On the mediastinal surface of the right lung, you find these structures:

- Azygos vein and its arch (posterior and over the root of the lung).
- Vagus nerve posterior to the root of the lung.
- Esophagus posterior to the root.
- Phrenic nerve anterior to the root of the lung.
- Cardiac impression: related to right atrium.
- Below hilum and in front of pulmonary ligament : groove for I.V.C. (inferior vena cava)

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## Lungs <br> Mediastinal surface of left lung

On the mediastinal surface of the left lung, you will find these structures:

- Descending aorta posterior to the root.
- Vagus nerve posterior to the root of the lung
- Arch of the aorta over the root of the lung
- Groove for left common carotid and left subclavian arteries.
- Phrenic nerve anterior to the root of the lung
- Cardiac impression: related to left ventricle.

Note:
Cardiac impression:
Right lung = right atrium
Left lung = left ventricle


## Lungs

## Blood and Nerve Supply

- Bronchial arteries (From descending aorta).... It supplies oxygenated blood to bronchi, lung tissue \& visceral pleura.
- Pulmonary artery which carries non-oxygenated blood from right ventricle to the lung alveoli.
- Bronchial veins: drain into azygos \& hemiazygos veins.
- 2 pulmonary veins : carry oxygenated blood from lung alveoli to the left atrium of the heart.

Pulmonary plexus at the root of lung....is formed of autonomic N.S. from sympathetic \& parasympathetic fibers.

1-Sympathetic Fibers
From: sympathetic trunk Action:

1. broncho-dilatation 2. vasoconstriction.

2- Parasympathetic Fibers
From: Vagus nerve
Action:

1. Broncho-constriction
2. vasodilatation
3. secretomotor to bronchial glands


## Lungs <br> Bronchi

The trachea divides into 2 main bronchi:

- Right main bronchus:
which divides before entering the hilum, it gives: superior lobar (secondary) bronchus.


On entering hilum, it divides into middle \& inferior lobar bronchi.

- Left main bronchus:

On entering hilum, it divides into superior \& inferior lobar bronchi.


## Lungs

Bronchopulmonary segments

- They are the anatomic, functional, and surgical units of the lungs.
- Each lobar (secondary) bronchus gives segmental (tertiary) bronchi.
- Each segmental bronchus divides repeatedly into bronchioles.
- Bronchioles divide into terminal bronchioles, which show delicate outpouchings 'the respiratory bronchioles'.



## Lungs

## Bronchopulmonary segments

- The respiratory bronchioles end by branching into alveolar ducts, which lead into alveolar sacs.
- The alveolar sacs consist of several alveoli, each alveolus is surrounded by a network of blood capillaries for gas exchange.



## Lungs

## Bronchopulmonary segments

The main characteristics of a bronchopulmonary segment:

- It is a subdivision of a lung lobe.
- It is pyramidal shaped, its apex toward the lung root.
- It is surrounded by connective tissue septa.
- It has a segmental bronchus, a segmental artery, lymph vessels, and autonomic nerves.
- The segmental vein lies in the inter- segmental C.T. septa between the segments.
- A diseased segment can be removed surgically, because it is a structural unit.



## Lungs <br> Bronchopulmonary segments

nchopulmonary segments the left lung from the lateral side


## Left bronchog



Superior lobe
1 Apical
2
${ }_{2} 2$ Posterior
$\begin{array}{ll}3 & \text { Anterior } \\ 4 & \text { Superior lingular } \\ 5 & \end{array}$
Inferior lobe
Inferior lobe
6 Apical (superior)
Apical (superior)
Medial basal (cardiac) Mnterior basal
9 Lateral basal

Bronchopulmonary segments of the right lung from the lateral side


Right brons



1. The bronchi in the right lung root lie:

## Questions

a. Anteriorly
b. Posteriorly
c. Superiorly
d. Inferiorly
e. Both a and d

Answer: B
2. The pulmonary veins of the right lung root lie:
a. Anteriorly
b. Posteriorly
c. Superiorly
d. Inferiorly
e. Both a and d

Answer: E
3. The cardiac impression in the right lung is related to the:
a. Right atrium
b. Right ventricle
c. Left ventricle
d. Inferior vena cava

## Answer: A

4. Which of the following statements is incorrect?
a. The pulmonary veins in the left lung root lie anteriorly and inferiorly
b. The pulmonary artery in the right lung root lies superiorly
c. The left lung root has two bronchi
d. The right lung root has two bronchi

Answer: C
5. Which feature is found only in the left lung?
a. Cardiac notch
b. Transverse fissure
c. Oblique fissure
d. Cardiac impression

Answer: A
6. Which of the following structures carries oxygenated blood from the lung alveoli to the left atrium of the heart?
a. Bronchial artery
b. Pulmonary artery
c. Pulmonary veins
d. Azygos vein

## Answer: C

7. Which of the following vessels supplies the lungs themselves with oxygen?
a. Bronchial artery
b. Bronchial vein
c. Pulmonary artery
d. Pulmonary vein

## Questions

8. The lungs and visceral pleura receives parasympathetic innervation from:
a. Cranial nerve IX
b. Vagus nerve
c. Phrenic nerve
d. Spinal nerve II

Answer: B
9. Which of the following is the first branching of the bronchial tree that has gas exchanging capabilities?
a. Alveolar sacs
b. Alveolar ducts
c. Terminal bronchioles
d. Respiratory bronchioles

Answer: D
10. The pleural cavity, contains a thin film of pleural serous fluid. what is the normal value:
A) $5-10 \mathrm{ml}$.
B) $10-20 \mathrm{ml}$.
C) 50 ml .
D) 300 ml .

Answer: A
11. Which one of the parietal pleura covers the thoracic (upper) surface of the diaphragm:
A) Cervical Pleura.
B) Costal pleura.
C) Mediastinal pleura.
D) Diaphragmatic pleura
12. Pleural Recesses are :
A) Costodiaphragmatic.
B) Costomediastinal.
C) none of them.
D) all of them.

Answer: D
13. Mediastinal pleura is supplied by:
A) laryngeal nerve.
B) phrenic nerve.
C) intercostal nerves.
D) vagus nerve

Answer: B
14. The anterior margin of the left pleura has:
A) Cardiac notch.
B) lingula.
C) none of them.
D) all of them.

Answer: D
15. Cause of Pleural Effusion is :
A) TB. B)infections. C) congestive heart disease.
D) all of them

Answer: D
16. The apex of the lungs is grooved anteriorly by :
A) subclavian artery.
B) Azygos vein.
C) phrenic nerve.
D)Cardiac impression

Answer: A

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[^0]:    When this fluid increases above normal it is called pleural effusion (will be discussed later).

[^1]:    These spaces allow the lung more room to expand during deep inspiration.

[^2]:    Lateral \& medial surfaces of right lung

