## Lung \& Pleura

Lecture ₹

Please check our Editing File.

## Objectives

- Describe the anatomy of the pleura:
- Subdivisions into parietal \& visceral pleura, nerve supply of each part.
- List the parts of parietal pleura and its recesses.
- Describe the surface anatomy of both pleura and lungs.
- Describe the anatomy of lungs: shape, relations, nerve supply, blood supply.
- Describe the difference between right \& left lungs.
- Describe the formation of bronchopulmonary segments and the main characteristics of these segment in the lung.
- Text in BLUE was found only in the boys'slides
- Text in PINK was found only in the girls 'slides
- Text in RED is considered important
- Text in GREY is considered extra notes


## What is Pleura?

- Double-layered serous Membrane / Membranous sac enclosing the lung.
- Has two layers:
- Parietal layer.sllaw cicaroht eht senil hcihw,
- Visceral layer .gnul eht fo secafrus eht srevoc hcihw ,
- 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 r layers:

Is the Pleural cavity.

- It contains a very thin film of pleural fluid l...0) ml**.(.

- It is divided according to the region in which it lies and the surfaces it covers, into:



## Parietal Pleura

## - Cervical Pleura:

- Projects upward into the root of the neck:
- About one inch above the medial $1 / \mu \mathrm{rd}$ of clavicle.
- It lines the under surface of the

Suprapleural membrane.

- Costal pleura:
lines, the back of the:
■ Sternum.
- Ribs.
- Costal cartilages.
- Intercostal spaces.
- Sides of vertebral bodies.
- Mediastinal pleura:

Covers the Mediastinum:

- At the Hilum.
- It is reflected on to the vessels and bronchi, that enter the hilum of the lung.
It is continuous with the visceral pleura.
- Diaphragmatic pleura:

Covers the:

- Upper eht fo ecafrus (cicaroht) .mgarhpaid


## Making It Clear...


watch Dr..Sam for better understanding(: press the ic $\bar{\pi}$


## Pleuldl Recesses

- Costodiaphragmatic Recess:
- Slit like space* between Costal \& Diaphragmatic Pleurae
- Along the inferior border of the lung.
- The lung enters through it in deep inspiration.
- Costomediastinal Recess:
- Slit like space between Costal and Mediastinal Pleurae, .gnul eht fo redrob roiretna eht gnola
- The lung enters through it in deep inspiration.

- Parietal pleura: (PPTT).
- 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 as follow:
- Central part (over diaphragmatic domes) by phrenic nerves.
- Around the periphery by lower 7 intercostal nerves.
- Visceral pleura:
- sensitive to stretch only and is supplied by the autonomic fibers from the pulmonary plexus.



## Surface Anatomy of the Pleura

- Apex
- Lies one inch above the medial $1 / \tau$ of the Clavicle.
- Right pleura:
- The anterior margin extends vertically from Sternoclavicular joint to ${ }^{7}$ th costal cartilage.
- Left pleura:
- The anterior margin extends from Sternoclavicular joint to the sth costal cartilage, then deviates for about I inch to left at 7th Costal cartilage to form the Cardiac notch.
- Inferior margin:
- Passes around the chest wall, on the 1 th rib in midclavicular line, 1 • th rib in mid-axillary line and finally reaching to the last Thoracic spine(TIr spine).
- Posterior margin :
- Along the vertebral column from the apex to the inferior margin (TIr spine).


## Surface Anatomy of the Lung

- 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 1.th thoracic spine.
- Oblique fissure:
- Represented by a line extending from rrd thoracic spine, obliquely ending at 7 th costal cartilage.
- Transverse fissure: Only in the right lung:
- Represented by a line extending from sth right costal cartilage to meet the oblique fissure.


## Surface Anatomy of the Lungs \& Pleura Cont.



## Pleural effusion

- It is an abnormal accumulation ${ }^{r}$. . tuoba diufl laruelp fo ml .
- In the Costodiaphragmatic pleural recess) , normally $1 .-0 \mathrm{ml}$ fluid.(
- Causes:
- inflammation.
- TB.
- Congestive heart disease.
- Malignancy, (Mesothelioma of the pleural sac).
- The lung is compressed eht \& bronchi are narrowed.
- Auscultation would reveal only faint \& decreased breathing sounds over compressed or collapsed lung lobe.
- Dullness on percussion over the effusion.*

> *Percussion ot ecafrus a no gnippat fo dohtem a si .erutcurts gniylrednu eht enimreted
> Dullness dilos ro diufl nehw ecnanoser secalper
> sa hcus ,seussit gnul gniniatnoc-ria secalper eussit
> .sromut ro ,snoisuffe laruelp ,ainomuenp htiw srucco


- Located in the Thoracic cavity.munitsaideM eht fo edis hcae no eno ,
- Each lung is:
- Conical in shape شكل مخروطي *
- Covered by the visceral pleura.
- Suspended free in its own pleural cavity.
- Attached to the mediastinum only by its root.
- Each lung has:
- Apex and Base:
- Identify the top and bottom of the lung, respectively.
- Costal surface:
- Surrounded by the ribs and intercostal spaces from front, side \& back.


## Medial surface:

- Where the bronchi, blood vessels, and lymphatic vessels enter or leave the lung at the Hilum.
- It is also related to the structures forming the Mediastinum.



## Borders:

## Anterior \& Posterior

## Surfaces:

## Costal § Mediastinal

Right lung has ${ }^{\circ}$ Iobes; Left has Less Lobes (alugniL dna ( $\upharpoonright$

- Apex:
- Projects into the root of the neck.
- $\quad 1 / \uparrow$ )an inch above medial $1 / \uparrow$ of the clavicle. (
- It is covered by cervical pleura.
- It is grooved anteriorly by subclavian artery. - Base:
- Inferior, (diaphragmatic surface) is concave and rests on the diaphragm.
- Anterior border:
- It is sharp, thin and overlaps the heart.
- Anterior border of left lung presents a Cardiac Notch at its lower end.
- It has a thin projection called the Lingula .hctoN caidraC eht woleb
- Posterior border:
- It is thick and rounded, and lies along the vertebral column.
- Costal surface:

Covered by Costal pleura which separates the lung from:

- Ribs, costal cartilages \& intercostal muscles.
- Medial surface:
- It is divided into r 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:

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


## Lung Roots

Arteries are vessels which take blood from the heart no matter it was Oxygenated or Deoxygenated. Here it's shown Blue so it's Deoxygenated For that you mustn't confuse such thing^-^


## Lungs fith

Right Lung

- Larger \& shorter than left lung.
- Divided by:
- rfissures:
- Oblique fissure.
- Horizontal fissure.
- Intor lobes:
- Upper lobe.
- Middle lobe.
- Lower lobe.





## Mediastinal Surfaces



Mediastinal surface of the right lung


## Mediastinal surface of the left lung



## Blood Supply of the Lung

## Nerve Supply of the Lung

- Pulmonary plexus:gnul fo toor eht ta
- Is formed of Autonomic Nervous System:
- Sympathetic fibers.
- Parasympathetic fibers.
- Sympathetic Fibers:
- From:
- Sympathetic trunk.
- Action:
- broncho-dilatation.
- vasoconstriction.
- Parasympathetic Fibers:
- From:
- Vagus nerve.
- Action:
- Broncho-constriction.
- Secretomotor to bronchial glands.
- Vasodilatation.


## Bronchi

- The Trachea divides into r Main Bronchi:
- Right main bronchus:sedivid hcihw,
- Before entering the Hilum, it gives:
- Superior lobar (secondary) bronchus.
- On entering hilum, it divides into:
- Middle lobar bronchus.
- Inferior lobar bronchus.
- Left main bronchus:
- On entering hilum, it divides into:

- Superior lobar bronchus.
- Inferior lobar bronchus.


## Bronchopulmonary Segments

- These are the Anatomical, Functional, and Surgical.sgnul eht fo stinu
- Each lobar (secondary) bronchus sevigsegmental (tertiary) bronchi.
- Each segmental bronchus sedivid otni yldetaeperbronchioles.
- Bronchioles otni edivid terminal bronchioles etaciled wohs hcihw, - *sgnihcuoptuothe respiratory bronchioles.'
- The respiratory bronchioles gnihcnarb yb dne otnialveolar ducts otni dael hcihw, alveolar sacs.
- The alveolar sacs:
- Consist of several alveoli.
- Each alveolus krowten a yb dednuorrus si .egnahcxe sag rof seirallipac doolb fo

*Outpouchings تجيّب خارجي :


## 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.
- Segmental artery.
- Lymph vessels.
- Autonomic nerves.
- The segmental vein neewteb atpes eussit evitcennoc latnemges -retni eht ni seil .stnemges eht
- A diseased segment can be removed surgically, because it is a structural unit.

$$
\begin{aligned}
& \text { ملاحظة: لسنا مُطالبون بحفظ الأسماء، } \\
& \text { المطلوب منا معرفة تو اجد هذه الأجز اء. ^ــ }
\end{aligned}
$$



## Extra Visuals May Help You Understand More About Lung Structures



## MCQs:

-The volume in the pleural cavity is:

A-r.-r.ml

B- r.-. 10 ml

C- $1 . .0 \mathrm{ml}$

D- $|r-\wedge m|$
-rHow many regions are in the parietal pleura?

A- V

B- $\varepsilon$

C-

D-

## -rCostal pleura covers:

A- The back of the sternum.
$B$ - The front of the ribs.

C- The front of the costal cartilages.

D- The front of the intercostal spaces.

- \&Diaphragmatic pleura covers:

A- The mediastinum.

B- The upper surface of the diaphragm.

C- The back of the sternum

D- The sides of the vertebral bodies.

## -- What is the normal volume of fluid in pleura?

A- $\stackrel{r}{ } \cdot \mathrm{ml}$.

B- $1 . \cdot \mathrm{ml}$.

C- $1 .-0 \mathrm{ml}$.

D-V. $-7 \cdot \mathrm{ml}$.

- TPleura is a ......... serous membranous sac enclosing the lung.

A- Single-layered.

B- Double-layered.

C- Triple-layered.

D- Quadruple-layered.
-vLayer lines between the thoracic walls.
A- Parietal layer.
B- Visceral layer.
C- Oblique fissure.
D- Horizontal fissure.
-^Which part of parietal pleura lines under surface of the Suprapleural membrane?

A- Costal.
B- Mediastinal.
C- Cervical.
D- Diaphragmatic.

## -9Which part of parietal pleura is supplied only by phrenic nerves?

## A- Costal.

B- Mediastinal.

C- Cervical.

D- Diaphragmatic.
$-) \cdot$ Visceral pleura is supplied by:

A- Autonomic fibers.

## B- Phrenic nerves.

C- intercostal nerves.

D- thoracic nerve.

- 1 The Cardiac notch in the left pleura is formed at:

A- $\varepsilon$ th costal cartilage.
B- oth costal cartilage.
C- 7th costal cartilage.
D- Vth costal cartilage. $^{\text {th }}$
-1 rWhich of the following is not a cause of pleural effusion?
A- Inflammation.
B- TB.
C- Myopathy.
D- Heart disease.
E- Tumors.

## - IrWhich of the following is NOT?gnul tfel eht fo citsiretcarahc a

A- It has a horizontal fissure.

B- It has a cardiac notch.

C- It has an oblique fissure.

D- It is divided into rlobes.
-1 §The cardiac impression in the mediastinal surface of the right lunge is related to:

A- Left atrium.

B- Right atrium.

C- Left Ventricle.
D- Right ventricle.
-l 0 Which of the following you can find only on the mediastinal surface of the right lung

A- Vagus nerve.
B- Phrenic nerve.
C- Descending aorta.
D- Azygos vein.

- 1 The main bronchus is the:

A- Right bronchus.

B- Left bronchus.

- IrWhat is the action of sympathetic fibers?

A- Broncho-dilatation

B- Broncho-constriction

C- Secretomotor to bronchial glands

## Team Members

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