



## Lung & Pleura

Lecture £



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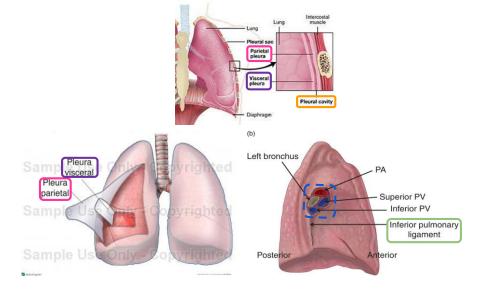
هذا العمل لا يغني عن المصدر الأساسي للمذاكرة

## Objectives

- Describe the anatomy of the <u>pleura</u>:
- <u>Subdivisions</u> into parietal & visceral pleura, <u>nerve supply</u> of each part.
- List the parts of parietal pleura and its recesses.
- Describe the <u>surface anatomy</u> of both pleura and lungs.
- Describe the <u>anatomy of lungs</u>: shape, relations, nerve supply, blood supply.
- Describe the <u>difference between right & left lungs</u>.
- Describe the formation of <u>bronchopulmonary segments</u> and the <u>main</u> <u>characteristics</u> 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

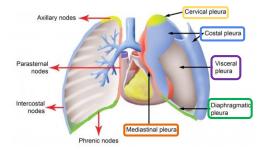
### What is Pleura?

- 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 <sup>x</sup> layers:
  - Is the **Pleural cavity**.
  - It contains a very thin film of pleural fluid 1.-•) ml\*\*.(.



زي الأعصاب و الأوعية الدموية. \*ال ROOT مكوّن من الأشياء اللي تدخل و تطلع من ال Hilum of Lung زي الأعصاب و الأوعية الدموية. \*\* ال FLUID يسهل الحركة و يمنع التصاق الغشائين مع بعضهم البعض.

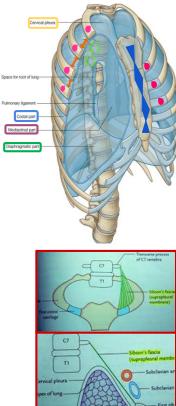
- Parietal Pleura
- It is divided <u>according to the region in which it lies and the</u> <u>surfaces it covers</u>, into:
  - Cervical
  - Costal.
  - Mediastinal.
  - Diaphragmatic.



### Parietal Pleura

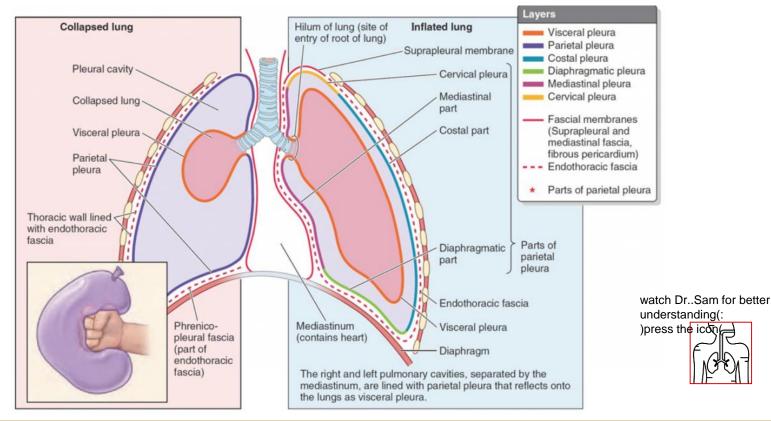
#### • Cervical Pleura:

- Projects upward into the root of the neck:
  - About one inch above the <u>medial \/\mathcal{rrd} of</u> <u>clavicle</u>.
  - It <u>lines</u> the under surface of the Suprapleural membrane.
    - Costal pleura:
- <u>lines</u>, the back of the:
  - Sternum.
  - Ribs.
  - Costal cartilages.
  - Intercostal spaces.
  - Sides of vertebral bodies.



	• Mediastinal pleura:
0	<ul> <li><u>Covers</u> the <u>Mediastinum</u>:</li> <li>At the <u>Hilum</u>.</li> <li>It is reflected on to the vessels and bronchi, that enter the hilum of the</li> </ul>
0	lung. It is <u>continuous</u> with the visceral pleura.
	• Diaphragmatic pleura:
0	Covers the: ■ Upper eht fo ecafrus (cicaroht) .mgarhpaid
	/

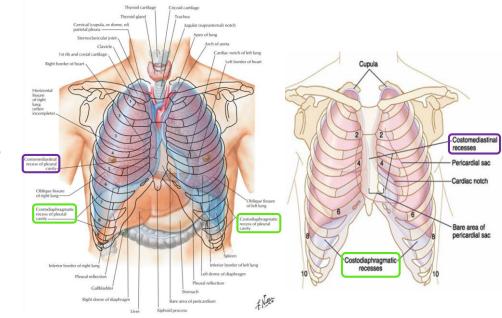
## Making It Clear...



# Recesses

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

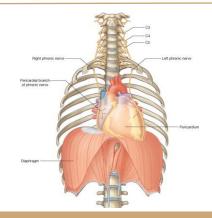
\*فراغ يشبه الشق



Pleura: Nerve Supply

#### • Parietal pleura: (PPTT).

- Sensitive to Pain, Pressure, Temperature, and Touch .
- It is <u>supplied as follows</u>:
  - Costal pleura is segmentally supplied by the intercostal nerves .
  - <u>Mediastinal pleura</u> is supplied by phrenic nerves .
  - <u>Diaphragmatic pleura</u> is supplied as follow:
    - Central part (over diaphragmatic domes) by phrenic nerves.
    - Around the periphery by lower <sup>¬</sup> intercostal nerves.
- Visceral pleura:
  - sensitive to stretch only and is supplied by the <u>autonomic fibers</u> from the <u>pulmonary plexus</u>.



# Surface Anatomy of the Pleura

#### Apex:

• Lies one inch above the <u>medial \/r</u> of the Clavicle.

#### Right pleura:

The <u>anterior</u> margin extends vertically <u>from</u>
 Sternoclavicular joint to <sup>↑</sup>th costal cartilage.

#### • Left pleura:

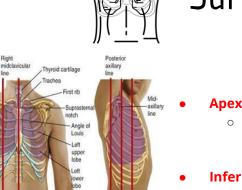
 The <u>anterior</u> margin extends <u>from</u>
 Sternoclavicular joint <u>to</u> the <u>\$th</u> costal cartilage, <u>then deviates for about 1 inch to left</u> at <u>1th</u> Costal cartilage to form the <u>Cardiac notch</u>.

#### Inferior margin:

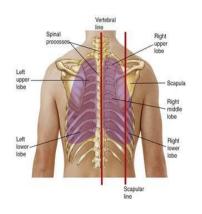
 Passes around the chest wall, on the <u>Ath rib in</u> <u>midclavicular line</u>, <u>Ath rib in mid-axillary line</u> and <u>finally reaching to the last Thoracic</u> <u>spine(TX spine)</u>.

#### • Posterior margin :

 Along the vertebral column from the apex to the inferior margin (דוז spine).



Anterior axillary



Midsternal

line

axillary line

Right

lobe

A

middle

# Surface Anatomy of the Lung

#### Apex, anterior border and posterior border:

 <u>Correspond nearly to</u> the lines of Pleura but are slightly <u>away from the median</u> <u>plane</u>.

#### Inferior margin:

 As the pleura but more horizontally and finally reaching to <u>the 1.th</u> thoracic <u>spine.</u>

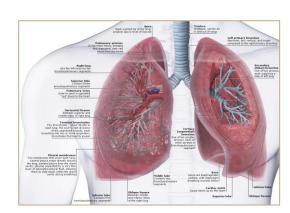
#### Oblique fissure:

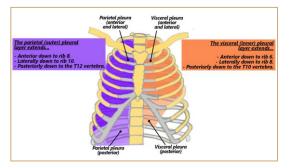
 Represented by a line extending from <u>rrd</u> thoracic spine, obliquely ending at <u>th</u> costal cartilage.

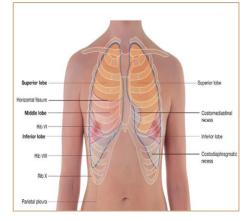
#### • Transverse fissure: Only in the right lung:

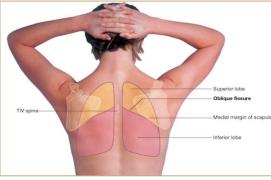
 Represented by a line extending <u>from εth</u> right costal cartilage to meet <u>the</u> oblique fissure.

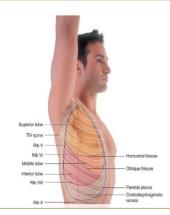
### Surface Anatomy of the Lungs & Pleura Cont.

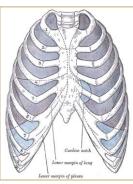












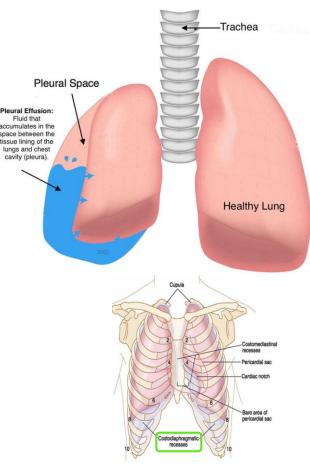


#### Pleural Effusion

# Pleural effusion

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

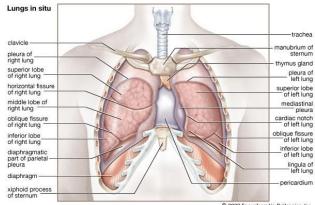
\***Percussion** ot ecafrus a no gnippat fo dohtem a si .erutcurts gniylrednu eht enimreted **Dullness** dilos ro diufl nehw ecnanoser secalper sa hcus ,seussit gnul gniniatnoc-ria secalper eussit .sromut ro ,snoisuffe laruelp ,ainomuenp htiw srucco



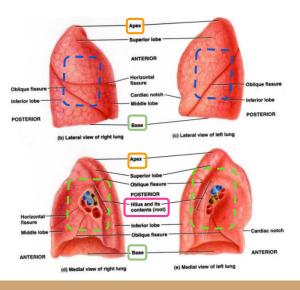




- Located in the Thoracic cavity.munitsaideM eht fo edis hcae no eno,
- Each lung is:
  - Conical in shape شکل مخروطي
  - <u>Covered by</u> the visceral pleura.
  - <u>Suspended free in</u> its own pleural cavity.
  - <u>Attached to</u> the mediastinum only by its root.
- Each lung has:
  - Apex and Base:
    - Identify the top and bottom of the lung, <u>respectively</u>.
  - Costal surface:
    - <u>Surrounded by</u> the ribs and intercostal spaces from <u>front</u>, side & back.
  - Medial surface:
    - Where the <u>bronchi</u>, <u>blood vessels</u>, and <u>lymphatic vessels</u> enter or leave the lung <u>at the</u> Hilum.
  - It is also <u>related to</u> the **structures forming the Mediastinum.**



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### Lungs

### Borders: Anterior & Posterior

Right lung has  ${}^{\tau}$  lobes; Left has Less Lobes (alugniL dna ( ${}^{\tau}$ 

- Apex:
- Projects into the <u>root of the neck.</u>
- \/\f`)an inch above medial \/\f` of the clavicle.(
- <u>It is covered</u> by cervical pleura.
- It is grooved <u>anteriorly</u> by <u>subclavian artery</u>.
  - Base:
- Inferior, (diaphragmatic surface) is <u>concave</u> and rests on the <u>diaphragm.</u>

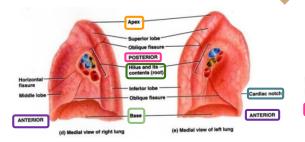
- Anterior border:
- It is sharp, thin and overlaps the heart.
- Anterior border of left lung presents a <u>Cardiac Notch at its lower end</u>.
- It <u>has a thin projection</u> called the Lingula .hctoN caidraC eht woleb
  - Posterior border:
- It is thick and rounded, and lies along the vertebral column.

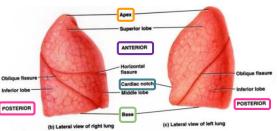
### Surfaces: Costal & Mediastinal

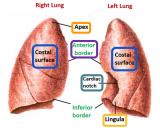
- Costal surface:
- Convex.

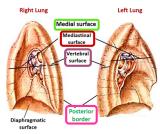
0

- <u>Covered by Costal pleura which separates the</u> <u>lung from:</u>
  - Ribs, costal cartilages & intercostal muscles.
    - Medial surface:
    - It is divided into ۲ parts:
- Anterior (Mediastinal) part:
  - <u>Contains</u> a **Hilum** in <u>the middle</u> (it is a depression in which bronchi, vessels, & nerves forming the root of lung).
- **Posterior (Vertebral) part:** 
  - <u>It is related to:</u>
  - Bodies of thoracic vertebrae, Intervertebral discs, Posterior intercostal vessels, Sympathetic trunk.









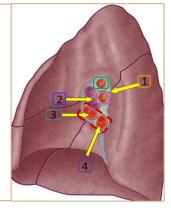
# Lung Roots

Right Lung Root ۲

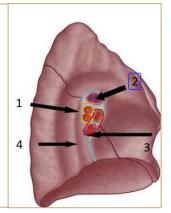
Arteries are vessels which take blood from the heart no matter it was **Oxygenated** or **Deoxygenated**. Here it's shown Blue so it's Deoxygenated. For that you mustn't confuse such thing^-^ .

**\*bronchi:** Middle & Inferior lobar bronchi. 0 Lies Most posterior. Pulmonary artery: o Is Most superior. •

- Pulmonary veins: Are Most Anterior and Most Inferior.



- **One Bronchus:** • Lies Most posterior.
- •
- Pulmonary artery: Is Most superior. Pulmonary veins:
- - Are Most Anterior and Most Inferior. 0



# -eft Lung Root



### Right Lung

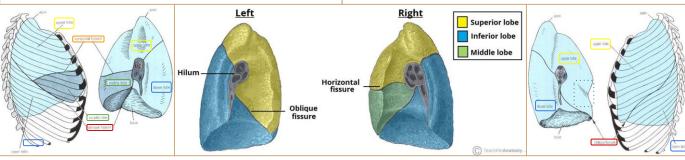
- Larger & shorter than left lung. •
- Divided by: .
  - ۲fissures: 0
    - **Oblique fissure.**
    - Horizontal fissure.
  - Into <sup>r</sup> lobes: 0

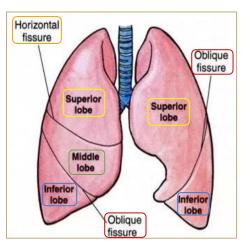
    - Middle lobe.
    - Lower lobe.



- Divided by:
  - \fissure:
    - **Oblique fissure.**
  - Int<u>o ۲ lobes:</u> 0

    - Lower lobe.
  - It has **NO**.erussfi latnoziroH
  - It has a Cardiac Notch of its anterior border.

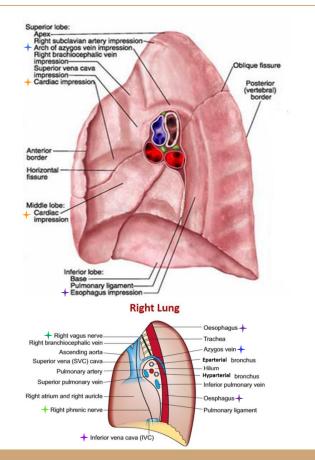




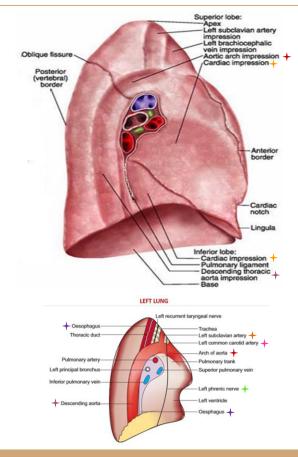
### **Mediastinal Surfaces**

Mediastinal Surface of Right Lung esophagus phrenic On the Mediastinal surface of the right lung:serutcurts eseht dnfi uoy, nerve • Azygos vein and its.(gnul eht fo toor eht revo dna roiretsop) hcrA Ο azygos arch Vagus nerve.gnul eht fo toor eht ot roiretsop 0 azygos vein Esophagus posterior to the root. 0 Phrenic nerve.gnul eht fo toor eht ot roiretna 0 **Cardiac impression:** <u>Related to right atrium.</u> Cardiac Impression Below Hilum fo thorf ni dha Pulmonary ligament: groove for I.V.C\*. 0 \*I.V.C: Inferior Vena Cava. vagus nerve Mediastinal Surface of Left Lung common caroti phrenic artery On the Mediastinal surface of the right lung:serutcurts eseht dnfi uoy, nerve subclavian arterv Descending Aorta.toor eht ot roiretsop 0 Arch of aorta Vagus nerve.gnul eht fo toor eht ot roiretsop 0 Arch of the aorta.gnul eht fo toor eht revo 0 Groove for: 0 Left common carotid artery. Left subclavian artery. Cardiac Phrenic nerve.gnul eht fo toor eht ot roiretna Ο Impression **Cardiac impression:** Related to left ventricle. descending vagus aorta nerve

### Mediastinal surface of the right lung



### Mediastinal surface of the left lung



### Blood Supply of the Lung

### Nerve Supply of the Lung

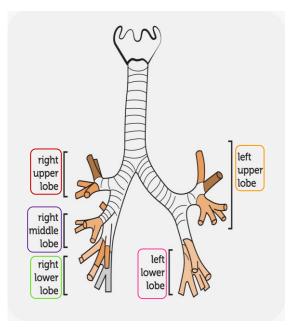
- Bronchial arteries: (atroa gnidnecsed morF)
  - It <u>supply</u> oxygenated blood to: 0
    - Bronchi. -
    - Lung tissue.
    - Visceral pleura.
- **Bronchial veins:** 
  - Drain into: 0
    - Azygos Vein.
    - Hemiazygos Vein.
- **Pulmonary artery:** 
  - Carries Non-oxygenated blood from right 0 ventricle to the lung alveoli.
  - \*Pulmonary veins:

- Carry oxygenated blood from lung alveoli to the Ο left atrium of the heart.

- Pulmonary plexus: gnul fo toor eht ta
  - Is formed of Autonomic Nervous System: 0
    - Sympathetic fibers.
    - Parasympathetic fibers.
- Sympathetic Fibers:
  - From: 0
    - Sympathetic trunk.
  - 0 Action:
    - broncho-dilatation.
    - vasoconstriction.
- **Parasympathetic Fibers:** 
  - From: 0
    - Vagus nerve.
  - Action: 0
    - **Broncho-constriction**.
    - **Secretomotor** to bronchial glands.
    - Vasodilatation.

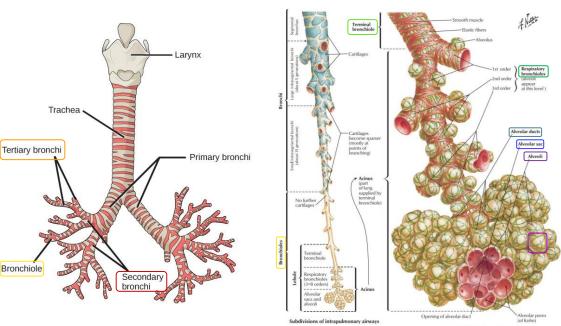
### Bronchi

- The Trachea divides into <sup>4</sup> Main Bronchi:
  - Right main bronchus: sedivid hcihw ,
    - Before entering the Hilum, it gives:
      - Superior lobar (secondary) bronchus.
    - <u>On entering hilum</u>, it divides into:
      - Middle lobar bronchus.
      - Inferior lobar bronchus.
  - Left main bronchus:
    - <u>On entering hilum</u>, 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 <u>yldetaeper</u>bronchioles.
- Bronchioles <u>otni edivid</u> terminal bronchioles etaciled <u>wohs</u> hcihw , '\*sgnihcuoptuothe respiratory bronchioles.'
- The respiratory bronchioles gnihcnarb yb dne otnialveolar ducts otni dael hcihw, alveolar sacs.
- The alveolar sacs:
  - <u>Consist of</u> several **alveoli**.
  - Each **alveolus** krowten a <u>yb dednuorrus</u> si .egnahcxe sag rof seirallipac doolb fo



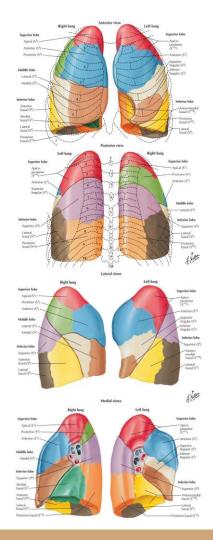
Structure of intrapulmonary airways

: تجيّب خارجيOutpouchings\*

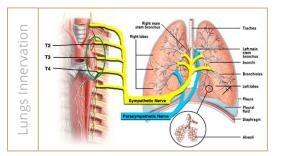
# Bronchopulmonary Segments

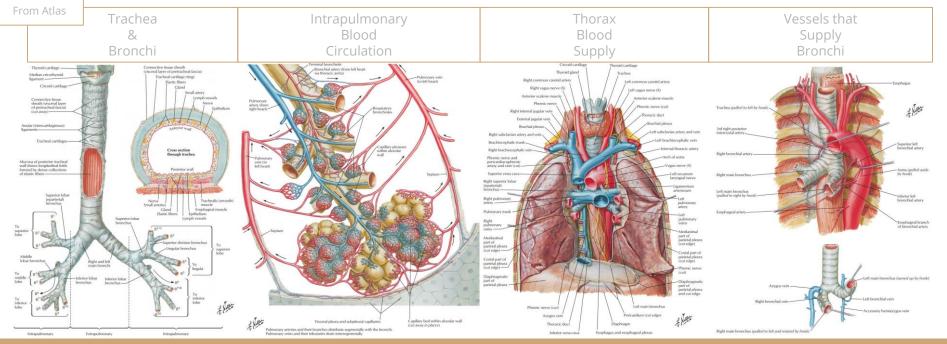
- The main characteristics of a **bronchopulmonary segment**:
  - It is a subdivision of a lung lobe.
  - It is pyramidal shaped.
  - Its <u>apex toward the lung root</u>.
  - It is <u>surrounded by</u> <u>connective tissue septa</u>.
  - It has a:
    - Segmental bronchus.
    - Segmental artery.
    - Lymph vessels.
    - Autonomic nerves.
  - The **segmental vein** <u>neewteb</u> <u>atpes</u> <u>eussit</u> <u>evitcennoc</u> <u>latnemges</u> <u>-retni</u> <u>eht ni seil</u> <u>.stnemges eht</u>
  - A <u>diseased segment</u> can be removed surgically, because it is a structural unit.

ملاحظة: لسنا مُطالبون بحفظ الأسماء، المطلوب منا معرفة تواجد هذه الأجزاء. ^-^



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





## MCQs:

- The volume in the pleural cavity is:	- <sup>r</sup> Costal pleura covers:
A- ۳۰-۲۰ml	A- The back of the sternum.
B- ۲۰-1°ml	B- The front of the ribs.
C- `∙-∘ml	C- The front of the costal cartilages.
D- ۲۰-۸ml	D- The front of the intercostal spaces.
- <sup>Y</sup> How many regions are in the parietal pleura?	-£Diaphragmatic pleura covers:
A- Y	A- The mediastinum.
B- t	B- The upper surface of the diaphragm.
C- °	C- The back of the sternum.
D- ۳	D- The sides of the vertebral bodies.

-°What is the normal volume of fluid in pleura?
A- ۳۰۰ ml.
B- ۱۰۰ ml.
C- ۱۰-°ml.
D- ۲۰ -۲۰ml.
-¬Pleura is a serous membranous sac enclosing the lung.
A- Single-layered.
B- Double-layered.
C- Triple-layered.
D- Quadruple-layered.

- <sup>v</sup> Layer 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.

-°C -1B -YA -^C

		_
-۱Which part of parietal pleura is supplied only by phrenic nerves?	- 1) The Cardiac notch in the left pleura is formed at:	
A- Costal.	A- <sup>₅</sup> th costal cartilage.	
B- Mediastinal.	B- oth costal cartilage.	
C- Cervical.	C- <code>lth costal cartilage.</code>	
	D- <sup>v</sup> th costal cartilage.	
	-۱۲Which of the following is not a cause of pleural effusion?	
- <sup>1</sup> · Visceral pleura is supplied by:	A- Inflammation. B- TB.	
A- Autonomic fibers.	В- ТВ.	
B- Phrenic nerves.	C- Myopathy.	
C- intercostal nerves.	D- Heart disease.	
D- thoracic nerve.	E- Tumors.	

-۱۳Which of the following is <b>NOT</b> ?gnul tfel eht fo citsiretcarahc a	-۱°Which of the following you can find only on the mediastinal surface of the right lung	
A- It has a horizontal fissure.	A- Vagus nerve.	
B- It has a cardiac notch.	B- Phrenic nerve.	
C- It has an oblique fissure.	C- Descending aorta.	
D- It is divided into ۲ lobes.	D- Azygos vein.	
-۱٤The cardiac impression in the mediastinal surface of the right lunge is related	-۱٦The main bronchus is the:	
to:	A- Right bronchus.	
A- Left atrium.	B- Left bronchus.	
B- Right atrium.		
C- Left Ventricle.		
D- Right ventricle.	-۱۷What is the action of sympathetic fibers?	- 1
	A- Broncho-dilatation	- 1
	B- Broncho-constriction	- 1
	C- Secretomotor to bronchial glands	- 1

### **Team Members**

#### Lamia Abdullah Alkuwaiz (Team Leader)

#### Faisal Fahad Alsaif (Team Leader)

Rawan Mohammad Alharbi Abeer Alabduljabbar Afnan Abdulaziz Almustafa Ahad Ahmed Algrain Albandari Alshaye AlFhadah abdullah alsaleem Ghaida Alsanad Layan Hassan Alwatban Lojain Azizalrahman Maha Barakah Majd Khalid AlBarrak Nouf Alotaibi Rinad Musaed Alghoraiby Wafa Alotaibi Wejdan Fahad Albadrani

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