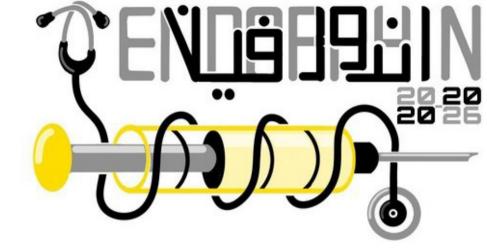
Anatomy



Sheet: 6

Lecture title: Pha

Date:

Done by: Huda Shehadeh

Edited by: Huda Shehadeh

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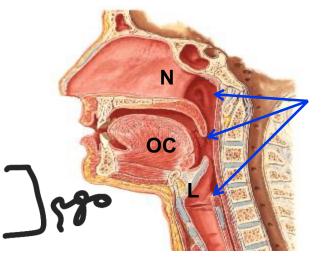
Pharynx

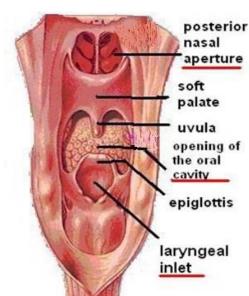
Dr. Refat AboGhazleh



Pharynx

- Muscular tube lying <u>behind</u> the **nose**, oral cavity & larynx.
- Extends from the <u>base of the skull</u> to level of the <u>6th cervical vertebra</u>, where it is continuous with the esophagus.
- The anterior wall is deficient and shows (from above downward):
 - Posterior nasal apertures
 - Opening of the oral cavity
 - Laryngeal inlet





Pharyngeal Wall

 It is a musculo-membranous wall, composed of:

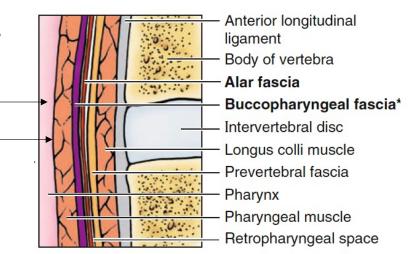
Mucosa & submucosa-

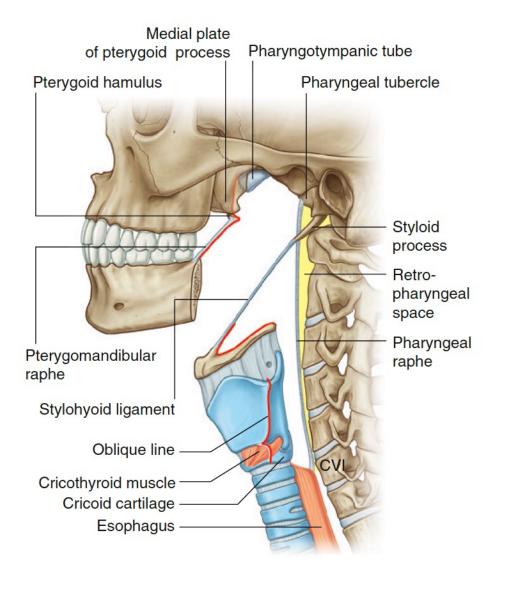
Pharyngobasilar fascia-

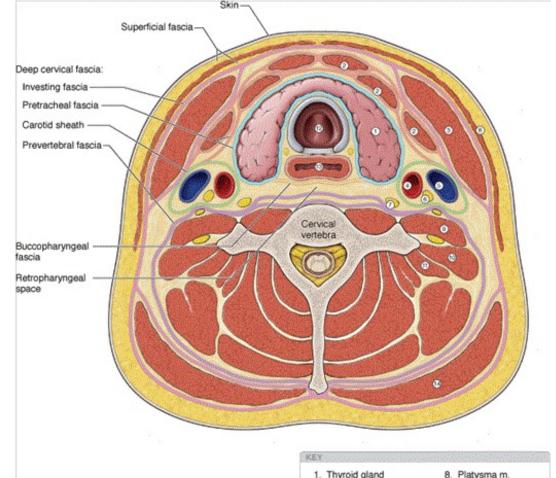
Muscles: circular & longitudinal

Buccopharyngeal fascia

 The buccopharyngeal fascia is separated from the prevertebral fascia by the retropharyngeal space.







	Trifficial granta	O mary on the titl
2.	Infrahyoid mm.	9. Ant. scalene m.
3.	Sternocleidomastoid m.	10. Mid. scalene m.
4.	Common carotid a.	11. Post. scalene m.
5.	Internal jugular v.	12. Trachea
6	Vagus n	13 Esophagus

14. Trapezius m.

7. Sympathetic trunk

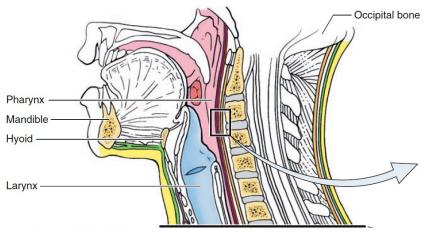
Gross Anatomy: www.accessmedicine.com

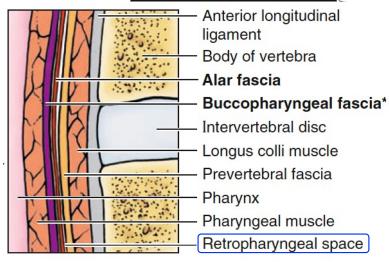
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Source: Morton DA, Foreman KB, Albertine KH: The Big Picture:

Retropharyngeal Space

- A potential space between the buccopharyngeal fascial lining of the pharynx and the prevertebral fascia.
- Contains loose areolar tissue.
- Closed:
 - Superiorly (by the base of the skull)
 - Laterally (by the carotid sheath)
- Open inferiorly into the superior mediastinum.
- Allows movement of pharynx, esophagus, larynx, and trachea during swallowing.





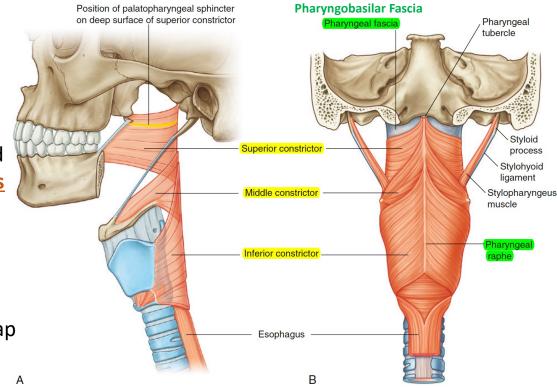




Retropharyngeal abscess

Circular (Constrictor) Muscles "External Layer"

- Three in number:
 Superior, Middle &
 Inferior
- pharynx and are inserted posteriorly into a fibrous raphe that extends from the pharyngeal tubercle on the occipital bone to the esophagus.
- The three muscles overlap each other.



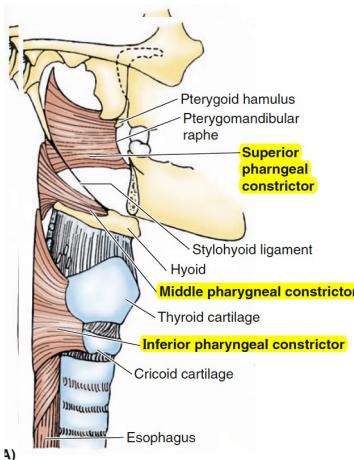
The gap between the superior border of the superior constrictor and the occipital bone is filled by thickened **pharyngobasilar fascia**.

Superior constrictor

- Origin: pterygoid hamulus, pterygomandibular ligament, mylohyoid line
- Insertion: pharyngeal tubercle, pharyngeal raphe

Middle constrictor

- Origin: lower part of stylohyoid ligament, greater & lesser horn of hyoid bone
- Insertion: pharyngeal raphe



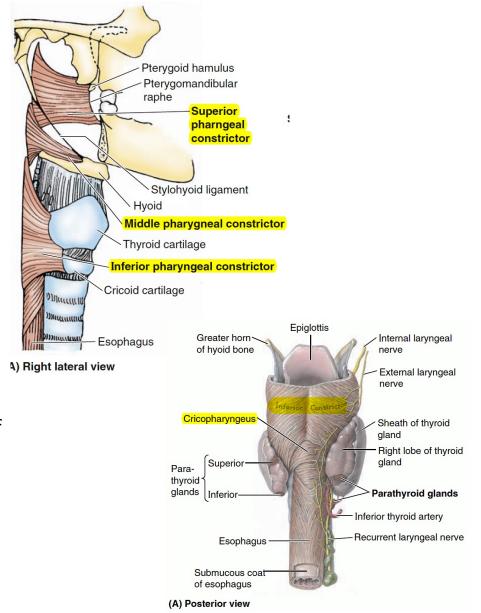
۹) Right lateral view

Inferior constrictor

- Origin: oblique line of thyroid cartilage, cricoid cartilage
- Insertion: pharyngeal raphe

• Functions:

- The constrictor muscles propel the bolus of food down into the esophagus.
- Cricopharyngeus (lower fibers of the inferior constrictor) act as a sphincter, preventing the entry of air into the esophagus between the acts of swallowing.



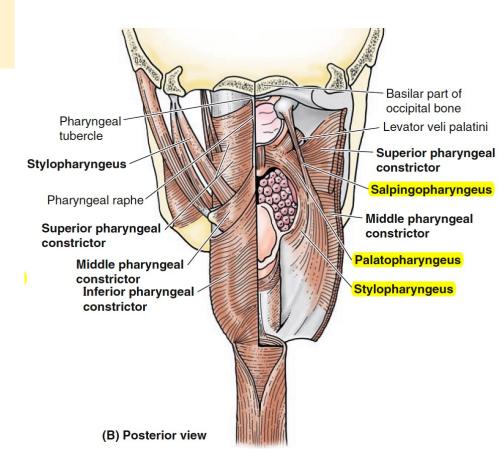
Longitudinal Muscles "Internal Layer"

Three in number:

- Salpingopharyngeus
- Palatopharyngeus
- Stylopharyngeus

• Function:

 Elevate the larynx & pharynx during swallowing.



Salpingopharyngeus

Origin: auditory tube

Insertion: blends with palatopharyngeus.

Palatopharyngeus

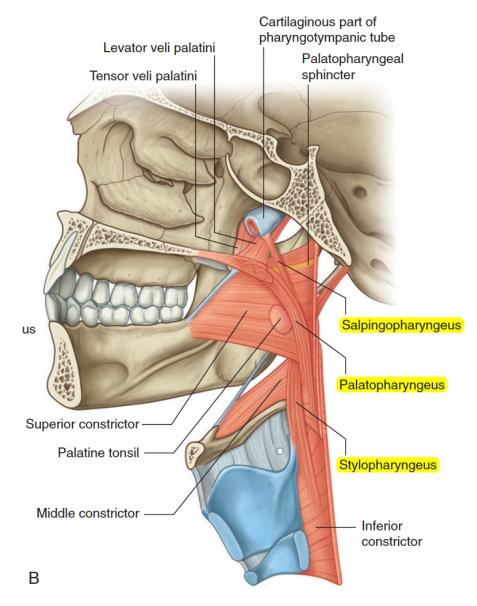
Origin: palatine aponeurosis

 Insertion: posterior border of thyroid cartilage, pharynx and esophagus.

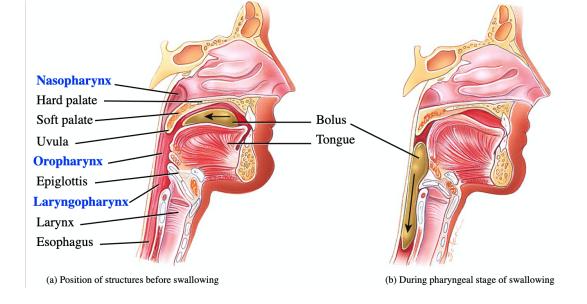
Stylopharyngeus

• Origin: styloid process

 Insertion: posterior border of thyroid cartilage.



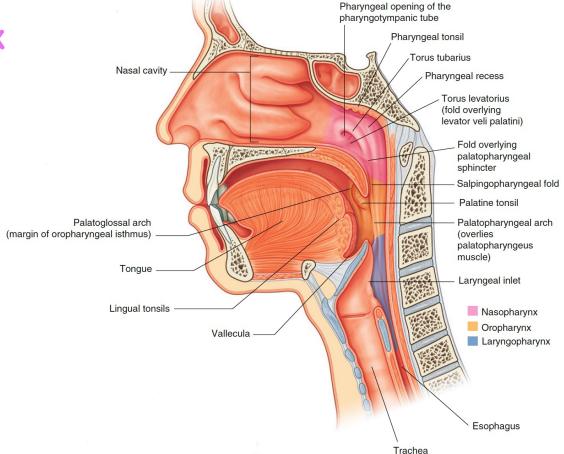
Division



Pharynx is divided into three parts:

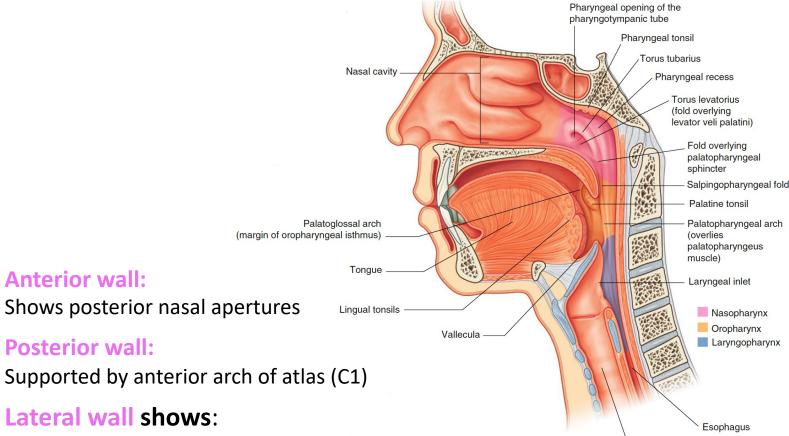
- Nasopharynx:
 - Superior part, communicates with the <u>nasal cavity</u> through <u>posterior</u> nasal apertures.
- Oropharynx:
 - Middle part, communicates with the <u>oral cavity</u> through the <u>oropharyngeal isthmus</u>.
- Laryngopharynx:
 - Inferior part, communicates with the <u>larynx</u> through the <u>laryngeal inlet</u>.

Nasopharynx



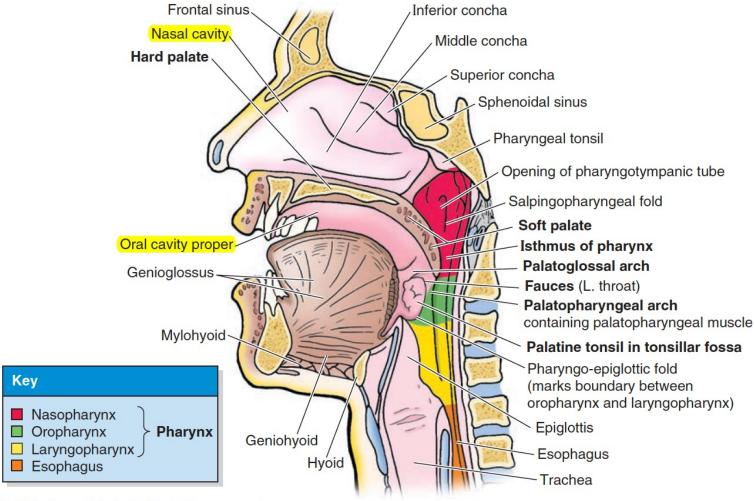
Boundaries:

- Roof: body of sphenoid & basal part of the occipital bone.
 Pharyngeal tonsils (adenoides) present in the submucosa
- Floor: upper surface of soft palate & the pharyngeal isthmus (opening between the free margin of soft palate and posterior pharyngeal wall)



Trachea

- Lateral wall shows:
 - Opening of pharyngotympanic tube
 - **Tubal elevation** (torus tubarius), produced by posterior margin of tube.
 - Pharyngeal recess
 - **Tubal tonsil**
 - Salpingopharyngeal fold (raised by salpingo-pharyngeus muscle)



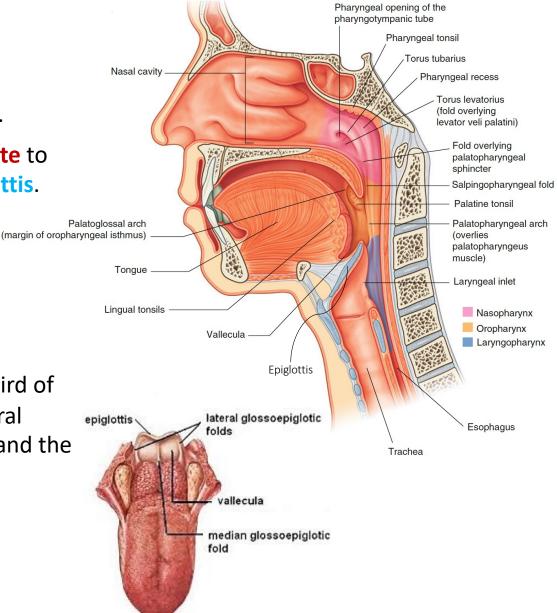
Medial view of right half of viscerocranium

Oropharynx

- Lies behind the mouth.
- Extends from soft palate to upper border of epiglottis.

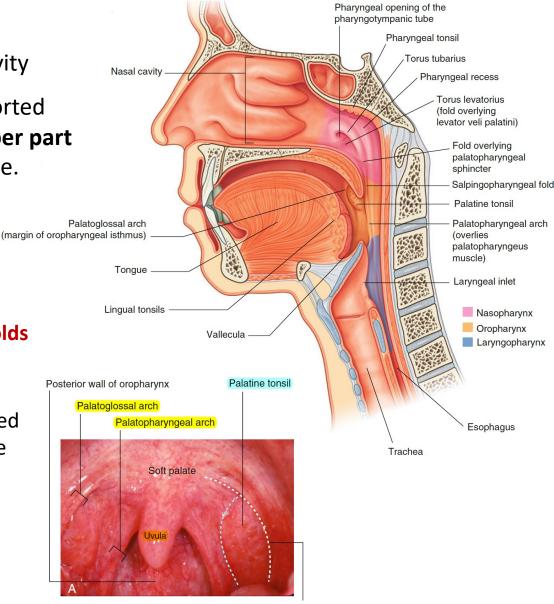
Boundaries:

- Roof: soft palate and pharyngeal isthmus.
- Floor: posterior one third of tongue, median & lateral glossoepiglottic folds, and the valleculae.



- Anterior wall: opening of the oral cavity
- Posterior wall: supported by body of C2 and upper part of body of C3 vertebrae.

- Lateral wall shows:
 - Palatopharyngeal folds posterior to the palatoglossal folds.
 - Palatine tonsil located between them in the Tonsillar fossa



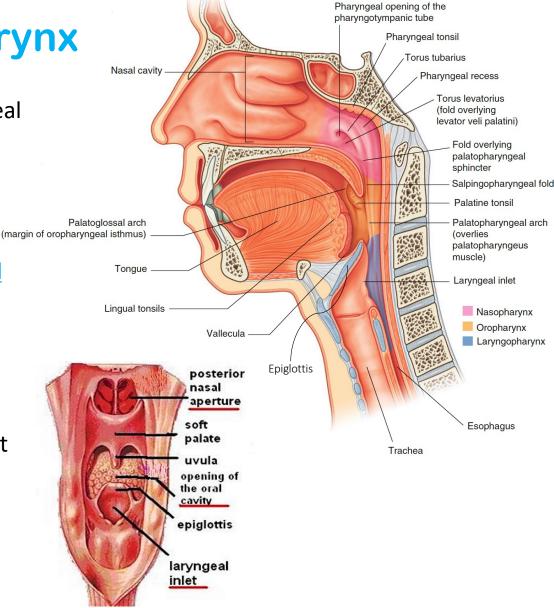
Laryngopharynx

- Lies behind the laryngeal inlet & the posterior surface of larynx.
- Extends from <u>upper</u>
 <u>border of epiglottis</u> to '
 <u>lower border of cricoid</u>
 <u>cartilage</u>.

Boundaries:

Anterior wall:

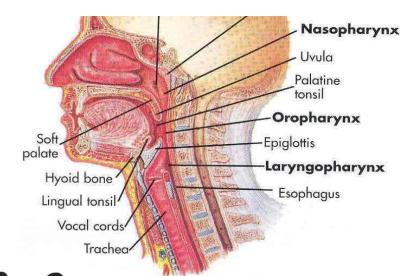
 has opening of the
 larynx in the upper part
 and below that is the
 mucosa covering the
 posterior surface of
 larynx.

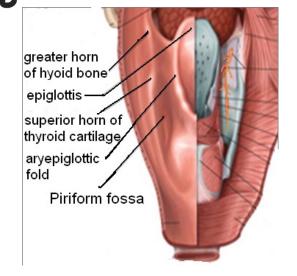


Posterior wall:
 supported by bodies of C3, 4, 5, 6
 vertebrae.

Lateral wall:

- Supported by thyroid cartilage and thyrohyoid membrane.
- On each side of laryngeal inlet, lies the piriform fossa.



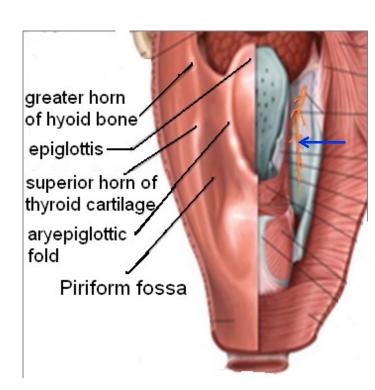


Piriform Fossa

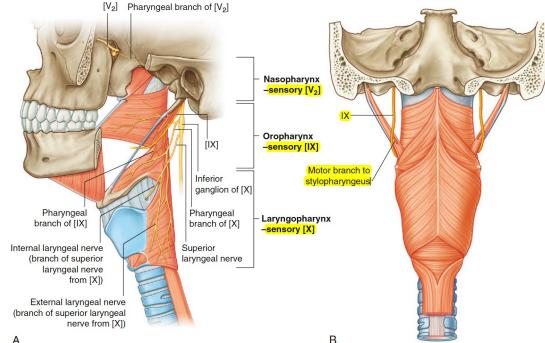
- A small depression situated on either side of the laryngeal inlet.
- Leads obliquely backward and downward from the region of the back of the tongue to the esophagus
- It is a common site for the lodging of foreign bodies.

❖ Bounded:

- Medially by the aryepiglottic fold
- Laterally by the lamina of thyroid cartilage & the thyrohyoid membrane.
- Branches of internal laryngeal (& recurrent laryngeal) nerve <u>lie deep to the mucous</u> membrane of the fossa and are <u>vulnerable</u> to injury during removal of a foreign body.



Nerve Supply

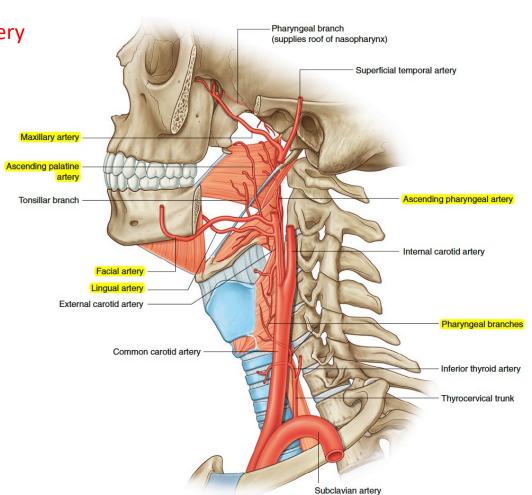


- Sensory Nerve Supply:[^]
 - Nasopharynx: Maxillary nerve (V2).
 - Oropharynx: Glossopharyngeal nerve (IX)
 - Laryngopharynx: Internal laryngeal branch of the vagus nerve (X).
- Motor Nerve Supply:
 - All the muscles of pharynx, except the stylopharyngeus, supplied by the pharyngeal plexus.
 - The stylopharyngeus is supplied by the glossopharyngeal nerve.

Blood Supply & Lymphatics

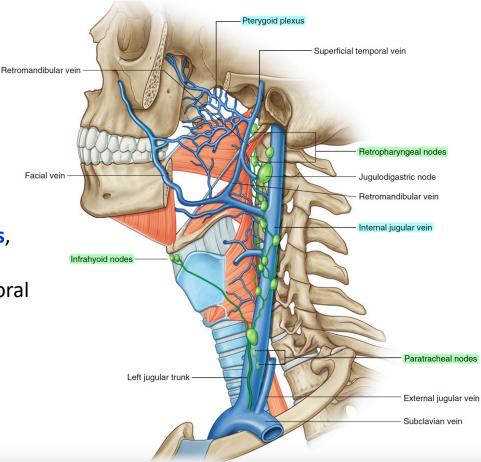
Arterial supply is derived from branches of:

- Ascending pharyngeal artery
- Ascending palatine artery
- Facial artery
- Maxillary artery
- Lingual artery



Blood Supply & Lymphatics

Veins of the pharynx form a plexus, which drains superiorly into the pterygoid plexus in the infratemporal fossa, and inferiorly into the facial and internal jugular veins.

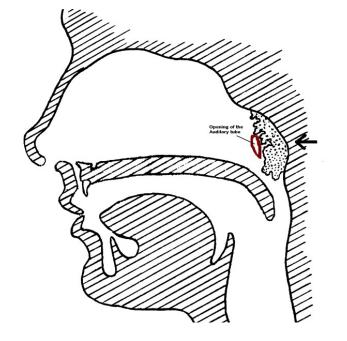


 The lymphatics drain into the deep cervical lymph nodes either directly, or indirectly via the retropharyngeal or paratracheal lymph nodes.

Clinical Notes

Adenoids (enlarged <u>pharyngeal</u> tonsils) & adenoidectomy.

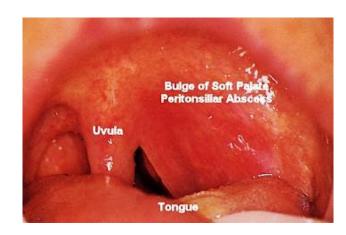
- Adenoids results in obstruction to <u>nasal</u> breathing and make mouth breathing necessary. The patient develops a <u>typical facial expression</u> called the '<u>adenoid facies</u>. May also cause impaired hearing.
- Otitis media (middle ear infection), secondary to infection of nasopharynx.
- Tonsillitis & Tonsillectomy

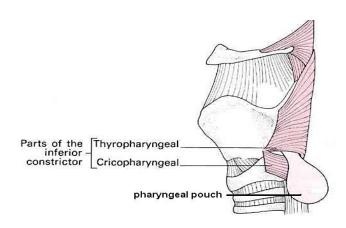




Adenoid facies

- Peritonsillar abscess (quinsy), is a complication of tonsillitis and consists of a collection of pus beside the tonsil (peritonsillar space).
- Piriform fossa: a common site for the lodging of foreign bodies
- Pharyngeal pouch, posteromedial herniation of mucosal diverticulum between thyropharyngeal and cricopharyngeal parts of the inferior constrictor muscle leading to dysphagia (difficulty in swallowing). It occurs mainly in older people.
- Retropharyngeal abscess, may spread to the superior mediastinum.





Thank You





References

- The Anatomical Basis of Clinical Practice, Susan Standring, © 2016, Elsevier Limited. All rights reserved.
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