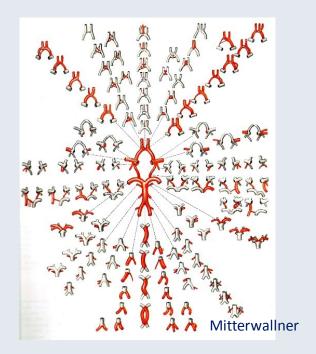
Blood supply to the brain. CSF circulation.



Dr. Emese Pálfi
Dr. Gábor Baksa / Dr. Tamás Ruttkay
Department of Anatomy, Histology and Embryology
2019.

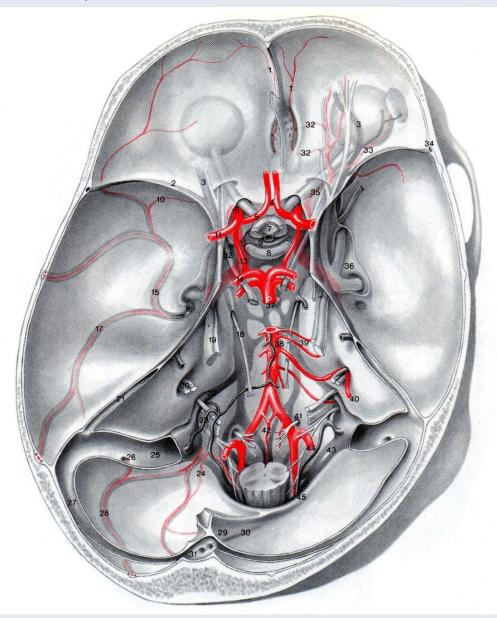
Special characteristicks:

- Arteries and veins don't run paralell
- There is a connection between the extra- and intracranial system
- The veins drain into the venous sinuses of the dura mater
- The arteries are endarteries
- Histology of the vessels of the brain are different from the vessels on the periphery

Physiology:

- Despite anastomosis, the cerebral circulation is very vulnerable
- Satisfactory blood supply to 100 g of brain tissue is provided by approx. 40-50 ml of blood
- The brain needs 15% of the minute volume, respectively
 - 20% of oxygen
 - 25% of blood sugar
- Auto adjustment (normal) 70 160 Hgmm

Nieuwenhuys

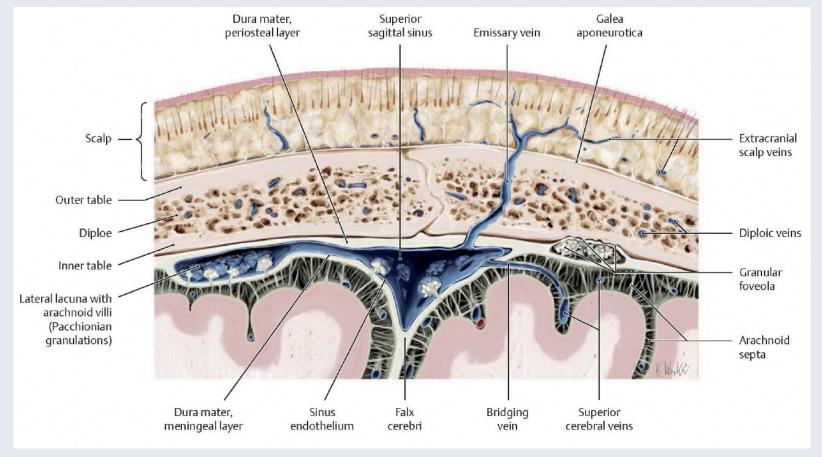


Intracranial vessels:

- arteries
- veins (deep and superficial)
- sinuses of the dura mater (venous drainage)
- own vessels of the dura mater (meningeal)
- intracranial anastomoses
- anastomoses between the extraand intracranium

Locations of the intracranial bleedings:

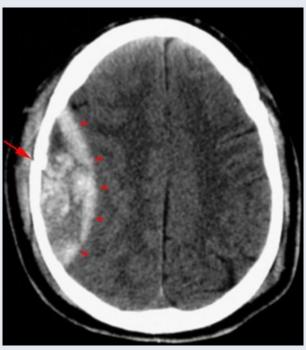
epidural – mostly from meningeal vessels or sinuses
subdural – mostly from cortical veins
subarachnoidal – mostly from cortical and intracisternal vessels
subpial – mostly cortical vessels
intraparenchymal – mostly from cortical, deep and intracisternal vessels



Examples for intracranial bleedings







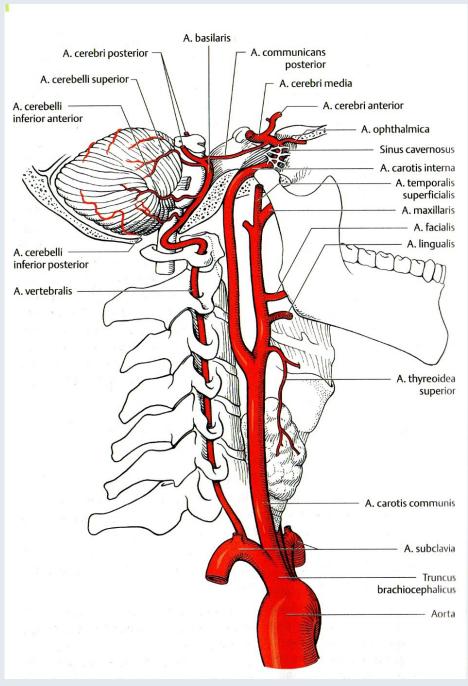
www.med-ed.virgina.edu



www.hindawi.com

subarachnoidal epidural subdural

Arteries of the brain



Arteries of the brain

Nieuwenhuys

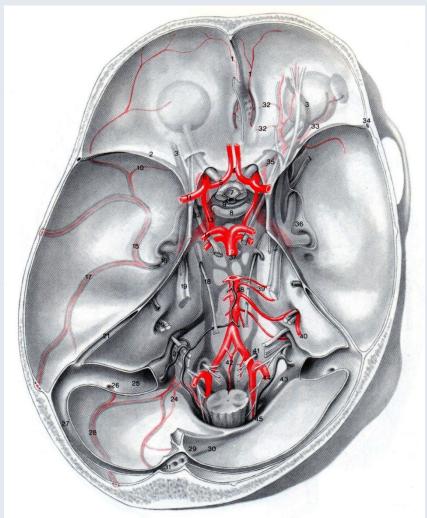
Anterior paired trunks:

left and right internal carotid artery (anterior circular system/carotis system)

Posterior paired trunks:

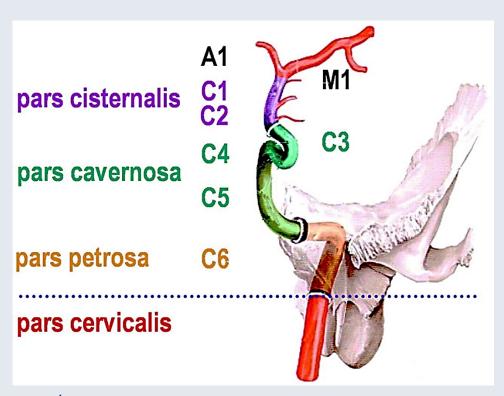
left and right vertebral artery
(posterior circular system/venterobasal system)

Often, asymmetry can be observed between the two sides



circulus arteriosus/circle of Willis

Vascular territory of the carotid



www.ajnr.org

Segments of the ICA:

cervical segment C7 segment (without branches)

petrous/horizontal segment C6 segment (branches to the tympanic cavity and sphenoidal sinus)

cavernous segment C3-5 segment (*inferolateral and meningohypophyseal trunk, capsular arteries*)

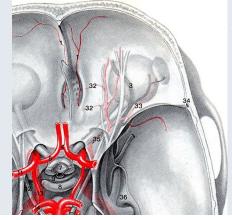
cisternal segment C1-2 segment (branches to the orbit and brain)

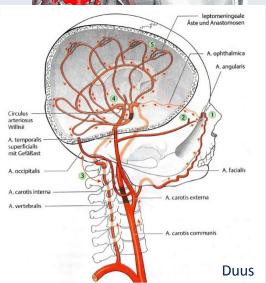
Branches of the cisternal segment:

(1) Medial to the ant. clinoid process: ophthalmic artery (Ao)

Vascular territory: orbit, sphenoidal sinus, ehtmoidal sinus, and surrounding facial areas

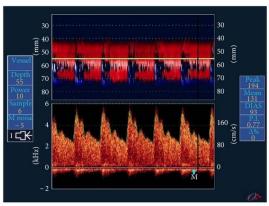
 → Anastomosis with the facial artery is important (blood supply problems; US window for the intracranial arteries)







www.augen.uniklinikum-dresden.de

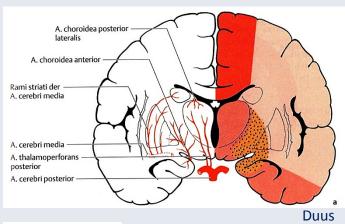


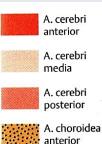
www.hindawi.com

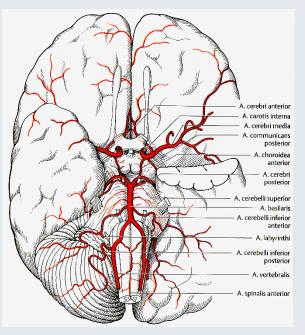
(2) **Posterior communicating artery (PCOM):** connection with the posterior cerebral arteries Vascular territory: optic chiasm, optic tract, hypothalamus, mamillary bodies, part of the thalamus

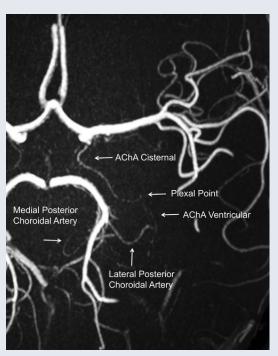
(3) **Anterior choroidal artery (AChA):** Cisternal segment (choroid fissure) and intraventricular segment

Vascular territory: choroid plexus in the inferior horn of the lateral ventricle, basal ganglia, internal capsule, thalamus, olfactory cortex









Duus

www.radiopedia.org



Kurucz & Baksa

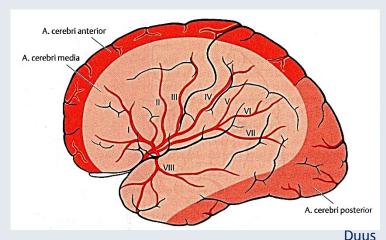
(4) Anterior cerebral artery (ACA):

precommunicating and postcommunicating segment

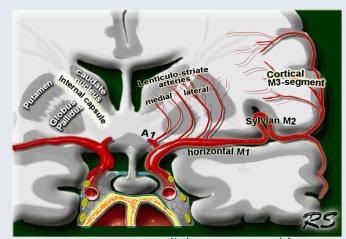
Vascular territory: basal part of the frontal medial side of the cerebrum until the lobe. parietooccipital sulcus, corpus callosum, optic chiasm, lamina terminalis, medial lenticulostriate branches

Middle cerebral artery (MCA): sphenoidal, insular, opercular, cortical segments

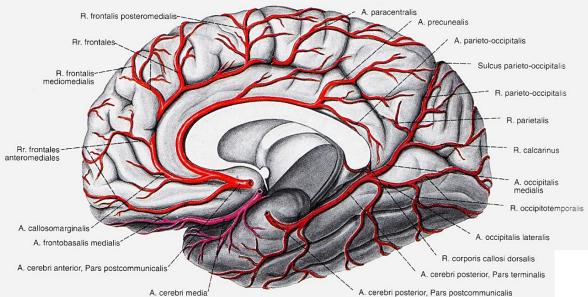
Vascular territory: convex surface until the occipital lobe, deep white matter of the frontal, parietal, temporal and occipital lobes, lateral lenticulostriate branches



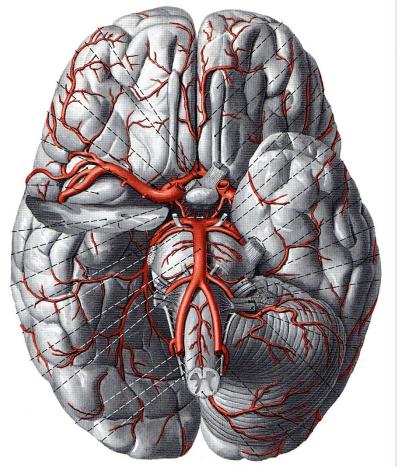
A. cerebri anterior A. cerebri media A. cerebri posterior

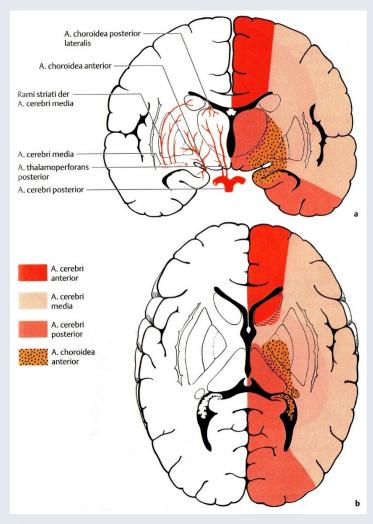


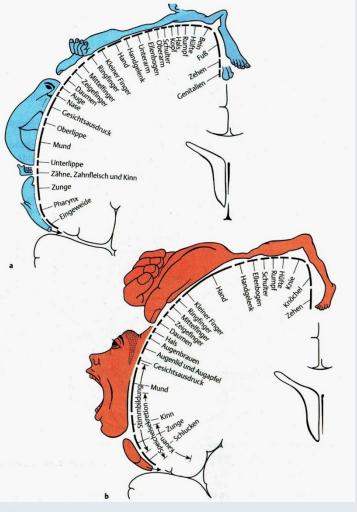
www.radiologynotes.weebly.com



Sobotta







Disturbance of the blood supply of the ACA and MCA causes neurological symptoms:

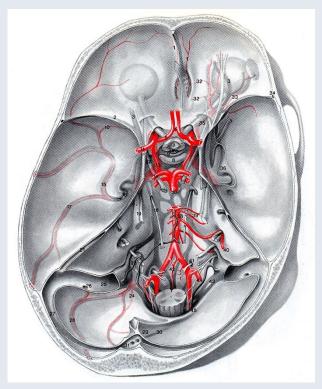
Duus

ACA vascular territory: contralateral hemiparesis in the lower extremity Duus

MCA vascular territory: contralateral hemiparesis brachiofacial / upper limb possibly speech disorder, visual field loss

dominant site: sensory (Wernicke-) or motorized (Brocka-) aphasia - speech disorder

Vascular territory of the vertebrobasilar system



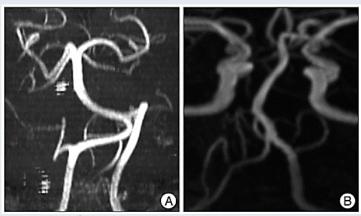
Nieuwenhuys



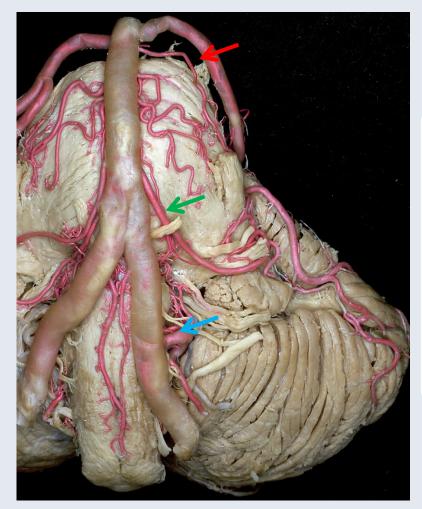
www.alf3.urz.unibas.ch

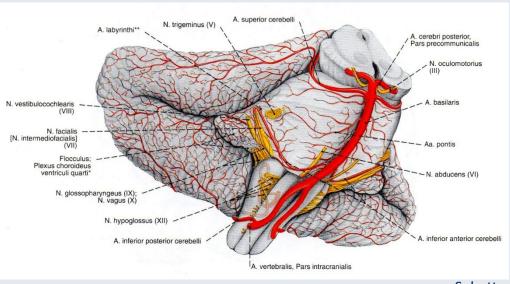
Supplies:

- brain stem
- cerebellum
- spinal cord
- cerebrum
- some areas of the diencephalon



Park JH J Korean Neuronsurg Soc 2013





Sobotta

Eördögh

3 pairs of cerebellar arteries:

Superior cerebellar artery (SCA)

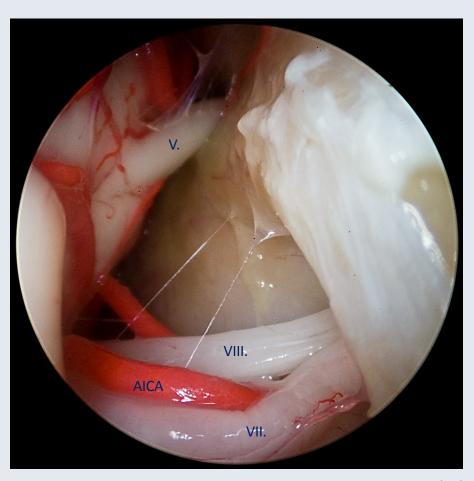
Anterior inferior cerebellar artery (AICA)

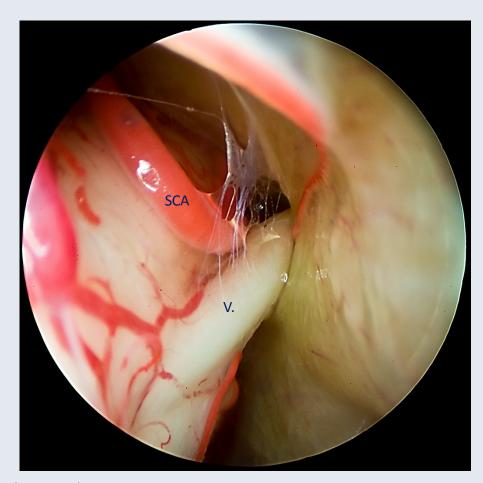
Posterior inferior cerebellar artery (PICA)

→ choroid plexus of the 4. ventricle

branches of the basilar artery branch of the vertebral artery

"Neurovascular compression syndrome"



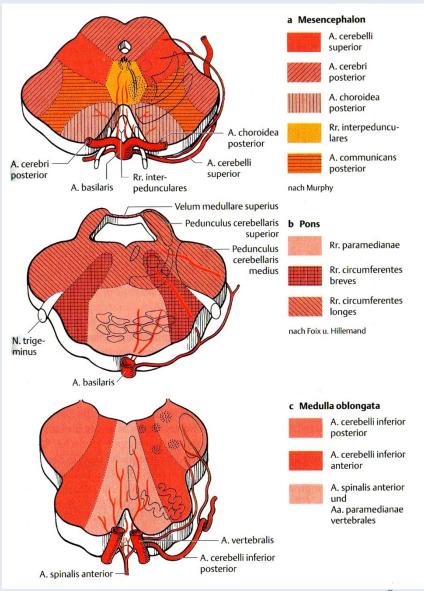


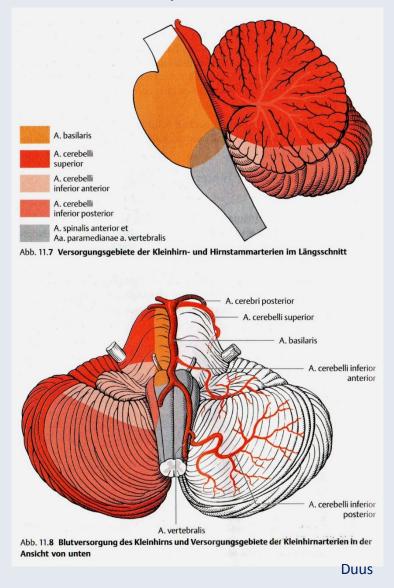
Kurucz, Eördögh, Baksa, Reisch

Trigeminal neuralgia – attacks of facial pain Hemifacial spasm - irregular, involuntary muscle contractions (spasms) on one side (hemi-) of the face

Different vessels provide the blood supply to different levels of the brainstem and to certain areas of the cerebellum

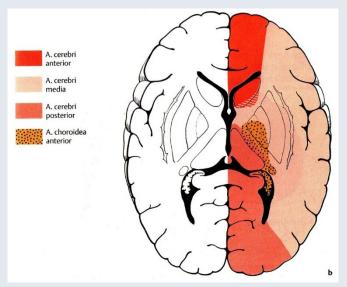
→ in case of blood supply disorder brainstem and cerebellar syndromes







Kurucz & Baksa



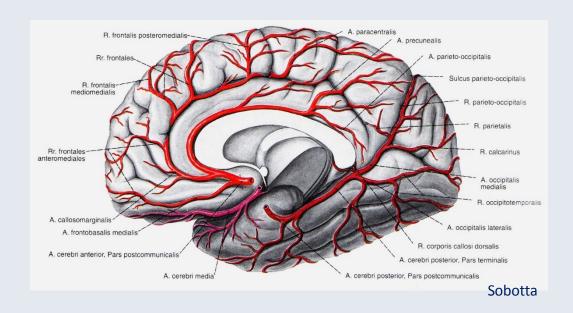
Duus

Posterior cerebral artery (PCA):

vascular territory: significant part of the occipital lobe - visual cortex, temporal lobe, corpus callosum, midbrain, thalamus

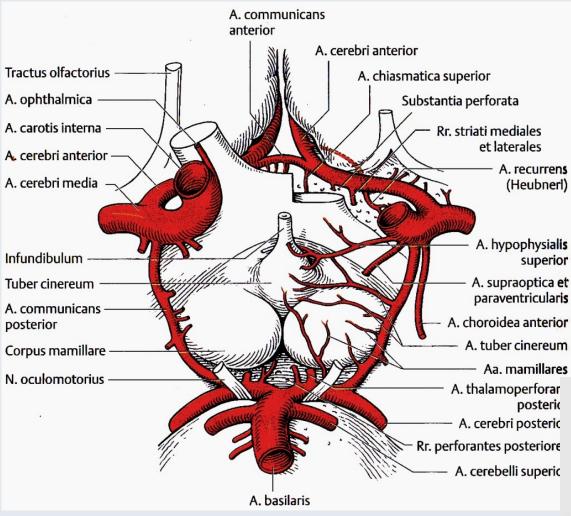
→ posterior choroid artery

(III. ventricle, choroid plexus of the lateral ventricle)

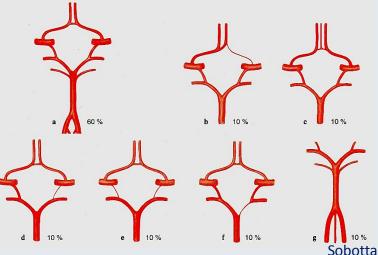


Leading symptoms of blood supply disorder in the vertebrobasilar supply zone: disturbance in walking, vertigo, unconsciousness, visual disturbance

Circulus arteriosus / circle of Willis



internal carotid artery
anterior cerebral artery
anterior communicating artery
posterior communicating artery
posterior cerebral artery
basilar artery



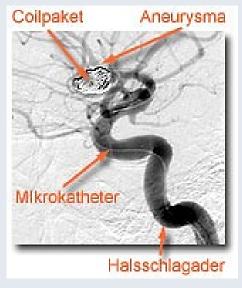
Duus

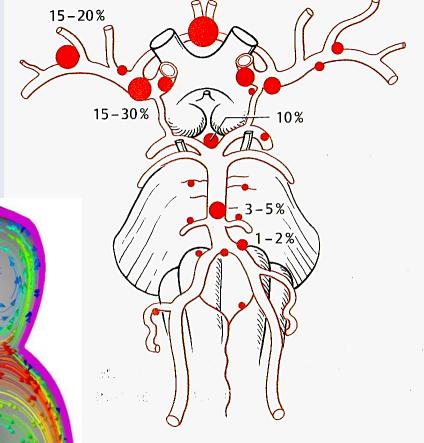
www.klinikum.uni-muenchen.de

Aneurysms

40 - 45 %

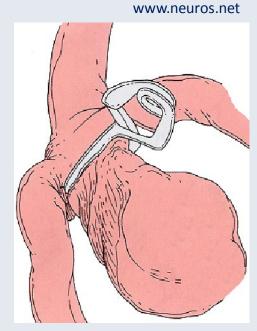






www.tafsm.org

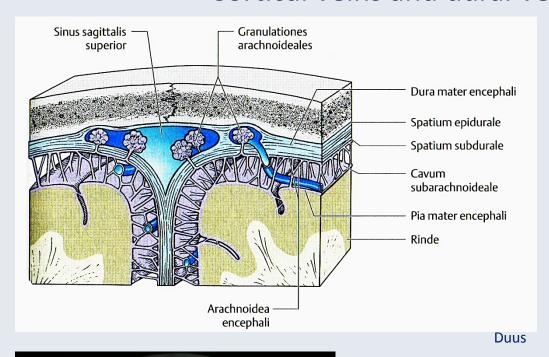
Duus





www.uniklinikum-dresden.de

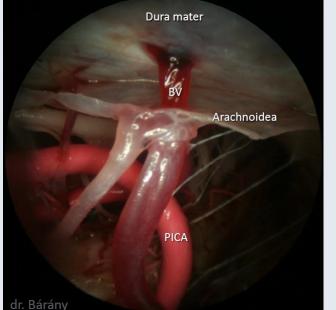
Cortical veins and dural venous sinuses



Venous sinuses → between the two layers of the dura

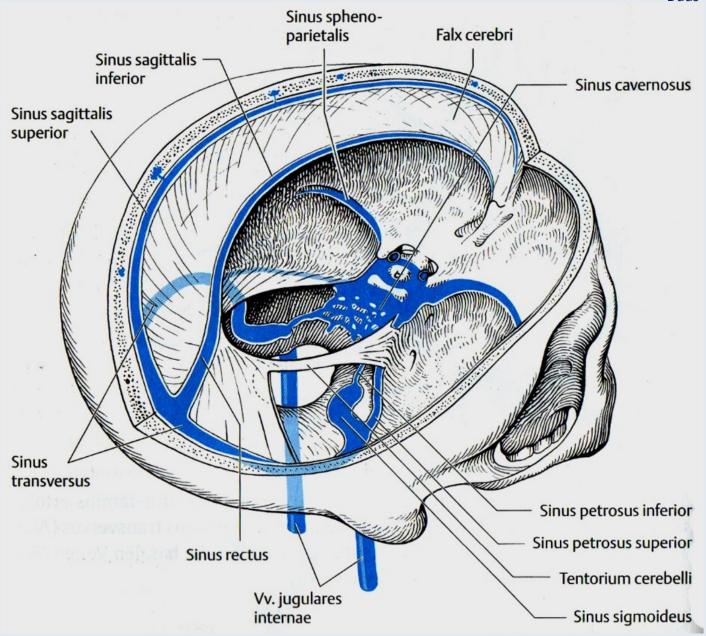
Functionally they belong to the veins but the wall structure is different: the dura mater is lined by endothelium.

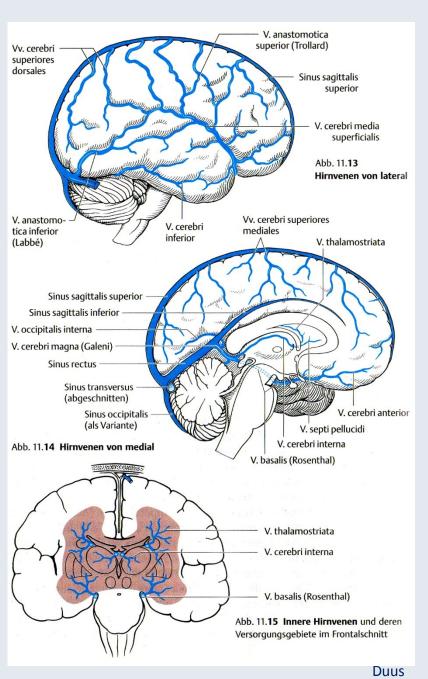
The blood enters them via the veins of the pons, which are running through both the subdural and subarachnoideal space.
In case of brain athropy these veins can cause subdural bleeding.



The blood from the sinuses is drained into the internal jugular vein.

There is a connection between the internal and external venous system (compensation for venous occlusion, but infections can also spread inside from outside).





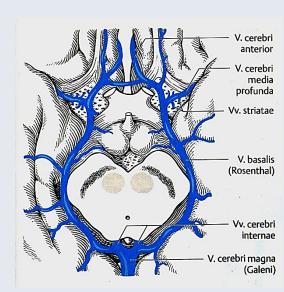
Important cortical veins:

superior anastomitic vein (Trollard)
inferior anastomotic vein (Labbe)
superior petrosal vein (Dandy)
superior posterior cerebral vein
superficial middle cerebral vein (Sylvian)

The cortical veins mostly drain into the cavernous and sphenoparietal sinus.

Deep veins:

basal vein (Rosenthal) internal cerebral vein (vein of septum pellucidum, thalamostriate vein, posterior choroid vein)



Other options for venous blood flow

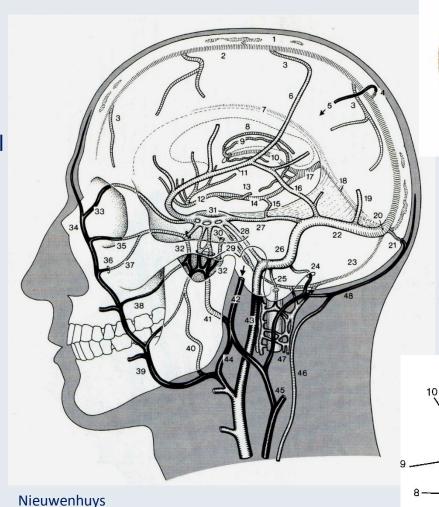
www.salerno.uni-muenster.de

Diploic veins:

channel in the diploe between the inner and outer layers of the cortical bone

Emissary veins:

connect the extracranial venous system with the intracranial venous sinuses (parietal, occipital, mastoid, chondylar)



www.vmede.org

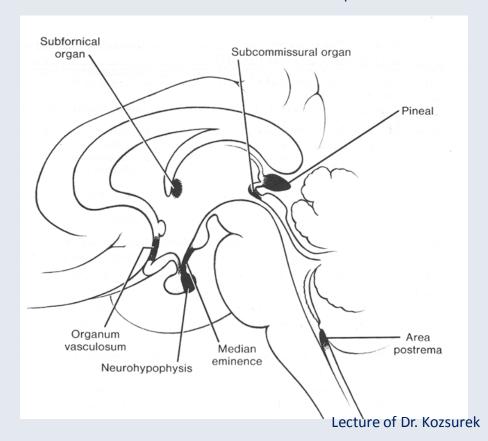
C Trank Geisler

www.medical-pictures.de

Blood brain barrier

Processes of glial cells + basal membrane + endothelial cells with tight junctions

allowing the diffusion of small hydrophobic molecules (O2, CO2, hormones)

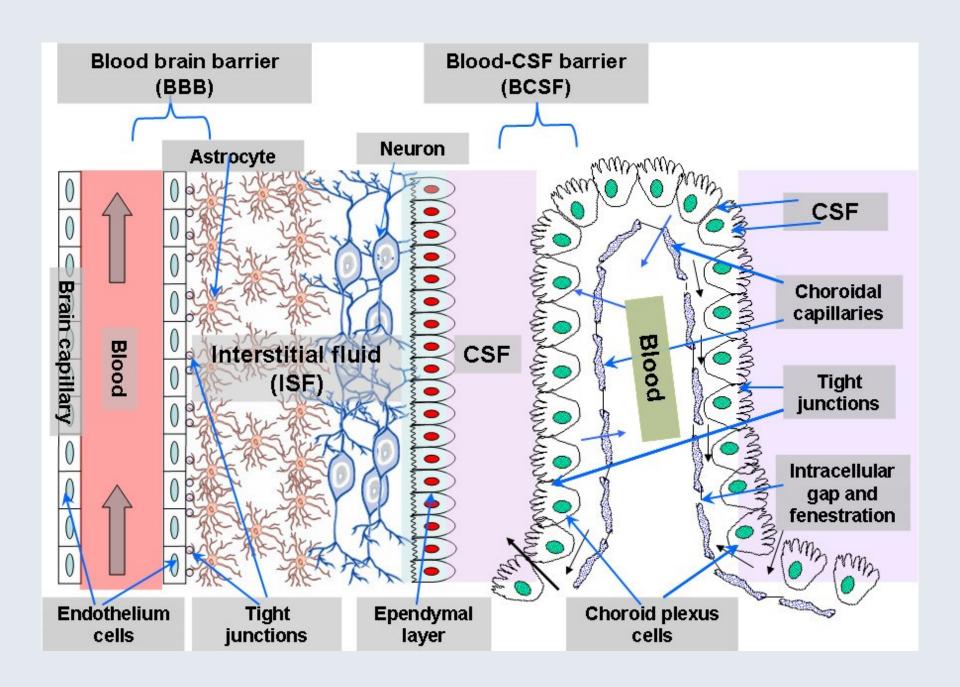


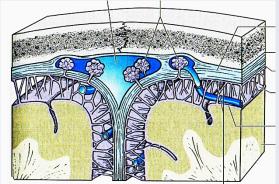
Lack of BBB:

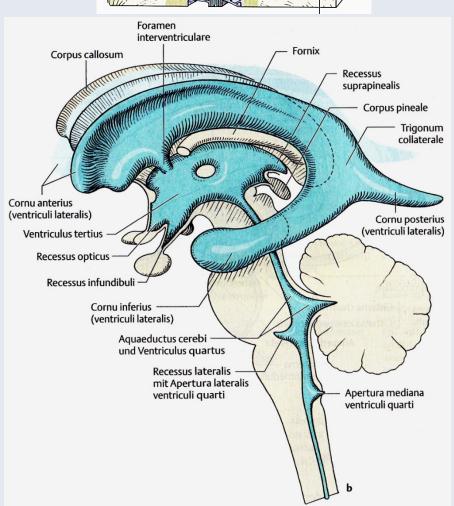
These areas are located around the III. and IV. ventricles.

→ circumventricular organs (CVOs)

These specialized areas are points of communication between the blood, the brain parenchyma, and the CSF.







Liquor circulation

The cerebrospinal fluid (CSF) is produced by the choroid plexus of the ventricular system (400-800 ml daily).

The volume is approx. 120-200 ml, changes in every 6-7 hours.

Protein content is lower than the serum.

Sugar content is 50-70% of the blood sugar level.

Reabsorption: predominantly into the sinuses of the dura mater (arachnoid granulations) + lymphatic system + cortical vessels

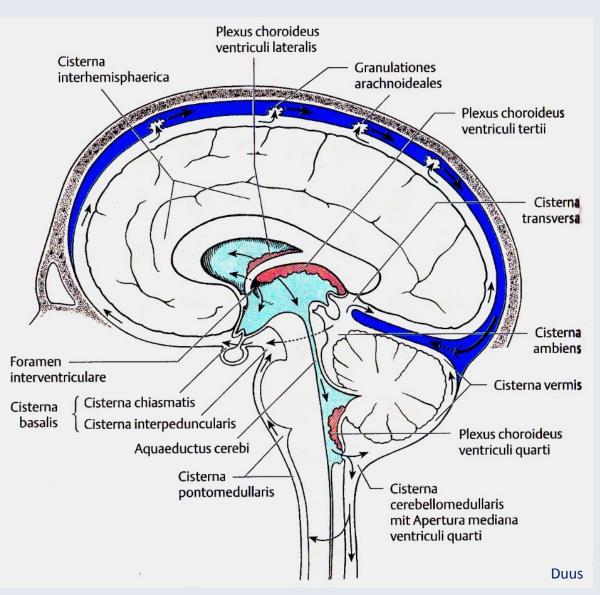
It is clear, but in pathological conditions it becomes yellow, opal, bloody.

Inner and outer liquor spaces.

Liquor gain: usually under the L4 vertebra with lumbar puncture or by puncture of the cerebellomedullar cistern.

Inner liquor spaces: I-IV. ventricles

Outer liquor spaces: subarachnoideal space



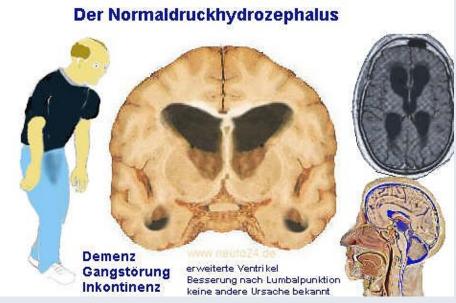
Plexus choroideus 1+2. Ventricle Foramina monroi 3. Ventricle Cerebral aqueduct 4. Ventricle Foramen Magendi /Luschka Cysterna magna Subarachnoidal space Arachnoidal villi

Lateral apertures (Luschka) and medial aperture (Magendie)

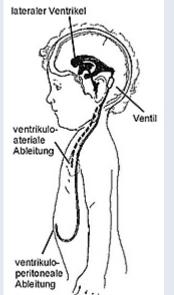
Hydrocephalus

www.hydrocephalus.info





www.neuro24.de



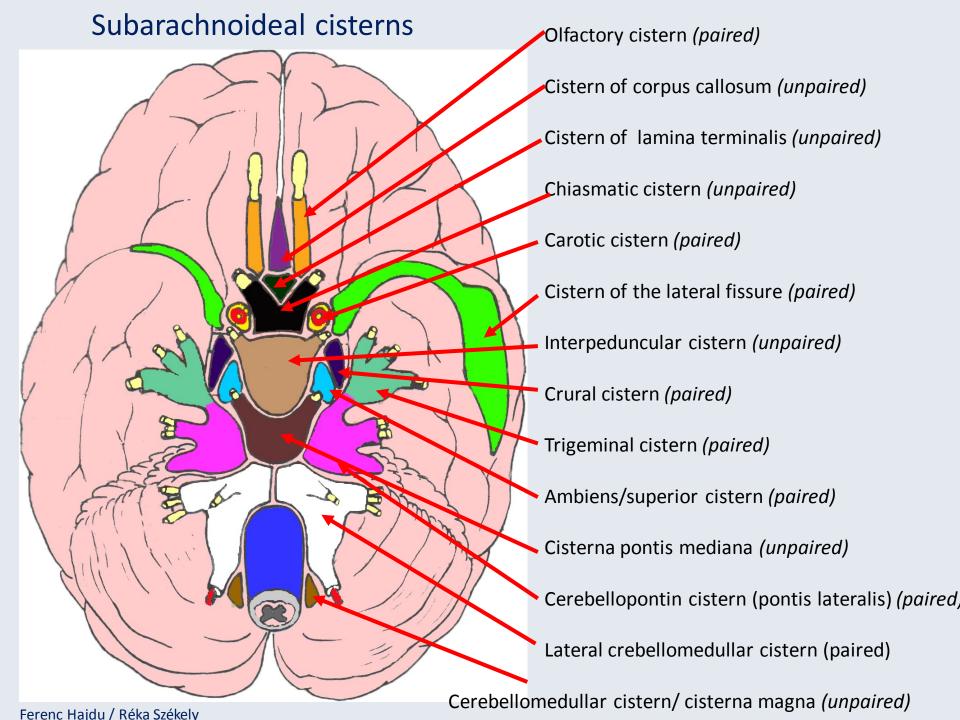
Is there a communication with the subarachnoideal space?

Hypersecretion?

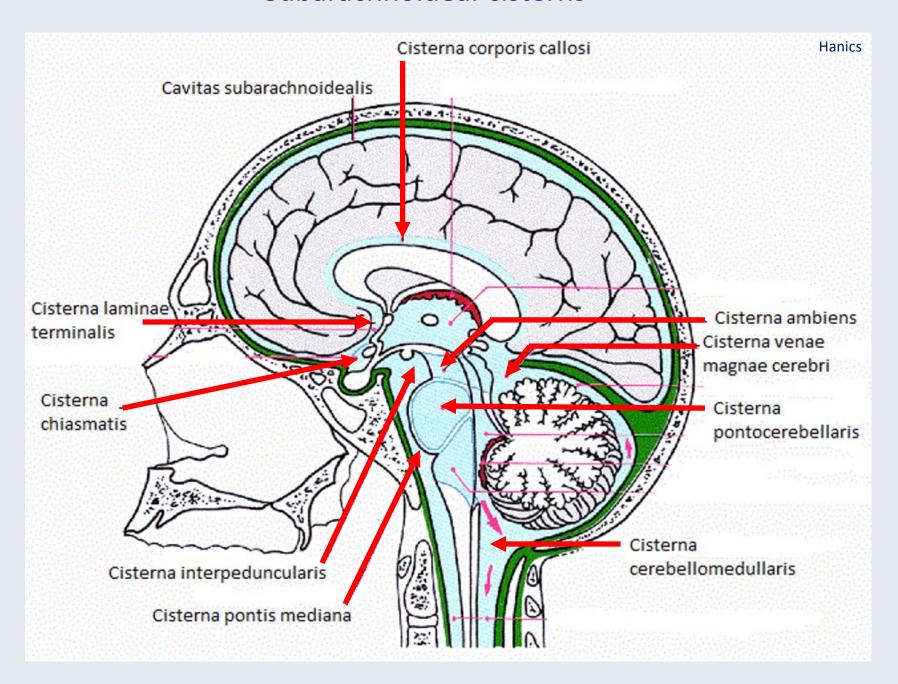
Malresorption?

Barrier in the flow?

www.motiv-medtech.de



Subarachnoideal cisterns



Thank you for your attention!

Dr. Gábor Baksa / Dr. Tamás Ruttkay: Az agyvelő vérellátása

Dr. Andrea Székely: Blood supply to the brain