PORTOCAVAL ANASTOMOSES
(PORTOSYSTEMIC)

⇒ There are many site in the Abdominal cavity where Anastomosis exists b/w the portal & systemic Venous syst. (IVC)

Imp site of portocaval Anastomosis:

1. Lower end of oesophagus: Here the left gastric vein (draining into portal vein) anastomose with oesophageal tributaries of Accessory hemiazygous vein (systemic)

(venous) ⇒ In Portal obstruction, these channels become distended & tortous forming oesophageal varices, which may cause vomiting of blood.

2. Umbilicus: Few paraumbilical veins of left branch of portal vein around umbilical Anatosome with sup & Inf epigastric veins into sup & Inf VC.

(systemic)

In liver cirrhosis - the paraumbilical vein open ~~out~~ capto ~~tributes~~ to transfer portal venous blood to systemic circulation. → caput medusae (snake like appearance)

Retroperitoneal organs – ascending colon, descend colon, Rectum

classmate

Date

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3.) Anal canal : Superior Rectal vein which drain into Portal vein anastomose with middle & Infer Rectal vein ⟶ IVC.

distension or dialation result in formation of piles or haemorrhoids ⟶ repeated bleedings per anum during defecd (hepatic venoflow).

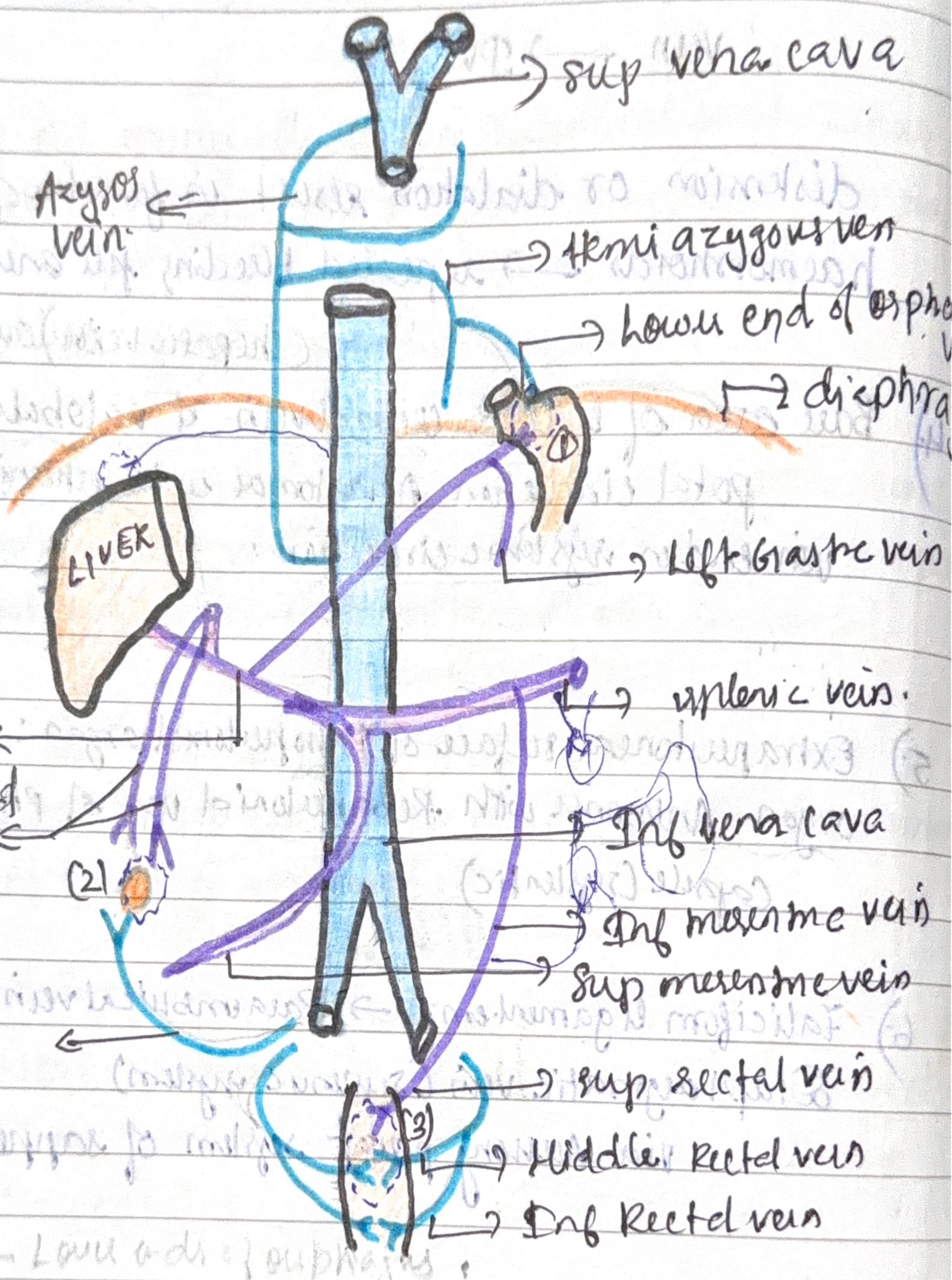
4.) Bare area of liver : central vein & sublobular vein part of portal circulation Anastomose with phrenic & intercostal vein end in systemic circulation :

5.) Extraperitoneal surface of Retroperitoneal organ : Vein of these organ Anastomose with Retroperitonial vein of PAW & Renal capsule (systemic)

6.) Falciform ligamentum : → Paraumbilical vein with Diaphragmatic vein (systemic system). via Accessory portal system of sappey.

7.) Tissue for lig venosum : left branch of portal vein through ductus venosus with IVC

Applied (Koode ezhu thanam) Portal Hypertension


sup vena cava
Azygos vein
Hemi azygous ven
lower end of oesp
diaphra
LIVER
Left Gastric vein
portal vein
splenic veins.
paraumbilical vein
Inf vena cava
Inf mesenteric vein
Sup mesenteric vein
(2)
Ven of AAW
Sup rectal vein
(3)
Middle Rectal vein
Inf Rectal vein

PORTAL VEIN:

o- large vein which connect blood from - Abdominal part of (GIT)
Alimentary tract
- gall bladder
- Pancreas.
- spleen

of transport it to liver.

⇒ In liver it breaks into sinusoids - which drained by
↓
hepatic vein → IVC

=

⇒ It is called portal vein because - its main tributary, sup mesenteric vein, begin in on set of capillary (in gut) of one portal end in another set of capillaries in liver

FORMATION: o Portal vein 8cm long.
o formed by union of sup mesenteric vein behind neck of pancreas and splenic vein. at L2

COORSE: Rein upward - 1st behind the neck of pancreas
Ascend upward
meets behind the 1st part of duodenum
Right
lastly free margin of lesser omentum.

TERMINATION: Vein end at Right end of porta hepatis by divide into → Right
→ Left. brea

Divided into → Infra duodenal
→ Retro duodenal
→ supra duodenal

RELATIONS:

⇒ Infraduodenal part: Ant: neck of pancreas
Post: IVC

⇒ Retro duodenal part Ant: 1st part of duodenum
Bile duct of Gastroduodenal Br
↓
Post: IVC

⇒ Supra duodenal part: Ant: Hepatic Artery
Bile duct.
Post: IVC

BRANCHES
→ Right Br → shorter, wider → Right lobe of liver
→ Left Br → longer & narrower → caudate lobe & quadrate lobe

Recurrent paraumbilical vein

TRIBUTARIES:
- Left Gastric at cardia end
- Right Gastric → Recurrent preceptor a vena cava.
- paraumbilical vein → join left Br of portal
↳ They Run along the ligamentum teres in the falciform

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- cystic vein
- sup pancreaticoduodenal
- splenic vein
- sup mesenteric vein

⇒ CLINICAL: Portal hypertension → obstruction of portal vein due to cirrhosis of liver lead to ↑ portal venous pressure. due to Alcoholcirrhosis