

→ Muscles of facial expression

- lie in superficial fascia & inserted into skin
- Paniculus carnosus
- arranged in groups around orifices

→ Muscles of nose around orifice of eye

- 1) orbicularis oculi
- 2) corrugator supercilii
- 3) frontalis
- 4) levator palpebrae superioris

✓ ⇒ Orbicularis oculi

3 Parts

1) Orbital part: from medial palpebral ligament encircle → origin.
• closes the eye tightly.

2) Palpebral part - medial palpebral ligament → lateral palpebral ligament.
• winking / blinking

3) Lacrimal part - behind lacrimal sac, from lacrimal crest / fascia / bone.
inserted to lateral palpebral raphe
• dilates the lacrimal sac.

Clinical: Crow's feet: contraction of orbicularis oculi → draws skin of forehead, temple, cheek → lateral angle of eye → skinfolds.

Ectropion - Paralysis of OO leads to drooping of eyelid (Ectropion)
causing spilling of tear on cheek (epiphora)

NS: Temporal branch } facial nerve
Zygomatic "

> Muscles around Nasal cavity

- 1) Procerus
 - 2) Nasalis
 - 3) Depressor septi
- compressor nares
dilator nares

> muscles around the mouth → movement of lip and cheek

- 1) Orbicularis oris
- 2) 9 muscles → radiate from lips like spokes of a wheel act as dilator of oral orifice

1) Orbicularis oris

- Surrounds the orifice.
- 2 parts
- > nerve supply: Lower Buccal branch of facial nerve

• Extrinsic part

Interlacing fibres of muscles (LAO, DAO, Buccinator, ZM) converge around mouth for insertion into lips.

Most fibres buccinator (Mention Buccinator).

• Intrinsic part

Extrinsic part → mucous membrane

• Movements such as

cloning, pursing, twisting

← due to its complex nature.

> Clinical: Paralysis of Oris

Paralysis of one half of OO prevent proper closure of lips on that side. dribbling of saliva from angle of mouth

> 9 muscles radiate outward from angle

1) Levator labii superioris Alaeque nasi

2) Levator labii superioris

3) Levator anguli oris

4) Zyg major

5) " minor

6) Depressor labii inferioris

7) " Anguli oris

8) Buccinus

9) Buccinator

Buccinator

Origin: Outer surface of alveolar process of maxilla
Opp 3 molar teeth

Pterygomandibular Raphe.

Outer surface of alv process of mandible.
Opp 3 molars.

Fibres ↗ upper
↓ intermediate
↘ lower

Insertion: upper fibres → upper lip

lower fibres → lower lip

middle fibres → decussate, so UF → UL
LF → LL.

Most of fibres converge towards modiolus, at modulus they form chiasma.

Nerve supply: lower buccal branch of FN.

Action: prevents accumulation of food in vestibule during mastication

- trumpeter's muscle → blowing cheek and expelling the air b/w lips from inflated vestibule as in blowing trumpet.

Clinical: Paralysis of buccinator, as in fascial palsy food accumulates in vestibule of mouth during mastication and person cannot blow his/her cheek.

Nerve supply: fascial nerve.

After coming out of cranial cavity, FN

wraps around sty. lateral

Aspect of styloid process

→ enters parotid gland

→ divides into 5 branches

• Supplies the muscles of

facial expression

- emerge in face radiating through Ant Border of P. gland.

→ Pes anserinus →

5 branches form

a goose foot p.

Bells palsy: simplest form of lower motor neuron type paralysis of FN due to compression of FN near in Fascial canal near stylomastoid foramen.

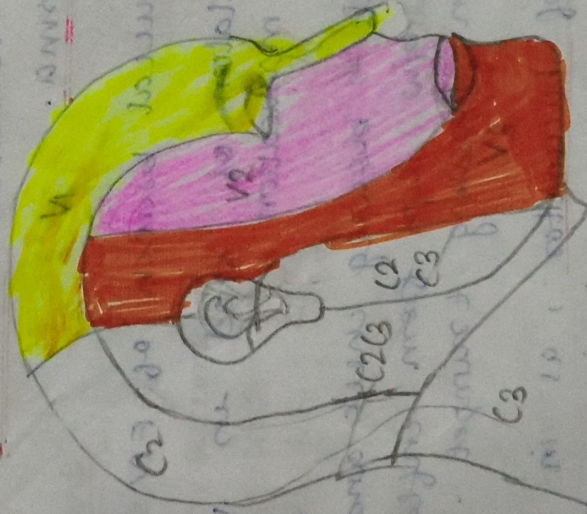
P958 fig 3.14

✓ sensory supply

Trigeminal: except skin over angle of mandible.

supplied by nerve from ventral rami of 2nd & 3rd CN

upper 1/3rd → Ophthalmic } division of
middle 1/3rd → maxillary } Trigeminal
lower 1/3rd → mandibular } nerve.



✓ Cutaneous

- Supraorbital
- Supratrochlear
- Infraorbital
- External nasal
- Lacrimal

Ophthalmic

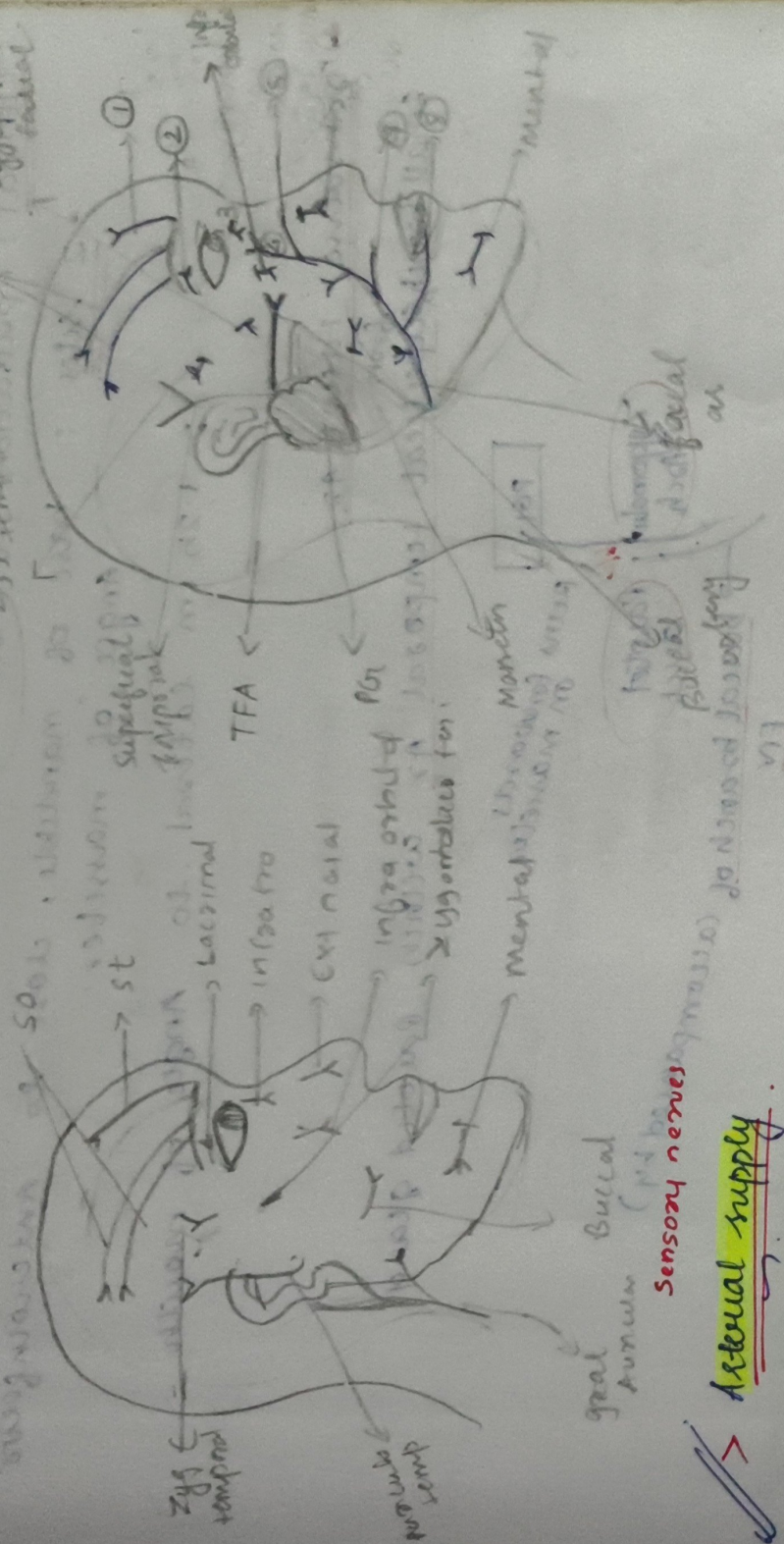
- Mental
- buccal
- Auriculotemporal

- Branches of mandibular division

Infraorbital

- Zygomaticofacial
- Zygomaticotemporal

} maxillary



> Arterial supply

- 1) Facial artery (chief artery of face).
- 2) Transverse facial artery
- 3) Arteries accompanying cut. nerves

1) facial artery

from ECA in neck at the level of greater cornu of hyoid bone. → after looped course in submandibular region → enters face by winding around the lower border of mandible →

In face, artery passes tortuously, first upwards and forwards to a point 1.25 cm lateral to angle of mouth → ascends along side of nose to medial angle of eye where ^{ends} terminates by anastomosing with Dorsal nasal branch of ophthalmic artery. Terminal part of FA = Angular Ao.

> Branches

- 1) Inferior labial - lower lip
- 2) superior labial - upper lip
- 3) Lateral nasal → ala & dorsum of nose
- 4) muscular branch

Clinical: pulsation of Facial Ar

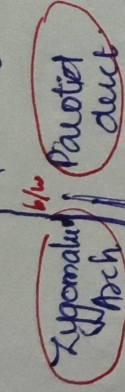
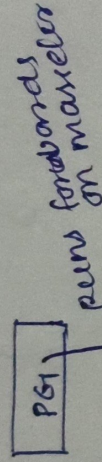
- 2 sites: base of mandible, close to Anterior angle of mouth

: 1.25 cm lateral to Angle of mouth

2) Transverse Facial Ar

from

small branch superficial temporal Ar within parotid gland



→ buccal branch of (accompanied by) FN

3) Arteries Accompanying cutaneous nerves

- Infraorbital Ar } derived from
- ↳ buccal Ar } Maxillary Artery
- ↳ mental Ar }

> Venous drainage (2 veins)

1) Facial vein

2) Retro-mandibular

1) Facial vein → formed at medial angle of eye by union of ST & SO veins. Runs straight downwards & backwards behind Facial Ar to reach Anterior angle of masseter.

Pierces deep fascia → crosses superficial to submandibular gland.
→ joins the ant division of submandibular vein below the angle of mandible to form common facial vein, which drains to internal jugular vein (IV) (IJV)

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tributaries $\approx$ branches of artery

> deep connections: communicates with cavernous sinus through 2 routes.

✓ At the point of commencement

✓ In the cheek.

FV + sup oph vein passes backward within orbit, drains into

Cavernous sinus

FV joined to

pterygoid venous

Plexus by deep FV.

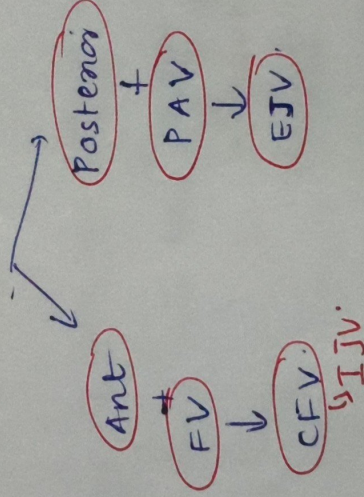
Communicates with CV through

Emissary vein

2) Retromandibular vein

Supratemporal + maxillary V (within parotid gland)

on leaving PG



Clinical: Dangerous area of face.

FV $\rightarrow$ devoid of valve

FV Rest directly on muscle.

Movements of these muscles

facilitate the spread of

septic emboli from infected

area to lower part of

nose, upper lip, adjacent

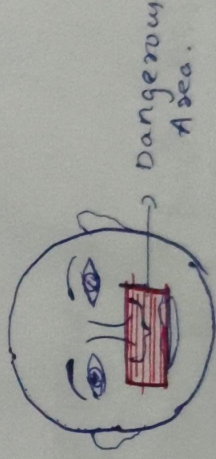
of cheek in retrograde

direction through

deep fascial vein,

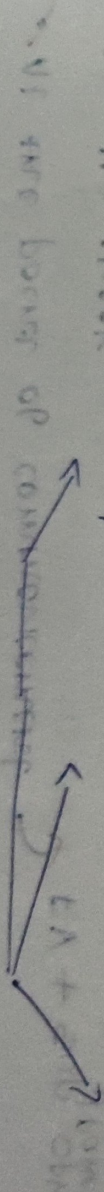
into cavernous sinus leading to meningitis and

Cavernous thrombosis



LYMPHATIC DRAINAGE

Face (3 territories)



upper (v7)

(greater part of forehead, lateral surfaces of eyelids, conjunctiva, part of cheek) ^{from UT}

Preauricular lymph node
Superficial parotid lymph nodes

Middle

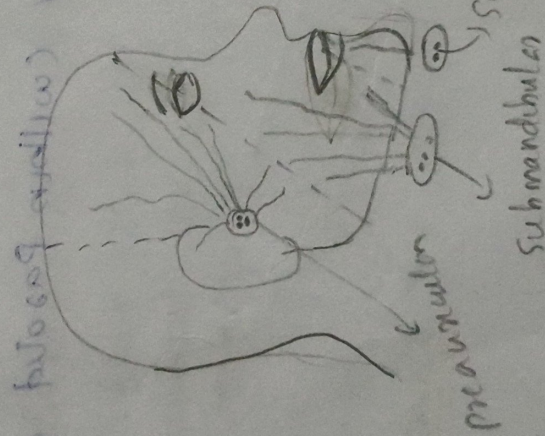
(Central part of Forehead, medial halves of eyelids, eat part of lower lip, medial part of cheek, greater part of lower jaw)

Submandibular
lymph nodes.

lower.

central part
of covering
& chn.

Submental
lymph nodes

 $60 \times 9 + 209$

1

2

249

Europe