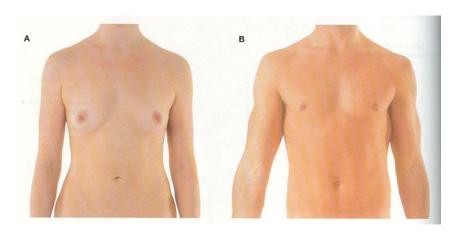
BREAST/ MAMMARY GLAND

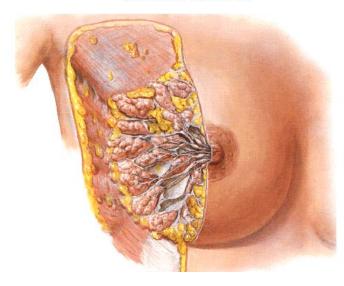
- Modified sweat gland
- Accessory organ of reproductive system
- Well developed after puberty in female
- Provides milk to the newborn

SITUATION

- Superficial
- Auxiliary tail (of spence) in Axilla



Mammary Gland
Anterolateral Dissection

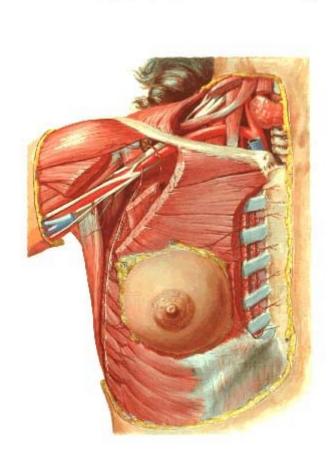


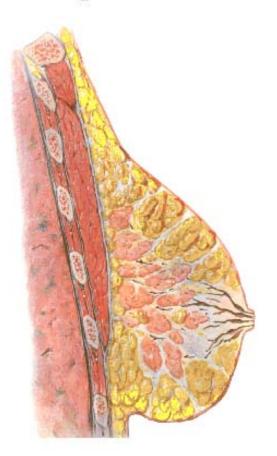
EXTENT

Vertical : 2nd -6th rib

• Horizontal: Lateral Border of sternum – Mid axillary line

Mammary Gland Sagittal Section





DEEP RELATIONS

Mammary Gland Sagittal Section

- Retro mammary space
- Pectoral fascia
- Pectoralis major, Serratus anterior, External oblique abdominis
- Clavipectoral fascia, Pectoralis minor
- 2nd 6th rib & 2nd 5th intercostal space with its contents



STRUCTURE OF BREAST

• SKIN Nipple & Areola

Nipple & Areola (no hair &fat)

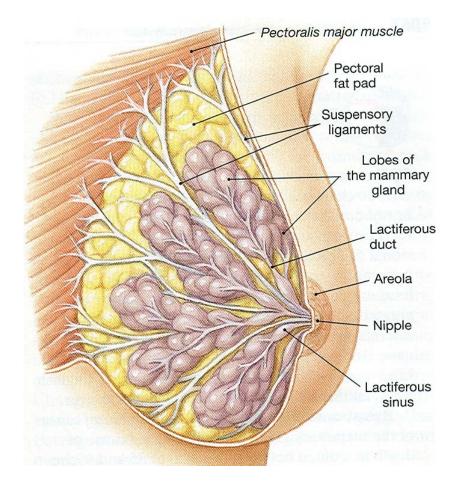
• PARENCHYMA(15-20 lobes)

lactiferous duct- I.sinus –alveolus

STROMA

Fibrous (suspensory ligament)

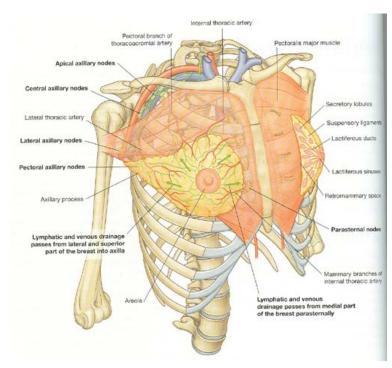
Fat



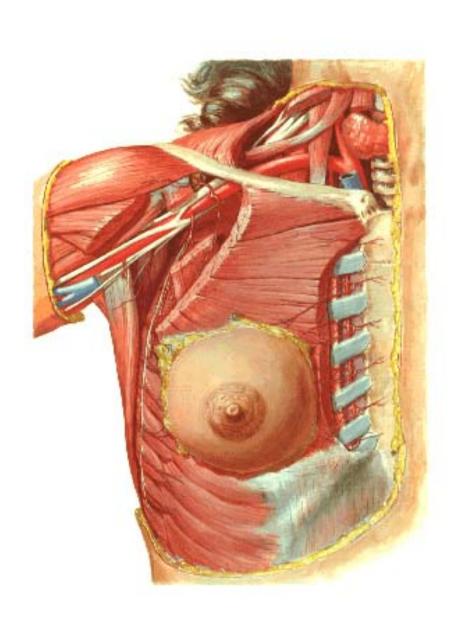
BLOOD SUPPLY

Arterial: supply from anterior Surface (posterior- Avascular)

- Perforating Branches of internal thoracic artery
- Branches of lat. Thoracic, superior thoracic, acromio thoracic(thoraco acromial)
- Lat. Branches of posterior intercostal artery



Arteries of Mammary Gland



VENOUS DRAINAGE

- Follows the arteries
- Converge towards the base of the nipple & forms an anastomotic v. circle
- Venous circle
 S/F
- Internal thoracic, lower part of neck
 Deep-
- Internal thoracic, axillary, posterior intercostal

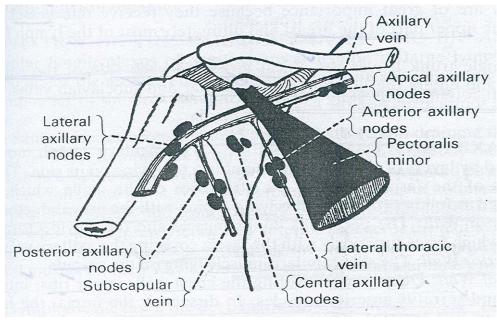
Nerve supply

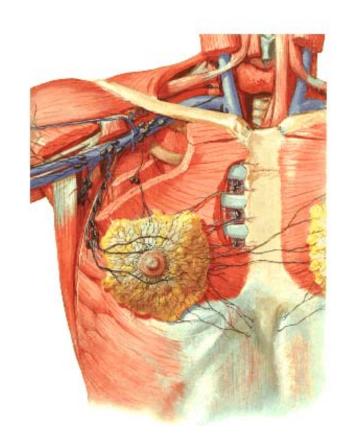
- Anterior & lareral cutaneous branches of4th to 6th intercostal nerves
- Milk secretion is controlled by prolactin

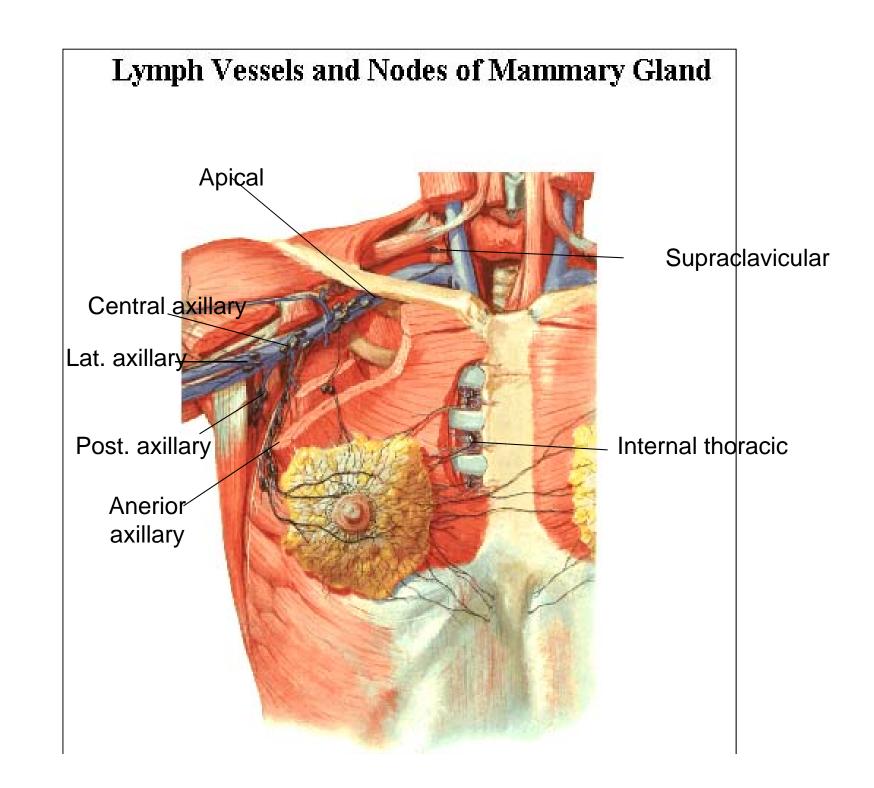
Lymph vessels &nodes

Lymph Vessels and Nodes of Mammary Gland

- Superficial lymphaticsskin except nipple & areola
- Deep lymphatics-Parenchyma, nipple & areola





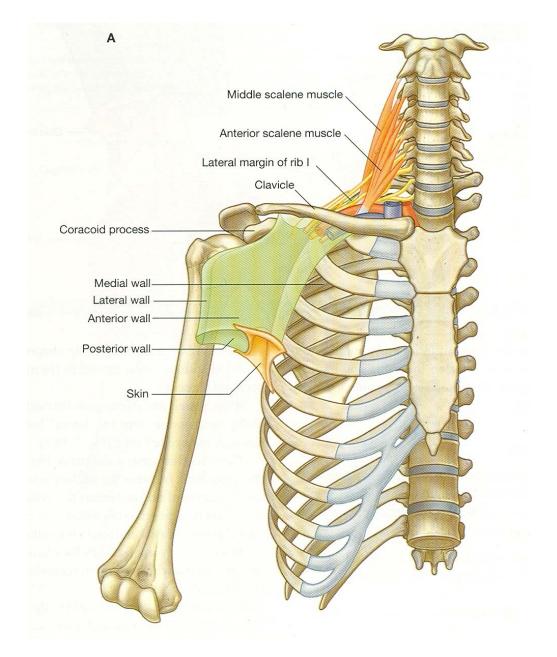


Applied anatomy

- Carcinoma-
 - -Puckering of skin
 - -Peau d' orange
 - -Bilateral spread
 - -Dropping into the pelvis
- Abcess- radial incision

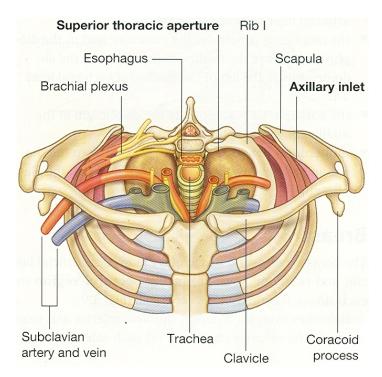
Axilla

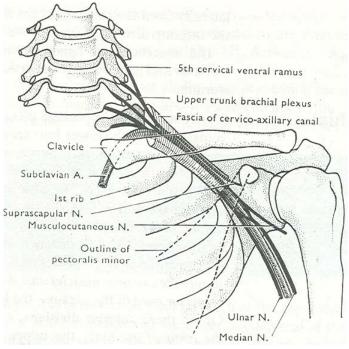
- Gateway to the upper limb
- Irregularly shaped pyramidal space
 - -Four sides
 - -Apex or inlet
 - -Floor



Axillary inlet

- Lateral border of first rib
- Posterior surface of the clavicle
- Superior border of the Scapula

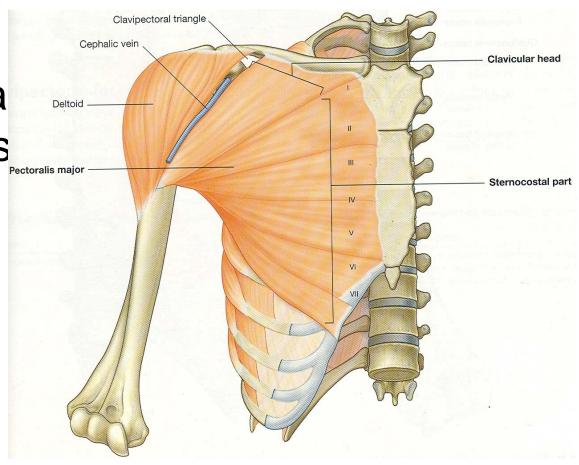




Anterior wall of axilla

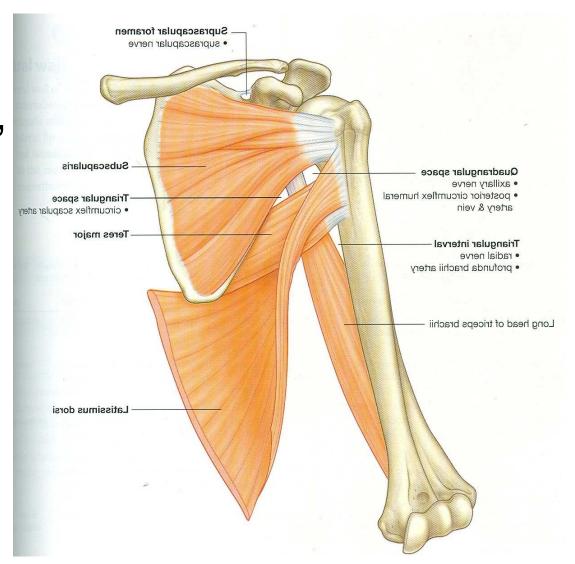
Pectoralis major

Clavipectoral fascia
enclosing pectoralis
minor & subclavius



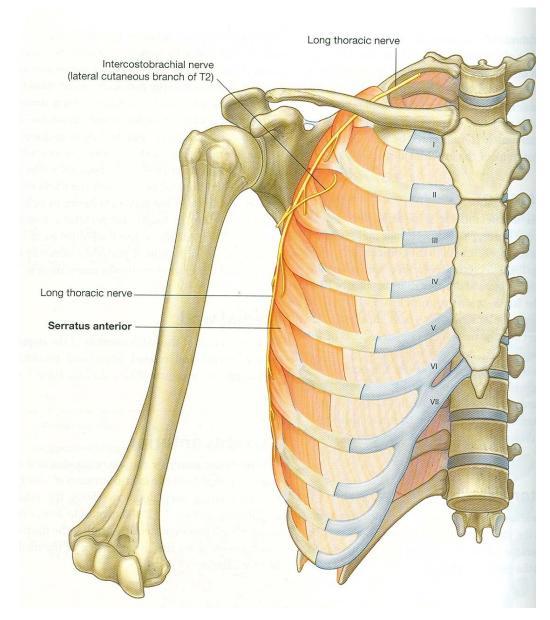
Posterior wall

- Subscapularis
- Lattisimus dorsi, teres major
- Long head of triceps



Medial wall of the axilla

- Upper four ribs with intercostal muscles
- Serratus anterior



Lateral wall

 Upper part of shaft of humerus (bicipital groove)

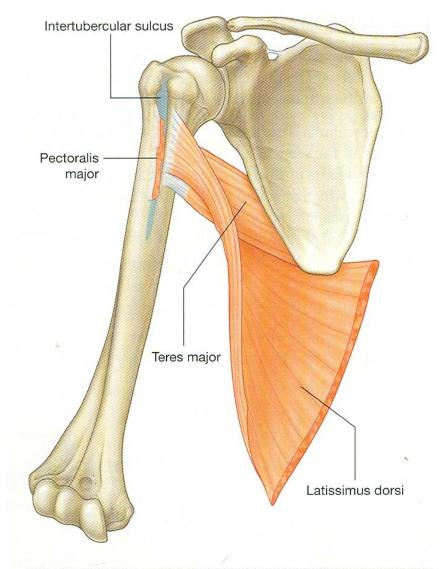
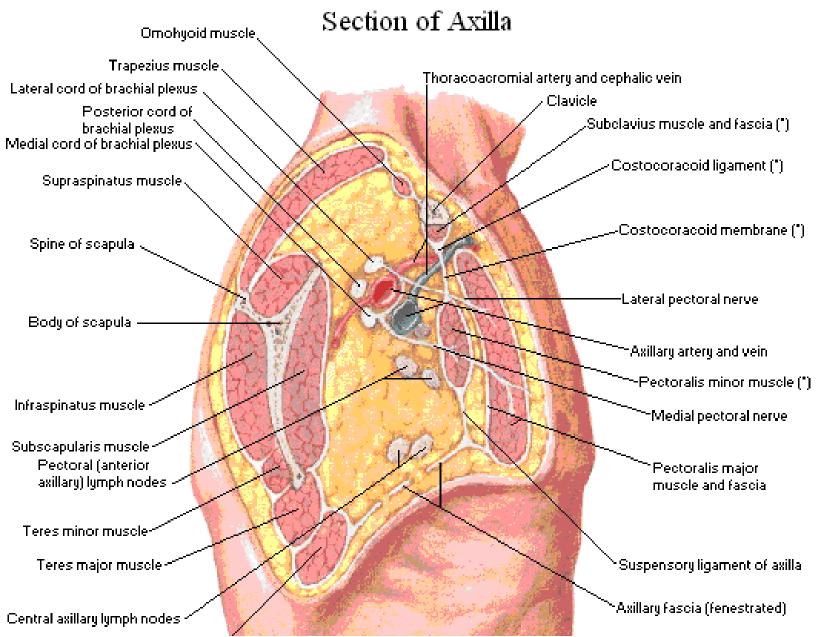


Fig. 7.43 Lateral wall of the axilla.

Floor of the axilla

- Fascia & dome of skin
- Supporetd by clavipectoral fascia

Pectoral, Clavipectoral and Axillary Fasciae

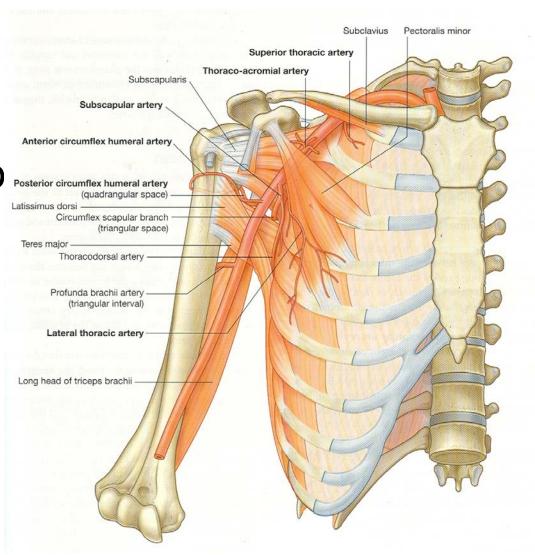


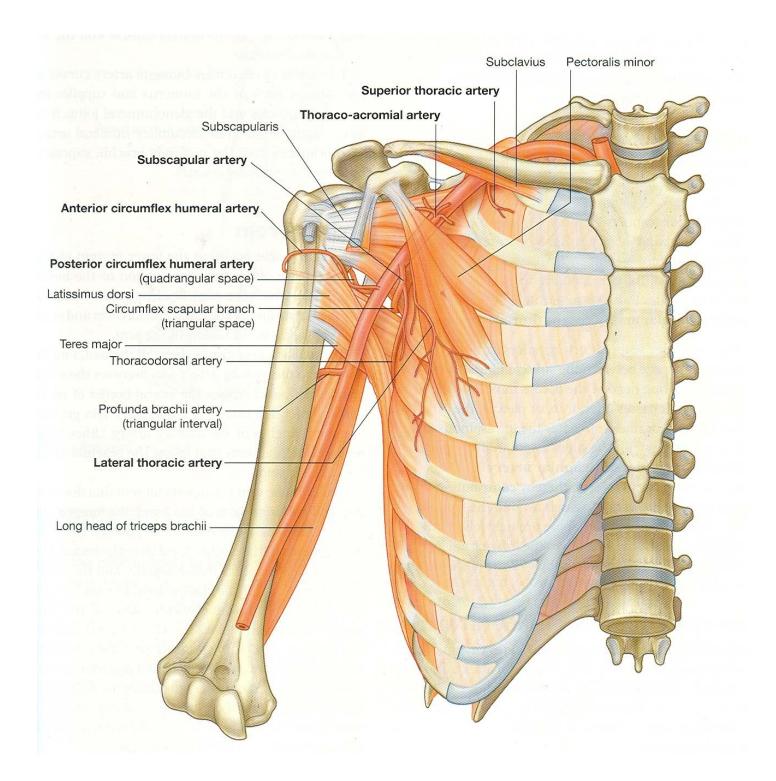
Contents of axilla

- Axillary artery & it's branches
- Axillary vein & it's branches
- Infraclavicular part of brachial plexus
- Axillary lymph nodes & lymphatics
- Long thoracic nerve & intercostobrachial nerves
- Fat & areolar tissue
- Proximal parts of biceps brachii, coracobrachialis & axillary process of breast

Axillary artery

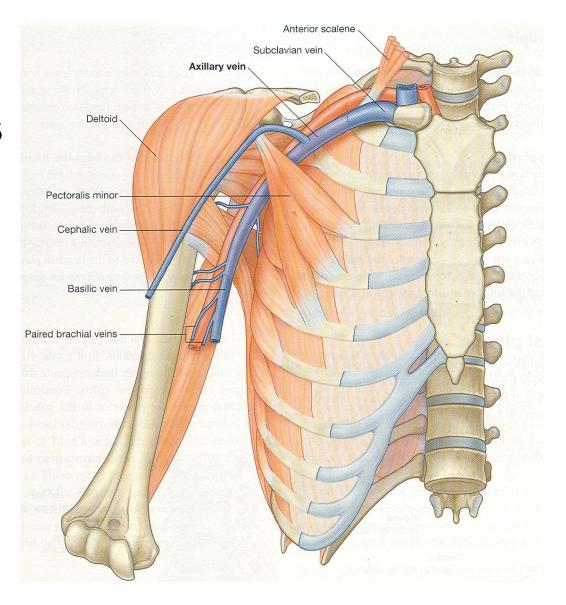
- Continuation of subclavian artery
- Outer border of first rib to lower border o teres major





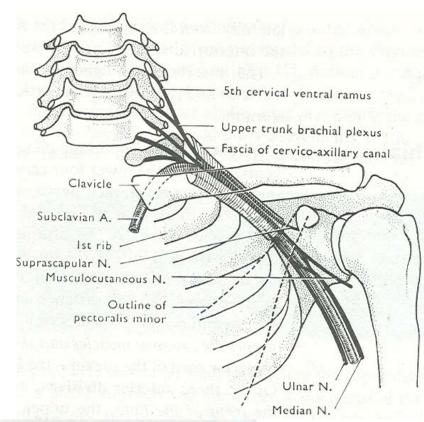
Axillary vein

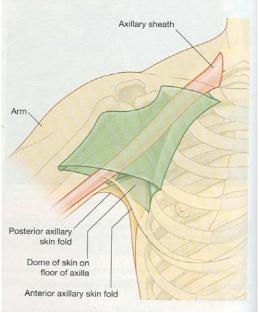
- Continuation of basilic vein
- Receives tributaries like venae comitantes of brachial artery, cephalic vein, veins corresponding to branches to axillary artery



Axillary sheath

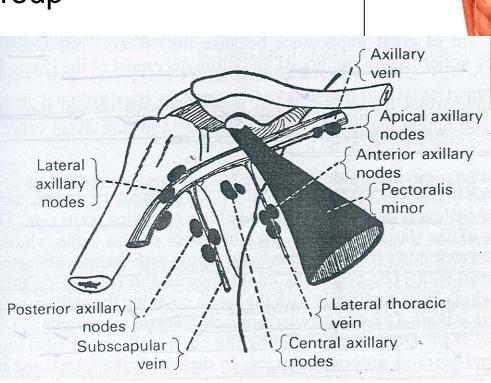
- Derived from prevertebral layer of deep cervical fascia
- Envelops axillary artery
 & brachial plexus
- Axillary vein is not included



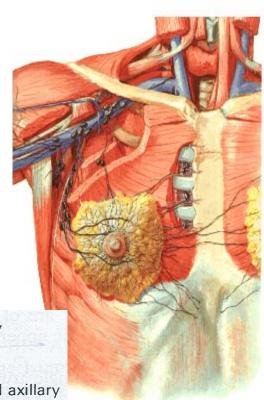


Axillary lymph nodes

- Anterior axillary
- Posterior axillary
- Central group
- lateral group
- Apical

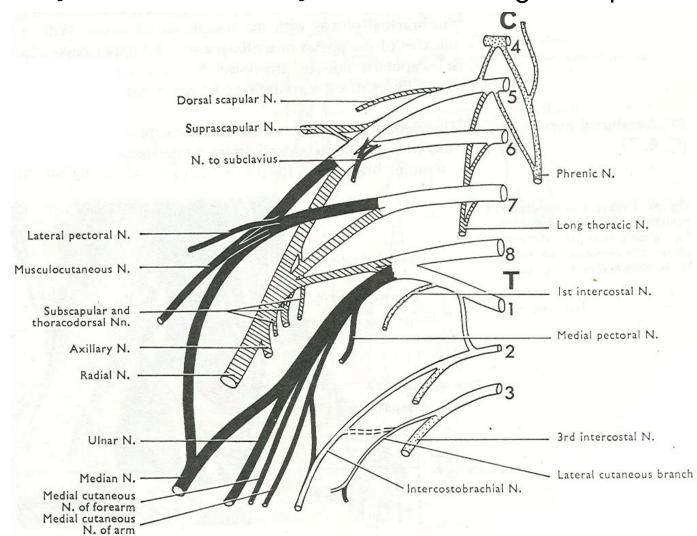


Lymph Vessels and Nodes of Mammary Gland



Brachial plexus

Formed by ant. Primary rami of C₅ − T₁

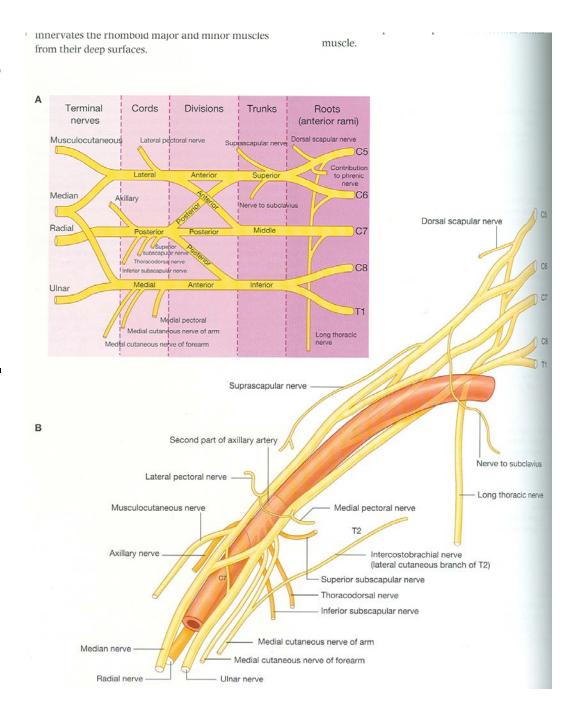


Brachial plexus Branches from roots-

- Long thoracic nerve(C₅₆₇)
- Dorsal scapular nerve(C₅)

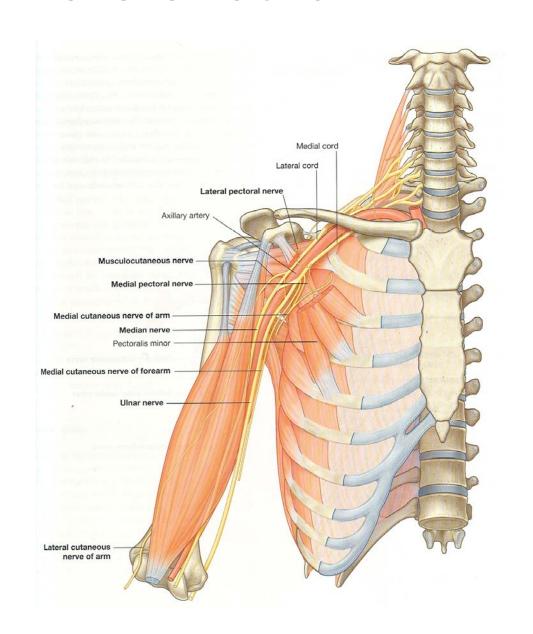
Branches from trunks-

- Suprascapular (C₅₆)
- Nerve to subclavius (C₅₆)



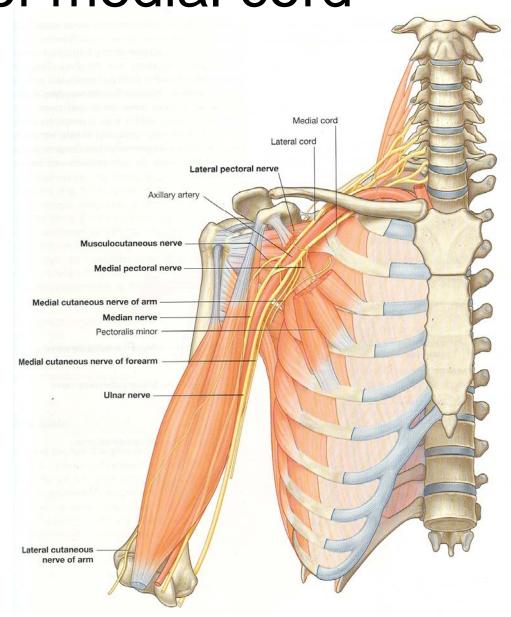
Branches of lateral cord

- Lateral pectoral nerve (C₅₆₇)
- Musculocutaneous nerve (C₅₆₇)
- Lateral root of median nerve (C₅₆₇)



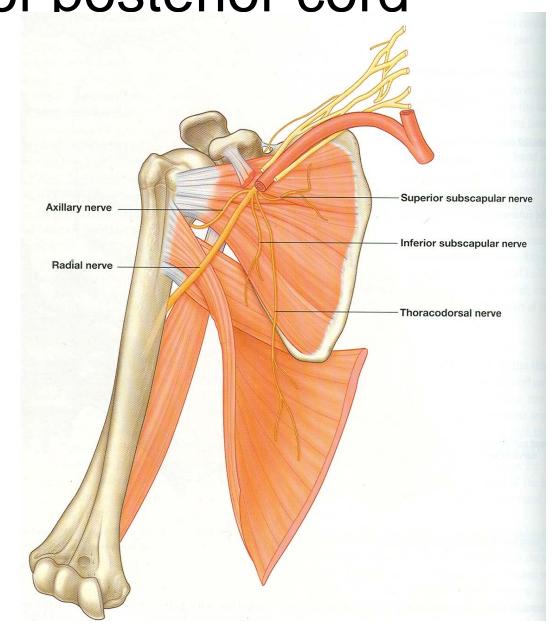
Branches of medial cord

- Medial pectoral nerve (C₈T₁)
- Medial cutaneous nerve of arm (C₈T₁)
- Medial cutaneous nerve of forearm (C₈T₁)
- Ulnar (C_8T_1)
- Medial root of median (C₈T₁)



Branches of posterior cord

- Upper subscapular (C₅₆)
- Thoracodorsal(C₆₇₈)
- Lower subscapular (C₅₆)
- Axillary (C₅₆)
- Radial(C₅₆₇₈T₁)



Other nerve supply of upper limb

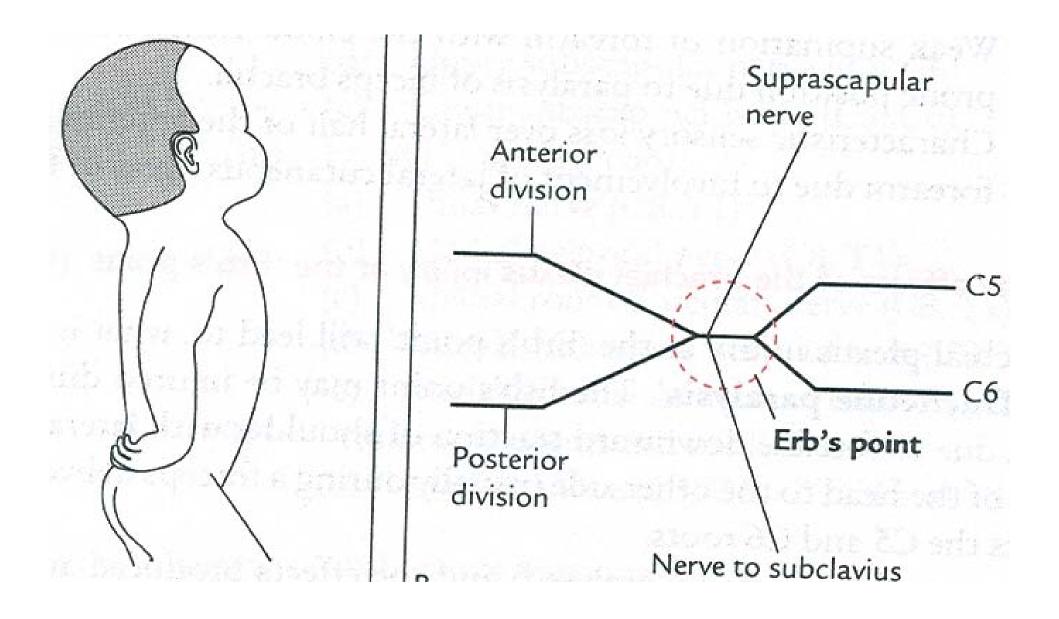
- Supraclavicular branches from cervical plexus
- Intercostobrachial nerve (lateral cutaneous branch of second intercostal nerve)

Injuries to brachial plexus

- Erb's paralysis
 Injury to upper trunk
- Klumpke's paralysis
 Injury to lower trunk
- Injury to nerve to serratus anterior
 Winging of scapula

- Erb's paralysis
 - Injury to upper trunk nerve root involved are C-5 & 6
- Cause of injury-undue separation of head from shoulder in birth injury, fall on shoulder and during anesthesia
- Muscles paralyzed- Biceps, deltoid, brachialis, brachioradialis, supraspinatus, infraspinatus & supinator
- Deformity- Arm adducted & medially rotated, forearm extended & pronated. Deformity is known as policeman's tip hand or porter's tip hand
- Biceps & supinator jerk are lost
- Sensation lost over a small area over lower part of deltoid

Porter's tip hand Erb's point



Klumpke's paralysis

Injury to **lower trunk**. Nerve root involved are C8 &T1

Cause of injury-Undue abduction of arm as in clutching some thing with the hand after a fall

from height, or so



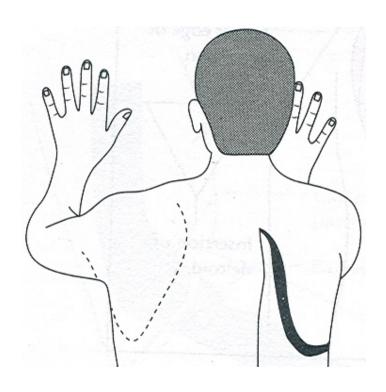
- Muscles paralyzed- Intrinsic muscles of hand & ulnar flexor of wrist & fingers
- Deformity- Claw hand due to unopposed action of long flexors & extensors, There is hyperextension at metacarpophalangeal joint & flexion at interphalangeal joint
- Cutaneous anesthesia & analgesia along the ulnar border of forearm & hand
- Horner syndrome- Ptosis, miosis, anhydrosis enophthalmos & loss of ciliospinal reflex

 Injury to nerve to Serratus anterior

Winging of scapula

Cause- Sudden pressure from above, carrying heavy loads on shoulder

Disability- loss of pushing & punching movements, arm cannot be abducted beyond 90 degree



Applied importance of axilla

- Boils
- Axillary lymphadenopathy
- Abcess