

The peritoneum

General features

• The peritoneum is a thin serous membrane

- Consisting of:
- **1- Parietal peritoneum**
- -lines the ant. Abdominal wall
- 2- Visceral peritoneum
- covers the viscera
- Peritoneum is continuous below with parietal peritoneum lining the pelvis
- **3- Peritoneal cavity**
- the potential space between the parietal and visceral layer of peritoneum
- in male, is a closed sac
- but in the female, there is a communication with the exterior through the uterine tubes, the uterus, and the vagina



The relationship between viscera and peritoneum Intraperitoneal viscera

- viscera is almost totally covered with visceral peritoneum
- example, stomach, 1st & last inch of duodenum, jejunum, ileum, cecum, vermiform appendix, transverse and sigmoid colons, spleen and ovary



The relationship between viscera and peritoneum....cont

Interperitoneal viscera

Such organs are not completely wrapped by peritoneum
 one surface attached to the abdominal walls or other organs.

Example

liver, gallbladder, urinary bladder and uterus

The relationship between viscera and peritoneum

Retroperitoneal viscera

- some organs lie on the posterior abdominal wall
- Behind the peritoneum
- they are partially covered by peritoneum on their anterior surfaces only

• Example

kidney, suprarenal gland, pancreas, descending and ascending colon, upper 3rd of rectum

duodenum, and ureter, aorta and I.V.C

STRUCTURE OF THE PERITONEUM CONTD

Peritoneal Cavity

• The peritoneal cavity is a potential space between the parietal and visceral

peritoneum. It normally contains only a small amount of lubricating fluid.

Function of the peritoneum

 Secretes a lubricating serous fluid that continuously moistens the associated organs

• Fat storage

 ● Defense role→ the presence of lymphatic vessels & nodes

Support viscera



The peritoneum



The peritoneal cavity is the largest one in the body.
Divisions of the peritoneal cavity :

Greater sac; extends from diaphragm down to the pelvis.
Lesser sac; lies behind the stomach.

•Both cavities are interconnected through the **epiploic foramen**.

•<u>In male :</u> the peritoneum is a closed sac .

•<u>In female</u>: the sac is <u>not</u> <u>completely closed</u> because it communicates with the exterior through the uterine tubes, uterus and vagina.

Peritoneum.....cont

 Peritoneum cavity divided into
 Greater sac
 Lesser sac
 Communication between them by the epiploic foramen



Lesser sac = omental bursa

- Deep to lesser omentum
- Behind the stomach
- Between two layers of greater omentum
- Under the diaphragm and liver
- Deep to lesser opening (Epiploic opening)



Omental bursa, (Lesser Sac)



□It is a part of the peritonial cavity behind the stomach.

 Boundaries of the *omental bursa*;
 Anterior wall, from <u>above</u> <u>downward</u>, by the caudate lobe of the liver, the lesser omentum, back of the stomach, and the anterior two layers of the greater omentum.

Posterior wall, from below upward, by the posterior two layers of the greater omentum, the transverse colon, and the ascending layer of the transverse mesocolon, the upper surface of the pancreas, the left suprarenal gland, and the upper end of the left kidney.

Omental bursa.....cont

Walls :

 Superior — peritoneum which covers the caudate lobe of liver and diaphragm
 Anterior — lesser

Anterior — lesser omentum, peritoneum of posterior wall of stomach, and anterior two layers of greater omentum



Omental bursa.....cont

- Inferior conjunctive area of anterior and posterior two layers of greater omentum
- Posterior posterior two layers of greater omentum, transverse colon and transverse mesocolon, peritoneum covering posterior abdominal wall.



Walls and recesses of omental bursa









Omental bursa.....cont

 Left spleen, gastrosplenic ligament splenorenal ligament

 Right – omental foramen



Greater sac

• Deep to ant. Abdominal

wall

- Below the diaphragm
- Above pelvic viscera
- out to:
- Liver→ surround all the liver except bare area
- Stomach -> completely surrounded by peritoneum
- Transverscolon
- Greater omentum
 → two layers of peritoneum from greater curvature of stomach
- Duodenum → just the anterior surface covered by peritoneum
- Small intestine \rightarrow surrounds all the intestine & form mesentery











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Peritoneal subdivisions

- The transverse colon and transverse mesocolon divides the greater sac into
- Supracolic compartments
- Infracolic compartments.
 Rt.extraperitoneal space.(bare area of liver & diaphragm)

Supracolic compartments Subphrenic space Sub hepatic space



Infracolic compartment

- lies below the transverse colon and transverse mesocolon
 Divided by root of the mesentery of small intestine into:
- Rt. Infracolic compartment
 Lt. infracolic compartment



Infracolic compartments

- Right paracolic sulcus (gutter)
- Subdivide into:
- - Rt.medial.paracolic
- - Rt.Lateral.paracolic
- Rt.Lateral.paracolic communicates with the hepatorenal recess and the pelvic cavity.
- It provides a route for the spread of infection between the pelvic and the upper abdominal region.



Left paracolic (gutter)

Subdivide into: - Lt.medial.paracolic - Lt.Lateral.paracolic

 Lt. lateral paracolic separated from the area around the spleen by the phrenicocolic ligament(a fold of peritoneum that passes from the colic flexure to the diaphragm)

- Lt.medial.paracolic open to the outside through the pelvis



<u>Omental</u> (epiploic)foramen

- Position:
- lies between the liver and duodenum
- just above the first part of the duodenum
 - behind the lesser omentum
 - infront of the inferior vena cava
 - short, vertically flattened passage, about 3cm





Omental foramen





Epiploic foramen



The Peritoneal Reflections or folds

- Certain terms, often arbitrary, are commonly used for the peritoneal reflections.
- A peritoneal reflection that connects the intestine and body wall is usually named according to the part of the gut to which it is attached.
- For example, the reflection to jejunum and ileum is termed the mesentery, that to the transverse colon is the transverse mesocolon.
- Some peritoneal reflections between organs or between the body wall and organs, are termed ligaments or folds. Most of such ligaments or folds contain blood vessels. Broad peritoneal sheets associated with stomach are termed omenta.

1- Omenta : Two-layered fold of peritoneum that extends from stomach to adjacent organs

Two omenta Lesser omentum Greater omentum



Lesser omentum

- Two-layered fold of peritoneum
- Extends from porta hepatis, fissure of ligamentum venosum and the diaphragm to lesser curvature of stomach and superior part of duodenum



Lesser omentum

 Hepatogastric ligament from porta hepatis to lesser curvature of stomach

• Hepatoduodenal ligament

> Extends from porta hepatis to superior part of duodenum,
> at its free margine enclose 3 structures(3 key structures)
> common bile duct → Ant.
> proper hepatic a → At the Lt. of the common bile duct
> hepatic portal v → post.




Contents of lesser omentum

Blood vessels → Rt. & Lt. gastric vessels
 Lymph nodes & lymphatic vessels
 Fat
 Autonomic N.S→ sympathetic + parasympathetic (vagus nerve)

Greater omentum

- It is the largest peritoneal fold. It consists of a double sheet, folded on itself so that it is made up of four layers.
- The anterior two layers descend from the greater curvature of stomach and superior part of duodenum and hangs down like an apron in front of coils of small intestine
- then turn up on the back of itself, and ascend to the transverse colon.
- the two layers are separated to cover the anterior and posterior surfaces of transverse colon. Then they form the transverse mesocolon



- The upper part of the greater omentum which extends between the stomach and the transverse colon is termed the gastrocolic ligament.
- In adult, the four layers of greater omentum are frequently adhered together, and are found wrapped about the organs in the upper part of the abdomen

Folds and fossas of anterior abdominal wall

- Medial umbilical fold contain the remnant of urachus (median umbilical ligaments)
- Medial umbilical fold contains remnants of the umbilical arteries (medial umbilical ligaments)
- Lateral umbilical fold contains the inferior epigastric vessels
- Supravesical fossa
- Medial inguinal fossa
- Lateral inguinal fossa



Contents of Greater omentum (between the descended layers)

Gastroepiploic vessels
 Lymph nodes & lymphatic vessels
 Fat
 Autonomic N.S → sympathetic + parasympathetic (vagus nerve)

Functions of greater omentum

- (1) protective function: The greater omentum contains numerous fixed macrophages, which performs an important protective function.
- (2) storehouse for fat: The greater omentum is usually thin, and presents a cribriform apperarance, but always contains some adipose tissue, which in fatty people is present in considerable quantity.
- In the peritoneal cavity. Because it will migrate to the site of any inflammation in the peritoneal cavity and wrap itself around such a site, the greater omentum is commonly referred to as the "policeman" of the peritoneal cavity.

2- Mesenteries of the peritoneum

-Two-layered fold of peritoneum that attach the intestines to the posterior abdominal wall



FUNCTION

Mesenteries are double layers of peritoneum they decreases the friction between the adjacent visceral surfaces and allows some movement of the organs that occur during digestion

- 1- Mesentery of small intestine suspends the small intestine from the posterior abdominal wall -Broad and a fanshaped
- Root of mesentery
 - 15 cm long
 - Directed obliquely from left side of L2 vertebra to right sacroiliac joint



MESENTRYcont

Contents of the mesentery

- the jejunal and ileal
 branches of the superior
 mesenteric artery &veins
- nerve plexuses
- Iymphatic vessels
- the lymphatic nodes,
- connective tissue
- fat







2- Mesoappendix

 Triangular mesentery extends from terminal part of ileum to appendix

 Appendicular artery runs in free margin of the mesoappendix



3. The transverse mesocolon



It is a broad fold - Connects the transverse colon to the anterior border of the pancreas.

Contents

The blood vessels
Nerves
lymphatic's of the transverse colon.

SIGMOID MESOCOLON

The sigmoid mesocolon is an inverted V-shaped attachment of the sigmoid colon of the large intestines to the abdominal wall. The apex of the V is attached by the bifurcation point of the internal and external branches of the common iliac artery.



4- Sigmoid mesocolon

 It is a fold of peritoneum
 attaches the sigmoid colon to the pelvic wall.

Contents

The sigmoid vessels
 Lymphatic vessels
 Nerves

The left Ureter descends into the pelvis behind its apex.



CONT

The descent of the left branch of the V-shaped sigmoid mesocolon goes along the medial border of the left <u>psoas major</u> muscle. The right side of the sigmoid mesocolon travels down into the <u>pelvis</u>, ending anteriorly around the level of the 3rd <u>sacral vertebra</u>.

Function Storing fat, vessels and nerves; attaching the intestines to the abdominal wall Structure Mesentery proper - from small intestine (jejunum and ileum) to posterior abdominal wall (contains superior mesenteric artery, autonomic nerve plexuses, lymphatics, fat) Transverse mesocolon - transverse colon -> posterior abdominal wall (*middle colic artery*) Sigmoid mesocolon - sigmoid colon -> pelvic wall (sigmoid arteries, superior rectal artery) Mesoappendix - mesentery of ileum -> appendix (appendicular artery) **Clinical relations** Mesenteric fibromatosis, intestinal volvulus

3- ligaments of the peritoneum

LIGAMENTS

 Double layer of peritoneum which connect one organ to another organ or to abdominal wall and forma part of omentas

1. The ligaments of the liver

The falciform ligament of liver
 The ligamentum teres hepatis
 The coronary ligament
 The right triangular ligament
 The left triangular ligament
 The hepatogastric ligament
 The hepatoduonedenal ligament



Falciform ligament of liver

- Consists of double
 peritoneal layer
- Sickeleshape
- Extends from anterior abdominal wall (umbilicus) to liver
- Free border of the ligament contains
 Ligamentum teres
 (obliterated umbilical vein)



 Coronary ligament the area between upper and lower layer of the coronary ligament is the bare area of liver which contract with the diaphragm;







 Hepatogastric ligament
 Hepatoduodenal ligament





2- Ligaments of spleen

Gastrosplenic ligament

- Connects the fundus of stomach to hilum of spleen.
- Contents

the short gastric & left gastroepiploic vessels pass through it.

Splenorenal ligament

extends between the hilum of spleen and left kidney.

- Contents

The splenic vessel Lymphatic vessels ,nodes & nerve the tail of pancreas



Phrenicosplenic ligament Splenocolic ligament



Figure 2.22. Parts of the greater and lesser omenta.

3- Ligaments of stomach

- Hepatogastric ligament
- Gastrosplenic ligament
- Gastrophrenic ligament
- Gastrocolic ligament
- Gastropancrestic ligament









4. The suspensory ligament of duodenum Sometimes named Treitz ligament at the junction between duodenum & jejunum

5. The phrenicocolic ligament

It is a fold of peritoneum which is continued from the left colic flexure to the diaphragm opposite the 10^{th} and 12^{th} ribs.



4- The Peritoneal Recesses & fossa

- In certain parts of the abdomen, peritoneal fold may bound recesses or fossae of the peritoneal cavity.
- At the junction between intraperitoneal and retro peritoneal organs
- These recesses are of surgical importance since they may become the site of internal hernia, that is, a piece of intestine may enter a recess and may be constricted (strangulated) by the peritoneal fold guarding the entrance to the recess.



- From a surgical point of view the omental bursa can be considered to belong to this category, with its opening at the epiploic foramen, bounded in front by the free border of the lesser omentum.
- They are sometimes found in relation to the duodenum, cecum and sigmoid colon

The Peritoneal Recesses & fossacont

1. Duodenal Recesses

 The superior duodenal recess or fossa The inferior duodenal recess or fossa The paraduodenal recess or fossa The duodenojejunal recess or fossa 2. Cecal recesses The superior ileocecal or fossa The inferior ileocecal or fossa The retrocecal recesses or fossa The rectocolic recess or fossa 3. The intersigmoid recess




Folds and recesses of posterior abdominal wall

- Superior duodenal fold and recess
- Inferior duodenal fold and recess
- Intersigmoid recess formed by the inverted
 V attachment of sigmoid mesocolon



 Retrocecal recess
 in which the appendix frequently lies • Hepatorenal recess lies between the right lobe of liver, right kidney, and right colic flexure, and is the lowest parts of the peritoneal cavity when the subject is supine



Hepato-renal pouch (Morrison's pouch) :-____Is the most sensitive / earliest site for

intra-peritoneal fluid collection.

____It is the most dependent site in supine patient.

____In suspected cases of ectopic pregnancy, do NOT rely on TVS probe only, you should use convex probe looking for fluid in Morrison's pouch.



5. Pouches

In the lesser pelvis, the peritoneum dips downwards forming a larger fossa, named pouch.
○ Clinical importants→ internal abdominal hernia

Pouches...cont

2- The Vesicouterine pouch is formed between the anteroinferior surface of the uterus and the superior surface of the urinary bladder

Pouches

In male

- o rectovesical pouch
- lies between rectum and urinary bladder (or the seminal vesicles and ampullae ductus deferentes).
- The rectovesical pouch is the lowest part of the peritoneal cavity in anatomical position in male.



Pouches

In female

1- Rectouterine pouch between rectum and uterus

2- Vesicouterine pouch between bladder and uterus

- The rectouterine pouch is formed between the anterior surface of the rectum and the posterosurface of the uterus and the upper part of vagina.



Subphrenic space

 Divided by the attachment of Falciform ligament into
Rt.subphrenic space
Lt.subphrenic space



Subhepatic space divided into:
Rt.subhepatic space(morison's pouch)
Lt.subhepatic space(lesser sac)







Thank you