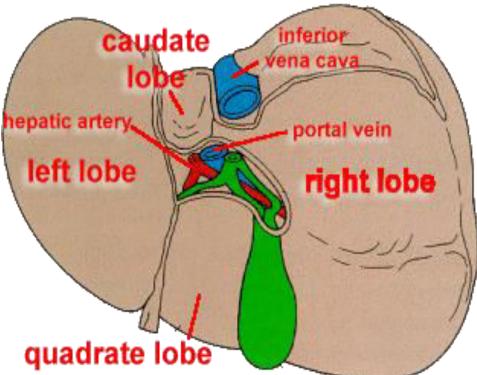
#### **DIGESTIVE SYSTEM (2)**

1

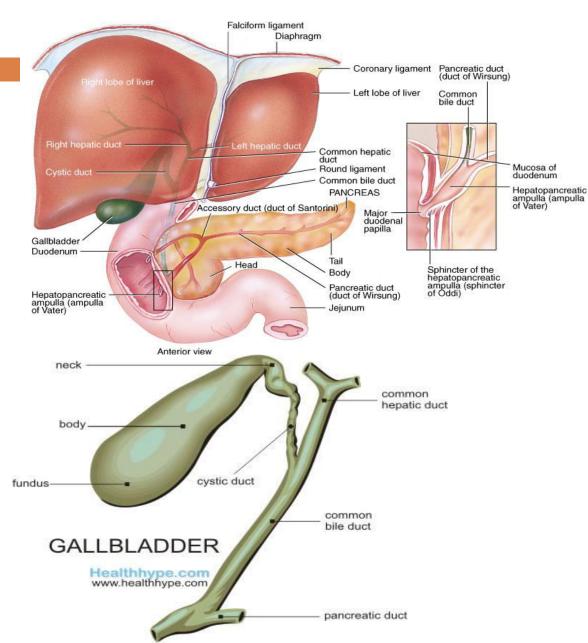
Dr. Wafaa Shunnaq

# LIVER AND GALLBLADDER

- The liver is the heaviest gland in the body and the second largest organ in the body after the skin.
- The *liver* is divided into left and right lobes, separated by the falciform ligament. Associated with the right lobe are the caudate and quadrate lobes.
- The gallbladder is a sac located in a depression on the posterior surface of the liver.

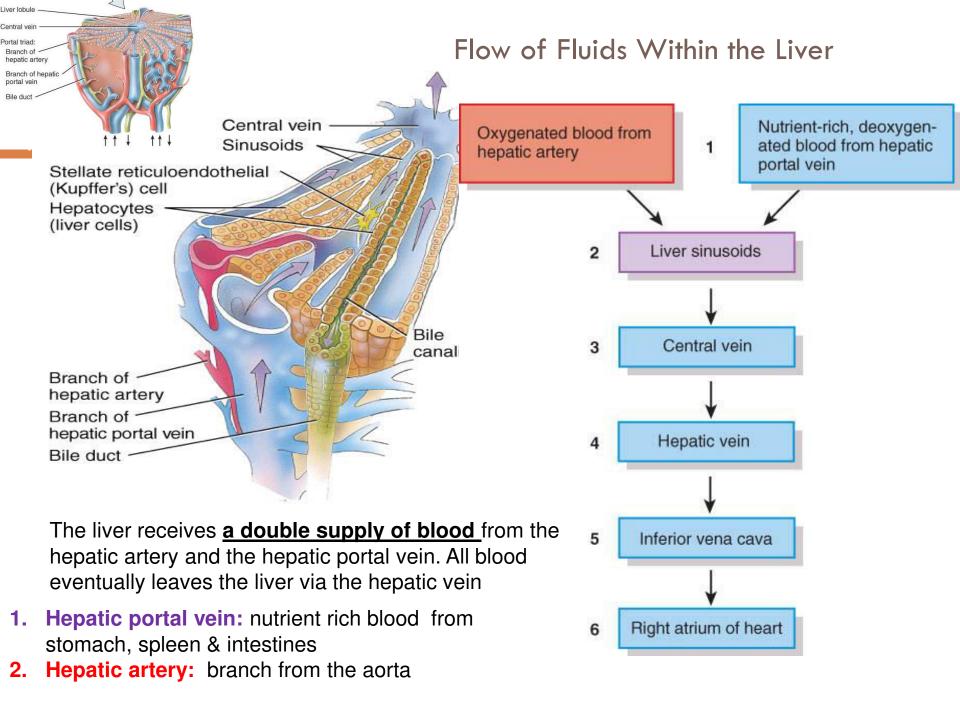


# Anatomy of the Liver and Gallbladder



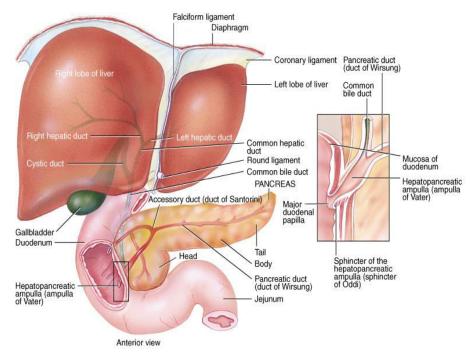
Liver

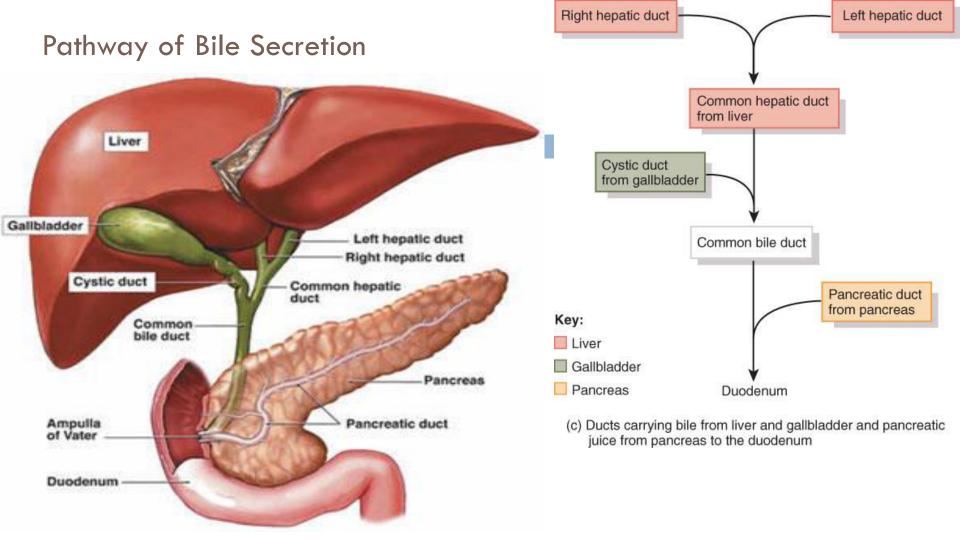
- below diaphragm
- right lobe larger
- gallbladder on right lobe
- size causes right kidney to be lower than left
- Gallbladder
  - fundus, body & neck



#### Bile - Overview

- Hepatic cells (hepatocytes) produce bile that is transported by a duct system to the gallbladder for concentration and temporary storage.
- Bile is partially an excretory product (containing components of worn-out red blood cells) and partially a digestive secretion.
- Bile's contribution to digestion is the emulsification of triglycerides.
- The liver also functions in carbohydrate, lipid, and protein metabolism; removal of drugs and hormones from the blood; excretion of bilirubin; synthesis of bile salts; storage of vitamins and minerals; phagocytosis; and activation of vitamin D.



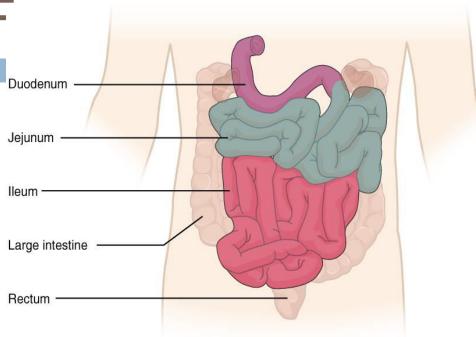


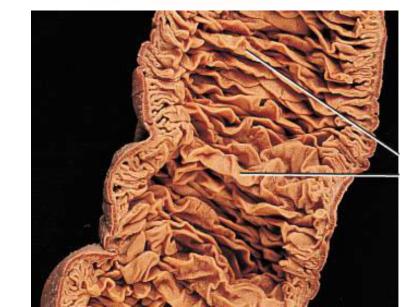
- Right & left Hepatic ducts connect to form common hepatic duct from liver
- Cystic duct from gallbladder & common hepatic duct from liver join to form common bile duct
- Common bile duct & pancreatic duct join to form Ampulla of vater which open into duodenum

# SMALL INTESTINE

7

- The major events of <u>digestion and</u> <u>absorption occur in the small</u> <u>intestine.</u>
- The small intestine <u>extends from</u> the pyloric sphincter to the ileocecal sphincter.
- The small intestine is divided into the duodenum, jejunum, and ileum.
- Projections called circular folds, or plicae circularies: are permanent ridges in the mucosa that enhance absorption by increasing surface area and causing chyme to spiral as it passes through the small intestine.



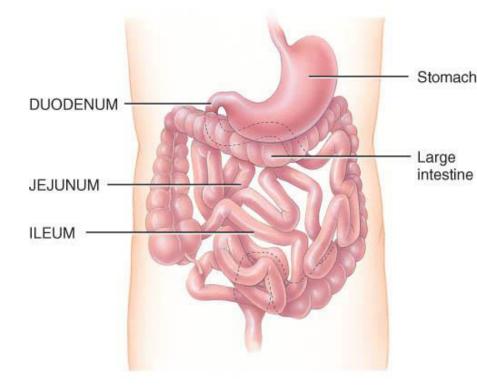


# Anatomy of the Small Intestine

- 20 feet long----1 inch in diameter
- Large surface area for majority of absorption
- 3 parts

8

- duodenum---10 inches
- jejunum---8 feet
- ileum---12 feet
  - ends at ileocecal valve

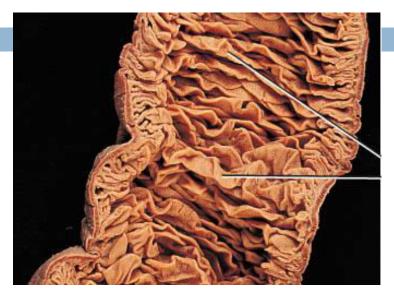


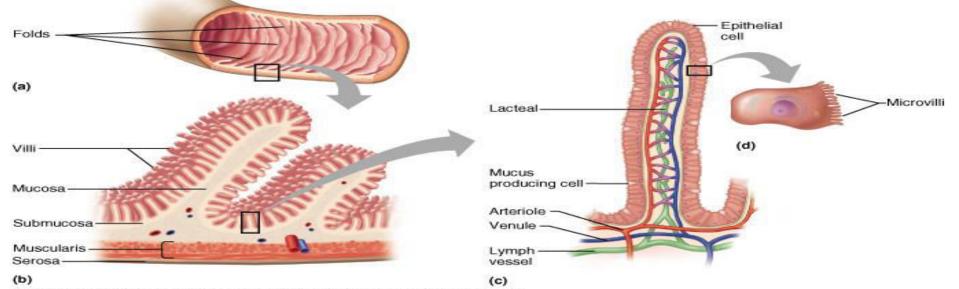
#### surface area of the small intestine



#### plica circularis

- **permanent**  $\frac{1}{2}$  inch tall folds
- not found in lower ileum
- 🗆 villi
  - 1 Millimeter tall
- □ microvilli
  - cell surface feature known as brush

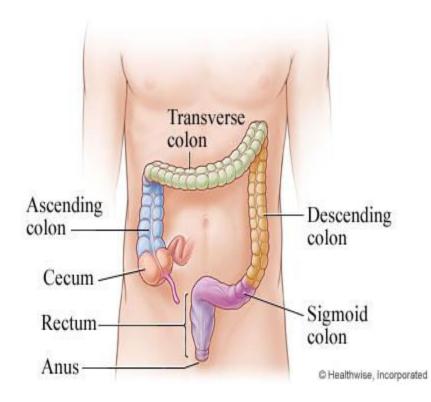


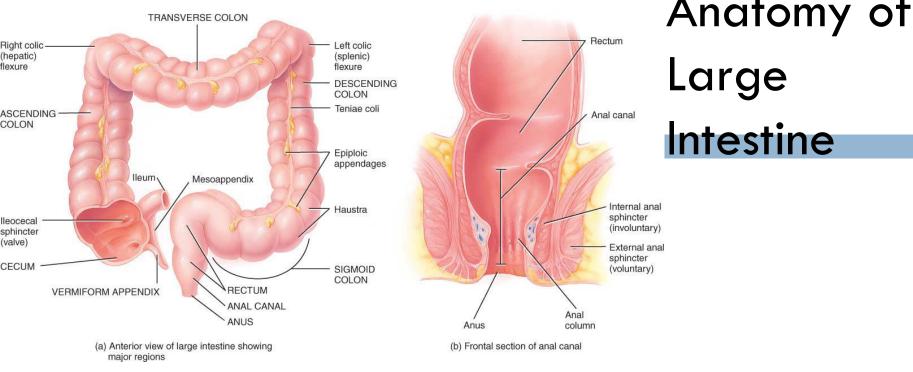


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# LARGE INTESTINE

- The large intestine (colon) <u>extends from the ileocecal</u> <u>sphincter to the anus.</u>
- Its subdivisions include the:
- 1. Cecum
- 2. Colon: ascending, transverse and sigmoid
- 3. rectum
- 4. anal canal
- Hanging inferior to the cecum is the appendix. (contains large amounts of lymphatic tissue)

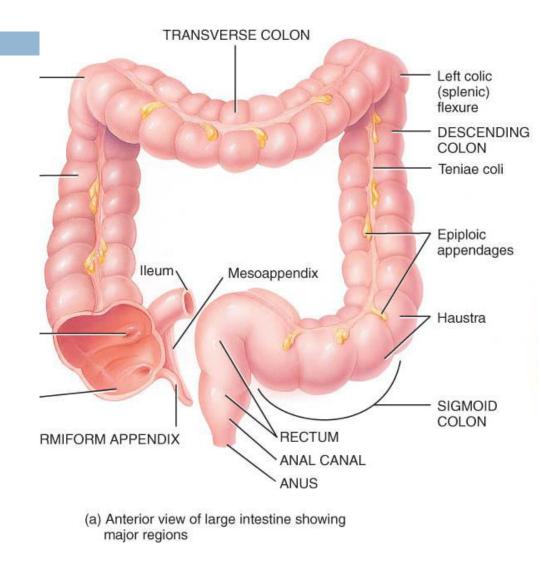




- □ 5 feet long by 2<sup>1</sup>/<sub>2</sub> inches in diameter
- Ascending & descending colon are retroperitoneal
- Cecum & appendix
- $\square$  Rectum = last 8 inches of GI tract anterior to the sacrum & coccyx
- Anal canal = last 1 inch of GI trac
  - internal sphincter---smooth muscle & involuntary
  - external sphincter----skeletal muscle & voluntary control

### Large Intestine

- External features of large intistine:
  - taeniae coli = bands of muscles
  - haustra (pouches) formed
  - Epiploic fat appendages



### Appendicitis

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- Inflammation of the appendix due to blockage of the lumen by chyme, foreign body, carcinoma, stenosis, or kinking
- Symptoms
  - high fever, elevated WBC count, neutrophil count above 75%
  - referred pain, anorexia, nausea and vomiting
  - pain localizes in right lower quadrant
- Infection may progress to gangrene and perforation within 24 to 36 hours

