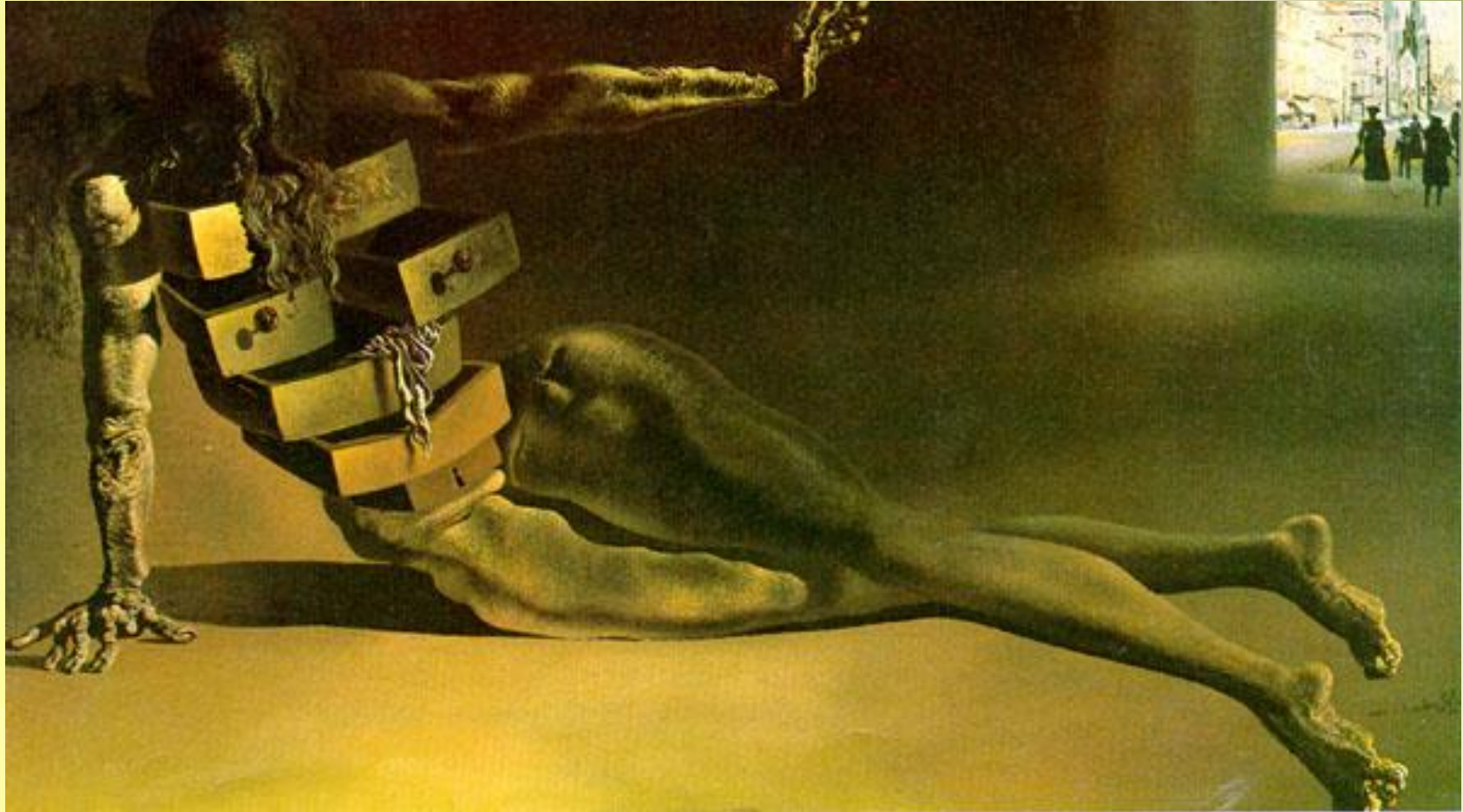


# THORACIC WALL

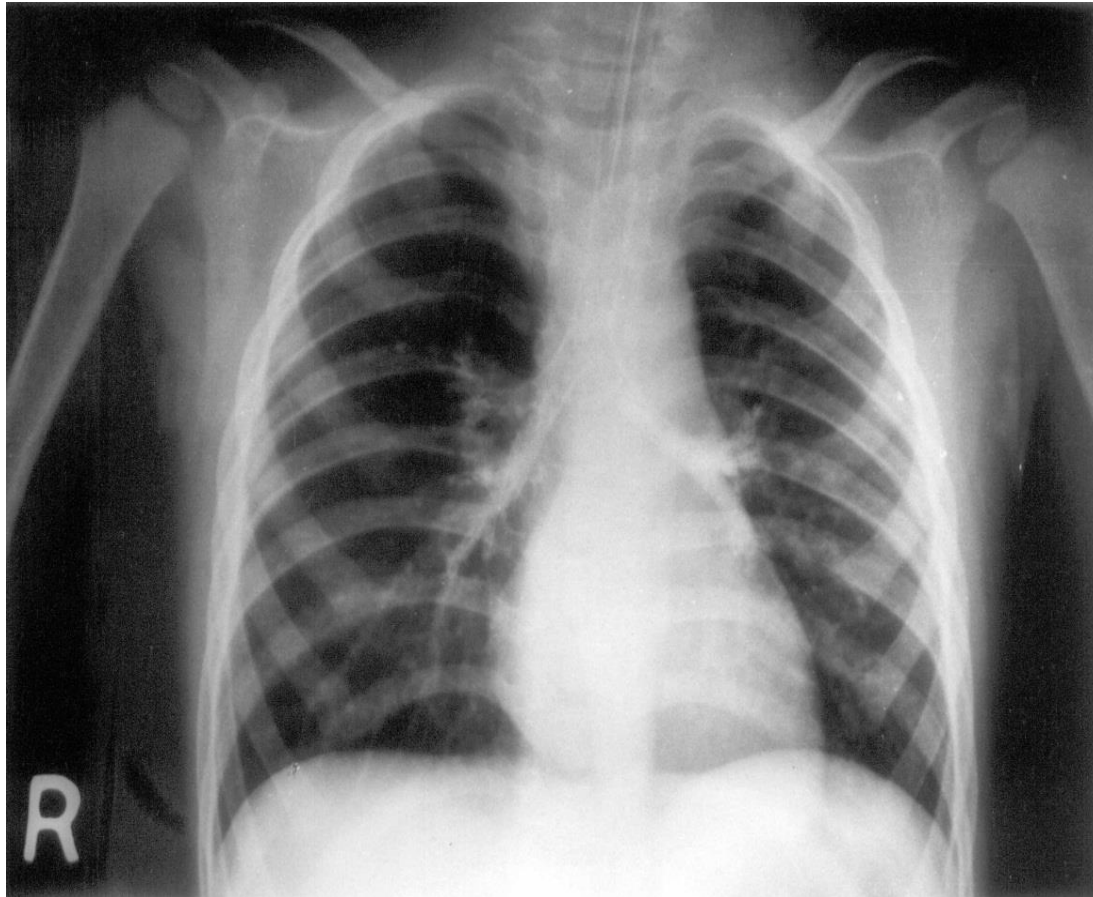


Salvador Dali - Anthropomorphic Chest of Drawers, 1936

# 1. THORAX



the part between the neck and the abdomen



**Chest X-ray**





## 1.1. REGIONS/TERMS

### Thoracic cavity

cavity between neck and abdomen  
protected by the thoracic wall

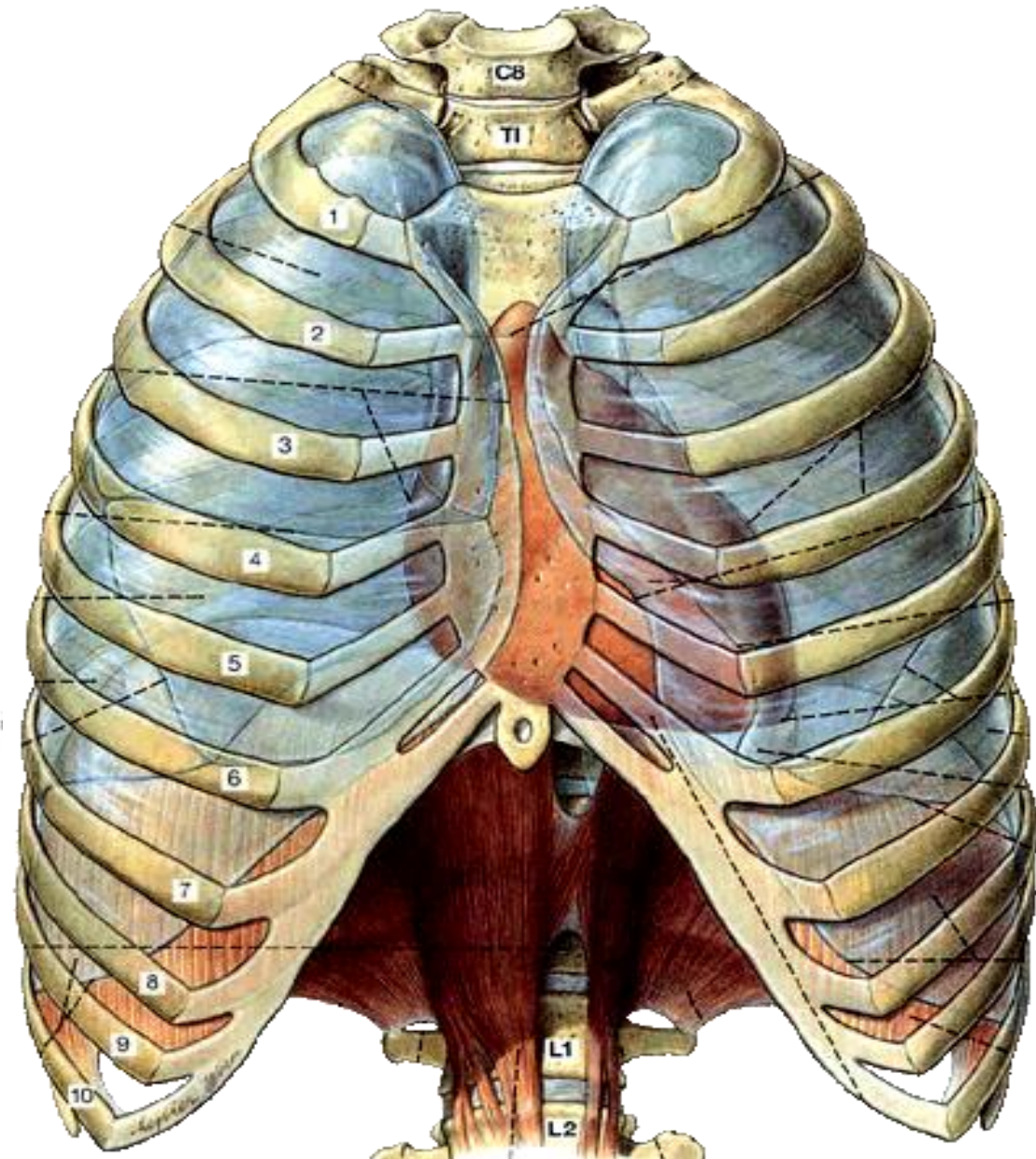
### Thoracic wall

bounds the thoracic cavity.  
formed by the skin, bones, fasciae, and muscles.

### Thoracic cage

bony portion of the thoracic wall

thoracic skeleton





## 1.2. SURFACES OF THE THORAX

**STERNUM & COSTAL CARTILAGES** anteriorly  
**12 THORACIC VERTEBRAE & POST. RIBS** posteriorly  
**RIBS & INTERCOSTAL SPACES** laterally

### Posterior surface

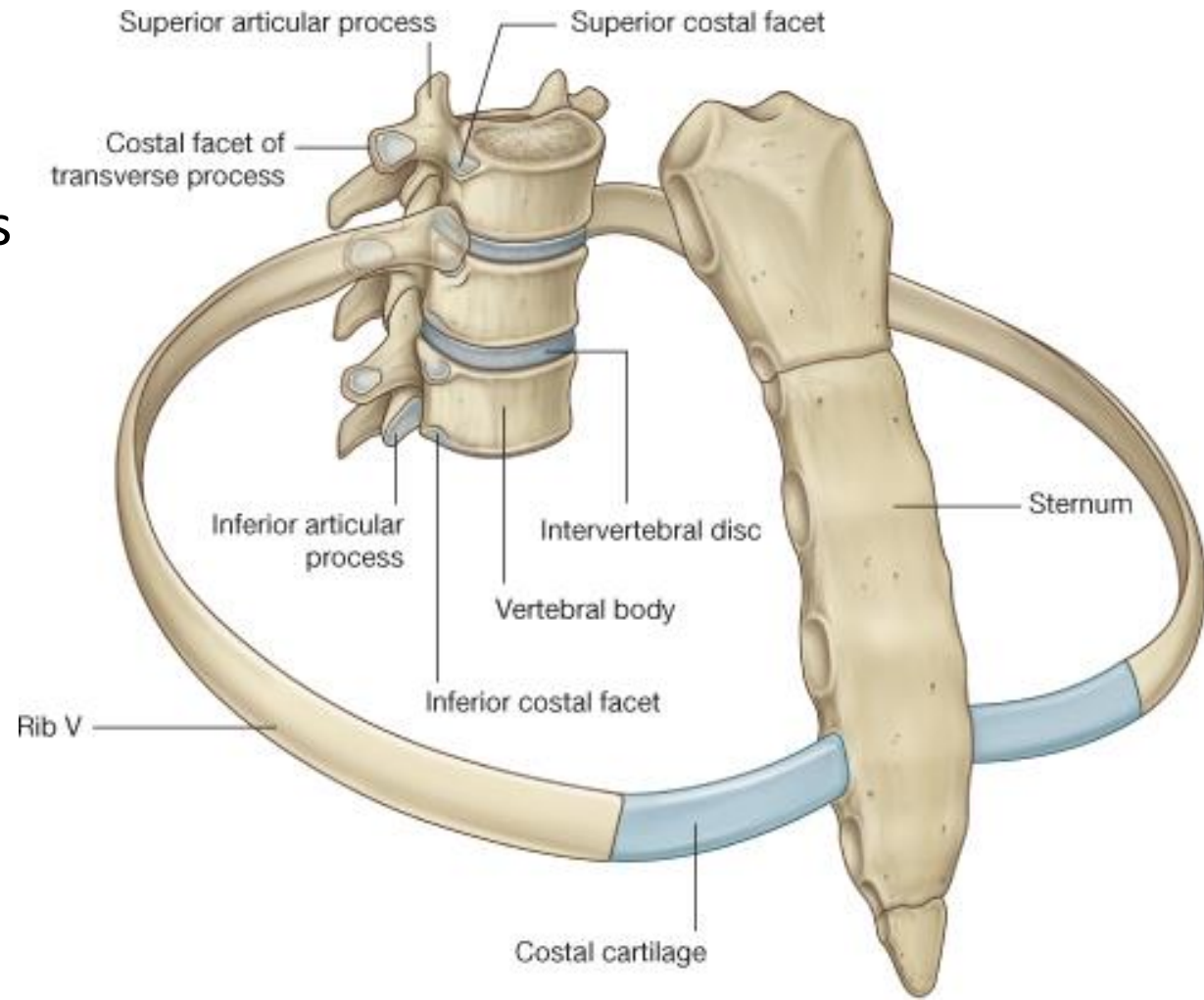
12 thoracic vertebræ & posterior parts of the ribs

### Anterior surface

sternum & costal cartilages

### Lateral surfaces

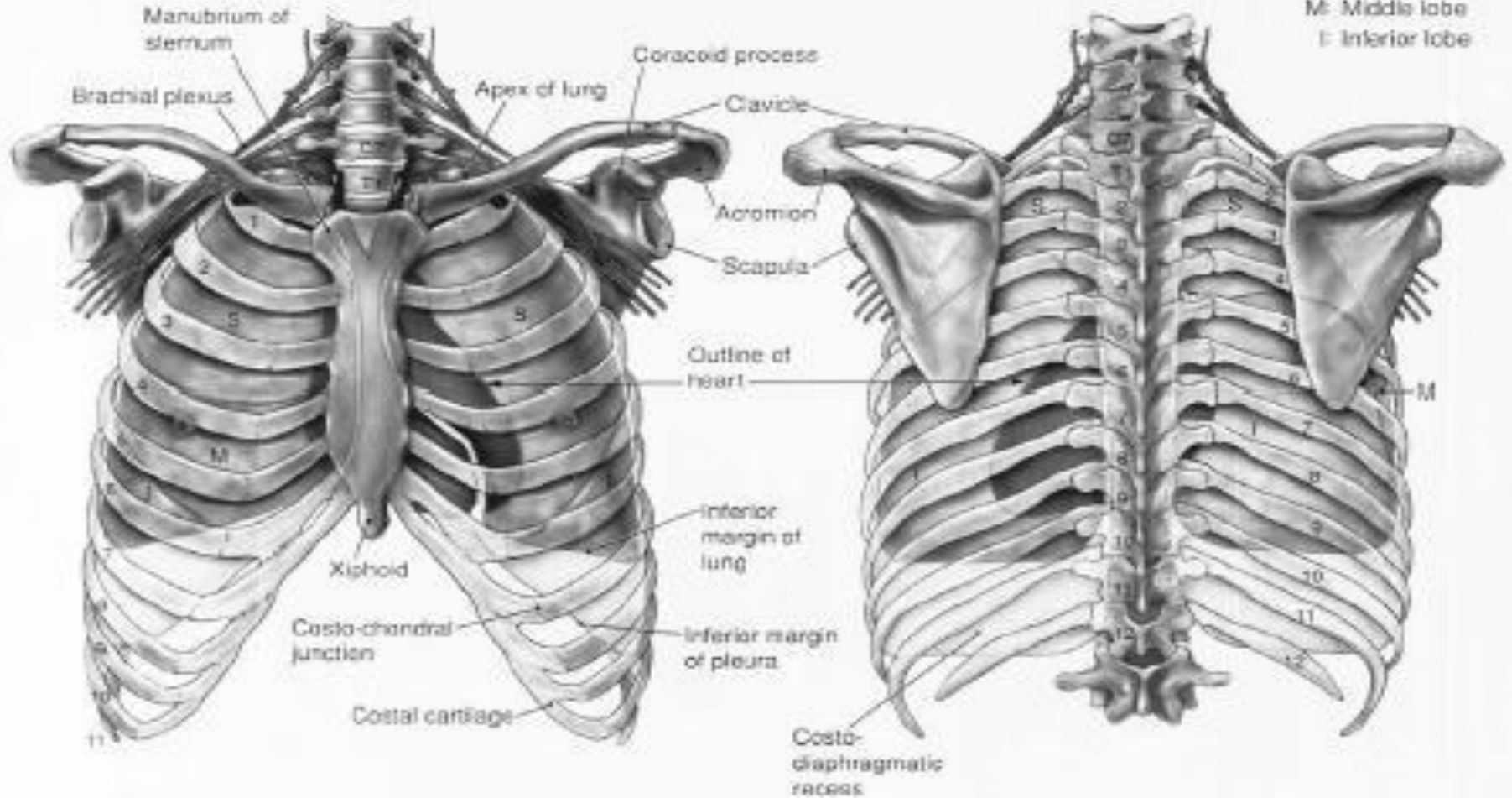
ribs, separated by the intercostal spaces





# 1.3. BOUNDARIES OF THE THORAX

## THORACIC ANATOMY



FRONT VIEW

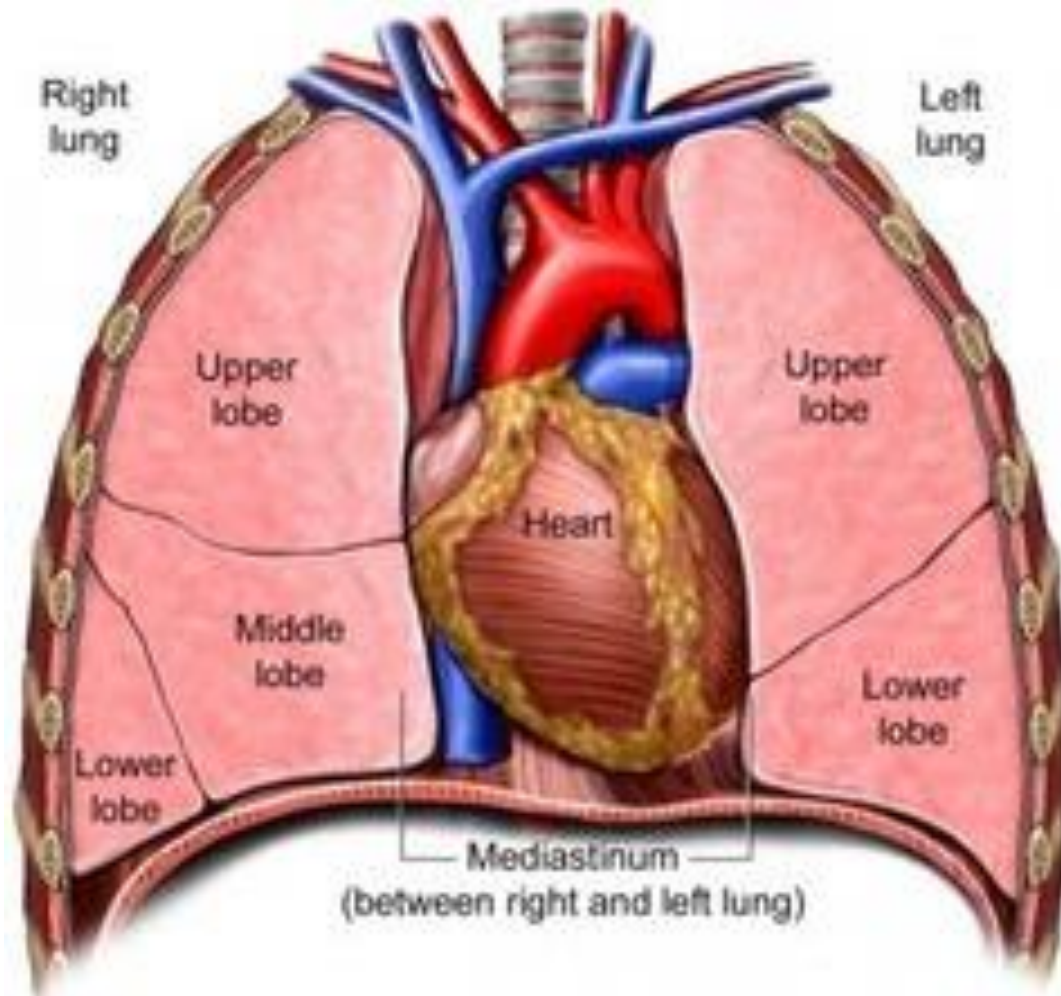
BACK VIEW

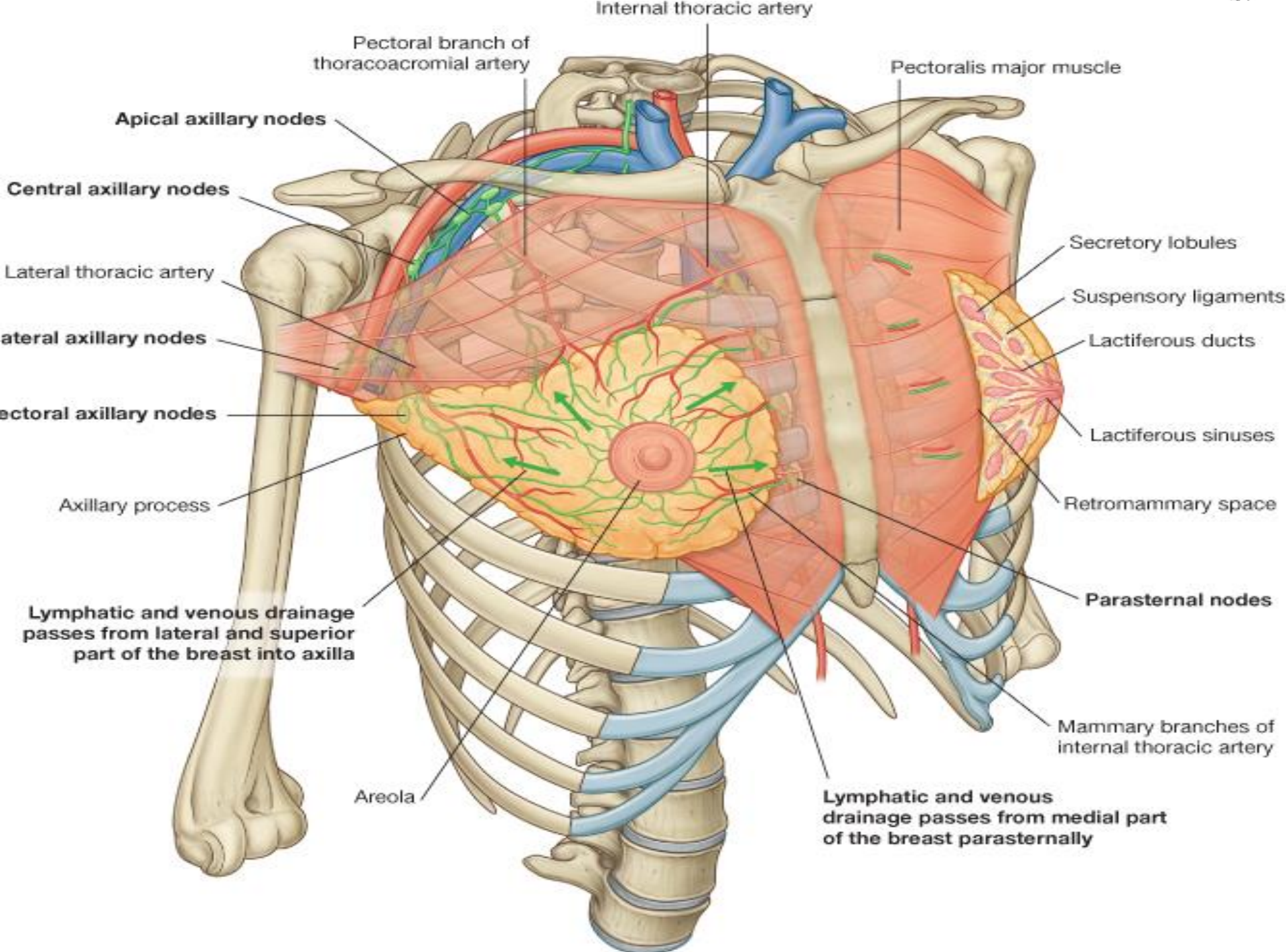


## 1.4. CONTENTS OF THE THORAX



*Organs of the cardiovascular, respiratory, digestive, reproductive, immune, and nervous systems*





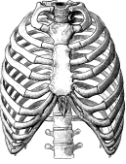


## 2.1. FUNCTIONS OF THE THORACIC WALL

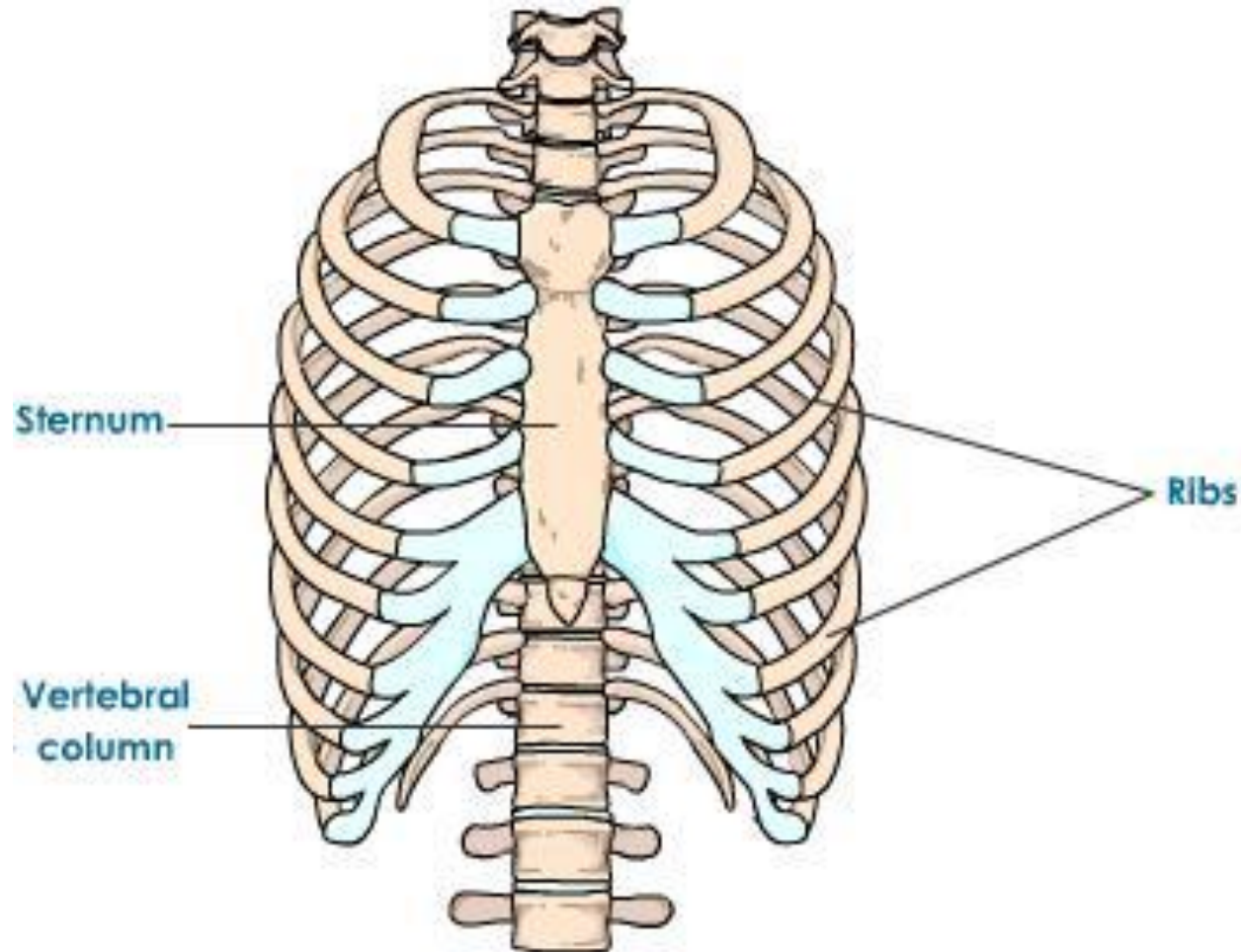
- 1) **Protects** vital thoracic and abdominal organs
- 2) **Resists** the negative (sub-atmospheric) internal pressures generated by the elastic recoil of the lungs and inspiratory movements.
- 3) **Provides attachment** for and support the weight of the upper limbs.
- 4) **Provides the origins** of many of the muscles that move and maintain the position of the upper limbs relative to the trunk.
- 5) **Provides attachments** for muscles of the abdomen, neck, back, and respiration.



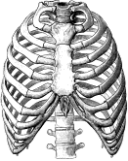
### 3. SKELETON OF THE THORACIC WALL



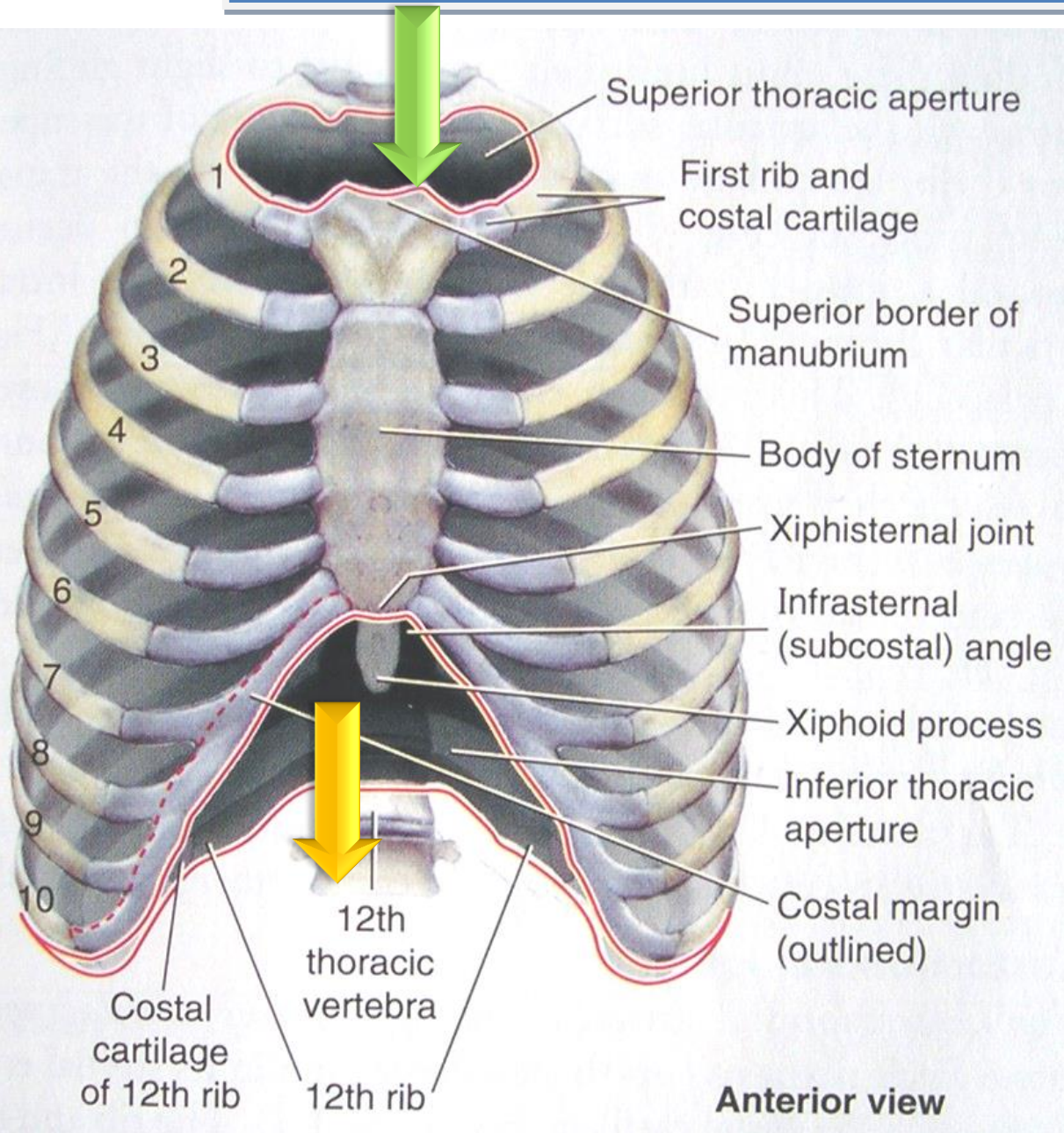
- 1) 12 pairs of ribs and associated costal cartilages
- 2) 12 thoracic vertebrae and the intervertebral (IV) discs interposed between them
- 3) Sternum



# 4. THORACIC APERTURES



‘Thoracic inlet’



‘Thoracic outlet’



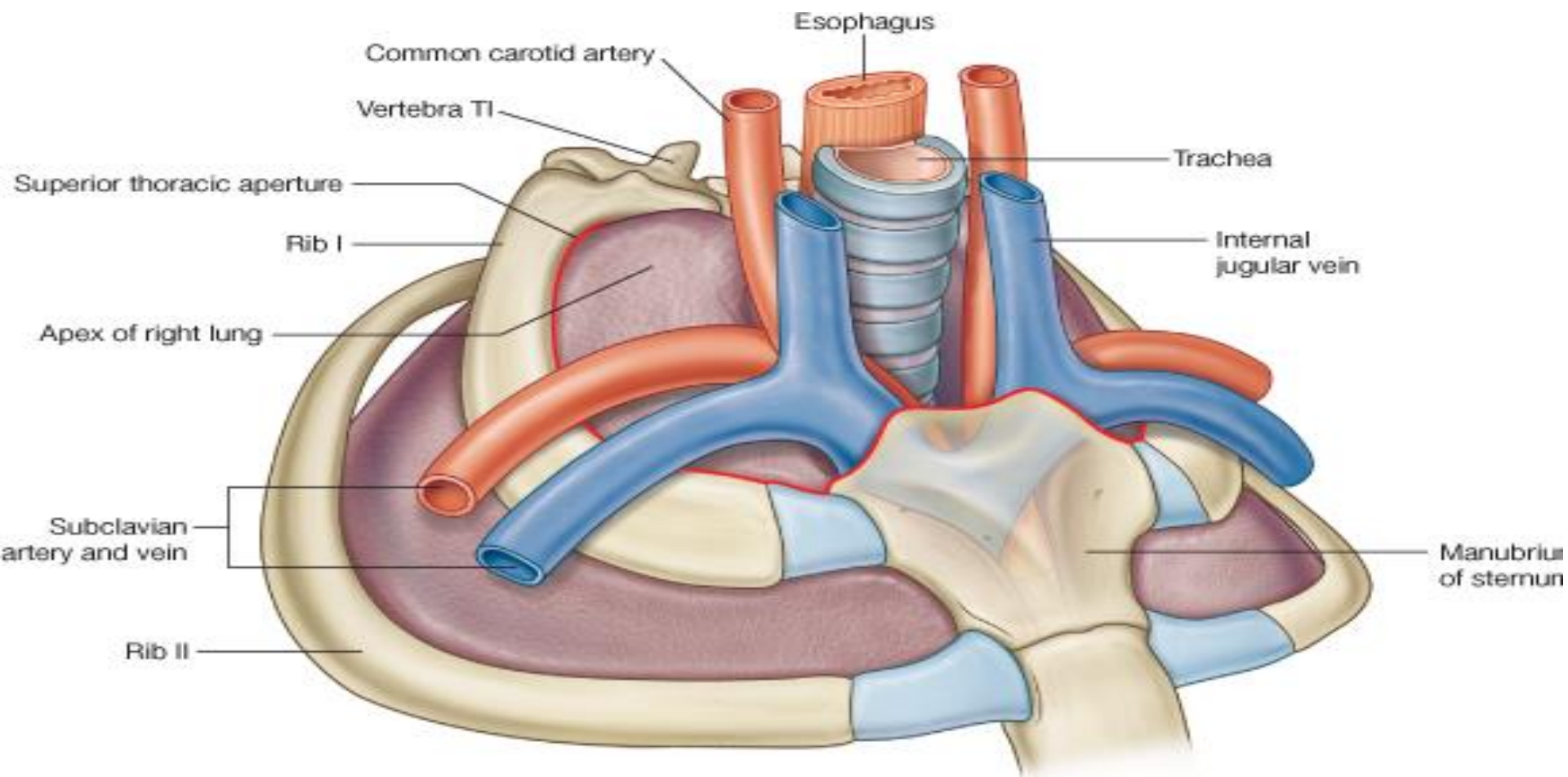
## 4.1. Superior thoracic aperture

"doorway" between the thoracic cavity and the neck and upper limb  
bounded:

**Posteriorly** vertebra T1

**Laterally** 1st pair of ribs and their costal cartilages

**Anteriorly** superior border of the manubrium





## 4.2. Inferior thoracic aperture



By closing the inferior thoracic aperture, the diaphragm separates the thoracic and abdominal cavities almost completely.

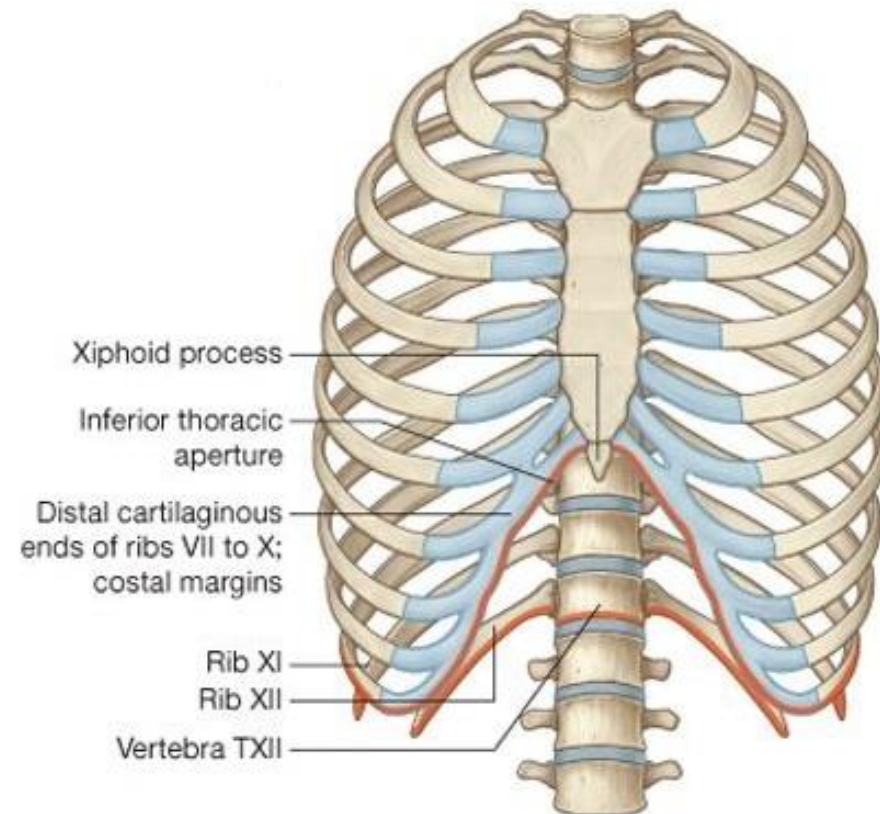
bounded:

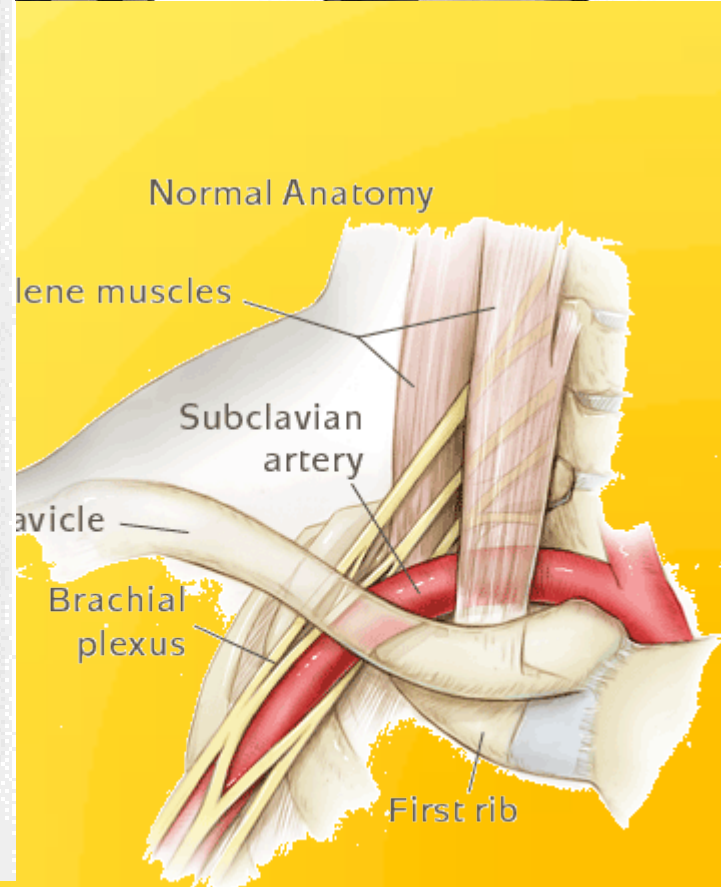
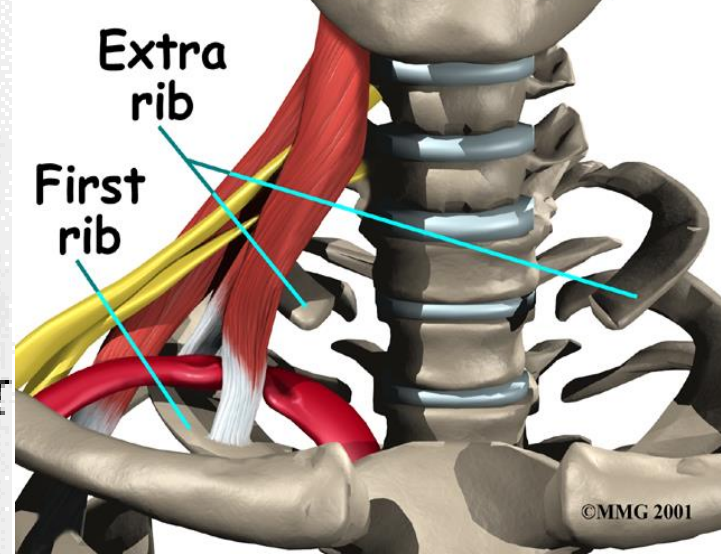
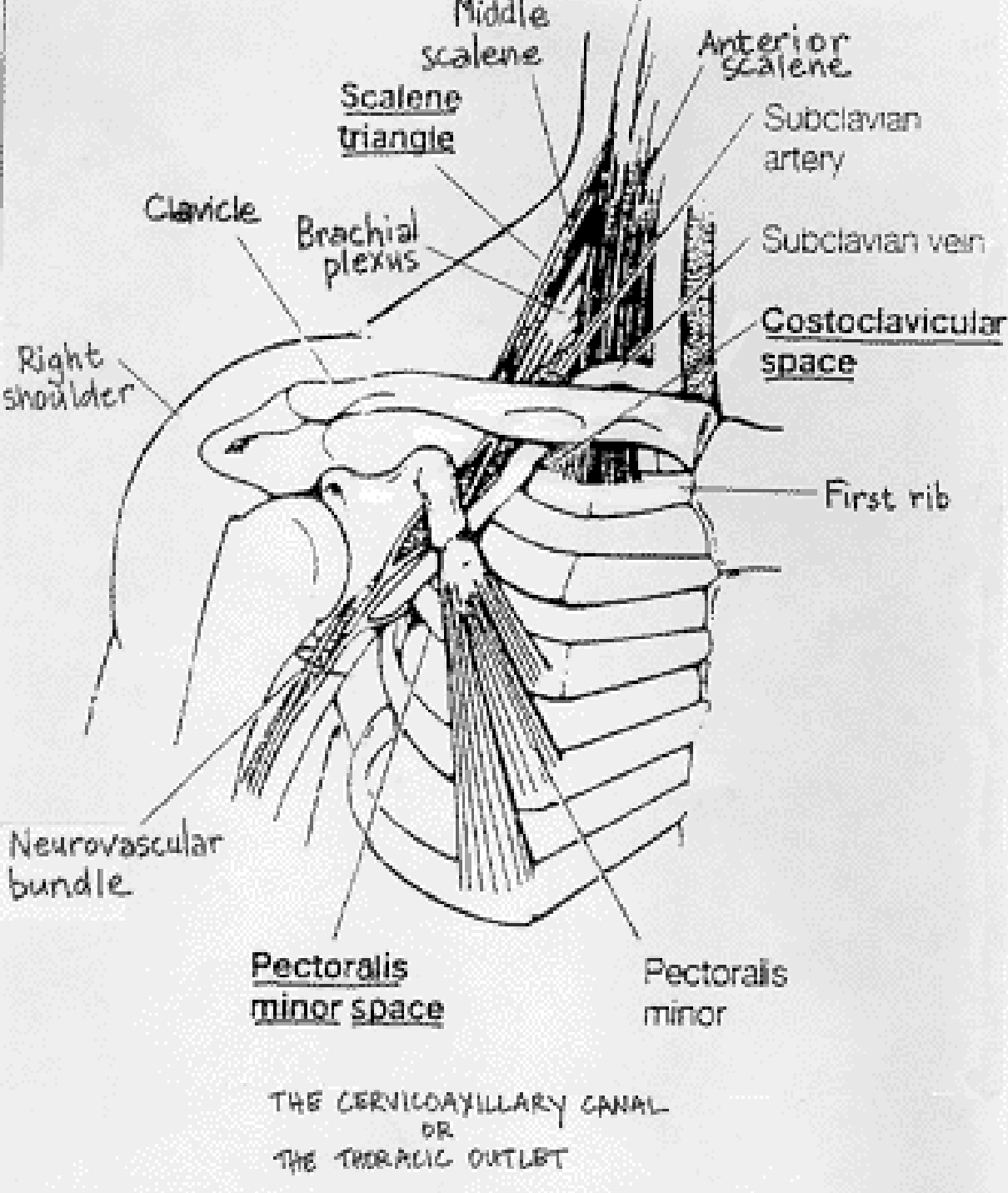
**Posteriorly** 12th thoracic vertebra

**Posterolaterally** 11th and 12th pairs of ribs

**Anterolaterally** joined costal cartilages of ribs 7-10 **costal margins**

**Anteriorly** xiphisternal joint





# 5. JOINTS OF THE THORACIC WALL



## 1. Costovertebral joints

between tubercle of a rib & transverse process of its own vertebra

## 2. Sternocostal joint

between the sternum and costal cartilages

## 3. Costochondralis joint

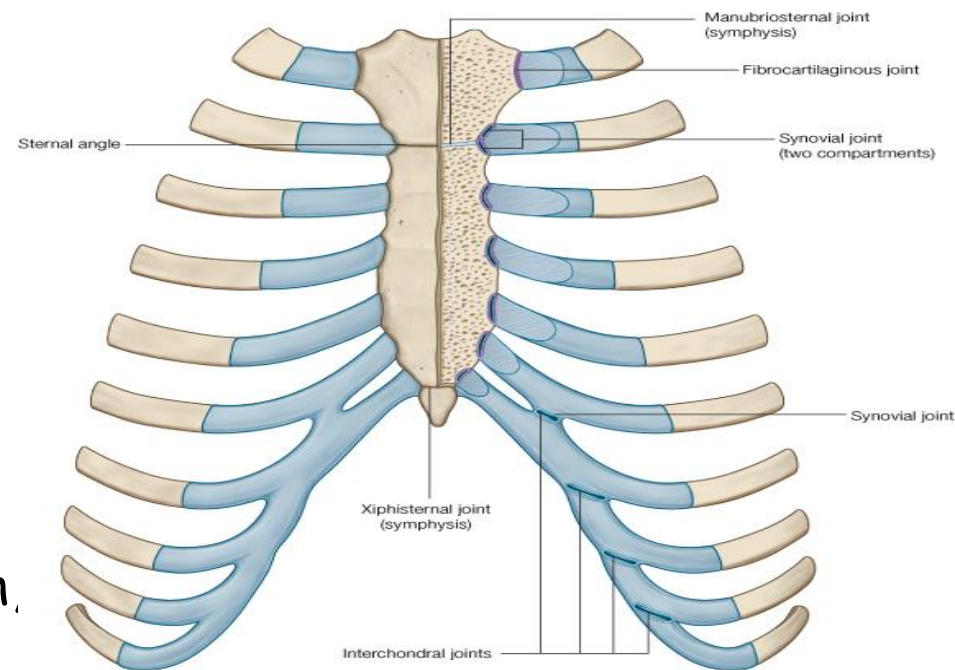
between the rib and costal cartilage

## 4. Intercondral joints

Synovial joints between the costal cartilages of 6th and 7th, 7th and 8th, & 8th and 9th ribs.

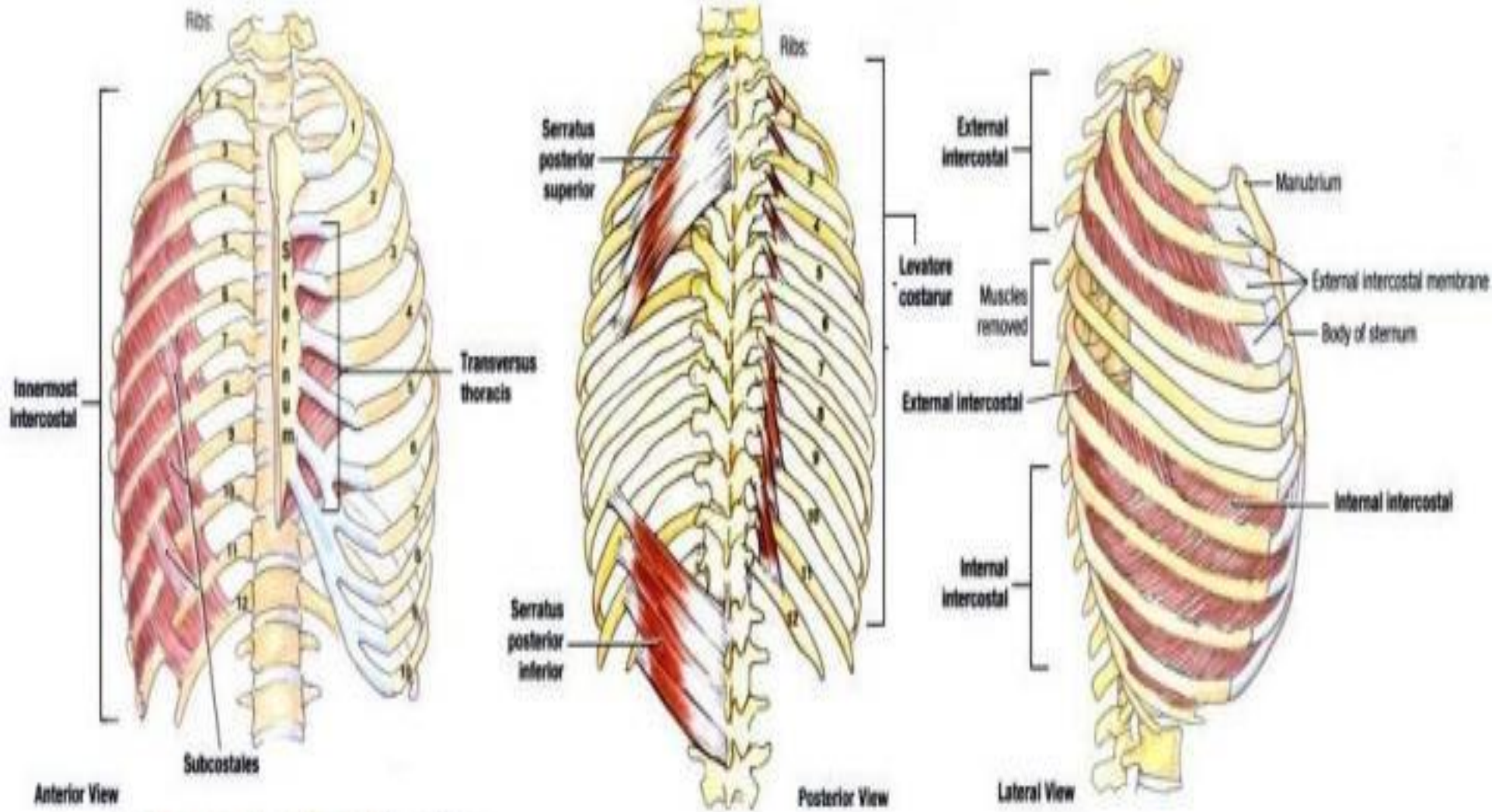
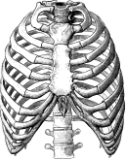
## 5. Sternal Joints

between the manubrium, body, xiphoid process of the sternum.





# 6. MUSCLES OF THE THORACIC WALL



Serratus posterior

Intercostal muscles(External, internal and innermost)

Subcostal

Levator costarum

Transverse thoracic

# 6. MUSCLES OF THE THORACIC WALL



## intercostal muscles

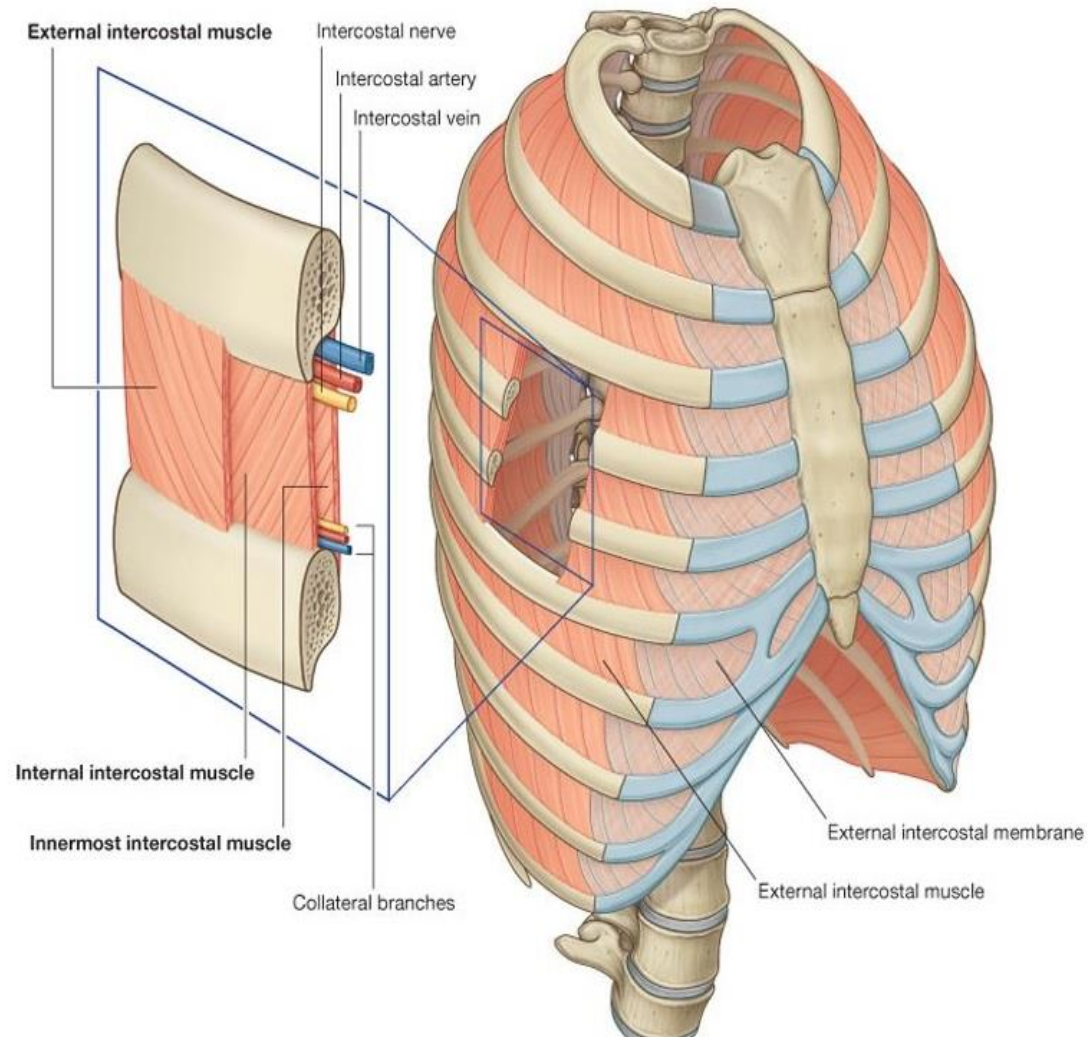
three flat muscles found in each intercostal space

### external intercostal muscles

most superficial

### internal intercostal muscles

between external &  
innermost muscles



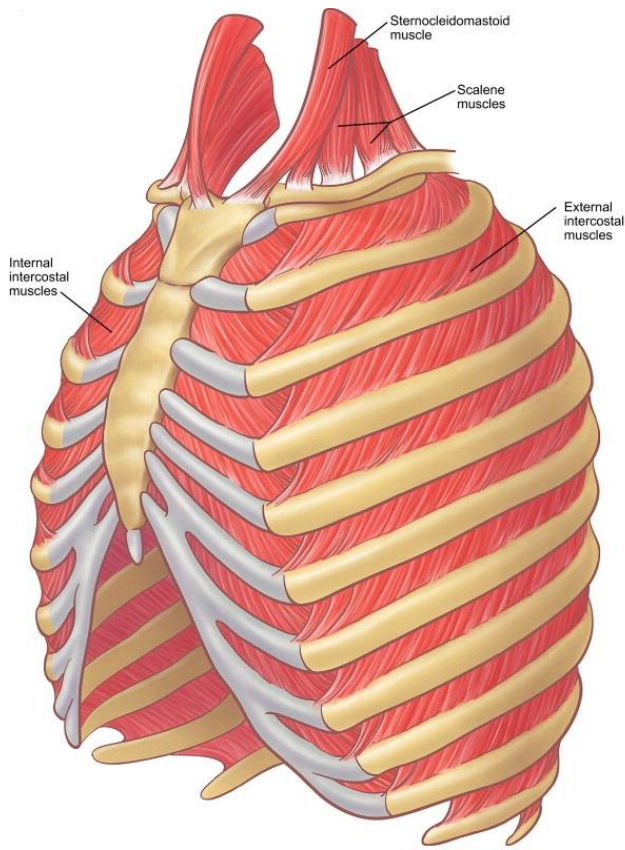
# 6. MUSCLES OF THE THORACIC WALL



## external intercostal muscles

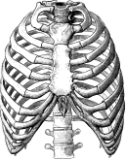
extend from the inferior margins of the ribs above  
to the superior margins of the ribs below

*pass obliquely anteroinferiorly*





# 6. MUSCLES OF THE THORACIC WALL



## internal intercostal muscles

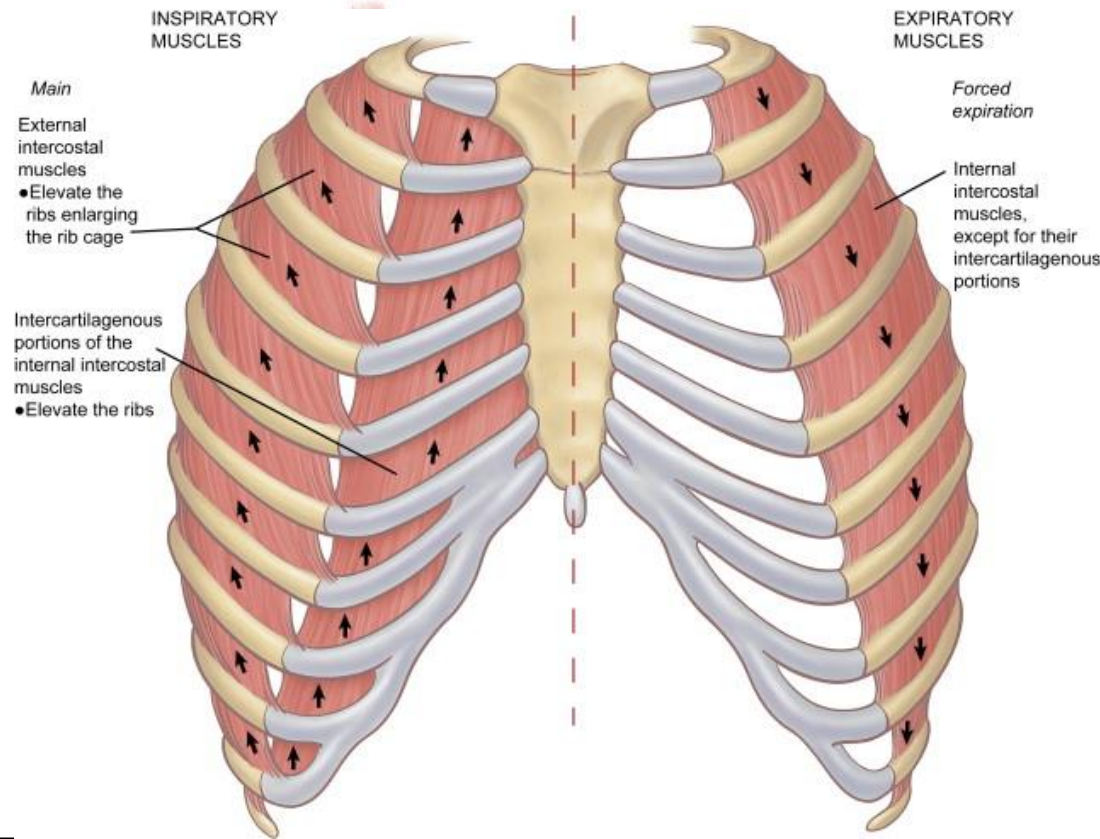
most active during expiration

between most inferior lateral edge of costal grooves of the ribs above,  
to the superior margins of ribs below

in the opposite direction to  
those of the external  
intercostal muscles

obliquely posteroinferiorly

Attachment to interosseus  
parts move down  
during expiration!



# 6. MUSCLES OF THE THORACIC WALL

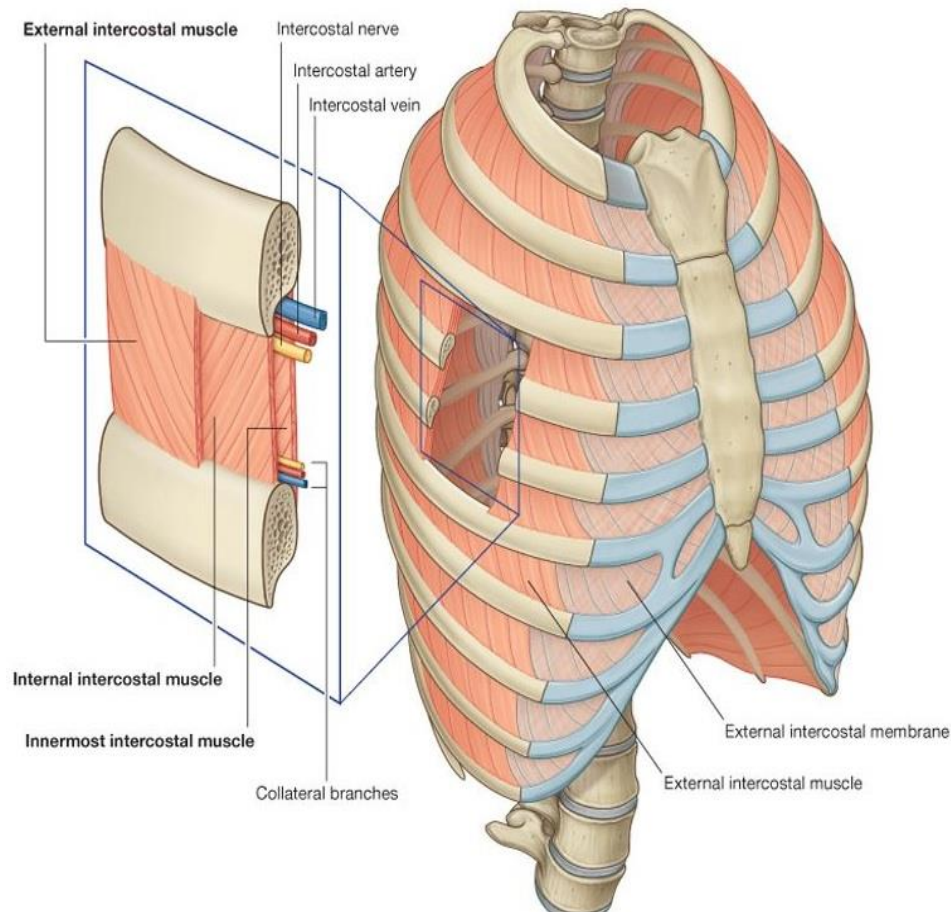


## innermost intercostal muscles

least distinct of the intercostal muscles

same orientation as the **internal intercostals**

neurovascular bundles (V.A.N.) in the costal grooves in a plane between innermost & internal intercostal muscles.



# 6. MUSCLES OF THE THORACIC WALL



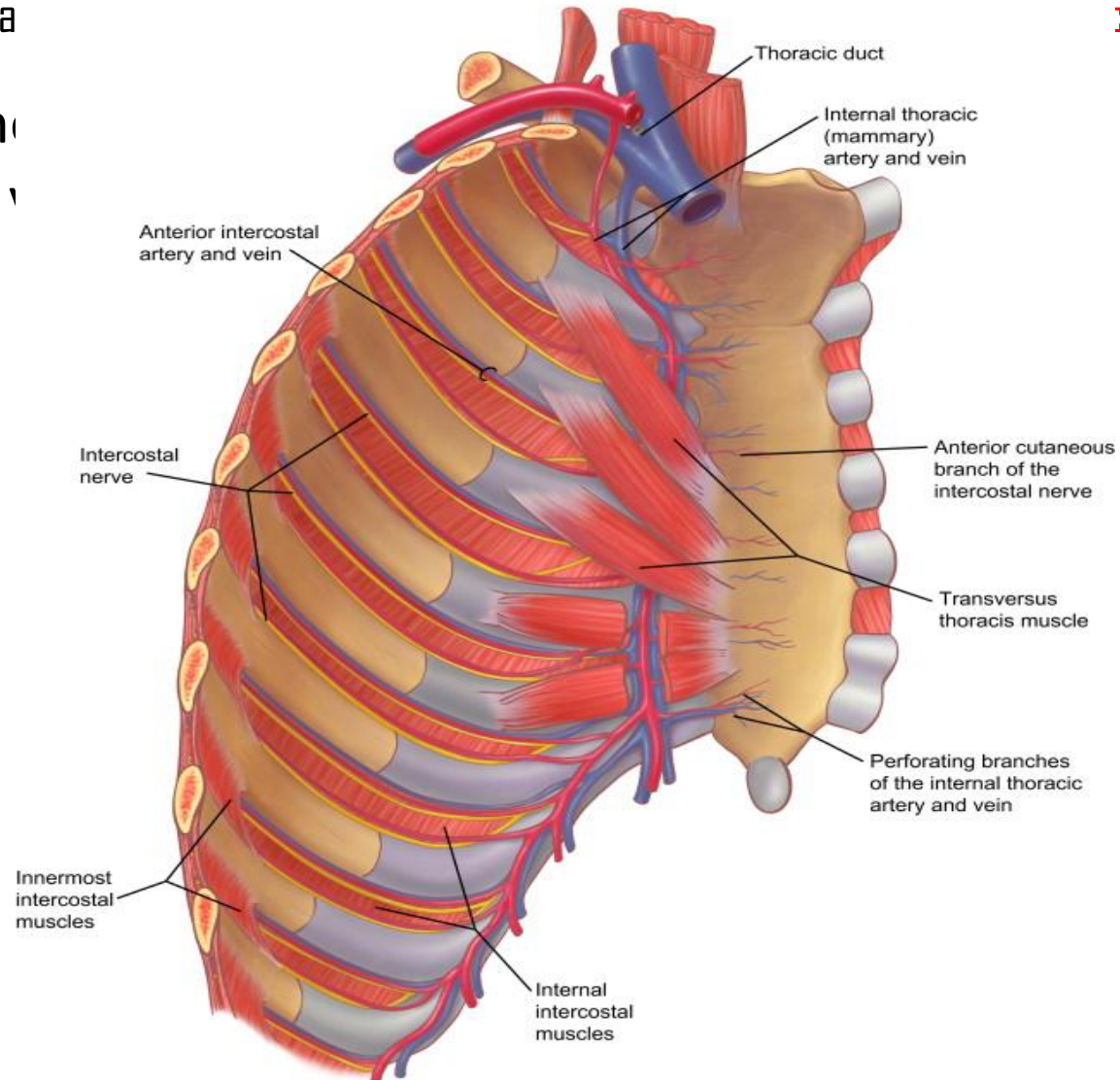
## transversus thoracis muscles

POSTERIOR VIEW

costals

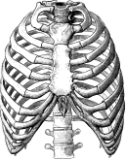
on the deep surface

- lie deep to the
- secure these





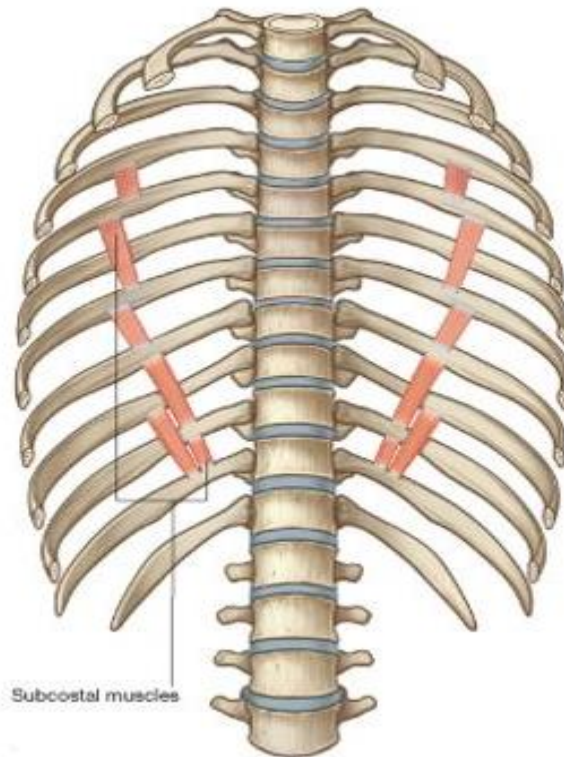
# 6. MUSCLES OF THE THORACIC WALL



## subcostales

@ same plane as **innermost intercostals**

- Fibers parallel the course of the internal intercostal muscles.
- Extend from the angle of the ribs to more medial positions on the ribs below.



## 6.1. Accessory muscles of respiration



- ❖ upper accessory muscles assist with inspiration.
- ❖ upper chest, and abdominal muscles assist with expiration.

# 7. MOVEMENTS OF THE THORACIC WALL

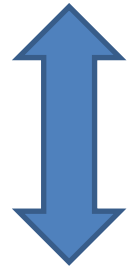


One of the principal functions of the thoracic wall and the diaphragm is to alter the volume of the thorax and thereby move air in and out of the lungs.

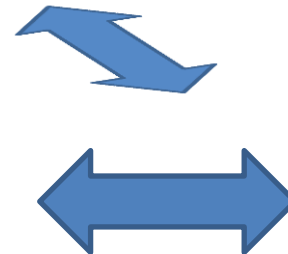
During breathing, the dimensions of the thorax change in vertical, lateral, and A-P directions.

Diaphragm contracts → Depression

Diaphragm relaxes → Elevation (during passive expiration)

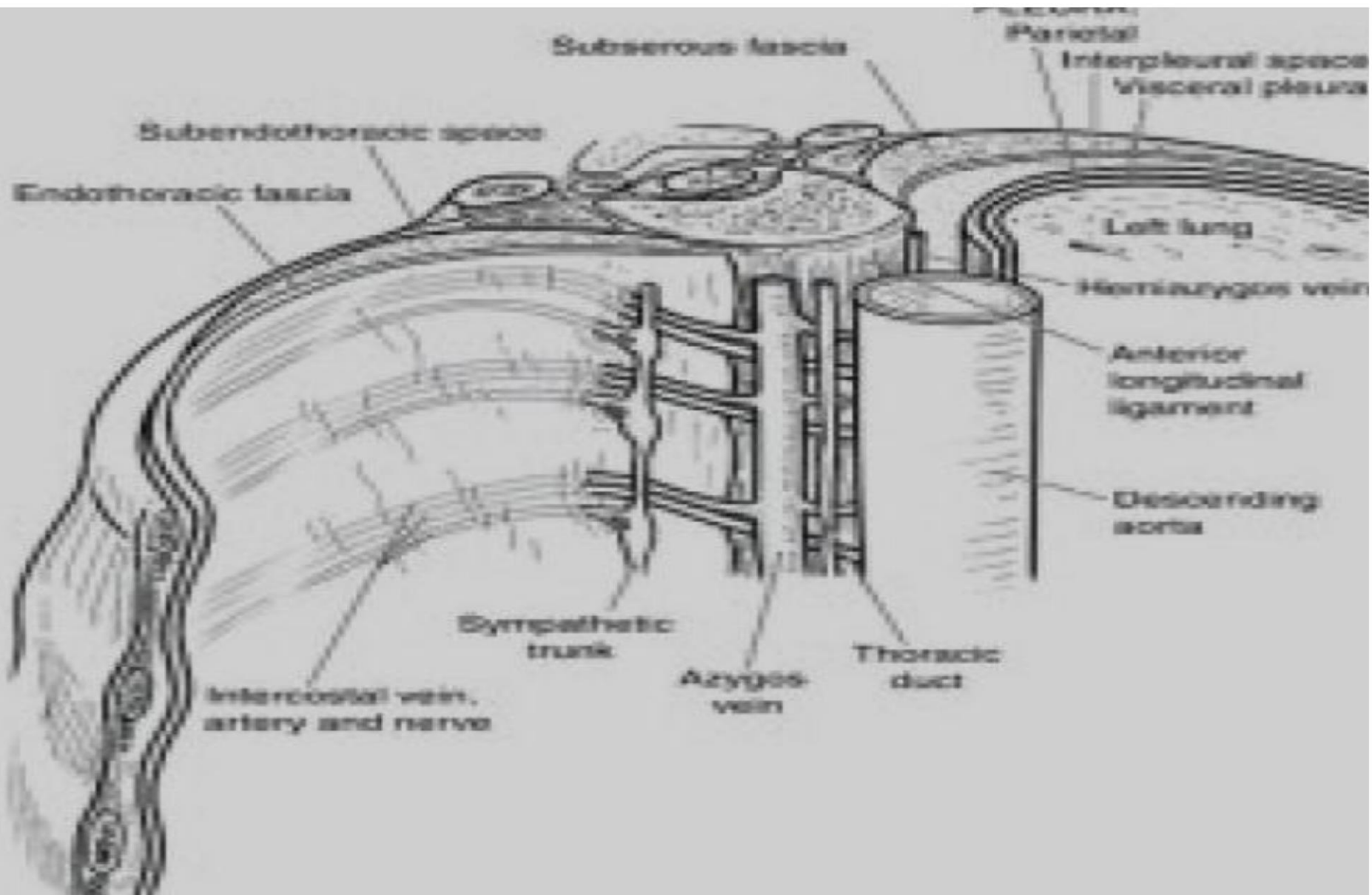


Elevation & depression of the ribs





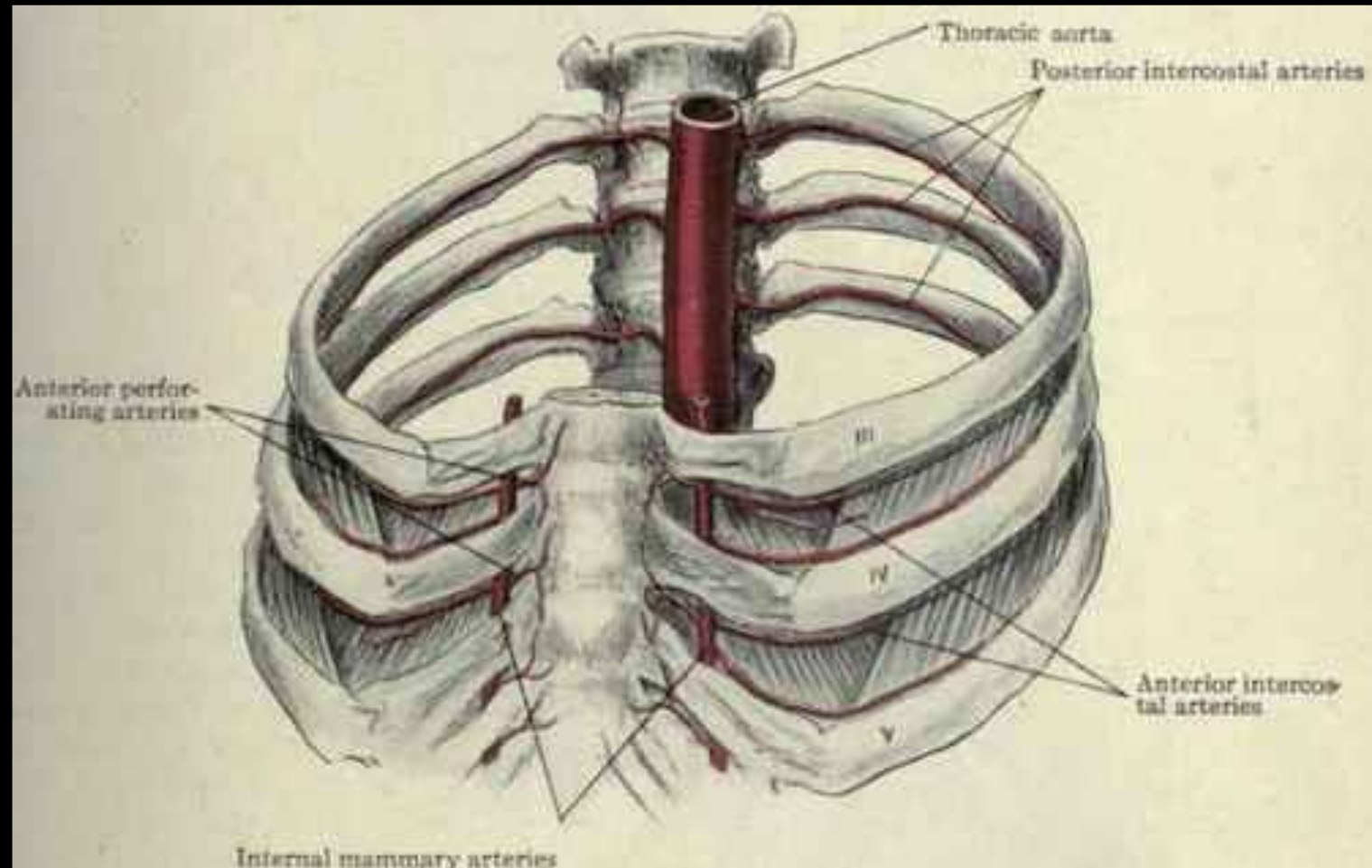
# 8. FASCIAE OF THE THORACIC WALL



# 9. VASCULATURE OF THE THORACIC WALL



Mainly **posterior and anterior intercostal arteries**



## 9.1. ARTERIES OF THE THORACIC WALL



Arterial supply to the thoracic wall derives from

### Thoracic aorta

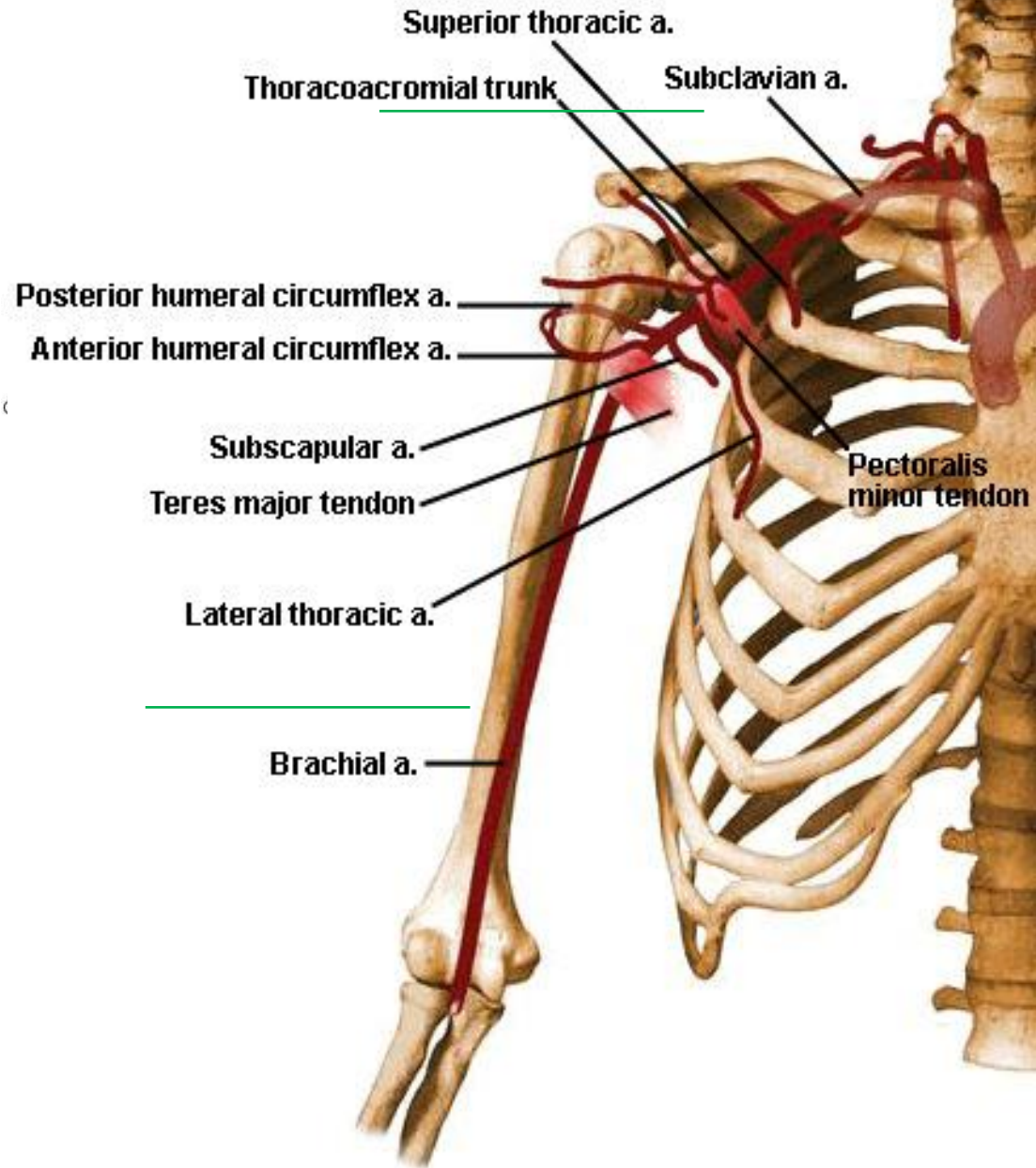
[posterior intercostal & subcostal arteries]

### Subclavian artery

[internal thoracic & supreme intercostal arteries]

### Axillary artery

[superior & lateral thoracic arteries]







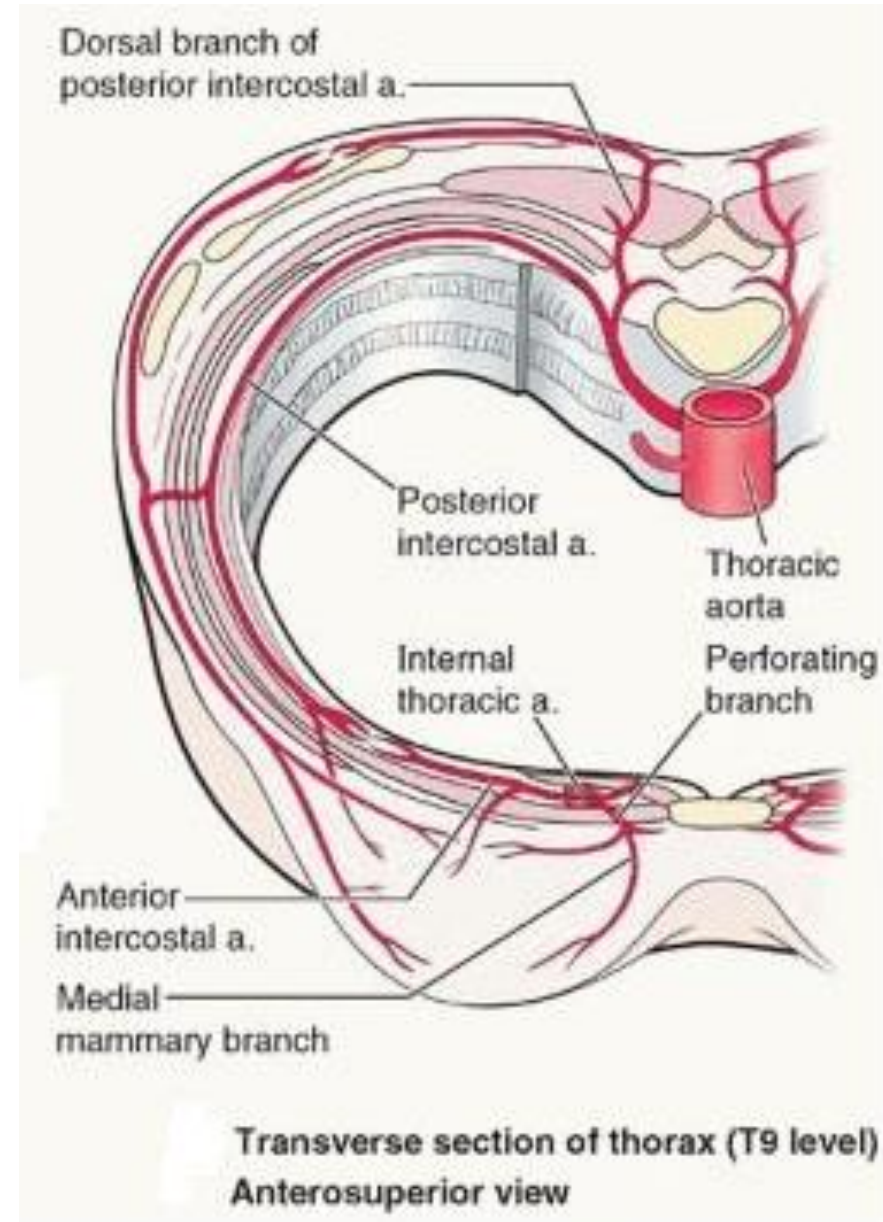
# intercostal arteries

course through the thoracic wall between the ribs.

Each intercostal space is supplied by

- a large posterior intercostal artery
- small pair of anterior intercostal arteries

*Exception last two intercostal spaces*



## Anterior intercostal arteries (paired)

*directly or indirectly from internal thoracic artery*

1st-6th (from internal thoracic artery)

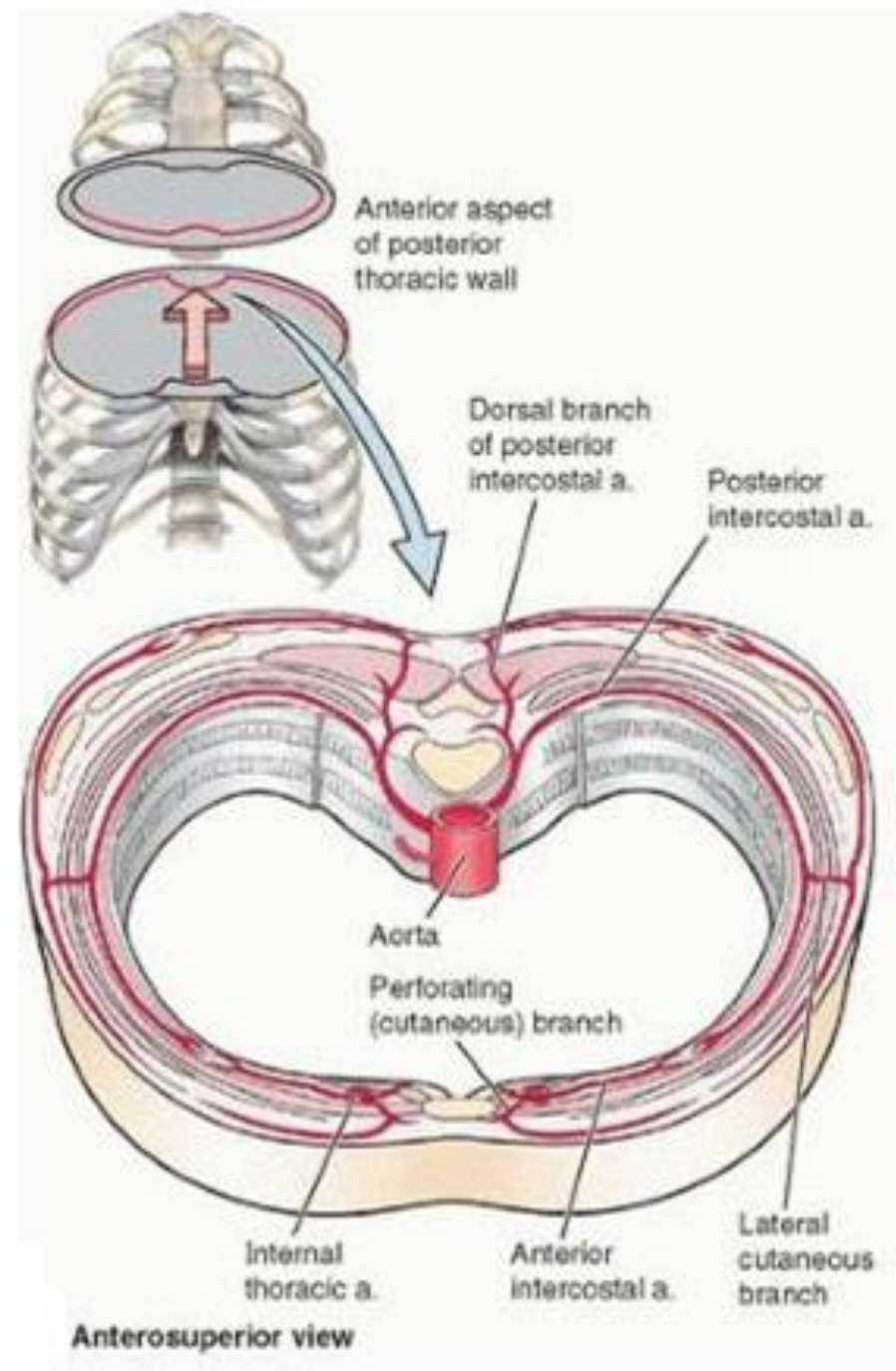
7th-9th (from musculophrenic-branch of internal thoracic)

## Posterior intercostal arteries (large, unpaired)

1st-2nd (from supreme intercostal artery- branch of costocervical trunk)

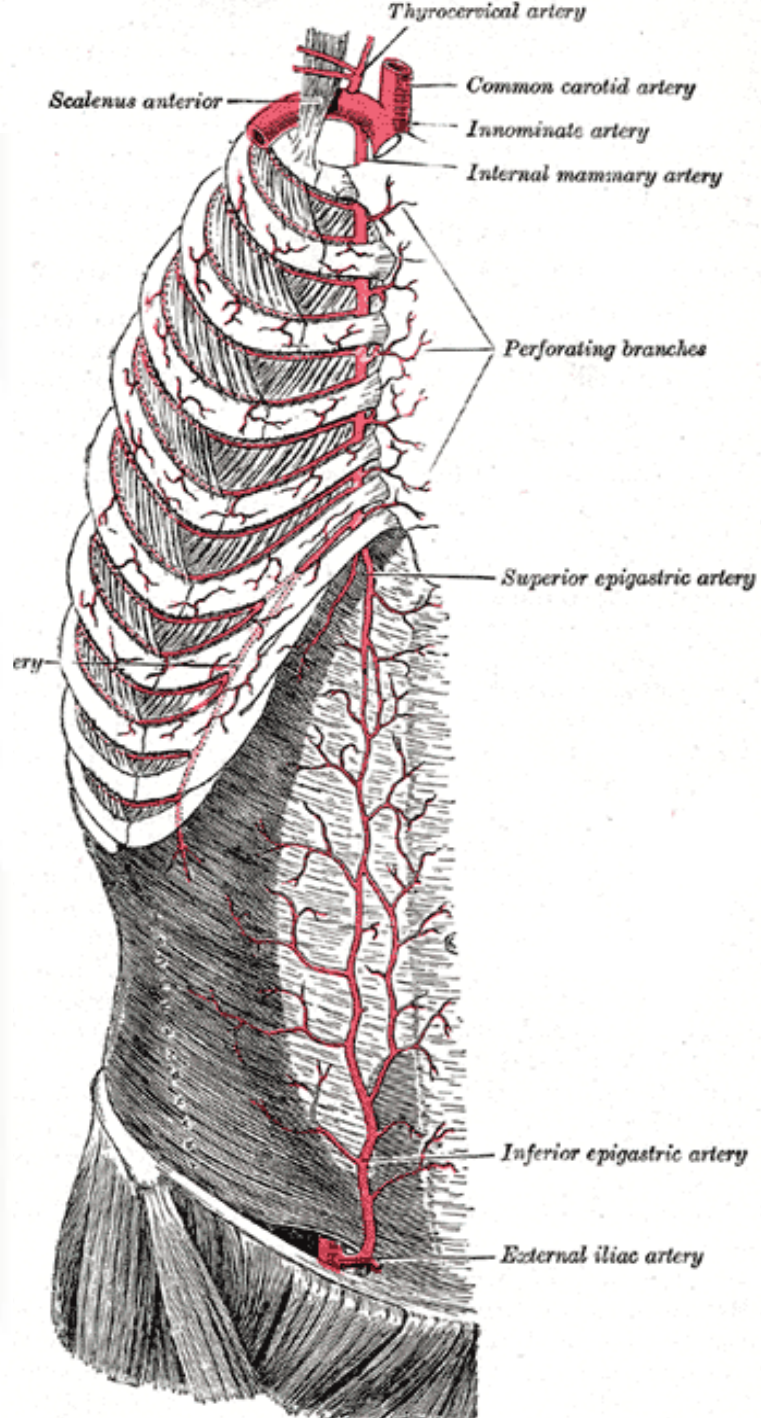
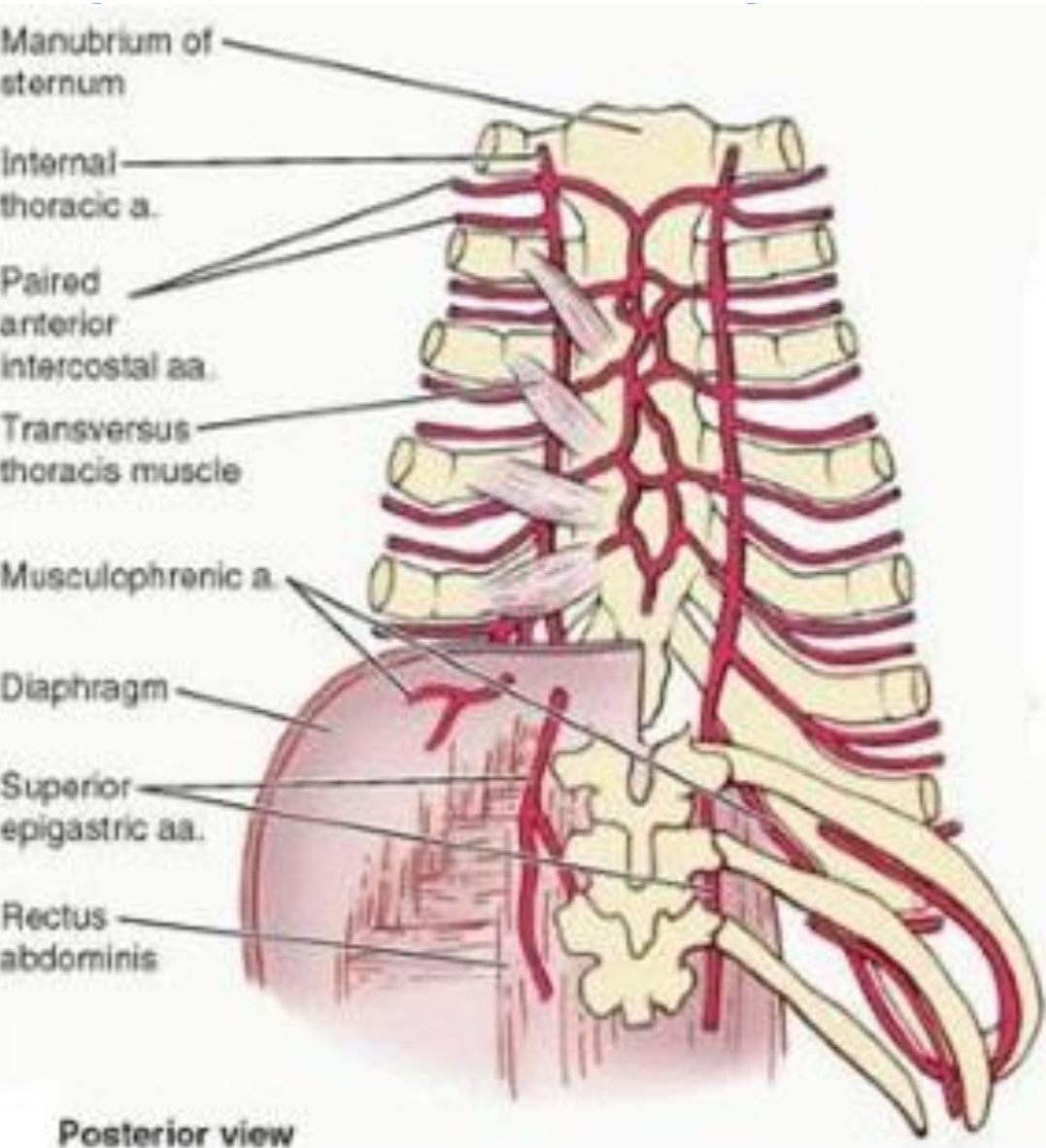
3rd-11th (from thoracic aorta)

Subcostal artery (from thoracic aorta)





# internal thoracic artery





## 9.2. VEINS OF THE THORACIC WALL

Most posterior intercostal veins  
(4-11) end @

**azygos/hemiazygos  
venous system**

conveys venous blood to SVC.

1st posterior intercostal veins  
**right & left brachiocephalic veins**

2nd & 3rd (sometimes 4th)  
form **superior intercostal vein.**

**Right superior intercostal vein**

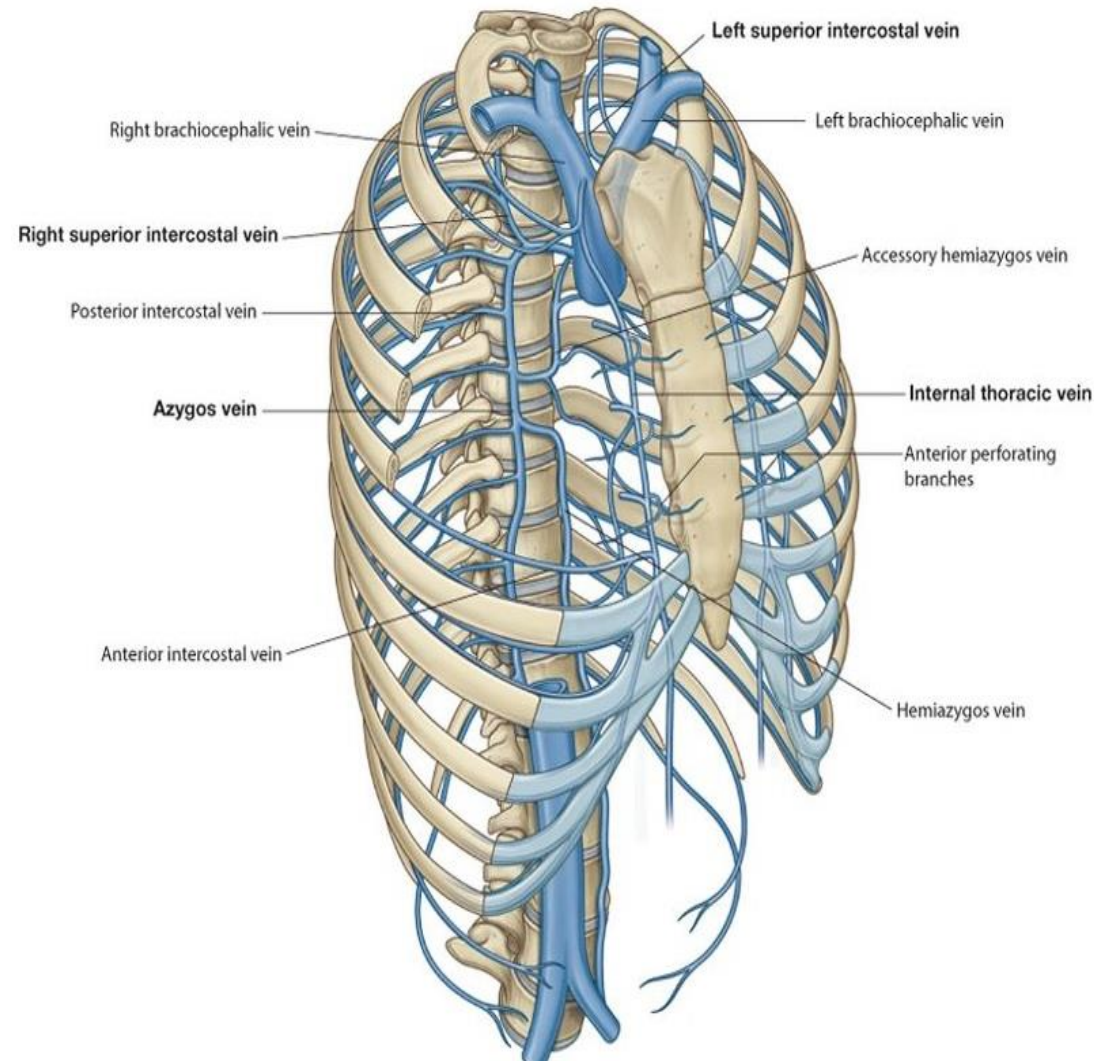
final tributary of azygos vein

**Left superior intercostal vein**

empties into left brachiocephalic vein.

Veins  
Artery  
Nerve

V.A.N.



# 10. NERVES OF THE THORACIC WALL

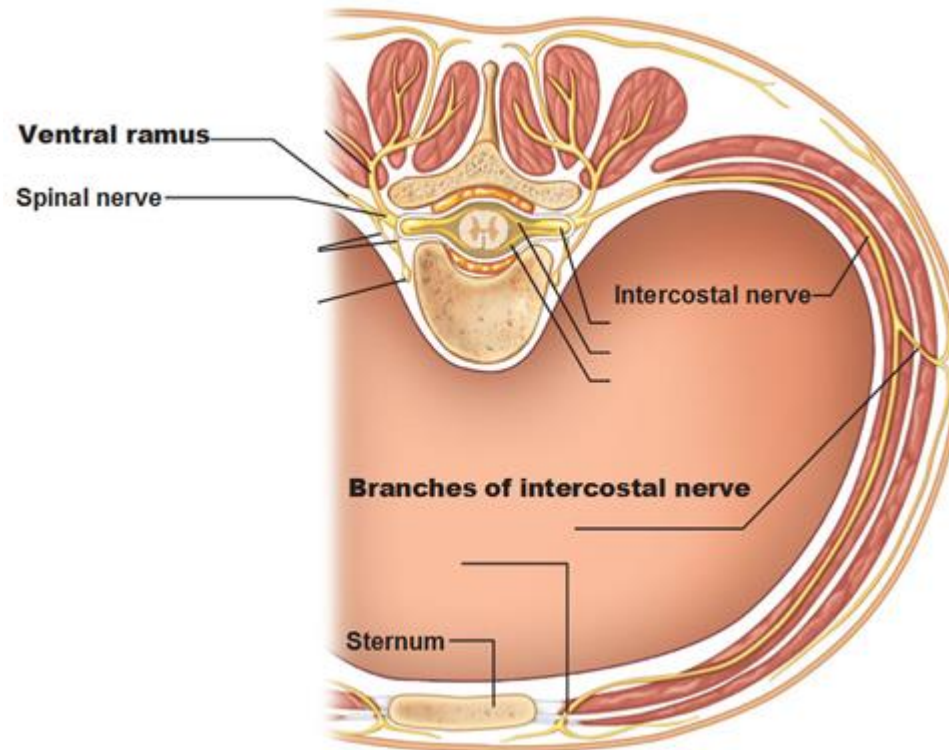


12 pairs of **intercostal nerves**

anterior rami of spinal nerves T1 to T11

lie in the intercostal spaces between adjacent ribs.

Anterior ramus of spinal nerve T12 (subcostal nerve) inferior to rib XII.

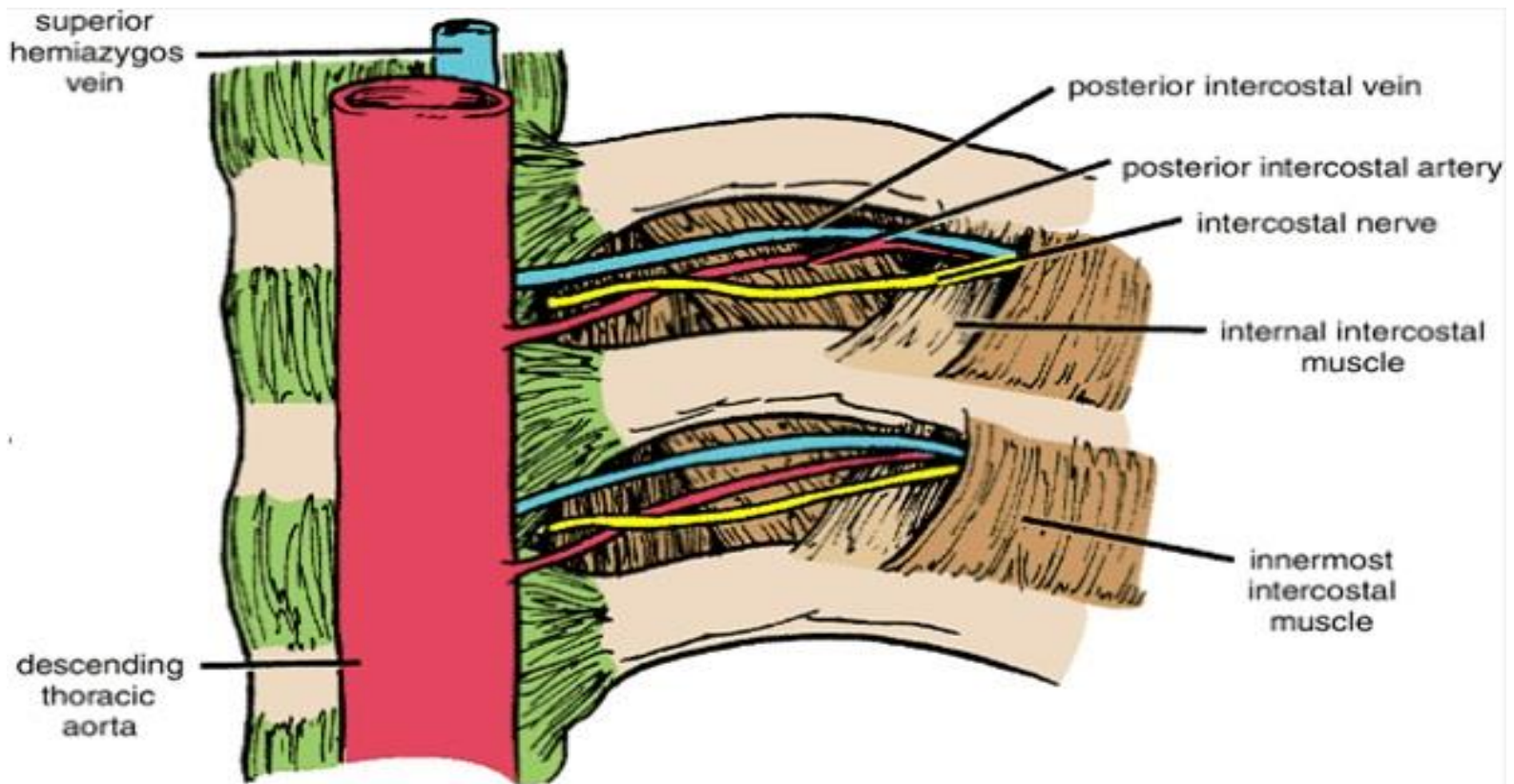




- Near the angles of the ribs, the nerves pass between internal intercostal & innermost intercostal muscles.

## V.A.N.

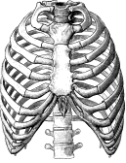
- Neurovascular bundles sheltered by the inferior margins of the overlying rib.





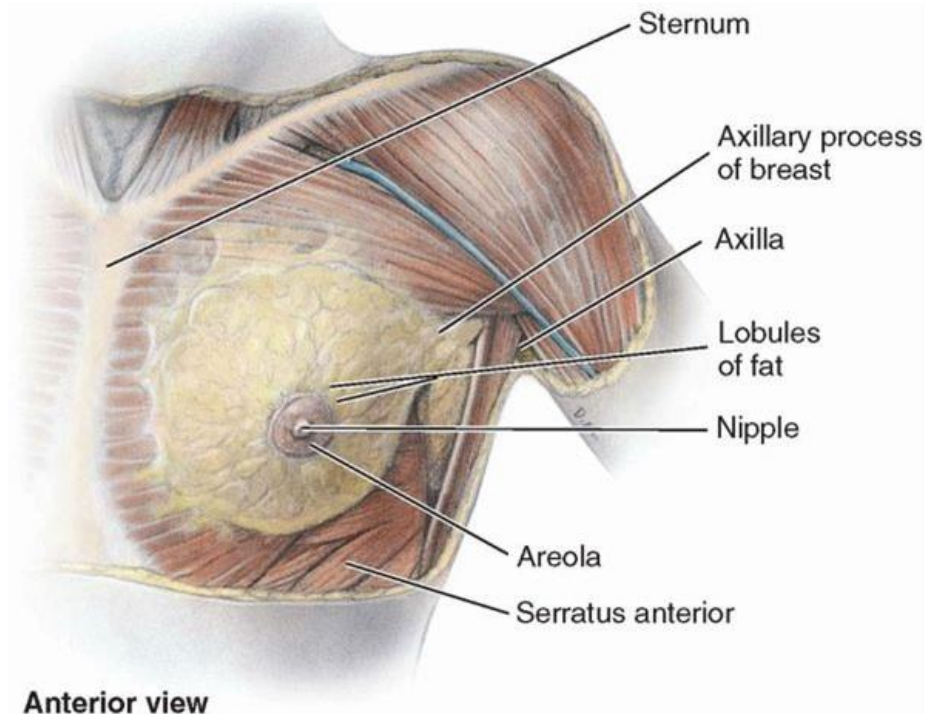
# 11. BREASTS

Reproduction, back pain  
Aesthetics, and breast cancer



**Mammary glands** & associated skin -connective tissues.

modified sweat glands in the superficial fascia anterior to the pectoral muscles and the anterior thoracic wall.



# 11. BREASTS

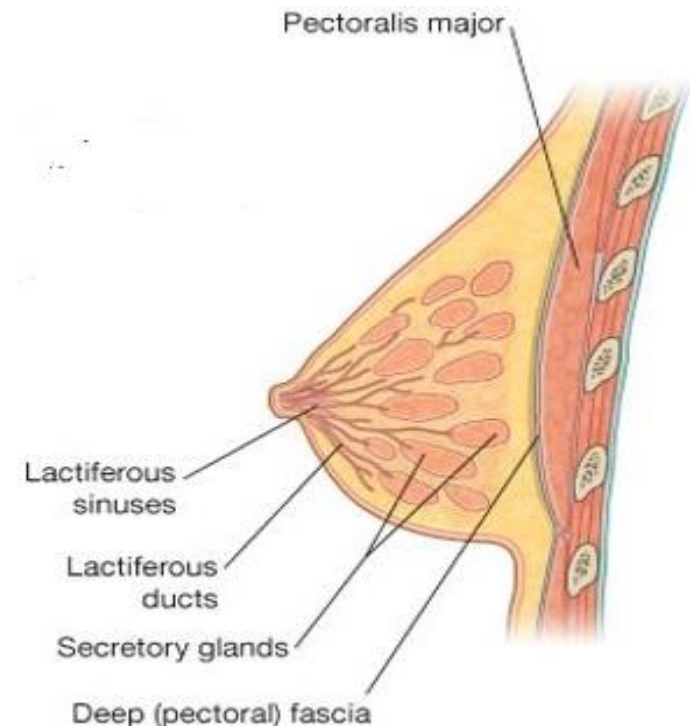


Mammary glands:

Series of ducts and associated secretory lobules.

Form 15 to 20 **lactiferous ducts** open → **nipple**.

Nipple is surrounded by a circular pigmented area of skin  
**areola** (L. small area).




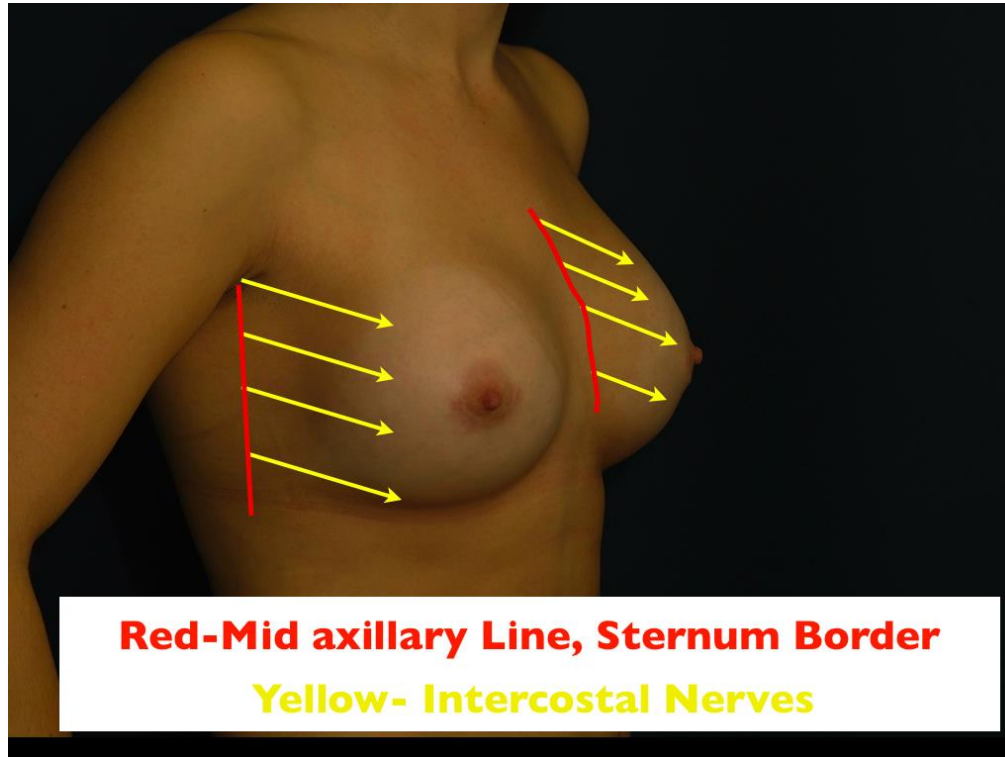


## 11.1. FEMALE BREASTS

**NON-LACTING WOMEN** – PREDOMINANT COMPONENT: **FAT**

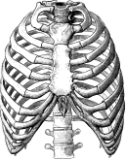
**LACTING WOMEN**- PREDOMINANT COMPONENT: **GLANDULAR TISSUE**

The breast rests on a bed  
extends transversely from  
lateral border of the sternum  mid-axillary line  
vertically from the 2nd through 6th ribs

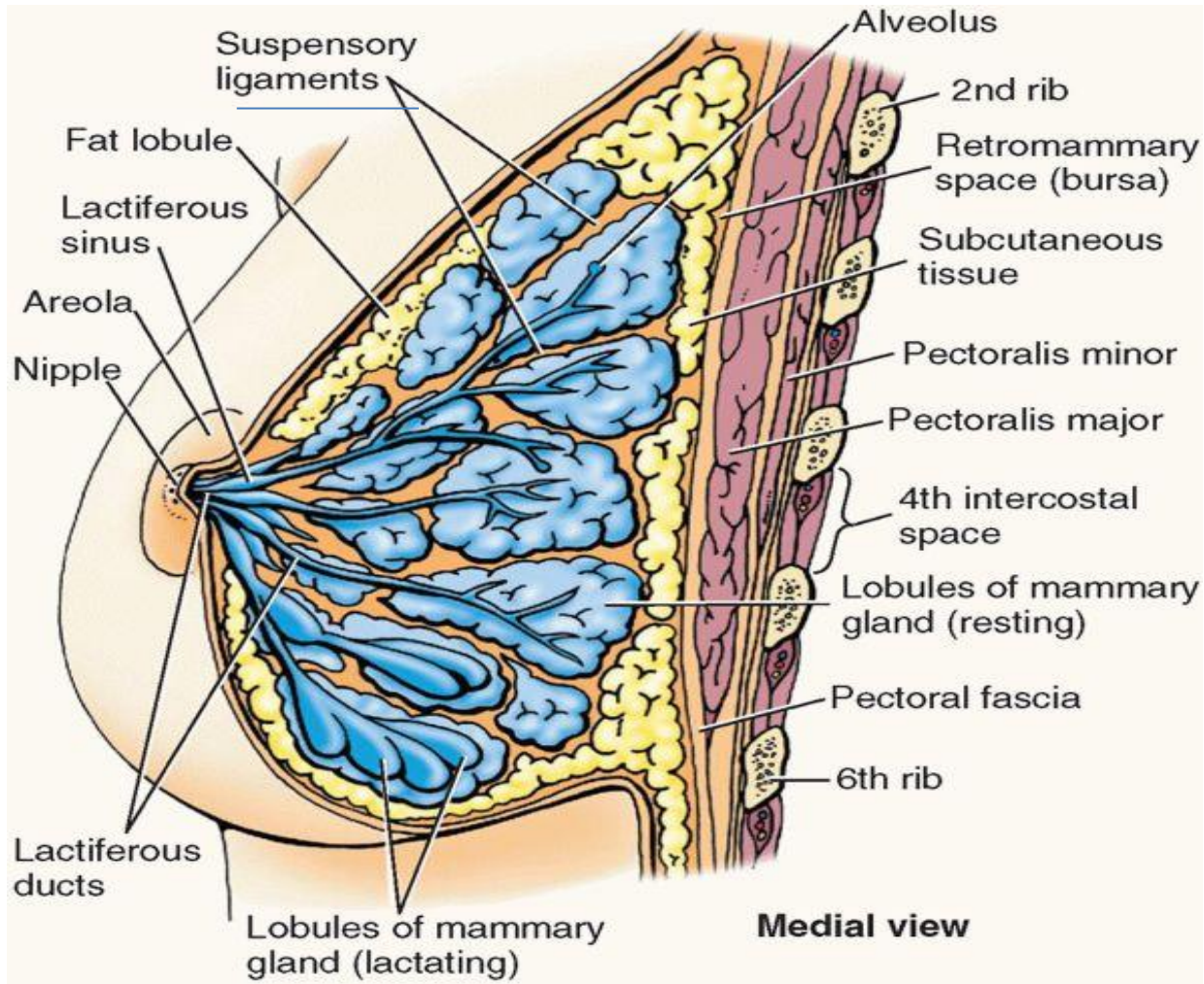




# suspensory ligaments (of Cooper)



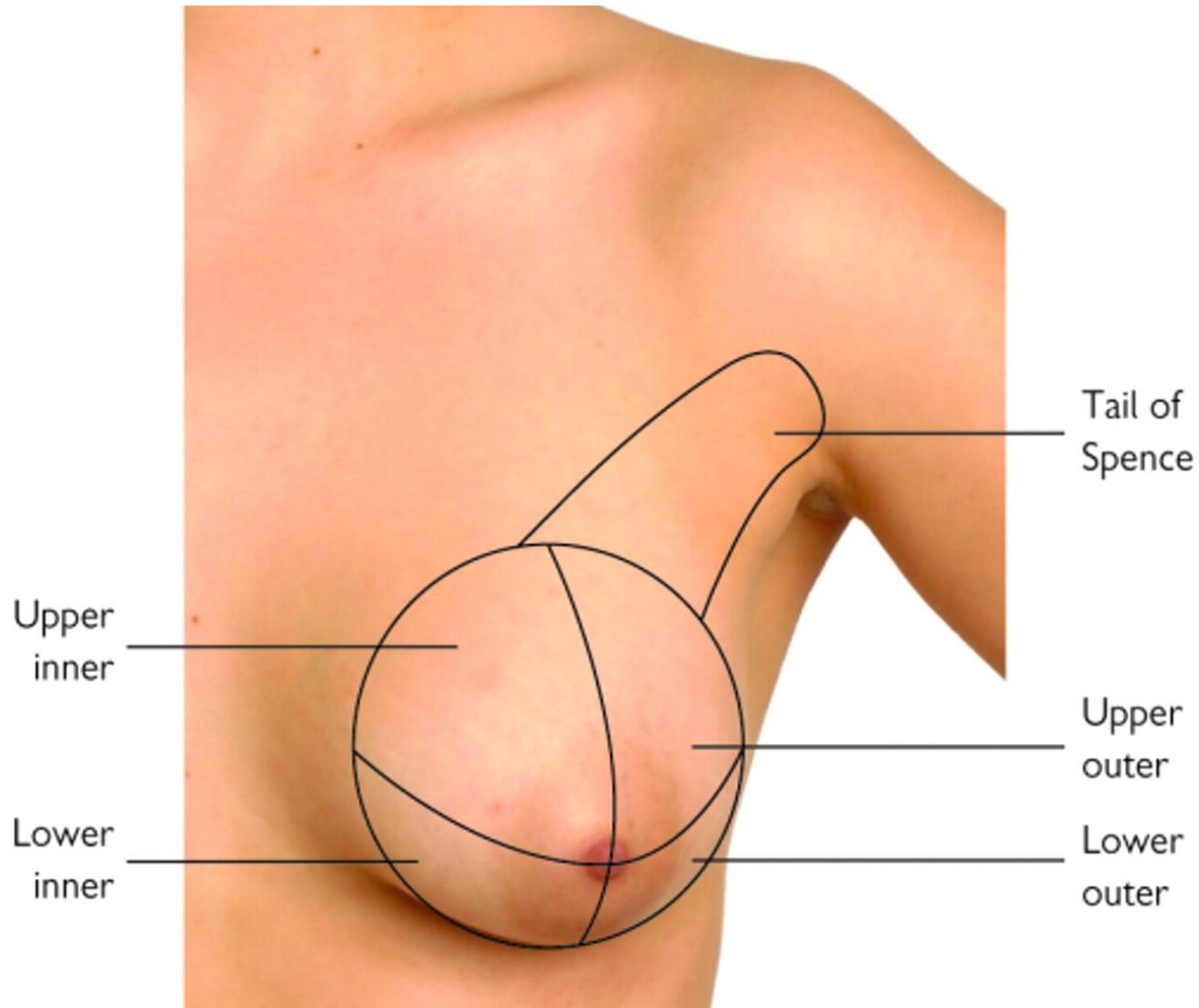
- substantial skin ligaments attaching mammary glands to dermis
- help support the lobes and lobules of the mammary gland.



# axillary process or tail (of Spence)



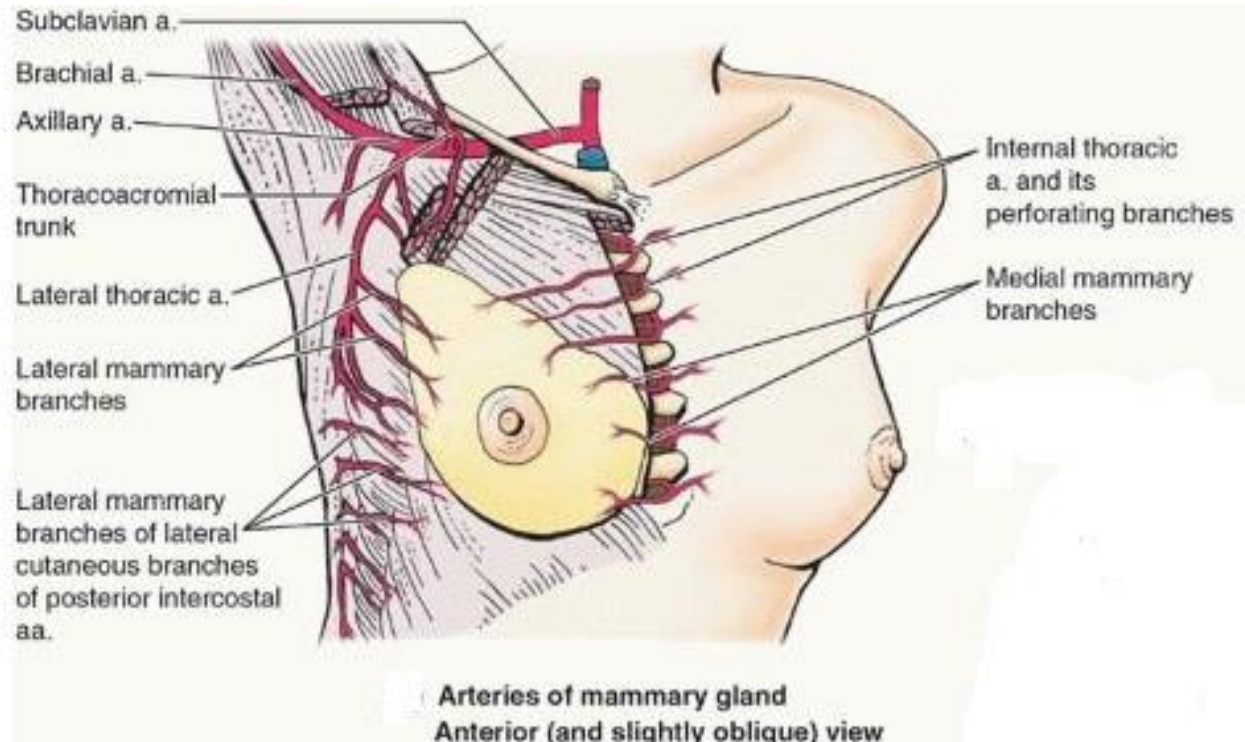
Confused with a lump (tumor) or enlarged lymph nodes.



# Arterial supply of the breast



- 1) Medial mammary branches (internal thoracic artery)
- 2) Lateral mammary branches (axillary artery)
- 3) Posterior intercostal arteries 2nd-4th (aorta)

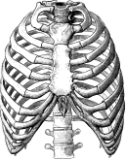


## Venous drainage of the breast

Mainly to axillary vein

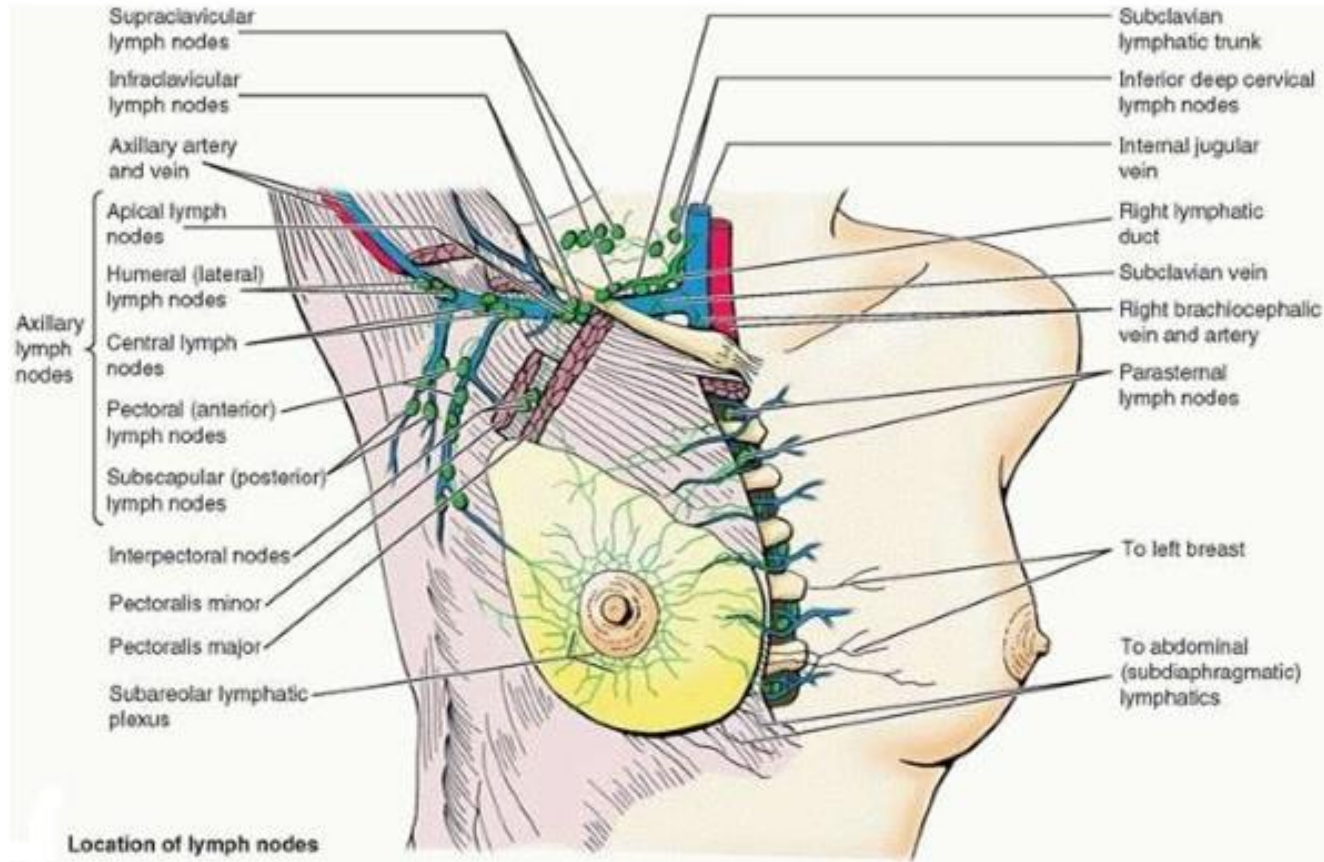


# Lymphatic drainage of the breast



75% (lateral breast quadrants)  
Axillary lymph nodes

Most of the remaining (medial breast quadrants) parasternal lymph nodes or to the opposite breast



Lymph from inferior quadrants may pass deeply to abdominal lymph nodes.

# Lymphatics in the axilla

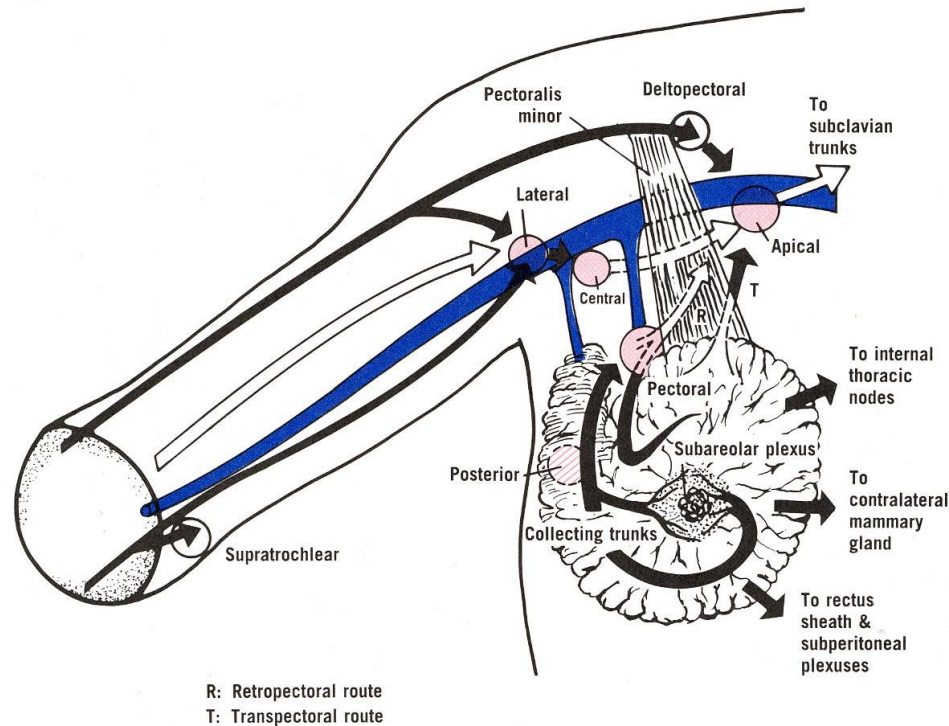
Drainage from

▲ Upper limb

▲ An extensive area on the adjacent trunk

Regions of the upper back & shoulder, lower neck, chest, upper anterolateral abdominal wall

▲ Drainage from ~ 75% of the mammary gland.



The 20-30 axillary nodes are divided into

5 groups - on the basis of location-

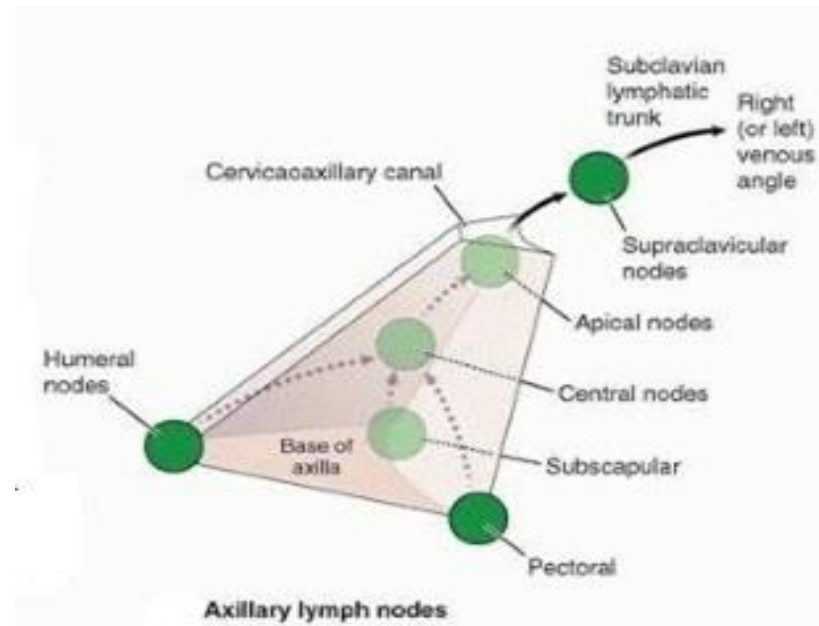
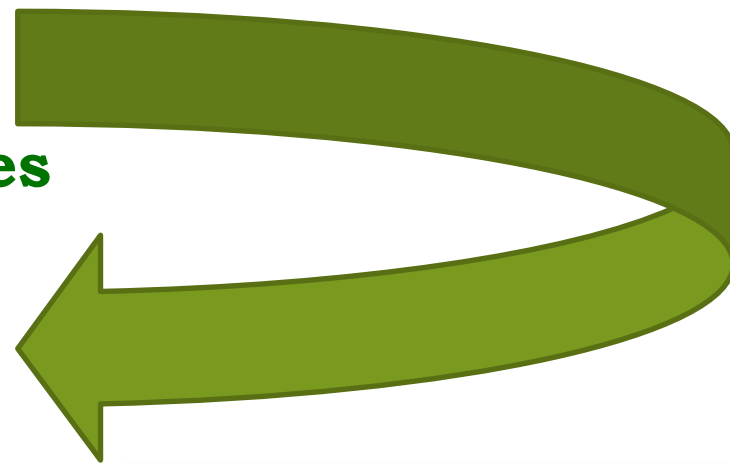
*The groups are arranged in a manner that reflects the pyramidal shape of the axilla.*

**Humeral (lateral) nodes**  
**Pectoral (anterior) nodes**  
**Subscapular (posterior) nodes**

**Central nodes**



**Apical nodes**





Supraclavicular lymph nodes

Infraclavicular lymph nodes

Axillary vein

Humeral (lateral) lymph nodes

Central lymph nodes

Axillary lymph nodes

Apical lymph nodes

Subscapular (posterior) lymph nodes

Pectoral (anterior) lymph nodes

Pectoralis minor

Interpectoral nodes

Pectoralis major

Subareolar lymphatic plexus

Subclavian lymphatic trunk

Deep cervical lymph nodes

Internal jugular vein

Right lymphatic duct

Subclavian vein

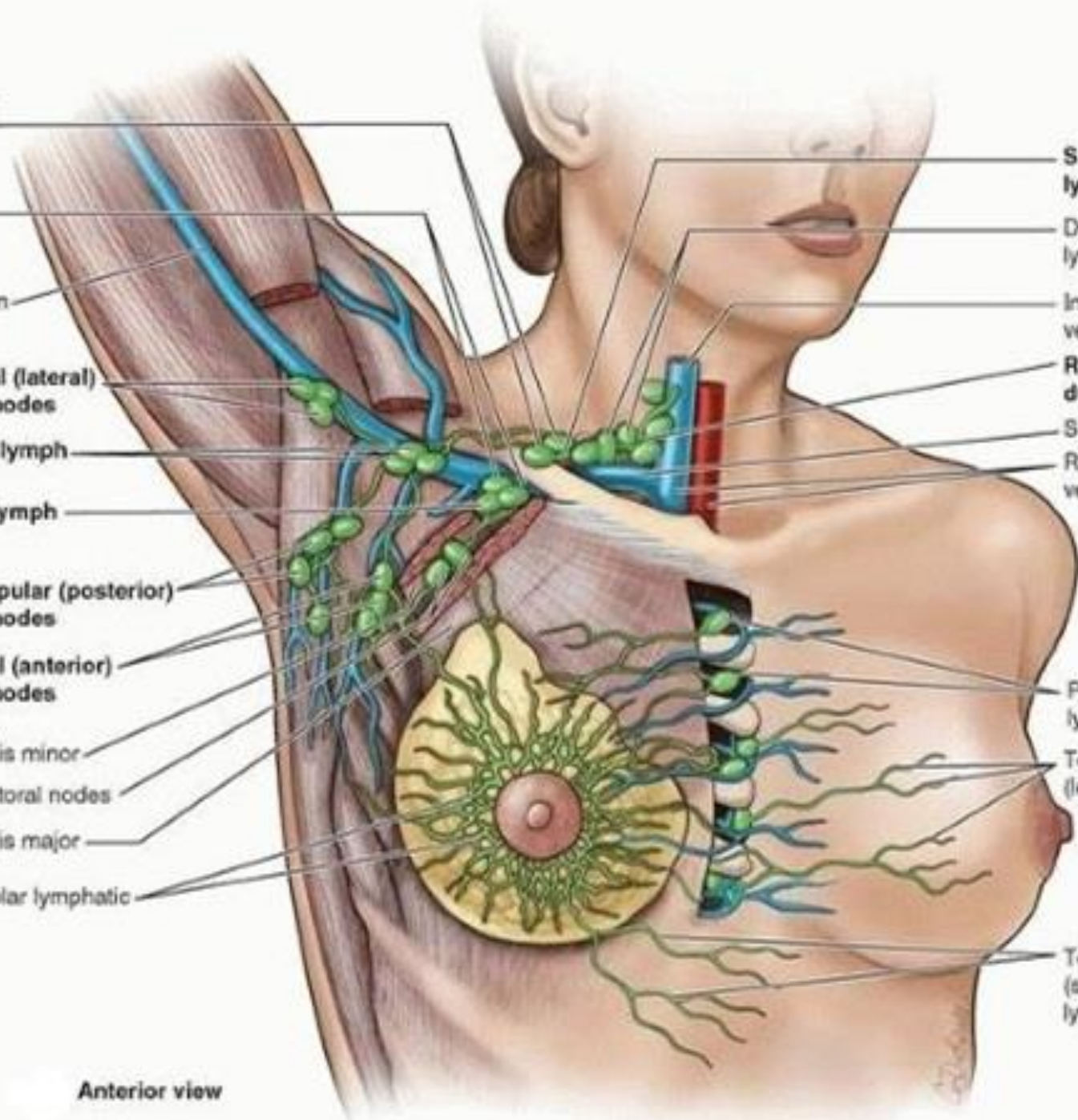
Right brachiocephalic vein and artery

Parasternal lymph nodes

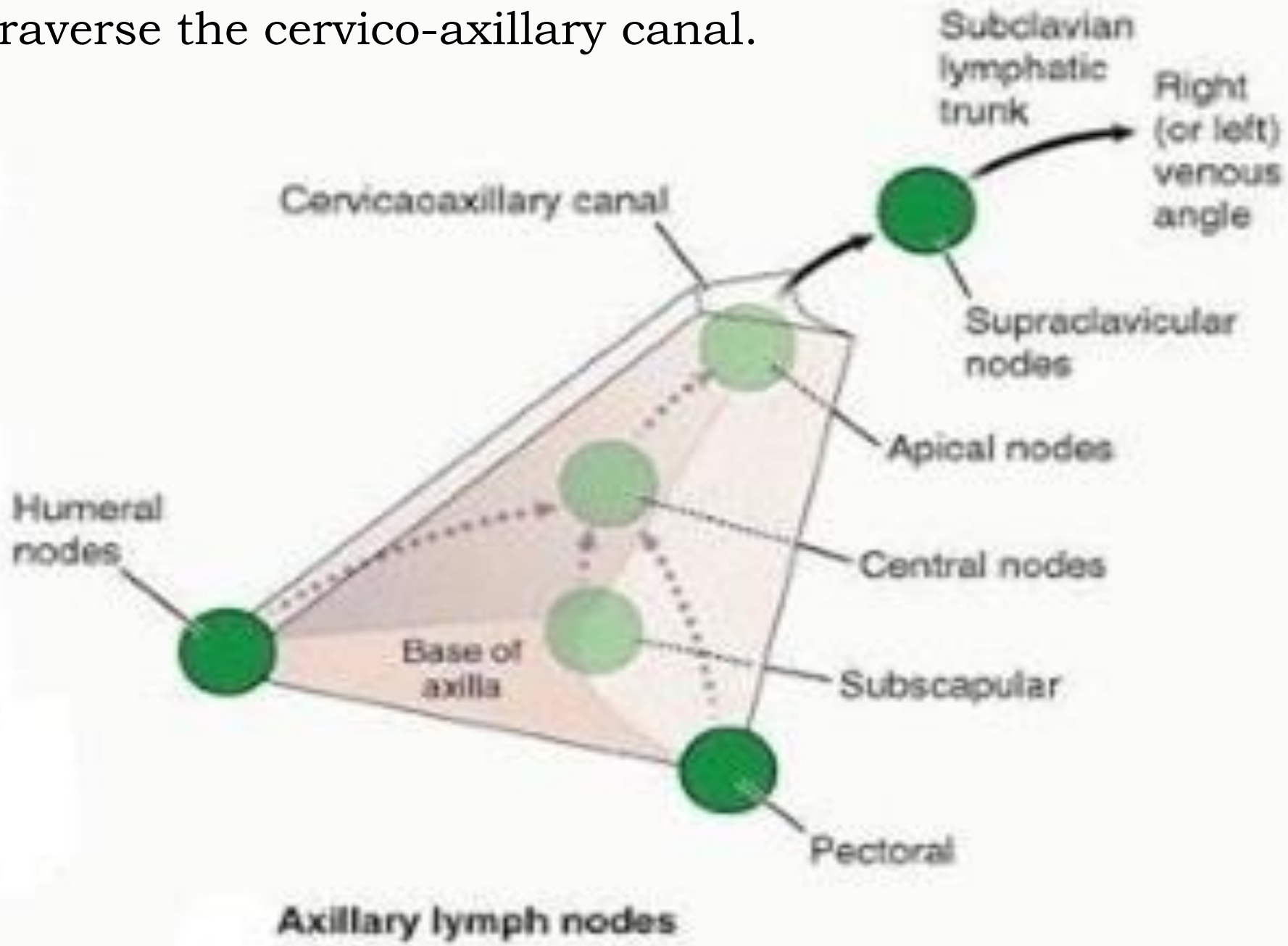
To contralateral (left) breast

To abdominal (subdiaphragmatic) lymphatics

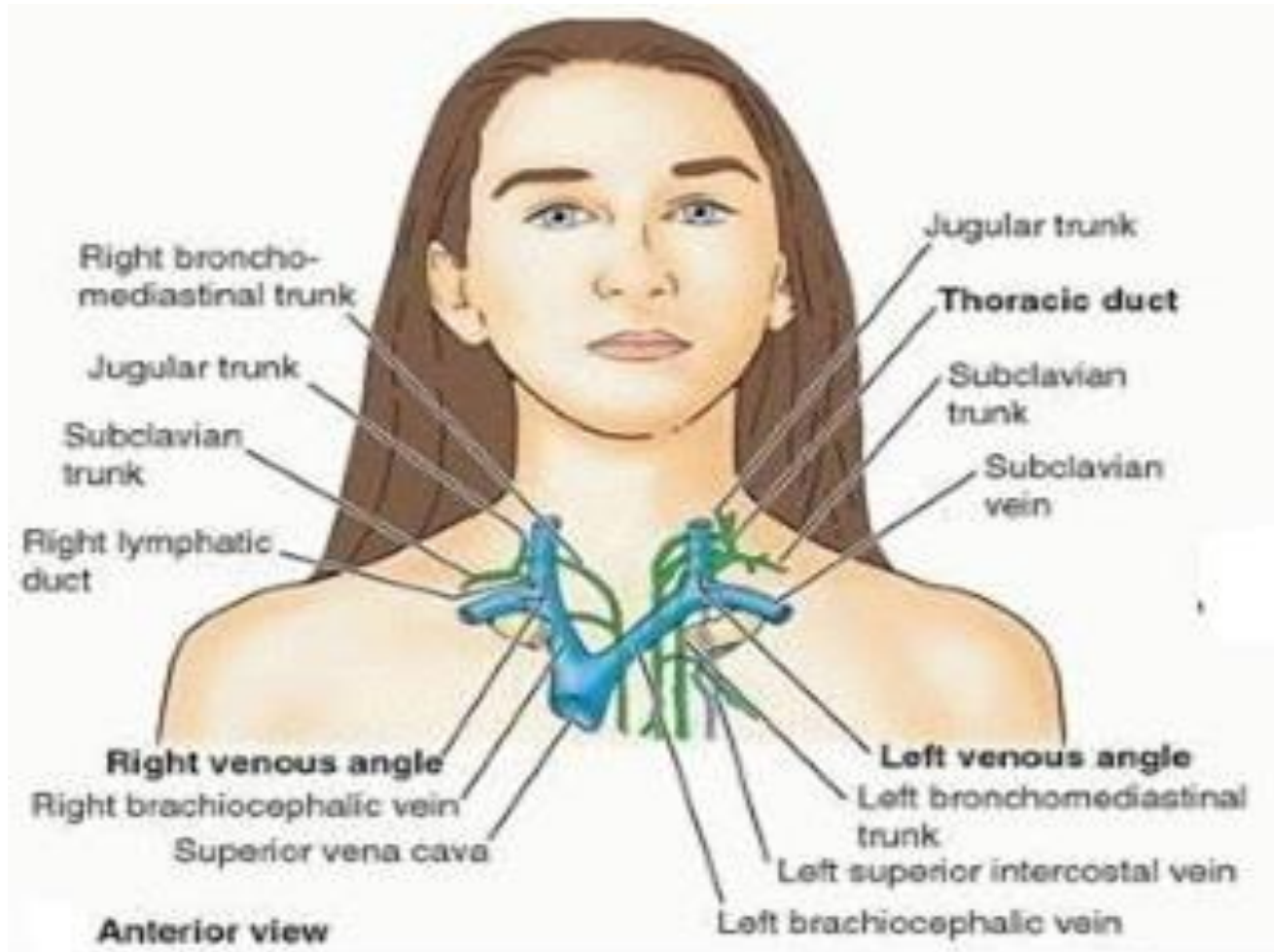
Anterior view



Efferent vessels from the apical group traverse the cervico-axillary canal.

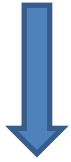


Efferent vessels from the apical group converge to form the **subclavian lymphatic trunk**, which usually joins the venous system at the junction between **right subclavian vein** & **right internal jugular vein** in the neck.

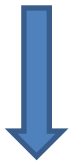




Axillary lymph nodes



Clavicular lymph nodes



Subclavian lymphatic trunk

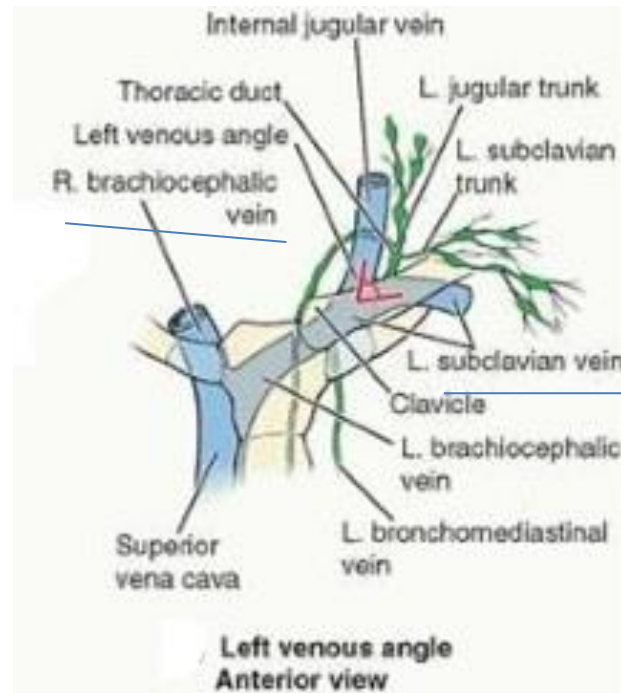
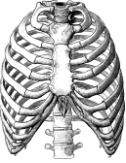
Parasternal lymph nodes



Bronchomediastinal lymph trunks

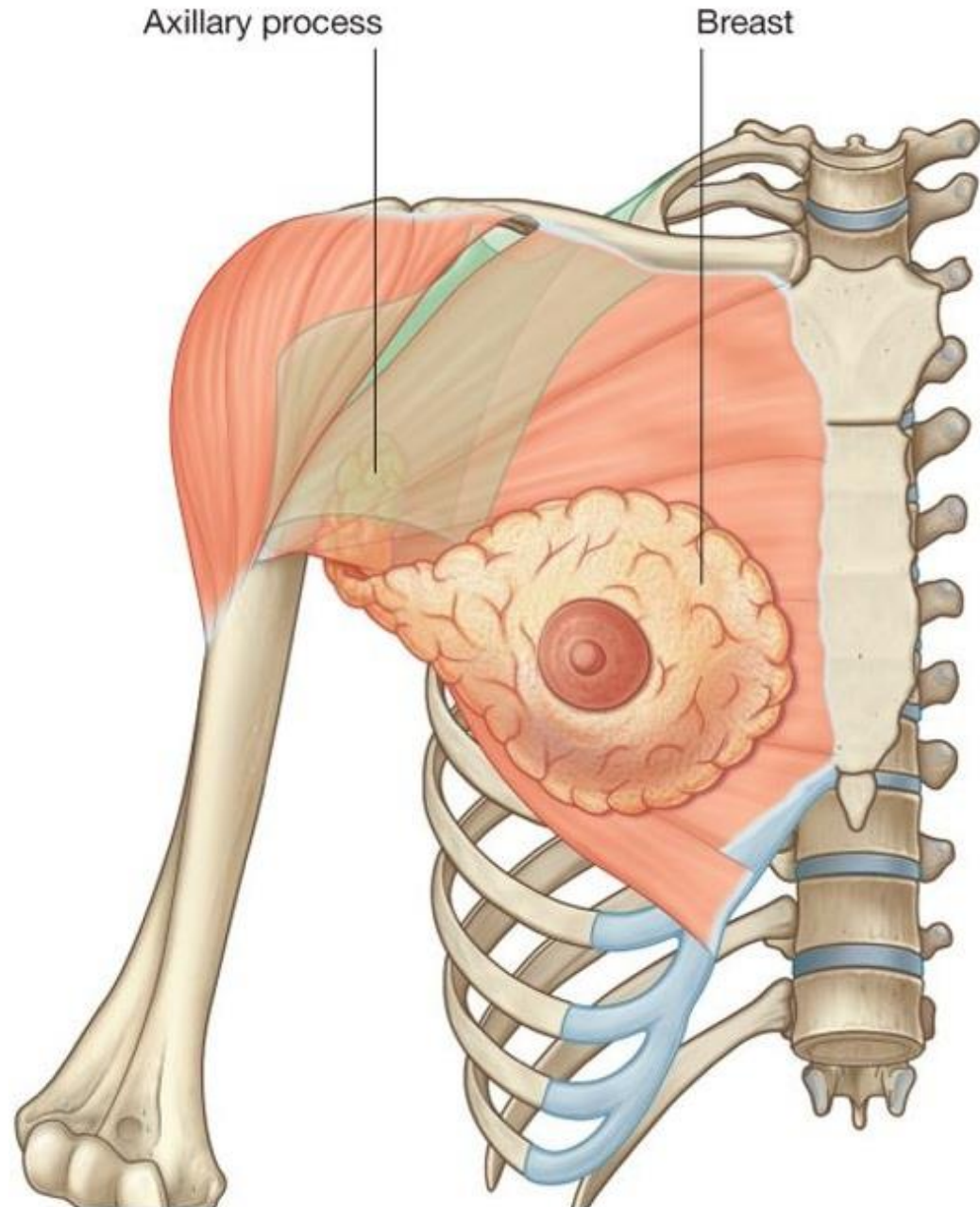


Right or left venous angle



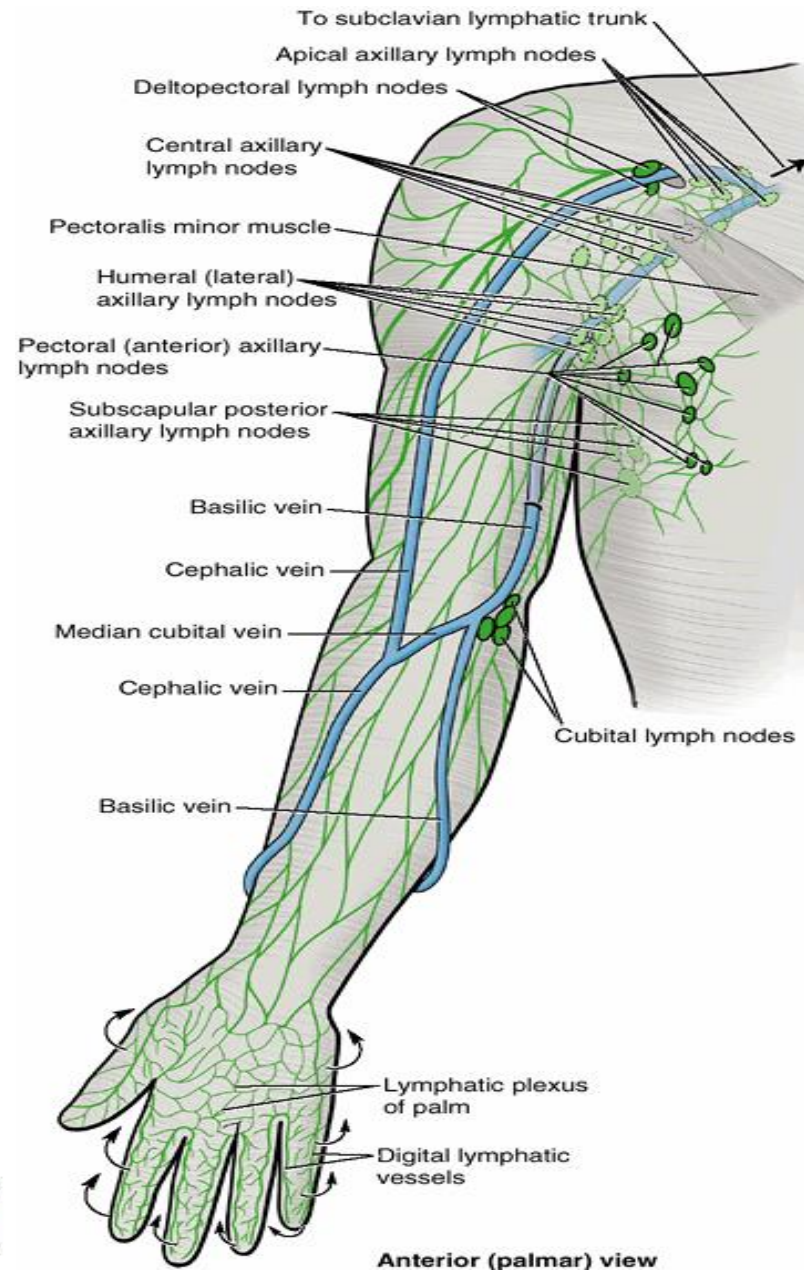
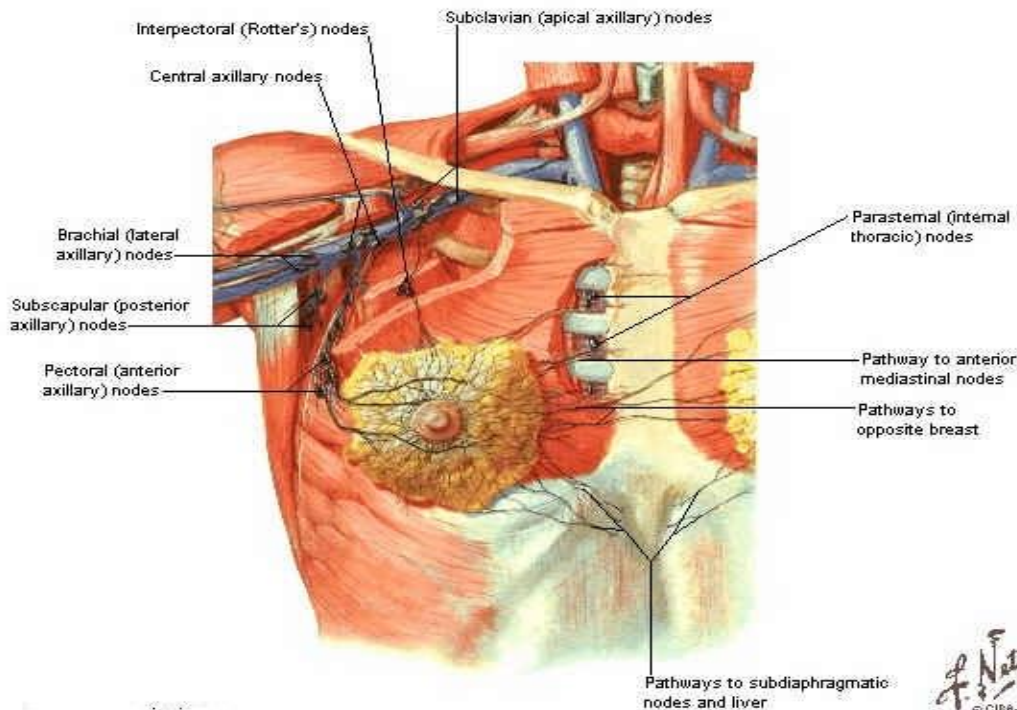
# Axillary process of the mammary gland

- In some cases, the superolateral region of breast may pass around the margin of pectoral muscle and enters the axilla.
- This axillary process rarely reaches as high as the apex of the axilla.



In metastatic cancer of the apical group, the nodes often adhere to the **axillary vein**, which may necessitate excision of part of this vessel.

Enlargement of the apical nodes may obstruct the cephalic vein superior to the pectoralis minor.



*F. Netter M.D.*  
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The examination of the axillary lymph nodes always forms part of the clinical examination of the breast.

With the patient standing or sitting, he or she is asked to place the hand of the side to be examined on the hip and push hard medially. This action of adduction of the shoulder joint causes the pectoralis major muscle to contract maximally so that it becomes hard like a board. The examiner then palpates the axillary nodes.

**EXAMINATION**  
**OF THE LYMPH**  
**NODES**

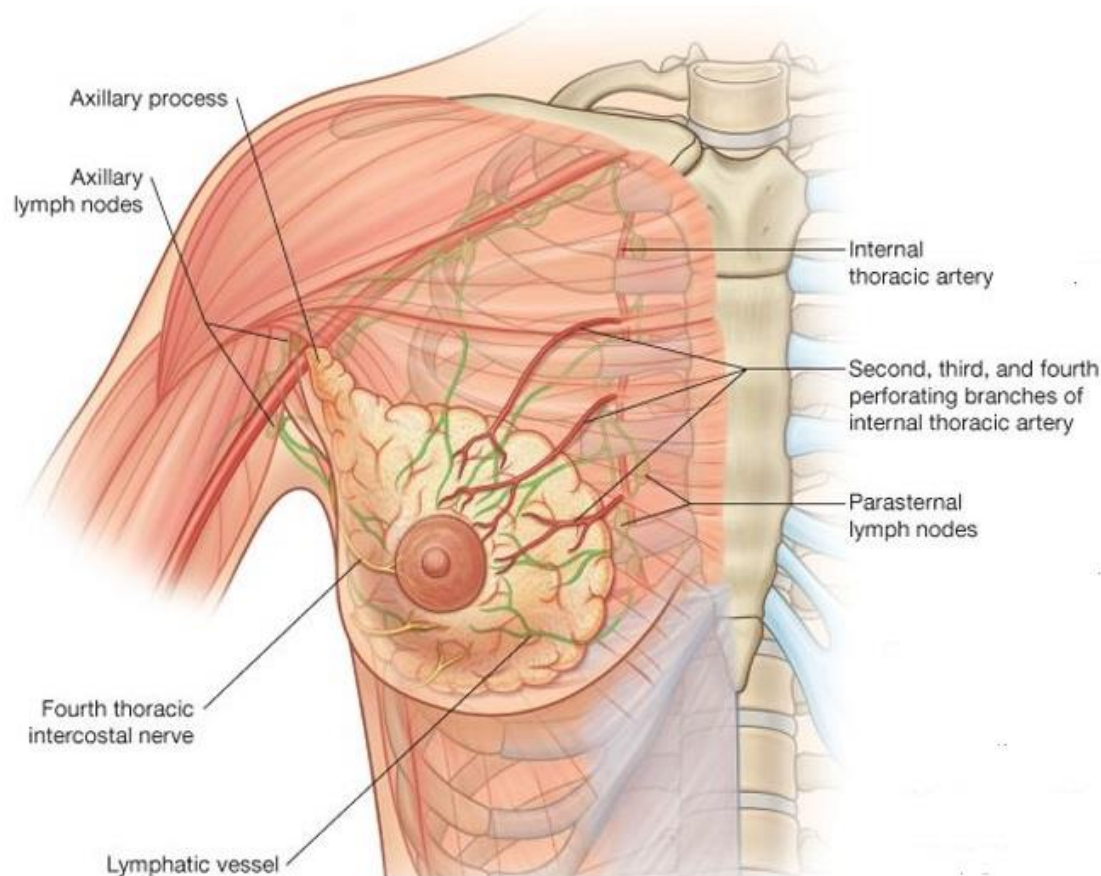


# INNERVATION OF THE BREAST



Anterior & lateral cutaneous branches of the 4th-6th intercostal nerves

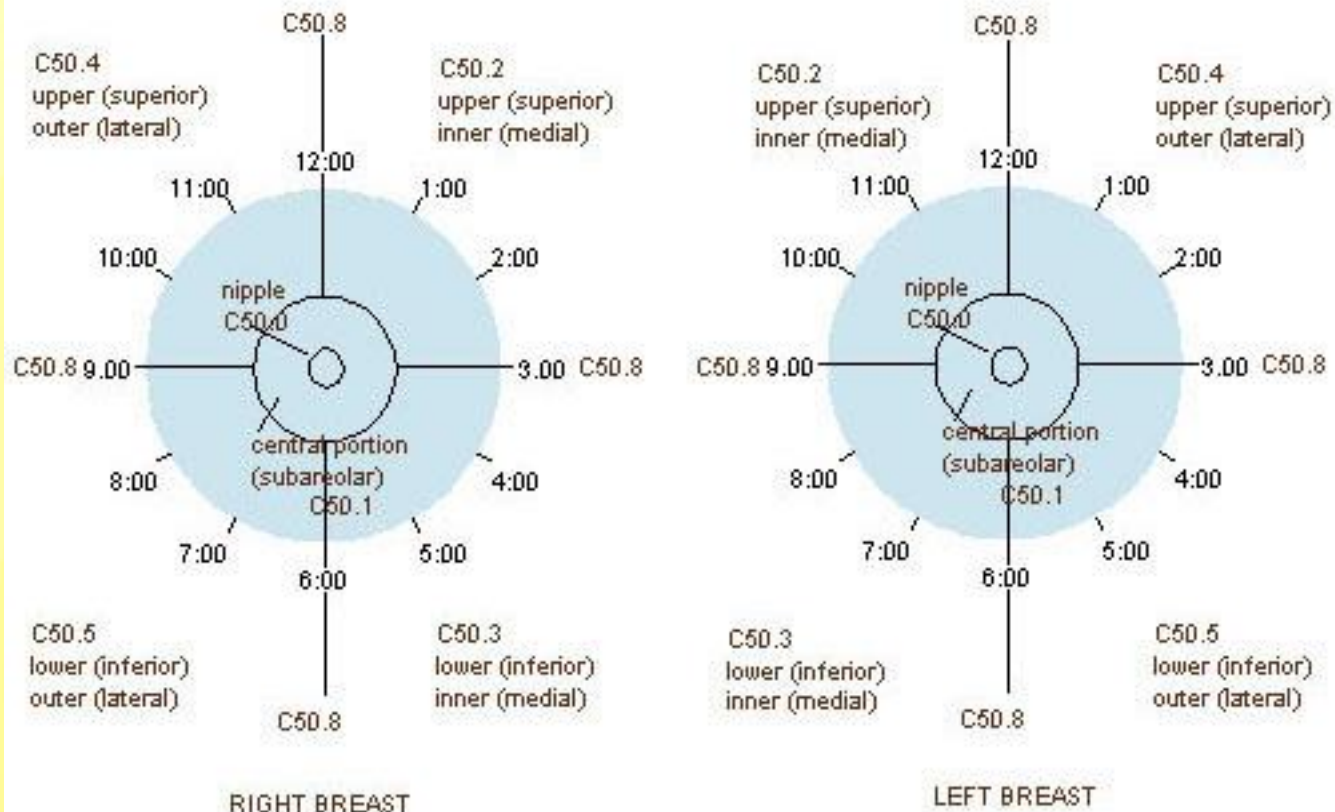
- sensory fibers from the skin of the breast
- sympathetic fibers to the blood vessels in the breasts
- smooth muscle in the overlying skin and nipple



# BREAST QUADRANTS



"Clock" Positions, Quadrants and ICD-O Codes of the Breast





# BREAST CANCER



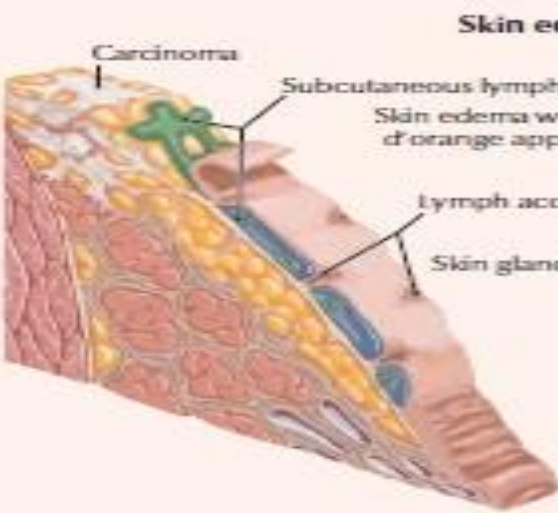
most common cancer among women, other than skin cancer  
second leading cause of cancer death in women, after lung cancer

**Chance of a woman having an invasive breast cancer some time during her life about 1 in 8**

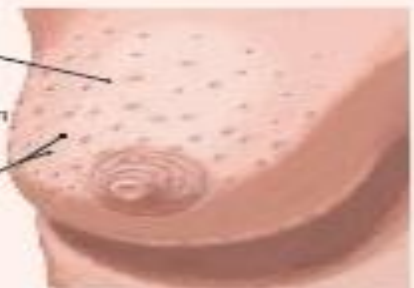
**Understanding the lymphatic drainage of the breasts is of practical importance in predicting the metastasis (dispersal) of cancer cells from a carcinoma of the breast (breast cancer).**

**spreads by means of lymphatic vessels (lymphogenic metastasis), which carry cancer cells from the breast to the lymph nodes, chiefly those in the axilla**

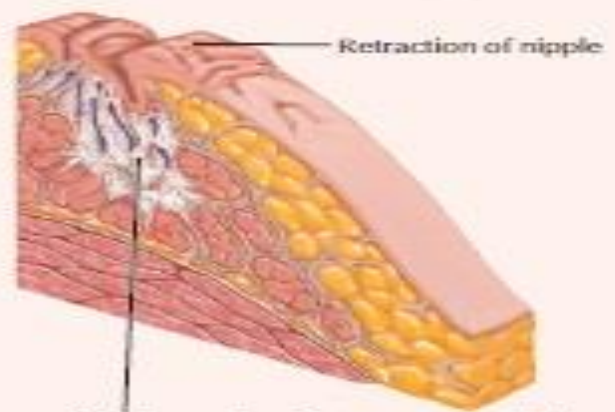
Carcinomatous involvement of mammary ducts may cause duct shortening and retraction or inversion of nipple.



**Skin edema**



Involvement and obstruction of subcutaneous lymphatic by tumor result in lymphatic dilatation and lymph accumulation in the skin. Resultant edema creates "orange peel" appearance due to prominence of skin gland orifices.



JOHN A. CRAIG

**Skin dimpling**

Dimpling of skin over a carcinoma is caused by involvement and retraction of suspensory (Cooper's) ligaments.



Suspensory (Cooper's) lig.  
Carcinoma

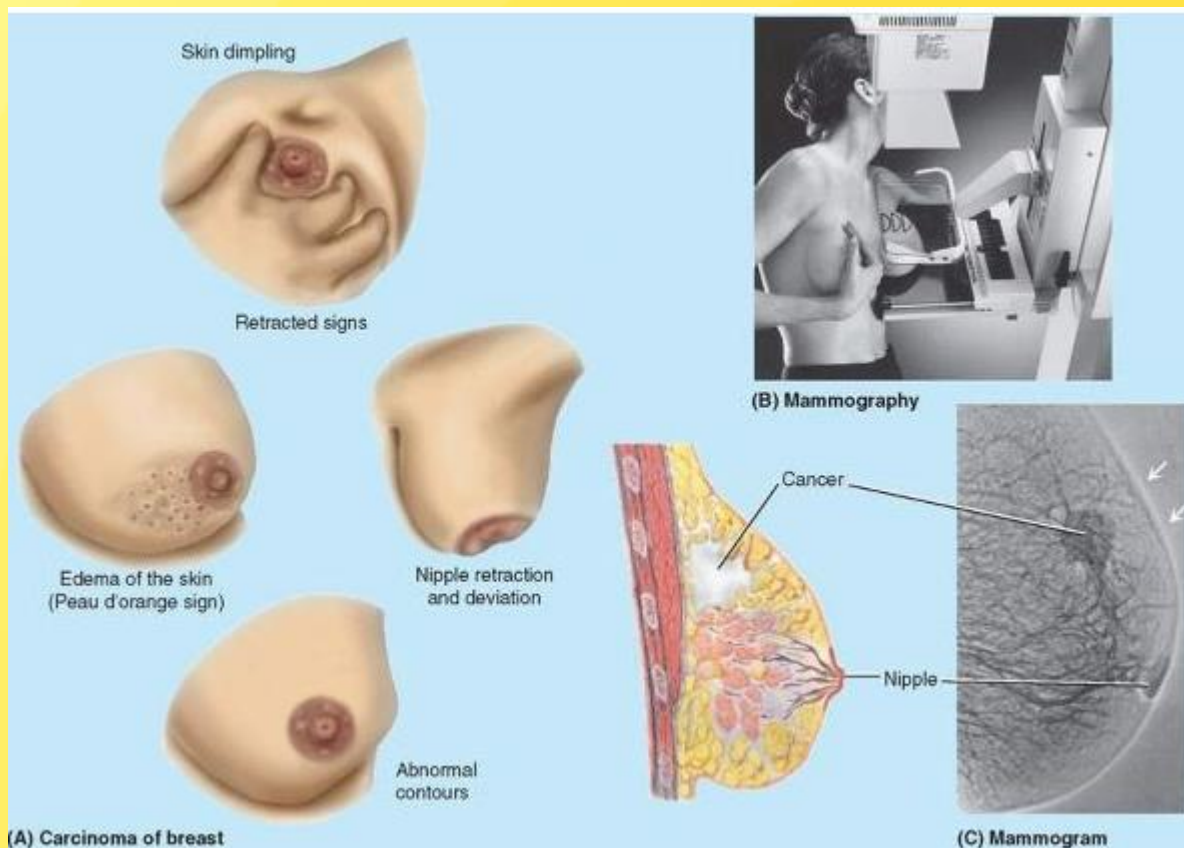
# MAMMOGRAPHY



Digital mammograms replacing conventional film mammography  
younger women with dense breast tissue benefit most from this type of mammography.

Surgeons use mammography as a guide when removing breast tumors, cysts, and abscesses.

jagged density in the mammogram. The skin is thickened over the tumor and the nipple is depressed



(A) Carcinoma of breast

(B) Mammography

(C) Mammogram



# MASTECTOMY

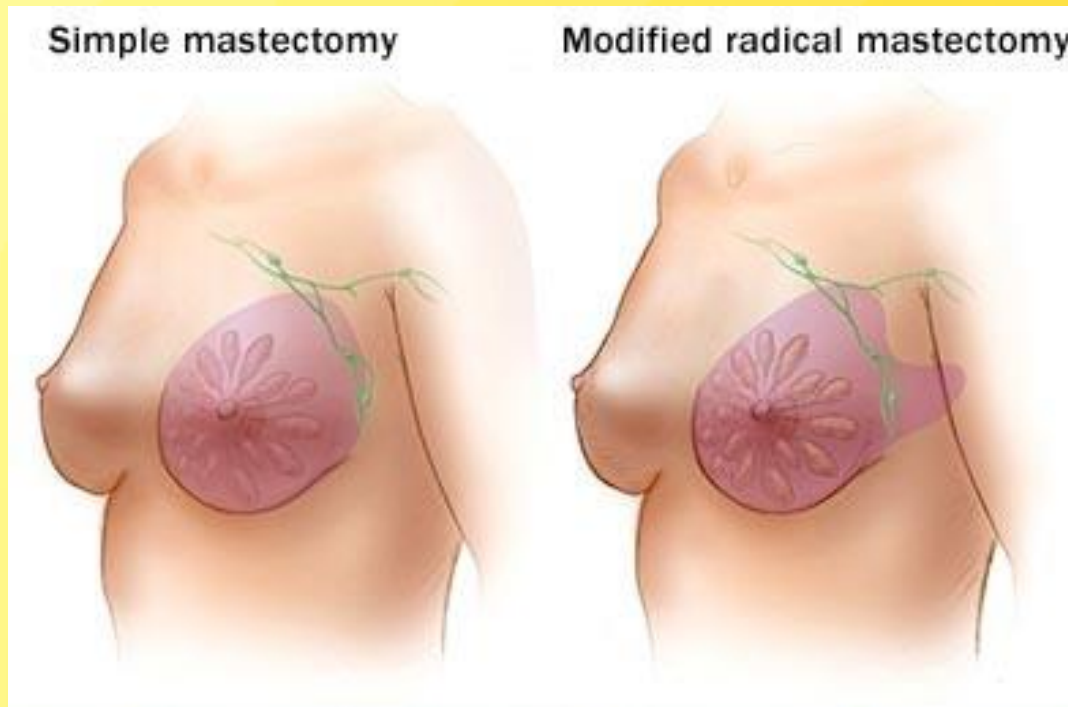
breast excision



## simple mastectomy

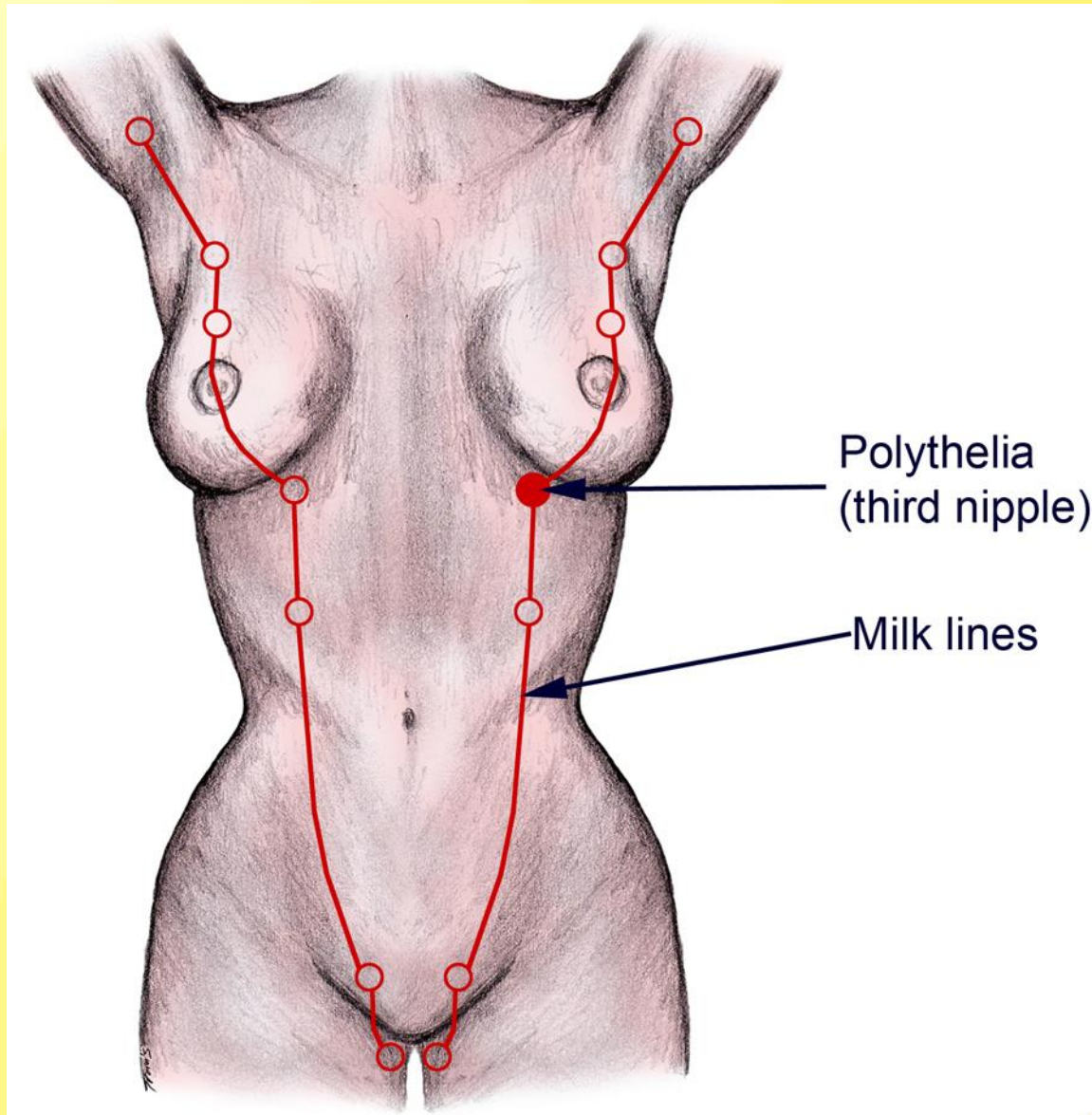
breast is removed down to the retromammary space.

**radical mastectomy** more extensive surgical procedure  
removal of the breast, pectoral muscles, fat, fascia, and as many lymph nodes as possible in the axilla and pectoral region.



# POLYTHELIA

accessory nipples



# POLYMASTIA

## SUPERNUMERARY BREASTS



- rudimentary nipple & areola
- mistaken for a mole (nevus)

anywhere along a line extending from the axilla to the groin—**embryonic mammary crest (milk line)** from which the breasts develop.





**Polymastia**

# AMASTIA

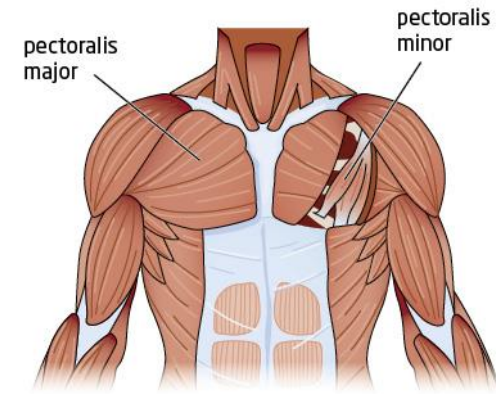
no breast development



There may be a nipple and/or areola, but no glandular tissue.



**Knowledge is freedom  
Ignorance is boredom**



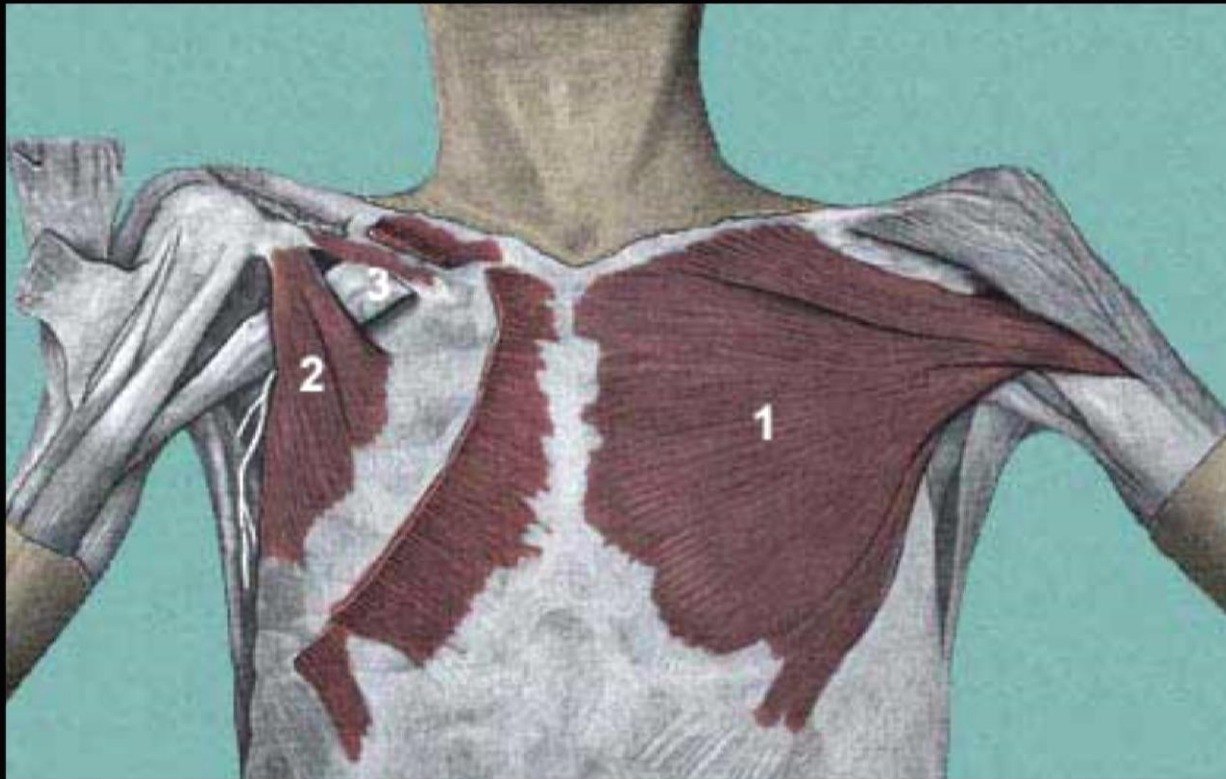
# PECTORAL REGION

## IN 8 QUESTIONS



# 1. Where is the pectoral region?

The pectoral region is external to the anterior thoracic wall and anchors the upper limb to the trunk.



## 2. What does the pectoral region consist of?

### Superficial compartment

Contains skin, superficial fascia, breasts

### Deep compartment

Contains muscles & associated structures



### 3. What are the muscles of the pectoral region?

Four pectoral muscles move the pectoral girdle

Pectoralis major

Pectoralis minor

Serratus anterior

Subclavius







**Pectoralis major**

**Serratus anterior**



**Pectoralis minor**

## 4. What movements does the pectoralis major muscle ?

Pectoralis major

powerful adduction

medial rotation of the arm

clavicular  
head flexing  
the humerus



sternocostal  
head extending  
it back

## 5. What movements do pectoralis minor & subclavius ?

### Pectoralis minor

stabilizes the scapula

touch an object that is just out of reach.

Assists in elevating the ribs

### Subclavius

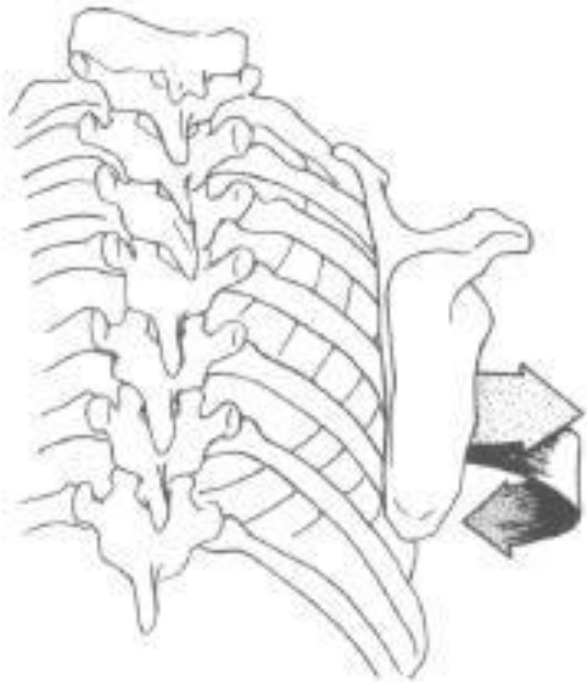
Anchors and depresses the clavicle, stabilizing it during movements of the upper limb.



## 6. What movements does the serratus anterior ?

one of the most powerful muscles  
of the pectoral girdle

- ❑ Strong protractor of scapula - Abduction
- ❑ used when punching or reaching anteriorly (**boxer's muscle**).



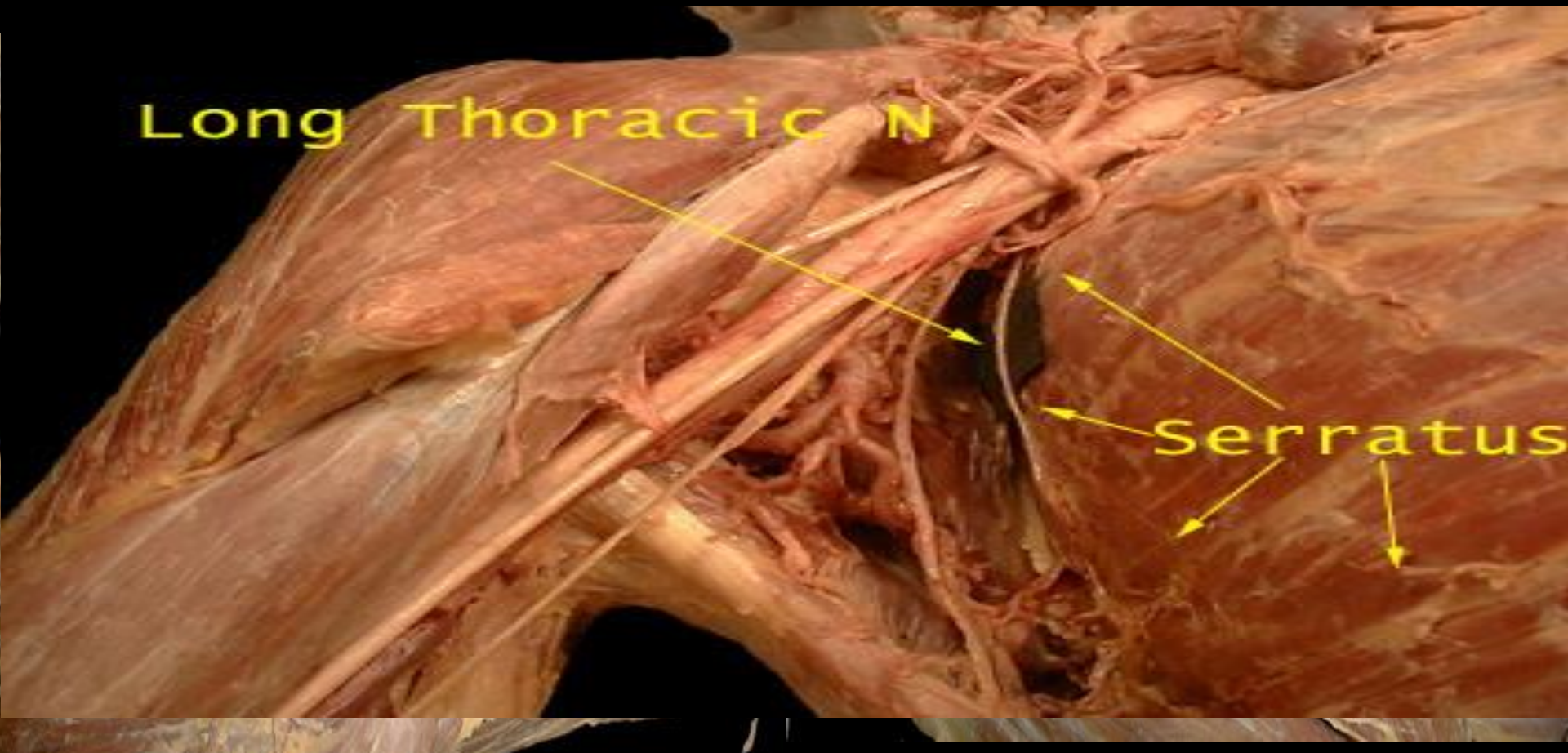
## 7. How are these muscles innervated?

**Pectoralis major** Medial & Lateral pectoral nerves

**Pectoralis minor** Medial pectoral nerve

**Subclavius** Nerve to subclavius

**Serratus anterior** Long thoracic nerve



## 8. ..the clavipectoral fascia and triangle?

Deep to the pectoral fascia & pectoralis major

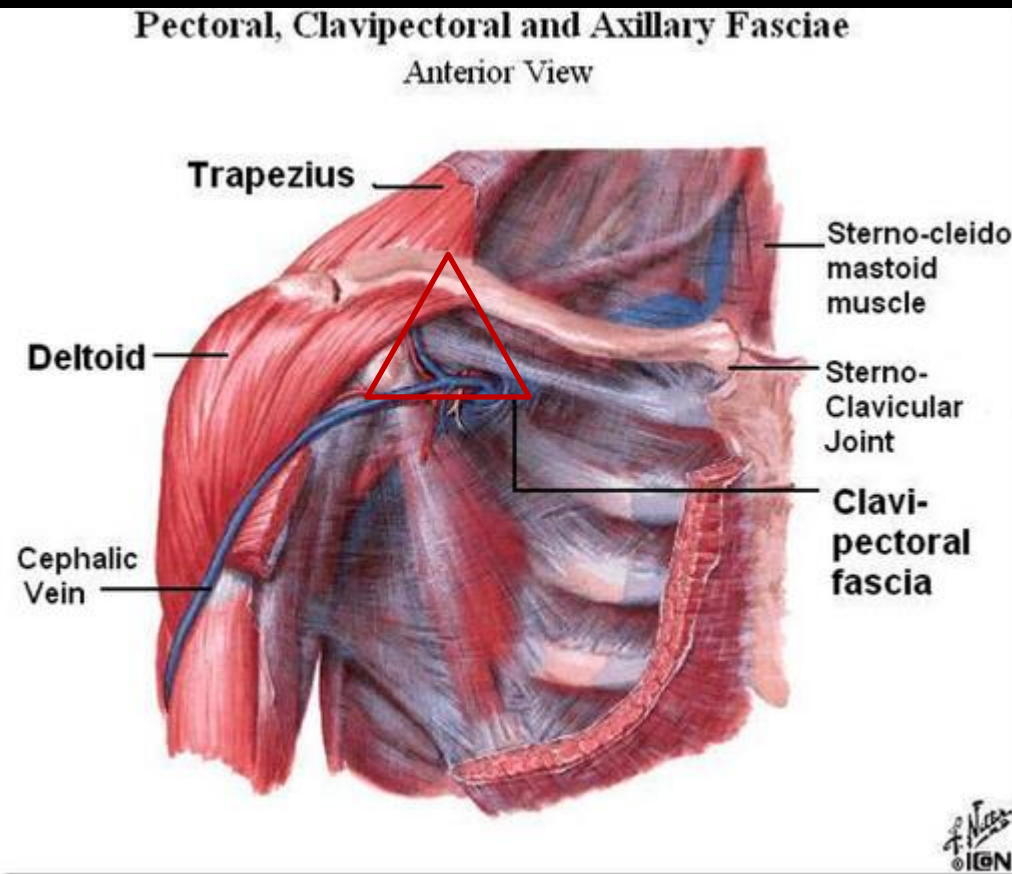
Descends from the clavicle

Clavipectoral triangle

cephalic vein can be found.

formed by

pectoralis major, deltoid & clavicle



Deltpectoral groove

# Where are the mammary glands?

In the subcutaneous tissue overlying the pectoralis major and minor muscles.

lateral border of the sternum to the midaxillary line vertically from the 2nd through 6th ribs.

