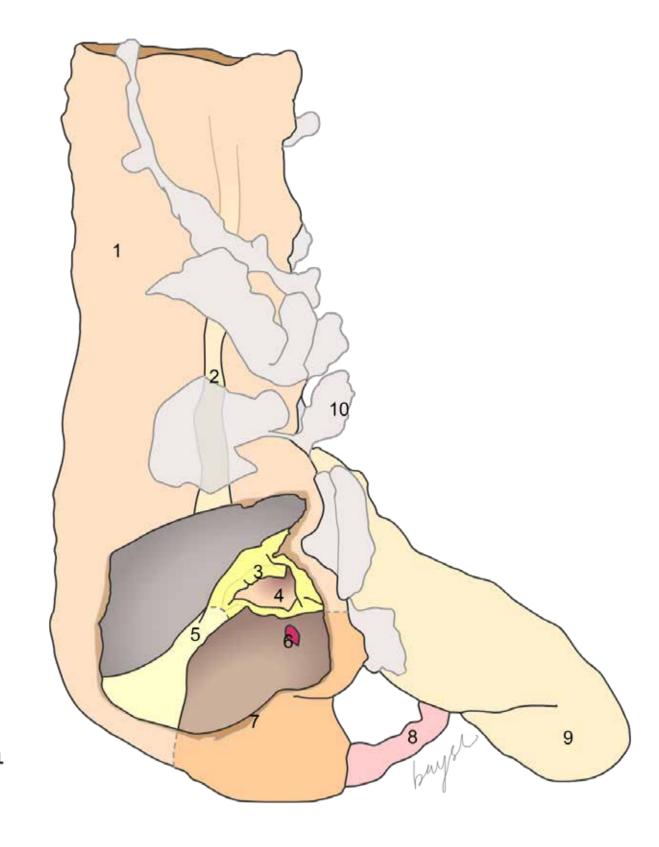
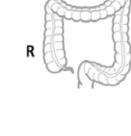
ILEOCAECAL JUNCTION SHOWING VERMIFORM APPENDIX





iliac fossa.

lleocecal valve 3.

Taenia coli

Ascending colon

1.

2.

- Ileocecal orifice 4.
- Frenulum of ileocecal valve 5. 6. Orifice of vermiform appendix
- Caecum (anterior wall removed) 7.
- Veriform appendix 8. 9. Ileum (terminal)
- 10. Omental appendices
- Anterior aspect of the right lower quadrant of the ab-

rather than by sphincteric action.

valve, ileocecal orifice (revealed by removal of the anterior wall of the caecum) of the vermiform appendix and the internal aspect of the haustral folds in the ascending colon. The caecum and ileocolic junction are located in the right

dominal cavity showing the cecum, appendix, ileocecal

The ileocolic orifice is usually closed by tonic contraction

The distinguishing features of large intestine include omental appendices, taenia coli and haustrations or sac-

culations. Although these features are not seen in the

caecum and the appendix. The ileocaecal valve is an anatomical sphinter. The ileocolic junction helps to provide partial seperation

of the luminal environment of small and large intestine,

impedes reflux from colon and helps antegrade small

bowel transit.

Appendix not vestigial anymore! The latest studies has shown that the veriform appendix acts as a reservoir for normal gut bacteria.

Appendictis is an acute inflammation of the appendix, a

CLINICAL CONSIDERATIONS

finger-shaped pouch that joins the posteromedial wall of the caecum below the ileocolic junction. Appendicitis causes acute abdomen (severe pain arising suddenly in the lower right abdomen).

because afferent pain fibres enter the spinal cord at T10 segment. Later, the severe pain is localized to the right lower quadrant of the abdomen as the parietal peritomeum

Initially, pain may be referred ti the peri umbilical region

gets inflamed. Digital presuure over the Mcburney's point produces the maximum abdomeinal tenderness. Laparoscopic appendectomy has become a standard procedure selectively utilized for removing the appendix. McBurney's point: The base of the appendix lies deep to a point that is one third of the way along the oblique

line joining the right anterior superior iliac spine to the

umbilicus.

- Question(s)
- Where will the pain due to appendicitis referred to?

Does the caecum has any mesentry?

What is the blood supply of appendix?

- What is the striking feature of histology of appendix?
- What are tania coli?