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1. Lymphatic vasculature plays an important role in immune modulation. One of it roles is to coordinate antigen transport and immune cell trafficking from peripheral tissues to secondary lymphoid organs Vasculature also plays an important role in our immune function by trafficking both immune cells and soluble antigens and provides an important bridge between the innate and adaptive immune systems. Trafficking is regulated by a complex interaction between the LECs and immune cells. Large vessels are not directly involved in leukocytes trafficking into tissues, but may themselves be a target of inflammation, for example when arteries becomes involved by cell-mediated immune responses as occurs in atherosclerosis. Vasculature is important in relation to the outbreak of COVID 19 in the human body because it plays an important role in the immune system, which is the body’s multi-level defense network against harmful bacteria, viruses and other organisms. The immune system which is the body’s defense force against bacteria, viruses and other organisms that we touch, ingest and inhale everyday helps protect us from the COVID 19 virus.

2.The subsartorial canal (adductor or Hunter’s canal) is an [aponeurotic](https://en.wikipedia.org/wiki/Aponeurotic) tunnel in the middle third of the [thigh](https://en.wikipedia.org/wiki/Thigh), extending from the apex of the [femoral triangle](https://en.wikipedia.org/wiki/Femoral_triangle) to the opening in the [adductor Magnus](https://en.wikipedia.org/wiki/Adductor_magnus), the [adductor hiatus](https://en.wikipedia.org/wiki/Adductor_hiatus). It has the following boundaries:

* Anteromedial wall - [sartorius](https://en.wikipedia.org/wiki/Sartorius_muscle).
* Posterior wall - [adductor longus](https://en.wikipedia.org/wiki/Adductor_longus) and [adductor magnus](https://en.wikipedia.org/wiki/Adductor_magnus).
* Laterally - [vastus medialis](https://en.wikipedia.org/wiki/Vastus_medialis).

It is covered in by a strong aponeurosis which extends from the [vastus medialis](https://en.wikipedia.org/wiki/Vastus_medialis), across the femoral vessels to the [adductor longus](https://en.wikipedia.org/wiki/Adductor_longus) and magnus.Lying on the aponeurosis is the [sartorius (tailor's) muscle](https://en.wikipedia.org/wiki/Sartorius_muscle).

The canal contains the [subsartorial artery (superficial femoral artery)](https://en.wikipedia.org/wiki/Femoral_artery#Segments),[subsartorial vein (superficial femoral vein)](https://en.wikipedia.org/wiki/Femoral_vein#Segments), and branches of the [femoral nerve](https://en.wikipedia.org/wiki/Femoral_nerve)(specifically, the [saphenous nerve](https://en.wikipedia.org/wiki/Saphenous_nerve), and the [nerve to the vastus medialis](https://en.wikipedia.org/wiki/Nerve_to_the_Vastus_medialis)). The femoral artery with its vein and the saphenous nerve enter this canal through the superior [foramen](https://en.wikipedia.org/wiki/Foramen). Then, the saphenous nerve and artery and vein of genus descendens exit through the anterior foramen, piercing the vastoadductor intermuscular septum. Finally, the femoral artery and vein exit via the inferior foramen (usually called the [hiatus](https://en.wikipedia.org/wiki/Adductor_hiatus)) through the inferior space between the oblique and medial heads of adductor Magnus.

3. The extraocular muscles are located within the orbit, but are extrinsic and separate from the eyeball itself. They act to control the movements of the eyeball and the superior eyelid. There are seven extraocular muscles – the levator palpebrae superioris, superior rectus, inferior rectus, medial rectus, lateral rectus, inferior oblique and superior oblique. The extraocular muscles are innervated by lower [motor](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2639/) neurons that form three [cranial nerves](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2392/): the abducens, the trochlear, and the oculomotor. The abducens [nerve](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2658/) (cranial nerve VI) exits the [brainstem](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2315/) from the [pons](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2762/)-medullary junction and innervates the lateral rectus muscle. Thetrochlear nerve (IV) exits from the [caudal](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2327/) portion of the midbrain and supplies the superior oblique muscle. In distinction to all other cranial nerves, the trochlear nerve exits from the [dorsal](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2421/) surface of the brainstem and crosses the midline to [innervate](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2544/) the superior oblique muscle on the [contralateral](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2378/) side. The oculomotor nerve (III), which exits from the [rostral](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2836/) midbrain near the cerebral peduncle, supplies all the rest of the extraocular muscles. Although the oculomotor nerve governs several different muscles, each receives its [innervation](https://www.ncbi.nlm.nih.gov/books/n/neurosci/A2251/def-item/A2545/) from a separate group of lower motor neurons within the third nerve nucleus.

The intraocular muscles include the ciliary muscle, the sphincter pupillae, and the dilator pupillae. The ciliary muscle is a smooth muscle which helps in accommodation. The sphincter pupillae helps constricts pupils and the dilator pupillae helps to dilate pupils.