NAME: SOTANNDE FAIZAH TEJUMOLA

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DEPARTMENT: NURSING SCIENCE

LEVEL: 200

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ASSIGNMENT

1. Describe the importance of vasculature in relation to immune system and outbreak of pandemic COVID-19 in the human body.

ANSWER - The vasculature is a network of blood vessels connecting the heart with all other organs and tissues in the body. Arteries and arterioles ring oxygen- rich blood and nutrient from the heart to the organs while veins and venules carry de-oxygenated blood back to the heart. The exchange of gases and transfer of nutrient between blood and tissues take place in the capillaries. The vascular system has a crucial role because the blood being transported consist of plasma, red blood cells, white blood cells and platelets that is circulated by heart through the vertebrate vascular system. Thus, the white blood cells is very important in the immune system of the body as it fights against germs and all.

Its also important in the outbreak of pandemic COVID-19 as the vascular system provides oxygen and nutrient to every organ and tissue. The CVID-19 is a respiratory disease which symptom include difficulty in breathing. The vasculature therefore provides oxygen which is very important in this case.

1. Subsartoral canal is an important area in the lower limb, Discuss.

ANSWER – The subartoral canal is a narrow cocnical turnel located in the thigh. It is approximately 15 cm long, extending from the apex of the femoral triangle to the adductor hiatus of the adductor magnus. The canal serves as a passage way from structures moving between the anterior thighs and posterior leg.

STRUCTURE

It is an intermuscular cleft situated on the medial aspect of the middle third of the thigh on anterior compartment of thigh, and has the following boundaries;

Anteromedial wall-satorius

Posterior wall-adductor longus and adductor magnus

Laterally-vastus medialis.

CONTENTS

The canal contains the subsartorial artery (superficial femoral artery), subsartorial vein (superficial femoral vein), and branches of the femoreal nerve (specially, the saphenous nerve and the nerve to the vastus medialis). The femoral artery with its vein and saphenous nerve enter this canal through the superior foramen. Then, the saphenous nerve and artery and vein of genus descendens exit through the anterior foramen, piercing the vasto adductor intermuscular septum. Finally, the femoral artery and vein exit via the inferior foramen (usually called the hiatus) through the inferior space between the oblique and medial heads of adductor Magnus.

CLINICAL SIGNIFICANCE

Adductor canal compression syndrome; describes entrapment of the neuro vascular bundle within the adductor canal. It is most common in young males, who may present with claudication symptoms due to femoral artery occlusion.

1. Describe the extraocular and intraocular muscles with their nerve supply.

Extraocular muscles;

The extraocular muscles are the six muscles that conbtrolk movement of the eye and one muscle that controls eyelid elevation (levator palperae). The action of the six muscles responsible for eye movement depend on the position of the eye at the time of muscle contraction.

Nerve supply include;

CRANIAL NERVE MUSCLE

Oculomotor nerve (N.III) Superior rectus muscle

Inferior rectus muscle

Medial rectus muscle

Inferior oblique muscle

Levator palperae superiosis muscle

Trochlea nerve (N.IV) Superior oblique muscle

Aducens nerve (N.VI) Lateral rectus muscle

INTRAOCULAR MUSCLE

The intraocular muscle include the cilliary muscle, the spincter pupillae, and the dilator pupillae. The ciliary muscle is a smooth muscle nring that controls accommodation by altering the shape of the lens, as well as controlling the flow of aqueous humor into schlemm’s canal. The spincter pupillae and dialator pupillae are also composed of smooth muscle.

Nerve supply

The ophthalmic nerve (CN V: VI) branches into the frontal, nasocilliary, and lacremal nerves. The cilliary gamglion is made up of postsynaptic parasympathetic nerve cell odies associated with the ophthalmic nerve. The short cilliary nerves originate from illiary ganglion and carry parasympathetic and sympathetic fires into the iris and cilliary body. The long cilliary nerves branch off of the nasocilliary nerve and carry postsynaptic sympathetic fibers to the dilator pupillae and afferent fibre from the cornea and iris. The spincter pupillae is parasympathetically stimulated while the dilator pupillae is sympathetically-stimulated.