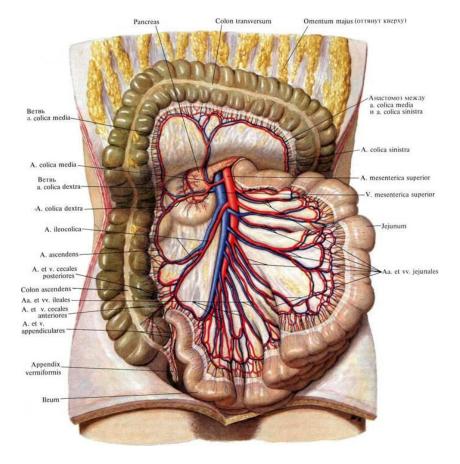
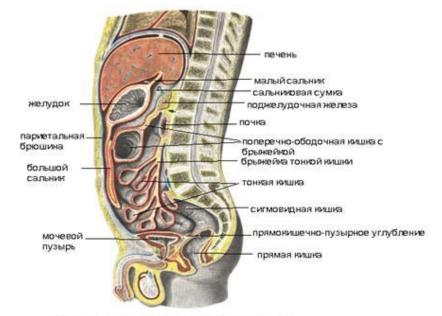


# The basics of surgical interventions on the intestine

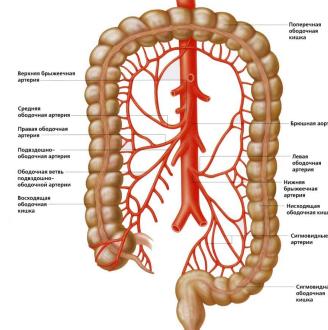


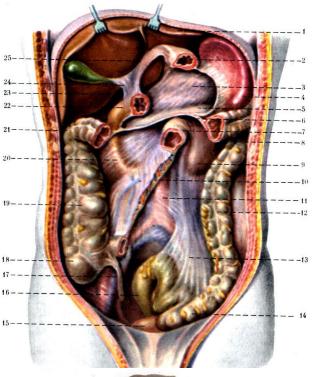


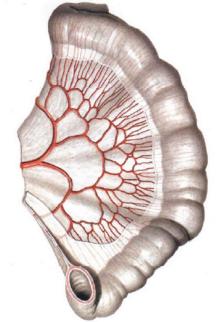


### Вузаимоотношение брюшины с органами и

Артериальная система ободочной кишки



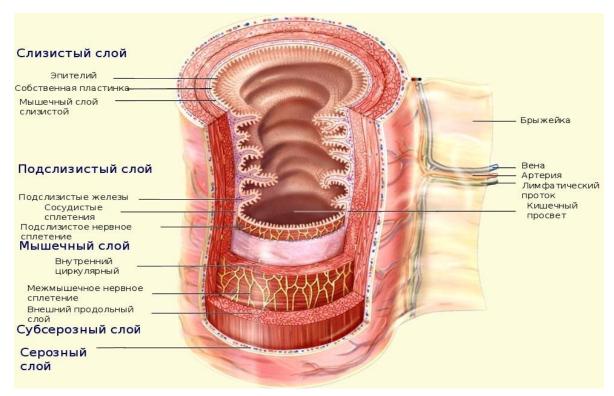




# Pirogov Russian National Research Medical University

### Брю шина (серозная оболочка) Брыжейка Подсерозное нервное сплетение Продольный — мышечный слой мышечной оболочки Афферентные Межмышечное нервное сплетение Вететативные нервы (симпатические и парасимпатические) Циркулярный мы шечный слой мышечной оболочки Подслизистое (Мейсснерово) Мы шечна я оболочка Просвет (полость) Подслизистая основа Слизистые железы в подслизистой основе Адвентициальная оболочка Мышечный слой слизистой оболочки SPECIAL DESCRIPTION OF THE PERSON OF THE PER Эпителий тонкой кишки (энтероциты) Слизистая оболочка

### Structure of the colon wall



### The structure of the wall of the small intestine





# Anatomical and physiological features of the wall of the digestive canal

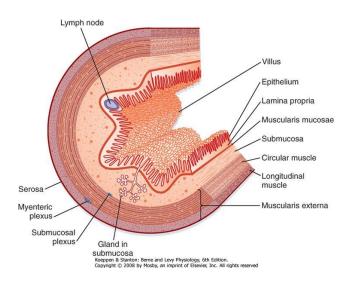
### 1. The case structure

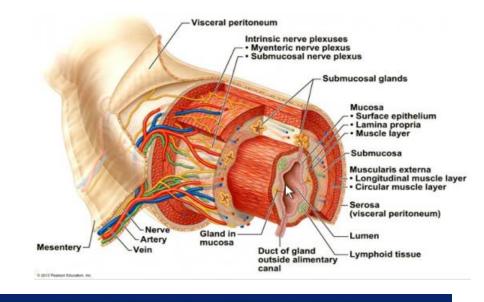
### <u>Anatomically</u>

4 membranes - mucous, submucosal, muscular, serous

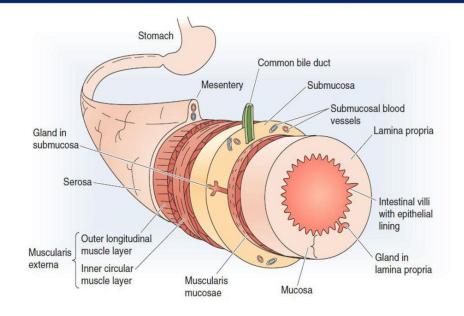
### Practically - 2 circular cases

- external serous-muscular (muscular-adventitious)
- internal mucosal-submucosal Loose connection between the cases: their mobility relative to each other in different organs to varying degrees
- 2. The biological role of the intestinal membranes (biological justification of the intestinal suture)
- serous membrane bonding within a few hours after surgery (tightness of intestinal anastomosis)
- submucosa strong in mechanical terms (mechanical strength of intestinal anastomosis)
- mucous membrane does not tolerate mechanical injury, easily necrotises





# The Digestive Tract Wall



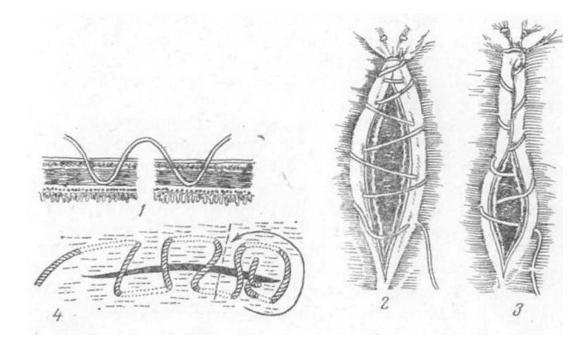


# **General requirements for intestinal sutures**

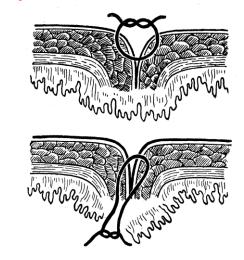
All types of sutures used in operations on the organs of the digestive tract (esophagus, stomach, small and large intestines)

### INTESTINAL SUTURE REQUIREMENTS

- 1. Tightness of the anastomosis (precise adaptation of the serous surfaces of the stitched areas)
- 2. Mechanical strength of the seam (inclusion of the submucosal base in the seam)
- 3. Prevention of narrowing of the organ lumen at the suture site
- 4. Ensuring reliable hemostasis (inclusion in the suture of the submucosal base)



### **Eruption of intestinal sutures**



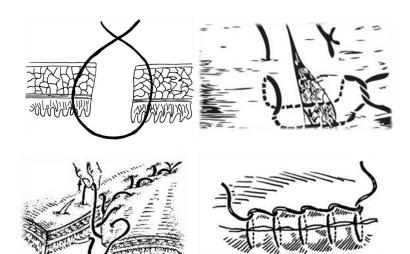


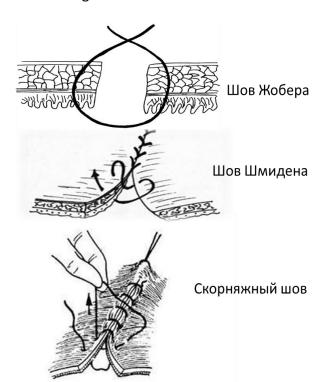
### Classification of intestinal sutures

### In relation to the lumen of the intestine:

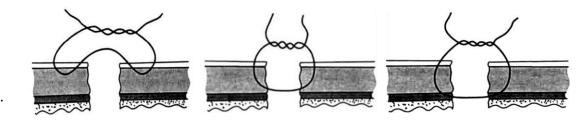
- Non—penetrating (aseptic) sutures the thread does not penetrate into the lumen of the intestine.
  - 1. Serous suture only the serous membrane is captured
  - 2. Serous-muscular suture the serous and muscular membranes are captured.
  - 3. Serous-musculoskeletal-submucosal suture without entrapment of the mucous membrane.
- Penetrating (infected) sutures —the thread passes through the mucous membrane and is located in the lumen of the intestine.
  - 1. A through intestinal suture passed through all layers of the wall of the hollow organ.
  - 2. Muscle-submucosal-mucous suture.
  - 3. Submucosal-mucous suture.
  - 4. Suture of the mucous membrane.

### **Classification of intestinal sutures**

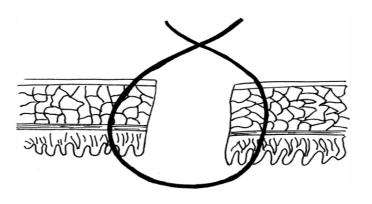




### Non-penetrating (aseptic) seams



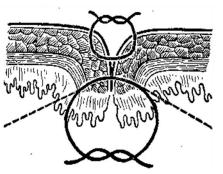
### **Penetrating (infected) suture**



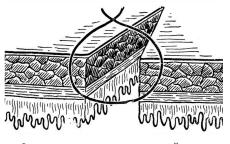


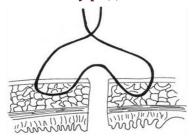
## **Classification of intestinal sutures**

### По количеству рядов:



Сквозной шов



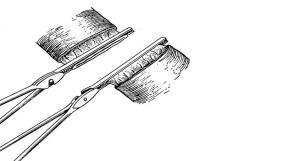


Шов Ламбера





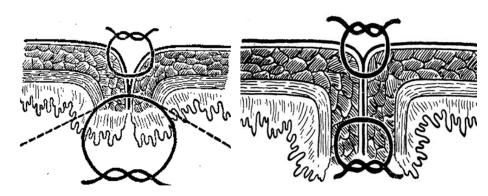
Серозно-мышечно-подслизистый шов



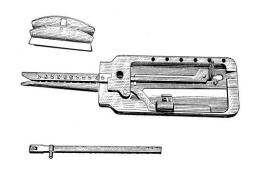


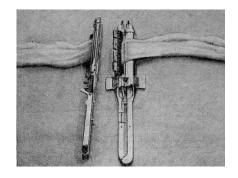


Кишечный шов Кирпатовского И.Д.



**Anastomosis machines** 





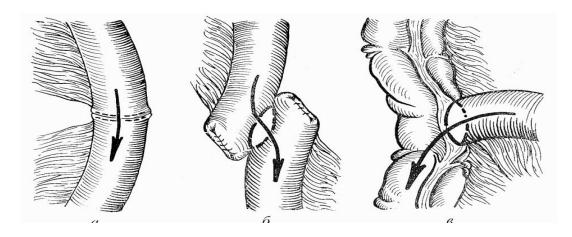
gastrointestinal

interstitial

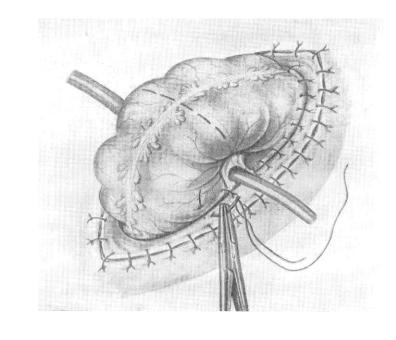
Department of Topographic Anatomy and Operative Surgery named after Academician Y.M. Lopukhin



# **Types of intestinal anastomoses**



Anastomosis "end to end" Anastomosis "side to side" Anastomosis "end to side"



# Double-barrelled colostomy

# **Jejunostomy by Mayo-Robson**

