tinuation of axillary artery \& it divides into its terminal branches namely radial \& ulnar arteries at the level of neck of radius in the cubital fossa.

Case report: The present case report was studied in Dr. S.N. Medical College, Jodhpur, Department of Anatomy was observed that the higher bifurcation of brachial artery was seen on the level of lower border of teres major muscle into radial \& ulnar artery in the right upper limb of an old male cadaver.

Conclusion: Anomalies in origin \& course of principal arteries have practical importance for orthopedicians, radiologist\& vascular surgeons. Awareness of incidence of this variation is necessary to avoid complication during pre-operative procedures or surgeries in the upper limb.

## Conflicts of interest

The authors have none to declare.
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## Retrograde ileo-ileal intussusception in adult: a cadaveric case report

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Introduction: Intussusception is telescoping of a segment of gastrointestinal tract into adjacent one. It is uncommon in adults and its incidence is $5 \%$. Retrograde intussusception in adult is extremely rare and the incidence is $0.2 \%$. Adult intussusception contributes to only $1 \%$ of patients suffering from small bowel obstruction.

Method: During routine dissection, ileo-ileal retrograde intussusception was found about 15 cm proximal to ileo-ileal junction. The distal bowel was collapsed. The swelling was $6 \times 4 \mathrm{~cm}$ in size. The intussuscipiens was formed by thickened dilated loop of ileum. The intussusceptum which was the distal loop had entered the proximal loop in retrograde fashion. On opening the affected segment, the lead point appeared to be normal.

Discussion: Among adults idiopathic enteric intussusception appears to be more common. Retrograde ileo-ileal type is rare in adults and is often associated with 'lead point' that may cause abnormal motility. Diagnosis of intussusception in adults is challenging, owing to varied presenting symptoms and time course.

Result and conclusion: The intussusception that occurs in human beings is relatively found higher in infants than in adults. Reduction of intussusception on cadaver coined good visual impact on first year medical students. Intussusception though rare in adults, should be considered in differential diagnosis of abdominal pain.

Keywords: intussusception, intussusceptum, intussuscepiens, ileo-ileal, retrograde.

## Conflicts of interest

The authors have none to declare.
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## Absence of horizontal fissure of right lung: a case report

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Introduction: Right lung is heavier than the left lung. Normally right lung has one oblique fissure and one horizontal fissure and three lobes upper, middle and lower. It has both surgical and radiological importance. The fissures allows movement of lobes in relation to one another so that it can give space for greater distension during inspiration. During routine dissection in Department of Anatomy, Dr. S.N. Medical College, Jodhpur, we found the absence of horizontal fissure in right lung of male cadaver.

Case report: Anomaly was observed during routine dissection in the Department of Anatomy, Dr. S.N. Medical College, Jodhpur, in a male cadaver. Both lungs were observed. Photographs were taken.

Conclusion: Knowledge of variation of lung fissure may explain infrequent presentation of certain lung pathology. Anomaly of fissure and lobes are important for cardiothoracic surgeons performing lobectomies and segmental lung resection and also to radiologists for interpretation of X-rays, CT scans and MRI.

## Conflicts of interest

The authors have none to declare.
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## Acrocephalopolysyndactyly: a variant of apert crouzon syndrome

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Apert syndrome is a clinically distinct condition characterized by craniosynostosis, craniofacial anomalies and symmetrical syndactyly. Although apert syndrome is rare, it accounts for 4 to $5 \%$ of all cases of craniosynostosis. Prevalence is estimated at 1 in 65,000 live births. It is probably the most familiar and best-described type of acrocephalosyndactyly. It has no sex predilection. Apert syndrome is detected in the newborn period due to craniosynostosis and associated findings of syndactyly in the hands and feet.

30 yrs female, G3P3A1L0, third gravida at 30 weeks of gestational age came for antenatal ultrasonography checkup. USG revealed a single intrauterine live fetus with cephalic presentation. Anomalies detected on ultrasound: cranisynostosis, hypertelorism, proptopsis with exophthalmos, depressed nasal bridge, upper lip conical at philtrum, micrognathia, webbing of neck, narrow thorax but normal abdominal organs and limbs. The patient delivered a female baby weighing 2.9 kg who had multiple aforementioned congenital malformations. Because of absence of cardiac anomaly, abdominal anomaly and absence of polydactyly and syndactyly, this case is a variant of phenotypic expression of acrocephalopolysyndactyly syndrome which may fit in crouzon syndrome.

## Conflicts of interest

The authors have none to declare.
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## Accessory sulci and segmentation on the surface of the liver: a clinical pitfall

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Introduction: Diaphragmatic surface of liver is usually smooth but sometimes it is well marked by the sulci or indentations. Sometimes these sulci were so deep to be termed as fissures as they divide the lobe of liver into different segments. We report the case of accessory sulci along the anterosuperior surface of the right lobe associated with Reidel's lobe along the inferior border of the left lobe of same specimen. In another specimen, the sulci were so deep to be termed as fissures, which divides the caudate and quadrate lobe. Knowledge about the accessory sulci and lobes were necessary as they may appear as incidental finding during the laparoscopic examinations. Hence, it is very much promising to know about these sulci and lobes for hepatobiliary surgeons, anatomists and radiologists.

Observation/Result: During routine dissection classes conducted for first-year MBBS students in the Department of Anatomy, All India Institute of Medical Sciences, New Delhi, India, we encountered the presence of indentation or furrows on the anterosuperior surface of the right lobe of the liver in male cadaver aged 60 years and the division of caudate and quadrate lobe in female cadaver aged 55 years.

Discussion: Accessory lobe in present case report is Riedel's lobe in one of the cadaver, is clinically very important lobe resulting in misdiagnosis. Hence, it should always be considered in patients undergoing the cross-sectional studies. It may be a port of disease that might not be demonstrated until and unless the inferior border of the liver was examined.

## Conflicts of interest

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## Insular cortex: variation in pattern of gyri with interhemispheric difference

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Background and aims: Variations in the morphological pattern of gyri of insular cortex is very common. Usually insular cortex represents 5 to 7 gyri, sometimes with bifid/trifid or hypoplastic gyrus. During the routine thesis related dissection we got a rare variant having hypoplastic gyrus on right side and trifid gyrus on left side.

Materials and methods: The study includes 20 formalin fixed human cadaveric brains ( 40 cerebral hemispheres) in the Anatomy Department, Gandhi Medical College, Bhopal. Measurements were
taken with the help of digital vernier caliper (in mm with 2 decimal), thread, artery forceps. We measured the insular cortex peripheral sulci (anterior, posterior, superior, inferior) and central insular sulci. Then all 7 gyri-tranverse gyrus (TG), accessory (ACG), anterior short gyrus (ASG), middle short gyrus (MSG), posterior short gyrus (PSG), anterior long gyrus (ALG), posterior long gyrus (PLG) lengths and pattern (absent gyrus, bifid, trifid, hypoplastic) were studied and recorded.

Results: common variant with all 7 gyri on both sides. The rare variant represents with hypoplastic MSG on right side and bifid ASG on both side and trifid PSG in left side cerebral hemisphere.

Conclusion: The insula shows unique pattern in every individual, having significant interhemispheric variation and it is also declared morphologically most variable structure of brain with great clinical and neurosurgical significance. Trans insular and trans sylvian approach is very common in neurosurgical assess and it is essential to highlight every variable and interhemispheric difference as we studied through our neuroanatomical parameters observational records.

## Conflicts of interest

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## Anomalous branching pattern from aortic arch: a case report

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Increasing in the fields of cardiac and vascular surgery has served to revive interest in the developmental and adult anatomy of the aortic arches and the great vessels derived from the area. Under normal circumstances, three branches originate from the aortic arch: the brachiocephalic trunk, left common carotid artery, and left subclavian artery, in about $80 \%$ of individuals. Branches originating from the aortic arch may show different configurations. As far as the branches of the aortic arch are concerned, there are numerous possible variations in the origins of these branches. The anatomic and morphologic variations of the aortic arch branches are important for diagnostic. The knowledge of the branching pattern of aortic arch is important during supra-aortic angiography, aortic instrumentation, thoracic and neck surgery. The purpose of this study is to describe different branching patterns of arch of aorta in order to offer useful data to anatomists, radiologists, vascular surgeons doing surgical procedures in the head and neck region while relating it to the embryological basis.

In the present study, left internal carotid artery, left external carotid artery and left subclavian artery had an aberrant origin, however, the anatomical courses of these arteries were found normal. Details will be discussed in full length paper.

An abnormal origin of the left common carotid artery from the initial portion of the brachiocephalic trunk was found in the superior mediastinum in a 81 -year-old Caucasian male cadaver during dissection practice. We report on the exact morphology of that variant that is appeared in an incidence of $0.2 \%$ in the literature. We discuss the relative literature and pay attention on the significance of such a variation for clinicians in its recognition and protection.

Keywords: developmental anatomy, variations, vascular surgery.

