the Left axillary artery which anastomosed with anterior circumflex artery and also an extra branch from posterior circumflex artery was observed.

Conflicts of interest

The authors have none to declare.

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Supratrochlear foramen of humerus bone – an incidental finding

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Introduction: The lower end of the humerus has two large fossae, the olecranon fossa and the coronoid fossa, separated by a thin bony plate that rarely bears an opening known as supratrochlear foramen.

Aim and objectives: This is a rare variant and was seen incidentally. So study was taken up to research this rare variant.

Material and methods: During osteology demonstration classes for undergraduate students a rare variant was observed. This made us search the literature and we investigated on this. 120 dry adult humeri of unknown age and sex were taken for the study from the Department of Anatomy, Narayana Medical College, Nellore. The presence and the shapes of the STF were visualizes by observational study. The length, transverse diameter of the foramen was also observed and also the septum was made out. The results were tabulated and photographed.

Results: The foramina were more common on the right side than the left side and also the oval shape was more commonly observed.

Conclusion: This foramen can alter the radiological findings during examination and may get misdiagnosed as osteolytic lesion or cystic lesion. Supratrochlear foramen can alter the line of fracture as it is linked with a small medullary canal, which can modify our decision of point of entry of the nail in the medullary nailing procedure. Therefore, its clinical importance cannot be ignored.

Conflicts of interest

The author has none to declare.

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Accessory slip of coracobrachialis – a case report

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Objective: To explore a case of accessory slip of coracobrachialis observed during routine dissection.

Methods: Routine dissection of right upper limb of a 55 years old male cadaver in Anatomy Department of RIMS, Imphal.

Results: Accessory slip in addition to the main bulk of the coracobrachialis muscle was found to be arising from the tip of the coracoid process of scapula and inserted in the distal part of the lesser tubercle of the humerus in addition to its normal insertion at medial border of the middle of the shaft of humerus. The median nerve and brachial artery was found to be passing deep to the accessory slip.

Conclusion: The neurovascular bundle passing below the accessory slip may be compressed due to anomalous insertion producing vascular spasm and median nerve palsy. Knowledge of the anatomical variation is important for radiologists.

Conflicts of interest

The authors have none to declare.

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Undescended cecum with accessory right colic artery – a rare case report

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Introduction: Midgut malrotation and incomplete rotation are common causes of neonatal intestinal obstruction. At end of tenth week of intrauterine life, cecum is placed in subhepatic region temporarily and descends to right lower quadrant by eleventh week. Arrest of cecum in subhepatic region or undescended cecum is a rare congenital anomaly of mid gut. Usually it remains asymptomatic and is diagnosed incidentally. If any pathology occurs in anomalous part, like appendicitis then the diagnosis and treatment will be challenging in all age groups.

Materials and methods: During routine first year under graduate dissection, we found a rare developmental anomaly of undescended cecum in a male cadaver aged 60 years while demonstrating infracolic compartment.

Results: Conical cecum in sub hepatic region measuring 4×3.5 cm was found. Appendix arising from the tip of cecum was located in 12'o clock position measuring 11.5 cm with 'U' shaped bend at its tip. Variation in blood supply have also been reported which can lead to iatrogenic injuries during colonoscopy and surgeries.

Conclusion: Lack of knowledge of these rare variations may lead to delayed diagnosis of appendicitis leading to perforation and surgical emergencies. In the present case, we describe an undescended cecum and its associated variation in branching pattern of superior mesenteric artery.

Keywords: subhepatic, cecum, appendicitis, right colic artery.

Conflicts of interest

The authors have none to declare.

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High bifurcation of brachial artery – a case report

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Introduction: Variations in the vascular pattern of the upper limb are common in Indian population. Brachial artery is a con-

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 × 4 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.