

Conflicts of interest

The authors have none to declare.

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Study of an accessory mandibular foramen on the medial surface of mandibular ramus

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Objective: To study an accessory mandibular foramen on the medial surface of the ramus of mandible and determine its location from nearby anatomical landmarks.

Methods: An accessory mandibular foramen was observed on the medial surface of the left ramus of a mandible used for teaching osteology to first year MBBS students. Its distance was measured from nearby anatomical landmarks using digital Vernier Calipers. Metallic wires were introduced into the main and accessory mandibular foramina and radiographs were taken.

Results: The accessory mandibular foramen was found to be at a distance of 12.05 mm from the mandibular notch, 26.16 mm from the angle of mandible and 16.93 mm from the fully erupted third molar. The radiograph revealed that the accessory mandibular foramen led into a canal that terminated close to the third molar.

Conclusion: The knowledge of accessory mandibular foramina will be helpful for dental surgeons performing nerve block and radiotherapists in planning radiotherapy for tumors of the lower jaw.

Conflicts of interest

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A cadaveric case report on bilateral duplication of diaphragmatic crura

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Usually, the right crus of the diaphragm attaches onto the upper three lumbar vertebrae and the left crus attaches onto the upper two lumbar vertebrae. In the present case, bilateral duplication of the diaphragmatic crura was noted. The right crus duplicated into a right medial crus and a right lateral crus, separated by a right retrocrural space. The right medial crus attached to the upper three lumbar vertebrae and the right lateral crus attached to the fifth lumbar vertebra. The left crus also duplicated into a left medial crus and a left lateral crus, separated by a left retrocrural space. The left medial crus attached to the upper two lumbar vertebrae and the left lateral crus attached to the fifth lumbar vertebra. The splanchnic nerves passed through both the retrocrural spaces. A thorough knowledge of crural variations is necessary for the physicians and surgeons for surgical interventions in this region.

Keywords: bilateral, crura, diaphragm, lumbar vertebrae, retrocrural space.

Conflicts of interest

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A giant ureteric stone led dilated right ureter and severe hydronephrosis – a cadaveric case report

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Introduction: Ureter is a long muscular tube that conveys urine from the kidney to the urinary bladder. It shows five/three natural constrictions in its course, and these are the potential site for the impaction of the renal calculus. The stones below the size of 10 mm flush out automatically, and larger than 10 mm diameter often fail to pass. They are referred as the giant ureteral stones and associated with insidious growth and late presentation, often leading to renal failure.

Case report: During routine anatomical dissection for the undergraduate medical students in the Department of Anatomy, Kasturba Medical College, Manipal, India, we encountered an extremely rare condition in the right ureter of a 58-year-old male cadaver. In the present case we observed a huge ureteric stone obstructing the right ureterovesical junction. We also observed gross hydroureter distal to the impaction of the calculus, renal damage and severe hydronephrosis on the right side. Histological analysis showed conditions of arterio-nephro-sclerosis and eroded ureter secondary to the calculus.

Conclusion: As ureteric stones obstruction may result in hydroureter, hydronephrosis and progressive renal damage leading to irreversible renal function, impairment and complete loss of kidney function, clinicians should be equipped with the knowledge of preventive strategies to educate patients with previous calculi, or those that are susceptible to development.

Conflicts of interest

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Variation in the branching pattern of axillary artery

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A variation in the branching pattern of axillary artery was noted in a adult female cadaver, 60 years of age during routine dissection in both the upper limbs. First and second part of axillary artery had normal branching pattern in both limbs. Variation in branching was observed in third part in both limbs. Anterior and posterior circumflex artery branched from a common trunk and an additional branch was given by both anterior and posterior circumflex artery on right side. On left side anterior and posterior circumflex artery branched from a common trunk. An additional branch was observed from

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 visualized 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

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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

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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-