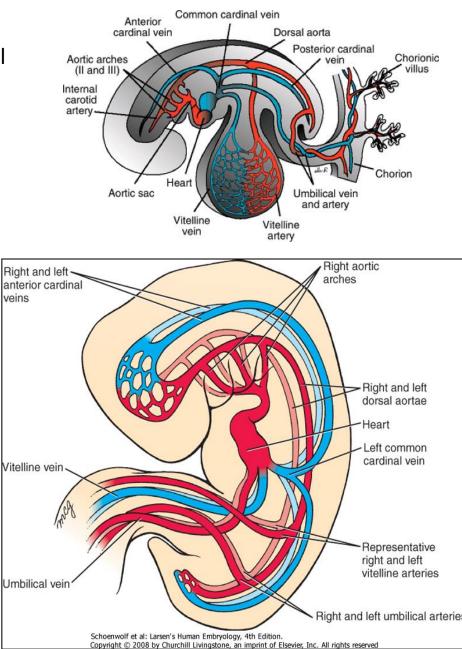
### **Development of the Vascular system**



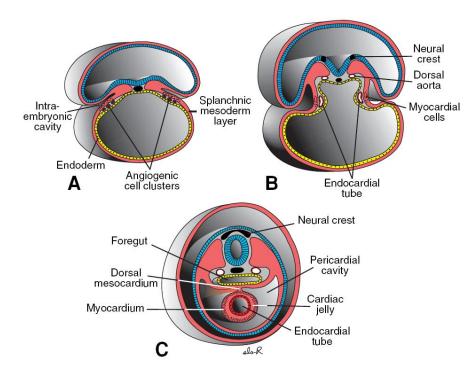
## **Heart-Vasculature connections**

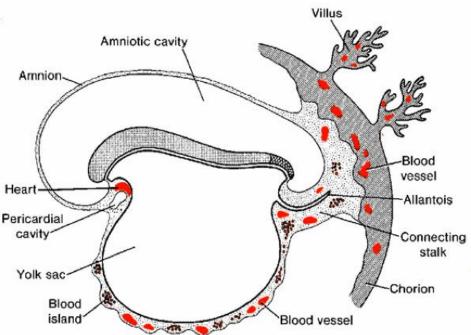
- major vessels develop at same time as endocardial tube
- Inflow (right and left sinus horns)
  - 3 paired vessels
    - common cardinal veins
    - vitelline veins
    - umbilical veins
- Outflow
- Three pairs of aortic arch arteries and the paired dorsal aortae that circulate blood to the head and trunk



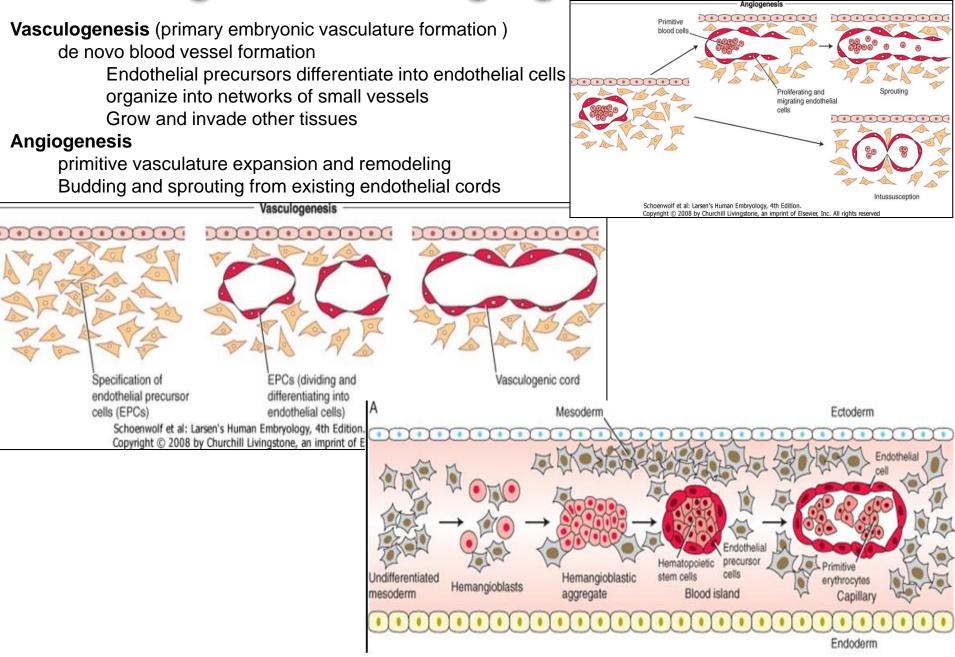
#### Vasculature Development

- Extraembryonic vasculature
- From 17<sup>th</sup> day
  - splanchnic mesoderm of yolk sac
    - hemangioblastic aggregates
      - Primitive hematopoietic stem cells
      - endothelial precursor cells
- Intraembryonic vasculature
- On day 18
  - splanchnic mesoderm of embryonic disc
  - later in paraxial mesoderm





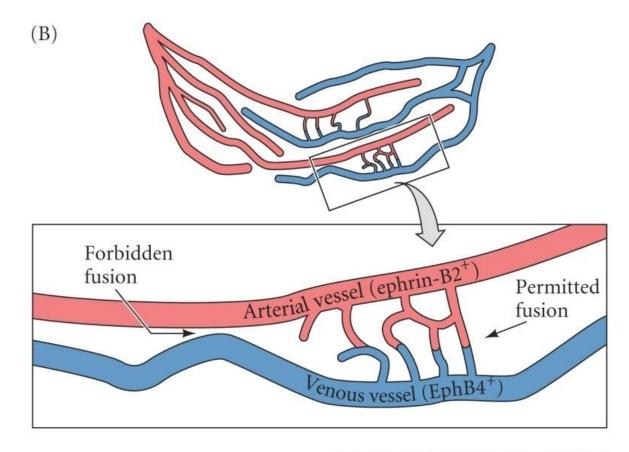
## Vasculogenesis & Angiogenesis



## Arteries and veins differences

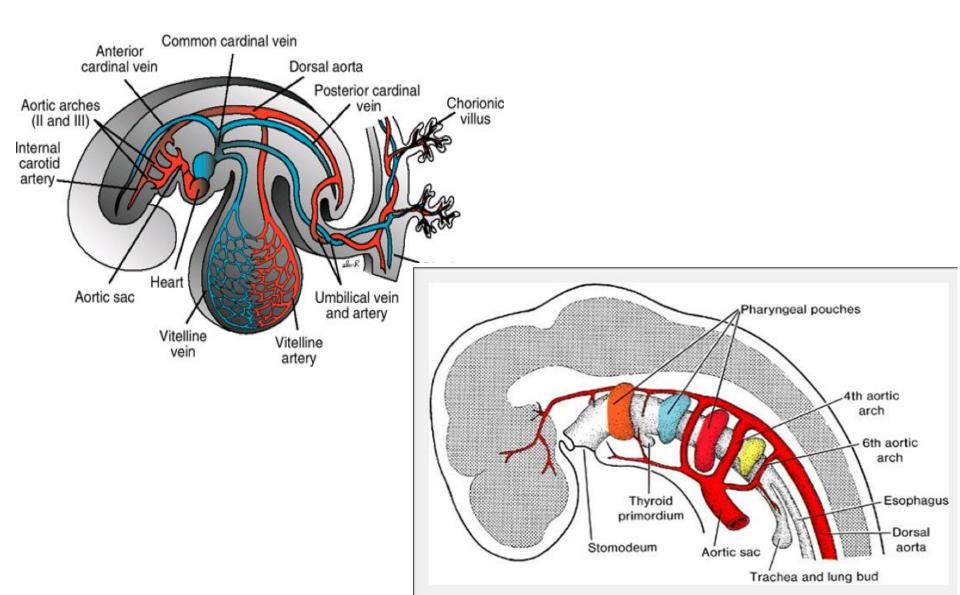
differences in directions of blood flow, morphology and physiology

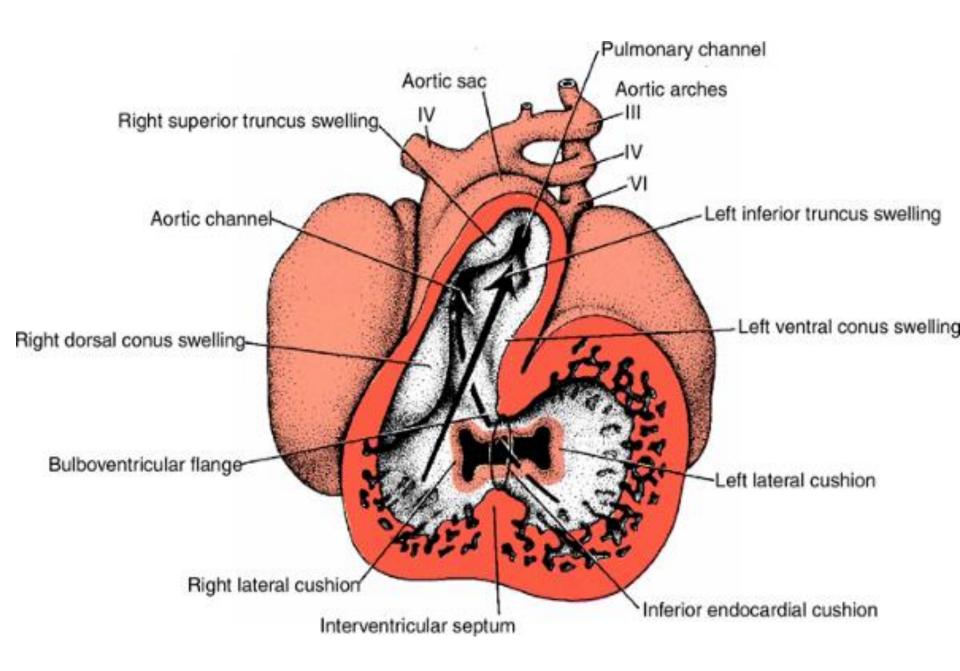
- Flow dynamics in capillary-sized vessels
  - Flow increases (arterial vessels)
  - Floe decreases (venous vessels)



#### **Development of Aortic Arches**

4th and 5th weeks





## Aortic Arches (1, 2, 3)

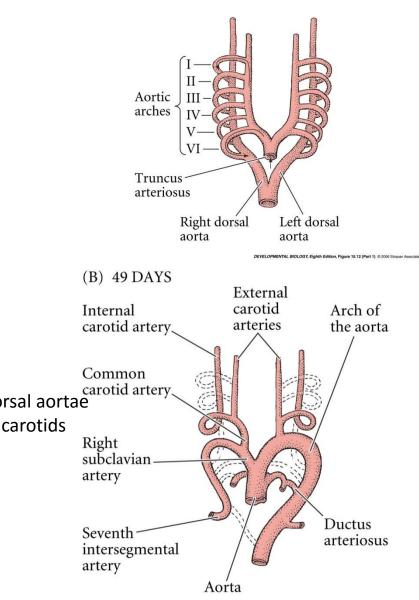
- First aortic arches
  - portions of maxillary arteries

#### second aortic arches

part of the hyoid and stapedial arteries

#### third aortic arches

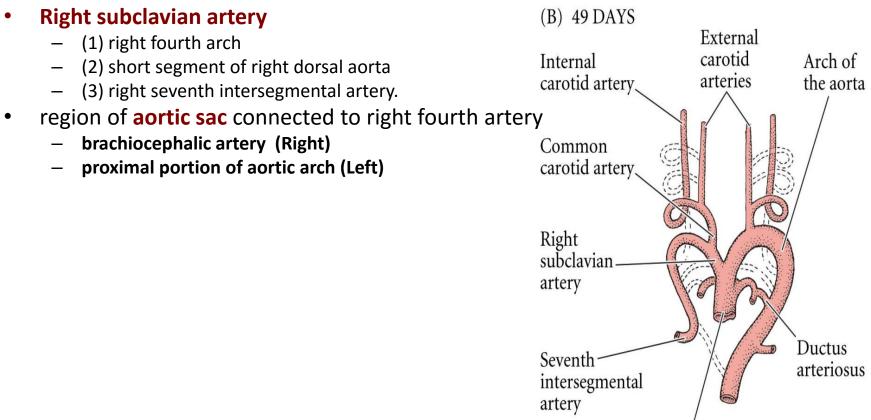
- common carotid arteries
- proximal portion of internal carotid arteries
  - distal portion derived from cranial extensions of dorsal aortae
  - external carotid arteries sprout from the common carotids



DEVELOPMENTAL BIOLOGY, Eighth Edition, Figure 15.12 (Part 2) © 2006 S

## Aortic Arches (Right 4<sup>th</sup>)

#### By the 7th week

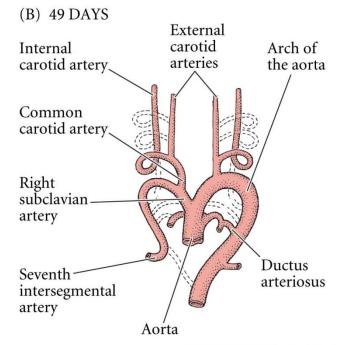


Aorta

### Aortic Arches (Left 4<sup>th</sup>)

- Left fourth aortic arch + small segment of aortic sac
  - aortic arch
  - most cranial portion of descending aorta
- Left seventh intersegmental artery
  - left subclavian artery

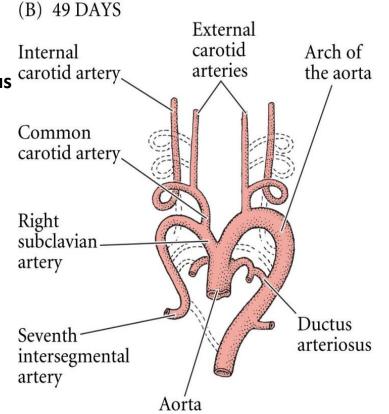
segments of dorsal aorta connecting 3<sup>rd</sup> and 4<sup>th</sup> arch (carotid duct) disappear



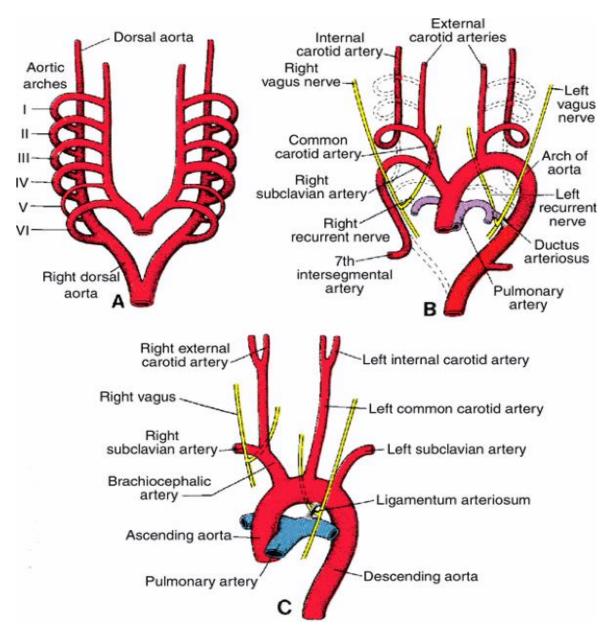
## Aortic Arches (6)

#### **Right and left 6th arches** arise from proximal end of aortic sac

- By the 7th week
  - Right 6<sup>th</sup> arch
    - disappears distal connection with dorsal aorta
    - Right pulmonary artery
  - Left sixth arch
    - remains complete
      - distal portion forms ductus arteriosus <sup>c</sup>
        - » ligamentum arteriosum
        - » left pulmonary artery

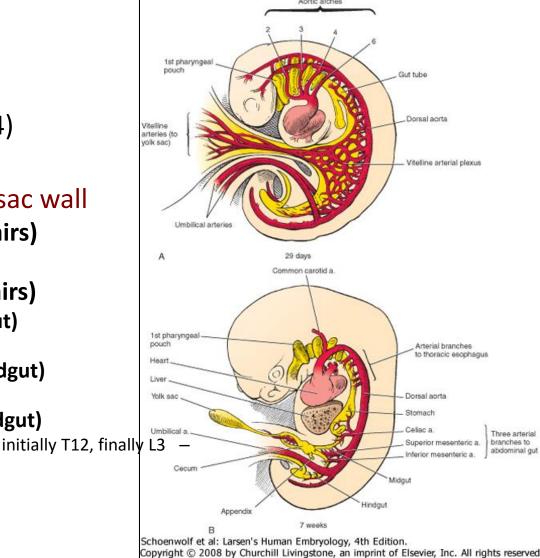


- Left and right recurrent laryngeal nerves
- Originally arise below the level of 6<sup>th</sup> arch



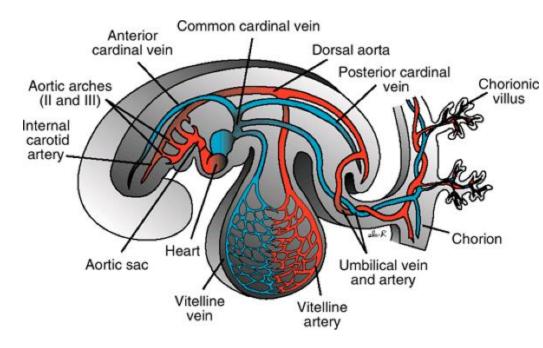
## Dorsal Aorta and ventral Branches

- Dorsal aorta
- Left dorsal aorta
- Merged left & right aorta (T4-L4)
- vitelline system
- blood vessels arising from yolk sac wall
  - Cranial to the diaphragm (5 pairs)
    - supply thoracic esophagus
  - Caudal to the diaphragm (3 pairs)
    - celiac artery (abdominal foregut)
      - initially at C7, finally at T12
    - superior mesenteric artery (midgut)
      - Initially T2, finally L1
    - inferior mesenteric artery (hindgut)



## **Dorsal Aorta and umbilical arteries**

- **umbilical arteries** develop in connecting stalk early in the 4th week (earliest embryonic arteries to arise)
  - initially connected with paired dorsal aorta
  - secondary connected with branch of dorsal aorta (common iliac artery)
- After birth
  - proximal portions of umbilical arteries
    - Internal iliac
    - superior vesical arteries
  - distal parts obliterated
    - medial umbilical ligaments



# Embryonic venous system

- Initial bilaterally symmetric System
  - vitelline system
    - Drains gastrointestinal tract and derivatives
  - umbilical system
    - carries oxygenated blood from the placenta

eft thymic

Truncus

arteriosus-

Presumptive

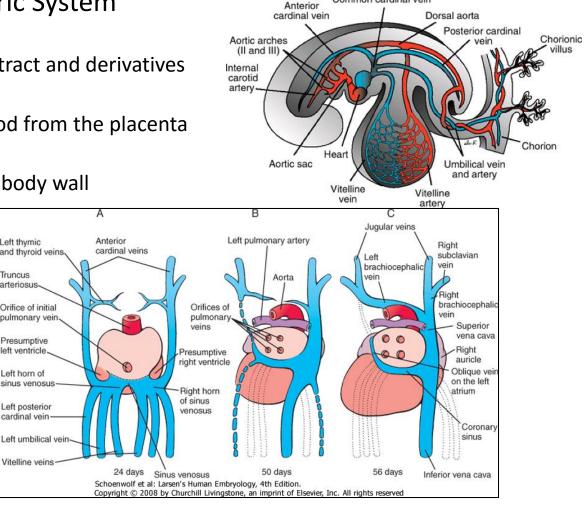
eft ventricle

Left horn of

Left posterior

cardinal vein

- cardinal system
  - Drains head, neck, and body wall ٠



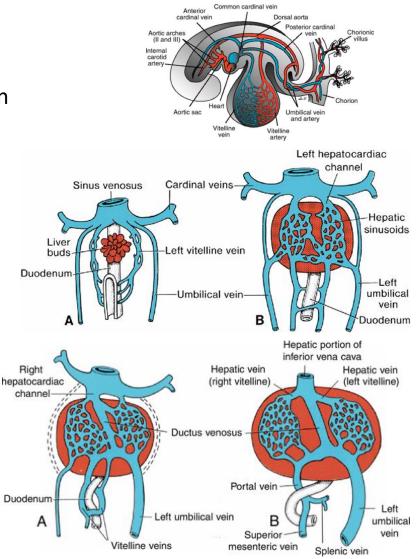
Common cardinal vein

shift of systemic venous to right atrium remodeled to adult patterns

## Vitelline Veins

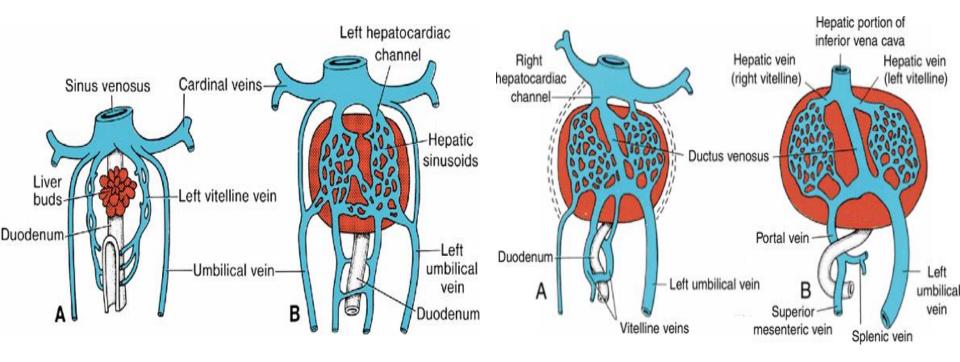
#### Gives Rise to Liver Sinusoids, Portal System, and a Portion of Inferior Vena Cava

- vitelline plexuses in septum transversum
  - surrounded by growing liver cords
    - liver sinusoids
    - Ductus venosus
- left vitelline vein diminishes by sinus horn regression
- Right vitelline vein
  - cranial portion (between liver and heart)
    - hepatocardiac portion of inferior vena cava
  - Segment caudal to developing liver and anastomoses
    - portal system
      - portal vein
      - superior mesenteric vein



#### **Umbilical Veins**

- During second month
  - right umbilical vein completely obliterated
  - left umbilical vein persists
    - Left umbilical vein: ligamentum teres hepatic
    - dactus venosus: ligamentum venosum



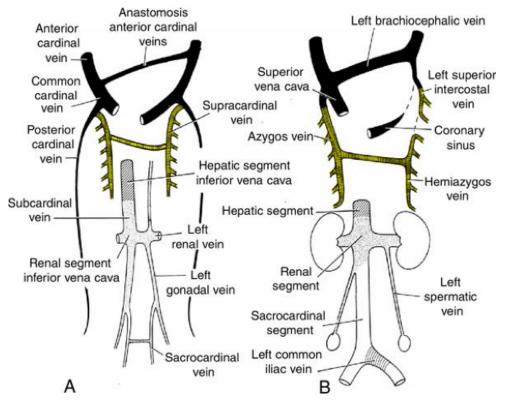
## **Cardinal Veins**

During 4<sup>th</sup> week

Anterior, posterior and common cardinals

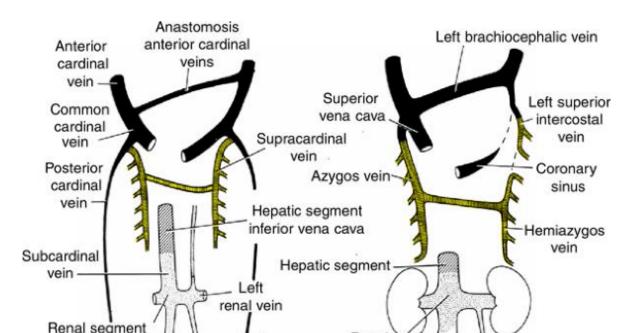
During 5-7th week

- subcardinal veins
  - sprout from base of posterior cardinals (end of 6<sup>th</sup> week)
  - mainly drain kidneys
- supracardinal veins
  - Drain body wall via intercostal veins



## **Anterior cardinal veins**

- cranial portions of anterior cardinal veins
  - internal jugular veins
- external jugular veins
  - capillary plexuses in face become connected Internal jugular veins
- anastomosis between the anterior cardinal veins
  - left brachiocephalic vein
- superior vena cava
  - right common cardinal vein
  - proximal portion of right anterior cardinal vein

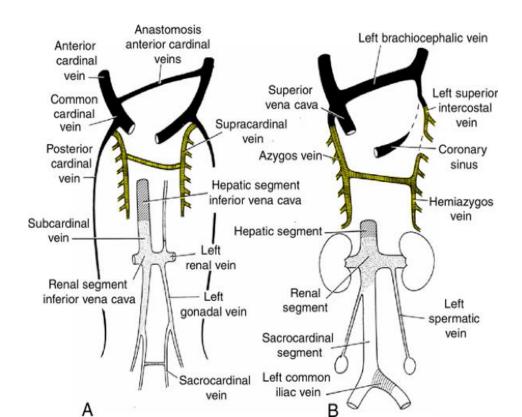


### **Posterior cardinal veins**

- become obliterated over most of their length ۲
- proximal portion of left posterior cardinal vein
  - entering into the left brachiocephalic vein

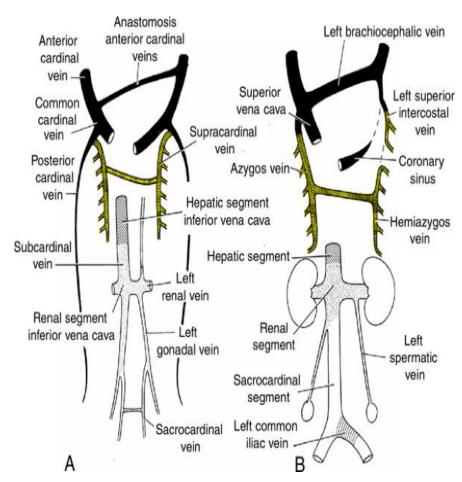
    - left superior intercostal vein

       receives blood from 2 an 3<sup>rd</sup> intercostal spaces.
- most caudal portions of posterior cardinals (Sacrocardinal) ۲
- (including a large median anastomosis)
  - Form new anastomosis with supracardinal veins
    - common iliac veins
    - caudalmost (sacral portion) of IVC



### **Subcardinal veins**

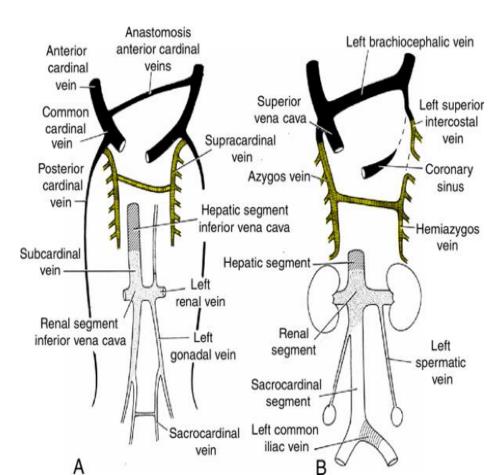
- By 7-8<sup>th</sup> weeks sprout from base of posterior cardinals
- subcardinal veins
  - lateral anastomoses
    - with posterior cardinals
  - median anastomoses
    - left renal vein
- by the 9th week
- left subcardinal vein
  - Regress
    - distal portion remains as left gonadal vein
- right subcardinal vein
  - loses its original connection
  - develops a new anastomosis with segment of right vitelline vein
    - renal segment of the inferior vena cava



#### **Supracardinal veins**

with obliteration of major portion of posterior cardinal veins

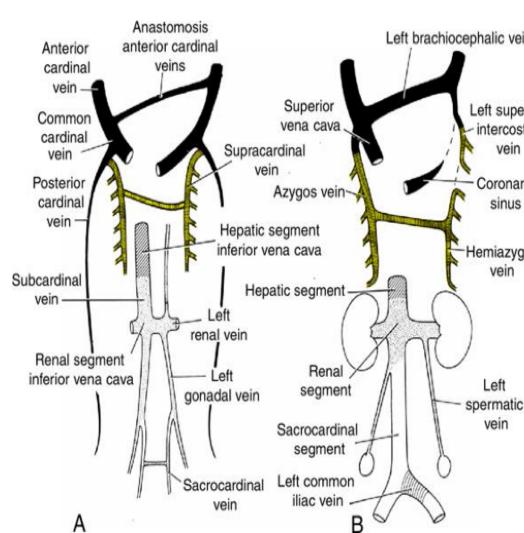
- supracardinal veins assume a greater role in draining the body wall (segmental intercostal veins)
- The veins sprout from base of posterior cardinals
- right supracardinal vein
  - Cranial portion
    - 4th to 11th right intercostal veins
      - Main portion of azygos vein
  - abdominal portion
    - anastomoses with right subcardinal vein
      - segment of IVC just inferior to kidneys
- azygos vein
  - right supracardinal vein
  - portion of posterior cardinal vein
- left supracardinal vein
  - 4th to 7th intercostal veins
    - hemiazygos vein
- inferior portion obliterated



#### Sacrocardinal

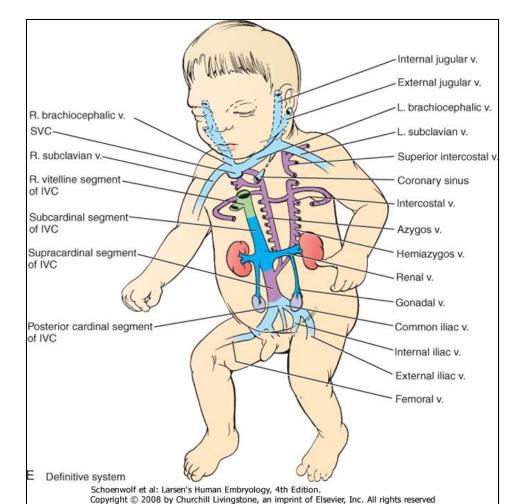
#### (caudal segment of post. Cardinal) veins

- their anastomosis
  - left common iliac vein
- Left sacrocardinal vein
  - Cranial portion
    - Regress
- right sacrocardinal vein
  - Cranial portion
    - sacrocardinal segment of inferior vena cava
  - Caudal portion
    - Right common iliac vein



### **Inferior Vena Cava**

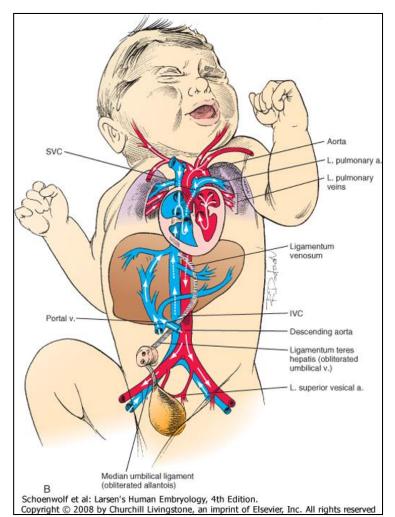
- (1) right vitelline vein
- (2) right subcardinal vein
- (3) right supracardinal vein
- (4) caudal portions of posterior cardinals



# **Circulatory Changes at Birth**

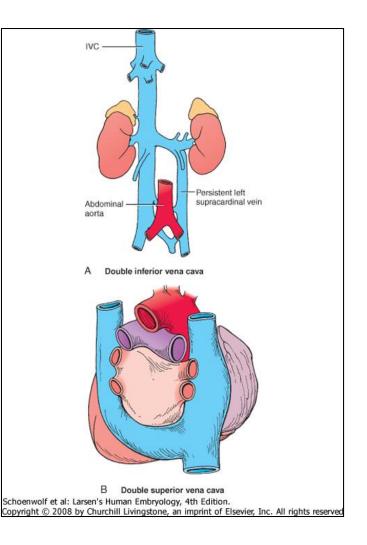
by cessation of placental blood flow and the beginning of respiration

- Closure of umbilical arteries
  - medial umbilical ligaments
  - proximal portions
    - superior vesical arteries
- Closure of umbilical vein
  - ligamentum teres hepatis
- Closure of ductus venosus
  - ligamentum venosum.
- Closure of ductus arteriosus
  - ligamentum arteriosum
- Closure of oval foramen



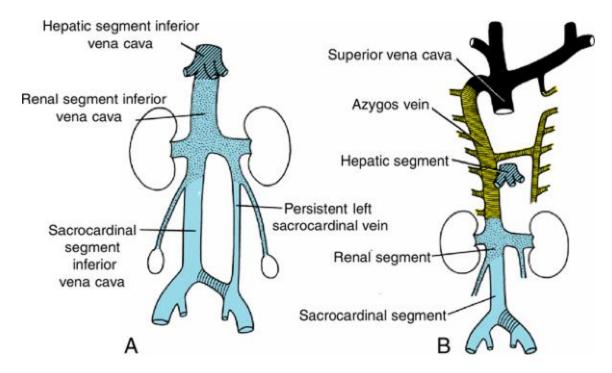
## Venous System Defects

- A, double inferior vena cava •
- Preservation of left supracardinal vein
  - B, double superior vena cava
  - Preservation of left anterior cardinal -
- left superior vena cava empties into coronary sinus •



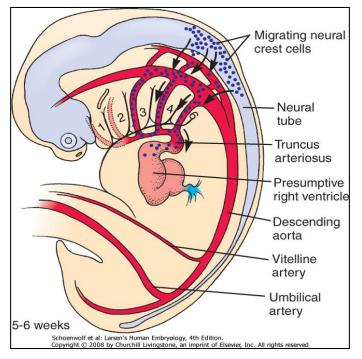
# Venous System Defects

- Double inferior vena cava •
- Preservation of left sacrocardinal vein
  - Absent inferior vena cava •
- lower half of body drained by azygos vein
  - hepatic vein enters heart at site of IVC -

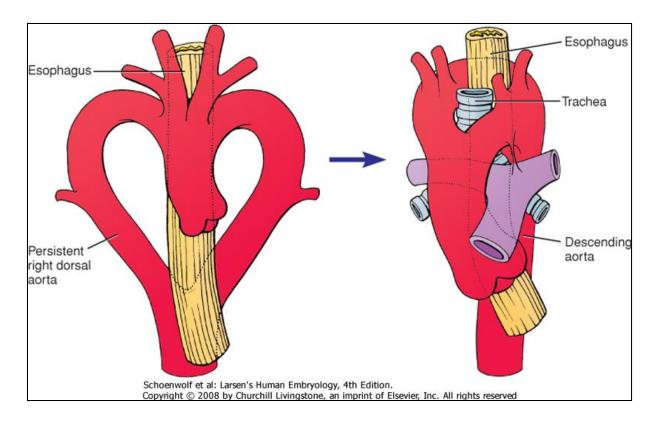


## **Endocardial Cushions and Heart Defects**

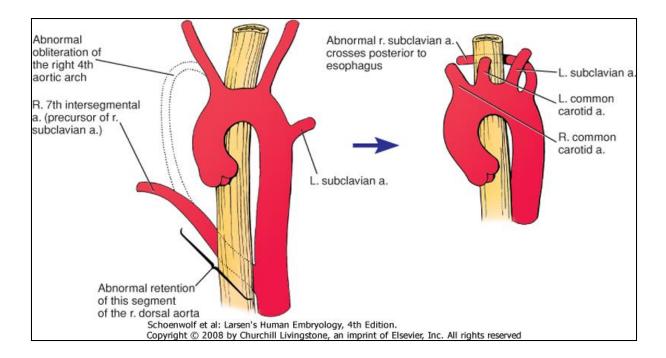
- Atrial, ventricular septal and great vessels
   defects
  - **DiGeorge sequence** •
  - abnormal neural crest development.
    - facial defects •
    - thymic hypoplasia •
    - parathyroid dysfunction
      - cardiac abnormalities
         outflow tract –



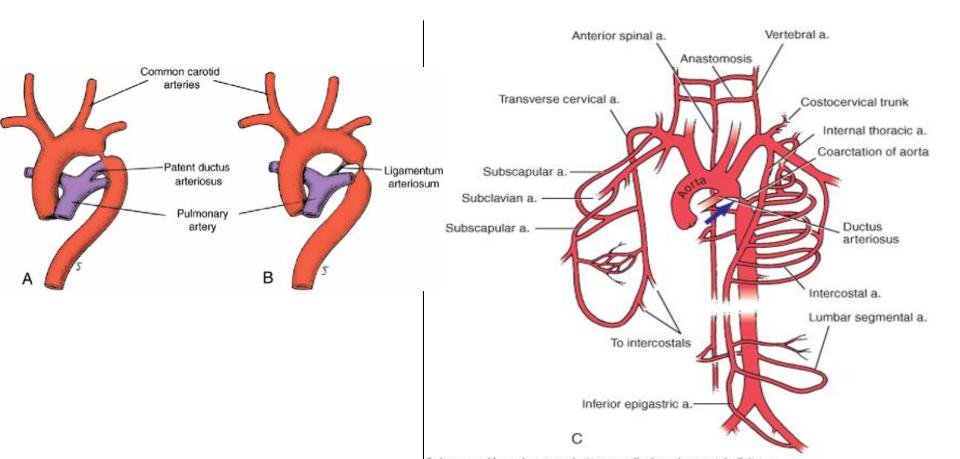
- double aortic arch •
- failure of right dorsal aorta regression -
- esophagus and trachea enclosed in double arch -



- right subclavian artery anomalous •
- Retention of right dorsal aorta at level of 7<sup>th</sup> intersegmental artery
  - abnormal regression of right 4<sup>th</sup> aortic arch –



- Coarctation of the aorta
  - A. Preductal type –
  - **B.** Postductal type –
- caudal part of body supplied by large internal thoracic and intercostal arteries •



#### Right aortic arch •

