

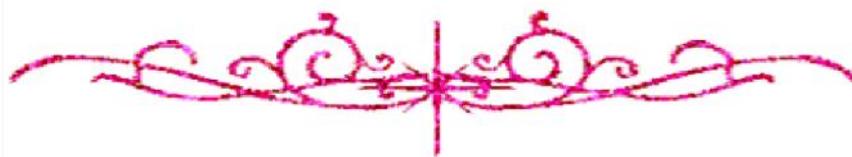
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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

مركز الشبكات وتكنولوجيا المعلومات

قسم التوثيق الإلكتروني



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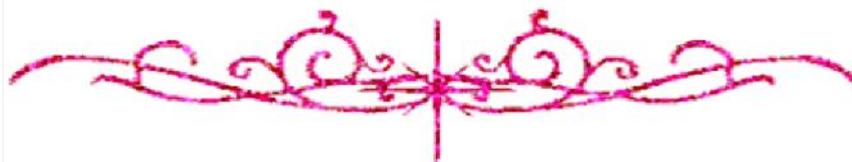
جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها

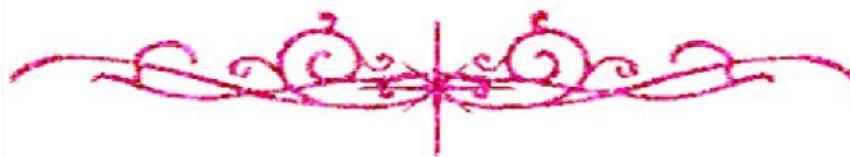
علي هذه الأقراص المدمجة قد أعدت دون أية تغييرات



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**بعض الوثائق الأصلية تالفة
وبالرسالة صفحات لم ترد بالأصل**



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

سُبْحَانَكَ

لَا عِلْمَ لَنَا إِلَّا بِمَا عَلَّمْتَنَا إِنَّكَ

أَنْتَ الْعَلِيمُ الْحَكِيمُ

صدق الله العظيم

CHEMICAL, CYTOLOGICAL AND
BACTERIOLOGICAL STUDY OF DRAINED
FLUID AFTER PATEY'S MASTECTOMY
USING TWO DIFFERENT WAYS OF
DRAINAGE

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By

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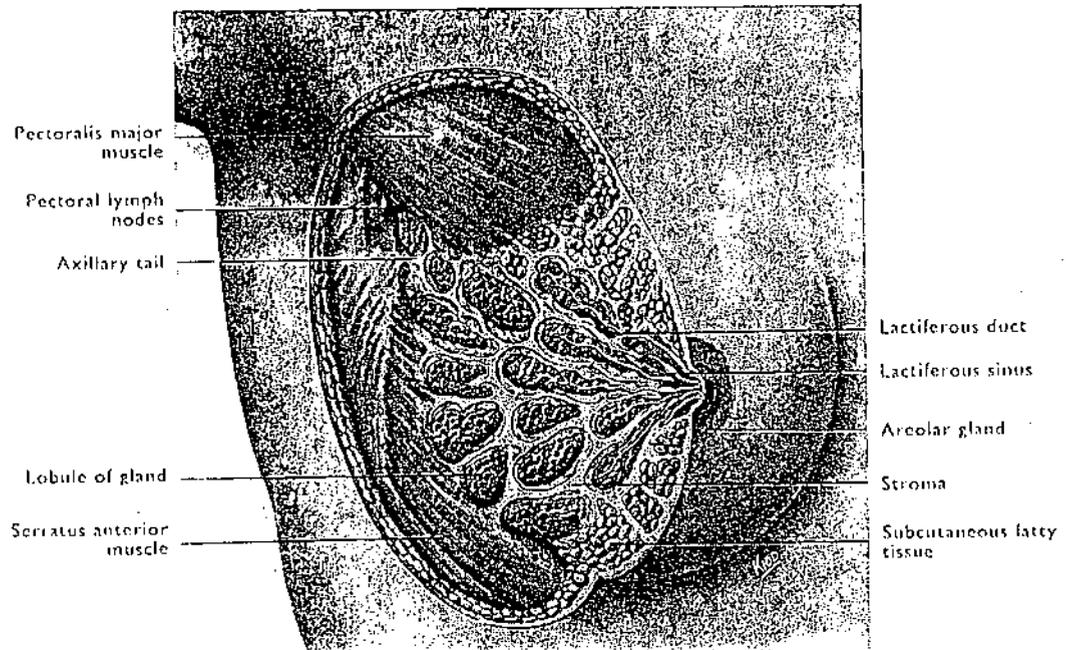
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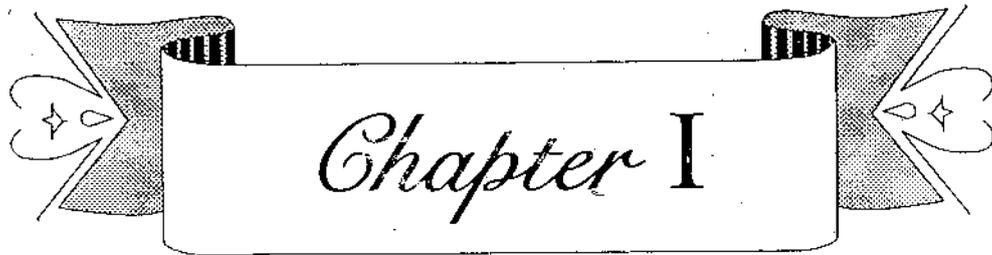
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Dissection of the right mammary gland.



INTRODUCTION



Introduction

Breast cancer is the commonest cause of death in middle-aged women in Western countries and affects half a million women world wide each year. In 1985, 719,000 new cases were diagnosed world wide. In England and Wales 1 in 12 women will develop the disease during their lifetime, although there is evidence that the incidence of the disease has declined somewhat in the last decade. It occurs more commonly in women with a family history of breast cancer than in general population.^(1,2)

Genetic linkage analysis studies have now revealed that an abnormality frequently exists in the short arm of chromosome 17 in these women with a family history of early onset breast cancer.⁽³⁾

Also, breast cancer is commoner in nulliparous women, and breast feeding is particularly protective. It is known that in post-menopausal women, breast cancer is more common in the obese.⁽⁵⁾

Anatomy of Mammary gland :

The breast is formed of modified sebaceous gland. So, it lies in the superficial fascia, it starts by acini → lobules → lobes (about 20 lobes arranged in a radiating fashion that converge to the nipple). Each lobe terminates by a lactiferous duct (20 ducts open into the nipple). The roundness of breast is due to the fat filling the gaps between lobules.

At puberty in the females, the mammary glands gradually enlarge and assume their hemispherical shape. The ducts elongate, but the increase in size of the gland is due to increase the deposition of fat.

The base of the breast extends from the 2nd to 6th rib and from the lateral margin of the sternum to the mid-axillary line. The greater part of the gland lies in the superficial fascia, and a small part called axillary tail, extends upward and laterally pierce the deep fascia at the lower border of Pectoralis Major muscles and come into close relationship with axillary vessels. Each mammary gland consists of 15-20 lobes which radiates out of the nipple. The main duct from each lobe opens separately on the summit of the nipple and passes a dilated ampulla just prior to its termination. The base of the nipple is surrounded by circular area of pigmented skin, called Areola. Tiny tubercles on the areola are produced by the underlying areolar glands.

The lobes of the glands are separated by fibrous septa, which extends from the dermis of the skin to the underlying deep fascia in front of the pectoralis major muscles. ⁽⁸⁾

Anatomy of Axilla :

It is a pyramidal shaped space between the upper part of the arm and the side of chest. The upper end (apex) is directed into the root of the neck and is bounded in front by the clavicle, behind by upper border of scapula and medially by outer border of 1st rib.

The lower end (base) is bounded in front by the anterior axillary fold, behind by the posterior axillary fold and medially by chest wall.

The wall of the axilla are made up as follow:

Anterior wall: by pectoralis major, subclavius and pectoralis minor muscle, the clavipectoral fascia and the suspensory ligament of the axilla.

Posterior wall: by subscapularis, latissimus dorsi and teres major muscles from above down.

Medial wall: by the upper four or five ribs and the intercostal spaces covered by serratus anterior muscles.

Lateral wall: by coracobrachialis and biceps muscle.

The Base: is formed by skin stretched between the anterior and posterior walls.

The Axilla contains the principle veins and nerves to the upper limb and many lymph nodes.

Contents of the axilla :⁽³⁾

1. Axillary artery:

Begin at the lateral border of the 1st rib as a continuation of the subclavian and end at the lower border of the teres major muscle, where it continues as brachial artery. Through out its course, it is related to the cords of the brachial plexus and their branches and enclosed with them in connective tissue sheath called Axillary Sheath. If this sheath is traced upwards into the root of the neck, it is seen to be continuous with the prevertebral fascia.

2. Axillary vein :

The axillary vein is formed in the region of the lower border of teres major muscle by the union of the venae comitantes of the brachial artery and the basilic vein. It runs upwards on the medial side of the axillary artery and end at the lateral border of the 1st rib by becoming the subclavian vein. The vein tributaries which corresponding to the branches of axillary artery and it receive the cephalic vein.