

# **Gross Anatomy of Kidney - II**

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# Recap

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**⌘ In the previous class we discussed**

- ☑ location,**
- ☑ extent,**
- ☑ parts & external features,**
- ☑ relations and**
- ☑ coverings**
- ☑ supports of the kidney**

**To continue further.....**

# Learning objectives

**At the end of today's teaching session all the students should be able to**

- ✚ Describe the internal macrostructure of the kidney**
- ✚ Define the lobe and lobule of the kidney.**
- ✚ Name the artery the supplies the kidneys.**
- ✚ Name the vascular segments of the kidney.**
- ✚ Write a short note on renal circulation.**
- ✚ Name the lymph nodes which drain the lymphatics from kidney**
- ✚ Write a short note on nerve supply of kidneys.**

# Gross Internal features in Coronal section

## ✿ 2 parts –

- **Renal Substance –**
  - Outer Cortex – pale looking
  - Inner Medulla – darker, striated
- **Renal Sinus –**
  - Cavity within the kidney
  - Communicates with hilum
  - Lined by true capsule

**Renal Sinus Contains:**

**Pelvicalyceal system, renal vessels, nerves & lymphatics, perinepric fat**



# Renal cortex

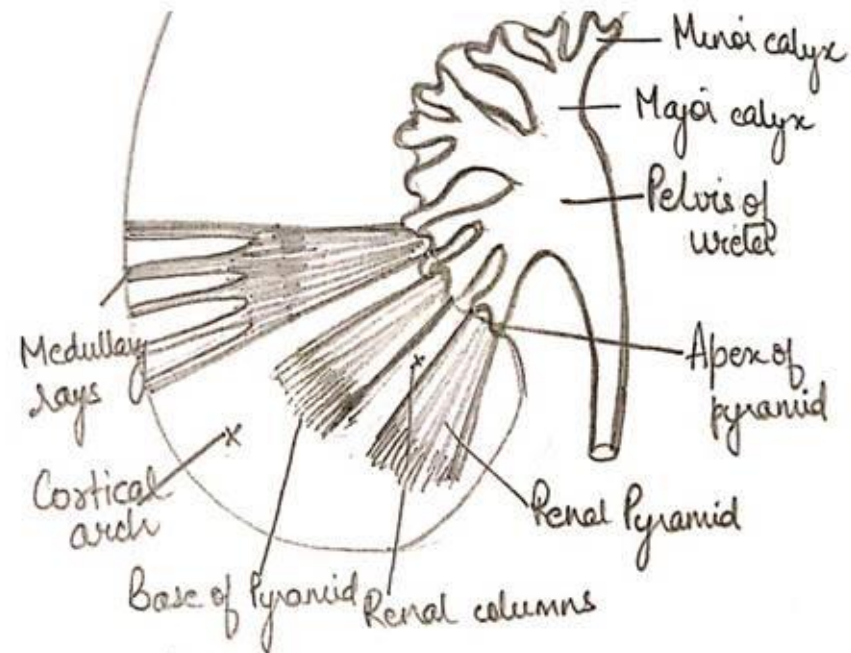
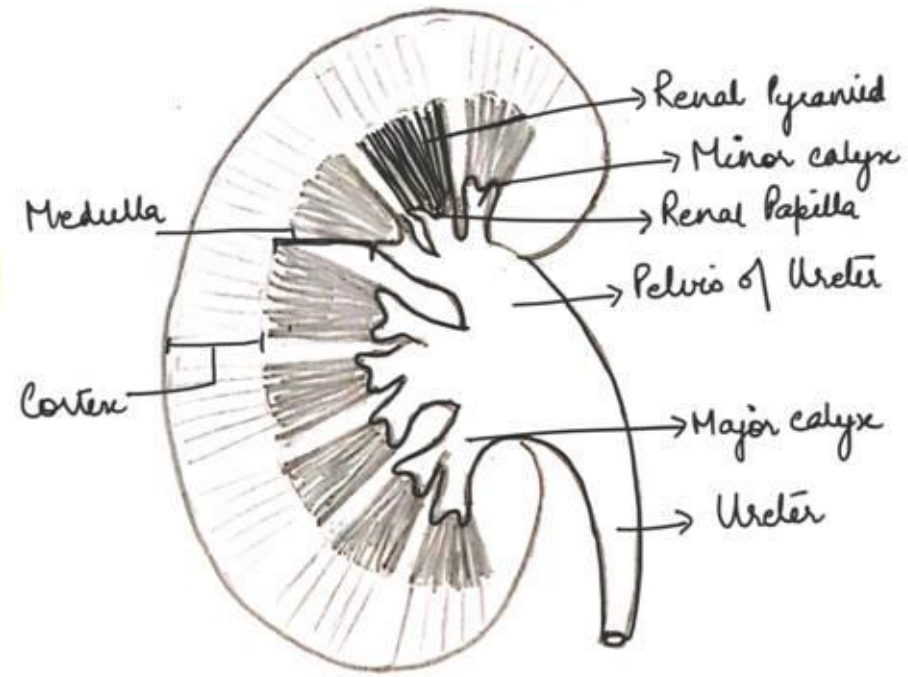
Granular outer cortex divisible into

## ■ Cortical Arches

- arch over the base of pyramid
- consists of medullary rays & convoluted part
- has outer & inner zone (inner zone - juxtamedullary cortex)

## ■ Renal columns

- cortex between renal pyramids



## Cortex contd.....

### Medullary ray --

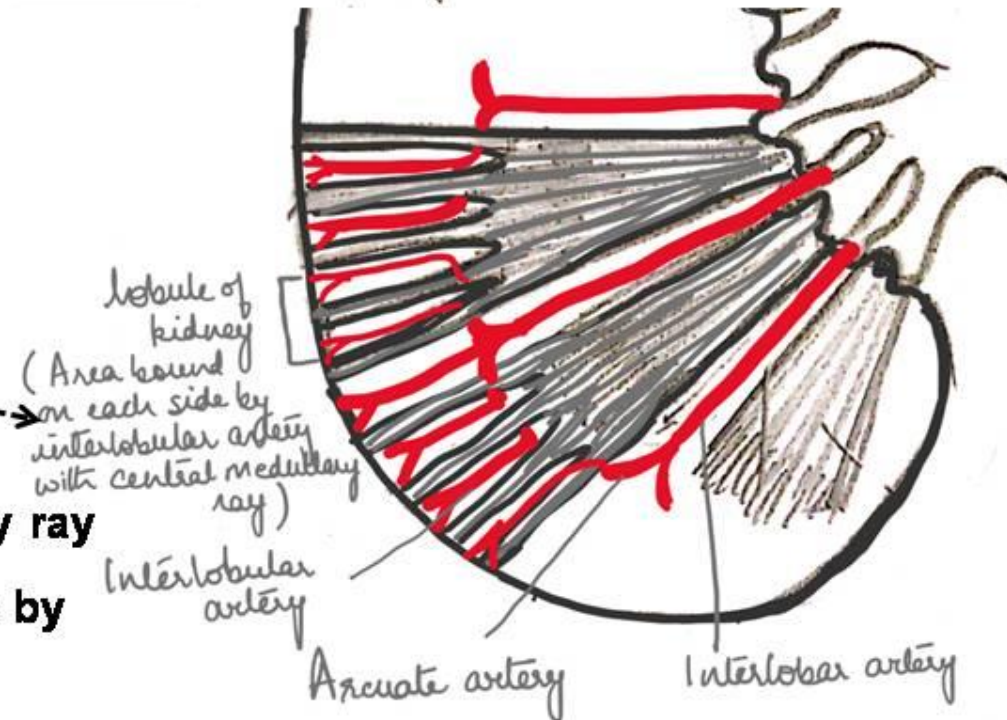
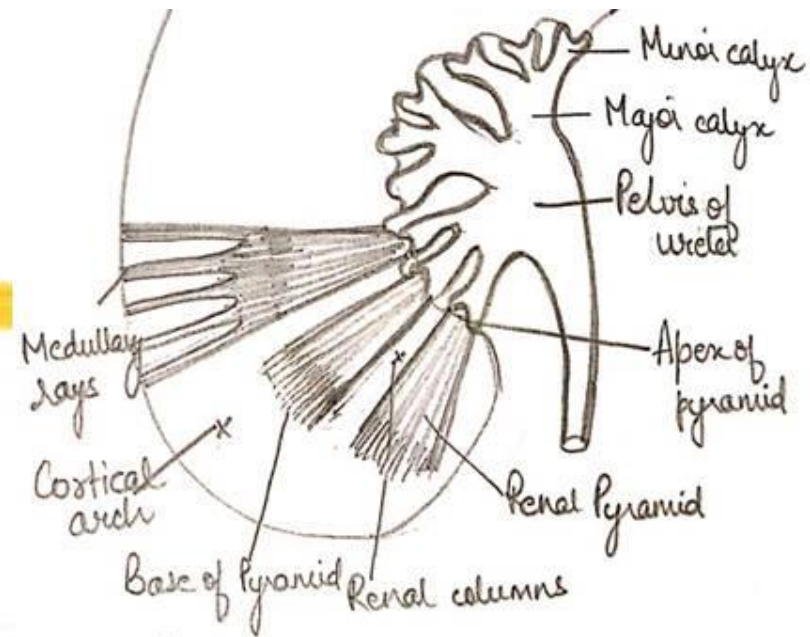
- consists of apex and base
- continuous with medullary pyramids
- occupied by collecting tubules

### Convolute part --

- between medullary rays
- occupied by renal corpuscles

### What is a lobule of the kidney ?

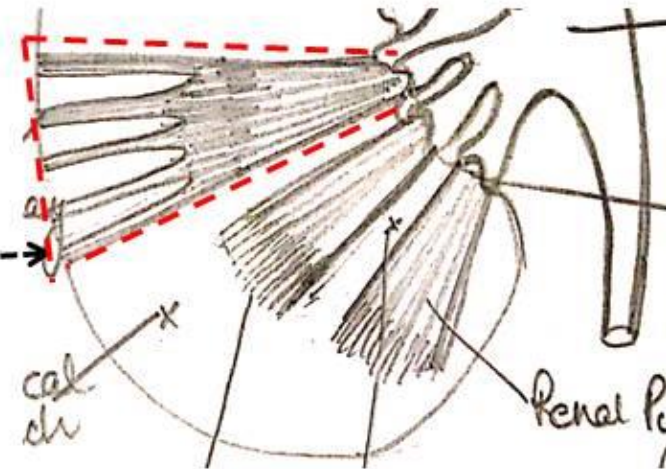
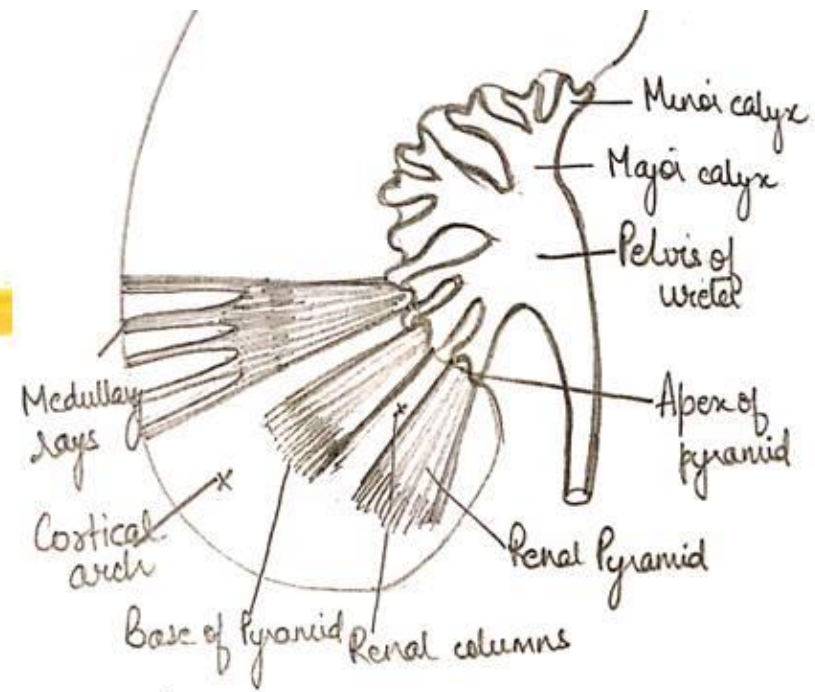
Area of cortical arch with medullary ray  
in central axis, bound on each side by  
interlobular blood vessel





# Renal Medulla

- ✚ **Striated in appearance –**
  - due to presence of loops of henle, collecting tubules, arteriolae recti & venae recti
- ✚ **8- 18 Conical masses – pyramids**
- ✚ **Each pyramid has a base and apex**
- ✚ **Apex projects into sinus – renal papilla**
- ✚ **Papilla is received by minor calyx**
- ✚ **What is lobe of kidney ?**
  - 1 pyramid capped with adjoining cortex





# Arterial supply

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- ⌘ **supplied by renal artery ----- branch of abdominal aorta**
- ⌘ **renal circulation --- 1 litre/ min**
- ⌘ **right renal artery is longer than left**
- ⌘ **renal artery divides into anterior posterior trunks in renal sinus**
- ⌘ **Anterior trunk – gives off 4 segmental arteries**
- ⌘ **posterior trunk – continues as posterior segmental artery**
- ⌘ **segmental arteries divide into lobar and interlobar arteries that enter renal substance**

# Circulation through kidney

Interlobar arteries enter renal

substance

*pass through renal column, at the junction of cortex & medulla divide into*

Arcuate arteries

*arch over base of pyramids, give origin to*

Interlobular arteries

*give origin to afferent arterioles in different directions*

Afferent arterioles

*form*

Glomerular capillaries

*superficial glomeruli - major arterial circle  
juxtamedullary glomeruli - minor arterial circle*

Efferent arterioles

Peritubular capillaries

Renal vein

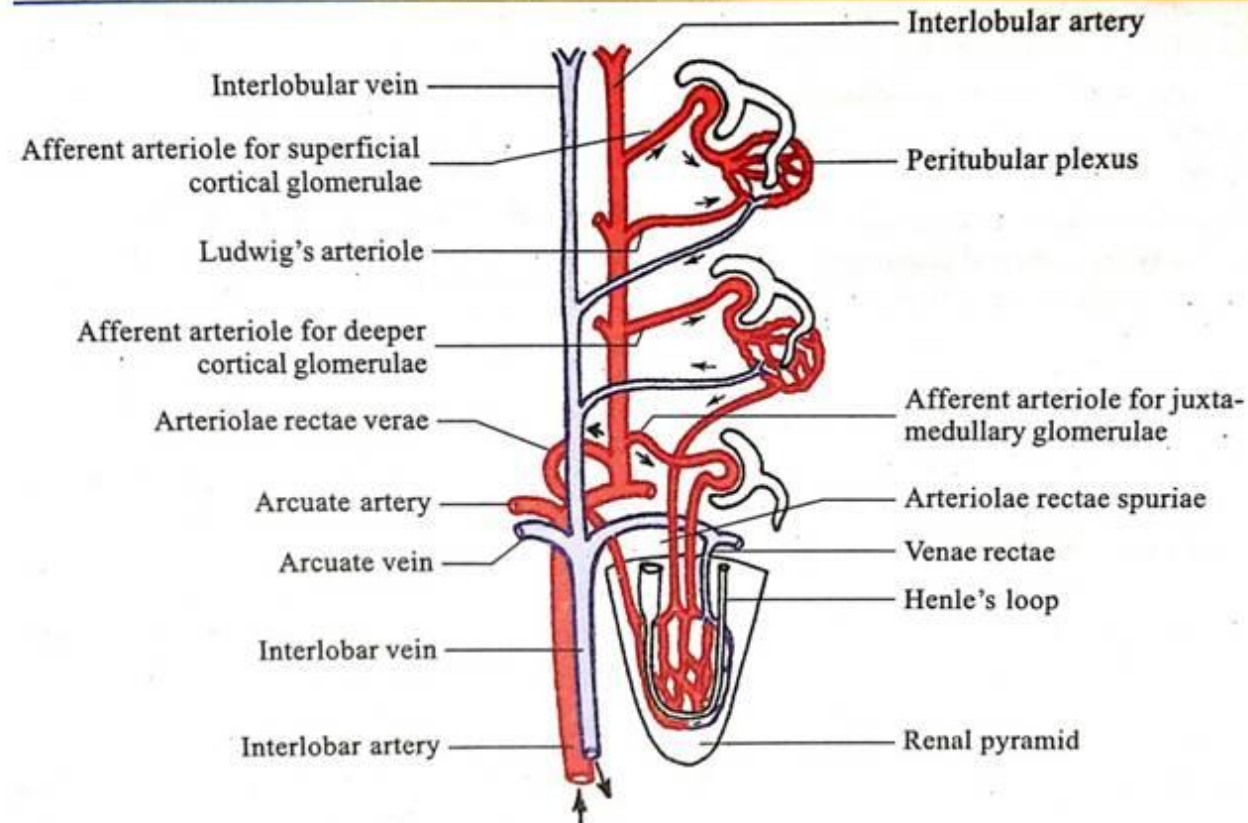
Segmental veins

Interlobar veins

Arcuate veins

Interlobular veins

# Internal vascular pattern of kidneys

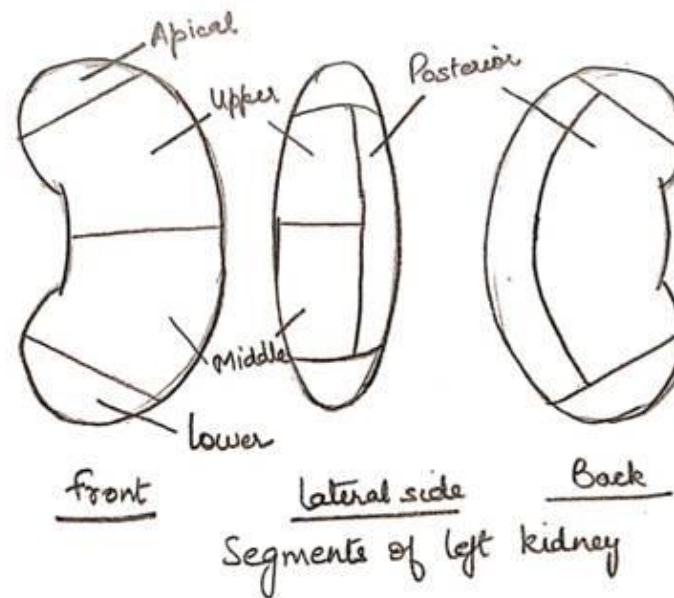
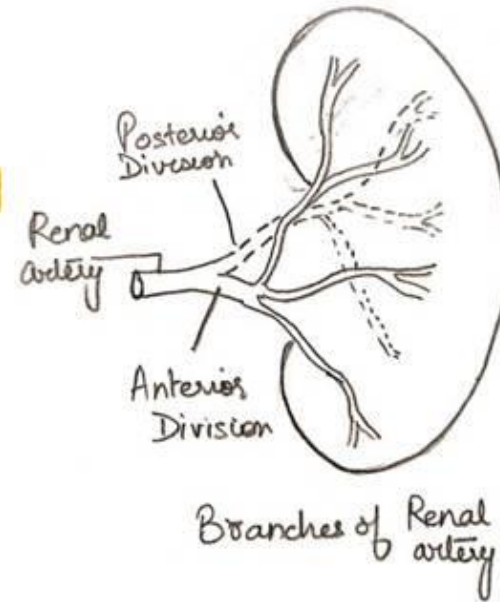


**Superficial cortical glomeruli ----- major arterial circle**

**Juxtamedullary glomeruli ----- minor arterial circle**

# Renal segments (Brodel's Line)

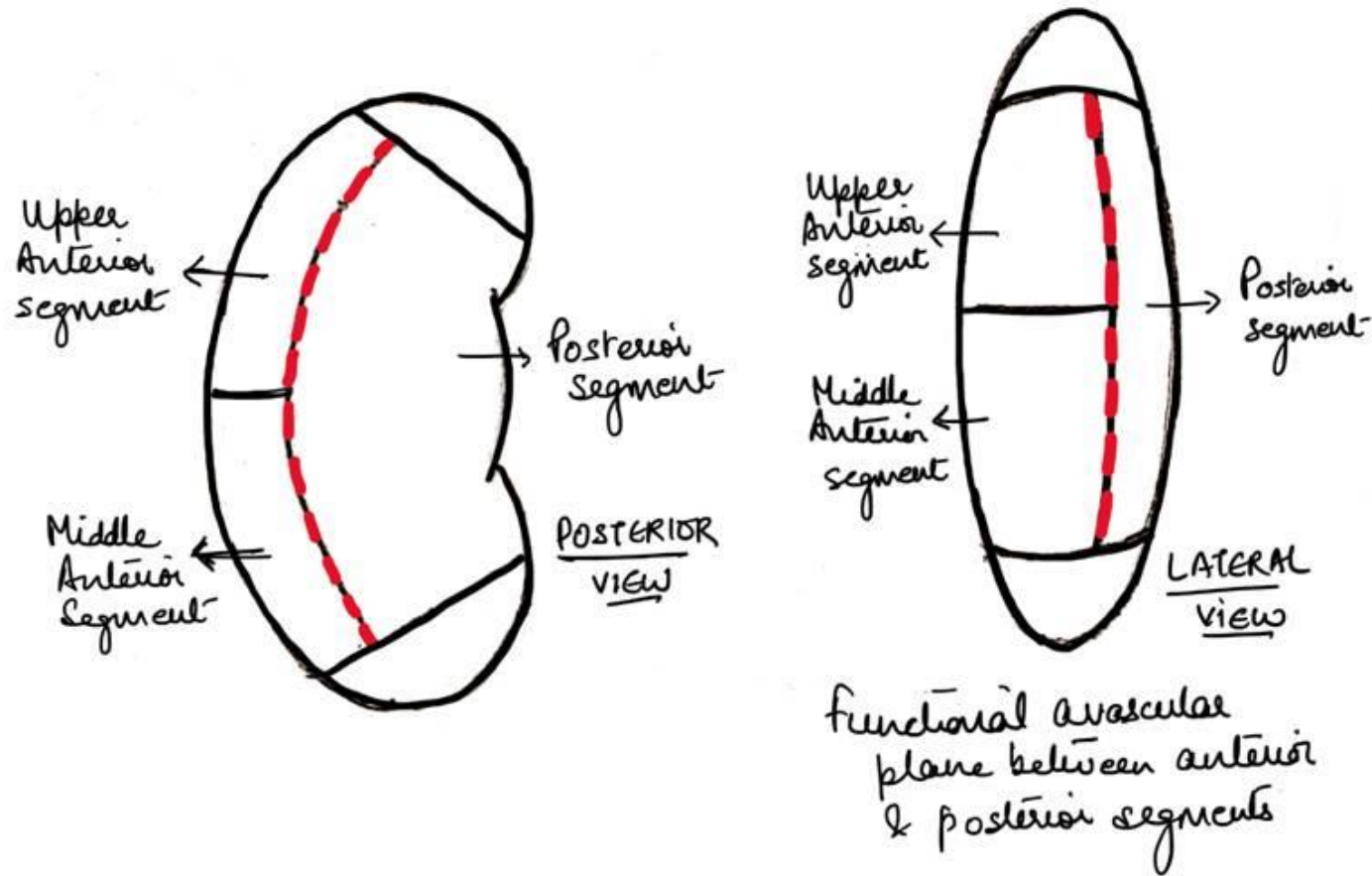
- ✚ Each kidney – 5 independent arterial segments
- ✚ no collateral circulation between these segments
- ✚ 4 on anterior surface –
  - ☒ apical
  - ☒ upper anterior
  - ☒ middle anterior
  - ☒ lower
- ✚ 1 on posterior surface
  - ☒ posterior segment





# Brodel's avascular line

- ✿ In the living a pale bloodless line is observed along lateral border
- ✿ across this line **NO ANASTOMOSIS** between anterior & posterior divisions of renal artery
- ✿ **IMPORTANCE:**
  - interior of kidney can be explored, stones can be removed from calyces (will less bleeding)
  - This line is not strictly avascular because tributaries of renal vein communicate with each other across this line



junction between anterior & posterior divisions of renal artery along a line on posterior surface – between medial 2/3<sup>rd</sup> and lateral 1/3<sup>rd</sup>

# **Venous Drainage**



- ✿ drain into IVC through Renal veins**
- ✿ Left renal vein is longer than right**
- ✿ Left renal veins drains blood from**
  - Left kidney & also**
  - Left gonad**
  - Left suprarenal**
- Right gonadal vein & right suprarenal vein are direct tributaries of IVC**

# Lymphatic Drainage



- ✚ **lymphatics follow back the renal arteries and drain into para aortic group of lymph nodes**

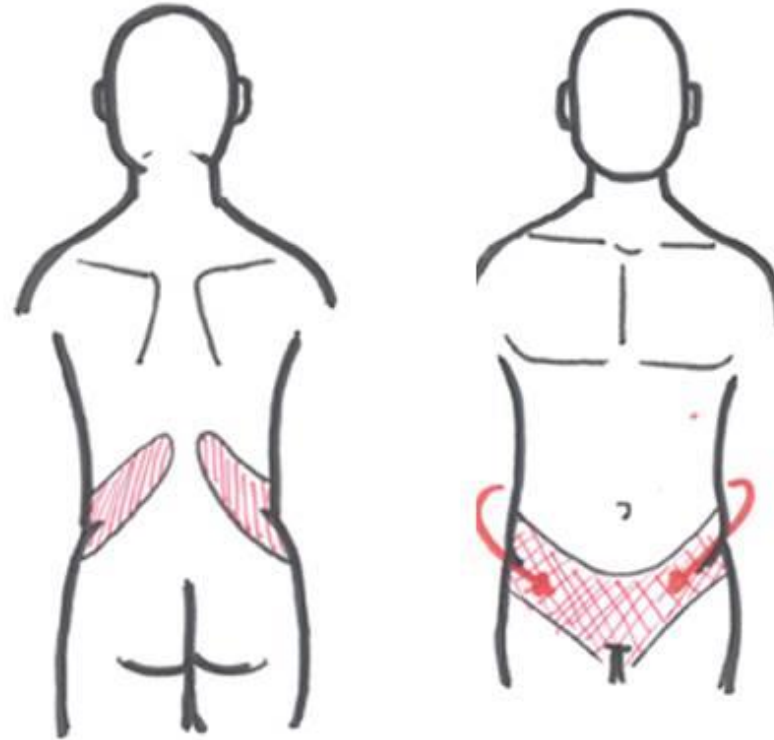


# Nerve Supply

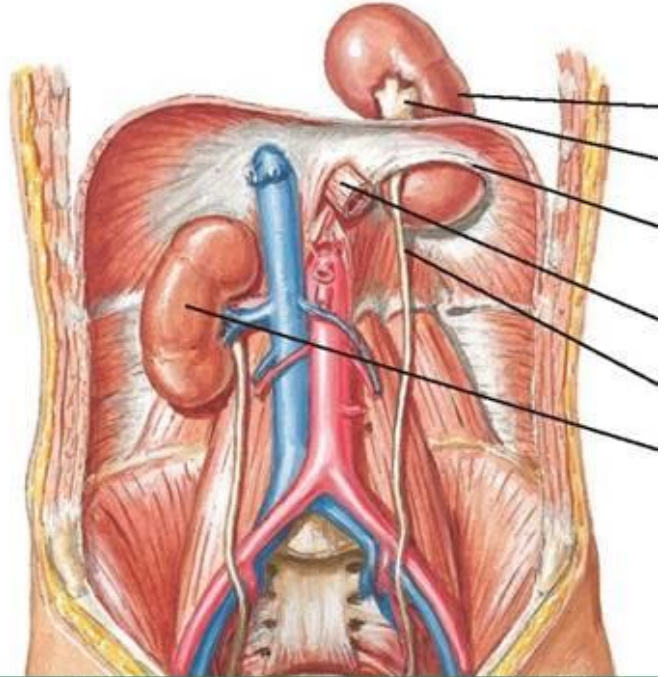
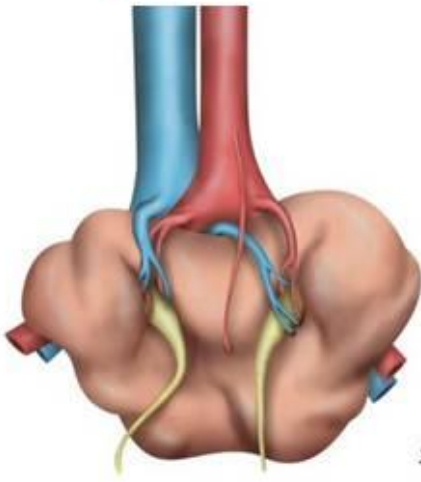
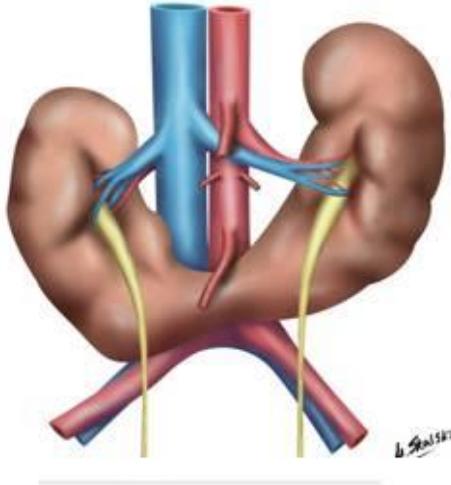
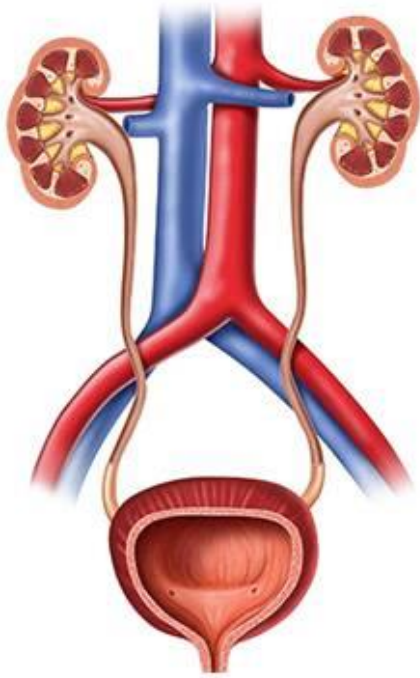
✚ sympathetic fibres derived from renal plexus

✚ pre-ganglionic fibres --- T10 – L3 spinal cord segments

**Referred pain** in RENAL COLIC  
pain radiates from---**Loin**  
to **Infraumbilical part of**  
**abdominal wall including groin**----  
along the distribution of T10- L3  
spinal nerves

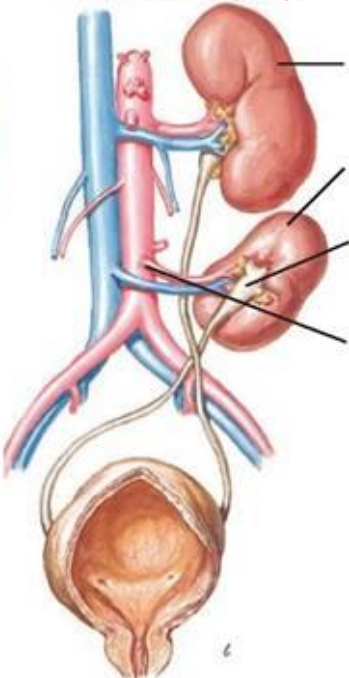
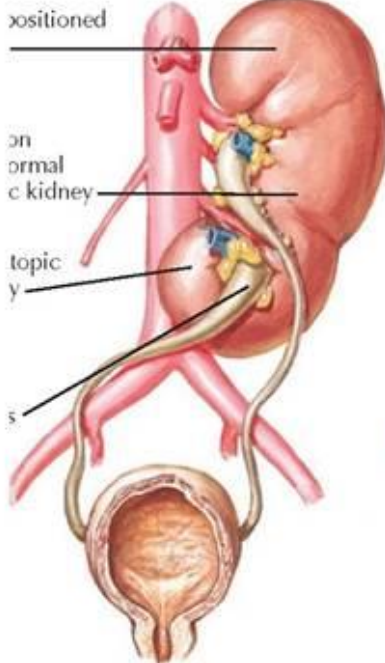


# Anomalies of Development



With fusion (90%)

Without fusion (10%)



# Applied Anatomy

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- ✂ **Anatomical basis of Loin to Groin pain of renal colic**
- ✂ **Anatomical basis for arterial anastomosis of all arteries during Renal transplantation – as branches of renal arteries are end arteries**
- ✂ **Anatomical basis for exploration of interior of kidney through the avascular plane**