3. THE UPPER ABDOMINAL ‘TUBES’

This sheet covers the biliary system, arteries and veins in the upper abdomen. This is essential in autopsies that follow hepato-biliary- pancreatic surgery, known or suspected ischaemic bowel, abdominal vascular surgery, and other acute or chronic upper-gastrointestinal diseases. It is important to follow the sequence in order, since each step can obliterate the previous one.

1. Take the whole upper GI block – lower oesophagus, stomach, duodenum, liver, pancreas, spleen, and attached mesentery – and place it upside down on the dissection bench. Do not remove any organs at this stage.
2. Locate the superior mesenteric artery origin, and cut it open downwards; this will cut through the duodenum
3. Locate the coeliac artery trunk; open it laterally along the splenic artery
4. Opposite the splenic artery ostium is the hepatic artery; follow this up into the liver; just before it goes into liver, there is the gastro-duodenal artery branch (often difficult to locate)
5. Locate the splenic vein near the spleen (it is below the artery) and open it towards the liver.
6. It broadens into the mesenteric and portal vein, which can be followed down to the intestines and upwards into the liver, respectively.
7. Keep the block in the same orientation; locate the porta hepatis, in which the bile duct, hepatic artery and portal vein are going in/out of the liver.
8. With fine round-ended scissors, nibble into the right lateral side of the bundle connecting mesentery with porta hepatitis.
9. You are looking for the common bile duct; when located, open it up to the liver, and down into the duodenum, cutting through pancreas and the ampulla of Vater.
10. Open the gall bladder
11. Cut off all the tissues below the porta hepatis, clean the liver of attached diaphragm, stomach etc, and weigh it
12. Cut off the spleen and weigh it

SB Lucas

Sept 2021