DEVELOPMENT OF THE ORGANS OF THE HEAD AND NECK REGION

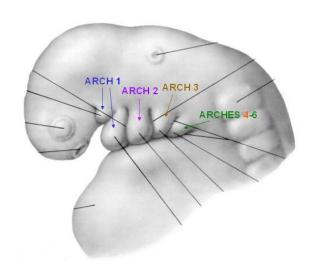
Face, palate, tongue Pharyngeal arches, grooves and pouches

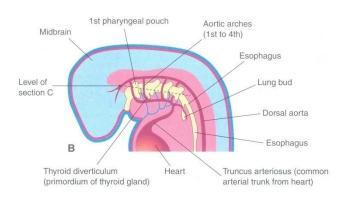
Dr. Andrea D. Székely

Semmelweis University
Department of Anatomy, Histology and Embryology
Budapest



GERMINAL LAYER DERIVATIVES





ECTODERM contributing to the formation of the face appears by the 4th week.

The *oropharyngeal membrane*

(interface between **ECTODERM** and **ENDODERM**) is located in front of the later palatine tonsils. Ectodermal structures limiting the stomodeum participate in the formation of the face, as well as of the nasal and oral cavities.

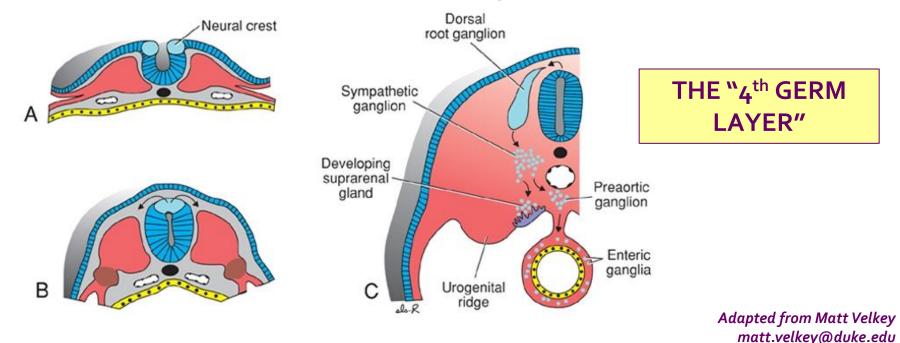
MESENCHYME that fills the pharyngeal arches derives from the *neural crest*

ECTOMESENCHYME

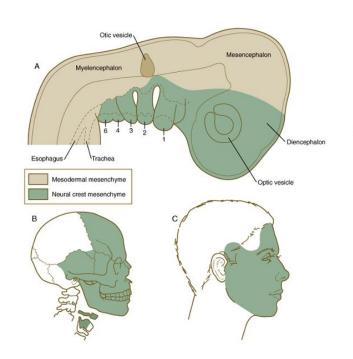
NEURAL CREST

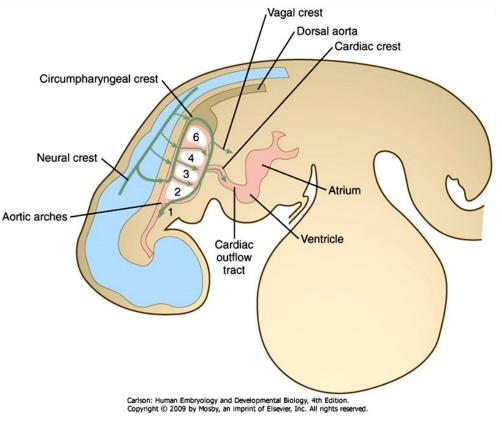
At the time of neurolation, cells at the lateralmost edge of the neural plate are exposed to a unique combination of factors from the adjacent skin, underlying mesoderm, and from the rest of the neural plate and are induced to form **neural crest**.

The neural crest cells downregulate cadherin expression and delaminate from the neuroepithelium, i.e., they transform from epithelial cells into migratory mesenchymal cells that contribute to forming MANY tissues in the body.



NEURAL CREST





- Arches 1 2 3 4 6
- Contribute to thyroid, parathyroid, and thymus
- Cardiac crest contributes to outflow tract cushions
- Malformations (e.g. DiGeorge syndrome, Hoxa-3 mutation) are represented multiple (craniofacial (jaw), glandular & outflow tract) defects

 Adapted from Mo

PERIPHARYNGEAL (OR CIRCUMPHARYNGEAL)

DIVISION

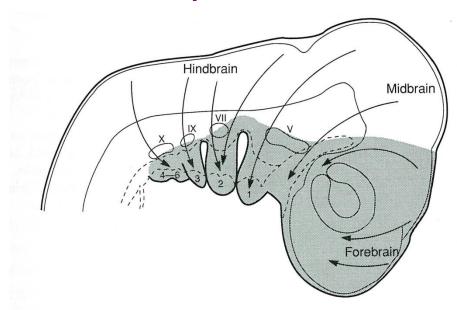
Adapted from Matt Velkey matt.velkey@duke.edu

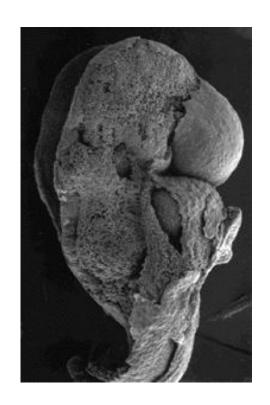
MESENCHYME IN THE HEAD&NECK REGION

Mesenchyme in general

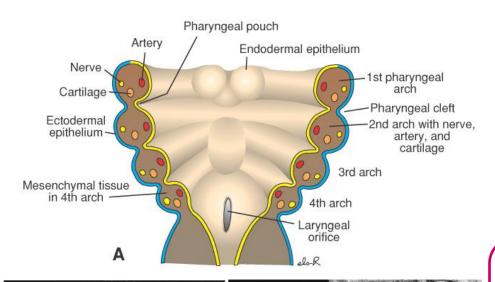
- embryonic connective tissue
- loosely organized
- has the ability to migrate & differentiate into different cell types
- can develop from any germ layer

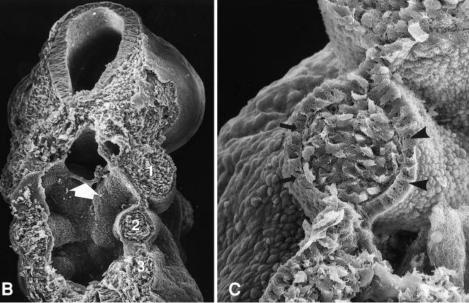
Ectomesenchyme





PRIMORDIAL TERMS





The **pharyngeal arches** form on either side of the foregut and correspond to the primitive vertebral gill bars or **branchial** arches.

A pharyngeal arch consists of

- 1. core of mesenchyme
- 2. external ectoderm
- 3. internal endoderm.

The arches are separated

- externally by a pharyngeal cleft
- internally by a pharyngeal **pouch**.

PHARYNGEAL ARCHES IN FACE DEVELOPMENT

WEEK 6
The face is formed by 5 processes

Frontonasal prominence (1)

Maxillary prominence (2)
Mandibular prominence (2)

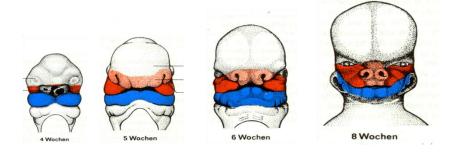
- 1st arch

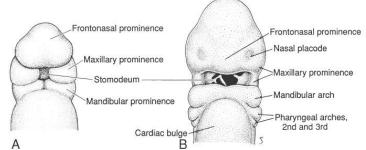
nasal (olfactory) pits form surrounded by the medial and lateral nasal processes

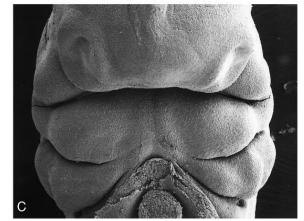
nasolacrimal groove separates the lateral nasal process from the maxillary process

maxillary processes fuse with the medial nasal processes

lateral nasal processes fuse with the maxillary processes, thus obliterating the nasolacrimal groove.

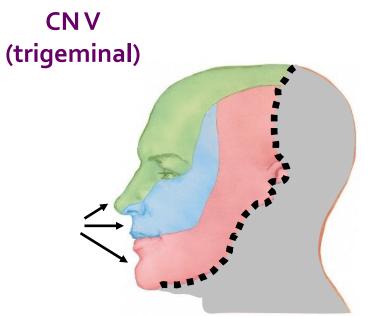


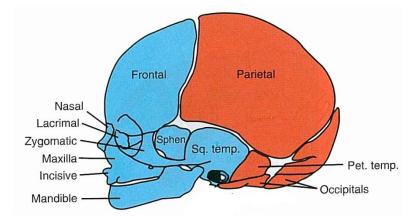




ECTOMESENCHYME DEVELOPMENT OF THE CRANIUM

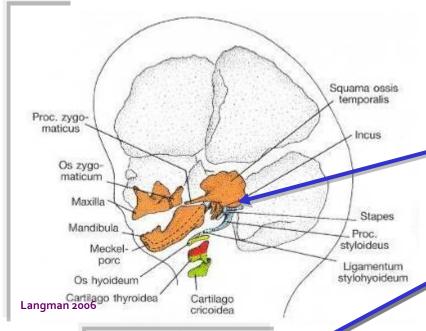
Blue = derived from neural crest cells





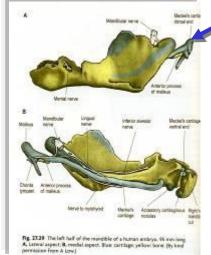
Red = derived from paraxial mesoderm

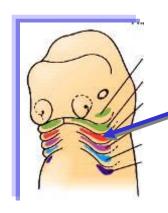
CARTILAGENOUS VISCEROCRANIUM BONES OF THE FACIAL SKELETON



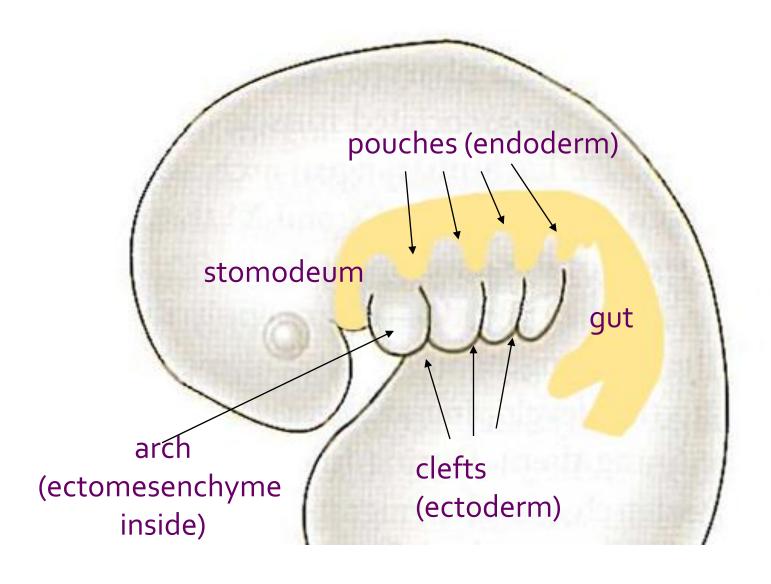
1st pharyngeal arch (Circumoral) mandibular prominence

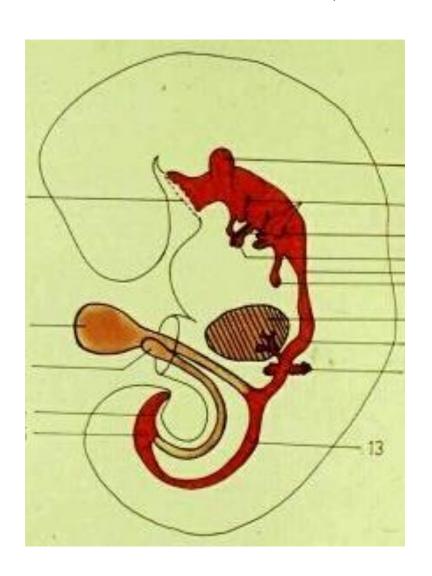
Meckel's cartilage dorsal end rudiments of incus, malleus

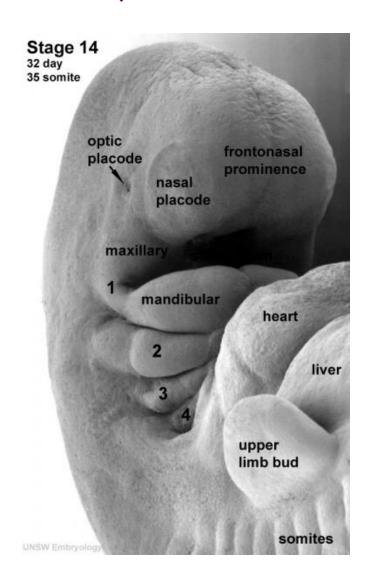


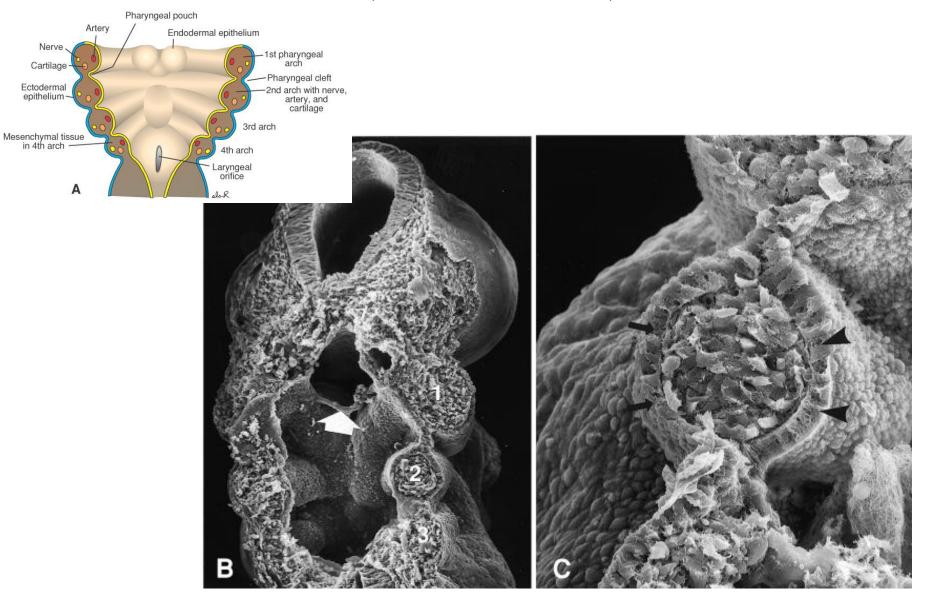


2nd pharyngeal arch Reichert's cartilage stapes, temporal styloid process

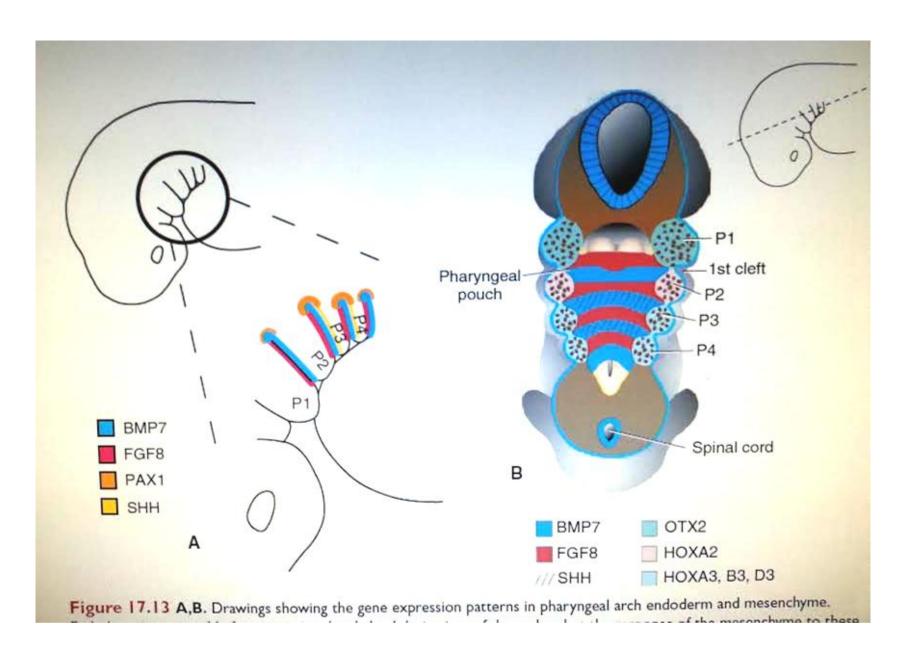


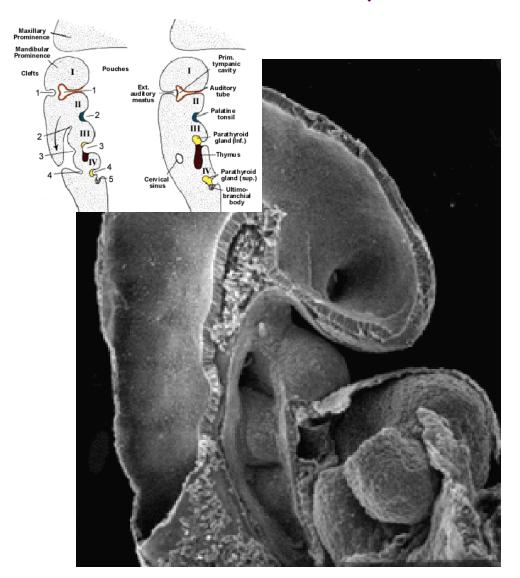


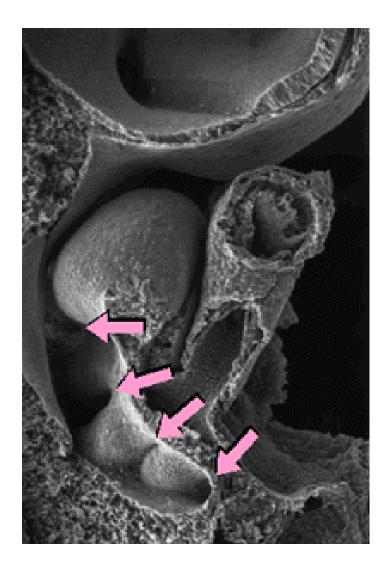


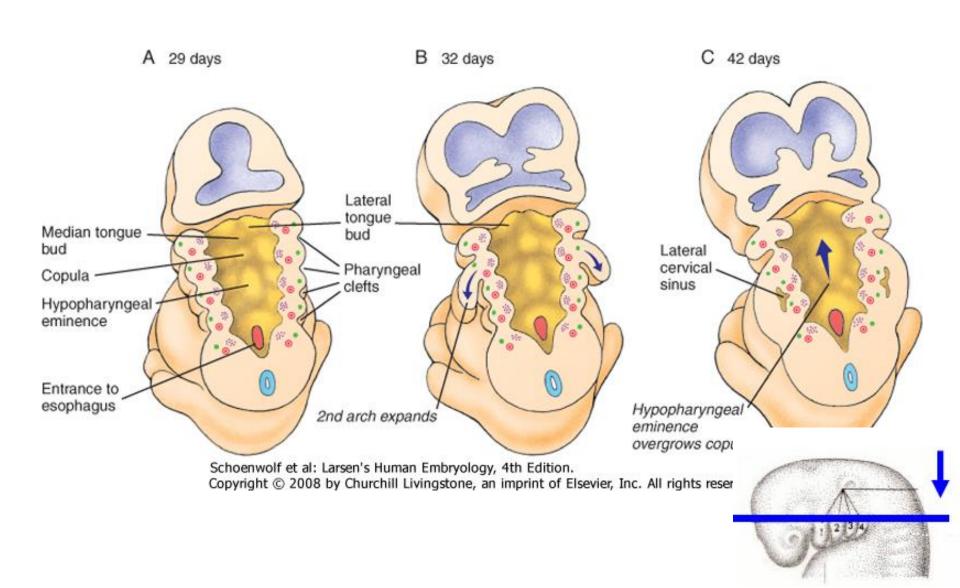


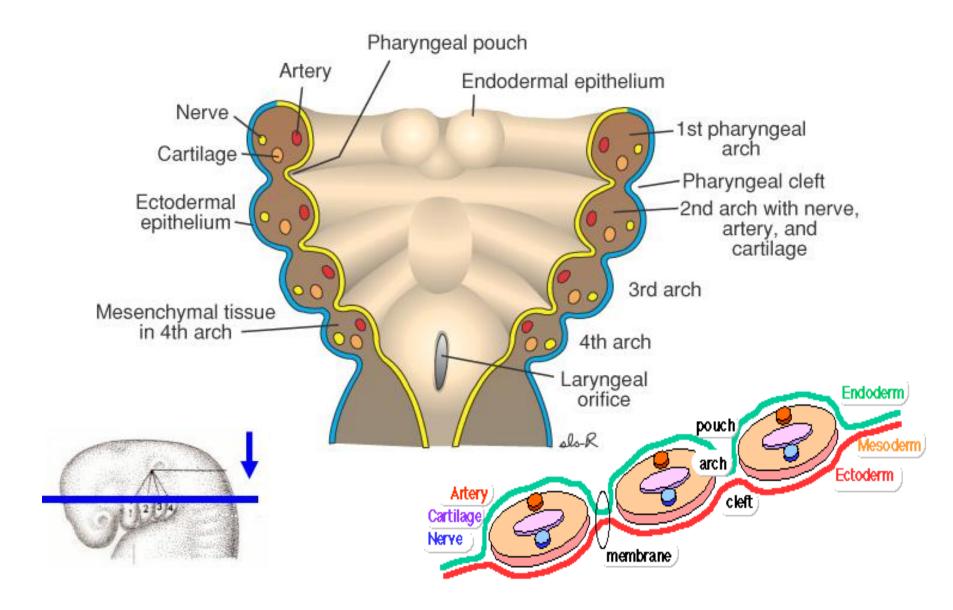
GENE EXPRESSION PATTERN



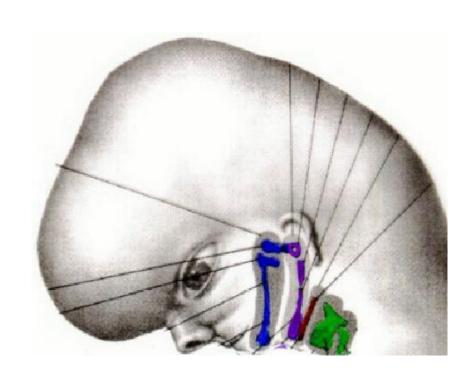


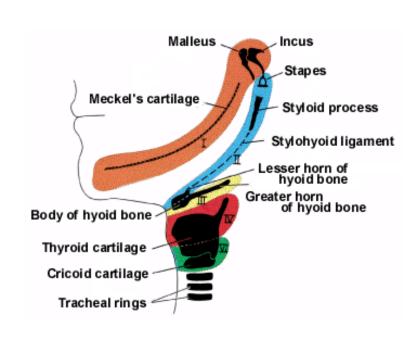






PHARYNGEAL ARCH CARTILAGES





<u>l First (Mandibular)</u>

Arch -

- 1. Malleus
- 2. Incus
- 3. Ant. Ligament

Of malleus

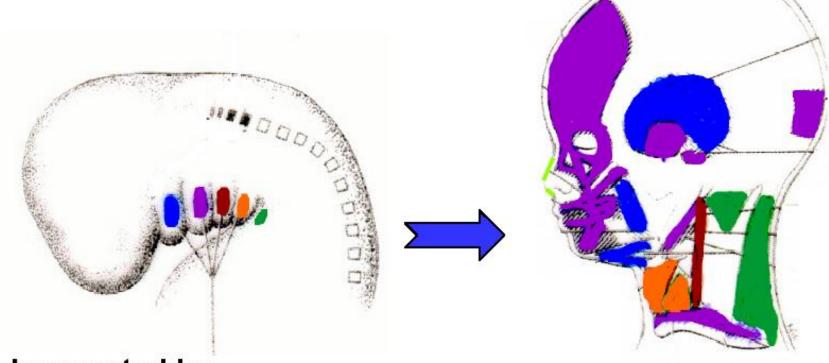
4. Sphenomandibular ligament

Il Second (Hyoid) Arch

- 1. Stapes
- 2. Styloid Process
- 3. Stylohyoid Ligament
- 4. Lesser horn, Upper
- 1/2 body Hyoid

III Third Arch -Lower ½ Body, Greater Horn Of hyoid <u>IV Fourth</u> (Sixth) Arch -Cartilages Of larynx

MUSCLE DERIVATIVES OF THE PHARYNGEAL ARCHES



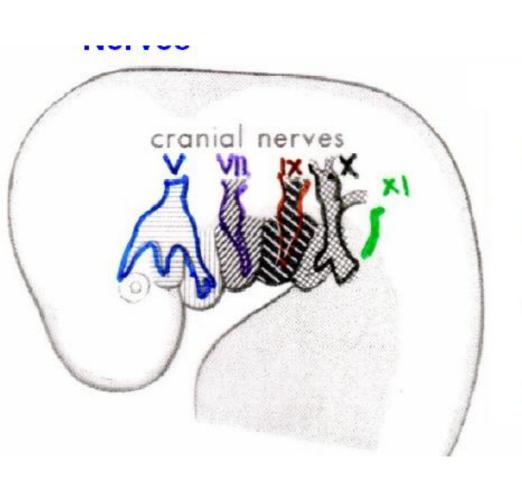
Innervated by

First Trigeminal
V

Second -Facial VII Third Glossopharyngeal IX

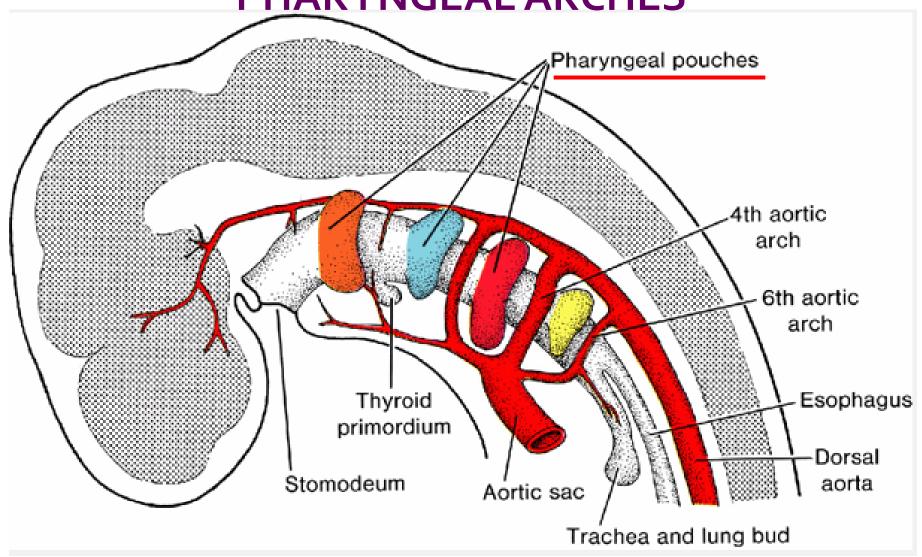
Fourth Vagus X Sixth Accessory XI

CRANIAL NERVE BRANCHES IN THE PHARYNGEAL ARCHES

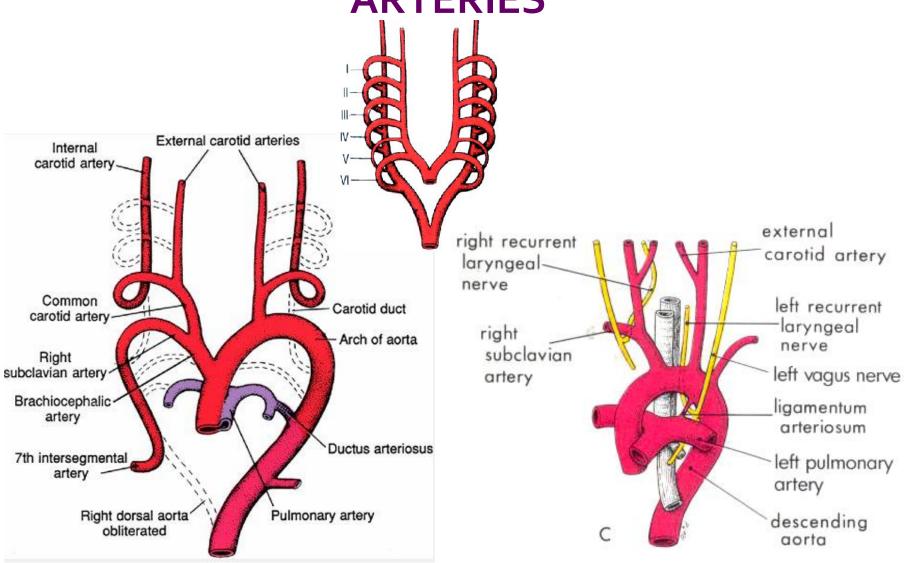


- First Arch Trigeminal
 (V)
- Second Arch Facial (VII)
- Third Arch Glossopharyngeal (IX)
- Fourth Arch Vagus (X)
- Caudal Sixth Accessory (XI)

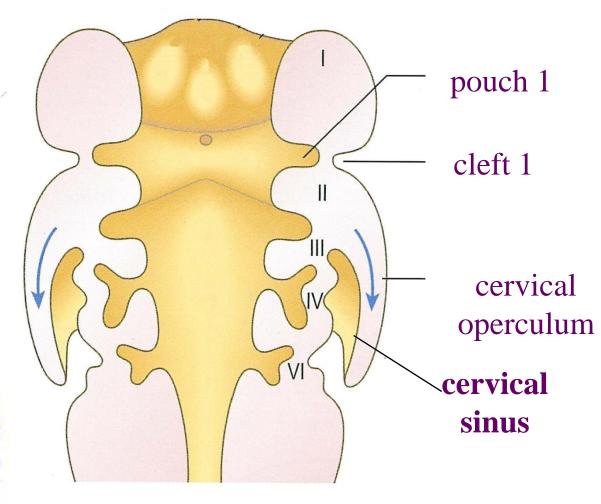
INTERSEGMENTAL ARTERIES IN THE PHARYNGEAL ARCHES

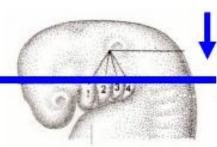


DERIVATIVES OF THE INTERSEGMENTAL ARTERIES

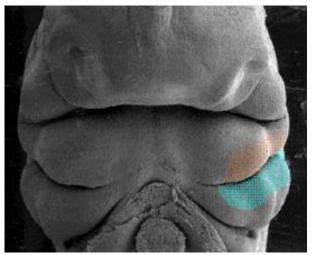


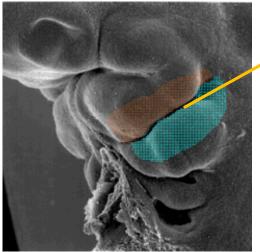
DERIVATIVES OF THE PHARYNGEAL ARCHES AND CLEFTS (ECTODERM)



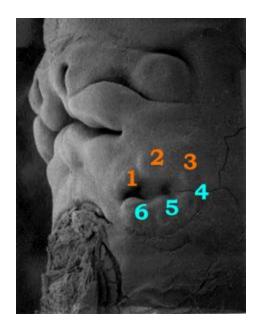


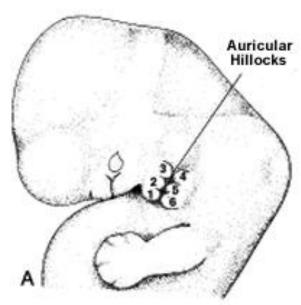
DEVELOPMENT OF THE EXTERNAL EAR

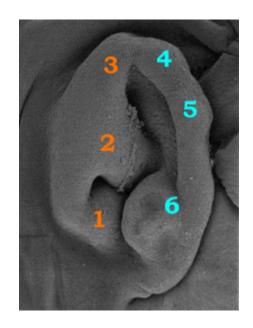




First pharyngeal cleft







TREACHER COLLINS SYNDROME

• Autosomal dominant hereditary disease leading to problems with the structure of the face. It is caused by a defective protein called

treacle

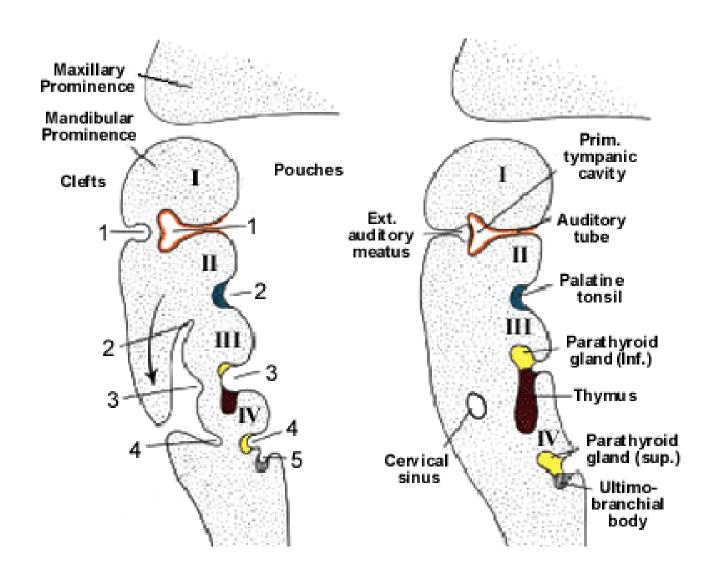
- The treacle gene is found on chromosome 5
- TCOFL gene mutations are the main cause for this syndrome
- No genetic tests are available (similar ratios for boys&girls, approx 1.50000)



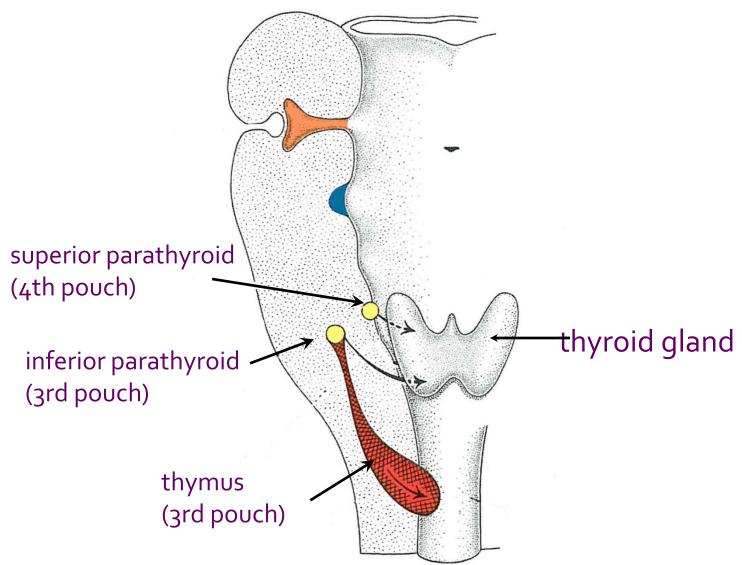
- •Outer part of the ear abnormal or completely missing
- •Hearing loss
- Small jaw (Micrognathia)
- Very large mouth
- Defect in the lower lid (Coloboma)
- Scalp hair that reaches to the cheecks
- Cleft Palate

Complex therapy
Plastic surgery to fix the facial abnormalities
Hearing loss is treated
Corrective surgery of the underdeveloped jaw
Speech therapy for eating and speech

DERIVATIVES OF THE PHARYNGEAL ARCHES AND POUCHES (ENDODERM)



DERIVATIVES OF THE PHARYNGEAL ARCHES AND POUCHES (ENDODERM)



SUMMARY TABLE OF THE ENDODERMAL DERIVATIVES

Pharyngeal Pouch	Adult Derivative
1 st pouch	middle ear cavity mastoid antrum auditory tube
2 nd pouch	tonsillar fossa palatine tonsils
3 rd pouch	thymus inferior parathyroid glands
4 th pouch	superior parathyroid glands

SUMMARY TABLE OF THE DERIVATIVES

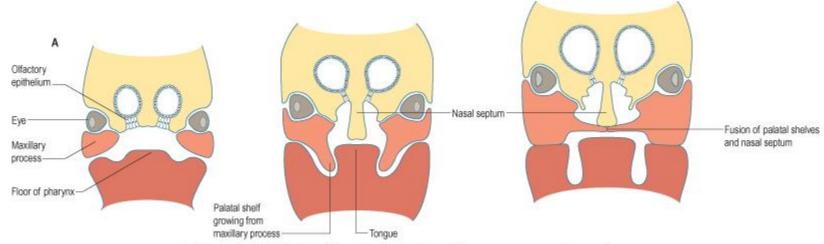
Branchial Apparatus

Made by: dr. Károly Altdorfer and dr. János Hanics - Semmelweis University Medical School - Department of Anatomy, Histology and Embryology, Budapest, 2009.

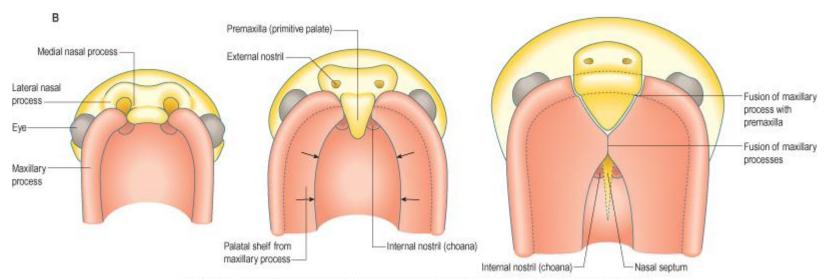
	Made by: dr. Karoly Altdorfer and dr. Janos Hanics - Semmelweis University Medical School - Department of Anatomy, Histology and Embryology, Budapest, 2009.								
	Mesenchyme				Ectoderm		Endoderm		
	Artery	Cartilage ¹	Bone ¹	Ligament ¹	Muscle [‡]	Nerve			
Pharyn- geal arch							Clefts	Pouches	
I. (mandi- bular)	(Maxillary artery)	Meckel's (as model for mandible)	Mandible (intramembranous ossification); Malleus; incus; (*)	Sphenomandi- bular lig.; Ant. lig. of maileus	Mm. of mastification; Tensor tympani; Tensor vell palatini; Mylohyoid; Digastric ant. belly;	Mandibular nerve (V/3.)			
							C1: External ac. meatus; ext. epithelium of tympanic membrane	P1: Auditory tube; Tympanic cavity; Int. epithelium of tympanic membrane	
II. (hyold)	(Stapedial artery; Hyold artery)	Reichert's	Stapes; Styloid process; Hyold (lesser horn and upper part of body)	Stylohyold lig.	Muscles of facial expression; Stylohyold; Digastric post. belly; Stapedius; Platysma (from Opercular proc.)	Facial nerve (VII.)			
							C2: (Cervical sinus)	P2: Epithelium of tonsiliar fossa	
III.	Internal carotid (prox. part)		Hyold (greater horn and lower part of body)		Pharynx (upper part); Stylopharyngeus	Glossopharyngeal nerve (IX.)			
							C3: (Cervical sinus; Cervical vesicula)	P3: (Thymus) Inferior parathyroid glands	
IV.	Left: Arch of aorta; Right: Right subclavian artery (prox. part)	Thyrold cartilage			Pharynx (lower part); Larynx: cricothyroid	Vagus nerve (X.) (Superior laryngeal nerve)			
							C4: (Cervical sinus)	P4: Thymus; Superior parathyroid glands	
V. (**)		Thyrold cartilage			Phaynx and larynx muscles (n. XI.: arytenoid)	Vagus nerve (X.) + Accessory nerve (XI.)			
								P5: Ultimobranchial body, C-cells in thyroid gland	
VI.	Right: Right pulmonary artery; Left: Left pulmonary artery and ductus art. Botaill	Cricold cartilage (?)			Larynx muscles ('Intrinsic')	Vagus nerve (X.) (Recurent laryngeal nerve)			

^{1:} derivatives of neural crest (ecto-mesenchyme); 2: derivatives of paraxial mesoderm or somite (mesoderm); (*) partially forms the maxilla (from the maxillary process of the first pharyngeal arch); (**) Some authors don't give derivates for fifth pharyngeal arch but mention them at the sixth pharyngeal arch.

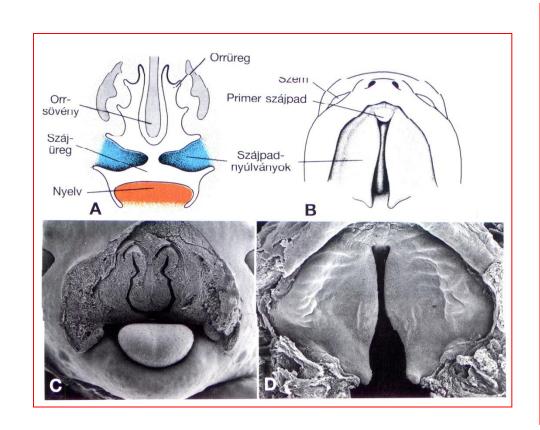
DEVELOPMENT OF THE ORAL CAVITY WITH RELEVANCE TO THE TONGUE

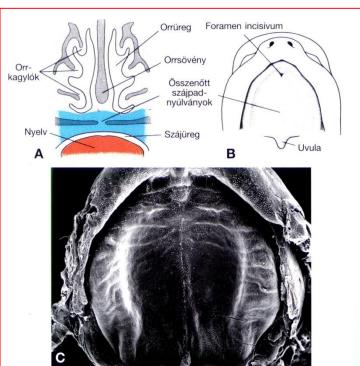


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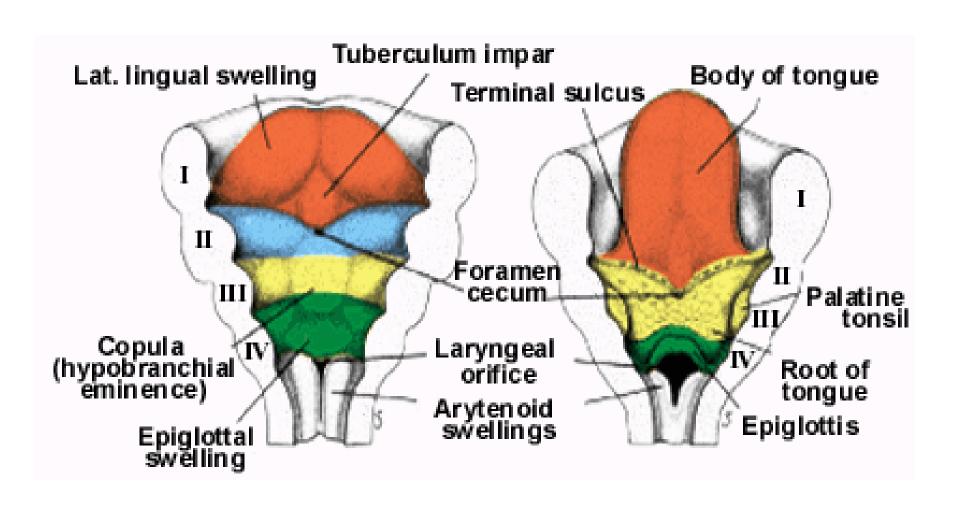


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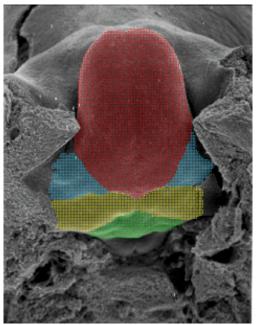


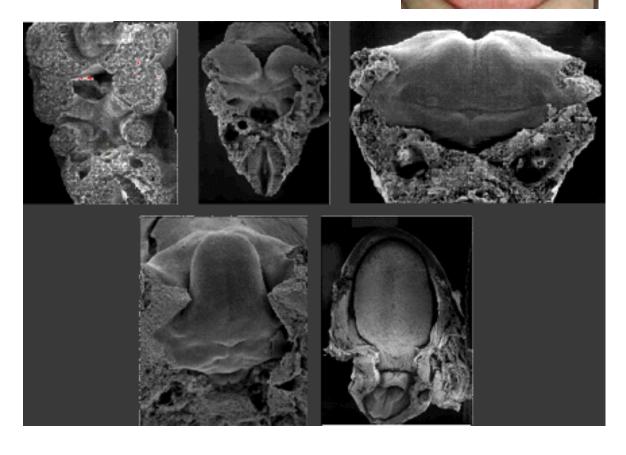
16.25. ábra. A. 10 hetes embryo fejének frontalis metszete. A kétoldali szájpadnyúlvány összenőtt egymással és az orrsövénnyel. **B.** A szájpadnyúlvány ventral felől nézve. A foramen incisivum a középvonali határpont a primer és a secundaer szájpad között. C. Pásztázósugaras elektronmikroszkópos felvétel a B ábrával hasonló fejlődési stádiumban lévő egérembryo szájpadnyúlványairól



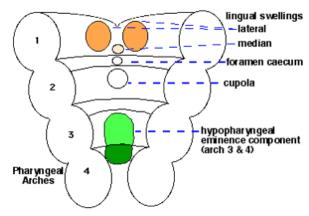


Bifid tongue

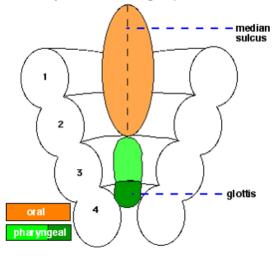




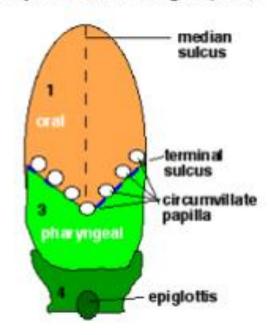
Development of the Tongue (part 1)



Development of the Tongue (part 2)



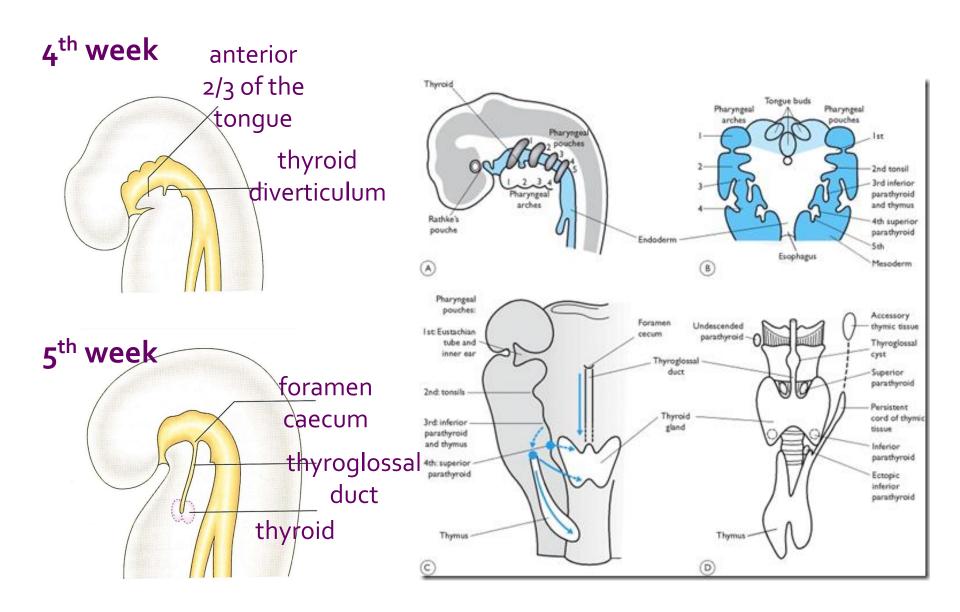
Development of the Tongue (part 3)



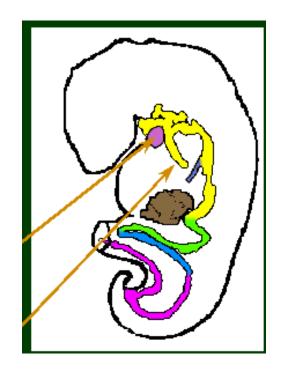
SUMMARY TABLE OF THE LINGUAL DIVISIONS &NERVES

Tongue Primordia	Pharyngeal Arch	Cranial Nerve	Derivatives
Tuberculum impar & lateral lingual swellings	1 st arch	CN 5/3	Connective tissue of tongue carrying CN 5/3 (lingual nerve, general sensation) + Mucosa of anterior 2/3 of tongue lies above this part (ECTODERM!)
	2 nd arch	CN 7(chorda tympani)	Connective tissue of tongue carrying CN 7 (chorda tympani) taste - anterior 2/3 of tongue
Copula and hypopharyngeal (hypobranchial) eminence	3 rd and 4 th arches	CN 9 and CN 10	Connective tissue of the tongue General sensation and taste in the posterior 1/3 of tongue (CN9) General sensation and taste at the epiglottis (CN10) +Mucosa of posterior 1/3 of tongue lies above this part (ENDODERM!)
Occipital somites		CN 12	all intrinsic tongue muscles; all extrinsic tongue muscles (except for palatoglossus)

DEVELOPMENT OF THE THYROID GLAND



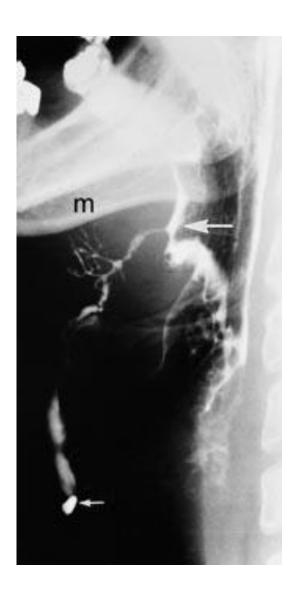
DEVELOPMENTAL MALFORMATIONS



median cervical cyst

persisting thyreoglossal duct



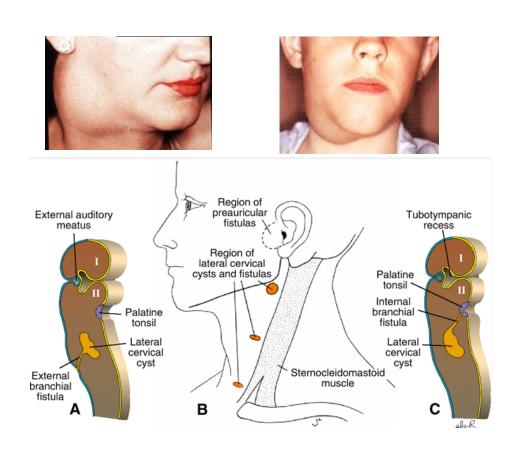


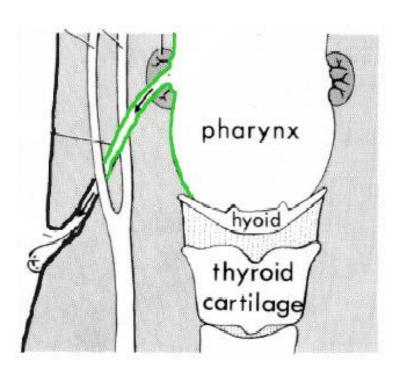


DEVELOPMENTAL MALFORMATIONS

lateral cervical cyst

lateral cervical fistule





THANK YOU VERY MUCH



FOR YOUR ATTENTION!