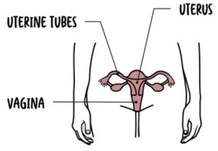
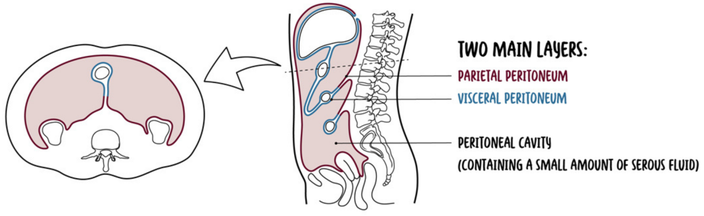
THE PERITONEUM

CONTINUOUS SEROUS MEMBRANE
- LINES THE ABDOMINAL CAVITY
- COVERS THE ABDOMINAL ORGANS



IN MALES
COMPLETELY CLOSED

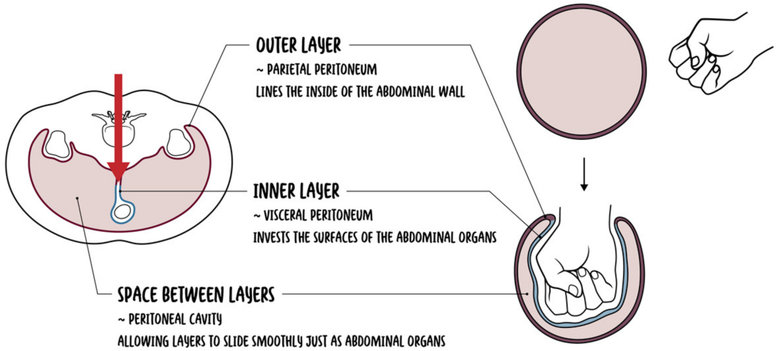
IN FEMALES
COMMUNICATES WITH THE EXTERNAL ENVIRONMENT



TWO MAIN LAYERS:
PARIETAL PERITONEUM
VISCERAL PERITONEUM

PERITONEAL CAVITY
(CONTAINING A SMALL AMOUNT OF SEROUS FLUID)

FIST-IN-A-BALLOON MODEL



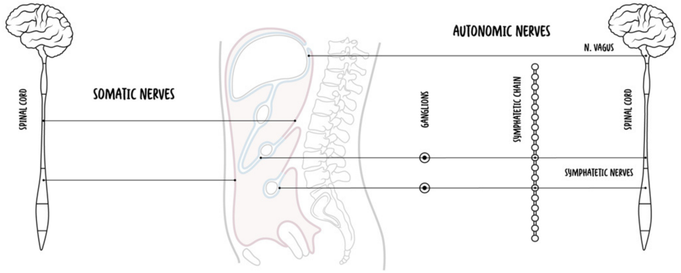
OUTER LAYER
~ PARIETAL PERITONEUM
LINES THE INSIDE OF THE ABDOMINAL WALL

INNER LAYER
~ VISCERAL PERITONEUM
INVESTS THE SURFACES OF THE ABDOMINAL ORGANS

SPACE BETWEEN LAYERS
~ PERITONEAL CAVITY
ALLOWING LAYERS TO SLIDE SMOOTHLY JUST AS ABDOMINAL ORGANS

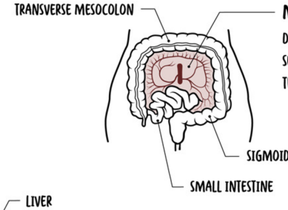
PARIETAL PERITONEUM
- HIGHLY SENSITIVE TO PAIN, PRESSURE, TEMPERATURE, AND LACERATION
- PAIN IS TYPICALLY WELL LOCALISED

VISCERAL PERITONEUM
- PAIN IS POORLY LOCALISED (DULL OR CRAMPING)
- REFERRED TO DERMATOMES



PERITONEUM

FORMS VARIOUS FOLDS AND REFLECTIONS

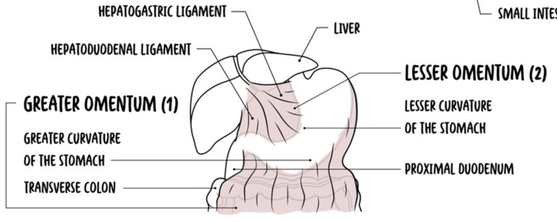


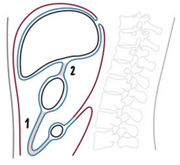
MESENTERY
DOUBLE LAYER OF PERITONEUM
SUSPENDS THE INTESTINES FROM
THE POSTERIOR ABDOMINAL WALL

SIGMOID MESOCOLON

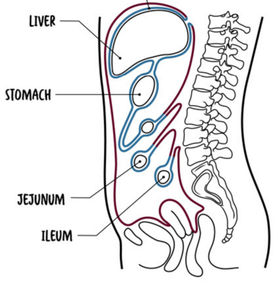
SMALL INTESTINE

PERITONEAL LIGAMENTS
CONNECT ORGANS TO EACH OTHER/ABDOMINAL WALL

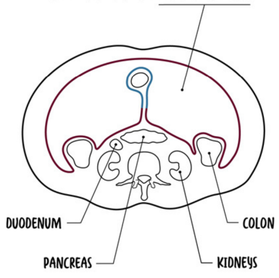


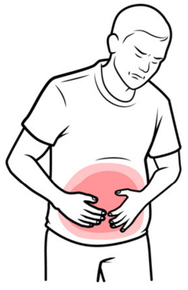


INTRAPERITONEAL ORGANS
COVERED BY VISCERAL PERITONEUM
RELATIVELY MOBILE



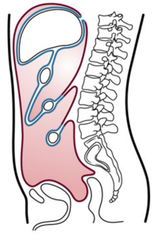
RETROPERITONEAL ORGANS
PARTIALLY COVERED
LIE POSTERIOR TO THE PERITONEAL CAVITY





ABDOMINAL PAIN
GUARDING
REBOUND TENDERNESS

PERITONITIS (INFLAMMATION OF THE PERITONEUM)
- INFECTION (E.G. PERFORATED VISCUS, APPENDICITIS)
- CHEMICAL IRRITATION (E.G. BILE OR GASTRIC ACID LEAKAGE)



LARGE SURFACE AREA AND RICH VASCULARITY
-> RAPID SPREAD OF INFECTION OR MALIGNANCY

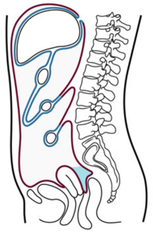
↓ TUBERCULOUS PERITONITIS

↓ PERITONEAL CARCINOMATOSIS

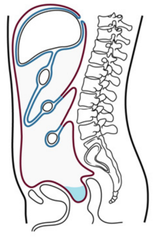
CLINICAL RELEVANCE
- ACCUMULATION OF FLUID, PUS, OR BLOOD

HEPATORENAL RECESS
(MORRISON'S POUCH)

COMMON SITE FOR FLUID COLLECTION
IN TRAUMA OR INFECTION



POUCH OF DOUGLAS
(RECTOUTERINE POUCH)
FEMALES



RECTOVESICAL POUCH
MALES

CAN BE ASSESSED
- CLINICALLY (DIGITAL RECTAL OR VAGINAL EXAMINATION)
- TRANSVAGINAL ULTRASOUND

PERITONEAL DIALYSIS
- REMOVE WASTE PRODUCTS
- EXCESS FLUID FROM THE BLOOD

WHEN THE KIDNEYS
ARE NOT FUNCTIONING PROPERLY