

Embryology and Anatomy of the Ophthalmic Artery

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Osaka, Japan

COI: nothing to declare

ABC-WIN seminar at Val²⁰¹⁹d'Isère, January 13, 2019

Contents of Today's Talk

Embryology of the ophthalmic artery

its origin, courses, and variations

Anatomy of the ophthalmic artery

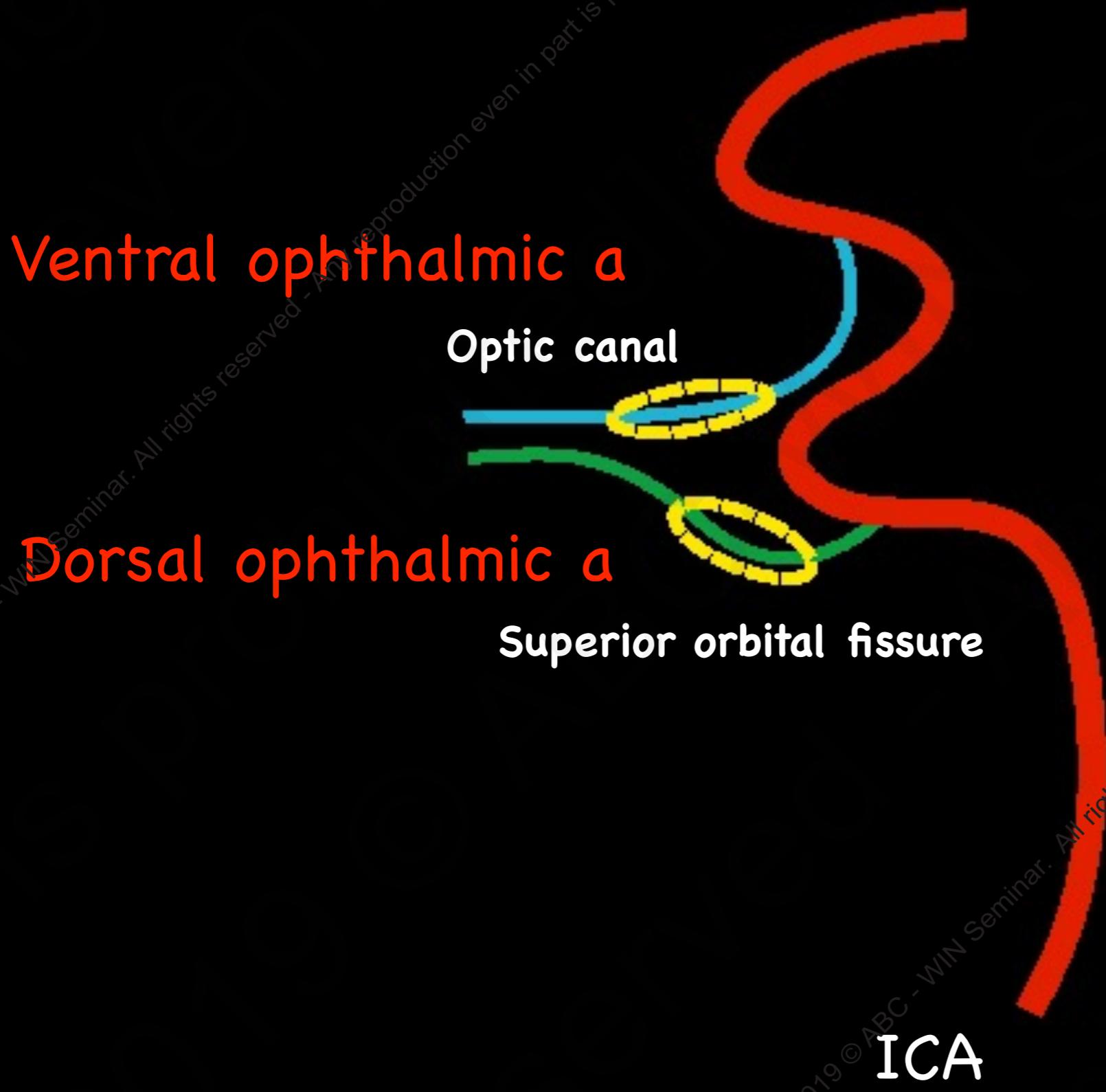
Especially, anastomoses between ophthalmic artery and ECA branches

Embryology of the ophthalmic artery

Misconception among neuroradiological fields

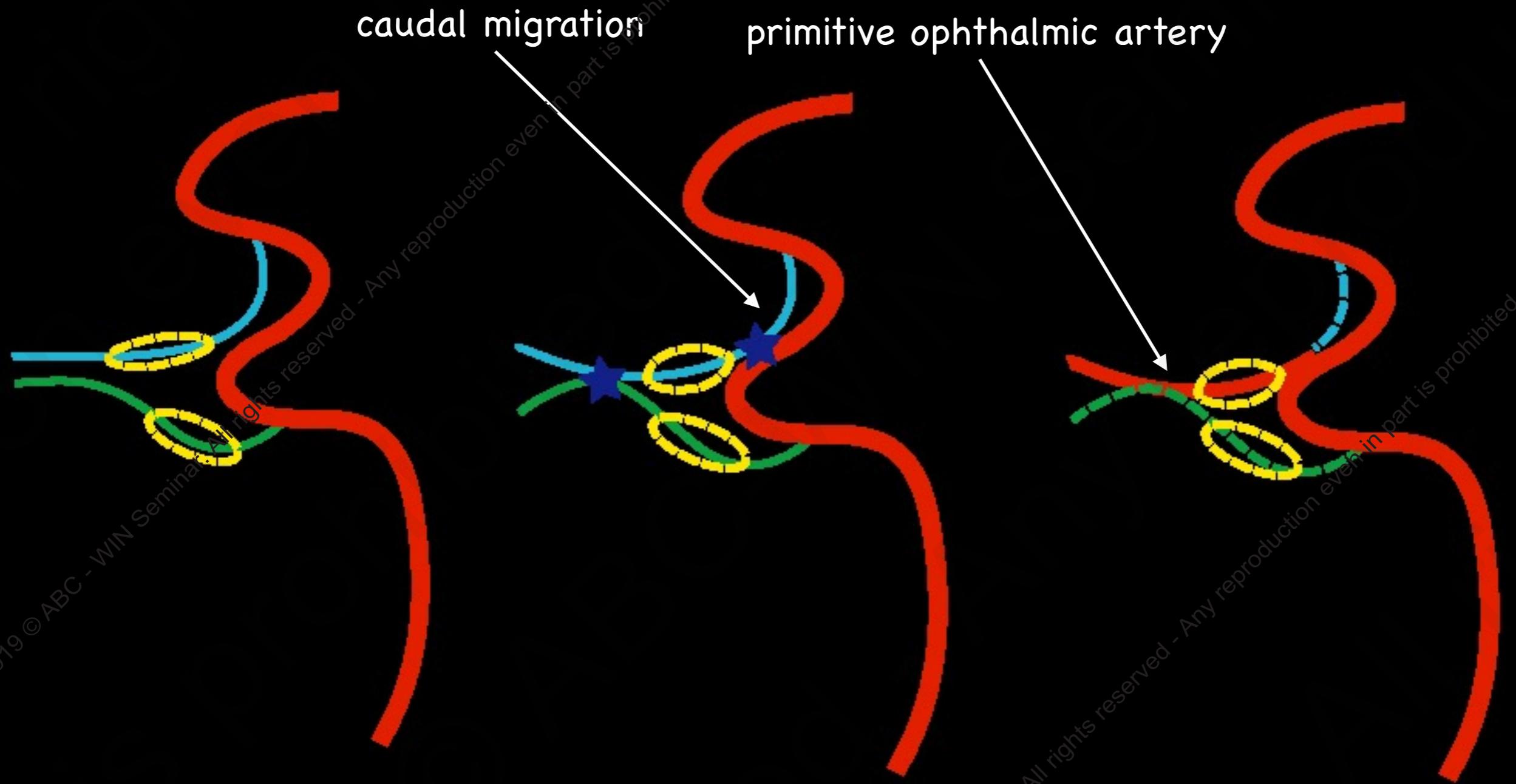
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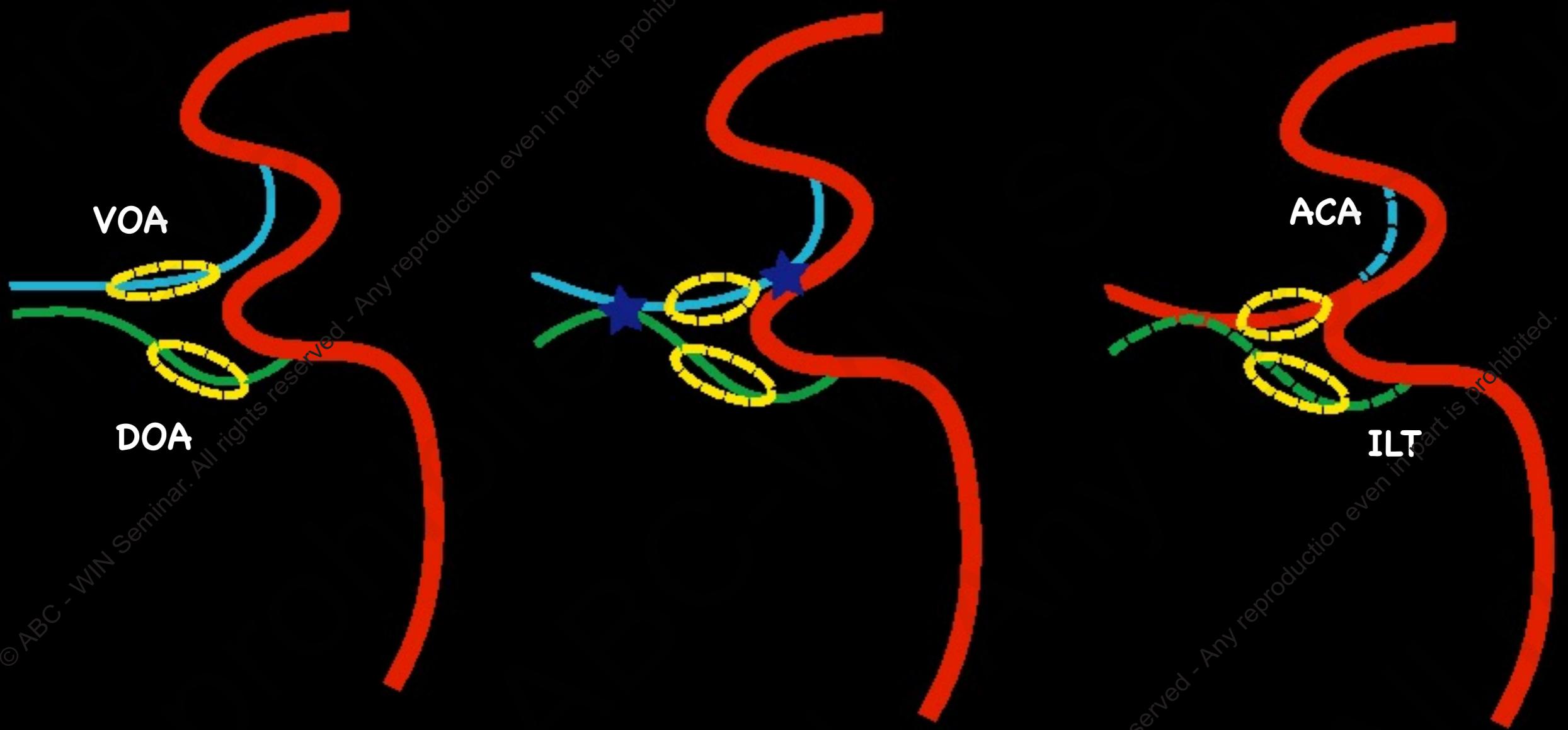
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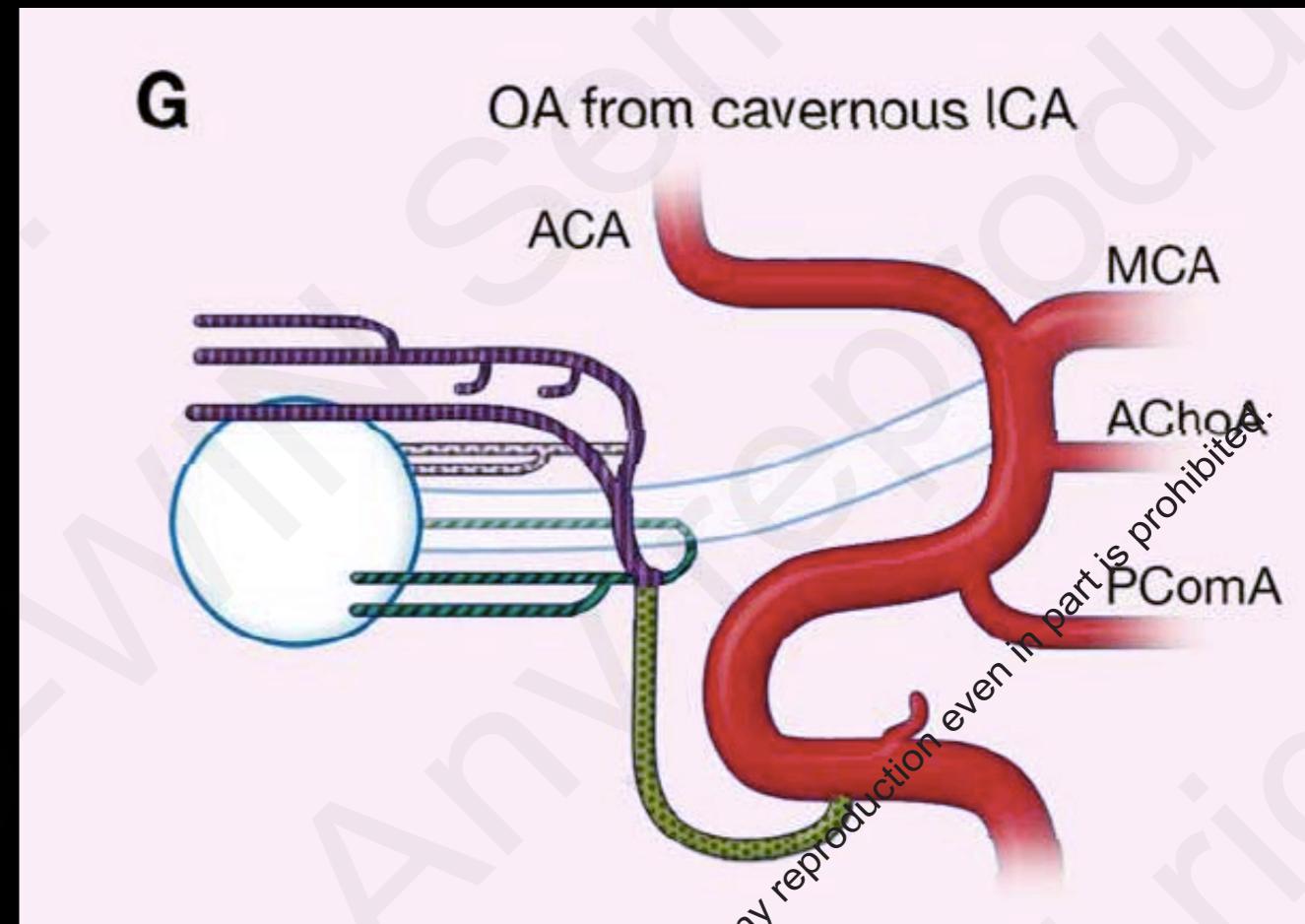
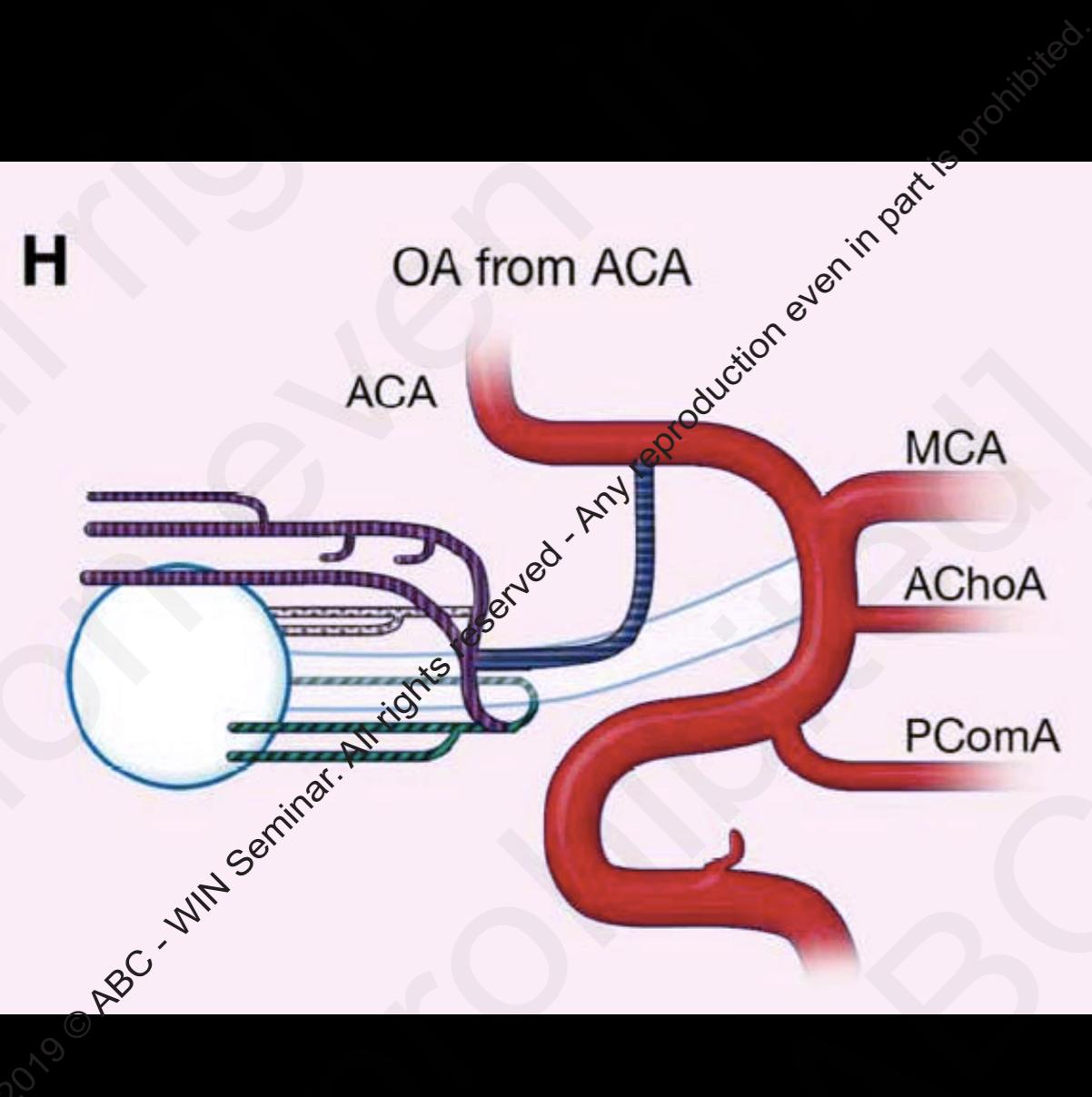
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Lasjaunias P: 1977

ACA (A1) origin ophthalmic a is a remnant of ventral ophthalmic a
while ILT origin ophthalmic a is a remnant of dorsal ophthalmic a.



Gregg L, 2016 (Johns Hopkins Group)

ACA origin Oph a → recurrent branch of primitive olfactory artery

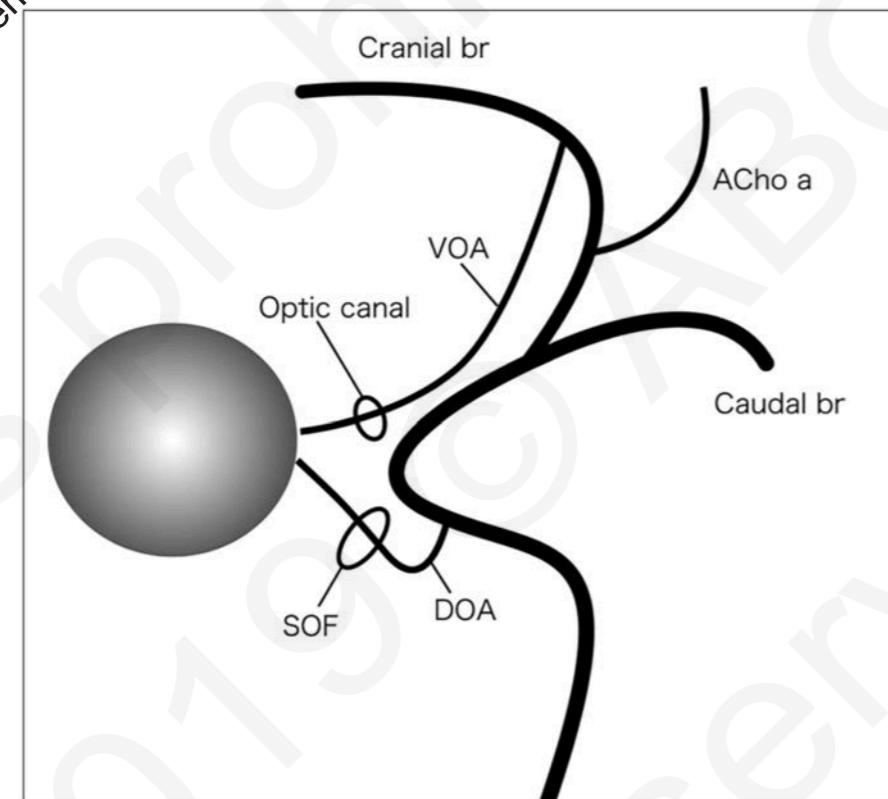
ILT origin Oph a → lateral branch of primitive maxillary artery

Letter to the Editor

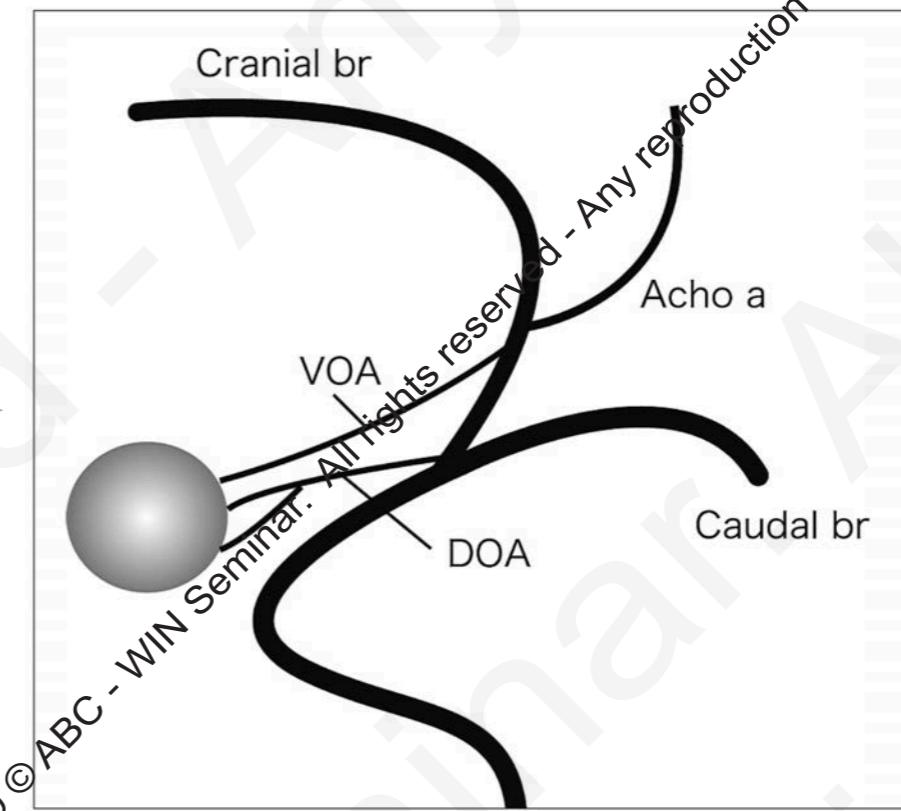
Embryology of the Ophthalmic Artery: a Revived Concept

M. KOMIYAMA

Department of Neurosurgery, Osaka City General Hospital; Osaka Japan

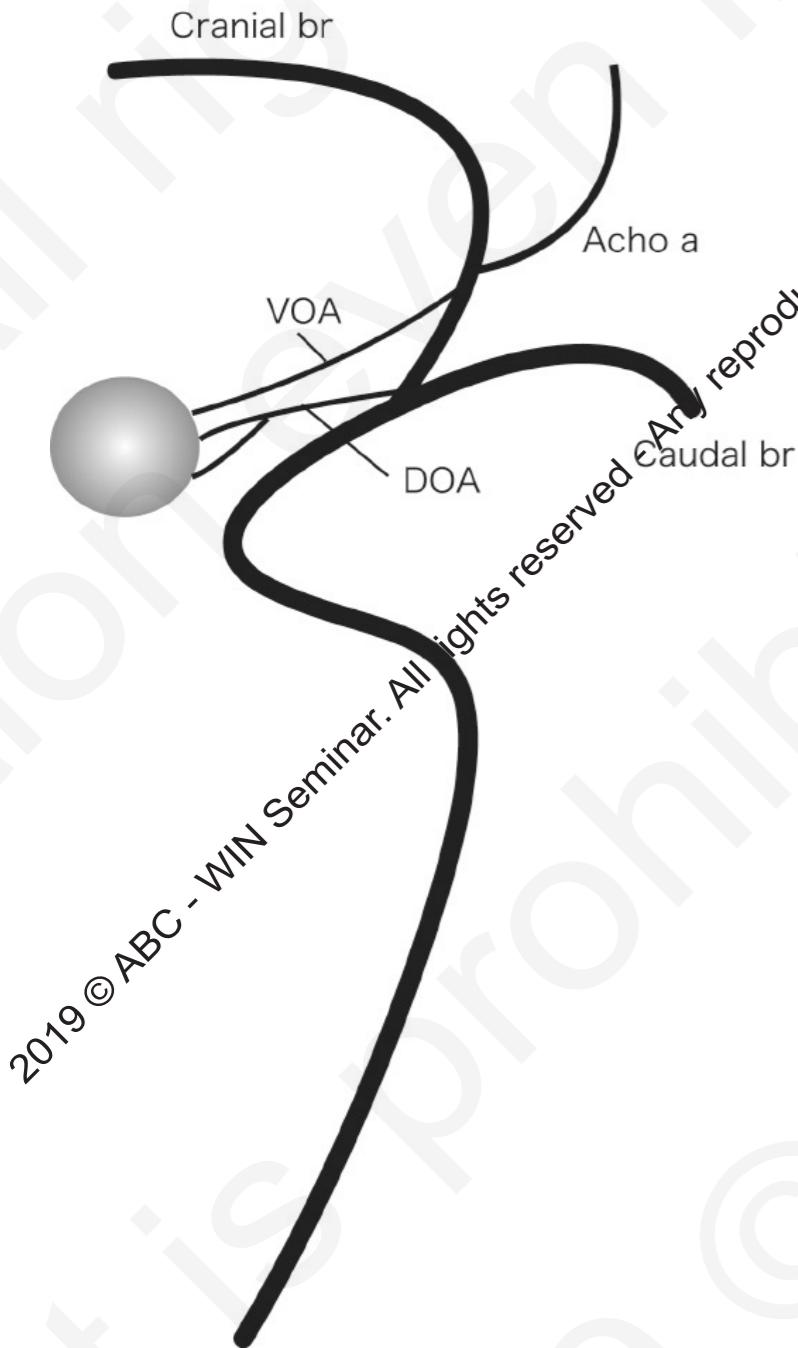


Lasjaunias P



Padgett DH

Padget DH, 1948



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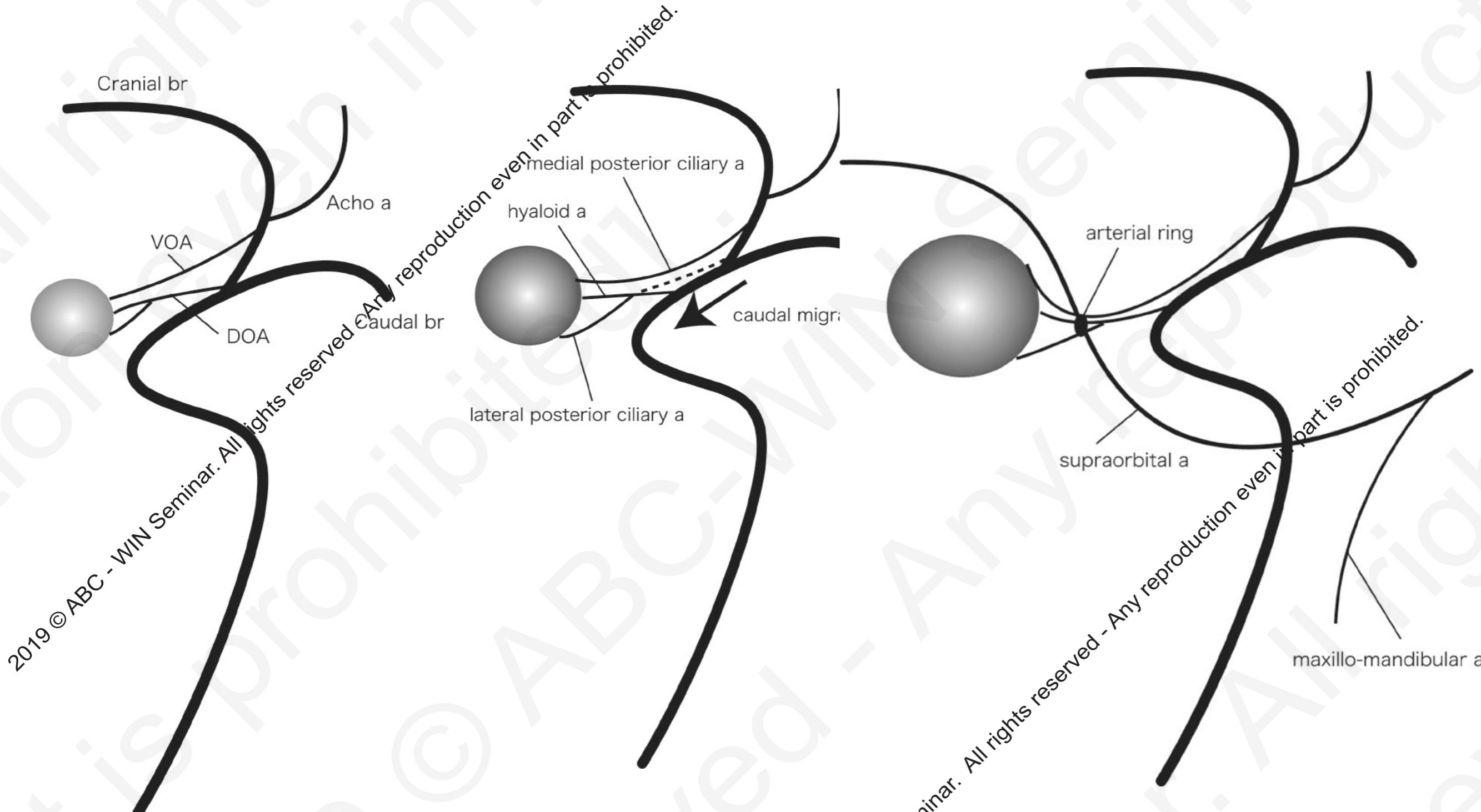


Dorcas Hager Padget (1906-1973)

VOA: ventral ophthalmic artery

DOA: dorsal ophthalmic artery

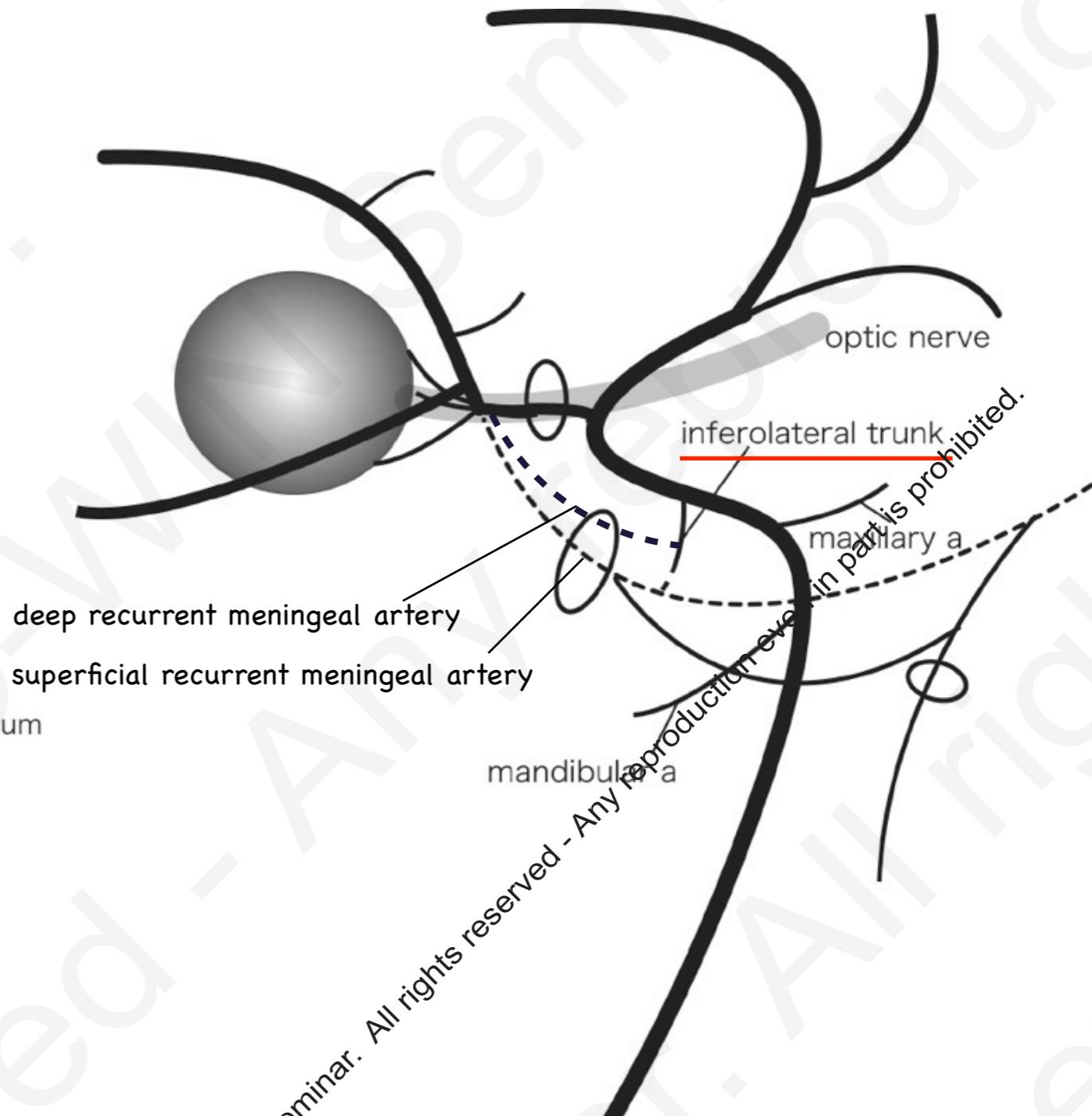
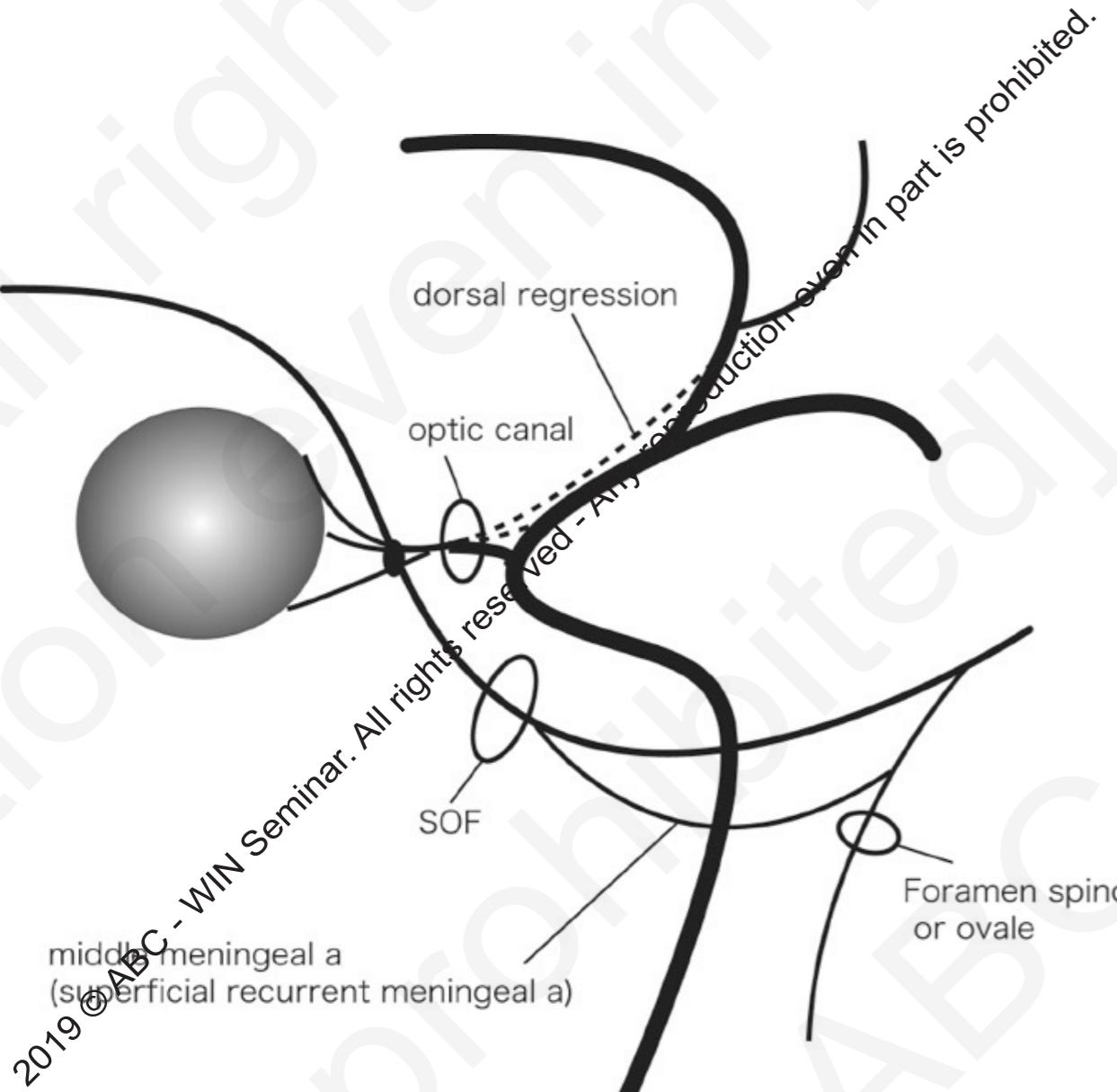
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VOA: ventral ophthalmic artery
DOA: dorsal ophthalmic artery

Padget DH, 1948

Komiya M: letter. Interventional Neuroradiol 2009



Inferolateral trunk (ILT) is not the dorsal ophthalmic artery.

Why are there conflicting explanations on the development of the ophthalmic artery?

Few embryonic studies of the ophthalmic artery in human

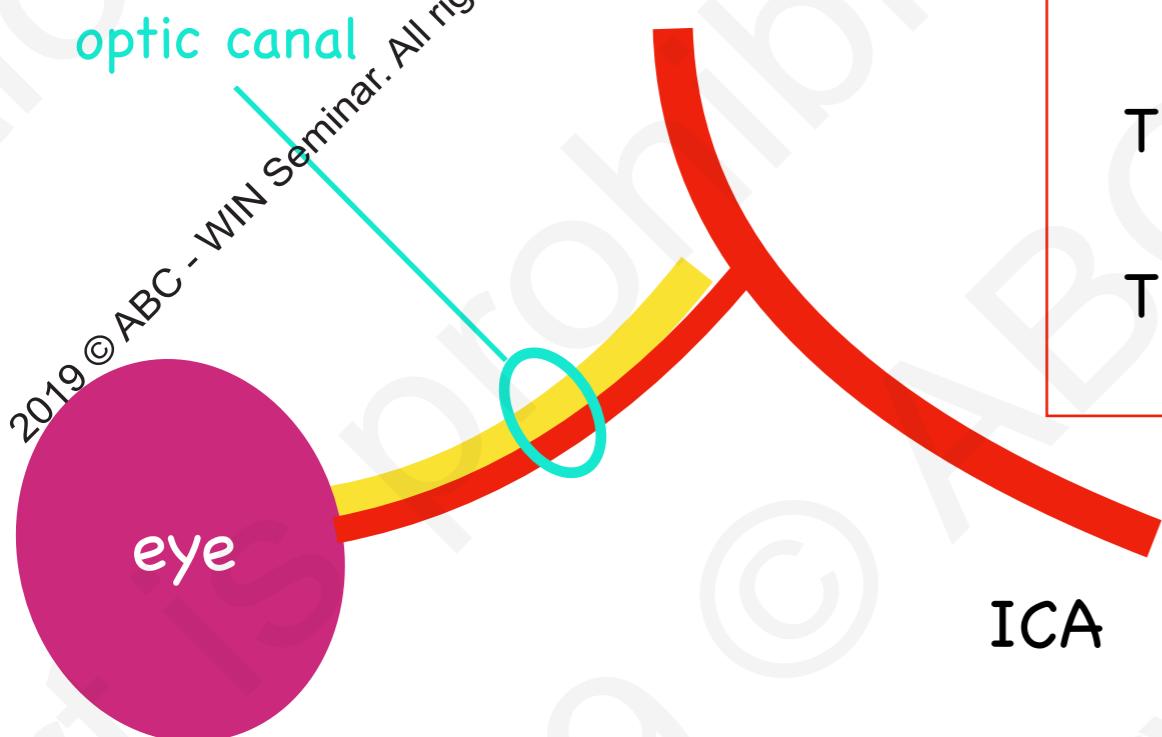
Uncertain role of primitive maxillary artery (Sabin)

No animal embryological data on ventral/dorsal ophthalmic arteries

Is embryology of the animals' and humans' eyes the same? **yes, same!**

We have to speculate the embryology of the ophthalmic artery
with these limited data

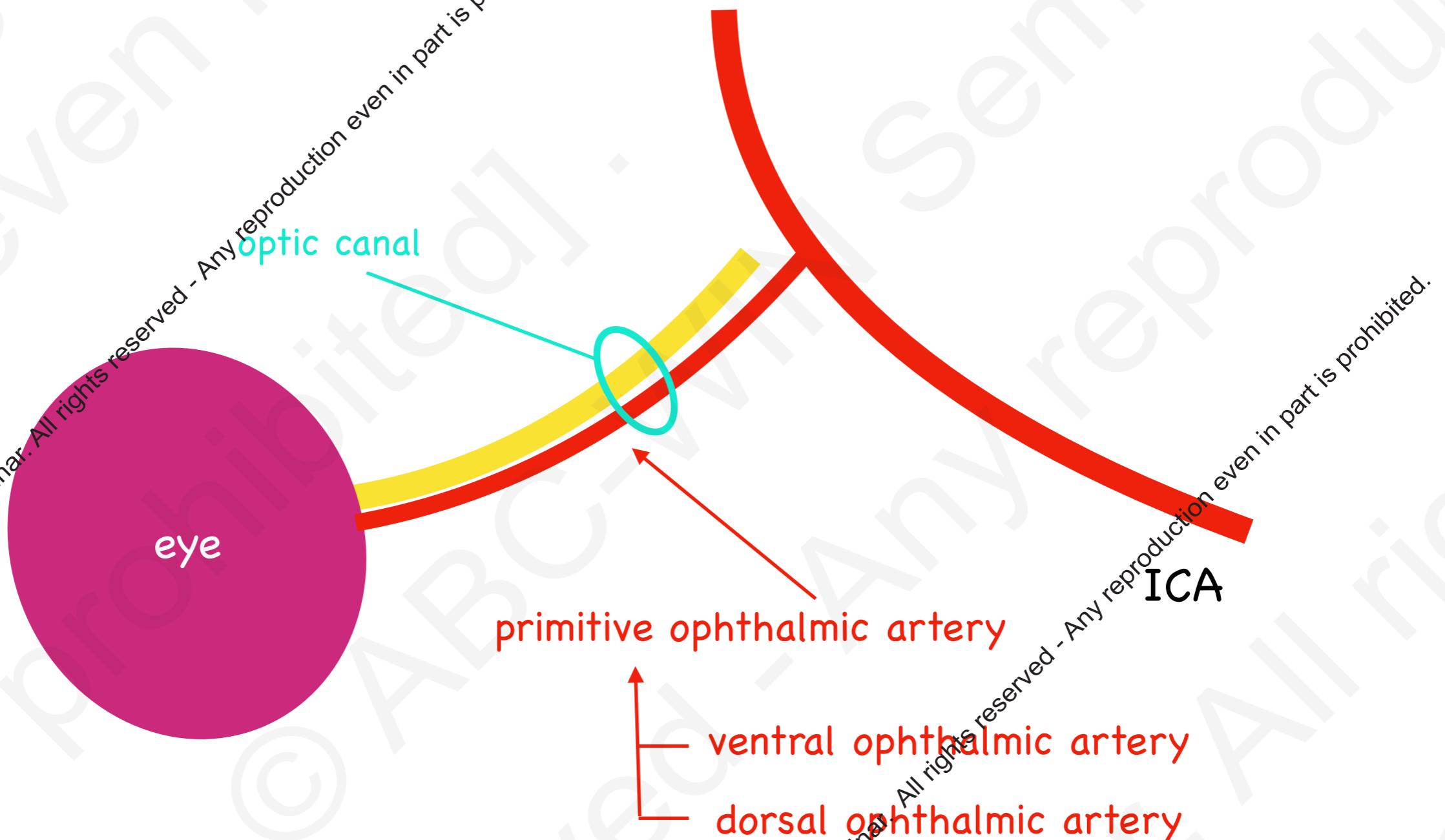
Embryology of Blood Supply to the Eye



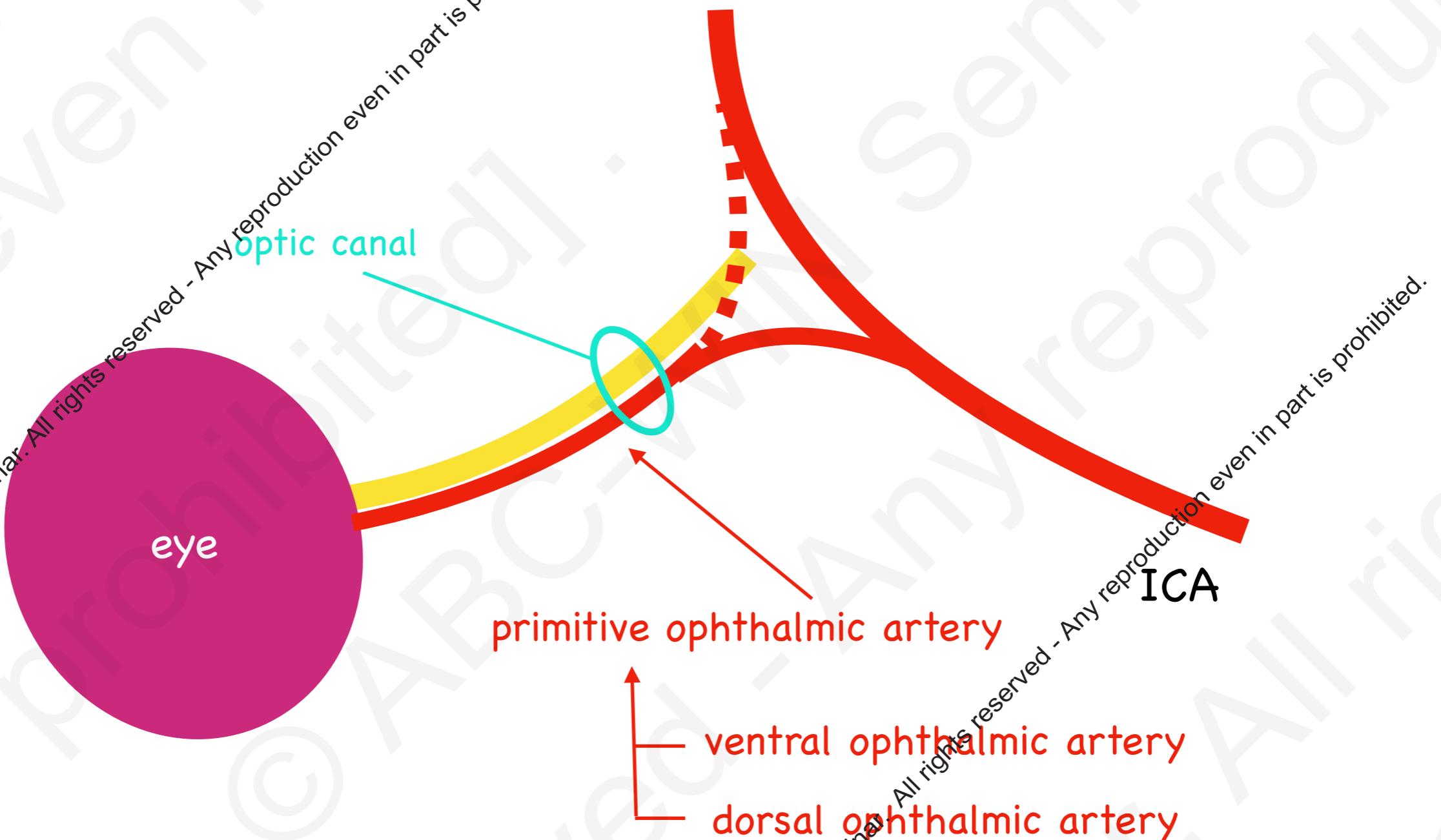
Basic arterial supply to the eye

At the beginning of development, all vertebrates have primitive Oph a of ICA origin.
Primitive Oph a runs through the **optic canal**.
Then, **regression** of some segments follows.
This induces (coincides with) **collateral formation**.

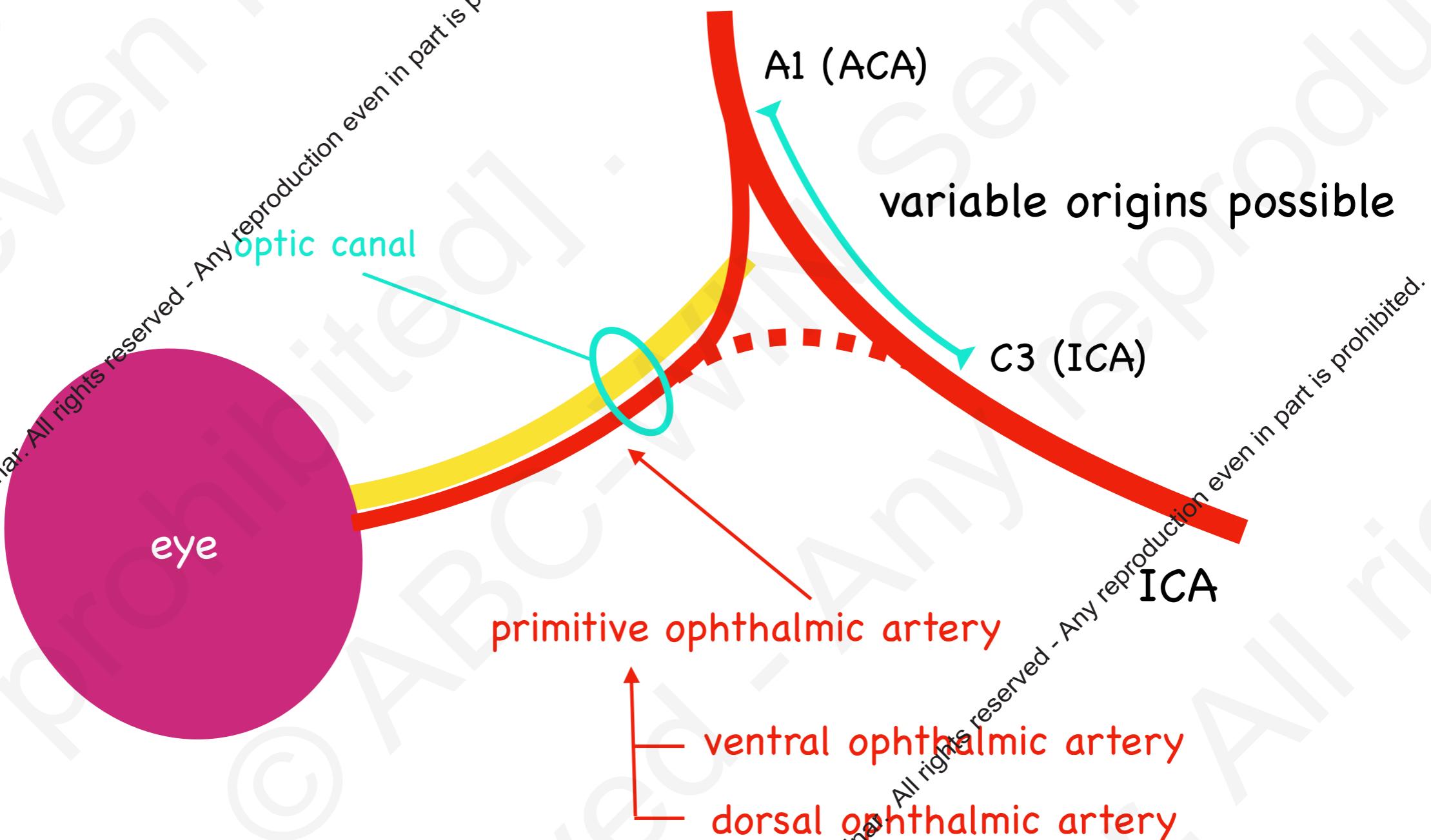
Embryology of Blood Supply to the Eye



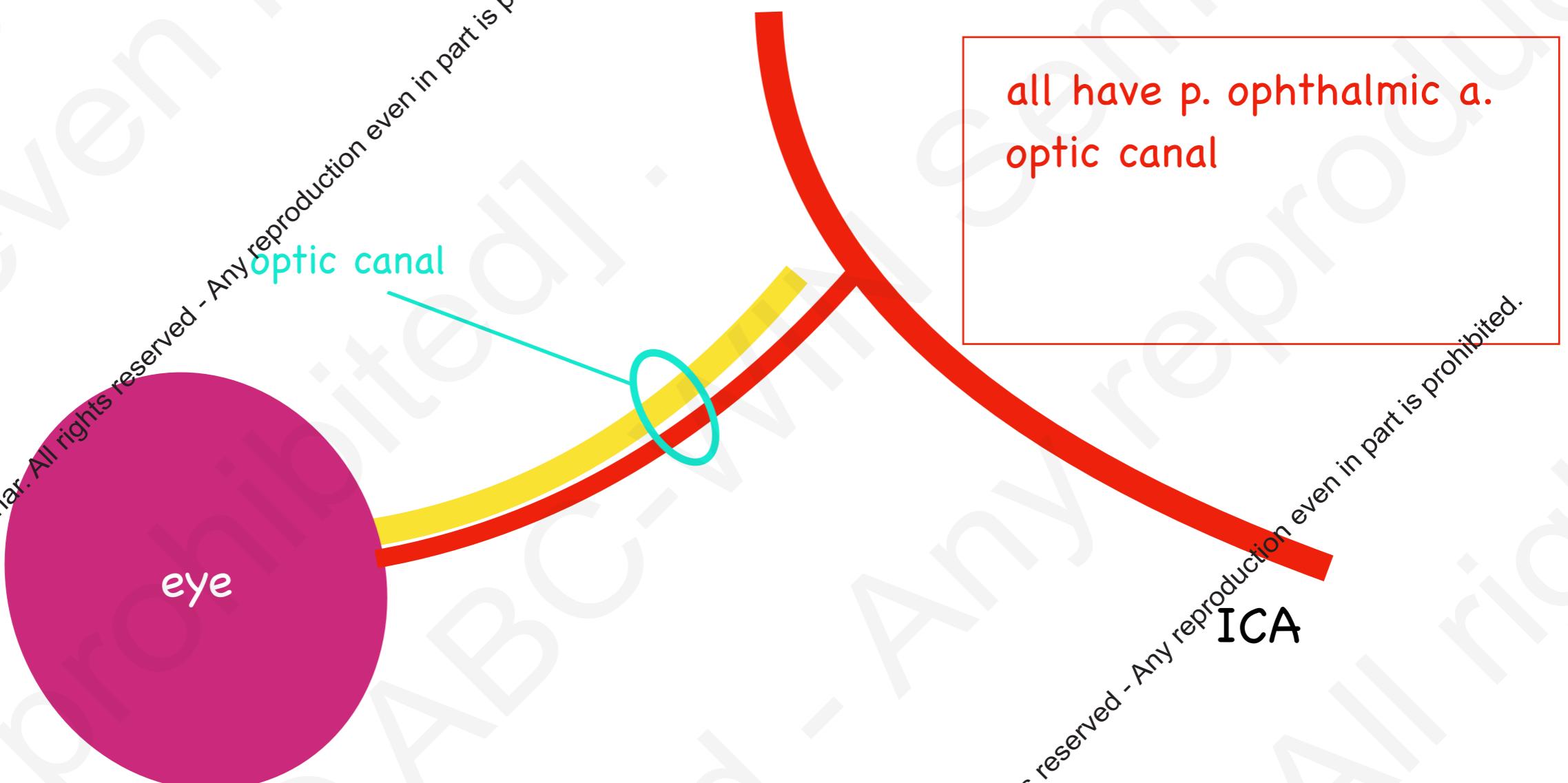
Embryology of Blood Supply to the Eye



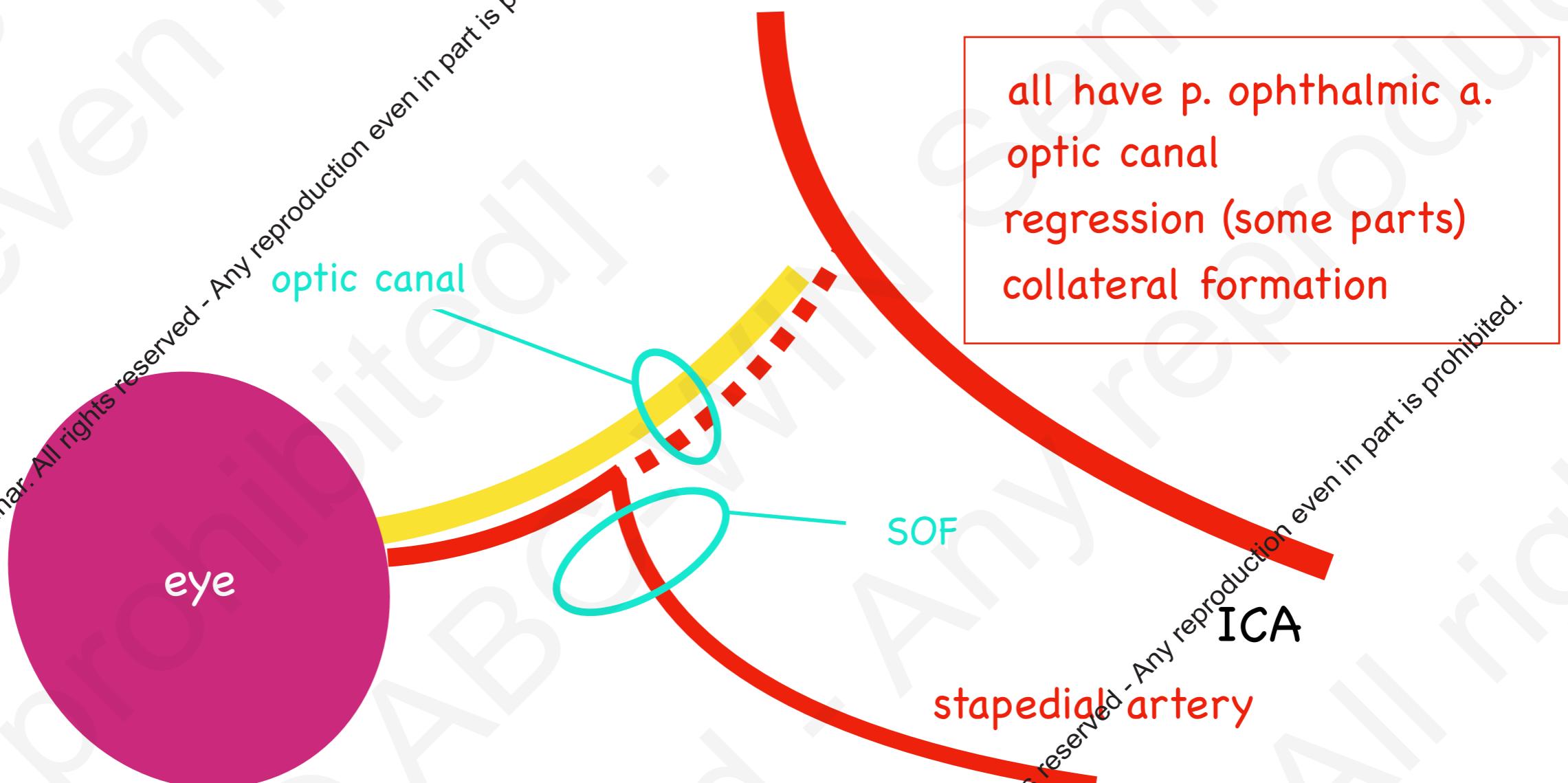
Embryology of Blood Supply to the Eye



Embryology of Blood Supply to the Eye



Embryology of Blood Supply to the Eye



Regression

Pr. maxillary (pre-mandibular) a

Pr. ventral ophthalmic a

Pr. dorsal ophthalmic a

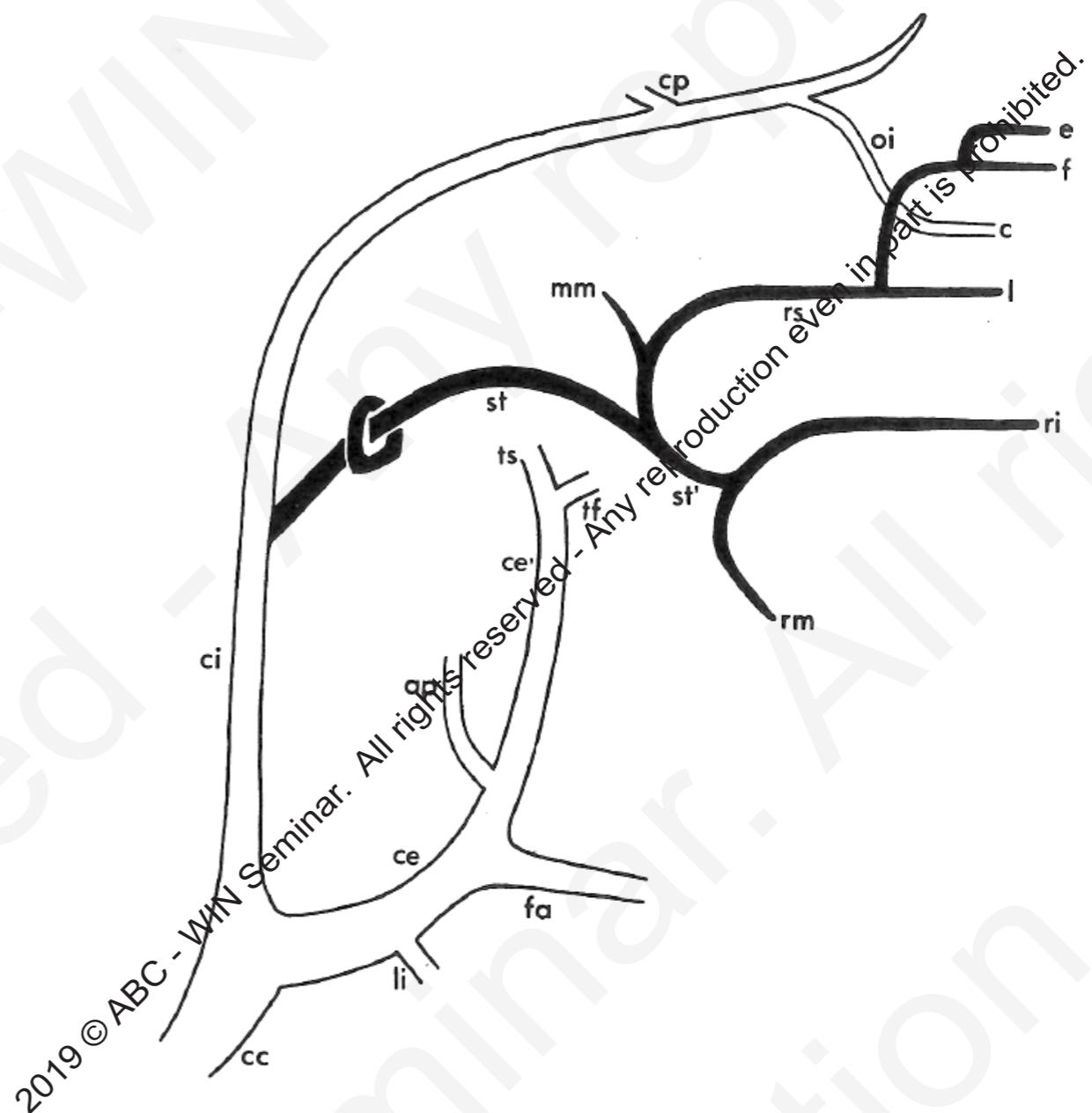
Collaterals are all of stapedial artery origin.

Probably, not of the p. maxillary artery origin.

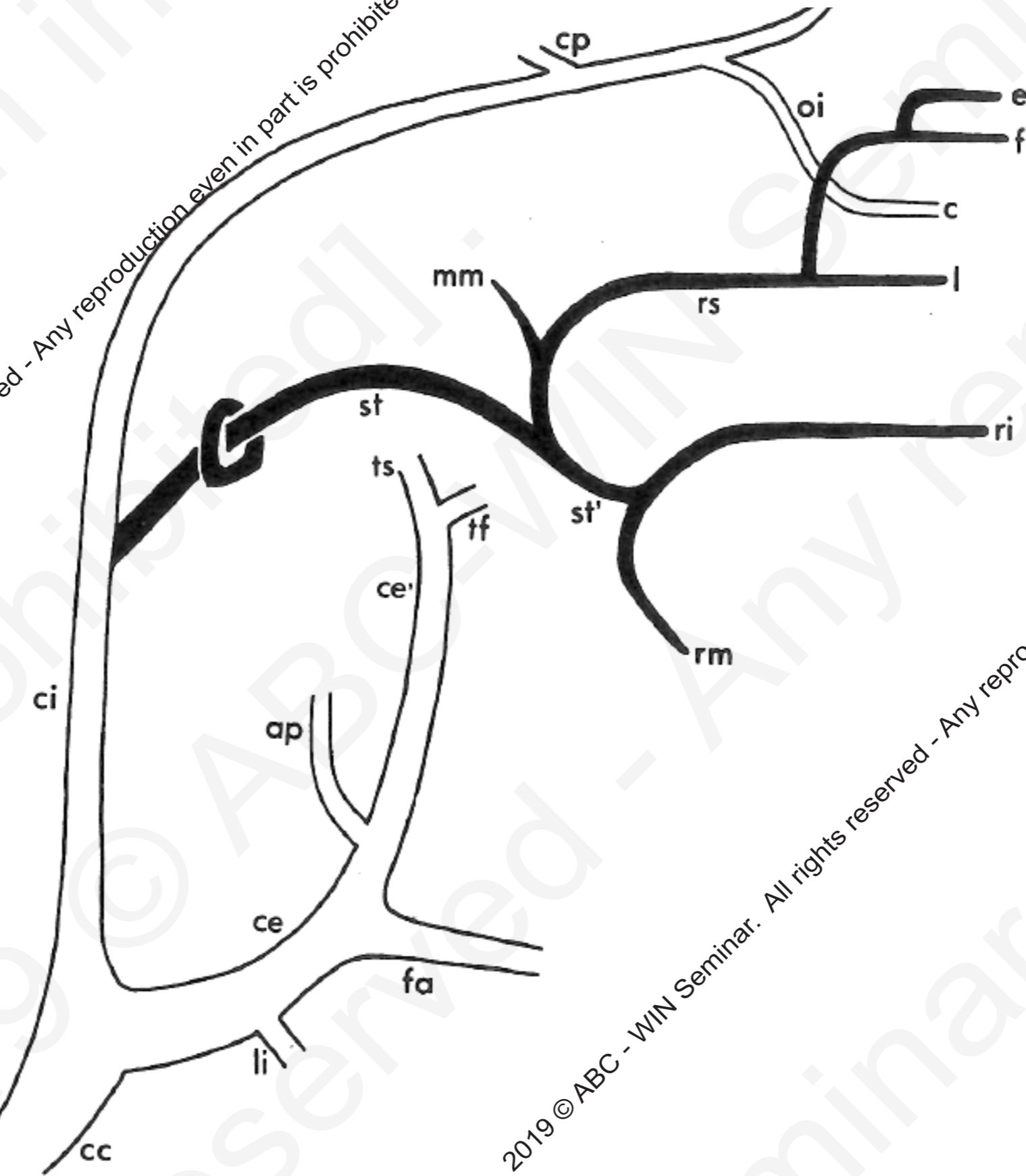
The Cephalic Arterial System in Insectivores, Primates, Rodents and Lagomorphs, with Special Reference to the Systematic Classification

J. BUGGE
Department of Anatomy, The Royal Dental College,
Aarhus (Denmark)

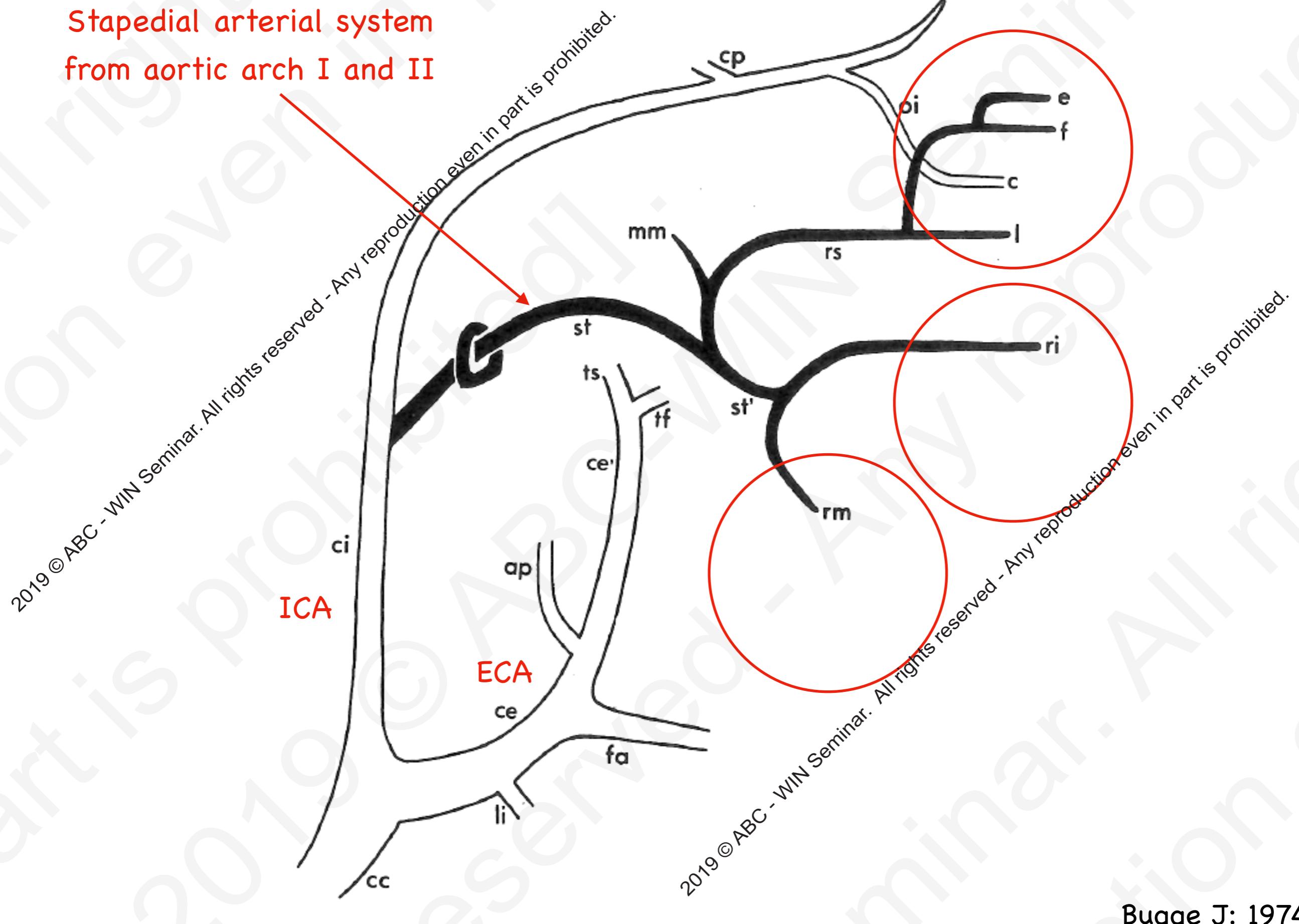
1974



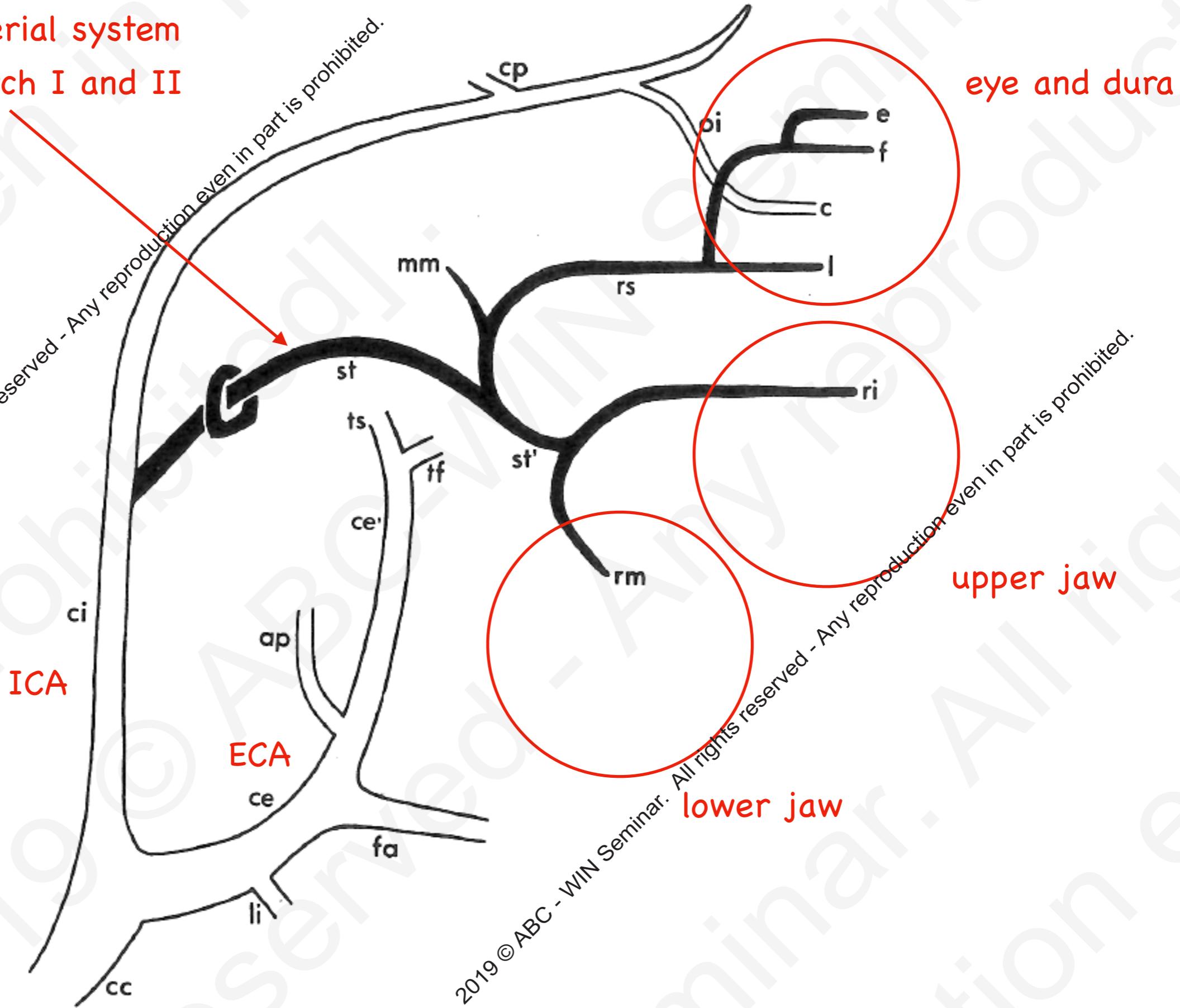
Basic pattern of the cephalic arterial system of the mammals



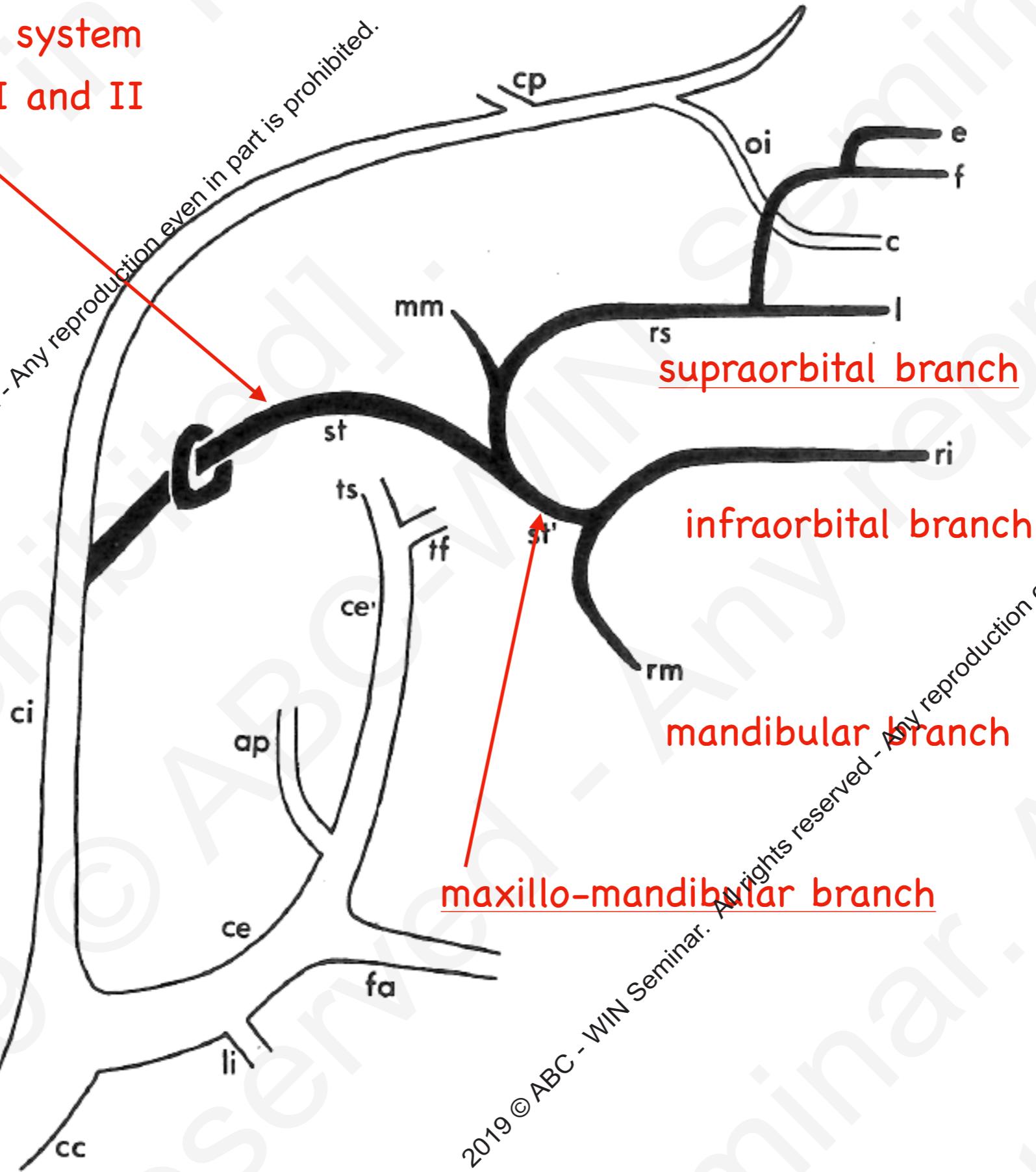
Stapedial arterial system
from aortic arch I and II

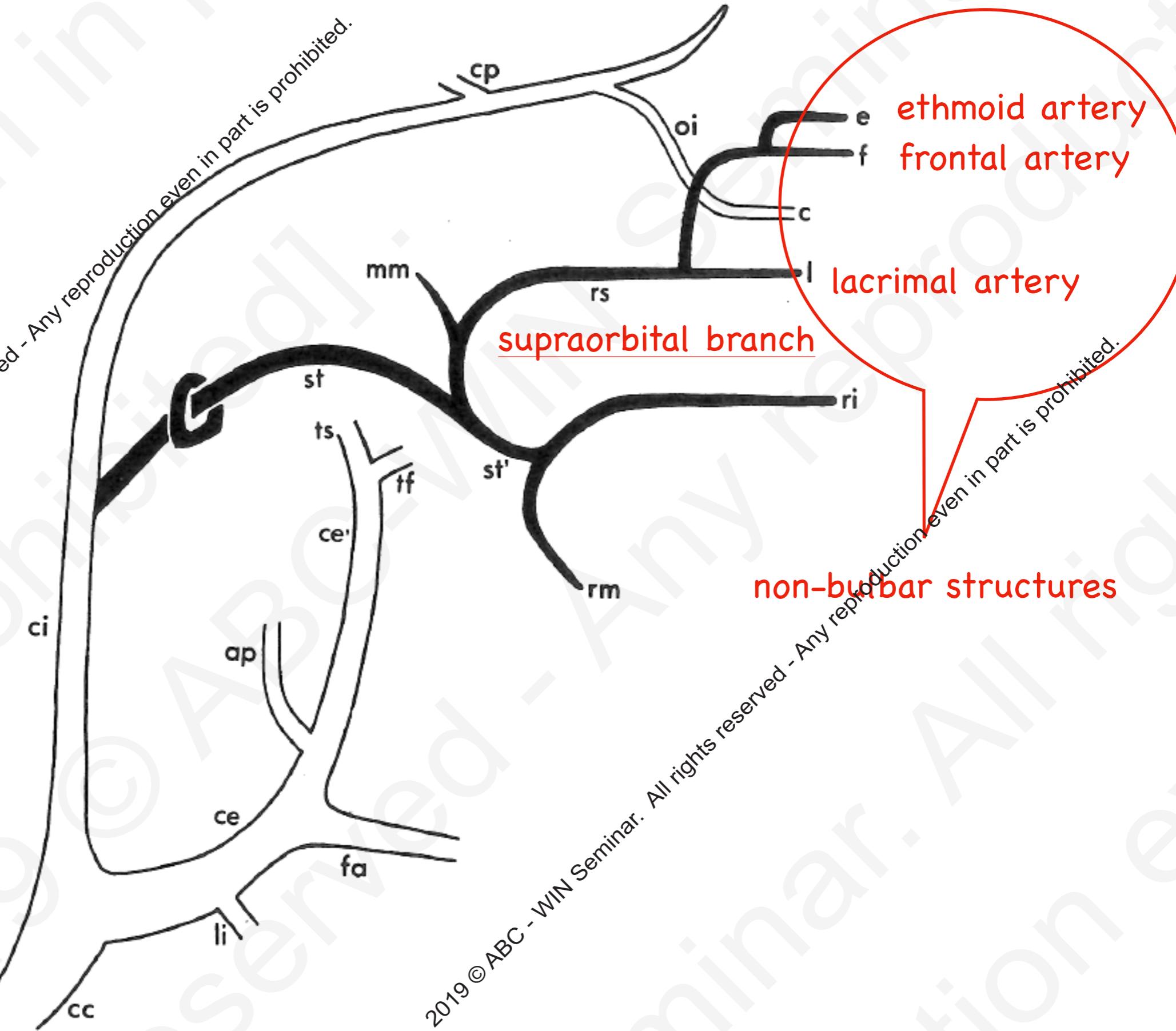


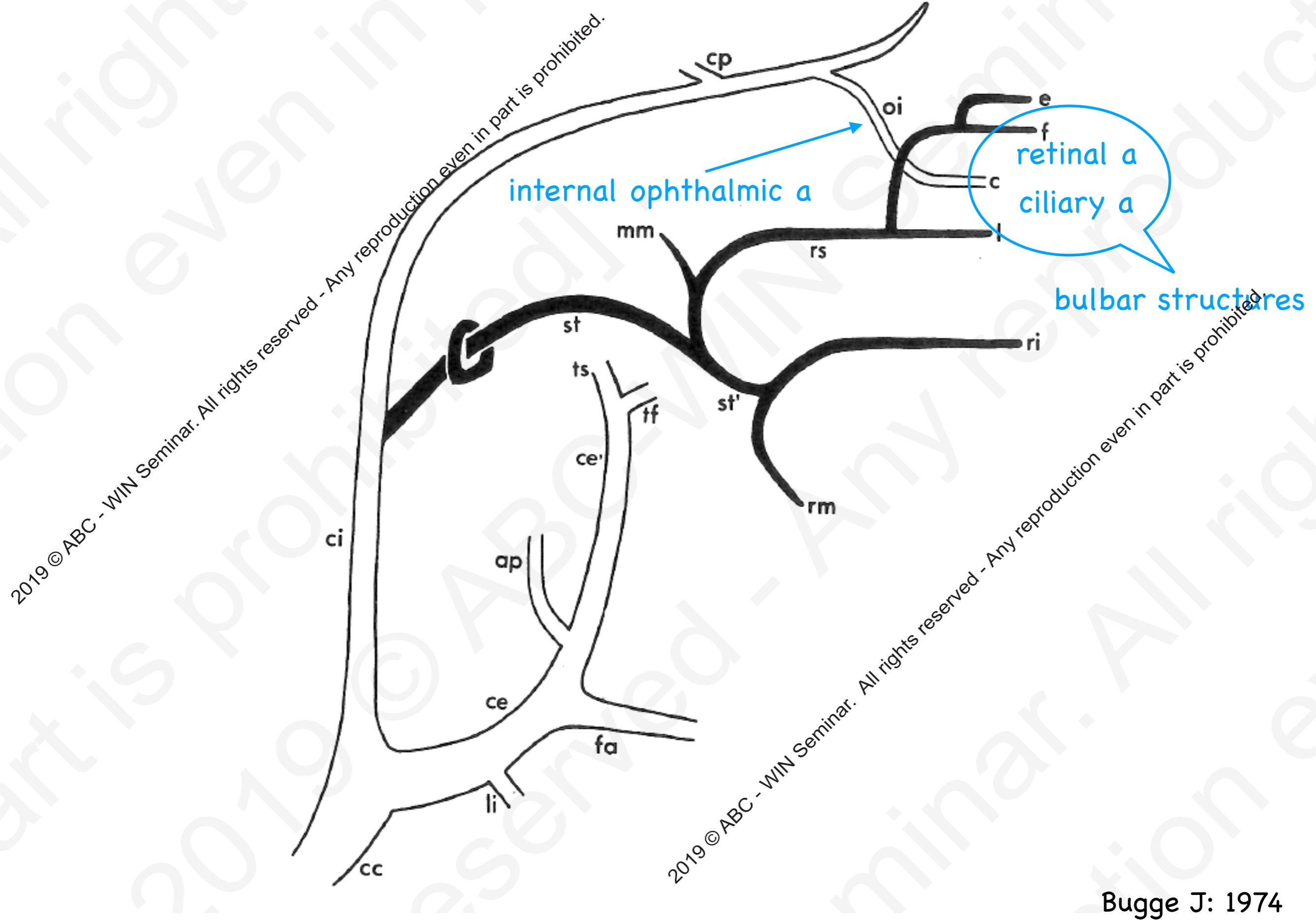
Stapedial arterial system from aortic arch I and II

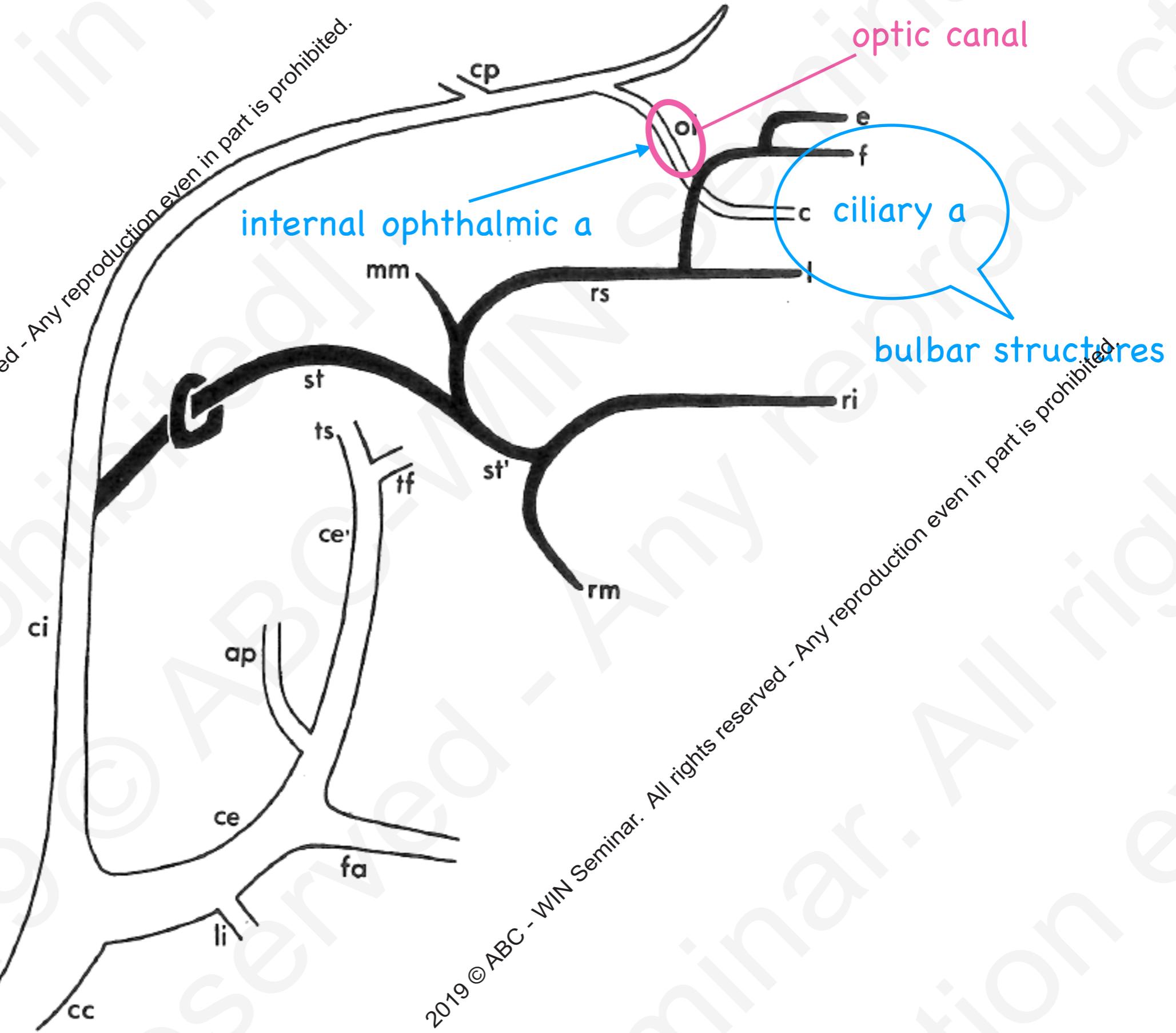


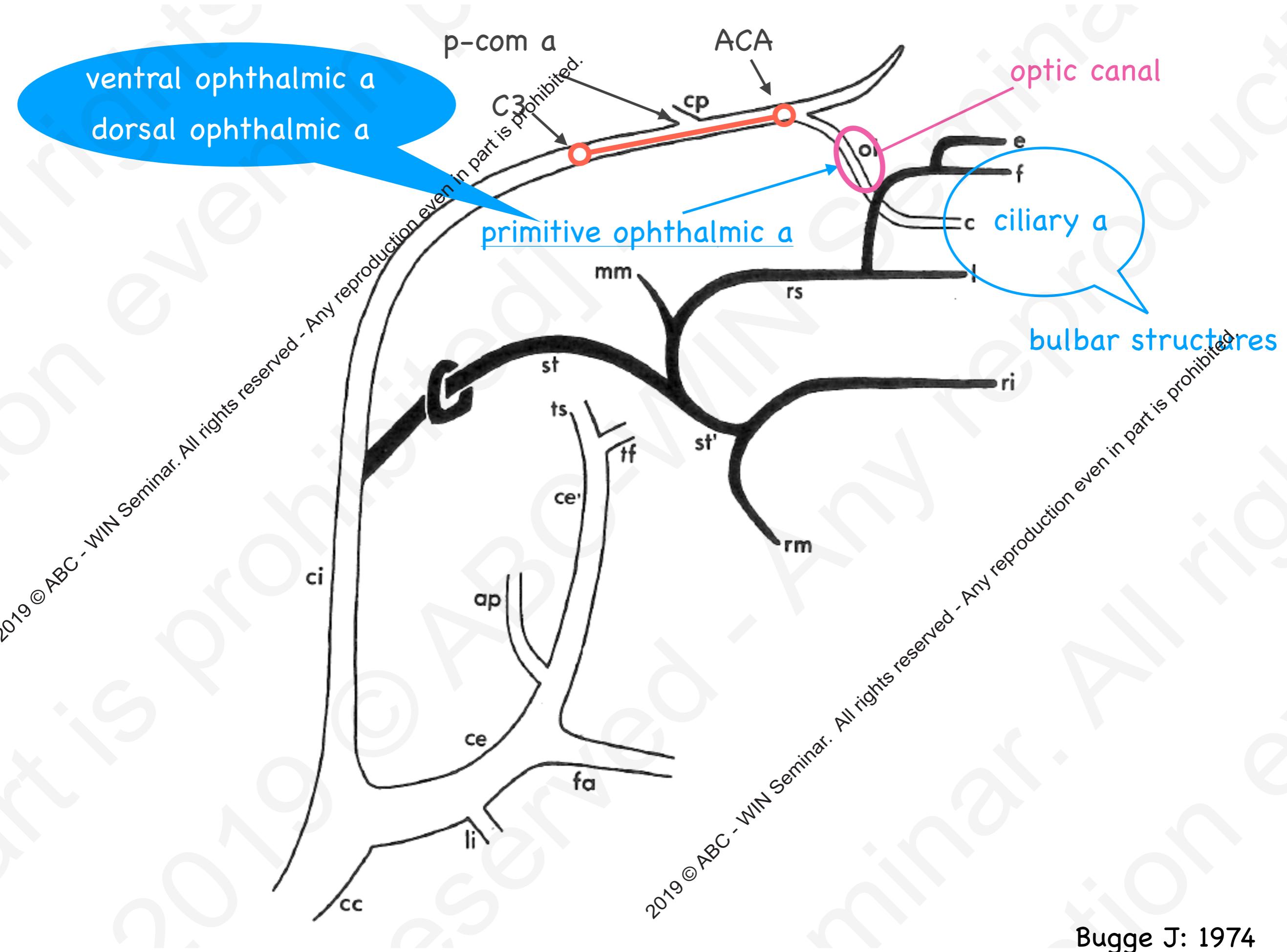
Stapedial arterial system from aortic arch I and II

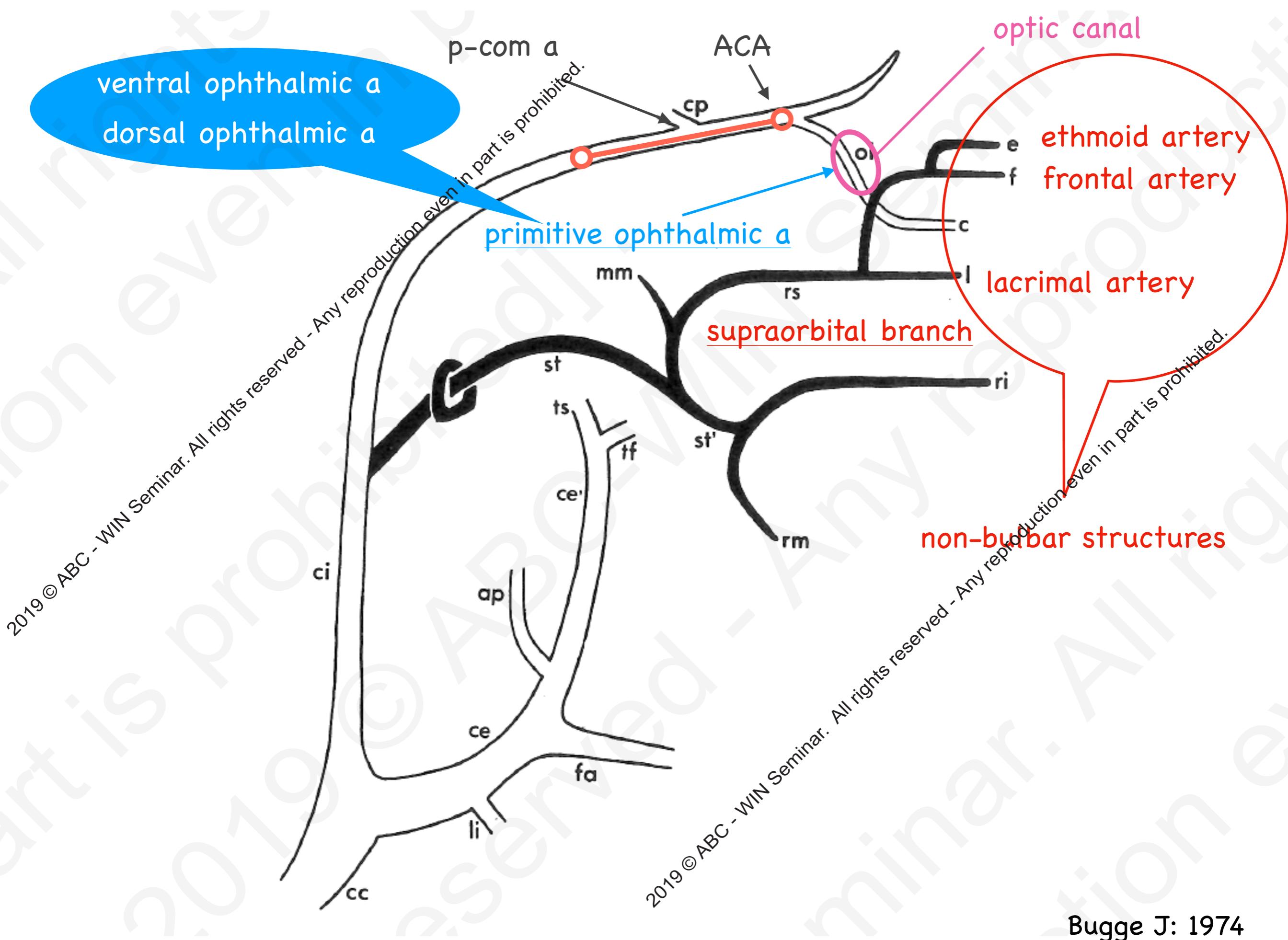




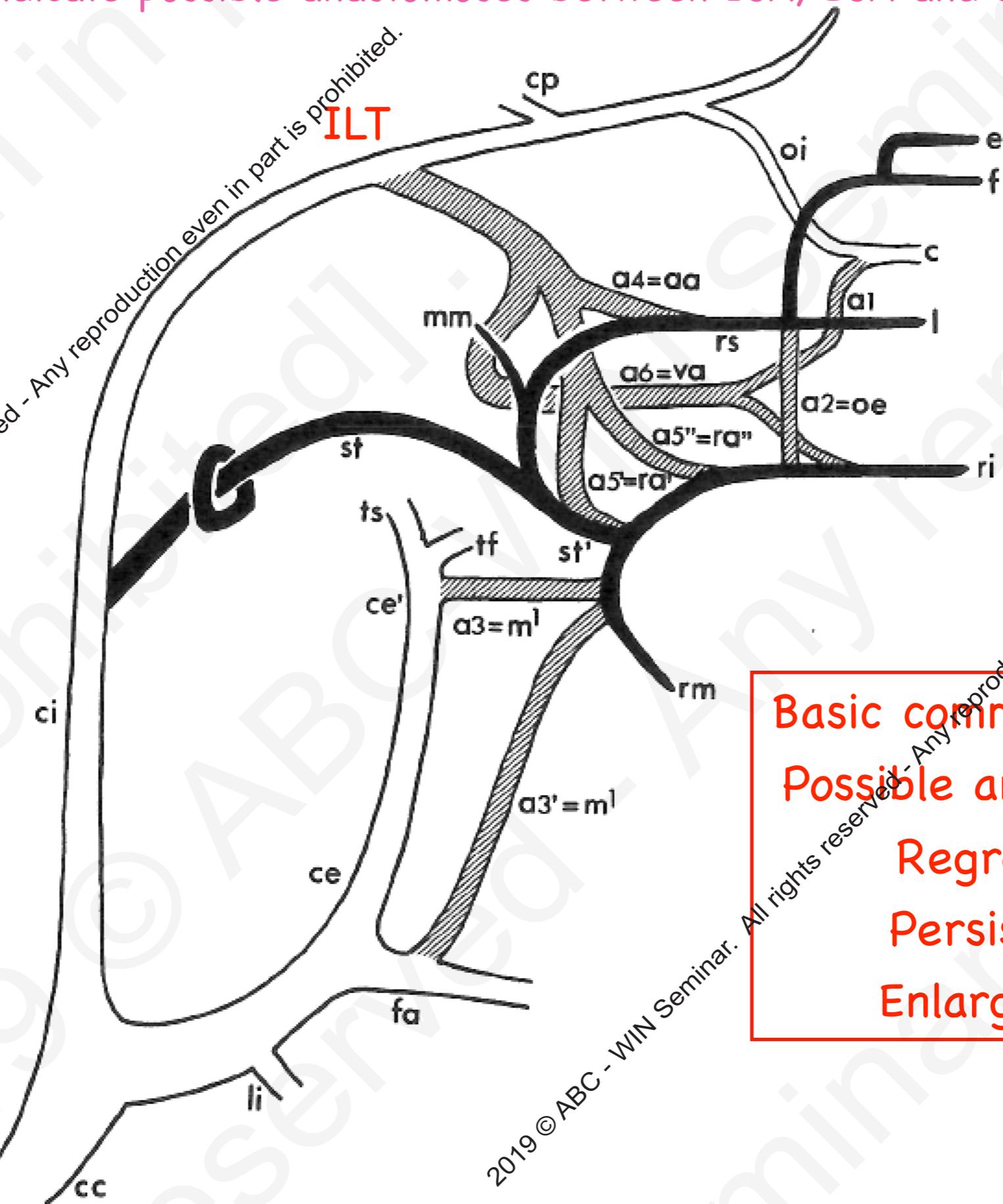








Hatched arteries indicate possible anastomoses between ICA, ECA and stapedial artery.



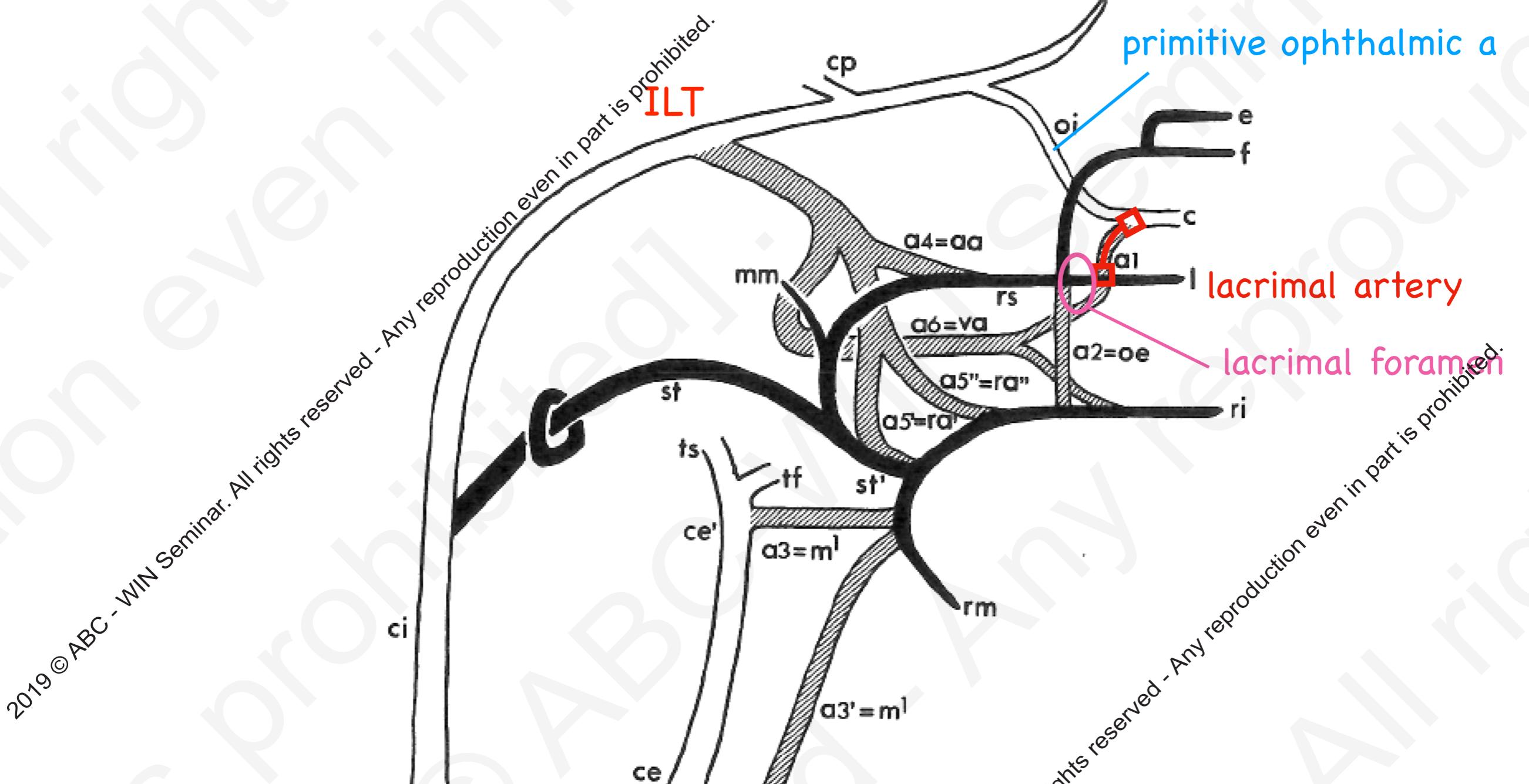
Basic common pattern

Possible anastomoses

Regression

Persistence

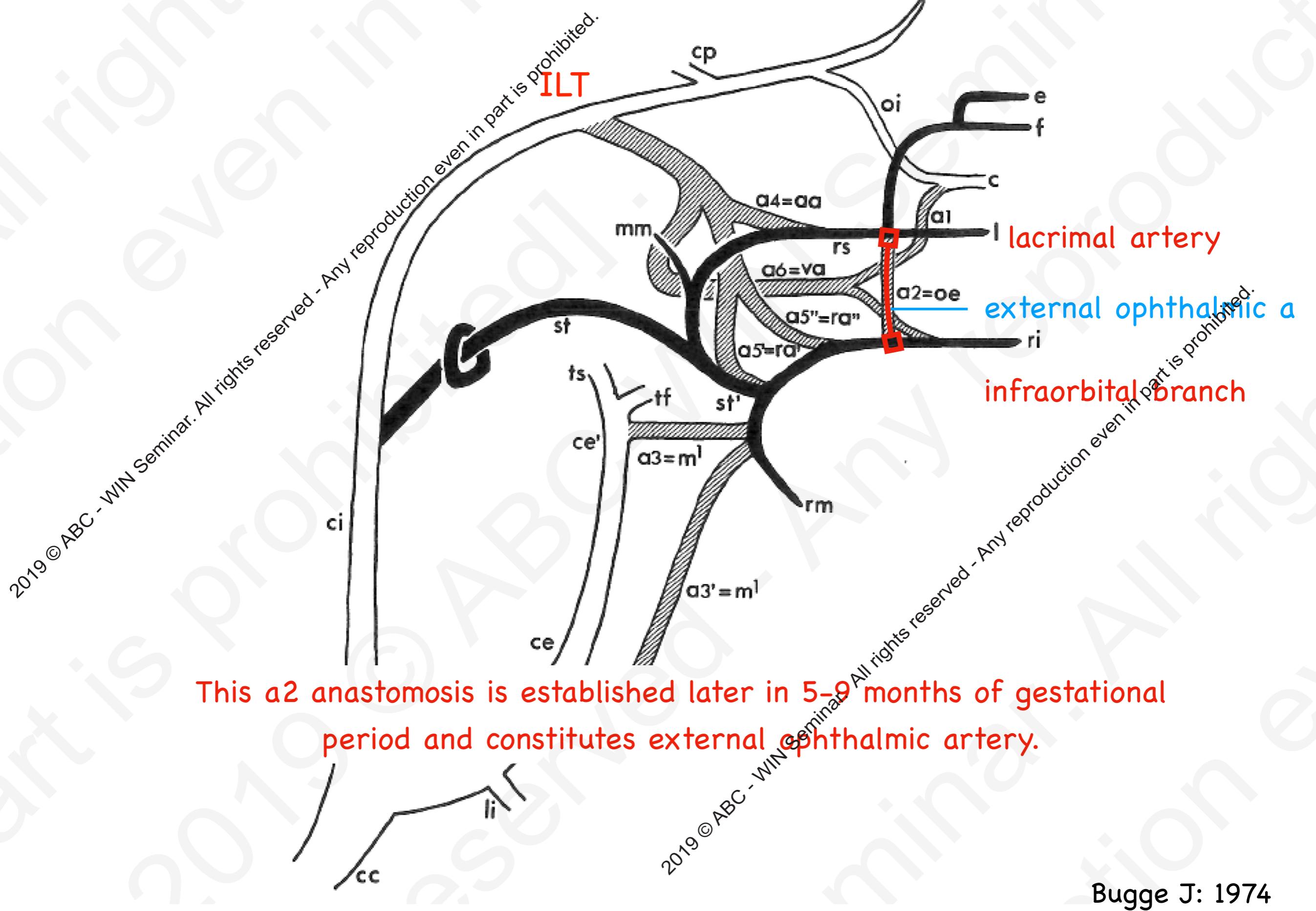
Enlargement

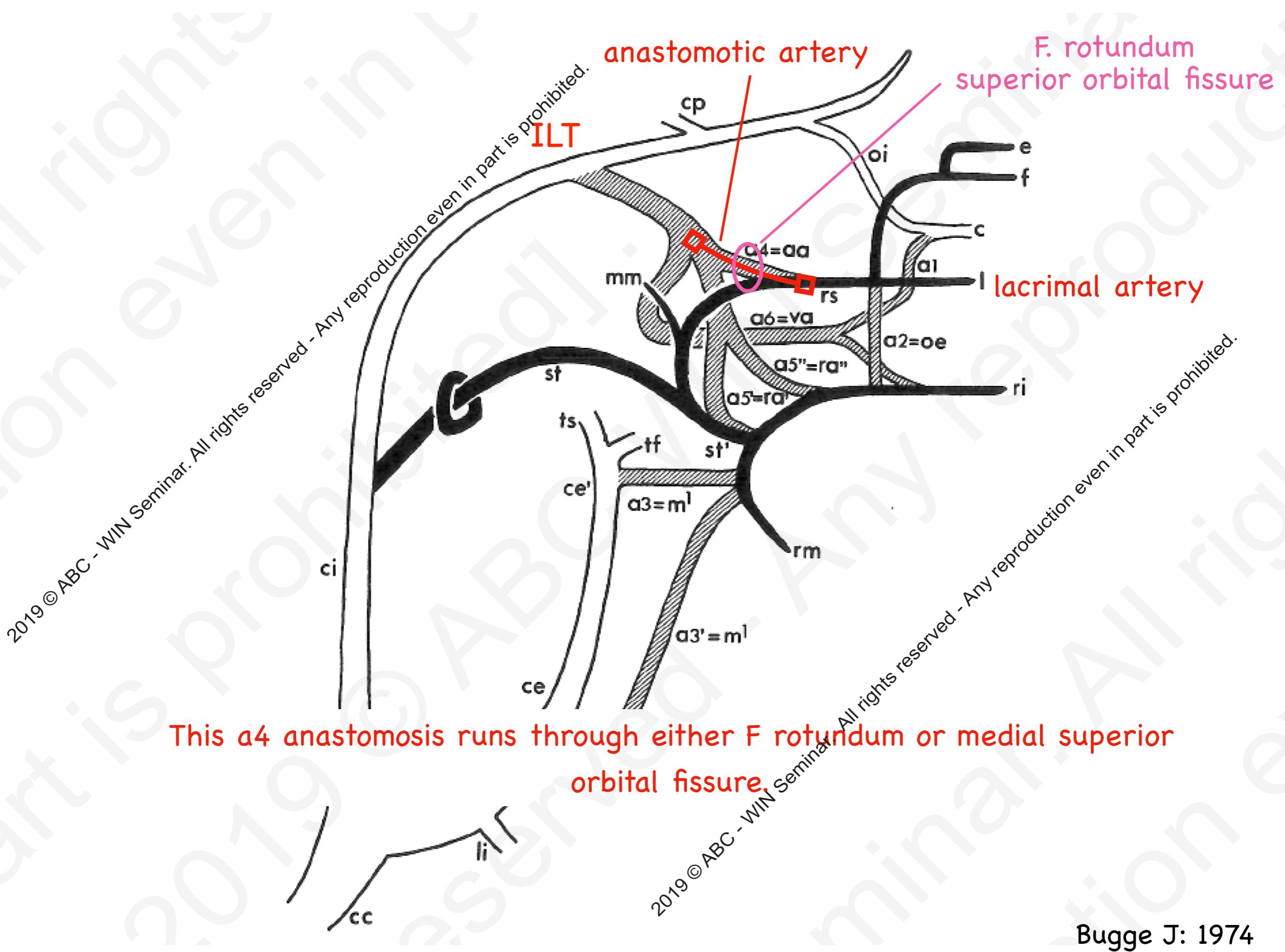


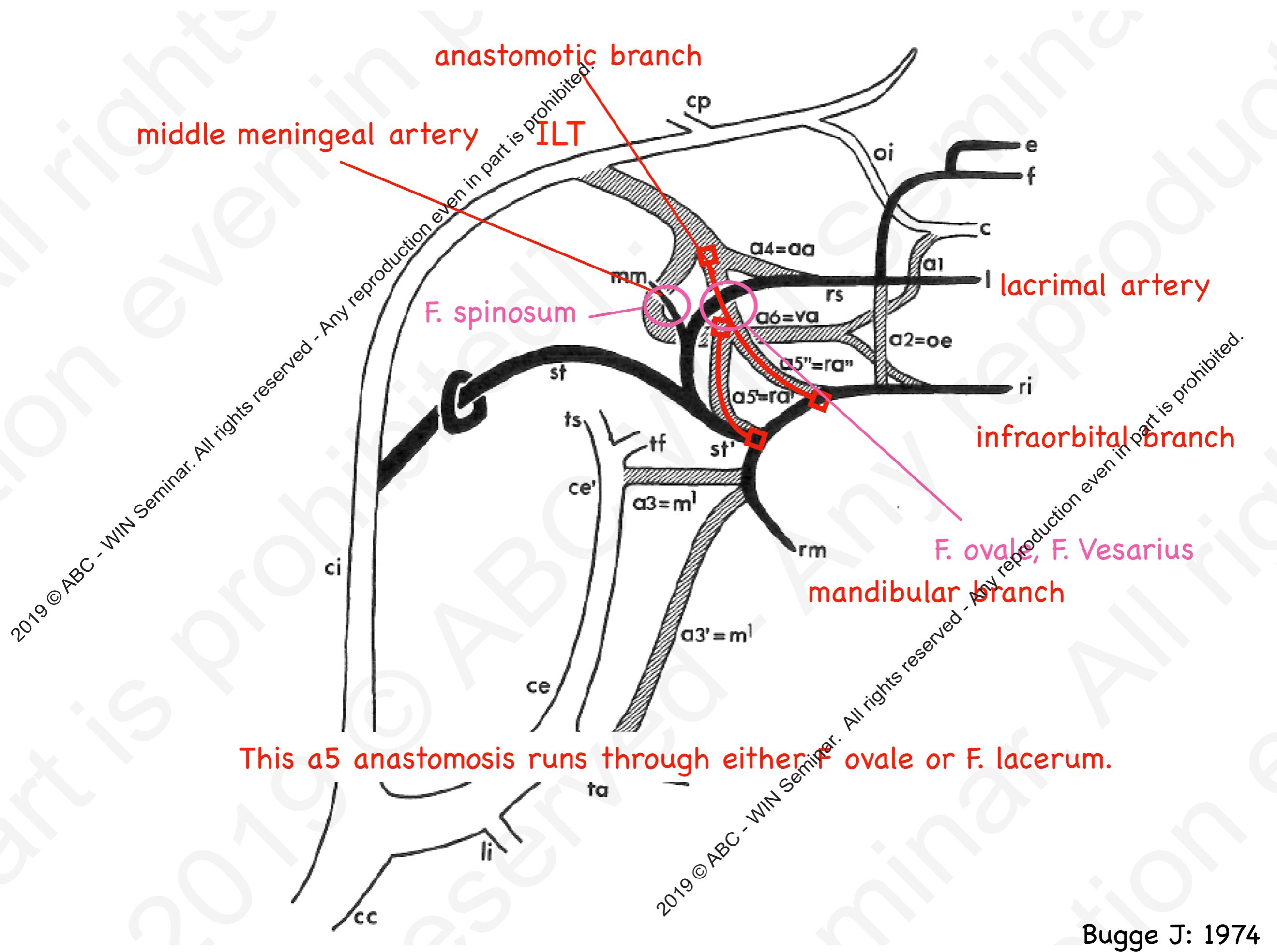
This a1 anastomosis is established within 2 months of the gestational period and persists without regression.

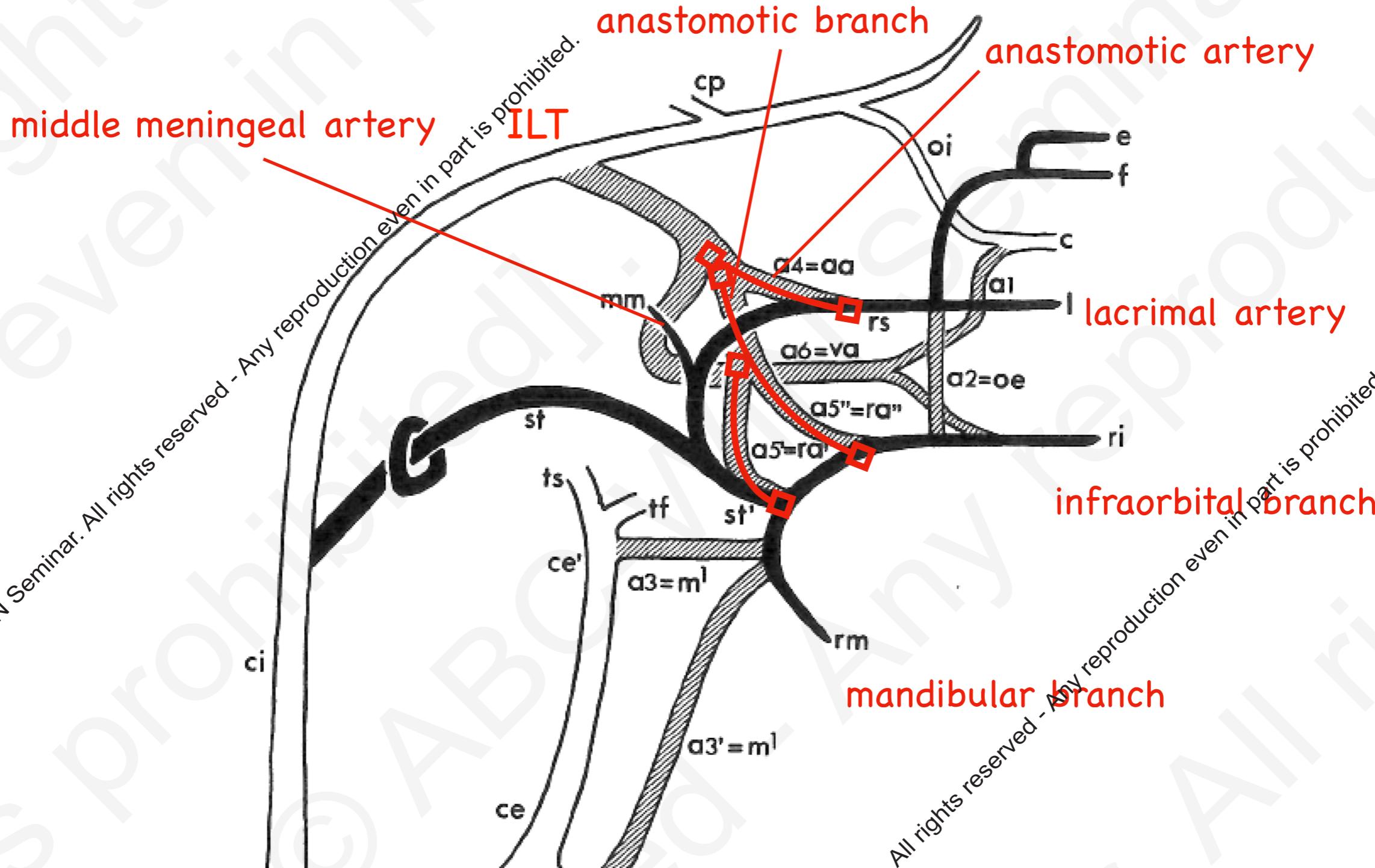


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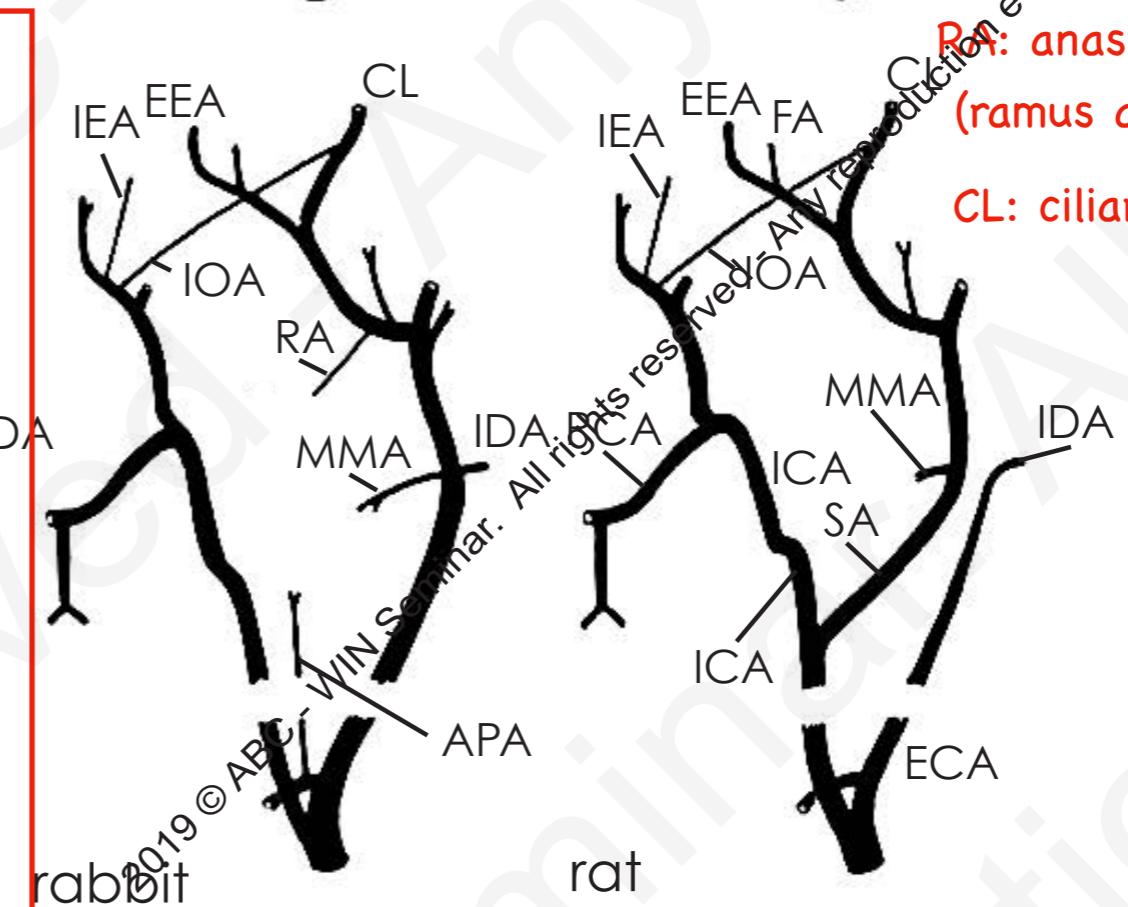
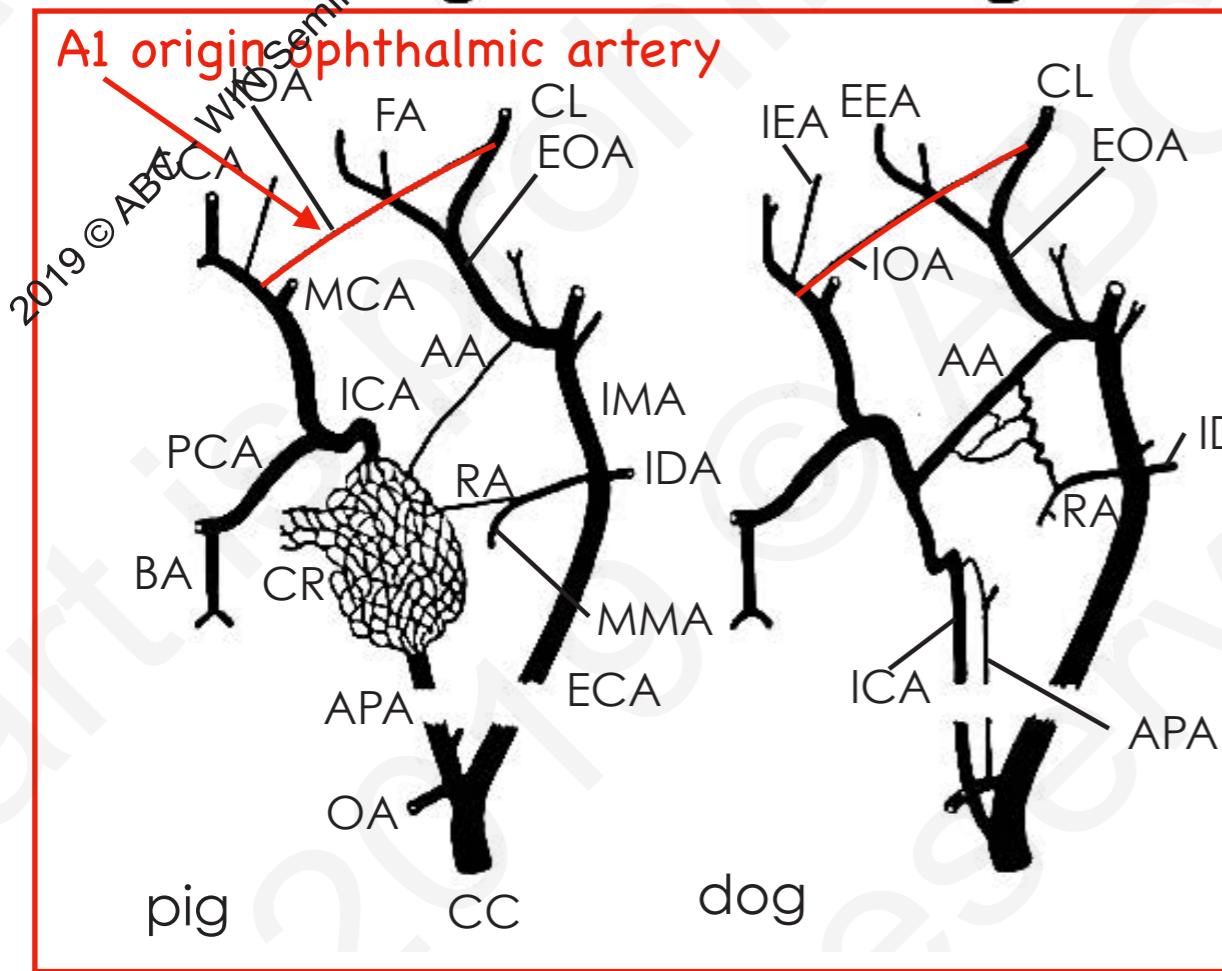
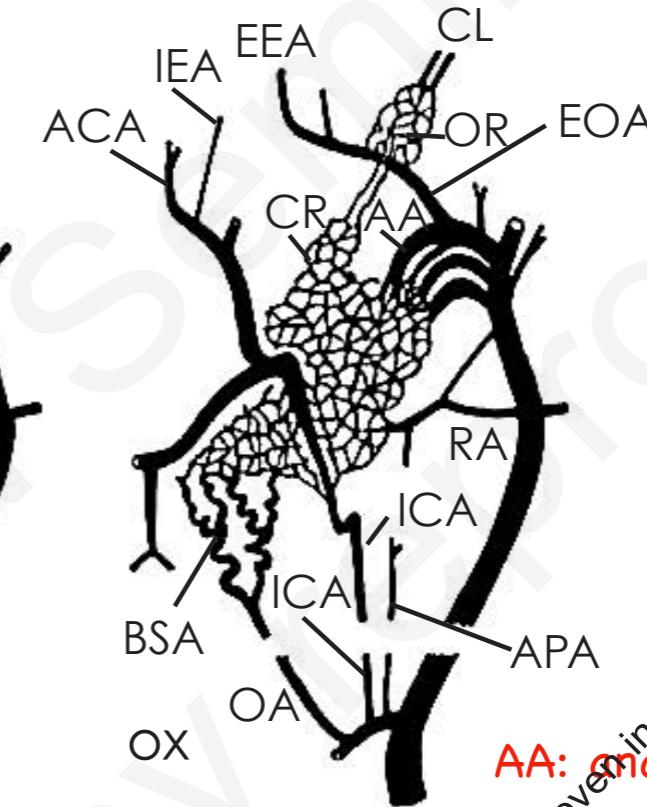
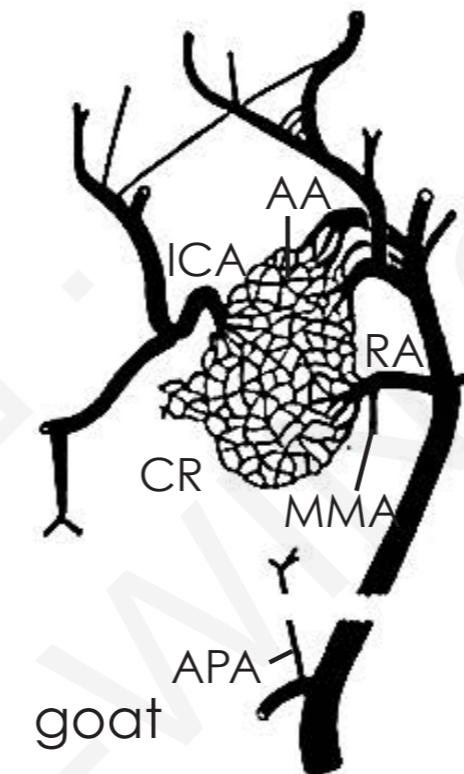
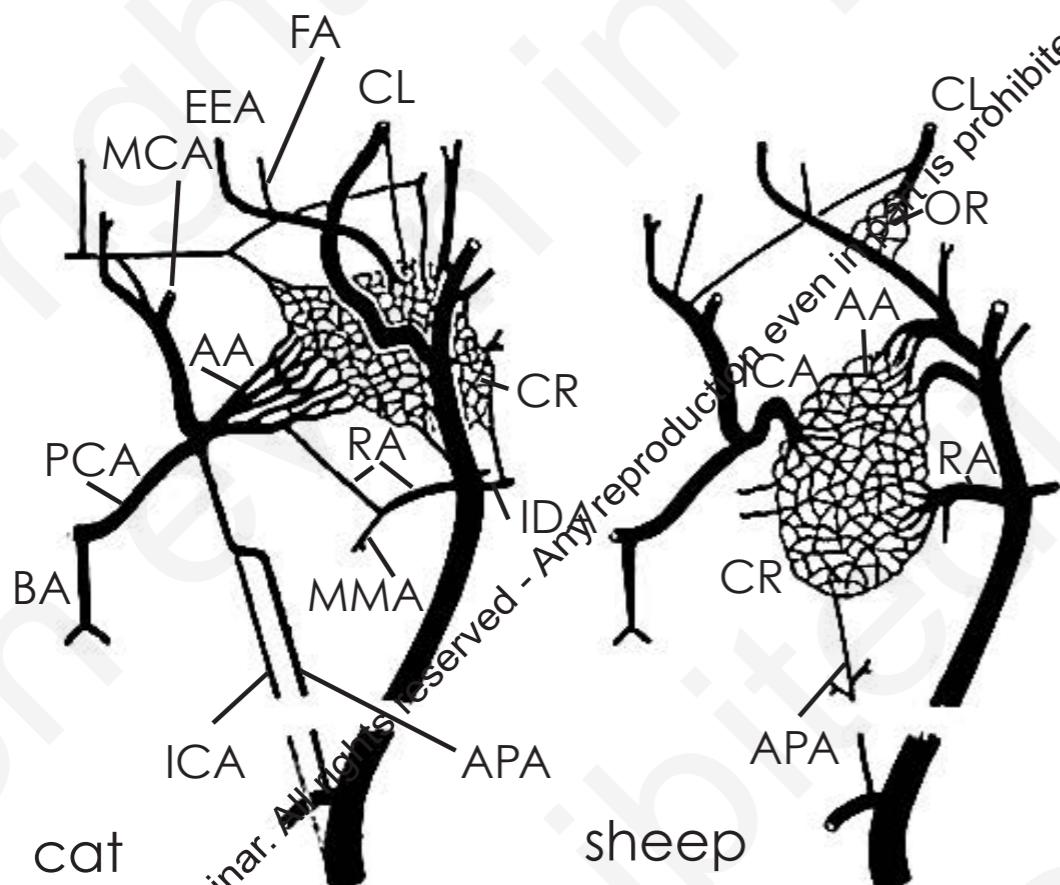




Anastomotic artery (*arteria anastomotica*) and anastomotic branch (*ramus anastomoticus*) can be regarded the homologue to the rete mirabile.

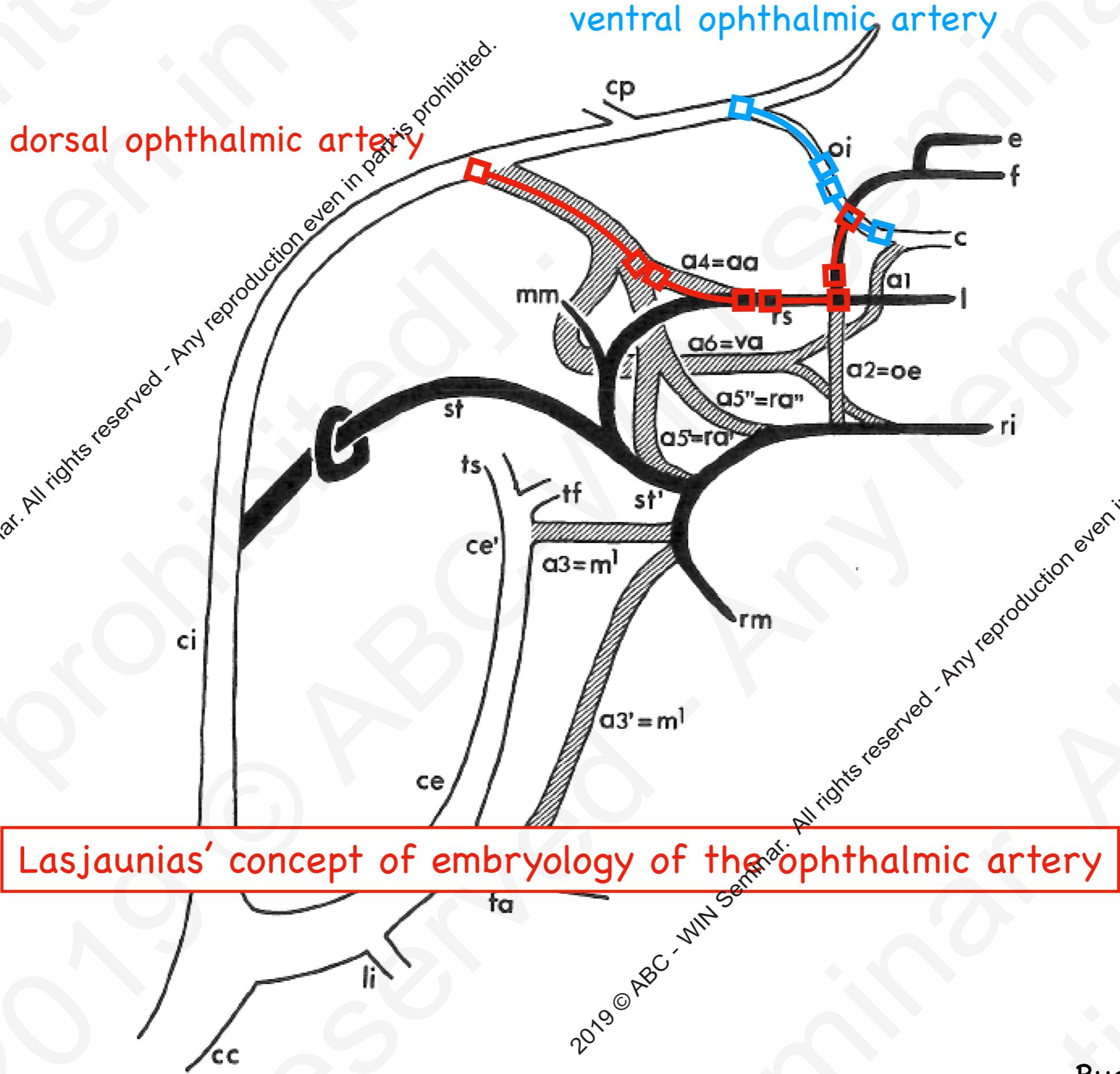
Bugge J: 1974

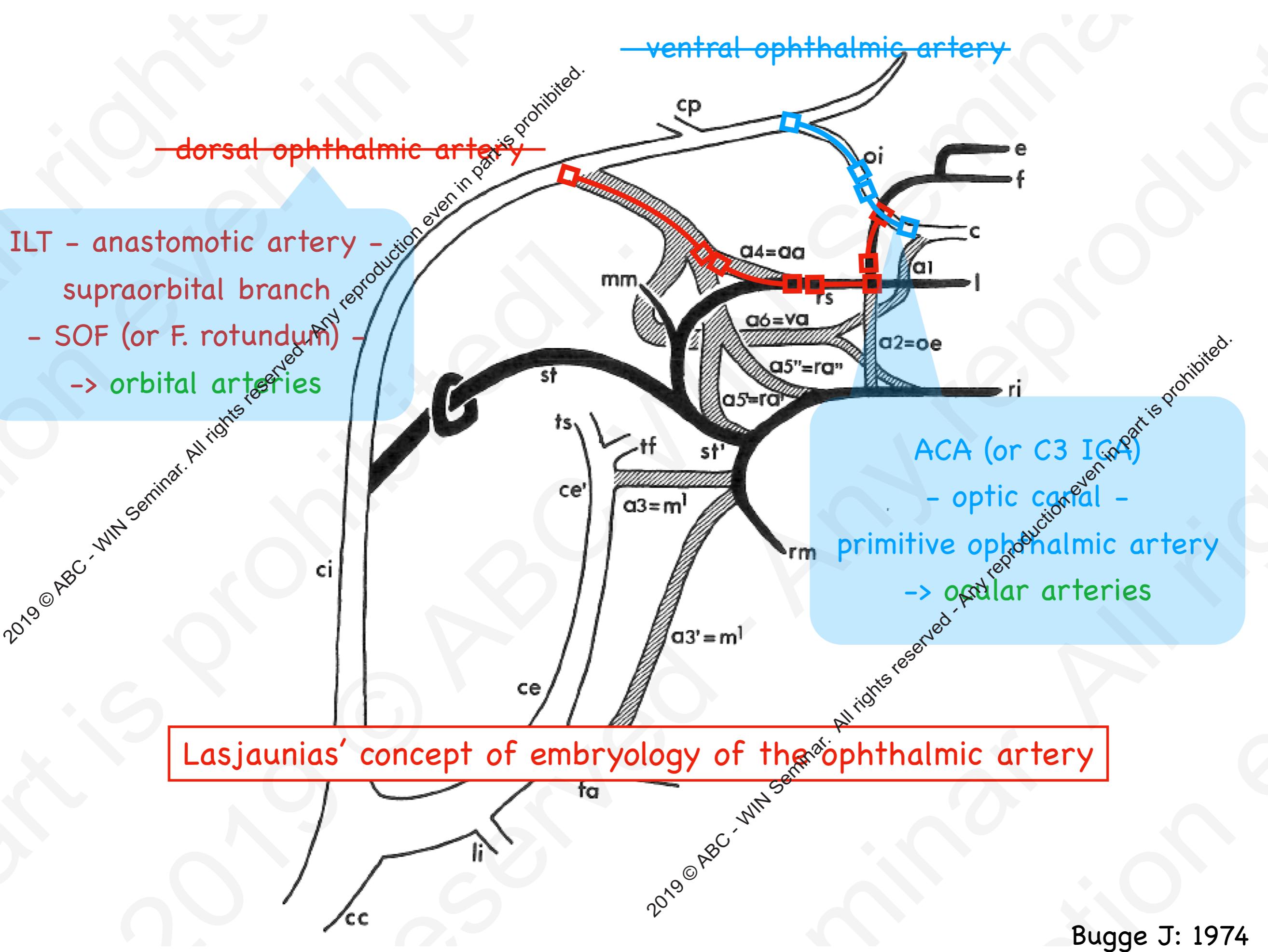
rete mirabile



Daniel PM 1953

AA: anastomotic artery
RA: anastomotic branch (ramus anastomoticus)
CL: ciliary artery



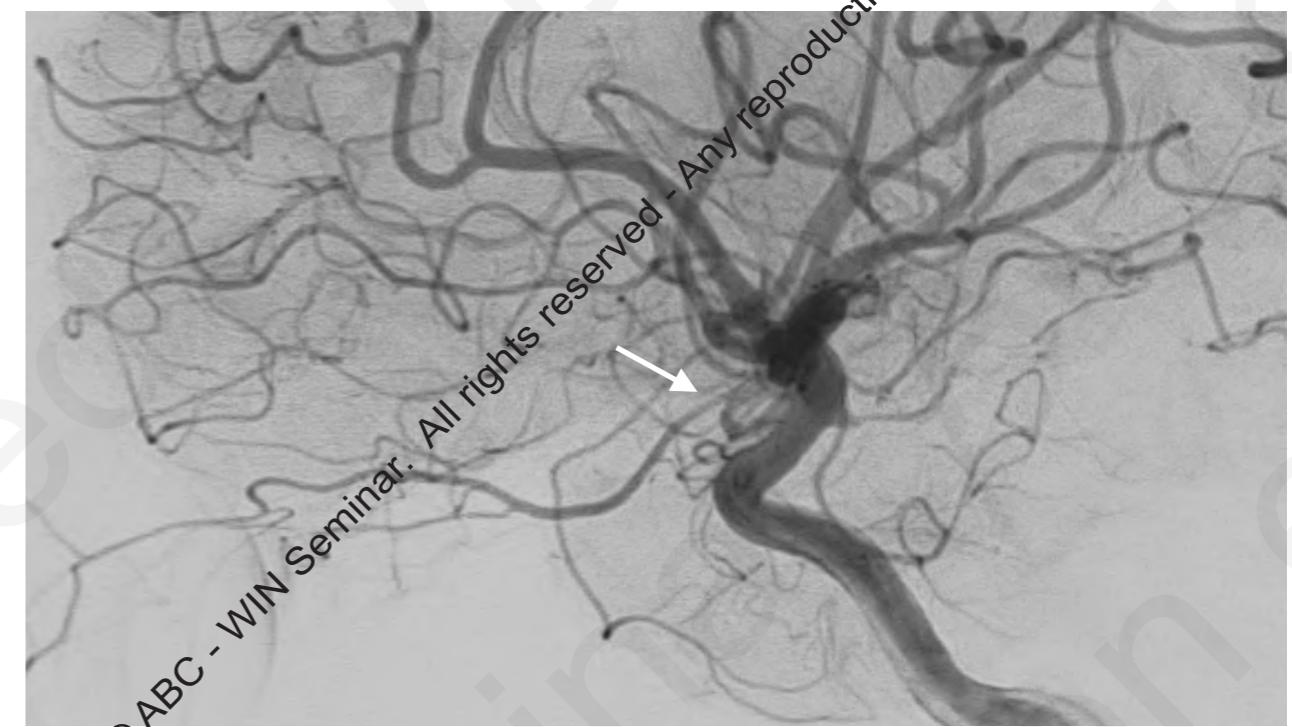
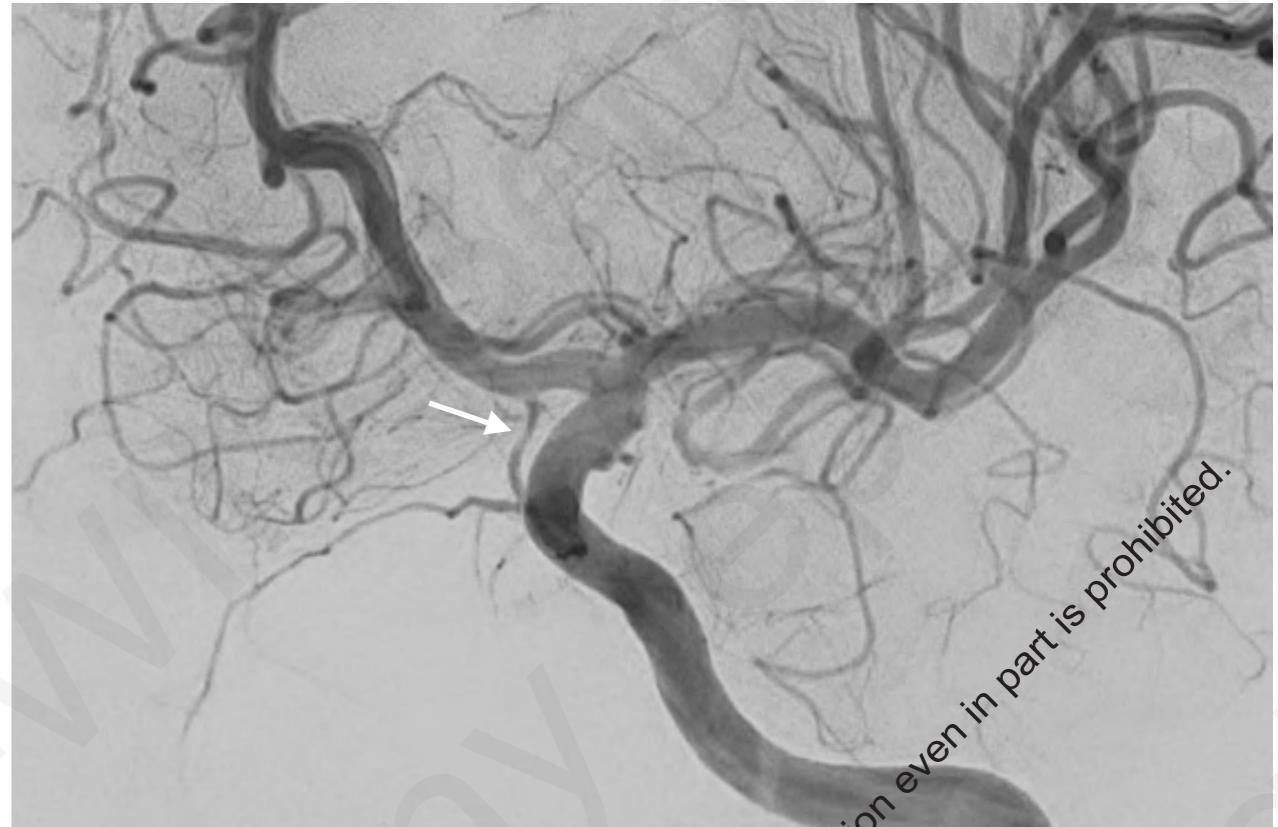
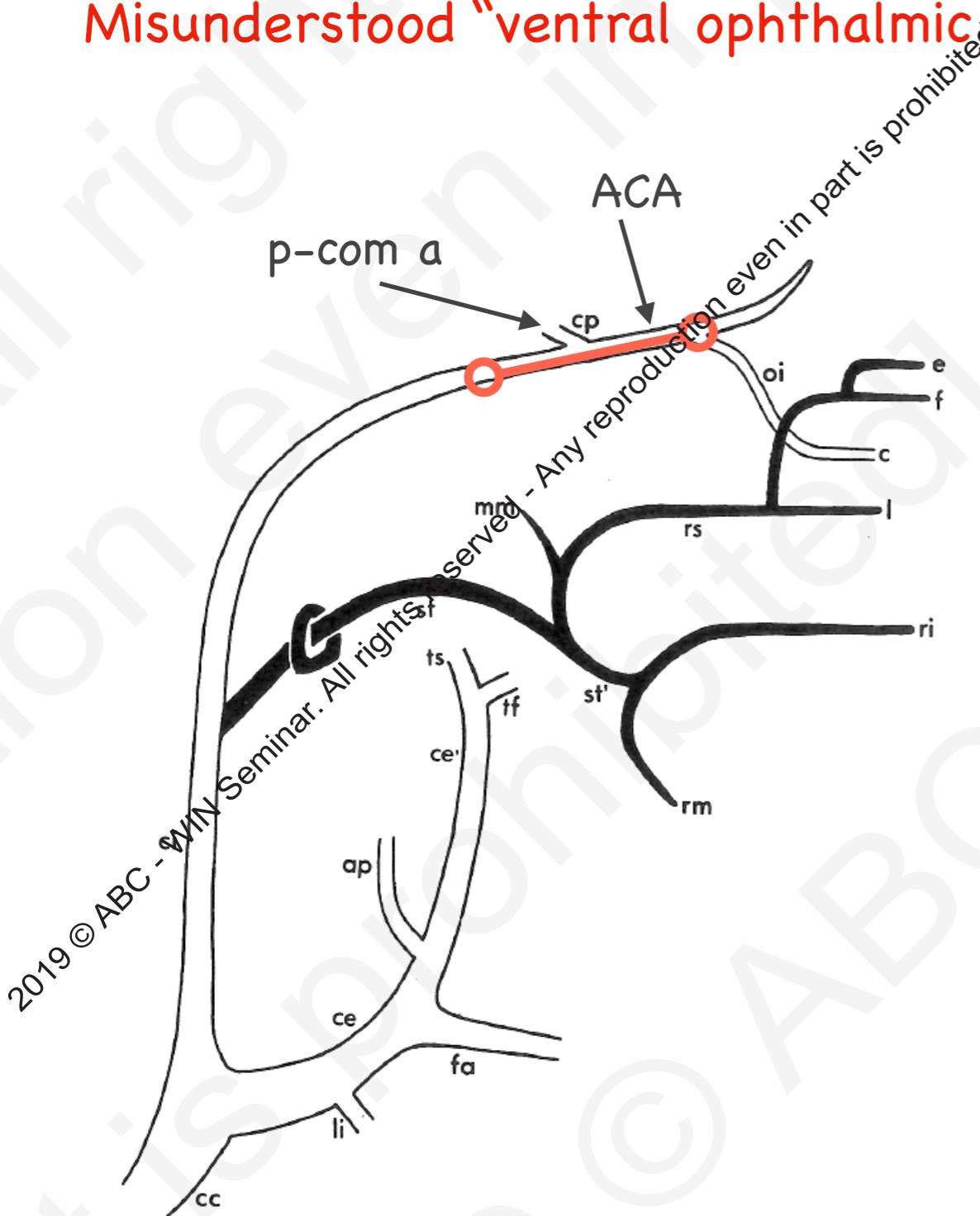


Ophthalmic artery variations

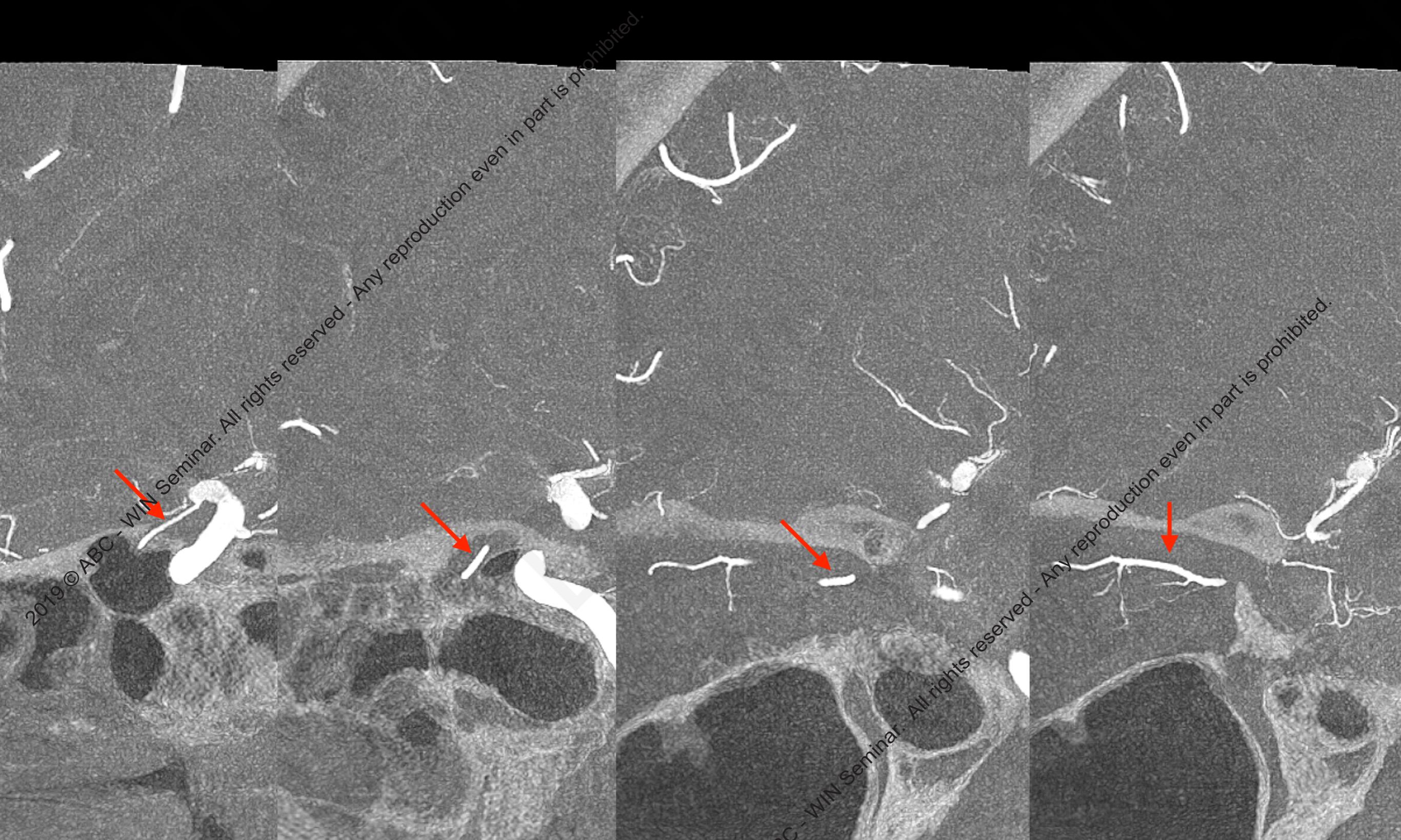
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Misunderstood "ventral ophthalmic artery"

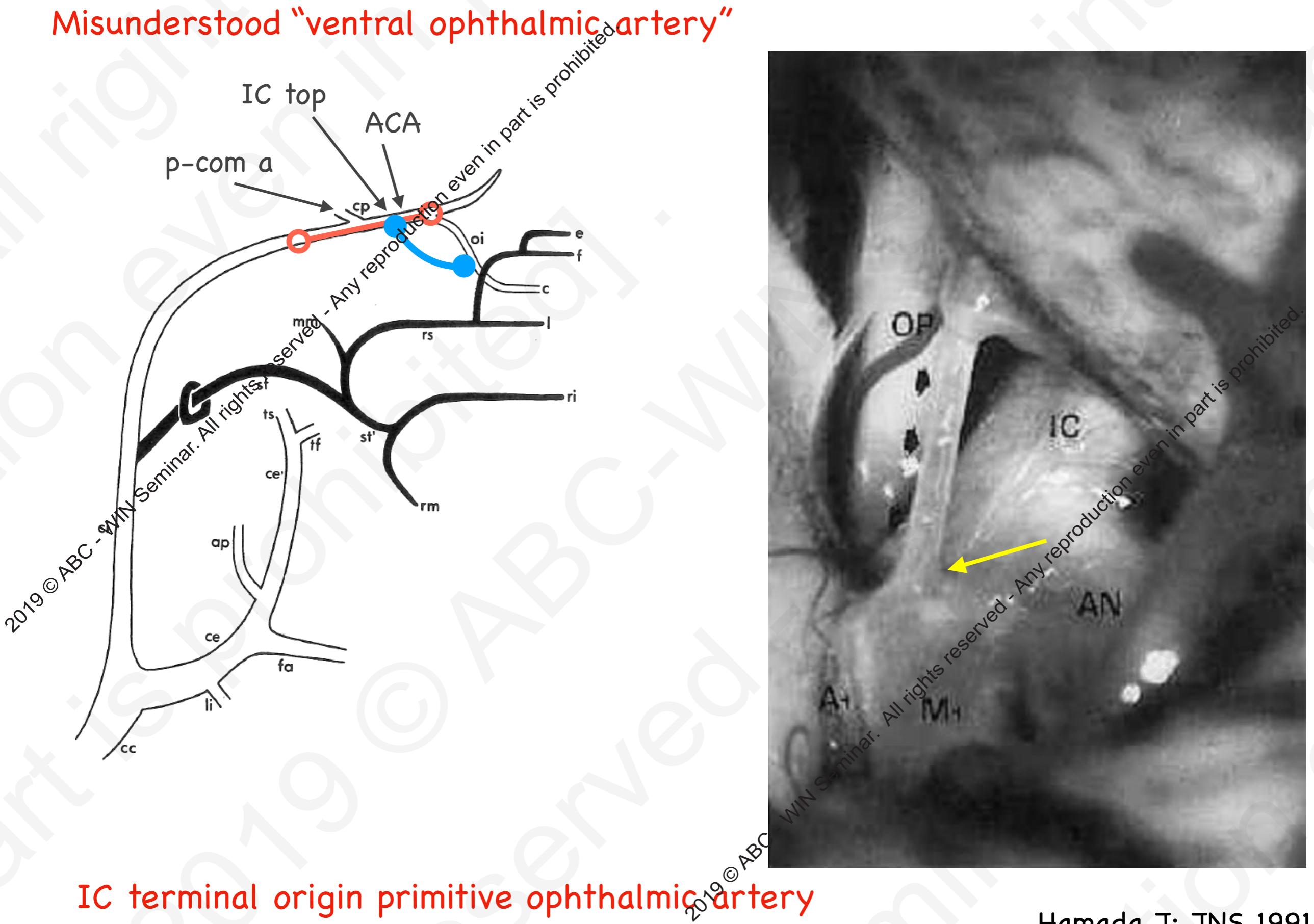


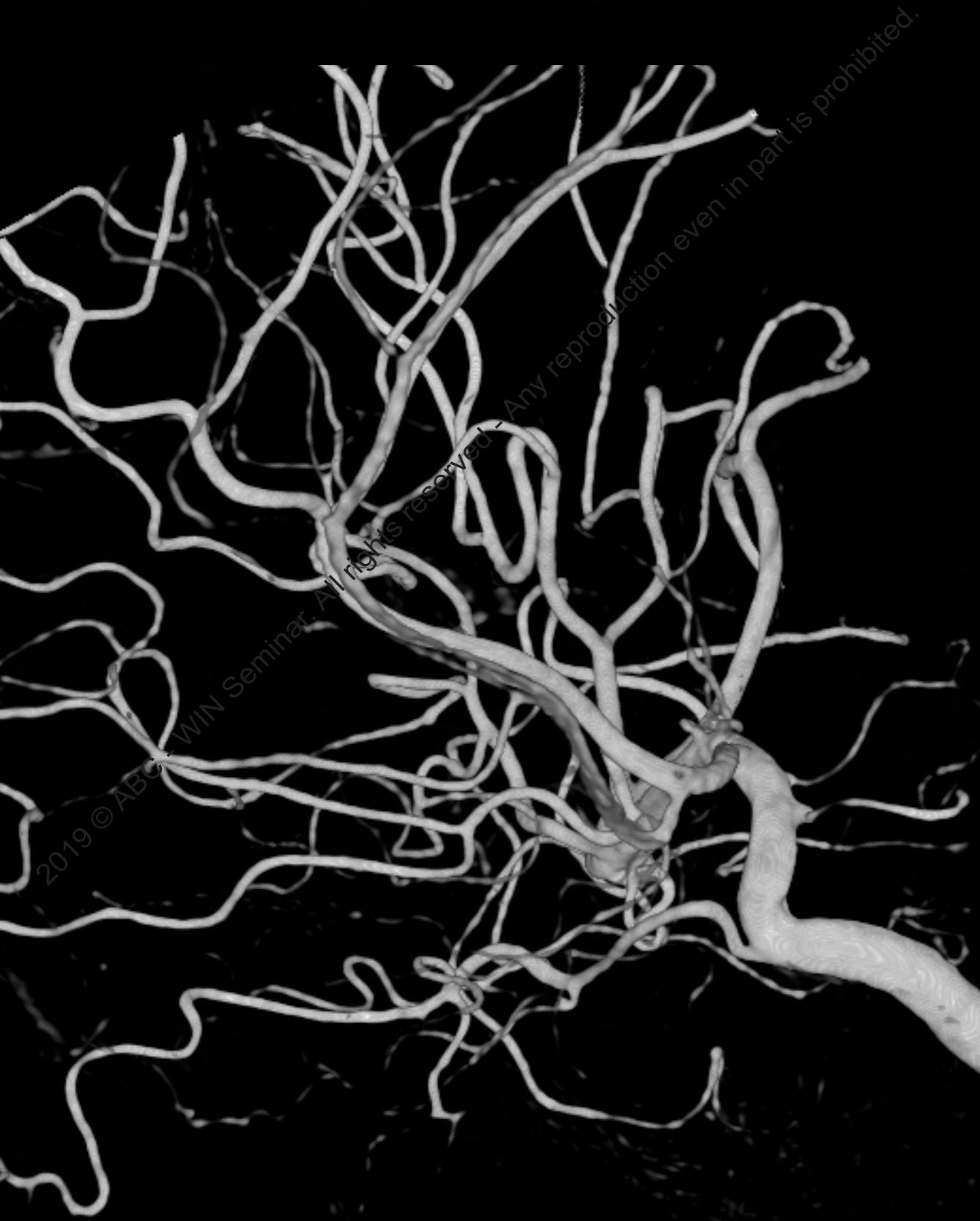
ACA (A1) origin primitive ophthalmic artery



ophthalmic artery of A1 origin = primitive ophthalmic artery
-> runs through optic canal

Misunderstood "ventral ophthalmic artery"





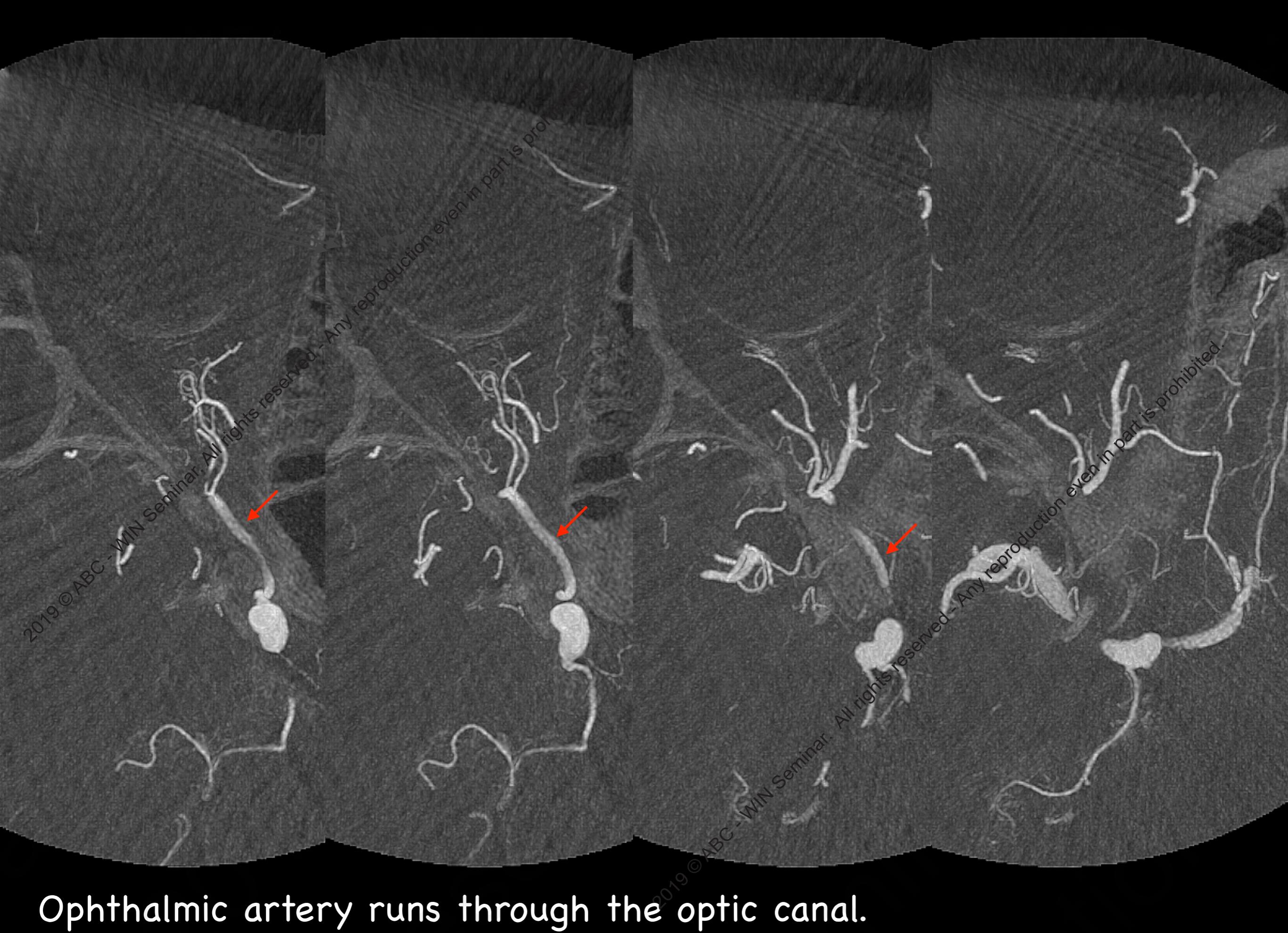
23/M



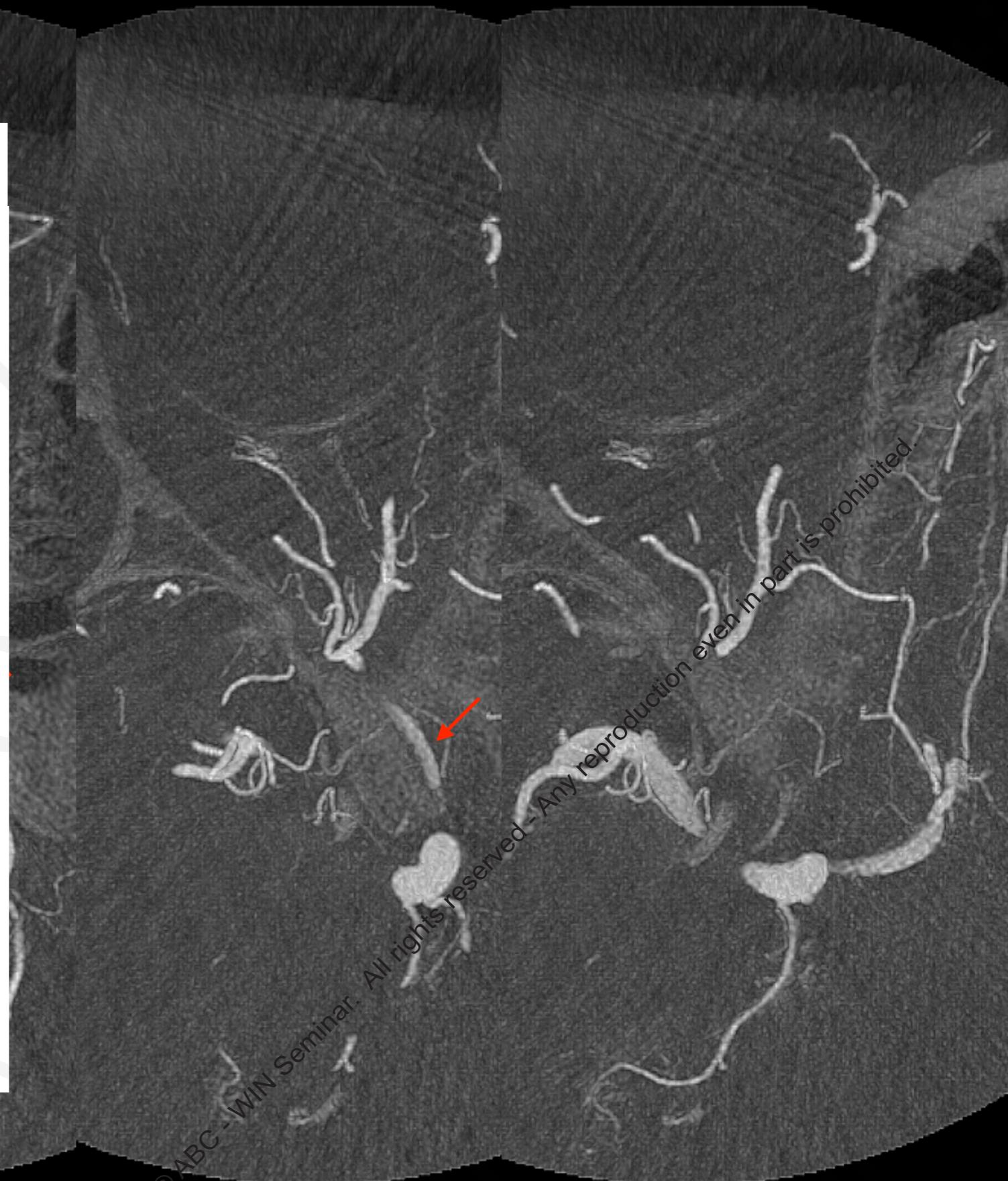
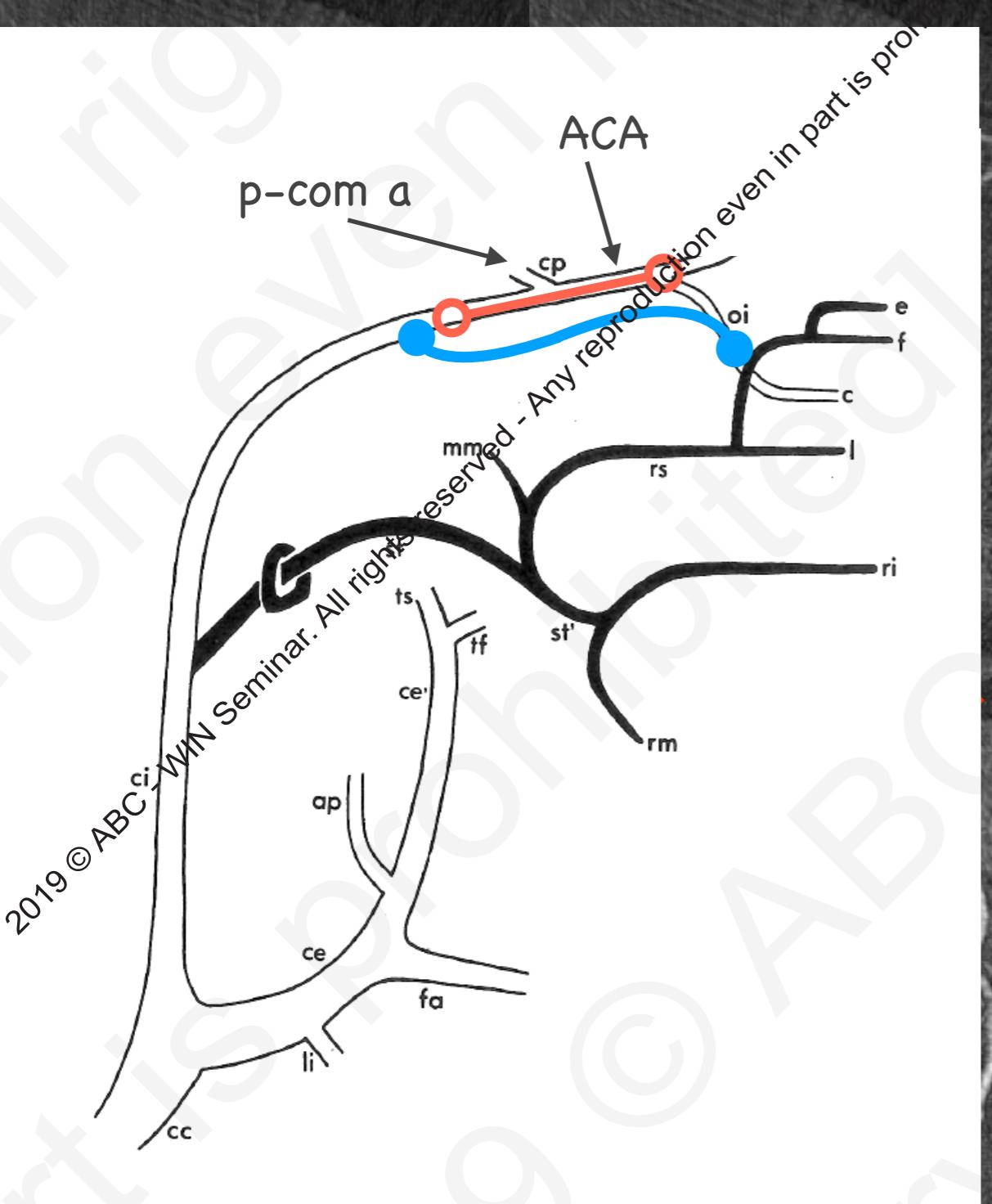
👀 stereoscopic view

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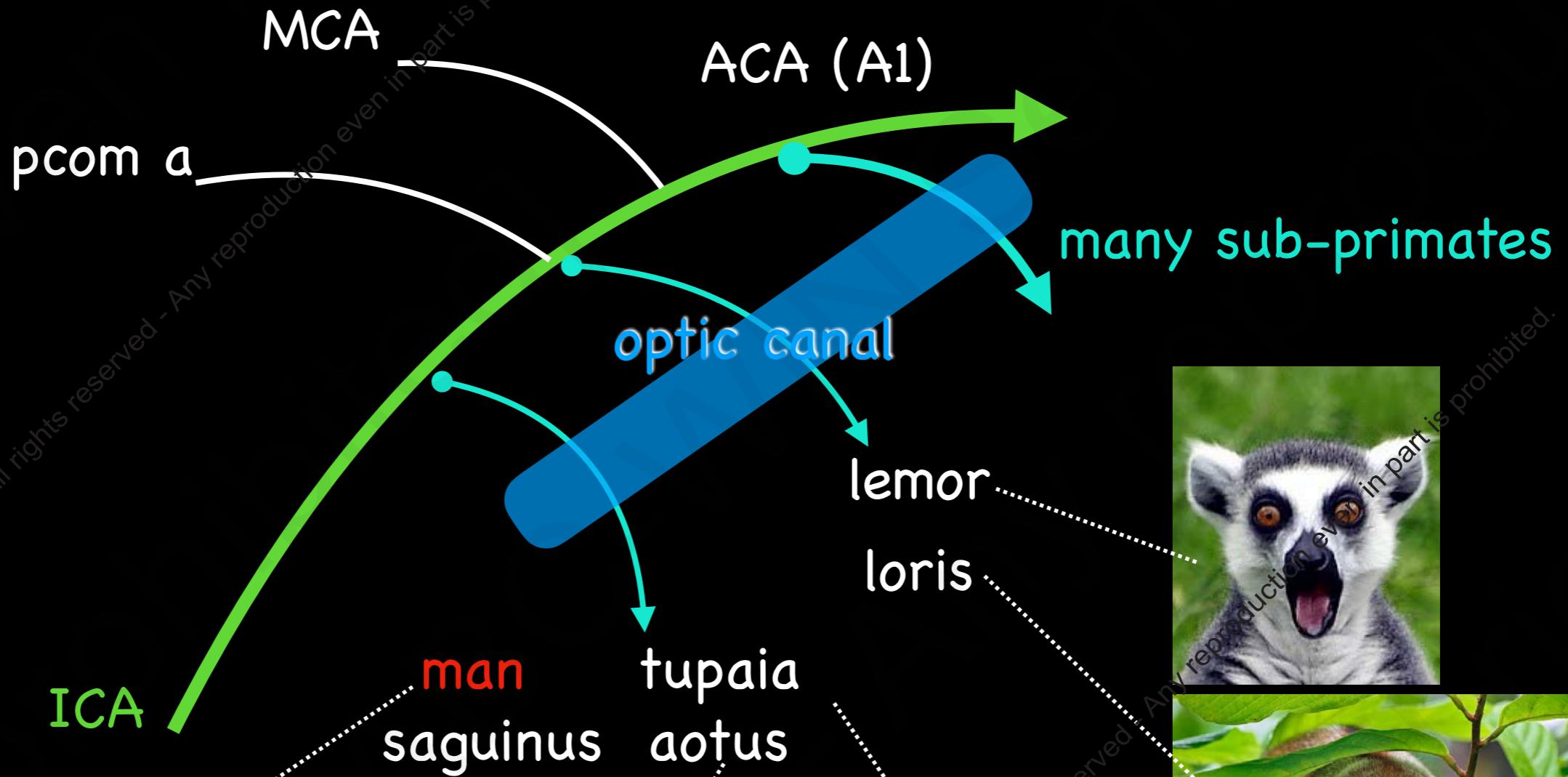


Ophthalmic artery runs through the optic canal.



Ophthalmic artery runs through the optic canal.

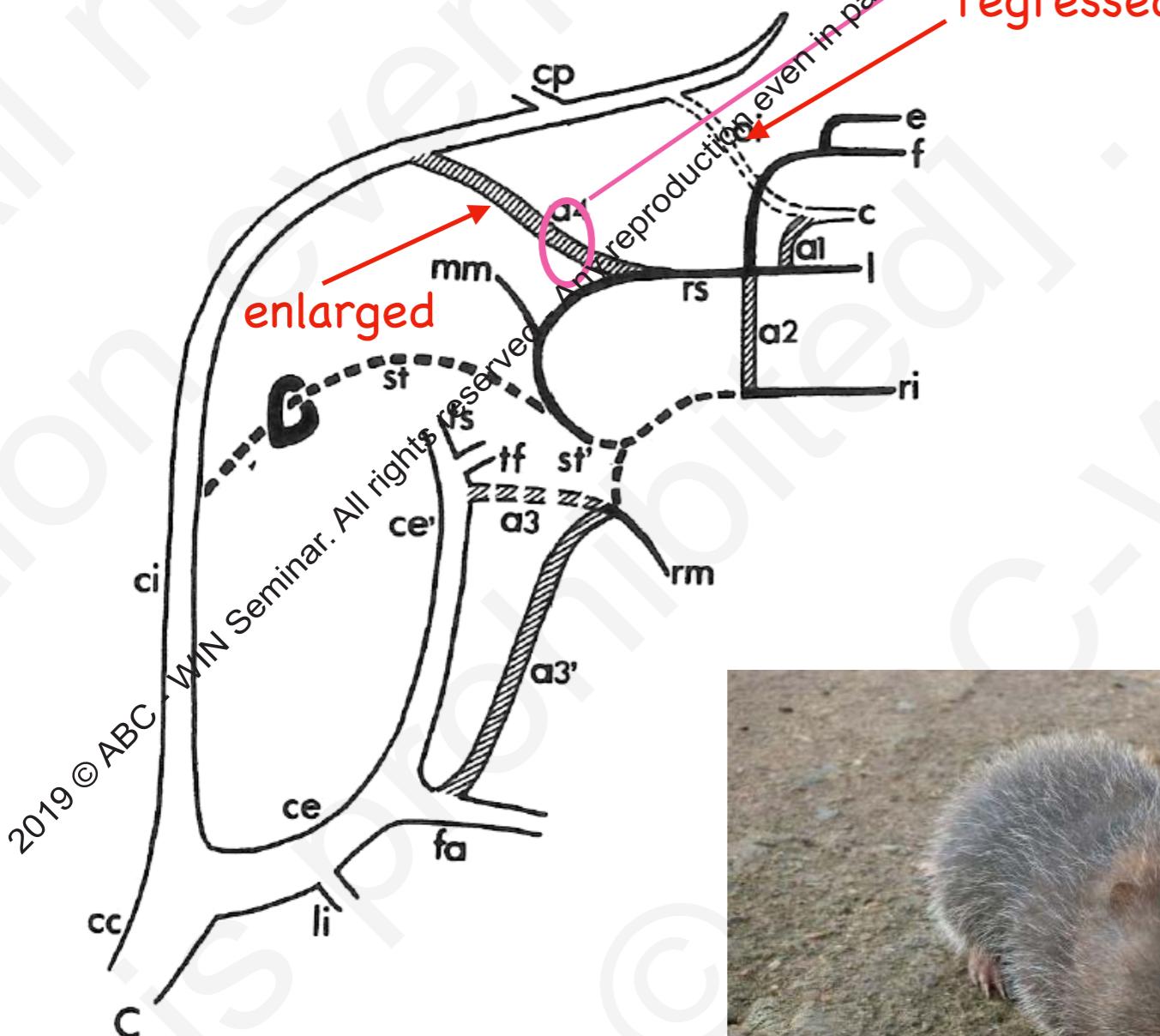
Phylogenetic changes of the ophthalmic artery origin



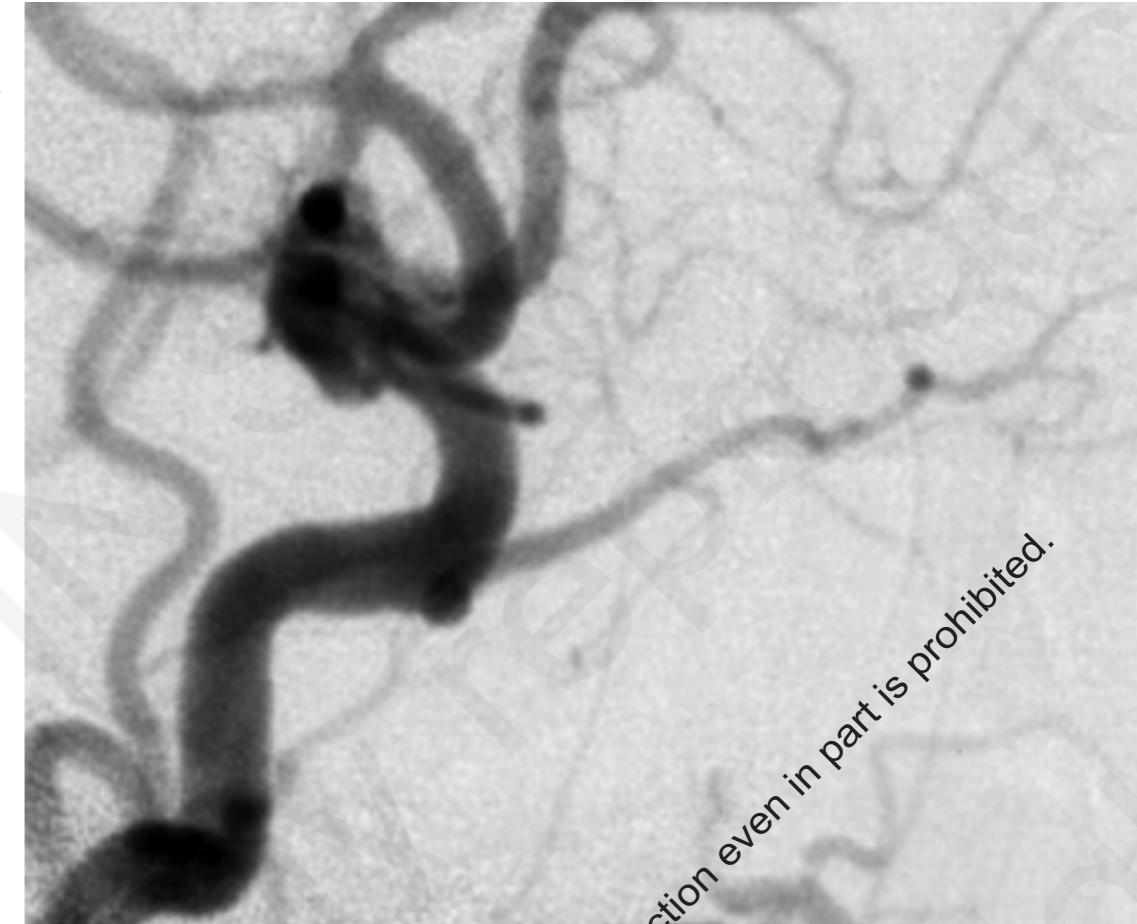
Misunderstood "dorsal ophthalmic artery"

superior orbital fissure

regressed



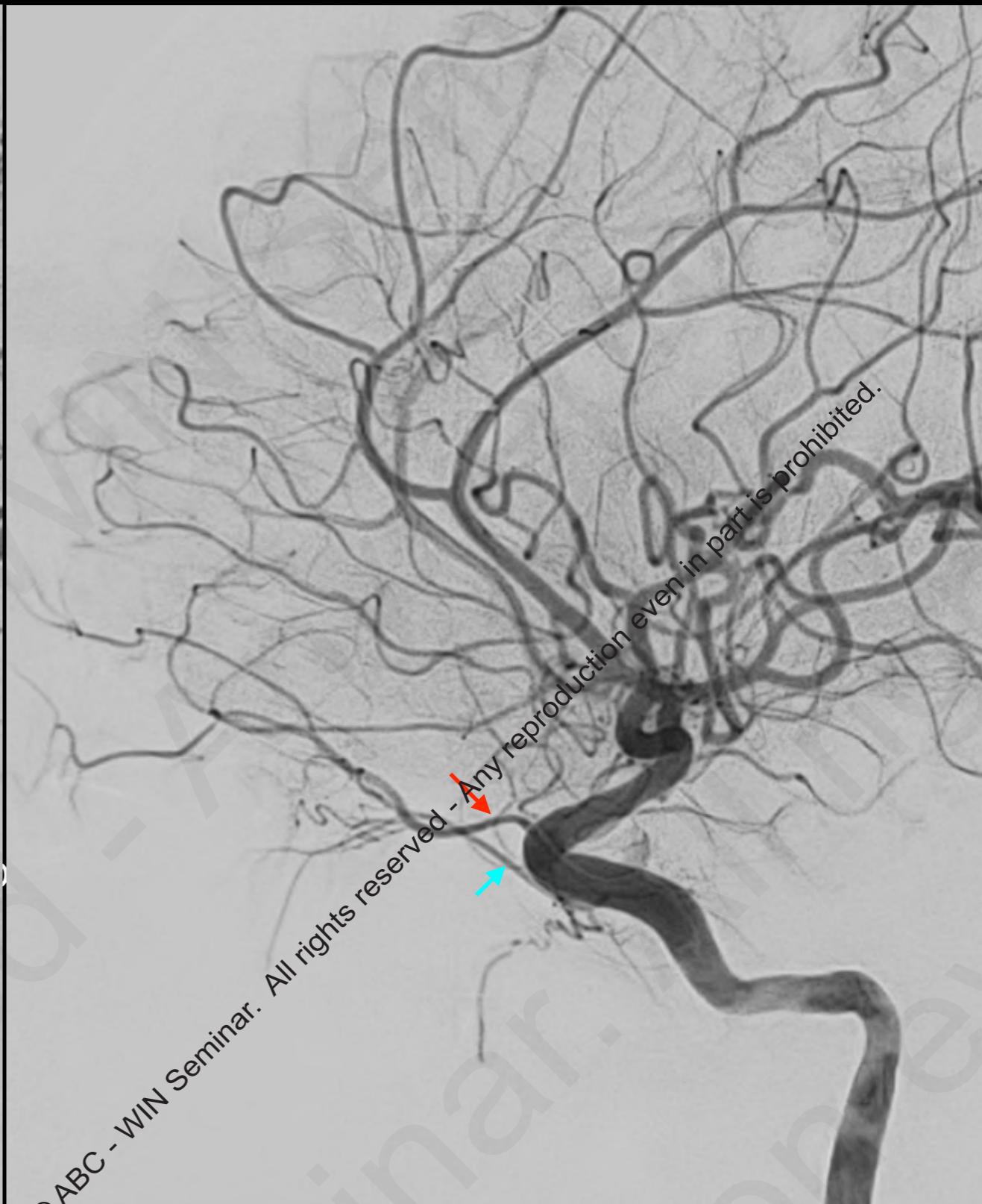
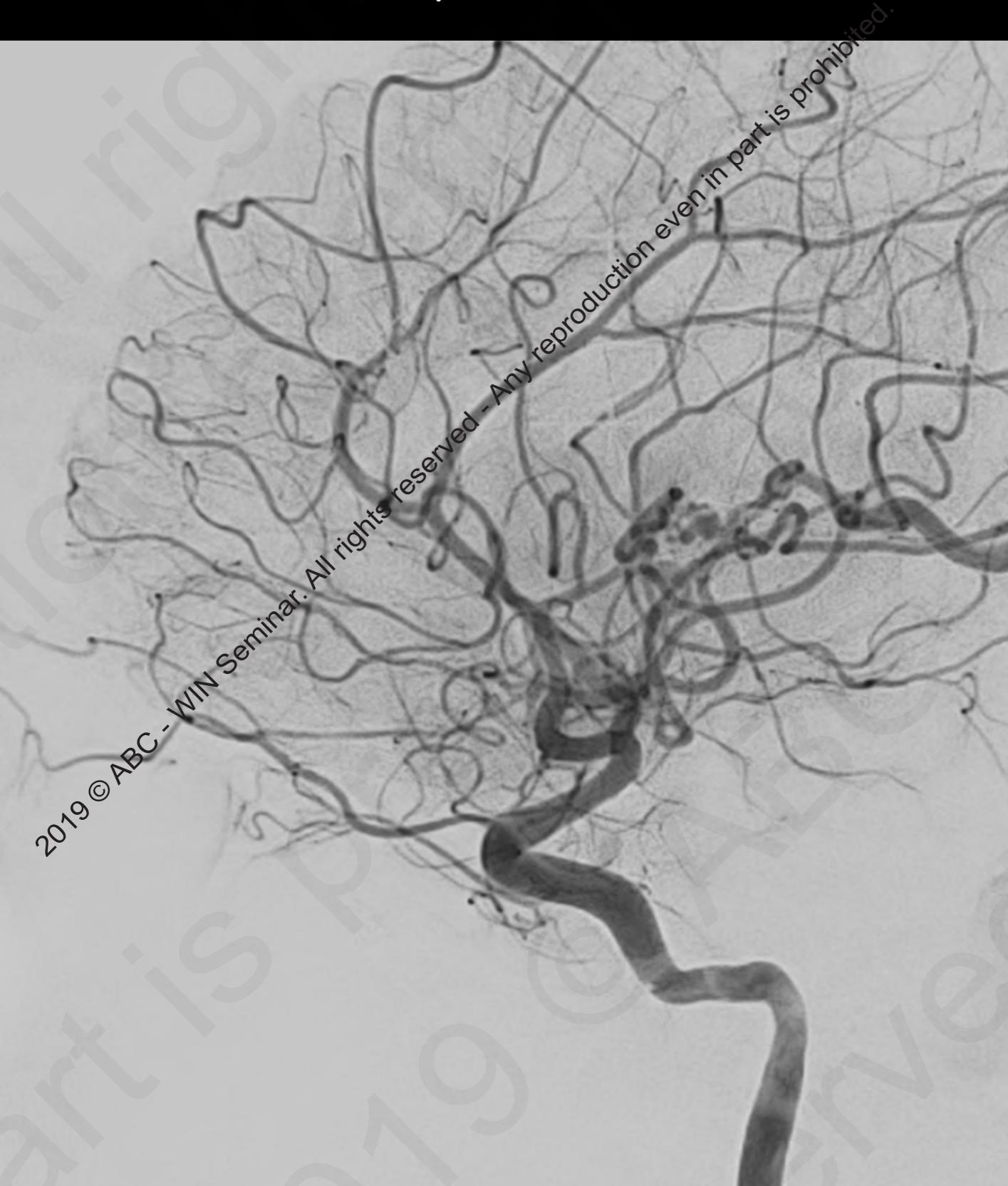
Rodent subfamily Rhizomyinae



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Bugge J: 1974

16/M: double ophthalmic a + AVM



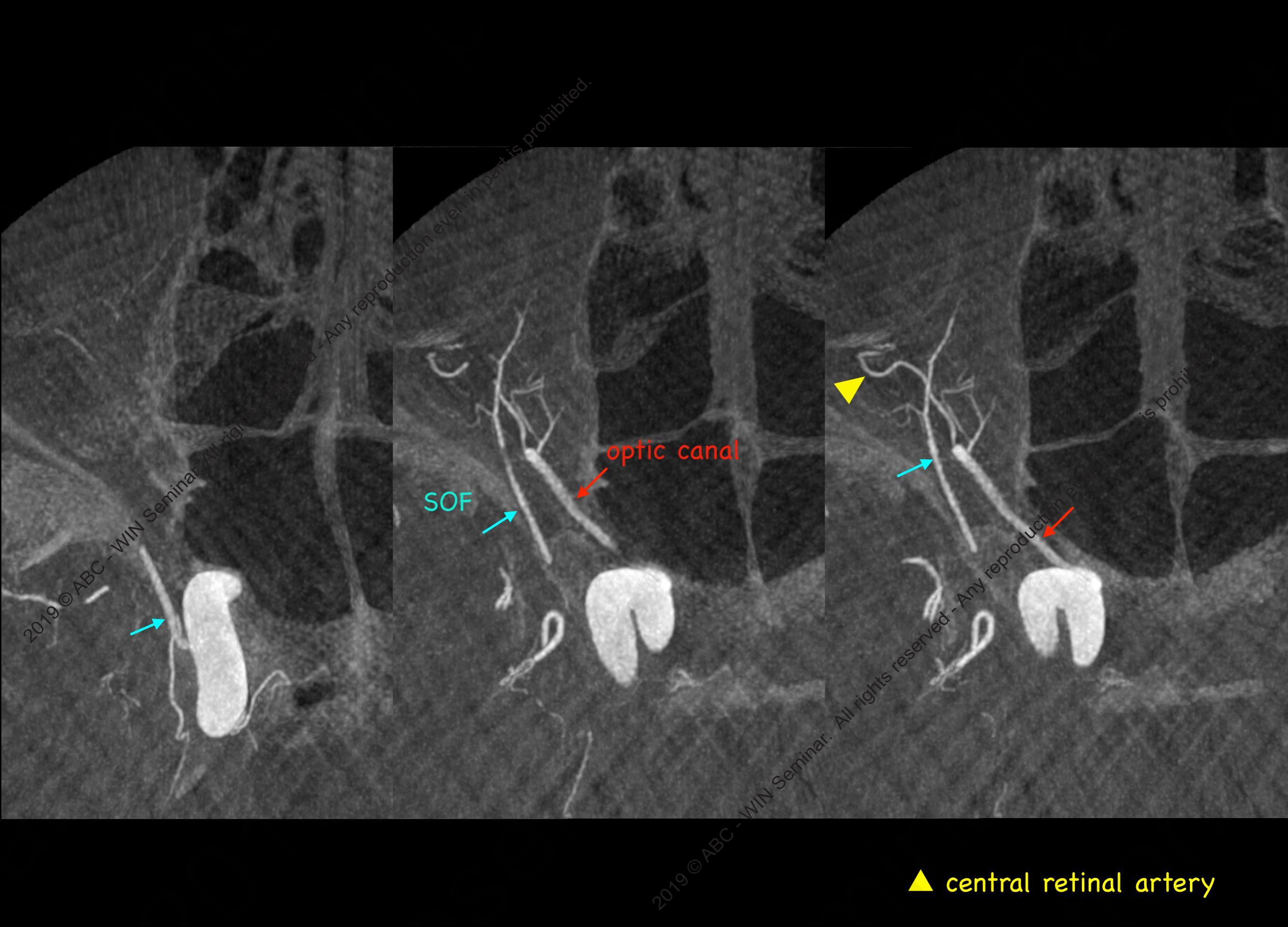
stereoscopic view

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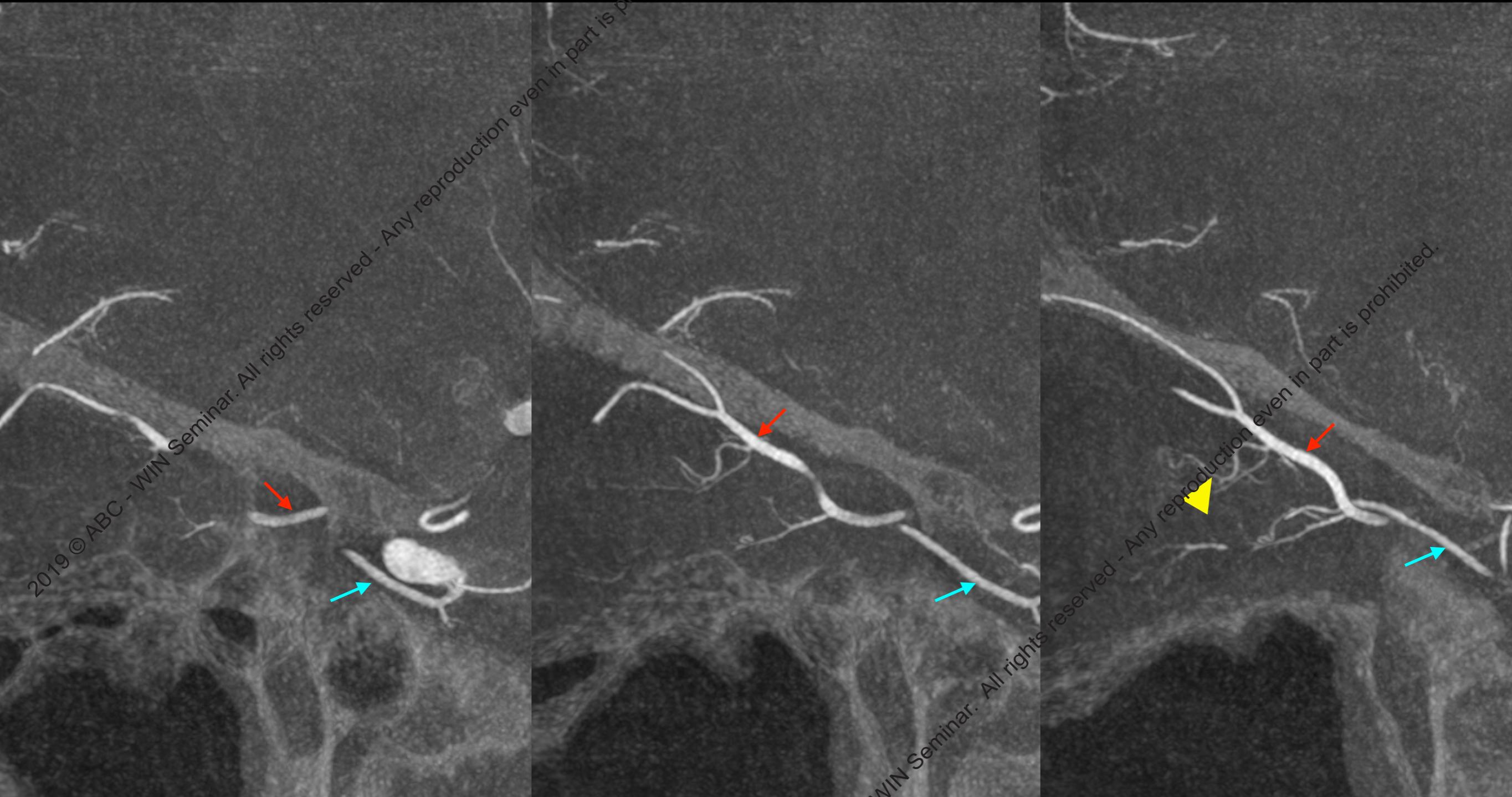


stereoscopic view



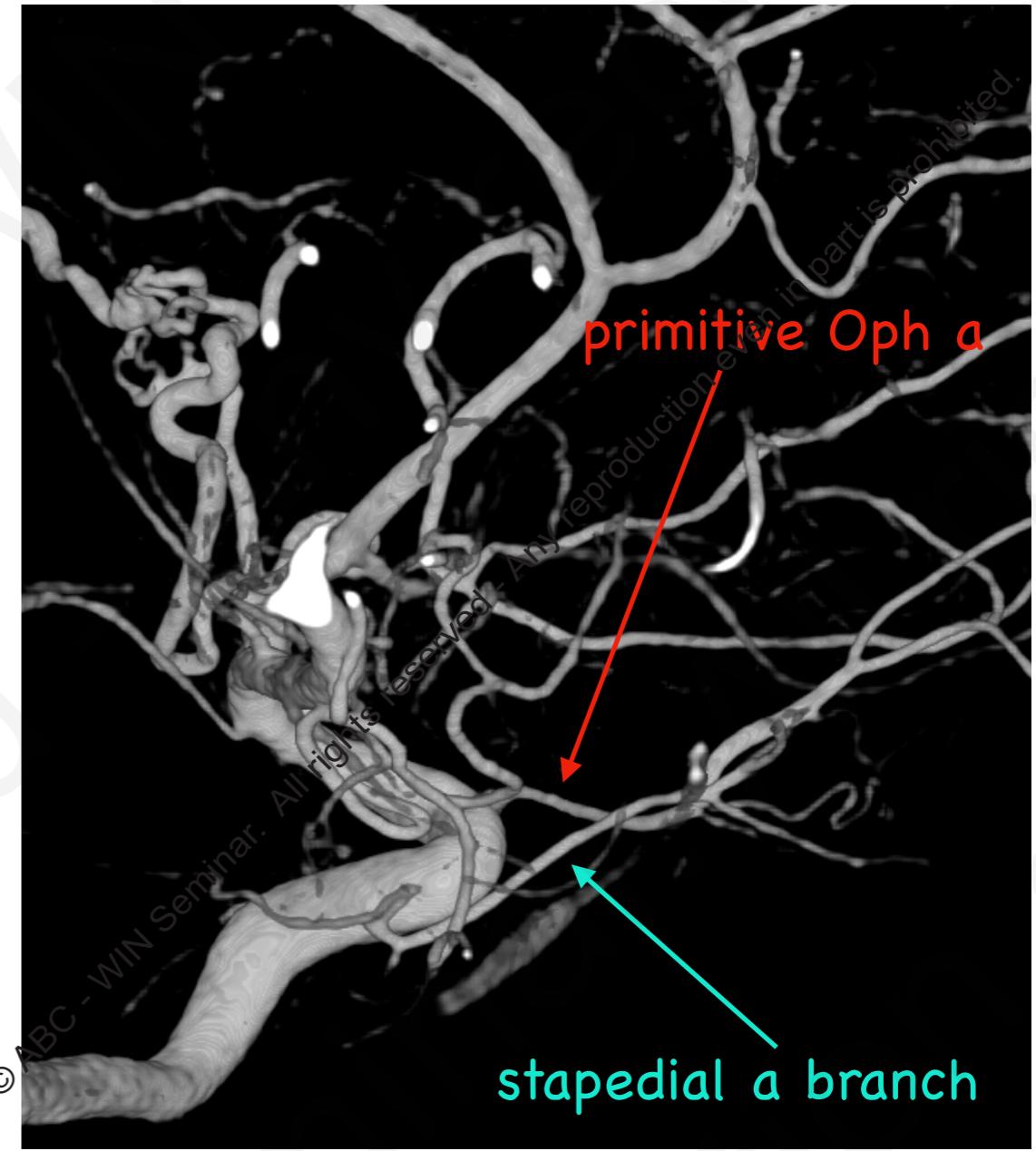
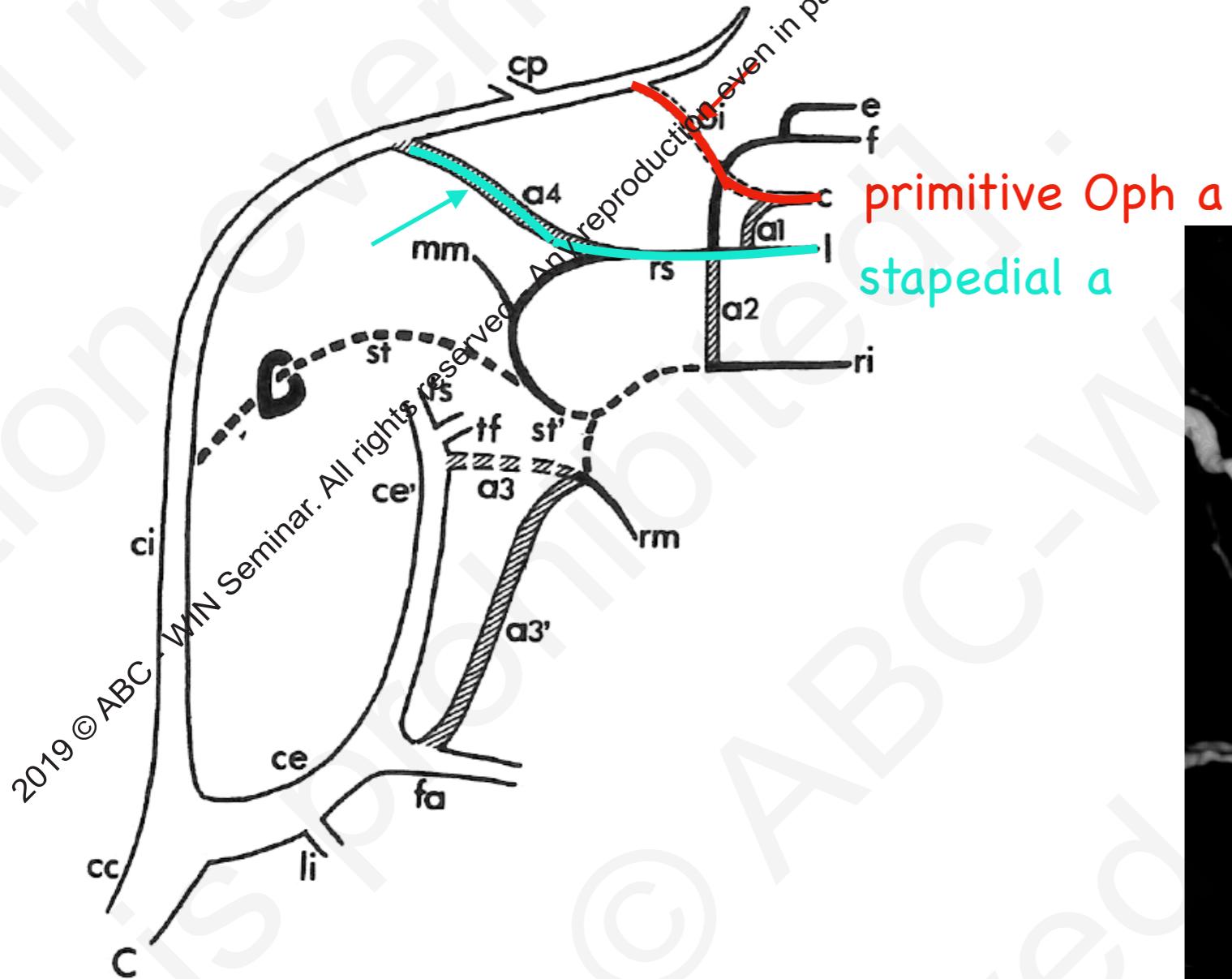
▲ central retinal artery

16/M: double ophthalmic a + AVM

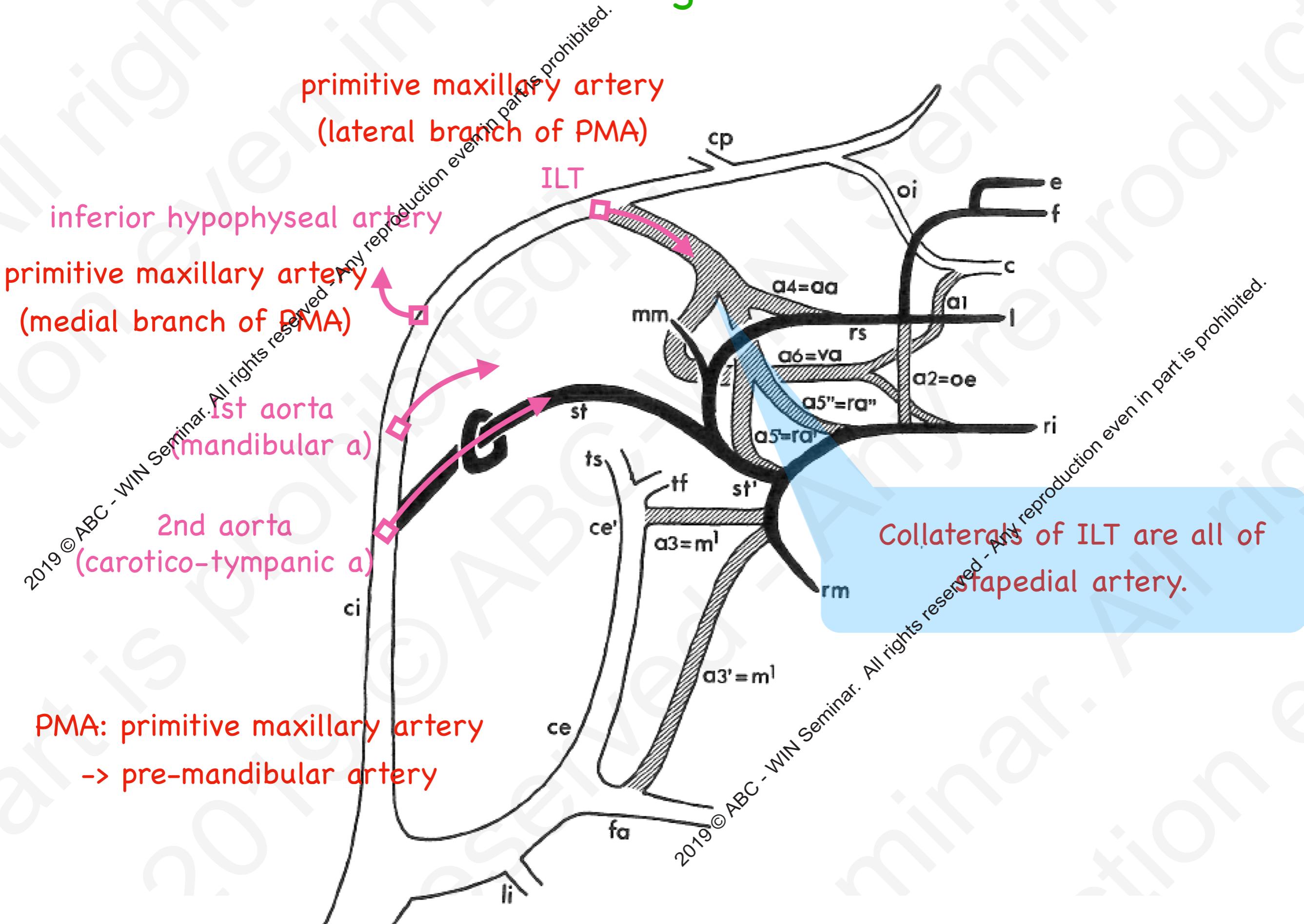


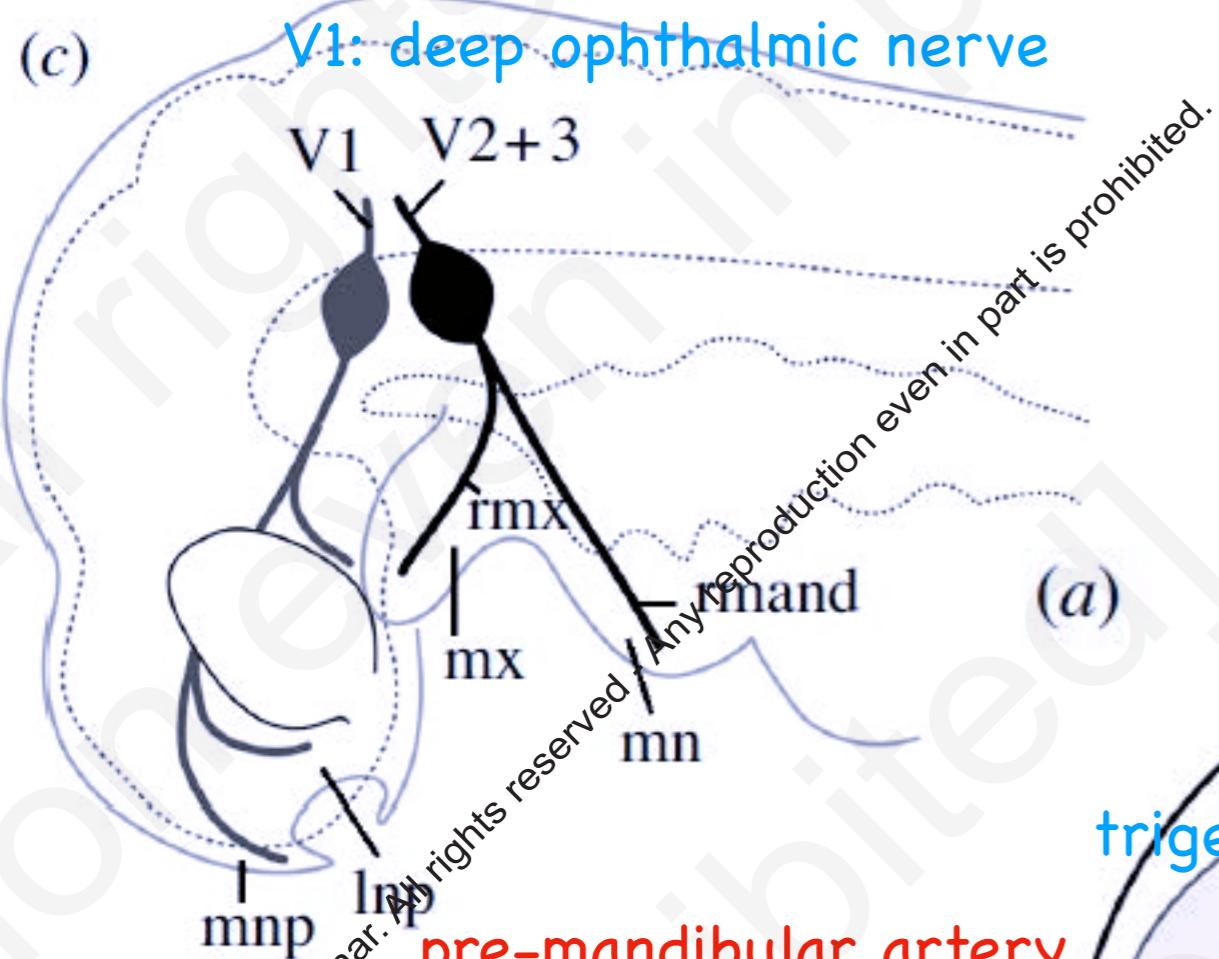
▲ central retinal artery

Misunderstood "ventral and dorsal ophthalmic arteries"
- double (duplicated) ophthalmic arteries -

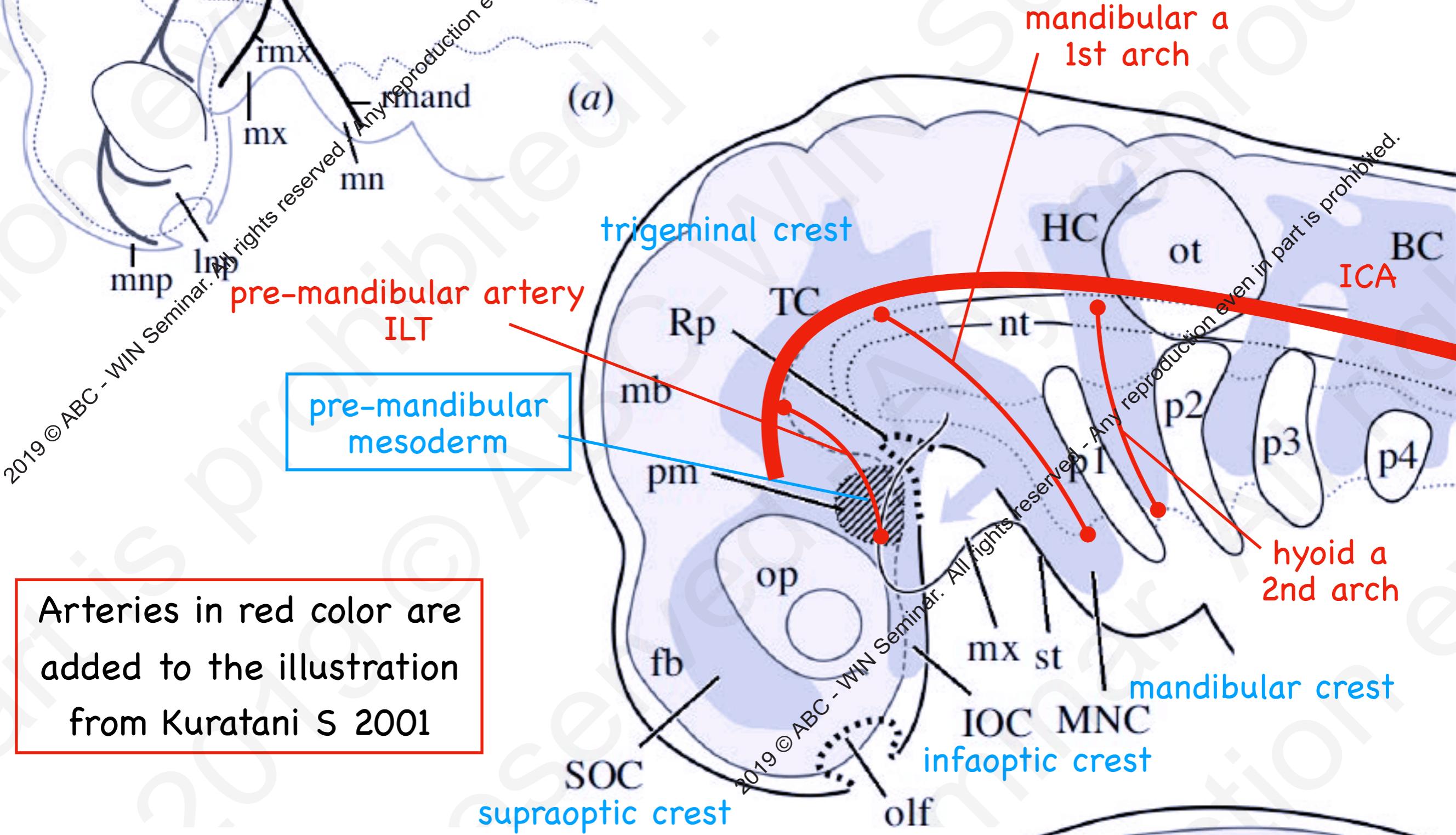


What is the origin of the ILT?





Basic vertebrate model

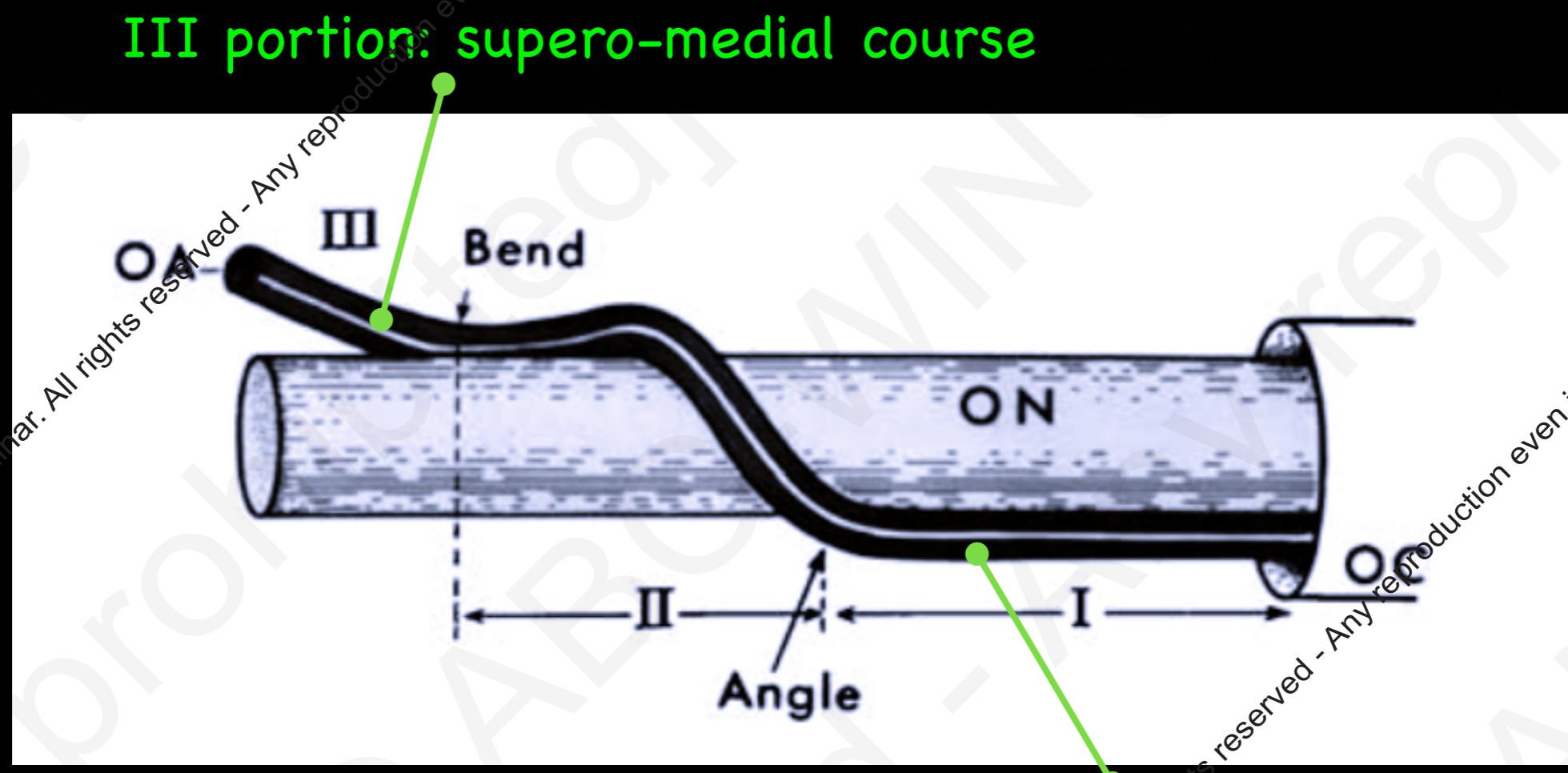


Orbital structures

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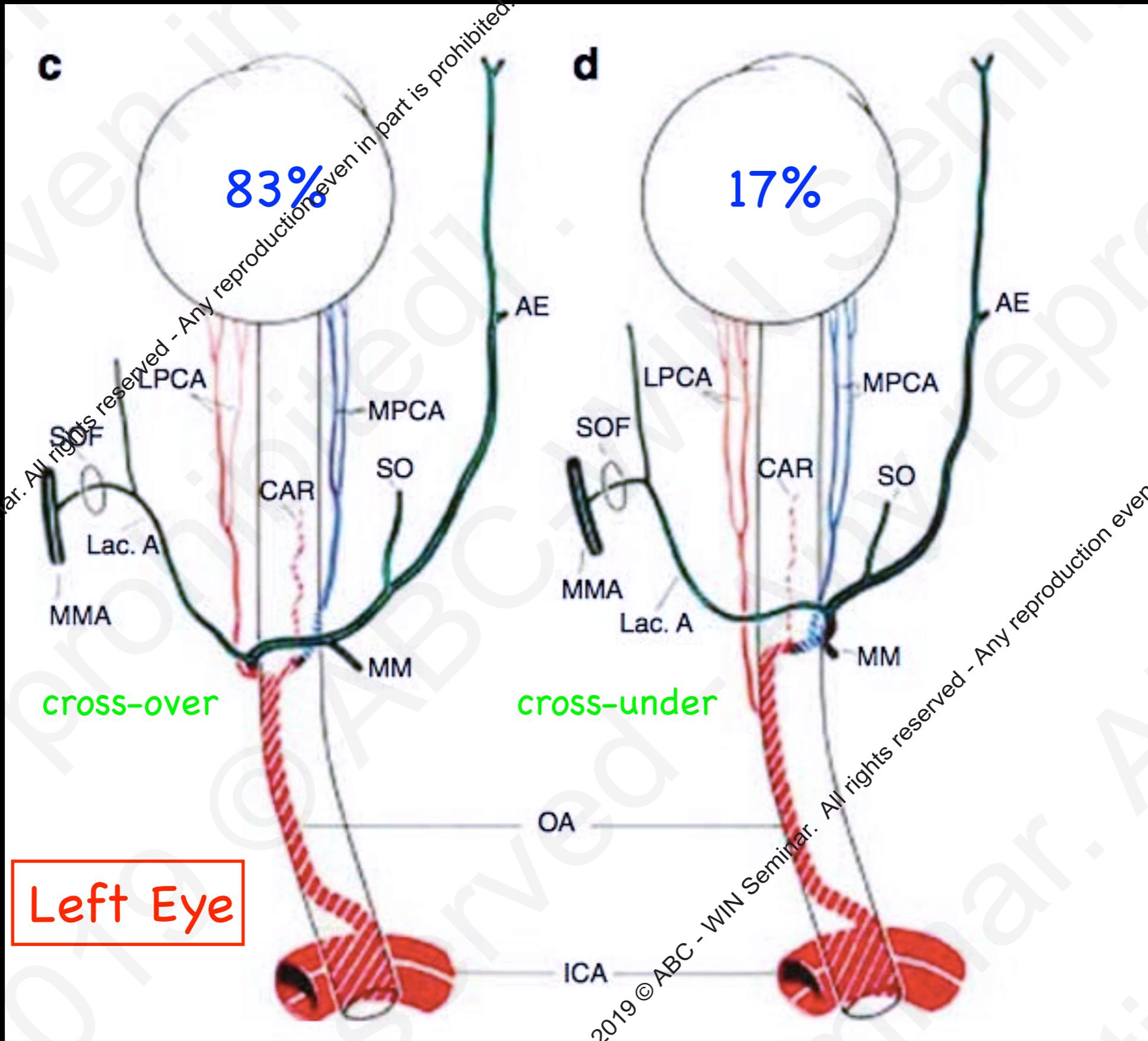
Three segments of infraorbital ophthalmic artery

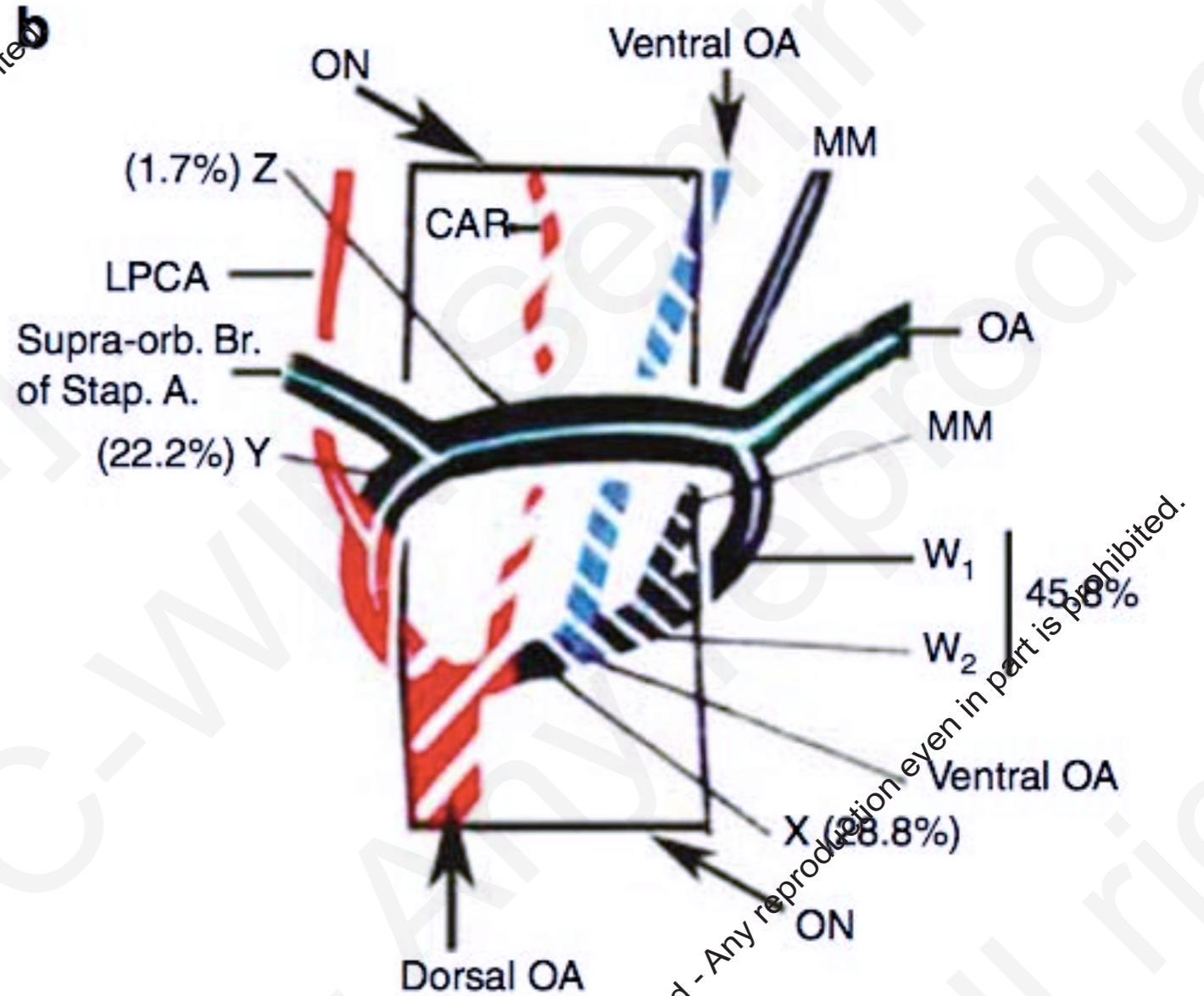
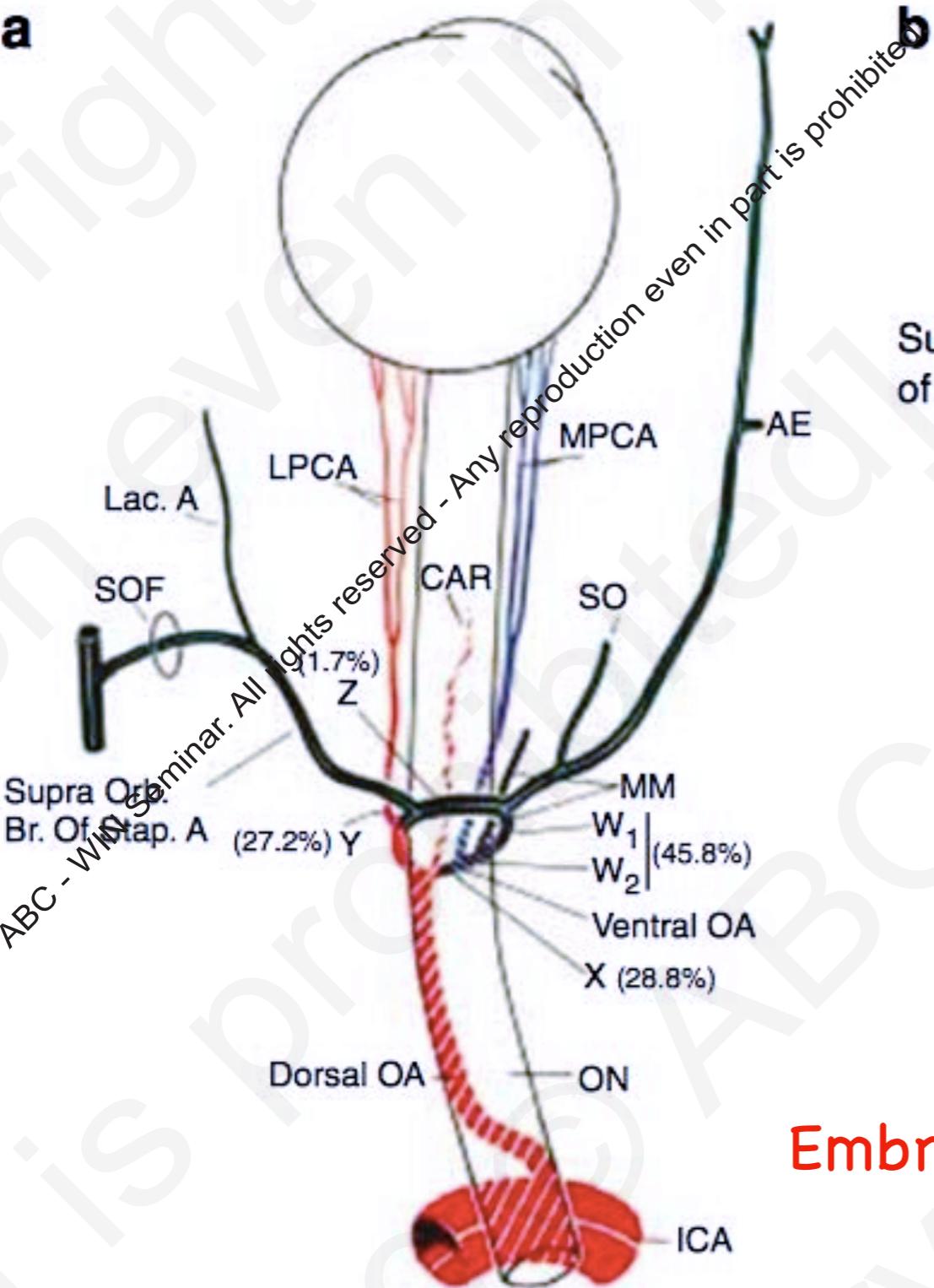


I portion: infero-lateral course

in the case of cross-over course (83%)

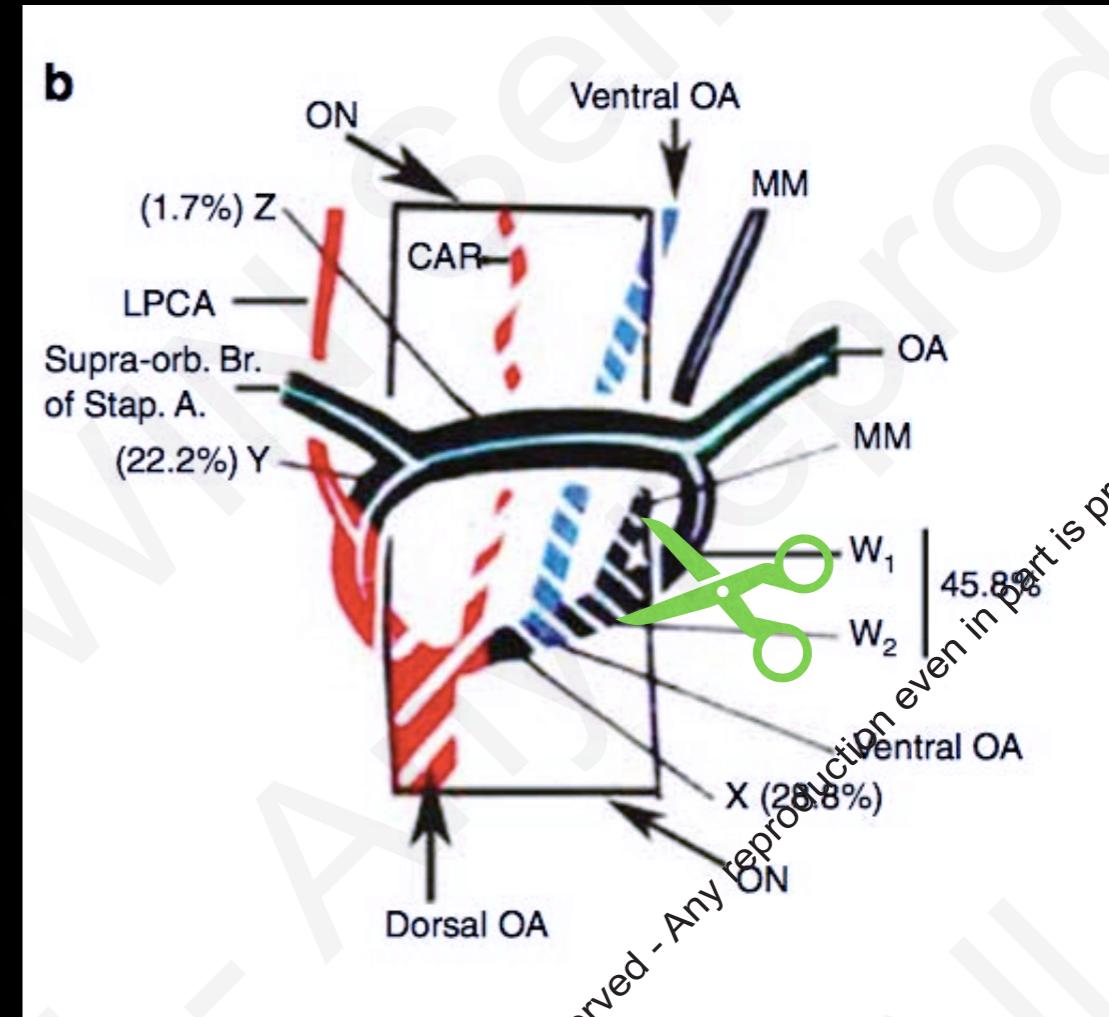
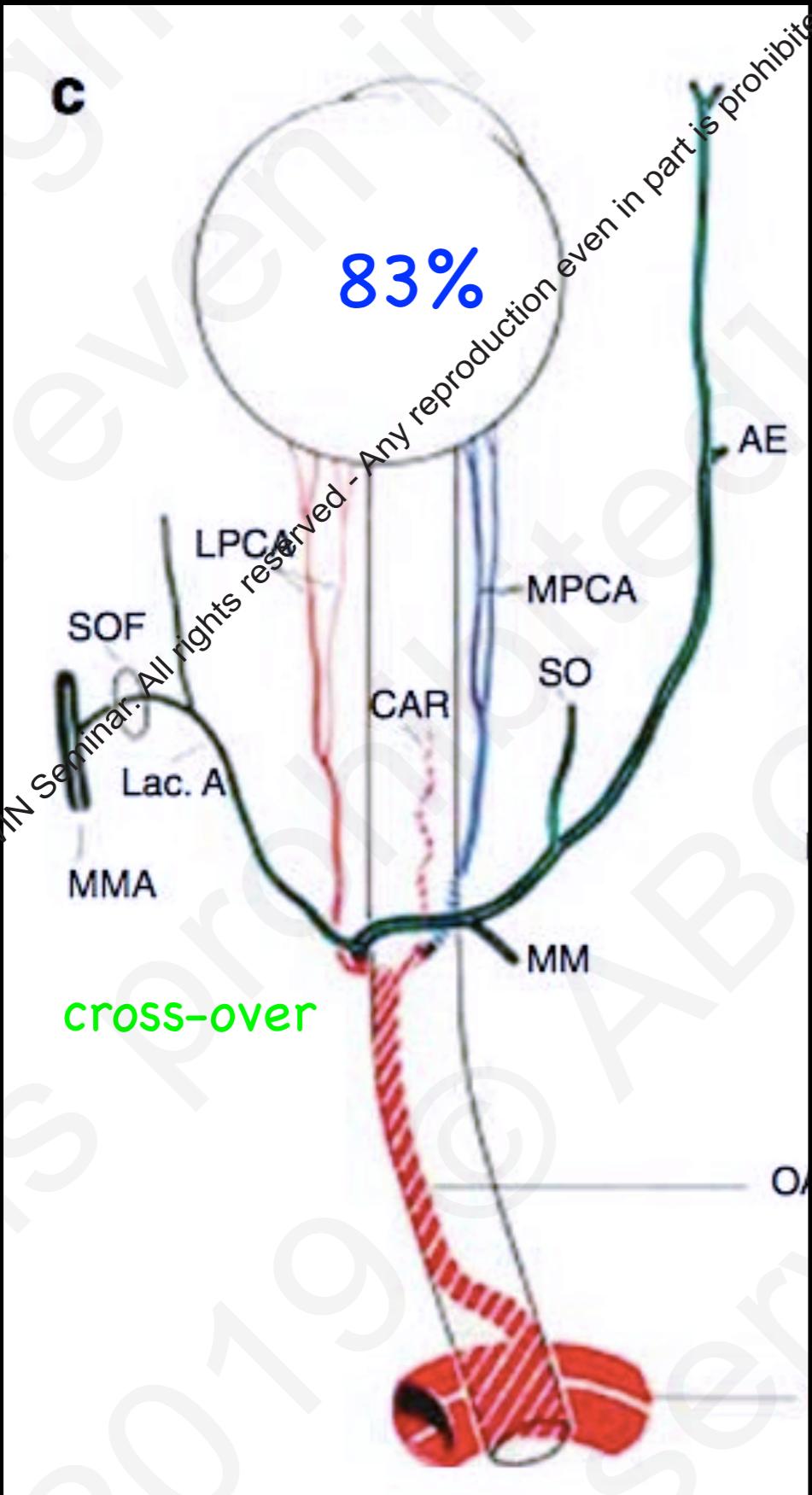
Cross-over and cross-under of the ophthalmic artery





Embryonic optic ring at the 2nd portion

Crossing-over ophthalmic artery

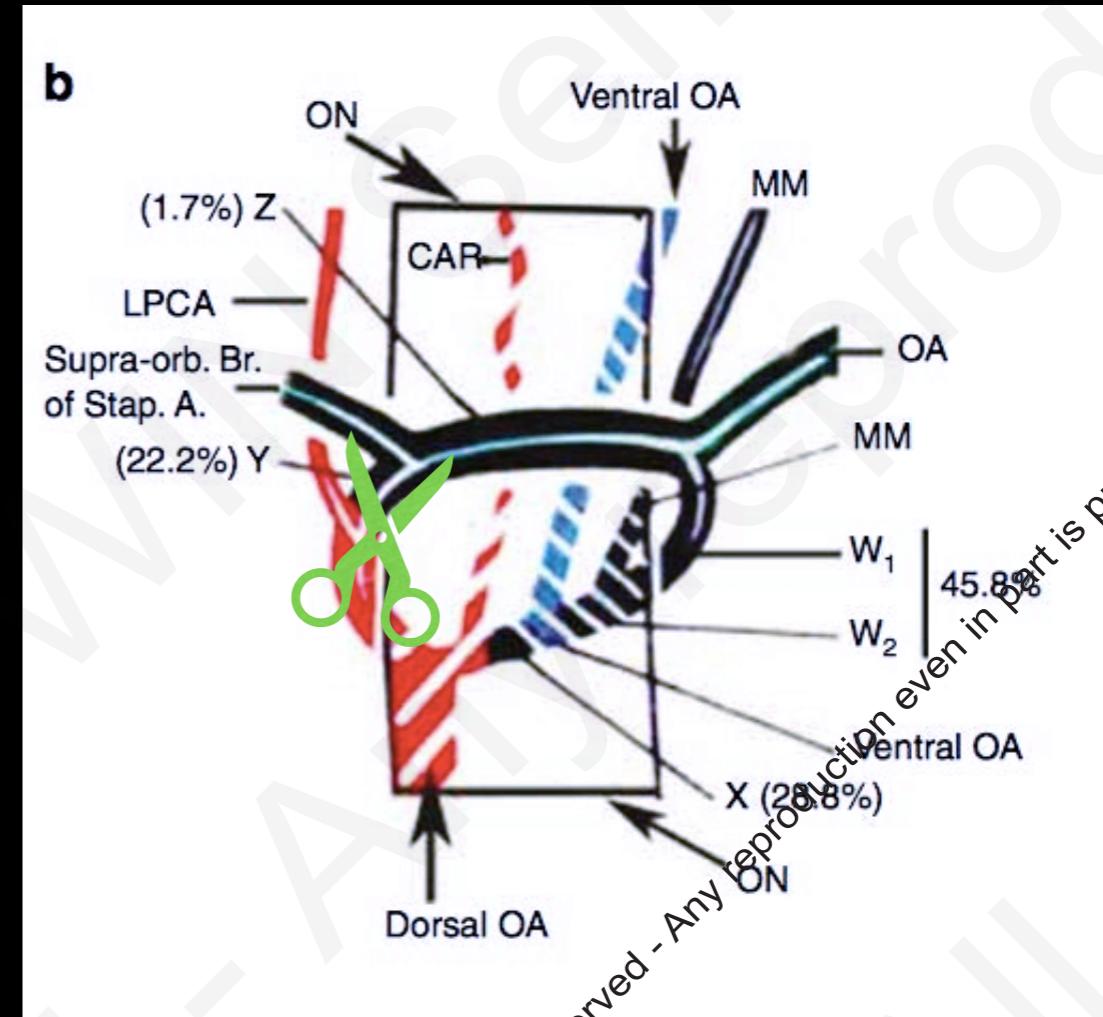
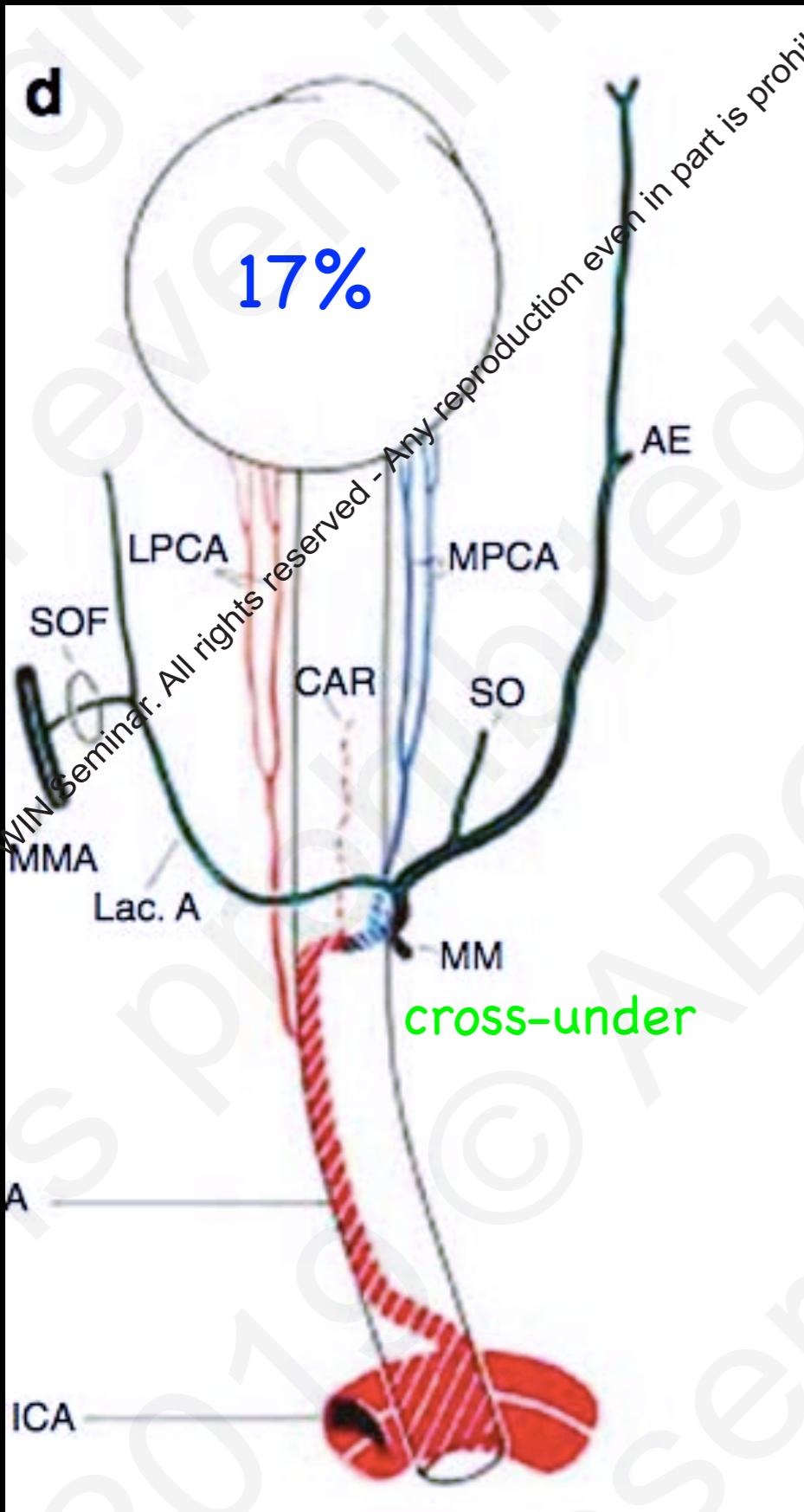


proximal: CRA + MPCA
distal: LPCA



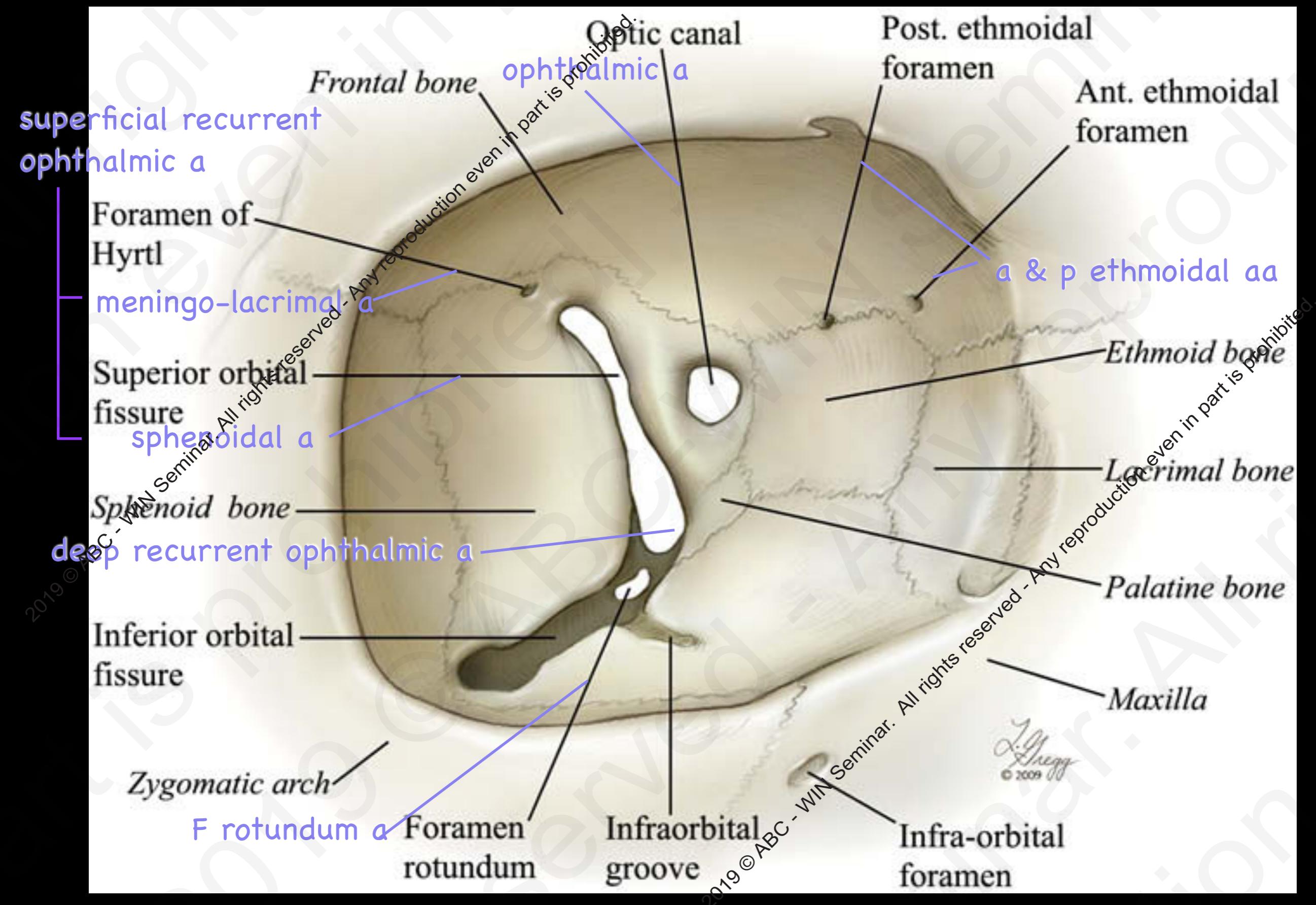
regression

Crossing-under ophthalmic artery

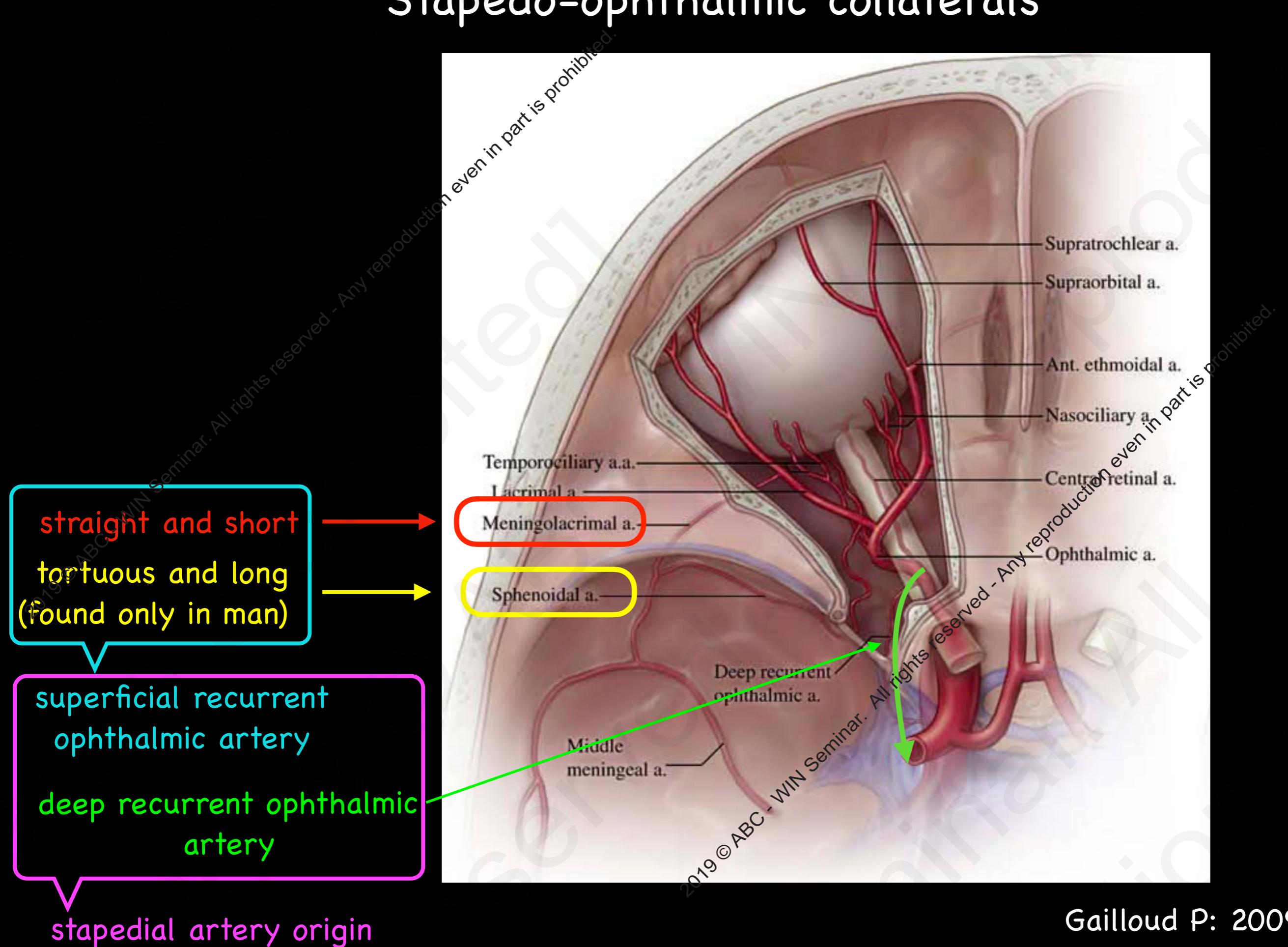


proximal: LPCA
then: CRA
distal: MPCA

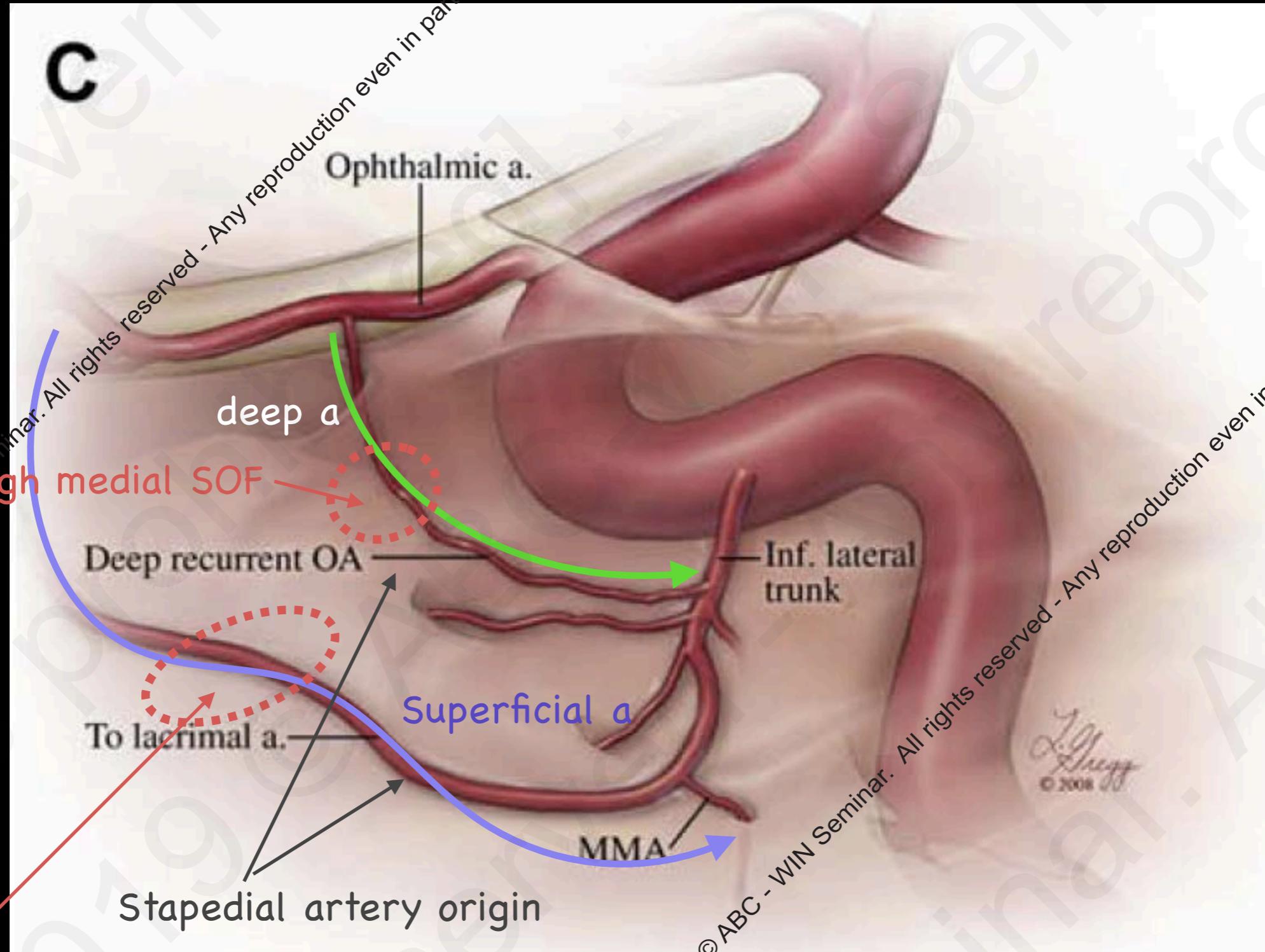
regression



Stapedo-ophthalmic collaterals



Superficial and deep recurrent meningeal (ophthalmic) arteries



through medial SOF

Deep recurrent OA

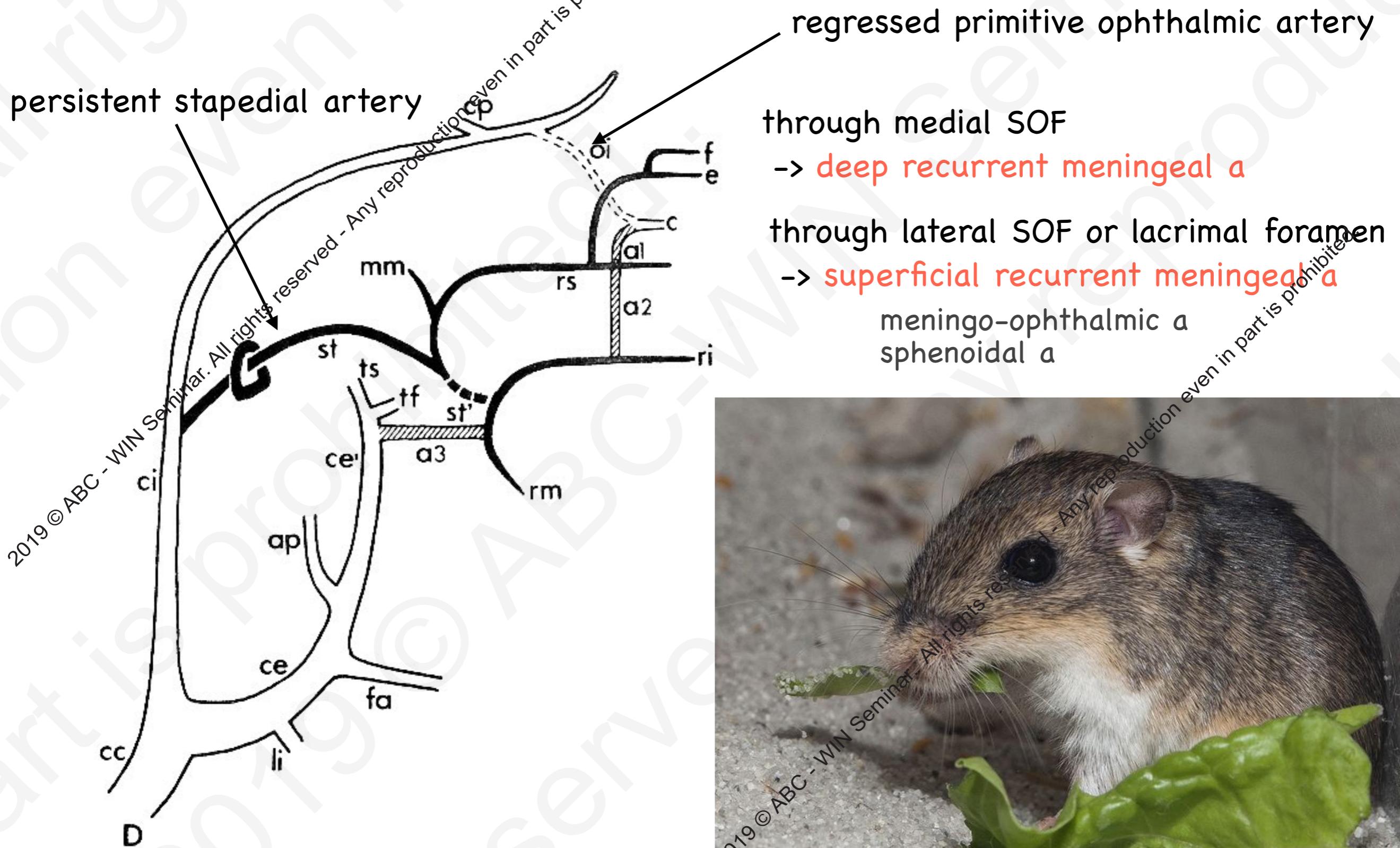
Superficial a.

To lacrimal a.

Stapedial artery origin

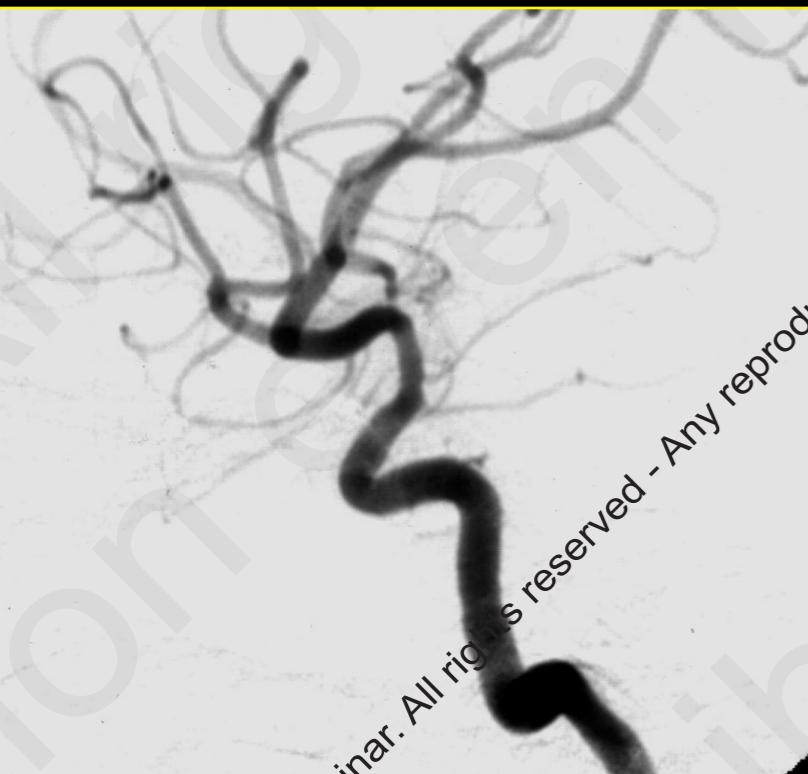
through lateral SOF or Hyrtl canal

Ophthalmic artery of the MMA origin (stapedial supply)

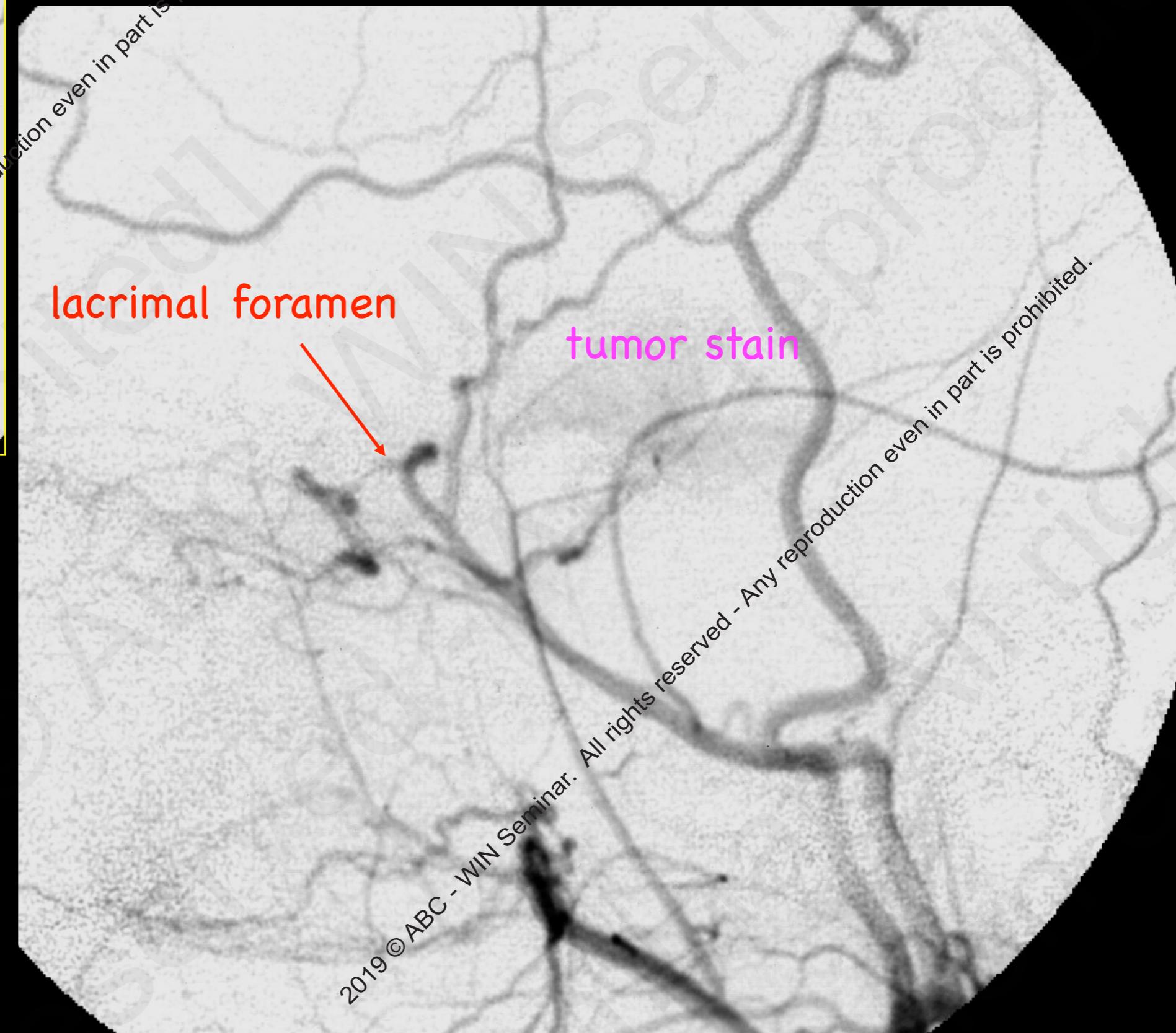


Perognathus

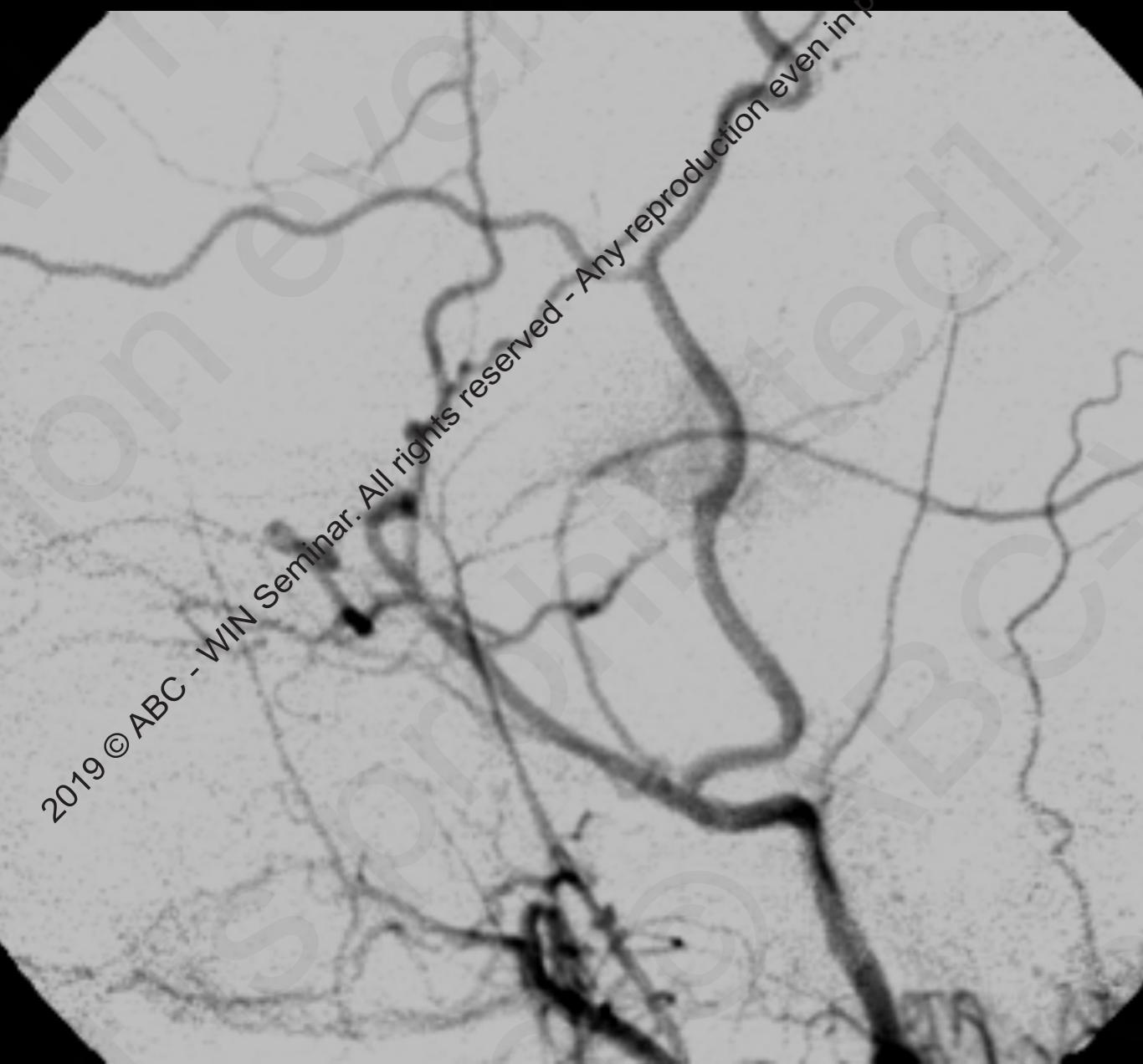
Lacrimal foramen (Hyrtl foramen) and ophthalmic artery of MMA origin



29/F: meningioma



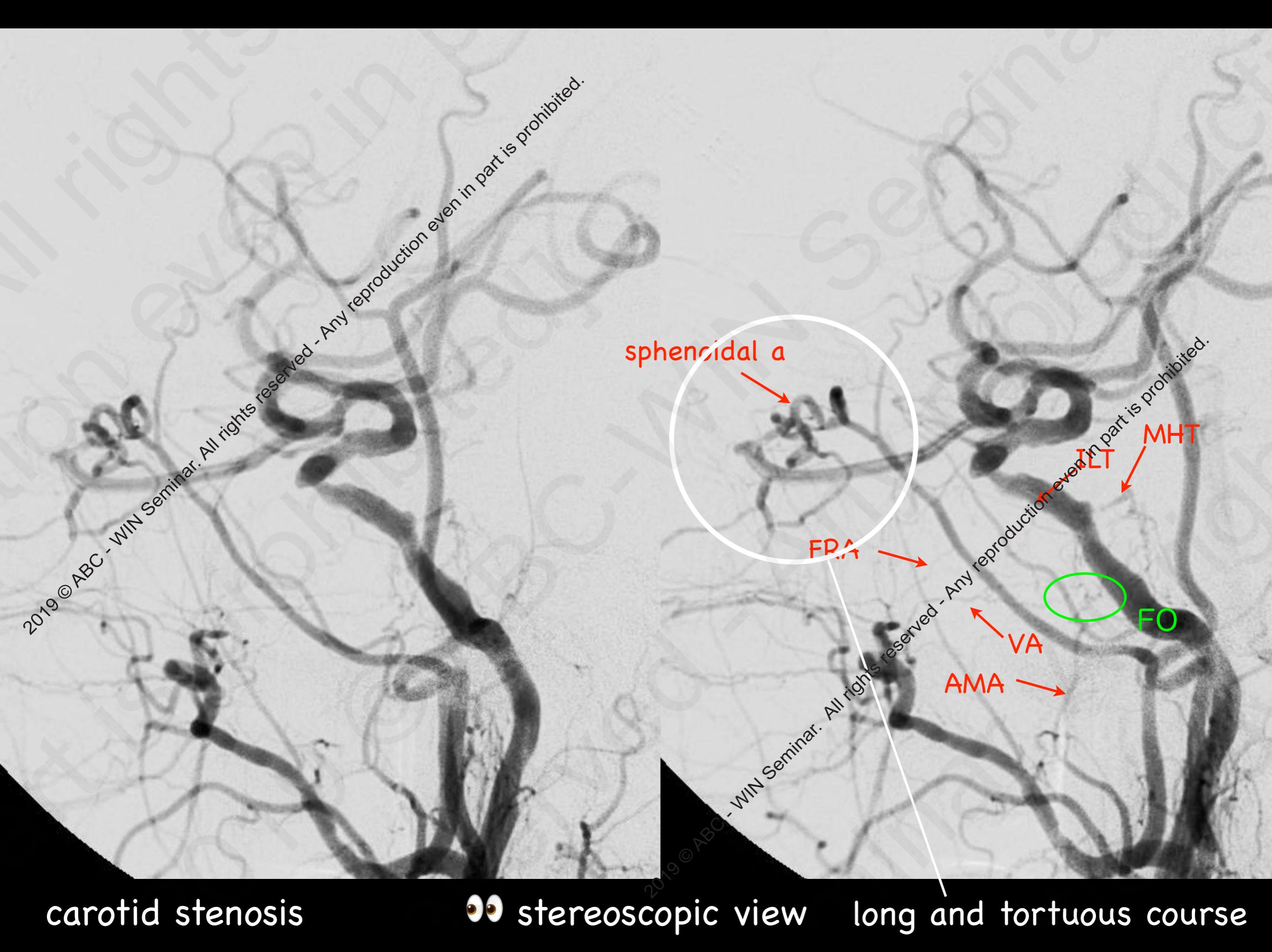
Lacrimal foramen and ophthalmic artery of MMA origin



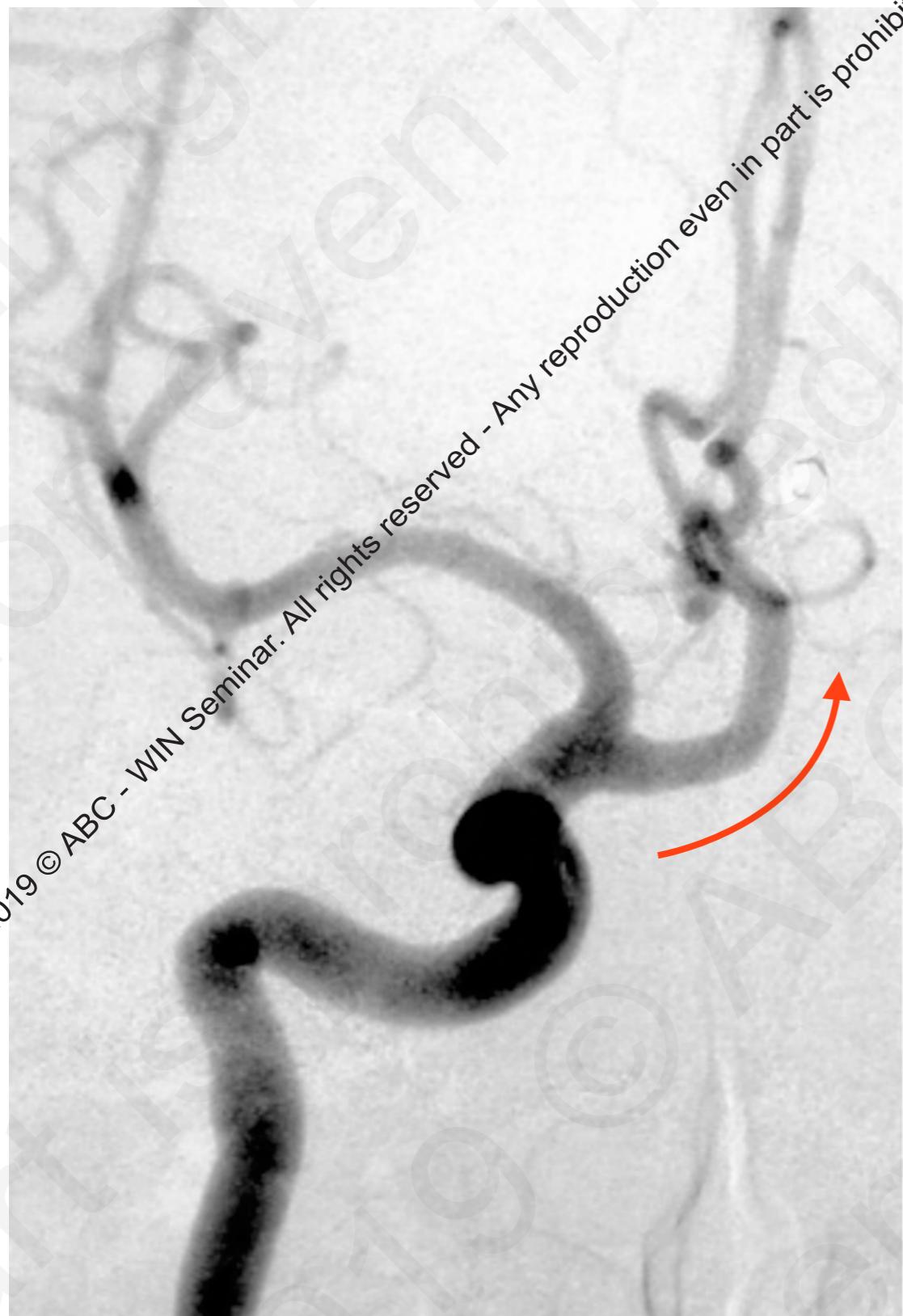
short and straight course

29/F: meningioma

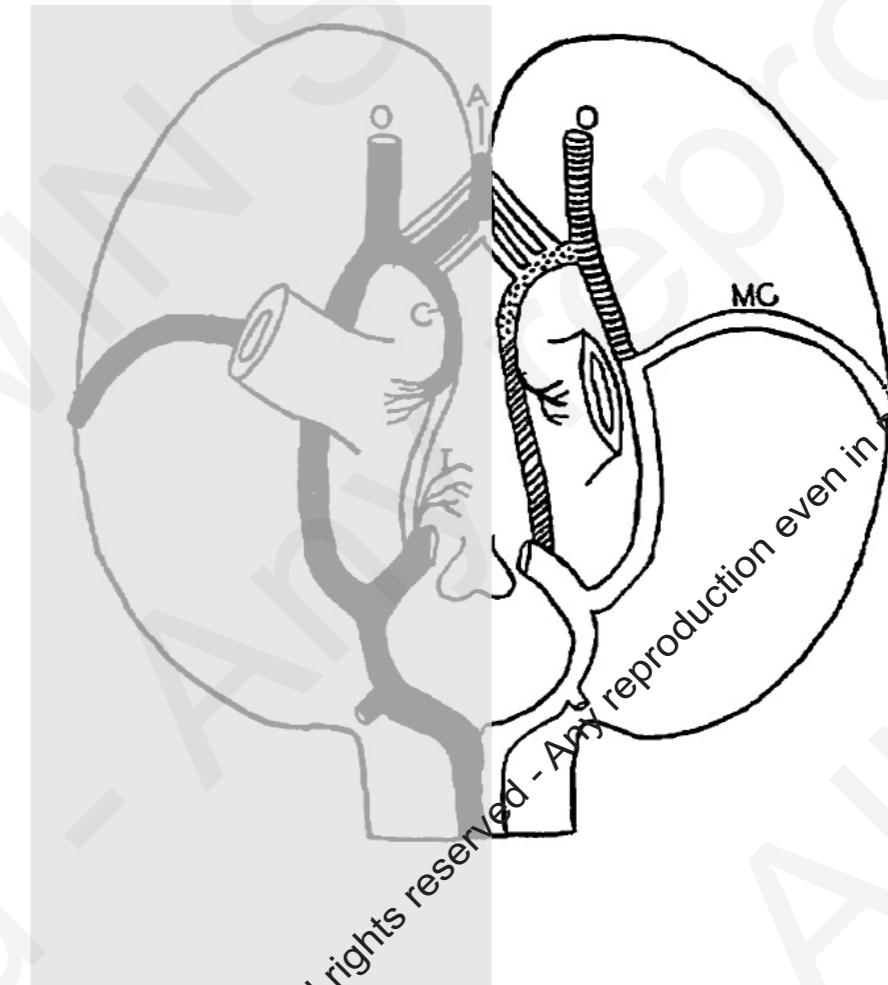
立体视图
stereoscopic view



Infraoptic course of ACA



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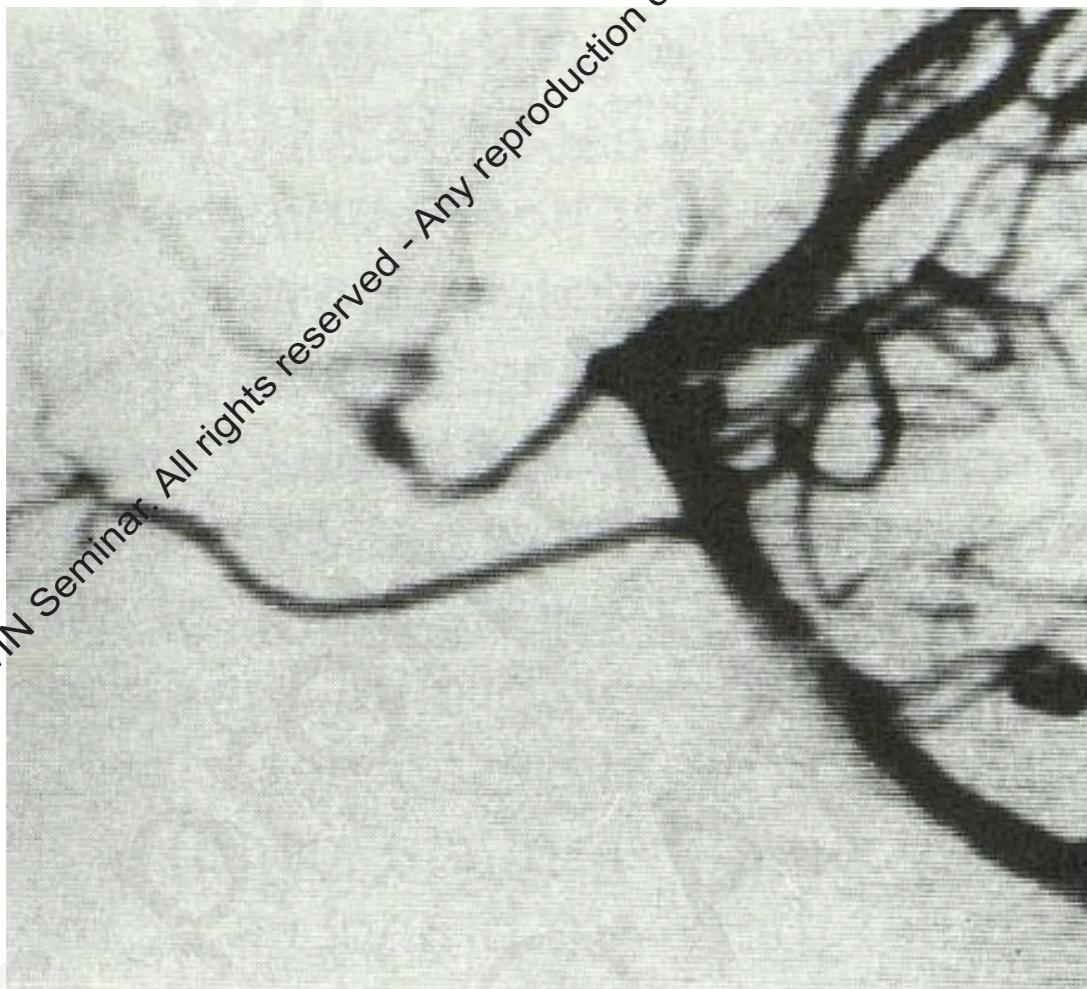


Moffat DB 1961

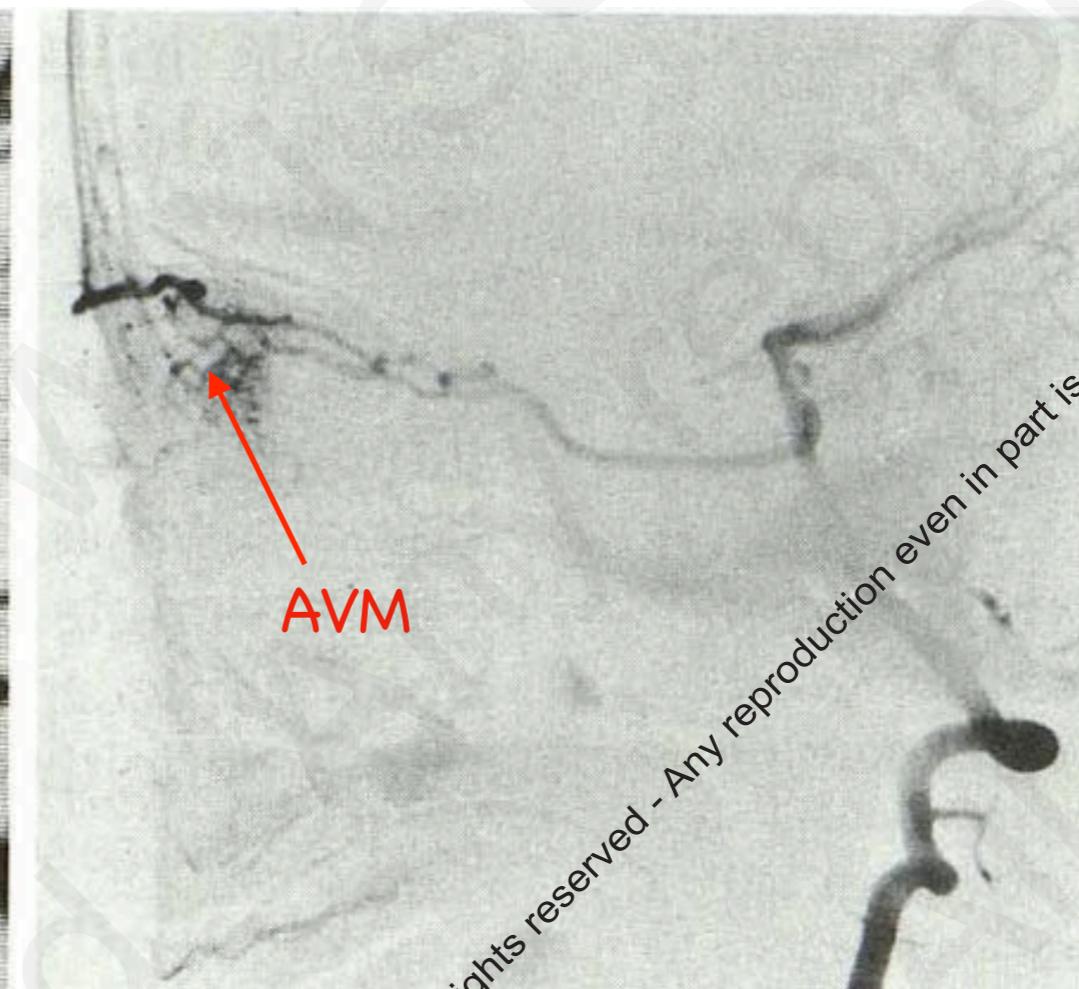
probably related to either chiasmatic branches of primitive olfactory
and/or primitive maxillary (pre-mandibular)artery in origin

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Ophthalmic artery of the basilar artery origin



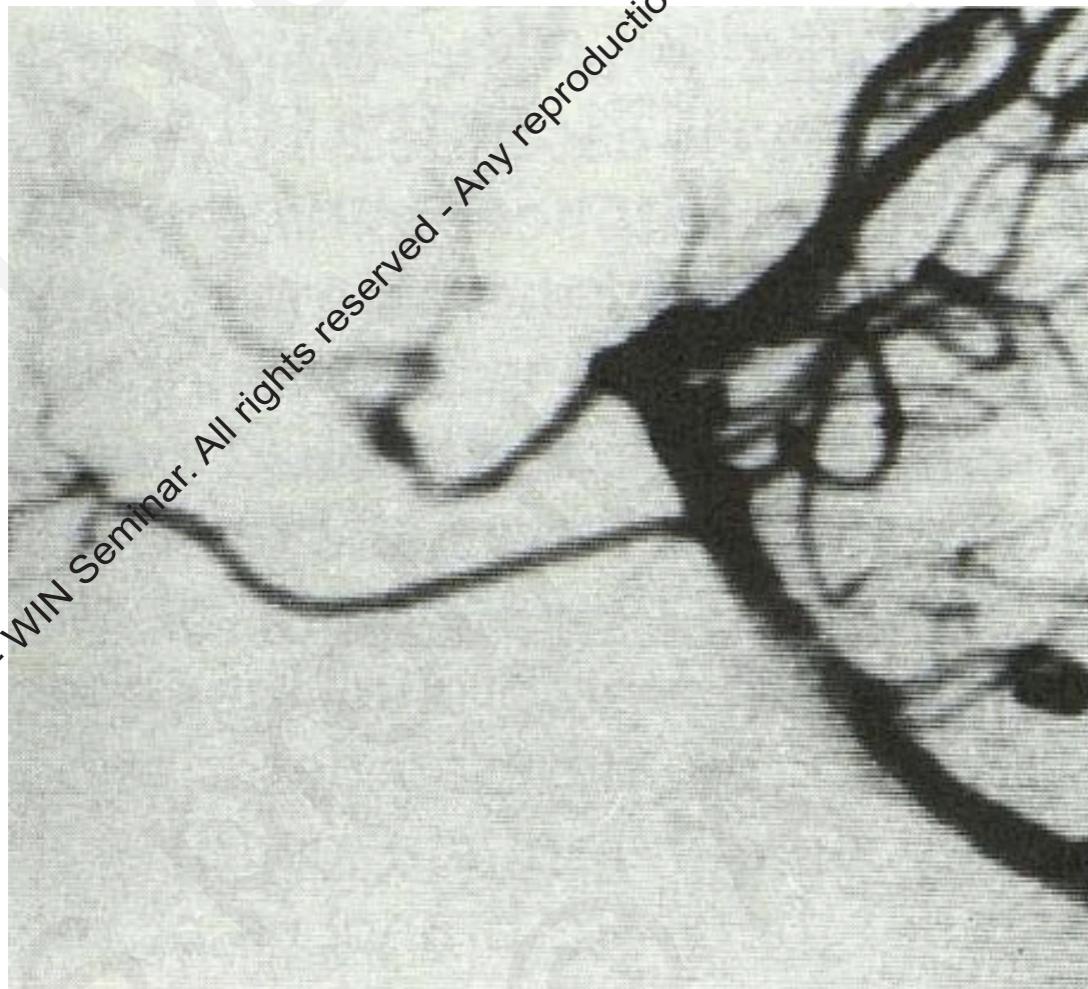
Right VAG with right carotid compression



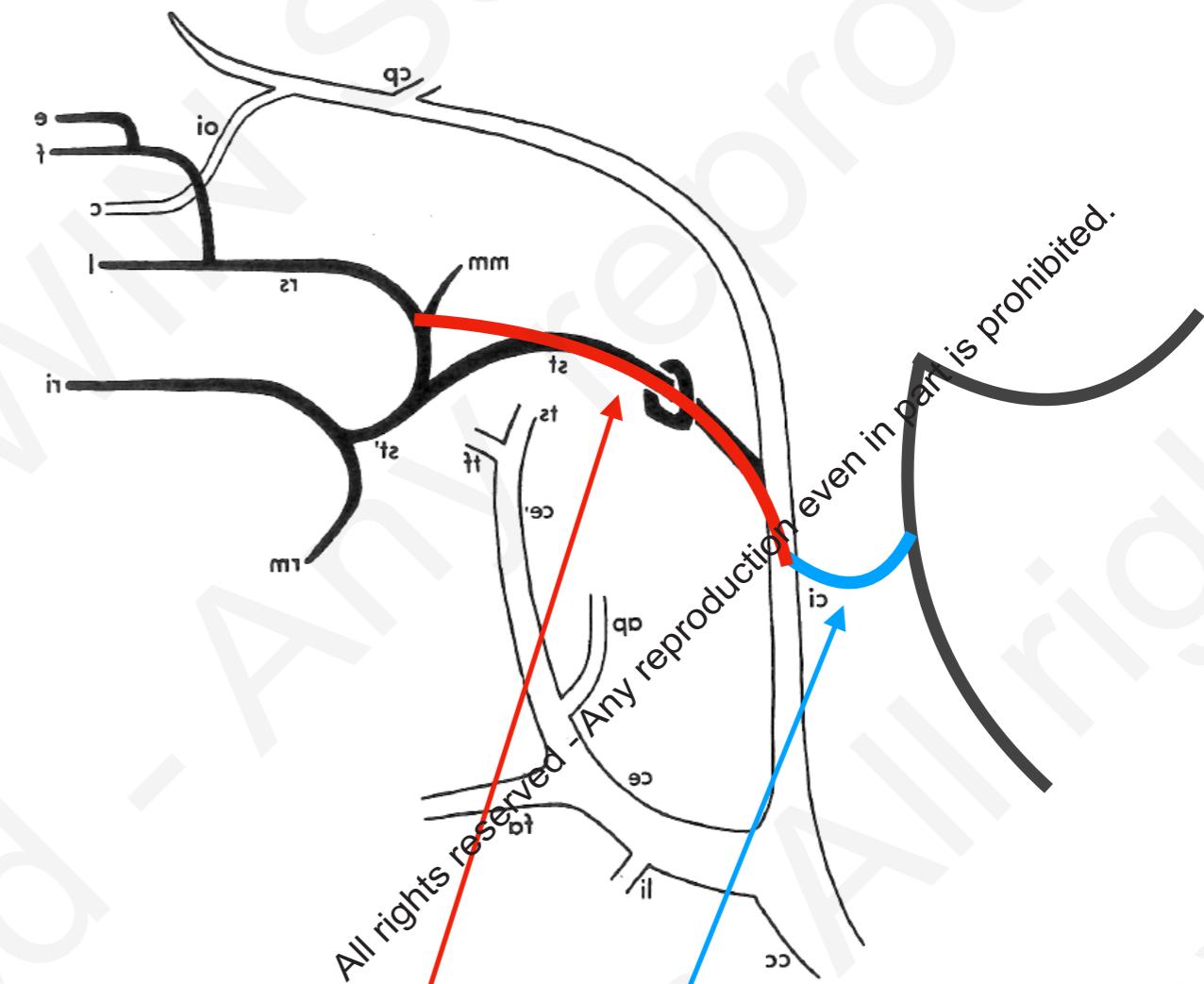
Right VAG

Schumacher M: AJNR 1994

Ophthalmic artery of the basilar artery origin



Right VAG with right carotid compression



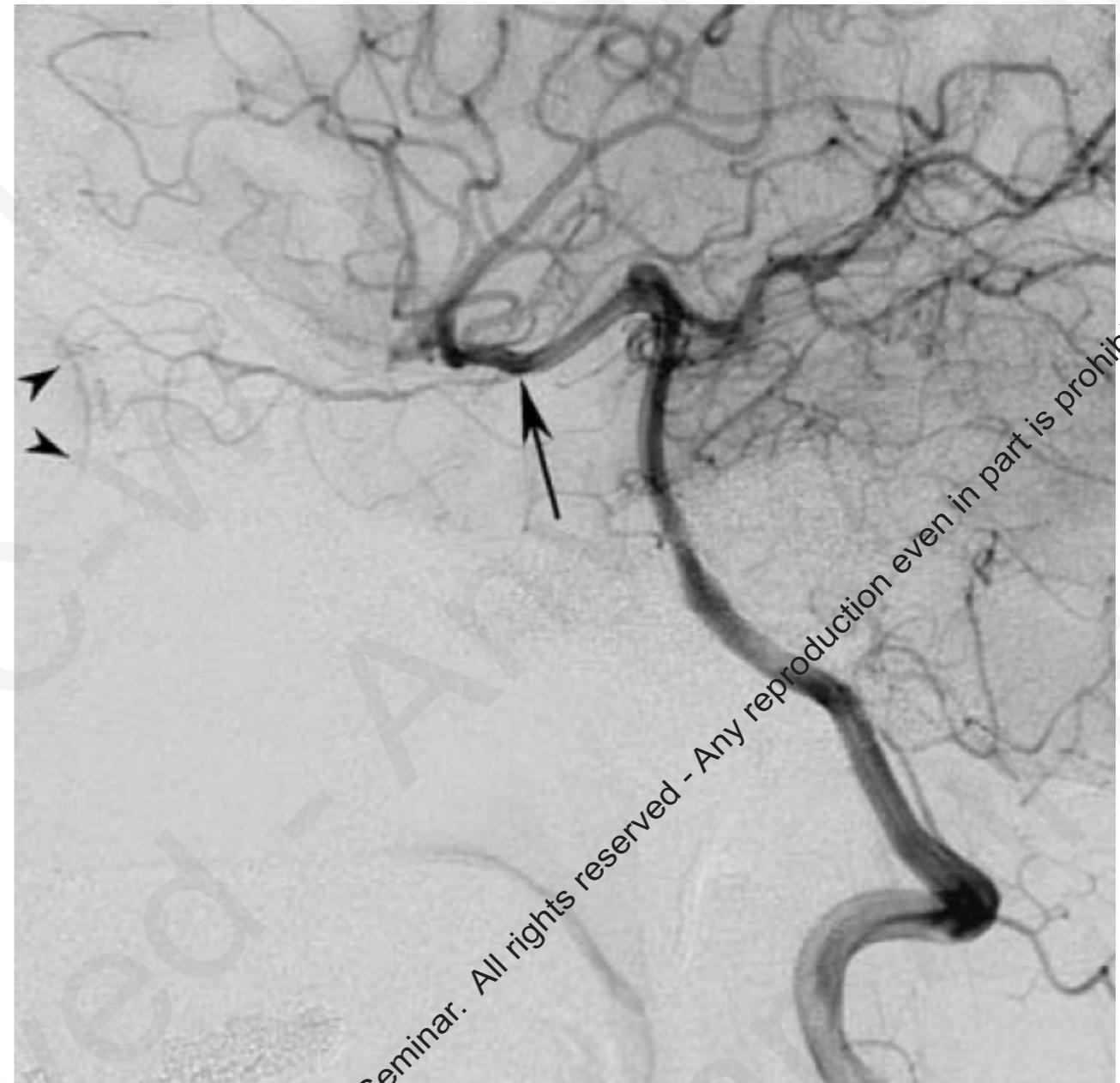
ophthalmic-stapedio-trigeminal anastomosis

Schumacher M: AJNR 1994

Ophthalmic artery of the p-com origin



Right ICA agenesis



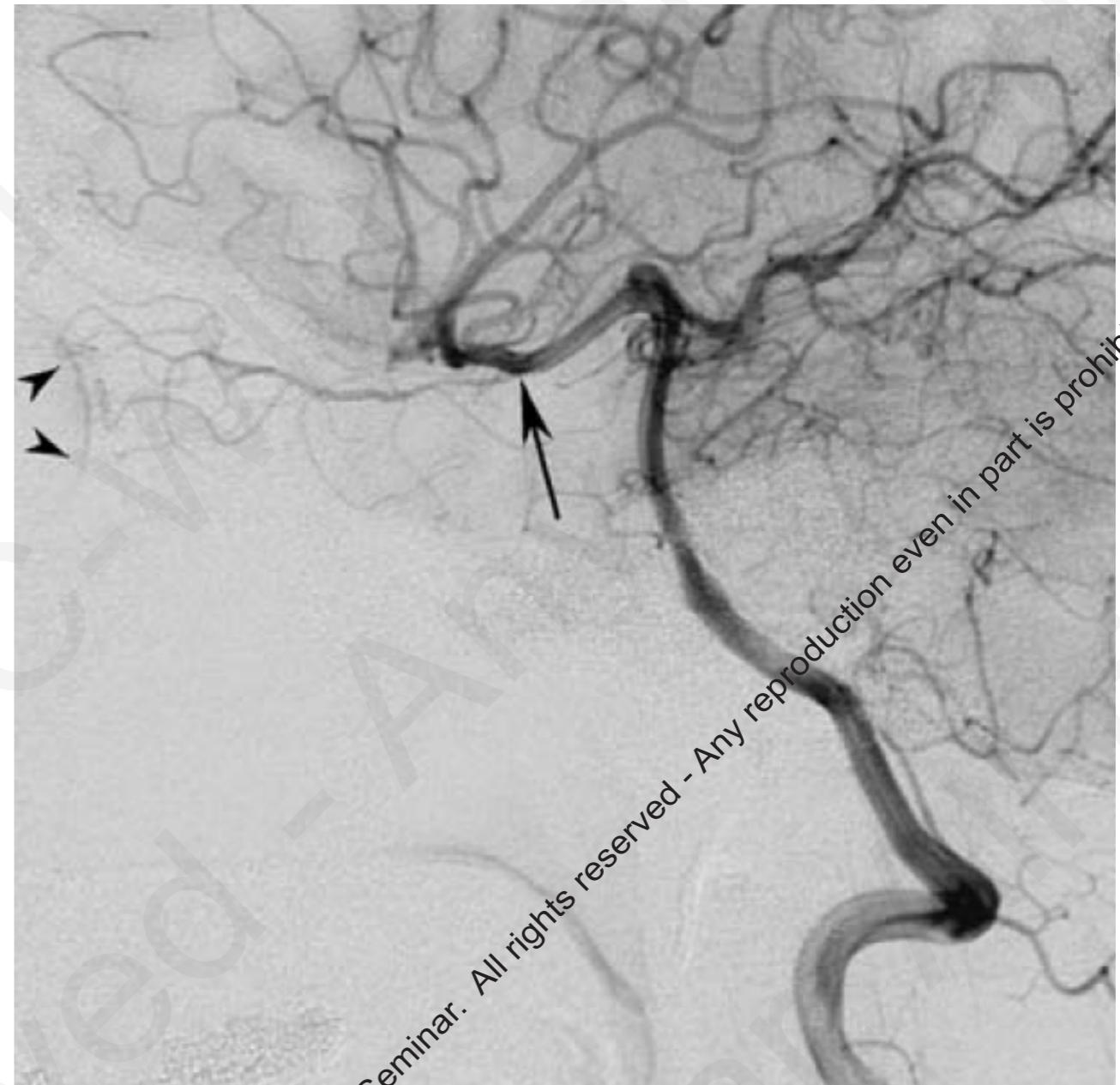
Right VAG

Naeini RM: AJR 2005

Ophthalmic artery of the ~~p-com~~ origin

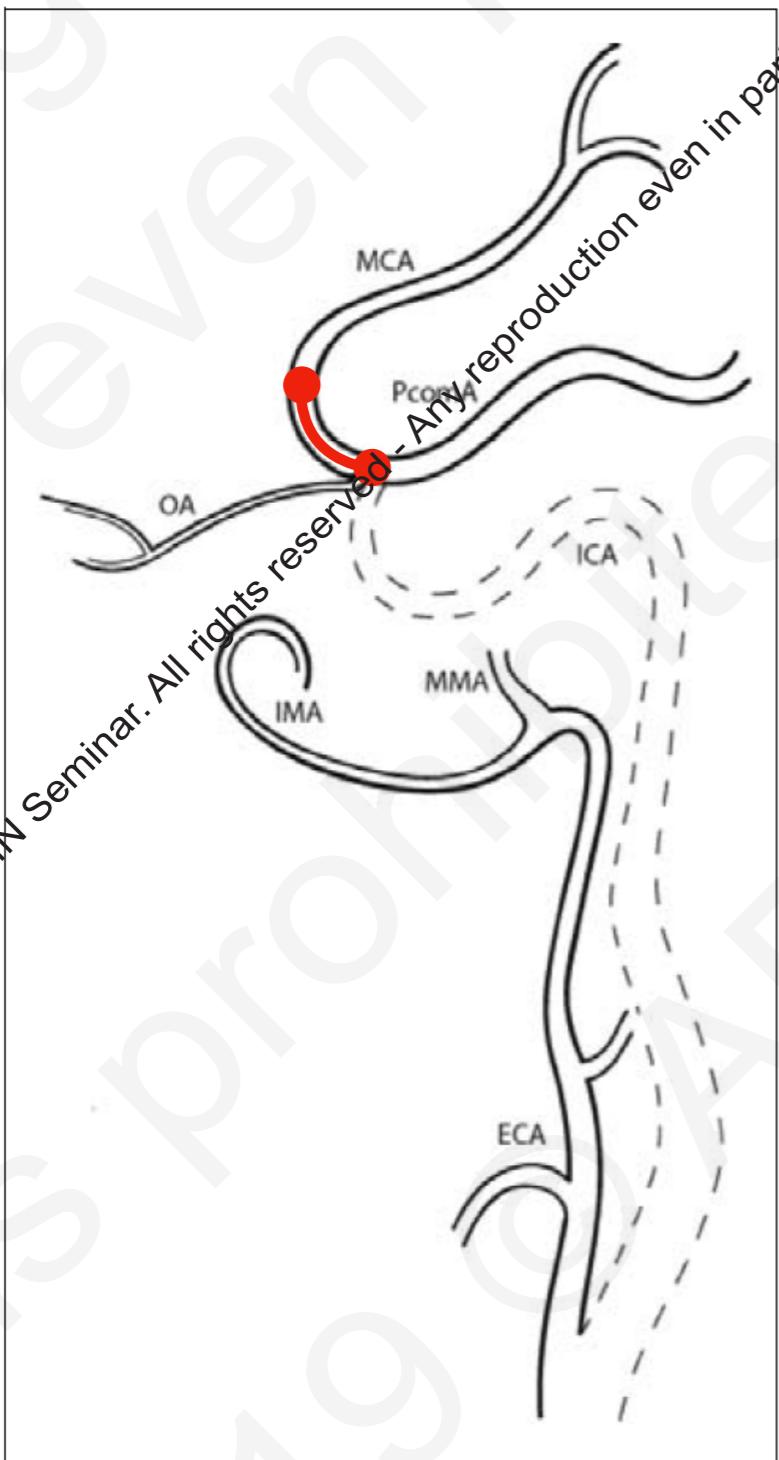


ICA segment (p-com a to IC top)

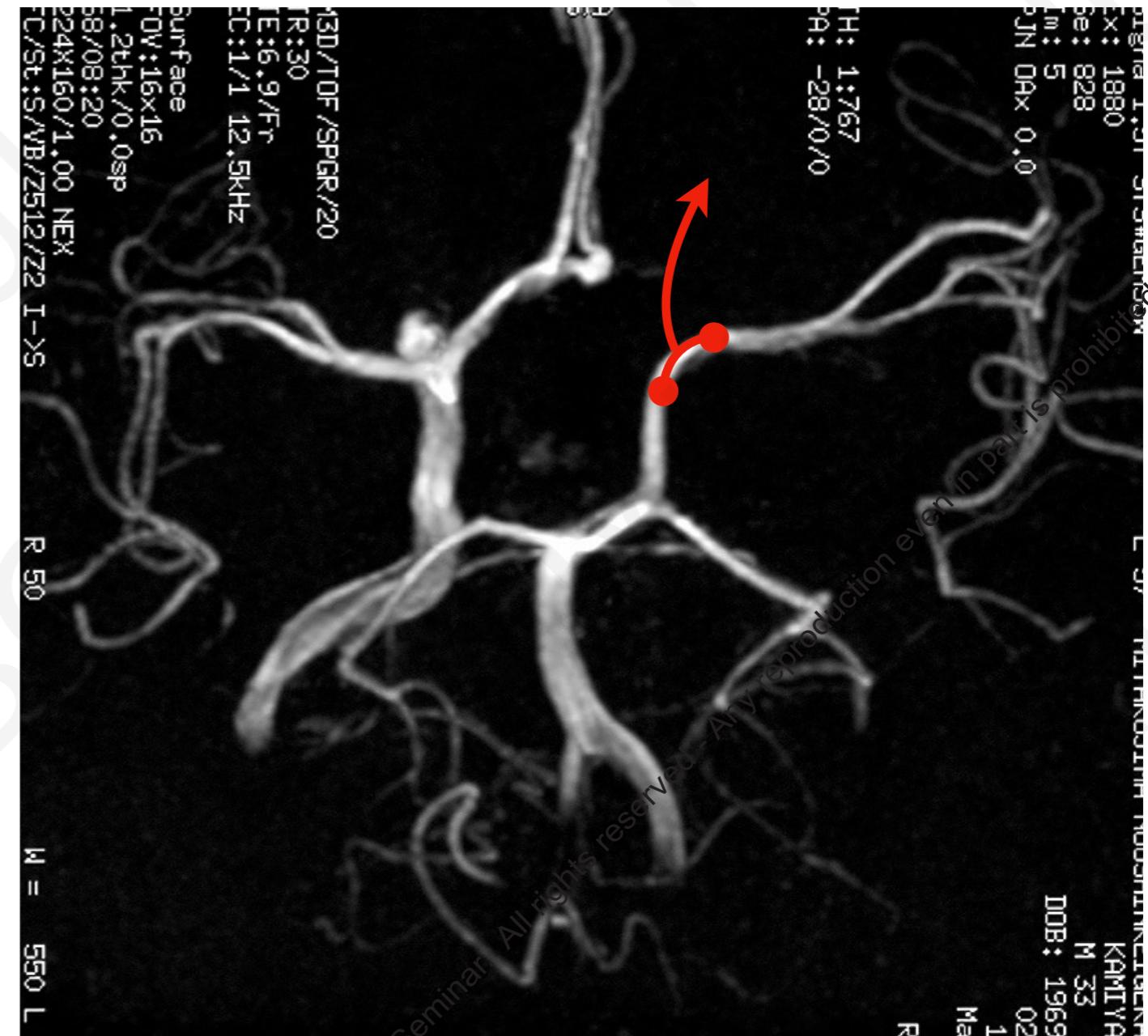


Naeini RM: AJR 2005

Ophthalmic artery of the MCA origin



ICA segment (p-com a to IC top)



Left ICA agenesis

Lower LG: Ant Rec 1916

ECA-Ophthalmic a (IC branches) anastomoses

dangerous anastomoses

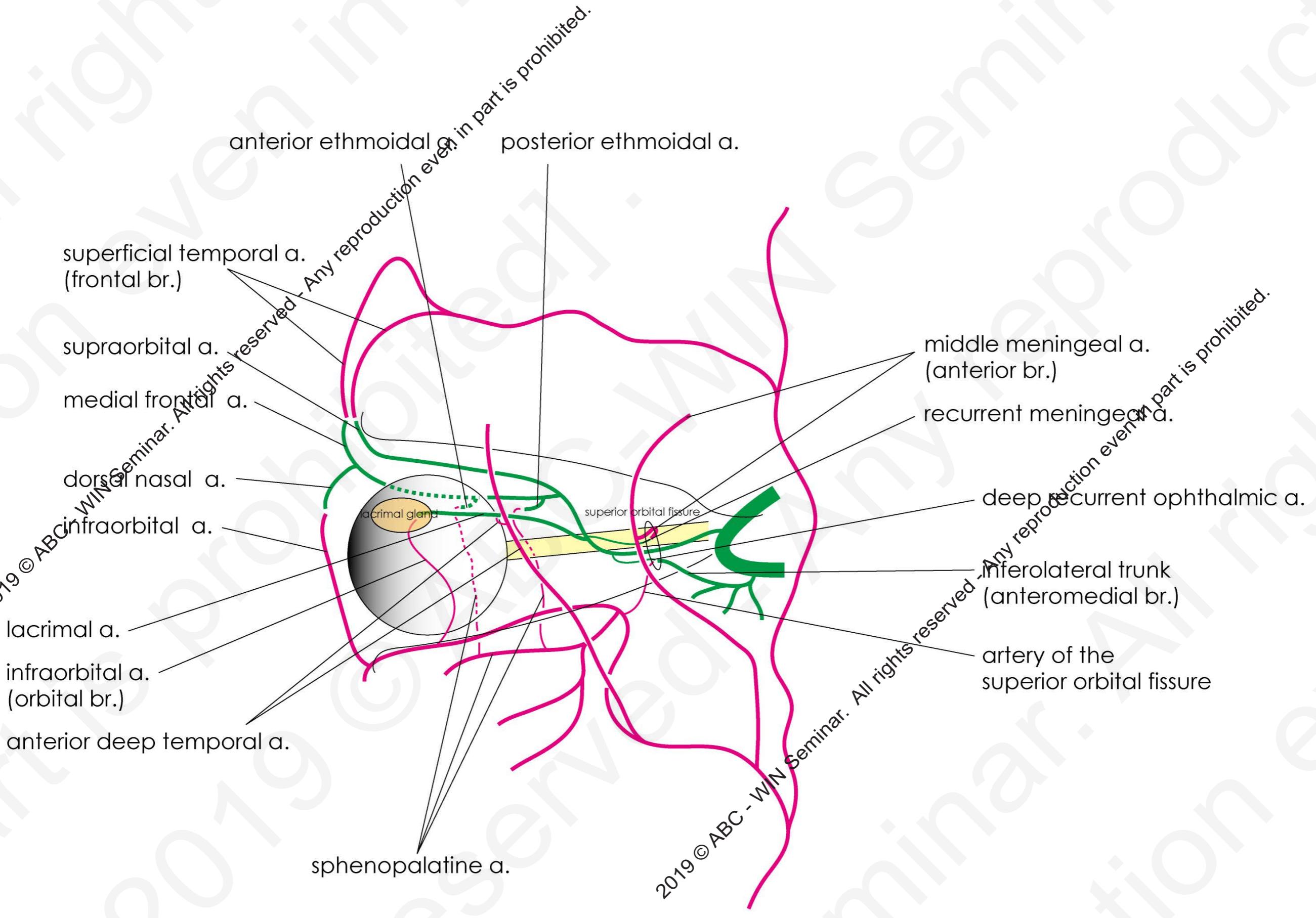
useful anastomoses

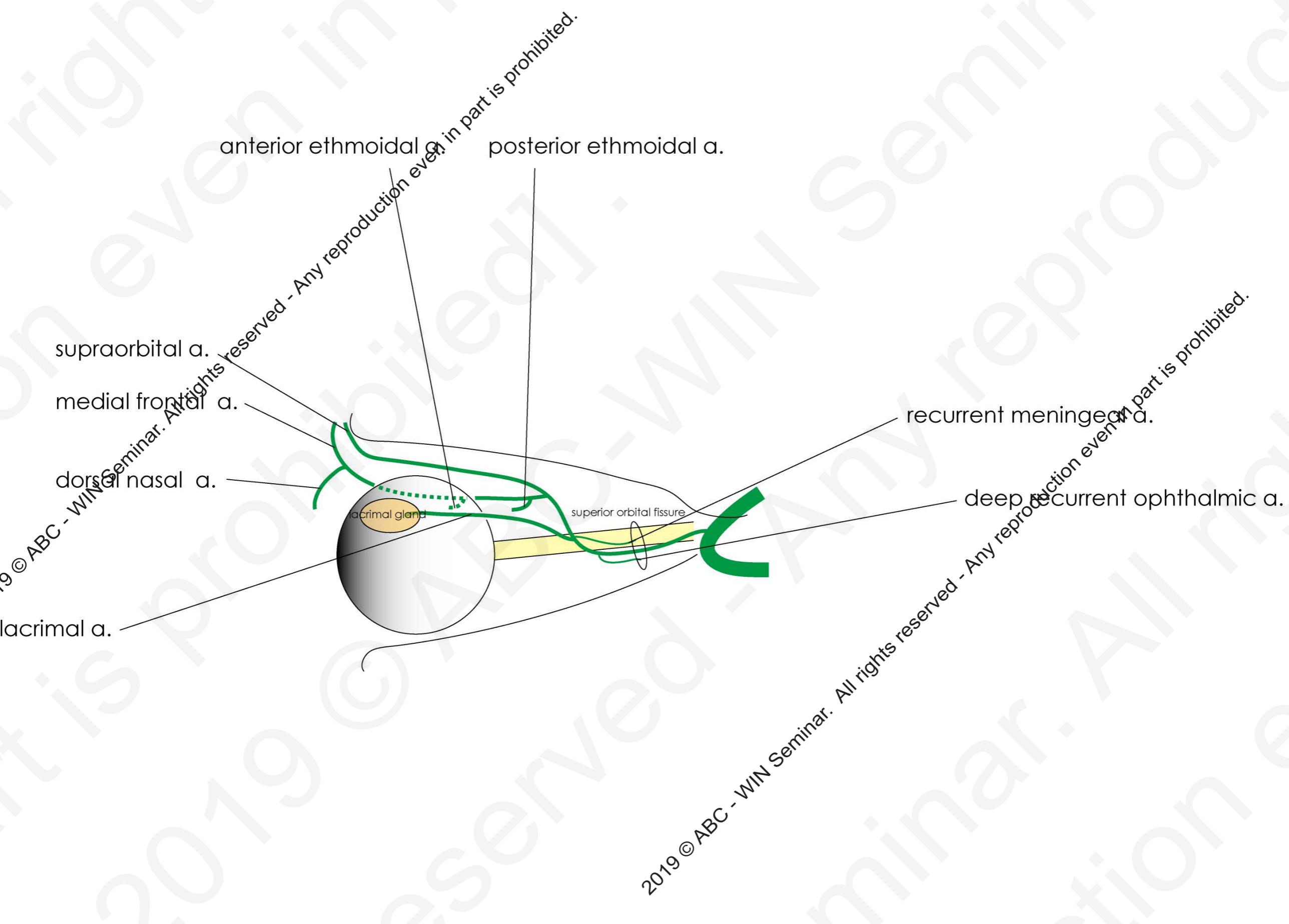
courtesy of Ishiguro T (colleague)

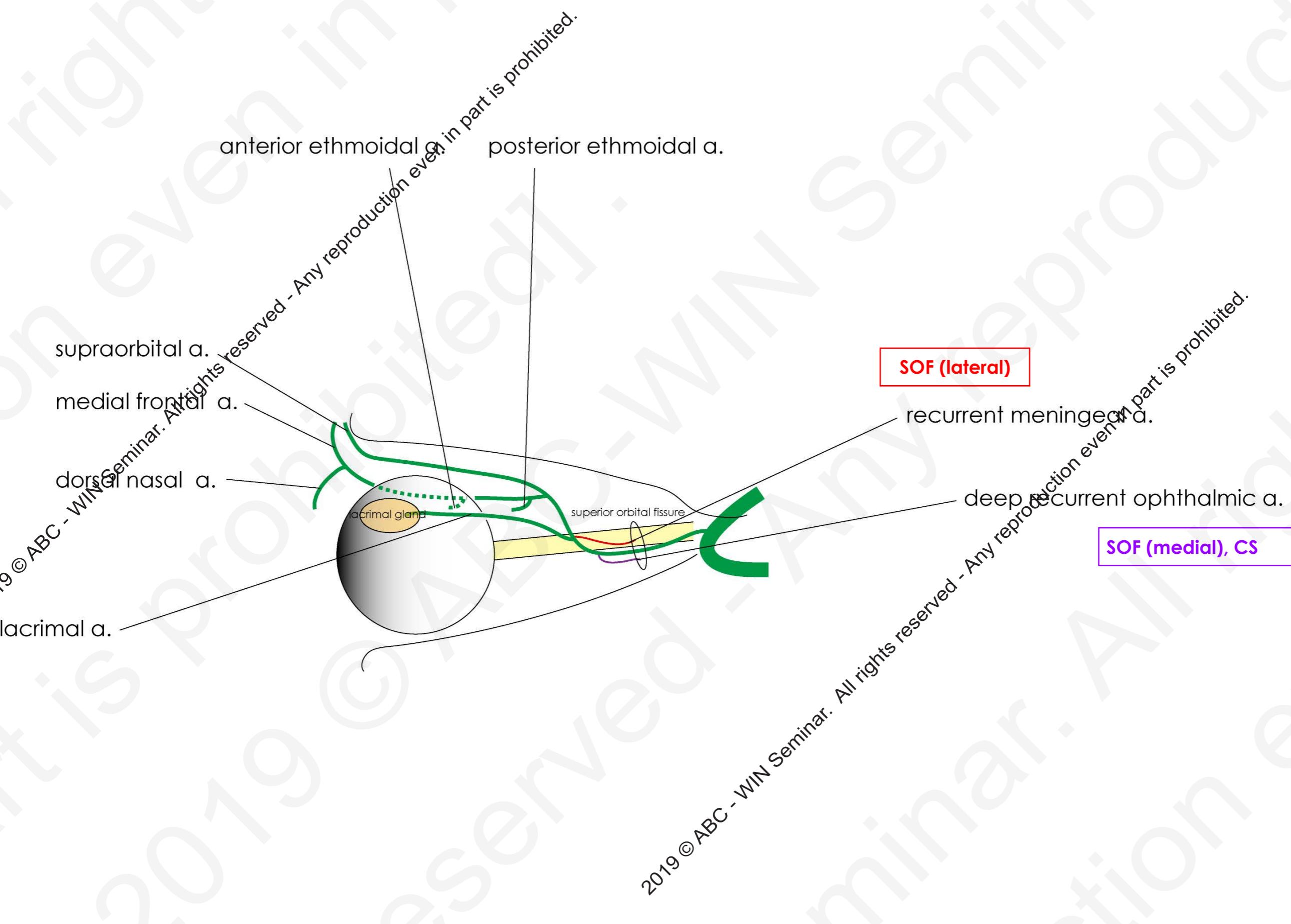
Osaka City General Hospital

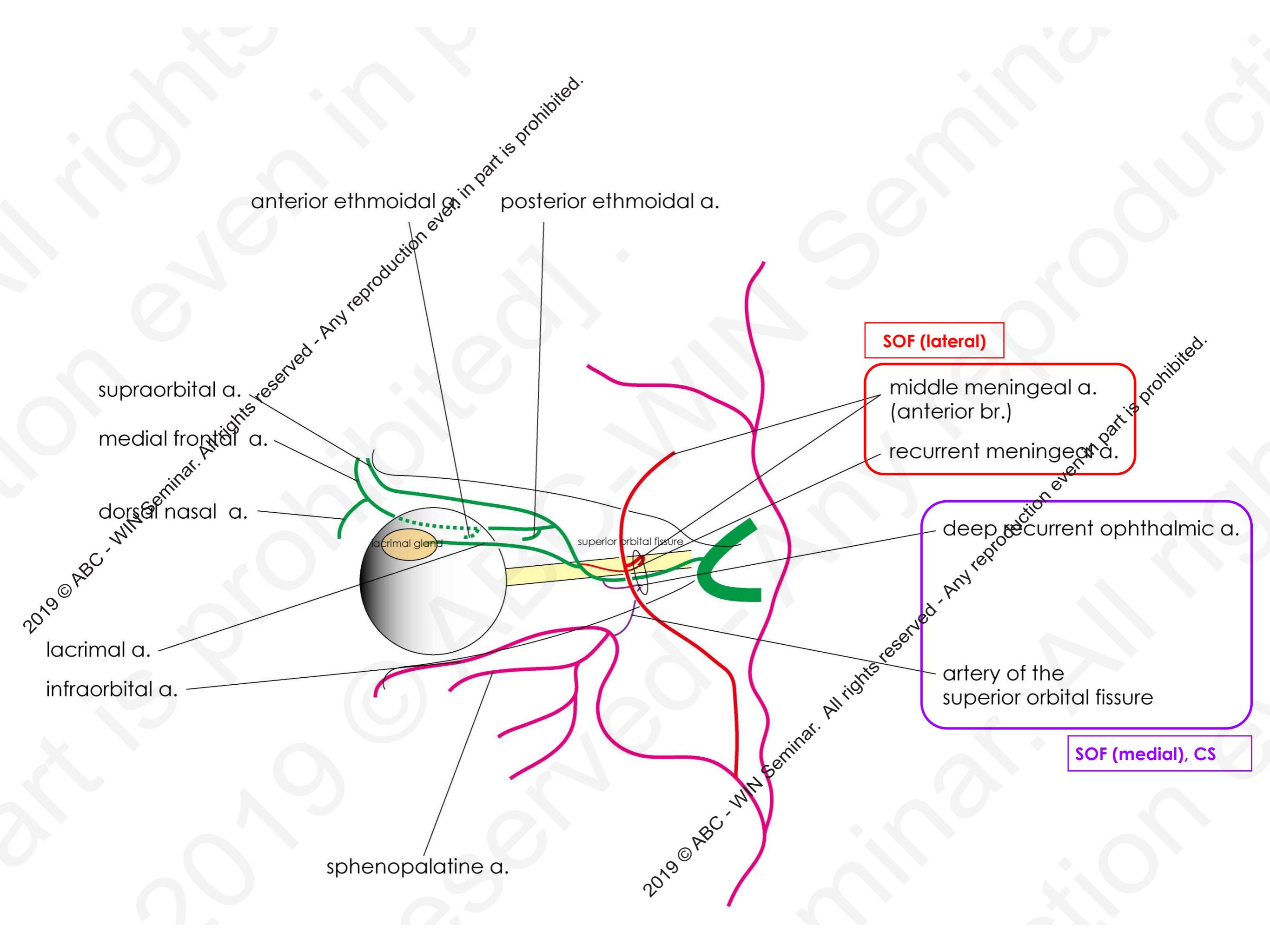
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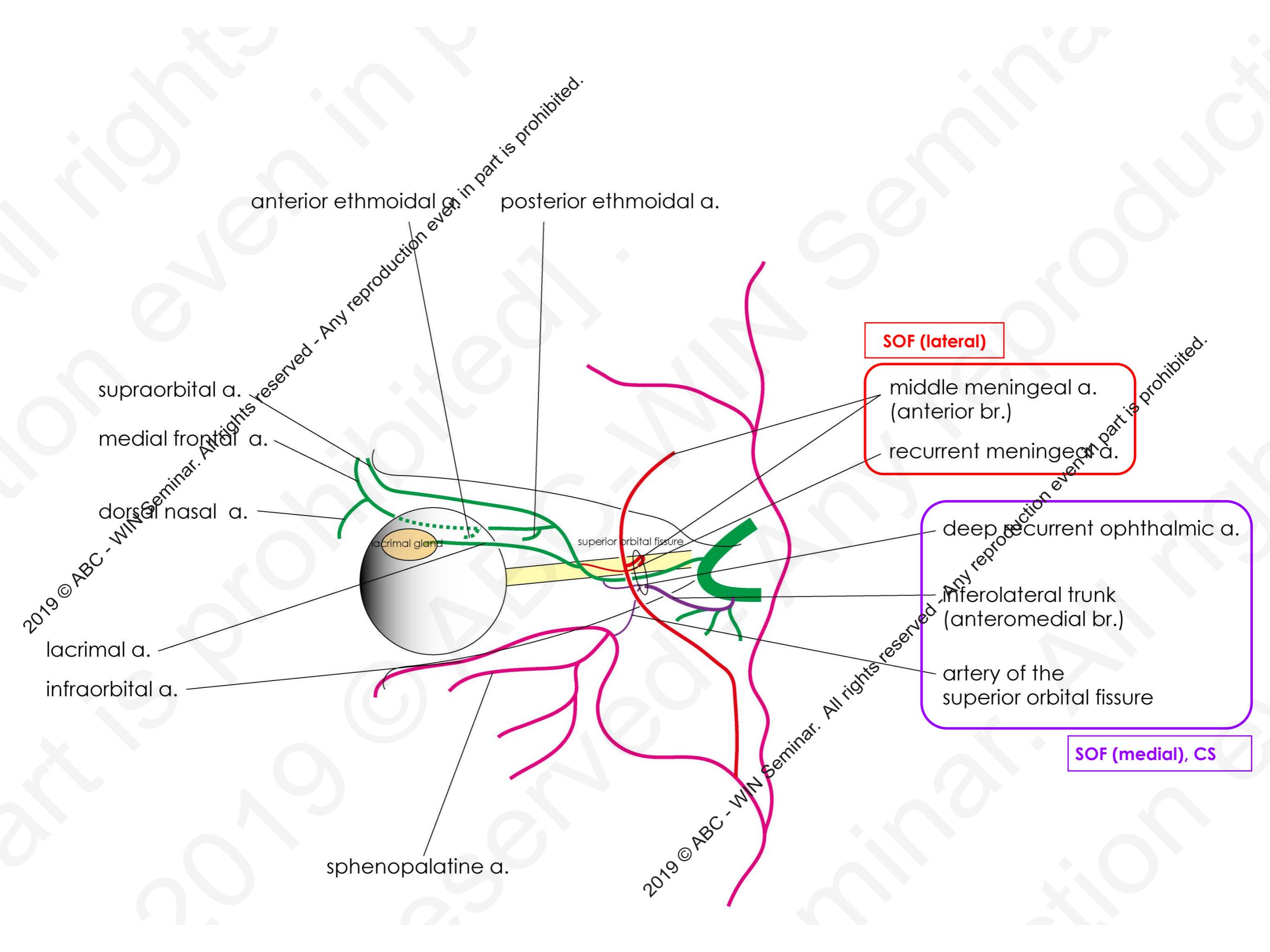
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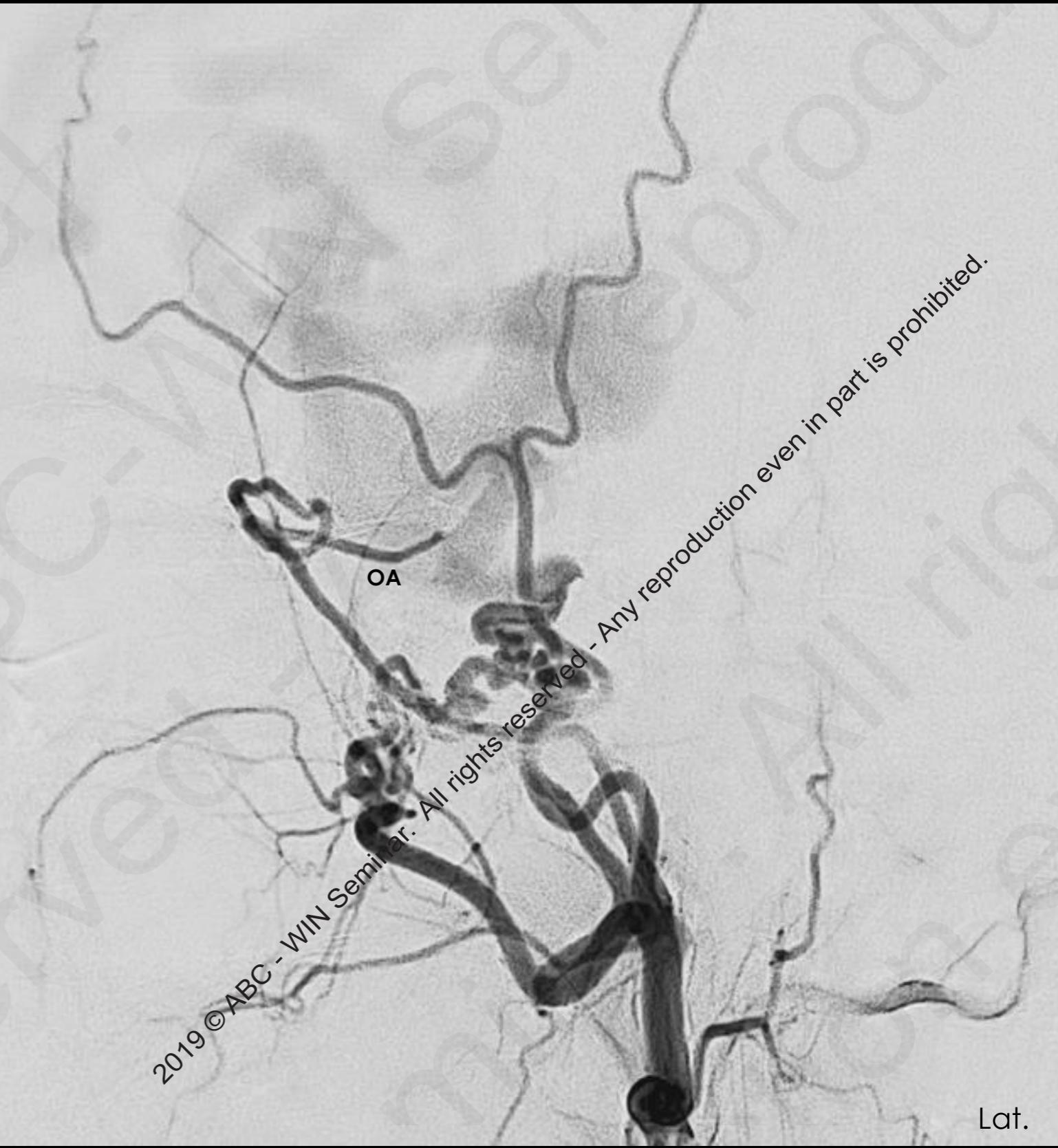
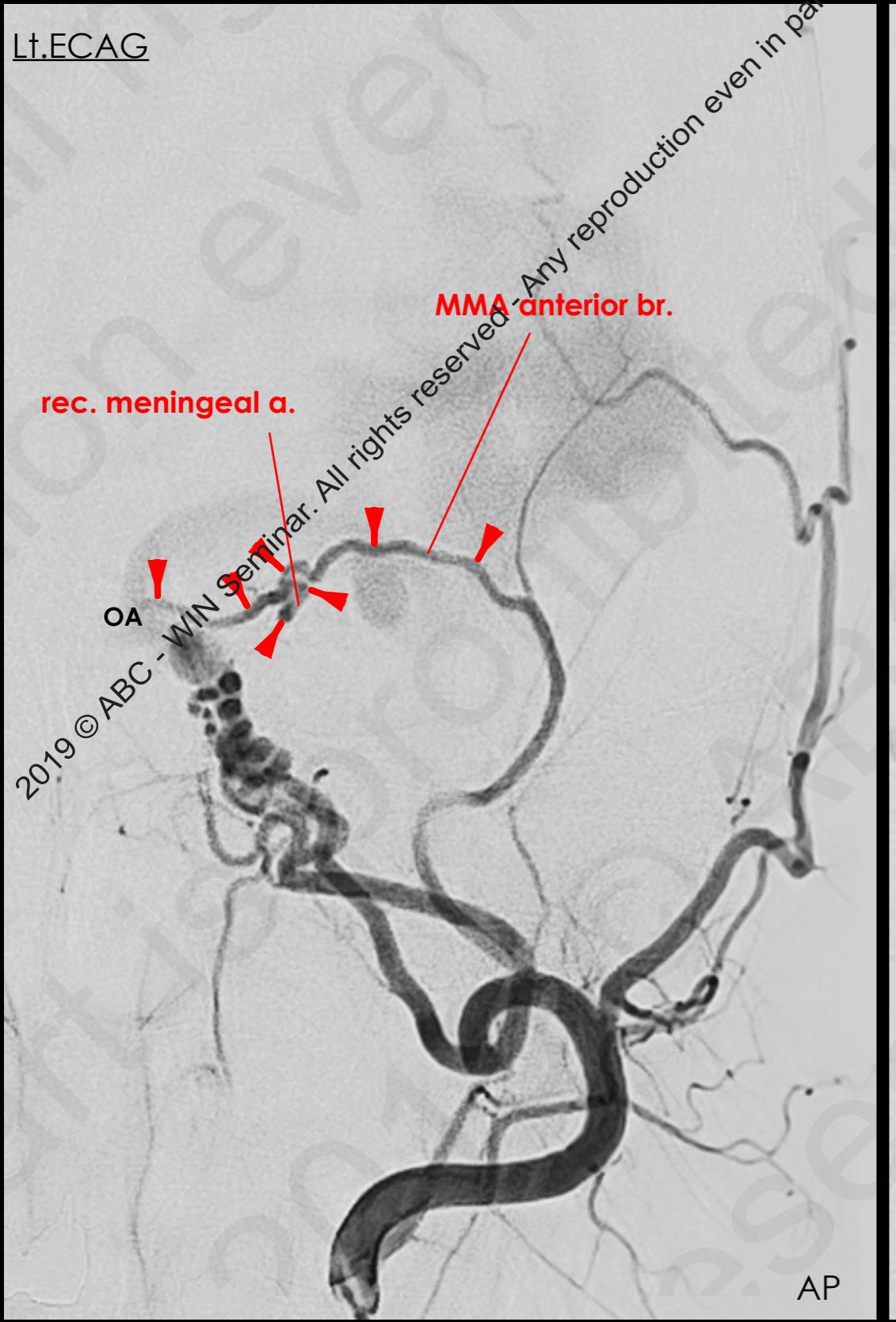






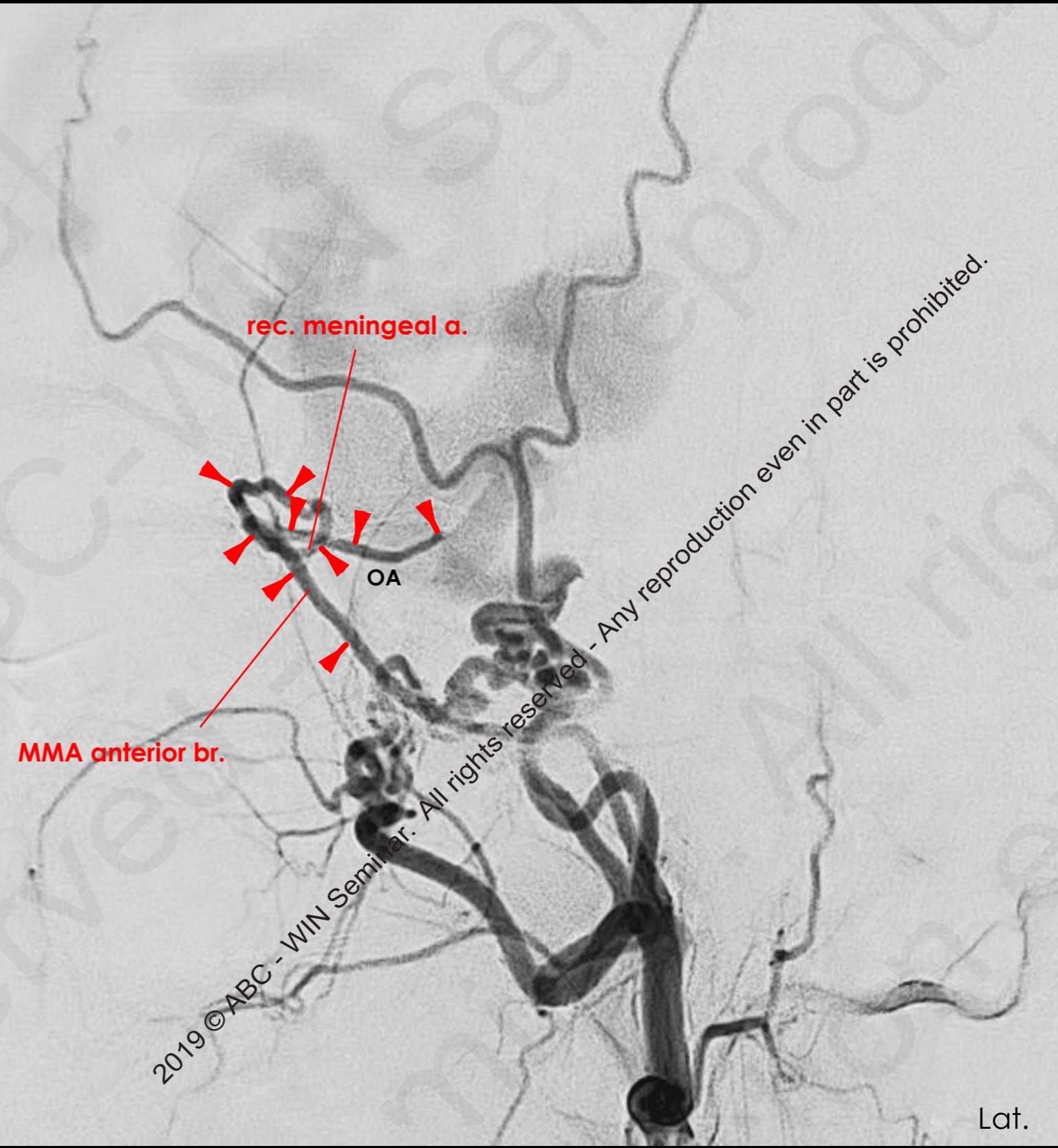
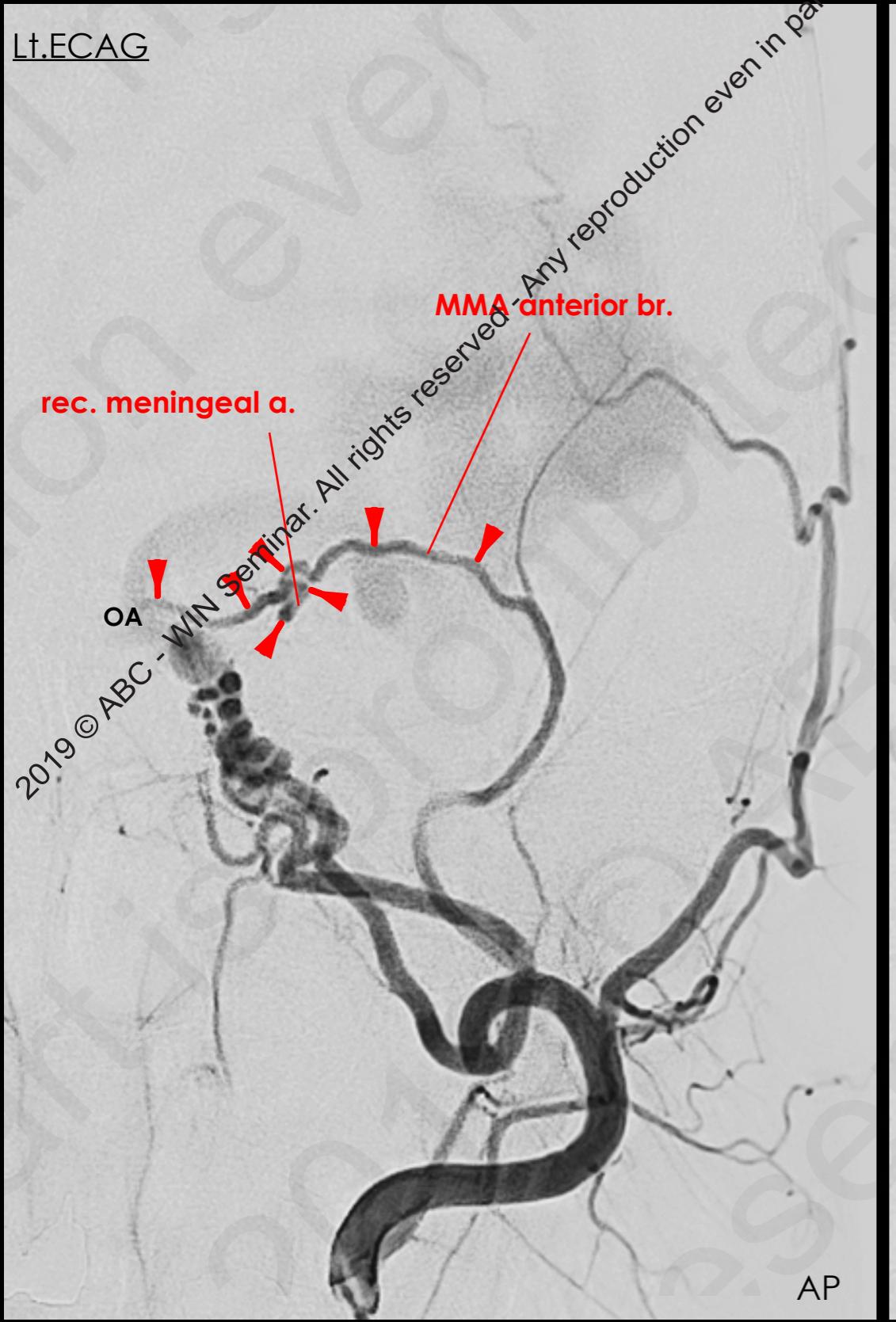
superficial recurrent meningeal a. - MMA anterior br.

Lt. ECAG



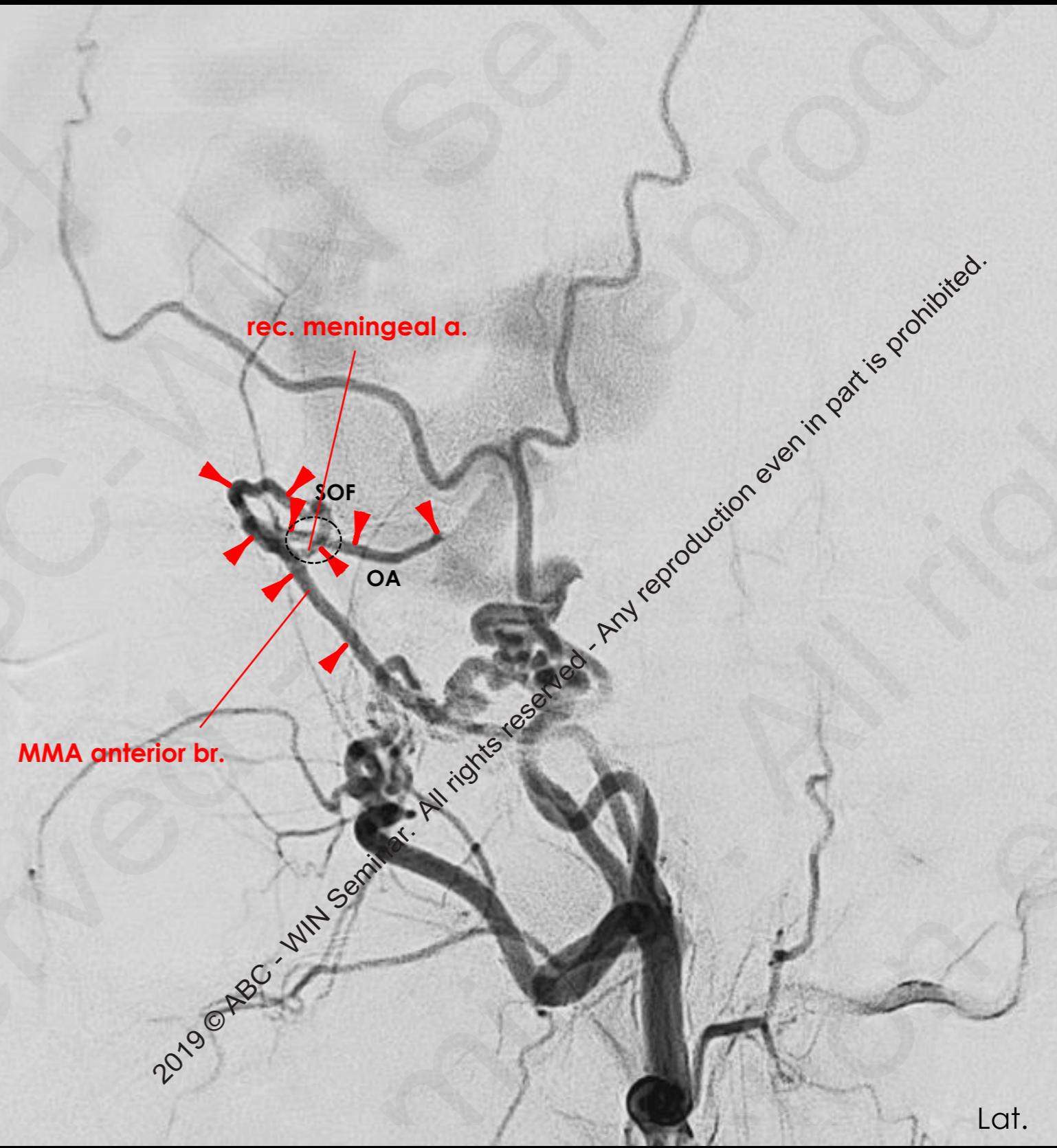
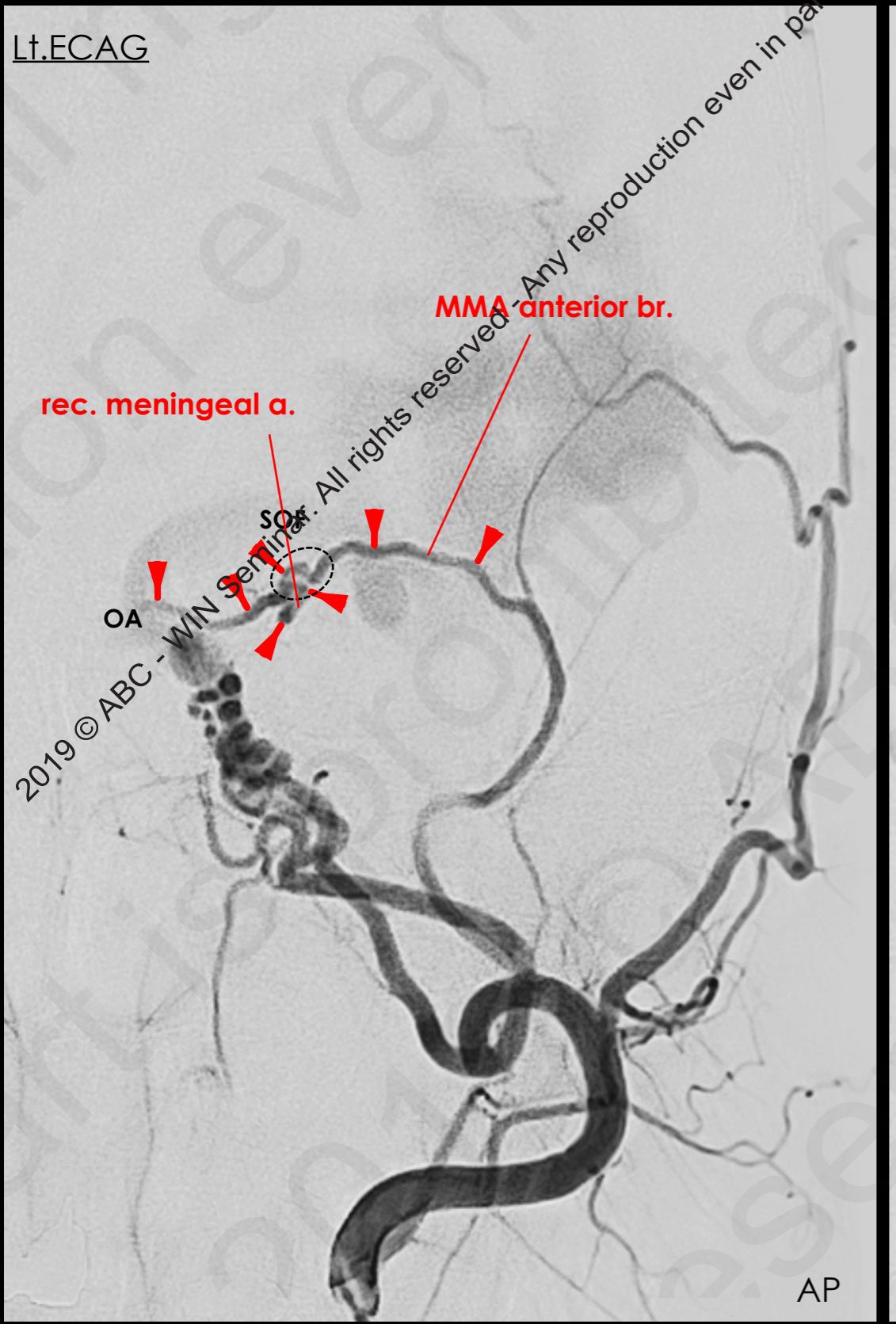
superficial recurrent meningeal a. - MMA anterior br.

Lt. ECAG

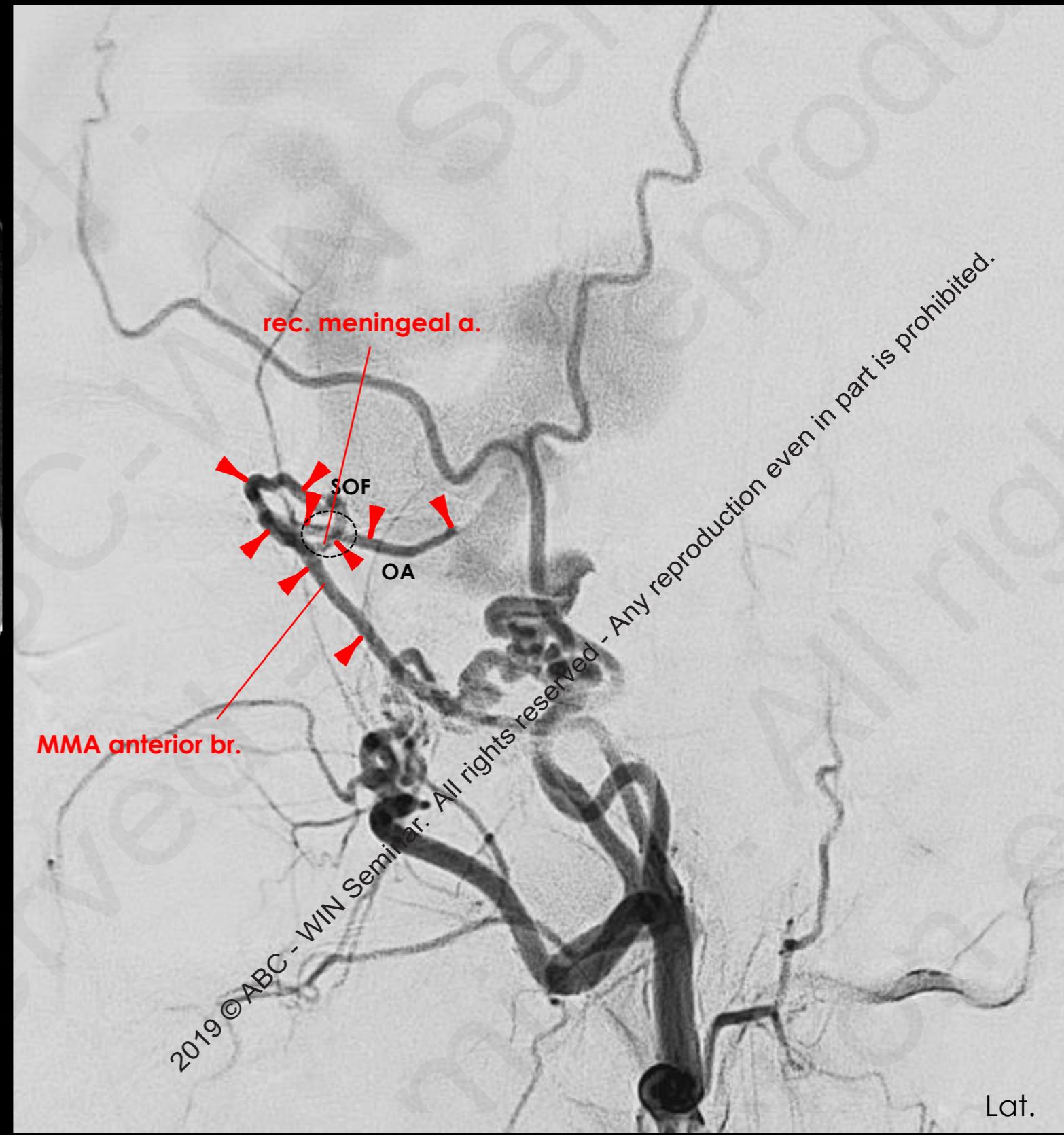
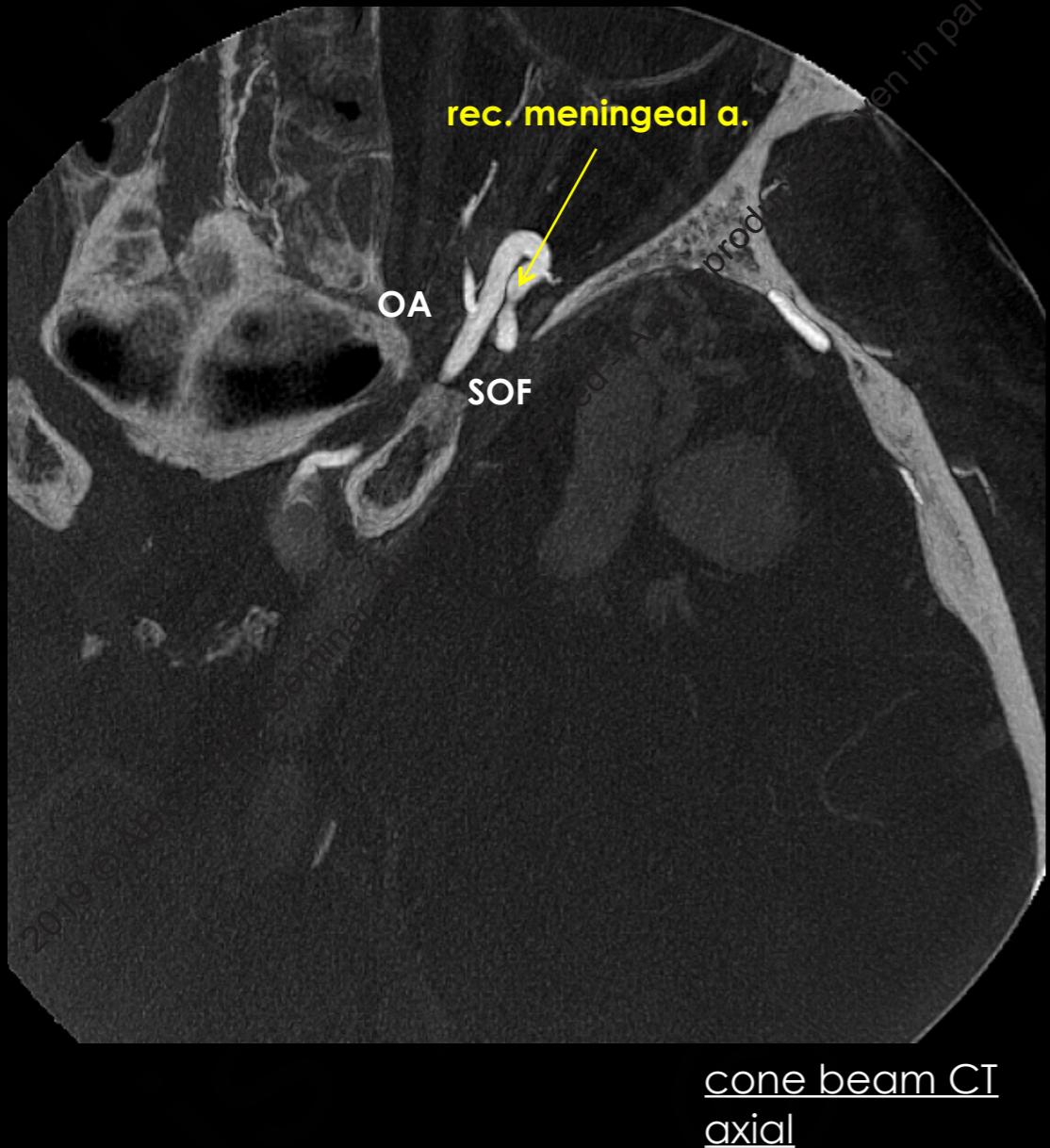


superficial recurrent meningeal a. - MMA anterior br.

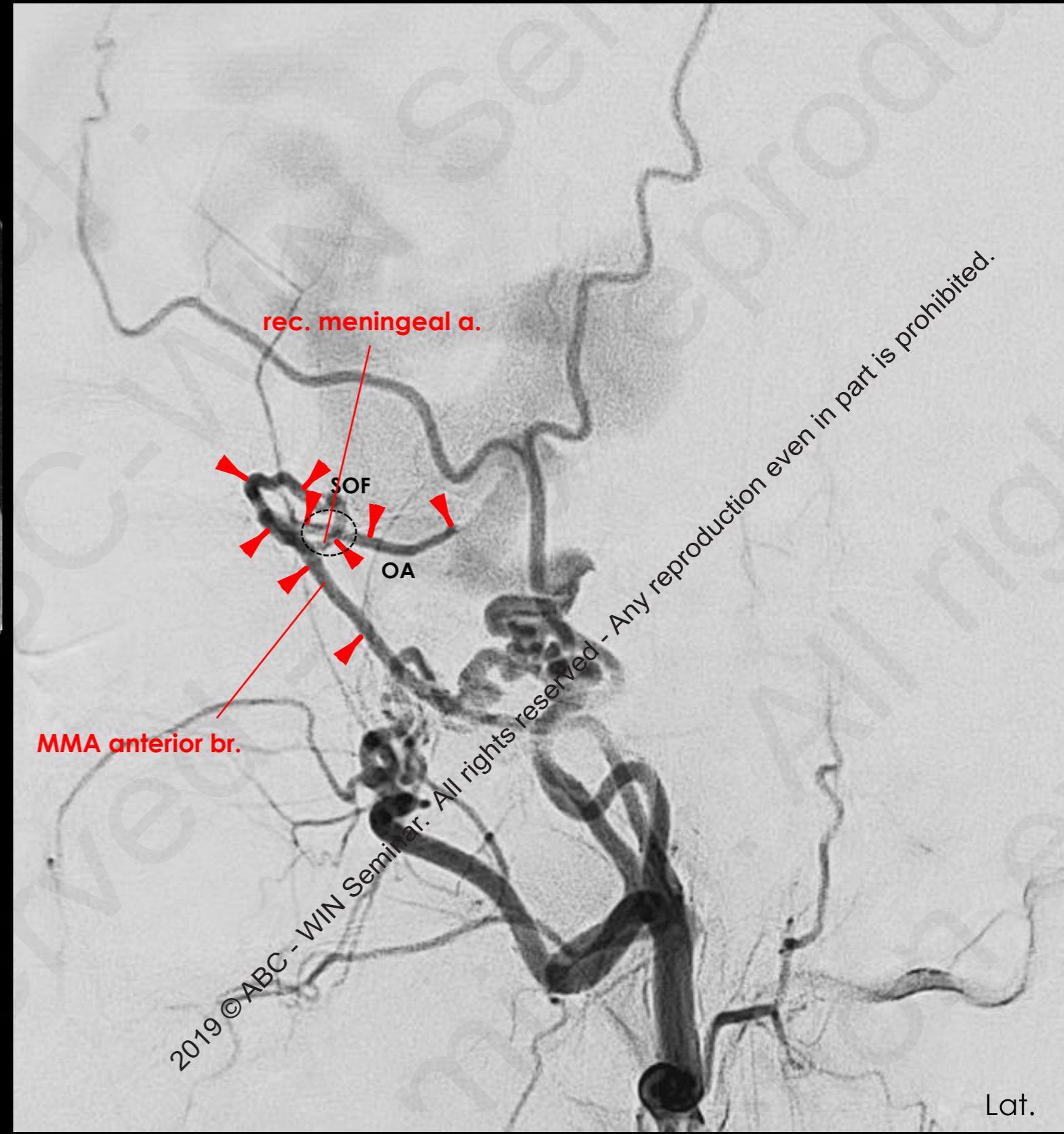
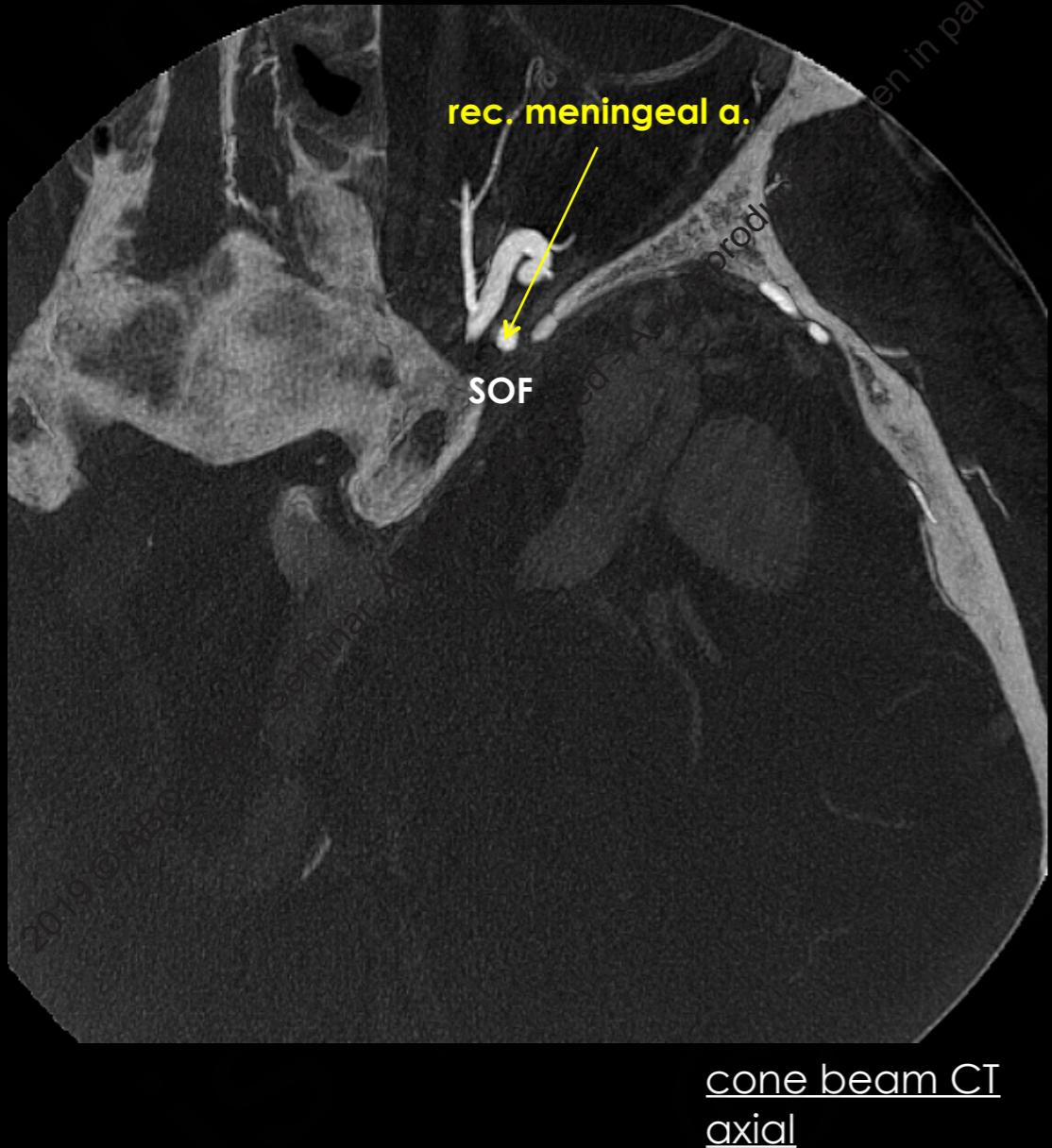
Lt. ECAG



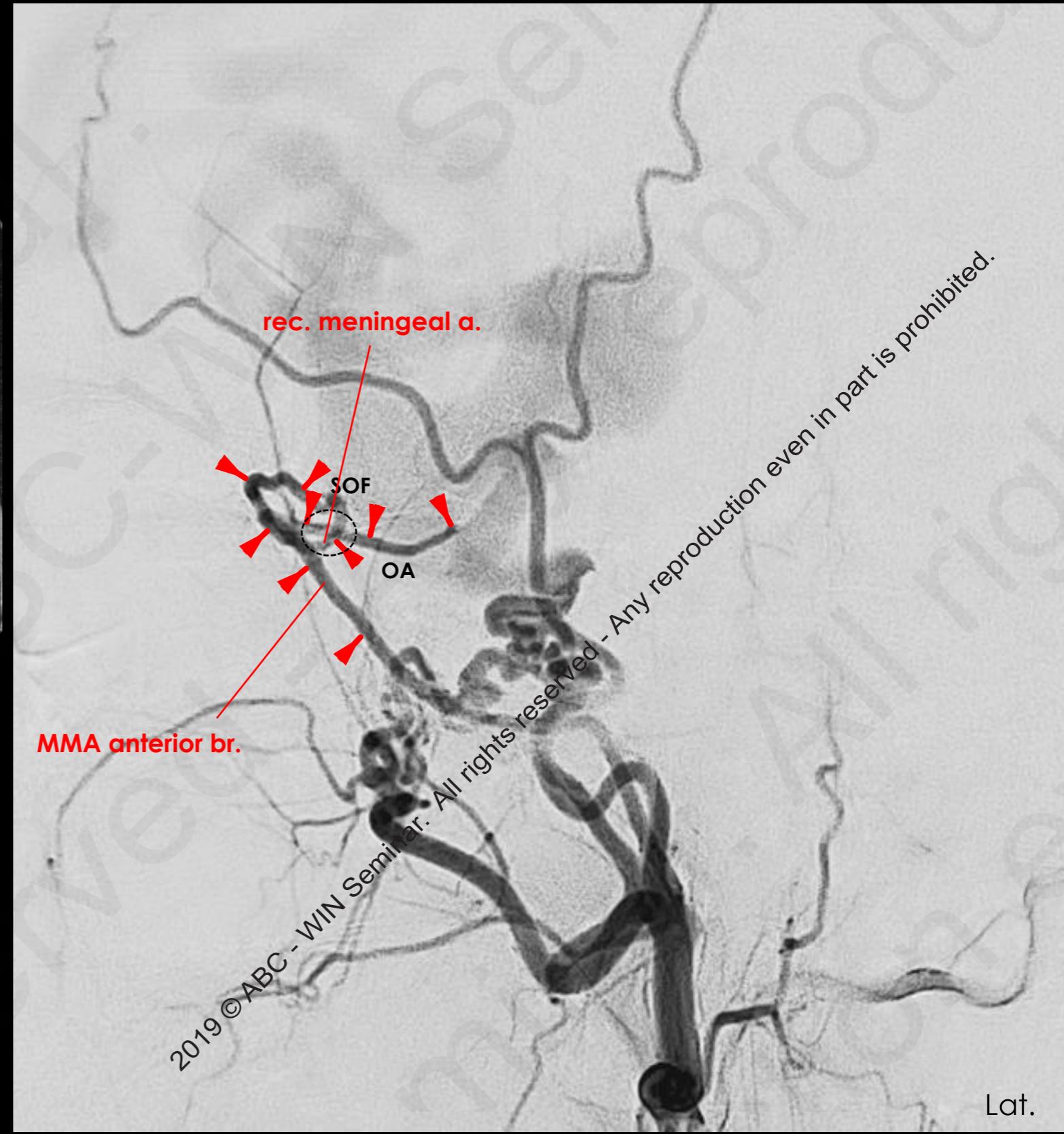
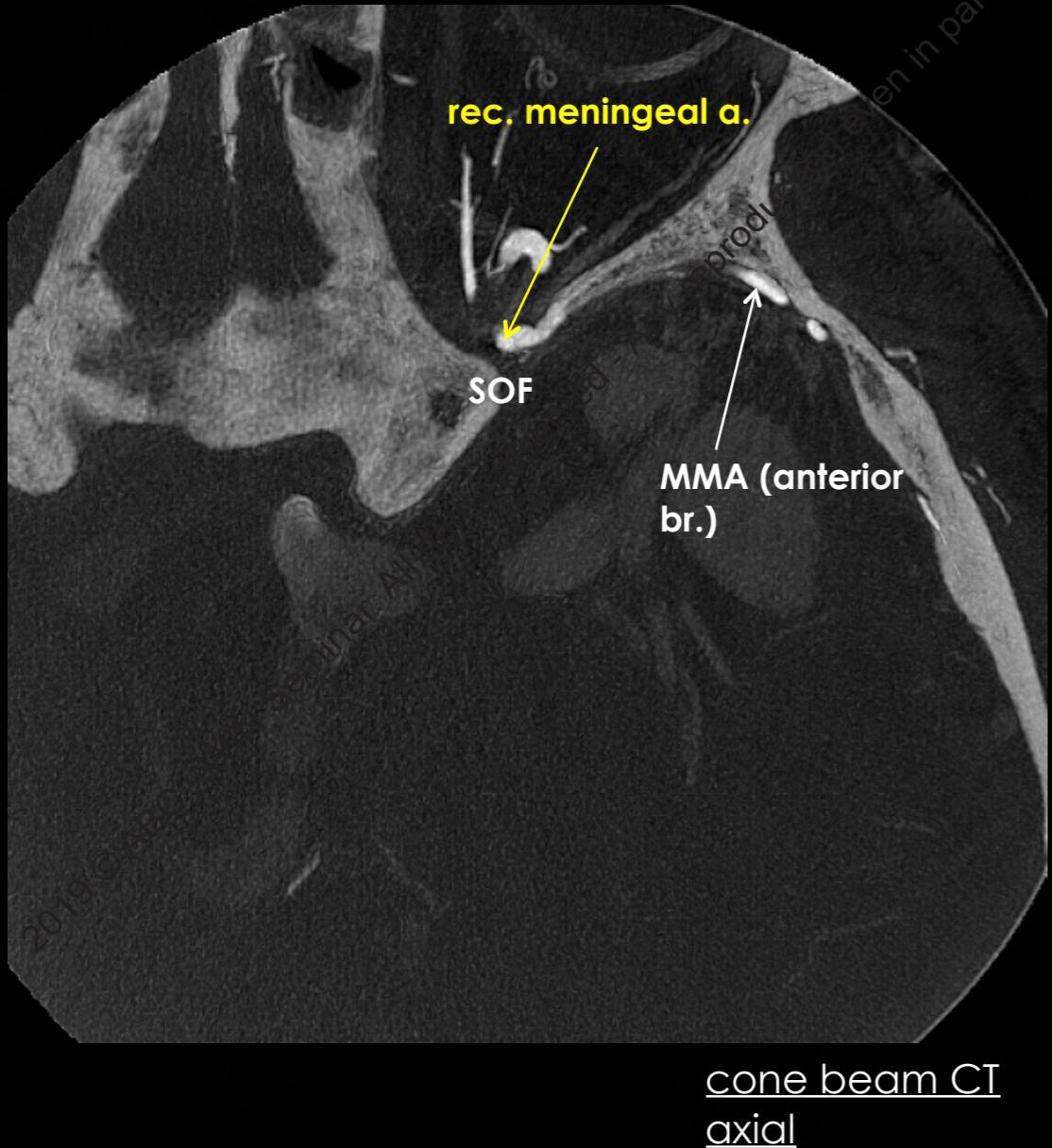
superficial recurrent meningeal a. - MMA anterior br.



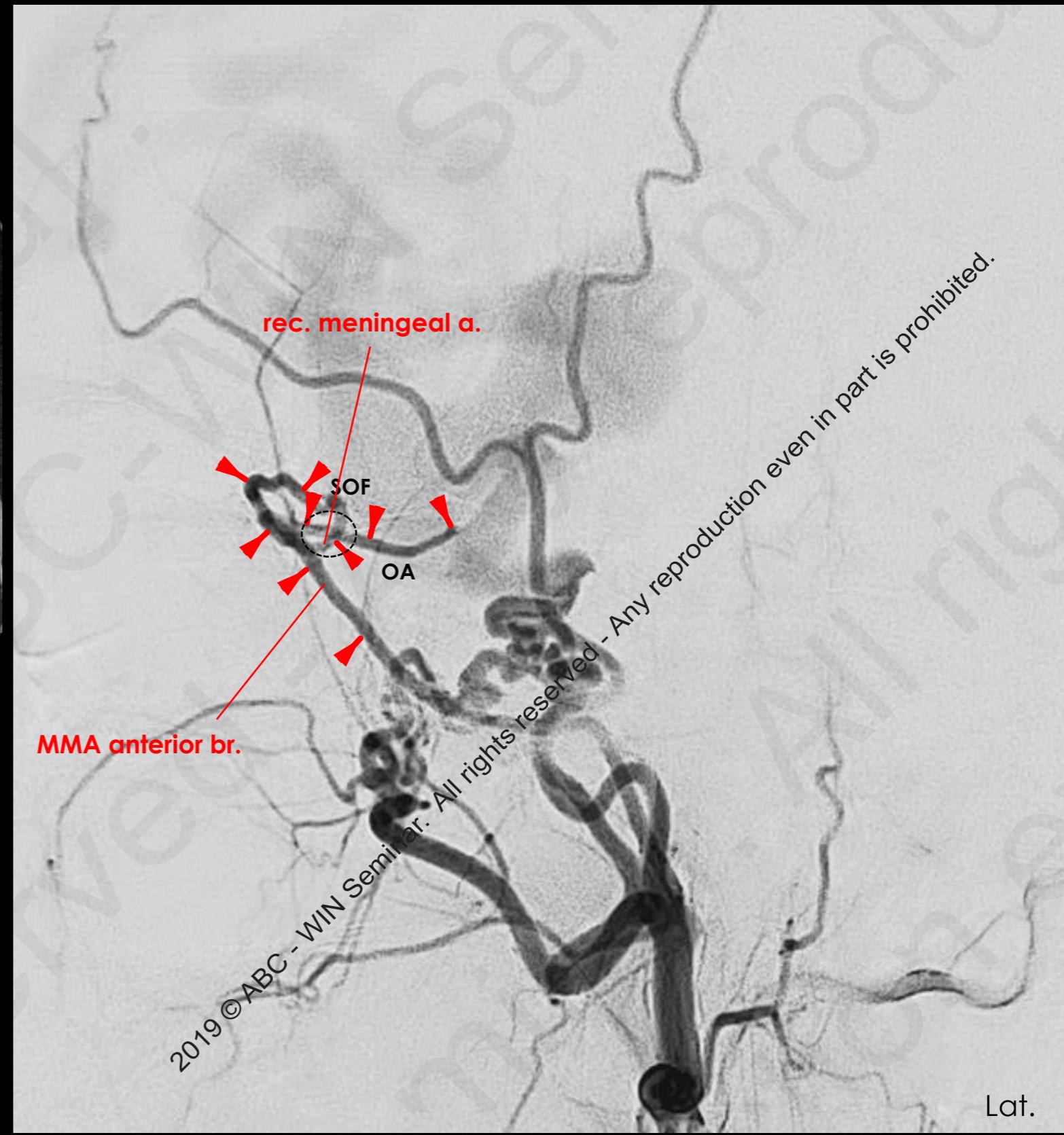
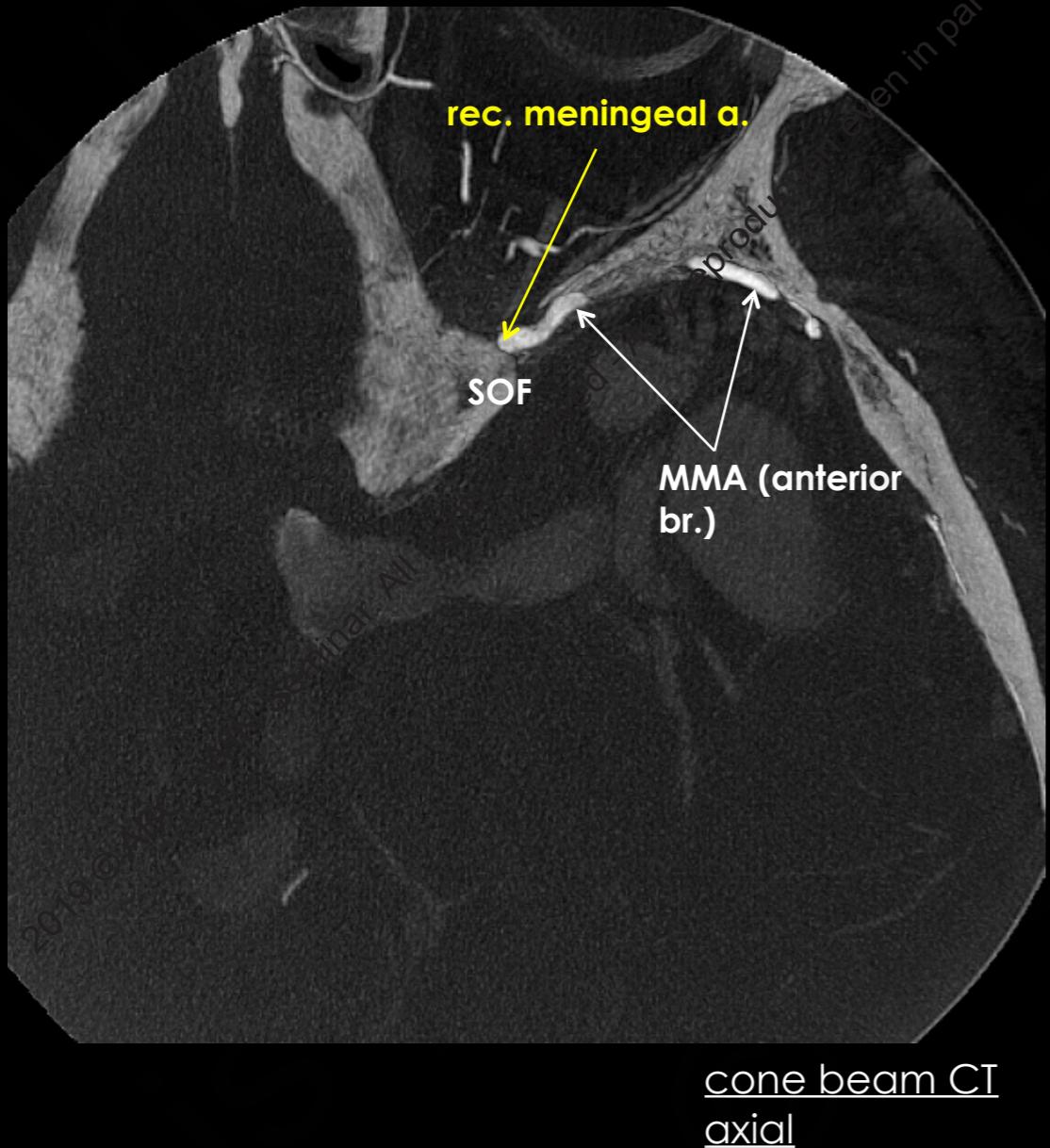
superficial recurrent meningeal a. - MMA anterior br.



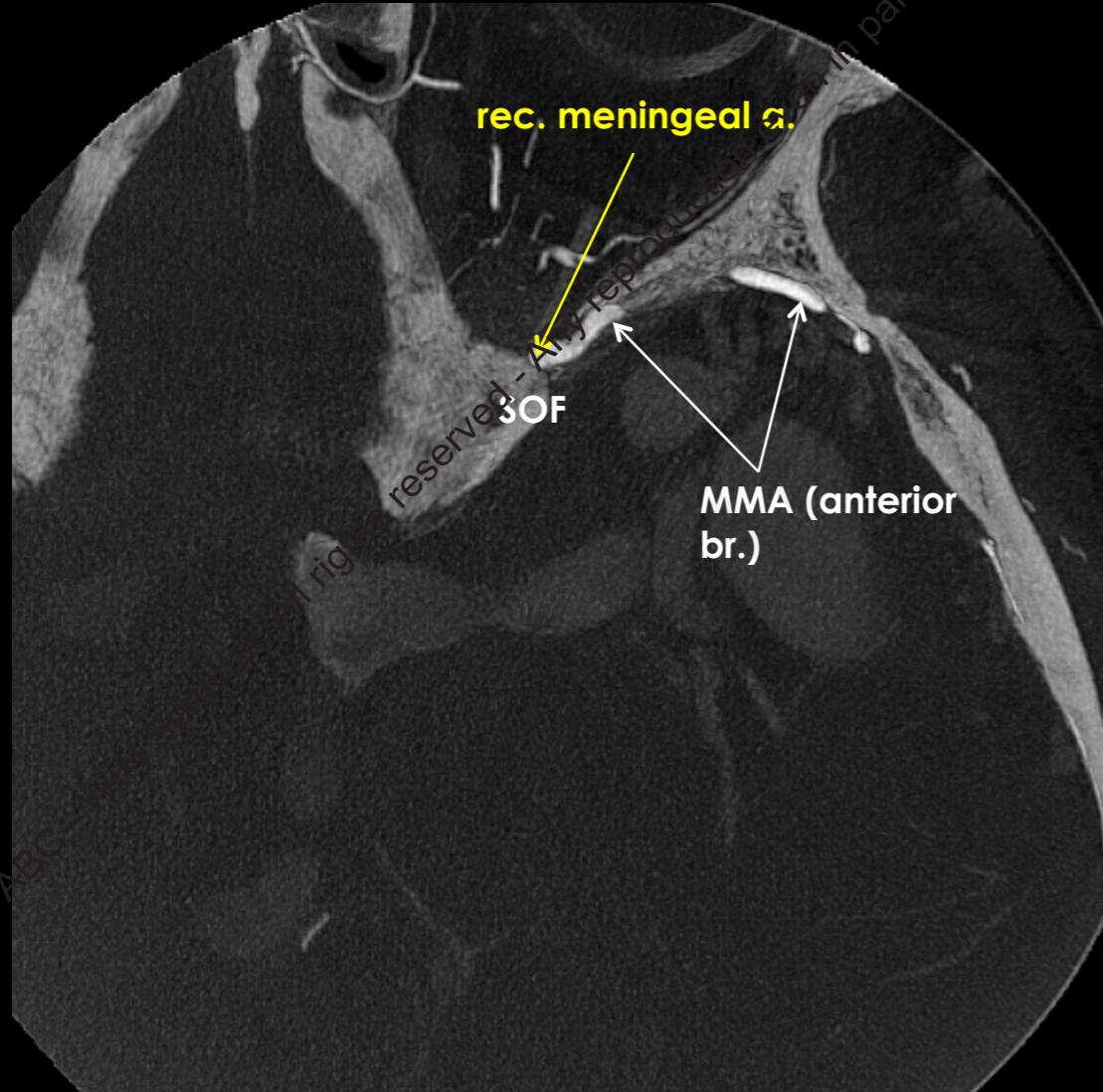
superficial recurrent meningeal a. - MMA anterior br.



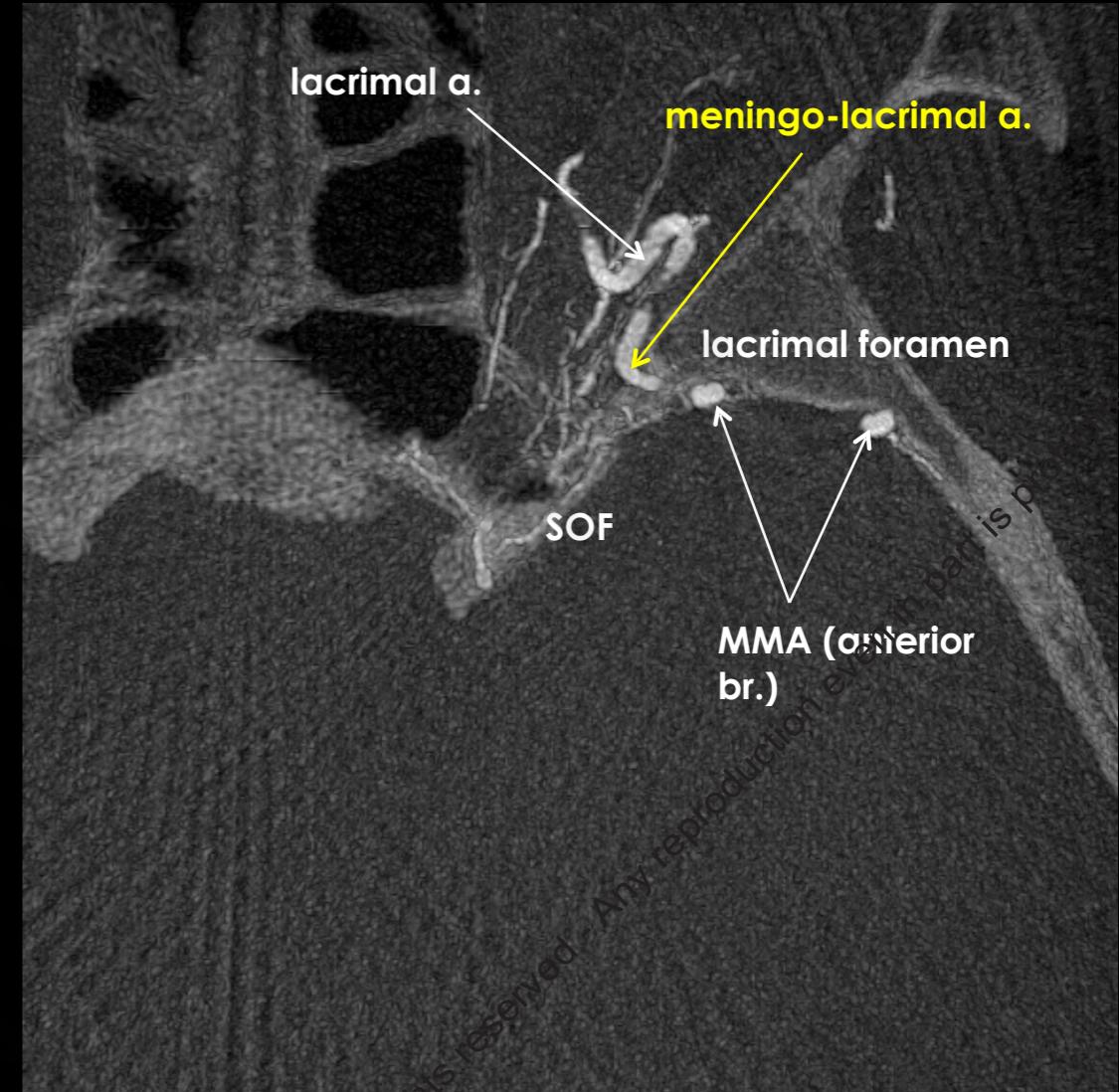
superficial recurrent meningeal a. - MMA anterior br.



superficial recurrent meningeal a. - MMA anterior br.

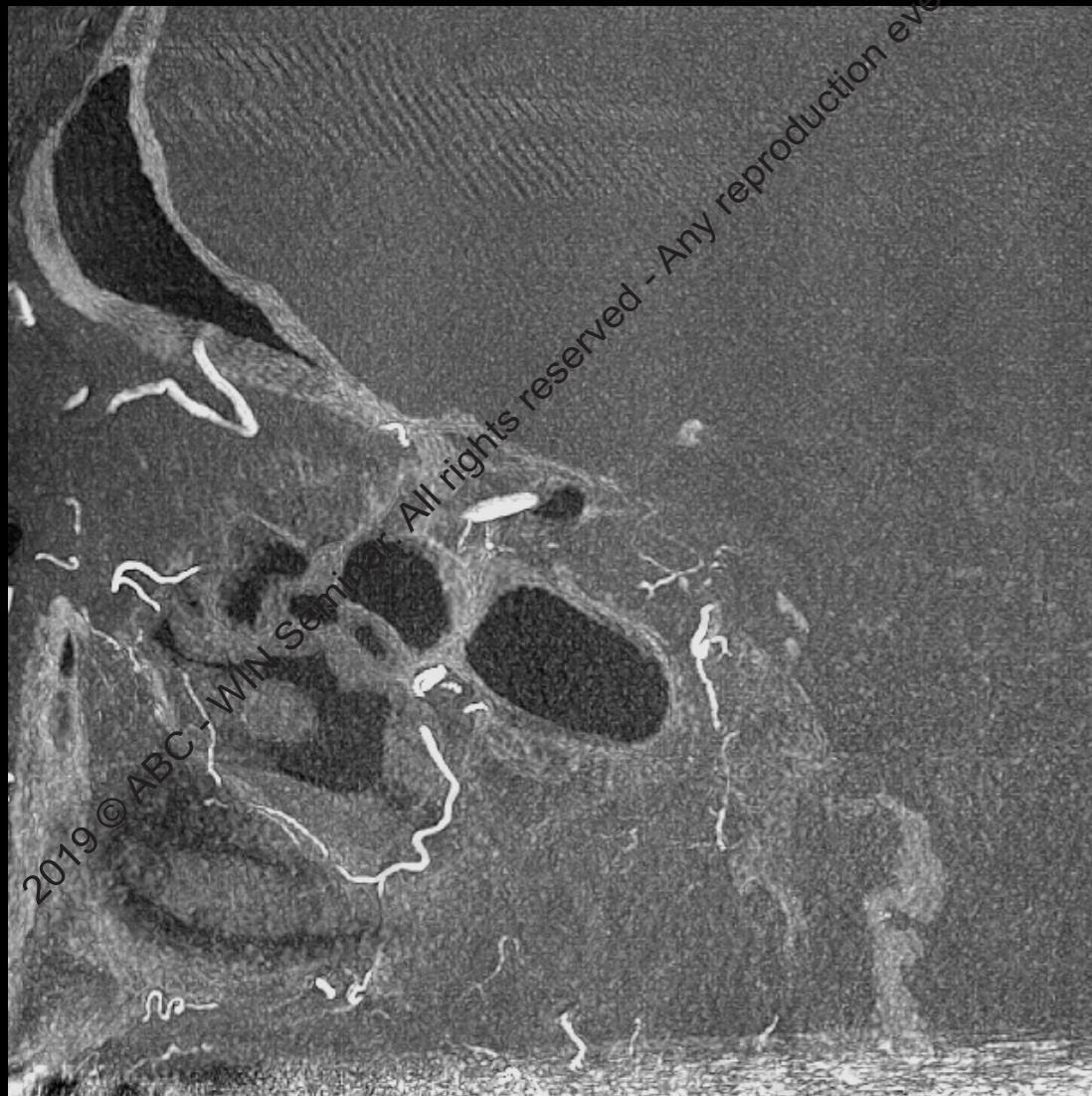


cone beam CT
axial

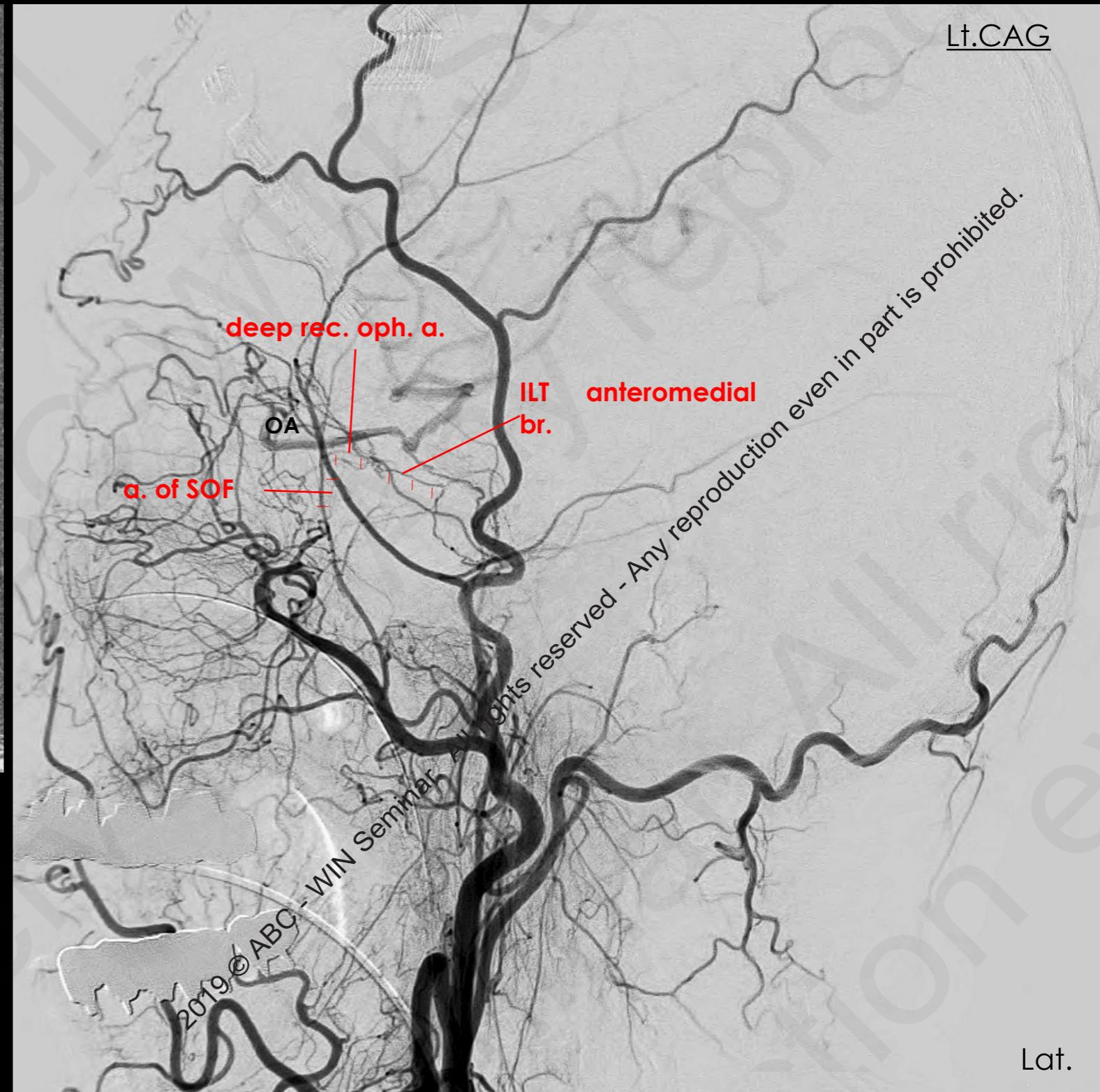


3DRA MPR
axial image

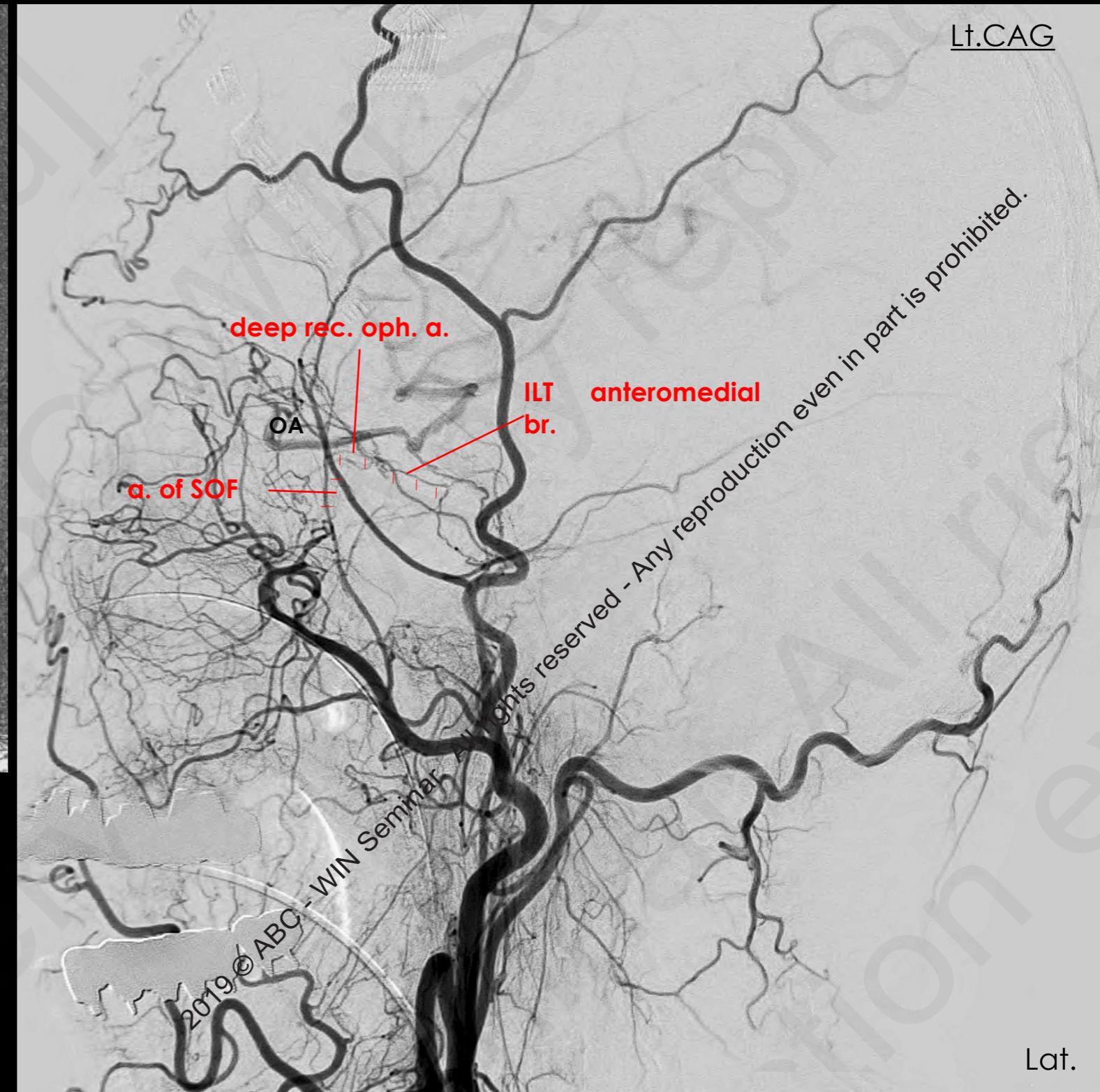
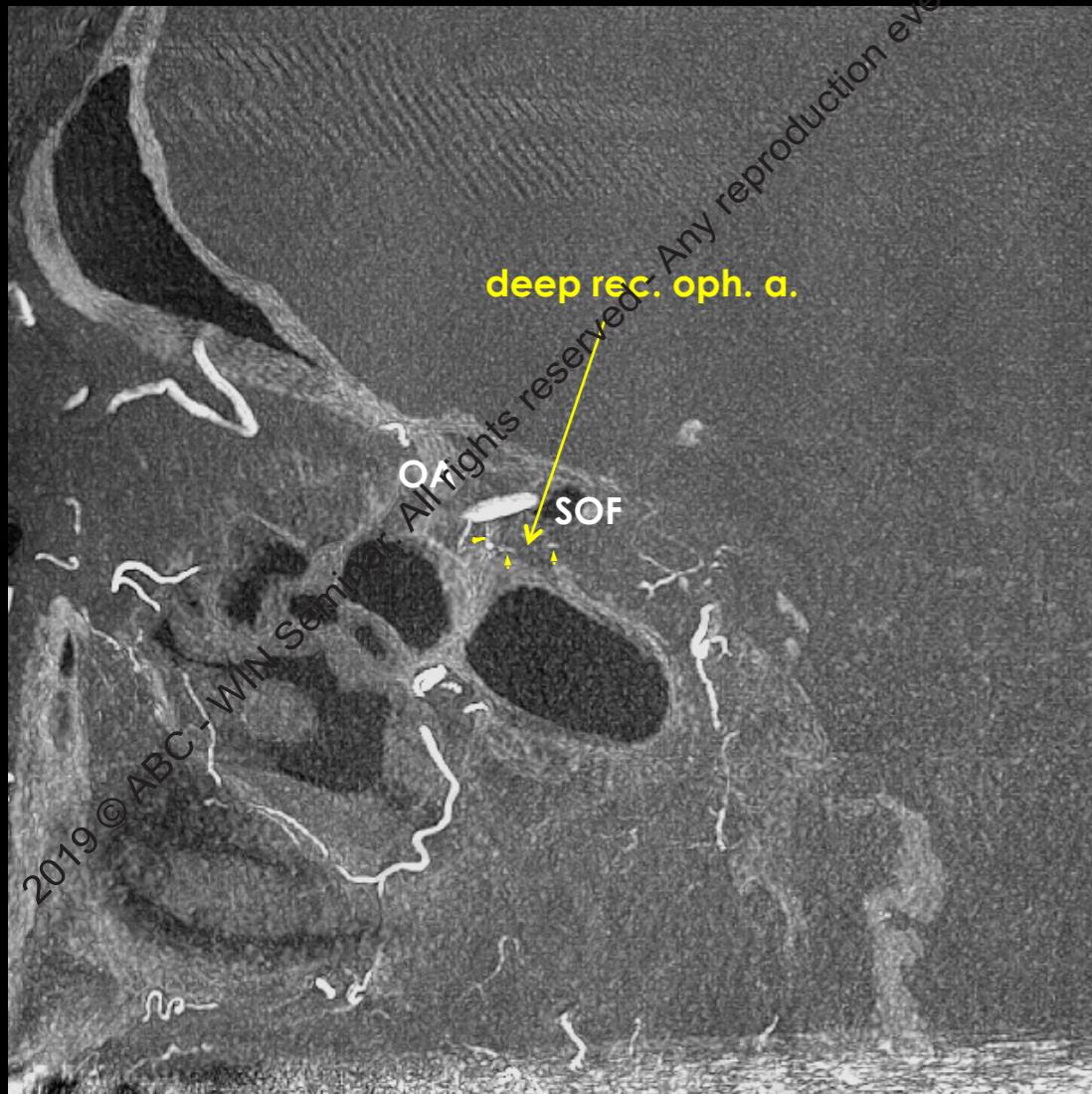
deep recurrent ophthalmic a. - artery of SOF - ILT anteromedial br.



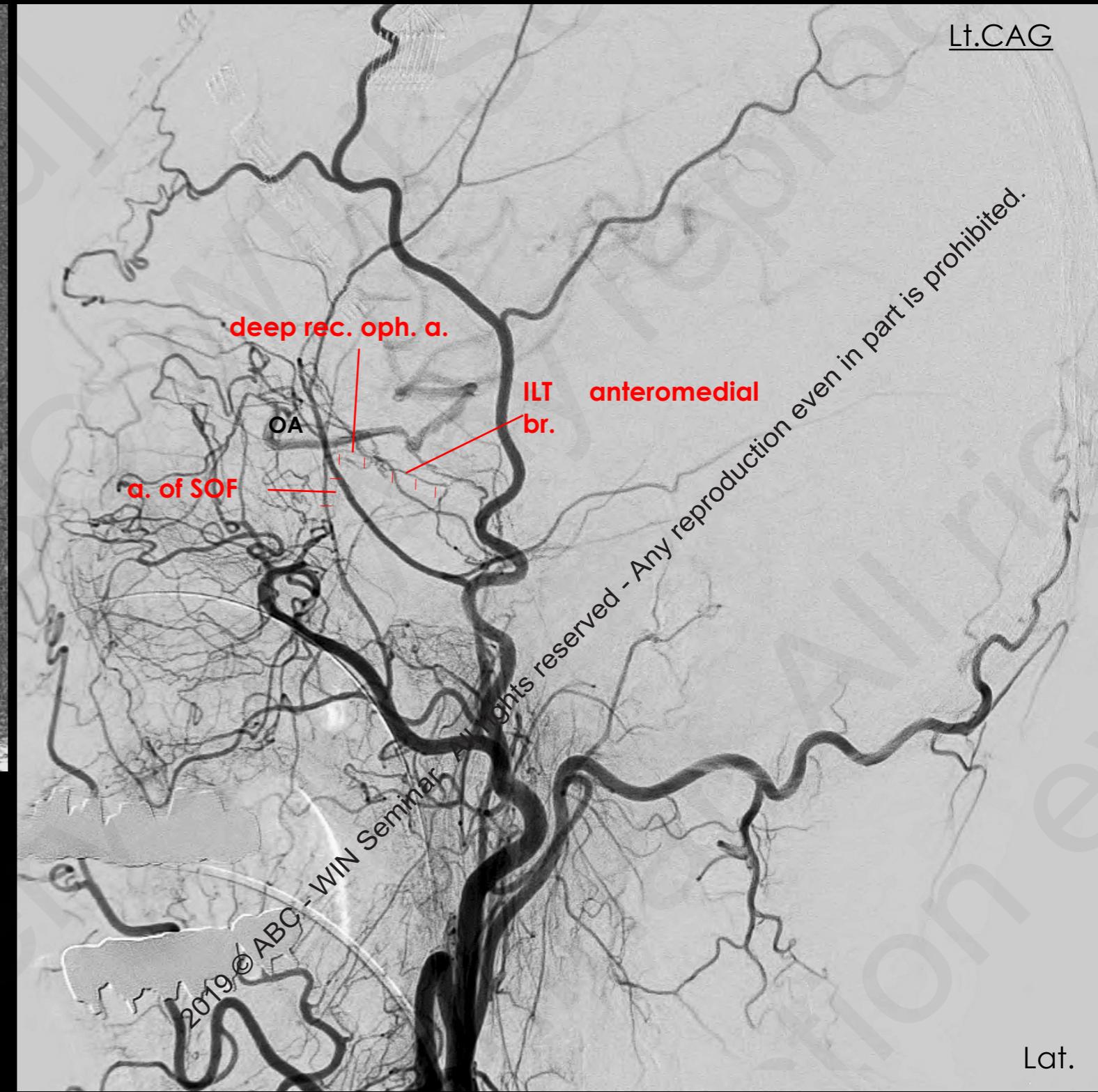
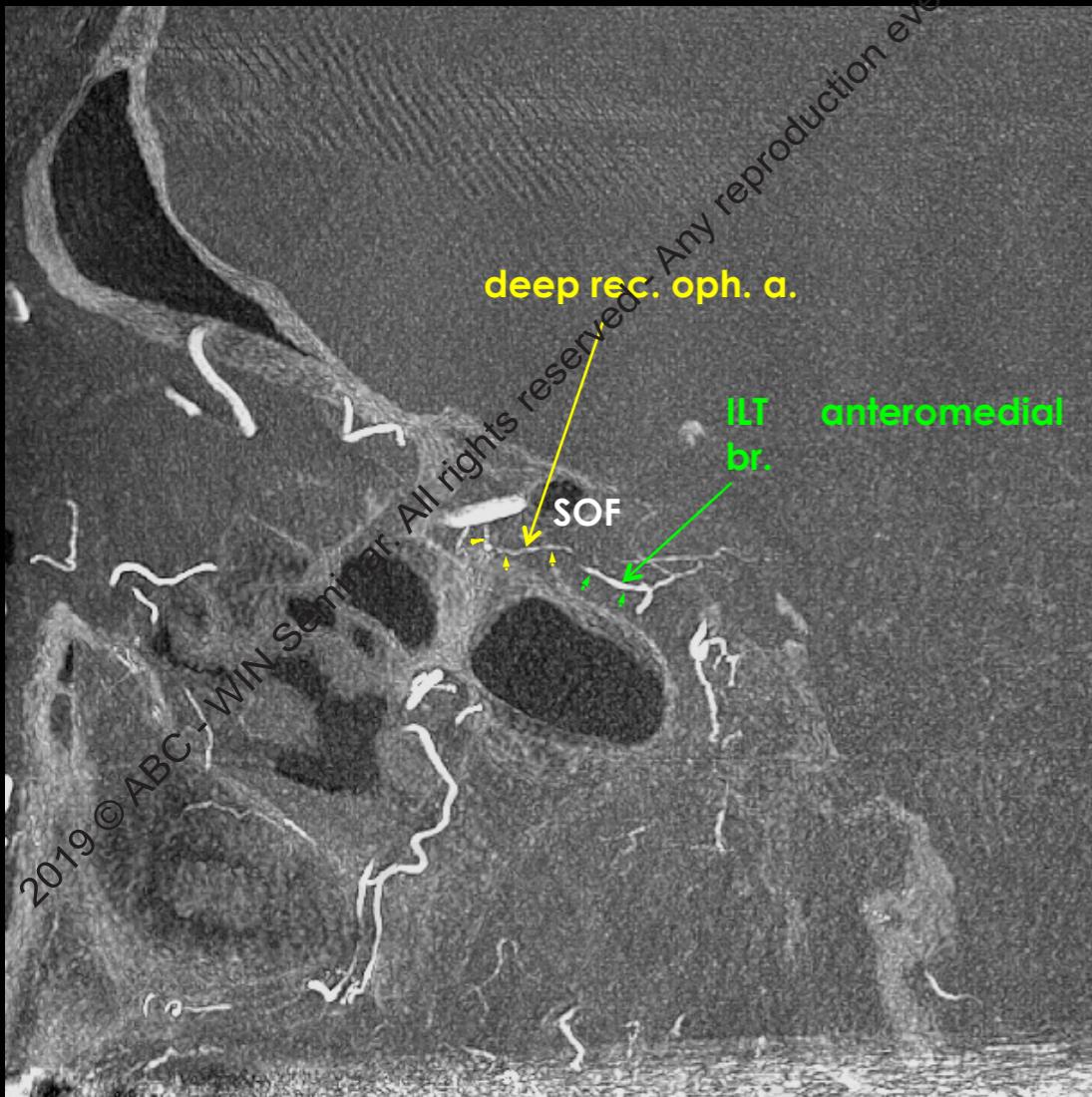
3DRA slab MIP
sagittal



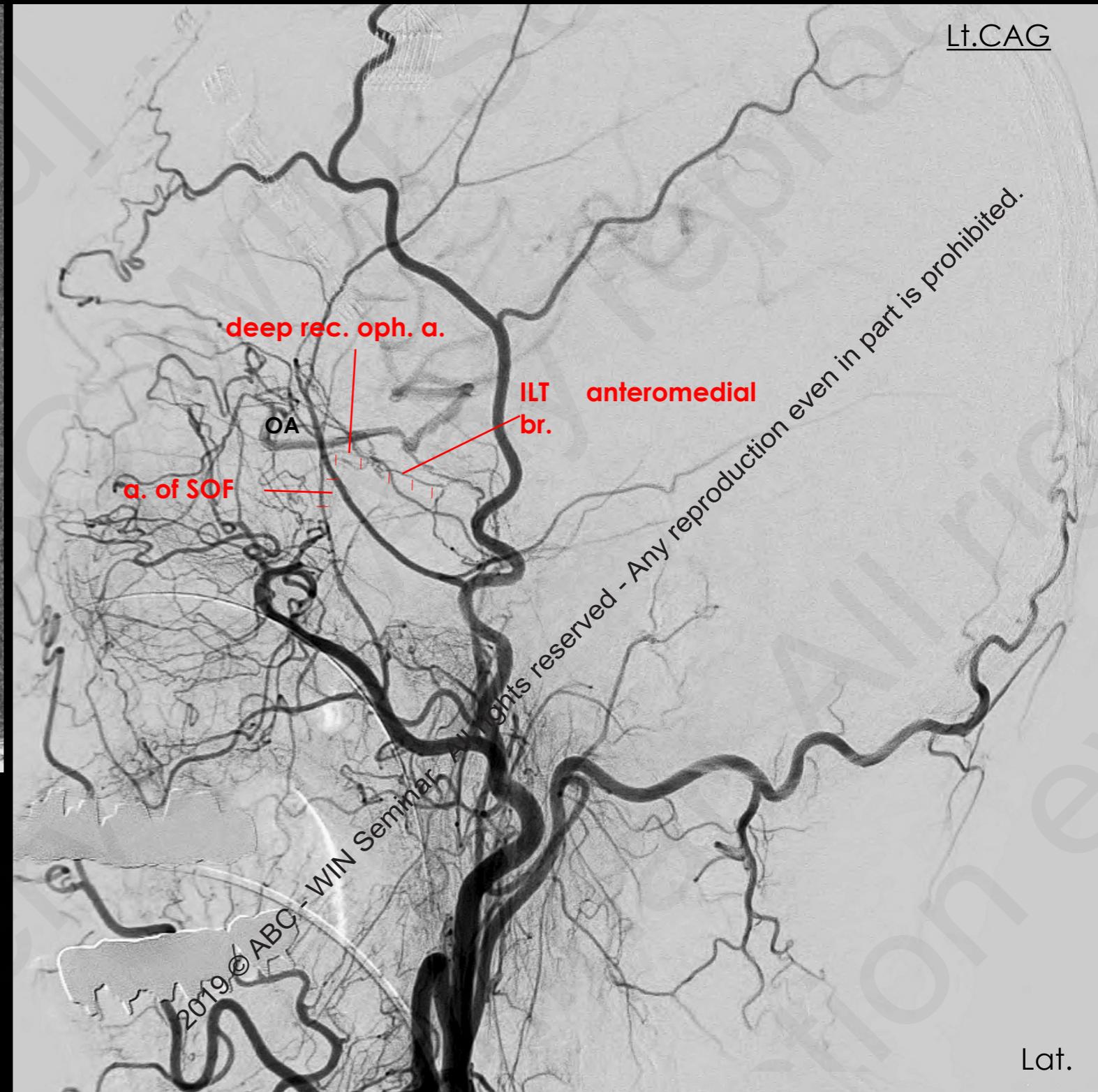
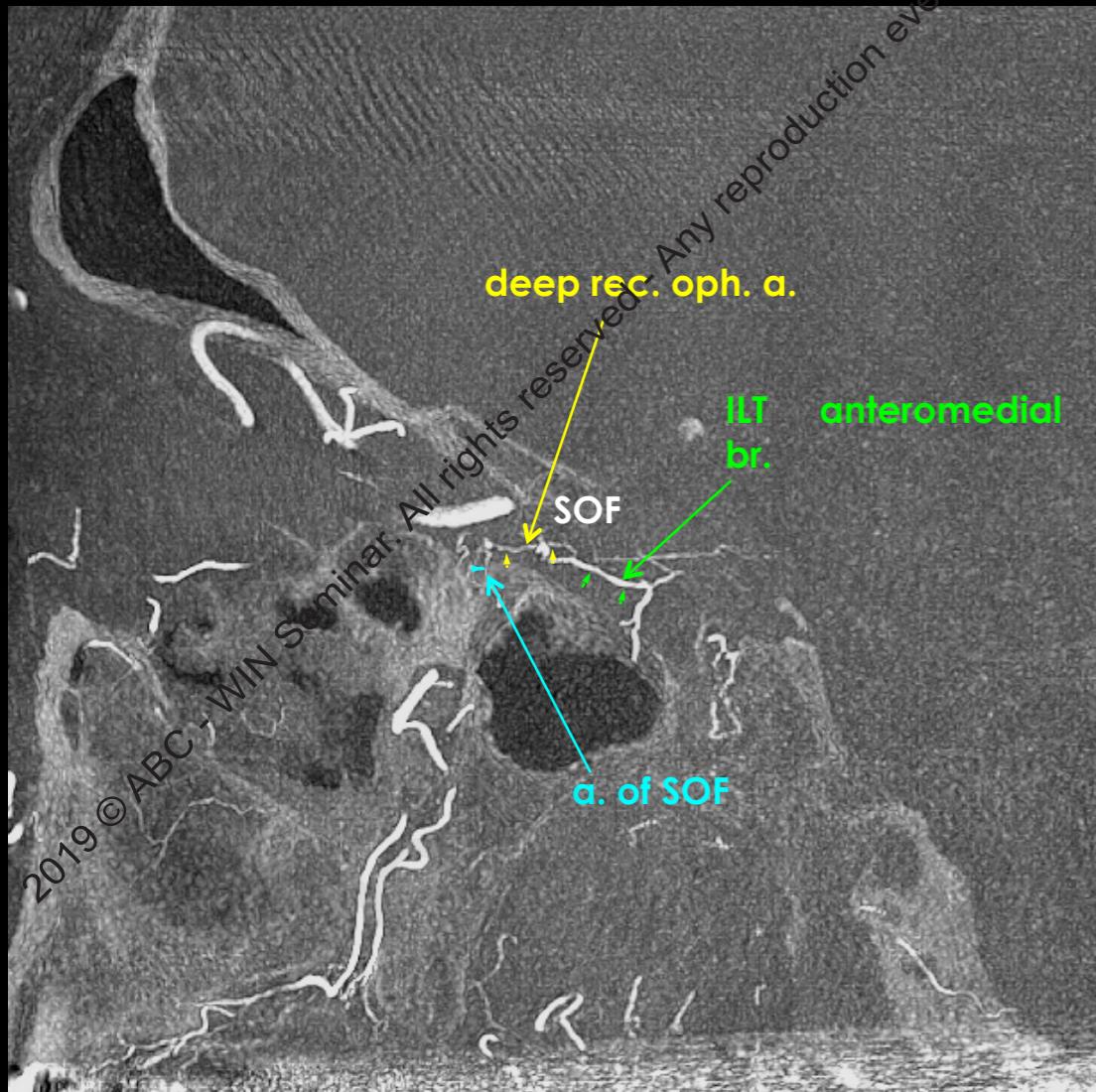
deep recurrent ophthalmic a. - artery of SOF - ILT anteromedial br.



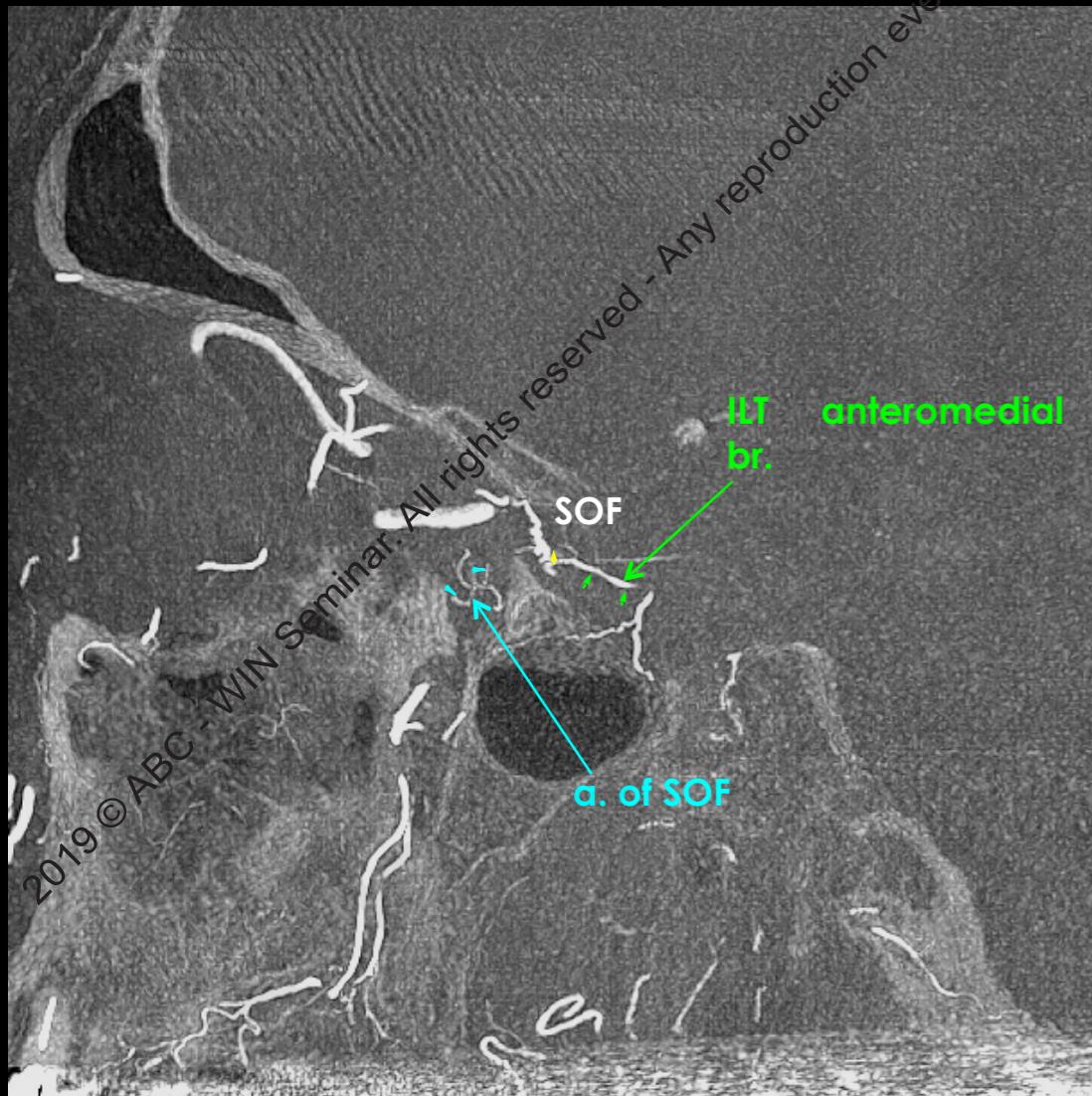
deep recurrent ophthalmic a. - artery of SOF - ILT anteromedial br.



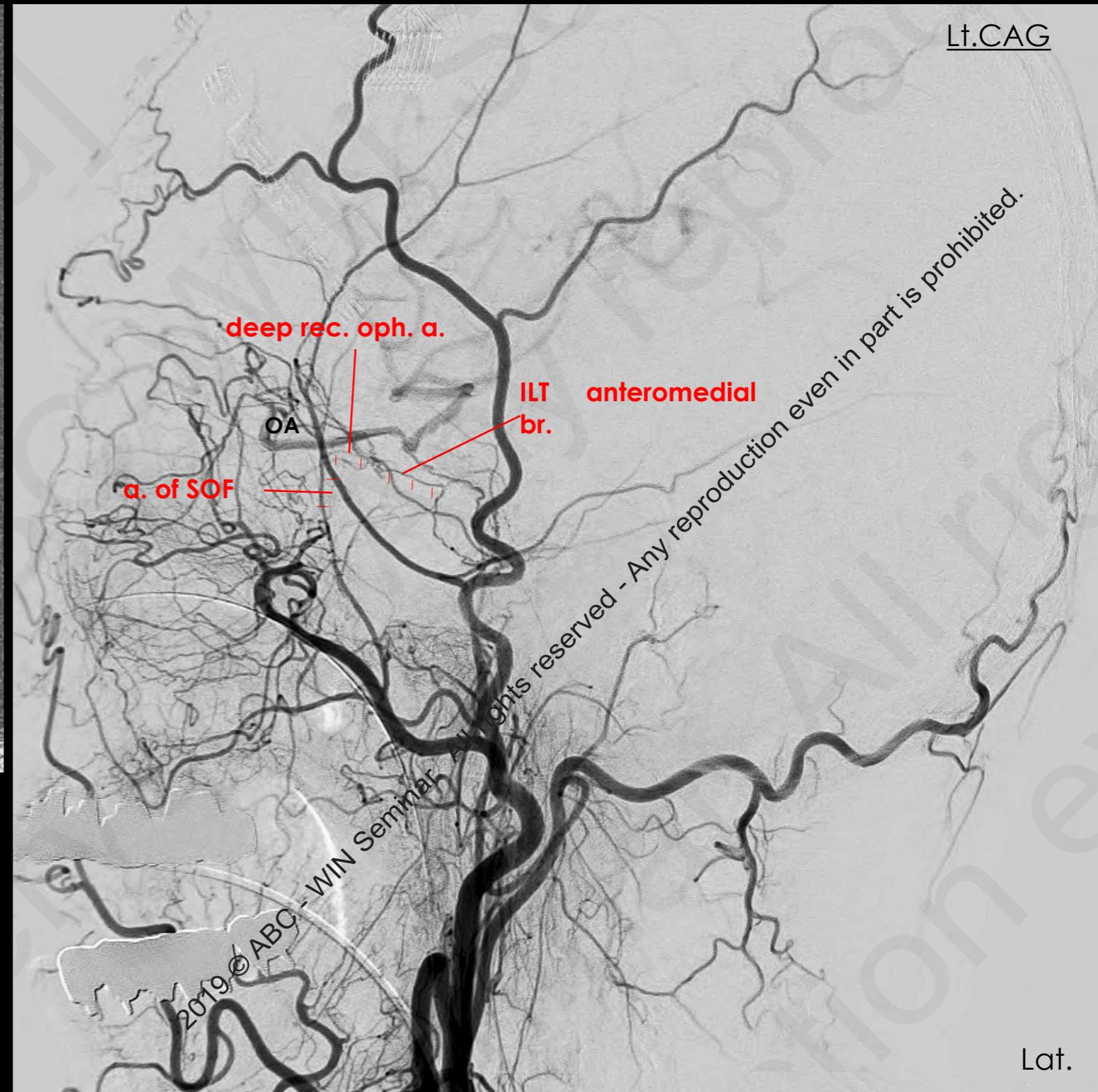
deep recurrent ophthalmic a. - artery of SOF - ILT anteromedial br.



deep recurrent ophthalmic a. - artery of SOF - ILT anteromedial br.

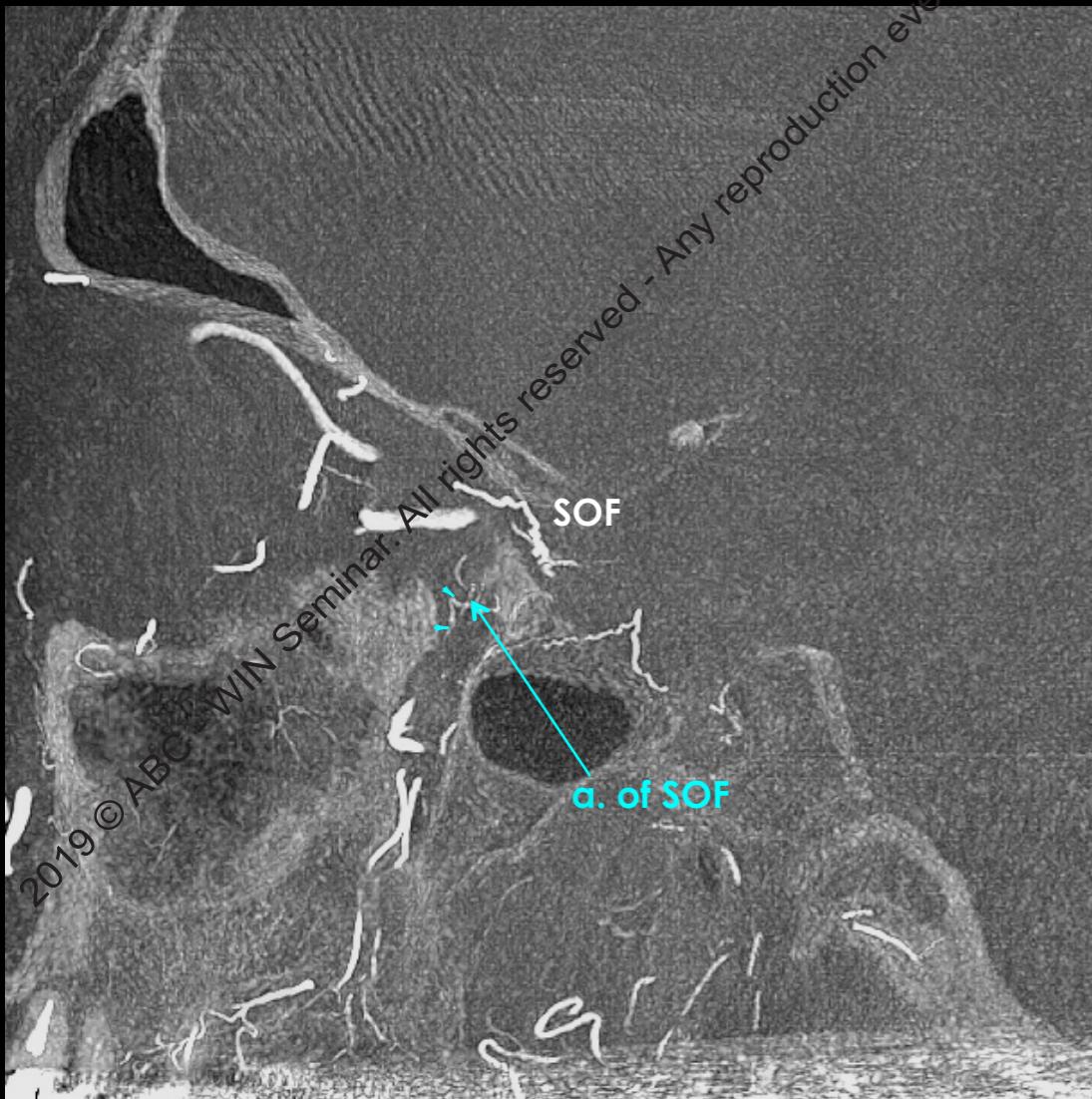


3DRA slab MIP
sagittal

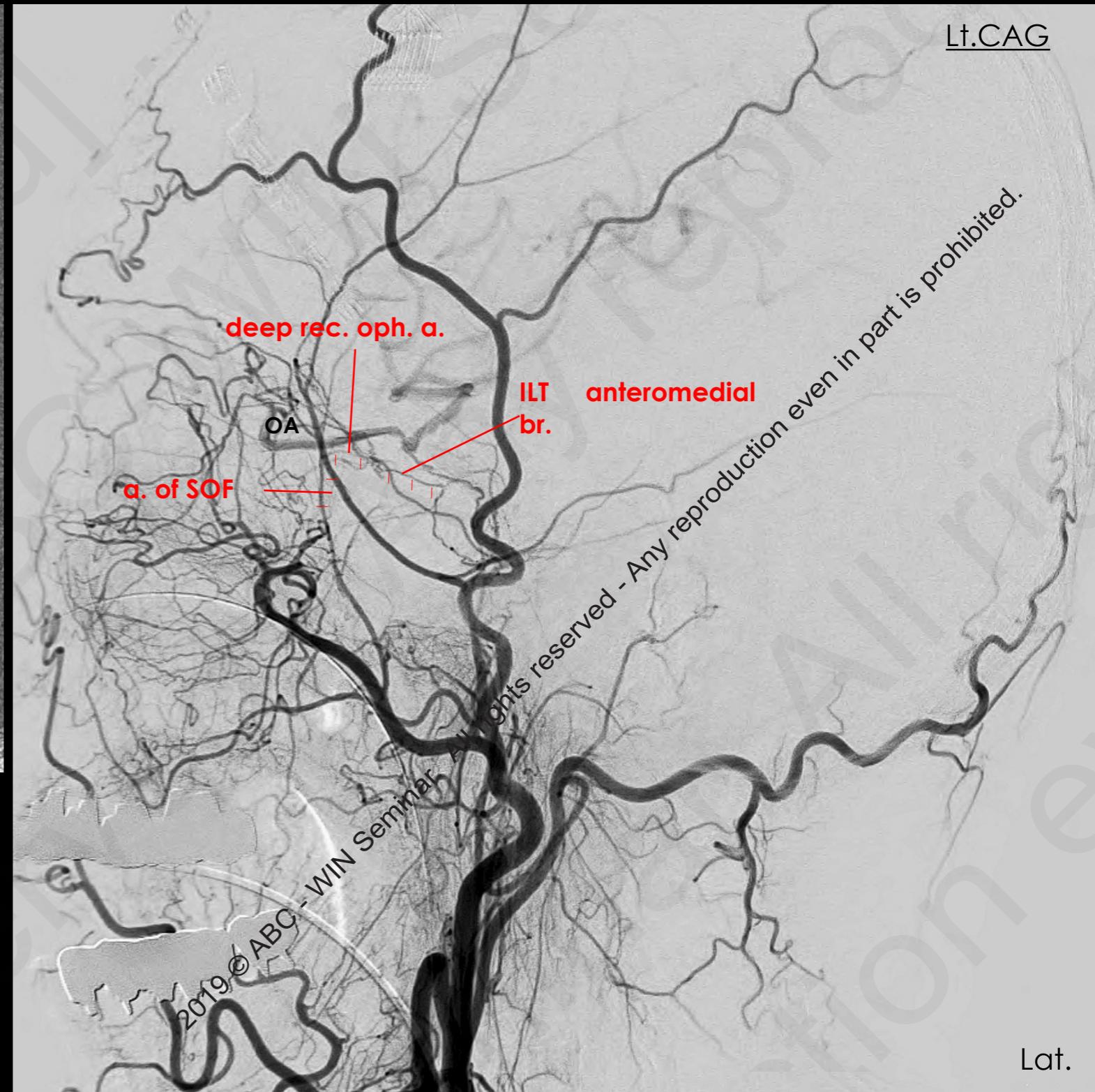


Lat.

deep recurrent ophthalmic a. - artery of SOF - ILT anteromedial br.

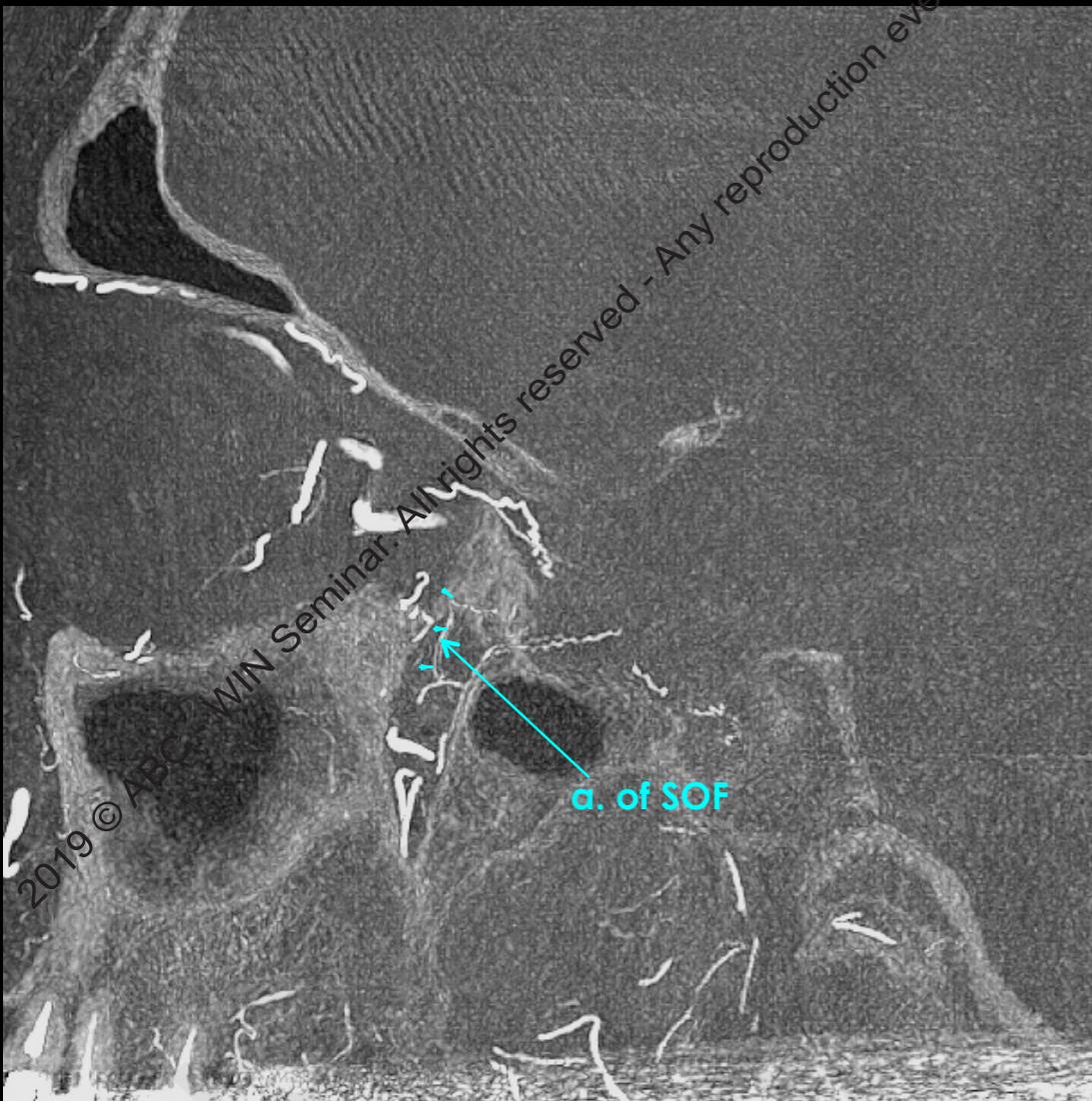


3DRA slab MIP
sagittal

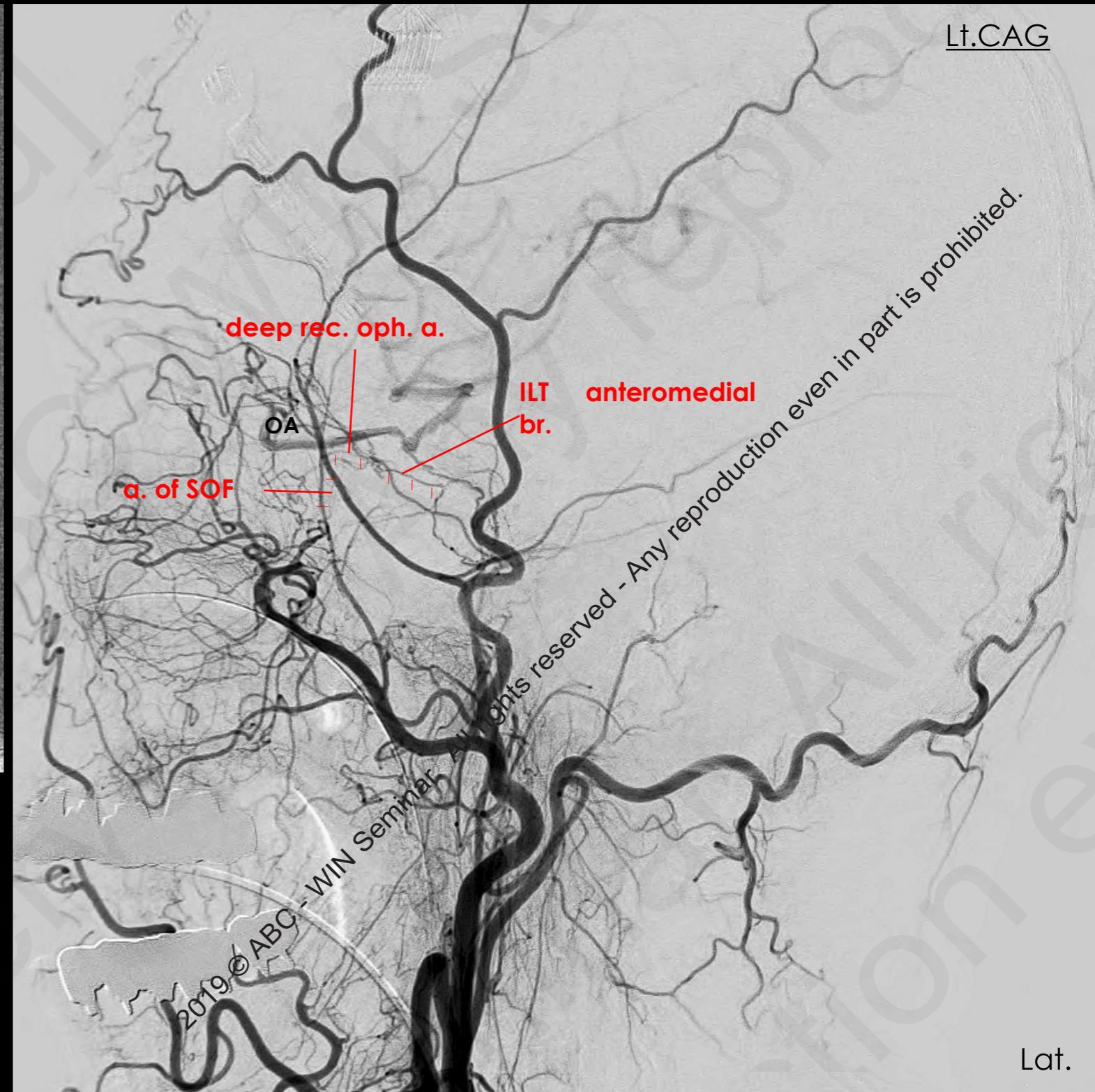


Lat.

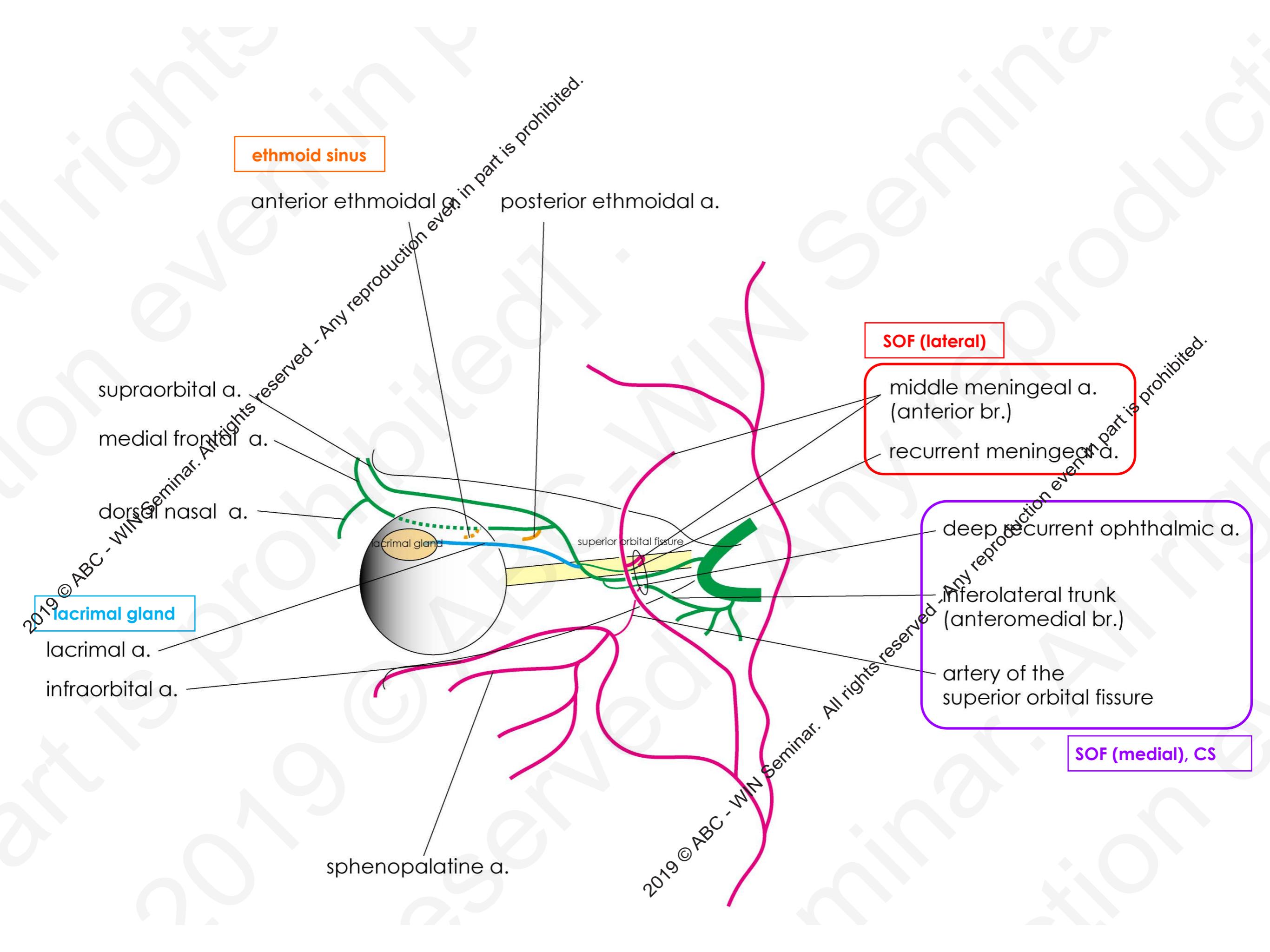
deep recurrent ophthalmic a. - artery of SOF - ILT anteromedial br.

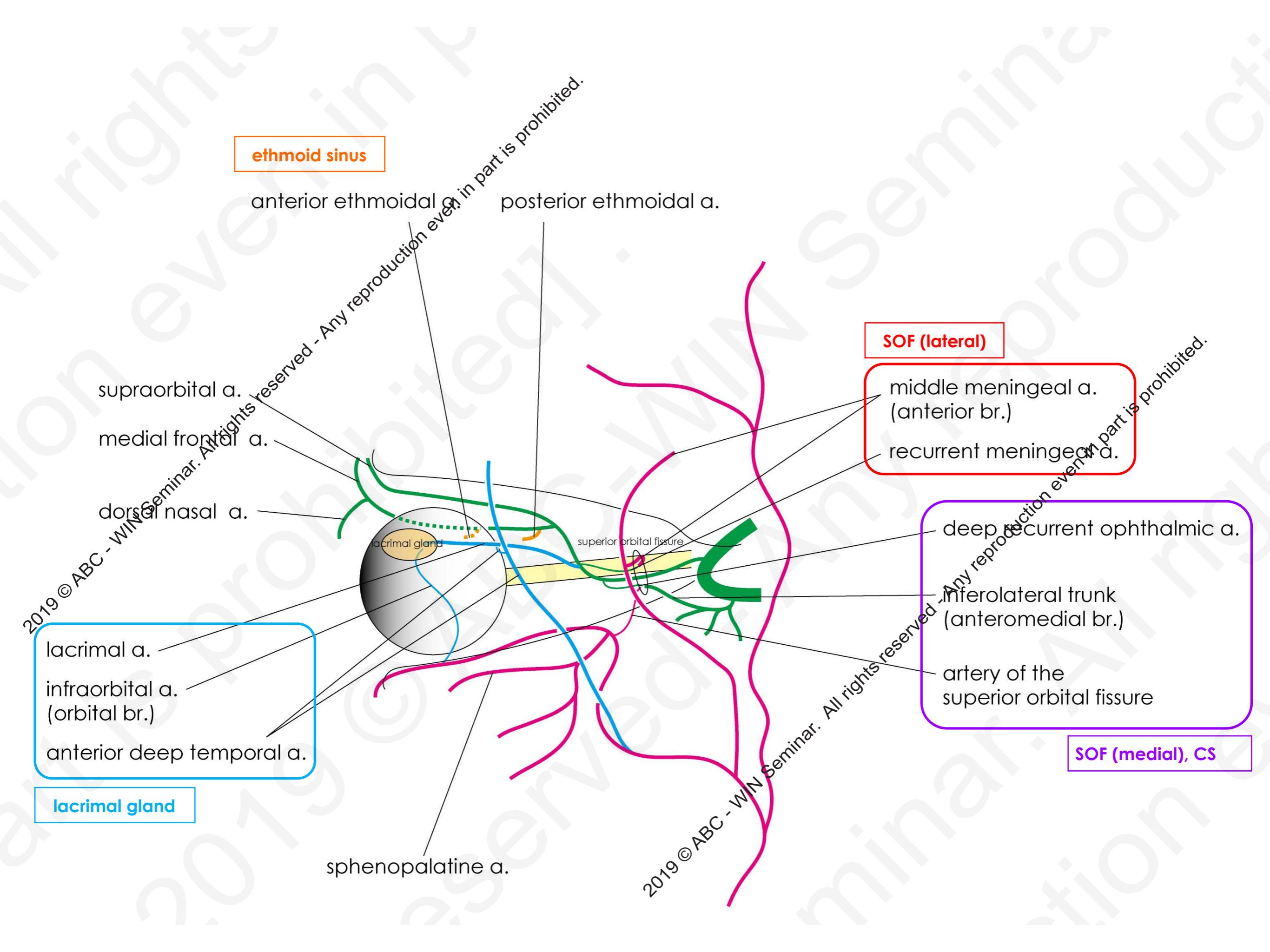


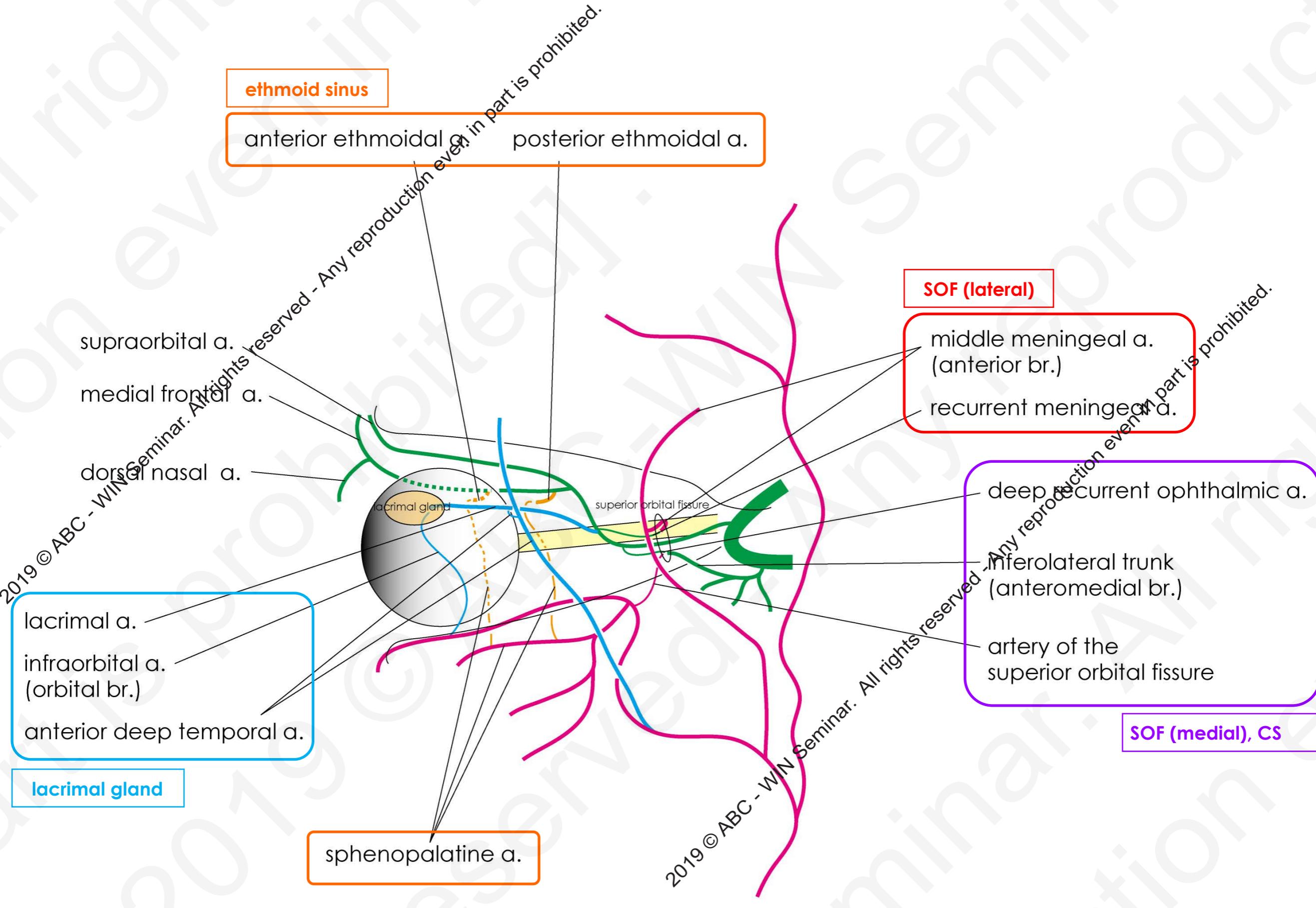
3DRA slab MIP
sagittal



Lat.

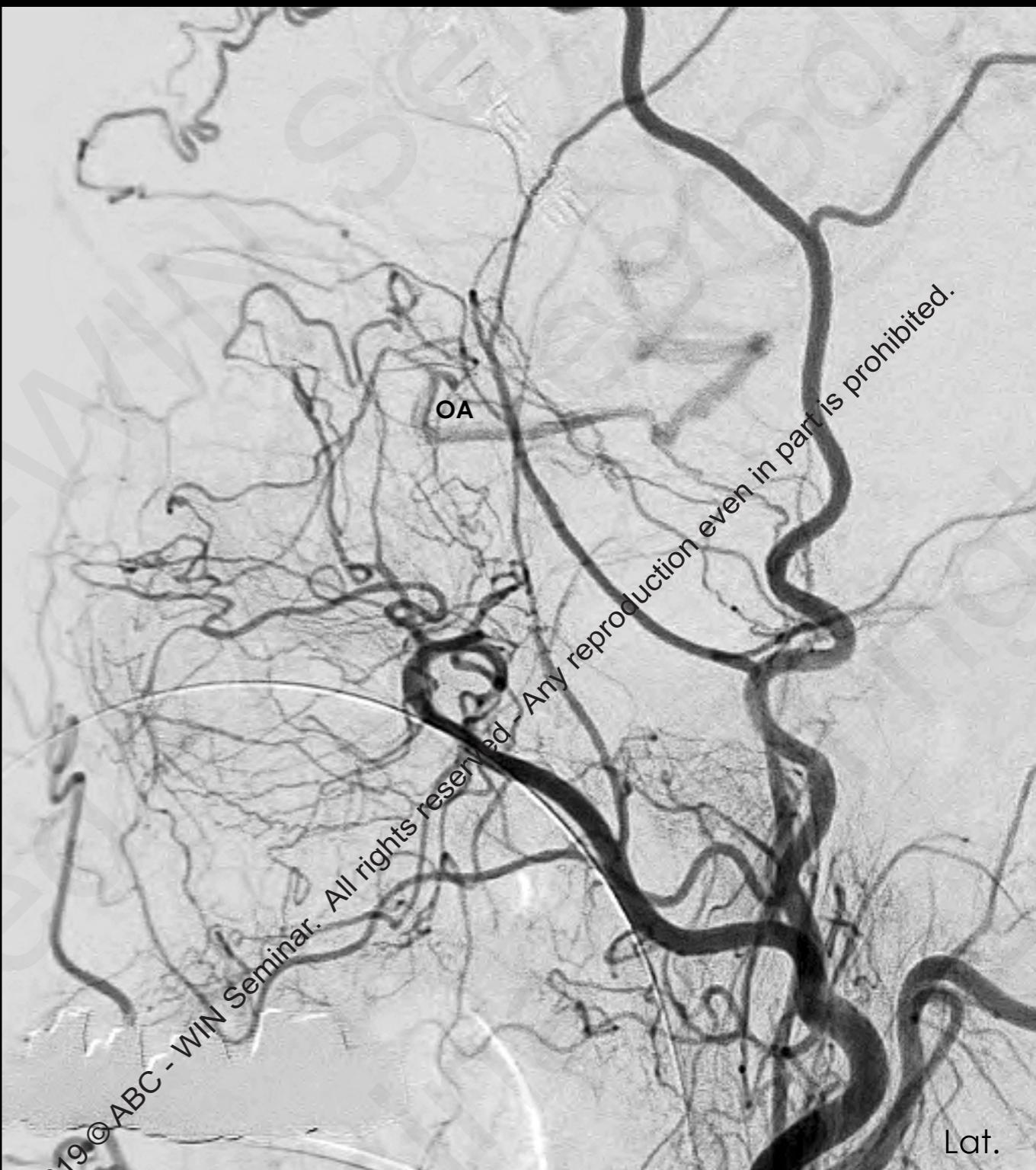
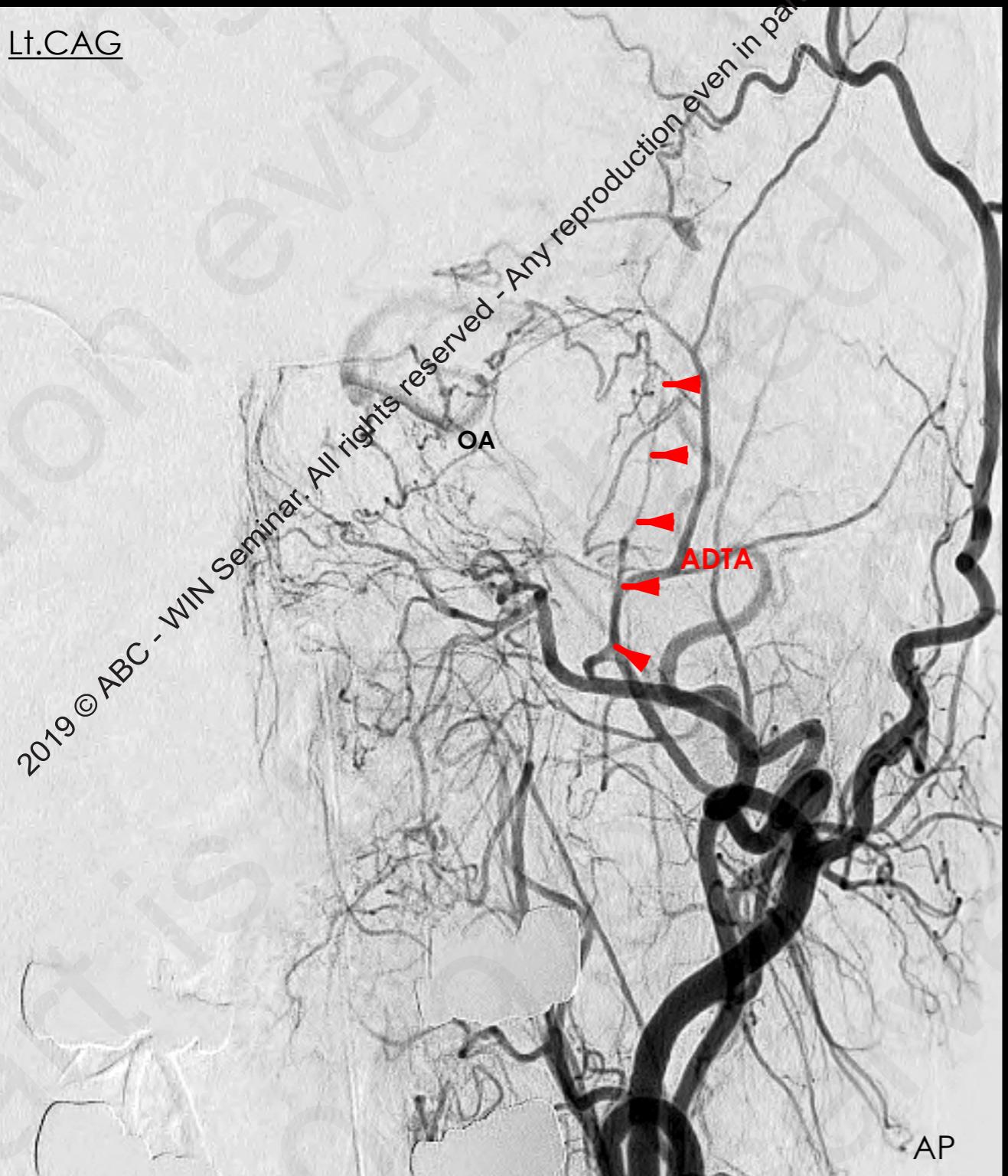






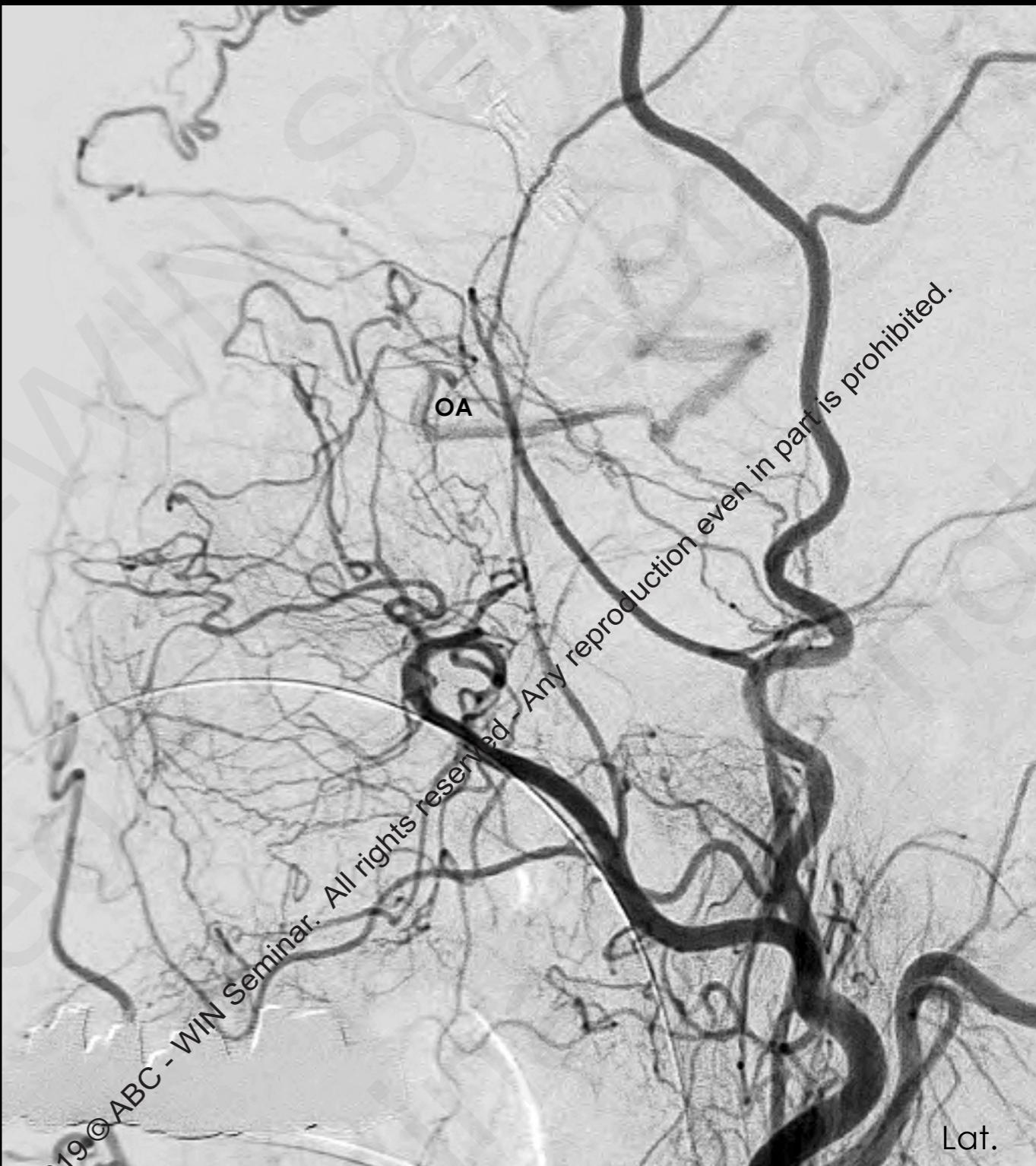
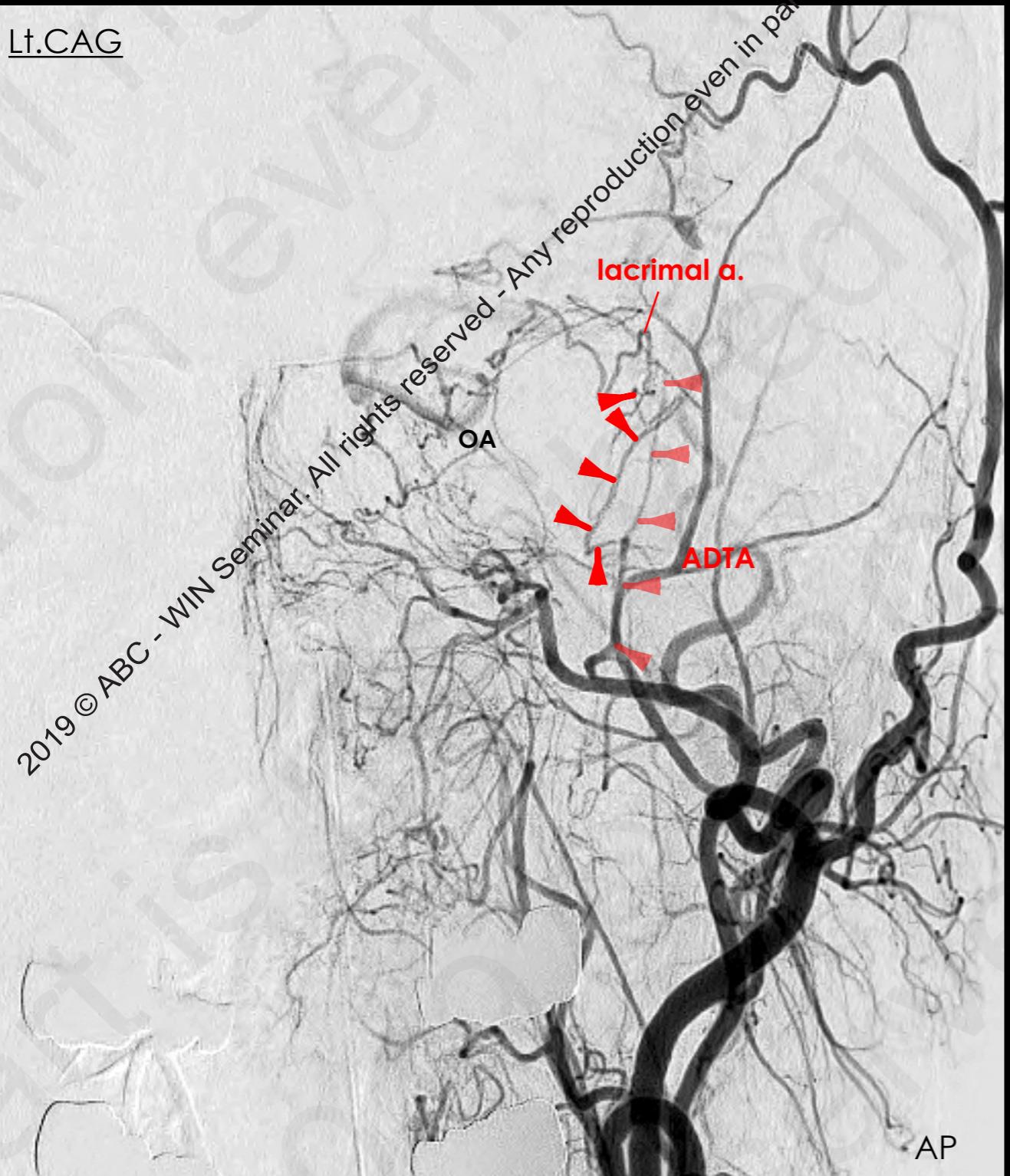
lacrimal a. - ant. deep temporal a.

Lt.CAG



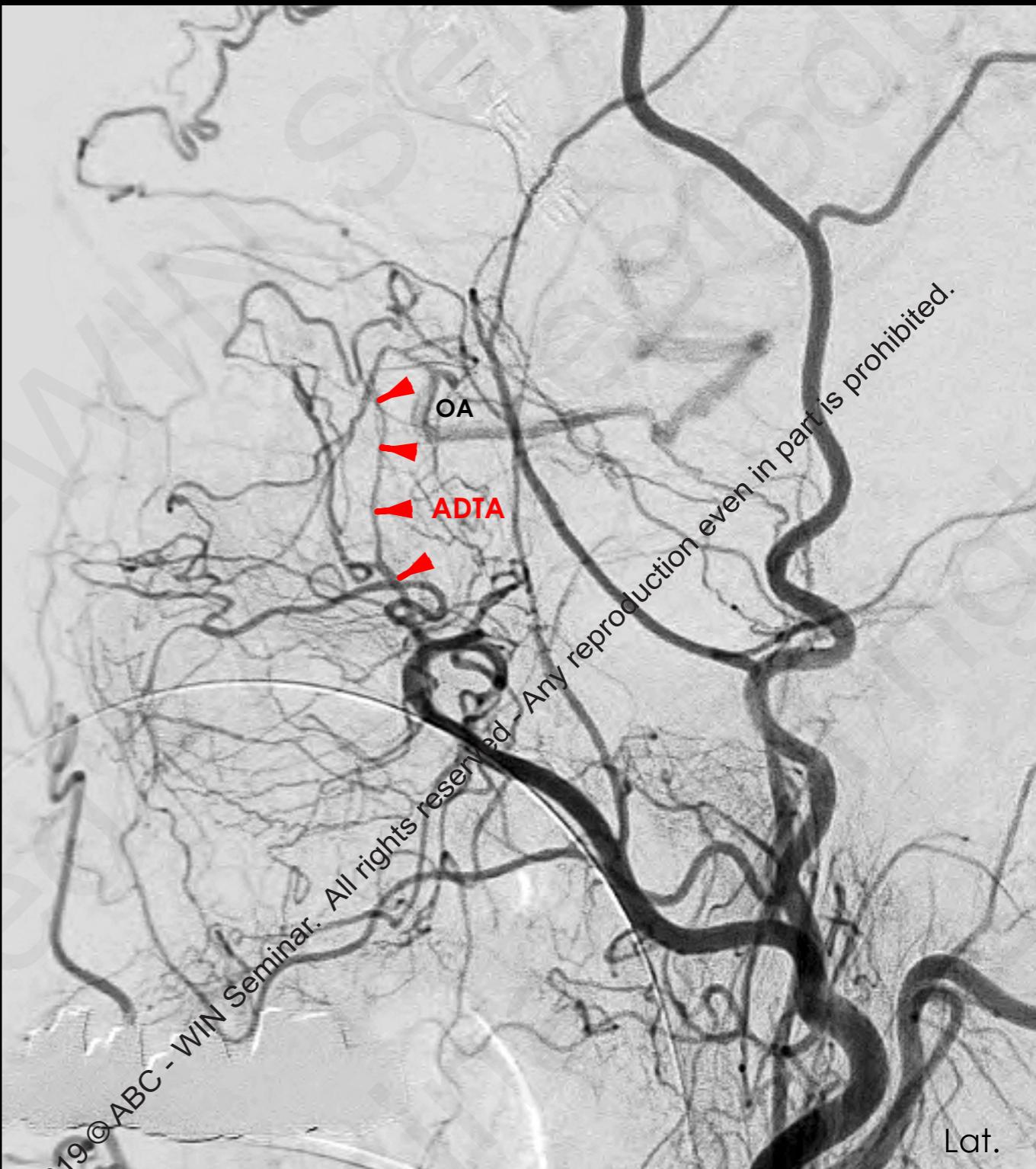
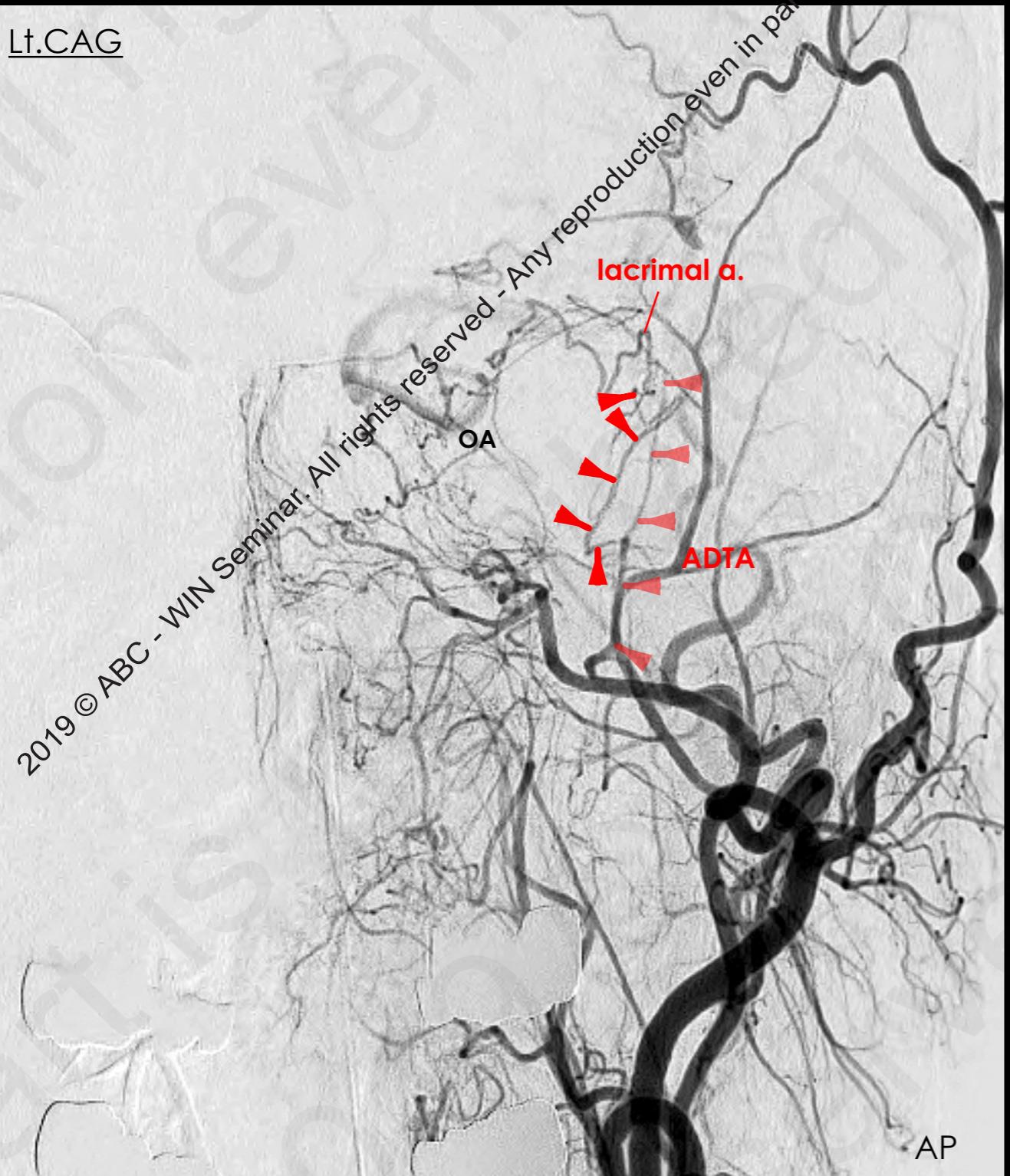
lacrimal a. - ant. deep temporal a.

Lt.CAG



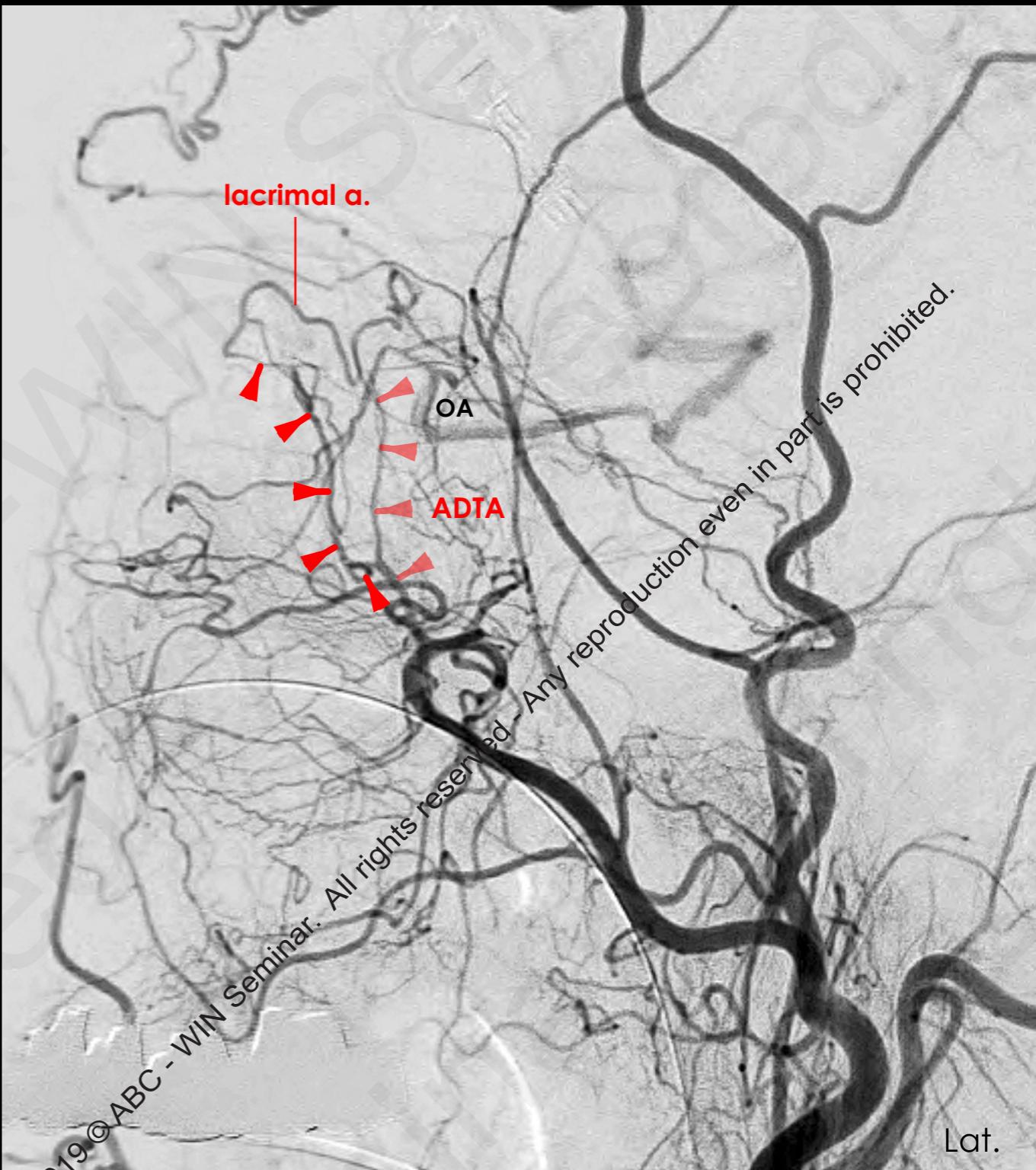
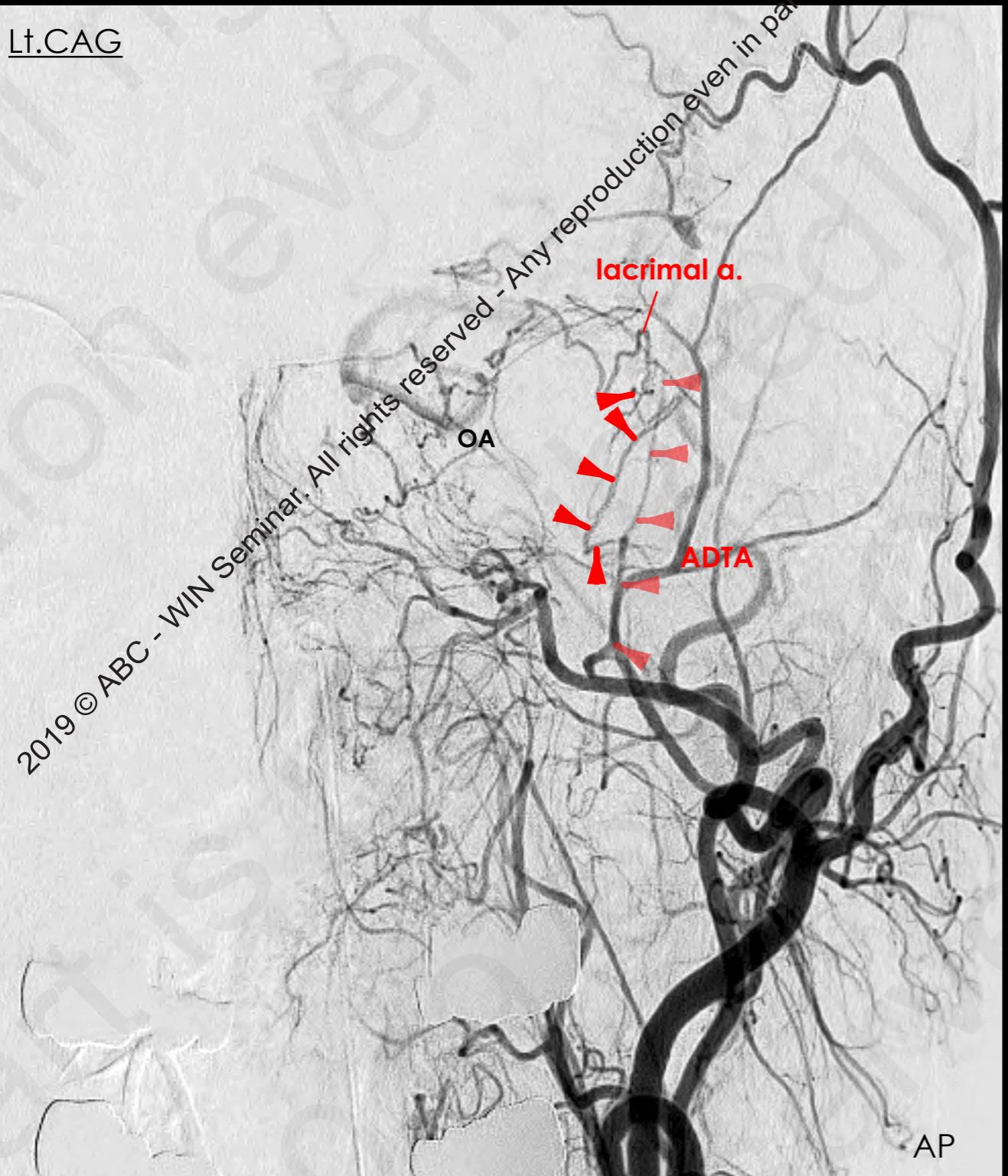
lacrimal a. - ant. deep temporal a.

Lt.CAG



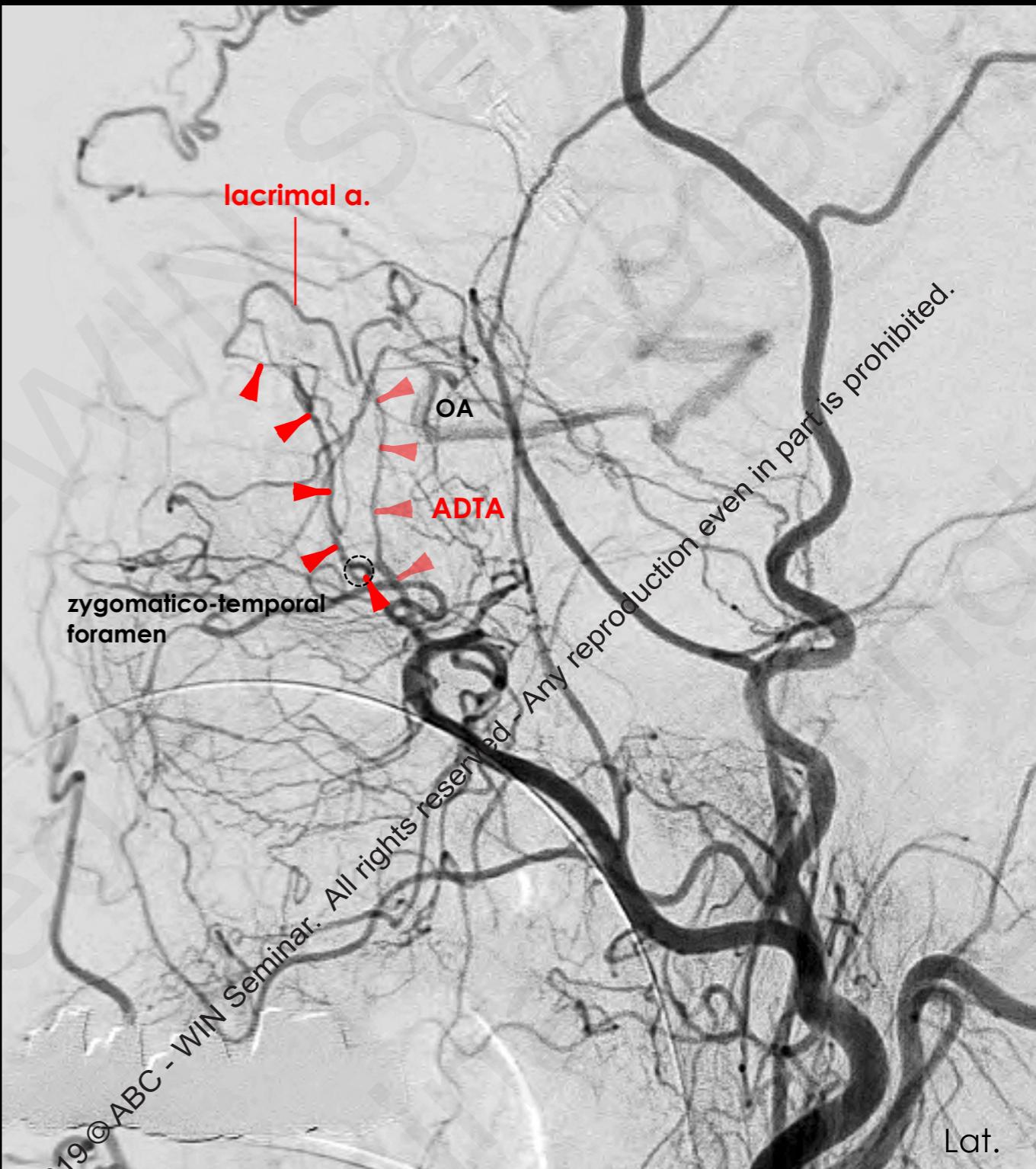
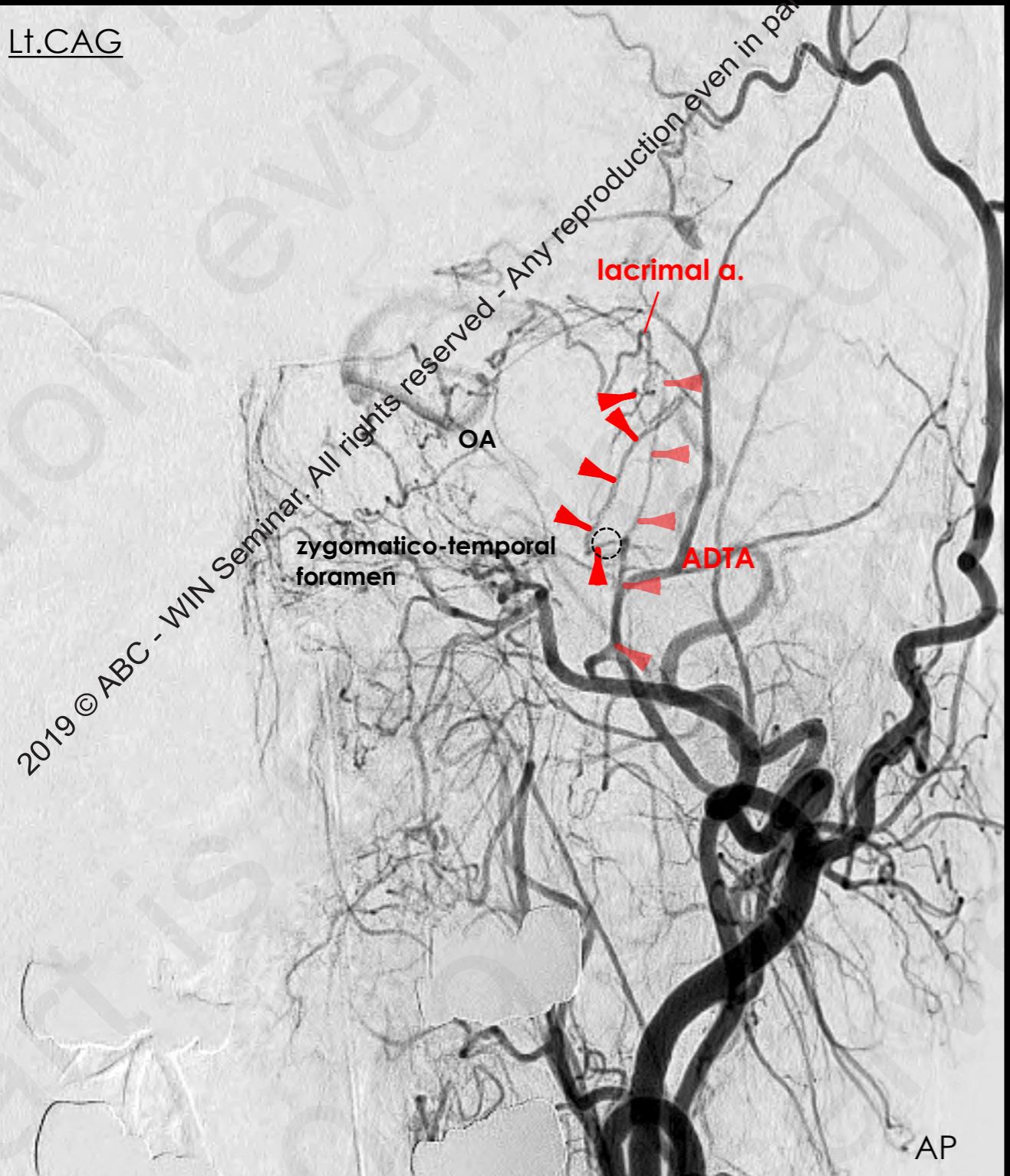
lacrimal a. - ant. deep temporal a.

Lt.CAG



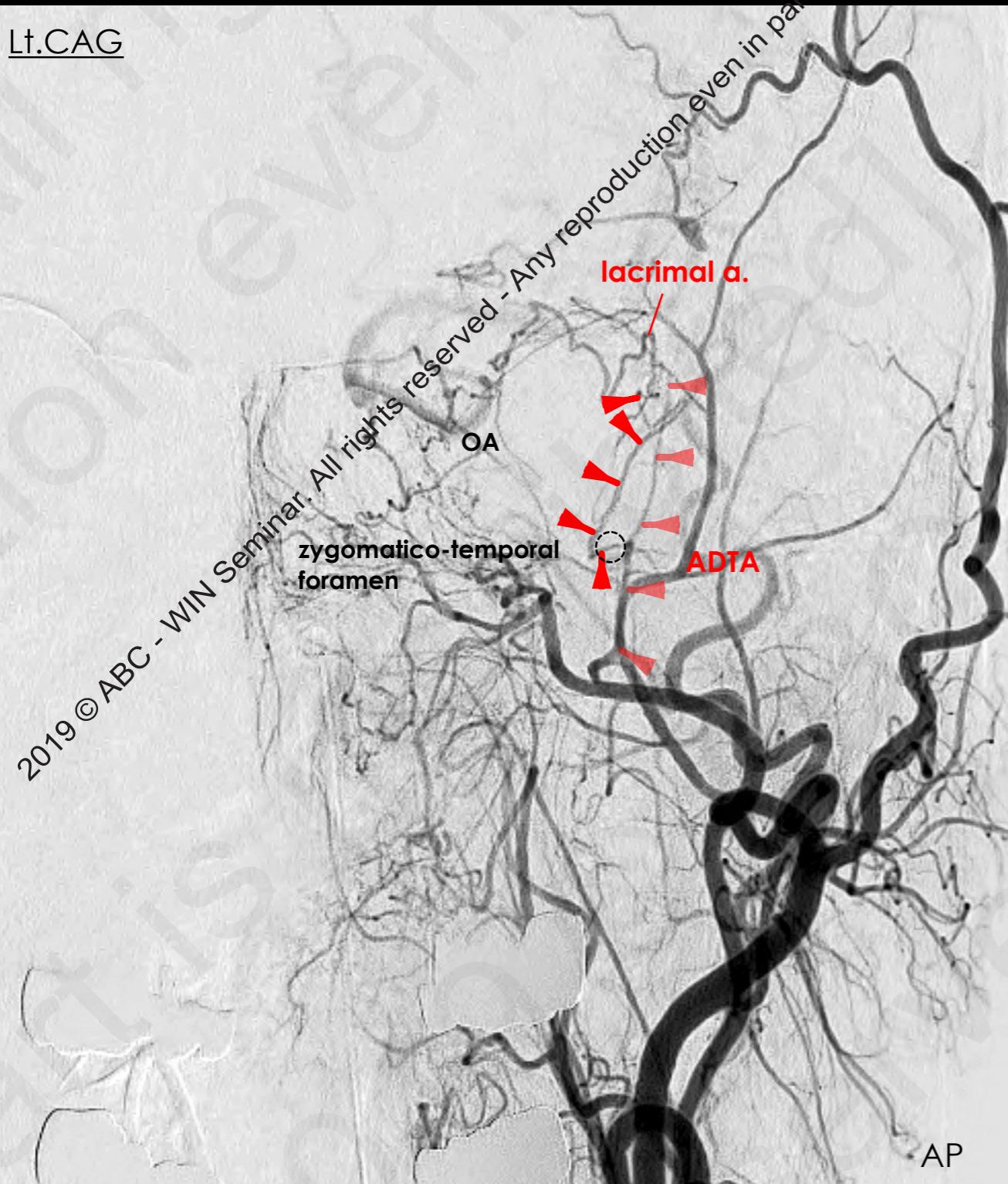
lacrimal a. - ant. deep temporal a.

Lt.CAG



lacrimal a. - ant. deep temporal a.

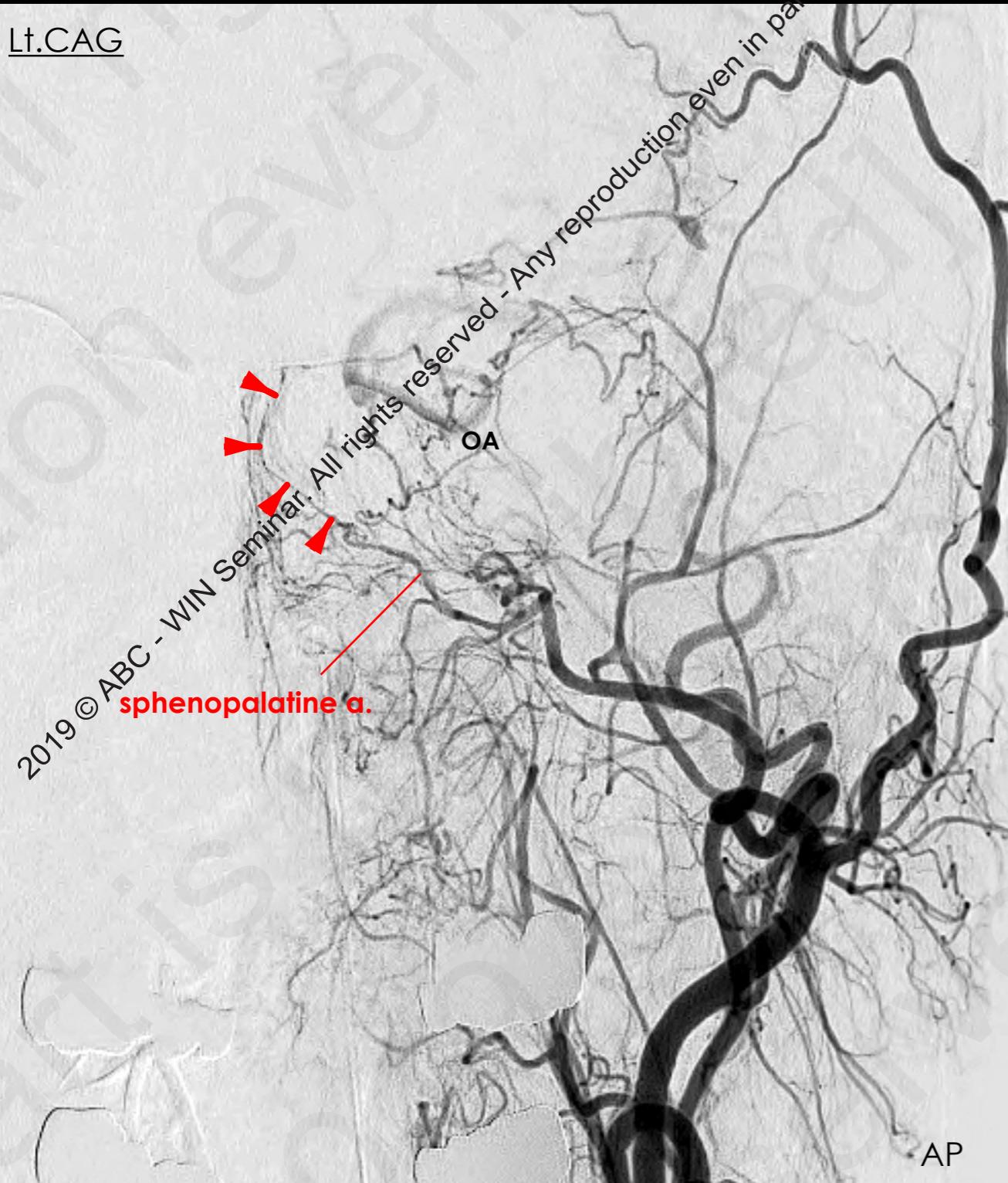
Lt.CAG



3DRA slab MIP
axial

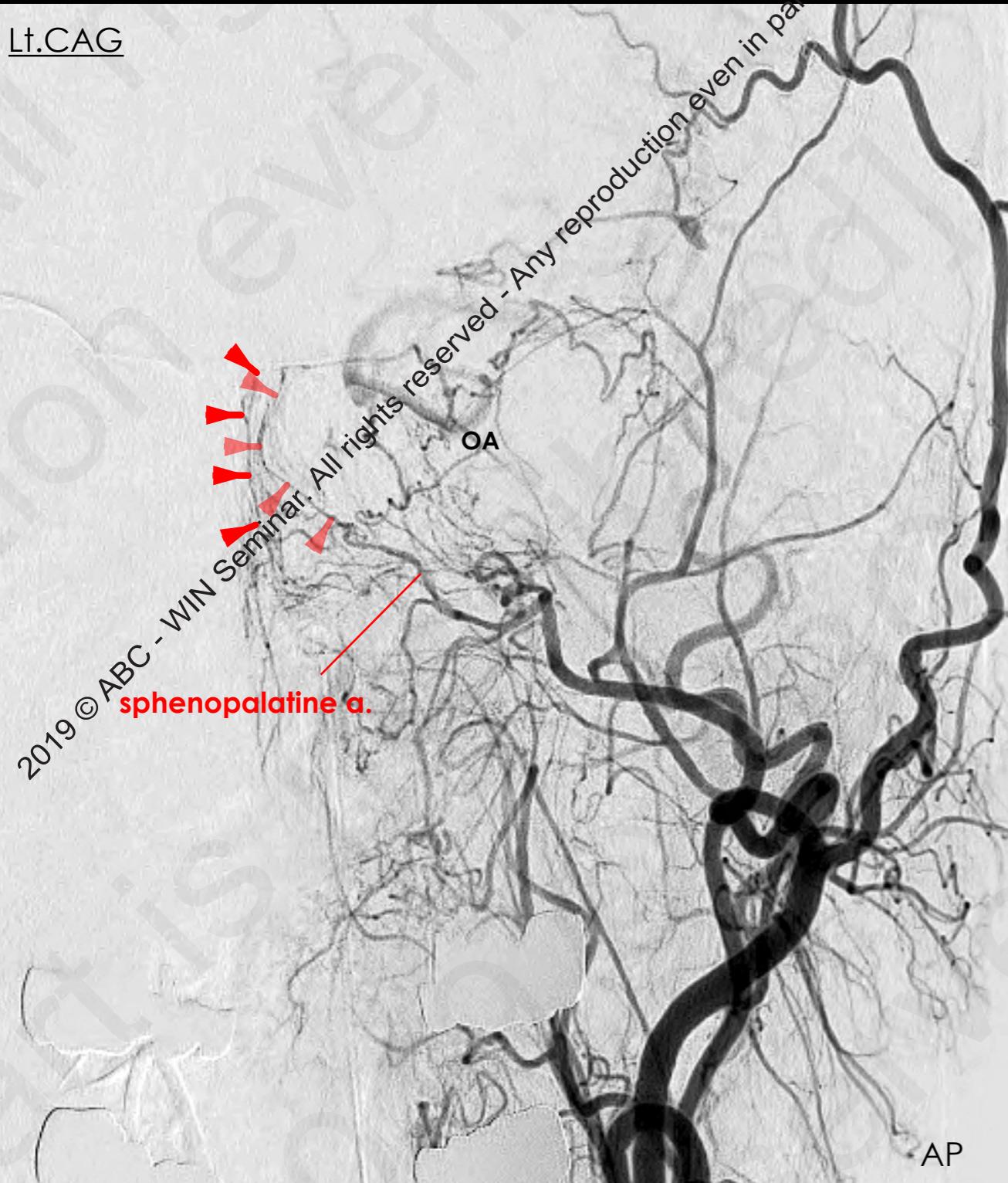
ant. & post. ethmoidal a. - sphenopalatine a.

Lt.CAG



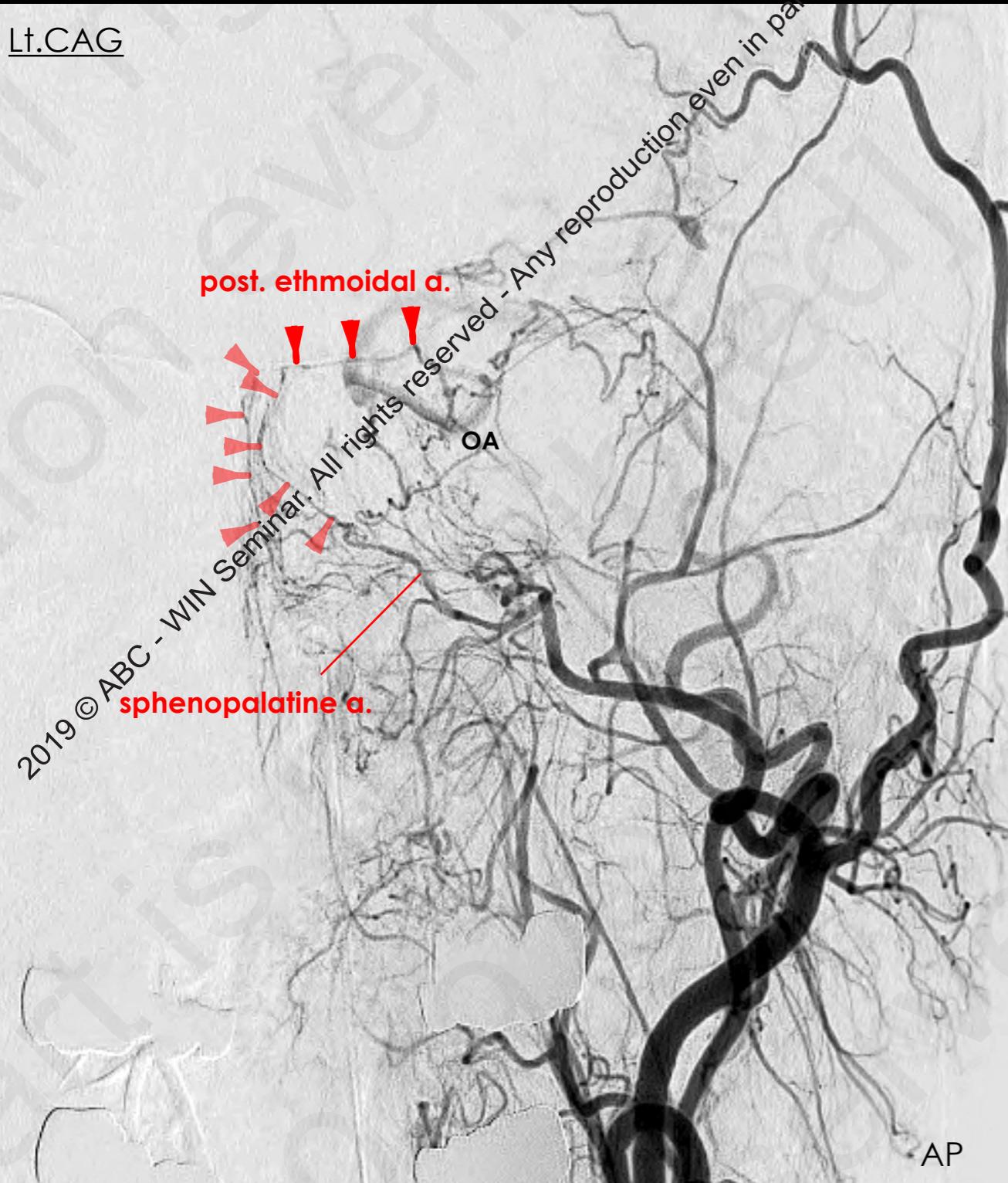
ant. & post. ethmoidal a. - sphenopalatine a.

Lt.CAG



ant. & post. ethmoidal a. - sphenopalatine a.

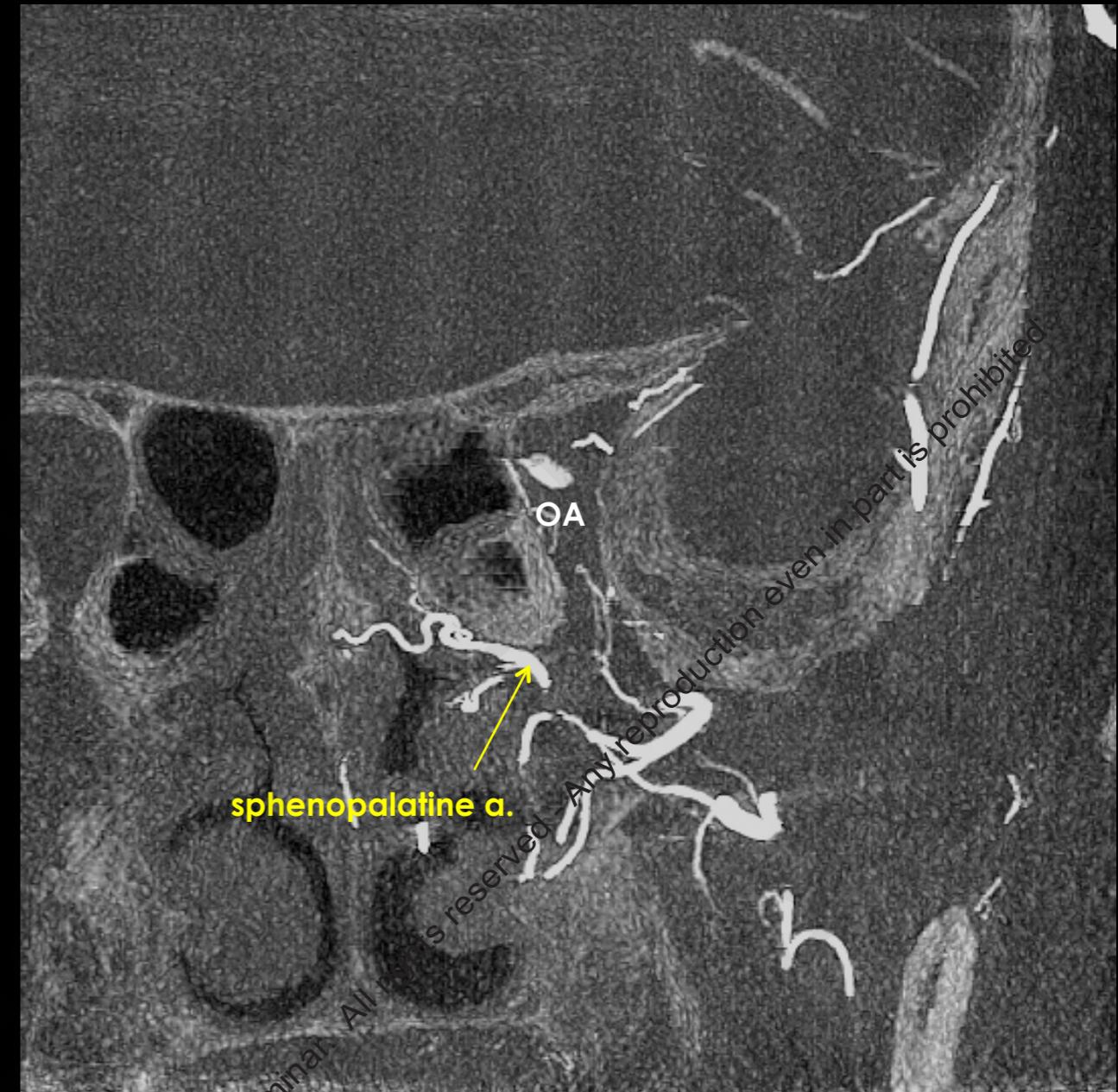
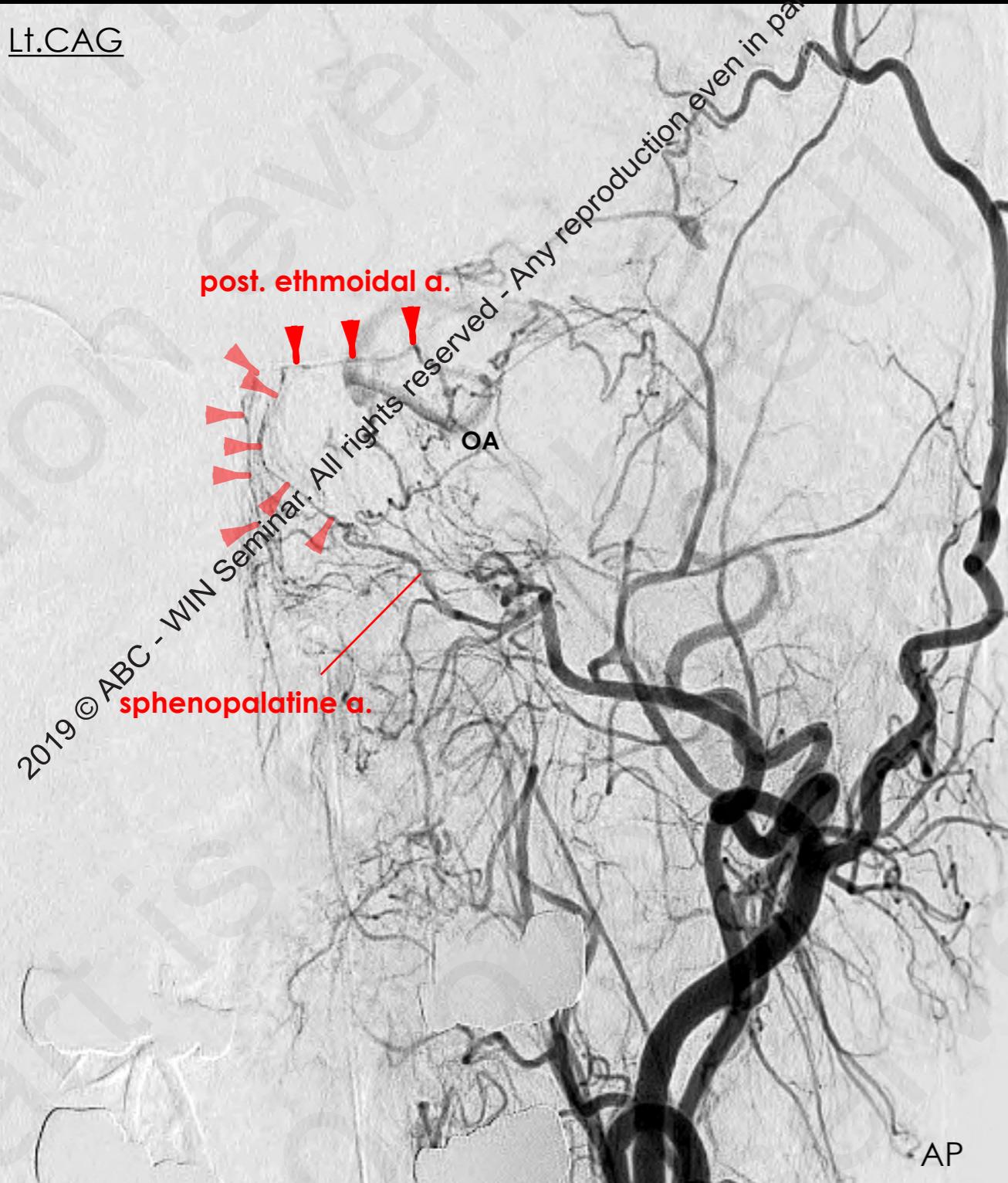
Lt.CAG



3DRA slab MIP
coronal

ant. & post. ethmoidal a. - sphenopalatine a.

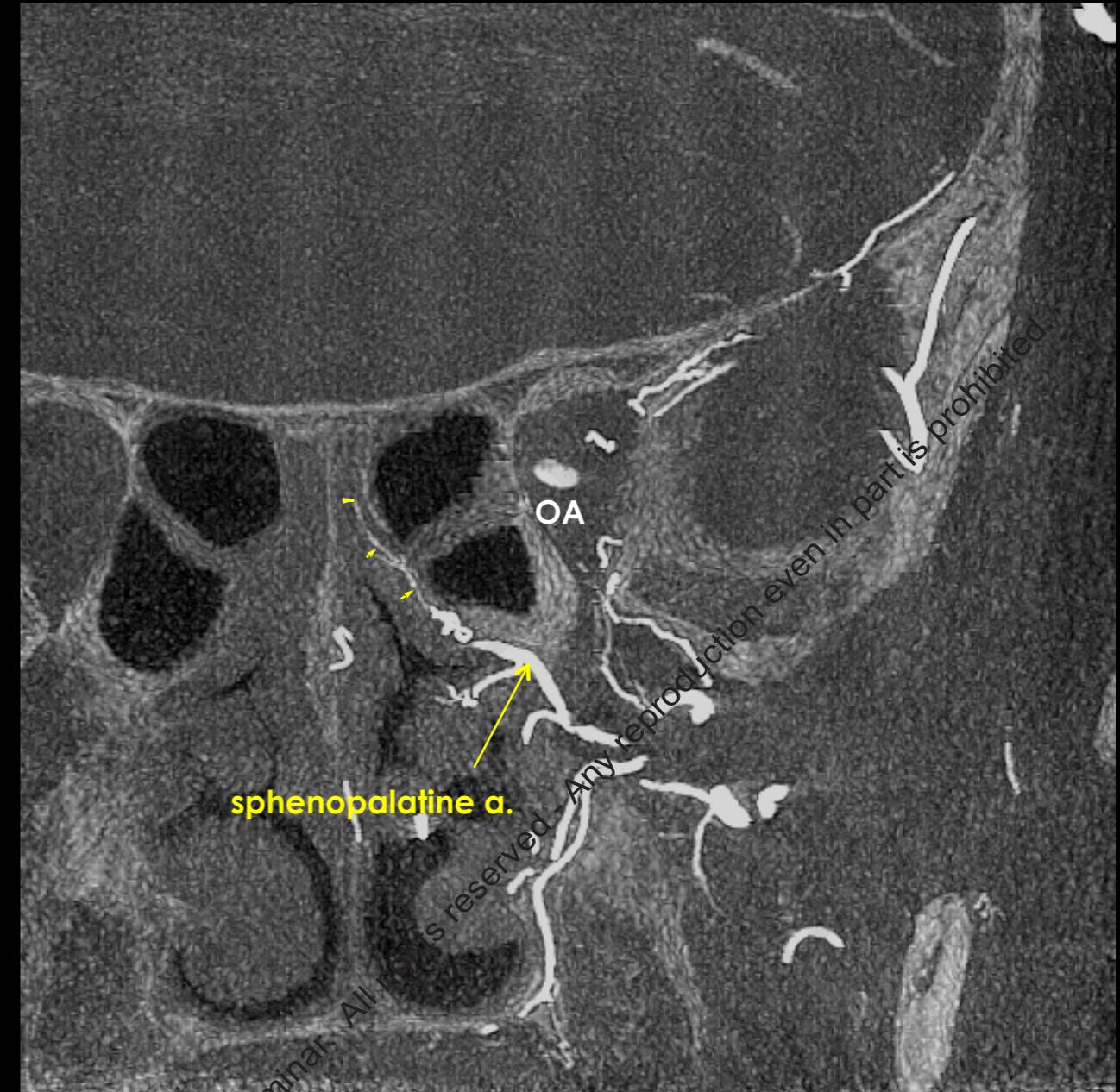
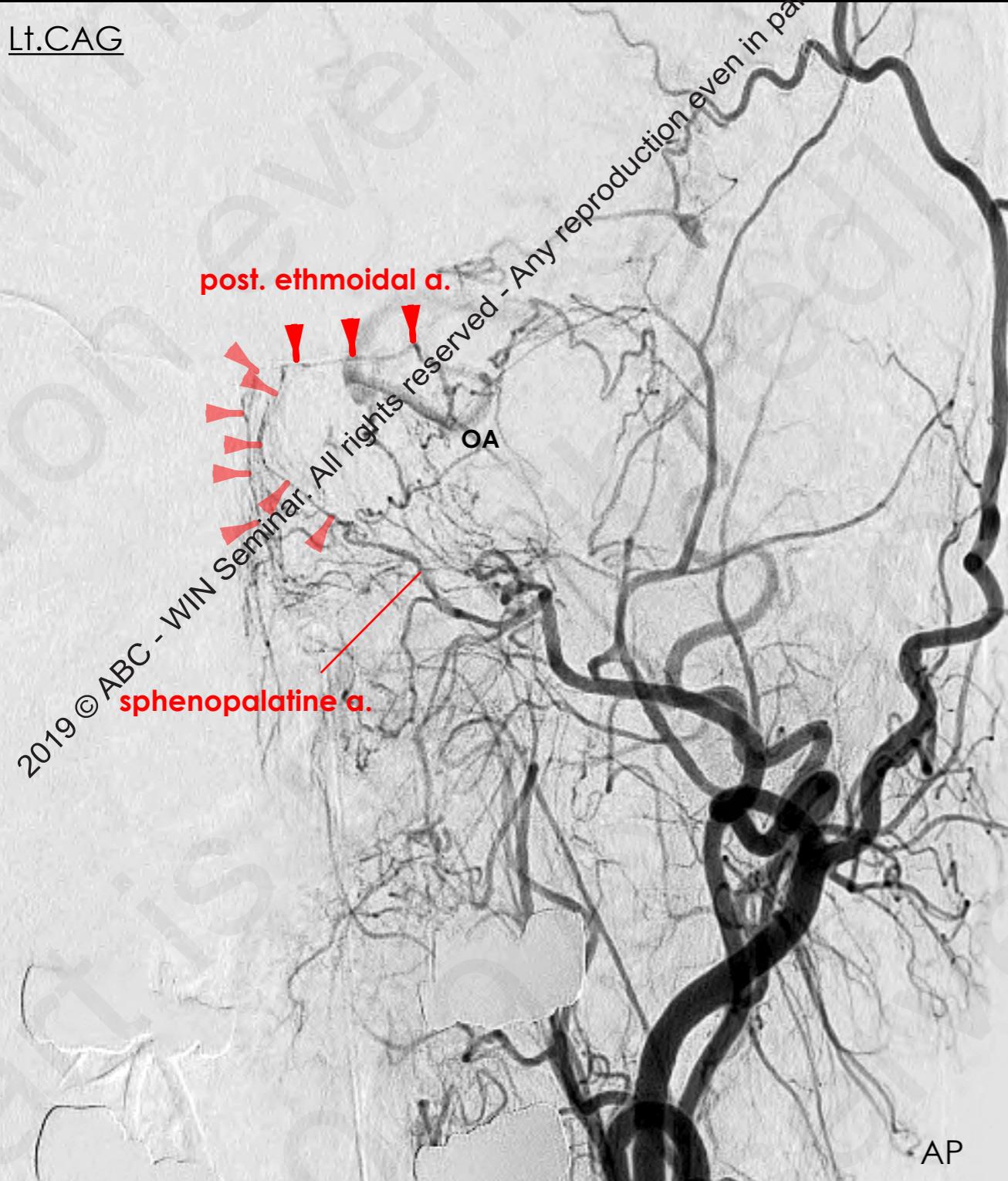
Lt.CAG



3DRA slab MIP
coronal

ant. & post. ethmoidal a. - sphenopalatine a.

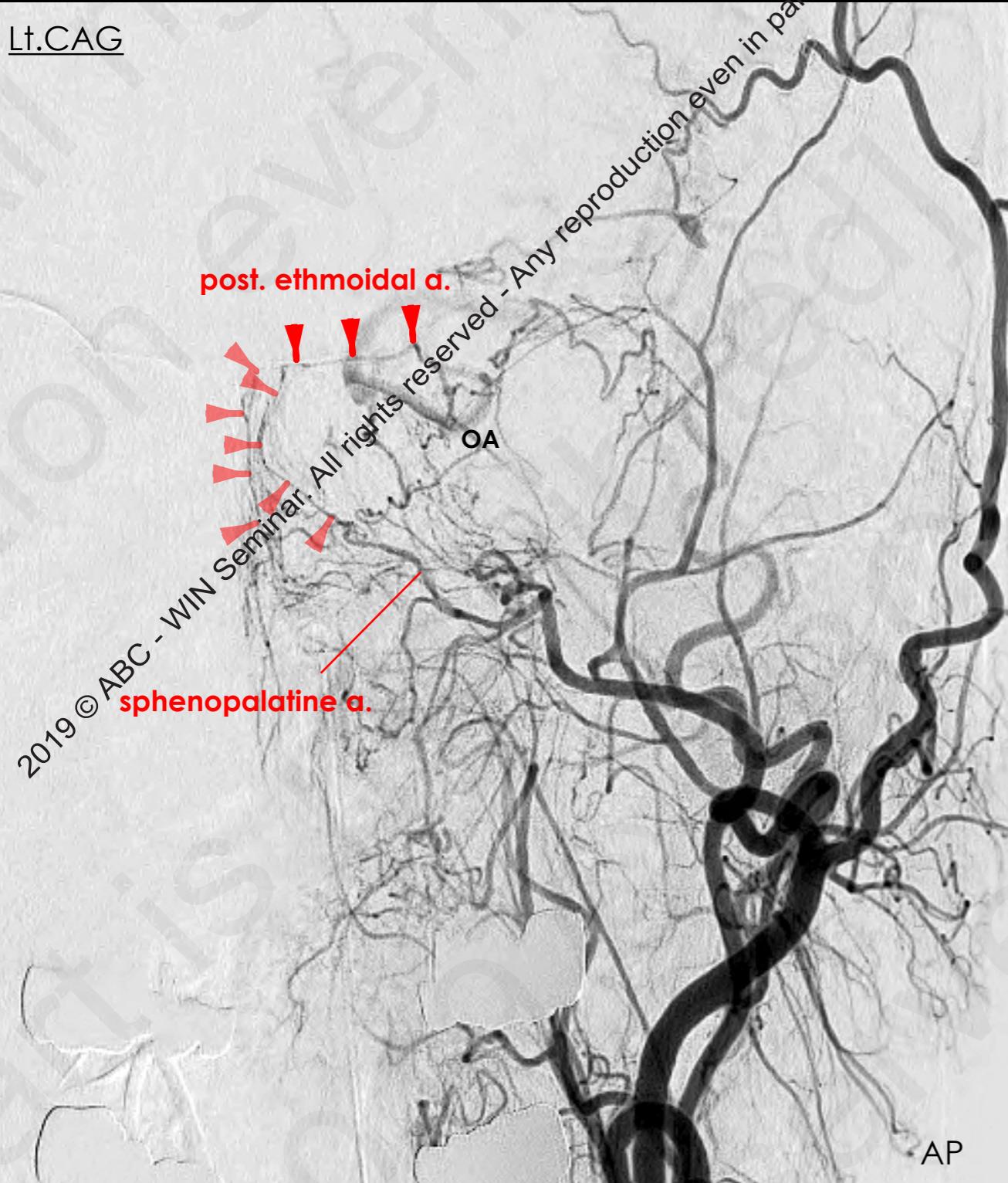
Lt.CAG



3DRA slab MIP
coronal

ant. & post. ethmoidal a. - sphenopalatine a.

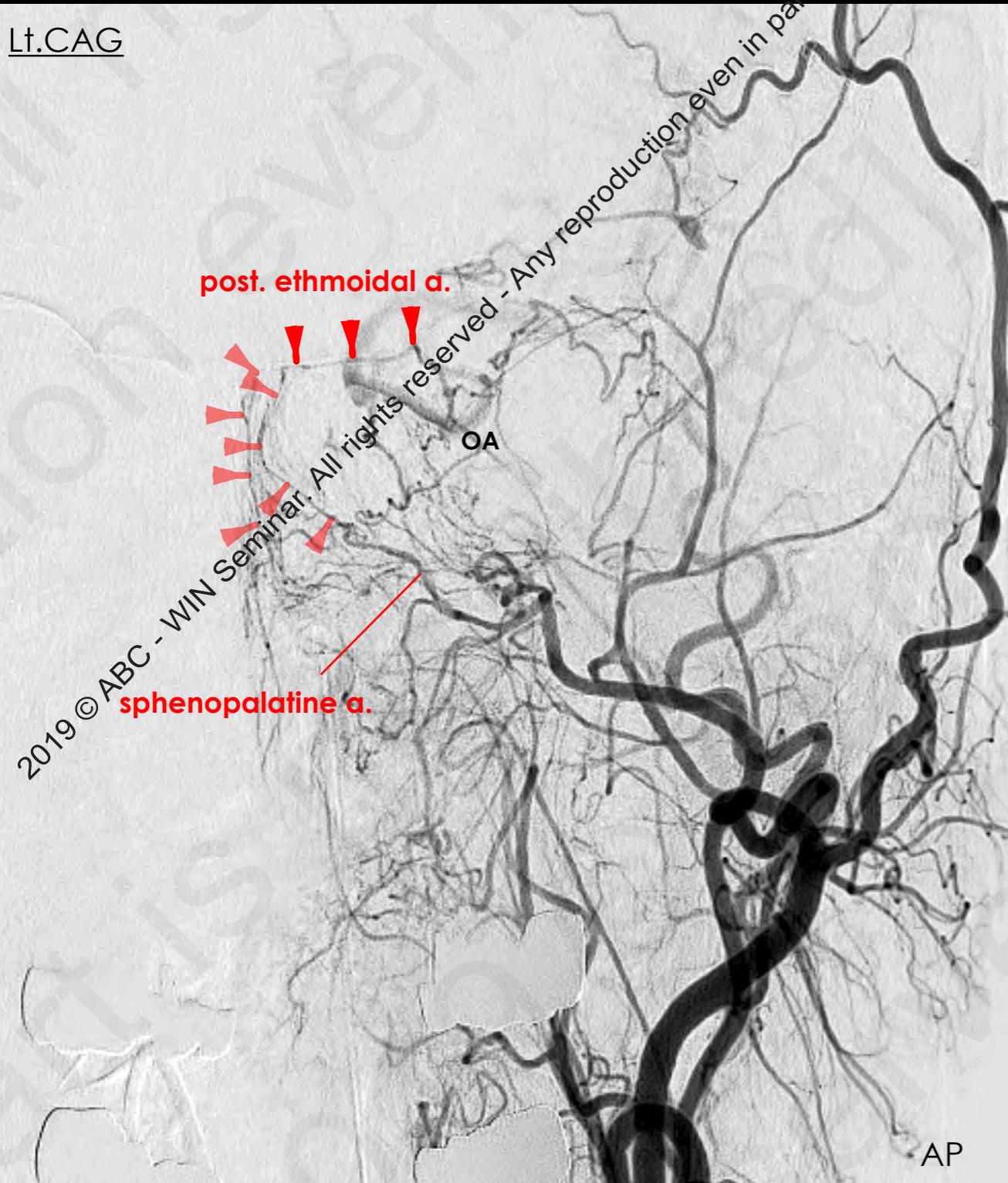
Lt.CAG



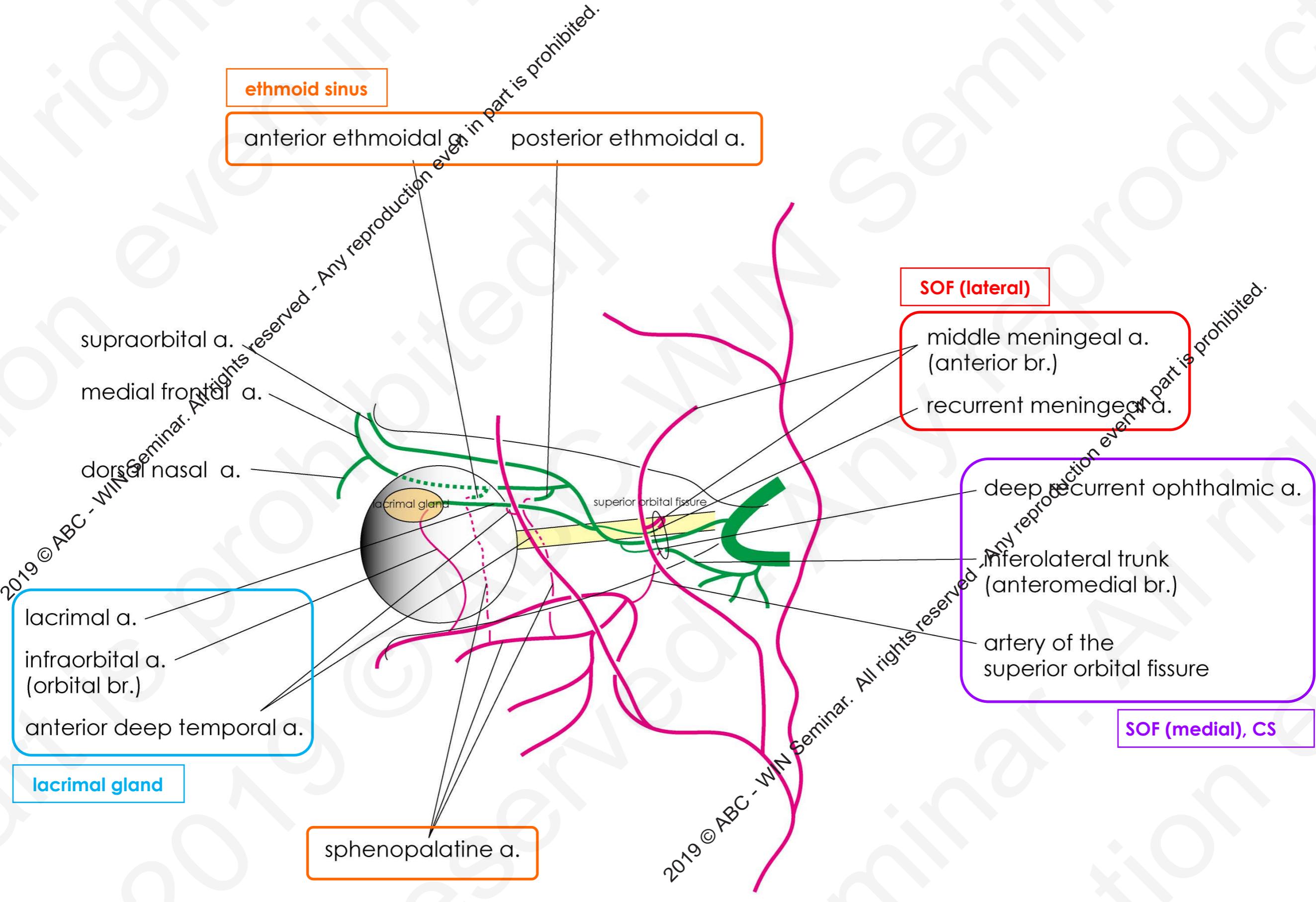
3DRA slab MIP
coronal

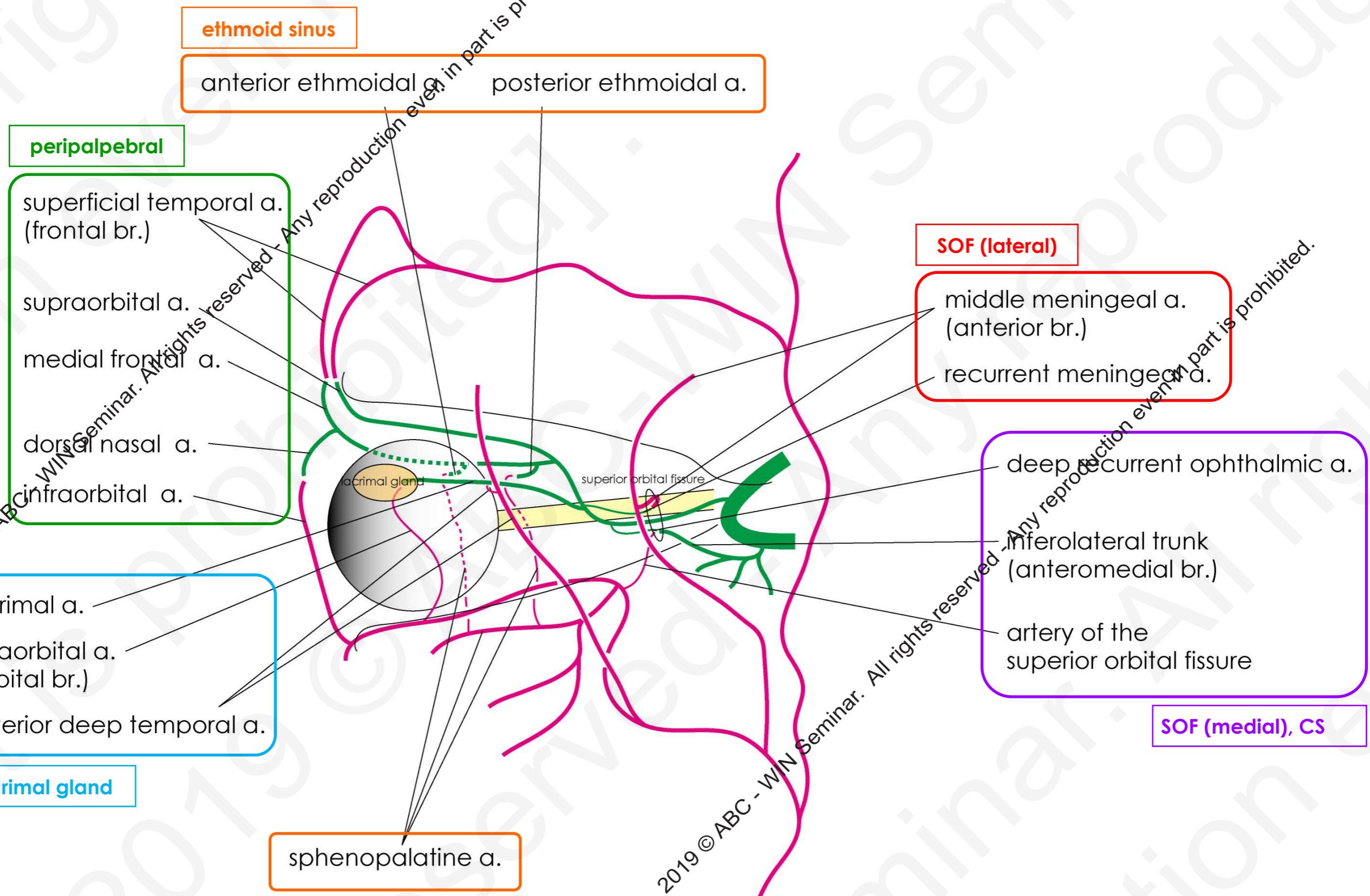
ant. & post. ethmoidal a. - sphenopalatine a.

Lt.CAG



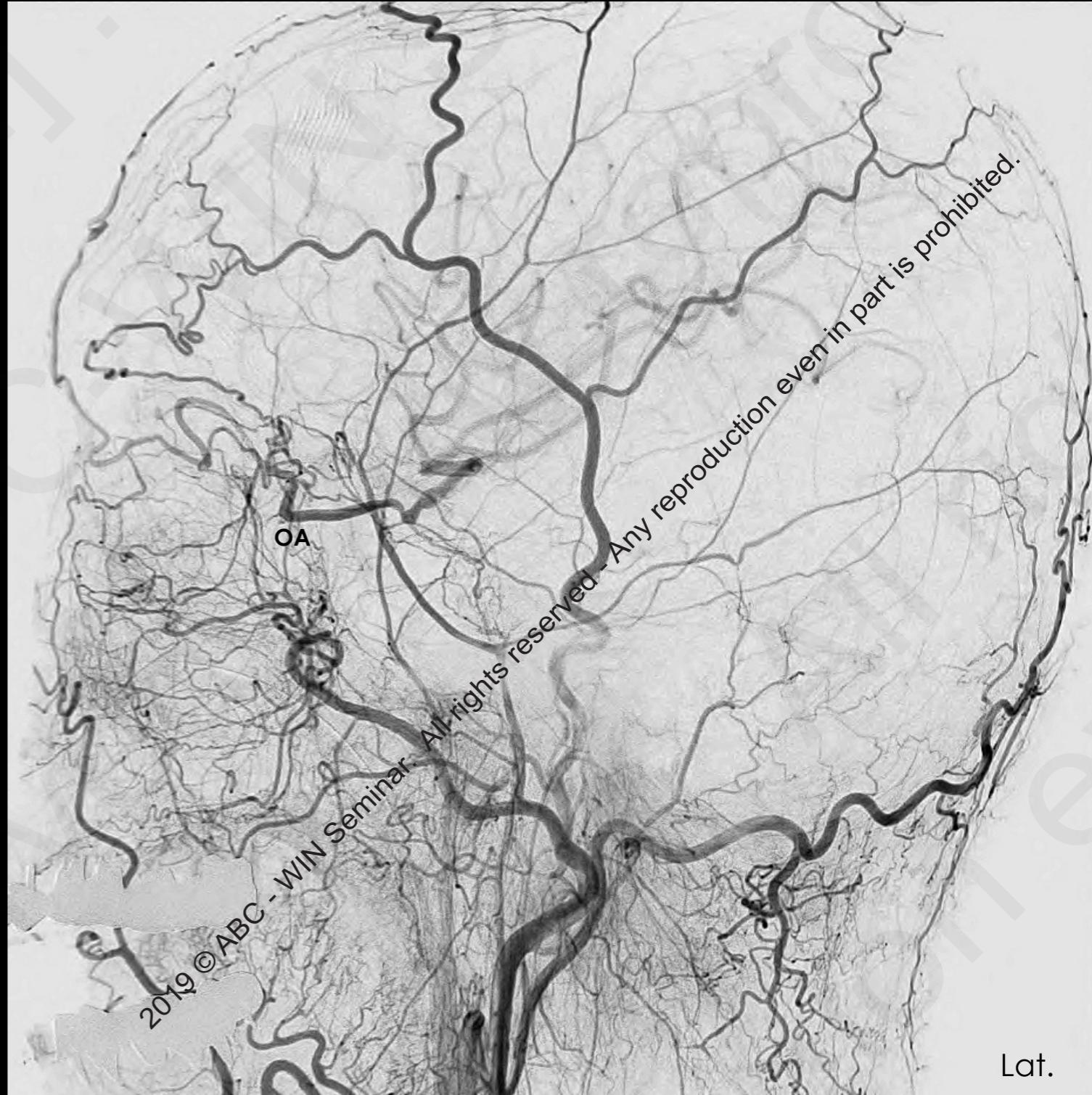
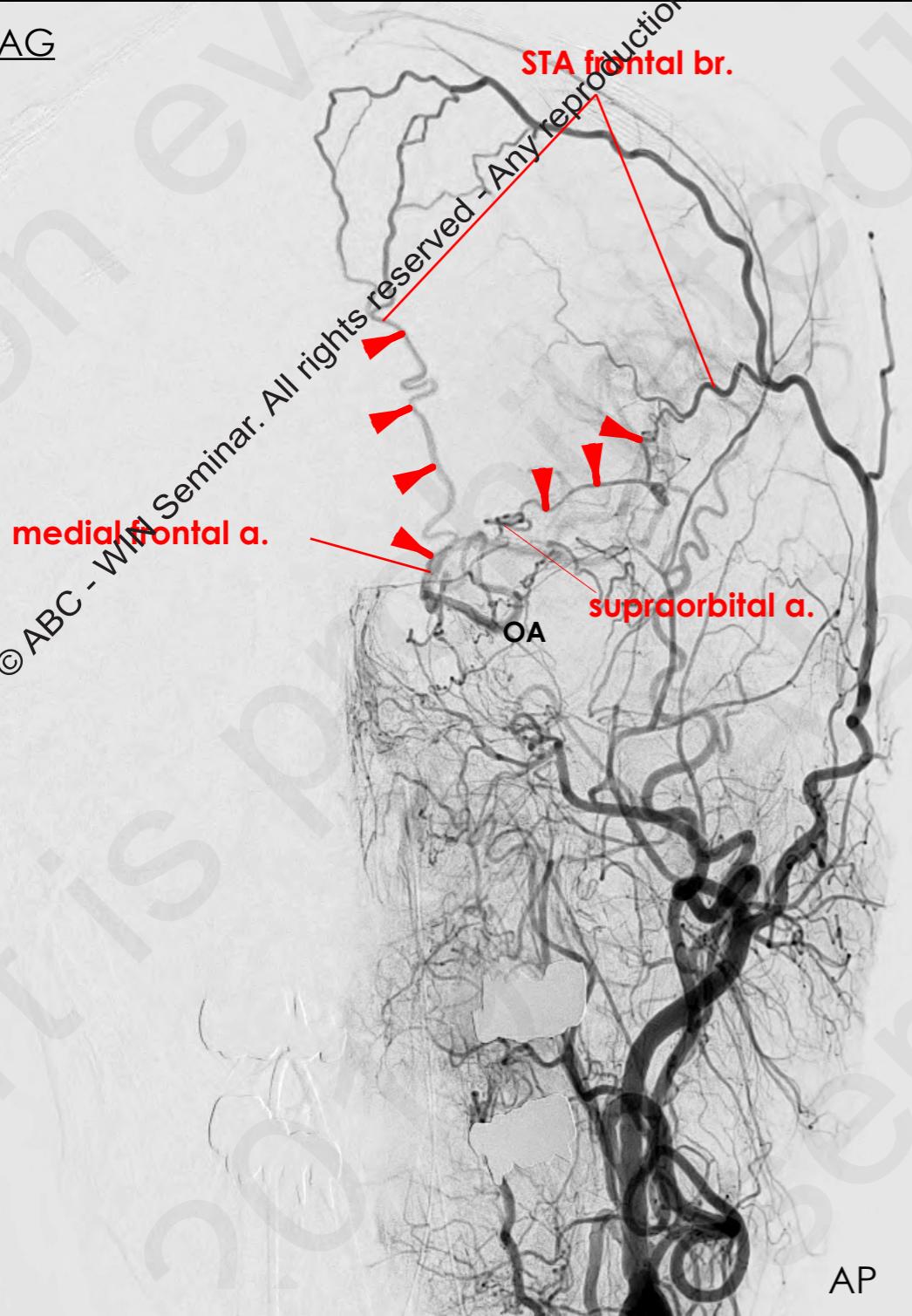
3DRA slab MIP
coronal





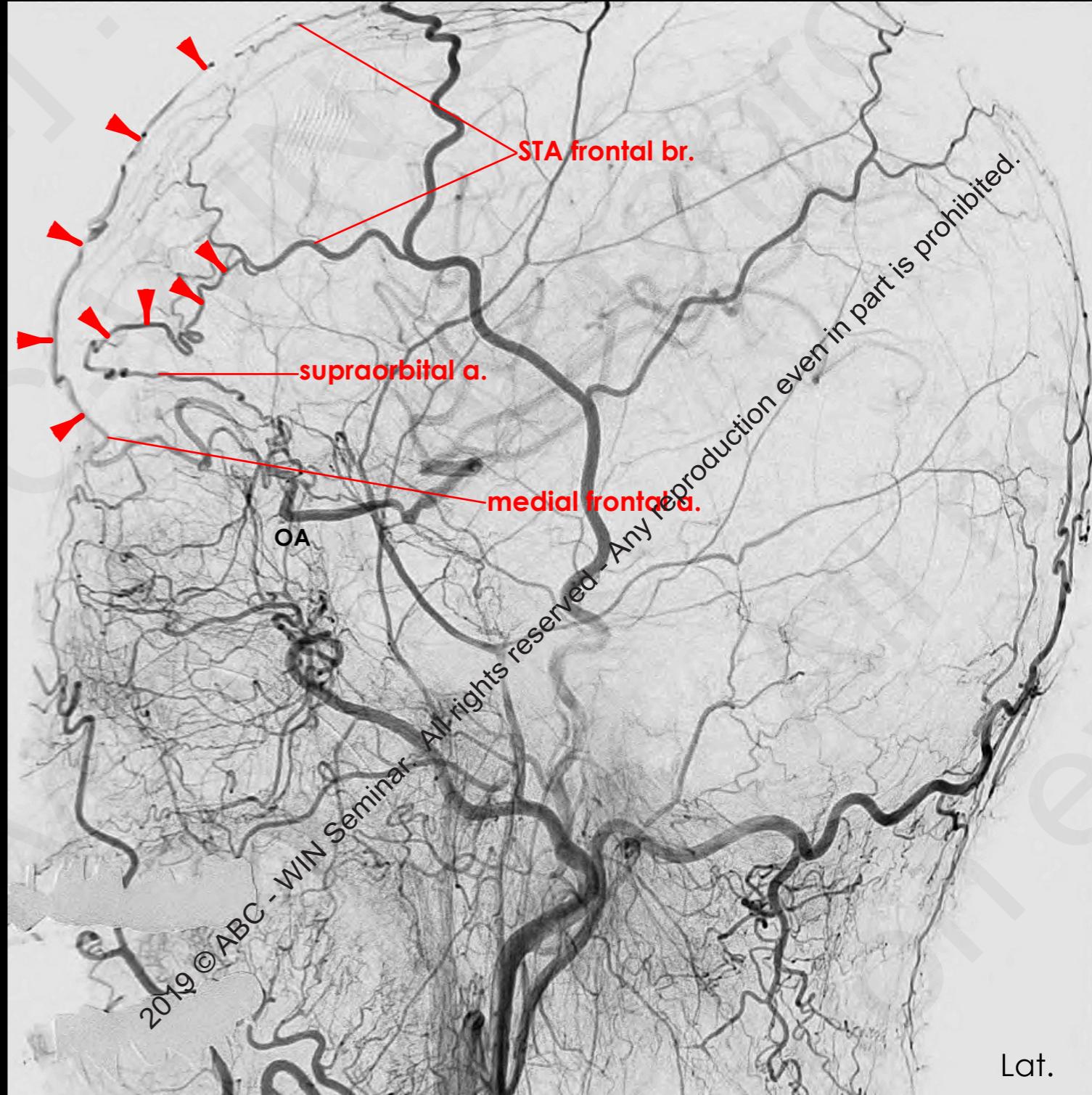
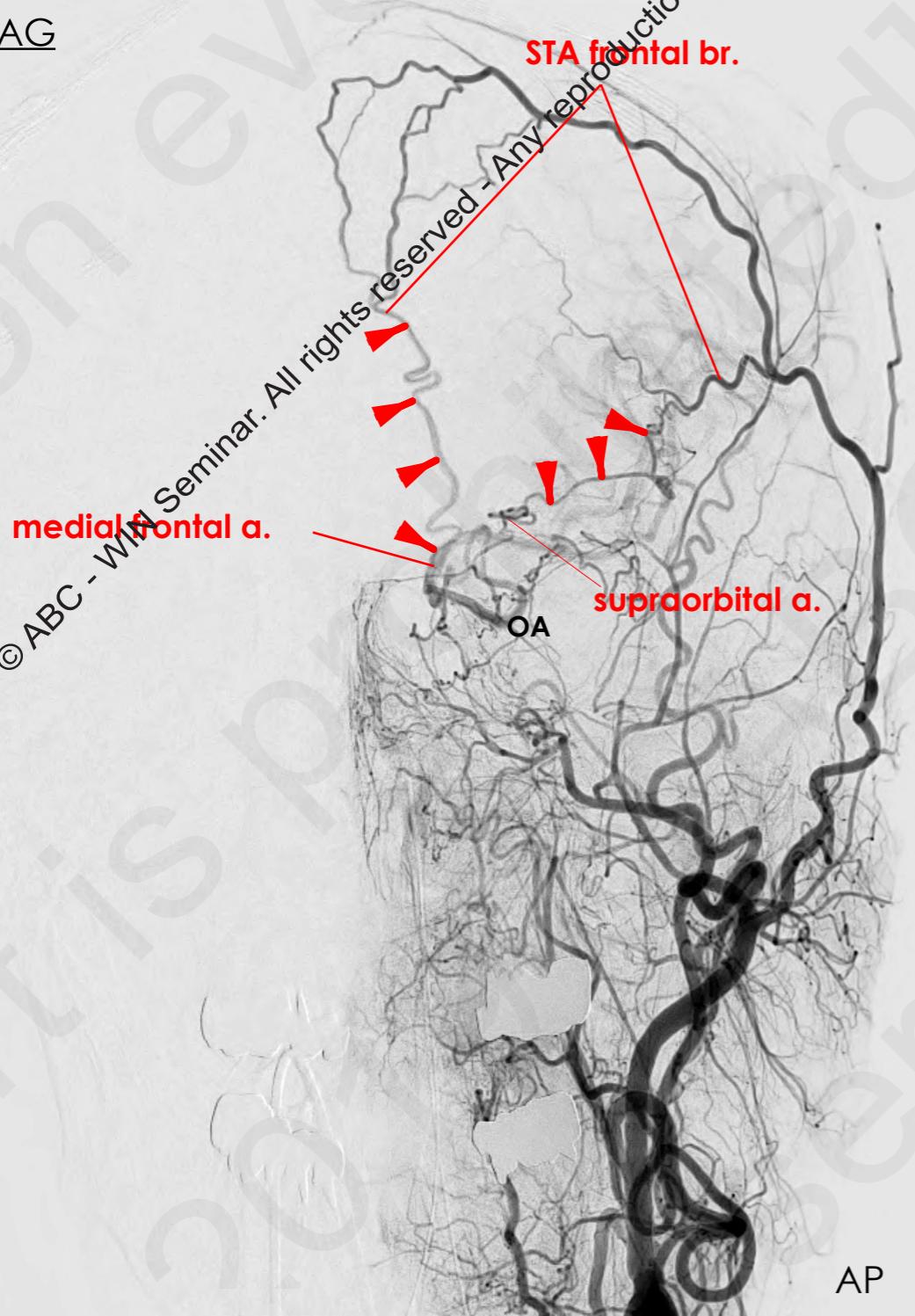
**supraorbital a. – STA frontal br.
medial frontal a. – STA frontal br.**

Lt.CAG

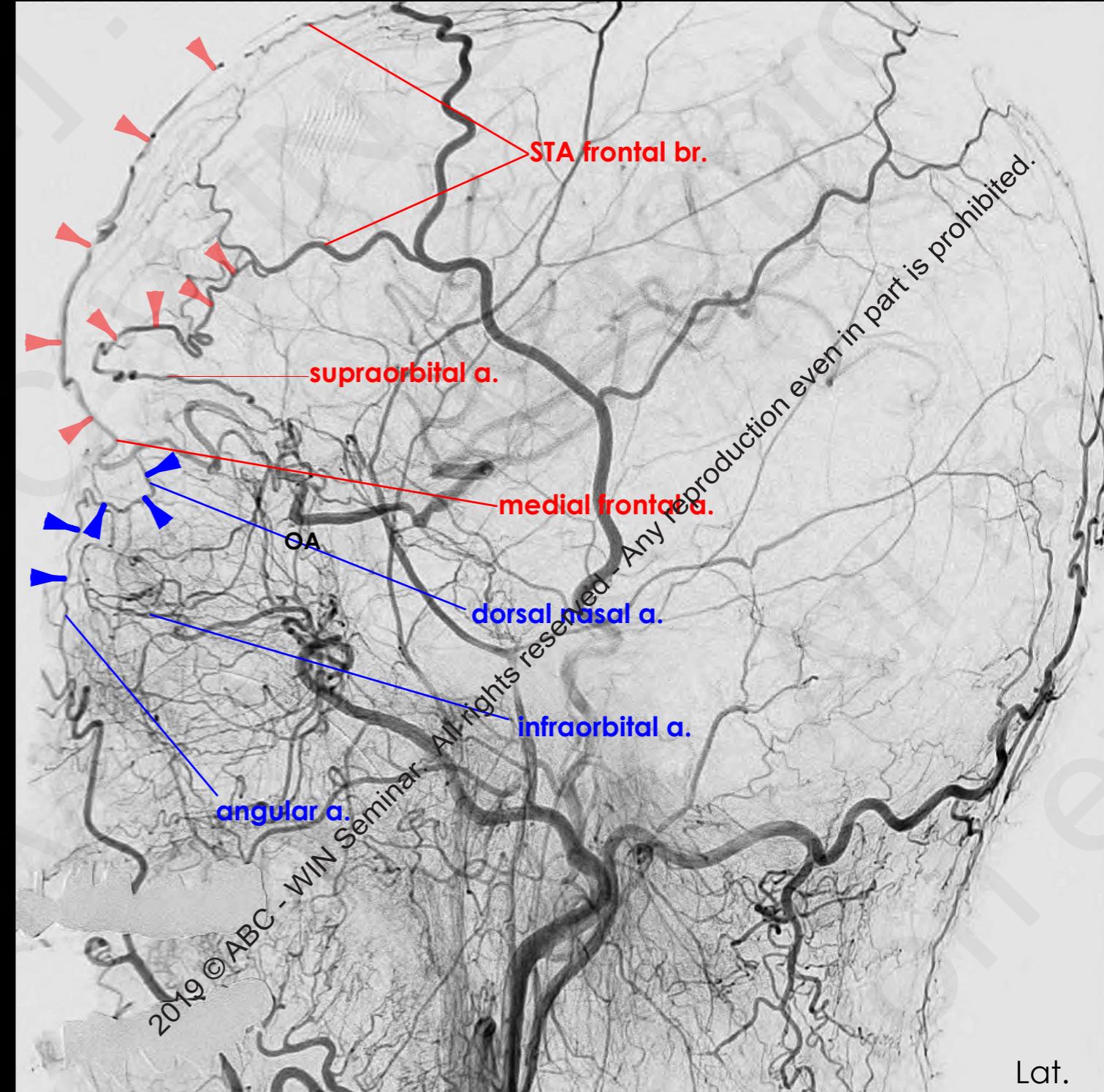
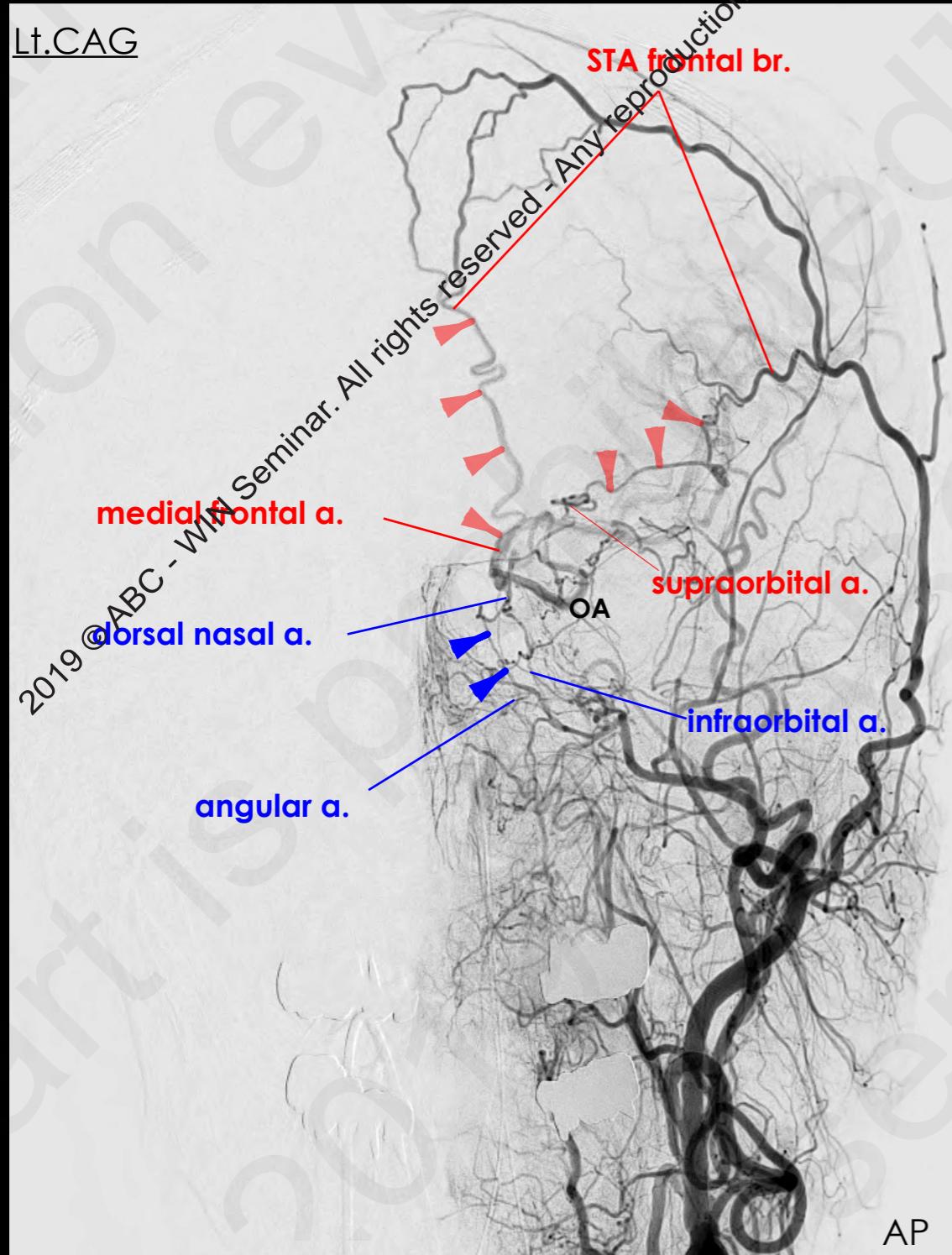


supraorbital a. - STA frontal br. medial frontal a. - STA frontal br.

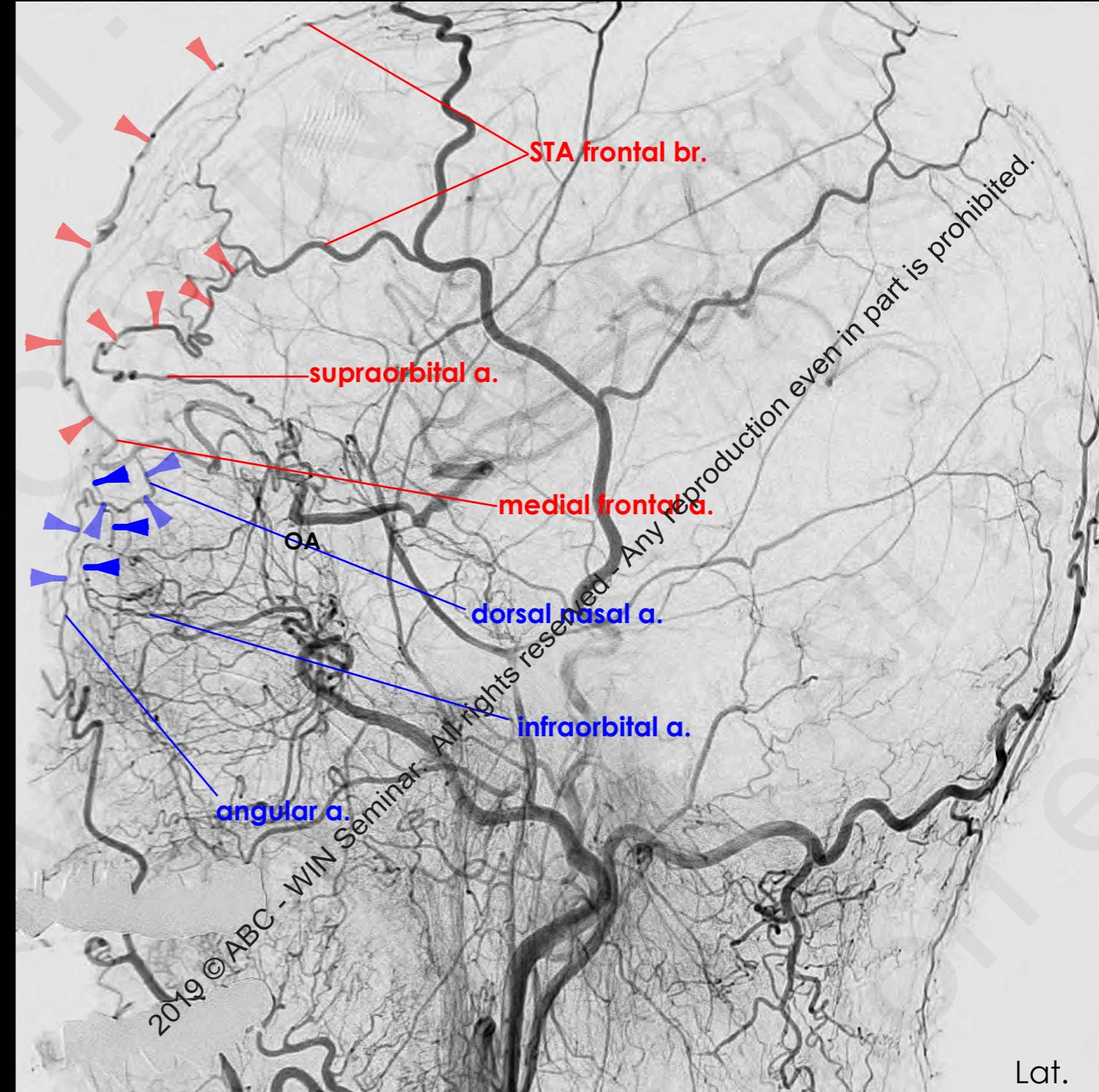
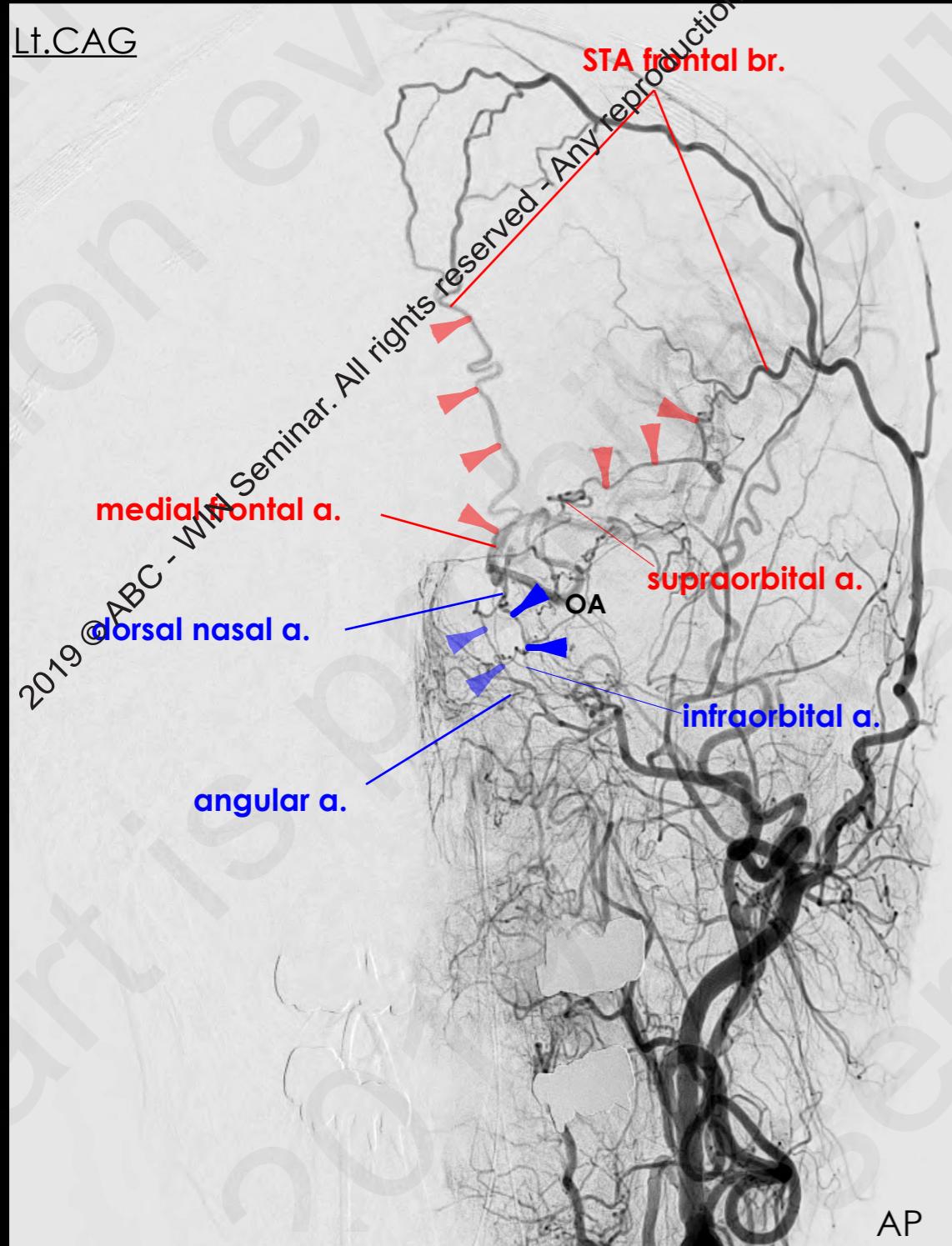
Lt.CAG

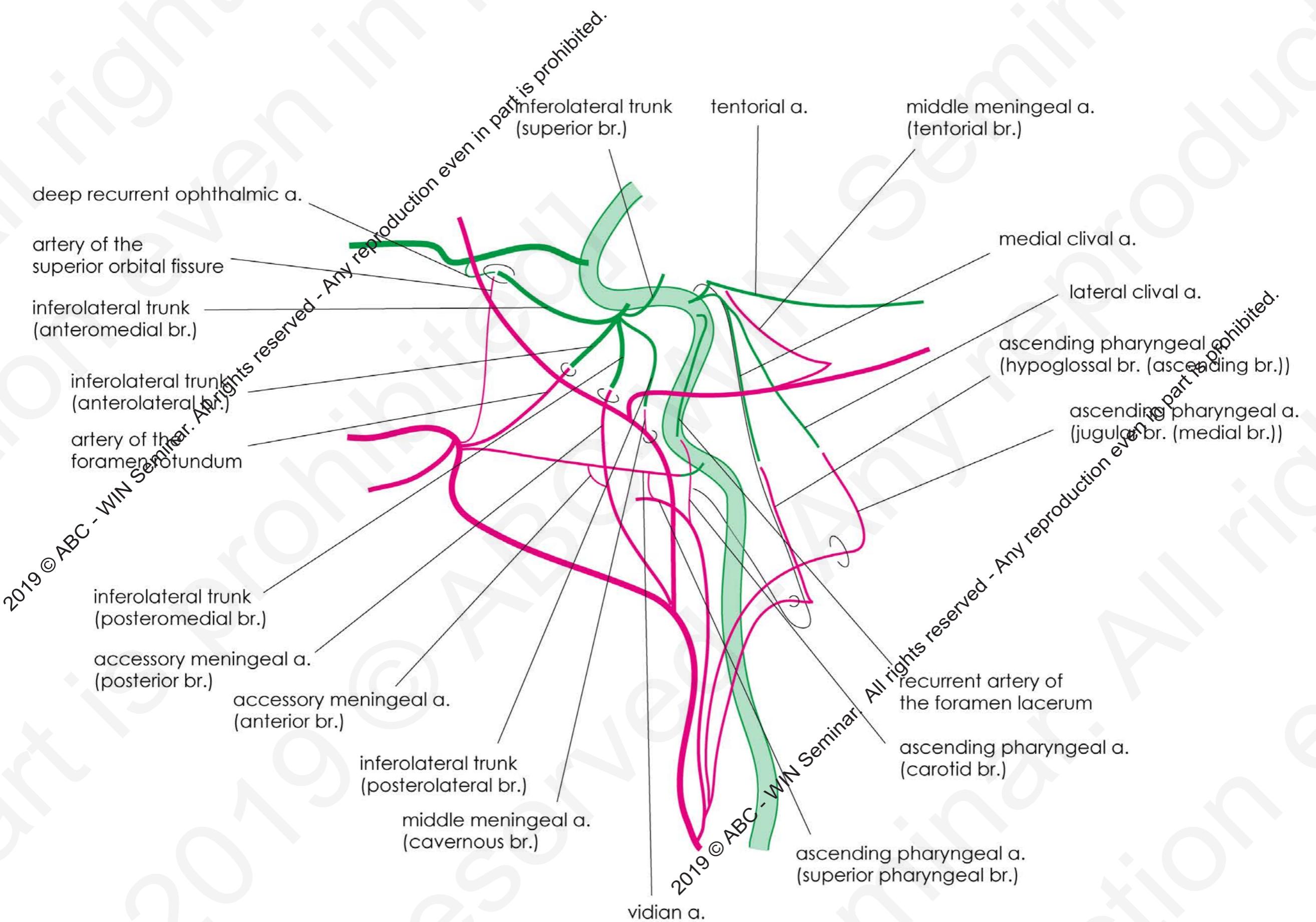


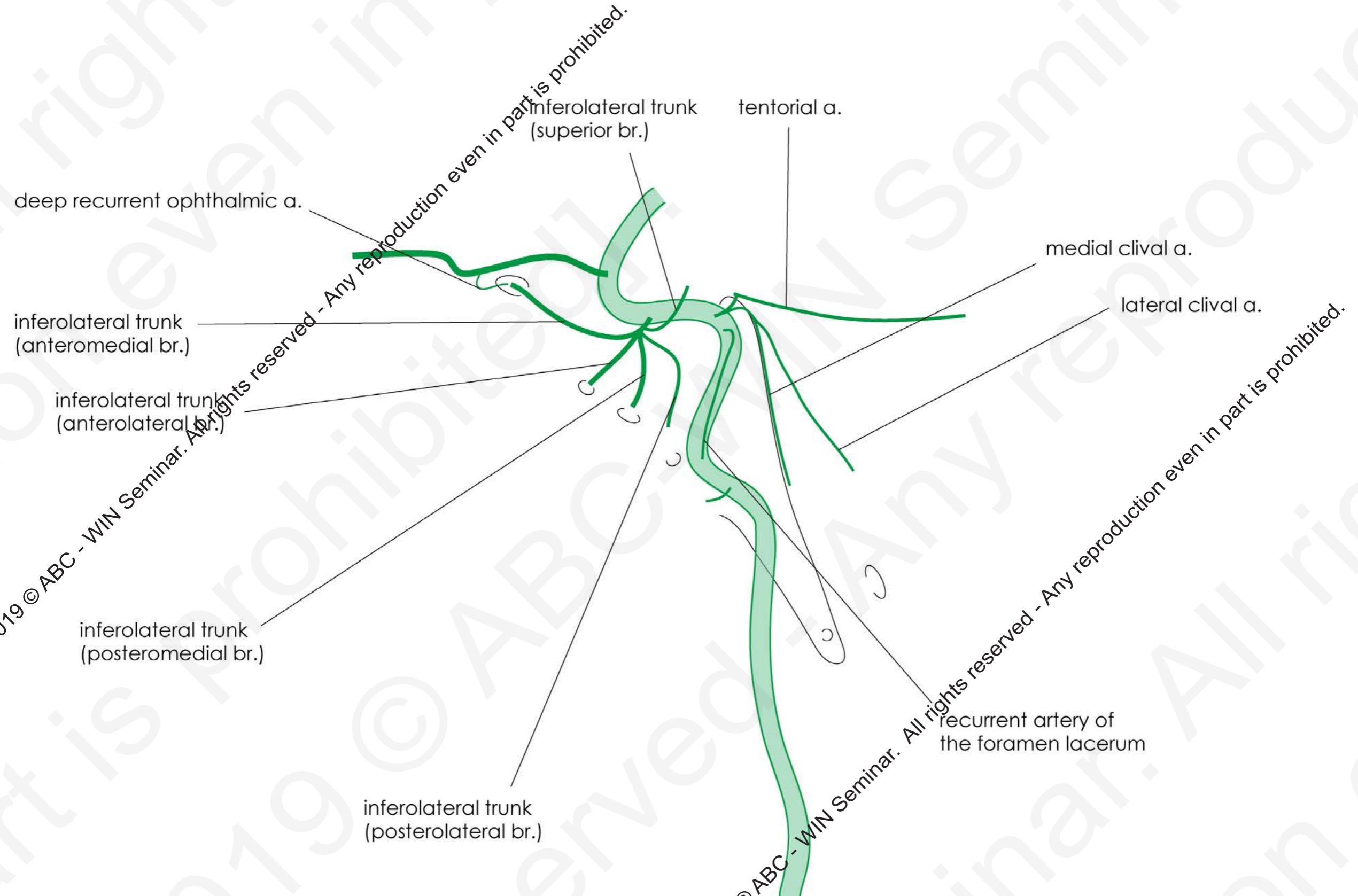
supraorbital a. - STA frontal br.
medial frontal a. - STA frontal br.
dorsal nasal a. - angular a., infraorbital a.

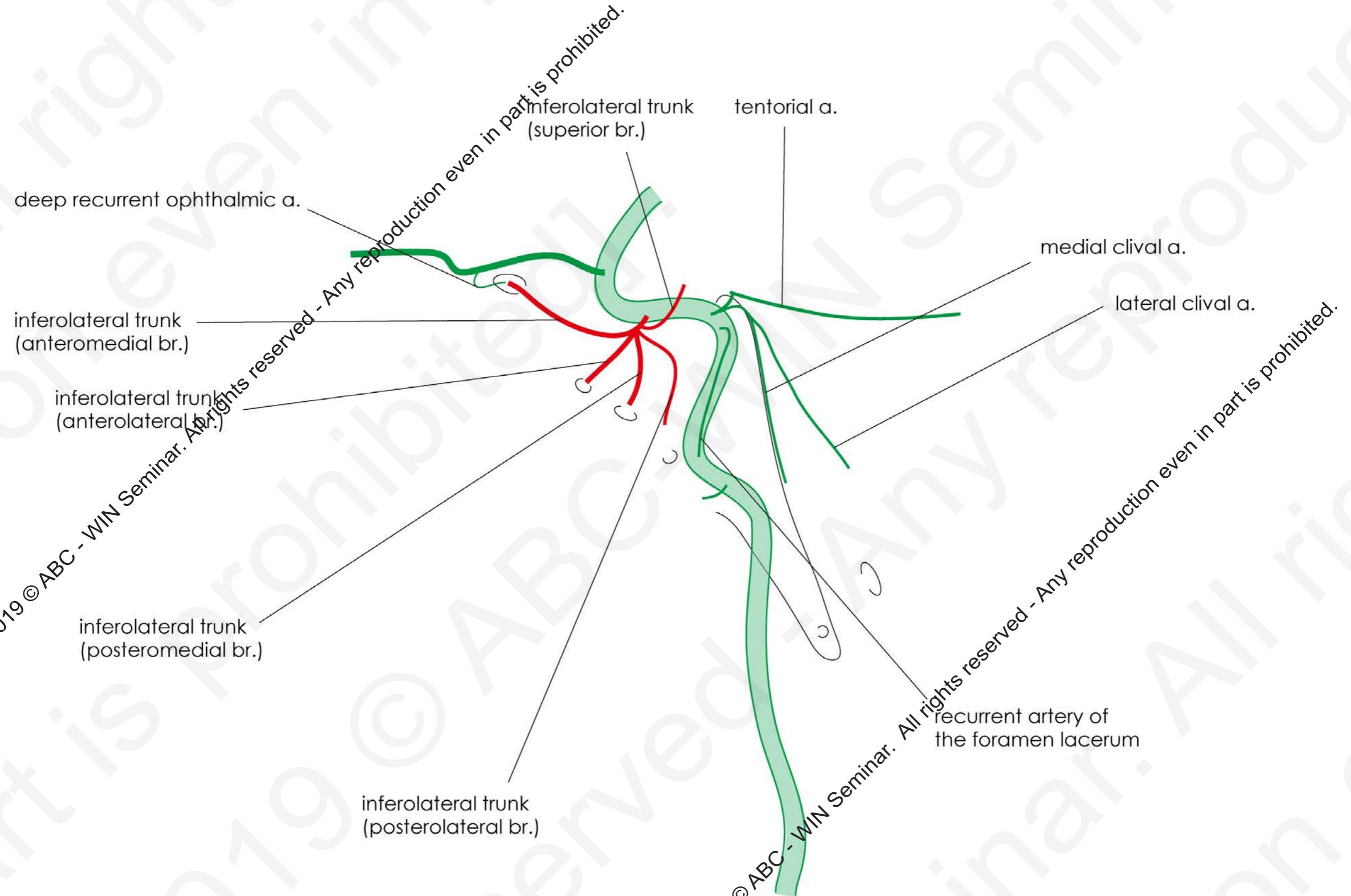


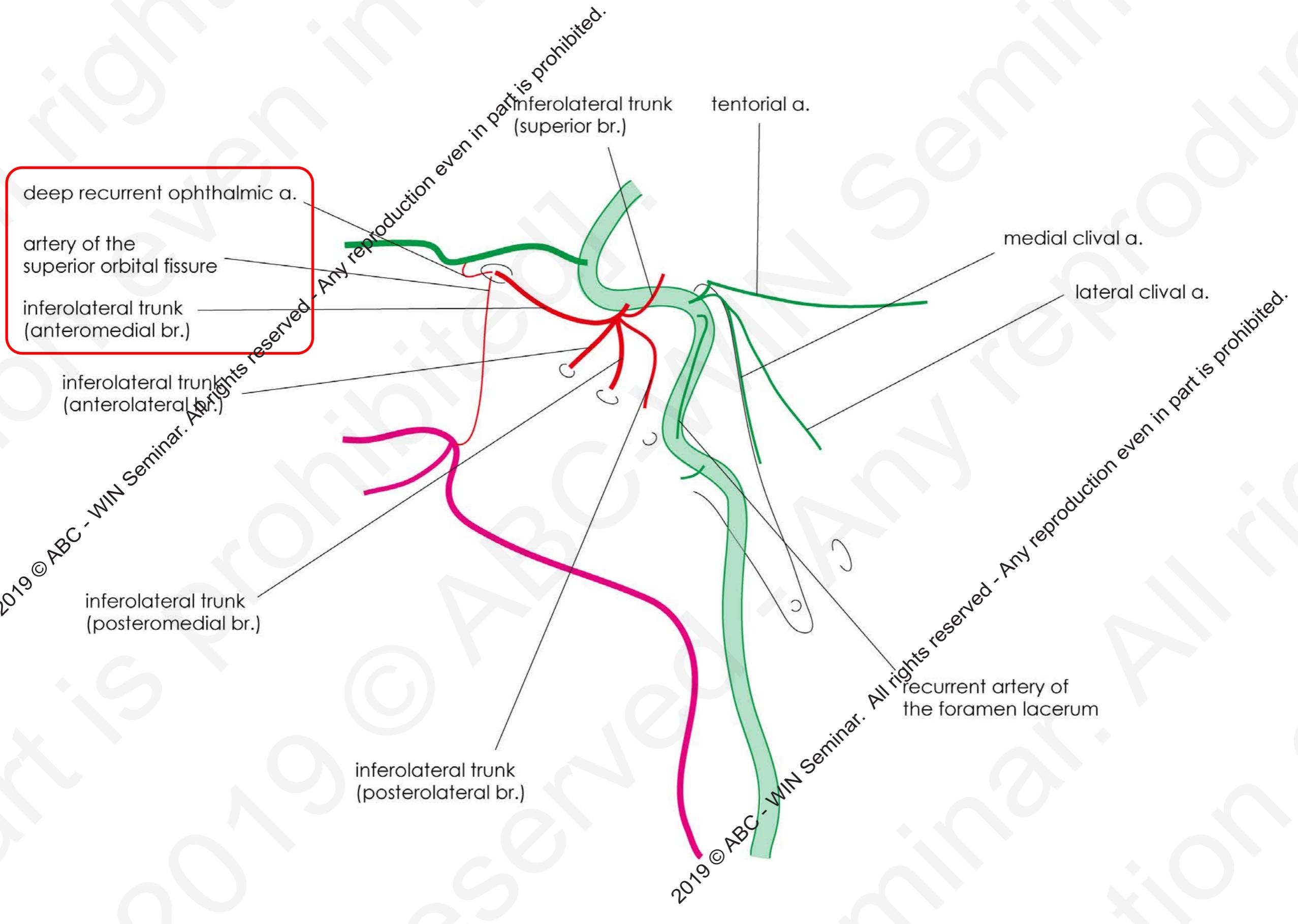
supraorbital a. - STA frontal br.
medial frontal a. - STA frontal br.
dorsal nasal a. - angular a., infraorbital a.

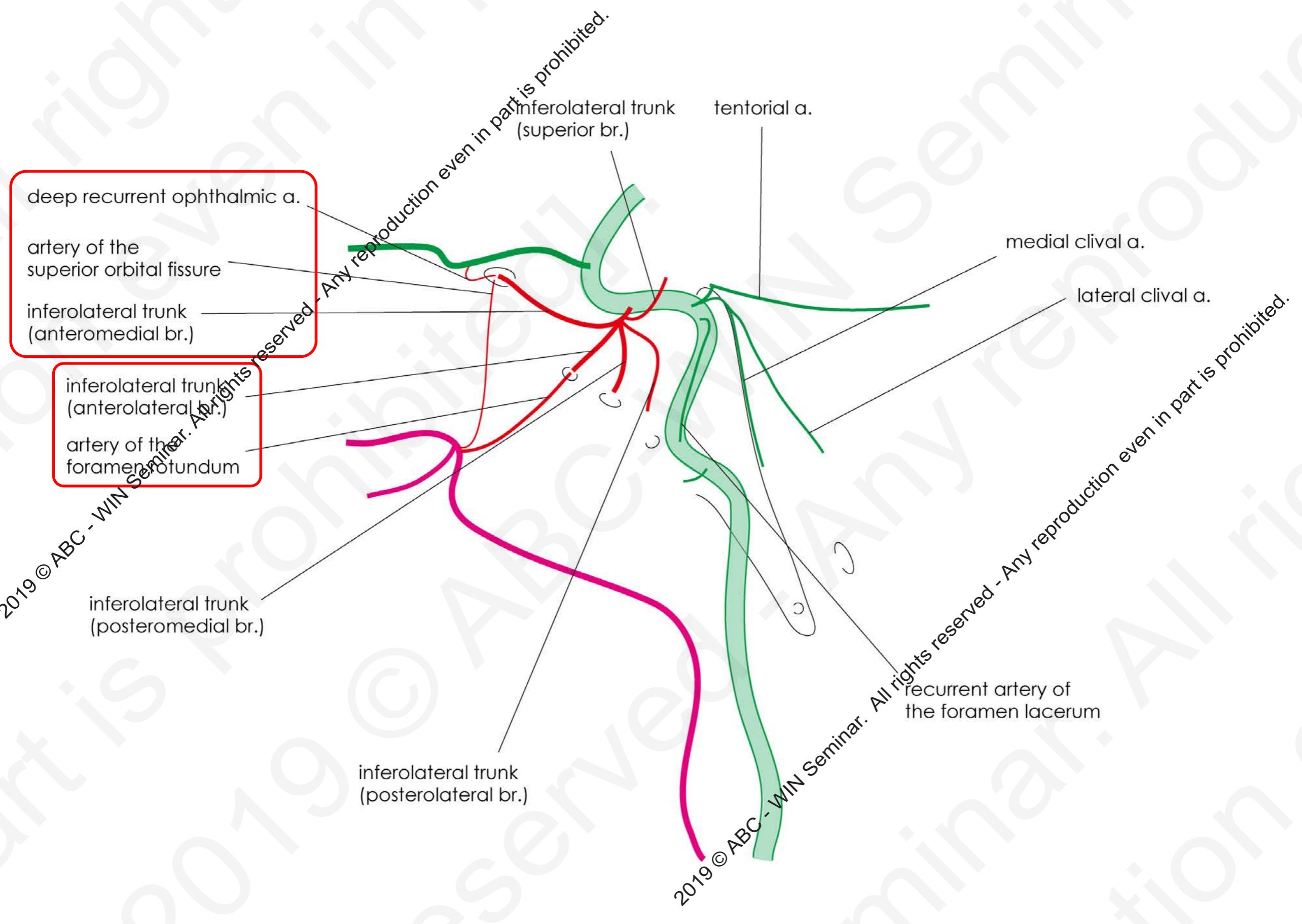


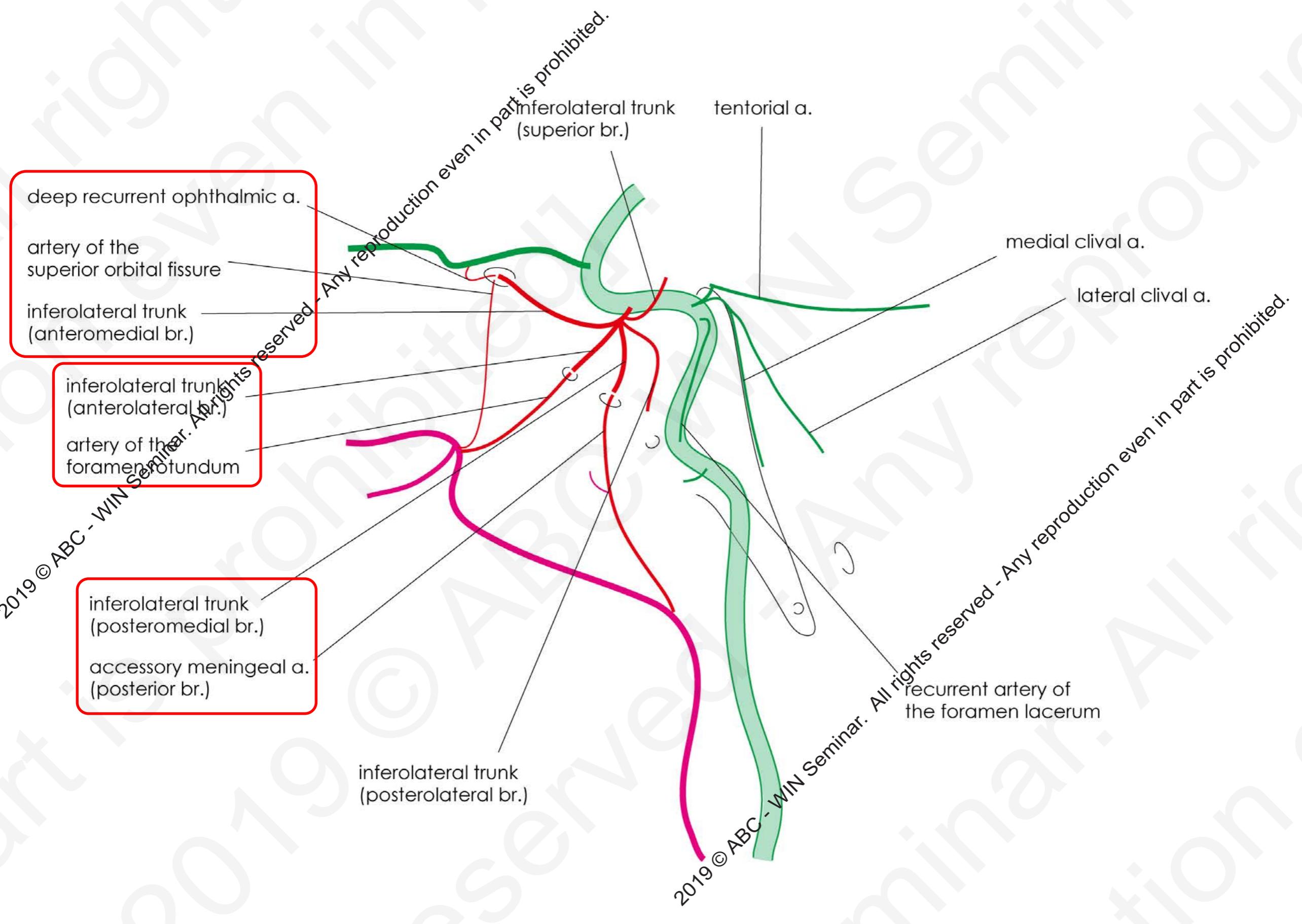


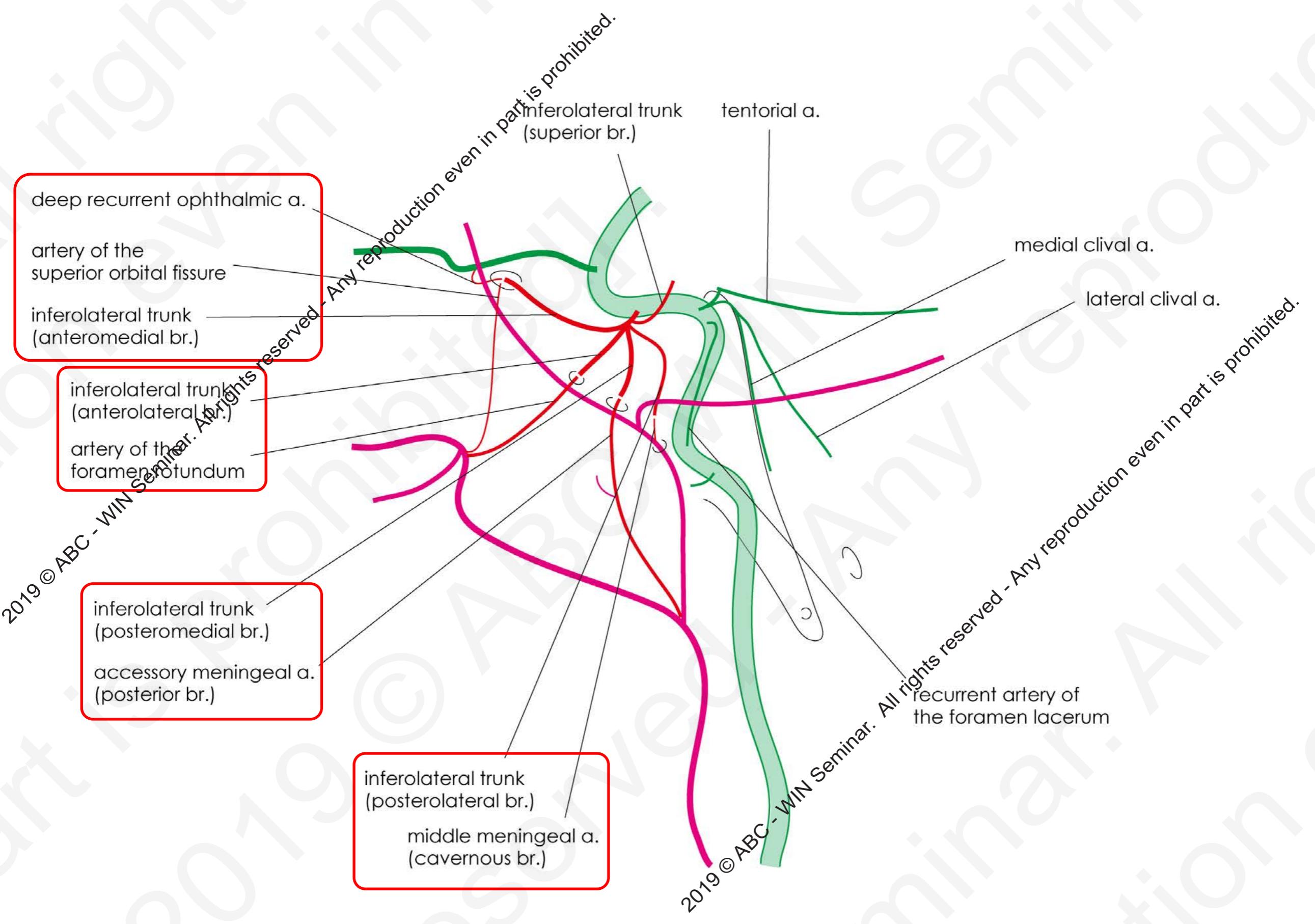








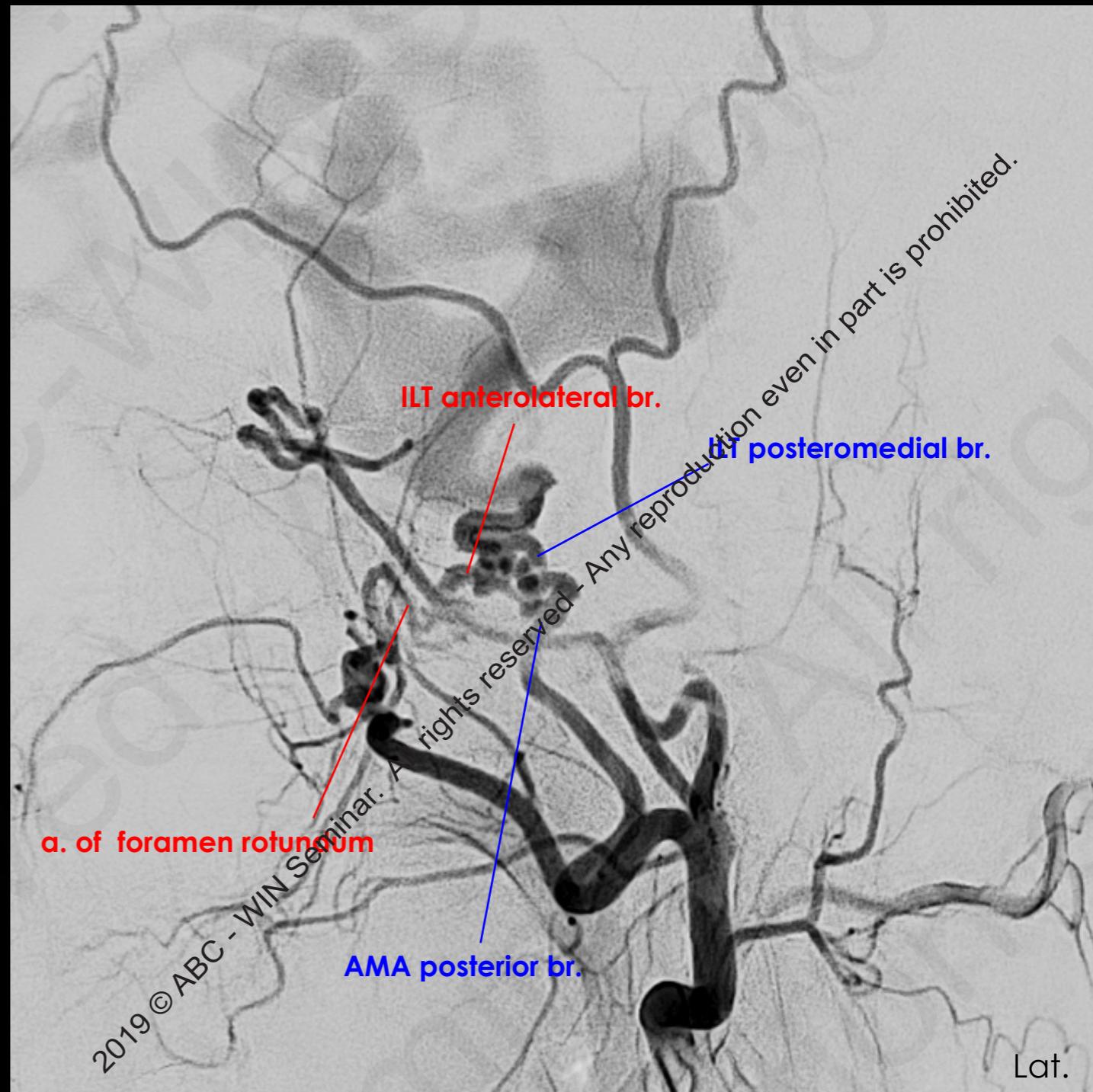
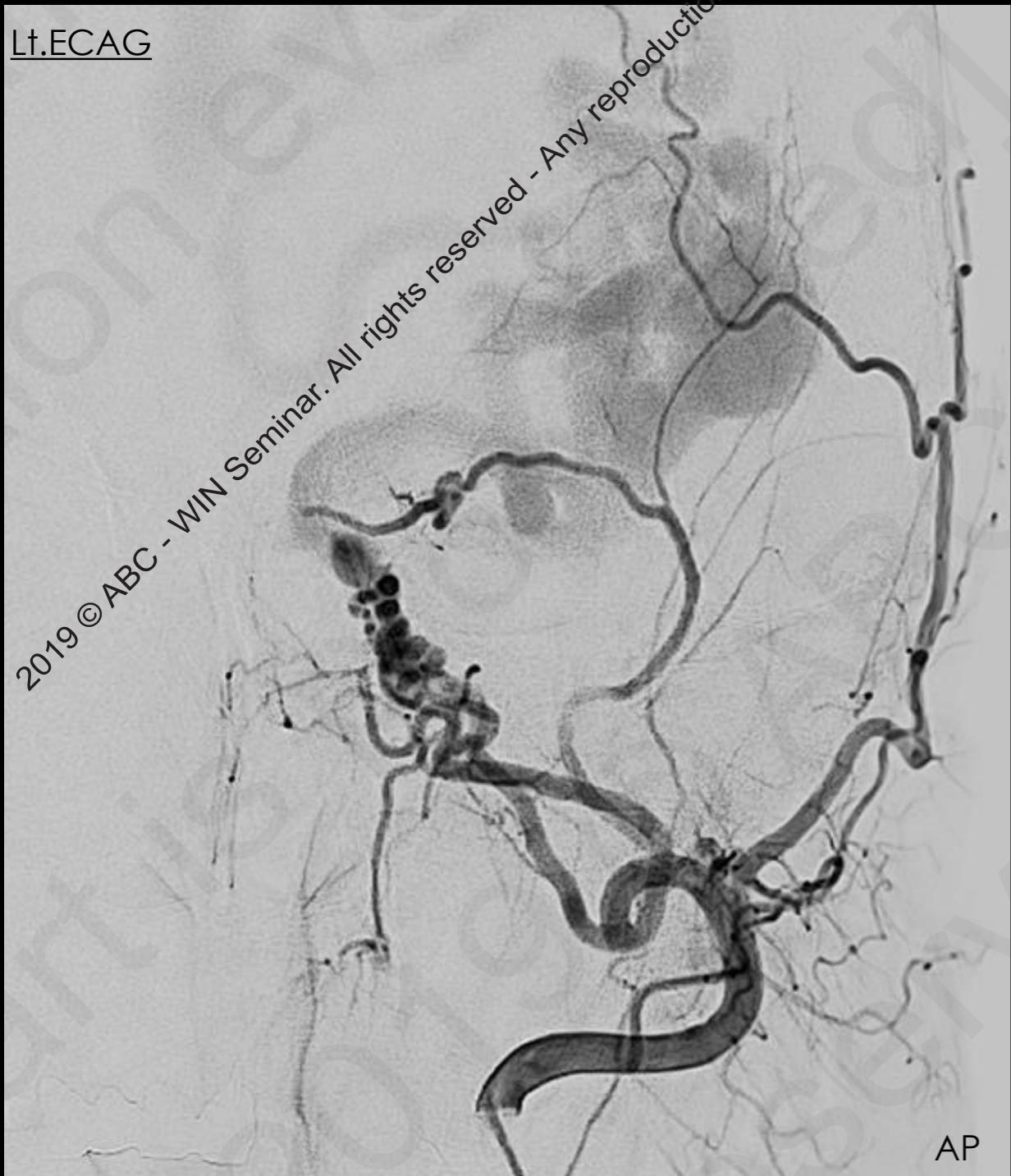




ILT anterolateral br. - artery of foramen rotundum

ILT posteromedial br. - AMA posterior br.

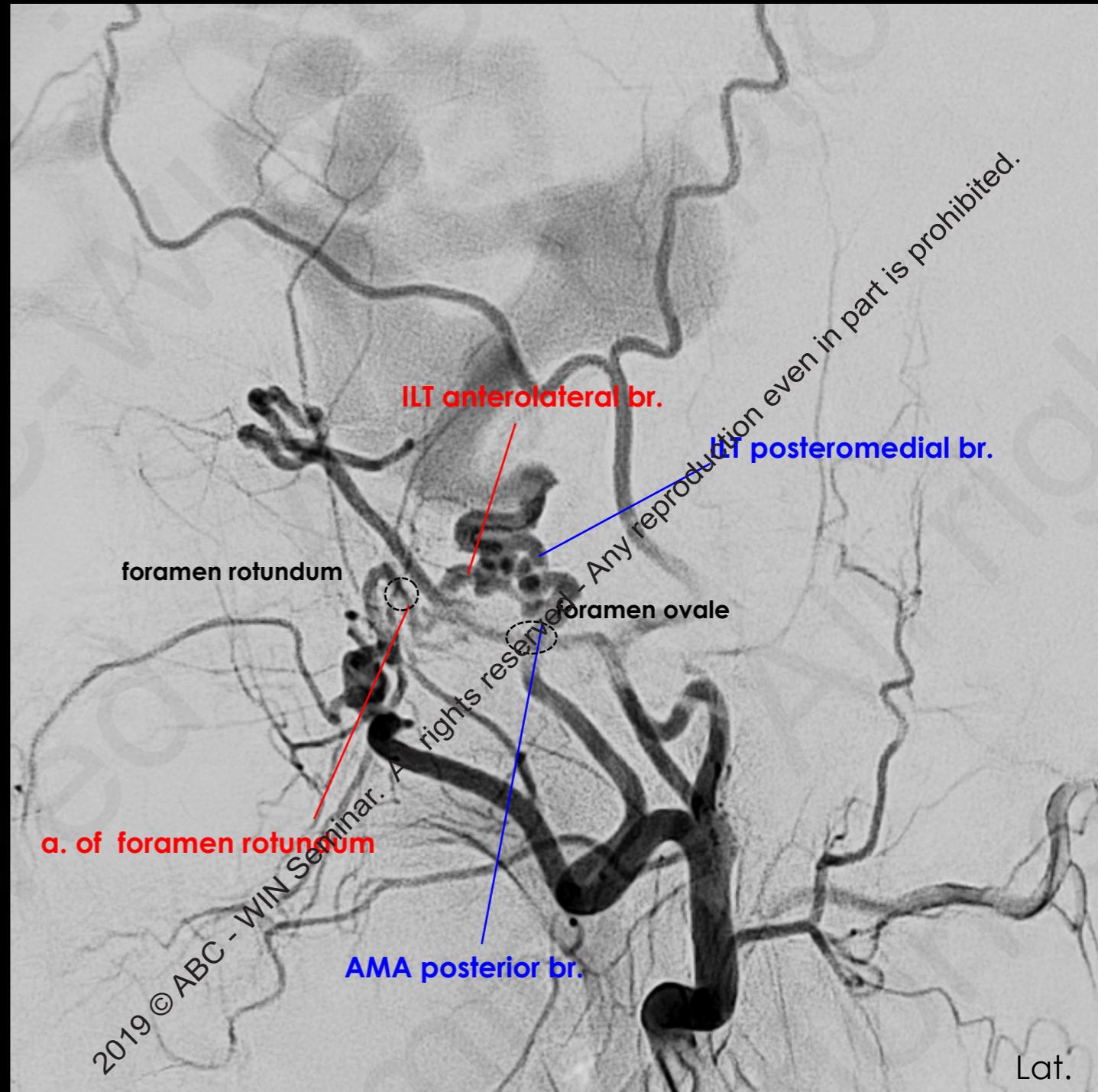
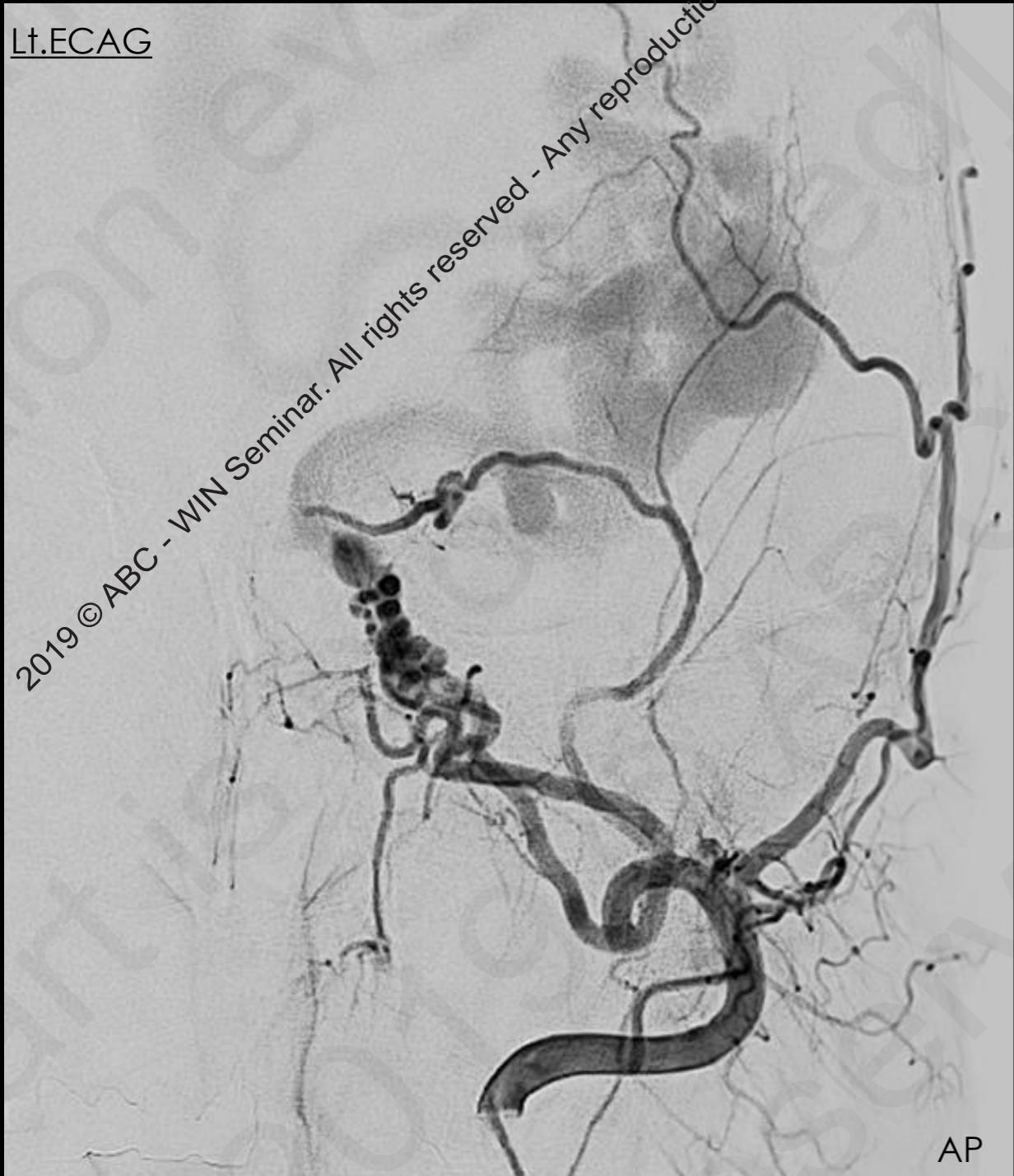
Lt. ECAG



ILT anterolateral br. - artery of foramen rotundum

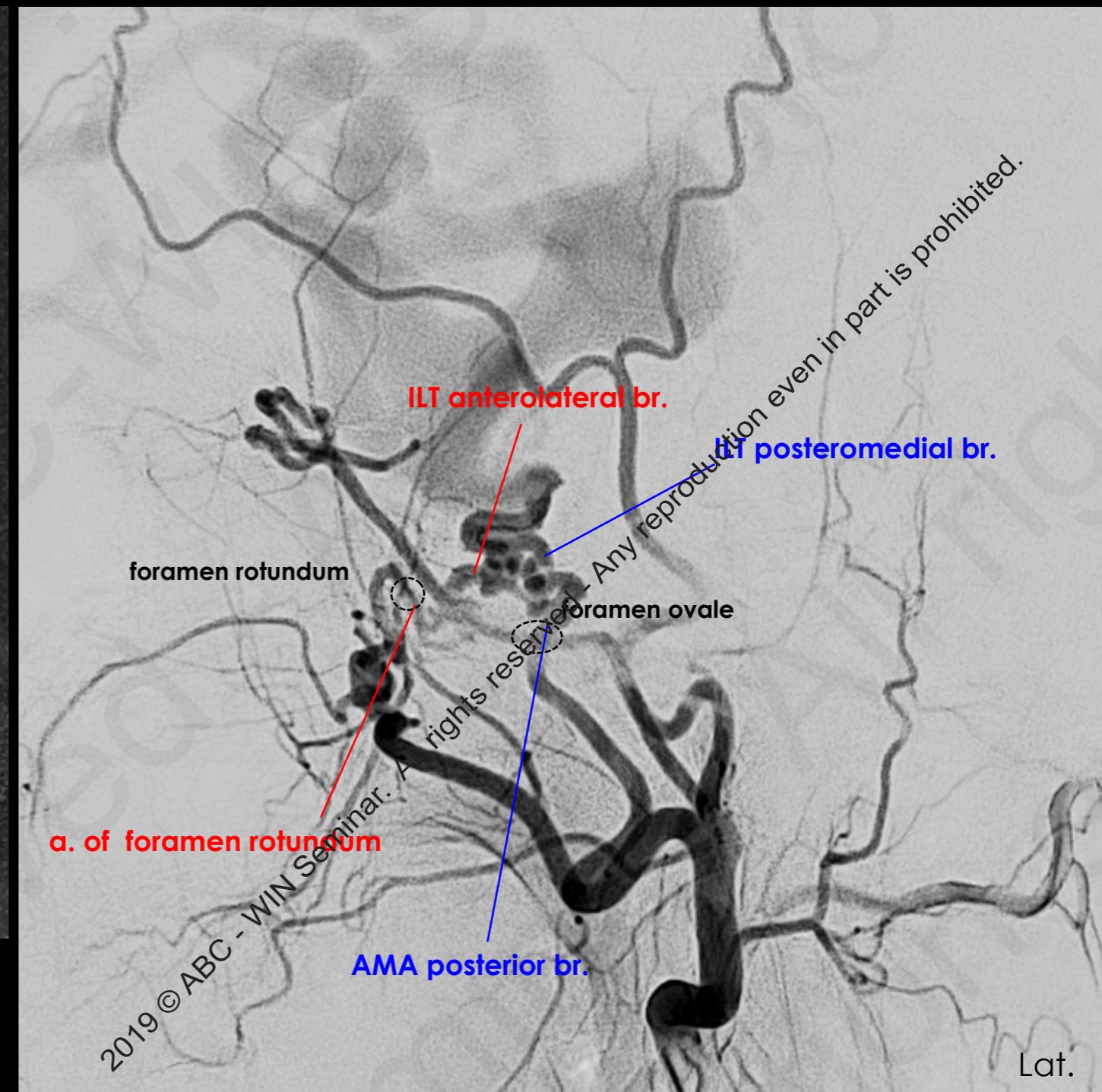
ILT posteromedial br. - AMA posterior br.

Lt. ECAG



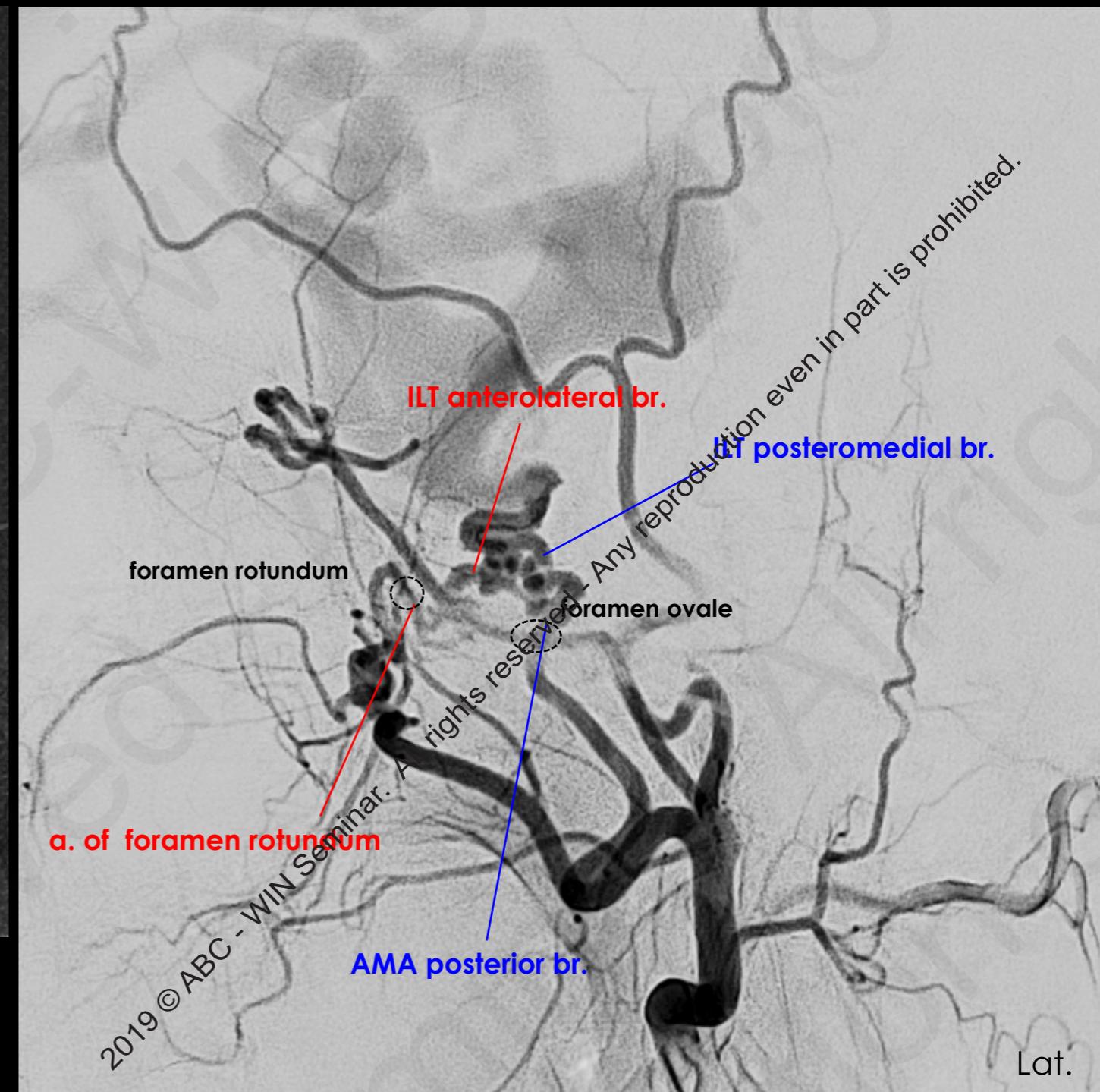
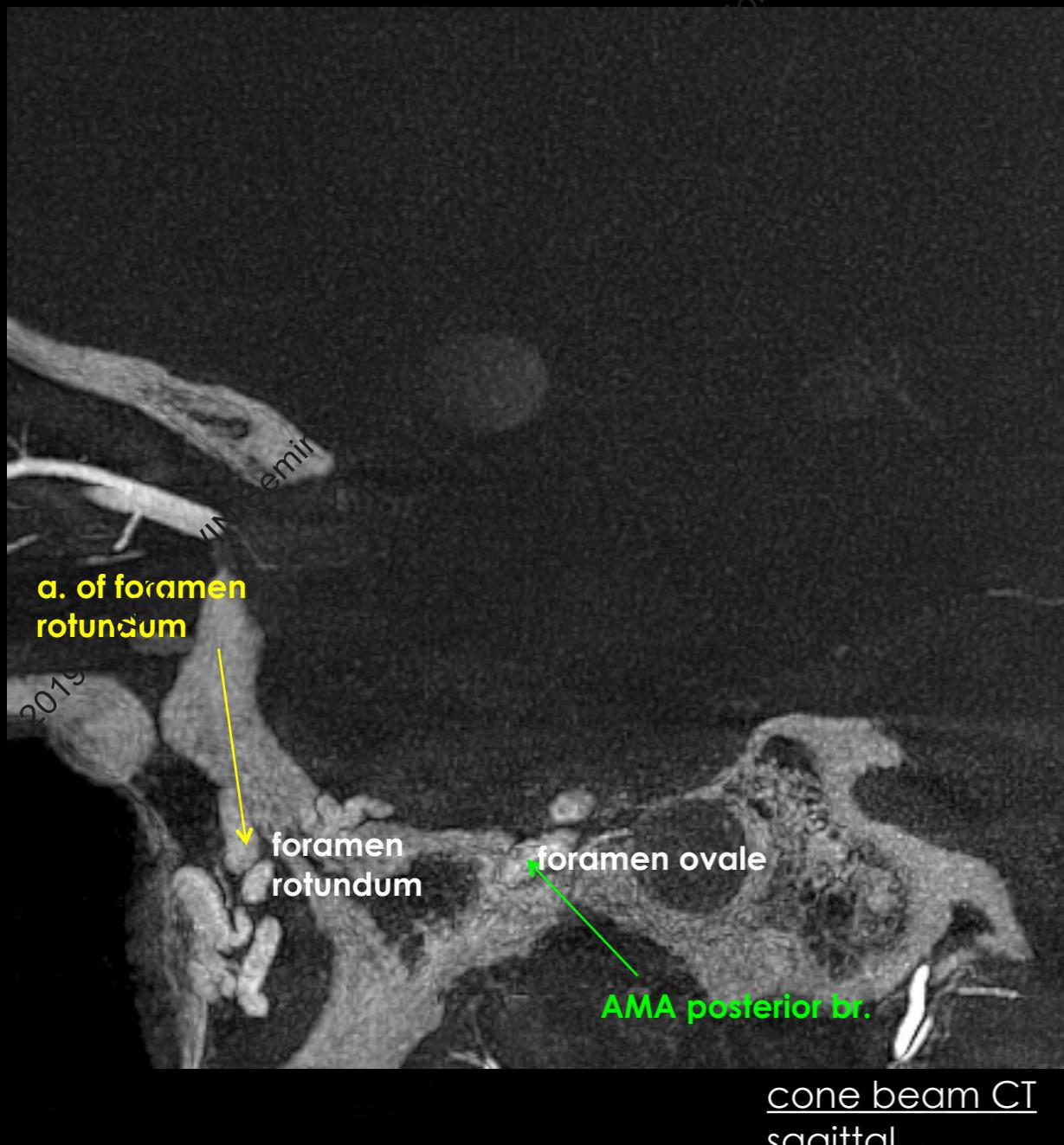
ILT anterolateral br. - artery of foramen rotundum

ILT posteromedial br. - **AMA posterior br.**



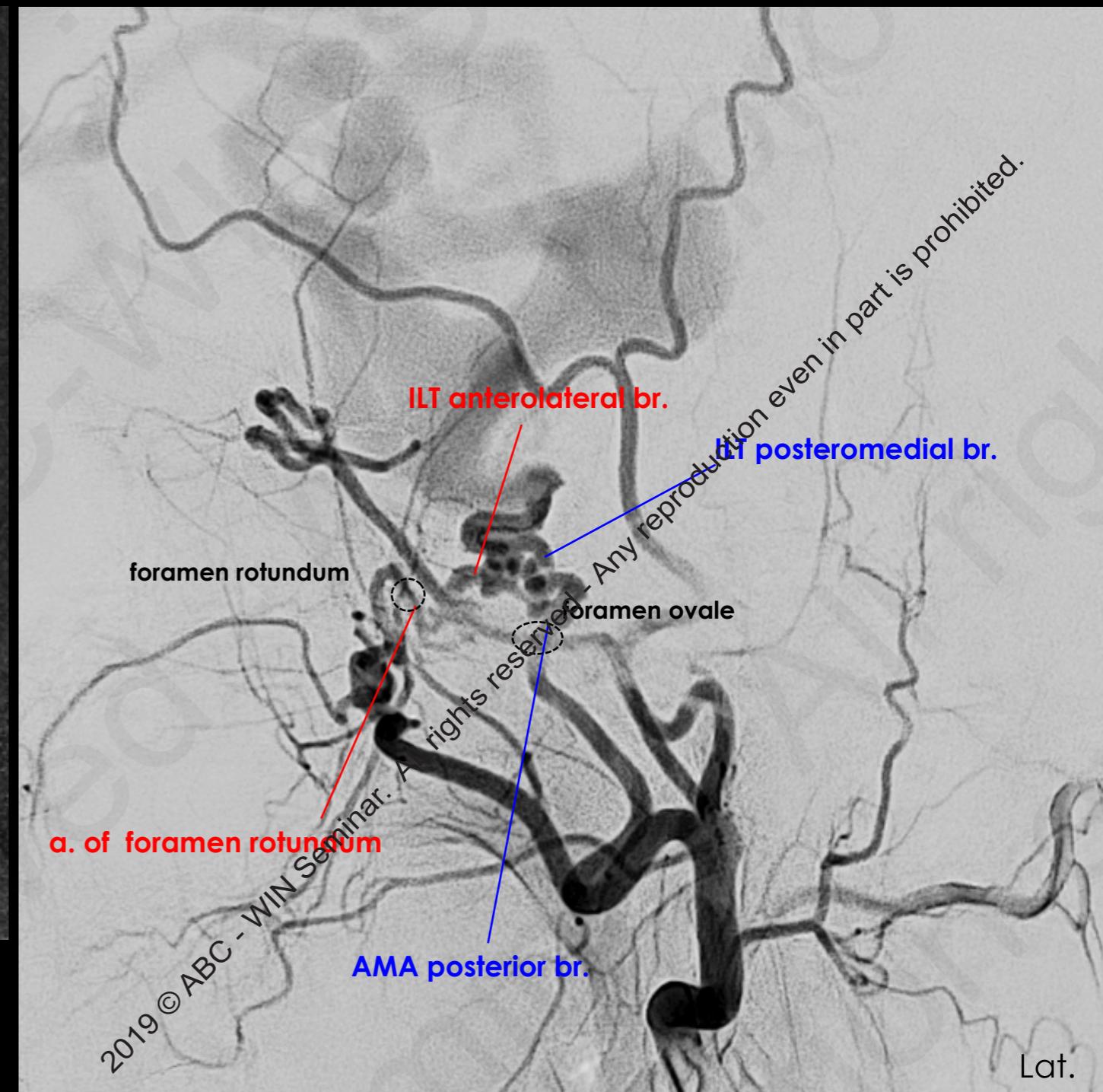
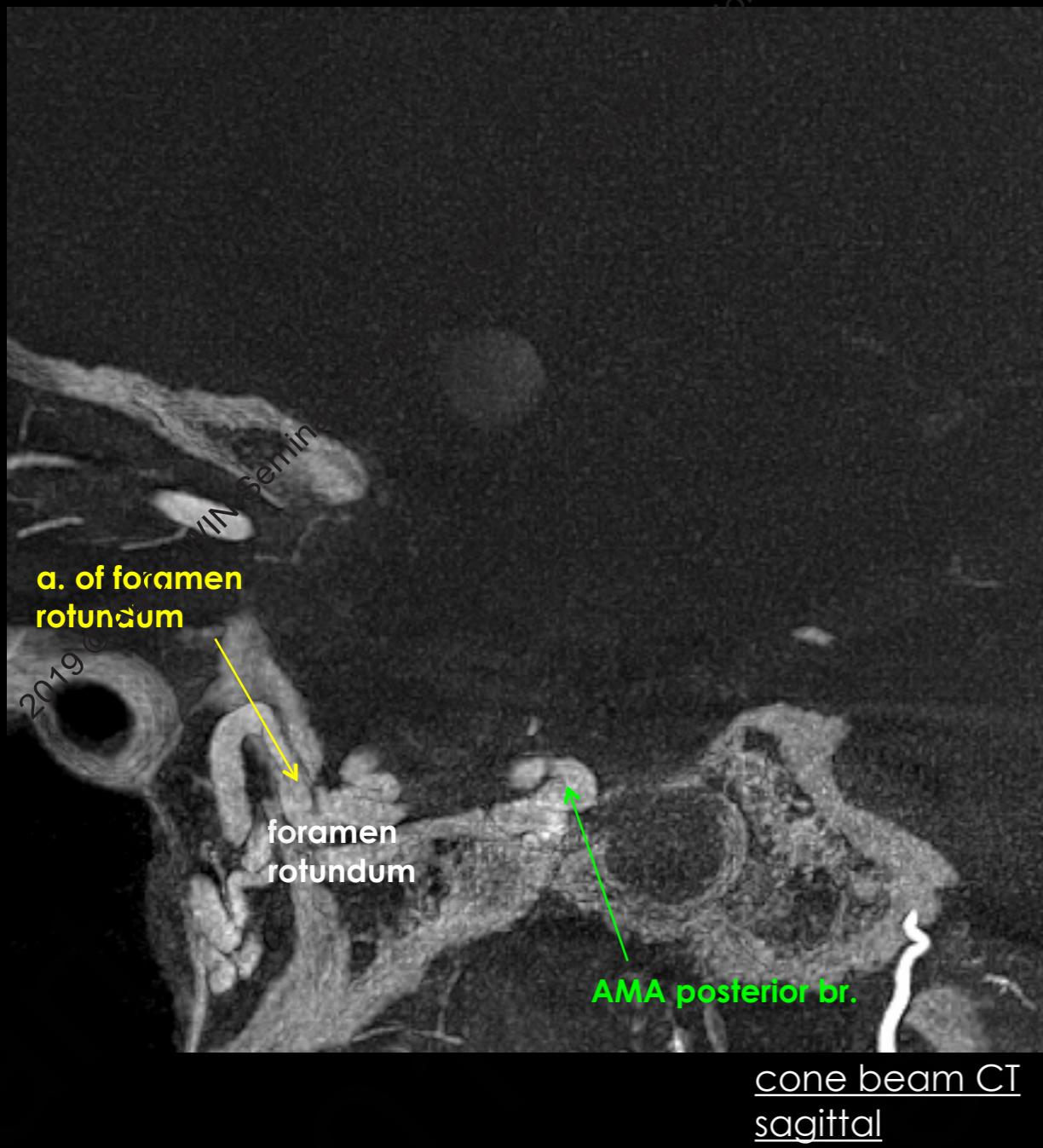
ILT anterolateral br. - artery of foramen rotundum

ILT posteromedial br. - AMA posterior br.



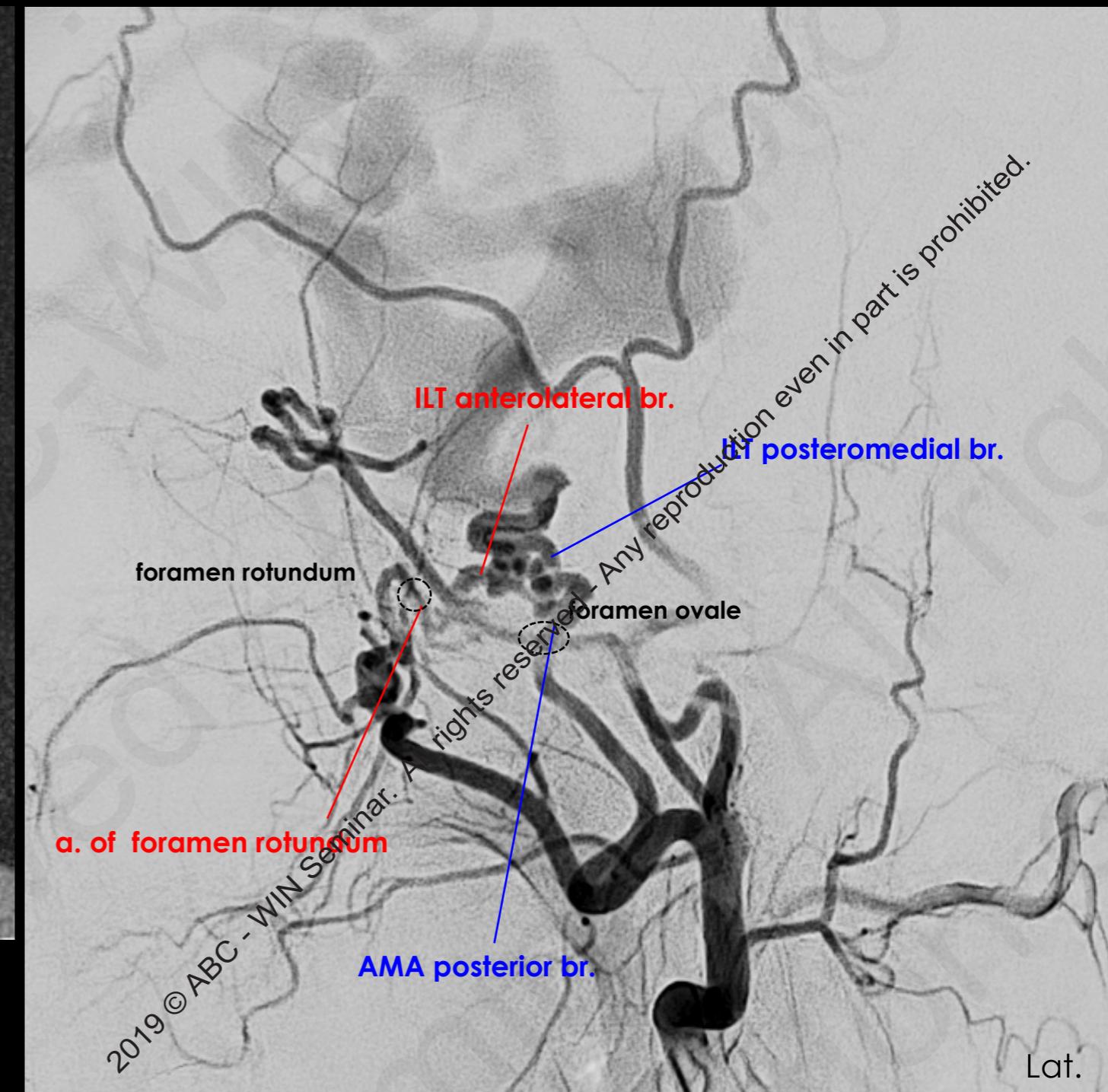
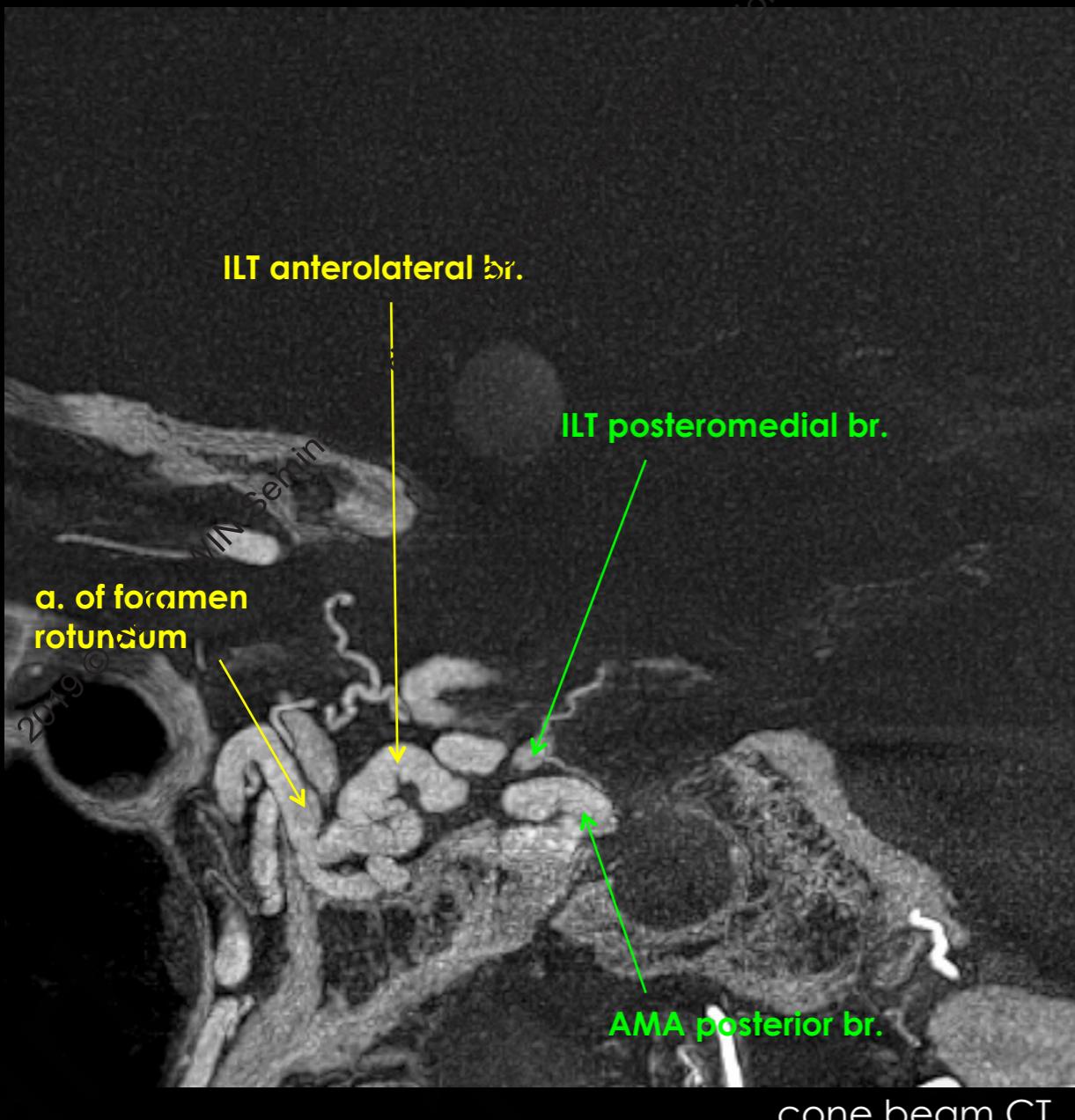
ILT anterolateral br. - artery of foramen rotundum

ILT posteromedial br. - AMA posterior br.



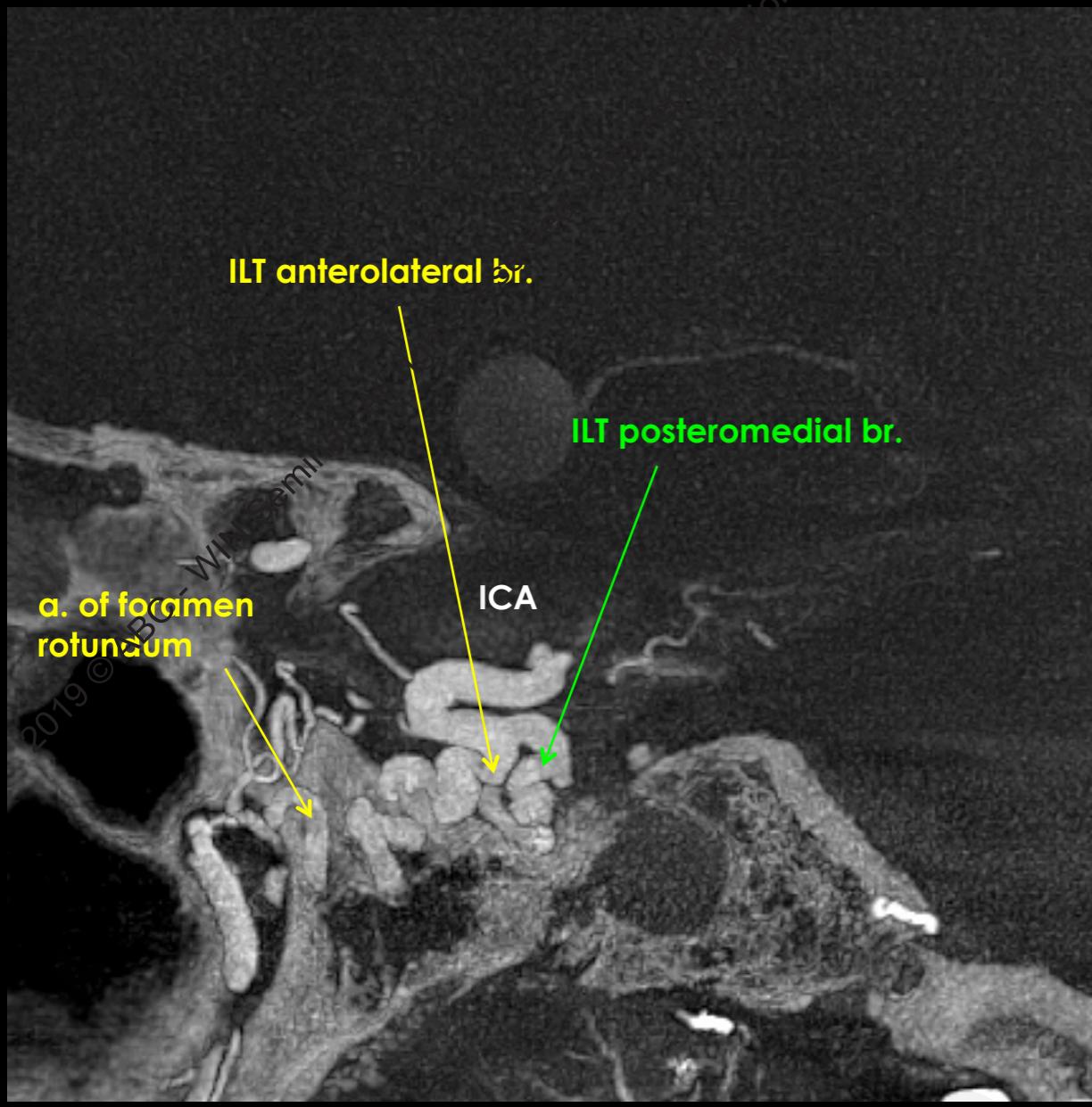
ILT anterolateral br. - artery of foramen rotundum

ILT posteromedial br. - **AMA posterior br.**

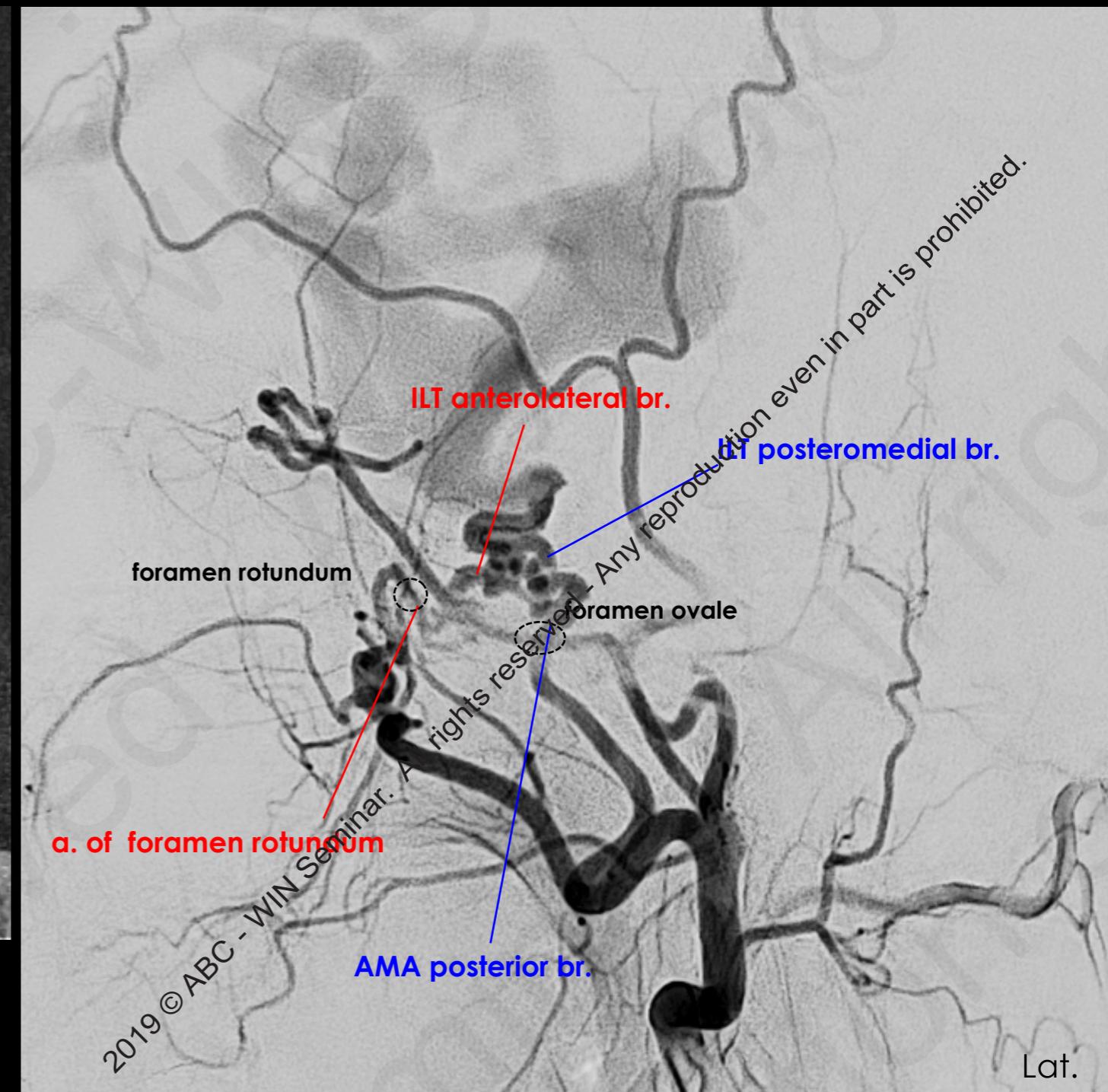


ILT anterolateral br. - artery of foramen rotundum

ILT posteromedial br. - **AMA posterior br.**

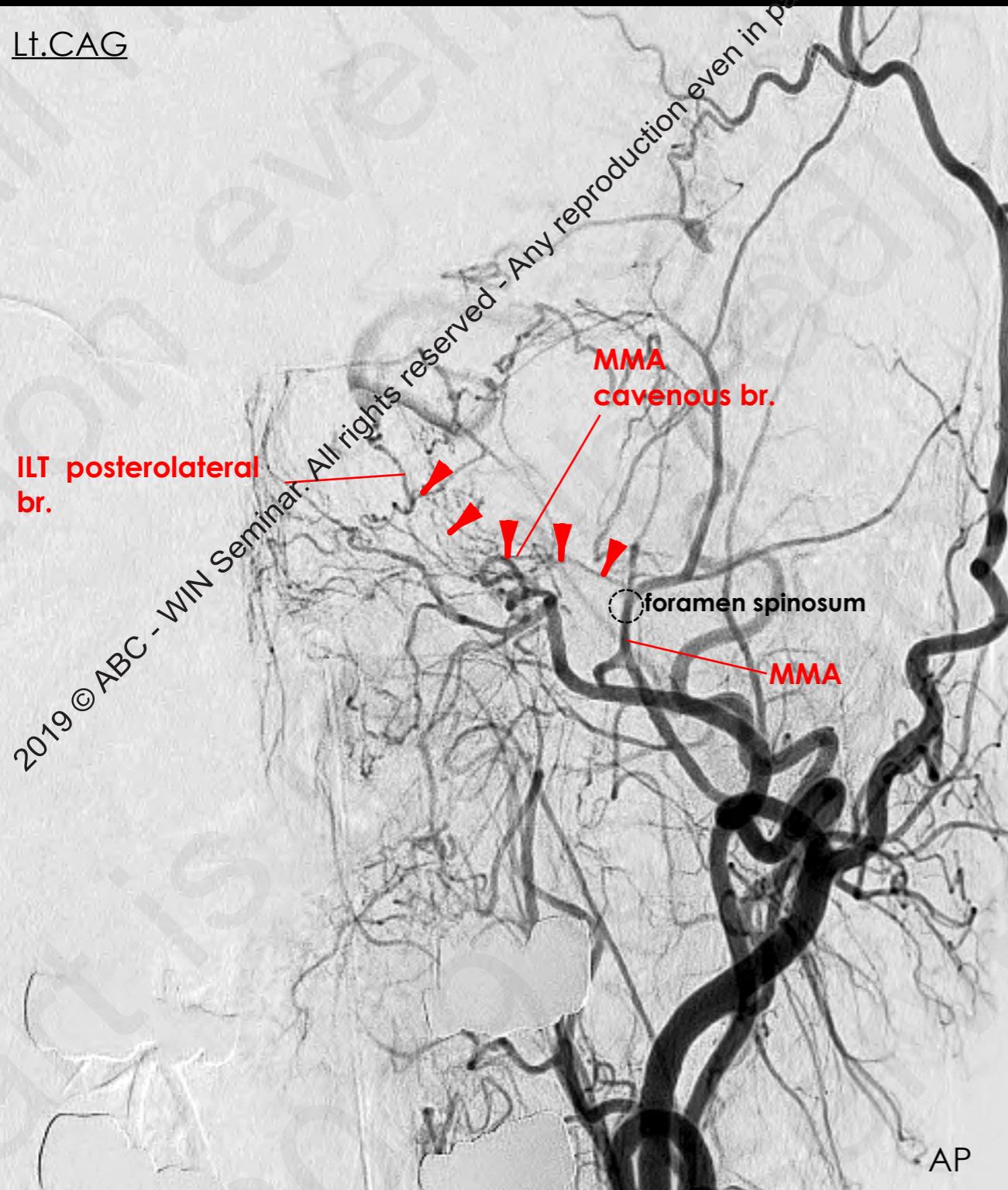


cone beam CT
sagittal



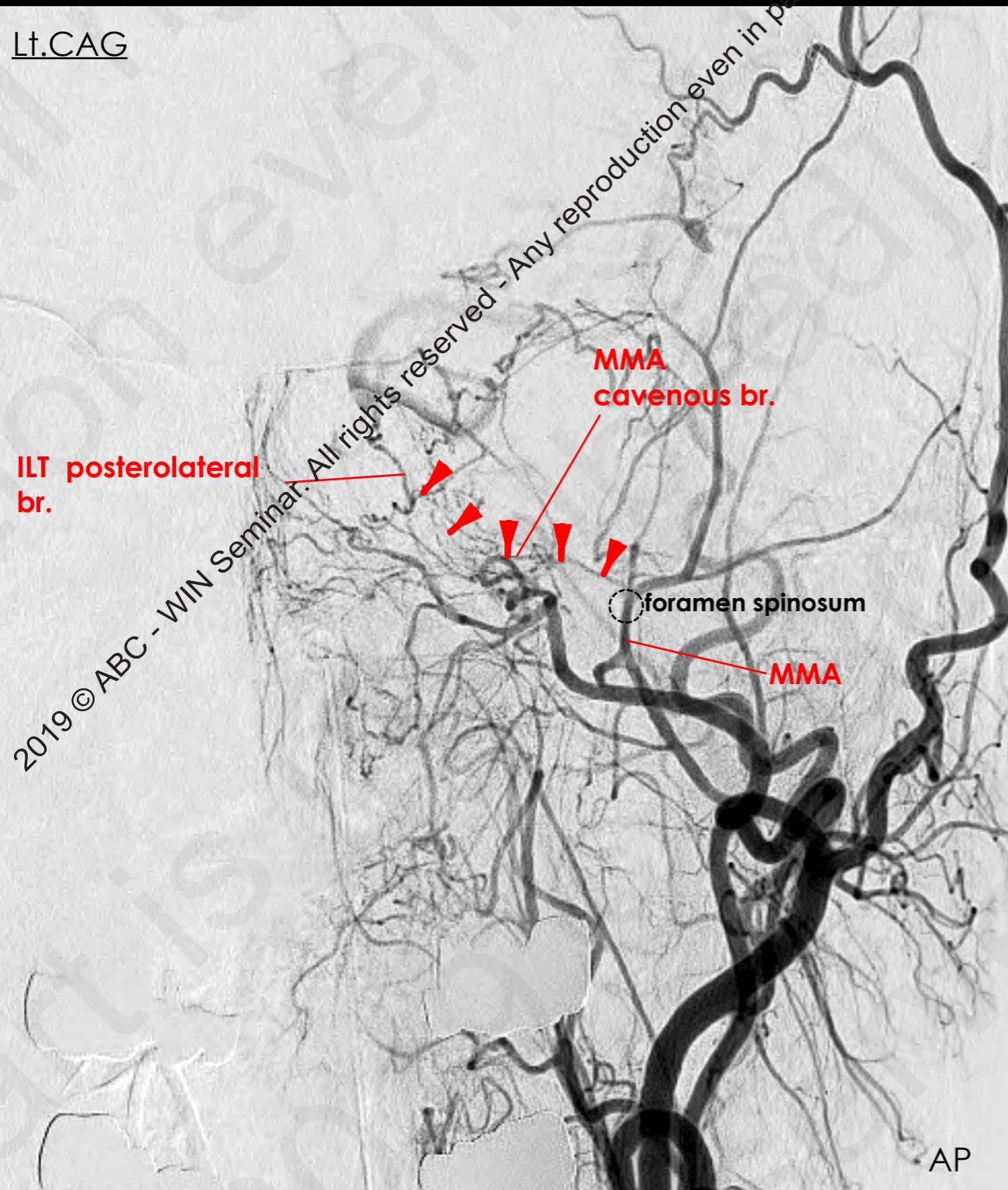
ILT posterolateral br. - MMA cavernous br.

Lt.CAG



ILT posterolateral br. - MMA cavernous br.

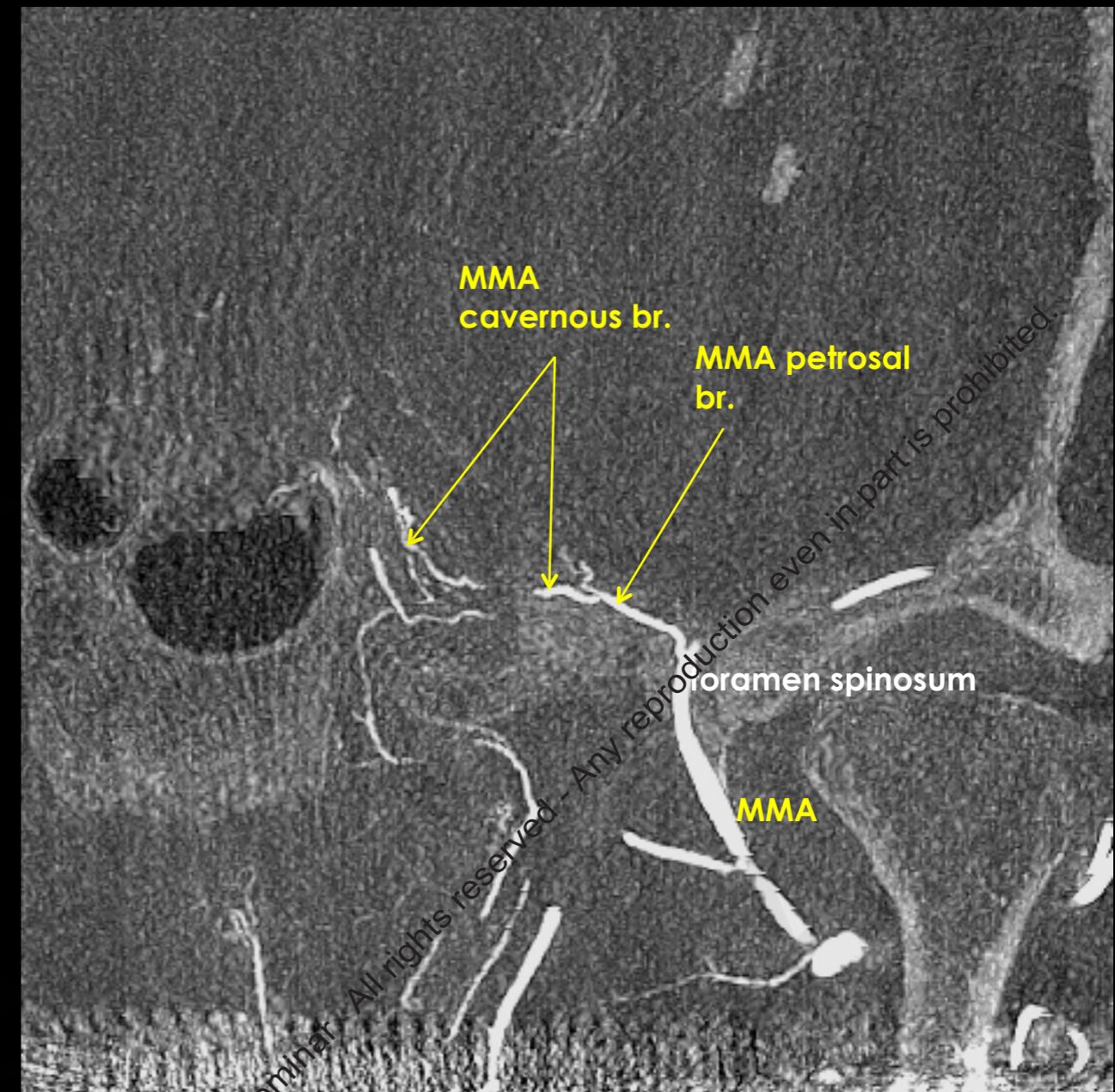
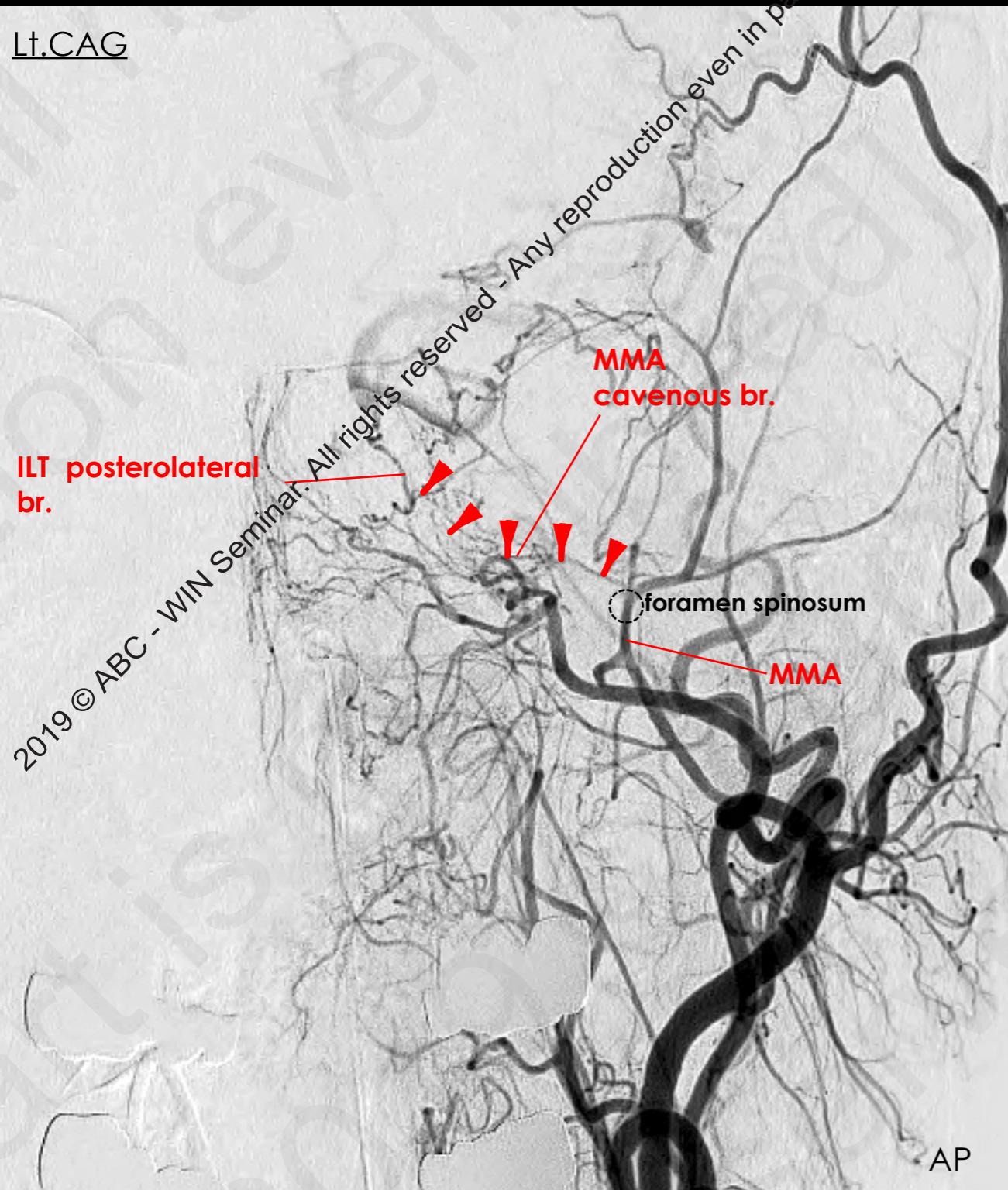
Lt.CAG



3DRA slab MIP
coronal

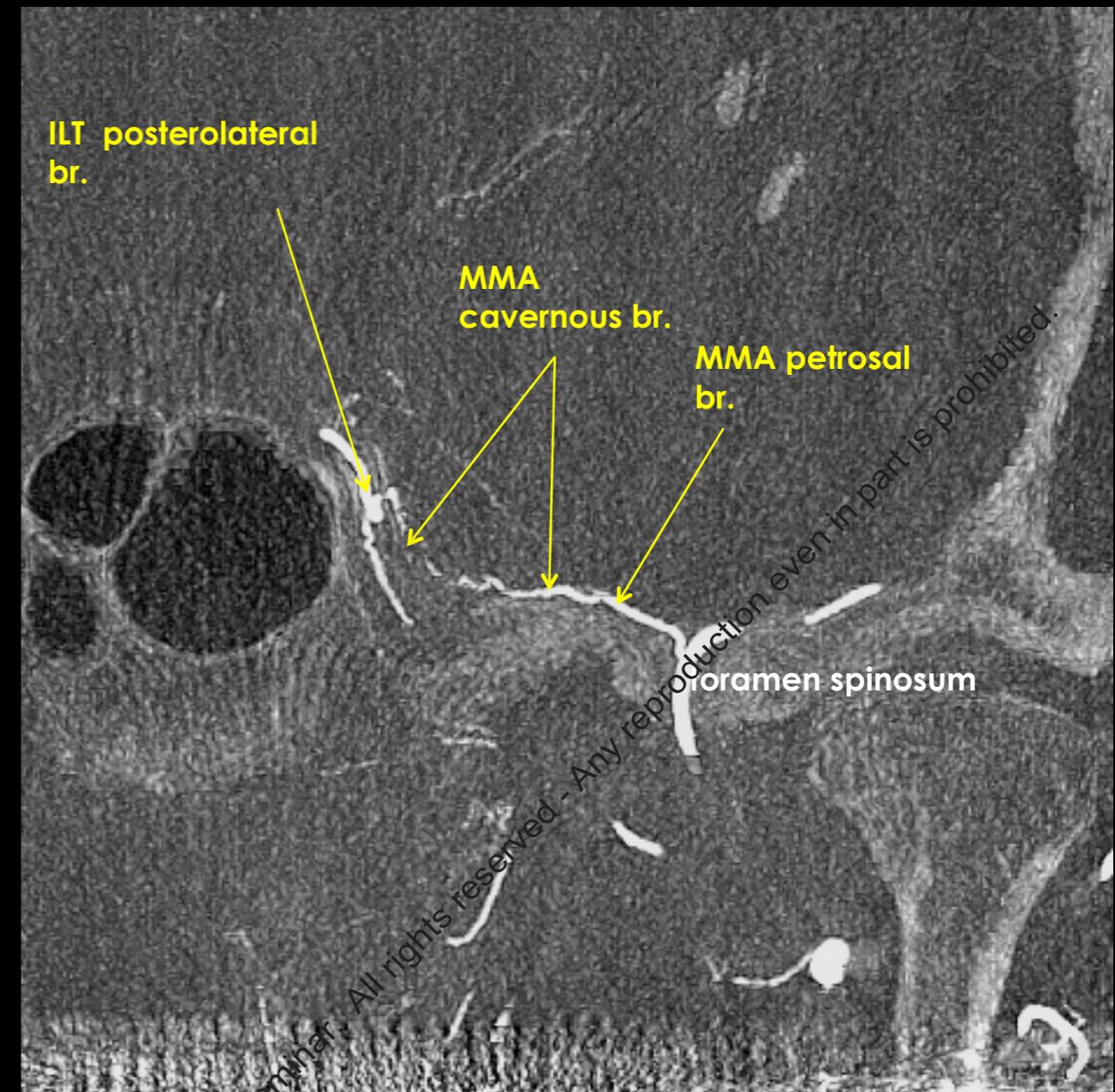
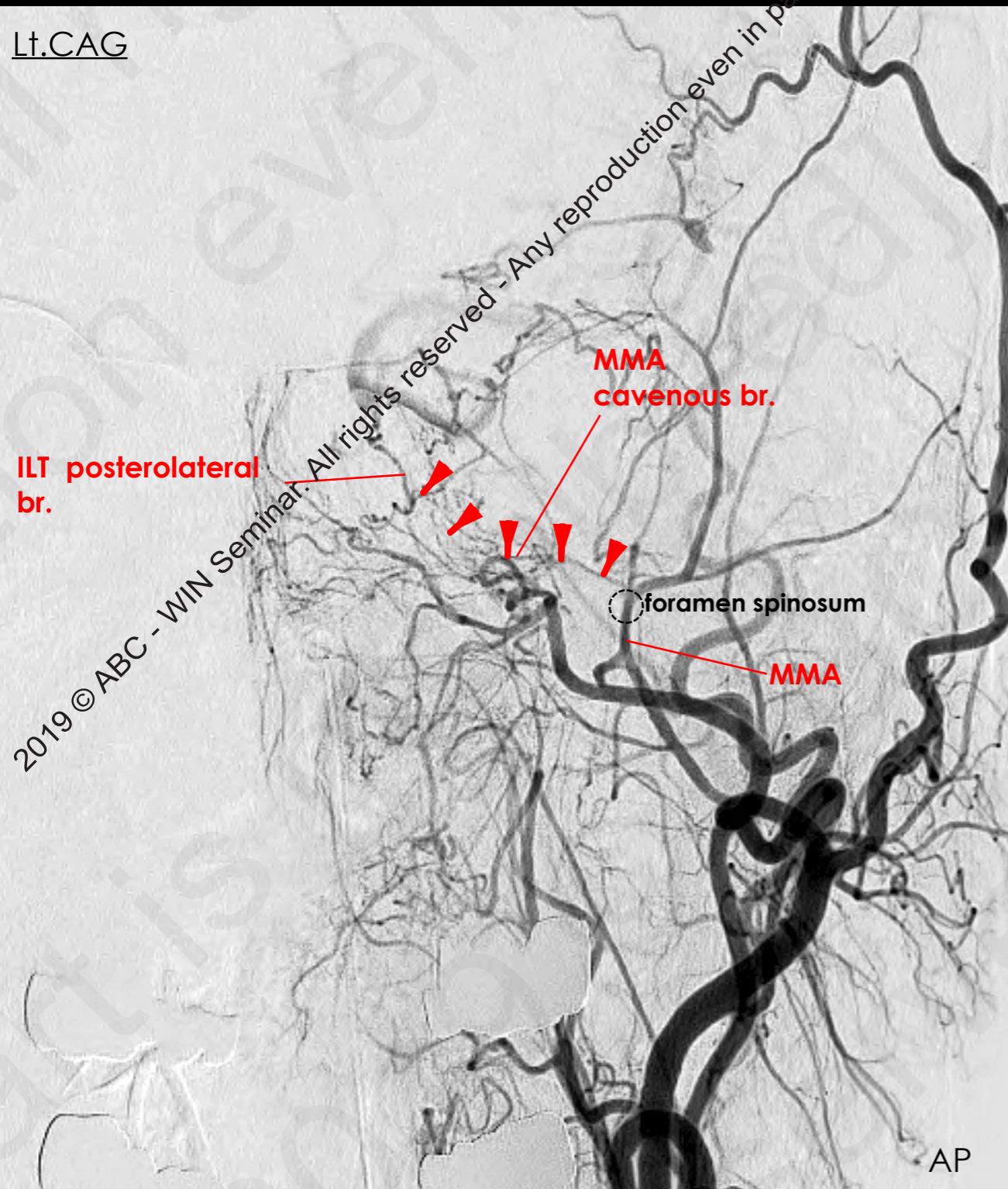
ILT posterolateral br. - MMA cavernous br.

Lt.CAG



ILT posterolateral br. - MMA cavernous br.

Lt.CAG



Conclusions

1. Eye is composed of the tissues for vision, eye movement and gland.
2. Primitive ophthalmic artery is composed of ventral and dorsal ophthalmic arteries solely for vision.
3. Superior branch of stapedial artery works for eye movement and lacrimal gland.
4. Anatomical variations are results of complex embryological processes.
5. Embryological knowledge helps to understand the anatomical variations and contributes to safer intervention.