

included mandatory animal surgeries to acquire the skills of working with living tissues. At the department of anatomy student should get the skill of preparation on a corpse material, which is impossible to fully obtain when using replicas and simulators. Unfortunately, the department is experiencing an acute deficiency in the receipt of cadaveric material. Last years there were no new corpses. So now for educational purposes we have only 2 corpses: one «exam», inaccessible to students and, therefore, sufficiently preserved, and the second, at which deals up to 500 students per year. This corpse quickly loses important anatomical formations, so it constantly conducts independent work of students. Some things are better with the preparation of the limbs. To carry out intestinal seams we have to buy intestines of animals in the market. In connection with the lack of cadaveric material to practice practical skills on surgical surgery at the department was created a scientific and practical students association. There students can practice at animal material how to develop skills of ownership Surgical instruments, the technique of imposing intestinal seams, vascular seams, joints of nerves and tendons, heart and parenchymatous organs. Thus, from 3 main types of educational activity at the department, such as topographical anatomy teaching on the corpse material, surgical operations on corpses and and surgical operations on animals — we only perform the first. In the absence of corpse material for a number of years are not only students, but also young teachers have no skills of preparation. From our point of view, to improve the quality of students' training, it is necessary to solve the issue of supply of corpse material and operations on animals at the departments of anatomical profile.

#### EFFECT OF ALPHA LIPOIC ACID ON RECOVERY OF FUNCTION AFTER DELAY REPAIR OF THE SCIATIC NERVE

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**Key words:** *lipoic acid, peripheral nerve, delay repair*

**Background.** Contrary to experimental studies routin clinical studies peripheral nerve cut does not performed immediately after injury. Therefore there is a delay for reconstruction of the peripheral nerves.

**Aim.** In the present study we aimed to study effect of lipoic acid treatment in delay repair model of peripheral nerve to understand how axonal path-finding and functional recovery will be affected.

**Material and Methods.** For this purpose, a total number of 70 Wistar rats were used for this purpose and divided into seven groups Grup 1 (Control), Group 2 (Sham), Group 3 (Primary repair),

Group 4 (Delay repair), Group 5 (Primary repair+LA), Group 6 (Delay repair+LA) ve Group 7 (Delay repair+delay LA treatment). Animals which treated with alpa lipoic acid were given 50 mg/kg/day dose of alpha lipoic acid.

**Results and Discussion.** Sciatic nerve regeneration was evaluated by walking track analysis, pinch test, light and electron microscopy and antioxidant effect of Alpha lipoic acid (+) was evaluated by biochemical analysis. We found that there was a beneficial effect of lipoic acit treatment on sciatic nerve after delay repair. However, this beneficial effect has been affected from structure of the sciatic nerve which detoiriated due to delay repair.

**Conclusions.** We think that our study will add valuable knowledge to the literature on the understanding of the nerve regeneration.

#### PECULIARITIES OF THE PANCREATIC ARTERIES ANASTOMOSES FORMATION

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**Key words:** *pancreas, blood supply, pancreatic arteries, anastomoses*

**Aim.** The study was designed to establish anatomical features of the pancreatic arteries anastomoses formation.

**Material and Methods.** We examined 105 macro-preparations of the pancreatic arteries using angiography.

**Results and Discussion.** 88% of cases showed anterior vertical pancreaticoduodenal anastomosis between the anterior superior pancreaticoduodenal artery and pancreaticoduodenal or its anterior branch. In 58.5% of cases we observed posterior anastomotic arc or posterior vertical pancreaticoduodenal intersystemic anastomosis which was formed by connections of posterior superior pancreaticoduodenal artery and posterior branches of the inferior pancreaticoduodenal artery or additional inferior pancreatoduodenal artery. As a variant of blood supply to the head of pancreas, a horizontal intra-system anastomosis was found between the anterior and posterior branches of the lower pancreatoduodenal artery. In 44% of cases the pancreatic branch supplying the head and neck of the pancreas formed anastomosis with the right branch of the dorsal pancreatic artery (branch of splenic artery). In 26.7% of cases anastomosis was between the lower pancreatoduodenal arteries and the right branch of the dorsal pancreatic artery. In half of these cases, the right branch of the dorsal pancreatic artery was divided into two branches: the upper and the lower.