

at right angles to their longitudinal axis. The direction of the nerves when entering the transverse abdominal muscle coincides with the course of the muscle bundles, and the nerves enter the rectus abdominis at right angles to them.

Data on the fetal topography of the intercostal nerves, iliac-peritoneal and iliac-inguinal nerves in anterolateral abdominal walls will help clinicians to decide on the shape and direction of incisions in different parts of the abdominal wall.

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THE PECULIARITIES OF MORPHOGENESIS OF THE MAXILLARY SINUSES DURING THE SECOND CHILDHOOD

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According to modern views, the nasal cavity and paranasal sinuses are a single physiological system in which each anatomical formation carries a certain functional load. All paranasal sinuses are paired formations, they are connected to the nasal cavity by outlets. The largest sinus is the maxilla, it is located in the body of the maxilla. Numerous anomalies that occur in clinical practice can mostly be explained only by elucidating the origin and interaction of organs and structures, which over time acquire their characteristic shape, studying their unusual topography and deep understanding of the corresponding embryonic facts.

The study of peculiarities of development and formation of the walls of the maxillary sinuses during the second childhood of human ontogenesis was conducted on 28 preparations of the maxilla, skulls and autopsies of the head of corpses of people of the second childhood using histological research, dissection, CT-research, radiography and morphometry.

Based on research of biological preparations of the maxillofacial area of the second childhood (8-12 years), a change in the configuration of the maxillary sinuses and the final formation of its walls was established. The maxillary sinuses on all drugs are defined laterally near the base of the inferior nasal cavity. The inferior wall of the sinuses was wider. The medial wall corresponded to the middle nasal passage and is represented, as in previous stages of development, by duplication of the mucous membrane. The walls of the maxillary sinuses are covered with a mucous membrane. The mucous membrane is lined with a multi-row cylindrical ciliated epithelium, which is located on the basement membrane. The thickness of the mucous membrane reaches 1.0-1.65 mm. There are complex tubular-alveolar glands. The glands of the subepithelial layer of the mucous membrane of the maxillary sinuses are located in separate rows. The highest concentration of glands was found on the medial wall of the sinuses, which bordered on the glands of the mucous membrane of the middle nasal passage.

During the period of the second childhood there is an eruption of permanent teeth and, as is known, this period coincides with the period of puberty, so the changes in the sinuses are of particular interest both in terms of functional anatomy and the final formation of the skeleton. This age is characterized, although slower than the previous one, by a uniform growth of all the walls and volume of the sinuses. Its growth in height is especially noticeable. With the eruption of permanent teeth, which fall down, the sinus seems to be freed from the teeth, and every year its pneumatized part becomes larger.

So, based on the conducted research, it is possible to draw a conclusion that in the second childhood the configuration of the maxillary sinus's changes and the final formation of their walls occurs, there are changes mainly quantitative in nature (increasing the size of the maxillary sinuses), and this process continues in later age periods of ontogenesis.