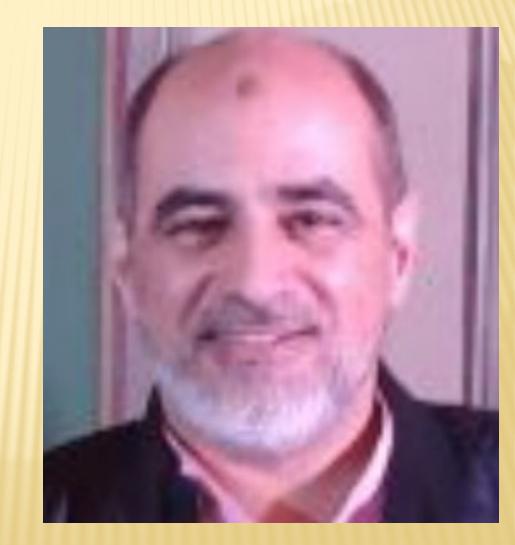
# FETAL SKULL

#### Osama Warda MD

Prof. OBS/GYNE

Mansoura University

EGYPT





The purpose of these lectures is to deliver the basic obstetrical, and gynecological knowledge to the undergraduate medical student, without sophistications or unnecessary details.



ان الغرض من وراء هذه المحاضرات هو تقديم المعلومات الأساسية في علم التوليد و أمراض النساء دون تفاصيل لا تفيد طالب البكالوريوس. والله من وراء القصد.

#### FETAL SKULL

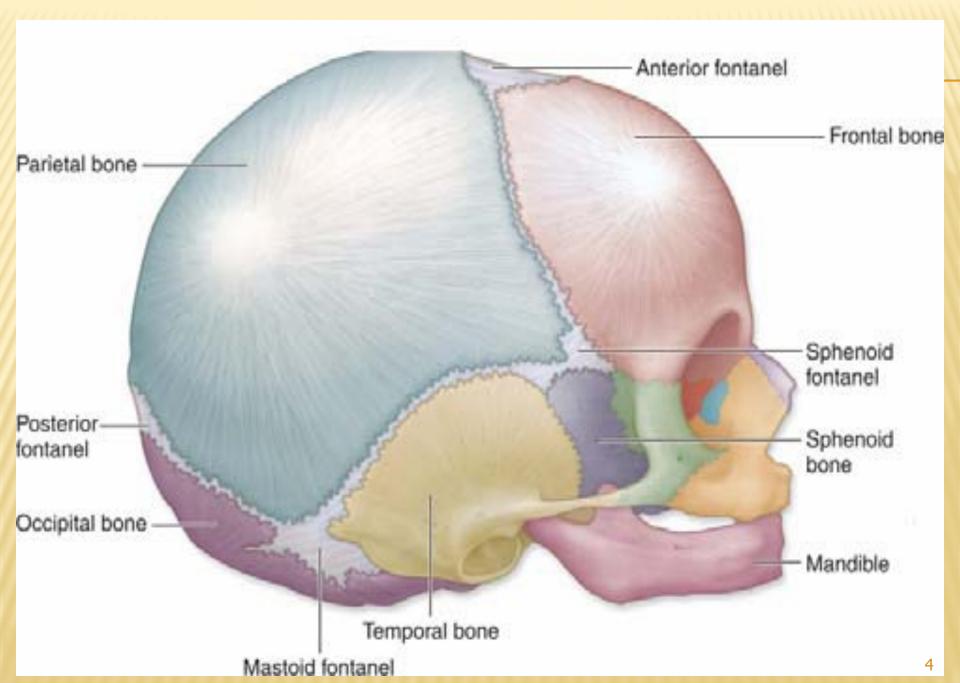
The skull is formed of the face, the vault & the base

The bones that form the skull are: two frontal bones, two parietal bones, two temporal bones wings of the sphenoid & occipital bone

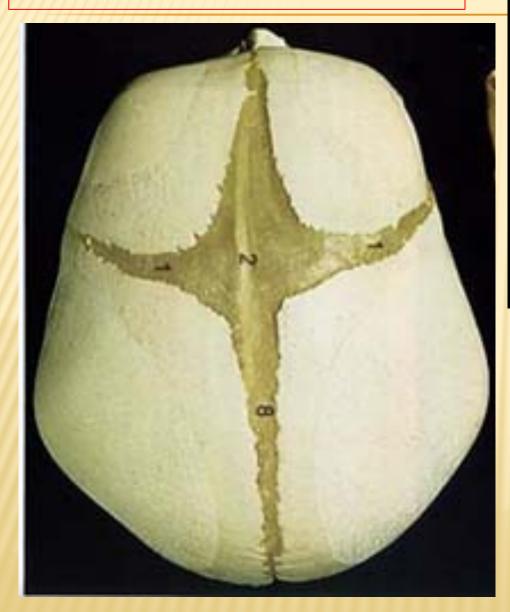
The bones of the face & base are heavy & fused

The bones of the vault are 2 frontal, 2 parietal & occipital

The bones of the vault are not joined thus changes in the shape of the fetal head during labor can occur due to molding



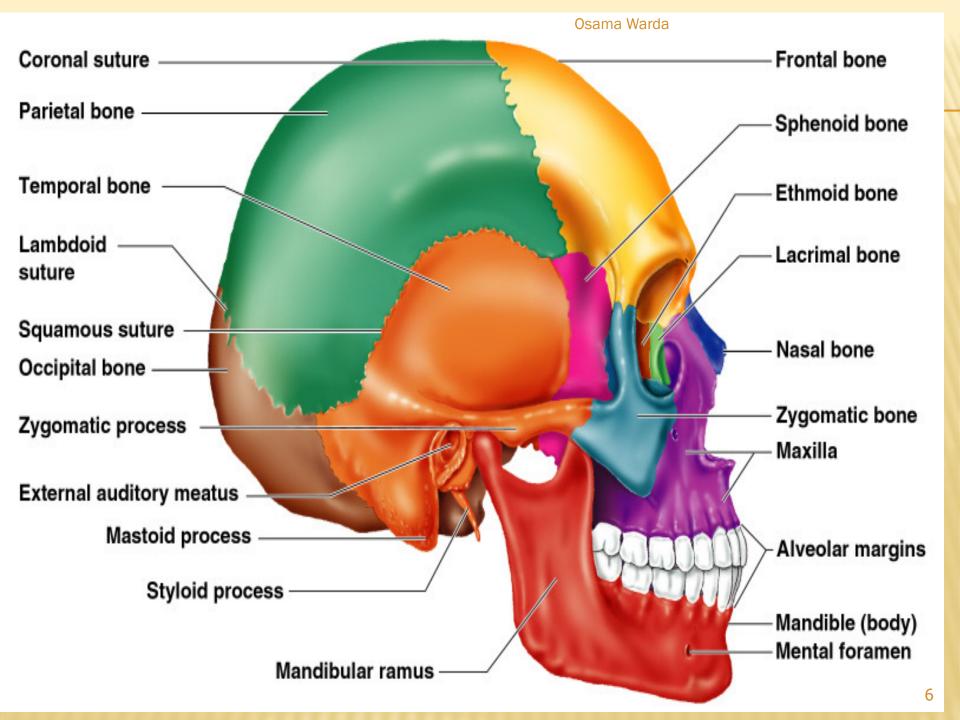
### **BONES & SUTURES**







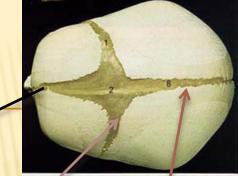
5



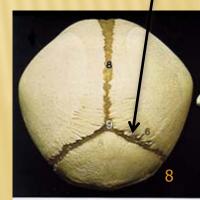
## FETAL SKULL DEFINITIONS

- **Bregma** → Ant fontanelle
- Brow → lies between bregma &root of the nose
- Face → lies between root of the nose & suborbital ridges
- Occiput → boney prominence behind post fontanelle
- Vertex → diamond shaped area between ant & post fontanelles & parietal eminences

# FETAL SKULL SUTURES

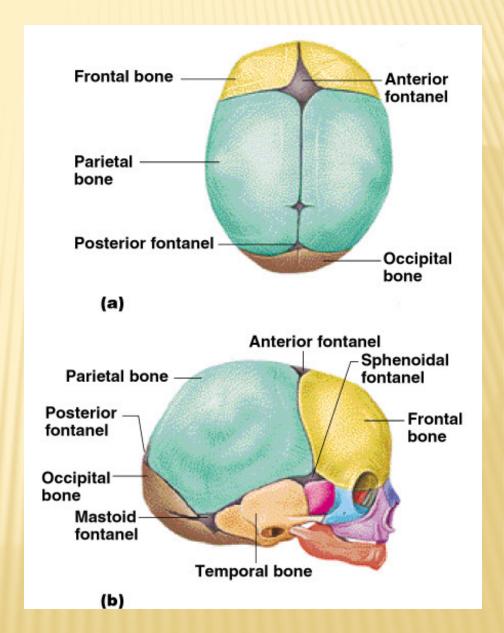


- ► Frontal suture → between 2 frontal bones
- ▶ Sagittal suture ⇒ between 2 parietal bones
- ▶ Coronal suture ⇒ between parietal & frontal
- ▶ Lambdoid suture ⇒ between parietal & occipital
- ► Temporal suture ⇒ between inferior margin of the parietal & temporal



### The Fetal Skull

- Fontanelles fibrous membranes connecting the cranial bones
  - Allow the brain to grow
  - Convert to bone within 24 months after birth



#### FETAL SKULL FONTANELLES

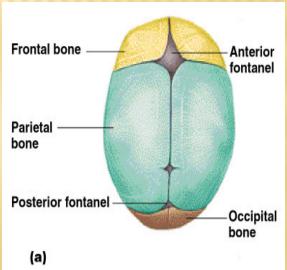
#### ★ Anterior fontanelle →

Diamond shaped space between coronal & sagittal suture3 X 3 cm, ossifies at 18 m

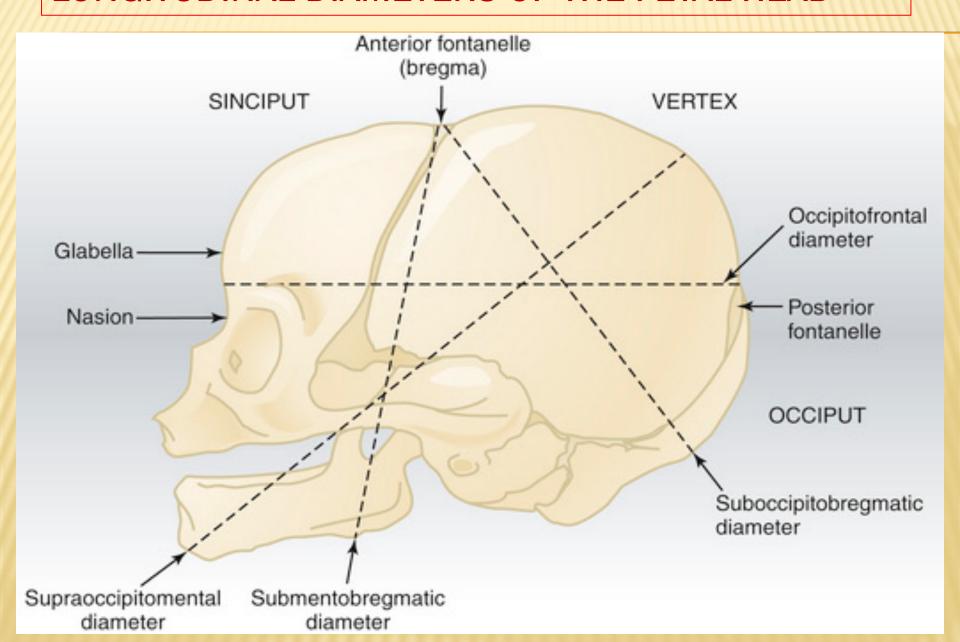
**×** Post font (lambda) 

→

Triangle shaped space between sagittal & lambdoid suture



#### LONGITUDINAL DIAMETERS OF THE FETAL HEAD



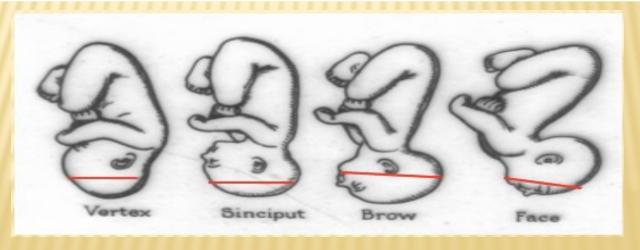
		Length	Extent		•			
		(cm)	From	То	Importance			
Longitudinal diameters	Suboccipito- bregmatic (SOB)	9.5	Below occipital protuberance	Center of bregma	● Engaging diameter in fully flexed head.			
	Suboccipito- frontal (SOF)	10	Below occipital protuberance	Anterior end of bregma	<ul> <li>Engaging diameter in incompletely flexed head &amp; in aftercoming head in breech.</li> <li>Diameter distending vulva in OA position if head is allowed to extend after crowning</li> </ul>			
	Occipito-frontal (OF)	11.5	Occipital protuberance	Root of nose	<ul> <li>Engaging diameter in deflexed head &amp; may be in aftercoming head in breech.</li> <li>Diameter distending vulva in face to pubis &amp; in OA position if head is allowed to extend before crowning (premature extension).</li> </ul>			
	Submento- bregmatic (SMB)	9.5	Junction ( ) chin & neck	Center of bregma	<ul> <li>Engaging diameter in face presentation è fully extended head.</li> </ul>			
	Submento- vertical (SMV)	11.5	Junction () chin & neck	Vertical point	<ul> <li>Engaging diameter in face presentation è incompletely extended head.</li> <li>Diameter distending vulva in face MA.</li> </ul>			
	Mento-vertical (MV)	13.5	Tip of chin	Vertical point	Engaging diameter in brow presentation.			
Transverse diameters	Biparietal diameter (BPD)	9.5	() 2 parietal eminences		● Largest transverse diameter of fetal head & head is said to be engaged if this diameter passes plane of pelvic inlet.			
	Subparietal- supraparietal	9	Above parietal eminence on one side	Below parietal eminence on other side	Engaging transverse diameter in asynclitism.			
	Bitemporal	8	( ) outer ends of temporal sutures					
	Bimastoid	7.5	( /	f 2 mastoid bones	Can't be crushed during craniotomy.			
N.B.: Ver	N.B.: Vertical point: Point on sagittal suture midway ( ) anterior & posterior fontanelles.							

#### Different diameters of engagement in different cephalic presentation

Diameter Of Engagement	Diameter	Presentation	Attitude
Suboccipito bregmatic (nape of neck to center of bregma)	9.4 cm	Vertex	Fully flexed
2. Suboccipito frontal (nape of neck to anterior end of bregma)	10 cm	Deflexed vertex	Incomplete flexion of head
3. Occipito frontal (occipital protuberance to root of nose)	11.3 cm	Extended vertex	Extended
4. Mento vertical (point of chin to one inch in front of posterior fontanelle in the sagittal suture)	13.8 cm	Brow	Incomplete extension
5. Submento vertical (Angle between neck and chin to center of sagittal suture)	11.3 cm	Incomplete extended face	Partially extended face
6. Submento bregmatic (angle between neck and chin to center of bregma)	9.4 cm	Complete extended face	Fully extended face

## FETAL HEAD ATTITUDE & PRESENTATION

Attitude	Presentation	Dominator*	
1. Flexion	Vertex	Occiput	
1. Deflexion	Brow	Forehead (frontum)	
1. Extention	Face	Chin (mentum)	
1. Side-tilt	Asynclitism	Parietal bone	



# MOULDING OF THE HEAD

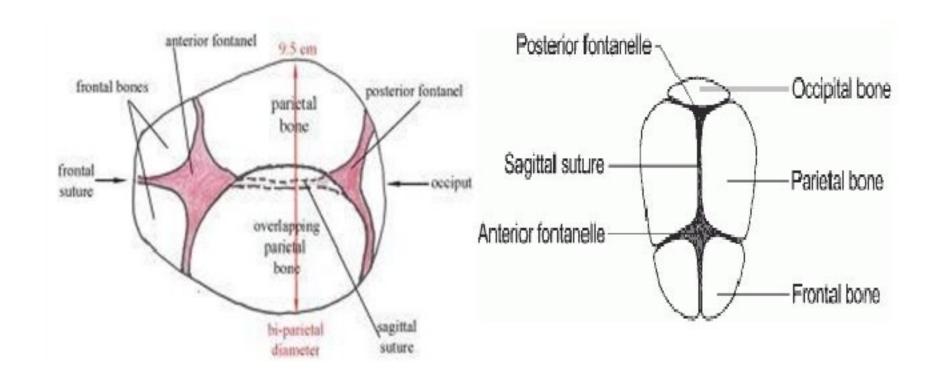
 Occurs with descent of the fetal head into the pelvis to reduce the head circumference

Frontal bones slip under parietal bones

Parietal bones override each other

Parietal bones slip under the occipital bone

# Moulding the fetal skull bones



# **DEGREE OF DESCRIPTION HEAD MOULDING** suture lines are separate suture lines meet +1 +2 suture lines overlap but can be reduced by gentle digital pressure overlan irreducible

# MOULDING

