

1 *Abstract*

2 **The Anatomico-Clinical Importance of the Branches of the** 3 **Celiac Trunk**

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9 **Abstract: Purpose of the Study:** Evaluation and classification of celiac trunk variants and assessment of
10 their impact on visceral surgery. **Material and Methods:** The study was carried out on 50 anatomical
11 specimens, over a period of 5 years. The macroscopic dissection method was used. The data were
12 statistically and mathematically processed, schematically and percentage grouped. The results obtained
13 were centralized and compared with those existing in the studied bibliography. **Results:** The complete
14 celiac trunk appears in 81% of cases (90% in the literature), and the incomplete one in 19% of cases (10% in
15 the literature). The complete celiac trunk can be trifurcated, bifurcated, or of common origin with the
16 superior mesenteric artery (SMA). In the trifurcated artery, the left gastric artery (LGA), hepatic artery
17 (HA) artery and the splenic artery (SA) have a common origin. The bifurcated celiac trunk first gives rise
18 to AGS, after which it bifurcates into HA and SA. Left HA, doubled by right HA, originating from a
19 hepato-mesenteric trunk (H-M), occurs in 4% of cases. Incomplete celiac trunks: i) hepato-splenic (H-S)
20 and LGA directly from the aorta - 3%; ii) hepato-spleno-mesenteric (H-S-M) and LGA from a gastro-
21 phrenic trunk - 1%; iii) gastro-splenic (G-S) and HA directly from the aorta - 5%; iv) G-S and HA from a
22 H-M trunk - 3%; v) H-M for HA and LGA, and SA directly from the aorta - 2%; vi) gastro-hepatic (G-H)
23 and SA from a common H-M trunk - 5%. **Conclusions:** The celiac trunk originates directly from the
24 abdominal aorta -99% of cases and in 1% through a celiac-mesenteric trunk. The complete celiac trunk
25 appears in 81% of cases, and the incomplete one in 19% of cases. The complete celiac trunk can be
26 systematized into 4 distinct morphological categories, while the incomplete celiac trunk can be systematized
27 into 3. The knowledge of the variants of origin of the celiac trunk is of both theoretical, anatomical and
28 surgical importance, due to the vascularization of a vast territory, with complex medical-surgical pathology.

29 **Keywords:** Haller's celiac tripod; complete celiac trunk; incomplete celiac trunk.

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