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The pattern of formation of the human rectus sheath exhibits variations, it is not clear if these variations are population specific. This study aimed at describing the pattern of formation of the rectus sheath in a select Kenyan population. Formation of the rectus sheath was analyzed in eighty subjects (47 male, 33 female) during autopsies and cadaveric dissection. The anterior wall of the rectus sheath in all cases was aponeurotic and firmly attached to rectus abdominis muscle. The posterior wall of the rectus sheath was aponeurotic in 71 (88.5%) cases, the rest were musculoaponeurotic and only seen in males. In all cases the aponeurosis of internal oblique abdominis split into two lamina; a deep lamina that fused with the aponeurosis of transverses abdominis at the lateral border of rectus abdominis and a superficial lamina that fused with aponeurosis of external oblique abdominis mid-way between the medial and lateral borders of rectus abdominis muscle. The pattern of formation of the rectus sheaths among Kenyans shows some variations which have not been reported by previous workers. Knowledge of these variations is important in surgery as this sheath is always incised when making most aabdominal incisions.