

## Original Article

## Numerical Variation in the Branches of the Lateral Circumflex Femoral Artery: Cadaveric Research

Chauhan Pradip\*, Rathwa Ashish \*\*, Adhvaryu Monika \*\*\*, Chauhan Alpa \*\*\*\*, Rathod Suresh \*\*\*\*\*

\*Tutor, \*\*\*\*\*Professor and Head, Anatomy Department, P.D.U Government Medical College, Rajkot, Gujarat.

\*\*Assistant Professor, Anatomy Department, GMERS Medical College, Junagadh, Gujarat

\*\*\*Tutor, Anatomy Department, M. P. Shah Medical College, Jamnagar, Gujarat.

\*\*\*\*Tutor, Anatomy Department, GMERS Medical College, Gandhinagar, Gujarat

DOI: 10.5455/jrmds.20153314

### ABSTRACT

**Background:** The lateral circumflex femoral artery (LCF) is the major blood supply the thigh. It divides in ascending, transverse and descending branches. Knowledge of the branches of LCF is important in the anterolateral surgical flap from the thigh for skin grafting.

**Aim:** This study was conducted to study the numerical variation in the branching pattern of the lateral circumflex femoral artery.

**Materials and Methods:** 50 extremities from 25 cadavers (18 Male and 7 Females) were dissected. Lateral circumflex femoral artery and its branches were identified, dissected and studied for numerical variation in the branches.

**Results:** 10 types of numerical branching pattern were found in the present study. Descending pattern had the maximum type of variety. Transverse branches show minimum variations. Most common type (46%) of numerical variety in branches was one ascending, one transverse and one descending branch.

**Conclusion:** Numerical branching pattern of the Lateral circumflex femoral artery show extensive variations. These variations in the branching pattern must be considered during skin grafting and other clinical interventions.

**Key words:** Lateral circumflex femoral artery, branching pattern, ascending branch, transverse branch

### INTRODUCTION

The lateral circumflex femoral artery is the major artery of the profunda femoris artery. It passes laterally between the two divisions of the femoral nerve and divides into ascending, transverse and descending branches [1].

Ascending branch is generally one in number and participates in the trochanteric anastomosis. Transverse branch send limbs in the cruciate anastomosis. The twig from the descending branch takes part in the anastomosis around the knee joint [1, 2]. Lateral circumflex artery is the major deep arterial supply of the thigh [3]. Lateral circumflex artery branches vary extensively. This study was conducted the various branching pattern of the lateral circumflex femoral artery.

**Aims:** Present study was conducted with aim to study the numerical variation in the branches of the Lateral Circumflex Femoral artery. For aims objectives were as follows:

1. Identification of the Lateral Circumflex Femoral artery and its branches
2. Calculation the number of ascending, transverse and descending branches
3. Categorizing the pattern of the branches.

### MATERIAL AND METHODS

This cross sectional study was conducted at Pandit Dindayal Upadhyay Government Medical College, Rajkot, Gujarat (India) during 2011 to 2013. 50 human femoral triangles from 25 (18 male and 07 female) human cadavers in P.D.U. Government Medical College, Rajkot were dissected. Lateral circumflex femoral artery and its branches were identified and traced on the basis of their course and relations. Ascending, transverse and descending branches of the Lateral circumflex femoral artery were traced, their number were calculated. Only the branches originating from the lateral circumflex femoral artery directly were included.

Data was collected in pretested form and analyzed for the variation in the branching pattern of the Lateral circumflex femoral artery by standard statistical formulas with the help of Microsoft excel 2013 and Epi info 7™ software.

**RESULTS AND DISCUSSION**

50 lower limbs were dissected carefully 10 type of variation were noted. 11 cadavers had same type of branching pattern on both sides of lower limbs; while remaining 14 (10 male and 4 female) cadavers had different type of branching pattern on both limbs.

**Side wise variation pattern [Table 1]:** Right side 9 type and left side 7 type variations were noted. 14 out of 25 cadavers had nonmatching numerical branching pattern between two limbs. Most frequent (46%) numerical pattern was ascending (1), transverse (1) and descending (1).

Not a single left limb show ascending branch more than 1 in number; while one right limb had two ascending branches.

**Table 1: Side wise variation in the number of branches of lateral circumflex artery**

Name and Number of branches			Frequency	
Ascen- ding	Transverse	Descen- ding	Right side (n=25)	Left side (n=25)
0	1	1	2 (8.0%)	1 (4.00%)
1	1	1	11 (44.0%)	12 (48.00%)
1	1	2	5 (20.0%)	5 (20.00%)
1	1	>2	2 (8.00%)	4 (16.00%)
1	2	1	1 (4.00%)	1 (4.00%)
1	2	2	0 (0.00%)	1 (4.00%)
1	2	>2	1 (4.00%)	1 (4.00%)
2	1	>2	1 (4.00%)	0 (0.00%)
0	1	1	1 (4.00%)	0 (0.00%)
1	2	0	1 (0.00%)	0 (0.00%)
<b>Total type variation in number of branches</b>			9	7

**Gender wise variation pattern [Table 2]:** Both male and female had 8 type variety of branching pattern. Most common numerical pattern was ascending (1), transvers (1) and descending (1) pattern both in males and females. Out 36 male extremities not a single extremity had more than

one ascending branch, while in one female extremity had two ascending branches.

**Table 2: Sex wise variation in the number of branches of lateral circumflex artery**

Name and Number of branches			Sex	
Ascen- ding	Transverse	Descen- ding	Male (n=36)	Female (n=14)
0	1	1	2 (5.55%)	1 (7.14%)
1	1	1	19 (52.78%)	4 (28.58%)
1	1	2	6 (16.66%)	4 (28.58%)
1	1	>2	5 (13.88%)	1 (7.14%)
1	2	1	1 (2.77%)	1 (7.14%)
1	2	2	0 (0.00%)	1 (7.14%)
1	2	>2	1 (2.77%)	1 (7.14%)
2	1	>2	0 (0.00%)	1 (7.14%)
0	1	1	1 (2.77%)	0 (0.00%)
1	2	0	1 (2.77%)	0 (0.00%)
<b>Total type variation in number of branches</b>			8	8

2<sup>nd</sup> most frequent variety was ascending (1), transvers (1) and descending (2) pattern [Table 1, 2; Image 1]. 9 out of 50 extremities had more than 2 descending branches [Image 2]. In of the right side male extremity no descending branch was originating from the Lateral Circumflex femoral artery, instead multiple descending branches originated directly from the profunda femoris artery.

**Figure 1: lateral circumflex femoral artery dividing in one ascending, one transverse and two descending branches**



IMAGE: LATERAL CIRCUMFLEX ARTERY DIVIDING IN ONE ASCENDING, ONE TRANSVERSE AND TWO DESCENDING BRANCHES.  
1: FEMORAL ARTERY, 2: PROFUNDA FEMORIS ARTERY, 3: SUPERFICIAL FEMORAL ARTERY, 4: LATERAL CIRCUMFLEX ARTERY, 5a AND 5b: DESCENDING BRANCHES, 6: TRANSVERSE AND 7: ASCENDING BRANCHES OF LATERAL CIRCUMFLEX FEMORAL ARTERY

Out of three types of branches the descending branches had highest variety in number. Numbers

of descending branches were variable (1, 2, 3 or more, Image 1 and Image 2). Transverse branch was most consistent and least variable in number.

**Figure 2: Multiple descending branches directly from the profunda femoris artery along with the origin of the LCF**



IMAGE: MULTIPLE DESCENDING BRANCHES DIRECTLY FROM THE PROFUNDA FEMORIS ARTERY ALONG WITH ORIGIN OF THE LATERAL CIRCUMFLEX FEMORAL ARTERY  
1: FEMORAL ARTERY, 2: PROFUNDA FEMORIS ARTERY, 3: LATERAL CIRCUMFLEX FEMORAL ARTERY, 4: ASCENDING BRANCH, 5: TRANSVERSE BRANCH; 6a, 6b AND 6c DESCENDING BRANCHES OF THE LATERAL CIRCUMFLEX FEMORAL ARTERY.

In the present study one male right extremity and one male left extremity had double LCF origin from the profunda femoris artery; such type of variation are reported by Atulya et al. (2013). In one right side male extremity ascending branch had origin from the profunda femoris; lateral circumflex divided only in transverse and descending branch.

Agrawal S et al (2014) reported a case with variation in the branch of LCF [5]. Yamashita Y et al (2005), reported variations in the descending branch of LCF in angiographic study [6]. Various other studies had reported variations in the origin of the Lateral circumflex femoral artery [7-12] but study of the branching pattern of the lateral circumflex femoral artery are very less.

## CONCLUSION

Branches of the lateral circumflex femoral have critical role in anterolateral surgical flap for skin grafting. Present study report extensive variation in the branching pattern in the LCF branches that is considerable in various skin grafting.

## REFERENCES

1. Mahadevan V. Pelvic girdle, gluteal region and thigh. In: Stander S, editor. Gray's Anatomy, The Anatomical Basis of Clinical Practice 40th ed. India: Elsevier; 2008:1378-9
2. Fernandes R, Lee J. Use of the lateral circumflex femoral artery perforator flap in the reconstruction of

gunshot wounds to the face, J Oral Maxillofac Surg 2007; 65(10):1990-7.

3. Valdatta L, Tuinder S, Buoro M, Thione A, Faga A, Putz R. Lateral circumflex femoral arterial system and perforators of the anterolateral thigh flap: an anatomic study. Ann Plast Surg 2002;49:145-50.
4. Atulya, Kharb P, Samantha PP. Variation in Origin and Branching Pattern of Lateral Circumflex Femoral Artery: A Rare Case Report. Int J of Health & Rehab Sci 2013;2(1): 72-5.
5. Agrawal S, Patil SJ. Variation in The Origin of the lateral Circumflex Femoral Artery a Case Report. Int J Clin Surg Adv 2014;2(2):120-5.
6. Yamashita Y, Fukuda S, Kigawa I, Wanibuchi Y. Preoperative angiographic evaluation of the descending Branch of the Lateral Femoral Circumflex Artery as a free graft in Coronary artery Bypass Graft. Jpn J Thorac Cardiovas Surg 2005;53(9):167-70.
7. Prakash, Kumari J, Kumar BA, Jose BA, Kumar YS, Singh G. Variations in the origins of the profunda femoris, medial and lateral femoral circumflex arteries: A cadaver study in the Indian population. Romanian Journal of Morphology and Embryology 2010;1(1); 167-70.
8. Dixit D, Kubavat DM, Rathod, SP, Pateld MM, Singel, TC. A Study of Variations in the Origin of Profunda Femoris Artery and Its Circumflex 2011;2(4);1084-89.
9. Suthar K, Patil D, Mehta C, Patel V, Prajapati B, Bhatt C. Cadaveric study: morphological study of branches of. CIBTech Journal of Surgery 2013;2(2)16-22.
10. Peera SA, Sugavasi R. Morphological study of branches of femoral artery in the femoral triangle- a human cadaveric study. Int J Health Sci Res 2013;3(12):14-9.
11. Vaishali PA., Laksami R. A study of profunda femoris artery in cadavers. Int J Cur Res Rev 2014;6(21):41-6.
12. Chauhan PR, Dangar KP, Rathwa Aj, Adhvaryu MA, Chauhan AP, Rathod SP. Cadaveric Study: Study of Lateral Circumflex femoral arterial origin in Rajkot. Int J Res Med Sci 2015; 2(5):1066-1069. doi:10.5455/2320-6012.ijrms20150507

### Corresponding Author:

Dr. Dr. Pradip Chauhan,  
C-105, Bhagyoday Society Part-2,  
Near Nalanda School, Ghatlodia,  
Ahmedabad,  
Gujarat, India. PIN: 380061  
Email: prajawalitresearch@gmail.com

Date of Submission: 24/09/2015

Date of Acceptance: 28/09/2015

**How to cite this article:** Chauhan P, Rathwa A, Adhvaryu M, Chauhan A, Rathod S. Numerical Variation in the Branches of the Lateral Circumflex Femoral Artery: Cadaveric Research. J Res Med Den Sci 2015;3(3):222-4.

**Source of Support:** None

**Conflict of Interest:** None declared