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On the anatomy of the breast - Of the fascia

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OF THE FASCIA.

THE gland of the breast is enclosed in a fibrous tissue, which, as in the female, should be traced from the sternum outwards. When it reaches the breast it divides into two portions, an anterior and posterior layer. The anterior passes upon the fore part of the gland, and sends forth its ligamenta suspensoria to unite the breast to the inner part of the skin, with which, indeed, it becomes incorporated. But it also sends tendinous or fascial fibres backwards into the fore part of the gland, which permeating its substance, unite and combine its different parts, strongly joining the nipple and areola to the gland, and being incorporated with the skin it is the source of its whiteness.

The posterior portion of the fascia proceeds behind the gland, and there gives off two sets of fibres. One set passing into its costal surface traverses its substance, uniting its several cells and ducts by a fibrous tissue.

The other fibres pass backwards to the aponeurotic covering of the pectoralis major, and consequently unite the back of the gland through this medium with the pectoral muscle.

In *Plate* 1 *of the Male*, I have given several sections showing the gland and its connections at different periods of life, *viz.*, in the fœtus, at three years, at seven, at thirteen, at twenty-nine, and at thirty-eight years; and in each of these the fascial covering is dissected so as to show its two layers. The ligamenta suspensoria of the anterior is shown, and the fat which is placed between these ligaments. The posterior layer of fascia; its fibrous junction with the aponeurosis, and the fat which it contains, will be also seen.

Some small lobules of fat appear in the gland itself.

Hairs are also to be observed growing upon the surface of the skin at twenty-nine and thirty-eight years.

After the two layers have passed the breast they again unite unto the superficial fascia. When the dissection is continued beyond the breast towards the axilla, a broad expansion of strong fascia is found to proceed from the aponeurosis of the pectoralis major, and that of the teres major and latissimus dorsi.

The axilla forms a triangular cavity, the anterior and posterior border of which are formed by the pectoralis major before, and the teres major and latissimus dorsi behind, by the serratus major anticus towards the scapula, and by this broad expansion of fascia at its base. It proceeds from the

side of the thorax towards the bicipital groove of the humerus, and mounts on the deltoid and biceps muscles.

It sends out a process under the pectoralis minor muscle.

The absorbent vessels pass through it by one and sometimes more openings to the glands in the axilla, and these openings are generally cribriform; some branches of arteries and nerves also pass through it; the cavity of the axilla above it contains the axillary artery and vein and their branches, and the axillary plexus of nerves on the brachial side of the blood-vessels, and the absorbent vessels opening upon tne inner side, and these parts are also contained in a sheath from which processes go off to their branches*.

This broad expansion of fascia forming the base of the triangular cavity of the axilla, has often matter formed under it, and if it be not freely opened, the patient suffers extreme pain, and sloughs are apt to be produced in the loose cellular tissue of the axilla.

I have seen accumulations of matter under this fascia arising from a wound of the finger in dissection, occasion death; also in diseases of the breast, elevating the arm gives great pain from putting the fascia upon the stretch, and much motion of the superior extremity, in diseases of the breast, is very injurious.

* See Professor HARRISON of Dublin on the Arteries.