Axillary artery trunk, circumflex humeral artery, profunda brachii artery, subscapular artery, brachial artery.

RESULTS:
The present study comprises 22 unilateral upper limbs from 22 cadavers (18 males & 4 females) dissected to investigate the variation of branching pattern of axillary artery. The subscapular artery, circumflex humeral artery usually arise from third part of axillary artery and profunda brachial artery originate from brachial artery posteromedial aspect, distal to teres major muscle. In my study, subscapular, circumflex humeral, profunda brachii artery arise from common axillary artery trunk in 4.5%. In this case branches of brachial plexus surround this common vessel instead of third part of axillary artery one cadaver out of twenty two.

DISCUSSION:
The result of the present study demonstrate the variation of branching pattern of axillary artery. Vascularization of axillary artery may be due to the defects in embryonic vascular network occurred at any stage by arrest of development. The developmental defects of surrounding tissue may also lead to vascular variations. Variations in branching pattern of axillary artery should be kept in mind while performing bypass between the axillary and subclavian artery in surgical treatment of subclavian artery occlusion. The common trunk as in the present study can be used for bypass surgery. Aneurysm and trauma of axillary artery may require reconstructive operation and variations as in the present case may present difficulties in the procedure. Repetitive positional compression of the axillary artery in athletes can cause focal intimal hyperplasia, aneurysm formation, segmental dissection, and branch vessel aneurysms. These conditions favour thrombosis and distal embolism and may need positional arteriography for diagnosis. The axillary arteries have been successfully used as the cannulation site in cardiopulmonary bypass, thoracic and aortic procedures, for insertion of intra-aortic balloon pumps and it is under consideration for use as an inflow vessel in coronary artery surgery. Variant common...
trunks from axillary artery can be considered for cannulation. Radio logical studies can thus be performed before proceeding to the above mentioned procedures.

CONCLUSION:
The awareness of variations in the anatomy of axillary artery and its branches is important to avoid serious complications while treating the arterio venous fistula, aneurysms and abscess drainage in the region of axilla. Better anatomical knowledge about the branches of axillary artery and their variation are important for surgeons, physicians, radiologist, interventionist because based on anatomical study, new diagnostic and therapeutic approaches can be proposed.

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