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# **Objectives**

#### By the end of this session we should be able to:

- Describe the anatomy of the radial & ulnar nerves regarding:
  - Origin,
  - Course &
  - Distribution.

List the branches of the nerves.

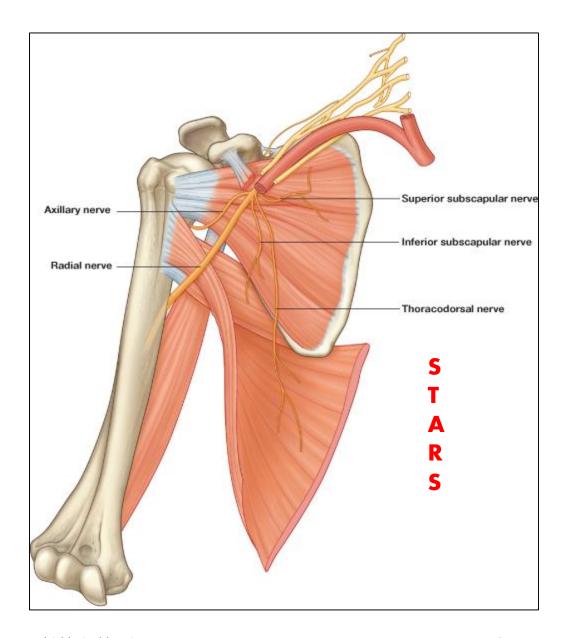
Describe the causes and manifestations of nerve injury.

# Origin:

One of the five branches of the Posterior cord of the brachial plexus Begins in the axilla The largest branch

# **Supplies**:

Nerve of the extensor compartment i.e.
Muscles of the posterior compartment of the arm & the fore arm



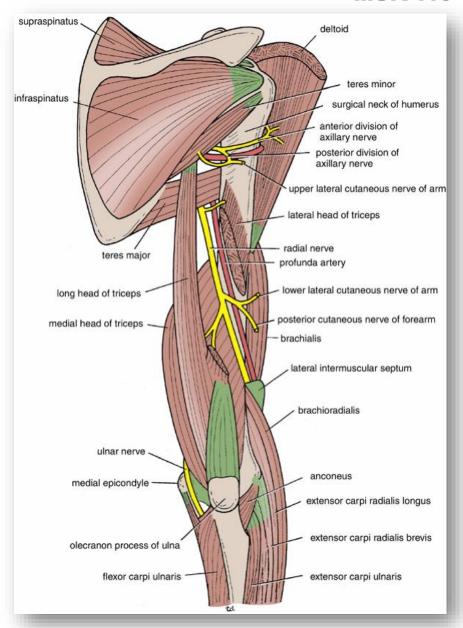
#### **MSK 115**

# **Radial Nerve**

#### In the Arm

It winds around the back of the arm in the Spiral Groove on the back of the humerus between the heads of the triceps.

In the spiral groove, the nerve is accompanied by the Profunda Vessels, and it lies directly in contact with the shaft of the humerus (a Dangerous Position).



# Radial Nerve In the Forearm

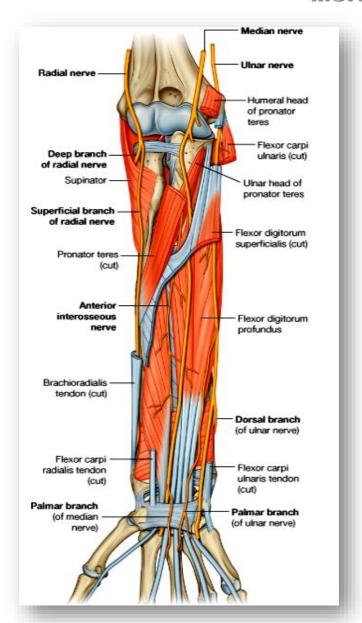
- It pierces the Lateral Intermuscular septum.
- Descends in front of the Lateral Epicondyle.
- Passes forward into the Cubital Fossa

#### **Divides** into

#### 1.Superficial branch

- Conti. of the radial nerve
- Purely cutaneous

#### 2. Deep branch (Post. interosseous)



#### **MSK 115**

# **Radial Nerve**

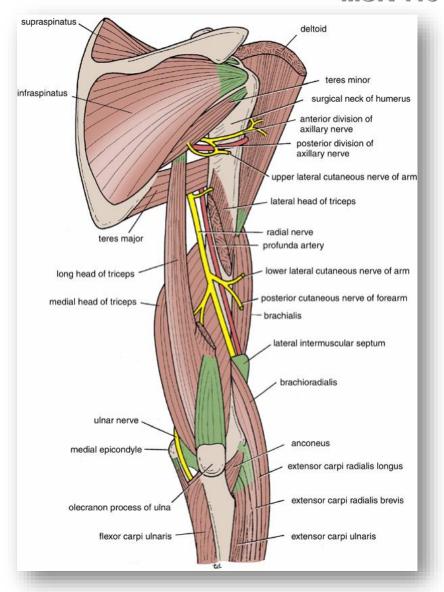
#### **Branches in Axilla**

#### **Cutaneous:**

Posterior cutaneous nerve of arm.

#### **Muscular:**

Long & Medial Heads of Triceps.



# **Branches in Spiral Groove**

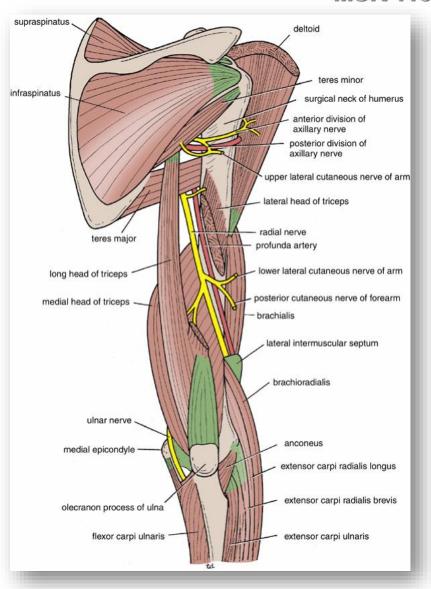
#### **Cutaneous:**

- 1. Lower lateral cutaneous nerve of arm.
- 2. Posterior cutaneous nerve of forearm.

#### Muscular:

Lateral & Medial heads of triceps.

Anconeus.



# Radial Nerve Branches

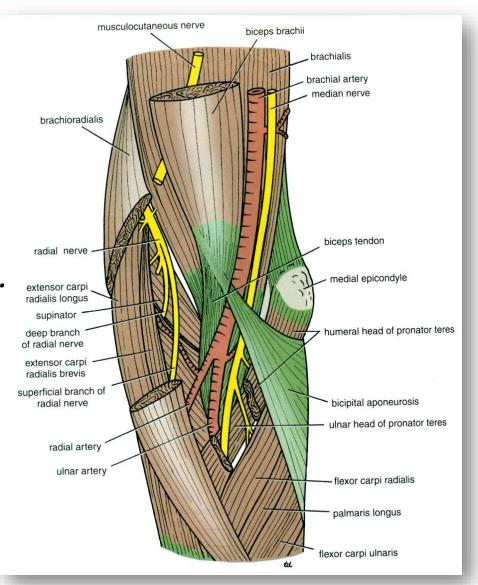
Close to Lateral Epicondyle: In the flexor compartment of Arm

#### Muscular:

- 1. Brachialis.
- Brachioradialis.
- 3. Extensor carpi radialis longus.

#### **Articular**

to the elbow joint



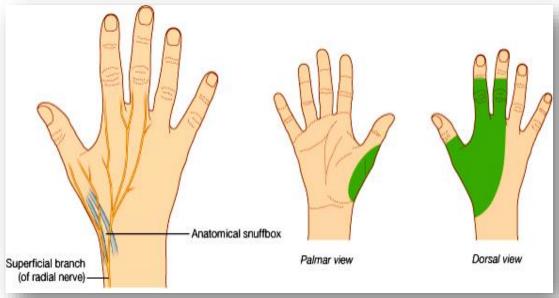
#### **Terminal Branches**

# **Superficial Branch**

- Conti. of the radial nerve
- Purely cutaneous
- Runs down the flexor comp of the forearm
- Winds around the lower end of the radius deep to BR
- Crosses the pollicis muscles to reach the back of the hand.

#### Supplies:

- The skin on the lateral (radial) two and half digits or three and a half of proximal phalanges
- The skin of the corresponding half of the hand



## **Terminal Branches**

Deep Branch (Post. interosseous)

#### Course

It winds around the neck of the radius, within the supinator muscle, and enters the posterior compartment of the forearm

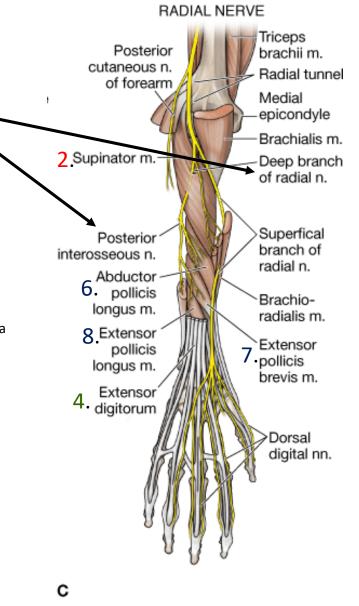
#### Muscular:

1. Extensor carpi radialis brevis. Cubital Fossa

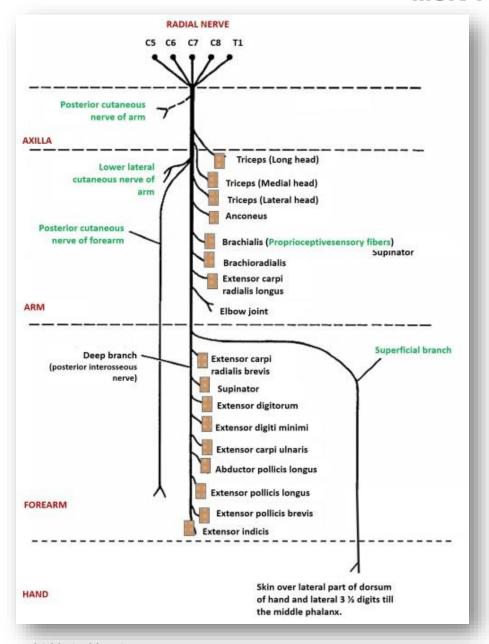
Extensor

Compartment

- 2. Supinator.
- 3. Extensor carpi ulnaris.
- 4. Extensor digitorium
- 5. Extensor digitimini
- 6. Abductor pollicis longus.
- 7. Extensor pollicis brevis.
- 8. Extensor pollicis longus.
- 9. Extensor indicis.



# Radial Nerve Summary of main branches



# **Radial Nerve**

#### **Applied Anatomy**

#### **Transient paralysis**

- Improper use of crutch (pressing the nerve in the axilla)
- Saturday night palsy (draping the arm over the chair in a state of diminished consciousness)

Test. Extension of elbow. Result?

### Injury of the radial nerve

Most common-fracture of the shaft of the humerus The characteristic lesion is "WRIST DROP"

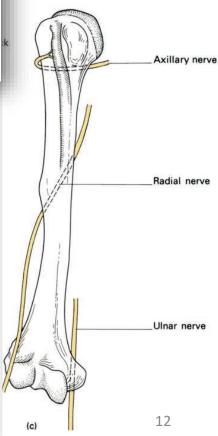
Inability to extend WRIST and metacarpophalangeal joint Elbow joint ????

Interphalangeal Joints???

Sensory loss -MINIMAL - WHY??





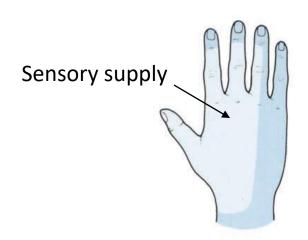


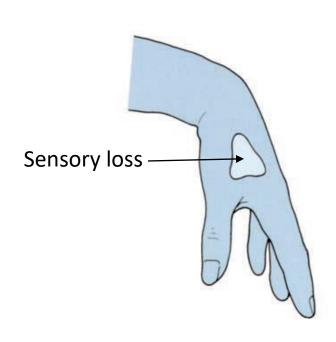
# Radial Nerve Applied Anatomy

Injury of the radial nerve

Sensory loss -MINIMAL - WHY??

Overlapping by the median and ulnar nerves





### **Applied Anatomy**

# Injury of the Deep Branch (Post. interosseous)

#### Causes:

- Fractures of the proximal end of the radius.
- During dislocation of the radial head.

#### **Clinical picture**

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"No wrist Drop" {Ref. snell p-539} Why?
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The nerve supply to the supinator and the extensor carpi radialis longus will be undamaged, and because the latter muscle is powerful, it will keep the wrist joint extended ------No wrist Drop.

# **Origin**:

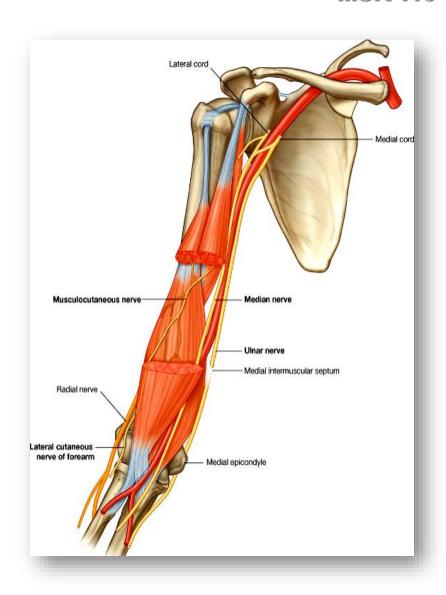
- Begins in the axilla
- Continuation of the medial cord

# Supplies:

- Some flexors muscles on ulnar side of the forearm
- Most of the intrinsic muscles of the hand
- Skin of the ulnar one and a half digits

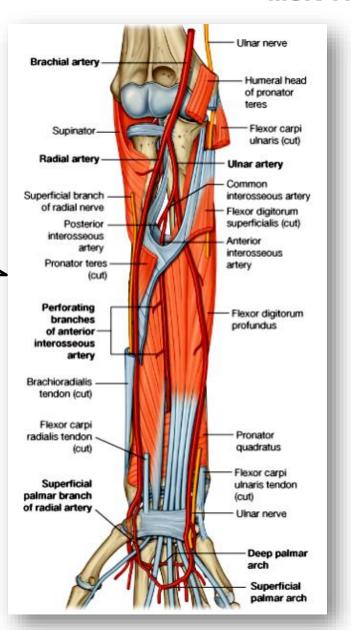
#### Course: In Arm

- Descends along the medial side of the following arteries:
  - Axillary.
  - Brachial.
- Pierces the Medial Intermuscular Septum.
- Passes behind the Medial Epicondyle of the humerus. (Funny Bone)



# Course: In Forearm

- Descend on FD Profundus
- Deep to the Flexor Carpi Ulnaris.
  - It is medial to Ulnar Artery



## Course: At wrist

#### Passes:

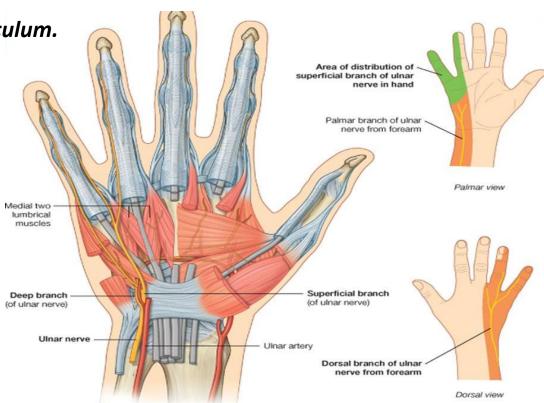
Anterior to Flexor Retinaculum.

Lateral to Pisiform bone.

Medial to Ulnar artery.

#### Divides into:

Superficial & Deep branches



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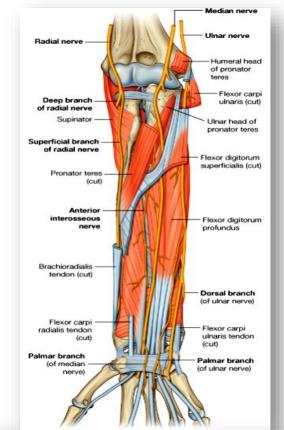
### **Branches: in the Forearm**

Muscular to (1 & 1/2 muscles)

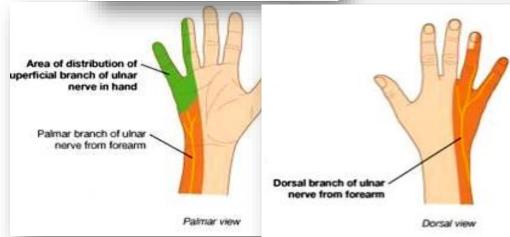
- 1. Flexor Carpi Ulnaris
- 2. Medial 112 of Flexor Digitorum Profundus

# Articular to Elbow joint Cutaneous:

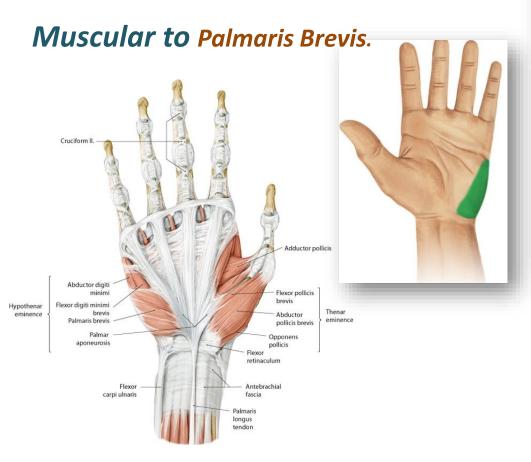
- 1. Dorsal (posterior) cutaneous:
  Supplies the skin over the back of
  Medial side of the hand & Medial
  1+1/2 fingers
- 2. Palmar cutaneous:
  Supplies the skin over the Medial part of the palm( skin over hypothenar eminence .

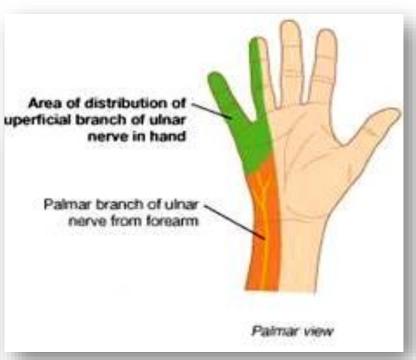


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# **Terminal Branches: Superficial**





#### **Cutaneous:**

Supplies the skin over the Palmar aspect of the medial 1+ ½ fingers (including nail beds).

### Terminal Branches: Deep Branch

#### Muscular to:

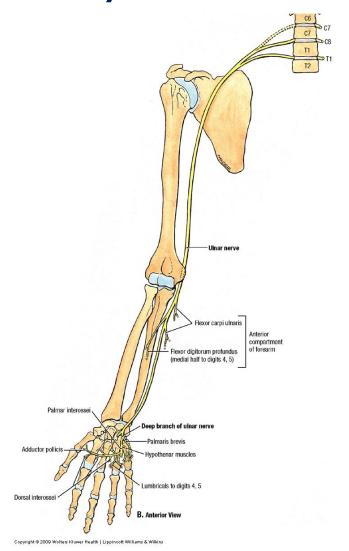
- Hypothenar Eminence.
- All Interossei (Palmar & Dorsal).
- 3<sup>rd</sup> & 4<sup>th</sup> (Radial) Lumbricals.
- Adductor pollicis

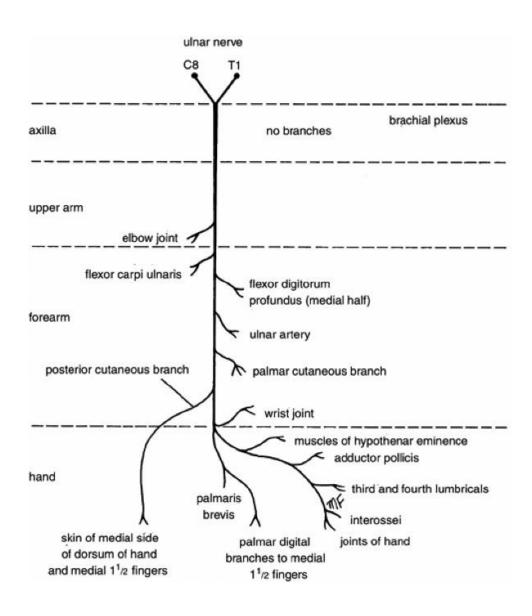


**Articular to Carpal joints** 

# **Ulnar Nerve**

## **Summary of main branches**





### **Applied Anatomy**

#### Most commonly injured

- Behind the elbow
- At wrist
- The classical sign of a low lesion "CLAW HAND"
  - Hyperextension of the MCP joints of ring and little fingers
  - Flexion of the IP joints

#### WHY?

- Paralysis of interossei & lumbricals
- Unopposed actions of extensors & FDP





### **Applied Anatomy**

#### Behind the elbow

- Atrophy of Ulnar side of forearm.
- Flexion of the wrist with Abduction.
- Wasting of Hypothenar Eminence
- Claw hand.———

#### At the elbow

- Claw Hand.
- Wasting of Hypothenar Eminence.

#### **HOME WORK**

- Cubital Tunnel Syndrome ?? Funny bone
- Ulnar tunnel syndrome, also known as Guyon's canal syndrome is caused by entrapment of the ulnar nerve in the Guyon canal

