

# Arm and elbow

## Musculoskeletal block- Anatomy-lecture 7

Editing file



# Objectives

- ✓ Describe the attachments, actions and innervations of:
  - a. Biceps brachii
  - b. Coracobrachialis
  - c. Brachialis
  - d. Triceps brachii
- ✓ Define the boundaries of the cubital fossa and enumerate its contents.
- ✓ Demonstrate the following features of the elbow joint:
  - a. Articulating bones
  - b. Capsule
  - c. Lateral & medial collateral ligaments
  - d. Synovial membrane
- ✓ **Demonstrate the movements; flexion and extension** of the elbow.
- ✓ List the **main muscles** producing the above movements.
- ✓ Define the **boundaries of the cubital fossa** and enumerate its contents.

## Color guide :

Only in boys slides in **Blue**

Only in girls slides in **Purple**

important in **Red**

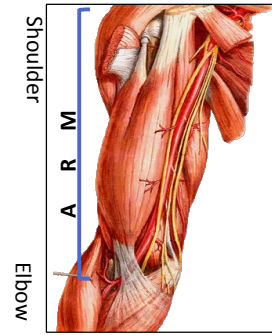
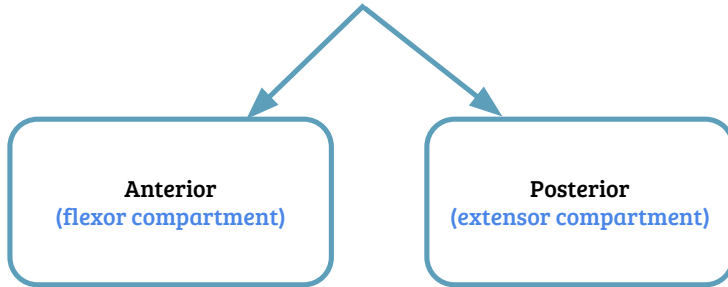
Doctor note in **Green**

Extra information in **Grey**

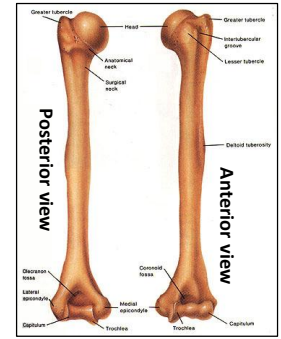
# THE ARM:

An aponeurotic sheet separating various muscles of the upper limbs, including lateral and medial humeral septa.

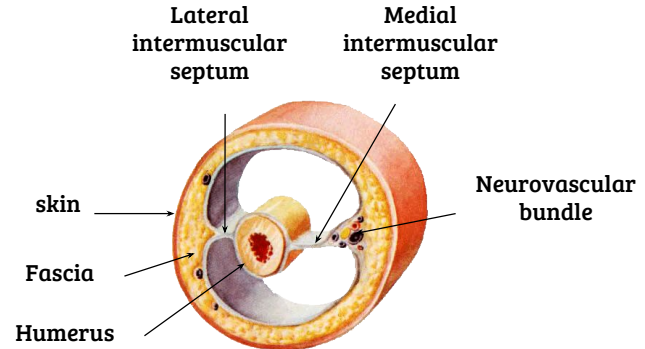
- The lateral and medial **intermuscular septa** divide the **distal part** of the arm into two compartments



**Arm**

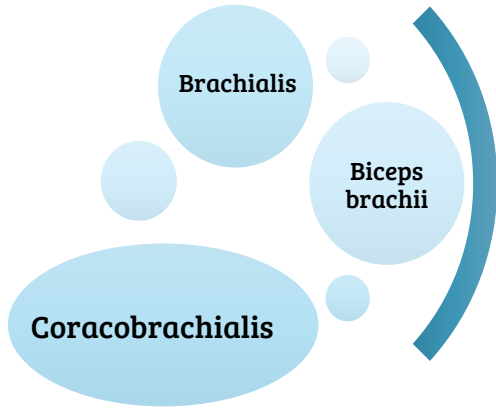
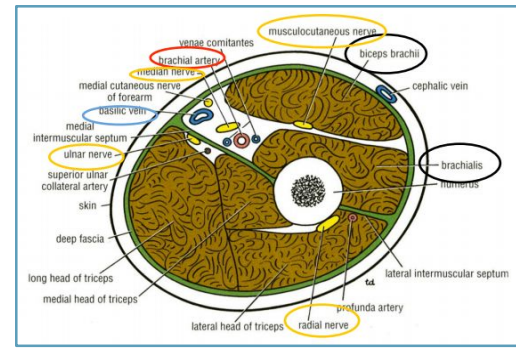


**Humerus**

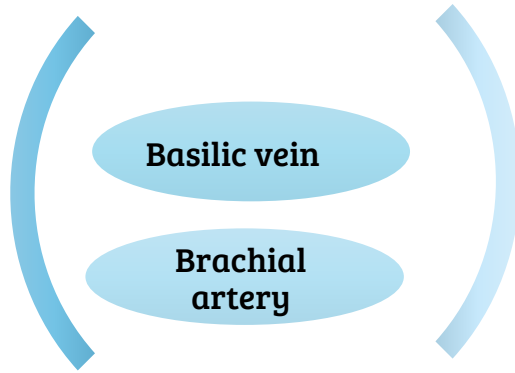


# 1-Anterior Fascial Compartment:

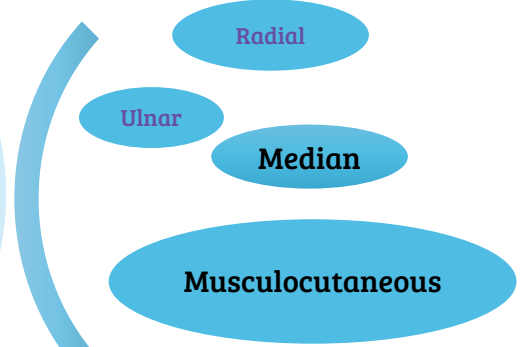
Note: the radial and ulnar nerves begin in the anterior compartment then pierce the intermuscular septum and enter the posterior compartment



**1. muscles**


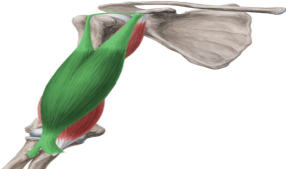
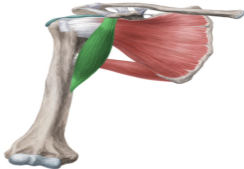
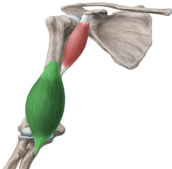


**2. Blood vessels**



**3. Nerves**

# Muscles Of Anterior Compartment

Muscles	Biceps Brachii	Coracobrachialis	Brachialis
Origin	<p><b>-Long Head</b> (lateral head) from <b>supraglenoid tubercle</b> of <b>scapula</b> (intracapsular)</p> <p><b>-Short Head</b> from the tip of <b>coracoid process</b> of scapula</p> <p>-The two heads join in the <b>middle</b> of the arm</p>	Tip of the <b>coracoid process</b> of <b>scapula</b> (with short head of biceps brachii)	<b>Front</b> of the <b>lower half</b> of <b>humerus</b>
Insertion	<p>-Into the <b>posterior</b> part of the <b>radial tuberosity</b>.</p> <p>-Into the <b>deep fascia</b> of the <b>medial</b> aspect of the <b>forearm</b> through <b>bicipital aponeurosis</b></p>	<b>Middle</b> of the <b>medial</b> side of the <b>shaft</b> of the <b>humerus</b>	<b>Anterior</b> surface of <b>coronoid process</b> of <b>ulna</b>
Nerve Supply	Musculocutaneous		<p><b>-Musculocutaneous</b> (medial part)</p> <p><b>-Radial</b> (lateral part)</p>
Action	<p>-Strong supinator of the forearm <b>used in screwing</b> <b>Powerful</b> → </p> <p>-flexor of elbow</p> <p>-Weak flexor of shoulder</p>	<p>-Flexor</p> <p>-Weak adductor of the <b>arm</b></p>	<b>Strong flexor</b> of the <b>forearm</b>
Pictures			

## 2-Posterior Fascial Compartment:

### 1. Muscles :

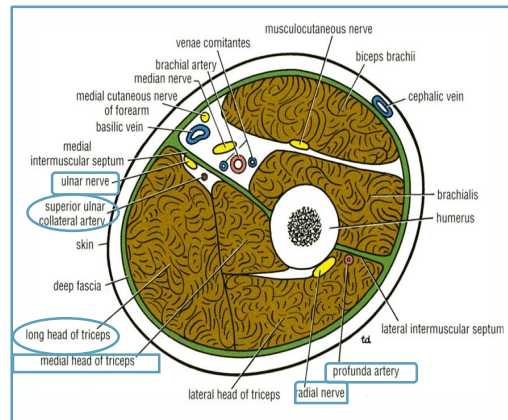
Triceps brachii.

### 2. Vessels :

- Profunda brachii (a branch from brachial artery).
- Ulnar collateral arteries.

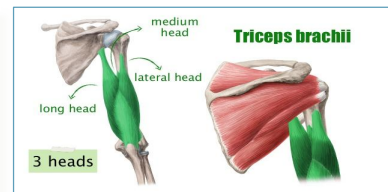
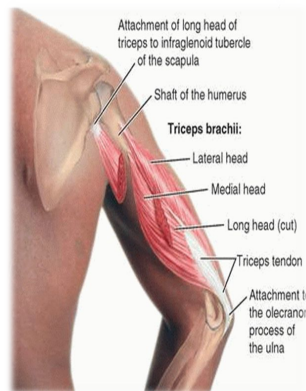
### 3. Nerves :

- Ulnar nerve.
- Radial nerve.



## Triceps brachii:

Origin	<ul style="list-style-type: none"> <li>• <b>Long head:</b> from <b>infraglenoid tubercle</b> of the <b>scapula</b>. (remember the origin of the long head of the bicep head is supraglenoid tubercle)</li> </ul>
	<ul style="list-style-type: none"> <li>• <b>lateral head:</b> from the <b>upper half</b> of the <b>posterior surface</b> of the shaft of the <b>humerus</b> <b>above</b> the <b>spiral groove</b>.</li> </ul>
	<ul style="list-style-type: none"> <li>• <b>Medial head:</b> from the <b>lower half</b> of the <b>posterior surface</b> of the shaft of the <b>humerus</b> <b>below</b> the <b>spiral groove</b>.</li> </ul>
Insertion	<ul style="list-style-type: none"> <li>• <b>Common tendon</b> inserted into the <b>upper surface</b> of the <b>olecranon process</b> of <b>ulna</b> .</li> </ul>
Nerve Supply	<ul style="list-style-type: none"> <li>• Radial nerve.</li> </ul>
Action	<ul style="list-style-type: none"> <li>• Strong extensor of the <b>elbow joint</b>.</li> </ul>

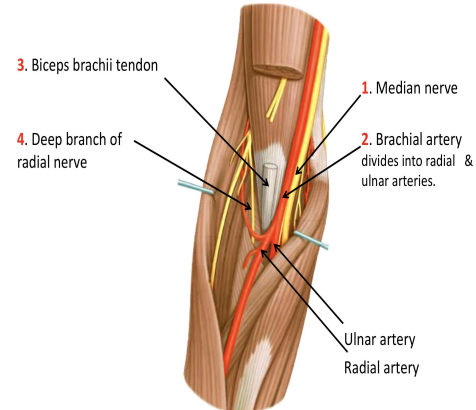
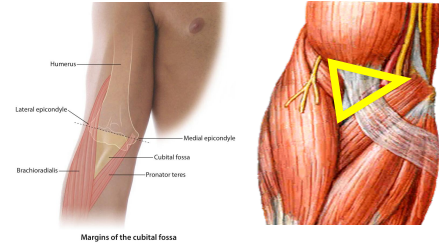


# Cubital fossa:

is a an area of **transition** between the anatomical arm and the forearm, located as **triangular depression** on the anterior surface of the elbow joint.

It is a **triangular depression** that lies **in front of the elbow**.

<b>Boundaries</b>	<ul style="list-style-type: none"><li>● <b>Base:</b> Line drawn through the <b>two epicondyles of humerus</b>.</li></ul>
	<ul style="list-style-type: none"><li>● <b>Laterally:</b> Brachioradialis.</li></ul>
	<ul style="list-style-type: none"><li>● <b>Medially:</b> Pronator teres.</li></ul>
	<ul style="list-style-type: none"><li>● <b>Roof:</b> Skin, superficial &amp; deep fascia and bicipital aponeurosis.</li></ul>
<ul style="list-style-type: none"><li>● <b>Floor:</b> <b>Brachialis</b> Medially and <b>supinator</b> Laterally.</li></ul>	
<b>Contents</b> From the) Medial to the (Lateral side	<ol style="list-style-type: none"><li>1. Median nerve.</li><li>2. Brachial artery divides into radial &amp; ulnar arteries.</li><li>3. Biceps brachii tendon.</li><li>4. Deep branch of radial nerve.</li></ol>



## Cubital fossa:

### Clinical relevance:

- The **brachial pulse** can be felt by palpating immediately medial to the biceps tendon in the cubital fossa.
- The median cubital vein is located superficially within the roof of the cubital fossa.
- It connects the basilic and cephalic veins. And ce be accessed easily-this makes it a common site for **venipuncture**.





# ELBOW JOINT:

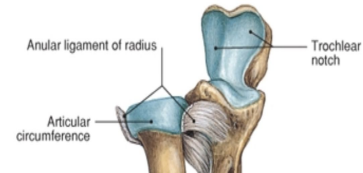
It is the joint connecting the upper arm to the forearm, and is classed as an **Uniaxial, Synovial Hinge Joint**.

Consists of two separate Articulations:

**Above:** **Trochlea** and the **capitulum** of the **humerus**.



**Below:** **Trochlear notch** of the **ulna** and the **head** of the **radius**.



The articular surfaces are covered with **articular (hyaline) cartilage**

# CAPSULE:

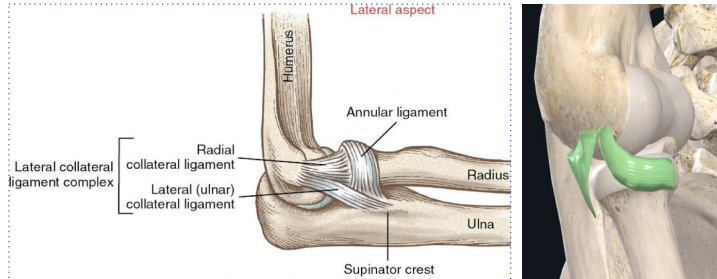
- The elbow joint has a capsule enclosing the joint. This in itself is strong and fibrous, strengthening the joint.
- The joint capsule is thickened medially and laterally to form collateral ligaments, which stabilize the flexing and extending motion of the arm.

Capsule	Above	Below	Picture
<b>Anteriorly Attached</b>	To the <b>humerus</b> along the <b>upper margins</b> of the <b>coronoid</b> and <b>radial fossa</b> and to <b>the front of the medial and lateral epicondyles</b>	To the margin of the <b>coronoid process</b> of the <b>ulna</b> and to the <b>annular ligament</b> , which <b>surrounds the head</b> of the <b>radius</b> .	
<b>Posteriorly attached</b>	To the <b>margins</b> of the <b>olecranon fossa</b> of the <b>humerus</b>	To the <b>upper margin</b> and sides of the <b>olecranon process</b> of the <b>ulna</b> and to the <b>annular ligament</b> .	

# Ligaments of Elbow Joint:

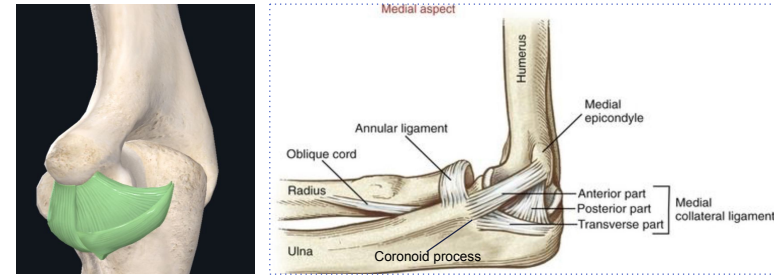
## Lateral ligament (radial collateral ligament)

Shape	Triangular
Apex	attached to the <b>Lateral epicondyle of humerus.</b>
Base	attached to the <b>upper part of the annular ligament.</b>



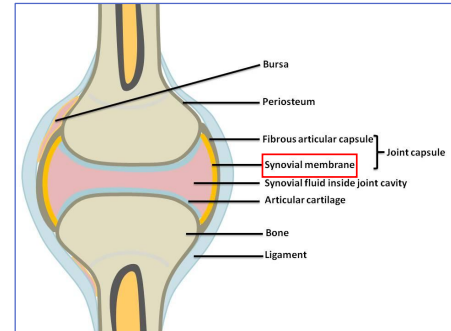
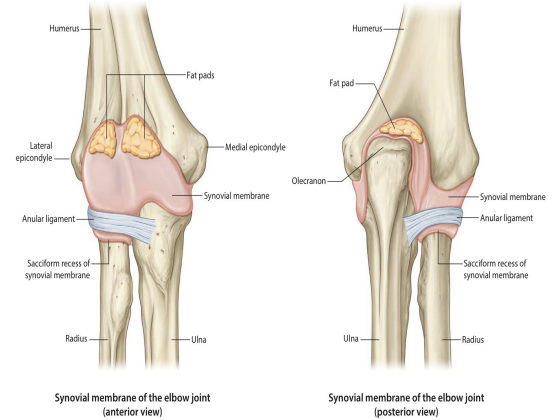
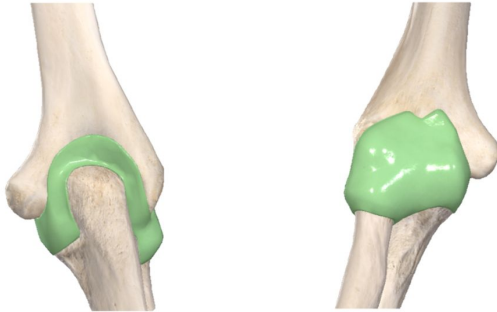
## Medial ligament (ulnar collateral ligament)

<b>Anterior</b> strong cord-like band	Between <b>Medial epicondyle</b> and the <b>coronoid process</b> of ulna.
<b>Posterior</b> weaker fan-like band	Between <b>Medial epicondyle</b> and the <b>olecranon process</b> of ulna.
<b>Transverse</b> band	Passes between the <b>anterior</b> and <b>posterior</b> bands.



# Synovial Membrane:

- This lines the **inner surface of the capsule** and covers fatty pads in the floors of the **coronoid, radial, and olecranon fossa**.
- Is **continuous below** with **synovial membrane** of the **superior radioulnar joint**  
"Contains the synovial fluid"

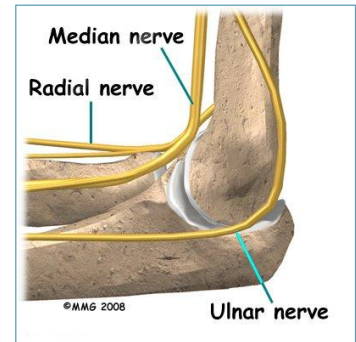
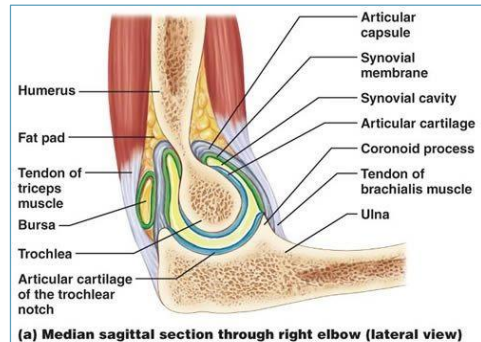


# Relation:

Anterior	Posterior	Lateral	Medial
<ul style="list-style-type: none"> <li>● Brachialis</li> <li>● Tendon of biceps</li> <li>● Median nerve</li> <li>● Brachial artery</li> </ul>	<ul style="list-style-type: none"> <li>● Triceps muscle</li> <li>● Small bursa intervening</li> </ul> <p>Bursa: sac filled with <u>synovial fluid</u> countering friction at a joint</p>	<ul style="list-style-type: none"> <li>● Common extensor tendon (attached to Lateral epicondyle of the humerus)</li> <li>● Supinator</li> </ul>	<ul style="list-style-type: none"> <li>● Ulnar nerve “ Considered the <b>largest unprotected</b> nerve by muscle or bone”.</li> </ul>

## Bursae around the elbow joint:

- Subcutaneous olecranon bursa
- Subtendinous olecranon bursa



# BURSA:

- A **bursa** is a membranous sac filled with **synovial fluid**.
- It acts as a cushion to **reduce** friction between the moving parts of a joint, limiting degenerative damage.
- There are many bursae in the elbow, but only a few have clinical importance :

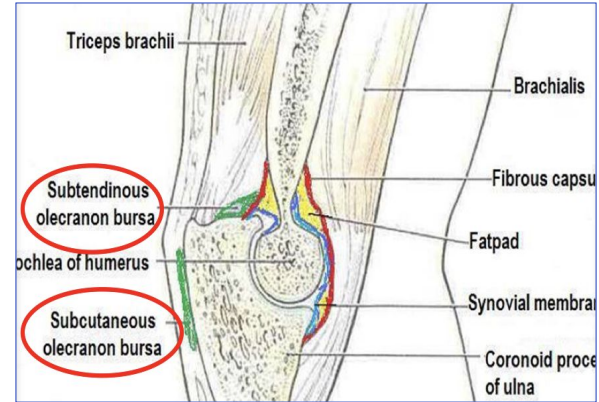
## Subtendinous bursa

between the olecranon and the tendon of the triceps brachii, reducing friction between the two structures during extension and flexion of the arm.

## Subcutaneous (olecranon) bursa

between the olecranon and the overlying connective tissue (implicated in olecranon bursitis).

Only found in boys slide



# Movement:

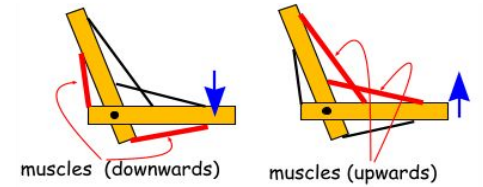
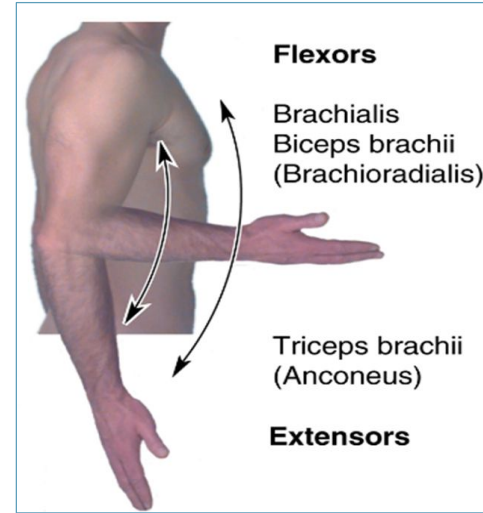
Extension	Flexion
Is limited by the tension of the <b>anterior ligament (medially)</b> and the <b>brachialis muscle</b> .	Is limited by the <b>anterior surfaces</b> of the <b>forearm</b> and <b>arm</b> coming into contact.

## Nerves innervation by branches from the:

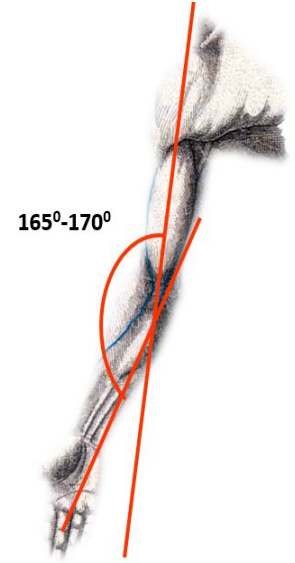
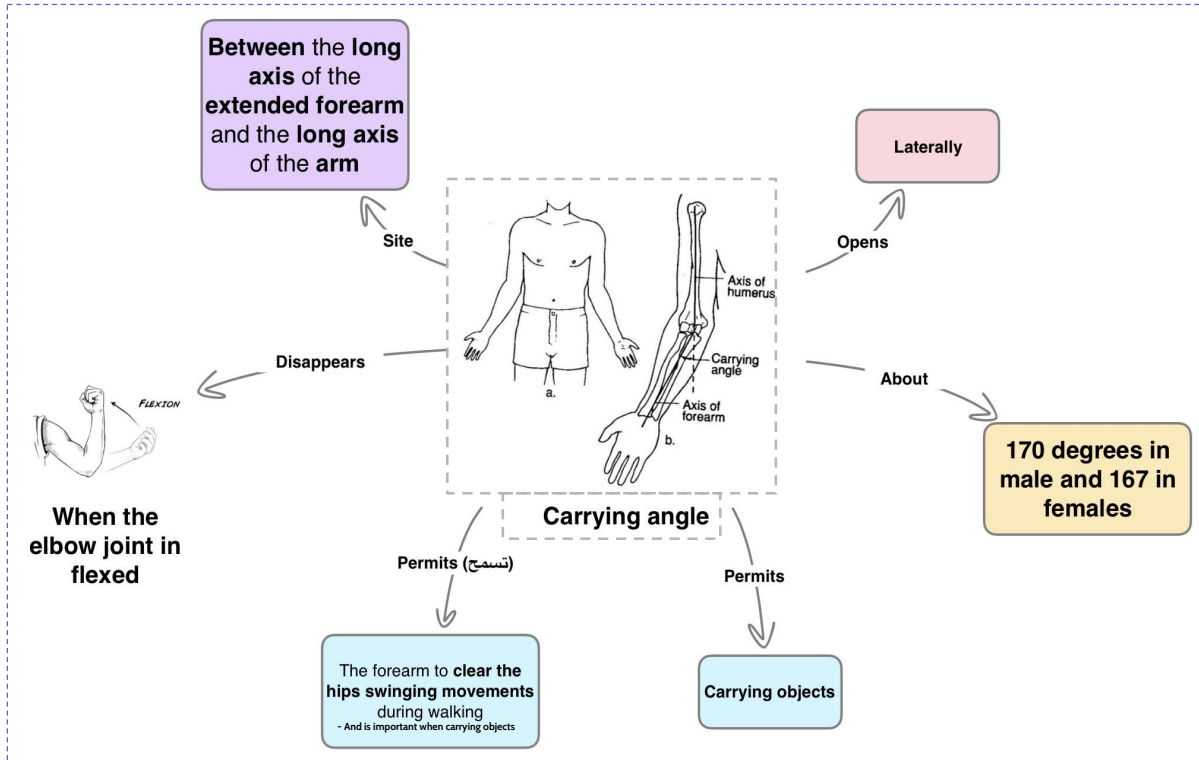


# Blood supply:

The arterial supply to the elbow joint is from the **cubital anastomosis**, which includes **recurrent** & **collateral** branches from the **deep brachial arteries**.



# Carrying Angle:

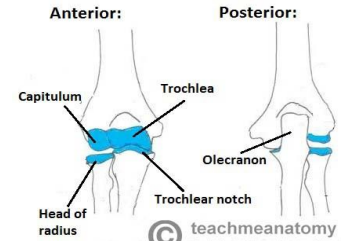




# Articulations and applied anatomy:

The elbow joint is **stable** because of the:

1. **Wrench-shaped articular surface** of the **olecranon** and the **pulley-shaped trochlea** of humerus.
2. **Strong medial and lateral ligaments.**



	Caused by	Illustration
<h2>Dislocation</h2> <ul style="list-style-type: none"> <li>• Elbow dislocations are common &amp; most are posterior.</li> <li>• <b>Posterior dislocation usually follows falling on the outstretched hand.</b></li> <li>• <b>Posterior dislocations</b> of the joint are <b>common in children</b> because the parts of the <b>bones</b> that stabilize the joint are <b>incompletely developed</b>.</li> </ul>		
<h2>Avulsion of the epiphysis</h2> <ul style="list-style-type: none"> <li>• <b>of the medial epicondyle</b> is also <b>common in childhood</b> because the <b>medial ligament</b> is <b>much stronger</b> than the <b>bond</b> of union <b>between</b> the <b>epiphysis</b> and the <b>diaphysis</b>.</li> <li>• They are usually a result from an avulsion (pull off) injury caused by : a <b>valgus stress</b> at the elbow and contraction of the flexor muscles as in :             <ol style="list-style-type: none"> <li>1. fall on an outstretched hand with the elbow in full extension</li> <li>2. posterior elbow dislocation</li> <li>3. direct blow</li> </ol> </li> </ul>		

\*The radius/ulna is dislocated posteriorly NOT the humerus

\*valgus : a deformity involving oblique displacement of part of a limb away from the midline.

# Summary

Team 435

Muscle:	Compartment:	Origin:	Insertion:	Nerve supply:	Action:
Biceps brachii	Anterior compartment (flexor compartment)	<b>Two heads:</b> - <b>Long head:</b> From <b>supraglenoid</b> tubercle of the scapula - <b>Short head:</b> from the tip of the coracoid process of the scapula <b>The two heads are joined in the middle of the arm</b>	- In the Posterior part of the radial tuberosity. - Into the deep fascia of the forearm through bicipital aponeurosis	Musculocutaneous	- <b>Strong flexor of the elbow.</b> - <b>Weak flexor of the shoulder.</b> - <b>Supinator of the forearm .</b>
Coracobrachialis	Anterior compartment (flexor compartment)	from the tip of the coracoid process of the scapula	Middle of the medial side of the shaft of the humerus	Musculocutaneous	- <b>flexor.</b> - <b>Weak adductor of the arm</b>
brachialis	Anterior compartment (flexor compartment)	Front of the lower half of humerus	Anterior surface of coronoid process of ulna	Musculocutaneous & radial	<b>Strong flexor of the forearm</b>
Triceps	posterior compartment (extensor compartment)	<b>Three heads:</b> - <b>Long head:</b> <b>infraglenoid</b> tubercle of the scapula. - <b>Lateral head:</b> <b>upper</b> half of the posterior surface of the shaft of humerus <b>above</b> the spiral groove. - <b>medial head:</b> <b>lower</b> half of the posterior surface of the shaft of humerus <b>below</b> the spiral groove.	Common tendon inserted into the upper surface of the olecranon process of ulna	Radial nerve	<b>Strong extensor of the elbow joint</b>

## CUBITAL FOSSA

**What is it?** The cubital fossa is a **triangular depression** that lies in front of the elbow

### Boundaries:

- **Base:** Line drawn through the two epicondyles of humerus
- **Laterally:** Brachioradialis
- **Medially:** Pronator teres
- **Roof:** Skin, superficial & deep fascia and bicipital aponeurosis
- **Floor:** Brachialis medially and supinator laterally.

### CONTENT OF CUBITAL FOSSA (From medial to lateral side)

1. Median nerve
2. Brachial artery divides into radial & ulnar arteries.
3. Biceps brachii tendon
4. Deep branch of radial nerve

# MCQs

**Question 1:** Which of the following is not a part of the flexor compartment ?

- A. Biceps
- B. median nerve
- C. brachial artery
- D. triceps

**Question 2:** What is the muscle that is responsible in “screwing” ?

- A.coracobrachialis
- B.biceps brachii
- C.brachialis
- D.triceps

**Question 3:**What is the origin of the short head of the biceps brachii?

- A. Coracoid process
- B. Supraglenoid tubercle
- C. Infraglenoid tubercle
- D.Medial border of scapula

**Question 4:**The lateral epicondyle of the humerus is attached to which part of the elbow ligaments?

- A. apex
- B. Base

**Question 5:** What nerve supplies the triceps brachii ?

- A. Median
- B. Ulnar
- C. Axillary
- D. Radial

**Question 6:** Brachialis origin is in front of the ..... half of humerus ?

- A.middle
- B.lower
- C.upper

**Question 7:**What is the origin of coracobrachialis ?

- A. supraglenoid tubercle of scapula
- B. Tip of the coracoid process of scapula
- C. Anterior surface of coronoid process of ulna
- D.Middle of the medial side of the shaft of the humerus

**Question 8:** Which of the following is bi-innervated?

- A.Biceps brachii
- B. Brachialis
- C. Coracobrachialis
- D.triceps

## Team members

### Boys team:

- Khalid AL-Dossari
- Naif Al-Dossari
- Faisal Alqifari
- Salman Alagla
- Ziyad Al-jofan
- Suhail Basuhail
- Ali Aldawood
- Khalid Nagshabandi
- Mohammed Al-huqbani
- Jihad Alorainy
- Khalid AlKhani
- Omar Alammari

### Team leaders

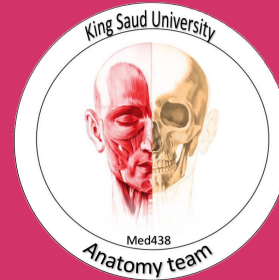
- Abdulrahman Shadid
- Ateen Almutairi

★ =This lecture done by

### Girls team :

- Ajeed Al Rashoud
- Taif Alotaibi
- Noura Al Turki
- ★ Amirah Al-Zahrani
- Alhanouf Al-haluli
- Sara Al-Abdulkarem
- Rawan Al Zayed
- ★ Razan Al Zohaifi
- ★ Renad Al Haqbani
- ★ Nouf Al Humaidhi
- Fay Al Buqami
- Jude Al Khalifah
- ★ Nouf Al Hussaini
- Alwateen Al Balawi
- Rahaf Al Shabri
- Danah Al Halees
- Haifa Al Waily
- Rema Al Mutawa
- Amirah Al Dakhilallah
- Maha Al Nahdi
- Renad Al Mutawa
- Ghaida Al Braithen
- Reham Yousef

Special thank for  
Anatomy team 436



Good luck

Give us your feedback:

