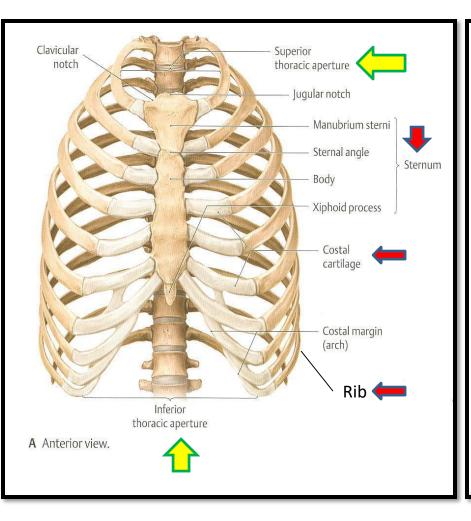


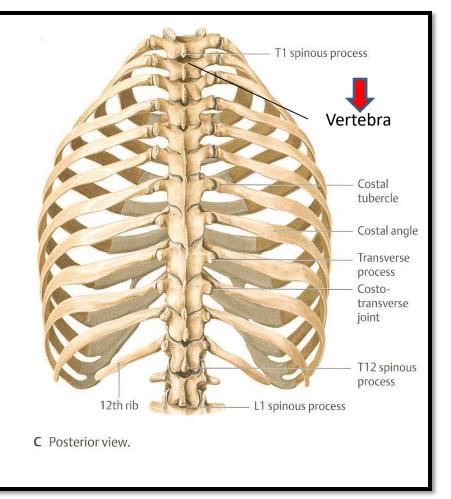
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OBJECTIVES

- At the end of the lecture, students should:
- Describe the components of the thoracic cage and their articulations.
- Describe in brief the respiratory movements.
- List the muscles involved in inspiration and in expiration.
- Describe the attachments of each muscle to the thoracic cage and its nerve supply.
- Describe the origin, insertion, nerve supply of diaphragm.

THORACIC CAGE

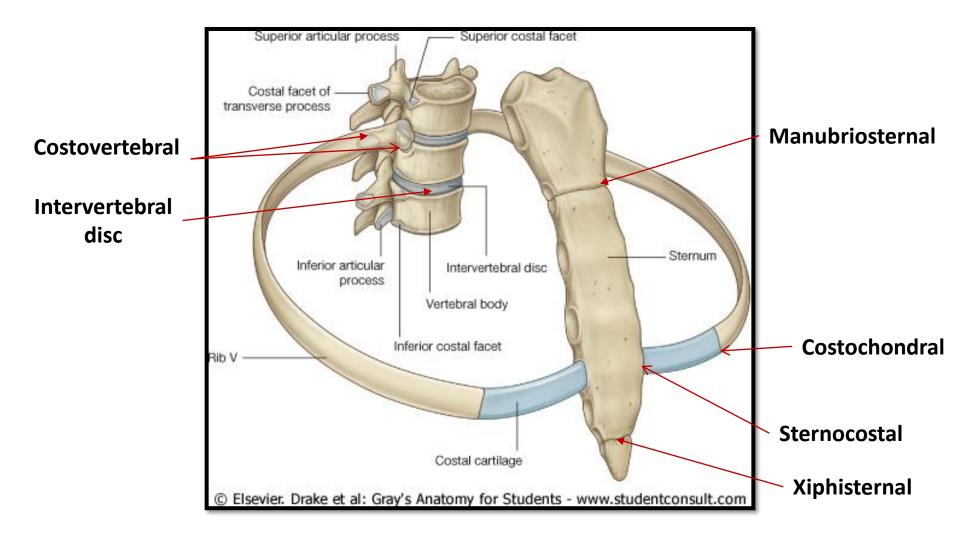




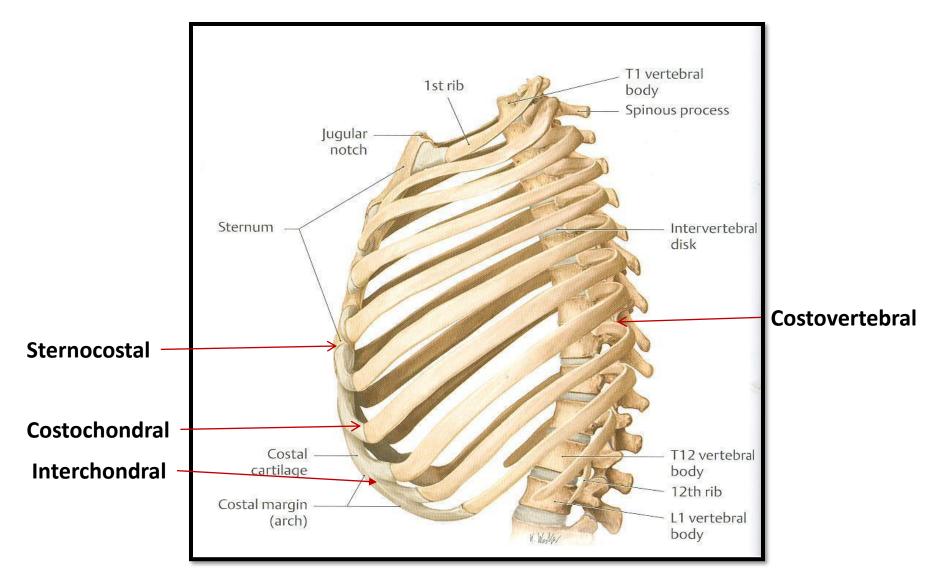
THORACIC CAGE

- **Conical** in shape
- **Has 2 apertures (openings):**
- 1. Superior (thoracic outlet): narrow, open, continuous with neck
- 2. Inferior: wide, closed by diaphragm
- **Given Service And Service And**
- 1. Sternum & costal cartilages: anteriorly
- 2. Twelve pairs of ribs: *laterally*
- 3. Twelve thoracic vertebrae: posteriorly

ARTICULATIONS



ARTICULATIONS



ARTICULATIONS

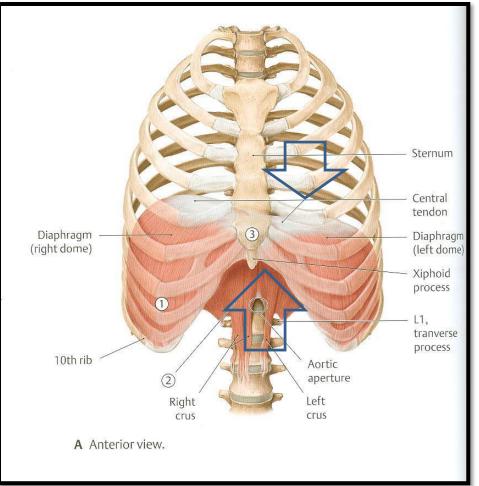
- Secondary cartilaginous: Manubriosternal joint, Xiphisternal joint and Intervertebral discs.
- Primary cartilaginous: 1st Sternocostal joint, Costochondral joints and Interchondral joints.
- Plane synovial joints: Costovertebral joints and the rest of Sternocostal joints.

Complete Respiration and the 3D Diaphragm produced by Three Treasures Studio

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RESPIRATORY MOVEMENTS A- MOVEMENTS OF DIAPHRAGM



Inspiration

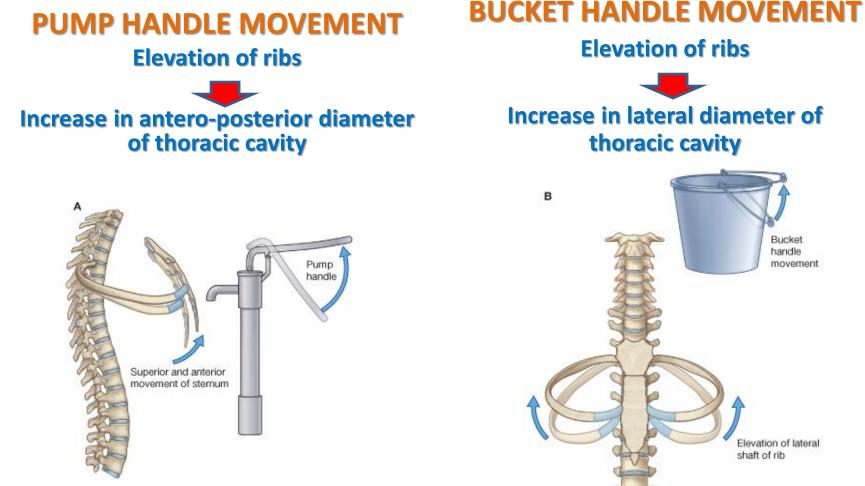
Contraction (descent) of diaphragm

Increase of vertical diameter of thoracic cavity

Relaxation (ascent) of diaphragm)

Expiration

RESPIRATORY MOVEMENTS B- MOVEMENTS OF RIBS



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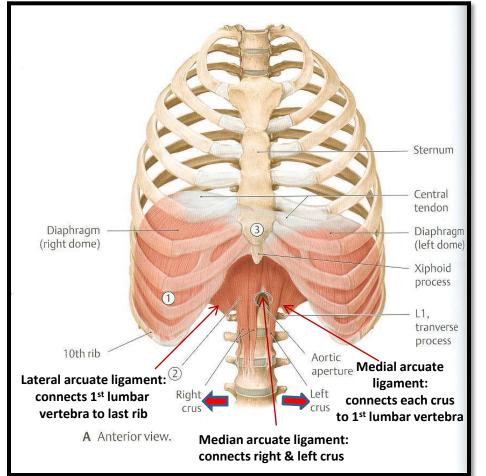
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INSPIRATORY MUSCLES

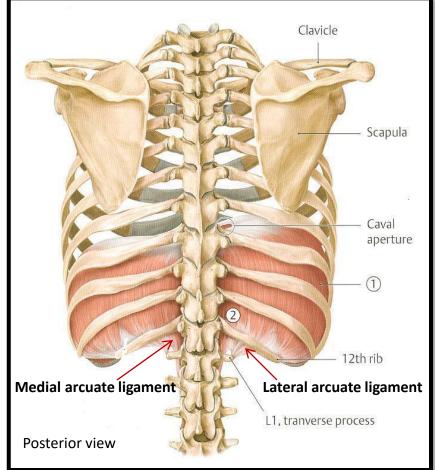
- **Diaphragm (most important muscle)**
- **Rib elevators: external intercostal muscles**
- Accessory muscles (only during forced inspiration), such as:
- 1. Muscles attaching cervical vertebrae to first & second rib: scalene muscles
- 2. Muscles attaching thoracic cage to upper limb: pectoralis major

ORIGIN OF DIAPHRAGM

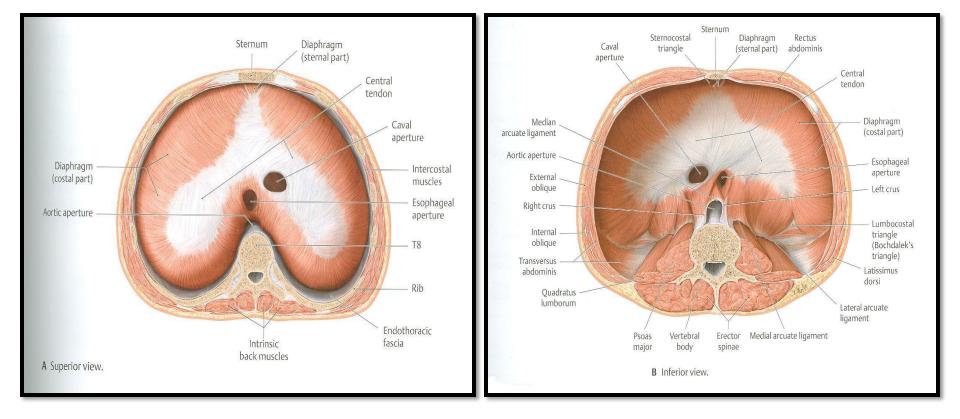
Costal: lower 6 costal cartilages
 Sternal: xiphoid process of sternum



2) Vertebral: upper 3 lumbar vertebrae (right & left crus + arcuate ligaments)



INSERTION OF DIAPHRAGM (CENTRAL TENDON)



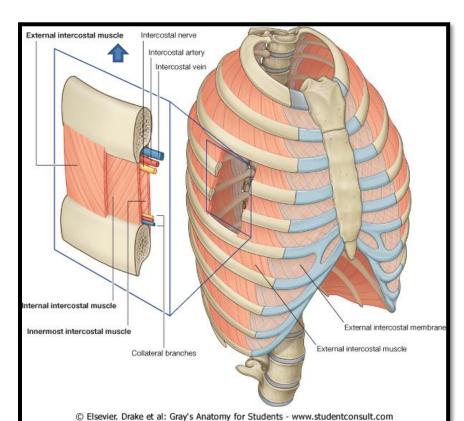
DIAPHRAGM

- A musculotendinous partition between thoracic & abdominal cavity.
- Convex toward thoracic & concave toward abdominal cavity.
- Attached to: sternum, costal cartilages,12th rib & lumbar vertebrae.
- Fibers converge to join the central tendon.
- Nerve supply: phrenic nerve (C3,4,5), penetrates diaphragm & innervates it from abdominal surface
- Action: contraction (descent) of diaphragm increase vertical diameter of thoracic cavity (essential for normal breathing).

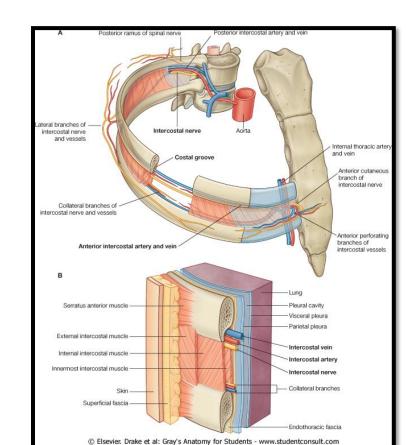
EXTERNAL INTERCOSTAL

Attachments: from lower border of rib above to upper border of rib below

Direction of fibers: downward
 & medially

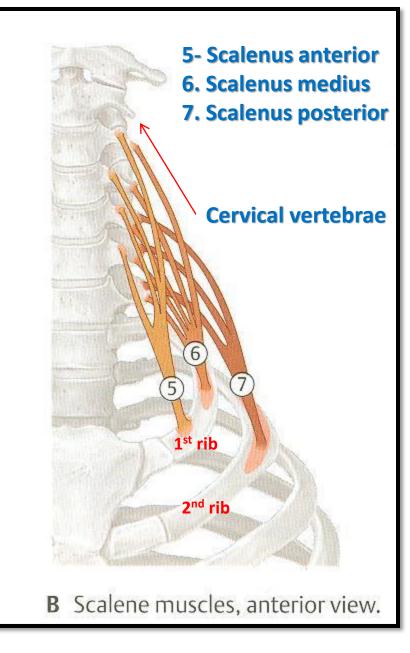


Nerve supply: intercostal nerves
 Action: rib elevators (inspiratory)



SCALENE MUSCLES

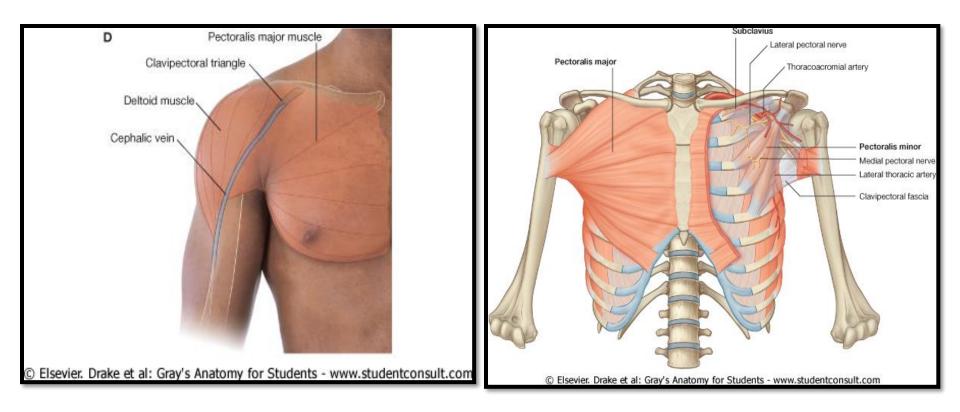
Origins: cervical vertebrae Insertions: 1st rib (scalenus anterior and medius) & 2nd rib (scalenus posterior) Action: elevate 1st & 2nd ribs (inspiratory)



PECTORALIS MAJOR

Origin: clavicle + sternum + costal cartilages Insertion: humerus

 Action: increases anteroposterior diameter of thoracic cavity, when arm is fixed (inspiratory)



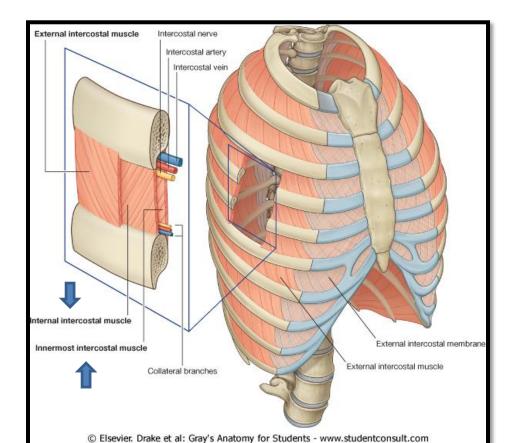
EXPIRATORY MUSCLES

Operation Operation Operation

- Rib depressors:
- 1. Internal intercostal
- 2. Innermost intercostal
- 3. Subcostals
- 4. Transversus thoracis
- Anterior abdominal wall muscles:
- **1. External oblique**
- 2. Internal oblique
- 3. Transversus abdominis
- 4. Rectus abdominis

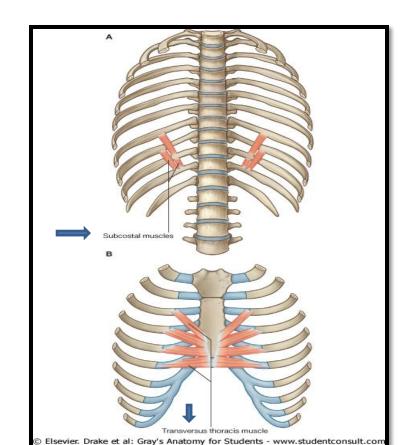
RIB DEPRESSORS: REST OF INTERCOSTAL MUSCLES

Internal intercostal Innermost intercostal Direction: backward & laterally



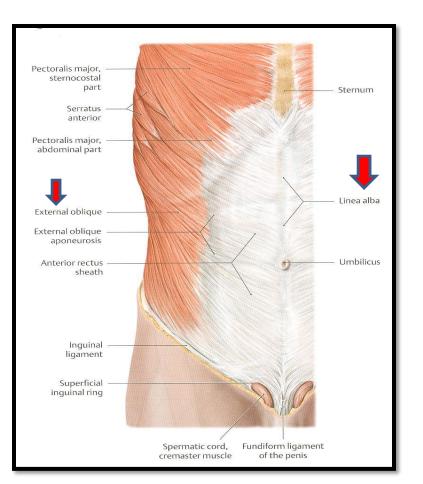
- 3. Subcostal
- 4. Transversus thoracis

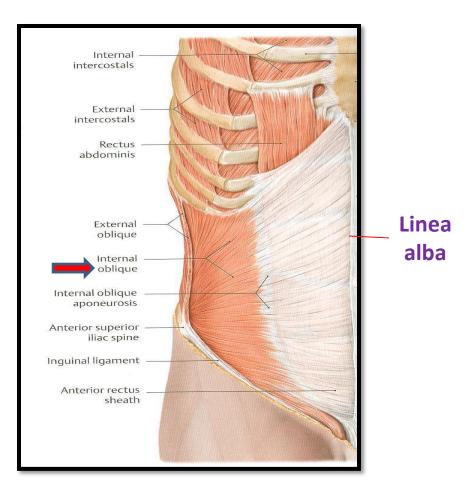
Nerve supply: intercostal nerves (ventral rami of T1-T11)



ANTERIOR ABDOMINAL WALL

External oblique (outer layer) Internal oblique (middle layer) Direction: downward & medially Direction: upward & medially



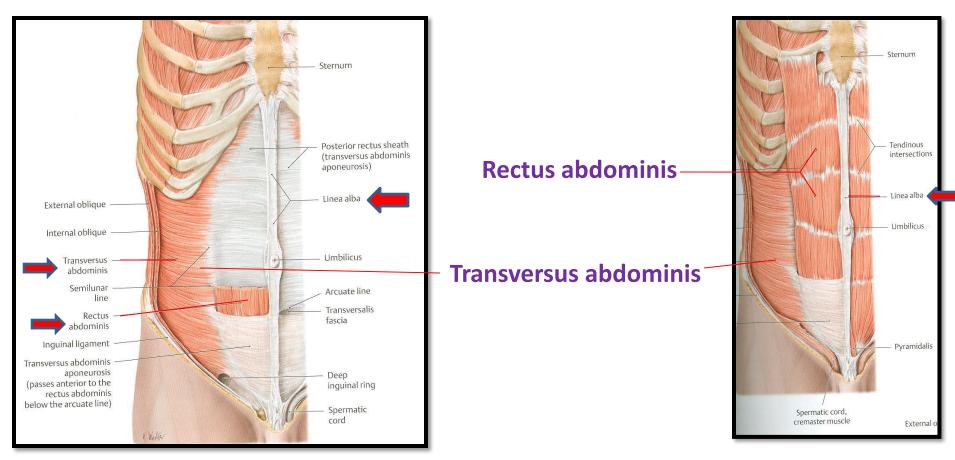


ANTERIOR ABDOMINAL WALL

Transversus abdominis (inner layer) •Direction: transverse

Rectus abdominis

Direction: vertical



Anterior abdominal wall

- Is formed of 3 layers of muscles of fibers running in different directions (to increase strength of anterior abdominal wall)
- The 3 muscles form a sheath in which a fourth muscles lies (rectus abdominis)
- Muscles are attached to: sternum, costal cartilages and ribs
 + hip bones
- The aponeurosis of the 3 muscles on both sides fuse in the midline to form linea alba
- Action (during forced expiration): Compression of abdominal viscera to help in ascent of diaphragm (during forced expiration)
- Nerve supply: lower 5 intercostal nerves (T7 T11), subcostal nerve (T12) and first lumbar nerve.

SUMMARY OF RESPIRATORY MOVEMENTS **Expiration** Inspiration

Quiet Inspiration (active)

Contraction (Descent) of diaphragm



Increase in **vertical** diameter

Elevation of ribs (external intercostal)

Increase in: - anteroposterior diameter - lateral diameter

Forced Inspiration (active)

Accessory muscles of inspiration:

- **Pectoralis major** 1.
- Scalene muscles

Quiet Expiration (passive)

Elastic recoil of lung 1.

Relaxation of diaphragm & external 2. intercostal

Forced Expiration (active):

Contraction of anterior abdominal wall muscles



Ascent of diaphragm

Depression of ribs (rest of intercostal muscles)

QUESTIONS

- Are the following muscles have a respiratory role? If yes, what is it?
- 1. Levatores costarum.
- 2. Serratus posterior superior.
- 3. Serratus posterior inferior.
- 4. Pectoralis minor.
- 5. Serratus anterior.
- 6. Latissimus dorsi.
- 7. Quadratus lumborum.
- Why diaphragm is supplied by cervical nerves?
- Why right crus of diaphragm is larger than left crus?

