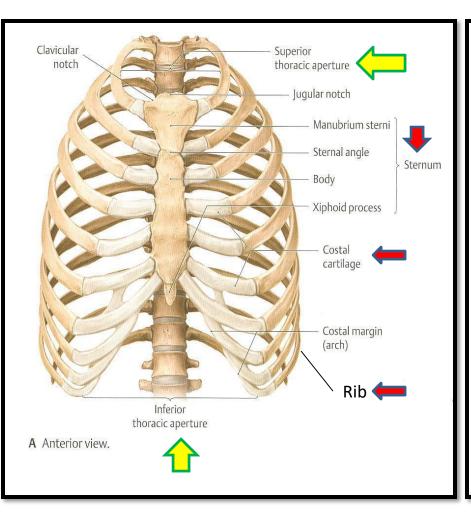


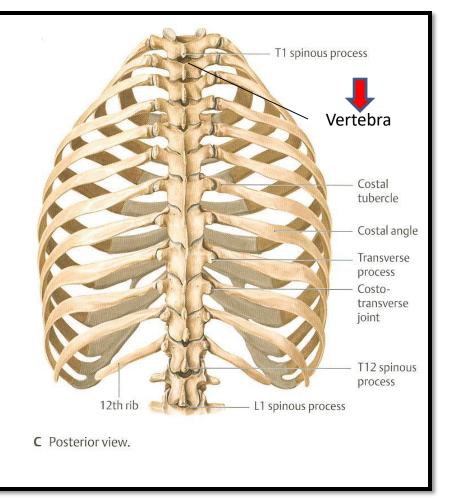
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# **OBJECTIVES**

- 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**

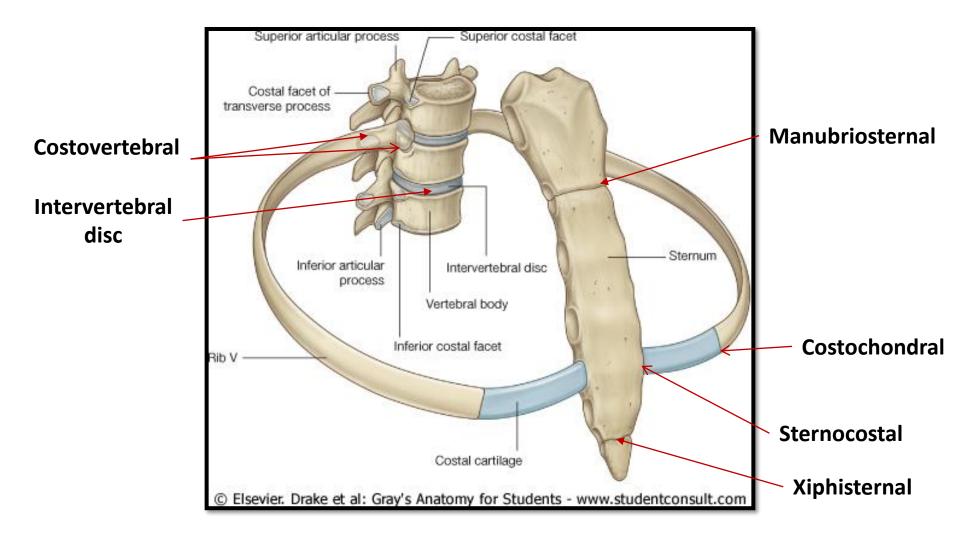




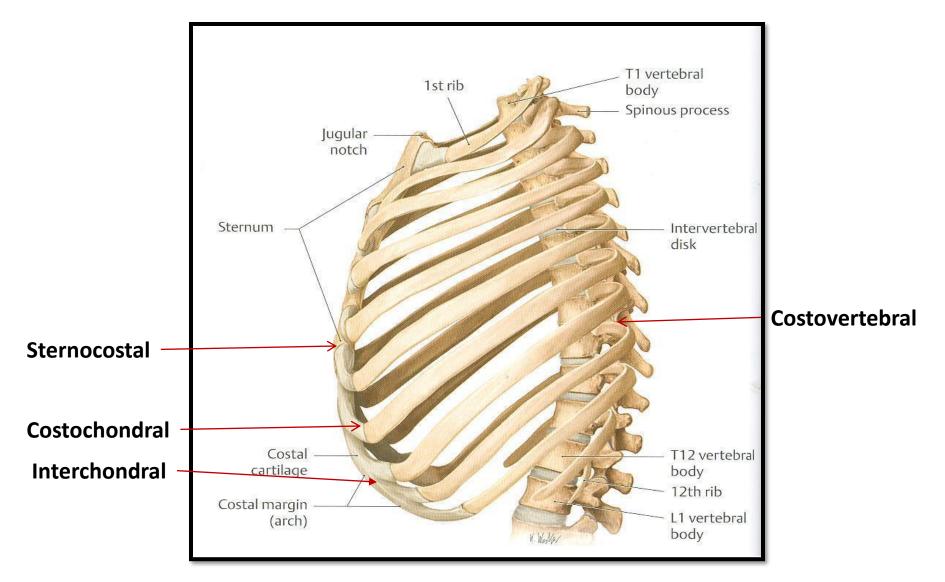
# THORACIC CAGE

- **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

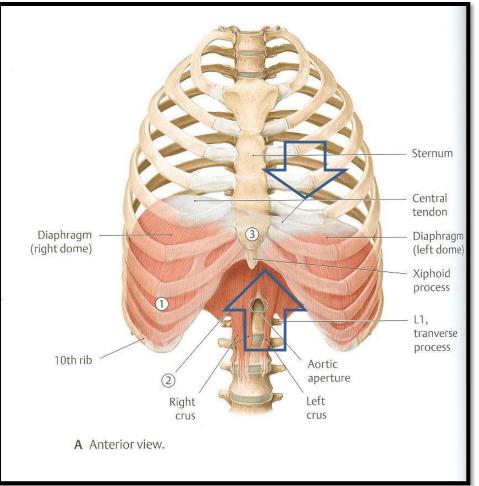
- Secondary cartilaginous: Manubriosternal joint, Xiphisternal joint and Intervertebral discs.
- Primary cartilaginous: 1<sup>st</sup> Sternocostal joint, Costochondral joints and Interchondral joints.
- Plane synovial joints: Costovertebral joints and the rest of Sternocostal joints.

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

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# RESPIRATORY MOVEMENTS A- MOVEMENTS OF DIAPHRAGM



Inspiration

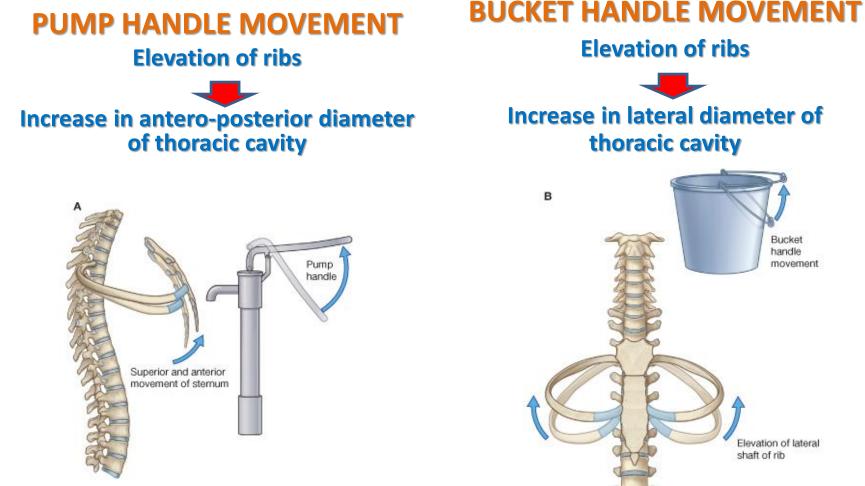
### Contraction (descent) of diaphragm

### Increase of vertical diameter of thoracic cavity

### Relaxation (ascent) of diaphragm)

**Expiration** 

## RESPIRATORY MOVEMENTS B- MOVEMENTS OF RIBS



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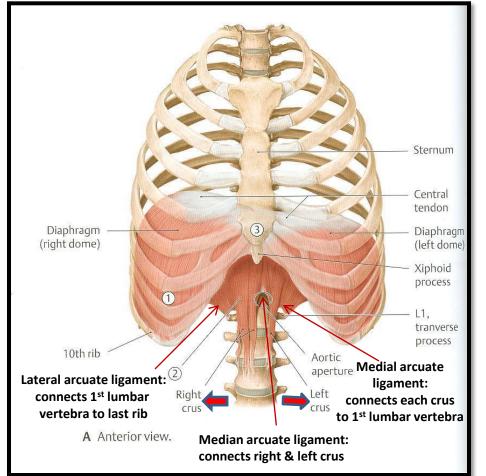
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# **INSPIRATORY MUSCLES**

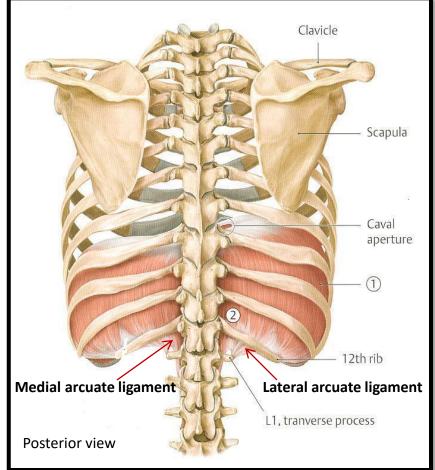
- **Diaphragm (most important muscle)**
- **Rib elevators: external intercostal muscles**
- Accessory muscles (only during forced inspiration), such as:
- 1. Muscles attaching cervical vertebrae to first & second rib: scalene muscles
- 2. Muscles attaching thoracic cage to upper limb: pectoralis major

# **ORIGIN OF DIAPHRAGM**

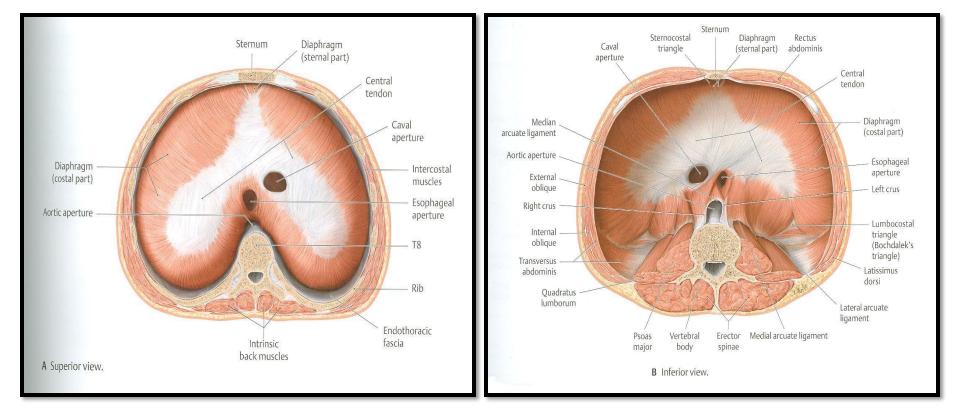
Costal: lower 6 costal cartilages
 Sternal: xiphoid process of sternum



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



# INSERTION OF DIAPHRAGM (CENTRAL TENDON)



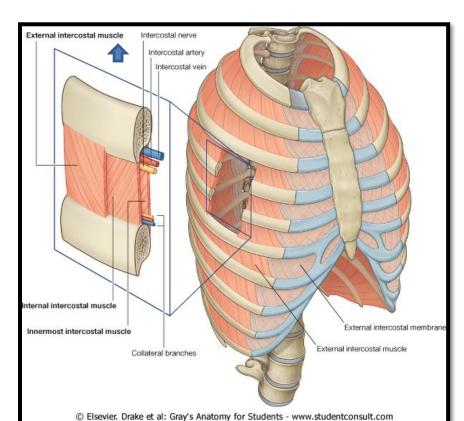
# DIAPHRAGM

- A musculotendinous partition between thoracic & abdominal cavity.
- Convex toward thoracic & concave toward abdominal cavity.
- Attached to: sternum, costal cartilages,12<sup>th</sup> 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).

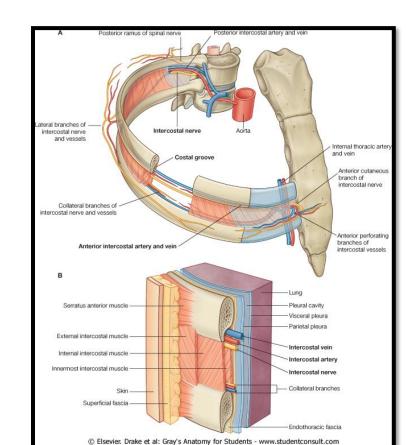
# **EXTERNAL INTERCOSTAL**

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

Direction of fibers: downward
 & medially

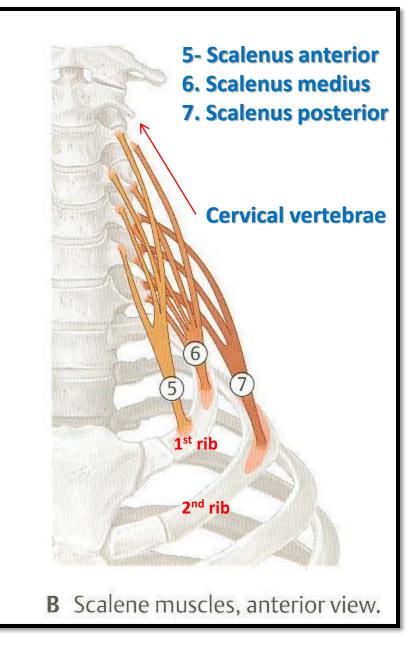


Nerve supply: intercostal nerves
 Action: rib elevators (inspiratory)



## **SCALENE MUSCLES**

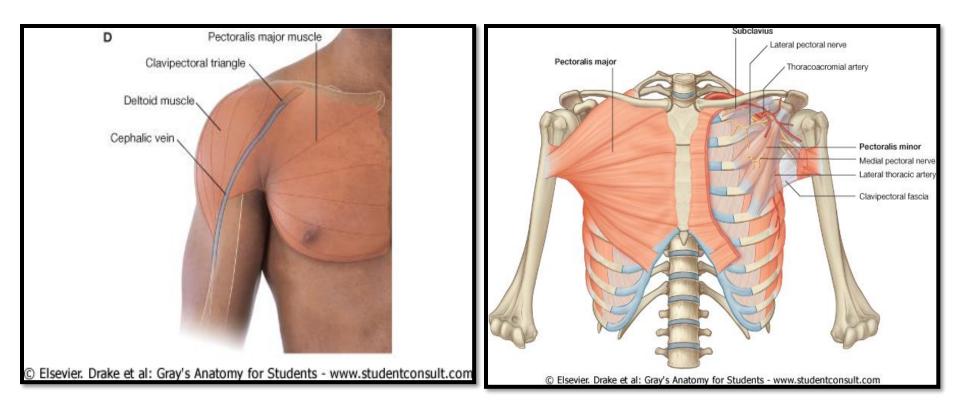
Origins: cervical vertebrae Insertions: 1<sup>st</sup> rib (scalenus anterior and medius) & 2<sup>nd</sup> rib (scalenus posterior) Action: elevate 1<sup>st</sup> & 2<sup>nd</sup> ribs (inspiratory)



# **PECTORALIS MAJOR**

# Origin: clavicle + sternum + costal cartilages Insertion: humerus

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



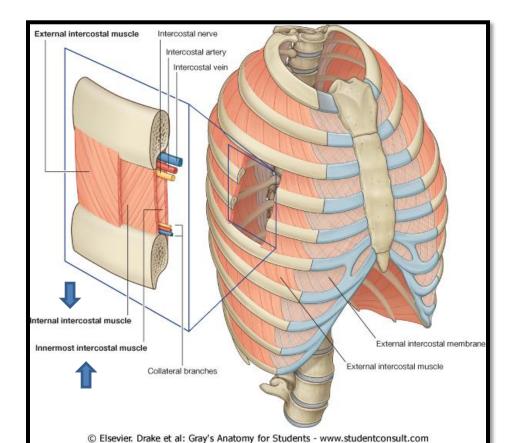
# **EXPIRATORY MUSCLES**

# **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

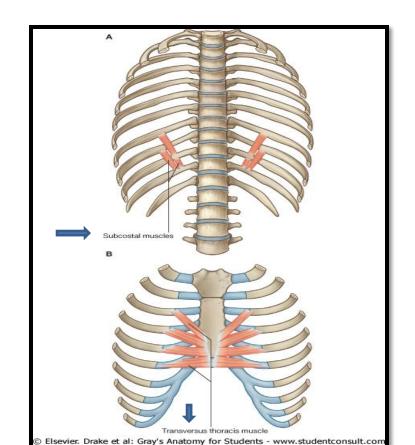
## RIB DEPRESSORS: REST OF INTERCOSTAL MUSCLES

# Internal intercostal Innermost intercostal Direction: backward & laterally



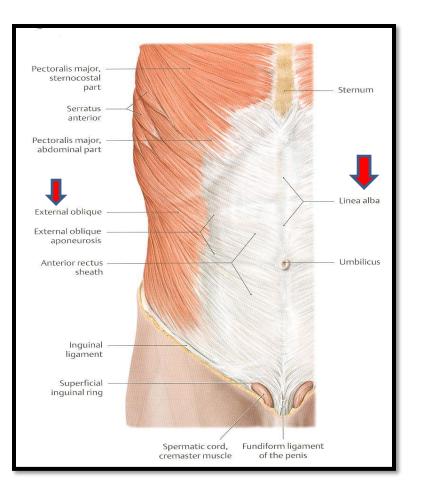
- 3. Subcostal
- 4. Transversus thoracis

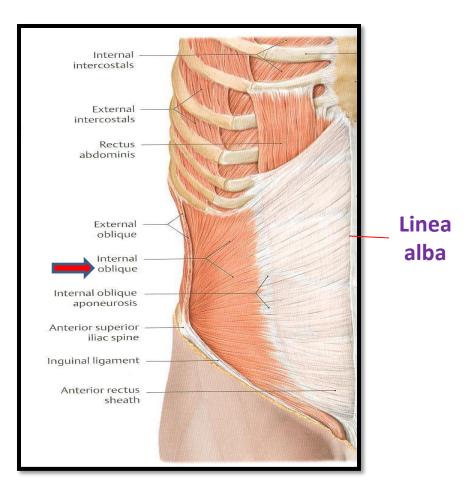
**Nerve supply:** intercostal nerves (ventral rami of T1-T11)



## **ANTERIOR ABDOMINAL WALL**

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



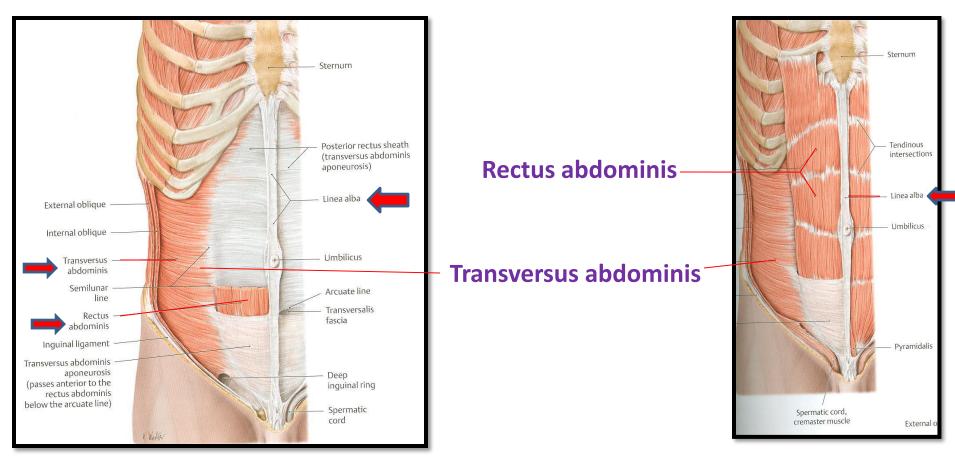


## **ANTERIOR ABDOMINAL WALL**

### 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?

