# **GENERAL ARTHROLOGY**

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Lecture 7 - DENTISTRY - Autumn 2016

# Skeletal junctions Juncturae seu Systema articulare

Two main types of connections:

**1. Synathrosis** /fibrous joint, fluent connection/ - union by some kind of the connective tissue

(fibrous tissue, cartilage, bone)

2. Diarthrosis /synovial joint, connection by touch/ - union by touch (by articular surfaces and another additional features)

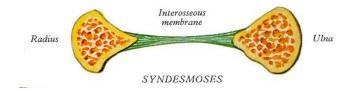
fibrocartilage Articular cartilage

# Fibrous joint (synarthrosis)

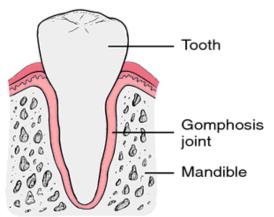
- Continuous connections by a layer of connective tissue between bones nearly immobile
- The articulare surface are missing!
- Differentiation according the type of connective tissue
- 1) Syndesmosis articulatio fibrosa, bones are joined by fibrous tissue
- 2) Synchondrosis articulatio cartilaginea, bones are joined by cartilage
- 3) Synostosis articulatio ossea, bones are joined by bone tissue

# Syndesmosis (art. fibrosa)

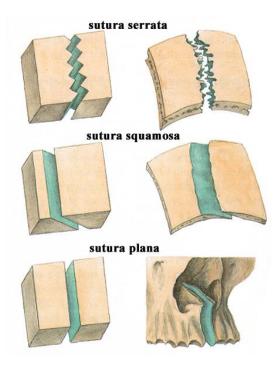
1) connective tissue (ligaments), band of collagen fibrous tissue, (like a rope, ribbon or flat membrane)



2) wedging (gomphosis): fixation of tooth to the alveolus



- 3) <u>sutures</u> between flat skull bones (suturae). <u>The main types of sutures:</u>
- serrated suture (sutura serrata)
- squamous suture (sutura squamosa),
- •flat suture (sutura plana)



Source: anatomie Čihák

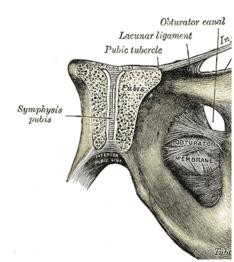
# Synchondrosis (art. cartilaginea)

bones are joined by cartilage

Connection using <a href="https://example.com/hyaline">hyaline</a> cartilage (connection of ribs and sternum, between bones of the skull base- in child)

connection using <u>fibrous</u> cartilage (<u>SYMPHYSIS</u>)

(intervertebral discs, pubic symphysis (*symphysis pubica*)
between both pelvic bones





# Synostosis (art. ossea)

- bones are joined by bone tissue, for example *synostosis sphenooccipitalis*Connection of the bones using the bone tissue, the result is growing of two or more bones
- Exapmles: sacral bone, coccygeal bone, coxal bone, some skull bones
- ➤ In adulthood: synostosis of skull sutures physiological, pathological

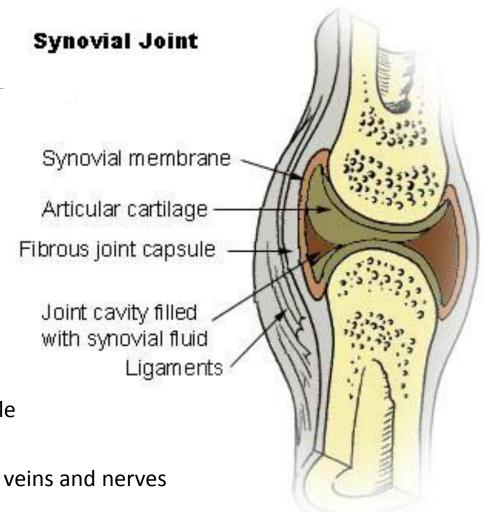


# DIARTHROSIS (junctura synovialis, articulatio)

Articulation (joint) is movable union of two or more bones by touch of contact articular surfaces covered by the articular cartilage.

# General features of a joint

- Articular surfaces=facies articulares
  (articular fossa=fossa articularis, articular head=caput articulare)
- ➤ Joint capsule=capsula articularis
  (stratum fibrosum and stratum synoviale)
- ➢ Joint cavity=cavitas articularis
  articular fissure filled by synovial fluid (synovia)
  Synovial fluid (synovia) nourishes an articular cartilage,
  increases adhesion and decreases friction of contact surfaces
  (plicae) or (villi) are folds of the synovial layer of the articular capsule
  and increase inner surface of articular capsule (capsula articularis)
- > Articular network (rete articulare) supplying of joint by arteries, veins and nerves
- Special joint apparatus



# Additional features of the joints

- a) *labrum articulare* fibrocartilaginous ring broadening of a shallow articular fossa by a strip of cartilage
- b) articular discs and meniscs (disci and menisci articulares) plates of cartilage, which serves as elastic pads, discs divid the articular cavity into two parts, menisci only partly
- c) ligaments (ligamenta) are present in the most joints as extracapsular, capsular or intracapsular ligaments
- d) articular muscles (musculi articulares) prevent of a strangulation of articular capsules
- e) bursae and synovial pockets (bursae synoviales) are small cavities close to the joint. They are constructed by synovial membrane and synovial fluid. Usually may communicate with the joint cavity.

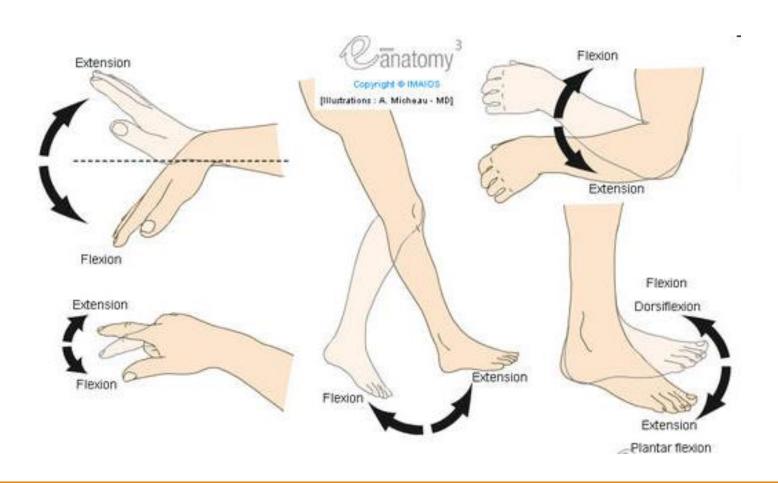
# Movements in joints

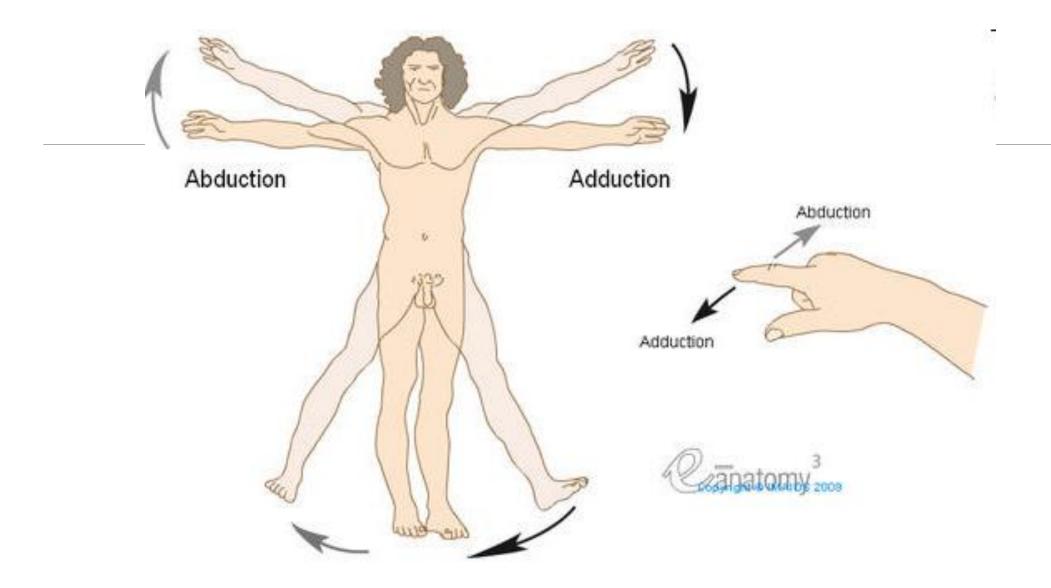
- Possible according to the shape of articulation surfaces and on position of muscles attachments around the joints
- > Joints monoaxial, biaxial, multiaxial

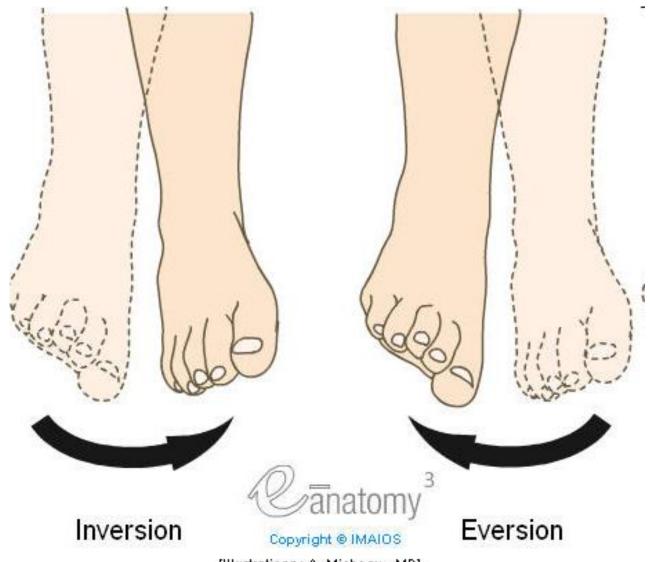
**Basic position of the joint** - basic anatomical position

Middle position of the joint - most relaxed joint capsule

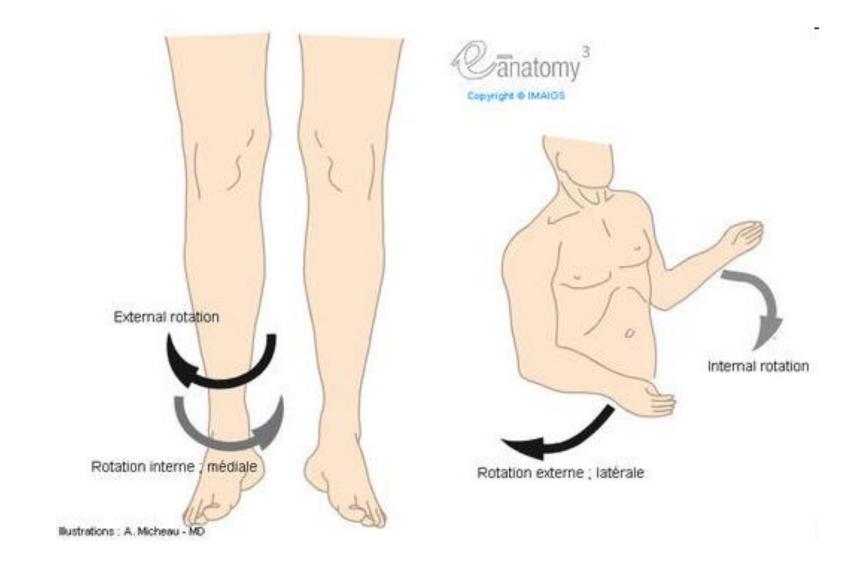
# Movements in joints

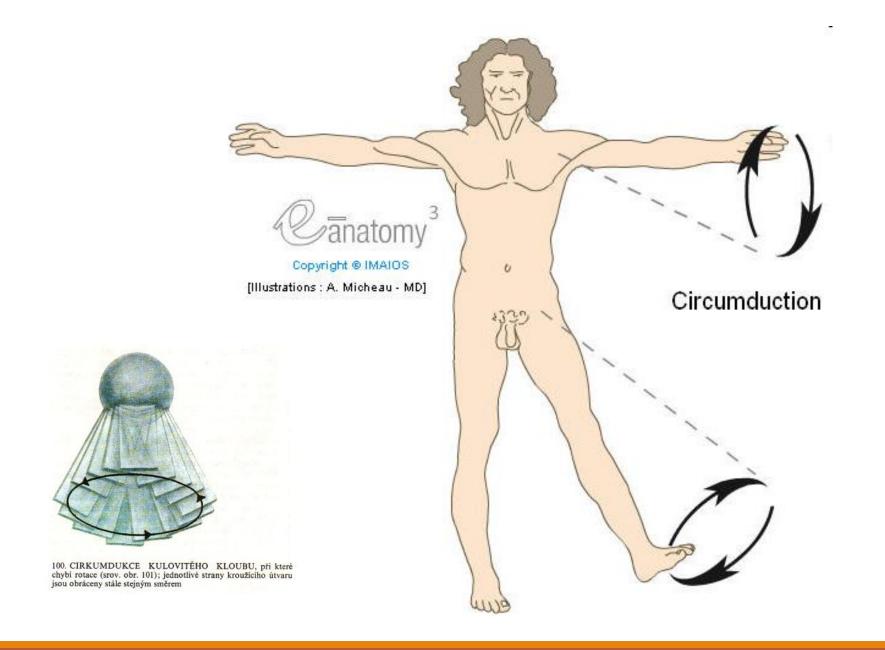


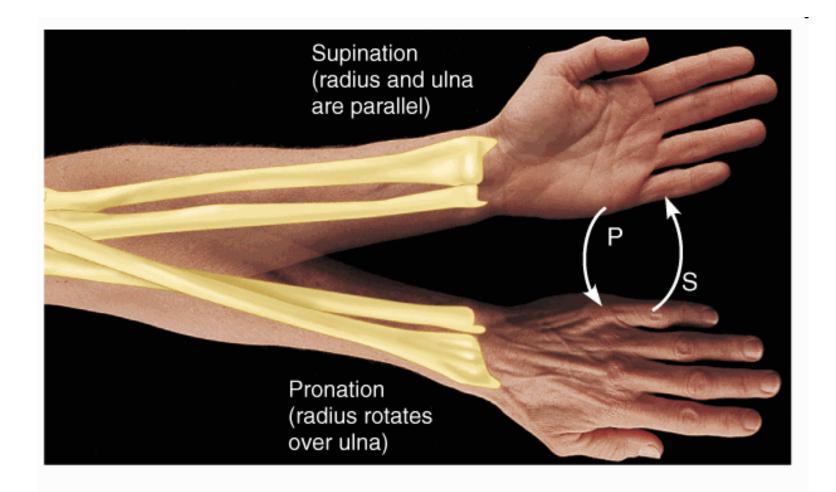




[Illustrations : A. Micheau - MD]







### (a) Supination (S) and pronation (P)

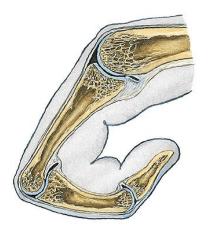
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# Types of joints

Joints may be classified from various points of view.

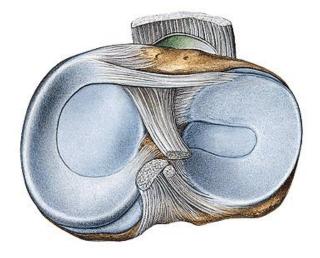
#### According to a number of articular surfaces:

- a) Simple joints
- only two bones are in contact



#### b) Compound joints

- > more than two bones are in contact
- >two bones and between them is located disk (discus) or menisk (meniscus articularis).



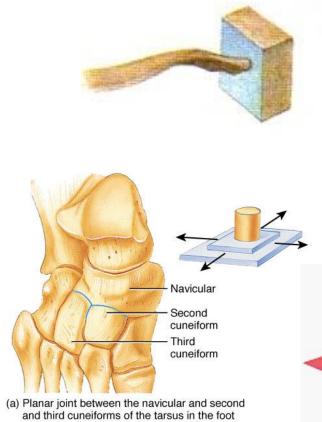
# Classification of joints according to the shape of articular surfaces:

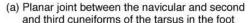
- spheroidal joint (ball-and-socket joint) (articulatio spheroidea) head has shape like a sphere or its part, free spheroid joint (arthrodia) spheroid joint with restricted movements (enarthrosis)
- ellipsoidal (condyloid) joint (articulatio ellipsoidea)
- cylindrical joint:
- **pivot joint (trochoid)** (articulatio trochoidea), wheel joint the axe of movement is parallel with the longitudinal axe of bone
- **hinge joint** (articulatio trochlearis); ginglymus the axe of movement is in the right angle to the longitudinal axe of bone
- saddle joint (sellar) (articulatio sellaris)
- plane joint (articulatio plana)
- amphiartrosis

# **ART. PLANA**

# **AMPHIARTROSIS**



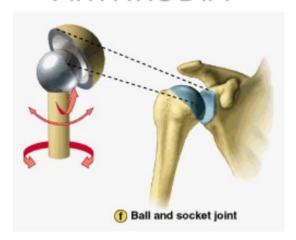


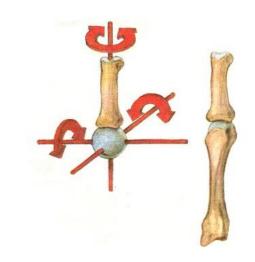




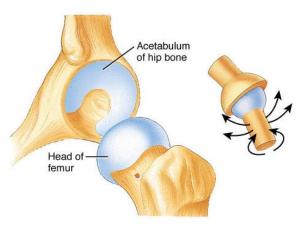
# **BALL AND SOCKET**

### **ARTHRODIA**





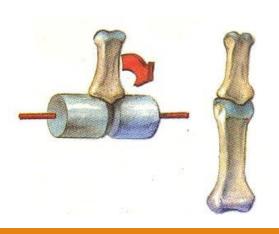
### **ENARTHROSIS**

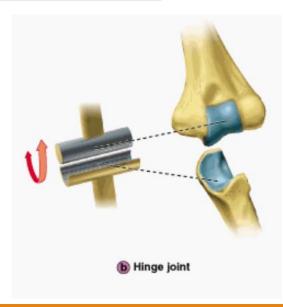


(f) Ball-and-socket joint between head of the femur and acetabulum of the hip bone

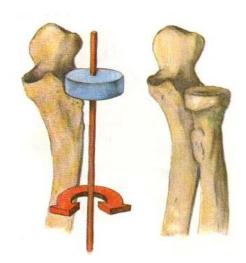
# **CYLINDRICAL JOINT:**

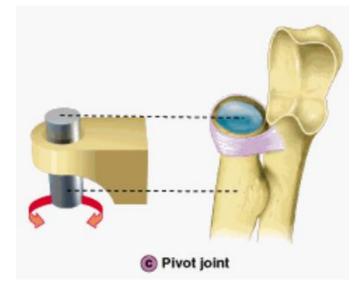




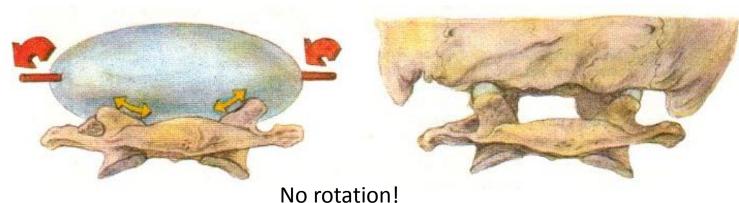


## **PIVOT JOINT**

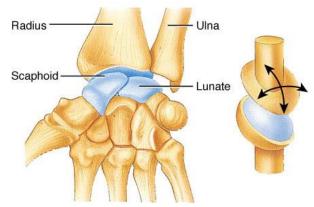




# **ART. ELLIPSOIDEA (CONDYLOID)**

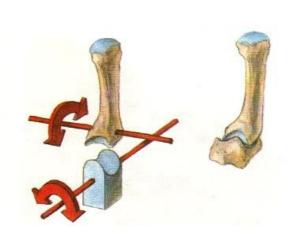


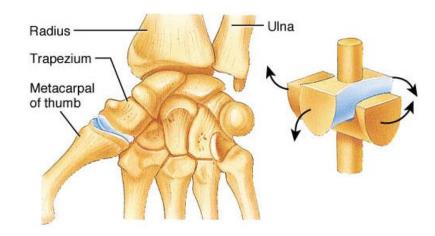
Movements according to the long axis



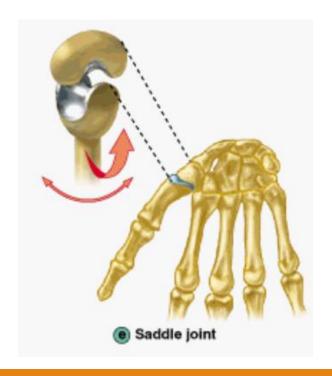
(d) Condyloid joint between radius and scaphoid and lunate bones of the carpus (wrist)

# **SADDLE JOINT**





(e) Saddle joint between trapezium of carpus (wrist) and metacarpal of thumb



Classification of joints according to the level of moveability and number of axis of movements:

#### **Joints with minimal movement:**

With irregular surfaces – amphiarthrosis

#### **Joints with sliding movements:**

-Flat joints - articulatio plana

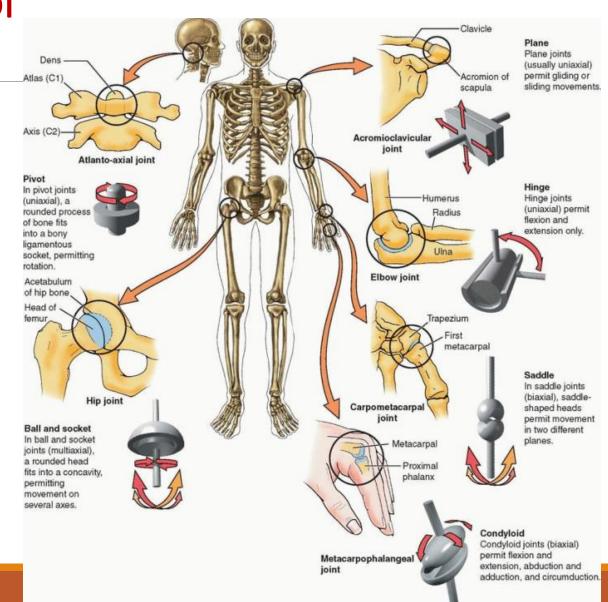
#### Joints with rotational movements:

-Joint surfaces allow rotation along one to three axis

One-axis joints (art. cylindroidea and art. trochlearis)

Two-axis joints (art. ellipsoidea and art. sellaris)

Triaxial joints (art. sphaeroidea)



# **How to describe joints**

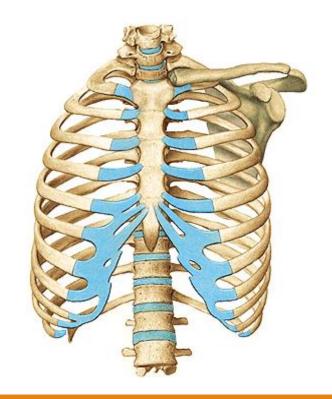
Obvious are theoretical knowledges of the general arthrology, the knowledges of the special osteology is obvious.

#### We are following this outline:

- 1. Name of the joint,
- 2. Names of the articular surfaces,
- 3. Characteristic of the **joint capsule**
- 4. Joint auxiliary equipmnet,
- 5. Type of the joint,
- 6. **Movements** in the joint.

An integral part is the description of the joints at the plain x-rays in sagittal and lateral projection

# Special arthrology Connections of the spine and thorax



## Spine (columna vertebralis)

We can observe all types of junctiones on the spine Synartroses and diarthroses as well

## **Synarthrosis**

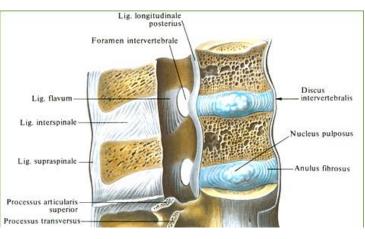
- syndesmosis- ligaments
- synchondrosis- disci intervertebrales
  - synchondrosis sacrococcygea
- synostosis- os sacrum, os coccygis

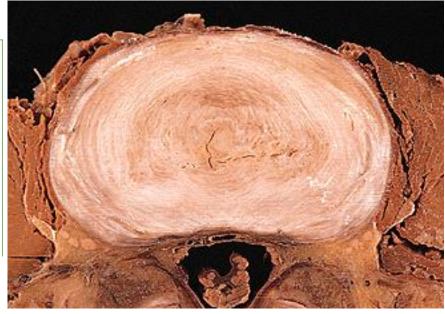
Diarthrosis- articulationes intervertebrales

# Joints of the Vertebral Bodies

- > disci intervertebrales: altogether 23,
- > cartilaginous (symphysis) connection, discus

(anulus fibrosus – hyaline and fibrous cartilage - Concentric layers of fibrocartilaginous fibers, nucleus pulposus – fibrous tissue)



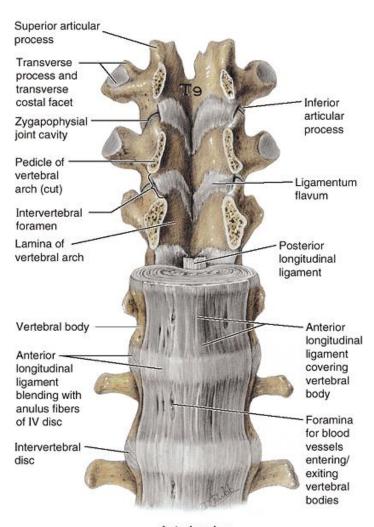




annulus fibrosus

# Junctions of vertebral arches

- elastic ligaments – ligamenta flava (interarcualia)



Anterior view

# Junctions of articular processes of vertebrae

#### articulationes intervertebrales

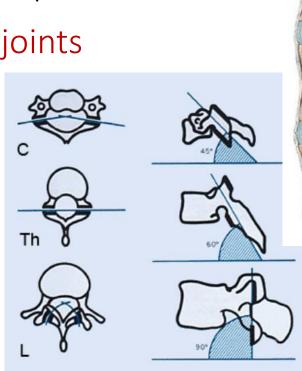
between the superior and inferior articular processes of

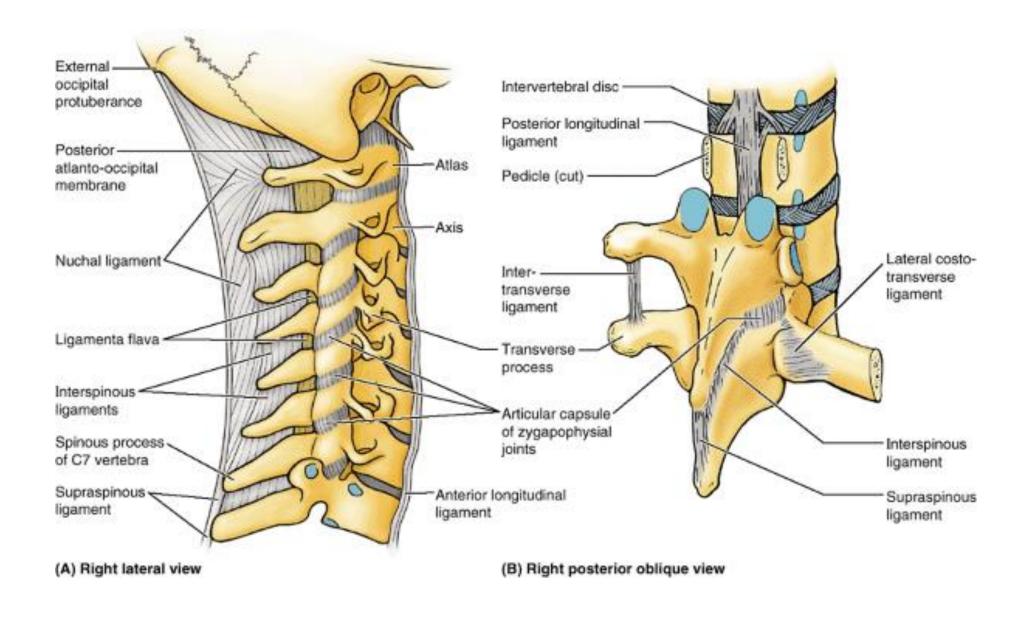
adjacent vertebrae - zygapophysial/facet joints

sliding movements angulations of the articular facets determine types of movements

- short ligaments:
- ligg. intertransversaria
- ligg. interspinalia
- lig. supraspinale (cervical area) as

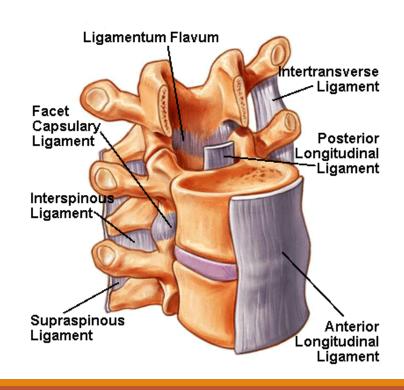
sagitally oriented **ligamentum nuchae** which is going to the occipital bone

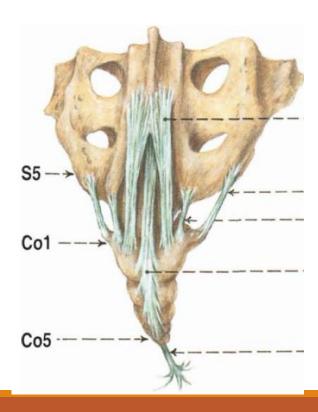




## Junctions common for all vertebrae

- a) lig. longitudinale anterius
- b) lig. longitudinale posterius
- They continue also to the sacral and coccygeal bone





## **Synostosis**

Conection using the bone tissue

Sacral bone: fusion of five sacral vertebrae

Coccygeal bone: fusion of 3 - 5 coccygeal vertebrae



## Curvature of vertebral column

## 1. In the sagittal plane

- double S-shaped:

lordosis: curvature forwards,
cervical C4-5 and lumbar L3-4
kyphosis: curvature backwards, thoracic Th6-7
and sacral

## 2. Curvature in the frontal plane

- **Skoliosis**, mild skoliosis is physiological and it is present in all people — in most mild right, in some mild left (if you are right or left-handed)



## **SHAPE AND MOVEMENTS OF THE SPINE**

- 35% of body height

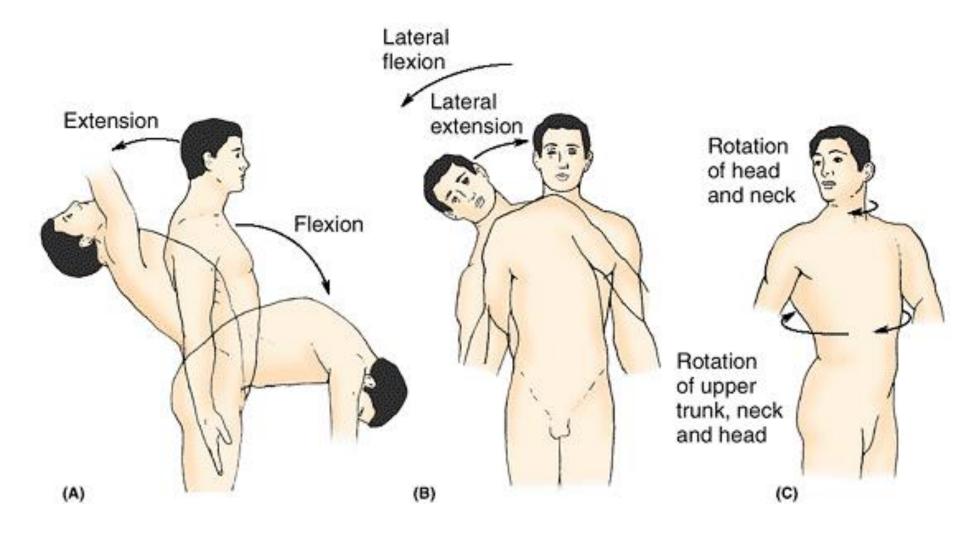
## **Movements**

- anteflexion, retroflexion, 90° cervical, 23° lumbar, most stressed and vulnerable is part of the lower cervical vertebrae, Th11-12, L4-S1
- lateroflexion, 30° cervical, 35° lumbar
- Rotation and torsion, 60-70° cervical, 25-35° thoracic
- Springing movements

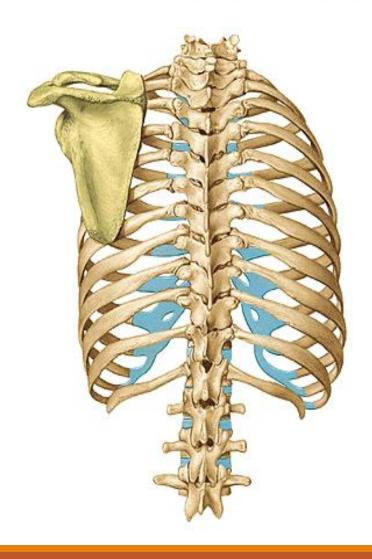
## Mobility of the vertebral column

- depends on the size of intervertebral disc
- the mobility is rectricted by: ligaments, articular capsules and muscles

- the cervical vertebrae allow a range of flexion, lateroflexion and rotation coupled with lateroflexion
- the thoracic should be particularly mobile in rotation (is limited by the attachment of ribs)
- in the lumbar region anteflexion, retroflexion, lateral flexion



# Junctions of the thorax



costovertebral joints

art. capitis costae

art. costotransversarium

costochondral joints and interchondral joints

artt. interchondrales (6th-9th)

membrana intercostalis externa, interna

sternocostal joints

artt. sternocostales (2nd-5th)

synchondrosis (1st, 6th, 7th)

#### **Costovertebral Joints**

#### Articulationes capitis costae

- AF: head of the rib articulates with the inferior and superior costal facets of two adjacent thoracic vertebral bodies and the intervening intervertebral disc
- AC: firm and it is attached to the margins of AF
- special apparatus: lig. capitis costae radiatum, at 2nd 10th rib: capitis costae intraarticulare
- movements: along axis parallel with the neck of the rib
- allow elevation and depression of the ribs



# Articulationes costotransversariae

AS: foveae costales transversales and art. surface on tuberculum costae

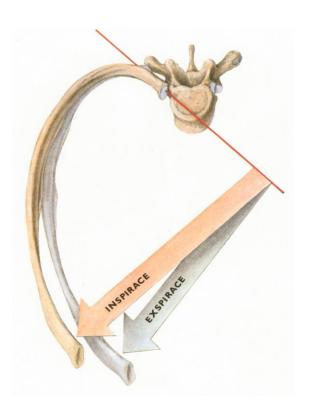
AC: margins of the articular surfaces

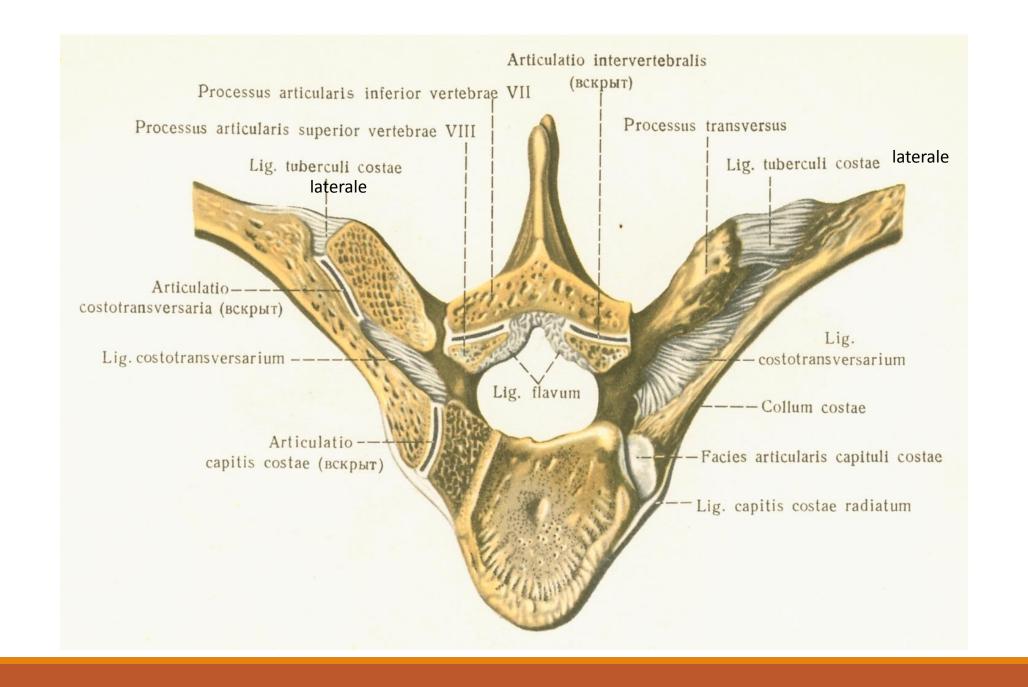
special apparatus: lig. costotransversaria, between collum costae and transversal

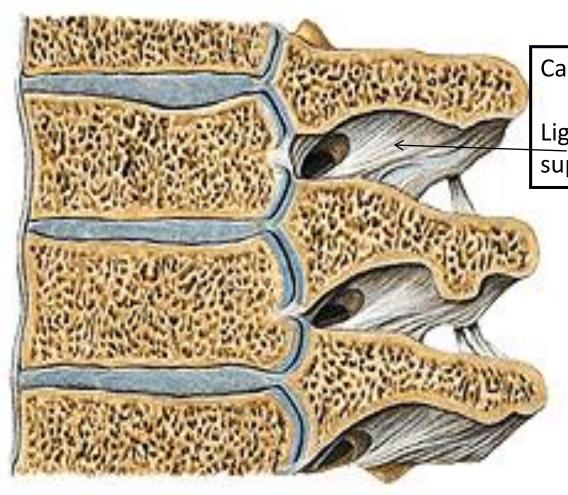
proccess of the vertebra

Movements: along axis which is parallel with collum costae



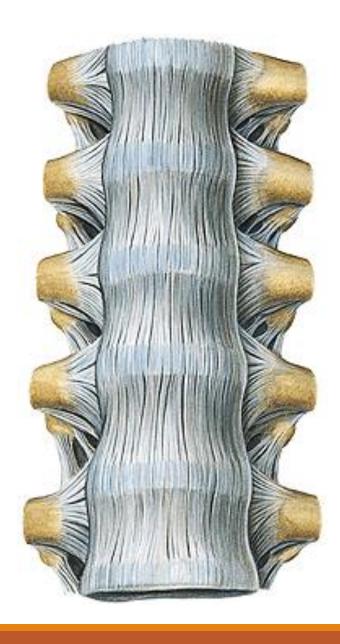






Caput costae + lig.radiatum

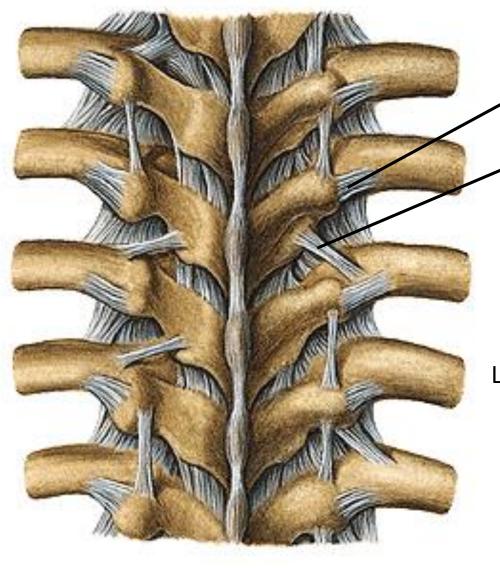
Lig.costotransversarium superius



Lig.capitis costae radiatum

Lig. costotransv. sup.

Lig. longitudin. ant.



Lig.costotransv.lat.

Lig. intertransversaria interspinale (nuchae)

# Juncturae sternocostales

- Connections between costal cartilages and sternum
- 1. Synchondrosis sternocostalis: cartilaginous connection with incisura costalis sterni, regularly at 1st often at 6th and 7th rib

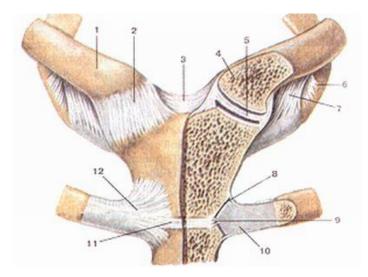
#### 2. Artt. sternocostales:

between 2nd to 5th rib and sternum

AS: sternal end of costal cartilage, incisura costalis sterni

AC: to the margins of the articular surfaces

Special apparatus: ligg. sternocostalia radiata – they
form membrana sterni externa and interna



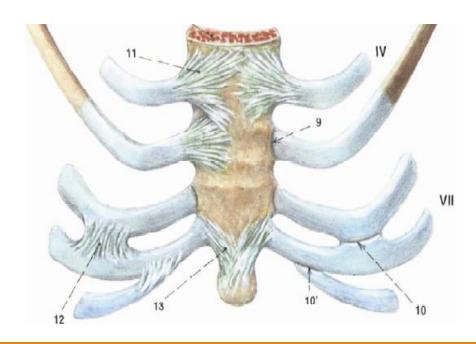
# Junctions of adjacent ribs

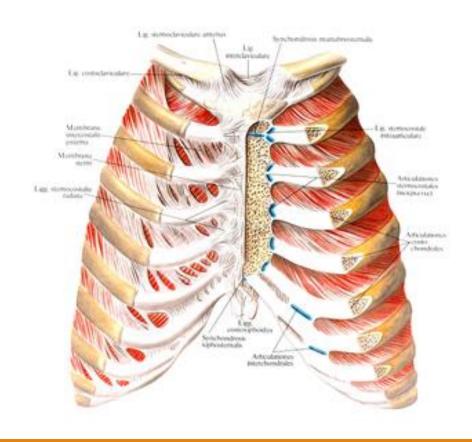
# 1. Articulationes interchondrales

joint connection between costal cartilages of 5th to 9th rib, covered by short articular capsule

2. Membranae intercostales – fibrous membranes connecting adjacent ribs

Membrana intercostalis externa Membrana intercostalis interna



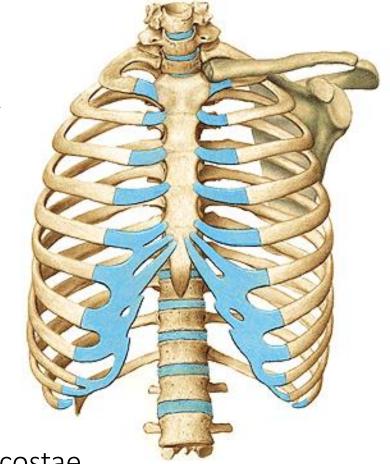


# Chest cage shape and movements

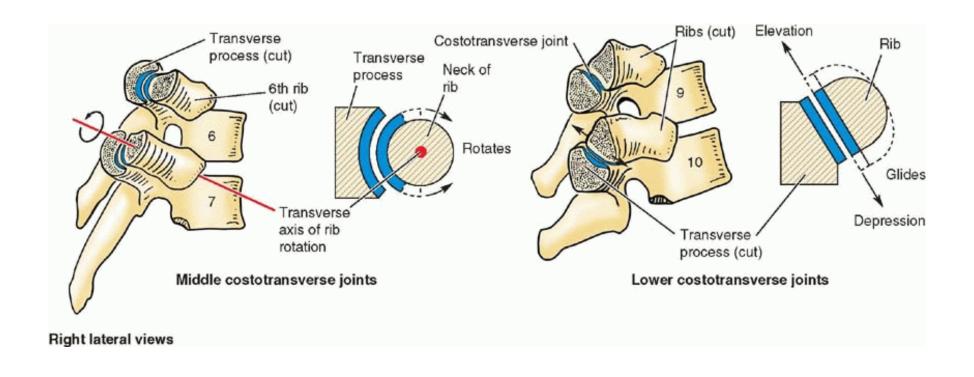
- Shape of truncated cone
- base (apertura thoracis inferior)
- apex (apertura thoracis superior)
- walls frontal, dorsal, lateral cavitas thoracis spatia intercostalia arcus costarum angulus infrasternalis

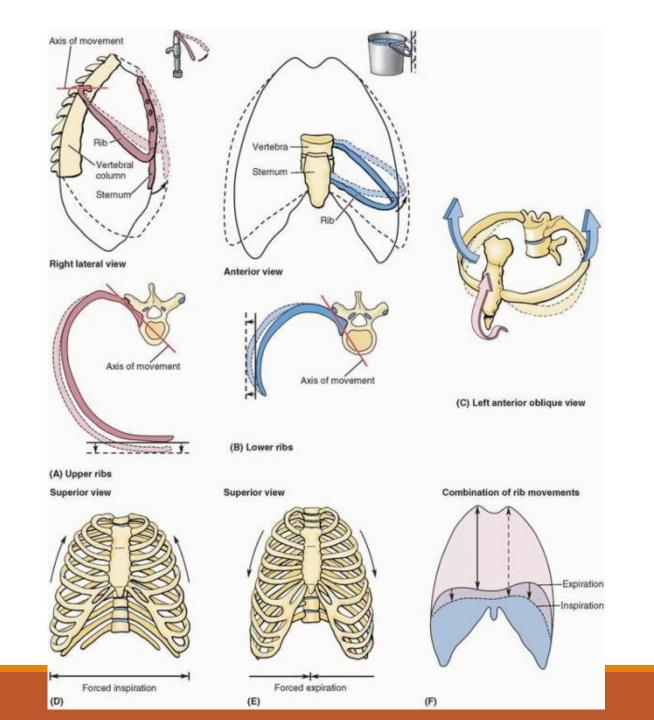
#### **Movements**

- in costovertebral connections, axis runs parallel with collum costae
- Upward rotation inspirium downward rotation - exspirium



# Movements of the thoracic wall during inspiration produce increases in the intrathoracic volume and diameters of the thorax

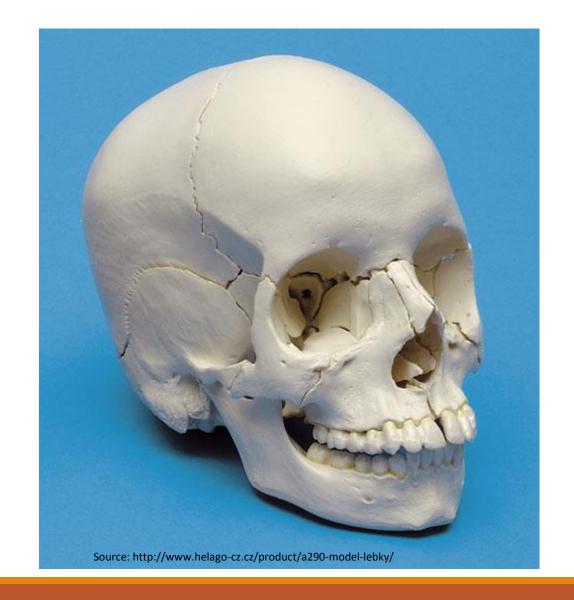




# Connections of the skull (juncturae cranii)



- > craniovetebral junctions
- > syndesmoses
- > synchondroses
- > temporomandibular joint
- hyoid junctions



# **Craniovertebral junctiones**

> Connection of the skull with the C1 and C2

# 1. Articulatio atlantooccipitalis

Paired joint

#### <u>AS</u>:

condyli occipitales and foveae articulares superiores of atlas

#### <u>AS</u>:

Is attached to the margins of the articular surfaces



#### **Special apparatus:**

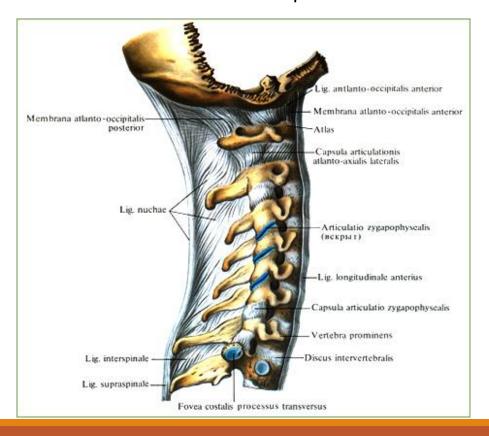
membrana atlantooccipitalis anterior and posterior

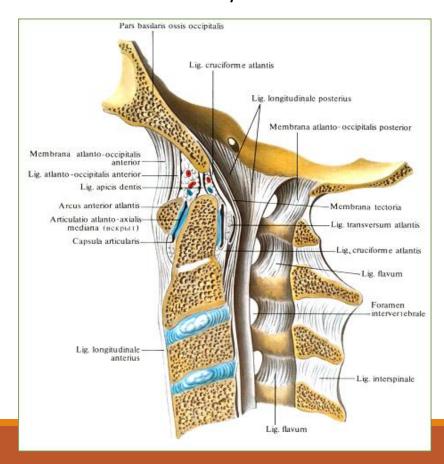
(between arches of atlas and occipital bone)

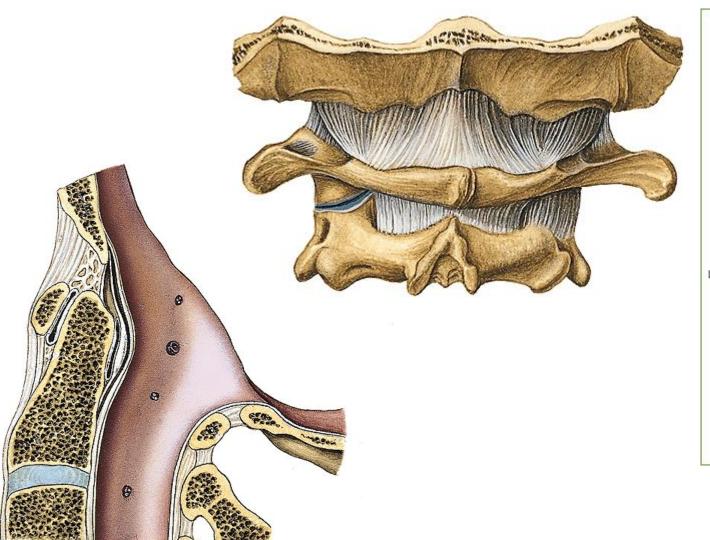
membrana tectoria

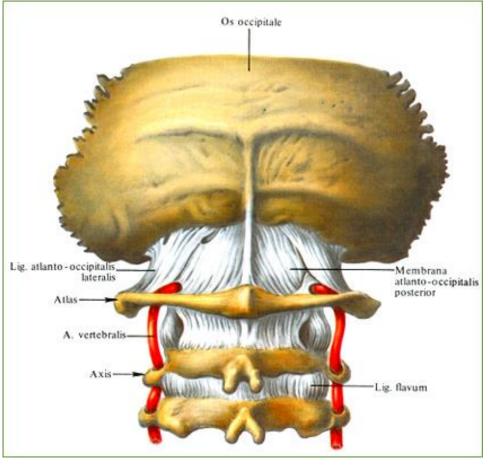
(cranial continuation of lig. longitudinale posterius, it reaches to clivus)

<u>Type of joint</u>: elipsoidal with possibility of flexion and extension of the head and there are also possible smaller movements sideways









#### 2. Articulatio atlantoaxialis

#### a) articulatio atlantoaxialis lateralis

Paired joint

#### AS:

facies articulares inferiores of atlas facies articulares superiores of axis

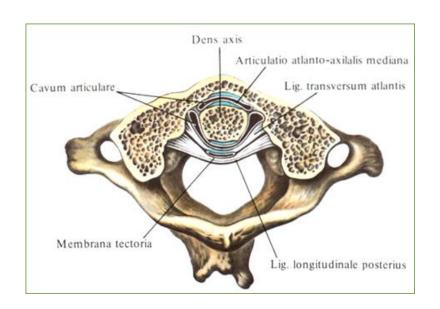
#### b) articulatio atlantoaxialis mediana

Unpaired joint

#### <u>AS</u>:

facies articularis anterior on frontal side of dens axis with fovea dentis of atlas and facies articularis posterior on dorsal side of dens axis with lig. transversum atlantis

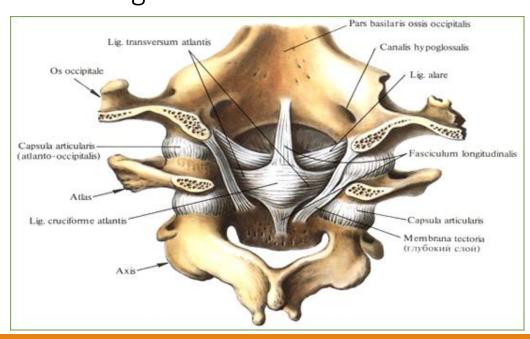
AC: is common and is attached to the margins of the articular surfaces

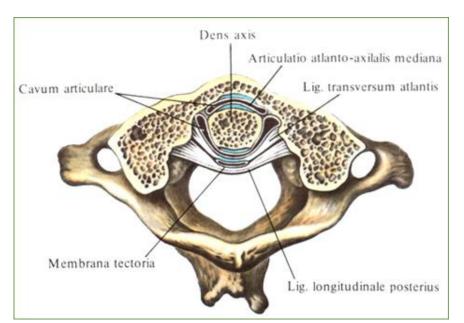


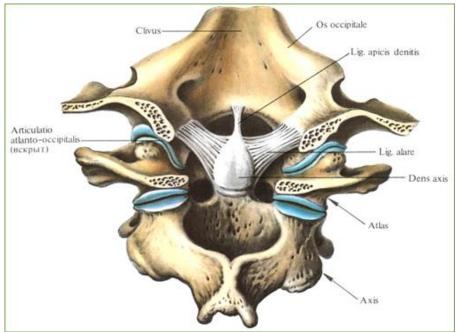


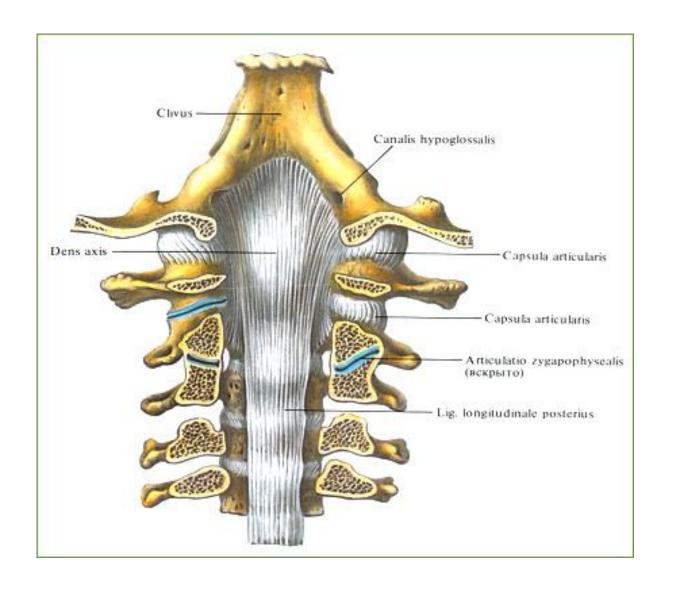
#### **Special apparatus:**

lig. apicis dentis, ligg. alaria,
lig. cruciforme atlantis, formed by
lig. transversum atlantis and fasciculi
longitudinales (vertical fibrous bands going
from axis to occipital bone)
Type of joint: both joints form one
mechanical unit, atlas is rotating along dens
axis in range of 60°





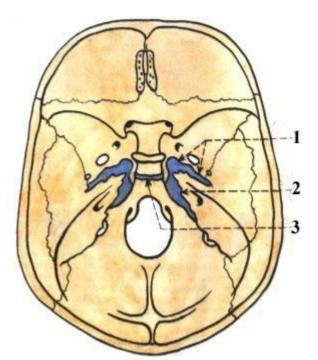




#### **Skull syndesmoses**

Present sutures *(suturae)*, between the margins of the bones, there is a layer of fibrous tissue





# **Skull synchondroses**

s. sphenopetrosa

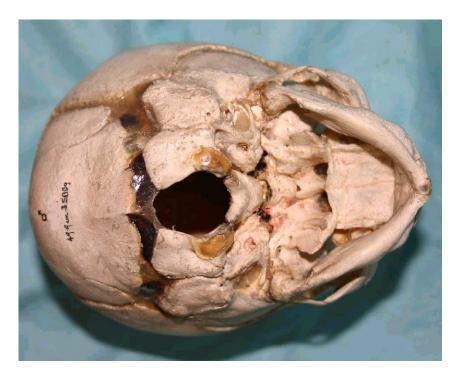
s. petrooccipitalis

s.Interoccipitalis - anterior et posterior

s. intersphenoidalis,

s. sphenooccipitalis

synchrondrosis sphenooccipitalis



# <u>Temporomandibular joint</u> (articulatio temporomandibularis)

AS: caput mandibulae connects with fossa mandibularis and tuberculum articulare of temporal bone

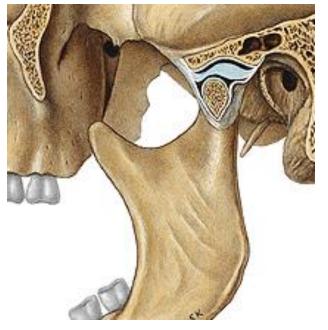
<u>AC</u>: is attached to the margins of the articular surfaces, its medial part is very strong, it rows together with *discus* 

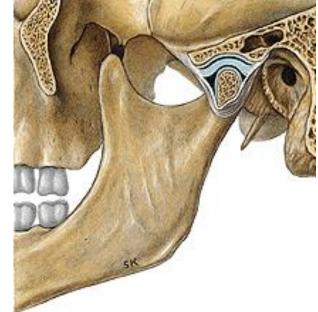
articularis

# Type of joint: gynglimus (hinge)

Elevation – closing of the mouth
Depresion – opening of the mouth
Protraction – shifting od the chin forwards
Retraction – shifting od the chin backwards



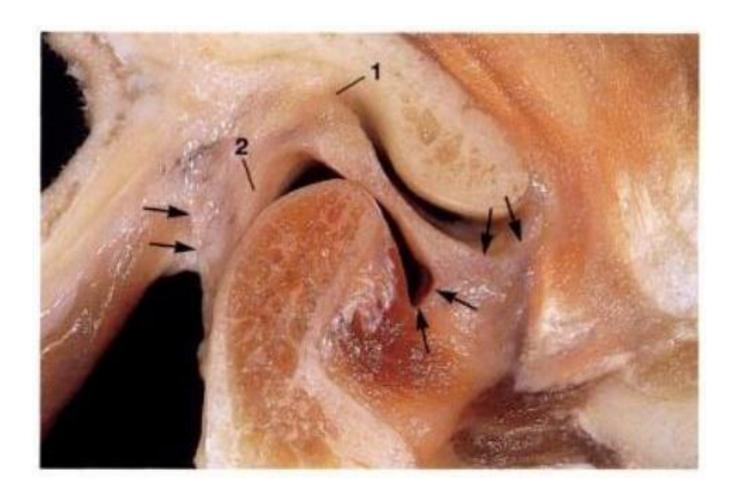




#### **Special apparatus:**

#### discus articularis (fibrous cartilage):

- its middle part is thiner and the margins are thicker,
- > it grows together with articular capsule,
- ➤ It reduce sliding friction
- > allow the mouth open and close
- > it divides articular cavity into:
- pars discotemporalis –
  between the mand.fossa and disc (1,2ml)
- discomandibularis between the disc and condyle (0,9ml)

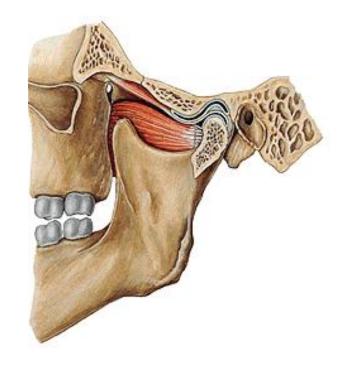


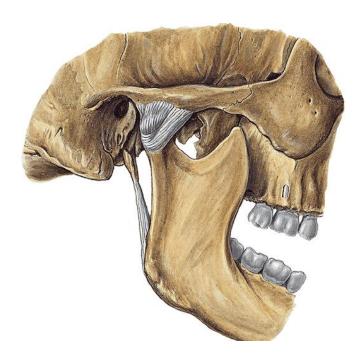
#### Ligaments - extraarticular

on lateral side: *lig. laterale* 

around the joint: *lig. sphenomandibulare* (runs from the spina ossis sphenoidalis to the mandible)

*lig. stylomandibulare* (runs from the styloid process  $\rightarrow$  the posterio edge of the angle of the mandible)







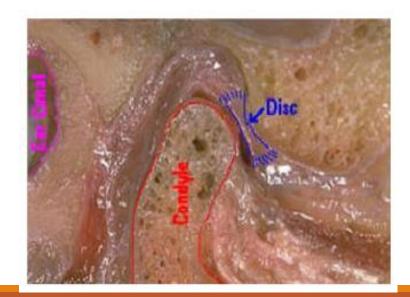
#### Movements at the TMJ

#### Hinge movement

•type of rotation takes place in the lower compartment between the stationary disc and the moving condyle

#### **Gliding movement**

■takes place in the upper compartment between the superior surface of the disc, which is moving, and mandibular fossa





#### **Depression - the opening**

- •with simple rotation at the joint can be achieved 15 20mm intericisor distance
- •during translation, the disc and condyle move under the articular eminence

#### **Elevation – the closing**

- translation the condyles move backward and upward along the articular eminence
- rotation upward to attain final position





#### **Protrusion**

- ■slide the mandible forward
- maximal protrusion results in the lower incisors being a few mm

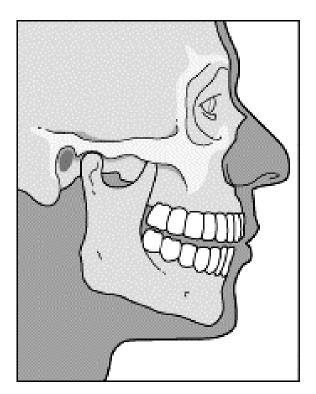
anterior to the maxillary incisors

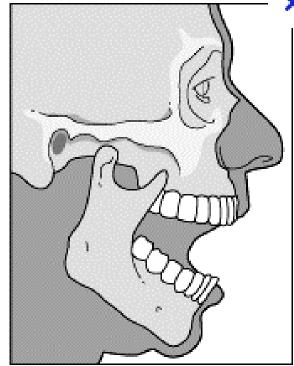
#### Retrusion

- move the mandible posteriorly
- condyles move backward and upward and reoccupy the mandibular fossa

#### Laterotrusion

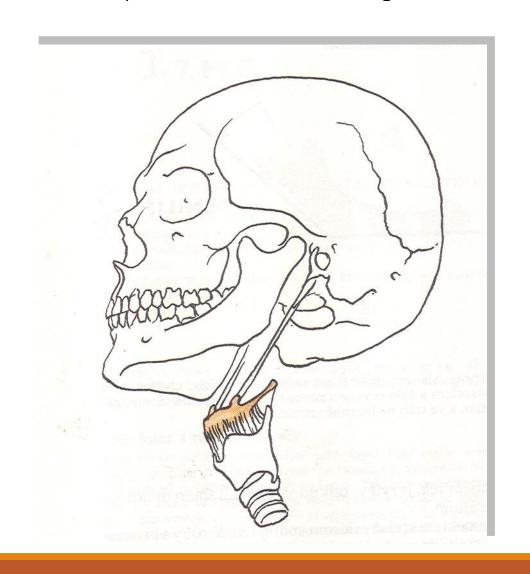
• the condyle move to the right or to the left side

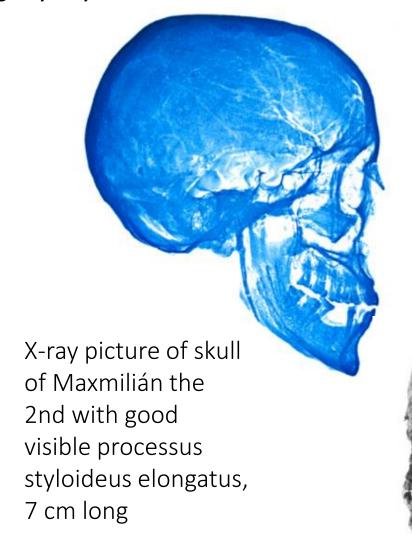




# **Hyoid junctions**

The skull and hyoid bone connects using muscle and *lig. stylohyoideum* 





Illustrations were copied from:

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