• GENERAL MYOLOGY

MUSCULAR SYSTEM

unit- muscle = musculus (myos)

- Active component of the locomotor system- it is controlled by nerves
- The main demonstration of mechanical function of muscle fibers (on the base of excitations comming through the motor nerve fibers) is their shortening— <u>contraction</u> (movement)
- Contractile proteins myosin and actin, form the basis of myofibrils of muscle fibers

Smooth muscle

Heart muscle

Striated muscle

Function of the muscular system

- motion function muscular system constitues active component of the locomotor system
- shape function musculature forms exterior (external shape) of a man
- termoregulation it is releasing heat
- It helps blood circulation
- It keeps basic muscle tension

ATTACHMENT

To the bones: skeletal muscles- mm. sceleti- over 600 in the body, mostly paired, they form 1/3-1/2 of entire body weight

To the skin: skin muscles- mm. cutanei- mainly on head and neck

Relationship to organs: organ muscles

To the articular capsules: mm. articulares

The internal structure of striated muscle

1) <u>Striated muscle tissue</u> (myosin and actin)- muscle fiber

2) <u>Fibrous tissue</u> (it covers the muscle fibers, primary and secondary fasciculi – important for metabolism between muscle fiber and blood circulation of muscle, on the surface, there is unbroken covering <u>fascia</u> = fascia

3) Logistic components (vessels and nerves)

4) <u>Special apparatus</u>

INTERNAL STRUCTURE OF MUSCLE

- <u>Muscle part</u>: the basic structural and functional unit of muscular system, it is the muscular fiber, which was created by fusion of many consecutive cells= multinucleated formation
- The fibers inside muscle have following arrangement– form muscle fasciculi, they combine into bundles until they create the entire muscle
- Muscle fibers are interconnected with thin collagenous fibrous tissue, so-called perimysium internum (endomysium)
- the surface of whole muscle is covered by fibrous tissue, so-called perimysium externum (epimysium)

<u>**Tendon</u>:** tendon is created by regularly arranged fibers of tough collagenous fibrous tissue, which have hierarchical arrangement – single fibers combine to fasciculi, then to larger bundles until they form the whole tendon</u>

- fibers are connected with thin collagenous fibrous tissue, so-called peritenonium internum (endotenonium)
- On the surface, there is a fibrous covering, so-called **peritenonium externum (epitenonium)**
- aponeurosis- flat tendons

EXTERNAL STRUCTURE OF MUSCLE

- origin (origo): part of the muscle that runs from bone (or skin); it is the place, where the muscle doesn't change its position during contraction (so-called: fixed point- punctum fixum), it is usually formed by tendon
 belly (venter): fleshy part of muscle, its beggining is called caput (head), its end is called cauda (tail)
- insertion (insertio): is formed by tendon; it is the place, where the muscle changes its position during contraction (so-called: mobile point- punctum mobile), the tendon attaches usually to a bone, sometimes to skin or organ

CLASSIFICATION OF MUSCLES

1. ACCORDING TO PREVAILING SIZE

- Long muscles: they have ribbon-like or rope-like tendons
- Short muscles: they have ribbon-like or rope-like tendons
- Flat muscles: they usually have wide flat tendons= aponeurosis
- **Round muscles:** ring-like shape, they encircle some openings, they are narrowing during contraction

- 3. ACCORDING TO A NUMBER OF HEADS
- Muscles with one head: one head
- Muscles with more heads: more heads (more origins), which connect into one muscle belly. (musculus biceps, musculus triceps, musculus quadriceps)

4. ACCORDING TO A NUMBER OF BELLIES

- With one belly: only one belly
- With more bellies: two or more consecutive bellies, which are separated from each other by tendons (tendo intermedius)

CLASSIFICATION ACCORDING TO FUNCTION

- Muscle can make its function, only if it span minimal one movable bone junction
- muscle making specific movement is called <u>agonist</u> (<u>executor</u>)
- Muscle which participate in some movement are called synergists
- Muscles making opposite movement are called antagonists
- <u>flexors× extensors</u>
- adductors× abductors
- sphincters× dilatators
- pronators× supinators
- levators× depressors
- erectors
- elevators
- tensors

Contraction

Isotonic: change of lenght concentric: shortens excentric: extends

Izometric: change of tension

<u>Vessels</u>- blood and lymphatic- nutrition of muscle. They enter the muscle in place called porta musculi (hilus musculi)- neurovascular hilus.

<u>Nerves</u>

- diploneural muscles- innervated from two nerves
- plurineural muscles- innervated from more nerves -motor fibers: they bring impulses for contraction of muscle fibers, they are terminated as motor plates on the muscle fiber
- <u>Senzor fibers:</u> bring information from muscle into central nervous sytem, about pain, tension.

SPECIAL APPARATUS

- <u>Fascia (fasciae)</u>: fibrous membranes, which cover one whole muscle or group of some muscles.
- Septa intermuscularia- separates single groups of muscles, they are attached to a bone
- Retinacula- eyelets, which holds muscle tendons to a bone.
- 2. Synovial bursae(bursae synoviales): pouches around the joint, derivatives of the joint capsule, in the places, where tendons and muscle lie directly on the bone
- 3. Synovial sheath (vaginae tendinum): cover long tendons of muscles in areas exposed to mechanical loading.

Layer- superficial- vagina fibrosa- **peritenonium** - deep- vagina synovialis- **epitenonium**

Muscles of the head

Mm. masticatorii

M. temporalis

M. temporalis

origin: linea temporalis inferior, temporal fascia insertion: processus coronoideus mandibulae innervation: N. trigeminus (nn. temporales profundi from 3rd branch) function: elevation, partly retraction of mandible

M. masseter

origin: arcus zygomaticus and os zygomaticum insertion: tuberositas masseterica innervation: N. trigeminus (n. massetericus from 3rd branch) function: elevation of mandible, chewing movements

M. pterygoideus medialis

M. pterygoideus lateralis

3) <u>M. pterygoideus medialis</u>

origin: fossa pterygoidea and tuber maxillae

insertion: tuberositas pterygoidea

innervation: N. trigeminus (n. pterygoideus medialis from the 3rd branch) function: elevation of mandible

4) M. pterygoideus lateralis

origin: lamina lateralis processus pterygoidei, facies infratempotalis

alae majoris ossis sphenoidalis

insertion: fovea pterygoidea mandibulae

innervation: N. trigeminus (n. pterygoideus lateralis from the 3rd branch) function: by double-sided contraction: protraction of mandible

Mimic muscles

- m. occipitofrontalis
- m. temporoparietalis

- **Muscles of palpebral fissure**
- m. orbicularis oculi
- m. depressor supercilii
- m. corrugator supercilii
- m. procerus

- 3) Muscles of the mouth
- m. orbicularis oris
- m. depressor anguli oris
- m. depressor labii inferioris
- m. risorius
- m. levator labii superioris alaeque nasi
- m. levator labii superioris
- m. zygomaticus major
- m. zygomaticus minor
- m. levator anguli oris
- m. buccinator
- m. mentalis
- 4) Muscles of the nose
 m. nasalis
 m. levator labii superioris alaeque nasi

<u>Head fasciae</u>

- Fascia temporalis
- together with skull bones, it creates a cavity for m. temporalis
- Fascia masseterica
- continues as fascia parotideomasseteri ca (to the gland)
- Fascia buccopharyngea
- from the lips to pharynx

<u>Musculi colli</u> (muscles of the neck)

M. platysma

<u>Platysma</u>

- Subcutaneous muscle, on superficial cervical fascia from clavicle to the face
- O: fascia pectorialis, fascia deltoidea
- I: skin of the face
- F: it stretches cervical skin
- IN: ramus colli n. facialis

M. sternocleidomastoideus

M. sternocleidomastoideus

- **O:** manubrium sterni, sternal end of calvicle
- I: processus mastoideus, external edge of linea nuchae superior
- **F:** at unilateral contraction –
- lateroflexion, bilateral contraction retroflexion, auxiliary inspiratory
- muscles (at fixed head and cefvical spine)
- IN: n. accessorius + C2 C4

Musculi suprahyoidei

M. DIGASTRICUS

M. STYLOHYOIDEUS

M. MYLOHYOIDEUS

M. GENIOHYOIDEUS

M. digastricus

M. DIGASTRICUS

Muscle with two bellies

O: venter anterior: fossa digastrica,

- it is changing into tendon on hyoid bone, continues as **venter posterior**
- I: incisura mastoidea
- **F:** depression of mandible, elevation Of hyoid bone
- I: venter anterior n. mylohyoideus (n. trigeminus)

venter posterior - n. facialis

M. stylohyoideus
M. STYLOHYOIDEUS

- Through its cleft tendon m. digastricus passes
- **O:** processus styloideus
- *I:* body of the hyoid bone
- F: it elevates the hyoid bone during swallowing
- I: n. facialis

M. mylohyoideus

M. MYLOHYOIDEUS

Forms the flexible bottom of the mouth- diphragma oris

- O: linea mylohyoidea I: os hyoideum raphe mylohyoidea fibrous connection of both muscles
- F: depression of mandible at fixed mandible, elevation of hyoid bone
 I: n. mylohyoideus (n.
- trigeminus)

M. geniohyoideus

M. GENIOHYOIDEUS

- Above m. mylohyoideus
- **O:** spina mentalis
- I: body of the hyoid bone
- F: it participates in forming
- of the bottom of the mouth
- I: fibers from C1

<u>Mm. infrahyoidei</u>

- m. sternohyoideus
 m. sternothyroideus
 m. thyrohyoideus
 m. omohyoideus
- **F:** they fix the hyoid bone, they participate in swallowing reflex
- I: ansa cervicalis profunda C1 - C3 - except m. thyrohyoideus -> C1

M. sternohyoideus

M. STERNOHYOIDEUS

O: dorsal surface of manubrium sterni + sternalnal end of clavicle
 Ú: body of hyoid bone

M. sternothyroideus

M. STERNOTHYROIDEUS

- behind m. sternohyoideus and more laterally
- *O:* manubrium sterni and 1st rib
- I: linea obliqua

M. thyrohyoideus

M. THYROHYOIDEUS

O: linea obliqua on cartilago thyroidea

I: cornu majus of hyoid bone

M. omohyoideus

M. OMOHYOIDEUS

With two bellies *O:* venter inferior- margo scapulae sup., bellow m. sternocleidomastoideus it continues as a tendon and then int chnages into venter superior *I:* body of hyoid bone

mm. suprahyoidei et infrahyoidei

The larynx and the hyoid bone are elevated by the suprahyoid muscles during swallowing, infrahyoid muscles return them back

• Mm. scaleni

<u>Musculi scaleni</u>

Common function:

at fixed thorax, the muscles by unilateral contraction cause lateroflexion and rotation of the cervical spine, at bilateral contraction they cause anteflexion of cervical column

- auxilliary inspiratory muscles
- I: rami ventrales of cervical
- nerves

M. SCALENUS ANTERIOR

- **Z**: transverse processes of C3 C6
- Ú: tuberculum m. scaleni anterioris of 1st rib

M. SCALENUS MEDIUS

Z: transverse processes of C1 - C7

Ú: 1st rib, behind sulcus a. subclaviae

M. SCALENUS POSTERIOR

Z: transverse processes of C5 - C7 *Ú:* 2nd rib

Deep cervical muscles

Deep cervical muscles

IN: rami ventrales of cervical nerves

M. LONGUS CAPITIS

O: tuberculum ant. processus transversi C3 - C6

- *I:* skull base
- F: anteflexion of head

M. LONGUS COLLI

O: caudal cervical and cranial thoracic vertebrae *I*: tuberculum anterius atlantis + tuberculum ant. proc. transversi C5, C6 + bodies of C2 – C4 *F*: flexion, lateroflexion, rotation of the head

M. RECTUS CAPITIS ANTERIOR

- **Z**: processus transversus atlantis
- Ú: skull base (behind m. longus capitis)
- *F:* bilateral: anteflexion unilateral: lateroflexion

M. RECTUS CAPITIS LATERALIS

- **Z**: processus transversus atlantis
- Ú: skull base
- F: lateroflexion

<u>Musculi thoracis</u> (Thoracic muscles)

Heterochtonous muscles of thorax

(common innervation from pars supraclavicularis plexus brachialis)

M. pectoralis major

M. PECTORALIS MAJOR

- *O:* clavicula, sternum (+ adjacent parts of ribs 1st – 6th) *I:* crista tuberculi majoris humeri, *F:* pars clavicularis – it helps at flexion of arm
- pars sternalis and abdominalis
- addukce of arm, pronation

M. pectoralis minor

M. PECTORALIS MINOR

O: 3. až 5. žebro

I: processus coracoideus

F: it pulls scapula forward and downward

F: auxiliary inspiratory muscles

M. subclavius

M. SUBCLAVIUS

- **O:** costa prima
- I: sulcus m. subclavii
- F: it pulls clavicle downward, it elevates the 1st rib

M. serratus anterior

M. SERRATUS ANTERIOR

- O: nine teeth at 1st-9th rib
- *I*: medial ede of scapula and angulus inferior
- F: it holds scapula to the thorax,
- it pulls angulus inferior scapulae laterally

Autochtonous thorax muscles

Common innervation: nn.

intercostales I - XI MM. INTERCOSTALES EXTERNI

external layer, they direct like hands into the pockets, they continue forward as **membrana intercostalis externa** *F:* inspiratory muscles

MM. INTERCOSTALES INTERNI

middle layer, they direct like hand to the breasts, they continues backward as **membrana intercostalis interna** *F:* expiratory muscles

MM. INTERCOSTALES INTIMI

internaly layer

the same course and function like mm. intercostales interni

M. TRANSVERSUS THORACIS

flat muscle on the internal surface

of sternum

- it is diverging in a ray-shaped form cranially and laterally
- F: auxiliary inspiratory muscle

<u>The diaphragm (diaphragma)</u>

- Flat muscle tat separates the abdominal and thoracic cavity
- The edges- muscle bundles, *centrum tendineum*
- a) *pars lumbalis:* starts from *lig. longitudinale anterius*, from lumbar vertebrae
- b) pars costalis: starts from 7th- 12th rib
- c) **pars sternalis**: starts from *processus xiphoideus sterni*
- *I:* centrum tendineum
- IN: n. phrenicus
- F: main inspiratory muscle

Openings:

In centrum tendineum: foramen v. cavae inferioris Im muscular part: hiatus aorticus (ductus thoracicus), hitus esophageus (nn. vagi), nn. splanchnici, v. azygos Fascie hrudníku fascia pectoralis spfc.-

fascia clavipectoralis – fossa ovalis infraclavicularis

fascia endothoracica-(Sibsonova fascie)
HYPERTROPHY

ATROPHY