

THE ANATOMY OF THE LOCOMOTOR SYSTEM

OSTEOLOGY ARTHROLOGY MYOLOGY

BY

R. G. INKSTER

READER IN ANATOMY IN THE UNIVERSITY OF EDINBURGH

ROBERT WALMSLEY

BUTE PROFESSOR OF ANATOMY IN THE UNIVERSITY OF ST. ANDREWS

R. D. LOCKHART

REGIUS PROFESSOR OF ANATOMY IN THE UNIVERSITY OF ABERDEEN

Reprinted from the ninth edition of CUNNINGHAM'S TEXT-BOOK OF ANATOMY Edited by J. C. Brash

LONDON
OXFORD UNIVERSITY PRESS
NEW YORK TORONTO BOMB

Oxford University Press, Amen House, London, E.C.4 GLASGOW NEW YORK TORONTO MELBOURNE WELLINGTON BOMBAY CALCUTTA MADRAS KARACHI CAPE TOWN IBADAN NAIROBI ACCRA SINGAPORE

REPRINTED					
TEXT-BOOK	OF ANATO	MY .	a (a)		. 1951
EIRST ISSII	ED IN THIS	FORMA	TP.		1056

CUNNINGHAM'S TEXT-BOOK OF ANATOMY VOLUME II

THE ANATOMY OF THE LOCOMOTOR SYSTEM

FOREWORD

It is hoped that many students of anatomy will welcome the reappearance of separate bound sections of Cunningham's Text-Book of Anatomy which were last issued in this form fifty years ago. Unlike their predecessors, the volumes now issued are each complete in themselves and may be used independently of the rest of the text as the sections have been arranged so that each of the principal anatomical systems is complete within a single volume. The full index to the Text-Book has been included in each volume as an aid to cross reference from one volume to another since it is felt that many students will use two or more of these separate volumes. As a further aid to quick reference, a Table facing the first page of the index gives the pagination of each section of the book; those sections now issued as separate volumes are distinguished not only by the volume number alongside each entry, but also by the use of roman type; italic is used for those sections not yet available except in the complete Text-Book.

The sections now issued are those most frequently used in a number of medical schools where the complete Text-Book has not been adopted, and it is hoped that not only will the smaller volumes be found more convenient to handle, but that where only one or two sections are required, the considerable saving in the purchase price will be appreciated. The text is that of the ninth edition of the complete work and it will be seen that the page numbers remain the same. Pages 1 to 16, which form an introductory chapter to the complete Text-Book, have been omitted from Volume I, Human Embryology, in which the text commences on page 17. The sections now available as separate volumes are as follows:

Volume I HUMAN EMBRYOLOGY.

Volume II THE LOCOMOTOR SYSTEM.

Containing (i) Osteology. (ii) Arthrology. (iii) Myology.

Volume V THE NERVOUS SYSTEM.

Containing (i) Central Nervous System. (ii) Peripheral Nervous System.

Volume VI SURFACE AND SURGICAL ANATOMY.

With an appendix on Radiographic Anatomy.

Two further volumes containing the remaining sections may be issued later if it is felt that there is a sufficient demand for them.

The complete Text-Book will remain available as a single volume and the present volumes are intended principally for those who do not require the whole text.



PLATE I.—RADIOGRAPH OF EIGHT-MONTHS FŒTUS (EVISCERATED) TO SHOW THE STATE OF OSSIFICATION OF THE SKELETON. THE RIGHT FOREARM IS SUPINATED, THE LEFT PRONATED.

Note the absence of ossific centres for the Carpus and the presence of centres for the Talus and Calcaneum (cf. Plate XVIII, Fig. 1, p. 273, and Plate XXVIII, Fig. 1, p. 321). Minute centres of ossification for the lower epiphysis of the right Femur and the upper epiphysis of the left Tibia are also faintly visible.

PLATE II

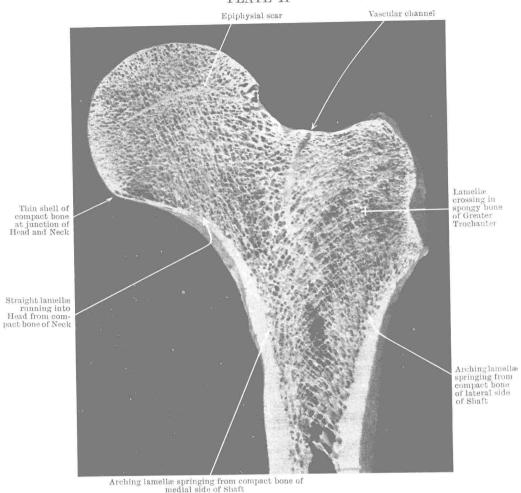


Fig. 1.—Photograph of Coronal Section of Upper End of Left Femur to show its Architecture. Note how the compact bone of the Shaft thins out over the Greater Trochanter and the

Head, and the manner of crossing of the different systems of lamellæ in the spongy bone.

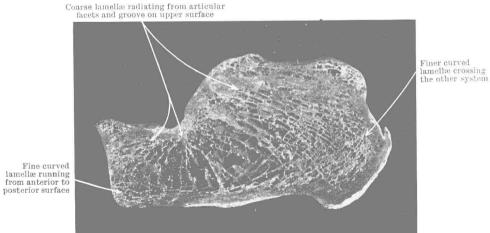


Fig. 2.—Photograph of Sagittal Section of Calcaneum to show its Architecture.

Note the thin shell of compact bone and the arrangement of the lamellæ of the spongy bone in two main systems.

PLATE III

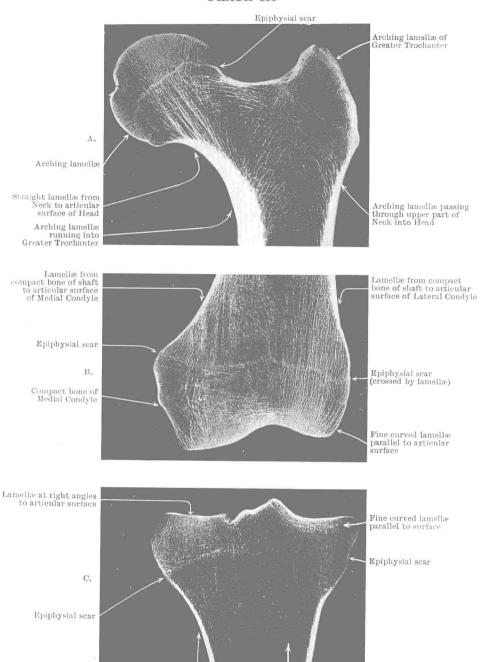


PLATE III.—RADIOGRAPHS OF CORONAL SECTIONS OF A. UPPER END OF FEMUR; B. LOWER END OF FEMUR; C. UPPER END OF TIBIA, OF A WOMAN AGED 34.

Vertical lamellæ of spongy bone

Vertical lamellæ springing from compact bone of shaft

Note the persisting epiphysial scars and the arrangement of the systems of lamellæ in the spongy bone.



Fig. 1.—Radiograph of Cervico-Thoracic Region of Woman aged 35, showing a Pair of well-developed Cervical Ribs.

Note the asymmetry of the cervical ribs and that the left one articulates with a projecting process of the first thoracic rib. For view of the right cervical rib on a larger scale see Plate LXVIII, Fig. 2, p. 721, which shows also more clearly the evidence of the presence of a "lobe of the vena azygos" in the right lung.

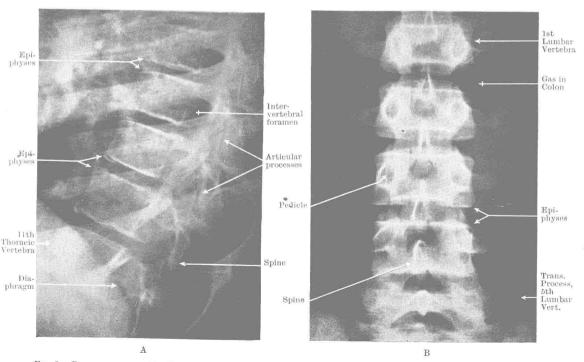


Fig. 2.—Radiographs of (A) Thoracic and (B) Lumbar Vertebræ of a Girl aged 12, showing the Epiphyses of the Vertebral Bodies.



PLATE I.—RADIOGRAPH OF EIGHT-MONTHS FŒTUS (EVISCERATED) TO SHOW THE STATE OF OSSIFICATION OF THE SKELETON. THE RIGHT FOREARM IS SUPINATED, THE LEFT PRONATED.

Note the absence of ossific centres for the Carpus and the presence of centres for the Talus and Calcaneum (cf. Plate XVIII, Fig. 1, p. 273, and Plate XXVIII, Fig. 1, p. 321). Minute centres of ossification for the lower epiphysis of the right Femur and the upper epiphysis of the left Tibia are also faintly visible.

PLATE II

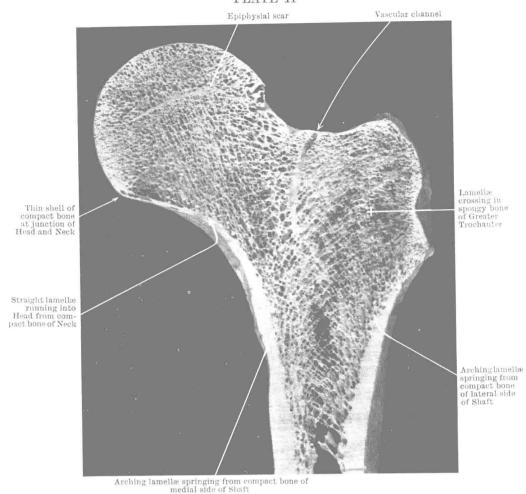


Fig. 1.—Photograph of Coronal Section of Upper End of Left Femur to show its Architecture.

Note how the compact bone of the Shaft thins out over the Greater Trochanter and the Head, and the manner of crossing of the different systems of lamellæ in the spongy bone.

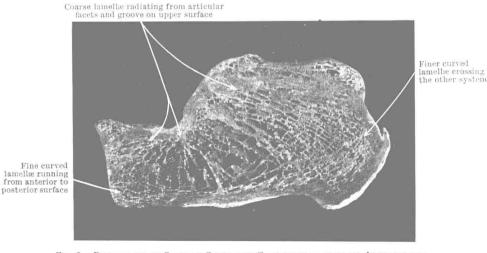


Fig. 2.—Photograph of Sagittal Section of Calcaneum to show its Architecture.

Note the thin shell of compact bone and the arrangement of the lamellæ of the spongy bone in two main systems.

此为试读,需要完整PDF请访问: www.ertongbook.com

PLATE III

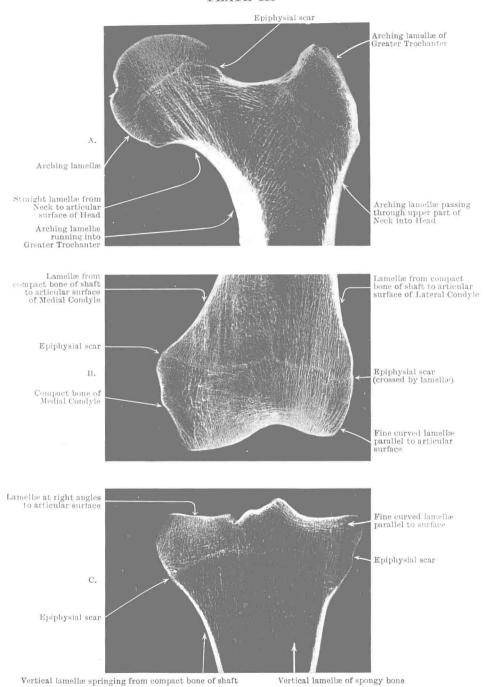


PLATE III.—RADIOGRAPHS OF CORONAL SECTIONS OF A. UPPER END OF FEMUR;
B. LOWER END OF FEMUR; C. UPPER END OF TIBIA, OF A WOMAN AGED 34.

Note the persisting epiphysial scars and the arrangement of the systems of lamellæ in the spongy bone.



Fig. 1.—Radiograph of Cervico-Thoracic Region of Woman aged 35, showing a Pair of well-developed Cervical Ribs.

Note the asymmetry of the cervical ribs and that the left one articulates with a projecting process of the first thoracic rib. For view of the right cervical rib on a larger scale see Plate LXVIII, Fig. 2, p. 721, which shows also more clearly the evidence of the presence of a "lobe of the vena azygos" in the right lung.

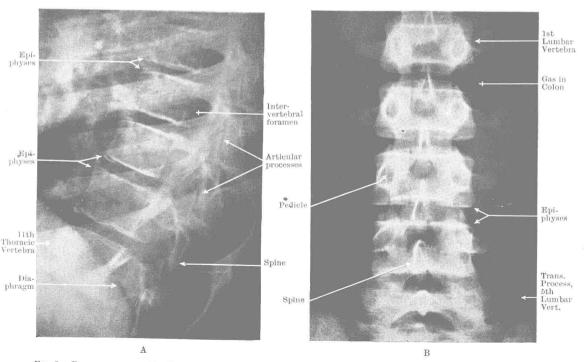


Fig. 2.—Radiographs of (A) Thoracic and (B) Lumbar Vertebræ of a Girl aged 12, showing the Epiphyses of the Vertebral Bodies.

CONTENTS

OSTEOLOGY

BY

R. G. INKSTER

			PAGE		4.0
Uses and Articulation o	F Bo	NES .	105	GROWTH AND AGE-CHANGES OF SKULL .	21
Constituents of Bone			105	SEX DIFFERENCES IN THE SKULL	21
STRUCTURE OF BONE .	*:	* *	106	DEVELOPMENT AND MORPHOLOGY OF	
Architecture of Bone	V.		107	Skull	21
Classification of Bones			108	Bones of the Cranium	21
CHARACTERS OF LIVING BO	NE	× ×	109	Frontal Bone	21
Bone-Marrow		× ×	109	Parietal Bones	21
APPEARANCES OF A DRIED	BONI	Ε	110	Occipital Bone	21
CARTILAGE	(4)		111	Temporal Bones	22
Cartilage			112	Sphenoid Bone	22
Growth of Bone .			115	Ethmoid Bone	22
Epiphyses			116	Inferior Nasal Conchæ	23
THE SKELETON			118	Lacrimal Bones and Vomer	23
VERTERRAL COLUMN			118	Lacrimal Bones and Vomer Nasal Bones and Maxillæ	23
A Typical Vertebra .			121	Palatine Bones	23
		x x	122	Zygomatic Bones	23
THORACIC VERTEBRE .	-		220	Sutural Bones	23
LUMBAR VERTEBRÆ .			128	Sutural Bones	23
SACRUM AND COCCYX .	Ċ		130	Scapula	23
VERTEBRAL COLUMN AS A	WHOL	Ε .	134	* Clavicle	24
OSSIFICATION OF VERTEBRA			2.00	Humerus	24
VARIATIONS IN VERTEBRÆ			700	Illna	25
SERIAL HOMOLOGIES OF VI	RTER	RÆ .		Radius	26
			141	Carnus	26
STERNUM				Humerus . Ulna	26
RIBS			146	Phalanges of Fingers	27
THODAY AS A WHOLE	ě	, .	147	Sesamoid Bones of Hand	27
THORAX AS A WHOLE . OSSIFICATION, STRUCTURE,	AND	Vinti	141	Bones of Lower Limb	27
TIONS OF RIBS .	AND	V ARIA-	149	Hin Pone	27
DEVELOPMENT OF VERTEBR	, D.		140	Hip-Bone	28
STERNUM		1.5		Femus	28
The Court		*	151	Femur	28
THE SKULL SKULL AS A WHOLE Norma Verticalis Norma Frontalis Norma Occipitalis	*		$151 \\ 152$	ratella	29
Names Vestinalia	*		152	Tibia	
Norma Verticans .		* *	152	" Tibula	30
Norma Frontalis .	*	3 3	154	* Tarsus	30
Norma Occipitalis .	*	7	160	Calcaneum	31
Norma Lateralis . Norma Basalis	*		101	Talus	31
Norma Basalis	4	* *	166	Cuboid	31
CRANIAL CAVITY . Roof of Cranial Cavity Floor of Cranial Cavity	*	* *	177	Navicular	31
Roof of Cranial Cavity			178	Cuneiform Bones	31
Floor of Cranial Cavity			178	Metatarsus	31
Anterior Cranial Fossa		* *		Phalanges of Toes	32
Middle Cranial Fossa			181	Arches of the Foot	32
Posterior Cranial Fossa	240		186	Sesamoid Bones of Foot	32
CAVITY OF NOSE			191	DEVELOPMENT AND MORPHOLOGY OF THE	
Paranasal Air-Sinuses			197	Limbs	32
Mandible			200	MEASUREMENTS AND INDICES EMPLOYED	
Teeth			206	in Physical Anthropology .	32
TEETH			206	References	32
			208		

ARTHROLOGY

BY

ROBERT WALMSLEY

			PAGE			PAGE
Classification of Joints .			333	Carpo-Metacarpal Joints		370
Fibrous Joints		4	334	Intermetacarpal Joints		371
Cartilaginous Joints			334	Metacarpo-Phalangeal Joints .		371
Synovial Joints			336	Interphalangeal Joints		372
Classification of Synovial	Joint	s .	342	JOINTS OF THE PELVIS		372
JOINTS OF TRUNK AND HEA			343	Lumbo - Sacral and Sacro - Coco	vgeal	
Intervertebral Joints .			343	Joints		373
Atlanto-Occipital Joints .			347	Sacro-Iliac Joint		373
Atlanto-Axial Joints			348	Pubic Symphysis		375
Occipito-Axial Ligaments .			349	Pelvic Mechanics		375
Mandibular Joint			350	Joints of Lower Limb		376
Joints of Ribs and Stern	UM .		351	Hip Joint		376
Costo-Vertebral Joints .			352	Knee Joint		380
Anterior Connexions of Rib	s .	2	353	Tibio-Fibular Joints		388
Sternal Joints			353	Ankle Joint		390
JOINTS OF UPPER LIMB .			354	Joints of the Foot		393
Joints of Shoulder Girdle .			354	Arches of the Foot		393
Sterno-Clavicular Joint .		2	355	Intertarsal Joints		394
Acromio-Clavicular Joint			356	Tarso-Metatarsal Joints		398
Shoulder Joint			357	Intermetatarsal Joints		399
Elbow Joint		2	361	Metatarso-Phalangeal Joints .		399
Radio-Ulnar Joints			365	Interphalangeal Joints		400
Wrist Joint			367	Mechanism of the Foot		400
Intercarpal Joints		2	368	References		401

MYOLOGY

ВУ

R. D. LOCKHART

	Corne and a Marcon and				PAGE	77 D		PAGE
	SKELETAL MUSCLES .			*	403	Muscles of Perineum	*	465
	Attachments	-	(#)	*	403	Fasclæ of Perineum	X	468
	Form and Nomenclature			v	404	Muscles of Pelvis	×	469
		*	(*)	9	405	Fasciæ of Pelvis		473
	Muscular Action .			*	405	Appendicular Muscles		474
	FASCIÆ, SYNOVIAL SHEATHS				409	Muscles of Upper Limb	ŝ	474
W.	Axial Muscles			+	411	Superficial Muscles of Back .		475
-	Muscles of Vertebral Co			*		Muscles of Pectoral Region .	×	478
				*		Fasciæ of Pectoral Region	×	484
	Fasciæ of Back .				419	Muscles of Shoulder		484
	MUSCLES OF HEAD AND NE				420	Deep Fascia of Shoulder		488
	Deep Lateral and Preverte			eles	۰	Muscles of Upper Arm	×	488
	of Neck		20		420	Fasciæ of Upper Arm		492
	Muscles of Scalp .	3	*	1.6	422	Muscles of Forearm		493
	Muscles of Face .		140		423	Short Muscles of Hand		504
	Fasciæ and Muscles of Orl	bit			427	Fasciæ of Forearm and Hand .		510
					431	Muscles of Lower Limb	v	515
	Muscles of Neck .	**	3.00		434	Muscles of Groin	į.	515
	Muscles of Hyoid Bone			*	434	Muscles of Gluteal Region		516
	Muscles of Tongue .				438	Muscles of Thigh		519
	Muscles of Pharynx .				440	Fasciæ of Thigh and Gluteal Region		531
	Muscles of Soft Palate				441	Muscles of Leg and Foot		534
	FASCIÆ OF HEAD AND NEC	K	98	8	445	Fasciæ of Leg and Foot		549
	Muscles of Thorax .				447		F	
	Diaphragm				449	Skeletal Muscles		553
	MUSCLES OF ABDOMINAL W	ALL		¥	454	References		556
	Inguinal Canal		1.0		462			
	FASCIÆ OF ABDOMINAL WA	LL			464	Index		1561
							-	

OSTEOLOGY

by R. G. INKSTER, M.A., M.D. Reader in Anatomy, University of Edinburgh

INTRODUCTION

BONES AND CARTILAGES

The body is supported by an internal framework or skeleton of bones [σκελετός (skeletos) = dried]. This skeleton accounts for about one-seventh of the body-weight in a man and rather less in a woman; and the bones are supplemented in many places by gristle or cartilage—more so in a growing person than in an adult.

Uses of Bones.—Bones give support to the softer tissues which surround them and in some cases form protective boxes or cages for internal organs such as, for example, the brain in the skull, the heart and lungs in the chest and the spinal cord in the backbone. They also act as levers to which muscles or their tendons are attached and can transmit either tensile or compression stresses without appreciable deformation.

In addition, the spaces found inside bones are used for the production of bloodcells, for these spaces contain bone-marrow in which the blood-corpuscles develop, and the bone-substance itself is a store of lime-salts upon which the body may draw when necessary.

Articulation of Bones (see also the Section on Joints).—Since a continuous rigid framework would prevent movement, the bony skeleton is divided into separate bones joined by softer tissues which are, as a rule, sufficiently flexible to allow

movement to take place.

The union between two or more adjacent bones is called a joint or articulation (articulus, diminutive of artus = a joint) and the bones so united are said to articulate with each other at the joint. The surface of one bone which comes into direct relation with another at a joint is its articular surface and, when the bones can glide or rotate on each other freely, an actual space is present between them; the articular areas are then covered with an adherent layer of smooth glistening articular cartilage. The bone underlying the cartilage is also smooth so that the articular part of a dried bone is easily identified even although the cartilage has been removed. In other cases, where less movement is required, the union of adjacent bones is made by some form of connective tissue, such as fibrous tissue or cartilage, when the articular surface will usually be rough; or else the union may be made complete by fusion of the two bones so that movement is prevented. Movements at joints are controlled or produced chiefly by muscles which are attached to the bones, but the bones are held together by all the tissues which surround them. In the majority of cases fibrous tissue runs from bone to bone as thickened bands or ligaments (ligamentum = a band or bandage, from ligare = to bind). These ligaments or other soft tissues maintain the continuity of the skeleton and transmit tensile stresses when required. Compression stresses cannot be transmitted through ligaments of this kind and the articular ends of long bones are likely to be enlarged so as to distribute such stresses and provide a good bearing surface in any normal position of the joint.

Constituents of Bone.—On analysis, bone can be broken down into approximately equal parts of solids and water. The solids are partly organic matter (31 per cent)

and partly inorganic (69 per cent). The inorganic matter consists of various mineral salts, the chief of which is calcium phosphate. This makes up over 80 per cent of the mineral or inorganic matter, though not necessarily in such a simple form, and, because of its abundance, bones are one of the sources of phosphorus. The organic matter is white fibrous tissue. It consists of:—(a) fine fibres embedded in a little amorphous material, called 'ground-substance', which unites the fibres into interlacing bundles; (b) connective-tissue cells, called bone-corpuscles, placed in rows among the bundles of fibres. The ground substance is completely impregnated with the mineral salts and a bone which has been burned to destroy the connective tissue element (calcined) still retains its form, though it becomes brittle and inelastic and may crumble. On the other hand, if the mineral salts are removed from a bone by soaking it in dilute acid, the bone again retains its form completely but becomes flexible. It can be cut with a knife and a sufficiently long and thin bone can be tied in a knot. Bones are

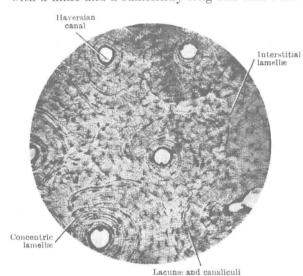


FIG. 122.—PHOTOGRAPH OF GROUND TRANSVERSE SECTION OF COMPACT BONE, showing Haversian systems (Haversian canal, concentric lamellæ, lacunæ, and canaliculi). × c. 75.

therefore not only hard but, because of the fibrous tissue, are also tough and elastic. This combination of organic and inorganic substances makes bones almost unique in that resistance to compression and extension is nearly equal (D'Arcy Thompson, 1942). In old age bones become more brittle owing to diminution of the elasticity of the fibrous tissue and not to any increase in the salts.

Structure of Bone.—There is only one kind of bone, but it may be either compact or spongy in texture (see Plate II, p. 104). Compact bone is hard and dense and forms the outer shell of a bone within its covering of periosteum (see p. 109). It is frequently thick and strong and is well seen when the shaft of a long bone, such as the thigh

bone or femur, is sawn across. Spongy bone is also hard, but this is not so evident because it consists of thin intersecting lamellæ of bone substance with spaces between them, like a sponge (lamella or lamina—a leaf, blade, layer). This arrangement is well seen when the end of a long bone such as the femur is cut across. The spaces between the lamellae are filled with red marrow.

The microscopical structure of bone is essentially the same in the spongy and compact varieties and is closely associated with its mode of formation. Bone substance is laid down in two ways; -(a) Successive thin layers are formed under the These lie approximately parallel with the surface and are called periosteal lamellæ. (b) Successive thin concentric layers are deposited around bloodvessels so as to form canals which therefore contain the blood-vessels as well as any lymph-channels, nerves and loose areolar tissue associated with them. The systems of tubular lamellæ so formed are called Haversian systems (after Clopton Havers who first described them in detail, 1691) and consist of three to ten or more concentric tubes, the Haversian lamellæ, which surround the central cavity named the Haversian canal. The cells associated with the laying down of bone are named osteoblasts. Numbers of them are trapped between the lamellæ during development and remain as osteocytes or bone-corpuscles in the substance of the bone. minute cavities occupied by the bone-corpuscles during life are called lacunæ (lacuna—a pit, hole, or cavity) and, since the living cells are connected with each other by slender cytoplasmic processes, the substance of the lamellæ formed around them is penetrated by minute channels. These are called canaliculi and connect