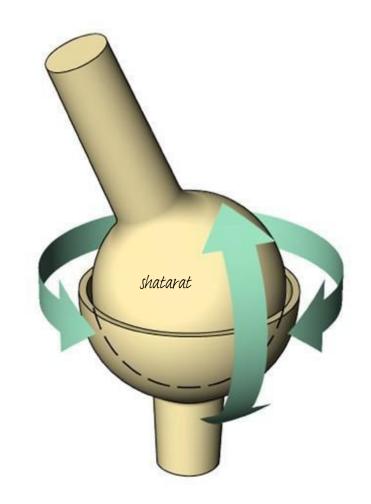
JOINTS OF THE LOWER LIMB

BY DR. AMJAD SHATARAT

HIP JOINT

1-Type:

Synovial multiaxial ball-and-socket joint.

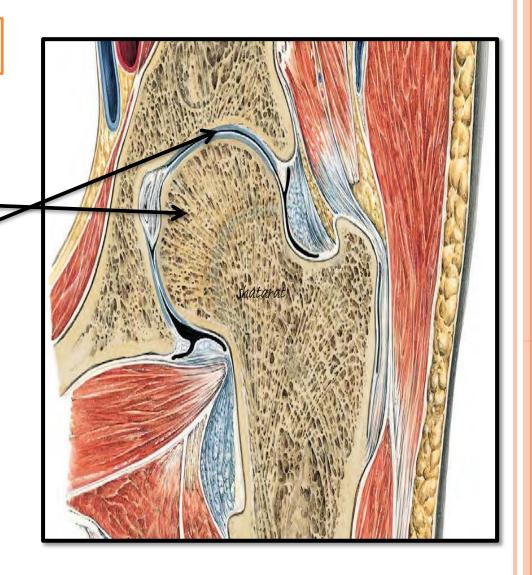


2-Articular surfaces:

- a. head of femur ____
- b. lunate surface of acetabulum

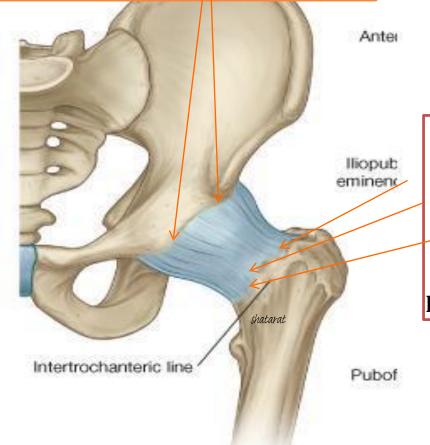
Which is deepened by the fibrocartilaginous *labrum* acetabulare

3-Nerve
Supply: Femoral
nerve Obturator
nerve Sciatic nerve



4-The capsule of the hip is attached

proximally to the margins of the acetabulum

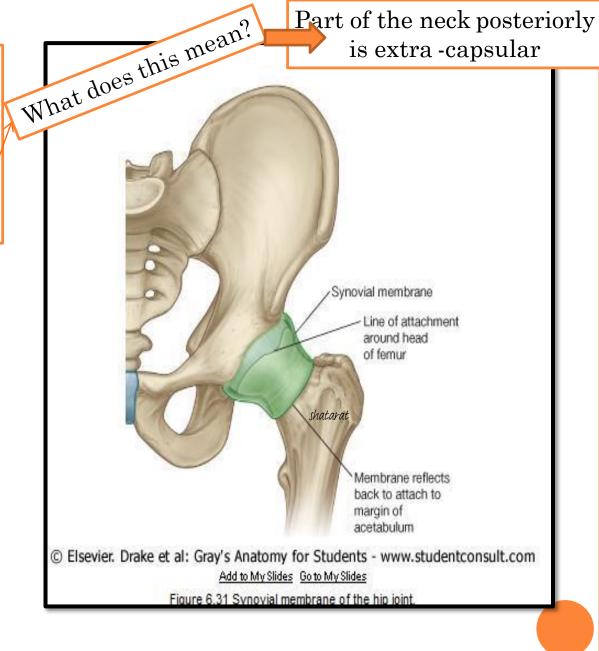




Distally, it is attached along the intertrochanteric line, the bases of the greater and lesser trochanters

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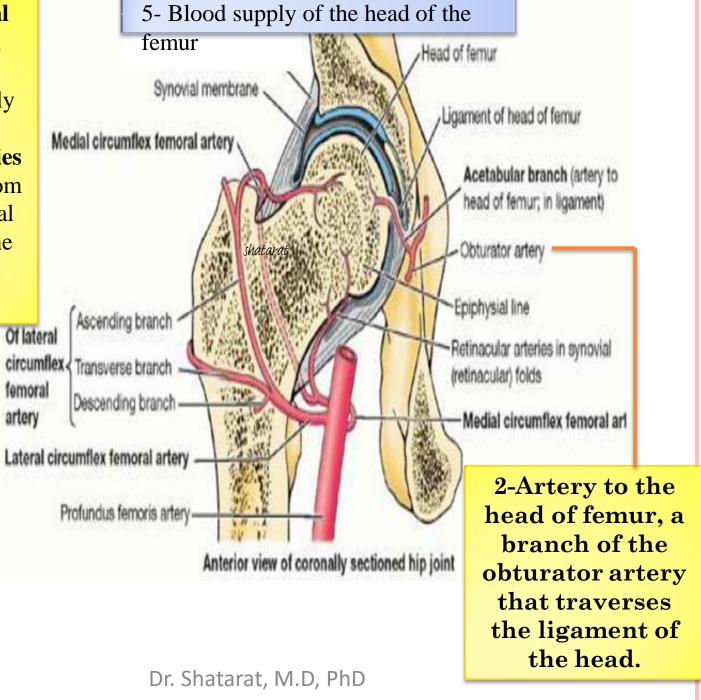
posteriorly,
to the femoral
neck about 0.5 in
(12mm) from the
intertrochanteric,
crest.

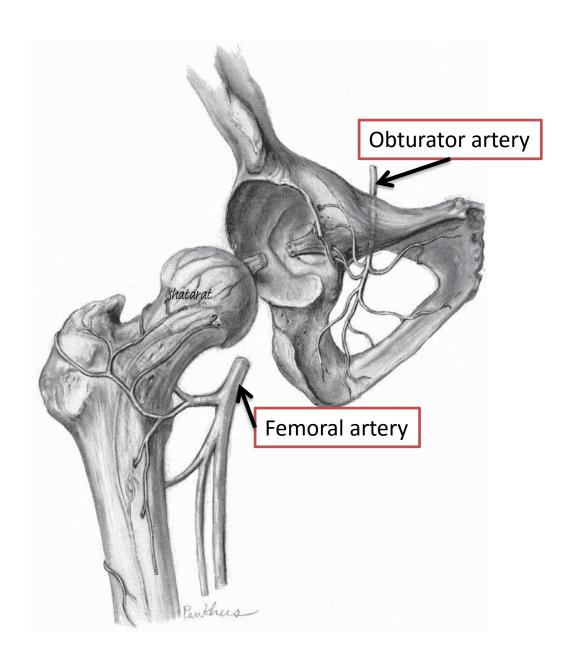


1-Medial and lateral circumflex femoral arteries

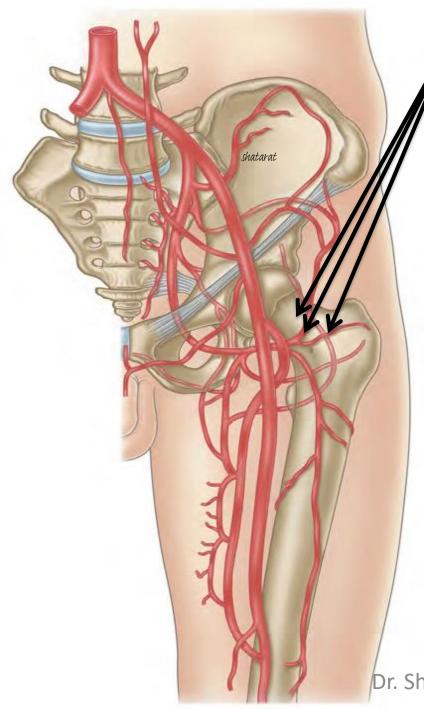
The main blood supply is from

the retinacular arteries arising as branches from the circumflex femoral arteries (especially the medial circumflex femoral artery).





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1-The Trochanteric Anastomosis

The trochanteric anastomosis:

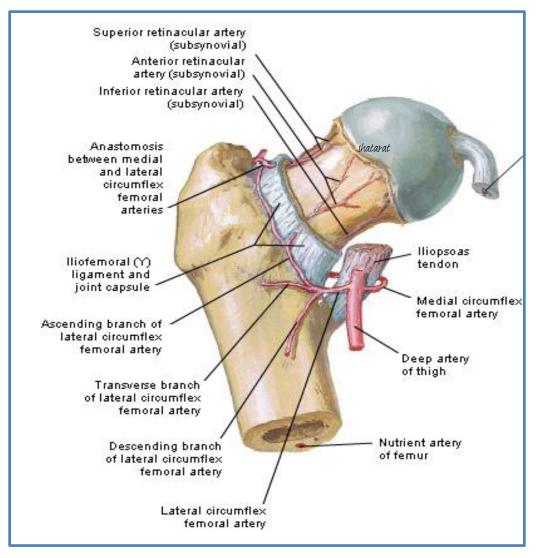
Branches pierce the capsule to give the main blood supply to THE HEAD OF THE FEMUR

The following arteries take part in the anastomosis:

- A) The superior gluteal artery, the inferior gluteal artery and the obturator artery (from the internal iliac artery)
- B) <u>The medial femoral circumflex artery,</u> and the lateral femoral circumflex artery (from the femoral artery)

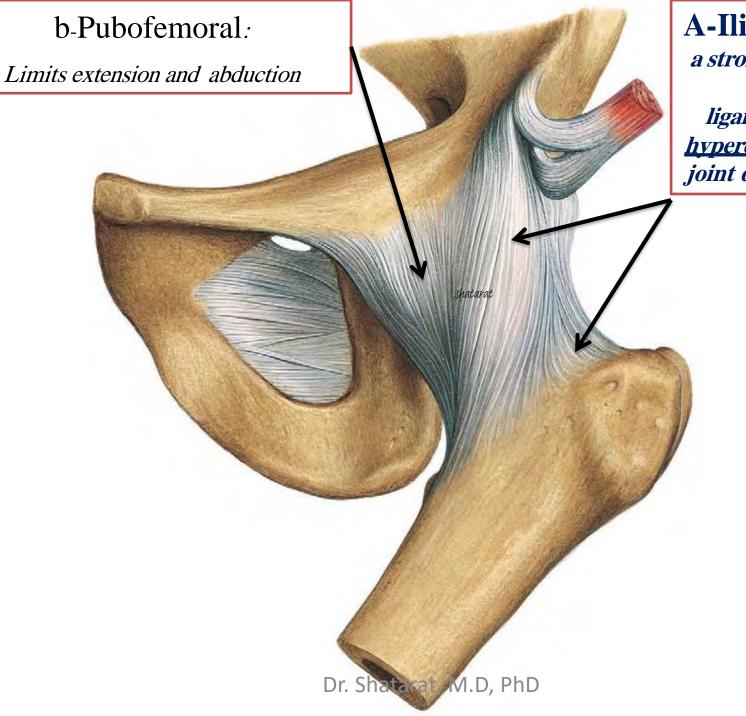
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2-The Cruciate Anastomosis

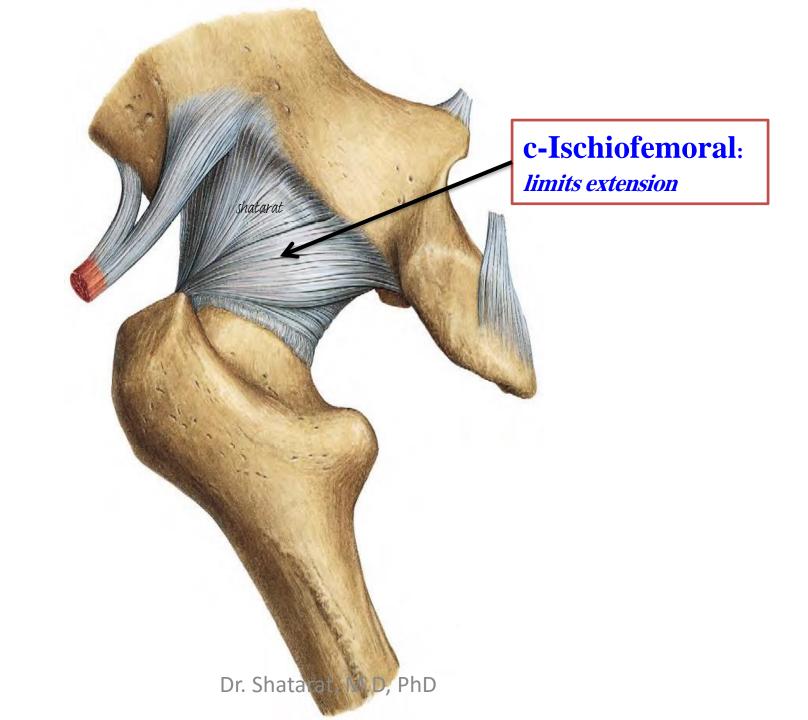


The Cruciate
Anastomosis
The cruciate anastomosis
is situated at the level of
the lesser trochanter of
the femur and, together
with the trochanteric
anastomosis, provides a
connection between the
internal iliac and the
femoral arteries

7-MAINLIGAMENTS OF THE HIP JOINT

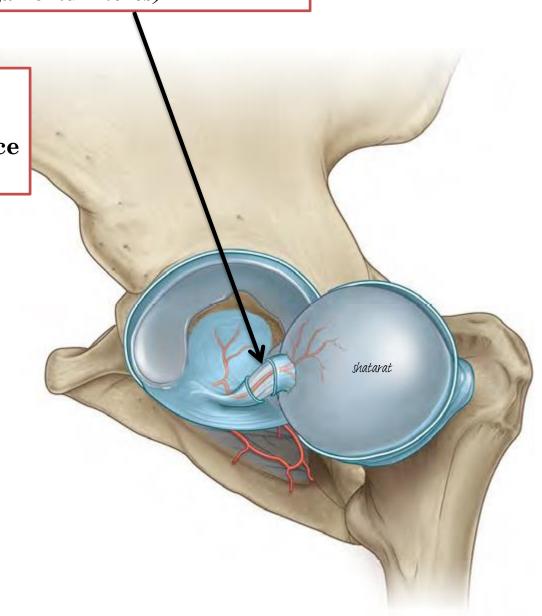


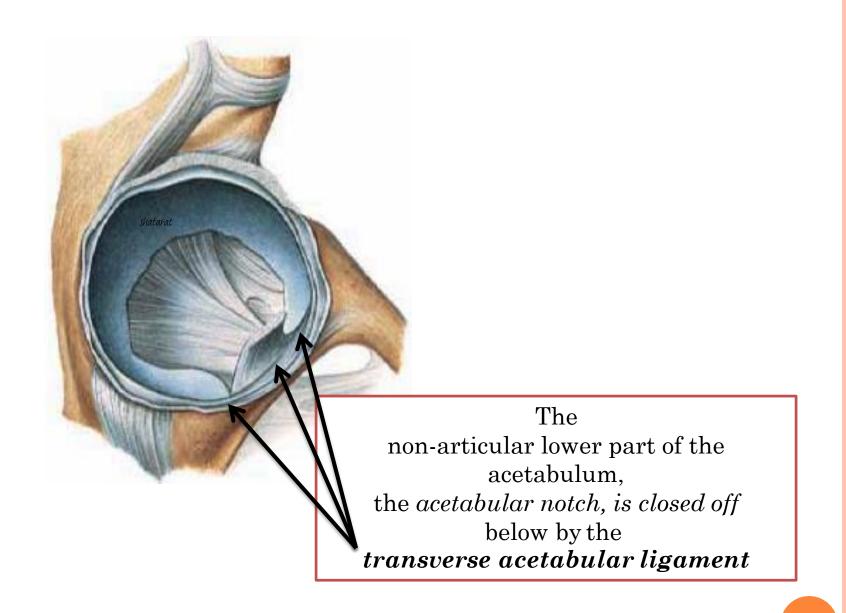
A-Iliofemoral: is
a strong, inverted Yshaped
ligamentPrevents
hyperextension of hip
joint during standing



D-The ligament of head of femur (*ligamentum teres*)

primarily a synovial fold conducting a blood vessel
 is weak and of little importance in strengthening the hip joint





v-Movements

SELF-STUDY

- Flexion is performed by *the iliopsoas*,
 - rectus
- Extension is performed by the gluteus maximus and the hamstring muscles.
- Abduction is performed by *the gluteus medius* and *minimus*, assisted by the sartorius, tensor fasciae latae, and piriformis.
- Adduction is performed by the adductor longus and brevis and the adductor fibers of the adductor magnus. These muscles are assisted by the pectineus and the gracilis.

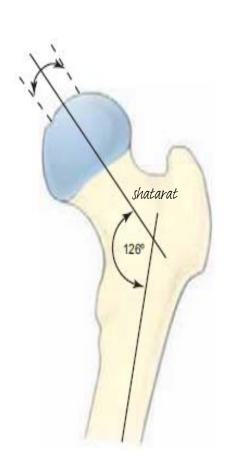
Flexion is limited by the hamstring muscle group. **Extension** is limited by the ligamentous thickening of the capsule; abduction, by the adductor group of muscles; adduction, by the tensor muscle and fascia of the abductor muscles; and rotation, by the fibrous capsular

- Latorator tation les performes in the short utates a haximus.
- Medial rotation is performed by the anterior fibers of the gluteus medius and gluteus minimus and the tensor fasciae latae.



^- ANGLE OF INCLINATION

it is the angle between the neck and shaft of the femur



Approx. 125°

typically ranges from 115 to 140 degrees

is about 160 ° in the young child and about 125° in the adult

ANKLE JOINT

Ankle Joint

Type

The ankle is a synovial hinge joint.

Articulation

the lower end of the tibia, the two malleoli, and the body of the talus

Ligaments

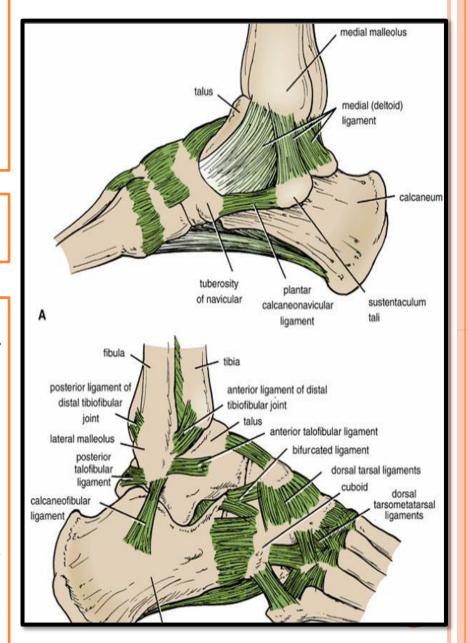
The medial, or deltoid, ligament

The lateral ligament

Movements Self-study

Dorsiflextion is performed by the tibialis anterior, extensor hallucis longus, extensor digitorum longus, and peroneus tertius. (muscles of the anterior compartment of the leg)

flexion is performed **Plantar** by the gastrocnemius, soleus, plantaris, peroneus longus, peroneus brevis, tibialis posterior, flexor digitorum longus, and flexor hallucis longus. (all the muscles of lateral and posterior compartment except popliteus Dr. Shatarat, M.D, PhD muscle)



Proximal Tibiofibular Joint

> <u>Articulation</u>

Articulation is between the lateral condyle of the tibia and the head of the fibula).

The articular surfaces are flattened and covered by hyaline cartilage.

≻Tvpe

This is a synovial, plane, gliding joint.

≻Capsule

Read only

The capsule surrounds the joint and is attached to the margins of the articular surfaces.

Ligaments

Read only

Anterior and posterior ligaments strengthen the capsule.

>Synovial Membrane

Read only

The synovial membrane lines the capsule and is attached to the margins of the articular surfaces.

Read only

≻Nerve Supply

The common peroneal nerve supplies the joint.

Movements

Read only

A small amount of gliding movement takes place during movements at the ankle joint.

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Distal Tibiofibular Joint > Articulation

Articulation is between the fibular notch at the lower end of the tibia and the lower end of the fibula

>Type

The distal tibiofibular joint is

a fibrous joint

> Capsule

There is no capsule.

Ligaments

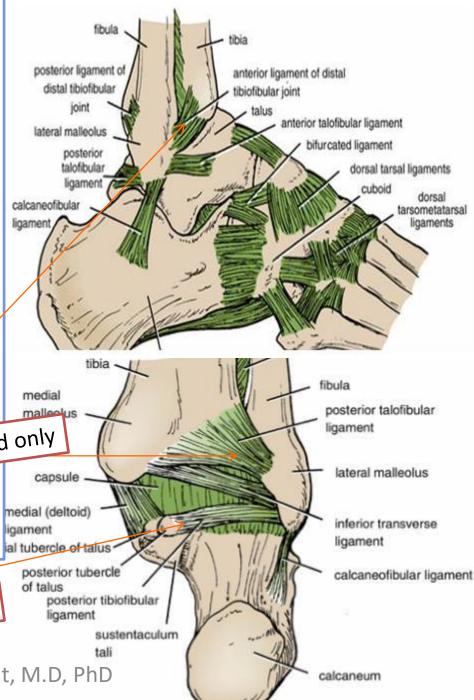
Read only

1The **interosseous ligament** is a strong, thick band of fibrous tissue that binds the two bones together.

2The anterior and posterior ligaments are Read only flat bands of fibrous tissue connecting the two bones together in front and behind the interosseous ligament

3 The inferior transverse ligament

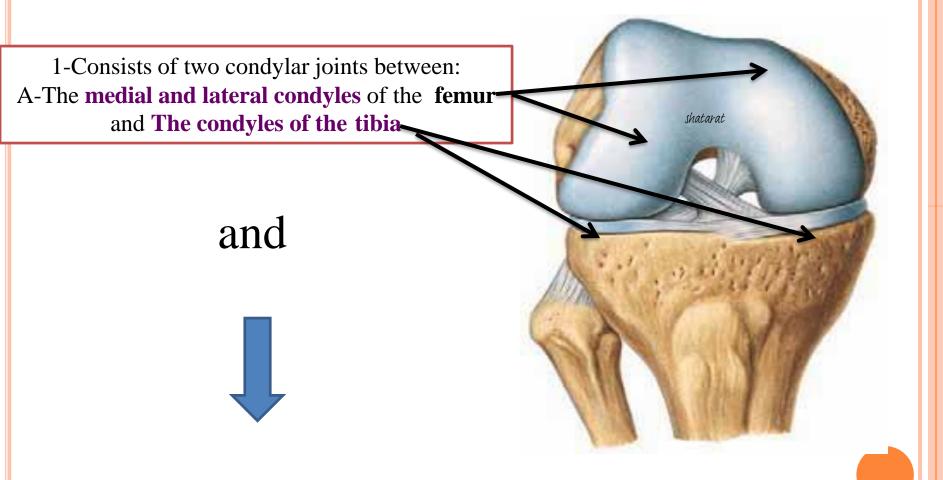
ial tubercle of talus posterior tubercle of talus Read only posterior tibiofibular Dr. Shatarat, M.D, PhD



KNEE JOINT

Knee Joint

➤ Is the most **complicated** joint in the body!!!!

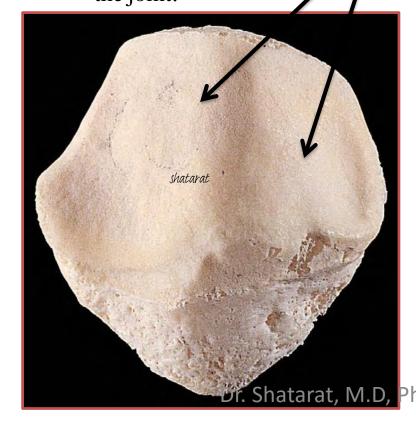


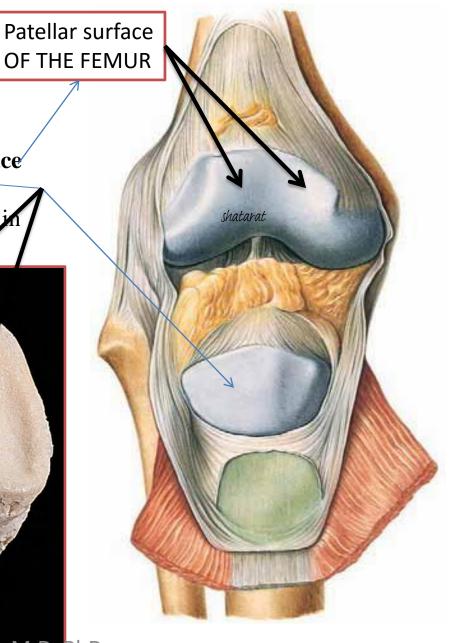
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between the patella and the patellar surface of the femur

Note that the fibula is not directly involved in the joint.





2-Type OF JOINT

The joint between the patella and femur is a synovial joint of the plane gliding variety.

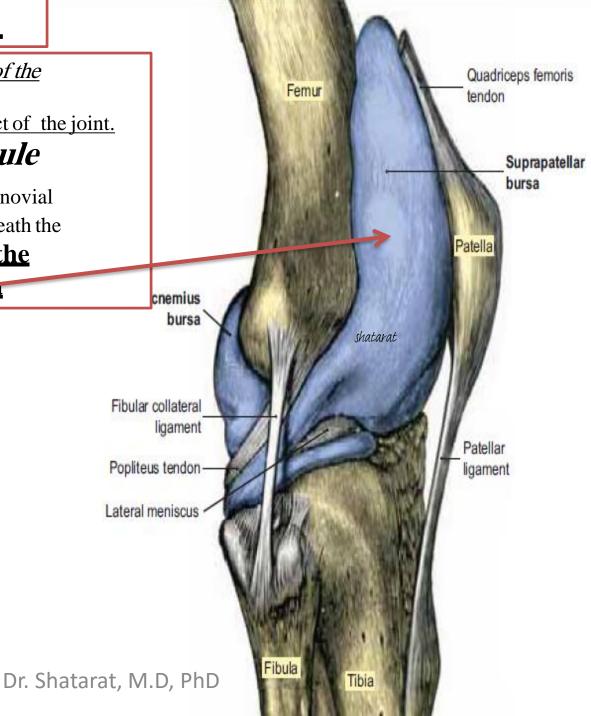
MEDIAL AND LATERAL ROTATION

3-Capsule

- **❖**The capsule is attached to *the margins of the articular surfaces*
- ❖ surrounds the sides and posterior aspect of the joint.
- ♦On the front of the joint, *the capsule*

is absent permitting the synovial membrane to pouch upward beneath the quadriceps tendon, forming **the**

suprapatellar bursa

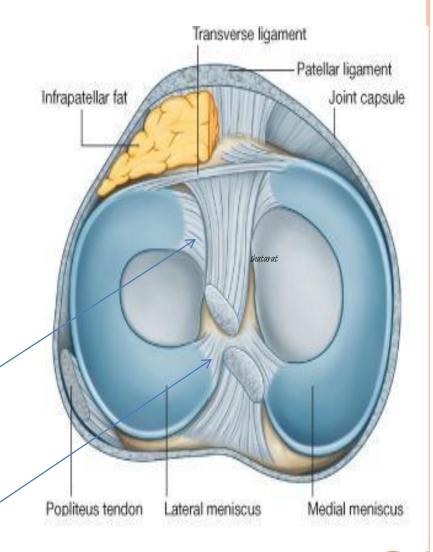


4-Menisci

► Medial and lateral menisci are Cshaped sheets of fibrocartilage. (composed of *fibrous connective* tissue and NOT of cartilage.

- Their function *is to deepen* the articular surfaces of the tibial condyles to receive the convex femoral condyles;
- They also serve as *cushions* between the two bones
- Each meniscus is attached to the upper surface of the tibia by anterior and posterior horns.

Anterior



Posterior



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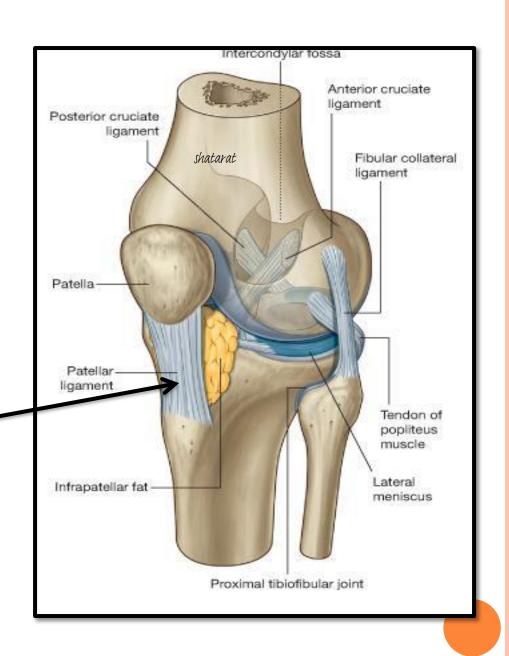
5-Ligaments of the knee joint

* The ligaments may be divided into

A-Extracapsular Ligaments

The ligamentum patellae —

is attached above to the lower border of the patella and below to the tuberosity of the tibia.



The lateral collateral ligament

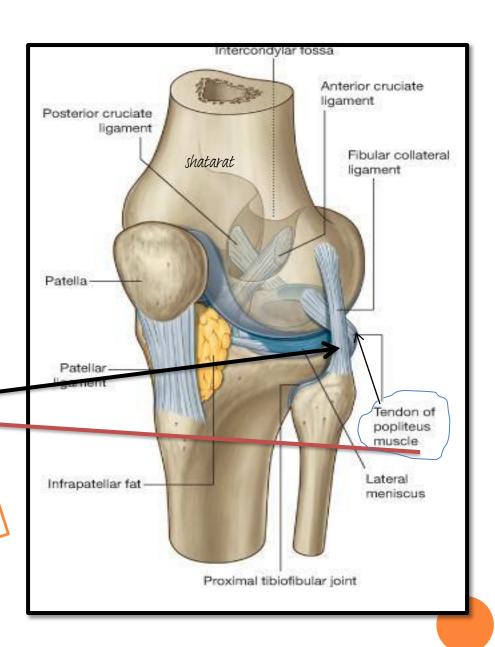
is *cordlike* and is attached above to the *lateral condyle* of the femur and below to the *head of the fibula*.

The tendon of the popliteus

The tendon of the popliteus

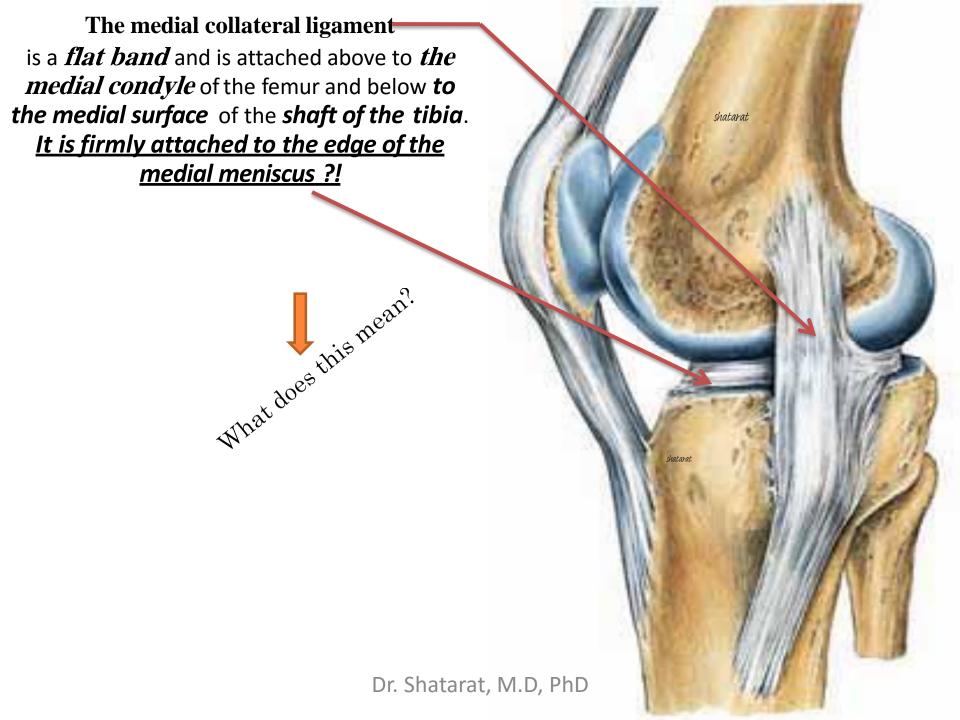
The tendon of the popliteus

the intervenes between the muscle intervenes between the muscle intervenes between the muscle intervenes between the in



What does this mean?

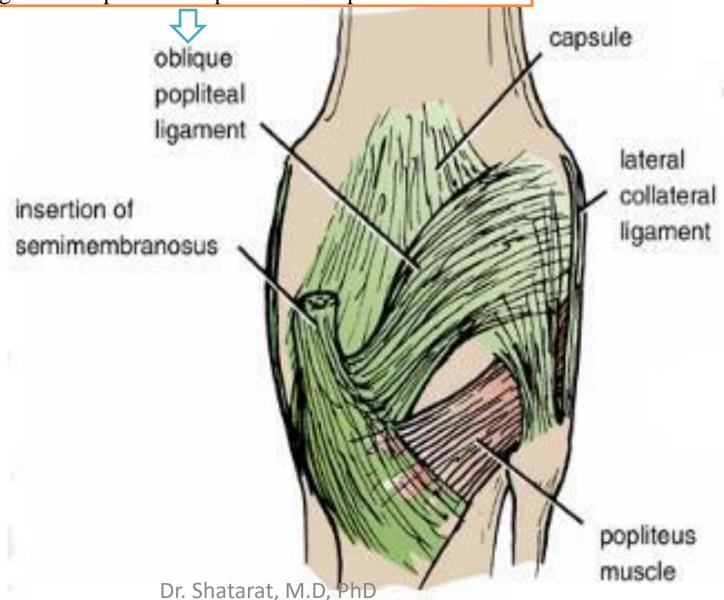
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*****The oblique popliteal ligament

Is a tendinous expansion derived from the semimembranosus muscle.

It strengthens the posterior aspect of the capsule

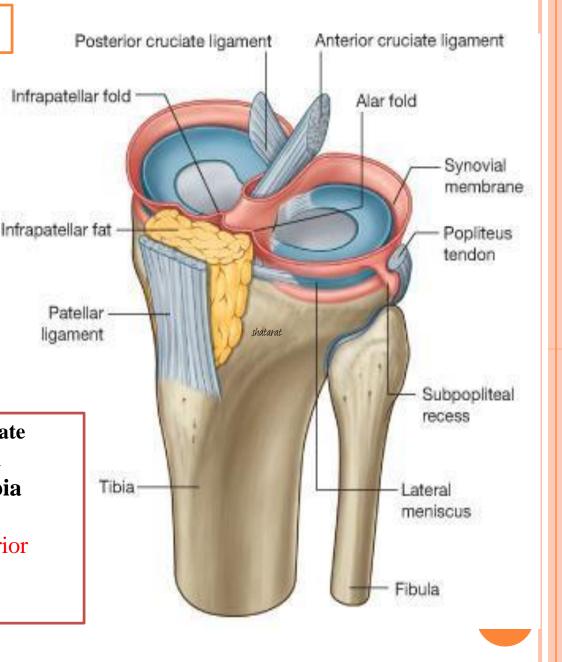


B-Intracapsular Ligaments

The cruciate ligaments

They are named anterior and posterior, according to their tibial attachments

The anterior and posterior cruciate ligaments are the main bond between the femur and the tibia during the joint's range of movement. They prevent posterior and anterior displacement, respectively

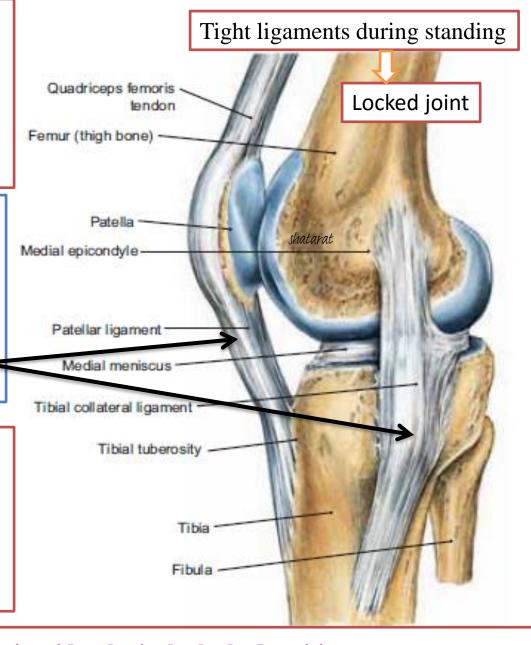


6.Locking mechanism

When Standing, the knee joint is 'locked' which reduces the amount of muscle work needed to maintain the standing position

by medial rotation of the femur on the tibia during extension. Medial rotation and full extension tighten all the associated ligaments

Another feature that keeps the knee extended when standing is that the **body's center of gravity** is positioned along a vertical line that passes **anterior to the knee joint.**



The extended knee is said to be inthe locked position

Before flexion of the knee joint can occur, it is essential that the major ligaments be untwisted to permit movements between the joint surfaces.

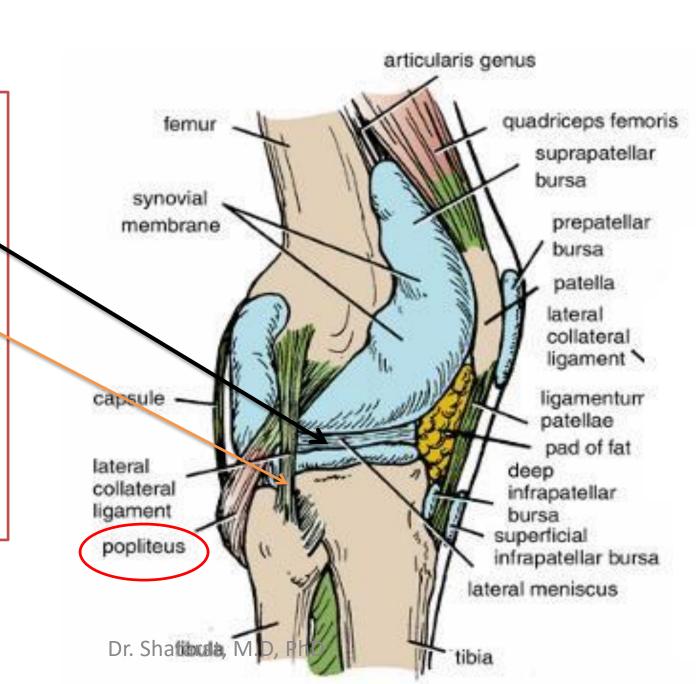
This *unlocking* or untwisting process is accomplished by the *popliteus*

muscle, which laterally rotates the femur on the tibia

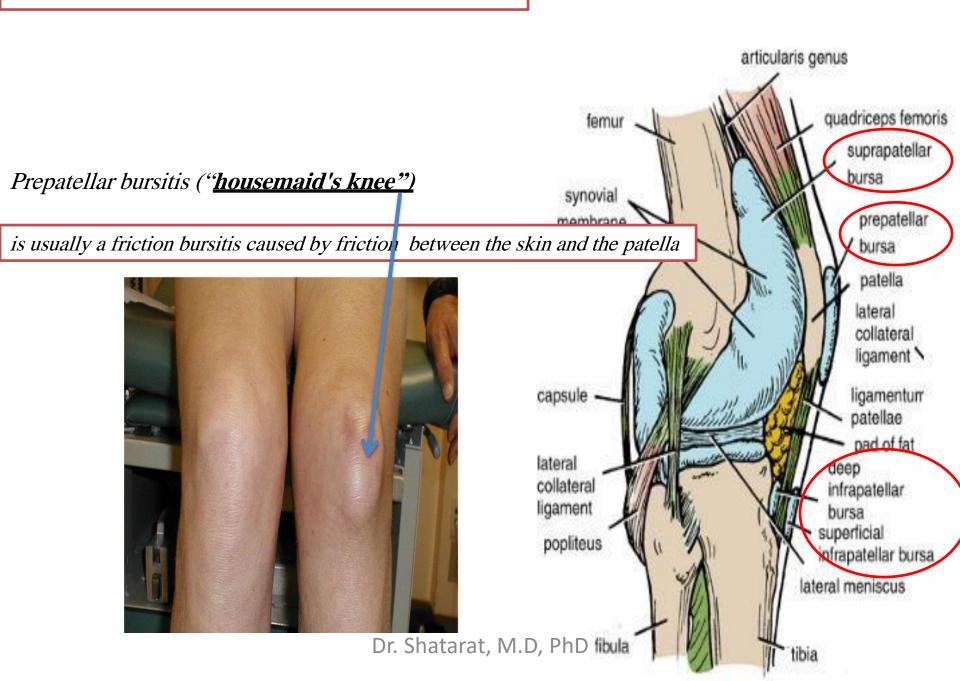


The muscle arises within the capsule of the knee joint
•its tendon separates the lateral meniscus from the lateral ligament of the joint.

It emerges through the lower part of the posterior surface of the capsule of the joint to pass to its insertion.



7-Bursae Related to the Knee Joint



9-movements of the knee joint

Flexion

The biceps femoris, semitendinosus, and semimembranosus muscles, assisted by the gracilis, and sartorius, produce flexion.

Flexion is limited by the contact of the back of the leg with the thigh.

Extension

The quadriceps femoris.

Extension is limited by the tension of all the major ligaments of the joint.

Medial Rotation

The sartorius, gracilis, and semitendinosus

Lateral Rotation

The biceps femoris

Note:

The stability of the knee joint depends on the tone of the strong muscles acting on the joint and the strength of the ligaments.

