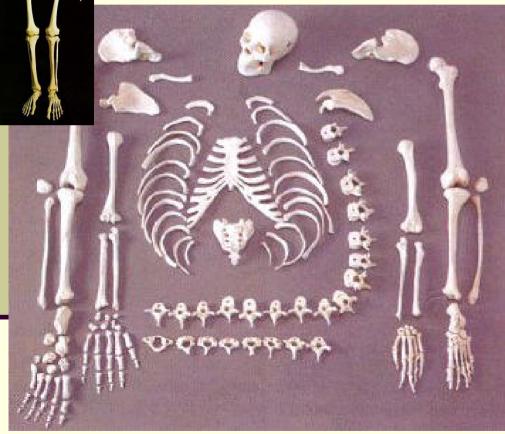
UNDERSTANDING WORDS

- For Chapters 6 and 7 check out pages 157 and 181. For example:
 - Ax-, axis: axial skeleton upright portion of the skeleton that supports the head, neck, and trunk.
 - -blast, bud or offshoot, a growing organism in early stages: osteoblast – cell that will form bone tissue.
 - Fove-, pit: fovea capitis pit in the head of a femur



Chapter 7 – The Skeletal System



- Classification of Bones 2 Groups
 - <u>Axial Skeleton</u> forms the long <u>axis</u> of the body, Includes: bones of the skull, vertebral column, and rib cage
 - <u>Appendicular Skeleton</u> relating to an appendage, Includes: bones of the upper and lower limbs, shoulder girdle, and hip girdle
 - A total of 206 bones in the human body. See page 196 in the textbook for breakdown.

Parts of the skeleton often persist in decomposed remains of human bodies

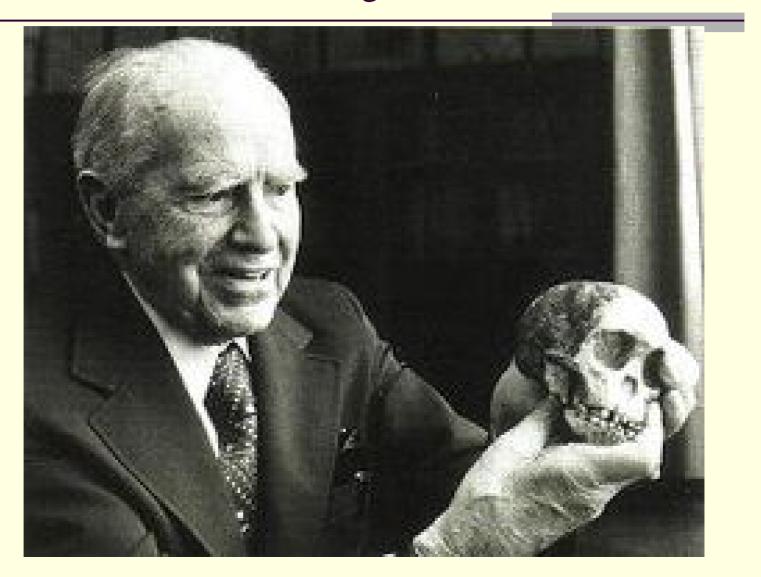
- Useful in Forensic Science especially in the resolution of cases dealing with missing persons and criminal investigations
- Useful in studies of archeology and anthropology (e.g., longevity, quality of diet)
- Useful in studies of paleontology, especially when bones are preserved by process of fossilization. Bones can assist scientist in answering questions regarding human origins

The Biological Origins of Homo sapiens (wise man)

Charles Darwin predicted in *The Descent of Man, and Selection in Relation to Sex* (1871) that the earliest human ancestors probably originated in Africa.

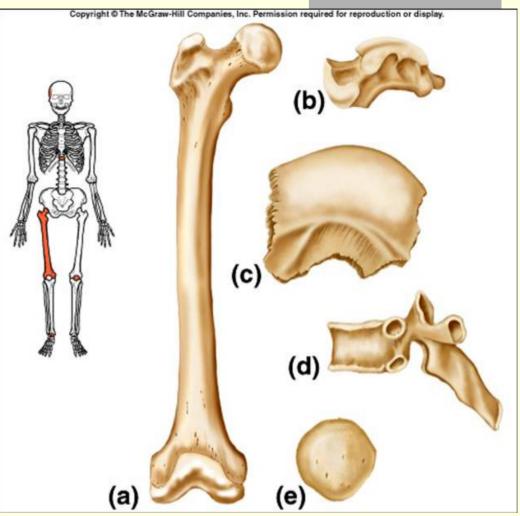
- Large-brained fossil humans in Europe swung scientific opinion in favor of Eurasia during the first third of the 20th century.
- Raymond Dart and Robert Broom found fossil evidence to the contrary to the prevailing idea of the time during the 1920s and 1930s.
- Dart's Taung Child is <u>Australopithecus africanus</u> and lived about 2.5 million years ago.
- During hominid evolution which came first, a large brain or the ability to walk upright? Fossilized skeletal remains give some insight into this question.
 - The ancestors of later hominid lineages had small brains but could walk upright. This notion when initially introduced was met with skepticism by the "experts" of the day, much to Dart's dismay. Later studies confirmed that the first "human-like" animals were bipedal, then later developed larger brains.
- <u>http://www.press.uchicago.edu/Misc/Chicago/284158_brain.html,</u> <u>http://en.wikipedia.org/wiki/Taung_Child</u>, & <u>http://en.wikipedia.org/wiki/Raymond_Dart</u>

Raymond Dart Holding Skull of Taung Child Discovered in 1924 at Taung in South Africa



Bone Classification

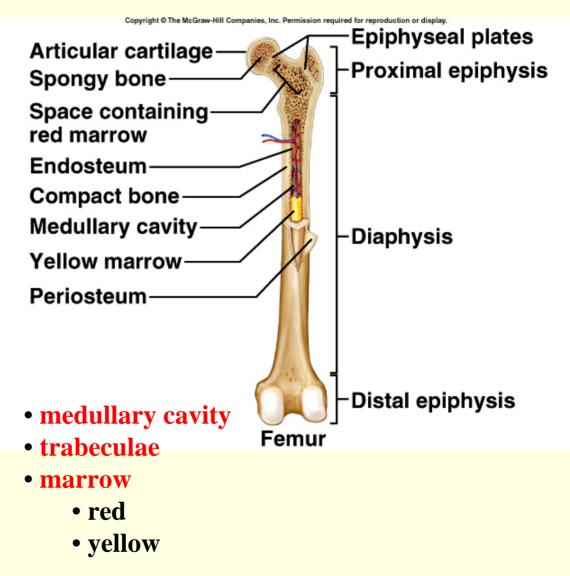
- Long Bones long longitudinal axes and expanded ends (examples include the forearm and thigh bones)
- Short Bones somewhat cube-like (examples include the wrist and ankle bones)
- Flat Bones plate-like (examples include some bones in the skull, rib bones) Irregular Bones (many facial
- bones and vertebrate)
- Sesamoid Bones bones embedded in the tendons next to joints (e.g., patella)



Parts of Long Bone

- epiphysis (expanded porti
 - distal
 - proximal
- diaphysis (bone shaft)
- compact bone
- spongy bone
- articular cartilage
 (hyaline cartilage)
- periosteum
- (fibrous tissue attached to bone surface)
 endosteum (mebrane of

bone-foming cells)

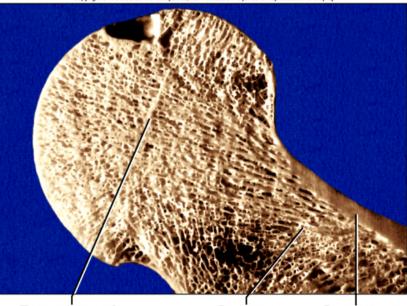


Compact and Spongy Bone

Compact bone Yellow marrow in medullary cavity

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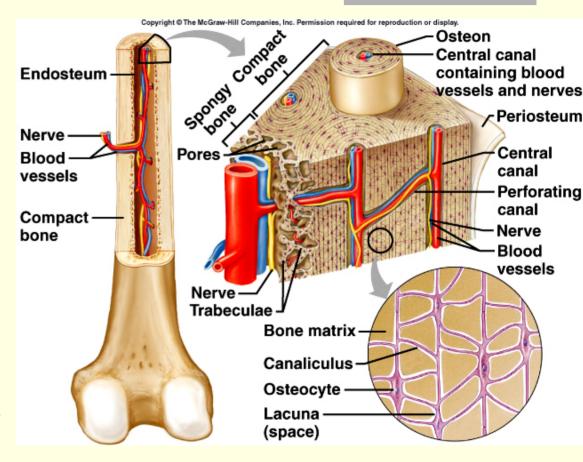


Remnant of epiphyseal plate

Spongy bone Compact bone

Microscopic Structure of Compact Bone

- <mark>osteon</mark> (Haversian System)
- central canal
- perforating canal
- osteocytes (originate from osteoblasts)
- lacuna
- bone matrix
- canaliculus (canals that allow transport of nutrients and wastes between osteocytes)



Bone Development

Intramembranous Ossification (process of replacing connective tissue to form bone)

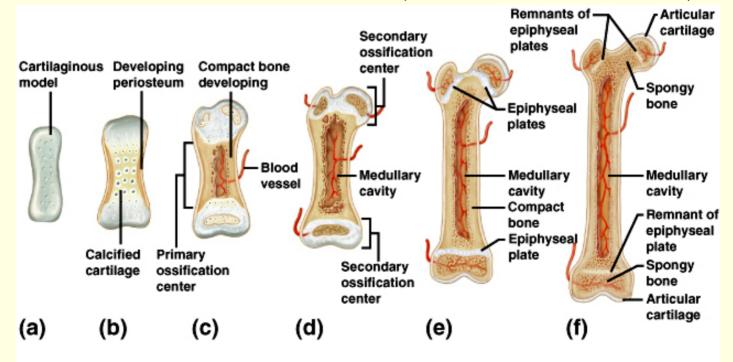
- bones originate within sheetlike layers of connective tissues
- broad, flat bones
- skull bones (except mandible)
- intramembranous bones

Endochondral Ossification (process of replacing cartilage to form bone)

- bones begin as hyaline cartilage
- most bones of the skeleton
- endochondral bones

Endochondral Ossification

- hyaline cartilage model
- primary ossification center
- secondary ossification centers
- epiphyseal plate
- osteoblasts (cells that become osteocytes) vs. osteoclasts (cells that erode bone)



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ABLE 7.1 Major Steps in Bone Development			
Intramembranous Ossification	Endochondral Ossification		
 Sheets of primitive connective tissue appear at sites of future bones. 	1. Masses of hyaline cartilage form models of future bones.		
 Primitive connective tissue cells collect around blood vessels in these layers. 	2. Cartilage tissue breaks down. Periosteum develops.		
 Connective tissue cells differentiate into osteoblasts, which deposit spongy bone. 	 Blood vessels and differentiating osteoblasts from the periosteum invade the disintegrating tissue. 		
 Osteoblasts become osteocytes when bony matrix completely surrounds them. 	 Osteoblasts form spongy bone in the space occupied by cartilage. 		
 Connective tissue on the surface of each developing structure forms a periosteum. 	 Osteoblasts become osteocytes when bony matrix completely surrounds them. 		
 Osteoblasts on the inside of the periosteum deposit compact bone over the spongy bone. 	 Osteoblasts beneath the periosteum deposit compact bone around spongy bone. 		

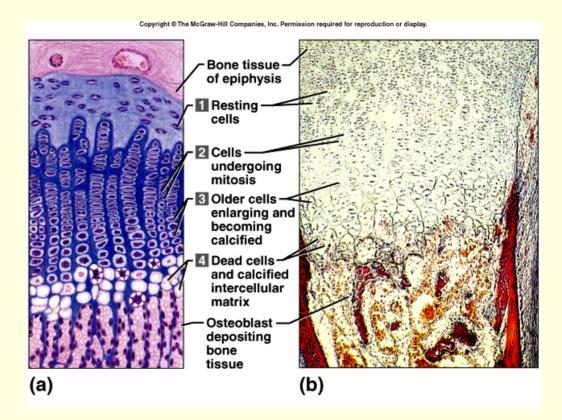
Growth at the Epiphyseal Plate

First layer of cells

- closest to the end of epiphysis
- resting cells
- anchors epiphyseal plate to epiphysis

Second layer of cells

- many rows of young cells
- undergoing mitosis



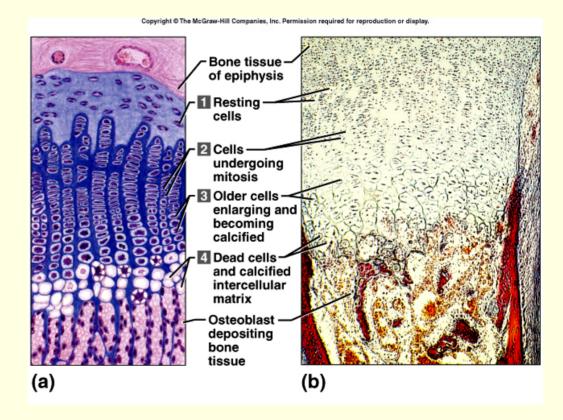
Growth at the Epiphyseal Plate

Third layer of cells

- older cells
- left behind when new cells appear
- cells enlarging and becoming calcified

Fourth layer of cells

- thin
- dead cells
- calcified intercellular substance



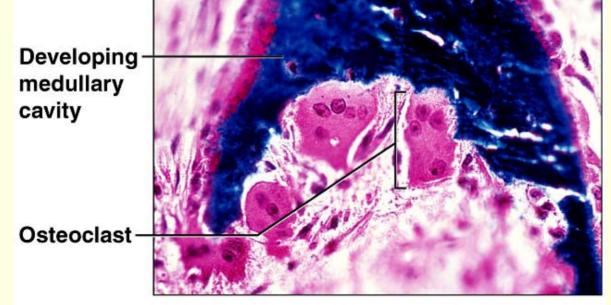
Homeostasis of Bone Tissue

•Bone Resorption – action of osteoclasts and parathyroid hormone

•Bone **Deposition** – action of osteoblasts and calcitonin

•Resorption and Deposition are Opposing Processes

•Total mass of bone tissue in and adult skeleton remains nearly constant, even though 3-5% of bone calcium is exchanged each year.



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TABLE 7.2 Ossification Timetable

Age	Occurrence	Age	Occurrence
Third month of prenatal development	Ossification in long bones begins.	15 to 18 years (females) 17 to 20 years (males)	Bones of the upper limbs and scapulae completely ossify.
Fourth month of prenatal development	Most primary ossification centers have appeared in the diaphyses of bones.	16 to 21 years (females) 18 to 23 years (males)	Bones of the lower limbs and coxal bones completely ossify.
Birth to 5 years	Secondary ossification centers appear in the epiphyses.	21 to 23 years (females) 23 to 25 years (males)	Bones of the sternum, clavicles, and vertebrae completely ossify.
5 to 12 years in females, or 5 to 14 years in males	Ossification rapidly spreads from the ossification centers, and certain bones are ossifying.	By 23 years (females) By 25 years (males)	Nearly all bones completely ossify.

Radiograph showing the presence of epiphyseal plates in a child's bones indicates the the bones are still lengthening.



Factors Affecting Bone Development, Growth, and Repair

- Deficiency of Vitamin A retards bone development
- Deficiency of Vitamin C results in fragile bones
- Deficiency of Vitamin D rickets (children), osteomalacia (adults)
- Insufficient Growth Hormone dwarfism
- Excessive Growth Hormone gigantism, acromegaly
- Insufficient Thyroid Hormone delays bone growth
- Sex Hormones promote bone formation; stimulate ossification of epiphyseal plates
- Physical Stress stimulates bone growth

Homeostatic Imbalances

Osteomalacia

- Bones are inadequately mineralized causing softened, weakened bones
- Main symptom is pain when weight is put on the affected bone
- Caused by insufficient calcium in the diet, or by vitamin D deficiency, etc.

Homeostatic Imbalances

Rickets

- Bones of children are inadequately mineralized causing softened, weakened bones
- Bowed legs and deformities of the pelvis, skull, and rib cage are common
- Caused by insufficient calcium in the diet, or by vitamin D deficiency
- Figure on right is an Xray of a child with bowed legs due to rickets



Homeostatic Imbalances

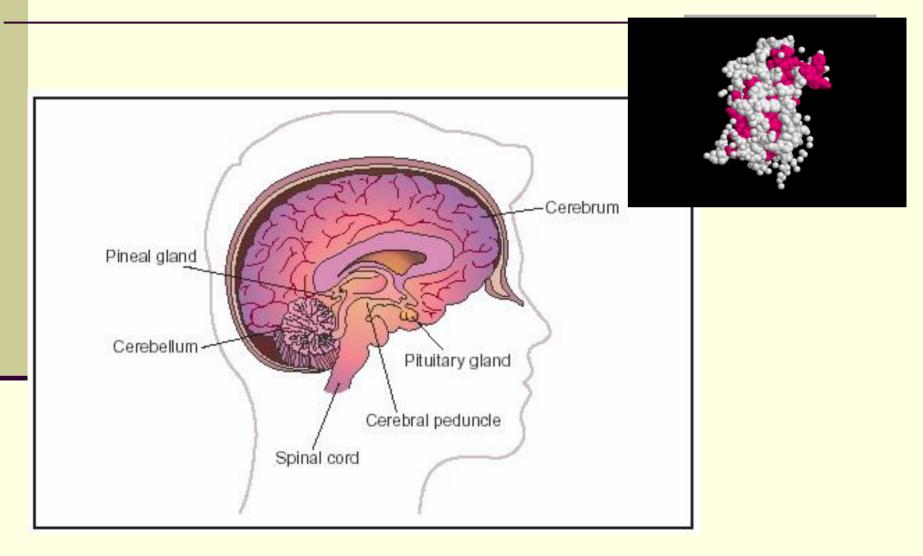
Osteoporosis

- Group of diseases in which bone resorption outpaces bone deposit
- Spongy bone of the spine is most vulnerable
- Occurs most often in postmenopausal women
- Treatment
 - Calcium and vitamin D supplements
 - Increased weight bearing exercise
 - Hormone (estrogen) replacement therapy (HRT)
- Prevented or delayed by sufficient calcium intake and weight-bearing exercise

Paget's Disease -malfunction in the normal process of bone remodelling

- Characterized by excessive bone formation and breakdown
- Pagetic bone has a higher ratio of spongy bone to compact bone
- Pagetic bone, along with reduced mineralization, causes spotty weakening of bone
- Osteoclast activity wanes, but osteoblast activity continues and may form irregular bone thickenings or fill the marrow cavity
- Cause is unknown

Human Growth Hormone - Polypeptide Hormone Secreted by the Anterior Pituitary Gland



Human Growth Hormone – Too much or Too little of a good thing





- Human Growth Hormone
 - Polypeptide Hormone Secreted by the Anterior Pituitary Gland
- Hormone Imbalance
 - Too much HGH
 - Pituitary gigantism
 - Acromegaly (from <u>Greek</u> akros "high" and megas "large" - extremities enlargement)
 - Too little HGH
 - When severe GH deficiency is present from birth and never treated, adult heights can be as short as 48-58 inches (122-147 cm).
 - Also called pituitary dwarfism.
 - Other conditions can lead to dwarfism.

Bone Function

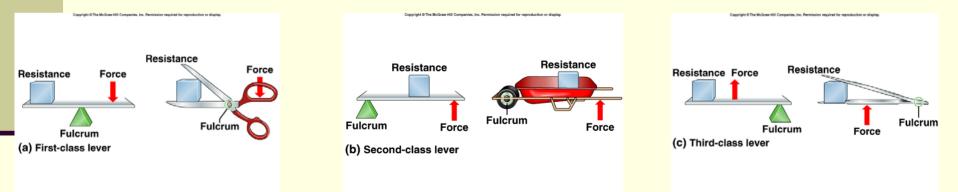
- Support and Protection
 - gives shape to head, etc.
 - supports body's weight
 - protects lungs, etc.
- Body Movement
 - interacts with muscles
 - bones act as rigid bar of a lever

- Blood Cell Formation
 - hematopoiesis
 - red marrow (active)
 - •Yellow marrow (fat storage and inactive)
 - Inorganic Salt Storage
 - calcium
 - phosphate
 - magnesium
 - sodium
 - potassium



Four Basic Components

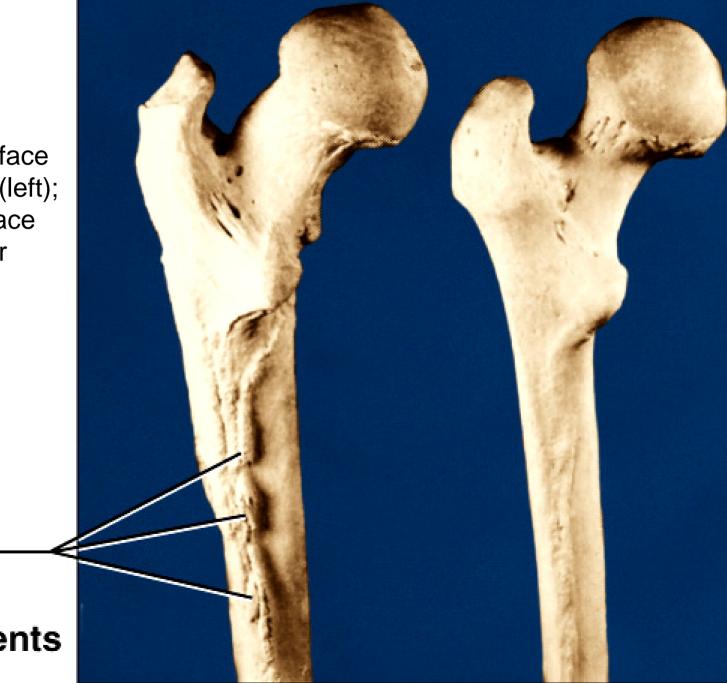
- 1. rigid bar bones
- 2. fulcrum point on which bar moves; joint
- 3. object moved against resistance
- 4. force supplies energy for movement; muscles



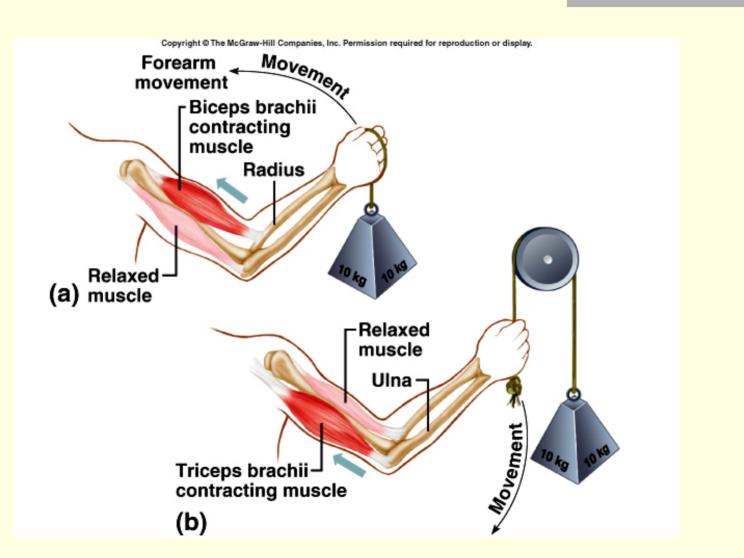
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FEMUR: posterior surface of left femur (left); anterior surface of right femur (right)

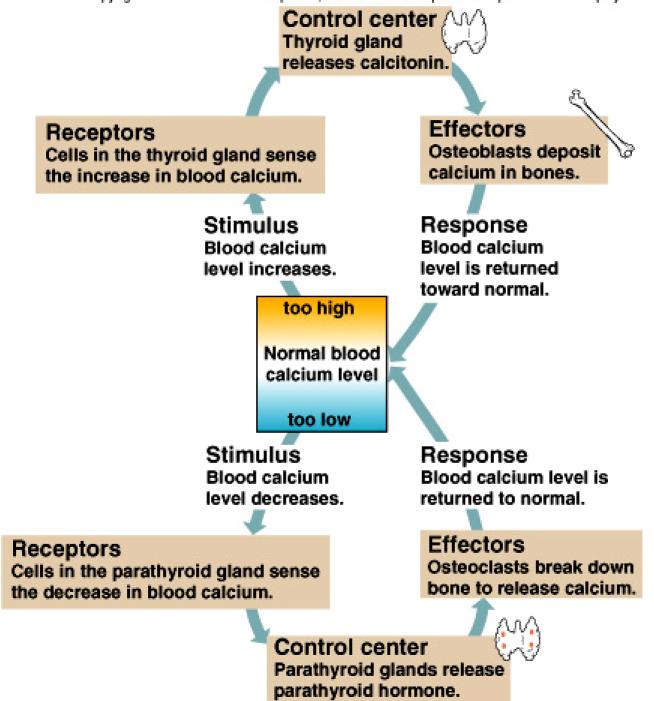
Sites of ——< muscle attachments



Levers and Movement



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TABLE 7.3 Bones o	f the Adult Skeleton	
1. Axial Skeleton		
a. Skull	22 bones	
8 cranial bones		
frontal 1		
parietal 2		
occipital 1		
temporal 2		
sphenoid 1		
ethmoid 1		
14 facial bones		
maxilla 2		
palatine 2		
zygomatic 2		
lacrimal 2		
nasal 2		
vomer 1		
inferior nasal concha 2		
mandible 1		
b. Middle ear bones	6 bones	
malleus 2		
incus 2		
stapes 2		
c. Hyoid	1 bone	
hyoid bone 1		
d. Vertebral column	26 bones	
cervical vertebra 7		
thoracic vertebra 12		
lumbar vertebra 5		
sacrum 1		
coccyx 1		
e. Thoracic cage	25 bones	
rib 24		
sternum 1		

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2. Appendicular Skeleton			
a. Pectoral girdle		4 bones	
scapula 2			
clavicle 2			
b. Upper limbs		60 bones	
humerus 2			
radius 2			
ulna 2			
carpal 16			
metacarpal 10			
phalanx 28			
c. Pelvic girdle		2 bones	
coxa 2			
d. Lower limbs		60 bones	
femur 2			
tibia 2			
fibula 2			
patella 2			
tarsal 14			
metatarsal 10			
phalanx 28			
	Total	206 bones	

Bone Markings

Bulges, depressions, and holes that serve as:

- Sites of attachment for muscles, ligaments, and tendons
- Joint surfaces
- Conduits for blood vessels and nerves

Bone Markings: Projections – Sites of Muscle and Ligament Attachment Tuberosity – rounded projection Crest – narrow, prominent ridge of bone Trochanter – large, blunt, irregular surface Line – narrow ridge of bone

Tubercle – small rounded projection

- Epicondyle raised area above a condyle
- Spine sharp, slender projection
- Process any bony prominence

Bone Markings:

Projections That Help Form Joints

Head – bony expansion carried on a narrow neck Facet – smooth, nearly flat articular surface Condyle – rounded articular projection Ramus – armlike bar of bone

Openings: Depressions and

- Meatus canal-like passageway
- Sinus cavity within a bone
- Fossa shallow, basinlike depression
- Groove furrow
- Fissure narrow, slitlike opening
- Foramen round or oval opening through a bone

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TABLE 7.4 Terms Used to Describe Skeletal Structures

	입지 않아요. 이제 이는 것은 것 같은 것은 것은 것 같았어? 것 같이	
Term	Definition	Example
condyle (kon'dīl)	A rounded process that usually articulates with another bone	Occipital condyle of the occipital bone (fig. 7.22)
crest (krest)	A narrow, ridgelike projection	Iliac crest of the ilium (fig. 7.50)
epicondyle (ep"ĭ-kon'dīl)	A projection situated above a condyle	Medial epicondyle of the humerus (fig. 7.45)
facet (fas'et)	A small, nearly flat surface	Facet of a thoracic vertebra (fig. 7.38)
fissure (fish'ūr)	A cleft or groove	Inferior orbital fissure in the orbit of the eye (fig. 7.20)
fontanel (fon"tah-nel')	A soft spot in the skull where membranes cover the space between bones	Anterior fontanel between the frontal and parietal bones (fig. 7.33)
foramen (fo-ra'men)	An opening through a bone that usually serves as a passageway for blood vessels, nerves, or ligaments	Foramen magnum of the occipital bone (fig. 7.22)
fossa (fos'ah)	A relatively deep pit or depression	Olecranon fossa of the humerus (fig. 7.45)
fovea (fo've-ah)	A tiny pit or depression	Fovea capitis of the femur (fig. 7.53)
head (hed)	An enlargement on the end of a bone	Head of the humerus (fig. 7.45)
linea (lin'e-ah)	A narrow ridge	Linea aspera of the femur (fig. 7.53)
meatus (me-a'tus)	A tubelike passageway within a bone	External acoustic meatus of the ear (fig. 7.21)
process (pros'es)	A prominent projection on a bone	Mastoid process of the temporal bone (fig. 7.21)
ramus (ra'mus)	A branch or similar extension	Ramus of the mandible (fig. 7.31)
sinus (si'nus)	A cavity within a bone	Frontal sinus of the frontal bone (fig. 7.27)
spine (spīn)	A thornlike projection	Spine of the scapula (fig. 7.43)
suture (soo'cher)	An interlocking line of union between bones	Lambdoidal suture between the occipital and parietal bones (fig. 7.21)
trochanter (tro-kan'ter)	A relatively large process	Greater trochanter of the femur (fig. 7.53)
tubercle (tu'ber-kl)	A small, knoblike process	Tubercle of a rib (fig. 7.41)
tuberosity (tu"bě-ros'í-te)	A knoblike process usually larger than a tubercle	Radial tuberosity of the radius (fig. 7.46)

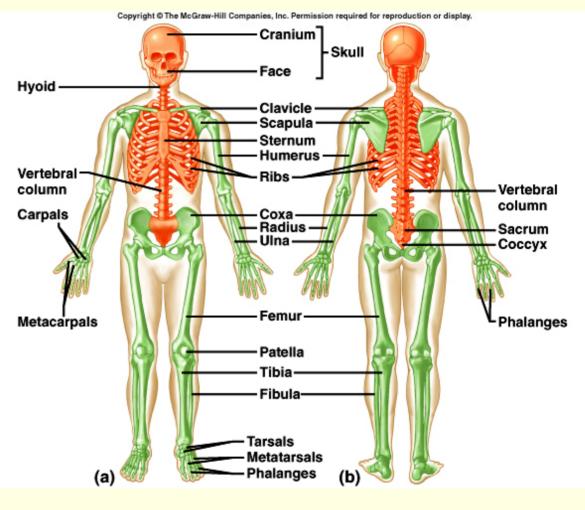
Skeletal Organization

Axial Skeleton

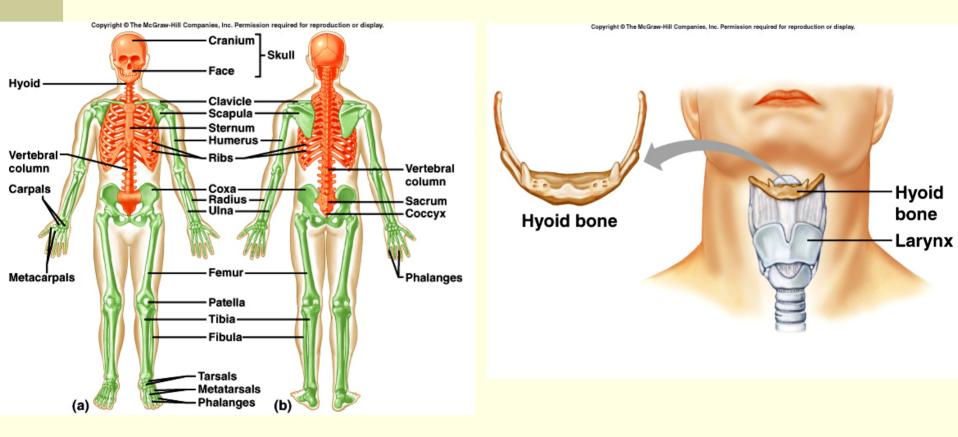
- head
- neck
- trunk

Appendicular Skeleton

- upper limbs
- lower limbs
- pectoral girdle
- pelvic girdle



Skeletal Organization



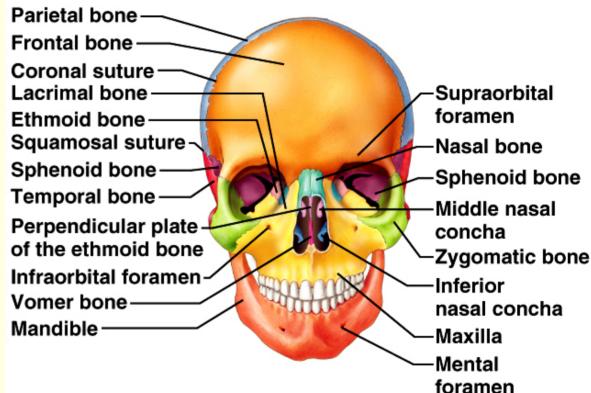
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TABLE 7.5	Cranial Bones	
Name and Numb	per Description	Special Features
Frontal (1)	Forms forehead, roof of nasal c of orbits	avity, and roofs Supraorbital foramen, frontal sinuses
Parietal (2)	Form side walls and roof of crar	ium Fused at midline along sagittal suture
Occipital (1)	Forms back of skull and base of	f cranium Foramen magnum, occipital condyles
Temporal (2)	Form side walls and floor of cra	nium External acoustic meatus, mandibular fossa, mastoid process, styloid process, zygomatic process
Sphenoid (1)	Forms parts of base of cranium and floors and sides of orbits	, sides of skull, Sella turcica, sphenoidal sinuses
Ethmoid (1)	Forms parts of roof and walls of floor of cranium, and walls of or	

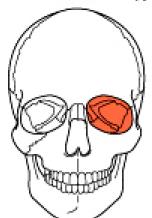
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Frontal (1)

- forehead
- roof of nasal cavity
- roofs of orbits
- frontal sinuses
- supraorbital foramen
- coronal suture



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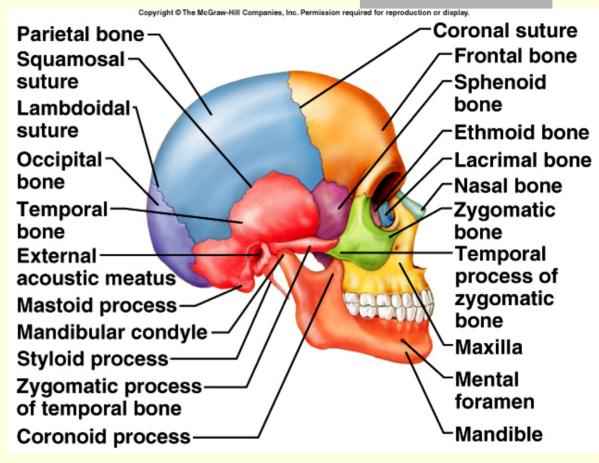


- Supraorbitalnotch
- Optic canal –
- Nasal bone
- Ethmoid bone
- Lacrimal bone –
- Maxilla-
- Infraorbitalforamen

- -Frontal bone
- Superior orbital fissure
 - -Sphenoid bone -Palatine bone -Inferior orbital fissure
 - Zygomatic bone

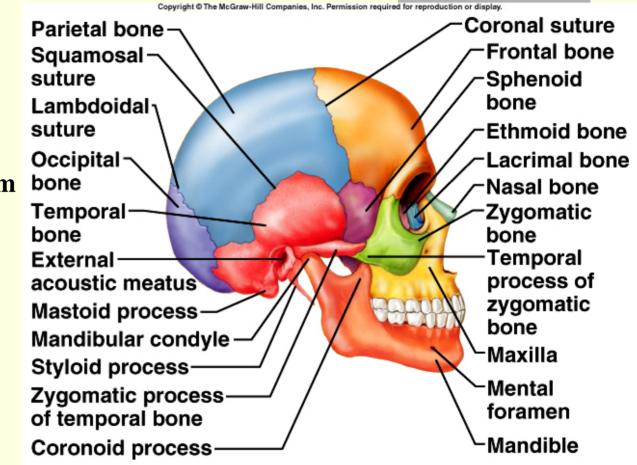
Temporal (2)

- wall of cranium
- floor of cranium
- floors and sides of orbits
- squamosal suture
- external acoustic meatus
- mandibular fossa
- mastoid process
- styloid process
- zygomatic process



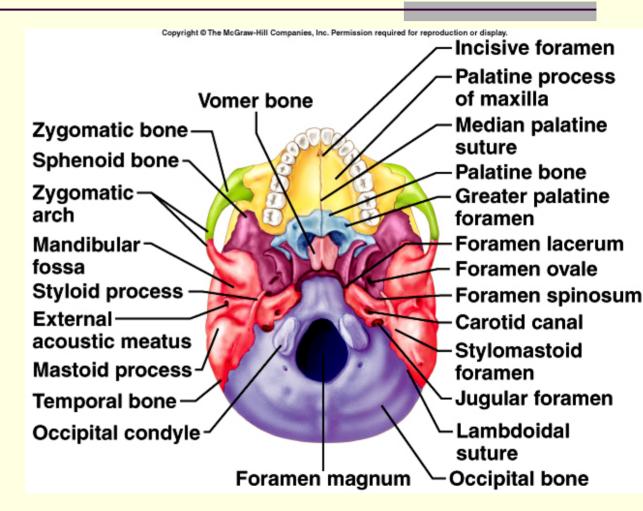
Parietal (2)

- side walls of cranium
- roof of cranium
- sagittal suture

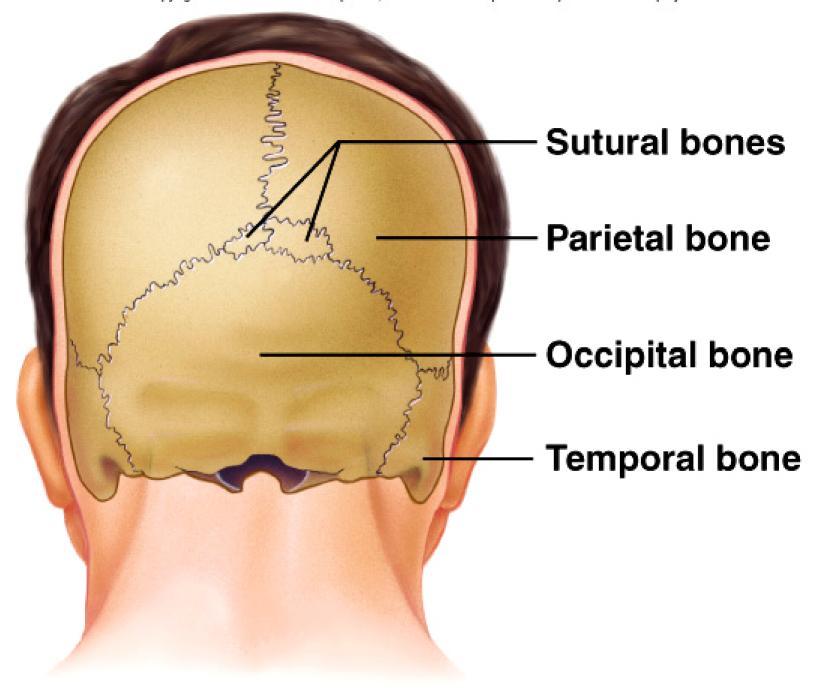


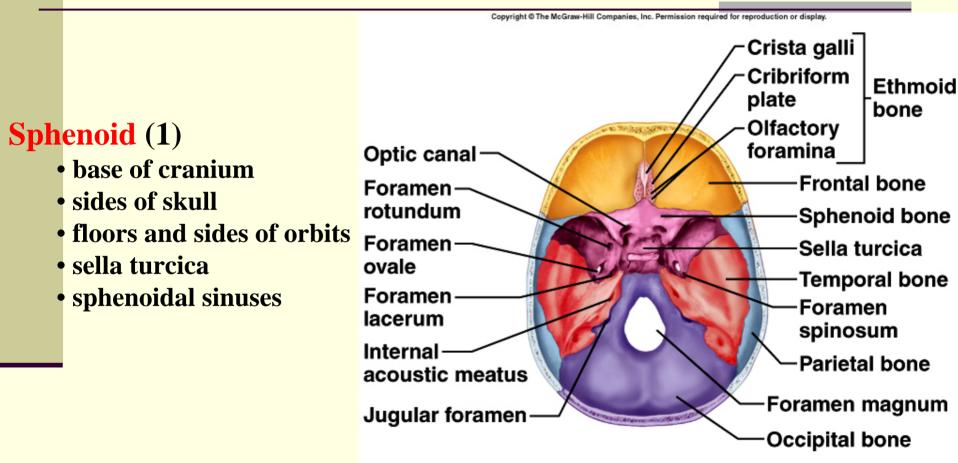
Occipital (1)

- back of skull
- base of cranium
- foramen magnum
- occipital condyles
- lambdoidal suture

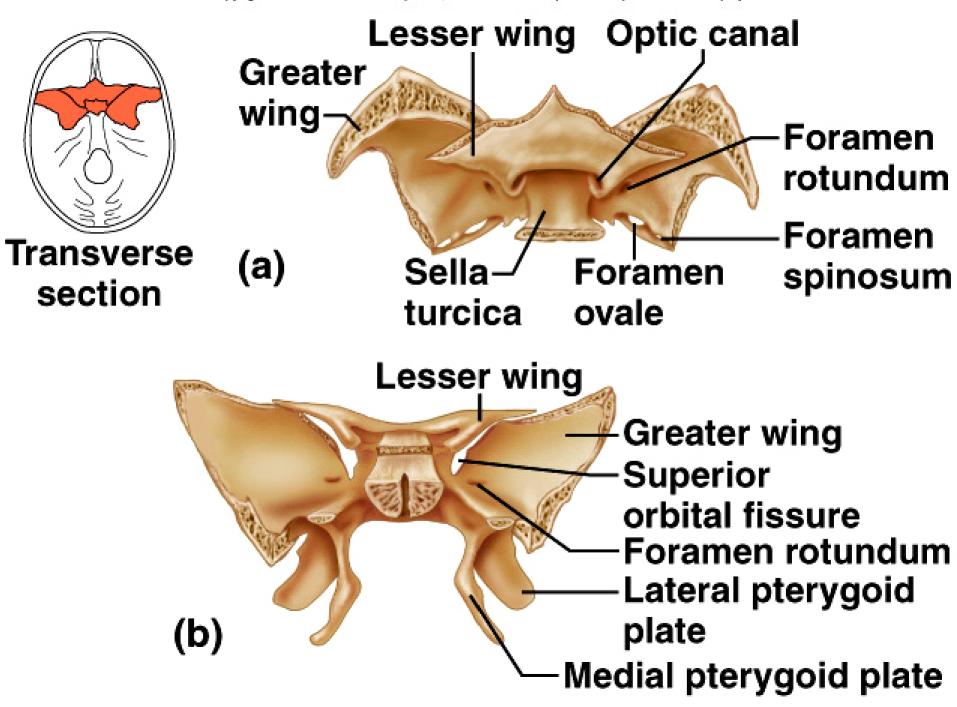


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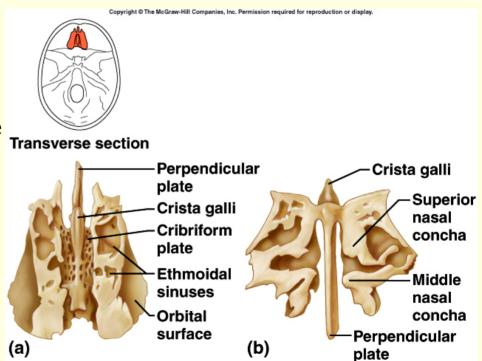


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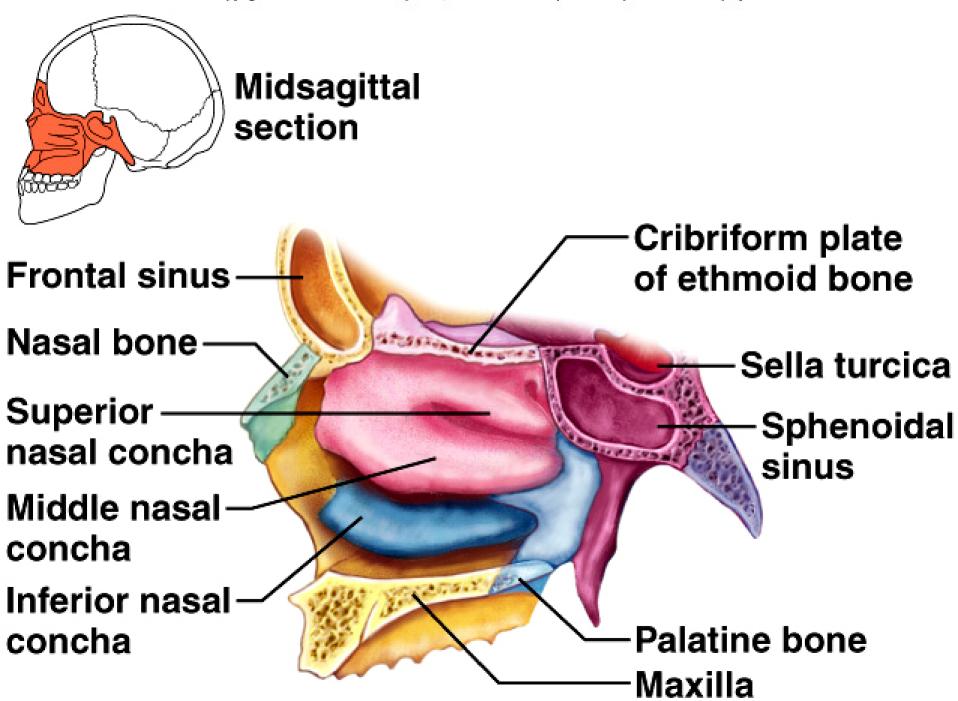


Ethmoid (1)

- roof and walls of nasal cavity
- floor of cranium
- wall of orbits
- cribiform plates
- perpendicular plate
- superior and middle nasal conchae
- ethmoidal sinuses
- crista gallis



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Maxillary (2)

- upper jaw
- anterior roof of mouth
- floors of orbits
- sides of nasal cavity
- floors of nasal cavity
- alveolar processes
- maxillary sinuses
- palatine process

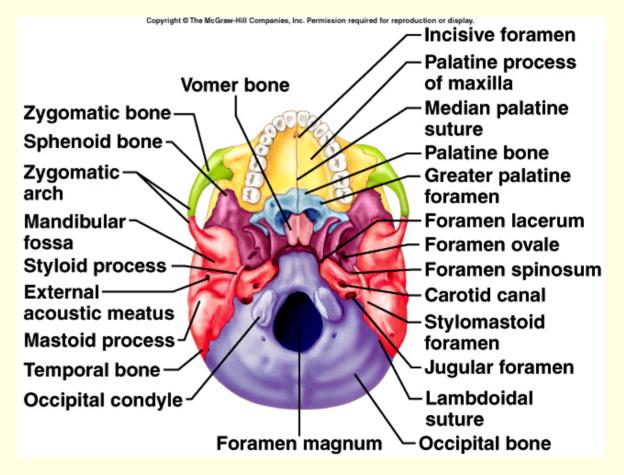
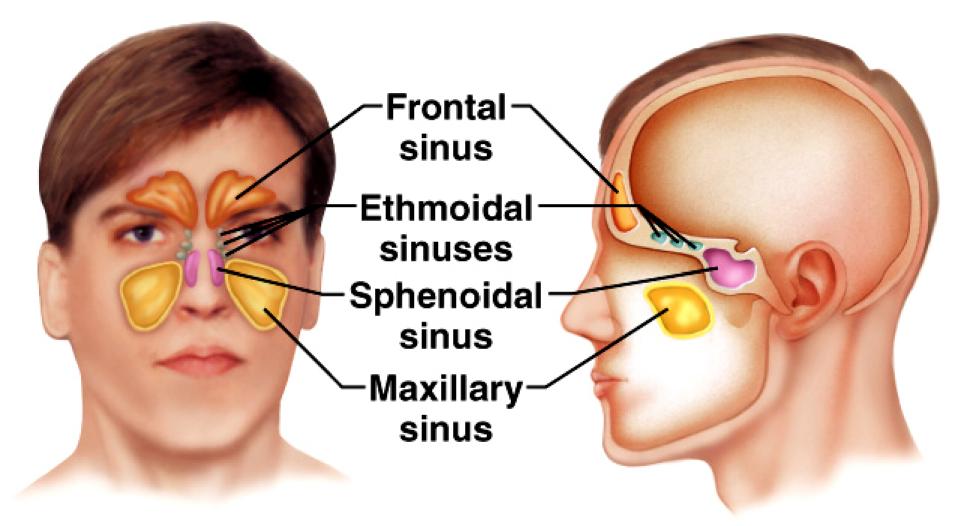


TABLE 7.6

Sinuses of the Cranial and Facial Bones

Sinuses	Number	Location
Frontal sinuses	2	Frontal bone above each eye and near the midline
Sphenoidal sinuses	2	Sphenoid bone above the posterior portion of the nasal cavity
Ethmoidal sinuses	2 groups of small spaces	Ethmoid bone on either side of the upper portion of the nasal cavity
Maxillary sinuses	2	Maxillary bones lateral to the nasal cavity and extending from the floor of the orbits to the roots of the upper teeth

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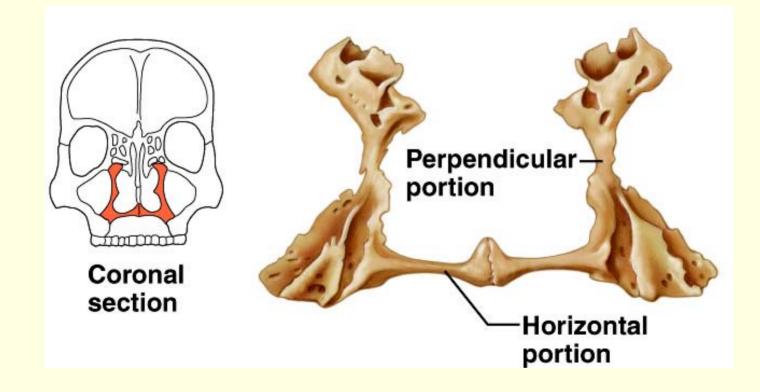
Bones of the Facial Skeleton

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TABLE 7.7 Bones of the Facial Skeleton					
Name and Num	ber	Description	Special Features		
Maxillary (2)		Form upper jaw, anterior roof of mouth, floors of orbits, and sides and floor of nasal cavity	Alveolar processes, maxillary sinuses, palatine process		
Palatine (2)		Form posterior roof of mouth, and floor and lateral walls of nasal cavity			
Zygomatic (2)		Form prominences of cheeks, and lateral walls and floors of orbits	Temporal process		
Lacrimal (2)		Form part of medial walls of orbits	Groove that leads from orbit to nasal cavity		
Nasal (2)		Form bridge of nose			
Vomer (1)		Forms inferior portion of nasal septum			
Inferior nasal conch	nae (2)	Extend into nasal cavity from its lateral walls			
Mandible (1)		Forms lower jaw	Body, ramus, mandibular condyle, coronoid process, alveolar process, mandibular foramen, mental foramen		

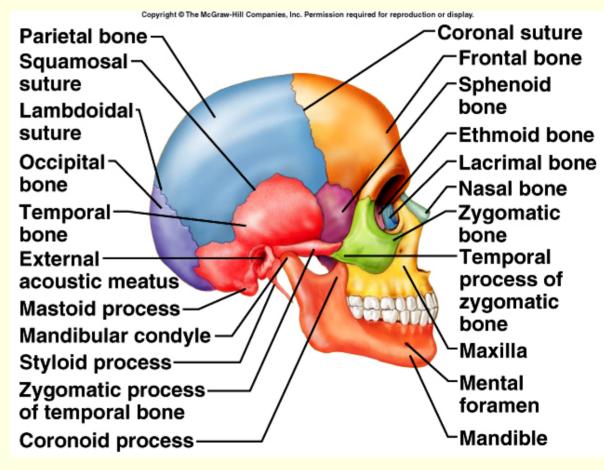
Palatine (2)

- posterior roof of mouth
- floor of nasal cavity
- lateral walls of nasal cavity



Zygomatic (2)

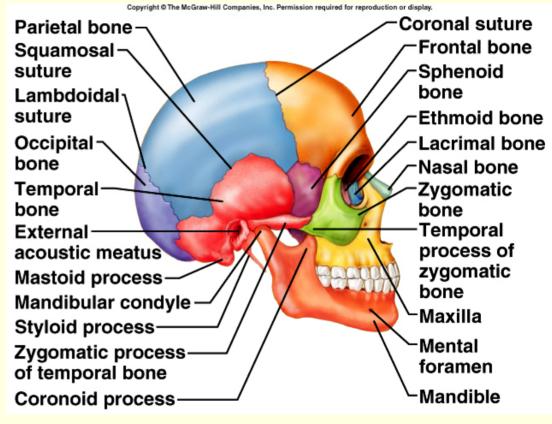
- prominences of cheeks
- lateral walls of orbits
- floors of orbits
- temporal process

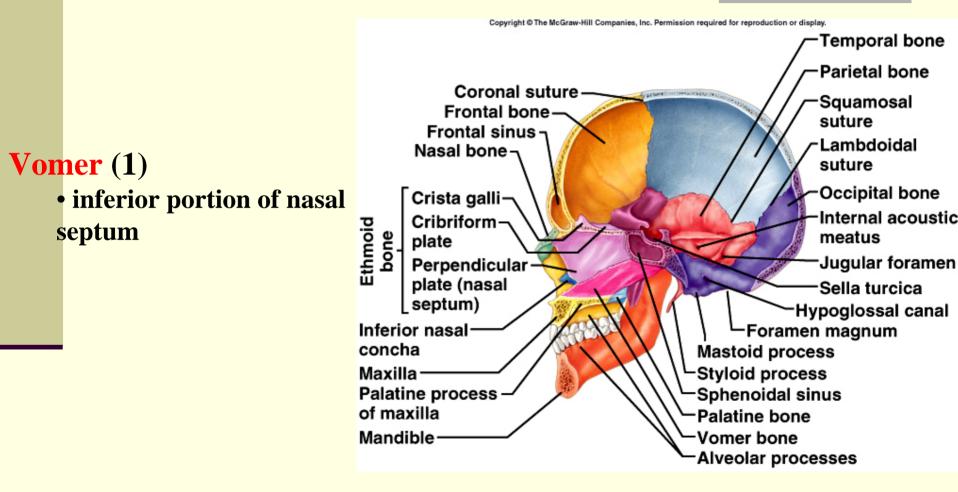


Lacrimal (2)

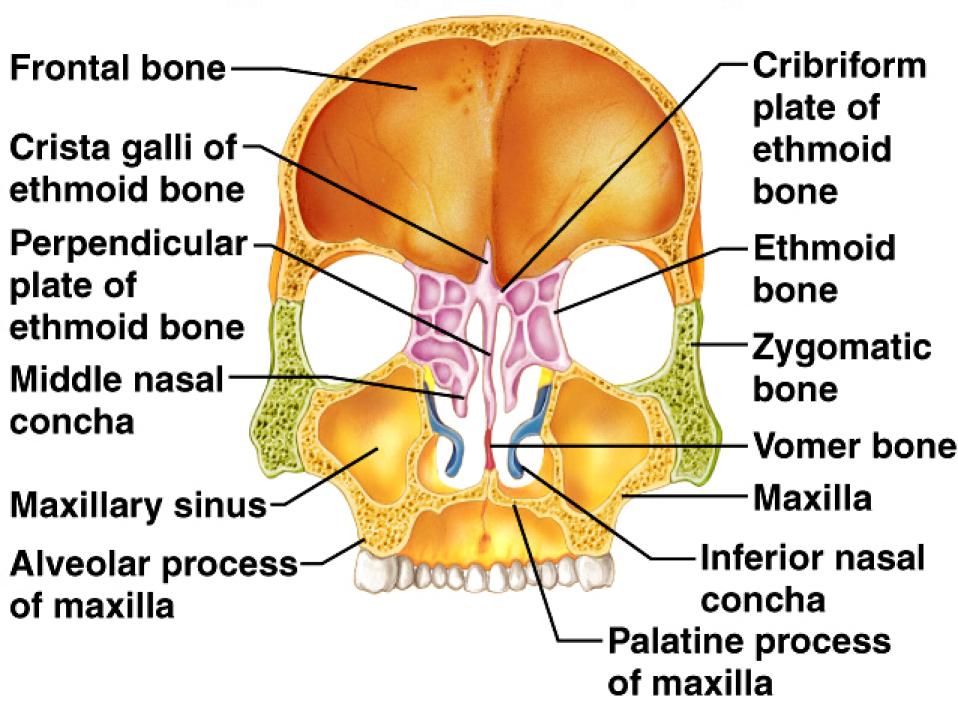
- medial walls of orbits
- groove from orbit to nasal cavity

Nasal (2) • bridge of nose



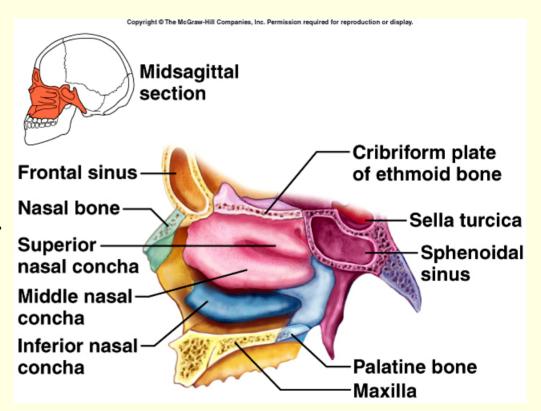


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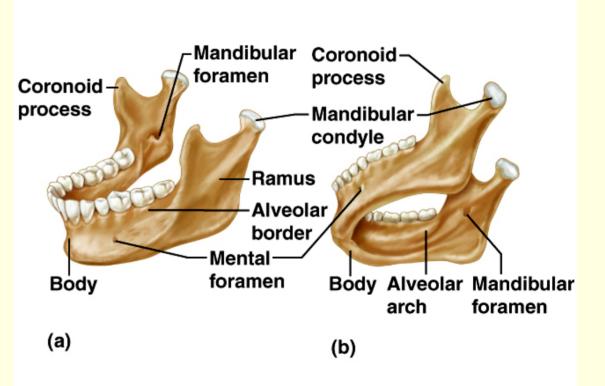
Inferior Nasal Conchae (2)

• extend from lateral walls of nasal cavity



Mandible (1)

- lower jaw
- body
- ramus
- mandibular condyle
- coronoid process
- alveolar process
- mandibular foramen
- mental foramen



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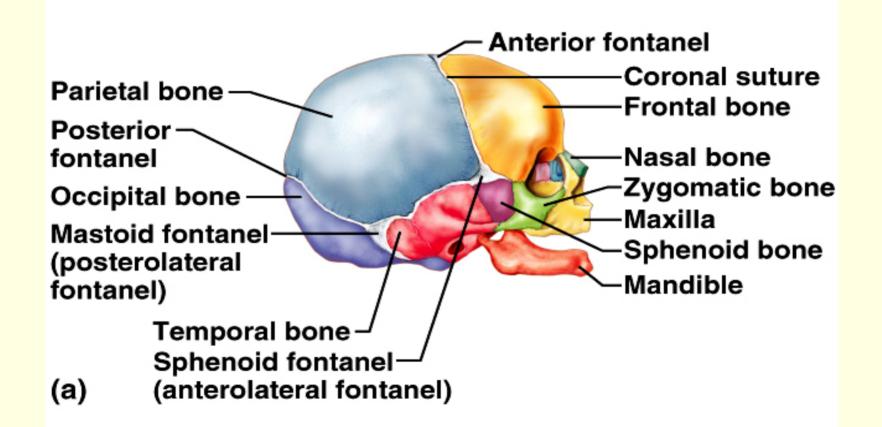
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TABLE 7.8 Passageways Through Bones of the Skull				
Passageway	Location	Major Stuctures Transmitted		
Carotid canal (fig. 7.22)	Inferior surface of the temporal bone	Internal carotid artery, veins, and nerves		
Foramen lacerum (fig. 7.22)	Floor of cranial cavity between temporal and sphenoid bones	Branch of pharyngeal artery (in life, opening is largely covered by fibrocartilage)		
Foramen magnum (fig. 7.26)	Base of skull in occipital bone	Nerve fibers passing between the brain and spinal cord as it exits from the base of the brain, also certain arteries		
Foramen ovale (fig. 7.22)	Floor of cranial cavity in sphenoid bone	Mandibular division of trigeminal nerve and veins		
Foramen rotundum (fig. 7.26)	Floor of cranial cavity in sphenoid bone	Maxillary division of trigeminal nerve		
Foramen spinosum (fig. 7.26)	Floor of cranial cavity in sphenoid bone	Middle meningeal blood vessels and branch of mandibular nerve		
Greater palatine foramen (fig. 7.22)	Posterior portion of hard palate in palatine bone	Palatine blood vessels and nerves		
Hypoglossal canal (fig. 7.29)	Near margin of foramen magnum in occipital bone	Hypoglossal nerve		
Incisive foramen (fig. 7.22)	Incisive fossa in anterior portion of hard palate	Nasopalatine nerves, openings of vomeronasal organ		
Inferior orbital fissure (fig. 7.20)	Floor of the orbit	Maxillary nerve and blood vessels		
Infraorbital foramen (fig. 7.20)	Below the orbit in maxillary bone	Infraorbital blood vessels and nerves		
Internal acoustic meatus (fig. 7.26)	Floor of cranial cavity in temporal bone	Branches of facial and vestibulocochlear nerves, and blood vessels		
Jugular foramen (fig. 7.26)	Base of the skull between temporal and occipital bones	Glossopharyngeal, vagus and accessory nerves, and blood vessels		
Mandibular foramen (fig. 7.31)	Inner surface of ramus of mandible	Inferior alveolar blood vessels and nerves		
Mental foramen (fig. 7.31)	Near point of jaw in mandible	Mental nerve and blood vessels		
Optic canal (fig. 7.20)	Posterior portion of orbit in sphenoid bone	Optic nerve and ophthalmic artery		
Stylomastoid foramen (fig. 7.22)	Between styloid and mastoid processes	Facial nerve and blood vessels		
Superior orbital fissure (fig. 7.20)	Lateral wall of orbit	Oculomotor, trochlear, and abducens nerves, and ophthalmic division of trigeminal nerve		
Supraorbital foramen (fig. 7.19)	Upper margin or orbit in frontal bone	Supraorbital blood vessels and nerves		

Infantile Skull

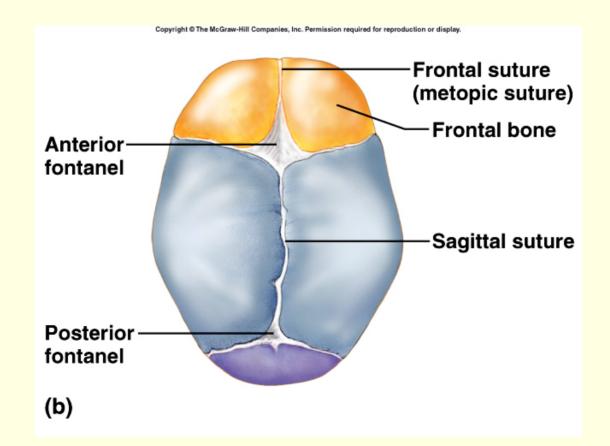
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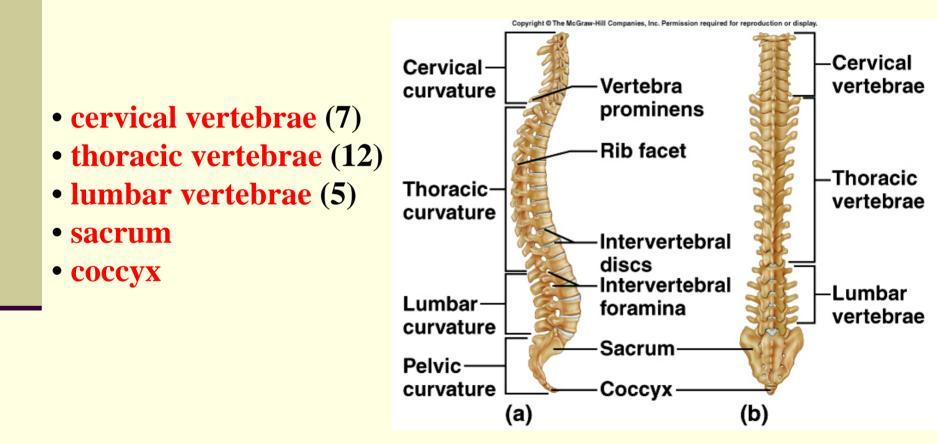


Infantile Skull

Fontanels – fibrous membranes

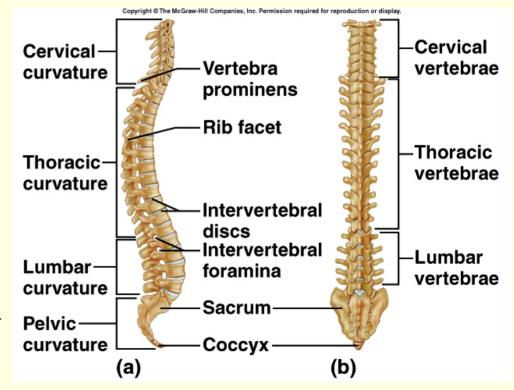


Vertebral Column: Parts



Vertebral Column: Features

- cervical curvature
- thoracic curvature
- lumbar curvature
- pelvic curvature
- rib facets
- vertebra prominens
- intervertebral discs
- intervertebral foramina



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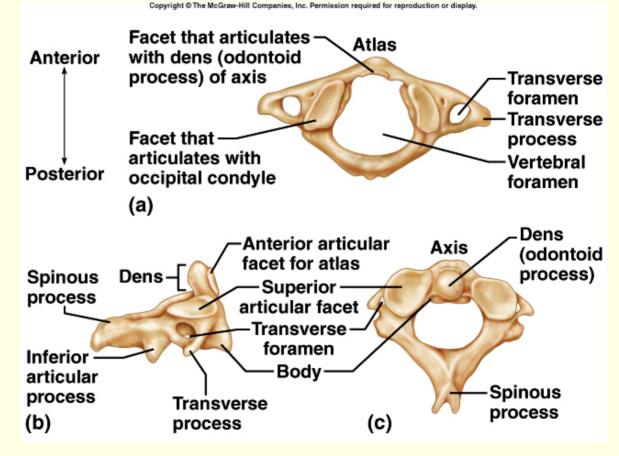
TABLE 7.9	Bones of the Vertebral Column				
Bones	Number	Special Features	Bones	Number	Special Features
Cervical vertebrae	7	Transverse foramina; facets of atlas articulate with occipital condyles of skull; dens of axis articulates with atlas; spinous processes of second through sixth vertebrae are bifid	Lumbar vertebrae	5	Large bodies; transverse processes that project posteriorly at sharp angles; short, thick spinous processes directed nearly horizontally
Thoracic vertebrae	12	Pointed spinous processes that slope downward; facets that articulate with ribs	Sacrum	5 vertebrae fused into 1 bone	Dorsal sacral foramina, auricular surfaces, sacral promontory, sacral canal, sacral hiatus, anterior sacral foramina
			Соссух	4 vertebrae fused into 1 bone	Attached by ligaments to the margins of the sacral hiatus

Cervical Vertebrae

- Atlas 1st; supports head
- Axis 2nd; dens pivots to turn head
- transverse foramina
- bifid spinous processes
- vertebral prominens useful landmark

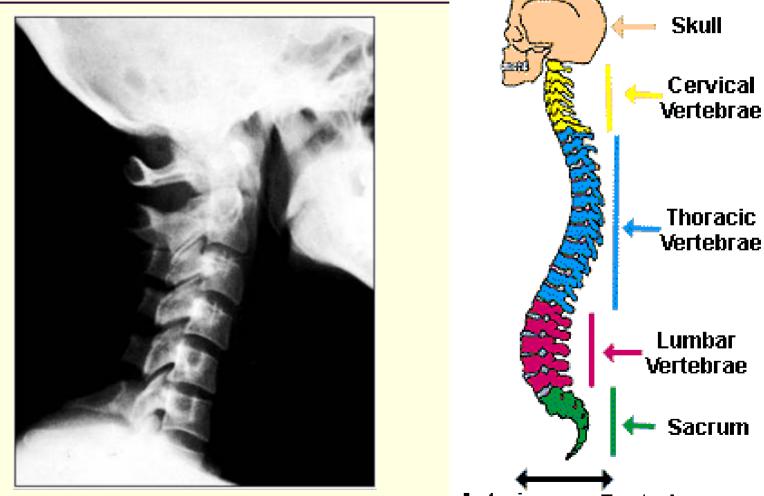


In Greek Mythology, the Titan, Atlas, was punished by Zeus to stand at the edge of the world & hold up the heavens on his shoulders.

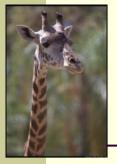


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Bones of the Vertebral Column				
Number	Special Features	Bones	Number	Special Features
7	Transverse foramina; facets of atlas articulate with occipital condyles of skull; dens of axis articulates with atlas; spinous processes of second through sixth vertebrae are bifid	Lumbar vertebrae	5	Large bodies; transverse processes that project posteriorly at sharp angles; short, thick spinous processes directed nearly horizontally
12	Pointed spinous processes that slope downward; facets that articulate with ribs	Sacrum	5 vertebrae fused into 1 bone	Dorsal sacral foramina, auricular surfaces, sacral promontory, sacral canal, sacral hiatus, anterior sacral foramina
		Соссух	4 vertebrae fused into 1 bone	Attached by ligaments to the margins of the sacral hiatus
	Bones of t Number 7	Bones of the Vertebral Column Number Special Features 7 Transverse foramina; facets of atlas articulate with occipital condyles of skull; dens of axis articulates with atlas; spinous processes of second through sixth vertebrae are bifid 12 Pointed spinous processes that slope downward; facets that articulate	Bones of the Vertebral Column Number Special Features Bones 7 Transverse foramina; facets of atlas articulate with occipital condyles of skull; dens of axis articulates with atlas; spinous processes of second through sixth vertebrae are bifid Lumbar vertebrae 12 Pointed spinous processes that articulate with ribs Sacrum	NumberSpecial FeaturesBonesNumber7Transverse foramina; facets of atlas articulate with occipital condyles of skull; dens of axis articulates with atlas; spinous processes of second through sixth vertebrae are bifidLumbar vertebrae512Pointed spinous processes that slope downward; facets that articulate with ribsSacrum5 vertebrae fused into 1 bone12Coccyx4 vertebrae fused into

Human Vertebral Column



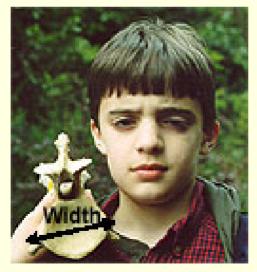
Anterior Posterior

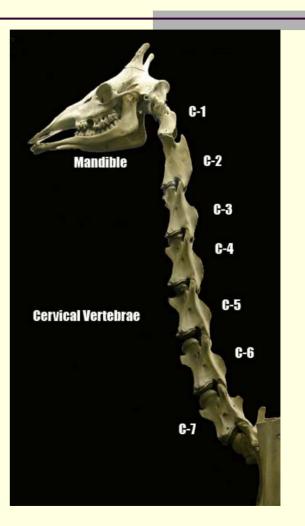


Comparison of Cervical Vertebrate of in Humans with Giraffes

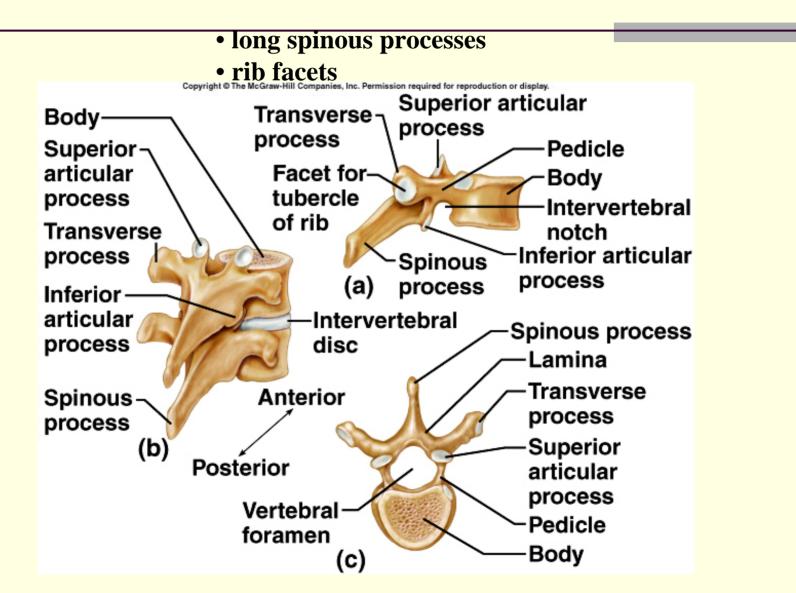
- The giraffe neck has the same number of cervical vertebrae as a human 7.
- Each vertebrae is approximately 11 inches long.





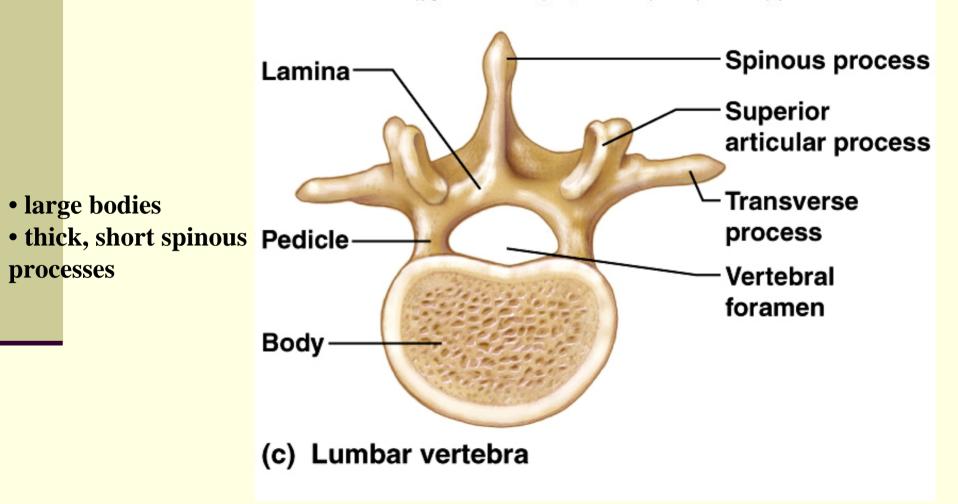


Thoracic Vertebrae



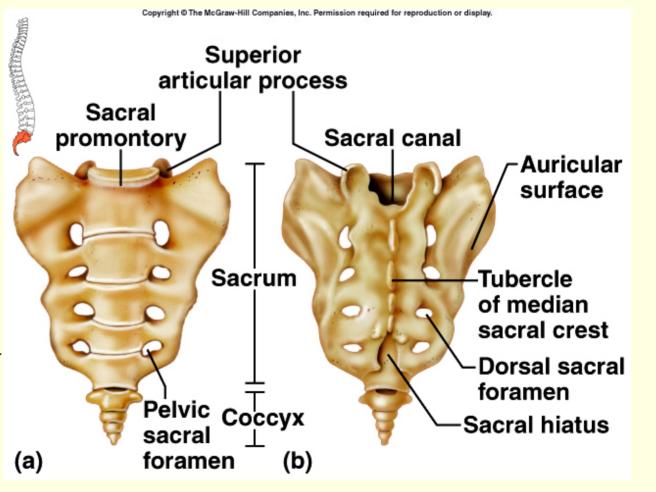
Lumbar Vertebrae

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Sacrum

- five fused vertebrae
- median sacral crest
- dorsal sacral foramina
- posterior wall of pelvic cavity
- sacral promontory



Coccyx



four fused vertebrae

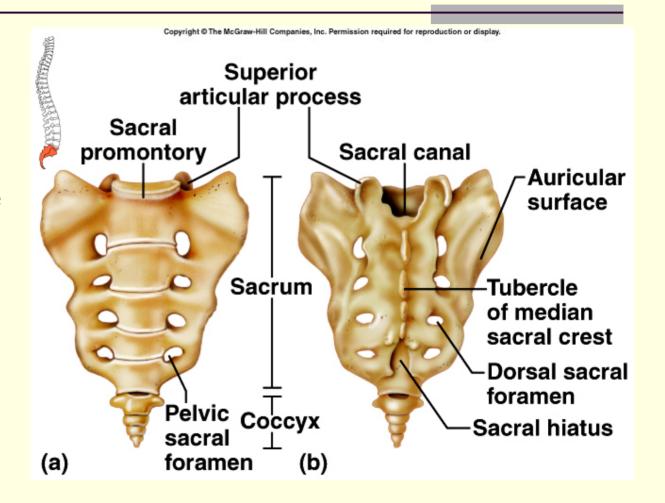


TABLE 7.10 Bolles of the rectoral Girdle and Opper Linibs			
Name and Number	Location	Special Features	
Clavicle (2)	Base of neck between sternum and scapula	Sternal end, acromial end	
Scapula (2)	Upper back, forming part of shoulder	Body, spine, head, acromion process, coracoid process, glenoid cavity	
Humerus (2)	Arm, between scapula and elbow	Head, greater tubercle, lesser tubercle, intertubercular groove, surgical neck, deltoid tuberosity, capitulum, trochlea, medial epicondyle, lateral epicondyle, coronoid fossa, olecranon fossa	
Radius (2)	Lateral side of forearm, between elbow and wrist	Head, radial tuberosity, styloid process, ulnar notch	
Ulna (2)	Medial side of forearm, between elbow and wrist	Trochlear notch, olecranon process, head, styloid process, radial notch	
Carpal (16)	Wrist	Arranged in two rows of four bones each	
Metacarpal (10)	Palm	One in line with each finger and thumb	
Phalanx (28)	Finger	Three in each finger; two in each thumb	

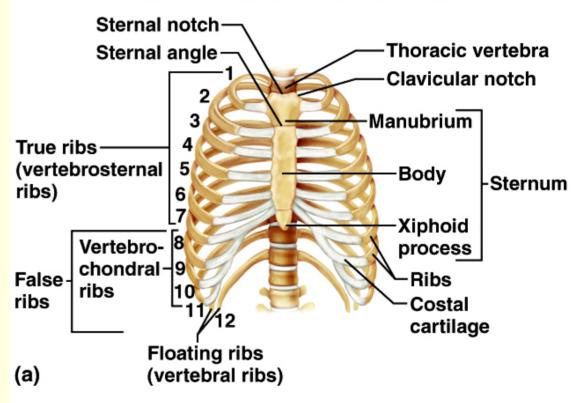
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Bones of the Pectoral Girdle and Upper Limbs

TA

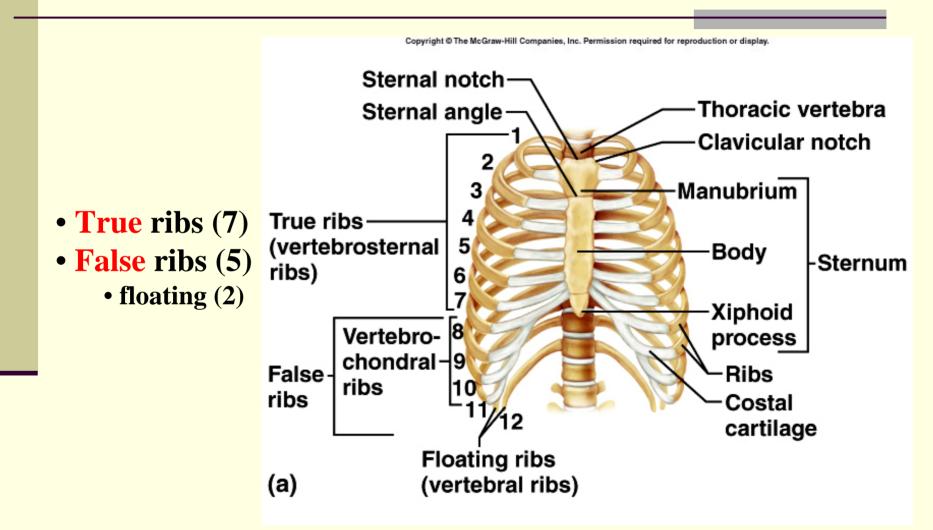
Thoracic Cage

- Ribs
- Sternum
- Thoracic vertebrae
- Costal cartilages
- Supports shoulder girdle
- Protects viscera
- **R**ole in breathing



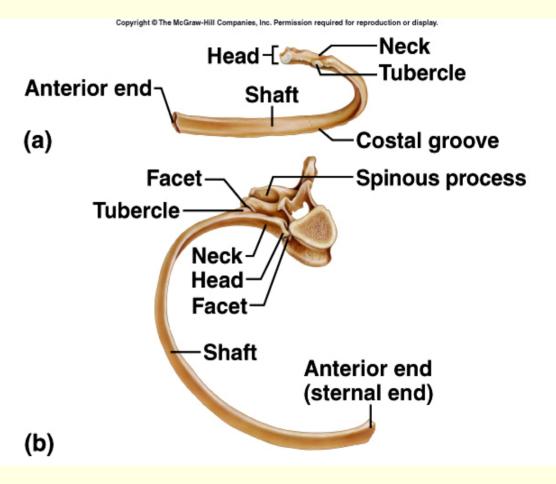
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Ribs

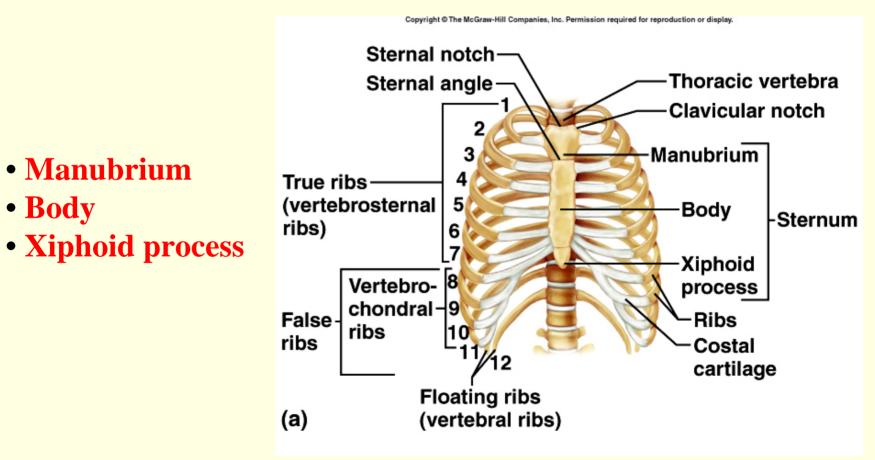


Rib Structure

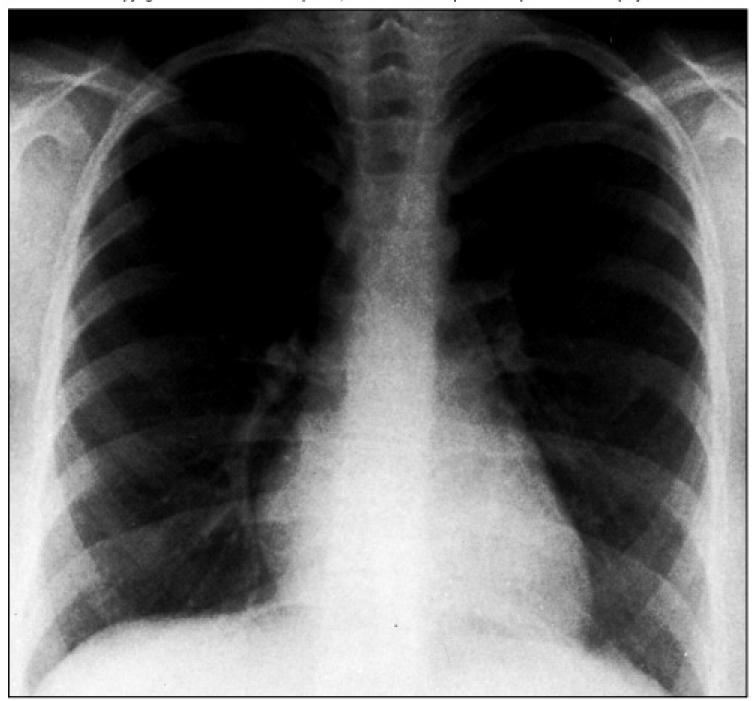
- Shaft
- **Head** posterior end; articulates with vertebrae
- **Tubercle** articulates with vertebrae
- **Costal cartilage** hyaline cartilage



Sternum



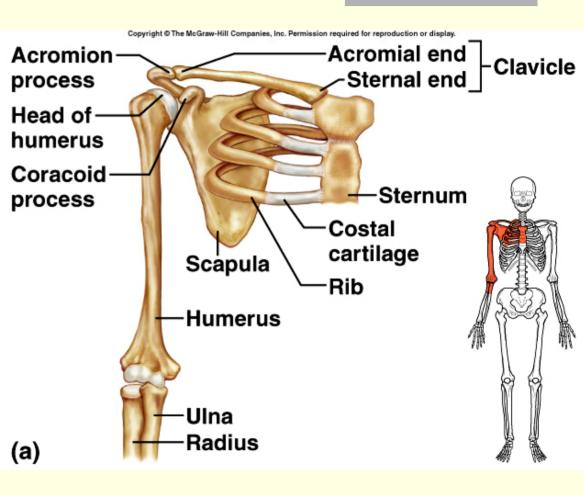
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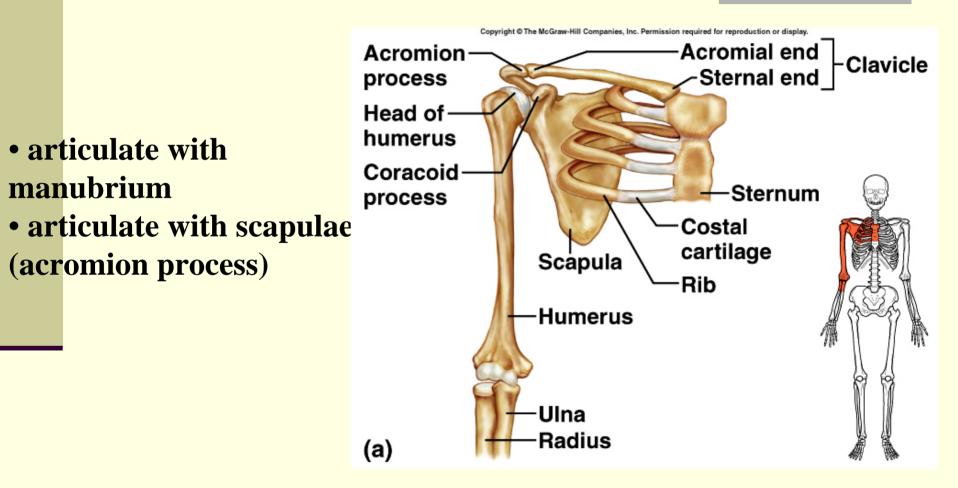
(b)

Pectoral Girdle

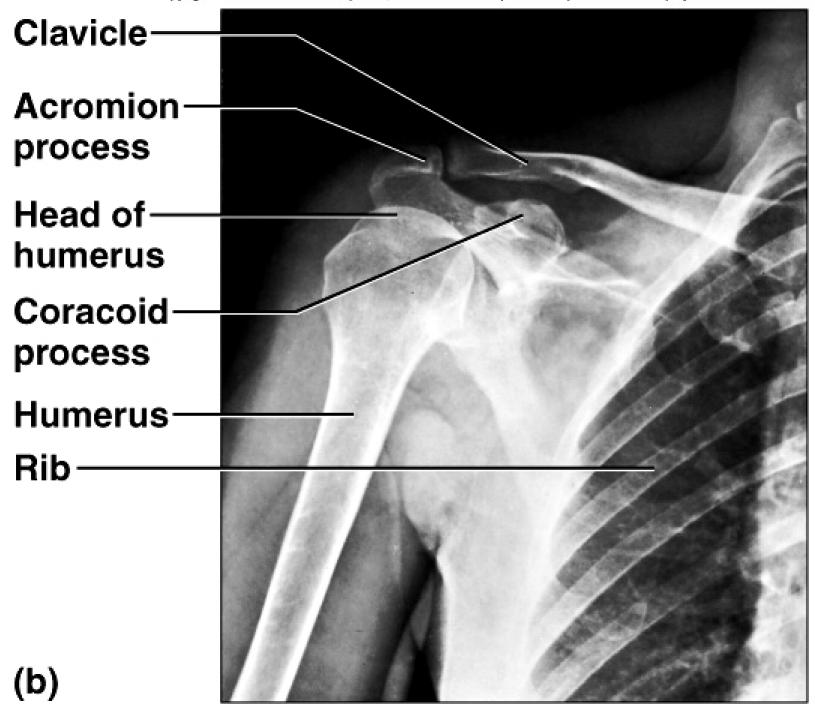
- shoulder girdle
- clavicles
- scapulae
- supports upper limbs



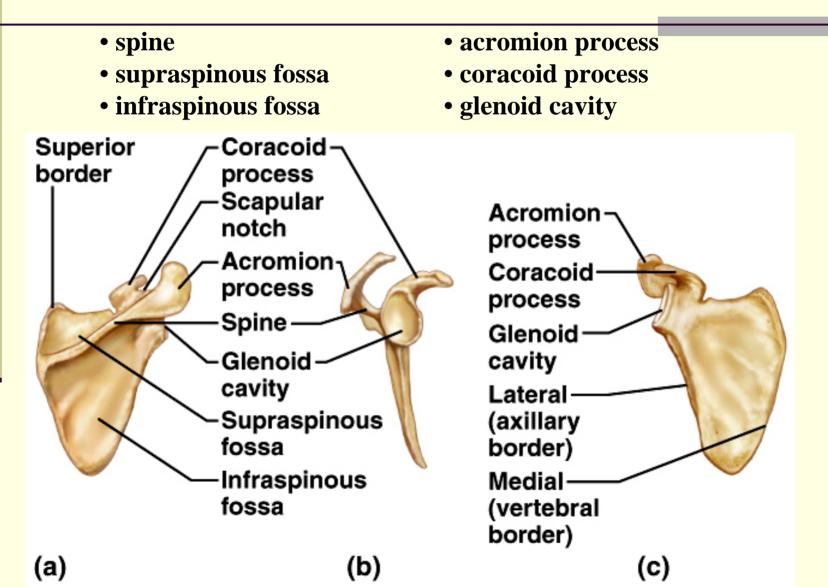
Clavicles



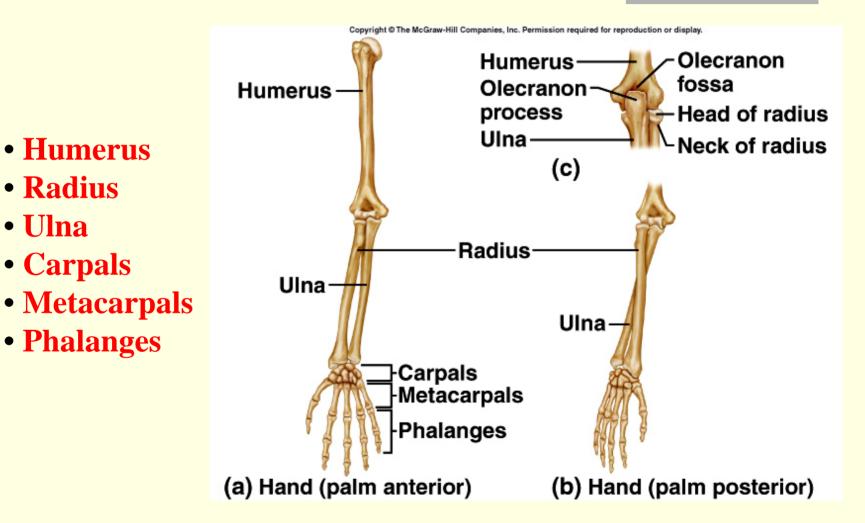
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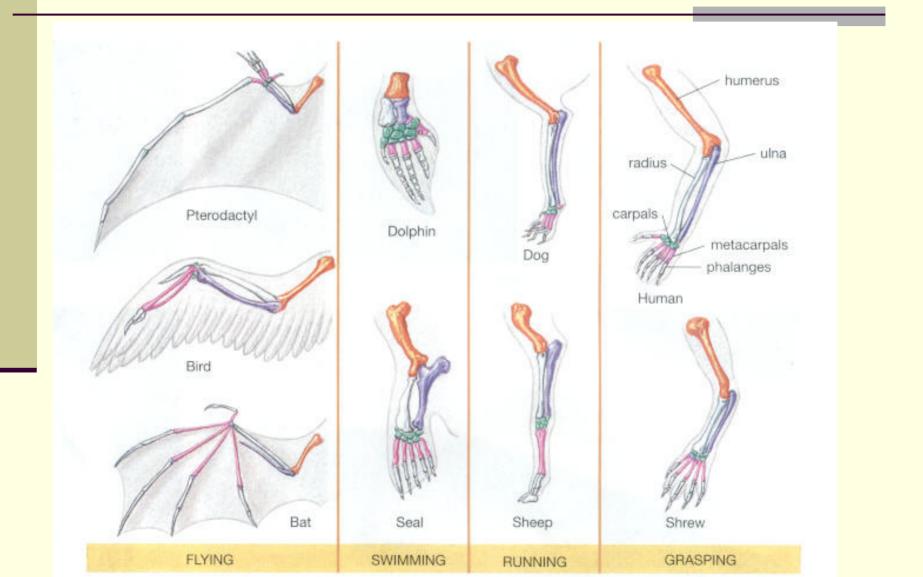
Scapulae



Upper Limb



Homologous Anatomical Structures



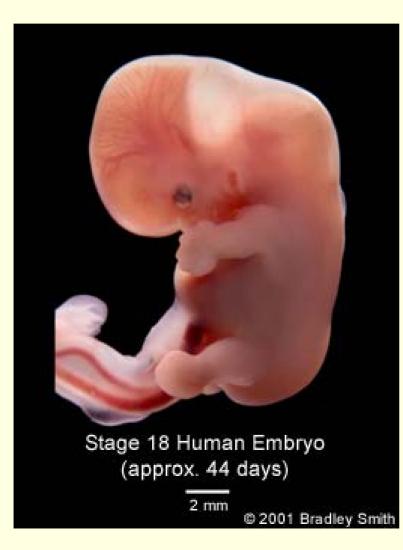
Limb buds of a young Human Embryo



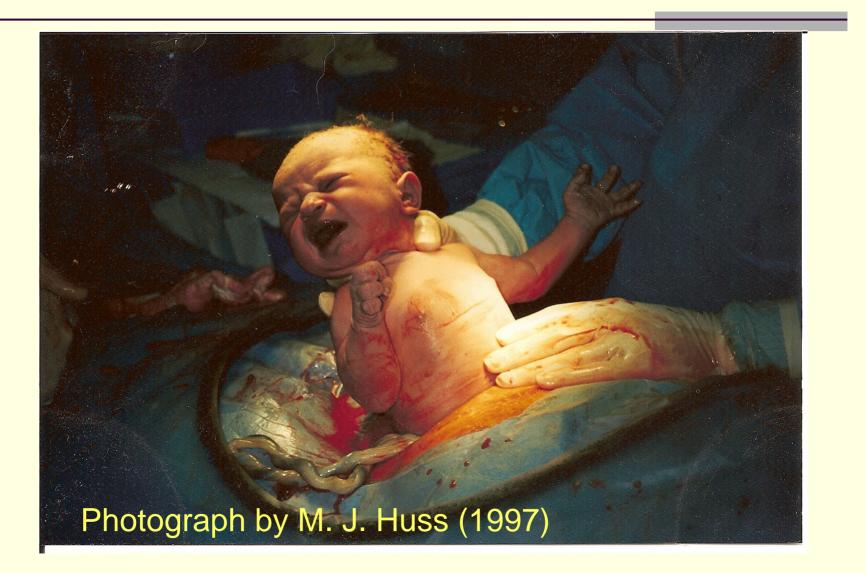


A 28 day old embryo (upper photograph) and a 33 day old embryo (lower photograph) has a head, tail, backbone and limb buds - which will eventually become arms and legs. The beginnings of ears and eyes are also visible. The heart is already beating, and the other organs are forming fast. An umbilical cord starts to grow between the embryo and the placenta.

Forelimbs & Hindlimbs of an Embryo



Most embryos that are 44 postovulatory days old measure 13-17 mm in length. Note evidence of distinct notching in the hand plate of the forelimbs. Full term baby born via Caesarian-Section (note presence of two fully developed forelimbs)



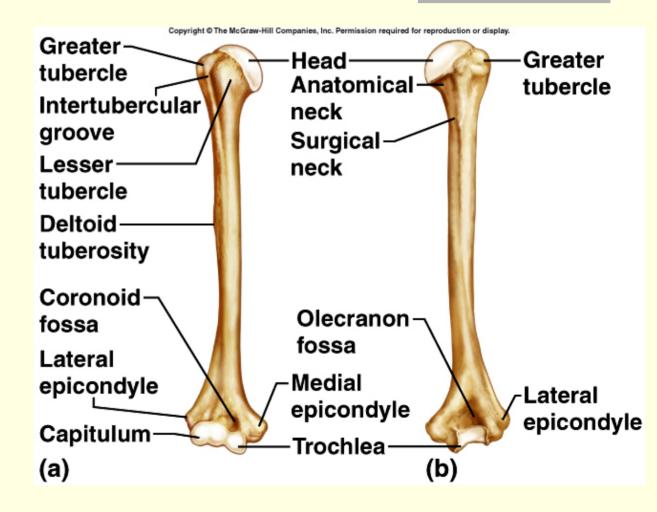
Child born with extra Forelimb



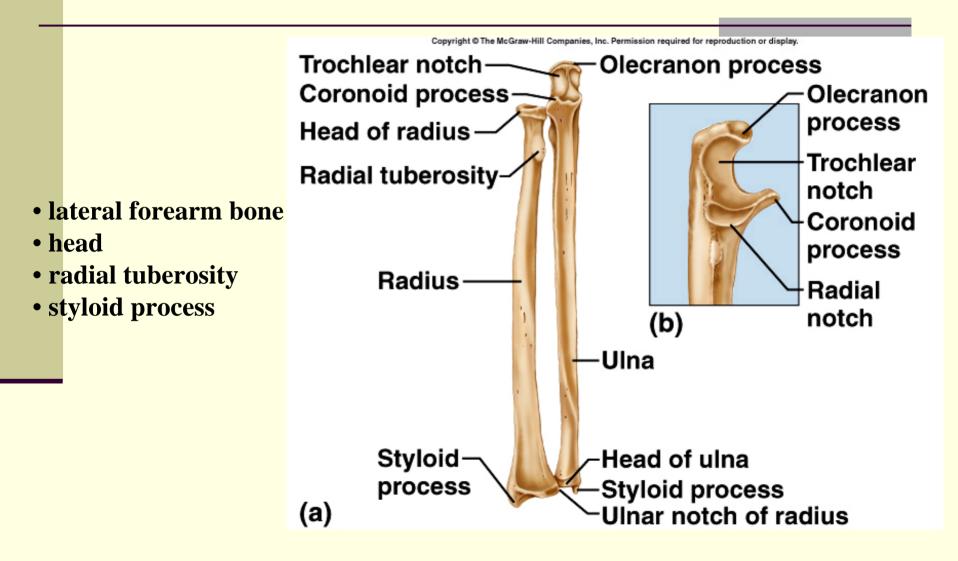
Chinese baby born with three Arms: The child pictured is shown at 2 months of age. The extra appendage was removed surgically) See story available online at http://edition.cnn.com/ 2006/WORLD/asiapcf/ 06/06/third.arm/

Humerus

- head
- greater tubercle
- lesser tubercle
- anatomical neck
- surgical neck
- deltoid tuberosity
- capitulum
- trochlea
- coronoid fossa
- olecranon fossa

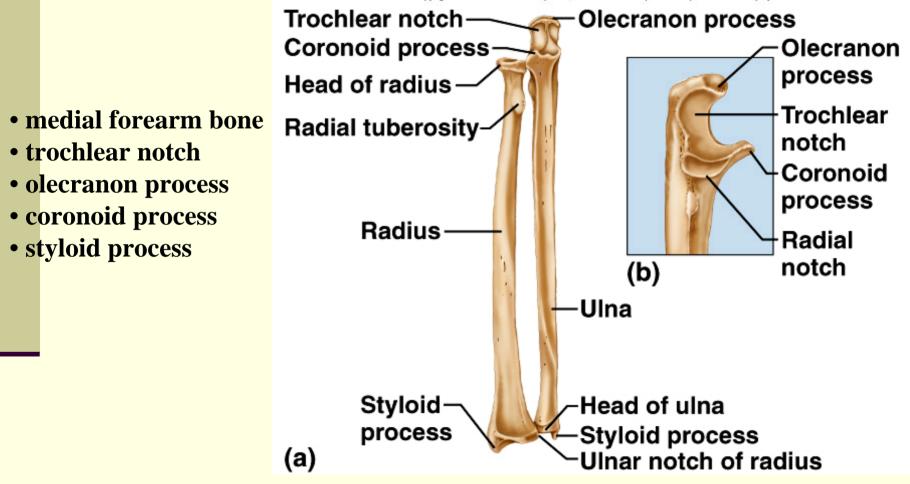


Radius



Ulna

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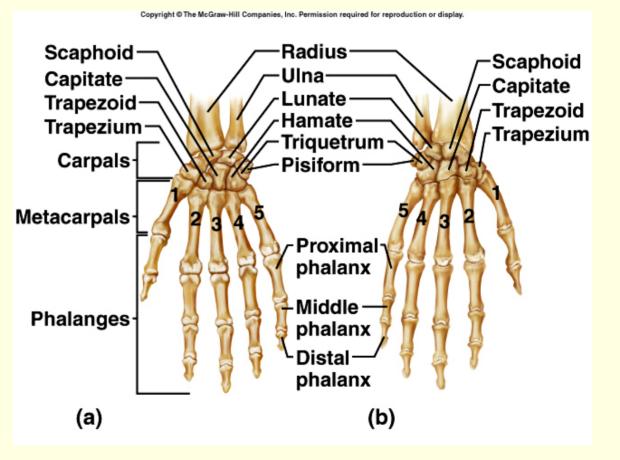
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(d)

Wrist and Hand

- Carpals (16)
 - trapezium
 - trapezoid
 - capitate
 - scaphoid
 - pisiform
 - triquetrum
 - hamate
 - lunate
- Metacarpals (10)
- Phalanges (28)
 - proximal phalanx
 - middle phalanx
 - distal phalanx



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(c)

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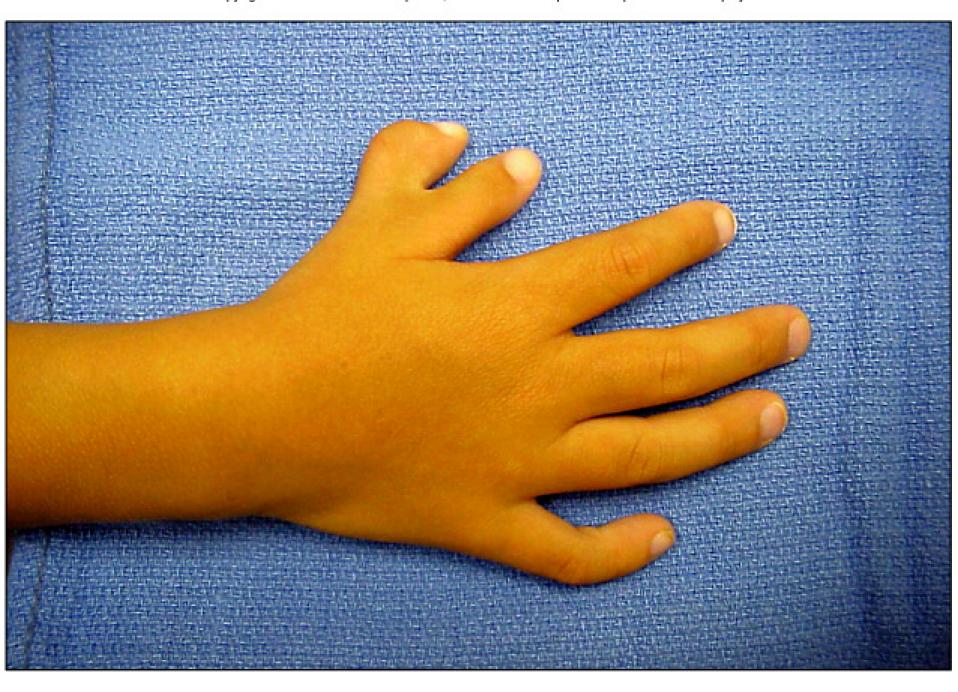


TABLE 7.12 Bones of the Pelvic Girdle and Lower Limbs		
Name and Number	Location	Special Features
Coxa (2)	Hip, articulating with the other coxa anteriorly and with the sacrum posteriorly	llium, iliac crest, anterior superior iliac spine, ischium, ischial tuberosity, ischial spine, obturator foramen, acetabulum, pubis
Femur (2)	Thigh, between hip and knee	Head, fovea capitis, neck, greater trochanter, lesser trochanter, linea aspera, lateral condyle, medial condyle, gluteal tuberosity, intercondylar fossa
Patella (2)	Anterior surface of knee	A flat sesamoid bone located within a tendon
Tibia (2)	Medial side of leg, between knee and ankle	Medial condyle, lateral condyle, tibial tuberosity, anterior crest, medial malleolus, intercondylar eminence
Fibula (2)	Lateral side of leg, between knee and ankle	Head, lateral malleolus
Tarsal (14)	Ankle	Freely movable talus that articulates with leg bones; calcaneus that forms the base of the heel; five other tarsal bones bound firmly together
Metatarsal (10)	Instep	One in line with each toe, arranged and bound by ligaments to form arches
Phalanx (28)	Тое	Three in each toe, two in great toe

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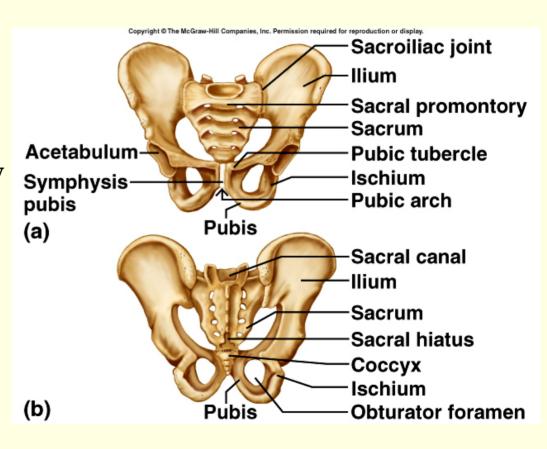
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Pelvic Girdle

- **Coxae** (2)
- supports trunk of body
- protects viscera



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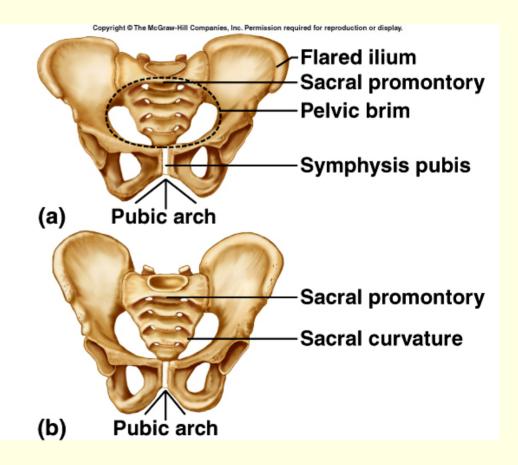
Greater and Lesser Pelvis

Greater Pelvis

- lumbar vertebrae posteriorly
- iliac bones laterally
- abdominal wall anteriorly

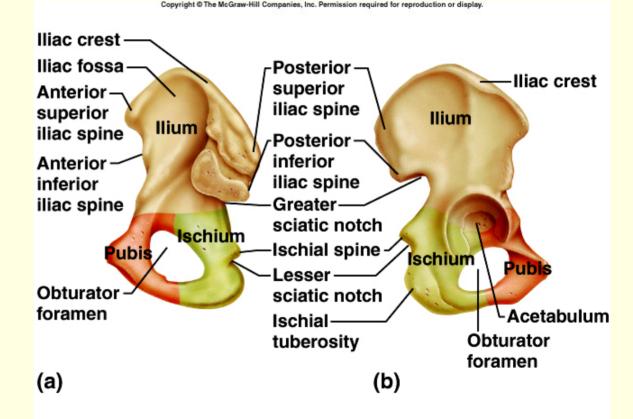
Lesser Pelvis

- sacrum and coccyx posteriorly
- lower ilium, ischium, and pubis bones laterally and anteriorly



Coxae

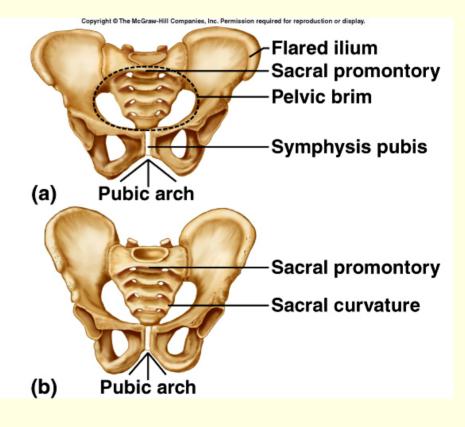
- hip bones
- ilium
 - iliac crest
 - iliac spines
 - greater sciatic notch
- ischium
 - ischial spines
 - lesser sciatic notch
 - ischial tuberosity
- pubis
- -obturator foramen
- acetabulum



Male and Female Pelvis

Female

- iliac bones more flared
- broader hips
- pubic arch angle greater
- more distance between ischial spine and ischial tuberosity
- sacral curvature shorter and flatter
- lighter bones



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TABLE 7.11	Differences Between the Male and Female Skeletons
Part	Differences
Skull	Male skull is larger and heavier, with more conspicuous muscular attachments. Male forehead is shorter, facial area is less round, jaw larger, and mastoid processes and supraorbital ridges more prominent than those of a female.
Pelvis	Male pelvic bones are heavier, thicker, and have more obvious muscular attachments. The obturator foramina and the acetabula are larger and closer together than those of a female.
Pelvic cavity	Male pelvic cavity is narrower in all diameters and is longer, less roomy, and more funnel-shaped. The distances between the ischial tuberosities are less than in a female.
Sacrum	Male sacrum is narrower, sacral promontory projects forward to a greater degree, and sacral curvature is bent less sharply posteriorly than in a female.
Соссух	Male coccyx is less movable than that of a female.

Lower Limb

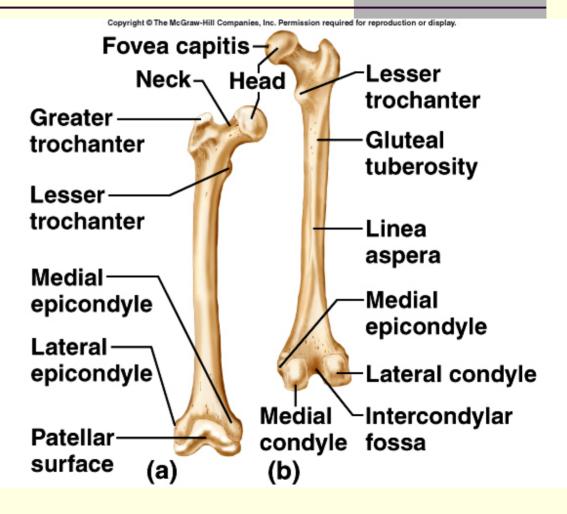
- Femur
- Patella
- Tibia
- Fibula
- Tarsals
- Metatarsals
- Phalanges



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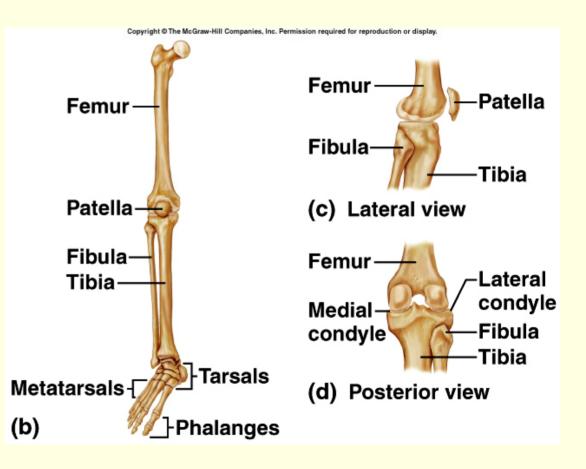
Femur

- longest bone of body
- head
- fovea capitis
- neck
- greater trochanter
- lesser trochanter
- linea aspera
- condyles
- epicondyles

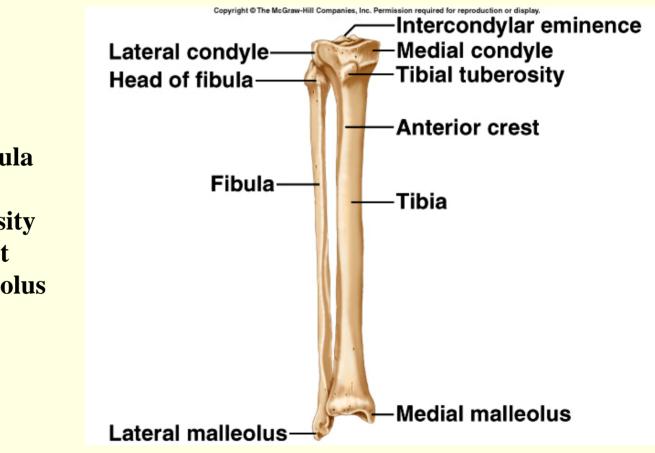


Patella

- kneecap
- anterior surface of knee
- flat sesmoid bone located in a tendon

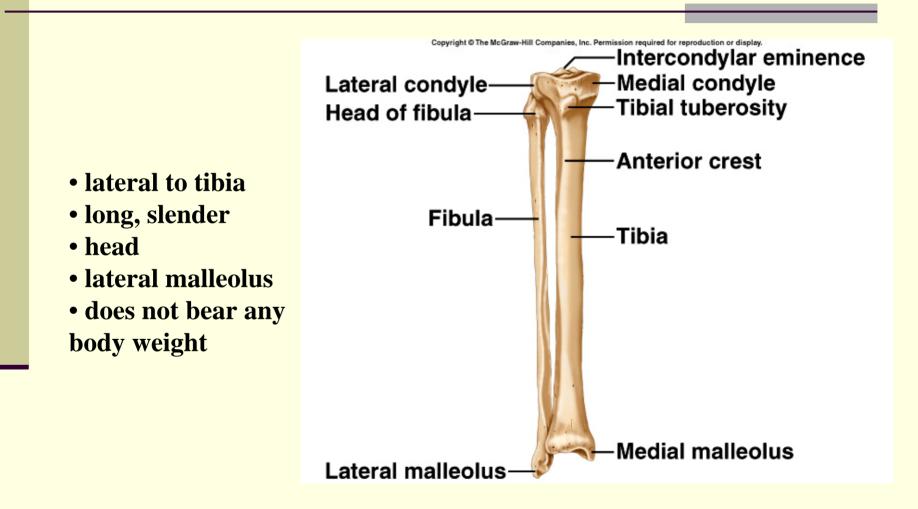


Tibia



- shin bone
- medial to fibula
- condyles
- tibial tuberosity
- anterior crest
- medial malleolus

Fibula

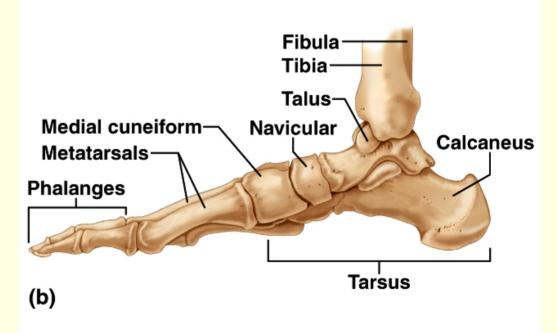


Ankle and Foot

- Tarsals (14)
 - calcaneus
 - talus
 - navicular
 - cuboid
 - lateral cuneiform
 - intermediate cuneiform
 - medial cuneiform

• Metatarsals (10)

- Phalanges (28)
 - proximal
 - middle
 - distal



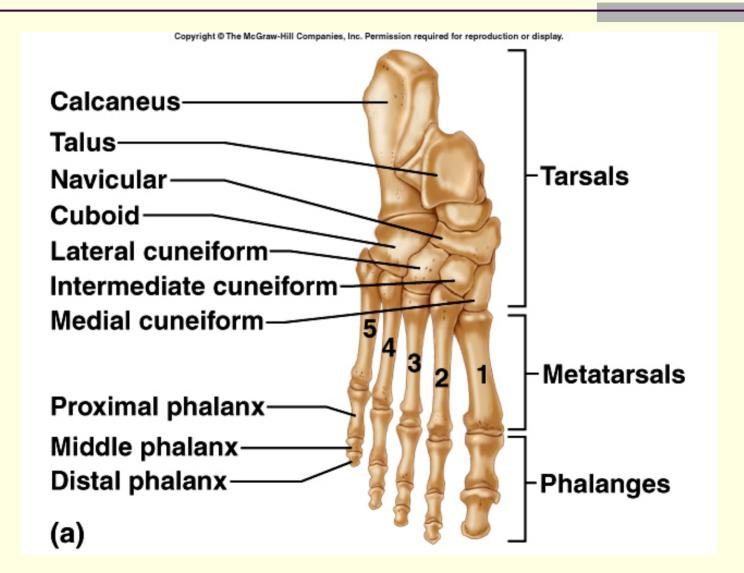
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X-ray photograph of the foot



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Ankle and Foot



X-ray photograph of the foot

(b)



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Life-Span Changes

- decrease in height at about age 30
- calcium levels fall
- bones become brittle
- osteoclasts outnumber osteoblasts
- spongy bone weakens before compact bone
- bone loss rapid in menopausal women
- hip fractures common
- vertebral compression fractures common

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Clinical Application

Types of Fractures

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- green stick
- fissured
- comminuted
- transverse
- oblique
- spiral

A greenstick fracture is incomplete, and the break occurs on the convex surface of the bend in the bone.



A *fissured* fracture involves an incomplete longitudinal break.

A *transverse* fracture is complete, and the break occurs at a right angle to the axis of the bone.



An *oblique* fracture occurs at an angle other than a right angle to the axis of the bone. fragments the bone.

complete and

A comminuted fracture is



A *spiral* fracture is caused by twisting a bone excessively.

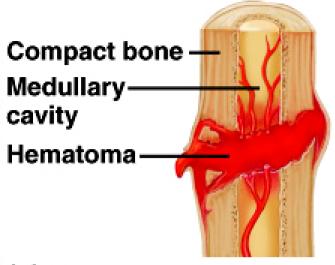
Shoulder Spica - A cast of fiber glass or plaster that includes the entire torso and an entire arm. Used to treat fractures of the humerus or extreme fractures of the shoulder bones.



Spica – Origin L, an ear, as of corn. A kind of bandage passing, by successive turns and crosses, from an extremity to the trunk; so called from its resemblance to a spike of a barley.

X-radiograph of a broken humerus

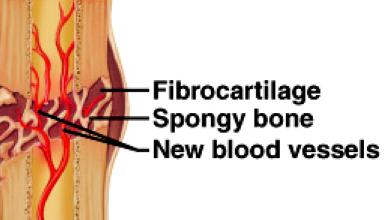
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(a) Blood escapes from ruptured blood vessels and forms a hematoma.

Bony callus

(c) A bony callus replaces fibrocartilage.



(b) Spongy bone forms in regions close to developing blood vessels, and fibrocartilage forms in more distant regions.

— Compact bone

-Medullary cavity

- Periosteum

(d) Osteoclasts remove excess bony tissue, restoring new bone structure much like the original. Copyright © The McGraw-Hill Companies, Inc. Permission required for reproduction or display.

TABLE 7.13Reasons for FallsAmong the Elderly

Overall frailty

- Decreased muscle strength
- Decreased coordination
- Side effects of medication
- Slowed reaction time due to stiffening joints
- Poor vision and/or hearing
- Disease (cancer, infection, arthritis)

Clinical Terms Related to the Skeletal System

Review terms in left column on page 232 in the textbook.

