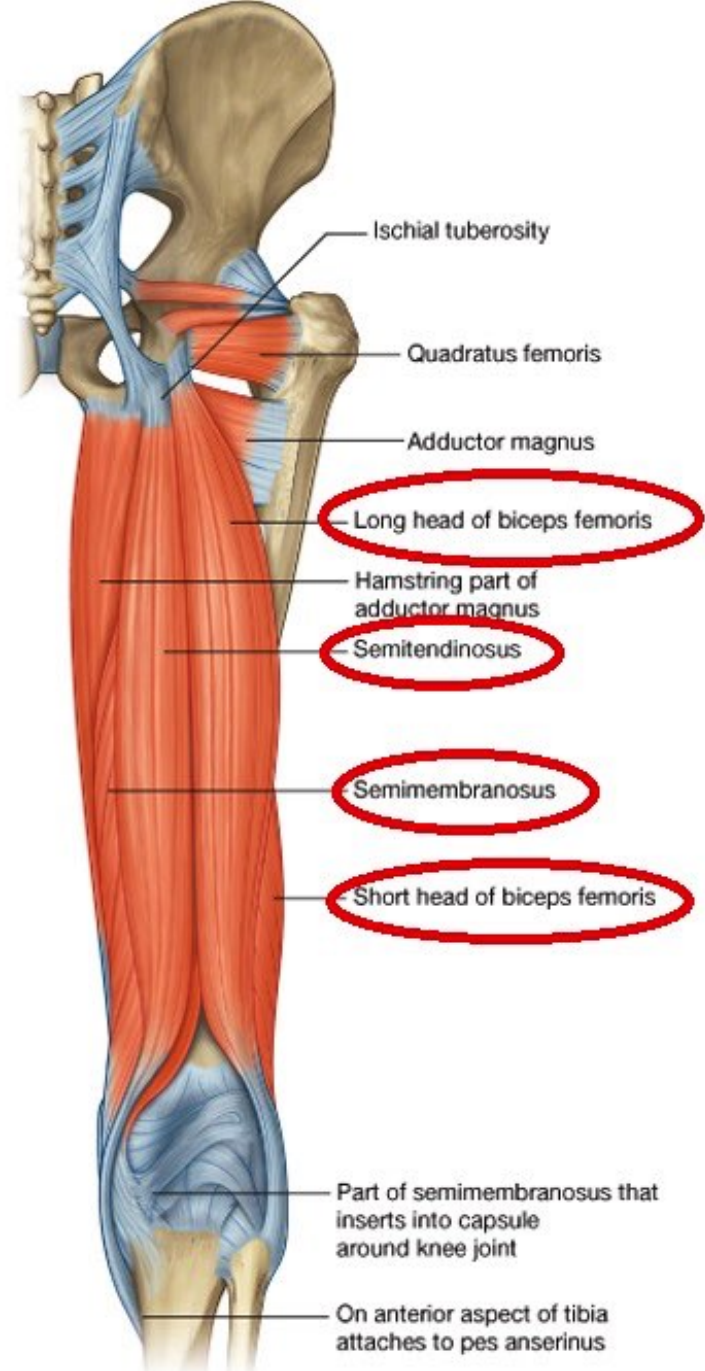




Muscles of the lower limb. Walking

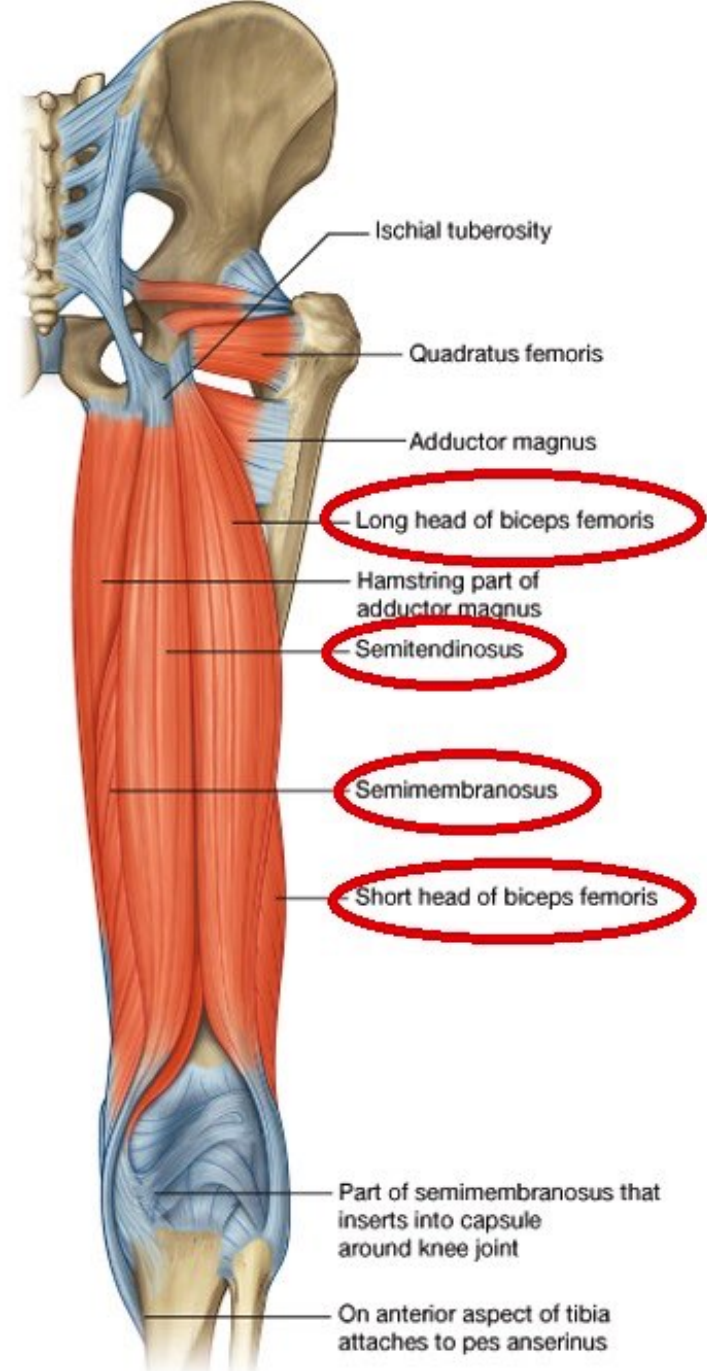
Sándor Katz M.D.,Ph.D.

Hip extensors - knee flexors



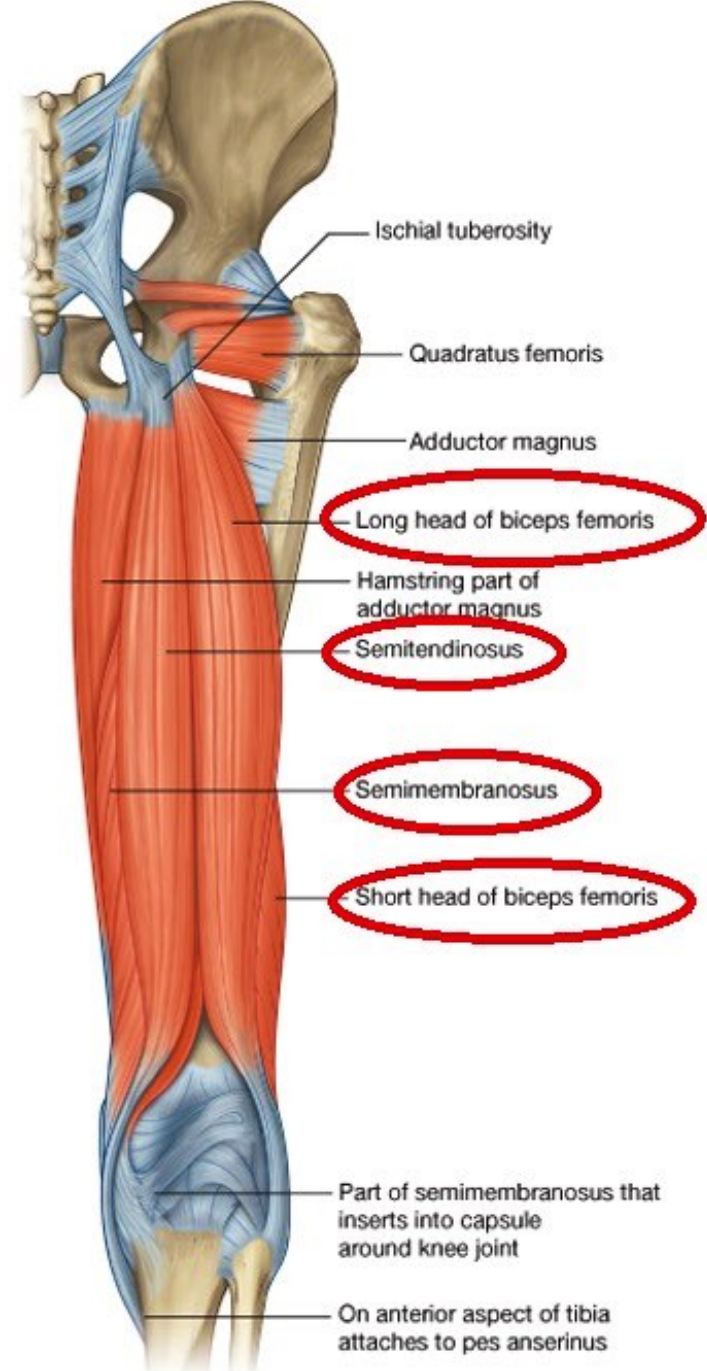
Biceps femoris

- **Origin:** long head: ischial tuberosity; short head: lateral lip of linea aspera
- **Insertion:** head of fibula
- **Action:** Hip joint: extension. Knee joint: flexion.
- **Innervation:** sciatic nerve



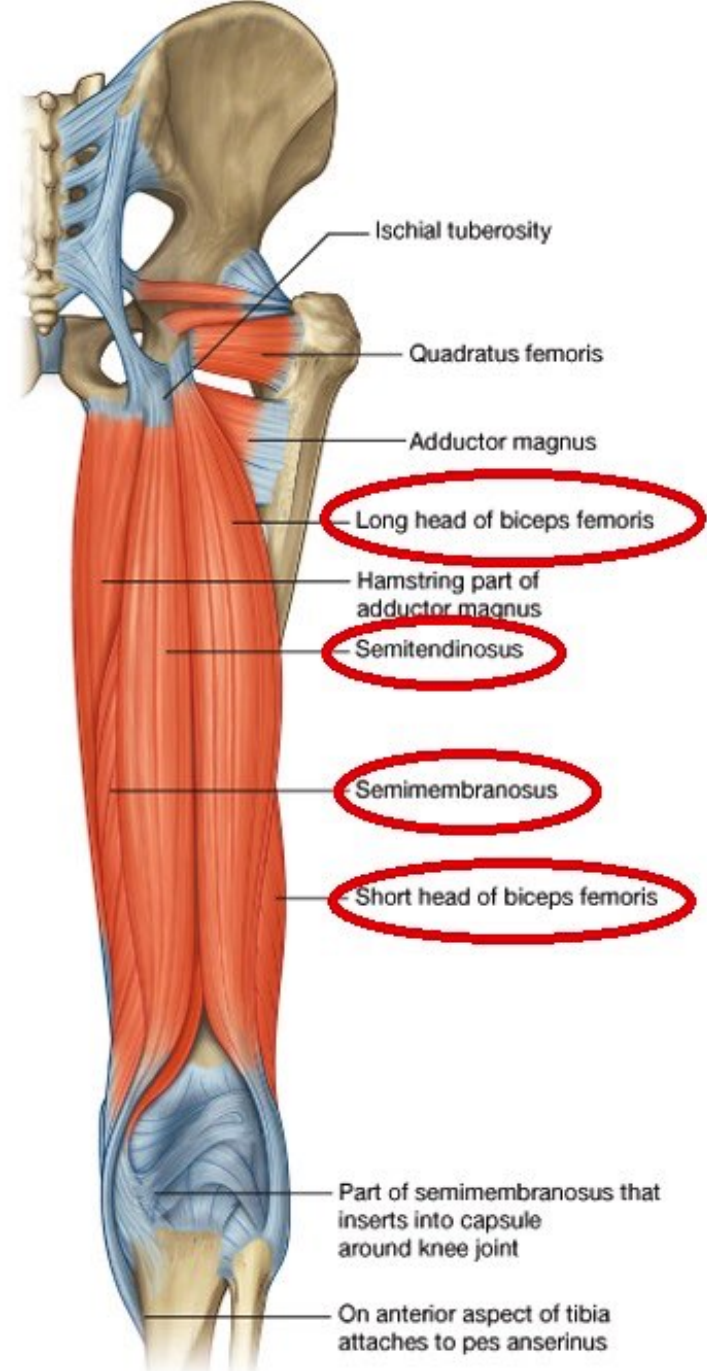
Semitendinosus

- **Origin:** ischial tuberosity
- **Insertion:** superficial pes anserinus (under the medial tibial condyle)
- **Action:** Hip joint: extension. Knee joint: flexion.
- **Innervation:** sciatic nerve



Semimembranosus

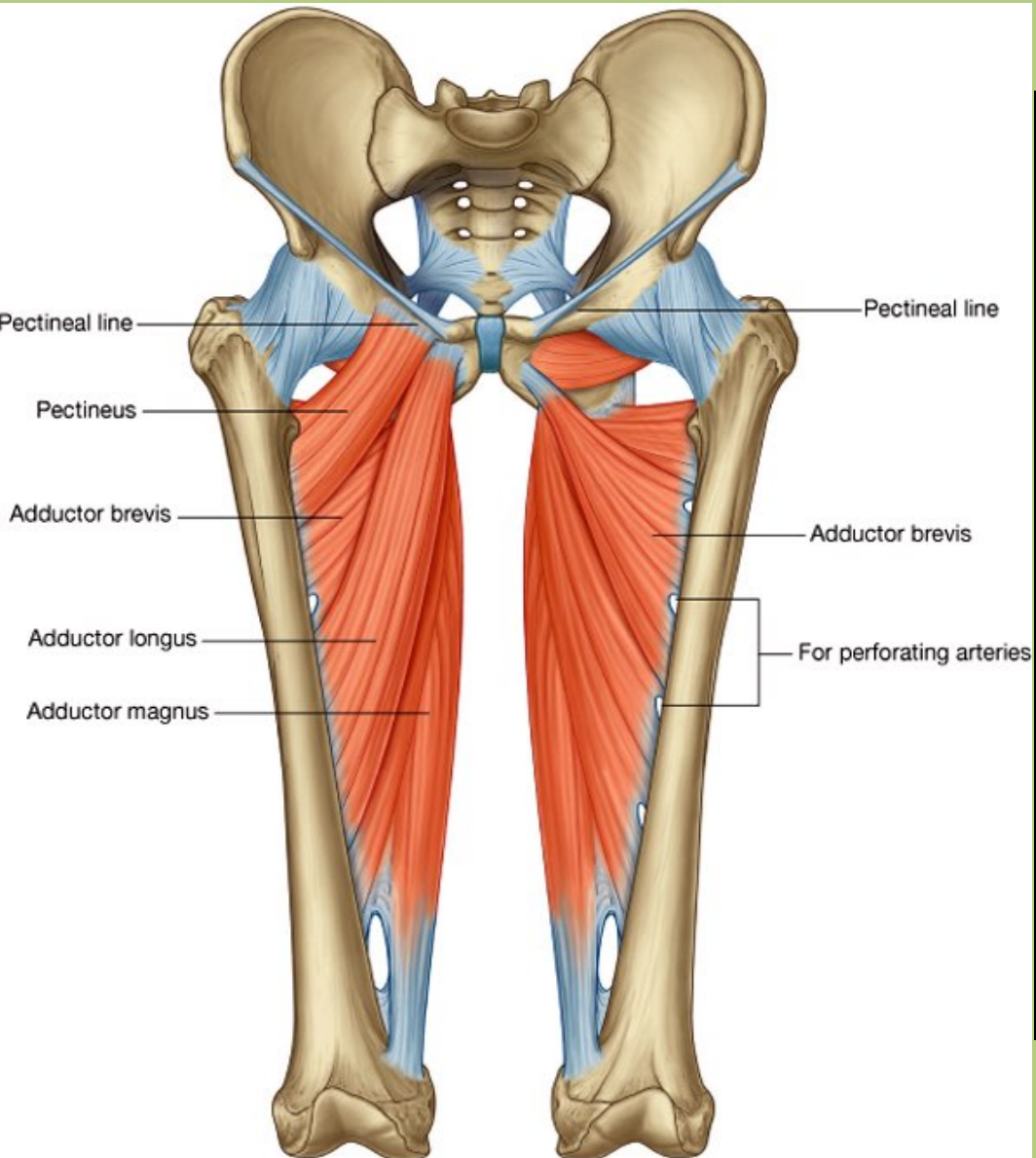
- **Origin:** ischial tuberosity
- **Insertion:** deep pes anserinus (under the superficial pes anserinus)
- **Action:** Hip joint: extension. Knee joint: flexion.
- **Innervation:** sciatic nerve



Hip extensors-knee flexors (semitendinosus, semimembranosus, biceps femoris)

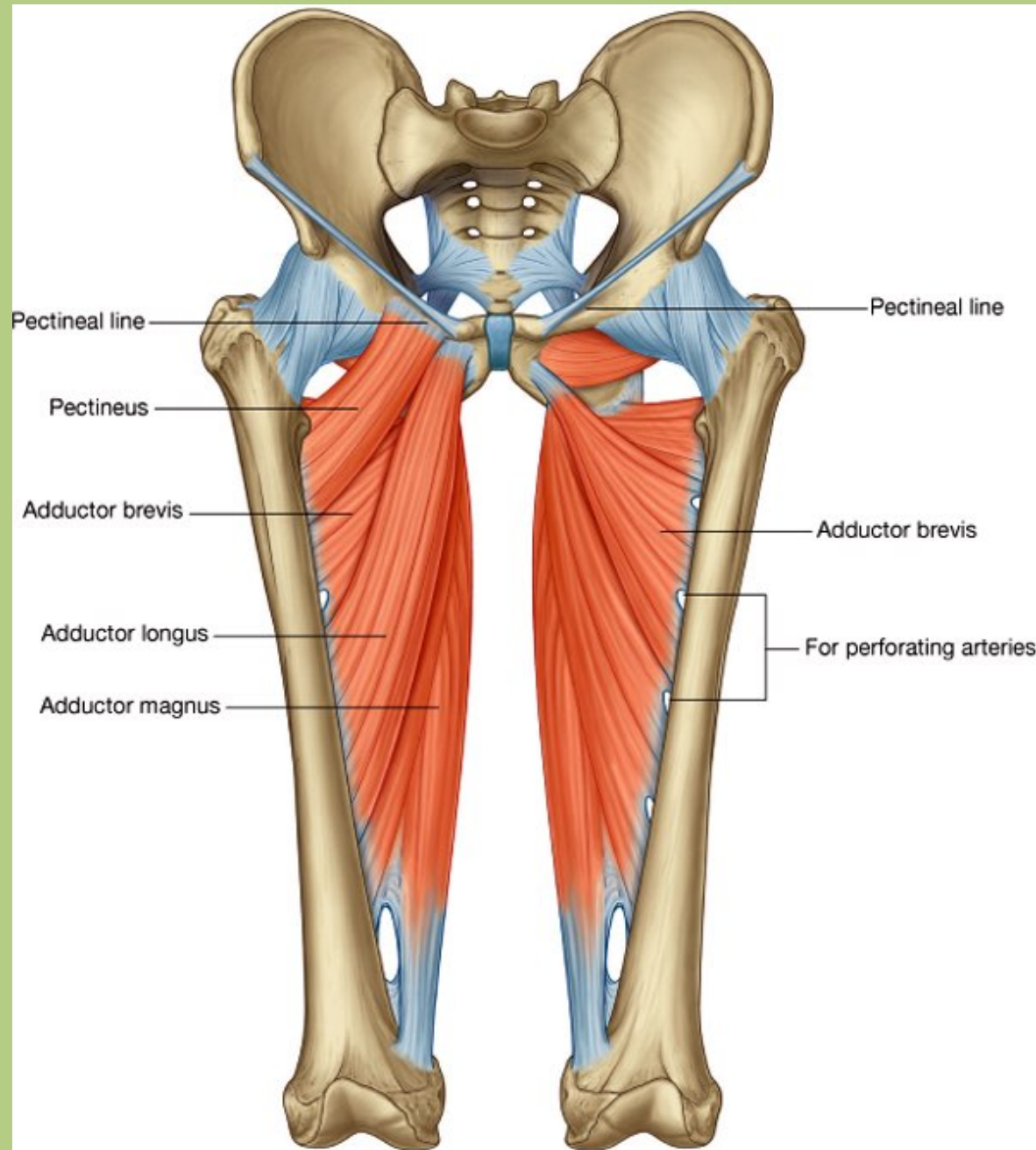


Adductors



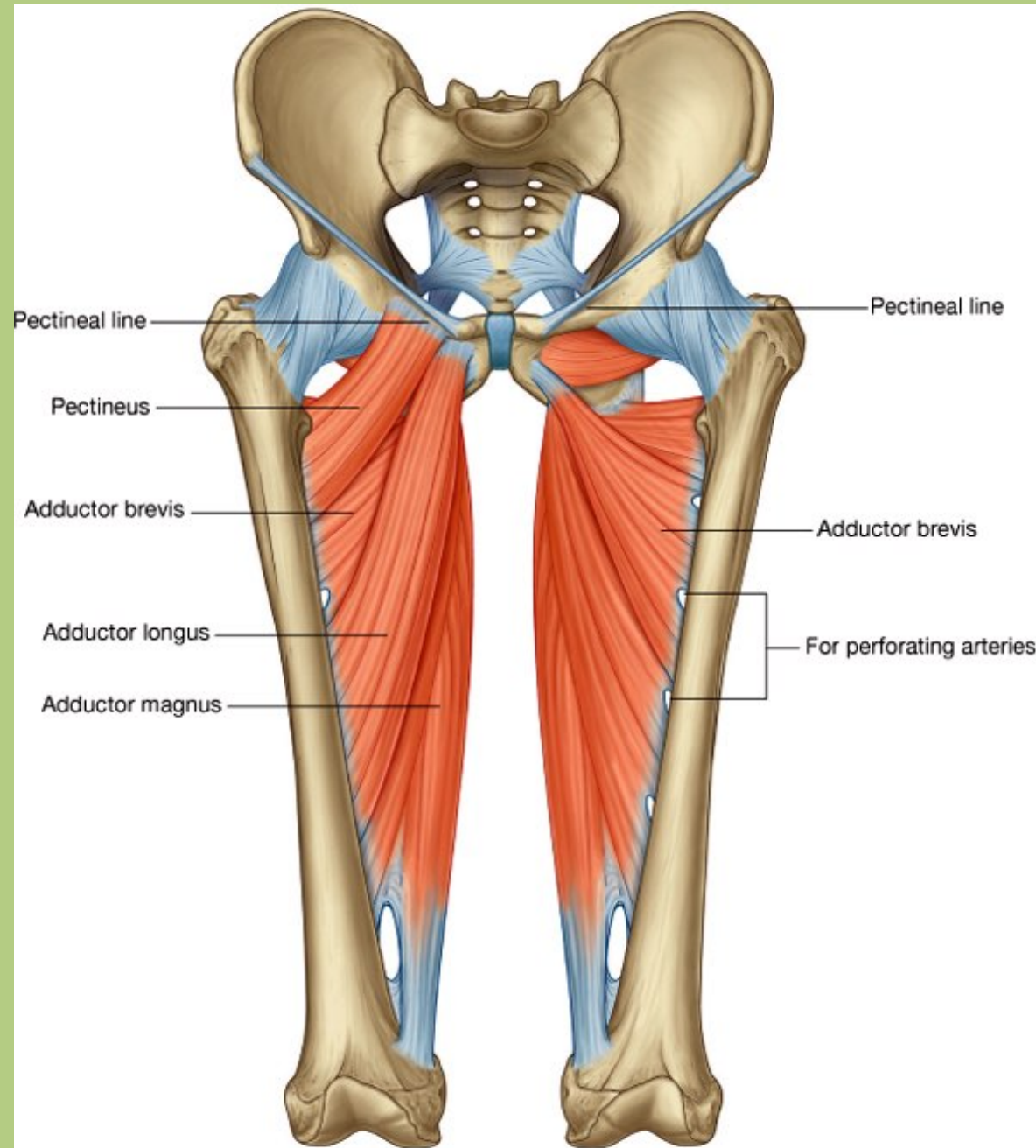
Gracilis

- **Origin:** inferior pubic ramus
- **Insertion:** superficial pes anserinus (under the medial tibial condyle)
- **Action:** Hip joint: adduction and flexion. Knee joint: flexion and medial rotation.
- **Innervation:** obturator nerve



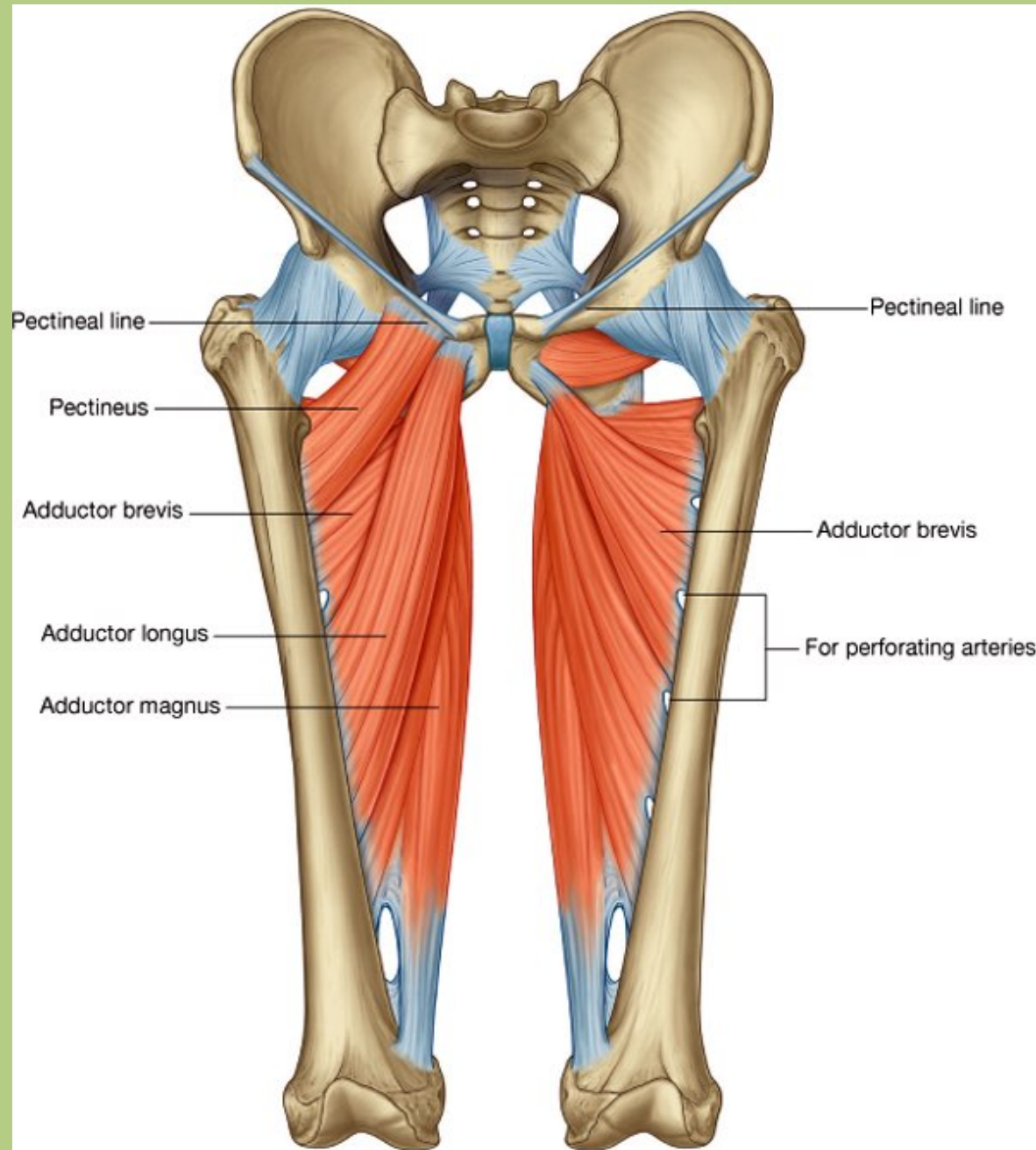
Adductor longus

- **Origin:** pubic bone, symphysis
- **Insertion:** medial lip of the linea aspera
- **Action:** Hip joint: adduction and flexion.
- **Innervation:** obturator nerve



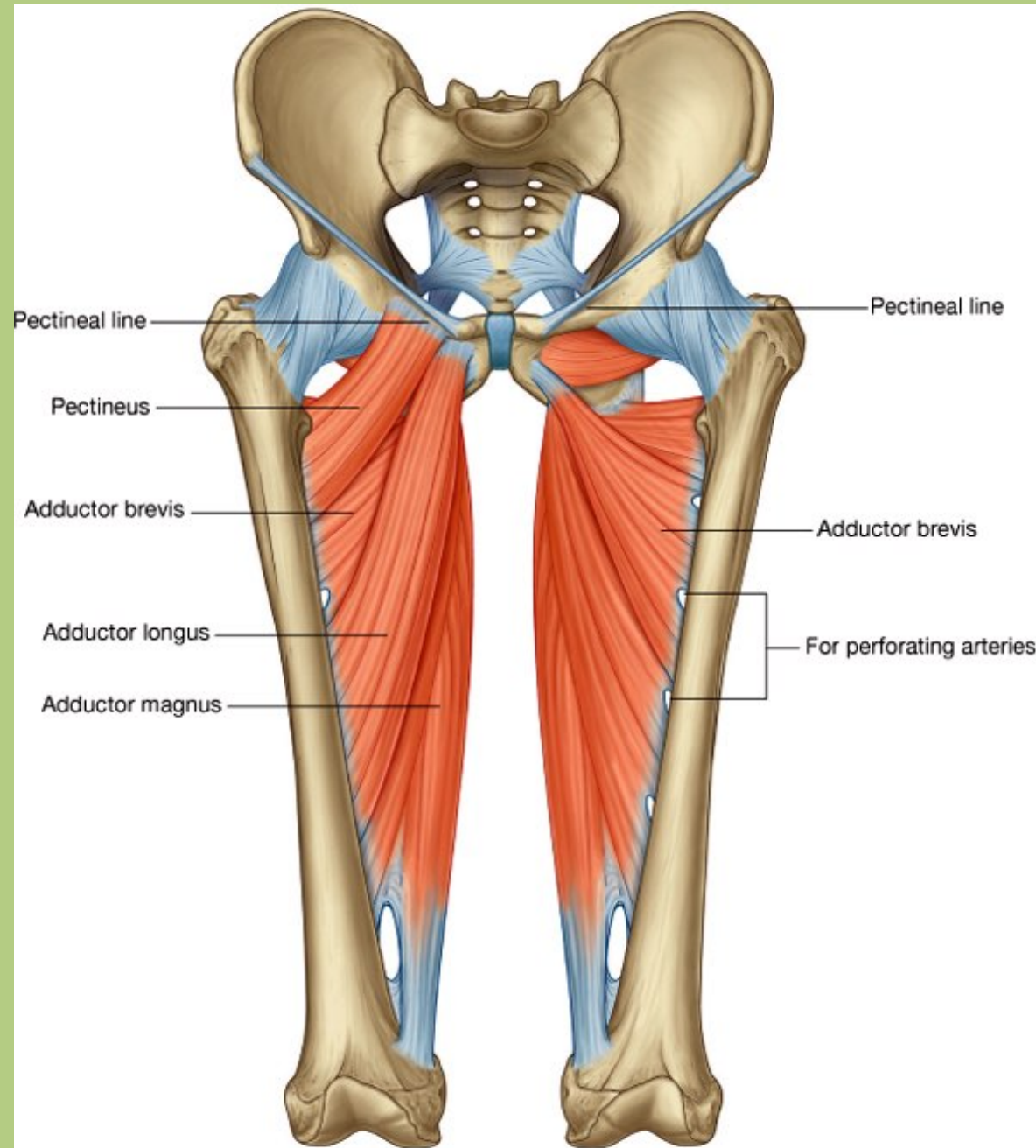
Adductor brevis

- **Origin:** inferior pubic ramus
- **Insertion:** medial lip of the linea aspera
- **Action:** Hip joint: adduction and flexion.
- **Innervation:** obturator nerve



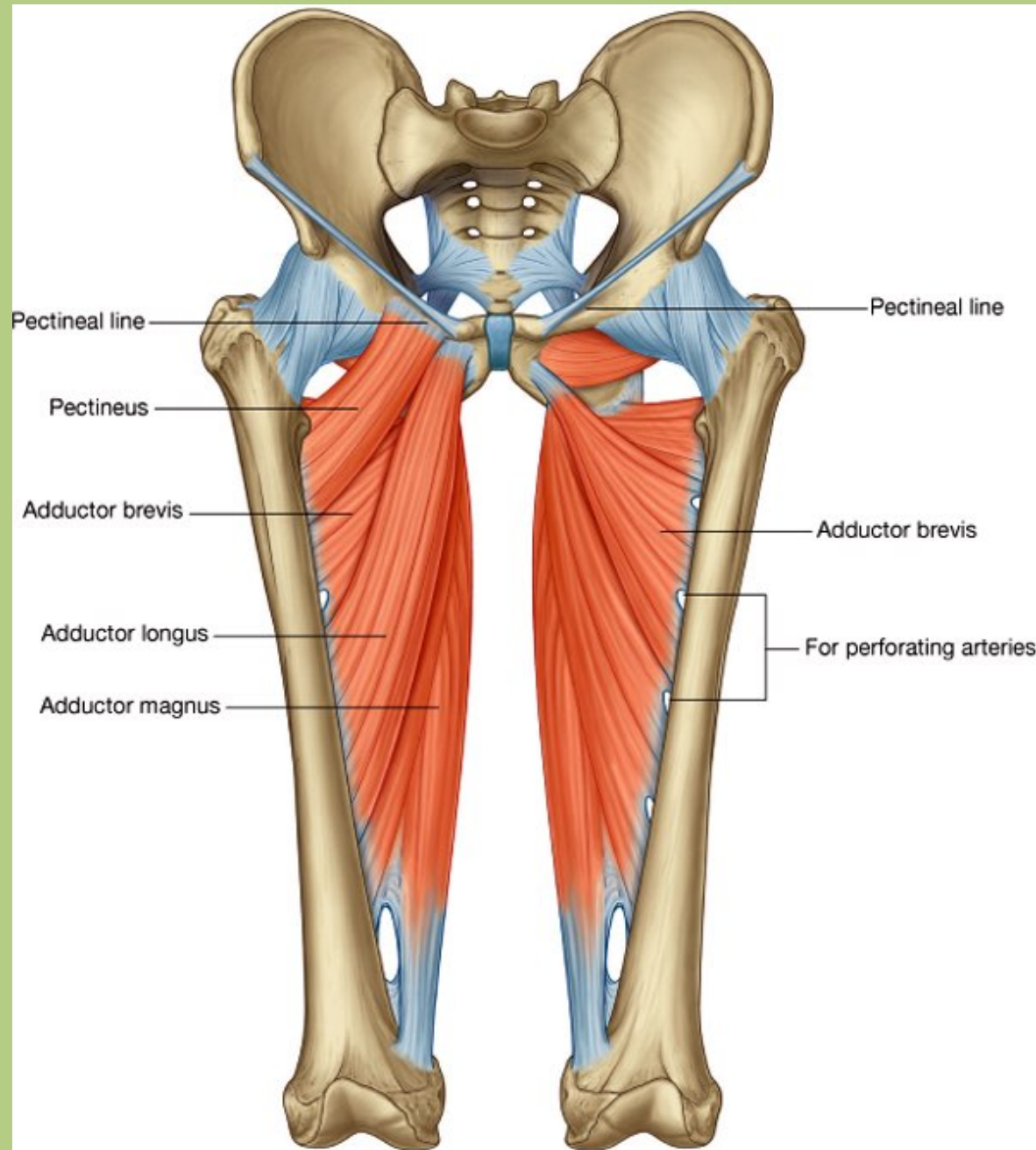
Adductor magnus

- **Origin:** inferior pubic ramus, ischial tuberosity
- **Insertion:** Fleshy part: medial lip of the linea aspera. Tendinous part: adductor tubercle.
- **Action:** Hip joint: adduction and flexion.
- **Innervation:** obturator nerve



Pectineus

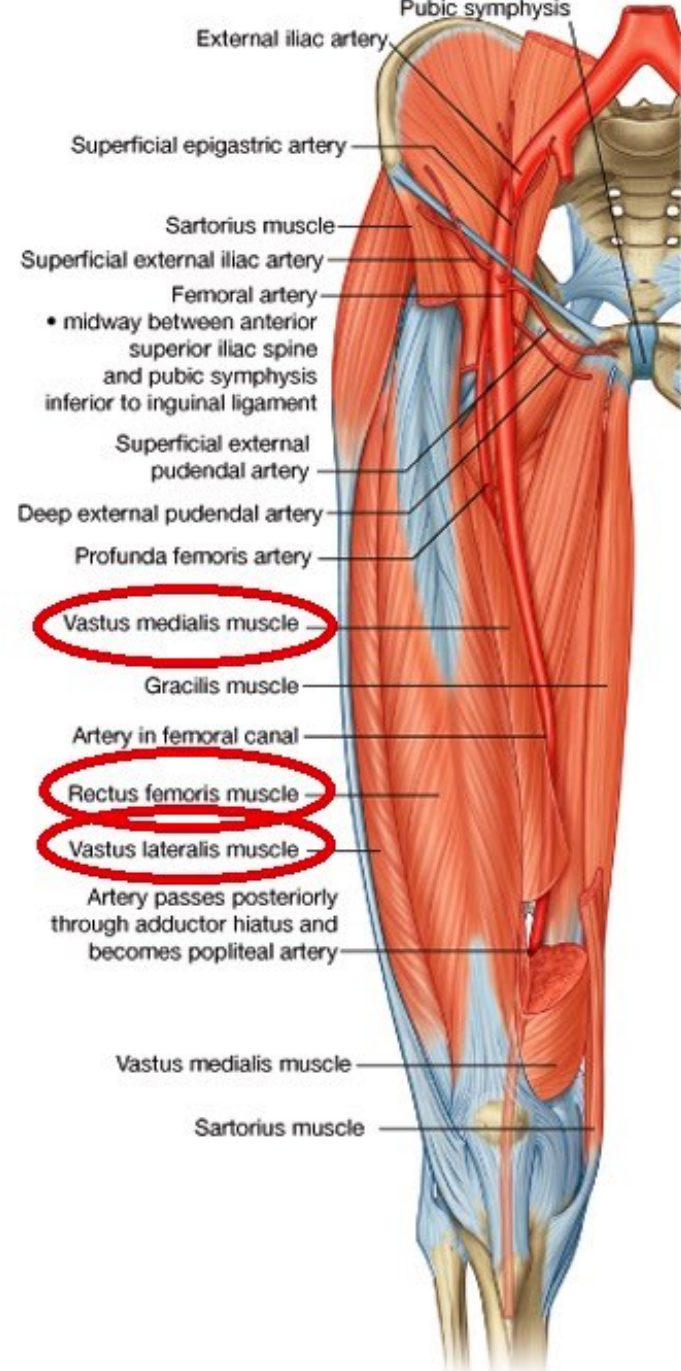
- **Origin:** pecten pubis
- **Insertion:** greater trochanter
- **Action:** Hip joint: adduction and flexion.
- **Innervation:** obturator and femoral nerves



Adductor brevis, gracilis and pectineus

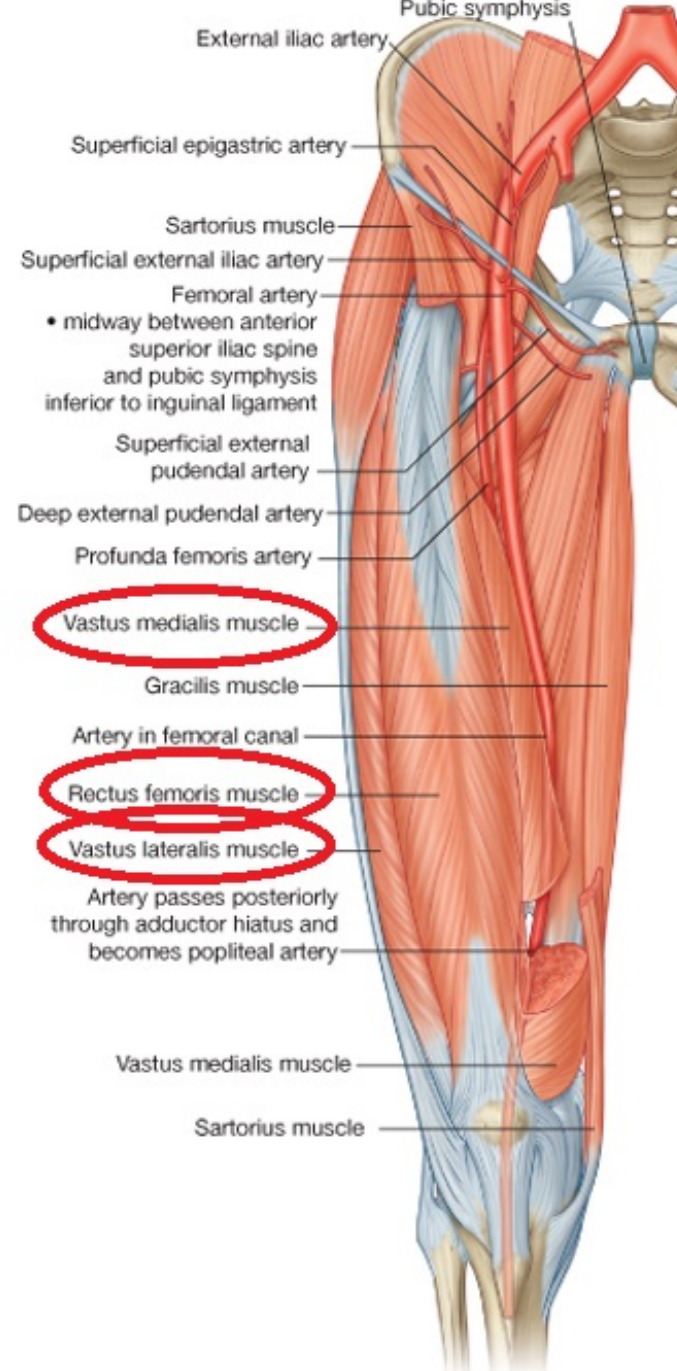


Hip flexors - knee extensors



Quadriceps femoris

- **Origin: rectus femoris:** inferior anterior iliac spine, **vastus medialis:** medial lip of the linea aspera, **vastus lateralis:** lateral lip of the linea aspera, **vastus intermedius:** shaft of the femur anteriorly
- **Insertion:** tibial tuberosity
- **Action:** Hip joint: flexion. Knee joint: extension.
- **Innervation:** femoral nerve

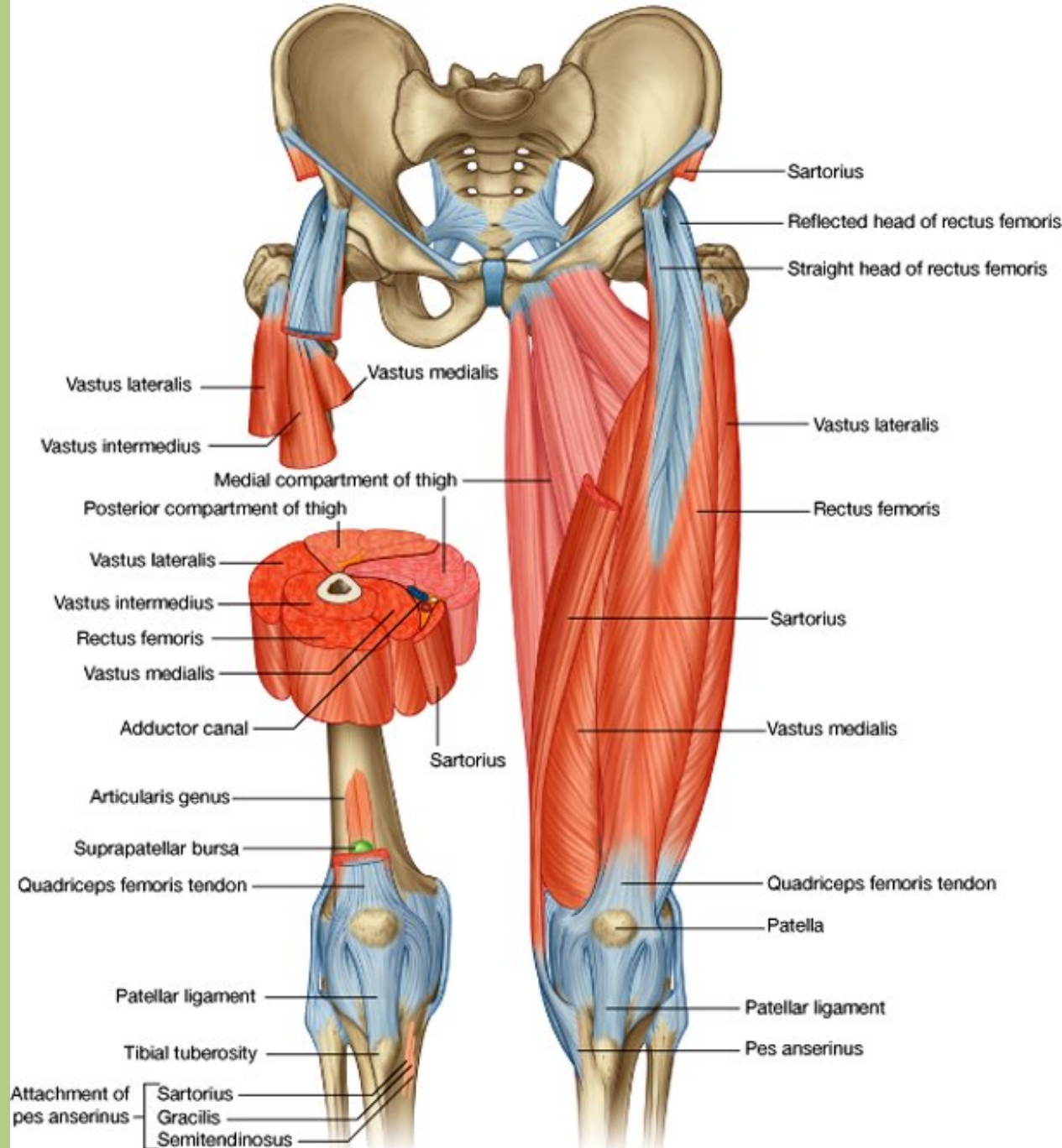


Hip flexors-knee extensors (quadriceps femoris)



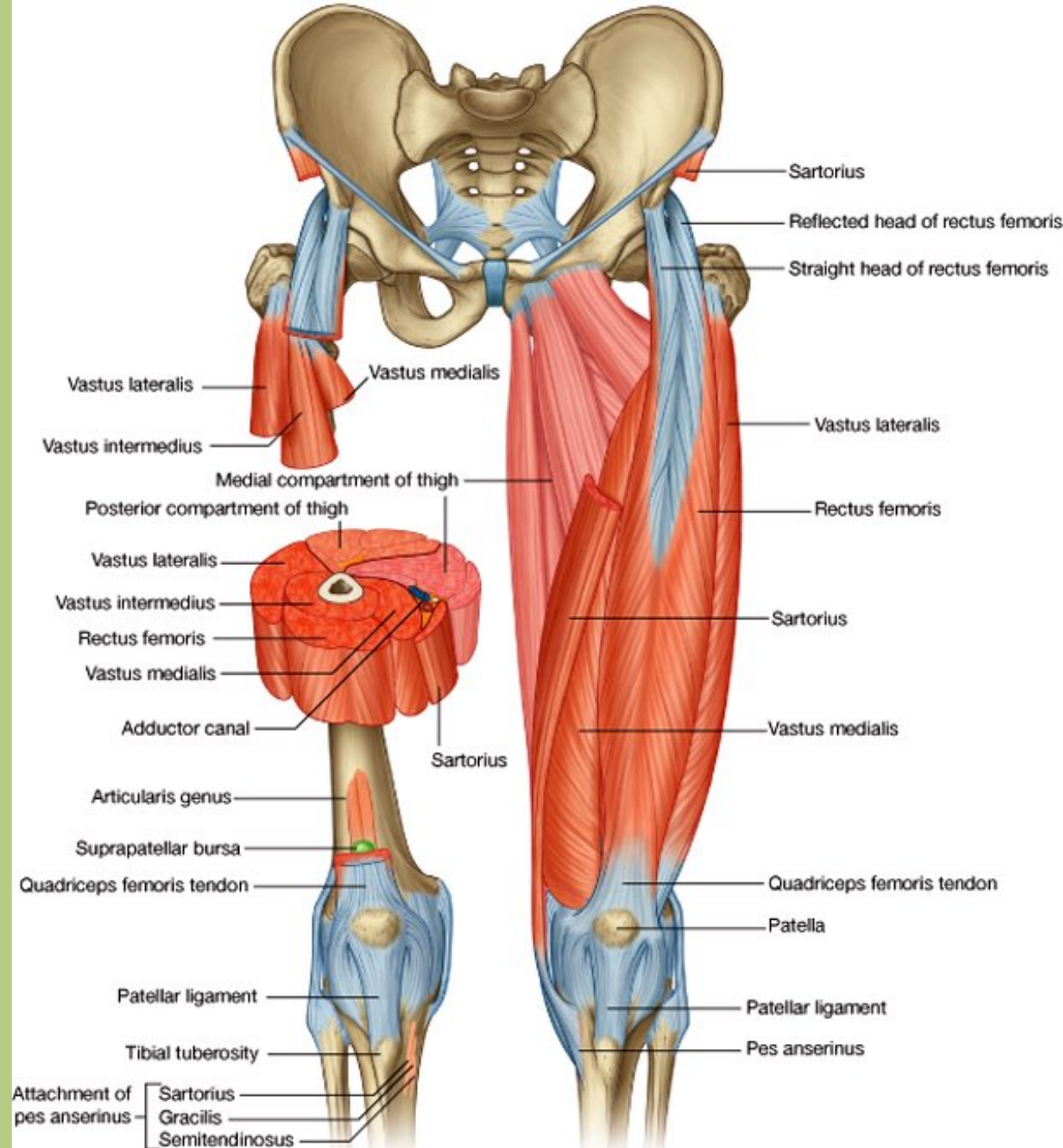
Sartorius

- **Origin:** anterior superior iliac spine
- **Insertion:** superficial pes anserinus
- **Action:** Hip joint: flexion and abduction. Knee joint: flexion.
- **Innervation:** femoral nerve



Tensor fasciae latae

- **Origin:** anterior superior iliac spine
- **Insertion:** iliotibial tract
- **Action:** Hip joint: flexion and abduction. Knee joint: stabilisation.
- **Innervation:** superior gluteal nerve

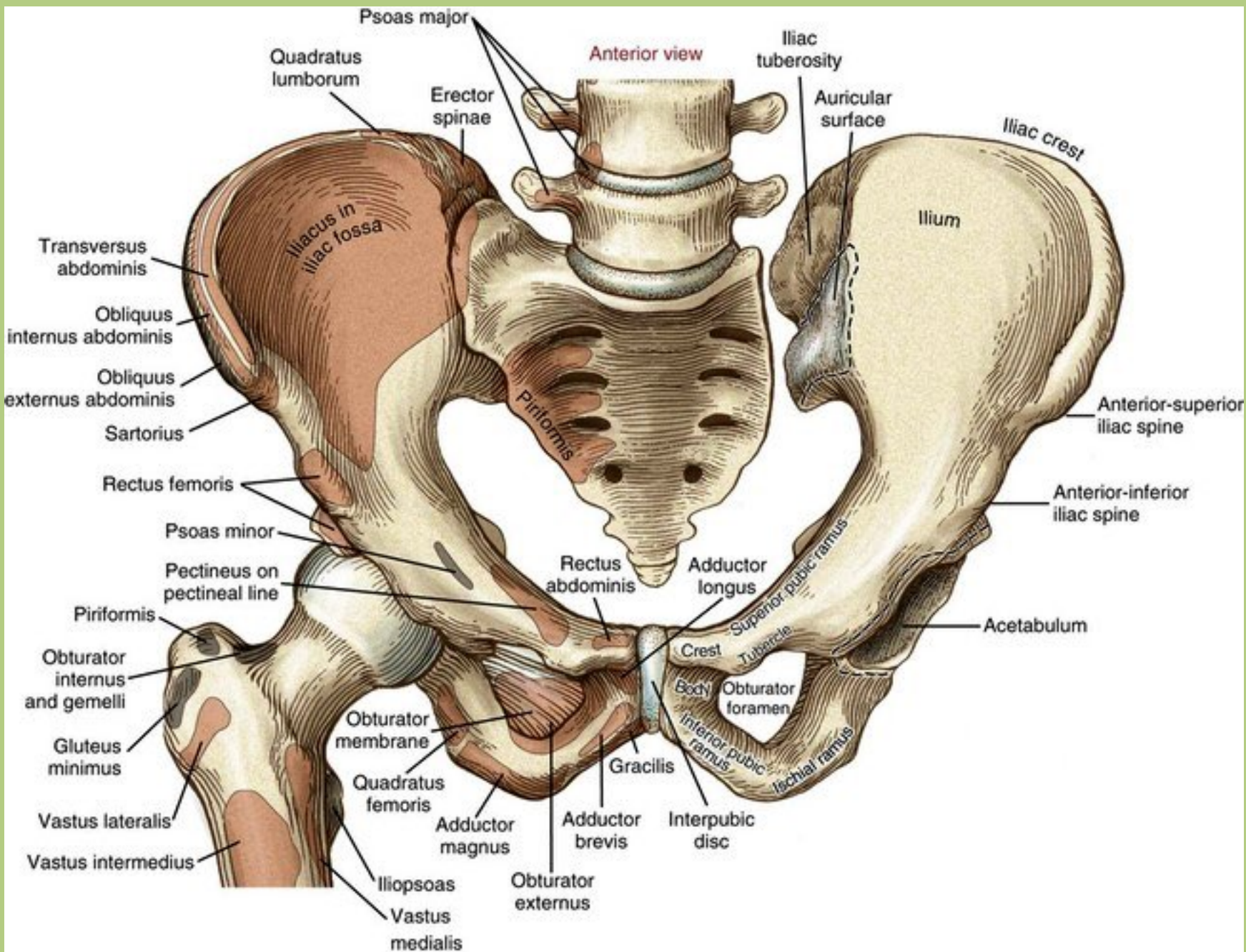


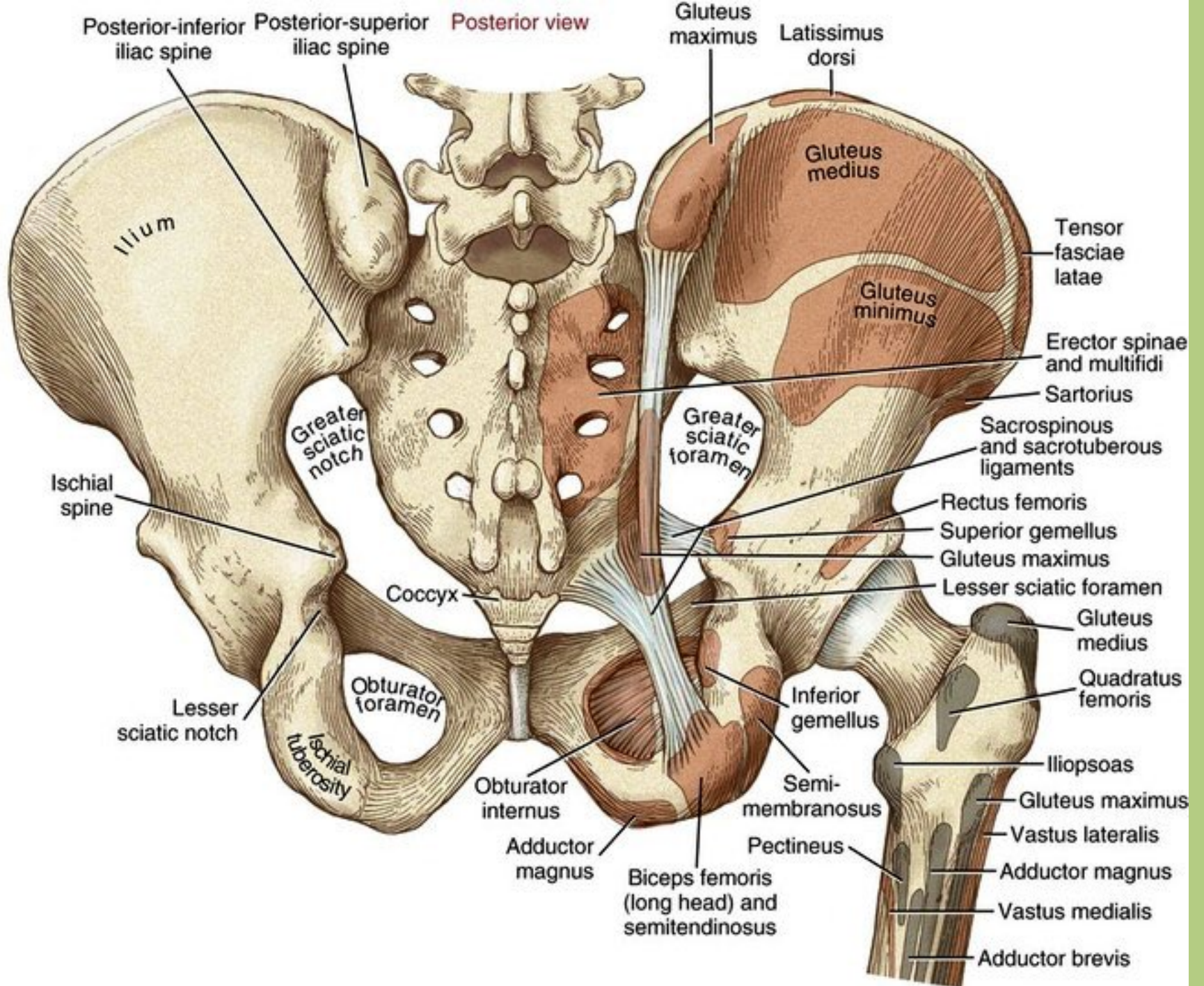
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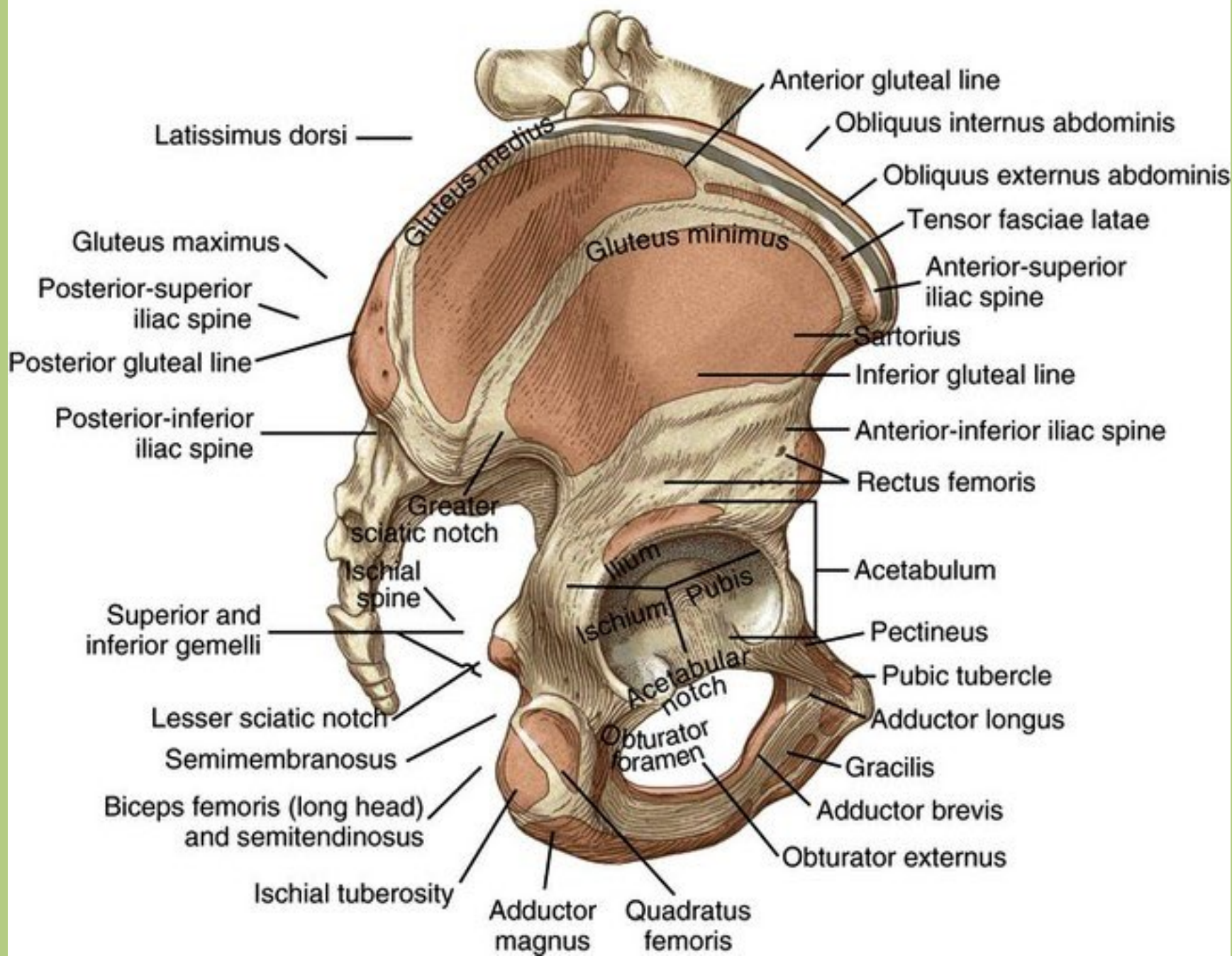
Tensor fasciae latae and sartorius



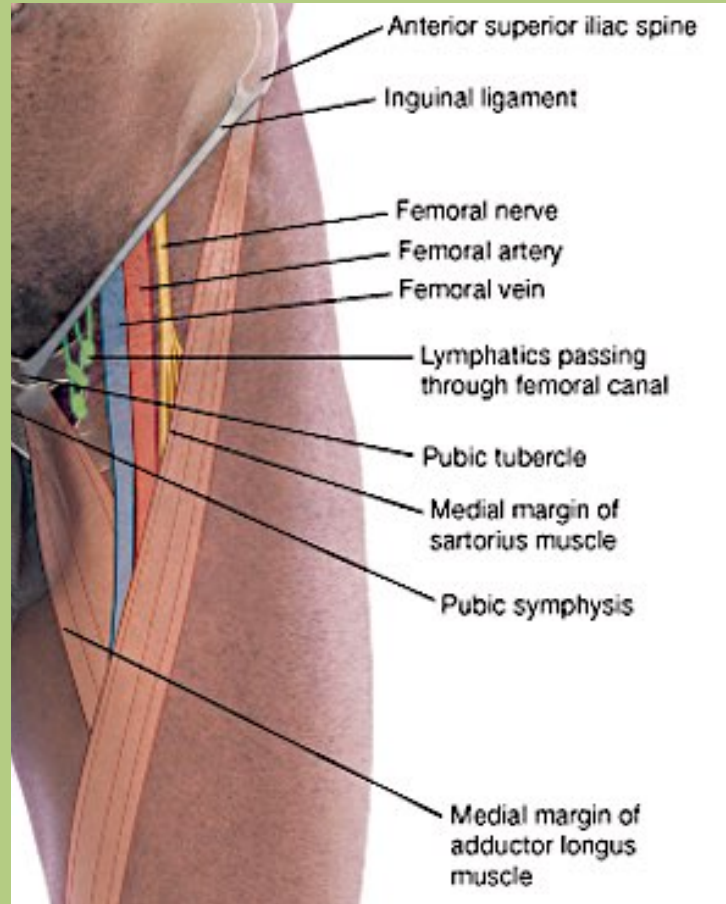
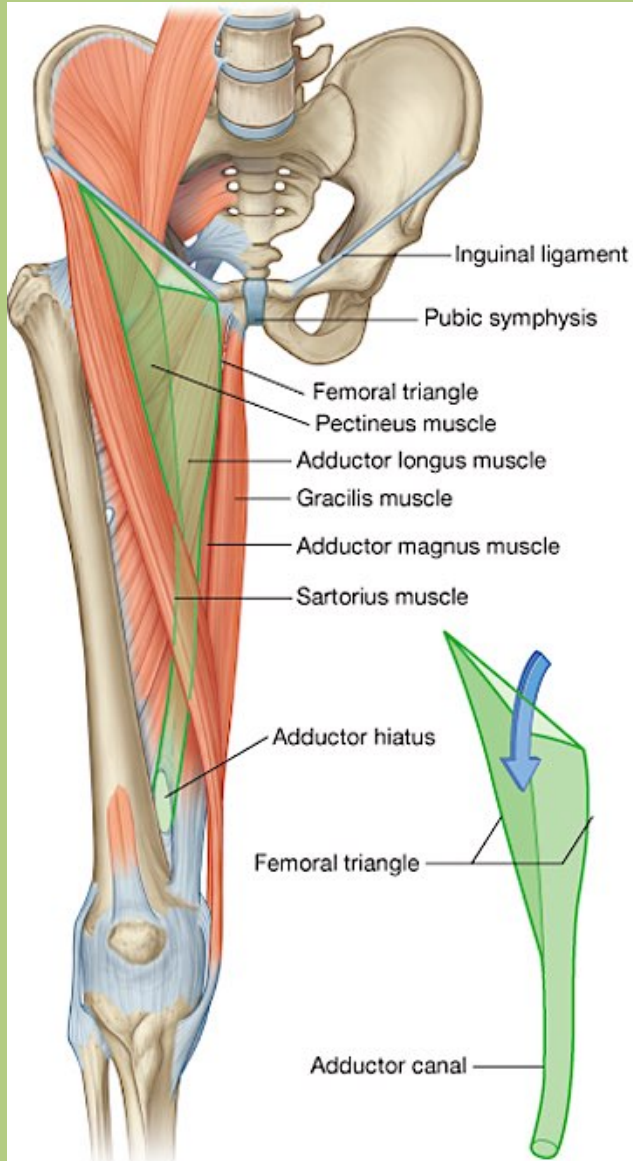




Lateral view



Femoral trigone



Base: inguinal lig.

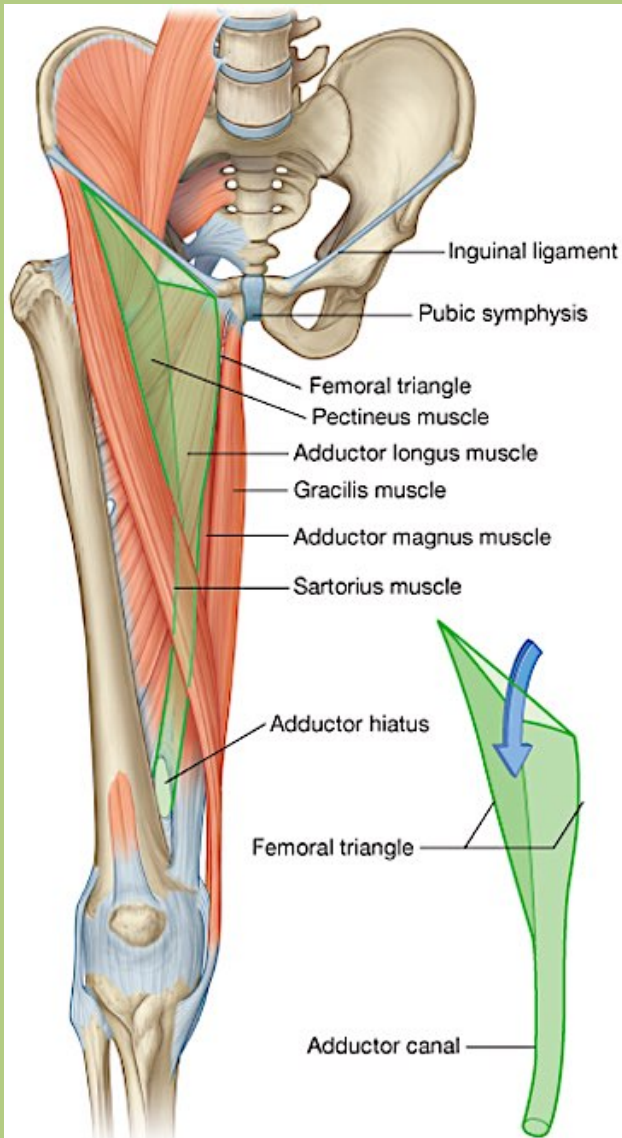
Medial wall:
adductor longus

Lateral wall:
sartorius

Floor: iliopsoas,
pectineus

Components:
Femoral artery /
vein
Femoral nerve

Adductor canal



Superior wall: sartorius, vastoadductor membrane

Medial wall: adductor longus, adductor magnus

Lateral wall: vastus medialis

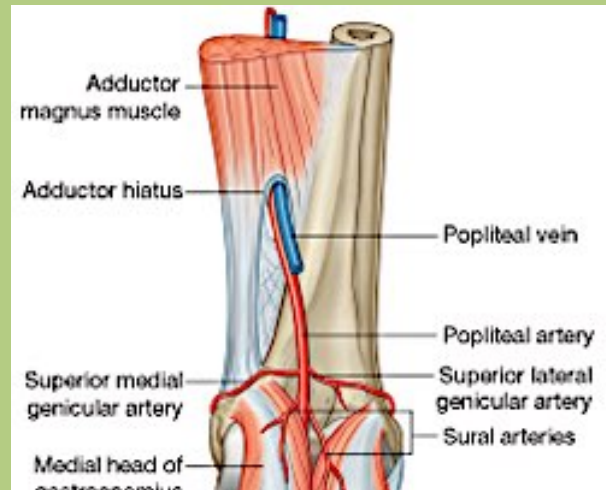
Exit: adductor hiatus

Contents:

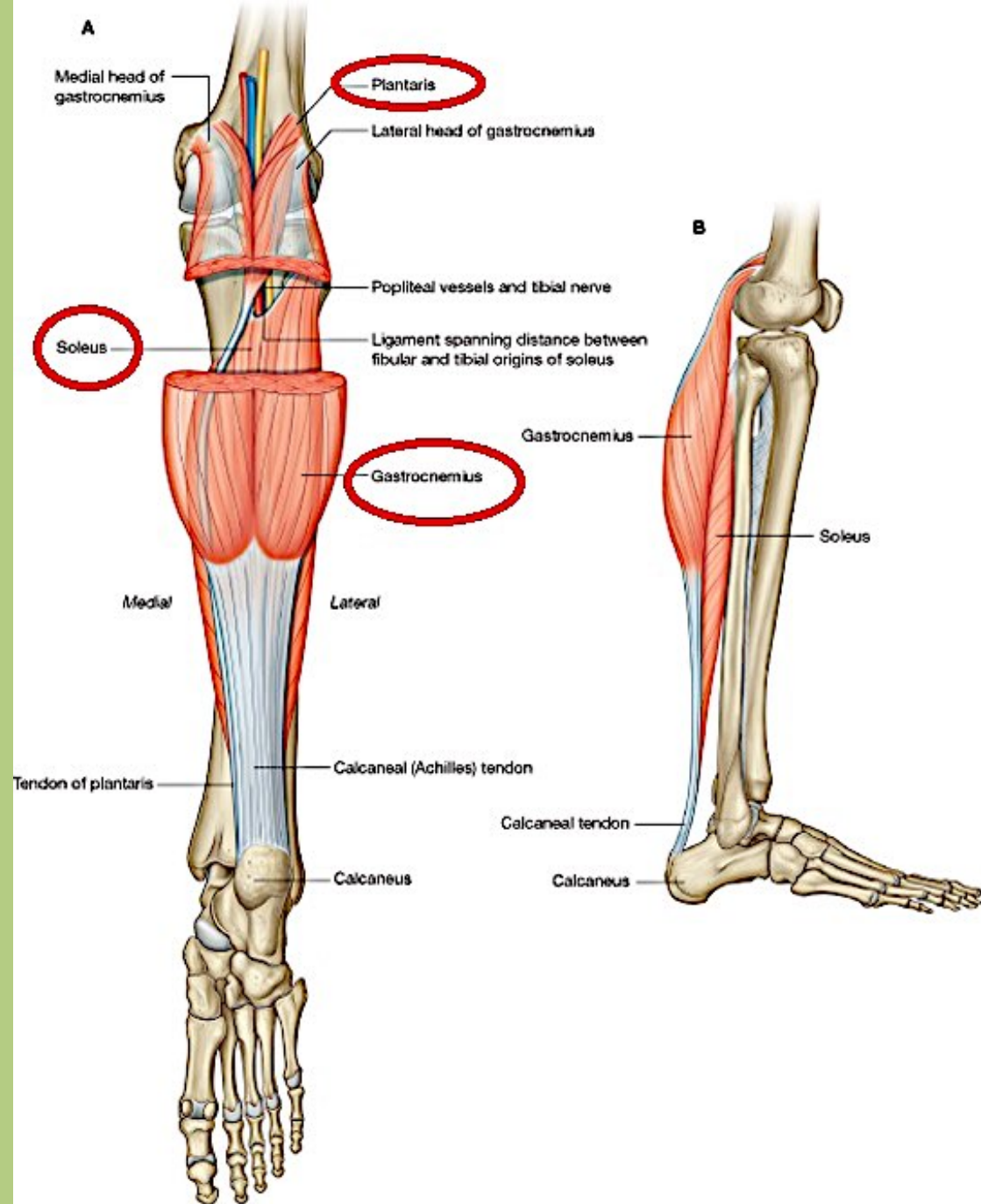
Femoral vessels

Saphenus nerve

Descending genicular artery

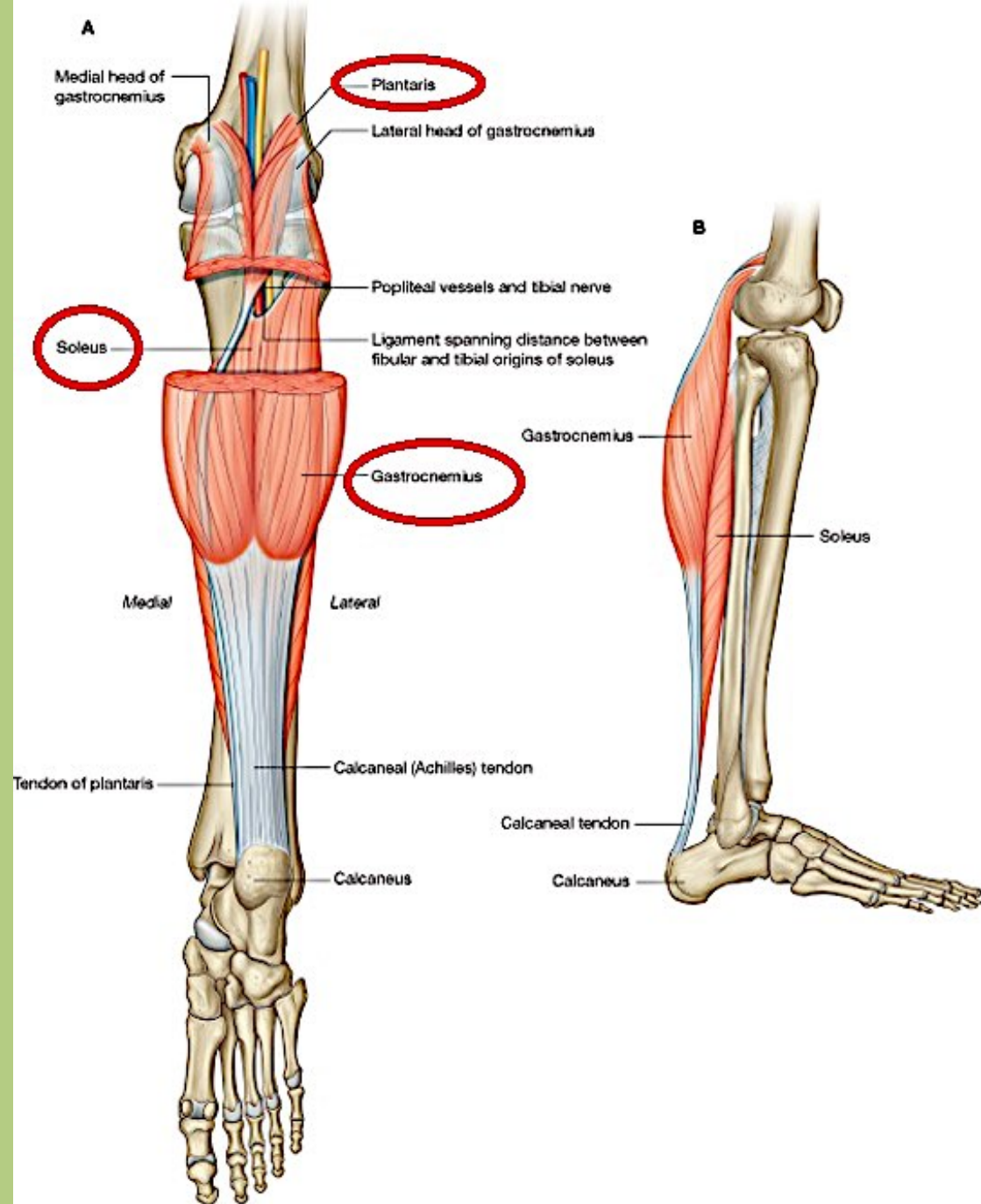


Triceps surae:
superficial flexor of
the leg - knee flexor



Triceps surae

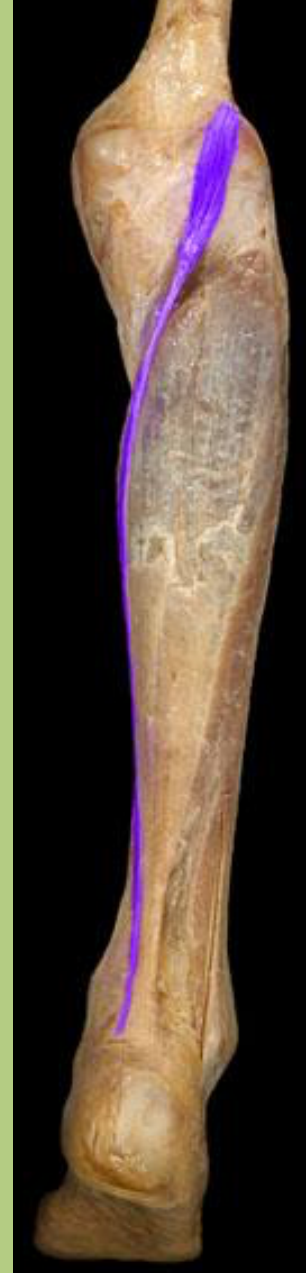
- **Origin:** **gastrocnemius:** femoral condyles, **soleus:** soleal line and fibula, **plantaris:** lateral femoral condyle
- **Insertion:** calcaneal tuberosity
- **Action:** Knee joint: flexion. Talocrural joint: plantarflexion. Talocalcaneonavicular joint: supination.
- **Innervation:** tibial nerve

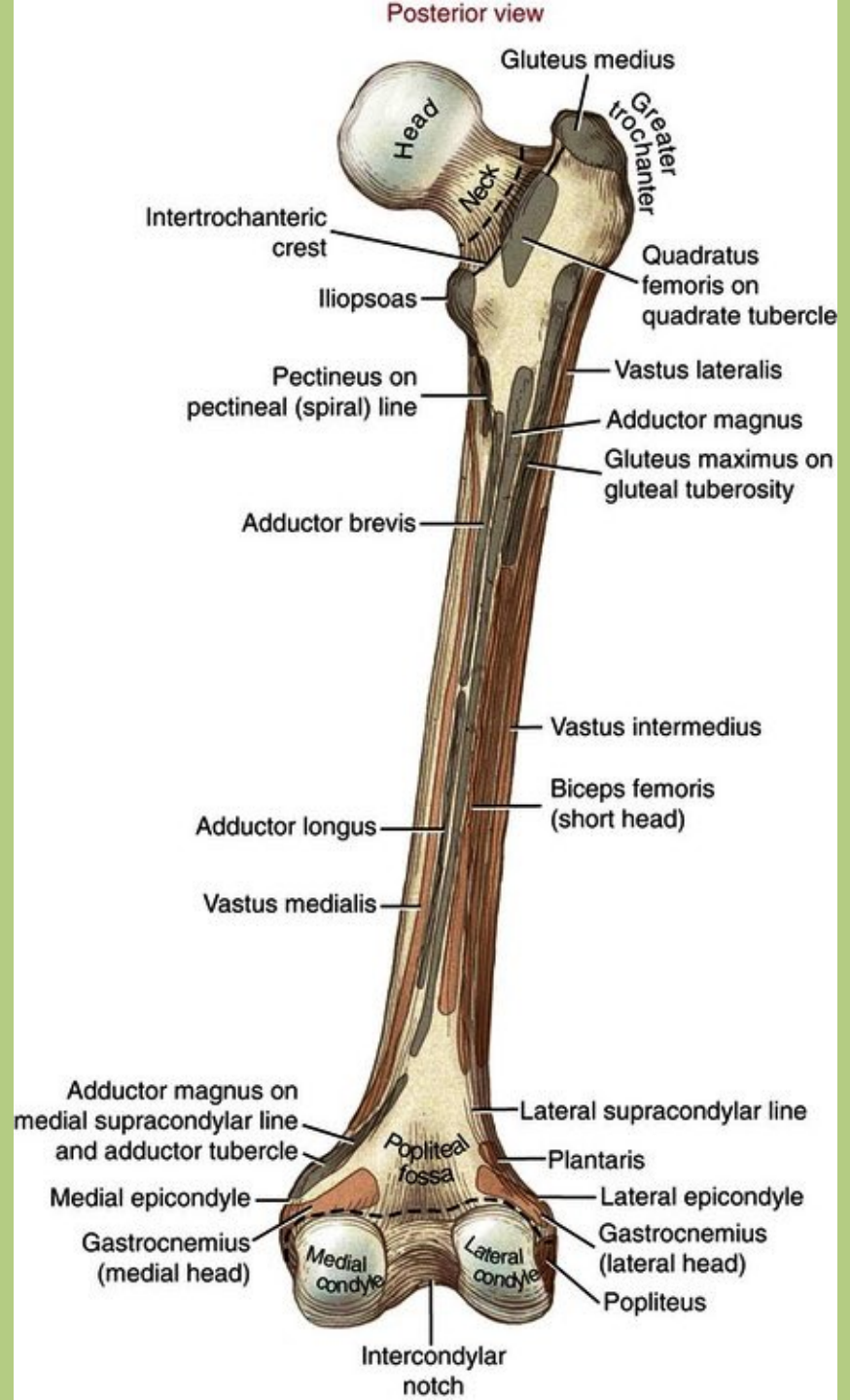
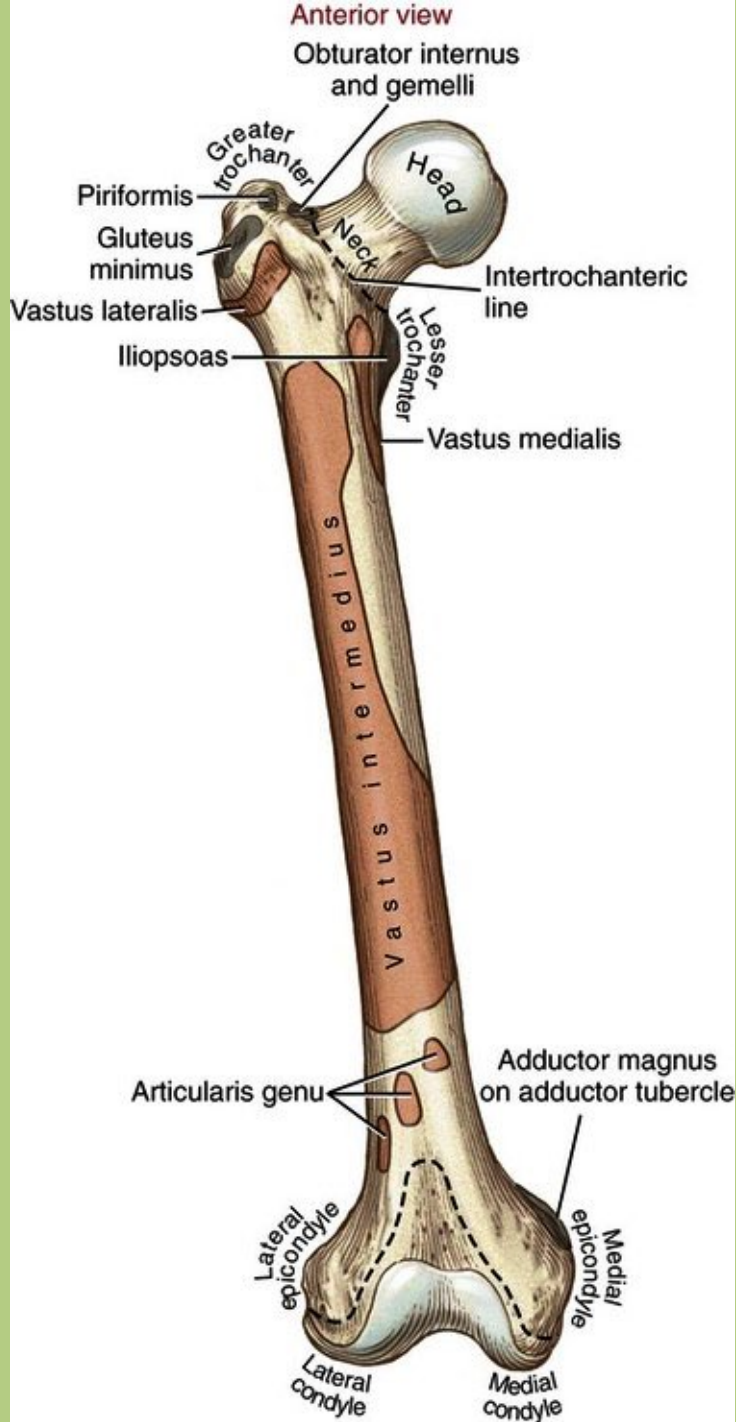


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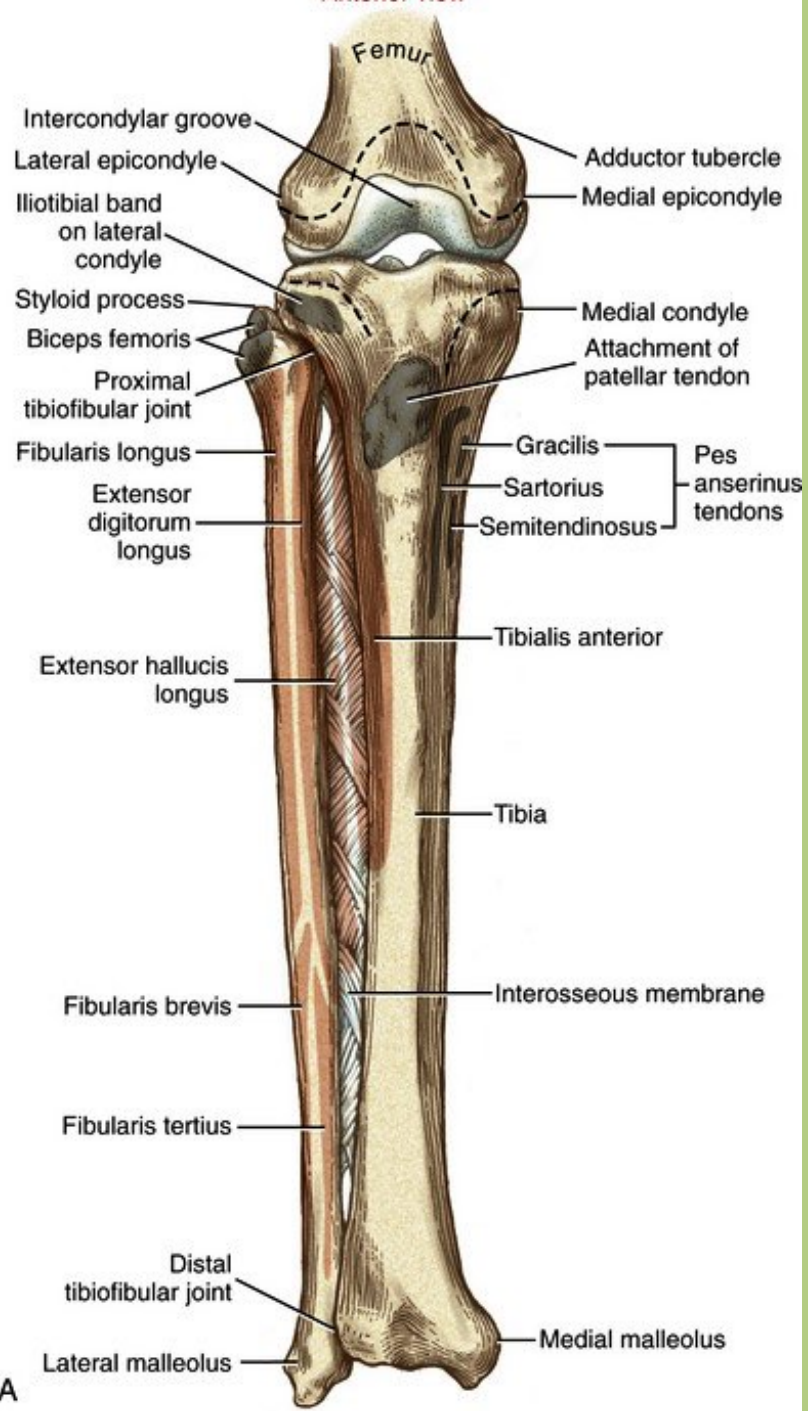
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Triceps surae

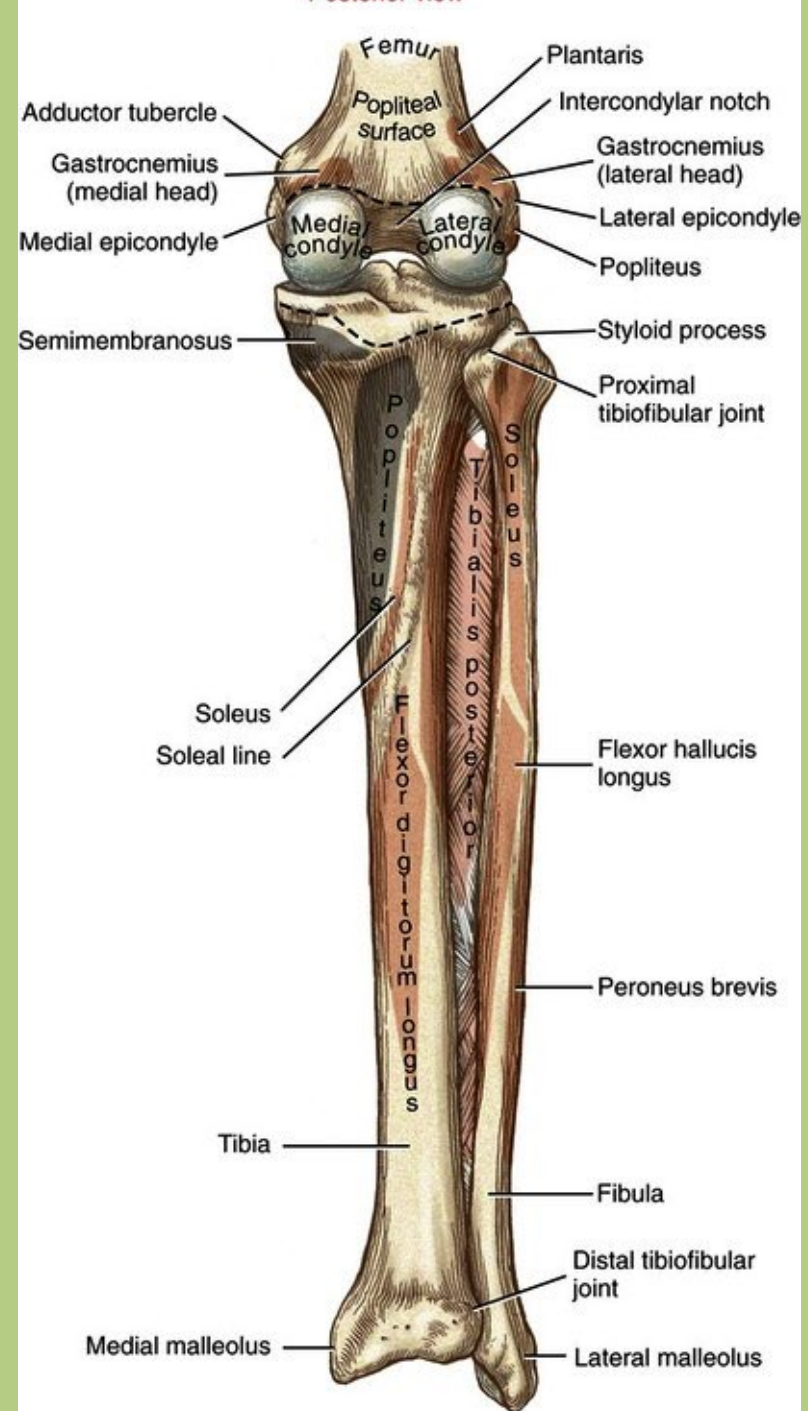




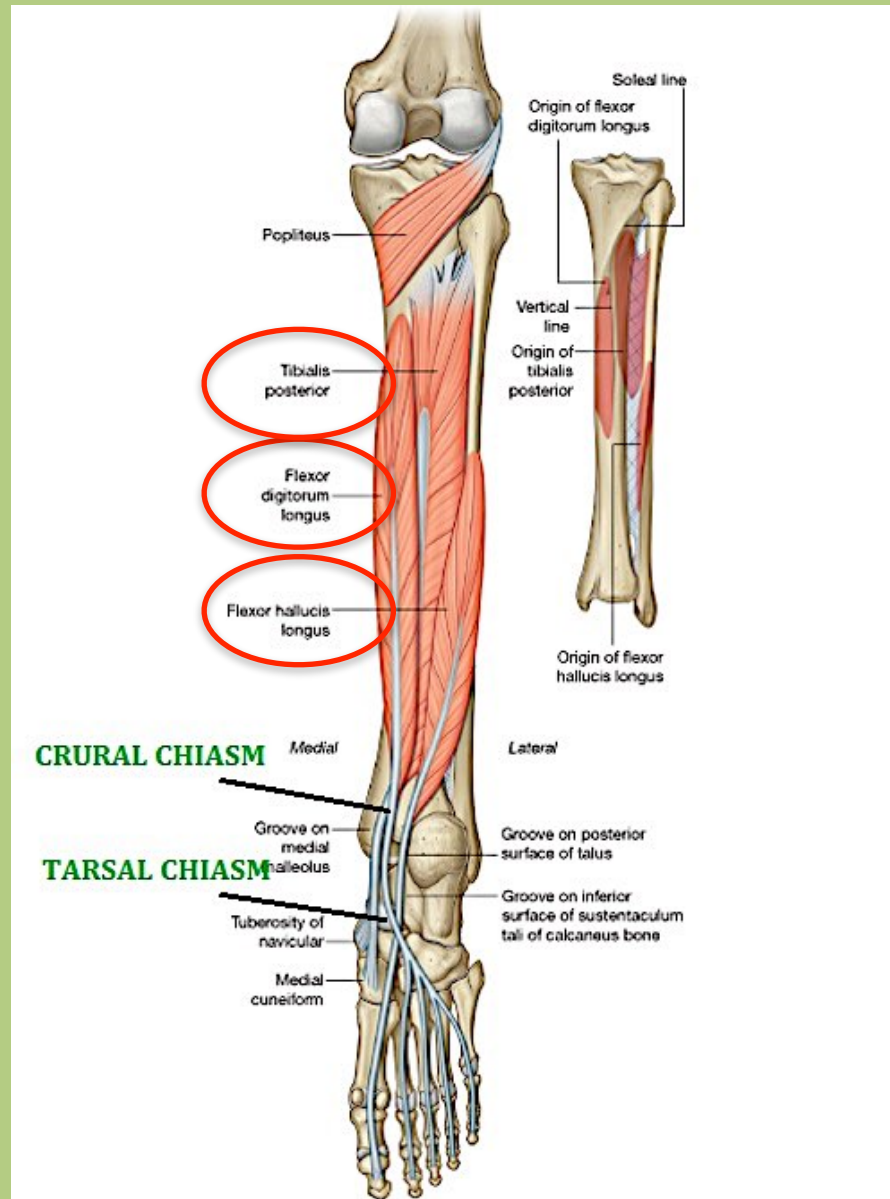
Anterior view



Posterior view

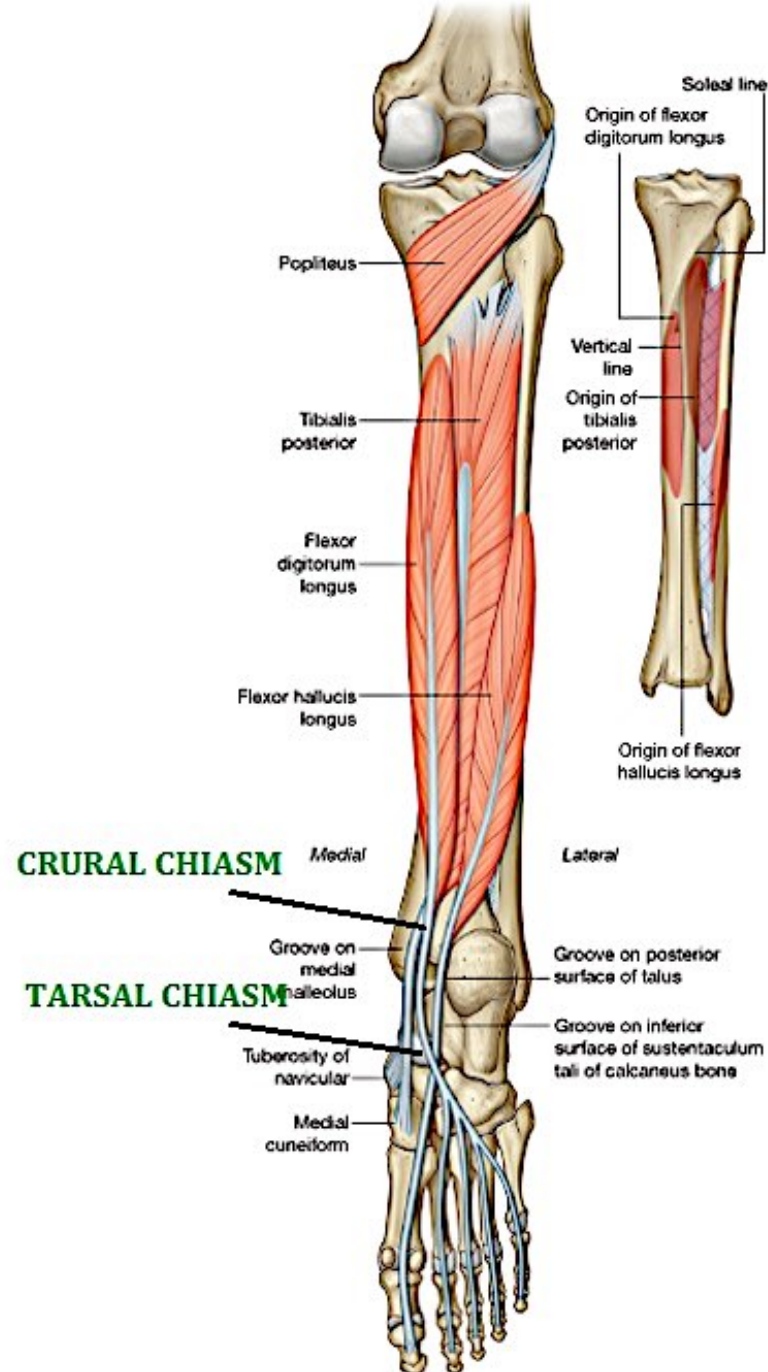


Deep flexors on the posterior side



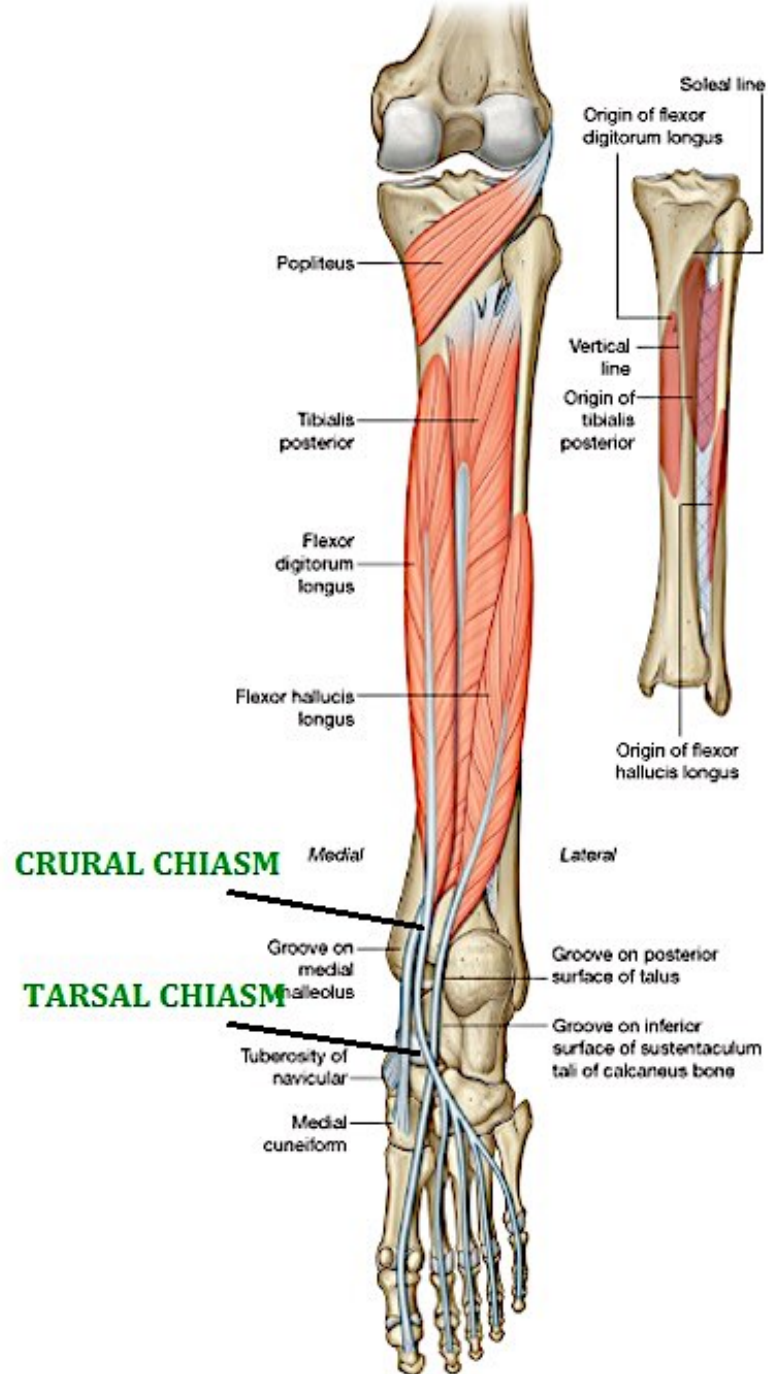
Tibialis posterior

- **Origin:** interosseous membrane, tibia and fibula
- **Insertion:** navicular
- **Action:** Talocrural joint: plantarflexion. Talocalcaneonavicular joint: supination.
- **Innervation:** tibial nerve



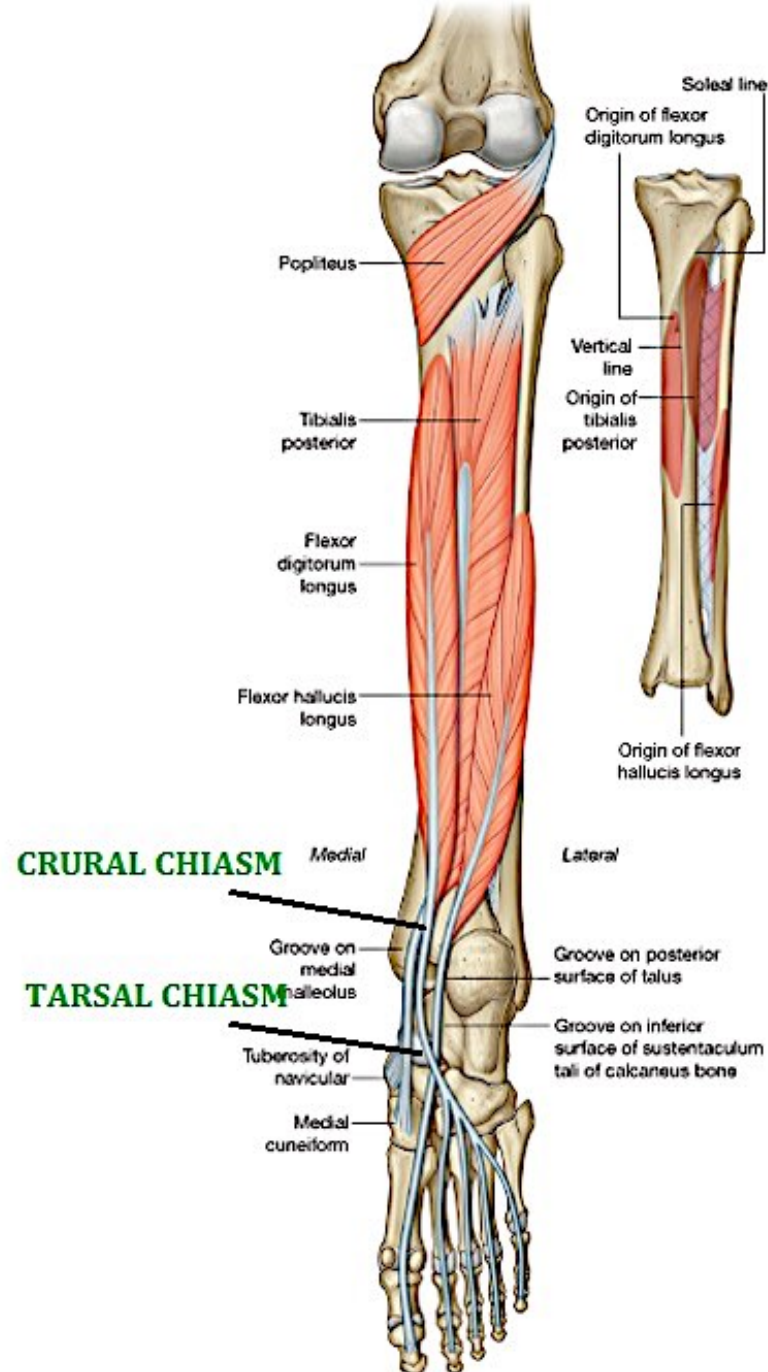
Flexor hallucis longus

- **Origin:** interosseous membrane and fibula
- **Insertion:** distal phalanx of the 1st toe
- **Action:** Talocrural joint: plantarflexion. Talocalcaneonavicular joint: supination. Flexion of the 1st toe.
- **Innervation:** tibial nerve

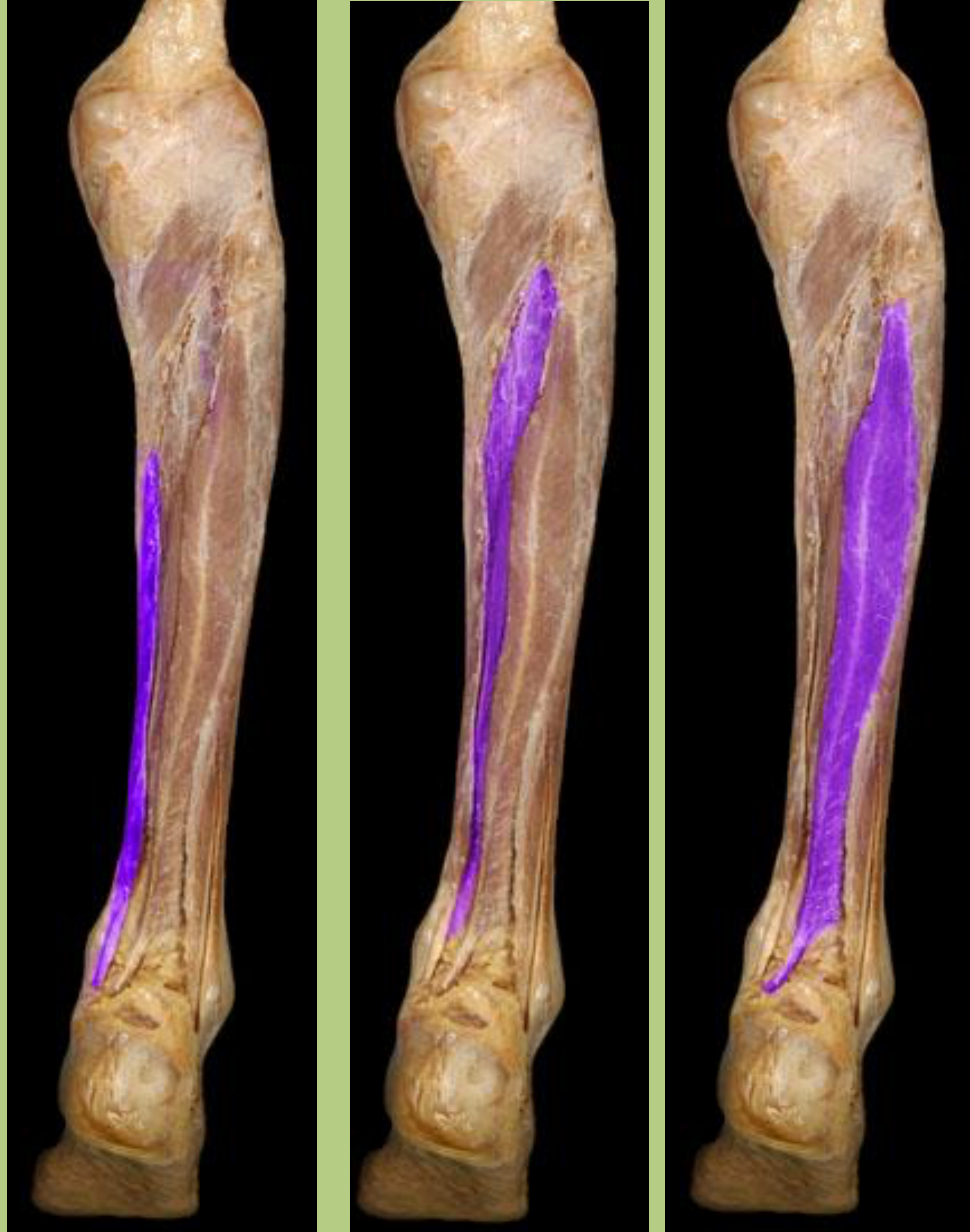


Flexor digitorum longus

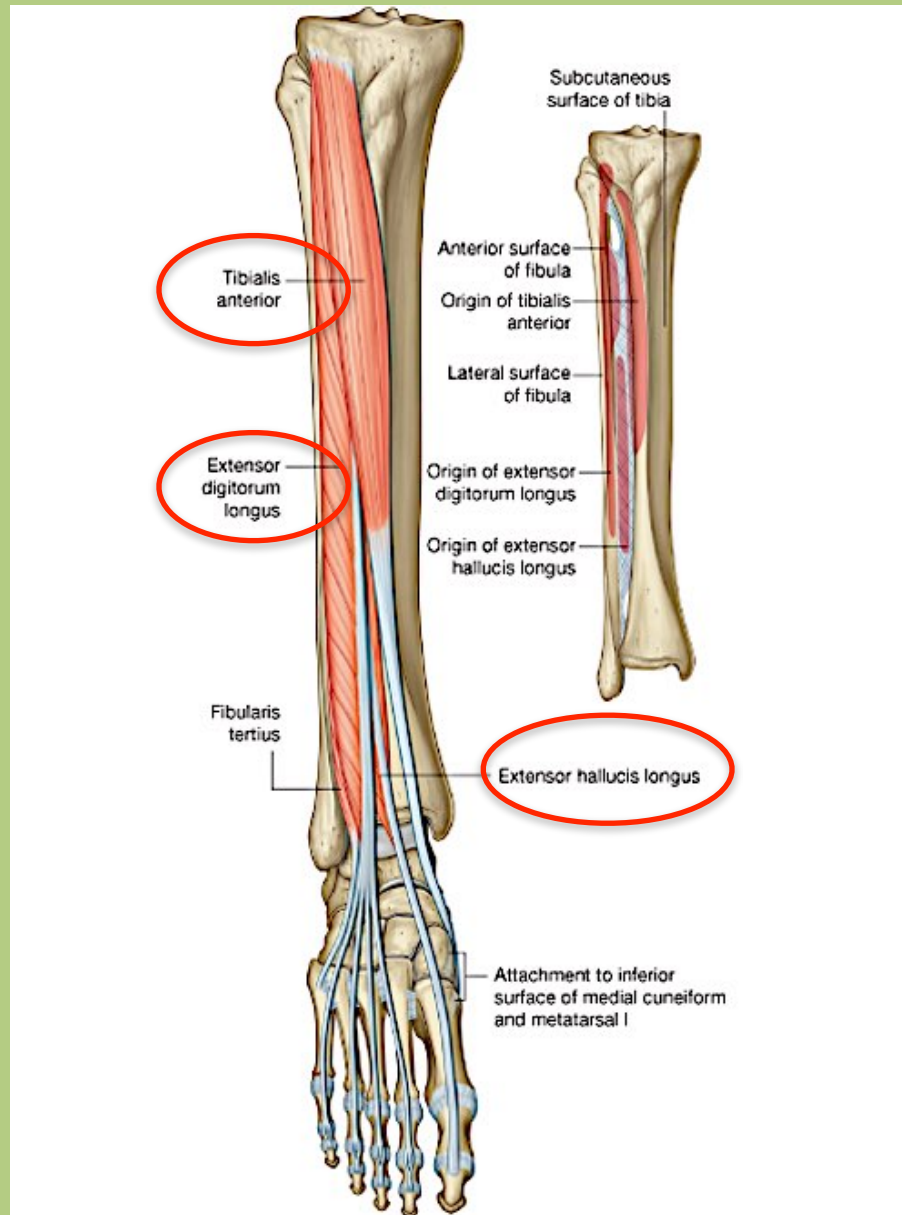
- **Origin:** tibia and fibula
- **Insertion:** distal phalanx of the 2nd-5th toes
- **Action:** Talocrural joint: plantarflexion. Talocalcaneonavicular joint: supination. Flexion of the 2nd-5th toes.
- **Innervation:** tibial nerve



Deep flexors

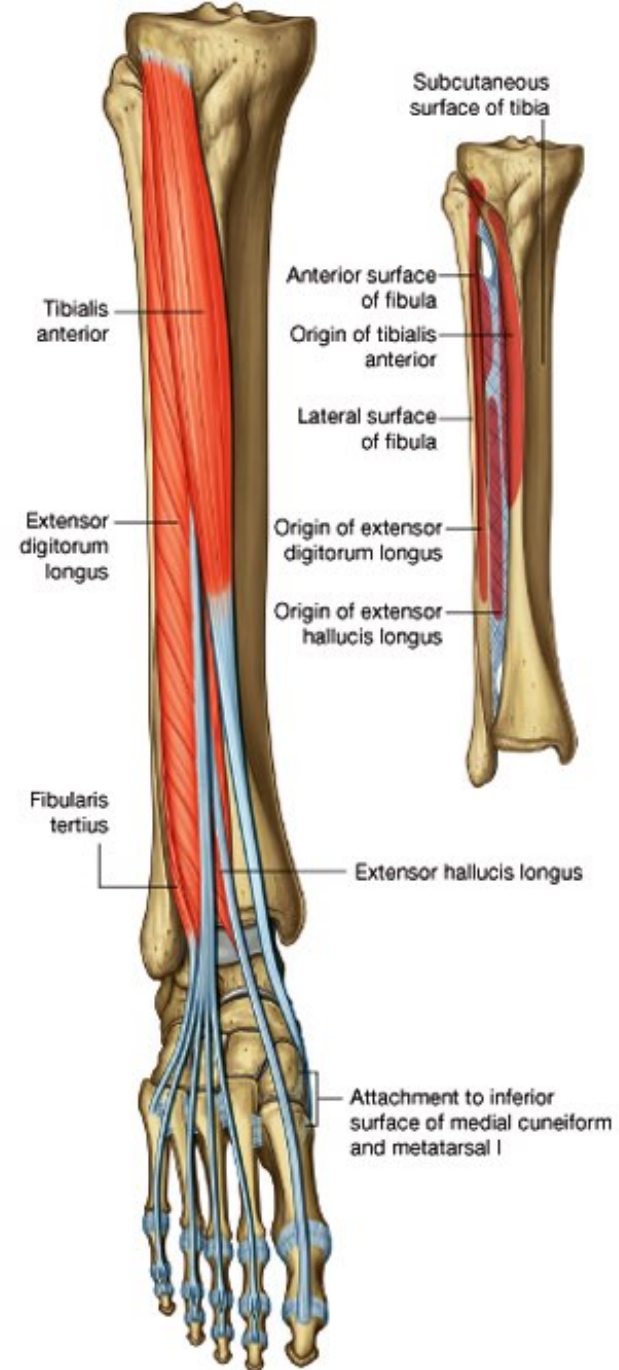


Extensors on the anterior side



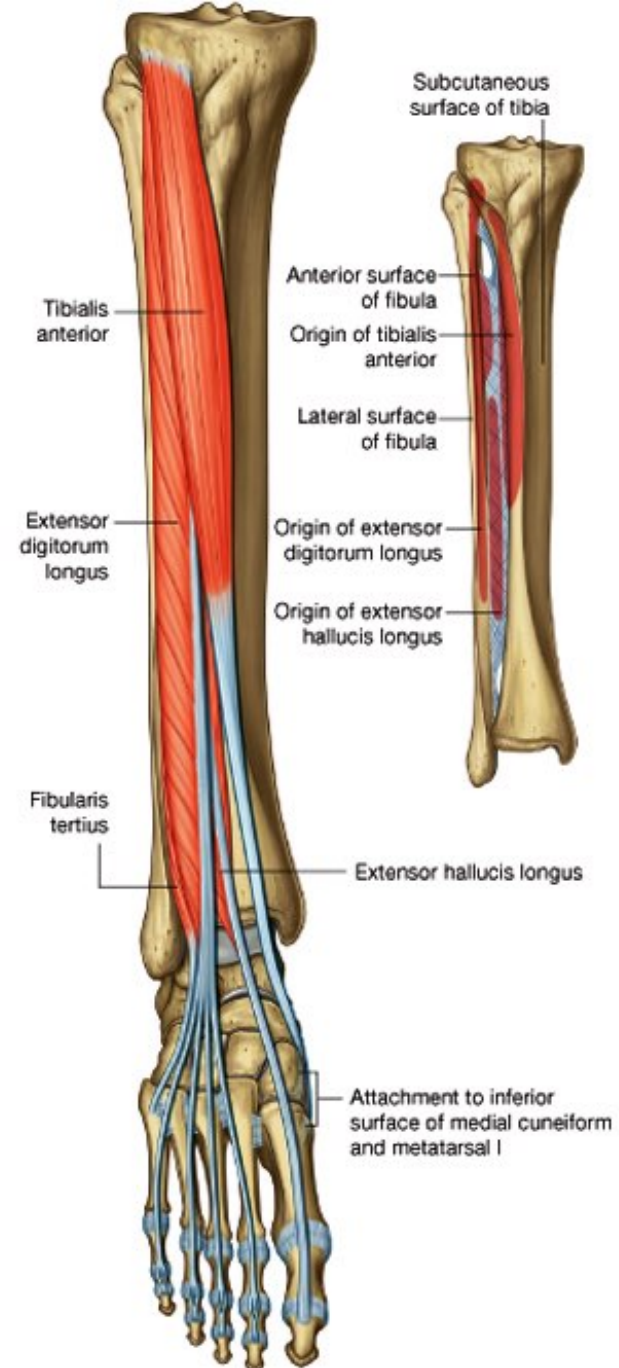
Tibialis anterior

- **Origin:** interosseous membrane and tibia
- **Insertion:** 1st metatarsal and medial cuneiform
- **Action:** Talocrural joint: dorsiflexion. Talocalcaneonavicular joint: supination.
- **Innervation:** deep fibular nerve



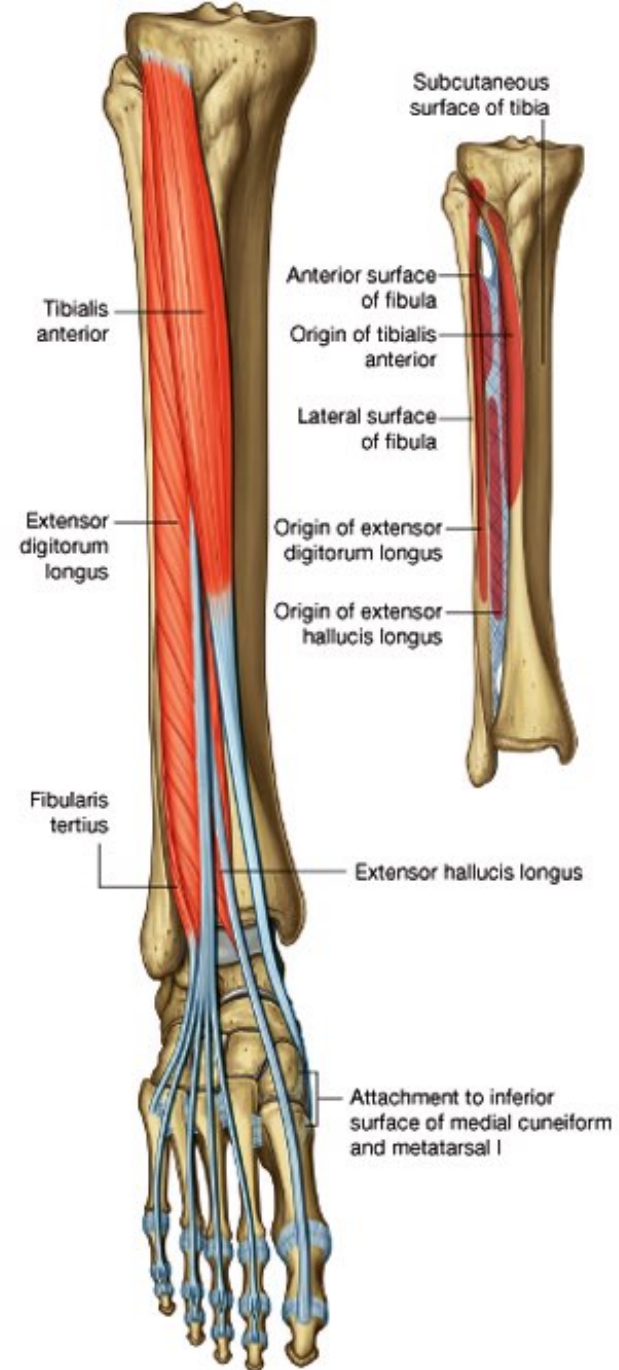
Extensor hallucis longus

- **Origin:** interosseous membrane and tibia
- **Insertion:** distal phalanx of the 1st toe
- **Action:** Talocrural joint: dorsiflexion. Talocalcaneonavicular joint: pronation. Extension of the hallux.
- **Innervation:** deep fibular nerve



Extensor digitorum longus

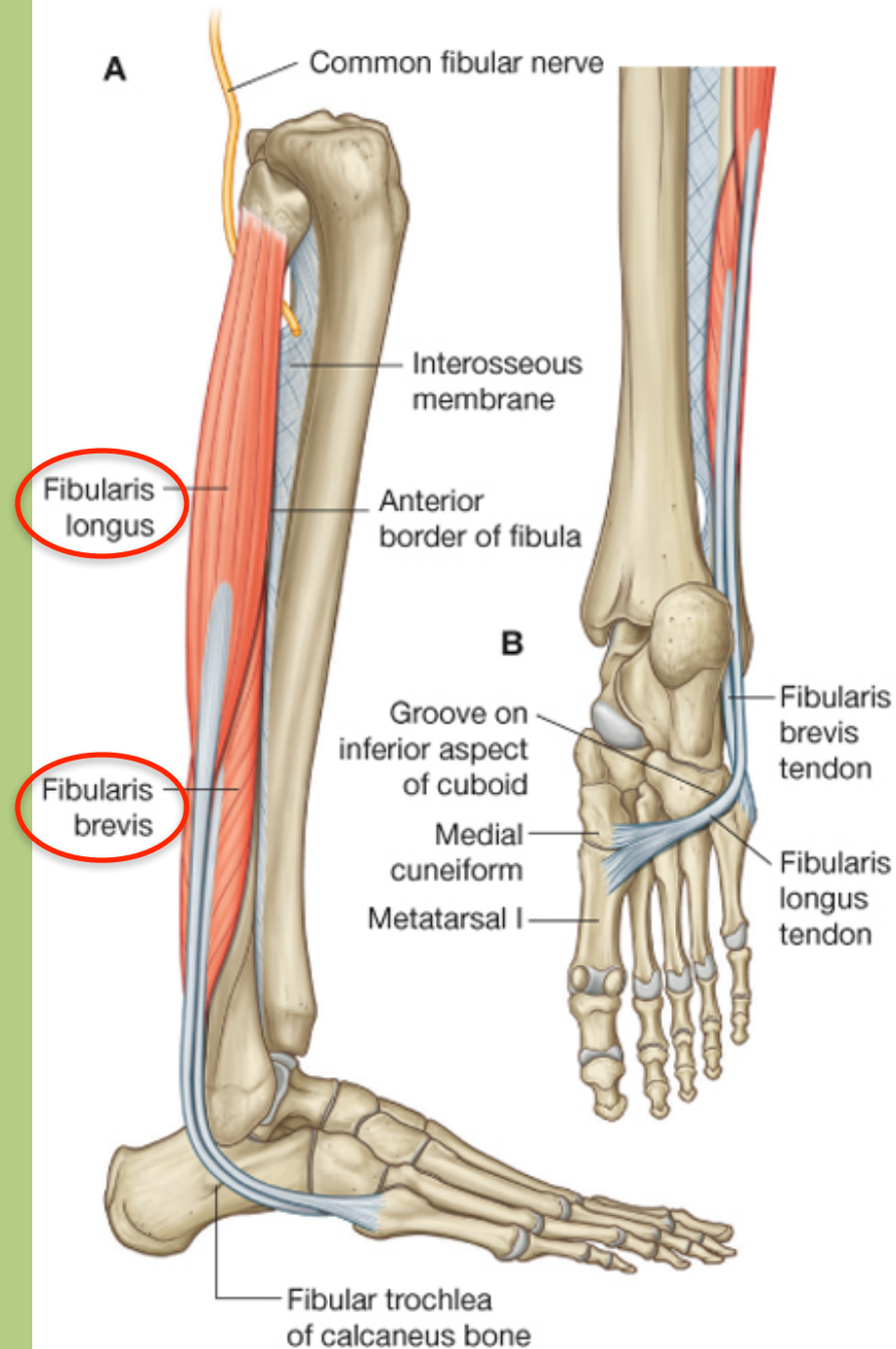
- **Origin:** interosseous membrane, tibia and fibula
- **Insertion:** distal phalanx of the 2nd-5th toes
- **Action:** Talocrural joint: dorsiflexion. Talocalcaneonavicular joint: pronation. Extension of the 2nd-5th toes.
- **Innervation:** deep fibular nerve



Extensors

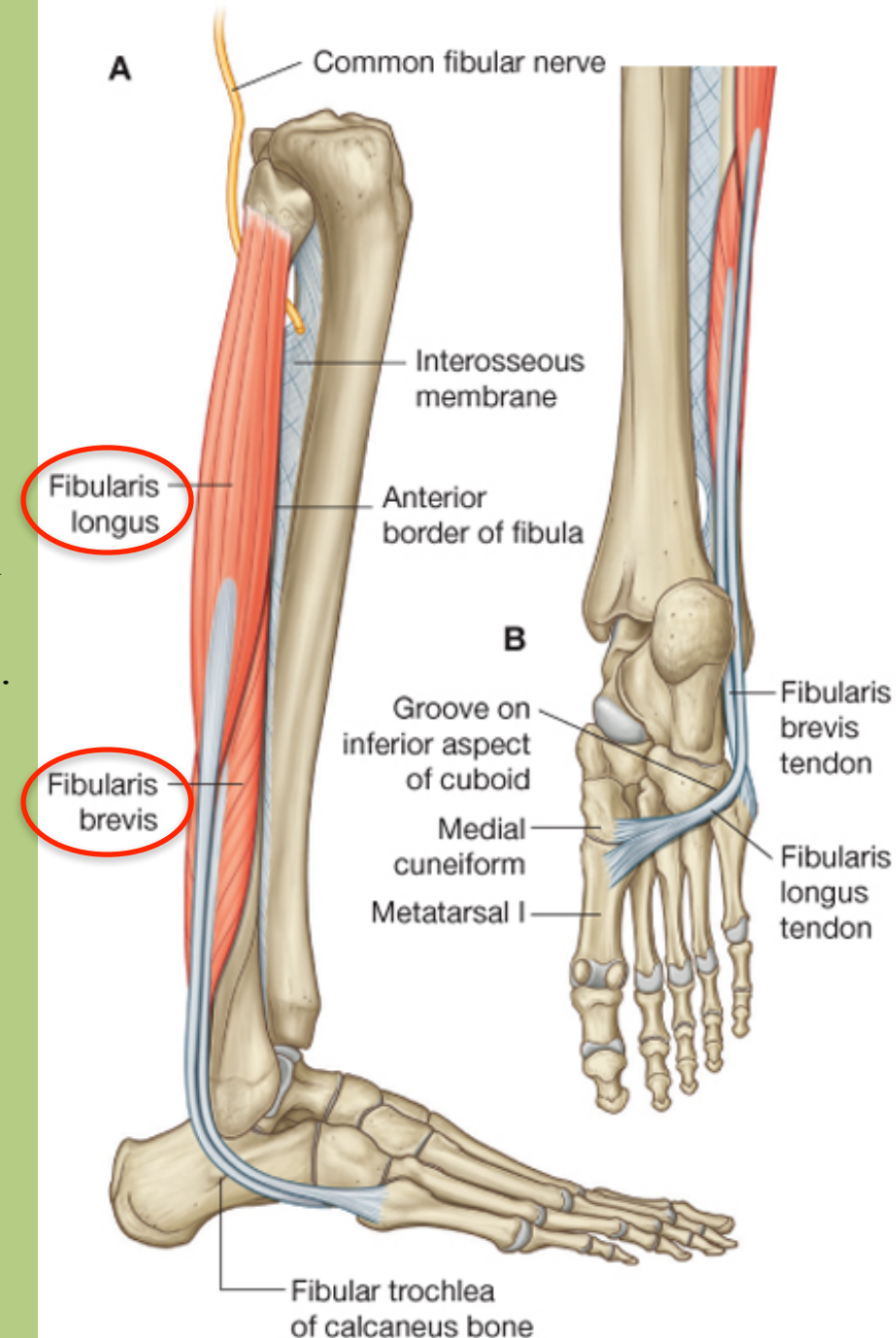


Pronators



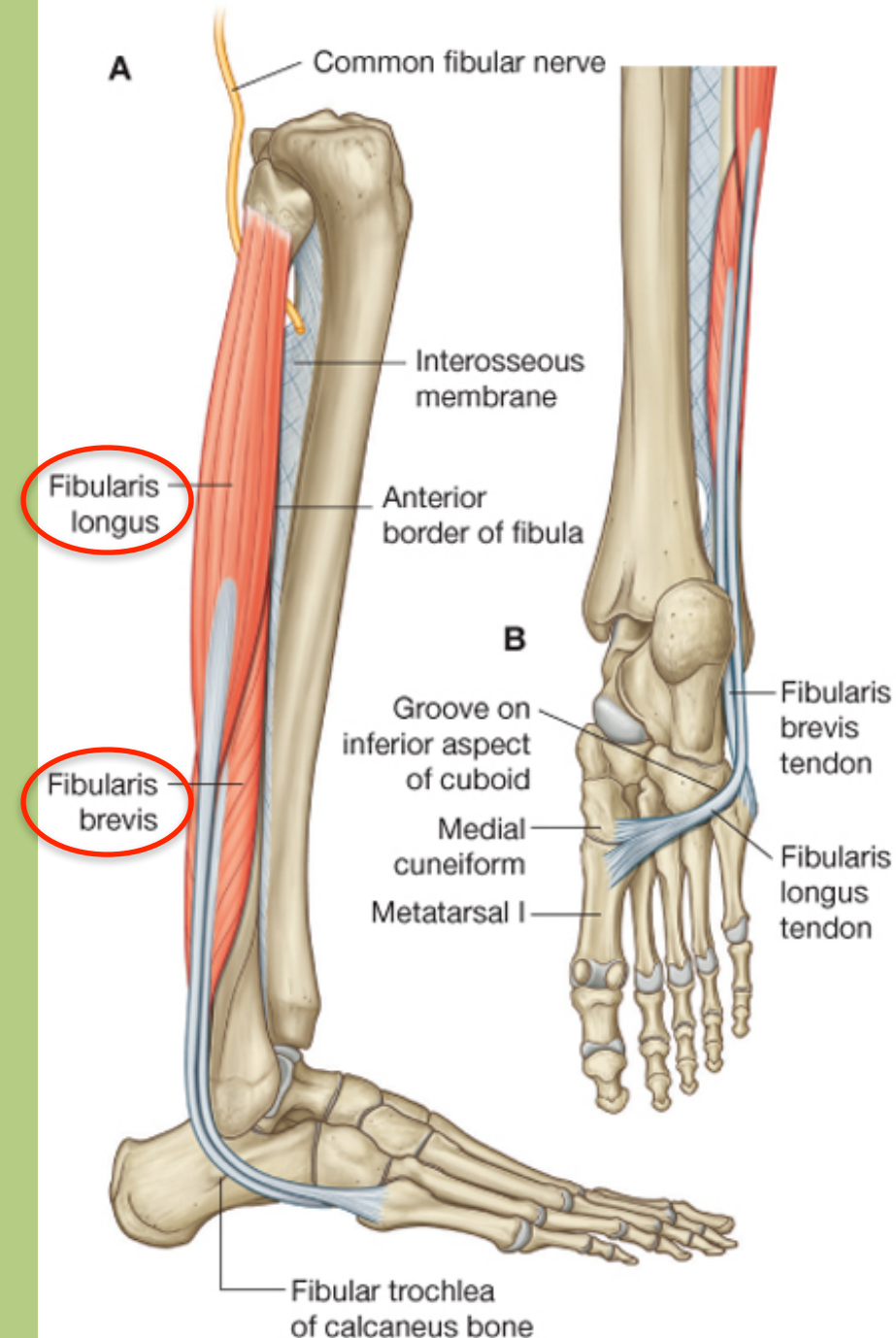
Fibularis longus

- **Origin:** fibula and head of fibula
- **Insertion:** 1st metatarsal and medial cuneiform
- **Action:** Talocrural joint: plantarflexion.
Talocalcaneonavicular joint: pronation.
- **Innervation:** superficial fibular nerve



Fibularis brevis

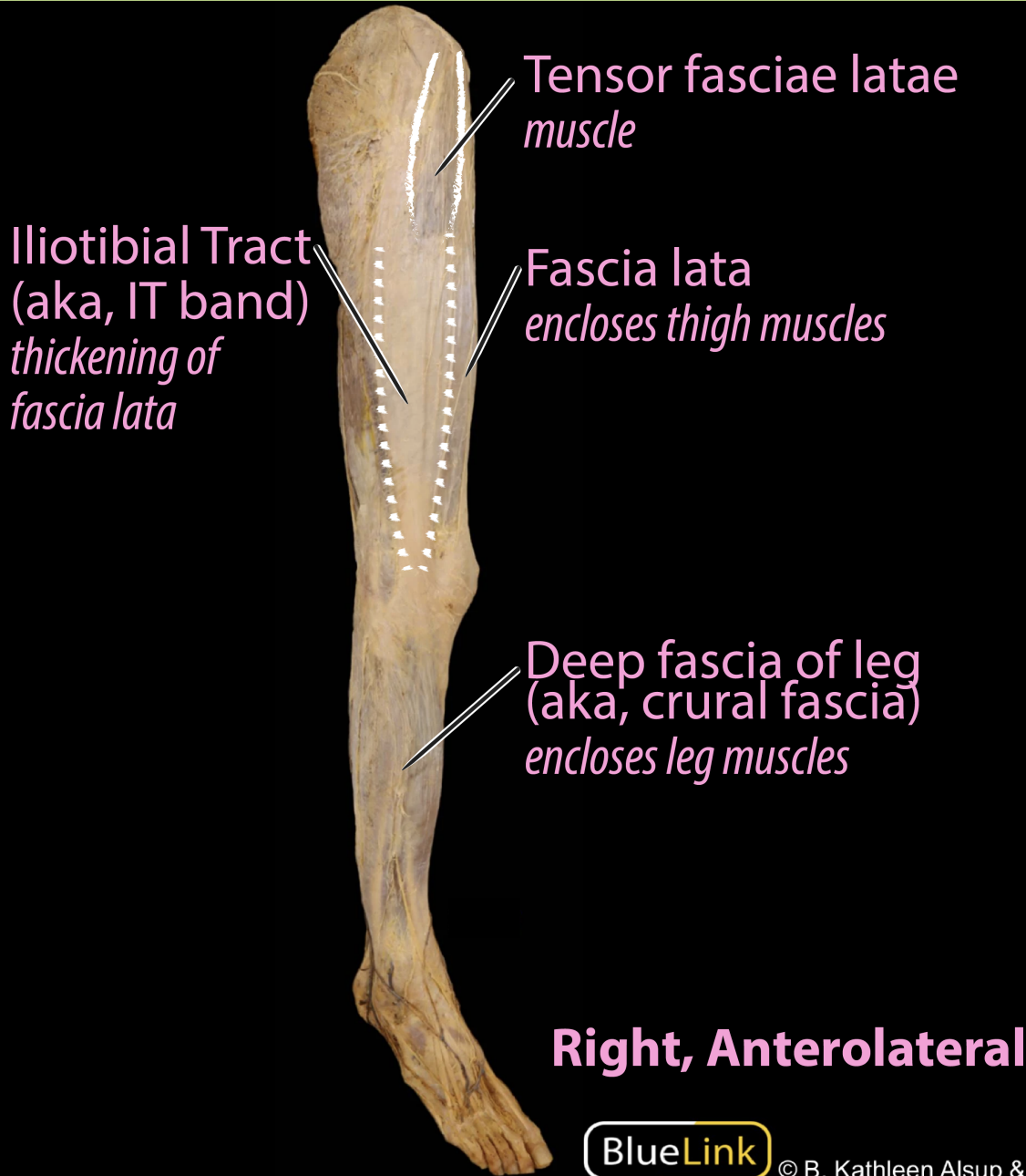
- **Origin:** distal half of the fibula
- **Insertion:** 5th metatarsal
- **Action:** Talocrural joint: plantarflexion.
Talocalcaneonavicular joint: pronation.
- **Innervation:** superficial fibular nerve



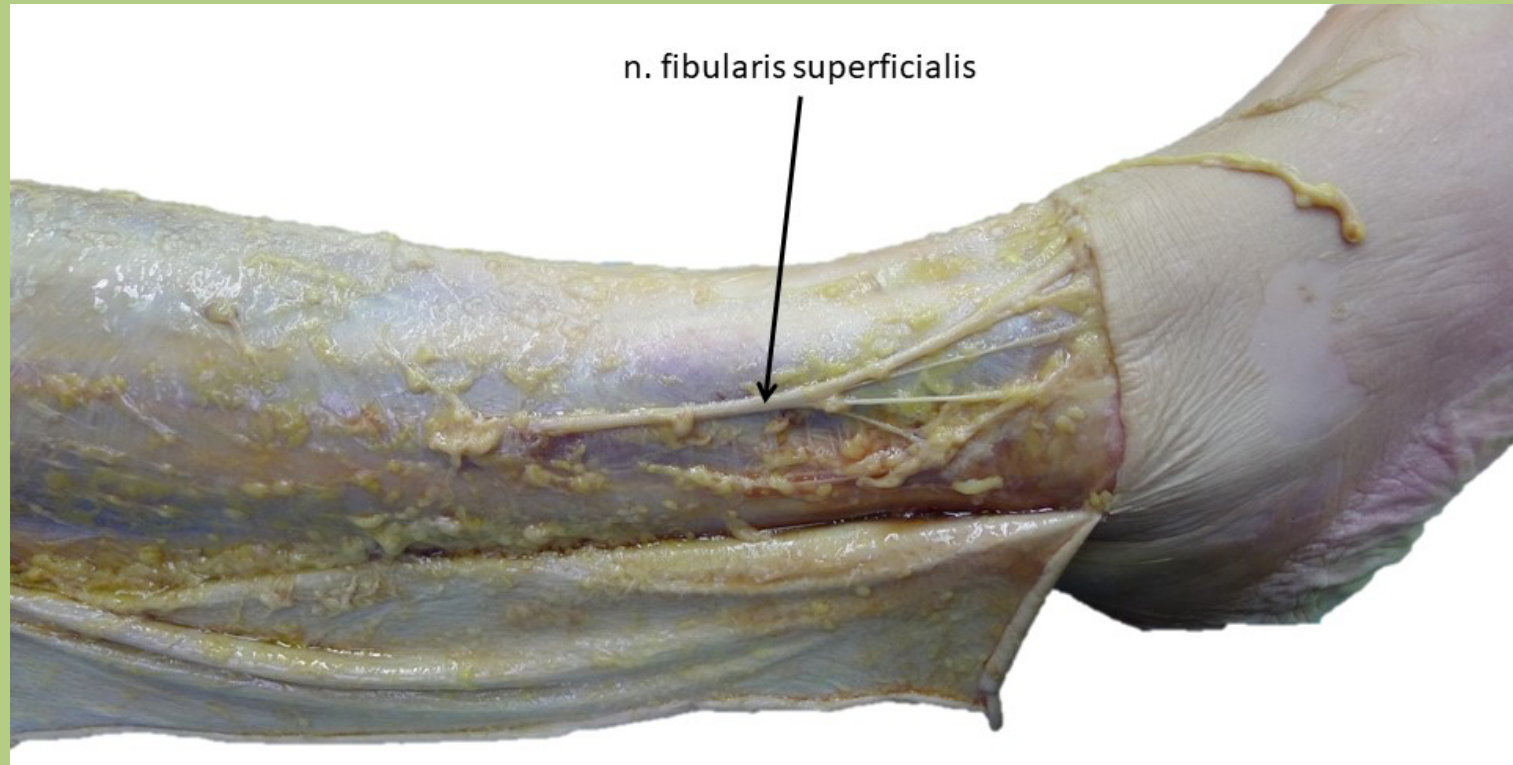
Pronators



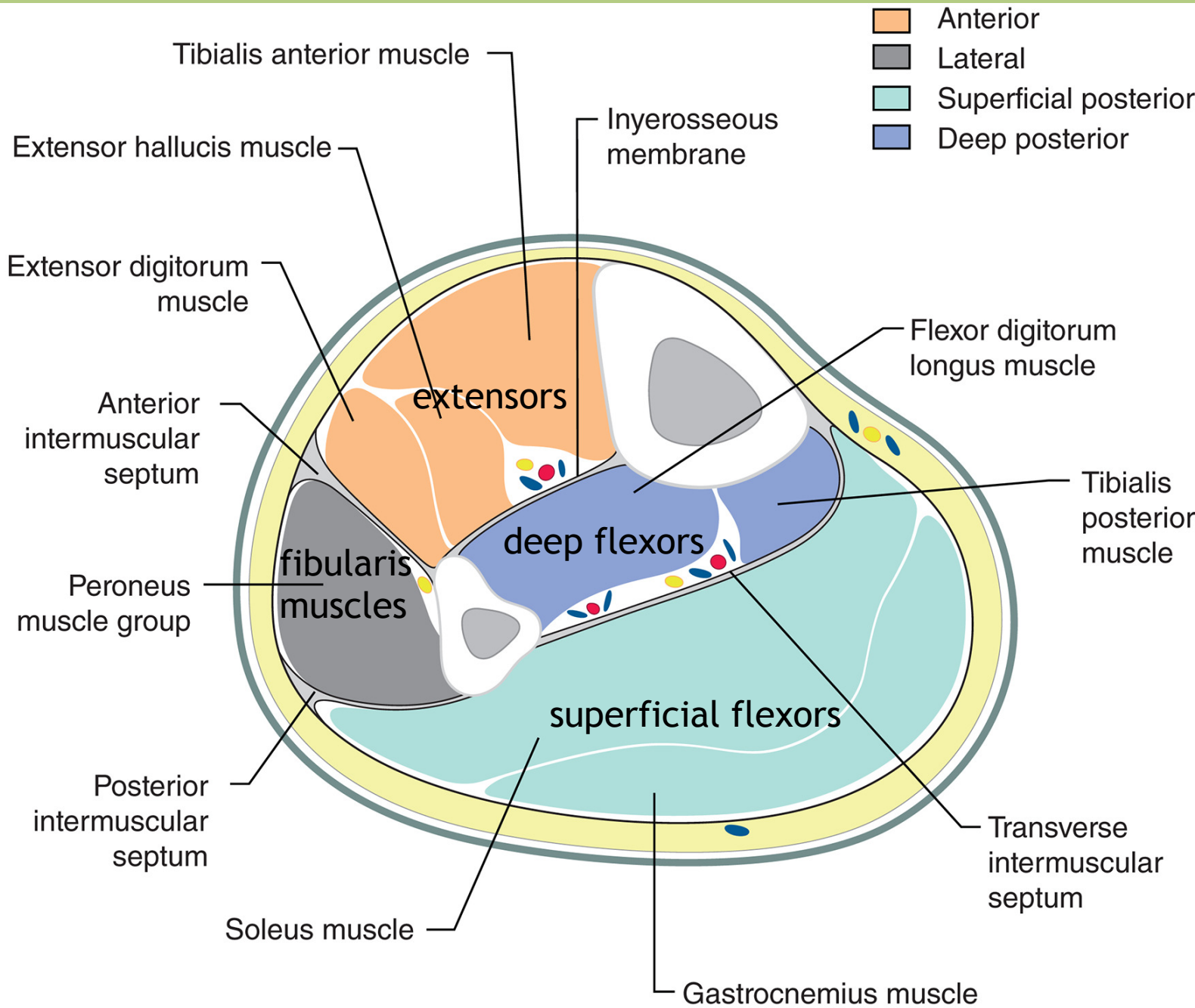
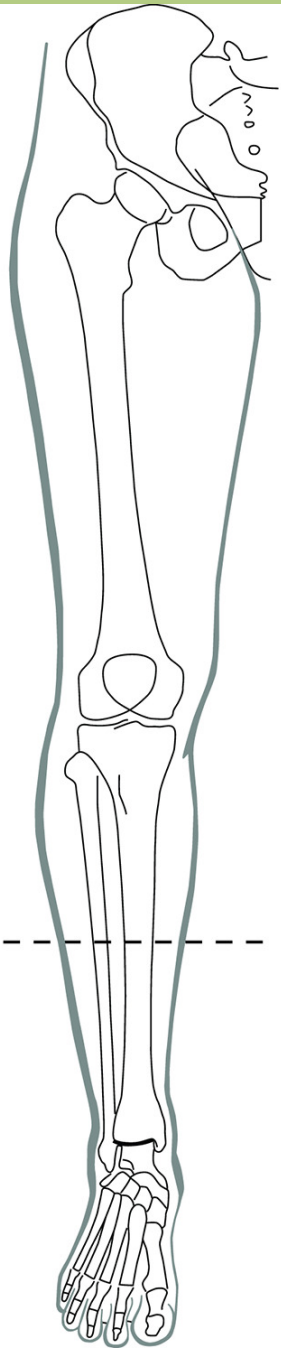
Fasciae of the lower limb



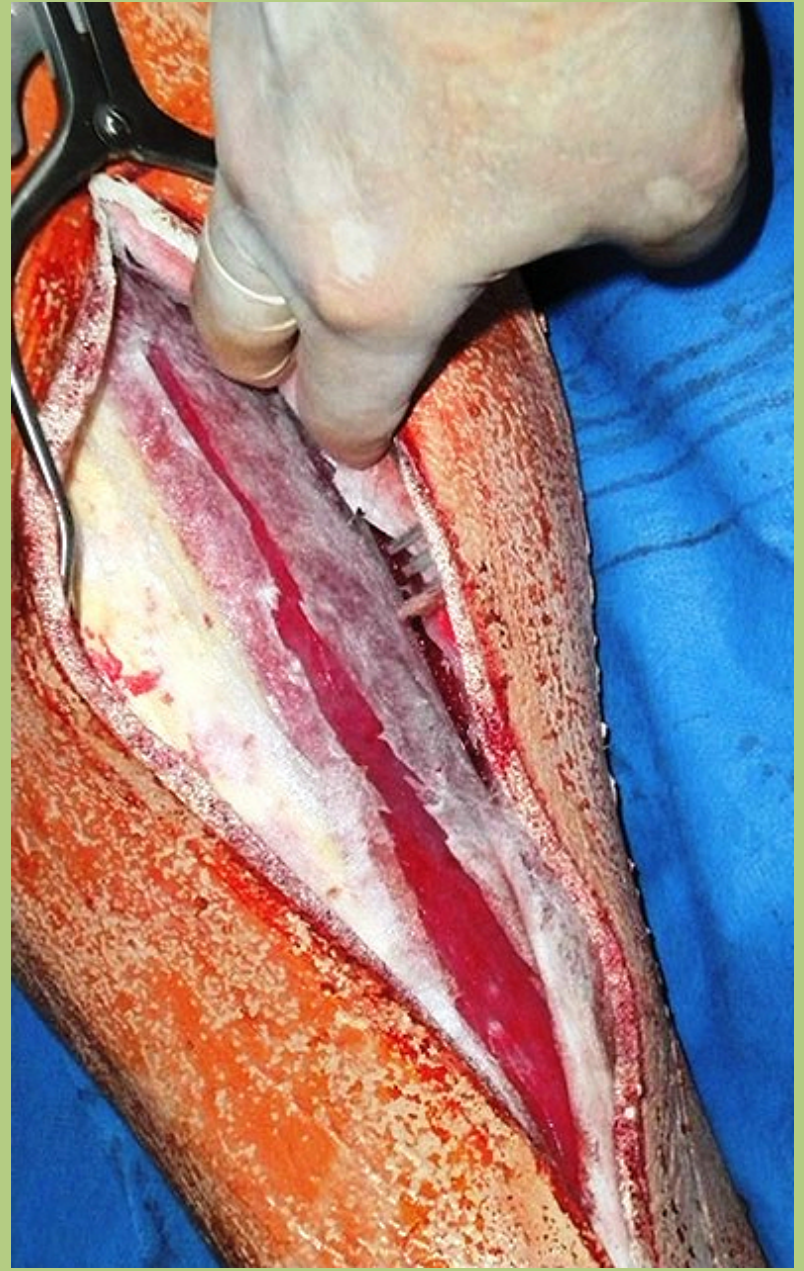
Crural fascia



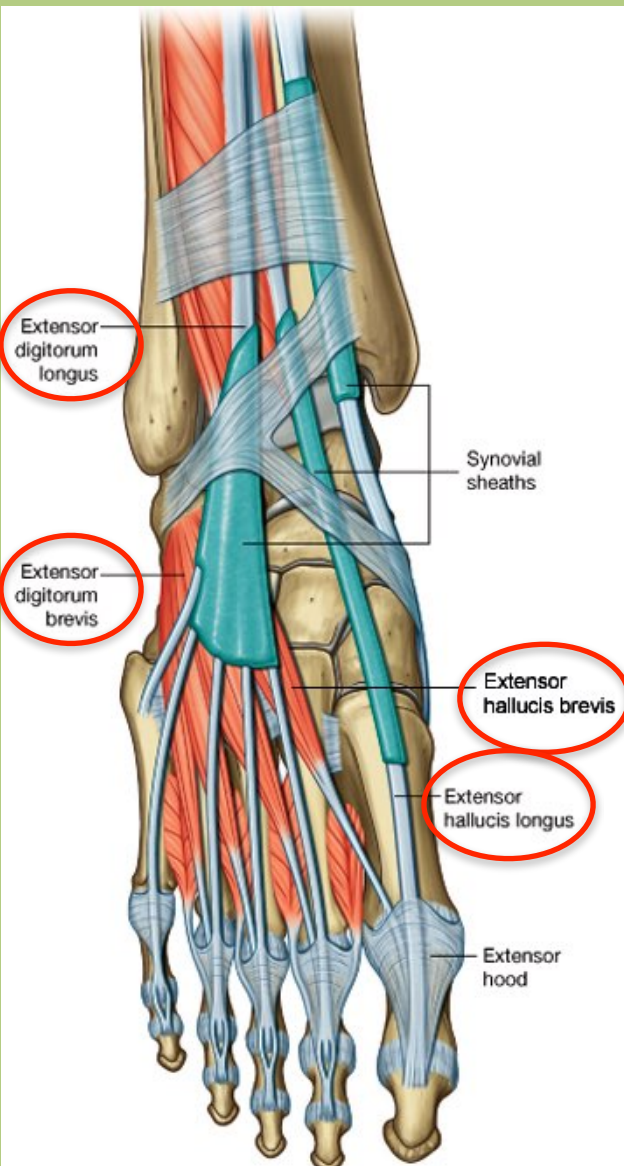
Compartments of the crural fascia



Compartment syndrome and fasciotomy

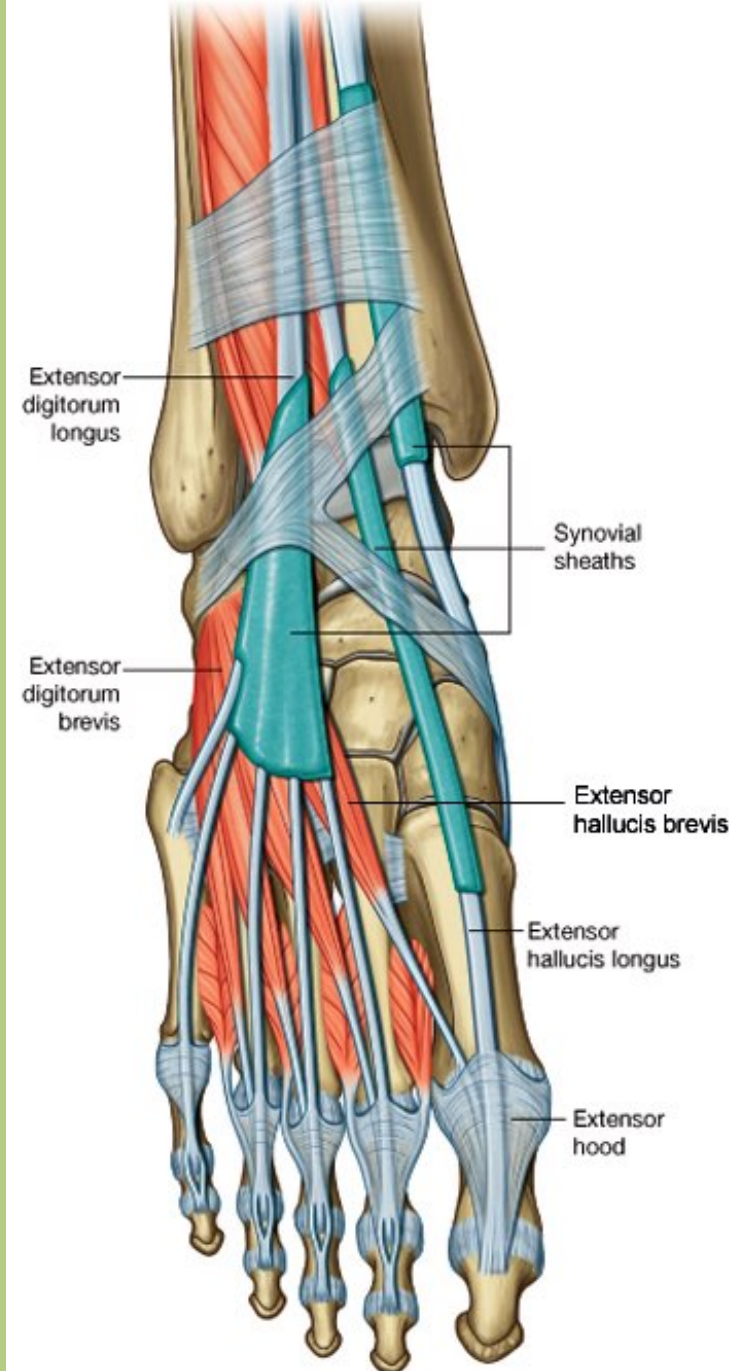


Foot muscles - dorsal side extensors



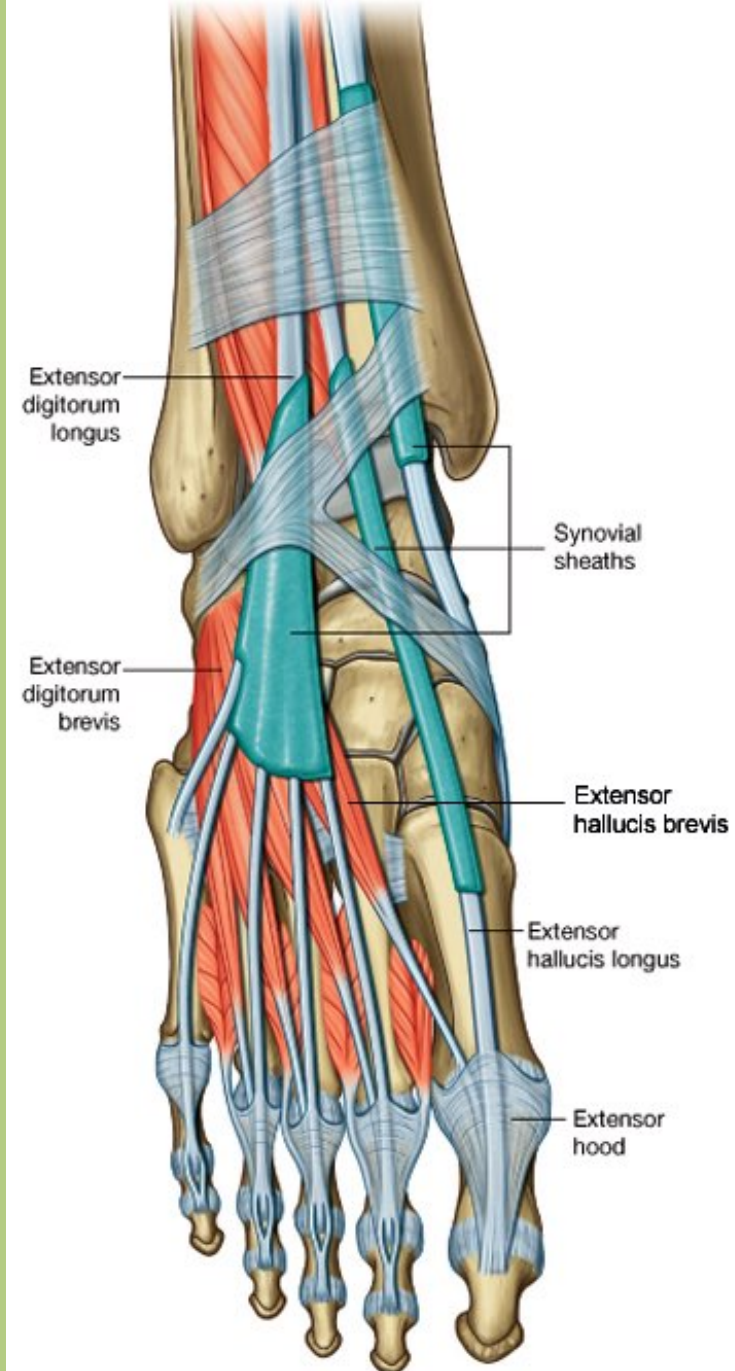
Extensor digitorum brevis

- **Origin:** calcaneus
- **Insertion:** middle phalanx of the 2nd-4th toes
- **Action:** Extension of the 2nd-4th toes.
- **Innervation:** deep fibular nerve

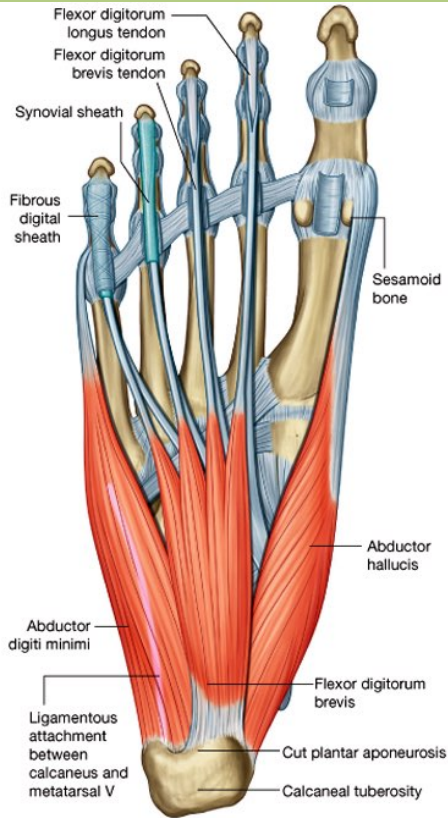


Extensor hallucis brevis

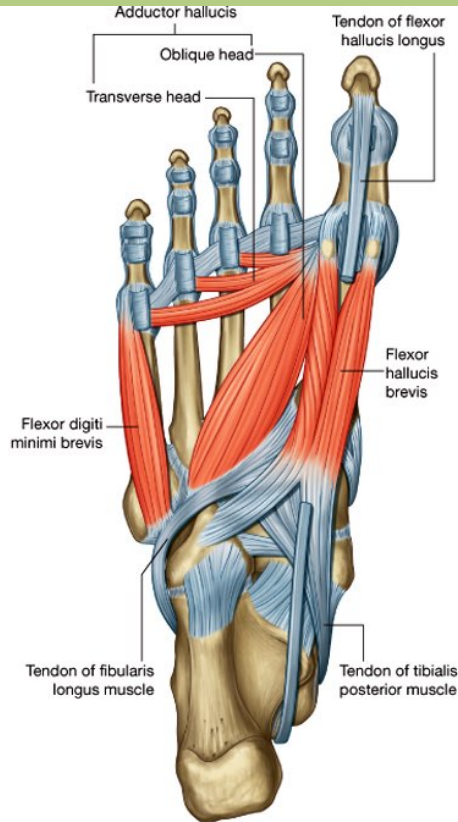
- **Origin:** calcaneus
- **Insertion:** proximal phalanx of the 1st toe
- **Action:** Extension of the 1st toe.
- **Innervation:** deep fibular nerve



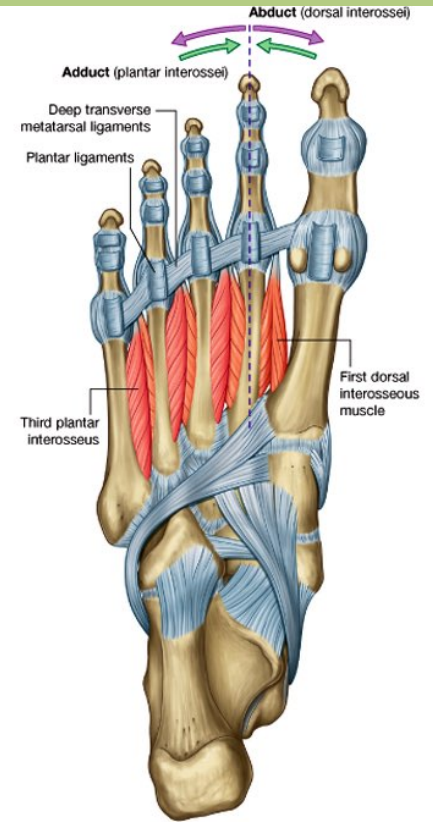
Foot muscles



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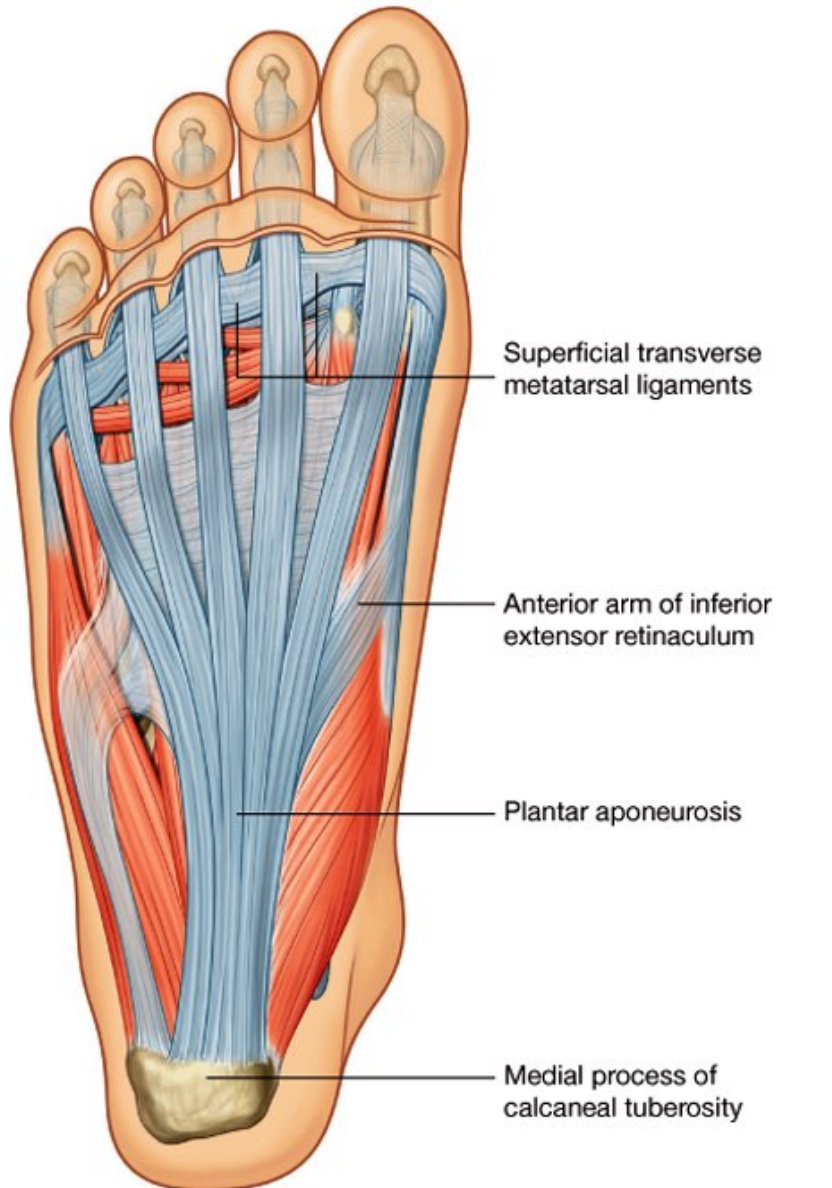


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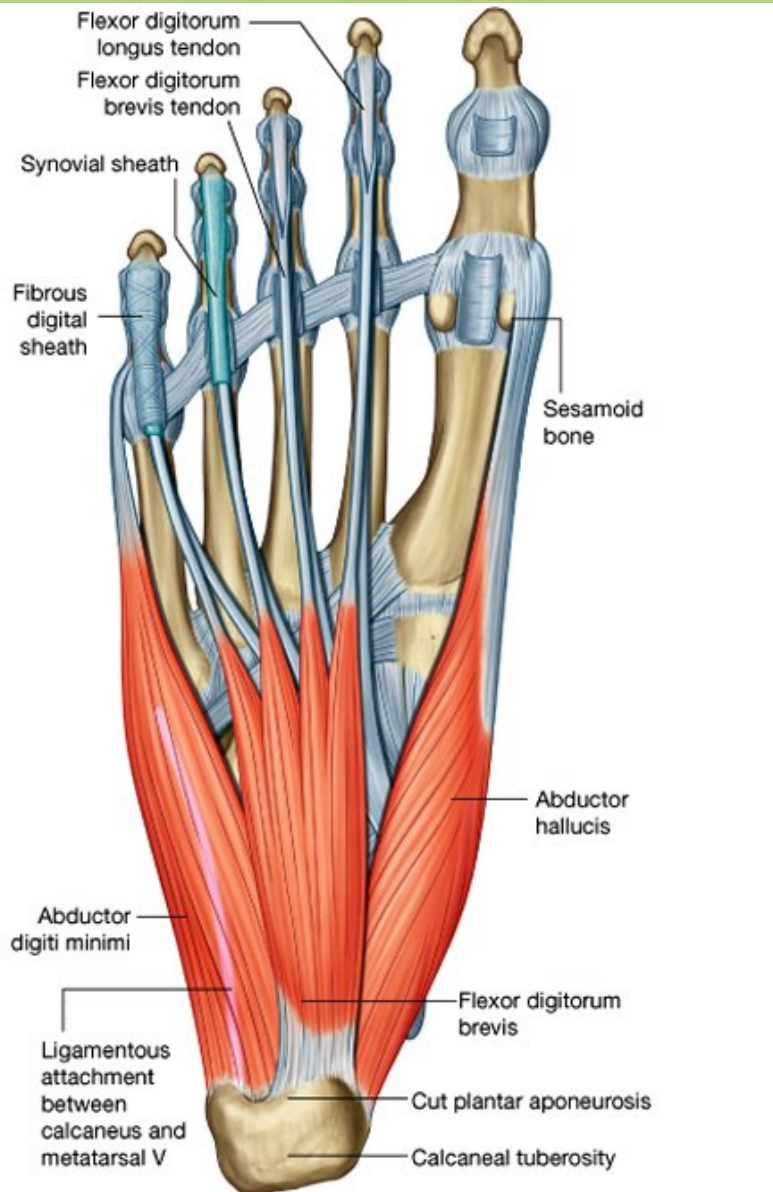


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Foot muscles - plantar side



Foot muscles - plantar side

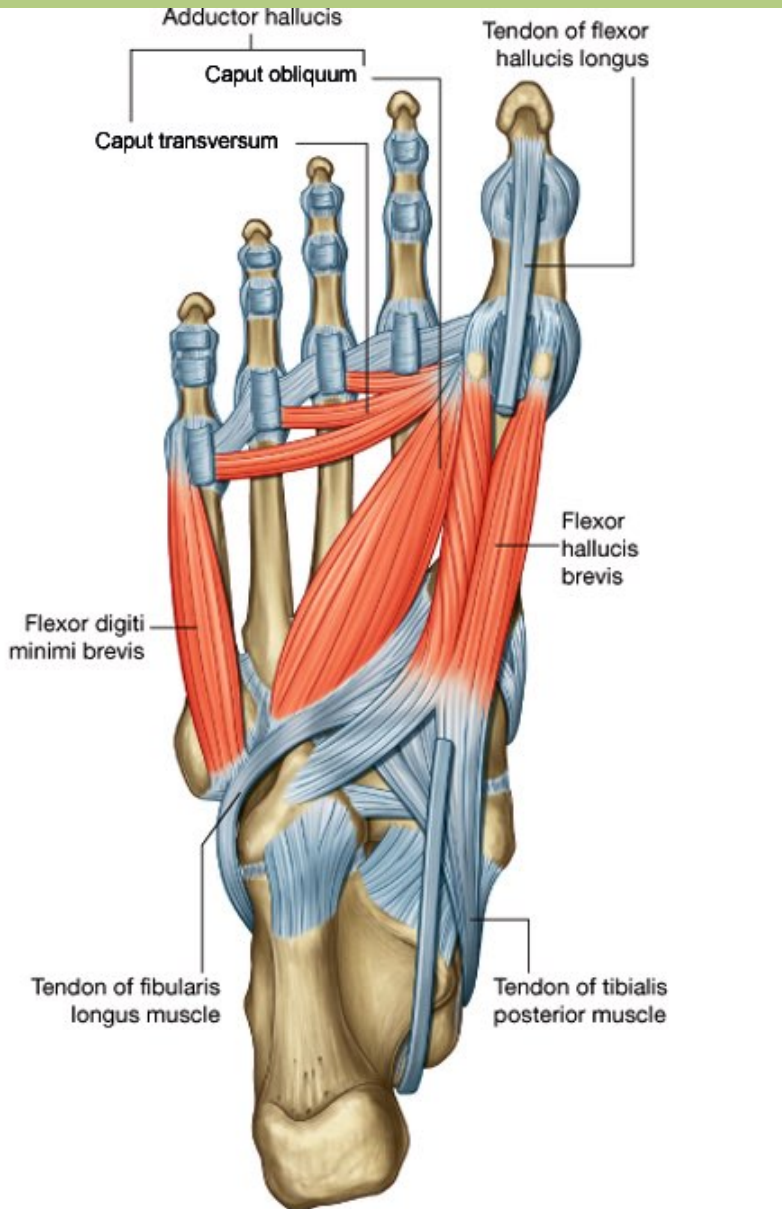


A: Medial plantar eminence:
abductor, flexor and adductor muscles.

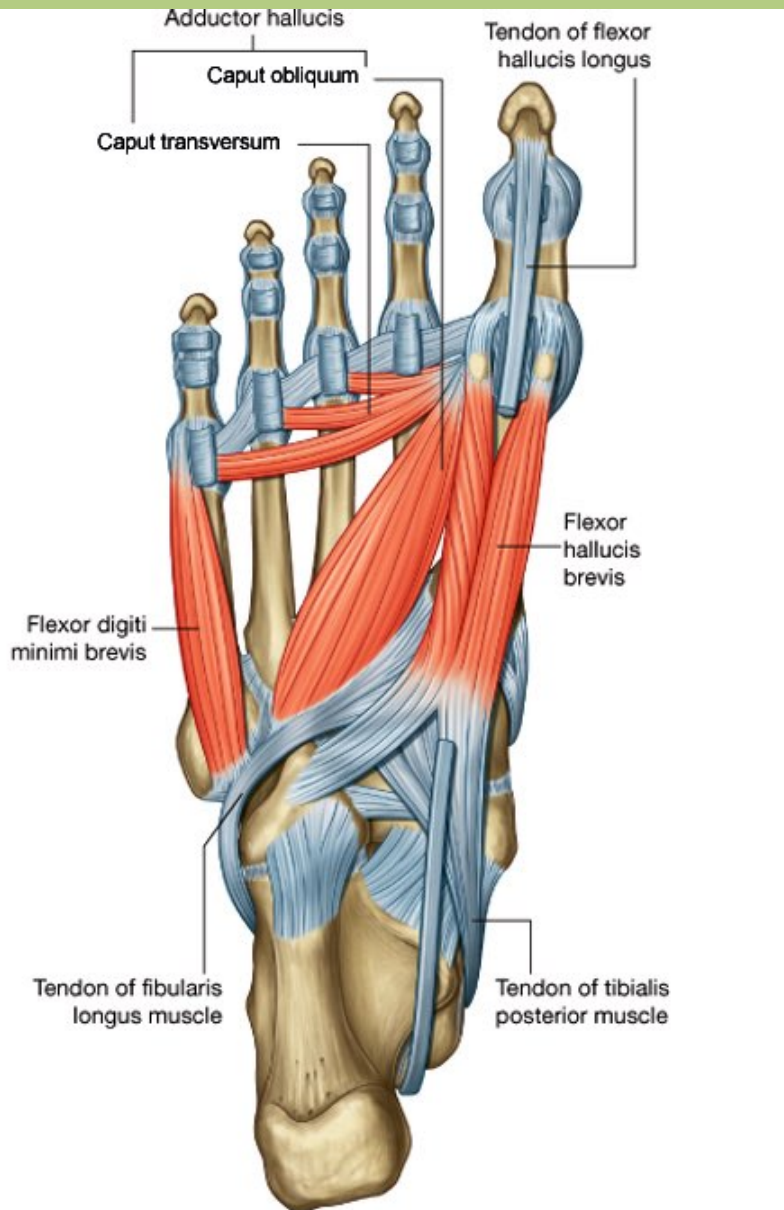
B: Lateral plantar eminence: abductor, flexor and opponens muscles.



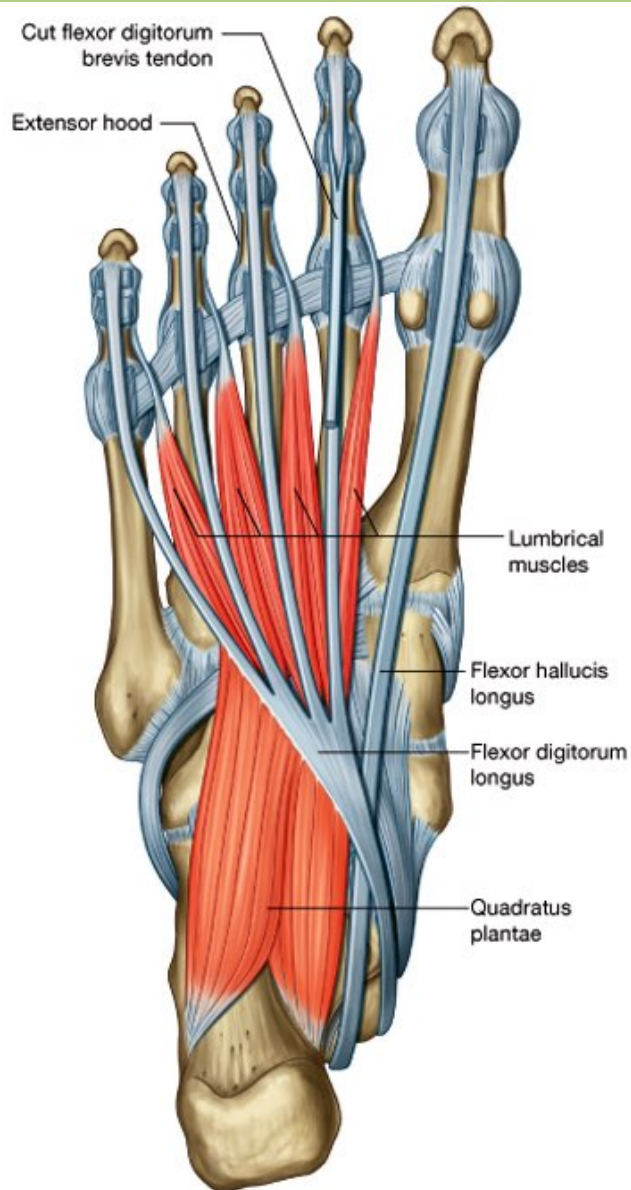
Foot muscles - plantar side



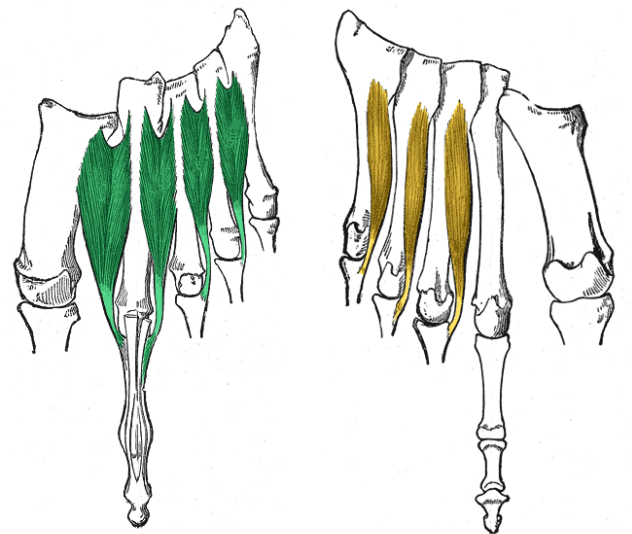
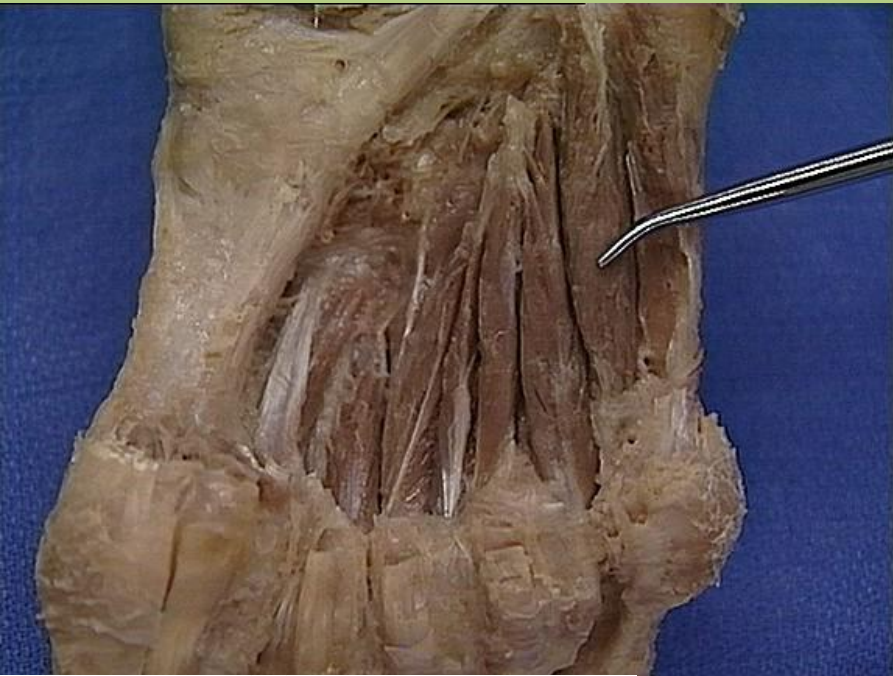
Foot muscles - plantar side



Foot muscles - plantar side



Foot muscles - interossei

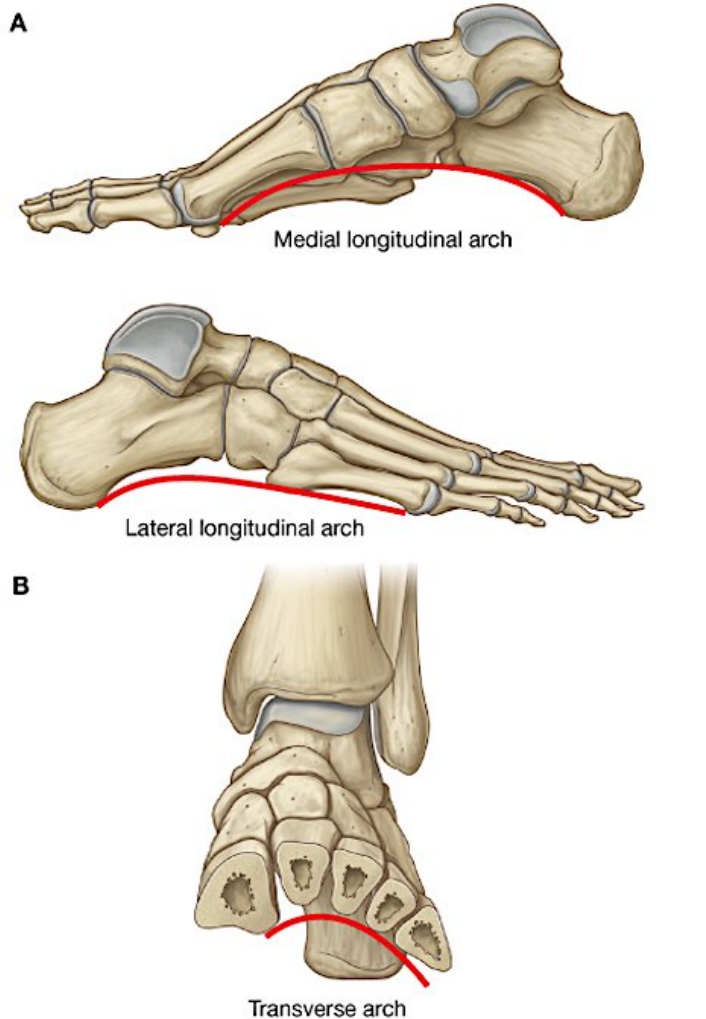


a) Dorsal Interossei

b) Plantar Interossei

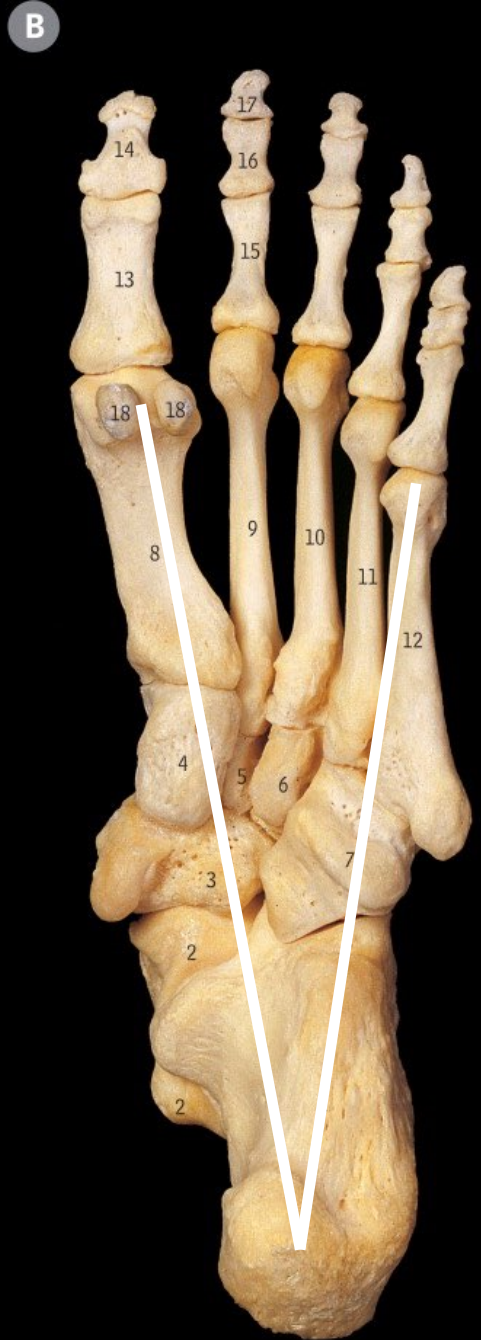


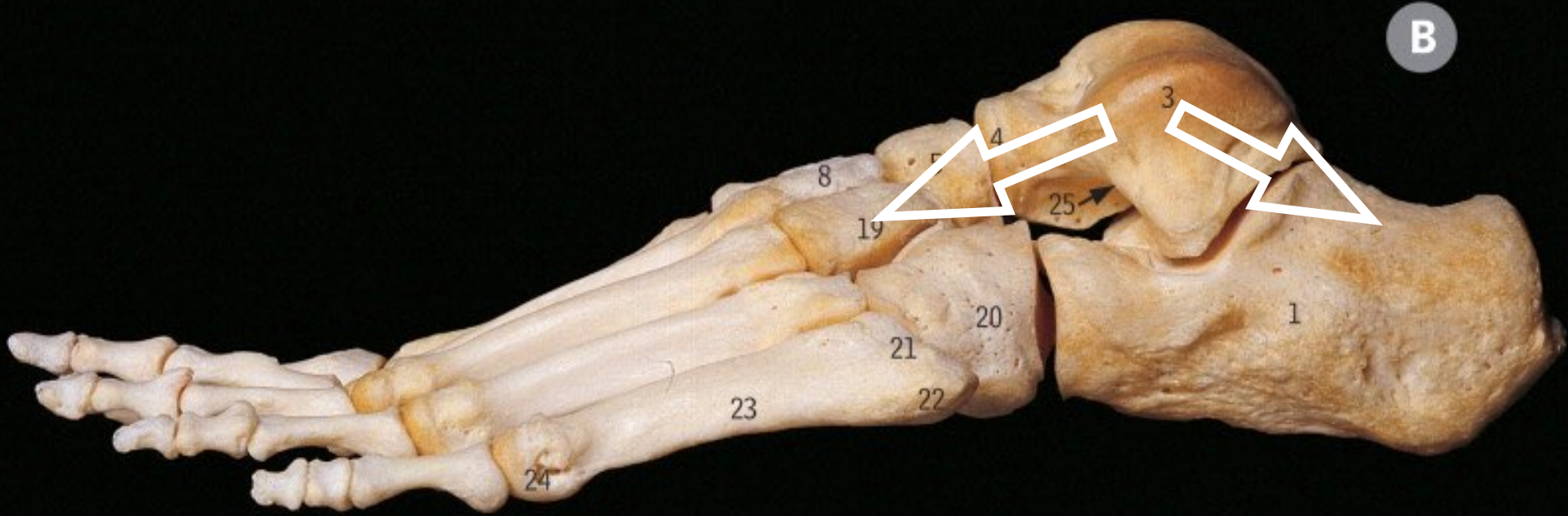
Plantar architecture



The weight of the body is transmitted to the talus from the tibia. Then it is transmitted posteriorly to the **calcaneal tubercle** and anteriorly to the **heads of the 1st-5th metatarsals**.

The cuneiforms and the bases of the metatarsals together form the **transverse arch**. Its uppermost point is the intermediate cuneiform.

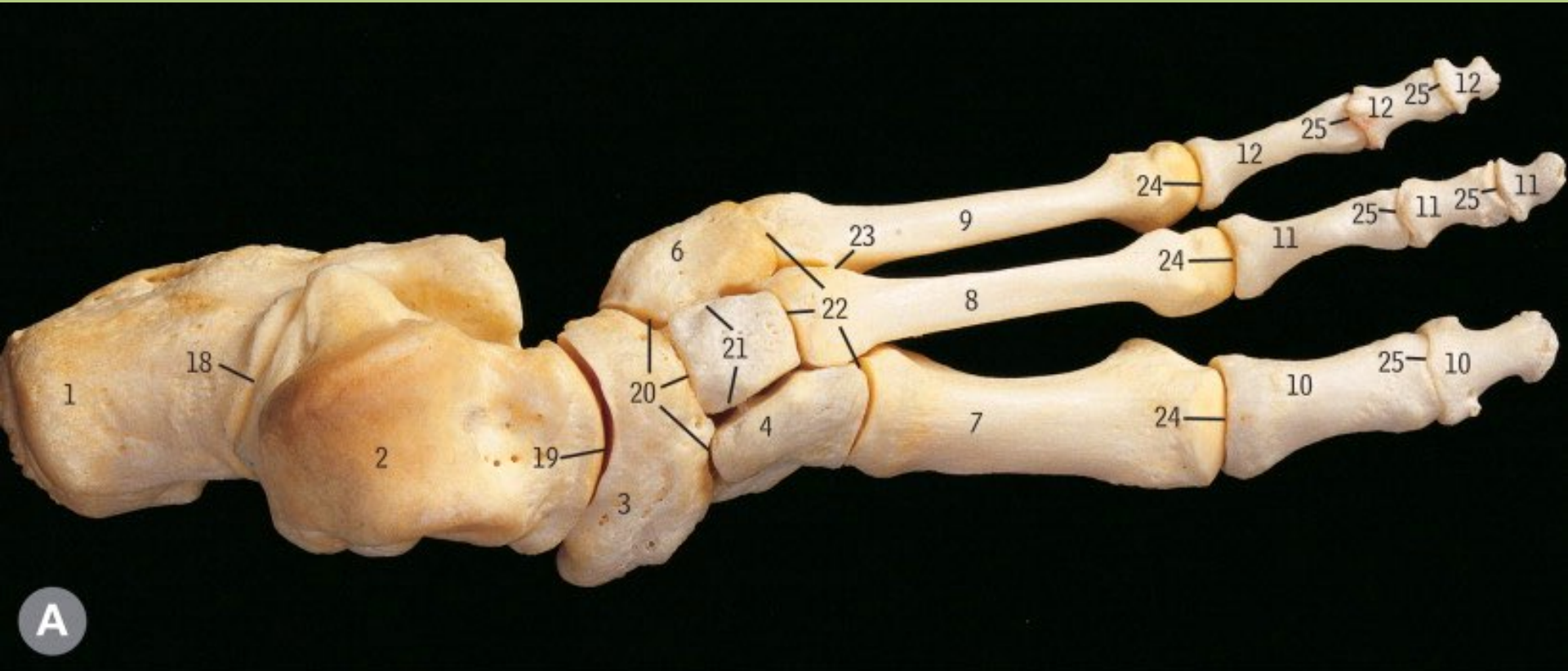




B

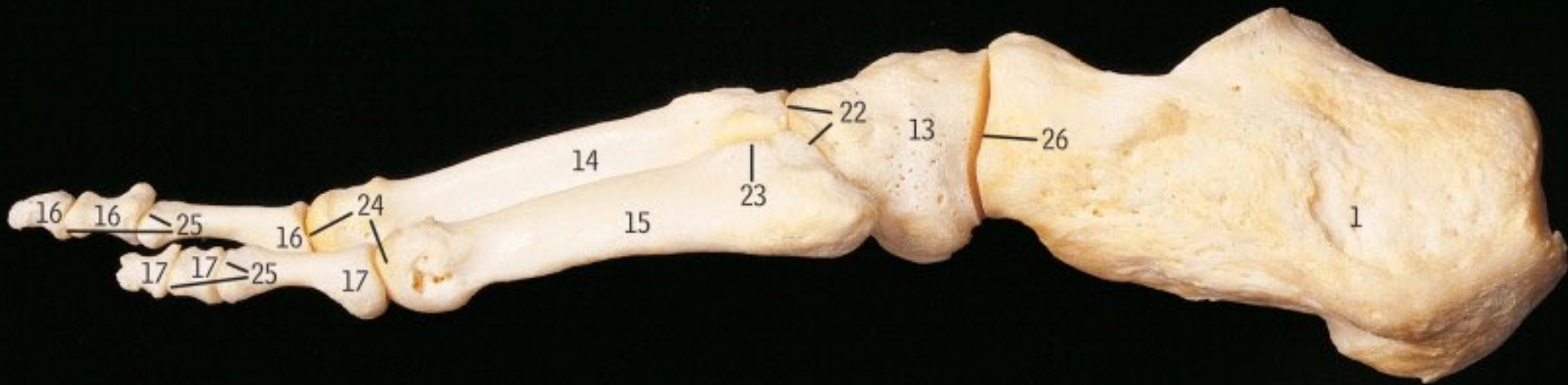
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Medial longitudinal arch



calcaneus, talus, navicular, cuneiforms, metatarsals: I-III.

Lateral longitudinal arch

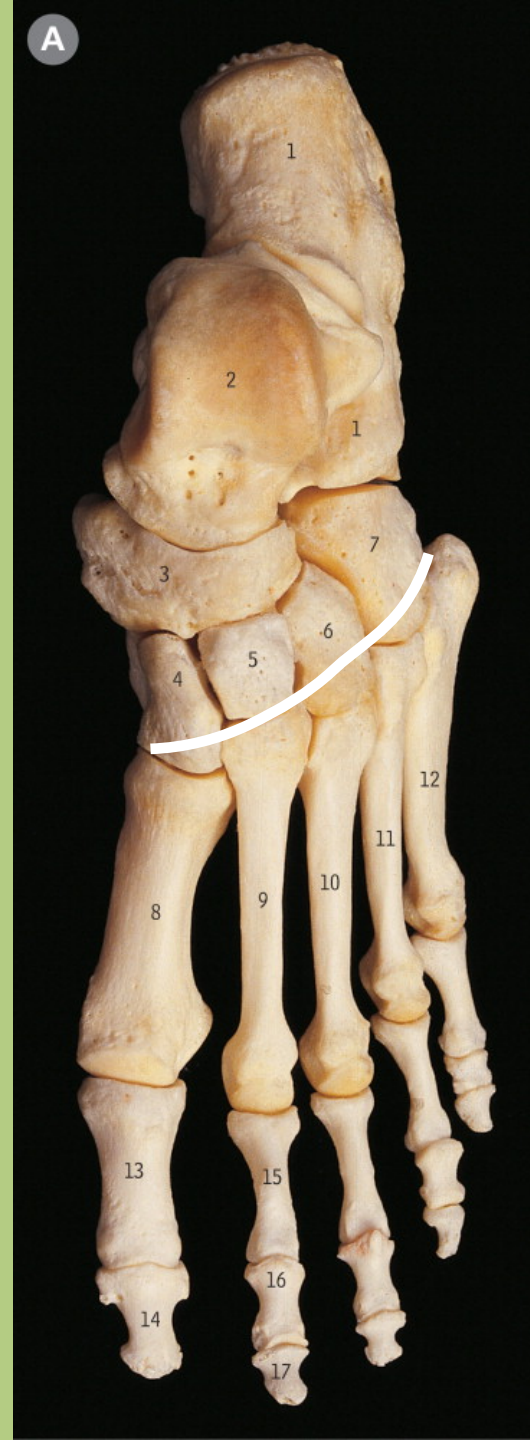


B

calcaneus, cuboid, metatarsals: IV-V.

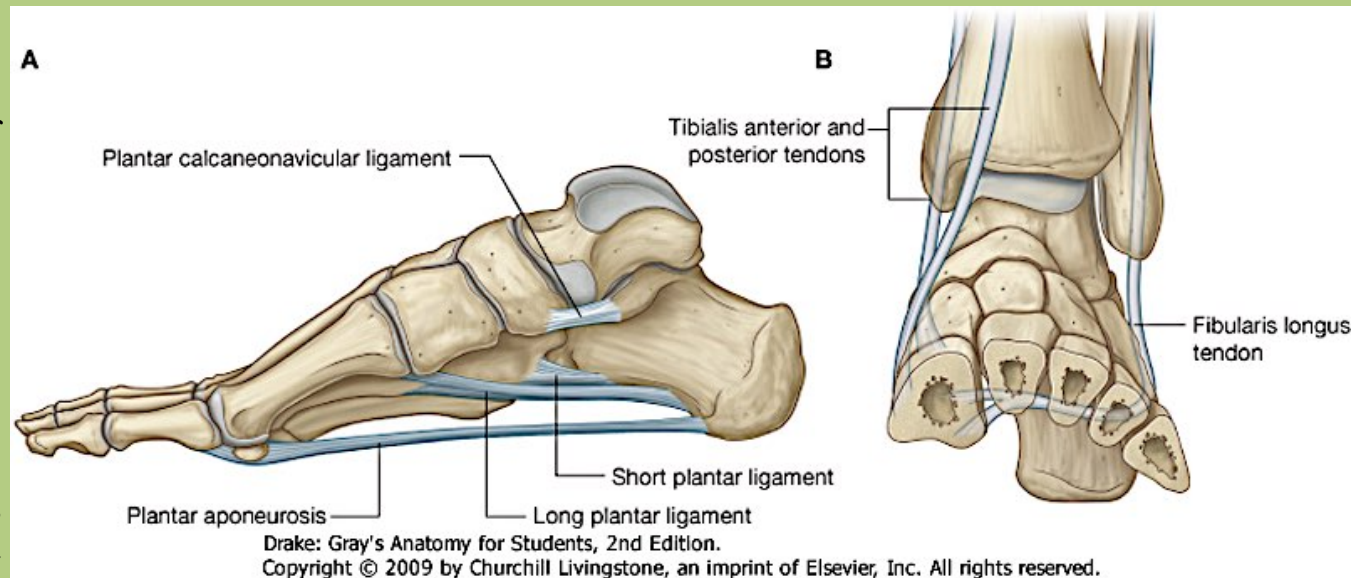
Transverse arch

cuneiforms, cuboid, bases of metatarsals



Arches of the foot - ligaments

- **Plantar aponeurosis:** from calcaneal tubercle to the plantar surfaces of toes. *Works when the body is standing; stabilizes the transverse arch as well.*
- **Long plantar ligament:** from calcaneus to the bases of metatarsals. *Stabilizes the longitudinal arches.*
- **Plantar calcaneocuboid ligament:** from calcaneus to the cuboid bone. *Stabilizes the bones at the lateral side.*
- **Plantar calcaneonavicular ligament:** extends the articular surface for the head of talus. *Stabilizes the bones at the medial side.*



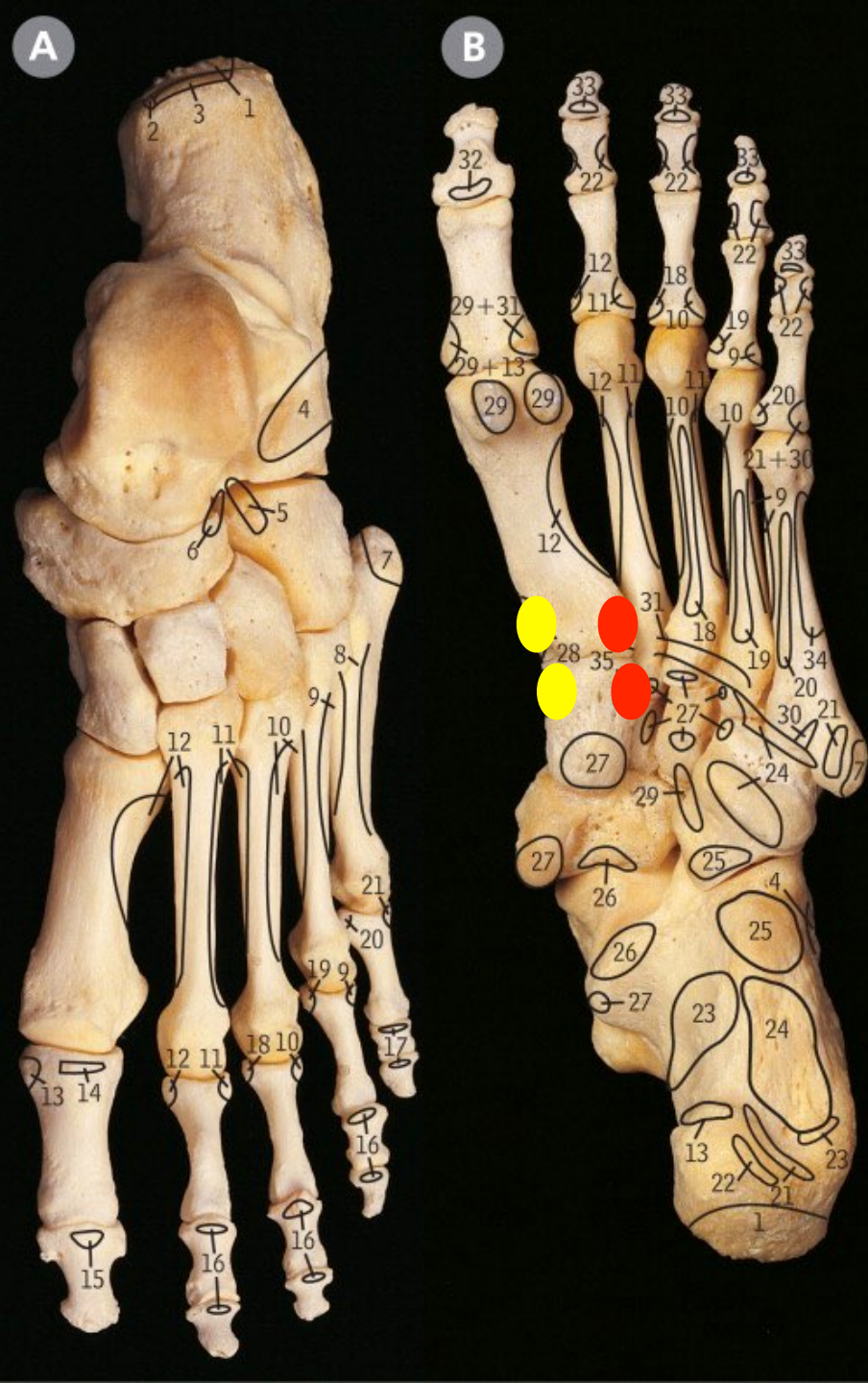
Stabilizers of the medial arch

Active stabilizers:

- tibialis anterior



- peroneus longus

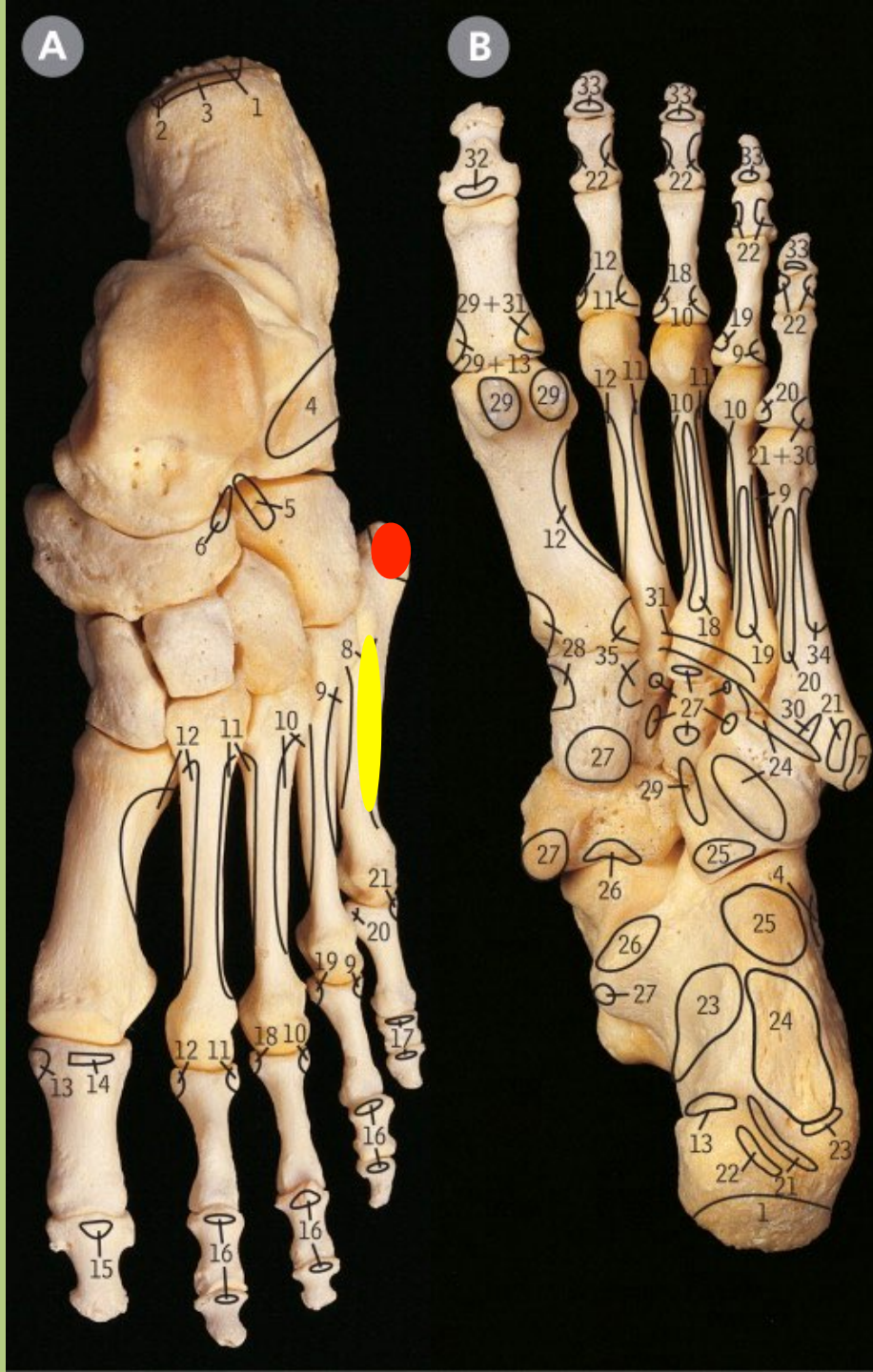


Stabilizers of the lateral arch

Active stabilizers:

- peroneus tertius ●

- peroneus/fibularis brevis ●



Stabilizers of the longitudinal arch

Other active stabilizers:

- abductor hallucis (13)
- flexor hallucis brevis (29)
- flexor digitorum brevis (22)
- quadratus plantae (23)
- abductor digiti minimi (21)

Passive stabilizers:

- plantar aponeurosis
- longum plantar lig. (24)
- plantar calcaneonavicular lig. (26)
- plantar calcaneocuboid lig. (25)



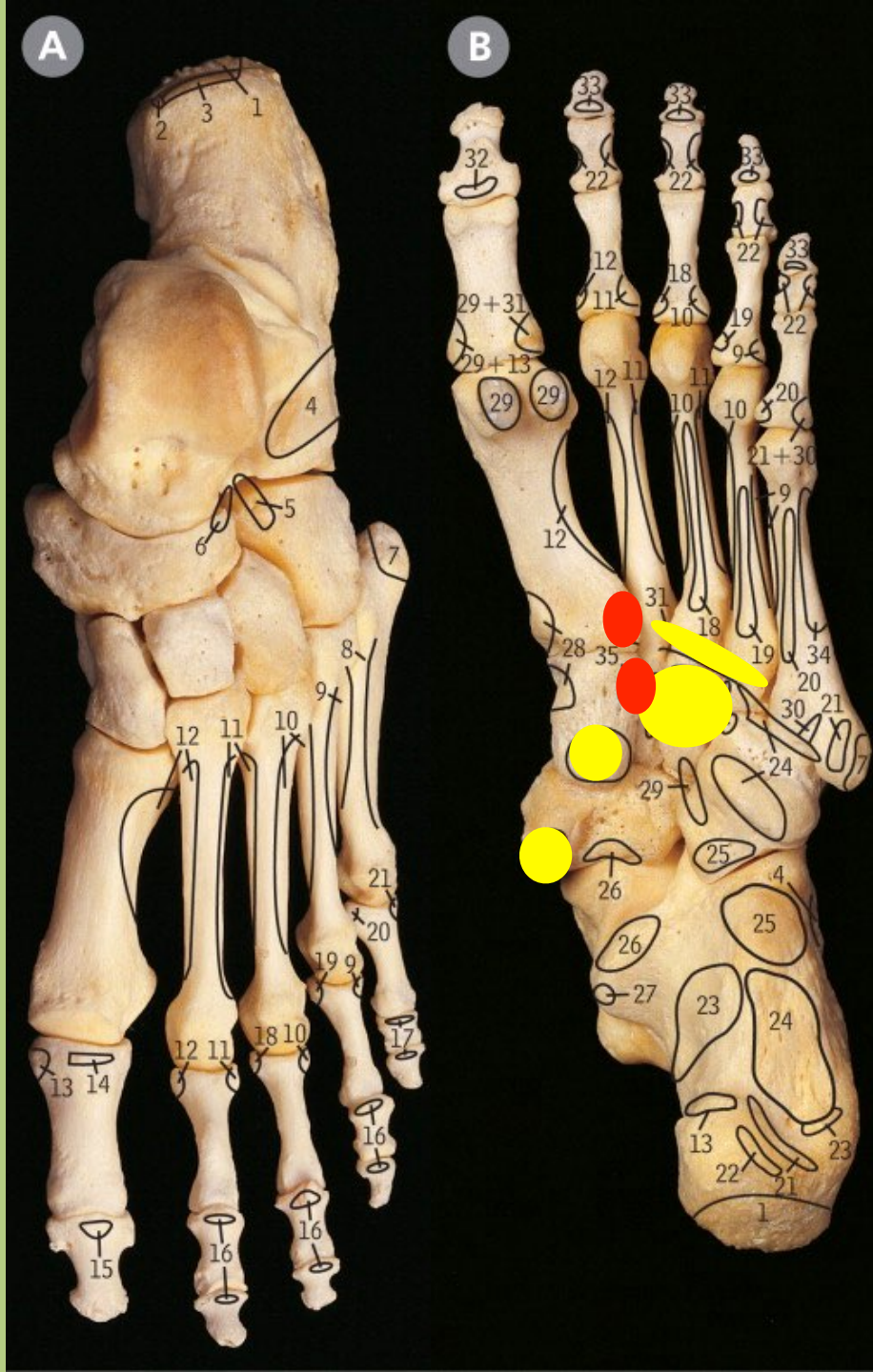
Stabilizers of the transverse arch

Passive stabilizers:

deep transverse metatarsal lig.

Active stabilizers:

- fibularis longus
- tibialis posterior

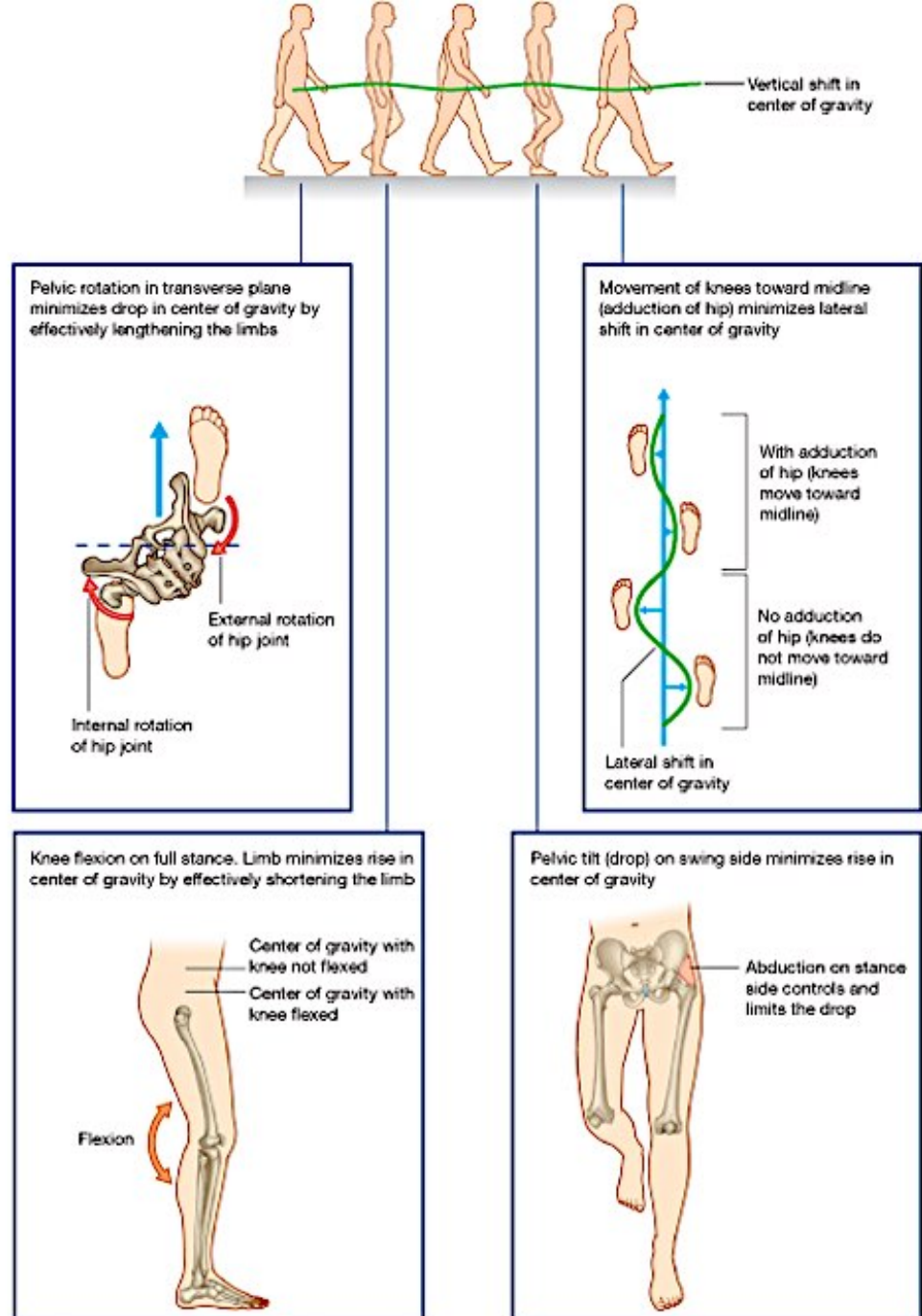


Walking

During walking, many anatomical features of the lower limbs contribute to **minimizing fluctuations in the body's center of gravity** and thereby reduce the amount of energy needed to maintain locomotion and produce a smooth, efficient gait.

They *include pelvic tilt in the coronal plane, pelvic rotation in the transverse plane, movement of the knees toward the midline, flexion of the knees, and complex interactions between the hip, knee, and ankle.*

As a result, during walking the body's center of gravity normally fluctuates only 5cm in both vertical and lateral directions.



Orthopedic disorders

Pes planus (flatfoot): With *collapse of the longitudinal arch*, marked by downward displacement of the talus and navicular, weight bearing often incites a diffuse foot pain that is most intense in the area of the *stretched plantar calcaneonavicular ligament*.

A flat foot is normal in infants and toddlers, because the foot's arch hasn't yet developed.





Case courtesy of Dr
Tim Luijkx,
Radiopaedia.org, rID:
34737



Case courtesy of Dr
Henry Knipe,
Radiopaedia.org,
rID: 30407

Orthopedic disorders

Pes transversoplanus (splayfoot): The *collapse of the transverse arch* results in a broadened forefoot with *greater pressure acting on the heads of the second through fourth metatarsals* and the associated metatarsophalangeal joints.



Orthopedic disorders

Hallux valgus:

- lateral deviation of the great toe
- first and second toes rub against each other
- displaced sesamoid bones
- causes: pes planus, high heels, genetic background



Case courtesy of Dr
Benoudina Samir,
Radiopaedia.org, rID:
42447



Metatarsophalangeal Angle

Orthopedic disorders

Hammer toes:

- proximal phalanges are in dorsiflexion
- middle phalanges are in plantarflexion
- distal phalanges are usually in dorsiflexion
- causes: defect of the lumbricals and interossei, high heels, genetic background



Case courtesy of Dr
Usman Bashir,
Radiopaedia.org, rID:
19010





"It's probably nothing."

Thank you for your attention.

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