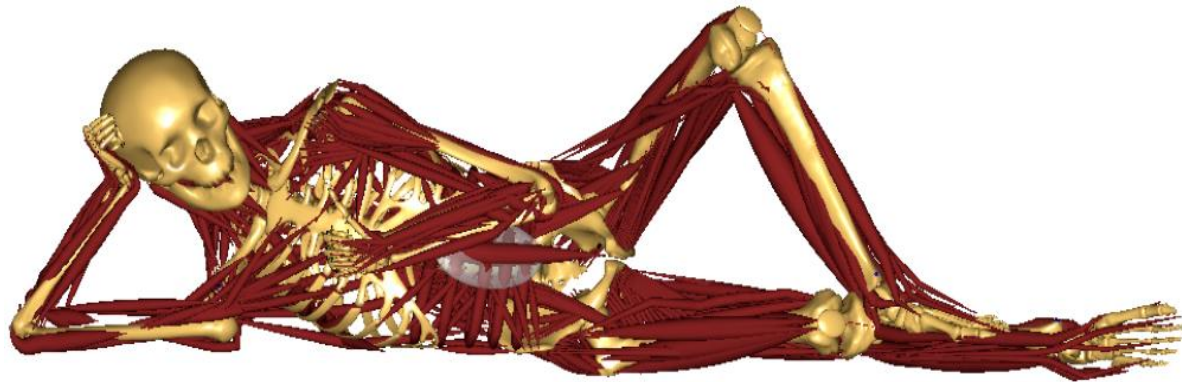


Basics of Biomechanics of Neuromusculoskeletal System



Dr. Muhammad Wasif Rashid Chaudhary
MBBS, MBA, CTQM, CSSGB, CPHQ (Ahalia Hospital)

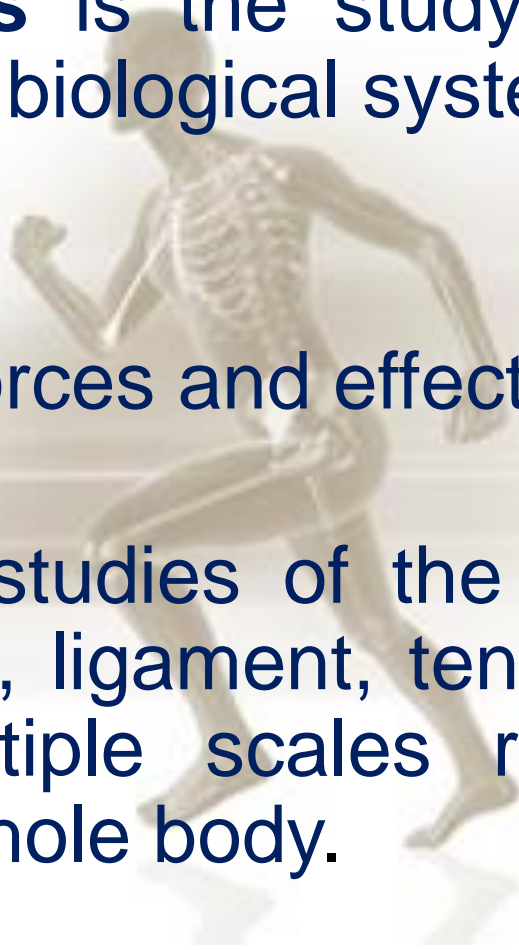
Biomechanics

“**Biomechanics** is the study of the structure and function of biological systems”.

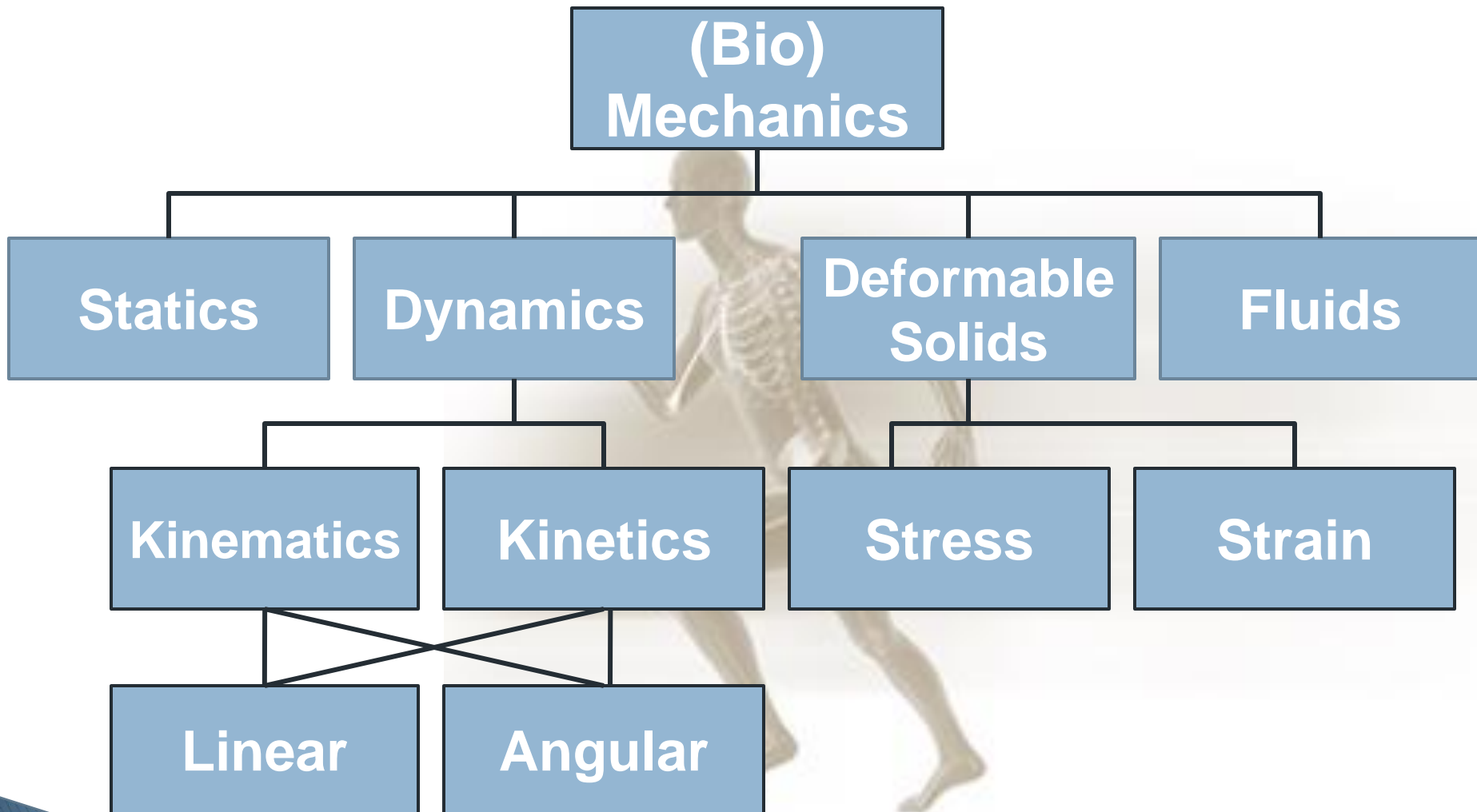
Bio= Living

Mechanics= Forces and effects

This includes studies of the tissues including bone, cartilage, ligament, tendon, muscle, and nerve, at multiple scales ranging from the single cell to whole body.



Divisions of Biomechanics



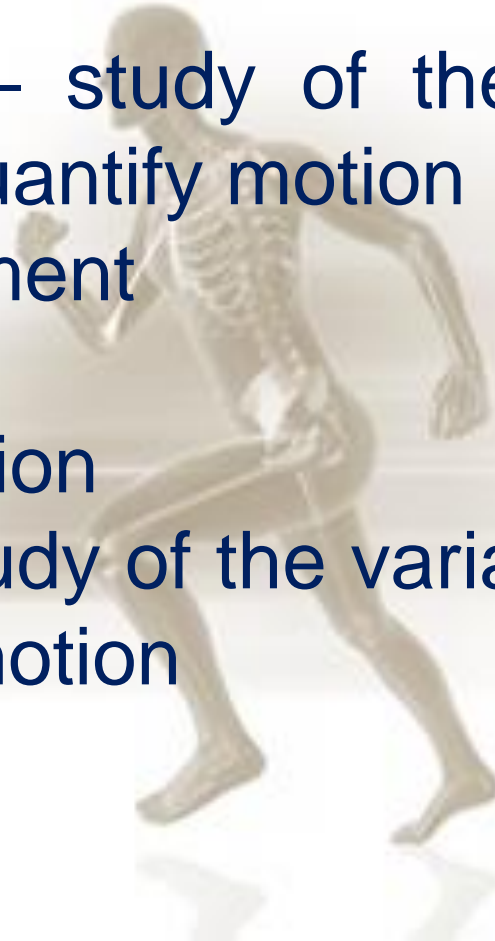
The study of mechanics in the human body divided into 2 areas:

Kinematics – study of the variables that describe or quantify motion

- Displacement
- Velocity
- Acceleration

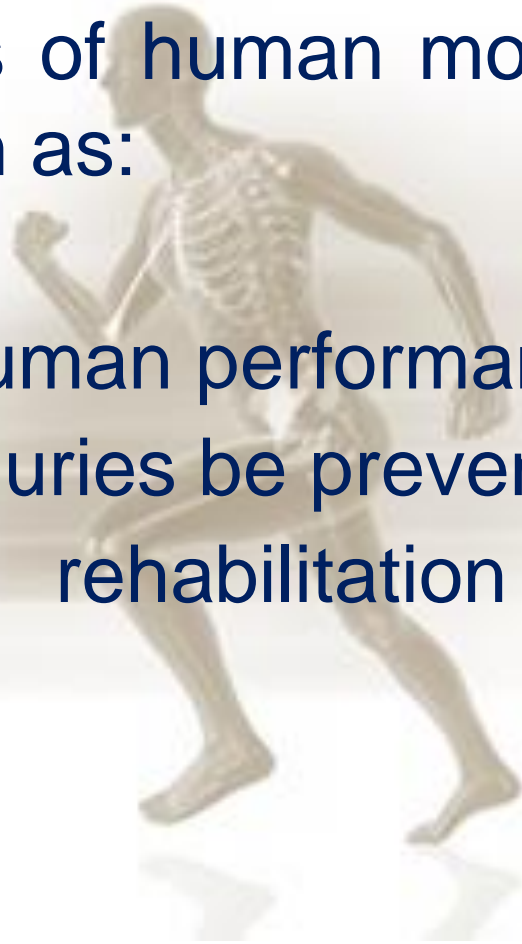
Kinetics – study of the variables that cause or influence motion

- Forces
- Torques
- Mass



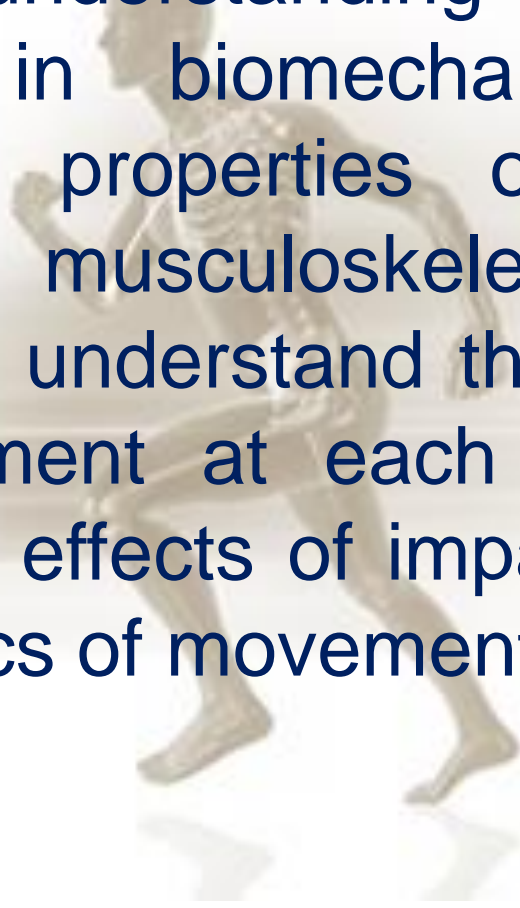
Biomechanists use the principles of mechanics in the analysis of human movement to answer questions such as:

1. How can human performance be enhanced?
2. How can injuries be prevented?
3. How can rehabilitation from injury be expedited?

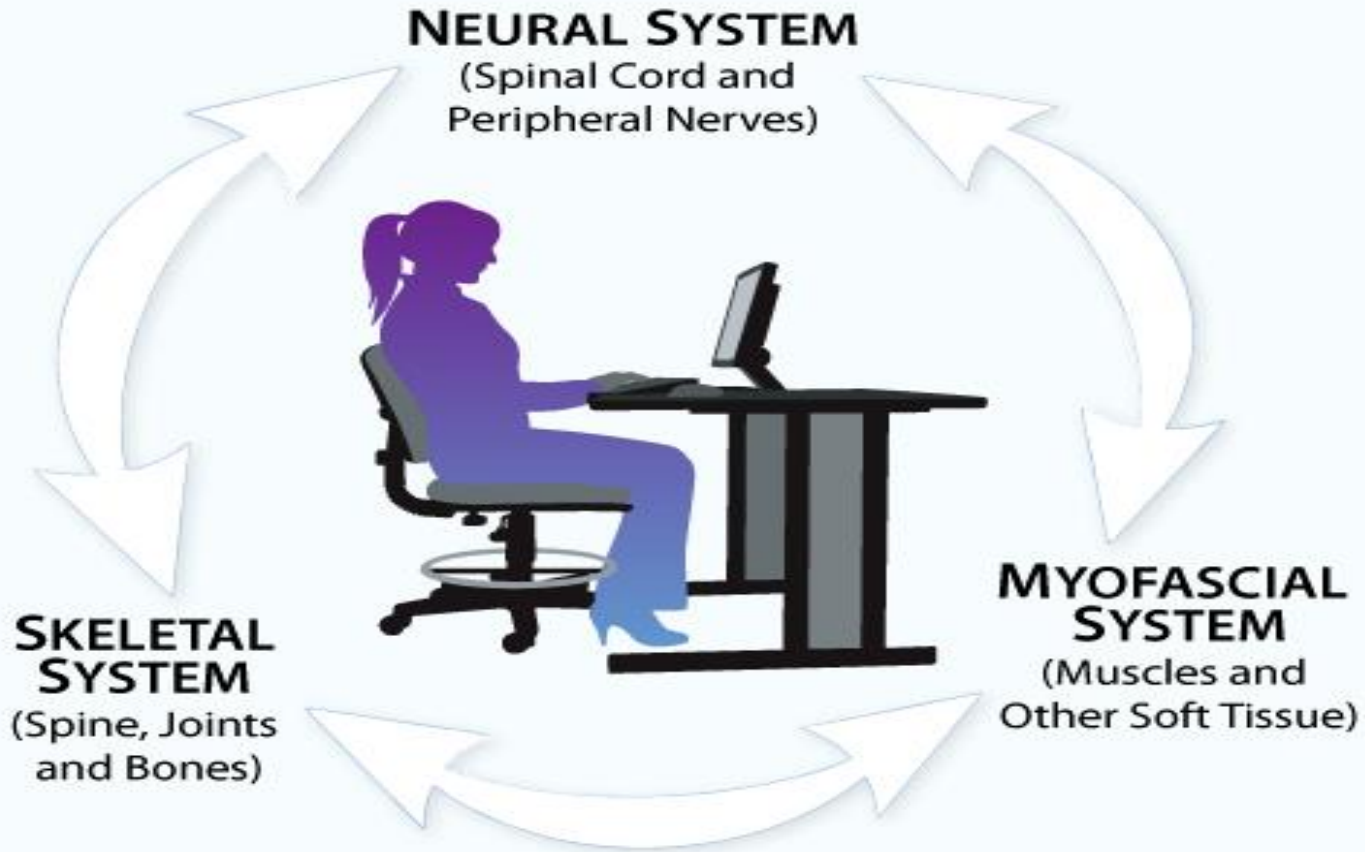


We need to know

- ▶ By having an understanding of the principles of analysis in biomechanics and the biomechanical properties of the primary tissues of the musculoskeletal system, we will be able to understand the mechanics of normal movement at each region and to appreciate the effects of impairments on the pathomechanics of movement.



Neuromuscular Skeletal Biomechanics

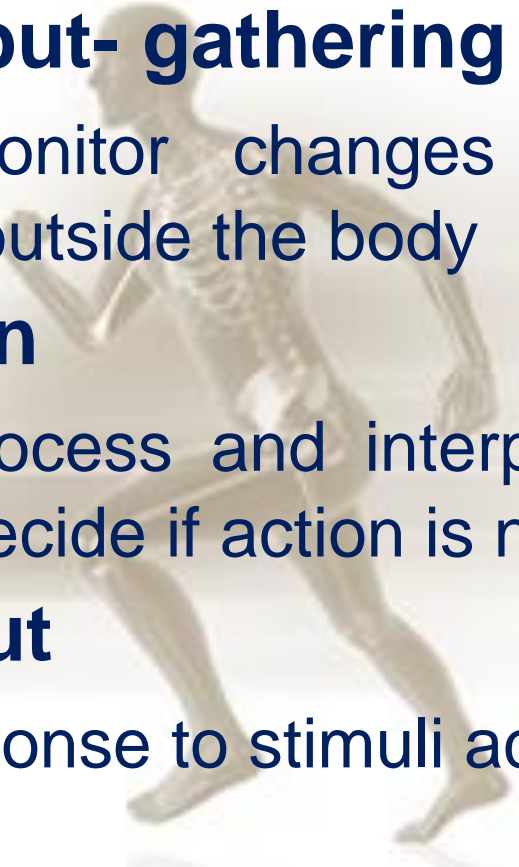


The Nervous System

Overview



Functions of the NS

- 
- ▶ **Sensory Input- gathering information**
 - To monitor changes occurring inside and outside the body
 - ▶ **Integration**
 - To process and interpret sensory input and decide if action is needed
 - ▶ **Motor output**
 - A response to stimuli activates muscles or glands

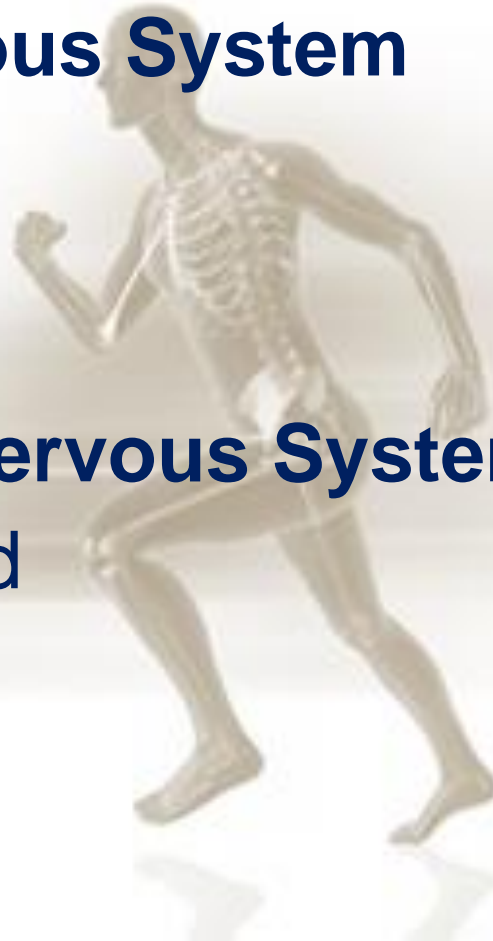
Classification of the NS

- ▶ **Central Nervous System**

1. Brain
2. Spinal cord

- ▶ **Peripheral Nervous System –**

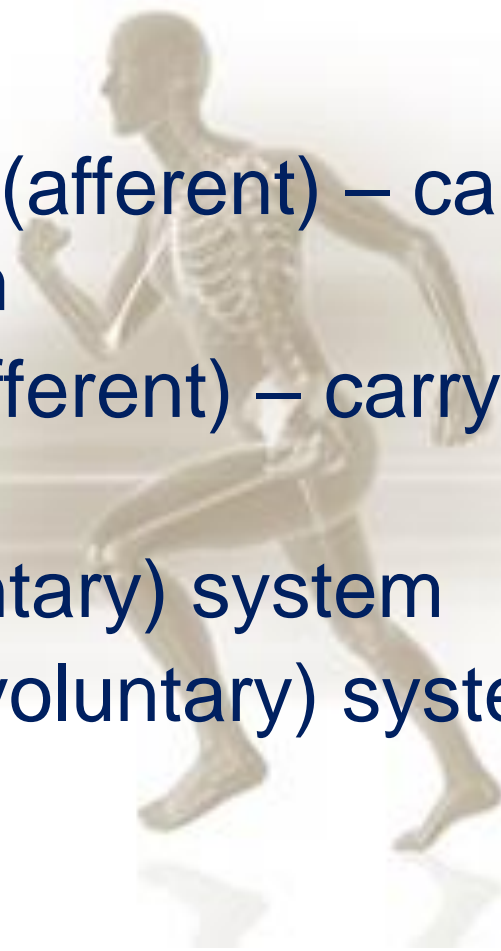
- 1- Cranial and
- 2- Peripheral



Peripheral Nervous System

Two division:

1. Sensory division (afferent) – carry information to the CN system
2. Motor division (efferent) – carry impulses away from the CNS
 - Somatic (voluntary) system
 - Autonomic (involuntary) system



PARASYMPATHETIC NERVES

"Rest and digest"

Constrict pupils

Stimulate saliva

Slow heartbeat

Constrict airways

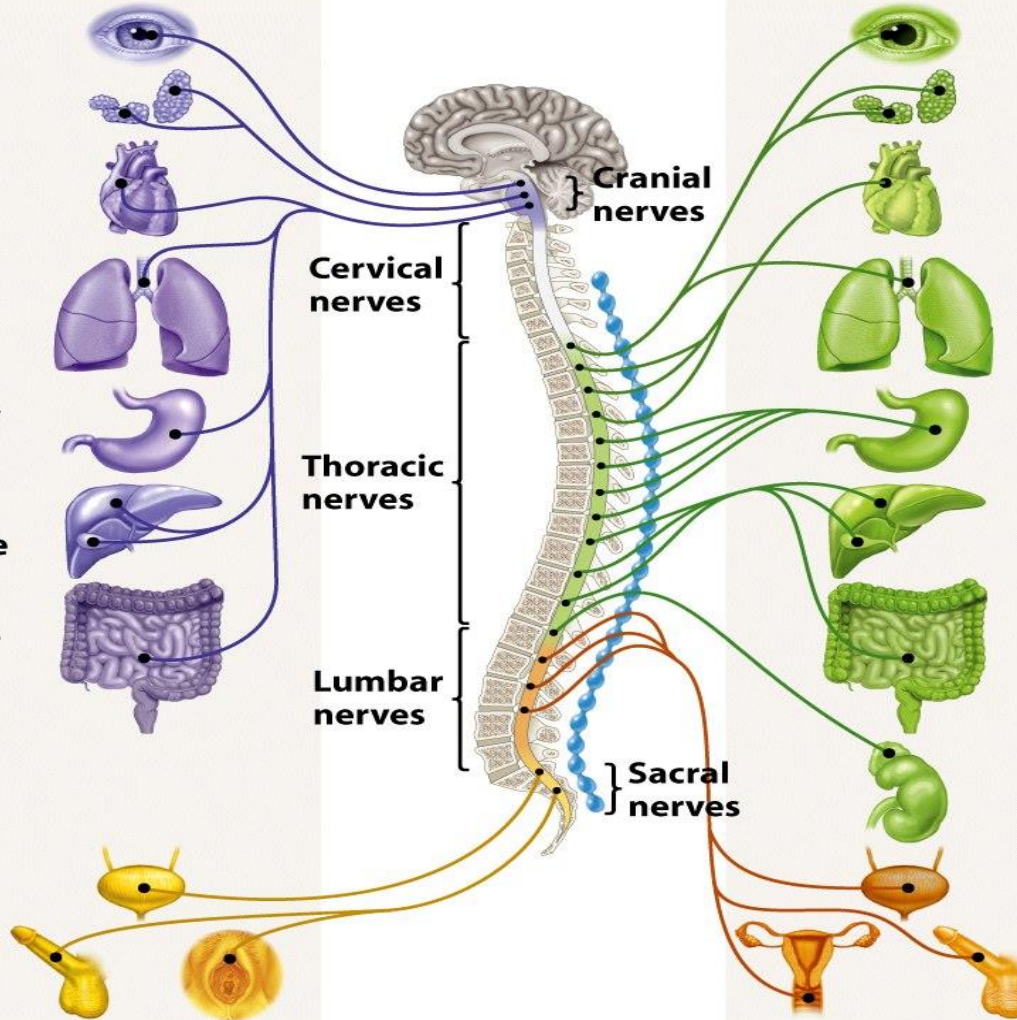
Stimulate activity of stomach

Inhibit release of glucose; stimulate gallbladder

Stimulate activity of intestines

Contract bladder

Promote erection of genitals



SYMPATHETIC NERVES

"Fight or flight"

Dilate pupils

Inhibit salivation

Increase heartbeat

Relax airways

Inhibit activity of stomach

Stimulate release of glucose; inhibit gallbladder

Inhibit activity of intestines

Secrete epinephrine and norepinephrine

Relax bladder

Promote ejaculation and vaginal contraction

Figure 45-20 Biological Science, 2/e
© 2005 Pearson Prentice Hall, Inc.

Cells of the Nervous System

Cells are grouped into two functional categories

- Neurons

- Do all of the major functions on their own, are
 1. Afferent
 2. Interneurons
 3. Efferent

- Neuroglia

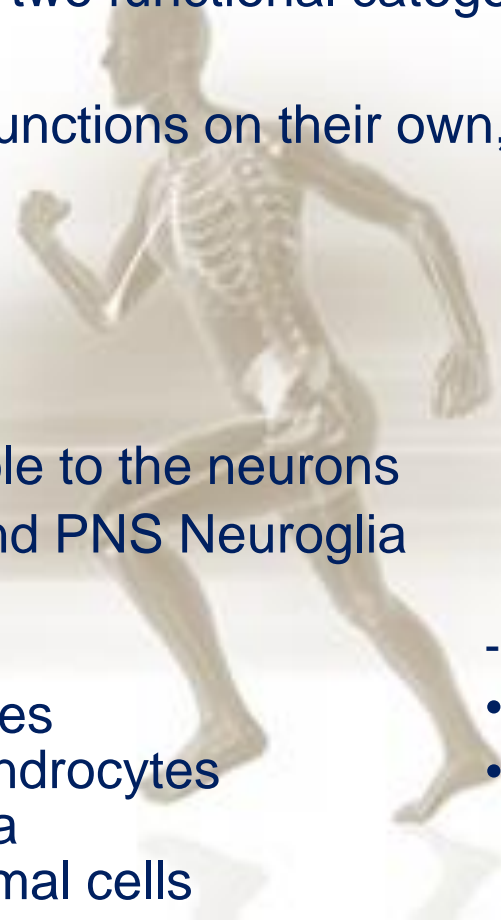
- Play a supporting role to the neurons
- Divided into CNS and PNS Neuroglia

- CNS

- Astrocytes
- Oligodendrocytes
- Microglia
- Ependymal cells

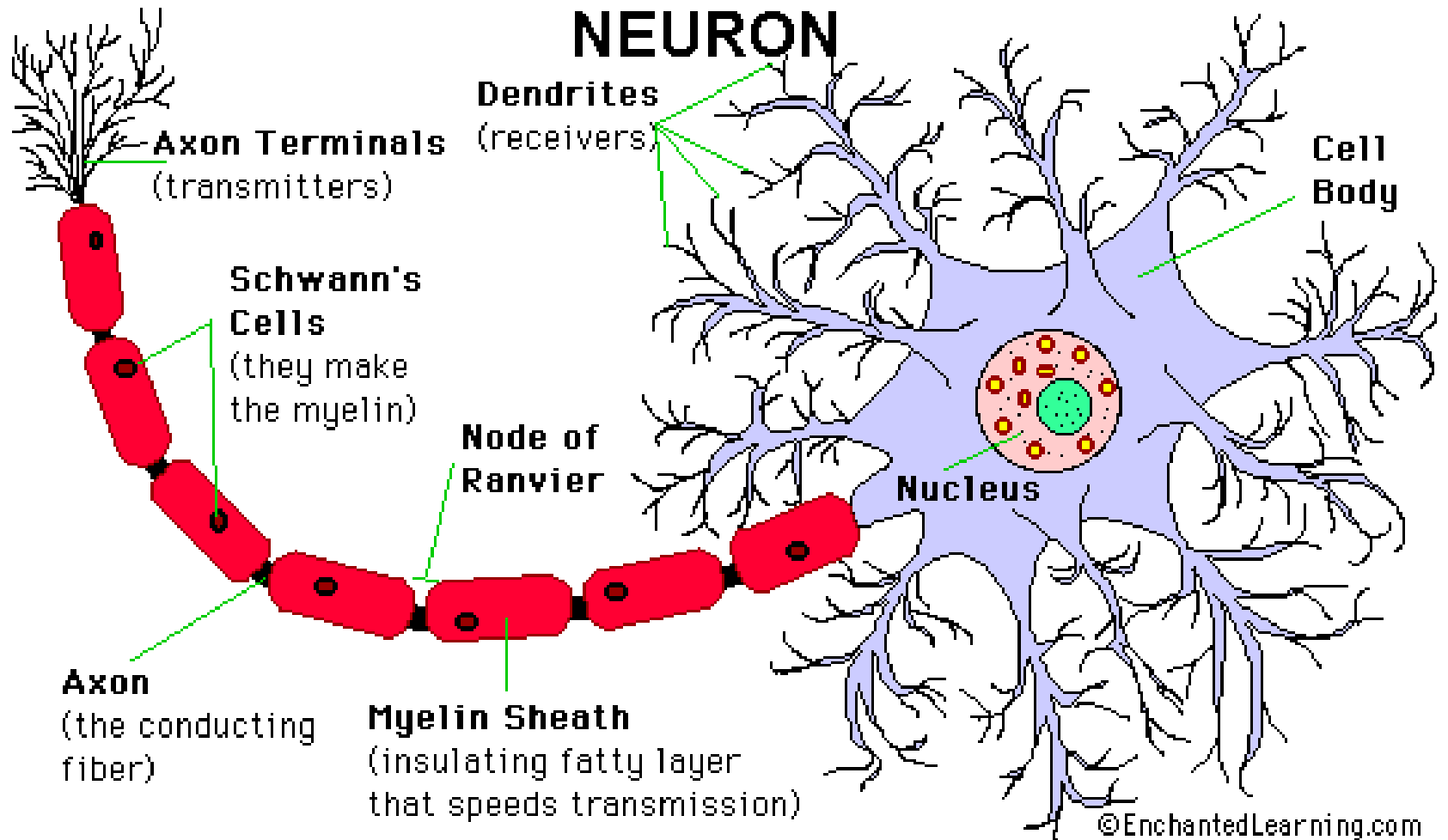
- PNS

- Neurolemmocytes
- Satellite cells

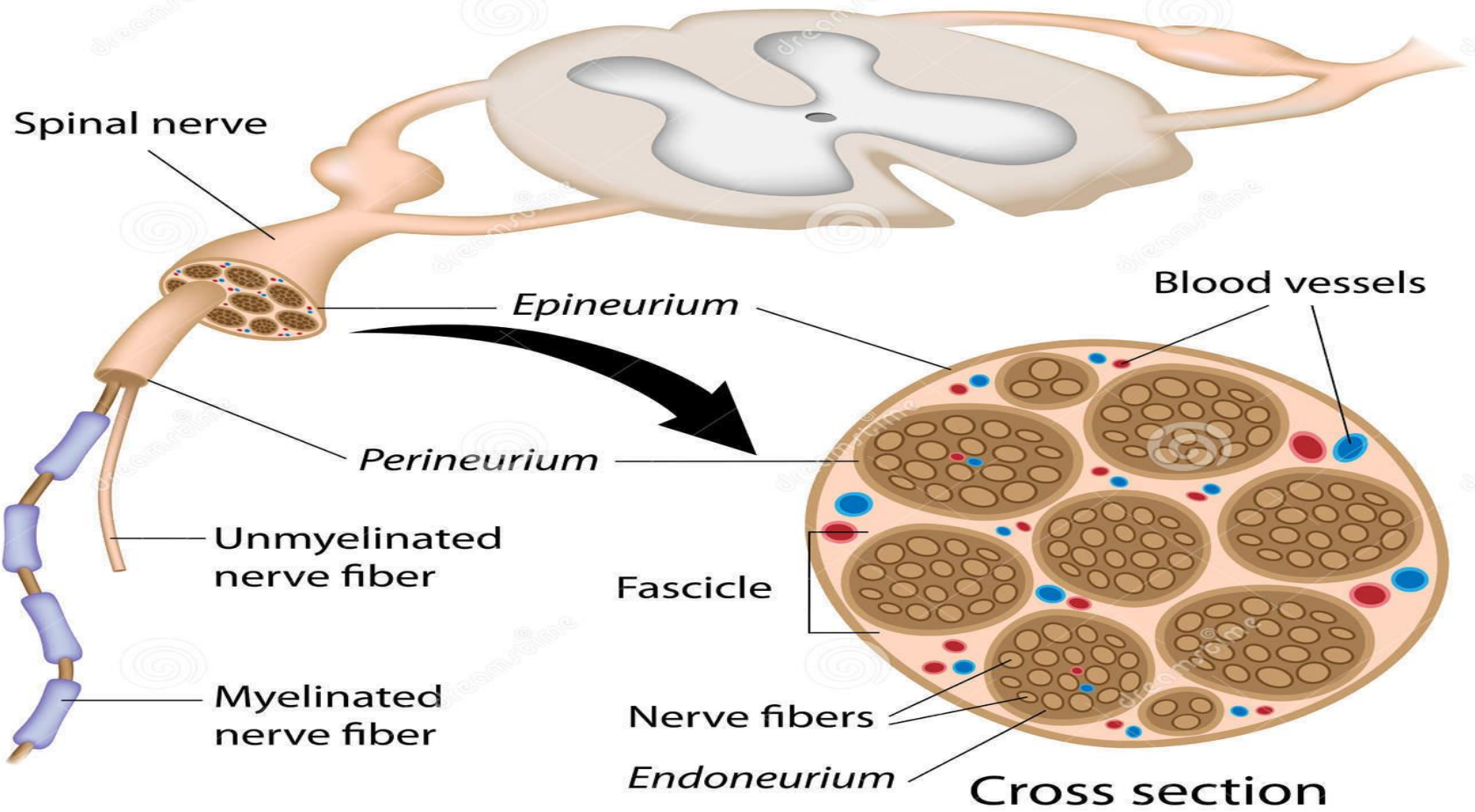


Neuron

- ▶ The general neuron & its function



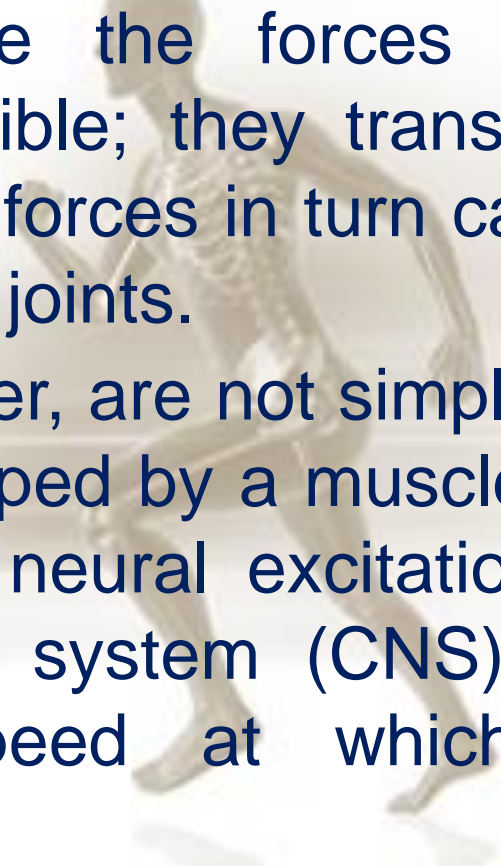
Anatomy of a Nerve



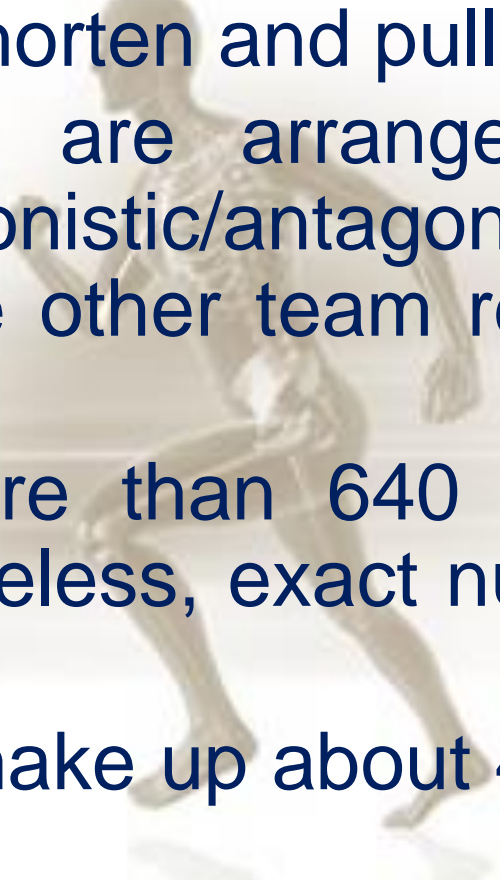
The Muscular System

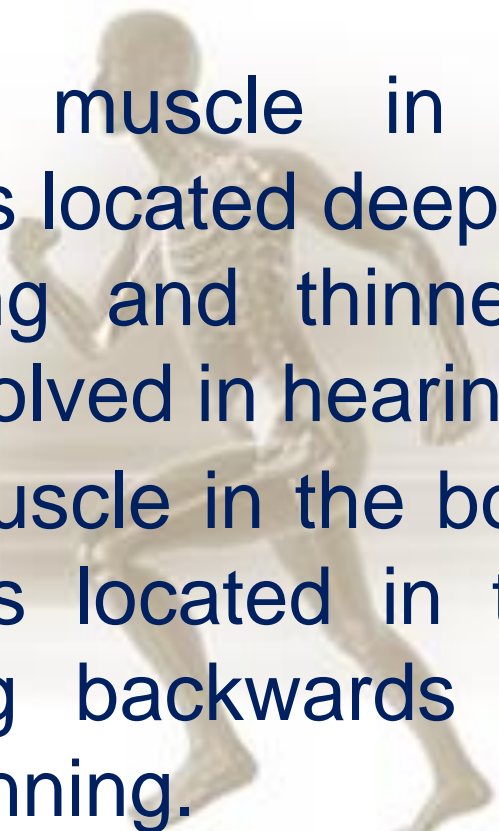


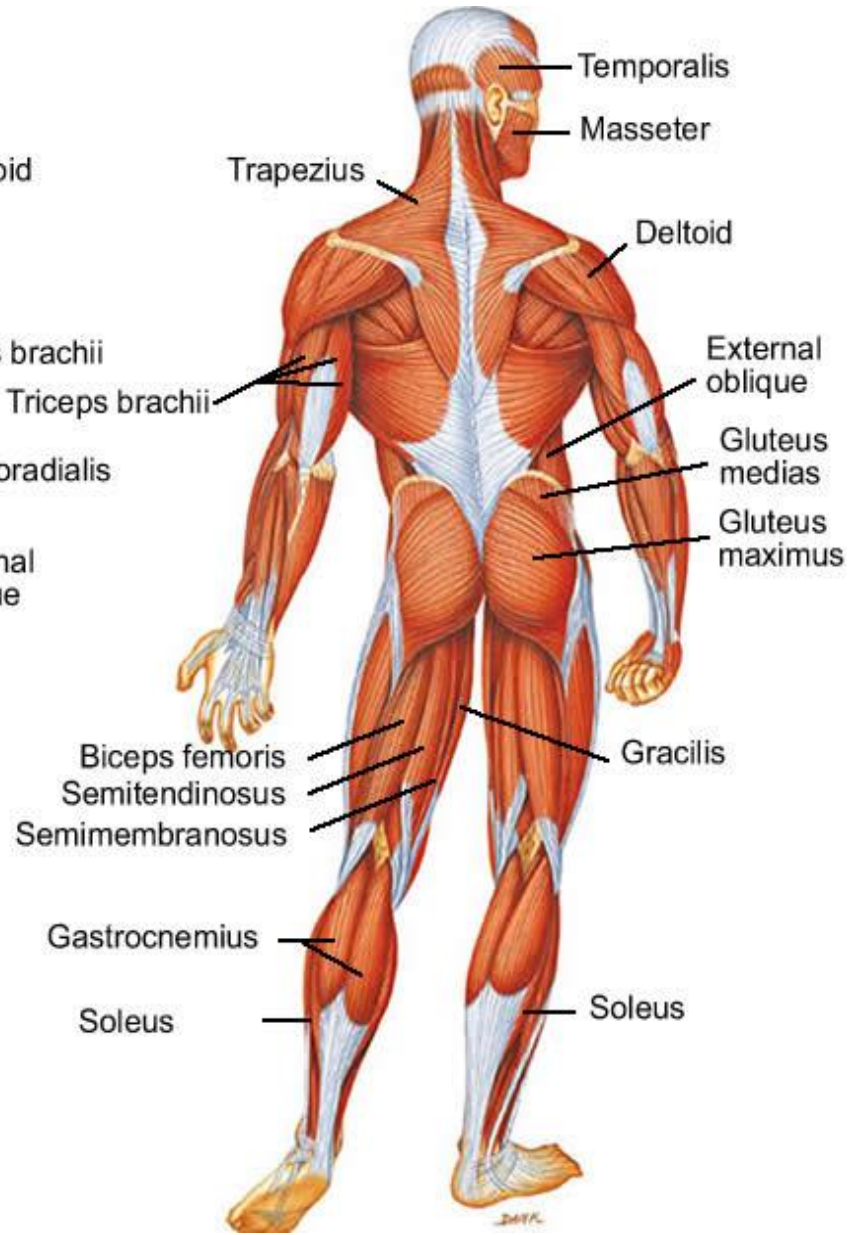
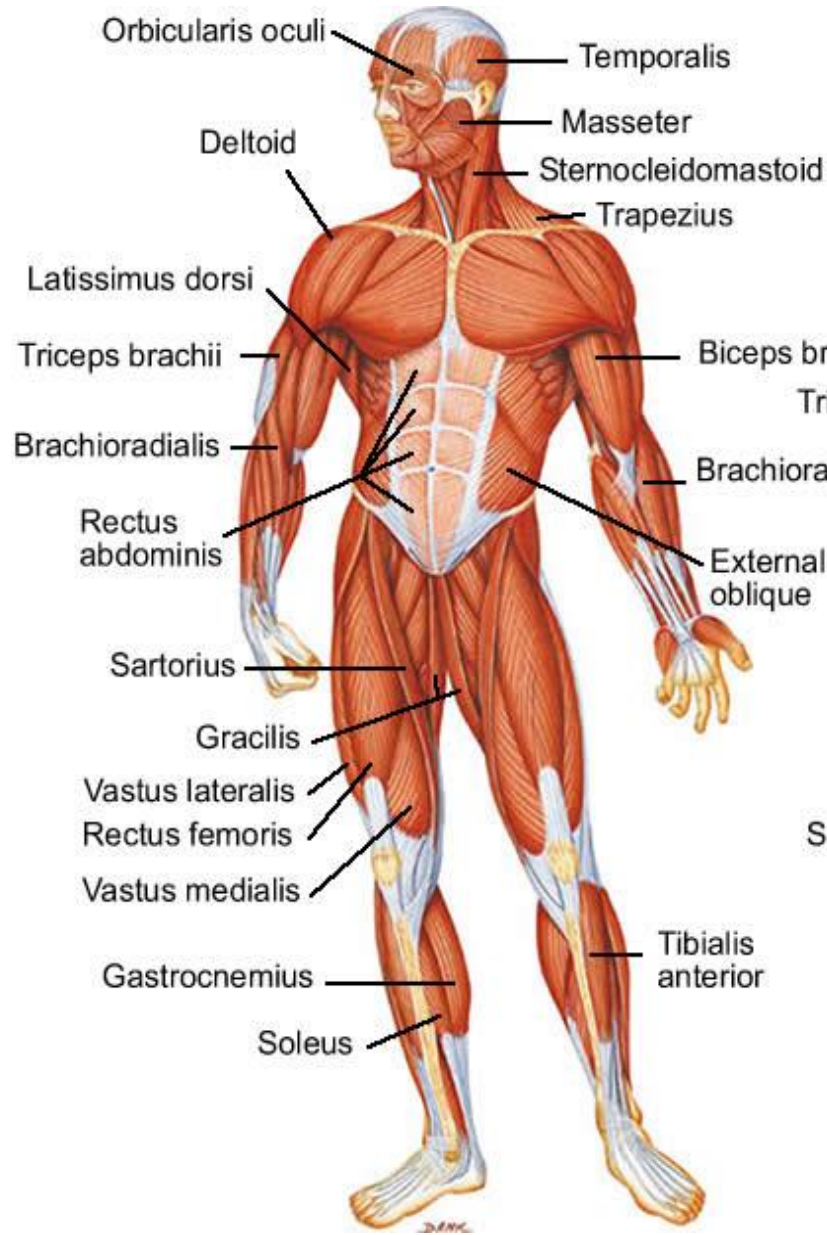
Muscular System

- ▶ Muscles provide the forces needed to make movement possible; they transmit their forces to tendons, whose forces in turn cause rotation of the bones about the joints.
 - ▶ Muscles, however, are not simple force generators: the force developed by a muscle depends not only on the level of neural excitation provided by the central nervous system (CNS), but also on the length and speed at which the muscle is contracting.
- 

Muscular System

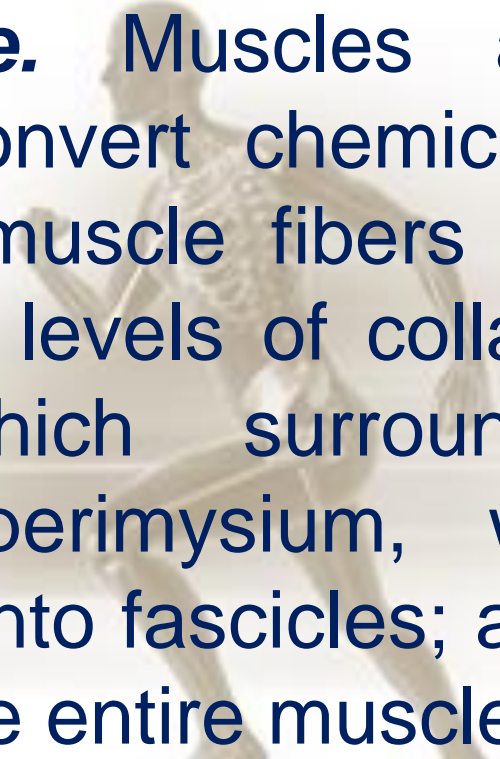
- ▶ Muscles can shorten and pull but not push
 - ▶ Most muscles are arranged in opposing teams e.g. agonistic/antagonistic - as each team pulls, the other team relaxes and gets stretched
 - ▶ There are more than 640 muscles(320 in pairs). Nevertheless, exact number is difficult to define.
 - ▶ The muscles make up about 40% of the body mass.
- 

- 
- ▶ The longest muscle in the body is ***Sartorius***.
 - ▶ The smallest muscle in the body is ***Stapedius***. It is located deep in the ear. It is only 5mm long and thinner than cotton thread. It is involved in hearing.
 - ▶ The biggest muscle in the body is ***Gluteus Maximus***. It is located in the buttock. It pulls the leg backwards powerfully for walking and running.

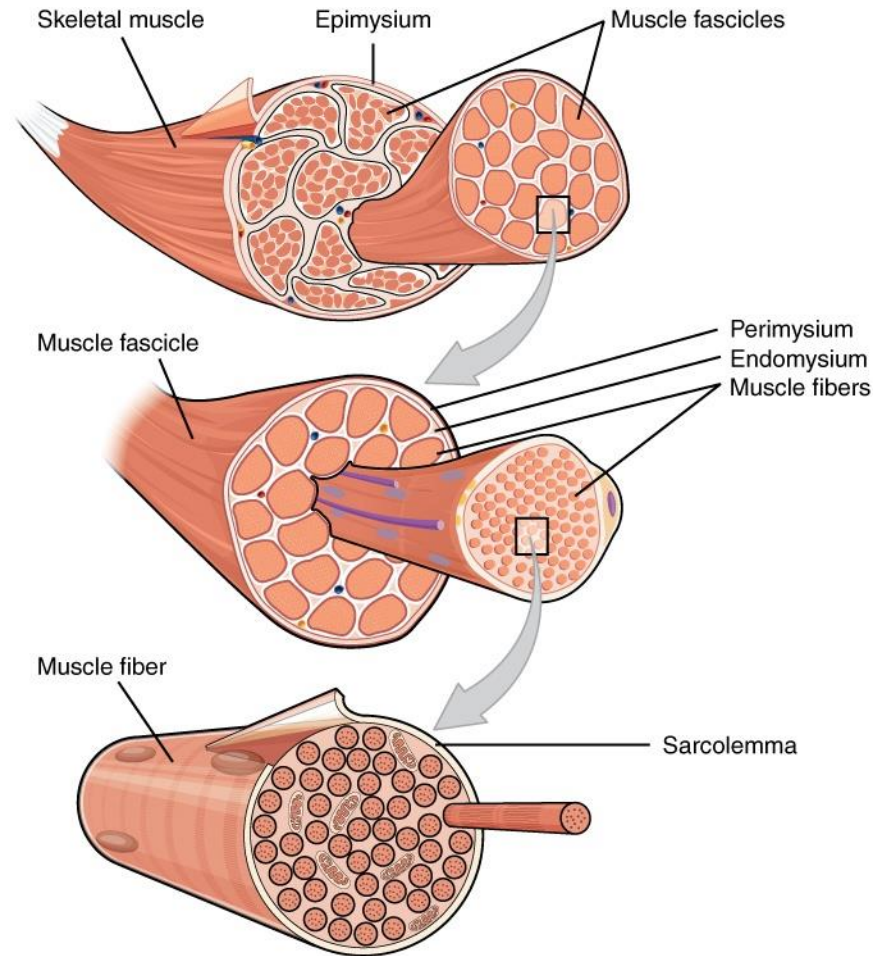


Muscle

Gross Structure. Muscles are molecular machines that convert chemical energy into force. Individual muscle fibers are connected together by three levels of collagenous tissue: endomysium, which surrounds individual muscle fibers; perimysium, which collects bundles of fibers into fascicles; and epimysium, which encloses the entire muscle belly.



Structure of Muscle



Functions of Muscles

- ▶ Movement
- ▶ Maintenance of posture and muscle tone
- ▶ Heat production
- ▶ Protects the bones and internal organs.



Classification of Muscles

Functionally

- ▶ Voluntarily – can be moved at will
- ▶ Involuntarily – can't be moved intentionally

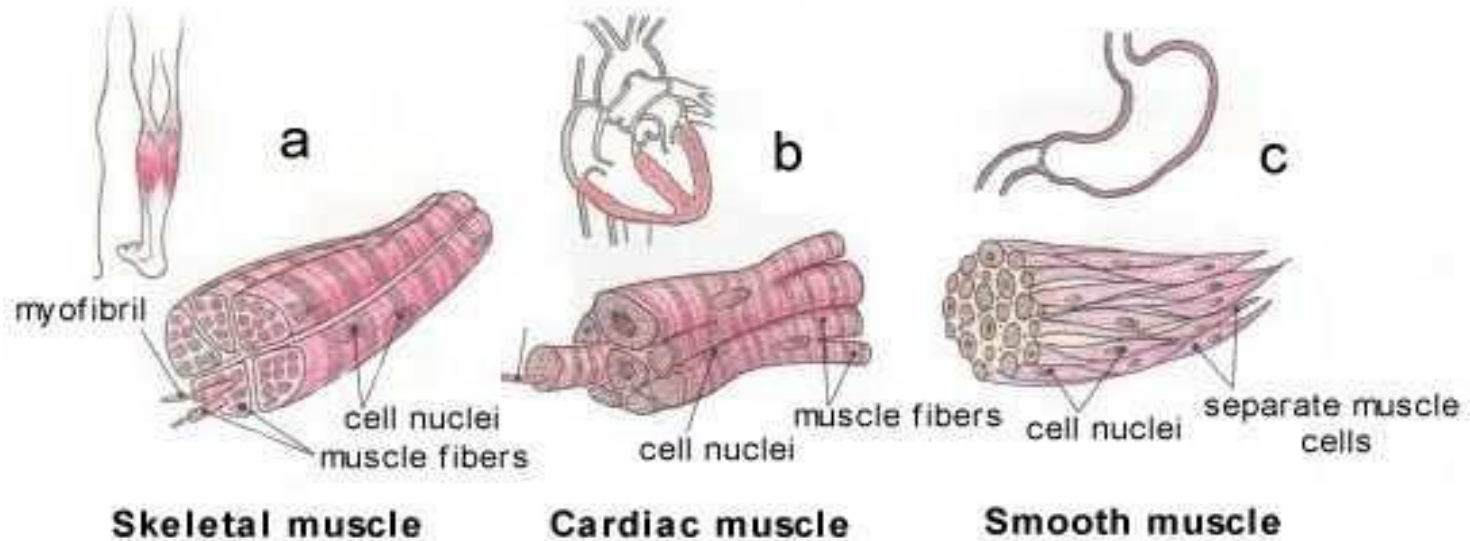
Structurally

- ▶ Striated – have stripes across the fiber
- ▶ Smooth – no striations



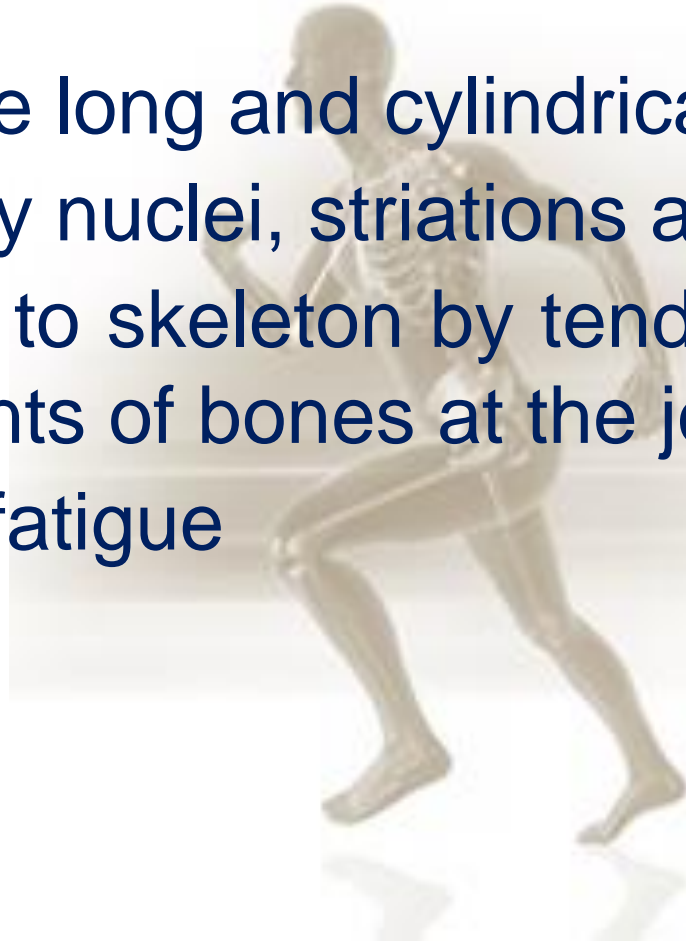
Types of Muscles

- A. Skeletal Muscles
- B. Cardiac Muscles
- C. Smooth Muscles



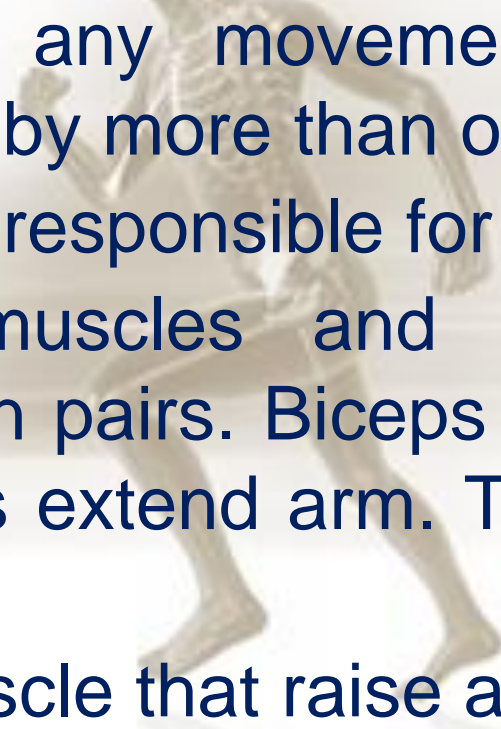
A. Skeletal Muscle

- ▶ Fibers are long and cylindrical.
- ▶ Has many nuclei, striations and voluntary
- ▶ Attached to skeleton by tendons and cause movements of bones at the joints
- ▶ They do fatigue



Functions of Skeletal muscles

A. **Movements** – muscles move bones by pulling not pushing

1. Synergists – any movement is generally accomplished by more than one muscle.
 2. Agonist- most responsible for the movement.
 3. Antagonist- muscles and muscle groups usually work in pairs. Biceps flex arm and its partner triceps extend arm. Two muscles are antagonists.
 4. Levators - muscle that raise a body part.
- 

Functions of Skeletal muscles

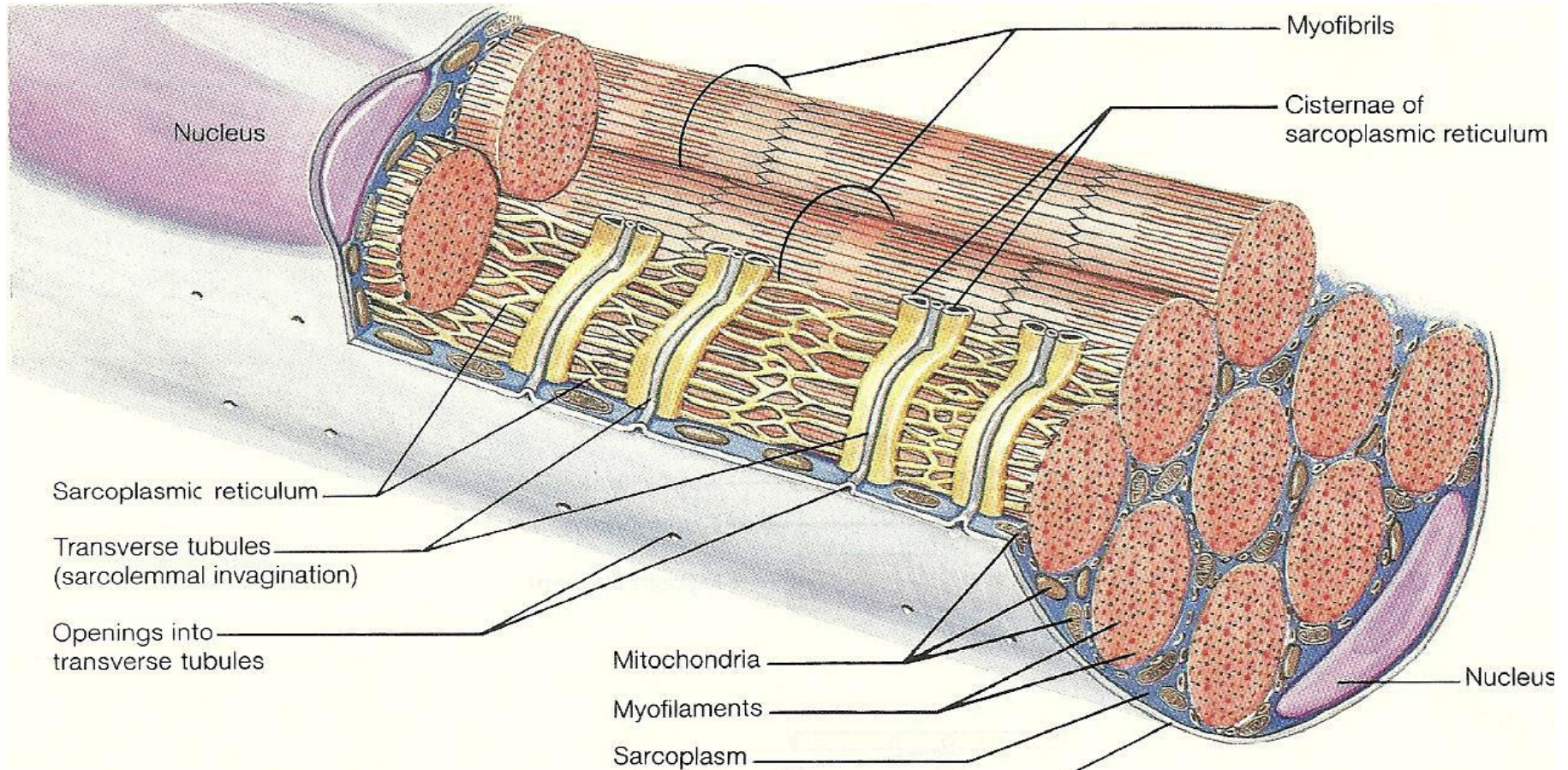
B. Maintenance of posture or muscle tone –

We are able to maintain our body position because of tonic contractions in our skeletal muscles.

C. Heat Production – Contractions of muscles produce most of the heat required to maintain body temperature.

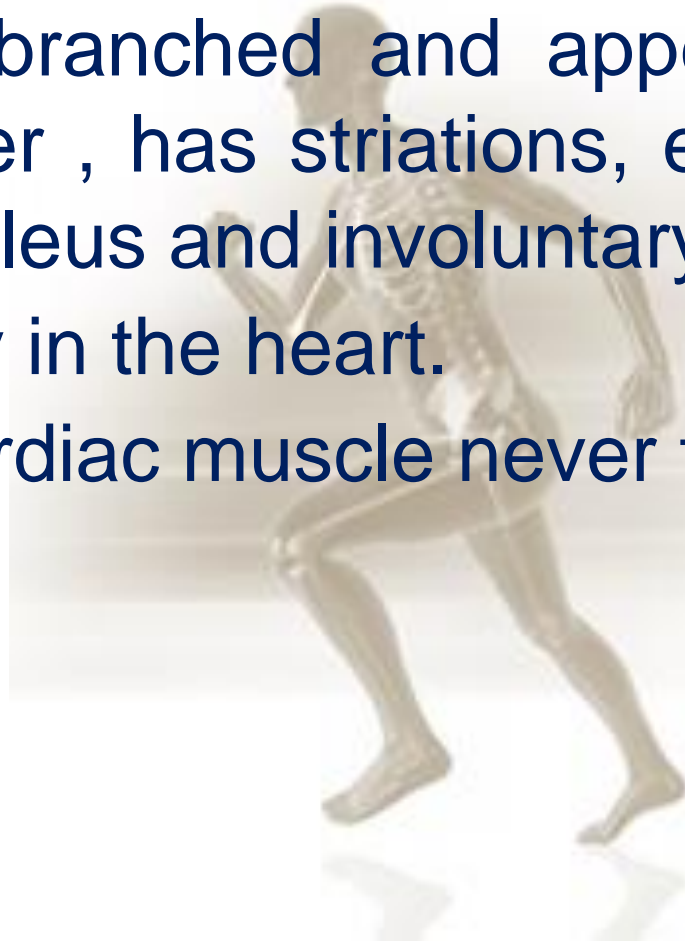


Structural Organization of Skeletal Muscle



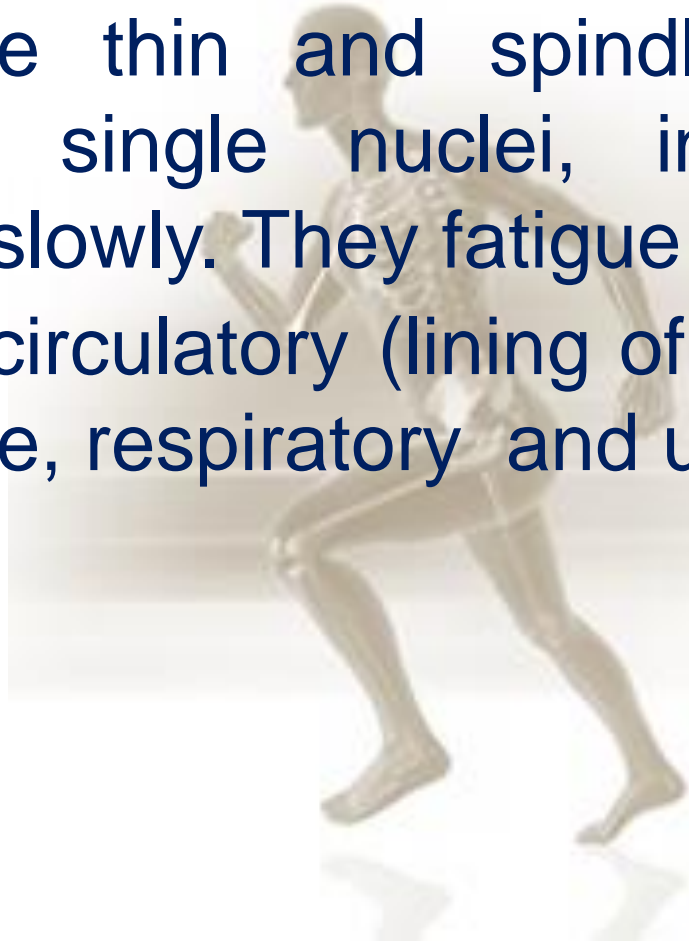
B. Cardiac Muscles

- ▶ Cells are branched and appear fused with one another, has striations, each cell has a central nucleus and involuntary.
- ▶ Found only in the heart.
- ▶ Healthy cardiac muscle never fatigue.



C. Smooth Muscle

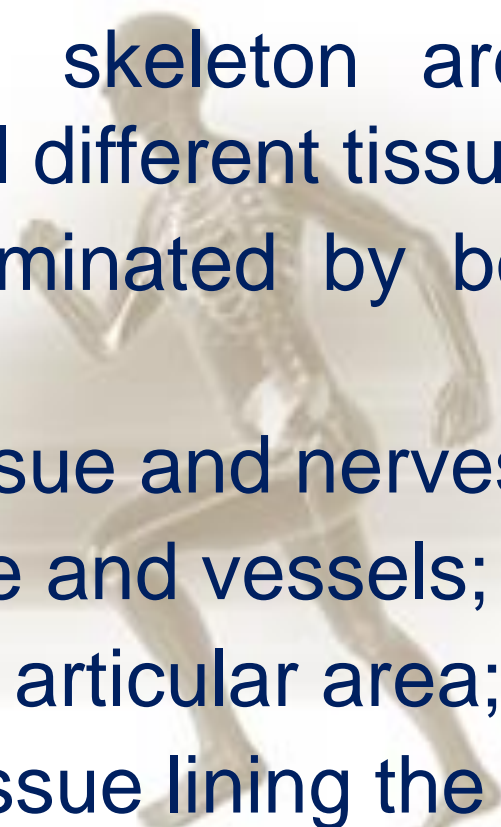
- ▶ Fibers are thin and spindle shaped. No striations, single nuclei, involuntary and contracts slowly. They fatigue but slowly.
- ▶ Found in circulatory (lining of blood vessels), in digestive, respiratory and urinary system.



Skeletal System



Bones

- Total Bones in human body are 206
 - Bones of the skeleton are organs that contain several different tissues
 - Bones are dominated by bone tissue but also contain:
 - Nervous tissue and nerves;
 - Blood tissue and vessels;
 - Cartilage in articular area;
 - Epithelial tissue lining the blood vessels.
- 

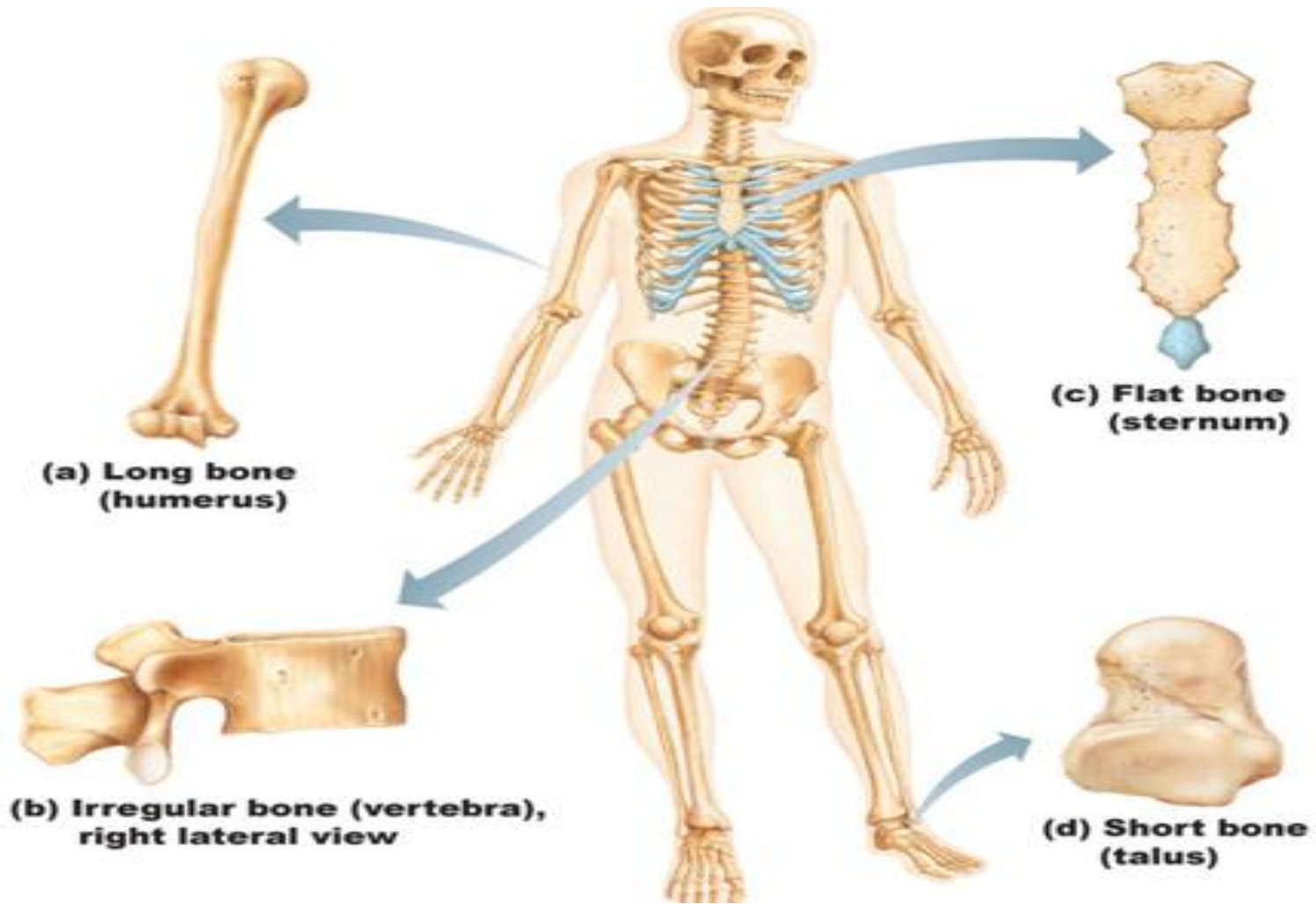
Functions of Bones

Bones perform several important functions:

- Support
- Protection
- Movement
- Mineral storage
- Blood cell formation



Classification of Bones



**(a) Long bone
(humerus)**

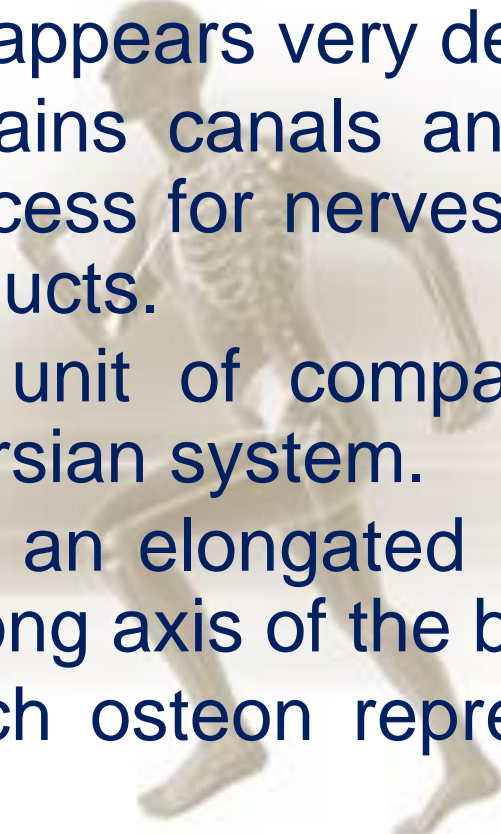
**(c) Flat bone
(sternum)**

**(b) Irregular bone (vertebra),
right lateral view**

**(d) Short bone
(talus)**

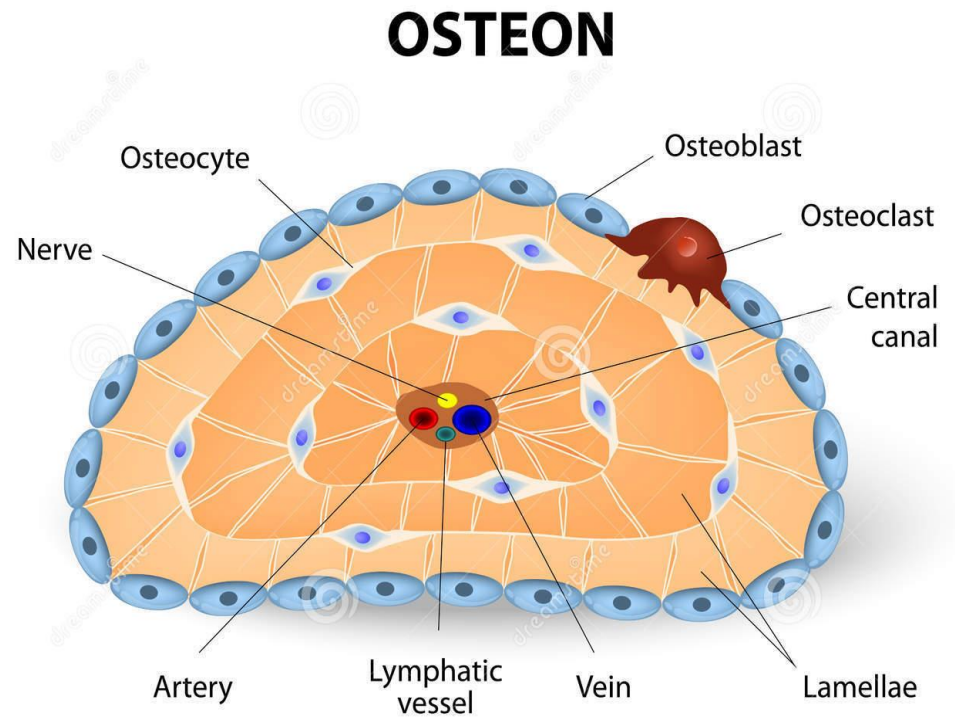
Types of Bones

1. Compact Bones (Cortical)

- Compact bone appears very dense.
 - It actually contains canals and passageways that provide access for nerves, blood vessels, and lymphatic ducts.
 - The structural unit of compact bone is the osteon or Haversian system.
 - Each osteon is an elongated cylinder running parallel to the long axis of the bone.
 - Structurally each osteon represents a weight bearing pillar.
- 

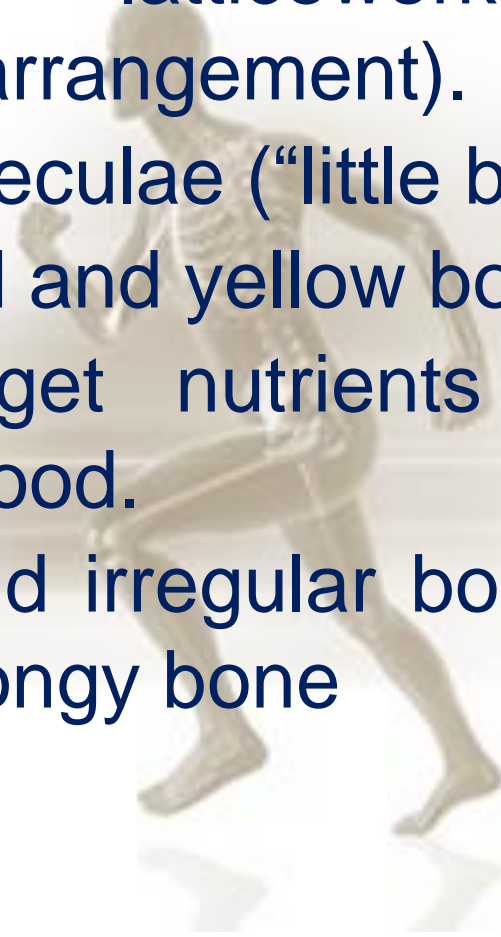
An Osteon

- Each osteon is a group of hollow tubes of bone matrix
- Each matrix tube is a lamella
- Collagen fibers in each layer run in opposite directions
- Resists torsion stresses

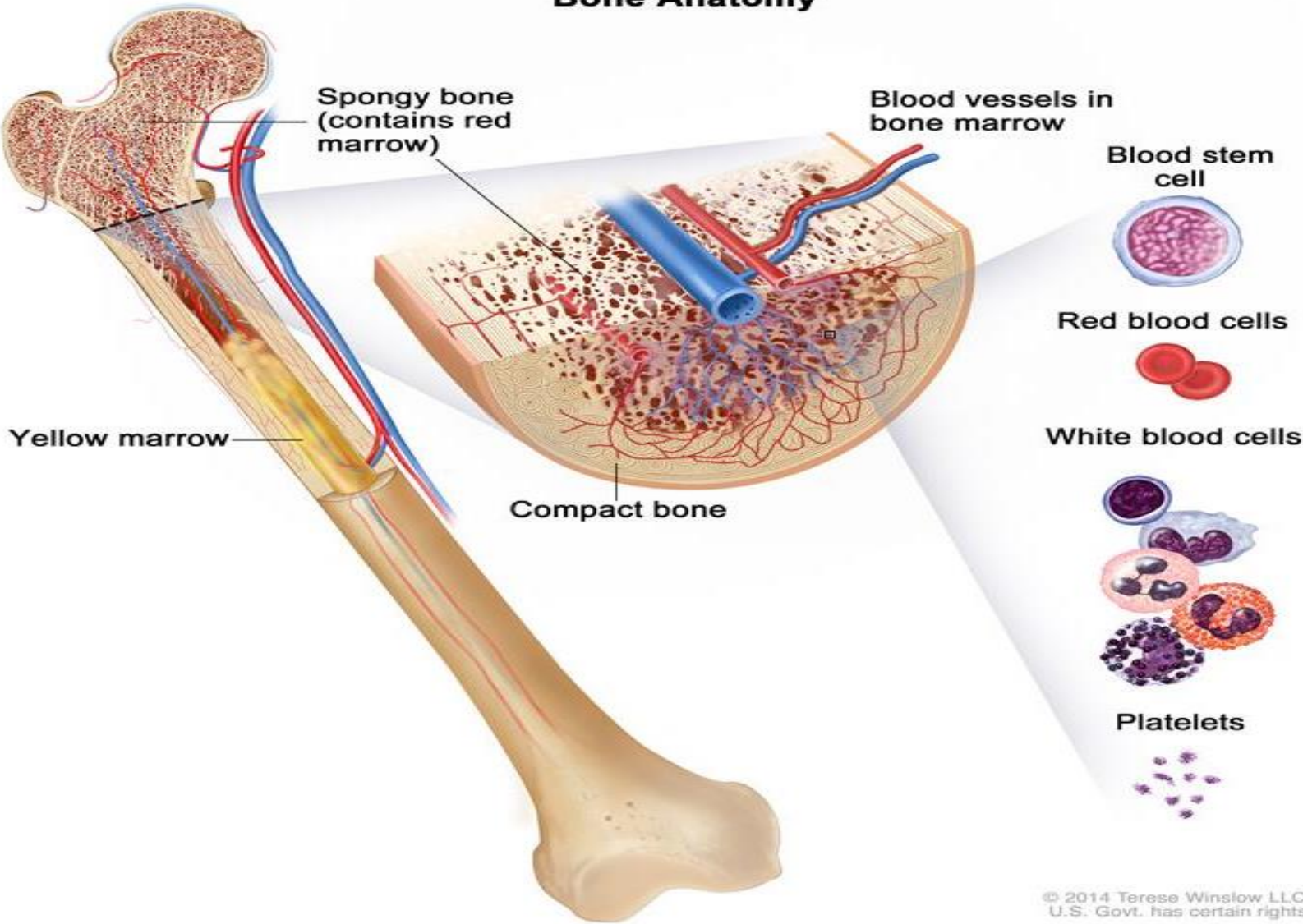


2. Spongy Bone (Cancellous):

- internal layer - latticework of bone tissue (haphazard arrangement).
- made of trabeculae (“little beams”)
- filled with red and yellow bone marrow
- osteocytes get nutrients directly from circulating blood.
- short, flat and irregular bone is made up of mostly spongy bone



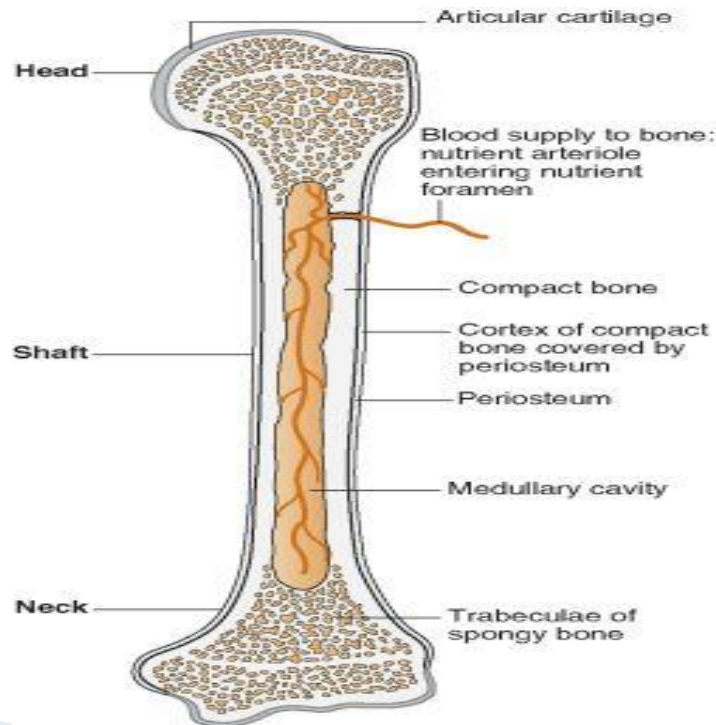
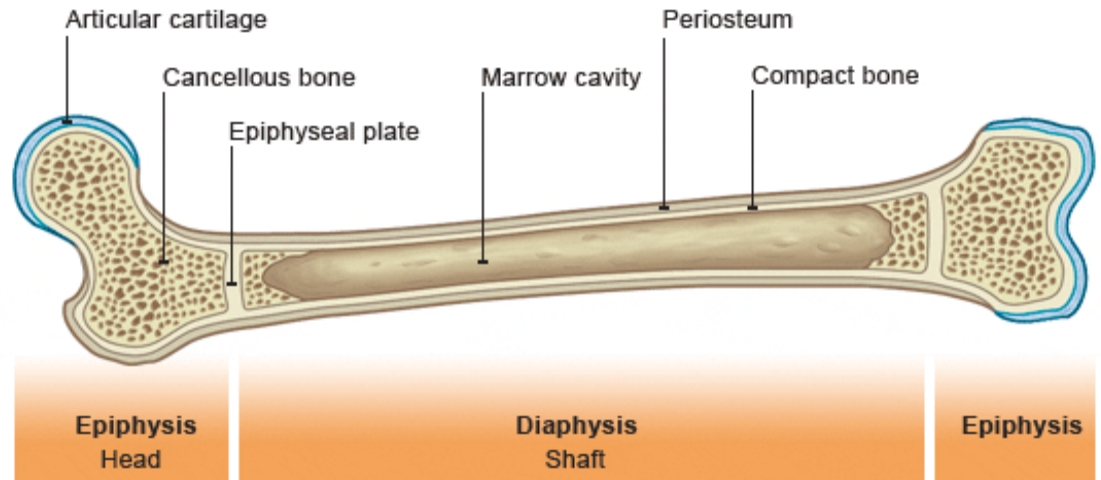
Bone Anatomy



Gross Anatomy

▶ Landmarks on a typical long bone

- Diaphysis
 - Epiphysis
 - Membranes
- ## ▶ Membranes
- Periosteum
 - Endosteum

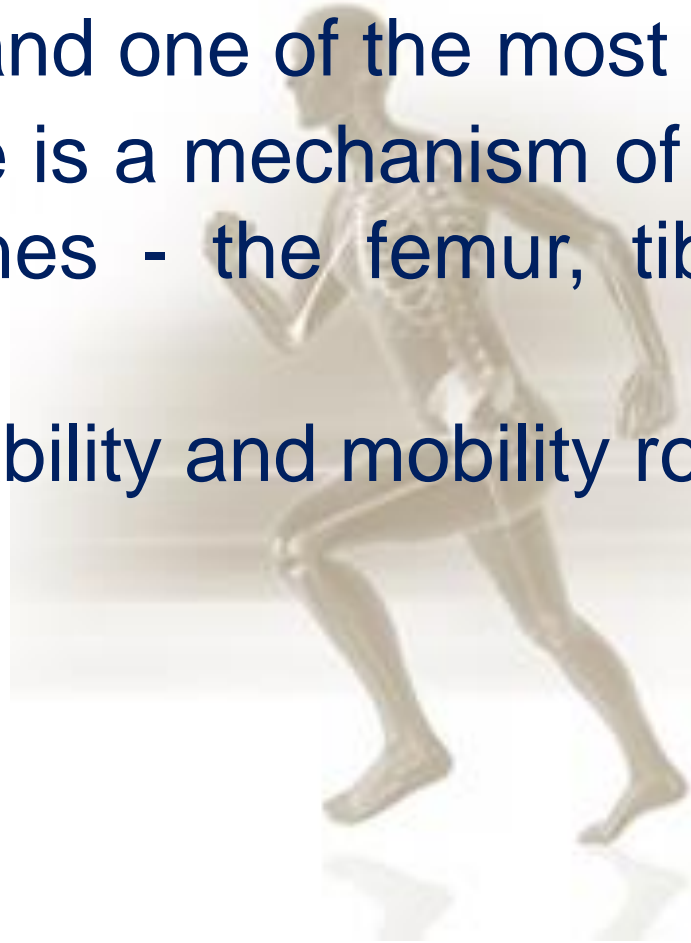




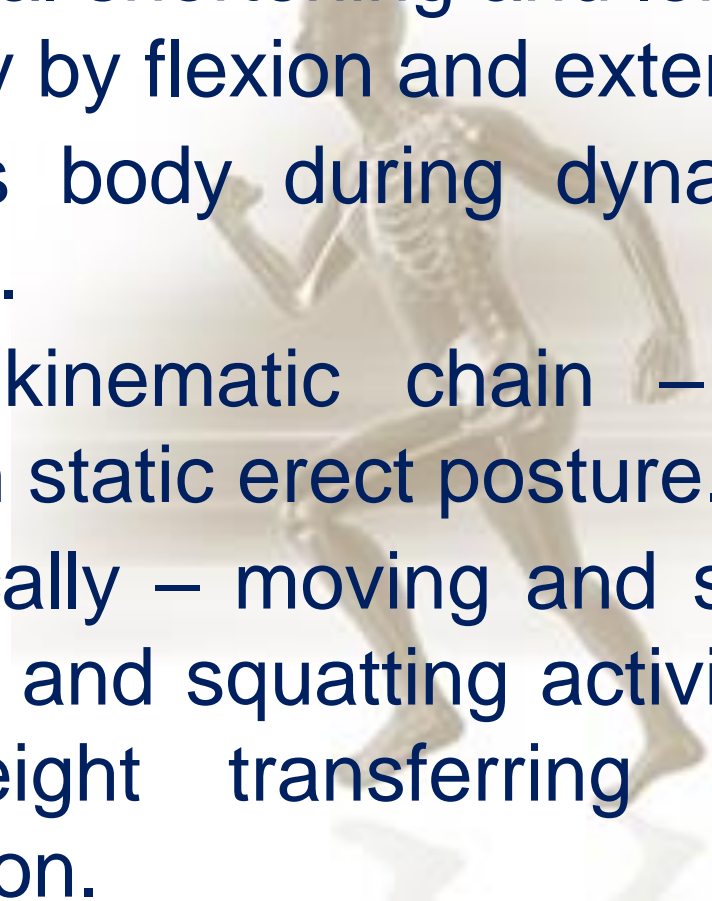
Anatomy of the Knee joint

Introduction of Knee Joint

- Largest and one of the most complex joint.
- The knee is a mechanism of three joints and Four bones - the femur, tibia, patella and fibula.
- Major stability and mobility roles.



Functions

1. Functional shortening and lengthening of the extremity by flexion and extension.
 2. Supports body during dynamic and static activities.
 3. Closed kinematic chain – support body weight in static erect posture.
 4. Dynamically – moving and supporting body in sitting and squatting activities, supporting and weight transferring activity during locomotion.
- 

- **Knee Complex:**
Tibio-femoral and Patello- femoral
 - **Type of Joint (Tibio- femoral):**
Double Condylloid joint
 - **Patello-femoral**
Patella serves as pulley mechanism for quadriceps muscles
 - **Degrees of freedom of motion!**
 1. Flexion/Extension
 2. Medial/Lateral rotation
 3. Adduction/abduction
- 

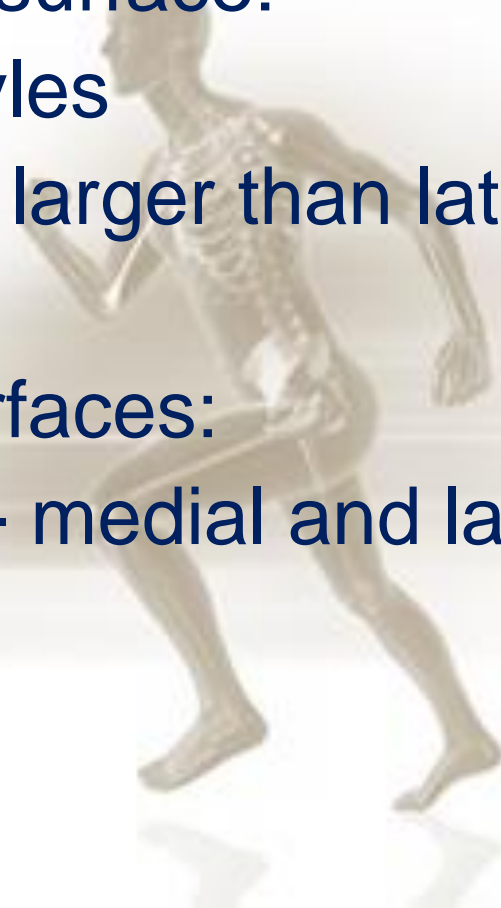
Articular Surfaces

Proximal Articular surface:

- ▶ Femoral condyles
- ▶ Medial condyle larger than lateral

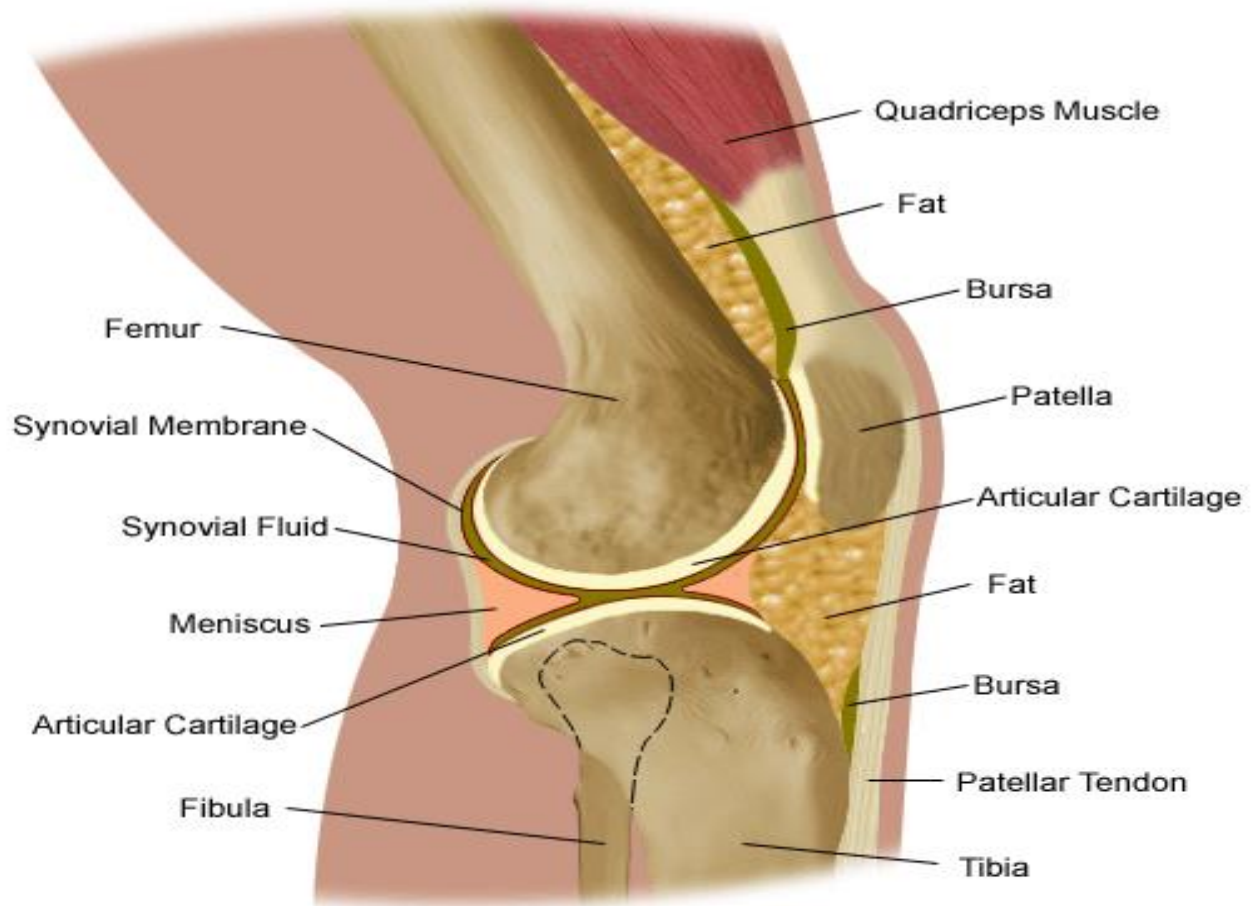
Distal Articular Surfaces:

- ▶ Tibial condyles- medial and lateral

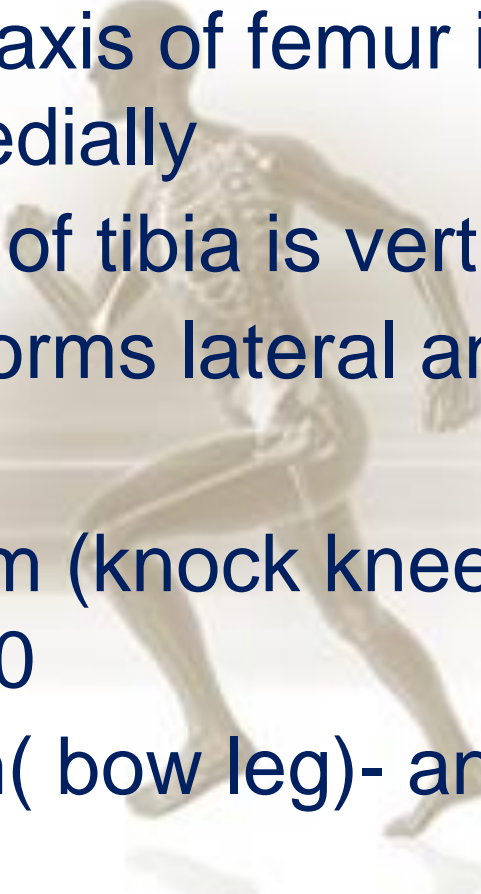


Structure of the Knee

Anatomy of the Knee



Alignment of Knee

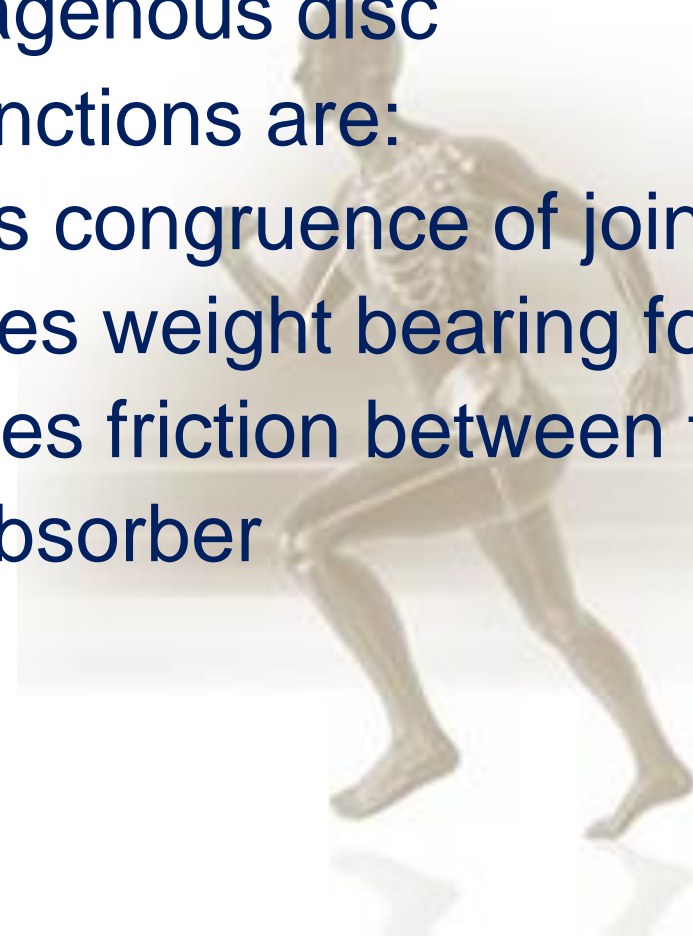
- ▶ The anatomical axis of femur is oblique directed inferiorly and medially
 - ▶ Anatomical axis of tibia is vertical
 - ▶ Normally knee forms lateral angle of 170- 175
 - ▶ Variations
 1. Genu Valgum (knock knee)- lateral angle less than 170
 2. Genu Varum(bow leg)- angle is more than 180
- 

Joint Menisci

- Fibrocartilagenous disc

Menisci functions are:

1. Improves congruence of joint
2. Distributes weight bearing forces
3. Decreases friction between tibia and femur
4. Shock absorber



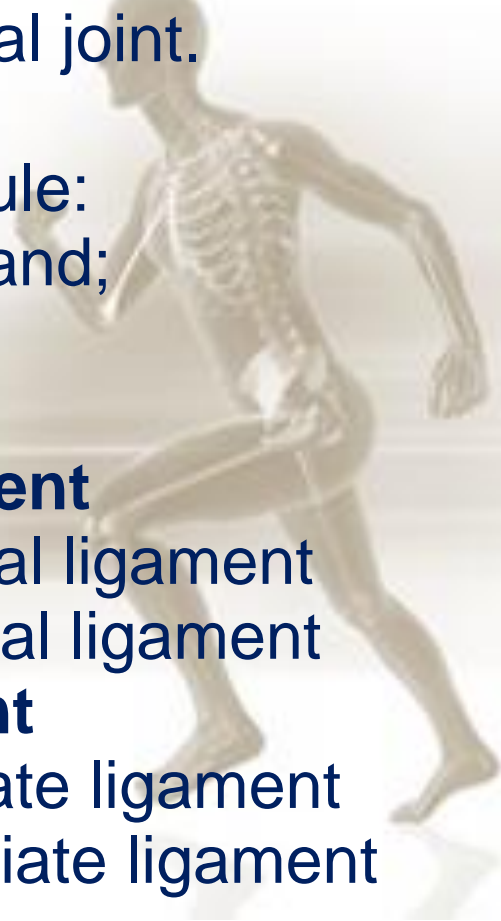
Capsule and Ligaments

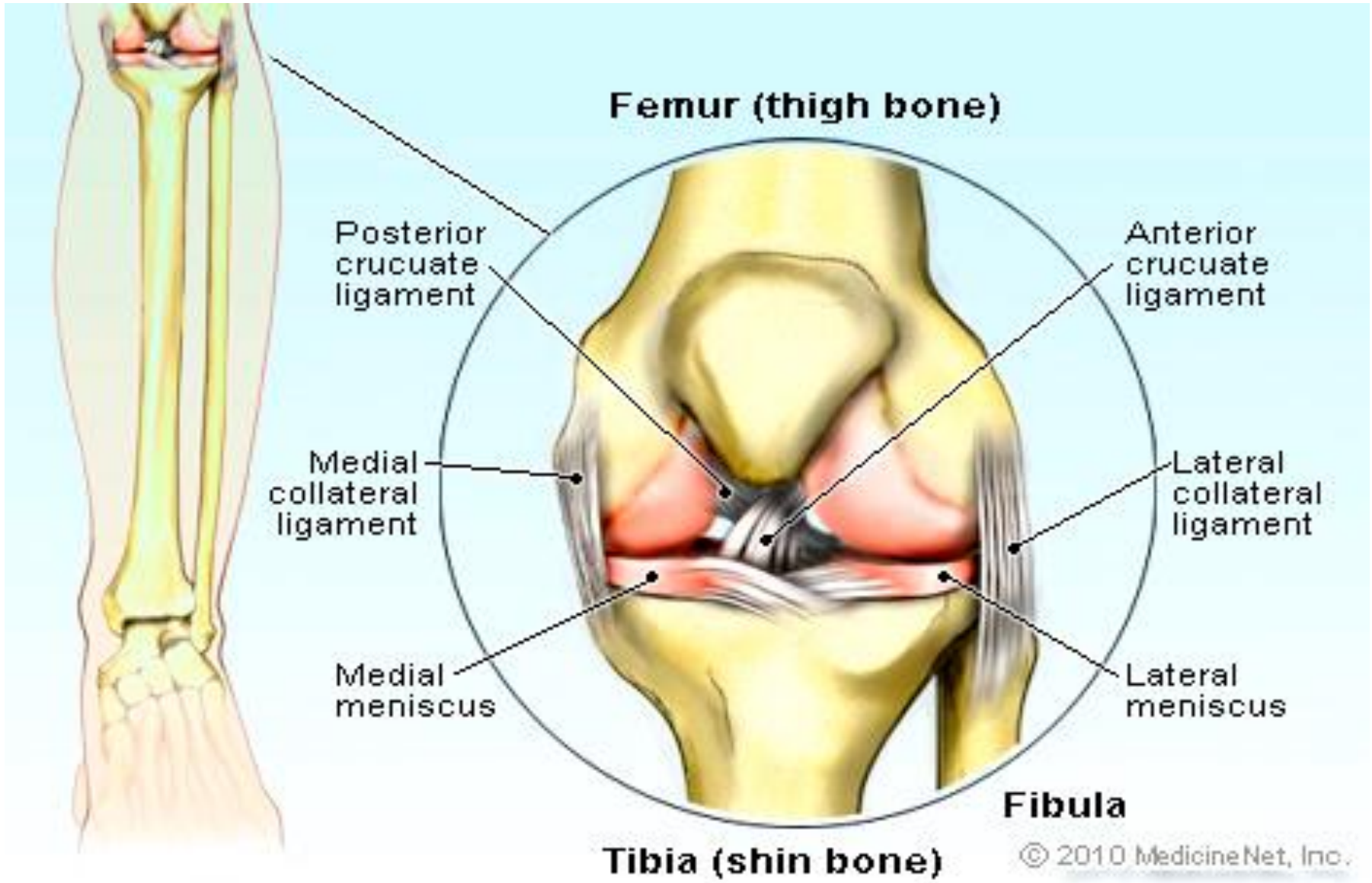
- **Capsule** encloses medial and lateral tibio-femoral joint and patello- femoral joint.

Two layers of capsule:

- Fibrous layer and;
- Synovial layer

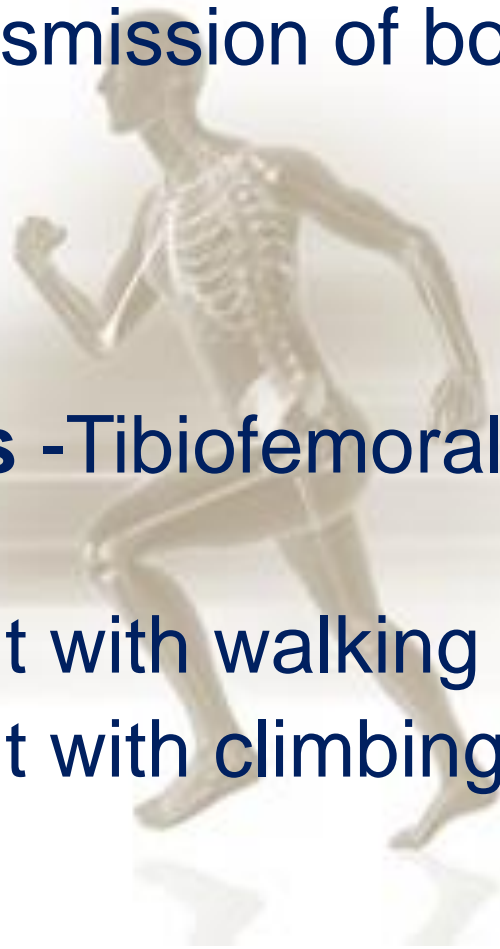
- **Collateral Ligament**
 1. Medial collateral ligament
 2. Lateral collateral ligament
- **Cruciate Ligament**
 1. Anterior Cruciate ligament
 2. Posterior Cruciate ligament





Tibiofemoral Articulation

- **Function**- transmission of body weight from femur to tibia
- **Biomechanics** -Tibiofemoral joint reaction force :
 - 3x body weight with walking
 - 4x body weight with climbing



Patellofemoral Articulation

- ▶ **Function-** transmits tensile forces generated by the quadriceps to the patellar tendon
- ▶ **Biomechanics-** patellofemoral joint reaction force:
 - 7x body weight with squatting
 - 2-3x body weight when descending stairs

Main Muscles and Bursae of the Knee Joint

- Quadriceps
- Gastrocnemius
- Hamstrings
- Gracilis
- Sartorius
- Popliteus
- Soleus

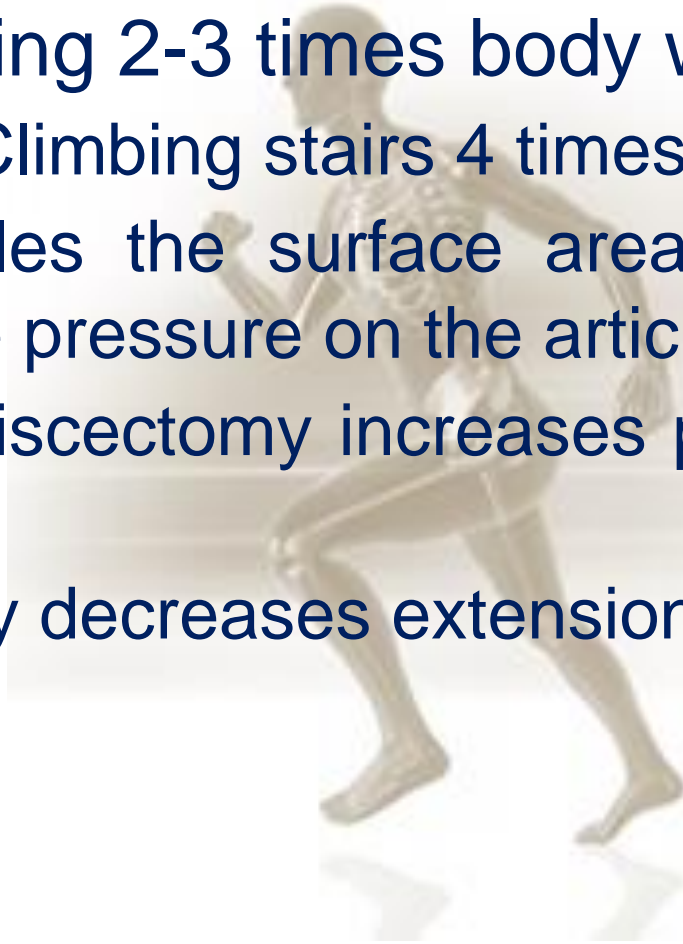


Bursae

There are 14 Bursae at knee joint. They reduce friction between inter tissue during movement

Compression forces at Knee

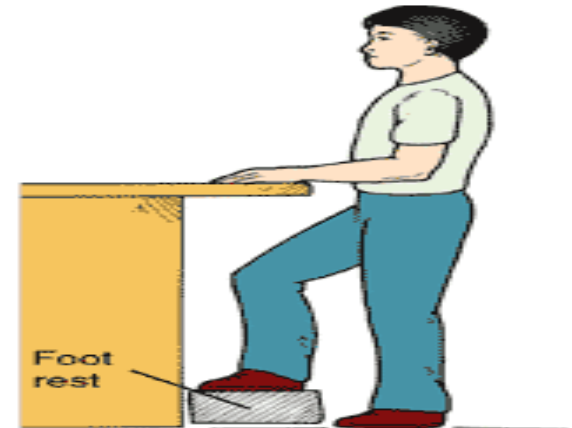
- While walking 2-3 times body weight
- Ascending/Climbing stairs 4 times body weight
- Menisci triples the surface area by significantly reducing the pressure on the articular cartilage
- Lateral meniscectomy increases pressure at knee by 230 %
- Patellectomy decreases extension force by 30%



Proper Sitting, Standing, and Lifting



Sitting



Standing

Lifting



1. Bend your knees and squat down to a comfortable level.



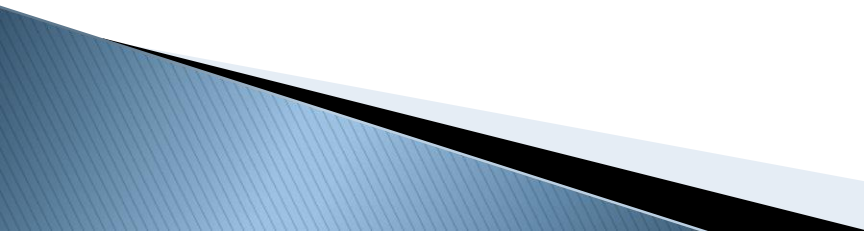
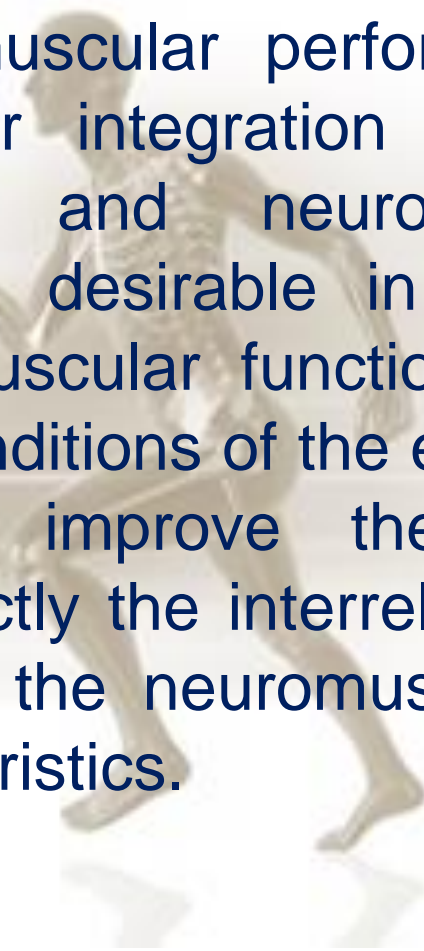
2. Lift the object and bring it close to your body.



3. Return to an upright position by pushing up with your legs and buttocks.

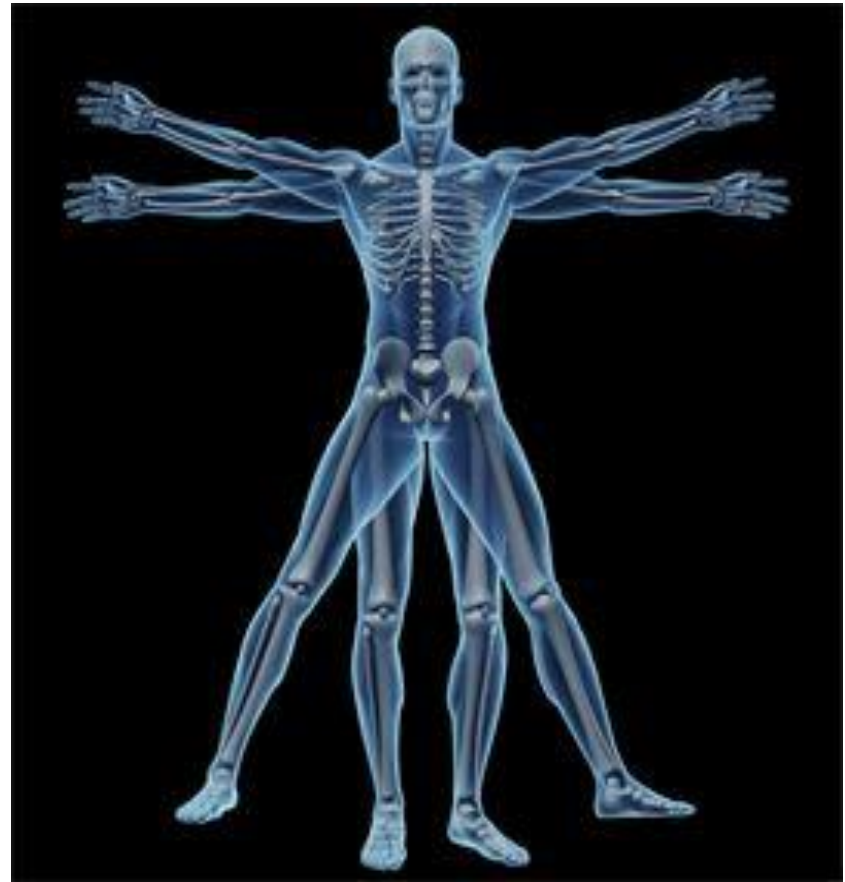
Research

- ▶ Research of neuromuscular performance offers a unique possibility for integration of biomechanics, muscle physiology and neurophysiology. This integration especially desirable in situations where recording of neuromuscular function is made under normal movement conditions of the entire physiological range. This would improve the possibilities to investigate more exactly the interrelationship between structural aspects of the neuromuscular system and performance characteristics.



Areas of study, Research and Practice in Healthcare Biomechanics

- ▶ Sport and Exercise Science
- ▶ Coaching
- ▶ Ergonomics
- ▶ Equipment Design
- ▶ Gait & Locomotion
- ▶ Orthopedics - Rehabilitation - Physiotherapy, Occupational Therapy
- ▶ Prosthetics and Orthotics
- ▶ Motor Control
- ▶ Computer Simulation



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- ▶ **Medline;** David C. Dugdale, III, MD, Professor of Medicine, Division of General Medicine, Department of Medicine, University of Washington School of Medicine, Seattle, WA.
- ▶ **Merriem Webster;** anatomy and fuction of muscle
- ▶ **Gray's Anatomy**



Thank You!