

5.1: Vertebral column & back.

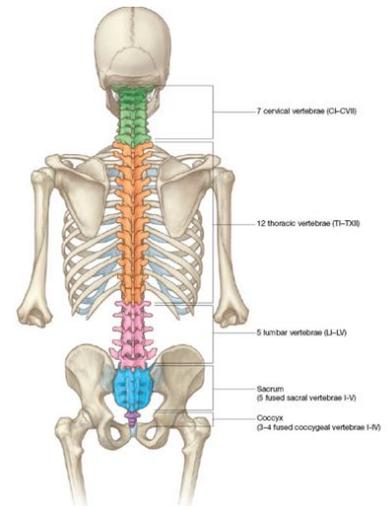
Overview.

- Bones
 - vertebral column.
 - typical vertebra.
 - vertebral canal.
 - spinal nerves.
- Joints
 - Intervertebral disc.
 - Zygapophyseal (facet) joint.
- Muscles
 - 2 compartments:
 - Extrinsic
 - Intrinsic
 - Lumbar fascia.
- Applied anatomy.



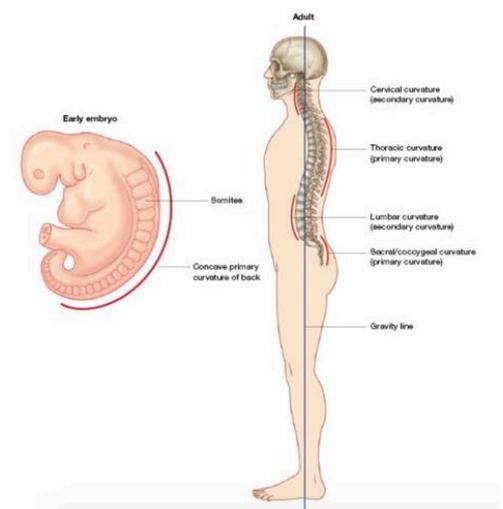
Bony framework of the vertebral column.

- The **vertebral column** is part of the **axial skeleton** and **regionally distinct**:
 - Cervical (7)
 - thoracic (12)
 - lumbar (5)
 - sacrum (5 - eventually fuse)
 - coccyx (2-4 fused - evolutionary remnant) vertebrae
 - coccygeal vertebrae vary between individuals.
- Each successive vertebra articulates to the previous one and form intervertebral **joints** (& **discs**).
- There are several **foramina** (opening) in the vertebral column such as:
 - the **vertebral canal** for the **spinal cord**.
 - the **intervertebral foramen** for the **spinal nerves**.
- Function:
 - It forms a central **support** for the central axis.
 - **Movement**.
 - Greater ROM (flexion extension etc.)
 - **Protection** of the **nervous system**.

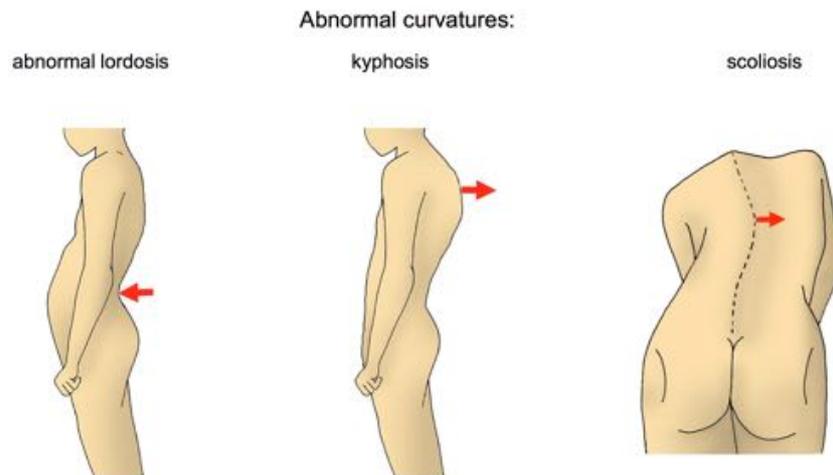


Structure of the vertebral column.

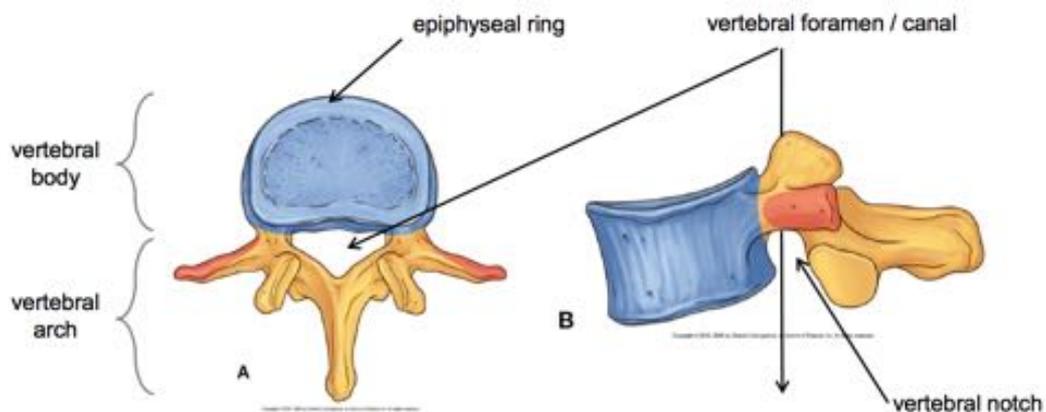
- Developmentally the vertebral column starts off as a single **foetal/ primary C curve**.
 - It is anteriorly concave.
- By about 3-4 months postnatally our **muscles** of the **back grow** and we develop **secondary 'lordotic' curves** in the **cervical** and **lumbar** regions.
 - Primary curve is retained in the thoracic and sacral region.
 - Secondary curve development is required for proper upright position.



- **Abnormal curvature** may occur which include
 - **abnormal lordosis**
 - usually an exaggerated lumbar curve
 - Obese man or pregnant women can develop this because the weight pulls the lumbar forward.
 - **Kyphosis**.
 - which gives a hunch back pose.
 - **scoliosis**
 - which involves curving of the vertebrae laterally.



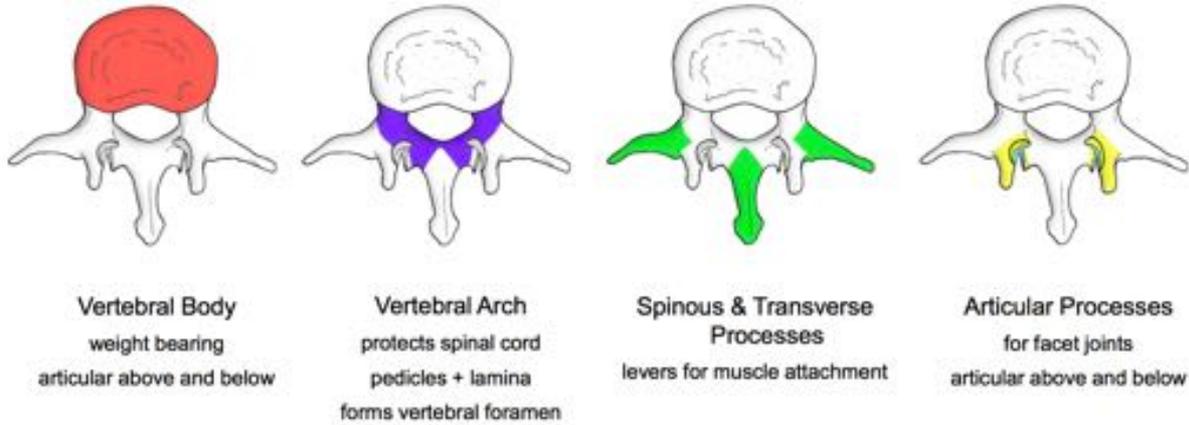
Structure of a typical lumbar vertebra.



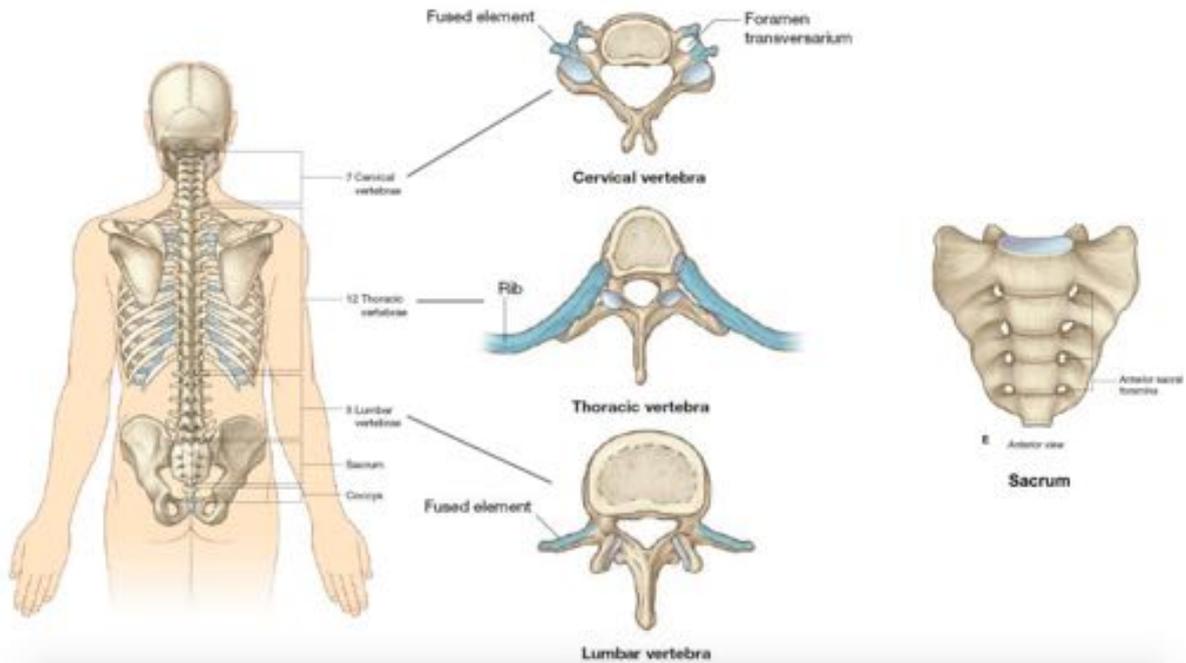
- Vertebrae are **irregular bones** consisting of a **vertebral body** and a **vertebral arch**.
 - In the **body**, the central region is rather roughened while the outer perimeter is rather smooth.
 - The smooth region is called the **epiphyseal ring**.
 - The **arch** is made up of the **transverse**, **spinous**, and **articular** processes.
- The **middle opening** is called a **foramen**.
 - Once we start stacking up these vertebra; the foramens then become a single **canal** which is where the spinal cord runs.
- The **vertebral notch** is the pit formed because the vertebral arch is not as large as the vertebral body.

- These parts have different roles:

Vertebral body	- weight bearing , they increase in size down the vertebral column as they need to support more weight.
Vertebral arch	- protects the spinal cord and forms the vertebral foramen with the pedicles and laminae . (collectively they form the internal portion of the arch) - The pedicle joins the vertebral body to the vertebral arch. - The laminae is part of the arch that forms the triangular top.
Spinous and Transverse processes	- levers for muscle attachment .
Articular processes	- for facet joints above and below, connecting to adjacent vertebrae.



- The vertebrae are regionally distinct.
 - They differ in size.
 - Cervical vertebrae are much smaller compared to the lumbar vertebrae.
 - This is because of the difference in weight beard.

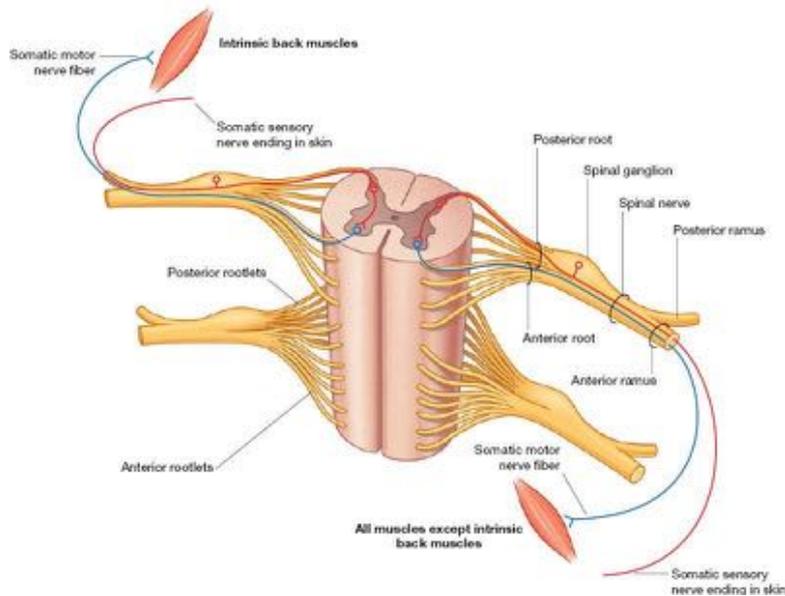


The vertebral canal and spinal cord.

- The spinal cord does not pass entire length of vertebral column, **terminates at L1/2**.
 - However, the nerve roots do extend in a bundle called the **cauda equina**.
- The spinal cord has meninges just like the brain.
- The peripheral nerves coming from the spinal cord exit the vertebral column through the intervertebral foramen formed by the vertebral notches of adjacent vertebrae.

Spinal nerves.

- **Spinal nerves** emerge bilaterally from the spinal cord which consist of:
 - **ventral (motor) roots**; cell bodies in the spinal cord ventral horn.
 - **dorsal (sensory) roots**; cell bodies in the dorsal root ganglion.

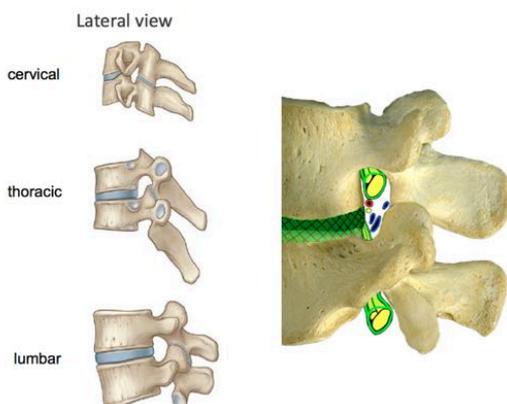


- As the **mixed spinal nerves emerges** from the **intervertebral foramen**, they divide into two major branches:
 - a **posterior ramus**, which only innervates:
 - intrinsic back **muscles**.
 - the associated **facet joints**.
 - the overlying **skin** on the back.
 - an **anterior ramus**, which innervates most other skeletal muscles and most remaining areas of the skin.



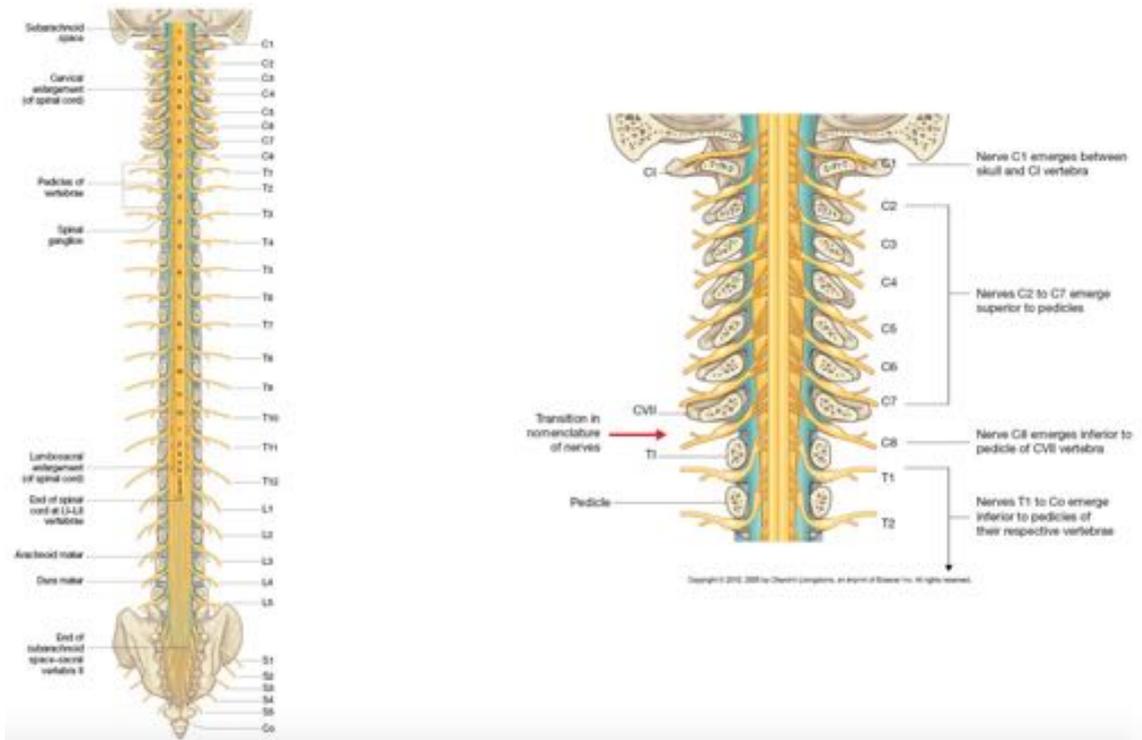
Intervertebral foramen.

- When the vertebrae articulate with each other, the notch turns into a foramen → **intervertebral foramen**.
- The **mixed spinal nerve** will then **exit** through here.



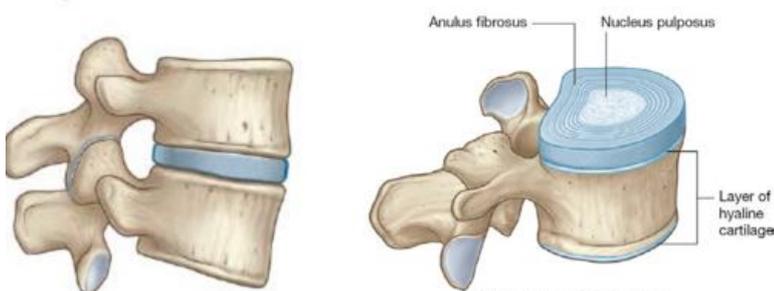
Nomenclature of the Spinal Nerves.

- Spinal nerves are given a name according to where they exit the spinal cord (although coccygeal vertebrae only give rise to one nerve).
 - The nerves are named by the vertebra that they exit superior to:
 - The nerve that exit above C1 is called C1 etc.
- (Exception is C8 nerve which is below C7 and above T1, this means there are 30 vertebrae and 31 nerves, 8 cervical nerves, only 7 cervical vertebrae).
 - From here there is a change in nomenclature of the nerve, they are named by the vertebra that they exit posteriorly to:
 - The nerve that exit below T1 is T1.

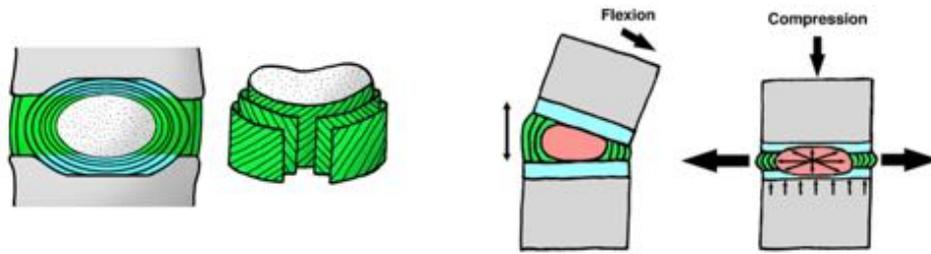


Joints of the vertebral bodies.

- There are two main types of joints in the spinal column:
 - Intervertebral joints** are **secondary cartilaginous joints** in the vertebral bodies consisting of the **nucleus pulposus** in the middle surrounded by the **annulus fibrosus** (they look like the annual growth rings of a tree):
- The **annulus fibrosus** functions to **keep the vertebrae together**.
 - It attaches to the **epiphyseal ring** above and below.
 - consists of **concentric lamellae** (fibrous rings orientated obliquely at right angles) that **enables movement** in all directions without tearing.
 - It also serves to **resist excessive movement**.
- The **nucleus pulposus** functions to **keep the vertebrae apart**.
 - It is encapsulated within the anulus fibrosus.
 - They are gel like and consist **almost entirely of water** so you **can't compress** them only deform, they are **shock absorbers**



*we gradually lose water from the nucleus over day so they compress a little and we get a tiny bit shorter, we also lose weight from the discs as we age.

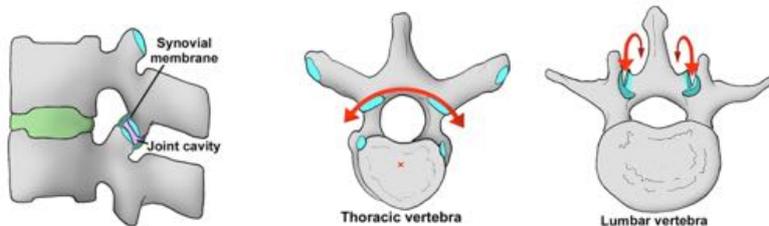


Anulus: concentric fibrous rings orientated at right angles enables movement in all directions without tearing resists excessive movement

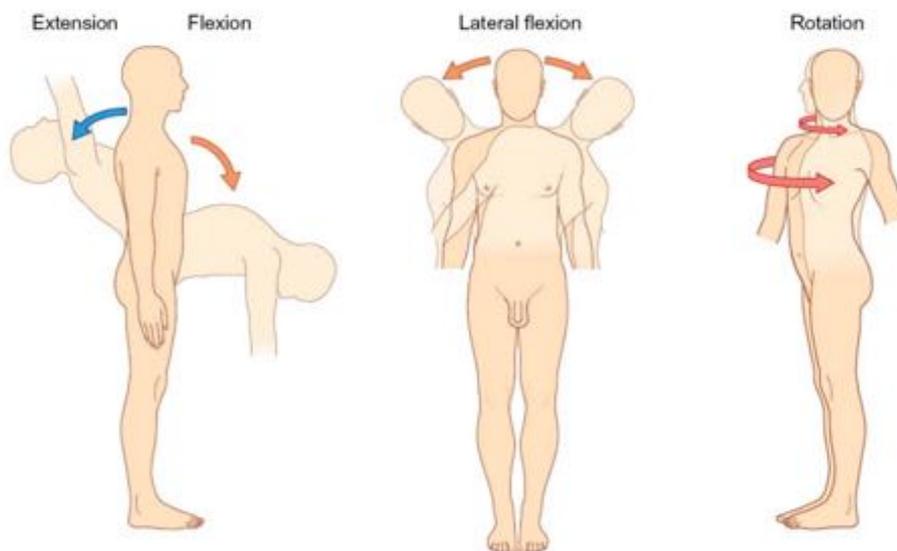
Nucleus: deformable but not compressible 'shock absorber'

The 2nd type of joint:

- **Zygapophyseal joints** (facet joints)



- They are **plane synovial joints** which permit gliding along only one axis.
- The **movements** available are **determined by their shape and depth** which varies depending on the regions of the spine. The orientation of them also differs regionally. E.g.
 - thoracic articular processes - orientated in the coronal plane and permit rotation
 - lumbar articular processes - orientated in the sagittal plane and permit flexion / extension



Ligaments of the vertebral column.

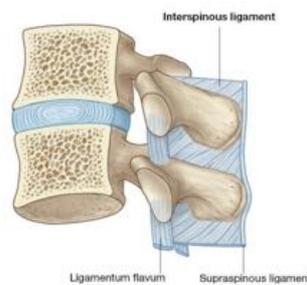
Joints are supported by ligaments and there are 5 important ligaments here that we need to know:

- **Anterior and Posterior Longitudinal Ligaments**
 - The posterior longitudinal ligament runs down the posterior side of the vertebral bodies and splays out to cover intervertebral discs when it reaches them. It reinforces the posterior aspect of the disc, and tends to cause disc bulges to move posterolaterally by stopping them from pushing out posteriorly. which compresses spinal nerves. Anterior longitudinal ligaments lie in front of the vertebral body, they are wider and much more simple.
- **Interspinous and Supraspinous Ligaments**
 - The interspinous ligament joins the spinous processes
- **Ligamenta Flava**
 - The ligamentum flavum runs between successive vertebral lamina, it's yellow because it contains a large amount of elastic fibres (unusual for a ligament). These elastic fibres allow the separation of lamina for flexion, although it still holds them together.

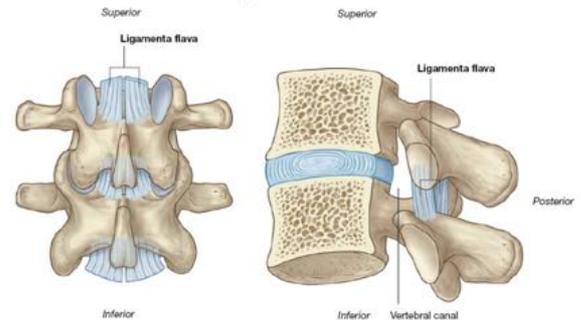
Anterior and Posterior Longitudinal Ligaments



Interspinous and Supraspinous Ligaments

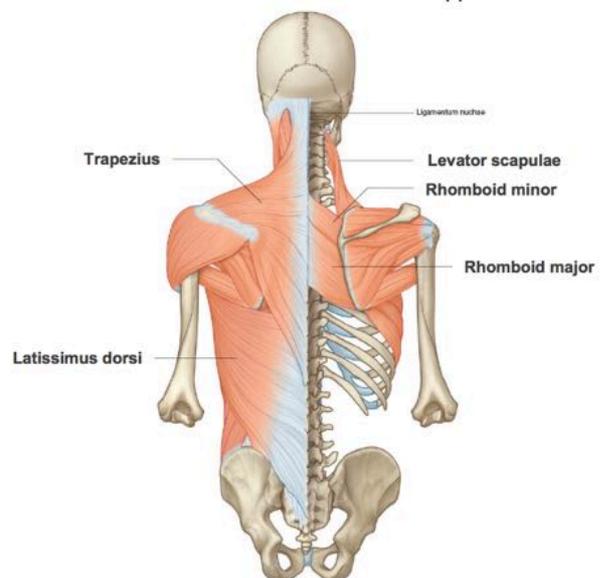


Ligamenta Flava



Muscles of the back.

- **Extrinsic (superficial) muscles** are those that **only attach to the vertebrae at one point**. They are not 'true' back muscles, the other **attachment is to the upper limb**.
 - Their primary function is on the upper limb.
 - They are innervated by **Anterior Rami**.
- We have four major extrinsic muscles in the back:
 - The **trapezius** attaches to the cervical and thoracic vertebrae, and the scapula.
 - Its main function is to stabilise and move the scapula.
 - The **latissimus dorsi** ("large muscle") attaches to the lumbar and sacral regions broadly, it comes up laterally and attaches to the humerus.
 - Responsible for movements such as pull-ups, row etc.
 - The **rhomboid** is divided into the major and minor, which both attach to the thoracic and cervical vertebrae.
 - Responsible for pulling scapulae medially etc.
 - The **levator scapulae** is a smaller muscle that elevates the scapula.
 - It attaches to the neck and scapulae.

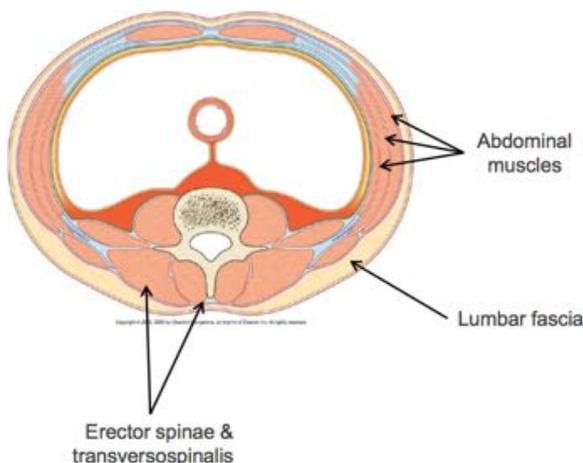


- **Intrinsic (deep) muscles** have both their **origin and insertion in back structures**.
 - Their primary function is to move the back.
 - They are innervated by **Posterior Rami**.
- We have two types:
 - The **erector spinae** which are **prime movers** responsible for maintaining upright posture (extension). They are long muscles that also work eccentrically to lower us down.
 - **Transversospinalis** muscles are shorter (passing only two vertebrae) and they are **stabilisers** that **prevent excess movement**. They **atrophy rapidly** after injury which causes longer lasting issues.



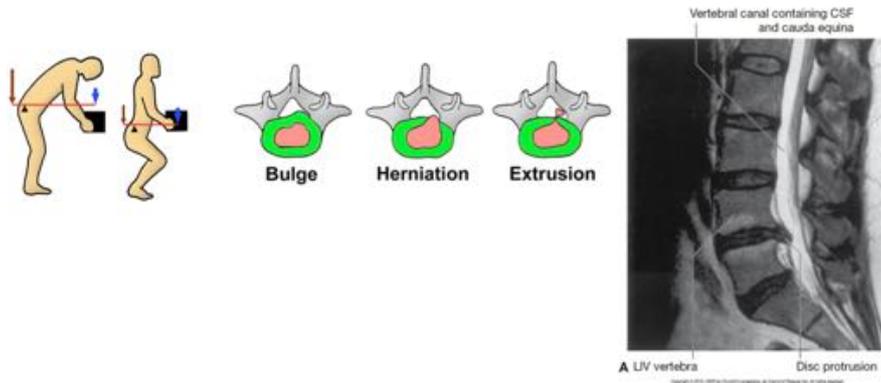
Lumbar fascia. (blue part in diagram above.)

- Fascia is everywhere in our bodies, it surrounds muscles, and groups of muscles doing similar actions allowing them to move together etc.
- **Lumbar fascia:**
 - Provides **attachments** for **extrinsic/intrinsic muscles** of the back
 - eg. trapezius, latissimus dorsi, erector spinae.
 - This **forms a tight compartment** for the **intrinsic muscles** (enhancing their actions).
- It is also **continuous** with the **abdominal wall**.
 - When lifting heavy, it is important to brace the abdominal muscle because this will trigger a reflex contraction of the back muscles which protects it from injury.



Applied anatomy of the back.

- **Disc prolapse** can occur if lifting heavy with improper form.
- Repetitive poor practices can force the **nucleus** back in a posterior direction which might impinge upon the nerves.
- The severity can vary:
 - **Bulge** = when the **nucleus pushes** into the **annulus** and creates a **bulge slightly laterally** in the **vertebral canal**.
 - **Herniation** = when the **nucleus** starts to **leak out** of the **annulus** and move into the **vertebral canal**.
 - **Extrusion** = when a small part of the **nucleus separates** and **comes out** into the **vertebral canal**.



Joint degeneration.

- Over time the **nucleus dehydrates** and the disc spaced is narrowed (less cushion).
 - This thinning of articular cartilage / narrowing of joint space forces the vertebra to come close.
- **Irritation from bone to bone contact** can cause formation of **bony outgrowths** called **osteophytes**.
 - Osteophytes may encroach and **impinge on adjacent structures**.
 - E.g. **spinal canal, intervertebral foramen**.
 - This causes severe pain especially with movement or weight bearing in the direction of osteophyte as it comes in contact with other bones.

