malipulizion سات تياه كن كناه حديث نبوى صلى الله عليه وسلم حضرت ابو ہریرة سے روایت ہے کہ نبی کریم صلی اللہ عليہ وسلم فے فرمایا: "سات تباه كن كنابول - بجو الوكول في يو جماده كوف كناه بي ؟ آت فرمایا: 1-الله المحساته کوشریک کرنا 2-جادو کرنا 3 - كى كوناحق مار ڈالنا 4 - ئودكھانا 5 - يتيم كامال ہڑ ب كرجانا 6-میدان جهاد سے بھاگ جانا 7- نیک عورتوں پر تبست لگانا (بخارى، سلم، ابودا ۋد بىنىن النسائى)

BIOMECHANICS OF SKELETAL MUSCLES

DR.AYESHA MUSTAFA(DPT), M.Phil(gold medilist)

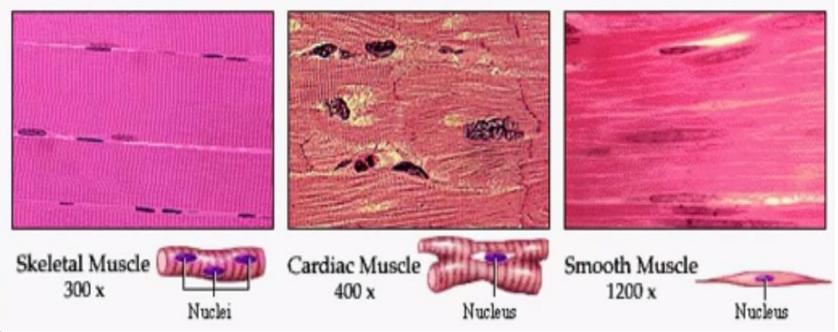
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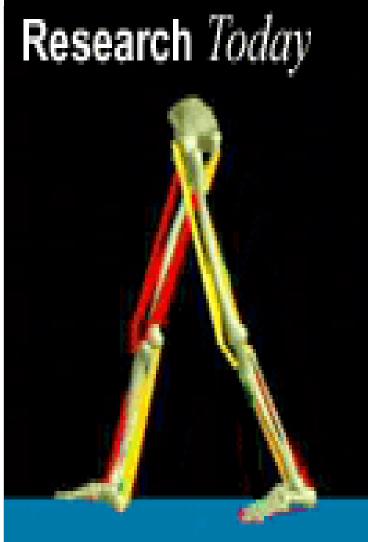
Muscles

- cardiac muscle: composes the heart
 Smooth muscle: lines hollow internal organs
- skeletal (striated or voluntary) muscle: attached to skeleton via tendon & perform movement



Characteristics of Skeletal Muscle

- Skeletal muscle 40-45% of body weight
 - more than 430 muscles
 - 80 pairs produce vigorous movement
 - **Dynamic:** locomotion of segments
- Static: maintains body posture
- Irritability ability to receive and respond to a stimulus
- Contractility ability to shorten when an adequate stimulus is received



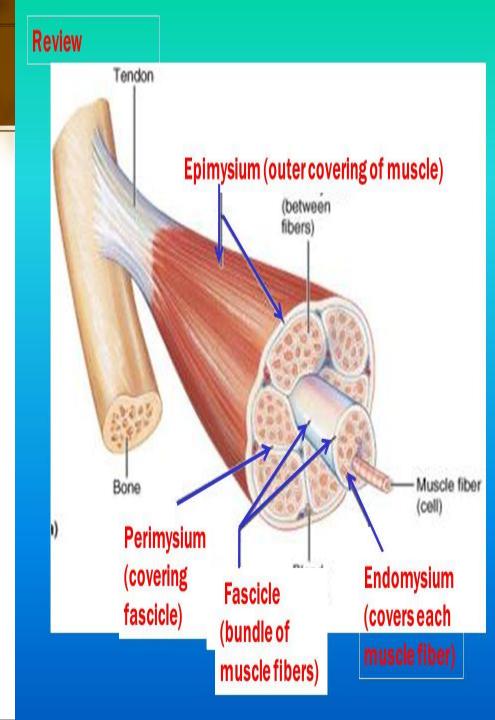
Characteristics of skeletal Muscles

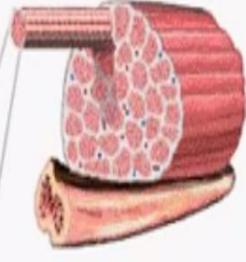
- Muscle cells are elongated
 Two attachments(origin & insertion)
- Contraction of muscles is due to movement of microfilaments
- All muscles share some terminology
 - Prefix myo refers to muscle
 - Prefix mys refers to muscle
 - Prefix sarco refers to flesh



Structure Muscle

- Epimysium- ensheaths the entire muscle.
- Perimysium around a fascicle (bundle) of fibers
- Endomysium around single muscle fiber





MUSCLE

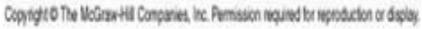


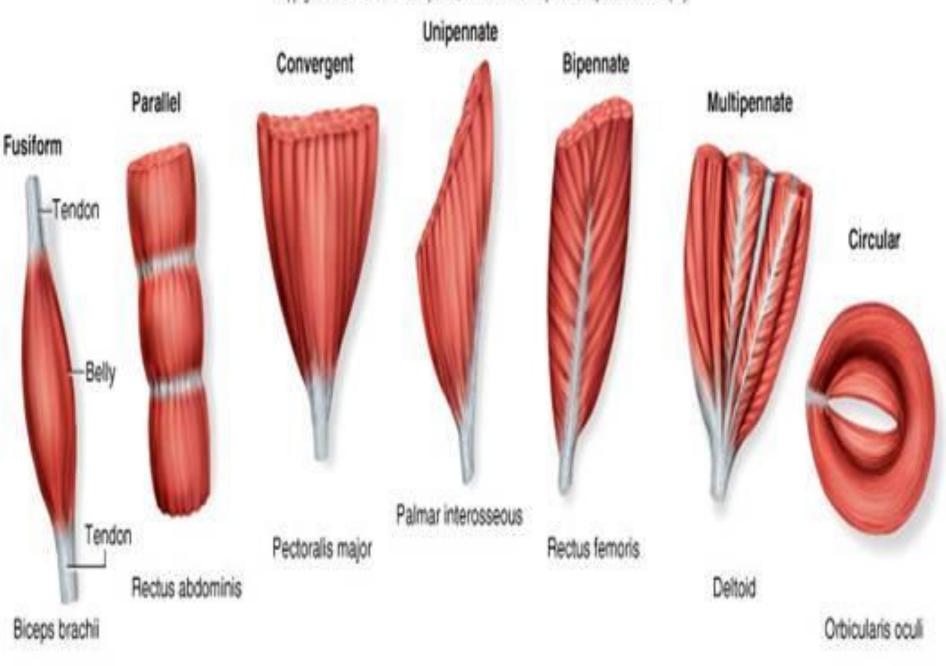
FASCICLE

MYOFILAMENTS

MUSCLE CELL (MUSCLE FIBER)

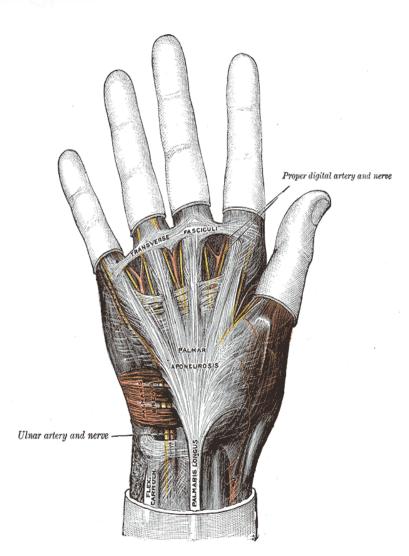
MYOFIBRIL





Skeletal Muscle Attachments

- **Epimysium** blends into a connective tissue attachment called Tendon – cord-like structure
 - Aponeuroses sheet-like structure
- Sites of muscle attachment
 - -Bones
 - Connective tissue coverings



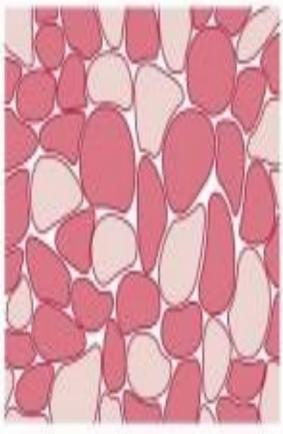
Composition & structure of skeletal muscles

Two parts (on basis of neural connections)

- Muscle spindle(intrafusal fibers & extrafusal fibers)
- Golgi tendon organs
- Characteristics on bases of color of muscles fibers:
- Red fibers(slow twitch, type 1)
- White fibers (fast twitch type 2)

SLOW TWITCH VS FAST TWITCH MUSCLE FIBRES

FEATURES	TYPE I MUSCLE FIBER	TYPE II MUSCLE FIBER	
FORCE OF CONTRACTION	Slow	Fast	
RED COLOR	High (aka Red Fibers)	Low (aka White Fibers)	
MITOCHONDRIA & MYOGLOBIN	High	Low	
OXIDATIVE CAPACITY	High	Low	
CAPILLARY DENSITY & FATIGUE RE- SISTANCE	High	Low	
MAIN SOURCE OF ENERGY	Triglycerides	Glycogen & Creatine Phosphate	
DURATION OF USE	Long	Short	
GLYCOGEN & GLYCOLYTIC CAPACITY	Low	High	
POWER	Stamina Red Tunk	Strength	
HIGH AMOUNT IN	Postural Muscles (Axial)	Peripheral Muscles	
INCREASED IN	Marathon Runner (Gastrocnemius)	Sprinter (Gastrocnemius)	
	Swimmer (Post. Deltoid)	Pole Vaulting, Shot Putter	

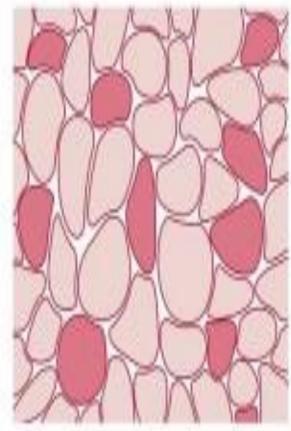






- Contraction of the second second





strand and the second s



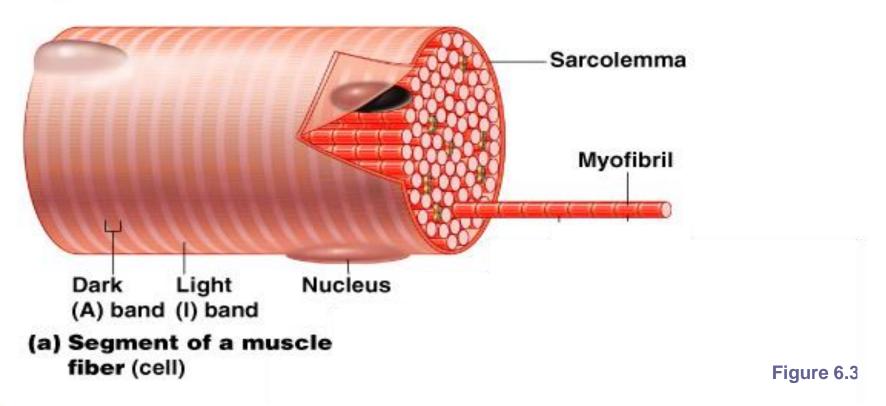
Muscle Differentiation (types of fibers)

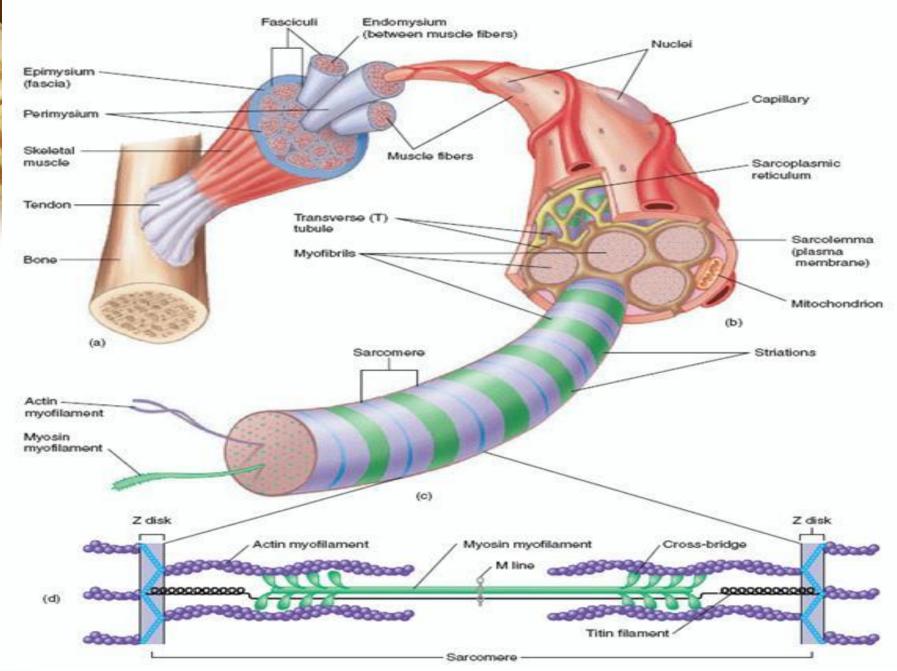
OF BRIDE	I (slow-twitch oxidative)	IIA (fast-twitch oxidative glycolytic)	IIB fast-twitch glycolytic
Contraction speed	Slow	fast	fast
Myosin-ATPase activity	Low	High	High
Primary source of ATP production	Oxidative phosphorylation	Oxidative phosphorylation	Anaerobic glycolysis
No. of mitochondria	Many	Many	Few
Capillaries	Many	Many	Few
Myoglobin contents	High	High	Low
Muscle Color	Red	Red	White
Glycogen content	Low	Intermediate	High
Glycolytic enzyme activiyt	low	intermediate	high
Fiber diameter	small	Intermediate	Large
Rate of fatigue	slow	Intermediate	Fast



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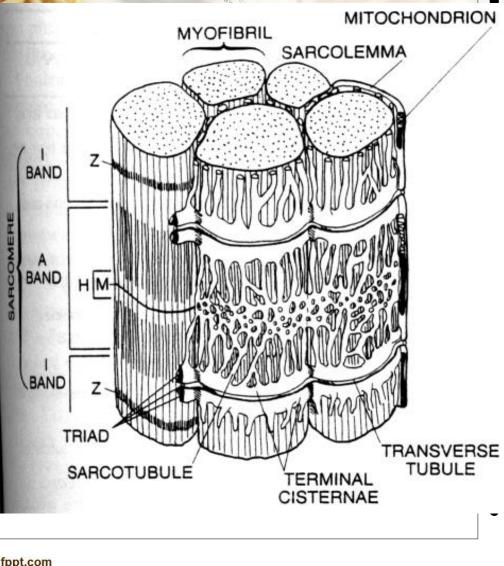
- Cells are multinucleate
- Nuclei are just beneath the sarcolemma
- Sarcoplasm (glycogen & fat,)mitochondric, SR
- Muscle fiber contain myofibral (actin & myosin





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Sarcoplasmic reticulum



Network of tubules & sacs

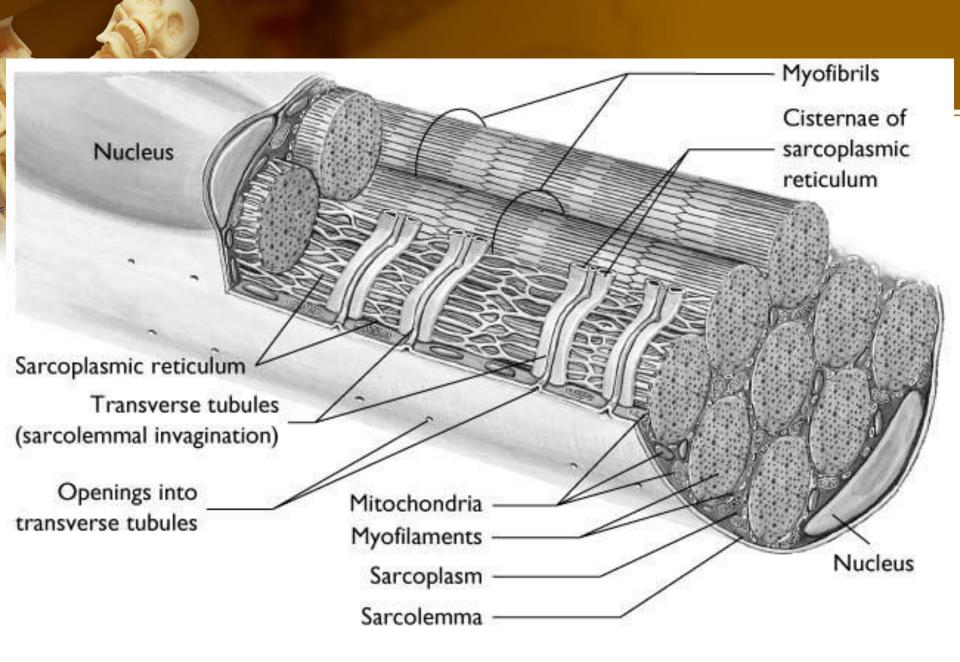
Parallel to myofibrils

Enlarged & fused at junction between A & I bands: transverse sacs (terminal cisternae)

Triad {terminal cisternae of transverse tubule}

T system: duct for fluids help in propagation of electrical stimulus for contraction (action potential)

Sarcoplasmic reticulum store calcium





Myofibril

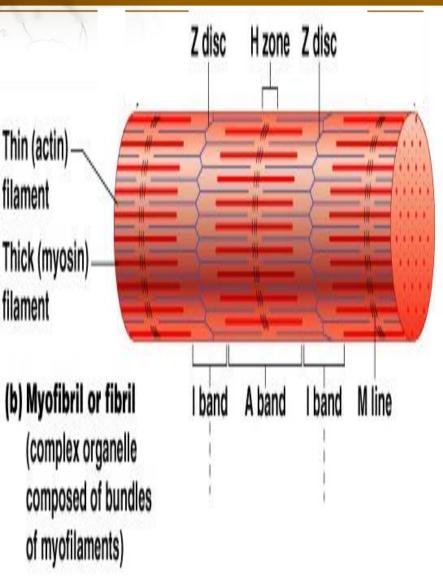
- Bundles of myofilaments
- Myofilaments are aligned to give distinct bands
- -Iband =

light band

A band =

dark band

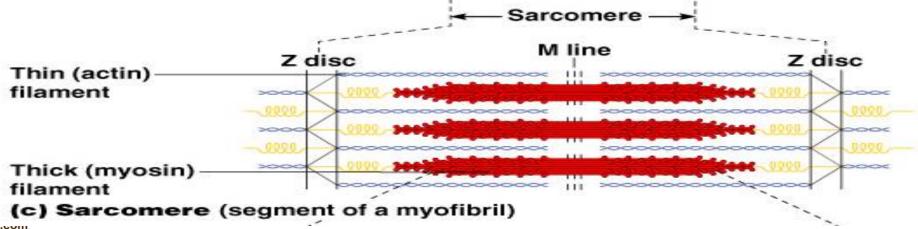
Organization of these bands called sarcomere: contractile unit of muscle fibers



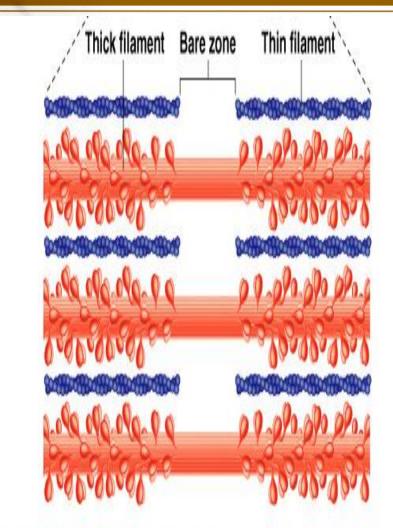
structure of sarcomere

A bands: thick filaments in centre of sarcomerse I bands: thin filaments not overlap with thick filaments. Thin filament (actin 5nm) + thick filament (myosin 15 nm)

- Z line: short elements that links thin filaments
- H zone: gap between ends of thin filaments in center



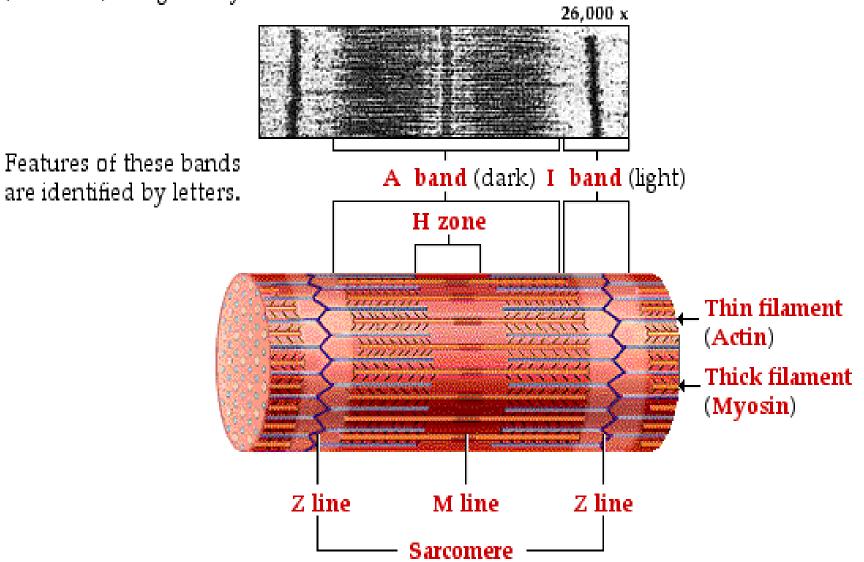
- Myosin filaments have heads
 Or (extensions, or cross bridges)
- Myosin and actin overlap somewhat during contraction
- At rest, there is a bare zone that
- lacks actin filaments



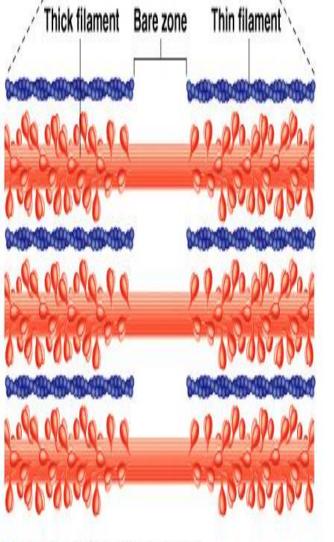
(d) Myofilament structure (within one sarcomere)

ARRANGEMENT OF MYOFILAMENTS

The arrangement of thick and thin myofilaments forms light and dark alternating bands (striations) along the myofibril.

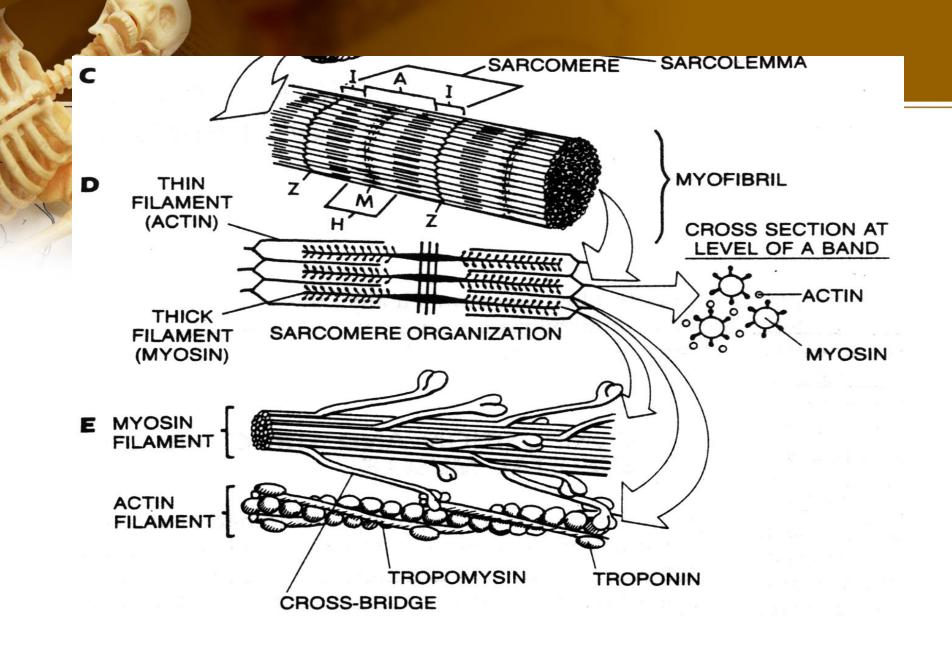


Molecular composition of myofibril



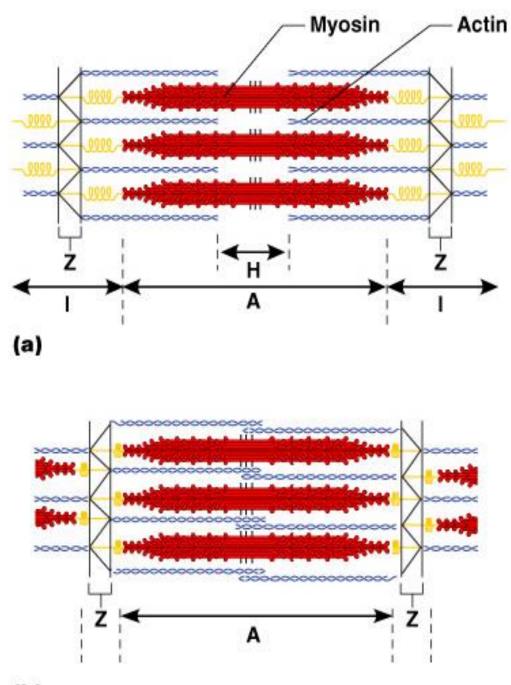
(d) Myofilament structure (within one sarcomere)

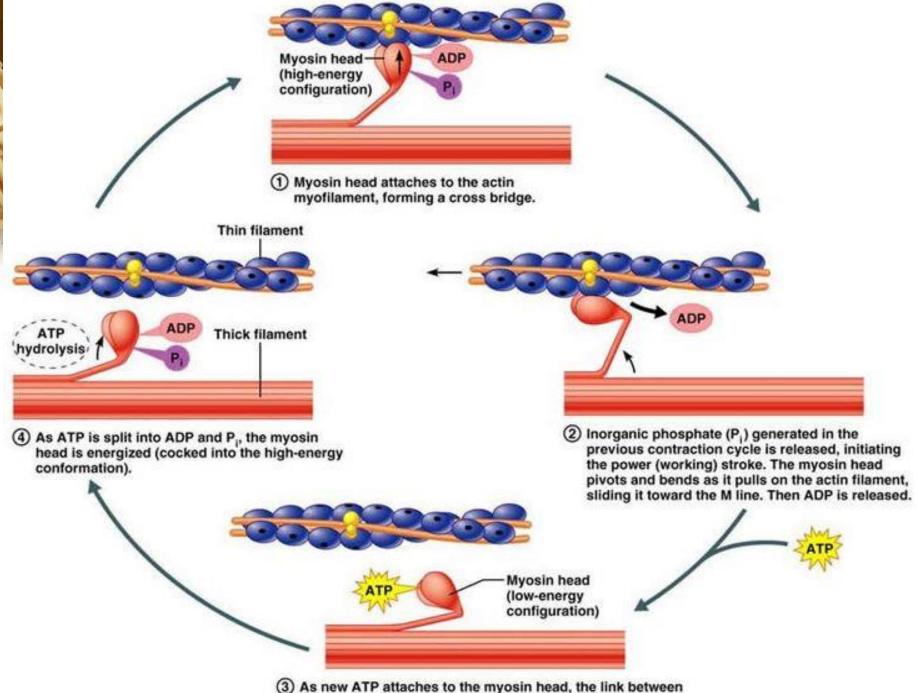
- Myosin composed of individual molecules each has a globular head and tail
- Actin has double helix; two strands of beads spiraling around each other
- Cross-bridge: actin & myosin
 overlap (A band)
- Troponin & tropomysin
 regulate making and breaking
 contact between actin &
 myosin



The Sliding Filament Theory

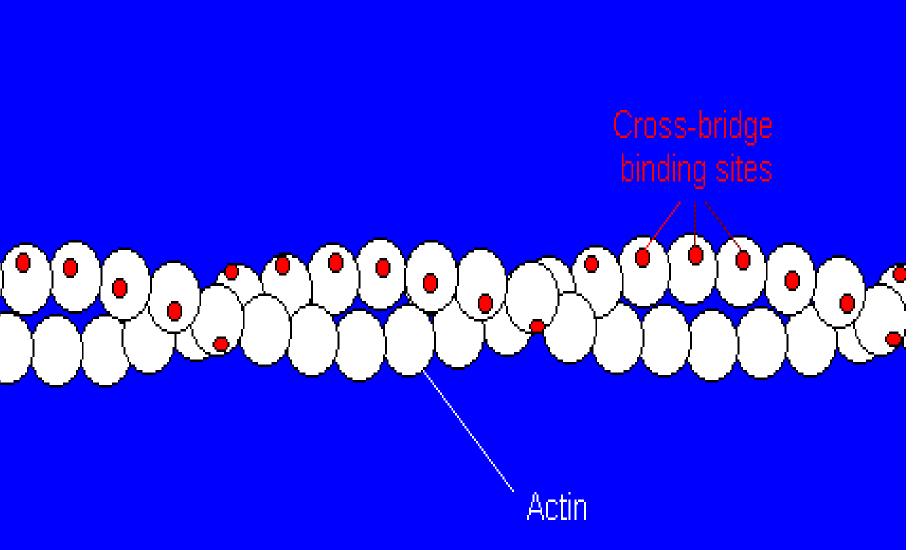
- Activation by nerve causes myosin heads to attach to binding sites on the thin filament (cross-bridges)
- Myosin heads then bind to the next site of the thin filament and so on....



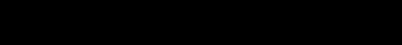


myosin and actin weakens, and the cross bridge detaches.

Cross Bridge Cycle - the Components



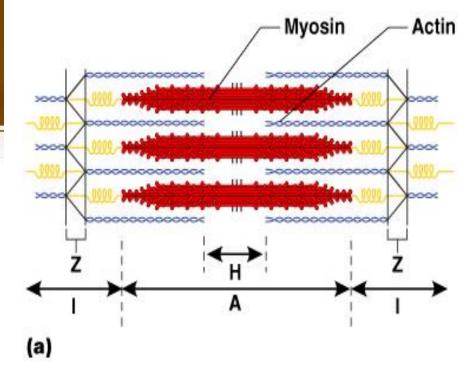
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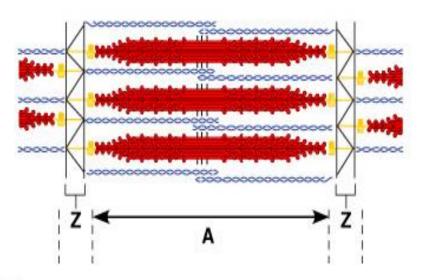


lar basis of muscle contraction

Sliding filament theory:

- Relative movement of actin & myosin filaments yields active sarcomere shortening
- Myosin heads or crossbridges generate contraction force
- Sliding of actin filaments toward center of sarcomere: decrease in I band and decrease in H zone as Z lines move closer





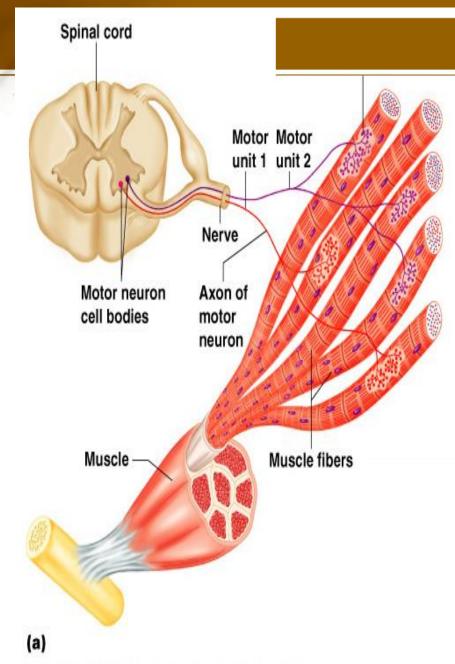
cular basis of muscle

contraction

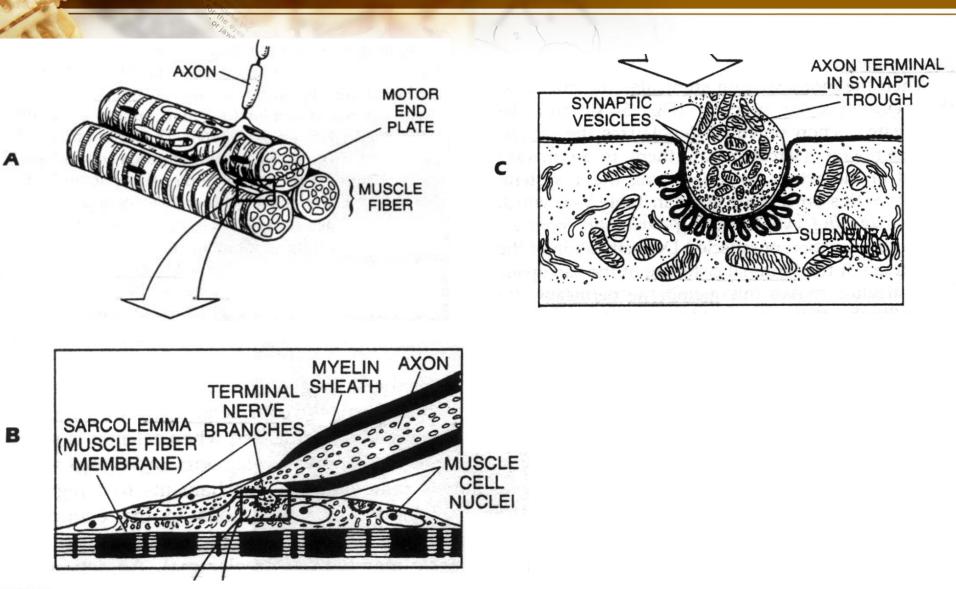
Motor unit:

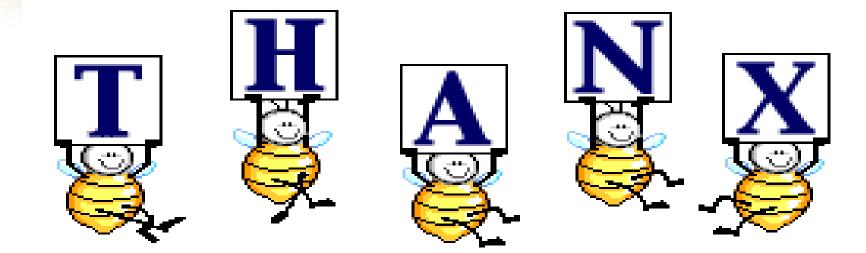
Muscle supplied by nerve contain both sensory & motor fibers lie in anterior horn of spinal cord or in nucleus of cranial nerves influenced by many sources.

- Motor neuron and muscle to which it supplied called motor unit.
- Motor neuron divide 5-150 branches each of which terminates in a motor end plate beneath sarcolema.



Motor unit





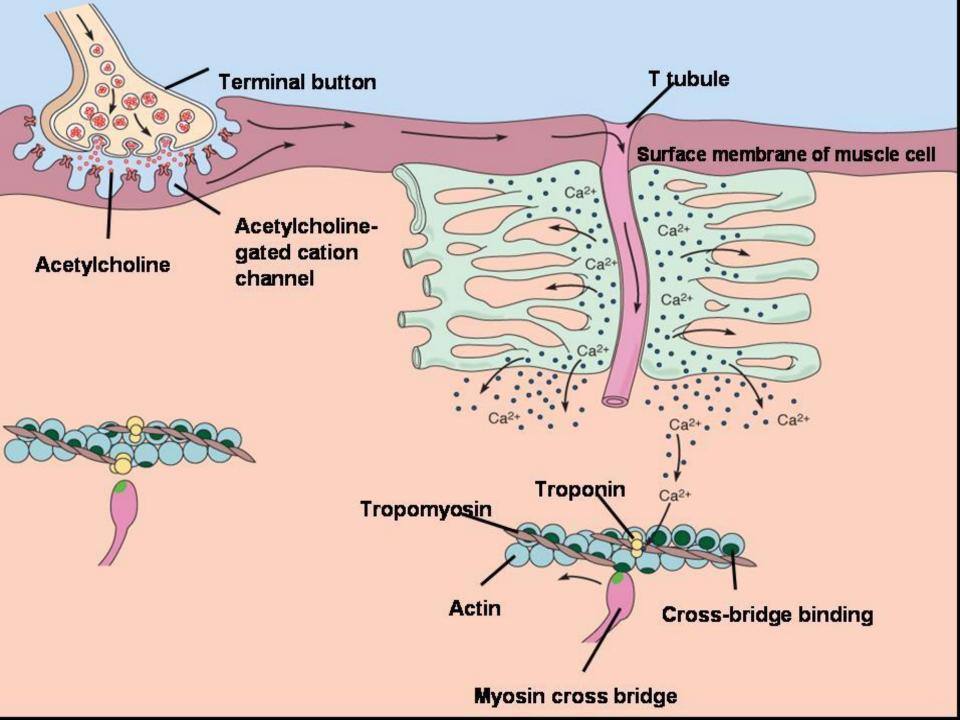


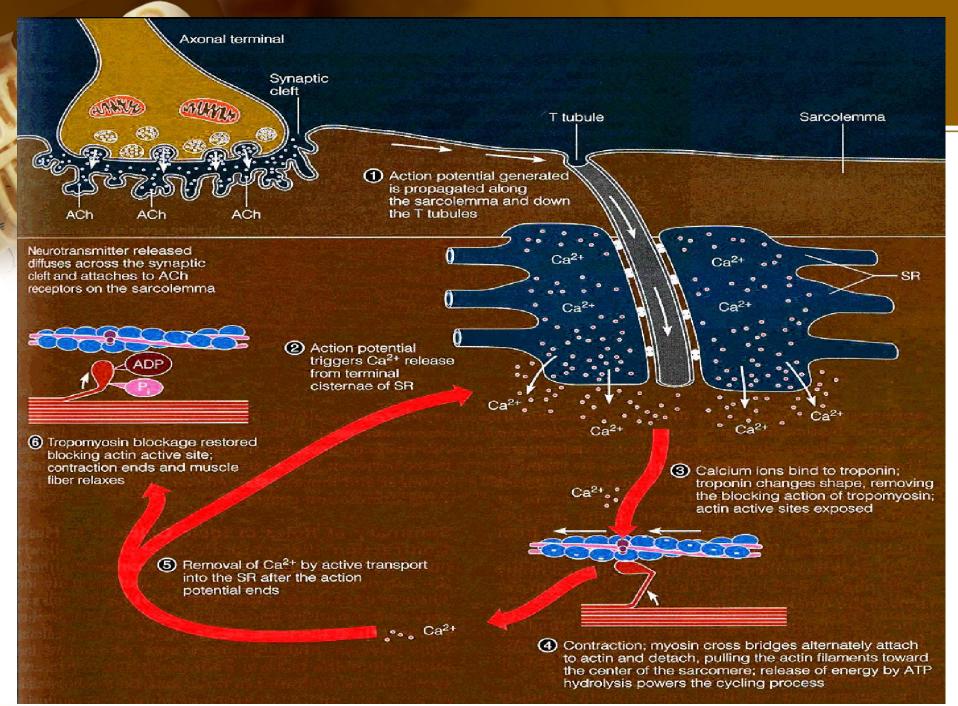


Initiation and propagation of action potential

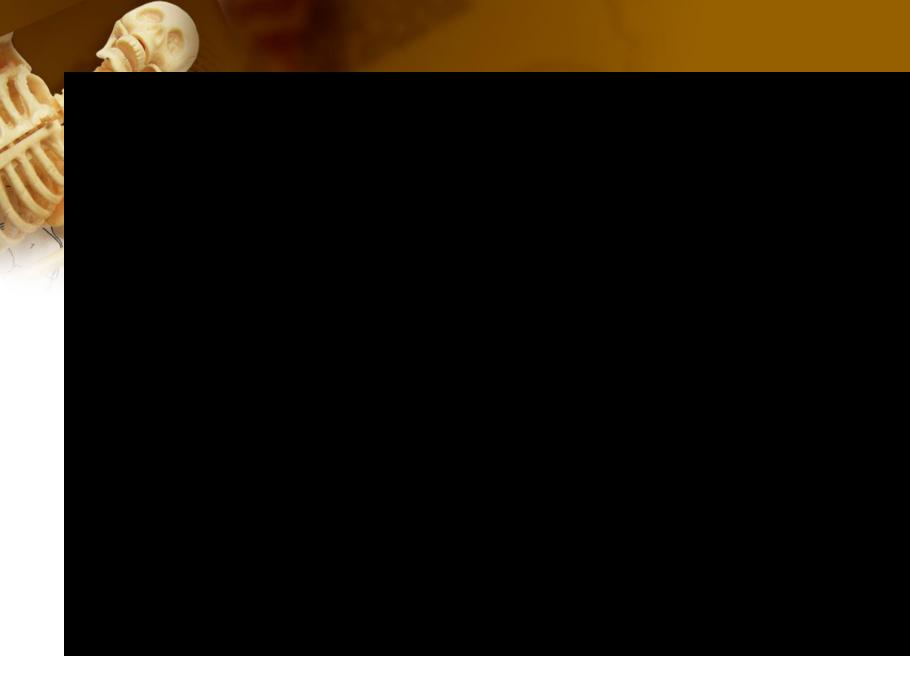
An **action potential** is initiated and propagated in a motor axon.

- This action potential causes the release of acetylcholine from the axon terminals at the neuromuscular junction.
- Acetylcholine is bound to receptor sites on the motor end plate membrane.
- Acetylcholine increases the permeability of the motor end plate to sodium and potassium ions. producing an endplate potential.
- The end-plate potential depolarizes the muscle membrane sarcolemma), generating a muscle action potential that is propagated *over* the membrane surface



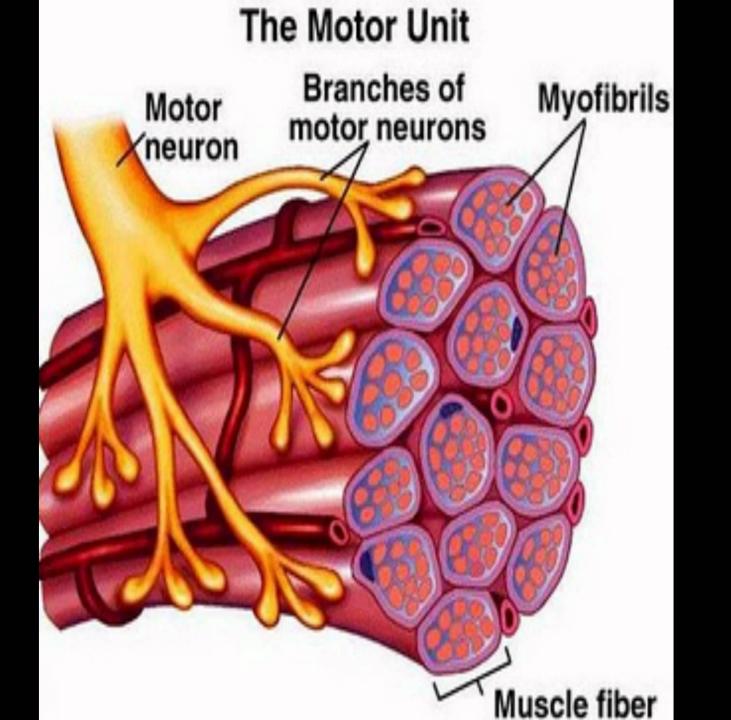


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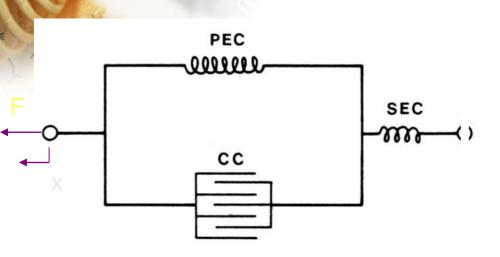


Molecular basis of muscle contraction

- A muscle fiber contracts when all sarcomere shorten simultaneously in an all-or-nothing fashion, which is called a **Twitch.**
- The mechanism by which the electric signal trigger's the chemical events of contraction is known as Excitationcontraction coupling



The Musculotendinous Unit



PEC: parallel elastic componentCC: contractile componentSEC: series elastic component

- Tendon- spring-like elastic component in series with contractile component (proteins)
- Parallel elastic
 component
 (epimysium,
 perimysium,
 endomysium,
 sarcolemma)

The tendons and the connective tissues in and around the muscle belly are **elastic/coelastic** structures determine mechanical properties of muscle.

- When stretched during active contraction or passive extension of a muscle, tension is produced and energy is stored; when they recoil with muscle relaxation, this energy is released
- The series elastic fibers are more important in the production of tension than are the parallel elastic fibers.

Dispensability and elasticity of the elastic components(tendons))

Property helps

- 1. TO Keep the muscle in **readiness** for contraction, smooth production and transmission of tension during contraction.
- Assure that the contractile elements return to their original (resting) positions when contraction is terminated
- 3. Prevent the passive <u>overstretch</u> thereby lessening the danger of muscle injury. (GTO)

4. Viscous property of these components allow To Absorb energy proportional to the rate of force application and to dissipate energy in a time dependent manner.

• Example....when a person attempts to stretch and touch the toes??? Stretch initially is elastic but if continue to stretch even further elongation is due to viscosity of muscle-tendon unit.

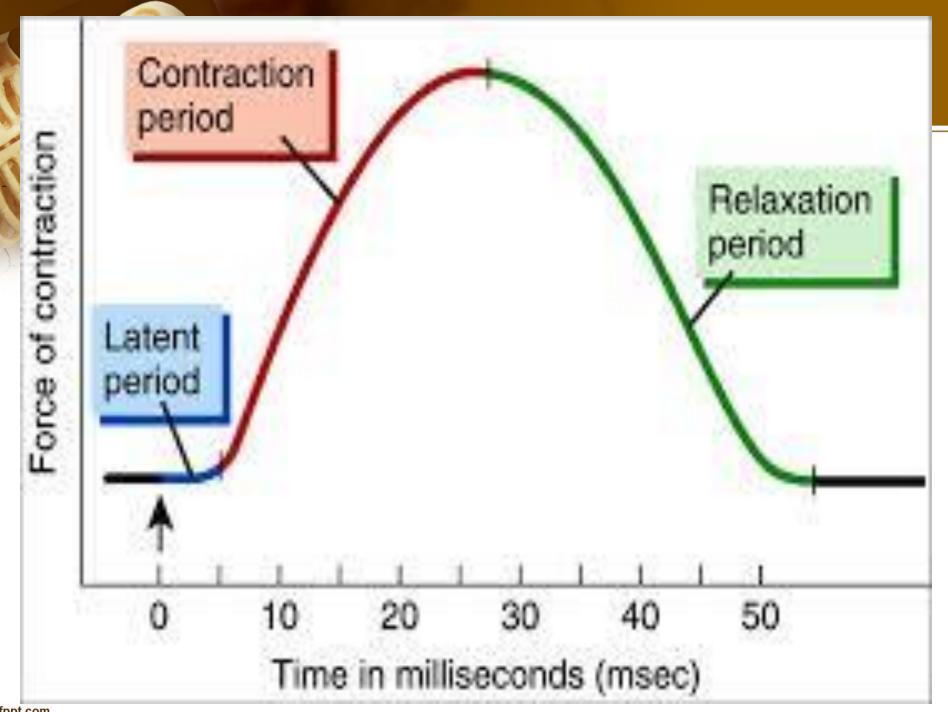
Mechanics of Muscle Contraction/Summation and Tetanic Contraction

- Use of Electromyography
- Time relationship between the onset of electrical activity in the muscle and actual contraction of the muscle or muscle fiber.

Summation and Tetanic Contraction

- Neural stimulation impulse
- Mechanical response of a motor unit to a single stimulus---→twitch
- **Tonic type:** motor units that require more than a single stimulus before the initial development of tension.
- Following stimulation there is an interval of a few milliseconds known as the **latency period** before the tension in the muscle fibers begins to rise.

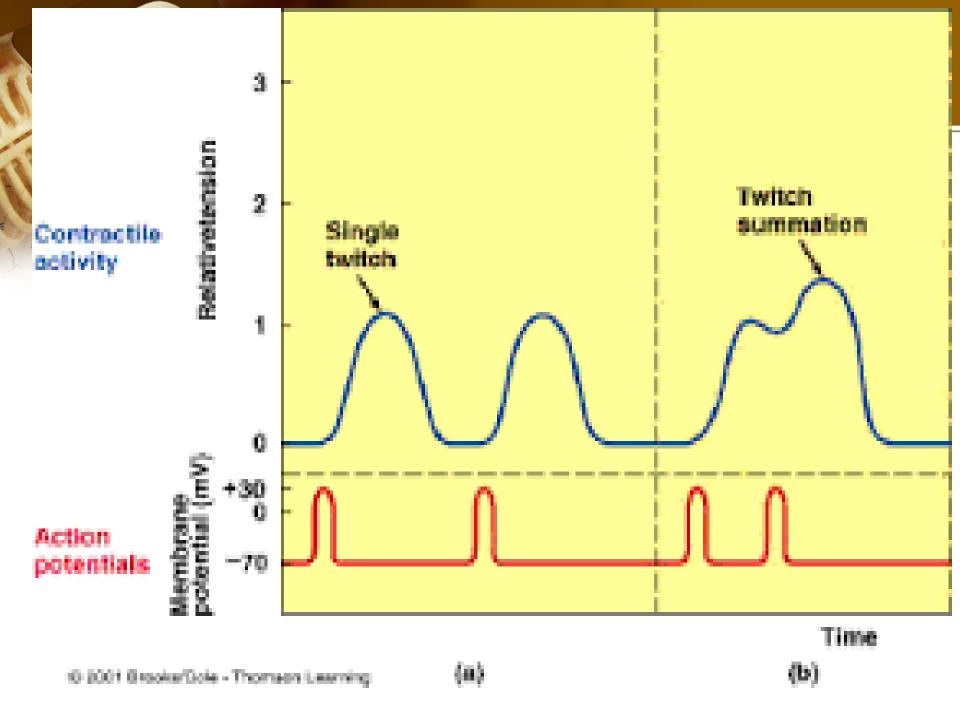
- The time from the start of tension development to peak tension is the contraction time
- Time from peak tension until the tension drops to zero is the relaxation time
- Both times depend on Muscle fiber makeup
- Some muscle fibers contract with a speed of only 10 m sec, others may take 100 m sec or longer.



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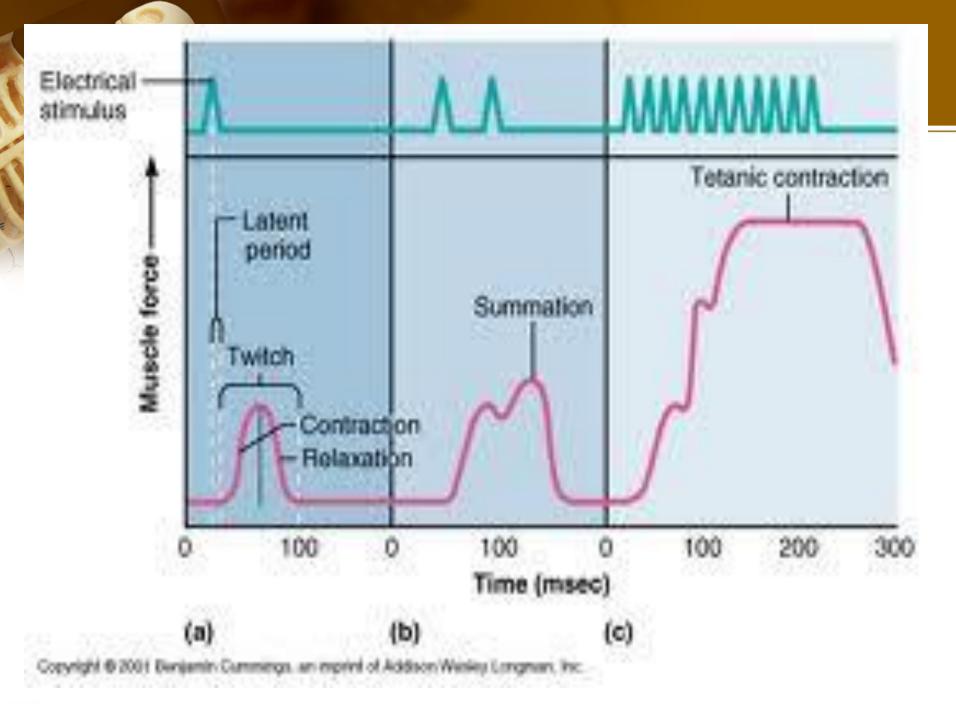
An action potential lasts only approximately 1 to 2 m sec

- When mechanical responses to successive stimuli are added to an initial response, the result is known as summation
- If a second stimulus occurs during the latency period of the first muscle twitch, it produces no additional response and the muscle is said to be **completely refractory**.



The greater **the frequency of stimulation** of the muscle fibers. the greater the tension produced in the muscle as a whole.

- A maximal frequency will be reached beyond which the tension of the muscle no longer increases.
- when this maximal tension is sustained as a result of summation, the muscle is said to contract tetanically.
- Rapidity of stimulation outstrips the contraction relaxation



- All-or-nothing event
- 2 ways to increase tension:
 - Stimulation rate
 - Recruitment of more motor unit
- Size principle
 - Smallest Motor Units recruited first
 - Largest Motor Units last

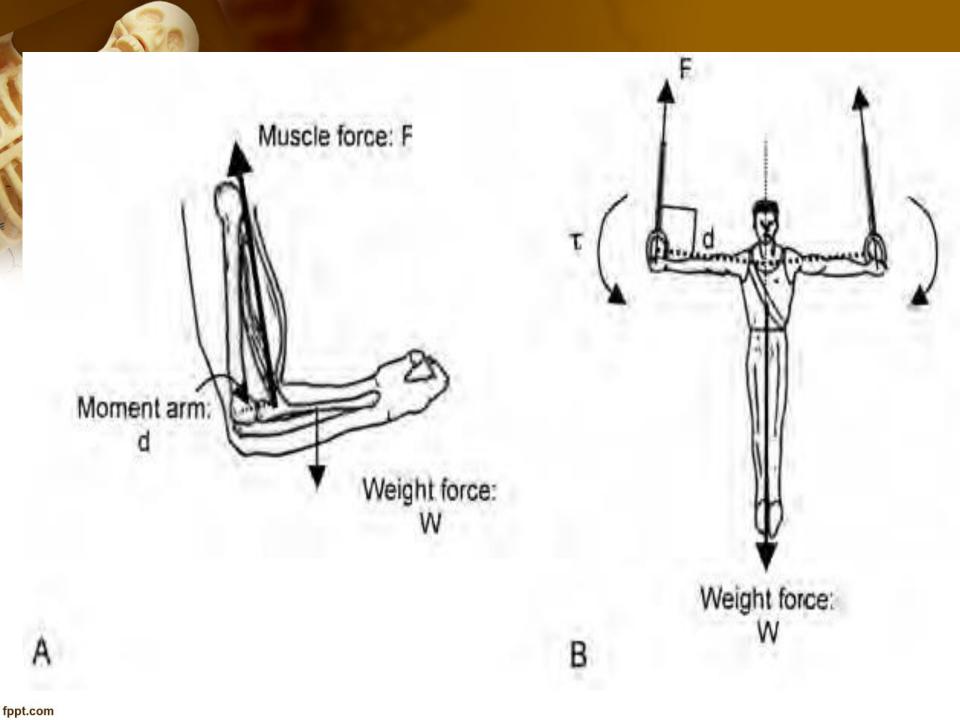


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Types Of Muscle Contraction

Isometric muscle work

- Isotonic muscle work (tone constant, must not effect by leverage, so true sense not possible)
- **During contraction,** the force exerted by a contracting muscle on the bony lever(s) known as the muscle tension, and external force exerted on the muscle is known as the resistance, or load(wt of body leavers).
- As muscle exerts its force, it produce moment (torque), on joint. The moment is calculated as product of the muscle force and the perpendicular distance **between** its point of application and center of motion (known as the lever arm, or moment arm).
- Muscle work depend on either resistance is overcome or not, hence above muscle work type produces.
- Dynamic muscle work
 - Concentric Muscle work
 - Eccentric Muscle work
 - Isoinertial muscle work (against same resistance...(e.g., isometric)
 - Isokinetic muscle work(same speed)



MECHANICAL PROPERTIES INFLUENCE FORCE PRODUCTION IN MUSCLE

The total force that a muscle can produce is influenced by its mechanical properties

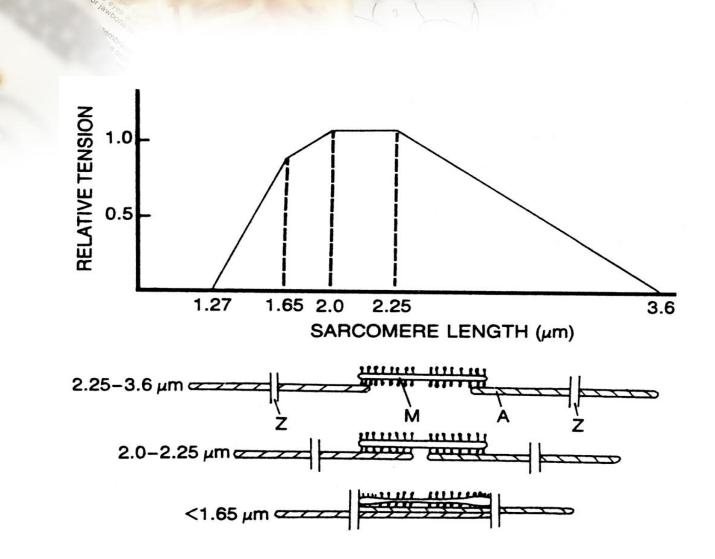
- Force —length characteristics
- Force (load)- velocity characteristics
- Force-time Relationship
- Effect of skeletal muscle architecture
- Effect Of Pre-stretching
- Effect of temperature difference
- Effect of fatigue



Muscle contract isometrically & tetanically. Change in tension with length of muscle fibers

- Resting 2.0-2.25 um, (max. no. of cross bridges;)---→max. tension
- 2.25-3.6 um (no. of cross bridge \downarrow)
- < 1.65 um (overlap of actin... no. of cross bridge ↓)

Length-tension Relationship



- Maximal tension is produced when the muscle fiber is approximately at its "slack," or resting, length.
- If the fiber is held at **shorter lengths**: the tension falls off slowly at first and then rapidly. (stress relaxation)
- If the fiber is lengthened beyond the **resting length:** tension progressively decreases.

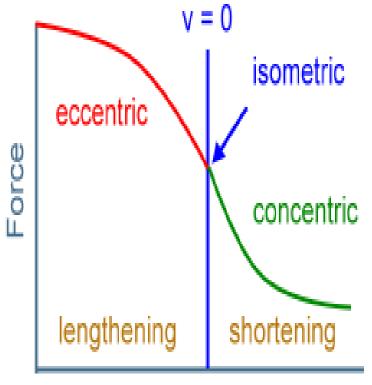
whole muscle contracting isometrically and tetanically

- The tension produced by both active components and passive components must be taken into account
- Active tension: represents the tension developed by the contractile elements of the muscle
- Passive tension :muscle surpasses its resting length and the non-contractile muscle belly structures stretched. Passive tension is mainly developed in the parallel and series elastic components

- When the **belly contracts**, the combined active and passive tensions produce the total tension exerted (active>passive)
- When a muscle is progressively stretched beyond its resting length, the passive tension rises and the active tension decreases
- One joint muscles normally are not stretched enough for the passive tension to play an important role, but the case is different for twojoint muscles

Load-velocity Relationship

- Shortening is slow with increasing load in concentric contraction (vice versa with decreasing load)
- Lengthening is more rapid with increasing load in eccentric contractions.

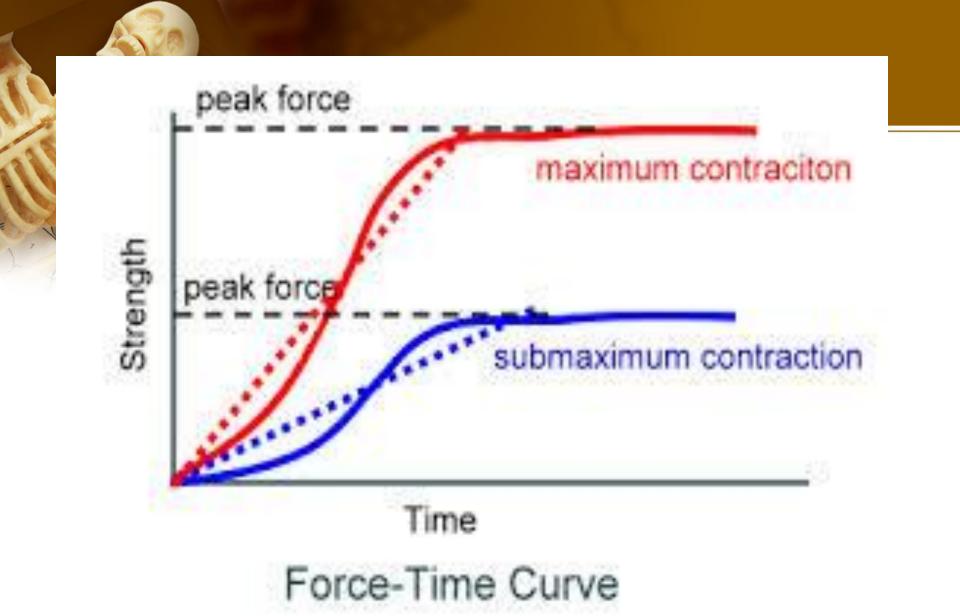


Velocity

Tension inverse of velocity Force-Velocity Curve of a Muscle

Force-time Relationship

- The longer the contraction time, the greater is the force developed, up to the point of maximum tension (slow vs fast)
- Slower contraction leads to greater force production because time is allowed for the tension produced
- Active contraction process is of sufficient duration



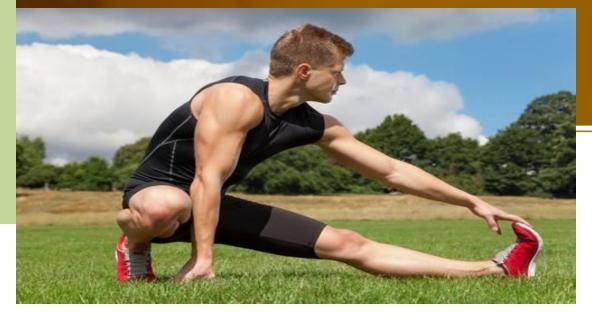
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Effect of skeletal muscle architecture

- The arrangement of the contractile components affects the contractile properties of the muscle
- The more sarcomeres lie in series, the longer is myofibril. The velocity and the excursion (working range) that the muscle can produce are proportional to the length of myofibril
- The more sarcomeres lie parallel the larger the cross-sectional area of the myofibril will be & More force produced by muscles as force is proportional to the cross-section of the myofibril

- Muscles with shorter fibers and a Larger cross sectional area are designed to produce force e.g. **quadriceps muscle**
- Muscles with long fibers are designed for excursion and velocity. The Sartorius muscle has longer fibers and a smaller cross-sectional area and is better suited for high excursion

Effect Of Prestretching



- VARIED RESULTS
- Some evidence shows that muscle perform more work when it shortens in a concentrically contracted state immediately after being light stretchedthan when it shortened from state of pre-stretched or isometric contraction.
- Strong evidences that stretching (Static) may reduce the performance or force production in the muscles.? (GTO)

Effect Of Temperature

- A rise in muscle temperature causes an increase in conduction velocity across the sarcolemma ----→Increasing the frequency of stimulation ----→ Increase production of muscle force
- Rising of the muscle temperature from 6
 to 34C results in an almost linear increase
 of the tension ratio

 And temperature= And enzymatic activity of muscle metabolism, And efficiency of muscle contraction

- Increased elasticity of the collagen in the series and parallel elastic components causes Increased extensibility of the muscle-tendon unit.
- increases the force production of the muscle

- At low temperature 10C, it has been shown that the maximum shortening velocity and the isometric tension are inhibited significantly ----→due to Decreased pH (acidosis) in the muscle.
- NOTE:
- At physiological PH 7.35-7.45 muscle work best.

Effect Of Fatigue

- Physical fatigue, or muscle fatigue, is the temporary physical inability of a muscle to perform optimally.
- The ability of a muscle to contract and relax depend on availability of adenosine triphosphate ATP
- ATP breakdown balance ATP Synthesis
- Imbalance ----→ fatigue
- Drop in tension after prolonged stimulation/function is muscle fatigue
- Chances of Fatigue are even greater in tetanic phase
- Rest interval recovers ATP improves efficiency of muscle/force production of muscle

Sources of ATP in muscle

Creatine phosphate

- 2. Substrate Phosphorylation during **anaerobic glycolysis**.
- **3.** Oxidative Phosphorylation in the mitochondria.
- Three energy system depend on intensity & duration determine which and to what extent energy systems used

,1

- When contraction begins **myosin ATPase** rapidly breaks down ATP.
- The increase in adenosine diphosphate (ADP) and phosphate (Pi) concentrations resulting from this breakdown ultimately leads to increased rates of oxidative Phosphorylation and glycolysis.

1: After a short lapse(a short duration activity) metabolic pathways begin to deliver ATP at a high rate.(aerobic)

- During this duration the energy for ATP formation is provided by Creatine phosphate, which offers the most rapid means of forming ATP in the muscle cell
- 2: At moderate rates (long duration activity) of muscle activity, most of the required ATP = oxidative Phosphorylation

- **3: During intense exercise=** ATP is broken down rapidly= limited cell's ability to replace ATP by oxidative Phosphorylation lack of circulatory oxygen.
- The glycolytic pathway= much smaller amounts of ATP from the breakdown of glucose operates at a much faster rate proceed in the absence of oxygen= ATP &lactic acid end product.
- (During intense exercise, anaerobic glycolysis becomes an additional source for rapidly supplying the muscle with ATP)

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The glycolytic pathway has the disadvantage of requiring large amounts of glucose for the production of small amounts of ATP BUT myosin ATPase may breakdown ATP faster than glycolysis can replace it & fatigue occur rapidly.

- After a period of intense exercise, much of the muscle glycogen may have been converted to **lactic acid**.
- For muscle to be returned to its original state , creatine phosphate re-synthesized & glycogen stores replaced.
- Both process require energy, muscle continue to use oxygen at a rapid rate though it stopped contracting. This oxygen from deep breathing after strenuous exercise

20-25% energy used during ATP synthesis and break

- when muscle is operating in its most efficient state, a maximum of only approximately 45% of the energy is used for contraction
- Dissipation energy

Consequences of fatigue

- Muscle fatigue results in lack of coordination of movement
- Skill of person performing a given action is affected
- Reduction in accuracy, control and speed of contraction which may predispose an individual to injury
- Natural fatigue depend on presence of type of muscle fibers(red & white)

- In the average population, approximately 50 to 55% of muscle fibers are type I
- Approx. 30 to 35 percent are **type II A**, and approx. are 15 percent **type II B**, but these percentages vary greatly among individuals.
- Genetically determined
- Type of training

Endurance athletes have type I fibers in abundance e.g. Marathon Runners

Sprinters have Type II fibers in abundance

MUSCLE REMODELING

1: Effects of disuse and immobilization

- Both has Detrimental effects
- Muscle atrophies on a microstructural and macrostructural level, such as decreased numbers and size of fiber
- **Biochemical** changes occur and affect aerobic and anaerobic energy production.
- Immobilization in a lengthened position has a less deleterious effect as compare to shortened





Normal Bicep Muscle

Decrease in biceps due to muscle wasting

immediate or early motion may prevent muscle atrophy after injury or surgery

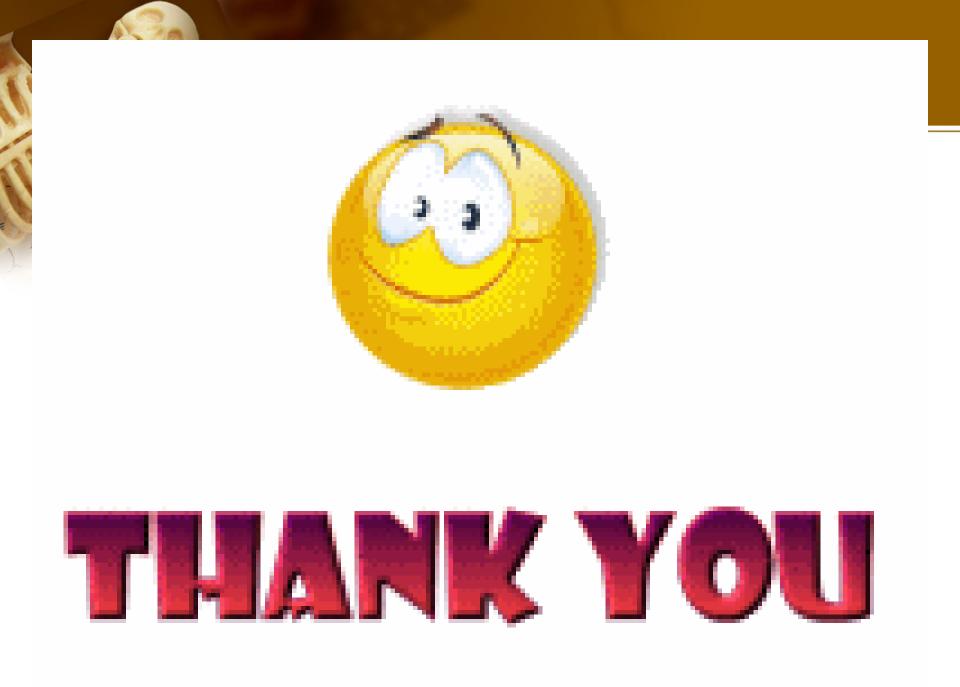
- Cannot be reversed through the use of only isometric exercises in case of applied plasters, so require
- 1:::dynamic resistance exercises rehabilitation or
- 2:: Partly mobile casts should used



Human muscle biopsy : type I fibers that atrophy with immobilization; their cross-sectional area decreases and their potential for oxidative enzyme activity is reduced

- Early motion
- When muscle is placed under tension :afferent (sensory) impulses from the intrafusal muscle spindles will increase, leading to increased stimulation of the type I fiber(by stimulation of extrafusal fibers)

- Although intermittent isometric exercise may be sufficient to maintain the metabolic capacity of the type II fiber
- Type I fiber (the postural fiber) requires a more **continuous impulse**.
- Electric stimulation may prevent the decrease in type I fiber size...
- Fibers affected may be in accordance with the sports involved





Muscle Injuries

- Muscle injuries comprise contusion, laceration, ruptures, ischemia, compartment syndromes, and denervation
- These injuries weaken the muscles, decreased ROM,cause muscle wasting, and significant disability.



Contusions

Contusions are a direct injury resulting from a blow of an object to a part of the body, damaging muscle tissue and internal bleeding occurs.

Example:

Two soccer players knee collides with the others thigh area

resulting in a contusion (corked thigh)



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Laceration

A laceration is a tearing or ripping of the skin that result in a significant blood loss.

The repair of a laceration may require stitching and result in a permanent scar.

➢A significant risk of infection as dirt and other particles can enter the blood stream.







Compartment syndrome

1				
No.				

Compartment syndrome

Compartment syndrome is a painful condition that occurs when pressure within the muscles builds to dangerous levels. This pressure can decrease blood flow, which prevents nourishment and oxygen to nerve and muscle cells.

- Compartment syndrome can be either acute or chronic.
- Acute compartment syndrome is a medical emergency. It is usually caused by a severe injury. Without treatment, it can lead to permanent muscle damage.
- Chronic compartment syndrome, also known as exertional compartment syndrome, is usually not a medical emergency. It is most often caused by athletic exertion.

Volkmann's contracture

- A permanent <u>flexion contracture</u> of the <u>hand</u> at the <u>wrist</u>, resulting in a claw-like deformity of the hand and fingers. Passive extension of fingers is restricted and painful.
- Volkmann's contracture results from acute <u>ischaemia</u> and <u>necrosis</u> of the muscle fibers of the flexor group of <u>muscles of the forearm</u>, especially the <u>flexor</u> <u>digitorum profundus</u> and <u>flexor pollicis longus</u>. The muscles become fibrotic and shortened.
- The condition is caused by obstruction on the <u>brachial</u> <u>artery</u> near the elbow, possibly from improper use of a <u>tourniquet</u>, improper use of a <u>plaster cast</u>, or <u>compartment</u> <u>syndrome</u>.
- It is also caused by fractures of the forearm bones if they cause bleeding from the major blood vessels of the forearm



Figure 2 – Close-up dorsolateral view of left hand highlights hyperextension constituting grotesque deviation from ordinary position of the metacorpophalongeal joints. Fifth finger metacorpophalongeal is by contrast only slightly hyperextended.

Volkmann's Ischemic Contracture in Early Childhood

Severe trauma to the elbow or forearm may result in vascular injury and / or compartment syndrome.



