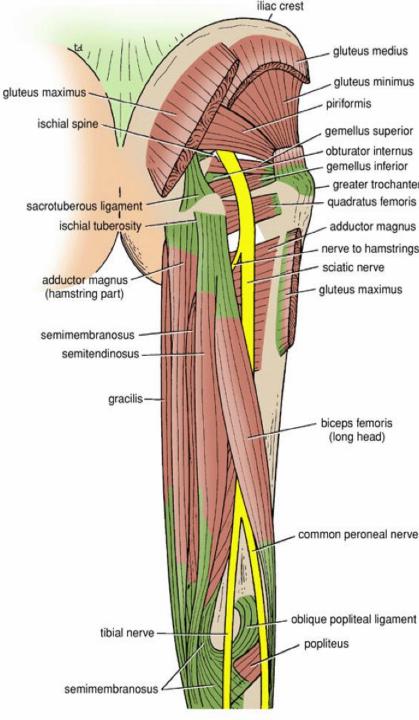
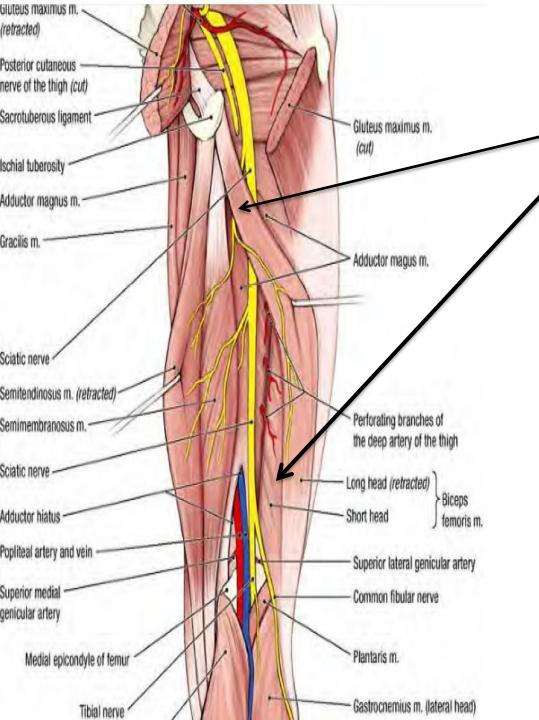


2-Blood supply: *Branches of the profunda femoris artery*







Biceps femoris

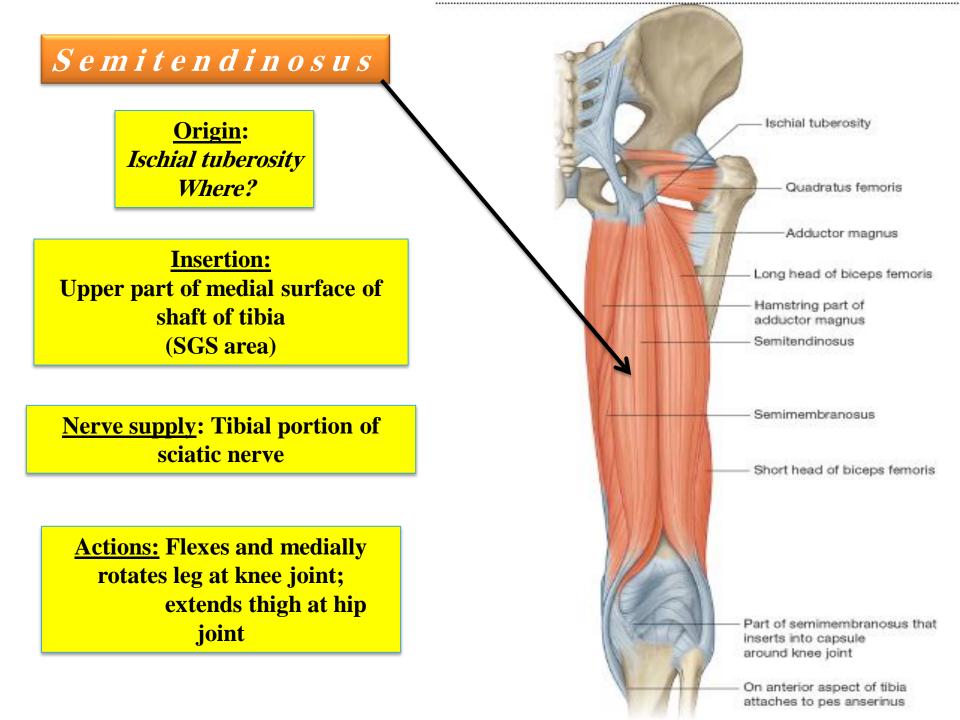
Origin: two heads

1-<u>Long head</u>: ischial tuberosity <u>2-Short head</u>: linea aspera, lateral supracondylar ridge of shaft of femur <u>Insertion: Head of fibula</u>

> Nerve supply: Long head: <u>tibial portion</u> <u>of sciatic nerve</u>

Short head: common peroneal portion of sciatic nerve

Actions: Flexes and laterally rotates leg at knee joint; long head also extends thigh at hip joint



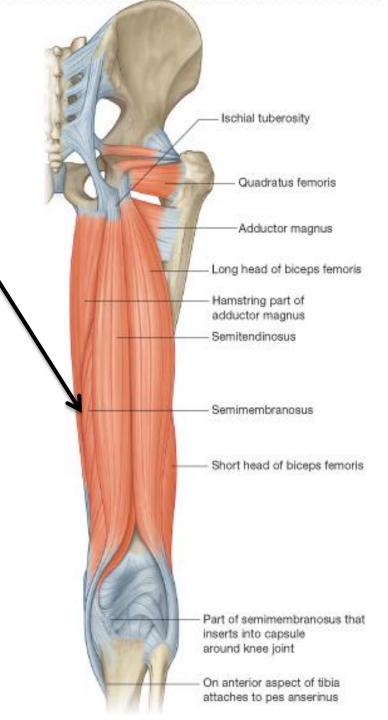
Semimembranosus

<u>Origin:</u> Ischial tuberosity, where?

Insertion: Medial condyle of tibia

<u>Nerve supply:</u> Tibial portion of sciatic nerve

<u>Actions</u>: Flexes and medially rotates leg at knee joint; extends thigh at hip joint



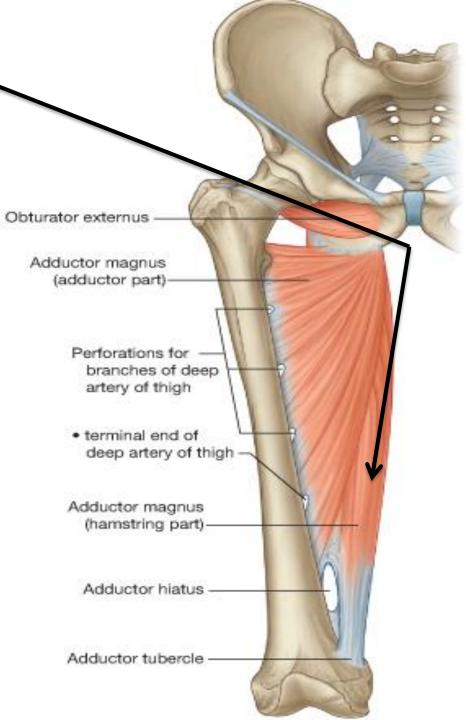


Origin: Ischial tuberosity

Insertion: Adductor tubercle of femur

Nerve supply: Tibial portion of sciatic nerve

Actions: <u>Extends thigh at hip</u> <u>joint</u> <u>Does it flex the knee?</u>



Pay attention to the fact that the muscles of the thigh are designed <u>To act on the knee joint</u>

For example, quadriceps femoris occupies the anterior compartment of the thigh but its <u>Main</u> action is <u>to extend the knee joint</u>

The same should be considered for the muscles of the posterior compartment of the thigh Although they occupy the posterior compartment of the thigh <u>Their main</u> function is to <u>flex the knee joint</u>

Now think!

Which muscles will rotate the knee joint medially and laterally?

Keep in your mind that when the knee joint is extended medial and lateral rotation is not possible! <u>The joint said to be locked</u>

Therefore, we need to unlock the extended (locked) knee joint

A small muscle called **popliteus** unlocks the knee joint by rotating the femur on the tibia laterally before any flexion of the knee can take place <u>Now the joint said to be unlocked</u>

Only now when the knee joint is semiflexed

The biceps femoris <u>can act as lateral rotators of the leg</u> The semimembranousus and semitendinosus <u>can act as medial rotators of the leg</u> Sciatic Nerve

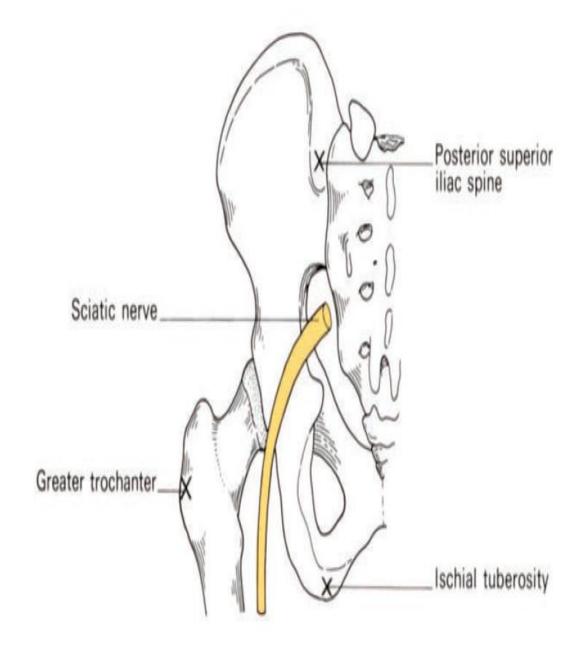
A terminal branch of the sacral plexus (L4 and 5; S1, 2, and 3)

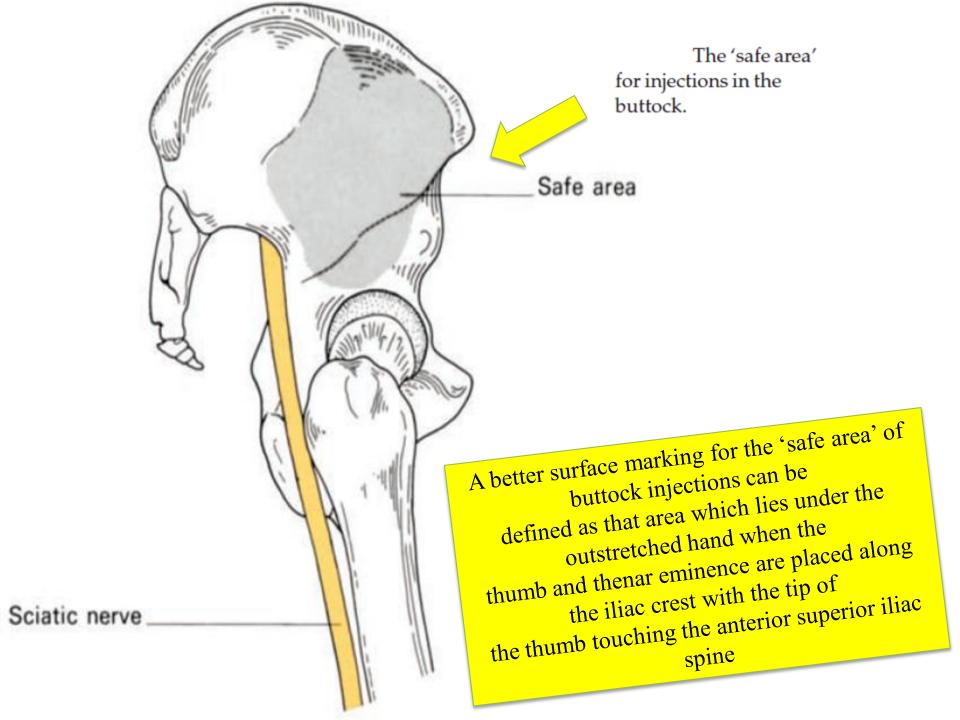
Emerges from the pelvis through the lower part
 of the greater sciatic foramen below the piriformis muscle
 It is the largest nerve in the body and consists of the
 tibial and common peroneal nerves bound together with fascia.

Commonly terminates in <u>the middle of</u> <u>the thigh</u> by dividing into <u>T i b i a 1 N e r v e</u> (medial popliteal nerve) and <u>C o m m o n p e r o n e a 1</u> (lateral popliteal nerve ALSO CALLED common fibular nerve

Piriformis muscle Quadratus femoris muscle Branch to part of adductor magnus originating from ischial tuberosity Adductor magnus muscle G Sciatic nerve Long head of biceps femoris muscle Semitendinosus muscle Semimembranosus muscle Short head of biceps femoris muscle Adductor hiatus Tibial nerve Common fibular nerve Popliteal artery and vein

The surface markings of the sciatic nerve. Join the midpoint between the ischial tuberosity and posterior superior iliac spine to the midpoint between the ischial tuberosity and the greater trochanter by a curved line; continue this line vertically down the leg—it represents the course of the sciatic nerve.





Posterior Cutaneous Nerve of the Thigh

> A branch of the sacral plexus

S1,2,3.

>Enters the gluteal region through

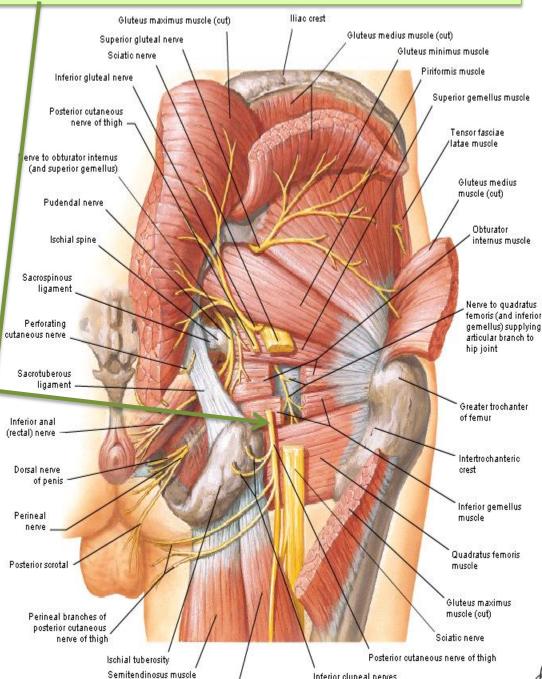
the lower part of the greater sciatic

foramen below the piriformis

muscle

≻It passes downward on the posterior surface of the sciatic nerve and runs down the back of the thigh beneath the deep fascia.

➢ In the popliteal fossa it supplies the skin OVER THE BACK OF THE thigh and upper part of the leg.



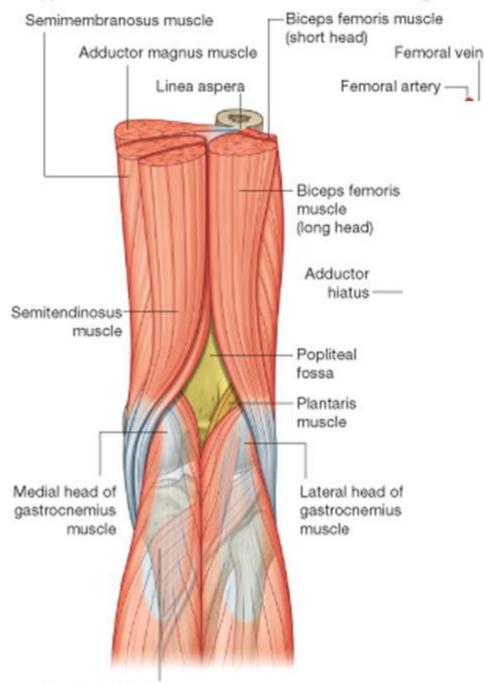
THE POPLATE ALFOSSA

Popliteal Fossa

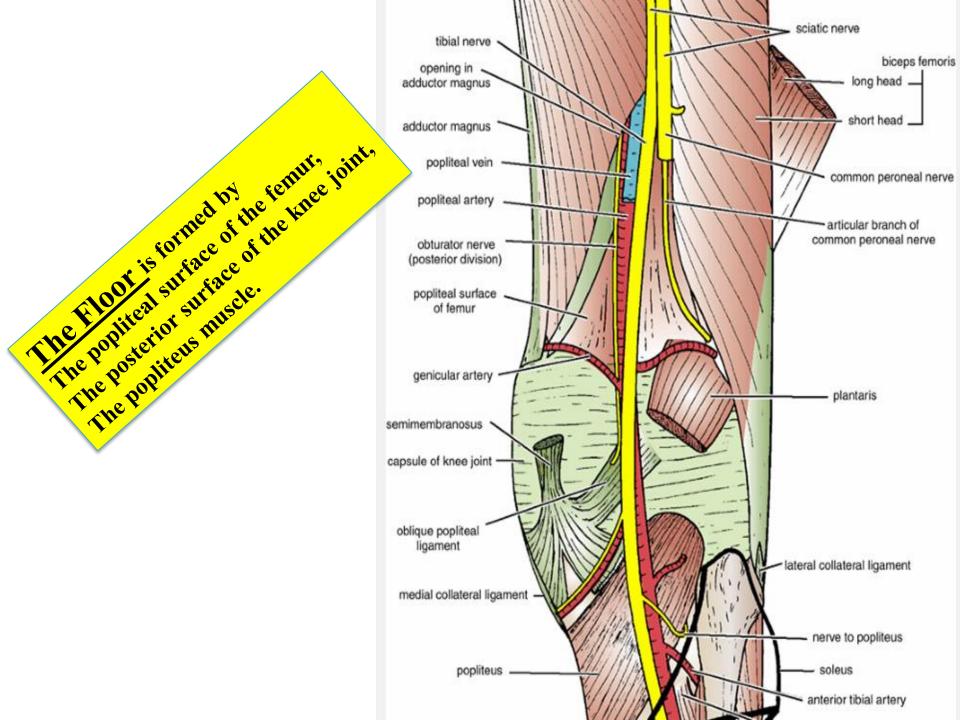
Is a diamond-shaped intermuscular space situated at the back of the knee

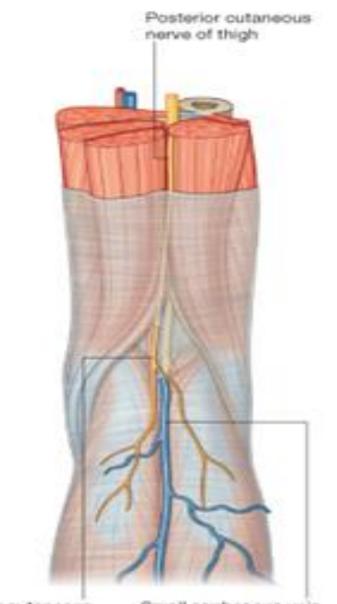
Boundaries Laterally: (above) *The biceps femoris* (below) *The lateral head of the gastrocnemius and Plantaris*

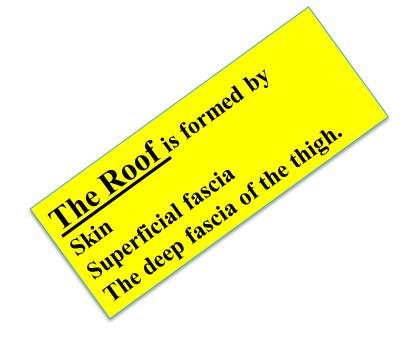
Medially: (above) The semimembranosus and semitendinosus (below) The medial head of the gastrocnemius



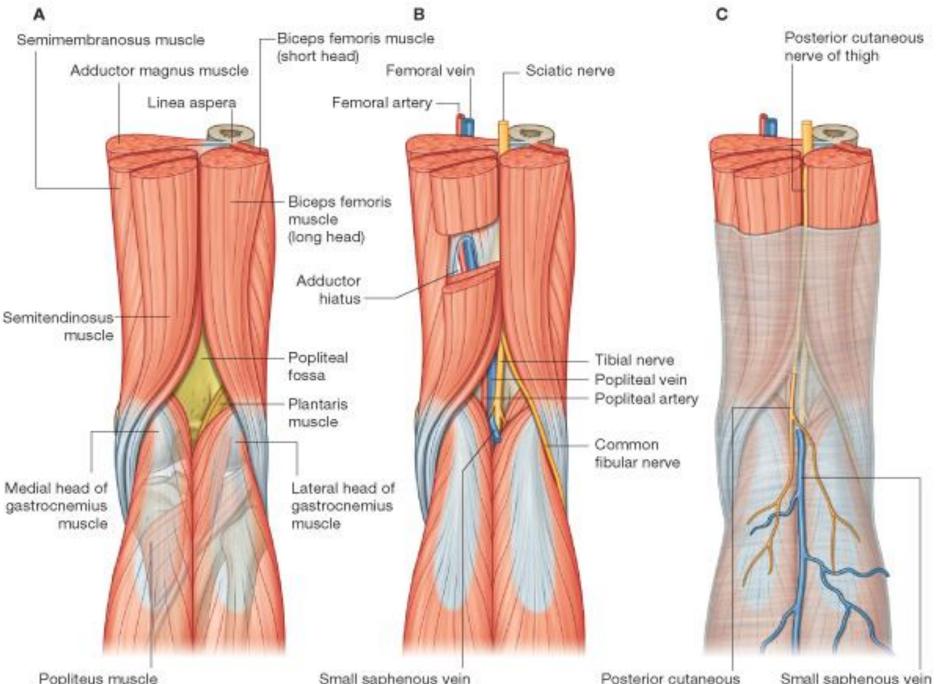
Popliteus muscle







Posterior cutaneous nerve of thigh Small saphenous vein

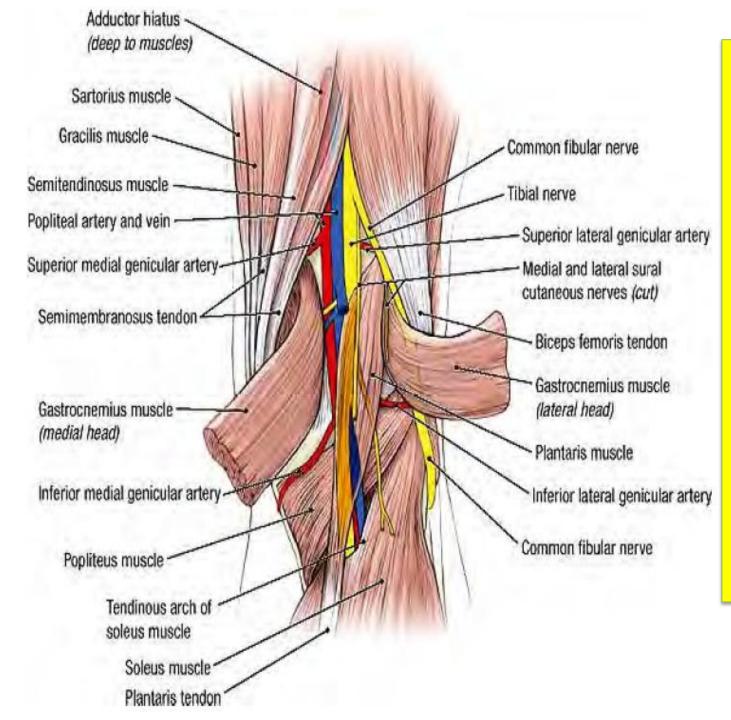


Popliteus muscle

Small saphenous vein

Posterior cutaneous nanua of thigh

Small saphenous vein

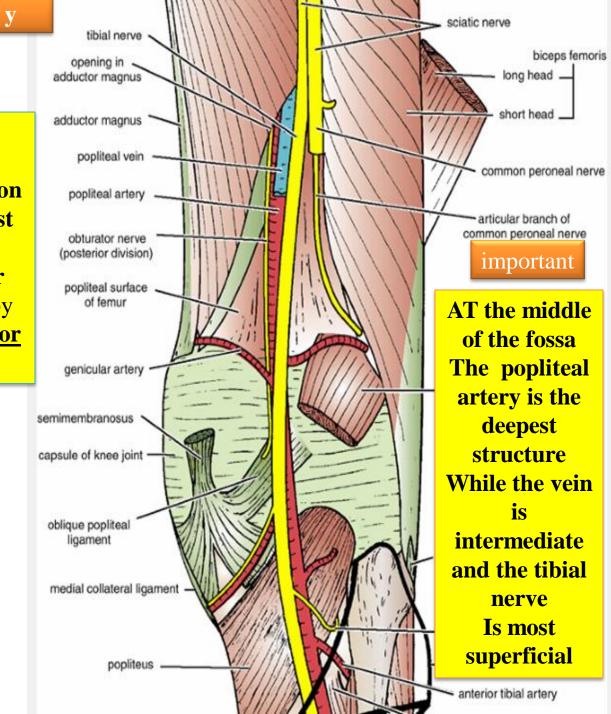


Contents of the popliteal fossa > Popliteal artery and vein > The common peroneal nerve(lateral *popliteal nerve)* > Tihial nerve(medial *popliteal nerve)* > The posterior cutaneous nerve of the thigh > The small saphenous vein Connective tissue. and lymph nodes.

The popliteal artery

 Enters the popliteal fossa through the opening in the adductor magnus as a continuation of the femoral artery (the deepest structure in the fossa).
 It ends at the level of the lower border of the popliteus muscle by dividing into <u>anterior and posterior</u> <u>tibial arteries</u>

> Branches Muscular branches Articular (genicular) branches to the knee.



Tibial Nerve

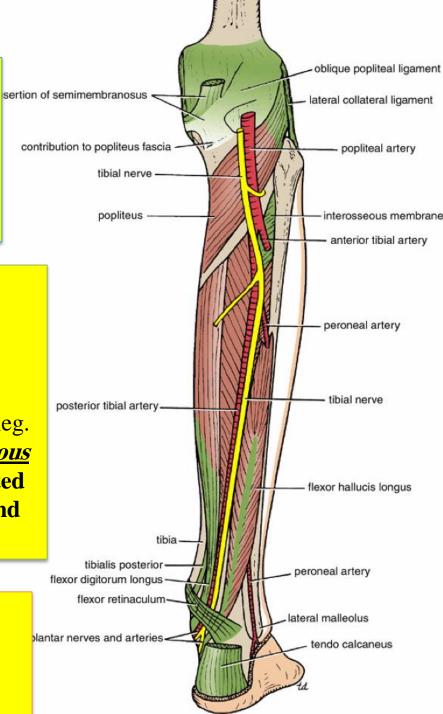
The larger terminal branch of the sciatic nerve
Arises in the lower third of the thigh.
It runs downward through the popliteal fossa
Enters the posterior compartment of the leg by passing beneath the soleus muscle.

Branches

1-Cutaneous: The sural nerve

> descends between the two heads of the gastrocnemius muscle
 > Supplies the skin of the calf and the back of the leg.
 > The sural nerve accompanies the small saphenous vein behind the lateral malleolus and is distributed to the skin along the lateral border of the foot and the lateral side of the little toe

2-Muscular: branches supply both heads of the gastrocnemius and the plantaris, soleus, and popliteus
 3-Articular: branches supply the knee joint.

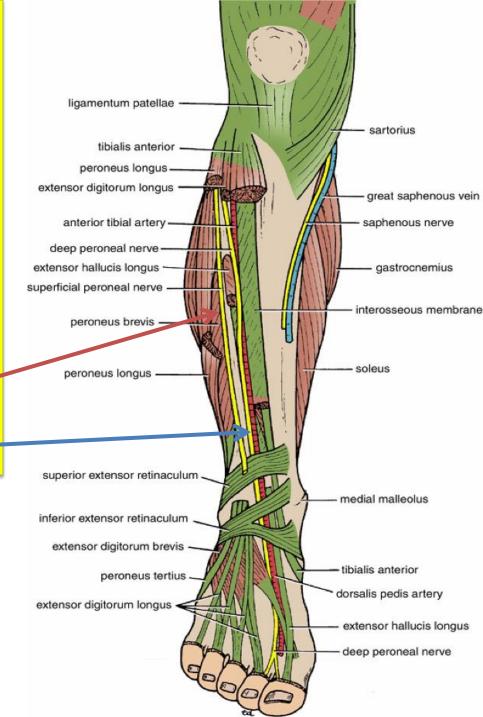


Common Peroneal Nerve ≻The smaller terminal branch of the sciatic nerve

Arises in the lower third of the thigh.
It runs downward through the popliteal fossa
It leaves the fossa by crossing superficially the lateral head of the gastrocnemius muscle.

➢ It then passes behind the head of the fibula, winds laterally around the neck of the bone (subcutaneous and exposed to injury), pierces the peroneus longus muscle.

Divides into two terminal branches: <u>The superficial peroneal nerve</u> <u>The deep peroneal nerve</u>



Branches

Cutaneous:

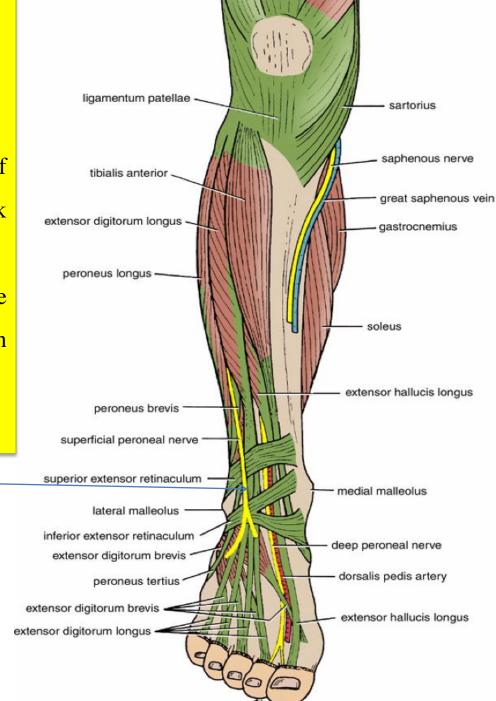
The sural communicating branch

➤The lateral cutaneous nerve of the calf supplies the skin on the lateral side of the back of the leg

Muscular branch: to the short head of the biceps femoris muscle, which arises high up in the popliteal fossa

Articular: branches to the knee joint

<u>The superficial peroneal nerve</u> <u>Also called the musclocutaneous</u> <u>nerve of the leg,</u> <u>Supplies two muscles and then becomes</u> <u>cutaneous where</u> <u>It supplies the skin over the leg</u>



Read only

The popliteal fossa is a good example of the value of *thinking* anatomically when considering the differential diagnosis of a mass situated in a particular anatomical area. When examining a **lump** in the popliteal region, think of these possibilities: skin and soft tissues—sebaceous cyst, lipoma, sarcoma **vein**—varicosities of the short saphenous vein in the roof of the fossa **artery**—popliteal aneurysm lymph nodes—infection secondary to suppuration in the foot **knee** joint—joint effusion tendons—enlarged bursae, especially those beneath semimembranosus and the heads of gastrocnemius

bones—a tumour of the lower end of femur or upper end of tibia