



LOCOMOTION AND SUPPORT SYSTEMS

Chapter 39

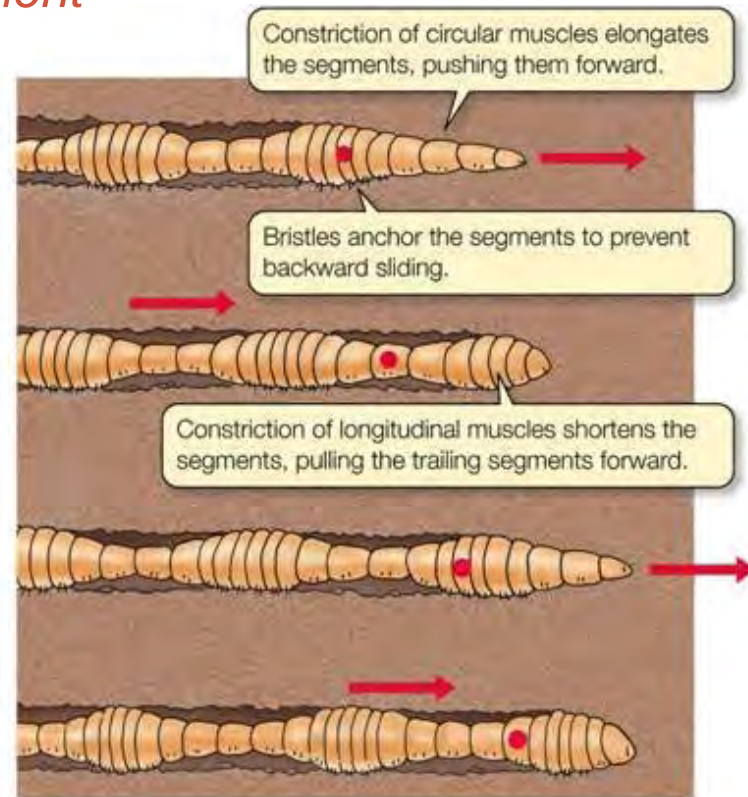
Overview

- Diversity of Skeletons
- Human Skeletal System
 - Cells, Growth
 - Anatomy
- Joints
- Human Muscular System
 - Skeletal Muscle anatomy and physiology
 - Sliding filament model
 - Muscle innervation

Diversity of Skeletons

Support system: provides rigidity, protection, surfaces for muscle attachment

- **Hydrostatic**: fluid-filled gastrovascular cavity or fluid-filled coelom. Support and resistance to contraction of muscles so mobility results.



LIFE 8e, Figure 47.13

Diversity of Skeletons

Support system: provides rigidity, protection, surfaces for muscle attachment

- Hydrostatic
- Exoskeleton: Composed of Calcium carbonate (mollusks) or chitin (arthropods). Protects against predators and desiccation (drying out). Arthropods have jointed and movable appendages.



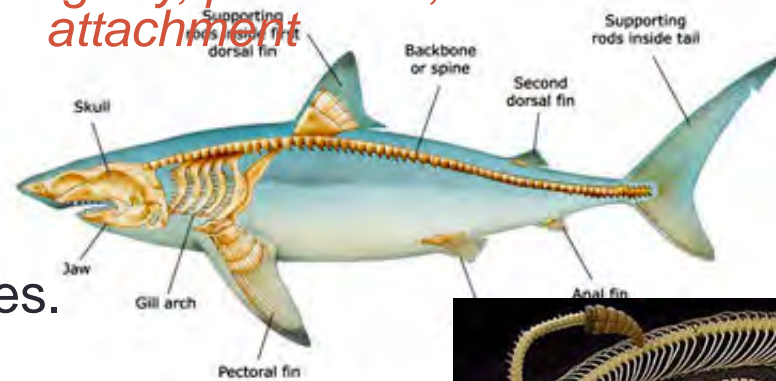
Diversity of Skeletons

Support system: provides rigidity, protection, surfaces for muscle attachment

- Hydrostatic
- Exoskeleton
- **Endoskeleton:** found in echinoderms and vertebrates.
Verts: made of bone and cartilage, living tissue.
Echinoderms: spicules and plates of calcium carbonate.

Advantages of Endoskeleton:

- Can grow with animal
- Supports weight of large animal
- Protects vital internal organs
- Is protected by soft tissue
- Allows flexible movements



Human Skeletal System

Functions of the Human Skeletal System:

- 1) Rigid skeleton supports the body and grows with the body.
- 2) Protects vital internal organs (e.g., brain, heart, lungs, spinal cord).
- 3) Provides sites for muscle attachment, making movement possible.
- 4) Important storage reservoir for ions such as calcium and phosphorus.
- 5) Produces red blood cells and other blood elements within the red bone marrow of the skull, ribs, sternum, pelvis, and long bones.

Bone Cells and Growth

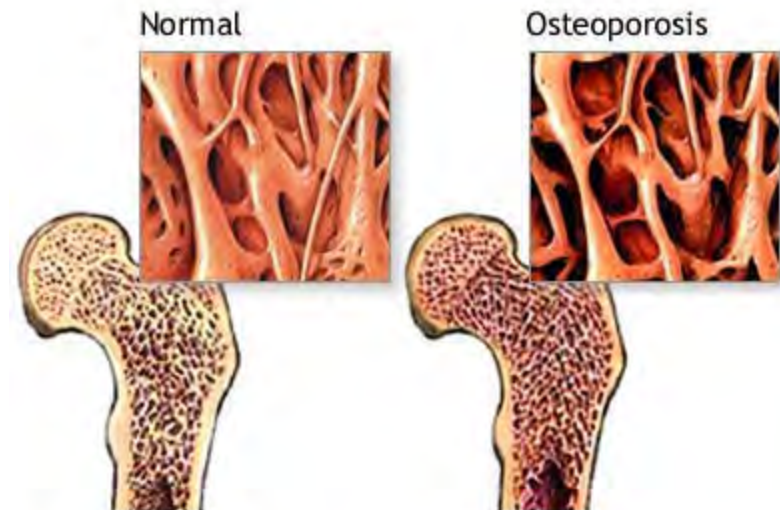
- **Osteoblasts:** bone forming cells
- **Endochondral ossification:** conversion of cartilaginous models to bone. Begins at ***Primary ossification center*** in middle of cartilaginous model. Cartilage is broken down and invaded by blood vessels; cells mature to bone forming osteoblasts.
- Later, **secondary ossification centers** form at ends of model. Cartilaginous growth plate remains between primary and secondary centers.
- As long as the plate remains, growth is possible
- Rate of growth controlled by growth hormone (GH) and sex hormones.
- Plates become ossified and bone stops growing.

Bone Cells and Growth

- **Osteoclasts:** Bone absorbing cells. Breaks down bone, removes worn cells, deposits calcium in the blood Destruction repaired by osteoblasts.
- **Parathyroid hormone (PTH):** promotes activity of osteoclasts
- **Calcitonin:** inhibits activity of osteoclasts
- **Osteocytes:** formed when osteoblasts are caught in matrix. Found within the lacunae of osteons.
- <http://www.youtube.com/watch?v=yFJ4iswRiu4&feature=relmfu>

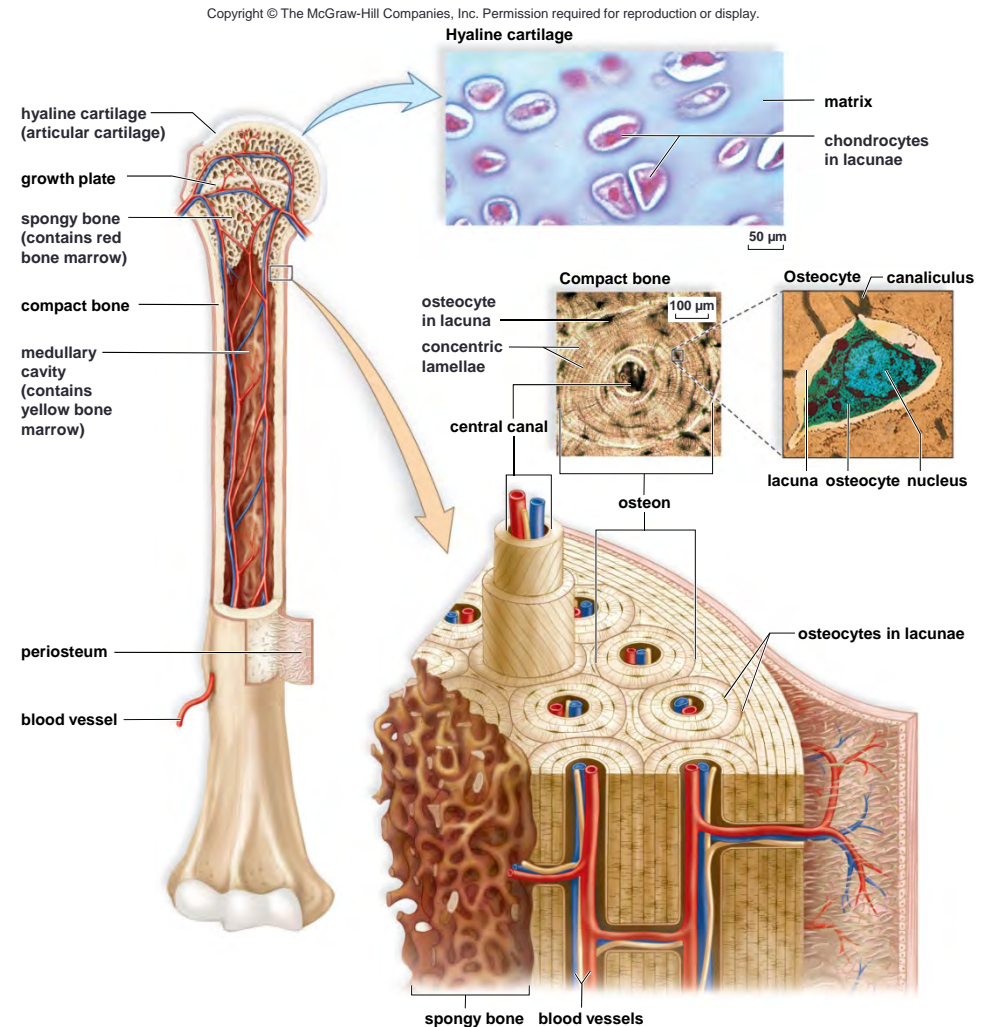
Osteoporosis

- Condition in which bones are weakened due to decrease in the bone mass that makes up the skeleton.
- How to avoid:
 - Adequate dietary calcium (1200-1500 mg per day)
 - Vitamin D~ needed for body to use calcium correctly.
 - Exercise



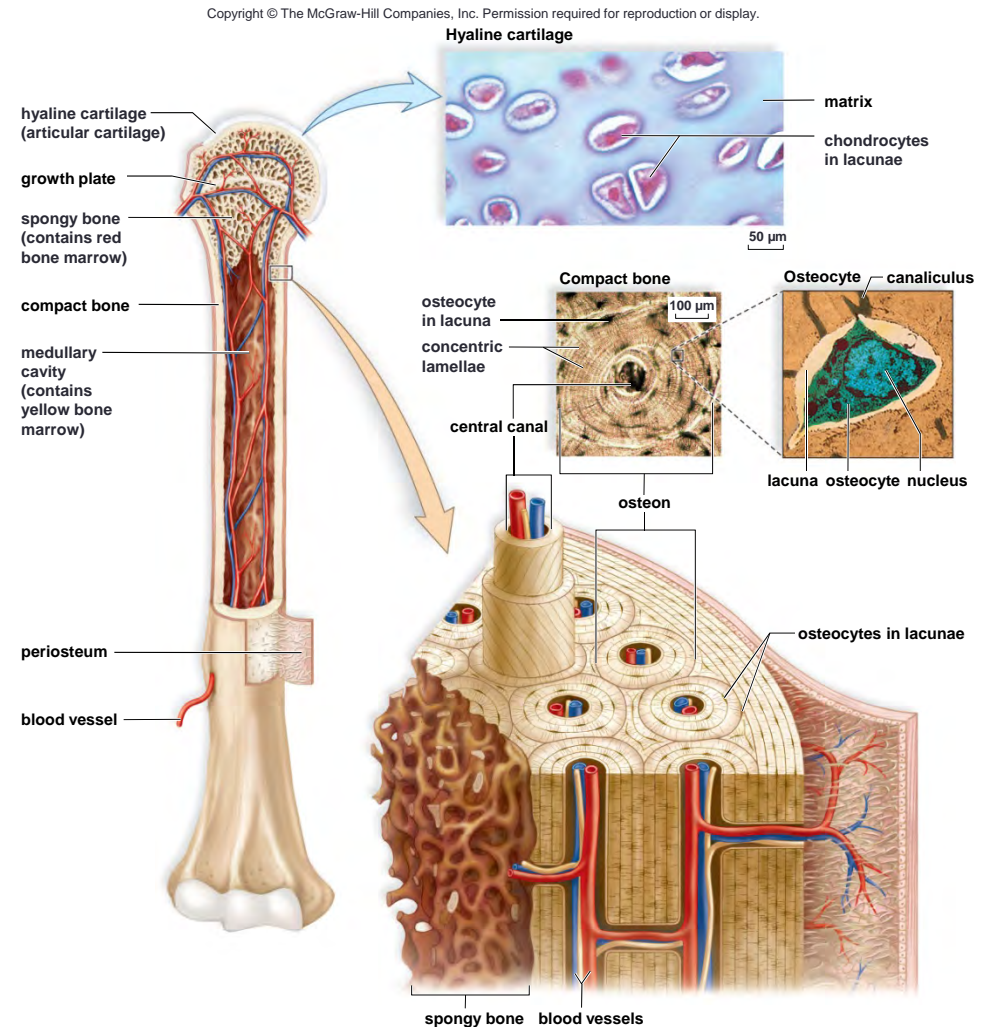
Anatomy of Long Bone

- **Medullary cavity**
- **Compact bone** contains many osteons where osteocytes lie in tiny chambers called **lacunae**. Lacunae are arranged in concentric circles around central canals that contain blood vessels and nerves.



Anatomy of Long Bone

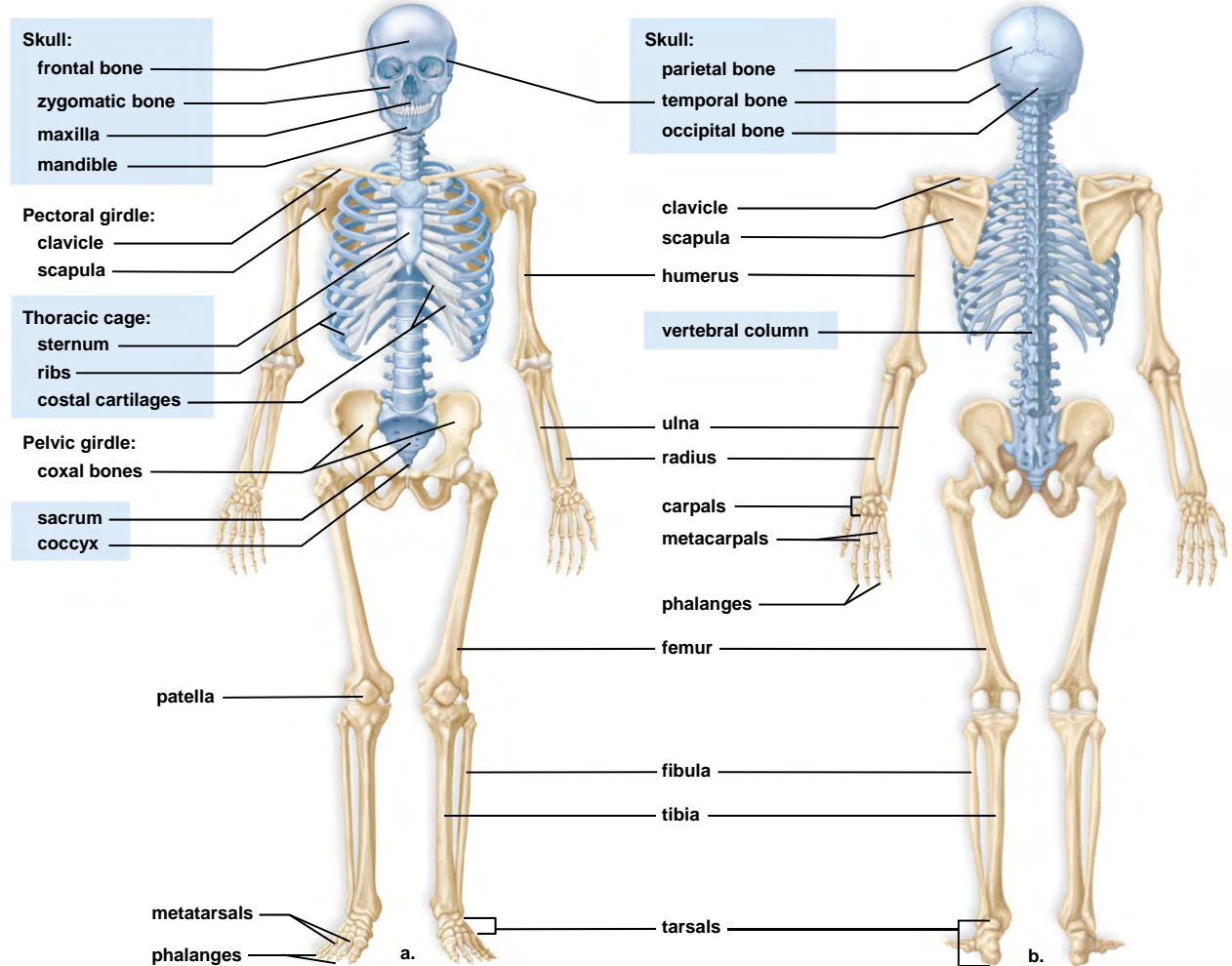
- **Spongy bone** has numerous bony bars and plates separated by irregular spaces. Lighter than compact bone, but provide strength.
- **Red bone marrow** fills spaces in spongy bone. RBM is a specialized tissue that produces blood cells.



Axial Skeleton

- Skull
- Vertebral Column
- Thoracic cage
- Sacrum
- Coccyx
- 80 bones

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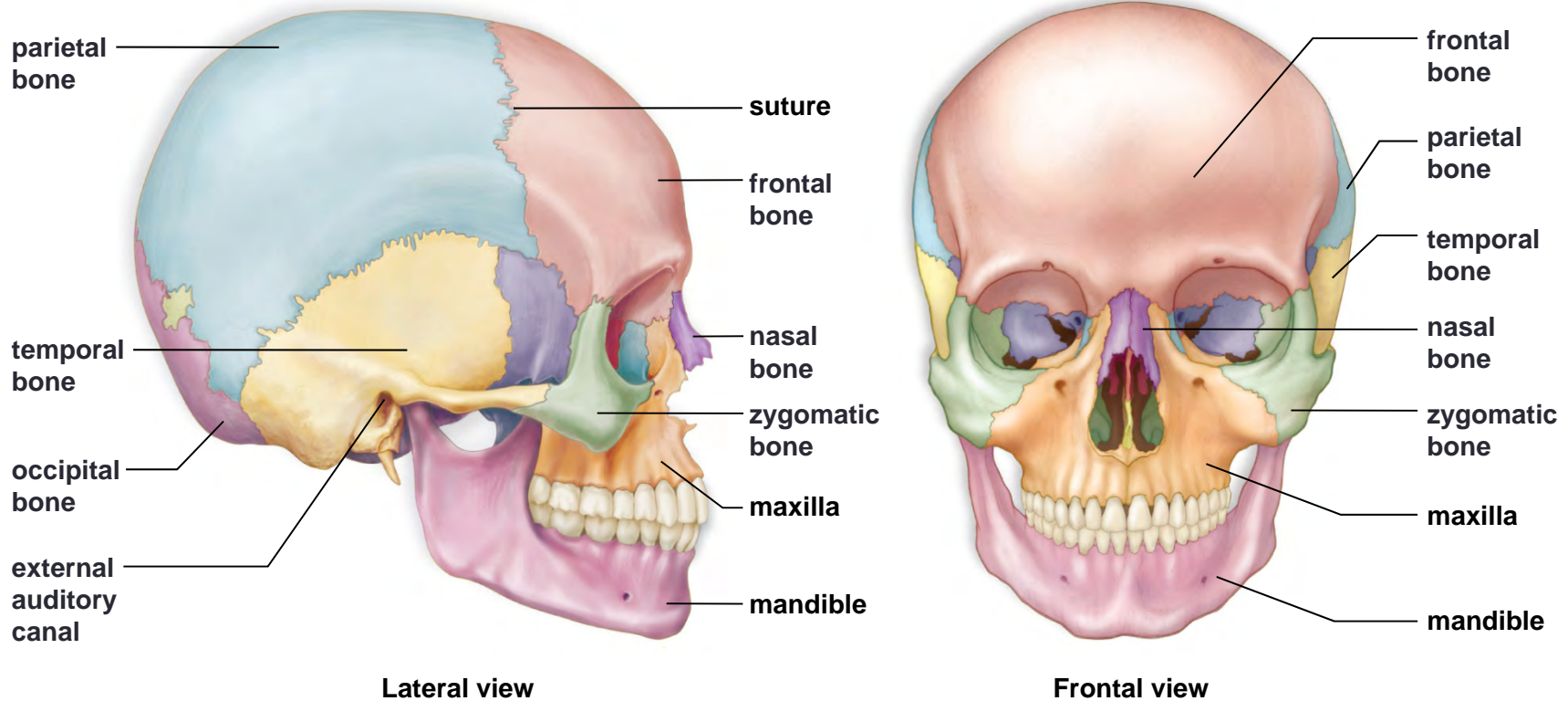
Axial Skeleton

- **Skull:** Protects brain.

Formed by cranium and facial bones.

Fontanel: “soft spots” in newborns, close and become **sutures**.

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Axial Skeleton

- **Vertebral column:** supports head&neck, protects spinal cord and roots of spinal nerves.

- Made of 24 vertebrae:

7 cervical (neck)

12 thoracic

5 lumbar (lower back)

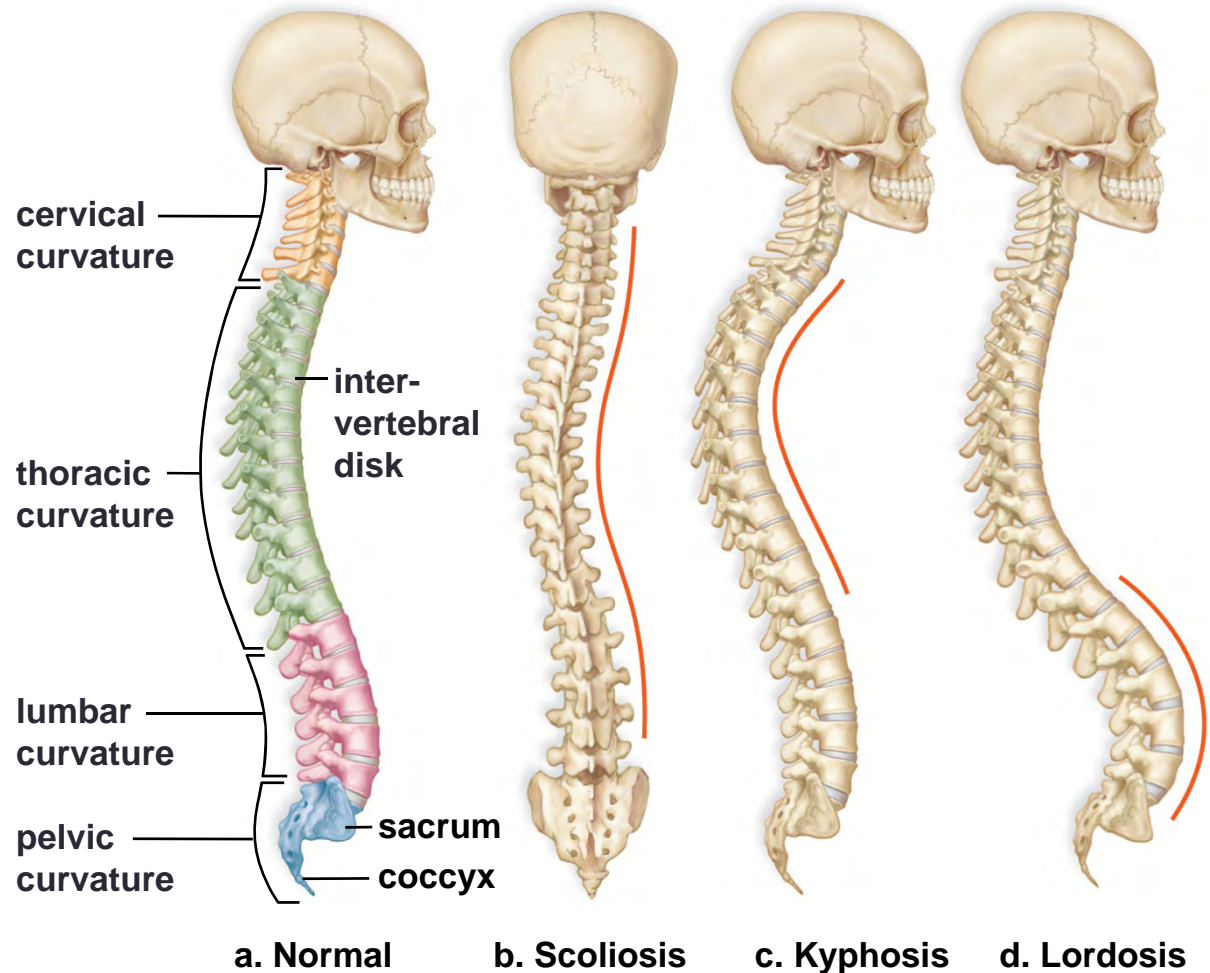
Sacrum

Coccyx

- **Intervertebral disks:**

Composed of fibrocartilage between the vertebrae provide padding. Allow the vertebrae to move.

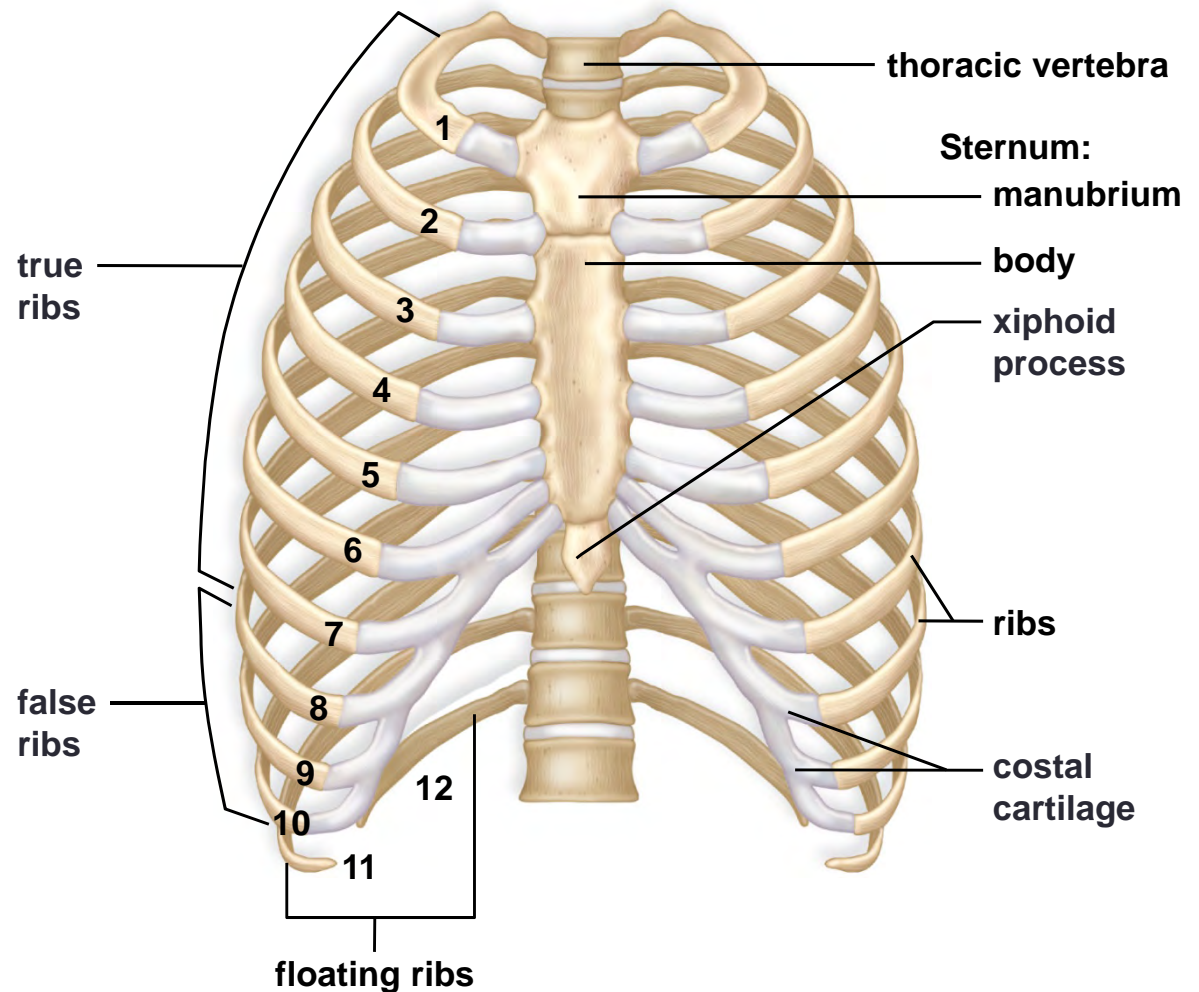
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Axial Skeleton

- **Rib Cage:** attached to thoracic vertebrae. Contains ribs, costal cartilages, and sternum.
- 12 pairs of ribs.
 - 7 upper are “true ribs” (attached directly to sternum);
 - lower 5 are called “false ribs”. Three attach via cartilage, 2 are “floating ribs”.
- Rib cage provides protection but is flexible.

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Appendicular Skeleton

- Pectoral Girdle and Upper Limb
- Pelvic Girdle and Lower Limb
- Total of 126 bones.

Appendicular Skeleton

Pectoral Girdle and Upper Limb

Pectoral girdle: forearm. Loosely linked by ligaments. Specialized for flexibility.

Clavicle: collarbone. Connects with sternum and scapula.

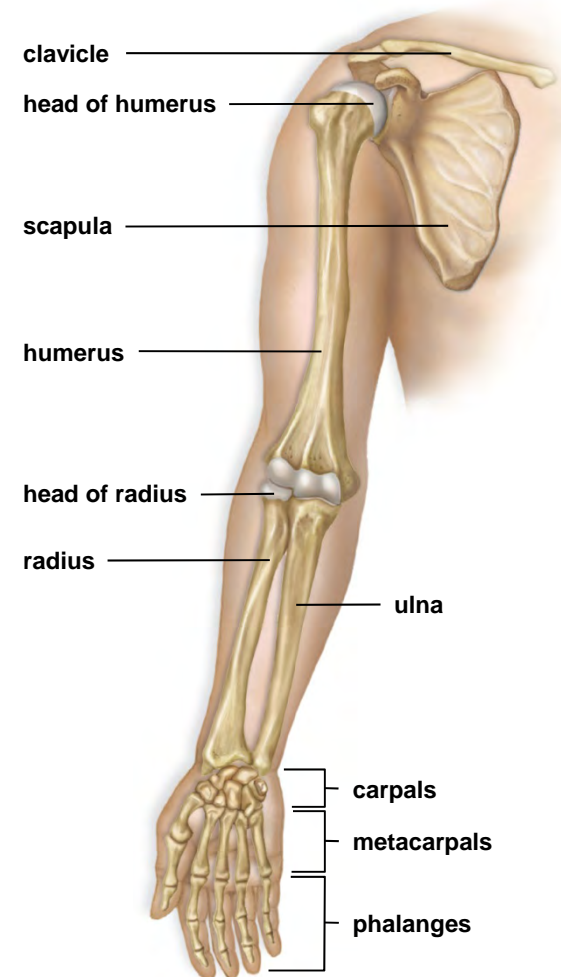
Scapula: shoulder blade. Held in place only by muscles, allowing it to glide and rotate on the clavicle.

Humerus: single long bone in arm, round head fits into socket of scapula.

Ulna and Radius: two bones of lower arm, meets opposite end of humerus. Prominent bone in elbow is the top of the ulna. Palm forward= radius crosses in front of ulna.

The hand is made up of eight **carpals**, from which five **metacarpals** fan out to form the palm.

Phalanges make up the fingers and thumb.



Appendicular Skeleton

Pelvic Girdle and Lower Limb

Pelvic girdle: consists of two heavy large **coxal bones** (hipbones) anchored to the sacrum and form a hollow cavity called the **pelvic cavity**.

Weight of the body is transferred through the pelvis to the lower limbs and onto the ground.

Femur: largest bone in the body. Thighbone.

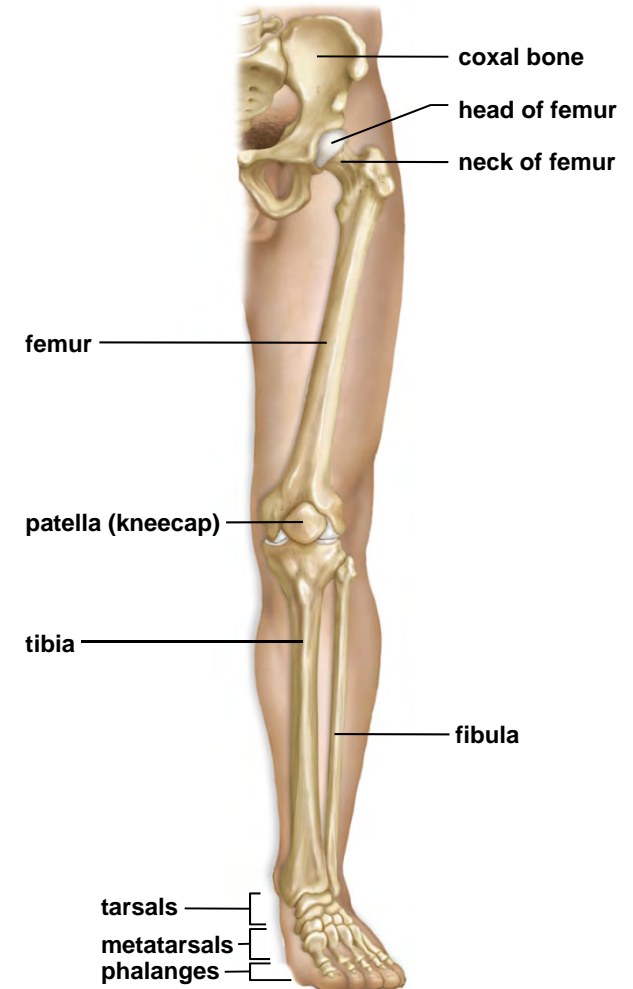
Tibia: Larger of the two lower leg bones; has a ridge called the shin. Prominence becomes inside of the ankle.

Fibula: the other lower leg bone; prominence contributes to outside of the ankle.

Tarsals: seven in ankle, but only 1 receives weight and passes it to the heel and ball of foot.

Metatarsals: form the arches of the foot; Provide stable springy base for body.

Phalanges: bones of the toes.



Classification of Joints

Joints = where bones are connected.

- **Fibrous:** ex: sutures; immoveable.
- **Cartilaginous:** ex: between vertebrae; slightly moveable.
- **Synovial:** ex: knee; freely moveable. Bones separated by a cavity.

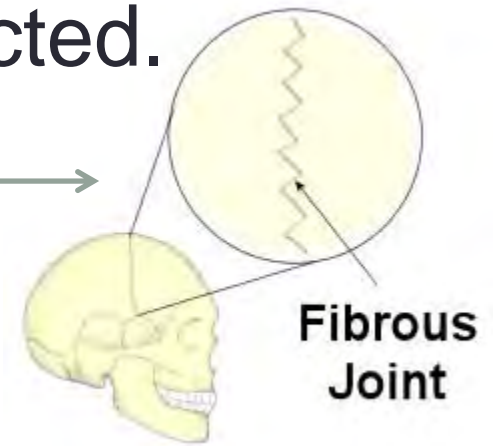
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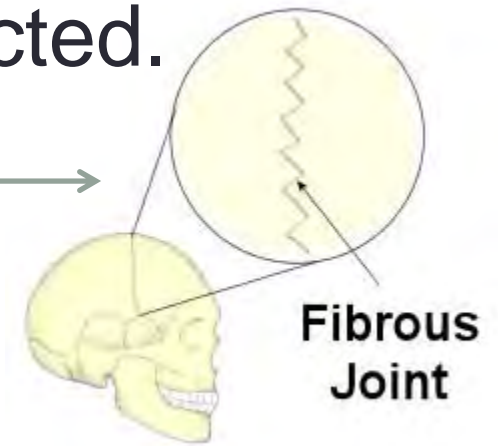


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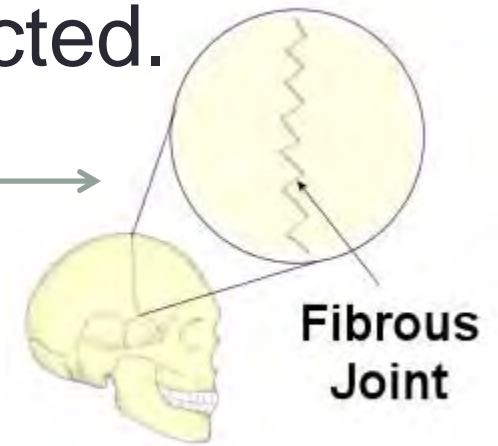


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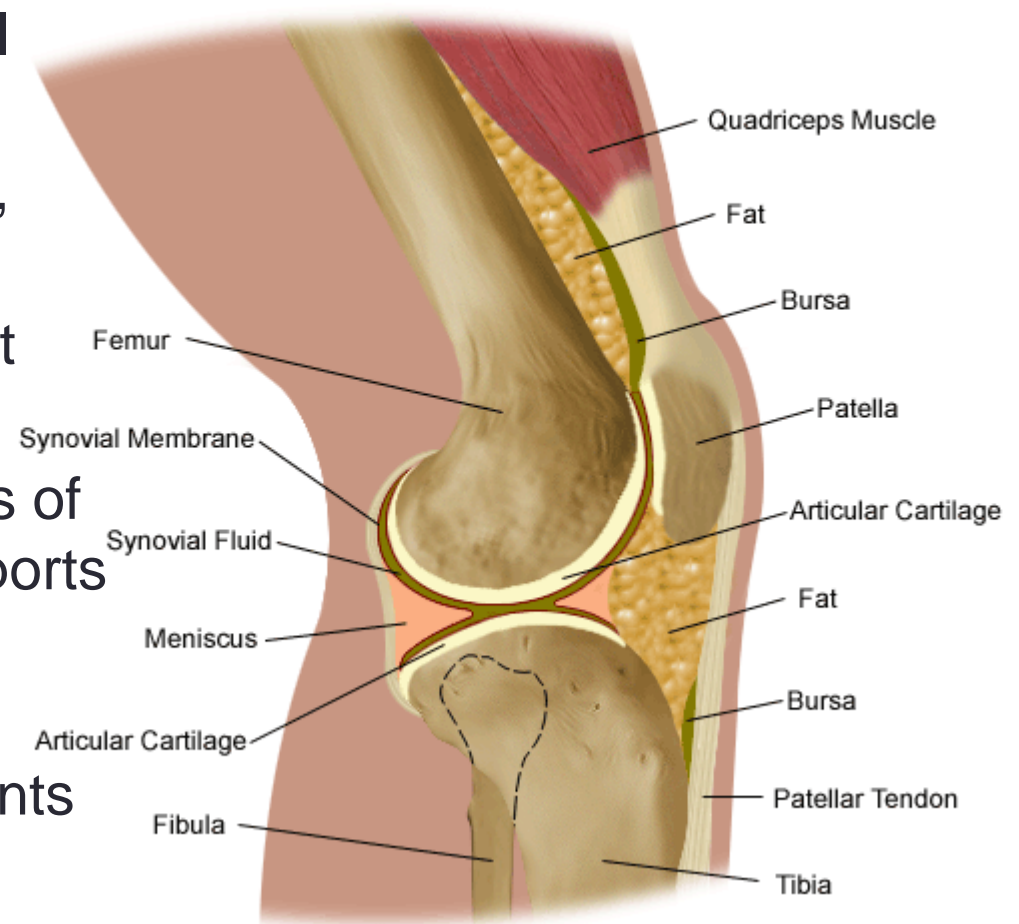


Knee Joint

A synovial joint

- **Joint capsule:** lined by **synovial membrane**
- **Synovial fluid:** lubricant for joint, produced by synovial membrane
- **Articular cartilage:** caps bone at joint
- **Menisci:** crescent-shaped pieces of cartilage; gives stability and supports weight
- **Bursae:** fluid-filled sacs, ease friction between tendons&ligaments and tendons&bones

Anatomy of the Knee



Classification of Joints

Types of moveable joints

- **Hinge Joints:** knee, elbow. Permit movement in one direction.
- **Pivot Joint:** small cylindrical projection of one bone pivots within the ring formed of bone and ligament of another bone, making rotation possible.
- **Ball-and-socket Joint:** allow movement in all planes and rotational movement. Ex: ball of femur fits into a socket on the hipbone.

Classification of Joints

Types of moveable joints

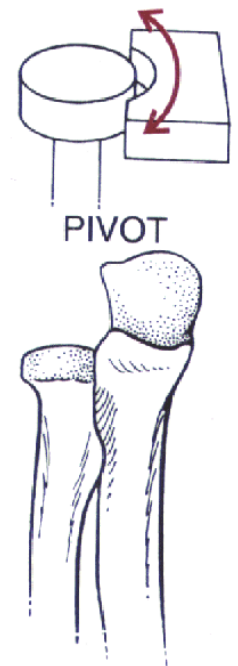
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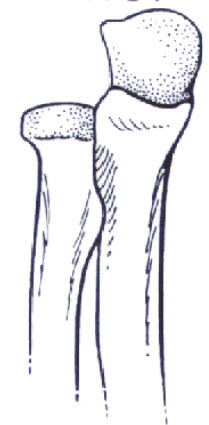
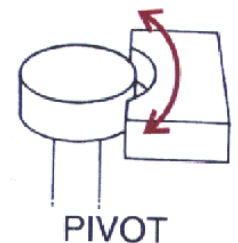
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<http://www.youtube.com/watch?v=VNbrvU7MgY0&feature=related>

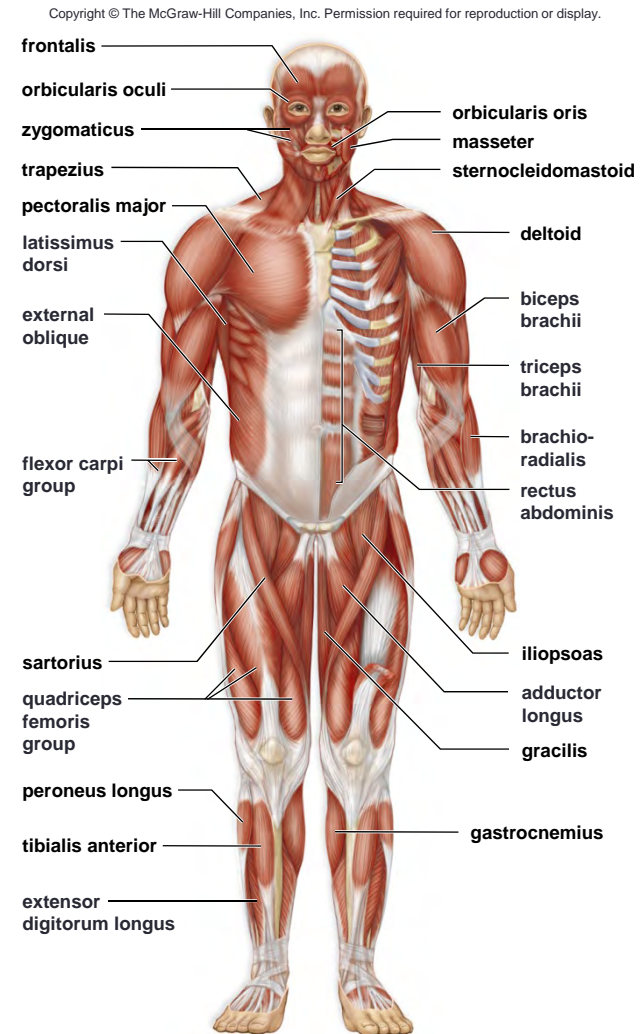
Human Muscular System

Three types of muscle tissue: skeletal, cardiac, smooth.

- Skeletal Muscle: aka striated voluntary muscle.
 - Important in maintaining posture, providing support, allowing movement, homeostasis through maintaining body temperature.
 - Contraction of skeletal muscle causes ATP breakdown, releasing heat which is distributed throughout the body.

Skeletal Muscle

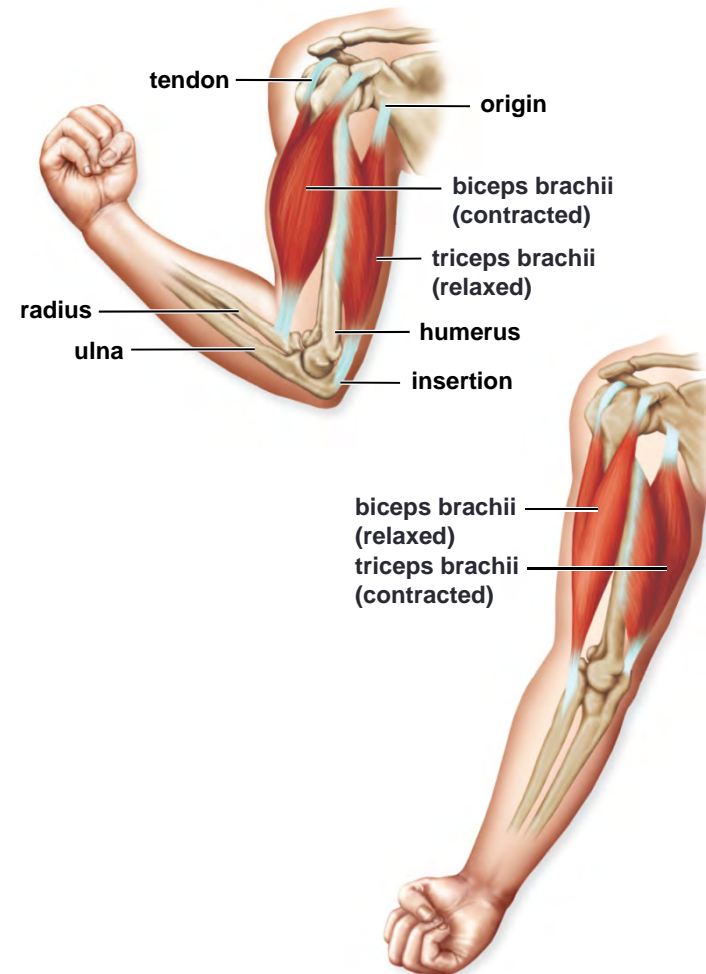
- Fun fact: the nearly 700 skeletal muscles and associated tissues make up ~40% of the weight of an average human.
- **Tendons:** fibrous connective tissue that attaches skeletal muscle to bone.



Skeletal Muscle Physiology

- When muscles contract, they shorten; therefore muscles can only pull.
- Muscles must work in **antagonistic pairs**: one flexes the joint and bends the limb, the other extends the joint and straightens the limb.
- When one muscle contracts, it stretches its antagonistic partner.
- Even when muscles appear “at rest”, they exhibit **tone**, in which some of their fibers are contracting. Important for posture.

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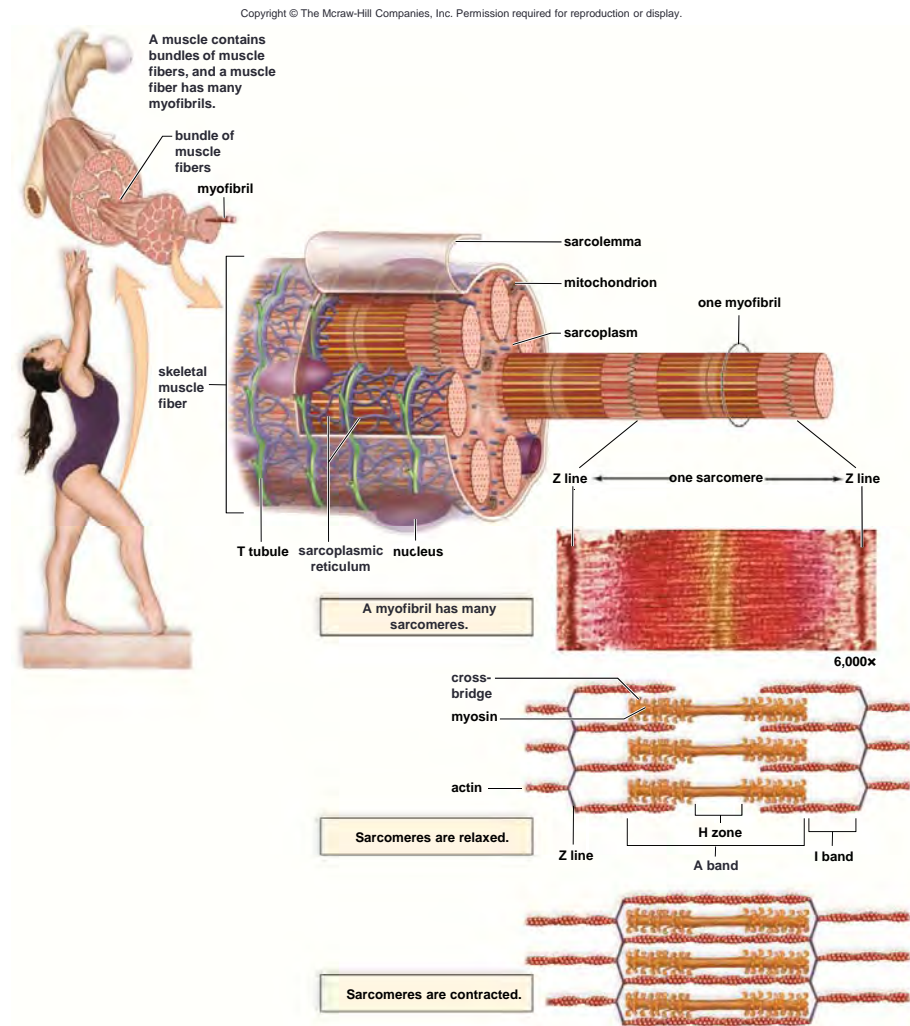


Microscopic Anatomy of Skeletal Muscle

- Vertebrate skeletal muscle is composed of a number of muscle fibers in bundles. Each muscle fiber is a cell.
- **Sarcolemma:** plasma membrane, forms a **T system** (transverse). T tubules penetrate into cell so they contact expanded portions of **sarcoplasmic reticulum:** a modified ER that serves as storage for Ca^{2+} needed for muscle contraction.
- **Myofibrils:** encased in sarcoplasmic reticulum; contractile portions of muscle fiber. Cylindrical, run length of muscle fiber; light and dark bands (striations) formed by the placement of protein filaments within contractile units called **sarcomeres**.
- Types of protein filaments: **myosin** (thick) and **actin** (thin)

Microscopic anatomy

- Vertebrate skeletal muscle is composed of a number of muscle fibers in bundles. Each muscle fiber is a cell.
- **Sarcolemma:** modified plasma membrane of muscle fiber/cell.
- **Sarcoplasmic reticulum:** a modified ER that encases myofibrils and serves as storage for Ca^{2+} needed for muscle contraction.
- **Myofibrils:** encased in sarcoplasmic reticulum; contractile portions of muscle fiber. Cylindrical, run length of muscle fiber; light and dark bands (striations) formed by the placement of protein filaments within contractile units called **sarcomeres**.
- **Sarcomeres** extend between two dark lines called **Z lines**.
- Within sarcomeres, there are two types of protein filaments: **myosin** (thick) and **actin** (thin)
- **I-band:** light colored, contains only actin filaments attached to a Z-line.
- **A-band:** dark region containing overlapping actn and myosin filaments
- **H-zone:** only myosin filaments



Sliding Filament Model

- When muscle fibers contract, sarcomeres within the myofibrils have shortened.
- When sarcomere shortens, actin (thin) filaments slide past the myosin (thick) filaments, causing the I-band to shorten and the H-zone to nearly disappear.
- <http://www.youtube.com/watch?v=XoP1diaXVCI&feature=endscreen>

ATP and Muscle Contraction

- Myoglobin: molecule that stores O₂
- Creatine phosphate: storage form of high-energy phosphate. Anaerobically regenerate ATP.
- When CP is depleted, mitochondria may have produced enough ATP for muscle contraction without consuming O₂. If not, **fermentation** occurs, causing **lactate** build up.
- Oxygen debt: may occur after exercise.
- Lactate is broken down into 20% CO₂ and H₂O
- ATP produced by respiration used to reconvert 80% of lactate to glucose.

Muscle Innervation

- Muscles are stimulated to contract by **motor nerve fibers**.
- Nerve fibers have several branches, each ends at an **axon terminal** that lies near the sarcolemma of a muscle fiber.
- The **synaptic cleft** is a small gap separating the axon terminal from the sarcolemma.

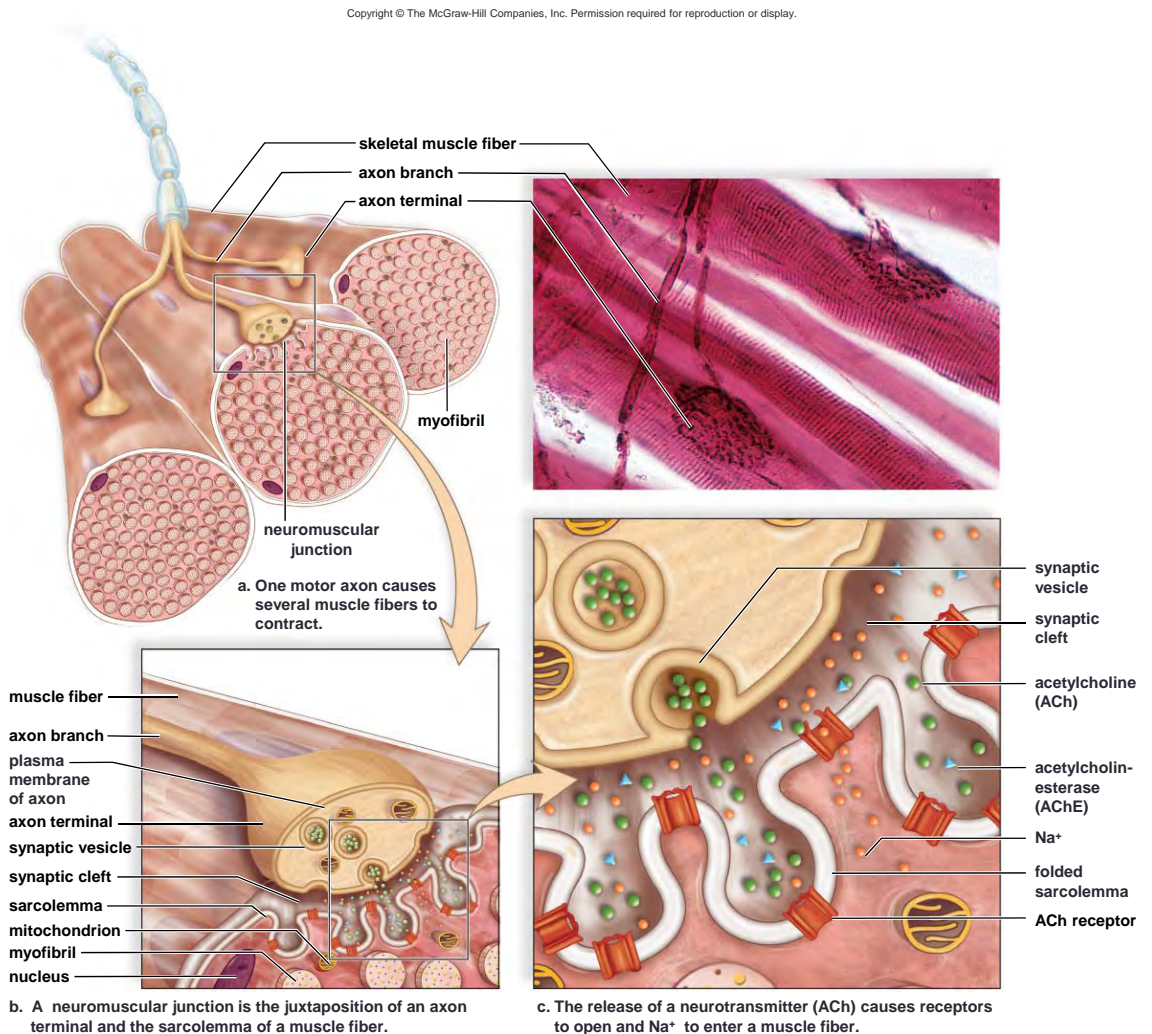
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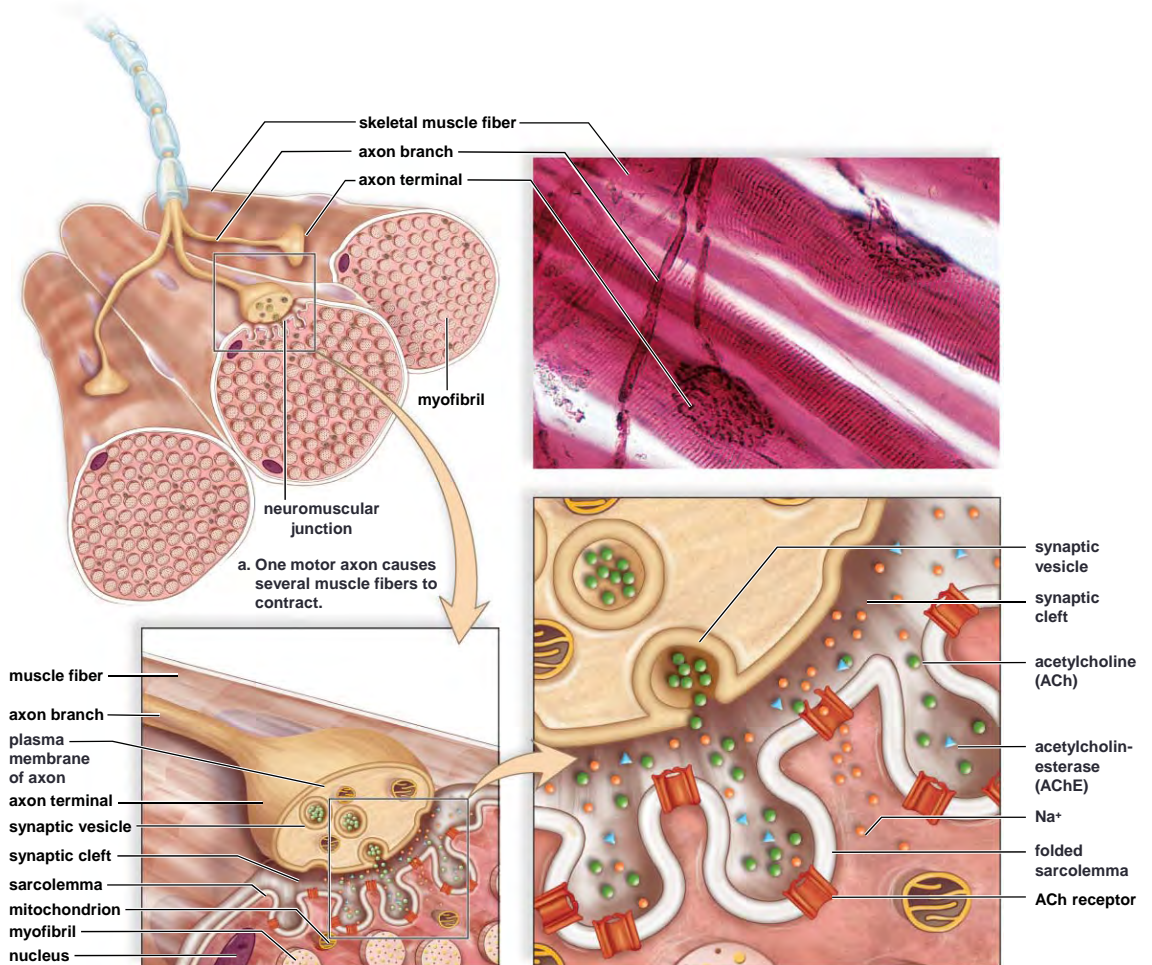
Axon terminals contain **synaptic vesicles** filled with the neurotransmitter **acetylcholine (ACh)**.



Muscle Innervation

- Nerve impulse travels down motor neuron to axon terminal.
- Synaptic vesicles release Ach into synaptic cleft
- Ach diffuses across cleft and binds to receptors in the sarcolemma.
- Sarcolemma generates impulses that spread to sarcoplasmic reticulum.
- Filaments within sarcomeres slide past one another.
- Sarcomere contraction results in myofibril contraction, which results in muscle fiber and muscle contraction.
- <http://www.youtube.com/watch?v=9FF6UKvDgeE>

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