

BONY PELVIS

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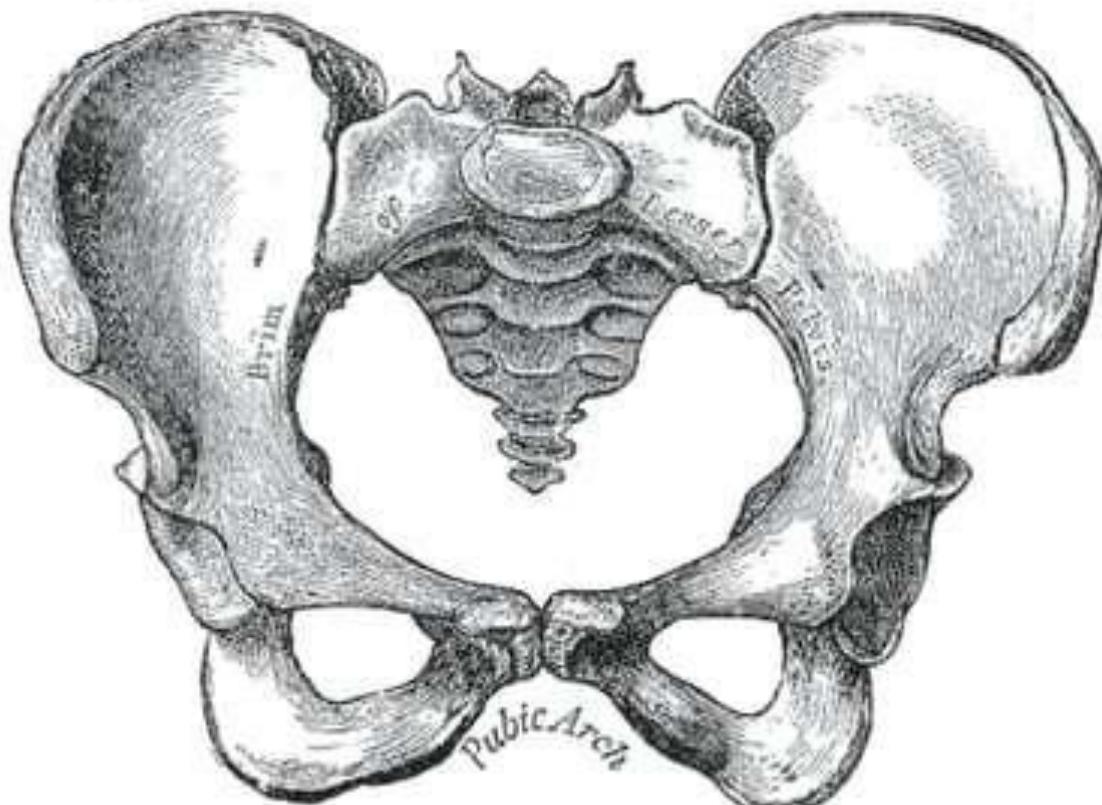
Learning Objectives

Bony Pelvis:

1. Introduction.
2. Importance of pelvis.
3. Anatomical position.
4. Divisions of pelvis.
5. Diameters of pelvis.
6. Sex difference of adult pelvis.
7. Types of female pelvis.
8. Applied anatomy of pelvis.

Introduction

- Pelvis(Latin): ' a basin'
- Pelvis girdle: Bony ring
 - 1. Two hip bones
 - 2. One sacrum
 - 3. One coccyx



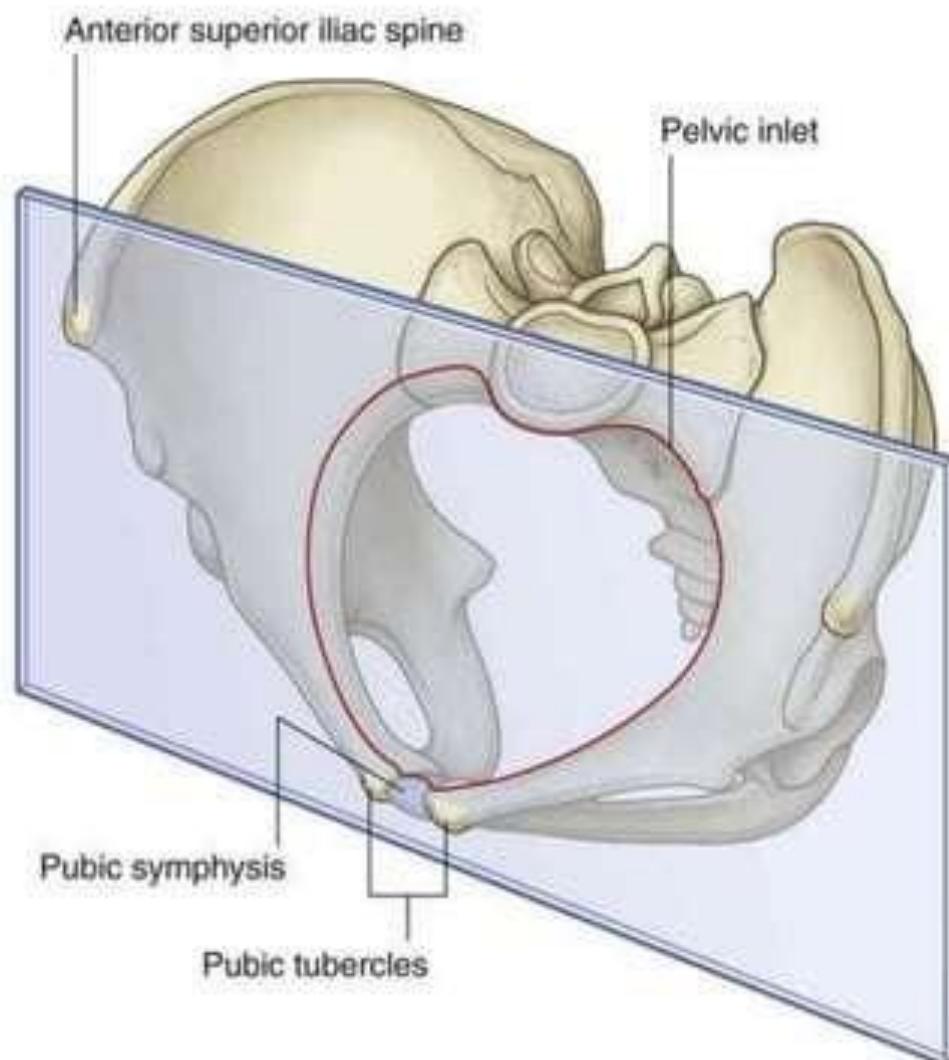
Functions of pelvis

1. Locomotion
2. Weight transmission
3. Provides areas for the attachments of muscles
4. Protection of pelvic viscera
5. Plays important role in parturition.

Anatomical position

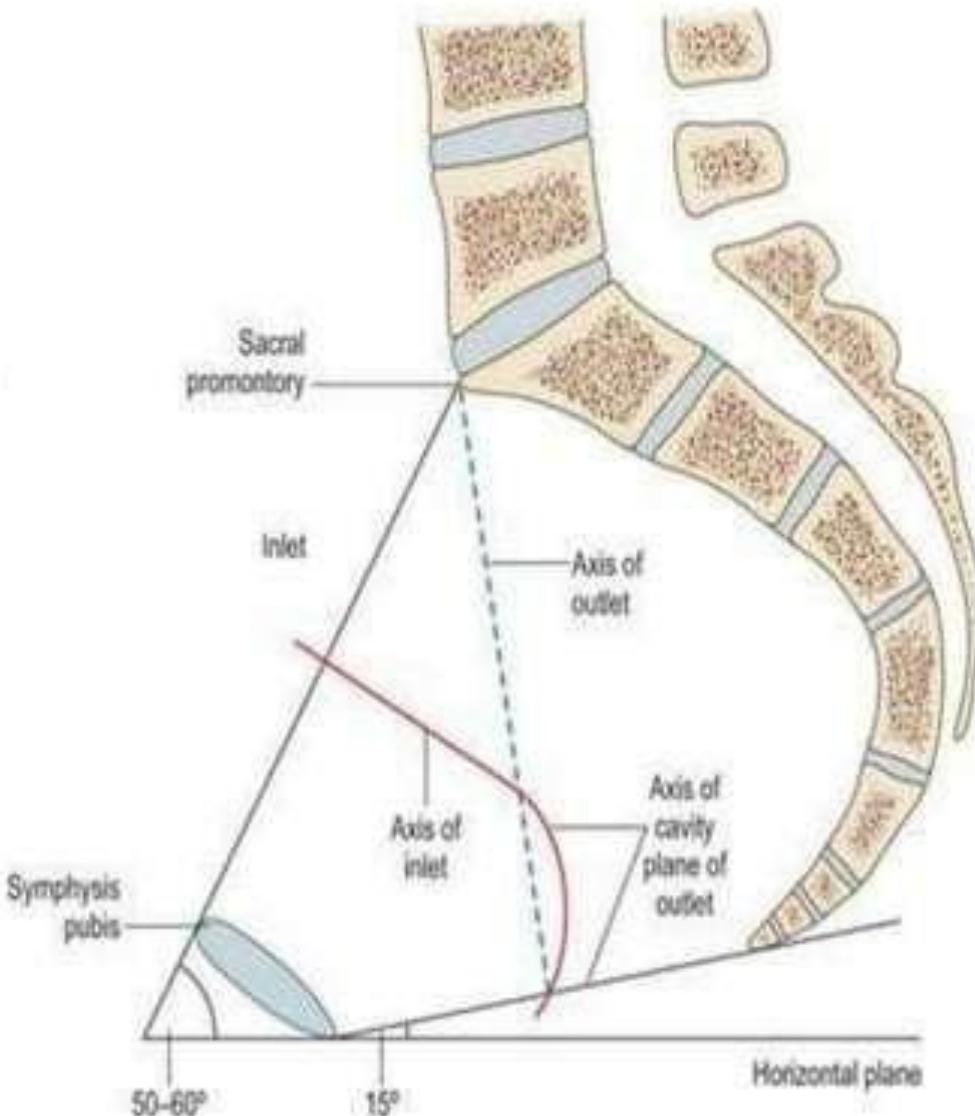
1. Pubic Symphysis lies in midsagittal plane.
2. Anterior superior iliac spine(ASIS) and pubic tubercles lie in same coronal plane.

Plane of pelvic inlet forms an angle of 55-60 degree with horizontal plane.

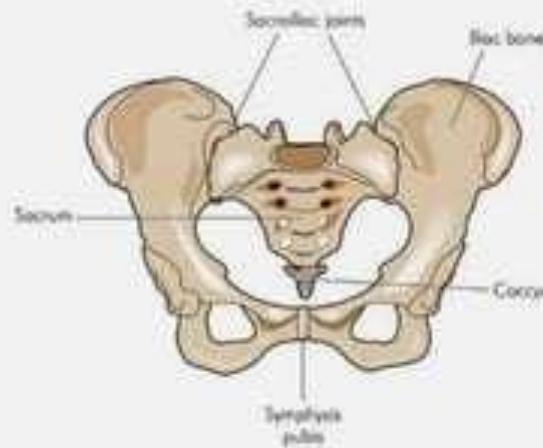


Axes and inclination of pelvis

1. Axis of inlet
2. Axis of outlet
3. Axis of pelvic cavity



Joints of pelvis



Joints within Pelvis:

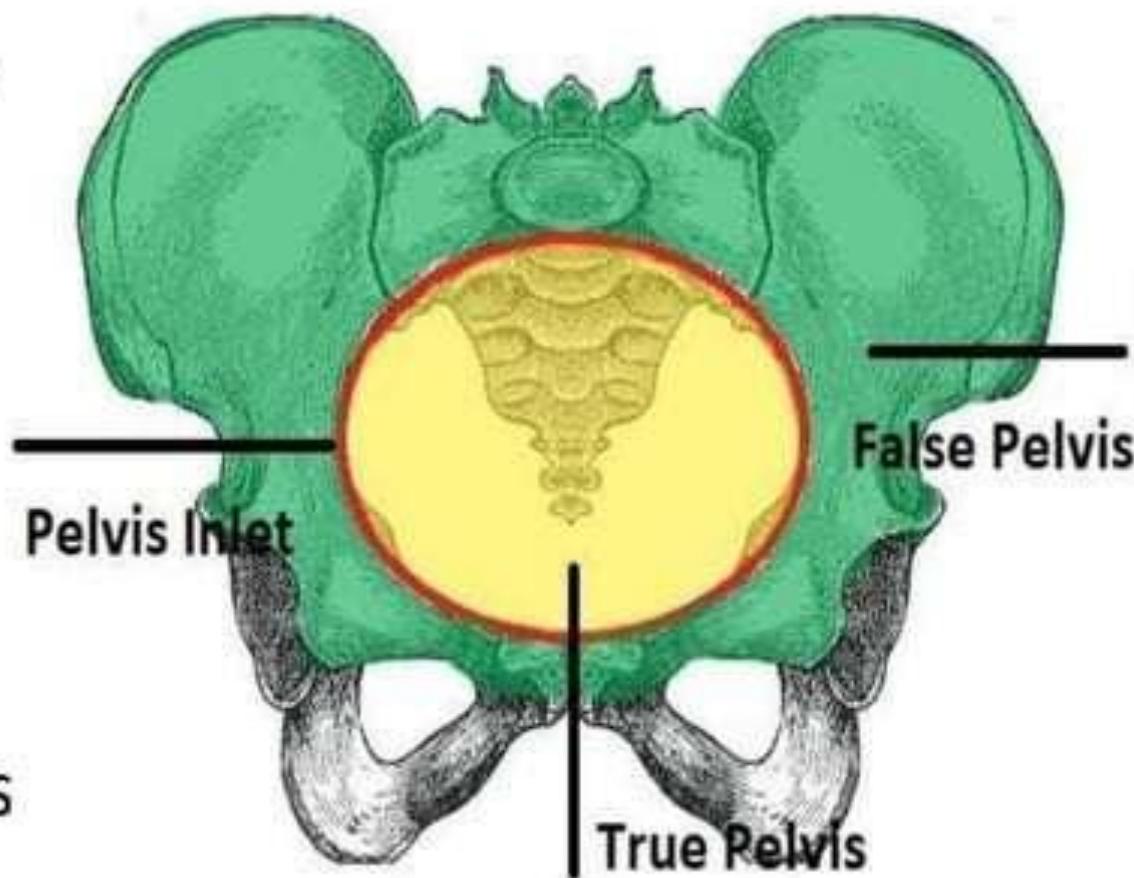
1. Sacroiliac Joint : Synovial Type
2. Symphysis Pubis
3. Sacrococcygeal Joint

Joints Associated with Pelvis:

1. Hip Joint: Synovial Type

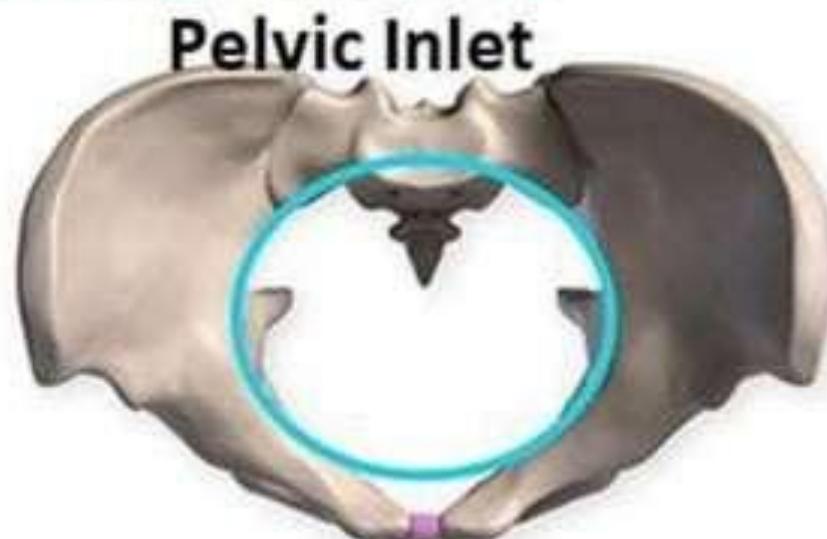
Divisions of pelvis

1. Greater Pelvis/
Pelvis Major/
False Pelvis.
2. Minor Pelvis/
Lesser Pelvis/
True Pelvis/
Obstetric Pelvis

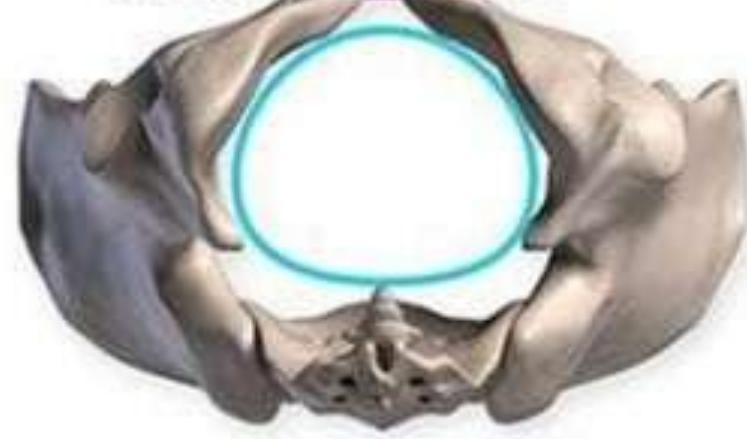


Divisions of lesser pelvis

1. Inlet
2. Outlet
3. Cavity



Pelvic Inlet



Pelvic Outlet

Boundaries of pelvic inlet

- I. Bony Contributions(Pelvic Brim)
 - A. Sacral contributions
 - a. Sacral promontory
 - b. Ala of sacrum
 - B. Contributions by hip bone(linea terminalis)
 - a. Iliac part (Arcuate line)
 - b. Pubic part (Pecten pubis, Pubic crest)
- II. Articular contributions
 - A. Pubic symphysis (Anterior midline)
 - B. Sacroiliac Joints (Posterolateral)

Boundaries of pelvic outlet

I. Anteriorly:

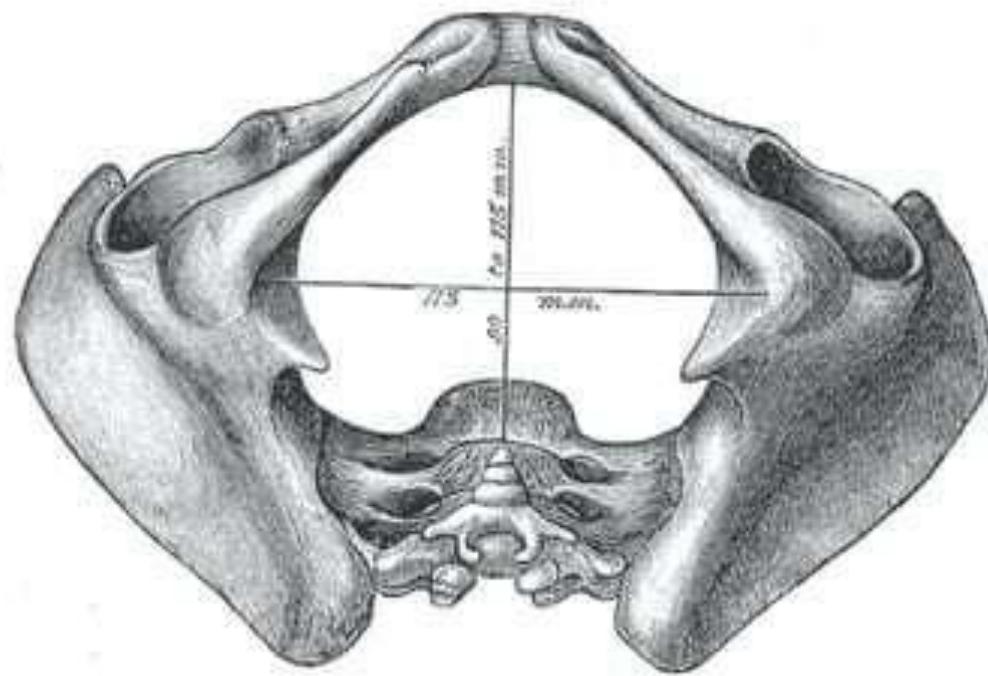
Lower border of
Pubic Symphysis.

II. Posteriorly:

Tip of coccyx.

III. Laterally:

1. Half of pubic arch
2. Ischiopubic ramus
3. Ischial tuberosity
4. Sacrotuberous
ligament.



Boundaries of pelvic cavity

I. Anteriorly:

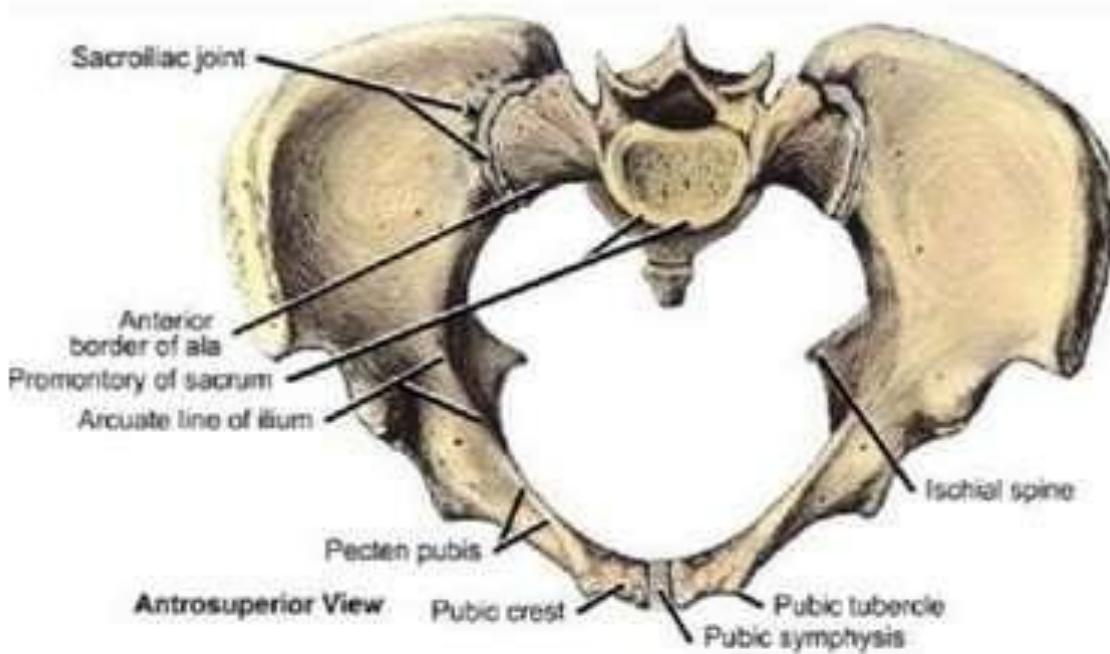
- Pelvic surfaces of
- Pubic Symphysis
 - Body of pubis
 - Pubic rami

II. Posteriorly:

- Pelvic surfaces of
- Sacrum
 - Coccyx

III. Laterally:

- Pelvic surfaces of
- Ilium
 - Ischium



Sex differences in adult pelvis



Sex differences in adult pelvis

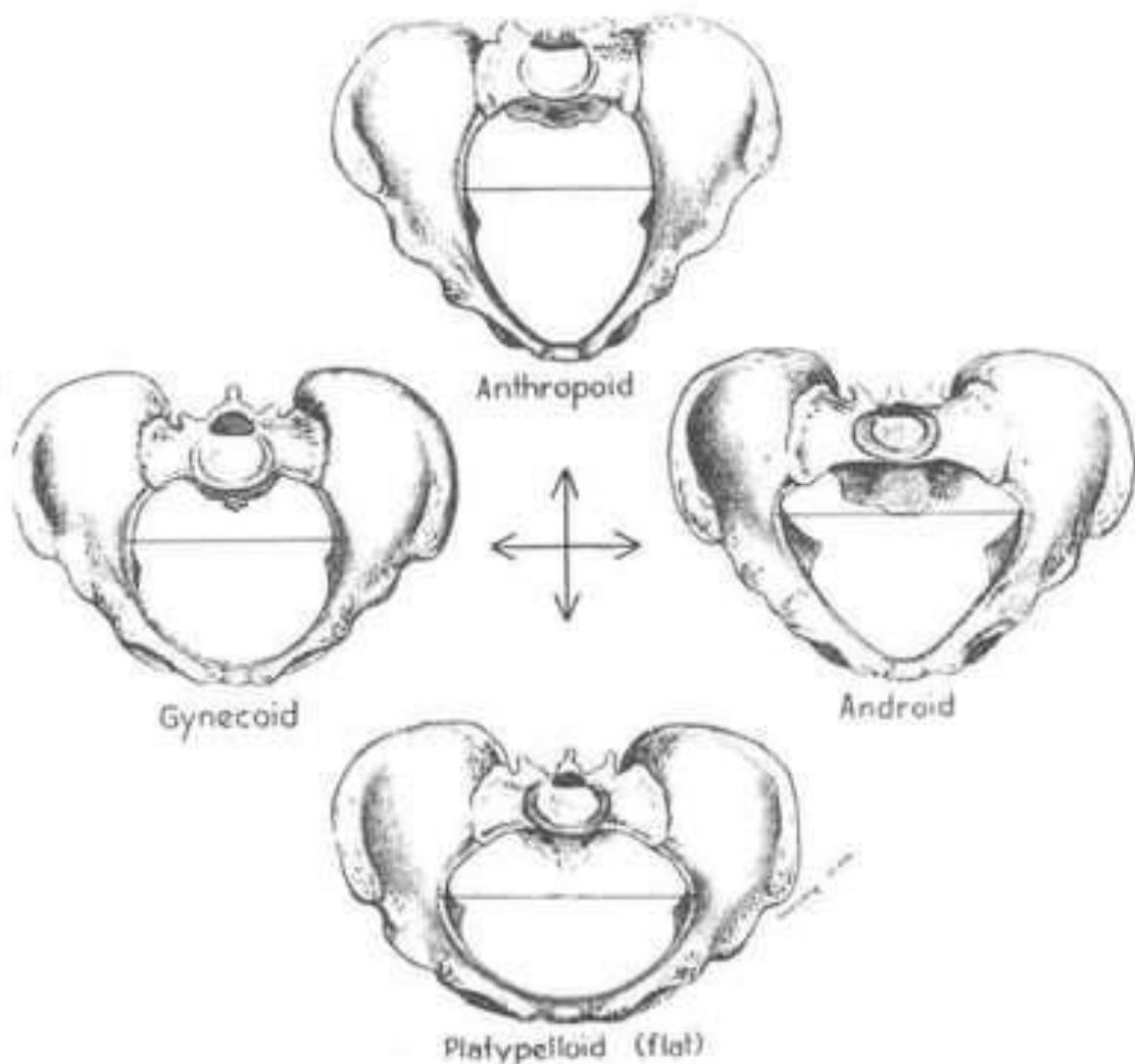
Features	Male	Female
1. General Structure	Thick and heavy	Thin and light
2. Markings for muscular attachments	Very prominent	Less prominent
3. False pelvis	Deep	Shallow
4. Pelvic inlet	Heart Shaped	Circular or Oval
5. Sacral promontory	More prominent	More flat
6. Pubic tubercles	Closer	Wider apart
7. Cavity	Narrower and deeper	Wide and shallower
8. Sciatic notch	Narrower	Wider
9. Ischial spine	Projected inwards	Projected outwards
10. Ischial tuberosity	Inverted	Everted
11. Subpubic angle	Acute <90	Wider 90 degree or >90

Sex differences in adult pelvis

Features	Male	Female
12. Obturator foramen	Oval	Triangular
13. Preauricular sulcus	Less prominent	More prominent
14. Acetabulum	Larger	Smaller
15. Sacral Index, ie Breadth of sacrum x 100/ Length of sacrum	Lesser	Greater
16. Pelvic outlet	Comparatively smaller	Comparatively larger

Types of female pelvis

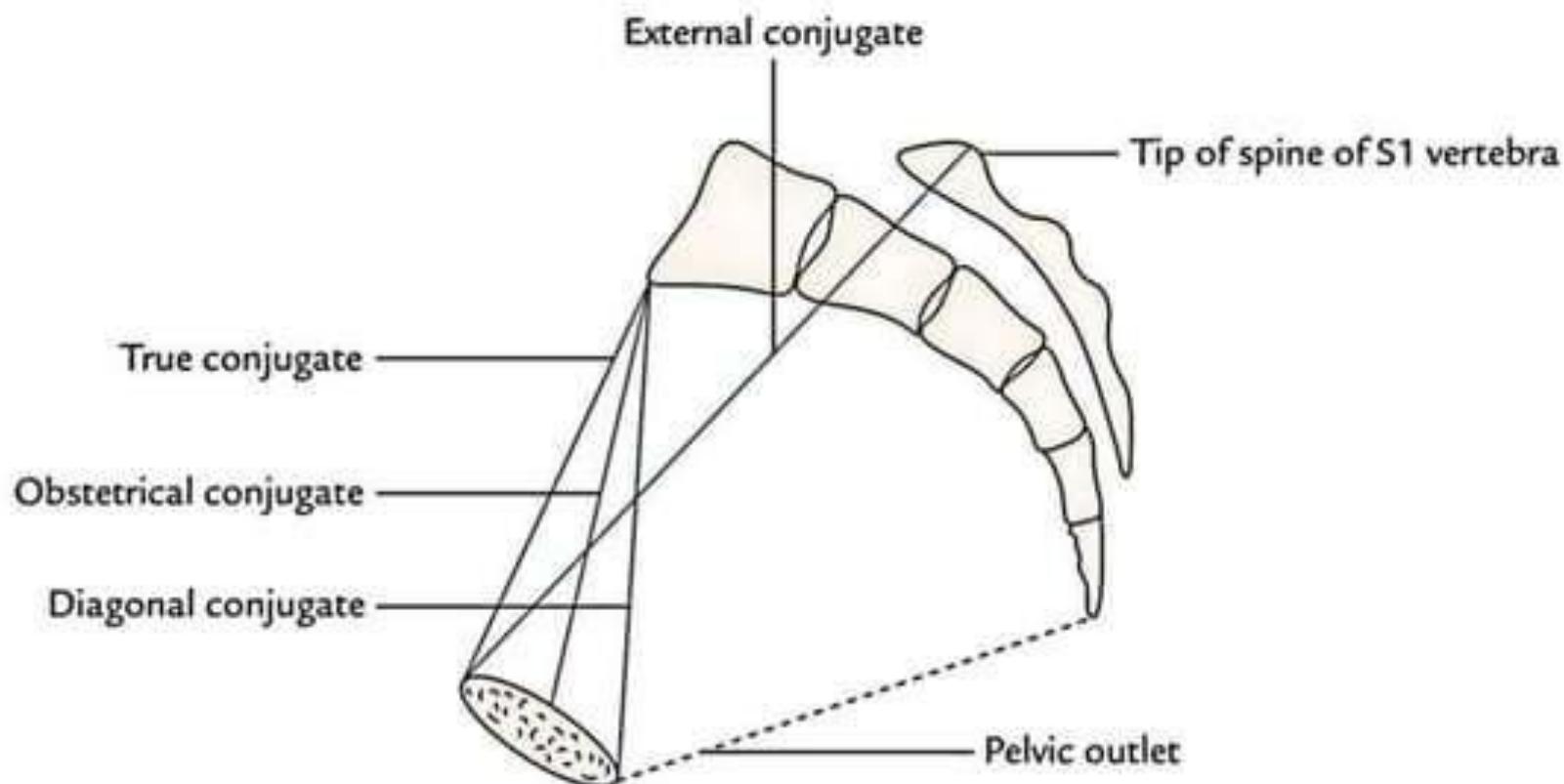
1. Gynaecoid Pelvis
2. Android Pelvis
3. Anthropoid Pelvis
4. Platypelloid Pelvis



	Gynecoid	Anthropoid	Android	Platypelloid
Pelvic inlet Transverse diameter		Narrow		
AP diameter		Wide		Narrow
Forepelvis	Wide	Divergent	Narrow	Straight
Pelvic midcavity Side walls	Straight	Narrow	Convergent	Wide
Inclination of sacrum		Wide	Forward	Narrow
Pelvic outlet Subpubic arch	Wide		Narrow	Wide

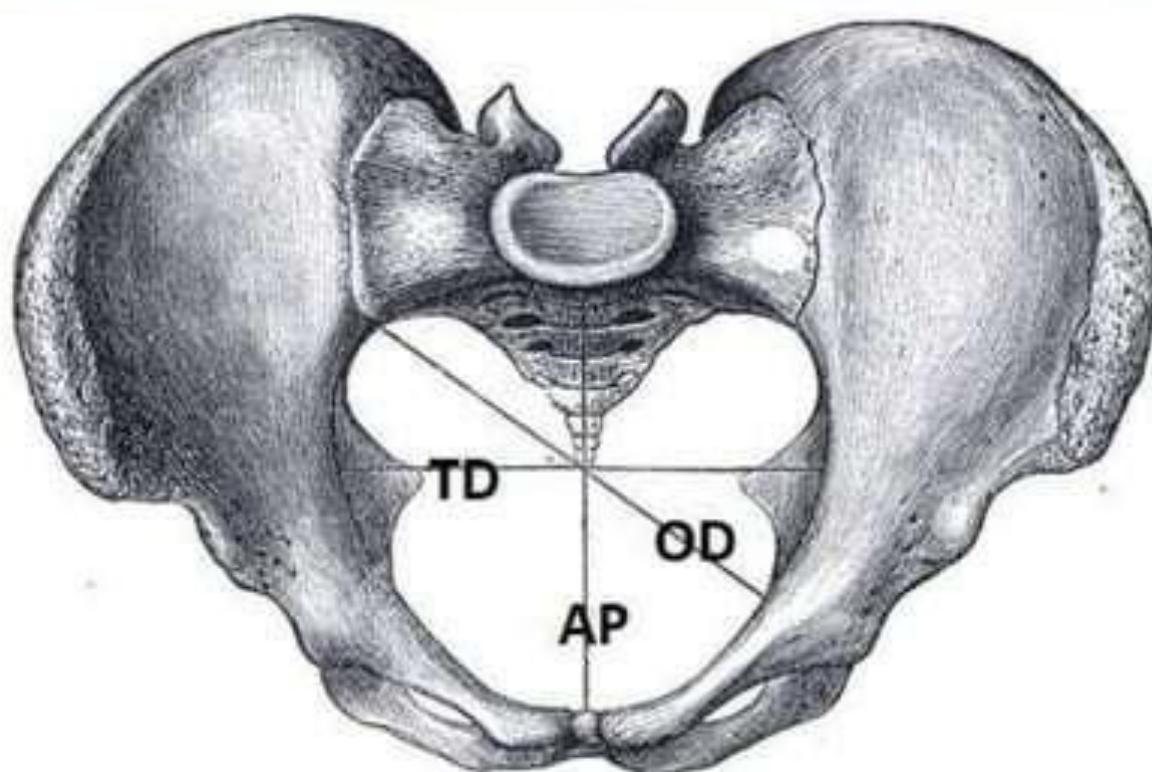
Conjugate diameters

1. External Conjugate
2. True Conjugate
3. Diagonal Conjugate
4. Obstetrical Conjugate



Diameters of pelvis

Pelvis	Diameter (cm)		
	Anteroposterior	Transverse	Oblique
Pelvic Inlet	11	13	12
Pelvic Cavity	12	12	12
Pelvic Outlet	13	11	-



Applied anatomy

1. Diameters of the pelvic inlet in females are very important due to obstetrical reasons (to evaluate cephalopelvic disproportion:CPD).
2. Interspinous diameter (least pelvic diameter) can be estimated by palpating sacrospinous ligament through vagina. The length of this ligament is equal to the half interspinous diameter.

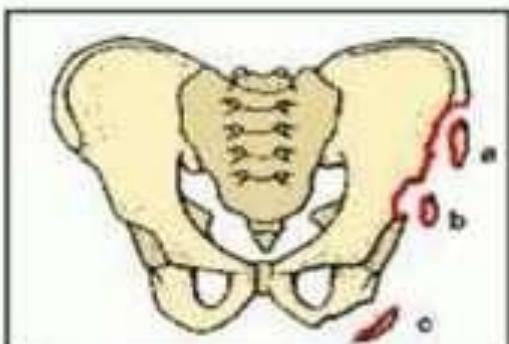
3. Pelvic Fracture:

- i. Stable fracture: Intact pelvic ring.
- ii. Unstable fracture: Disrupted pelvic ring.
- iii. Complicated fracture:

Associated with visceral damage: Urinary bladder and Urethra are most vulnerable viscera.

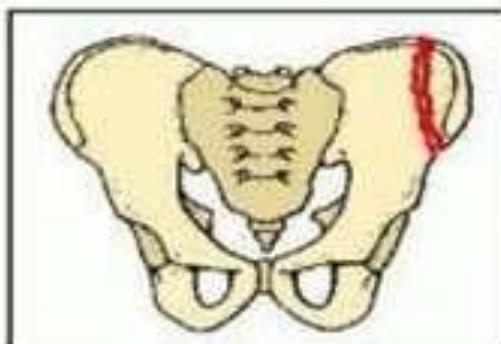
Stable pelvic fractures:

Avulsion



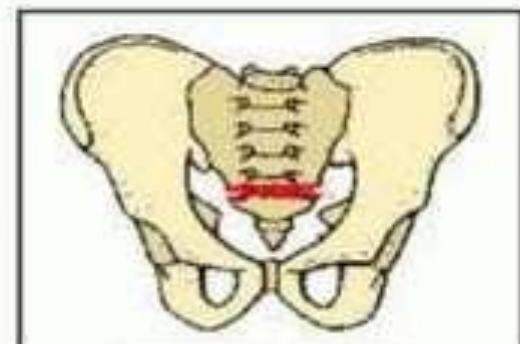
involving (a) anterosuperior or
(b) anteroinferior iliac spine
or (c) ischial tuberosity

Duverney



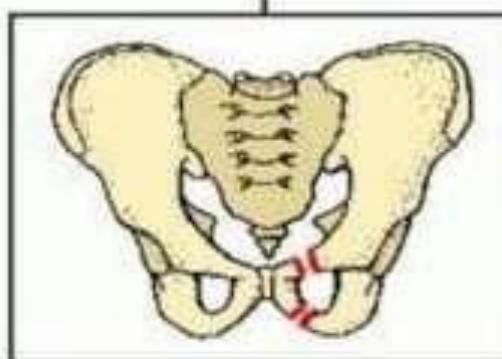
involving iliac wing

Sacral

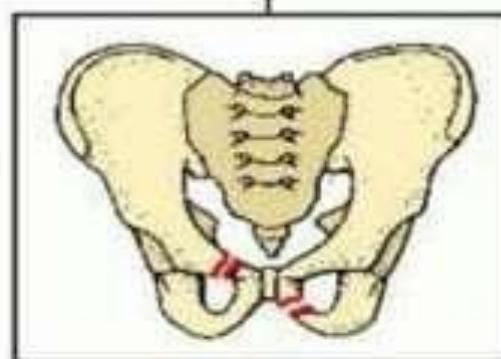


transversely oriented

Ischiopubic Rami



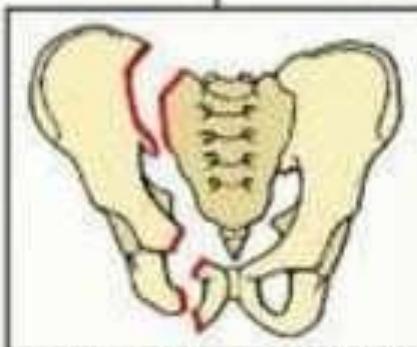
unilateral



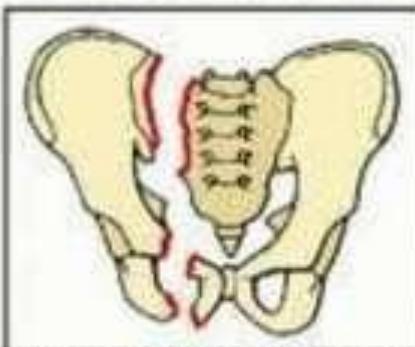
bilateral

Unstable pelvic fractures:

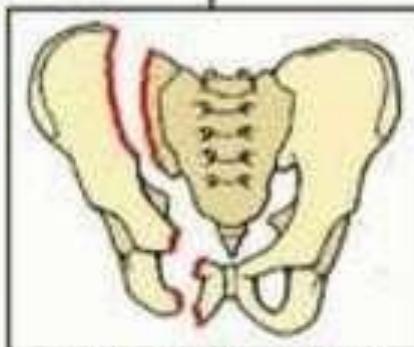
Malgaigne (Involving Unilateral Ischiopubic Rami)



with disruption of ipsilateral
sacroiliac joint

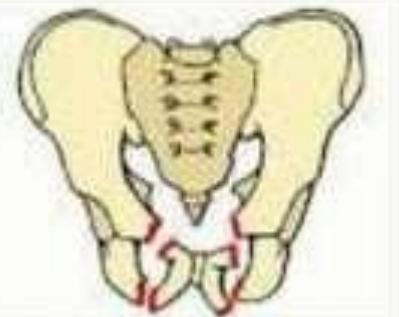


with fracture through sacral wing



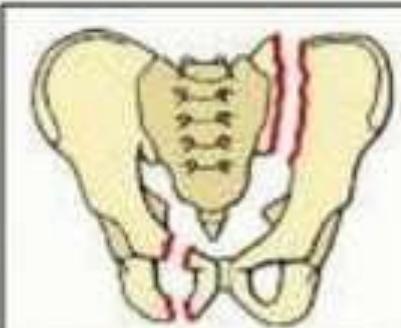
with fracture through ilium

Straddle



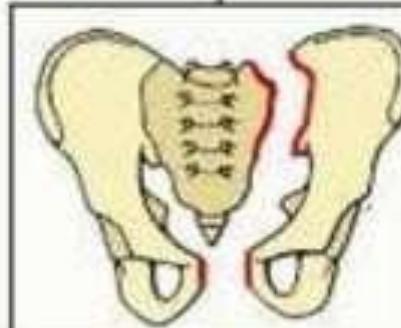
involving both obturator rings
(often comminuted)

Bucket-handle

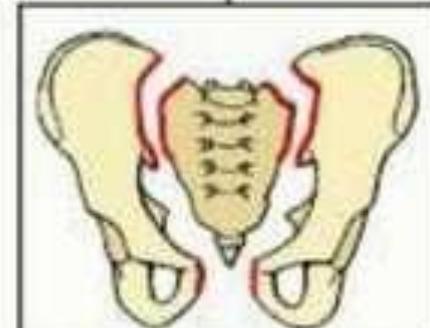


involving unilateral ischiopubic
rami with fracture about or disruption
of contralateral sacroiliac joint

"Dislocations"



unilateral



bilateral (sprung pelvis)

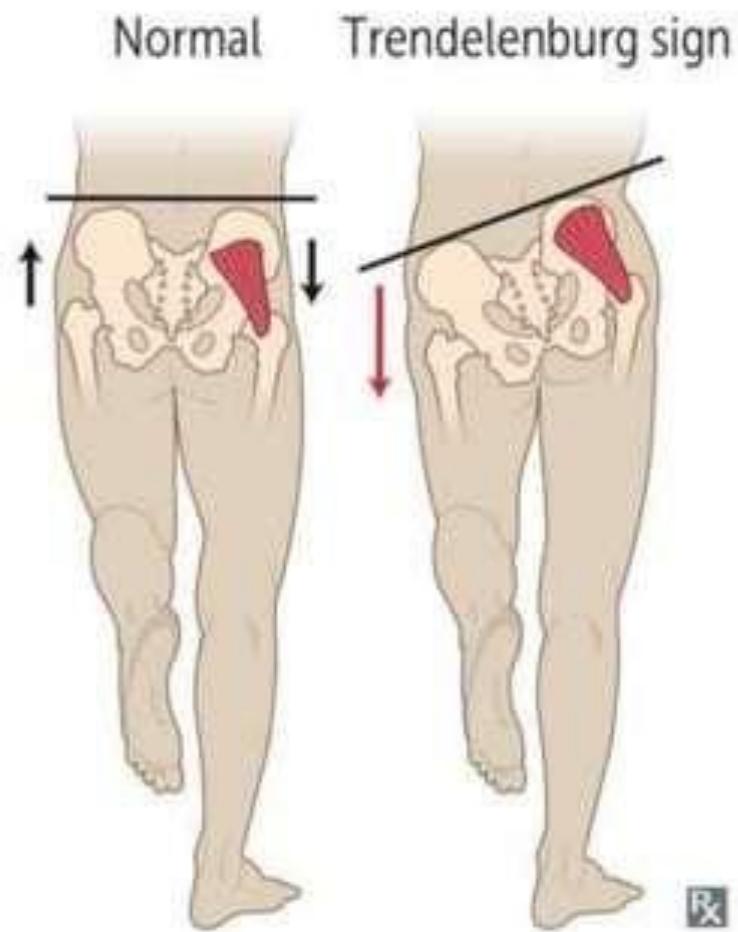
4. Association with acetabulum:

- a. Fracture of acetabulum occurs when head of femur is pushed medially.
- b. Hip dislocation.
- c. Wandering acetabulum: Complication of tuberculosis of hip.



5. Trendelenburg's Sign:

Gluteus medius and minimus of one side are paralyzed due to injury of the superior gluteal nerve, the pelvis sags on the healthy side if that foot is off the ground resulting in lurching gait.



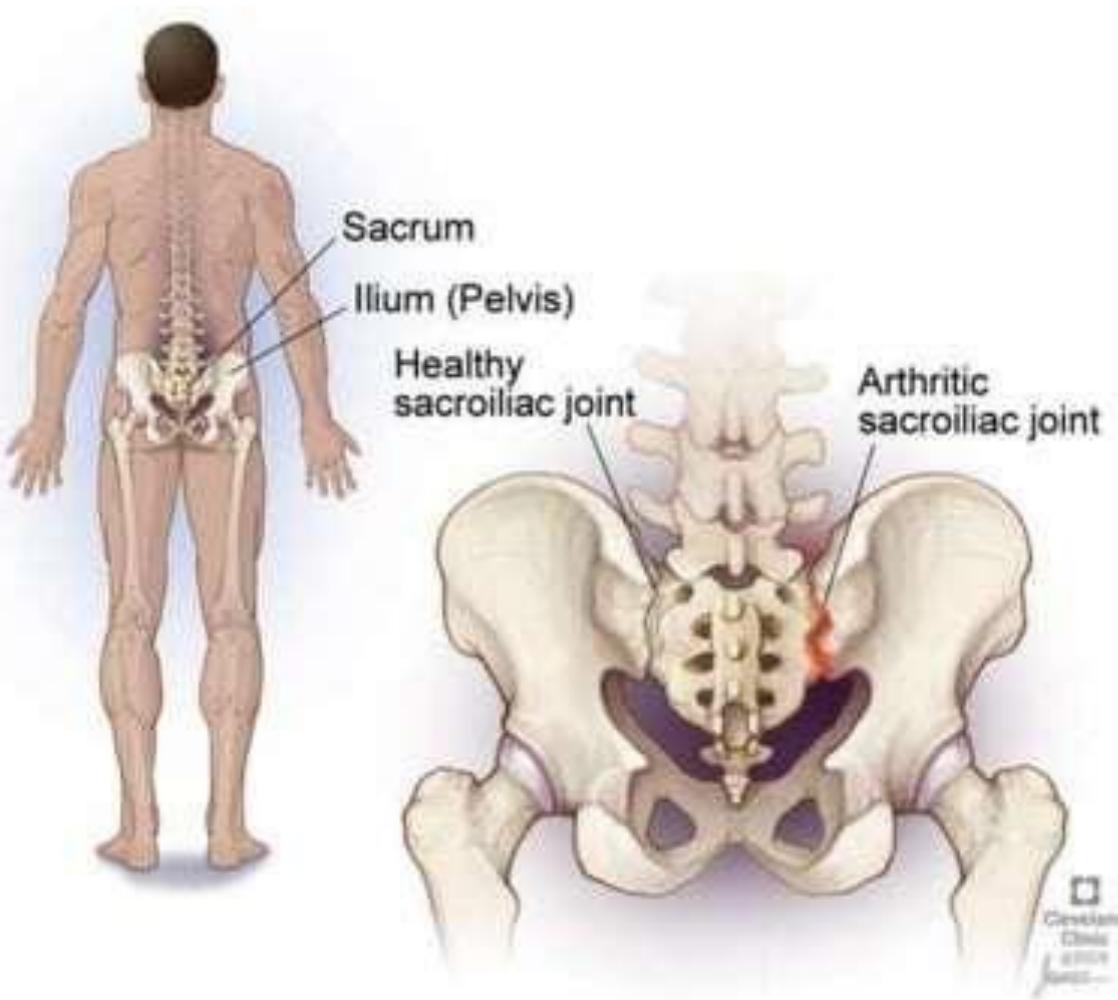
6. Intramuscular(IM) injection in gluteal region:

- Upper and Lateral quadrant of gluteal region
- On gluteus medius muscle
- To avoid injury to sciatic nerve.

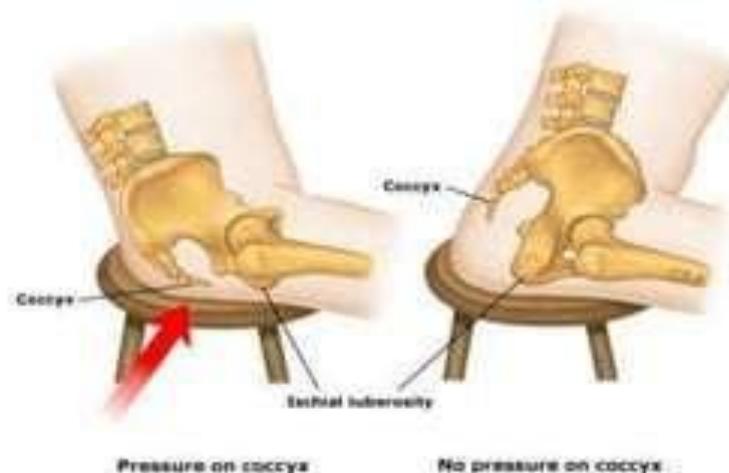


(b)

7. Osteoarthritis : Ex- Sacroilitis



8. **Coccydynia**: Painful condition in coccygeal region. Ex. Bike riders



9. **Sprinter's fracture**: # of ASIS caused by violent muscle action(Sartorius) as of start of a sprint.



11. Iliac crest is the ideal site For Bone Marrow Aspiration and Bone Graft Harvesting.



Thank You

Trendel