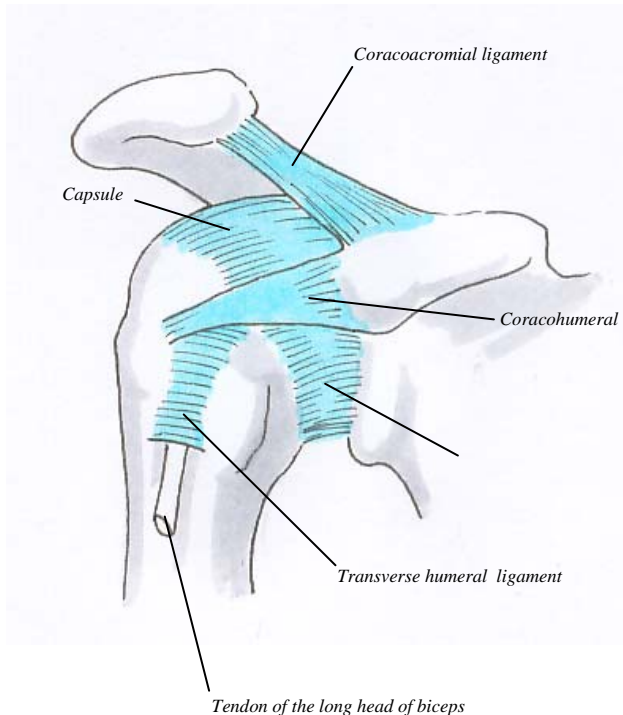


# Glenohumeral joint



## Type of joint

Ball and socket synovial joint

## Articulating surfaces

Humeral head articulates with the glenoid cavity. The cavity is deepened by the glenoid labrum. About 1/3<sup>rd</sup> of the head actually sits in the cavity.

## Articular capsule

Attaches proximally to the margins of the glenoid cavity, and distally to the anatomical neck of the humerus.

IT HAS HOLES IN IT.

One hole admits the tendon of the long head of biceps brachii, and the other communicates with the subscapular bursa.

THE WEAKEST PART is the inferior part which is not reinforced by the rotator cuff muscles

## Ligaments

Glenohumeral ligaments: intrinsic ligaments, three fibrous thickenings of the capsule, anteriorly

Coracohumeral ligament – from the base of coracoid to the anterior aspect of the greater tubercle

Transverse humeral ligament- acts as the roof over the bicipital groove

Coracoacromial ligament- forms the roof over the glenohumeral joint

## Stability factors

The joint is too shallow to be stable; stability is sacrificed to mobility

The socket is deepened by the glenoid labrum

The joint is stabilized mainly by muscles:

- supraspinatus
- infraspinatus
- teres minor
- subscapularis

they hold the ball in the socket

the coracoacromial arch and supraspinatus tendon limit superior displacement

supraspinatus and teres minor limit posterior displacement

subscapularis limits anterior displacement

## Movements

Greatest freedom of movement of any joint in the body

Flexion/extension, abduction/adduction, medial and lateral rotation, circumduction

Assisted by the movement of the pectoral girdle (the scapula and the clavicle)

## Blood supply

Anterior and posterior circumflex humeral arteries

Branches of the suprascapular artery

## Nerve supply

Suprascapular, axillary and lateral pectoral nerves