PELVIC BONES:

- Right and left innominate bones
- Sacrum
- Coccyx
- Innominates articulate with the sacrum posteriorly @ sacroiliac joints synovial joints
- Innominates articulate with each other anteriorly @ pelvic symphysis; secondry cartilagenous
- Above the pelvic inlet = 'false pelvis' belongs to abdomen
- Below the pelvic inlet = 'true pelvis' contains the pelvic cavity.
- Acetabulum is the large articular socket on the lateral side of innominate which forms the hip joint with the head of the femur.

Pelvic inlet:

- Defined by the bony pelvic brim made up by:
 - Sacral promontory →sacral ala → arcurate lines → iliopectineal lines → pubic crest → pubic symphysis.





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Sacrum:

- 5 fused segments of vertebral column
- Weight from trunk is passed onto the alae (lateral masses) •
- Sacral promontory most forward point of superior sacrum

Coccyx:

- 4 fused vertebrae
- Innominate bone consists of 3 fused bones:
 - 0 Ilium
 - Pubis 0
 - Ischium 0
- Fuse at puberty (before this they are separated by Y-shaped triradiate cartilage in the acetabulum)

Pubis:

- Has a body and 2 arms (rami) •
- Articulate anteriomedially at the pubic symphysis
- Pubic tubercle •
- Superior pubic ramus joins to ilium and ischium
- Pectineal line = sharp superior border of superior ramus • (forms part of border of pelvic inlet)
- Inferior pubic rami joins with ramus of the ischium

Hiurr Pubis

Ischium:

- Posterior inferior part of innominate 0
- 0 Posterior border has ischial spine
- Ischial spine seperates: 0
 - Greater sciatic notch •
 - Lesser sciatic notch
- Ischial tuberosity is on posterioinferior aspect of ischium part of the pelvis that we sit on. 0
- Ligaments pass between: 0
 - Ischail spine and sacrum; sacrospinous ligament
 - Ischial tuberosity and sacrum: sacrotuberous ligament
- This turns the greater and lesser sciatic notches into: \circ
 - Greater sciatic foramen
 - Allows communication: pelvic region $\leftarrow \rightarrow$ gluteal region
 - Lesser sciatic foramen
 - > Allows communication: gluteal region $\leftarrow \rightarrow$ perineum

Obturator foramen:

- Formed by superior and inferior pubic rami, and by ischium and ramus of ischium posteriorly.
- Covered with obturator membrane
- Internal and external obturator muscles lie either side of the membrane.
- Small 'obturator canal' allows obturator nerves and vessels through.

Subpubic angle:

Ischiopubic ramus runs from pubic symphysis anteriorly \rightarrow ischial tuberosity posteriorly.

Jack Marjot – ANATOMY notes



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Angle between left and right ischiopubic rami = subpubic angle. ٠

Male	Female	
Narrow, heart-shaped, pelivic inlet:	Wider pelvic inlet	
 Larger acetabulum Acetabulum diameter = length of superior pubic ramus 	 Smaller acetabulum Acetabulum diameter is smaller than superior pubic ramus 	
Sacral promontory projects further forward	 Sacrum is positioned further back Wider alae of sacrum (sacral bodies make up less of sacral width) 	
Smaller pelvic outlet Larger pelvic outlet		
Sacrum positioned forward	Sacrum positioned backwards	
Larger ischial spines		
J-shaped greater sciatic notch	 L-shaped, more opened out, greater sciatic notch. 	
• Subpubic angle = 60	• Subpubic angle = 90	
 Ischial tuberosity and spines positioned more medially 	 Ischial tuberosity and spines positioned more laterally 	
Taller true pelvis	Shorter true pelvis	

Differences between male and female pelvises:

Women:

- Pelvic inlet: wider than it is long •
- Pelvic outlet: longer (anteroposteriorly) than it is wide •
- Accomodates the fact that baby changes orientation through 90° during childbirth. •

Muscular walls of the pelvis:

Muscle	Or	rigin	Inserion	Function
Obturator	٠	Bone surrounding	Passes through <u>lesser</u> sciatic foramen, turning	Lateral rotation of the
internus		obturator foramen	through 90° and inserting into the greater	<u>thigh</u> .
	•	Obturator membrane	trochanter of femur.	
Piriformis	٠	Anterior side of S2, 3 & 4	Passes through greater sciatic foramen to insert	Lateral rotation of the
		of sacrum	in posterior part of greater trochanter of femur	<u>thigh</u> .
				Proprioception.





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