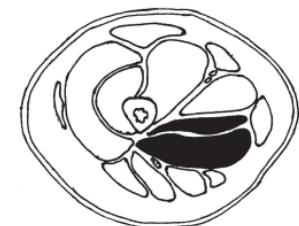
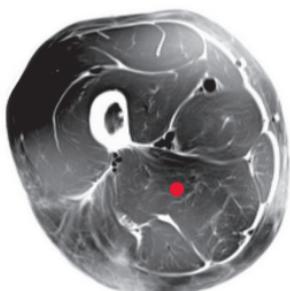


adductor
magnus et brevis

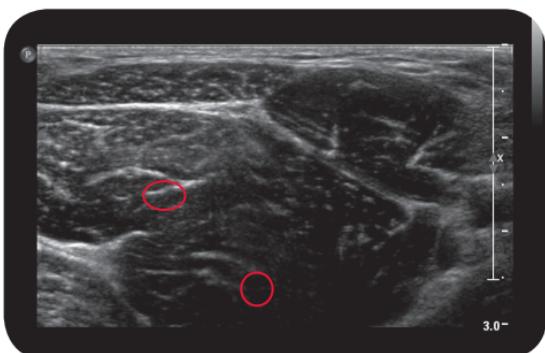


* *

C r o s s S e c t i o n



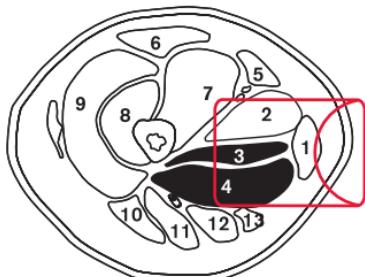
M R I



U l t r a s o u n d



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L e g e n d
 1: M. gracilis 2: M. adductor longus 3: M. adductor brevis 4: M. adductor magnus 5: M. sartorius 6: M. rectus femoris 7: M. vastus medialis 8: M. vastus intermedius 9: M. vastus lateralis 10: caput brevis 11: caput longum des M. biceps femoris 12: M. semitendinosus 13: M. semi-membranosus

O r i g i n
 Ramus ossis ischii and Tuber ischiadicum

I n s e r t i o n
 Proximal linea aspera, epicondylus medialis femoris

I n n e r v a t i o n
 Posterior branch of obturator nerve

F u n c t i o n
 Adduction and extension of hip, lateral rotation (proximal portion), medial rotation (distal portion)

C o n t r o l o f I n j e c t i o n
 Sonography, EMG, electrical stimulation

C o m m e n t
 Of all adductors, the adductor magnus is the strongest one. In addition, it stabilizes the hip during extension. The adductor brevis is decidedly smaller and less forceful and can be considered subsidiary. Adductor magnus and brevis can not be differentiated with ultrasound.



S c o u t