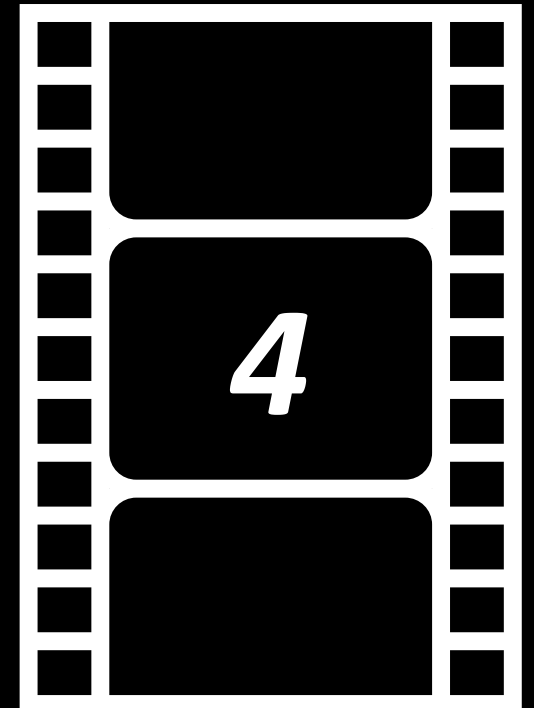
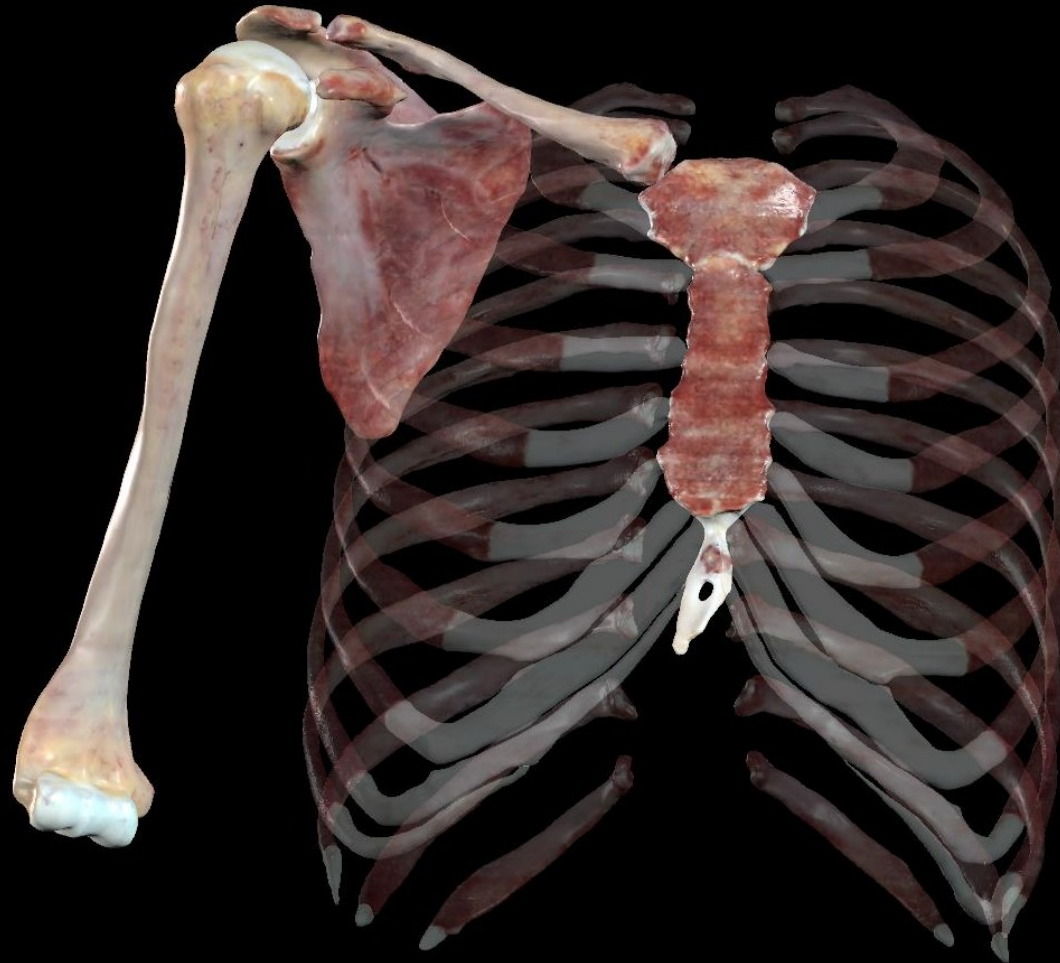
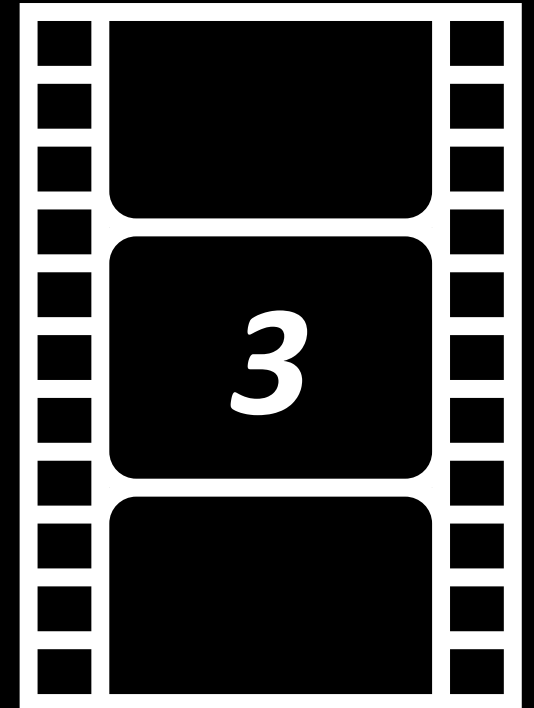


Gerber
Hawkins
Coiffe
SLAP
P
tillon
Clairon
Conflit
Jobe
Bourse
Neer
Yocum
Patte
Tendinopathie

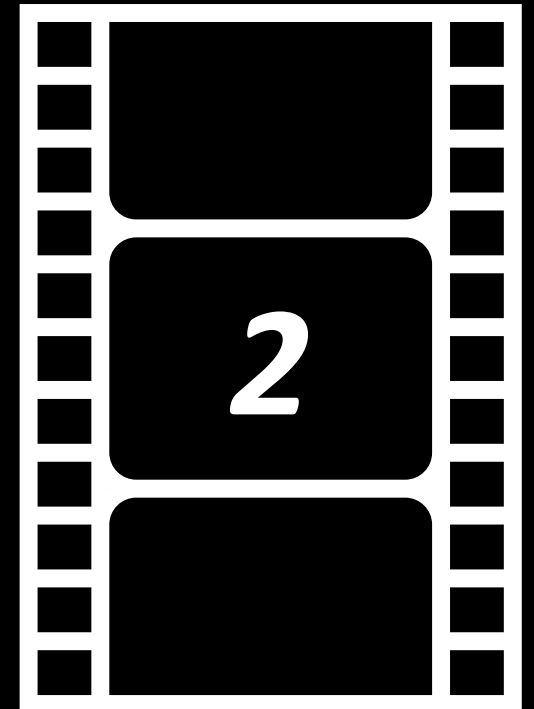
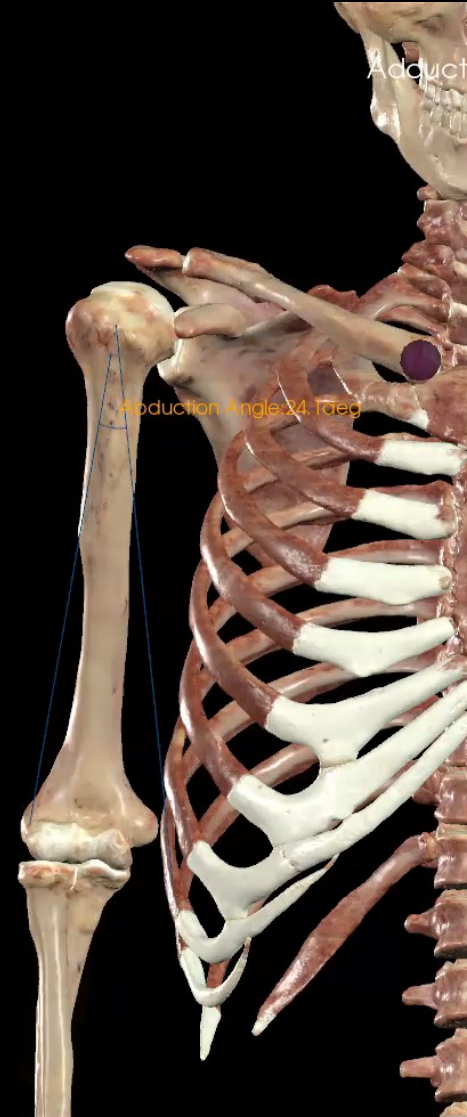
Combien d'os?



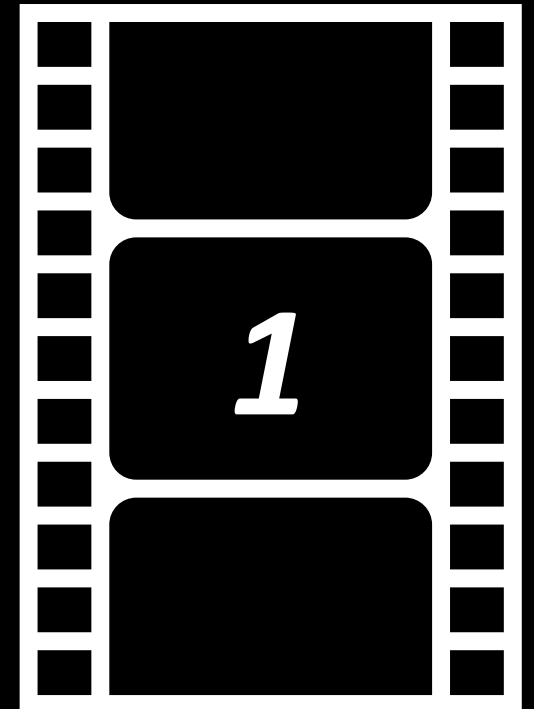
Combien d'articulations?



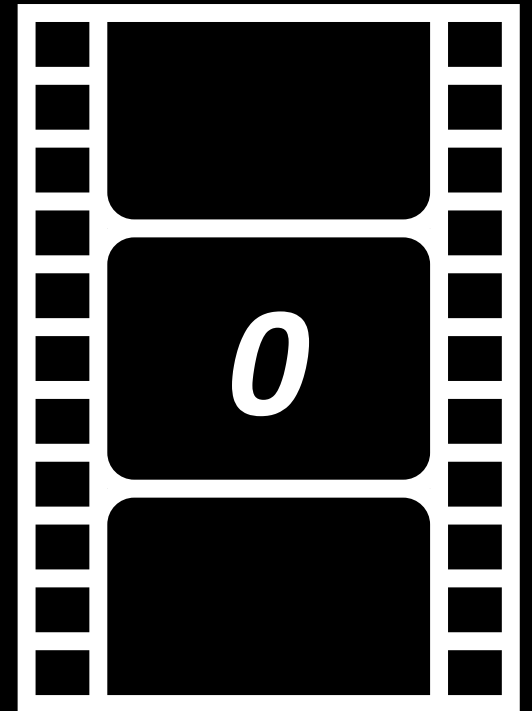
Combien de plans de glissement?




Combien d'éléments de stabilité scapulo-humérale inférieure?



Combien de signes cliniques avec une sensibilité proche de 100%?





L'épaule

De l'Anatomie à la pathologie

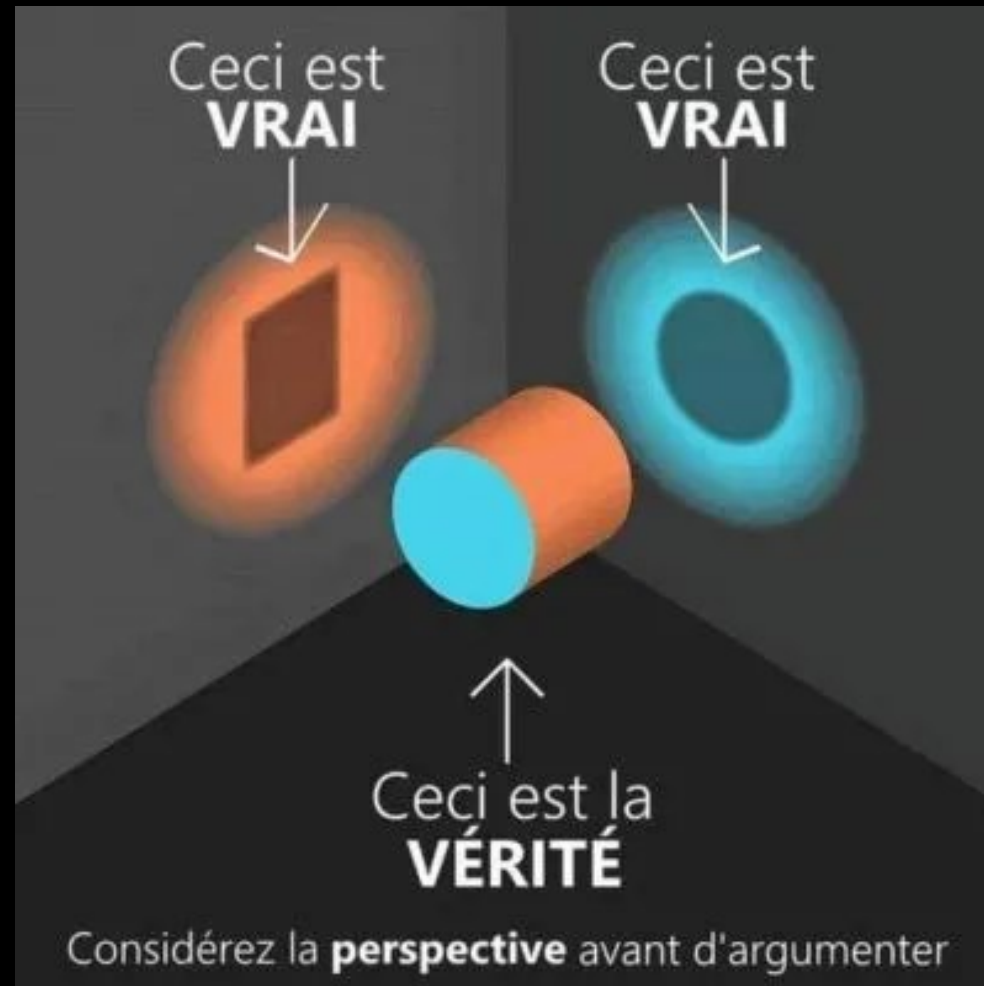
Grégoire PRUM

Anatomie

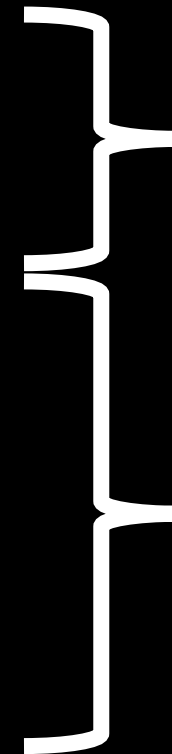
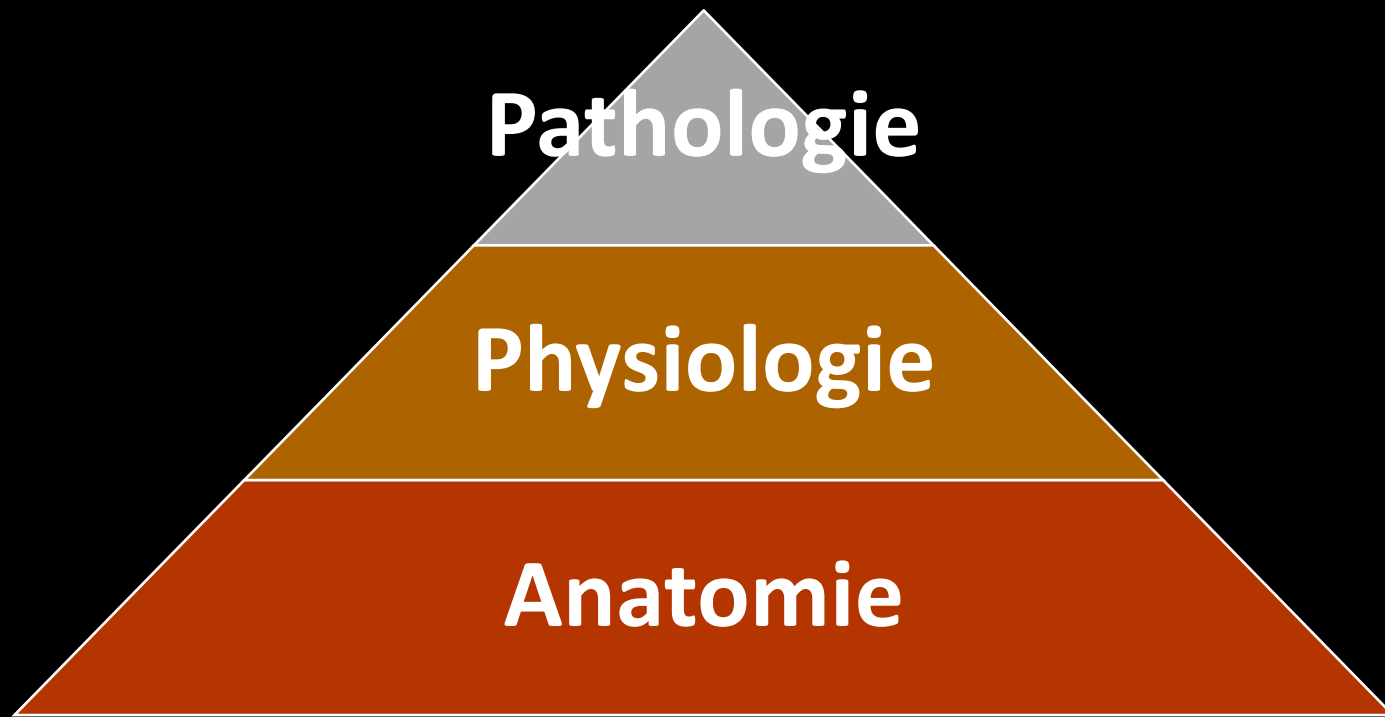
Médecine Physique et Réadaptation - Médecine du Sport

UFR Médecine Rouen

Généralités



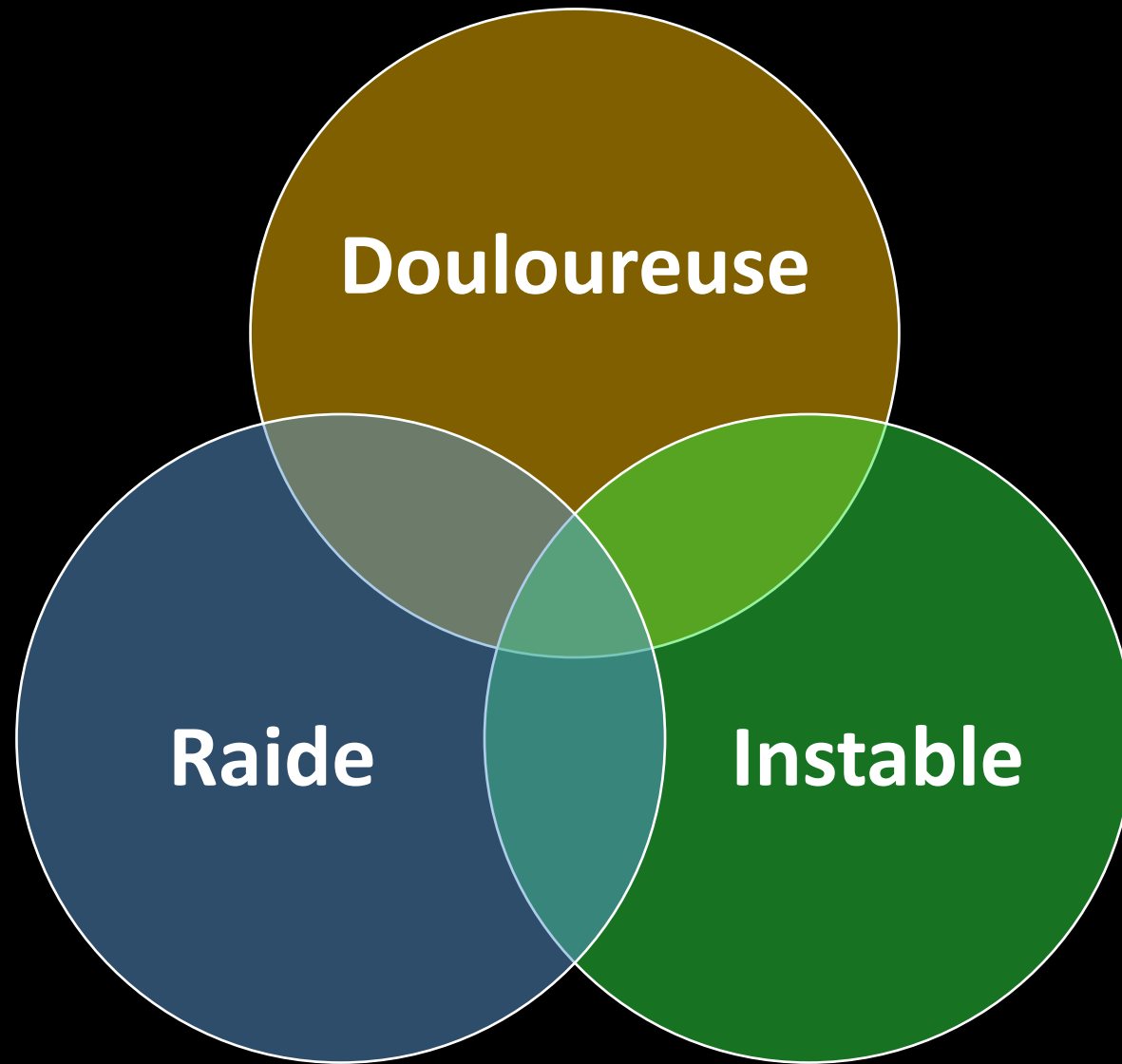
Généralités



Dysfonction

Fonction





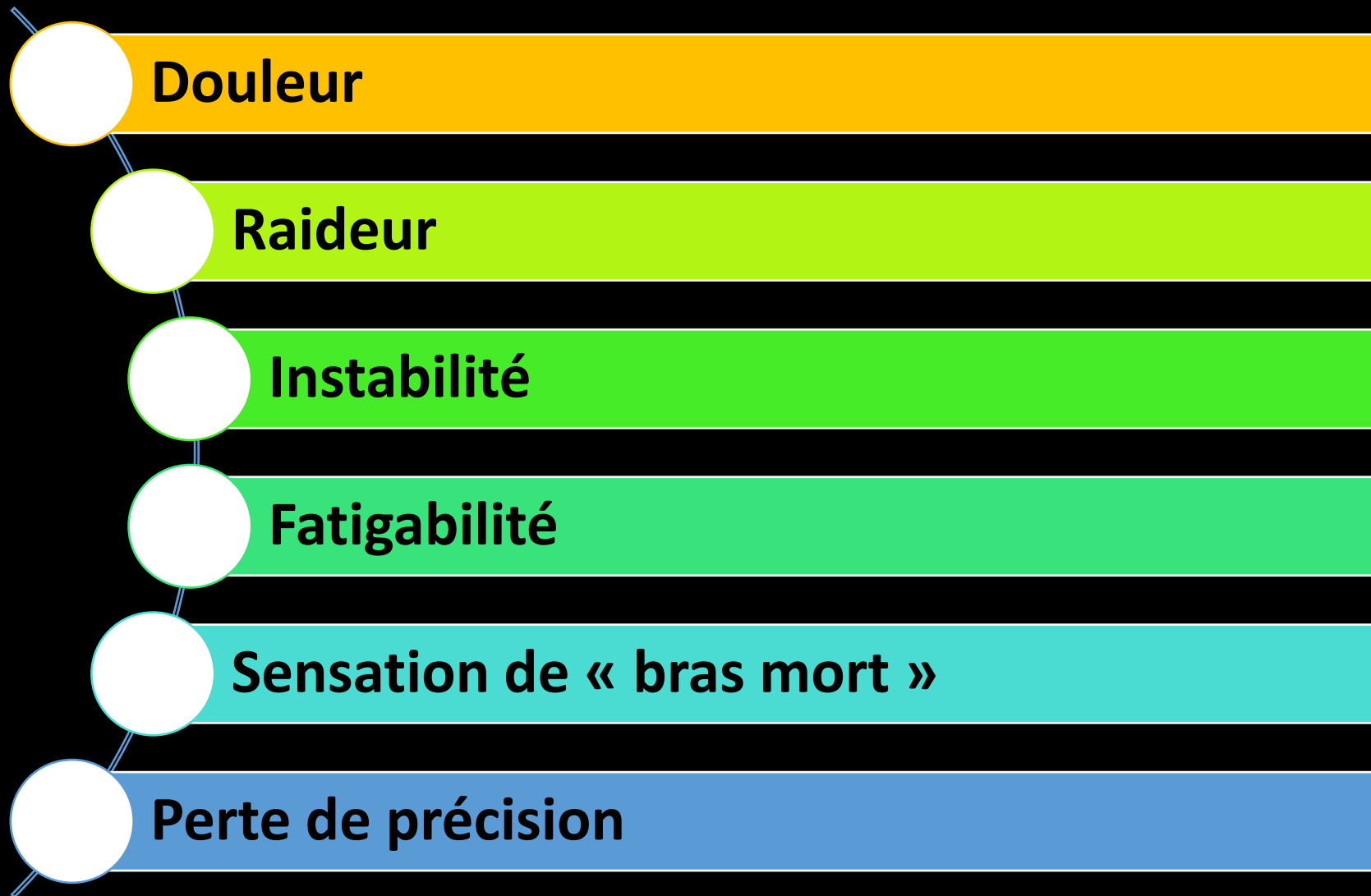
Douleureuse

Raide

Instable

A dark, moody photograph depicting an interrogation. On the left, a man in a dark uniform leans over a table, looking down at the other man. On the right, a man in a dark t-shirt sits at the table, his head buried in his hands in a gesture of despair or stress. The scene is dimly lit, with a spotlight effect on the table and the men's faces. The word "Interrogatoire" is written in white, italicized text across the center of the image.

Interrogatoire





Inspection

Région deltoïdienne

Trigone clavi-pectoral ou delto-pectoral
Fosse infraclaviculaire

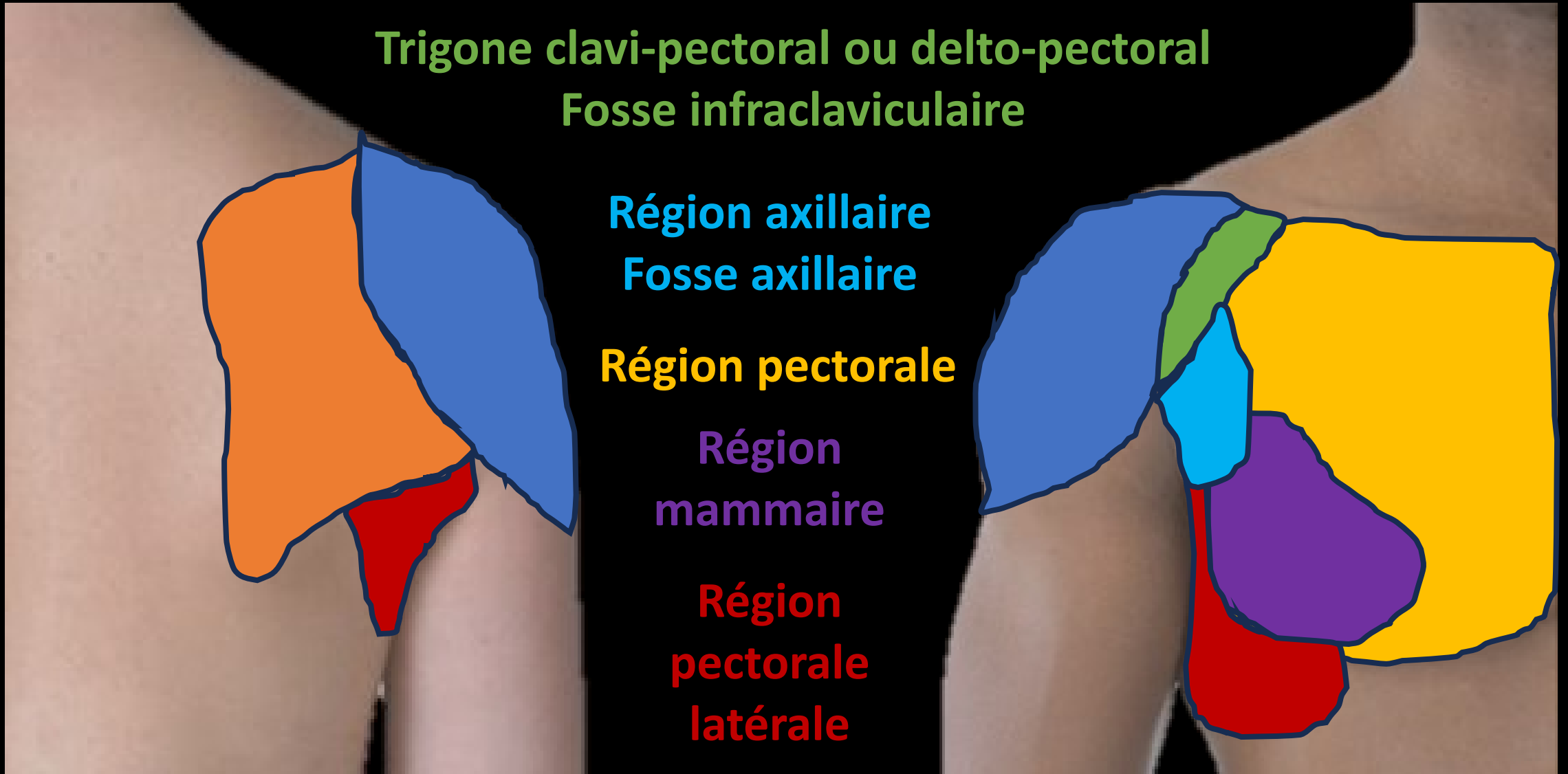
Région axillaire
Fosse axillaire

Région pectorale

Région
mammaire

Région
pectorale
latérale

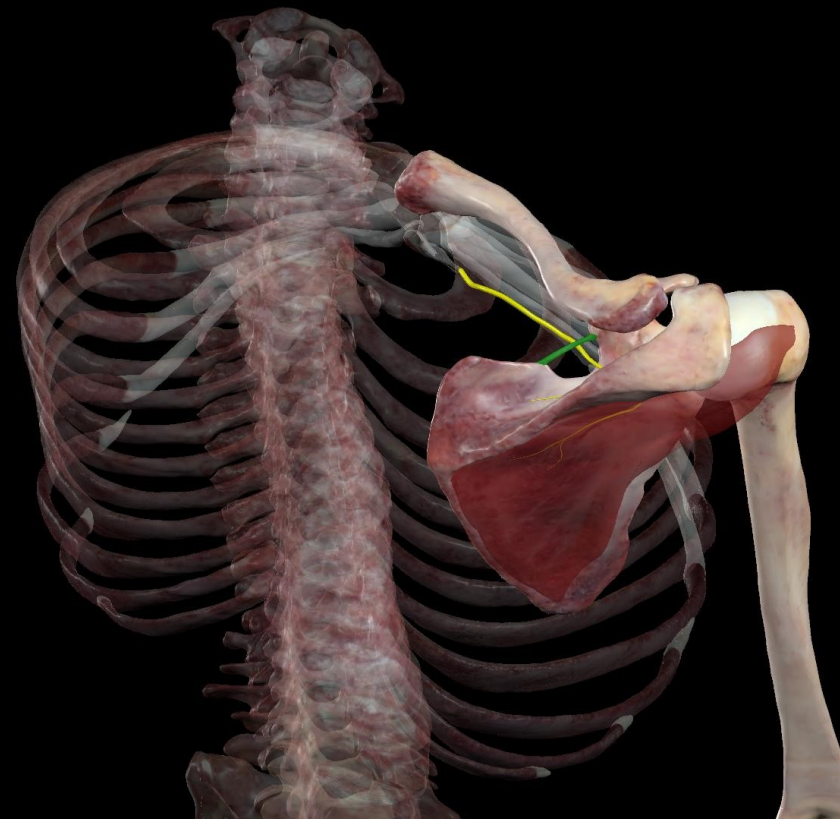
Région scapulaire



Amyotrophie



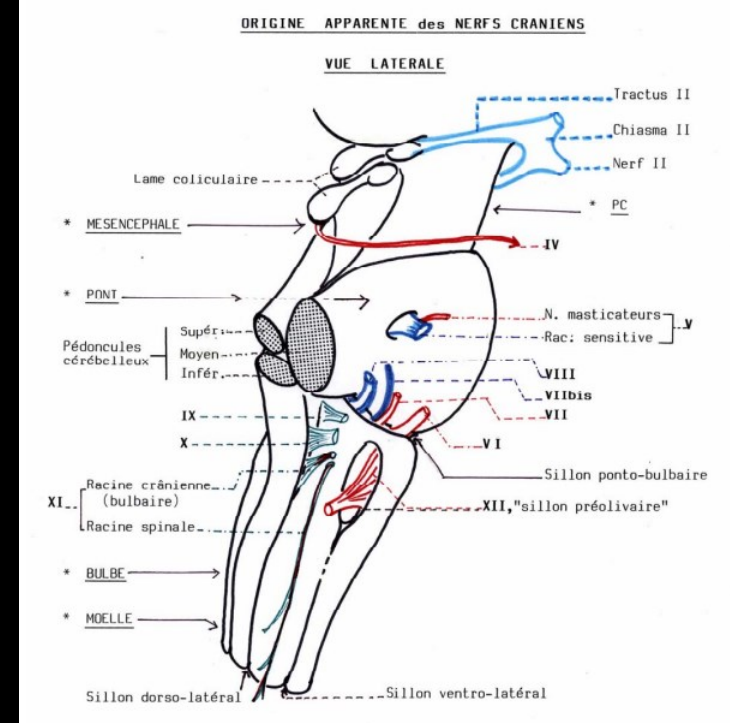
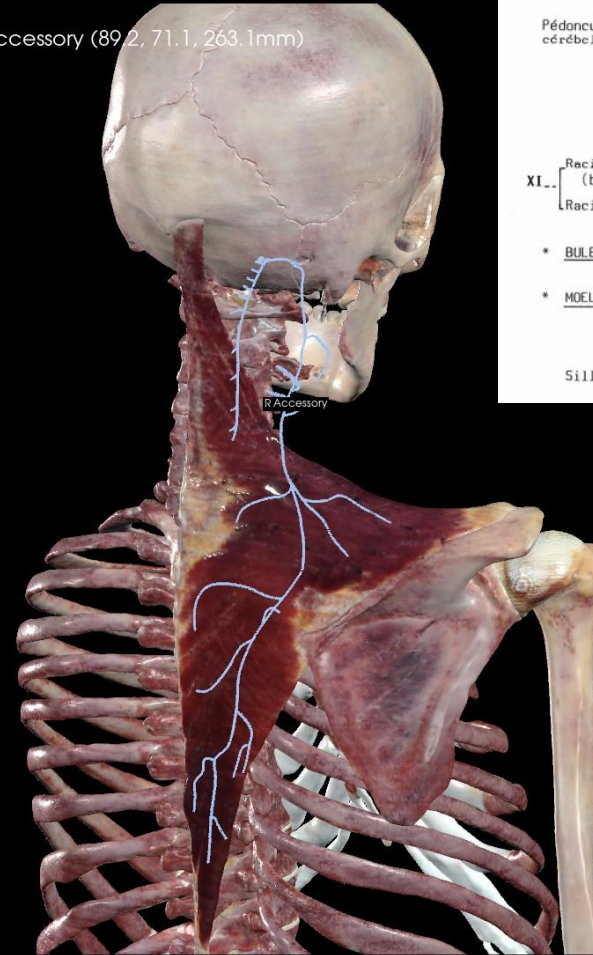
Nerf supra-scapulaire C5-C6



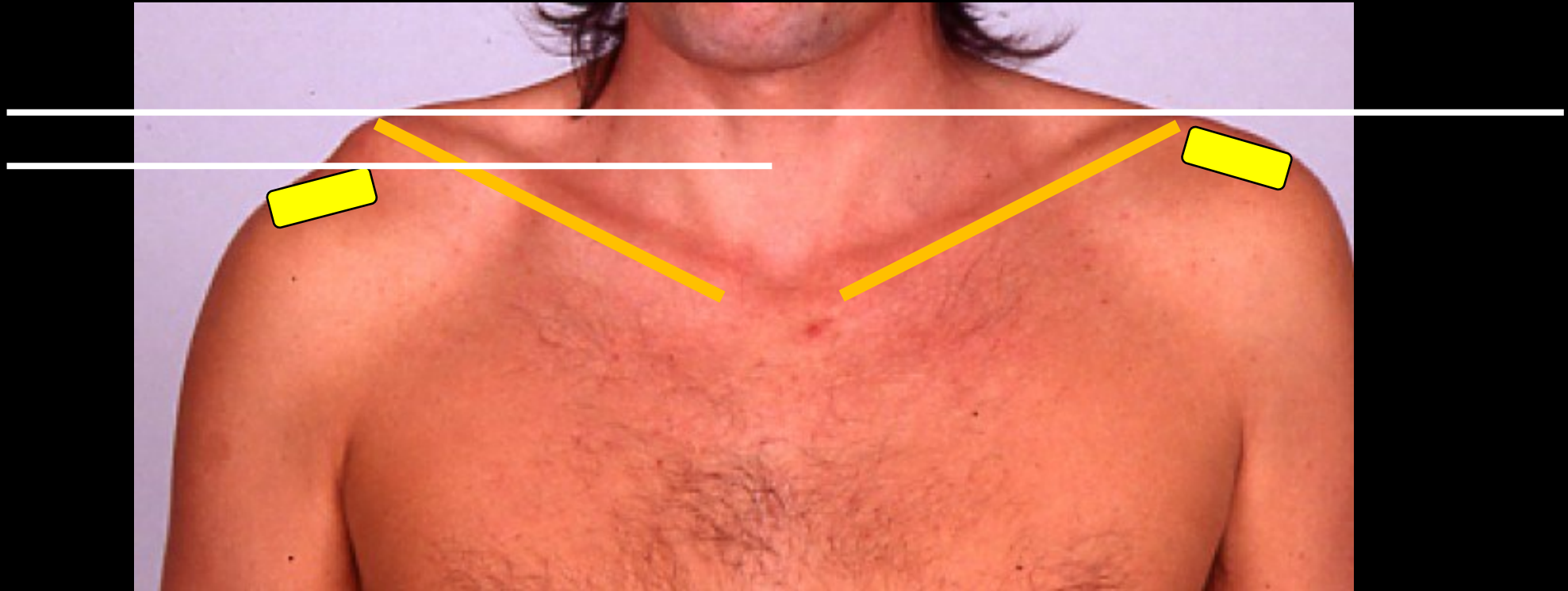
Amyotrophie

Nerf accessoire XI

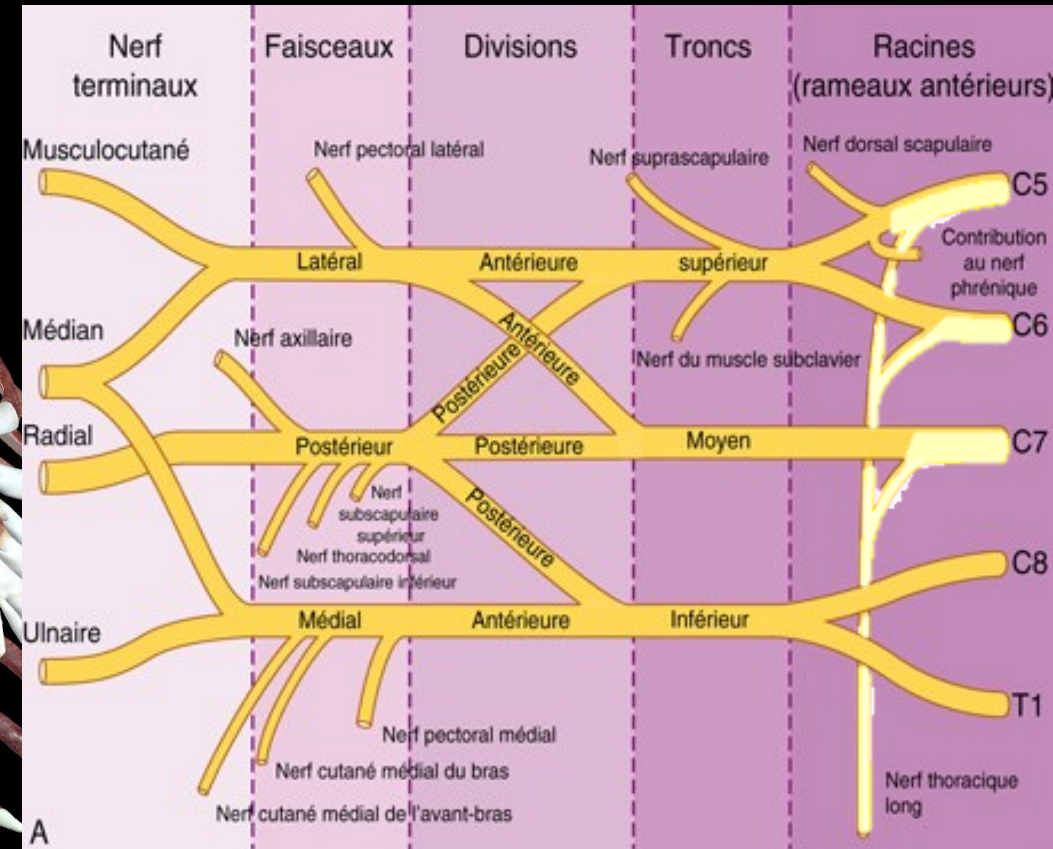
R Accessory (89.2, 71.1, 263.1mm)



Déformation

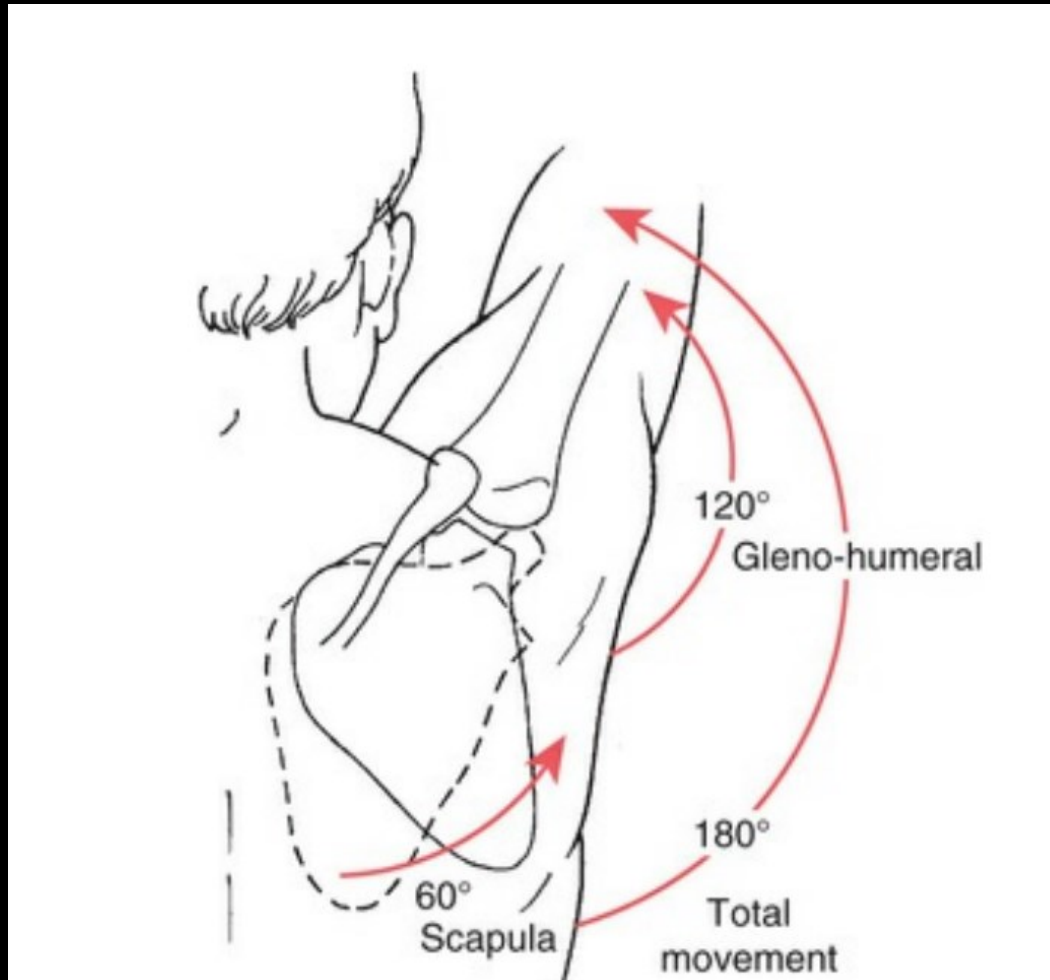


Ecchymose – Hématome – Tuméfaction – Déformation



Nguyen, Christelle, et al. « Scapula alata dynamique d'origine neuromusculaire : diagnostic clinique, électromyographique et à l'imagerie par résonance magnétique ». *La Presse Médicale*, vol. 44, n° 12, décembre 2015, p. 1256-65. DOI.org (Crossref), <https://doi.org/10.1016/j.lpm.2015.08.006>.

Rythme scapulaire



Élévation latérale

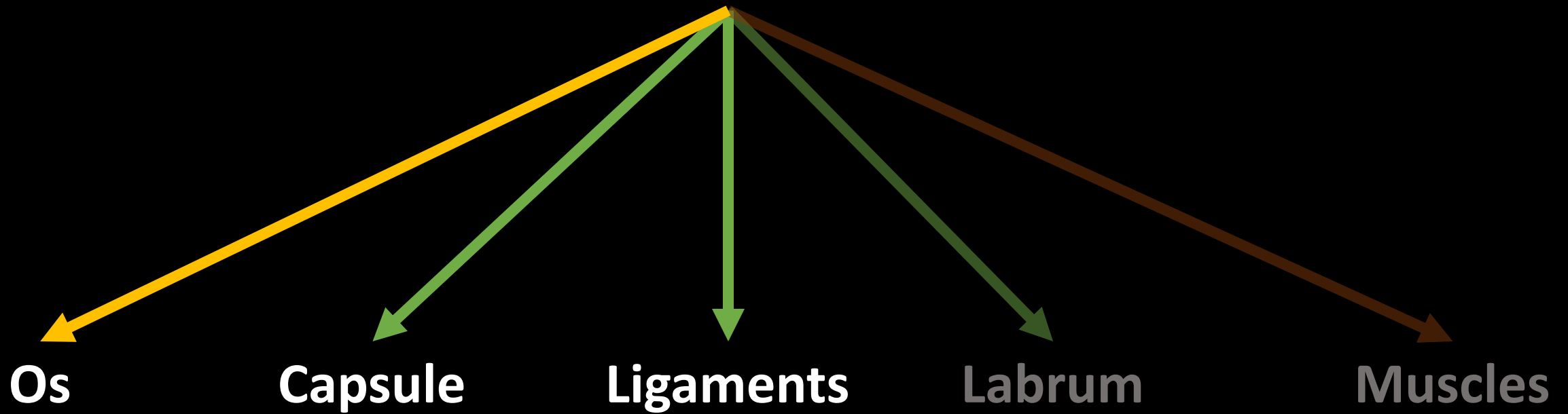


Abduction Angle: 24.1deg

A photograph of a man in a deep squat position, viewed from the side. He is shirtless and wearing grey athletic pants. His hands are placed on his knees, and his torso is leaning forward, demonstrating a range of motion in the hip and knee joints. The background is a textured, light-colored wall, and the floor is dark. The text 'Mobilités articulaires' is overlaid in white, italicized font across the center of the image.

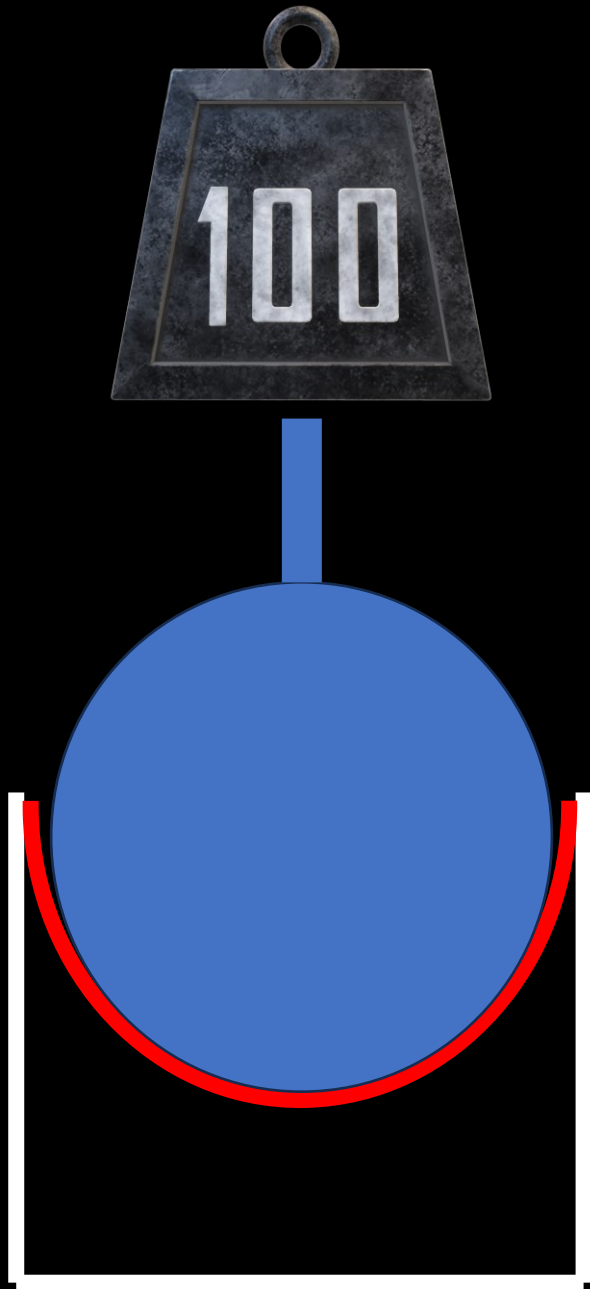
Mobilités articulaires

Examen des éléments de **stabilité passive**

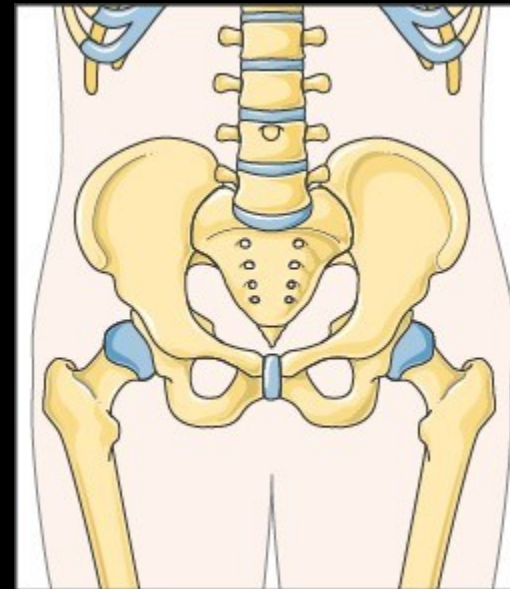


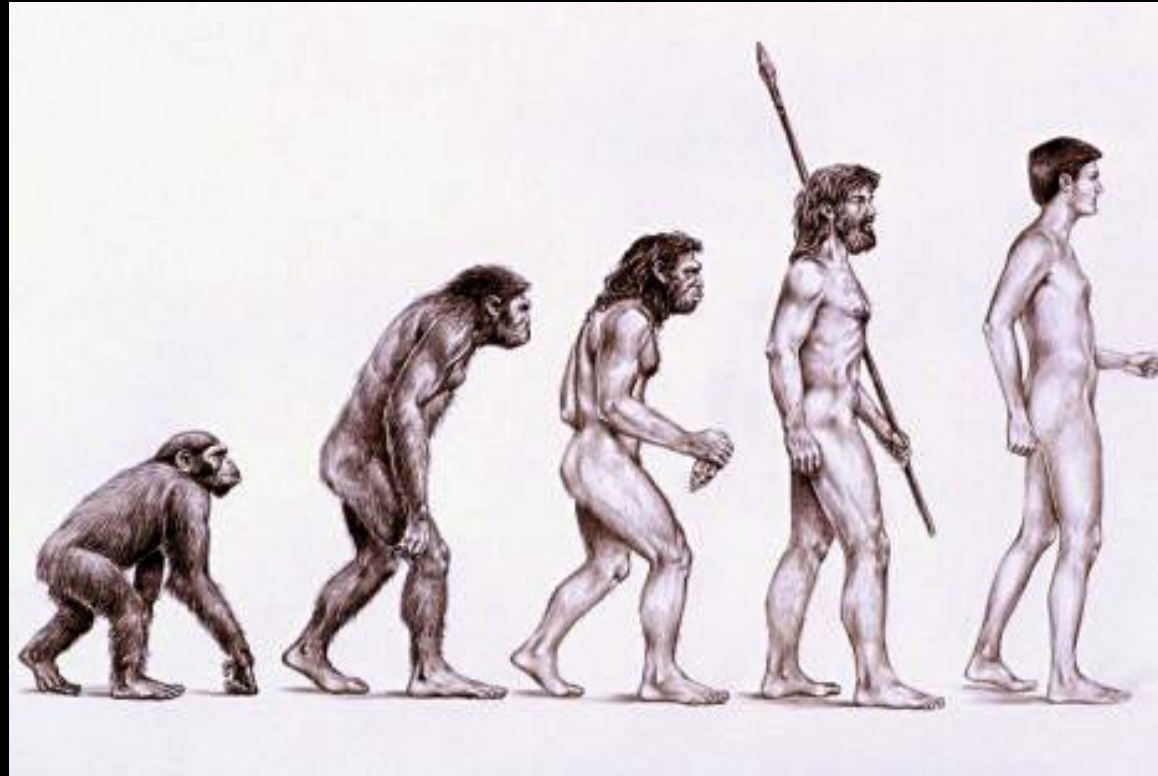
Bilatéral et comparatif

Stabilité

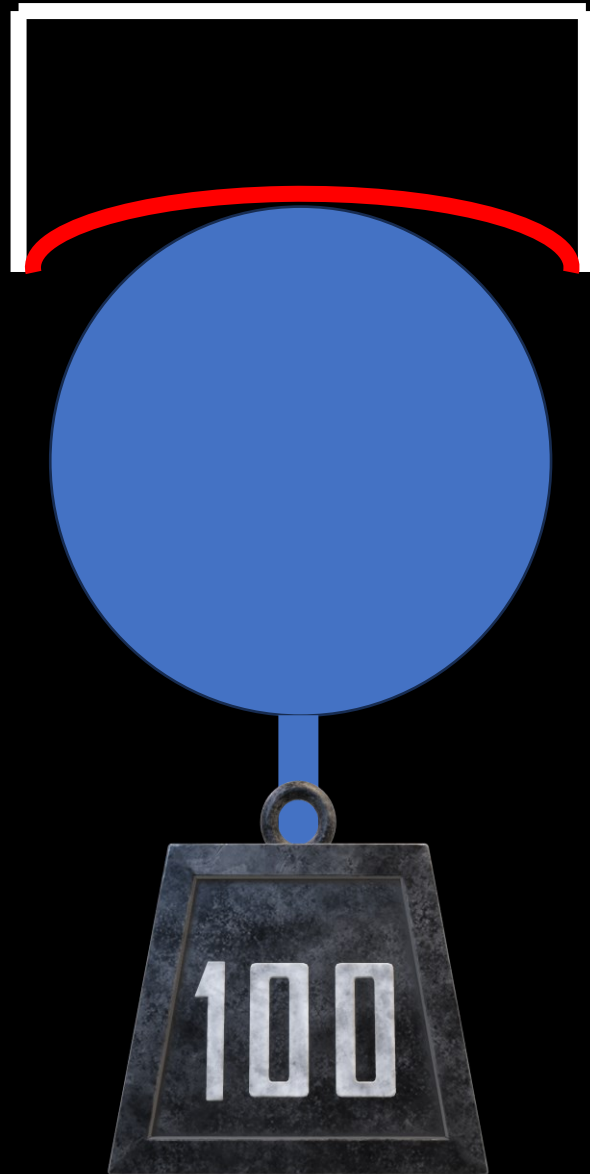


Articulation coxo-fémorale

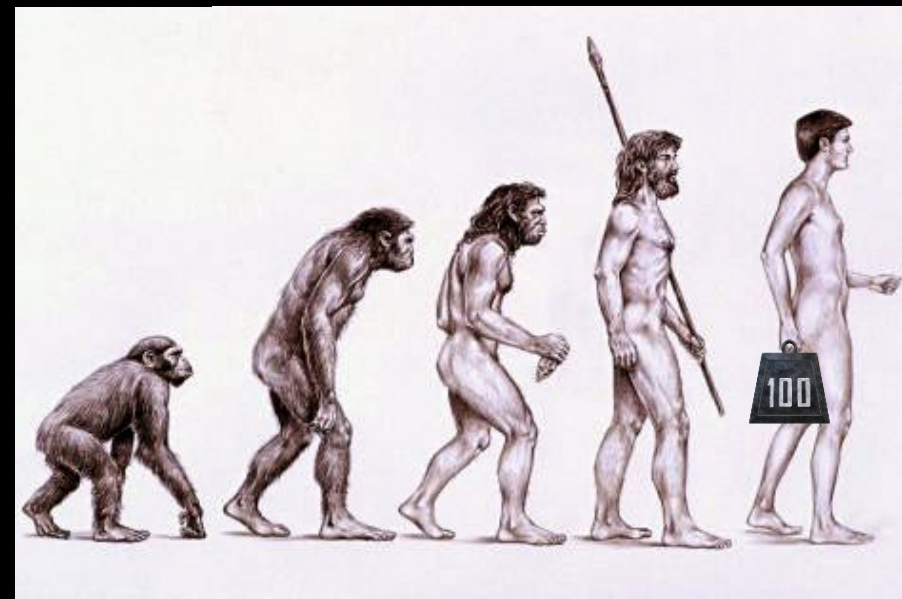




Membre antérieur → Membre supérieur
Préhension



Articulation **instable**





Articulation scapulo-humérale

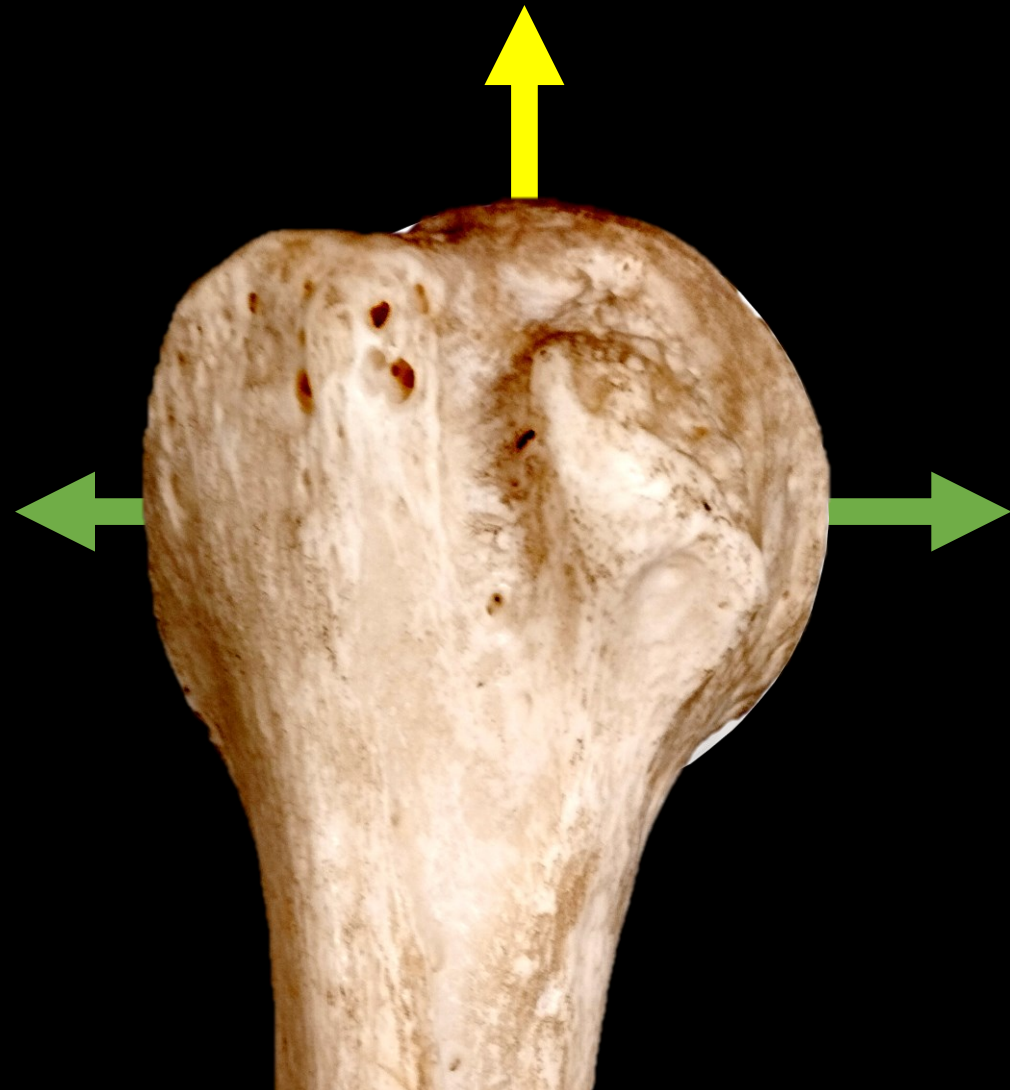
Surfaces articulaires



Surfaces articulaires



Articulation scapulo-humérale



Flexion / Extension

Abduction / Adduction

Rotations Latérale / Médiale

Articulation scapulo-humérale

80° / 20°

80° / 20°

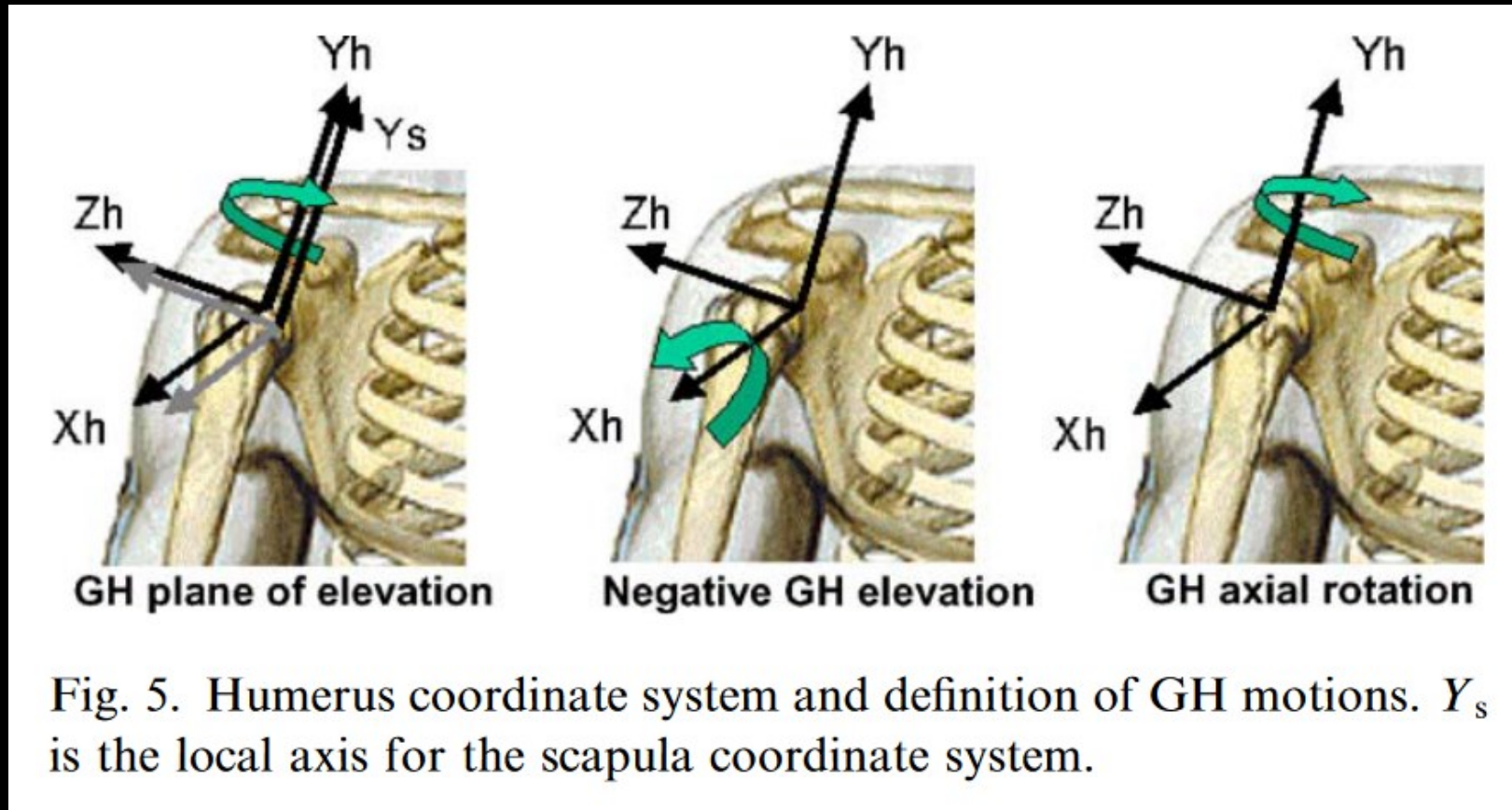
30° / 30°

Flexion / Extension

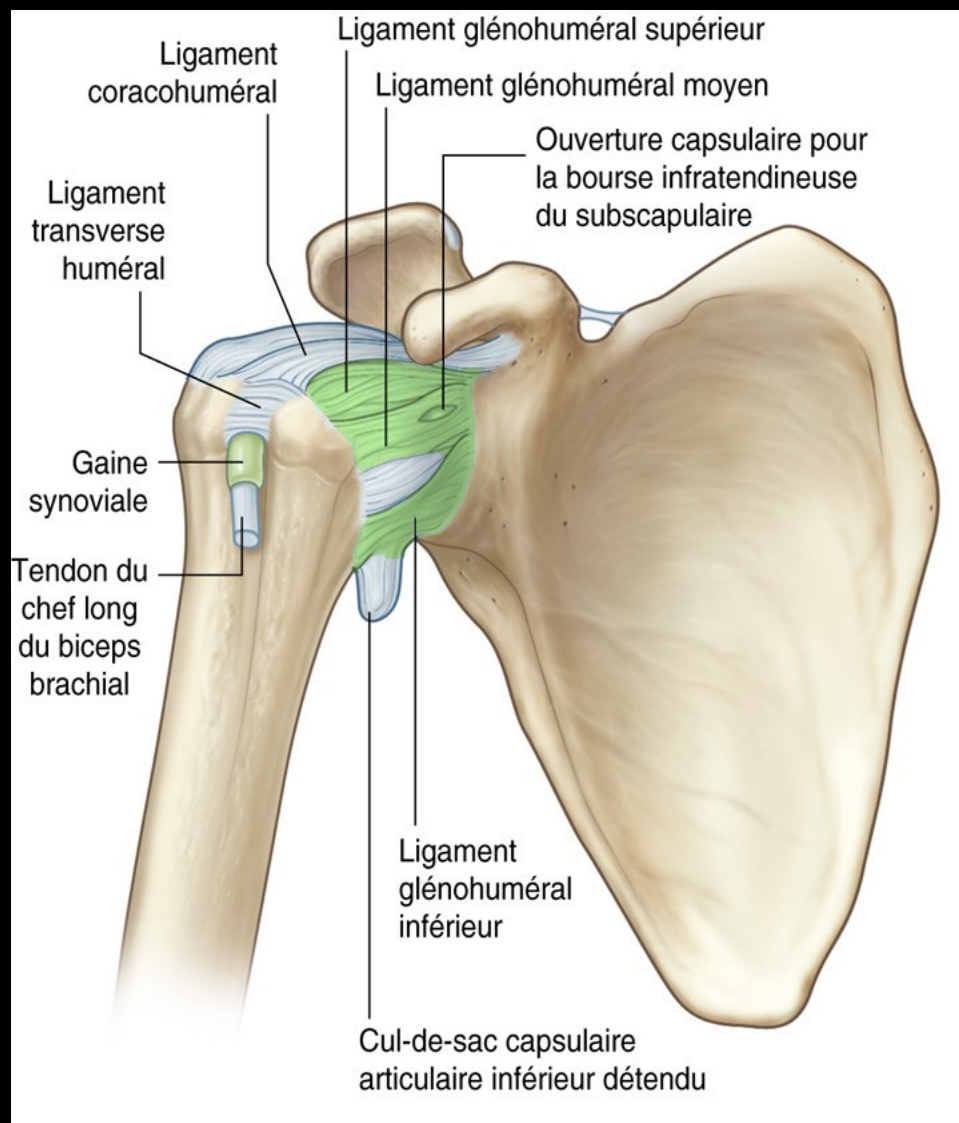
Abduction / Adduction

Rotations Latérale / Médiale

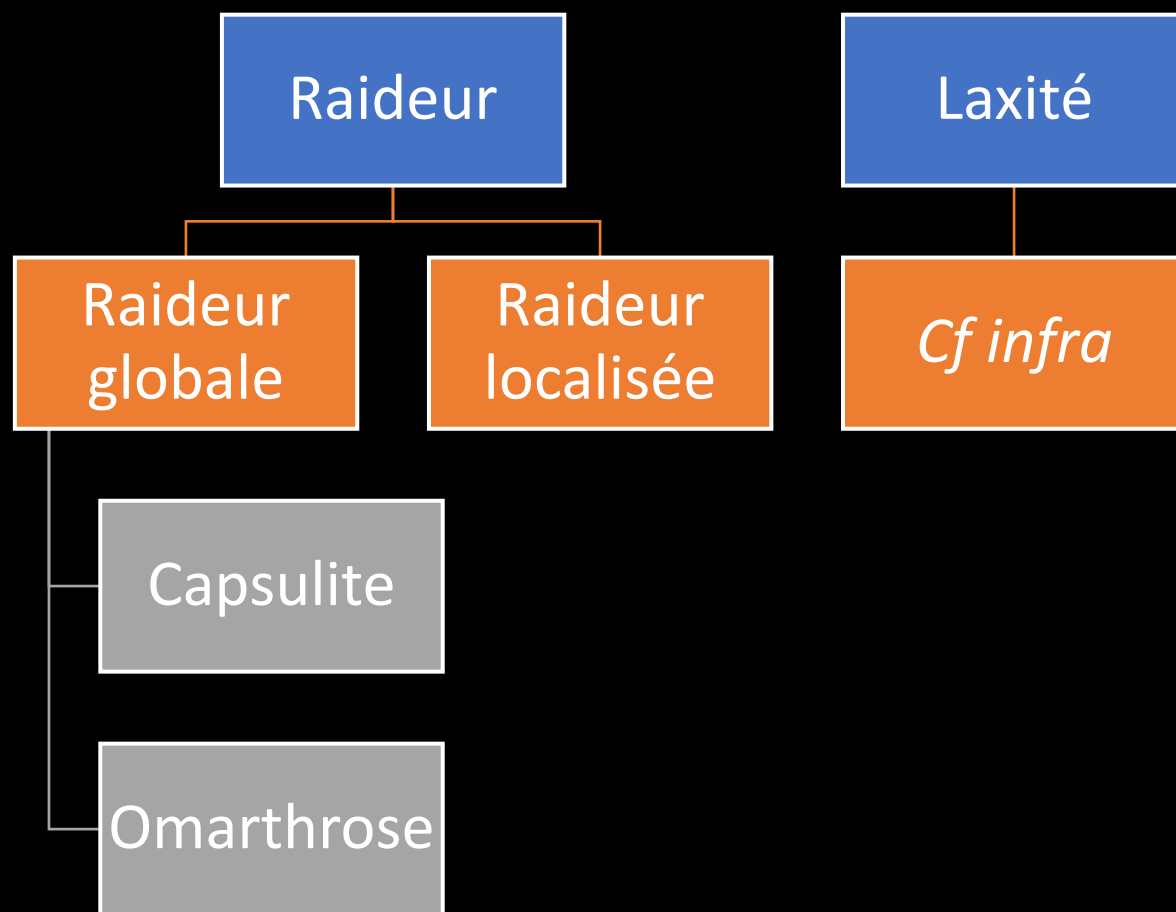
Articulation scapulo-humérale

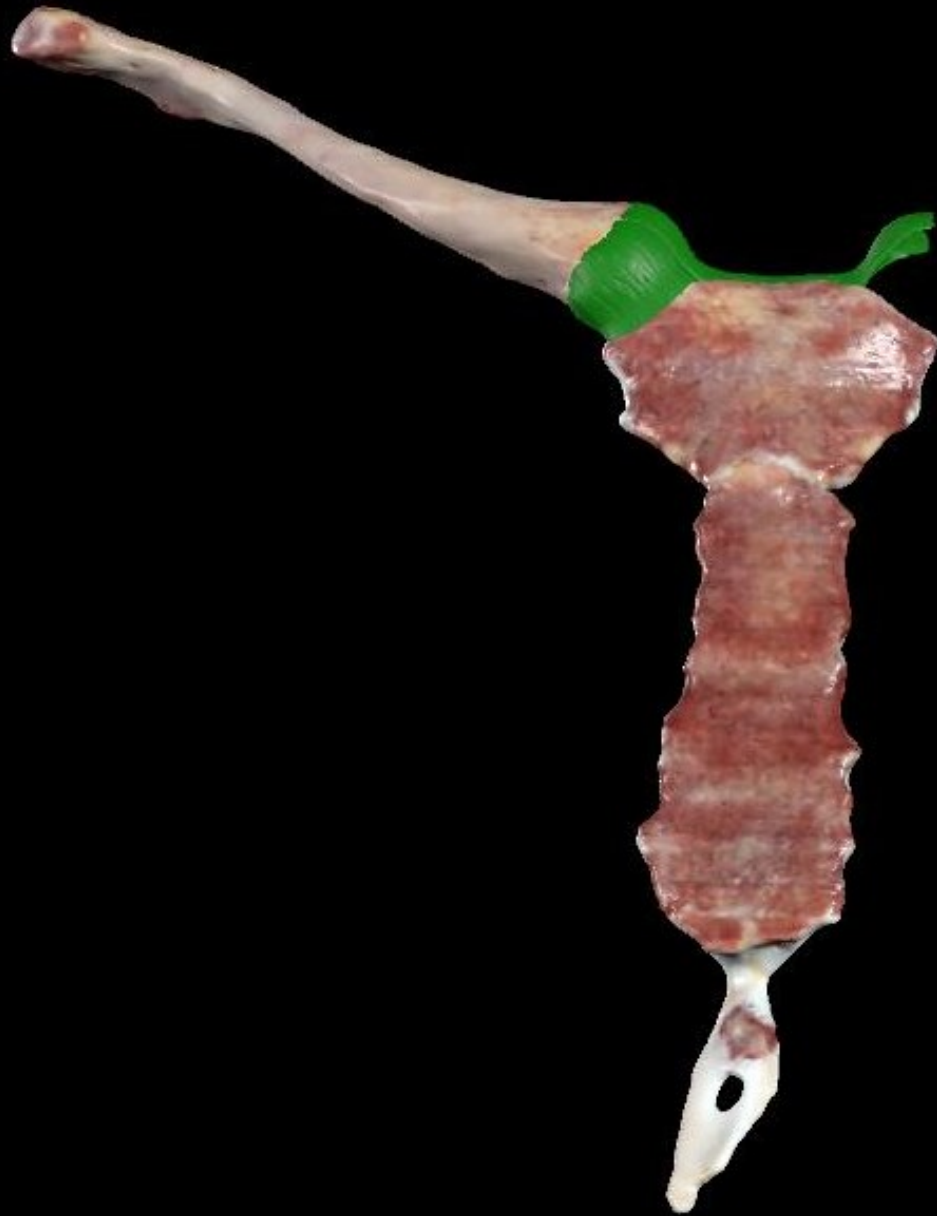


Moyens d'union passive



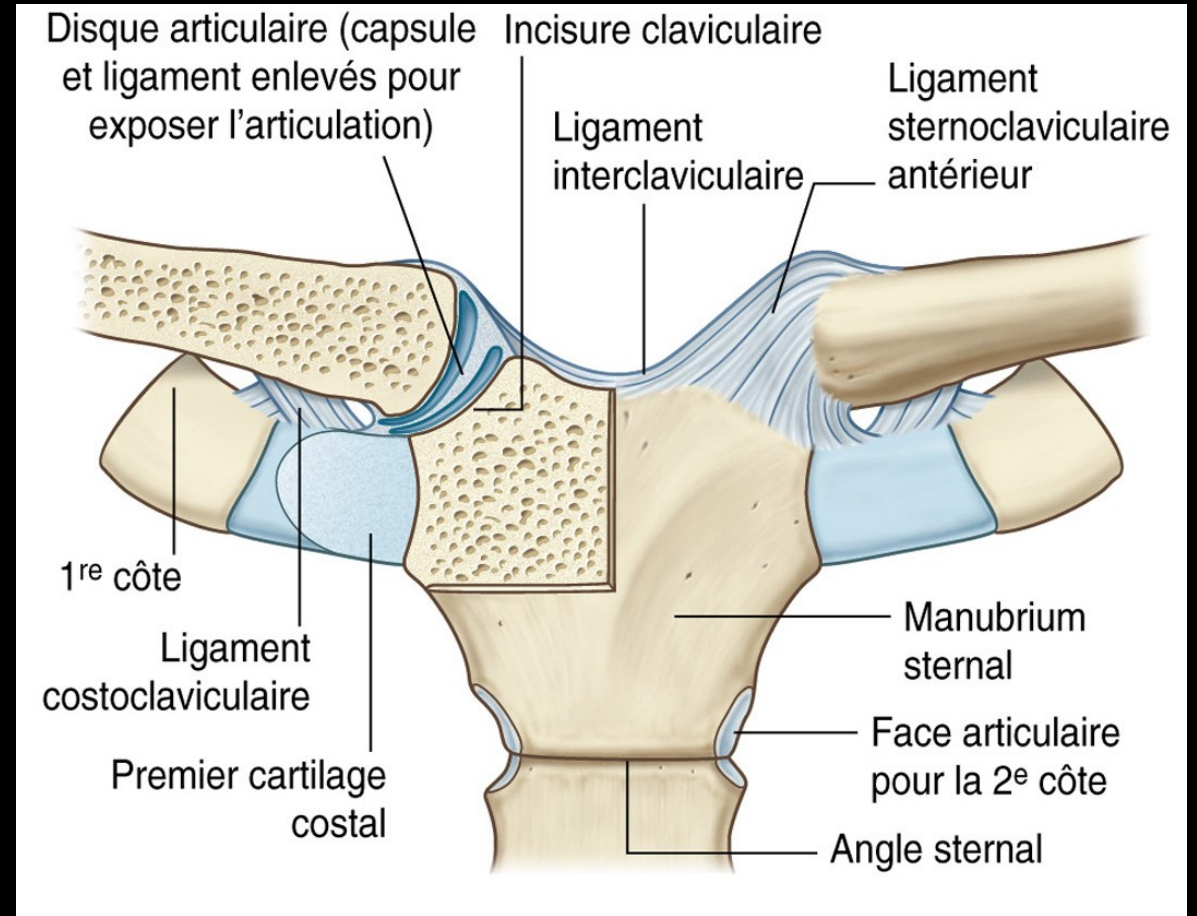
Articulation scapulo-humérale



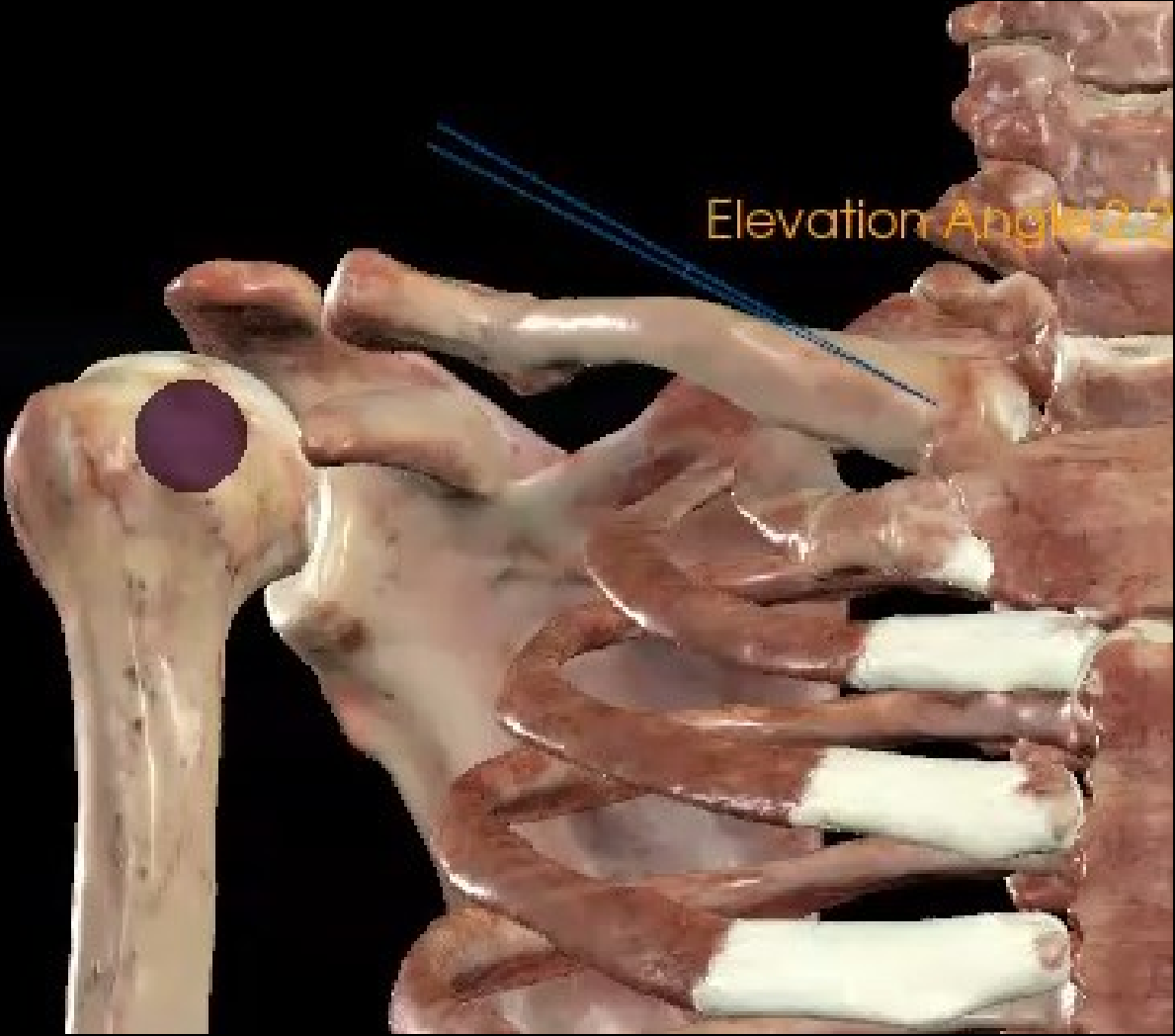


Articulation sterno-costale

Articulation sterno-costale



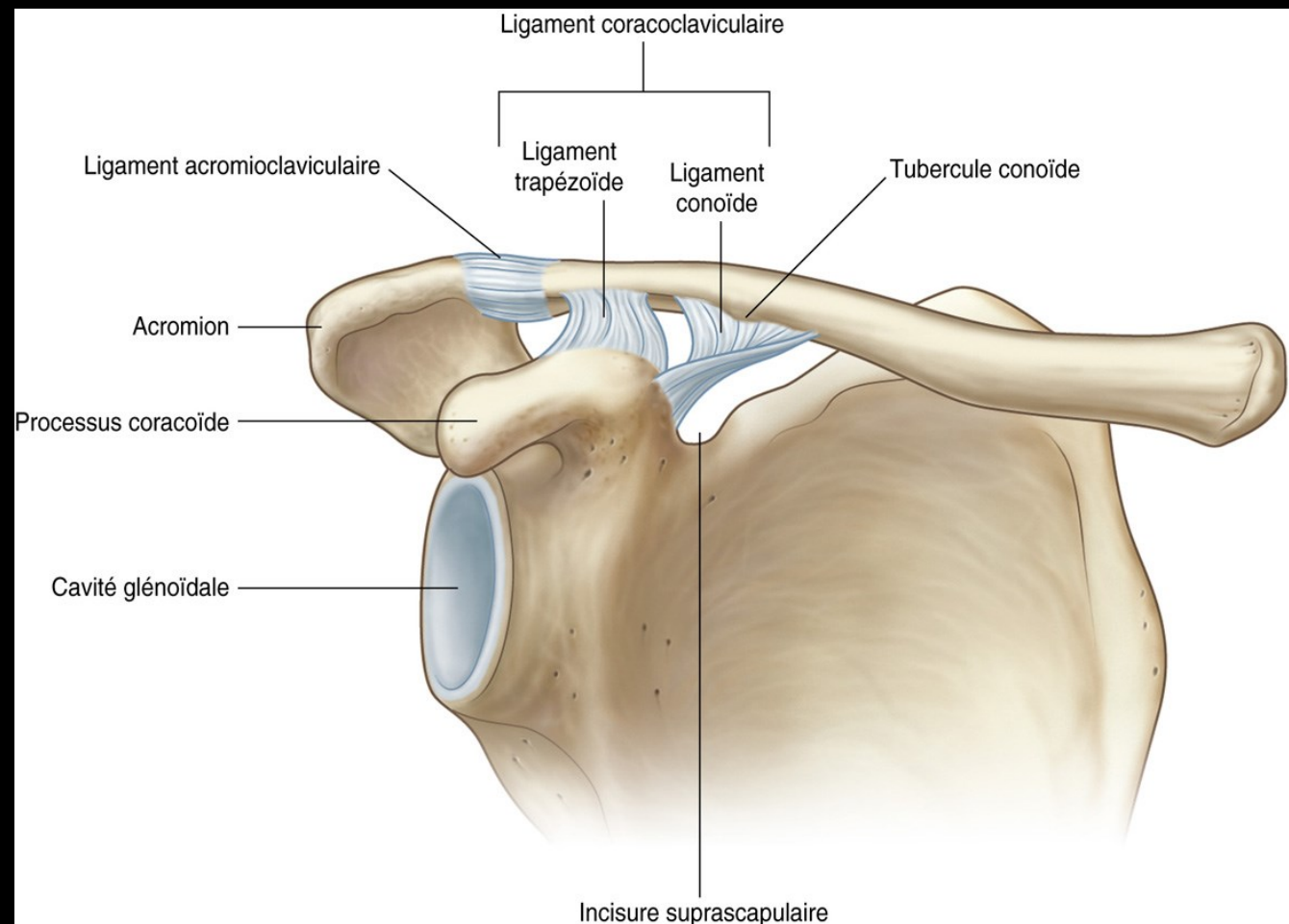
Articulation sterno-costale





Articulation acromio-claviculaire

Articulation acromio-claviculaire





Signes de conflit

Conflit = contact entre 2 structures

Examen passif +++



Conflit antéro-latéral

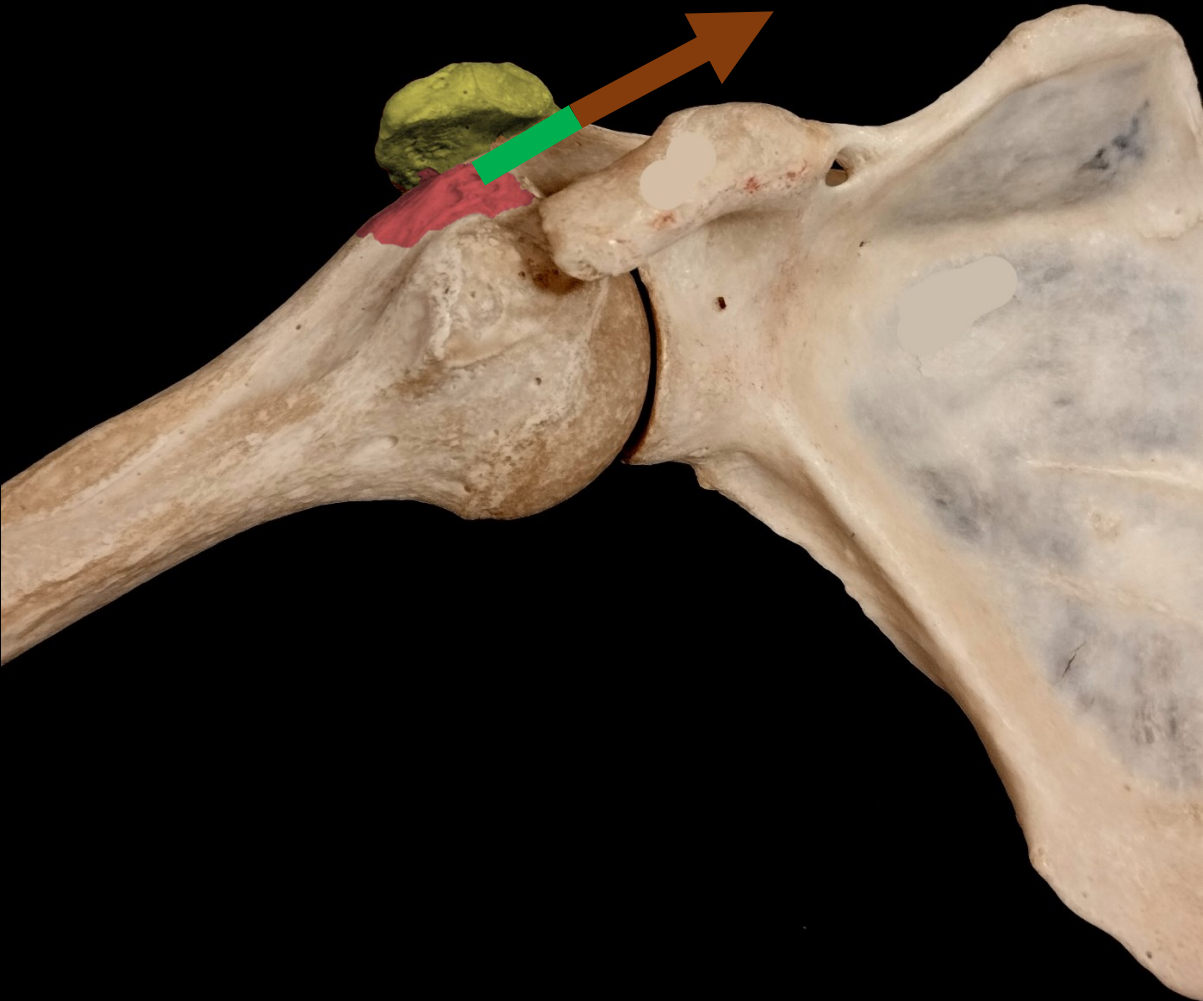
Conflit antéro-supérieur

Conflit sub-acromial

Acromion

Tubercule majeur

Conflit antéro-latéral



Conflit antéro-latéral



Test de Neer

Se 59-72%
Sp 60%

Conflit antéro-latéral



Test de
Hawkins-Kennedy

Se 58-80%
Sp 56-67%



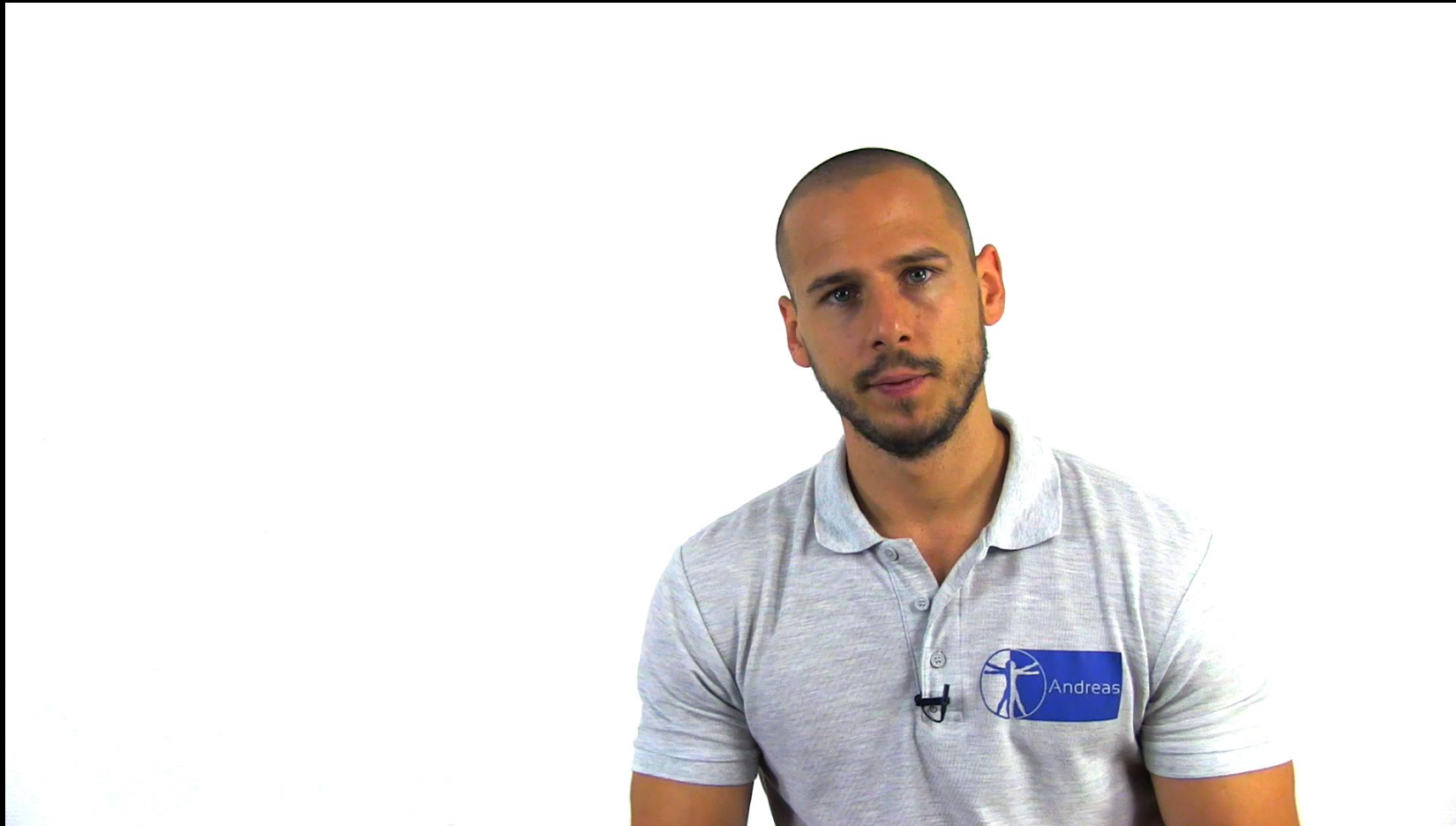
Conflit antéro-médial
Conflit antéro-interne
Conflit sub-coracoïdien

Processus coracoïde
Tubercule mineur

Conflit antéro-médial



Conflit antéro-médial



**Cross body
Adduction test**

Se 77%
Sp 79%



Conflit postéro-latéral
Conflit de Walsh

Bord postérieur
de la cavité glénoïdale
Tubercule majeur

Conflit postéro-latéral



Conflit postéro-latéral



Conflit postéro-latéral



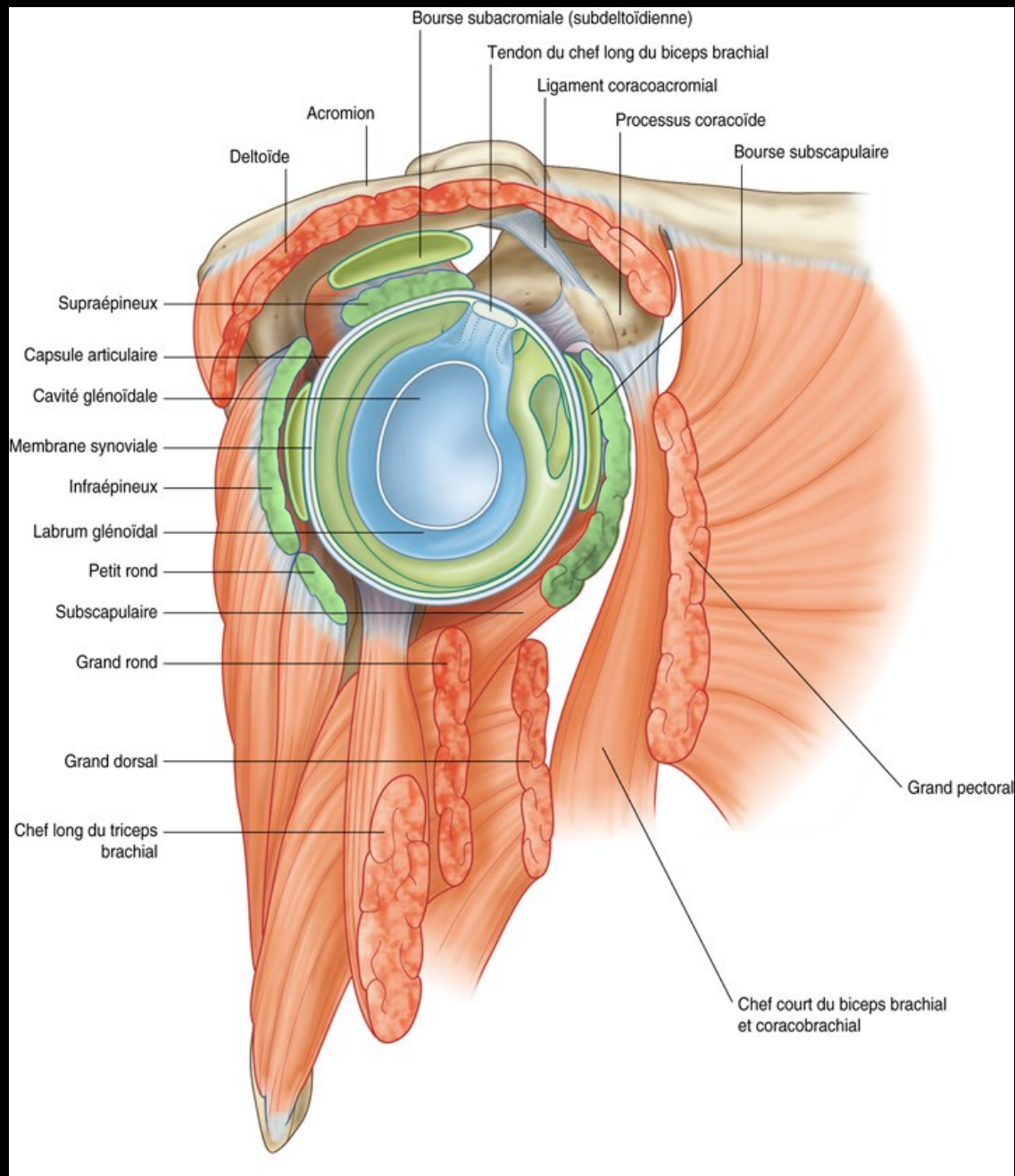
Test de l'armé

Se 76%

Sp 85%



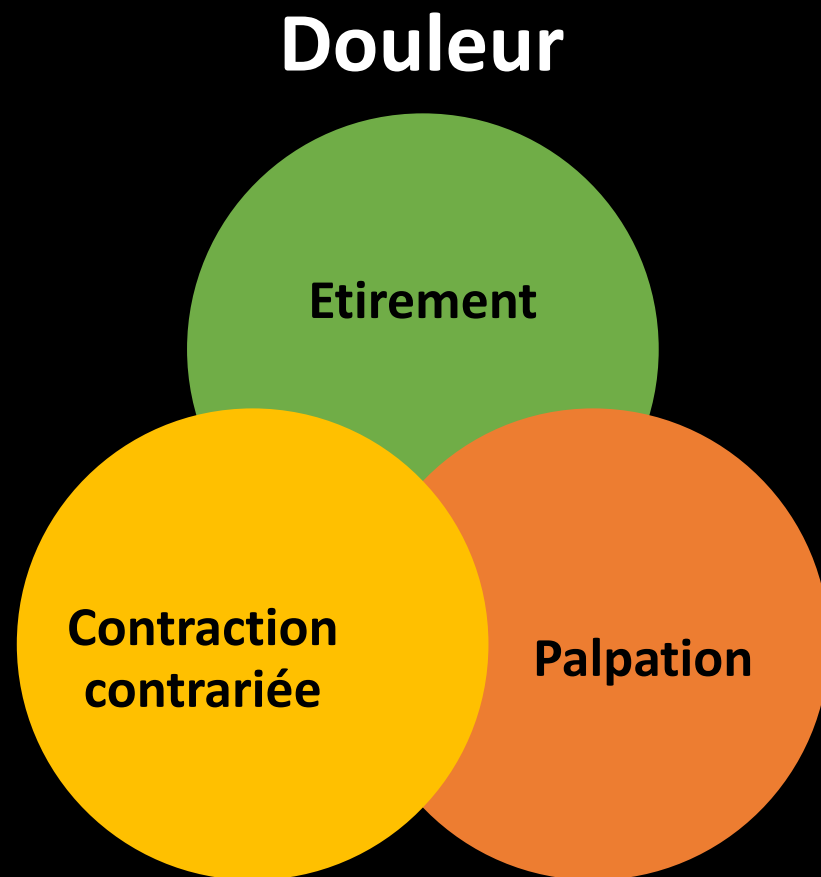
« *Testing* » de coiffe



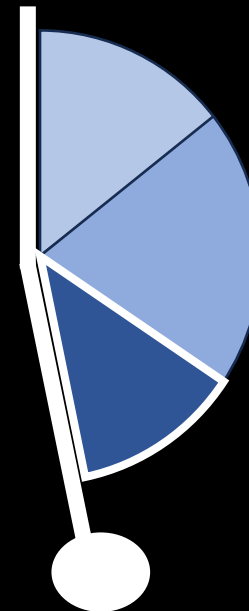
Examen actif +++

4+1

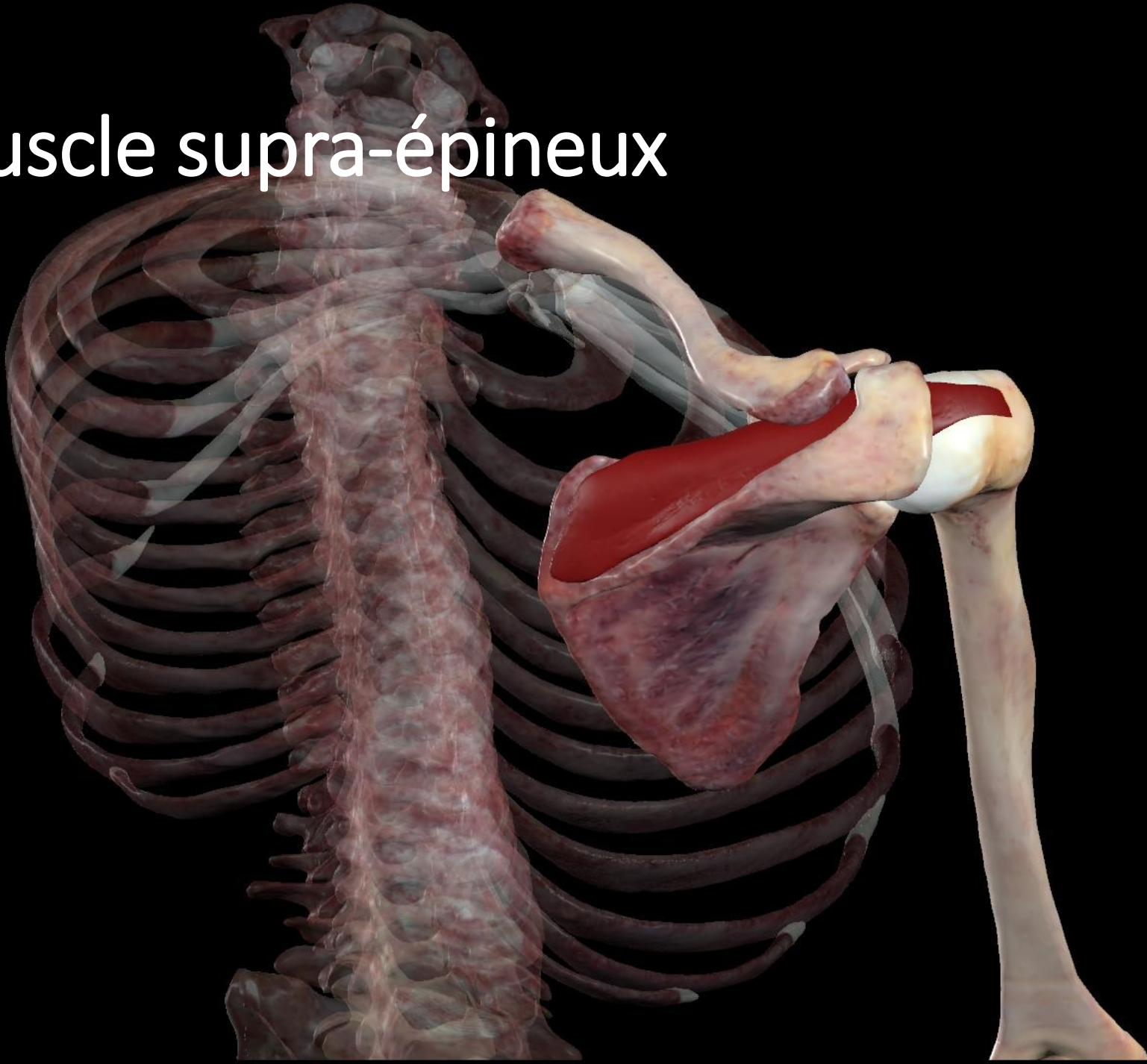
Triade tendineuse



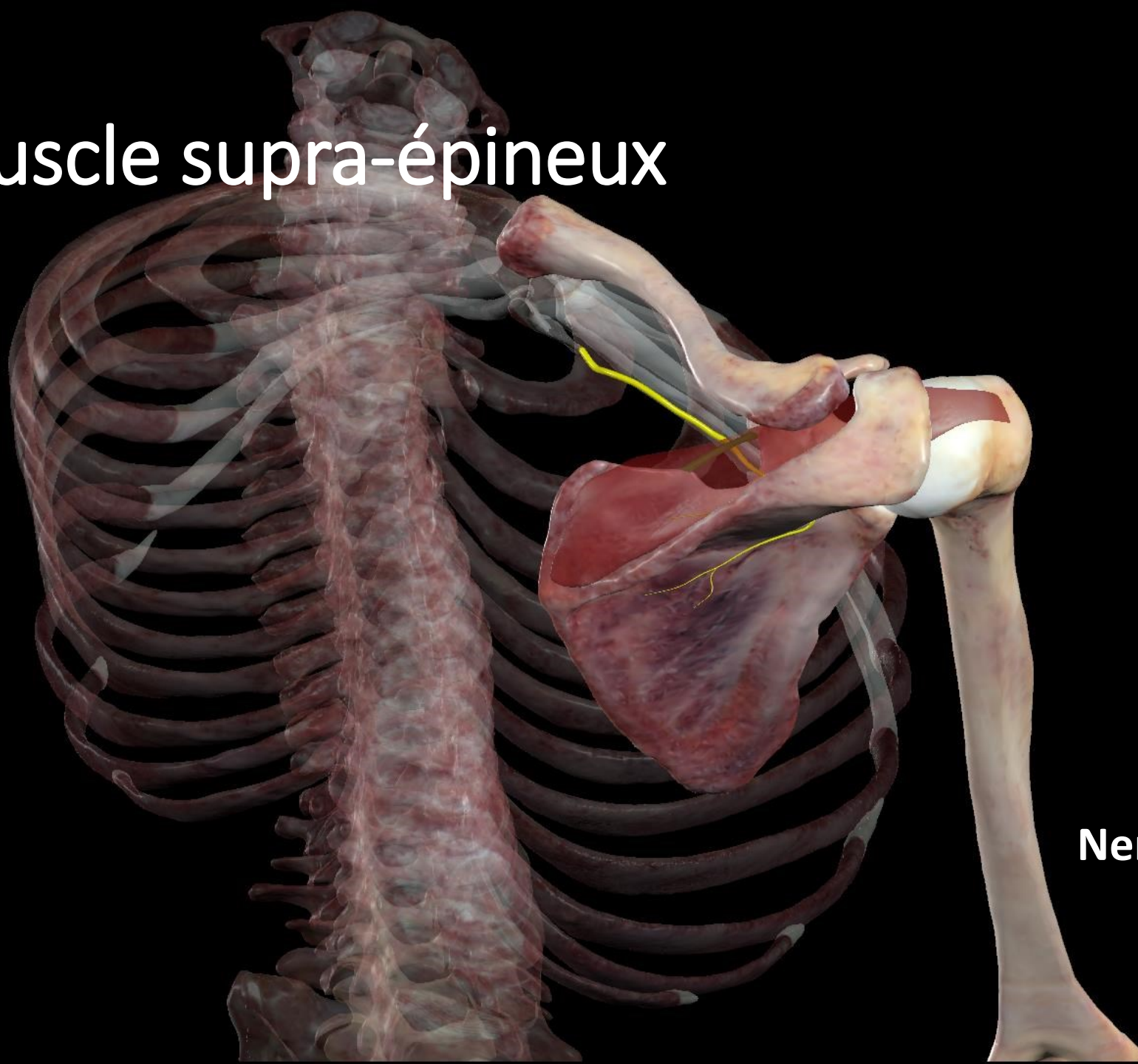
Préférentiellement
en **course externe**



Muscle supra-épineux



Muscle supra-épineux



**Nerf supra-scapulaire
C5-C6**

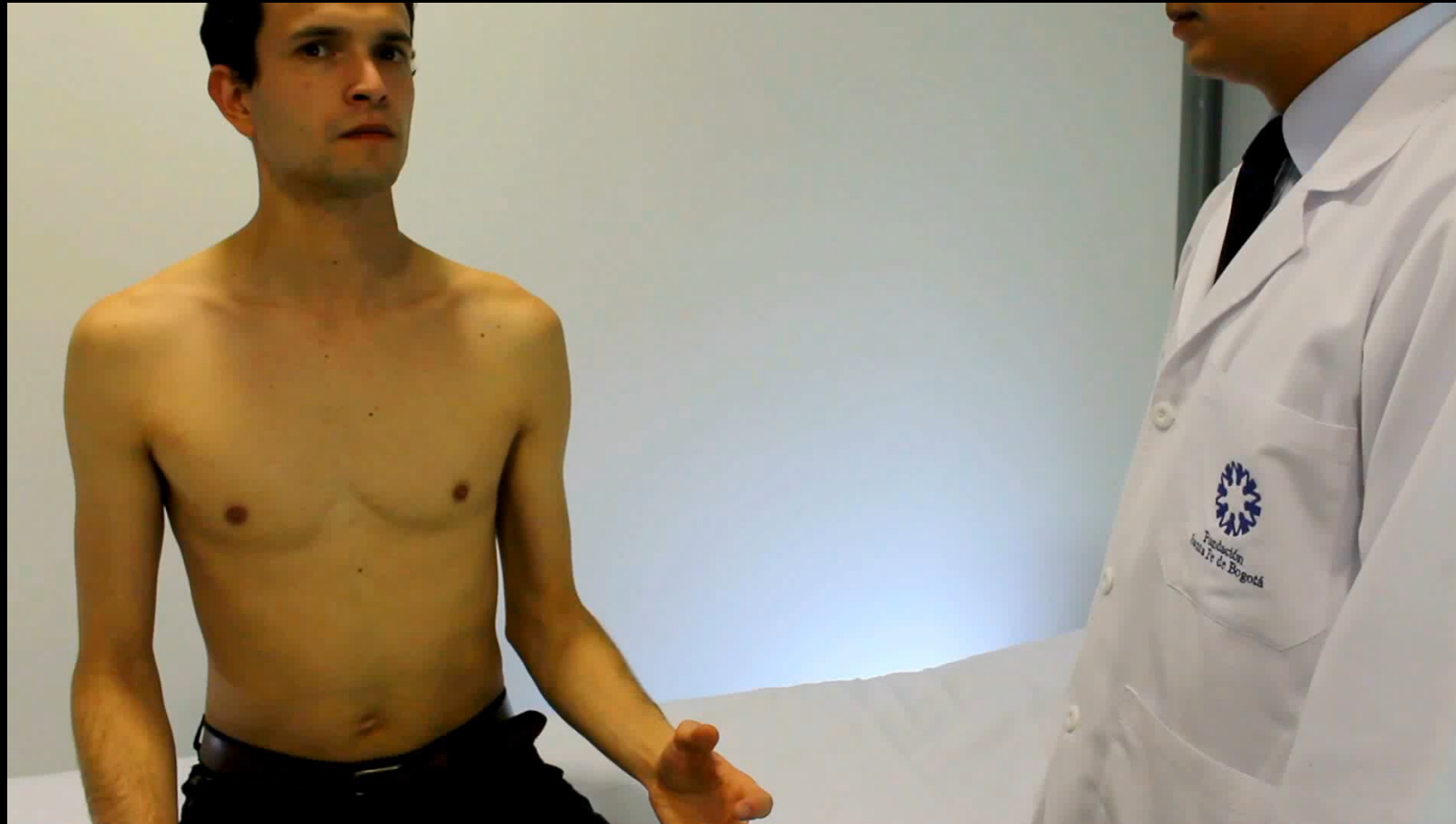
Muscle supra-épineux



Test de Jobe
Empty can test

Se 74%
Sp 30%

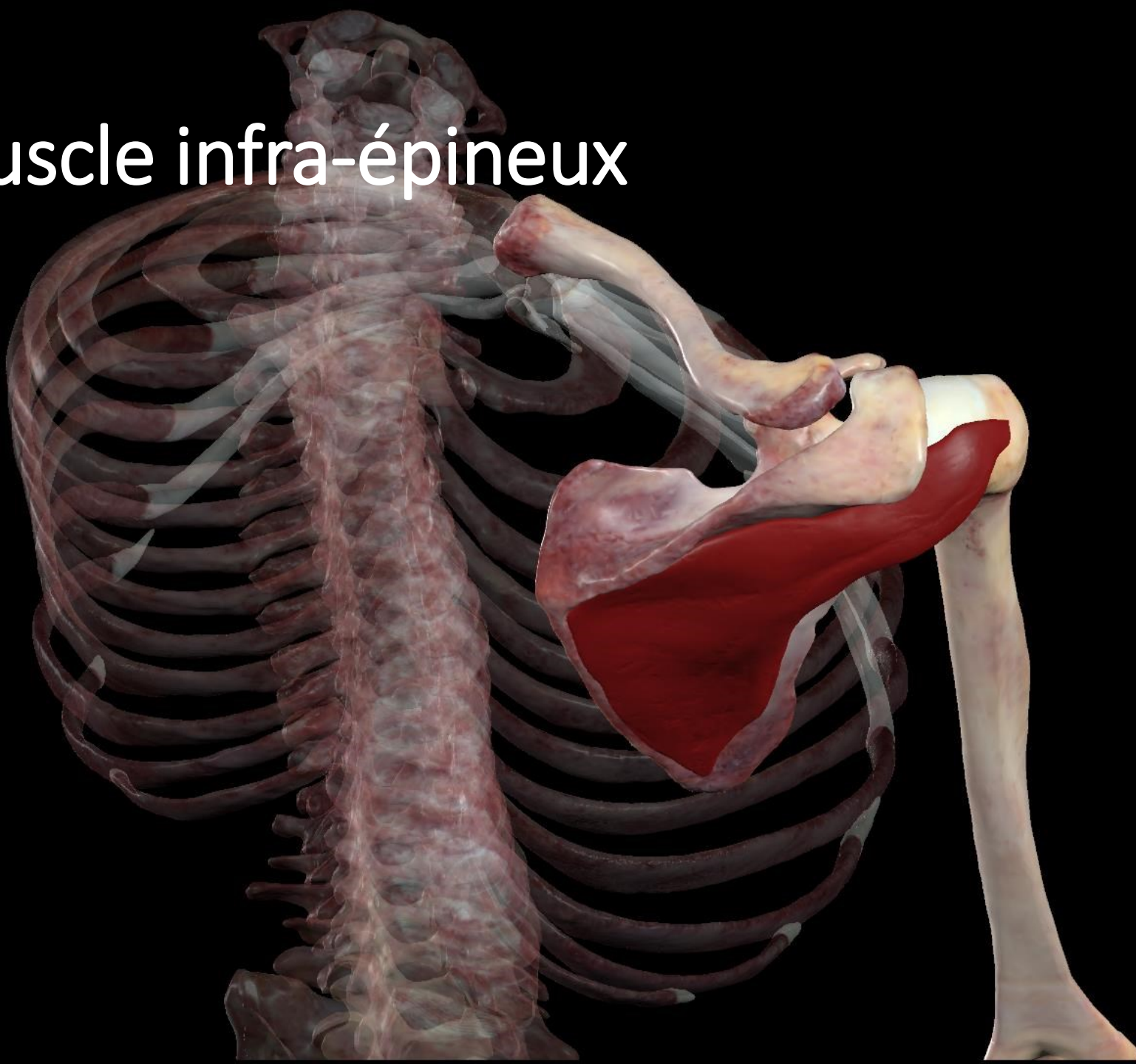
Muscle supra-épineux



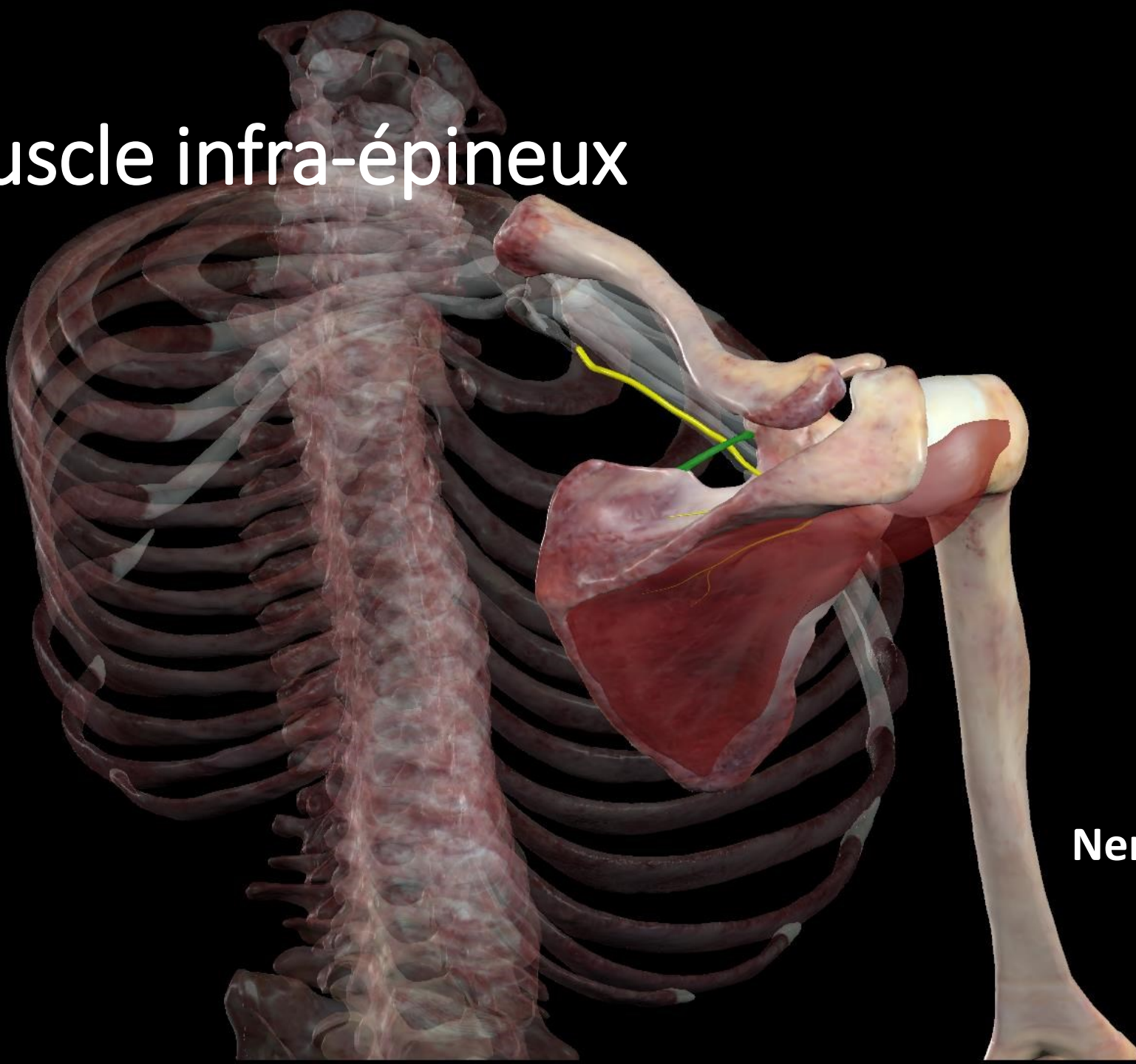
Champagne toast

“So, next time you want to evaluate the supraspinatus, try asking your patient to raise a toast instead of pouring soda all over your exam floor.”

Muscle infra-épineux

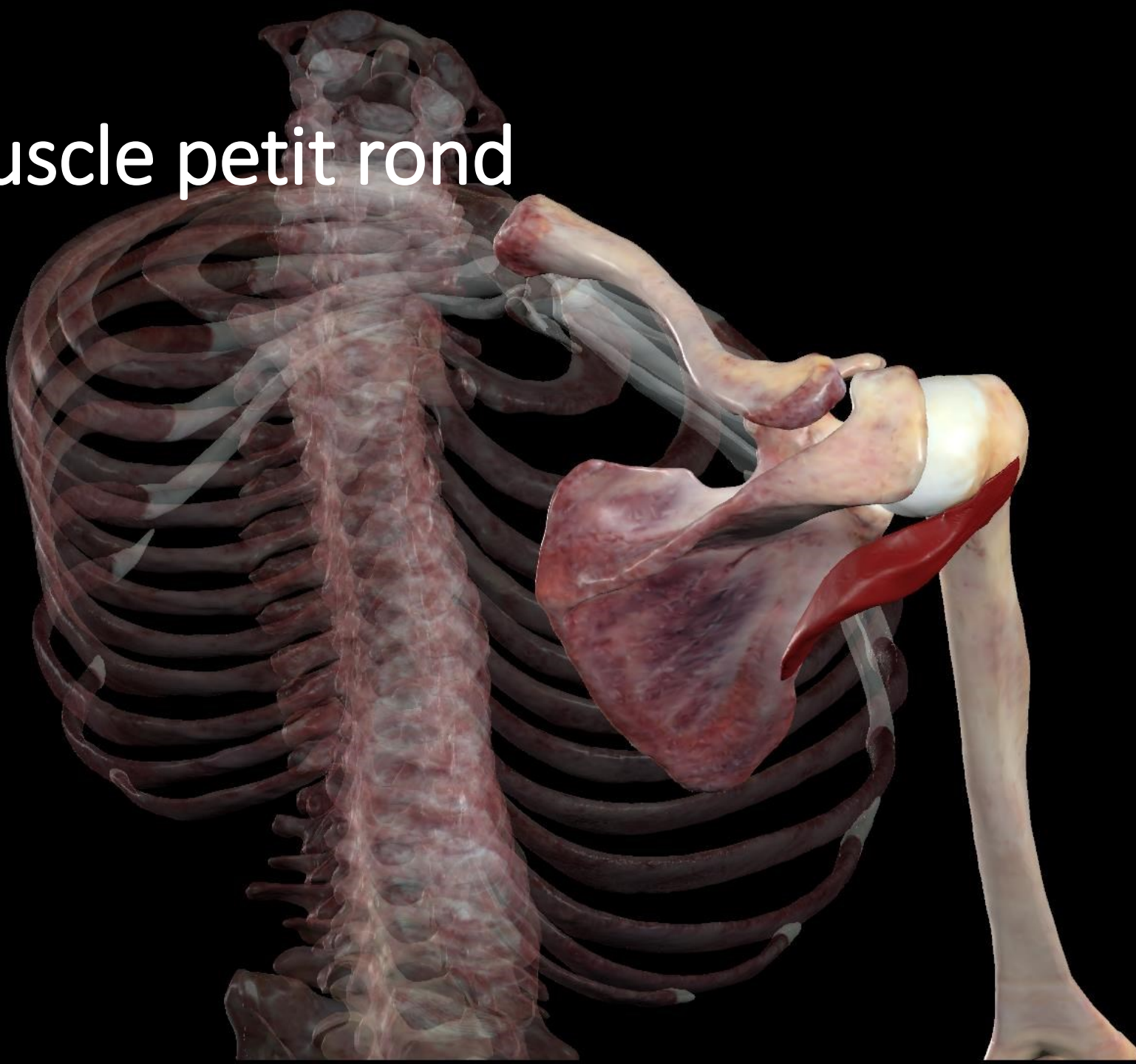


Muscle infra-épineux

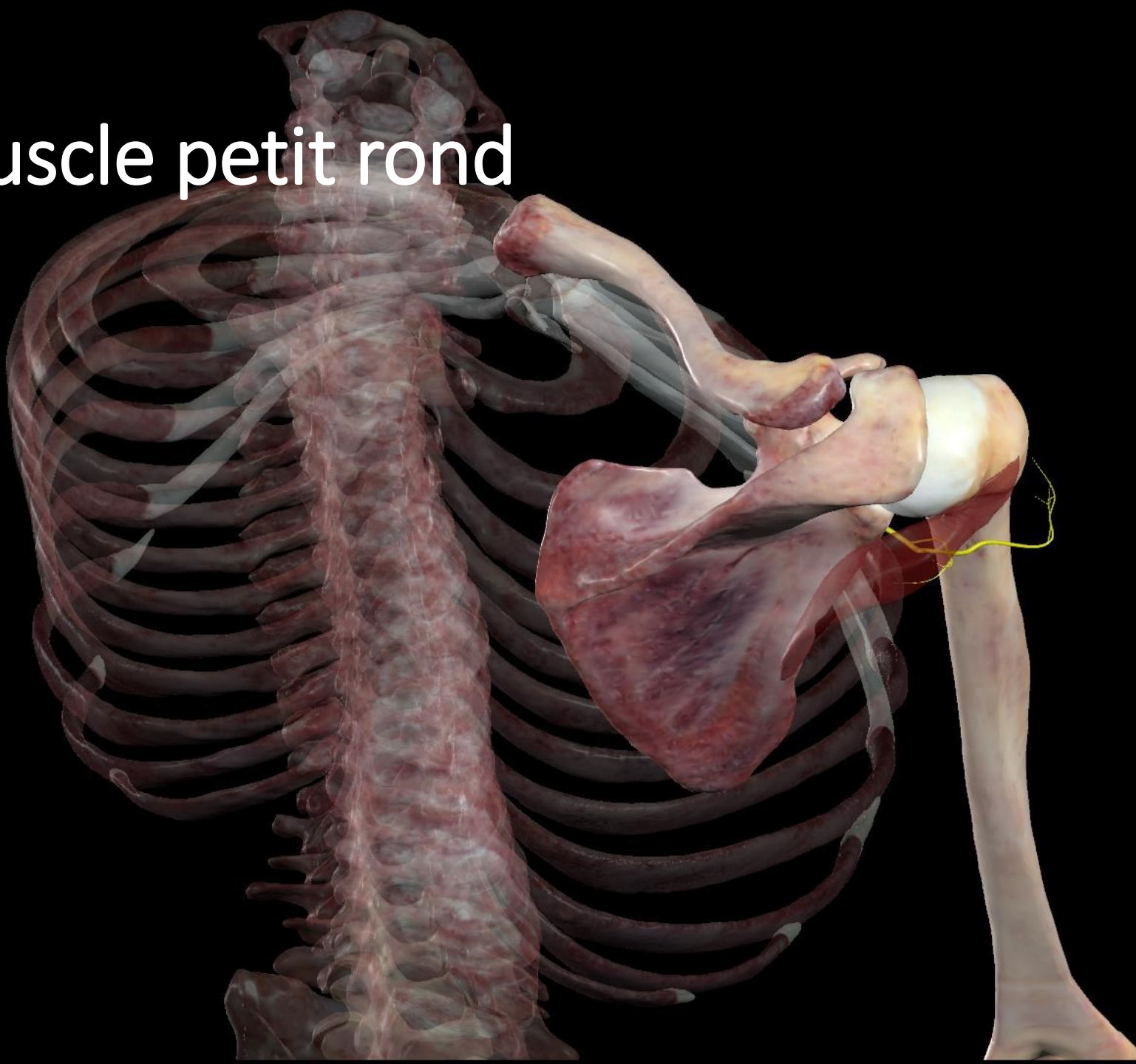


**Nerf supra-scapulaire
C5-C6**

Muscle petit rond



Muscle petit rond



**Nerf Axillaire
C5-C6**

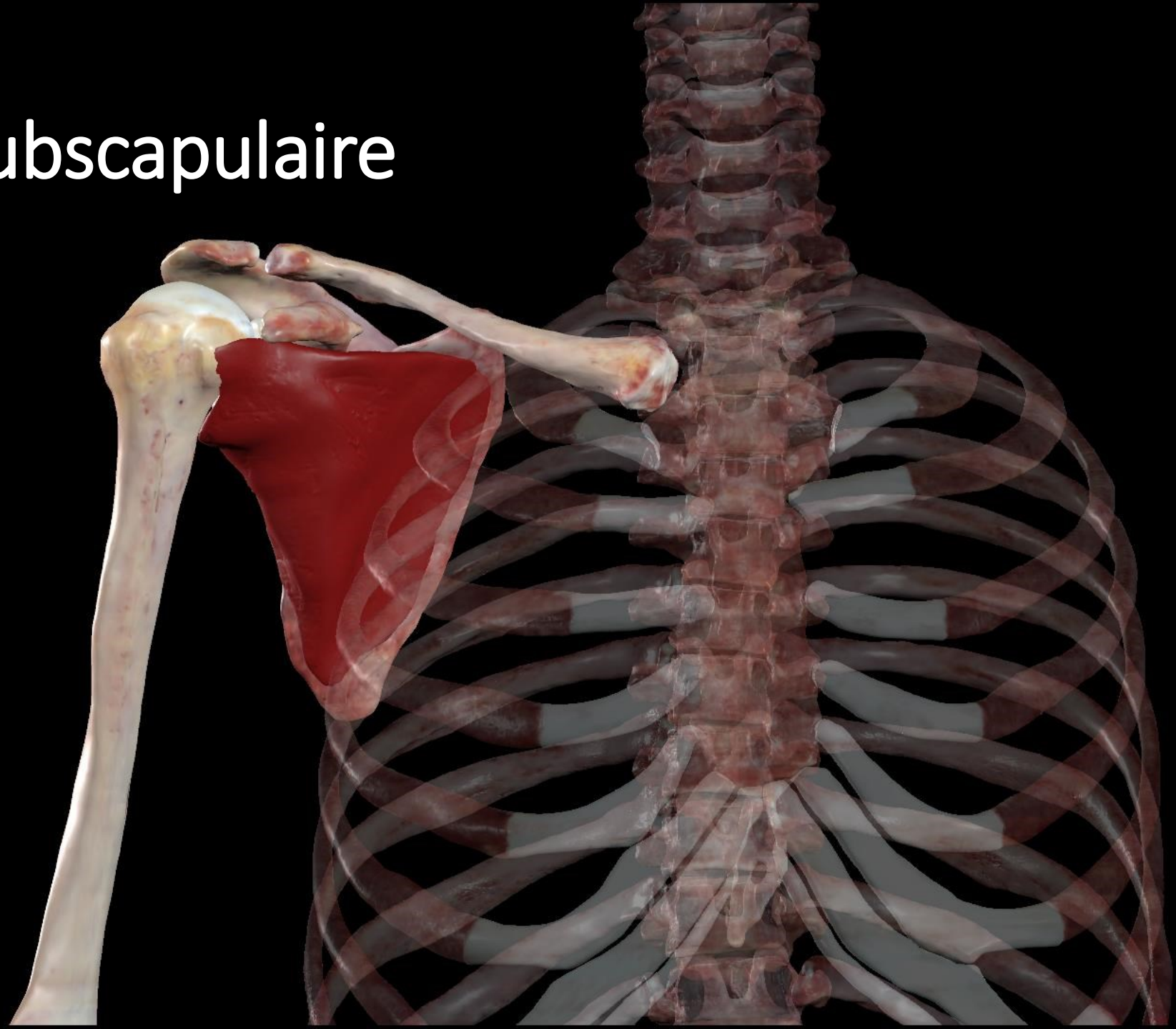
Muscles infra-épineux et petit rond



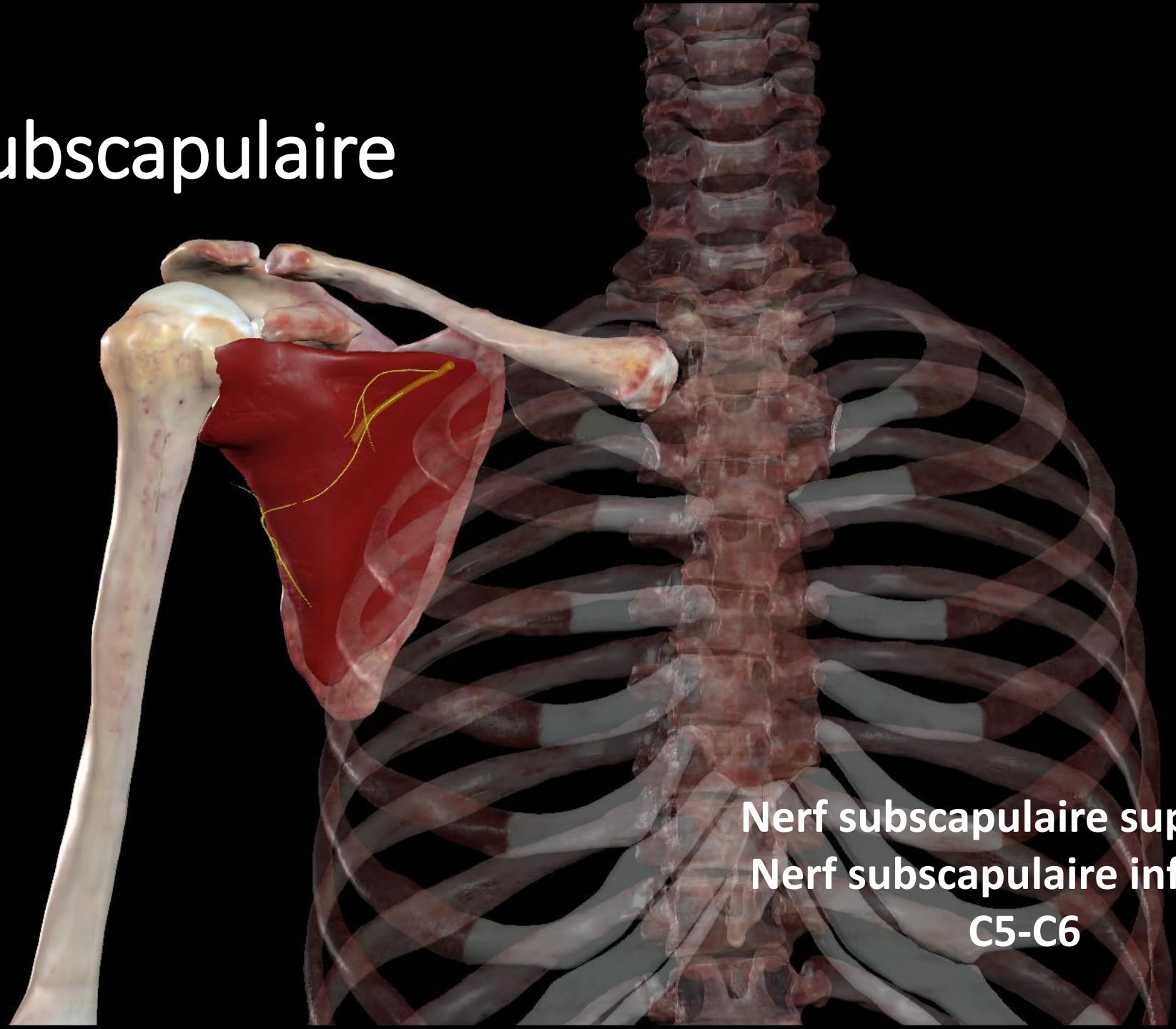
Signe de Patte

Se 17%
Sp 96%

Muscle subscapulaire



Muscle subscapulaire



Nerf subscapulaire supérieur
Nerf subscapulaire inférieur
C5-C6

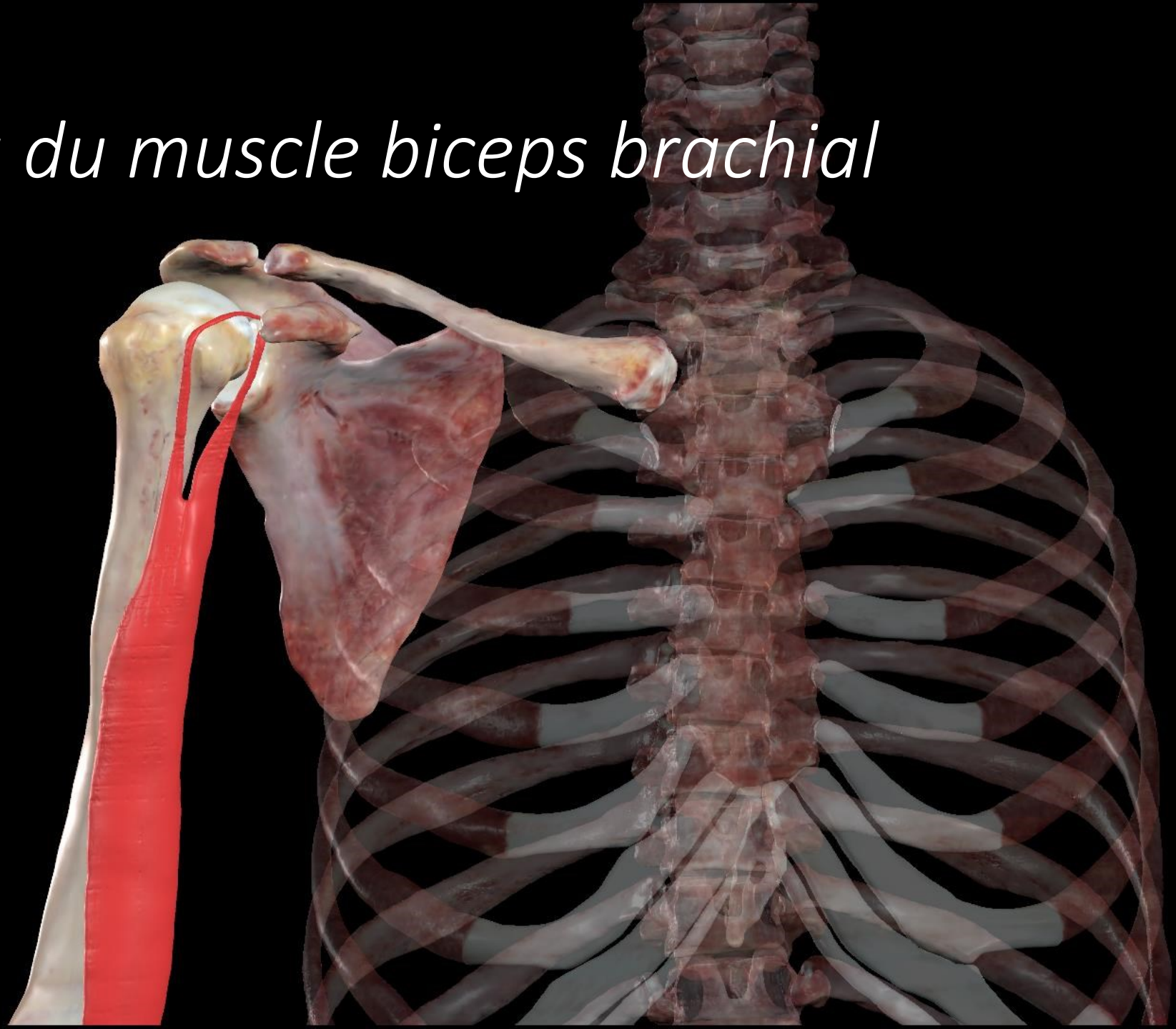
Muscle subscapulaire



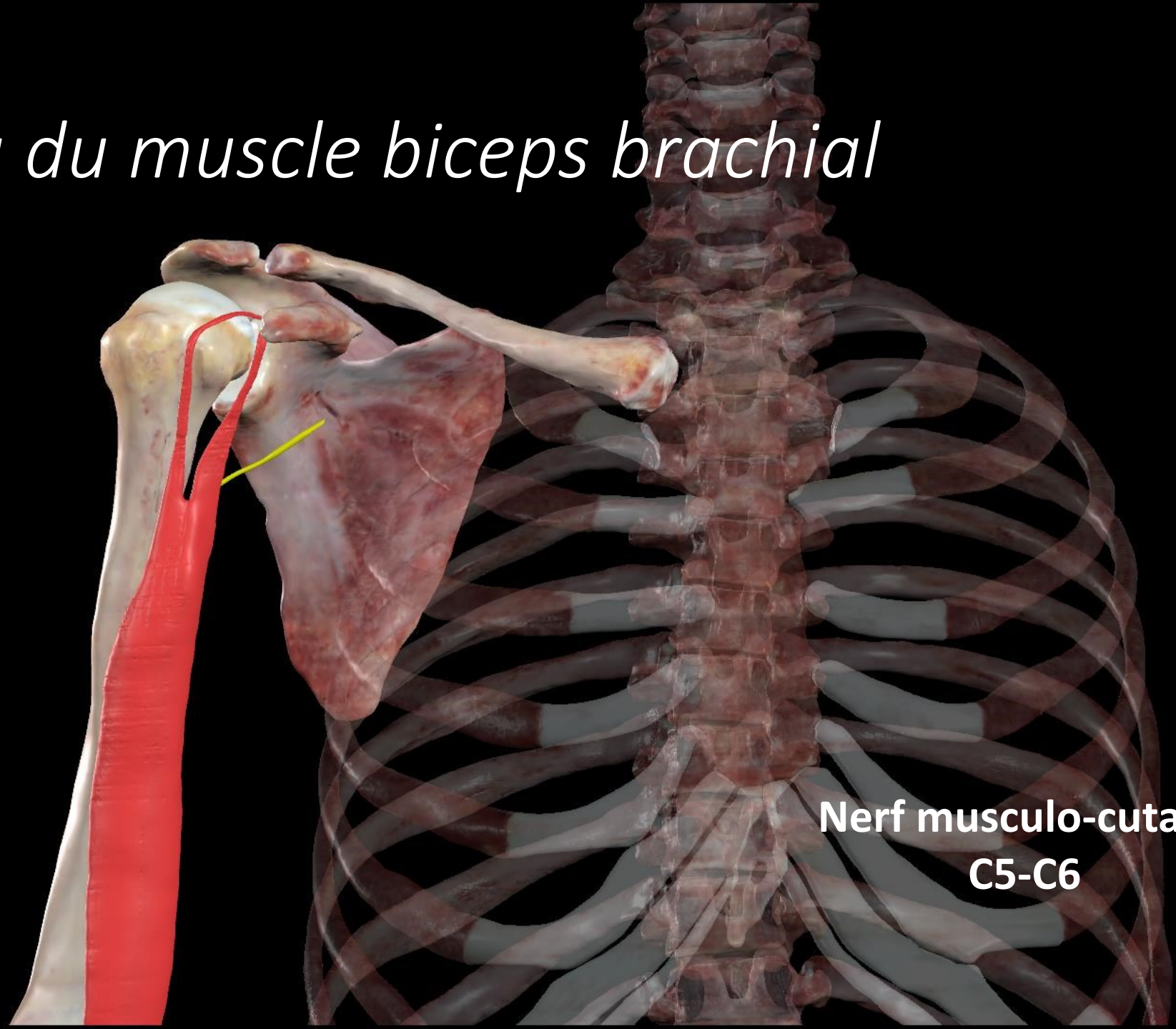
Lift off test
Gerber

Se 35%
Sp 75%

Chef long du muscle biceps brachial



Chef long du muscle biceps brachial




**Nerf musculo-cutané
C5-C6**

Chef long du muscle biceps brachial



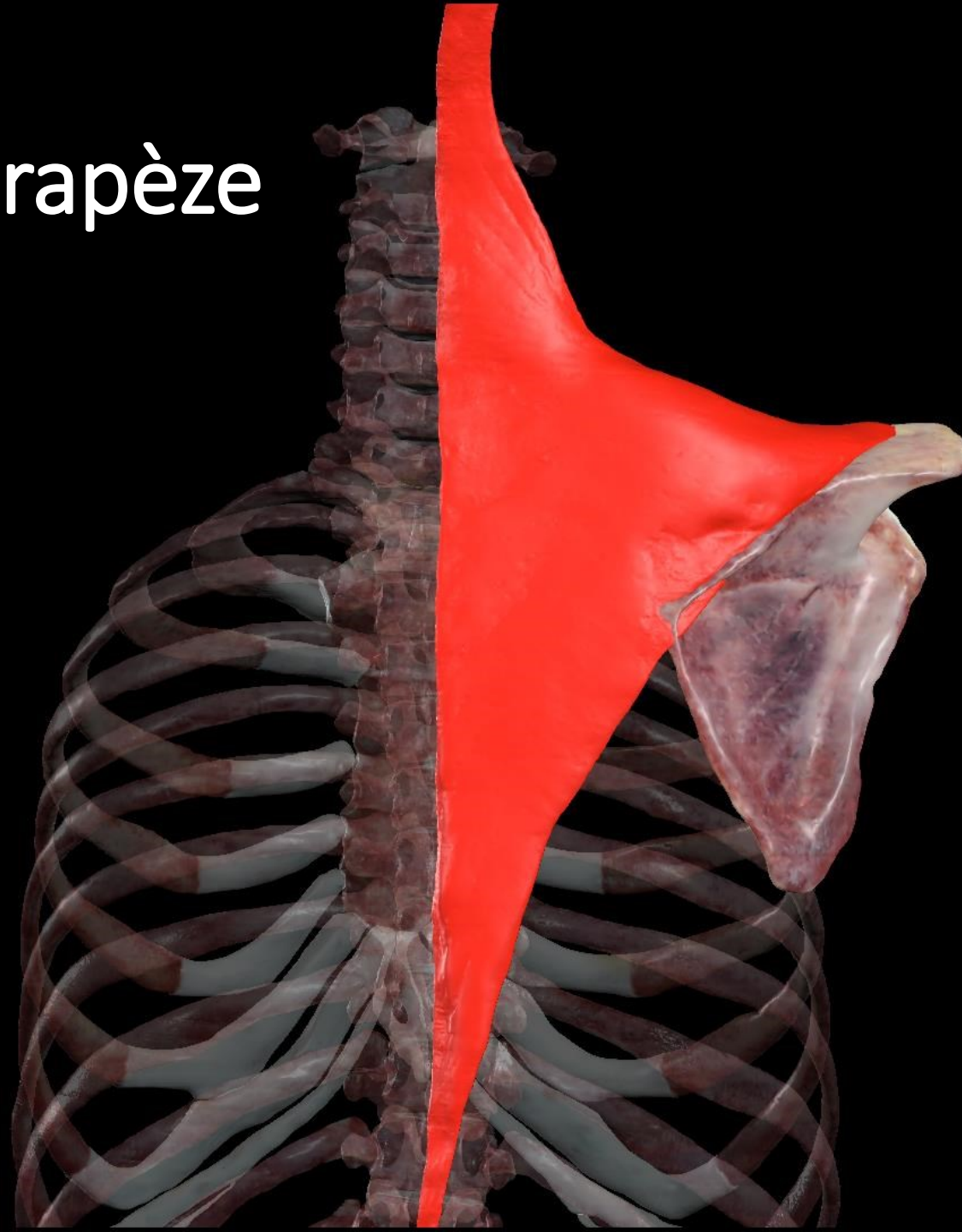
Palm up test

Se 20%
Sp 78%



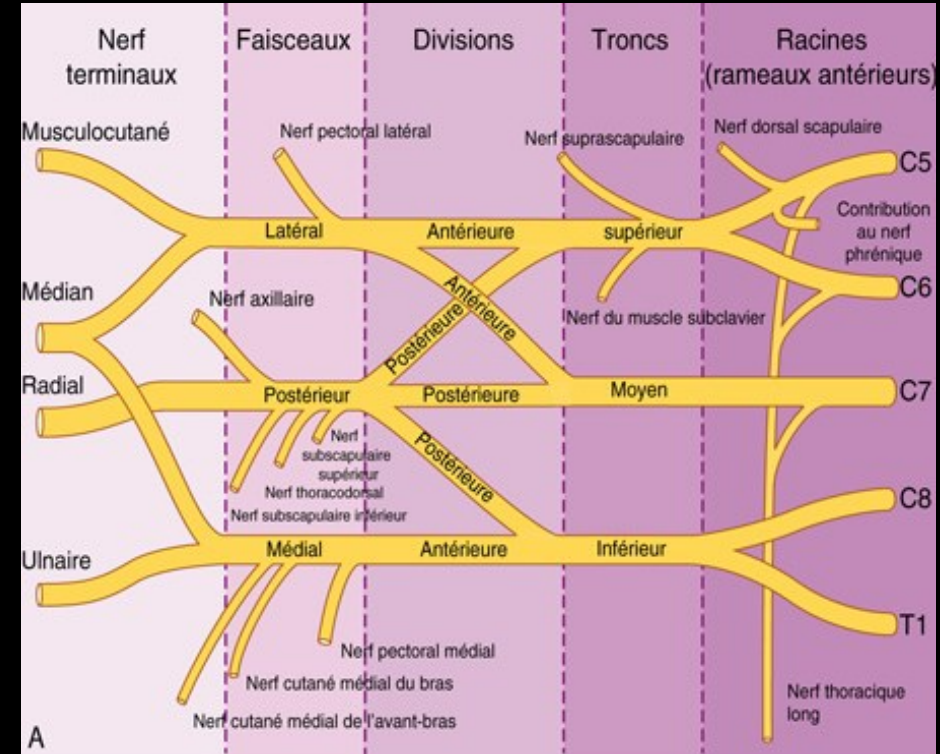
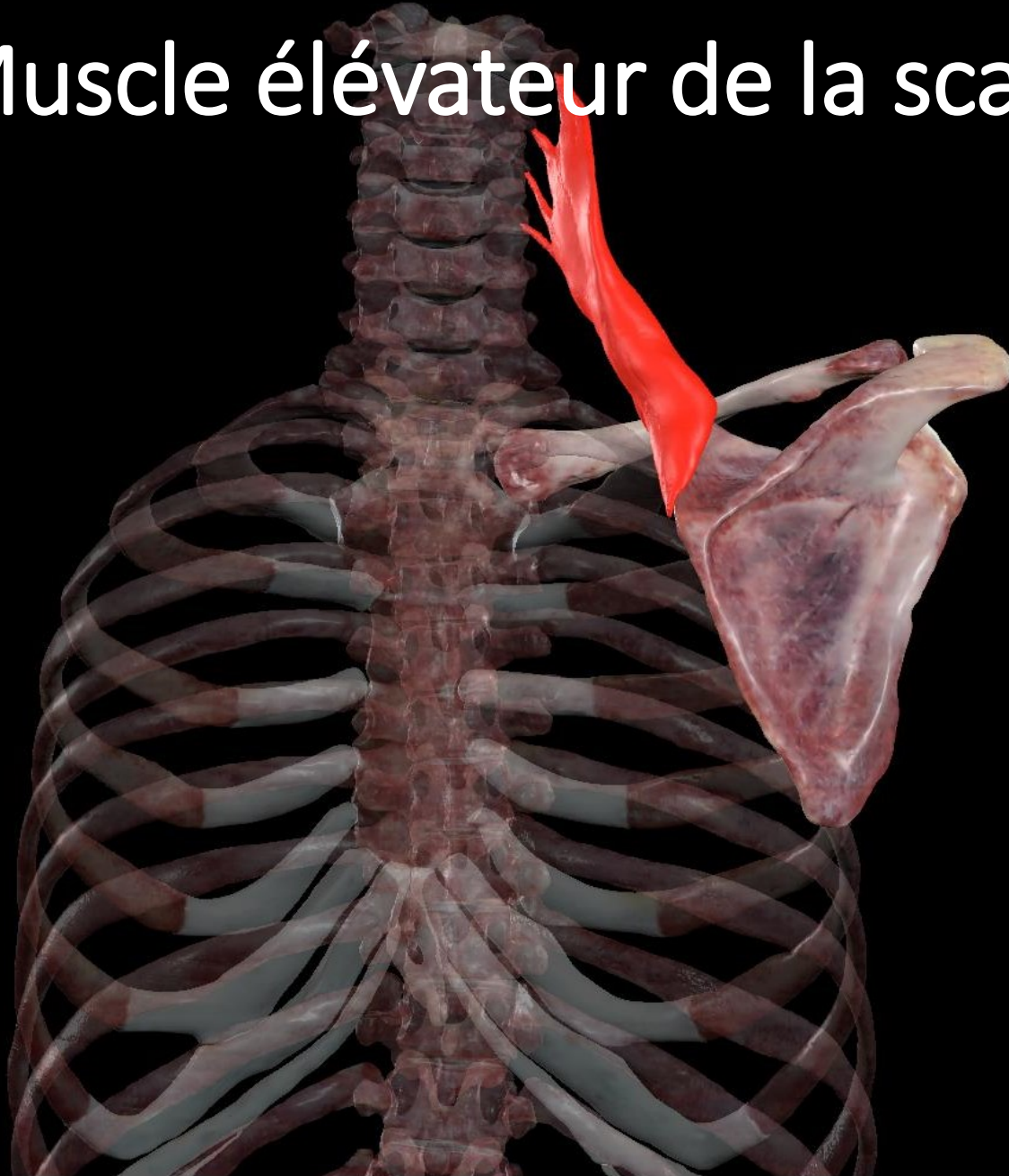
*Testing des muscles
stabilisateurs de la ceinture
scapulaire*

Muscle trapèze



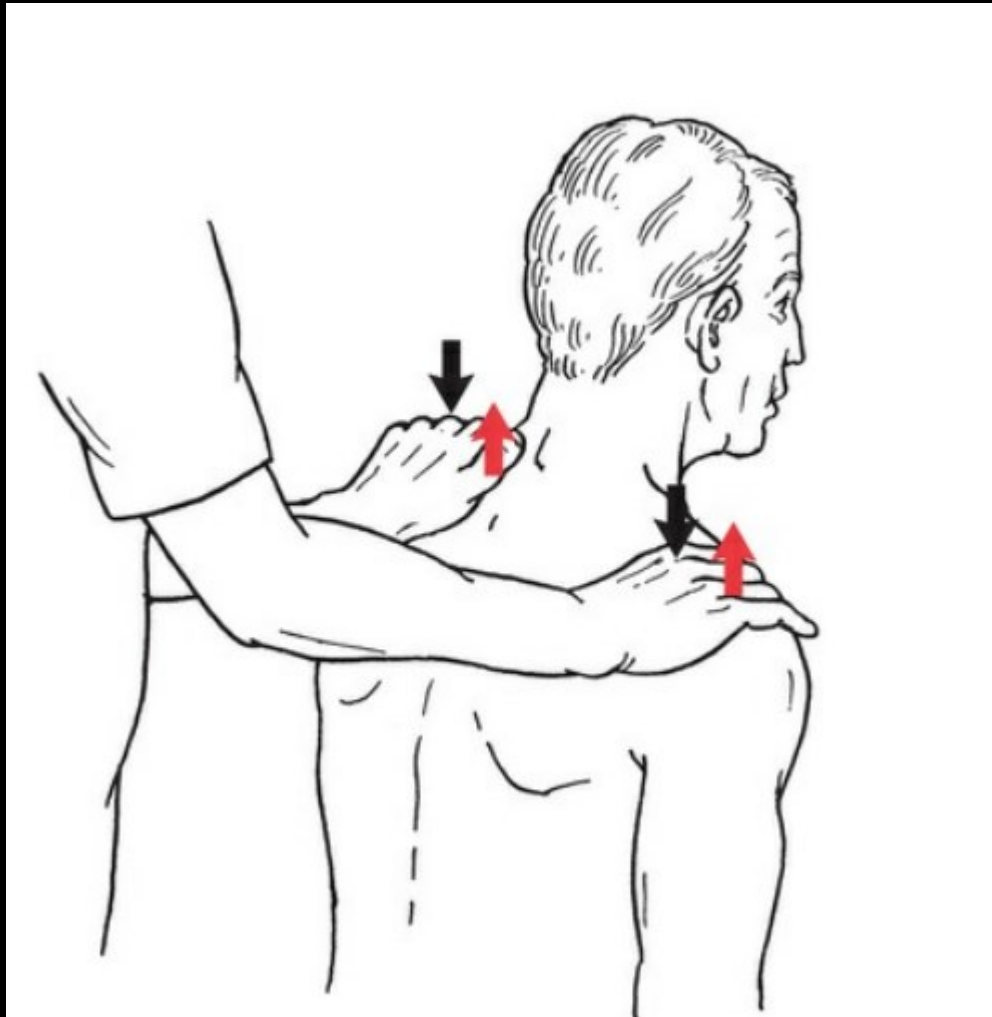
**Nerf accessoire
XI**

Muscle élévateur de la scapula

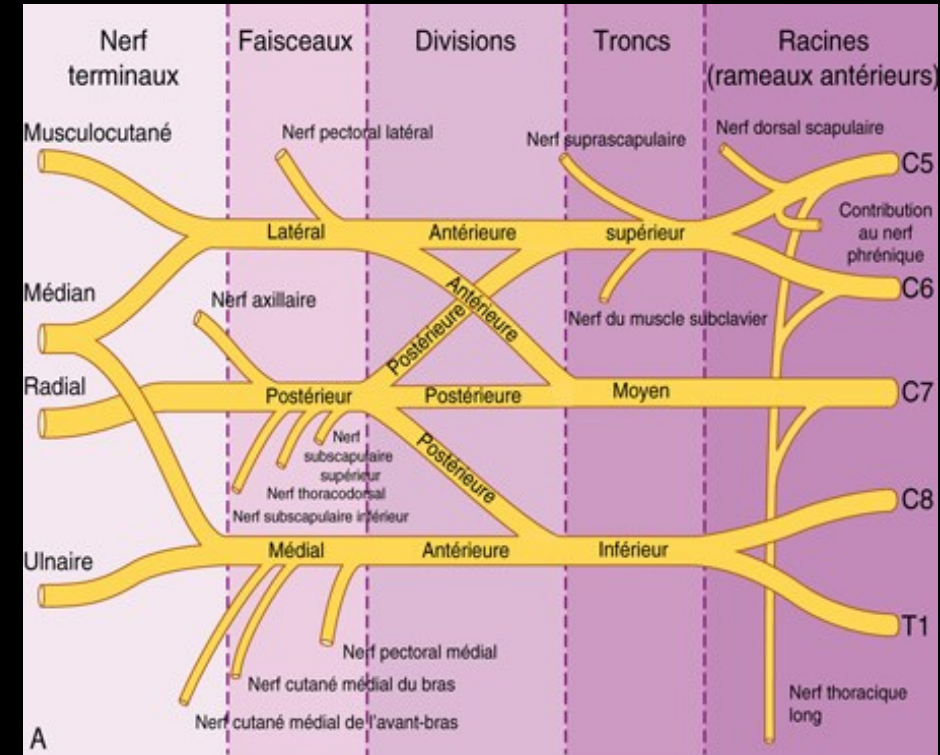
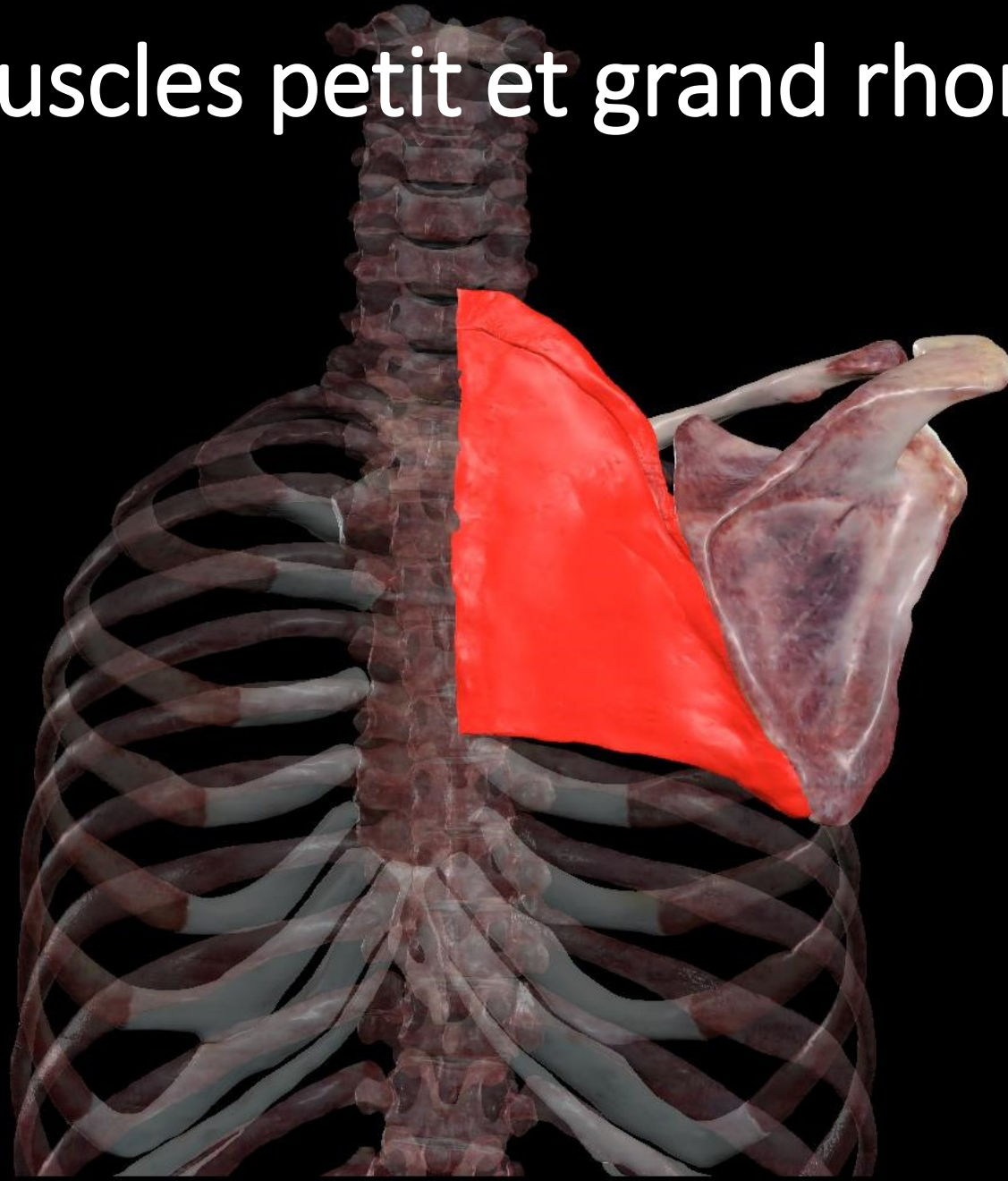


**Nerf dorsal de la scapula
C5**

Muscles trapèze et élévateur de la scapula



Muscles petit et grand rhomboïdes

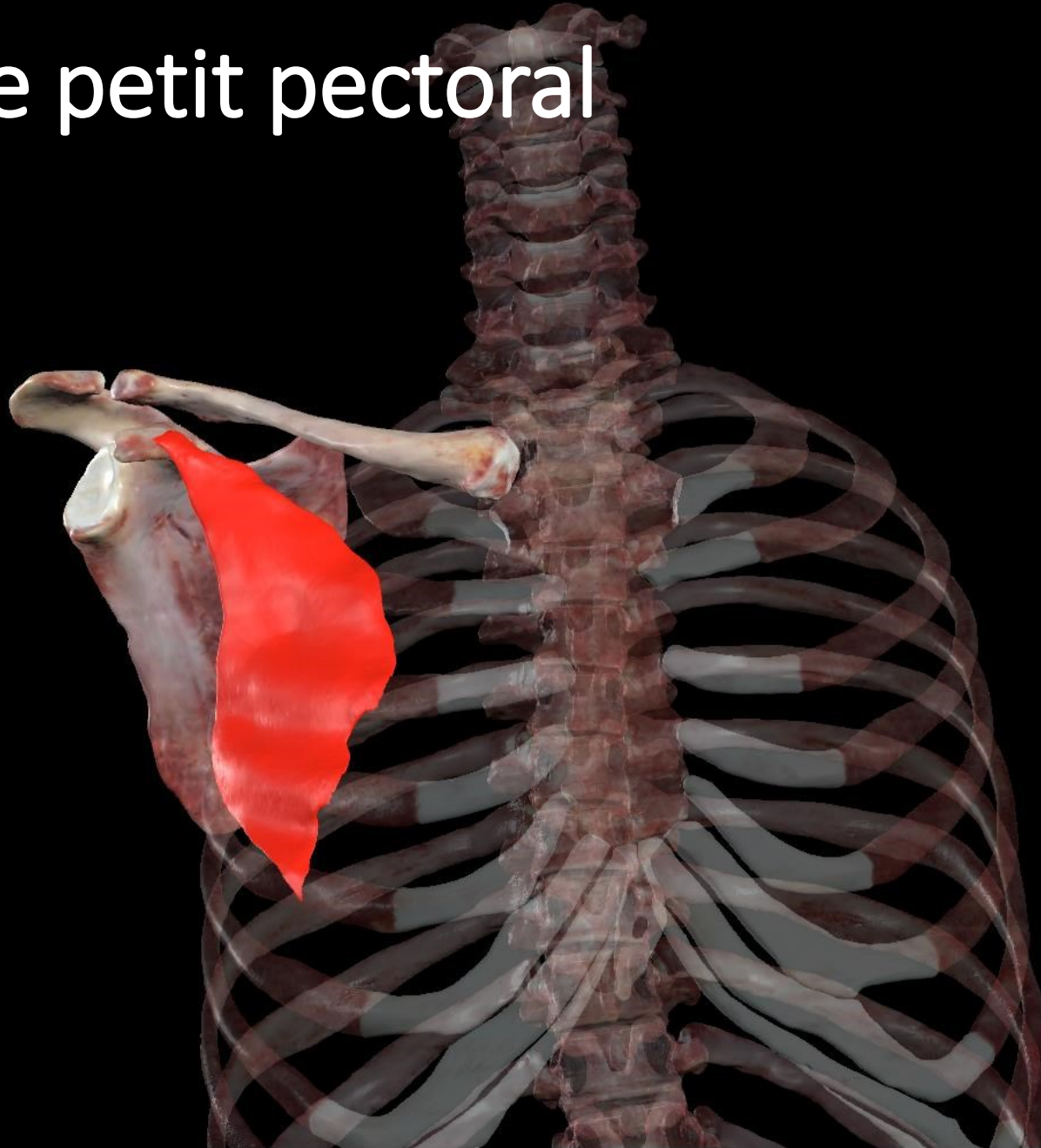


**Nerf dorsal de la scapula
C5**

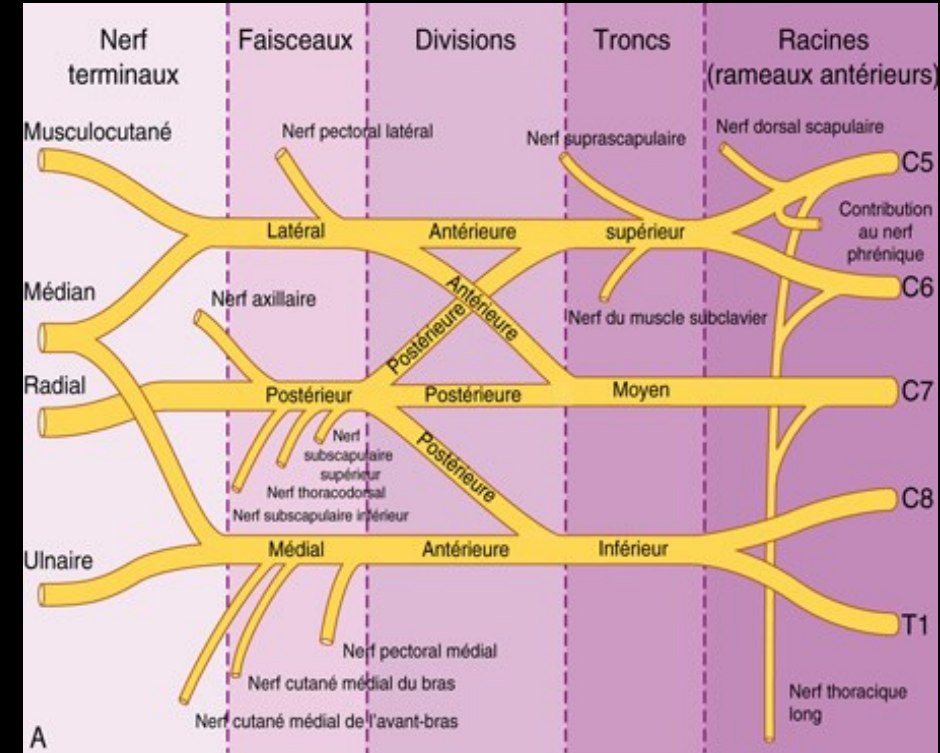
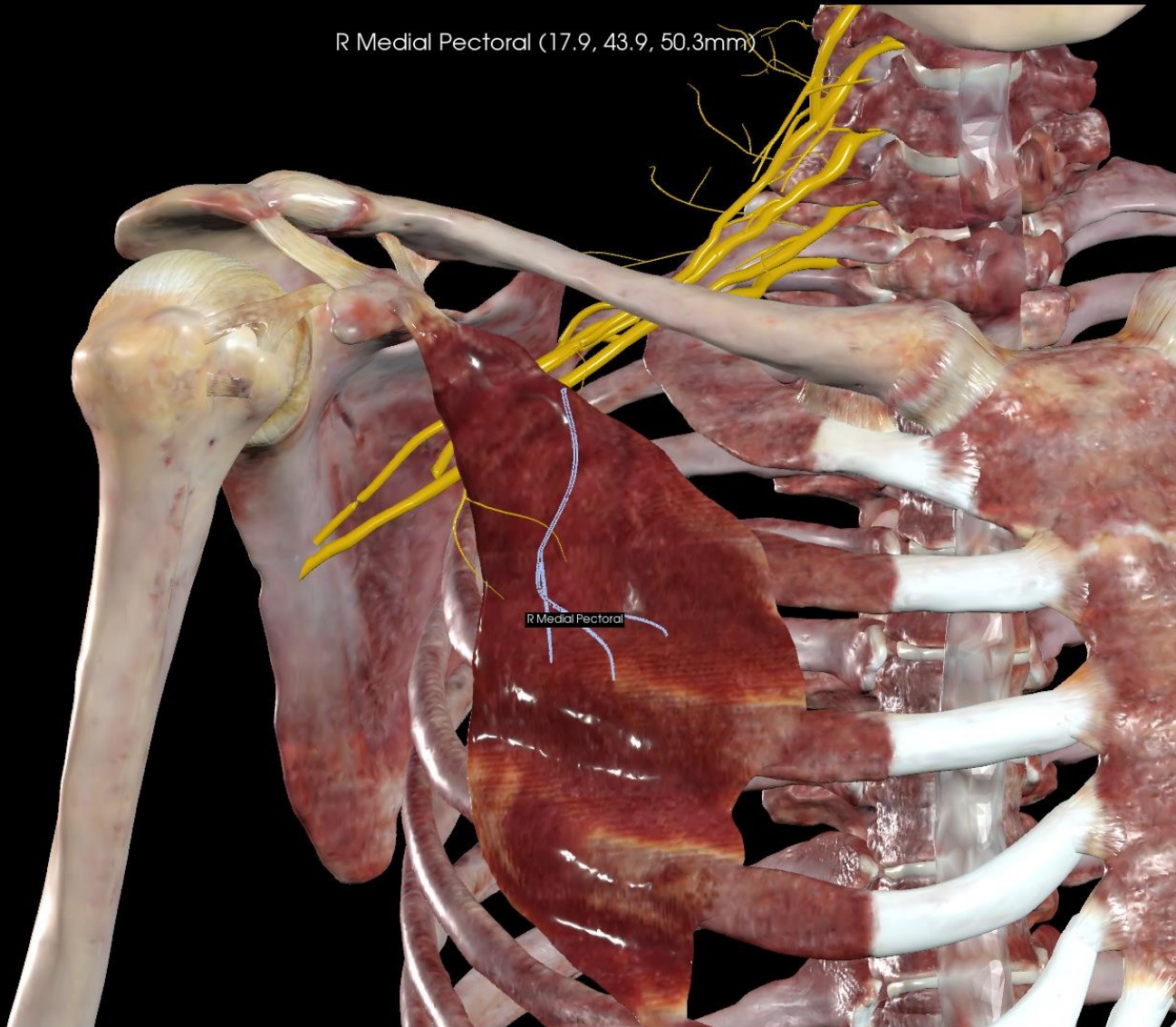
Muscles trapèze et rhomboïdes



Muscle petit pectoral

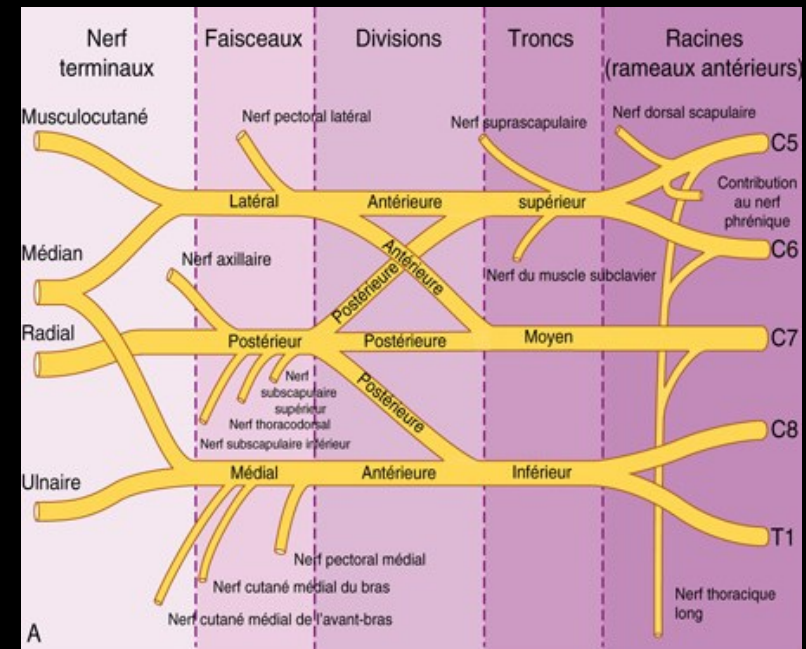
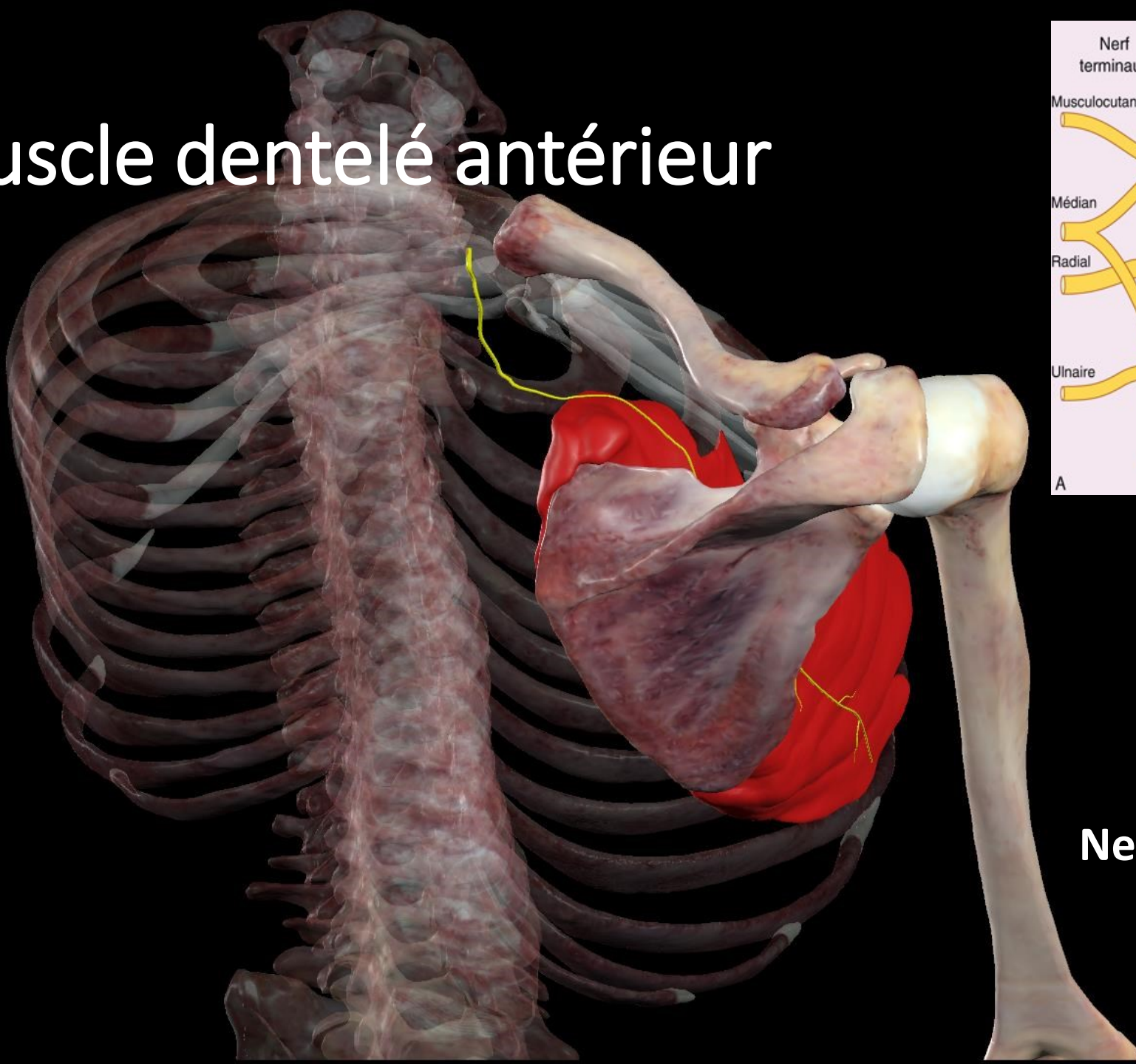


Muscle petit pectoral



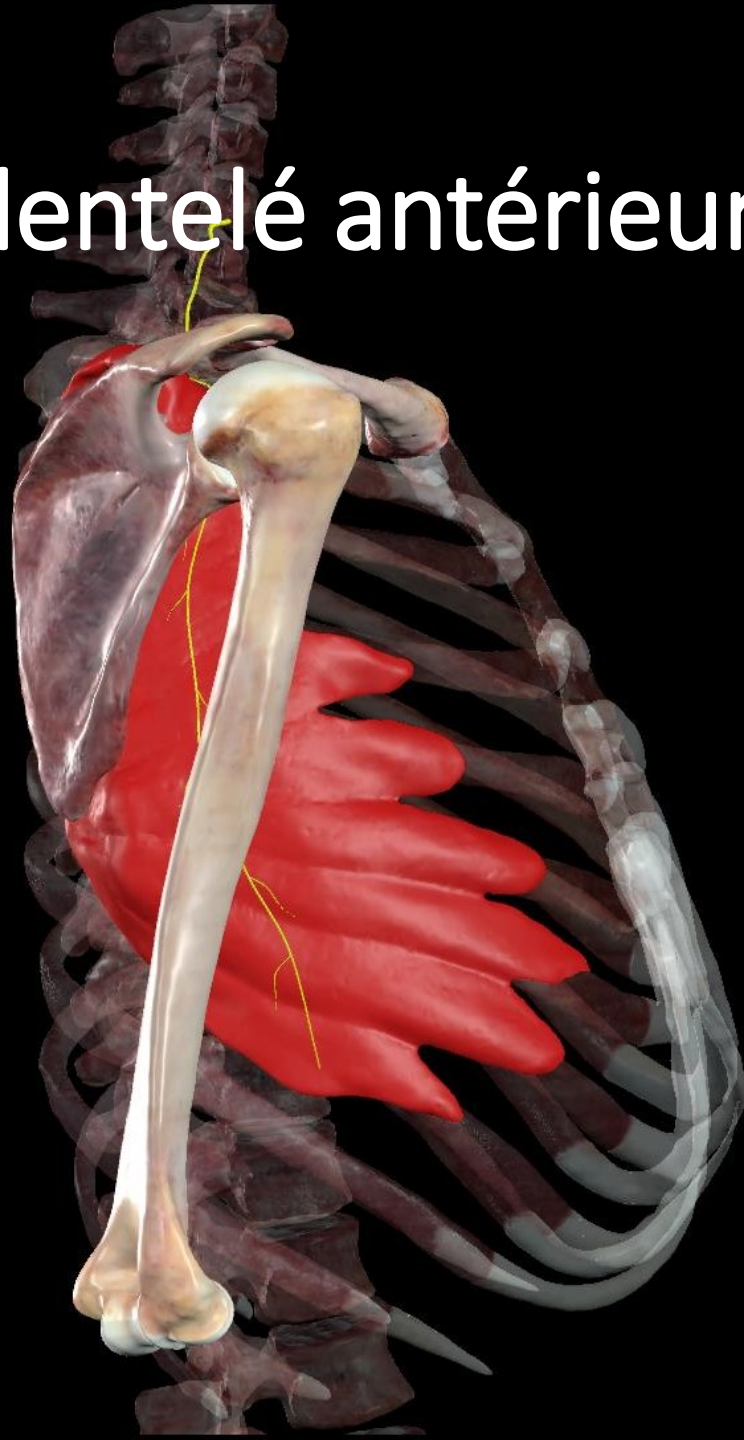
**Nerf pectoral médial
C8-Th1**

Muscle dentelé antérieur



**Nerf thoracique long
C5-C6-C7**

Muscle dentelé antérieur



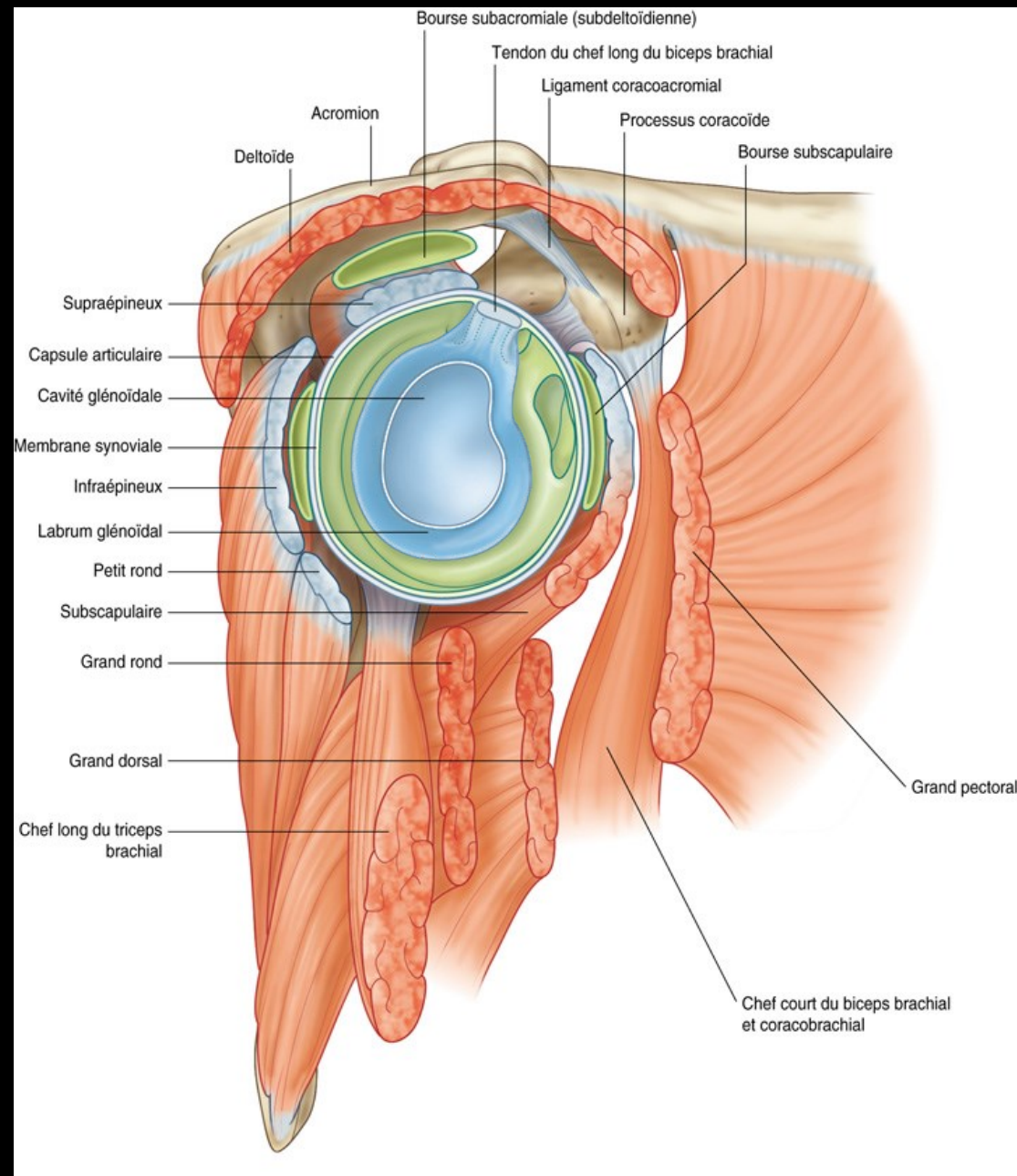
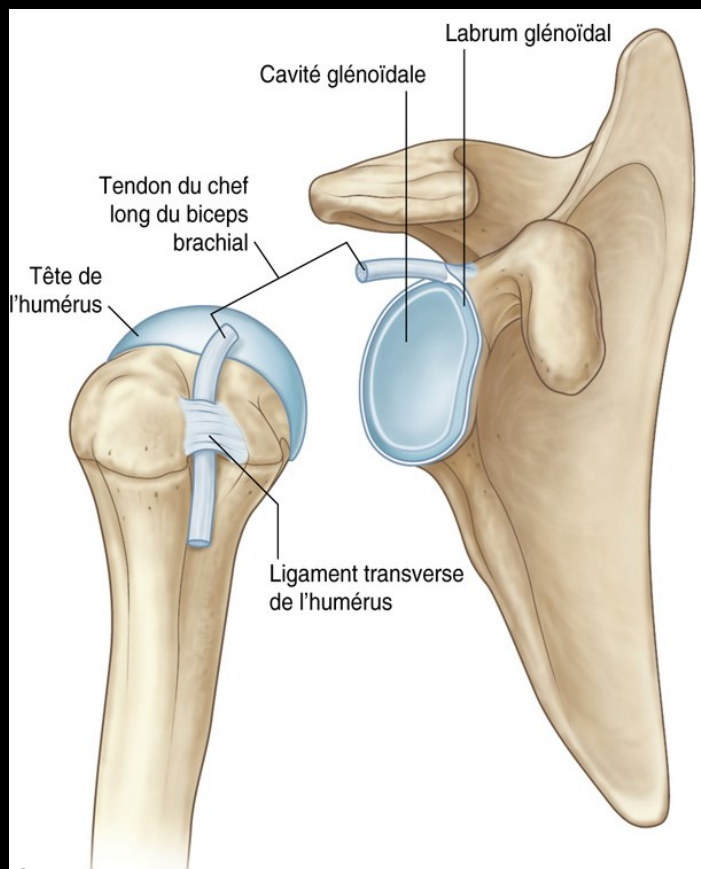
Muscles petit pectoral et dentelé antérieur





Le Labrum

Labrum



SLAP lesions

Superior labrum anterior to posterior



Uppercut test

Se 73%
Sp 78%

Lésions postéro-inférieures



Jerk test

Se 90%
Sp 85%

A person is shown from the back, sitting in a meditative pose (Padmasana) on a light-colored floor. They are wearing a dark grey sports bra and patterned leggings with a black waistband. Their hands are pressed together in a prayer position (Anjali Mudra) at chest level. The background is a plain, light-colored wall. The word "Laxité" is written in white, italicized font across the person's back.

Laxité

Mesure de la capacité
du système capsulo-ligamentaire
à se laisser étirer passivement

Laxité

**Indépendant
des symptômes**

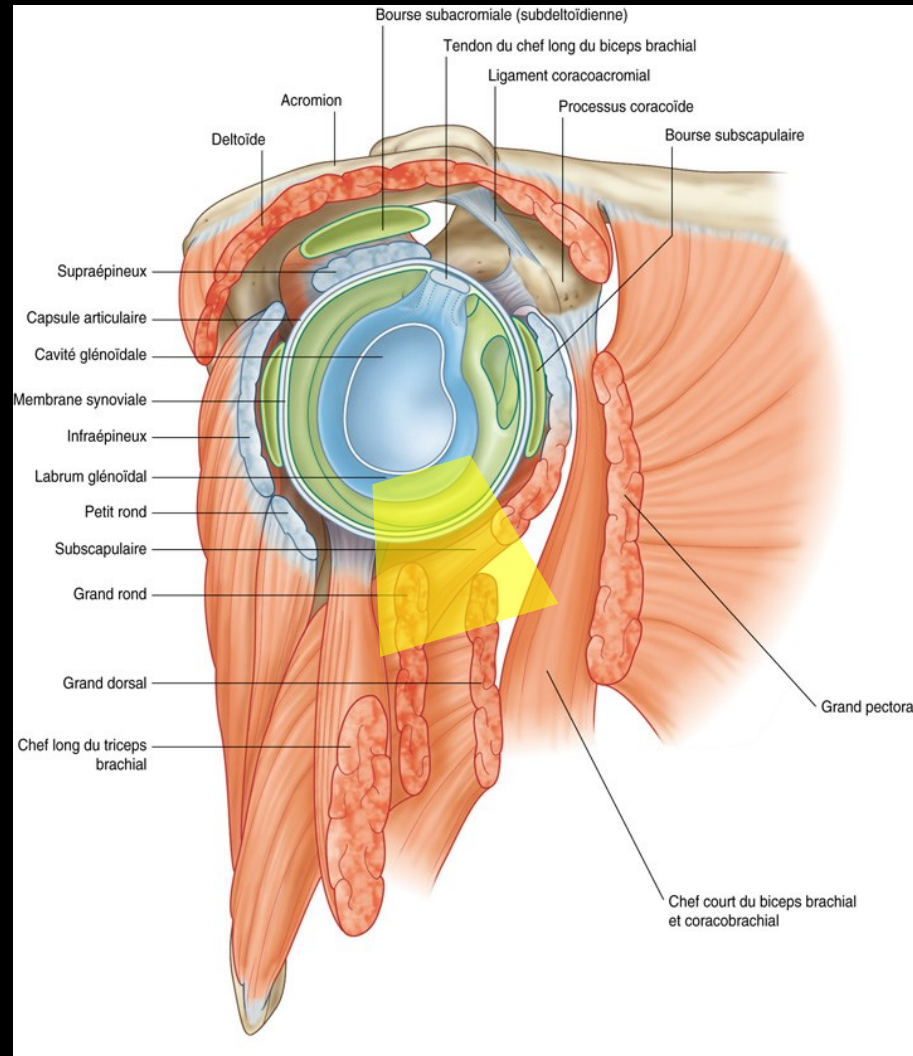
Capsule et ligaments ↔ Mécanorecepteurs articulaires capsulo-ligamentaires

Instabilité

Symptôme = subjectif

**Douleur
Appréhension**

Système capsulo-ligamentaire



Laxité antérieure et postérieure

25% du \emptyset de la tête
humérale en avant
50% du \emptyset en
arrière...

Tiroir



Se 38%
Sp 89%

Laxité inférieure

> 105°



Test de Gagey

Se 46%
Sp 38%



Instabilité

Instabilité antérieure



Test d'appréhension

Se 66%
Sp 95%

Instabilité antérieure



Relocation test

Cluster

Se 65%

Sp 90%

Se 81%

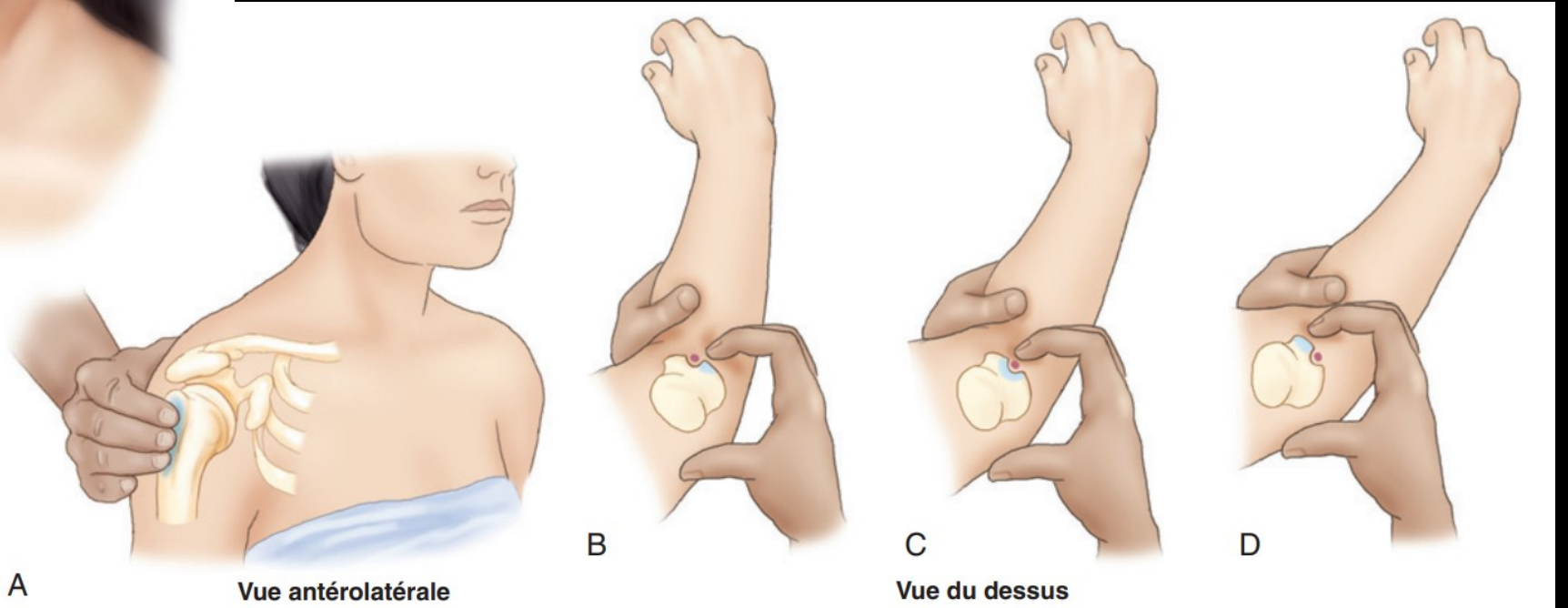
Sp 98%

CE SERAIT
PLUTÔT LÀ ?

Palpation

OUAÏLE!

Os



A

Vue antérolatérale

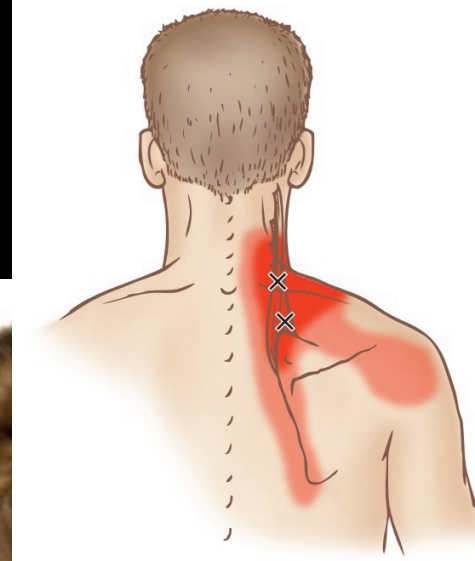
B

C

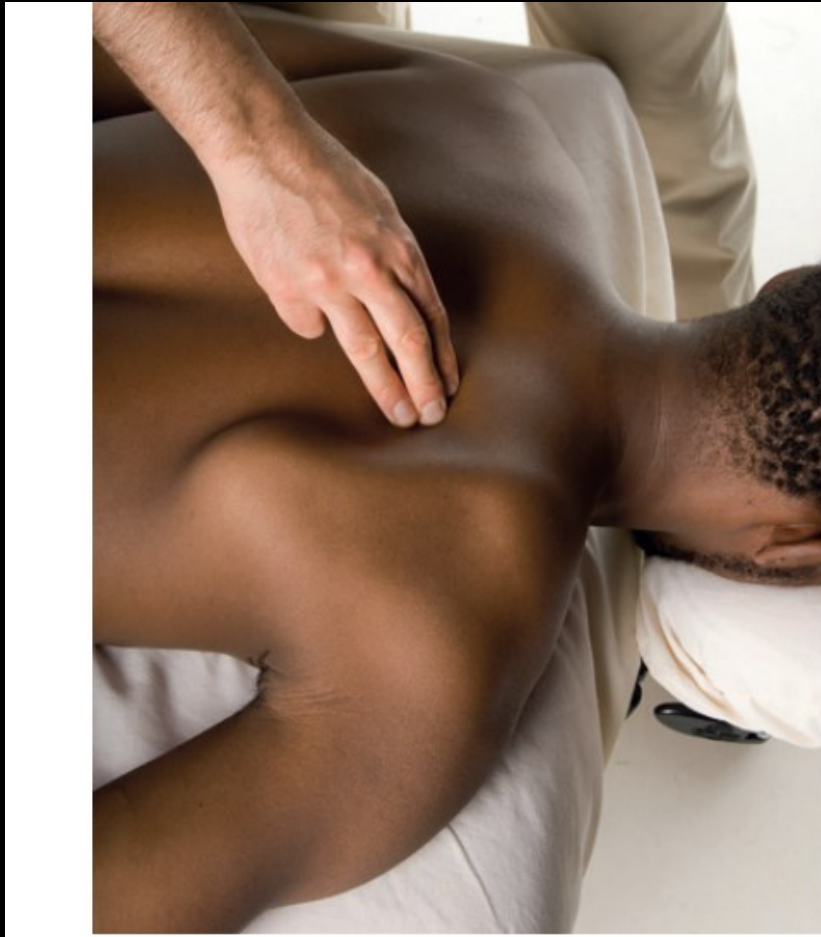
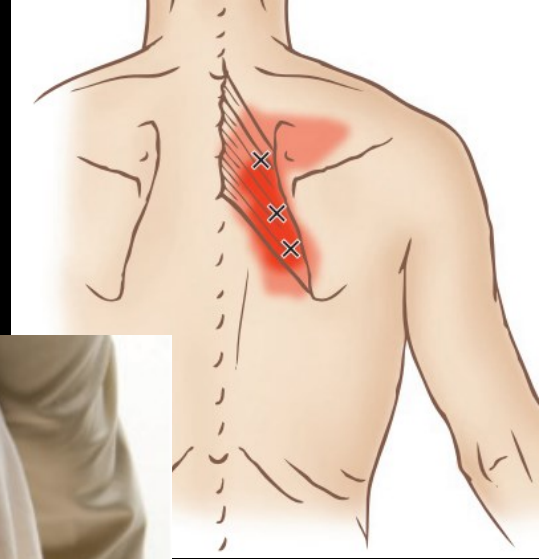
Vue du dessus

D

Muscle élévateur de la scapula



Muscles rhomboïdes



Muscle supra-épineux



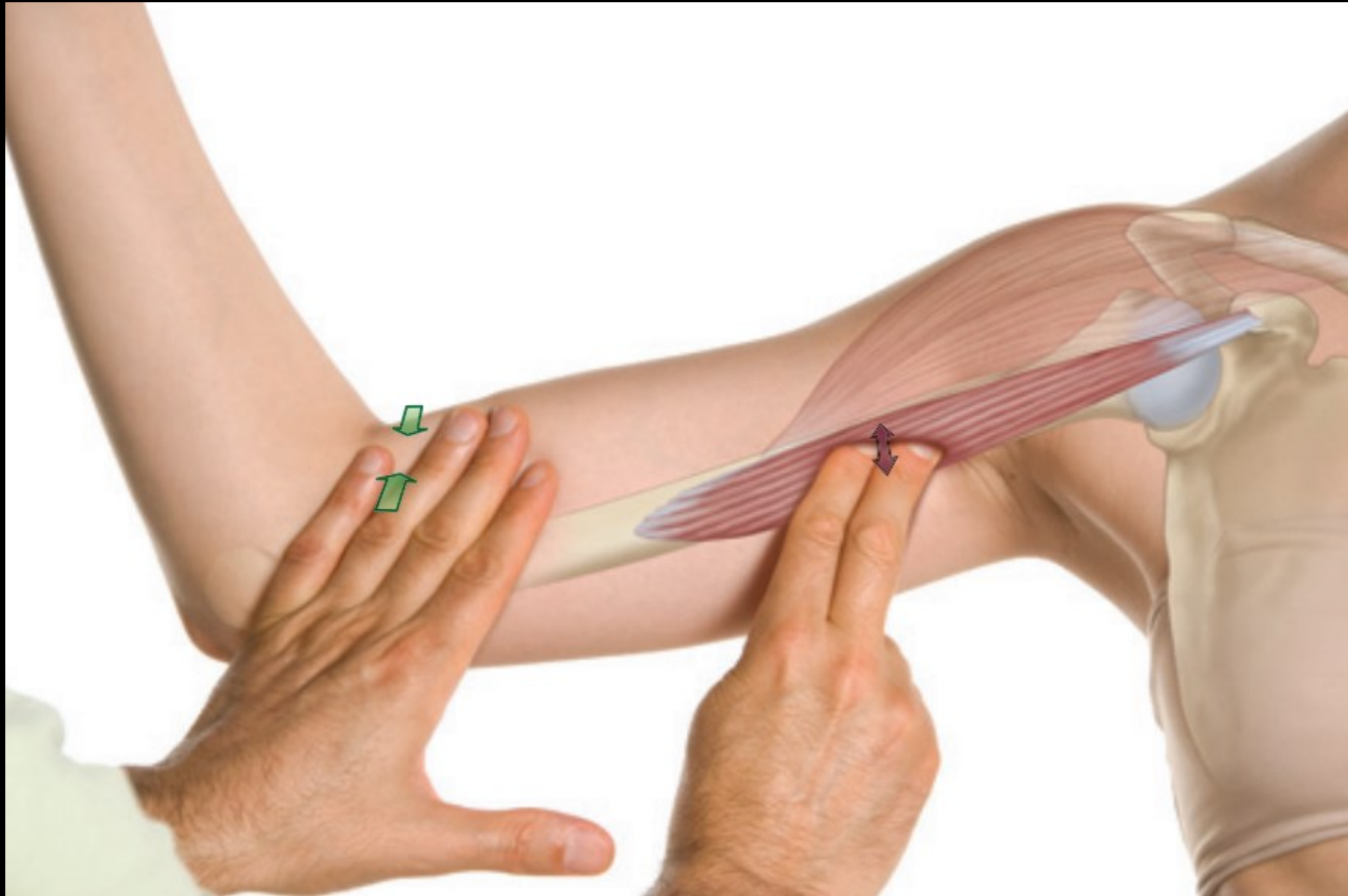
Muscle subscapulaire



Muscle petit pectoral



Muscle coraco-brachial



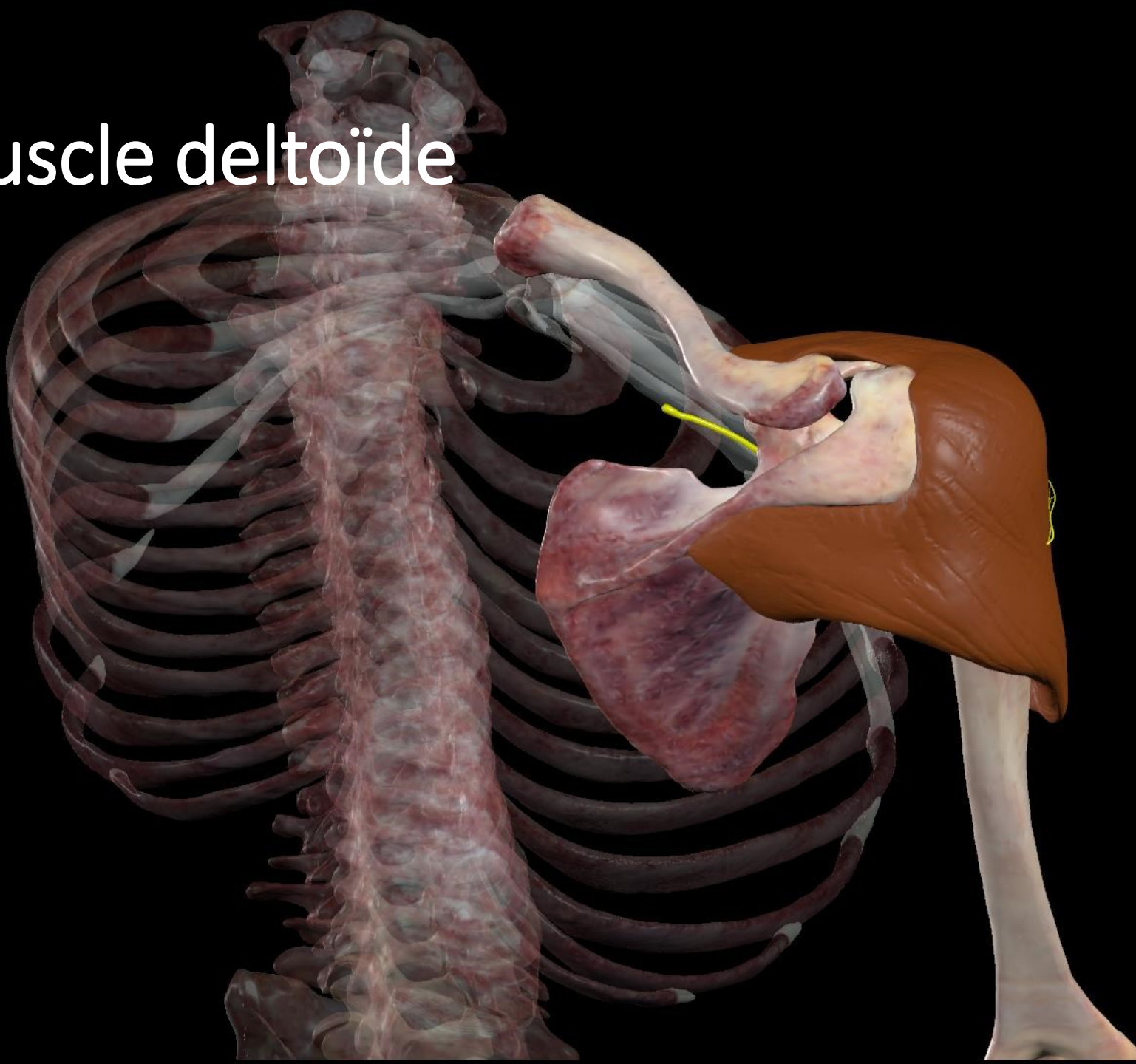
The End?



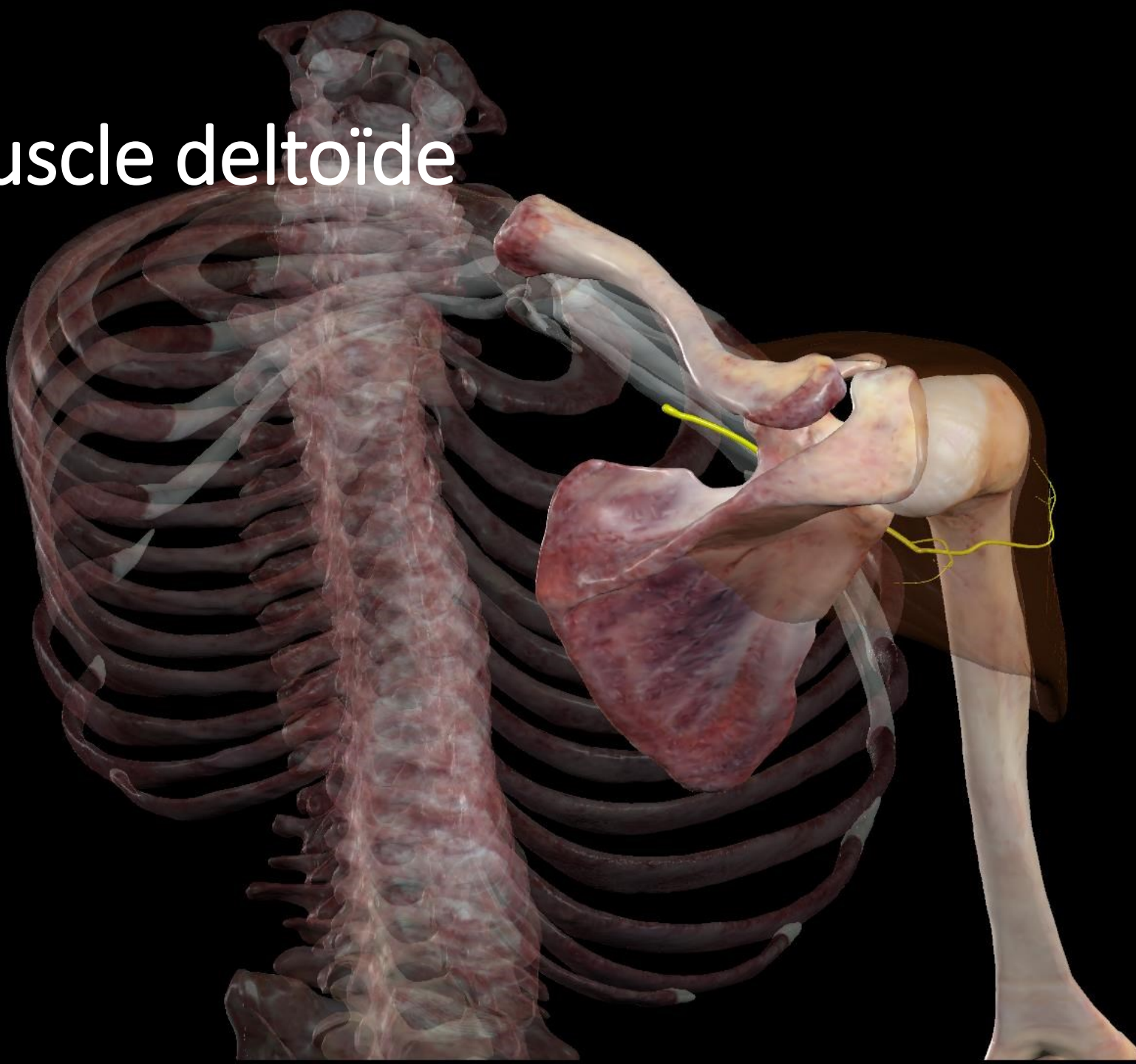
A photograph of a very muscular man, likely a bodybuilder, posing to show his shoulder muscles. He is shirtless and has a very low body fat percentage, making his muscles extremely defined. He is looking directly at the camera with a neutral expression. The background is a plain, light-colored wall. The text "Muscles de l'épaule" is overlaid on the image in a white, italicized font.

Muscles de l'épaule

Muscle deltoïde

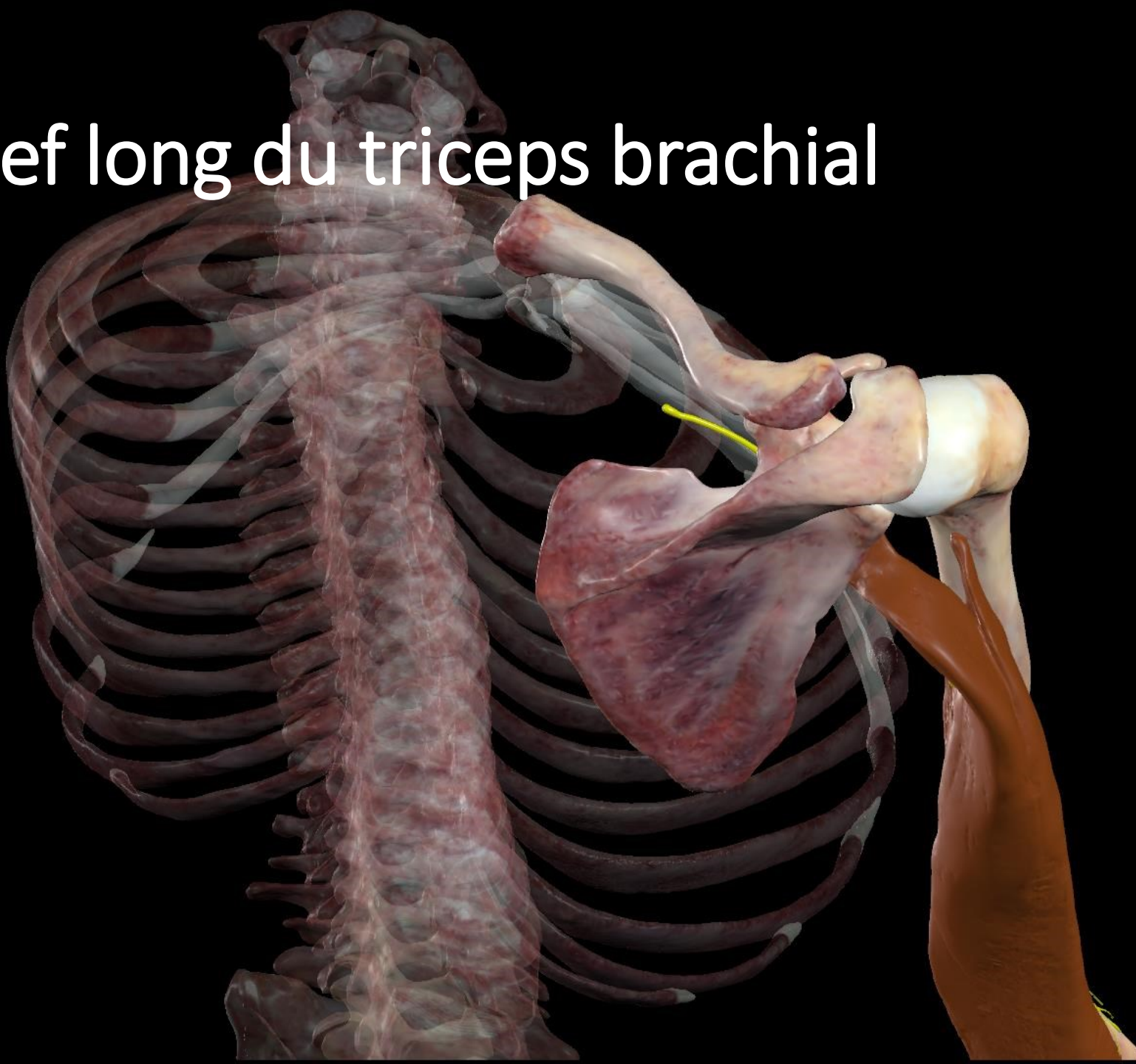


Muscle deltoïde

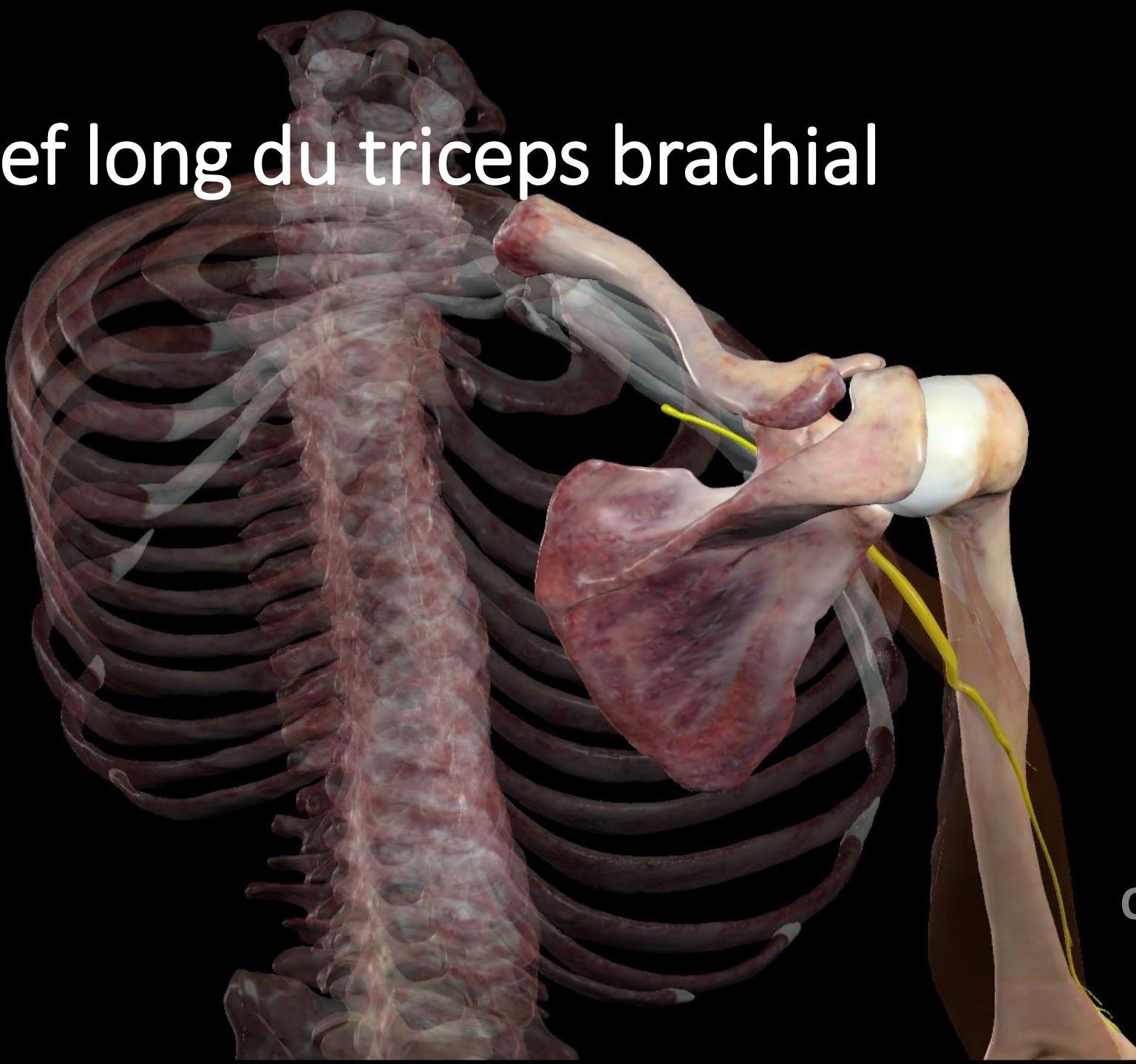


**Nerf Axillaire
C5-C6**

Chef long du triceps brachial

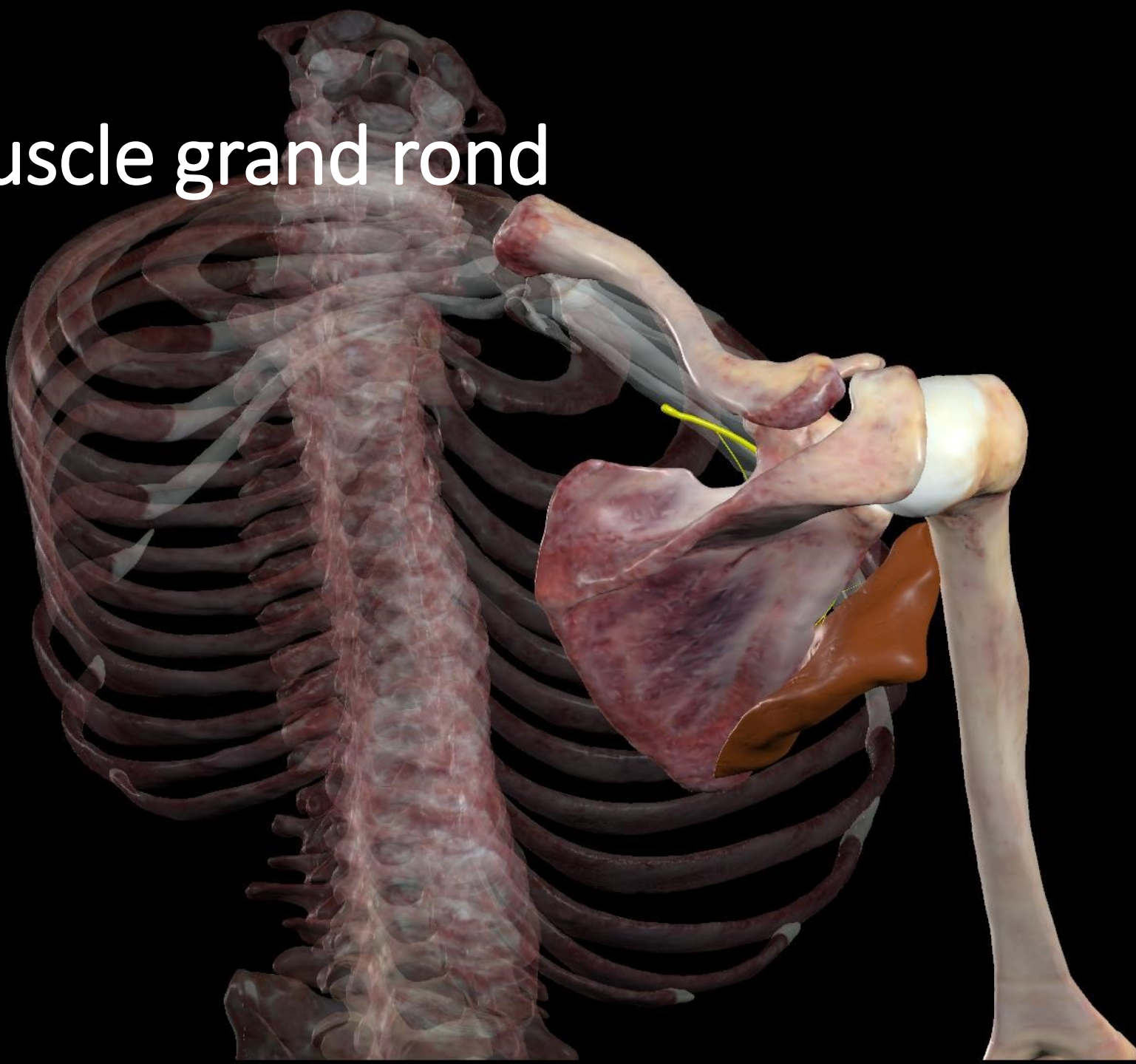


Chef long du triceps brachial

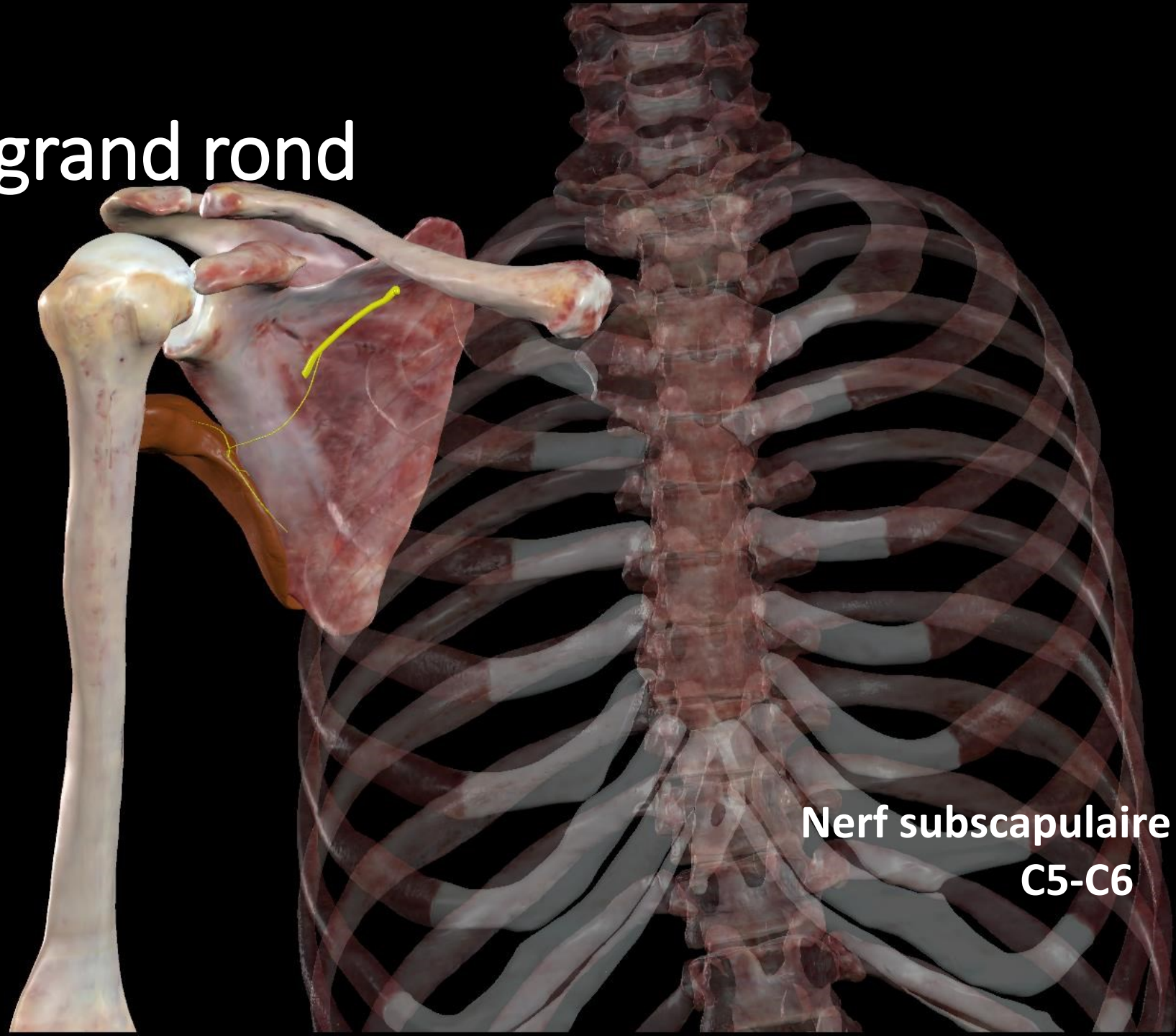


Nerf Radial
C5-C6-C7-C8-Th1

Muscle grand rond



Muscle grand rond

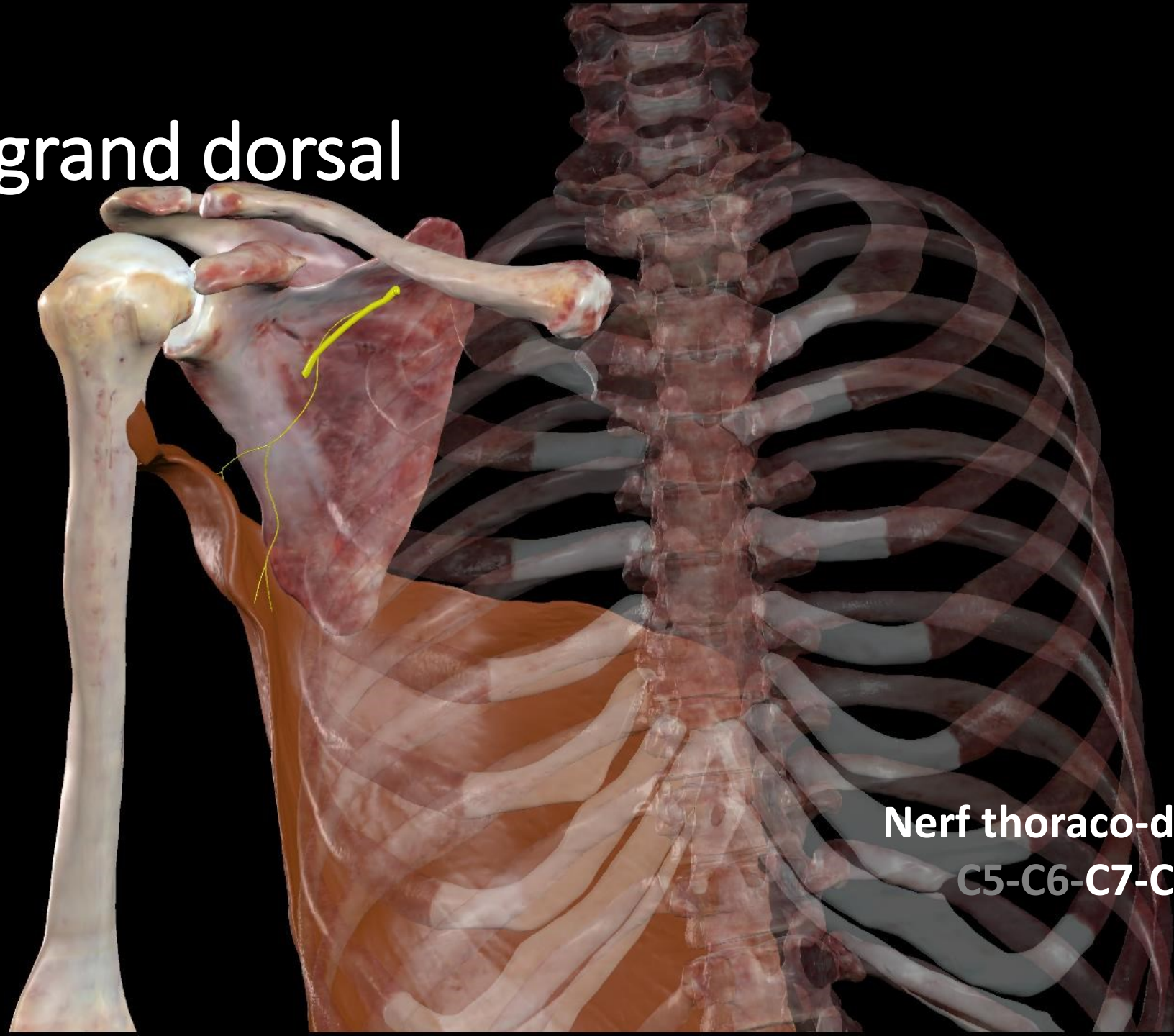


Nerf subscapulaire inférieur
C5-C6

Muscle grand dorsal

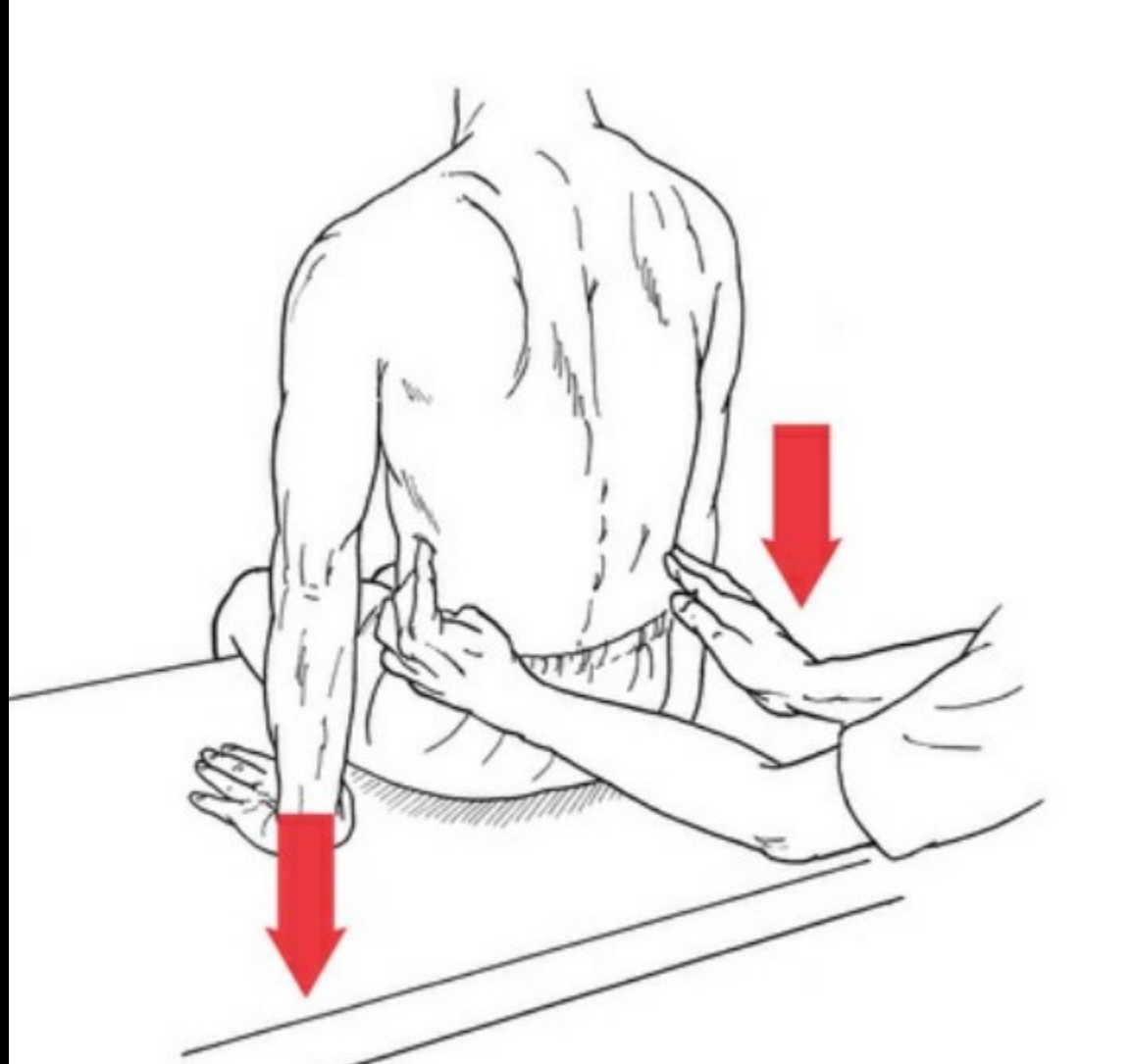


Muscle grand dorsal

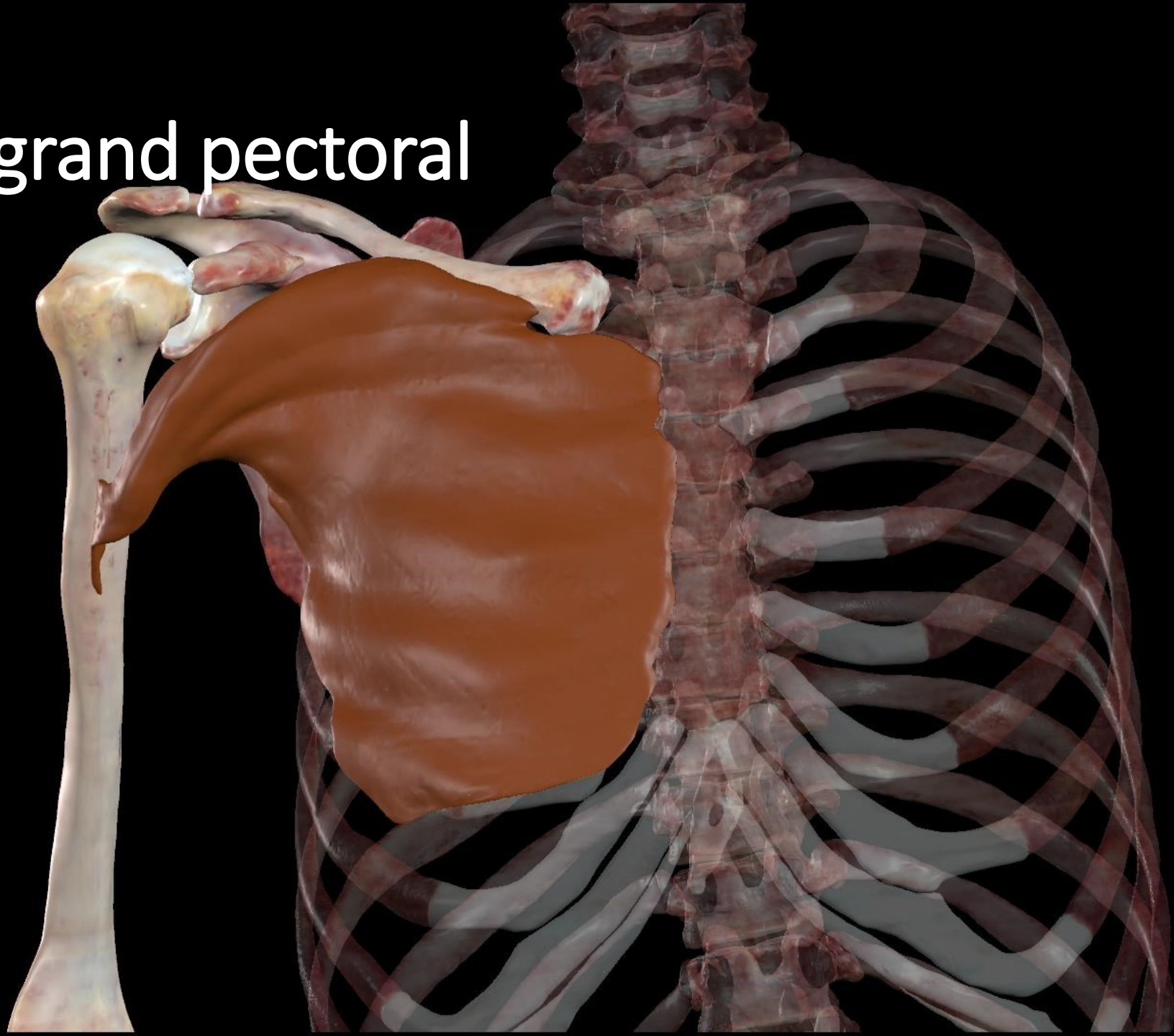


Nerf thoraco-dorsal
C5-C6-C7-C8

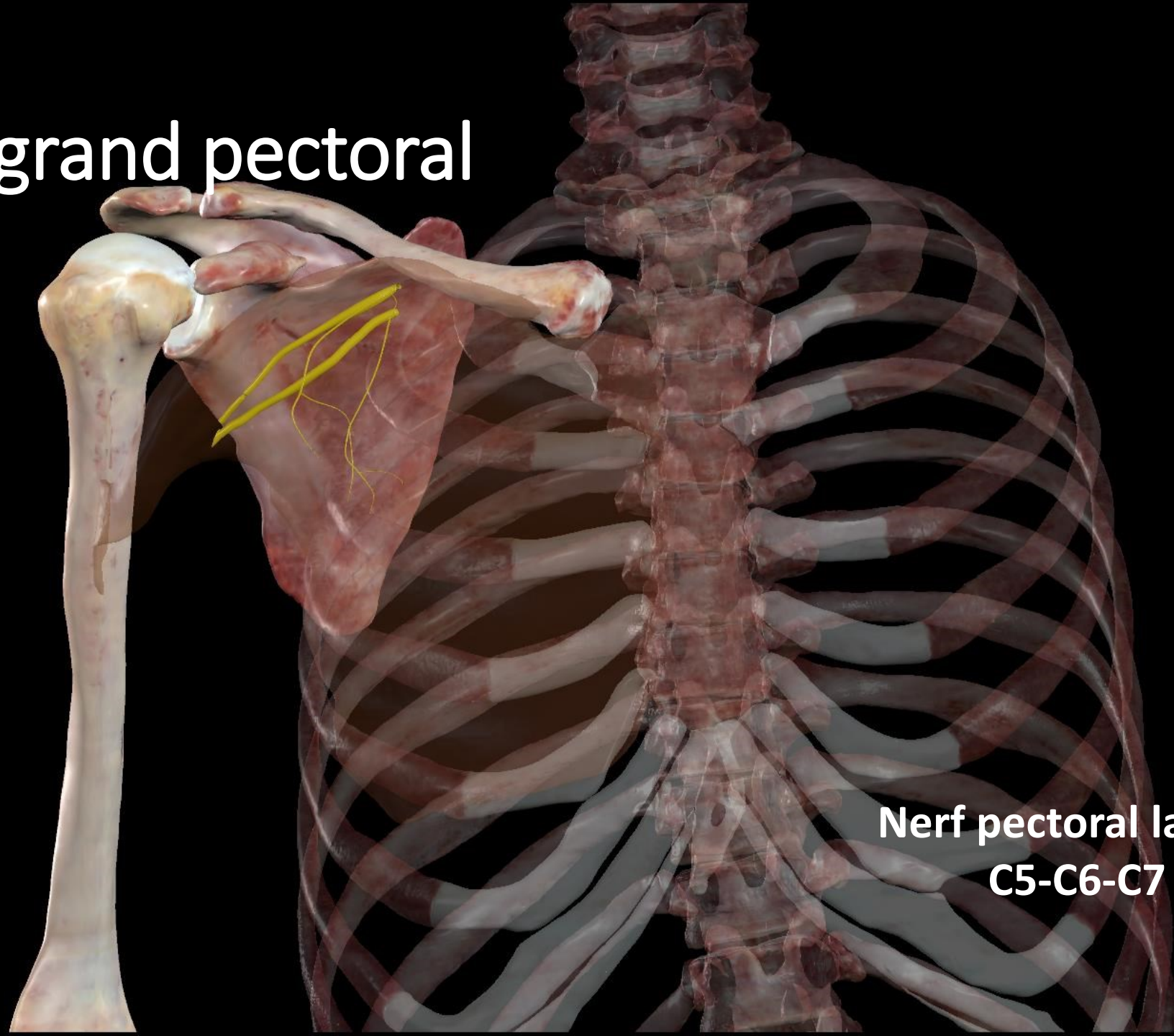
Muscle grand dorsal



Muscle grand pectoral



Muscle grand pectoral



Nerf pectoral latéral
C5-C6-C7

Plexus brachial

C6
C7
C8
T1

Innervation de l'épaule

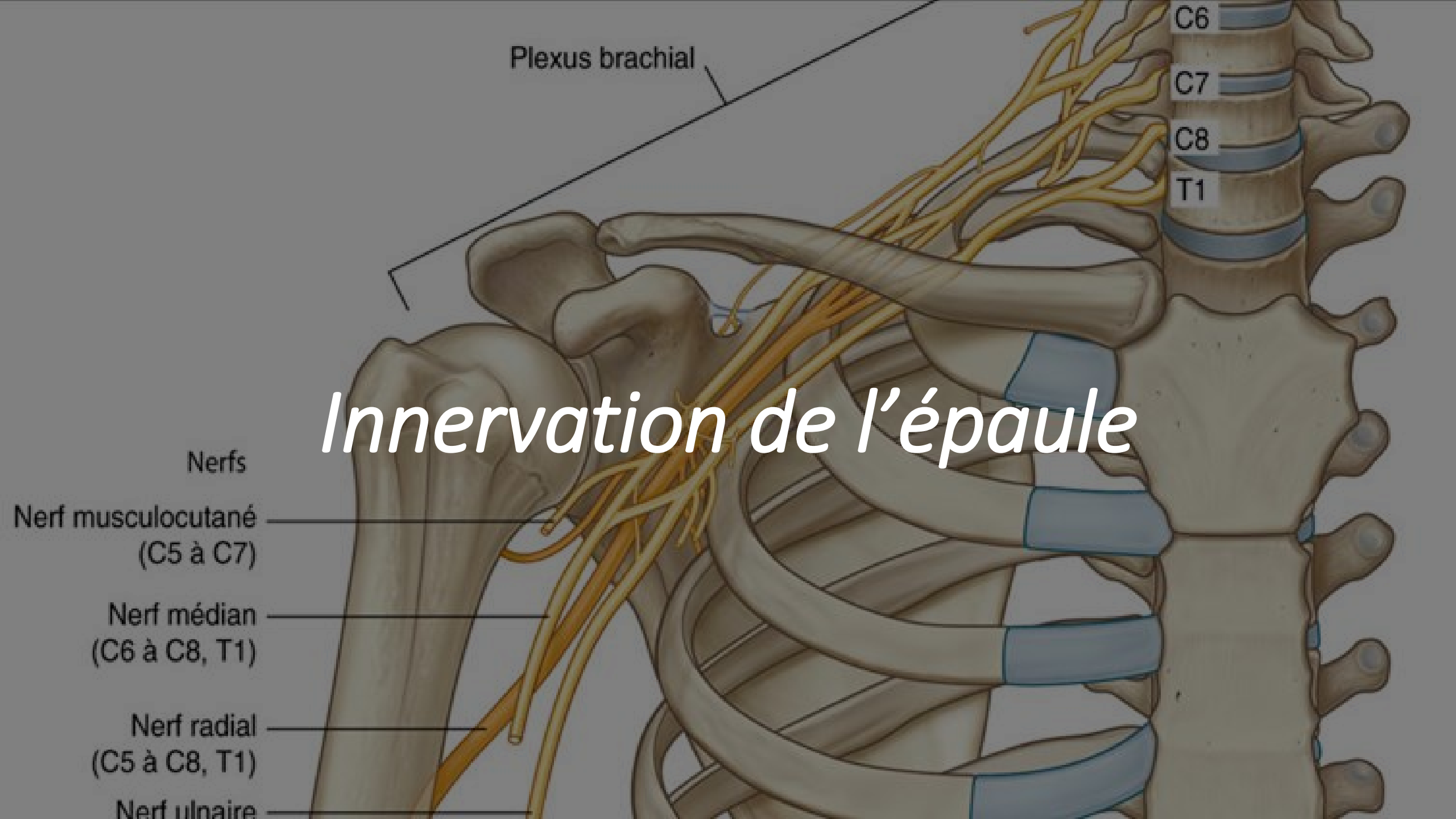
Nerfs

Nerf musculocutané
(C5 à C7)

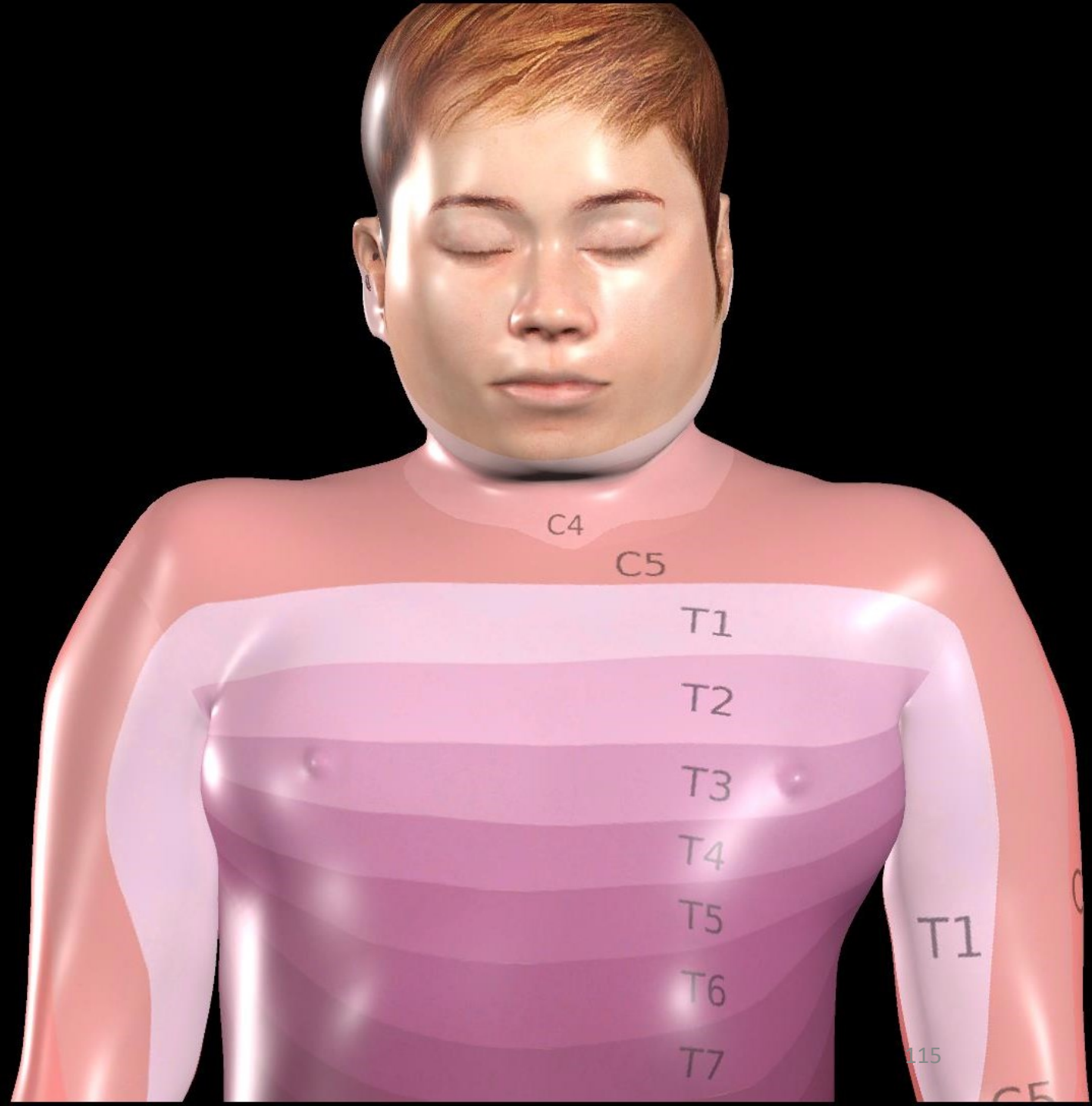
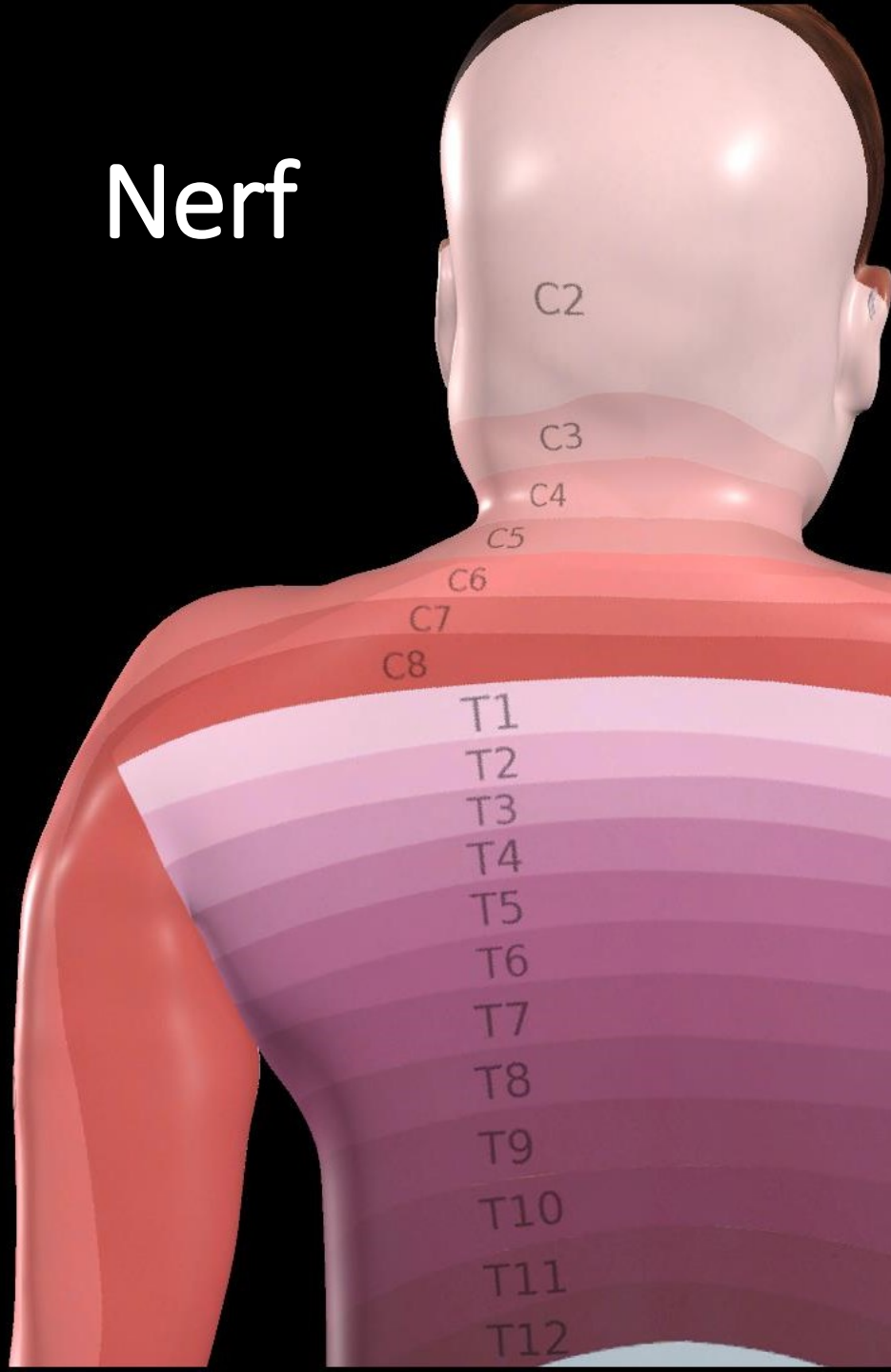
Nerf médian
(C6 à C8, T1)

Nerf radial
(C5 à C8, T1)

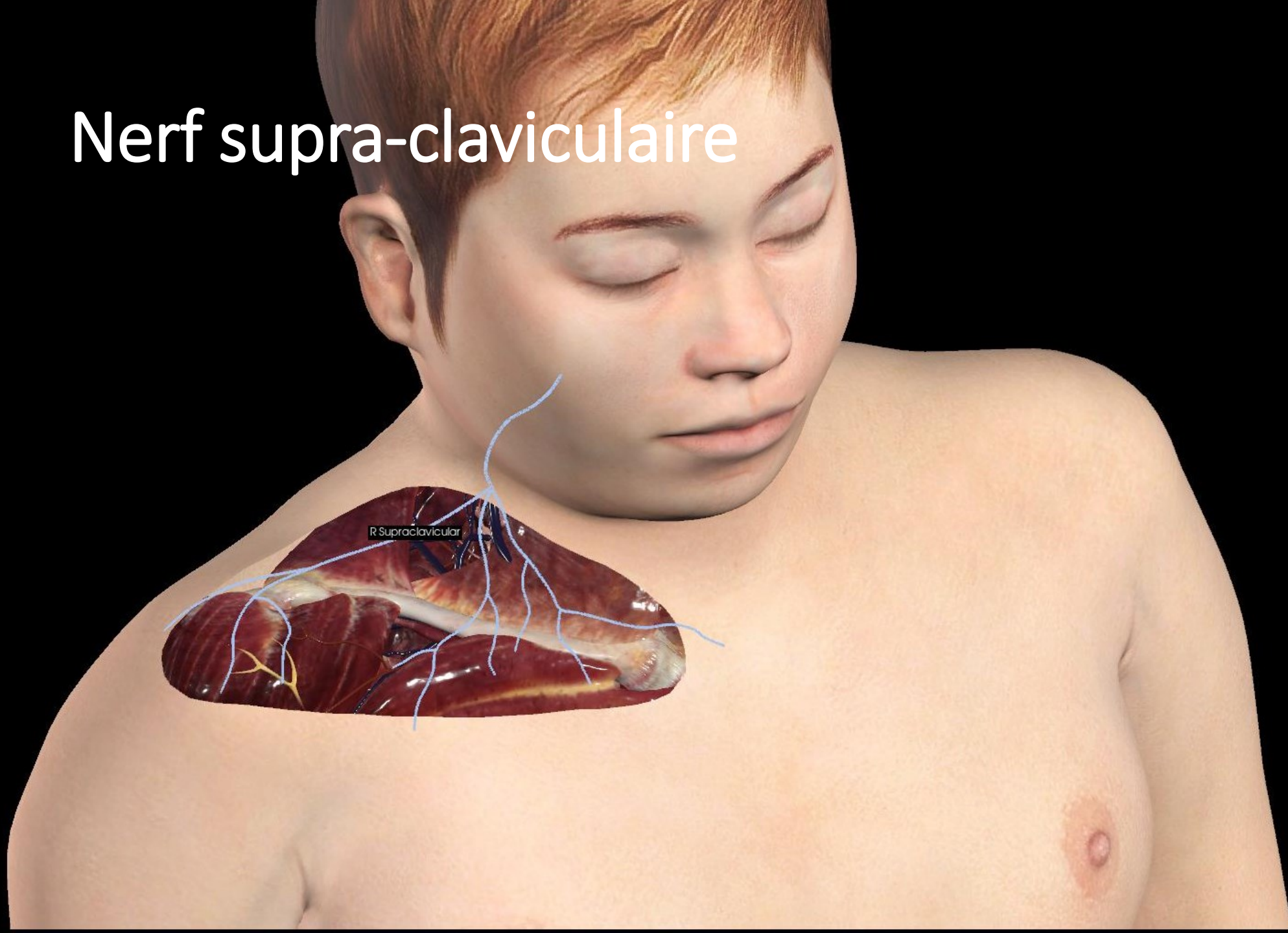
Nerf ulnaire



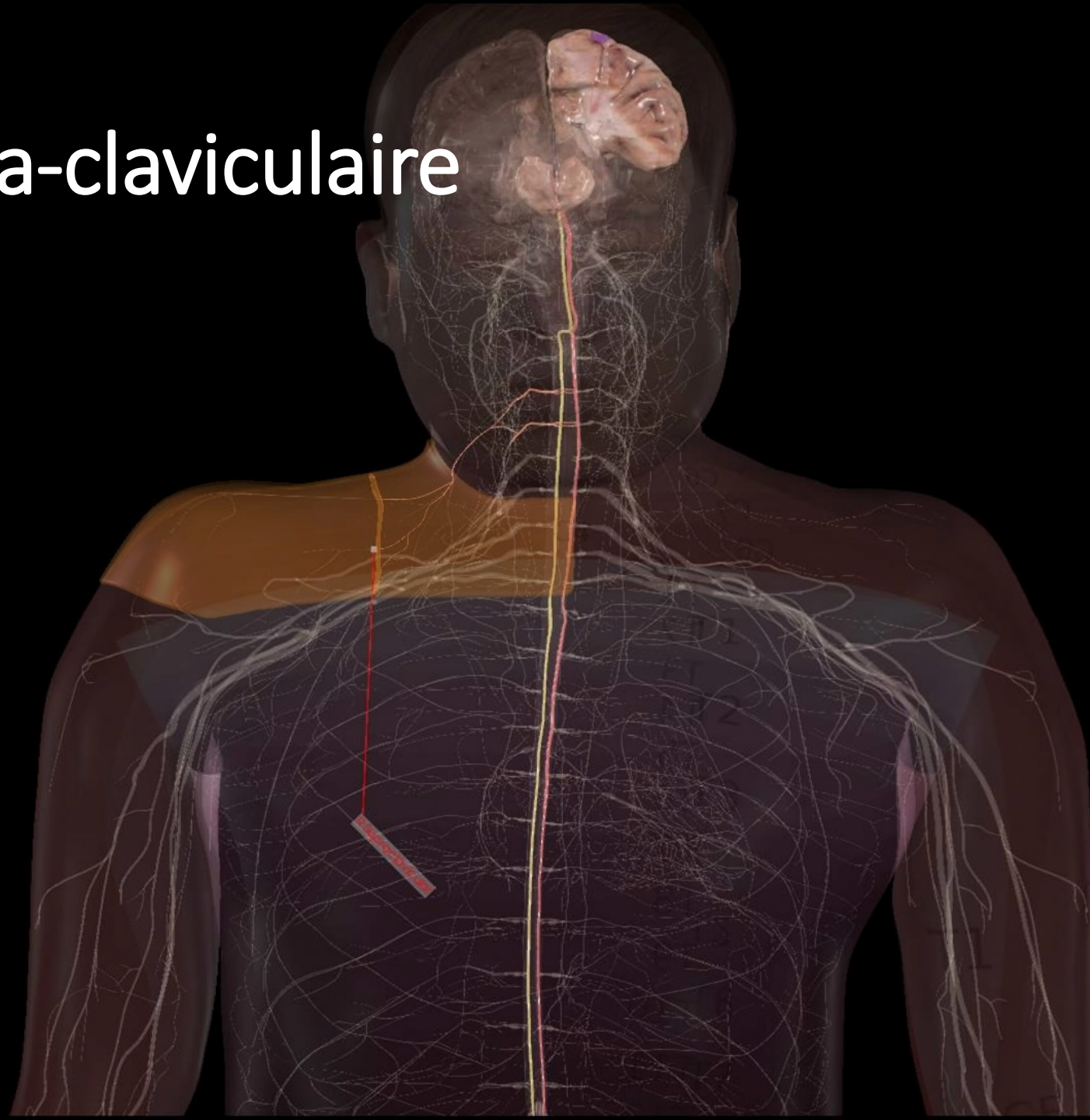
Nerf



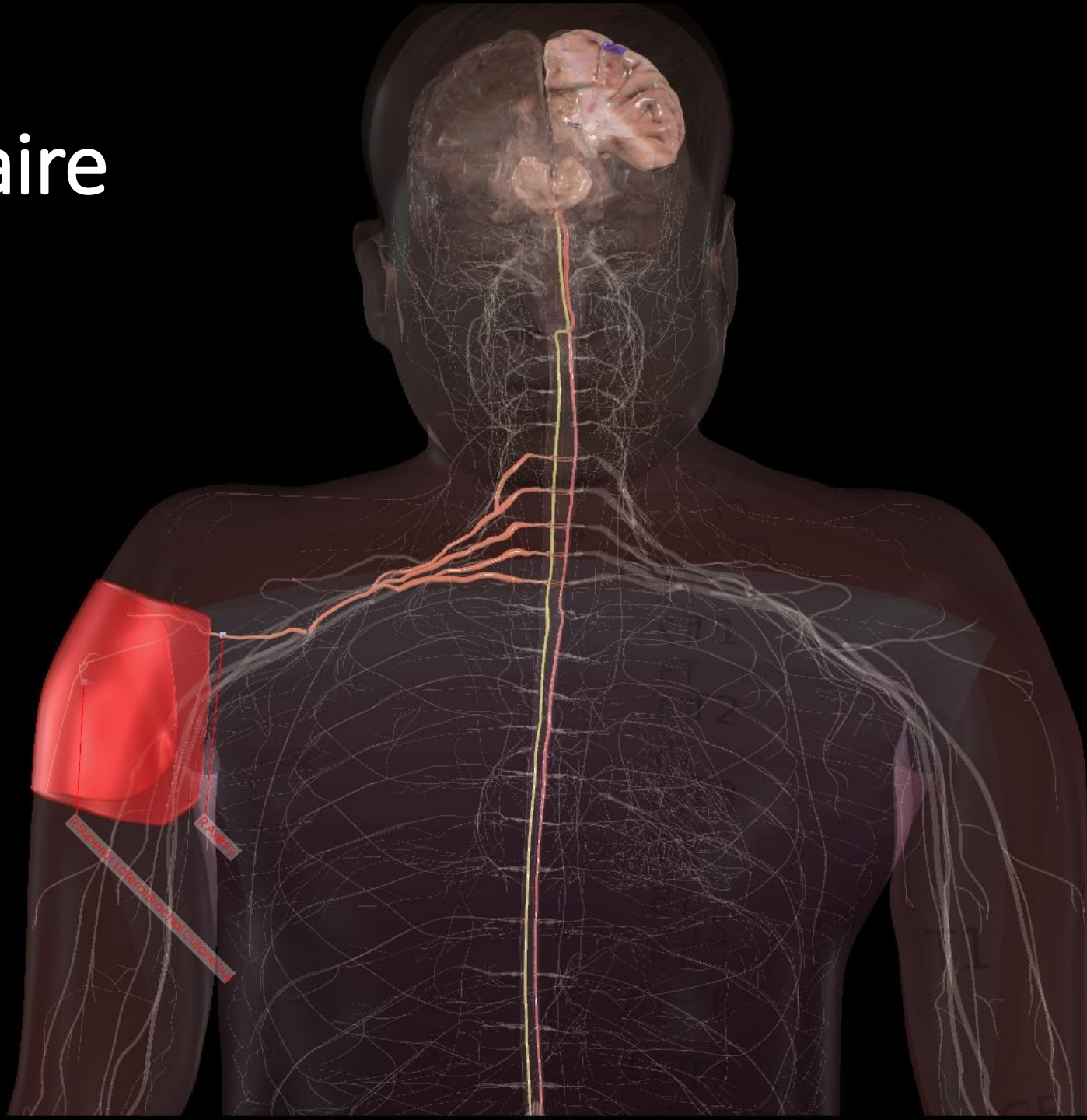
Nerf supra-claviculaire



Nerf supra-claviculaire

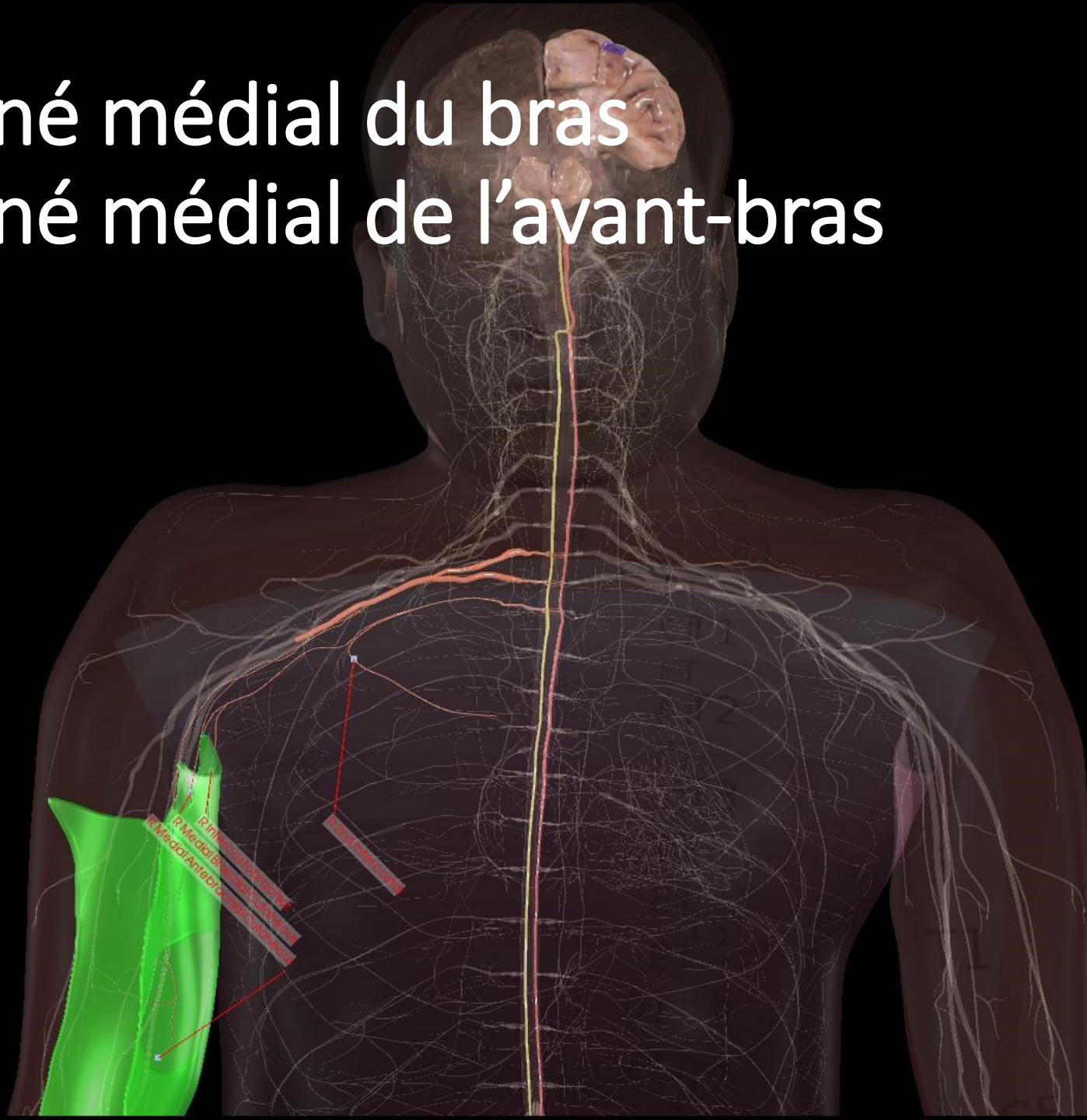


Nerf axillaire

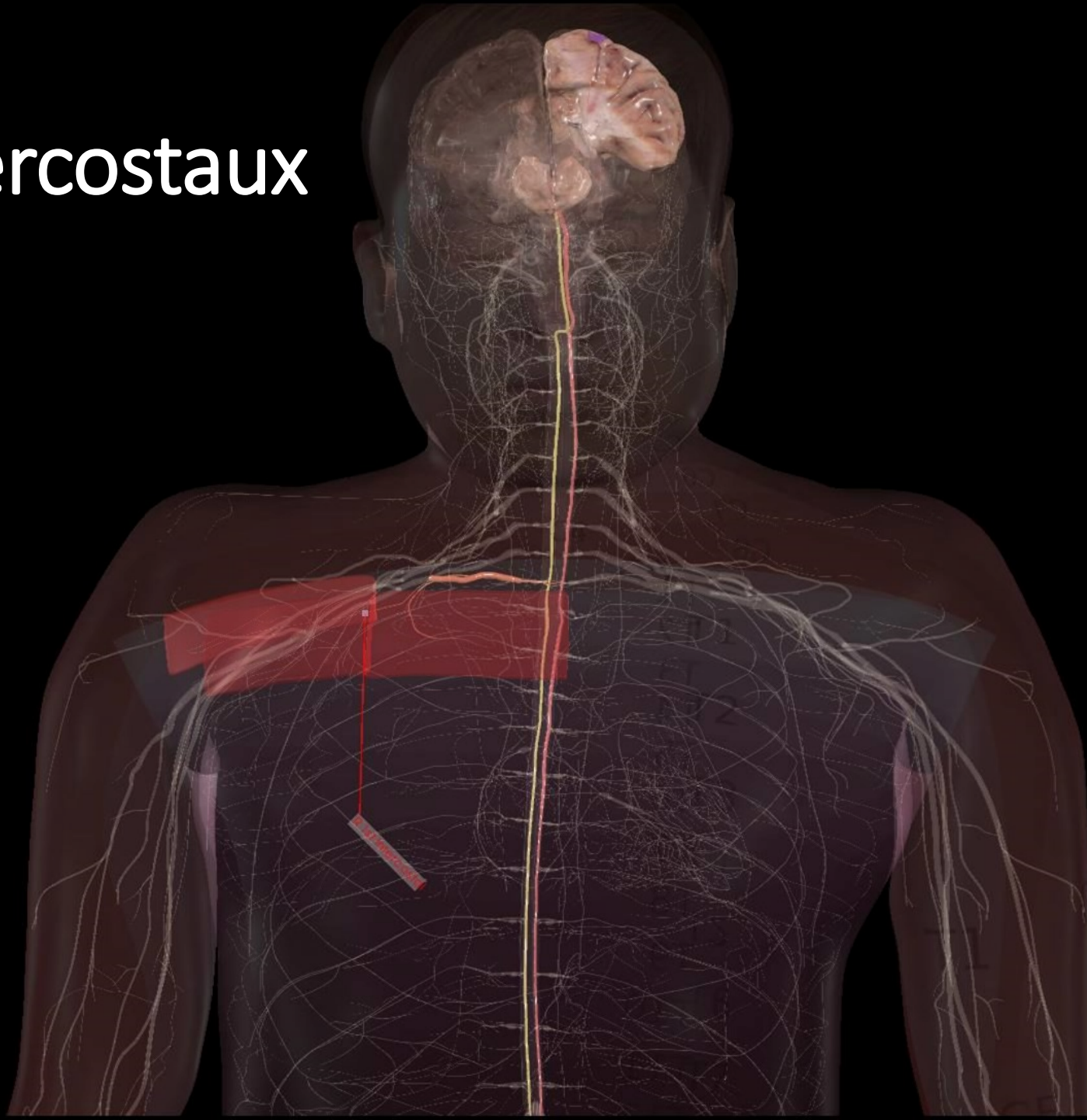


Nerf cutané médial du bras

Nerf cutané médial de l'avant-bras



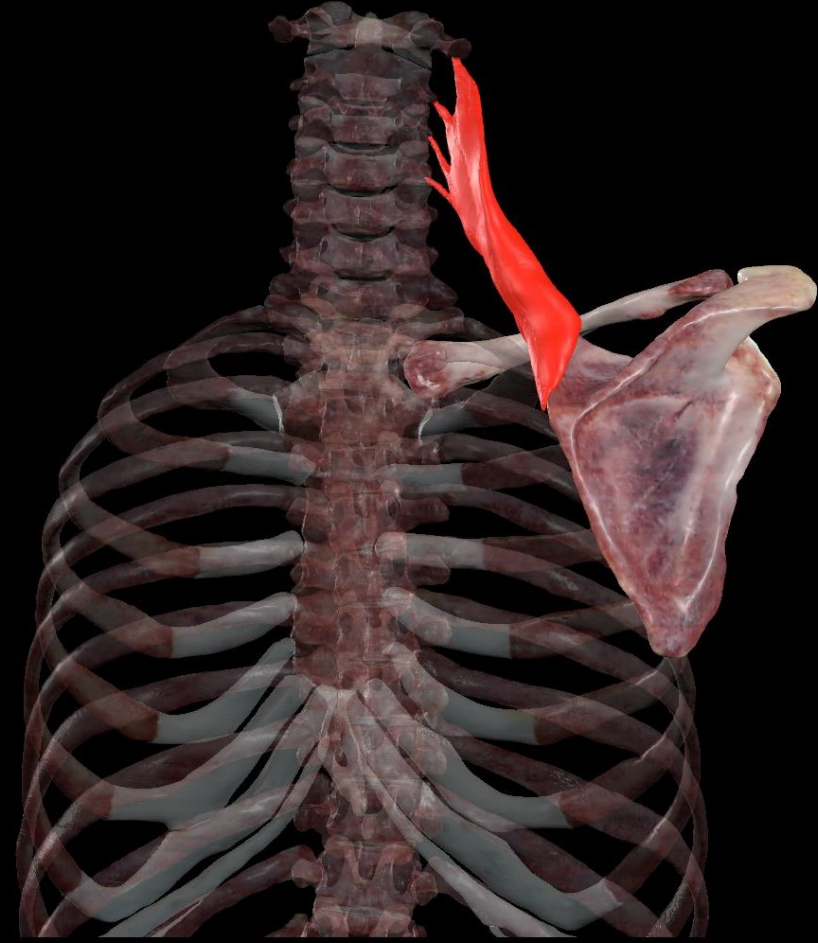
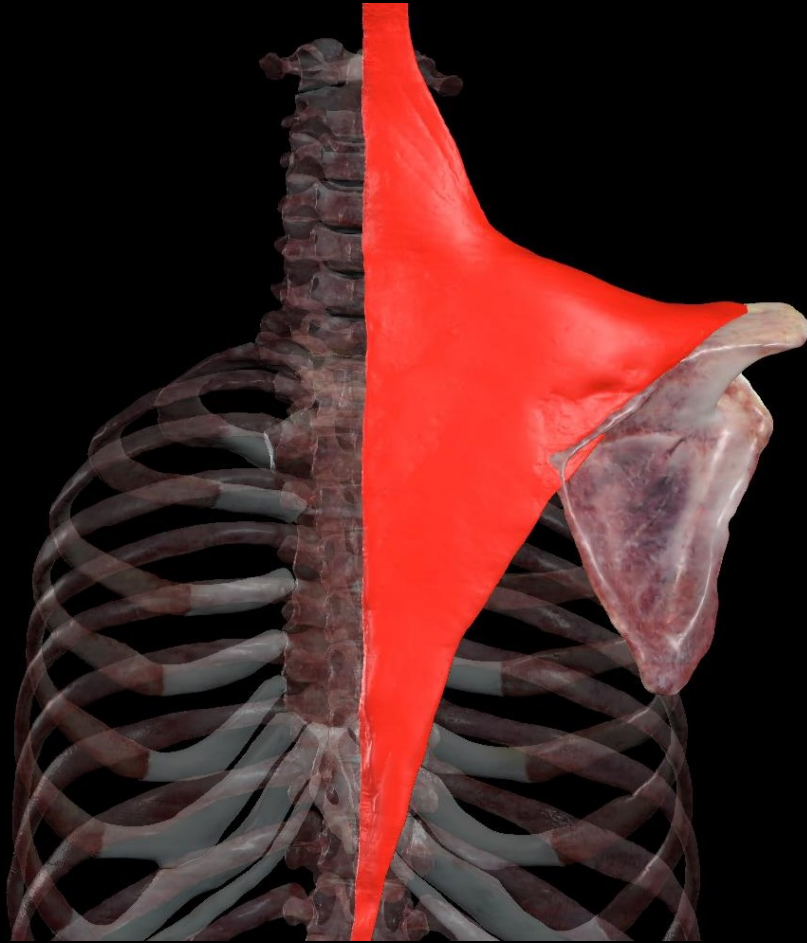
Nerfs intercostaux



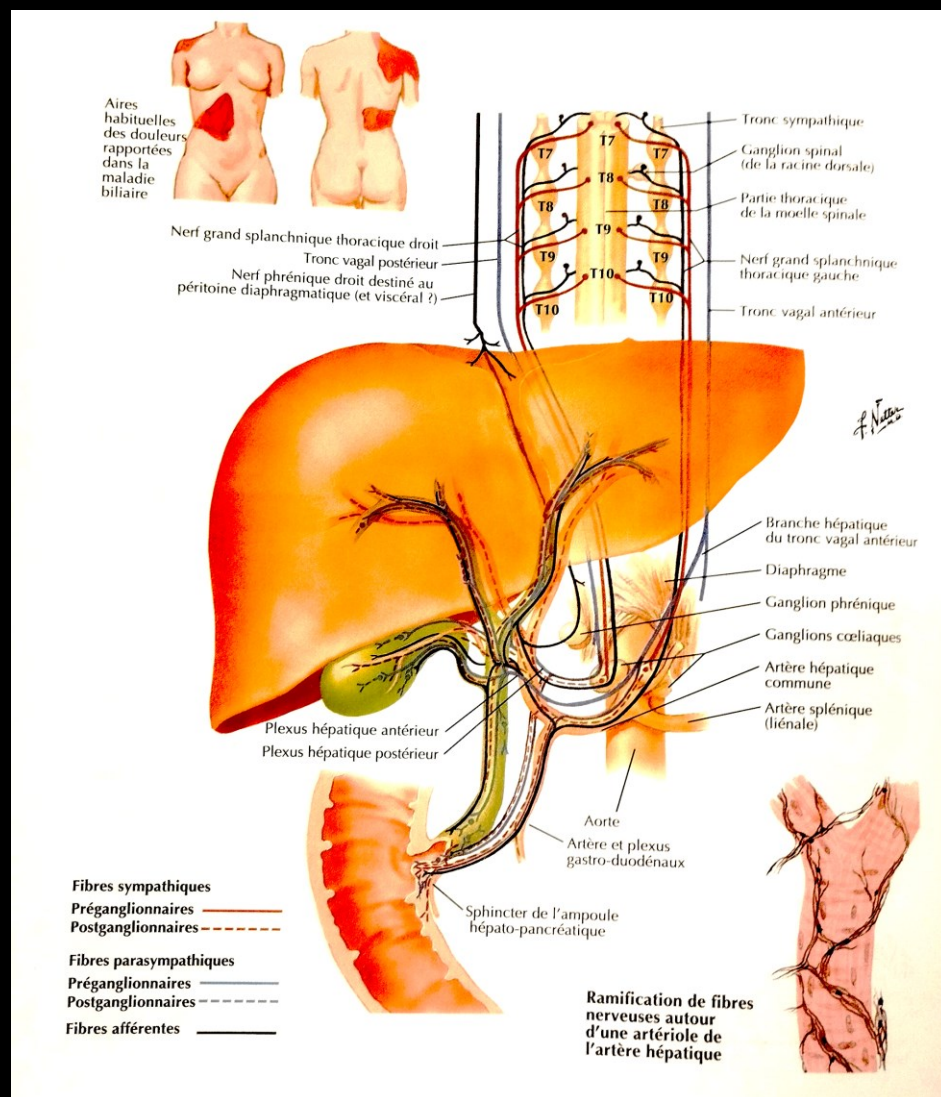
A close-up photograph of a metal bear trap. The trap is circular with a serrated, spiked edge. Inside the trap, there is a rectangular piece of brown leather. A metal spring mechanism is visible on the right side, connected to a chain. The trap is set on a light-colored surface, and its shadow is cast to the left.

Pièges

Rachis cervical et thoracique

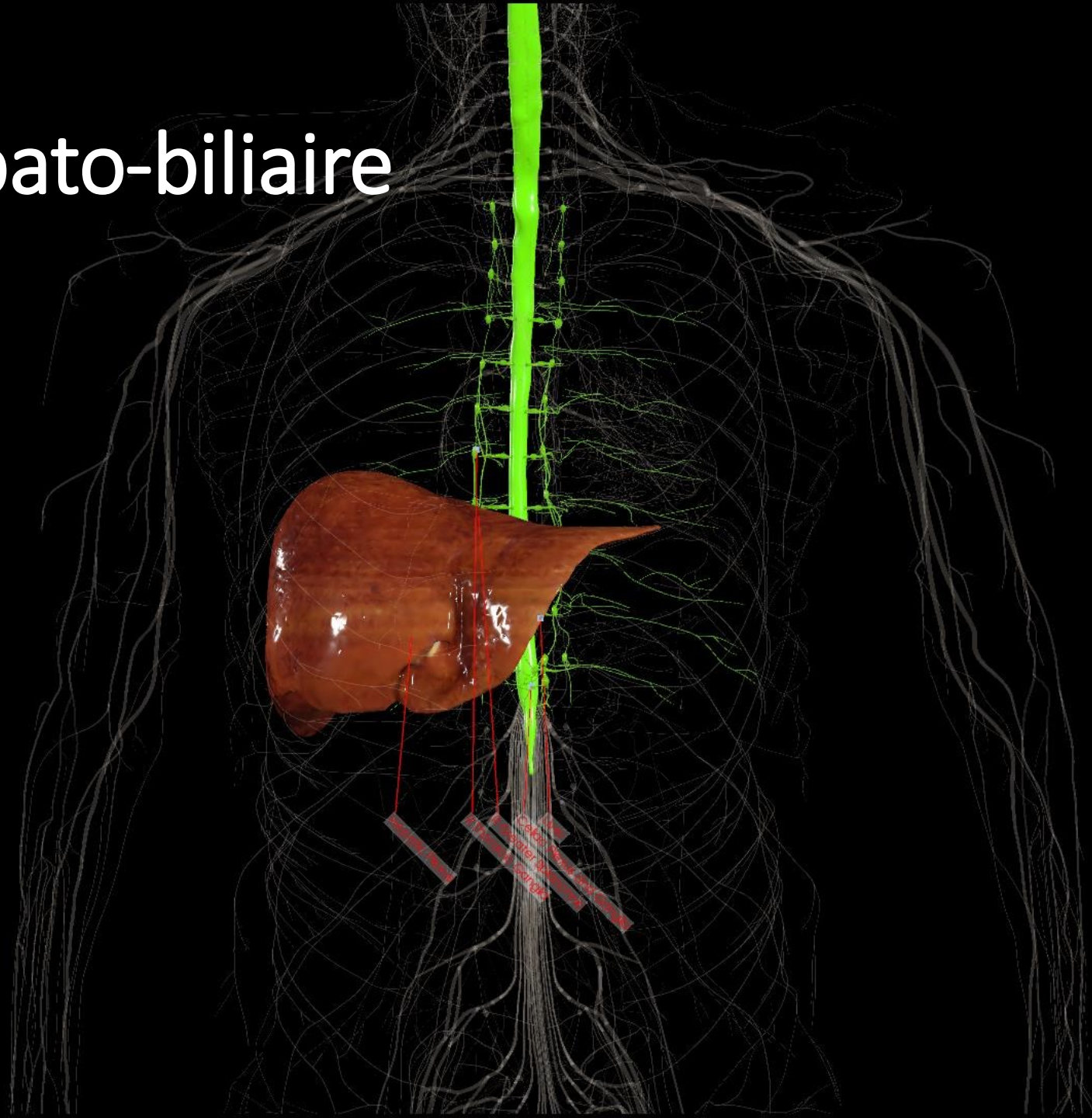


Douleur hépato-biliaire

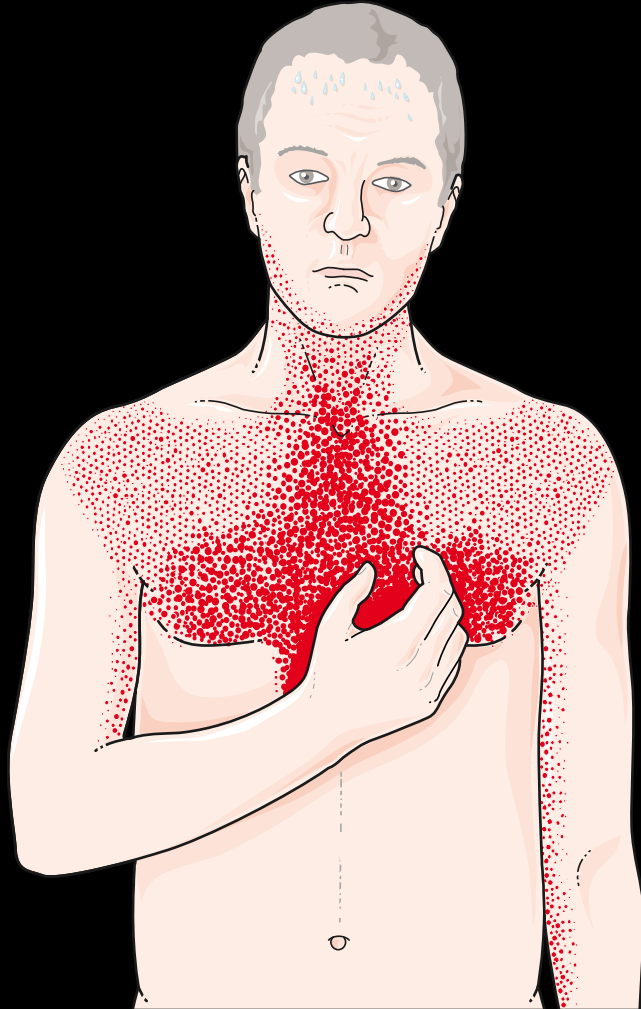


« L'acromioplastie ne traite pas le cancer de la tête du pancréas ... »

Douleur hépato-biliaire

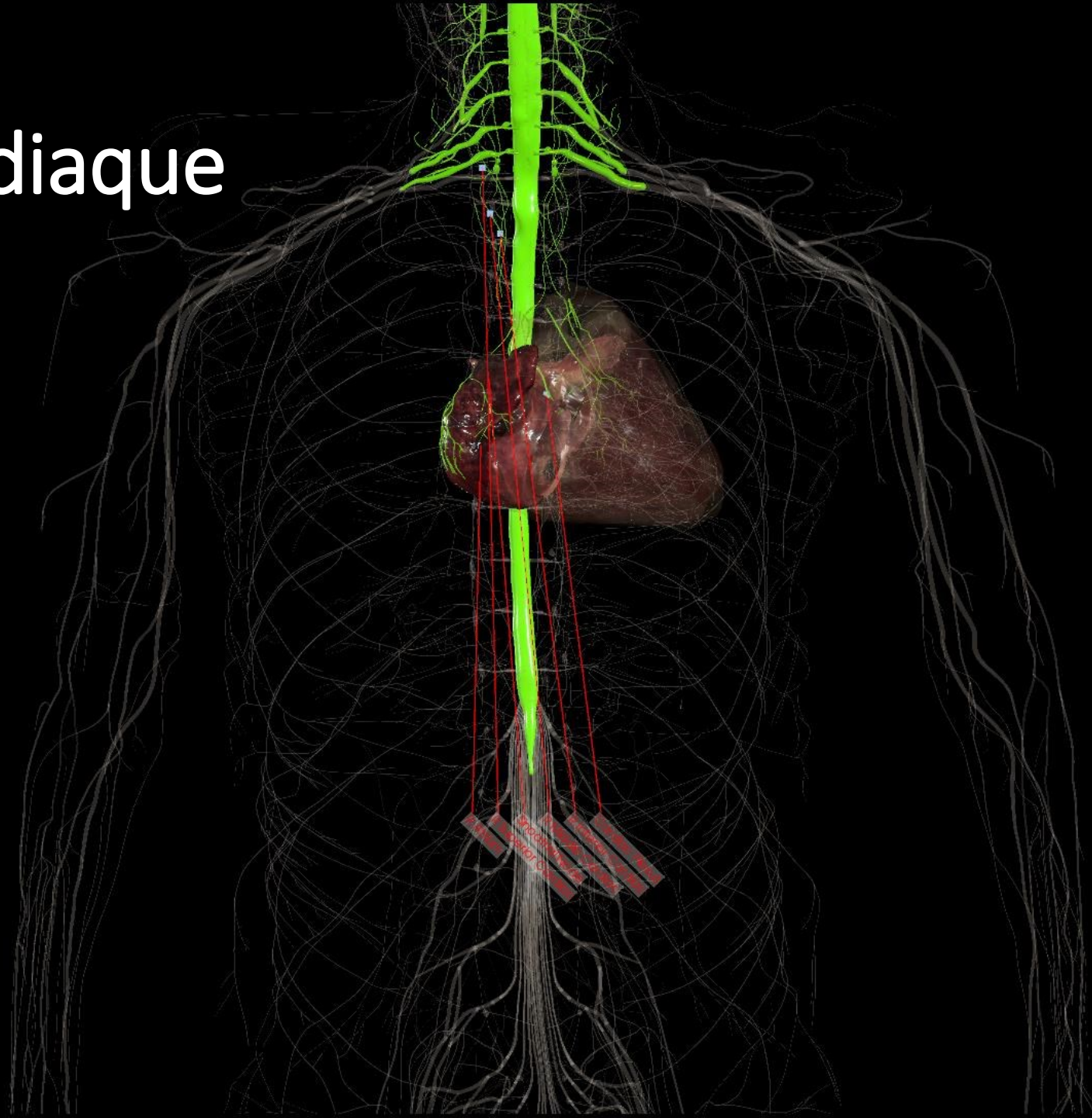


Douleur cardiaque



« ni la coronaropathie... »

Douleur cardiaque



Thorax



« ni la tumeur de l'apex
pulmonaire... »

Thorax





Conclusion

Inspection

Amyotrophie / Ecchymose / Tuméfaction / Déformation

Mobilités

Scapulo-humérales / Globales / Rythme scapulaire

Conflits

Antéro-latéral / Antéro-médial / Postérieur

« Testing » de coiffe

Supra-épineux / Infra-épineux Petit rond / Subscapulaire + LB

Racine du MS

Trapèze / Elev de S. / Rhomboïdes / Petit pectoral / Dentelé A

Labrum

SLAP / Labrum postérieur

Laxité

Antérieure / Postérieure / Inférieure

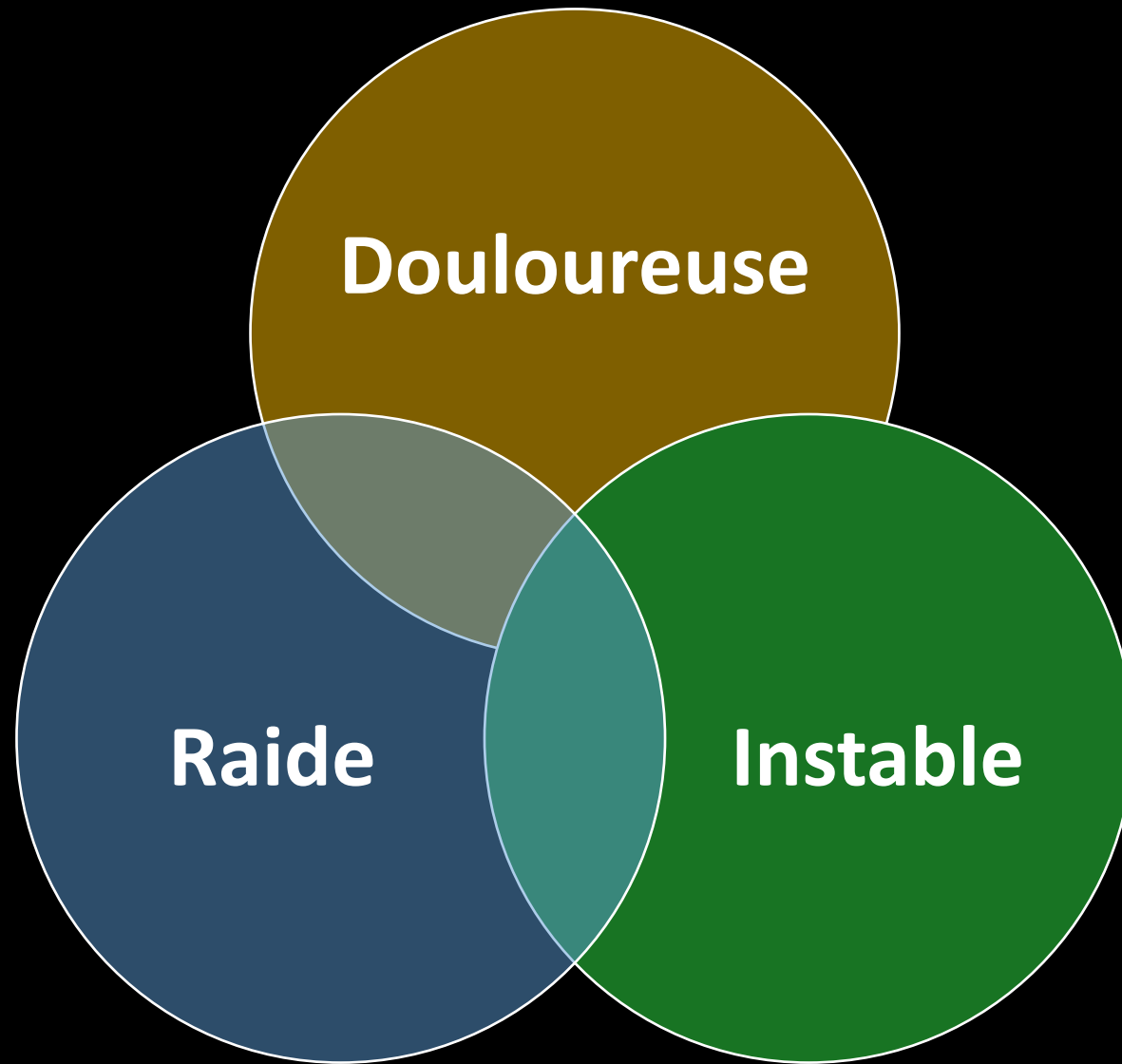
Instabilité

Antérieure et inférieure

Palpation

Os / Articulations / Tendons et muscles / Nerfs

Rachis cervical
Rachis thoracique
Hépto-biliaire
Cœur
Poumon



Douleureuse

Raide

Instable

Douloureuse



Os (fracture, tumeur)

Cartilage (arthropathies)

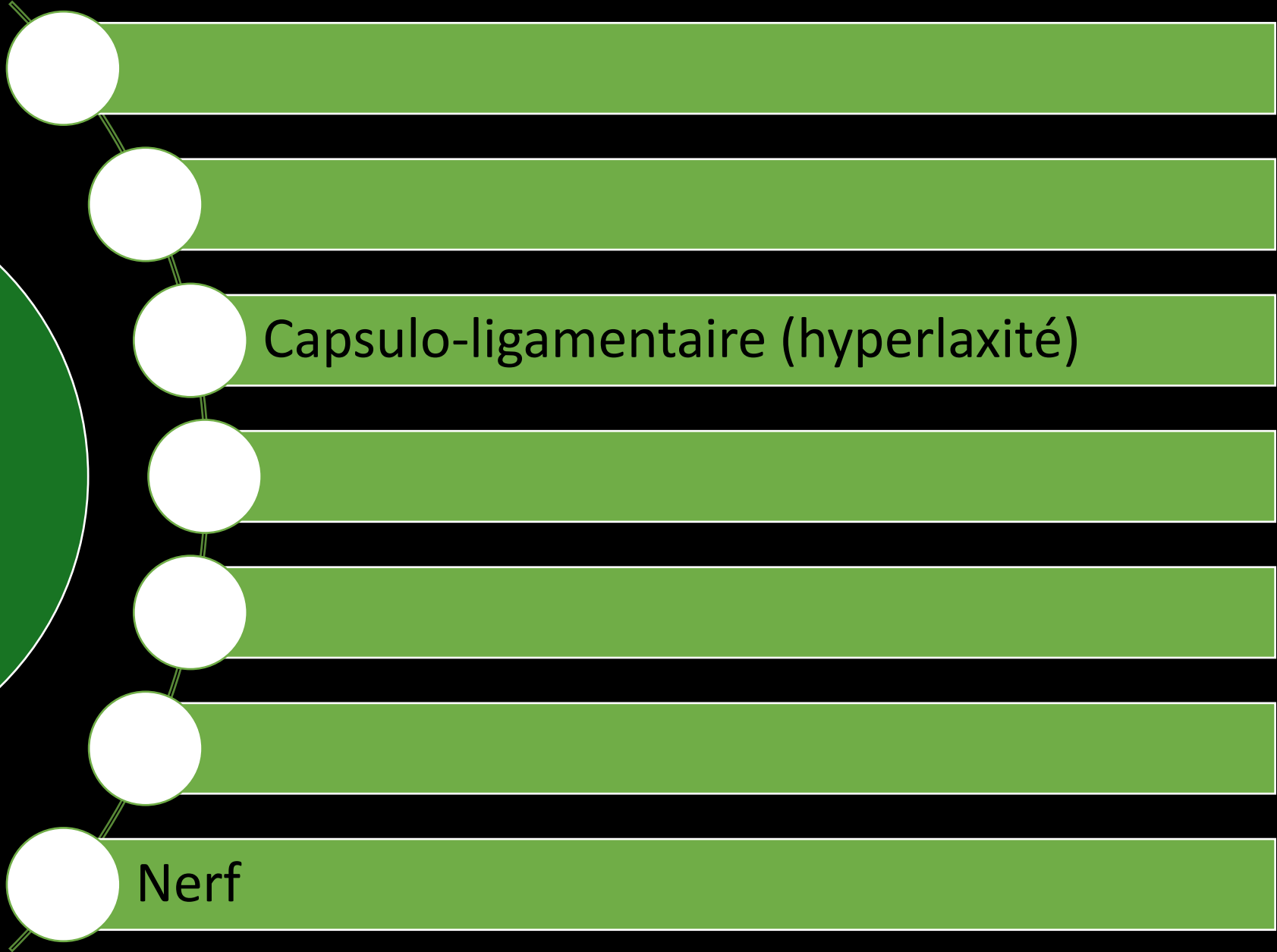
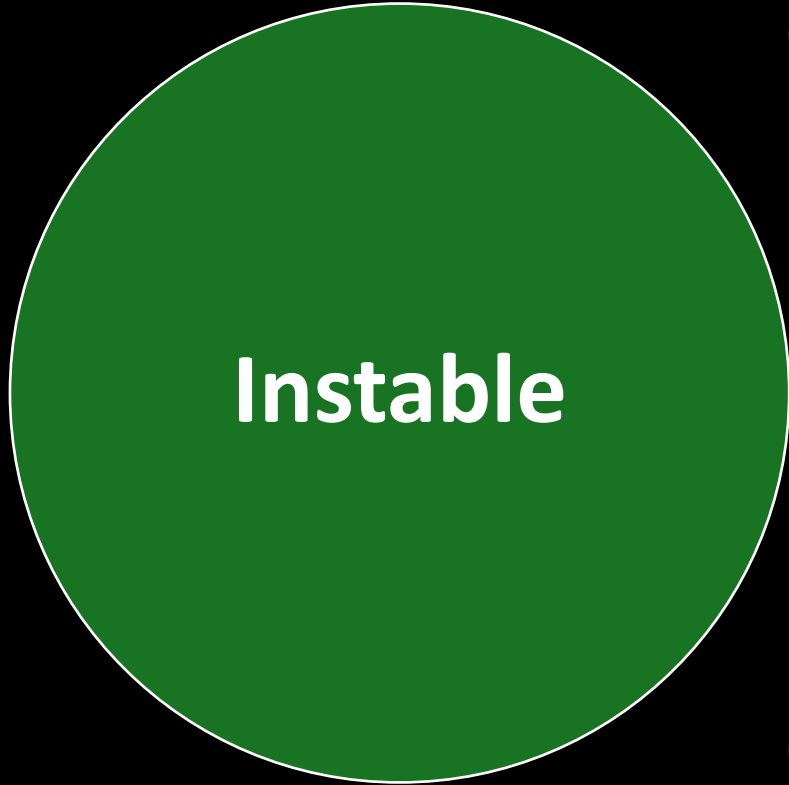
Capsulo-ligamentaire (capsulite)

Labrum (SLAP)

Abarticulaire (conflit, tendinopathie)

Muscle

Nerf



Raide



Cartilage (arthropathies)

Capsulo-ligamentaire (capsulite)

Abarticulaire (rétractions tendineuses)

Peau (brides cutanées, sous-cutanées)



Merci pour votre attention



JOSEPH E. MUSCOLINO

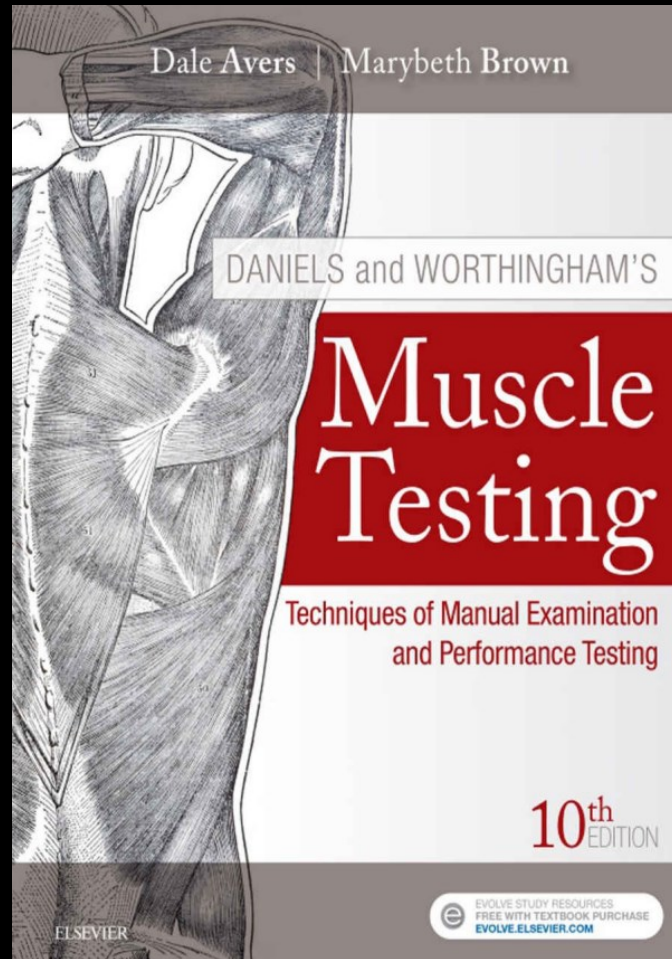
Manuel de palpation osseuse et musculaire

Points gâchettes, zones de projection et étirements



2 DVD en anglais inclus
4 heures de vidéo !

Traduction par
M. Pillu,
A. Gouriet et J.-L. Estrade



Dale Avers | Marybeth Brown

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