

## **Notes on two scapulae / by R.J. Anderson.**

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### **Publication/Creation**

[Leipzig] : [G. Thieme], 1888.

### **Persistent URL**

<https://wellcomecollection.org/works/pjefvyjy>

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(14)

(Aus der internationalen Monatsschrift f. Anat. u. Phys. 1888, Bd. V. Heft 6.)



## Notes on two scapulae

by

**R. J. Anderson**

in Galway.

(With two woodcuts.)

No. 1. A scapula (left) of a female subject has the following measurements:

Vertebral border . . . . .	16,5 cm.
Axillary border . . . . .	10 cm.
Superior border . . . . .	6 cm.
Glenoid fossa . . . . .	$32 \times 22$ mm.

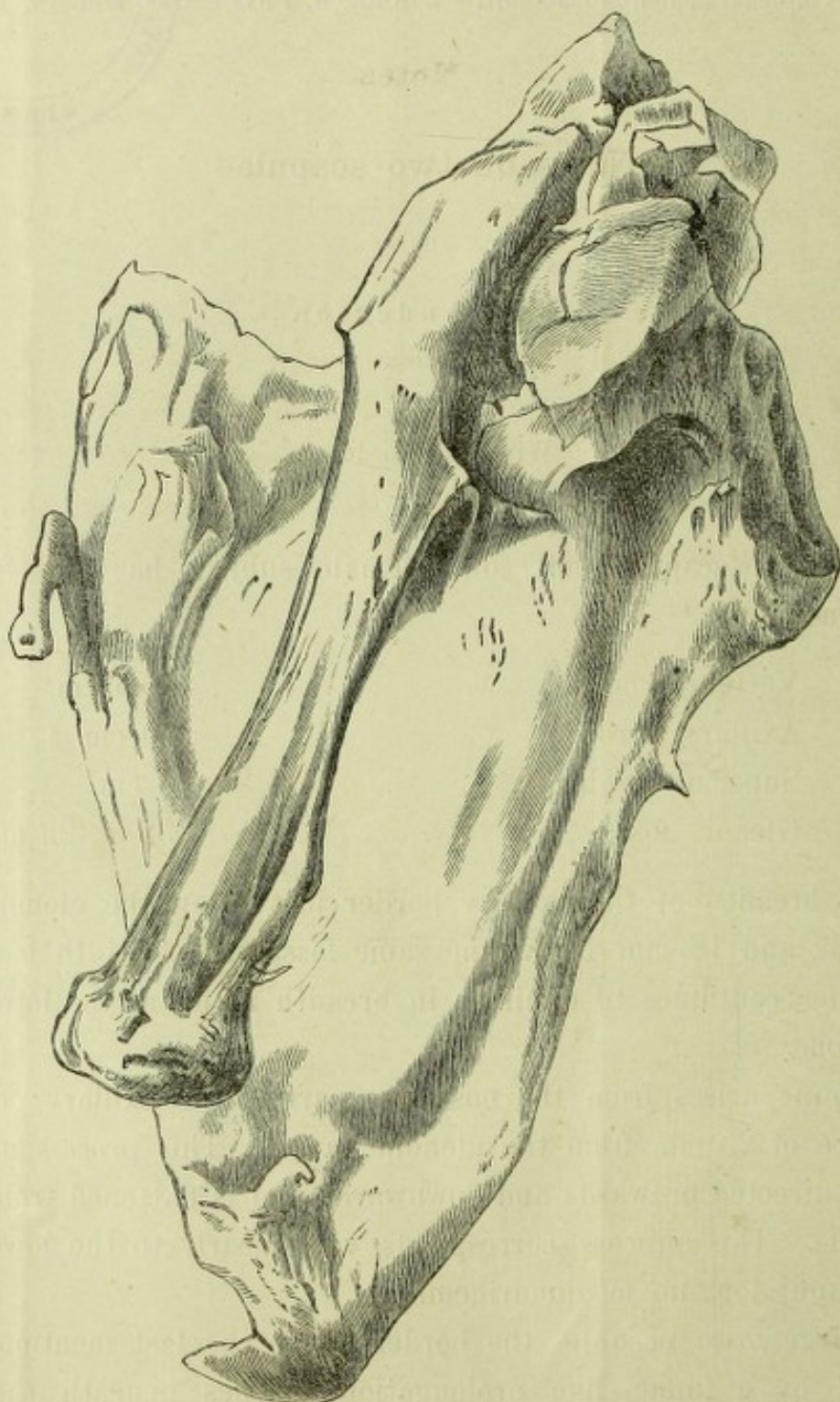
The breadth of the axillary border just below the glenoid fossa, is 12 mm, and 18 mm below the same fossa, the breadth is 10 mm. The border continues to diminish in breadth as far as the lower third of the bone.

A *spine* arises from the posterior part of the axillary border at a distance of 25 mm from the glenoid cavity. This *process* measures 6 mm, is directed outwards and downwards and is flattened from before backwards. This process corresponds very nearly to the lower limit of the *caput longum m. quadrigemini*.

A large *fossa* occupies the border above the last mentioned process and by a funnel-like prolongation reaches beneath the latter. This *fossa* measures  $9 \times 9$  mm by 6 mm depth.

A smaller *fossa* is situated below and behind the spine and is perforated by four vascular foramina one of which leads into a canal which runs outwards and opens on the surface of the bone. Another

seems to communicate with the large fossa above the spine. The infraspinous fossa is perforated by a hole,  $11 \times 8$  mm, 15 mm behind inferior border and 30 mm from the glenoid fossa.



No. 2. This scapula is the left scapula of a man, whose right I have also in my collection. The measurements are vertebral border 16,5 cm. Axillary border 12,5 cm, superior border 5,5 cm. The supra-spinous notch is absent.

The coracoid process measures 40 mm from its point of junction with the superior border to its apex. A ridge 9 mm long projects forwards from its anterior border midway between the base and apex.

A large oval compression occupies the inner and posterior part of the coracoid process it measures  $27 \times 15$  mm. The long axis runs from behind forwards and the short axis which runs upwards and outwards is near the anterior part of the impression.

The position of the impression corresponds to the attachment of the conoid ligament.

The clavicle shows a flat, oval surface in the position of the conoid tubercle. This surface looks downwards and outwards is flat and measures 17 mm in its long diameter and 7 mm in its shortest.

The bones are not covered with cartilage, but in the fresh condition, a large bursa existed in the conoid ligament, which on being opened had all the appearance of an articular cavity. The portion of the wall of this cavity corresponding to the scapula and clavicle. I find, is fibrous rather than cartilaginous. This specimen which I have now several years, I have figured:



There was no joint affection or degeneration in either case <sup>1)</sup>.

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<sup>1)</sup> Professor Krause in his Anatomy (Vol. 3. p. 76) says that a *tuberculum infraglenoidale* sometimes exists, which gives attachment to the long head of the triceps.

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The conchoid process measures 40 mm from its base to its apex, and its junction with the superior border to its apex. A ridge 2 mm long projects forwards from its anterior border midway between the base and apex. A large oval compression occupies the inner and posterior part of the conchoid process, (measures  $27 \times 15$  mm). The long axis runs from behind forwards, and the short axis which runs upwards and outwards is near the anterior part of the impression.

The position of the impression corresponds to the site of the insertion of the conoid ligament.

The clavicle shows a flat oval surface in the position of the conoid tubercle. This surface looks forwards and outwards is flat and measures 15 mm in its long diameter and 7 mm in its shortest.

The fossa is not covered with cartilage, but in the fresh condition a large bursa is seated in the conoid ligament, which on being opened had all the appearance of an articular cavity. The portion of the wall of this cavity corresponding to the scapula and clavicle I find is fibrous rather than cartilaginous. This specimen which I have now several years I have figured:



There was no joint affection or degeneration in either case.  
The clavicle is shown in its position, and the conoid ligament is seen attached to the scapula and clavicle. The clavicle is shown in its position, and the conoid ligament is seen attached to the scapula and clavicle. The clavicle is shown in its position, and the conoid ligament is seen attached to the scapula and clavicle.