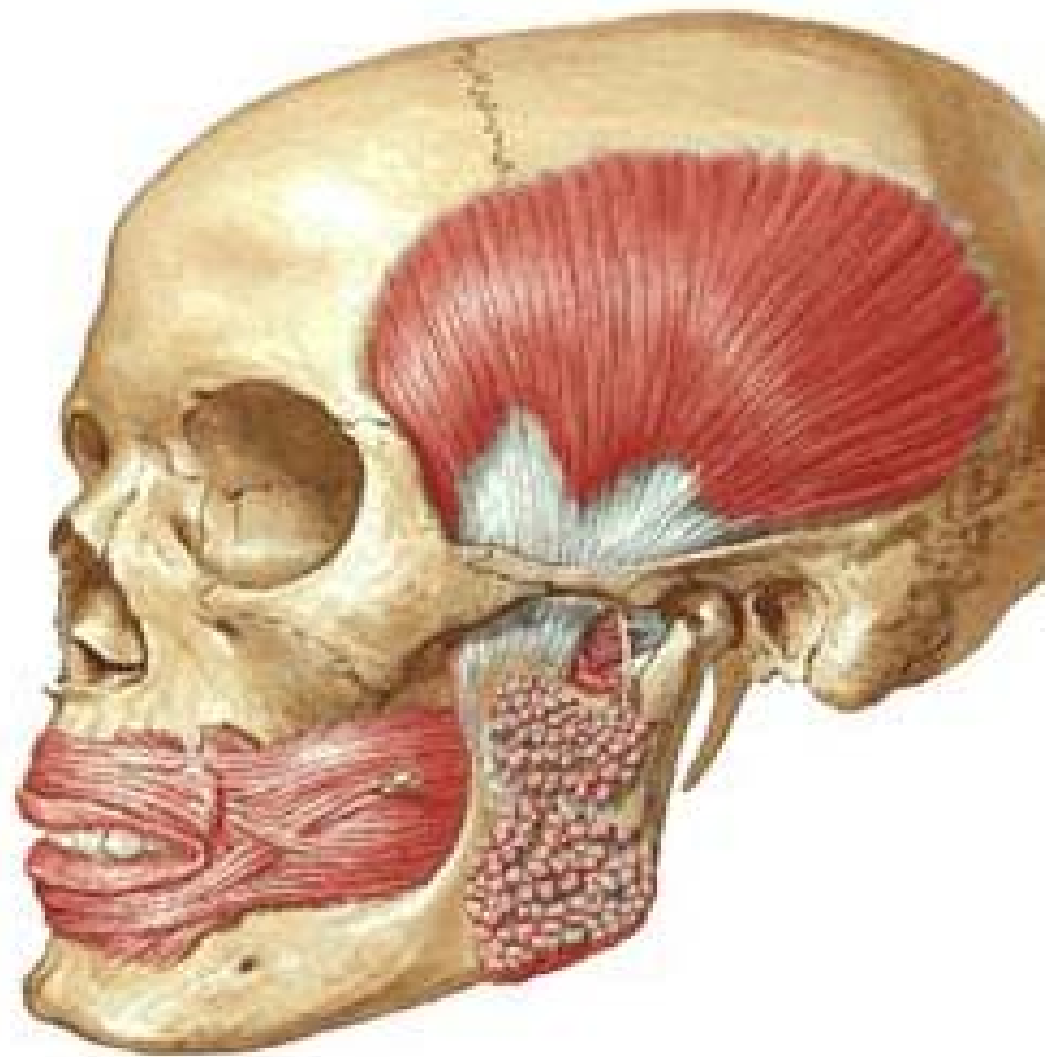
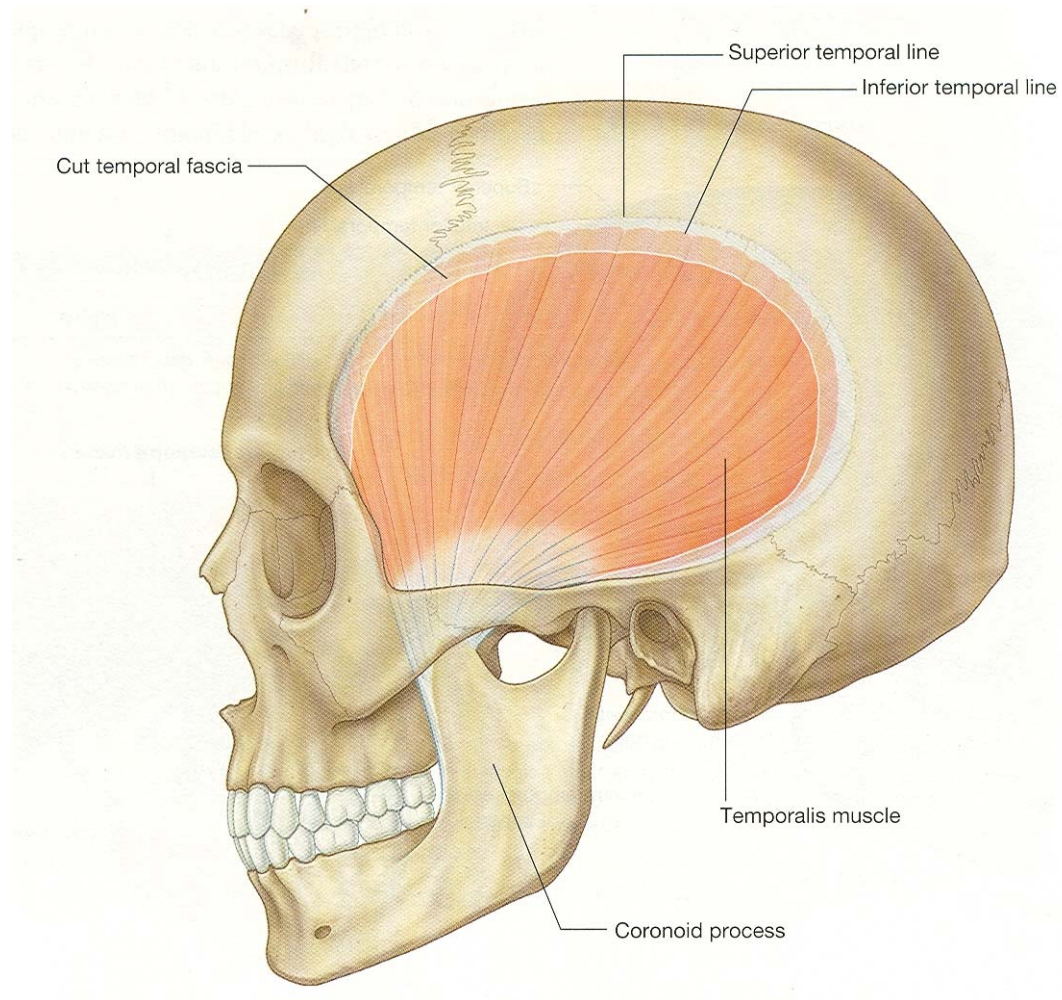


Masseter

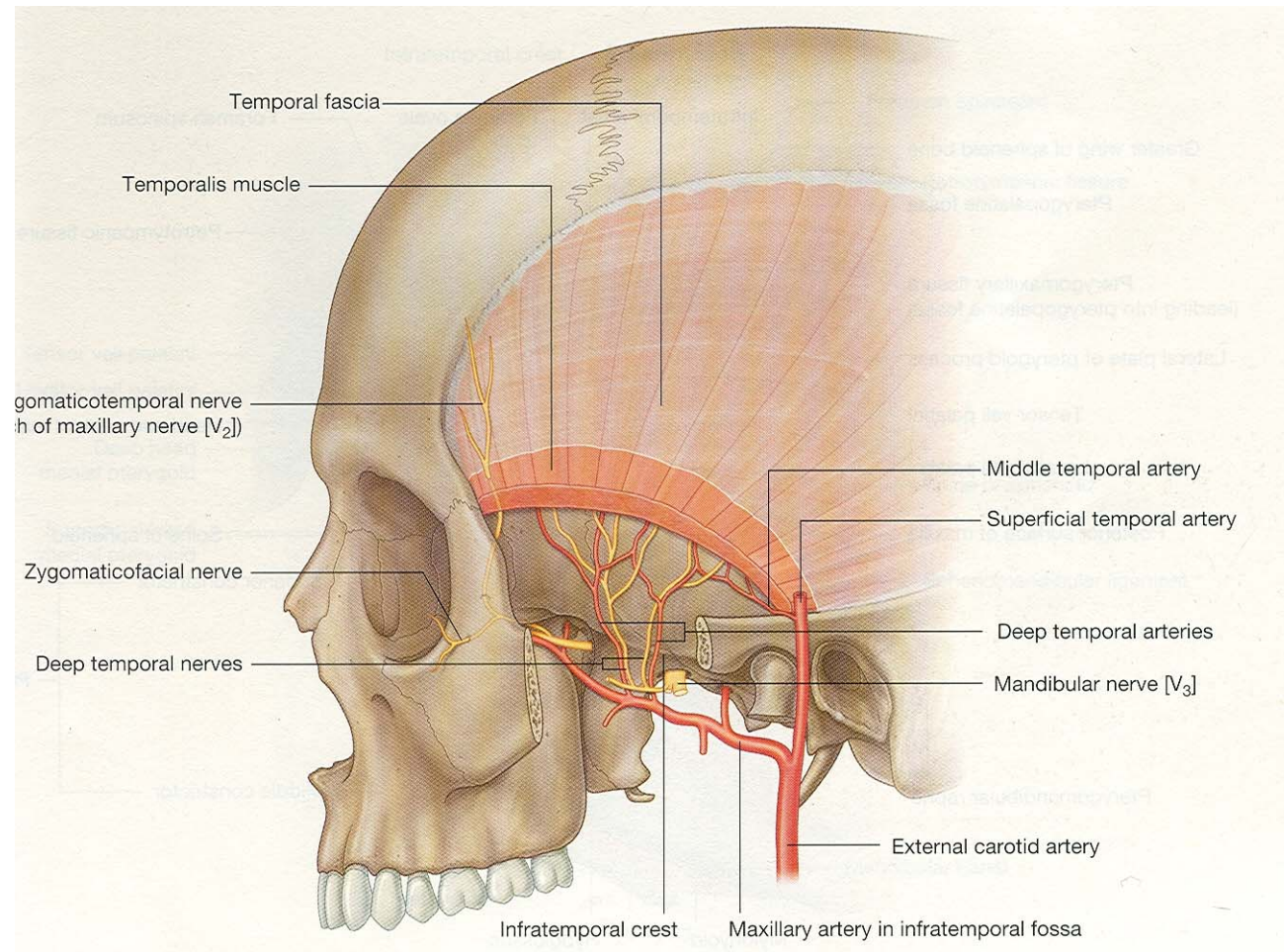
- Origin: three layers
Superficial: Maxillary process of zygomatic bone & anterior 2/3 of inferior border of zygomatic arch
Middle: medial aspect of zygomatic arch
Deep: deep surface of zygomatic arch
- Insertion: lateral surface of mandibular ramus
- Nerve supply: Nerve to masseter from anterior division of mandibular nerve.
- Action: Elevation & some side to side movement.
- Sub-masseteric space infection.

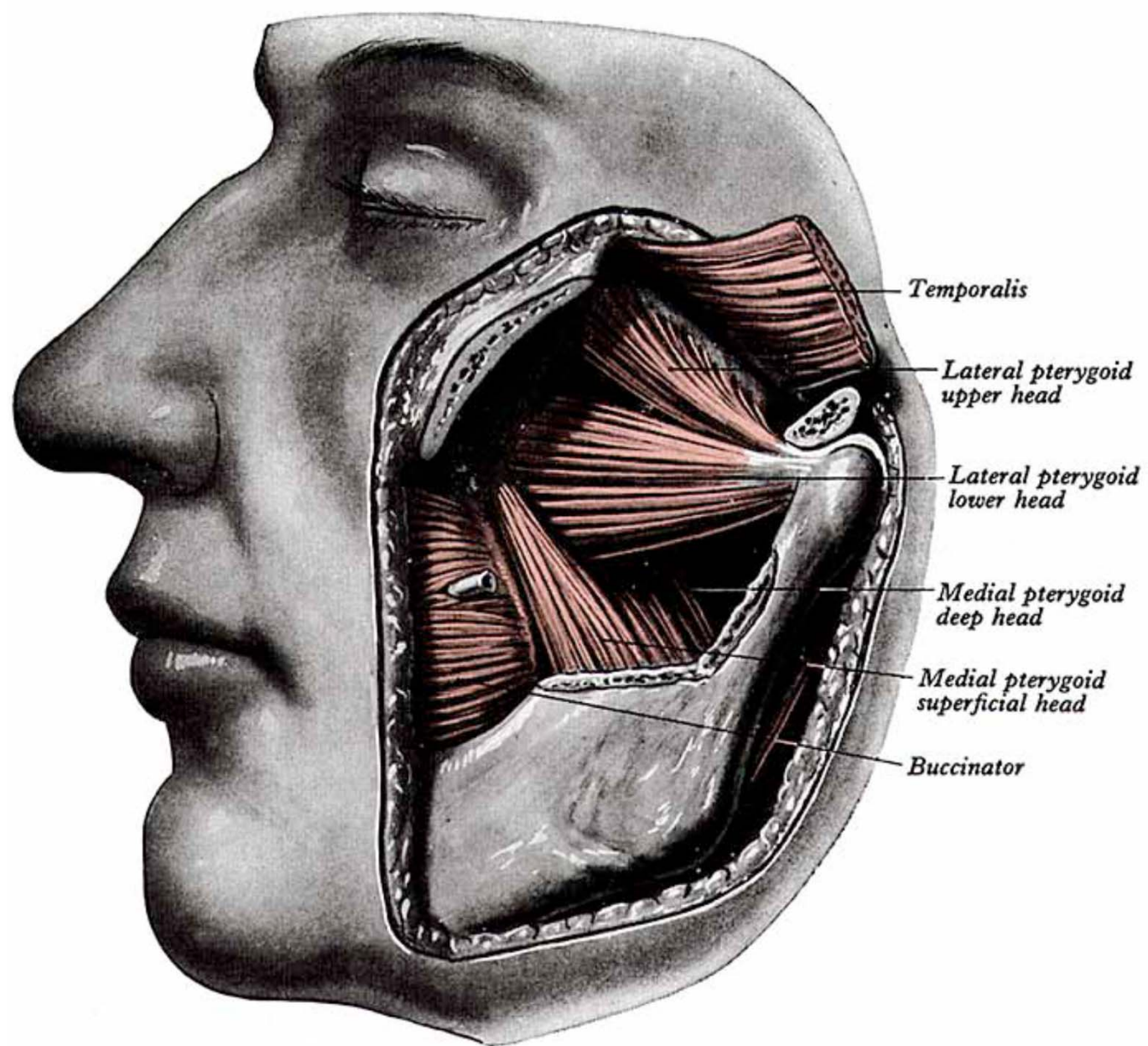




Temporalis

- Origin: Whole of temporal fossa up to inferior temporal line & temporal fascia.
- Insertion: Medial surface, apex, anterior and posterior borders of coronoid process & to anterior border of mandibular ramus.
- Nerve supply: Deep temporal branches of mandibular nerve.
- Action: Elevation (closure of mouth and approximation of teeth; side to side (grinding) movement; retraction.





Lateral pterygoid

Short thick muscle lying almost horizontally.

- Origin: two heads: upper head from infratemporal surface and crest (of greater wing of sphenoid); lower head from lateral surface lateral pterygoid plate.
- Insertion: Pterygoid fovea on neck of mandible and to capsule and articular disc of TM joint.
- Nerve supply: Nerves to lateral pterygoid from anterior division of mandibular nerve.

Relations:

Superficial: Ramus of mandible

Masseter,

Superficial head of medial pterygoid

Tendon of temporalis

Deep: Deep head of medial pterygoid

Sphenomandibular ligament

Maxillary artery

Middle meningeal artery

Mandibular nerve

Upper border: Deep temporal & masseteric nerves

Lower border: Lingual and inferior alveolar nerves

Between two heads of pterygoids:

Buccal nerve

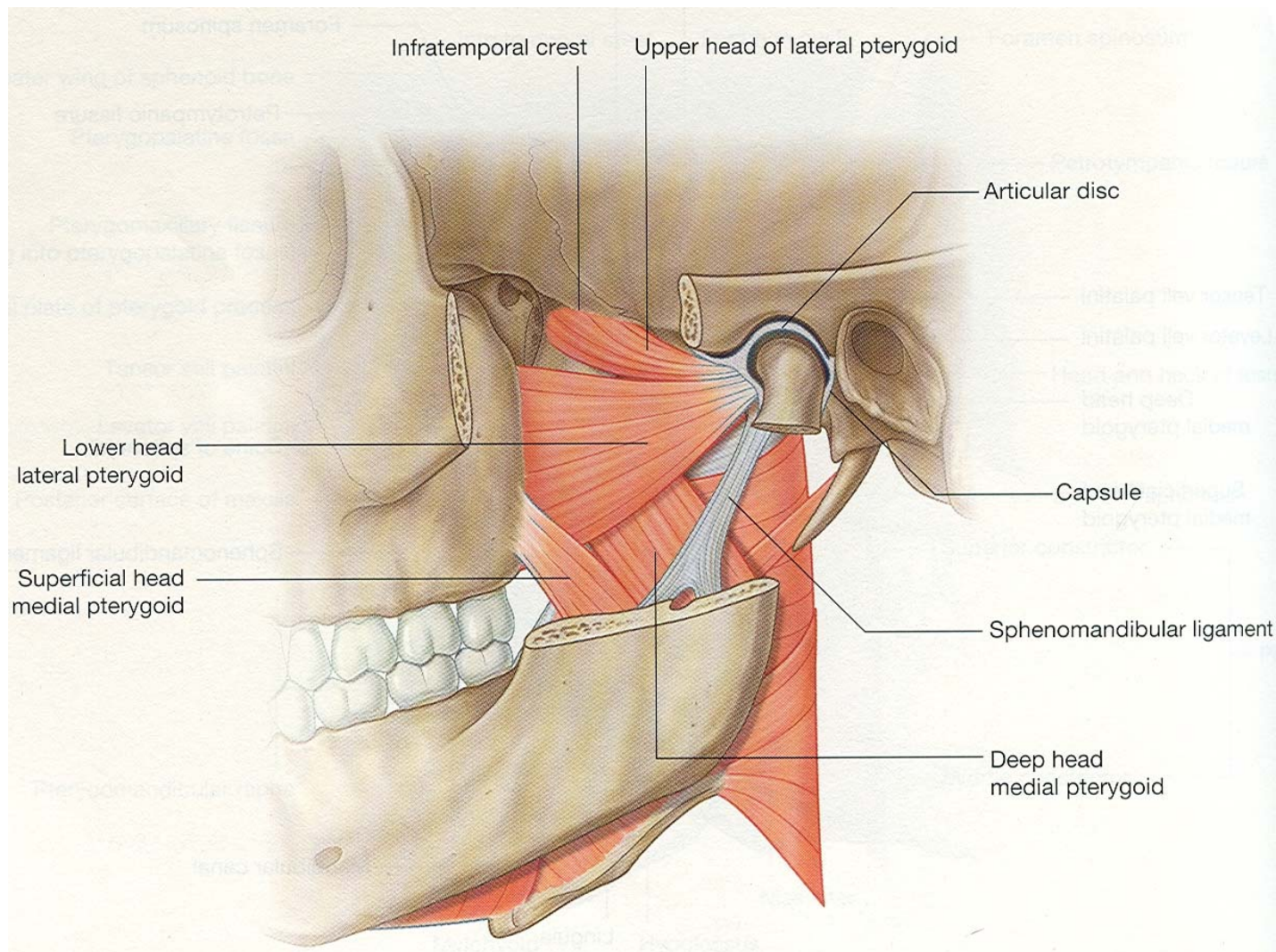
Maxillary artery

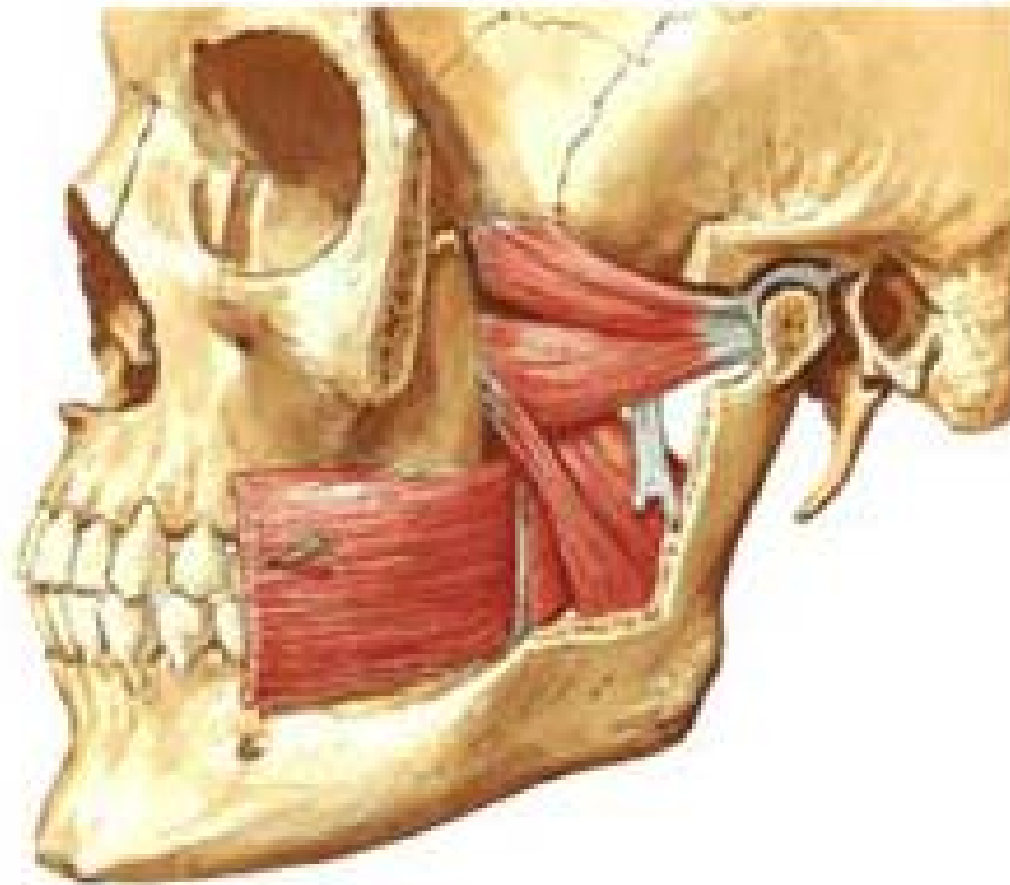
Pterygoid venous plexus

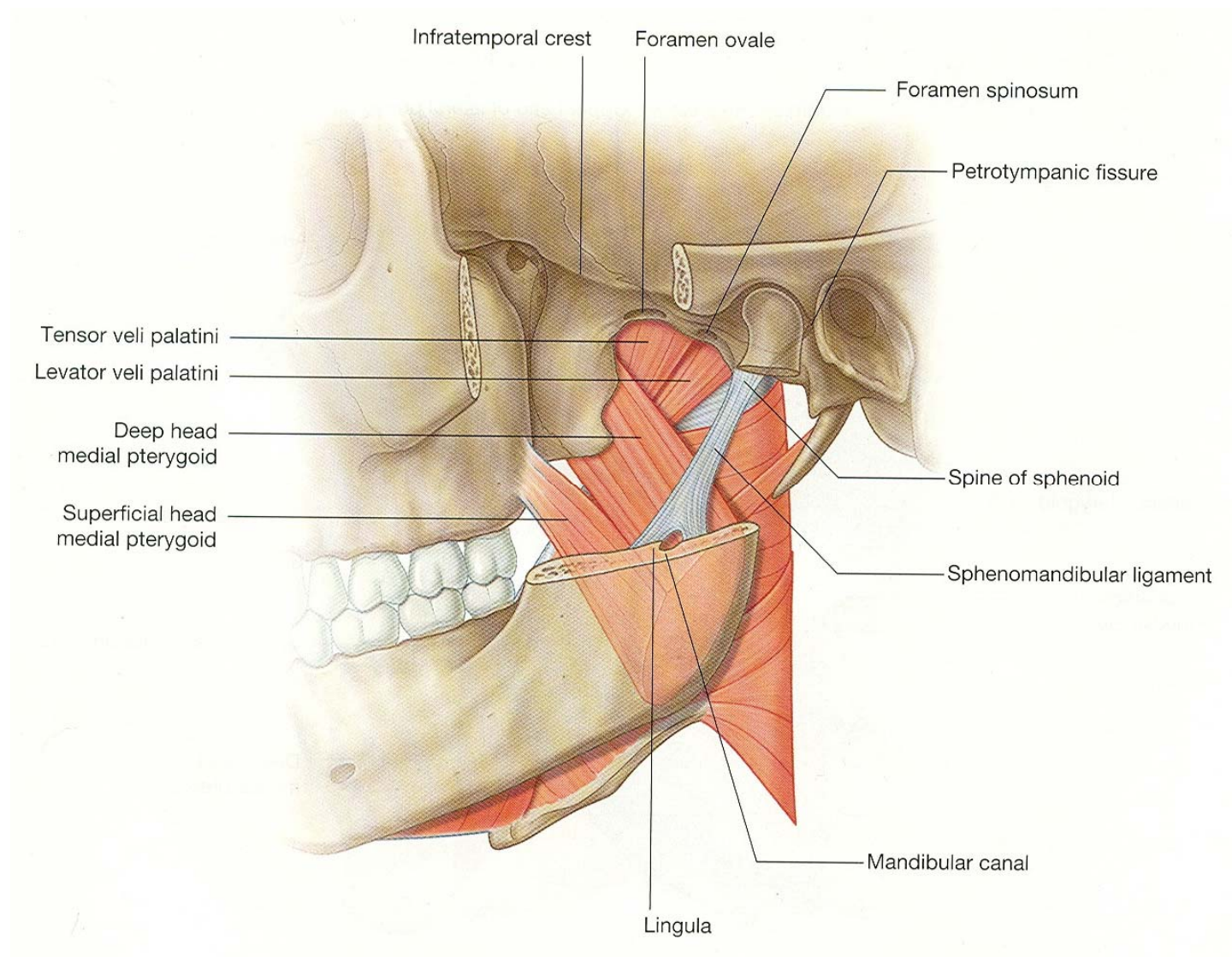
Actions:

Little protrusion to assist in opening of jaw,
depression along with hyoid muscles

Grinding (collective action of both pterygoids)



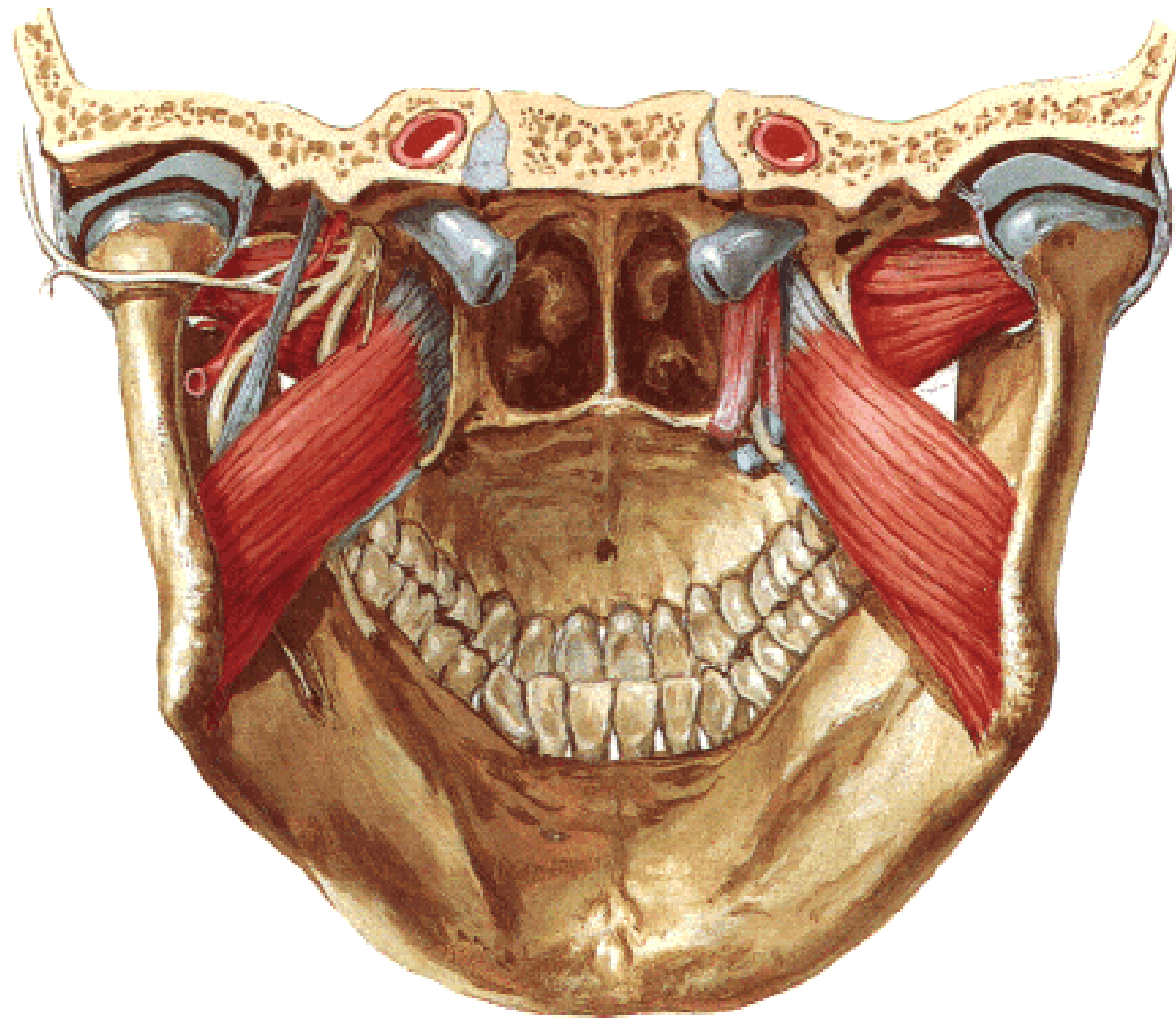


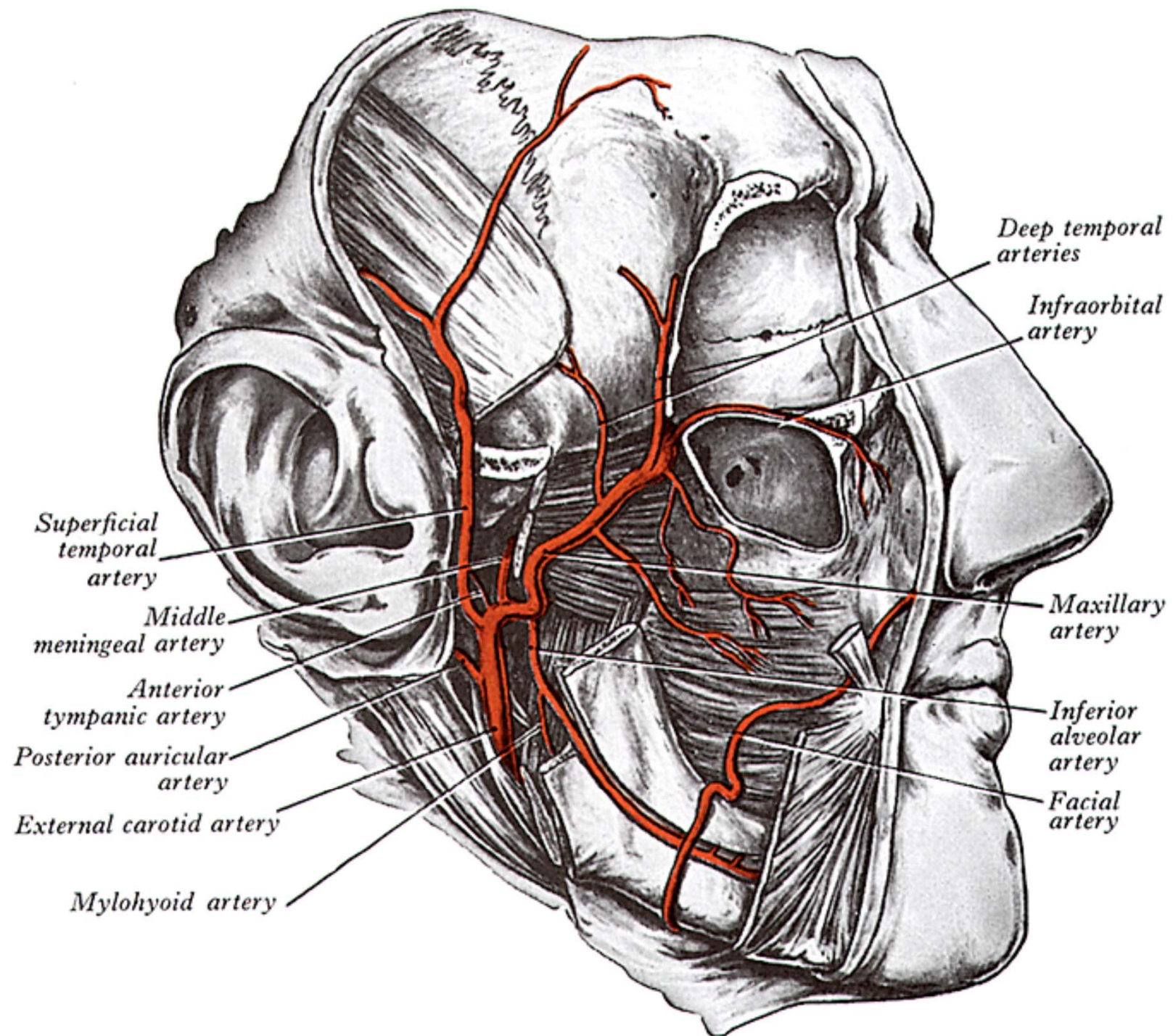


Medial pterygoid

- Origin: Deep head : Medial surface of lateral pterygoid plate
Superficial head : Maxillary tuberosity
Pyramidal process of palatine bone
- Insertion :By a strong a tendinous lamina to postero inferior part of medial surface of the ramus and angle of mandible
- Nerve supply :Nerve to medial pterygoid (branch from mandibular nerve)

- Relations:
 - Superficial:
 - Ramus of mandible
 - Lateral pterygoid
 - Sphenomandibular ligament
 - Maxillary artery
 - Inferior alveolar Vs and N
 - Lingual nerve
 - Deep:
 - Tensor veli palatini
 - Superior constrictor of pharynx
 - Styloglossus and stylopharyngeus
- Actions:
 - Elevation, protrusion, grinding





Maxillary artery

Terminal branch of external carotid artery

- Course: Origin behind neck of mandible
Embedded in parotid gland
Crosses infratemporal fossa to enter pterygopalatine fossa
Divided into three parts
- Branches : **First part** (mandibular)
Deep auricular, anterior tympanic, middle meningeal, accessory meningeal, inferior alveolar (all enter bone)
Second part (pterygoid)
Muscular – deep temporal, pterygoid, masseteric and buccal)

Temporomandibular joint

Synovial, complex, bicondylar

- Above: Temporal articular surface & anterior part of mandibular fossa.

- Below: Mandibular condyle

Articular surfaces are covered with fibrocartilage.

- Articular disc: Oval plate of fibrous tissue, like a peaked cap.

Completely divides the cavity

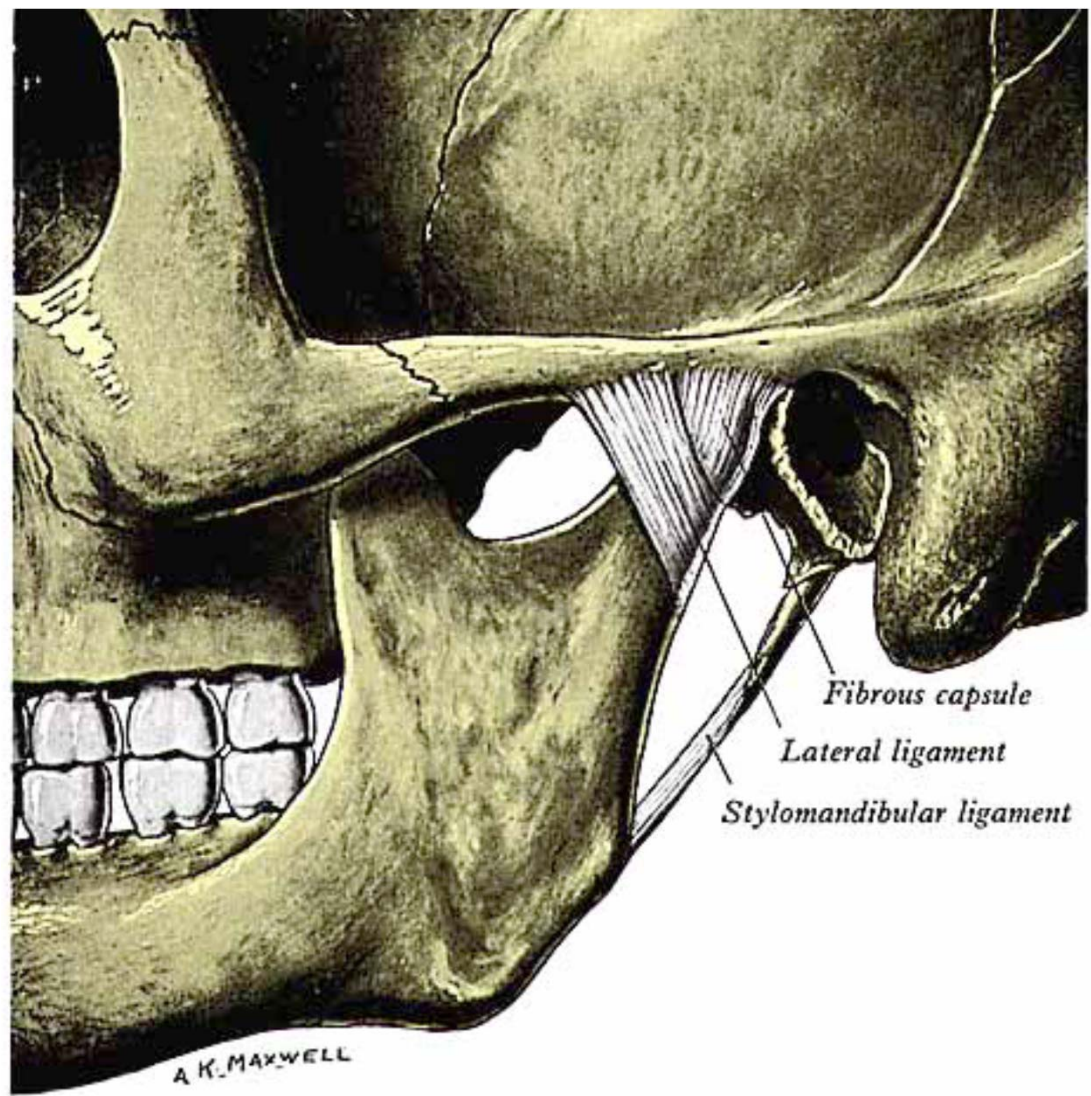
upper surface- concavo-convex

lower surface-concave

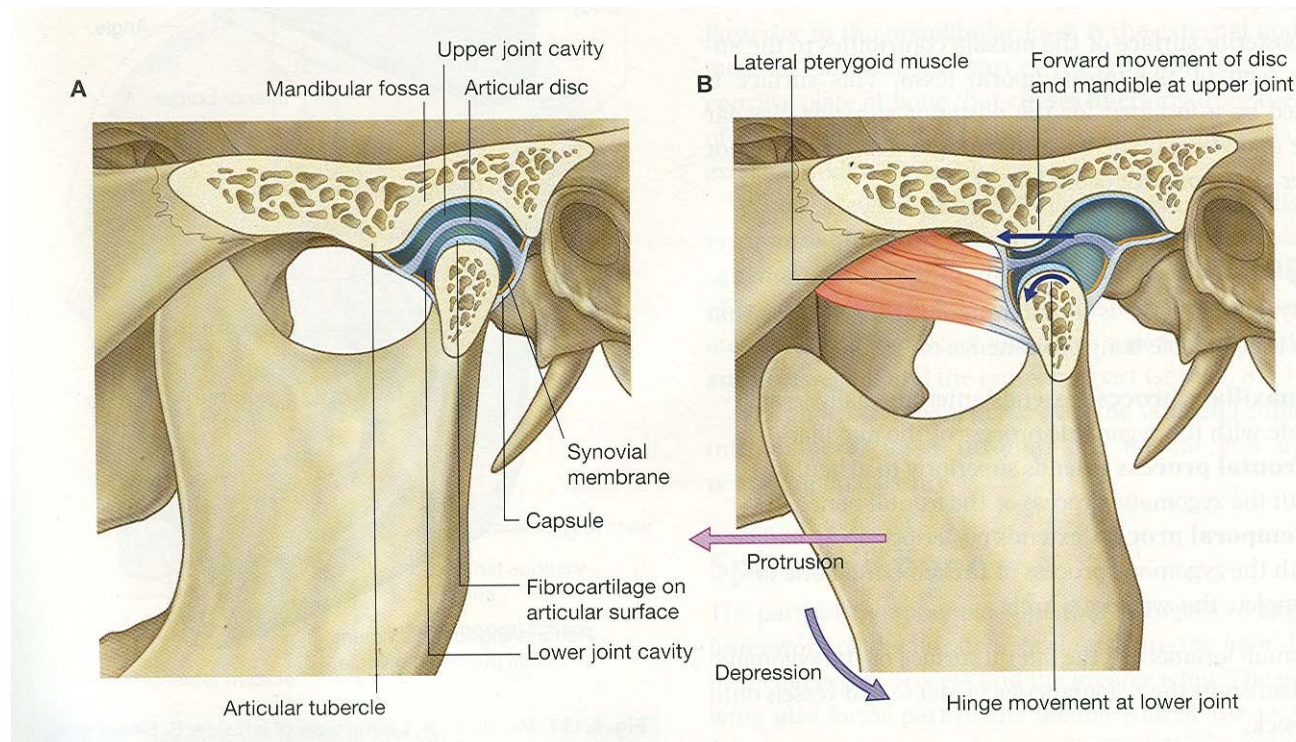
blends with the fibrous capsule

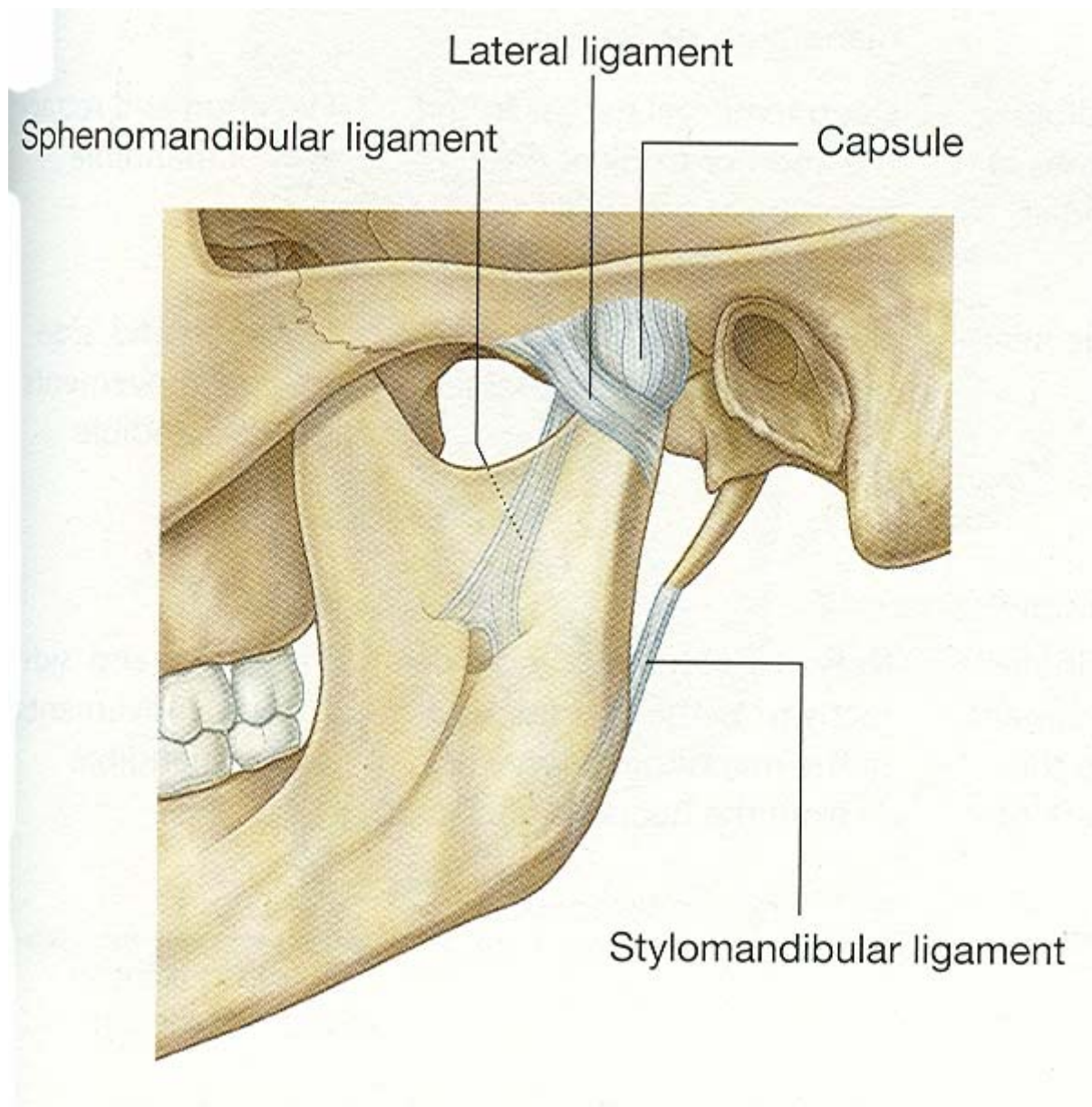
anteromedially to the tendon of lateral pterygoid

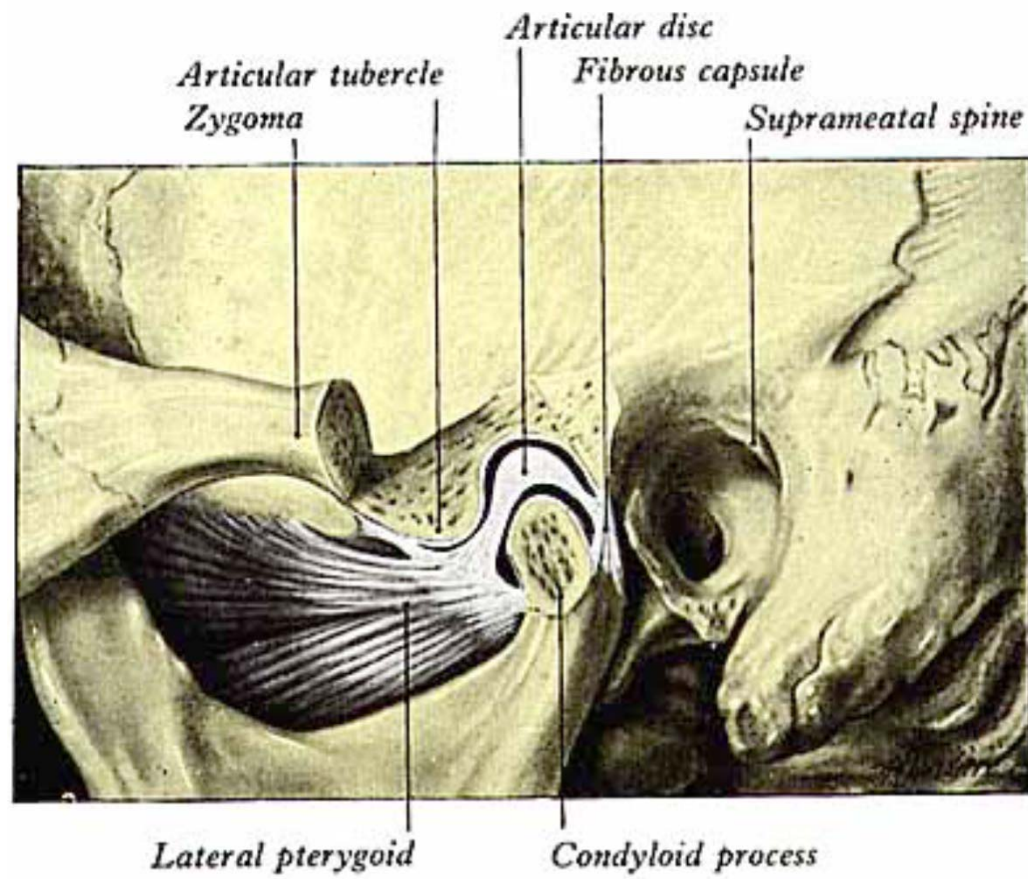
medially and laterally short strong bands pass to condylar poles



- Fibrous capsule : Encloses the joint and is attached to
above along the anterior margin of articular tubercle, posterior to squamo-tympanic fissure, laterally and medially along the margins of articular fossa
Below around the upper part of the neck of mandible
Loose above the disc but taut below it
- Synovial membrane : Lines the capsule (does not cover disc)
Lines non articular surfaces of both superior and inferior synovial compartments
Reflected along the mandible's neck and lateral pterygoid







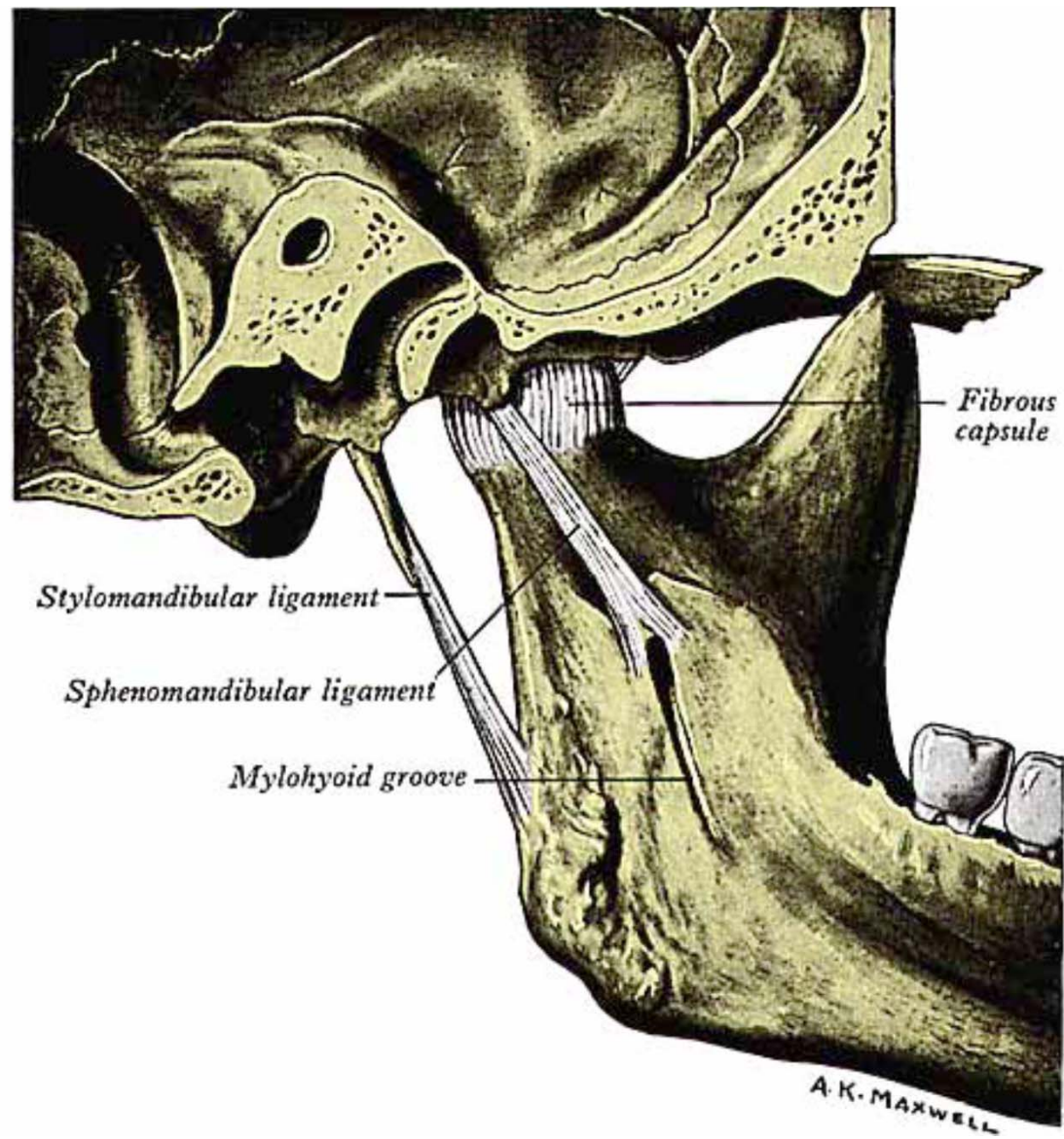
Extra capsular ligaments

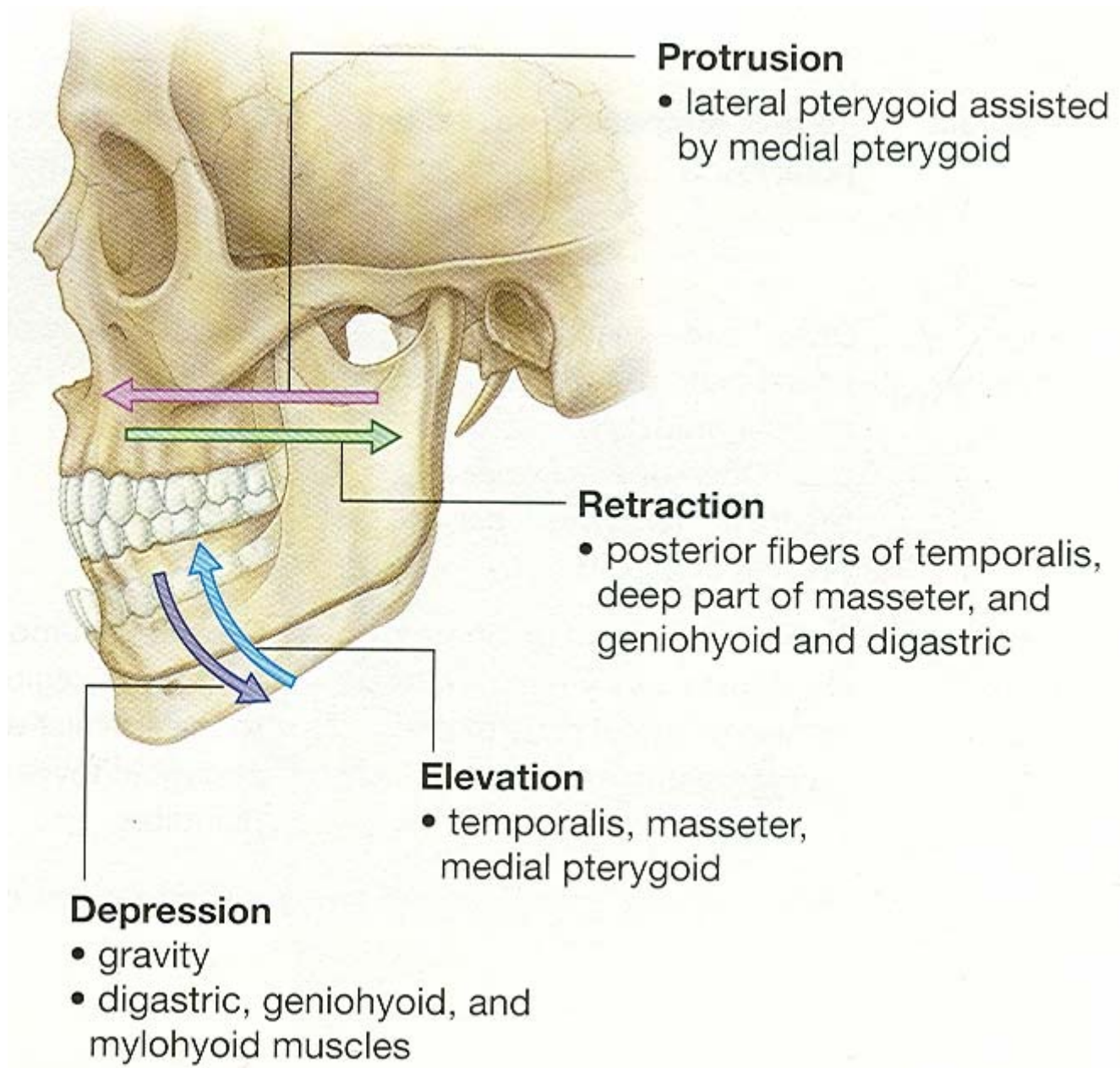
- Lateral ligament: Close to the joint runs diagonally backward from the margins of articular tubercle to the neck of the mandible.

Fibers slope downwards and backwards deep to parotid.

Prevents posterior dislocation

- Sphenomandibular ligament : Medial to TM joint runs from the spine of the sphenoid bone to the lingula on the medial side of ramus of mandible.
- Stylomandibular ligament : Passes from the styloid process to the posterior margin and angle of mandible.





- Blood Supply: Superficial temporal artery
 Maxillary artery
- Nerve supply: Auriculotemporal nerve
 Nerve to masseter
- Movements : Depression / Elevation (lower part)
 Protraction / Retraction (upper part)
 Rotation (gliding, spin, roll)

Position of rest

Occlusal position

- Depression: generated by digastric, geniohyoid & mylohyoid of both sides
 assisted by gravity and lateral pterygoid
- Elevation: Powerful movement generated by temporalis, masseter & medial pterygoid.
- Protraction: Forward translocation of head of mandible on to the articular tubercle; mainly achieved by lateral & medial pterygoids.
- Retraction: Backward translocation of head of mandible in to the mandibular fossa; mainly achieved by posterior and deep fibres of temporalis and masseter.

- **Opening of mouth** : Rotation of mandibular condyles on common horizontal axis
Forwards and downwards gliding
Contraction of lateral pterygoid
At full opening condyles articulate with most anterior part of disc and posterior attachment of disc to the temporal bone is fully stretched
Opening involves both depression and protrusion, protrusion allows greater depression by preventing backward movements.

- **Closure of mouth** : Reverse movements
Head glides backwards and hinges on its disc
Relaxation of lateral pterygoid – allows disc to glide back up to mandibular fossa.

Clinical Anatomy

- Dislocation: excessive contraction of lateral pterygoid during yawning or a blow to the chin when the mouth is open. (reduction)
- Fracture
- Arthritis: degenerative changes, may result in dental occlusion and joint clicking (crepitus-delayed anterior disc movement)