
Geleitwort

Das „Anatomische Bildwörterbuch“ von *Feneis* hat einen Erfolg zu verzeichnen, der geradezu phänomenale Ausmaße erreicht hat. Ich kann mich noch lebhaft an die erste Auflage erinnern und an mein damaliges Erstaunen, daß noch niemand auf den Gedanken gekommen war, ein so nützliches Buch herauszubringen. Nunmehr liegen bereits zahlreiche Auflagen vor, und das Buch ist in vielen Sprachen übersetzt worden. Mehrere dieser Ausgaben stehen bereits in greifbarer Nähe auf einem Regal über meinem Schreibtisch, und ich schlage oft darin nach. Es ist natürlich weitaus mehr als ein Wörterbuch der offiziellen „Nomina Anatomica“, denn es ist ein überaus wertvolles Werkzeug für jeden auf den Gebieten der Anatomie und Medizin tätigen Arzt und dessen Assistenten. Die Abbildungen sind es, die dieses Buch so wertvoll und in der Tat einzigartig machen. Ich kenne kein ähnliches Wörterbuch in irgendeiner Sprache, das nicht nur die Definitionen von Begriffen bringt, sondern sie auch klar und einfach bildlich veranschaulicht. Unter den vielen Büchern auf dem Gebiet der Anatomie, die Jahr für Jahr erscheinen, besitzen nur wenige die Originalität und zeitlose Nützlichkeit, die ihnen einen dauernden Wert verleihen, aber das vorliegende Buch gehört ohne Zweifel jener Eliteklasse an. Es wird dem Studenten, dem Akademiker und dem Kliniker ein ganzes arbeitsreiches Berufsleben hindurch ein zuverlässiger Begleiter sein.

London, im Winter 1982

Roger Warwick
Professor Emeritus
University of London
(Guy's Hospital Medical School)

Vorwort zur 1. Auflage

Die Nomina Anatomica sind ein stichwortartiger Katalog dessen, was die Anatomen aller Welt in vielen Jahrhunderten an makroskopischen Befunden zusammengetragen haben. Zugleich aber ist die anatomische Fachnomenklatur ein Verständigungsmittel und damit ein zweckbestimmtes Werkzeug. Es ist unter anderem die Folge einer dynamischen Entwicklung, wenn die Anatomische Nomenklatur in den letzten Jahren laufend geändert wurde; denn die Änderungen bezogen sich ja nicht nur auf philologische Gesichtspunkte; sondern waren auch darin begründet, daß neuerschlossene Befunde benannt werden mußten. Daß dieses auf internationaler Basis erfolgte, ist in unserer Zeit der intensivierten Kommunikationsmittel und schrumpfenden Entfernungen nicht nur zu begrüßen, sondern muß als sachliche Notwendigkeit anerkannt werden.

Bei dem großen Stoffumfang und bei den vielen Änderungen und Erweiterungen kann es nicht ausbleiben, daß oft eine Unsicherheit über einzelne Bedeutungen besteht. Sie ist natürlich beim Lernenden noch viel größer als beim Fachmann.

Um hier Abhilfe zu schaffen, bin ich gern dem Vorschlag gefolgt, eine bebilderte Erklärung der Nomina Anatomica zu schreiben. Daß bei einem so ausgesprochen morphologischen Stoff die Abbildung neben dem Text für den Aufbau einer gegenständlichen Vorstellung nicht fehlen durfte, war von vornherein klar. Ich habe mich bemüht, die Gliederung der neuesten, 1965 in Wiesbaden herausgegebenen Nomenklatur beizubehalten, möglichst viele Begriffe abzubilden und die Abbildungen neben dem zugehörigen Text zu bringen.

Es war nicht leicht, den riesigen Stoff mit Abbildungen in einem Taschenbuch unterzubringen, und es wäre mir in der gegebenen Zeit nicht möglich gewesen, hätte ich außer meinen ständigen Mitarbeitern nicht noch so viele andere gute Helfer gehabt. Meine ursprüngliche Absicht, alle studentischen Mitarbeiter namentlich zu nennen, ist der großen Zahl wegen nicht möglich. Ich nenne repräsentativ zwei: Fräulein *I. von Zeppelin*, die mir am längsten, u. a. bei der schwierigen Planung der Abbildungen treu und ausgiebig geholfen hat, und Herrn *E.J. Kirchertz*, der mit Umsicht und Tatkraft bei der sehr wesentlichen Schlußrevision ganz entscheidend mitwirkte. Frau *Dr. Hoffmann* danke ich aufrichtig dafür, daß sie mir mit ihrem zeichnerischen Können, wie früher schon einmal, so erfolgreich beistand. Von ihr stammen fast alle histologischen Zeichnungen und manche Entwürfe. Herrn *Spitzer* muß ich besonders danken. Er hat in ausgeglichener, persönlicher Zusammenarbeit mit Interesse, Verständnis, Geduld und Ausdauer sich nicht nur sehr erfolgreich in das ganze Gebiet eingearbeitet, sondern auch in einer ihm zunächst neuen Zeichentechnik sehr schnell vortreffliche Leistungen erreicht. Auch stammen viele originelle Gestaltungsvorschläge von ihm.

Das alles wäre nicht möglich gewesen, hätten die Herren des Georg Thieme Verlages nicht in förderlichem Entgegenkommen die guten Voraussetzungen für das vorliegende Büchlein geschaffen, in dem mehr technische Schwierigkeiten stecken, als man ihm ansieht.

Tübingen, im Juni 1967

Heinz Feneis

Vorwort zur 10. Auflage

Das Ziel dieses Buches ist es, den Leser mit Hilfe der international gültigen Fachsprache zeitsparend und kurz, aber möglichst vollständig, über anatomische Begriffe zu informieren. Mit der Einführung der jetzt gültigen Terminologia Anatomica hat das „Federative Committee on Anatomical Terminology“ (FCAT) auch dem Wunsch von Mitgliedern des angelsächsischen Sprachraums entsprochen, der lateinischen eine englische Nomenklatur gleichwertig zur Seite zu stellen. Auf diese Weise ist es gelungen, die Kommunikation zwischen Nutzern in verschiedenen Sprachräumen zu erleichtern.

Zur einfacheren Handhabung der Begriffe im Englischen wurde hierbei weitgehend auf die im Lateinischen gebräuchlichen Diphthonge verzichtet.

Es bleibt jedoch unverständlich, warum in der lateinischen Nomenklatur jetzt gleichermaßen verfahren worden ist, obwohl keine philologische Notwendigkeit bestanden hat und die Diphthonge in den Beugungsformen erhalten sind. Mit der Änderung (z. B. früher: prae-; heute: pre-) wurde der Umgang mit den Termini nicht erleichtert. Deshalb bin ich nur zögernd dem Wunsch des Verlages gefolgt, diese neue lateinische Schreibweise anzuwenden.

Ebenso scheint mir in der Anwendung des Begriffes „Ramus“ eine Erkennungsschwierigkeit zu bestehen. Der Terminus wird sowohl bei Gefäßen als auch bei Nerven gebraucht – eine zumindest für den Lernenden verwirrende Situation.

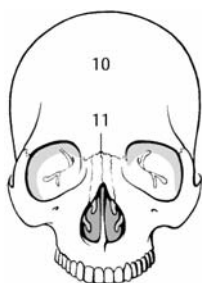
Wie auch in allen früheren Auflagen lag die Neugestaltung und Änderung von Abbildungen in den Meisterhänden von Herrn Prof. Dr. Gerhard Spitzer. Ihm gebührt mein großer Dank für seine immerwährende umsichtige und partnerschaftliche Zusammenarbeit. Kleinere Unstimmigkeiten in den Abbildungsbezeichnungen und Druckfehler, die sich leider bei der kompletten Überarbeitung des Buches in der 9. Auflage eingeschlichen hatten, wurden beseitigt. Hierzu haben auch die Hinweise von Kollegen und Studierenden beigetragen. Ihnen allen sei für ihre Mühe gedankt. Insbesondere danke ich meinem früheren Mitarbeiter PD Dr. Tilman Voigt (Fribourg), der in regem Austausch viele sachkundige Hinweise eingebracht hat.

Dem Georg Thieme Verlag und seinen Mitarbeitern, vor allem Frau Claß, Frau Mauch und Herrn Lehnert danke ich wiederum für die Geduld, ihr Verständnis für unsere Wünsche und die harmonische Zusammenarbeit bei der neuen Gestaltung dieser Auflage.

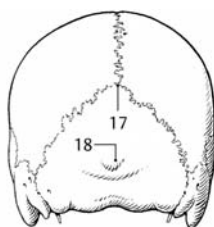
Tübingen, im August 2008

Wolfgang Dauber

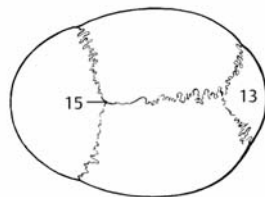
- 1 **ANATOMIA SYSTEMICA.** Spezielle Anatomie.
- 2 **SYSTEMA SKELETALE; OSSA.** Skelettsystem; Knochen.
- 3 **CRANIUM.** Schädel.
- 4 **Neurocranium.** Hirnschädel.
- 5 **Viscerocranium.** Gesichtsschädel. Die Grenze zum Hirnschädel verläuft von der Nasenwurzel über den oberen Rand der Augenhöhlen zu den äußeren Gehörgängen.
- 6 **Chondrocranium.** Knorpelschädel. Embryol. knorpeliger Schädelanteil der späteren Schädelbasis.
- 7 **Desmocranium.** Summe der Schädelknochen, die durch direkte Ossifikation entstanden sind.
- 8 **Pericranium; Periosteum externum cranii.** Periost der Schädelaußenfläche.
- 9 **Norma facialis; Norma frontalis.** Schädelansicht von vorn. A
- 10 **Frons.** Stirn. A F
- 11 **Nasion.** Medianer Punkt in der Naht zwischen Stirn- und Nasenbein. A F
- 12 **Norma superior; Norma verticalis.** Schädelansicht von oben. C
- 13 **Occiput.** Hinterhaupt. C F
- 14 **Vertex.** Scheitel. Der höchstgelegene mittlere Teil des Schädelgewölbes. F
- 15 **Bregma.** Treffpunkt der Sutura sagittalis auf die Sutura coronalis. C
- 16 **Norma occipitalis.** Schädelansicht von hinten. B
- 17 **Lambda.** Treffpunkt der Sutura lambdoidea mit der Sutura sagittalis. B
- 18 **Inion.** Äußerster Punkt an der Protuberantia occipitalis externa. Anthropologischer Messpunkt. B F
- 19 **Norma lateralis.** Seitenansicht des Schädels. F
- 20 **Pterion.** Das Feld, in dem sich Stirn-, Scheitel-, Schläfen- und Keilbein treffen. F
- 21 **Asterion.** Treffpunkt der Lambdanahnt auf die hintere Mastoidnaht. F
- 22 **Gonion.** Der am weitesten unten, hinten, außen liegende Punkt am Unterkieferwinkel.
- 23 **Fossa temporalis.** Schläfengrube. Flache Grube zwischen der Schädelseitenwand, von den Lineae temporales bis in Höhe der Crista infratemporalis und lateral bis Unterrand des Jochbogens. F
- 24 **Arcus zygomaticus.** Jochbogen. Er setzt sich zusammen aus dem Processus zygomaticus des Os temporale und dem Processus temporalis des Jochbeins. F
- 25 **Fossa infratemporalis.** Unterschläfengrube. Sie setzt die Schläfengrube nach unten fort und dehnt sich nach medial bis zum Processus pterygoideus aus. Sie wird ausgefüllt vom unteren Teil des M. temporalis, dem M. pterygoideus lateralis, Gefäßen und Nerven. F
- 26 **Fossa pterygopalatina.** Flügelgaumengrube. Fortsetzung der Fossa infratemporalis nach medial zwischen Tuber maxillae, Lamina perpendicularis ossis palatini und Processus pterygoideus. Nach unten verengt sich die Fossa pterygopalatina zum Canalis palatinus major. F G H
- 27 **Fissura pterygomaxillaris.** Variable, offene Verbindung zwischen Fossa infratemporalis und Fossa pterygopalatina, begrenzt von Tuber maxillae und Lamina lateralis des Processus pterygoideus. G H
- 28 **Fonticuli cranii.** Fontanellen. Membranös verschlossene Lücken zwischen den kindlichen Schädelknochen. J K
- 29 **Fonticulus anterior.** Große Fontanelle. Rhombusähnliche Lücke vorne in der Pfeilnaht zwischen Scheitelbein- und Stirnbeinanlagen. Sie schließt sich im 2.–3. Lebensjahr. J K
- 30 **Fonticulus posterior.** Kleine Fontanelle. Dreieckige Lücke an der Vereinigung der Pfeilnaht mit der Lambdanahnt, also zwischen den Scheitelbeinen und dem Hinterhauptsbein. Sie ist 3 Monate nach der Geburt geschlossen. J K
- 31 **Fonticulus sphenoidalis; Fonticulus anterolateralis.** Lücke seitlich am Schädel zwischen Stirnbein, Scheitelbein, Schläfenbein und Keilbein. J
- 32 **Fonticulus mastoideus; Fonticulus posterolateralis.** Seitliche Lücke zwischen Scheitelbein, Hinterhauptsbein und Schläfenbein. J
- 33 **Calvaria.** In Längs- und Querrichtung gewölbtes Schädeldach. Es wird gebildet von Squama frontalis, Ossa parietalia und oberem Teil der Squama occipitalis. D
- 34 **Lamina externa.** Äußere kompakte Platte der knöchernen Schädeldecke. D E
- 35 **Diploë.** Die der Spongiosa entsprechende Knorpelschicht zwischen Lamina externa und Lamina interna speziell beim Schädelknochen. D E
- 36 **Canales diploici.** Weite Venenkanäle in der Diploë. E
- 37 **Lamina interna.** Innere kompakte Platte der knöchernen Schädeldecke. E
- 38 **Sulcus sinus sagittalis superioris.** Flache Rinne für den Sinus. D E
- 39 **Foveolae granulares (Pacchioni).** Grübchen für den Einlass der Granulationes arachnoideae. D E
- 40 **Sulci venosi.** Gelegentliche, venenführende Rinnen an der Innenwand des Os parietale.
- 41 **Sulci arteriosi.** Rinnen an der Schädelinnenwand hauptsächlich für die A. meningea media und ihre Äste. D
- 42 **[Os suturale].** Gelegentliche Schaltknochen in den Schädelnähten.



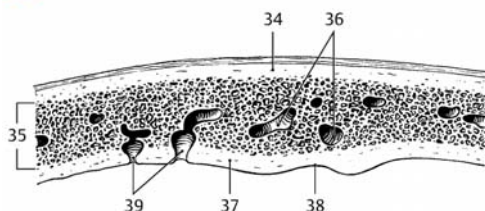
A Norma facialis



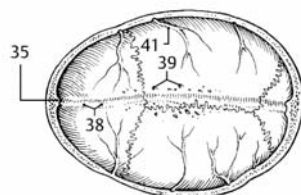
B Norma occipitalis



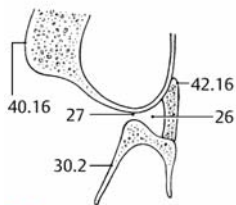
C Norma verticalis



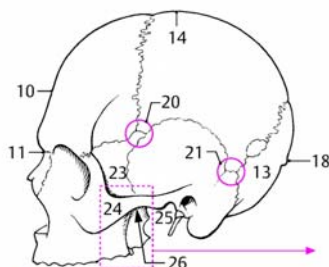
E Querschnitt durch ein Stück Calvaria



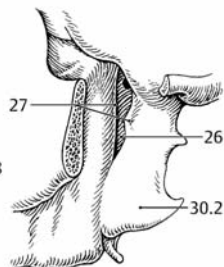
D Calvaria von innen



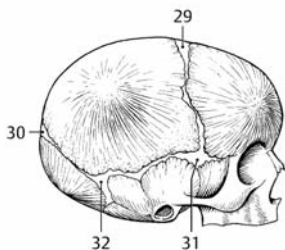
G Schematisierter Horizontalschnitt durch die Flügel-Gaumengrube



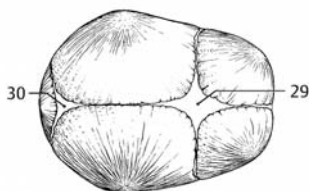
F Schädel von links



H Ausschnitt aus der Norma lateralis

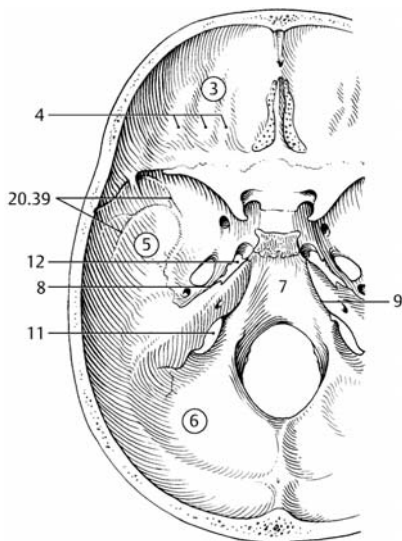


I Neugeborenschädel von rechts

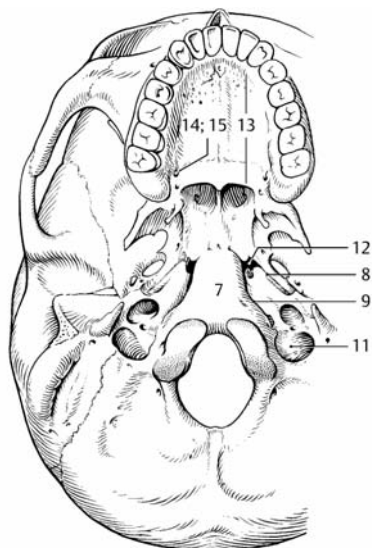


K Neugeborenschädel von oben

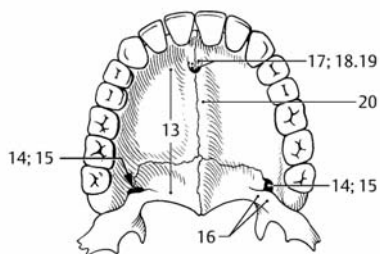
- 1 **Basis cranii.** Die Schädelbasis. AB
- 2 **Basis cranii interna.** Die Schädelbasis von innen. A
- 3 **Fossa cranii anterior.** Vordere Schädelgrube. Sie reicht von der Stirnwand bis zum kleinen Keilbeinflügel. A
- 4 **Impressiones gyrorum; Impressiones digitatae; Juxta cerebralia.** Fläche, den Großhirnwindungen entsprechende Rinnen. A
- 5 **Fossa cranii media.** Mittlere Schädelgrube. Sie reicht vom kleinen Keilbeinflügel bis zum Felsenbeinfirst. A
- 6 **Fossa cranii posterior.** Hintere Schädelgrube. Sie reicht vom Felsenbeinfirst bis an die hintere Schädelwand. A
- 7 **Clivus.** Nach hinten abfallendes Knochenstück zwischen der Türkensattellehne und dem Foramen magnum. Es wird vom Os occipitale und vom Keilbein gebildet. A B
- 8 **Fissura sphenopetrosa.** Mediale Fortsetzung der Fissura petrosquamosa. Ihre Erweiterung bildet das Foramen lacerum. Durchtritt des N. petrosus minor. Austritt der Chorda tympani aus dem Schädel. A B
- 9 **Fissura petrooccipitalis.** Sie liegt medial in Fortsetzung des Foramen jugulare zwischen Felsenbein und Hinterhauptsbein. A B
- 10 **Basis cranii externa.** Die Schädelbasis von außen. B
- 11 **Foramen jugulare.** Bindegewebig geteiltes Loch zwischen Os occipitale und Os petrosum. Mündung von Sinus sigmoideus und Sinus petrosus inferior. Durchtritt von V. jugularis interna und Nn. IX, X, XI. A B
- 12 **Foramen lacerum.** Unregelmäßig begrenztes, mit Faserknorpel verschlossenes Loch zwischen Felsenbeinspitze und Keilbein in der mittleren Schädelgrube. Durchtritt von N. petrosus profundus und N. petrosus major. A B
- 13 **Palatum osseum.** Knöcherner Gaumen. B C
- 14 **Canalis palatinus major.** Von Gaumenbein und Oberkiefer gebildeter Kanal für die A. palatina descendens und den N. palatinus major. B C, S. 43 C
- 15 **Foramen palatinum majus.** Es liegt nahe dem Hinterrand des knöchernen Gaumens zwischen Gaumen- und Oberkieferbein. Ende des Canalis palatinus major. B C
- 16 **Foramina palatina minora.** Öffnungen der Canales palatini minores. C
- 17 **Fossa incisiva.** Etwa streichholzkopfgröße mit Epithelpfropf verschlossene Grube, in die die Canales incisivi mit ihren Foramina incisiva münden. C
- 18 **Canales incisivi.** Sie beginnen am Boden der Nasenhöhle jeweils seitlich der Scheidewand und münden am Dach der Mundhöhle gemeinsam in die Fossa incisiva. C
- 19 **Foramina incisiva.** Zwei bis vier Mündungsöffnungen der Canales incisivi. C
- 20 **[Torus palatinus].** Gelegentlicher Längswulst, mundhöhlenwärts in der Mittellinie des harten Gaumens. C
- 21 **Canalis palatovaginalis.** Feiner Kanal zwischen Processus vaginalis des Keilbeins und dem Processus sphenoidalis des Gaumenbeins für einen Ast der A. maxillaris und den R. pharyngeus des Ganglion pterygopalatinum. S. 30.8
- 22 **Canalis vomerovaginalis.** Feiner Kanal zwischen Processus vaginalis des Keilbeins und Vomer für einen Ast der Arteria sphenopalatina. S. 30.9
- 23 **Canalis vomerorostralis.** Kanälchen zwischen Vomer und Rostrum sphenoidale.
- 24 **Orbita.** Augenhöhle mit Augapfel und seinen Anhangsgebilden.
- 25 **Cavitas orbitalis.** Augenhöhle. D
- 26 **Aditus orbitalis.** Vordere Öffnung der Augenhöhle. D
- 27 **Margo orbitalis.** Augenhöhlenrand. D
- 28 **Margo supraorbitalis.** Oberer Rand des Aditus orbitalis. D
- 29 **Margo infraorbitalis.** Unterer Rand des Aditus orbitalis. D
- 30 **Margo lateralis.** Seitlicher Rand des Aditus orbitalis. D
- 31 **Margo medialis.** Medialer Rand des Aditus orbitalis. D



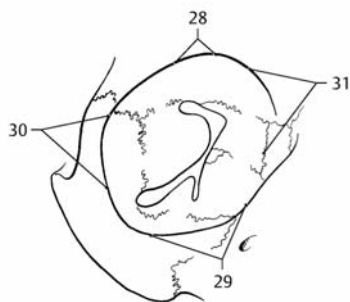
A Schädelbasis von oben



B Schädelbasis von unten

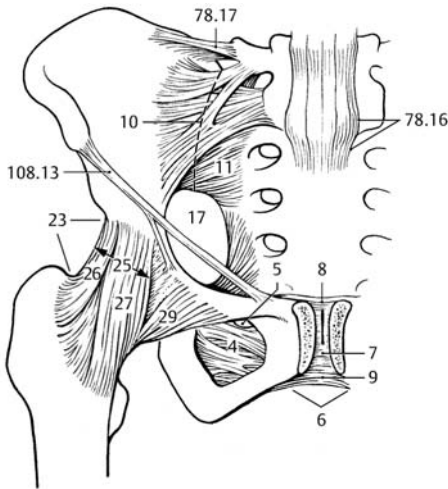


C Harter Gaumen von unten

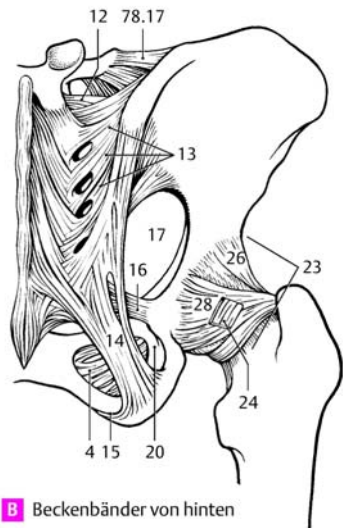


D Umriss der rechten Augenhöhle

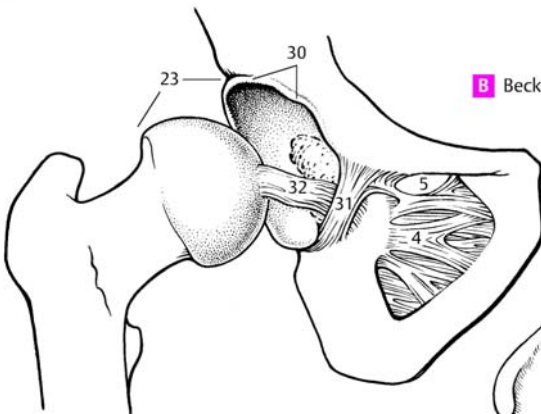
- 1 **JUNCTURAE MEMBRI INFERIORIS.** Verbindungen der unteren Gliedmaßen.
- 2 **JUNCTURAE CINGULI PELVICI.** Verbindungen des Beckengürtels.
- 3 **SYNDESMOSES CINGULI PELVICI.** Bandverbindungen des Beckengürtels.
- 4 **Membrana obturatoria.** Verschlussmembrane des Foramen obturatum mit mediocranialer Ausparung als Anteil des Canalis obturatorius. Ursprung der Mm. obturatorius externus und internus. A B C D
- 5 **Canalis obturatorius.** Gebildet vom Sulcus obturatorius des Os pubis und der Membrana obturatoria. Durchtritt der Vasa obturatoria und des N. obturatorius. A C D
- 6 **Symphysis pubica.** Schambeinfuge. Eine Junctura cartilaginea zwischen den Schambeinböden. A
- 7 **Discus interpubicus; Fibrocartilago interpubica.** Fasernorpelplatte, beim Erwachsenen oft mit Medianspalt. Sie ist seitlich über hyalinen Knorpel mit den Ossa coxae verbunden. A
- 8 **Lig. pubicum superius.** Faserverbindung der oberen Schambeinränder. A
- 9 **Lig. pubicum inferius.** Bandauskleidung des Schambeinwinkels. A
- 10 **Articulatio sacroiliaca.** Amphiarthrose zwischen Kreuz- und Darmbein. Kann synostosieren. A
- 11 **Lig. sacroiliacum anterius.** Bandverbindungen von der Vorderseite des 1. und 2. Kreuzbeinwirbels zum Os ilium. A D
- 12 **Lig. sacroiliacum interosseum.** Bandverbindungen hinter dem Gelenk zwischen Tuberositas ossis sacri und Tuberositas iliaca. B
- 13 **Lig. sacroiliacum posterius.** Bandmassen hinter dem Ligamentum sacroiliacum interosseum zwischen Kreuz- und Darmbein. B
- 14 **Lig. sacrotuberale.** Starkes Band, das vom Os sacrum und Os ilium zum Tuber ischiadicum zieht. B D
- 15 **Processus falciformis.** Schmale Fortsetzung des Lig. sacrotuberale auf die Innenseite des Os ischii. B D
- 16 **Lig. sacrospinale.** Es zieht vom Os sacrum und Os coccygis zur Spina ischiadica und trennt das Foramen ischiadicum majus vom Foramen ischiadicum minus. B D
- 17 **Foramen ischiadicum majus.** Es wird aus der Incisura ischiadica majus dem Ligamentum sacrospinale und dem Ligamentum sacrotuberale gebildet. Durch das Foramen tritt der M. piriformis aus dem Becken und lässt die beiden folgenden Spalten entstehen. A B D
- 18 **[[Foramen suprapiriforme]].** Durchtritt von A. V. glutea superior und N. gluteus superior.
- 19 **[[Foramen infrapiriforme]].** Durchtritt von A. V. glutea inferior, N. gluteus inferior, A. V. pudenda interna, N. pudendus, N. ischiadicus und N. cutaneus femoris posterior.
- 20 **Foramen ischiadicum minus.** Es wird aus der Incisura ischiadica minor, dem Ligamentum sacrospinale und dem Ligamentum sacrotuberale gebildet. Durch das Foramen zieht der M. obturatorius internus aus dem Becken, A. V. pudenda interna und der N. pudendus nach innen zur Fossa ischioanal. B D
- 21 **JUNCTURAE MEMBRI INFERIORIS LIBERI.** Die Verbindungen der unteren freien Gliedmaßen.
- 22 **ARTICULATIONES MEMBRI INFERIORIS LIBERI.** Die Gelenke der freien unteren Extremität.
- 23 **Articulatio coxae; Articulatio coxofemoralis.** Das vom Acetabulum und Caput femoris gebildete Hüftgelenk. A B C
- 24 **Zona orbicularis.** Ringförmiges Band um den Femurhals auf der Gelenkinnenhaut. Es ist mit den äußeren Verstärkungsbändern verbunden und hilft den Kopf in der Pfanne sichern. B
- 25 **Lig. iliofemorale.** Starkes vorderes Band von der Spina iliaca anterior inferior zur Linea intertrochanterica. Es verläuft in zwei Vorzugsrichtungen. A
- 26 **Pars transversa.** Quer verlaufender, lateraler Anteil, der Außenrotation und Adduktion hemmt. A B
- 27 **Pars descendens.** Absteigender medialer Anteil, hemmt die Innenrotation. A
- 28 **Lig. ischiofemorale.** Es verläuft schraubenförmig vom Os ischii über den Schenkelhals zur Fossa trochanterica und strahlt auch in die Zona orbicularis ein. Es hemmt die Innenrotation. B
- 29 **Lig. pubofemorale.** Es zieht vom Os pubis medial in der Gelenkkapsel zur Zona orbicularis u. zum Femur proximal vom Trochanter minor. Es hemmt die Abduktion. A
- 30 **Labrum acetabuli.** Pfannenlippe, Fasernorpeliger Ring zur Ergänzung des knöchernen Acetabulum. C
- 31 **Lig. transversum acetabuli.** Es überzieht die Incisura acetabuli und ergänzt die Gelenkpfanne. C
- 32 **Lig. capitis femoris.** Intrakapsuläres Band, zieht von der Incisura acetabuli zur Fovea capitis femoris; ohne direkte mechanische Wirkung; Gefäßträger. C



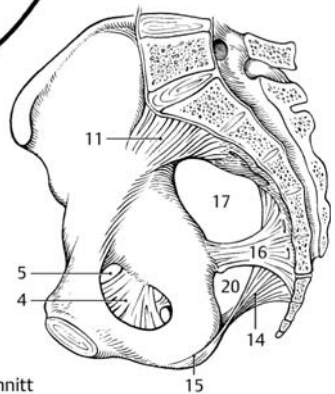
A Beckenbänder von vorne



B Beckenbänder von hinten

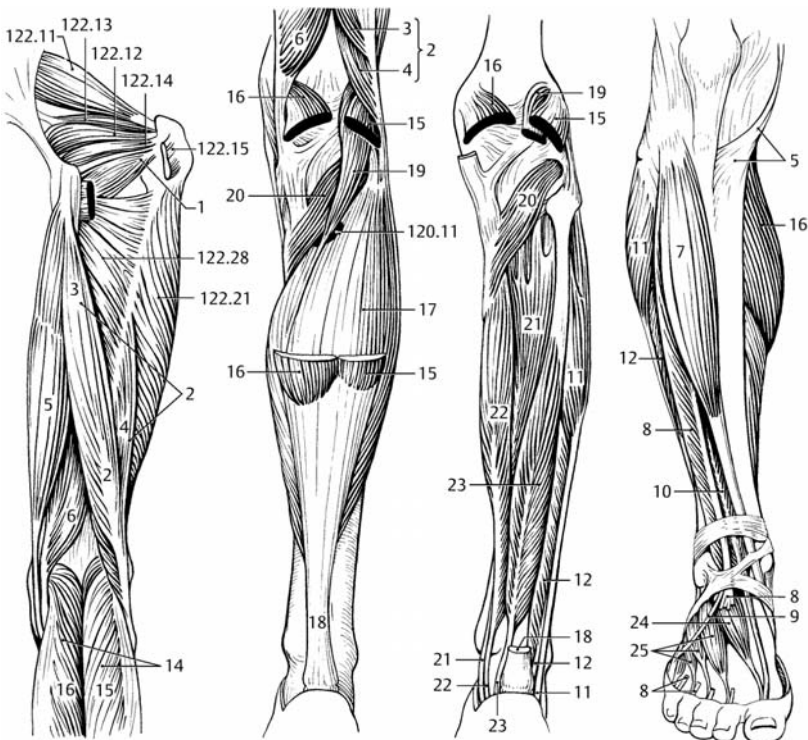


C Beckenbänder von medial



D Bänderbecken
Median-sagittalschnitt

- 4
- 1 **M. obturatorius externus.** U: Außenfläche der Membrana obturatoria und Umgebung. A: Fossa trochanterica. Außenroller und Adduktor im Hüftgelenk. I: N. obturatorius. A, S. 123 D
 - 2 **M. biceps femoris.** Mit zwei Köpfen von Becken und Femur entspringender Muskel. A: Am Caput fibulae. Beuger im Kniegelenk, Außenrotator. A B E F
 - 3 **Caput longum.** U: Tuber ischiadicum. Streckung, im Hüftgelenk. I: N. tibialis. A B
 - 4 **Caput breve.** U: Labium laterale lineae asperae. I: N. fibularis. A B
 - 5 **M. semitendinosus.** U: Tuber ischiadicum. A: Mediale Tibiafläche [[Pes anserinus]]. Strecker im Hüftgelenk. Beuger u. Innenroller im Kniegelenk. I: N. tibialis. A D E
 - 6 **M. semimembranosus.** U: Tuber ischiadicum. A: Condylus medialis tibiae und Lig. popliteum obliquum. Er ist z.T. vom Semitendinosus bedeckt. Strecker im Hüftgelenk. Beuger und Innenroller im Kniegelenk. Kniegelenkscapselspanner. I: N. tibialis. A B F
 - 7 **M. tibialis anterior.** U: Seitenfläche der Tibia, Membrana interossea, Unterschenkel faszie. A: Innenseiten des Os cuneiforme mediale und des Os metatarsale I. Dorsalflektor und Supinator des Fußes. I: N. fibularis profundus. D E
 - 8 **M. extensor digitorum longus.** U: Condylus lateralis tibiae, Membrana interossea, Fibula, Fascia cruris. A: Dorsalaponeurose der Zehen 2.–5. Dorsalflektor und Pronator d. Fußes. Zehenstrecker. I: N. fibularis profundus. D E
 - 9 **M. fibularis tertius; M. peroneus tertius.** Abspaltung des M. extensor digitorum longus mit Ansatz an der Basis des Os metatarsale V. Dorsalflektor und Pronator. I: N. fibularis profundus. D
 - 10 **M. extensor hallucis longus.** U: Membrana interossea und Fibula. A: Endphalanx der großen Zehe. Dorsalflektor des Fußes und der Großzehe. I: N. fibularis profundus. DE
 - 11 **M. fibularis longus; M. peroneus longus.** U: Fibula und Unterschenkel faszie. A: Schräg unter der Fußsohle am Os cuneiforme mediale und Os metatarsale I. Pronator und Plantarflektor. I: N. fibularis superficialis. C D E F
 - 12 **M. fibularis brevis; M. peroneus brevis.** U: Distale 2/3 der Fibula. A: Tuberositas ossis metatarsale V. Pronator u. Plantarflektor. I: N. fibularis superficialis. C D E F
 - 13 **M. triceps surae.** Die aus dem M. gastrocnemius und dem M. soleus bestehende Muskelgruppe, welche die Achillessehne bildet. Sie inseriert am Tuber calcanei. I: N. tibialis.
 - 14 **M. gastrocnemius.** Der aus den beiden folgenden Köpfen gebildete oberflächliche Wadenmuskel. Beuger im Kniegelenk, Plantarflektor und Supinator im Fußgelenk. A B C D
 - 15 **Caput laterale.** U: Proximal vom Condylus lateralis femoris. A: Achillessehne. A B C
 - 16 **Caput mediale.** U: Proximal vom Condylus medialis femoris. A: Achillessehne. A B C D
 - 17 **M. soleus.** U: Fibulakopf, hinteres oberes Drittel Facies posterior tibiae. A: Achillessehne. Plantarflektor und Supinator. B F
 - 18 **Tendo calcaneus (Achillis).** Die am Tuber calcanei ansetzende Sehne des M. triceps surae. BC
 - 19 **M. plantaris.** U: Über dem Condylus lateralis femoris. A: Achillessehne od. Tuber calcanei. I: N. tibialis. B C
 - 20 **M. popliteus.** U: Epicondylus lateralis femoris. A: Facies posterior tibiae. Dreht bei gebeugtem Knie den Unterschenkel einwärts. I: N. tibialis. B C F
 - 21 **M. tibialis posterior.** U: Tibia, Fibula, Membrana interossea. A: Os naviculare, Ossa cuneiformia I–III, Ossa metatarsi II–IV. Plantarflektor und Supinator. I: N. tibialis. C F
 - 22 **M. flexor digitorum longus.** U: Tibia. A: Endphalangen der Zehen II–V. Plantarflektor, Supinator, Zehenbeuger. I: N. tibialis. C F
 - 23 **M. flexor hallucis longus.** U: Fibula. A: Endglied der Großzehe. Plantarflektor, Supinator, Großzehenbeuger. I: N. tibialis. C F
 - 24 **M. extensor hallucis brevis.** U: Dorsal am Calcaneus A: Großzehengrundglied. Streckt die Großzehe. I: N. fibularis profundus. D
 - 25 **M. extensor digitorum brevis.** U: Dorsal am Calcaneus. A: Dorsalaponeurosen der Zehen II–IV. Zehenstrecker. I: N. fibularis profundus. D

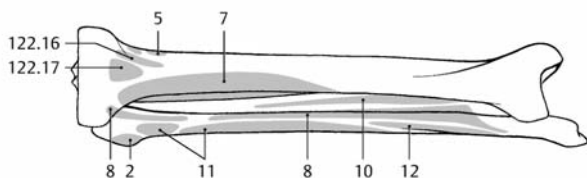


A Oberschenkel von hinten

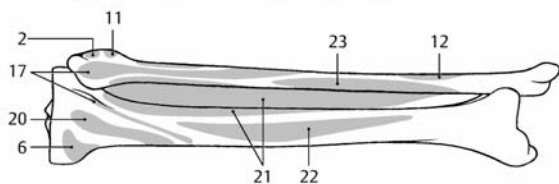
B Unterschenkel von hinten

C Unterschenkel von hinten, tiefere Schicht

D Unterschenkel von vorne

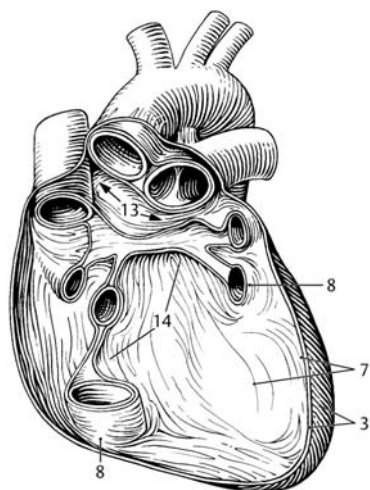


E Tibia und Fibula von vorne

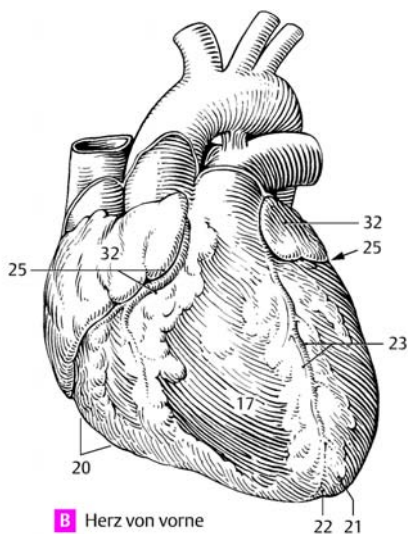


F Tibia und Fibula von hinten

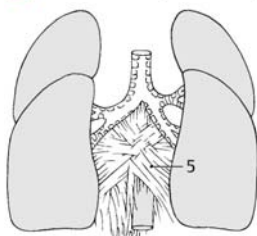
- 1 **SYSTEMA CARDIOVASCULARE.** Herz- und Gefäßsystem.
- 2 **Pericardium.** Hüll- und Gleitsystem des Herzens. Es besteht aus einem fibrösen und einem zweiblättrigen serösen Anteil. A
- 3 **Pericardium fibrosum.** Äußerer, straffer Bindegewebsanteil. Seine kollagenen Fasern sind schergitterförmig angeordnet. Er ist zum Teil mit dem Zwerchfell verwachsen. A
- 4 **Ligg. sternopericardiaca.** Verbindungsbänder zwischen Pericard und Sternum.
- 5 **Membrana bronchopericardiaca.** Frontale Bindegewebsplatte hinter und verbunden mit dem Pericard. Mit ihren sich kreuzenden Kollagenfaserverstärkungen dehnt sie sich aus zwischen Bifurkation der Trachea, Hauptbronchien, Ligg. pulmonalia und Zwerchfell. Sie koordiniert deren Bewegungsabläufe bei der Atmung und Rückneigung des Kopfes. C
- 6 **Pericardium serosum.** Mit einschichtigem Mesothel versehener Überzug der Innenfläche des Pericardium fibrosum und der Herzoberfläche.
- 7 **Lamina parietalis.** Seröser Überzug des Herzbeutels. Er geht im Bereich der großen Gefäße auf das Epicard über. A
- 8 **Lamina visceralis; Epicardium.** Seröser Überzug des Herzens. Er geht im Bereich der großen Gefäße in die Lamina parietalis über. A
- 9 **Tunica serosa.** Auf einer zarten Bindegewebschicht sitzt ein einschichtiges Plattenepithel mesodermaler Herkunft, das Mesothel.
- 10 **Tela subserosa.** Bindegewebige Verschiebschicht unter der Tunica serosa. Sie ist gefäßreich.
- 11 **Plica venae cavae sinistrae.** Auffaltung des Pericard an der Hinterwand. Obliterierte embryonale V. cava superior sinistra.
- 12 **Cavitas pericardiaca.** Spaltraum mit serösem Flüssigkeitsfilm zwischen den Blättern des Pericardium serosum.
- 13 **Sinus transversus pericardii.** Gang der Pericardhöhle hinter der Pars aorta ascendens sowie dem Truncus pulmonalis und vor den Venen. A
- 14 **Sinus obliquus pericardii.** Nische im Pericardraum zwischen rechten Lungenvenen und Vena cava inferior einerseits und linken Lungenvenen. A
- 15 **COR.** Herz.
- 16 **Basis cordis.** Herzbasis. Der Herzspitze gegenüberliegende, breite, nach dorsal rechts oben weisende Fläche des annähernd kegelförmigen Herzens. Sie wird zur Hauptsache von der Hinterwand des linken Vorhofs gebildet. Hier entspringen und münden die Vasa publica und Vasa privata.
- 17 **Facies sternocostalis; Facies anterior.** Nach vorn gerichtete konvexe Fläche des Herzens. B D
- 18 **Facies diaphragmatica; Facies inferior.** Untere flache, das Zwerchfell berührende Herzfläche. D
- 19 **Facies pulmonalis.** Seitlich von den Lungen berührte Herzoberfläche. D
- 20 **Margo dexter.** Rechter, am Leichenherzen oft scharfkantiger Rand. B
- 21 **Apex cordis.** Nach vorn links unten weisende Herzspitze. Sie wird vom linken Ventrikel gebildet. B
- 22 **Incisura apicis cordis.** Einschnitt rechts neben der Herzspitze. Übergang der beiden Sulci interventriculares ineinander. B
- 23 **Sulcus interventricularis anterior.** Vorn über dem Kammerseptum gelegene Längsfurche mit dem Ramus interventricularis anterior. B D
- 24 **Sulcus interventricularis posterior.** Dem Kammerseptum entsprechende Längsfurche in der Facies diaphragmatica mit dem Ramus interventricularis posterior. D
- 25 **Sulcus coronarius.** Kranzfurche. Sie verläuft der Vorhofkammergrenze entsprechend um das Herz. B E
- 26 **Ventriculus cordis dexter/sinister.** Herzkammer. Der funktionellen Beanspruchung gemäß ist die linke dickwandiger als die rechte. E
- 27 **Septum interventriculare.** Trennwand zwischen rechter und linker Herzkammer, von außen erkennbar durch die Sulci interventricularis anterior und posterior.
- 28 **Pars muscularis.** Muskulöser Teil des Kammerseptums. E
- 29 **Pars membranacea.** Oben an der Aortenausflußbahn gelegener kurzer, dünner, fibröser Anteil des Kammerseptums. Er ist aus Endokard entstanden. E
- 30 **Septum atrioventriculare.** Über der Wurzel der septalen Klappe gelegener Teil der Pars membranacea zwischen rechtem Vorhof und linker Kammer. E
- 31 **Atrium cordis dextrum/sinistrum.** Der dünnwandige Herzkammervorhof. E
- 32 **Auricula atrialis.** Herzohren. Handschuhfingerähnliche Ausstülpung der Vorhöfe. B E
- 33 **Septum interatriale.** Trennwand zwischen rechtem und linkem Vorhof.
- 34 **Ostium atrioventriculare dextrum/sinistrum.** Öffnungen zwischen Vorhöfen und Kammern. D
- 35 **Ostium trunci pulmonalis.** In den Truncus pulmonalis führende Öffnung des rechten Ventrikels. D
- 36 **Ostium aortae.** In die Aorta führende Öffnung des linken Ventrikels. D



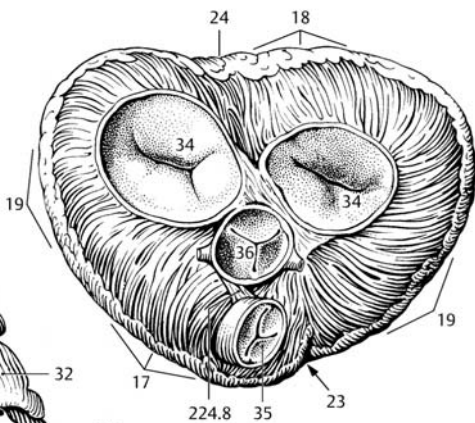
A Herzbeutel mit großen Blutgefäßen



B Herz von vorne

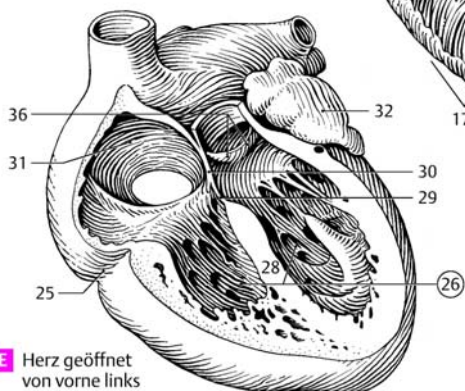


C Membrana bronchopericardica



11

D Herzbasis ohne Vorhöfe



E Herz geöffnet von vorne links

- A**
- Abdomen 2.18
 Abductio 15.25
 Acetabulum 62.4
 Acromion 54.11
 Adductio 15.26
 Adenohypophysis 220.3
 Adhesio interthalamica 360.10
 Aditus ad antrum mastoideum 454.21
 – laryngis 170.24
 – orbitalis 22.26
 Adniculum lineae albae 108.28
 Agger nasi 164.38
 Aggregationes cellularum chemergicarum 396.1
 Ala cristae galli 38.5
 – lobuli centralis 356.13
 – major [Os sphen.] 28.24
 – minor [Os sphen.] 28.20
 – nasi 164.6
 – ossis ilii 62.15
 – – sacri 50.21
 – vomeris 38.32
 Allocortex 384.5
 Alveoli dentales 138.47; 42.10; 44.30
 Alveus hippocampi 384.33
 Amiculum olivare 328.17
 Amphiarthrosis 15.24
 Ampulla biliopancreatica 160.26
 – canaliculi lacrimalis 448.18
 – ductus deferentis 192.12
 – duodeni 150.3
 – hepatopancreatica 160.26
 – membranacea anterior 464.10
 – – lateralis 464.16
 – – posterior 464.12
 – ossea anterior 460.17
 – – lateralis 460.23
 – – posterior 460.19
 – recti 152.25
 – tubae uterinae 200.26
 Anastomosis arterioloventricularis 17.3
 – arteriovenosa 17.3
 Anatomia generalis 2.1
 – systemica 12.20; 20.1
 Angulus acromii 54.13
 – costae 52.16
 – frontalis 34.38
 – inferior scapulae 54.18
 – infrasternalis 52.43
 – iridocornealis 442.21
 – lateralis scapulae 54.19
 – mandibulae 46.2
 – mastoideus 34.41
 – occipitalis 34.39
 – oculi lateralis 446.11
 – – medialis 446.12
 – oris 134.15
 – pontocerebellaris 338.6
 – sphenoidalis 34.40
 Angulus sterni (Ludovici) 52.31
 – subpubicus 64.17
 – superior scapulae 54.20
 Ansa cervicalis 412.22
 – lenticularis 368.1; 390.22
 – peduncularis 368.4; 388.23
 – subclavia 426.22
 Antebrachium 2.26
 Anterior 4.12
 Antihelix 450.10
 Antitragus 450.17
 Antrum mastoideum 454.28
 – pyloricum 146.32
 Anulus conjunctivae 434.29
 – femoralis 120.3
 – fibrocartilagineus 452.29
 – fibrosus 78.4
 – – dexter/sinister [cor] 224.7
 – inguinalis profundus 108.25
 – – superficialis 108.17
 – iris major 438.6
 – – minor 438.7
 – lymphaticus cordiae 306.17
 – lymphoideus pharyngis 298.33
 – tympanicus communis 444.17
 – tympanicus 34.2
 – umbilicalis 108.27
 Anus 154.17
 Aorta 230.1
 – abdominalis 258.24
 – ascendens 230.2
 – descendens 258.1
 – thoracica 258.2
 Apertura aquaeductus cerebri 354.21
 – canaliculi cochleae 32.23
 – – vestibuli 32.16
 – ductus nasolacrimalis 166.5
 – externa canalis carotici 30.27
 – interna canaliculi cochleae 462.9
 – – canaliculi vestibuli 460.6
 – – canalis carotici 30.28
 – lateralis (Luschkae) 346.18
 – mediana (Magendii) 346.22
 – nasalis posterior 24.22; 164.20
 – pelvis inferior 64.22
 – – superior 64.21
 – piriformis 24.14
 – sinus frontalis 36.30
 – – sphenoidalis 28.18
 – thoracis inferior 52.39
 – – superior 52.38
 – tympanica canaliculi chordae tympani 454.27
 Apex auricularis 450.22
 – capitis fibulae 68.18
 – cartilaginis arytenoideae 168.22
 – cordis 222.21
 – cornu posterioris 320.5
 – cuspidis 136.31
 – dentis 50.14
 – linguae 140.10
 – nasi 164.5
 Apex ossis sacri 50.38
 – partis petrosae 30.25
 – patellae 68.34
 – prostaticae 194.6
 – pulmonis 176.5
 – radialis dentis 136.27
 – vesicae 186.9
 Apicalis 4.23
 Aponeurosis 16.33
 – bicipitalis 112.16
 – epicranialis 94.13
 – glutea 122.9
 – linguae 140.25
 – m. bicipitis brachii 112.16
 – m. erectoris spinae 102.9
 – palatina 142.17
 – palmaris 116.25
 – plantaris 120.18
 Apophysis 12.44
 Apparatus lacrimalis 448.7
 Appendices adiposae 152.10
 – epiploicae 152.10
 – omentales 152.10
 – vesiculosae 204.21
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 – fibrosa hepatis 156.17
 – testis 190.40
 – vermiformis 150.36
 Aqueductus cerebri (Sylvii) 354.20
 – cochleae 462.33
 – mesencephali 354.20
 – vestibuli 462.32
 Arachnoidea
 – mater 314.18
 – – cranialis 314.21
 – – encephali 314.21
 – – spinalis 316.2
 Arbor bronchialis 174.2
 – vitae 358.14
 Archicerebellum 358.10
 Archicortex 384.2
 Arcus alveolaris 42.9; 44.29
 – anterior atlantis 50.5
 – aortae 232.1
 – cartilaginis cricoideae 168.2
 – costalis 52.41
 – dentalis mandibularis 136.16
 – – maxillaris 136.15
 – ductus thoracis 312.8
 – iliopectineus 110.5
 – inguinalis 108.13
 – marginalis coli 262.16
 – palatoglossus 142.5
 – palatopharyngeus 142.7
 – palmaris profundus 256.13
 – – superficialis 256.31
 – palpebralis inferior 240.24
 – – superior 240.23
 – pedis longitudinalis 12.7
 – – transversus distalis 12.11
 – – transversus proximalis 12.10
 – plantaris profundus 270.25
 – – superficialis 270.30
 – posterior atlantis 50.8

- Arcus pubicus 64.16
 – superciliaris 36.5
 – tendineus 16.34
 – – fasciae pelvis 216.14
 – – musculi levatoris ani 218.10
 – – musculi solei 120.11
 – venae azygos 286.18
 – venosus dorsalis pedis 296.14
 – – jugularis 280.4
 – – palmaris profundus 288.34
 – – palmaris superficialis 288.26
 – – plantaris 296.18
 – vertebrae 48.5
 – zygomaticus 20.24
 Area amygdaloclaustralis 386.13
 – amygdaloidea anterior 386.16
 – amygdaloparhippocampalis 386.14
 – cochleae 462.28
 – cochlearis 462.28
 – contingens 138.23
 – cribrosa 182.38
 – gastrica 148.12
 – hypothalamica dorsalis 370.16
 – – intermedia 370.20
 – – lateralis 372.1
 – – posterior 372.6
 – – rostralis 370.2
 – intercondylaris anterior 66.36
 – – posterior 66.37
 – nervi facialis 462.23
 – nuda [hep.] 154.25
 – paraolfactoria 378.8
 – postrema 336.1; 346.23
 – preoptica 360.27; 372.2
 – pretectalis 362.16
 – retrochiasmatica 370.26
 – retroolivaris 326.22
 – septalis 388.24
 – spinalis X 324.24
 – subcallosa 378.6
 – transitionis amygdalopiri-
 formis 386.15
 – trapezoidea 194.21
 – vestibularis 346.10
 – – inferior 462.26
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 – alveolaris inferior 236.12
 – – superior anterior 238.2
 – – superior posterior 236.31
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 – appendicularis 262.11
 – arcuata 184.9; 270.4
 – ascendens 262.18
 – auricularis posterior 234.23
 – – profunda 236.10
 – axillaris 254.9
 – azygos vaginae 266.6
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 – brachialis 254.25
 – – superficialis 254.26
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 – caecalis anterior 262.9
 – – posterior 262.10
 – callosa mediana 244.5
 – callosomarginalis 244.10
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 – caroticotympaanicae 238.19
 – carotis communis 232.6
 – – externa 232.10
 – – interna 238.15
 – caudae pancreatis 260.32
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 – – anteromediales 242.25; 244.2
 – – breves 242.29
 – – posterolaterales 248.9
 – – posteromediales 246.20; 248.4
 – centralis longa 242.27
 – – retinae 240.2
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 – – anterior media 244.5
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 – – posterior 248.2
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 – – profunda 254.2
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 – – posteriores breves 240.9
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 – cochlearis communis 468.4
 – – propria 468.8
 – colica dextra 262.13
 – – media 262.15
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 – collateralis media 254.30
 – – radialis 254.31
 – – ulnaris inferior 254.33
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 – collicularis 248.7
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 – – commissuralis mediana 244.4
 – – communicans anterior 244.1
 – – posterior 238.32; 246.19
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 – – sinistra 230.17
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 – – palmares propriae 256.33
 – – plantares communes 270.28
 – – plantares propriae 270.29
 – dorsalis clitoridis 266.24
 – – nasi 240.27
 – – pedis 270.1
 – – penis 266.22
 – – scapulae 252.29; 252.30
 – ductus deferentis 264.30
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 – – suprema 254.3
 – interlobares renis 184.8
 – interlobulares hepatis 158.25
 – – renis 184.10
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