

Detailed three-dimensional anatomic characterization of the human and canine thyroarytenoid and cricothyroid muscles

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Abstract

Detailed muscle information has become decreasingly valuable. First, knowledge of laryngeal mechanics has increased and biomechanical models of the mechanism have become more complex and subject specific models are within reach. In addition, laryngological surgical procedures have become more detailed and precise with emphasis on voice, ventilation, and swallowing preservation, including partial muscle function. Therefore, detailed relations between portions of muscles and the resulting mechanical effectiveness (not just whole muscle control and laryngeal function) is needed. For example, it has become increasingly important to have more details of laryngeal muscle size, direction, muscle structure, muscle shape (e.g., shape of muscle at origin and insertion), and inter-muscle spatial relations. Presented in this paper are data of six human and three canine representations of the thyroarytenoid and cricothyroid muscles. From this resource, it is expected that biomechanical models of laryngeal mechanisms can take a needed step into realism in order to support and explore clinical phonosurgical therapies. Quantification of vocal fold geometry is necessary for the development of anatomically realistic and consistently defined experimental/computational models of the glottic and subglottic regions. Such models will facilitate the study of the influence of the subglottis in voice production. Updates to this memo can be downloaded at http://www.vocalfolds.org.

Keywords: laryngeal muscles, cricothyroid, thyroarytenoid, vocal folds

1. Introduction

Laryngeal muscles, with the surrounding cartilages and joints, posture the vocal folds via length change and abduction/adduction. Thus, as a primary mechanism behind posturing, laryngeal muscles are key to overall health (ventilation, swallowing, and effort closure of the airway¹) and voice (vocal onset, self-sustained oscillation, intensity, and pitch²⁻⁷).

Knowledge of laryngeal structure (e.g., cartilages and soft tissue) and musculature (e.g., intrinsic laryngeal muscles' orientation, strength, and type) is needed to understand the mechanisms of posturing and phonation. Previous studies of laryngeal muscles have largely been whole muscle descriptors, focusing on quantifying average size (i.e., length and cross-sectional area), overall orientation, and mechanical characteristics (e.g., stress-strain relations and contraction times). For example, Cox et al. described the size, length and direction of human and canine cricothyroid (CT) and thryoarytenoid (TA). Finally, whole muscle mechanical characteristics have been reported for many of the laryngeal muscles described.

Although studies like these have provided a valuable foundation for understanding laryngeal muscles, a disconnect often exists between the findings of previous whole muscle studies (which use averages as a complete picture of a particular muscle or group of muscles) and the intricacies of a muscle with non-uniform structure, shape, and function, as well as an entire laryngeal system with inter-muscle mechanical dependencies and relationships. For example, whole muscle studies cannot be used to explain why portions of individual laryngeal muscles have specific posturing functions²⁰⁻²⁵. Neither can they be used to explain how to compensate for some medical pathologies or post-operative conditions, which leave only portions of an individual muscle viable for laryngeal control^{26;27}. Further, previous whole muscle studies have not addressed inter-muscle spatial relations, which must be known to adequately understand and model such conditions as laryngeal asymmetry, a common symptom of numerous laryngeal pathologies. Thus, specific laryngeal information is particularly important for laryngeal models (of both phonation and posturing), the goal of which is often to lay the foundation to predict vocal injury (Gunter, 2003). If refinements were made to the basic assumptions and the anatomical information which these models are based, the results of small variations in glottal therapy and phonosurgical interventions such as vocal fold medialization could be accurately and noninvasively simulated (Rosa et al., 2003). Thus, detailed distributed muscle information, which would enhance the understanding of vocal fold mechanics, is essential.

The goal of this manuscript is to present fibre bundle orientations of human and canine CT (in particular, the pars recta, CTR, and the pars oblique, CTO) and TA. Specifically given are laryngeal muscle bundle origin and insertion points in three dimensions, and corresponding average muscle area, approximated with simple cross-sections

2. Data

No new data muscle data were collected for the current report. Rather, existing data from both the CT and TA muscles from six human males and three canines were taken from raw data²⁸. The larynges were prepared so that the major cartilages and intrinsic muscles remained in the framework. The cricothyroid muscle was exposed (specifically, the CTR and CTO). The TA muscle was exposed by removing the vocal fold mucosa and vocal ligament so that all of the TA muscle fibers were visible. A pin was inserted through both the CT and the TA joints to establish origin points and to keep the joints from moving. A three-dimensional mechanical positioning system with the vernier markings was used to measure ends of the muscle bundles with an accuracy of 0.1mm. For each specimen, the left CT and right TA were dissected. The three-dimensional origin and insertion positions were recorded for each bundle. As a bundle was removed, it was weighed using an electronic balance with 0.1mg accuracy. From this bundle weight and the length from the origin and insertion points, cross-sectional area was calculated. Cox *et al.*⁸ published the length of the TA (averaged from the bundles), as well as the area and the angle (direction) in the coordinate system defined in the paper. Also published were the averaged area, angle, and length of the total CT and its two portions, the CTR and CTO.

The raw data was recovered and presented into electronic spreadsheet tables (available with this Technical Memo) for easy access. The main spreadsheet is 'CoxThesisTables-Final.xls'. This spreadsheet contains all of the tables of data²⁸. The first tab (AppA) contains CT and TA three dimensional origin and insertion points for multiple muscle bundles for each of the human and canine specimen. The CTR and CTO are labeled. The second tab (AppB) lists the mass of each muscle bundle mass. The third tab (App C) has the length of each muscle bundle, which can



CT muscle from left larynx

also be calculated from AppA. Tab 4 (App D) is the calculated area of each bundle, assuming the density of muscle tissue of 0.001043 g/mm3. The last tab is an equation based sheet which can recalculate the areas for any given density.

3. Using the Data

TA muscle from right larynx

In addition to the tables, three other spreadsheets are provided along with a Matlab script. Two of the spreadsheets are the same information as the first two tabs of the larger spreadsheet presented before (CoxThisisTables_appA.xls, CoxThisisTables_appB.xls) while the third spreadsheet (CoxMuscleInfo.xls) contains information about where the data exists in the first two. For example, row three is the information for the first human larynx, with subsequent columns containing numbers used by the Matlab script to find appropriate data about this larynx. Row four is the data for the second larynx, and so on. Row nine is the first canine larynx with the third canine larynx data in row eleven. The Matlab script (CoxData.m) loads the data and plots it in two figures, one presenting the TA muscle and the other presenting the CT muscle.

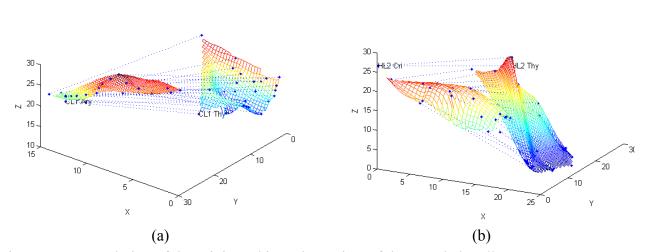


Figure 1. 3-D rendering of the origin and insertion points of the muscle bundles.

4. Accompanying Files

The files mentioned above were packaged in a compressed zip file called NLDR_05_v10.zip; which contains the following files

File	Description
CoxThesisTables-Final.xls	Full Data of muscle bundles
CoxData.m	Matlab script to create plots of muscle data
CoxMuscleInfo.xls	Used by CoxData.m to load various muscle data from the following two spreadsheets
CoxThisisTables_appA.xls CoxThisisTables_appB.xls	Subset of full data used by Matlab script Subset of full data used by Matlab script

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Use Agreement

The scripts, images and text are open to use by the public as a service and part of the National Resource of Laryngeal Data (supported by the National Institute of Deafness and other Communicative Disorders, and hosted by the National Center for Voice and Speech). The scripts, images, model and text enclosed in this memo and accompanying this memo are open to use by the public as a service of the NRLD. However, we ask the reader to respect the time and effort put into this manuscript and research. If the text, images, or included scripts are used, the user agrees to reference to this document, the NRLD, and the source of the original data. We also ask the users to consider contacting the original contributors of the data and give them the right of refusal to (1) participate on papers using the data and (2) have their supporting project acknowledged. The user agrees to freely share with the NLDR any extension software build on the data contained.

Revisions

1.0 Eric Hunter: Main document (March 2012)