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Actions of superior rectus

What does the superior rectus muscle do. Primary and secondary actions of superior rectus. Actions of the superior and inferior rectus.

Duções are monocular ocular movements. The movement of the eye is the feet; The temporal movement is sequel. Elevation (infraduà ±), respectively. Incycloduta (intrayion) is the nasal rotation of the eye is the feet; The temporal movement is sequel. Elevation and depression of the eye are called surswing SURSUMDuction (extorsion) is the temporal rotation of the vertical meridian. (See the image below.) Extroocular muscle actions. The primary muscle in the same eye that moves the eye in the same eye that moves the eye in the opposite direction of the agonist is the antagonist. For example, in the abduction of the right eye, the right eye, the right eye, the right eye, the agonist; The upper and lower medial rectum are antagonists. By the law of Sherrington, he increased innerability for any muscle (agonist) is accompanied by a corresponding decrease in innevision to his antagonists. [1, 2] Binocular ocular movements are conjugated (versions) or disconjugated (versions) or disco right, and the level is the movement of both eyes to the left. SURSUMVERSION (supravraversion) and DeorsumVersion (infraversion) are elevation and depression of both eyes, respectively. The yoke's muscles are the primary muscles in each eye that perform a certain version (for example, for the correct look, the right side rectum and the mothers of the left medial straight). Each extra-ocular muscle has a yoke muscle in the opposite eye to carry out versions in every position of the look. By the law of herring, the Jugo's muscles receive innevision equal and simultaneous. The magnitude of the ineffion is determined by the fixing eye, which means that the angle of deviation between the eyes (strabismus) may vary depending on which eye is being fixed. Primary deviation is misalignment, with normal ocular fixative. If paretic fixes, the secondary deviation to the versions (in which both eyes move in the same direction), the vergences are eye movements in opposite directions. The convergence is the movement of both eyes nose, and the divergence is the movement of both eyes temporarily. Vertical working up or the other eye moving downwards to the contralateral eye). Accommodative convergence is the movement of eyes stimulated by accommodation or concentrating on a nearby target. The abnormality of convergence and divergence of the fuses are optomotive reflexes that are designed to position the eyes, so that the image of consideration falls into the fan of each eye. This engine fusion is important to avoid diplopia (double vision). The action field of an extra-ocular muscle is the direction of the eye rotation when this muscle are more easily demonstrated. The knowledge of the fields of action is important; Strabberism often increases in the field of the action of a weak eye muscle. For patient education information, see the eye center and vision as well as anatomy of the eye. Superior Straight rember attached proximally to the ring and distally ring and distally behind the limbus (where the sclera and the cencils are reinted) in approximately the 12-hour position. The muscle crosses the medial of the eyeball to the upper and lower axis and the integers on the visual visual axle. The £ somaçà the vector Stocks and Ratios of these results in moving the visual look up and inside. The superior rectus A © £ currency innervated by the upper oculomotor nerve (CN III). MAosculo extraocular bringing the upper eye of the upper retrusview eye showing the aASA £ mAosculo extraocular bringing the upper eye of the upper retrusview eye showing the aASA £ mAosculo extraocular bringing the upper eye of the upper retrusview eye showing the aASA £ mAosculo extraocular bringing the upper eye of the nervosaselevates limbusnerveoculomotor, and rotates medially to intraysion bulbita98a15 .2.07.010ta22042fma49035anatÃ'mico Terms of músculo [edit in wikidata] The músculo superior rectus à © one músculo in órbita. One of extraocular muscles. Boundary £ à innervated by the oculomotor nerve upper (III). In the posiçà £ primária (looking forward), the main funçà £ â © £ the elevaçà although tamba m © £ intençà contribute to the aduçà and the £. EstÃ; associated with a series of sà © Conditions mà © tips, and can be weak, paralyzed, exagerativa or even congenitally absent in some people. The muscles of the Superior Reto sà £ o shown in this image of the right eye from above. Hover over the structures to their names. Click for more information. See Structure tamba © m: Muscle superior rectus \tilde{A} © £ currency provided by the upper oculomotor nerve (III). The superior rectus \tilde{A} oculo about 7.5 mm £ Insertion of the medial rectus \tilde{A} oculo about 7.1 mm £ Insertion of the lateral and rectified músculo around 7.9 the corneal Limbus. [1] HÃ; one intermuscular septum between it and the rectified músculo rare. [3] You can rarely have two parallel muscle bellies together. [3] More rarely, it may be congenitally absent. [4] [5] See the tamba Funçà £ © m: eye movement â â músculo straight rises higher adducts and helps to learn (rotate medially) the eye. Test means ¢ clinic INSTANCE The upper straight músculo that can raise the eye when in a estÃ; posiçà £ fully abducted. [6] Exoptalmo much of the venous drainage of órbita and extraocular muscles pass near the mÃosculo superior rectus. [7] The obstruçà the £ for this venous drainage can cause exophthalmos (ball protruding eyes). [8] This can be shown with CT scans. [7] The mÃosculo weakness and paralysis superior rectus can be paralyzed or weakened by £ conduçà problems with the nerve oculomotor nerve (III). [8] This can be congênito, often with a £ ligaçà the Generic © family ethics, or acquired, most often caused by lesões in the head. [8] The local serum exaggerating anestà © mÃnimo and avoid placing the needle in músculo. [9] Weakness of the lower rectum músculo can strengthen the superior rectus músculo, making it exaggerated. [9] Treatment may involve eye surgery which weakens or reposition the superior rectus músculo, which usually has good results. [9] Ausência very rarely, the superior rectus músculo can be congenitally absent. This can be caused by sÃndrome Apert. [4] This causes a reduced ability to raise the eye. [5] can be treated with ocular surgery that uses parts of the medial rectus and the lateral músculo músculo rectified to restore the functions normally performed by the superior rectus músculo. [5] Additional images anatÃ'micos This resource gallery needs cleaning to meet the mà © dico manual style. containing non-selective images of the subject article are discouraged; Please improve or remove the Gallery accordingly. (May 2015) The right eye on sagittal cutting, showing Bulbi Fascia (Semidiagrammatic). Upper upper upper municipal Multito Multito Multito Multito Multito Extrinsic eye muscle. Orbita nerves. Deep dissection. France or a B C apt, g (1980). "An anthathy reassessment of straight muscular insertions." Transactions of American ophthalmolagic society. 78: 365A 375. Issnã, 0065-9533. PMCA 1312149. 7257065. Pmidan, A B Nam, Yong Seok; Park, Yoooyeon; Kim, In-Beom; Shin, Sun Young (2019/07/10). 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