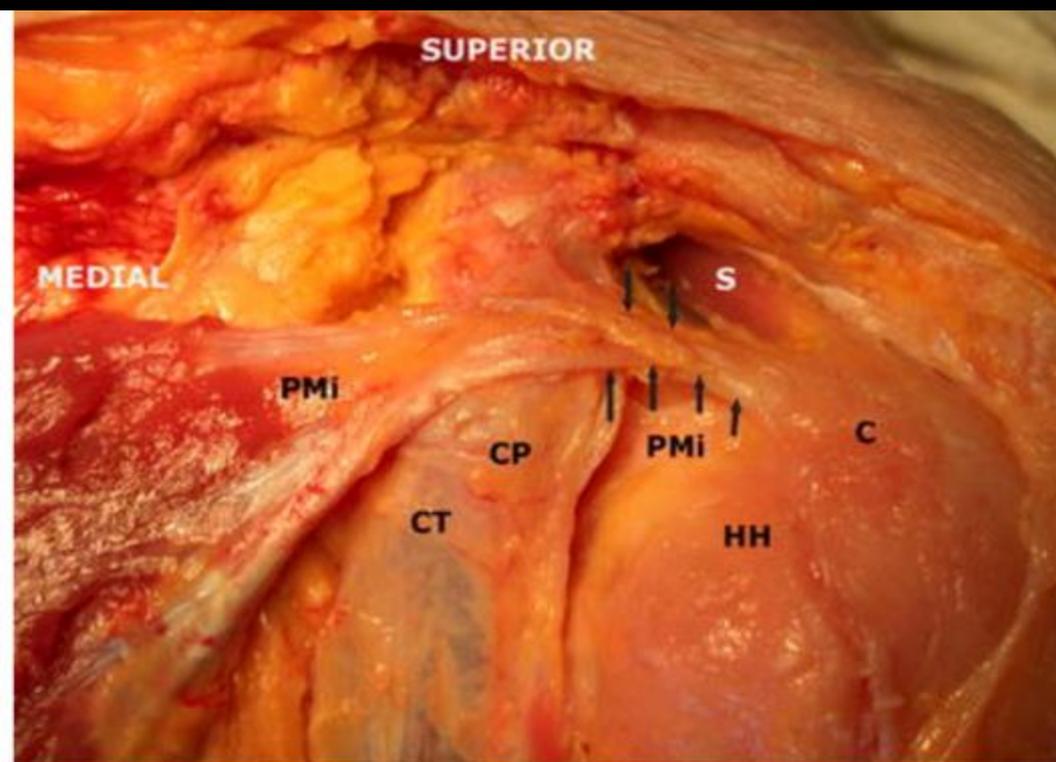


Aberrant insertion of pectoralis minor tendon

Prevalence: 15%; F>M; Left>right

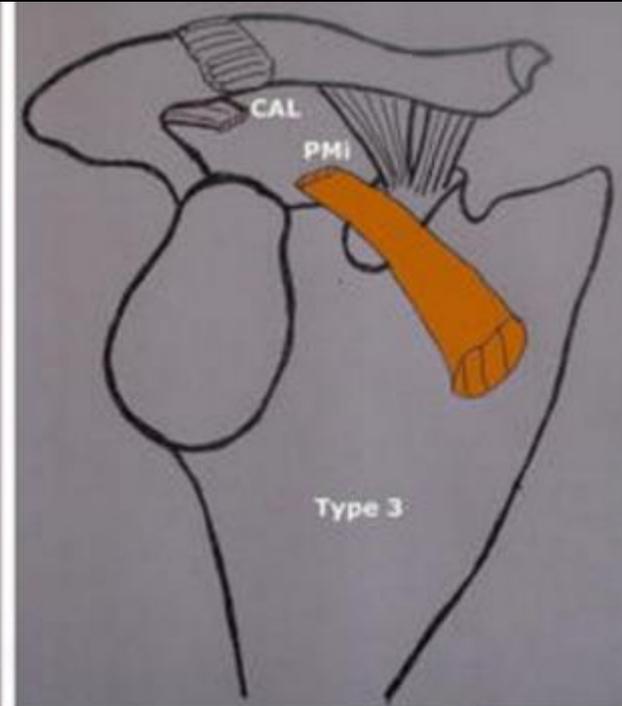
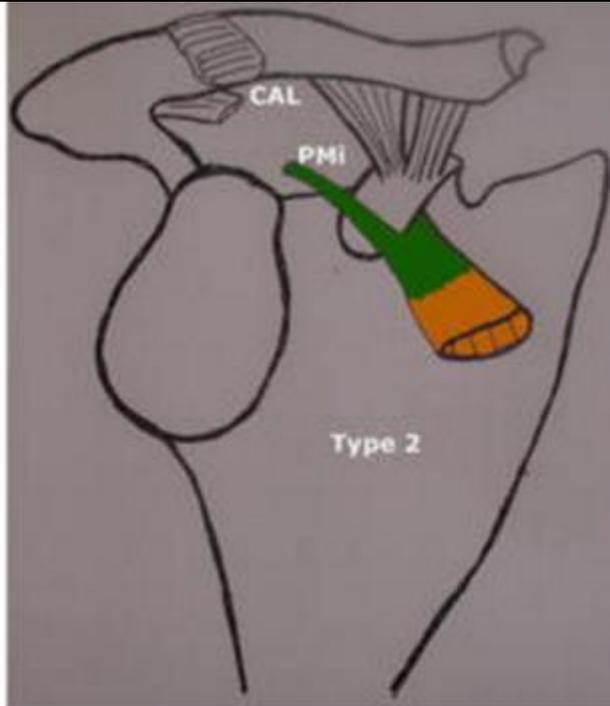
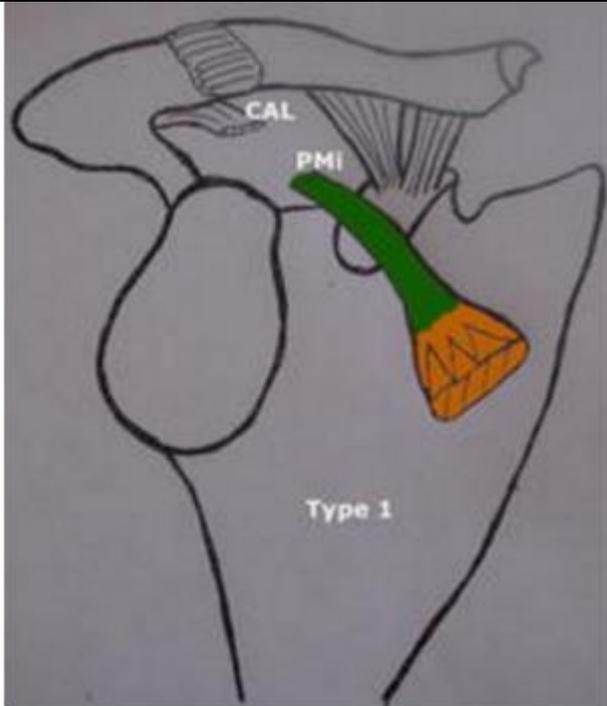
Normal insertion: anteromedial coracoid

Anomalous insertion: Superior glenohumeral joint capsule



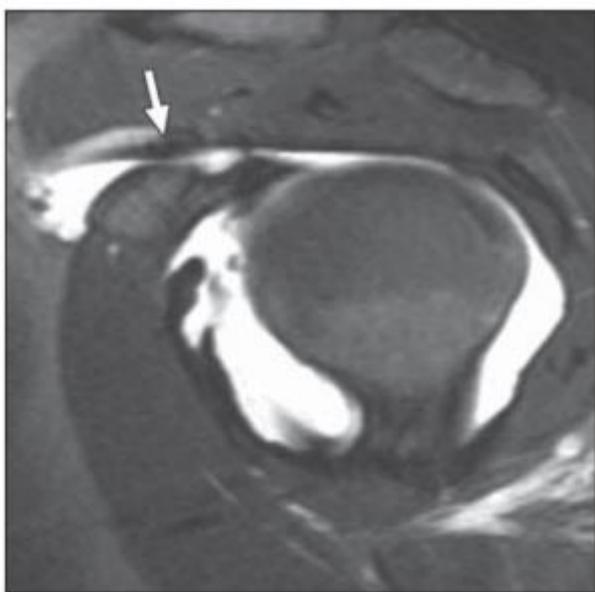
Homsi J Radiol 2003
Uzel Skeletal radiology 2008

Le Double classification

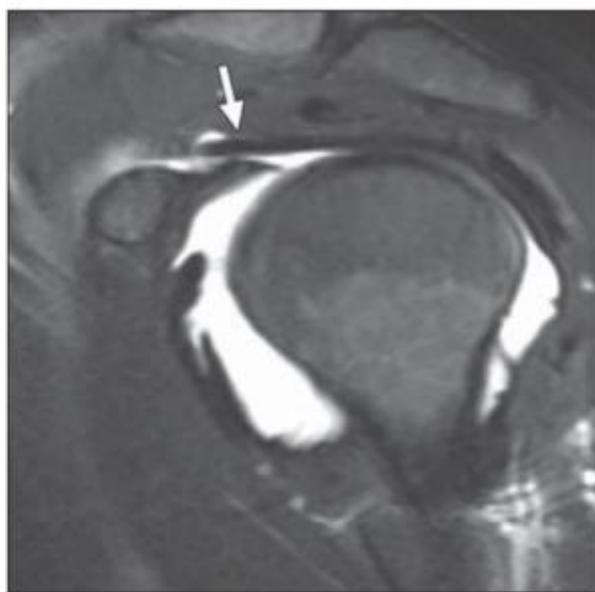


Take home point

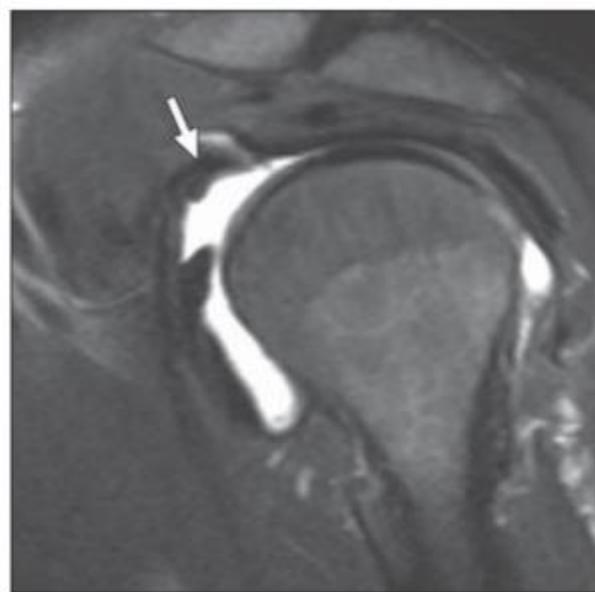
Aberrant insertion = Absent coracohumeral ligament



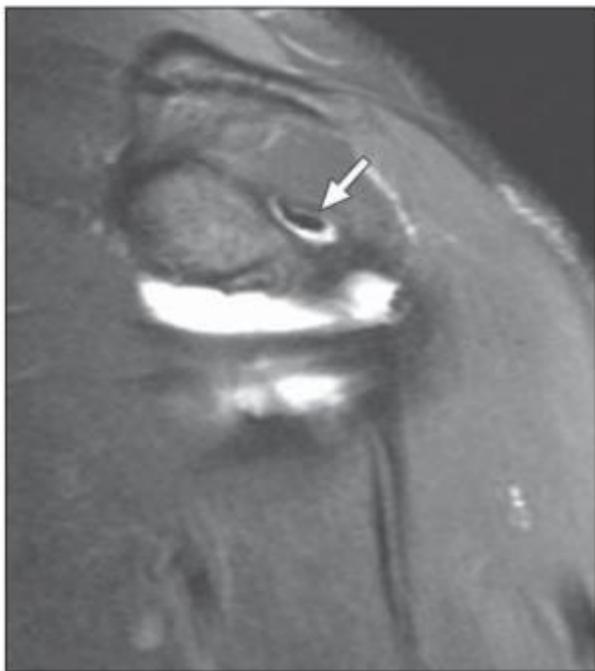
A



B



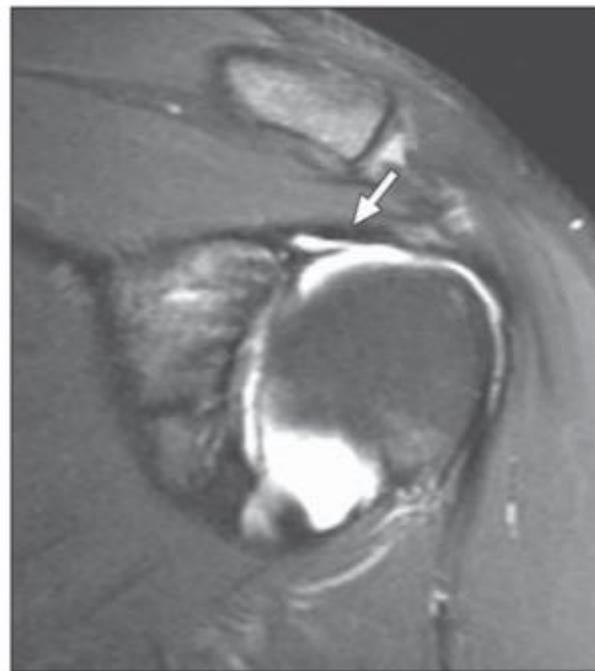
C



D



E



F

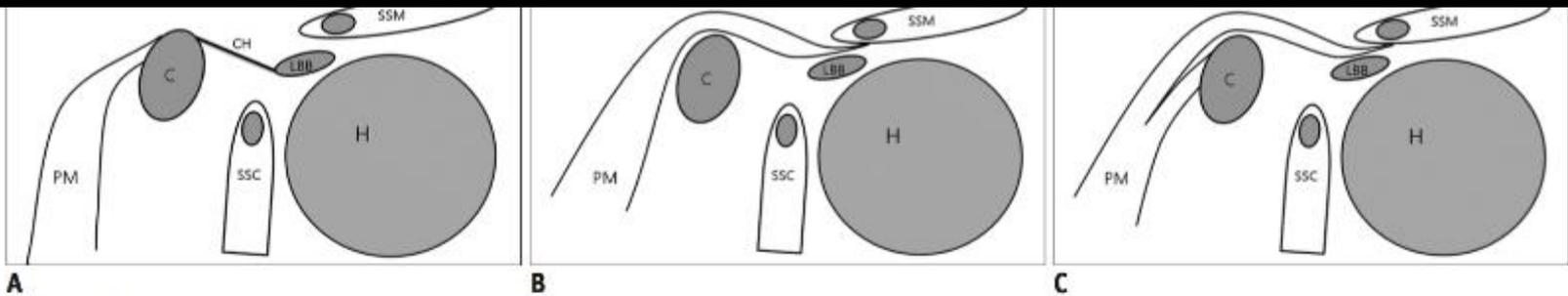
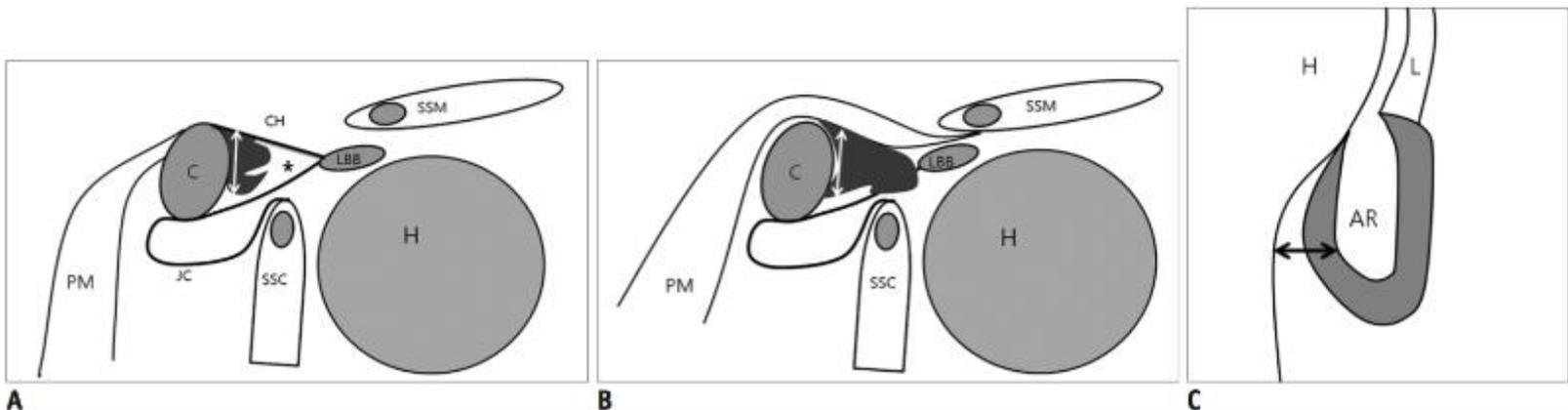


Fig. 1. Schematic diagram of insertion of pectoralis minor tendon (oblique sagittal images).

A. Normal type insertion of pectoralis minor tendon into coracoid process. **B.** Complete type ectopic insertion of pectoralis minor tendon (EIPMT). Pectoralis minor tendon is passing over coracoid process without inserting into coracoid process (Le Double type 1). **C.** Partial type EIPMT. Pectoralis minor tendon has some portion normally inserted into coracoid process as well as another portion with anomalous insertion passing over coracoid process (Le Double type II). C = coracoid process, CH = coracohumeral ligament, H = humeral head, LBB = long head of biceps brachii, PM = pectoralis minor muscle and tendon, SSC = subscapularis muscle, SSM = supraspinatus muscle



507 shoulder MRIs

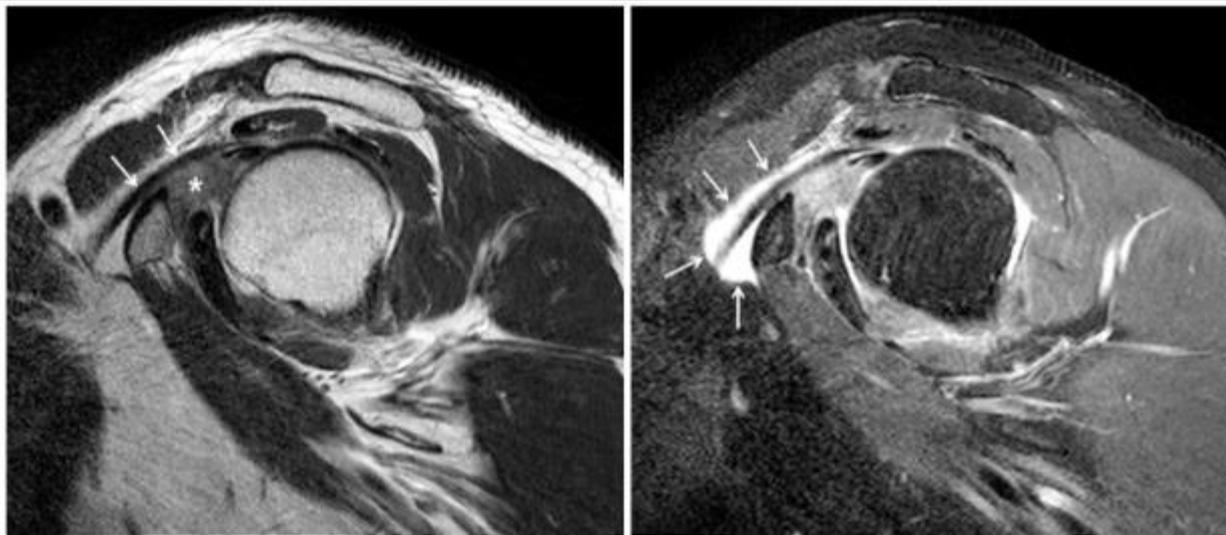
Measure fibrotic scar tissue thickness and grade in the subcoracoid triangle and axillary recess

Comparison between:

Normal and ectopic insertion

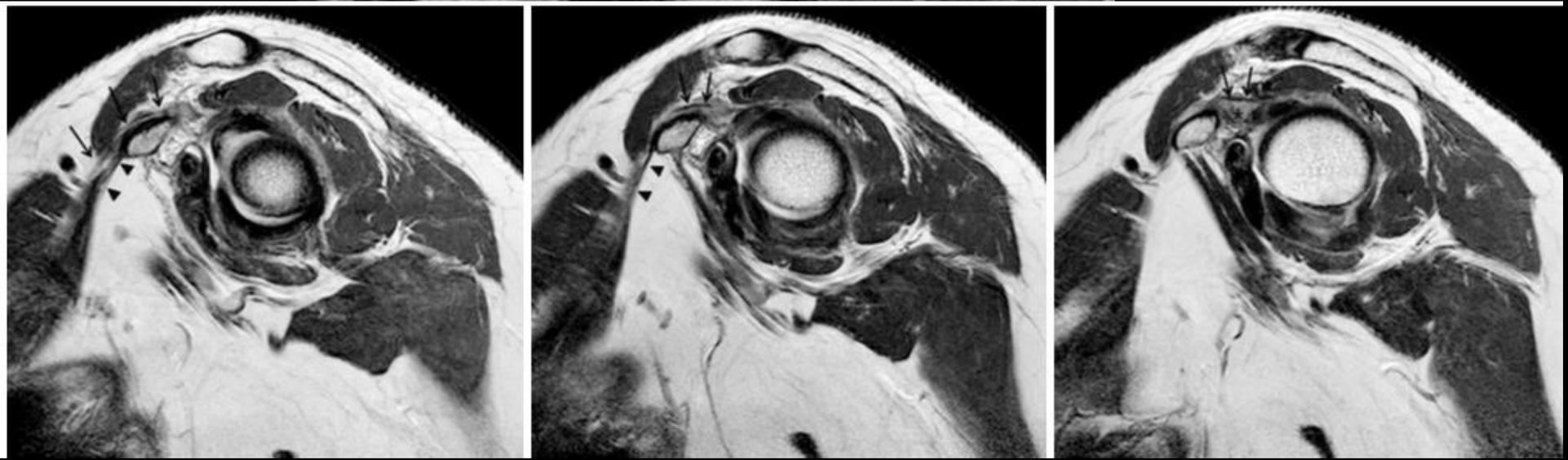
Complete and partial ectopic insertion

Lee, Korean J Radiol 2014



Normal

Complete ectopic insertion with severe scar



Partial ectopic insertion with moderate scar

Results

Ectopic insertion group Vs Control

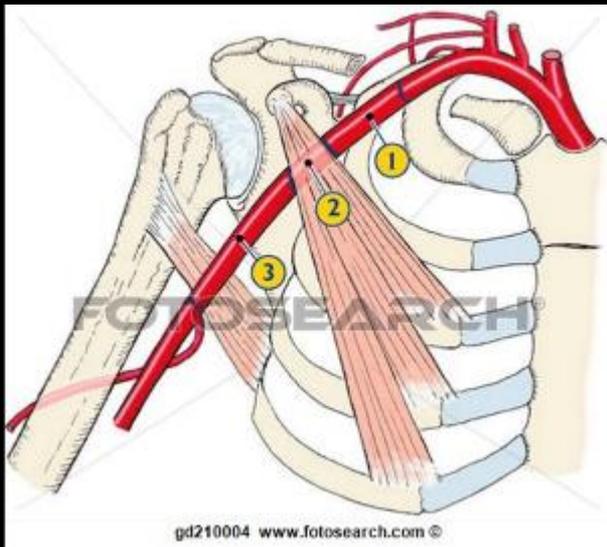
Fibrotic tissue in the subcoracoid triangle was thicker

Higher grade fibrotic scar tissue in the rotator interval

No significant change between partial and complete ectopic

Aberrant insertion of pectoralis minor tendon

- ? Clinical significance
 - Increase risk of SLAP tear
 - Subacromial or subcoracoid impingement
 - Limiting external rotation in adhesive capsulitis
 - Potential compression on Axillary artery → TOS
 - Tension on repaired RCT



- Lee, Skeletal radiology 2012
- Tubbs, Clin Anat 2005
- Turgut Surg radiol Anat 2000
- Yoo , J Shoulder Elbow Surg 2010