



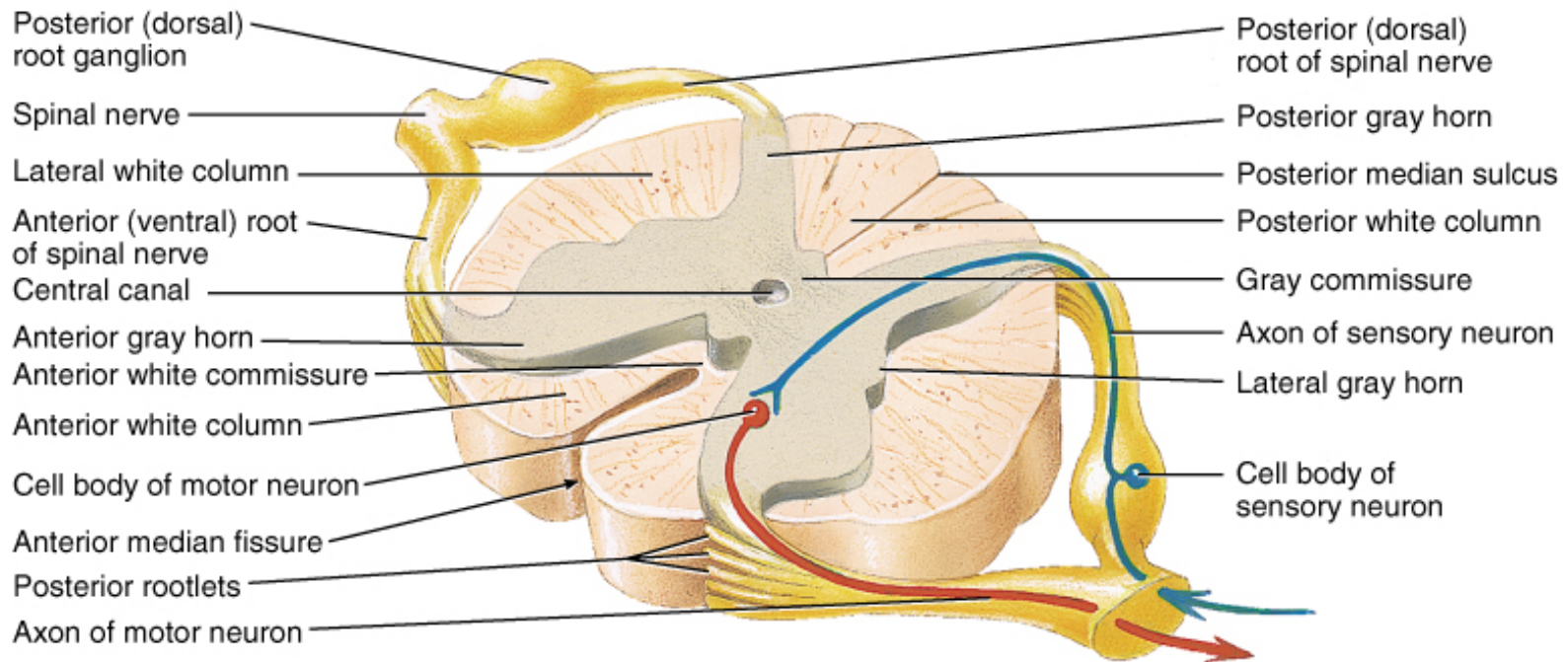
THE NERVOUS SYSTEM

HEADING

VOCABULARY

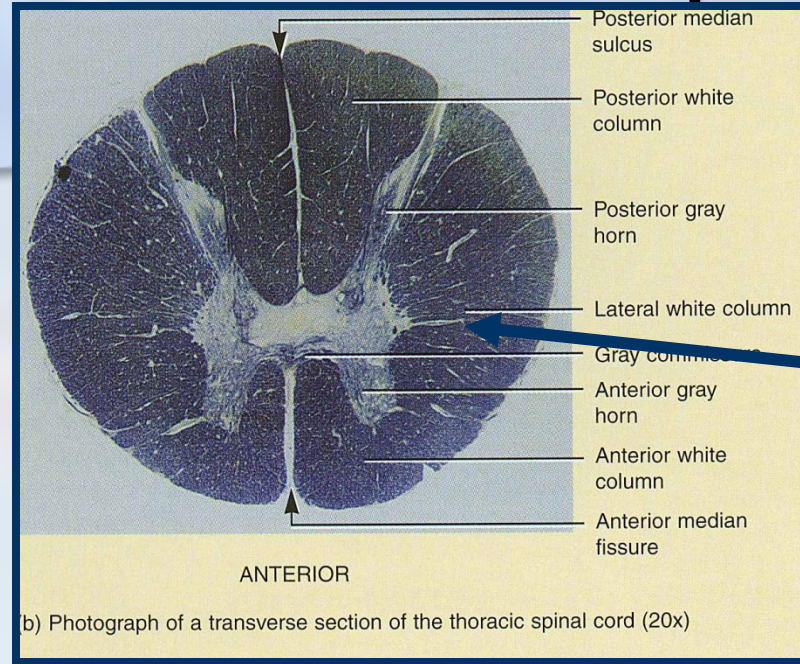
IMPORTANT INFO

Spinal Cord & Spinal Nerves



- Spinal nerves begin as roots
- Dorsal or posterior root is incoming sensory fibers
 - **Dorsal Root Ganglion** (swelling) = cell bodies of sensory nerves
- Ventral or anterior root is outgoing motor fibers

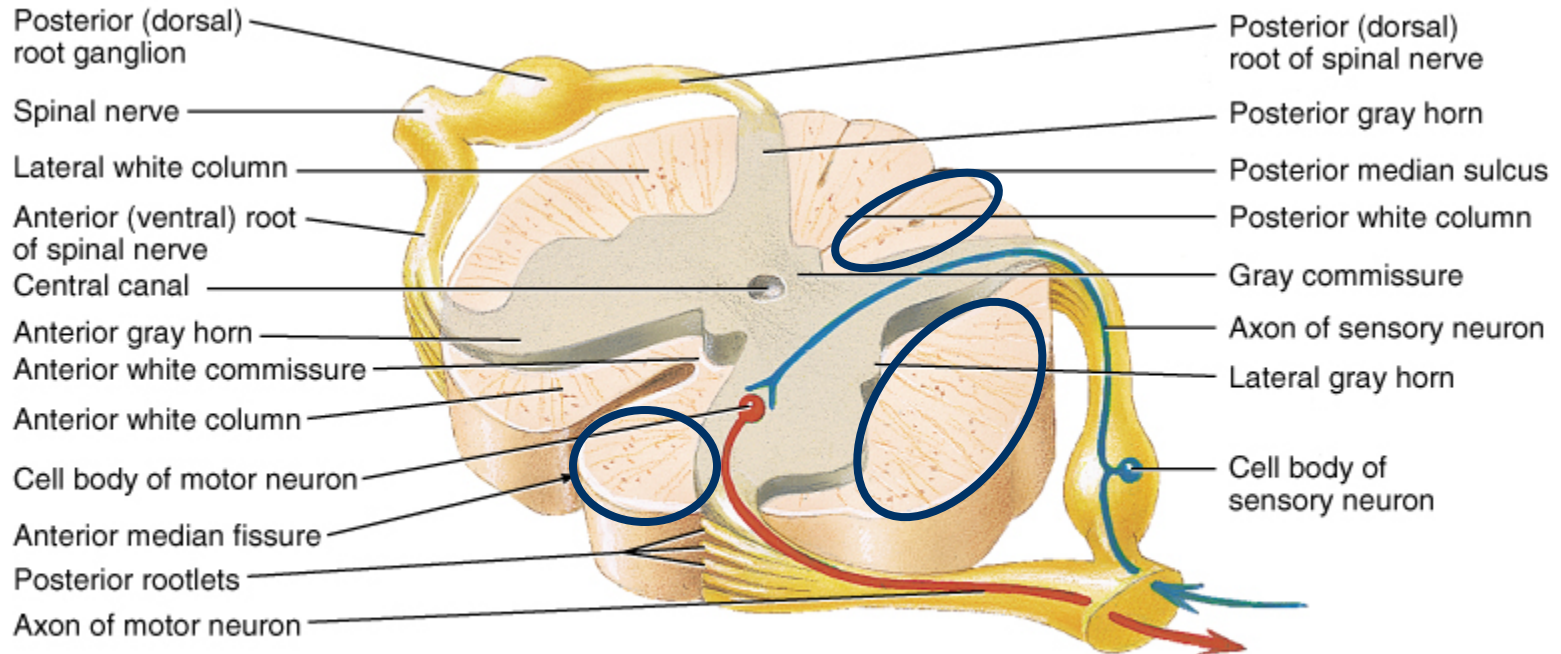
Gray Matter of the Spinal Cord



Note: colors in reverse due to staining of tissue

- **Gray matter** is shaped like the letter H or a butterfly
 - contains neuron cell bodies, unmyelinated axons & dendrites
 - paired dorsal and ventral gray horns
 - lateral horns only present in thoracic spinal cord
 - gray commissure crosses the midline
- Central canal continuous with 4th ventricle of brain

White Matter of the Spinal Cord

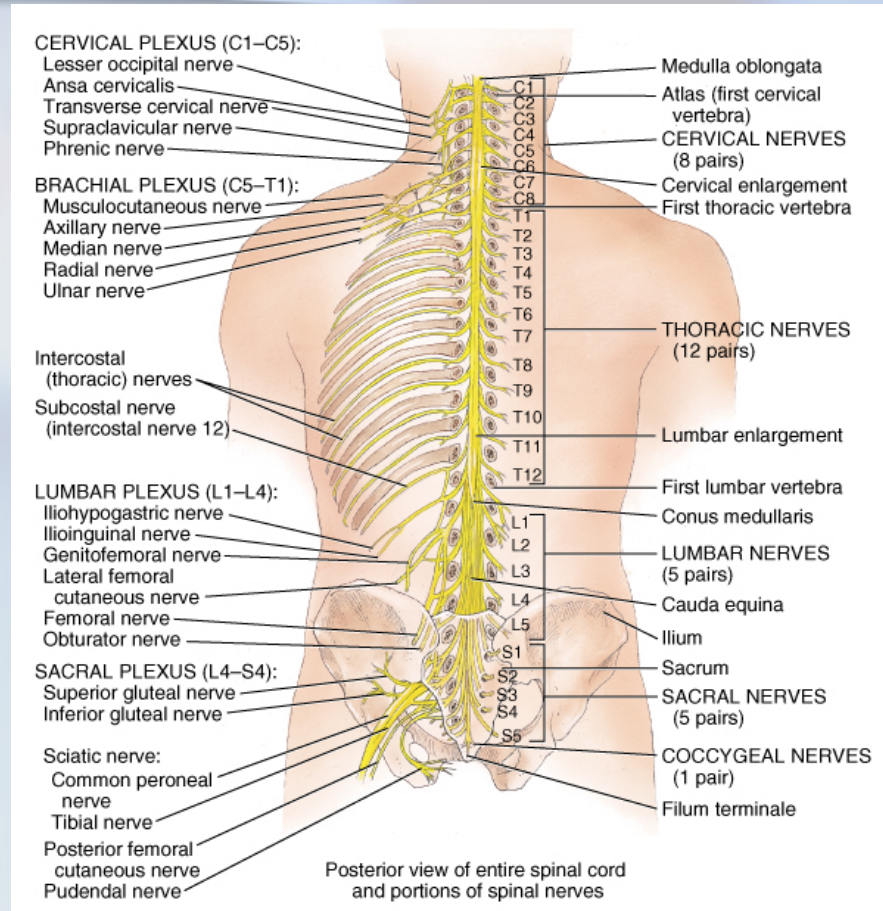


- **White matter** covers gray matter
- Anterior median fissure deeper than Posterior median sulcus
- Anterior, Lateral and Posterior White Columns **contain axons that form ascending & descending tracts**

Spinal Nerves



- 31 Pairs of spinal nerves
- Named & numbered by the cord level of their origin
 - 8 pairs of cervical nerves (C1 to C8)
 - 12 pairs of thoracic nerves (T1 to T12)
 - 5 pairs of lumbar nerves (L1 to L5)
 - 5 pairs of sacral nerves (S1 to S5)
 - 1 pair of coccygeal nerves
- Mixed sensory & motor nerves



Disorders

■ Neuritis

- inflammation of nerves
- caused by injury, vitamin deficiency or poison

■ Shingles

- infection of peripheral nerve by chicken pox virus
- causes pain, skin discoloration, line of skin blisters

■ Poliomyelitis

- viral infection causing motor neuron death and possible death from cardiac failure or respiratory arrest

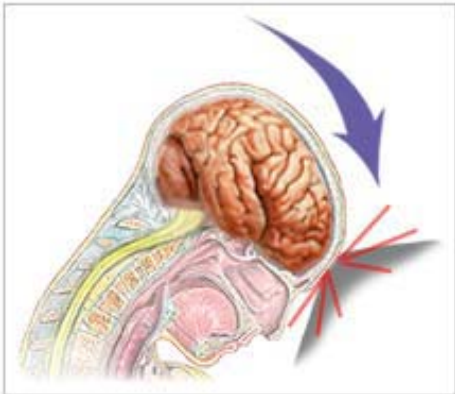


Shingles



Brain Injuries

A concussion is a violent jarring or shaking that results in a disturbance of brain function



ADAM.

- **Causes of damage**
 - displacement or distortion of tissue at impact
 - increased intracranial pressure
 - infections
 - free radical damage after ischemia
- **Concussion**---**temporary loss of consciousness**
 - headache, drowsiness, confusion, lack of concentration
- **Contusion**--**bruising of brain (less than 5 min unconsciousness but blood in CSF)**
- **Laceration**--**tearing of brain (fracture or bullet)**
 - increased intracranial pressure from hematoma

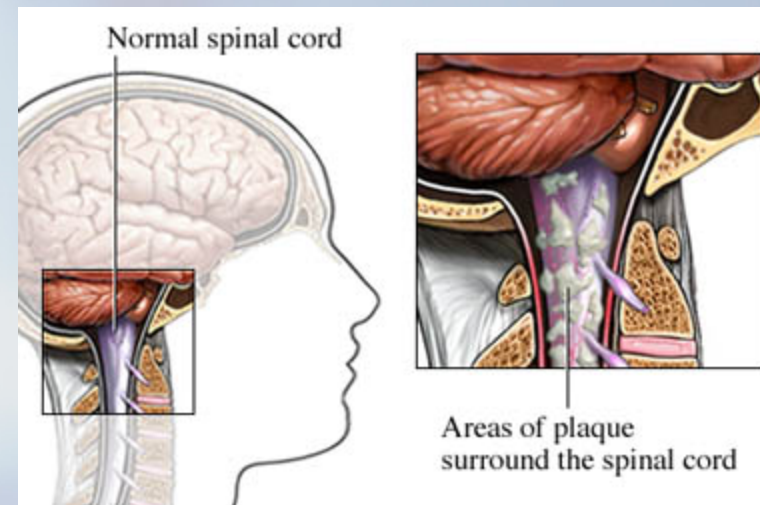
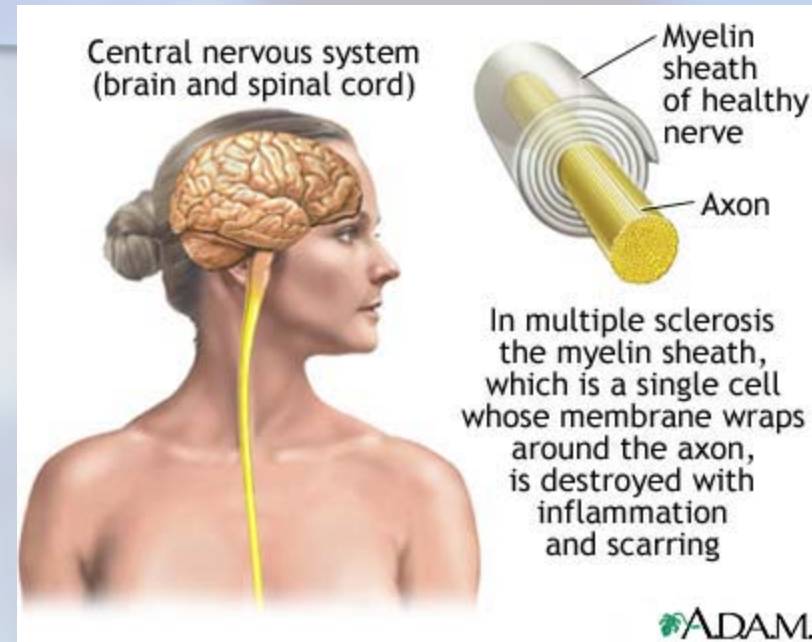
Multiple Sclerosis (MS)

■ Autoimmune disorder causing destruction of myelin sheaths in CNS

- sheaths becomes scars or plaques
- 1/2 million people in the United States
- appears between ages 20 and 40
- females twice as often as males

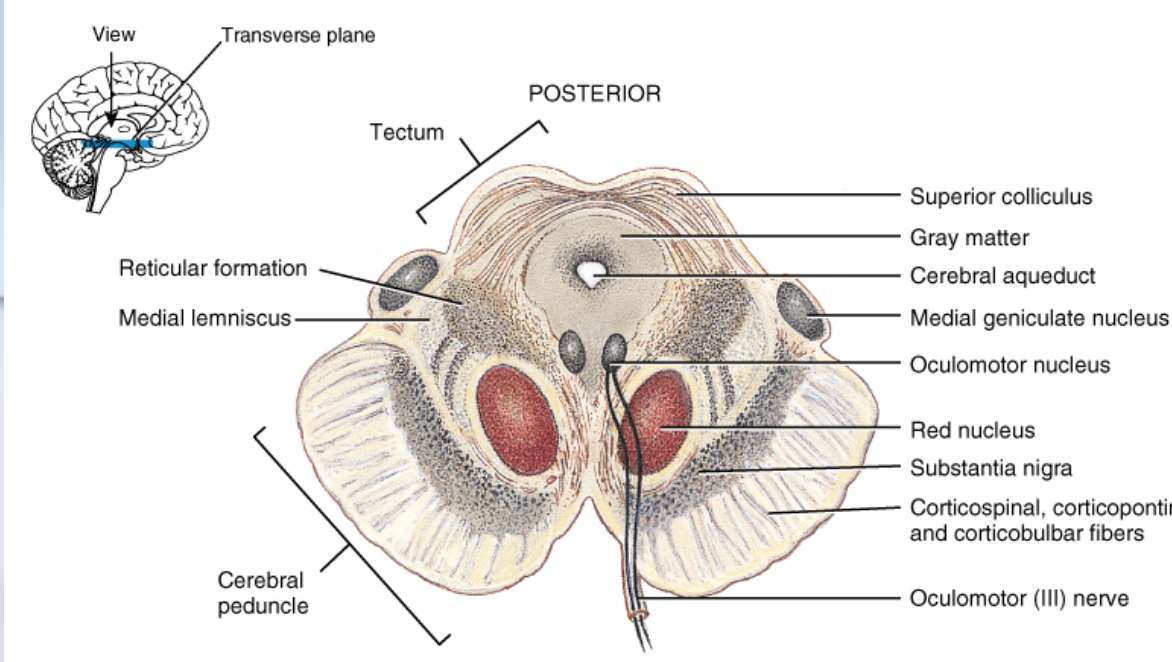
■ Symptoms include muscular weakness, abnormal sensations or double vision

■ Remissions & relapses result in progressive, cumulative loss of function



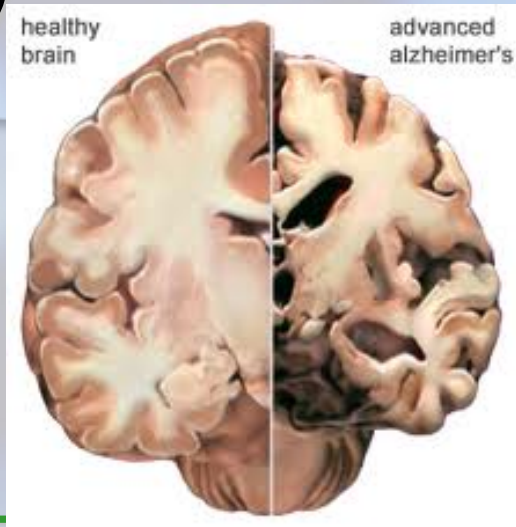


Parkinson Disease



- **Progressive disorder striking victims at age 60**
- **Environmental toxins may be the cause**
- **Neurons from the substantia nigra do not release enough dopamine onto basal ganglia**
 - **tremor, rigidity, bradykinesia (slow movement) or hypokinesia (decreasing range of movement)**
 - **may affect walking, speech, even facial expression**
- **Treatments**
 - **drugs to increase dopamine levels, or to prevent its breakdown, surgery to transplant fetal tissue or removal of part of globus pallidus to slow tremors**

Alzheimer Disease (AD)

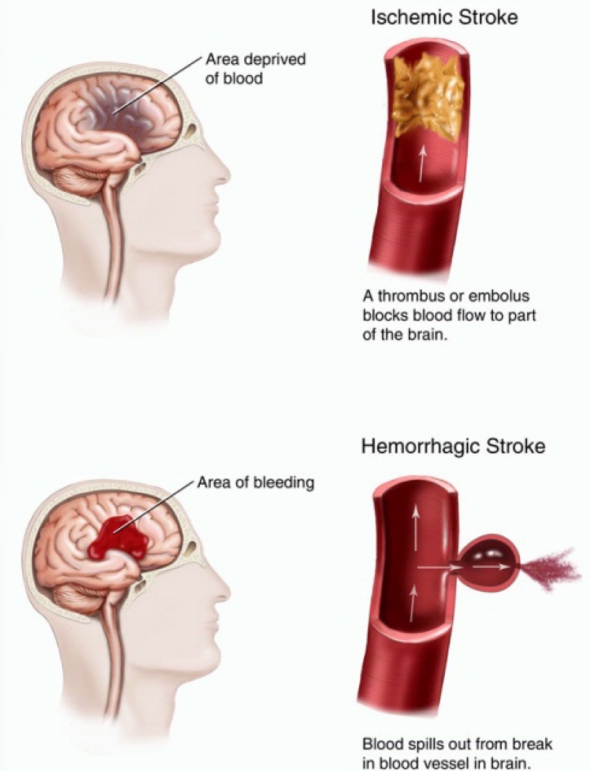


- **Dementia** = loss of reasoning, ability to read, write, talk, eat & walk
- Afflicts **11% of population over 65**
- **Loss of neurons** that release acetylcholine
- Plaques of abnormal proteins outside neurons
- Tangled protein filaments within neurons
- Risk factors -- head injury, heredity
- Beneficial effects of estrogen, vitamin E, ibuprofen & ginkgo biloba

Cerebrovascular Accident (CVA)

- Third leading cause of death after heart attacks & cancer
- 2 types of Strokes
 - **Ischemic** due to decreased blood flow
 - **Hemorrhagic** due to rupture of blood vessel
- Risk factors
 - high blood pressure, high cholesterol, heart disease, diabetes, smoking, obesity, alcohol
- **Tissue Plasminogen Activator (t-PA)** used within 3 hours of onset will decrease permanent disability

Types of Stroke



© 2007 RelayHealth and/or its affiliates. All rights reserved.



Aphasia

- Language areas are located in the left cerebral hemisphere of most people
- Inability to use or comprehend words = aphasia
 - **Nonfluent Aphasia** = inability to properly form words
 - know what want to say but can not speak
 - damage to Broca's speech area
 - **Fluent Aphasia** = faulty understanding of spoken or written words
 - **Word Deafness** = an inability to understand spoken words
 - **Word Blindness** = an inability to understand written words
 - damage to common integrative area or auditory association area
- <http://youtu.be/QEWmgmT8rUA>



Epilepsy

- 2ND most common neurological disorder
 - affects 1% of population
- Characterized by short, recurrent attacks initiated by electrical discharges in the brain
 - lights, noise, or smells may be sensed
 - skeletal muscles may contract involuntarily
 - loss of consciousness
- Epilepsy has many causes, including;
 - brain damage at birth, metabolic disturbances, infections, toxins, vascular disturbances, head injuries, and tumors

Cerebral Palsy

- Loss of motor control and coordination
- Damage to motor areas of the brain
 - infection of pregnant woman with rubella virus
 - radiation during fetal life
 - temporary lack of O₂ during birth
- Not a progressive disease, but irreversible

Center for Cerebral Palsy Spasticity



Tertiary Syphilis

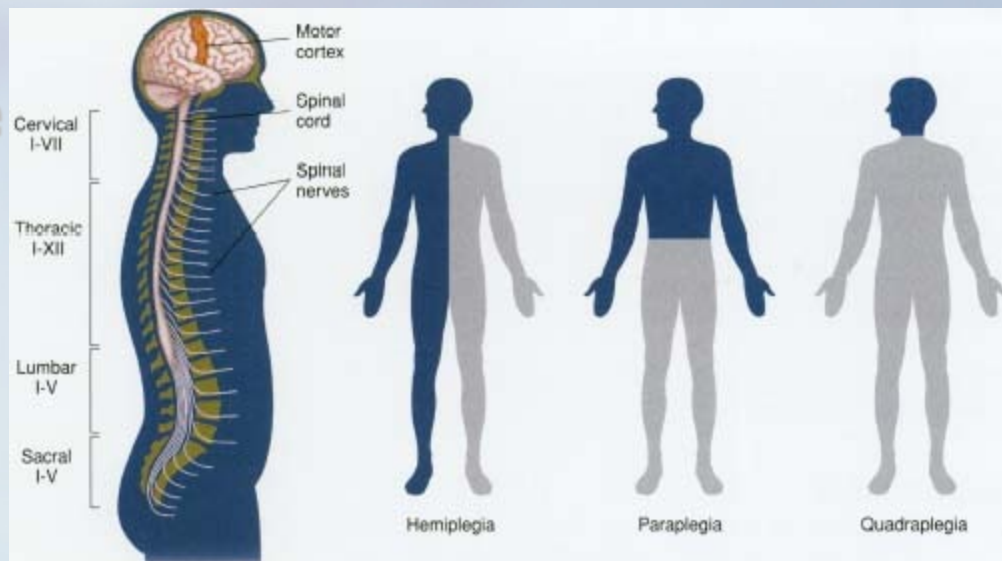


- Sexually transmitted disease caused by bacterium *Treponema pallidum*.
- Third clinical stage known as tertiary syphilis
- Progressive degeneration of posterior portions of spinal cord & neurological loss
 - loss of somatic sensations
 - proprioceptive impulses fail to reach cerebellum
- People watch their feet while walking, but still uncoordinated and jerky



Paralysis

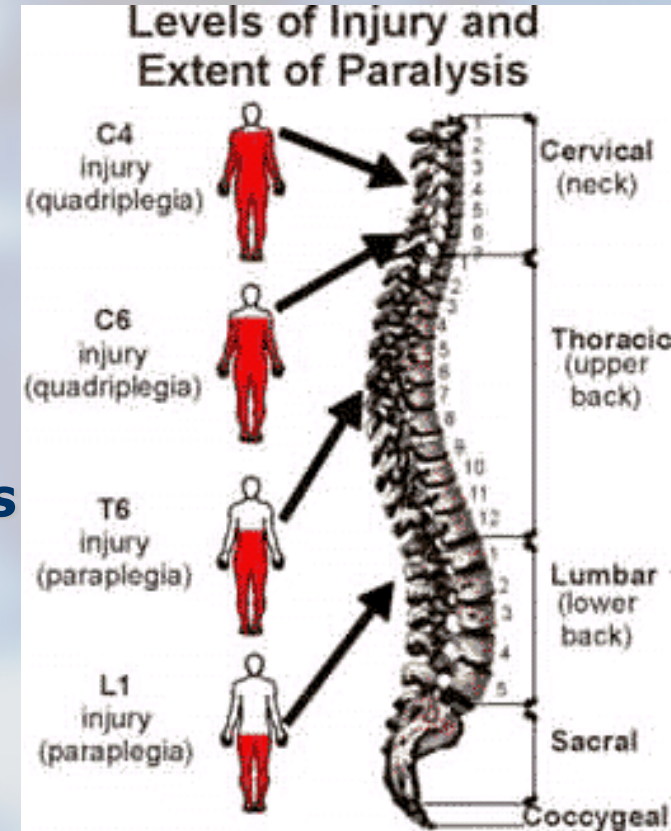
- **Flaccid Paralysis** = damage **lower** motor neurons
 - no voluntary movement on same side as damage
 - no reflex actions
 - muscle limp & flaccid
 - decreased muscle tone
- **Spastic Paralysis** = damage **upper** motor neurons
 - paralysis on opposite side from injury
 - increased muscle tone
 - exaggerated reflexes



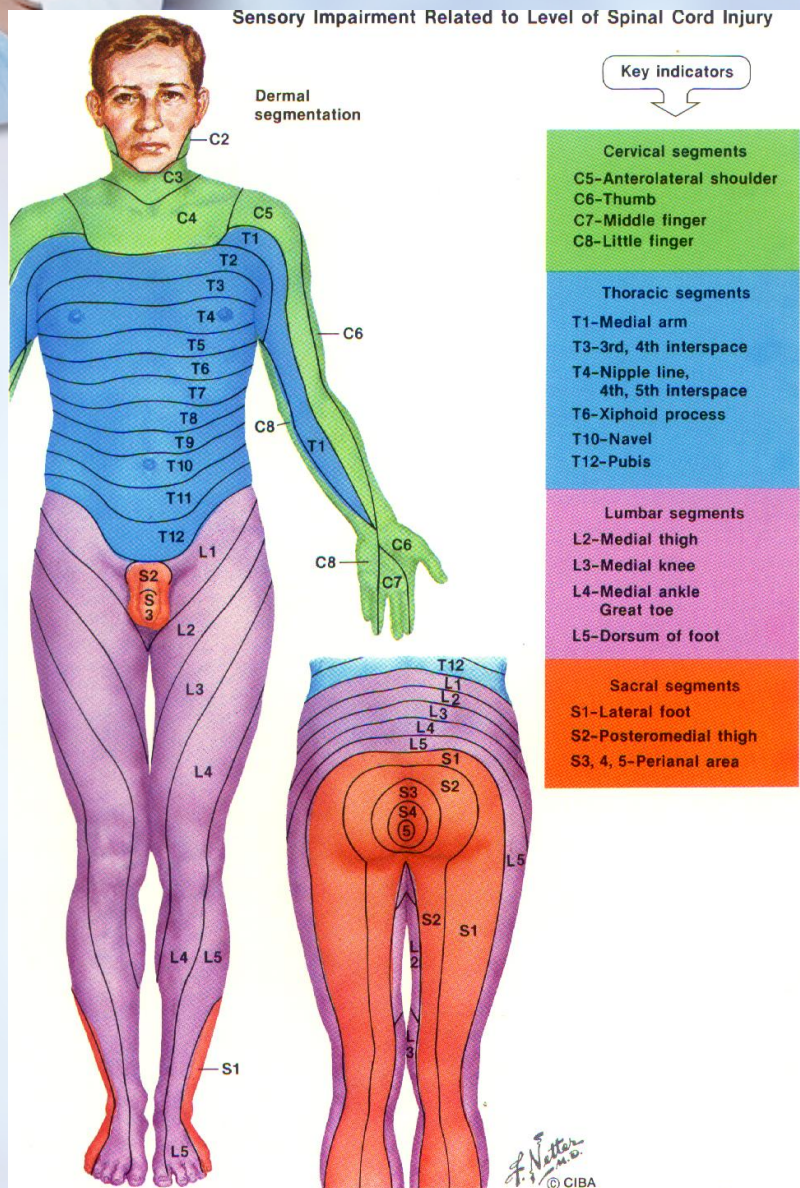


Spinal Cord Injury

- Damaged by tumor, herniated disc, clot or trauma
- **Complete Transection** is cord severed resulting loss of both sensation & movement **below the injury**
- **Paralysis**
 - **Monoplegia** is paralysis of one limb only
 - **Diplegia** is paralysis of both upper or both lower
 - **Hemiplegia** is paralysis of one side
 - **Quadriplegia** is paralysis of all four limbs
- **Spinal Shock** is loss of reflex function (**Areflexia**)
 - slow heart rate, low blood pressure, bladder problem
 - reflexes gradually return

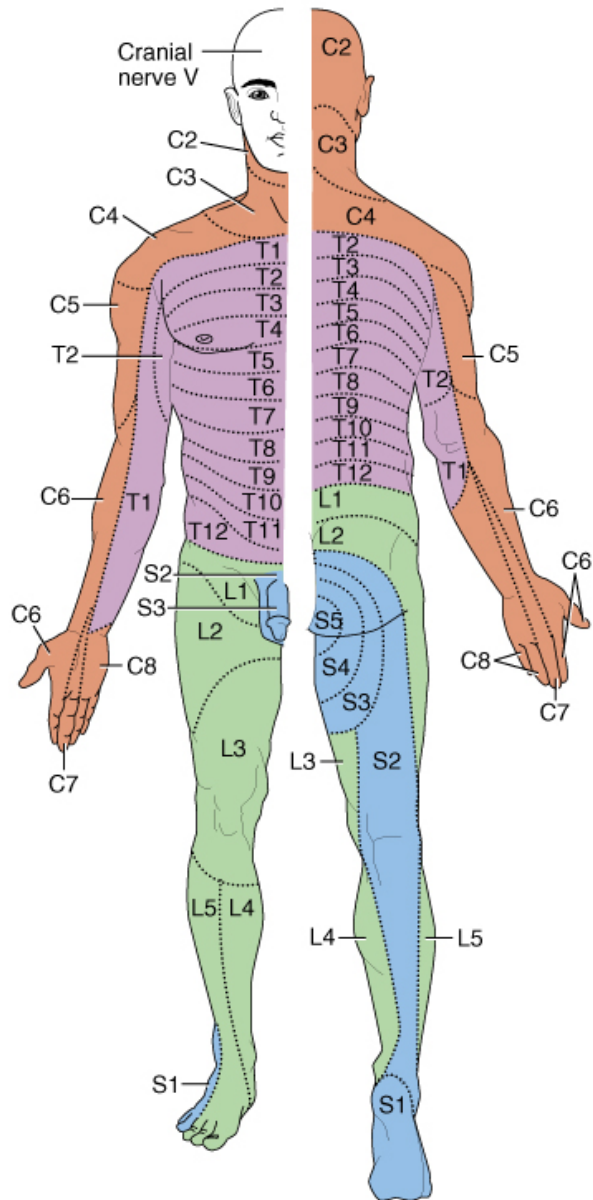


Dermatomes & Myotomes



- Each spinal nerve contains both sensory & motor nerve fibers
- **Dermatome**
 - area of skin supplied by one spinal nerve
 - overlap prevents loss of sensation if one damaged
 - sensory anesthesia requires 3 spinal nerves to be blocked
- Skin on face supplied by Cranial Nerve V

Dermatomes



- Damaged regions of the spinal cord can be distinguished by patterns of numbness over a dermatome region
- Infusing local anesthetics or cutting roots must be done over 3 adjacent spinal nerves.
- Spinal cord transection
 - injury that severs the cord
 - loss of sensation & motor control below the injury