

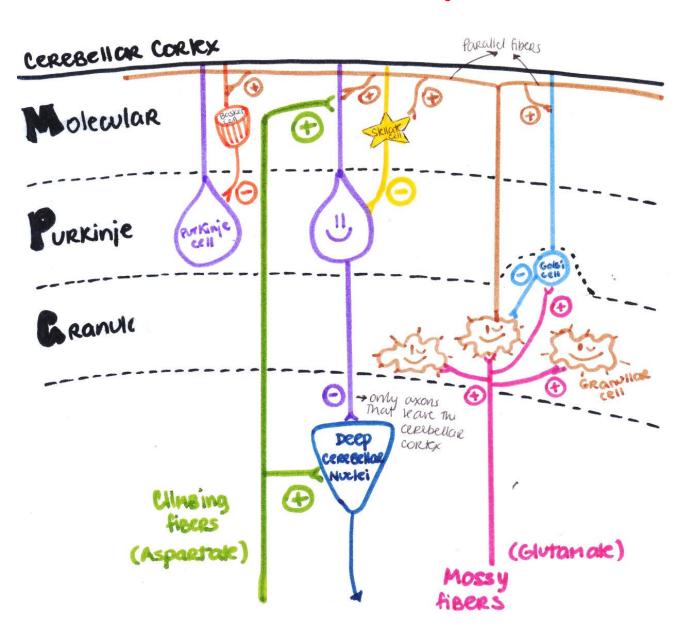




CEREBELL

ملاحظة:

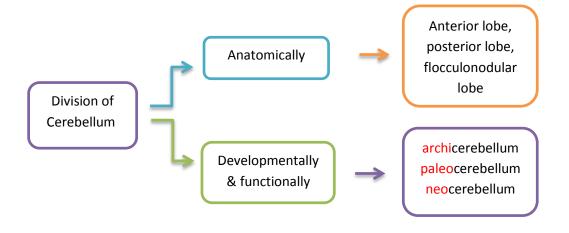
هذا الملف للمراجعة وترتيب المعلومات فقط وليس مرجع للمذاكرة لانه ليست كل المعلومات متضمنة.



Done by:

شيخة الدوسري

Anatomical of cerebellum	External features	internal features	
	 two Cerebellar Hemispheres joined in midline by the Vermis Its surface is highly convoluted forming Folia, separated by Fissures. 	cerebellar cortex: is Outer grey matter. ♣ Divided into 3 layers: 1. Outer molecular layer 2. Intermediate Purkinje cell layer 3. Inner granular layer	
	 Anterior lobe: in front of primary fissure, on the superior surface. Posterior (middle) lobe: behind primary fissure (Between Primary & Secondary fissures = posterolateral). Flocculonodular lobe: in front of secondary (Posterolateral) fissure, on 	Cerebellar medulla: is inner white matter Has deeply nuclei in white matter: From medial to lateral Fastigial nucleus. Globose nucleus. Emboliform nucleus. Dentate nucleus: largest one	
	the inferior surface Midaugallu section of cerubellum Henrighten Vernis Ficusbrotaker Ficusbrotaker Ficusbrotaker Ficusbrotaker Ficusbrotaker Ficusbrotaker	los (



Functional of	ARCHICEREBELLUM	PALEOCEREBELLUM	NEOCEREBELLUM
Cerebellum			
Part of cerebellum	<u>Vestibular</u> Part	Spinal Part	Cerebral Part
Location on	Flocculonodular lobe	Vermis & Paravermis	Rest of Cerebellum
cerebellum			
Afferents	from <u>Vestibular</u>	from <u>spinal cord</u>	from <u>Pons</u>
	<u>nuclei</u>	(dorsal & ventral	(<u>Pontocerebellar</u>
	(Vestibulocerebellar	spinocerebellar	<u>fibres)</u> (through MCP)
	fibres),	tracts)	
	(through ICP)	through ICP & SCP,	
		respectively)	
Nuclei Related	Fastigial	globose &	Dentate
		emboliform	
Efferents	to <u>Vestibular nuclei</u>	to <u>red nucleus</u>	to Red nucleus but
	(through ICP) + to	(through SCP)	mostly to <u>Ventral</u>
	Reticular formation		<u>Lateral Nucleus of</u>
			<u>Thalamus</u> (through
			SCP) then to motor
			cortex
Function	controls body	influences posture &	coordination of
	Balance (via	muscle tone (via	voluntary
	vestibulospinal &	Rubrospinal tract	movements (via
	reticulospinal tracts		descending
			corticospinal &
			corticobulbar tracts).

CEREBELLAR LESIONS:

MIDLINE LESION: Loss of postural

control.

UNILATERAL LESION: "Cerebellar

ataxia"

causes ipsilateral:

Incoordination of arm: intention tremors (on performing voluntary

movements)

Incoordination of leg: unsteady gait

Incoordination of eye movements: nystagmus

Slowness of speech: dysarthria