

A close-up photograph of several vibrant pink roses in full bloom, set against a background of green leaves and other roses. The text is overlaid on this image.

# Pathways of proprioception

posterior column &

## Spinocerebellar Pathways

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# OBJECTIVES

## Pathways of proprioception

At the end of this lecture the student should be able to:-

1-Identify the major sensory pathways

Describe the components, processes and functions of the sensory pathways

2-appreciate the dorsal column system in conscious proprioception (anatomy&functions)

3- describe the pathway of spinocerebellar tract in unconscious proprioception from muscles,tendons,and joints

4-differentiate between sensory and motor ataxia

- **Introduction**
- **Sensory receptors**
- **major sensory pathways**
- **dorsal column system**
- **spinocerebellar tract**
- **sensory and motor ataxia**

# INTRODUCTION

# Organization of the Nervous System

## 2 big initial divisions:

### Central Nervous System

The brain + the spinal cord

The center of integration and control

### Peripheral Nervous System

The nervous system outside of the brain and spinal cord

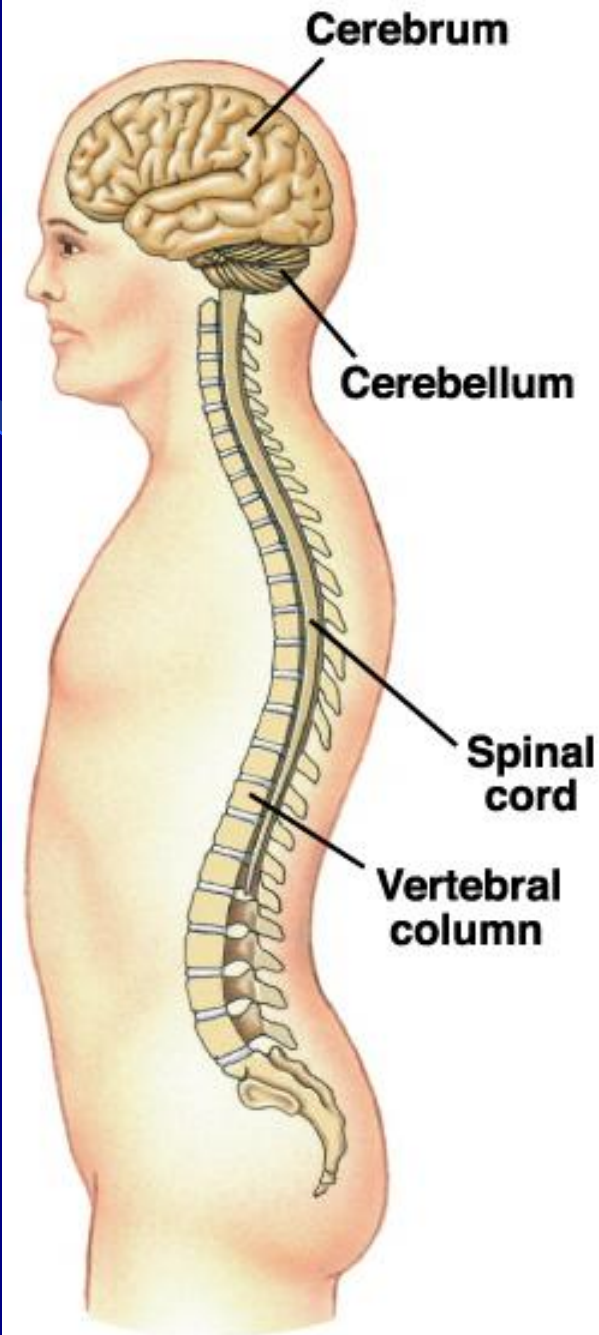
Consists of:

31 Spinal nerves

Carry info to and from the spinal cord

12 Cranial nerves

Carry info to and from the brain



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# Sensory Receptors

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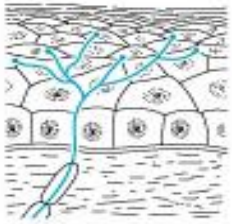
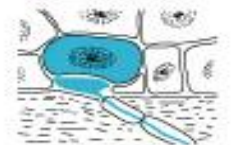
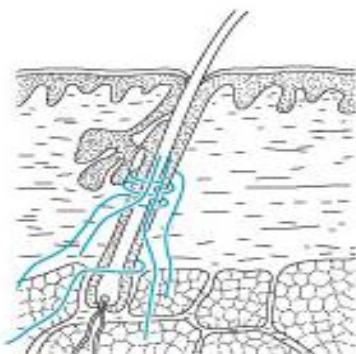
# Peripheral Sensory Receptors

- Sensory receptors classified according to:
  - Location
  - Type of stimulus detected
  - Structure



# Unencapsulated Nerve Endings

**Table 14.1** General Sensory Receptors Classified by Structure and Function (1 of 3)

Anatomical Class (structure)	Illustration	Functional Class According to Location (L) and Stimulus Type (S)	Body Location
<b>UNENCAPSULATED</b>			
Free nerve endings of sensory neurons		L: Exteroceptors, interoceptors, and proprioceptors S: Nociceptors (pain), thermoreceptors (heat and cold), possibly mechanoreceptors (pressure)	Most body tissues; densest in connective tissues (ligaments, tendons, dermis, joint capsules, periosteum) and epithelia (epidermis, cornea, mucosae, and glands)
<i>Modified free nerve endings:</i> Merkel discs		L: Exteroceptors S: Mechanoreceptors (light pressure)	Basal layer of epidermis
Hair follicle receptors		L: Exteroceptors S: Mechanoreceptors (hair deflection)	In and surrounding hair follicles

# Encapsulated Nerve Endings

- Consist of one or more end fibers of sensory neurons
- Enclosed in connective tissue
- Include four main types

# Encapsulated Nerve Endings

- Meissner's corpuscles
- Pacinian corpuscles
- Ruffini's corpuscles
- Proprioceptors

# Proprioceptors

- Encapsulated Nerve Endings
- Monitor stretch in locomotory organs
- Three types of proprioceptors

# Three Types of *Proprioceptors*

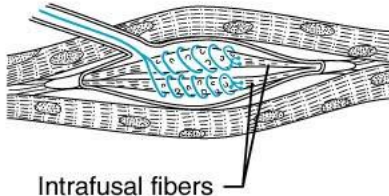
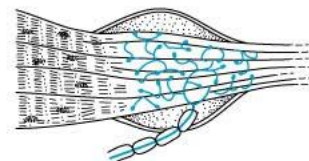
- **Muscle spindles** – measure the changing length of a muscle
  - Imbedded in the perimysium between muscle fascicles
- **Golgi tendon organs** – located near the muscle-tendon junction
  - Monitor tension within tendons
- **Joint kinesthetic receptors**
  - Sensory nerve endings within the joint capsules

# Proprioceptors

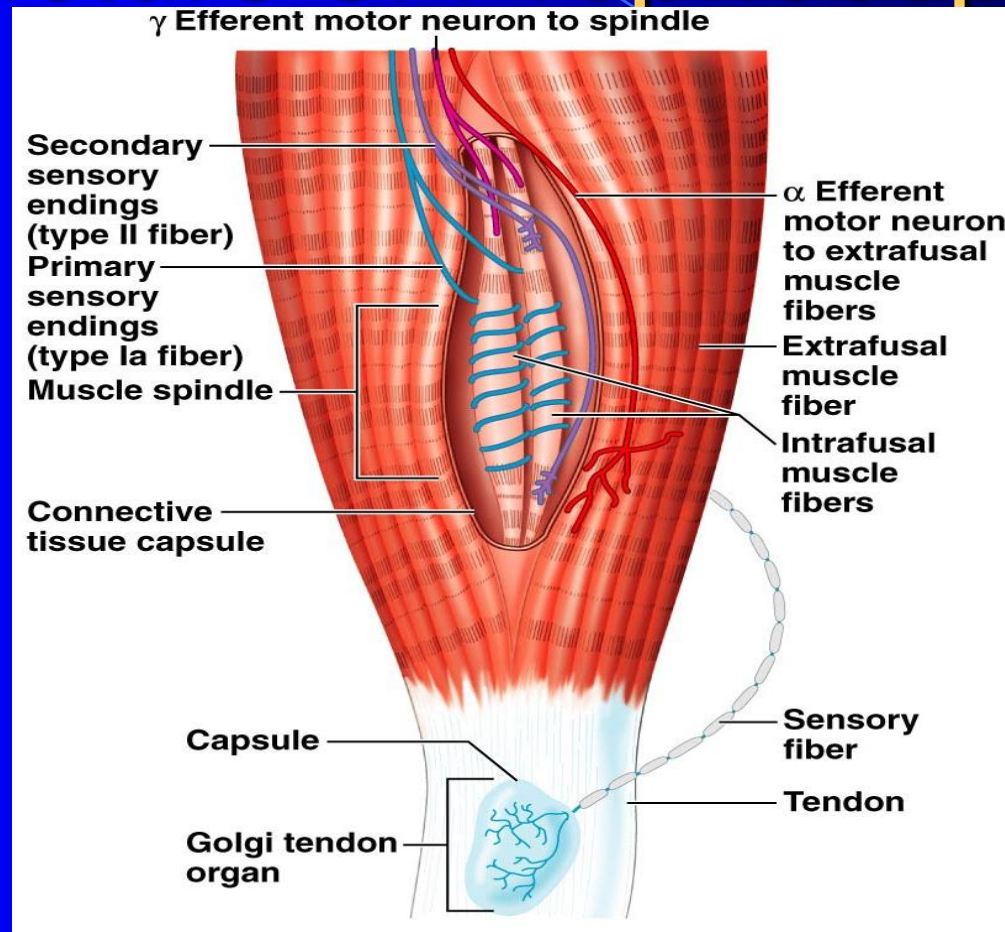
## TABLE

14.1

### General Sensory Receptors Classified by Structure and Function *(continued)*

Structural Class	Illustration	Functional Class According to Location (L) and Stimulus Type (S)	Body Location
<b>PROPRIOCEPTORS</b>			
Muscle spindles	 <p>Intrafusal fibers</p>	L: Proprioceptors S: Mechanoreceptors (muscle stretch)	Skeletal muscles, particularly those of the extremities
Golgi tendon organs		L: Proprioceptors S: Mechanoreceptors (tendon stretch)	Tendons
Joint kinesthetic receptors (Pacinian and Ruffini endings, free nerve endings, and receptors resembling Golgi tendon organs)		L: Proprioceptors S: Mechanoreceptors and nociceptors	Joint capsules of synovial joints

# Structure of Proprioceptors





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# An Overview of Sensory Pathways and the Somatic Nervous System

## Neural pathways

- Afferent pathways

- Sensory information coming from the sensory receptors through peripheral nerves to the spinal cord and to the brain .

- Efferent pathways

- Motor commands coming from the brain and spinal cord, through peripheral nerves to effector organs .

# Sensory pathways

The background is black with several decorative blue curved lines. A thin, light blue arc starts from the top left and curves towards the center. A thicker, medium blue arc starts from the top left and curves more sharply towards the bottom right. A large, bright blue shape, resembling a stylized arrow or a wedge, points from the right edge towards the center, overlapping the other curves.

# Sensory pathways

- Sensory systems allow us to detect, analyze and respond to our environment
- “ascending pathways”
- Carry information from sensory receptors to the brain
- Conscious: reach cerebral cortex
- Unconscious: do not reach cerebral cortex
- Sensations from body reach the opposite side of the brain

- **Spinal tracts**- These are known as sensory and motor pathways consisting of multineuron pathways connecting the CNS to the PNS. At some point most pathways crossover (decussate),

- A. **Ascending (sensory) Pathways** :-

- 1. **Dorsal column pathway**- carries signal of fine touch, pressure, vibration, stereognosis and **conscious proprioception**, ascends up dorsal white column in fasciculus gracilis or cutaneatus to medulla oblongata to the thalamus to primary somatosensory cortex (post central gyrus).

- 2. **Posterior and anterior spinocerebellar pathways**- carry **subconscious proprioception**. Dorsal gray horn- to lateral column- to medulla oblongata- to pons – to cerebellum.

- 3. **Spinothalamic pathway**- carries signals of pain, temperature, deep pressure, and coarse touch. From posterior gray horn decussate into lateral and anterior funiculi up to the thalamus to primary somatosensory cortex (postcentral gyrus).

# Sensory pathways: 3 neurons

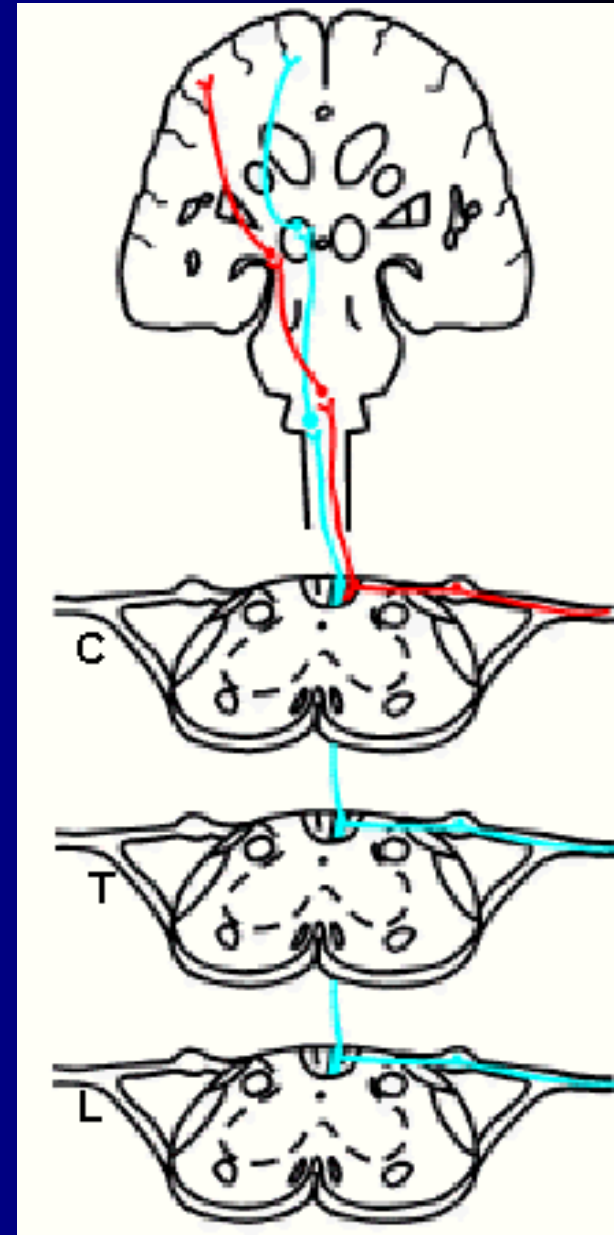
- 1<sup>st</sup>: enters spinal cord from periphery
- 2<sup>nd</sup>: crosses over (decussates), ascends  
in spinal cord to thalamus
- 3<sup>rd</sup>: projects to somatosensory cortex

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# Dorsal column pathway

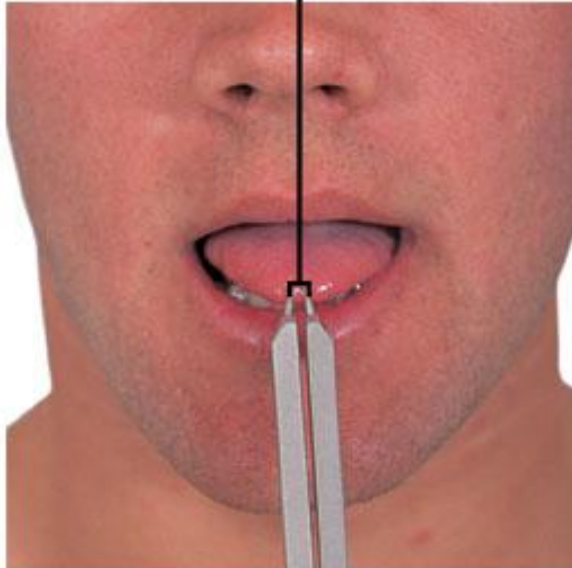
- Carries fine touch, two point discrimination, pressure, vibration, stereognosis and conscious proprioception signals
- 1<sup>st</sup> neuron enters spinal cord through dorsal root; ascends to medulla (brain stem)
- 2<sup>nd</sup> neuron crosses over in medulla; ascends to thalamus
- 3<sup>rd</sup> neuron projects to somatosensory cortex



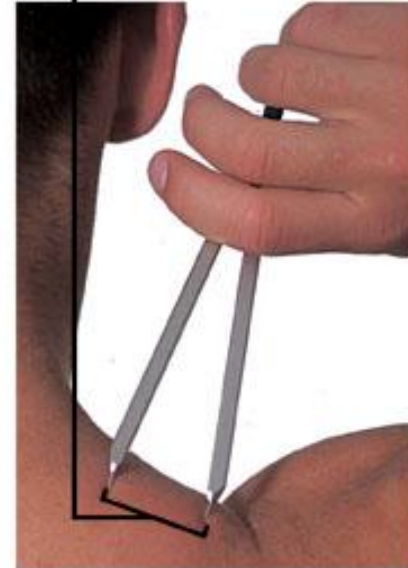
# Two-Point Discrimination

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**2 mm**



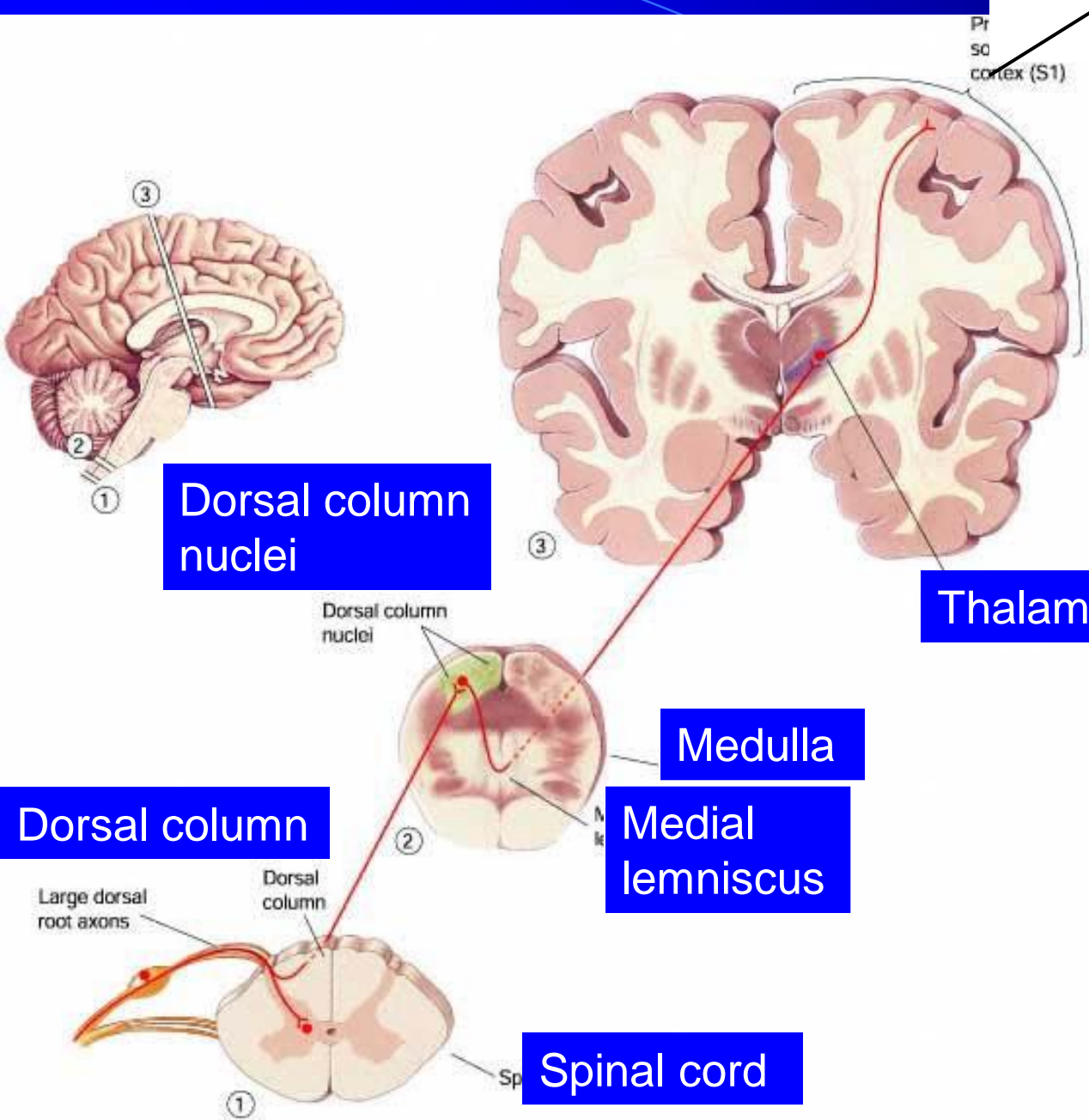
**64 mm**



**4 mm**



# Dorsal column pathway



Primary somatosensory cortex (S1) in parietal lobe

Dorsal column nuclei

Thalamus

Dorsal column nuclei

Medulla

Medial lemniscus

Dorsal column

Large dorsal root axons

Dorsal column

Spinal cord

Pr  
so  
cortex (S1)

③

②

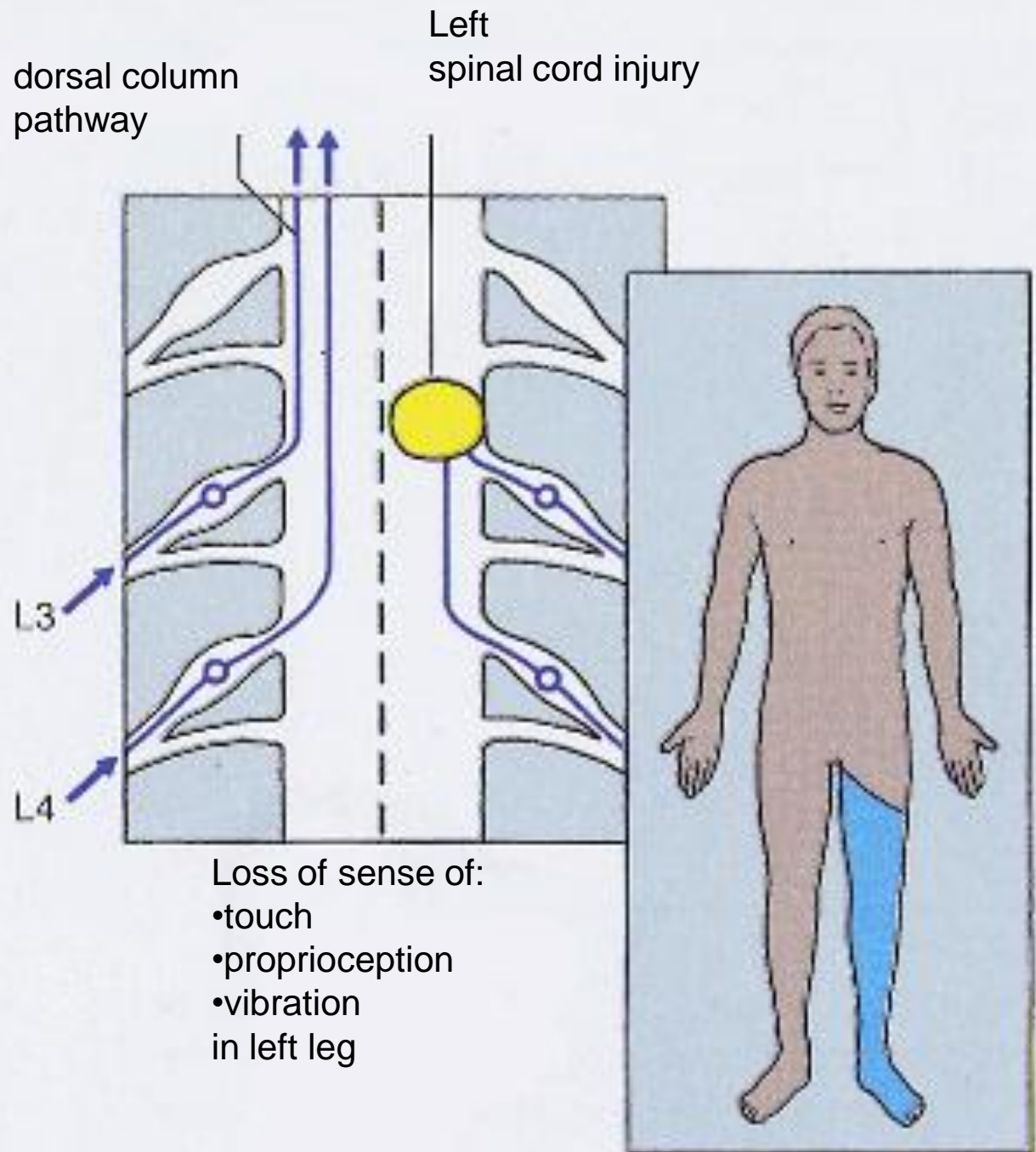
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# Dorsal column damage





# Dorsal column damage

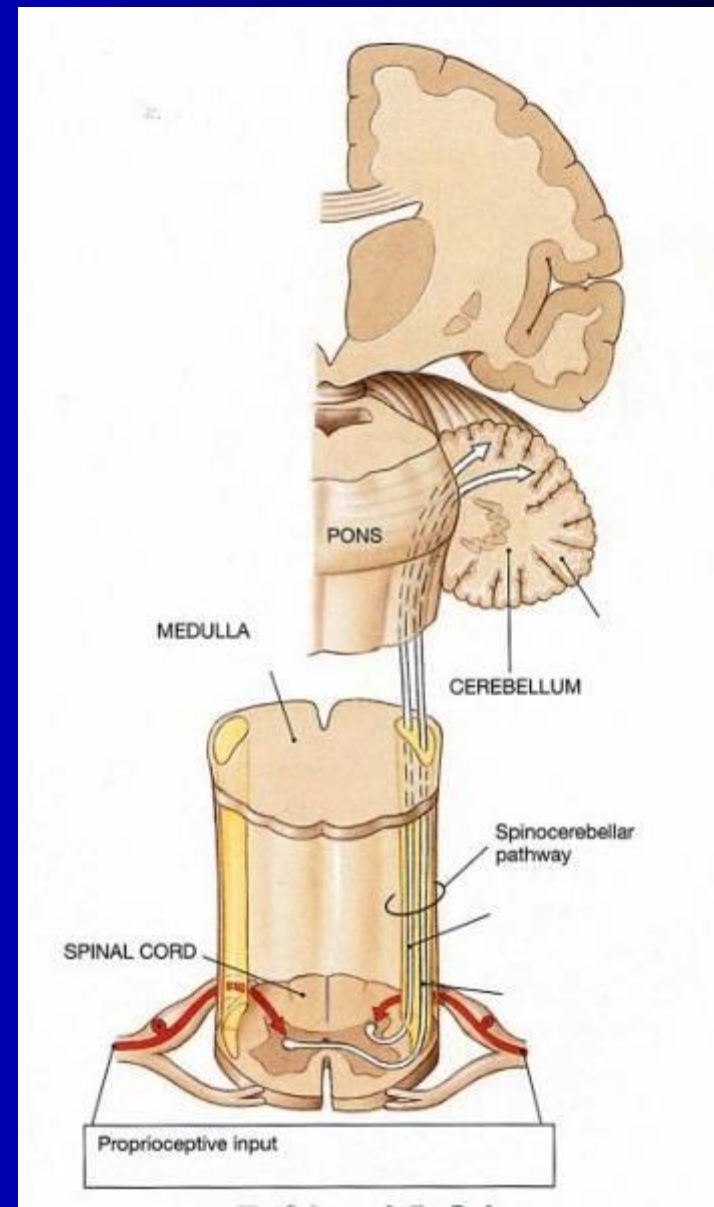
- Sensory ataxia
- Patient staggers; cannot perceive position or movement of legs
- Visual clues help movement



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# Spinocerebellar pathway

- Carries unconscious proprioception signals
- Receptors in muscles & joints
- 1<sup>st</sup> neuron: enters spinal cord through dorsal root
- 2<sup>nd</sup> neuron: ascends to cerebellum
- No 3<sup>rd</sup> neuron to cortex, hence **unconscious**





# Spinocerebellar tract damage

- Cerebellar ataxia
- Clumsy movements
- Incoordination of the limbs (intention tremor)
- Wide-based, reeling gait (ataxia)
- Alcoholic intoxication produces similar effects!

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Motor  
&  
Sensory  
Ataxia

# Ataxia and Gait Disturbances

- Pathophysiology

- Result from any condition that affects the central and peripheral nervous systems

- Ataxia: Types

- Motor ataxia

- Sensory ataxia

# Ataxia and Gait Disturbances

- Motor Ataxia

- Caused by cerebellar disorders

- Intact sensory receptors and afferent pathways
- Integration of proprioception is faulty
- Midline cerebellar lesions cause truncal ataxia
- Lateral cerebellar lesions cause limb ataxia
- Thalamic infarcts may cause contra lateral ataxia with sensory loss
- N.B cerebellar ataxia will discussed later with cerebellum lecture.

# Ataxia and Gait Disturbances

- Sensory Ataxia

- Failure of proprioceptive information to the CNS
- May be due to disorders of spinal cord or peripheral nerves
- Can be compensated for by visual inputs

Thank you