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OBJECTIVES

By the end of the lecture, you shouldbe able to:

- List the nuclei of deep origin of the <u>trigeminal</u> and <u>facial nerves</u> in the brain stem.
- Describe the type and site of each nucleus.
- Describe the superficial attachment of <u>trigeminal</u> and facial nerves to the brain stem.
- Describe the main points in the course and distribution of trigeminal and facial nerves.
- Describe the main motor & sensory manifestation in case of lesion of the trigeminal & facial nerves.

TRIGEMINAL NERVE

Type:

Mixed:

(Sensory & Motor).

Fibers:

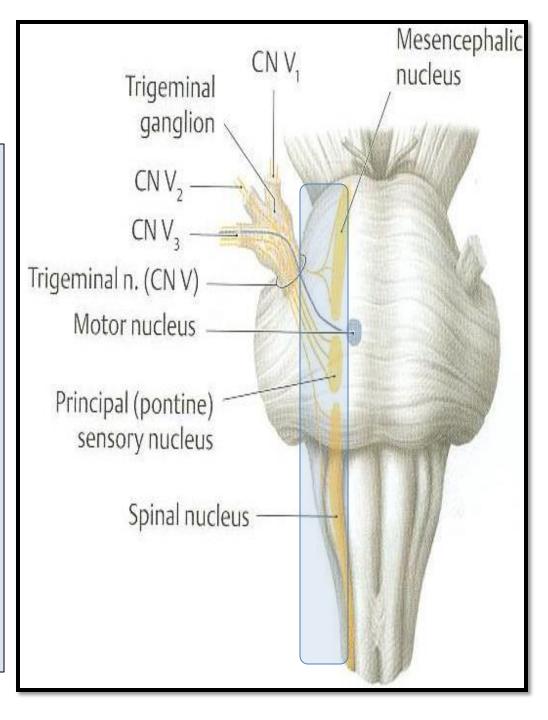
1. General Somatic Afferent:

Carrying <u>general sensations</u> from the face, and anterior part of the scalp.

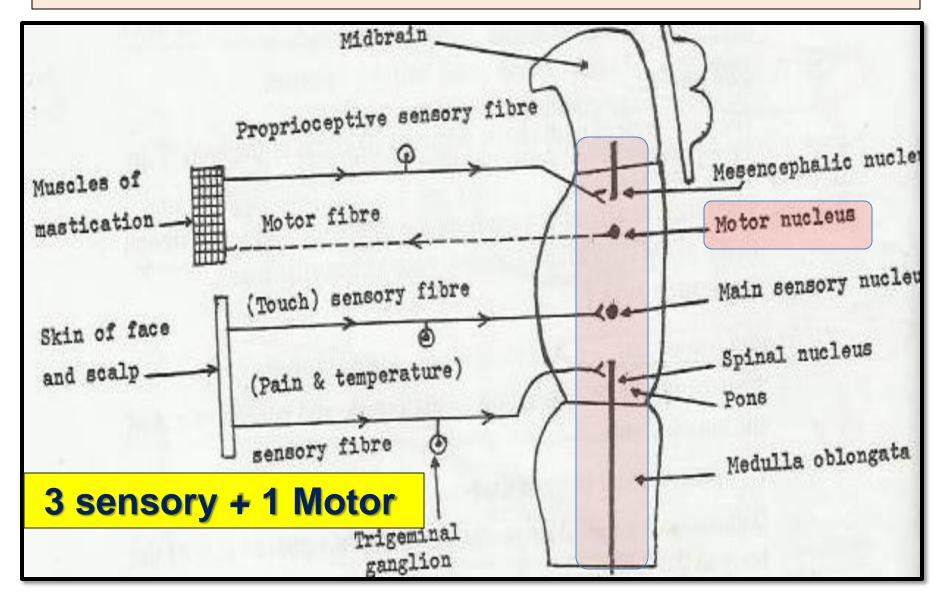
2. Special Visceral Efferent:

<u>Supplying muscles</u> developed from the <u>1st</u> <u>pharyngeal arch</u>,

(8 muscles).



TRIGEMINAL NERVE NUCLEI, (Deep origin)

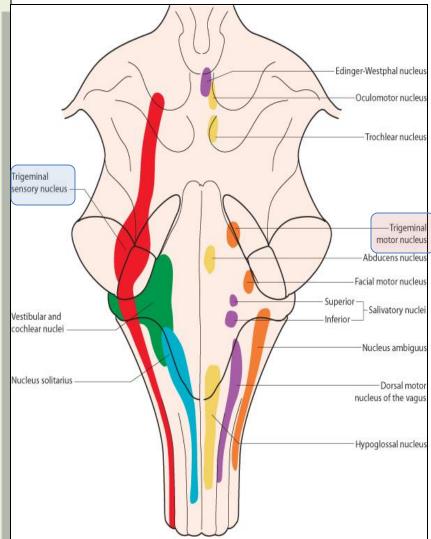


Four nuclei: (3 sensory + 1 Motor).

General Somatic Afferent:

- 1. <u>Mesencephalic</u> (pons & midbrain): receives proprioceptive fibers from muscles of mastication.
- 2. <u>Main or (Principal) sensory</u> (pons): receives touch fibers from face & scalp
- Spinal (pons, medulla and upper 2-3 cervical segments of spinal cord): receives pain & temperature sensations from face & scalp.
- Special Visceral Efferent:
- 4. Motor nucleus (pons): supplies:
- Four Muscles of mastication (Temporalis, masseter, medial & lateral pterygoid).
- Other four muscles (Anterior belly of digastric, mylohyoid, tensor palati & tensor tympani).

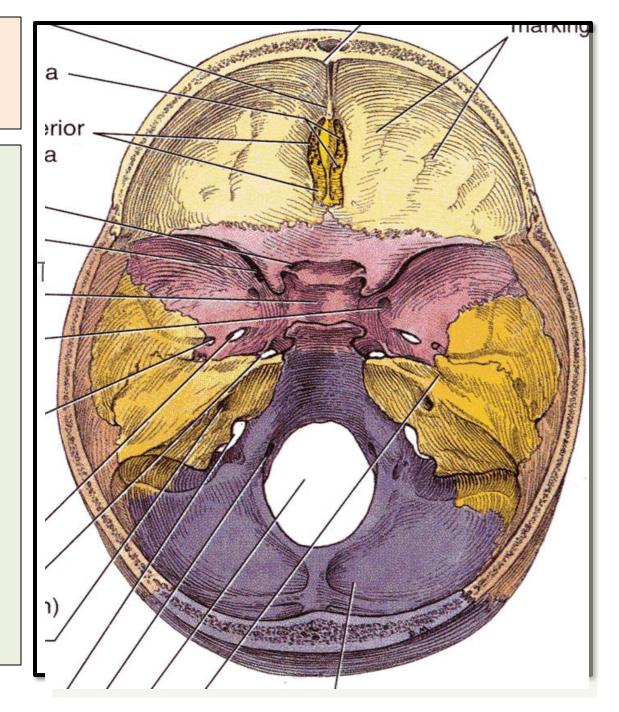
TRIGEMINAL NERVE NUCLEI



TRIGEMINAL GANGLION

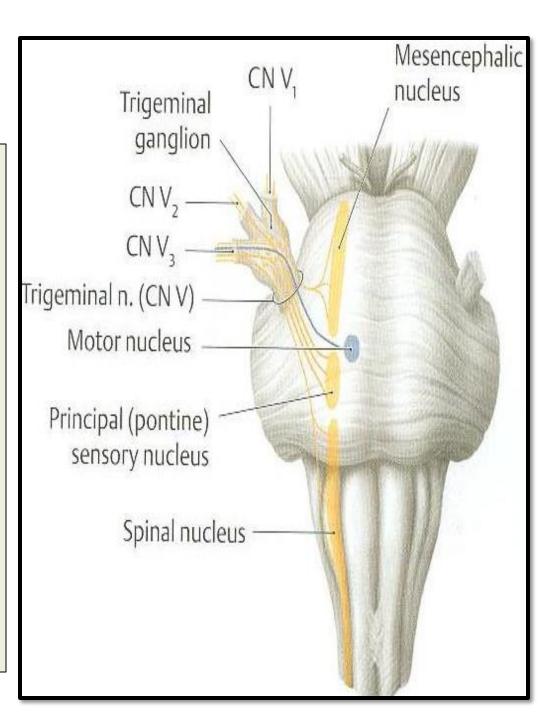
> Site:

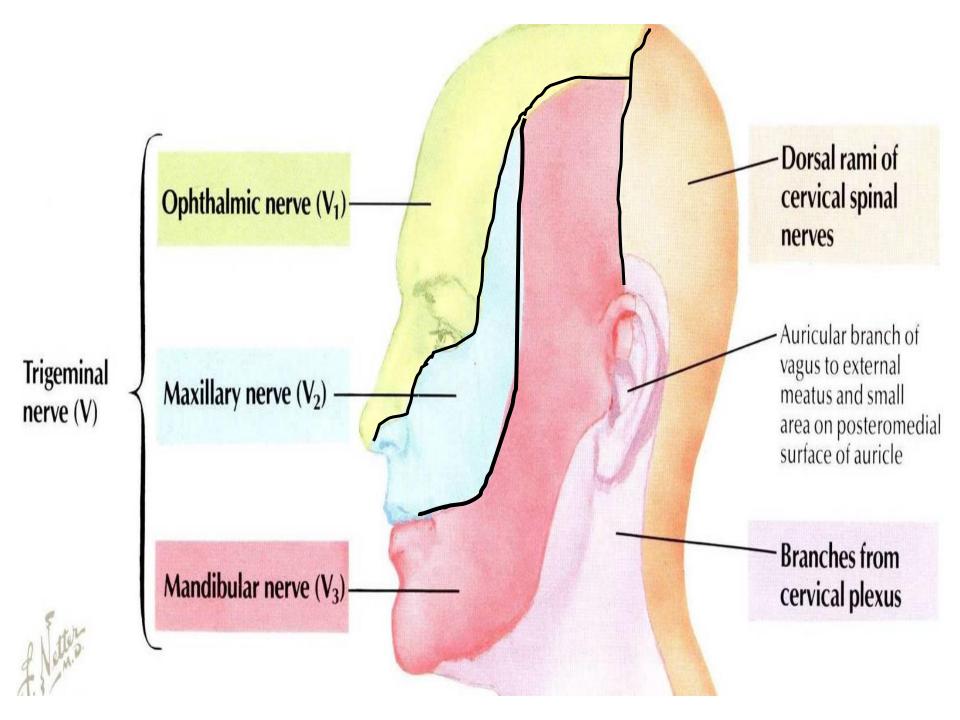
- Occupies a <u>depression</u> in the <u>middle cranial</u> <u>fossa, (trigeminal</u> <u>impression).</u>
- Importance: Contains cell bodies:
- 1. Whose **dendrites** carry sensations from face & scalp.
- 2. Whose **axons** form the sensory root of trigeminal nerve.



TRIGEMINAL NERVE

- Emerges from the middle of the ventral surface of the pons by 2 roots (Large Lateral sensory root & small medial motor root).
- Divides into 3 divisions (dendrites of trigeminal ganglion):
- 1. Ophthalmic, CVI
- 2. Maxillary, CV2
- 3. Mandibular, CV3
- Axons of cells of motor nucleus join only the mandibular division.

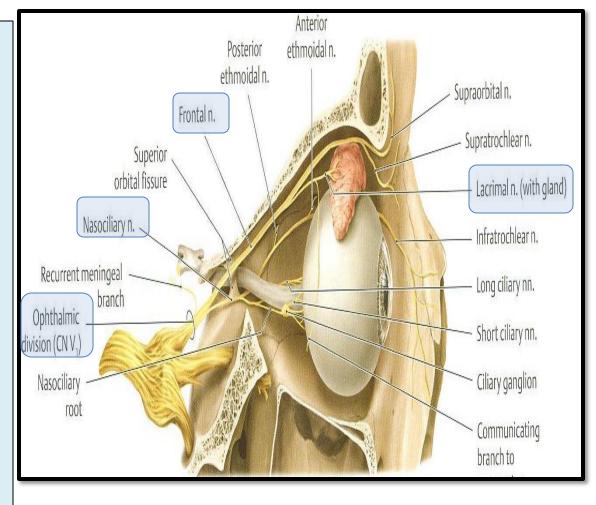




OPHTHALMIC (PURE SENSORY)

Divides into:3 branches:

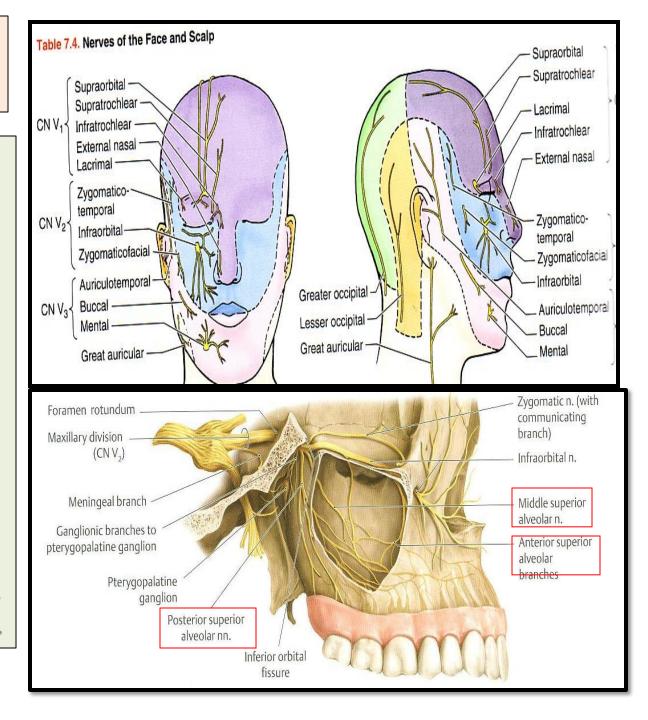
- Frontal, Lacrimal & Nasociliary which pass through <u>superior</u> orbital fissure to the orbit:
- Frontal: supplies skin of face & scalp.
- 2. Lacrimal: supplies skin of face & lacrimal gland.
- Nasociliary: supplies skin of face, nasal cavity & eyeball.



MAXILLARY (PURE SENSORY)

- Supplies:
- Upper teeth and 1. gum & maxillary air sinus: (anterior superior alveolar. middle superior alveolar & posterior superior alveolar nerves). 2. Face:

(zygomaticofacial & infraorbital nerves).

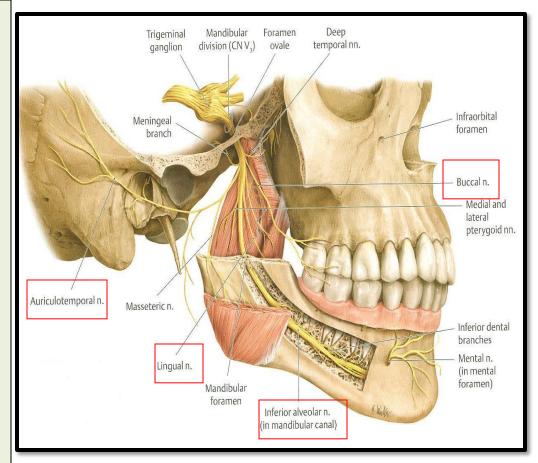


MANDIBULAR (MIXED)

SENSORY BRANCHES:

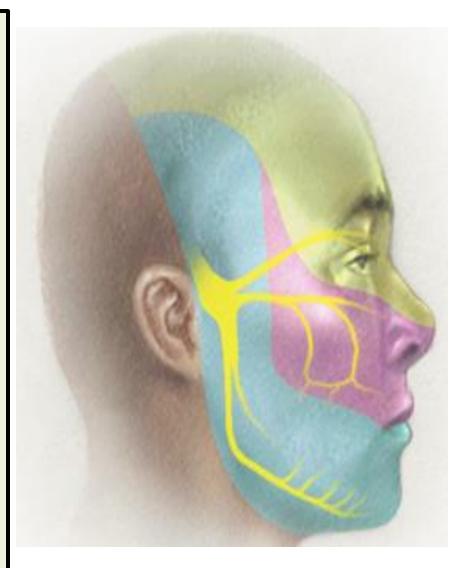
- 1. Lingual:
 - General sensations from anterior 2/3 the of tongue.
- 2. Inferior alveolar: Lower teeth, gum & face.
- **3.** Buccal: Face, (cheek on upper jaw)
- 4. Auriculotemporal: auricle, temple, parotid gland & TMJ.
- MOTOR BRANCHES:

to **8 muscles** (4 muscles of mastication & other 4 muscles).



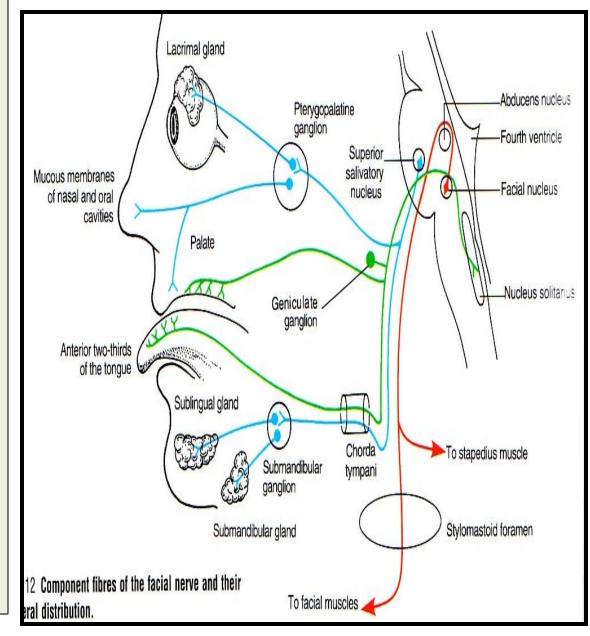
Trigeminal Neuralgia

- Compression, degeneration or inflammation of the 5th cranial nerve may result in a condition called trigeminal neuralgia or tic douloureux.
- This condition is <u>characterized</u> by recurring episodes of intense stabbing, sever, excoriating pain radiating from the angle of the jaw along a branches of the trigeminal nerve.
- Usually involves <u>maxillary &</u> <u>mandibular branches</u>, rarely in the ophthalmic division.



- Type: Mixed: Special sensory, Motor, Parasympathetic.
- ≻ <u>Fibers:</u>
- Special Visceral <u>Afferent</u>: carrying <u>taste sensation</u> from <u>anterior 2/3 of the</u> <u>tongue.</u>
- Special Visceral <u>Efferent</u>: supplying muscles developed from the 2nd pharyngeal arch.
- General Visceral Efferent: parasympathetic secretory fibers to submandibular, sublingual, lacrimal, nasal & palatine glands.

FACIAL NERVE



FACIAL NERVE NUCLEI

- <u>3 Nuclei :</u>
- Special Visceral Afferent: (nucleus solitarius): receives taste from the anterior 2/3 of tongue.
- Special Visceral Efferent: motor nucleus of facial nerve: supplies:

Muscles of the face,

Muscles of scalp, (Occipitofrontalis). Muscles of the auricle.

Posterior belly of digastric,

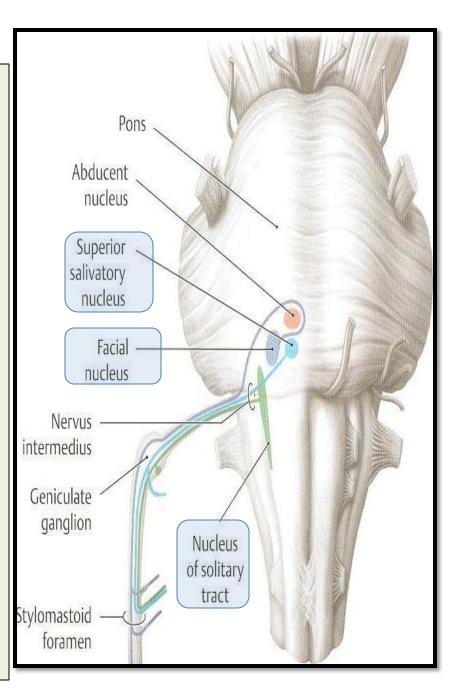
Platysma,

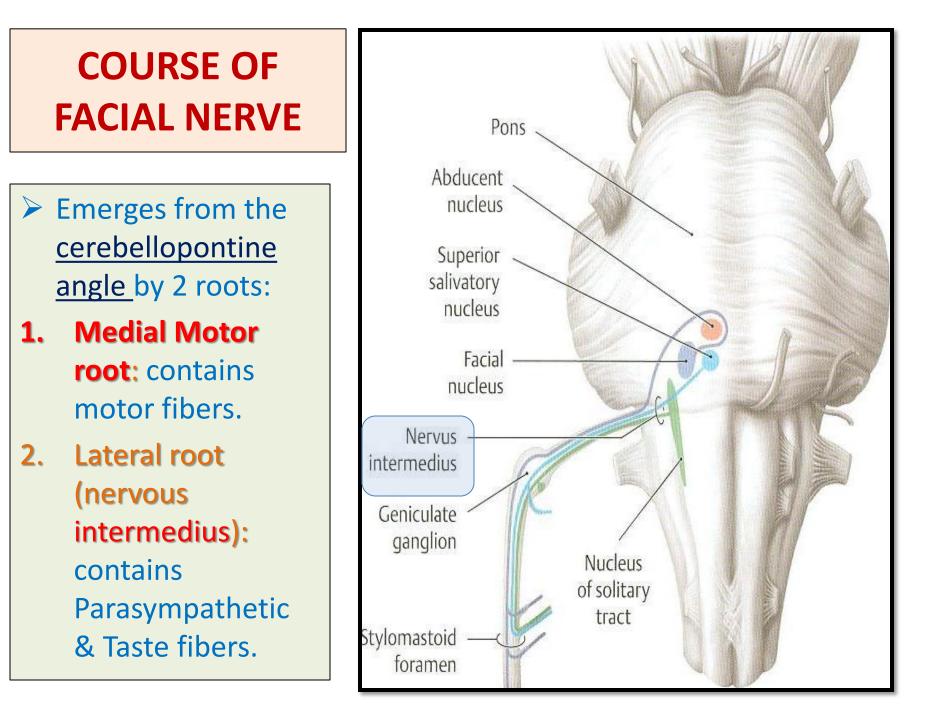
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Stylohyoid,

Stapedius, and

 General Visceral Efferent:
 Superior salivatory nucleus: sends preganglionic parasympathetic secretory fibers to:
 Sublingual, Submandibular, Lacrimal, Nasal & Palatine glands.

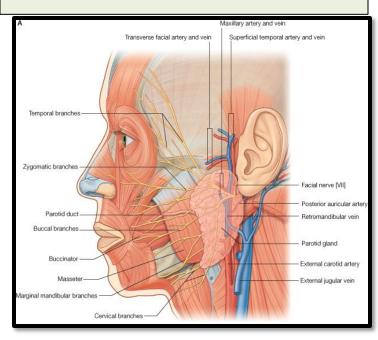


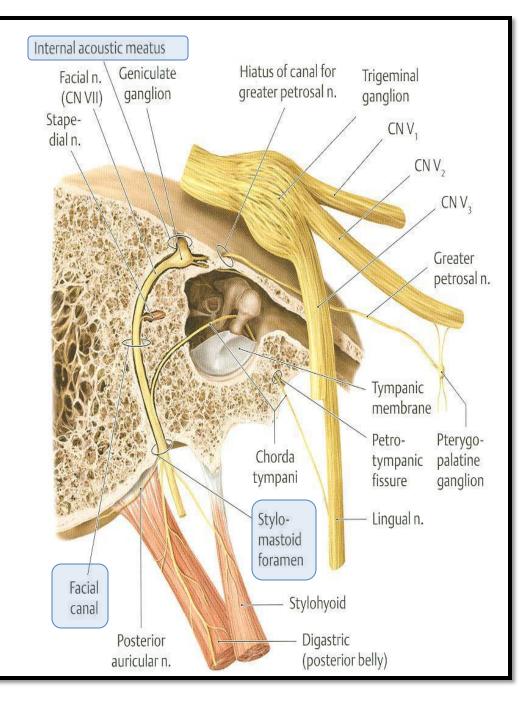


COURSE OF FACIAL NERVE

It passes through <u>internal</u> <u>auditory meatus</u> to the inner ear where it runs in facial canal.

Emerges from the stylomastoid foramen & enters the parotid gland where it ends.





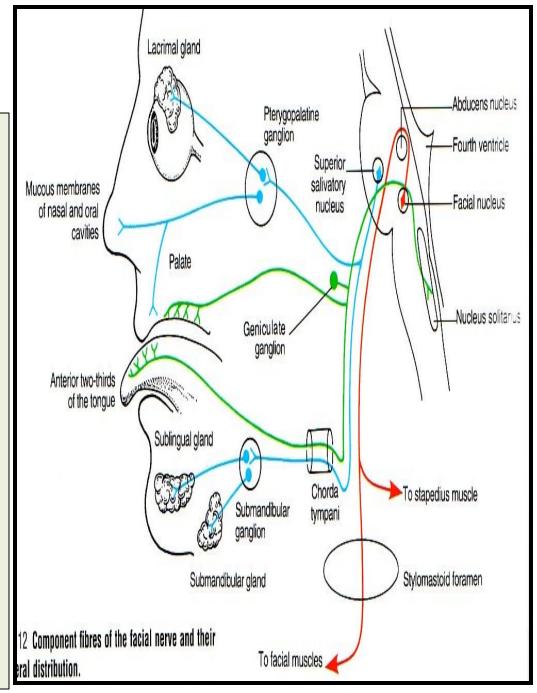
BRANCHES OF FACIAL NERVE

In facial canal:

- 1. Greater petrosal nerve: carries preganglionic <u>parasympathetic</u> fibers to **pterygopalatine** ganglion then postganglionic fibers to lacrimal, nasal & palatine glands.
- Chorda tympani: carries:

 a) Preganglionic
 parasympathetic fibers to
 submandibular ganglion then
 postganglionic fibers to
 submandibular & sublingual
 glands.
 - b) Taste fibers from anterior 2/3 of tongue.
- 3. Nerve to stapedius.
- N.B.: Geniculate ganglion: contains

cell bodies of **neurones** <u>carrying</u> <u>taste sensations</u> from anterior 2/3 of tongue.

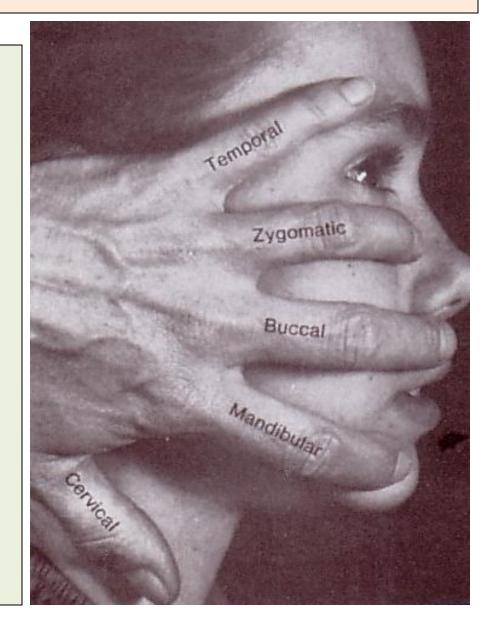


BRANCHES OF FACIAL NERVE

- Just as it emerges from the stylomastoid foramen it gives:
- 1. Posterior auricular: to occipitofrontalis muscle.
- 2. Muscular branches to posterior belly of digastric & stylohyoid.
- Inside parotid gland:

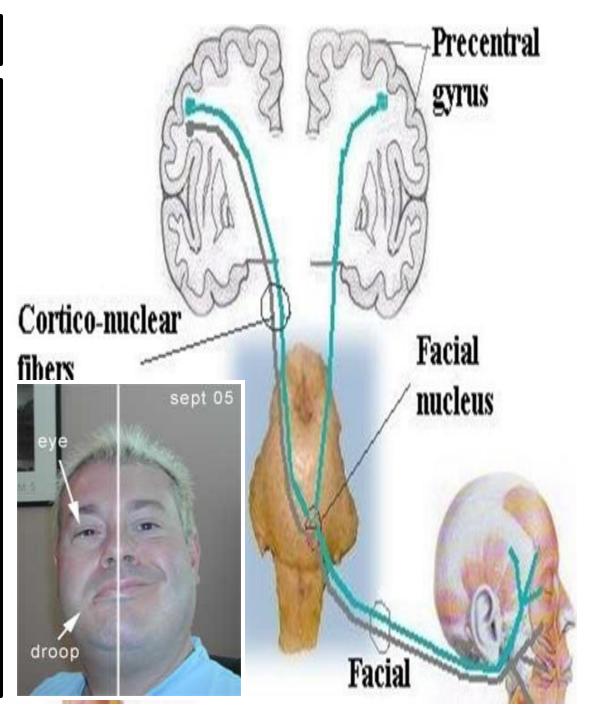
Gives 5 terminal motor branches:

- 1. Temporal,
- 2. Zygomatic,
- 3. Buccal,
- 4. Mandibular &
- 5. Cervical.... To the muscles of the face.



Bell's Palsy

- Damage of the facial nerve results in paralysis of muscles of facial expressions : (Bell's) palsy; lower motor neuron lesion (whole face affected)
- Face is distorted:
- Drooping of lower eyelid,
- Sagging of mouth angle,
- Dribbling of saliva,
- Loss of facial expressions,
- Loss of chewing,
- Loss of blowing,
- Loss of suckling,
- Unable to show teeth or close the eye on that side.
- NB. In upper motor neuron lesion (upper face is intact).



SUMMARY

- Both trigeminal & facial nerves are mixed.
- Nuclei of trigeminal nerve are found in midbrain, pons & medulla. They are of the general somatic afferent & special visceral efferent types.
- The trigeminal nerve emerges from the pons and divides into: ophthalmic, maxillary & mandibular divisions that receive sensory supply from the face (with an exception of a small area over ramus of mandible).
- All motor fibers are included in the mandibular division & supply <u>muscles of mastication.</u>

SUMMARY

- Nuclei of facial nerve are found in pons. They are of the special visceral afferent & efferent, as well as general visceral efferent type.
- The facial nerve emerges from the cerebellopontine angle, gives motor fibers to muscles of facial expression, secretory fibers to submandibular, sublingual, lacrimal, nasal & palatine glands & receives taste fibers from anterior 2/3 of tongue.

TEST YOUR SELF !

- Stimulation of which of the following nerves could lead to salivation and lacrimation?:
- a) Facial.
- b) Glossopharyngeal.
- c) Trigeminal.
- d) Vagus.

> Lesion of mandibular nerve may result in:

- a) Loss of sensation of skin over the nose.
- b) Loss of lacrimation.
- c) Loss of sensory supply of upper teeth.
- d) Loss of general sensations of anterior 2/3 of tongue.

THANK YOU & BEST LUCK