





CNS PHYSIOLOGY

Definitions File

قالﷺ « وإن الملائكة لتضع أجنحتها لطالب العلم رضاً بما يصنع »

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Definition

- Synapse: it is a junction where the axon or some other portion of one cell (presynaptic cell)terminates on the dendrites, soma, or axo n of another neuron (post synaptic cell).
- Axodendretic: synapses between the axon of one neuron and the dendrite of another neuron.
- Axosomatic: synapses between the axon of one neuron and the soma of another neuron.
- Axoaxonic: axon to axon.
- Dendrodendritic: dendrite to dendrite.
- Dendrosomatic: dendrite to soma.
- Stimulatory field: the neuronal area stimulated by each incoming nerve fiber.
- Excited zone: discharge zone of the incoming fiber.
- Facilitated zone: to each side the neurons are facilitated but not excited.
- Convergence: signals from multiple inputs uniting to excite a single neuron.

- Pyramidal tract: the motor tract which originates from the cerebral cortex and descends to the spinal cord(the corticospinal tract) passes through the pyramids of the medulla.
- Extrapyramidal tract: the rest of the descending motor pathways which do not travel through medullary pyramids.
- Autonomic nervous system: is the efferent portion of the peripheral nervous system that controls involuntary (subconsciously) to adapt the changes in environmentby regulating individual organ, homeostasis and visceral functions.
- Motor unit: it is the axon + nerve fibers that innervates that muscle.
- Reflex: reflex is a fast, predictable, automatic response to changes in the environment.
- Renshaw cells: they are small neurons located in the anterior horns of the spinal cord, in close association with the motor neurons.
- Synaptic delay central delay: is the time of reflex to pass through neurons of the spinal cord.

- Reaction time: reaction time= reflex time= synaptic delay + time spent in conduction ofaction potentials through the afferent and efferent nerves.
- Recruitment of motor units: the increase in the number of active motor units
- Signal prolongation:often the output discharge (initiated by a signal entering a spinal pool) is prolonged for a few milliseconds or many minutes after the incoming signal is over.
- Reverberatory (oscillatory) circuitales : is caused by positive feedback within the circuit in which theoutput neuron sends a collateral nerve fiber back to inputneuron itself making it discharge repetitively for a long time.
- Flexor reflex: in the spinal or decerebrate animal, almost any type of cutaneous sensory stimulus from a limb is likely to cause the flexor muscles of the limb to contract, thereby with drawing the limb from the stimulating object.

- Crossed extensor reflex: about 0.2 to 0.5 second after a stimulus elicits a flexor reflex in one limb, the opposite limb begins to extend.
- Irradiation: spread of impulses up and down to different segments and motor neurons in the spinal cord.
- Stretch reflex: is a reflex contraction of muscle resulting from stimulation of the muscle spindle (MS) by stretching the whole muscle.
- Proprioception: inform the CNS about muscle length & rate or velocity of change in muscle length & provide information about position.
- Coactivation: with alpha motor neurons, in most instances the gamma motor neurons (31%) are stimulated simultaneously.
- Inverse stretch reflex: relaxation in response to strong stretch.

- Brainstem: lower portion of the brain that connects the cerebrum with spinal cord.
- Conjugate eye movement: refers to motor coordination of the eyes that allows for bilateral fixation on a single object.
- Light : 'elctromagnetic' radiation that is capable of exciting the human eye' + its extremely fast .
- Dark adaptation : increased sensitivity of the photoreceptors when vision shifts from bright to dim light.
- Nyctalopia: (night blindness) vitamine A deficiency (main source of retinal of rhodopsin) cause rods, cones & retinal degeneration & loss of rods.
- Light adaptation: when light switched on again, the rods are knocked out of action (they stop sending AP at high levels of light) & cones start to function to adjust & adapt to the level of brightness in 5 min this is called light adaptation.

- Color vision: It the ability to discriminate between different colors.
- Color blindness: Weakness or total blindness in detecting a primary color.
- Trichromats: see the 3 Iry colors (normal or have slight weakness in detecting red or green or blue color).
- Dichromats: boy's slide: (blind to one Iry color) girl's slide: "have only 2 cone pigments systems only so he is completely blind to red or green or blue (so they may have protanopia, deuteranopia, or tritanopia) they get color by mixing only 2 of the primary colors".
- Monochromats: have only one color pigment (system) or loss of all so see only black or grey or have no color perception.
- Protanopia (red blindness): no red cones system so person has shortened spectrum wave lengthlf only weakness in red color vision is called Protanamoly.

- Deuteranopia(green blindness): no green cones system so person see only long & short wave lengthlf only weakness in green color vision is called Deuteranamoly.
- Tritanopia(blue blindness): no blue cones systemIf only weakness in blue color vision is called Tritanamoly.
- Ishihara chart: which areplates contain figures made up of colored spots on background of similarly shaped colored spots.
- **Eye:** fluid-filled sphere enclosed by three specialized tissue layers.
- Sclera: tough outer covering of connective tissue.
- Choroid: The middle layer is the choroid, containing blood vessels.
- Retina: innermost layer which contains light sensitive cells.
- Cornea: modified ant 1/6 of sclera) to allow light to enter the eyes,transparent and avascular.
- Conjunctiva: Transparent membrane covers the anterior surface of eye, reflected on inner surface of eyelids.

- Pupil: Behind center of cornea, control & allow light toenter the eye.
- Iris: Colored part., Has radial muscle dilates the pupil as in dim light >supplied by sympathetic. Has circular muscles constrict the pupil as in bright light> supplied by parasympathetic.
- Pupillary Muscles:consists of > Radial andCircular parts.

- Ciliary muscles (body): Thick ant part of choroid to which attached suspensory ligaments (Zonule).
- Lens: transparent, biconvex, semisolid, diopteric power 15-20 D, held in place by zonule.
- Crystallins: proteins found within the cells of the lens, and are arranged like thelayers of an onion which make the refractive media of the lens.
- Uvea: = Choroid + iris + cilliary muscles.

- Optic Disc (Blind Spot): point of exit ofoptic nerve fibers, contains no photoreceptors.
- Retinopathy in diabetes: -Vessels have weak walls causes hemorrhaging and blindness.
- Diopter: o Measurement of refractive power.
- The Aqueous Humour: transparent, slightly gelatinous (gel-like) fluid similar to plasma, continually being formed and reabsorbed.
- The Vitreous Humour: is the transparent, colorless, gelatinous mass o lt fills the vitreous chamber between the posterior surface of lens of the eye and the retina o The vitreous humour is clear and allows light to pass through o For nourishing retina & keep spheroid shape of the eye).
- Glaucoma: is an eye condition that develops when too muchfluid pressure builds up inside of the eye.

- Binocular Vision: are the areas in the centre of visual field of the two eyes in which any object in this area will be seen by both eyes.
- Hypermetropia (hyperopia = far-sightedness): Short eyeball, focus behindretina,• An affected individual has touse accommodation even fordistant objects to bring imageon retina causes musculareffort on cilliary muscle &prolonged convergence, thisleads to headache & finallysquint & hypertrophy ofciliary muscle.
- Myopia (nearsightedness): Genetic, large eye ball, longanteroposterior diameter, • refractive power of lenssystem or cornea due to itstoo curved surface or due tolong anteroposteriordiameter of the eye • cause image to focus in frontof retina.
- Astigmatism: Uneven & ununiformed corneal curvature, veryrare ununiformed lenscurvature Rays refracted to diff focusblurred vision.
- Presbyopia: eye near point receeds by age due to loss of accommodation.

- Emmetropic Eye: can see all distant objects clearly with its ciliary muscle relaxed & see close objects clearly with ciliary muscles contracted. Normal eye = Emmetropia.
- olfactory chemoreceptors : which are specialized endings of afferent (bipolar) neurons that convert olfactory stimuli (chemicals in gaseous state) into nerve impulse.
- Anosmia: loss of smell sensation.
- Hyposmia: decreased ability to smell.
- Dysosmia: distorted identification of smell.
- Parosmia : Altered perception of smell in the presence of an odor, usually unpleasant.
- Phantosmia: Perception of smell without an odor present.

- Agnosia: Inability to classify or contrast odors.
- Hyperosmia: increase in smell sensation.
- Taste Buds: Barrel shaped structures that contain taste receptors. A Taste bud is a specialised receptors in the oral cavity, but mainly on the tongue, some on the palate.
- Ageusia: complete loss of taste.
- Dysgeusia: disturbed taste.
- Hypergeusia: adrenal insufficiency.
- Hypogeusia: it can be caused by many diseases, and drugs such as penicillamine.

- Conjugate eye movement: refers to motor coordination of the eyes that allows for bilateral fixation on a single object.
- Preservation and protection theory: Sleep preserve energy and it provides activity.
- The reticular activating system: A diffuse network of nerve pathways in the brainstem connecting the spinal cord, cerebrum, and cerebellum, and mediating the overall level of consciousness.
- Sleep (Physiological definition): is a state of unconsciousness from which a subject can be aroused by appropriate sensory or other stimuli.
- Sleep may also be defined as a normal, periodic, inhibition of the reticular activating system. (Anatomical definition)
- Awake: This is the state of readiness / alertness and ability to react consciously to various stimuli.
- Coma: is a state of unconsciousness from which a person cannot be aroused by any external stimuli.
- Restoration theory: Body wears out during the day and sleep is necessary to put it back in shape.

Insomnia: Inability to sleep.

- Somnolence: Extreme sleepness.
- Nightmare: Frightening dreams, awake from REM.
- Sleep paralysis: Subject is awake but unable to speak or move. Sleeping Sickness.
- Somnambulism: Walking during sleep.
- Night terrors: Sudden arousal from sleep and intense fear accompanied by physiological reactions (e.g. rapid heart rate, perspiration) that occur during slow-wave sleep.
- Narcolepsy: Excessive sleepiness may occur while talking, sitting, decreased ability to regulate sleep. `
- Sleep apnea: Failure of breathing when asleep.

Thank you!

اعمل لترسم بسمة، اعمل لتمسح دمعة، اعمل و أنت تعلم أن الله لا يضيع أجر من أحسن عملا.

Done by: Jawaher Alkhayyal Mohammad Alayed Lulwah Alshiha Laila Mathkour

References:

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Team Leaders:

Lulwah Alshiha Laila Mathkour Mohammad Alayed

Contact us:

اقتراحات وشكاوي