







- Text.
- Important
- Formulas
- Numbers
- Doctor notes
- Extra notes and explanation

CNS PHYSIOLOGY

Lecture No. [£]

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I • We recommended you to study Embryology lecture first.

Spinal cord functions and reflexes

Objectives:

- I. Describe the general structure and function of the spinal cord
- 2. Distinguish between the functional role of gray matter and white matter
- 3. Classify reflexes into superficial and deep, and describe the components of a monosynaptic and a polysynaptic reflex arc.
- 4. Compare and contrast the features of a stretch reflex, a Golgi tendon reflex, a withdrawal reflex, and a cross extensor reflex.
- 5. Appreciate the clinical importance of reflexes (their use as a diagnostic tool for assessment of nervous system function).

Embryonic development

Video of (Early Neural development) Duration: 2 mins



The nervous system

• Higher brain or cortical level:

Control all lower centers, thought processes, memory

Lower brain or subcortical level:

Subconscious activities of the body are controlled in the lower areas of the Brain, the medulla, pons, mesencephalon, hypothalamus, thalamus, cerebellum, and basal ganglia.

- Spinal cord level:
- 1. Walking.
- 2. Withdrawal.
- 3. Anti gravity reflexes.
- 4. Local blood vessels gastrointestinal, urinary/defecation.



The Spinal Cord (SC)

- It is about 45 cm long and 2 cm in diameter.
- The spinal cord has a grey matter filled with neurons.
- It is composed of about 100 million neurons and even more neuroglia.
- It is continuous with the brain and together they make up the CNS (central nervous system).
- The spinal cord has 31 pairs of spinal nerves.





The Spinal Cord



Spinal cord organization

he structural organization of the spinal cord can best be studied in a cross section of the cord which reveals:

An outer band of white matter surrounding

- Divided into bundles (funiculi), each bundle (tract) contains nerve fibers travelling between the spinal cord and the brain.
- These bundles form the spinal cord ascending (sensory) and descending (motor) pathways.
- The white matter on each side is divided into 3 broad areas called columns:
- I.The dorsal (posterior) column.
- 2. The lateral column.
- 3. The ventral (anterior) column.

- An inner core of grey matter (H shaped)
- In the grey matter of the spinal cord and brain, clusters of neuronal cell bodies from functional groups called neuclei.
- Sensory neuclei receive input from receptors via sensory neurons.
- Motor neuclei provide output to effector tissues via motor neurons.
- Can be divided into 3 functional zones:
- I. The dorsal (posterior) grey horn contains axons of sensory neurons and cell bodies of interneurons.

2. The lateral grey horn contains cell bodies of autonomic motor neurons.

3. The anterior grey horn contains cell bodies of somatic motor neurons.

The nervous system

- How brain functions?
- Collection of sensory input.
- Central integration.
- Motor output.
- Grey matter:

The grey matter consists of neuron cell bodies and dendrites and is found in the cortex (surface layer) of the brain and deep within brain nuclei.

White matter:

White matter consists of axon tracts (the myelin produces the white color). The adult brain consists of an estimated 100 billion (1011) neurons, and weighs about 1.5 kg. The cerebral blood flow receives 20% of the total cardiac output.





Spinal cord organization



Functions of the spinal cord

The two-way traffic along the spinal cord:

- A-Sensory signals from receptors enter the cord through the sensory (posterior) roots, then every sensory signal travels to two separate destinations:
- 1. One branch of the sensory nerve terminates in the gray matter of the cord and elicits local segmental cord reflexes
- 1. Another branch transmits signals to higher levels in the cord , or to the brain stem, or even to the cerebral cortex through:

A. spinal ascending sensory tracts as:

- Dorsal Column Tracts (Gracile & Cuneate).
- Lateral & Anterior Spinothalamic Tract.
- Spinocerebellar Tracts.

B. Spinal decending motor tracts:

Motor signals & brain motor commands pass through descending motor tracts & then to spinal efferent motor nerves to skeletal muscles to execute motor functions.



ONLY IN FEMALES' SLIDES

The organization of the spinal cord for motor functions

• What is the motor unit?

وحدة انقباض العضلة

- It is the axon + nerve fibers that innervates that muscle.
- Anterior horn cells: alpha motor neurons and gamma motor neurons. (these motor neurons are only found in the spinal cord)
- Located in each segment of the anterior horns of the cord grey matter, several thousand neurons that are 50 to 100 percent larger than other neurons.
- They give rise to nerve fibers that leave the cord in the anterior roots and directly innervate the skeletal muscle fibers.



Spinal cord functions

- Center for Spinal Cord Reflexes (Somatic & Autonomic).
- Gateway and conduction pathway for all tracts.
- Gateway for Pain control systems.

What is a Reflex?

A reflex is a fast, predictable, automatic response to changes in the environment.

• Terms to remember:

- Reflex Arc.
- Ipsilateral.
- Contralateral.
- Monosynaptic.
- Polysynaptic.
- reciprocal innervation



Functions of the spinal cord

The spinal cord serves two basic functions:

I.The two-way traffic along the spinal cord

- Sensory signals from the receptors enter the cord through the sensory (posterior) roots, then every sensory signal travels to two separate destinations:
- 1. One branch of the sensory nerve terminates in the grey matter of the cord and elicits local segmental cord reflexes.
- 2. Another branch transmits signals to higher levels in the cord, or to the brain stem, or even to the cerebral cortex through spinal ascending sensory tracts as:
- Dorsal column tracts (gracile and cuneate).
- Lateral spinothalamic tract and anterior spinothalamic tract.
- Spinocerebellar tracts.

Motor signals and brain motor commands pass through descending motor tracts and spinal efferent motor nerves to skeletal muscles to excute motor functions.

2. Generating Spinal Reflexes

ردود أفعال = Reflexes

We have other types of reflexes in the brain like corneal reflex, coughing reflex.



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Interneurons & interneuron pool

- Interneurons are present in the grey matter in the dorsal horns, the anterior horns, and the intermediate areas between them.
- These cells are about 30 times as numerous as the anterior motor neurons, small and highly excitable, often exhibiting spontaneous activity.
- Diverging, converging, and repititive-discharge.
- They are <u>excitatory</u> or <u>inhibitory</u>.



Renshaw Cells

Cellula del Renshaw di un corno anteriore del midollo spinale.

Renshaw cells: they are small neurons located in the anterior horns of the spinal cord, in close association with the motor neurons.



Renshaw cell (interneuron)

Flexor -

Extensor

Important characteristics of neuronal circuits

Sensory afferent enter spinal cord via dorsal (posterior) root, as they <u>enter</u> the neuronal pool they undergo:

I. Divergence of signals		2. Reciprocal inhibit	tion 3. Convergence of sig	 3. Convergence of signals Source of signals from multiple inputs converge to excite or inhibit a single neuron. Multiple action potentials converging on the neuron from multiple terminals provide enough spatial summation (spatial means at the same time, because we have another type of summation which is temporal summation, the potentials does not come at the same time) to bring the neuron to the threshold required for discharge. The neurons are almost never excited by an action potential from a single input terminal, multiple stimuli summate and collect together at the same time. 	
Diverge means that a signal from a single input spreads to many neurons (many outputs). In the spinal cord, divergence helps a signal to spread to a wide area. It is important for weak signals entering a neuronal pool to excite far greater numbers of nerve fibers leaving the pool.		Next slide.	 Convergence means sign excite or inhibit a single ner converging on the neuron spatial summation (spatial have another type of summ potentials does not come to the threshold required The neurons are almost from a single input terminat together at the same time. 		
		Convergence allows summation of information.		mmation of information.	
ו the same tract/path to cause mplification of the signal. In multiple tracts (e.g signals can be relayed different ascending tr transmit the signal to areas.		g. pain d by cracts) to o separate	From a single source.	Multiple separate sources (excitatory or inhibitory)	

2. Reciprocal inhibition: (عكسية أو تبادلية)

- Reciprocal inhibition is always polysynaptic
- Agonist: monosynaptic
- Antagonist: polysynaptic
- Stimulation of flexor muscle accompanied by inhibition of extensor through inhibitory interneurons, (and vice versa), the neuronal circuit that causes this reciprocal relation is called reciprocal innervation. Reflex contraction of an agonist muscle is accompanied by inhibition of the antagonist.
- The input fiber directly excites the excitatory output pathway, but it stimulates an intermediate inhibitory neuron (neuron 2) which secretes different type of transmitter substance to inhibit the second output pathway from the pool, preventing over activity in many parts of the spinal cord. (and prevents opposition (isolated in the two muscles).



• Divergence:



• Convergence:



Note: Neurons are almost never excited by a single action potential from a single input terminal. Temporal or spatial summation is required.

- Output from one neuron onto many.
- Each postsynaptic neuron receives input from the same presynaptic neuron, but may react to it differently.
- In a divergent neural circuit, the axon of one neuron branches to send information to multiple target neurons.
- Divergent output allows the same signal to reach many different neurons.





ONLY

IN FEMALES





Reverberatory (oscillatory) circuit:

- The simplest reverberatory circuits involves only a single neuron, the output neuron sends a collateral nerve fiber back to its own dendrites or soma to restimulate the input neuron itself and so the circuit may discharge repetitively for a long time and causes signal prolongation (allow prolonged discharge of the same motor neurons by a single stimulus).
- A more complex circuits in which both facilitatory and inhibitory fibers involved on the reverberating circuit.
- A facilitatory signal enhances the intensity and frequency of reverberation, whereas an inhibitory signal depresses or stops the reverberation.
- Most reverberating pathways are constituted of many parallel fibers.



- After-discharge. (after stoppage):
- A signal entering a pool causes a prolonged output discharge of AHCs called Afterdischarge, lasting a few milliseconds to as long as many minutes after.
- The incoming signal is over.

Synaptic after-discharge:

when excitatory synapses discharge on the surfaces of dendrites or soma of a neuron, a postsynaptic electrical potential (PSP) develops in the neuron and lasts for many milliseconds. (because the NTs are still coming out).

As long as this potential lasts, it can continue to excite the neuron, causing it to transmit a continuous train of output impulses (a series of repetitive discharges).

This causes maintained reflex action and response continue for some time after cessation of stimulus.



Spinal reflexes

If there is any spinal motor reflex, the effector would be a muscle.

The functional unit of cns, it is a rapid, automatic (involuntary) response to a stimulus a stimulus could be mechanical electrical, etc. The stimulation goes to the spinal cord and cause a response. (E.G. Pinprick causes withdrawal response) that involves neurons only in the spinal nerves and spinal cord.

- > The spinal cord and its associated spinal nerves contain neural circuits that control reflexes.
- Reflexes are very important in defending against harmful stimuli and maintaining body support.
- It involves sensory receptors, sensory afferent neurons, spinal cord motor neurons and spinal nerves (reflex arc).
- Reflex arc (reflex circuit) is the pathway followed by nerve impulses that produce a reflex.

The Male dr said 7 not 5 and they are : 2. Sensory receptor I. Stimulus 3. Sensory neuron 4. Integration center 6. Effector 5. Motor neuron

7. Action

It responds to a specific stimulus, by producing a graded potential called a Generator Potential(GP). ٠ I.Sensory receptor If a GP reaches the threshold level of depolarization, it will trigger one or more nerve impulses in the ٠ (in the skin) sensory neuron. The sensory signal in the form of APs propagate along the axon of the sensory neuron to the axon terminals ٠ which are located in the grey matter of the spinal cord or brain stem. 2.Sensory neuron The signal is relayed to brain regions that allows conscious awareness that the reflex has occurred. or to motor ٠ neurons directly or via interneurons. In the simplest type of reflex, the integrating center is a single synapse between a sensory neuron termed ٠ **3.Integrating center** Monosynaptic Reflex Arc. A Polysynaptic Reflex Arc involves more the 2 types of neurons and more than one CNS synapse. ٠ they are large with large myelinated fibers Alpha motor APs generated in the integrating (axons), form 70% of ventral root, supply center propagate out of the CNS extrafusal muscle fibers (2/3 of skeletal neurons along the efferent axons to the 4.Motor (Efferent) neuron muscle fibers). effector. they are small with small axons, form 30% of There are 2 types of motor neurons: ٠ Gamma motor ventral root, that supply intrafusal muscle fiber (muscle spindles = 1/3 of skeletal muscle neurons fibers) Is the part of the body that responds to the motor nerve impulse, such as a muscle or a gland. Its response is called a reflex. **5.Effector** If the effector is skeletal muscle, the reflex is a somatic reflex. ٠ If the effector is a smooth muscle, cardiac muscle, or a gland, the reflex is an autonomic (visceral) reflex.

*We don't call this pathway a tract because it is circular, it starts with a receptor and ends with an effector. The reflex arc is purely spinal, 26 does not have any brain effect.

Cont. This slide is very imporatant

• Make sure to remember the levels.



Doctor's notes

- Important for reflexes:
- If the spinal cord is cut the reflexes are present but the proper actions are is absent because the nerves can't reach the brain.
- Eg, a cat with a cut spinal cord is unable to walk or stand but if u hold the cat and let her paws touch the ground her legs will extend and strengthen due to a reflex from the spinal cord and this strength is able to lift her but if you leave the cat it will fall because the signal cant reach the brain so there is no balance and the cat can't send signals to its legs.

Cont. Integrating center

- (Inside the spinal cord, can be in the dorsal or ventral horns or in between)
- > One or more grey matter neurons within the spinal cord acts as an integrating center.
- In the simplest type of reflex, the integrating center is a single synapse between a sensory neuron and a motor neuron.
- When a reflex arc consists of only two neurons in an animal (one sensory neuron and one motor neuron) it is defined as monosynaptic. A reflex pathway having only one synapse in the CNS is termed a monosynaptic reflex arc.
- More often, the integrating center consists of one or more interneurons, which may relay impulses to other interneurons as well as to a motor neuron.
- A polysynaptic reflex arc involves more than two types of neurons and more than one cns synapse.



Summary



Classification of reflexes



Spinal Cord Reflexes



Reciprocal inhibition and reciprocal innervation

When a stretch reflex excites one muscle, it often simultaneously inhibits the antagonist muscles, which is the phenomenon of reciprocal inhibition, and the neuronal circuit that causes this reciprocal relation is called reciprocal innervation.



Reflexes

Flexor reflex and the withdrawal reflexes:

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. This reflex is called the flexor reflex.

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. This reflex is called the crossed extensor reflex.

Extension of the opposite limb can push the entire body away from the object, causing the painful stimulus in the with-drawn limb.





Figure 55-10. Myogram of the flexor reflex showing rapid onset of the reflex, an interval of fatigue, and, finally, afterdischarge after the input stimulus is over.





Figure 55-11. Myogram of a crossed extensor reflex showing slow onset but prolonged afterdischarge.



Reflexes of posture and locomotion

- Stepping and walking movements:
- Rhythmical stepping movements of a single limb.
- Reciprocal stepping of opposite limbs.
- Diagonal stepping of all four limbs "mark time" reflex.
- Galloping reflex.
- Scratch reflex:
- Position sense that allows the paw to find the exact point of irritation on the surface of the body.
- A to-and-fro scratching movement.
- Spinal cord reflexes that cause muscle spasm
- Muscle spasm resulting from a broken bone.
- Abdominal muscle spasm in persons with peritonitis.
- Muscle cramps.

Autonomic Reflexes in the Spinal Cord

- Segmental autonomic reflexes are integrated in the spinal cord:
- Changes in vascular tone resulting from changes in local skin heat.
- 2. Sweating, which results from localized heat on the surface of the body.
- 3. Intestinointestinal reflexes that control some motor functions of the gut.
- 4. Peritoneointestinal reflexes that inhibit gastrointestinal motility in response to peritoneal irritation.
- 5. Evacuation reflexes for emptying the full bladder.

Mass reflex:

In a spinal animal or human being, some times the spinal cord suddenly becomes excessively active, causing massive discharge in large portions of the cord by painful stimulus.

Autonomic reflexes in the spinal cord

Golgi (Deep) Tendon Reflex

- Receptor: Golgi tendon organ
 - Mechanoreceptor that responds to muscle tension (via the tendon)
 - Stimulus: increased tension (increased nerve impulses to spinal cord)
 - Response: muscle relaxes (decreased nerve impulses to spinal cord)
 - > Inhibits the agonist
 - Reciprocal path: activates the antagonist
- Polysynaptic, ipsilateral, and segmental





Figure 55-2. Peripheral sensory fibers and anterior motor neurons innervating skeletal muscle.

Types of spinal reflexes



Cont. THIS SLIDE IS VERY IMPORTANT

Types of Spinal Reflexes							
Reflex	Stimulus	Clinical test					
Stretch (myotatic) reflex	Rapid stretch of muscle	Tap on muscle tendon					
Inverse stretch reflex (autogenic inhibition)	Large force on tendon	Pull on muscle when rested					
Flexor reflex (withdrawal)	Sharp painful stimulus	None – stepping on nail					
Stretching stimulates SENSORY RECEPTOR (muscle spindlo) Contracts and netretching Contracts and netretching Contracts and NetuRoN Netu	EFFECTOR (muscle attached instituted instituted	Schnal NeuRon					

Superficial and deep reflexes



- Generated by stimulation of receptors deep in muscle and tendons (muscle spindle and Golgi tendon organ).
- Examples:
- I. Stretch reflexes (tendon jerk).
- 2. Knee-jerk (patellar reflex).
- 3. Ankle jerk.

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- Generated by stimulation of superficial receptors in the skin.
- Examples:
- . Withdrawal reflexes.
- 2. Abdominal reflexes.
- 3. Plantar reflexes.

Withdrawal Reflex (Polysynaptic)

- Mediated by: nociceptors (pain receptors).
- > The response is: reflex contraction of the flexor muscles causing withdrawal of the limb from painful stimulus.



Crossed Extensor Reflexes

- Withdrawal reflex: Flexion of the injured limb to withdraw from noxious stimulus.
- Crossed extensor reflex: Extension of the opposite limb to support full weight of the body.



Explanation:

When a person steps on a painful stimulus(needle) the withdrawal reflex will happen and the person will lift his leg up as a reflex from the pain, then comes the crossed extensor reflex which will extend your other leg to compensate for the weight changing and prevent the person from falling.

- While pushing the body away from the injurious agent by withdrawal R, the crossed extensor reflex supporting the body weight against gravity.
- Flexion and withdrawal of the stimulated limb (with opposite response) causes extension of the opposite limb which occurs with strong stimulus because of several reasons: why?

(الإصابة لازم تكون قوية عشان يصير irradiation فبالتالي تنرسل إشارات للطرف الثاني ويسوي ردة فعل معاكسة).

- 1. Signals from sensory nerves cross the opposite side of the cord to excite extensor muscles.
- 2. It does not begin until 200 to 500 milliseconds (because the whole process takes time) after onset of the initial pain stimulus, because many interneurons are involved in the circuit between the incoming sensory neuron and the motor neurons of the opposite side of the cord.
- 3. After the painful stimulus is removed, the crossed extensor reflex has an even longer period of after-discharge, results from reverberating circuits among the interneuronal cells.
- 4. The prolonged after-discharge is of benefit in holding the pained area of the body away from the painful object.
- Mostly in the lower limb to support balance.
- Reciprocal innervations occurs also in crossed extensor reflex, How? (the legs have opposite actions). Flexor in the opposite limb are inhibited while extensors are excited because while pushing the body away from the injurious agent by withdrawal R, the crossed extensor reflex supporting the body weight against gravity.



Withdrawal reflex (flexor/nociceptive reflex)

• A superficial polysynaptic reflex:



Characteristic of withdrawal reflex

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I. Diverging circuits to spread the reflex to the necessary muscles for withdrawal.	 Stimulation of flexor muscle accompanied by inhibition of extensors through inhibitory interneurons. Reflex contraction of an agonist muscle is accompanied by inhibition of the antagonist.
2. Circuits to inhibit the antagonist muscles, called reciprocal inhibition circuits.	 Cause: Different conduction velocities of afferents, some are slowly and others are rapidly conducting fibers. Different number of interneurons with short and long pathways to the motor
3. Recruitment*: Gradual and slow activation of more number of motor neurons (AHCs) on stim of afferent nerve in a reflex are by maintained, repetitive stimulus.	 neurons (AHCs). Impulses do not reach AHCs at the same time but reach them gradually, so maintained stimulation allows more neurons to be stimulated. (some are closer and some are further, so it is gradual, starting from closer to further) Motor unit recruitment: If a repetitive and strong stimulus is maintained, there will be gradual increase in the force of the muscle contraction until the maximum force
4. After-discharge circuits: Circuits to cause after-discharge lasting many fractions of a second after the stimulus is over.	 is reached, due to gradual recruitment/activation of more and more motor neurons. (to give maintained and strong response). The duration of after-discharge depends on the intensity of the sensory stimulus that elicited the reflex.
5. Irradiation: Spread of impulses up and down to different segments and motor neurons in the spinal cord.	 Causes: Presence of reverberating circuit restimulate AHCs. Value/prolong the protective response of reflex.
6. Pattern of Withdrawal: The pattern of withdrawal that	Next slide
results when the flexor reflex is elicited depends on which sensory nerve is stimulated.	Next slide

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5. Irradiation: Spread of impulses up and down to different segments and motor neurons in the spinal cord.

- A strong stim in sensory afferent irradiates to many segments of spinal cord due to divergence.
- The extent of the response in a reflex depends on the intensity of the stimulus:

6. Pattern of withdrawal: the pattern of withdrawal that results when the flexor reflex is elicited depends on which sensory nerve is stimulated*.

Thus, a pain stimulus on the inward side of the arm elicits not only contraction of the flexor muscles of the arm but also contraction of abductor muscles to pull the arm outward. This is called the principle of "local sign".

The	more intense Greater spread of	Involving more and	Reflex		
the	stimulus**. spinal cord	neurons	Clinical test stimulus	Sharp painful stimulus (stepping on nail)	Acarding 1 MELEON Meleon BELEON Meleon BELEON BELEO
		·····	Response	Limb is rapidly withdrawn	
	More respo		Sensory response	Cutaneous skin and pain receptors	working and with the Development of the Development
ns	Irradiates to small number of		Synapses involved	Polysynaptic (via interneuron)	
Weak stimulus – neurons, so it causes we		ses weak flexion of	Effects on muscle	Contracts flexor muscle	
es of st	Irradiates to large	ge number of neurons, ndrawal of affected limb of opposite limb. (as in or reflex)	Other effects	Reflexes (-) extensor muscle of same limb	Reverses effect on opposite limb (cross extensor reflex)
Туре	Strong stimulus so it causes with and extension of crossed extension of		Function	Protective – withdrawal from painful stimulus	Cross extensor aids in maintaining posture when opposing leg is lifted

* في نفس مكان الستيميوليشن يحدث الريسبونس.
 ** مثال: لما تنجرح من ورقة بتكون ردة الفعل بسيطة، لكن كل ما زاد المسبب زادت ردة الفعل.



Thank you!

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

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References:

- Females and Males slides.
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