

# Conduction speed

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❖ **Number of synapses**

# Conduction speed

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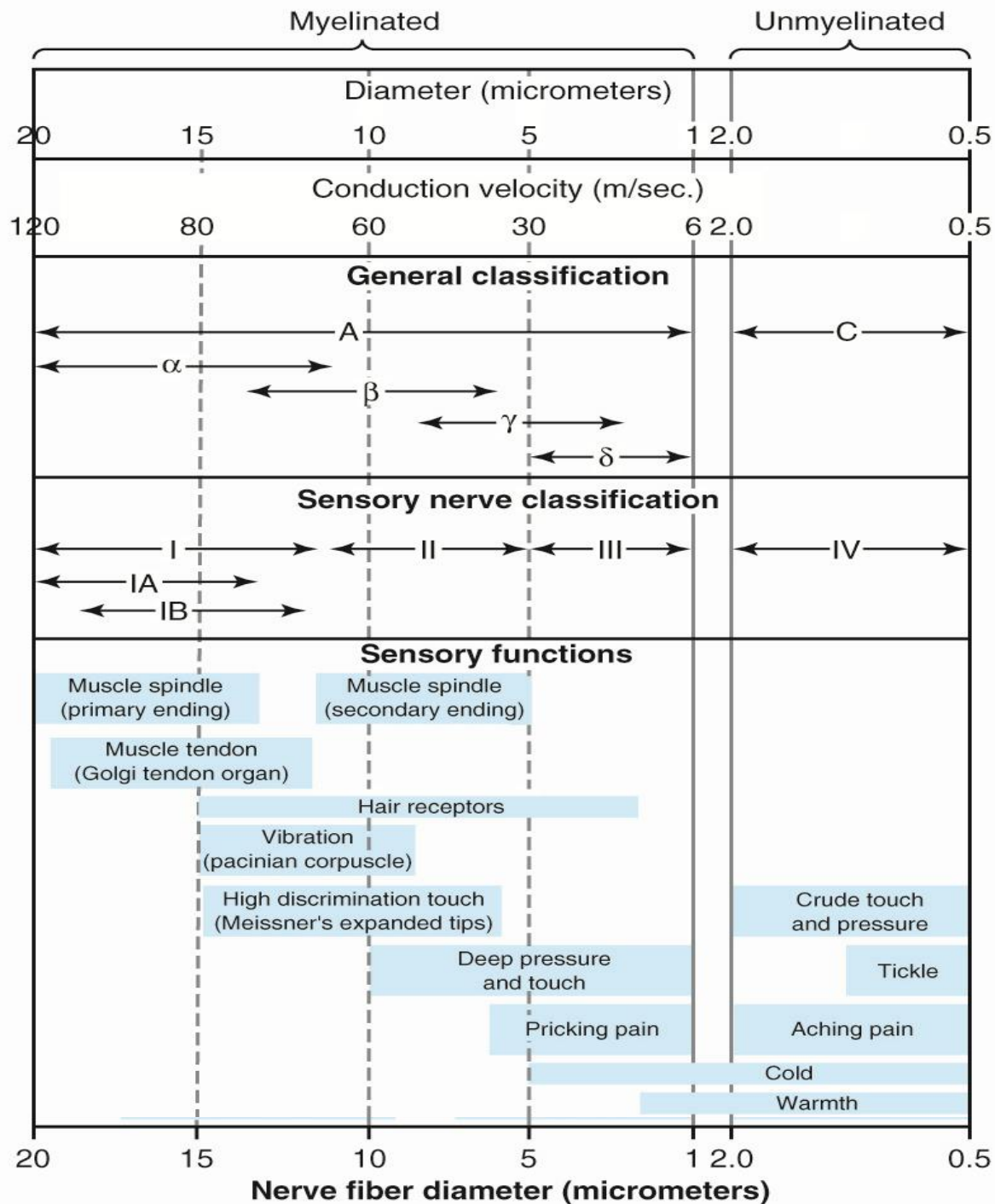
❖ **Number of synapses**

❖ **Myelination**

# Conduction speed

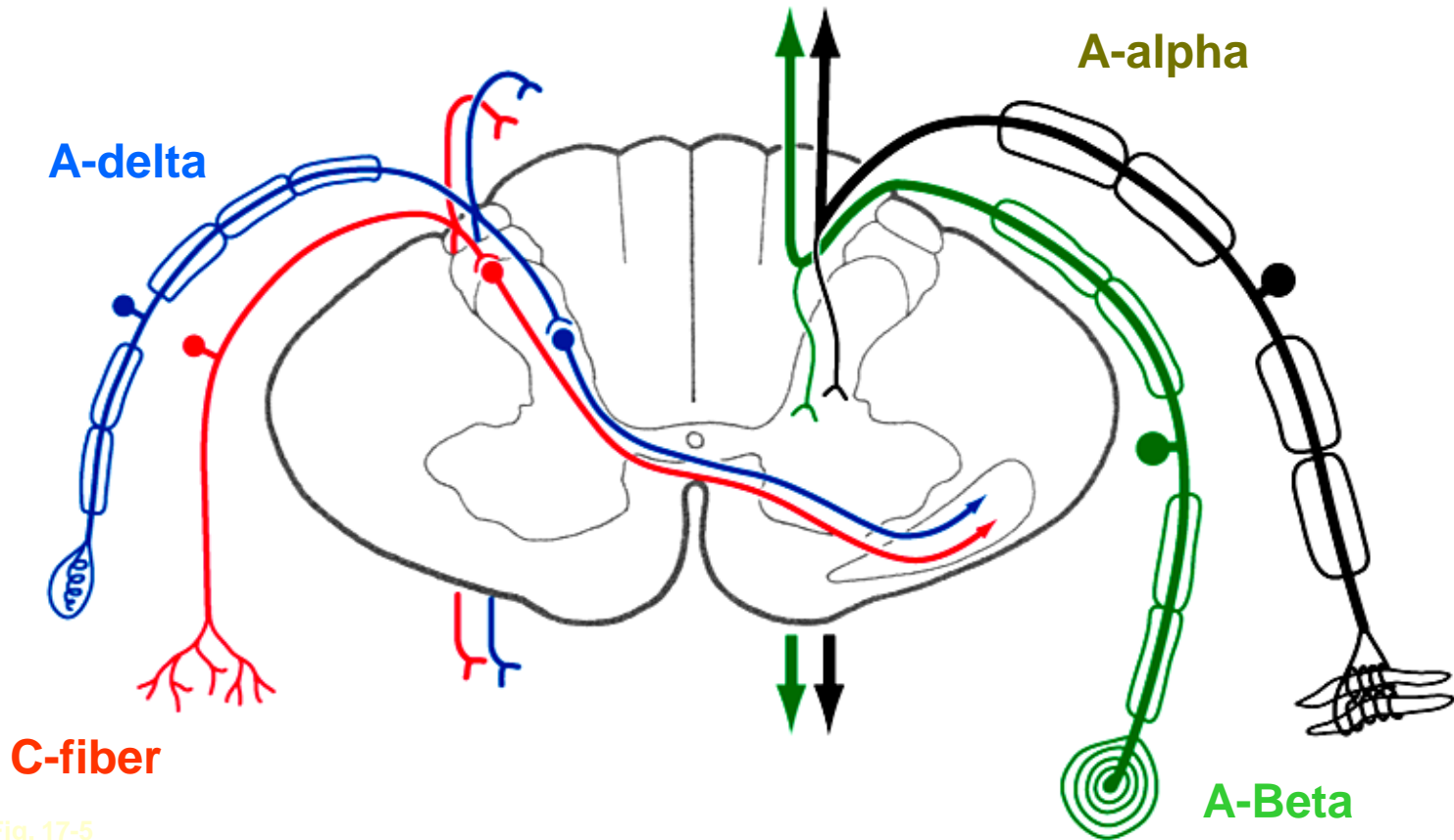
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- ❖ **Number of synapses**
- ❖ **Myelination**
- ❖ **Nerve axon size**



**Nociceptive endings/fibers**

**Proprioceptive endings/fibers**



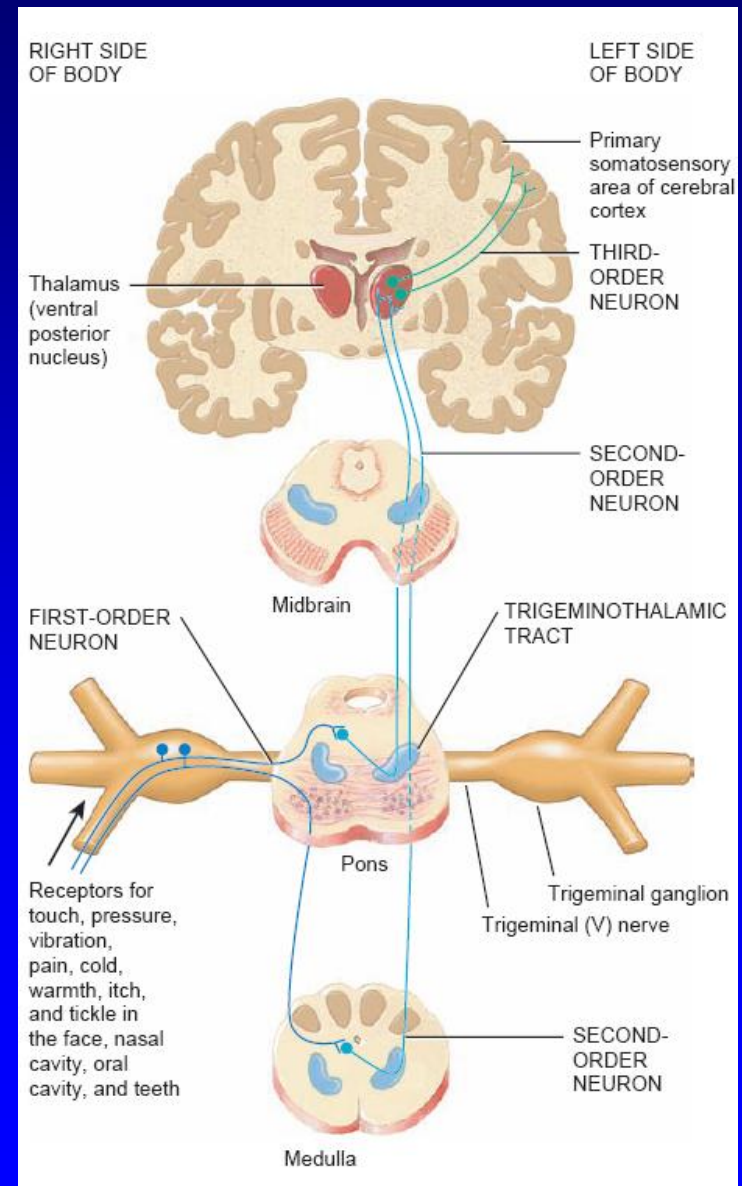
Text Fig. 17-5

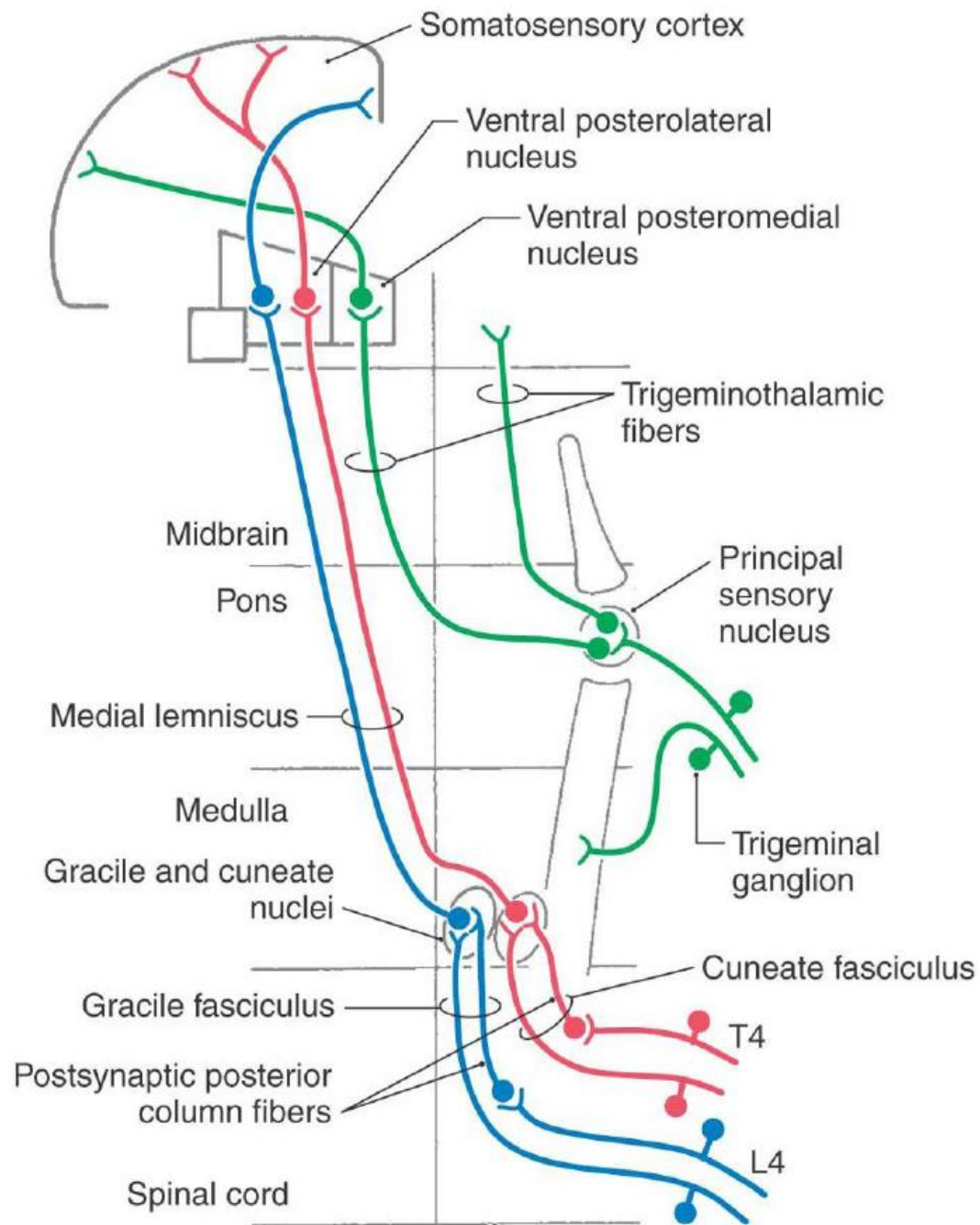
# Somatosensory from The Face

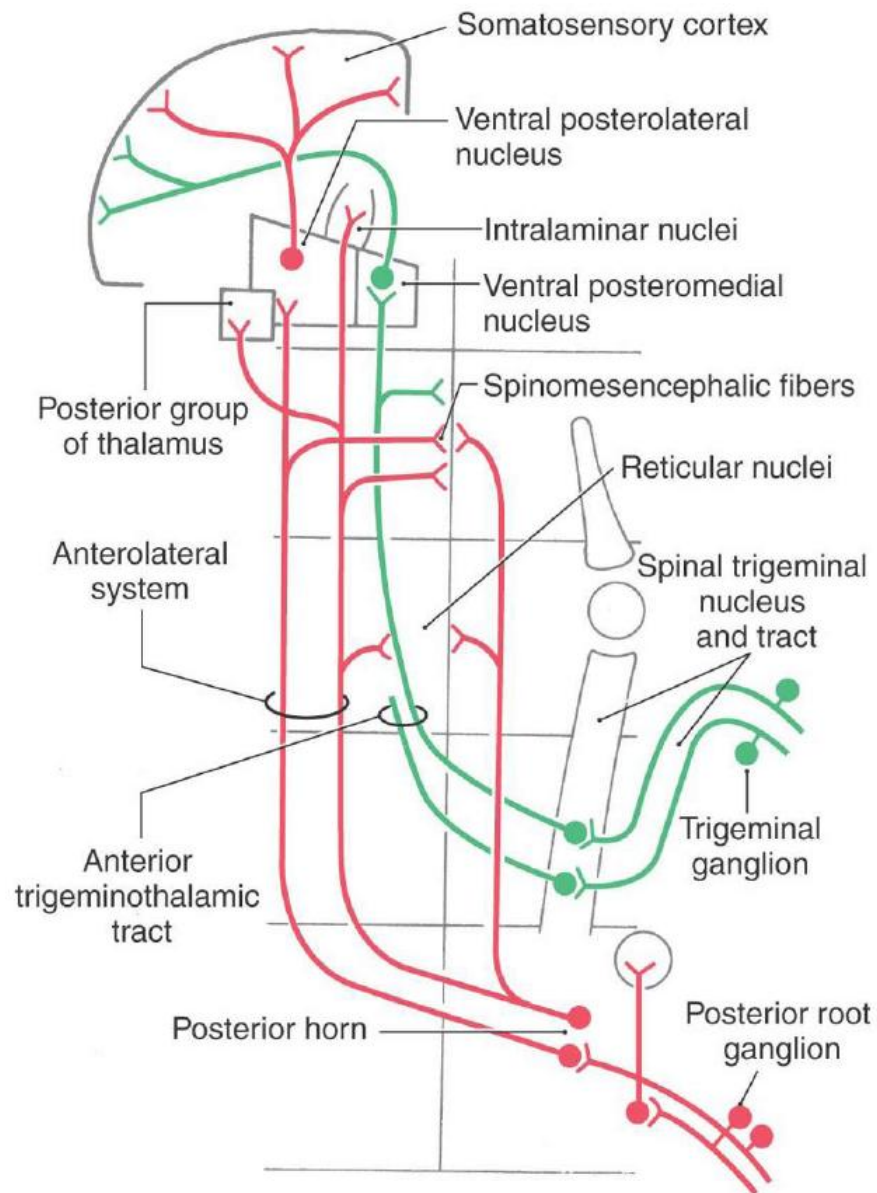
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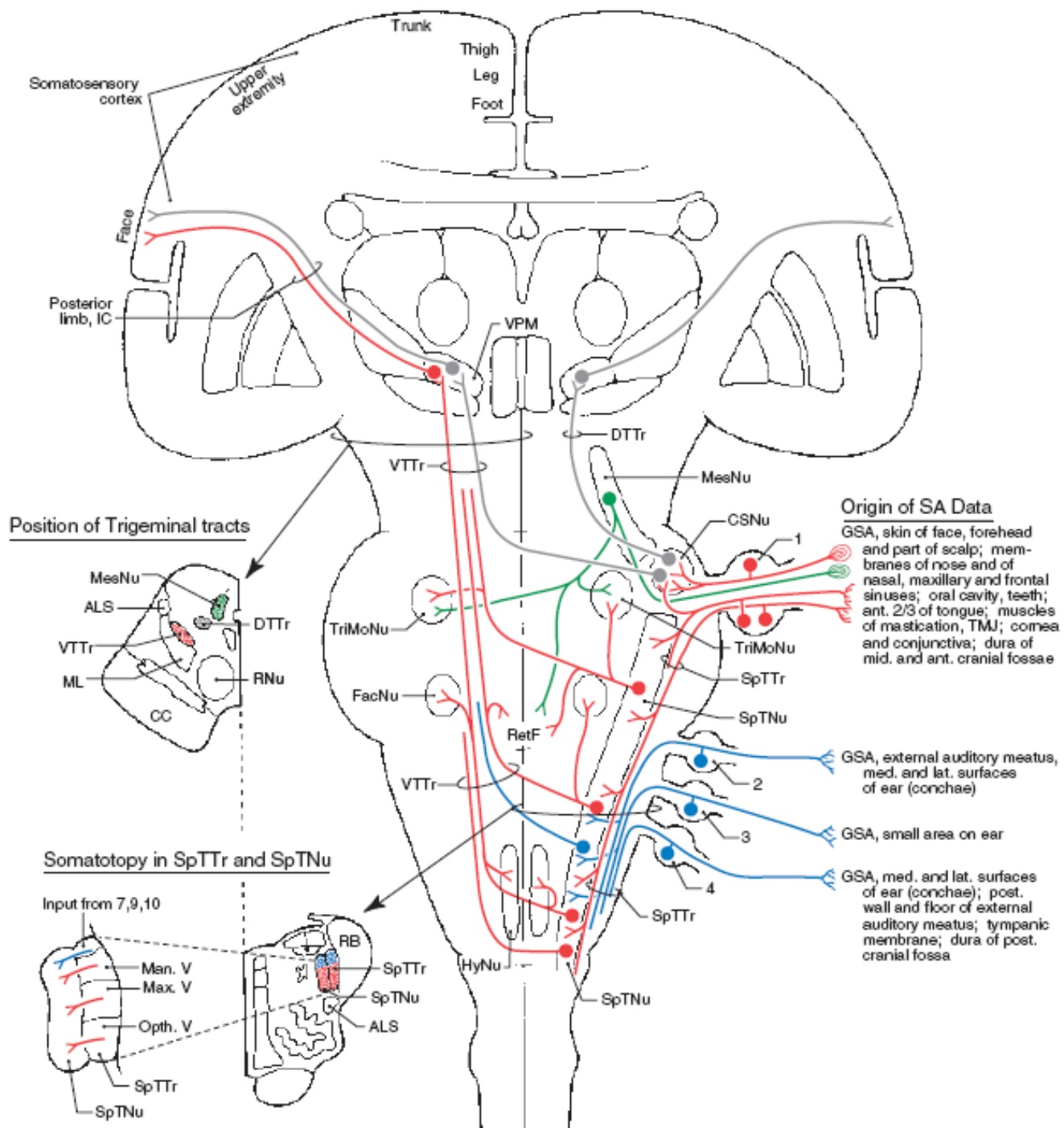
# (Trigeminal system)

- Carry all the sensation modalities from the face to the brain









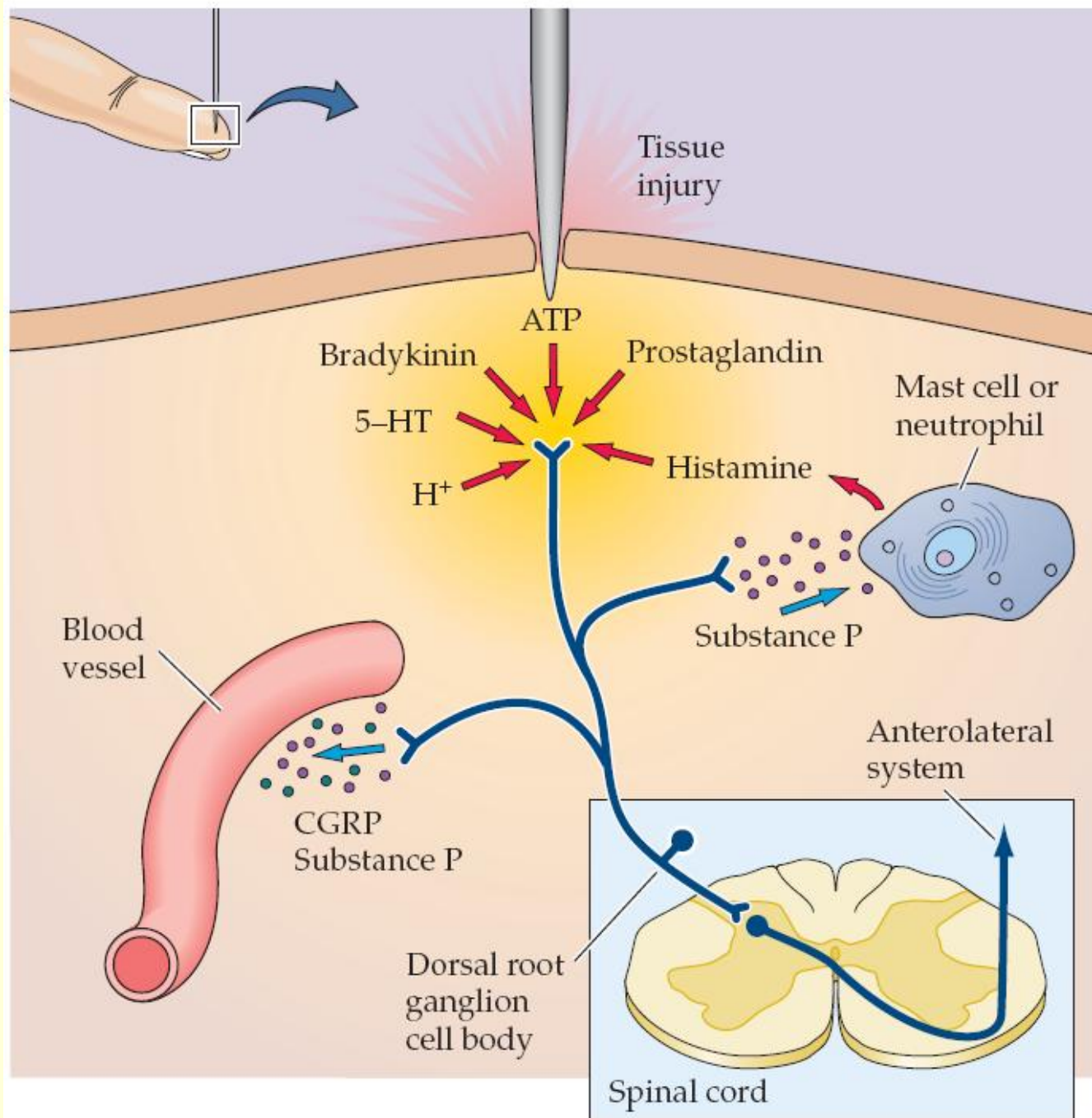
# PAIN



# TERMINOLOGIE

TERM	DESCRIPTION
<b>ALLODYNIA</b>	PERCEPTION OF NON-NOXIOUS STIMULUS AS PAIN
<b>ANALGESIA</b>	ABSENCE OF PAIN PERCEPTION
<b>ANESTHESIA</b>	ABSENCE OF ALL SENSATIONS
<b>ANESTHESIA DOLOROSA</b>	PAIN IN AN AREA THAT LACKS SENSATION
<b>DYSESTHESIA</b>	UNPLEASANT SENSATION WITH OR WITHOUT STIMULUS
<b>HYPOALGESIA</b>	DIMINISHED RESPONSE TO NOXIOUS STIMULUS
<b>HYPERALGESIA</b>	INCREASED RESPONSE TO NOXIOUS STIMULUS
<b>HYPERASTHESIA</b>	INCREASED RESPONSE TO MILD STIMULUS
<b>HYPOASTHESIA</b>	REDUCED CUTANEOUS SENSATION
<b>NEURALGIA</b>	PAIN IN THE DISTRIBUTION OF A NERVE
<b>PARASTHESIA</b>	ABNORMAL SENSATION PERCEIVED WITHOUT AN APPARENT STIMULUS
<b>RADICULOPATHY</b>	FUNCTIONAL ABNORMALITY OF NERVE ROOTS





# **NEUROCHEMISTRY**

**PERIPHERY - injury produces release of endogenous chemicals:**

- **Bradykinin**
- **Histamine**
- **Serotonin**
- **Prostaglandins**
- **Substance P**

# **ASCENDING PATHWAYS**

- **ANTEROLATERAL System**

- **SPINOTHALAMIC TRACT**

- **originating neurones in laminae I, V, VI, IX**
    - **Neospinothalamic tract**
      - **project to VPL, VPM**
      - **synapse and project to somatosensory cortex**
    - **Paleospinothalamic tract**
      - **from deeper laminae**
      - **to thalamus (other nuclei) , midbrain, pontine and medullary reticular formation (Spinoreticular tract), periaqueductal grey (Spinomesencephalic tract), and hypothalamus (Spinohypothalamic tract)**

# ASCENDING PATHWAYS

- **Spinoreticular tract**
  - projects to medullary and pontine reticular formation
  - involved in motivational and affective responses to pain
  - ascend medially to spinothalamic tract
- **Spinomesencephalic tract**
  - project to caudal midbrain areas including periaqueductal gray
- **Spinohypothalamic tract**

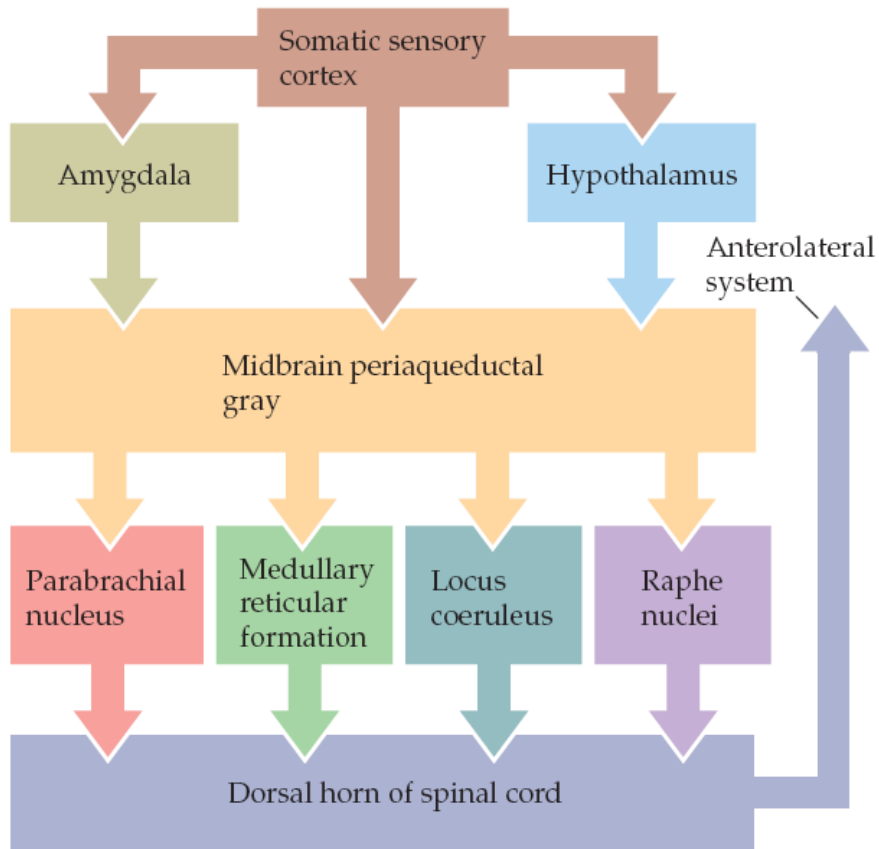
# **DESCENDING CONTROL**

- **Studies in animals and man show anti-nociception and analgesia from stimulation or opioid administration to many supraspinal centres**
- **CORTEX**
  - **via corticospinal efferents**
  - **terminations in superficial laminae**
  - **may be inhibitory *or* excitatory and influence non-noxious stimuli as well**
- **HYPOTHALAMUS**
  - **many afferents and efferents - including NTS, PAG, LC, parabrachial nuclei, raphe nuclei**
  - **widespread reciprocal innervation**
  - **direct projection to lamina I**
  - **may be bulbospinal relay for descending inhibition**

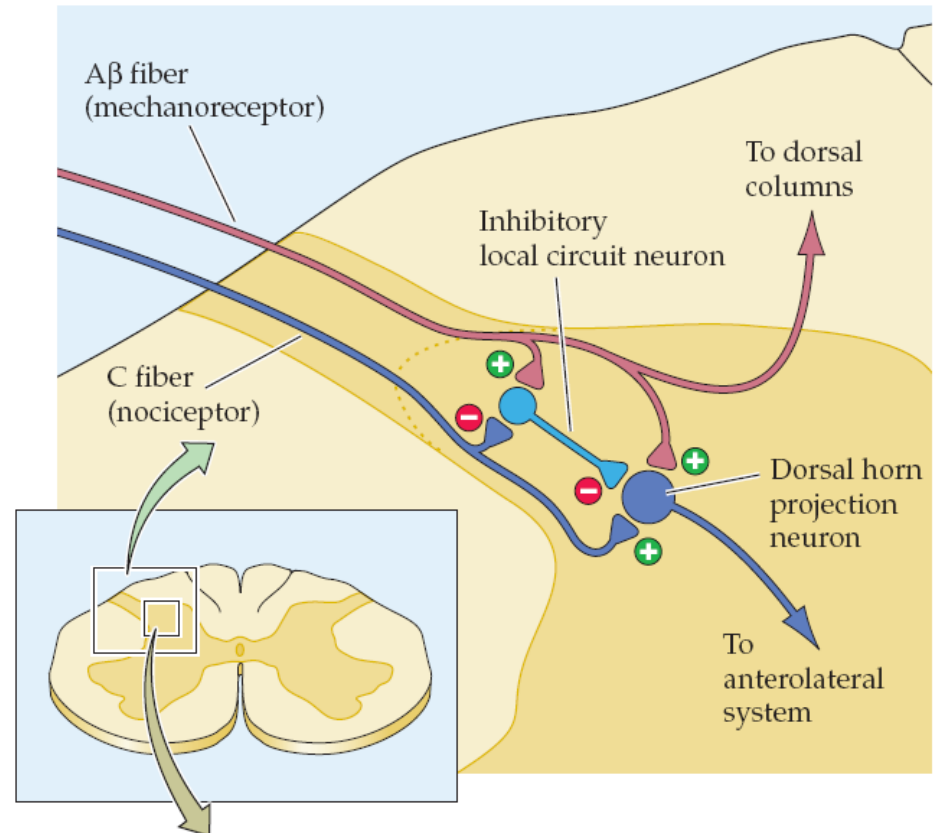
# **MID BRAIN**

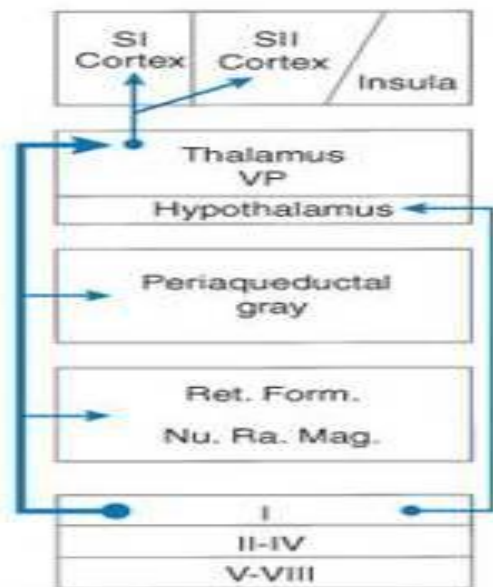
- **PERIAQUECDUCTAL GRAY (PAG)**
  - surrounds cerebral aqueduct
  - extensive afferent and efferent projections
  - morphine and electrical stimulation produce potent antinociception
  - PAG descending inhibition is via NRM
    - EAA are neurotransmitters there
- **LOCUS COERULEUS (LC)**
  - noradrenergic containing neurones
  - adjacent to 4th ventricle
  - diffusely innervates CNS at all levels
  - descending NAD fibres inhibit dorsal horn nociceptive activity and spinal nociceptive reflexes

(A)

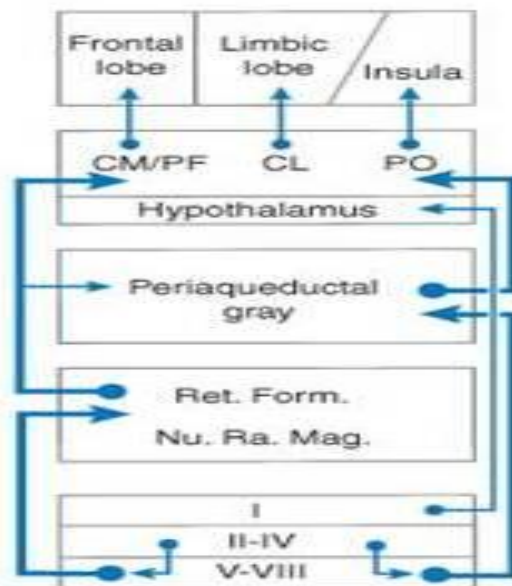
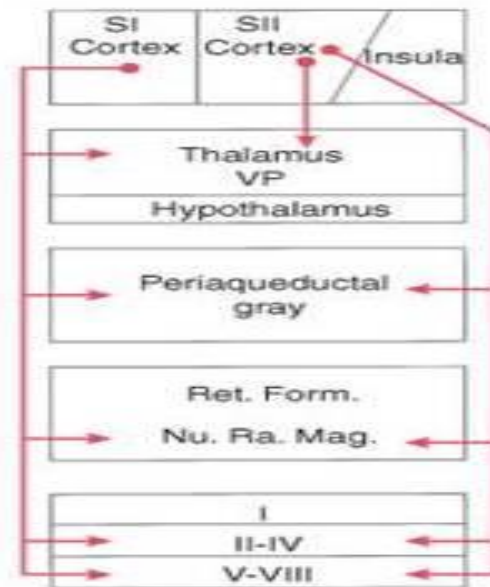


(B)

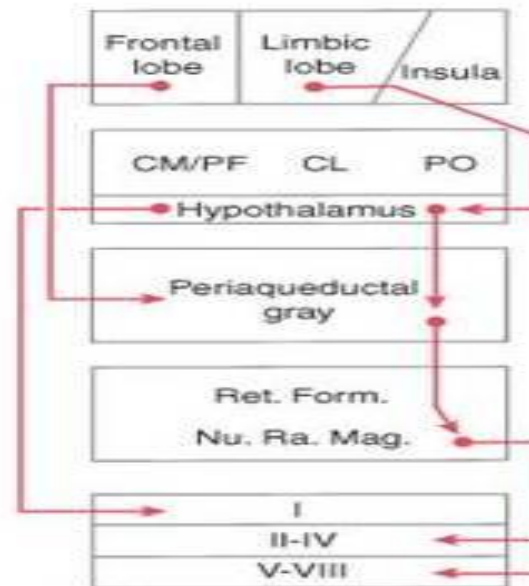




A



B



Text Fig. 18-19