

Normal Nerve Anatomy, Physiology and Response to Injury

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Logos: Noak's Ark, Cardiff University, GIG NHS, Bwrdd Iechyd Prifysgol Caerdydd a'r Fro Cardiff and Vale University Health Board.

1



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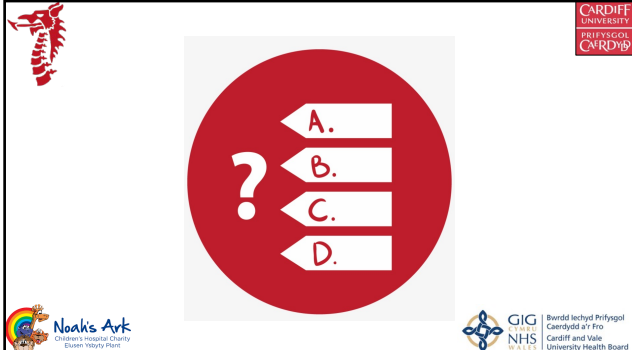
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Objectives

- Review normal nerve physiology
 - Potentials
 - Propagation
 - Synapses
- Discuss the afferent and efferent pathways
- Understand how nerves can be injured
 - Mechanisms
 - Classifications
 - Nerve regeneration
- Introduce the clinical applications of nerve physiology

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Neurophysiology SBAs

- A 26 year old professional computer gamer presents to his GP with intermittent paraesthesia in a ulnar nerve distribution. The most likely cause is:
 - Ulnar nerve neurapraxia
 - Ulnar nerve axonotomesis
 - Ulnar nerve Wallerian degeneration
 - T1 Wallerian degeneration
 - T1 neurapraxia

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Neurophysiology SBAs

- A 26 year old psychiatric patient deliberately self harms and stabs their wrist with a knife. The wound is washed out and sutured closed in a minor injuries unit. Two weeks later they are still complaining of sensory loss in the median nerve distribution. The most likely mechanism of injury is:
 - Median nerve neurapraxia
 - Median nerve neurotmesis
 - Median nerve Wallerian degeneration
 - Recurrent branch of median nerve neurapraxia
 - Recurrent branch of median nerve neurotmesis

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Neurophysiology SBAs

- Lidocaine is a local anaesthetic which blocks sodium channels. Which part of the nerve actional potential does lidocaine act on?

- Stimulus
- Resting membrane potential
- Depolarisation
- Repolarisation
- Hyperpolarisation

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The Nervous System

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Things you already know

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Things you already know

And if you don't will need to know for assessment

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The Nervous System

- Integrates...
 - Basic "survival" functions
 - Higher "voluntary" functions ... essentially controlling everything
- Assisted by all other body systems

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12

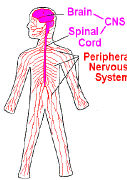
The Nervous System

Central Nervous System (CNS)

- Brain
- Spinal cord

Peripheral Nervous System (PNS)

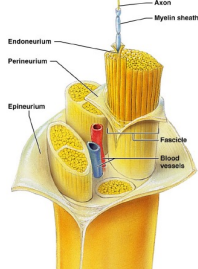
- Cranial nerves
- Spinal nerves
- Sensory (afferent)
- Motor (efferent)



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13

Nerve Anatomy

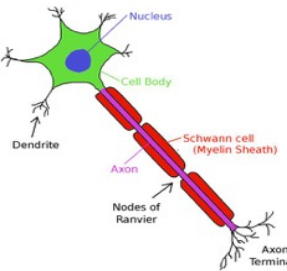


- Ordered arrangement
- Epineurium
- Perineurium
- Endoneurium
- Nerve fibre
 - Sheath
 - Axon

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14

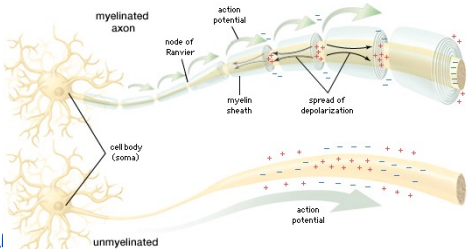
Myelin



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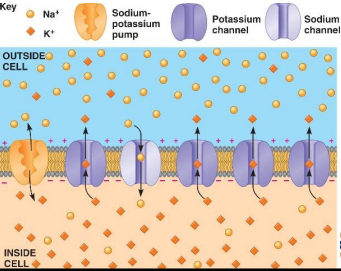
Saltatory Conduction



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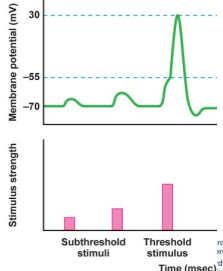
Resting Potential



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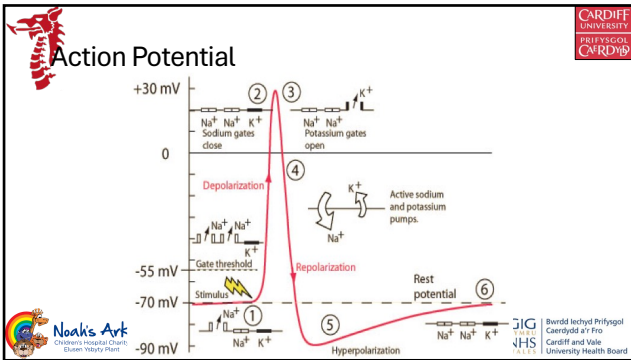
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Stimulus

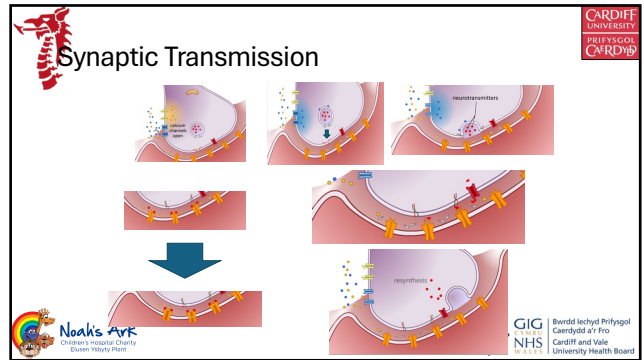


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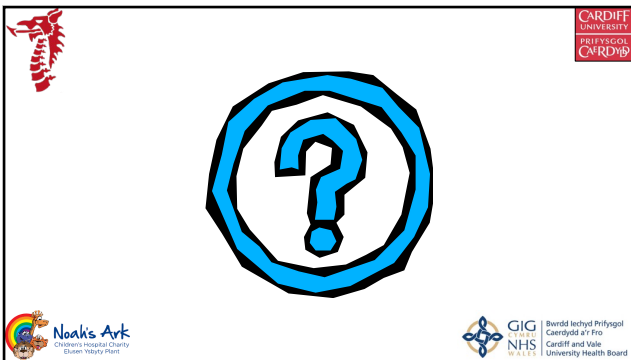
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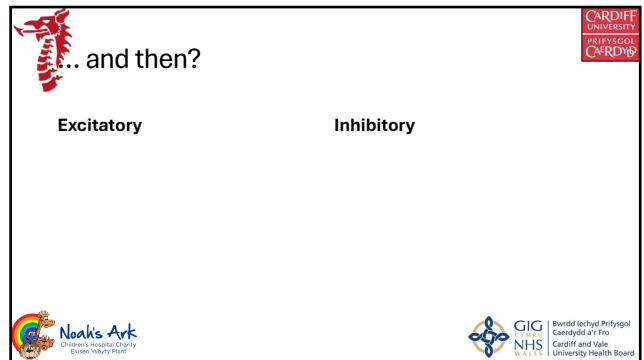
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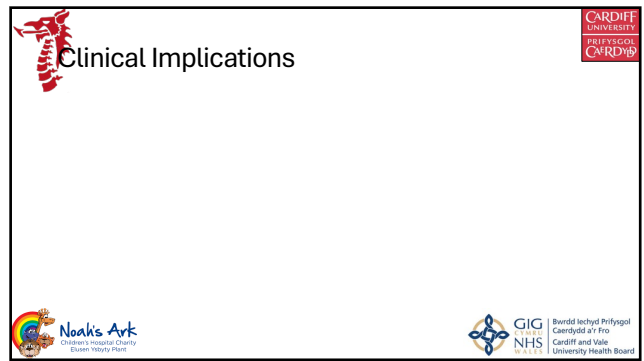
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22



23



24

Local Anaesthetic

- Prevent or relieve pain
- Stop sensory conduction
- Membrane stabilisers
- Bind Na⁺ channels

25

Cautions?

- Toxicity
- Adrenaline

26

Neuromuscular Blockade

27

Neuromuscular-blocking drugs

Non-depolarising Agents **Depolarising Agents**

28

Nerve Injury

29

Injury

- Damage to axon

30

Classification of Nerve injury

Labels: Epineurium, Perineurium, Endoneurium, Axon, Myelin sheath, Normal, Neurapraxia, Axonotmesis, Neurotmesis, Seddon classification

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Classification of Nerve Injury

Seddon	Sunderland	Description
Neurapraxia	I	
Axonotmesis	II	
	III	
	IV	
	V	
Neurotmesis	VI (Mixed)	

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Wallerian Degeneration

Labels: Schwann cell, Endoneurium, Axon, Node of Ranvier, Macrophage, Ellipsoid

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Regeneration

Labels: Schwann Cell, Fibroblast, Nerve Fiber Regeneration Sprout, Growth Cone with Filopodia, Wallerian Degeneration in Distal Nerve Fiber

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Nerve regeneration

Labels: Myelin Sheath, Basement Membrane, Axon

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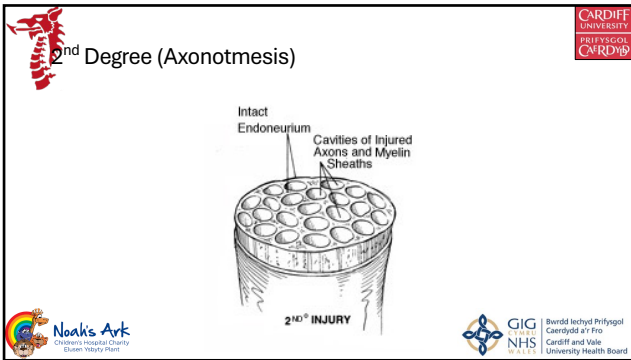
1st Degree (Neurapraxia)

Labels: Intact Endoneurium, Intact Axons, Cavities of Injured Myelin Sheath, Endoneurium

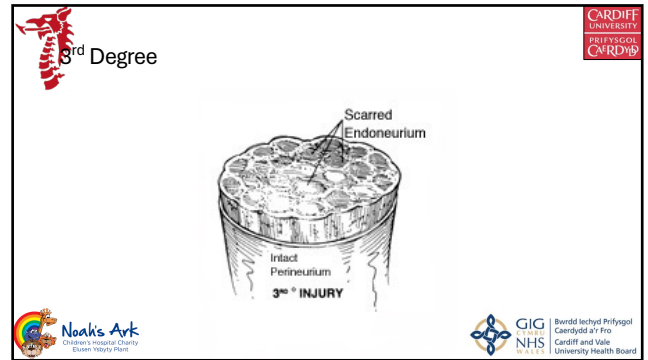
Text: 1ST INJURY

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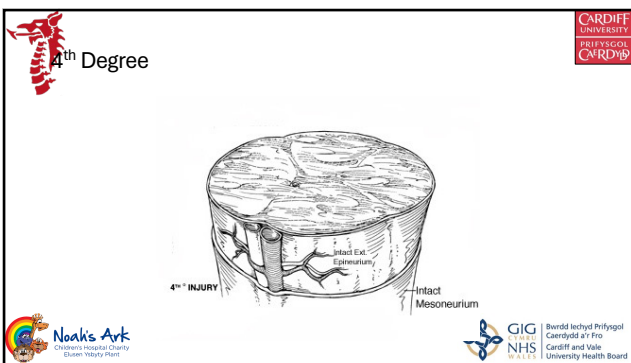
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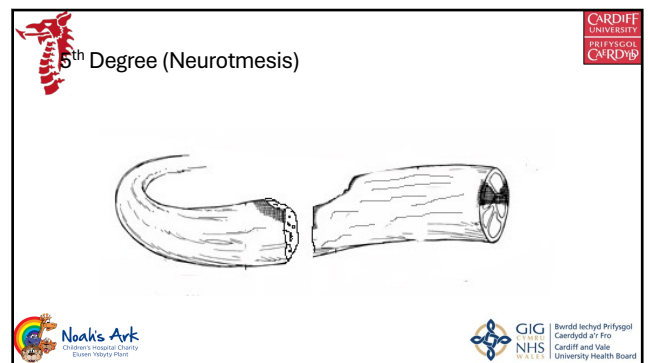
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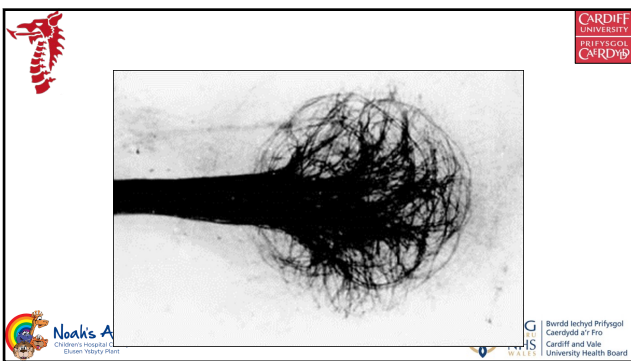
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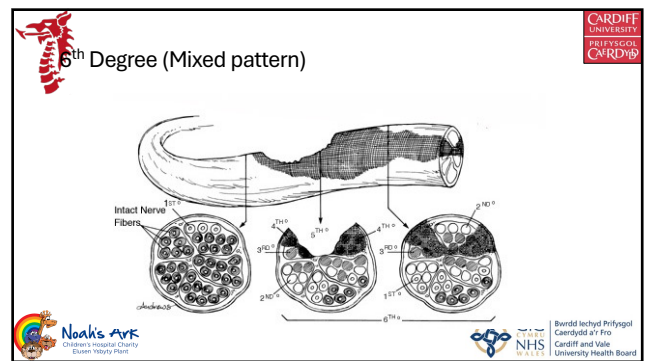
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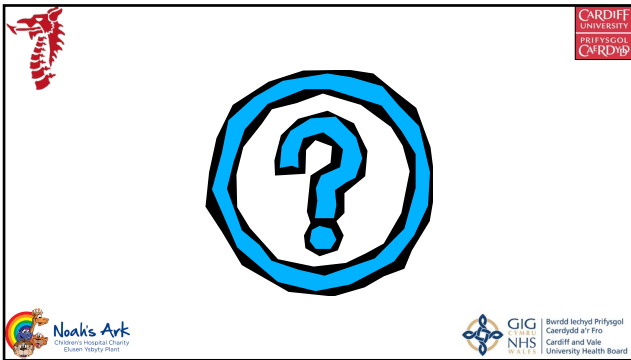
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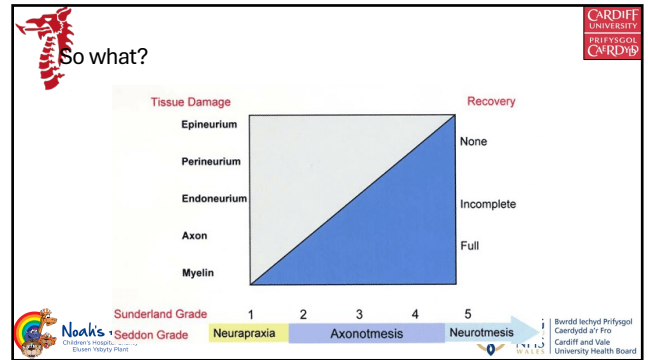
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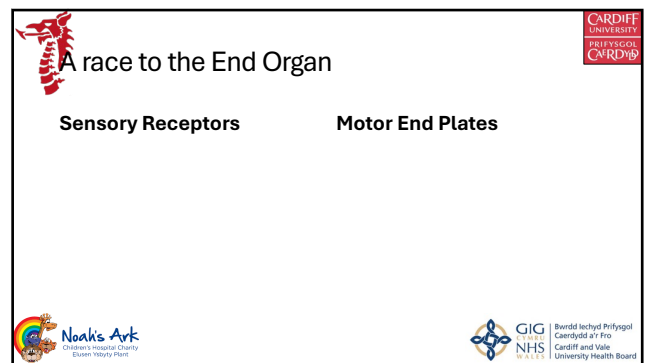


44

So what?

Seddon	Sunderland	Tinel's sign	Advancing Tinel's	Recovery	Surgery
Neurapraxia	I				
Axonotmesis	II				
	III				
	IV				
Neurotmesis	V				
	VI (Mixed)				

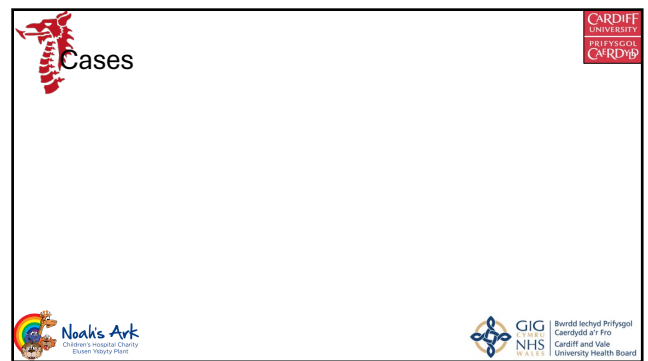
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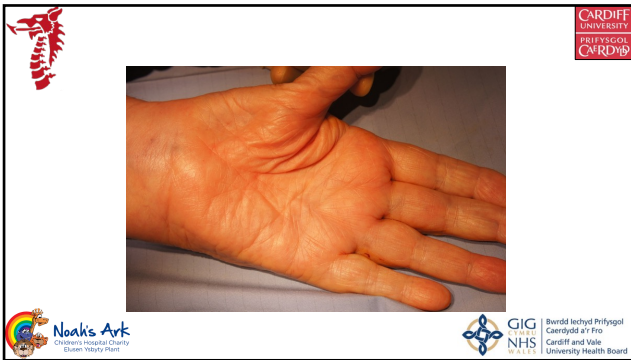
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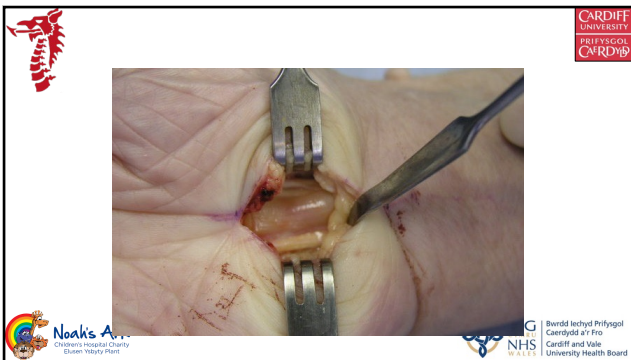
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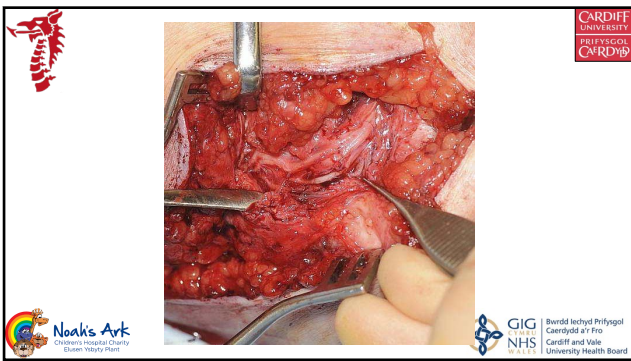
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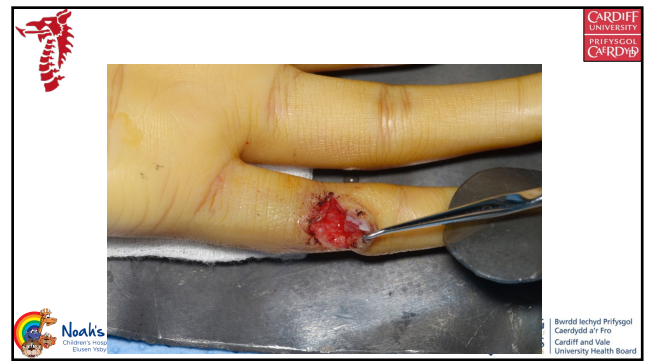
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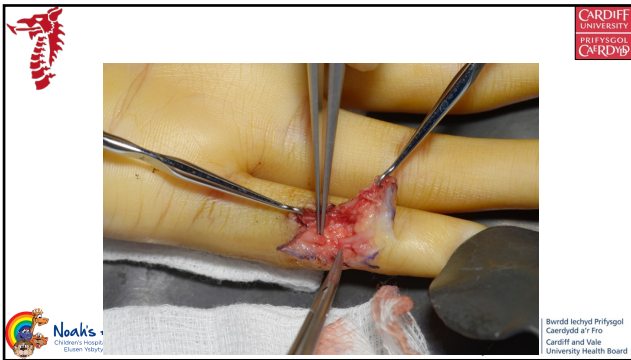
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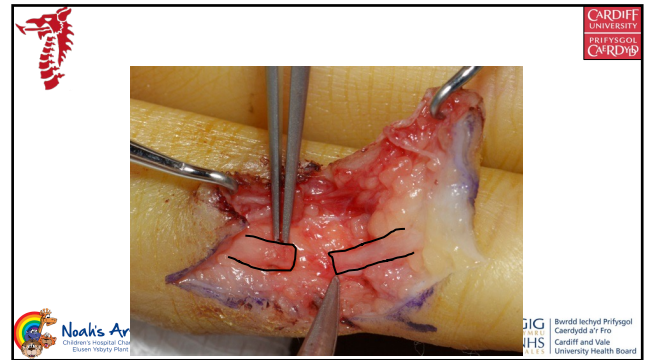
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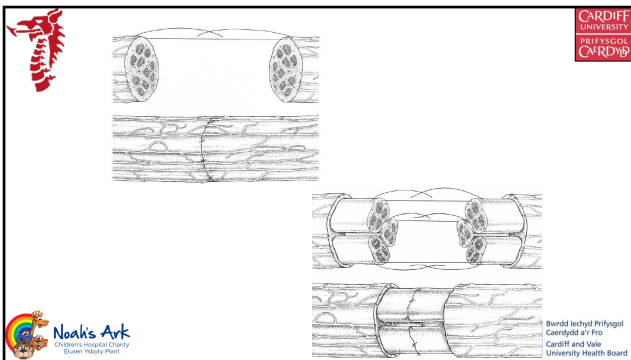
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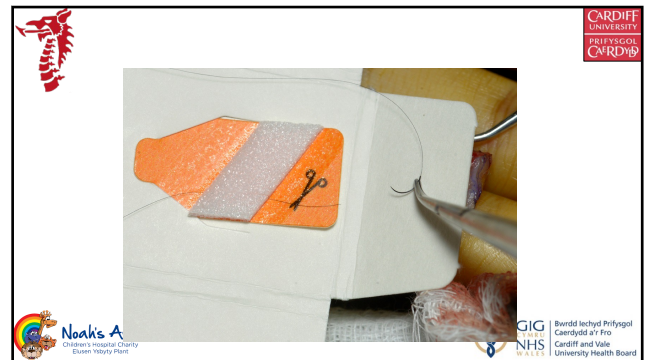
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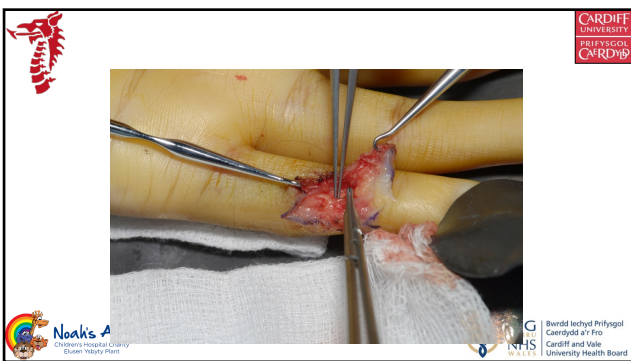
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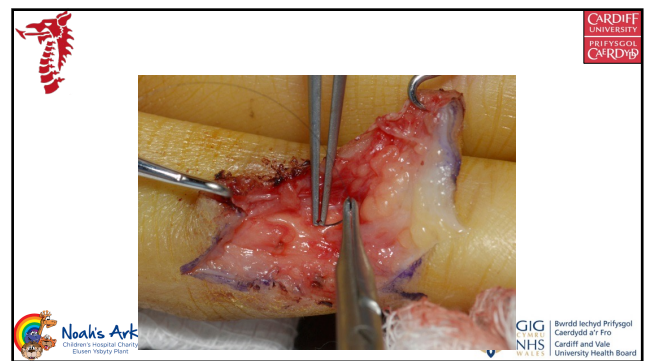
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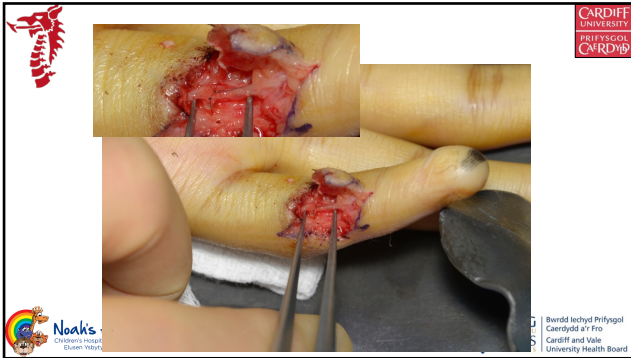
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59



60



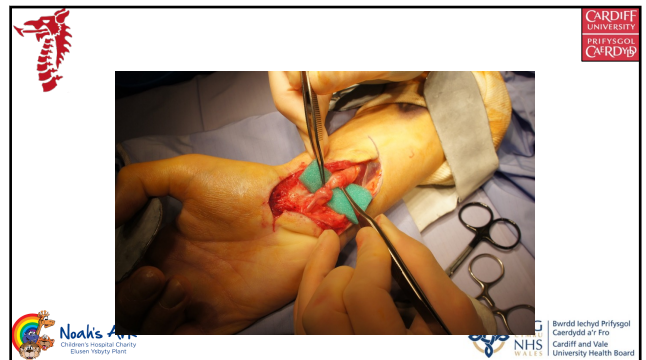
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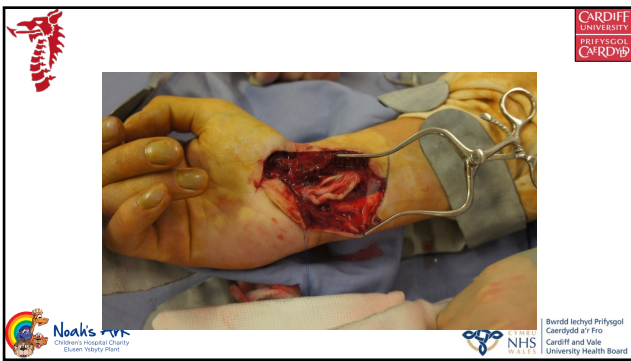
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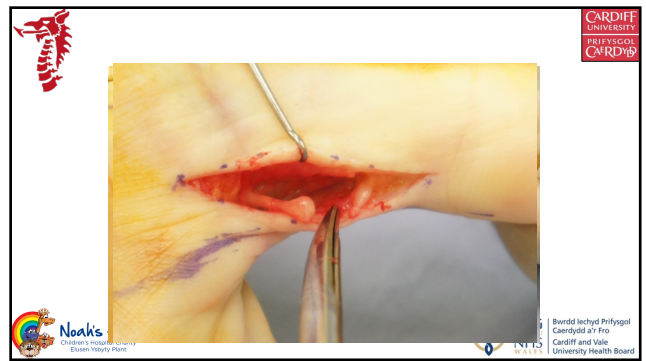
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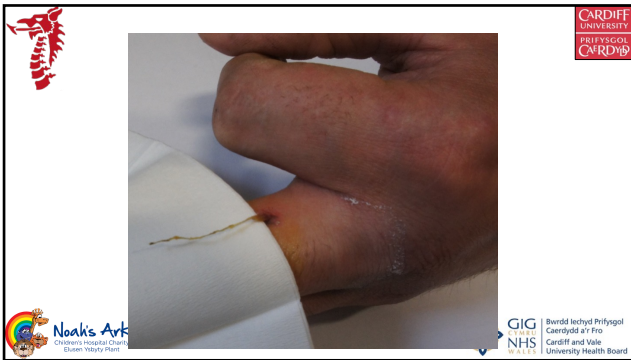
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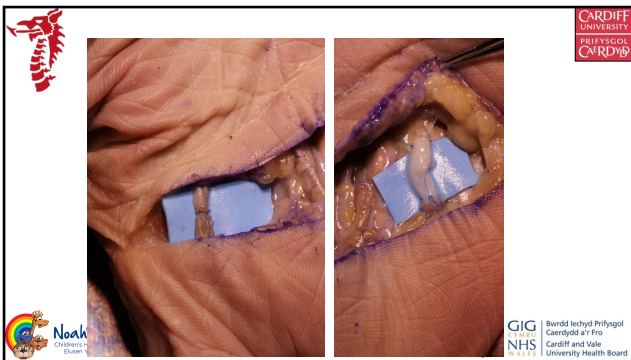
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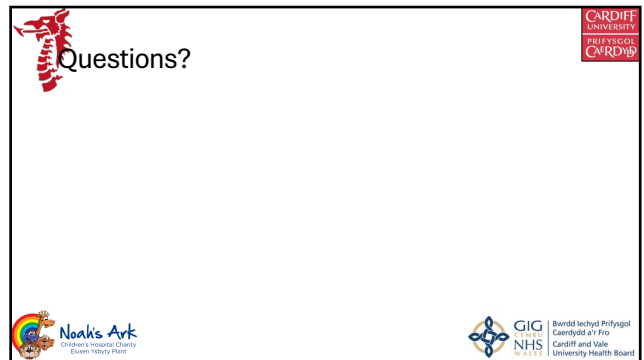
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68



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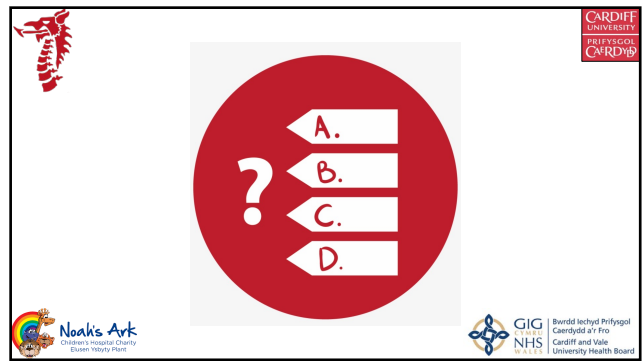


70



Summary


- Hierarchical anatomy
 - CNS/PNS
 - Nerve
- Physiology
 - Resting potential
 - Action potential
 - Nerve repair after injury
- Implications for
 - Anaesthesia
 - Paralysis
 - Treating nerve injuries

71




72




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74