S34. CEREBELLUM

2017



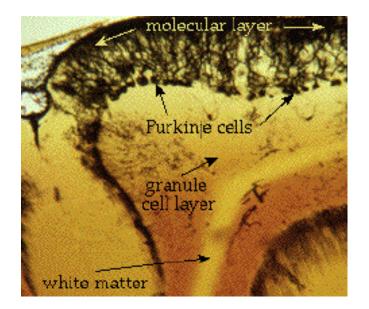
Joanne Wojcieszek, MD

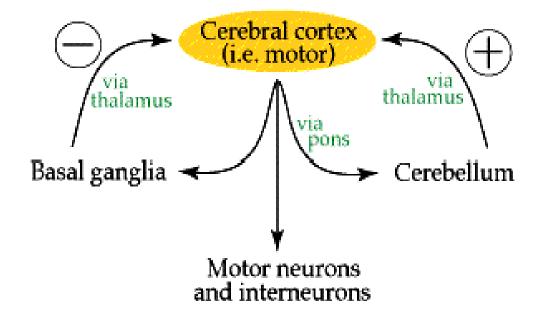
SLO 49

Describe the functional anatomy of the cerebellum and neurologic signs/symptoms, pathophysiology, neuroimaging, medical treatment, and neurosurgical procedures for cerebellar disorders

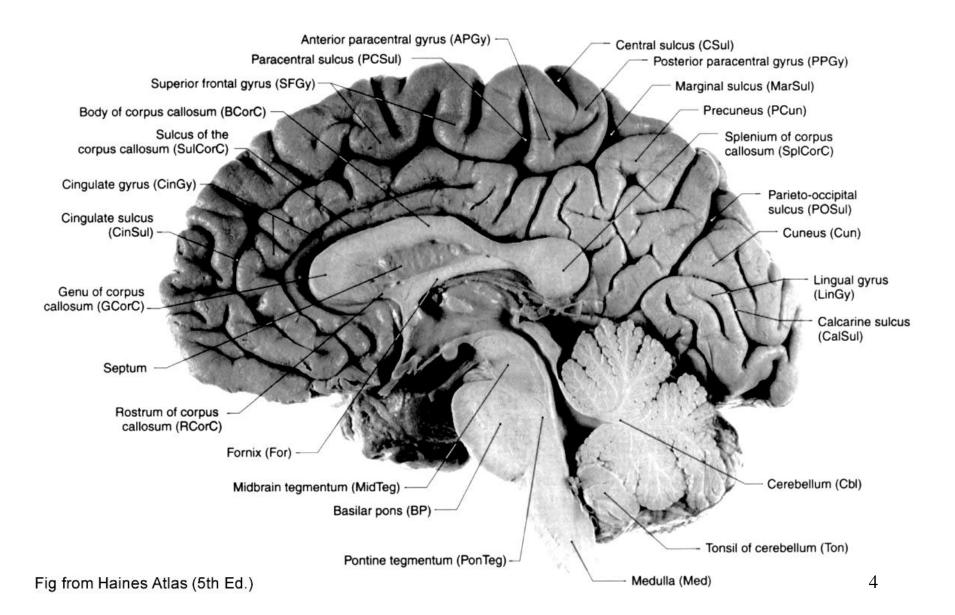
The Treasure at the Bottom of the Brain

Henrietta C. Leiner and Alan L. Leiner

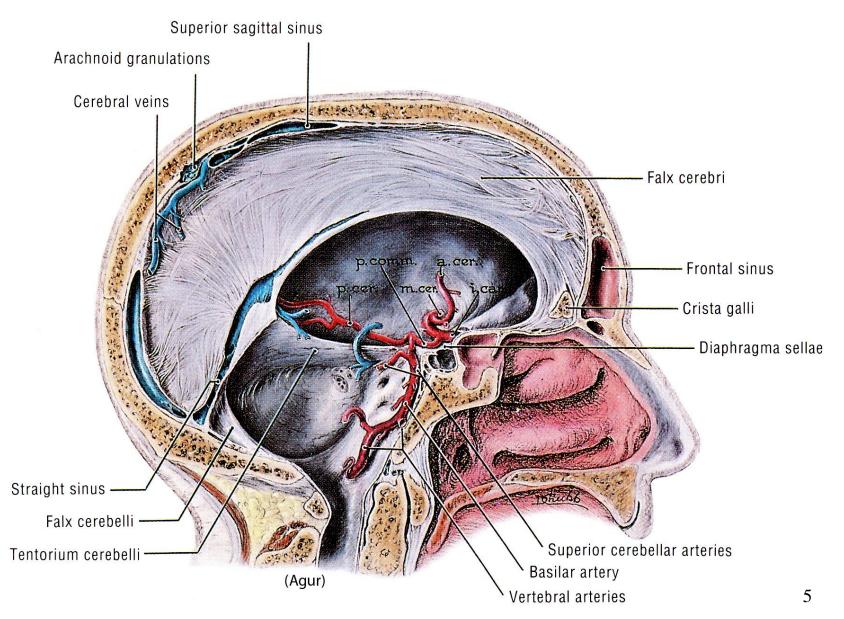




Cerebellum: midsagittal view



Cerebellar Tentorium



Cerebellar Function

cerebellum is important for:

coordination of voluntary movements
Cortico-ponto cerebellar fibers

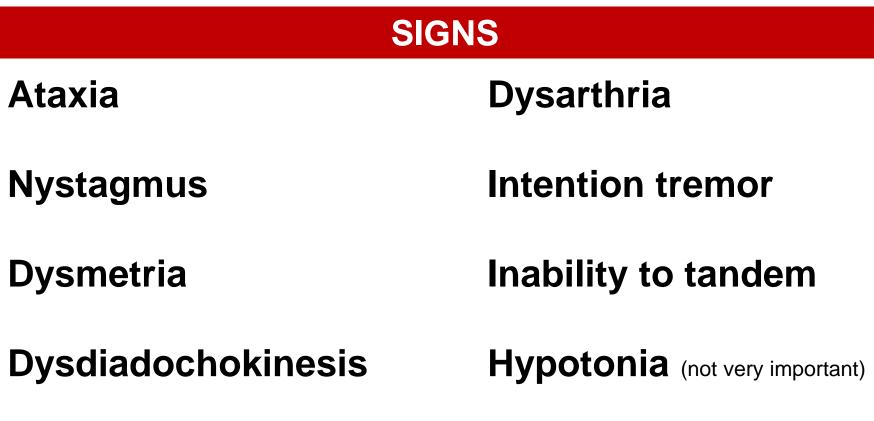
control of posture and equilibrium
Connection with vestibular system



Cerebellar Dysfunction

What are the symptoms ?

Clumsiness, imbalance, slurred speech and dizziness



What animal reminds us of the external surface of the cerebellum?



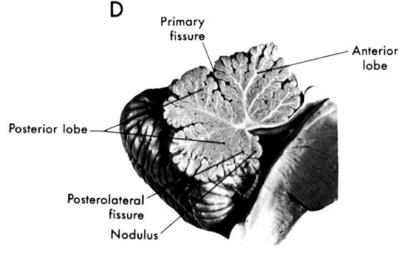
Cerebellar Signs

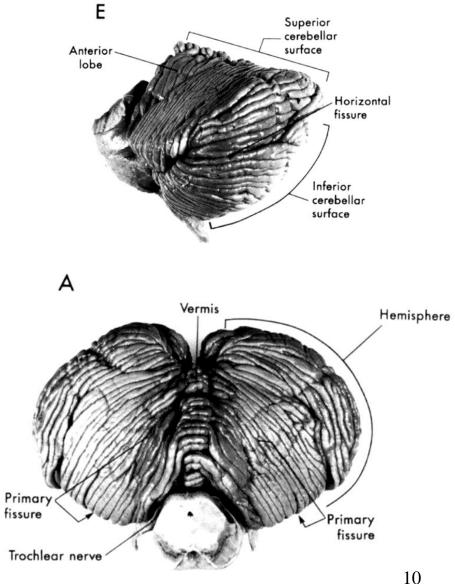
- Cerebellar dysfunction is ipsilateral
- A lesion in the left cerebellum causes left body incoordination

Cerebellar Surface: parts



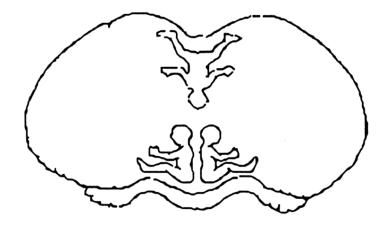
Cerebellar surface in the median plane. The cut surface has been stained by a method that differentiates gray matter (*dark*) and white matter (*light*). ($\times 1 \frac{1}{2}$)





Cerebellar Vermis and Hemisphere

- We can divide the cerebellum into 2 parts:
 - midline vermis
 - 2 large lateral hemispheres



- Lesions in the midline cause gait ataxia ****
- Hemispheric insults cause incoordination of the limbs ipsilateral to the lesion (limb ataxia)***

Cerebellar Peduncles

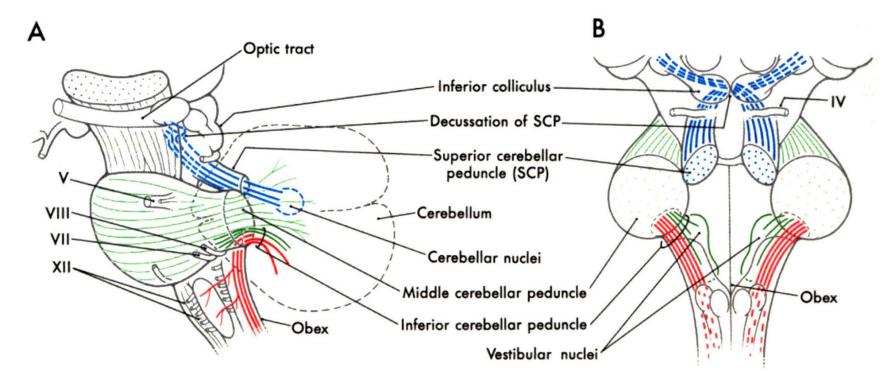
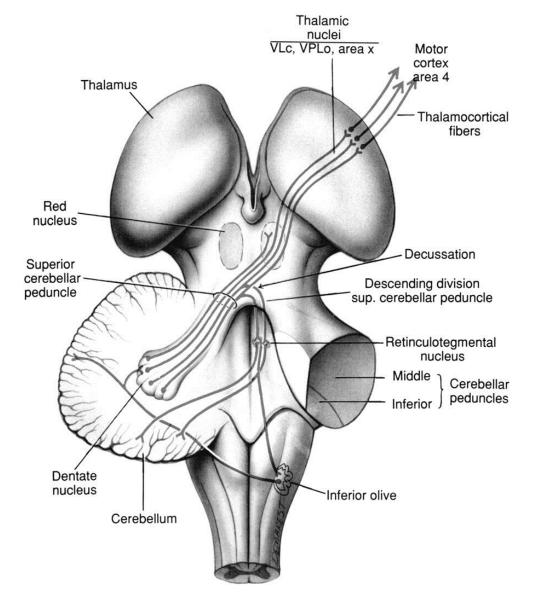


Fig from Haines

Superior Cerebellar Peduncle (1)

- The superior cerebellar peduncle (*brachium conjunctivum*) is the <u>major efferent</u> pathway from the cerebellum
- Efferent fibers from deep cerebellar nuclei on their way to the thalamus and brainstem
- Fibers exit superior cerebellar peduncle then enter the midbrain
- Cross and form the decussation of the superior cerebellar peduncle → thalamus→ motor cortex

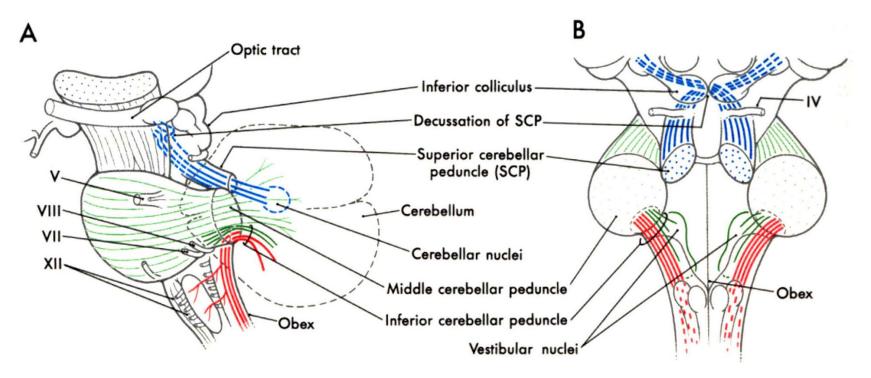
Superior Cerebellar Peduncle (1)



Middle Cerebellar Peduncle (2)

The middle cerebellar peduncle (brachium pontis)

This bundle contains primarily cortical afferents on their way into the cerebellum from the contralateral pons



Corticospinal & Corticobulbar Tracts

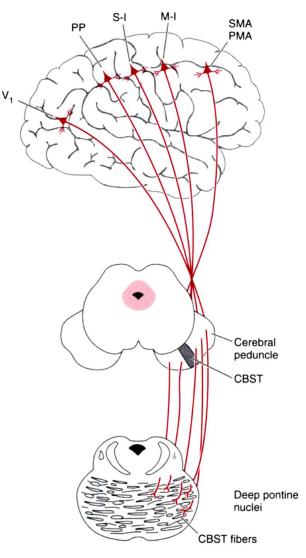


Fig from Kingsley

Cortico-ponto-cerebellar Pathway

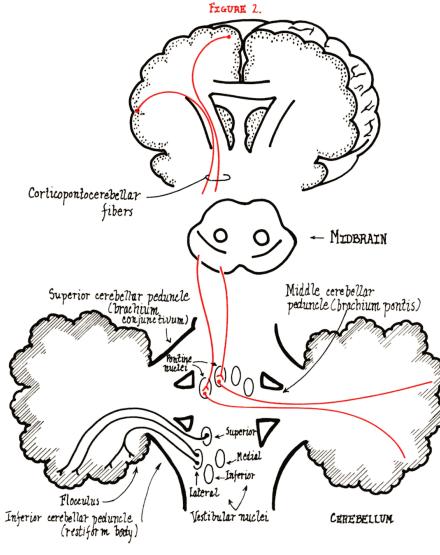


Plate 11-2.

Inferior Cerebellar Peduncle (3)

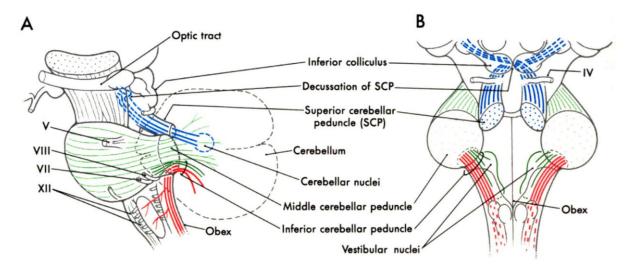
The inferior cerebellar peduncle is composed of 2 bundles:

□ The restiform body

 contains afferent fibers from the spinal cord and medulla on their way into the cerebellum.

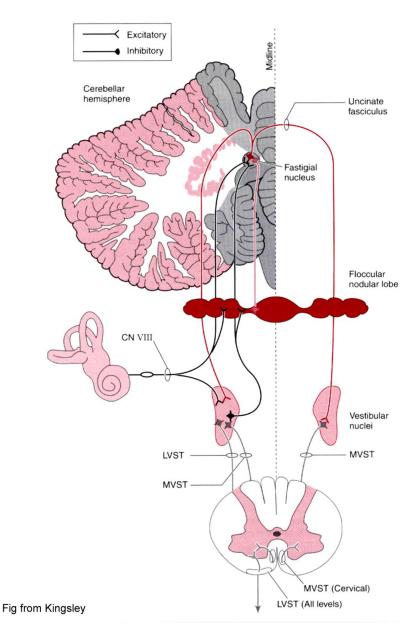
The juxtarestiform body

 transmits information (afferent and efferent) between the flocculonodular lobe / fastigial nucleus and the vestibular system.

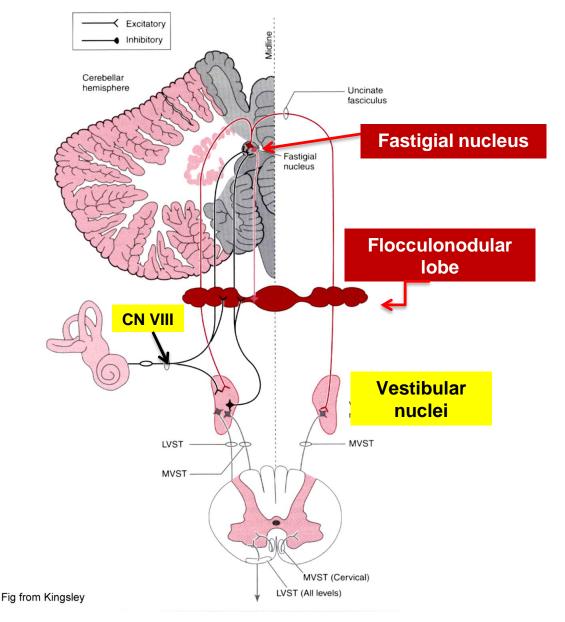


Flocculonodular lobe

- Oldest part of the cerebellum
- Coordinates balance and eye movements
- Input and output via inferior cerebellar peduncle
- Connects with vestibular nuclei

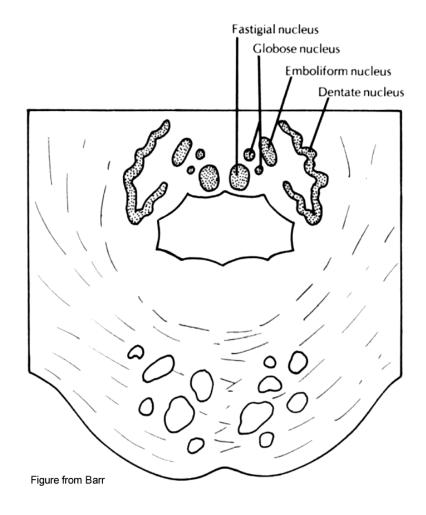


Cerebellar Inputs from Vestibular System



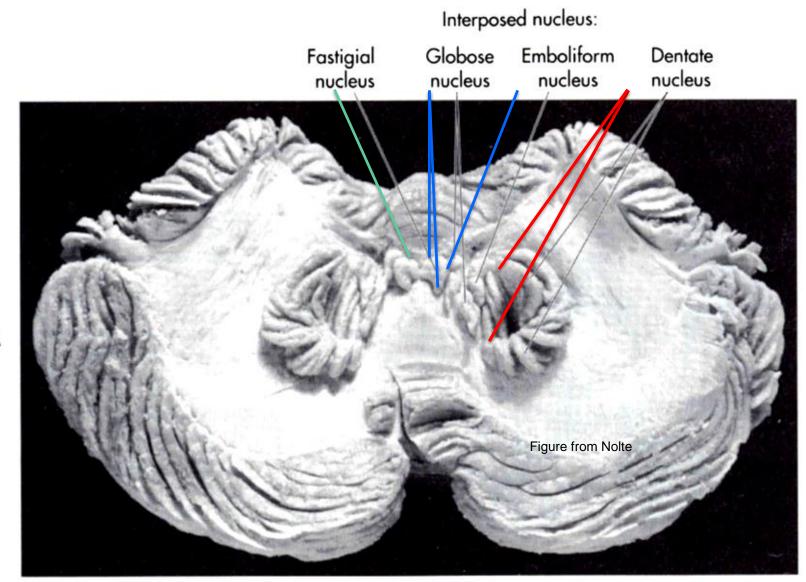
Deep Cerebellar Nuclei

- 4 pairs of cerebellar nuclei embedded in the white matter core of the cerebellum
- As you travel from one side of the cerebellum to the other:
 - dentate--emboliform-globose--fastigial-----fastigial-- globoseemboliform- - -dentate
 - memory-tip : <u>Flunked his</u> <u>GED</u>, going medial to lateral

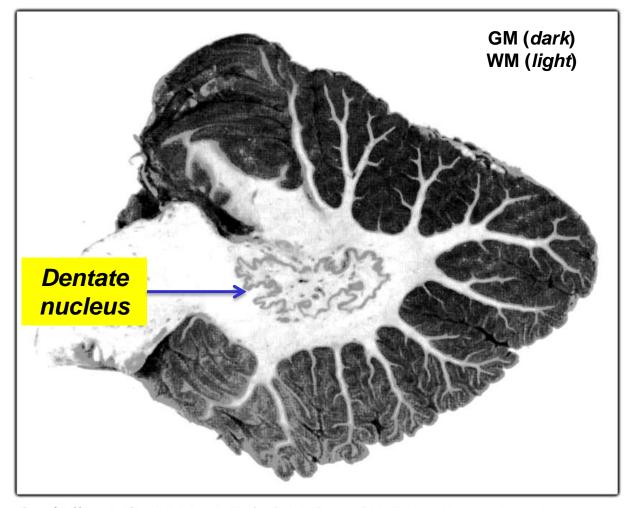


Cerebellar Nuclei

Dentate nucleus is largest



Cerebellar Nuclei



Cerebellar surface in a sagittal plane through a hemisphere, stained to differentiate gray matter (*dark*) and white matter (*light*). The dentate nucleus is shown embedded in the medullary center of the white matter. ($\times 1 \frac{1}{2}$)

Cerebellar Projections Functional Subdivisions

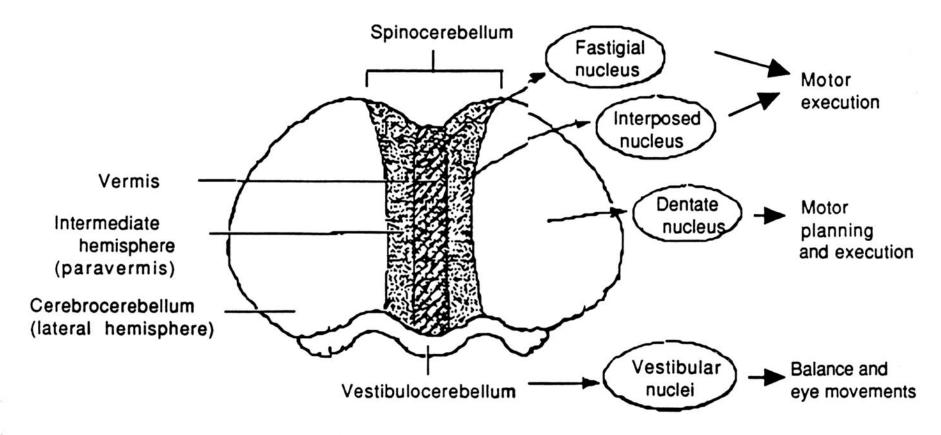


Figure 6. The cerebellar projections and functional subdivisions.

Cerebellar Input into the Motor Circuit

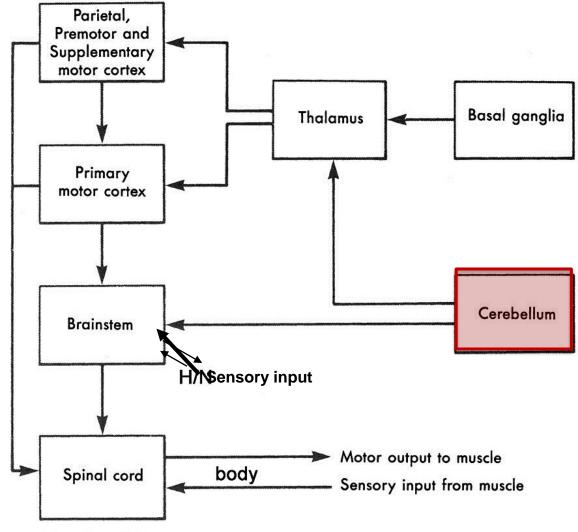
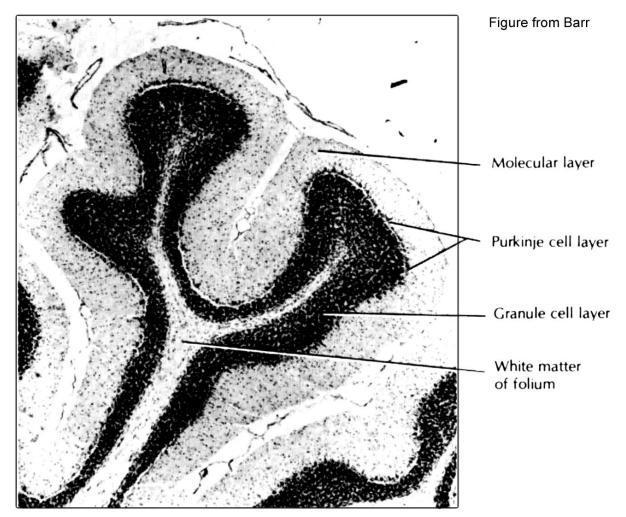


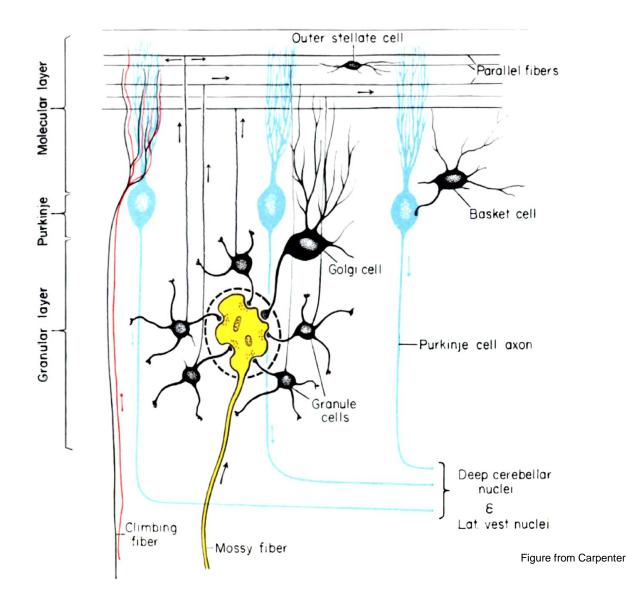
Figure from Haines

Cerebellar Cortex 3-layers



Transverse section of cerebellar folia showing the three layers of cortex and the white matter of the folia. (Stained with cresyl violet, \times 35)

Cerebellar Cortex: *cell types, circuit, afferents*

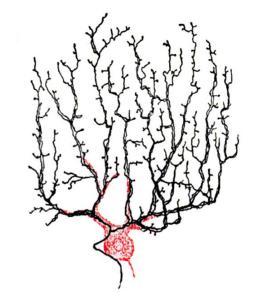


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Cerebellar Cortex: Purkinje Cells

Purkinje cells:

- Dendrites extend up into the molecular layer
- Purkinje axons are <u>the only fibers</u> <u>that leave the cerebellar cortex</u>
- Purkinje axons mainly project to the deep cerebellar nuclei
- Purkinje cells are inhibitory and release GABA

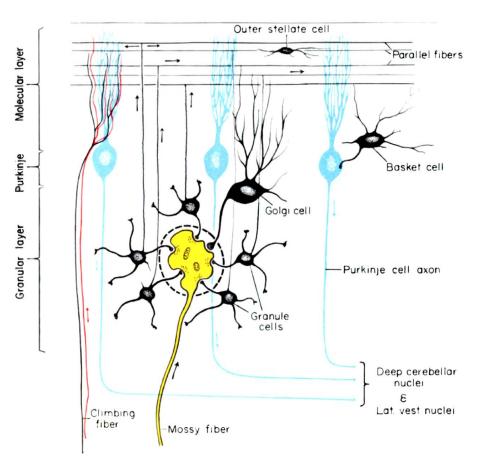


A drawing of a Golgi-stained climbing fiber, demonstrating the origin of its name as it climbs up the dendritic tree of a Purkinje cell (shown in color). (Modified from Ramón y Cajal S: *Histologie du système nerveux de l'homme et des vertébrés*, Paris, 1909, 1911, Maloine.)

Cerebellar Cortex: Granule Cells

Granule cells:

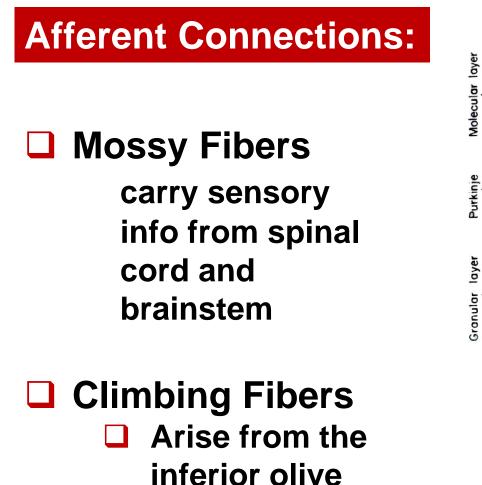
- Located in granule cell layer
- One granule cell connects with hundreds of Purkinje cells via parallel fibers
- The only <u>excitatory neuron</u> in the cerebellar cortex*****

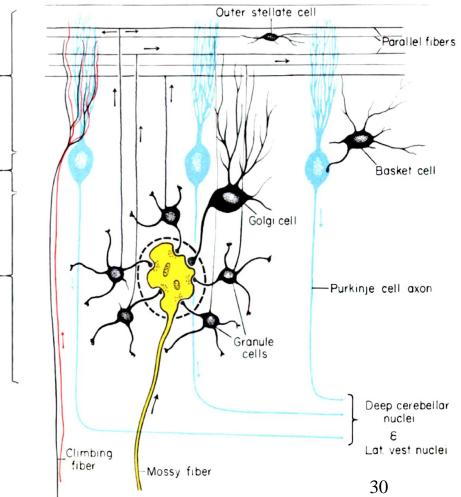


Trivia: the most numerous neuron type in the brain

Cerebellar Cortex: Afferents

What fibers are coming into the cerebellum?

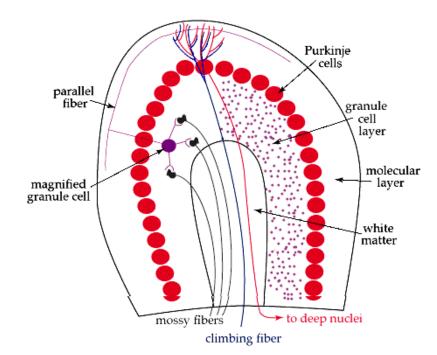


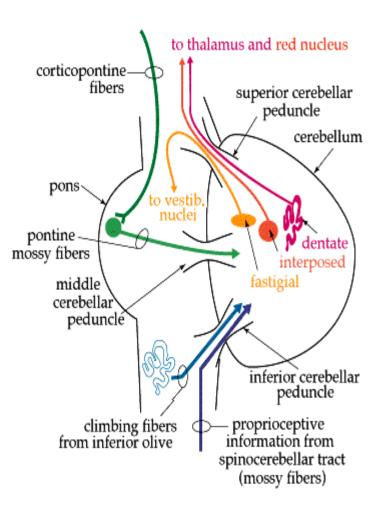


Cerebellar Cortex: Afferents

Climbing fibers:

- Arise from the inferior olive
- Project to cerebellum via the inferior cerebellar peduncle

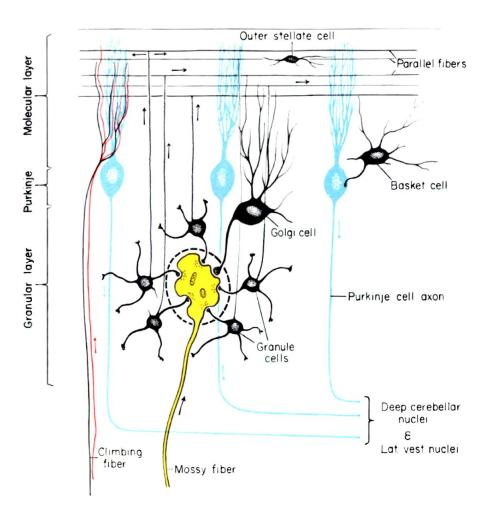




Cerebellar Cortex: Afferents

Climbing fibers:

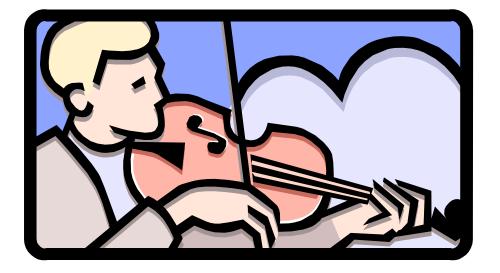
- Wind around the dendrite of the Purkinje cell like a vine growing on a tree.
- Unlike mossy fibers, climbing fibers synapse <u>directly</u> on Purkinje cells



Inferior Olive

- The inferior olivary nuclei are the source of all climbing fibers travelling into the cerebellum
- Axons exit the <u>left inferior olive</u>, cross over and enter the <u>right cerebellum</u> via the <u>inferior</u> <u>cerebellar peduncle</u>
- Inferior olive is an important relay station--all motor and sensory systems project here
- Motor cortex input to olivary nucleus--Important in complex motor learning**

Closeness



Mossy fibers are intimate with granule cells---

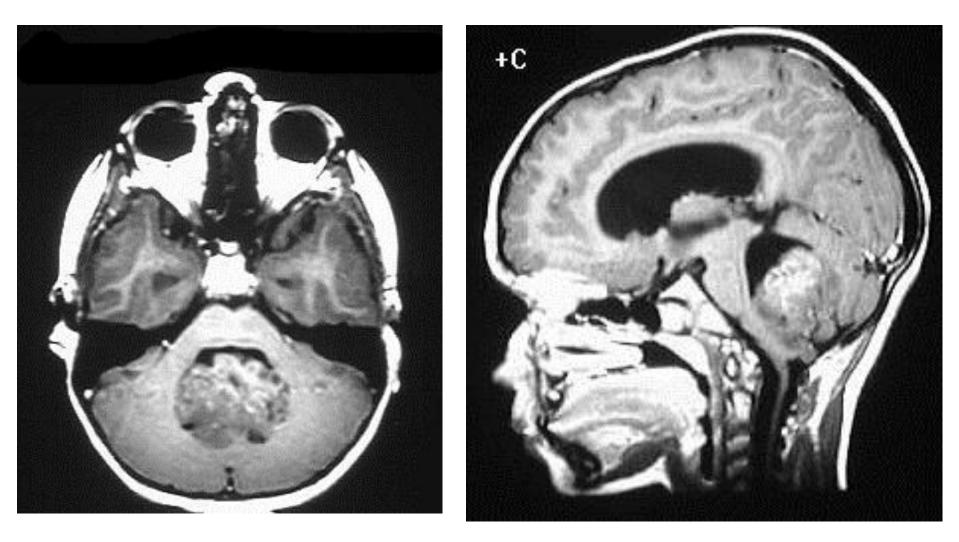
Climbing fibers are intimate with Purkinje cells

Causes of Cerebellar Dysfunction

- Stroke
- Multiple sclerosis (MCP)
- Tumor (MEDULLOBLASTOMA)
- Trauma
- Degenerative diseases (SCA 1-17)
- Paraneoplastic
- Viral
- Post viral (post VZV cerebellitis)
- Medications: phenytoin

Medulloblastoma

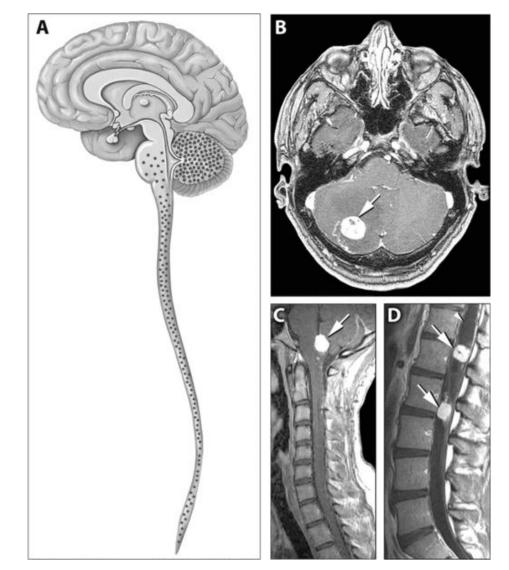
Children >> Adult



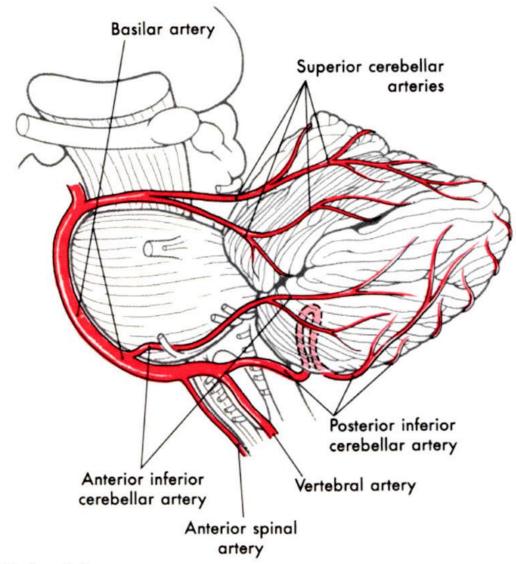
Von Hippel-Lindau (VHL)

Cerebellar and spinal cord hemangioma

- Renal carcinoma
- Pheochromocytoma
- VHL results from a mutation in the von Hippel–Lindau tumor suppressor gene on chromosome 3p25.3



Blood Supply to Cerebellum



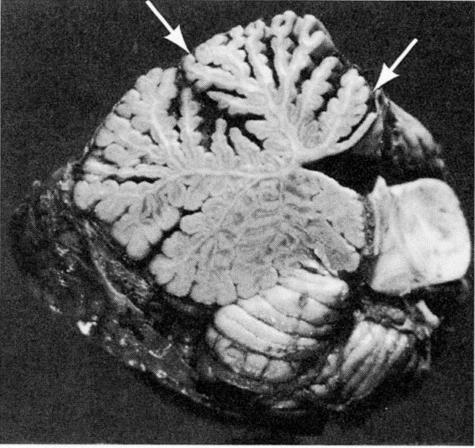
Wallenberg Syndrome****

Lateral Medullary Syndrome

- PICA infarct
- Ischemic infarction: lateral medulla
- Right face and left body pain & temperature loss
- Right limb ataxia
- Right Horner's syndrome
- Dysphagia, droopy right palate

Degeneration of the Anterior Vermis

Chronic Alcohol Abuse



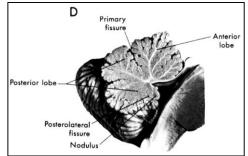


Figure 19.13 from Puvres

Slowly Progressive Cerebellar Ataxia and Cervical Dystonia: Clinical Presentation of a New Form of Spinocerebellar Ataxia?

Clinical Features of a Large Australian Pedigree With Episodic Ataxia Type 1

Pure Cerebello-Olivary Degeneration of Marie, Foix, and Alajouanine Presenting With Progressive Cerebellar Atavia, Cognitive Decline, and Chorea

Creutzfeldt-Jakob Disease (CJD)

