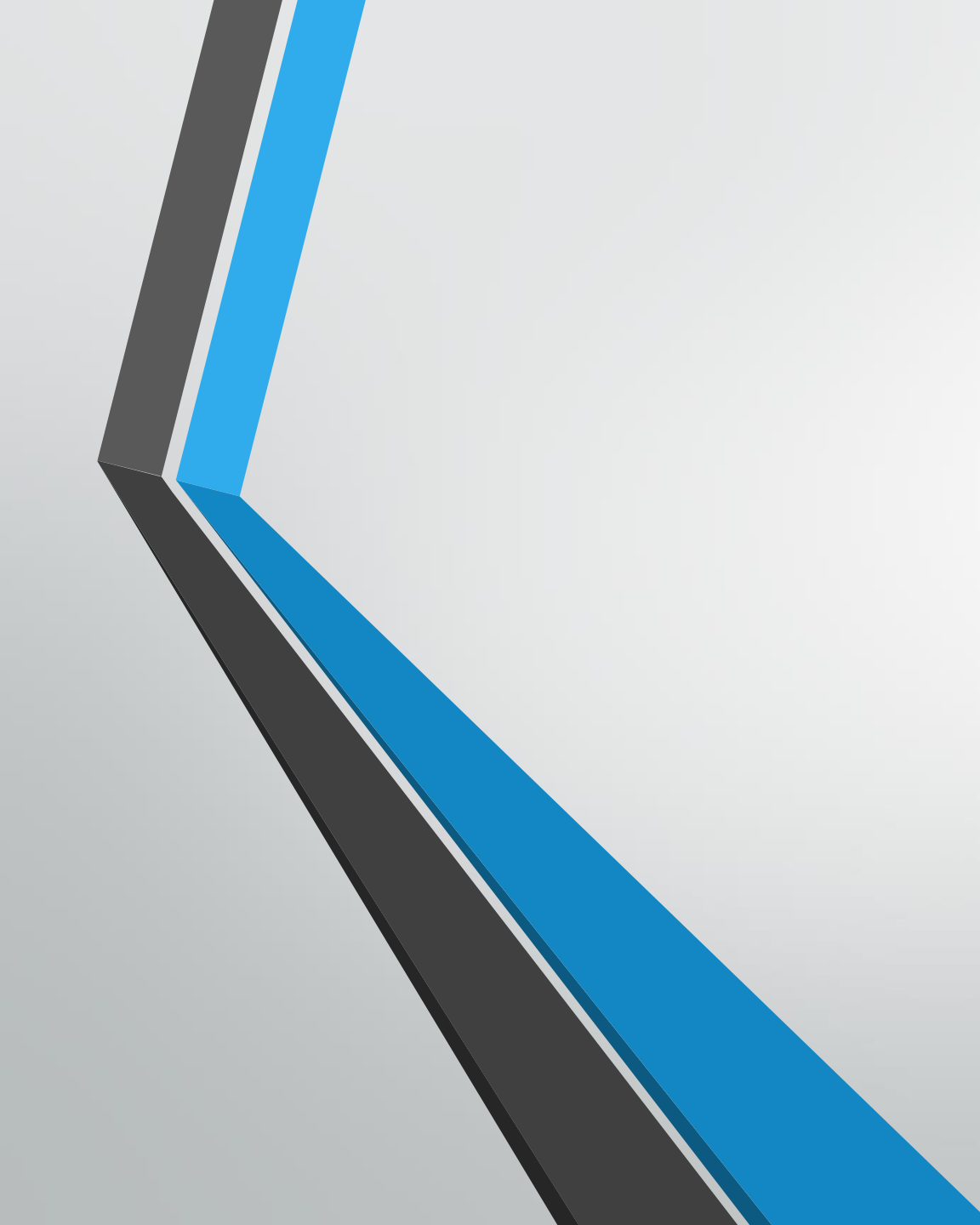
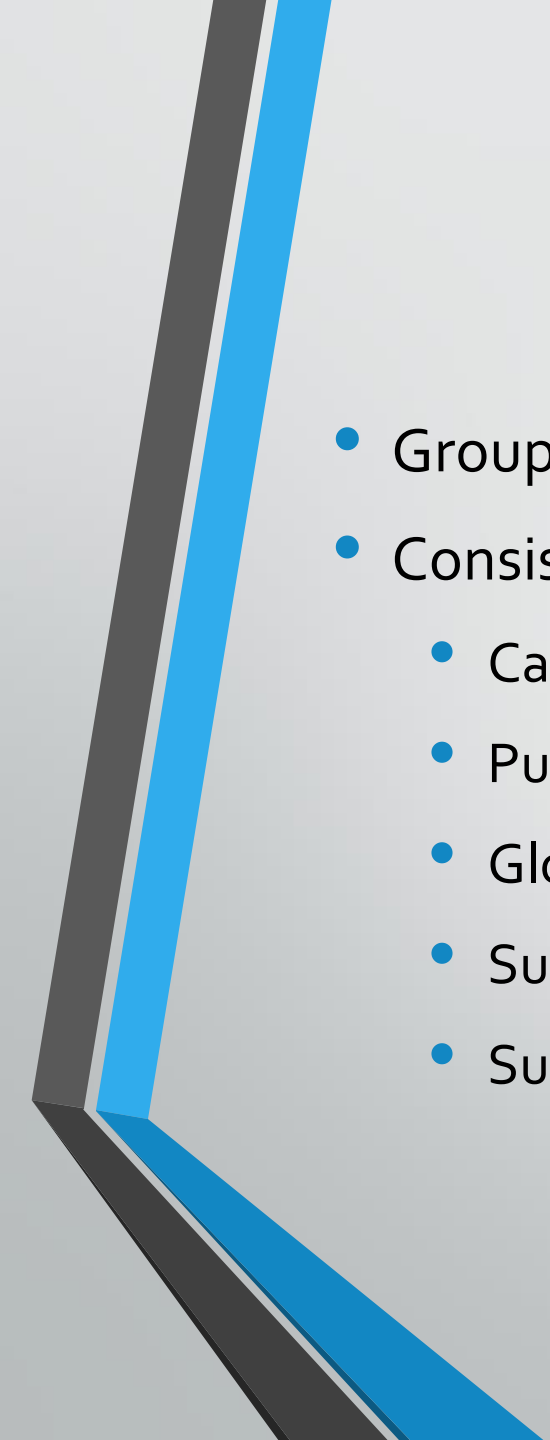


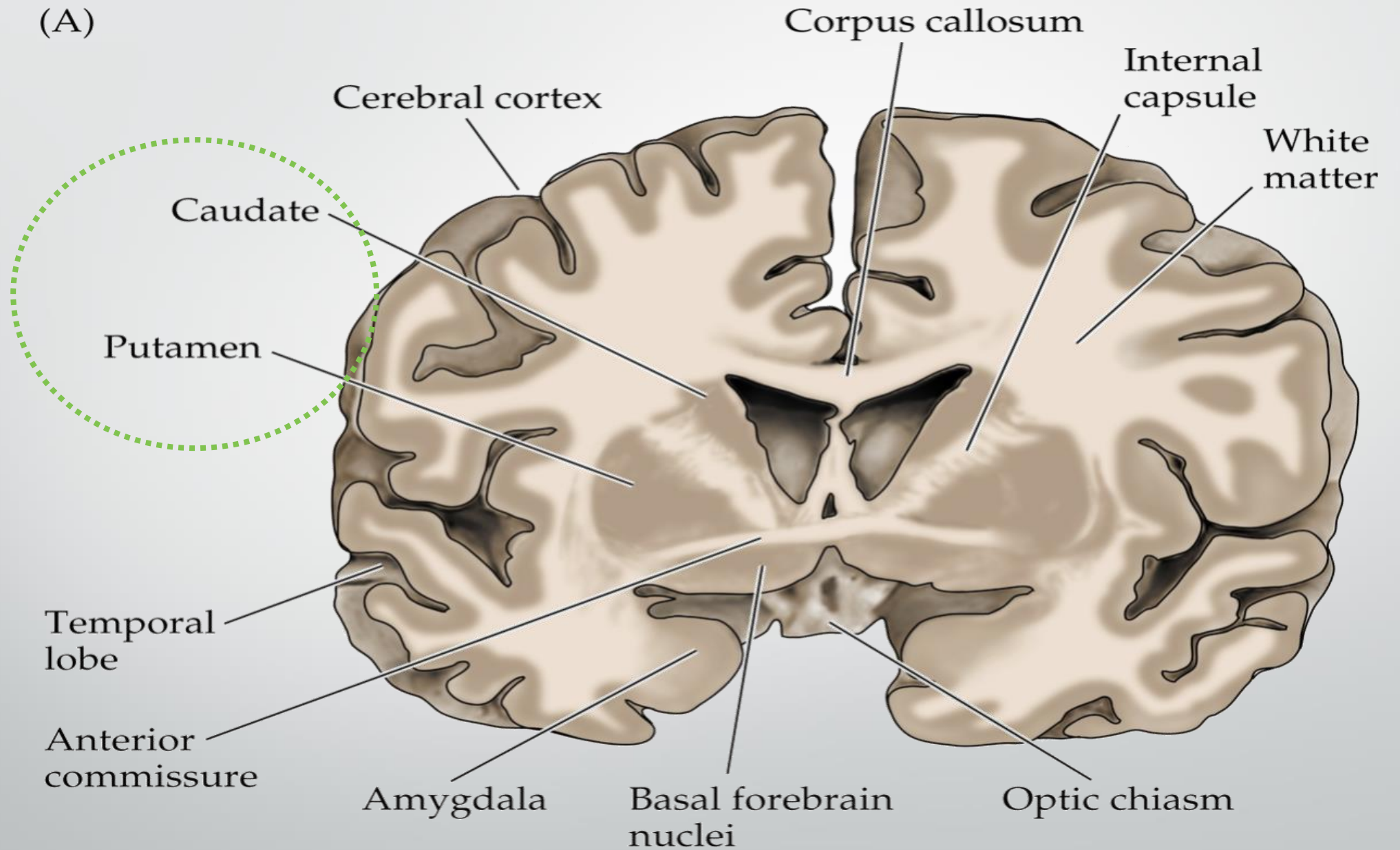


Basal Ganglia

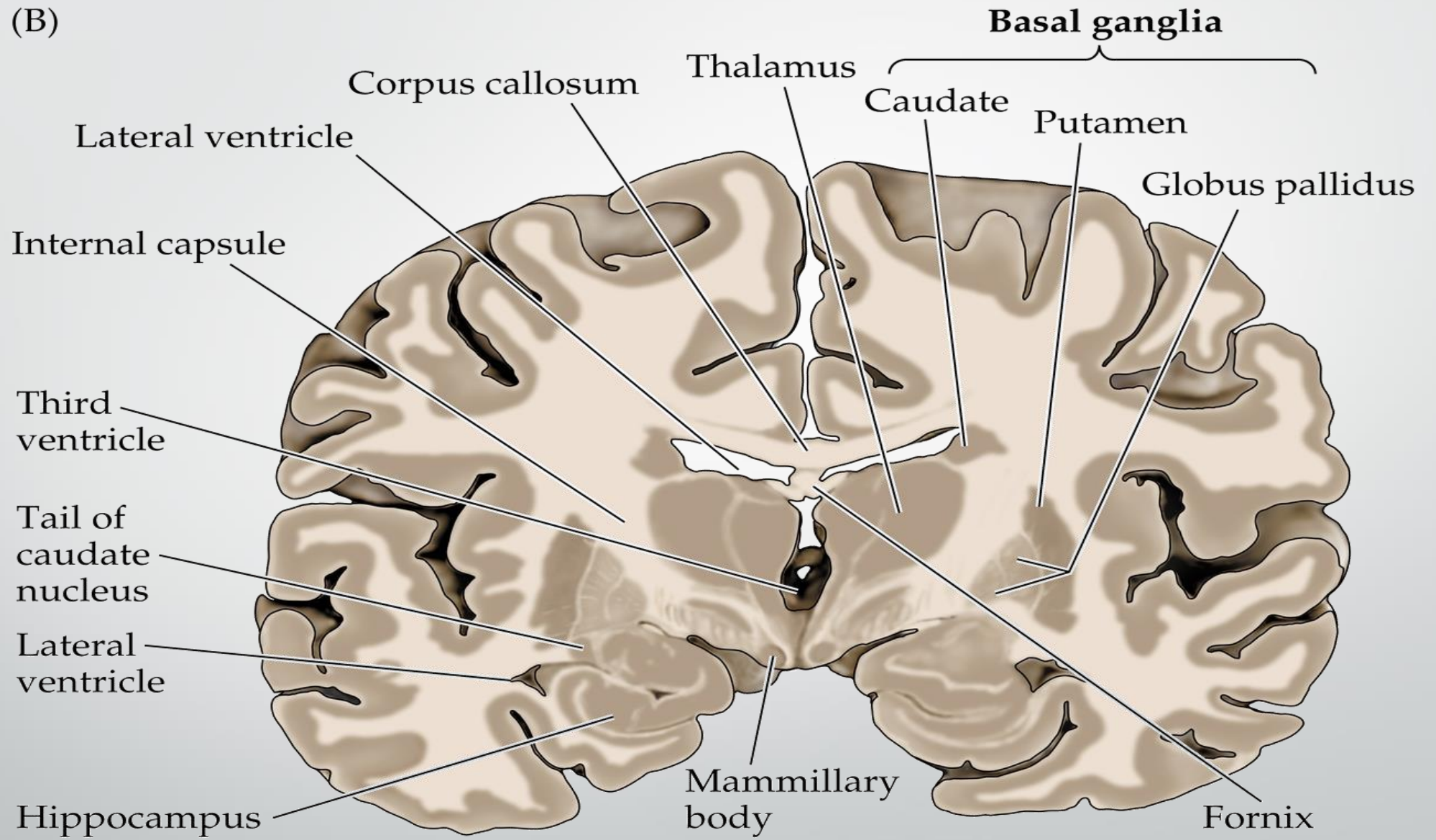
Dr. John Rajpathy
Professor, Dept of Physiology
VMCH&RI

- 
- Group of deep sub cortical nuclei located in the base of forebrain
 - Consists of nuclear groups
 - Caudate nucleus
 - Putamen
 - Globus Pallidus – external & internal segment
 - Substantia Nigra – pars compacta & pars reticularis
 - Subthalamic nucleus

(A)



(B)



(B)

Cerebrum

Motor cortex

Caudate nucleus

Putamen

Globus pallidus,
external
and internal
segments

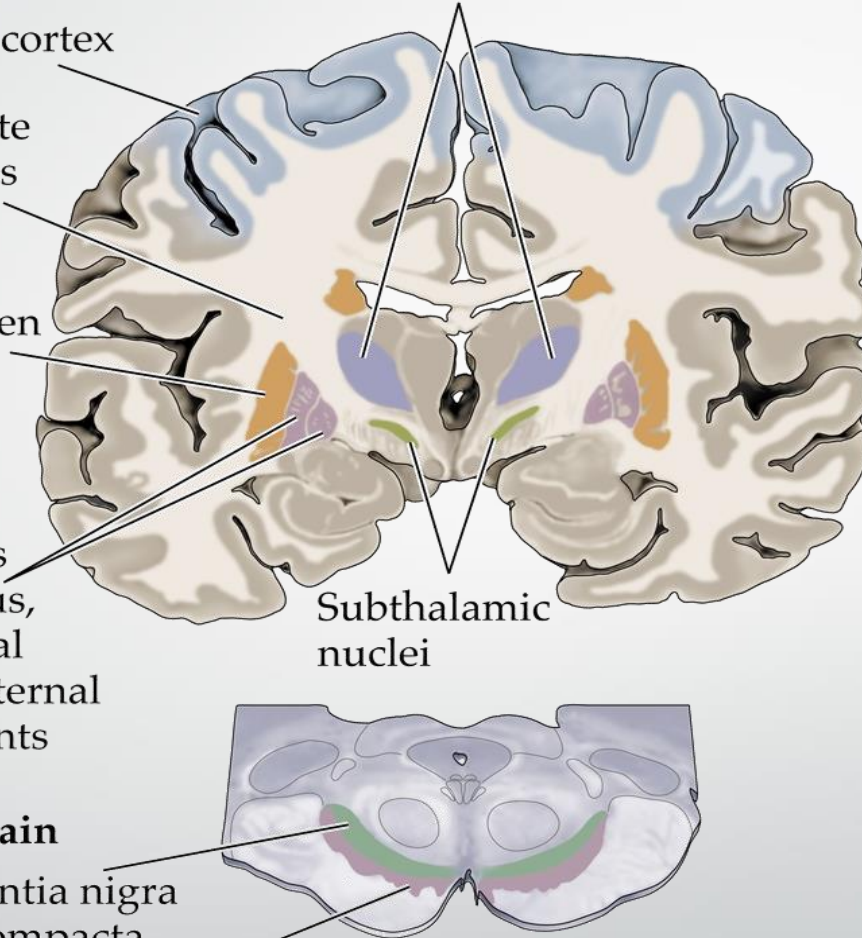
VA/VL complex
of thalamus

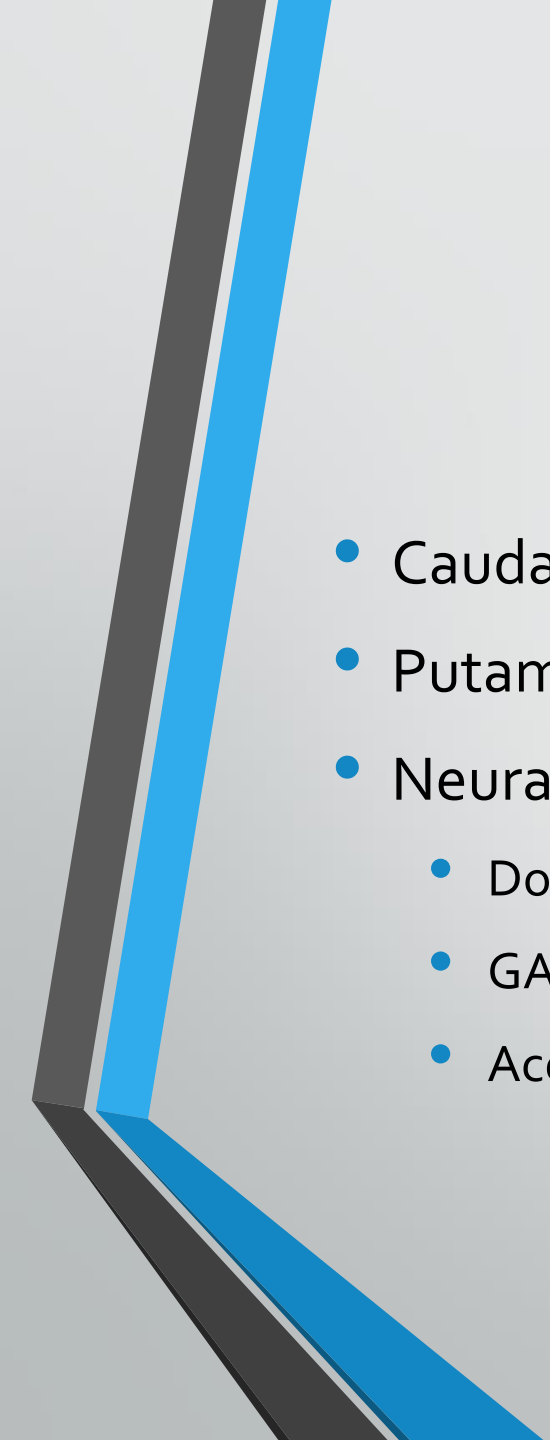
Subthalamic
nuclei

Midbrain

Substantia nigra
pars compacta

Substantia nigra
pars reticulata



- 
- Caudate nucleus + Putamen = Striatum
 - Putamen + Globus pallidus = Lenticular nucleus
 - Neural transmitters
 - Dopamine
 - GABA
 - Acetyl choline

Internal Connections

- Pars compacta of Substantia nigra to Striatum
- Striatum to Pars reticularis of Substantia nigra
- Caudate Nucleus & putamen (Striatum) to globus pallidus
- Ext Segment of Globus pallidus to Subthalamic nucleus
- Sub thalamic nucleus to Ext & Int segment of Globus pallidus

Inputs

Mainly from cerebral cortex and also from thalamus, dorsal raphe nucleus, pedunculopontine region

- Corticostriate projection
- Thalamo striate projection
- Raphestriate projection
- Pedunculostriate projection

Outputs

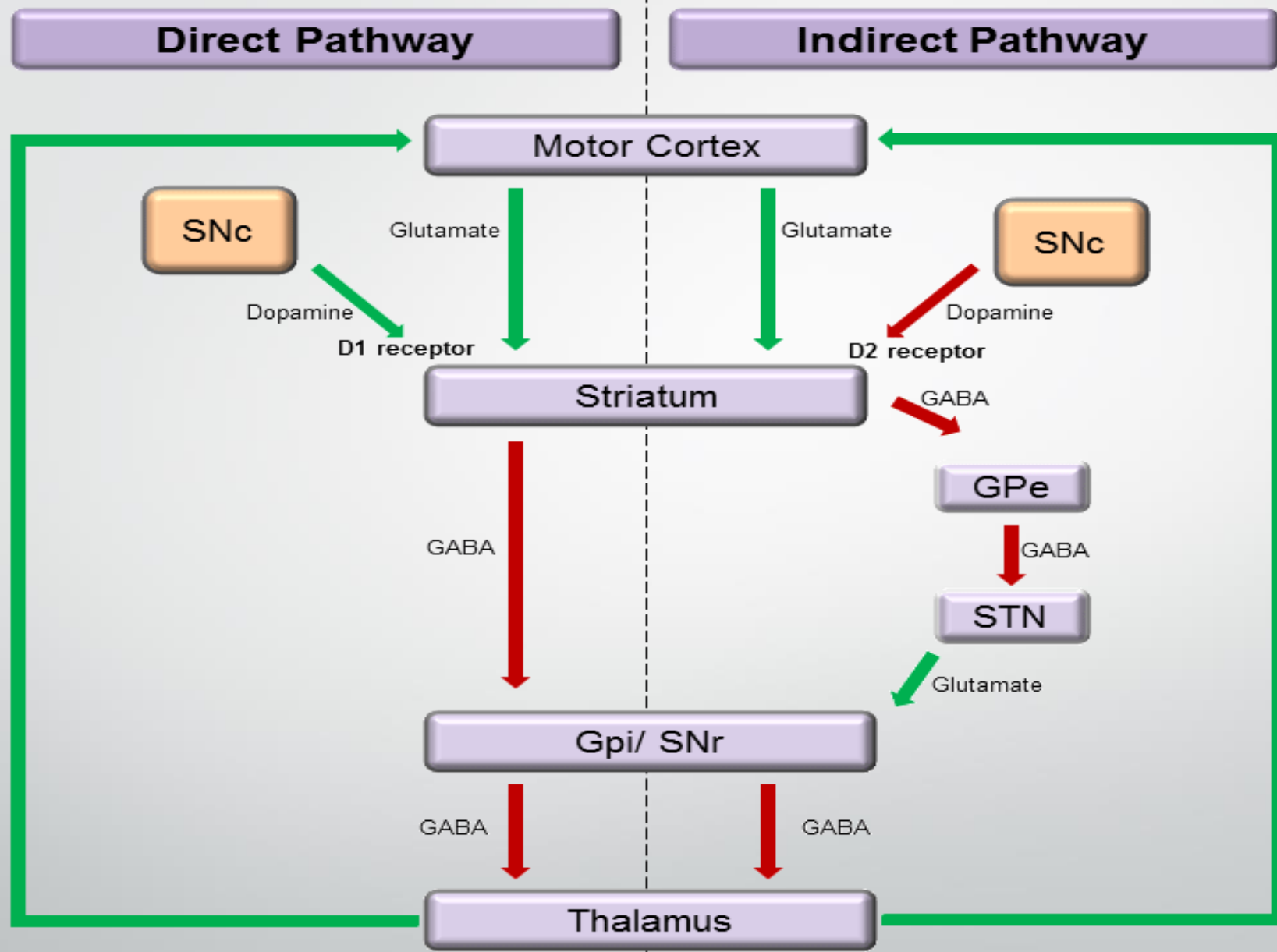
Mainly to thalamus from globus pallidus

Substantia nigra to thalamus

Also basal ganglia projects to pedunculopontine nucleus & superior colliculus

Functions

- Planning and programming the voluntary motor activity
- Stretch reflex regulation
- Controls the transfer of information from sensory & associated areas to the motor cortex
- Initiation , control and cessation of muscular activity
- Provides necessary muscle tone for skilled movements
- Co-ordinates impulses for skilled motor activity
- Regulates sub conscious gross movements
- Controls associated movements that happen normally & automatically
- Cognitive functions



Parkinsonism

James Parkinson first to identify paralysis agitans – named as parkinsonism

Degeneration of nigro-striatal pathway

With age progressive loss of dopamine & dopaminergic receptors in basal ganglia

Causes

- Idiopathic
- Drugs – phenothiazine & D2 receptor blockers
- Methyl Phenyl pyridinium accumulation destroys basal ganglia

Features

1. Hypokinetic movements

Akinesia

Bradykinesia

Decreased associated
Movements – mask like face

2. Hyperkinetic movements

Rigidity(lead pipe / cog
wheel)

Tremor (resting)

Gait(festinant)



Treatment

- Replacement of dopamine - L Dopa
- Dopamine agonists – Bromocriptine
- Anticholinergics
- Deprenyl – monoamine oxidase inhibitors
- Transplantation of adrenal gland into basal ganglia
- Implantation of some tissues of fetal basal ganglia
- Transplantation of glomus cells from carotid body

Huntington's disease

- Autosomal dominant disease
 - Defect in chromosome 4
 - Gene that codes for huntingtin – an abnormal protein
- Causes
 - Degeneration of GABAergic fibres
- Features
 - Chorea, Dementia & Slurred speech
- Treatment
 - No Treatment – progressively fatal

Other Dysfunctions

Ballism

- Involuntary movements – flailing, intense & violent in Nature
- Caused by sub thalamic nuclear damage

Hemiballism

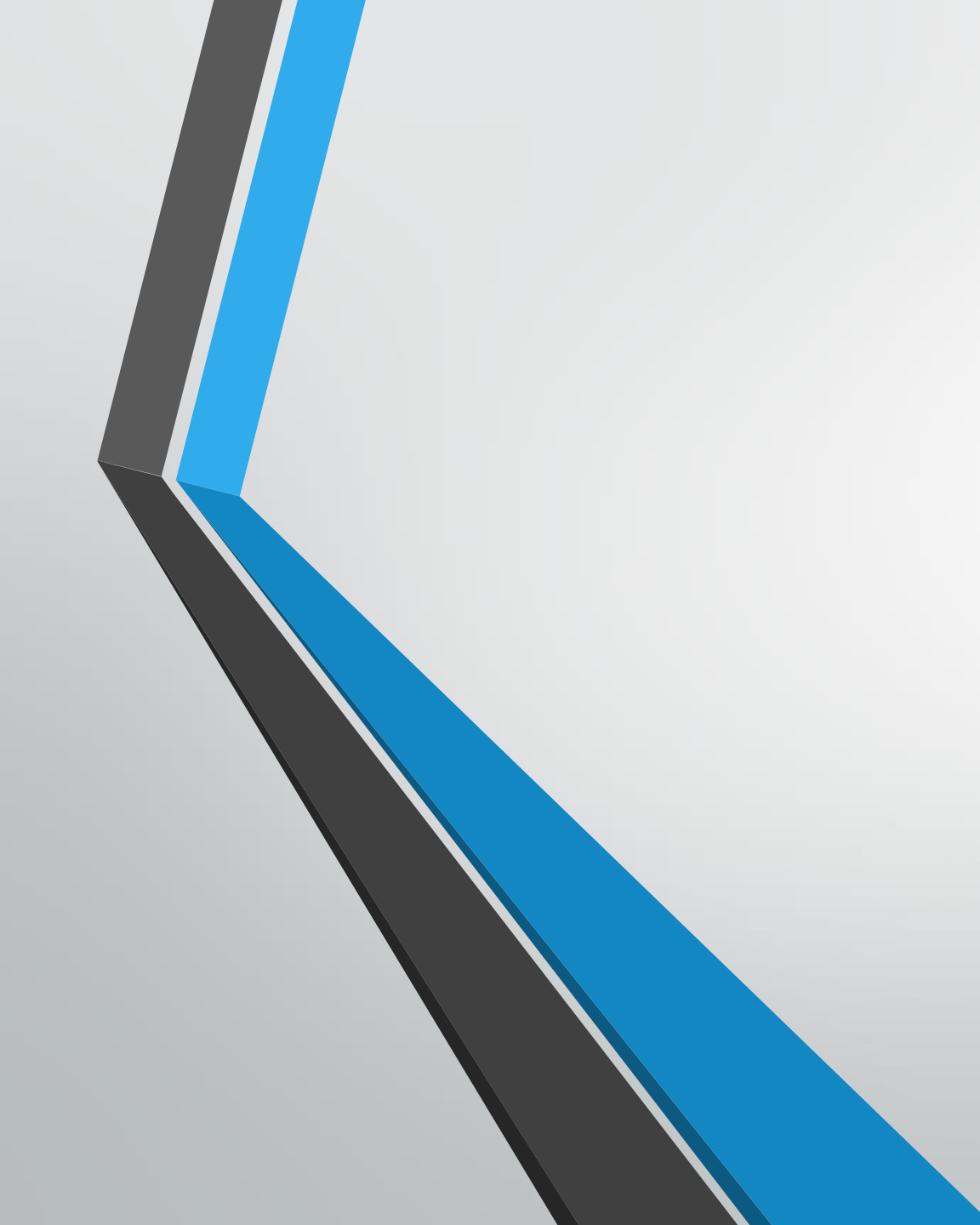
- Caused due to haemorrhage in sub thalamic nuclei

Athetosis

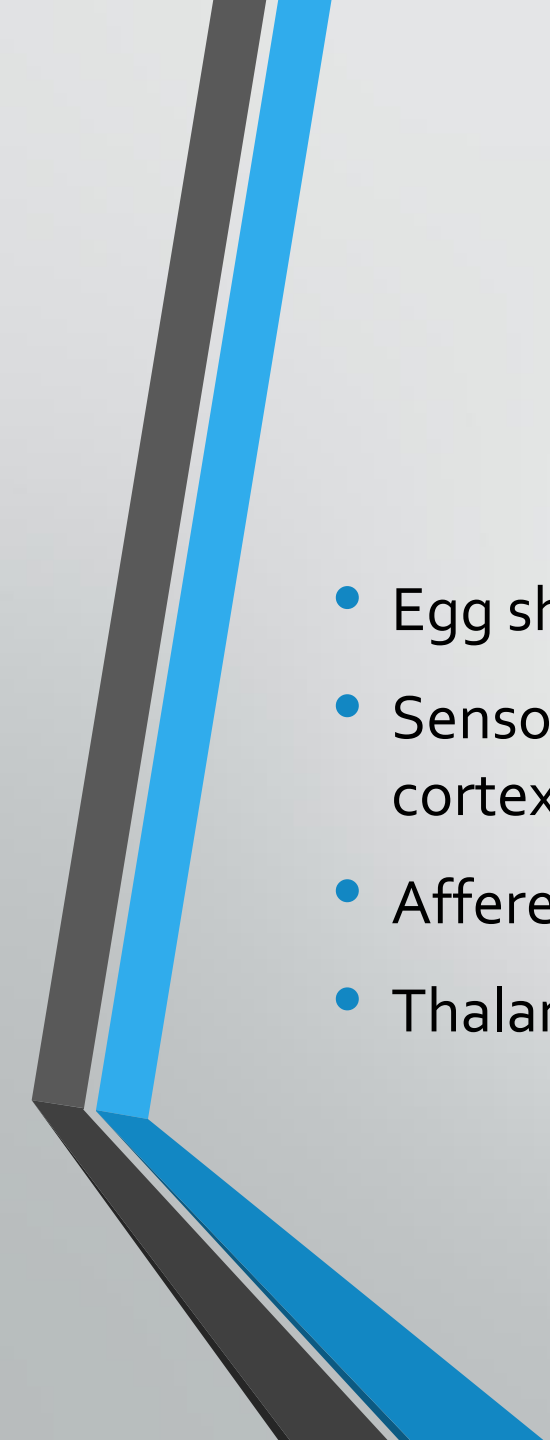
- Continuous but slow writhing movements
- Damage to striatum

Chorea

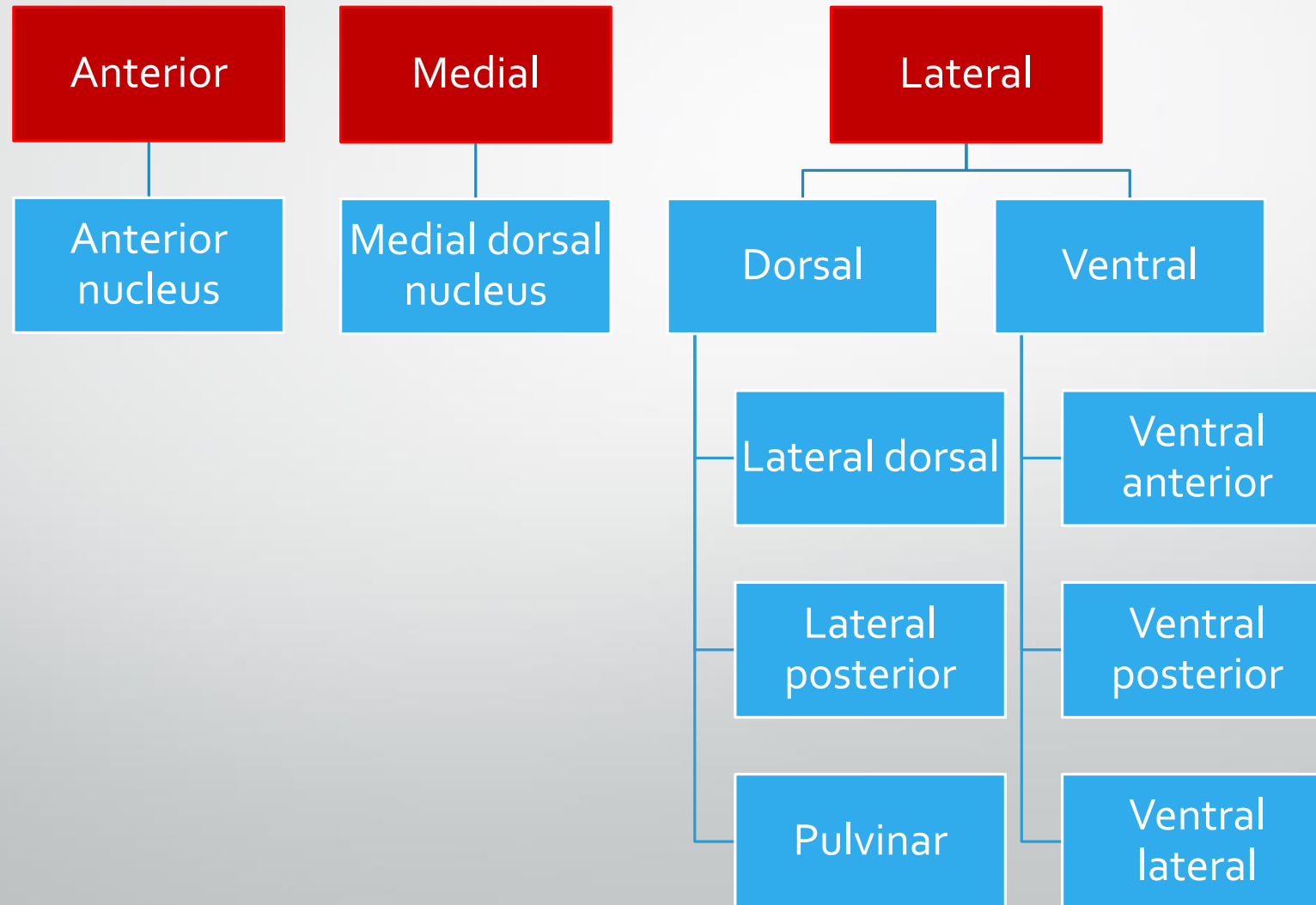
- Damage to caudate nucleus



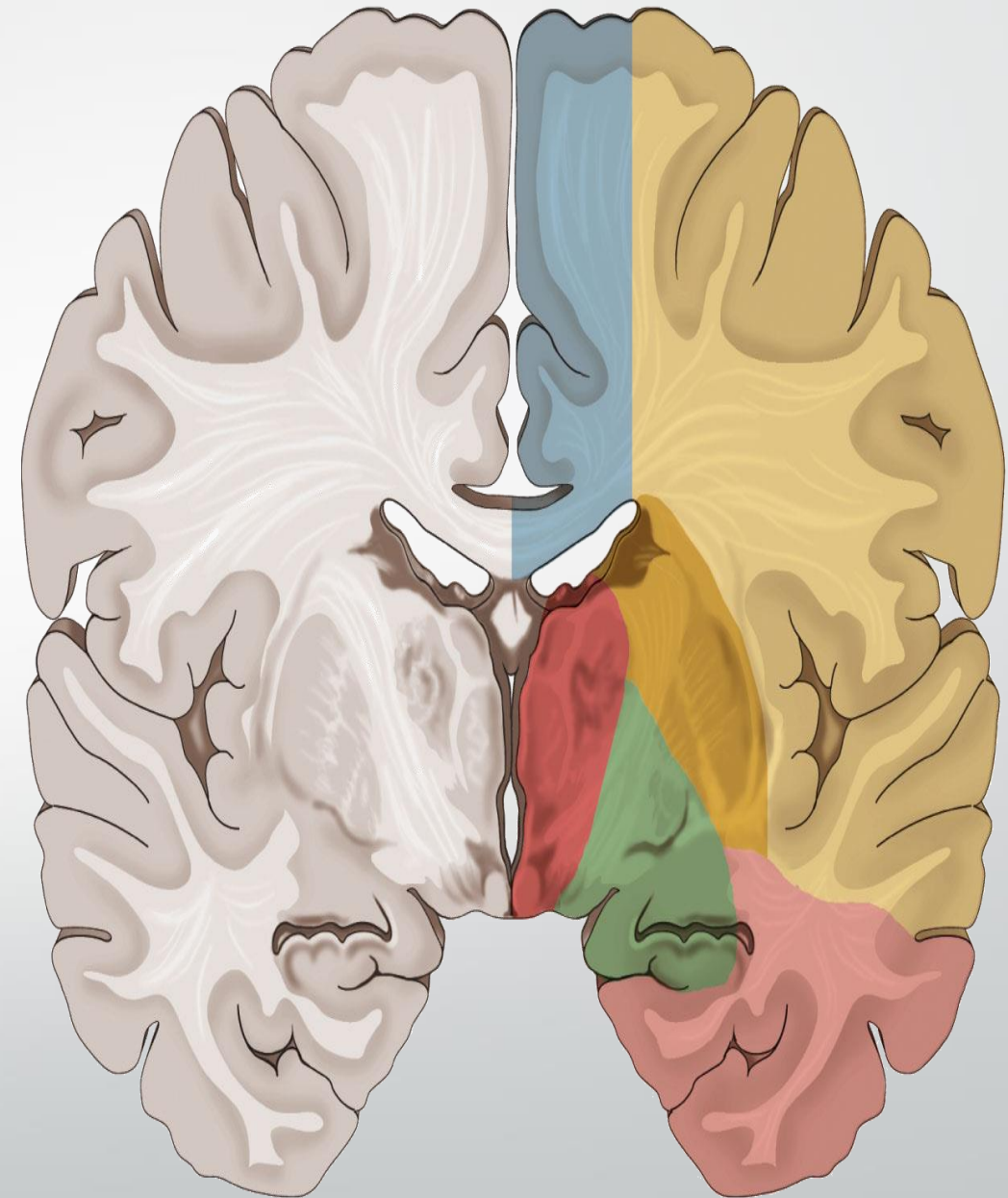
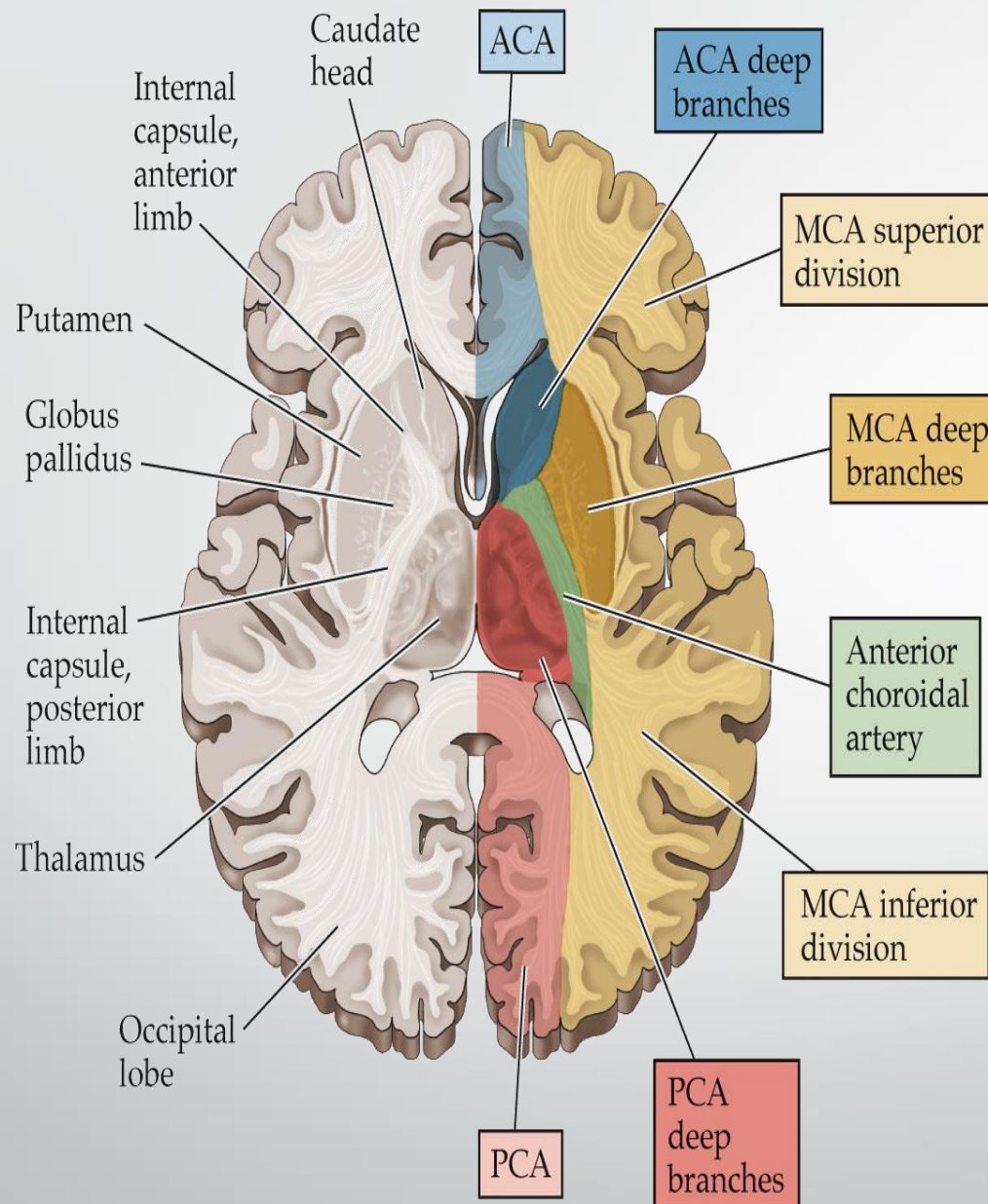
Thalamus

- 
- Egg shaped nuclear structure – on the top of brain stem
 - Sensory relay station – receives ascending inputs & projects to the sensory cortex
 - Afferent fibres of reticular formation also projects to thalamus
 - Thalamus also receives input from cortex

Thalamus nuclei group



(B)



Connections

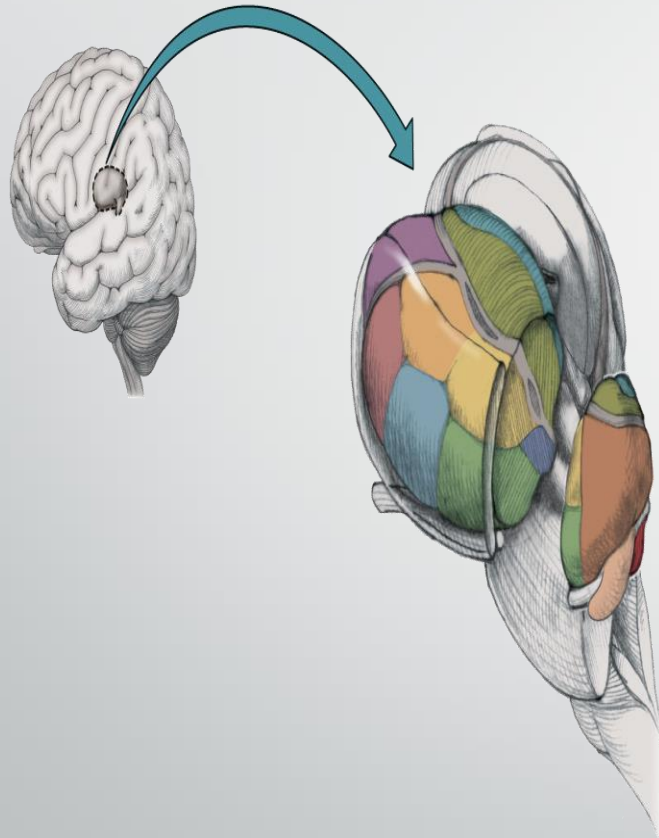
Efferent connections

- Cerebral cortex
- Caudate nucleus
- Globus pallidus
- Intra thalamic connections
- Hypothalamus & Mid brain

Afferent connections

- Medial lemniscus – ventral postero lateral nucleus
- Spinal lemniscus - postero lateral
- Trigeminal lemniscus – ventral postero medial nucleus
- Hypothalamus – medial part of thalamus
- Cerebellum – ventral lateral nucleus
- Red nucleus – ventral lateral nucleus
- Cerebral cortex

Functions



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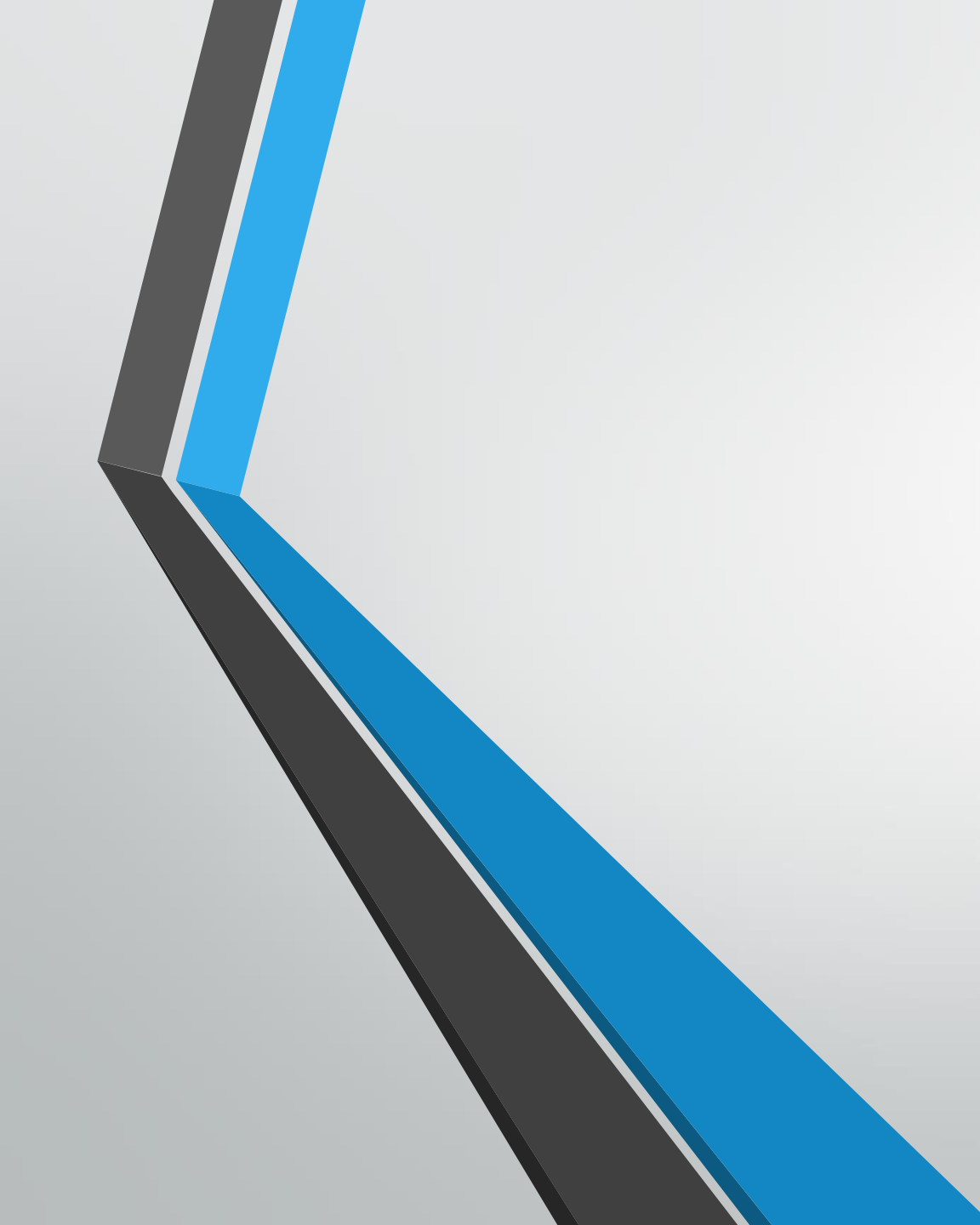
- Sensory relay (ex Smell)
- To perform voluntary motor activity
- Storage & short term memory
- Regulates autonomic functions associated with emotions
- Responsible for consciousness, sleep and wakefulness
- Pain perception
- Genesis & synchronization of EEG waves
- Execution of speech
- Forms a link between cerebellum, basal ganglia & cerebral cortex

Thalamic syndrome

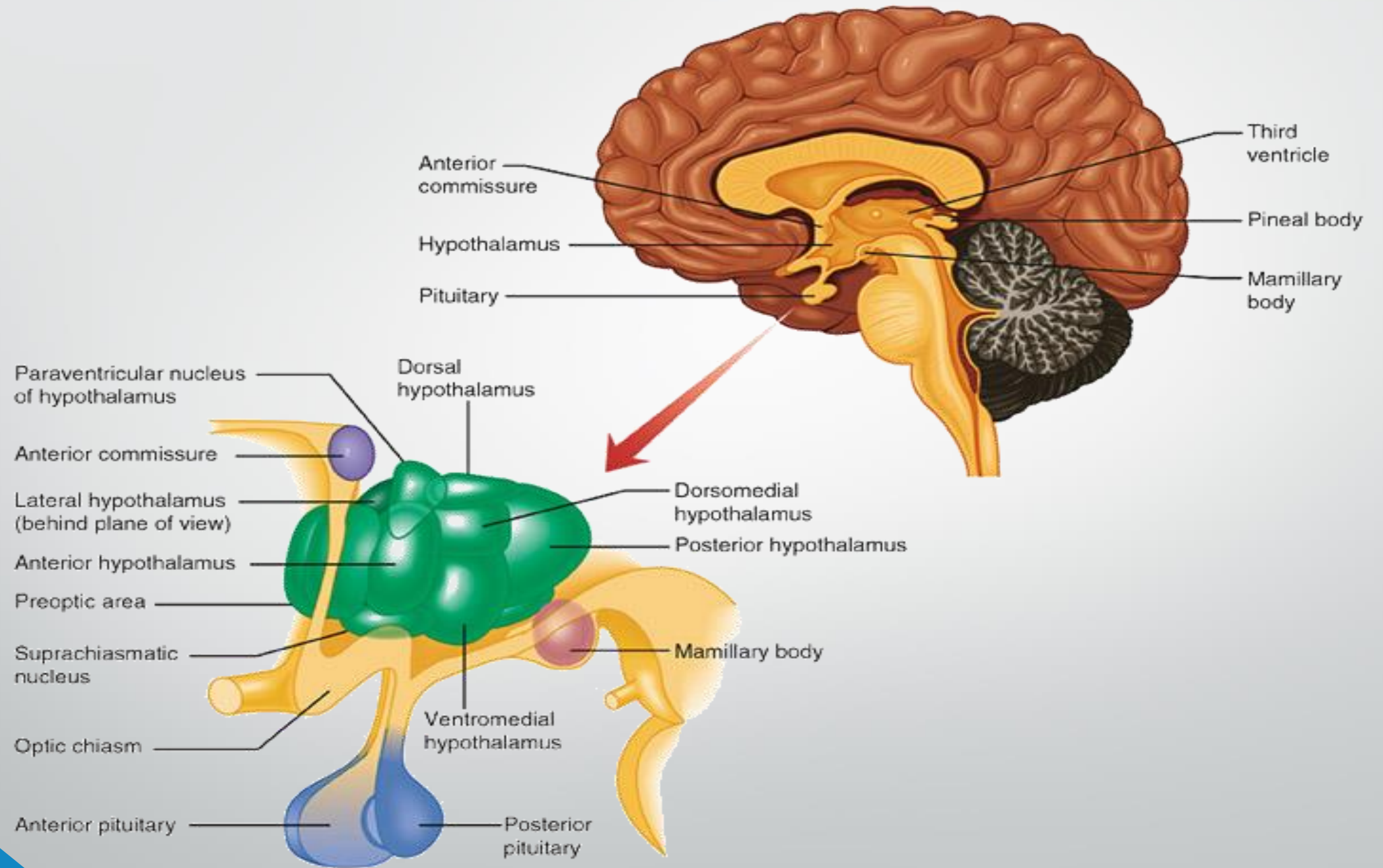
Ischemic damage to the postero ventral part of thalamus

Characteristic features

- Loss or alteration in different sensations
- Ataxia
- Astereognosis
- Hypotonia & muscle weakness
- Emotional disturbances
- Increased pain perception



Hypothalamus



Anterior hypothalamus

- Preoptic nucleus
- Paraventricular nucleus
- Supra optic nucleus
- Supra chiasmatic nucleus
- Anterior hypothalamic nucleus

Posterior hypothalamus

- Posterior hypothalamic nucleus
- Mamillary body

Medial hypothalamus

- Dorso medial nucleus
- Ventro medial nucleus
- Arcuate nucleus

Lateral hypothalamus

- Lateral hypothalamic nucleus

Afferent connections

- Cerebral cortex
- Globus pallidus
- Olfactory area
- Amygdala
- Limbic system
- Hippocampus
- Midbrain
- Reticular formation

Efferent connection

- Anterior hypothalamic nucleus
- Tegmentum of mid brain
- Brainstem reticular formation
- Frontal lobe of cerebral cortex
- Posterior pituitary
- Limbic system
- Lateral horn of spinal tract

Functions

- Control of food intake
- Regulation of water balance
- Control of anterior pituitary
- Control of posterior pituitary
- Regulation of body temperature
- Control of autonomic functions
- Control of sleep and wakefulness
- Control of circadian rhythm
- Control of behaviour



Thank you