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Program: M.Sc., Biomedical Science

Course Title : Neurobiology

Central pontine myelinolysis

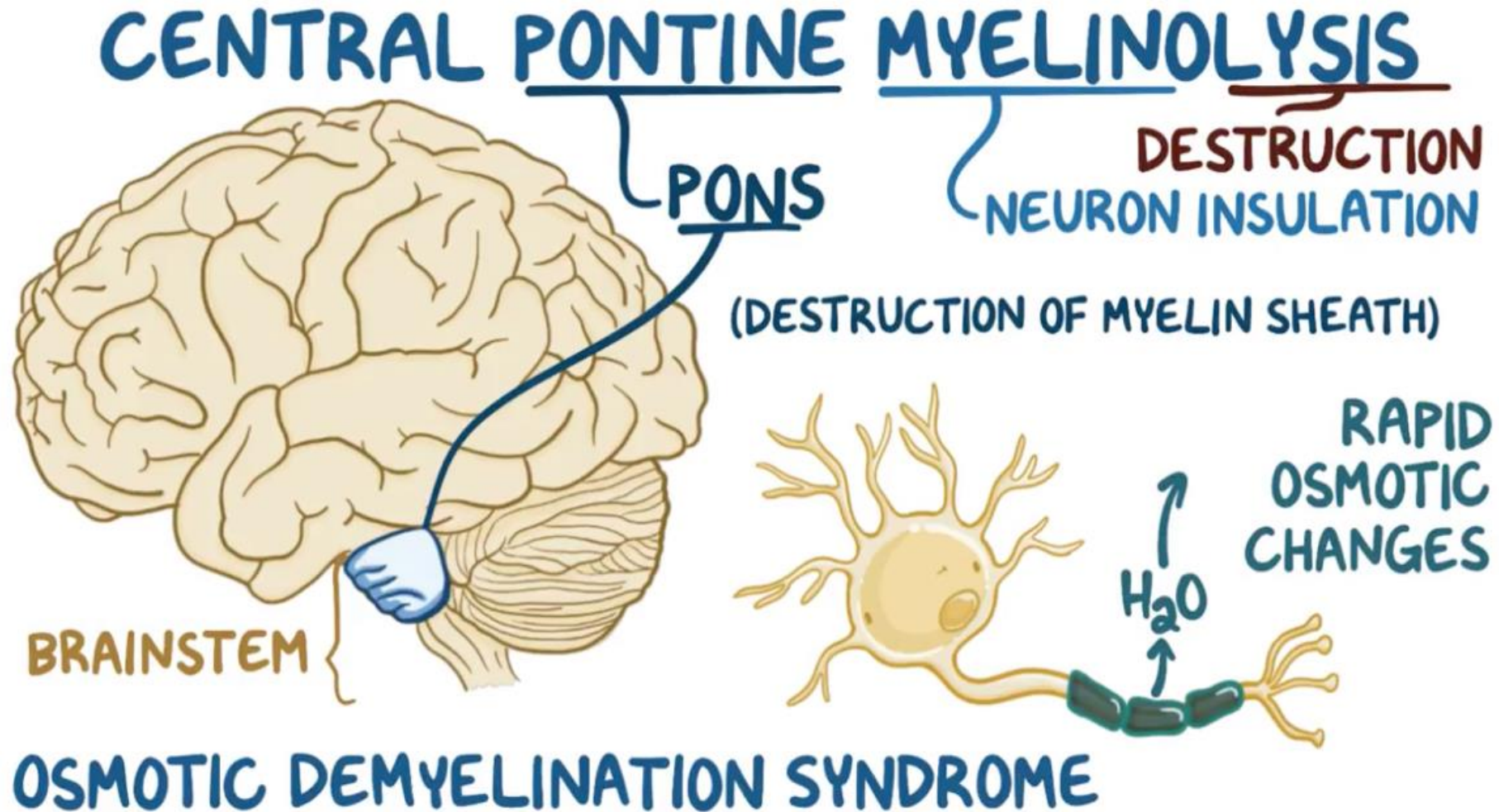
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Central pontine myelinolysis

- results in massive axonal demyelination in the center of the pons of the brainstem.
- can occur in a variety of clinical settings, including alcoholism and severe electrolyte/ osmolar imbalance.
- Patients often present with
 - Quadriplegia (total or partial paralysis of all four limbs)
 - speech impairments
 - diplopia, (simultaneous perception of two images of a single object)

Water imbalance causes disease



PONS

↳ RESPIRATION &
DEPTH OF BREATHING
(AWAKE & ASLEEP)

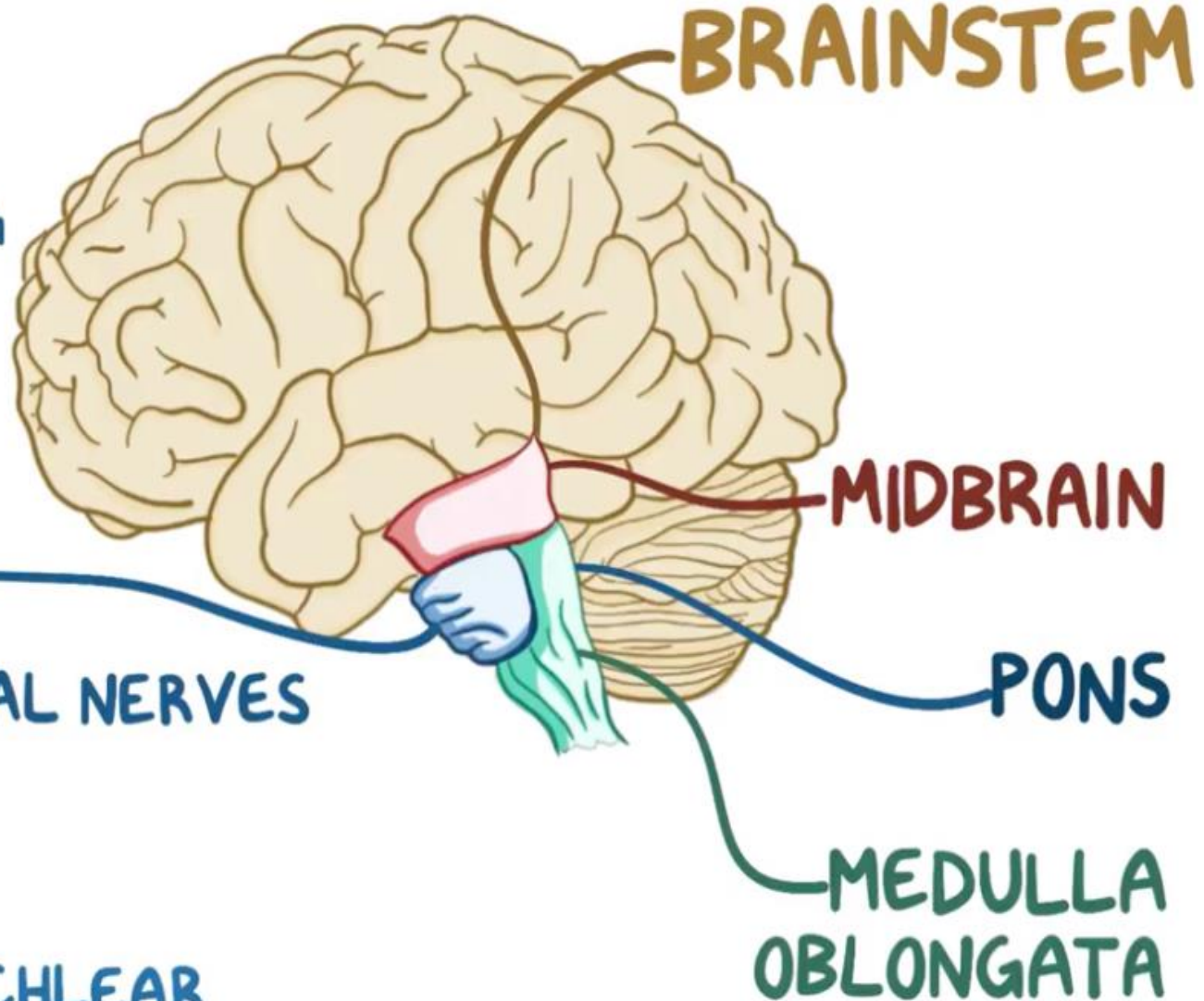
NUCLEI FOR CRANIAL NERVES

V: TRIGEMINAL

VI: ABDUCENS

VII: FACIAL

VIII: VESTIBULOCOCHLEAR

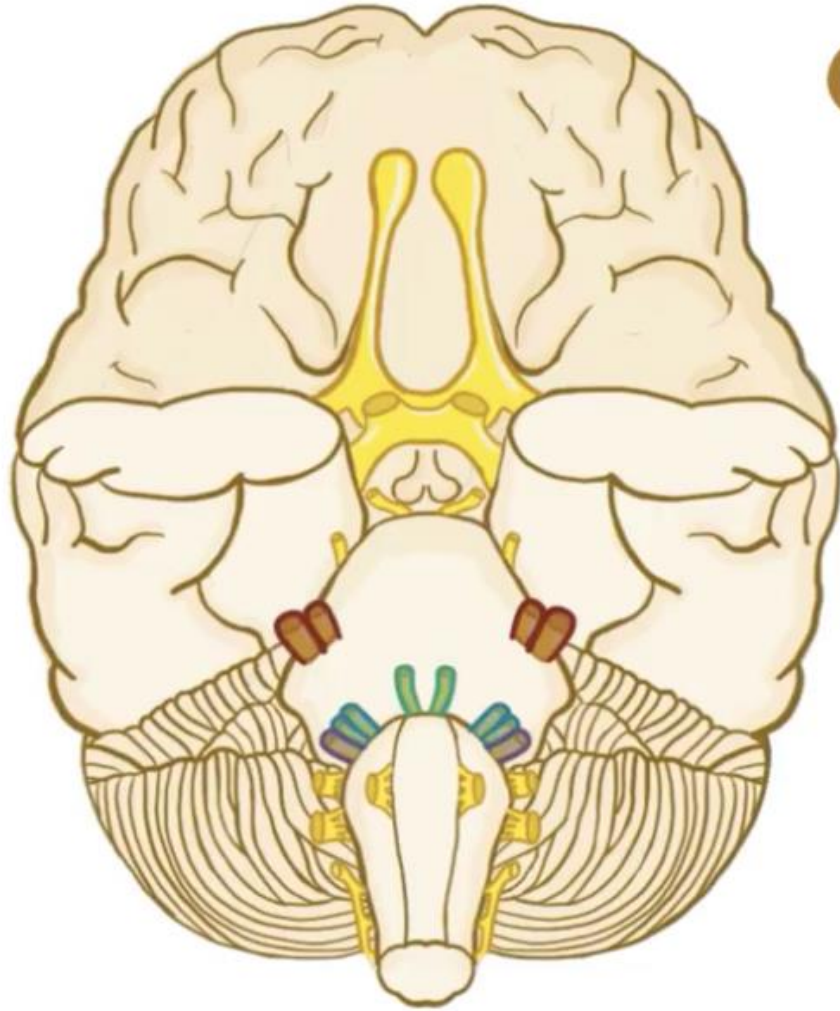


BRAINSTEM

MIDBRAIN

PONS

MEDULLA OBLONGATA



CRANIAL NERVES

V ~ SENSORY (FACE), CHEW,
BITE & SWALLOW

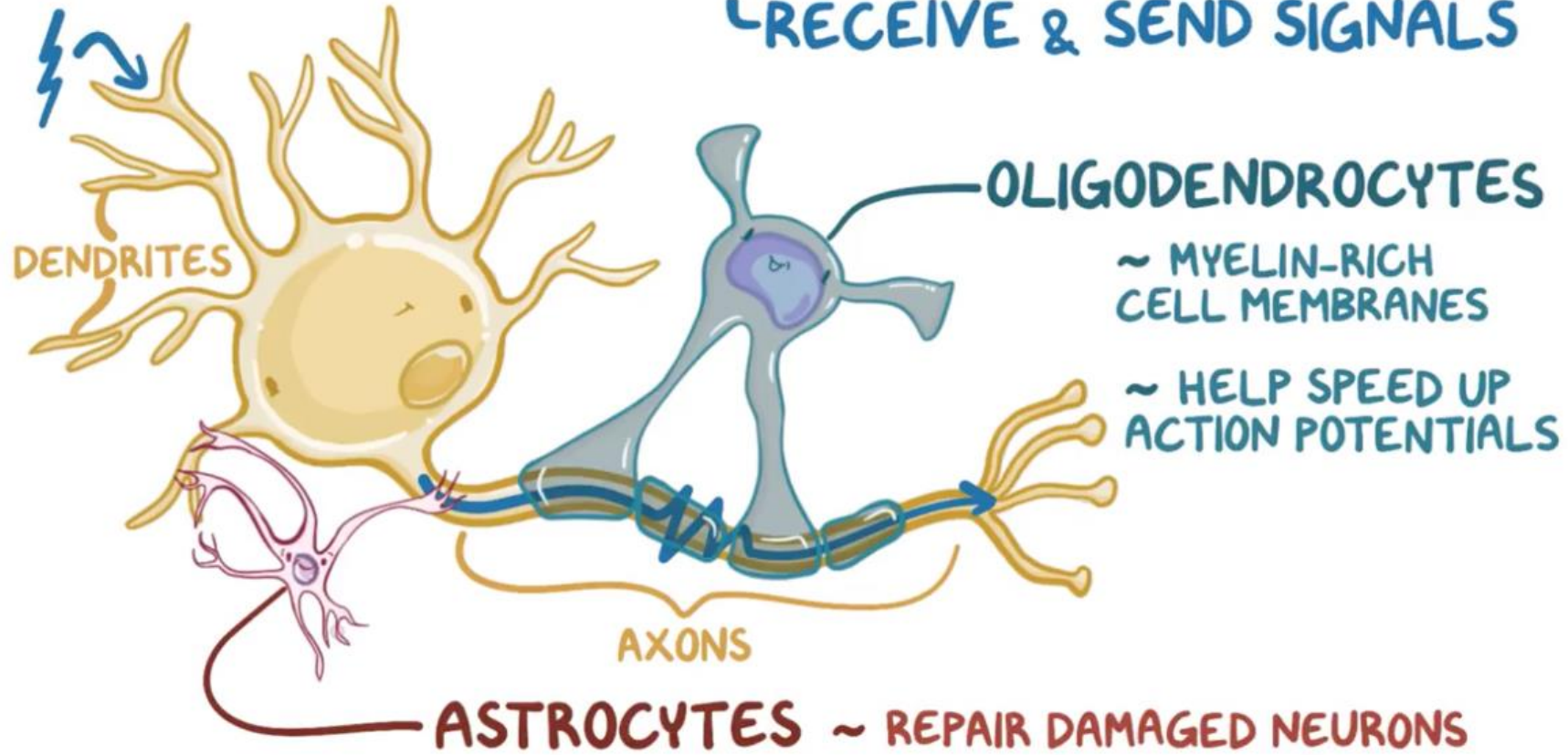
VI ~ EYE MOTION (SIDEWAYS)

VII ~ FACIAL EXPRESSIONS

VIII ~ HEARING

NERVES ~ MANY NEURONS

↳ RECEIVE & SEND SIGNALS



NEURONS & OLIGODENDROCYTES

↳ SENSITIVE TO CHANGES IN H_2O / ELECTROLYTES
(INTRA/EXTRACELLULAR COMPARTMENT)

PONS

↳ CELL MEMBRANE ~ H_2O PERMEABLE

OSMOLYTES ~ SEMI-PERMEABLE

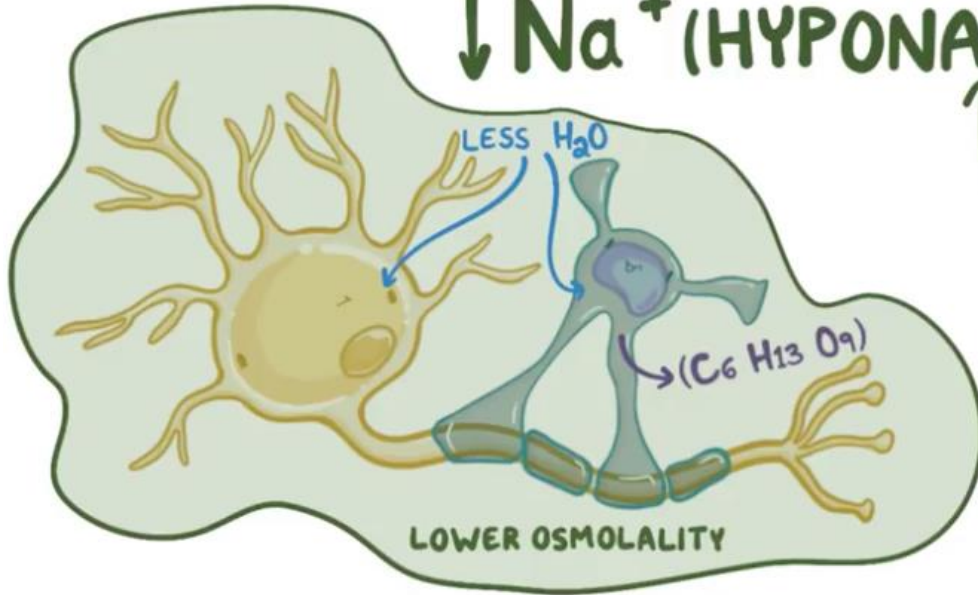
↳ ELECTROLYTES (POTASSIUM, SODIUM & CHLORIDE)

↳ ORGANIC SUBSTANCES (PHOSPHORYLATED GLUCOSE)

} POLARIZES
MOLECULE



↓ Na⁺ (HYPONATREMIA)



NEURONS & OLIGODENDROCYTES

- * SENSE ↓ IN EXTRACELLULAR OSMOLALITY
- * ↓ OSMOLYTES
- * PROTEIN KINASES INHIBITED
- * ↓ OSMOTIC GRADIENT, CELL IS IN EQUILIBRIUM

TAKES 24 HR TO RESTORE TO NORMAL

H₂O → CELLS

SYNDROME OF INAPPROPRIATE
DIURETIC HORMONE (SIADH)

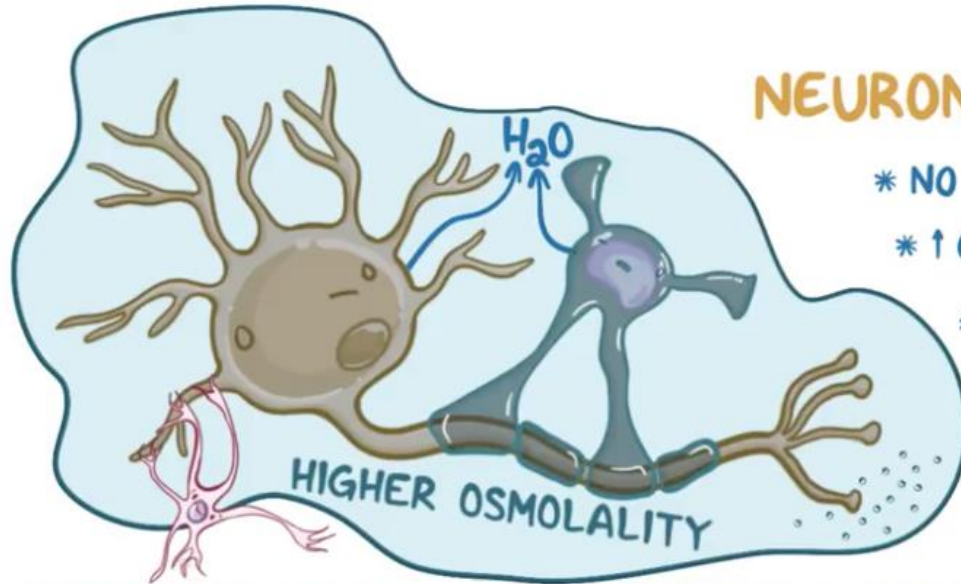


SIGNIFICANT
SWELLING



TISSUE GETS
COMPRESSED

HYPONATREMIA RESOLVES



NEURONS & OLIGODENDROCYTES

- * NO TIME TO REESTABLISH BALANCE
- * \uparrow OSMOLYTES, H₂O MOVES OUT
- * CELLS DEHYDRATE

PONS DAMAGE =
↓ FUNCTION OF CRANIAL NERVES

ASTROCYTES → **SIGNALS TISSUES TO SECRETE PROTEINS**
~ FORM SCAR TISSUE, MADE OF GLYCOPROTEINS (ASTROGLIOSIS)
↳ (LAMININ, FIBRONECTIN & PROTEOGLYCANS)
↳ INHIBIT TISSUE REGENERATION

CENTRAL PONTINE MYELINOLYSIS

↳ IMPAIRED MUSCLE MOVEMENTS (HEAD & NECK)



DYSARTHRIA ~ INABILITY TO SPEAK NORMALLY
DYSPHAGIA ~ DIFFICULTY SWALLOWING
DIPLOPIA ~ DOUBLE VISION

LOCKED-IN SYNDROME

(COMPLETE PARALYSIS OF VOLUNTARY MUSCLES)

DIAGNOSIS



MRI →

DAMAGE TO PONS

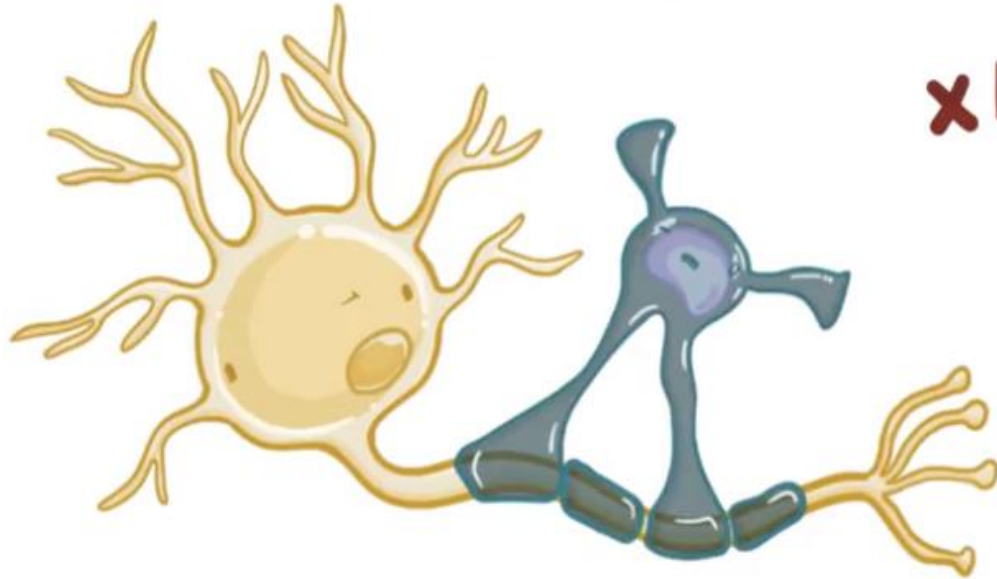
- * NO WAY TO REVERSE
- * ONGOING DAMAGE CAN BE STOPPED



CORRECT ELECTROLYTE ABNORMALITIES

Summary

CENTRAL PONTINE MYELINOLYSIS (OSMOTIC DEMYELINATION SYNDROME)



**X DESTRUCTION OF MYELIN
(IN THE PONS)**



**RAPID CORRECTION
OF HYPONATREMIA**

**X CAN CAUSE LOCKED-IN SYNDROME
(CONSCIOUS BUT PARALYZED)**