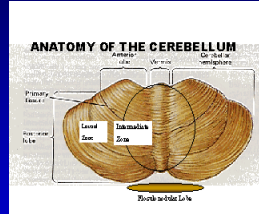
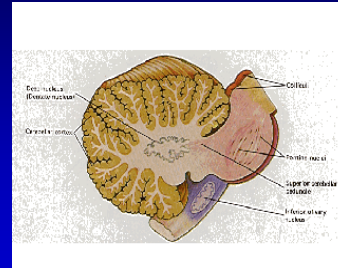


Cerebellum

- In fossa posterior below tentorium cerebelli
- Vermis – paleocerebellum
- Hemispheres – neocerebellum



Cerebellum



- Grey matter – cortex and nuclei
- nc. fastigii – in white matter of vermis
- nc. dentatus – in white matter of hemispheres
- nc. interpositus (nc. emboliformis & nc. globosus) – between first two
- White matter of cerebellum – pathways

Cerebellum - functions

- Regulation of muscle tone
- Spinal cerebellum – decrease
- Neocerebellum – increase
- Balance
- Paleocerebellum
- Koordination of movements
- Agonists, antagonists, synergists
- Cerebellar hemispheres coordinate movements of homolateral side – pathways are crossing 2x

Cerebellum clinical feature

Muscle tone

- Hypotonia – increased passivity (tone of antagonists is not increased)
 - muscle turgor is not decreased
 - reflexes are normal
- Pendular reflexes

ERP

- Decreased ERP on the side of lesion



Hypermetria

- Failure of coordination – hypermetria
- Failure of coordination of synergists – asynergy
- Bradyteleokinesis – slowness of movement before the goal



Hypermetry

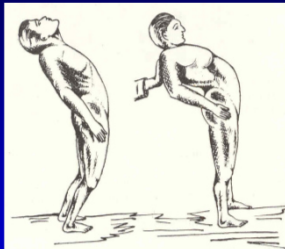
- During spontaneous and automic movements – gait, synkinesis
- Makrography

Adiadochokinesis

- Failure of coordination of alternating movements
- Failure of rhythm
- Movements are slower
- Failure of continuity of movements

Assynergy

- Failure of coordination of muscle groups of various parts of the body
- Small assynergy – on the extremities
- Big assynergy – during automatic and lokomotoric movements – inclination and falls backward (**paleocerebellar lesion**)
- **Dysarthria** – (assynergy + hypermetry) –



Cerebellar ataxia

- Falls backward
- It does not depend on the position of the head and visual control

Intention tremor

- **Coarse, irregular nonrhythmic, during voluntary movement, increased before goal – nc. dentatus lesion**