

# Autonomic nervovous system



## Sympathicus

*fight or flight*



## Parasympathicus

*rest or digest*



# Main functions

involuntary (visceromotor)

- contraction and relaxation of smooth muscles
- function of all endocrine and some exocrine glands
- heart rhythm
- some metabolic processes

*obsolete synonym: „vegetative system“*

# Classification of ANS

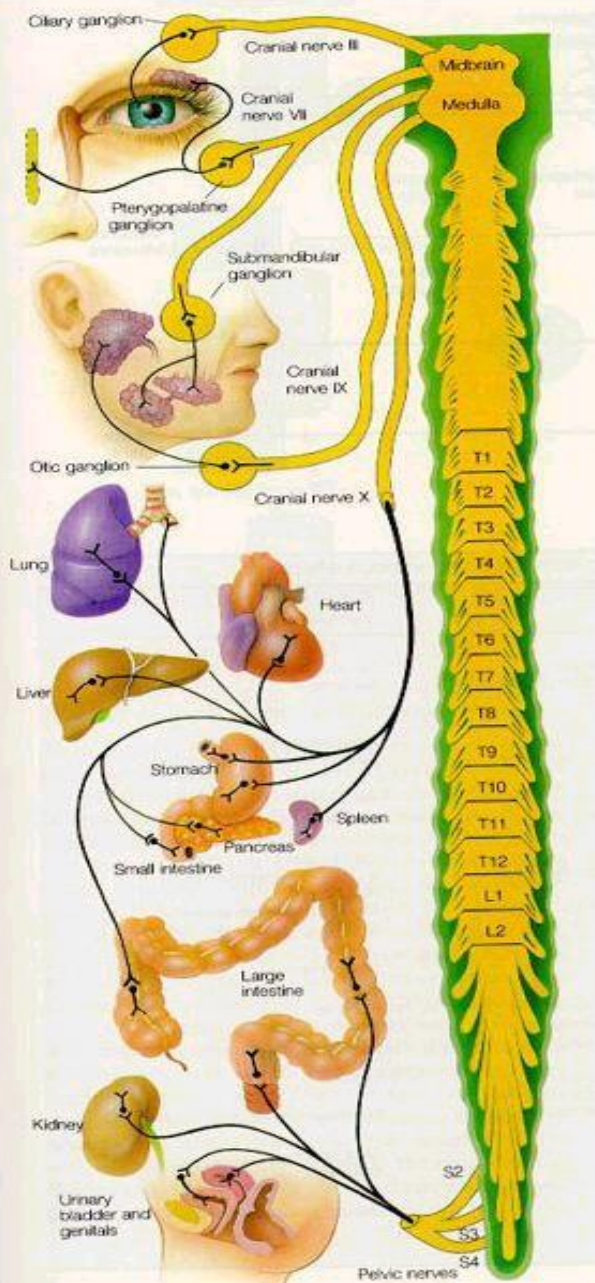
- sympathetic system
  - *fight or flight*
- parasympathetic system
  - *rest or digest*
- enteric system

# Types of impulses conducted by fibers of ANS

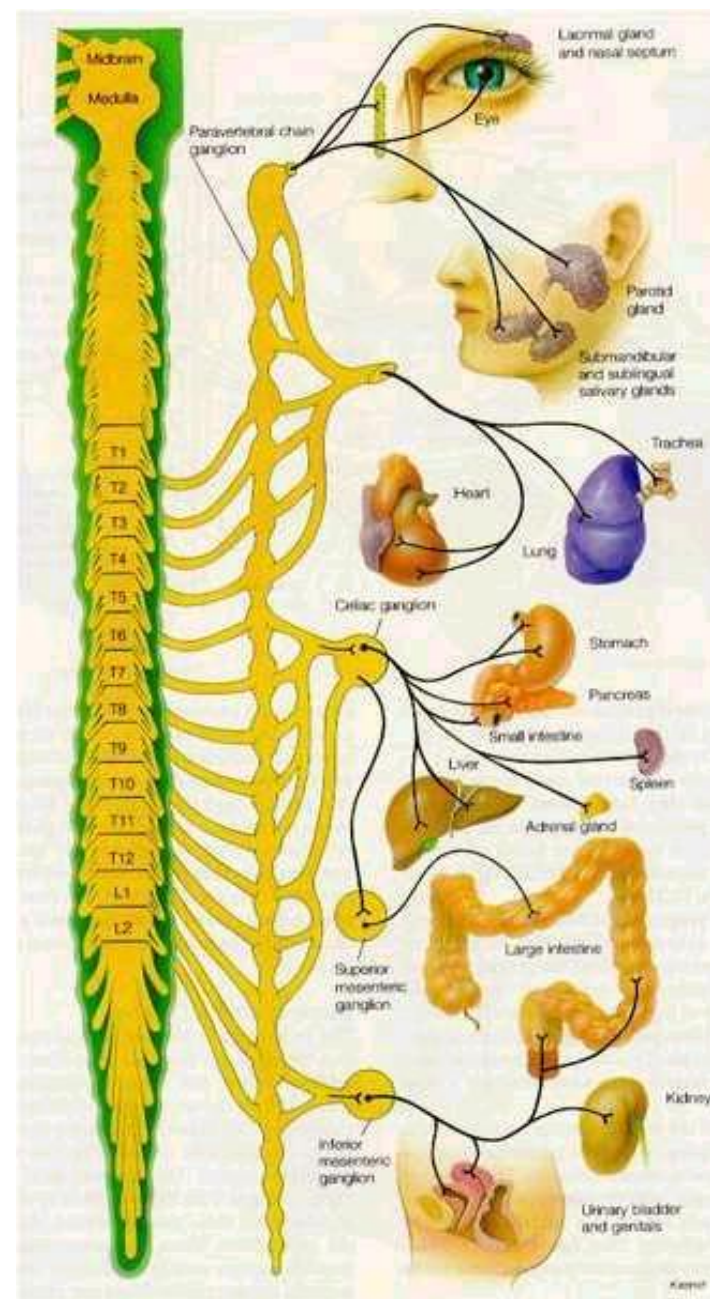
- nuclei in CNS → **visceromotor fibers** → autonomic ganglia (integration of information from CNS and ANS)
- free nerve endings → **viscerosensory fibers** → ggl. spinale or ggl. n. VII, IX, X
  - *are not functional part of ANS !!!*
  - mechanoreceptors, chemoreceptors
  - afferent fibers of reflexory pathways (coughing, defecation, vasomotor...)
  - visceral pain (e.g. colic, angina)

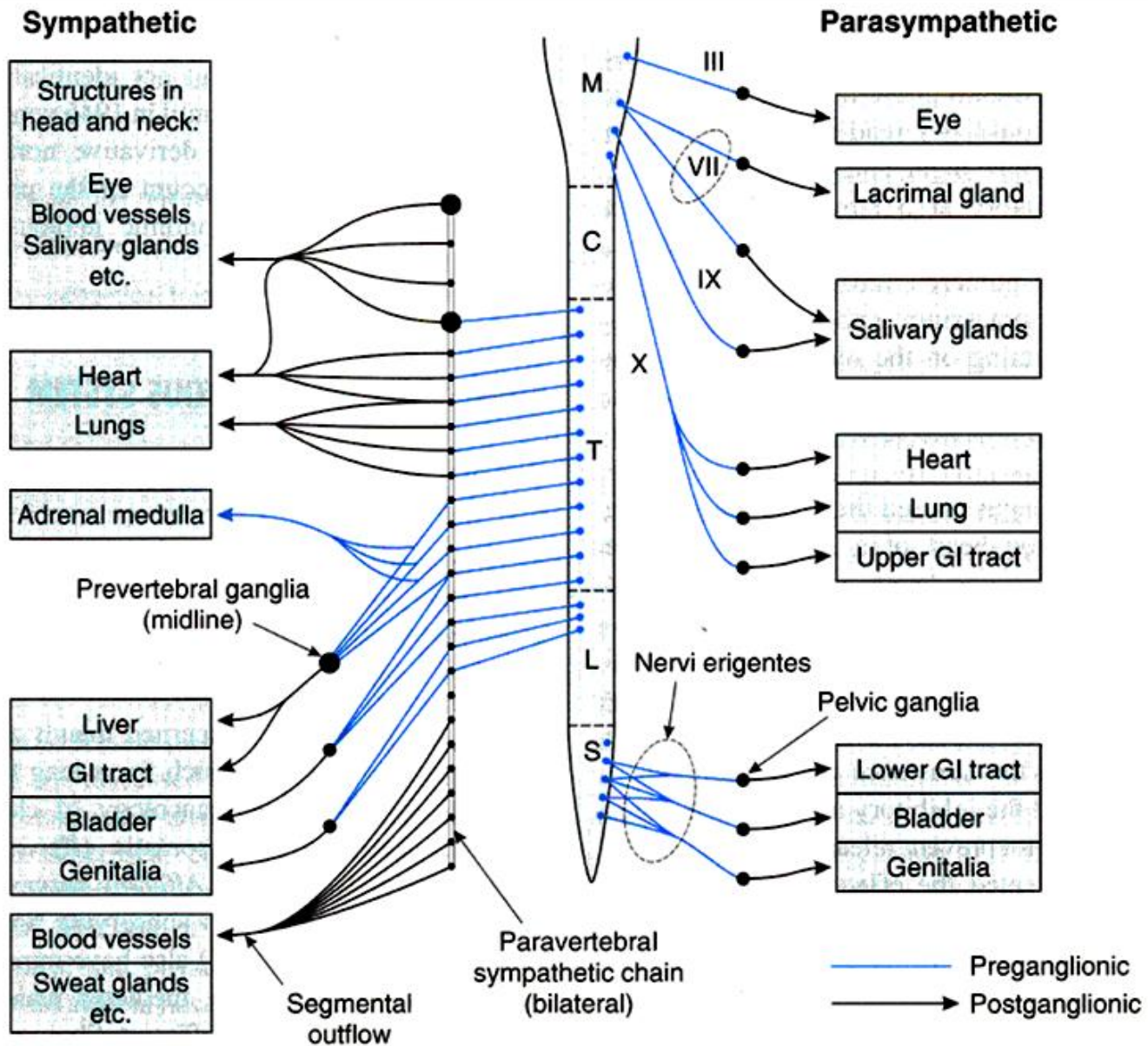


# parasympathetic part



# sympathetic part





**Fig. 6.1 Basic plan of the mammalian autonomic nervous system. (M = medullary; C = cervical; T = thoracic; L = lumbar, S = sacral)**

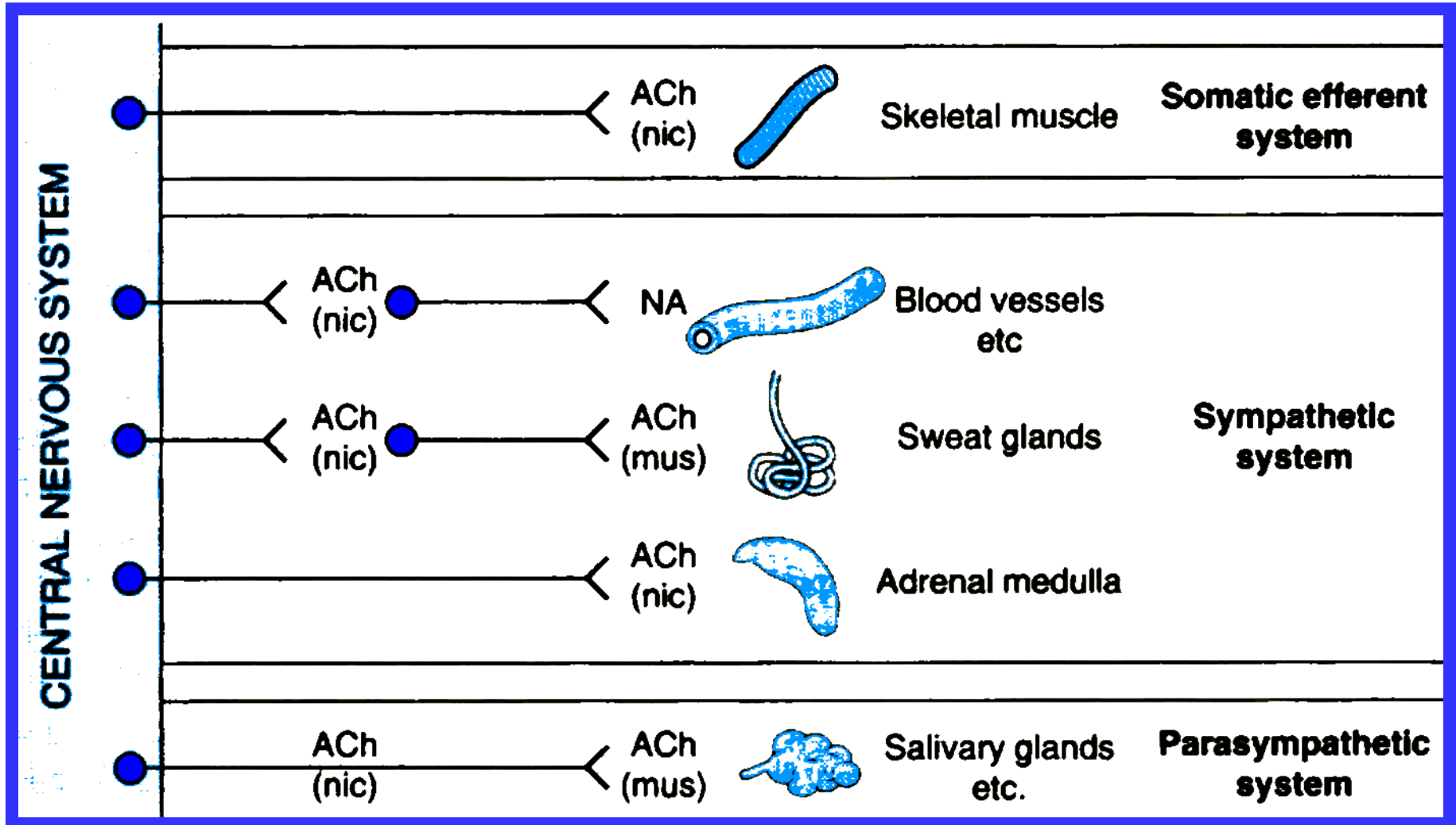
## Nicotin receptor („nic“)



ganglia, neuromuscular plate, CNS  
– ligand-gated ion channel

## Muscarin receptor („mus“): M1-M5

target tissue of parasympathetic, CNS  
– G-protein-gated  
(→ enzymes / ion channels)



## Noradrenergic receptor („NA“): $\alpha 1$ , $\alpha 2$ , $\beta 1$ , $\beta 2$

target tissue of sympathetic

– G-protein-gated



# Medicaments influencing ANS

+

- **Sympathomimetics**

- direct: **adrenaline, noradrenaline, dopamine**, dobutamine, isoprenaline
- selective
- indirect

- **Parasympathomimetics**

- **acetylcholine**, pilocarpine, karbachole, physostigmine, organophosphates

-

- **Sympatholytics**: alfa- and beta blockers

- $\alpha$  phentolamine, prazosine, yohimbine, ergotamine
- $\beta$  atenolole, propranolole, labetanole, pindolole, bopindolole

- **Parasympatholytics**

- **atropine, scopolamine**, ipratropium
- **contraindication: glaucoma (with closed angle), hyperplasia of prostate, paralytic ileus**



# Sympathetic part - stimulation of receptors

<i>receptor</i>	<i>tissue</i>	<i>effect</i>
$\alpha_1$	majority of vascular smooth muscle cells	contraction (vascular resistance)
	m. dilatator pupillae	contraction (mydriasis)
	uterus	contraction
	penis, glandulae vesiculosae	ejaculation
	GIT - sphincters	contraction
$\alpha_2$	presynaptic receptors in synapses	inhibition of mediator releasing
	trombocyt	stimulation of aggregation
$\beta_1$	heart	positive chrono-, dromo-, bathmo-, inotropic effect
	juxtaglomerular cells of kidneys b-cells of pancreas	release of renine
	B-cells of insulae pancreaticae	release of insuline
$\beta_2$	smooth muscle cells of bronchi, vessels, longitudinal layer in intesine, uterus	relaxation
	liver	stimulation of glycogenolysis
	striated muscles	shivering ( uptake $K^+$ )
$\beta_3$	lipocytes	lipolysis
$D_1$	smooth muscle cells	relaxation of splanchnic vessels
$D_2$	nerve endings	modification of mediators release

# Stimulation of $\alpha_1$ receptor

- **vasoconstriction** of skin, mucous and splanchnic vessels, minimal in coronary and cerebral circulation, higher peripheral resistance, higher blood pressure → following bradycardia (both local and peripheral)
- **mydriasis** (contraction of m. dilatator pupillae), reduction of intraocular pressure (elevated reabsorption and reduced production of humor aquosus by means of vasoconstriction of vessels in corpus ciliare)
- **contraction of pregnant uterus**
- **ejaculation**
- **contraction of m. sphincter vesicae**

# Stimulation of $\alpha_2$ receptor

- (presynaptic) **reduction of noradrenaline release** (mainly in CNS)
- stimulation of **thrombocytes aggregation**
- **vasoconstriction in local application**, otherwise by stimulation of central receptors → reduced tonus of sympathetic part and blood pressure = **hypotensive effect by central mechanism**

# Stimulation of $\beta_1$ receptor

## heart:

- $\uparrow$  frequency (**chronotropy**) - SA node
- $\uparrow$  automatism (**bathmotropy**) - AV node, ventricles
- $\uparrow$  contractility (**inotropy**)
- $\uparrow$  conduction of speed (**dromotropy**)
- $\uparrow$  oxygen consumption

## kidneys:

- $\uparrow$  secretion of renin (start of RAA system)



# Stimulation of $\beta_2$ receptor

- **vasodilatation in skeletal muscles** („preparation to flight or fight“),  $\downarrow$  diastolic blood pressure
- **bronchodilatation**
- **relaxation of uterus** (indication in threatening premature delivery)
- **relaxation of intestinal wall** (+  $\alpha_2$ )
- **slowing of intestinal passage**
- **relaxation of urinary bladder wall**
- **glycogenolysis**  $\rightarrow$  elevated glycaemia, elevated insulin secretion
- **tremor of skeletal muscles**

# Stimulation of $\beta_3$ receptor

- lipolysis

# Parasympathetic part – cholinergic receptors

## Muscarine (M) and nicotine (N) receptors

Receptor	Localization	G protein	Receptor stimulation activates following actions
M <sub>1</sub>	Nerves	+	↑IP <sub>3</sub> , DAG cascade
M <sub>2</sub>	Heart, nerves, smooth muscles	+	↓ production of cAMP
M <sub>3</sub>	Glands, smooth muscles	+	↑IP <sub>3</sub> , DAG cascade
M <sub>4</sub>	CNS?	+	↓ production of cAMP
M <sub>5</sub>	CNS?	+	↑IP <sub>3</sub> , DAG cascade
N <sub>M</sub>	Neuromuscular plate	-	Opening of Na <sup>+</sup> /K <sup>+</sup> canal and depolarization
N <sub>N</sub>	Receptors in ganglia	-	Opening of Na <sup>+</sup> /K <sup>+</sup> canal and depolarization

# Parasympathetic part

## Stimulation of muscarine receptor (M)

<i>Organ</i>	<i>Part of organ</i>	<i>Effect</i>
<b>Eye</b>	<b>M. sphincter pupillae</b>	<b>Contraction – miosis</b>
	<b>M. ciliaris</b>	<b>Contraction – accommodation, vision at near</b>
<b>Heart</b>	<b>SA node</b>	<b>↓ frequency (negative chronotropic)</b>
	<b>Atria</b>	<b>↓ contractility (negative inotropic)</b>
	<b>AV node</b>	<b>↓ conductive speed (negative dromotropic) prolonged refractory phase</b>
	<b>Ventricles</b>	<b>↓ contractility (negative inotropic)</b>
<b>Vessels</b>		<b>Dilatation (EDRF=NO)</b>
<b>RT</b>	<b>Smooth muscles cells of bronchi</b>	<b>Bronchoconstriction</b>
	<b>Glands</b>	<b>Stimulate</b>
<b>GIT</b>	<b>Motility</b>	<b>↑ motility</b>
	<b>Sphincters</b>	<b>Relaxation</b>
	<b>Glands</b>	<b>↑ secretion</b>
<b>Urinary bladder</b>	<b>M. sphincter vesicae + m. trigoni vesicae</b>	<b>Relaxation</b>
	<b>M. detrusor</b>	<b>Contraction</b>
<b>Glands</b>	<b>Sweat, salivatory, lacrimal, nasopharyngeal</b>	<b>↑ secretion</b>

# Parasympathetic part

## Stimulation of nicotine receptor (N)

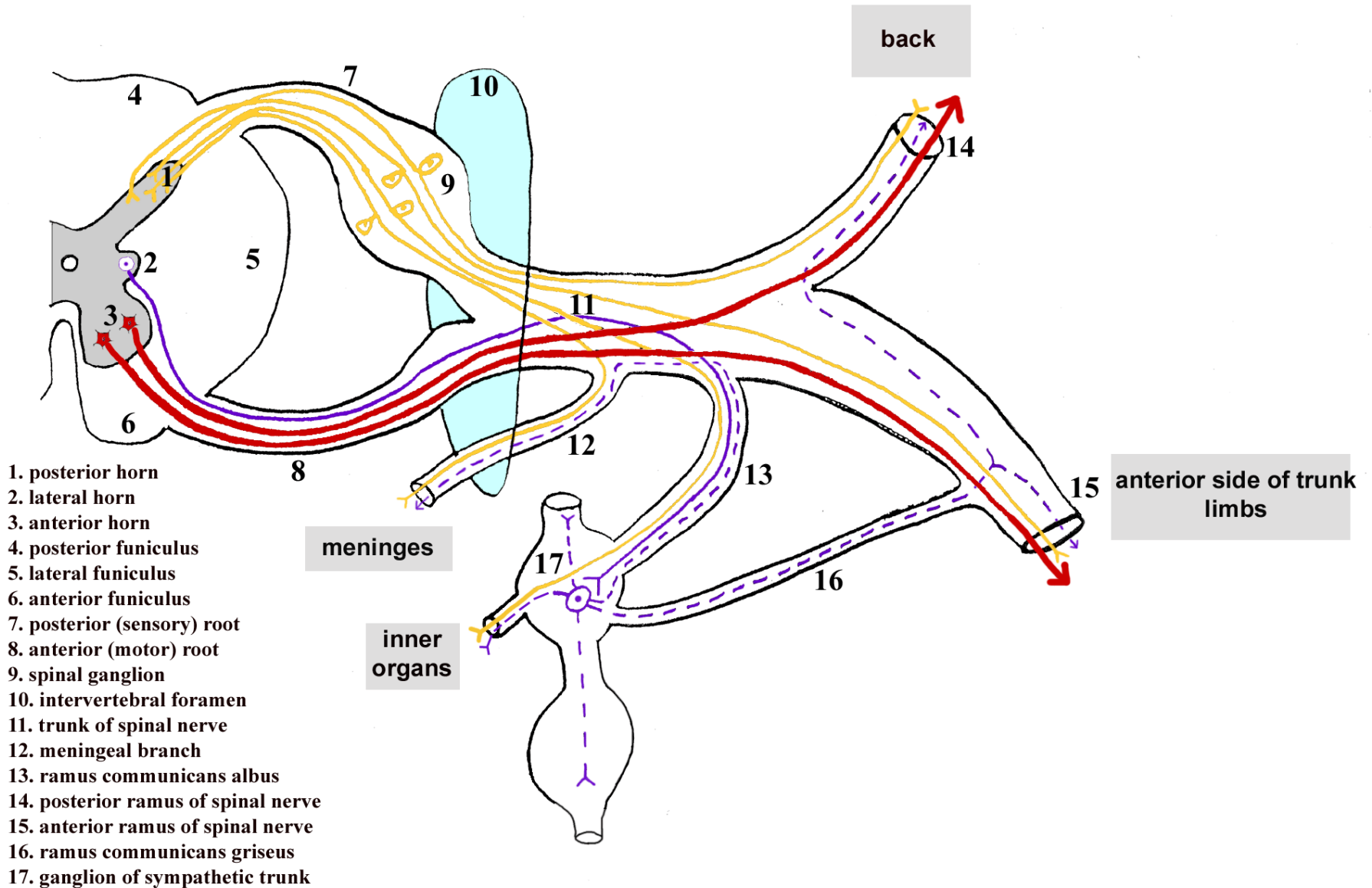
depends on prevailing if certain organ innervation

- **Vessels (arteriolae)** are innervated mainly by sympathetic part → stimulation of N-receptors in ganglia → *elevated transmission of impulse in postganglionic neuron* of sympathetic and followed *activation of sympathetic receptors ( $\alpha_1$ )* in corresponding effector cell → **elevation of blood pressure**
- **Heart (atria) + GIT** – parasympathetic tonus is prevailing tonus → stimulation of N-receptors in ganglia → *elevated transmission of impulse in postganglionic neuron* of parasympathetic and *activation of M receptors* → **elevated motility of GIT**
- **Stimulation of suprarenal glands** – *release of adrenaline and noradrenaline* → **clonus up to spasm of striated muscles**



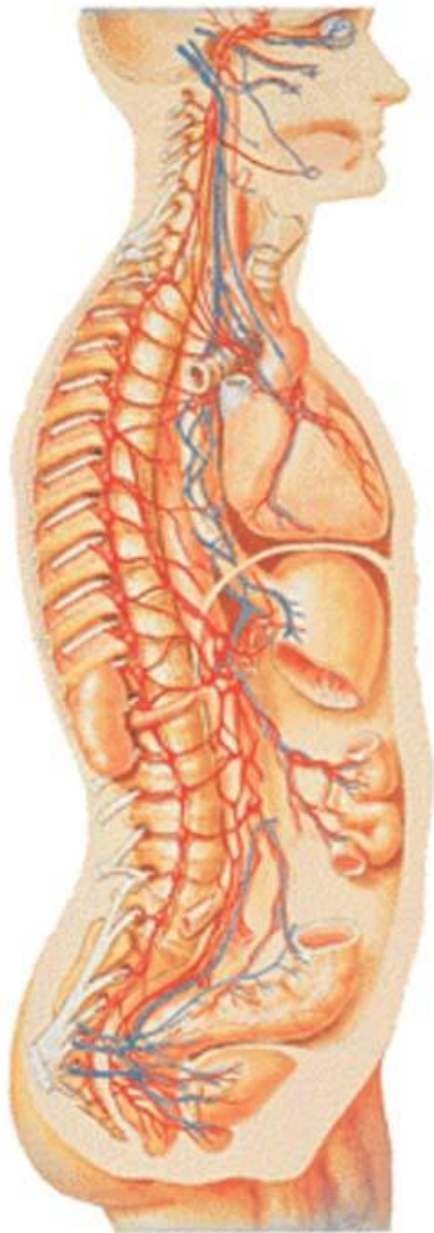


# SCHEME OF SPINAL NERVE BRANCHING

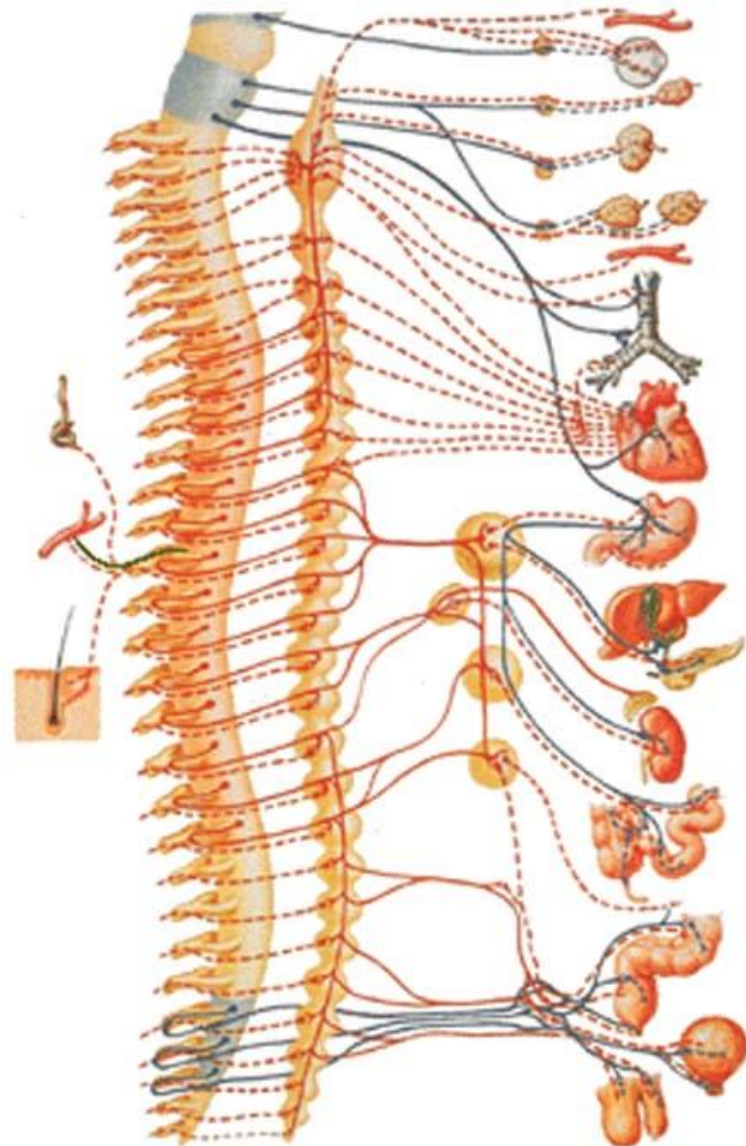


# **SYMPATHETIC PART**

„thoracolumbar system“



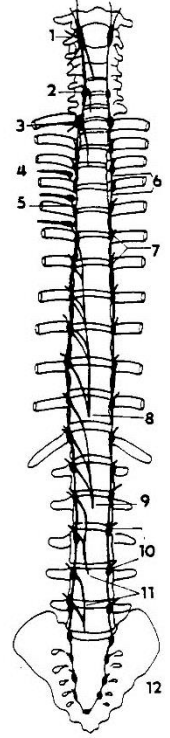
— Sympathetic fibers  
— Parasympathetic fibers



Sympathetic fibers	Presynaptic	<span style="color: red;">—</span>
	Postsynaptic	<span style="color: red;">- - -</span>
Parasympathetic fibers	Presynaptic	<span style="color: blue;">—</span>
	Postsynaptic	<span style="color: blue;">- - -</span>
	Antidromic conduction	<span style="color: green;">—</span>

# Truncus sympathicus

- ganglia trunci sympathici (21-25) = *paravertebral ganglia*
- rr. interganglionares
- rr. communicantes: albus + griseus
- topography: in front of vertebral column, on lateral sides of vertebrae within parietal fascia
  - spatium parapharyngeum (paraviscerale)
  - mediastinum superius, posterius inferius – in front of caput costae
  - retroperitoneally – medial to m. psoas major and to foramina sacralia anteriora



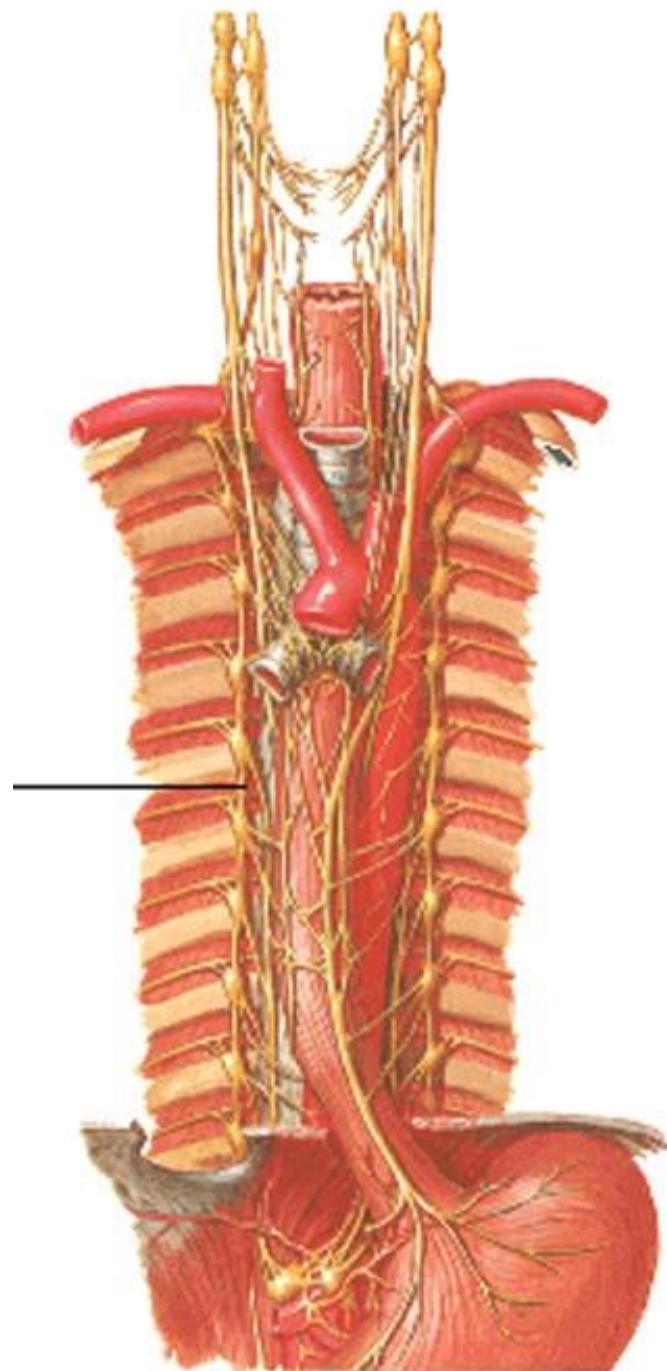
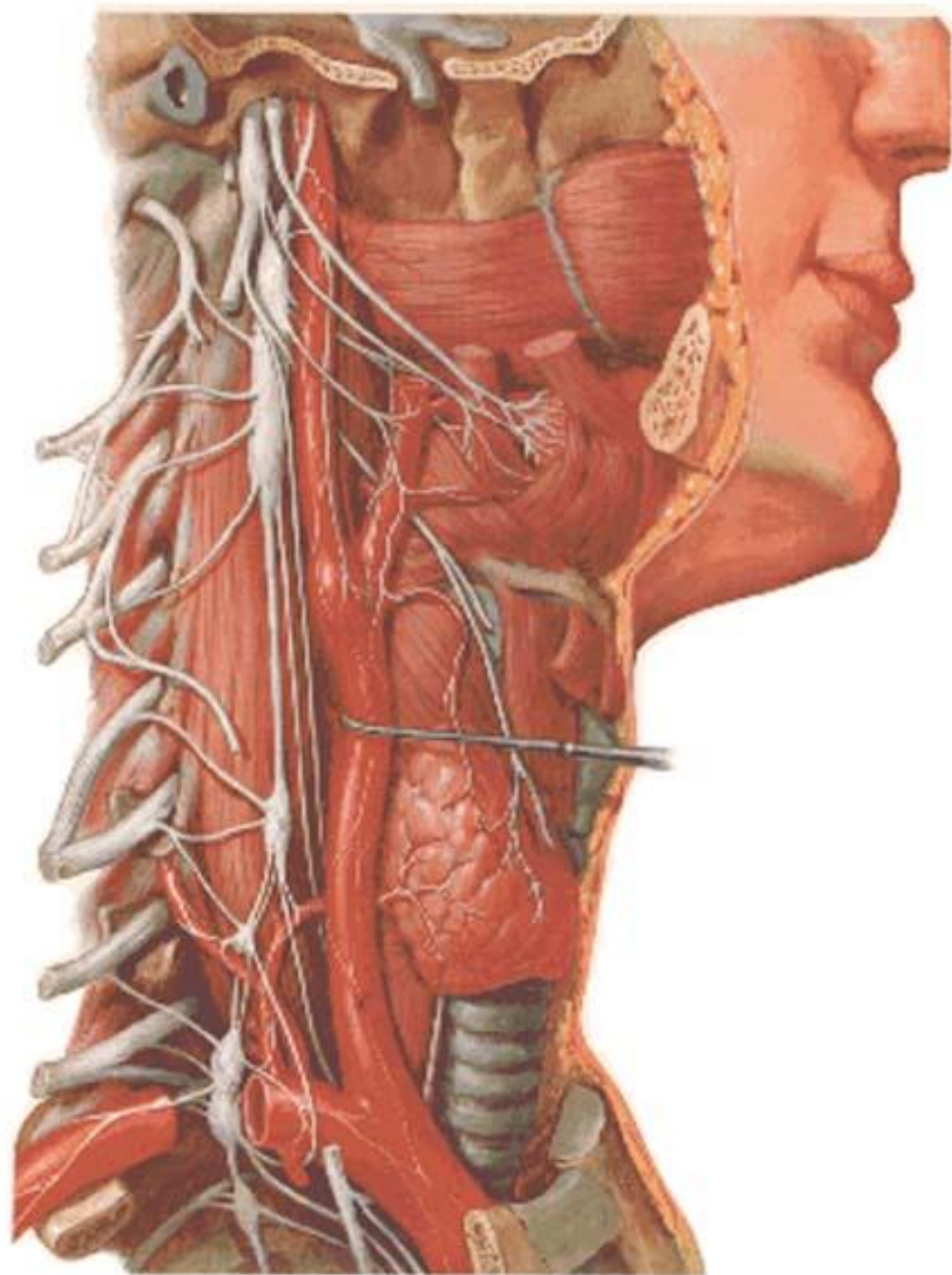


# Truncus sympathicus

- ganglion trunci sympathici (21-25) = *paravertebral ganglia*
- rr. intergaglionares
- rr. communicantes albus + griseus
- in front of vertebral column, on lateral sides of vertebrae within fascia
- spatium parapharyngeum (paraviscerale), mediastinum posterius, retroperitoneum

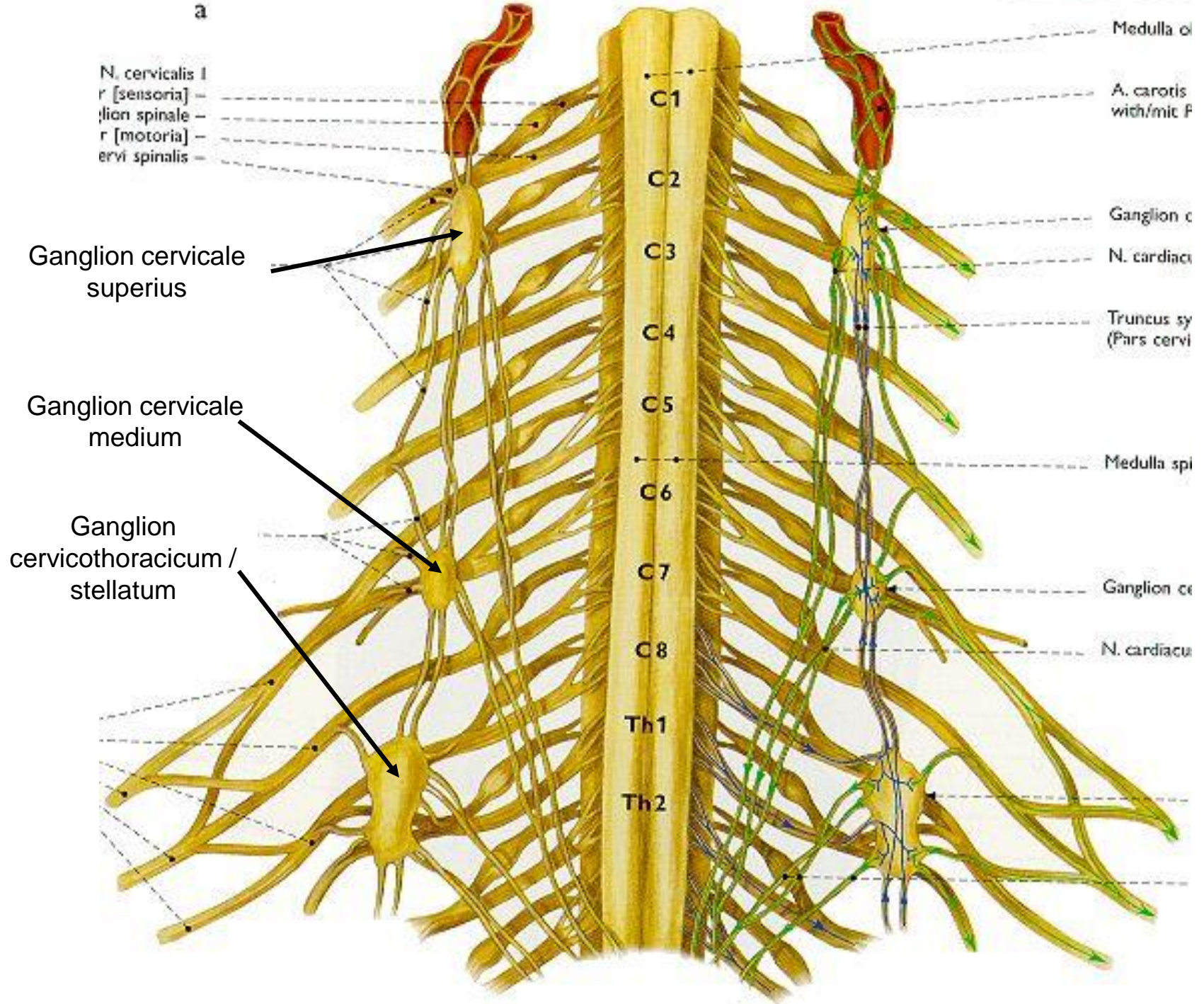
# Ganglion cervicale superius

- rr. comunicantes grisei do C1-4 (+ n. XII)
- n. jugularis do n. IX a n. X.
- n. caroticus internus → **plexus caroticus internus**
  - nn. caroticotympanici
  - n. petrosus profundus → (ggl. pterygopalatinum)
  - plexus ophthalmicus → (ggl. ciliare)
    - rr. orbitales → *m. orbitalis + mm. tarsales*
- n. caroticus externus → **plexus caroticus externus**
  - plexus a. meningae mediae → (ggl. oticum)
  - plexus a. facialis → (ggl. submandibulare)
- nn. laryngopharyngei → plexus pharyngeus
- n. cardiacus cervicalis superior → plexus cardiacus





a



N. cervicalis I  
r [sensoria]  
Ganglion spinale  
r [motoria]  
ervi spinalis

Ganglion cervicale  
superius

Ganglion cervicale  
medium

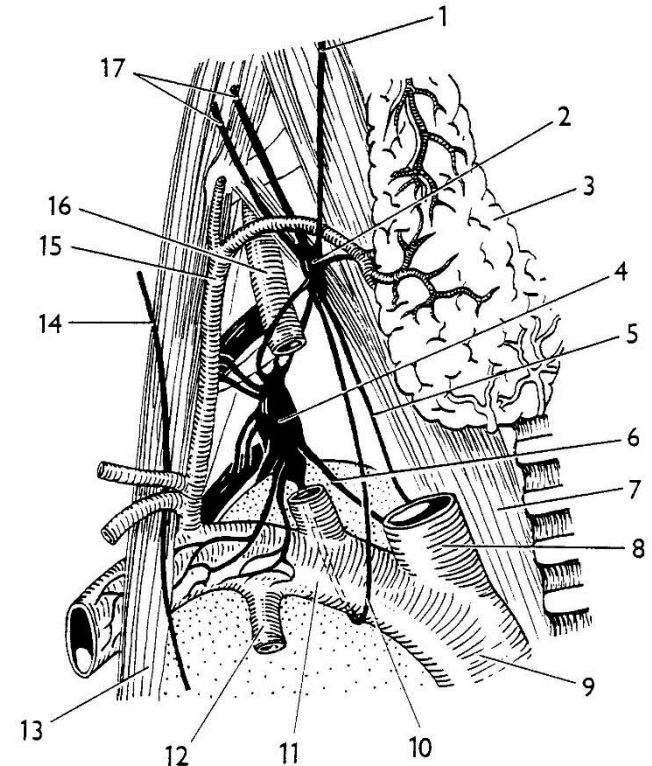
Ganglion  
cervicothoracicum /  
stellatum

C1  
C2  
C3  
C4  
C5  
C6  
C7  
C8  
Th1  
Th2

Medulla ol  
A. carotis  
with/mic F  
Ganglion c  
N. cardiaci  
Truncus sy  
(Pars cervi)  
Medulla spi  
Ganglion ce  
N. cardiacu

# Ganglion cervicale medium

- rr. comunicantes grisei into C5-6
- branches to plexus thyroideus inferior
- n. cardiacus cervicalis medius → plexus cardiacus
- ansa subclavia (*Vieussensi*)
  - loop to ggl. cervicothoracicum / stellatum in front of arteria subclavia





# Ganglion cervicothoracicum / stellatum

= ggl. cervicale inferius + thoracicum primum  
(90%)

← rr. communicantes albi from C8-T3

- rr. communicantes grisei into C7-T3
- plexus subclavius
- n. vertebralis → plexus vertebralis
- n. cardiacus cervicalis inferior → plexus cardiacus

# Claude Bernard-Horner's syndrome

- **Johann Friedrich Horner** (1831–1886)  
ophthalmologist, Switzerland
- **Claude Bernard** (1813–1878)  
physiologist, France



# Claude Bernard-Horner's syndrome

- **miosis (→ anisocoria)**
- **ptosis**
- **anhidrosis**
- **enophthalmus**

disturbance of cervical sympathetic system

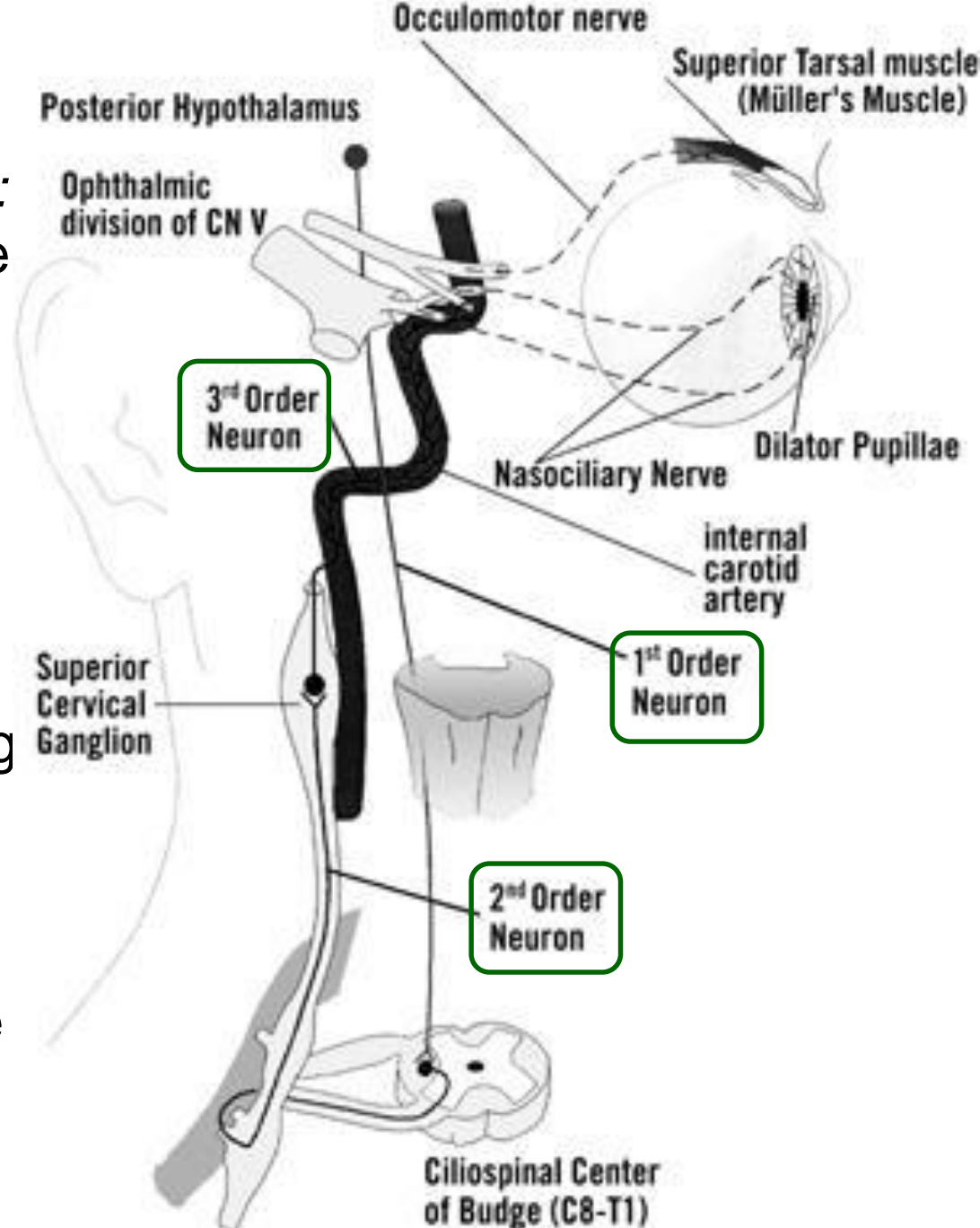


# Claude Bernard-Horner's syndrome

- in children (inborn Horner's syndrome) sometimes leads to a difference in eye color between the two eyes = *heterochromia*
- mnemonics „Horny **PAMELa**“  
for **P**tosis, **A**nhidrosis, **M**iosis, **E**nophthalmos  
and **L**oss of ciliospinal reflex
- **ciliospinal reflex** = dilation of the ipsilateral pupil on painful stimulation of the skin at the side of the neck

# CBH sy

- *First-order neuron disorder:* central lesions that involve the **hypothalamospinal pathway** (e.g. transection of the cervical spinal cord)
- *Second-order neuron disorder:* **preganglionic** lesions (e.g. compression of the sympathetic chain by a lung tumor)
- *Third-order neuron disorder:* **postganglionic** lesions at the level of the internal carotid artery (e.g. a tumor in the sinus cavernosus)



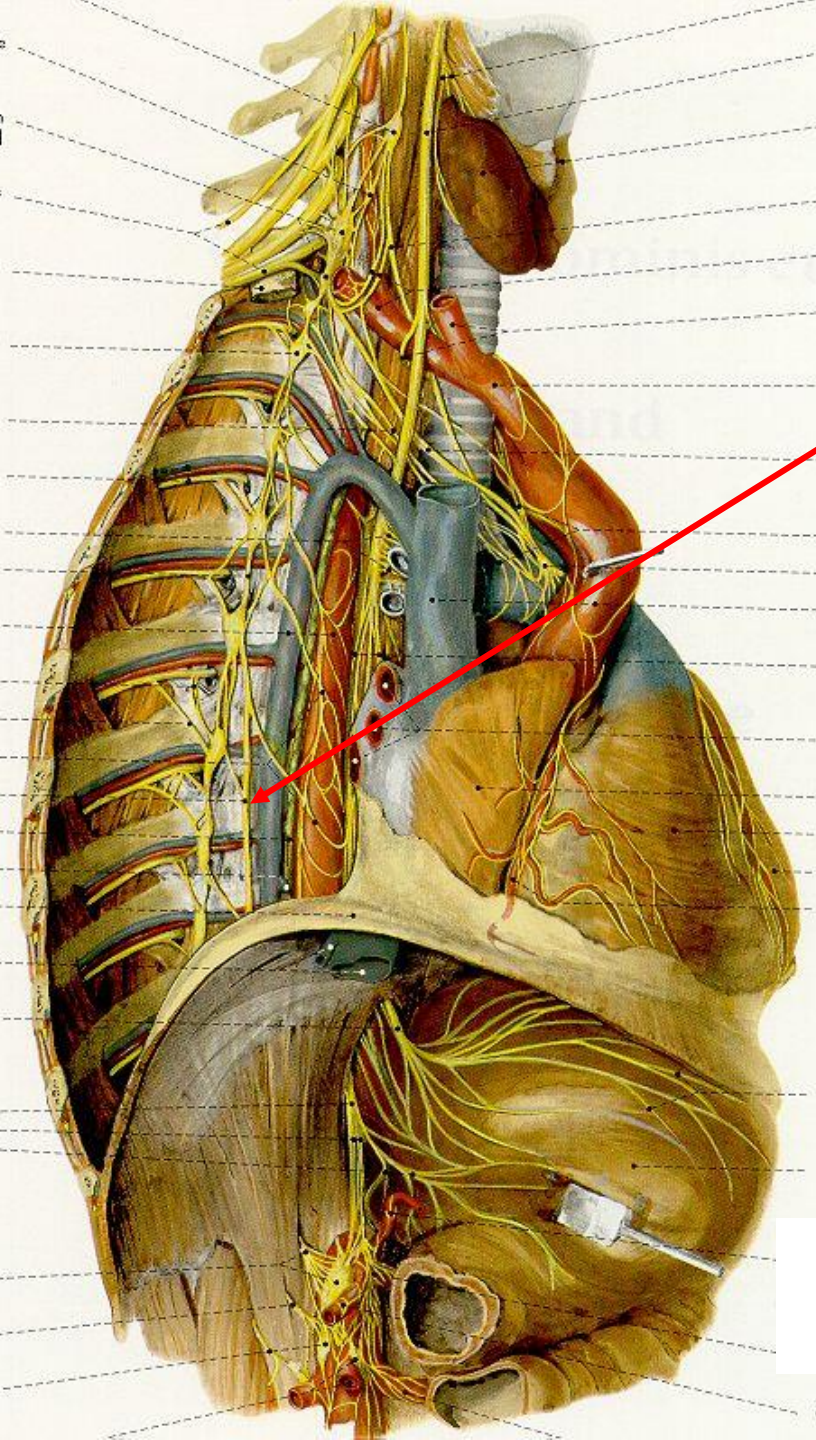
# Ganglia thoracica

10 pairs of ganglia (90 %) ← rr. communicantes albi

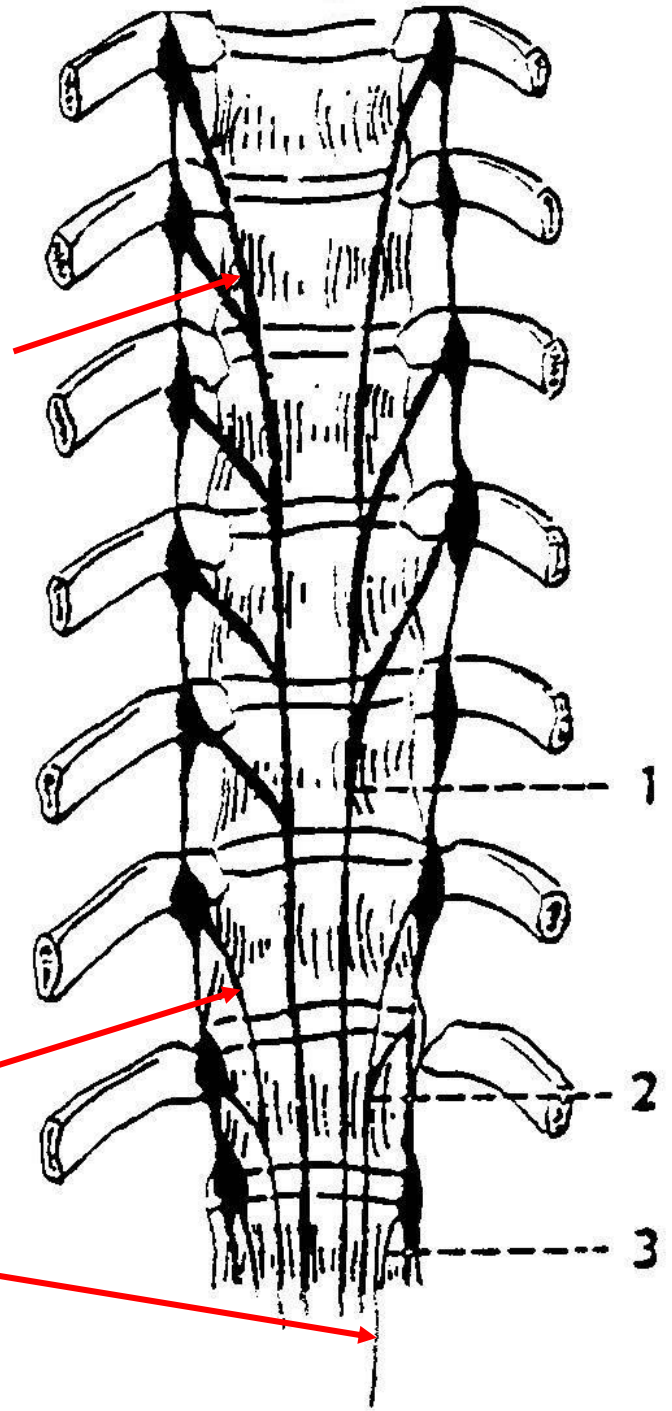
- rr. communicantes grisei into nn. intercostales
- rr. vaculares → plexus aorticus thoracicus
- nn. cardiaci thoracici from T2-T4(5)
- rr. pulmonales thoracici from T2-4
- rr. oesophageales
- n. splanchnicus thoracicus major from T5(6)-9 → ggll. coeliaca
- n. splanchnicus thoracicus minor from T10,11 → ggll. coeliaca
- n. splanchnicus thoracicus imus from T12 → ggll. aorticorenalia

ganglia thoracica splanchnica are inserted in nn. splanchnici on their way





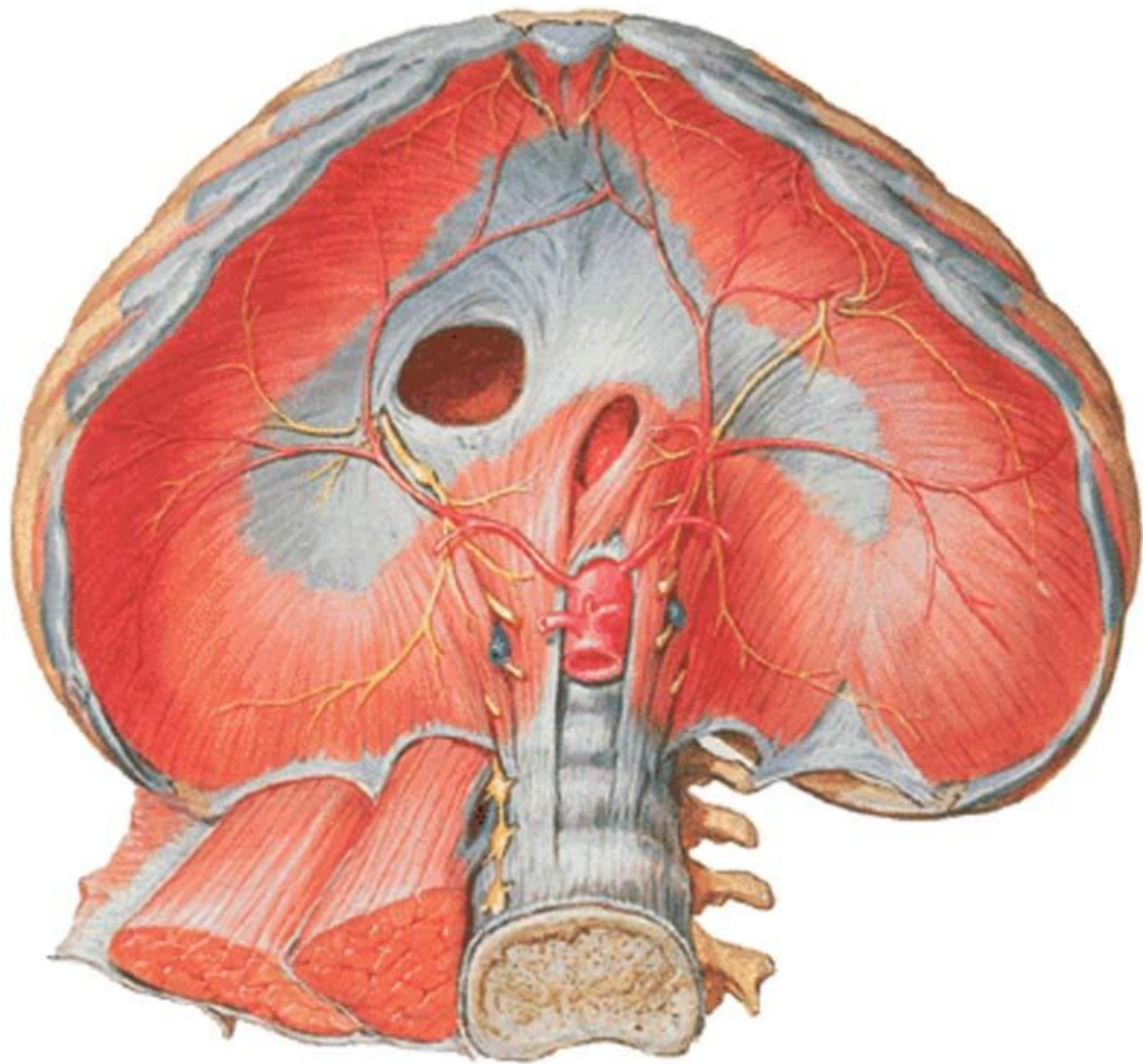
N. splanchnicus  
thoracicus  
**major** (T5/6-9)



N. splanchnicus  
thoracicus  
**minor** (T9-11)

N. splanchnicus  
thoracicus **imus**  
(T12)



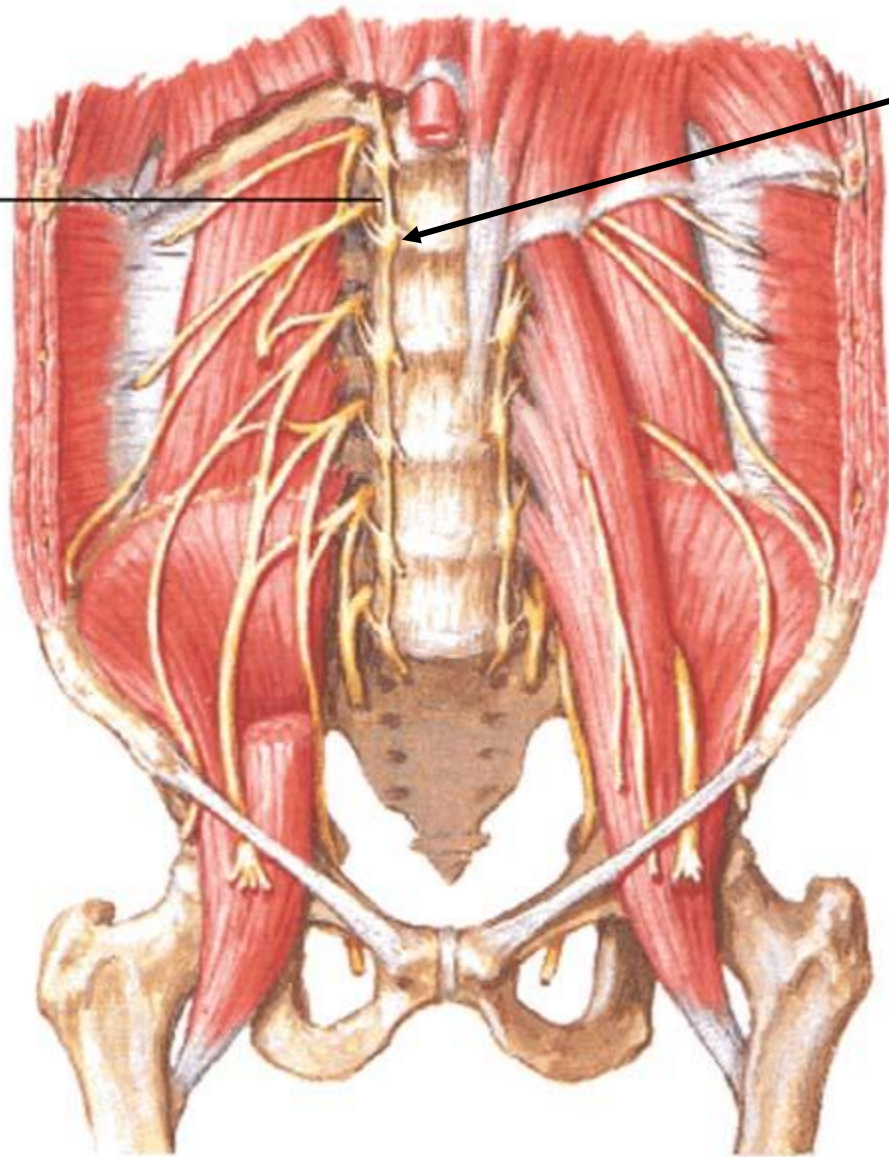


# Ganglia lumbalia

4-5 pairs of ganglia ← rr. communicantes albi  
from L1-3 into upper 3 ganglia

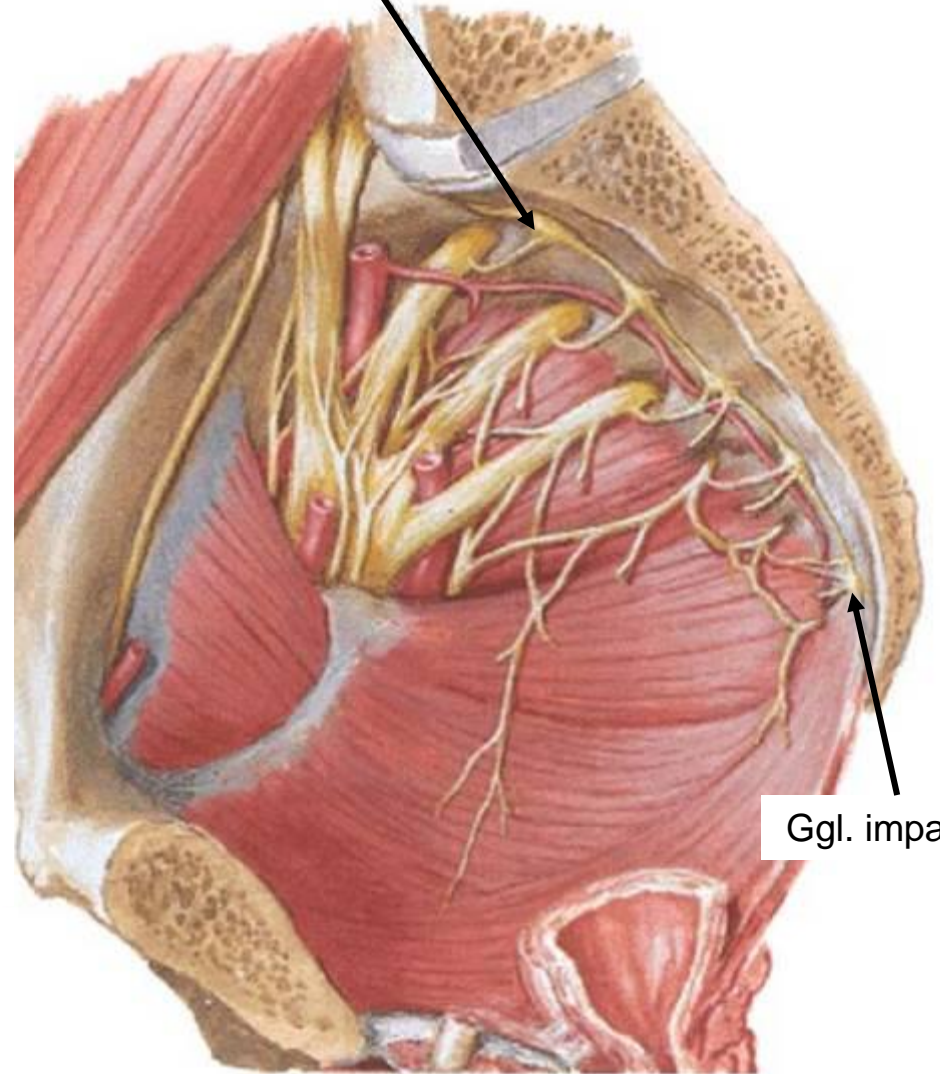
- rr. communicantes grisei → nn. spinales lumbales
- rr. vasculares → plexus aa. lumbalium
- n. splanchnici lumbales 1-3 → plexus aorticus abdominalis
- n. splanchnici lumbales 4-5 → plexus hypogastricus superior





Ggl. lumbale  
primum

Ggl. sacrale  
primum



Ggl. impar

# Ganglia sacralia

4 pairs of ganglia + unpaired ganglion impar

rr. communicantes grisei → nn. spinales  
sacrales

- rr. vasculares → plexuses around parietal branches from a. iliaca interna
- n. splanchnici sacrales S1-S4 → plexus hypogastricus superior

ansa sacralis – loop between ganglia sacralia quarta and ganglion impar

# Plexus aorticus abdominalis

**sympathetic fibers:** nn. splanchnici thoracici (major, minor, imus), lumbales 1-3

**parasympathetic fibers:** rr. coeliaci nn. vagorum

**mixed plexus** around aorta abdominalis + prevertebral ganglia

- paired **ggl. coelicum + ggl. aorticorenale**

- unpaired **ggl. mesentericum sup. + inf.**

→ along arteries → homonymous plexuses

- stomach → oral majority of rectum (**enteric system**), pancreas, liver

- spleen, suprarenal glands, kidneys, ureters, testes♂ / ovaries♀, uterine tubes (1/2) ♀

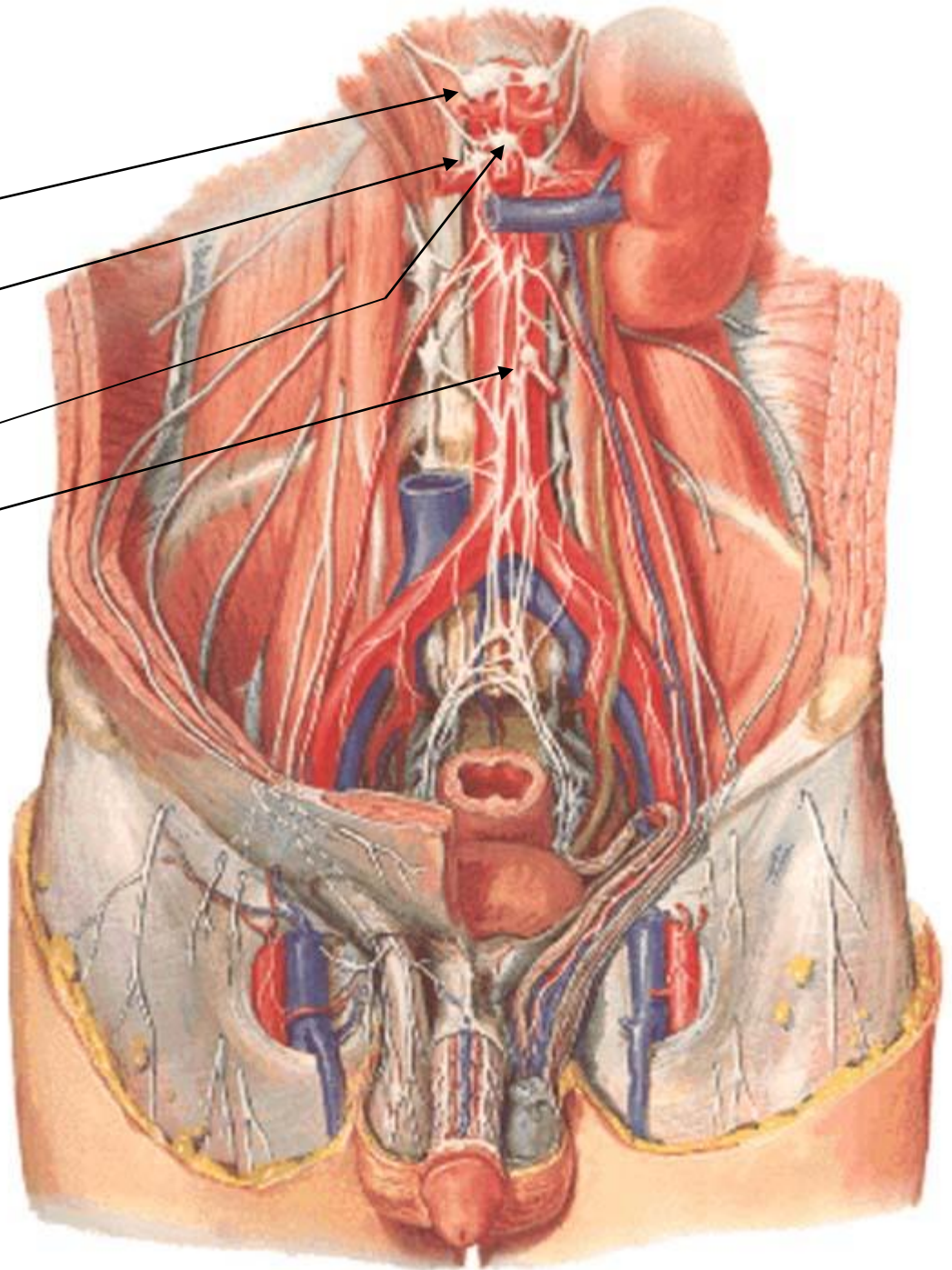


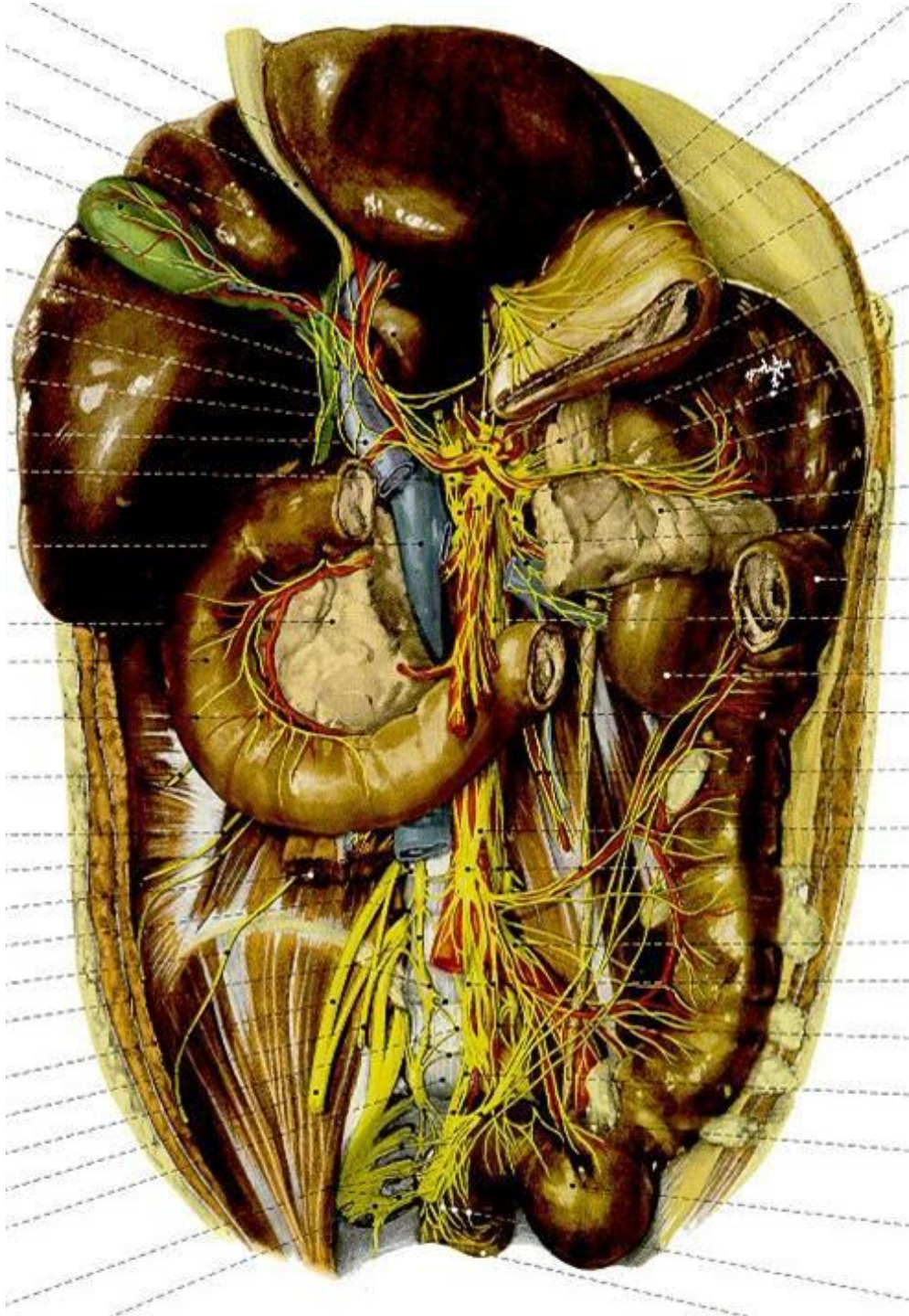
**ggl. coelicum**

**ggl. aorticorenale**

**ggl. mesentericum sup.**

**ggl. mesentericum inf.**



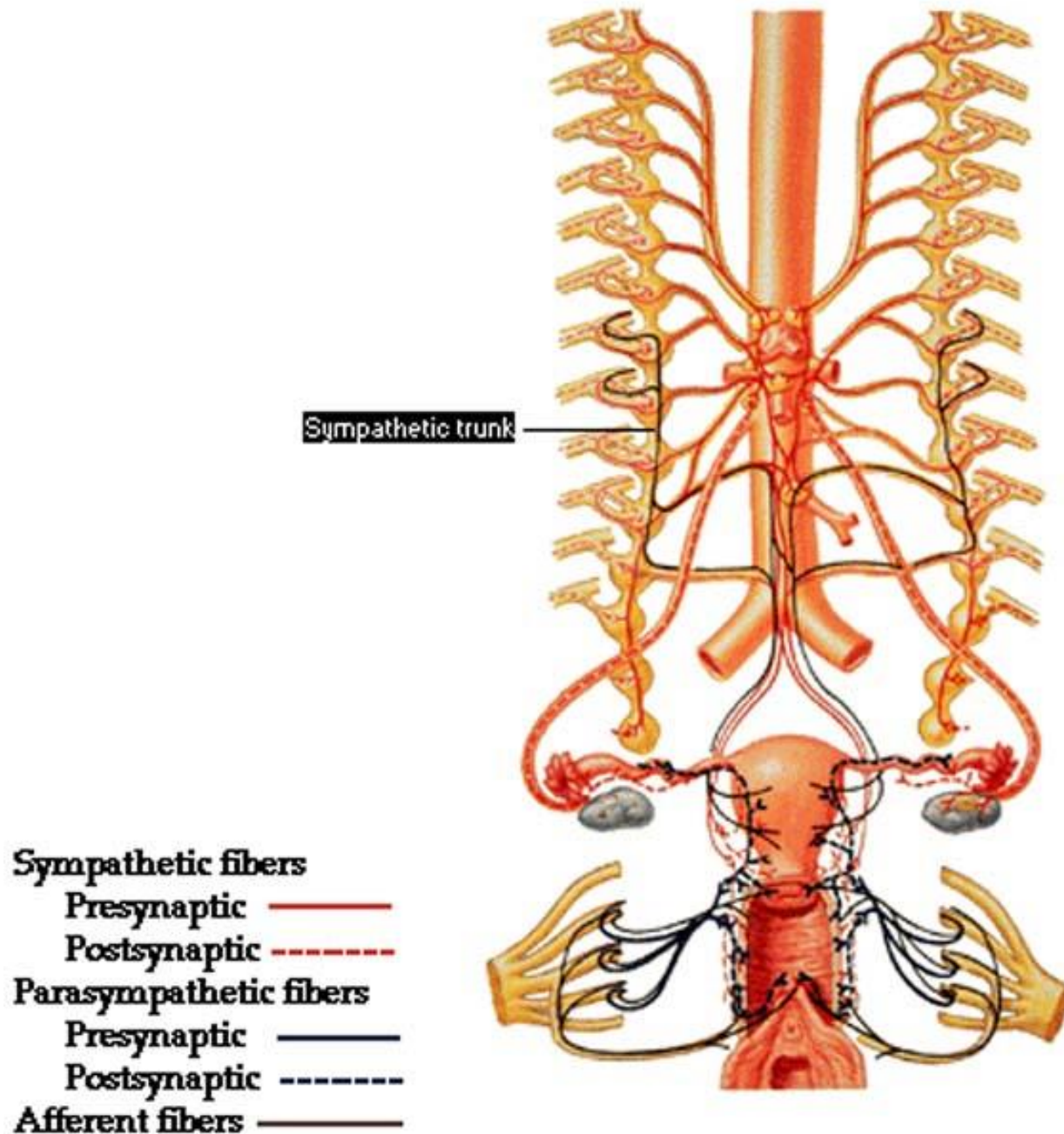


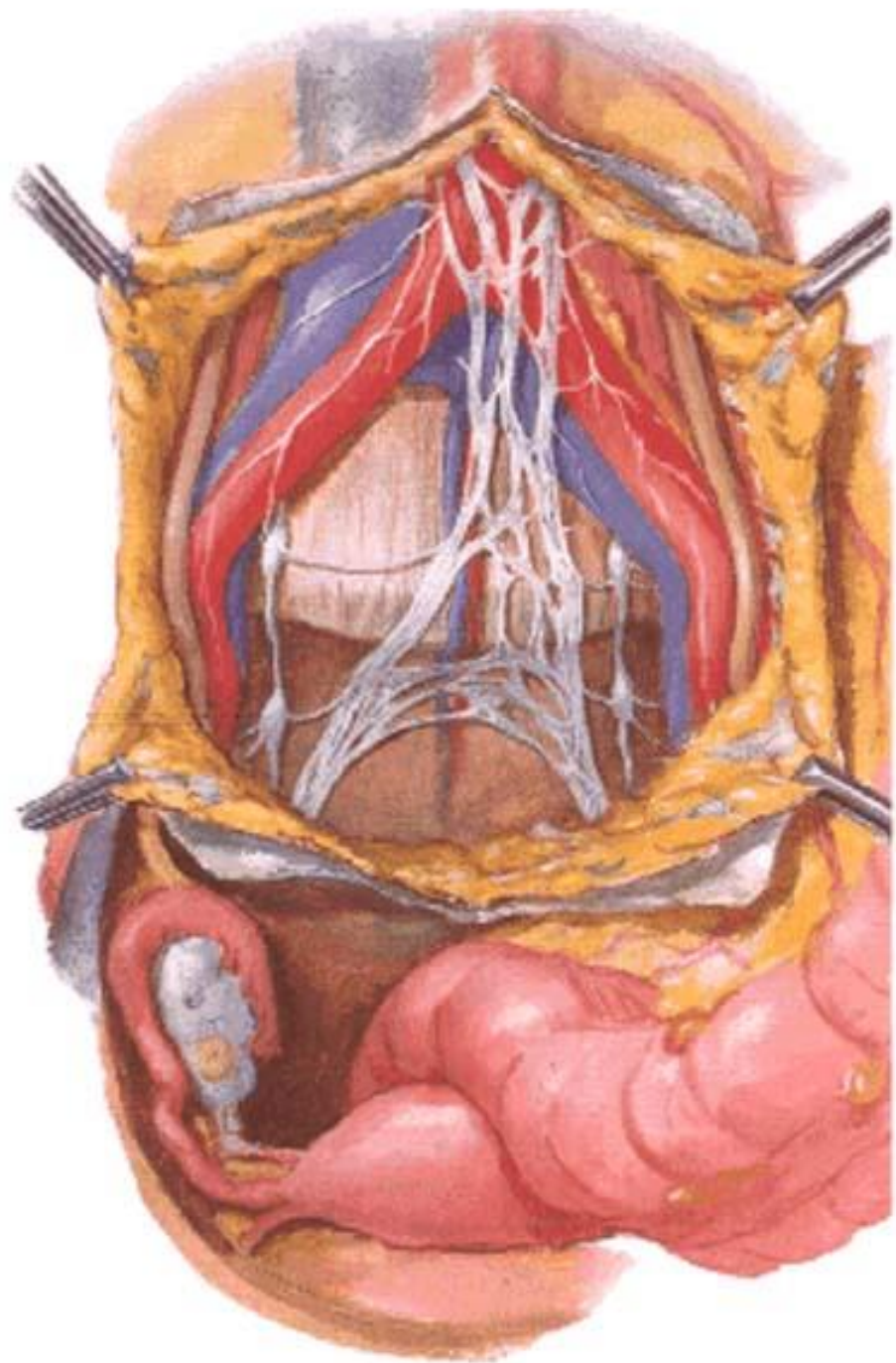
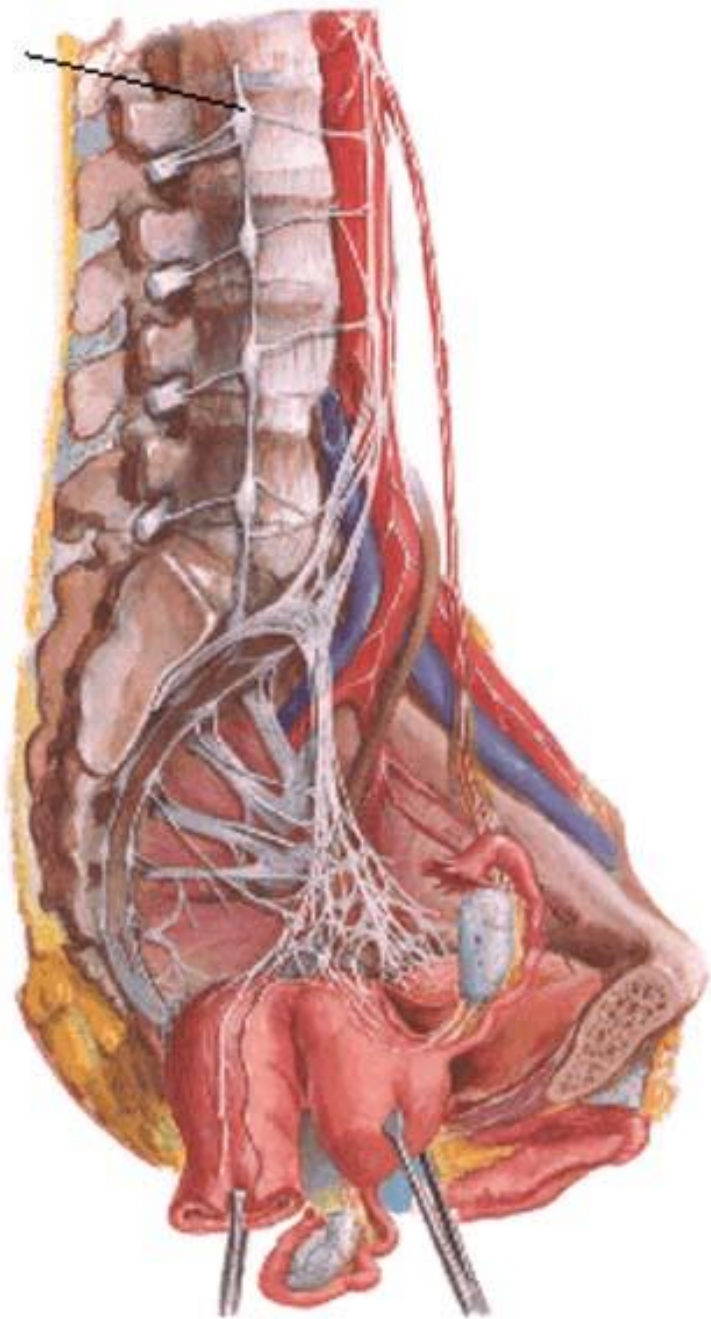


# Plexus aorticus abdominalis continuation

- **plexus hypogastricus superior** (pure sympathetic (from bifurcatio across promontorium)
  - n. hypogastricus dx. + sin. → **plexus hypogastricus inferior** s. pelvicus (mixed plexus) → pelvic organs except ovaries ♀, uterine tubes (1/2) ♀, fundus uteri ♀ and urinary bladder
- **plexus iliacus** dx. + sin. (pure sympathetic)
  - lower limb

# Innervation of Female Reproductive Organs

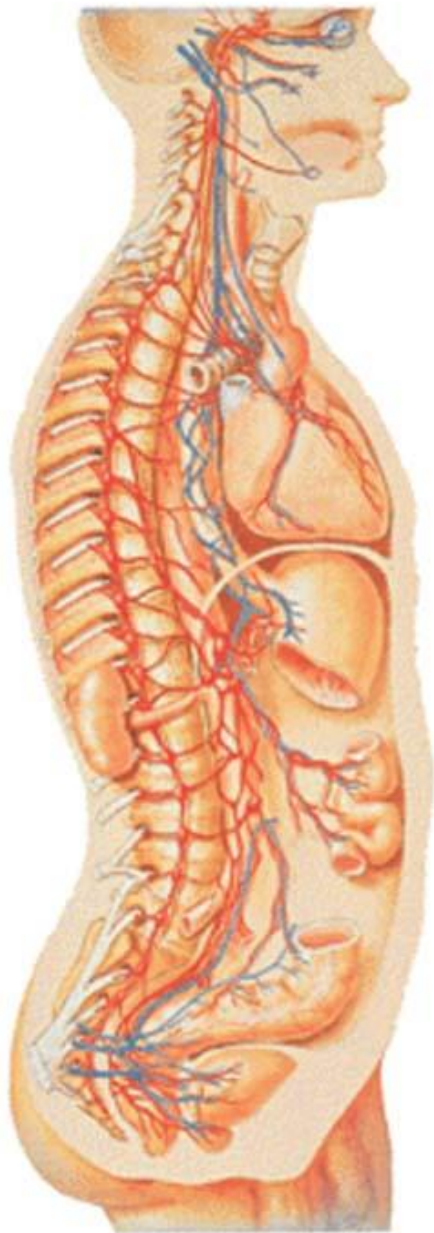




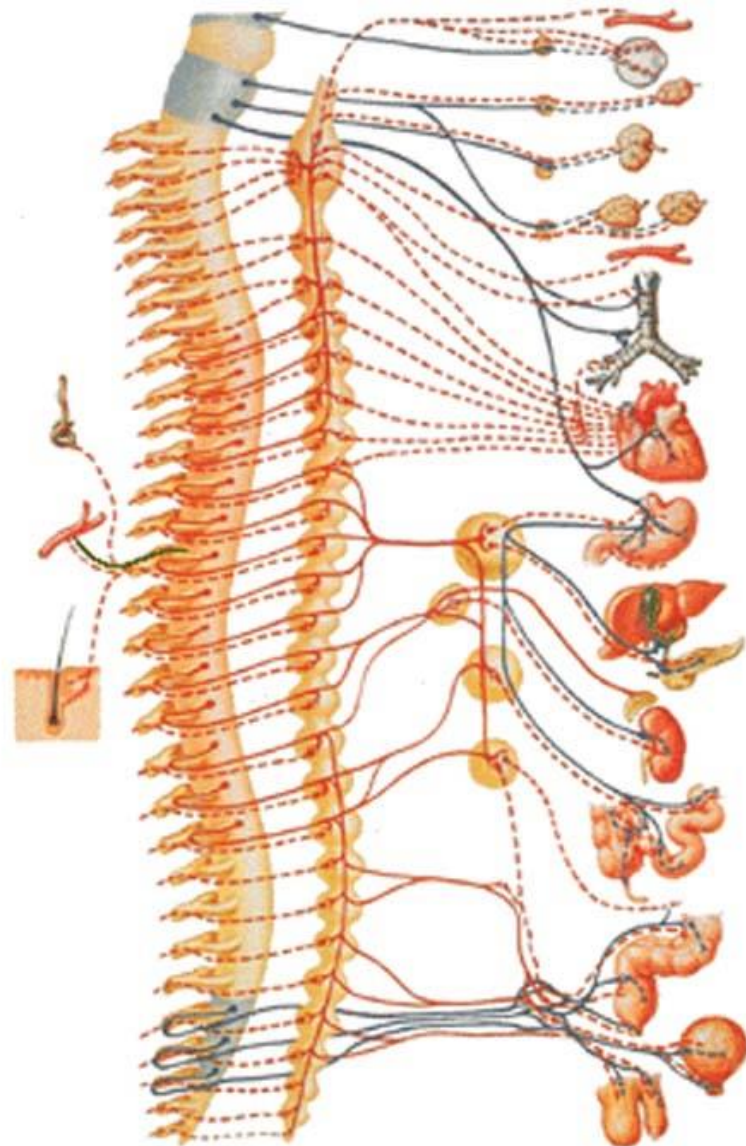
# PARASYMPATHICUS

„kraniosakrální systém“





— Sympathetic fibers  
— Parasympathetic fibers



Sympathetic fibers	Presynaptic	<span style="color: red;">—</span>
	Postsynaptic	<span style="color: red;">- - -</span>
Parasympathetic fibers	Presynaptic	<span style="color: blue;">—</span>
	Postsynaptic	<span style="color: blue;">- - -</span>
	Antidromic conduction	<span style="color: green;">—</span>

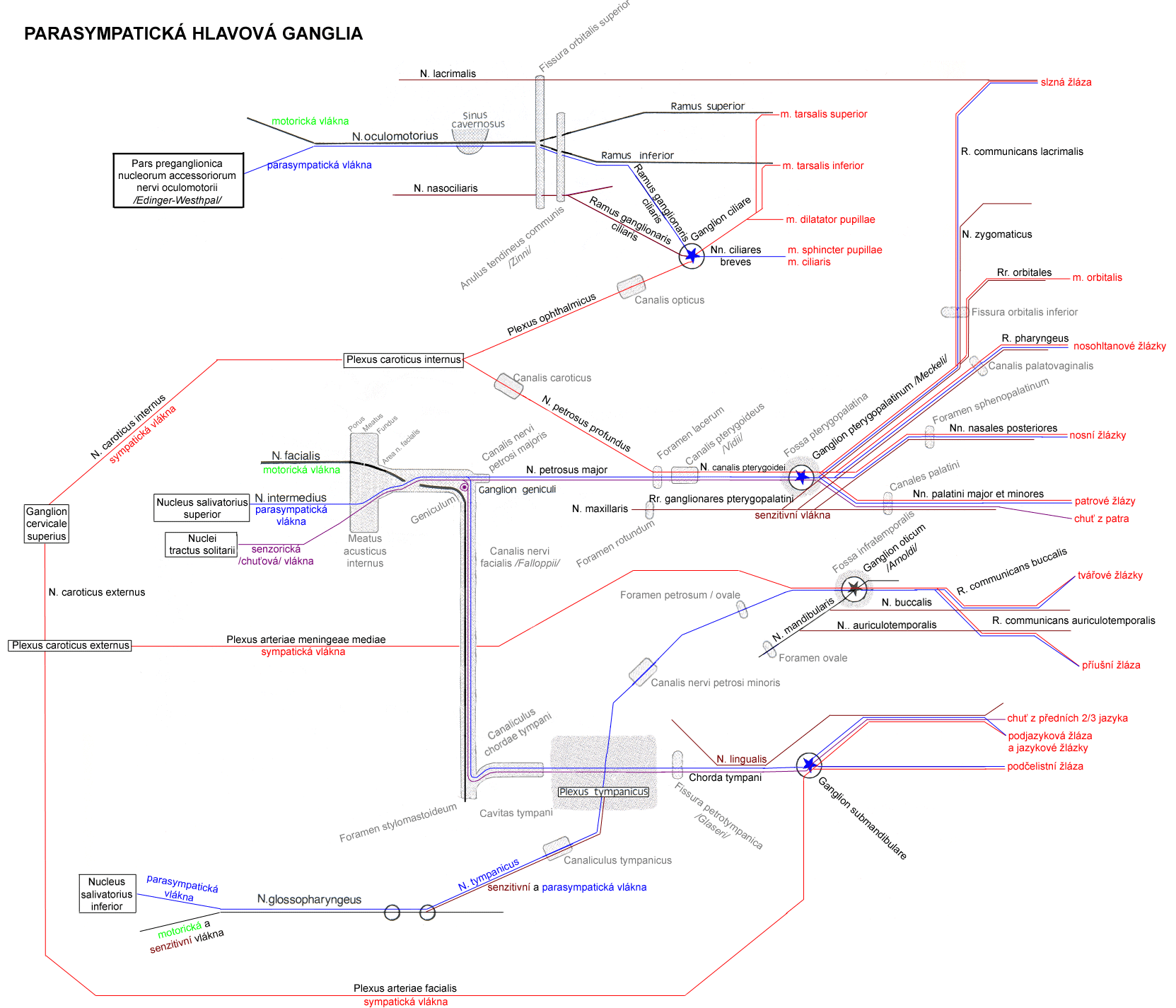
# Parasympathetic part = „craniosacral system“

- nuclei of cranial nerves
  - preganglionic part of ncl. accessorii n. III  
*Edinger-Westphal*
  - ncl. salivatorius superior (VII.)
  - ncl. salivatorius inferior (IX.)
  - ncl. posterior n. X
- ncl. intermediolateralis S2-4

ganglia situated within skull or within organs walls

ganglia situated close to effector organs

# PARASYMPATICKÁ HLAVOVÁ GANGLIA

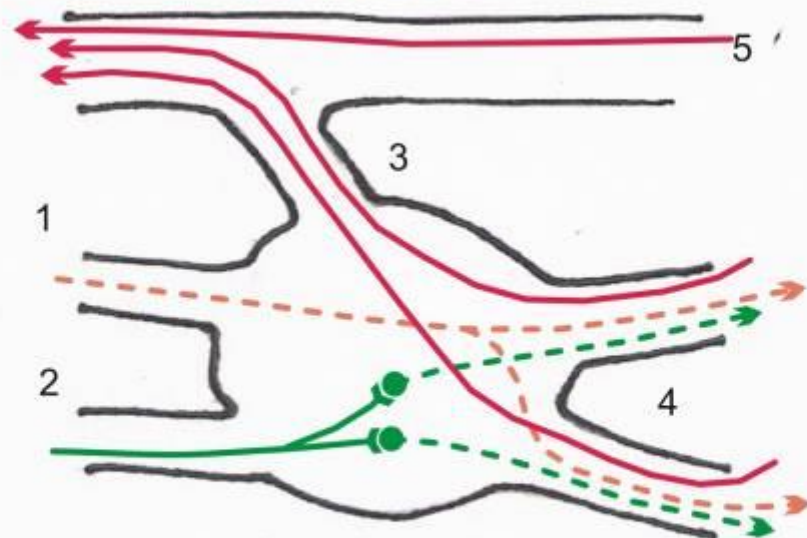




# General scheme of parasympathetic ganglion

- radix parasympathica
- radix sympathica
- radix sensoria

General scheme of the cranial parasympathetic ganglion (e.g. here ciliary ganglion)



- 1 - sympathetic root (here from plexus ophthalmicus)
- 2 - parasympathetic root (here from n. oculomotorius)
- 3 - sensory root (here to n. nasociliaris)
- 4 - efferent branches (here nn. ciliares breves)
- 5 - branch from n. trigeminus (here n. nasociliaris)

# Ganglion ciliare *Schacheri*

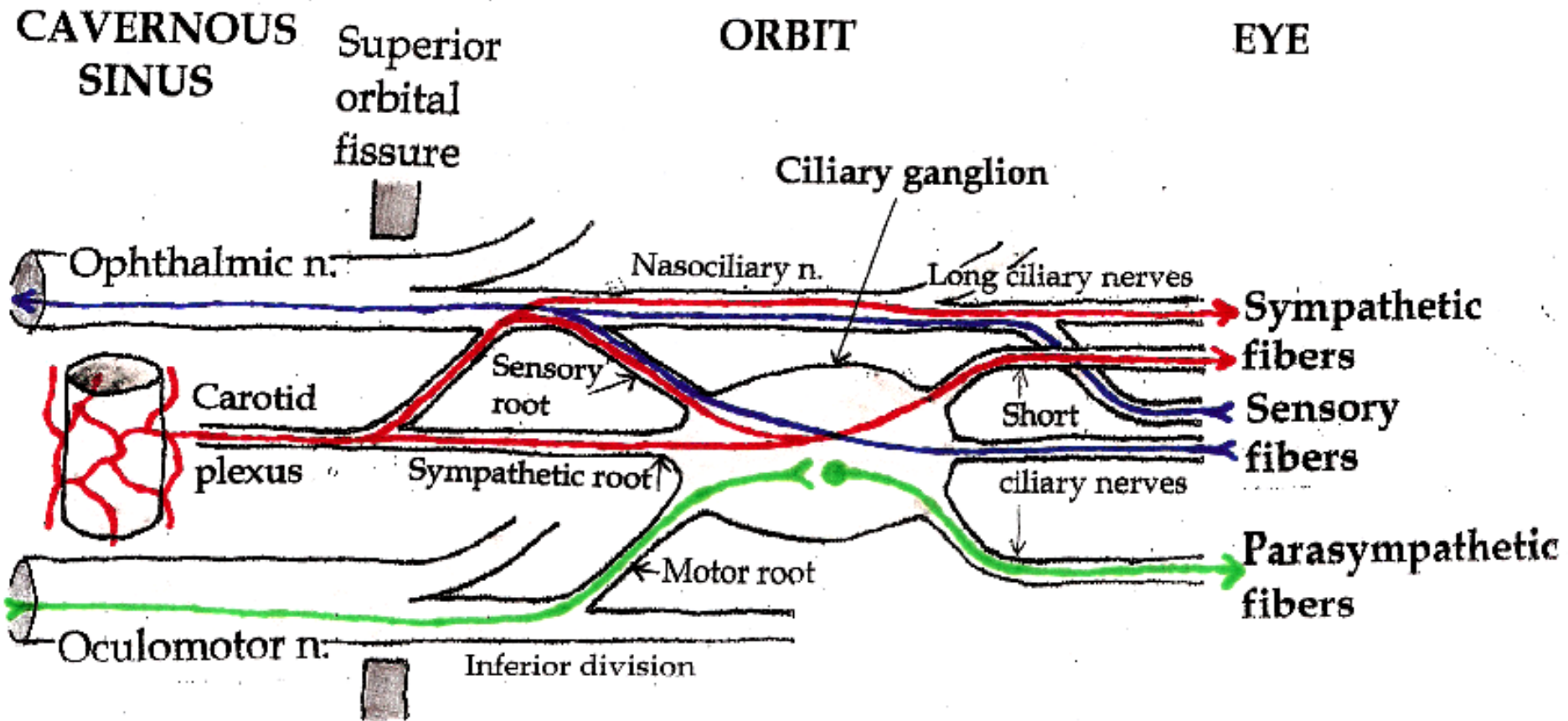
- orbit
- dorsally to bulbus oculi and laterally to n. opticus

AF-PS: preganglionic part of ncl. accessorii n. III  
*Edinger-Westphal* → n.III → ramus ganglionaris  
ciliaris

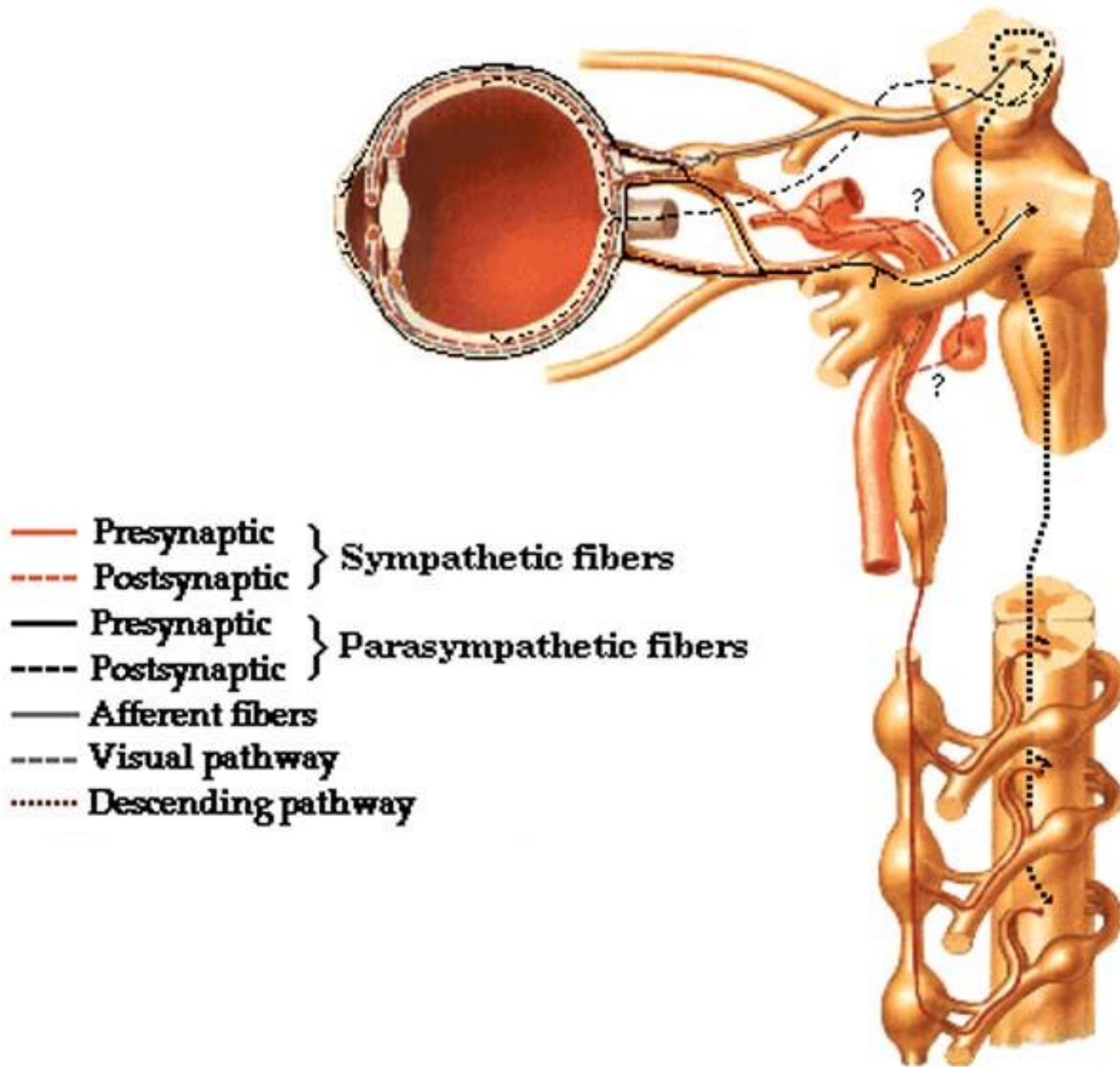
AF-S: ncl. intermediolateralis C8-T1 → ggl. cervicale  
superius → n. et plexus caroticus internus → plexus  
ophthalmicus (not synapsed)

EF: nn. ciliares breves (mixed) → m. ciliaris, m.  
sphincter pupillae, m. dilatator pupillae, m. tarsalis  
sup. + inf. (m. orbitalis)

# Ganglion ciliare Schacheri



# Ciliary Ganglion



# Ganglion pterygopalatinum *Meckeli*

- fossa pterygopalatina, below n. maxillaris

AF-PS: ncl. salivatorius superior (VII.) → n. VII → n. intermedius → n. petrosus major → n. canalis pterygoidedi *Vidii* (mixed) →

AF-S: ncl. intermediolateralis C8-T1 → ggl. cervicale superius → n. et plexus caroticus internus → n. petrosus profundus → n. canalis pterygoidedi *Vidii* (mixed) → (not synapsed in ganglion)

EF: → n. zygomaticus → r. communicans lacrimalis → **gl. lacrimalis**

EF: → rr. nasales posteriores → **gll. nasales**

EF: → nn. palatini major + minores → **gll. palatinae**

EF: → n. pharyngeus → **gll. nasopharyngeae**

# Ganglion submandibulare *Langleyi*

- trigonum submandibulare
- at crossing of n. lingualis and ductus submandibularis

AF-PS: ncl. salivatorius superior (VII) → n. intermedius → n. VII → chorda tympani → n. lingualis (from n.V3) → r. communicans lingualis

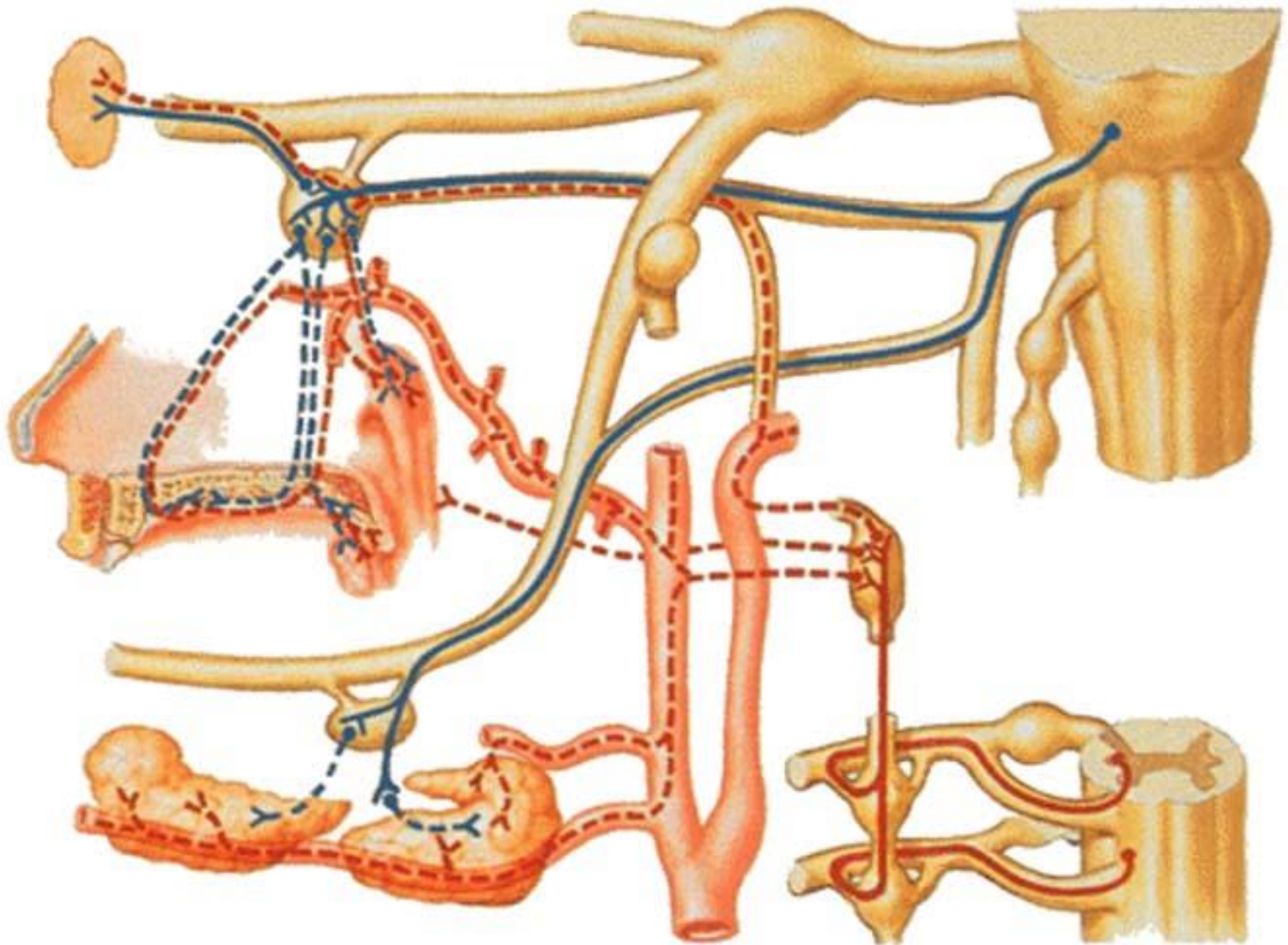
AF-PS: ncl. intermediolateralis C8-T1 → ggl. cervicale superius → n. et plexus caroticus externus → plexus a. facialis (not synapsed)

EF: n. lingualis → **gl. sublingualis + gll. linguales**

EF: rr. glandulares → **gl. submandibularis**



# Pterygopalatine and Submandibular Ganglia



— Sympathetic presynaptic fibers  
- - - Sympathetic postsynaptic fibers

— Parasympathetic presynaptic fibers  
- - - Parasympathetic postsynaptic fibers

# Ganglion oticum *Arnoldi*

- fossa infratemporalis, medially to n. mandibularis

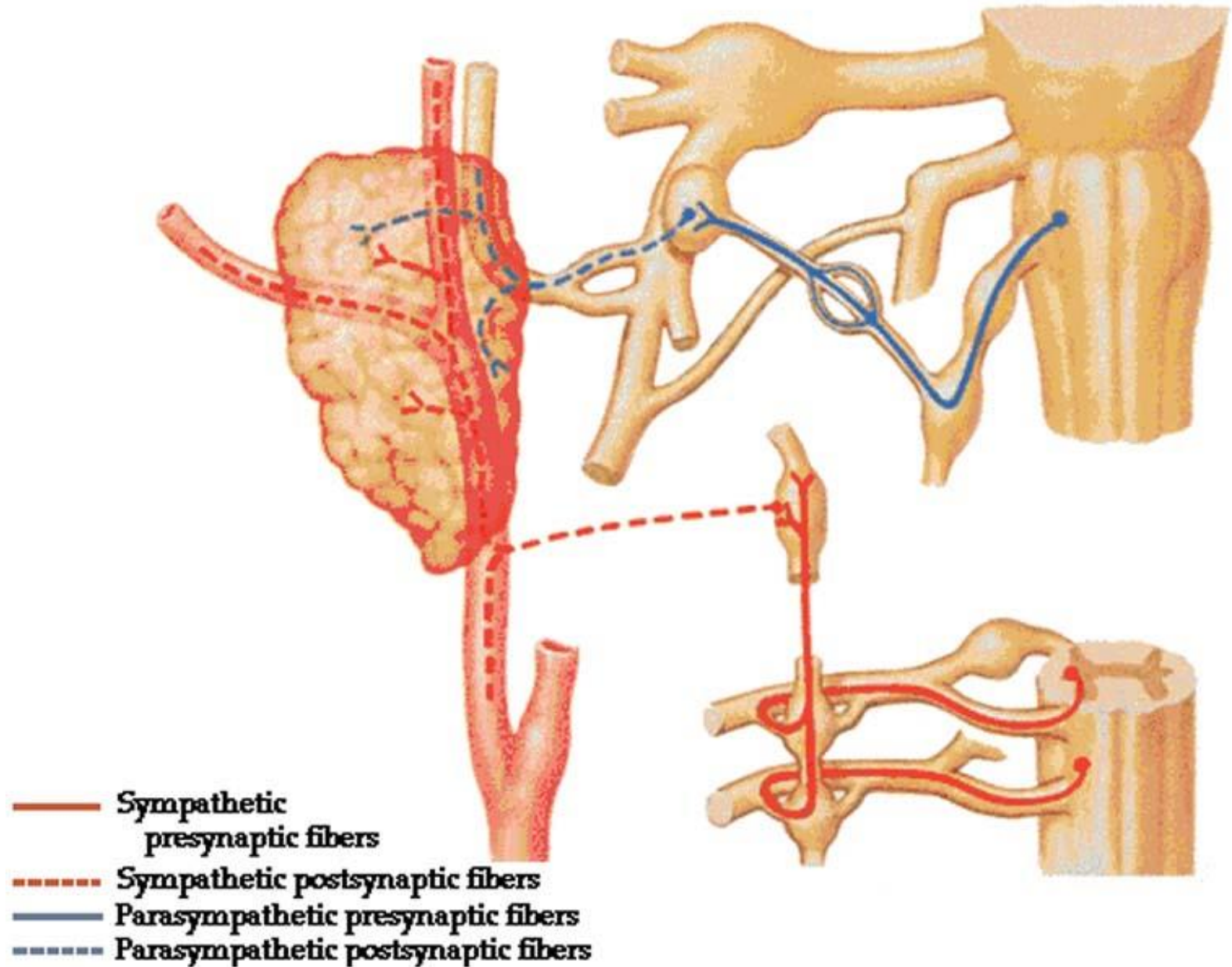
AF-PS: ncl. salivatorius inferior (IX.) → n. IX → n. tympanicus → plexus tympanicus → n. petrosus minor

AF-S: ncl. intermediolateralis C8-T1 → ggl. cervicale superius → n. et plexus caroticus externus → plexus a. meningeae mediae (not synapsed)

EF: r. communicans auriculotemporalis (mixed) → n. auriculotemporalis → **gl. parotidea**

→ r. communicans buccalis (mixed) → n. buccalis → **gll. buccales**

# Otic Ganglion



# Plexus hypogastricus inferior s. pelvicus

mixed plexus

AF-PS: nn. splanchnici pelvici S2-4 (*obsoletely nn. erigentes*)

AF-S: truncus sympathicus → plexus aorticus abdominalis → plexus hypogastricus superior → nn. hypogastrici

AF-S: truncus sympathicus → ganglia sacralia → nn. splanchnici sacrales

- pelvic organs except ovaries♀, uterine tubes (1/2)♀, fundus of uterus♀ and fundus of urinary bladder

EF (mixed): → plexus rectalis (aboral minority of rectum)

→ parasympathetic fibers ascend as orally as *Cannon-Böhm's* point = hindgut

→ plexus prostaticus + deferentialis♂ / uterovaginalis♀

→ plexus vesicalis

- m. sphincter urethrae (nucleus n. pudendi *Onufi* in spinal cord segments S2-4)

→ n. cavernosus penis ♂ / clitoridis ♀ (erectile bodies)

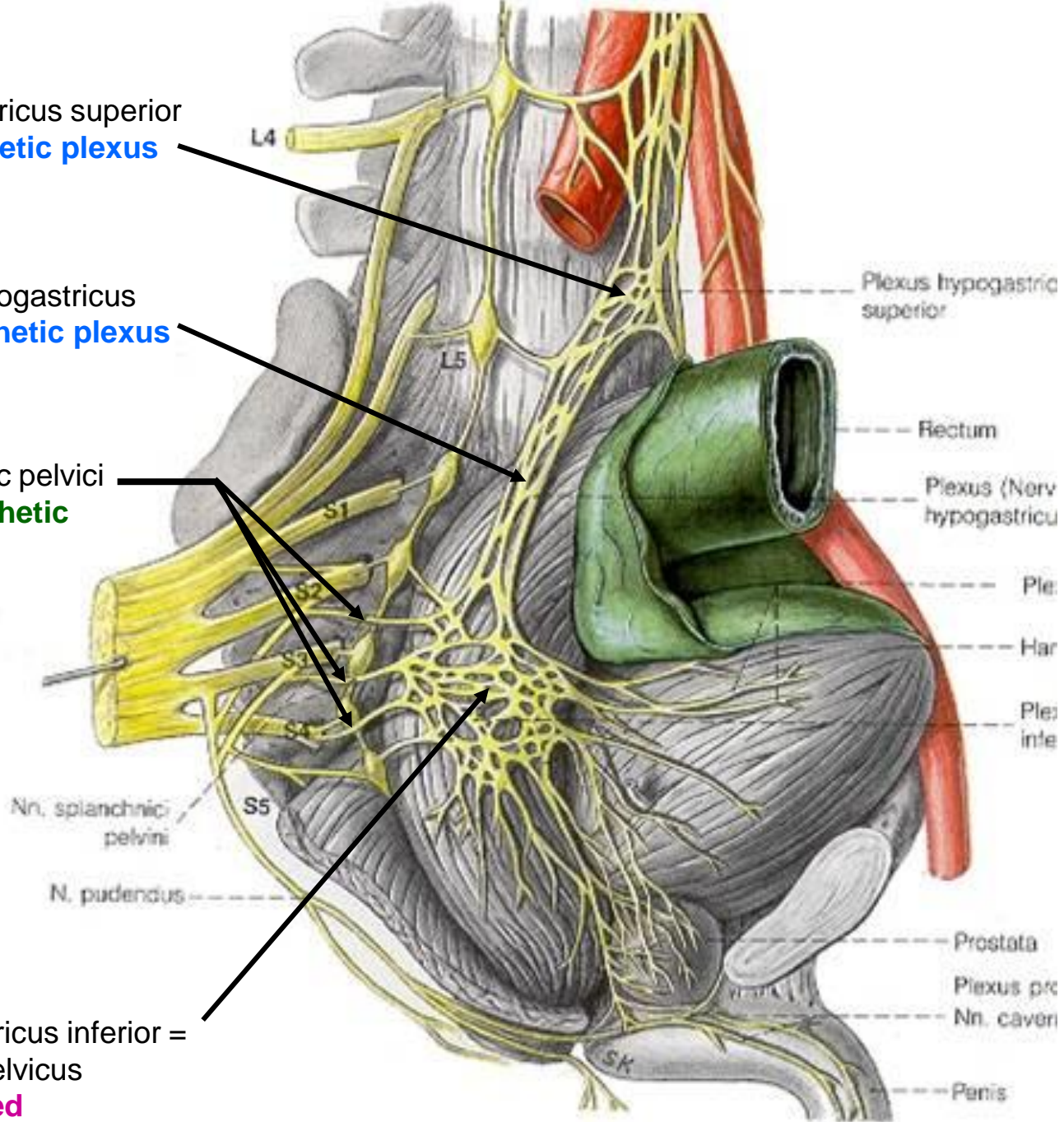


plexus hypogastricus superior  
**pure sympathetic plexus**

nervus hypogastricus  
**pure sympathetic plexus**

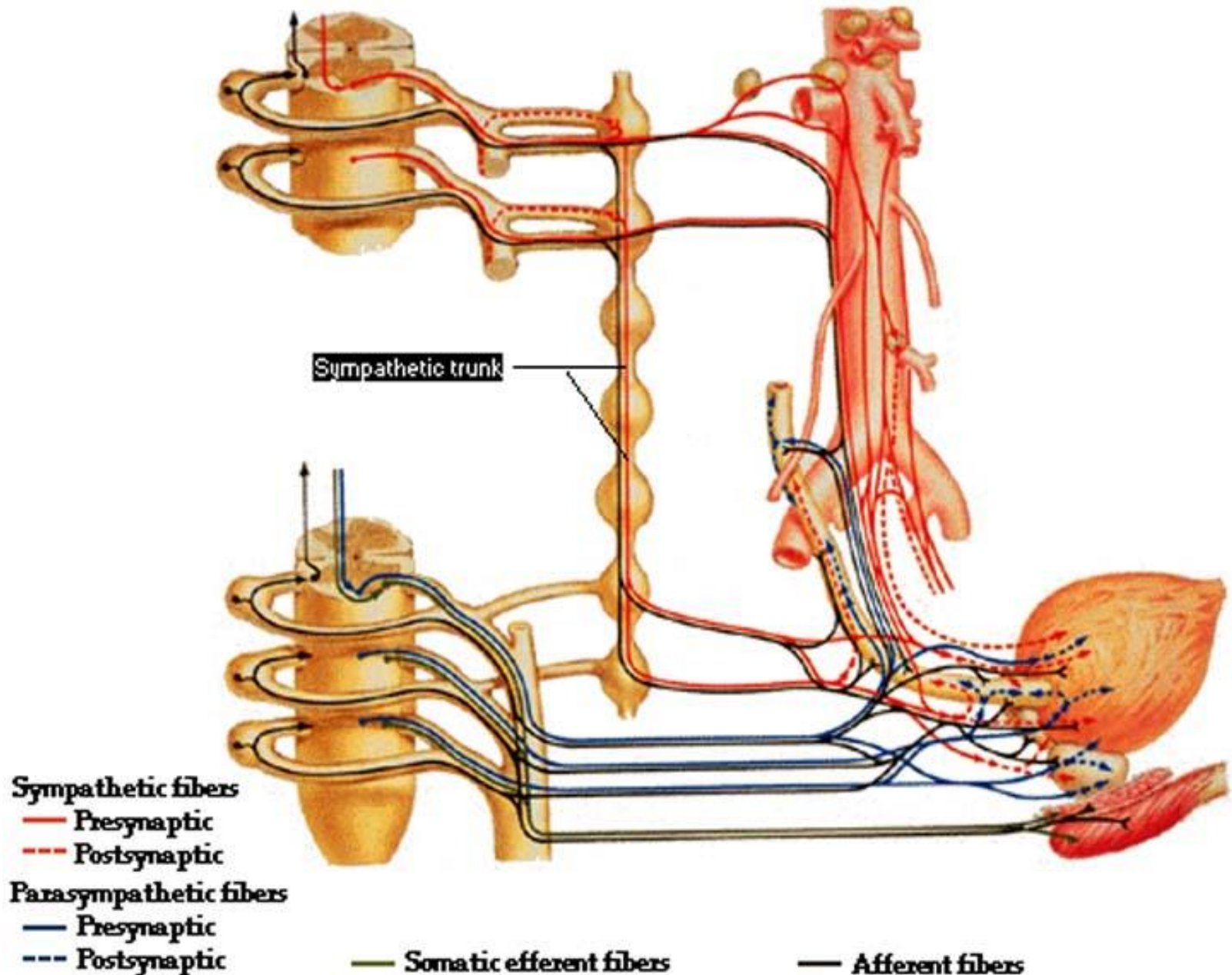
nervi splanchnici pelvici  
**parasympathetic**

plexus hypogastricus inferior =  
plexus pelvicus  
**mixed**

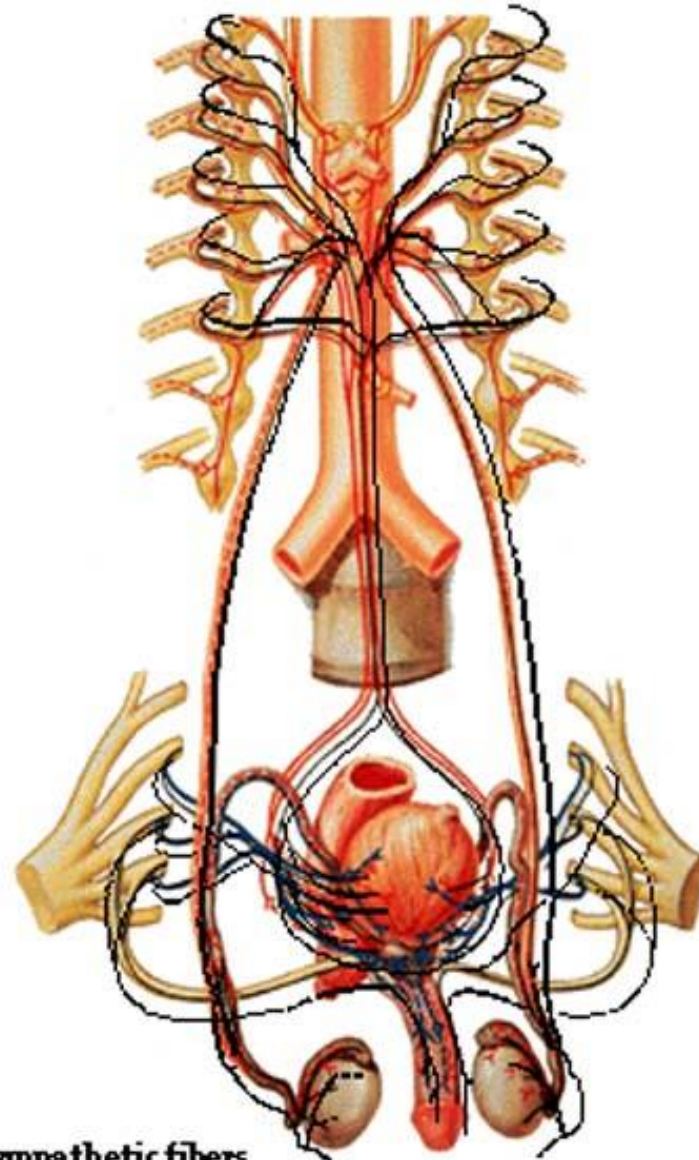




# Innervation of Urinary Bladder



# Innervation of Male Reproductive Organs



**Sympathetic fibers**

— Presynaptic

- - - Postsynaptic

**Parasympathetic fibers**

— Presynaptic

- - - Postsynaptic

— Afferent fibers

# Paraganglia

- **chromafine** (*paraganglia sympathica*)
  - paraganglion aorticum abdominale *Zuckerkandli*
  - glomus coccygeum *Luschkae*
  - glomus jugulare, tympanicum...
- **without chromafine reaction** (*former paraganglia parasymphathica*)
  - baro- a chemoreceptors
  - glomus caroticum
  - glomus supracardiacum (aorticum)

# Enteric system

cardia of stomach → upper margin of m. sphincter ani internus, biliary ducts and gallbladder, pancreas

- **plexus myentericus *Auerbachii***
- **plexus submucosus *Meissneri***
- ganglia within the intestinal wall
- fibers
  - visceromotor sympathetic + parasympathetic
  - viscerosensory via both systems + reflectory ones
- **Cajal interstitial cells**
  - pacemaker of intestinal muscle layers

# CNS

- highest autonomic center = **hypothalamus**
- controlled by limbic system (insula)
- nuclei influenced by reticular formation (reflexes)