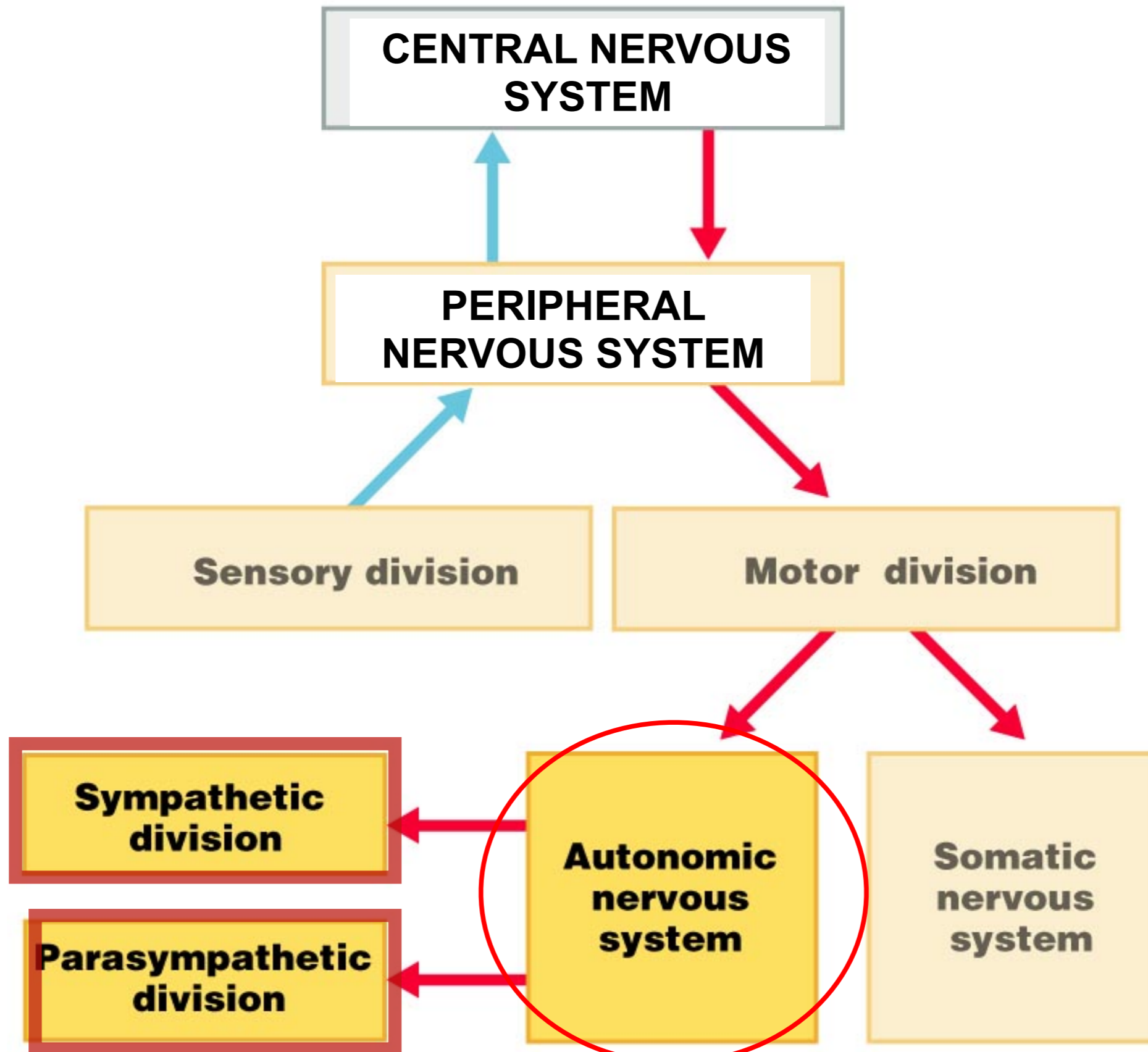
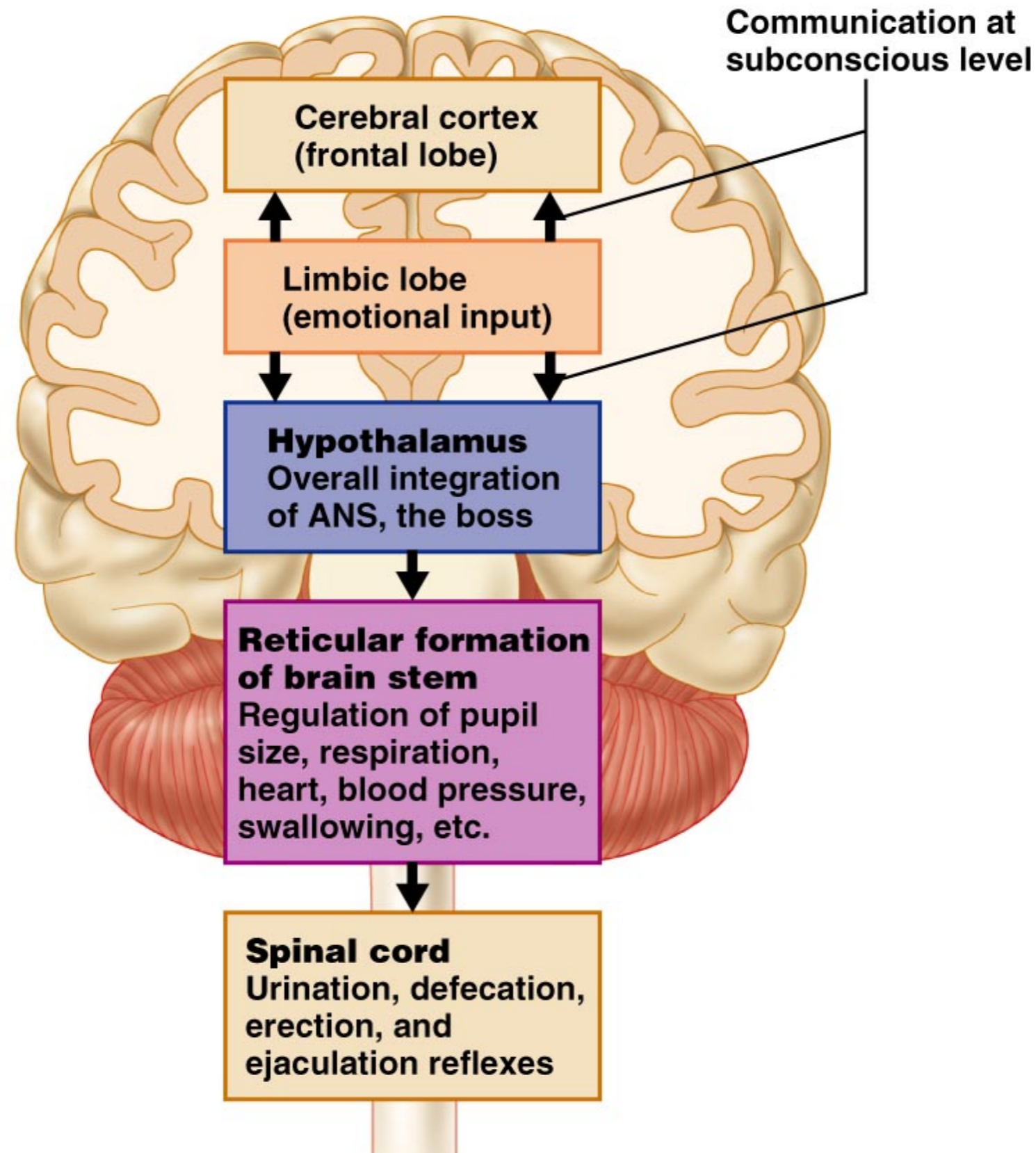


AUTONOMIC NERVOUS SYSTEM

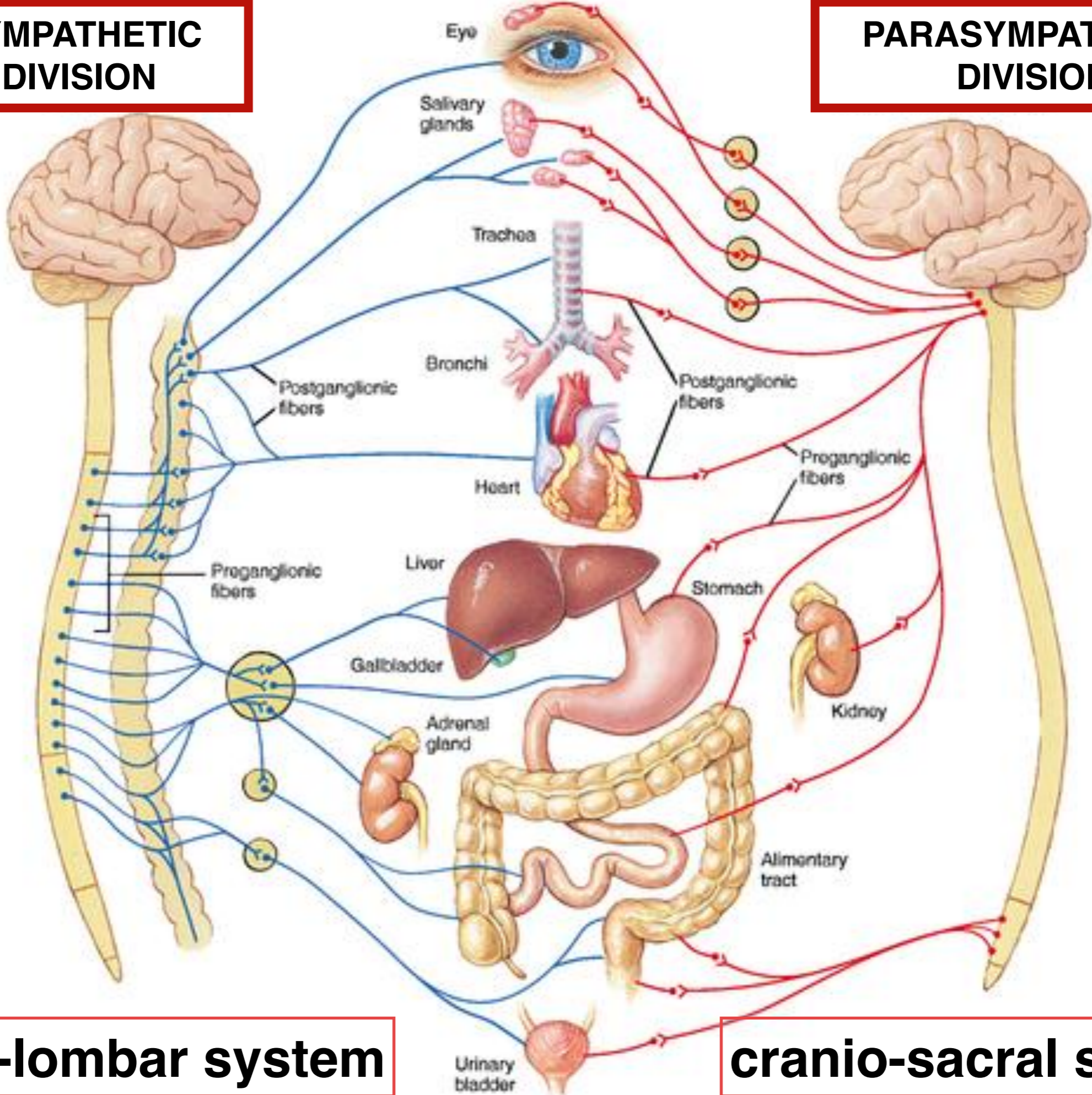


The Autonomic Nervous System (ANS) is under control of the Central Nervous System (CNS)



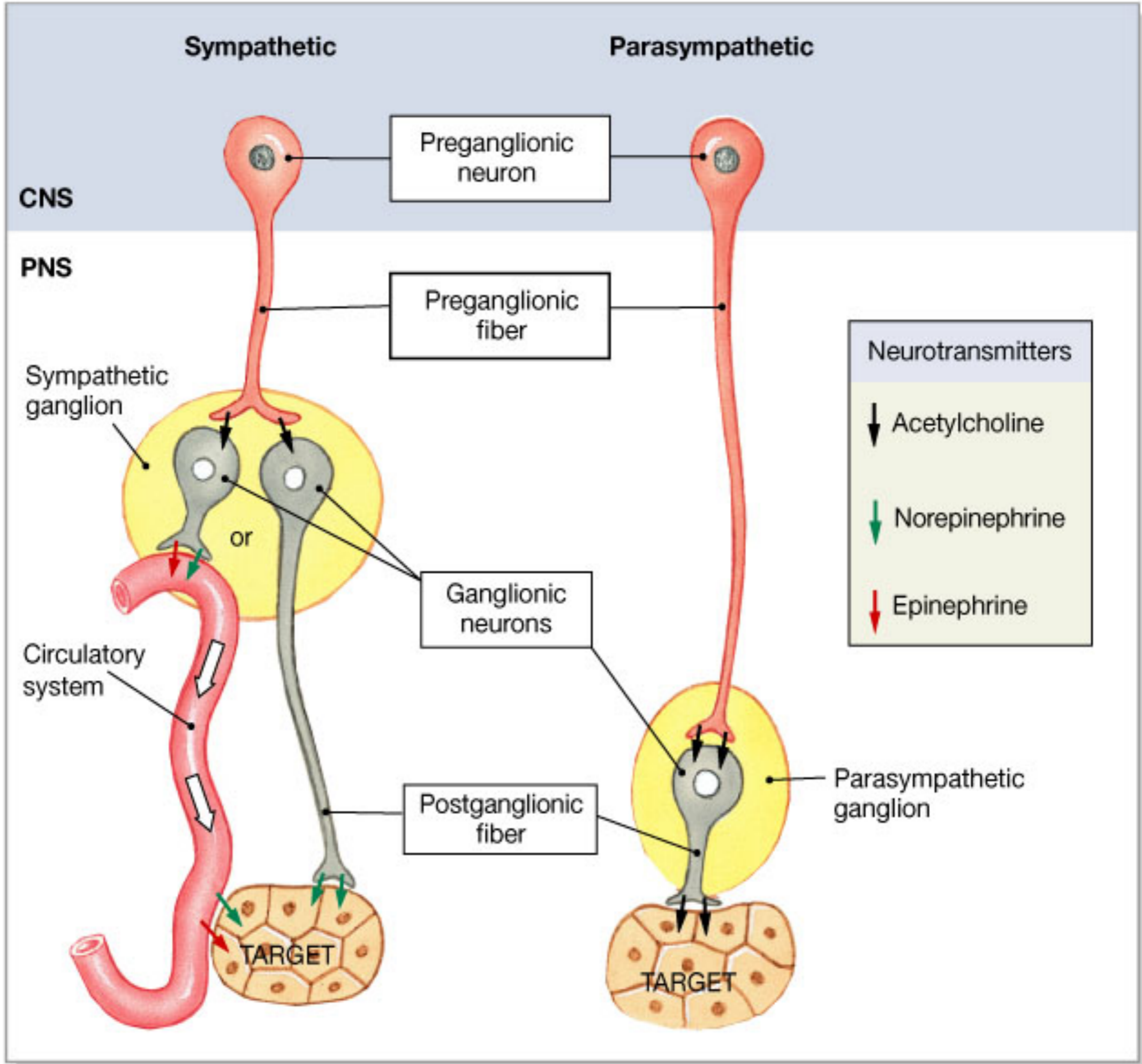
SYMPATHETIC DIVISION

PARASYMPATHETIC DIVISION

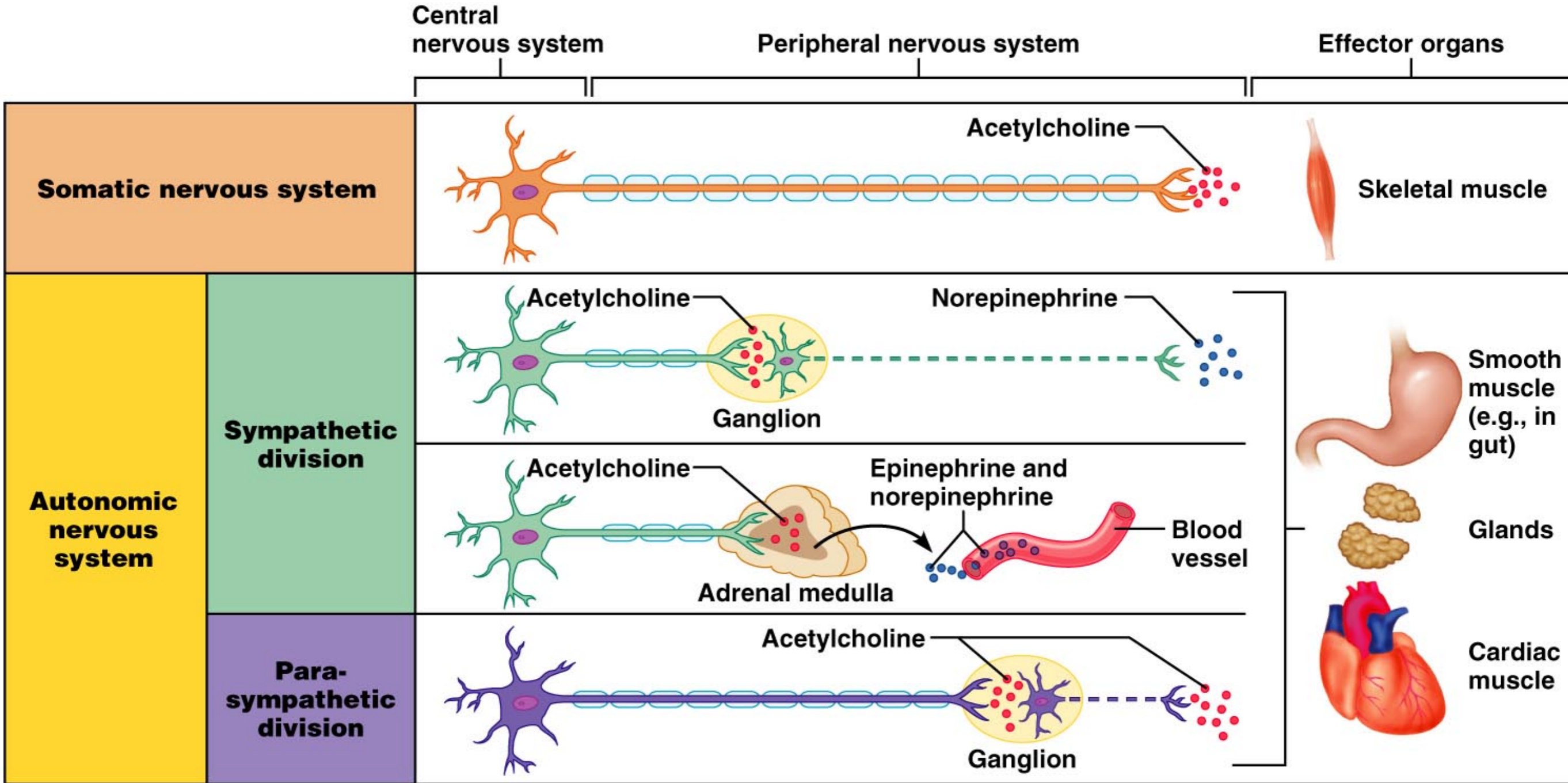


toraco-lombar system

cranio-sacral system



Autonomic Nervous System fibers



Key:

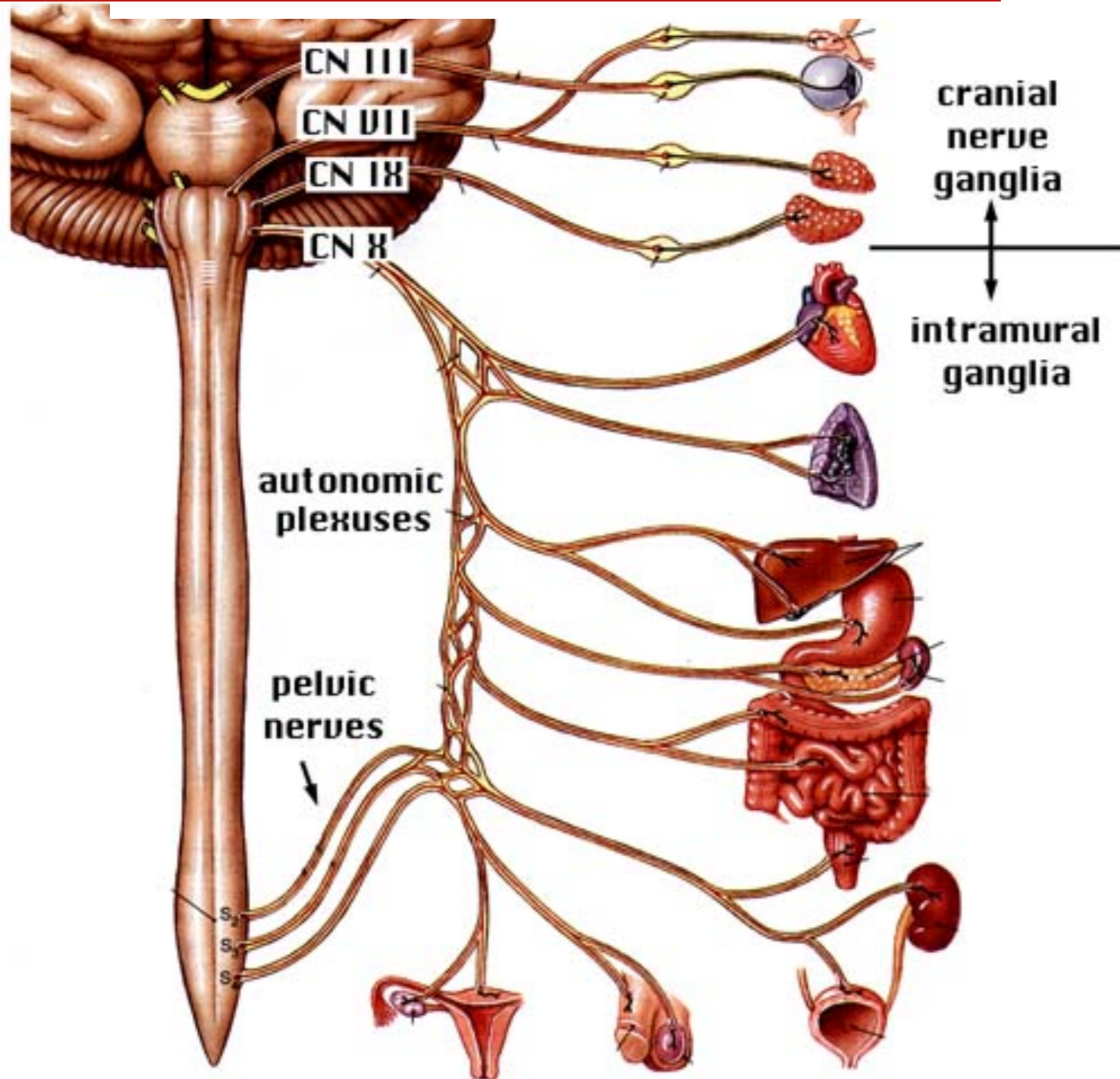
— = Preganglionic axons (sympathetic)
 - - - = Postganglionic axons (sympathetic)
 = Myelination
 — = Preganglionic axons (parasympathetic)
 - - - = Postganglionic axons (parasympathetic)

PNS vs SNS

The parasympathetic nervous system (PNS) controls homeostasis of the body at rest and is responsible for the **"rest and digest"** function

The sympathetic nervous system (SNS) controls the body's responses to a perceived threat and is responsible for the **"fight or flight"** response

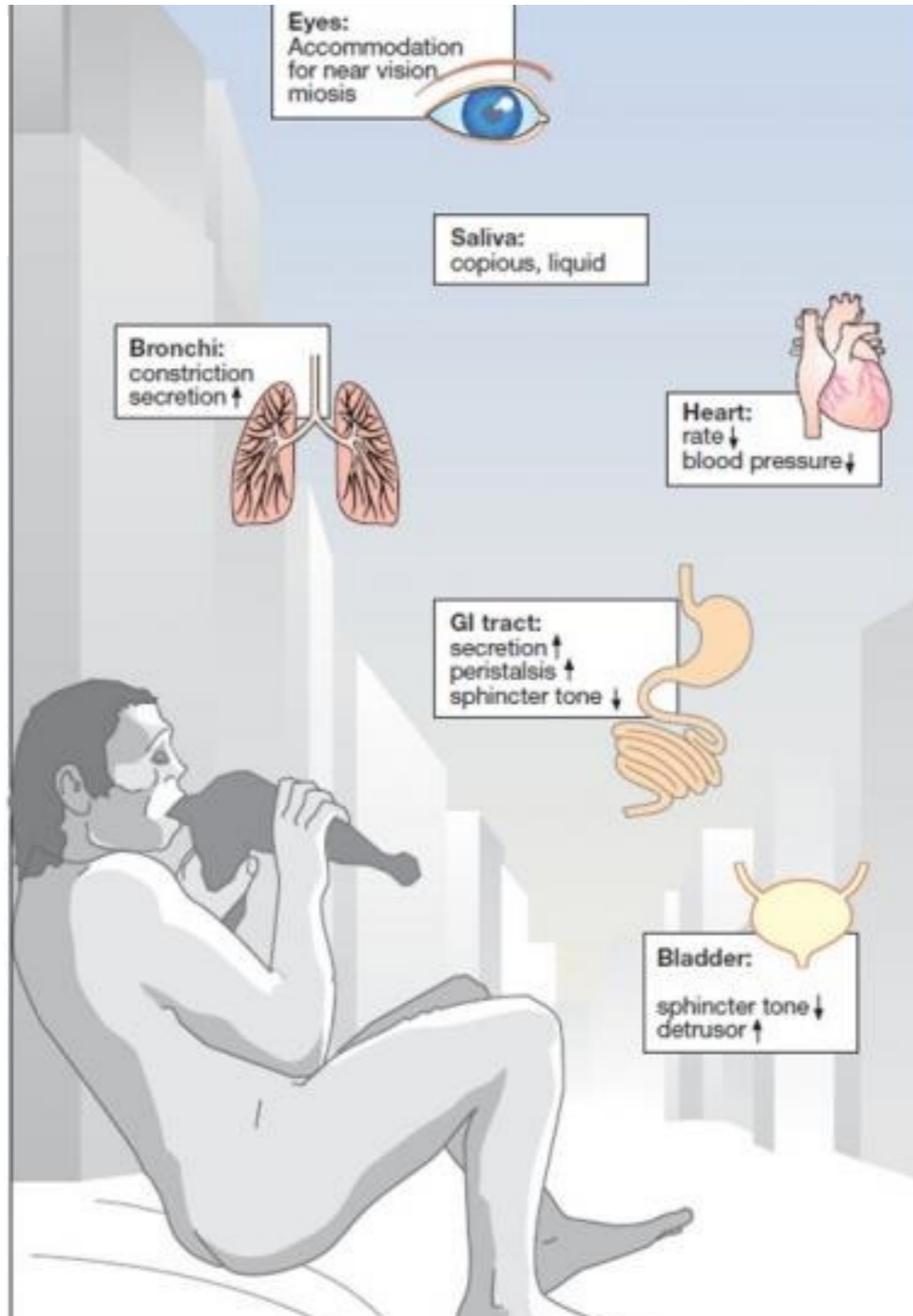
PARASYMPATHETIC DIVISION



"rest and digest" functions:

Eyes:
Accommodation
for near vision
Miosis

Bronchi:
Constriction
Increased
secretion



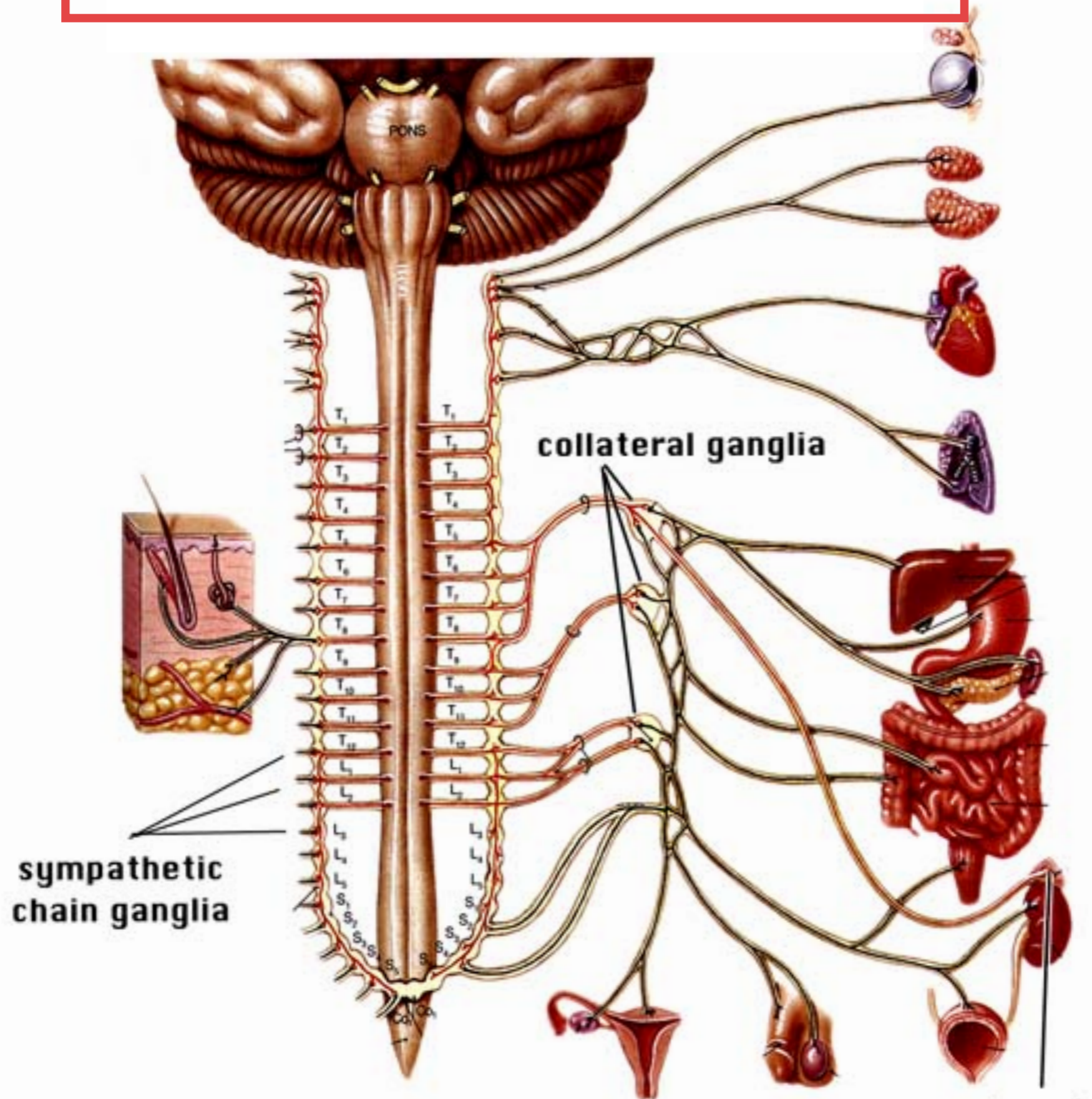
Saliva:
Copious, liquid

Heart:
Decreased rate
Decreased blood
pressure

**Gastro-intestinal
tract:**
Increased secretion
Increased peristalsis
Decreased sphincter
tone

Bladder:
Increased
detrusor tone
Decreased
sphincter tone

SYMPATHETIC DIVISION



SNC:
Increased drive
and alertness

Saliva:
Little, viscous

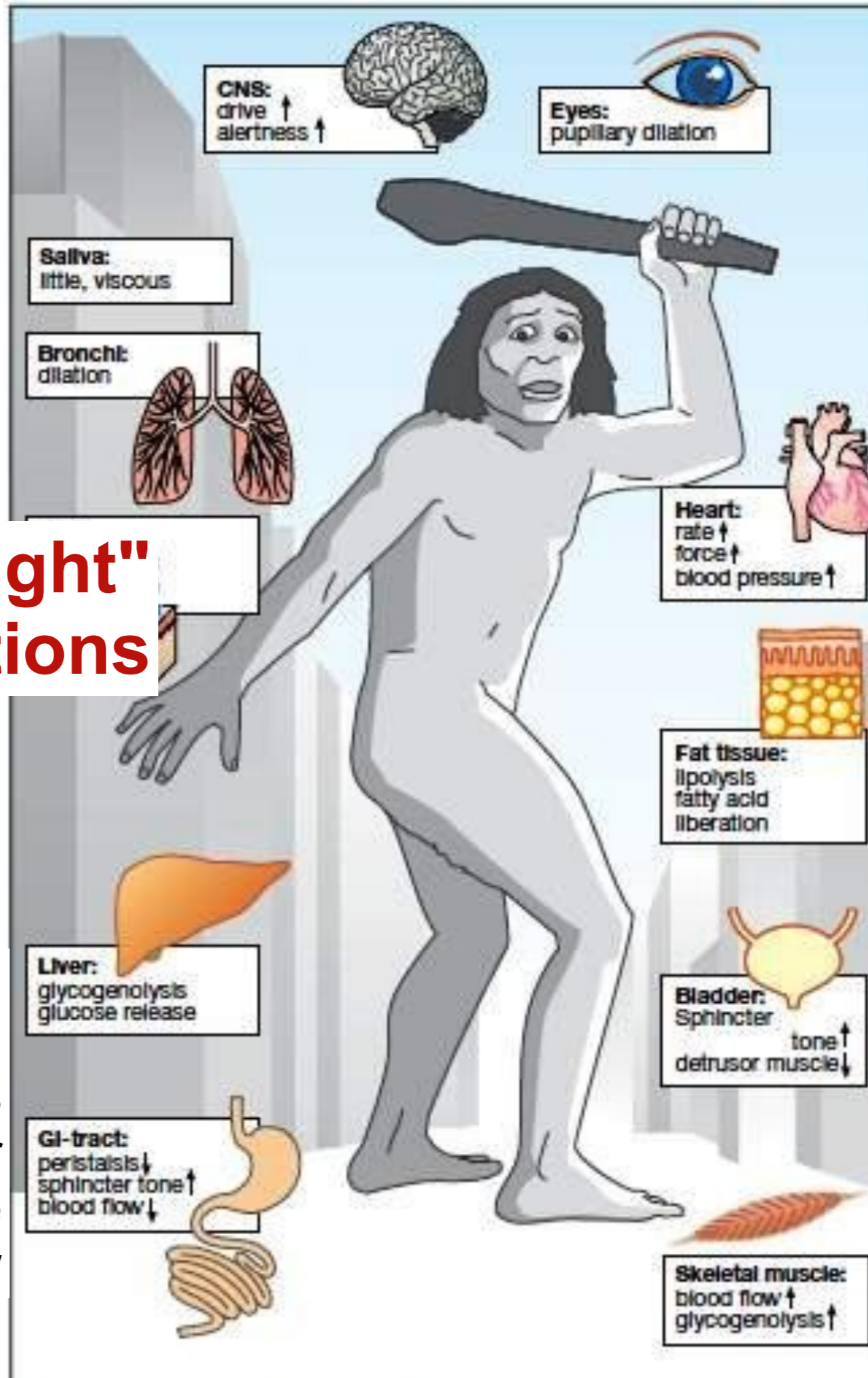
Bronchi:
Dilatation

"Fight or flight" functions

Liver:
Glycogenolysis
Glucose release

**Gastrointestinal
tract:**

Decreased peristalsis
Increased sphincter
tone
Decreased blood flow



Eyes:
Pupillary dilation

Heart:
Increased rate
Increased force
Increased blood
pressure

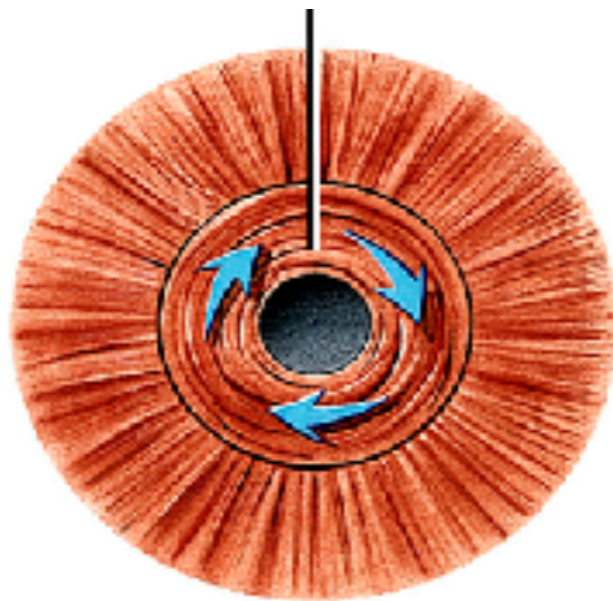
Fat tissue:
Lipolysis
Fatty acids
liberation

Bladder:
Decreased detrusor
tone
Increased sphincter
tone

Skeletal muscle:
Increased blood flow
Increased
glycogenolysis

The circular and radial muscles control the size of the pupil

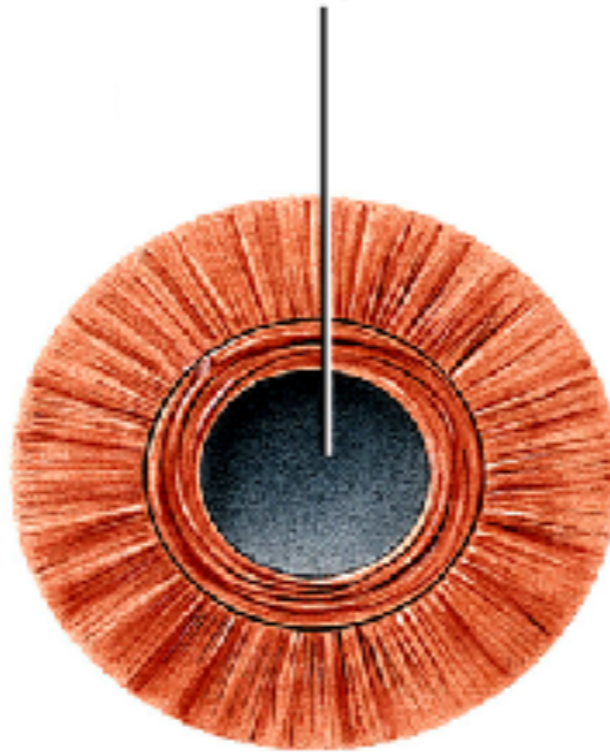
Pupil constricts as
CIRCULAR fibers
contract
(parasympathetic)



Bright light

Miosis

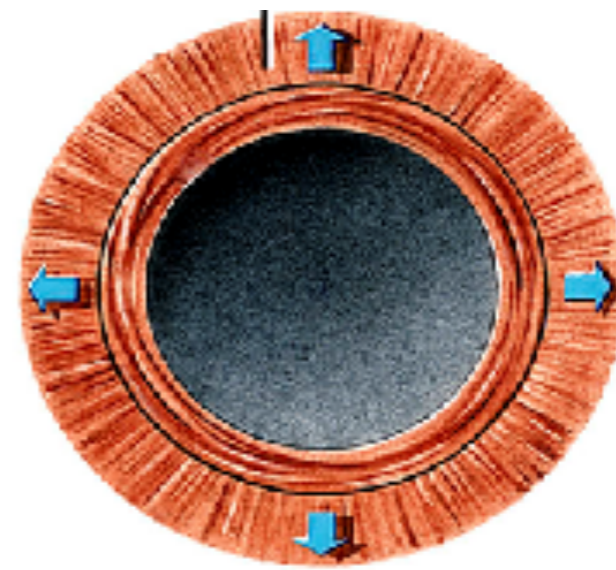
Pupil



Normal light

Anterior views

Pupil dilates as
RADIAL fibers
contract
(sympathetic)

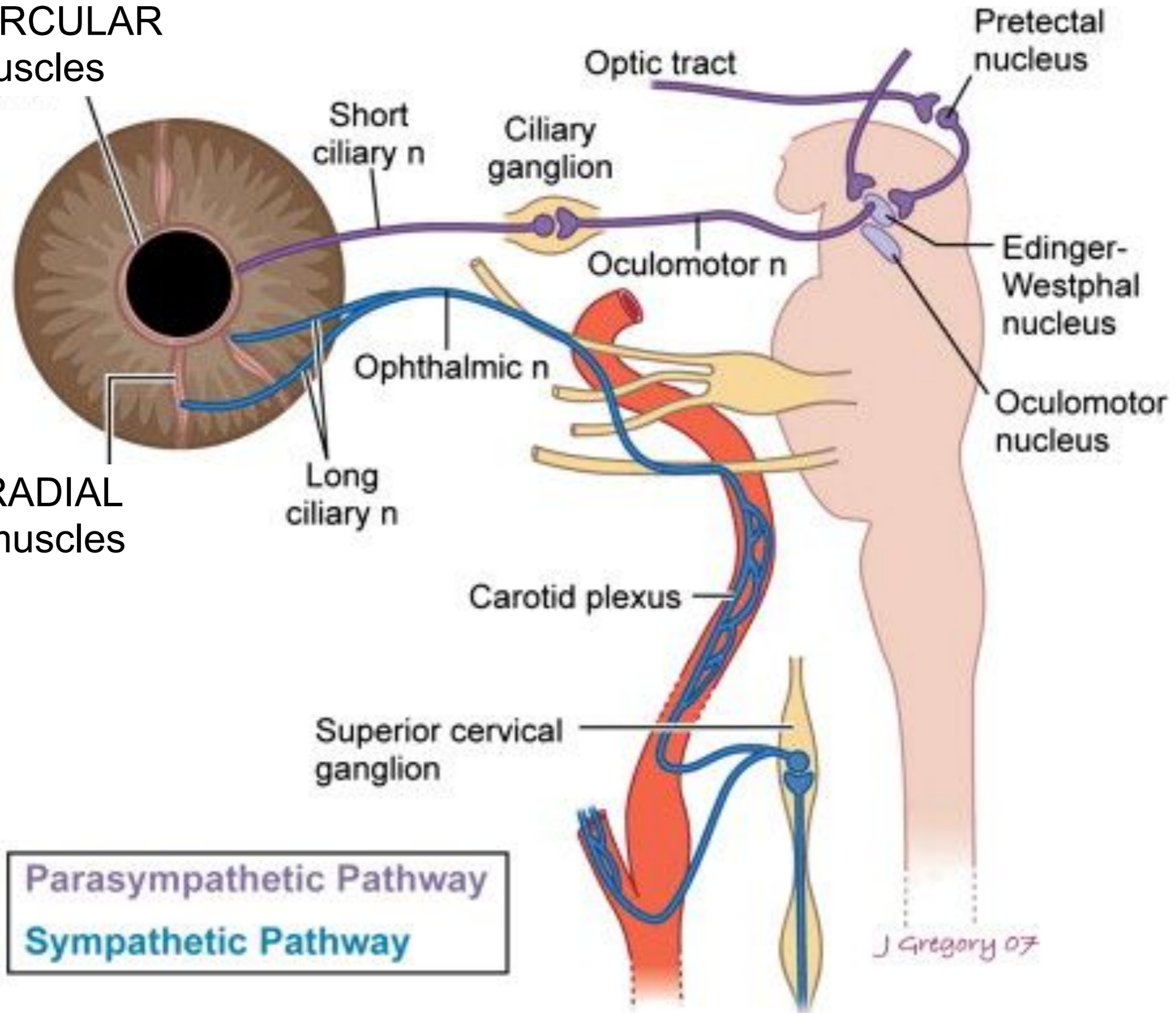


Dim light

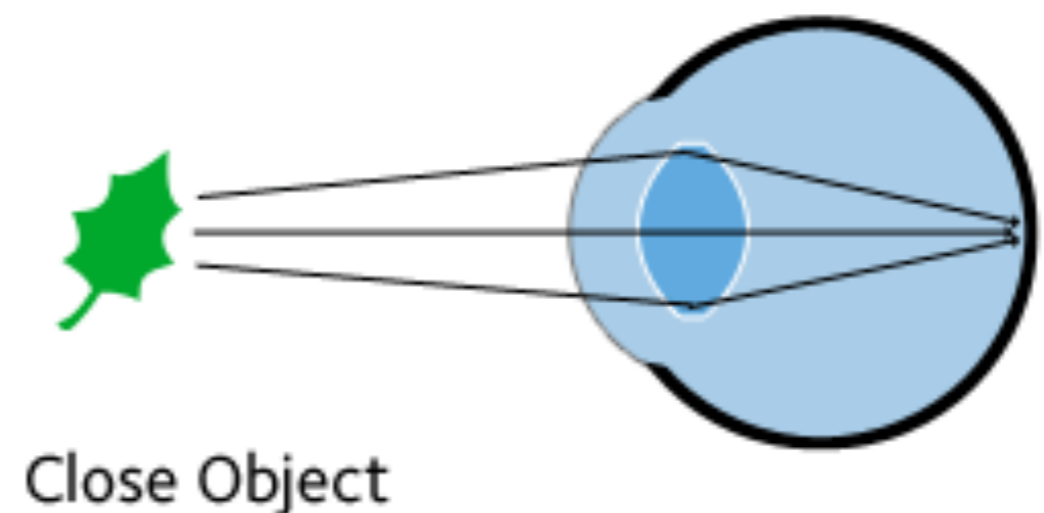
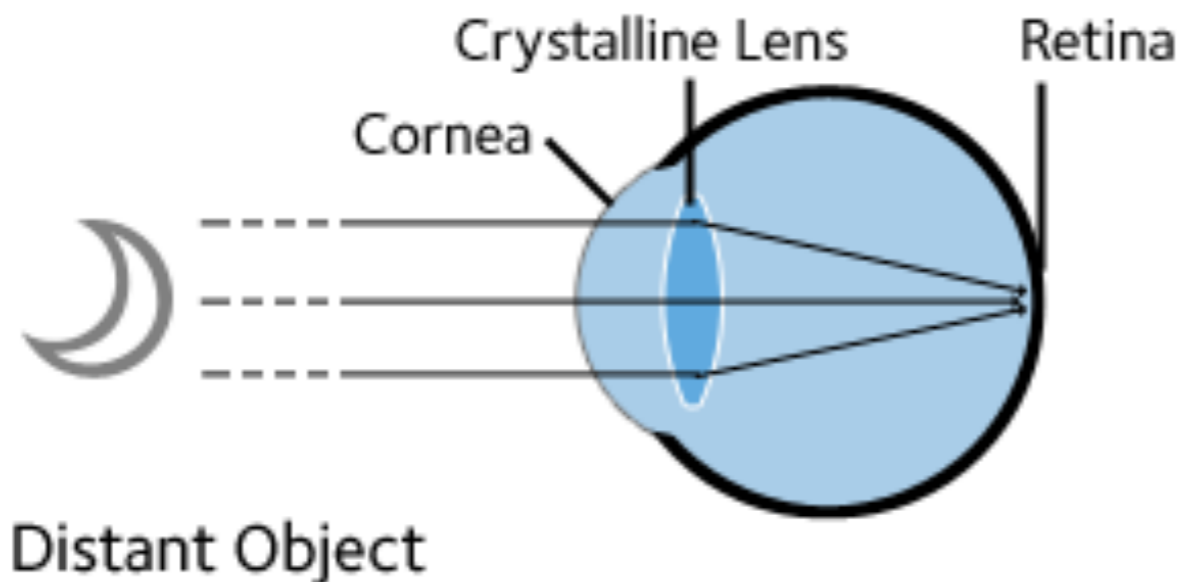
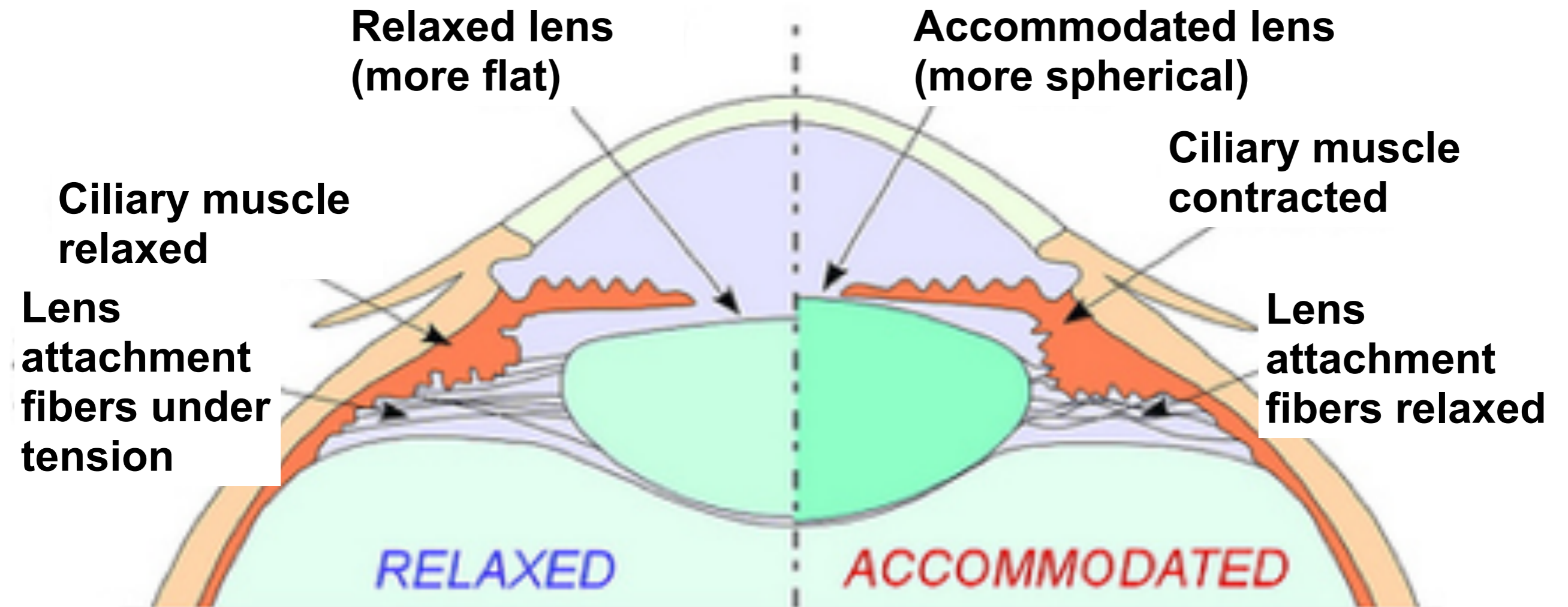
Midriasis

CIRCULAR
muscles

RADIAL
muscles



The ciliary muscles control the shape of the lens

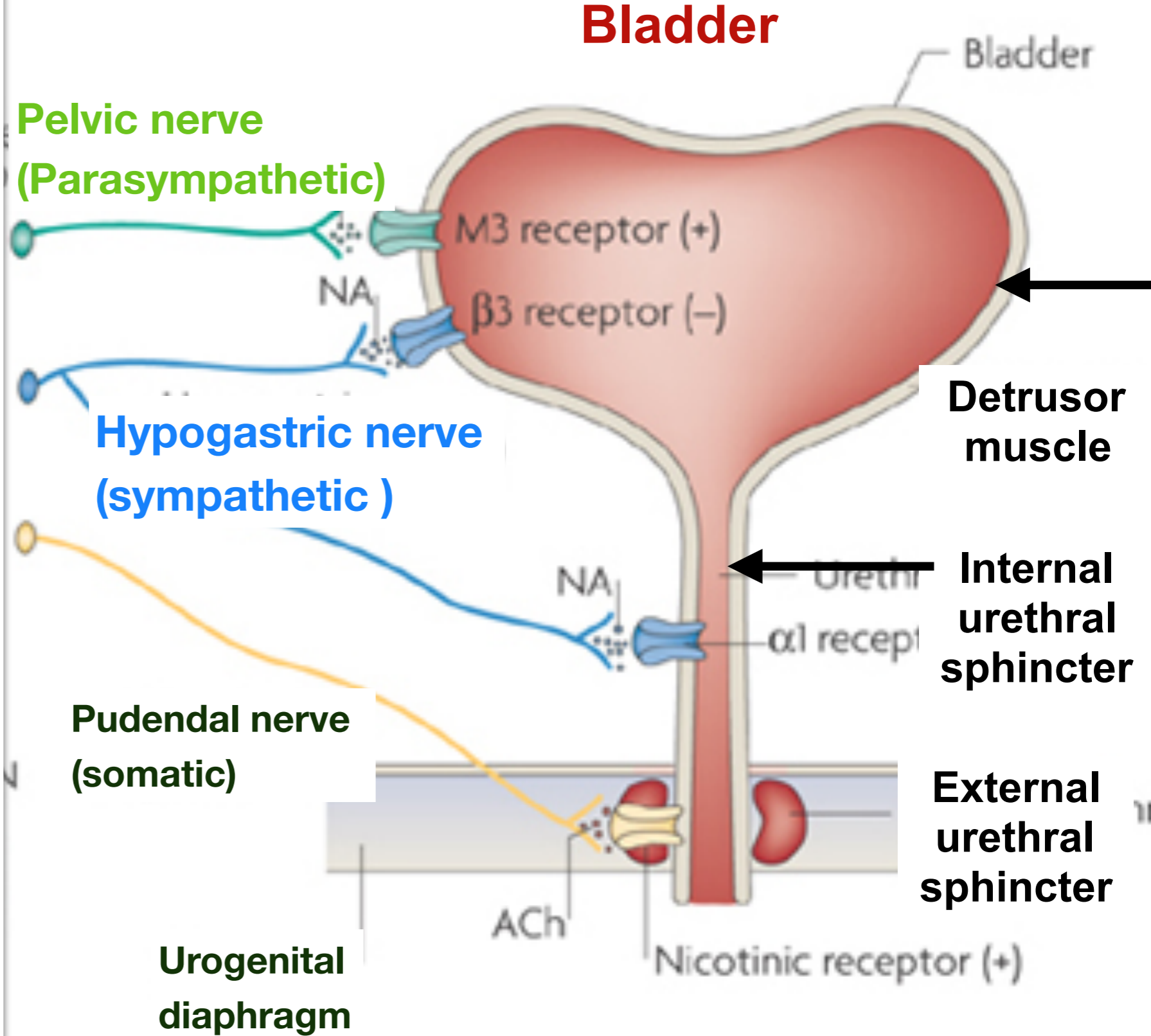


Sympathetic system

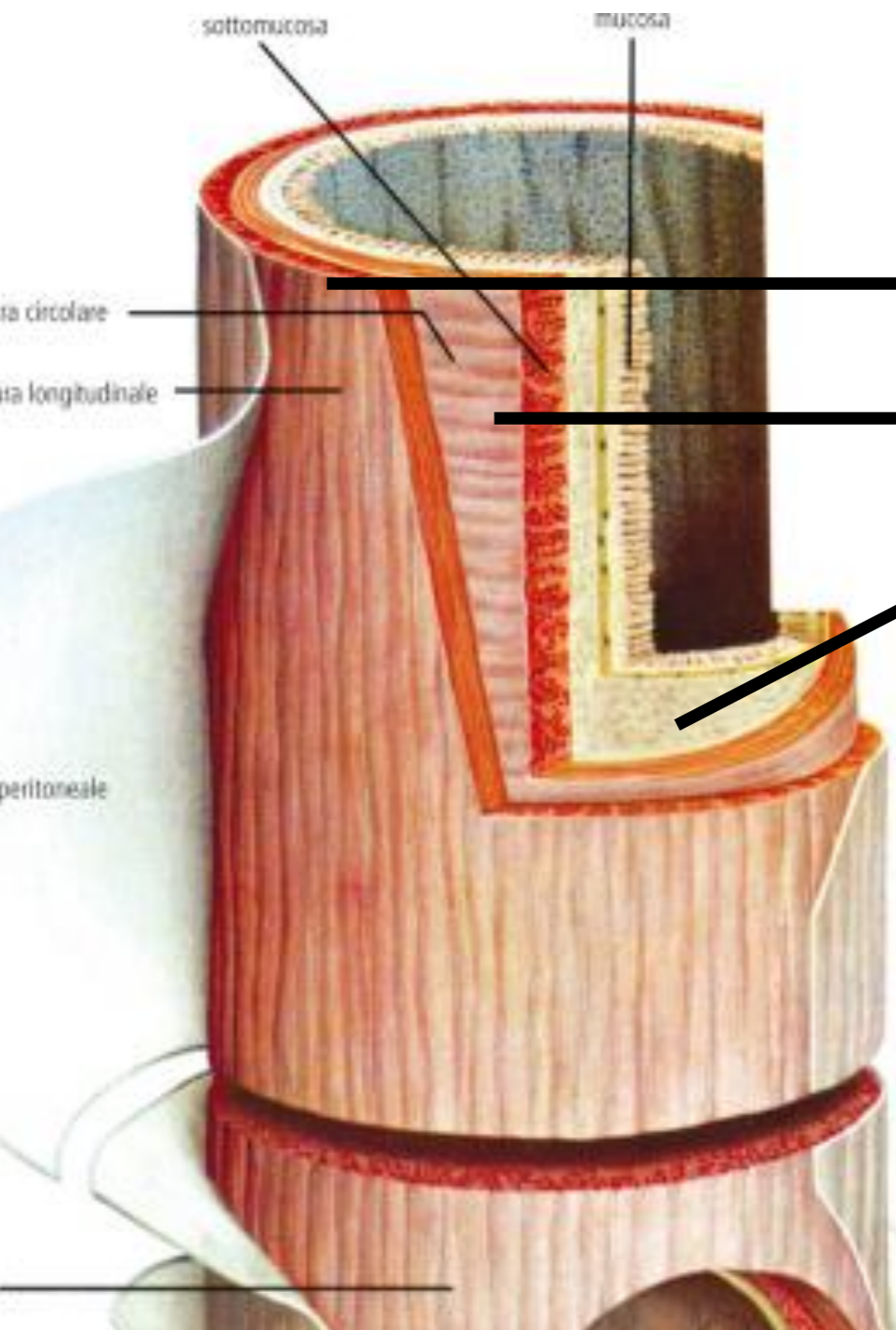
Parasympathetic system

**Parasympathetic system:
Detrusor muscle contracts**

**Sympathetic system:
Detrusor muscle relax
Internal urethral sphincter contracts**



Intestinal tract



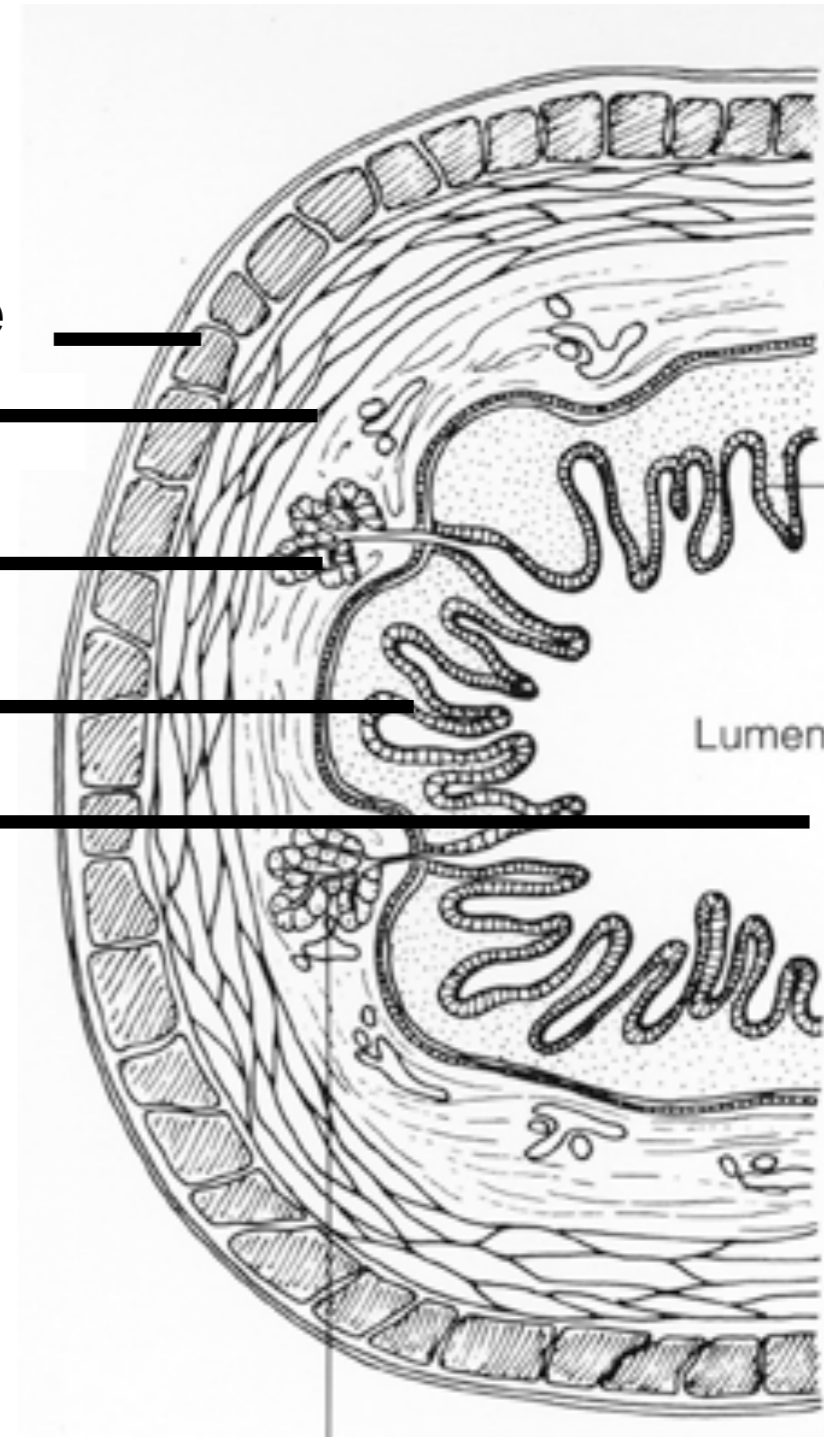
Longitudinal muscle

Circular muscle

Submucosa
Gland

Epithelium

Lumen

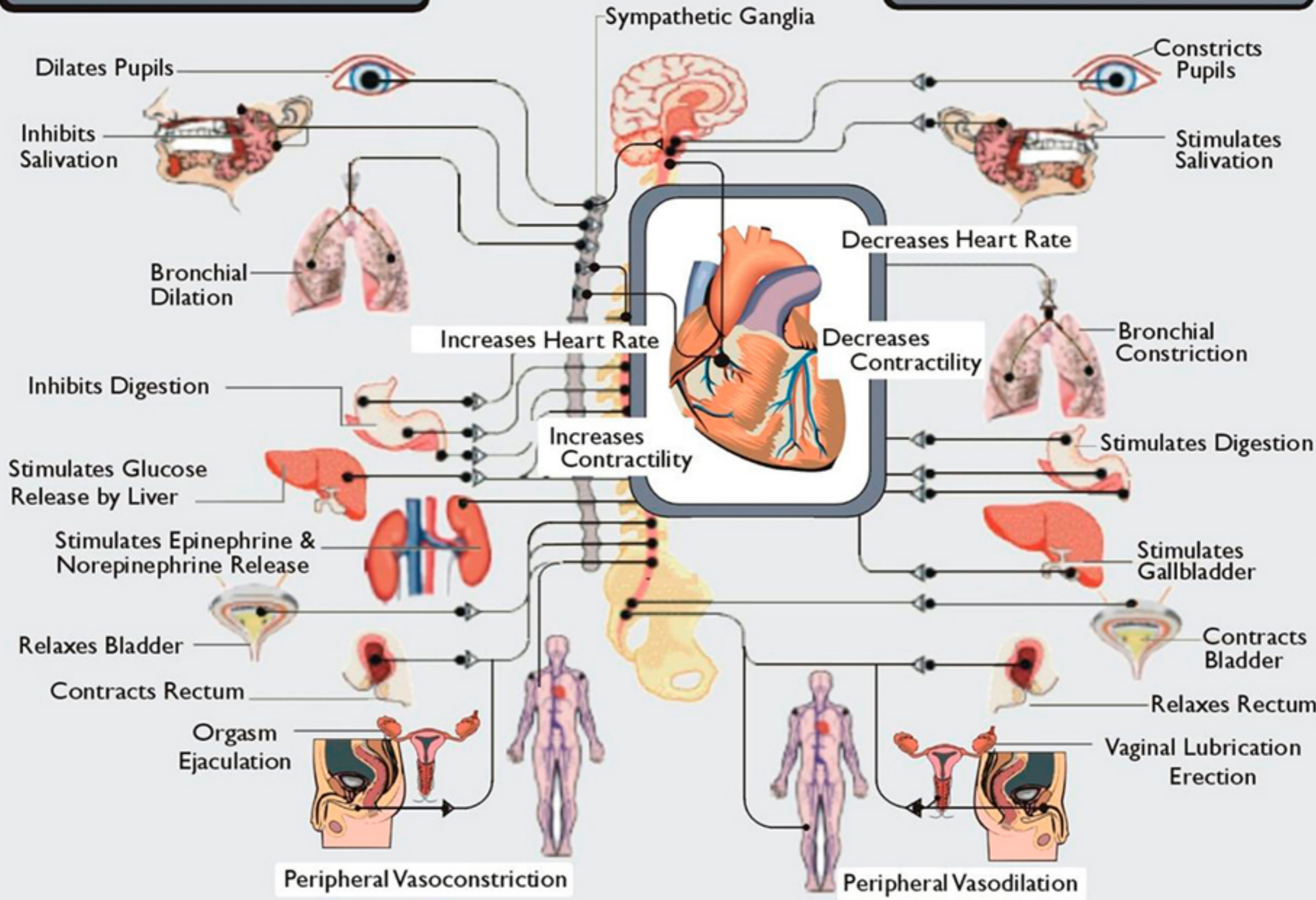


Parasympathetic system:
Increased peristalsis
Decreased sphincter tone

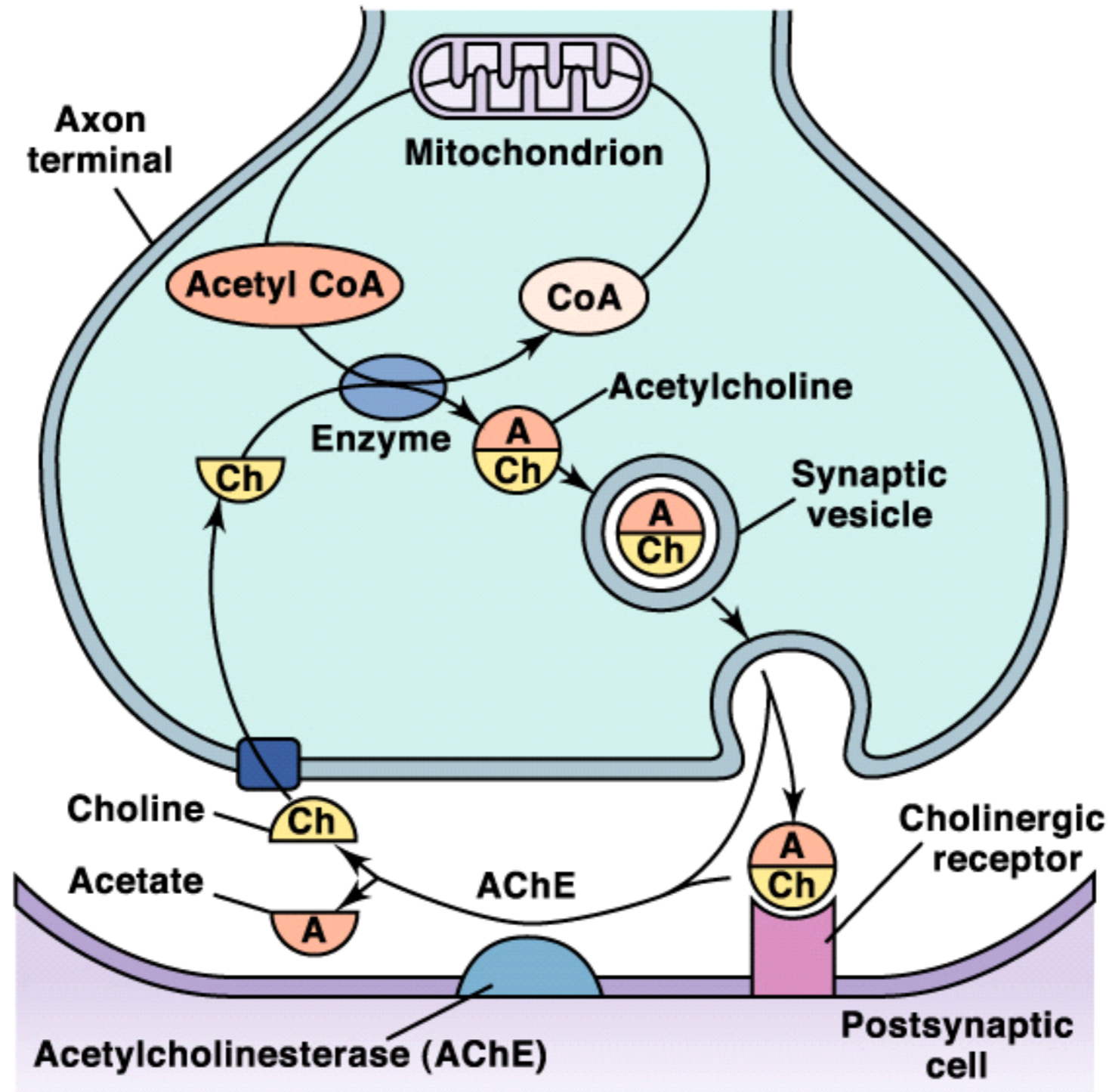
Sympathetic system:
Decreased peristalsis
Increased sphincter tone

SYMPATHETIC

PARASYMPATHETIC



CHOLINERGIC TRANSMISSION ACETYLCHOLINE SYNTHESIS AND DEGRADATION



ACETYLCHOLINE RECEPTORS

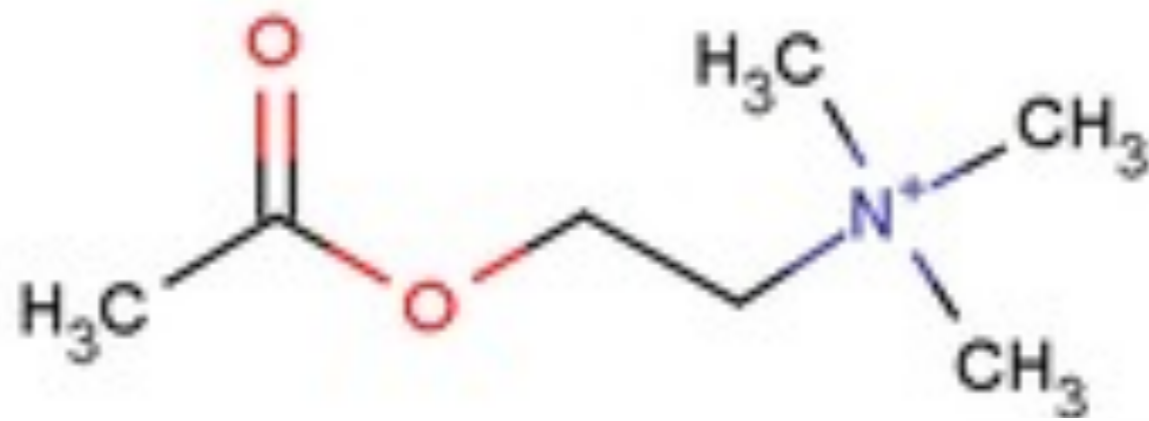
(Dale, 1914)

NICOTINIC
ionotropic

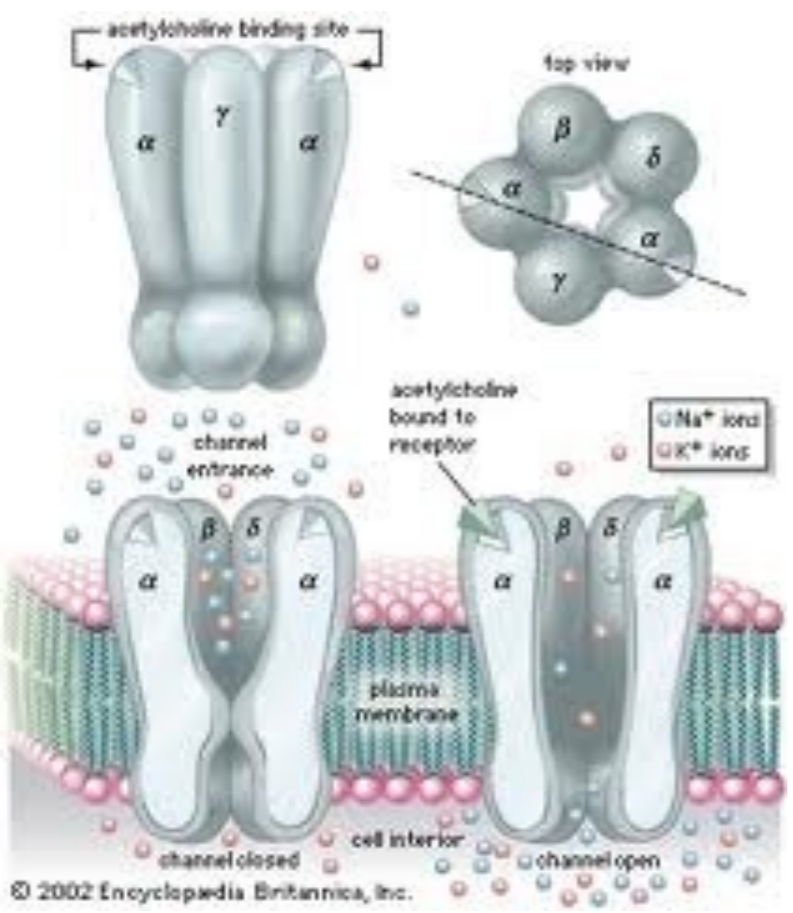


MUSCARINIC
metabotropic

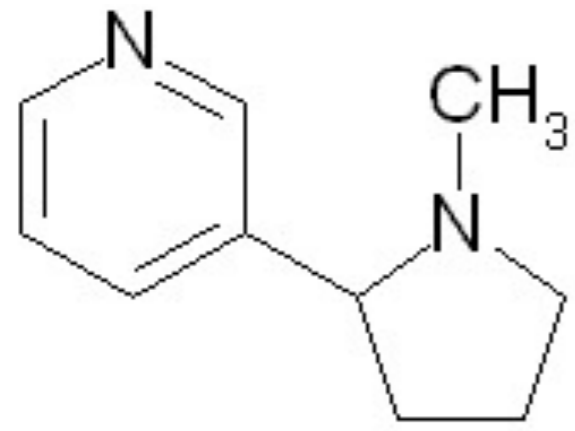
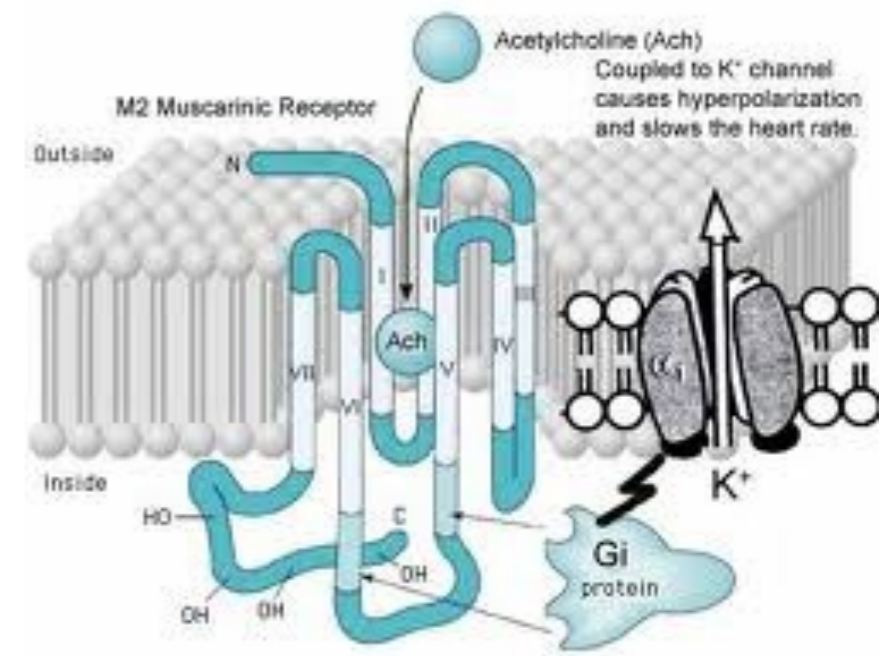




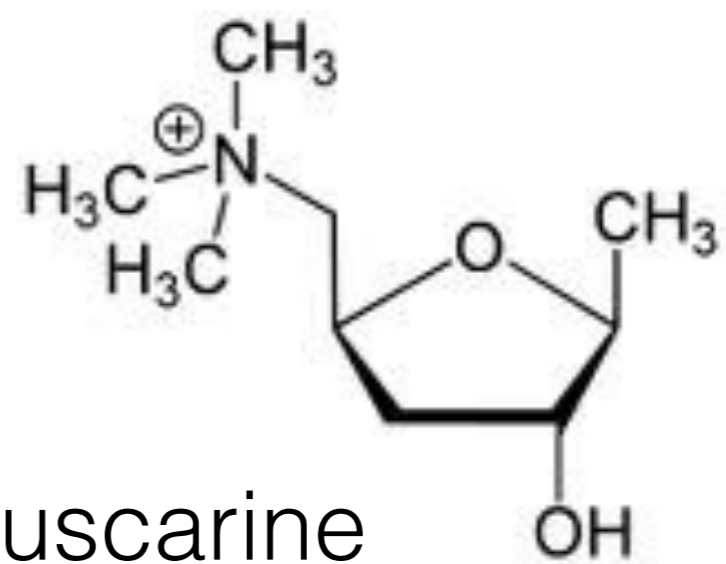
Acetylcholine



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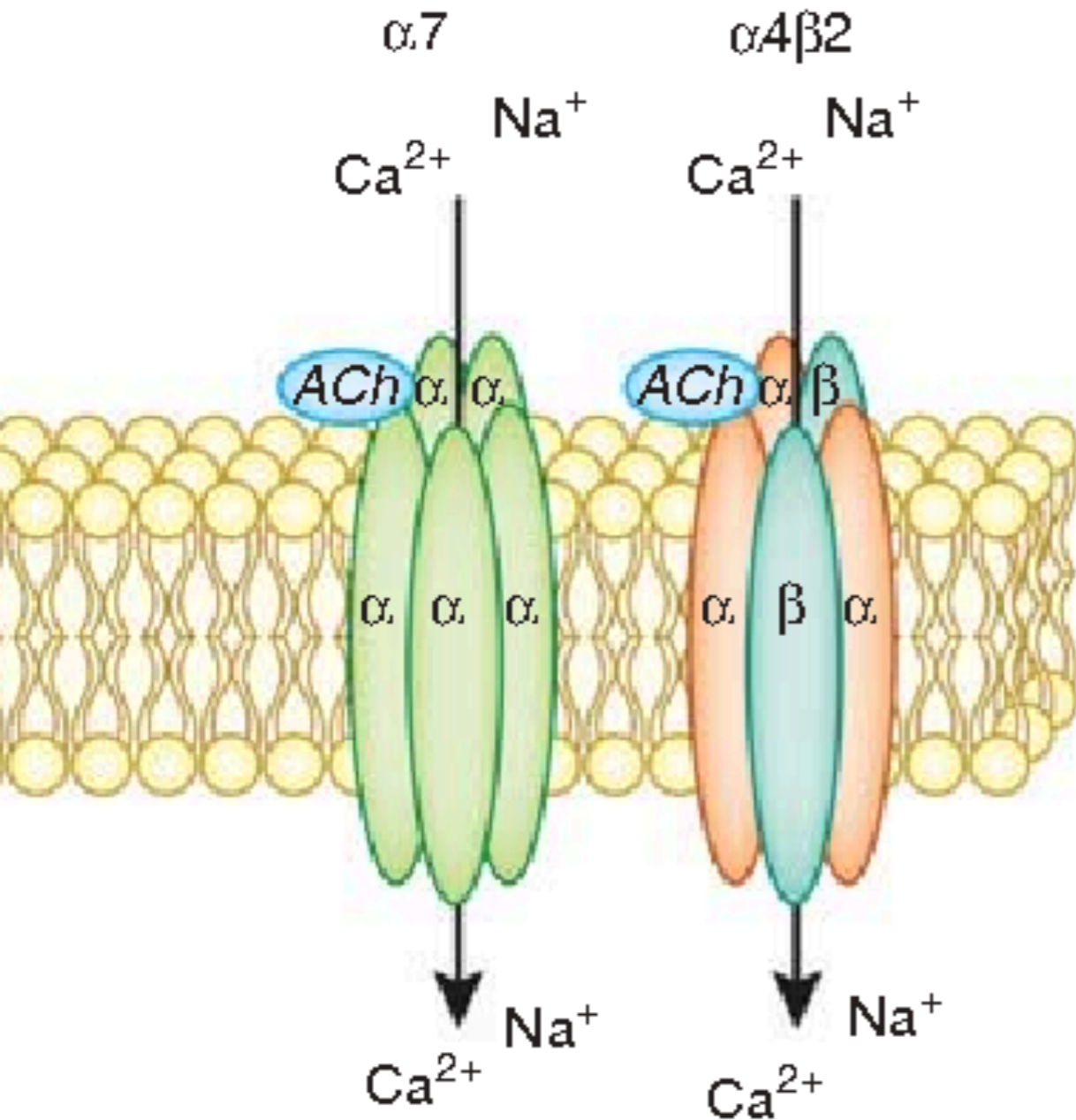


Nicotine



Muscarine

NICOTINIC RECEPTORS



Key effectors (examples)

- ↑ $[\text{Ca}^{2+}]_i$
- ↑ VDCC
- ↑ PKC

SUBTYPE	MAIN LOCALIZATION	MEMBRANE RESPONSE
Muscle type (alpha1)2-beta1-delta-epsilon	Skeletal neuromuscular junction (mainly post-synaptic)	Excitatory
Ganglion type (alpha3)2-(beta2)3	Autonomic ganglia (mainly post-synaptic)	Excitatory
CNS type (alpha4)2-(beta2)3 (alpha7)5	Many brain regions: pre- and post-synaptic	Excitatory

NICOTINIC RECEPTORS

SUBTYPE

AGONISTS

CLINICAL USE

Muscle type

(alpha1)2-
beta1-delta-
epsilon

Acetylcholine
Carbachol
Succinylcholine
Suxamethonium

None
None
**Paralysis during
anaesthesia (short acting)**

Ganglion type

(alpha3)2-
(beta2)3

Acetylcholine
Carbachol
Nicotine
Epibatidine

None
None
Smoke cessation
None

CNS type

(alpha4)2-
(beta2)3

(alpha7)5

Nicotine
Epibatidine
Acetylcholine
Varenicline

None
None
None
Smoke cessation

NICOTINIC RECEPTORS

SUBTYPE

ANTAGONISTS

CLINICAL USE

Muscle type

**(alpha1)2-
beta1-delta-
epsilon**

**Tubocurarine
Pancuronium
Atracurium
Vecuronium**

**Paralysis during
anaesthesia**

Ganglion type

**(alpha3)2-
(beta2)3**

Mecamylamine
Trimetaphan
Hexamethonium

Obsolete anti-hypertensive
drug

CNS type

**(alpha4)2-
(beta2)3**

Mecamylamine
Methylnaconitine

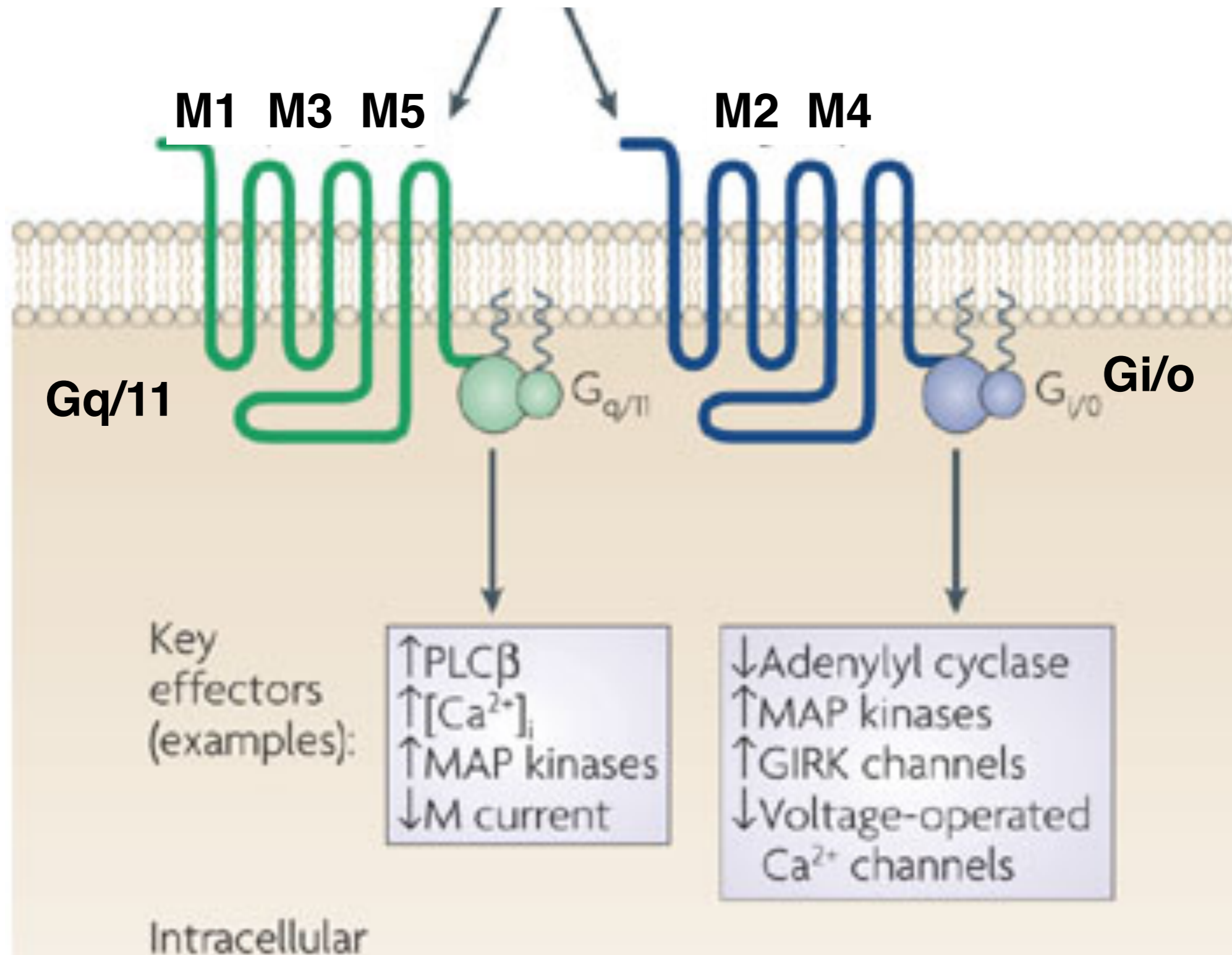
Crosses the BBB
(antagonizes nicotine CNS
effects)

(alpha7)5

Alpha-bungarotoxin
Alpha-conotoxin

None

MUSCARINIC RECEPTORS



MUSCARINIC RECEPTOR

SUBTYPE

MAIN LOCATION

FUNCTIONAL RESPONSE

M1
("neural")

Cerebral cortex
Autonomic ganglia

CNS excitation
Gastric secretion

M2
("cardiac")

Heart: atria
CNS

Cardiac inhibition
(bradycardia)
Neural inhibition

M3
("Glandular -
Smooth
muscle")

**Exocrine glands: gastric,
salivary, etc**
**Smooth muscle: GI tract, eye,
airways, bladder**
Blood vessel (endothelium)

Gastric, salivary secretion
**Contraction, ocular
accomodation**
Vasodilatation (NO-mediated)

M4

CNS

Enhanced locomotion

M5

CNS (very localized expression)

Not known

MUSCARINIC RECEPTOR

SUBTYPE

AGONISTS

CLINICAL USE

M1
("neural")

NON-SELECTIVE:
Acetylcholine
Carbachol
Pilocarpine
Bethanechol

-
-
Glaucoma
Treatment of bladder and gastrointestinal hypotonia

M2
("cardiac")

Not known

M3
("Glandular - Smooth muscle")

SELECTIVE:
Cevimeline

Sjögren's syndrome (to increase salivary and lacrimal secretion)

M4

Not known

Not known

M5

Not known

Not known

MUSCARINIC RECEPTOR

SUBTYPE

ANTAGONISTS

CLINICAL USE

M1
("neural")

NON-SELECTIVE:

Atropine
Oxibutynin
Ipratropium

SELECTIVE:
Pirenzepine

Ophthalmic (midriasis and paralysis of accommodation)
Prevention of motion sickness
COPD and Asthma
Anaesthetic premedication

Inhibition of gastric secretion

M2
("cardiac")

Gallamine

M3
("Glandular - Smooth")

SELECTIVE
Darifenacin

Urinary incontinence

M4

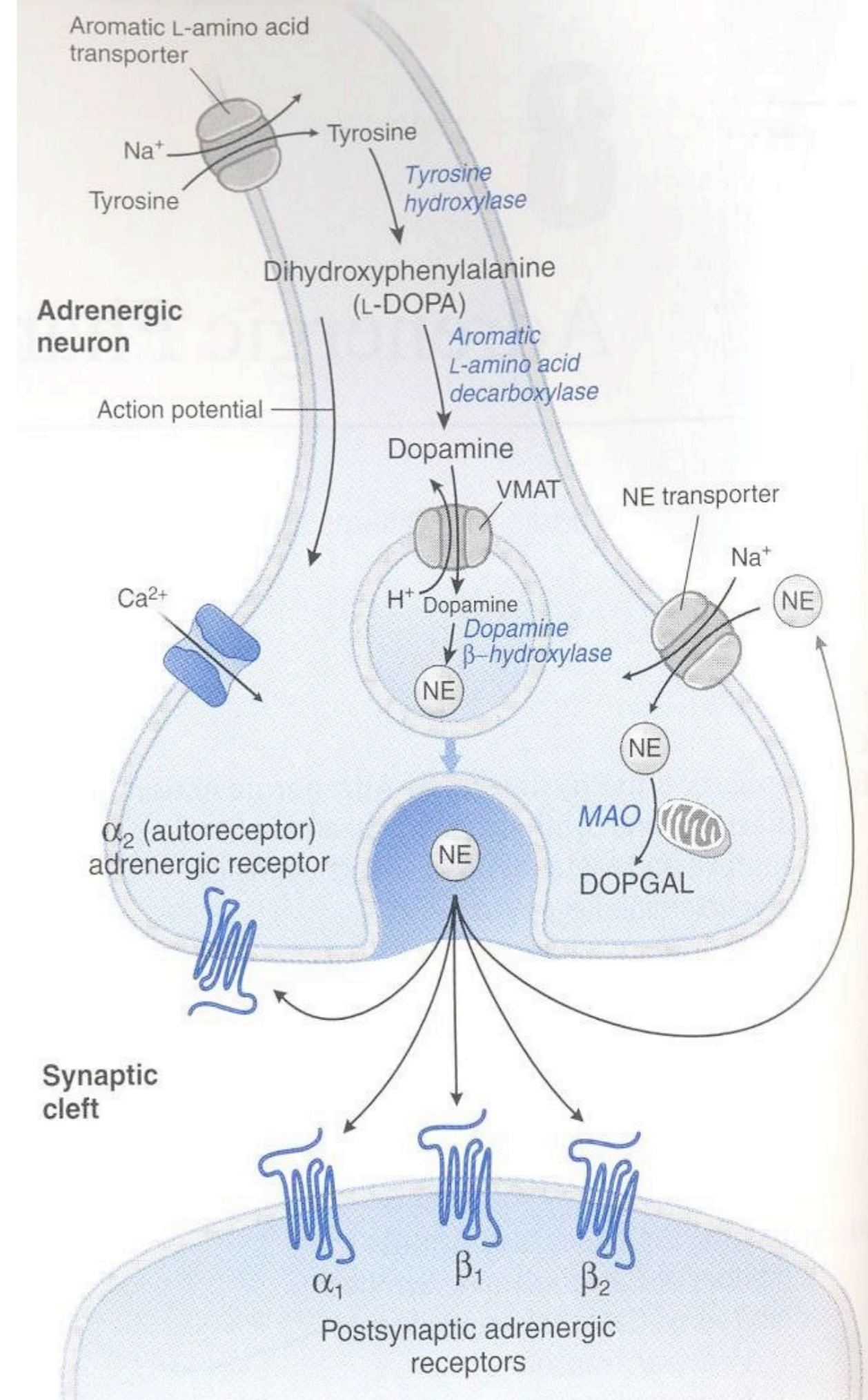
Not known

M5

Not known

Antimuscarinic drug side effects: dry mouth and skin (dry as a bone), cyclopegia (blind as a bat), bradycardia, urinary retention (full as s flask), constipation, restlessness, irritability (mad as a hatter)

ADRENERGIC TRANSMISSION NORADRENALINE SYNTHESIS AND DEGRADATION



ADRENERGIC RECEPTOR CLASSIFICATION

Epinephrine and Norepinephrine show relatively little receptor **selectivity**

The main pharmacological classification into alfa (α) and beta (β) was originally based on order of potency of agonists:

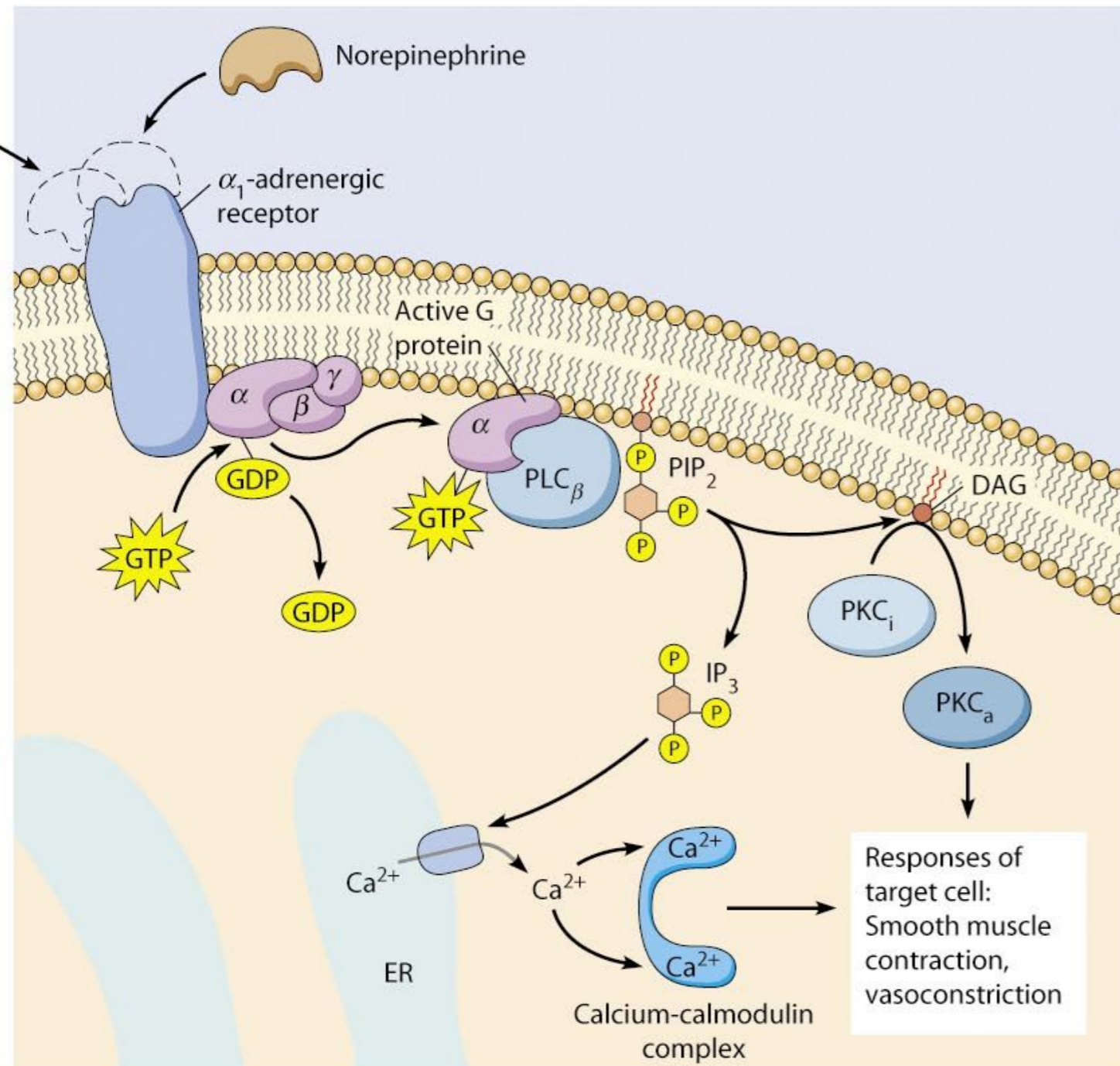
alfa (α): Epinephrine = NE > dopamine > isoproterenol

beta (β): Isoproterenol = Epinephrine > NE > dopamine

	α_1	α_2	β_1	β_2	DA
Norepinephrine	+++	+++	+	-	-
Epinephrine	+++	++	+++	++	-
Dopamine	++	+	++	+++	+++
Dobutamine	+	-	+++	+	-
Isoproterenol	-	-	++	++	-

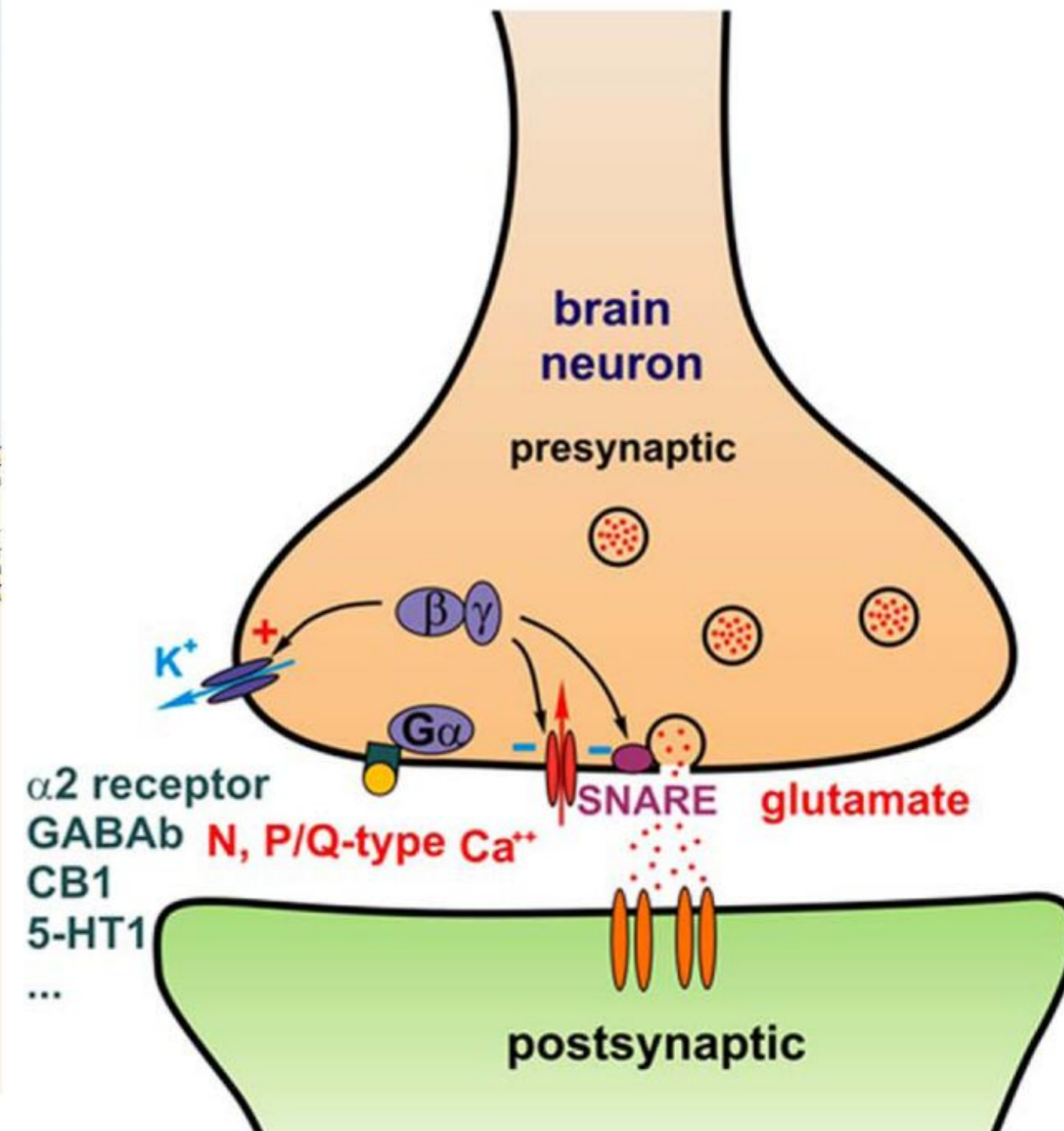
AlphaADRENERGIC RECEPTORS

alpha (α)1: Gq/11



alpha (α)2: Gi/o

- N or P/Q-type Ca $^{++}$ channel mediated release
- G $\beta\gamma$ mediated inhibition via
 - either inhibition of N or P/Q type Ca $^{++}$ channel
 - or activation of K $^{+}$ channel
 - or inhibition of key synaptic proteins



Alpha ADRENERGIC RECEPTOR

SUBTYPE

MAIN LOCATION

FUNCTIONAL RESPONSE

Alpha 1

Blood vessels

GI tract
GI sphincters
Bladder sphincter
Iris

Contraction

Relaxation
Contraction
Contraction
Contraction (midriasis)

Alpha 2

Presynaptic brain stem
Presynaptic nerve terminals

Inhibition of sympathetic outflow
Decreased release of neurotransmitters

Alpha ADRENERGIC RECEPTOR

SUBTYPE

AGONISTS

CLINICAL USES

Alpha 1

Phenylephrine
Methoxamine

Nasal decongestion

Alpha 2

Clonidine

Hypertension

ANTAGONISTS

CLINICAL USES

Alpha 1

Prazosin
Doxazocin
Tamsulosin

Hypertension

Benign prostatic hypertrophy

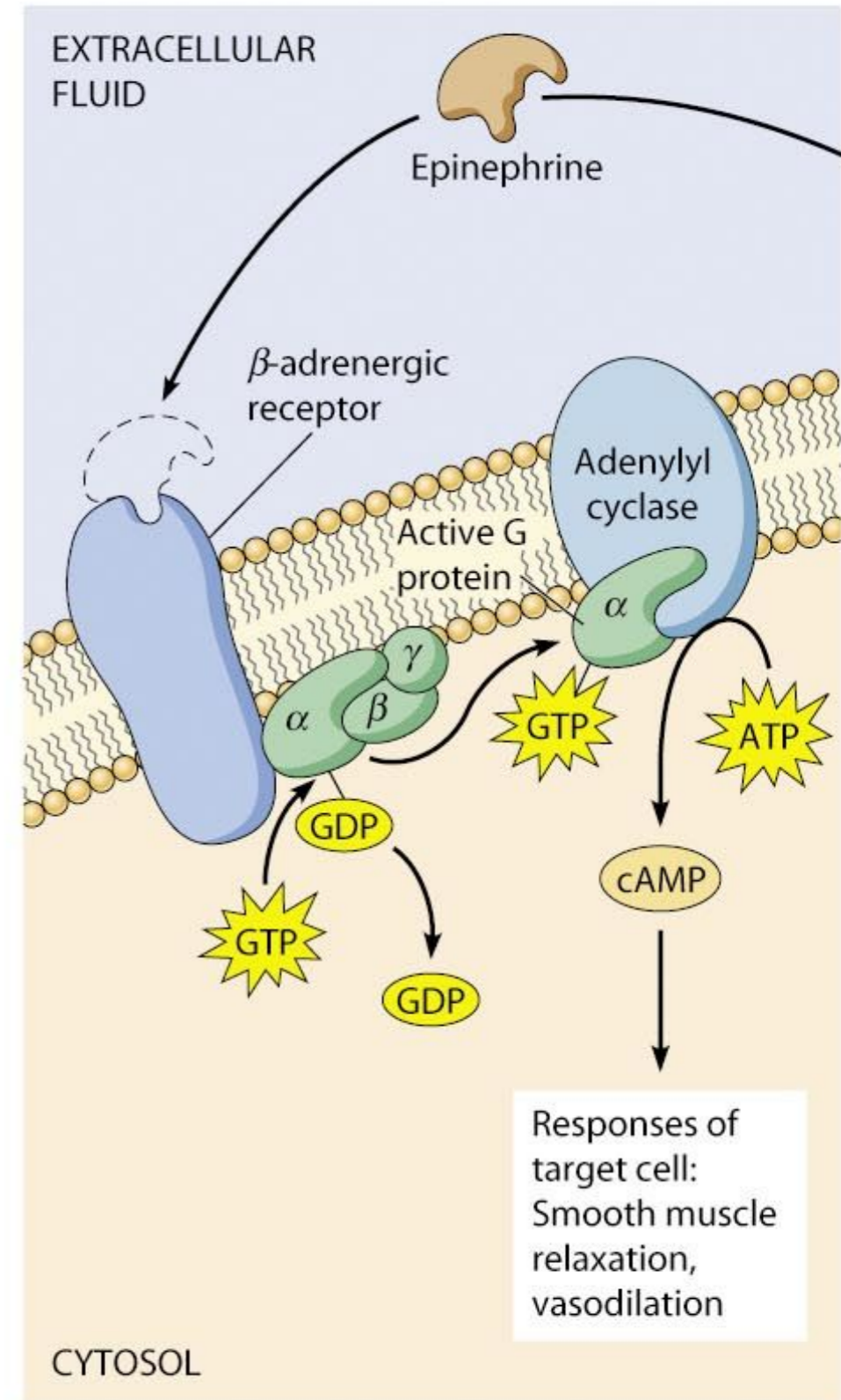
Alpha 2

Yohimbine

No clinical use

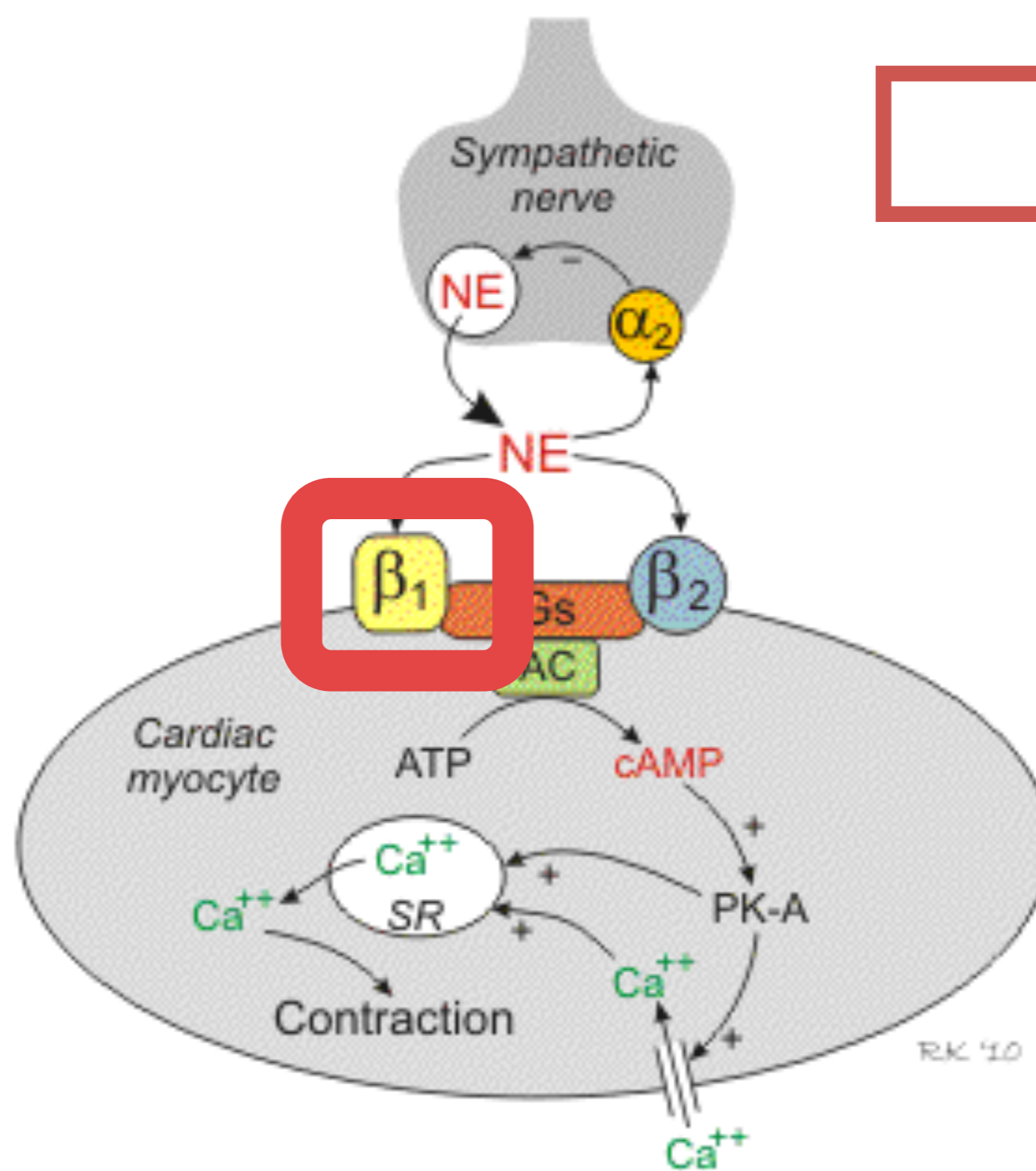
Beta ADRENERGIC RECEPTOR

SUBTYPE	MAIN LOCATION	FUNCTIONAL RESPONSE
Beta 1	Heart	Increase rate and force of contraction
	Kidney (juxtaglomerular)	Renine release
Beta 2	Smooth muscle: bronchi, blood vessel	Relax
	ciliary, GI tract, bladder detrusor	Increase mass, tremor
	Skeletal muscle	Glycogenolysis
Beta 3	Fat tissue	Lipolysis, thermogenesis



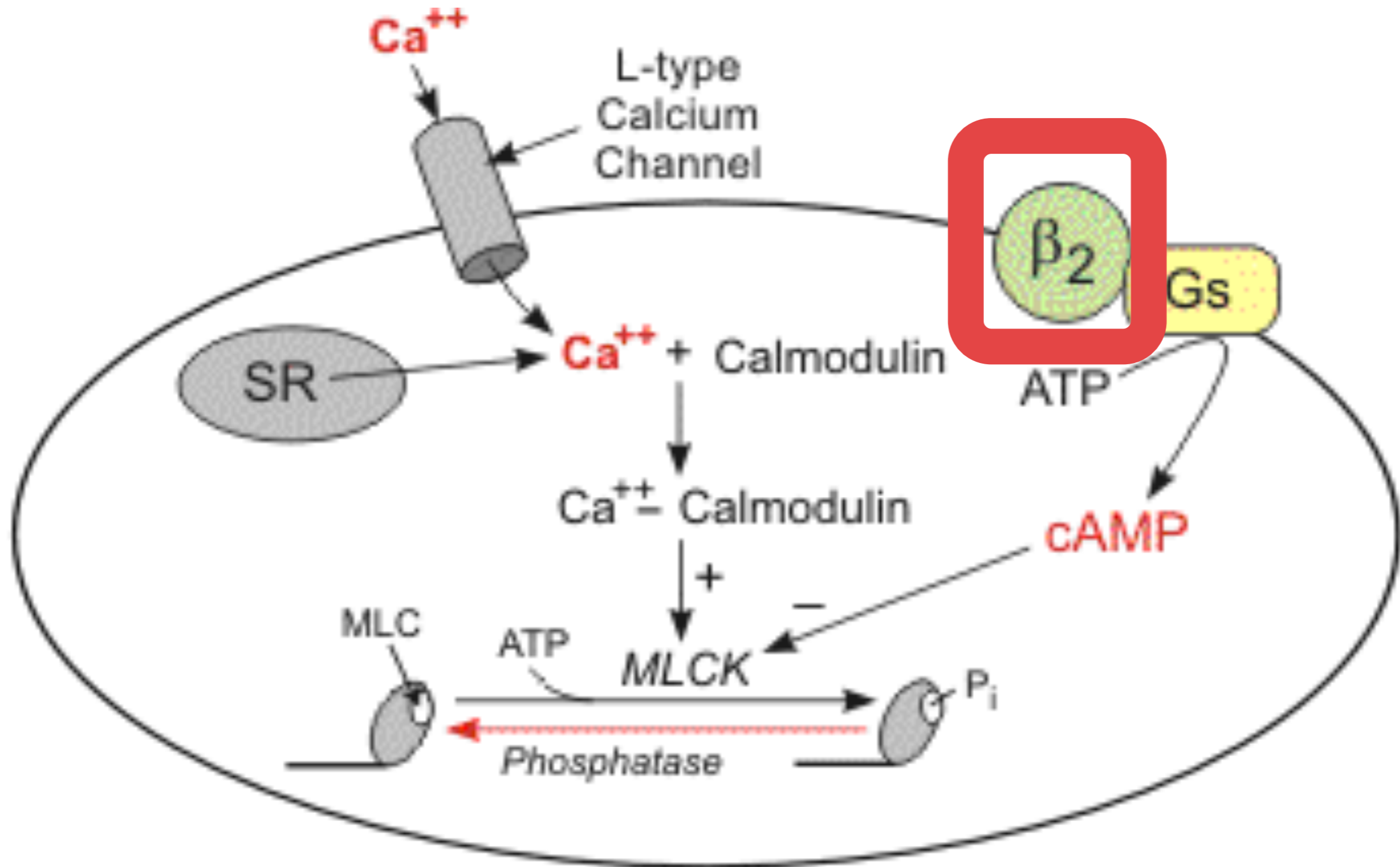
beta (β) 1, 2, 3 : Gs

HEART



**PHOSPHORYLATION OF L-TYPE CALCIUM CHANNELS
INCREASE OF CICR (CALCIUM INDUCED CALCIUM RELEASE)
----> POSITIVE INOTROPIC EFFECT**

VASAL SMOOTH MUSCLE

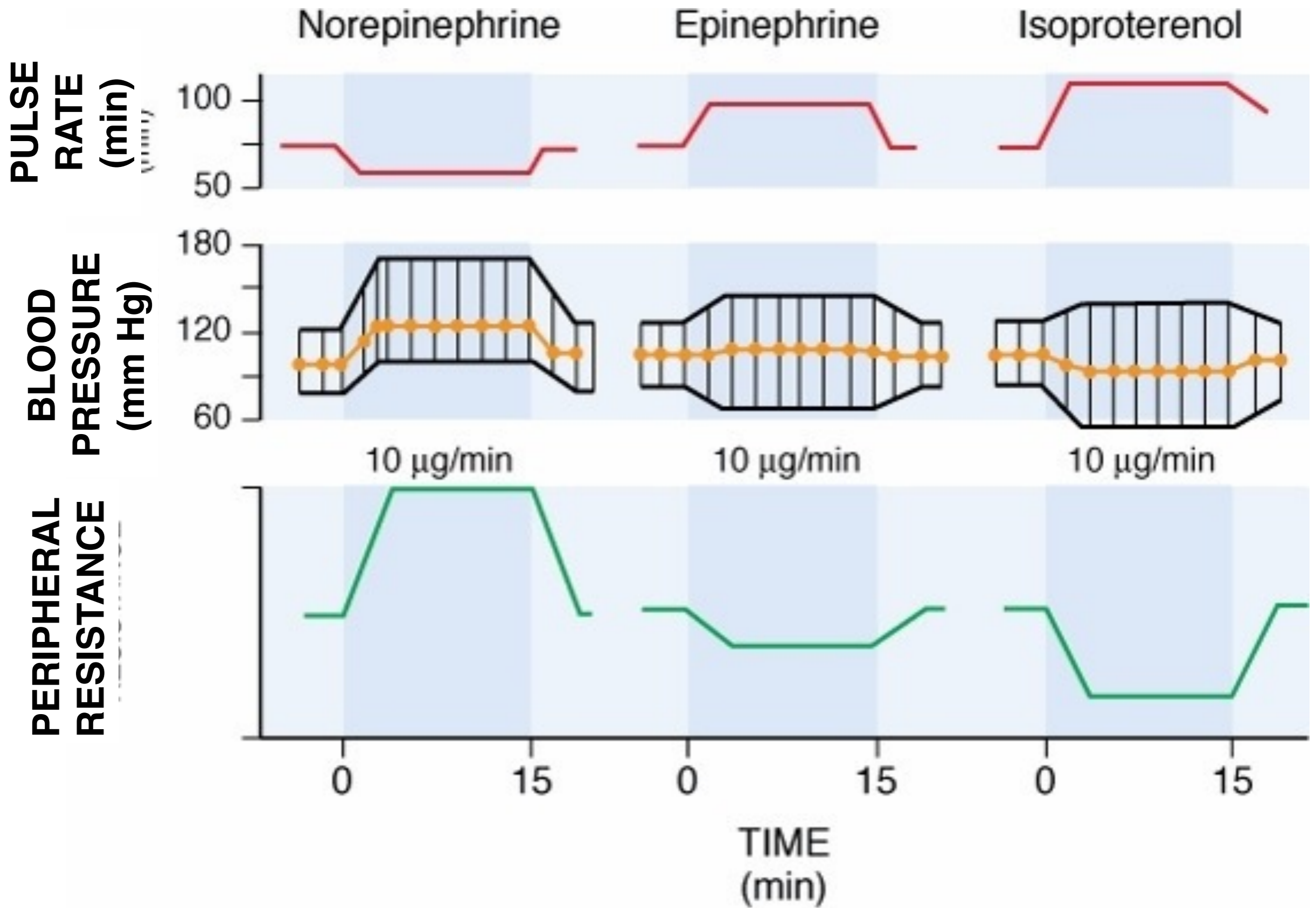


INHIBITION OF MLCK (MYOSIN LIGHT CHAIN KINASE) -----> VASODILATATION

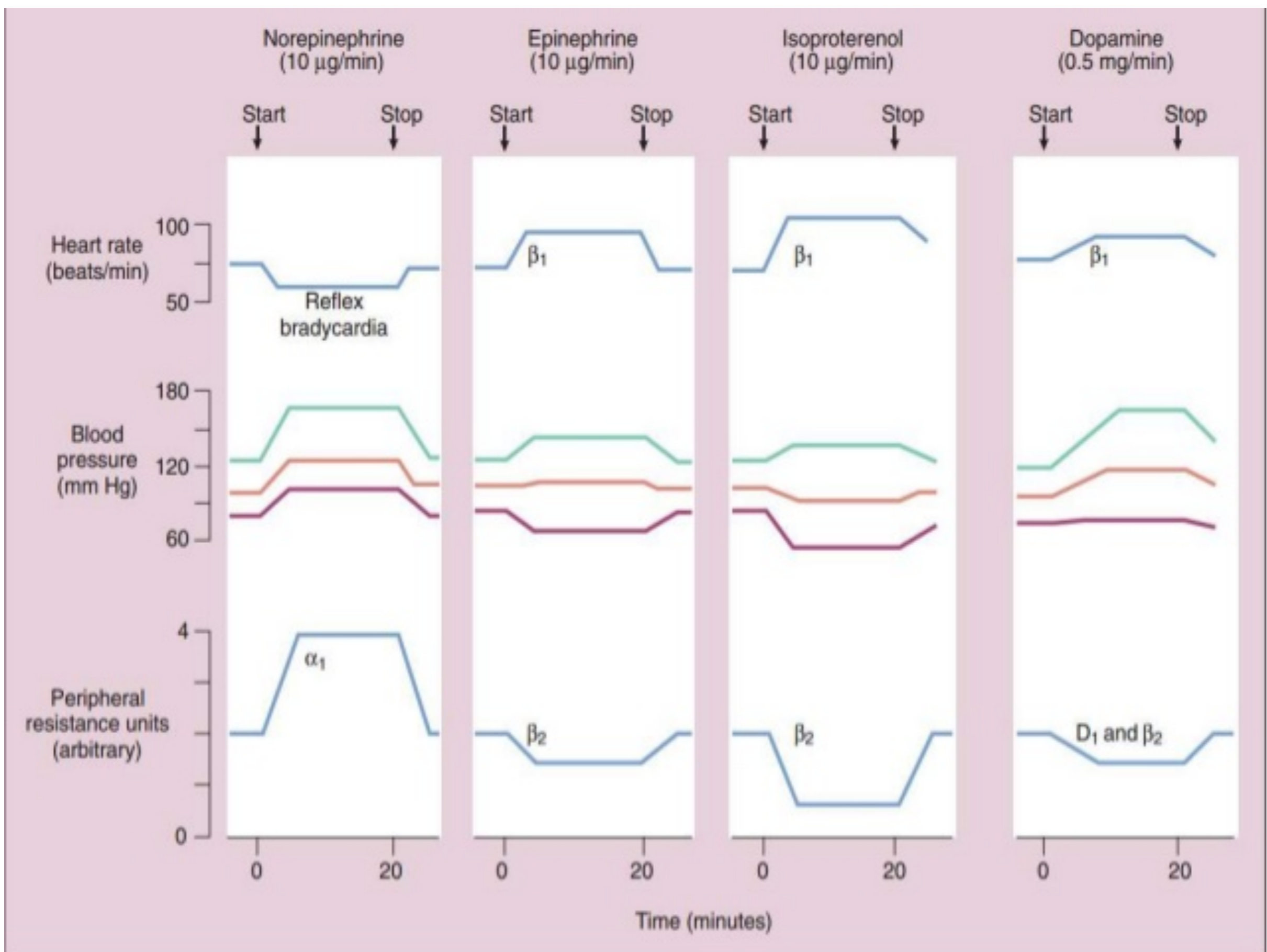
Beta ADRENERGIC RECEPTOR

SUBTYPE	AGONISTS	CLINICAL USES
Beta 1	Dobutamine	Cardiogenic shock
Beta 2	Salbutamol Terbutaline Formoterol	Asthma
Beta 3	Mirabegron	Symptoms of overactive bladder

SUBTYPE	ANTAGONISTS	CLINICAL USES
Beta 1	Propranolol Alprenolol Metoprolol Nevibolol	Angina pectoris Hypertension Cardiac dysrhythmias (Anxiety, tremor)
Beta 2	Butoxamine	None
Beta 3	None	



Effect of intravenous infusion of Norepinephrine, Epinephrine or Isoproterenol in human beings



Effect of intravenous infusion of Norepinephrine, Epinephrine or Isoproterenol in human beings

BAROCEPTOR, CHEMOCEPTOR AND CARDIOVASCULAR REGULATION

