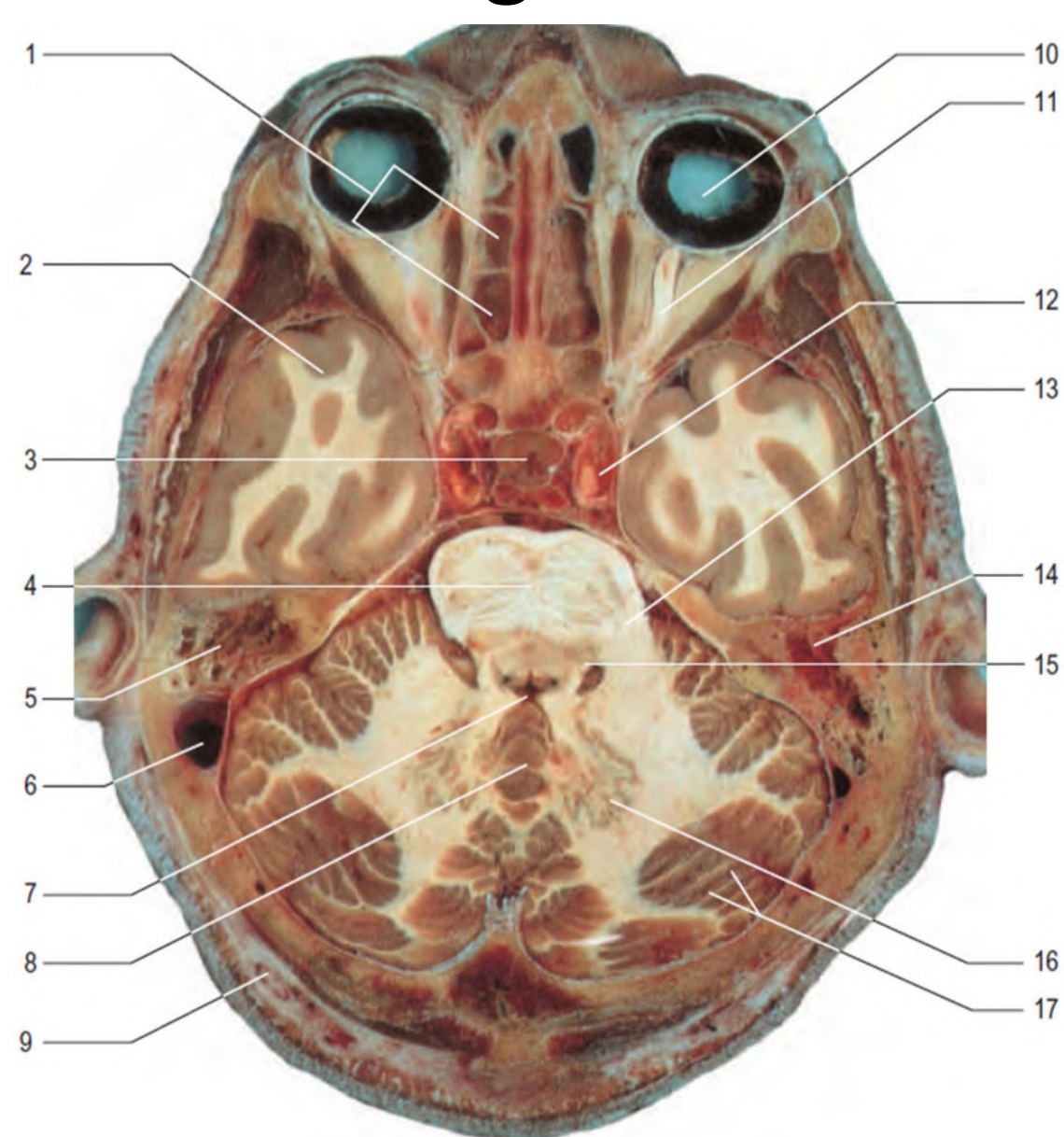


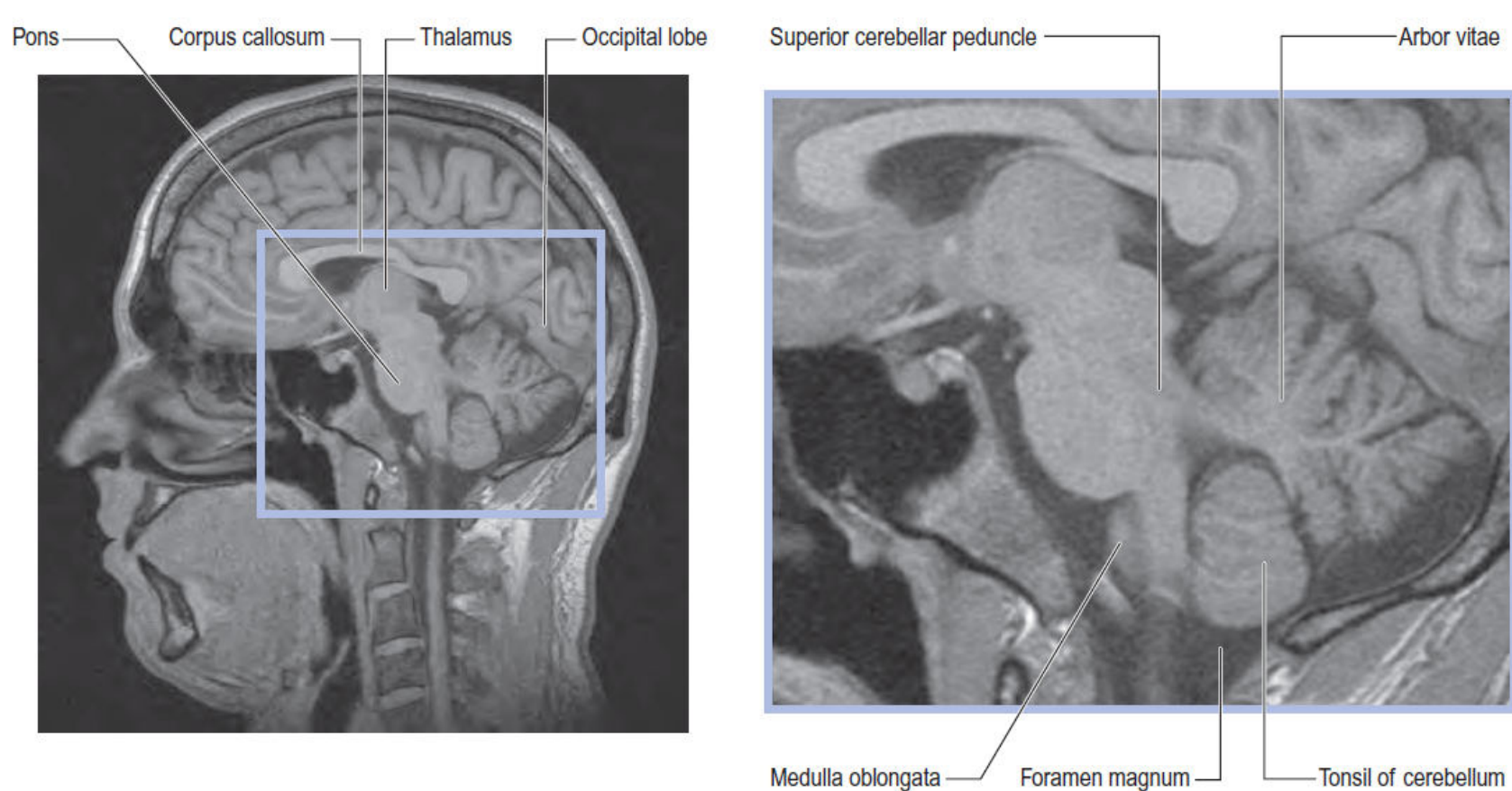
Learning Objectives

- Introduction
- Relations
- External Features
 - Parts of cerebellum
 - Morphological and functional divisions of cerebellum
- Internal Organizations
 - Cerebellar cortex
 - Cerebellar Grey Matter/Nuclei
- Connections of Cerebellum
- Blood Supply and Venous Drainage
- Clinical Correlates

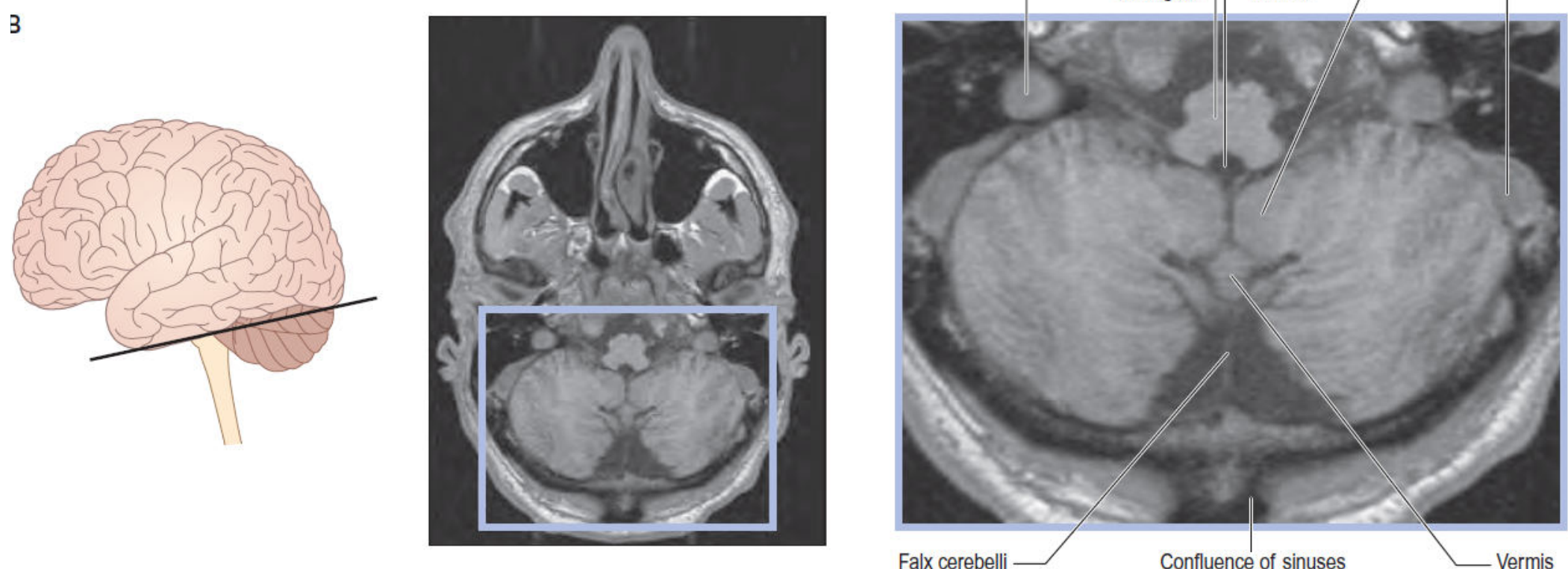
A horizontal section through the cerebellum and brainstem



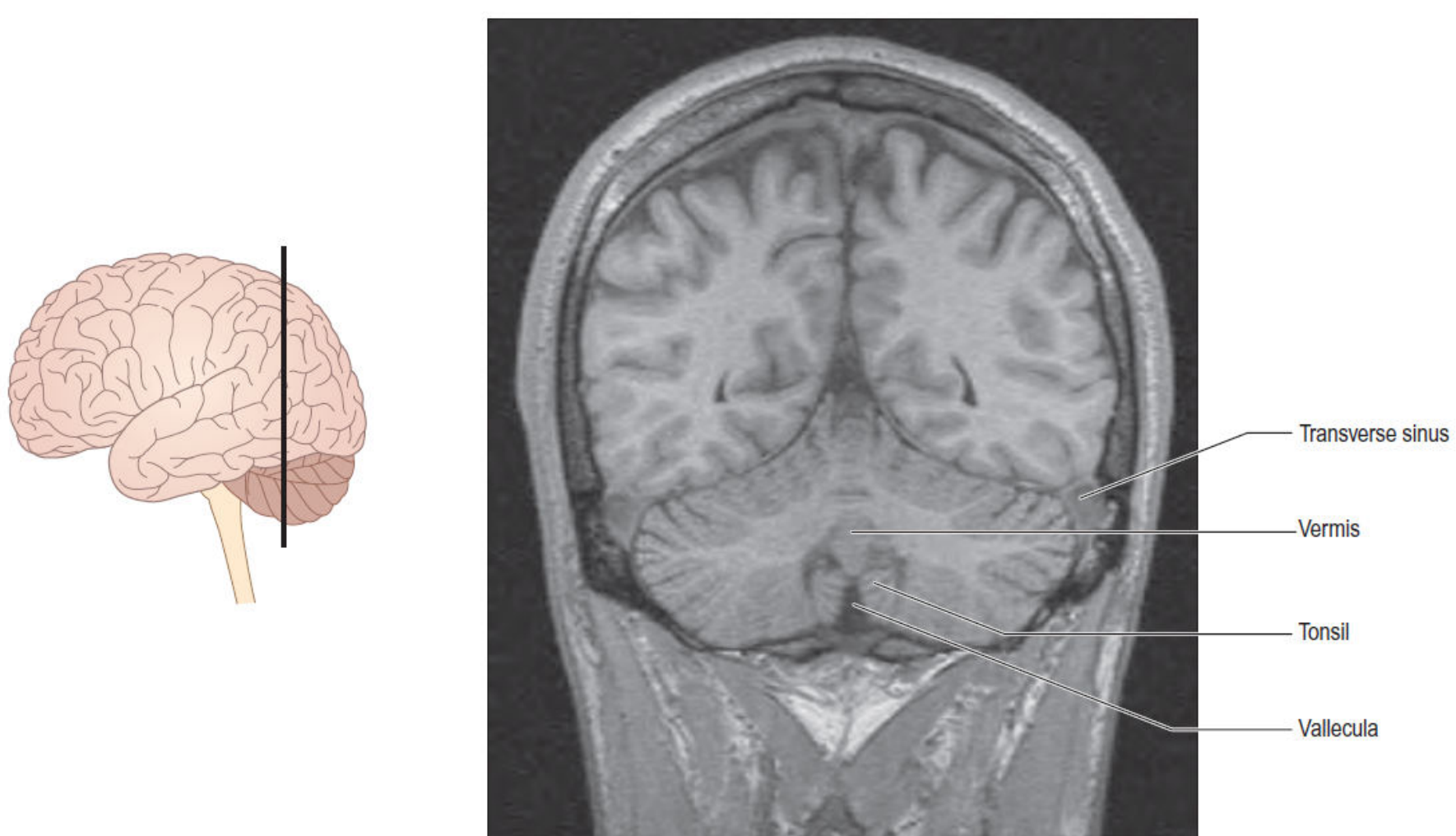
MRI images of the cerebellum of a 16-year-old female. **Sagittal view**



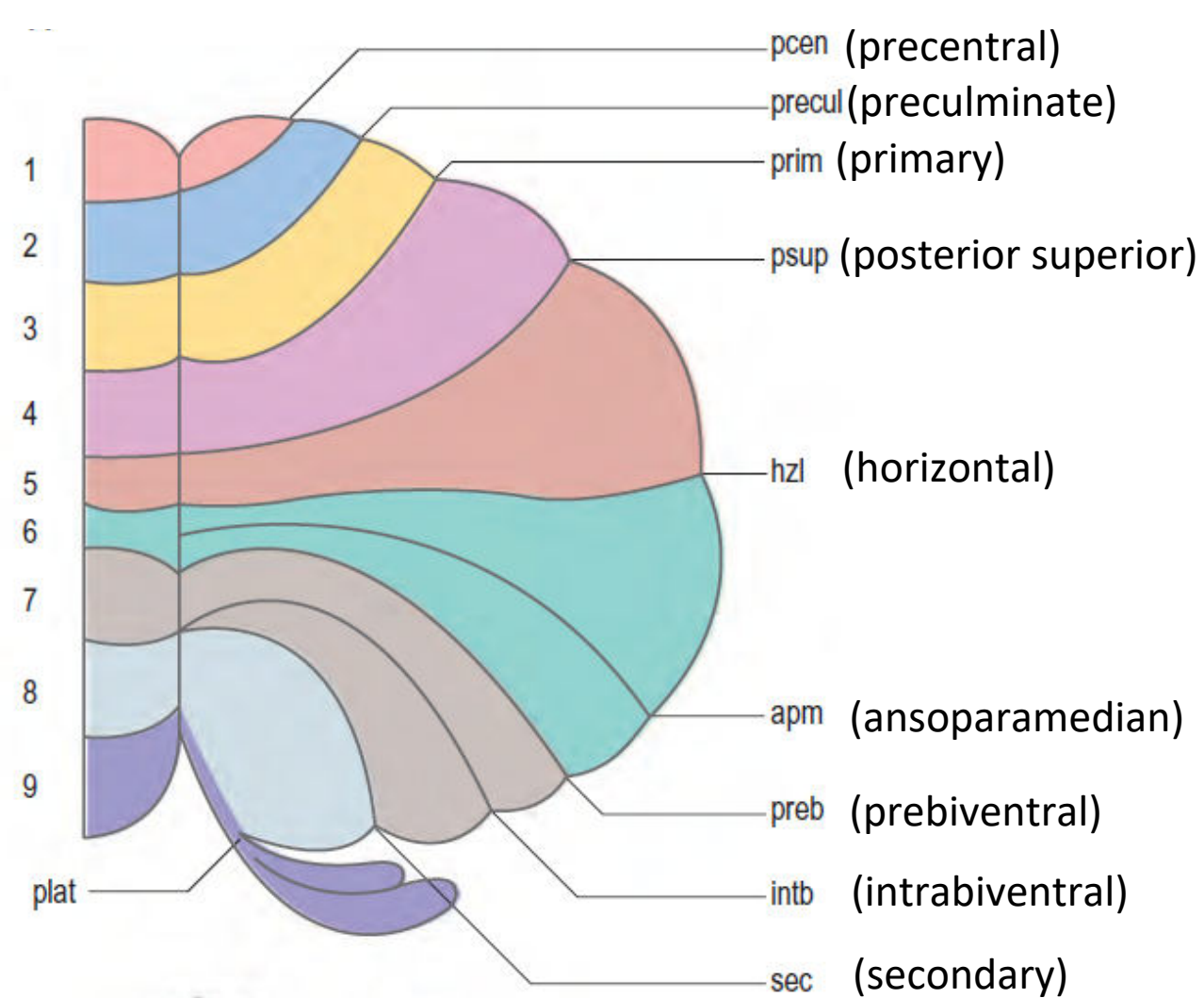
MRI images of the cerebellum of a 16-year-old female. **Axial view**



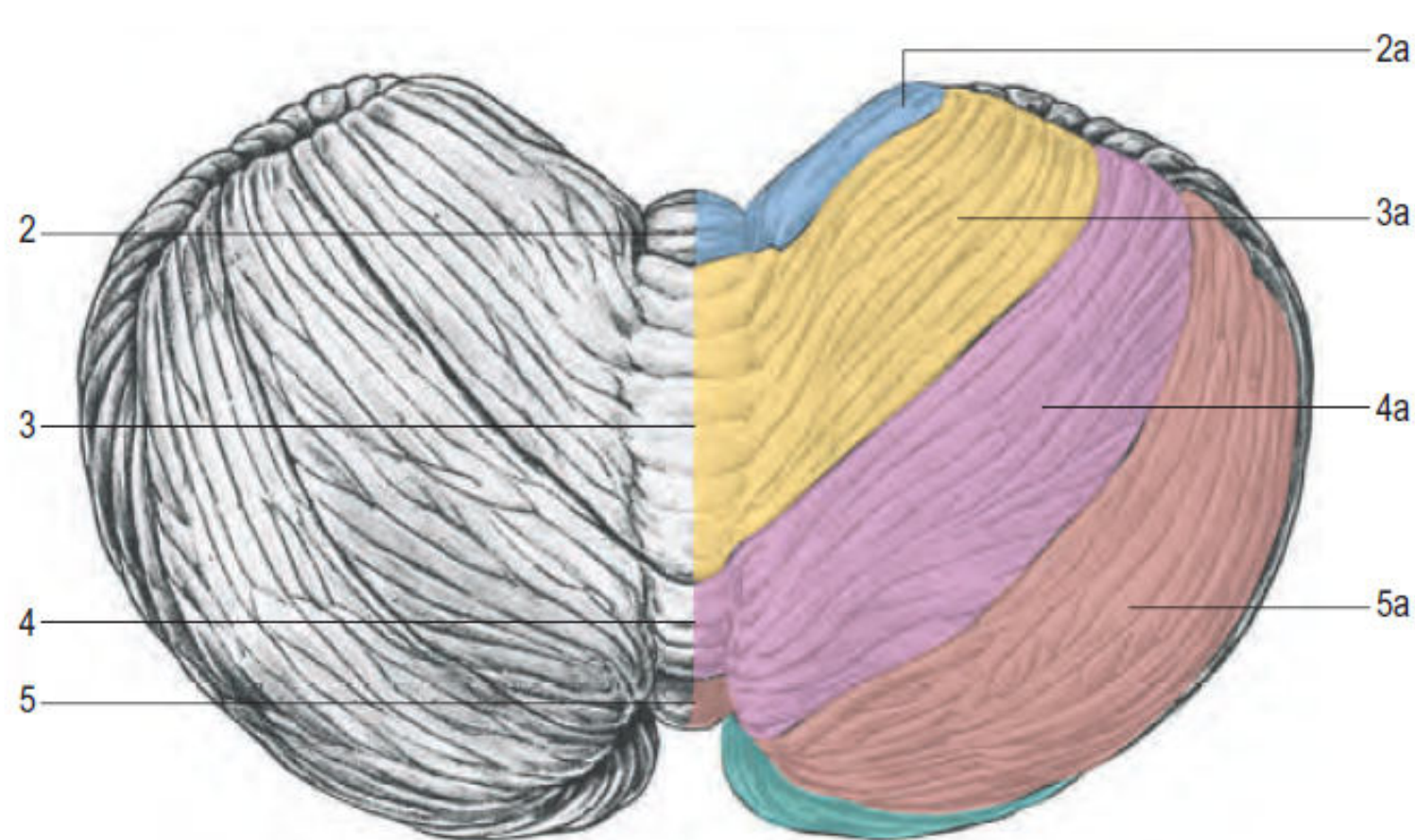
MRI images of the cerebellum of a 16-year-old female. **Coronal view**



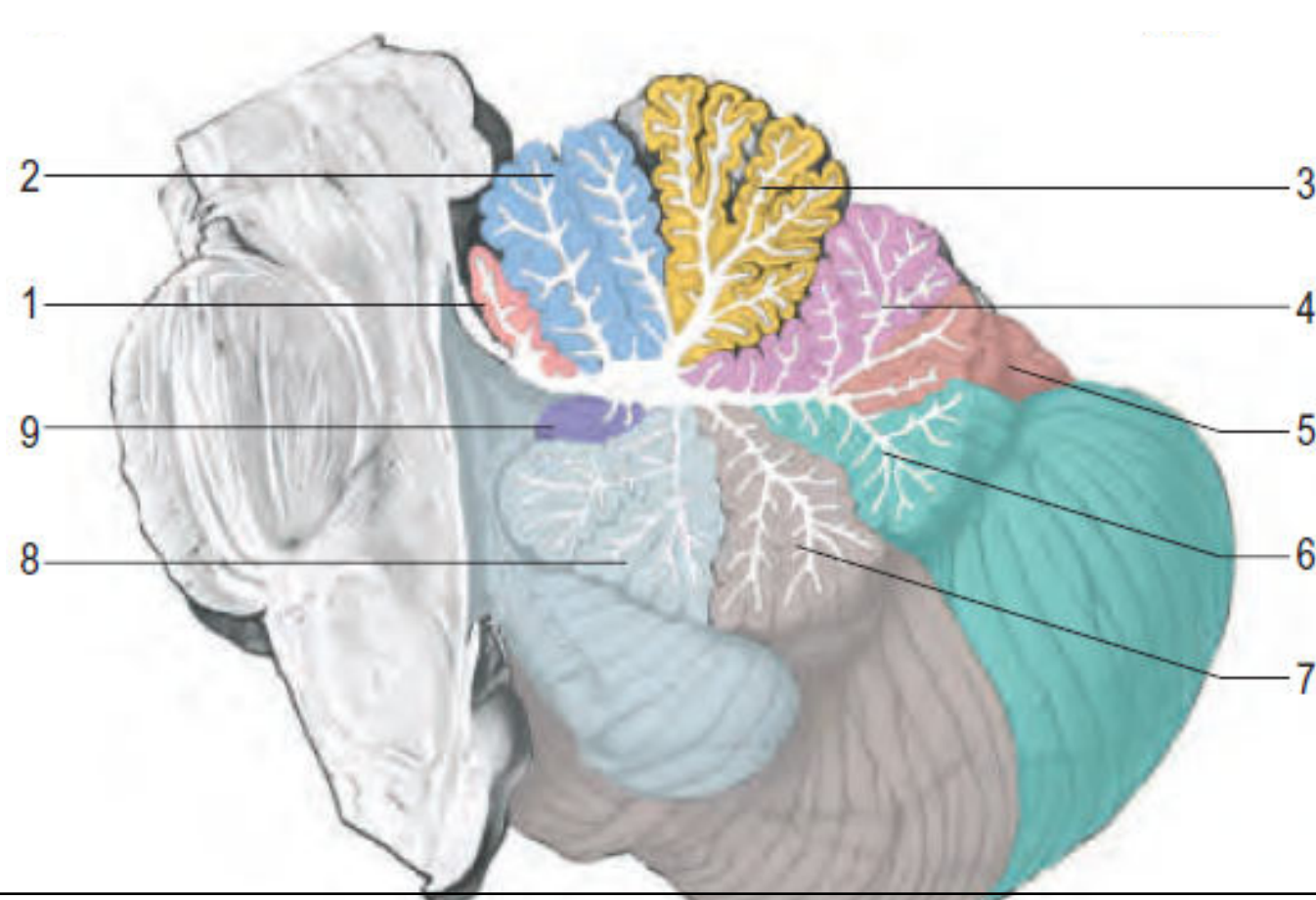
Unrolled cerebellar cortex



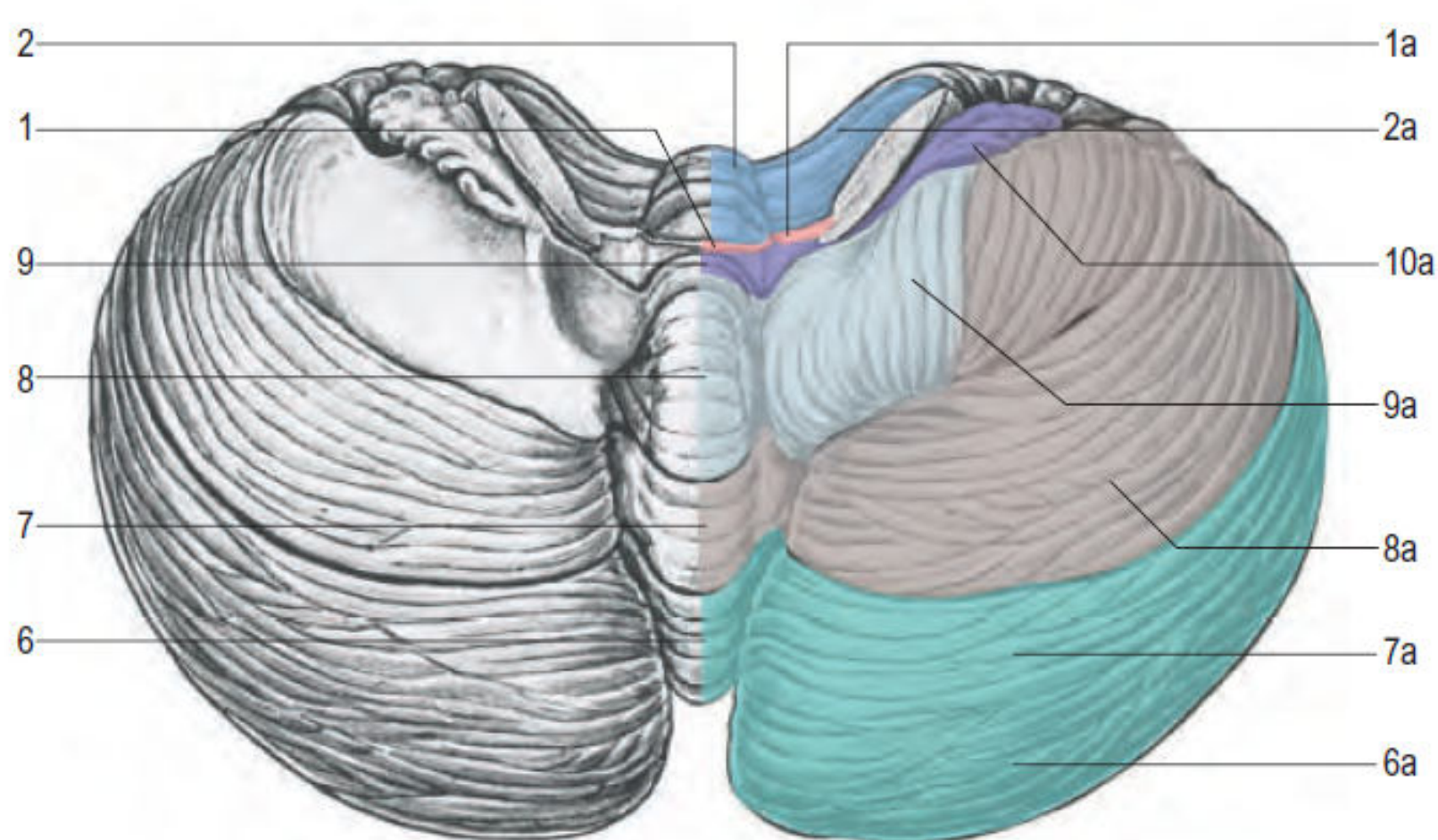
The cerebellum viewed from above



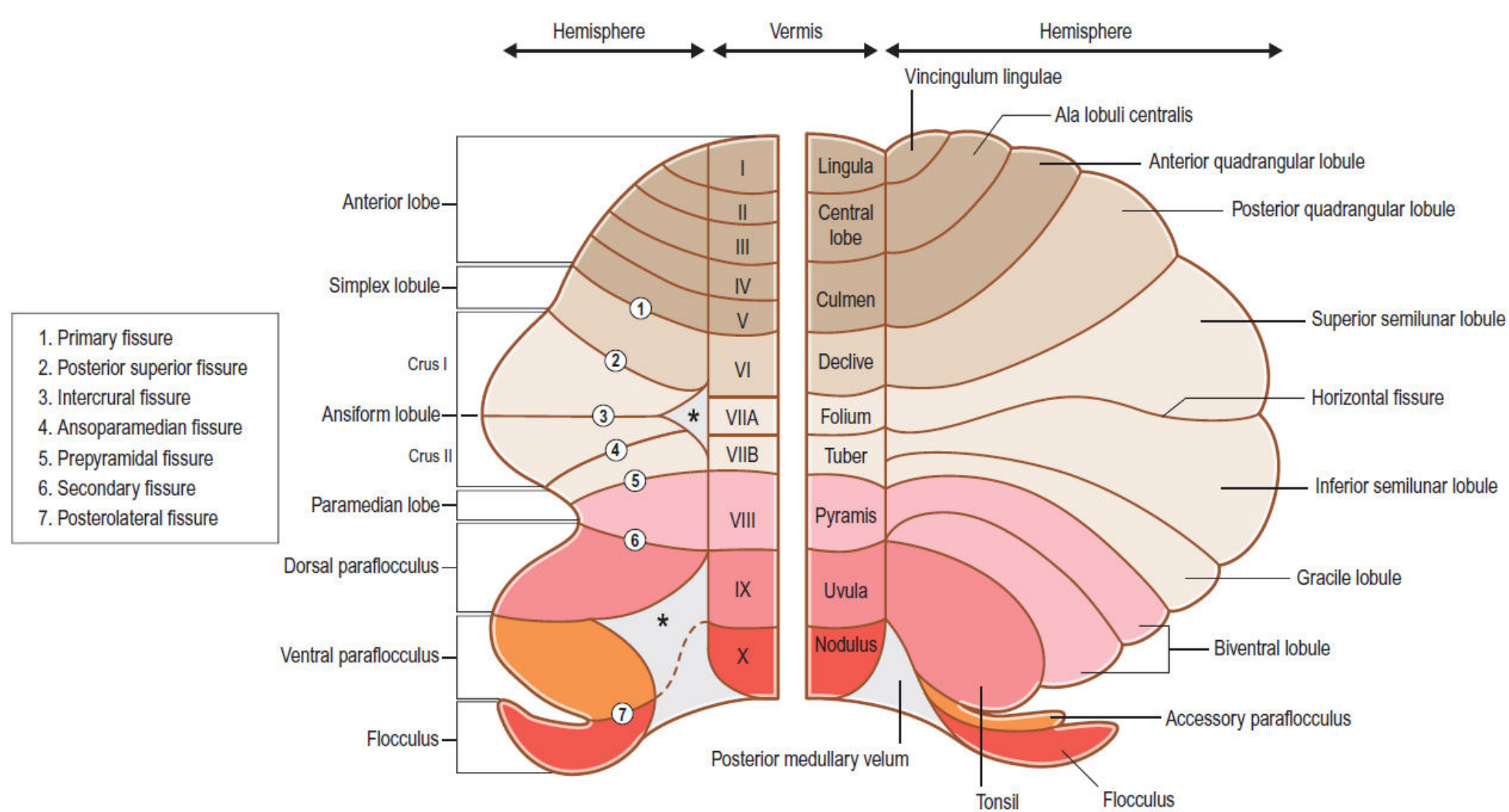
A median sagittal section of cerebellum



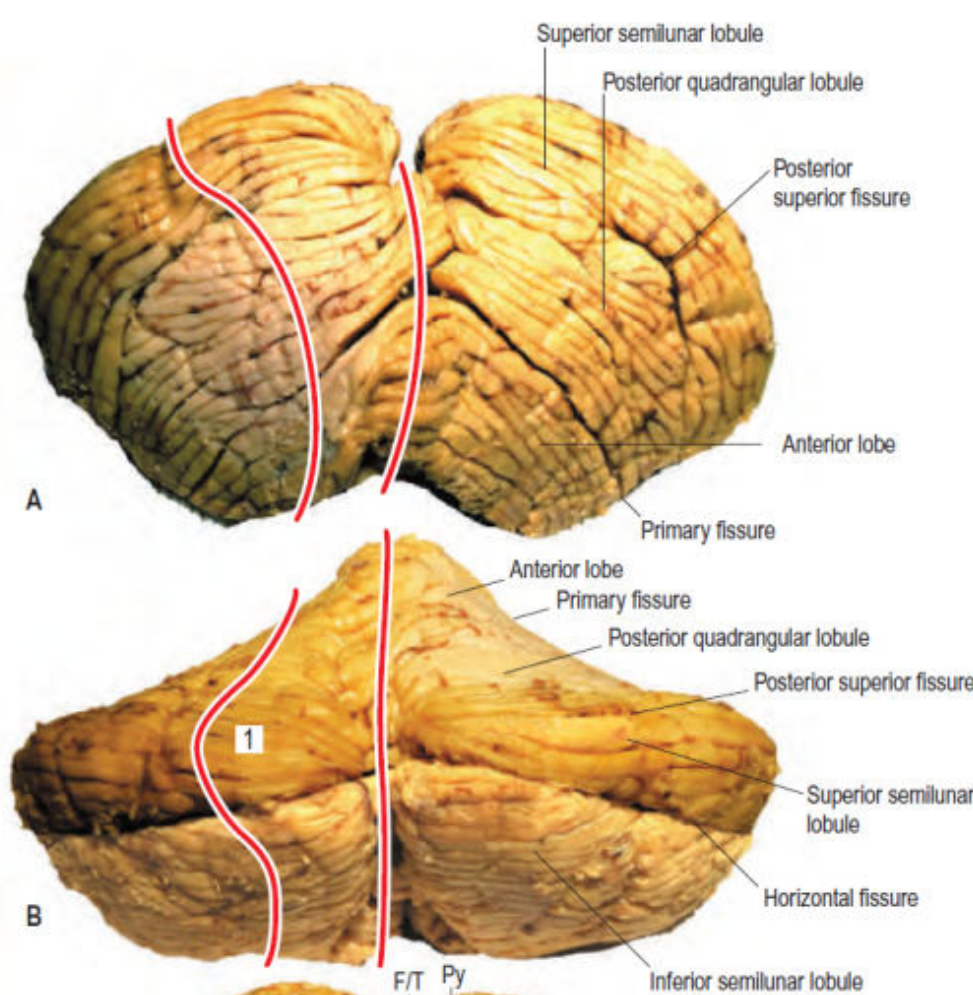
The cerebellum viewed from below



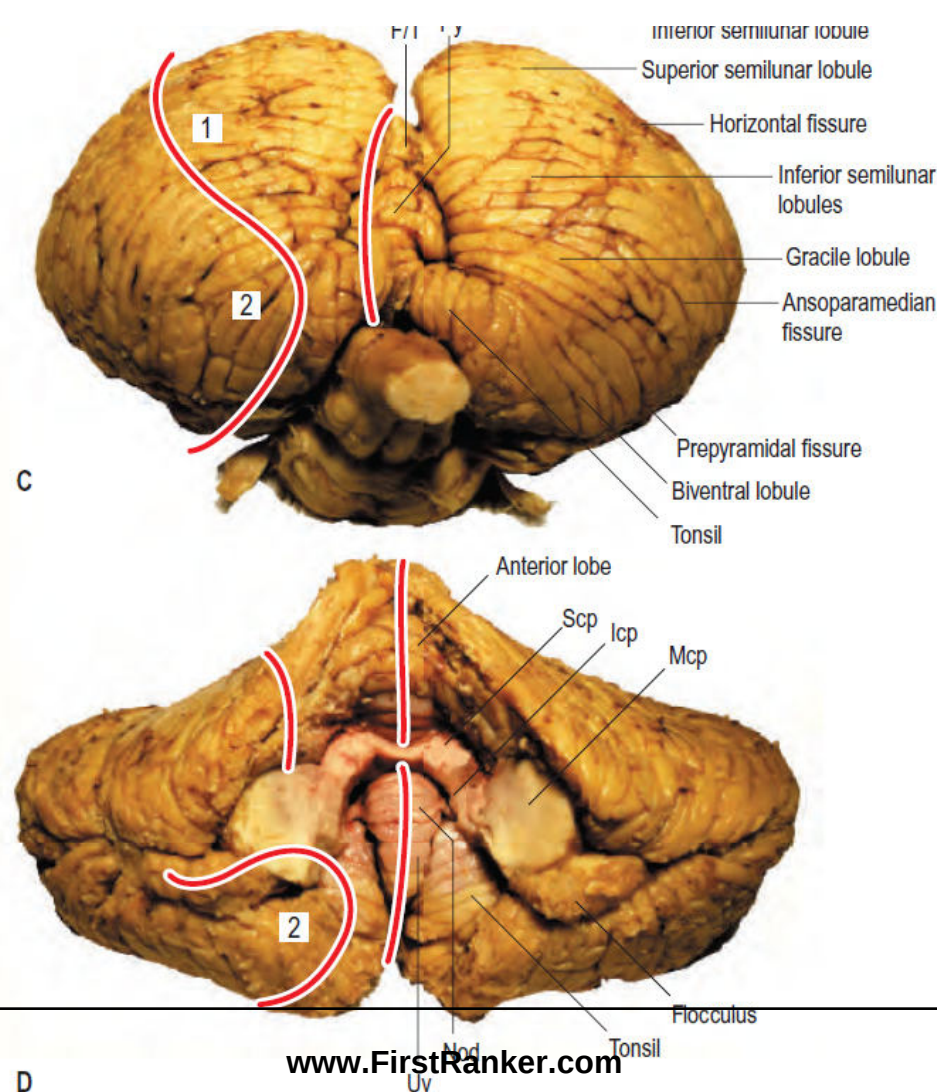
Comparative Anatomical Nomenclature Classical Nomenclature and Larsell's numbering



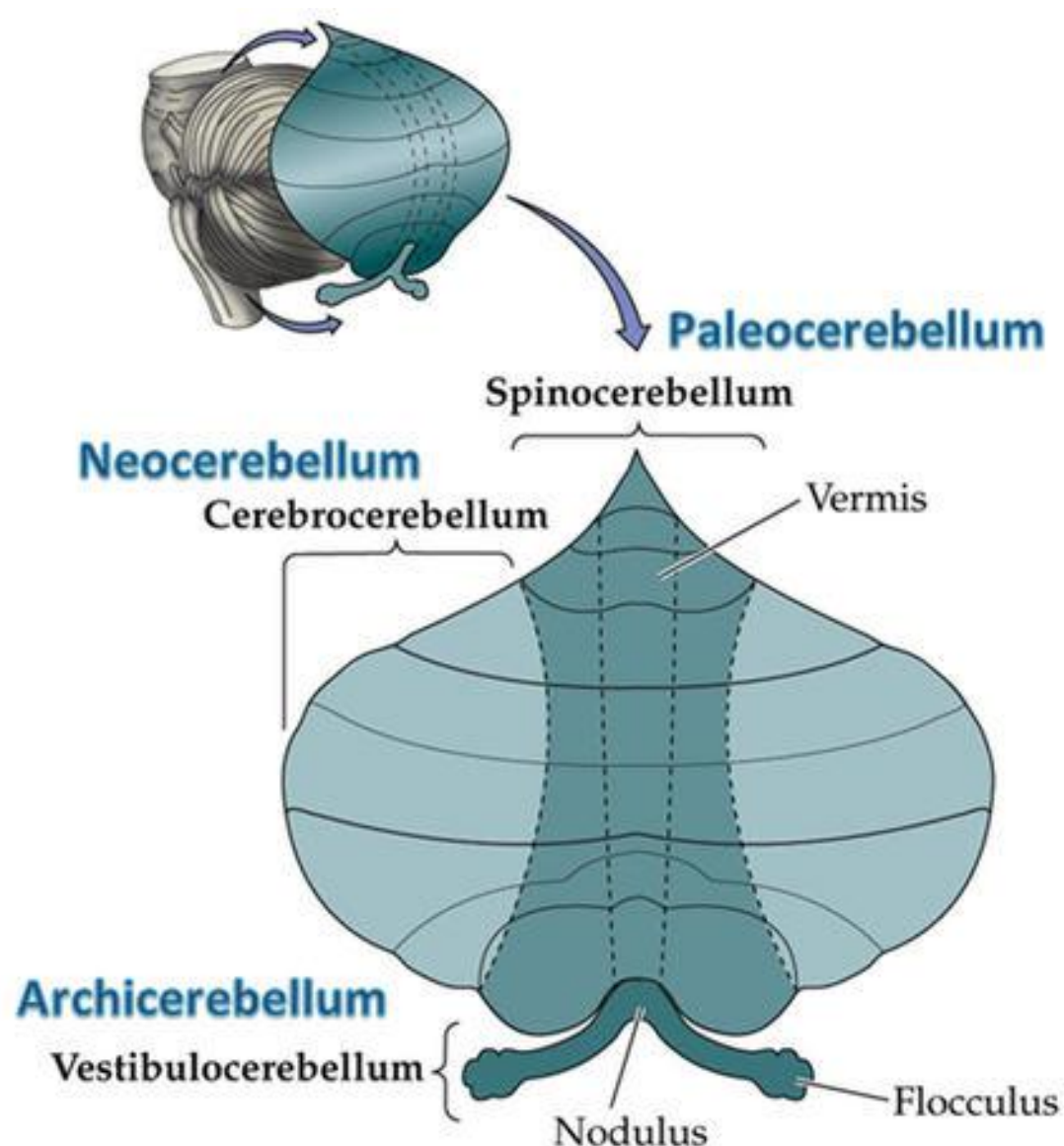
Anterior and dorsal, views of the human cerebellum



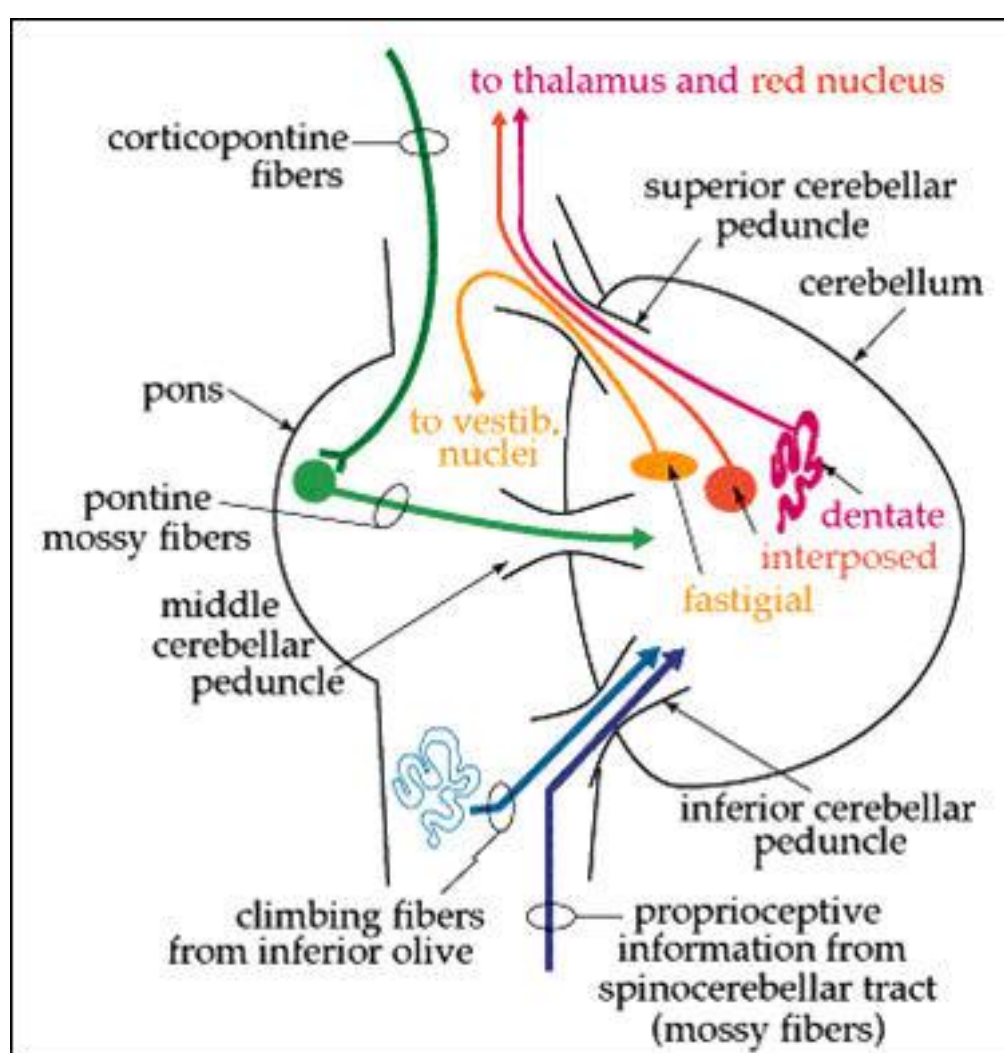
Posterior and ventral views of the human cerebellum



Functional Classification



Connections(Afferents and Efferents)



Cerebellar Dysfunction

- Visual problems, nystagmus
- Dysmetria or past pointing
- Difficulty with heel to shin tests
- Dysdiadochokinesia: rapid alternating movements
- Ataxia: staggering gait, in which the patient is unable to perform a “tandem” or heel to toe, walk
- Abnormal stance and wide-based gait

MCQs

Question- Which of the following corresponds to Larsell’s lobule V of vermis

- a. Central lobule
- b. Culmen
- c. Declive
- d. Folium