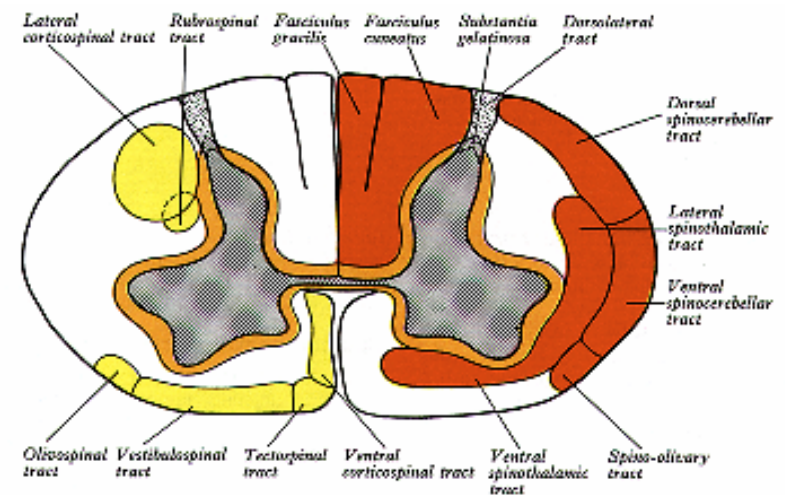
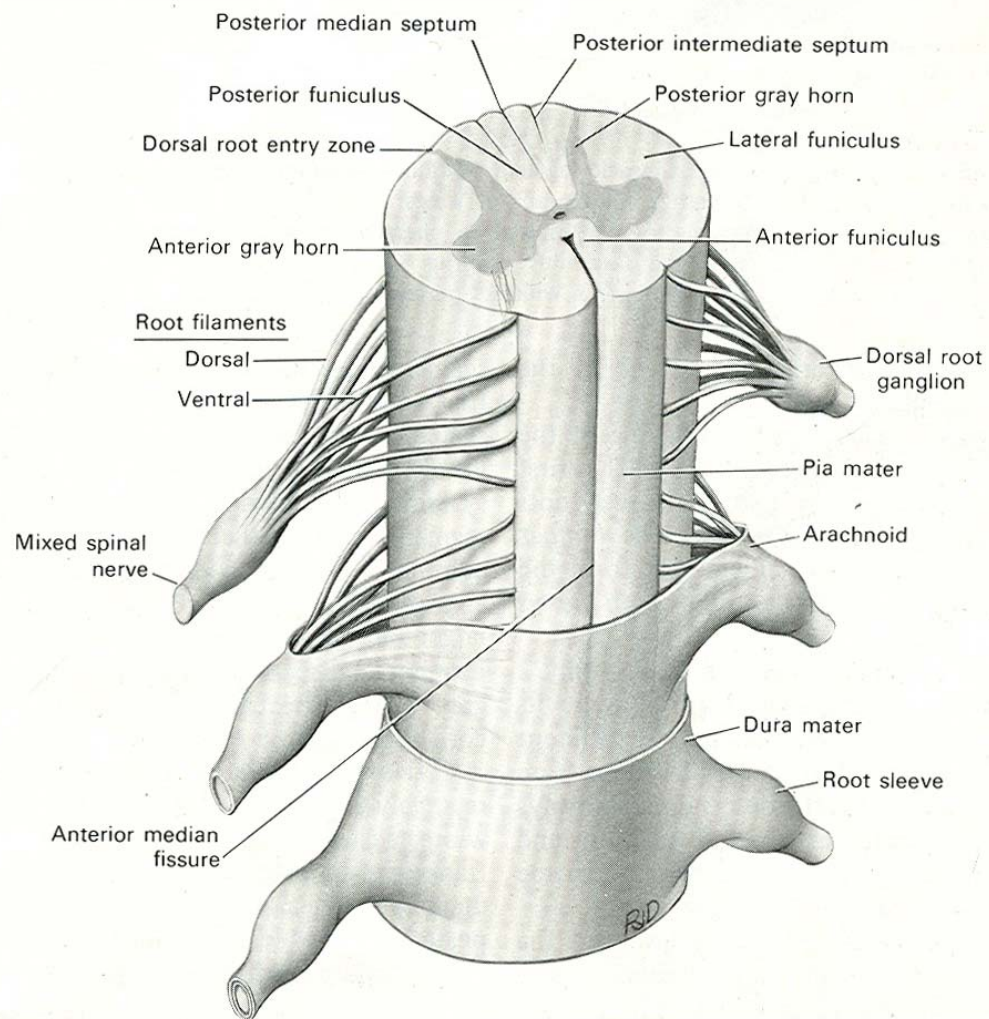
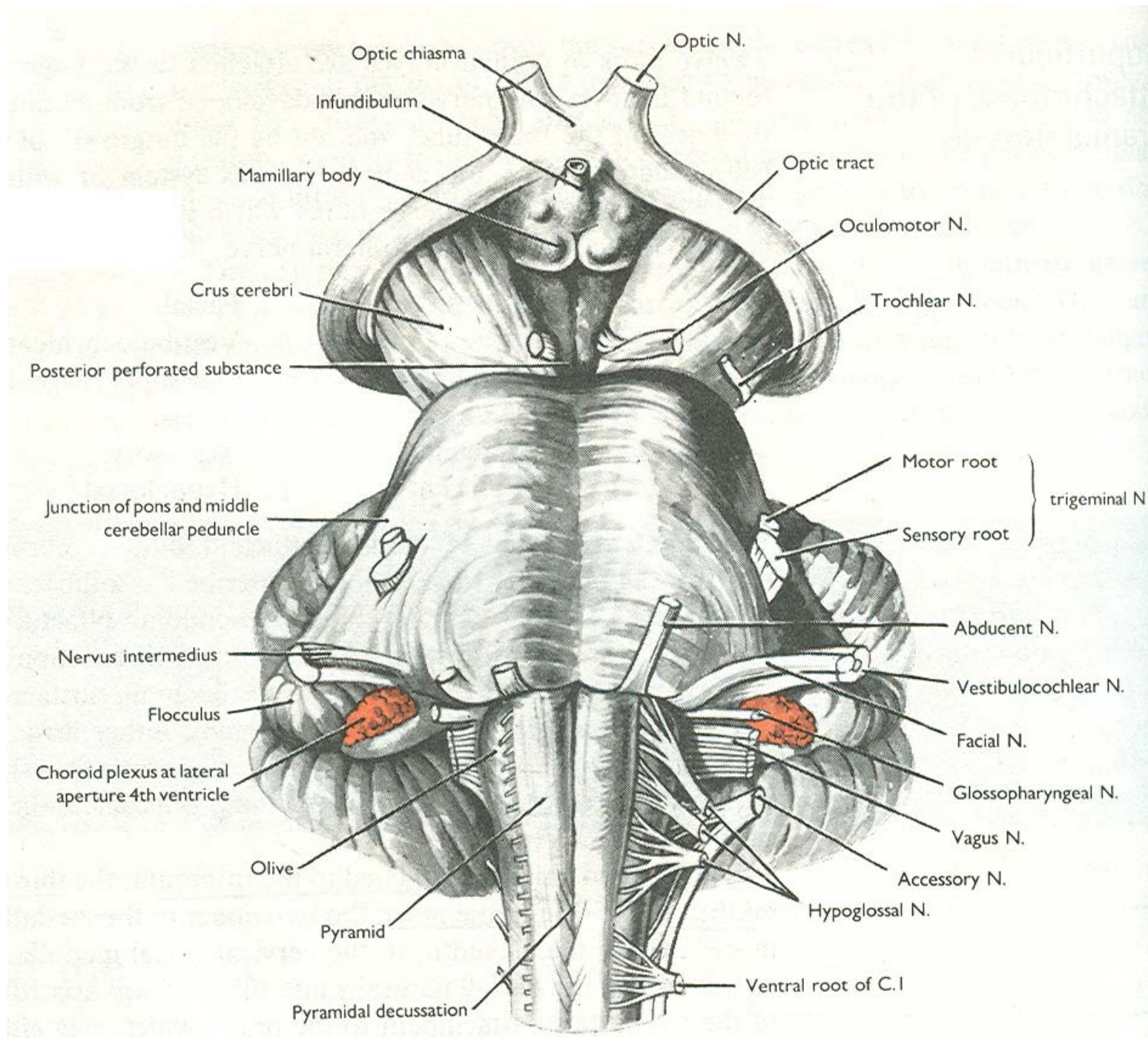
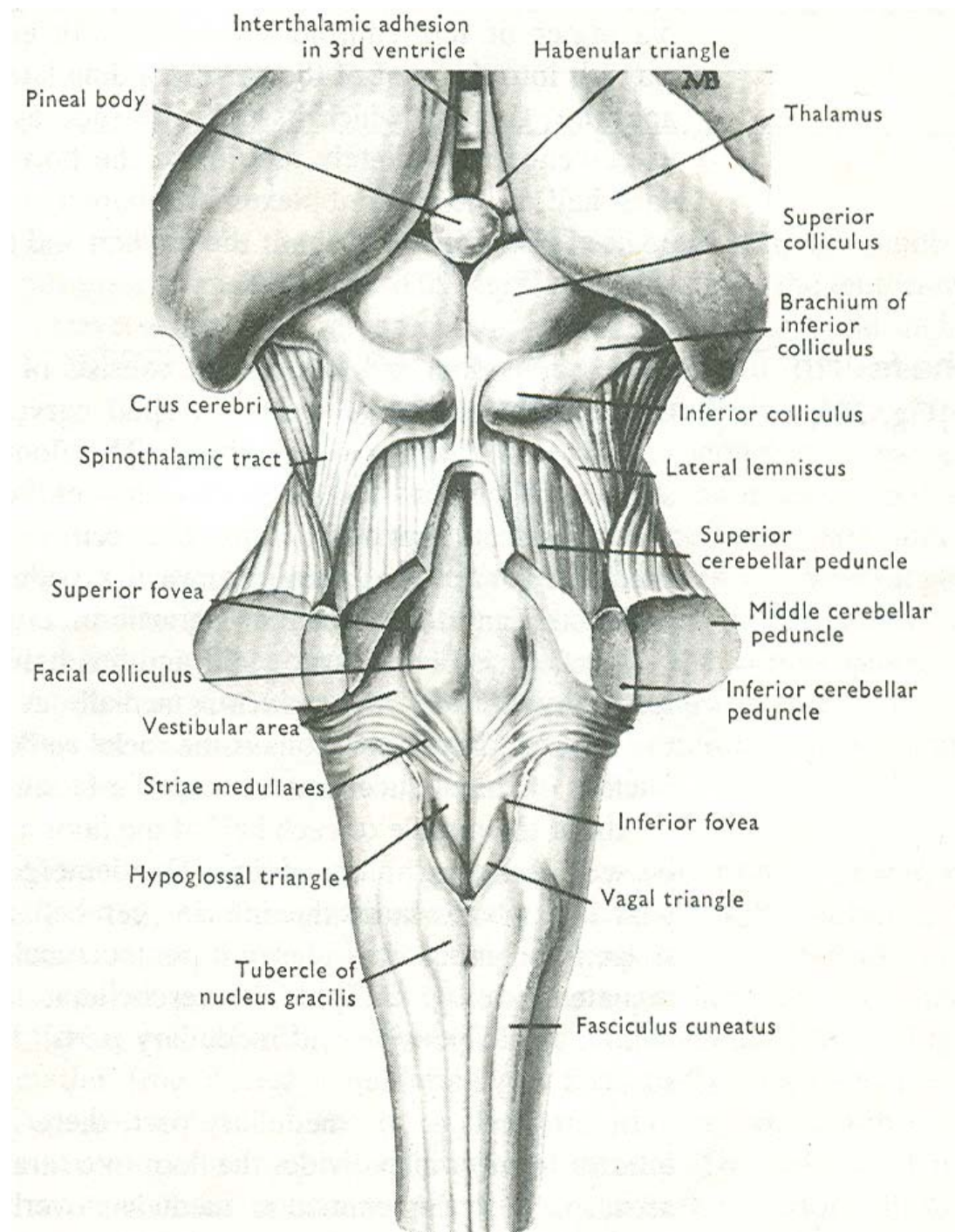
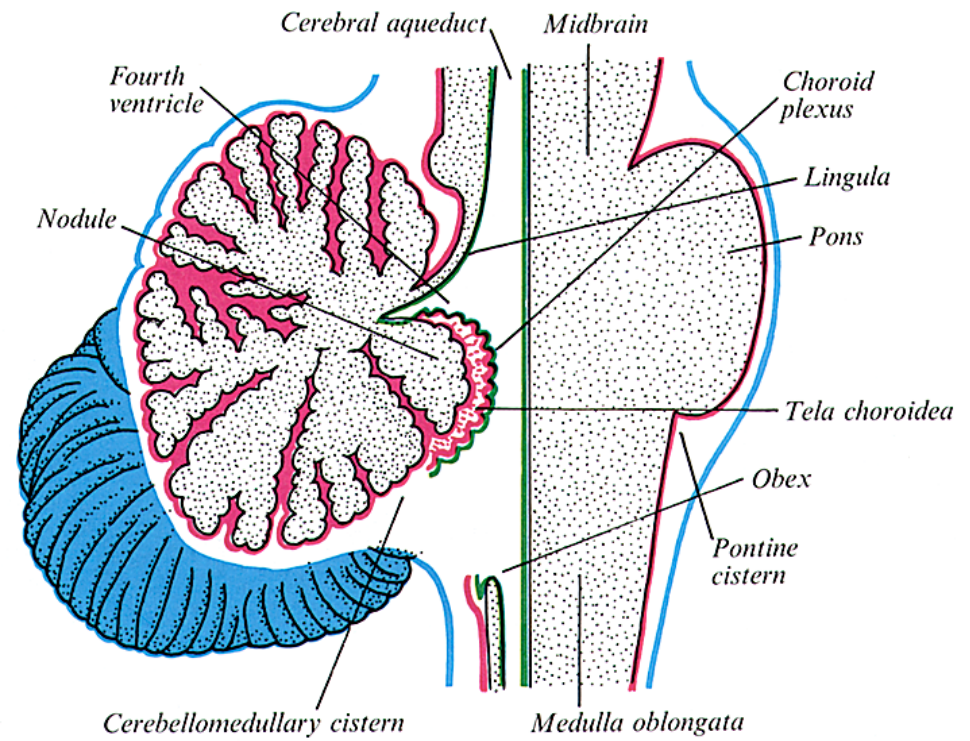
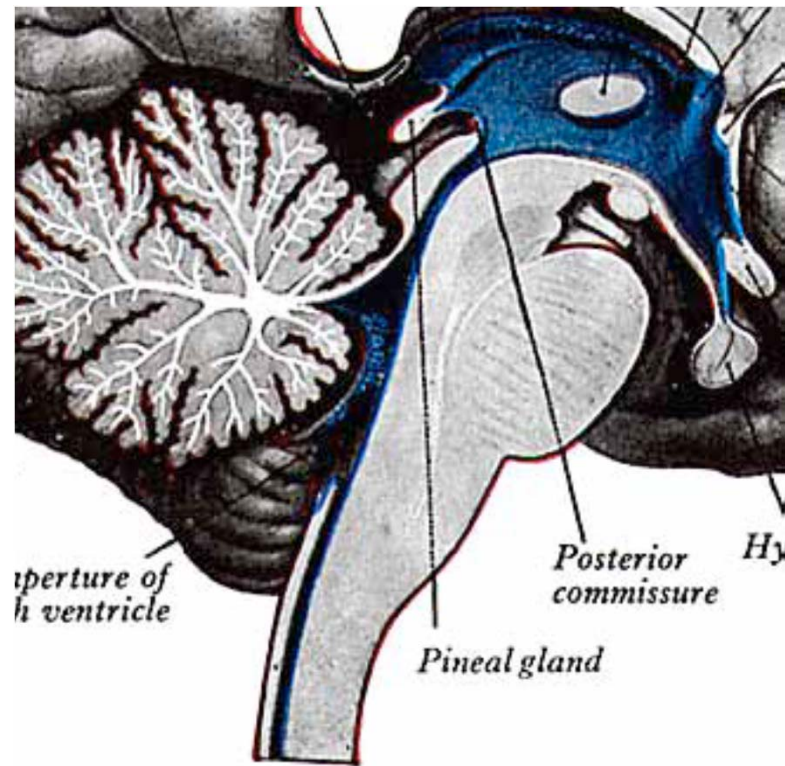
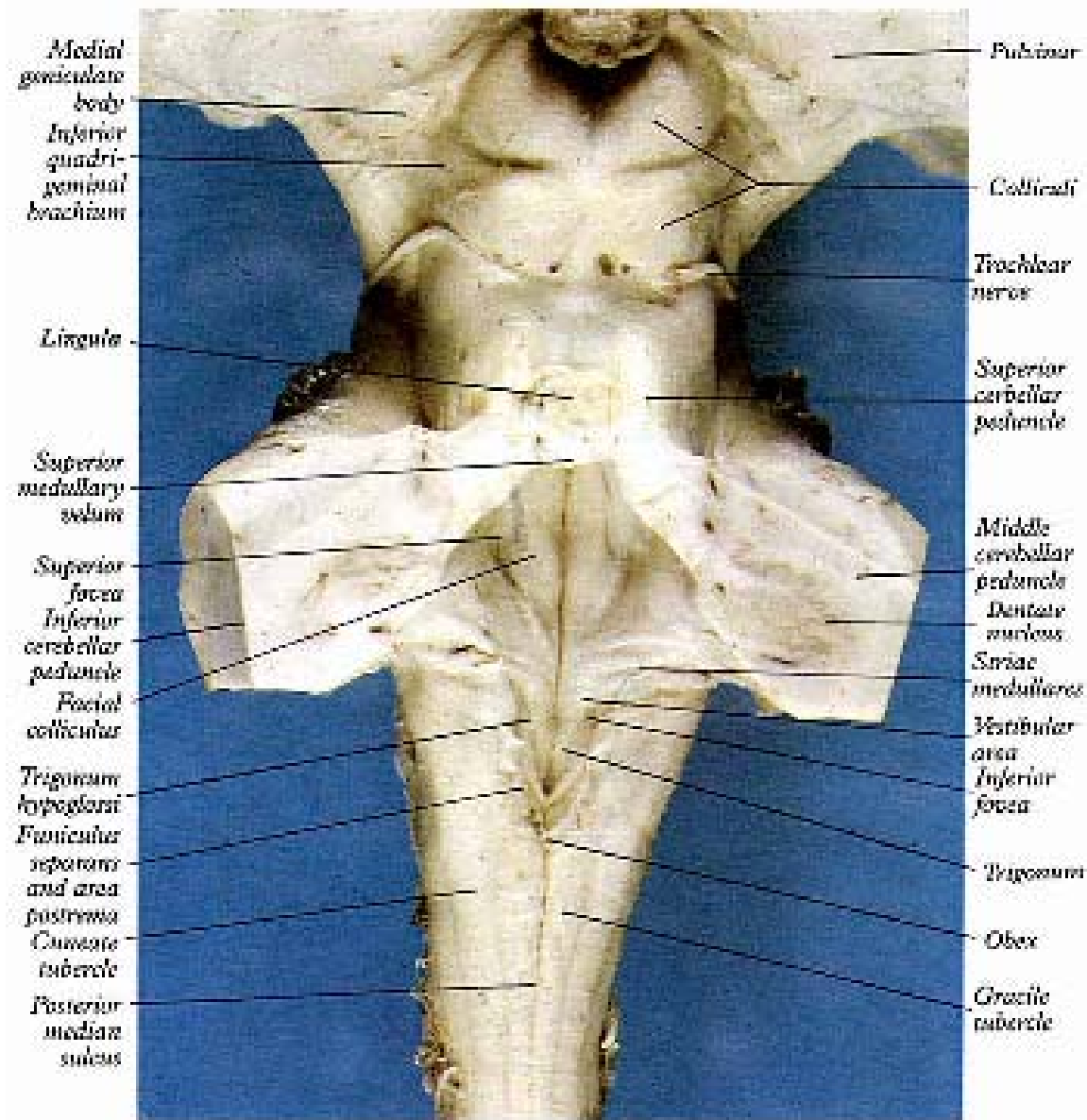


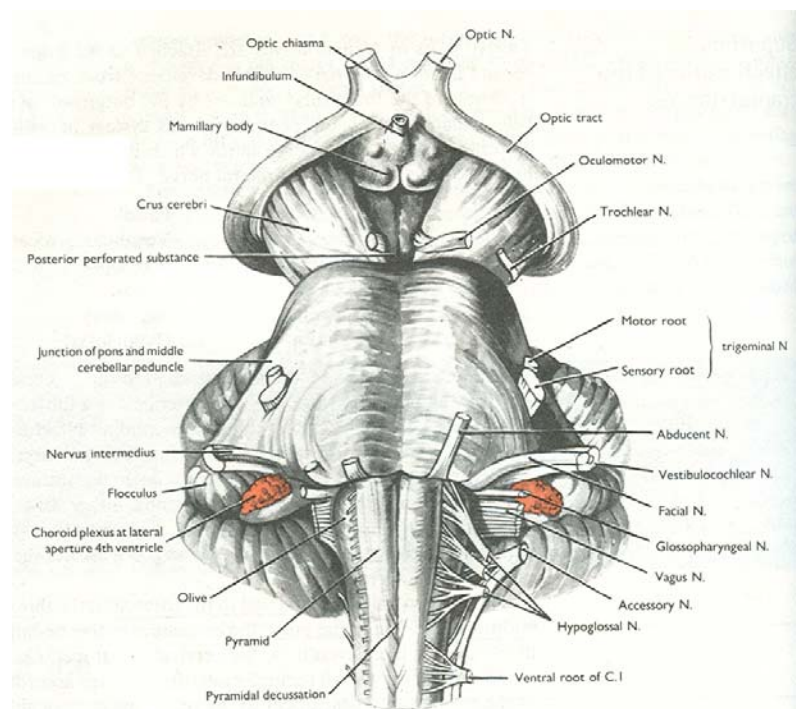
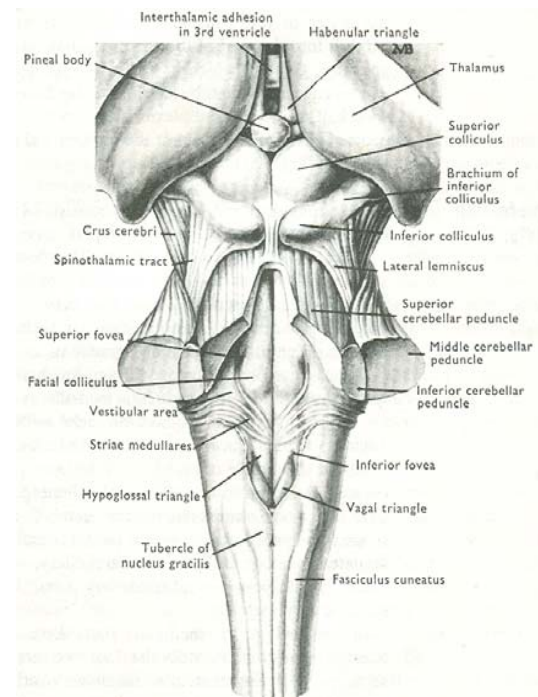
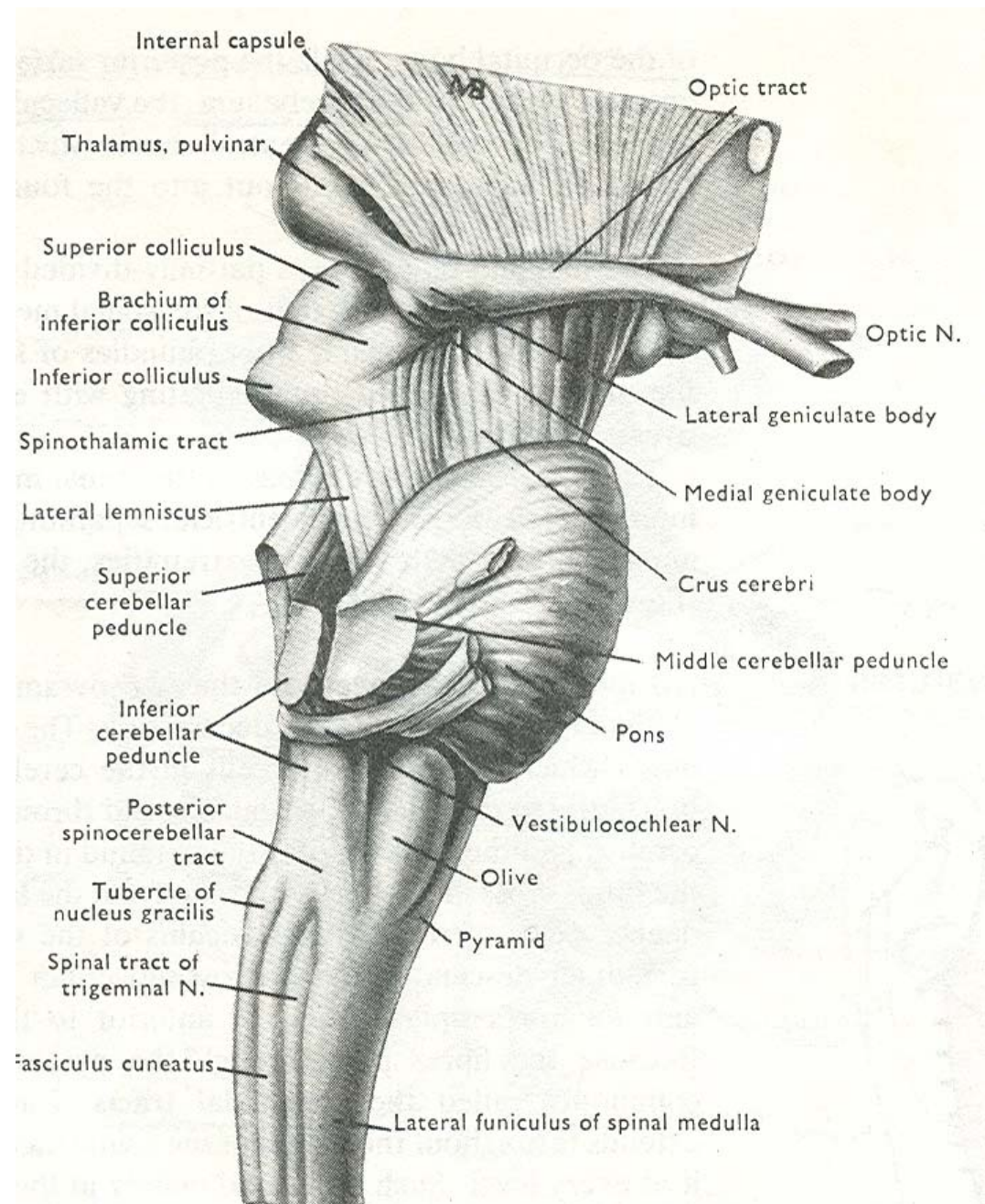


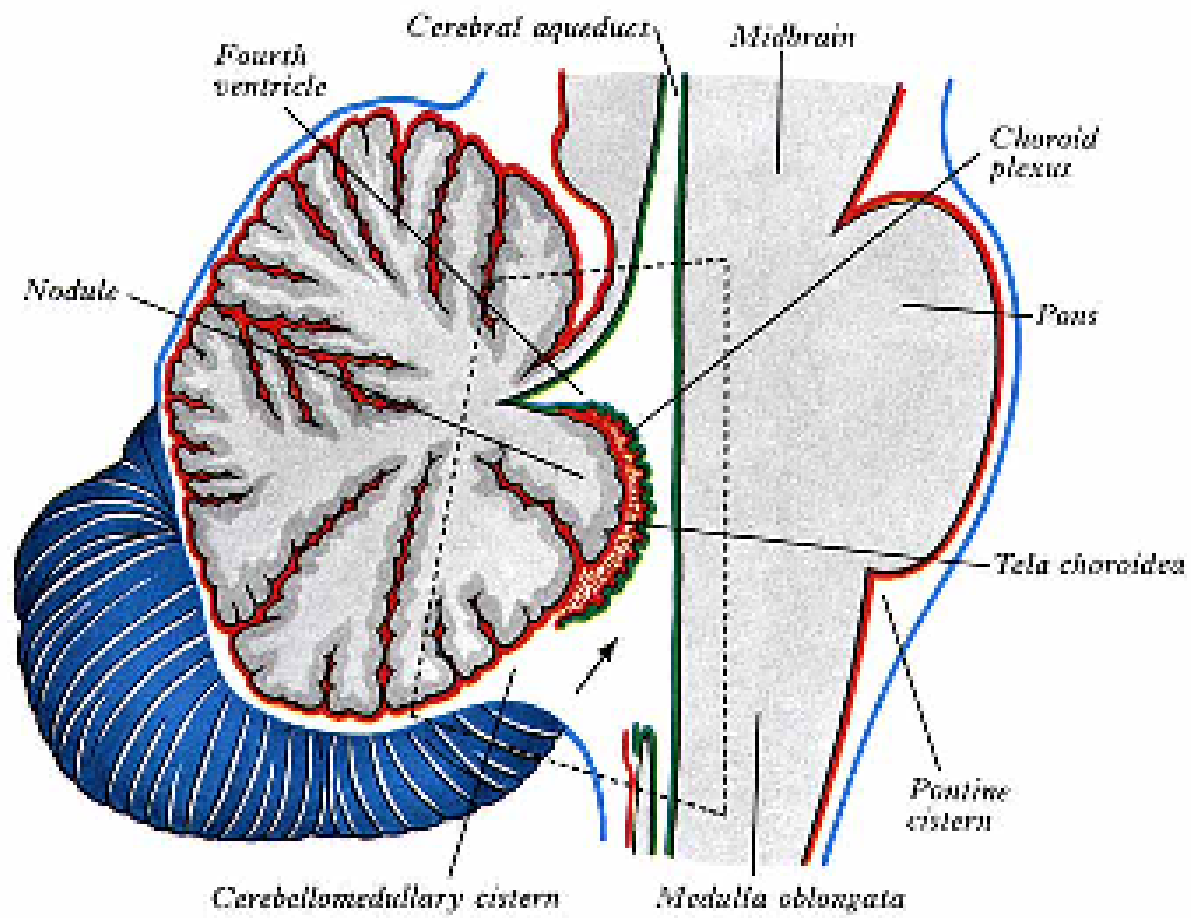


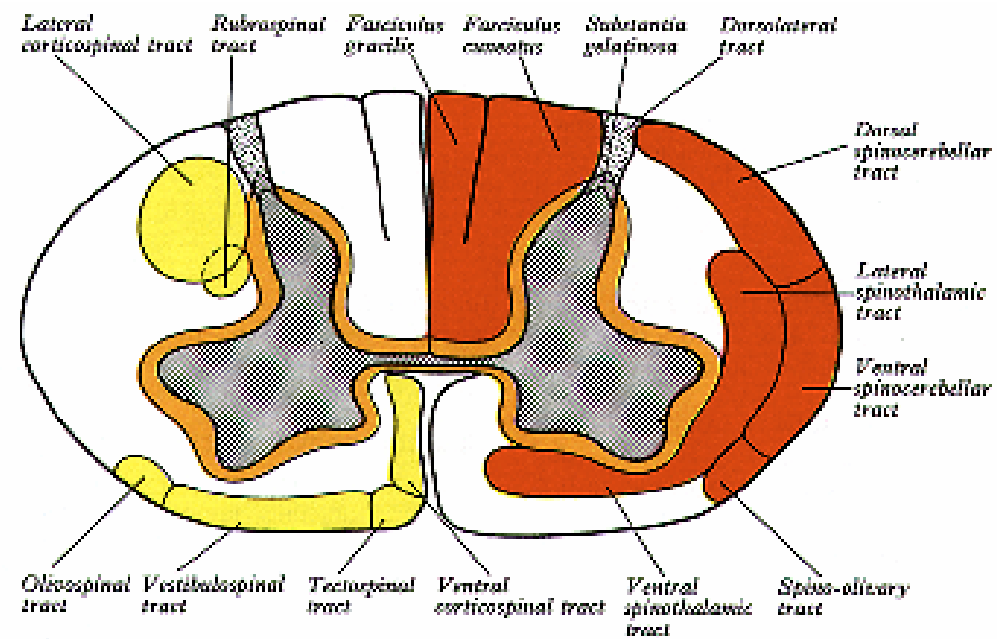


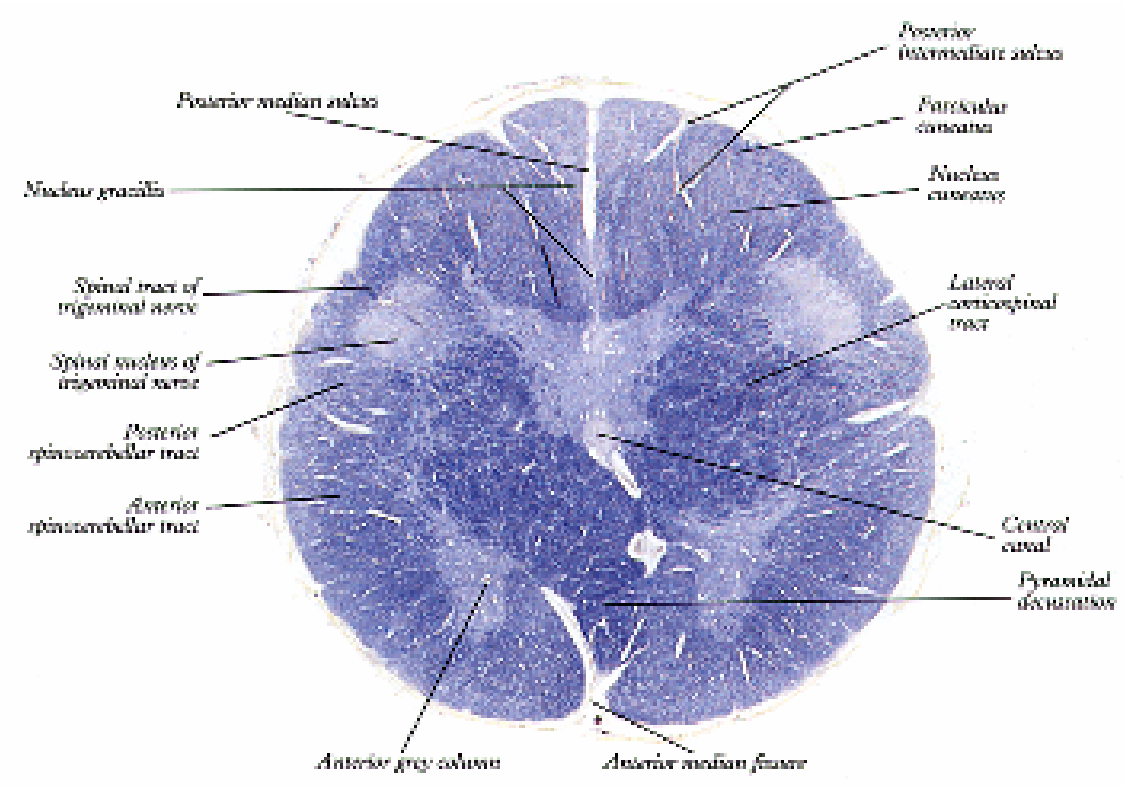
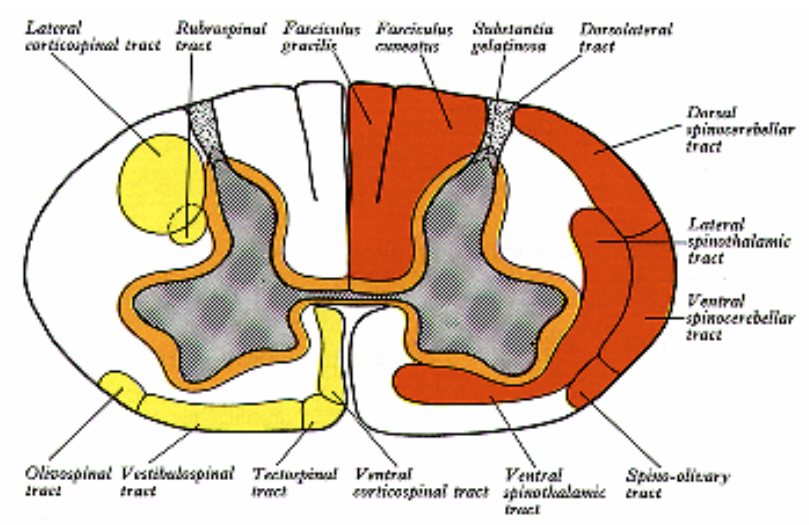


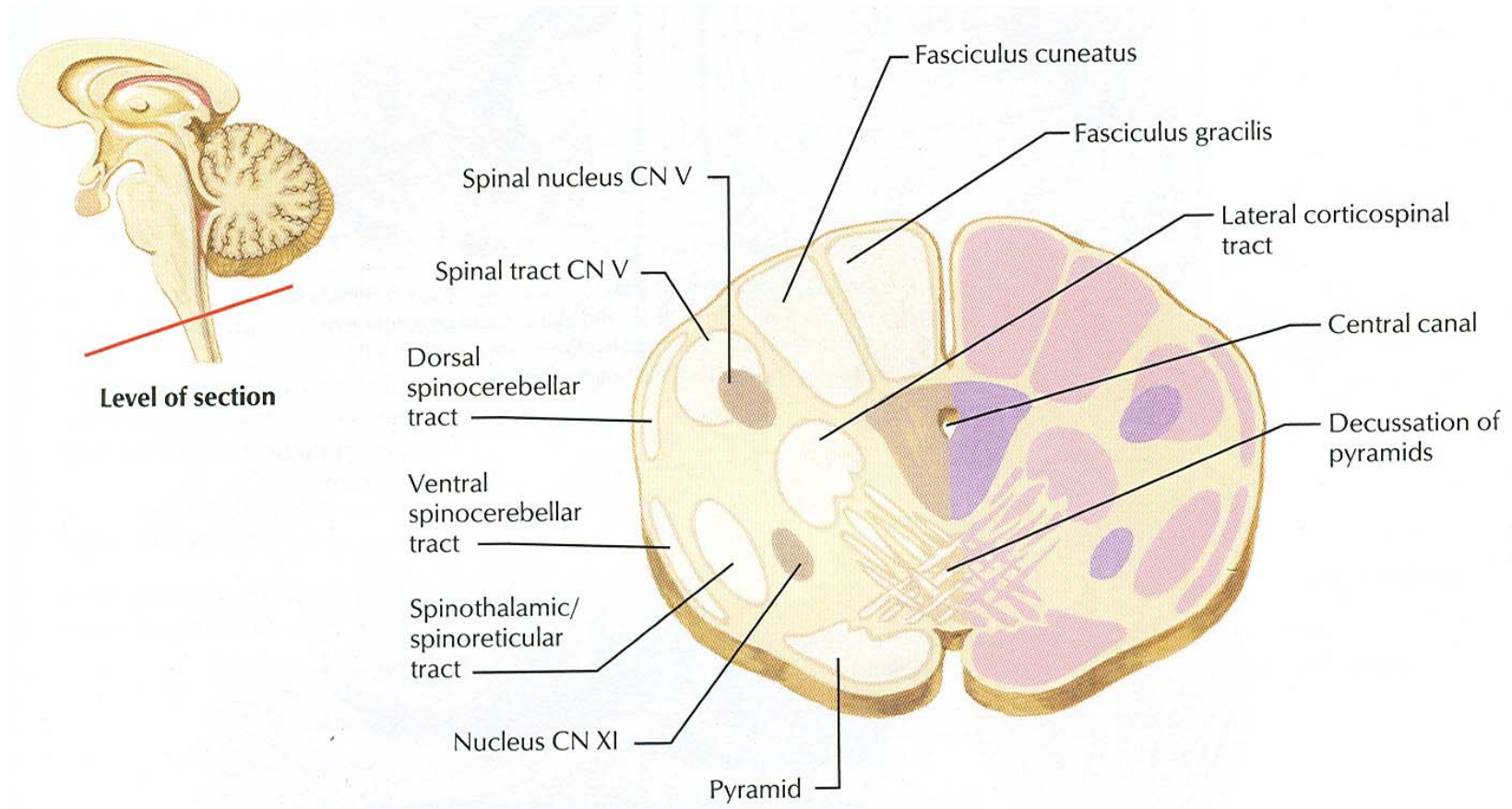


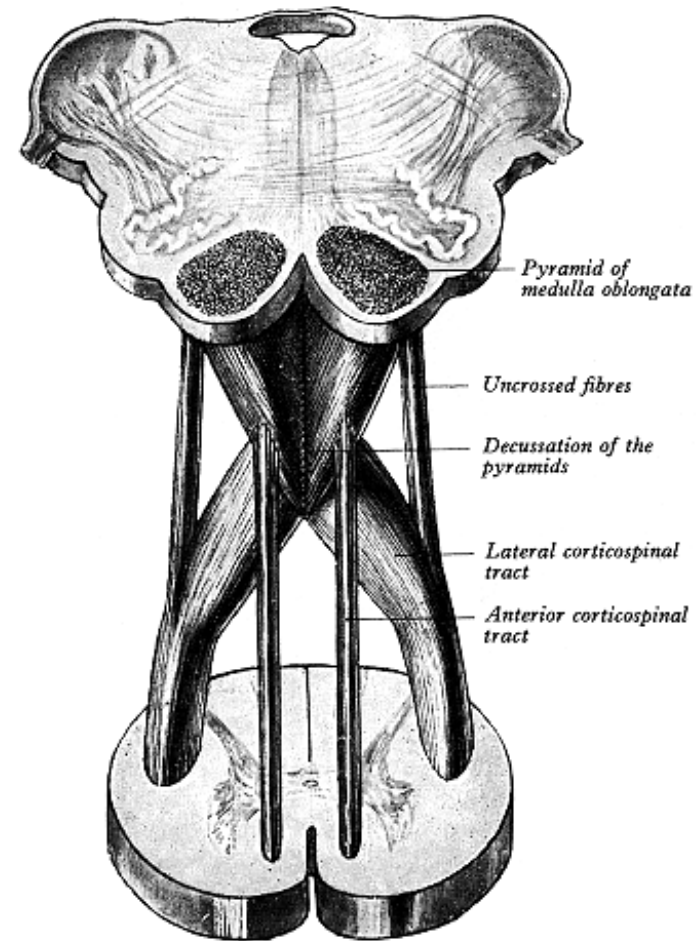
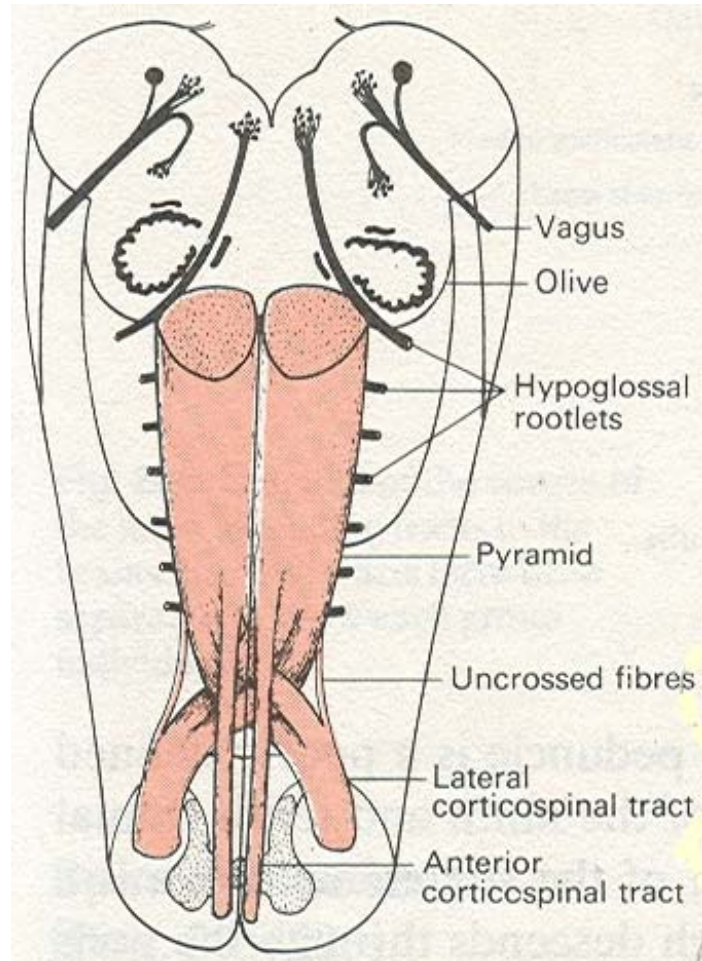


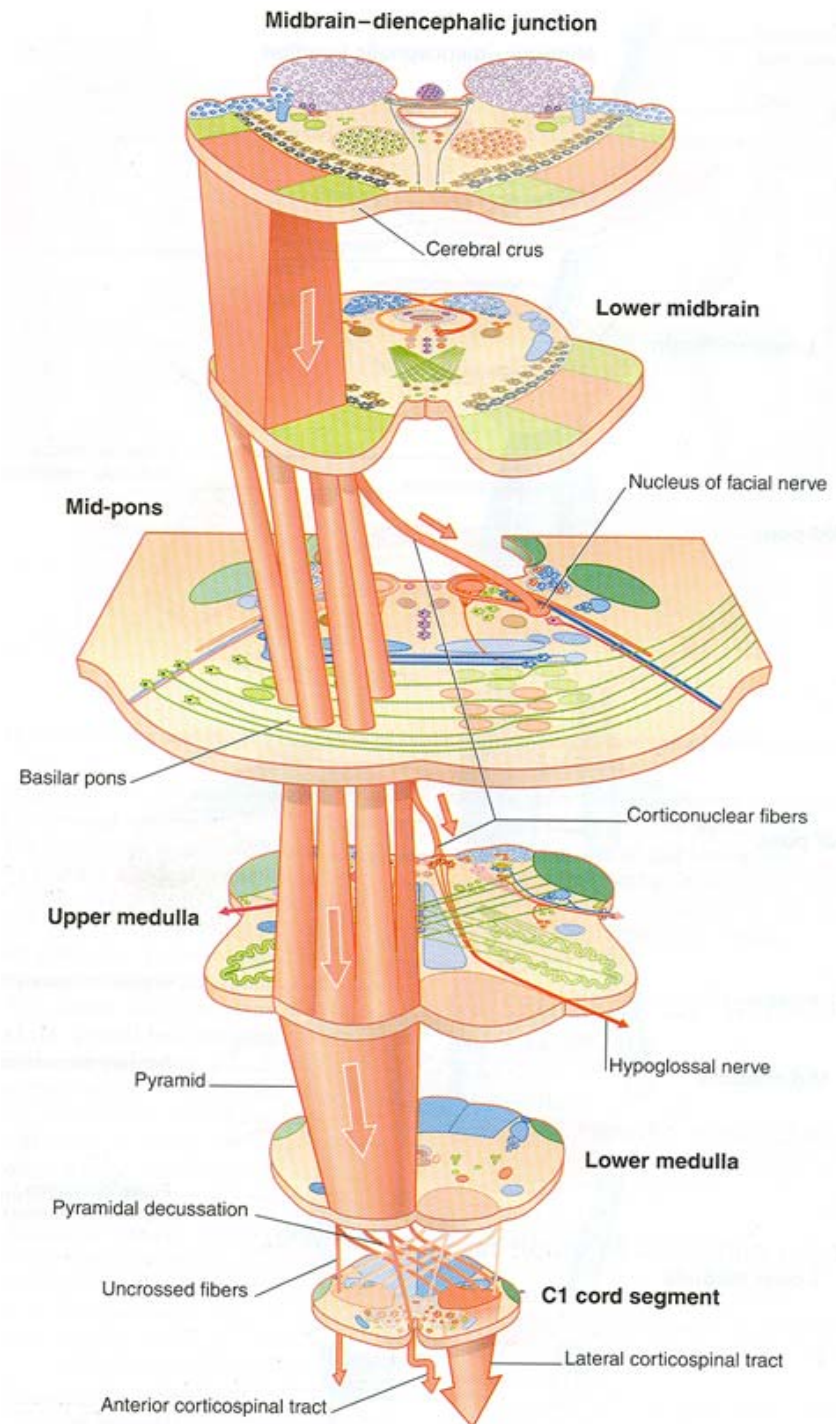


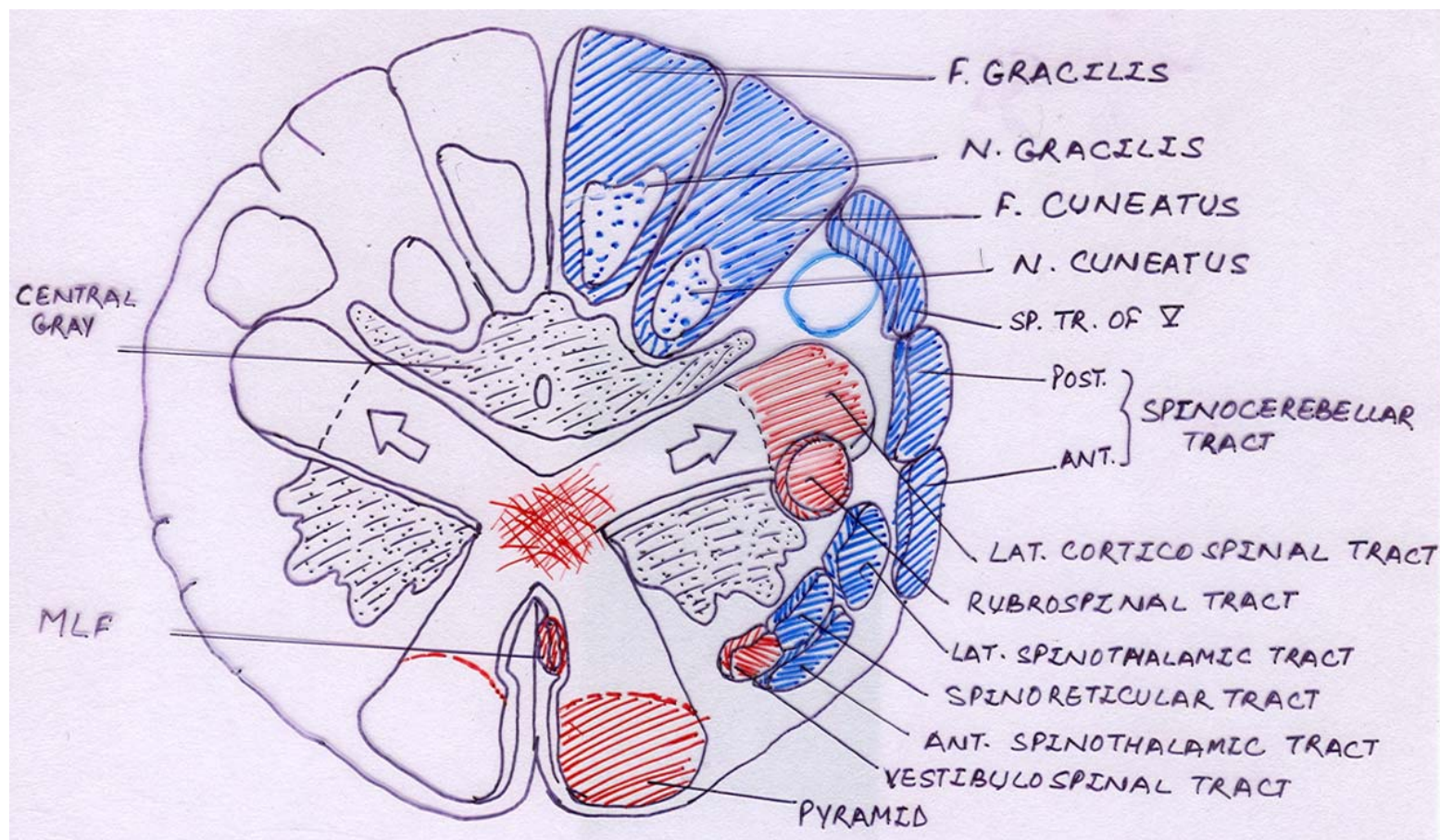
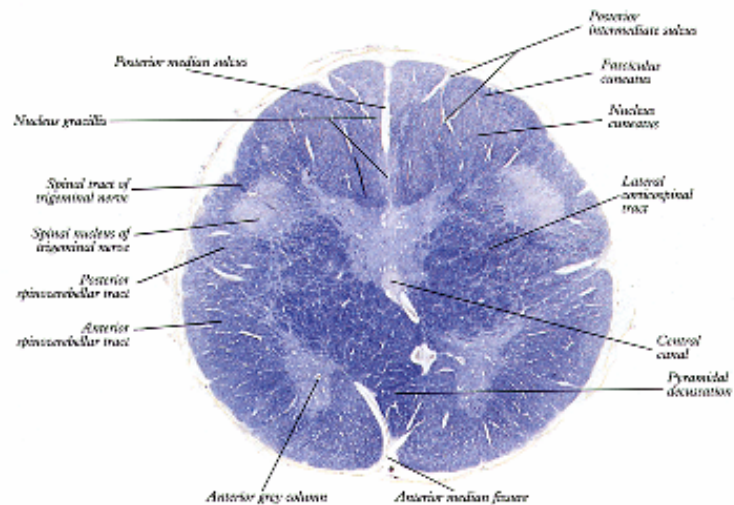


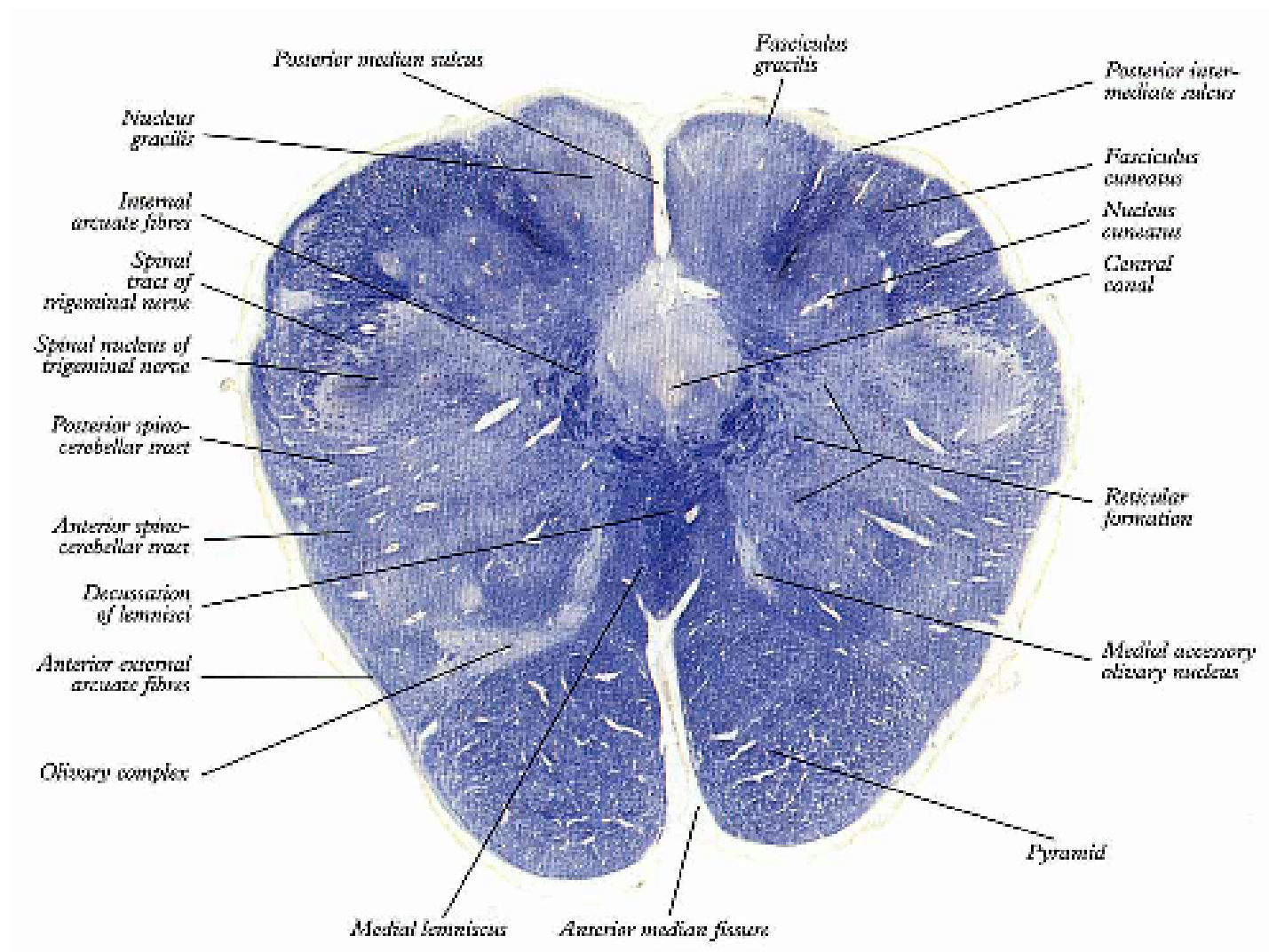


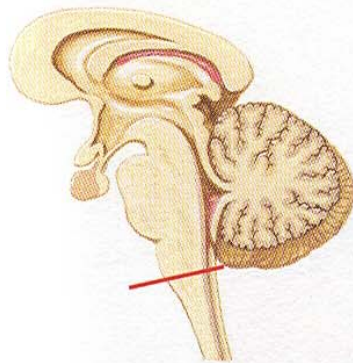




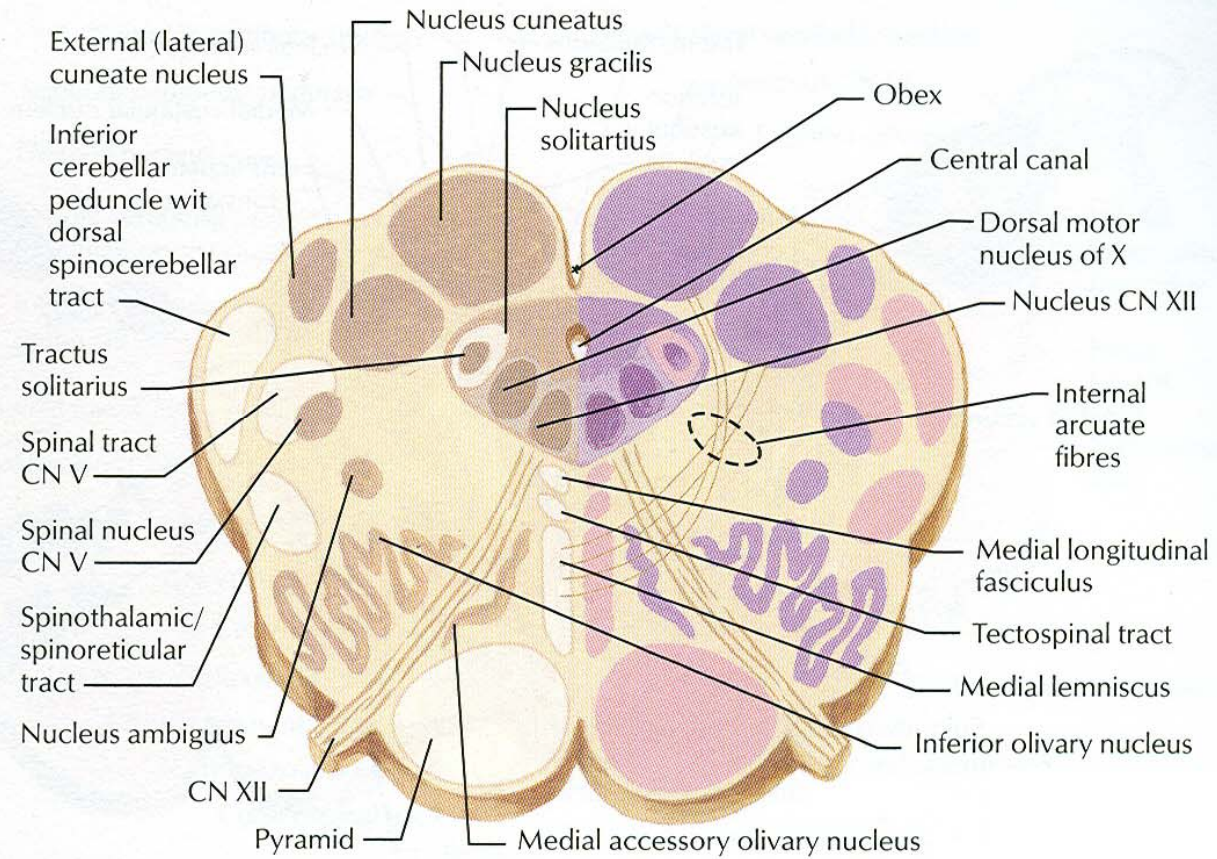


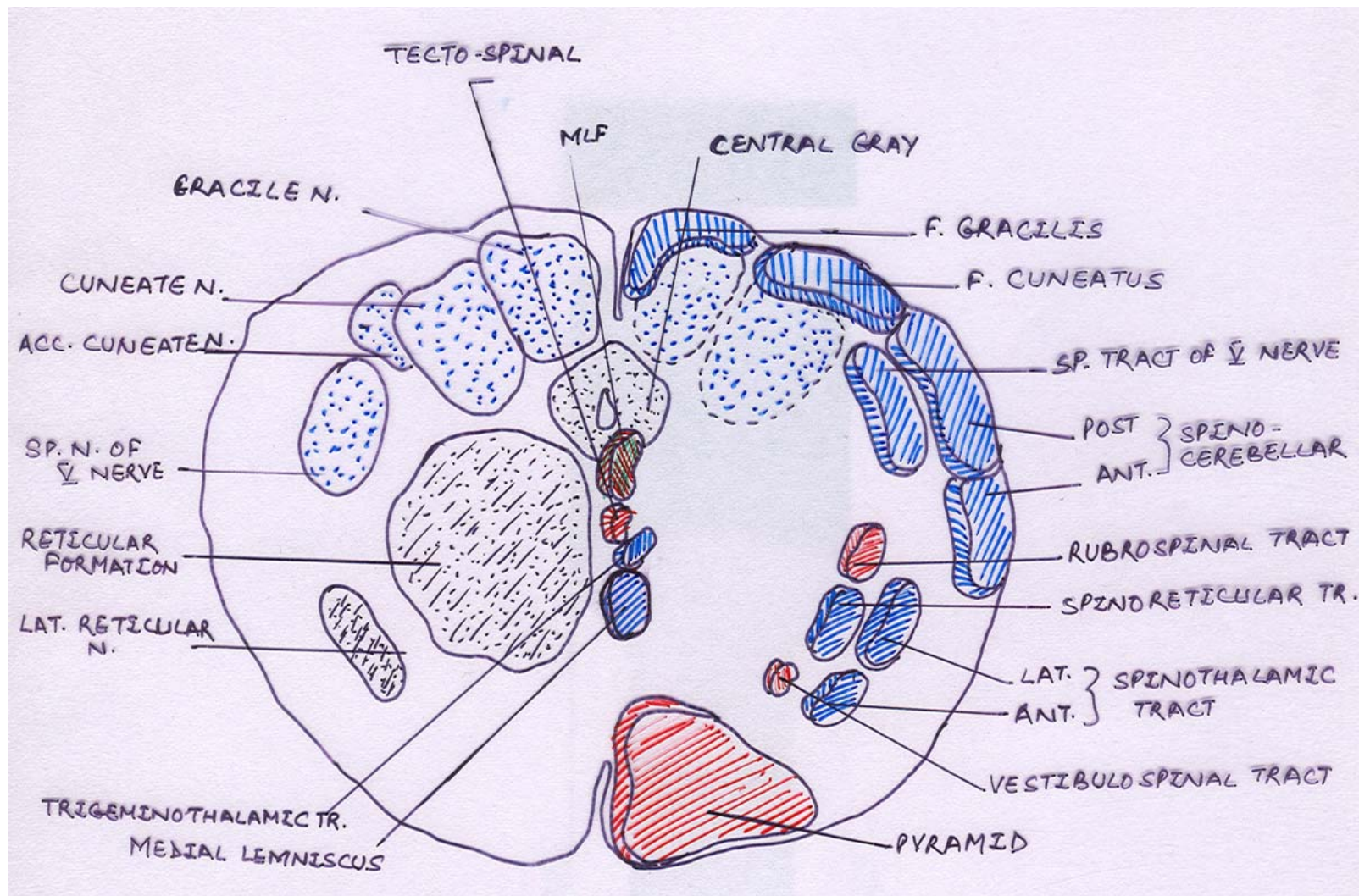


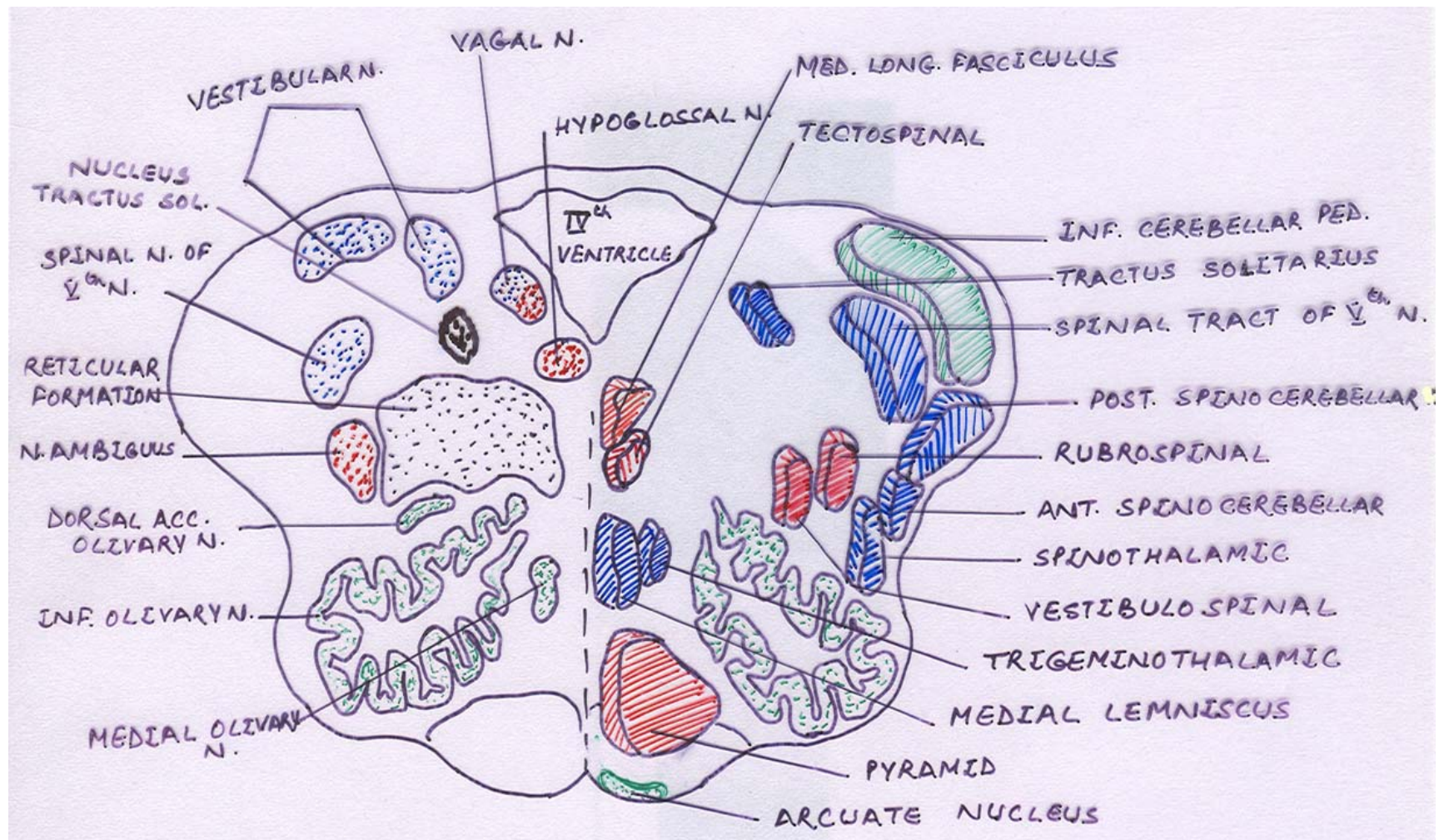


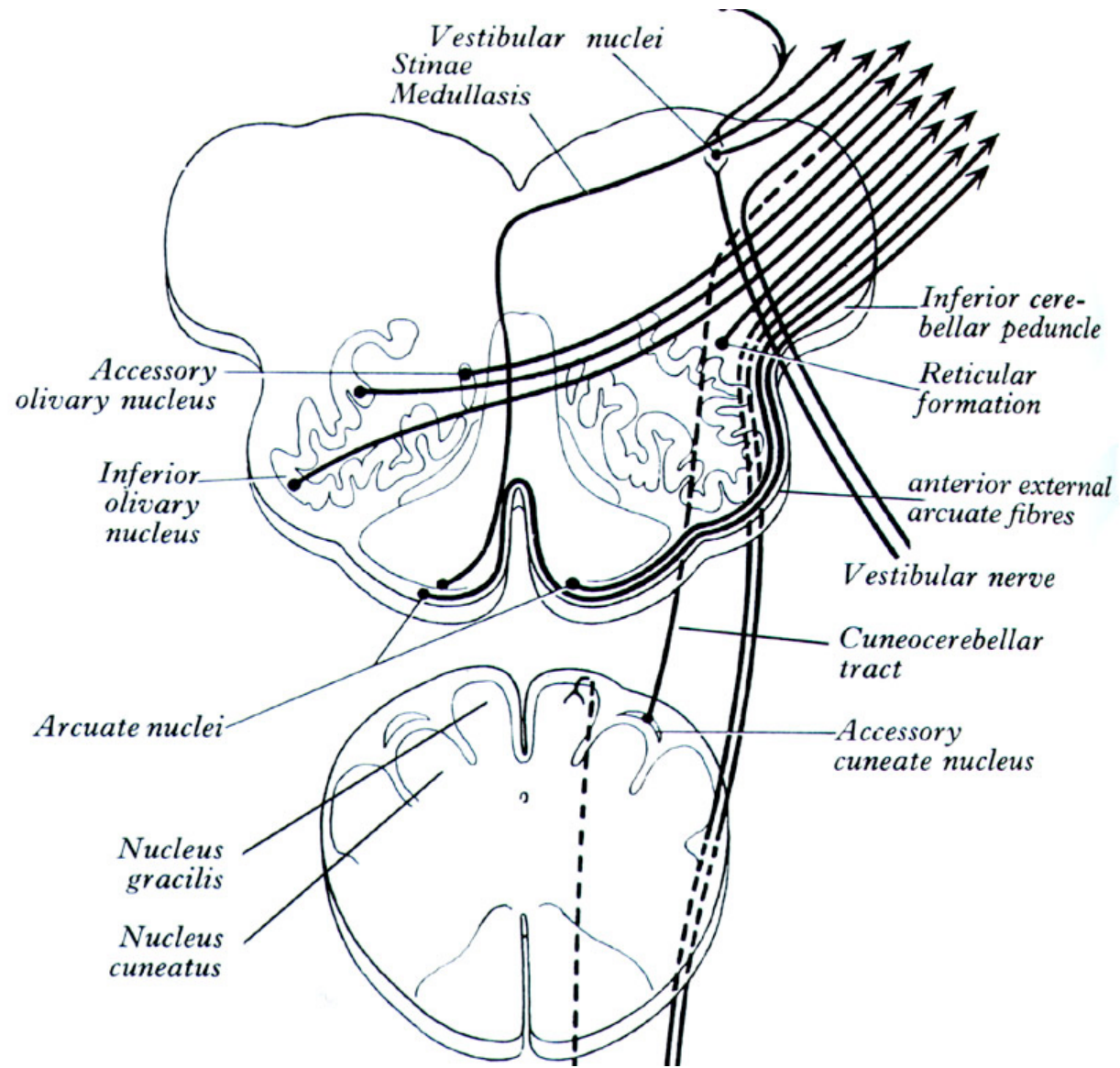


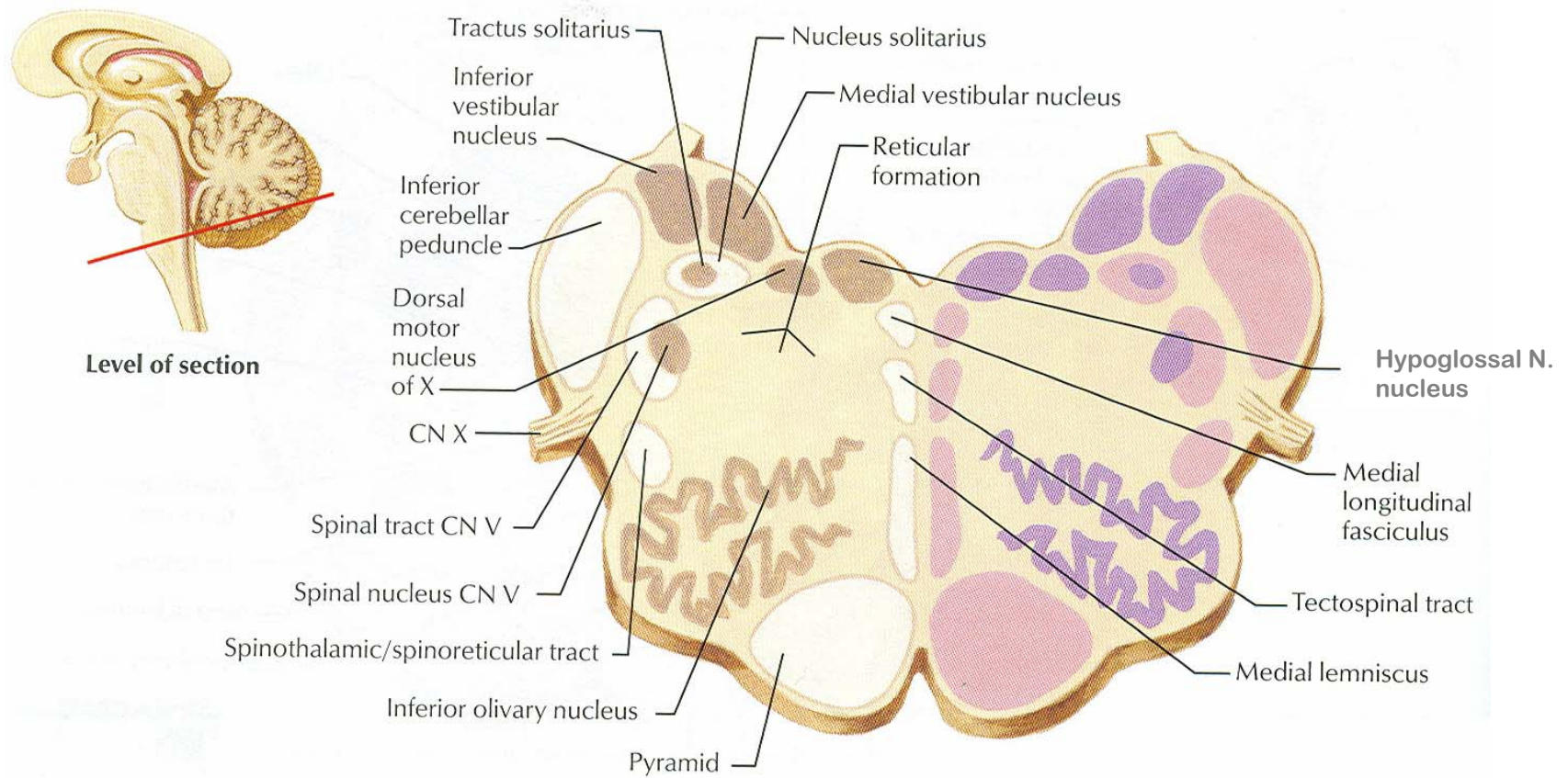
Level of section

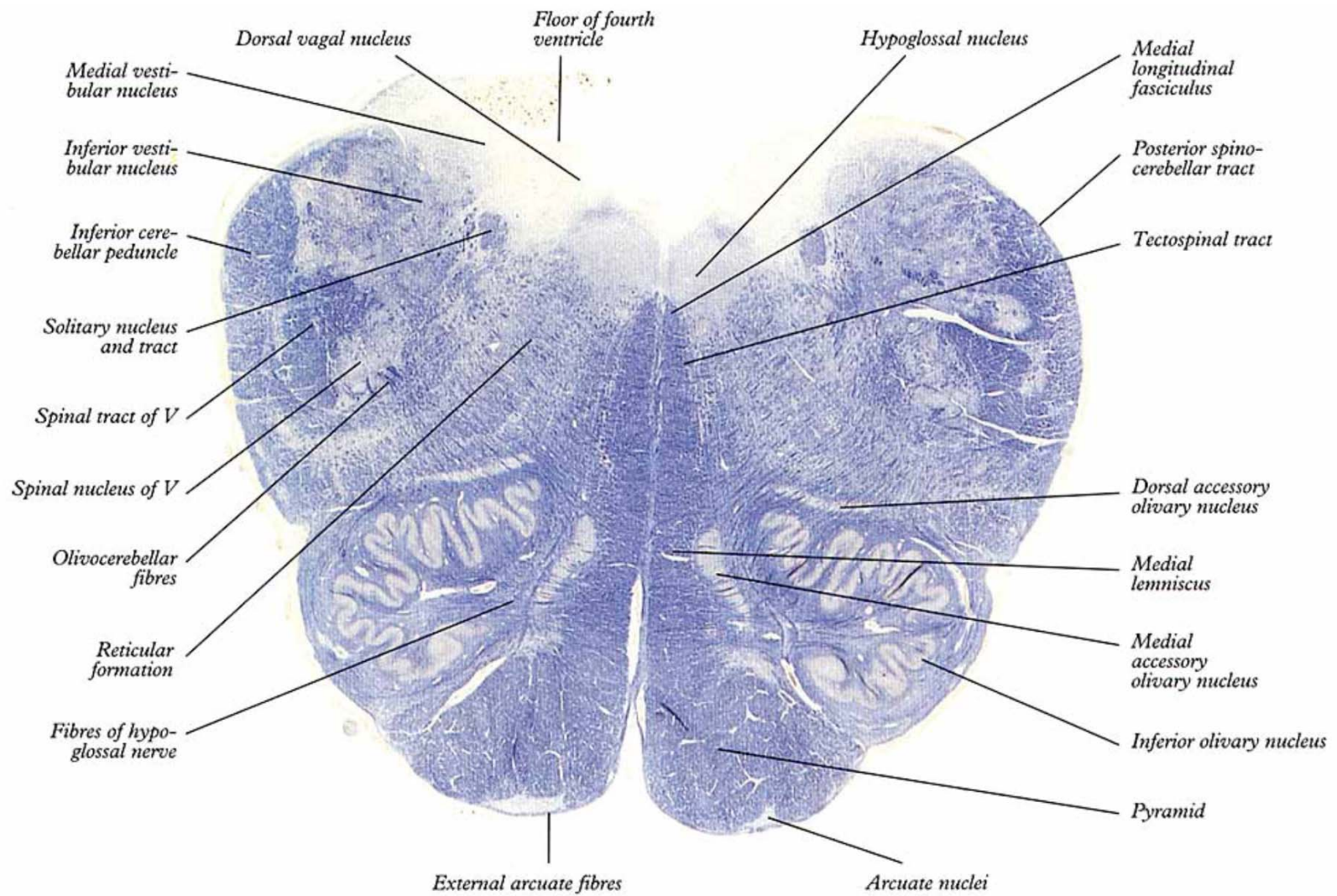


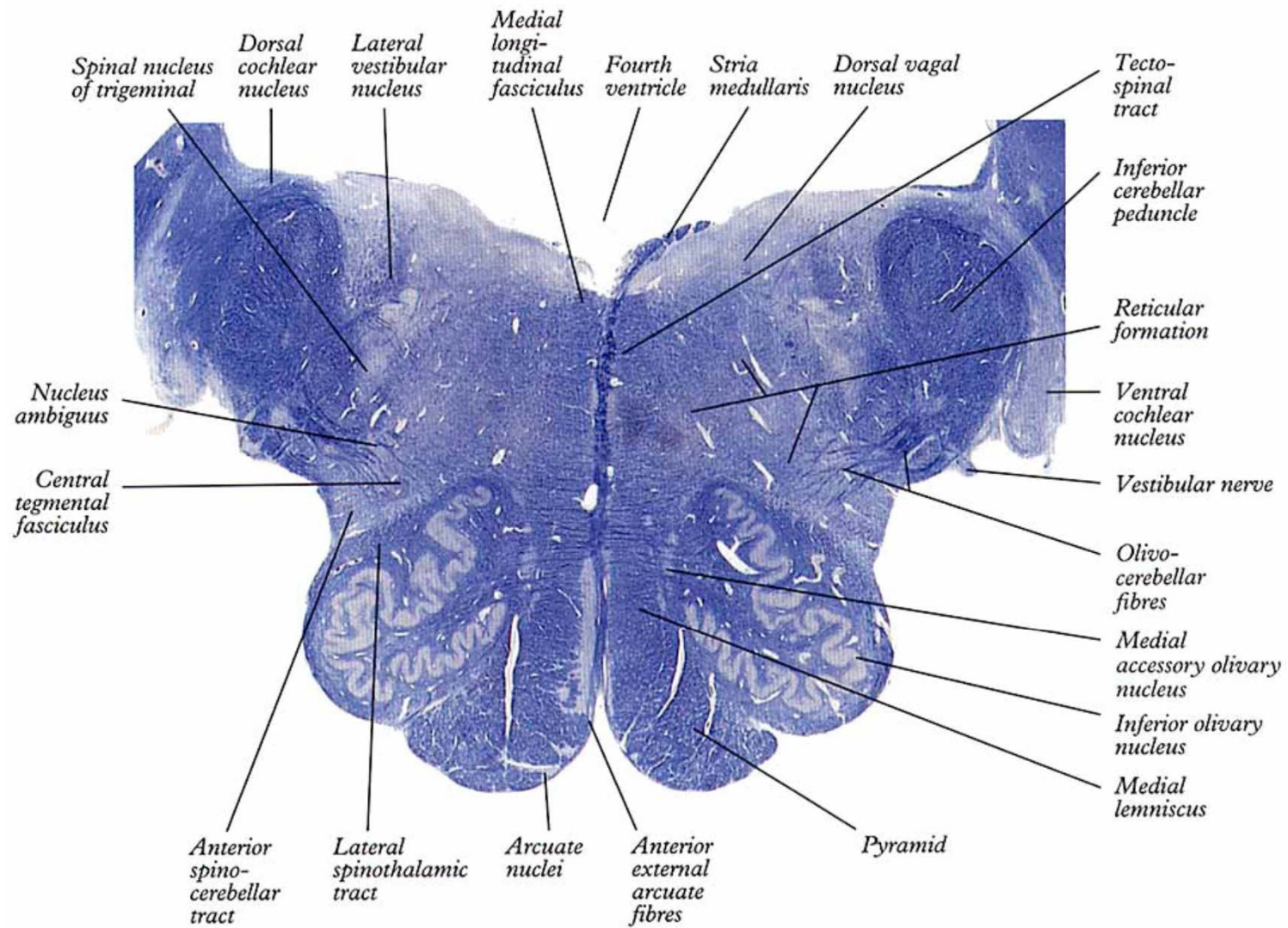












INFERIOR CEREBELLAR PEDUNCLE

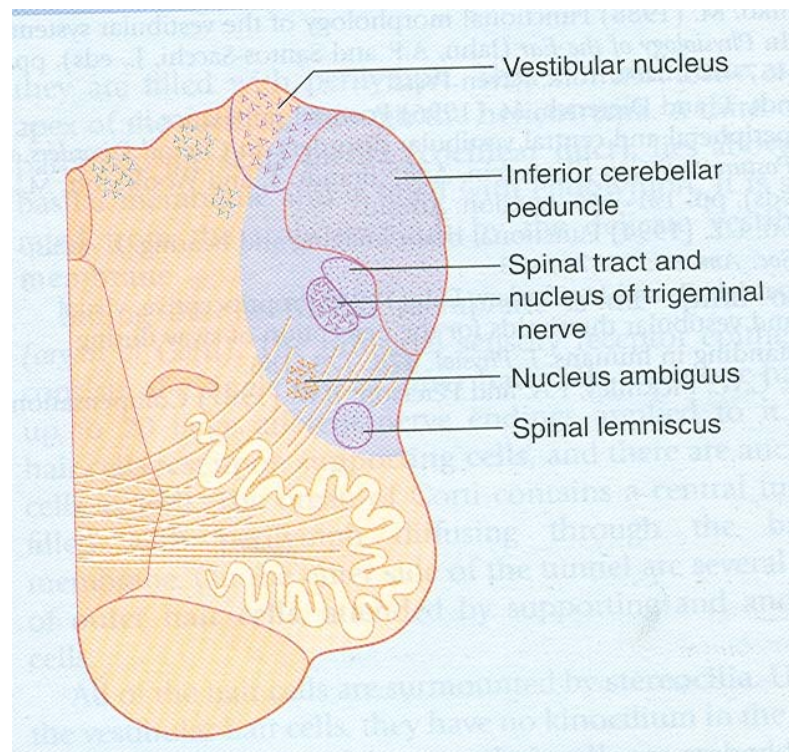
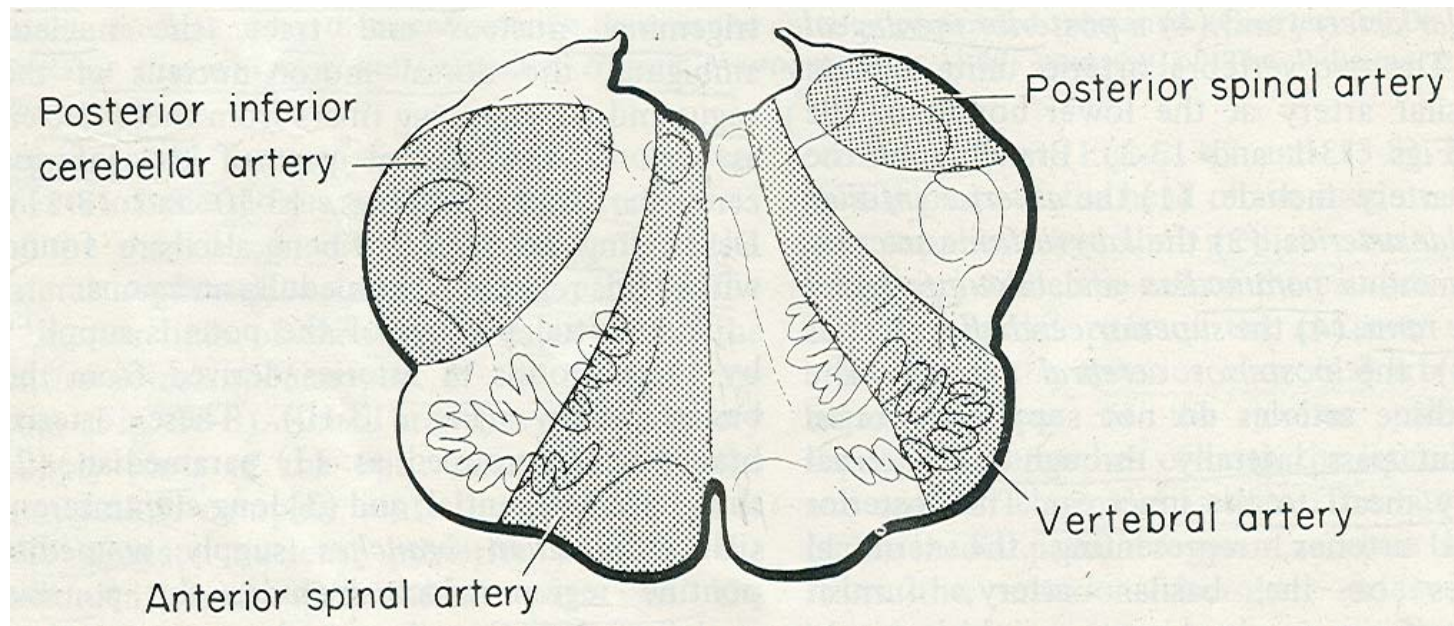
A) Afferent:

1. Posterior spinocerebellar tract
2. Cuneocerebellar tract (Posterior external arcuate)
3. Olivocerebellar tract
4. Parolivocerebellar tracts
5. Reticulocerebellar Tract
6. Vestibulocerebellar tract
7. Anterior external arcuate fibres
8. Striae medullares
9. Trigemino-cerebellar fibres

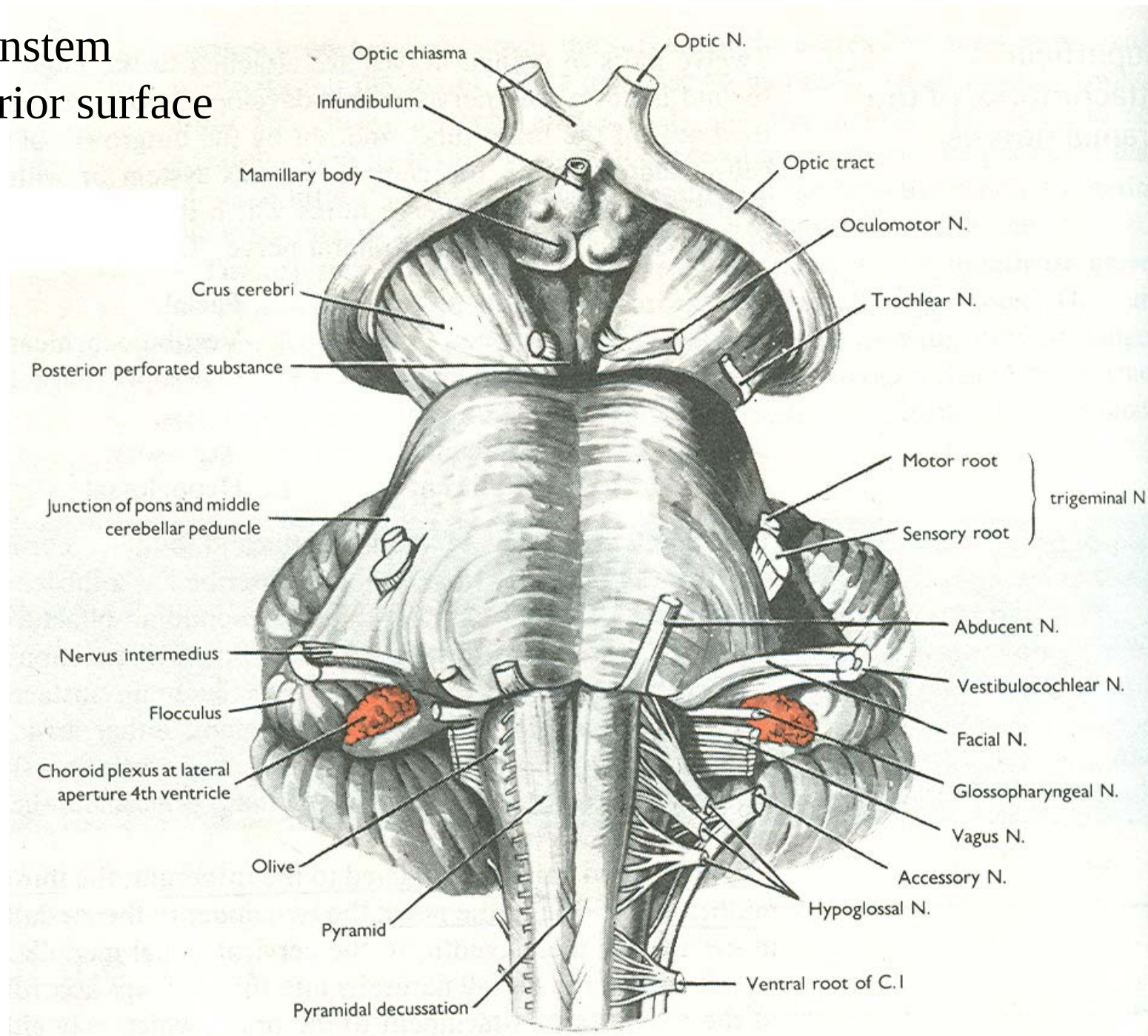
INFERIOR CEREBELLAR PEDUNCLE

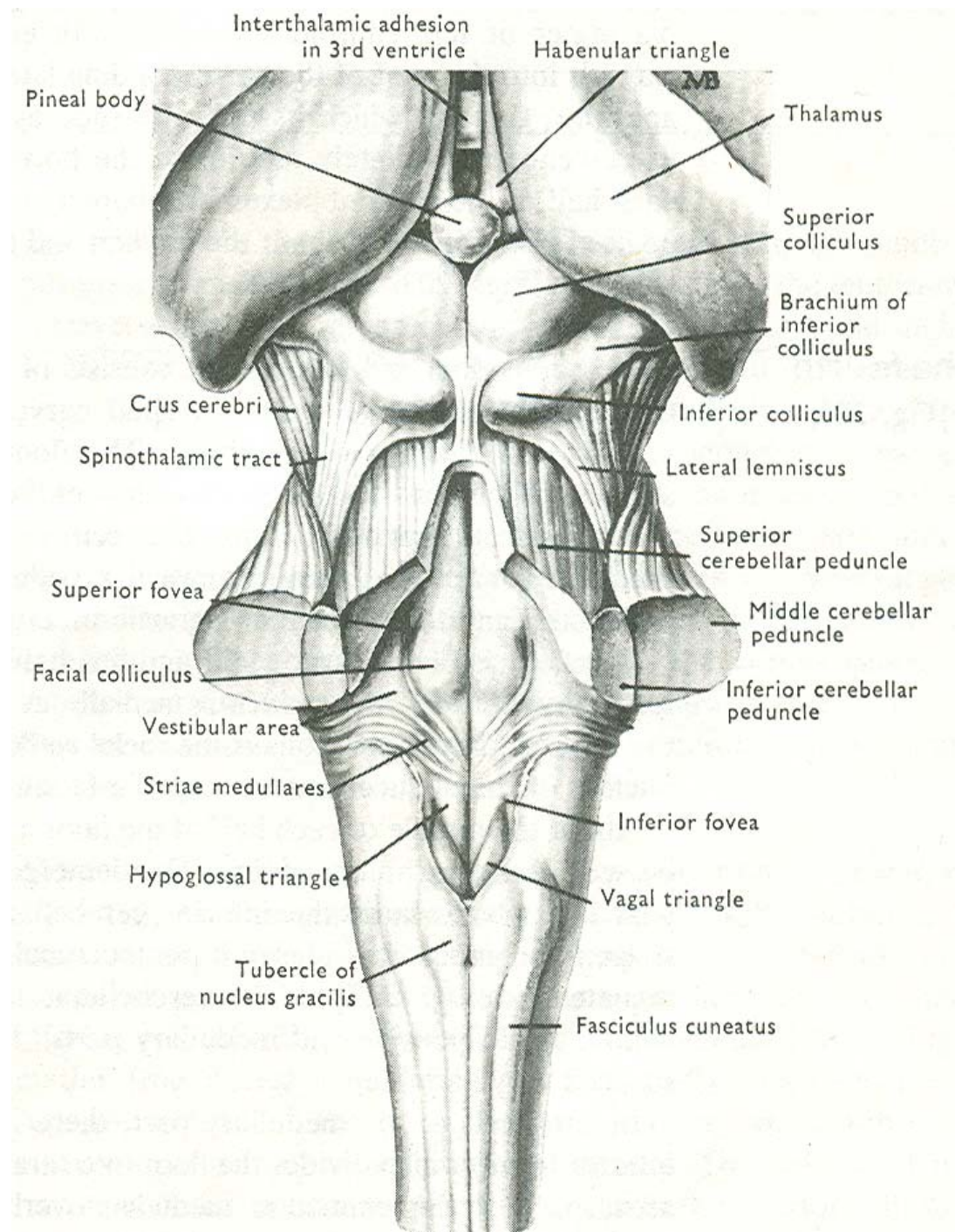
B) Efferent:

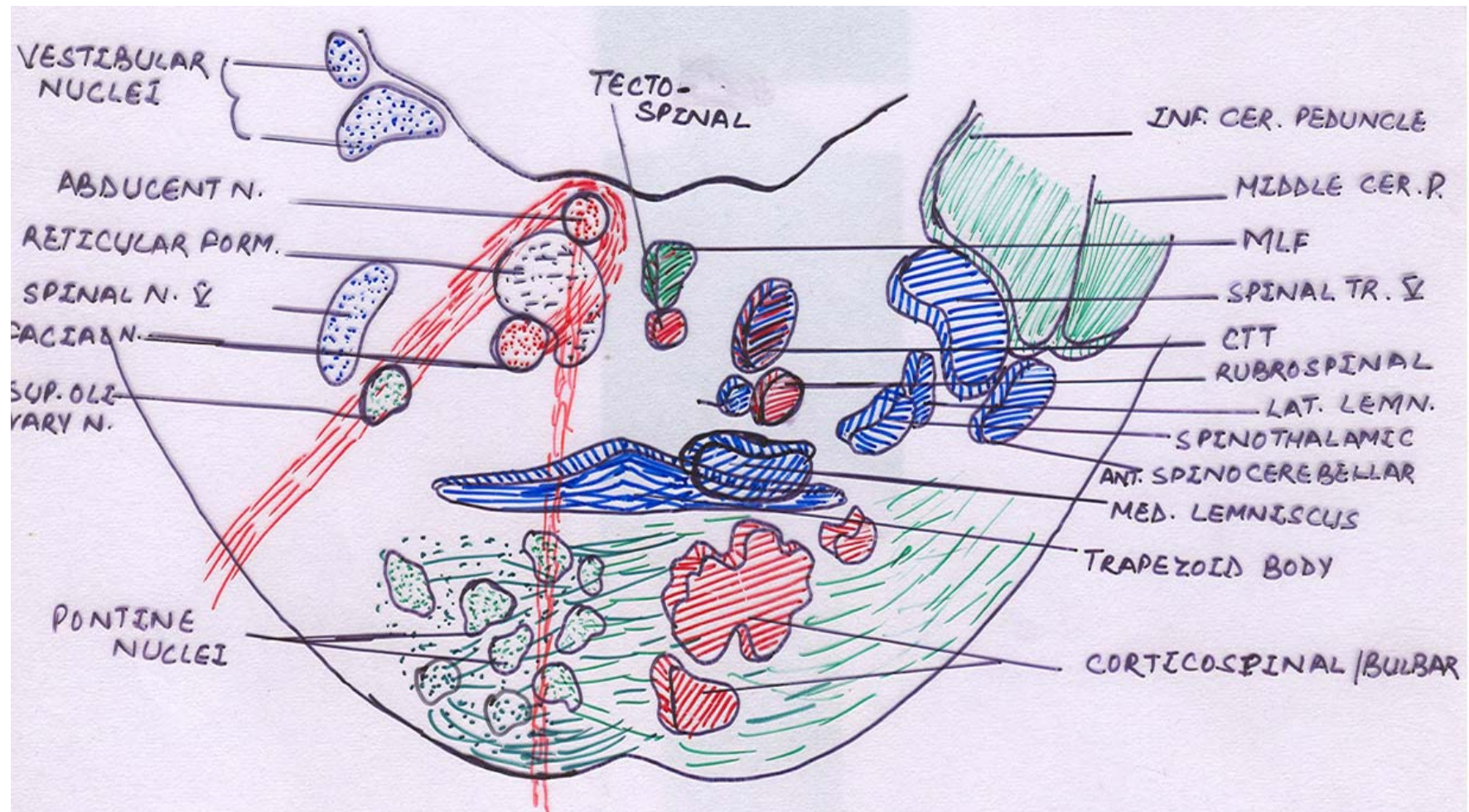
1. Cerebello-Olivary fibres
2. Cerebellovestibular fibres
3. Cerebelloreticular fibres

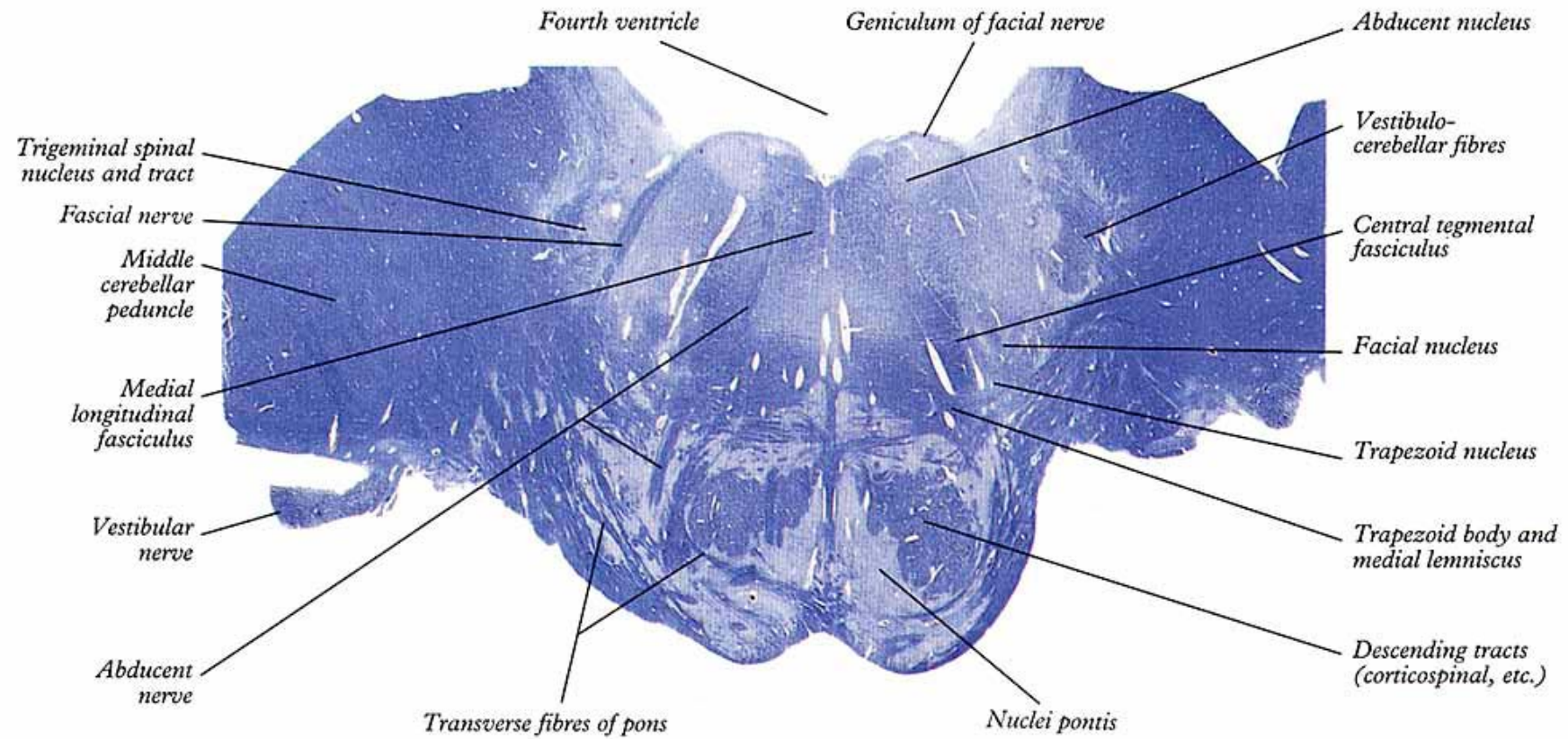


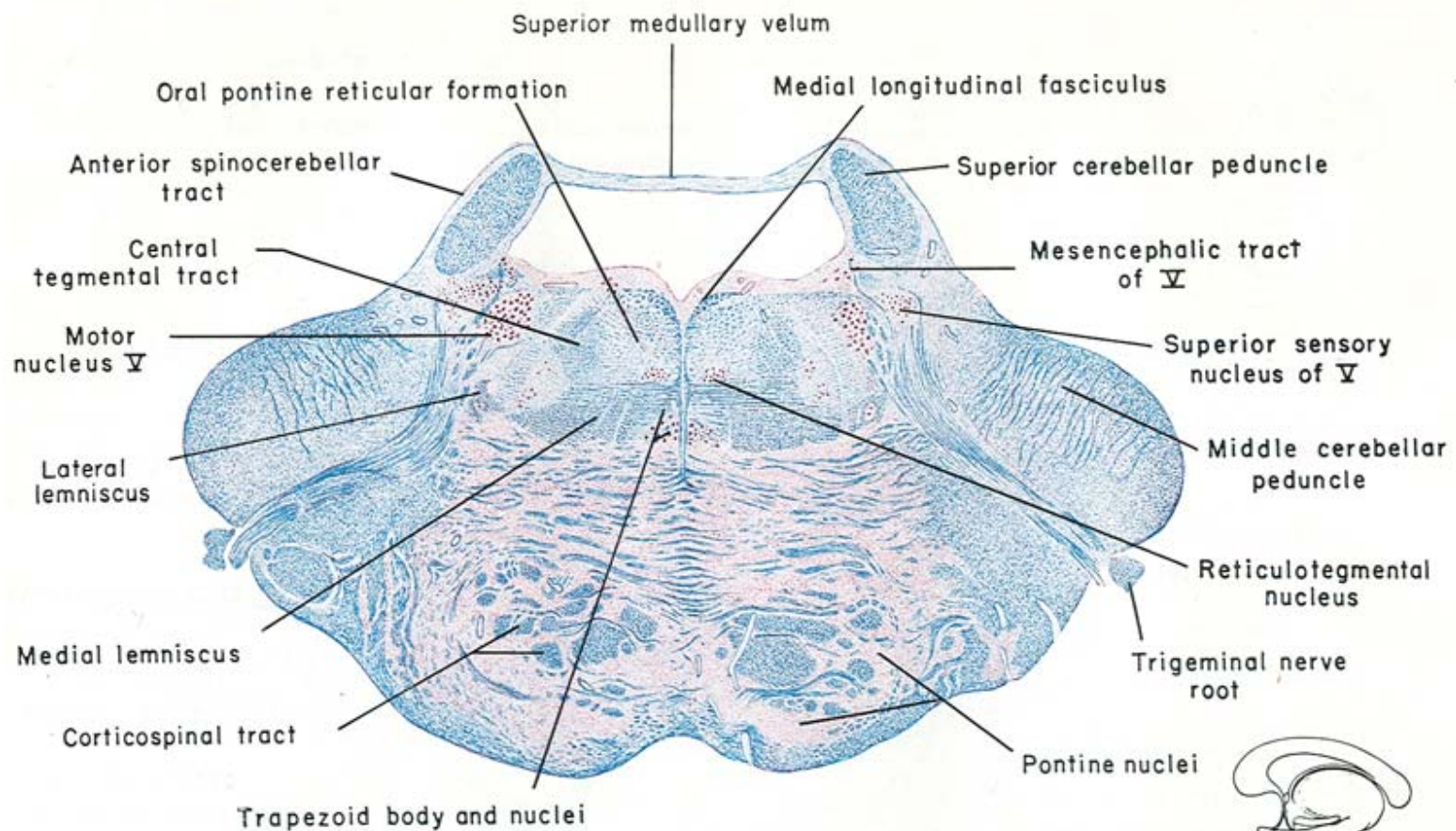
Brainstem anterior surface

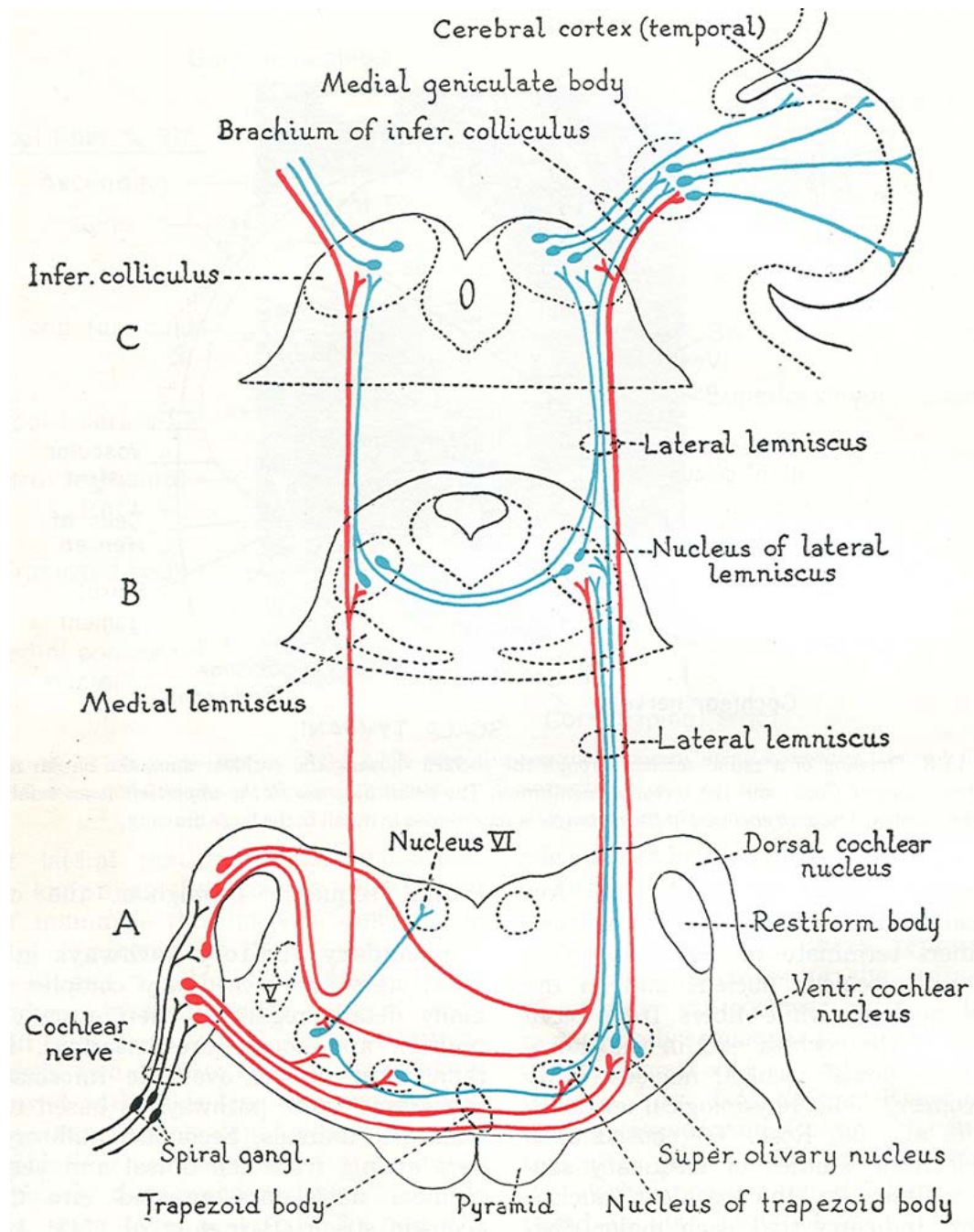


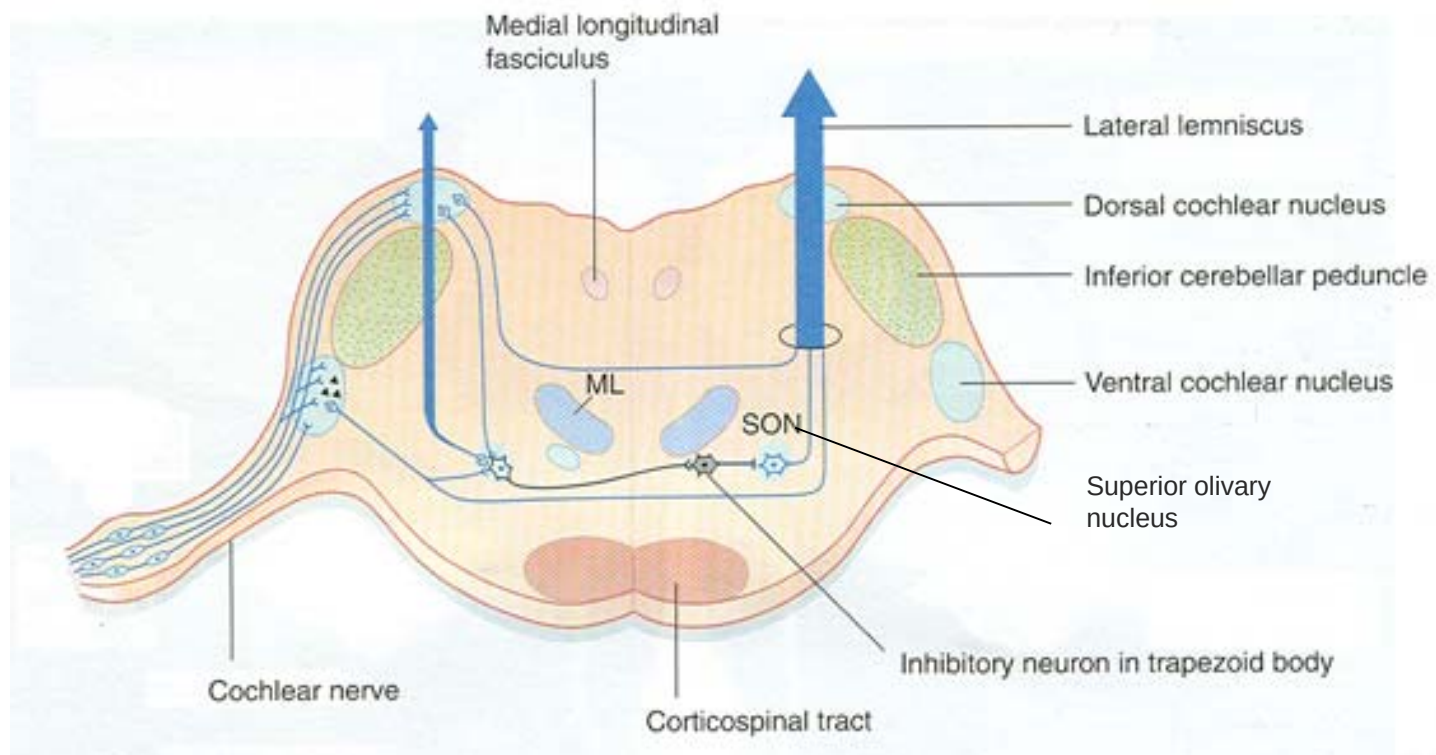


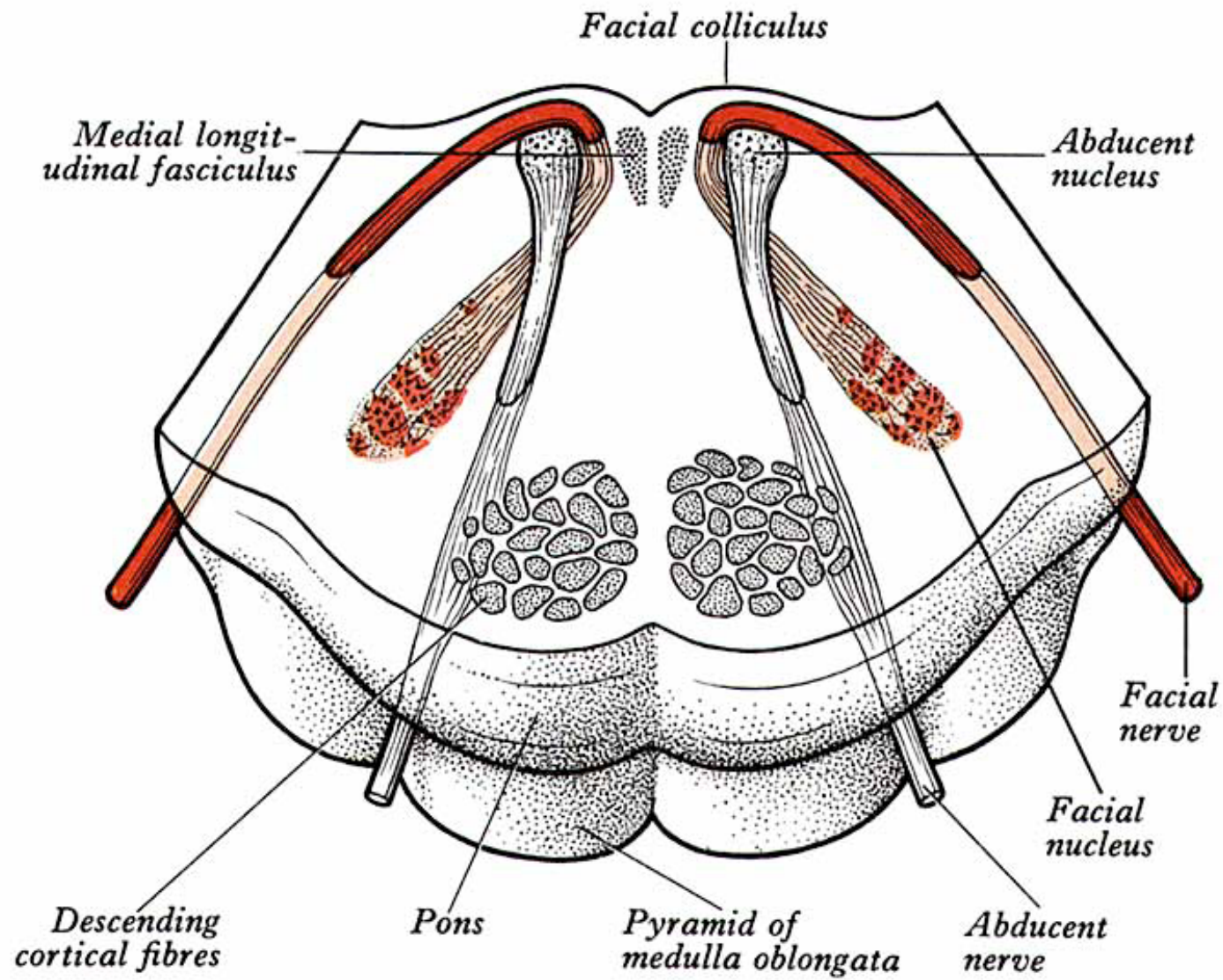


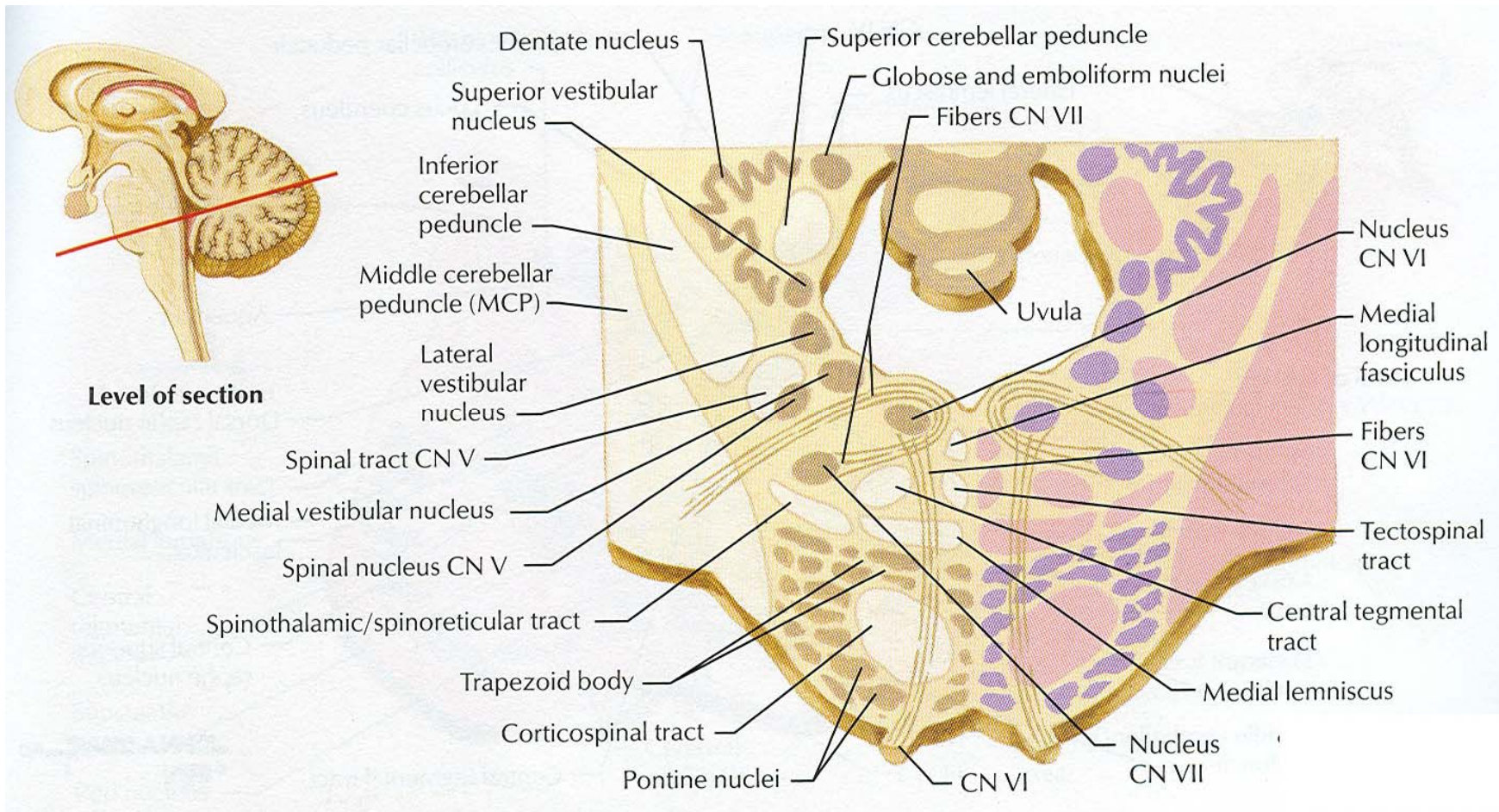


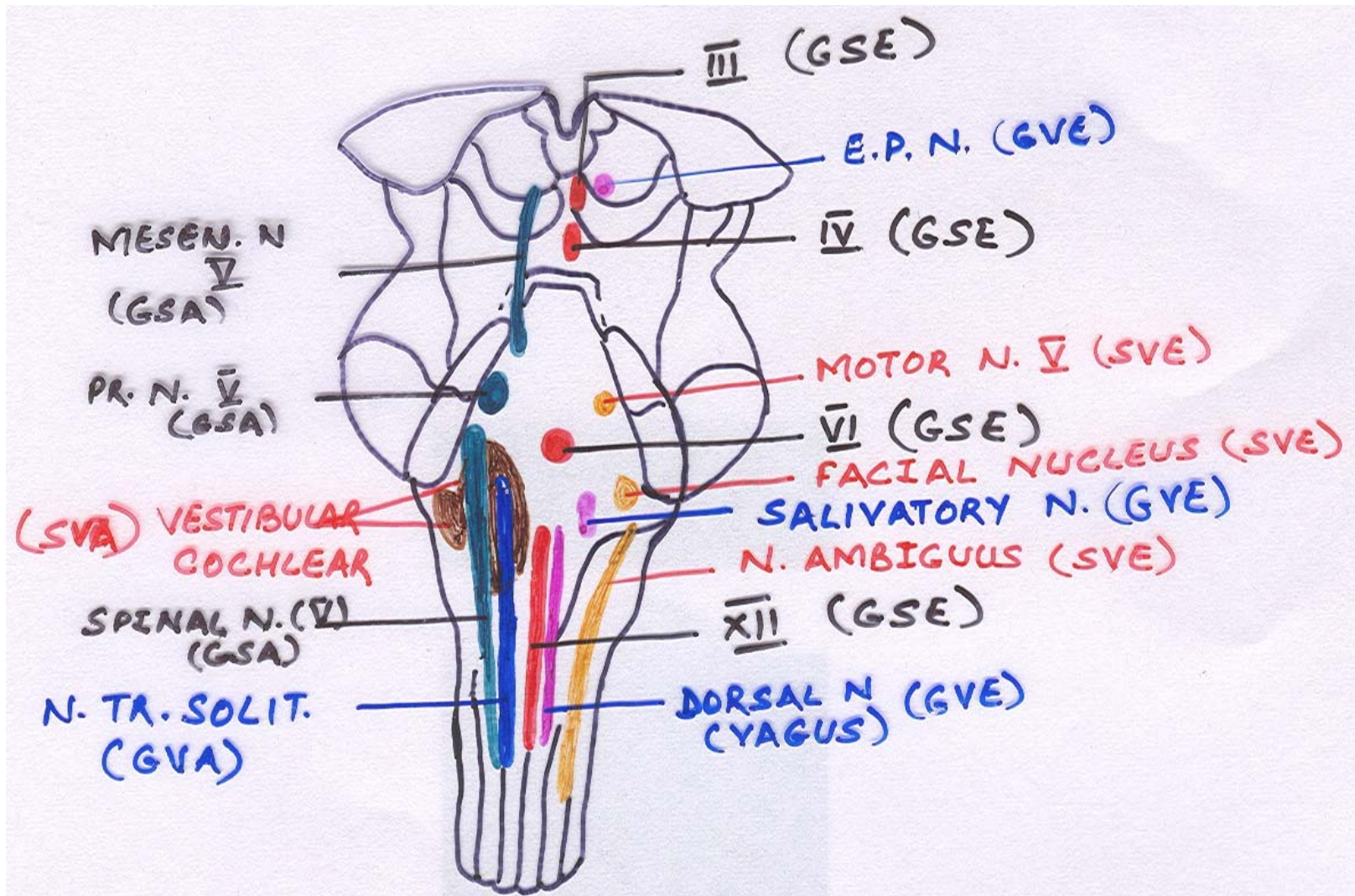


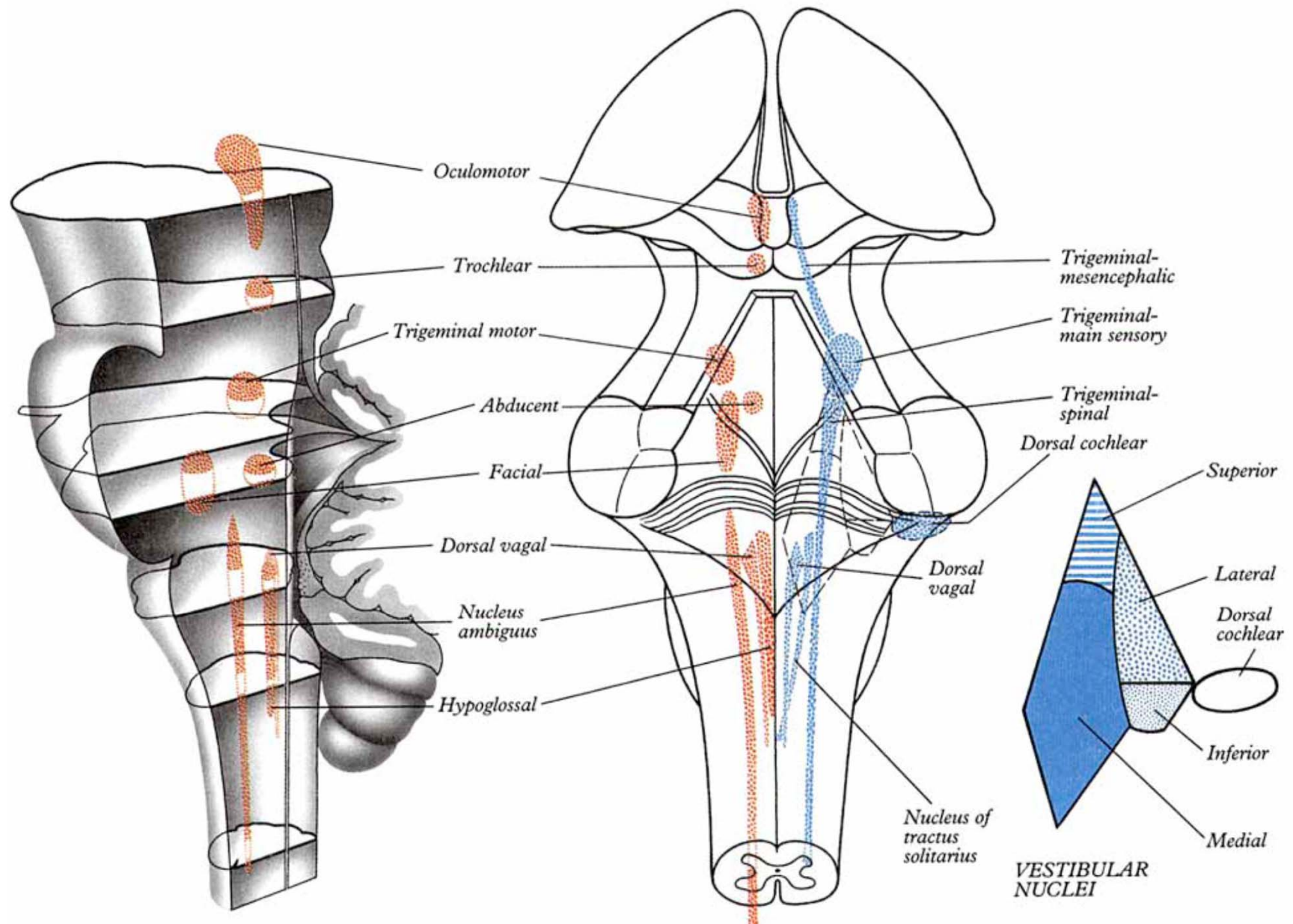


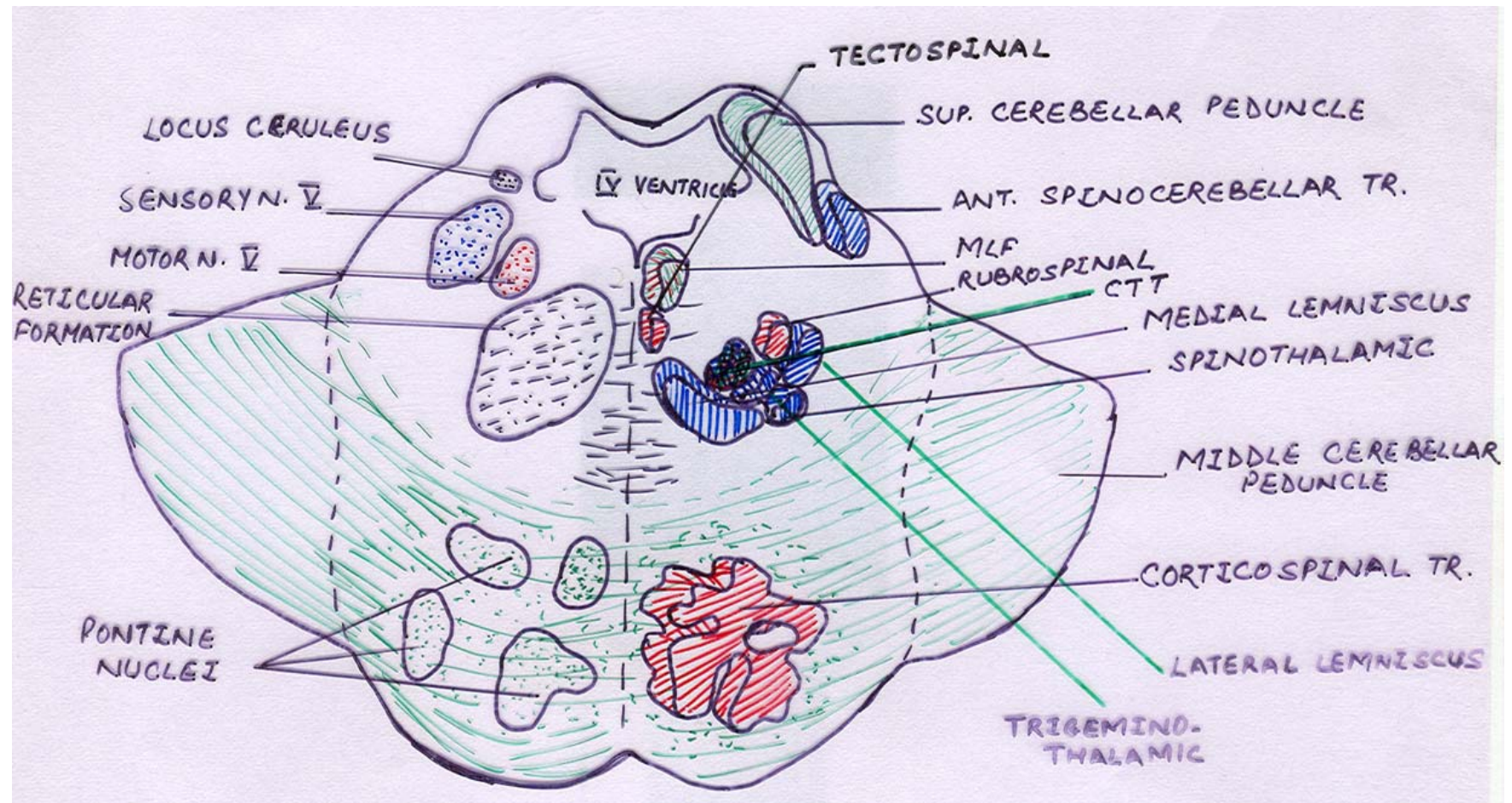


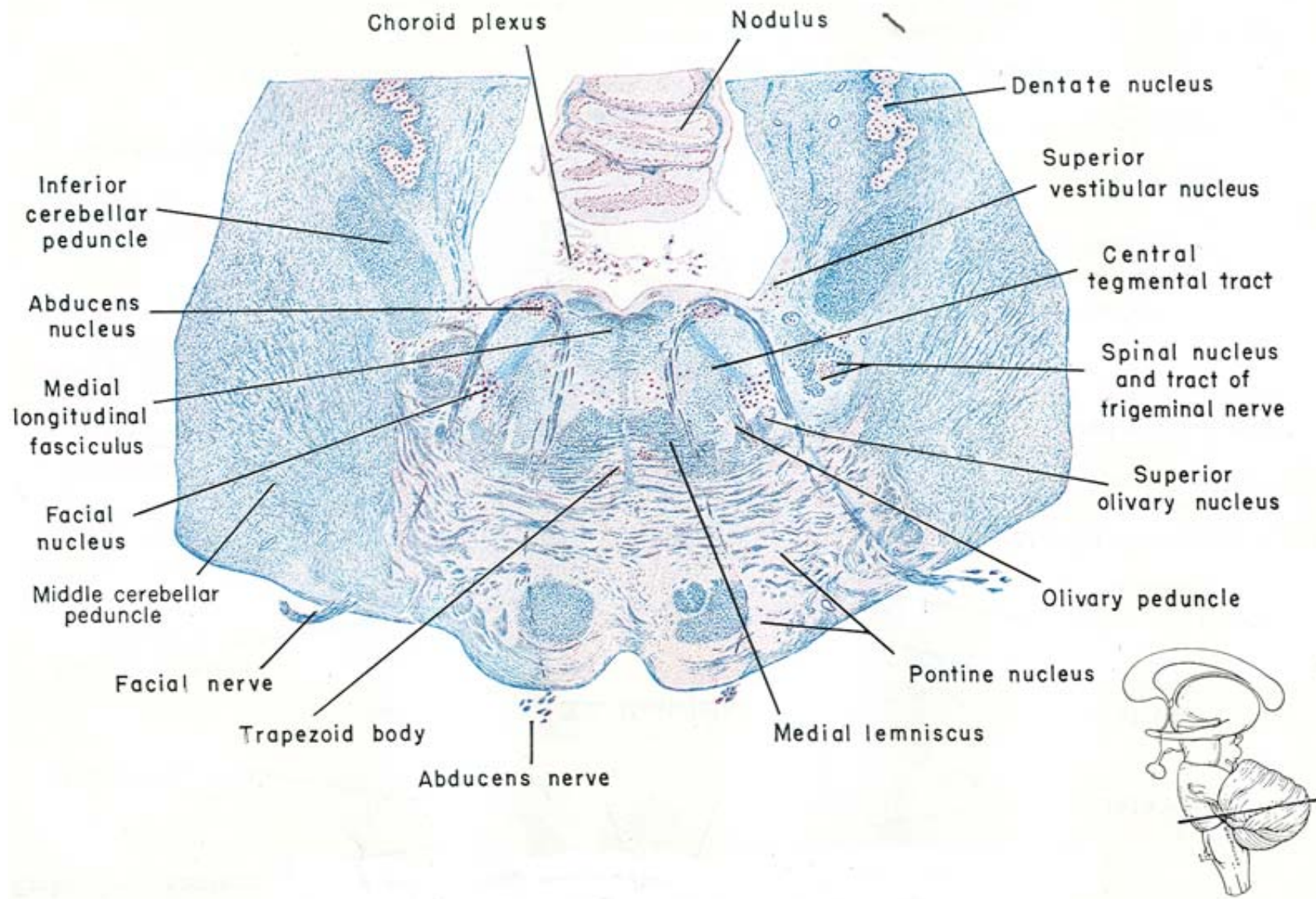


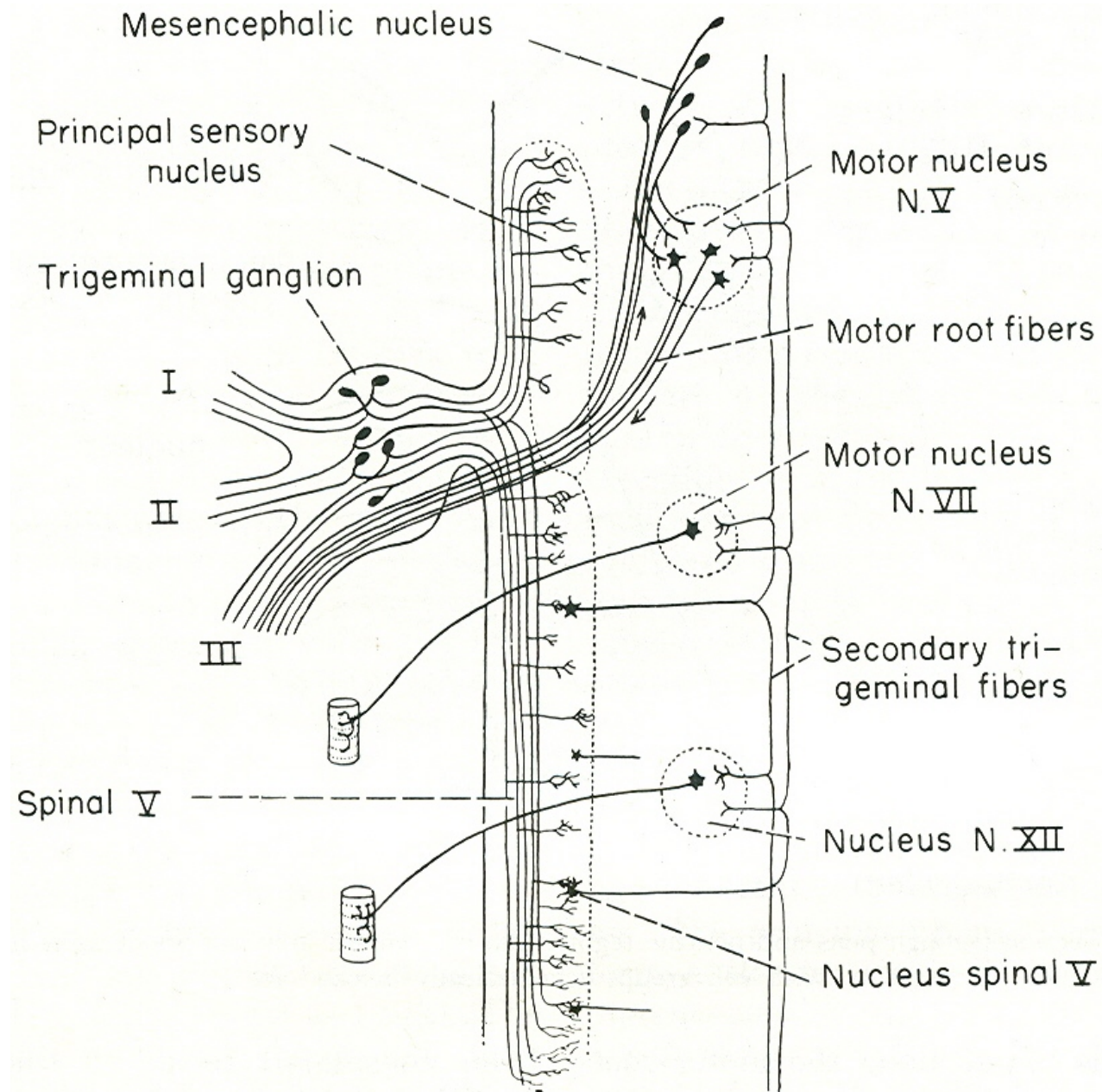


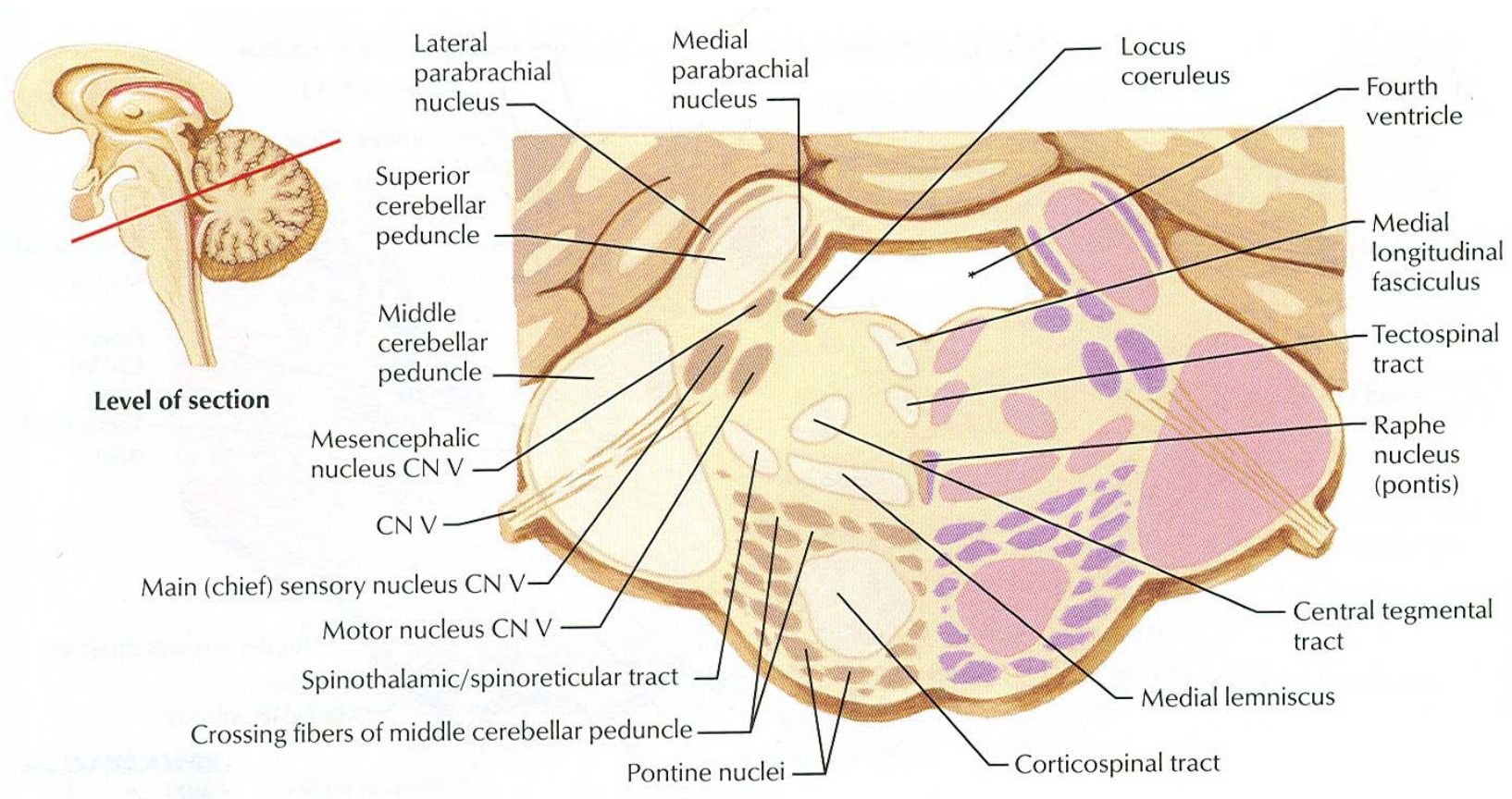


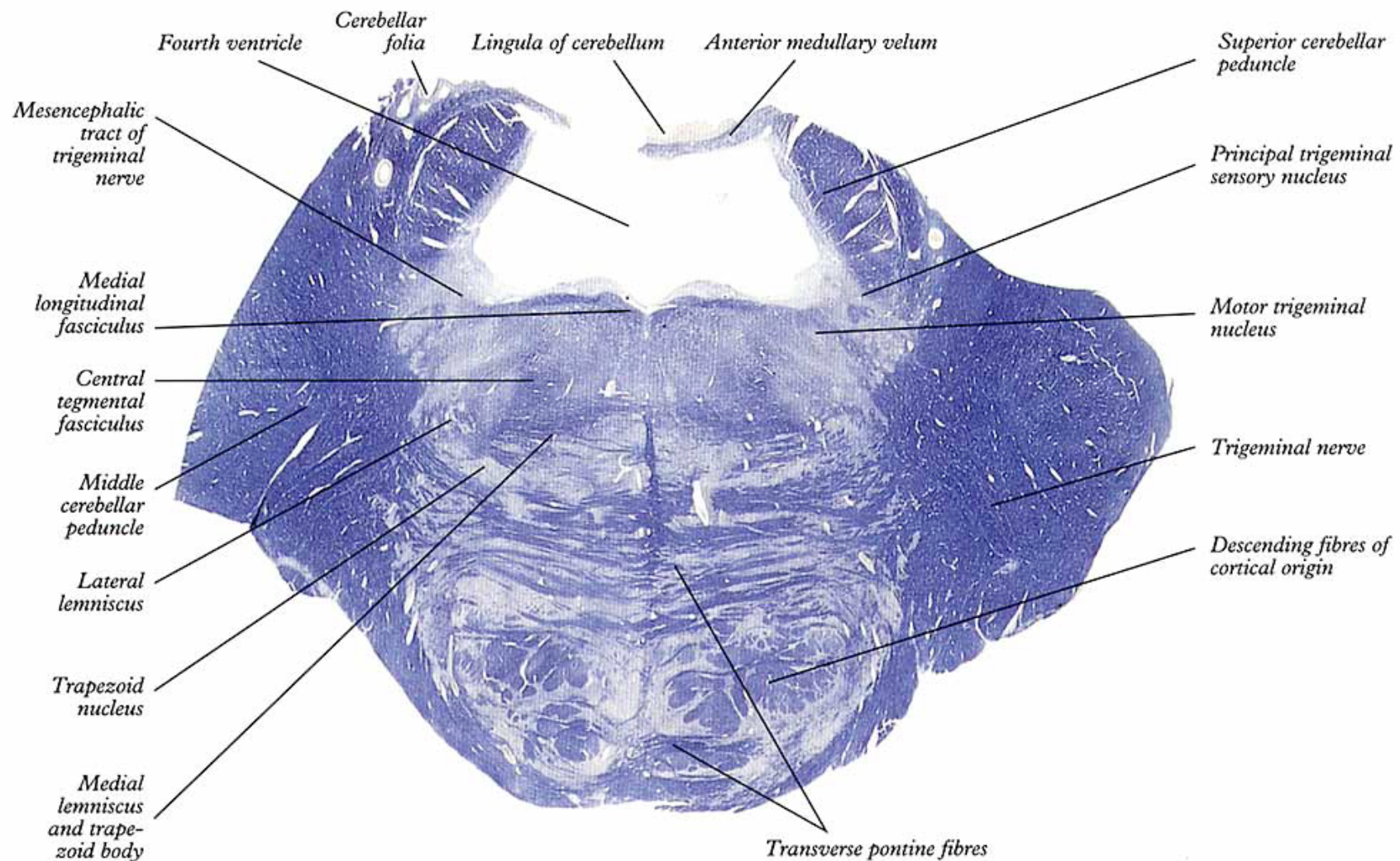


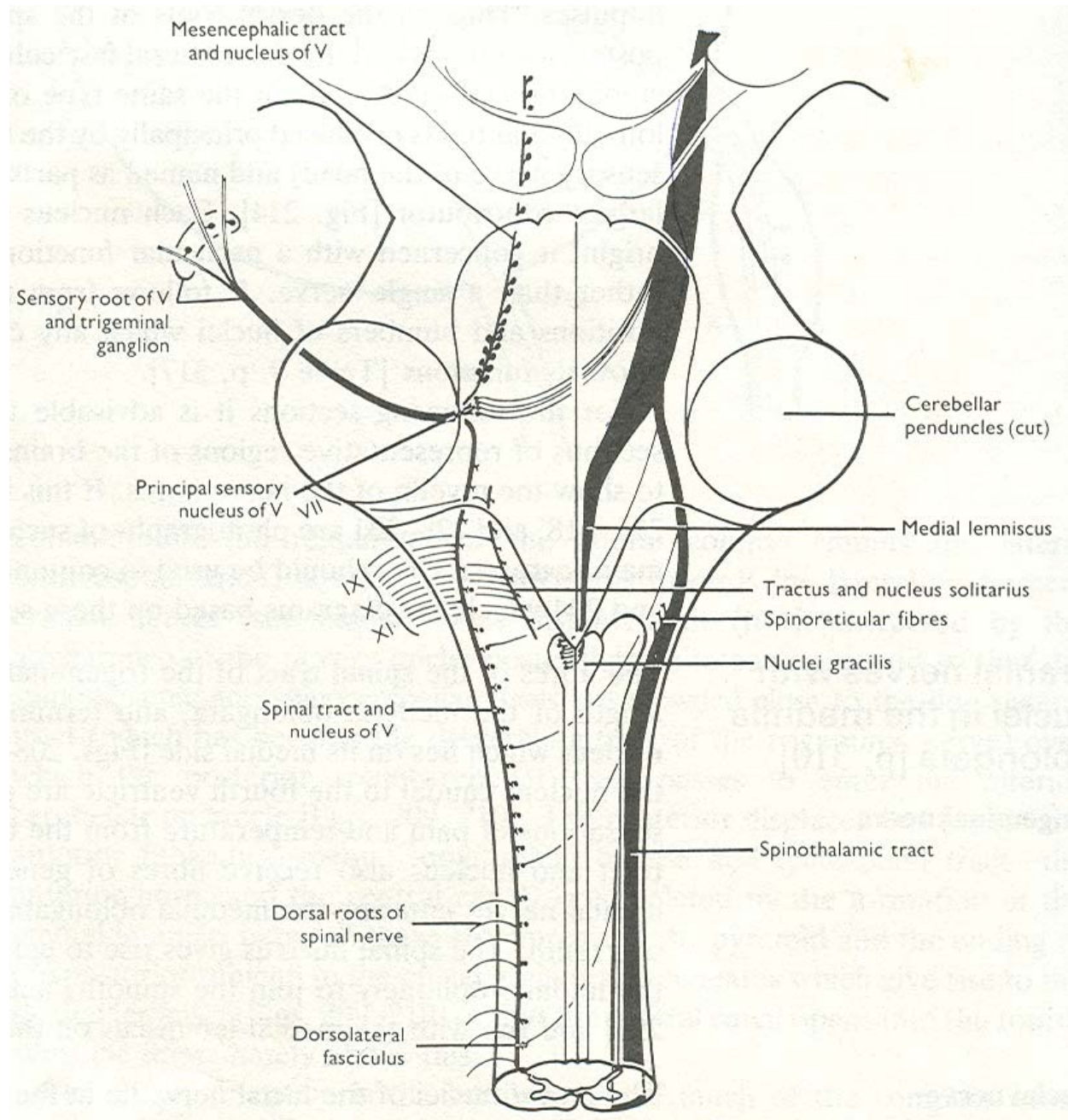


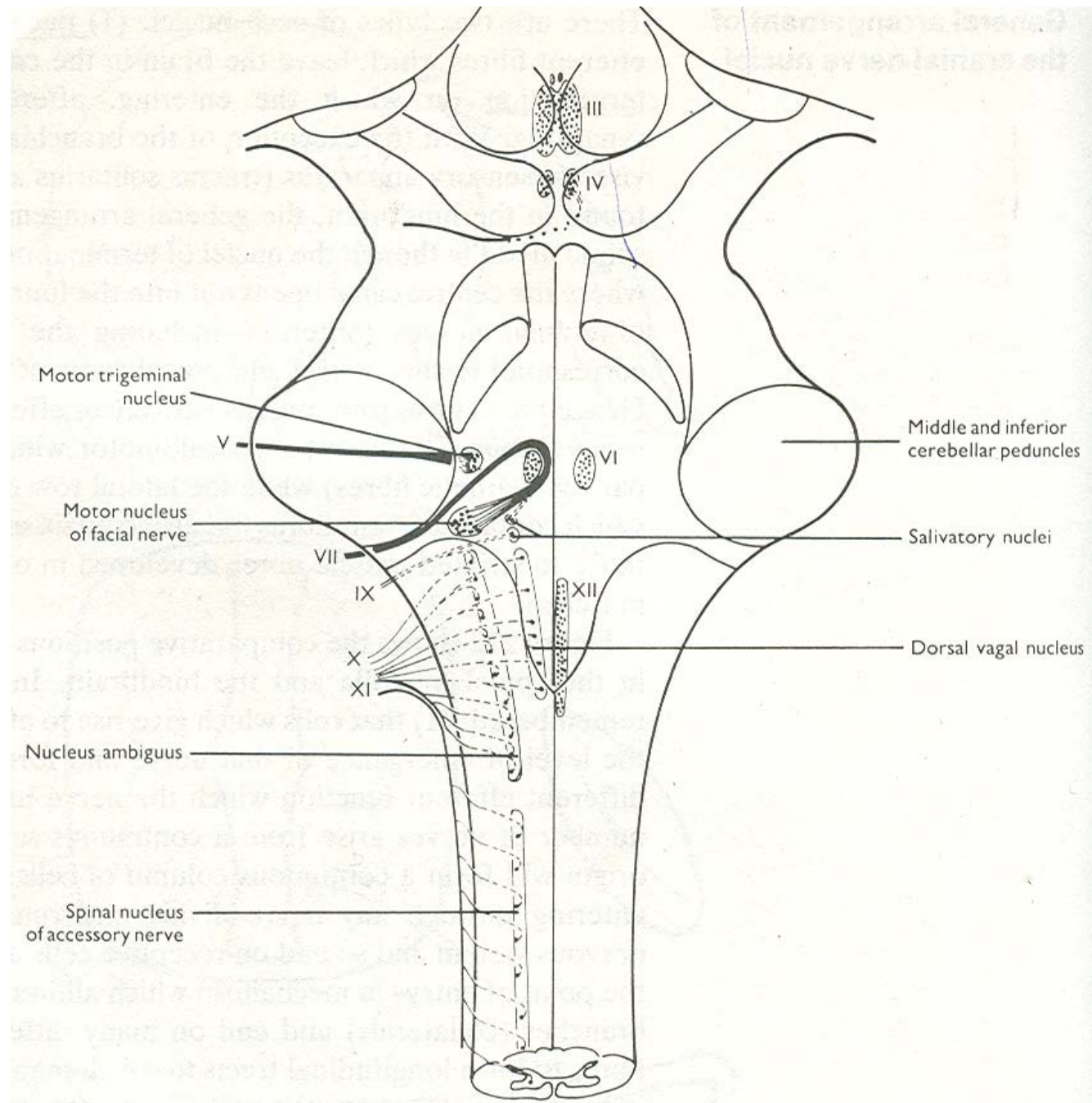


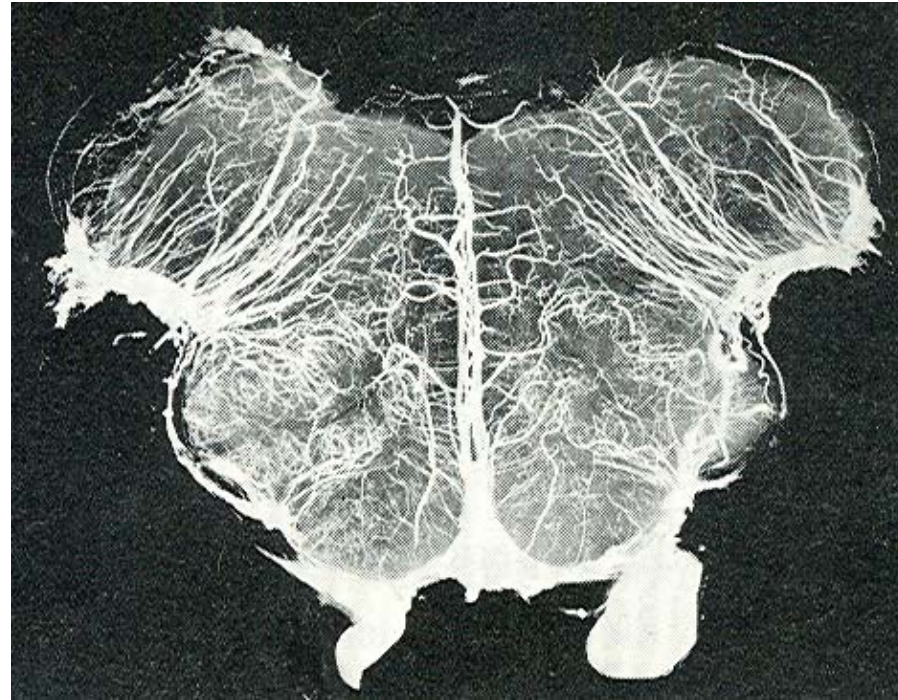


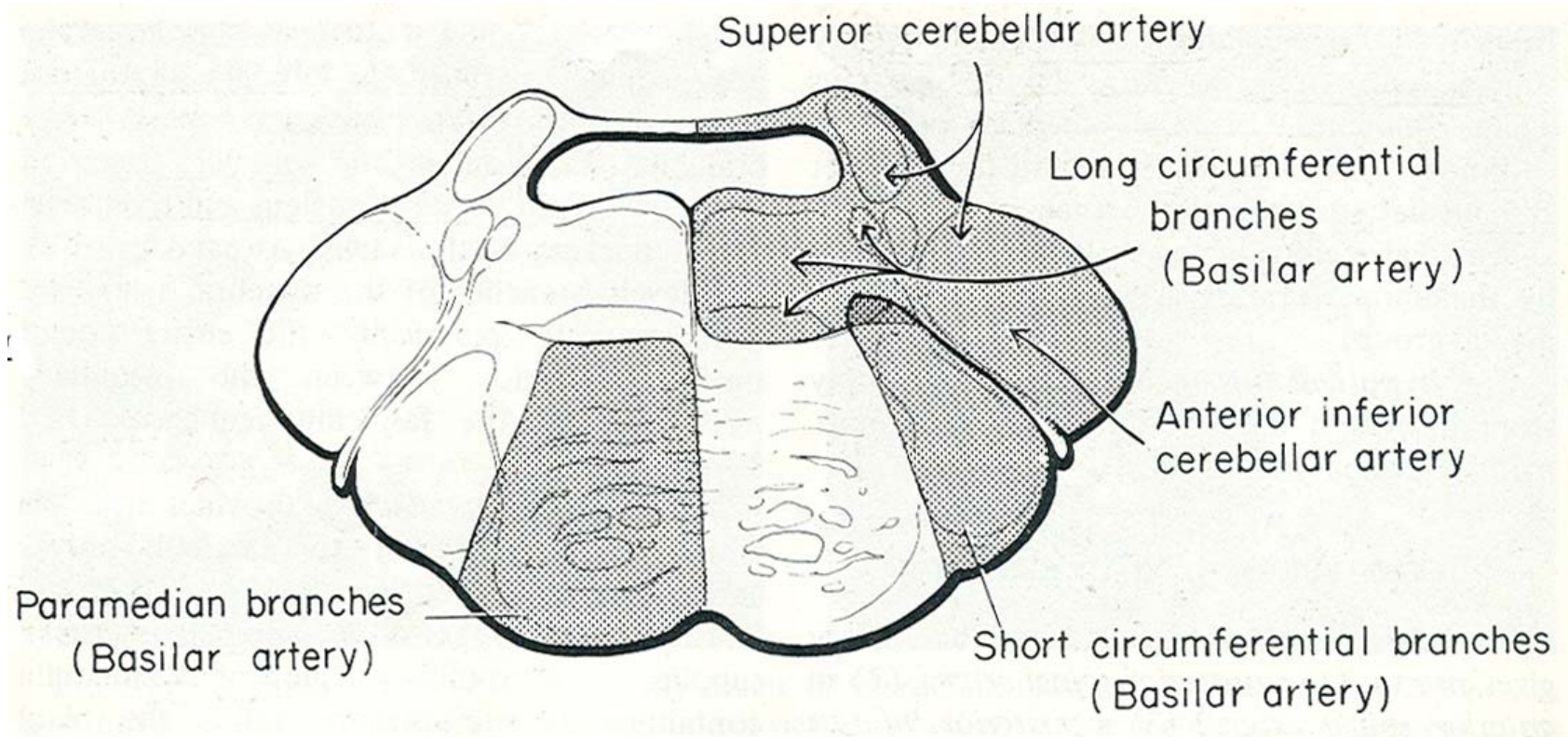


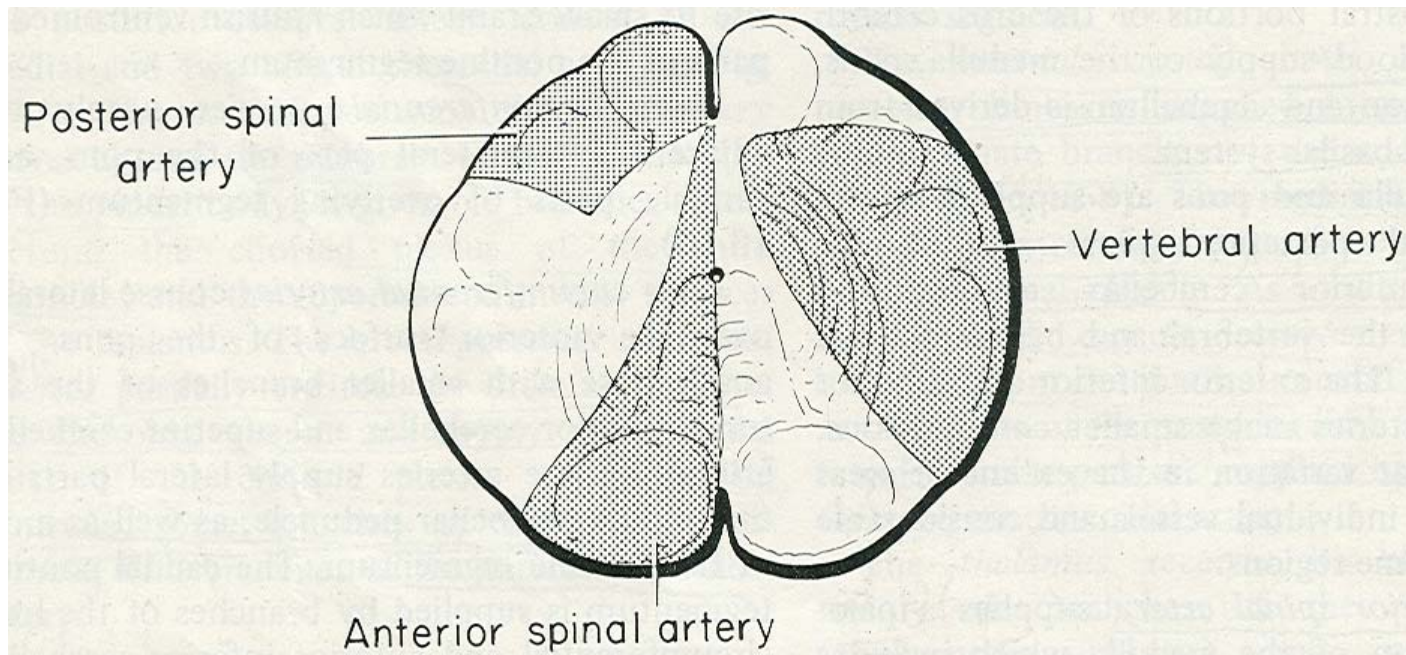












Applied Anatomy

Millard-Gubler Syndrome

Lesions in the lower pons which include pyramidal tract, fibers of VI & VII nerve

Ipsilateral medial squint

Ipsilateral facial palsy

Contralateral hemiplegia

Pontocerebellar angle syndrome

Tinnitus, progressive deafness, vertigo

Ipsilateral ataxia & staggering gait

Ipsilateral facial palsy

Ipsilateral loss of pain & temperature, loss of corneal reflex

Pontine haemorrhage

Hyperpyrexia, Deep coma

Bilateral paralysis of face & limbs