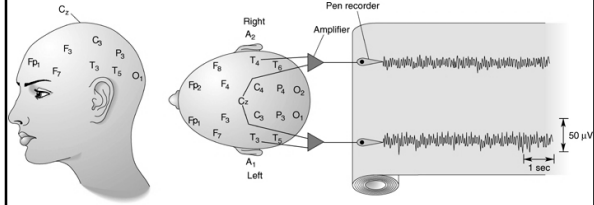
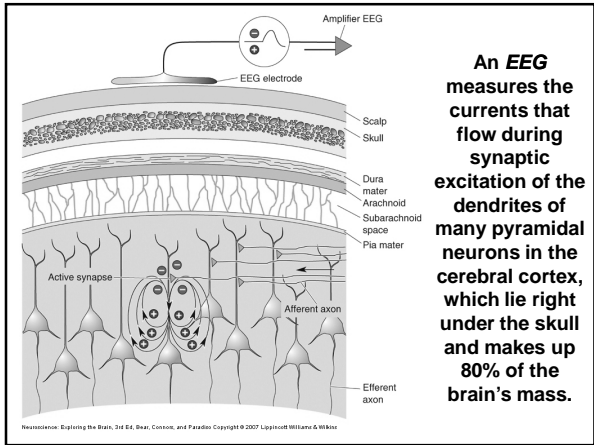


The Electroencephalogram (EEG)



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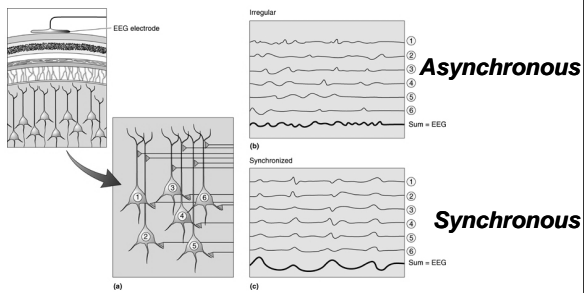
Allows us to measure or glimpse at the generalized activity of the cerebral cortex



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An EEG measures the currents that flow during synaptic excitation of many pyramidal neurons in the cerebral cortex, which lie right under the skull and makes up 80% of the brain's mass.

When each cell receives the same amount of excitation, but spread out in time, the summed signals are meager and irregular.

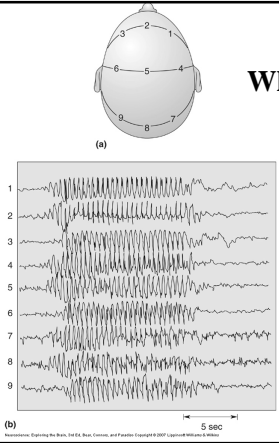


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When a group of cells is excited simultaneously, the tiny signals sum to generate one large surface signal.

High-frequency / low-amplitude rhythms are associated with alertness and waking, or the dreaming stages of sleep.

Low-frequency / high-amplitude rhythms are associated with nondreaming sleep states, or the pathological state of coma.



What the heck is SLEEP?

Sleep is a readily reversible state of reduced responsiveness to, and interaction with, the environment.

Table 19.1 Characteristics of the Three Functional States of the Brain

BEHAVIOR	AWAKE	NON-REM SLEEP	REM SLEEP
EEG	Low voltage, fast	High voltage, slow	Low voltage, fast
Sensation	Vivid, externally generated	Dull or absent	Vivid, internally generated
Thought	Logical, progressive	Logical, repetitive	Vivid, illogical, bizarre
Movement	Continuous, voluntary	Occasional, involuntary	Muscle paralysis; movement commanded by the brain but not carried out
Rapid eye movement	Often	Rare	Often

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Non-REM:

- period of rest? Body is capable of movement, but rarely does the brain command it.
- parasympathetic activity is dominate.
- CNS energy and firing rates are low.
- slow, large-amplitude EEG rhythms (high synchrony, delta waves)
- most sensory input is not getting to the cortex.
- dreams can occur

REM:

- Very active forebrain! EEG similar to awake state. (Paradoxical Sleep)
- Dreaming sleep.
- Atonia except for respiration, heart rate, and eye movements.
- Dominated by sympathetic mechanisms

Falling asleep and the non-REM stages:

- Decrease in firing rate of brainstem modulatory neurons
- This decrease allows the specialized/rhythmic neurons of the Thalamus to work on their own (generating their own rhythmic activity)
- Activity/excitation going to the cortex becomes more synchronous forming larger wave forms (Delta waves).

REM Sleep Mechanisms:

- The cortex is necessary for the elaborate material of dreams, but the initiation of REM sleep is not dependent on the cortex.
- A marked decrease in activity of the Locus Coeruleus and Raphe Nuclei and a large increase in activity from Pons-based Acetylcholine neurons (inducing REM)
- This increased Acetylcholine activity from Pontine neurons acts like sensory input from the body to the Thalamus. Overwhelming the rhythmic activity of the Thalamus and generating the EEG activity that is characteristic of REM sleep.
- These same Pontine neurons inhibit motor activity descending to the spinal cord, immobilizing the body.

LC – Locus Coeruleus; RN – Raphe Nuclei; PPT – Pedunculo Pontine Tegmentum; DLT – Dorsolateral Tegmental Area

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Why do we Sleep?

Restorative Function:

- **What are we restoring?**

Adaptive Function:

- **Staying out of trouble?**

What induces SLEEP?

- Muramyl peptides – produced by bacteria
- Interleukin-1 – produced by glia and the immune system
- Adenosine – DNA/RNA/protein production, an increase induces sleep (which seems to happen the longer a subject is awake), antagonist of adenosine receptors keep people awake, Adenosine receptor activation inhibits the brainstem modulatory neurons.
- Melatonin – secretion of the Pineal Gland, derived from tryptophan, released when pineal gland is stimulated by darker environments (for humans information is gotten from visual input), levels rise to higher levels the later into the evening the body is active.
