# 4. Development of nervous system. Neural plate. Brain vesicles. Sensory organs.

## Development of the central nervous system

- neurulation = ectoderm in front of the primitive node thickens to form the neural plate (week 3, day 17-18)
- neural plate bends to form a **neural groove** in the middle
- the borders are bulging as the neural **folds**
- the neural groove invaginates and closes to form the **neural tube**; the closure of the neural tube starts in the cervical region and proceeds towards the cranial (anterior) neuropore and the caudal (posterior) neuropore; the neuropores are last segments to be closed (the cranial neuropore on day 25, 18-20 somitic embryo; the caudal neuropore on day 27)

## Segmentation of the neural tube

- − a series of thickenings and constrictions = neuromeres  $\rightarrow$  regional segmentation
- the caudal segment develops into the spinal cord
- the cranial segments for the brain vesicles
  - o prosencephalon (forebrain), which will futher differentiate into
    - telencephalon
    - diencephalon
  - o mesencephalon (midbrain)
  - o **rhombencephalon** (hindbrain), which will further be divided into
    - metencephalon, which forms the
      - pons Varoli
      - cerebellum
      - myelencephalon, which becomes the medulla oblongata
- there are flexures: cephalic flexure in the mesencephalic region; pontine flexure between the metencephalon and myelencephalon; cervical flexure between the metencephalon and the spinal cord

## Histogenesis of the neural tube

- histogenesis starts with the pseudostratified columnar epithelium of the primitive neural tube → neuroblasts and gliablasts
- **neuroblasts** = precursors of neurons
  - $\circ~$  temporarily apolar neurons, forming primitive dendrites and axon  $\rightarrow$  bipolar and multipolar neurons
  - o the bodies neuroblasts form the grey matter
  - o the nerve processess of the neuroblasts form the white matter
- gliablasts (spongioblasts) = precurors of glia cells
  - o in the mantle layer they differentiate into plasmatic and fibrillar astrocytes
  - oligodendrocytes form myelin sheaths surrounding the axons and dendrites of the neurons
  - $\circ$  periventricular neuroepithelium  $\rightarrow$  ependymal cells lining the CNS cavities
  - (microglia cells do not originate from the neuroepithelium, but they migrate into the CNS from the mesenchyme)
- proliferation of neuroblasts  $\rightarrow$  thickening of the neural tube:

Z. Tonar, M. Králíčková: Outlines of lectures on embryology for 2<sup>nd</sup> year student of General medicine and Dentistry **(cc)** EY-NO-ND <u>License Creative Commons - http://creativecommons.org/licenses/by-nc-nd/3.0/</u>

- ventral basal plate = motoric region of the spinal cord; contains ventral motor horns with efferent motor neurons
  - medial somatomotoric nuclei of the cranial nerves XII, VI, IV, III
  - lateral somatomotoric nuclei of the cranial nerves IX, X, XI, VII, V
  - visceromotoric nuclei: preganglionic parasympathetic neurons of the cranial nerve IX, X, VII, III
- **dorsal alar plate** = sensory area; dorsal horn with afferent sensory neurons entering the spinal cord from the dorsal root of the spinal nerves
  - lateral sensory nucleus: n. VIII,
  - somatosensory nucleus: n. V.
  - viscerosensory nuclei: n. V, n. VII, n. IX, n. X
- o sulcus limitans separates the basal plate from the alar plate
- the right ant the left alar plates are connected by the dorsal roof plate
- $\circ$   $\;$  the right ant the left basal plates are connected by the ventral floor plate
- the lateral horns develop in the region Th1-Th12 and L1-L3 (thoraco-lumbal sympathetic nervous system)

## Positional changes of the spinal cord

- in the 3rd month the spinal cord extends the entire length of the body
- the vertebral column and the dural sac lengthen more rapidly than the neural tube  $\rightarrow$  disproportionate growth  $\rightarrow$  spinal nerves run obliquely
- the dura remains attached to the vertebral column  $\rightarrow$  the dural sac
- the spinal cord in newborns extends to the body of the L3 vertebra
- extension of the pia mater = filum terminale internum
- in the adult, the spinal cords extends to the L1/L2 level (in male) or to the L2 level (female), whereas the dural sac continues to the S2 level → lumbar puncture of the subarachnoideal space is to be done between L3/L4 (or L4/L5)

#### Brain

- telencephalon
  - o lamina terminalis in the middle, hemispheres are lateral
  - lateral ventricles develop within the cerebral hemispheres; they communicate via the interventricular foramen of Monro with the 3rd ventricle
  - basal regions of hemispheres are bulging into the lateral ventricles as the basal ganglia
  - ependyme and the vascularised mesenchyme forms the choroid plexus of the lateral ventricles
  - o hippocampus is also bulging into the lateral ventricles
  - hemispheres are growing over the diencephalon, mesencephalon and the cerebellum
  - pallium = cell layer on the surface of hemispheres
    - paleopallium in the region lateral to the corpus striatum  $\rightarrow$  paleocortex with 3 layers
    - archipallium in the medial part  $\rightarrow$  archicortex with 3 cell layers
    - neopallium covering most of the hemispheres  $\rightarrow$  6 layers of the cerebral neocortex
  - $\circ$  migration waves of neuroblasts proceed towards the brain surface  $\rightarrow$  cortical cytoarchitectonics emerges

Z. Tonar, M. Králíčková: Outlines of lectures on embryology for 2<sup>nd</sup> year student of General medicine and Dentistry **(cc)** EY-NO-ND <u>License Creative Commons - http://creativecommons.org/licenses/by-nc-nd/3.0/</u>

 commissurae cerebri connecting the hemispheres (anterior, hippocampal/fornix commissure, corpus callosum); posterior and habenular commissure

## diencephalon

- $\circ$  its cavity  $\rightarrow$  3rd ventricle; the roof forms the tela choroidea ventriculi III.
- o epithalamus with the epiphysis (melatonin, circadian rhythms)
- thalamus and its nuclei connecting pathways to the brain cortex
- $\circ~$  growth of the thalamus → bulging into the 3rd ventricle → adhesio interthalamica in the midline
- o hypothalamic nuclei involved in homeostatic regulations
- infundibulum → neurohypophysis (joining the Rathke's stomodeal pouch → hypophysis)
- $\circ$  diencephalon  $\rightarrow$  connected with the optic vesicles via the nerve II

## mesencephalon

- $\circ$  its cavity → aquaeductus mesencephali (Sylvii)
- o basal plate with motor nuclei
- there are the crura cerebri below the basal plate, they contain axons connecting the brain cortex with the spinal cord
- anterior (superior) colliculus (reflex centres for visual reflexes); posterior (inferior) colliculus (synaptic relay for auditory reflexes)
- o nucleus ruber and the substantia nigra

## – pons

- o contains pathways connecting the brain cortex, cerebellum, and spinal cord
- the basal plate has three rows of nuclei of cranial nerves and nuclei of the reticular formation
- the alar plate contains sensory nuclei and also the pontine nuclei (connecting fibres between the brain cortex and the cerebellum)

## cerebellum

- o vermis in the midline; lateral hemispheres cleaved with parallel grooves
- $\circ$  migration of neuroblasts  $\rightarrow$  three layers of the cerebellar cortex; other cells differentiate into the neurons of the cerebellar nuclei

## medulla oblongata

- o unlike the spinal cords, the alar plates are laterally widely open
- o the basal plate has three groups of motor nuclei
- o alar plate has three groups of sensory nuclei
- the central canal in the middle connects the brain cavities with the central canal of the spinal cord

## Neural tube defects

- a broad range of defects affecting the spinal cord, meninges, vertebrae, vertebral muscles or the skin; some of them may be prevented by folic acid
- spina bifida = a neural tube defect affecting the spinal region
  - spina bifida occulta: a defect of fusion of vertebral arches; does not involve spinal cord defects; usually causes no symptoms; mostly in the lumbosacral region
  - spina bifida cystica: a severe defect with neural tissue and/or meninges protruding through a defect in the vertebral arches and skin
    - meningocele = herniation of the meninges

Z. Tonar, M. Králíčková: Outlines of lectures on embryology for 2<sup>nd</sup> year student of General medicine and Dentistry **(cc)** EY-NO-ND <u>License Creative Commons - http://creativecommons.org/licenses/by-nc-nd/3.0/</u>

- meingomyelocele = herniation of the meninges and nervous tissue (which is damaged)
- abnormal fixation of the spinal cord within the vertebral canal → displacement of cerebellum into the foramen magnum (Arnold-Chiari syndrome) → the cerebrospinal fluid flow is blocked → hydrocephalus
- myeloschisis and rhachischisis = the neural tube fails to close
- holoprosencephaly: the telencephalon and the face fails to divide
- exencephaly, anencephaly the cranial neuropore fails to close → the skull vault is missing → the brain is not covered and protected
- hydrocephalus with abnormal accumulation of cerebrospinal fluid; mostly caused by an obstruction of the aquaeduct of Sylvius) → skull bones are expanding

## Myelination

- in the CNS: processes of oligodendrocytes; starts in month 4, continues after birth up to 2 years (and extends even later into the childhood)
- in the PNS: Schwann glia cells, since month 4

#### **Cranial nerves**

- their nuclei appear already in the week 4
- n. I originates from the telencephalon; n. II from the diencephalon; n. III in the mesencephalon; the remaining cranial nerves develop within the brain stem
- somatomotoric nuclei of nerves IV, V, VI, VII, IX, X, XI, XII
- visceromotoric nuclei of nerves VII, IX, X
- sensory ganglia of cranial nerves originating from ectodermal neural placodes and from the neural crest: nerves I, VIII, V, VII, IX, X
- parasympathetic ganglia of nerves III, VII, IX, X

#### **Neural crest**

- originates along the neural folds (except of the prosencephalic region)
- its cells disseminate and migrate into the periphery since the week 4 to contribute to a number of structures, i.e.:
  - o in the head and neck region
    - cranial nerve sensory ganglia and ganglia of nerve V, VII, IX, X
    - ectomesenchyme of the branchial arches
    - odontoblasts
  - o the aortico-pulmonary septum
  - o in the thoracolumbar region:
    - the dorsal root spinal ganglia
    - postganglionic autonomic neurons of the enteric nerve system
    - the medulla of the suprarenal glands
    - melanocytes
  - o Schwann cells

#### The ear

- internal ear
  - thickened ectodermal in the rhombencephalic region = otic placode
  - o the otic placode invaginates and forms a hollow otocyst (otic, auditory vesicles)

Z. Tonar, M. Králíčková: Outlines of lectures on embryology for 2<sup>nd</sup> year student of General medicine and Dentistry License Creative Commons - http://creativecommons.org/licenses/by-nc-nd/3.0/

- o the otocyst differentiates into a membranaceous labyrinth lined with an epithelium
  - ventral saccule
  - cochlear duct grows from the saccule and contains the organ of Corti
  - dorsal utricle branching into semicircular canals and the endolymphatic duct
- middle ear
  - the tympanic cavity originates mainly from the entoderm of the 1st pharyngeal pouch and therefore communicates with the nasopharynx via the Eustachian tube
  - auditory ossicles: malleus and incus originate from the 1st mandibular pharyngeal cartilage; the stapes originates from the 2nd pharyngeal cartilage
- external ear:
  - the auricle develops from six mesenchymal proliferations (auricular hillocks) surrounding the 1st pharyngeal cleft
  - o the external auditory meatus develops from the first pharyngeal cleft
  - the eardrum has an ectodermal lining, connective tissue layer, and an entodermal epithelium

#### Eye

- optic vesicles and the lens
  - o the wall of the diencephalon forms lateral outpocketings in the week  $\rightarrow$  optic vesicles
  - the vesicles grow laterally and invaginate into optic cups that induce thickening of the surface ectoderm = the lens placode
  - the lens placode invaginates and forms a lens vesicle (week 5) which migrates deeper into the optic vesicle
  - the posterior epithelial cells of the lens grow towards the anterior epithelium, thus filling the cavity of the lens vesicle and forming a solid lens
  - the rest of the surface ectodermal optic placode differentiates into the cornea
- retina
  - o the outer layer of the optic cup becomes the pigment layer of the retina
  - the inner layer of the optic cup becomes the neural layer of the retina and differentiates into three layers of neurons (photoreceptors=rods+cones, bipolar neurons, ganglion cells) and layers of neuroglia
- the iris, the ciliary body and the choroid represent the vascular layer of the eyeball and they differentiate from the vascularised mesenchyme
- the fibrous layer of the eyeball differentiates from the mesenchyme: the sclera (dense irregular collagenous connective tissue), the cornea (avascular stroma covered with the outer ectodermal epithelium and with the inner endothelium lining the anterior chamber)
- the hyaloid artery (from the ophthalmic artery, which branches from the internal carotid art.)
  - o supplies the retina and the lens; runs through the vitreous body
  - $\circ$  the retinal part persists  $\rightarrow$  the central artery of the retina
  - o the lenticular plexus disappears, leaving a hyaloid canal within the vitreous body
- the optic nerve
  - o represents the optic stalk connecting the optic cup with the diencephalon
  - the optic stalk has a ventral groove surrounding the hyaloid artery (and vein)

Z. Tonar, M. Králíčková: Outlines of lectures on embryology for 2<sup>nd</sup> year student of General medicine and Dentistry License Creative Commons - http://creativecommons.org/licenses/by-nc-nd/3.0/

- choroid fissure = a temporary groove on the ventral surface of the optic stalk; this has to close in the week 7 and the hyaloid artery (later the central artery of the retina) becomes entrapped within the optic nerve
- eye abnormalities
  - coloboma iridis = the choroid fissure fails to close; it may affect the iris, the ciliary body, the retina, or even the optic nerve
  - o persistence of the iridopupillary membrane
  - o inborn cataracta of the lens
  - o persistence of the hyaloid artery
  - o microphalmia (frequently caused by intrauterine infections)
  - o anophtalmia
  - o aphakia = absence of the lens
  - cyclopia, synophtalmia = due to a loss of midline issue, the optic cups and the eyes merge in the midline; it is associated with holoprosencephaly (merged hemishperes of the telencephalon)