Solutions

2.1

- At the pyramids (caudal medulla); ~85–90 % of fibres ✓.

2.2

- UMN: Babinski / hyperreflexia / spasticity; LMN: fasciculations / atrophy / areflexia ✓.

2.3

- The cerebellum (timing): intention tremor with dysmetria ✓.

3.1

- At C5 the anterior horn is compressed → LMN: wasting, absent biceps jerk ✓.
- Below the level the lateral corticospinal tract is compressed → spasticity, hyperreflexia, Babinski ✓.
- IPSilateral because the tract crossed at the medulla – contralateral signs localise above the foramen magnum ✓.
- The two sign sets at one level name a cord lesion.

3.2

- Rest tremor improving with movement + slowness = basal ganglia (dopamine low, Parkinson pattern) ✓.
- Intention tremor + dysdiadochokinesia = cerebellum (timing) ✓.
- Cerebellar signs are IPSilateral to the lesion – its connections double-cross ✓.

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