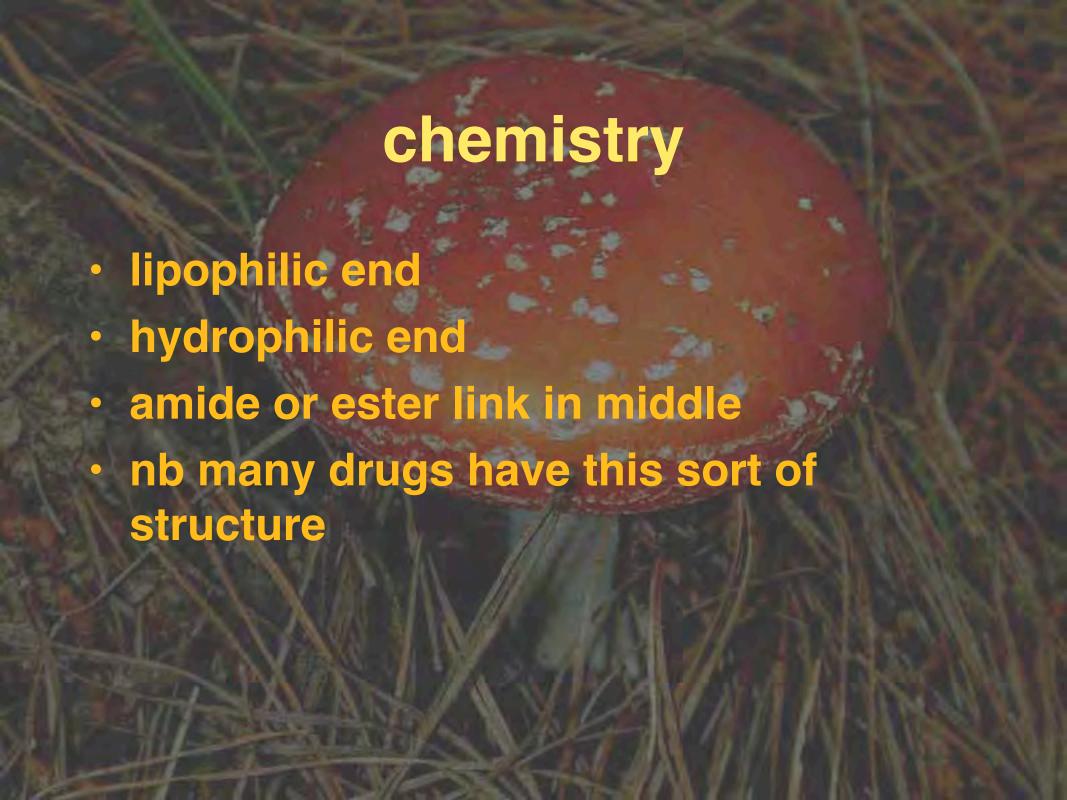


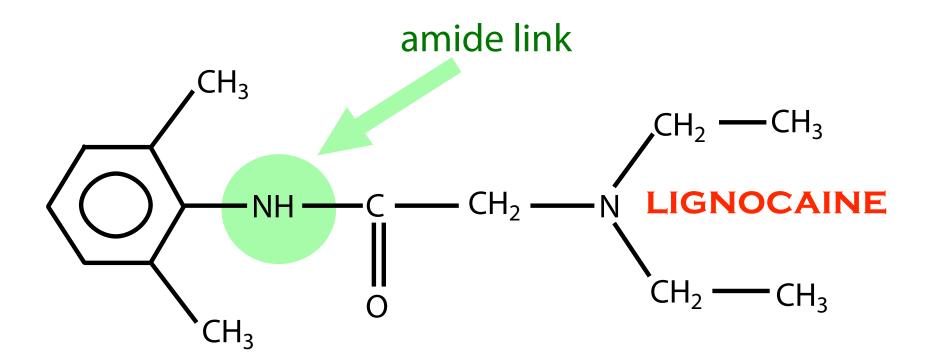
-70mV

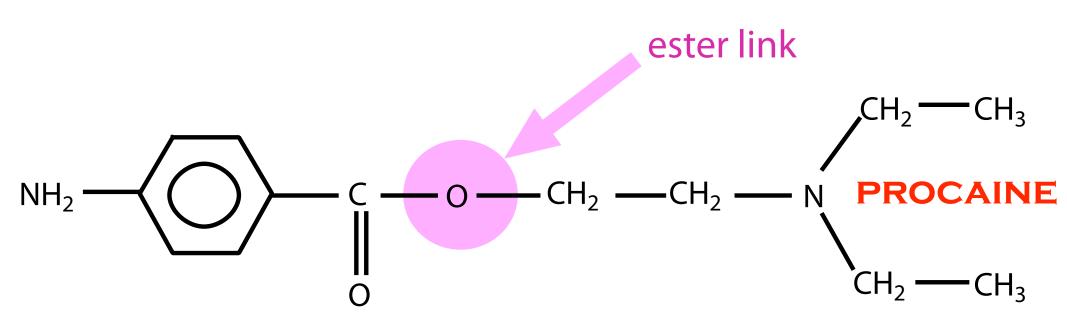
## Na channel subtypes

- CNS Na<sub>V</sub>1.1, 1.2, 1.3
- skeletal muscle Na<sub>V</sub>1.4
- heart Na<sub>V</sub>1.5
- dorsal root ganglia Na<sub>V</sub>1.8,1.9
- neurendocrine & peripheral neurones Na<sub>V</sub>1.7
- all neurones & glia Na<sub>V</sub>1.6



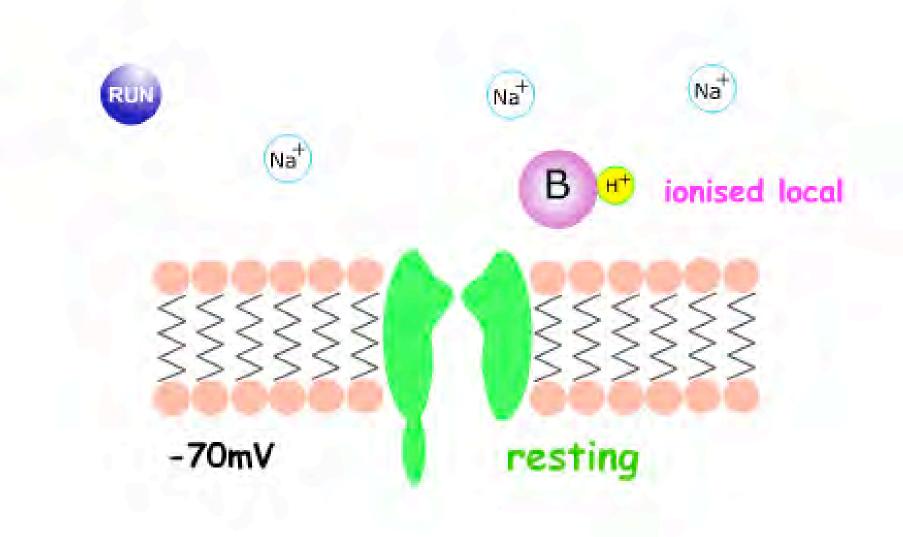




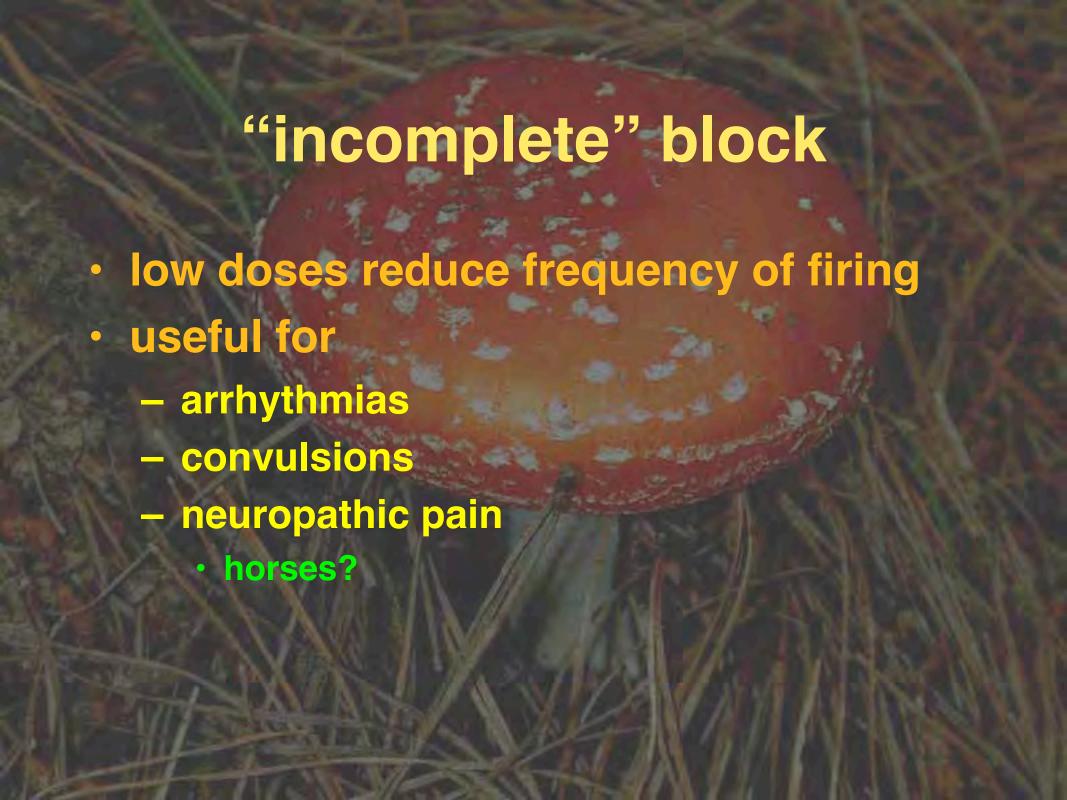


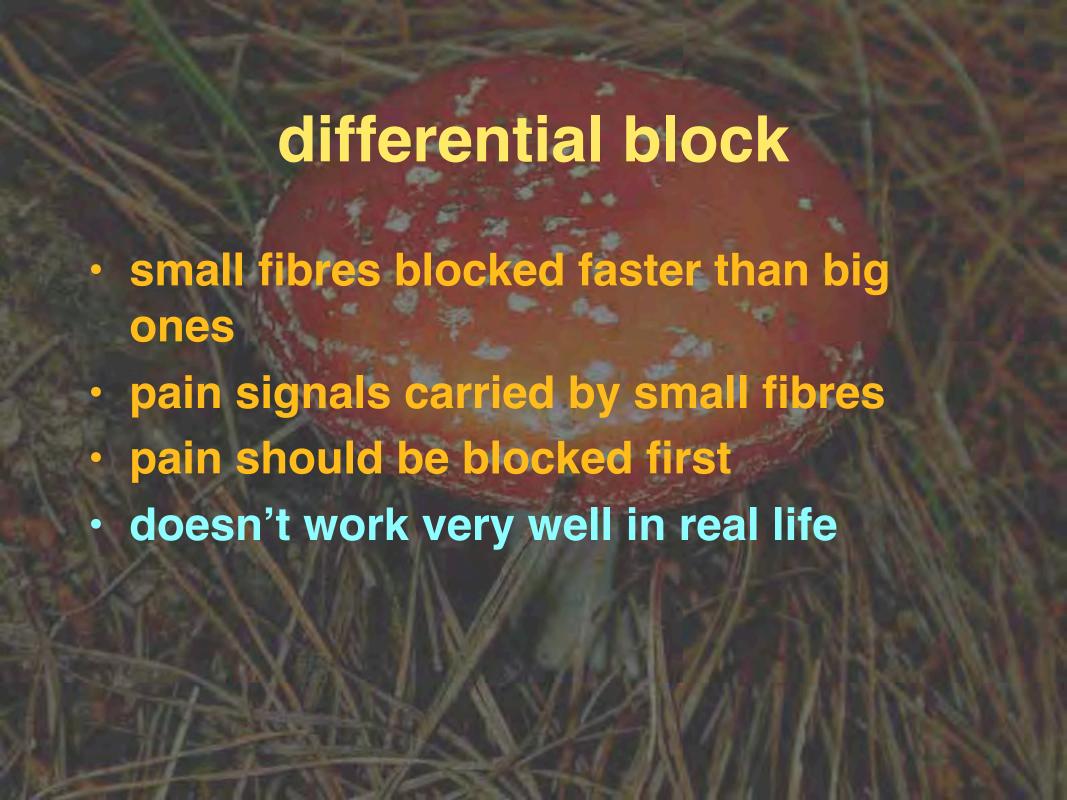






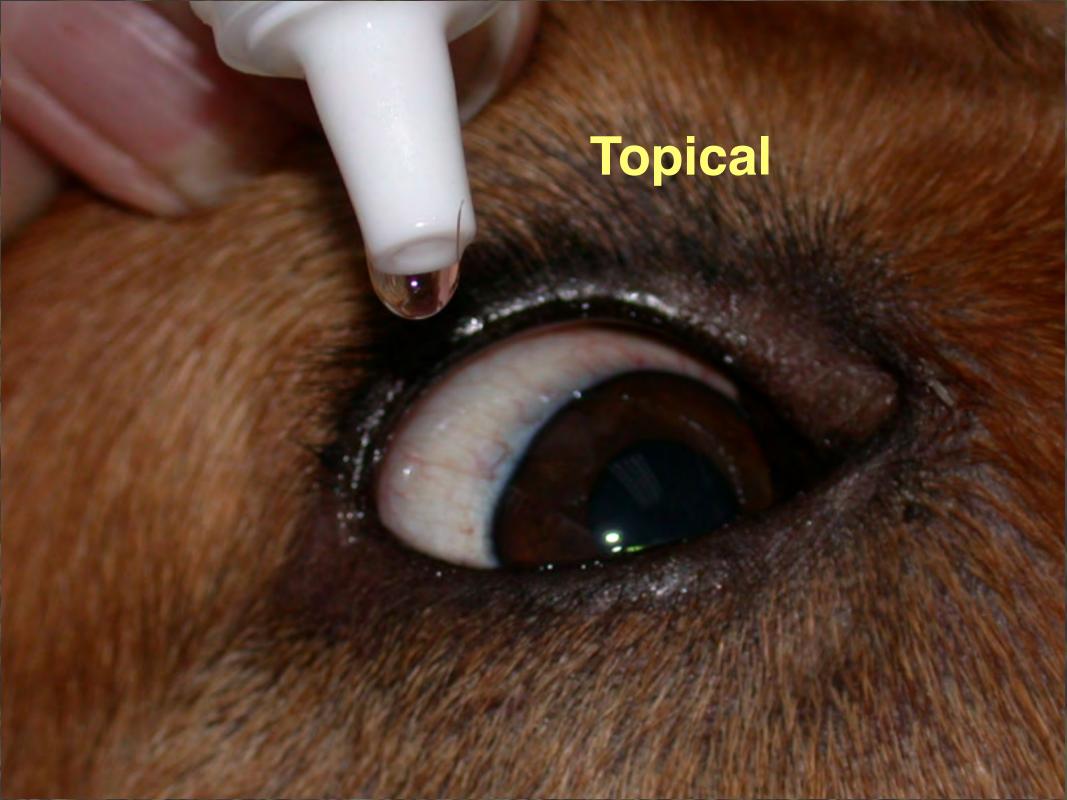




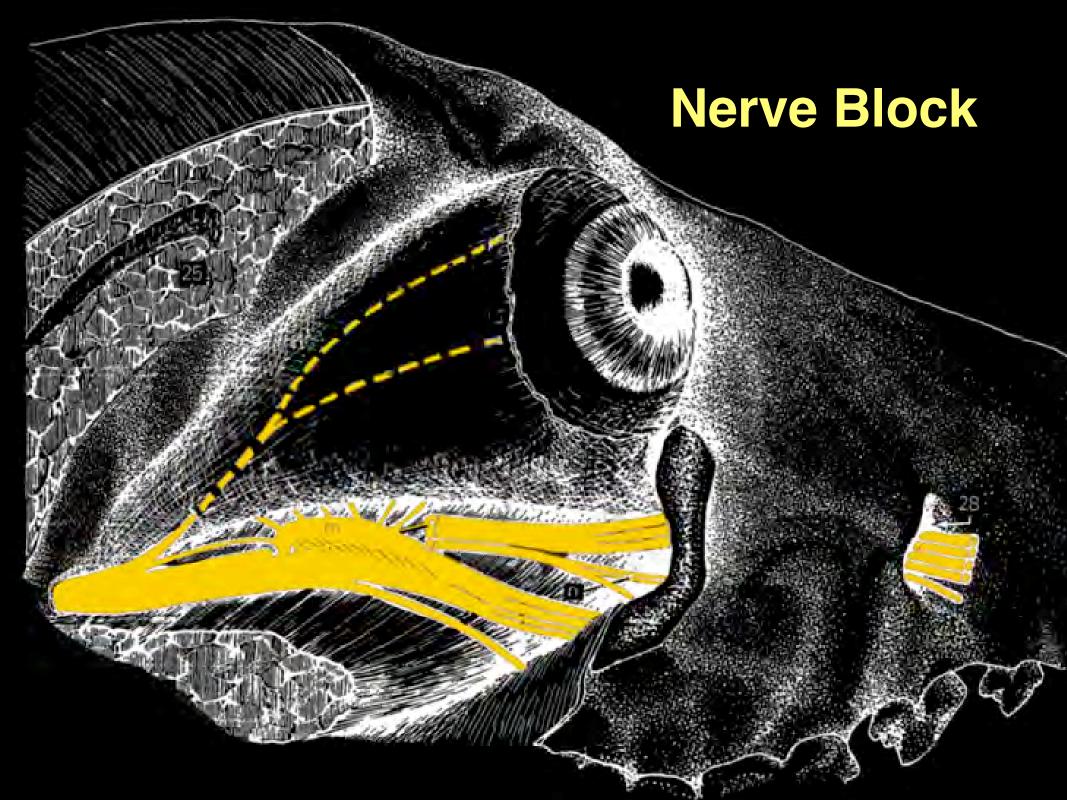


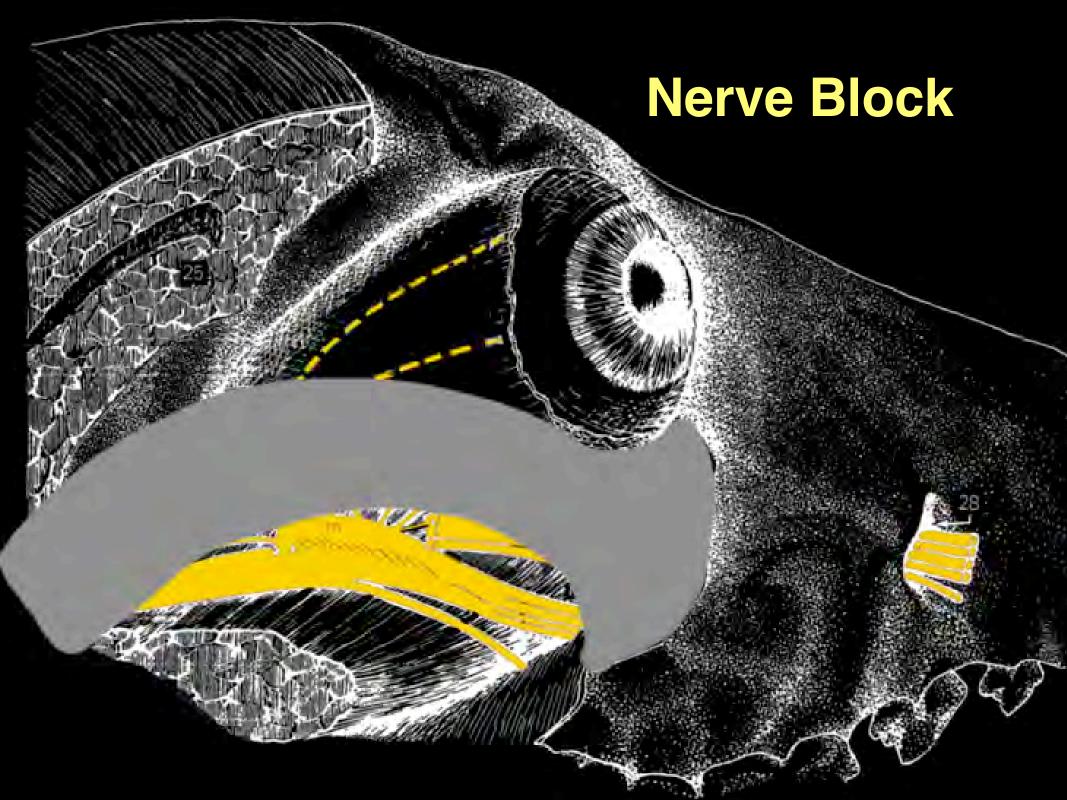


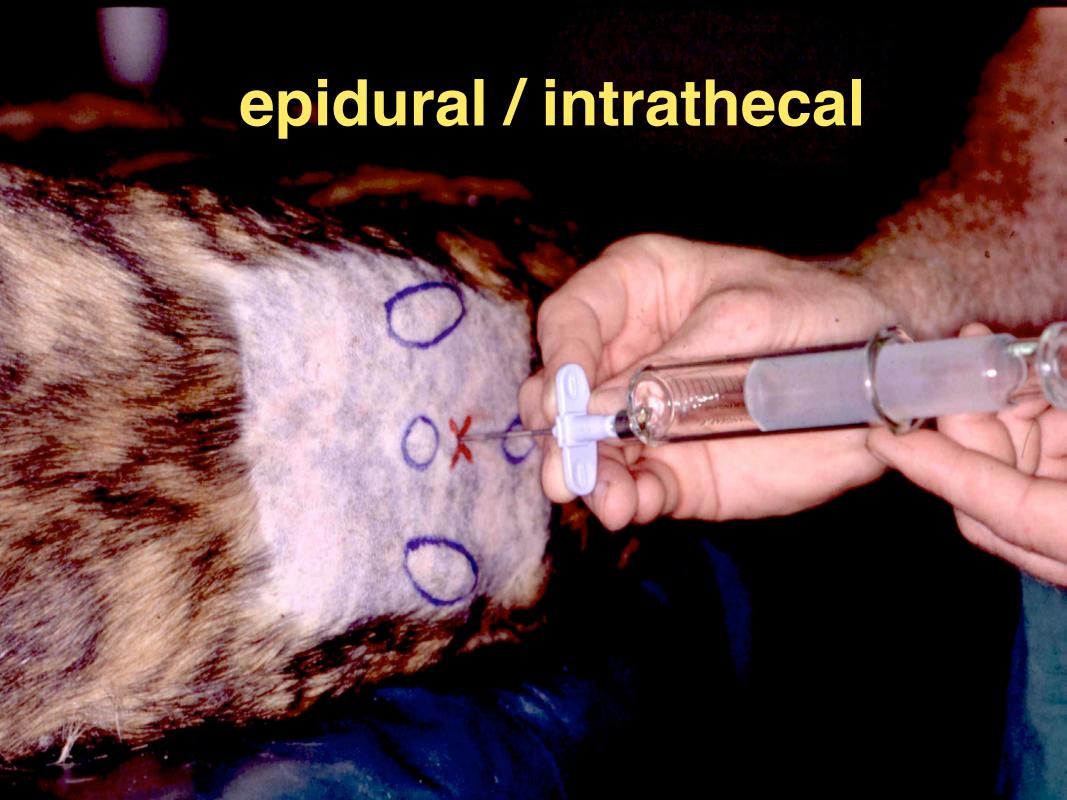






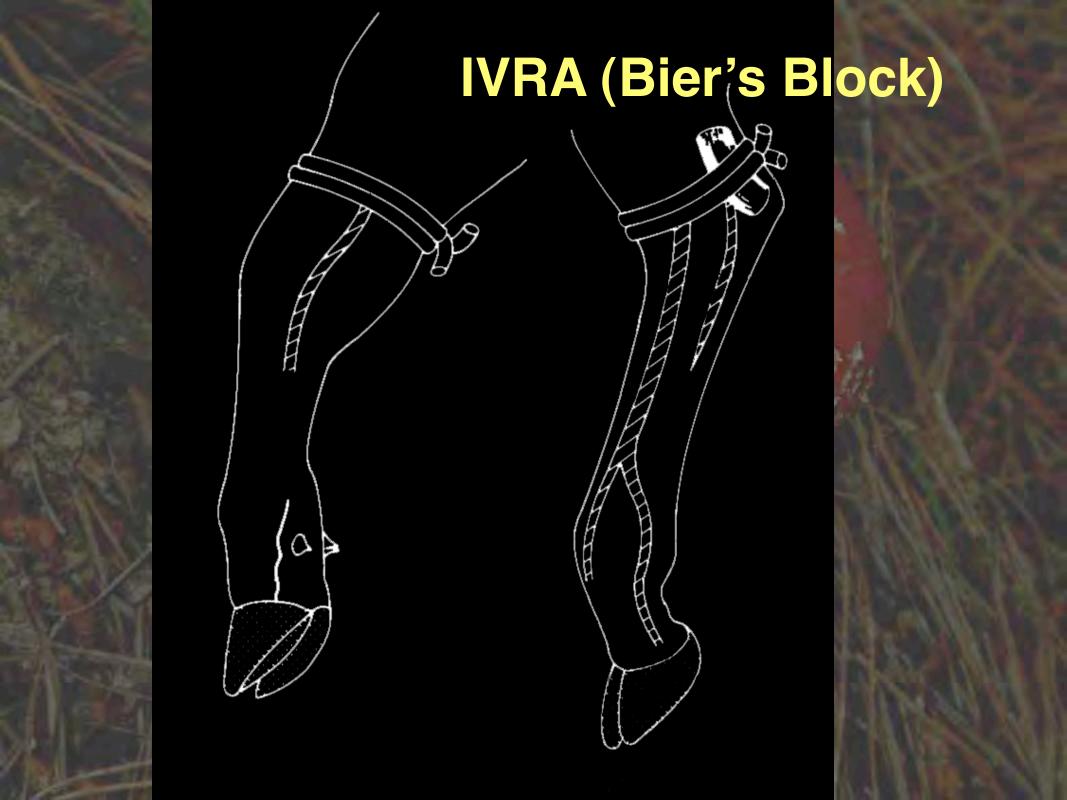


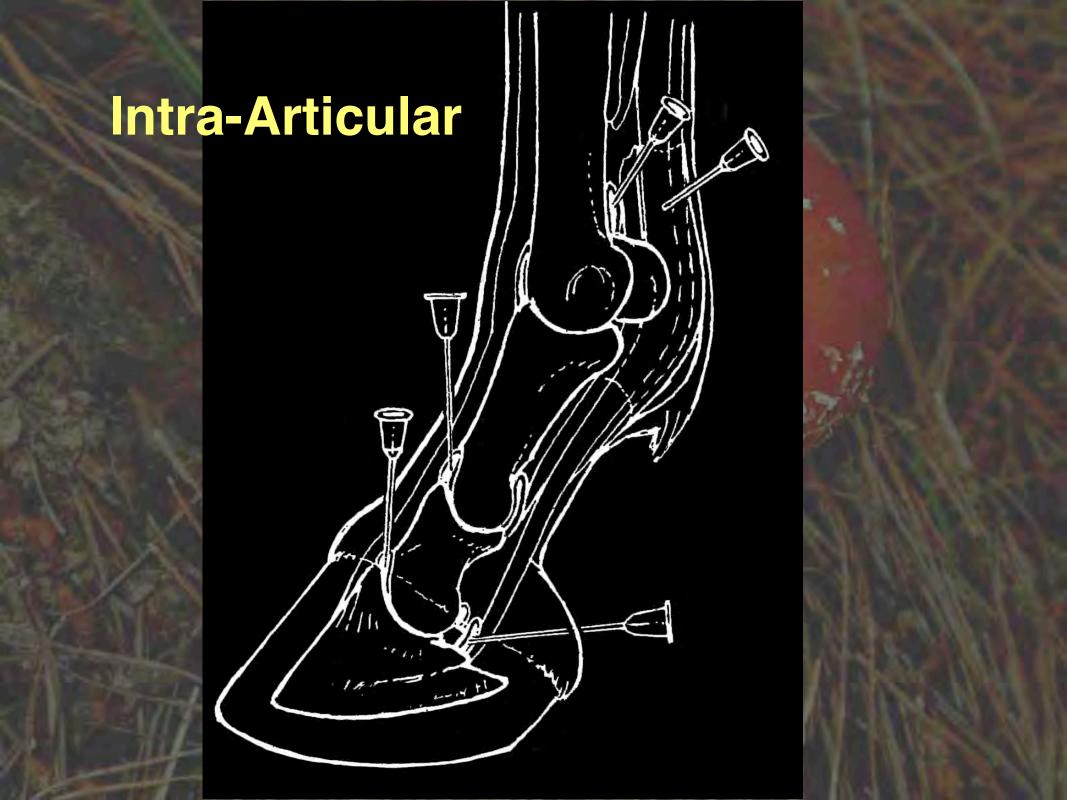






- Contraindications
  - History of Trauma
  - Deformity
  - Systemic or Local Infection
  - Hypovolaemia
  - Clotting Disorder
  - Blood / CSF Aspiration

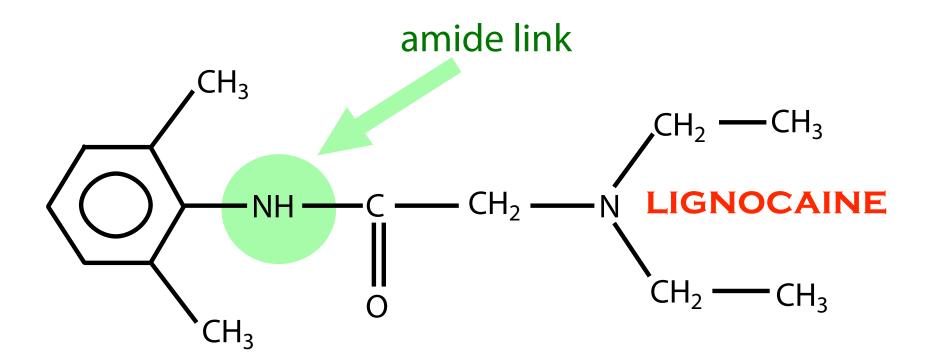


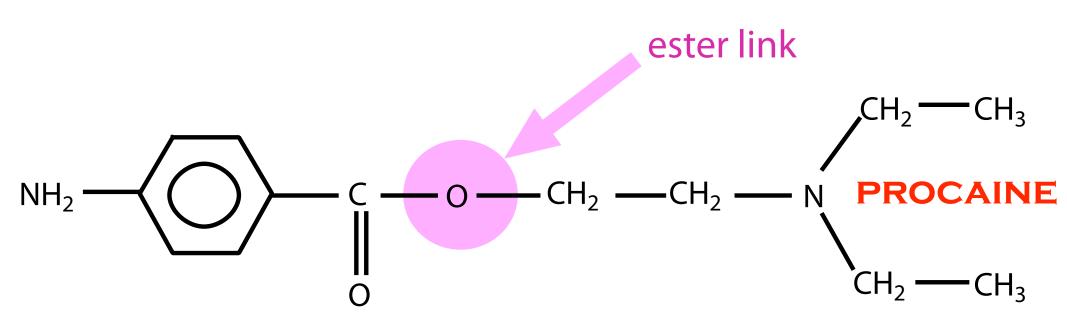






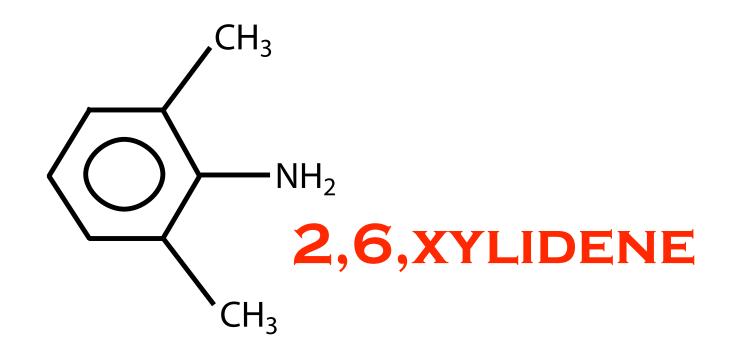
- injected somewhere near nerve
- penetrate nerve fibres
- diffuse out of nerve
- distributed away by blood
  - vasoconstrictors
- metabolised
- metabolites eliminated

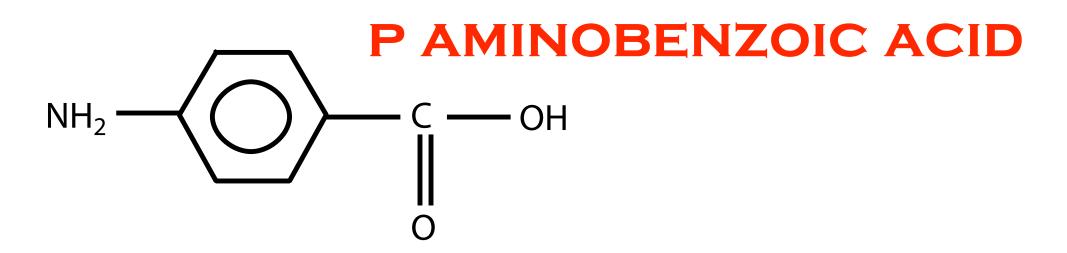


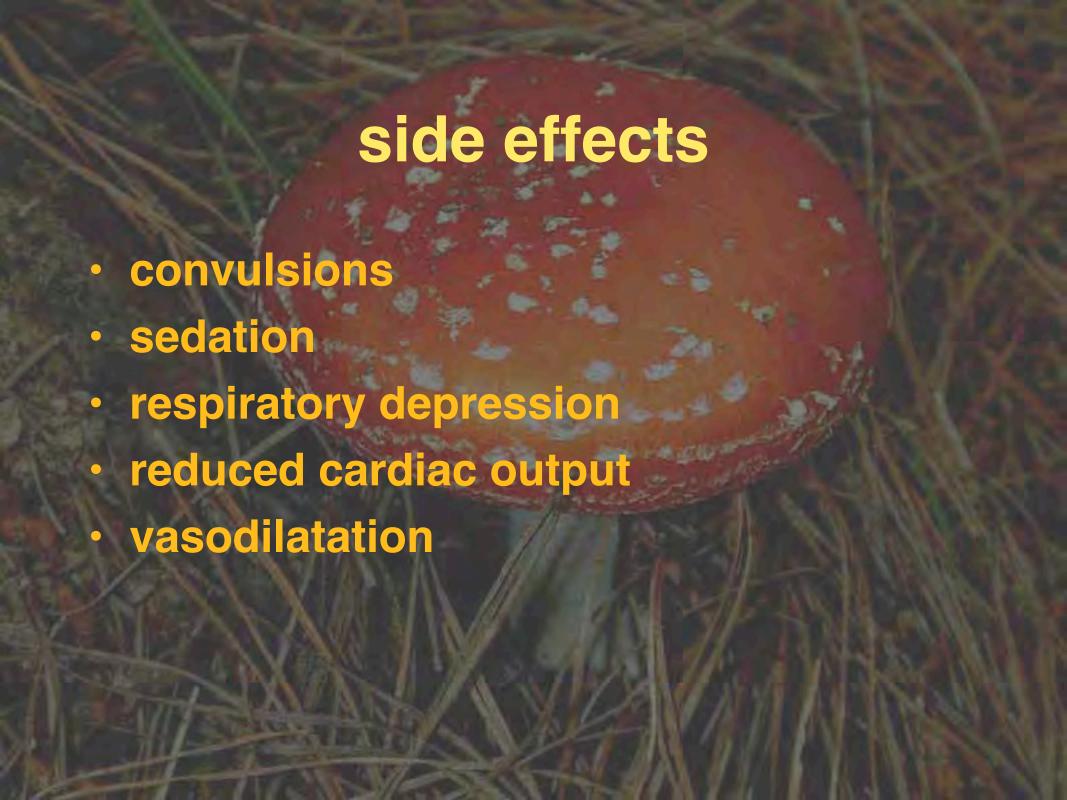














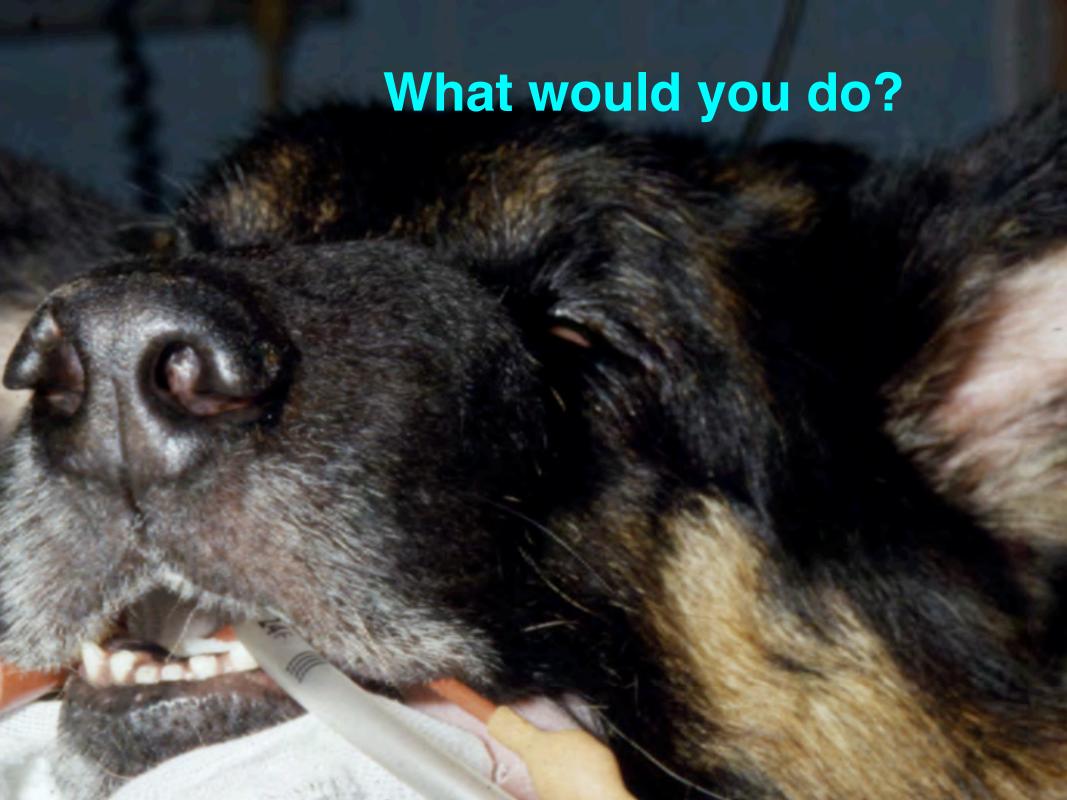


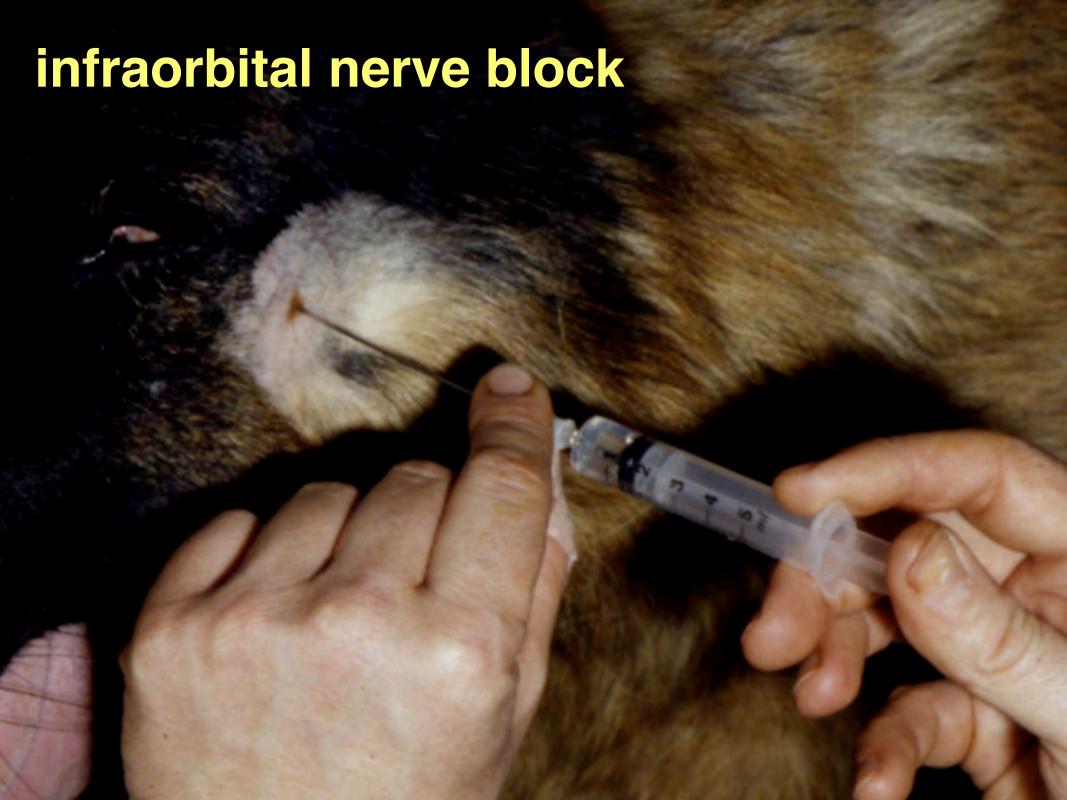












## local anaesthetics

- stop action potentials by blocking sodium channels
- are weak bases which get into cells in the unionised form, become ionised and bind to the channels in the open or inactivated state.
- show use dependence rate of onset and depth of block are dependent on action potential frequency
- block pain fibres before motor fibres
- are mainly used for analgesia particularly in ruminants
- block most excitable tissues if you give too much