Steps in EMG analysis

- **at rest** spontaneous activity
 - fibs, psw, myotonia, complex rep discharges
 - fasciculations, myokymia
- at slight voluntary contraction MUP
 - shape parameters, stability (jiggle), behaviour
- at strong contraction interference pattern
 recruitment, fullness, MUP parameters

At rest

- No electrical activity, NOTE, muscle position for complete rest
- EXCEPTIONS (we may hear something!)
 - insertion activity
 - motor end-plate noise
 - nerve spikes
 - few positive waves in end-plate region

Spontaneous activity from the muscle

FINDING

- fibrillation potentials, psw
- myotonic discharges
- CRD
- myokymic discharges
- myogenic extra discharges

MEASURE AS

- #/ 10 recording sites
- or +, ++, +++, ++++
 - few
 - moderate
 - abundant
- or
 - spontaneous or
 - after provocation

Stålberg

Spontaneous activity from the nerve

FINDING

- neurotonic discharges
- myokymic discharges
- muscle cramps
- fasciculations
- neurogenic extra discharges

MEASURE AS

- #/ 10 recording sites
- or +, ++, +++, ++++
 - few (per time unit)
 - moderate
 - abundant
- indicate
 - spontaneous or
 - after provocation

Stålberg

Spontaneous EMG activity

-Spontaneous activity generated in the muscle

»Insertional activity Myotonic discharges
 »End-plate spikes CRD
 Myogenic doublets

-Spontaneous activity generated in the nerve or anterior horn cell

»Fasciculations
 »Double discharges
 Double discharges
 Neurotonic discharges
 Myokymic discharges
 Double discharges
 Cramp discharges
 Synkinesis

Generated in the muscle fibre



Seen in end-plate region also in normal muscle: irrgular, with initial negativity

Generated in the muscle fibre



Generated in the nerve/motor neurone



5 ms

Generated in the nerve/motor neurone



Myokymic discharge

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	. -	. .			¶⁻ ₩ 5 ms

Fasciculation potentials





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Muscle-normal

Insertional activity

- Description: burst of psw or biphasic act, < 300 msec
- Generated by: needle movement
- Seen in: all normal. May be prolonged in denervation
- Not seen in: fibrosis, hyperkal.per.par

Muscle-normal

End-plate noise

- **Description:** low amplitude noise, neg waves
- Generated by: mepp
- Seen in: normal muscle
 - at end-plate region
 - often accompanied by pain
- Not seen in: denervation

Muscle-normal

End-plate spikes

- Description: irregular negative spikes (100-200 uV) in end-plate regions (often with end-plate noise in the backgound)
- Generated by: needle irritation of terminal nerve activating the muscle fibres
- Seen in: normal end-plate region
- Not seen in: denervation

Muscle- abnormal

Fibrillation potentials and positive sharp waves

- Description: Fib: usually regular(> 50%), s.f.a.p, rate 0.5-15 psw: often irregular discharges or runs
- Generated by: denervated muscle fibres 7-21 days after axonal damage

• Seen in:

- nerve lesions
- axonal neuropathies
- MND
- muscular dystrophies

Muscle- abnormal

Myotonic discharges

- Description:s.f.a.p., waxing and waning trains, 20-100 Hz
- Generated by: membrane instability of single muscle fibres
- Seen in:
 - myotonic dystrophy
 - myotonia congenita
 - paramyotonia
 - acid maltase deficiency
 - hypercalemic per paralysis

Muscle- abnormal

Complex repetitive discharges, CRD

- Description: abrupt onset and end of trains (few to hundreds discharges in each), repeated with regular low (1-20) or high frequency (>50/sec)
- Generated by: ephaptic activation of adjacent denervated muscle fibres
- Seen in:

polymyositis Duchenne myopathy distal her myopathy myxoedema LG dystrophy post radiation neuropathy Schwartz-Jampel syndrome ALS Her neuropathies CT

Nerve/normal-abnormal

Fasciculations

- **Description:** variable complexes, 0.1-10 Hz
- Generated by: neurone, axon (terminal), muscle
- Seen in:
 - normal (more after exercise)
 - MND
 - CJD
 - radiculopathy

 metabolic disorders

 (thyretoxicosis,tetany, antiACh-esterase
 therapy)

Nerve/normal-abnormal

Double discharges

- Description: extra discharge following 4-50 msec after a regular MUP
- Generated by: repetition of a MUP discharge. The extra discharge comes within relative refractory period, has reduced amplitude and may block next discharge
- Seen in:

normal as first discharge after a pause st p GBS st p radiculopathy polymyositis dystr myotonica

Nerve

Myokymia

- Description: irregular bursts, 0.5-10/sec, with 2-10 discharges in each, 20-80Hz
- Generated by: usually by MUPs (nerve initiation) but sometimes by single muscle fibers (myogenic)
- Seen in:
 - focal: st p Bell palsy, MS (facial myokymia), post-radiation
 - segmental: syringomyelia
 - generalized: CIDP, thyr.tox, familial parox kinesiogenic ataxia

Nerve

Neurotonia

- Description: Doublets, triplets, burts of MUPS 150-300 Hz, few seconds
- Generated by: activity or spont (K-channels?)
- Seen in: neurotonia, chron pnp, paramalign
- Not seen in: myotonia

Nerve/normal-abnormal

Muscle cramps

- **Description:** EMG activity as in voluntary
- Generated by: motor neurone hyperexcitability
- Seen in: all normal, chron neurogenic disorders,

Nerve/central

Synkinesia

- Description: involuntary activity triggered by remote vol activity
- Generated by: ephaptic transmission, aberrant innervation, central hyperexcitability
- Seen in:
 - St p Bell palsy
 - syrinx
 - st p trauma

Denervation activity - positive waves and fibrillation potentials



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Slight contraction

- Pinch the skin at insertion point (distraction)
- Ask for slight contraction. Move the electrode a little to reach "focus", sharp signals
- Move the needle to new position
 - 2 mm deeper
 - 2 mm deeper
 - out and then new direction--pyramid
- 2-3 skin insertions, total 30 MUPs