

## RESTING MEMBRANE POTENTIAL & ACTION POTENTIAL

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### 1. RESTING MEMBRANE POTENTIAL (RMP)

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#### 1.1 Definition

**Resting Membrane Potential (RMP)** is the **electrical potential difference** across the cell membrane when the cell is **not actively sending signals**.

It represents the **baseline electrical charge** of a neuron or muscle cell at rest.

**Typical value:** Approximately **-70 millivolts (mV)** in neurons.

The **inside of the cell is more negative** than the outside.

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#### 1.2 Ionic Distribution

At rest, ions are **unevenly distributed** across the cell membrane:

	<b>Location    Sodium (Na<sup>+</sup>)    Potassium (K<sup>+</sup>)</b>	
<b>Inside Cell</b>	Low	High
<b>Outside Cell</b>	High	Low

Other intracellular ions: **Negatively charged proteins and anions** also contribute to the negative internal charge.

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#### 1.3 Mechanism of RMP Maintenance

##### 1. Sodium-Potassium Pump (Na<sup>+</sup>/K<sup>+</sup> ATPase)

**Active transport mechanism** that uses ATP.

Pumps:

**3 Na<sup>+</sup> out** of the cell.

**2 K<sup>+</sup> into** the cell.

Creates and maintains the **electrochemical gradient**.

##### 2. Selective Membrane Permeability

The **cell membrane is more permeable to K<sup>+</sup>** than Na<sup>+</sup>.

$K^+$  tends to **leak out**, but negative proteins remain inside.

Result: **Inside becomes more negative** compared to the outside.

### Combined Effect

RMP is established due to:

**Active ion pumping** ( $Na^+/K^+$  ATPase).

**Passive ion movement** through leak channels.

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## 1.4 Importance in Stimulation

RMP is **critical for excitability**.

Sets the stage for **depolarization**, which is needed to initiate an **action potential**.

Without RMP, **nerve and muscle cells cannot respond** to stimuli.

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## 2. ACTION POTENTIAL (AP)

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### 2.1 Definition

An **Action Potential** is a **brief, rapid, and self-propagating electrical event** in which the membrane potential reverses (becomes positive inside) and then restores.

Enables **signal transmission** in nerves and muscle fibers.

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### 2.2 Phases of Action Potential

Phase	Events
<b>Resting Phase</b>	<ul style="list-style-type: none"><li>- Cell at <math>-70</math> mV.</li><li>- <math>Na^+</math> and <math>K^+</math> channels are closed.</li><li>- RMP maintained.</li></ul>
<b>Depolarization</b>	<ul style="list-style-type: none"><li>- Stimulus causes <b><math>Na^+</math> channels to open</b>.</li><li>- <b><math>Na^+</math> rushes into</b> the cell.</li><li>- Inside becomes <b>positive</b> (<math>\sim +30</math> mV).</li></ul>
<b>Repolarization</b>	<ul style="list-style-type: none"><li>- <b><math>Na^+</math> channels close, <math>K^+</math> channels open</b>.</li></ul>

Phase	Events
	<ul style="list-style-type: none"> <li>- <b>K<sup>+</sup> exits</b> the cell.</li> <li>- Membrane potential returns to <b>negative</b>.</li> <li>- <b>Excess K<sup>+</sup> leaves</b>, overshooting RMP.</li> </ul>
<b>Hyperpolarization</b>	<ul style="list-style-type: none"> <li>- Membrane potential may drop to <b>−80 to −90 mV</b>.</li> <li>- <b>Na<sup>+</sup>/K<sup>+</sup> pump restores RMP</b>.</li> </ul>

### 2.3 Threshold Potential

The **minimum membrane potential** required to initiate an action potential.

Typically around **−55 mV**.

If threshold is not reached → **no action potential** occurs.

### 2.4 All-or-None Principle

An action potential either **occurs completely or not at all**.

Once threshold is reached:

Full depolarization happens.

Cannot be stopped midway.

Stimulus **stronger than threshold** does not increase the strength of AP — only frequency of firing may increase.

### 2.5 Refractory Periods

After an AP, the cell undergoes recovery phases during which **firing is limited or impossible**.

#### 1. Absolute Refractory Period

**No new action potential** can be generated, no matter the strength of the stimulus.

Occurs during:

Late depolarization.

Most of repolarization.

Due to inactivation of  $\text{Na}^+$  channels.

## 2. Relative Refractory Period

**A stronger-than-normal stimulus** can trigger a new action potential.

Occurs during:

Late repolarization and hyperpolarization.

$\text{Na}^+$  channels start to recover.

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## 3. CLINICAL AND FUNCTIONAL RELEVANCE

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### 3.1 In Nerve Stimulation (e.g., TENS, NMES)

External current can **alter RMP**, bringing it to threshold and triggering an AP.

Devices are designed to target:

**Sensory nerves** (for pain relief).

**Motor nerves** (for muscle activation).

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### 3.2 In Muscle Contraction

AP travels down **motor neurons**, triggering **acetylcholine release** at neuromuscular junction.

Leads to **muscle fiber depolarization** and **contraction**.

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### 3.3 In Pharmacology and Pathology

Certain drugs alter  $\text{Na}^+$  or  $\text{K}^+$  channel function (e.g., **local anesthetics** block  $\text{Na}^+$  channels → no AP).

Diseases like **multiple sclerosis** disrupt AP conduction due to **myelin damage**.

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4. SUMMARY TABLE: RMP vs. AP		
Feature	Resting Membrane Potential (RMP)	Action Potential (AP)
State	Cell at rest	Cell excited/stimulated
Typical Value	−70 mV	Peaks at +30 mV
Ion Movement	K <sup>+</sup> leaks out	Na <sup>+</sup> in (depolarization), K <sup>+</sup> out (repolarization)
Pump Involved	Na <sup>+</sup> /K <sup>+</sup> ATPase maintains it	Na <sup>+</sup> /K <sup>+</sup> ATPase restores after AP
Stimulus Requirement	Not required	Requires threshold stimulus
Function	Maintains readiness for response	Enables signal transmission