

# INNER EAR IN BALANCE

# **Objectives:**

أهداف المحاضرة ماكانت موجودة بالمحاضرة ولا بدليل الطالب.

# Done by:

- **Team leaders:** Shahad AlEnezi - Malak AlHamdi

- Team members: Razan Alsabti - Hissah almuzini

Edited & Revised by: Shahad AlEnezi

**Color index:** Important - Further explanation - Doctors Notes - Numbers.

<sup>\*</sup>Please check out this link before viewing the file to know if there are any additions or changes.

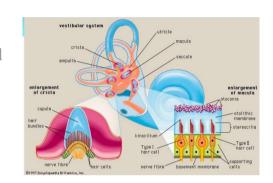
# **Control of Equilibrium:**

- **Equilibrium:** Reflexes maintain body position at rest and movement through receptors of postural reflexes:
  - a. **Proprioceptors.** We have a whole lecture about it.
  - b. Visual (retinal) receptors. عشان كذا الى مايشوف ممكن يختل توازنه ويطبح
  - c. Non auditory membranous labyrinth.

# Labyrinth:

## Definition

The labyrinth is present in the inner ear. Has two types: bony and membranous. The bony labyrinth is the network of passages with bony walls lined with periosteum. The membranous labyrinth runs inside of the bony labyrinth. There is a layer of perilymph fluid between them.



## **Types:**

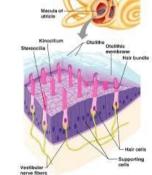
## 1. Bony labyrinth:

- o Encloses the membranous labyrinth.
- Composed of: Bony cochlea and the 3 bony semicircular canals. "يعنى كأنه هيكل السيارة الخارجي الصلب"

# 2. <u>Membranous labyrinth:</u>

- You can think of it as the interior of the car.
  - 1. **Auditory**  $\rightarrow$  for hearing  $\rightarrow$  (Cochlea).
  - 2. Non- auditory  $\rightarrow$  for equilibrium  $\rightarrow$  (Vestibular apparatus): composed of two parts:
    - Vestibule: (Utricle and Saccule) for linear acceleration.
    - Semicircular canals "SCC." for rotations of head.

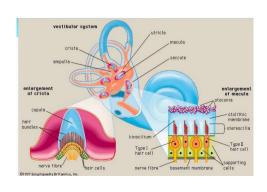




# Macula (otolith organs) of utricle and saccule:

cochlea  $\rightarrow$  organ of corti \ utricle and saccule  $\rightarrow$  macula (otolith organ).

- Hair cell synapses with the endings of the **vestibular** nerve.
- Hair cell has 30-150 (**stereocilia**) and one **large** cilium called (**kinocilium**) both connected with thin **filamentous** attachments.
- All cilium membrane has positive **potassium (K+)** channels.

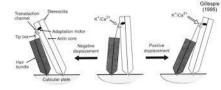


- Otolithes (statoconia) of calcium carbonate suspended in **gelatinous** material.
- Macula of utricle is in horizontal plane if the head is vertical, so cilia point upwards.
- **Stimulated when** the head bends forward & backward & laterally. <u>Vestibular system(1:55)</u>

# **♦** Mechanism of action:

1. Bending of stereocilia <u>towards</u> kinocilium → depolarization

+ Ca entry + neurotransmitter release → **increase** rate of impulses to 8th nerve fibers.



the hair cells surrounded by fluid. any movement of the body will cause movement of the **fluid** inside the semicircular canals or saccule and utricle  $\rightarrow$  cause movement of the **gelatinous** 

materials and → move the stereocilia.

2. Bending of stereocilia <u>away from</u> kinocilium → hyperpolarization → decrease rate of impulses to 8th nerve fibers. اذا ابعدت الستير وسيلا عن الكنوكليوم تتسكر قنوات الصوديوم ويصير عند هايبر بو لارسبيشن

POSITION OF CILIA	NEUTRAL	TOWARD KINOCILIUM	AWAY FROM KINOCILIUM
KINOCILIUM (1) STERECHIA (60 - 100) HAIR CELL VESTIBILIAR AFFERENT NERVE ENDING ACTION POTENTIALS VESTIBILIAR EFFERENT NERVE ENDING			
POLARIZATION OF HAIR CELL	NORMAL	DEPOLARIZED	HYPERPOLARIZED
FREQUENCY OF ACTION POTENTIALS	RESTING	HIGHER	LOWER

# **♦** Functions of macula (mainly utricle):

1. orientation of head in space & maintenance of static equilibrium

#### A. In erect upright position (vertical position):

- RT & LT utricle impulses balance each other.
  - No sensation of male-equilibrium.

اذا كنا موقفين في وضع راسنا مستقيم تكون الماكيو لا في كل الجهتين ترسل نفس الإشار ات لعصب التوازن توصل له ان حنا في حالة اتزان

#### B. Bending the head to one side:

- statoconia crystals of hair cells fall to that side by their weight → pull stereocilia to move towards kinocilium → depolarization (stimulation).
- stereocilia of the other side moves <u>away</u> from kinocilium → hyperpolarization (inhibition).

#### 2. Detection of linear acceleration:

مثل لما يكون الشخص واقف في الباص اول مايتحرك الباص لقدام يحس انه بيطيح على ورا ويتمسك الشخص هنا يمثل الهيرسيلز

- Linear acceleration: as at running & standing in a bus.
  - At beginning of movement statoconia lag behind movement by its inertia → fall backwards → cilia moves backward → person feels he is falling backwards → try to correct this by leaning forwards to shift statoconia & cilia anteriorly.

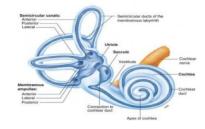


And will stimulate the brain to send signals to muscle to contract (feedback mechanism).

At deceleration (runner try to stop) → statoconia move forwards by its
 momentum → person feels falling anteriorly.

## Semicircular canals

- Three canals (**Horizontal**, **anterior** and **posterior** semicircular canals) **perpendicular** to each other.
- Filled with endolymph. الفلويد يتحرك عكس اتجاه الحركة
- Dilated end called ampulla. للتذكر إنفس شكل القنبلة ونفس نطقها
- **Ampulla**: has crista ampularis (as macula).
- cilia embedded in a gelatinous mass called cupula.



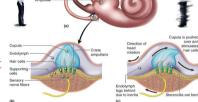


#### Mode of action & functions

- **1- during rest :** equal discharge from SCC on both
- **2-** Detect & maintain posture during head rotation in any direction (angular acceleration ) rotation

#### According to the movement:

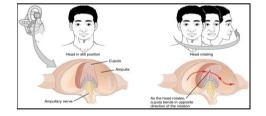
- if we move to the right, will stimulate right semicircular canal, stimulate right vestibular nuclei, inhibition of the opposite side.
- if we move to the left, will stimulate left semicircular canal, stimulate left vestibular nuclei, inhibition of vestibular nucleus on the right (opposite side).

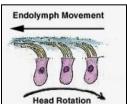


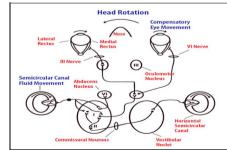
## • Rotation from left to right in horizontal plane:-

**Endolymph**  $\rightarrow$  **opposite** direction by inertia <u>from right to left.</u>  $\rightarrow$  the cilia of right side bent by **endolymph** <u>towards the kinocilium</u>  $\rightarrow$  <u>towards the utricle</u>  $\rightarrow$  <u>Depolarization</u>  $\rightarrow$  <u>impulses</u> from <u>right</u> side <u>increase</u>.

→ In the other hand left side cilia bent **away from kinocilium** → **Impulses decrease** from  $\underline{\text{left}}$  side → sensation of rotation to right.







المثال : لما الف يسار واشوف يمين lateral rectus of the left eye stimulated مثال : لما الف يسار واشوف يمين lateral rectus of the left eye inhibited , medial rectus of the right eye inhibited

# **Neuronal connection:**

The **vestibular nuclei**<sup>1</sup> on either sides of the brainstem **send signal to**:

• Cerebellum.

<sup>&</sup>lt;sup>1</sup> Vestibular nuclei ; maintain eye movement and balance.

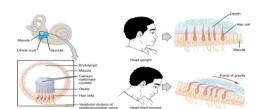
- Nuclei of cranial nerves III, IV, and VI.
- Reticular formation. Take information from visual, auditory to maintain conscious and it's IMPORTANT for balance.
- Spinal cord (vestibulospinal tracts).
- Thalamus.

# **♦** Effects of stimulation of S.C.C (rotation)

- مثل: إذا درنا كثير ووقفنا نحس ان الدنيا تدور وتدور الأشياء اللي حولنا 1- Vertigo
  - This false sensation of counter- rotation at end of rotation

## 2- Nystagmus

- jerky eye movements at the beginning & end of rotation to fix objects in the eve field.
- 3- Bradycardia
- 4- Hypotension إذا درنا كثير ندوخ لان الضغط انخفض عندنا
- **5-** <u>Increased</u> <u>muscle</u> tone on <u>same side</u> of rotation to support the body & <u>decreased</u> <u>muscle</u> tone on the <u>opposite side</u>.



#### **★** References:

- 435 girls slides and notes.