



# **Prof. Sultan Ayoub Meo**

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### Lecture Objectives

At the end of this lecture students should be able to:

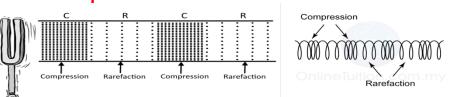
- Appreciate the functions of outer, middle and inner ear
- Describe nature of sound & its characteristics
- Functions of semicircular canals& utricle & saccule.
- Understand the role of middle ear in sound transmission,
   Magnification and tympanic reflex effect
- Recognize the function of hair cells of inner ear
- Differentiate between conductive and perceptive deafness



**Sound:** Sound is a vibration that propagates as an audible wave of pressure, through a transmission medium such as gas, liquid or solid.

**Sound** is produced from alternate compression and rarefaction of air

molecules by vibrating body

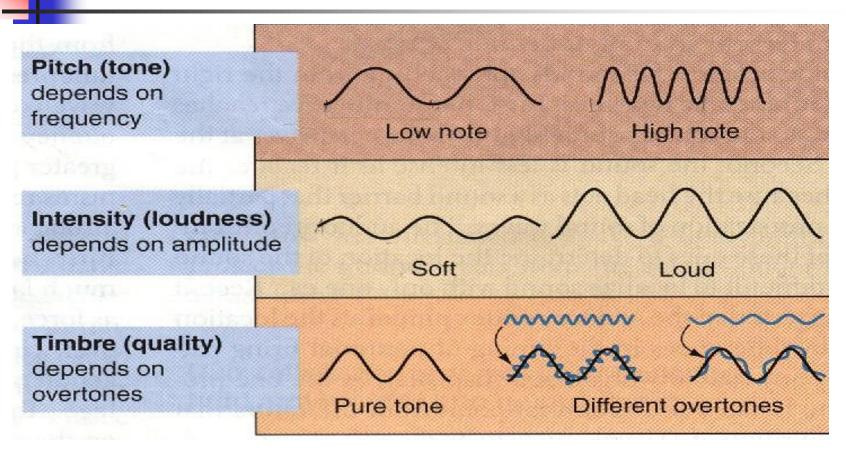


In human physiology and psychology, sound is the reception of waves and their perception by the brain

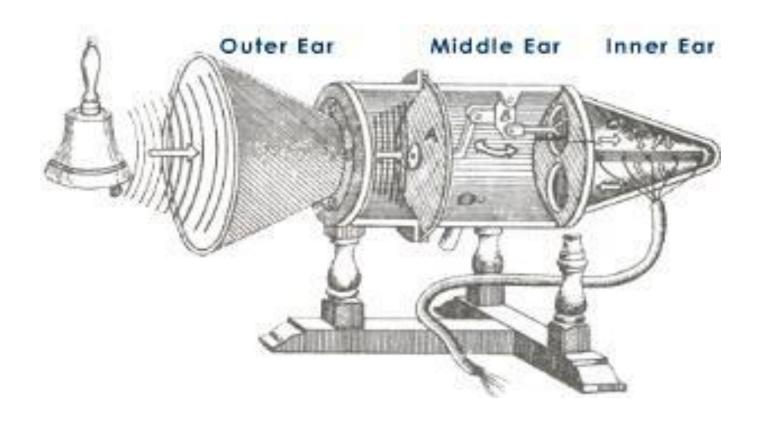
**Hearing:** Hearing is the ability to perceive sound by detecting vibrations through the ear. Human hearing range: 20 Hz-20,000 Hz.

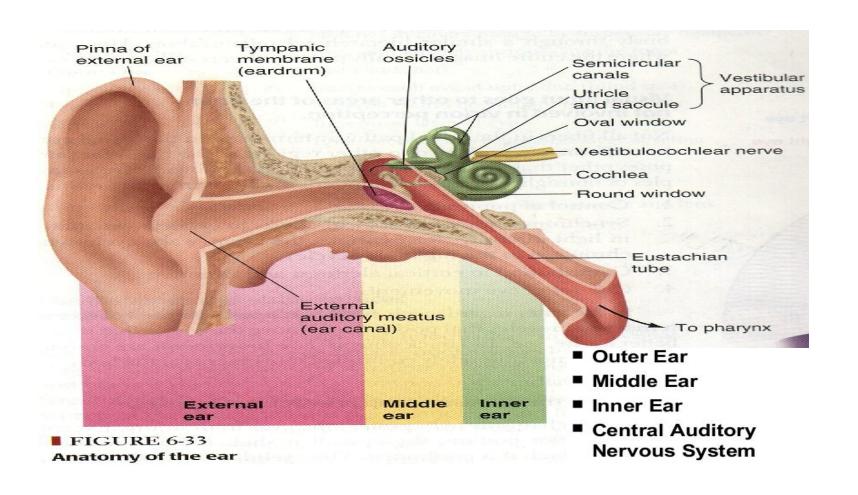
**Ear:** Receives sound waves, discriminates frequencies, and transmits auditory information into the CNS, where meaning is deciphered.

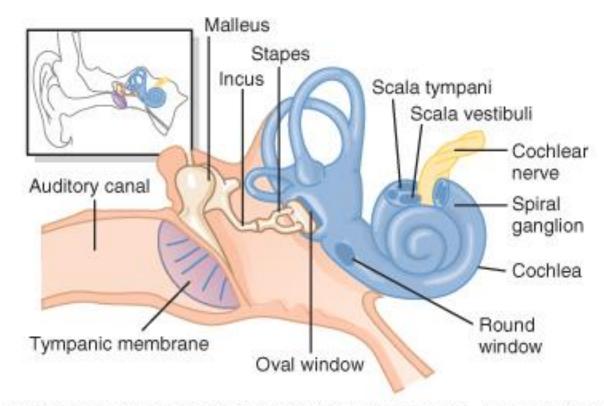
# **CHARACTERISTICS OF SOUND**



- Pitch: (Tone): depend on No. Of cycle / sec.
- Intensity (Loudness): depend on amplitude.
- Quality: depend on the over tone or interference

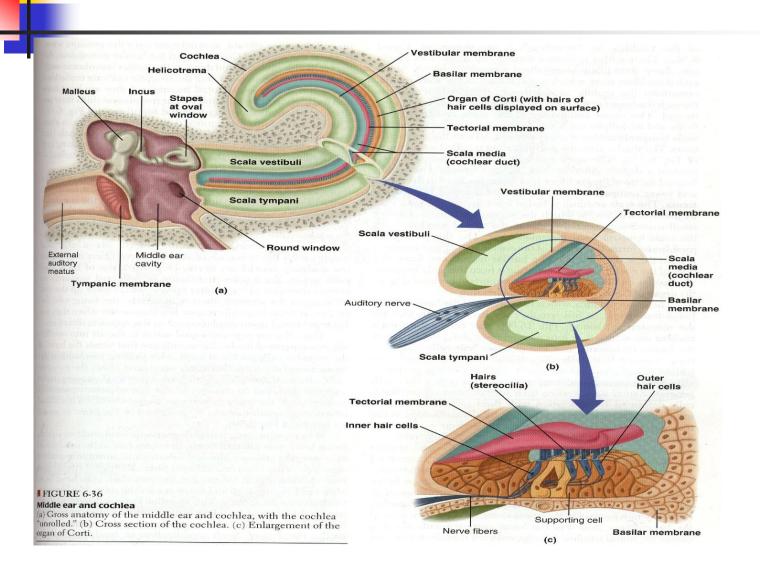






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The tympanic membrane, ossicular system of the middle and inner ear





# **FUNCTIONS OF THE EAR**

# **External Ear:**

- Act as funnel to collect sound
- Sound localization (front, back, high, low)
- Alter amplitude (Pinna)
- Protection
- Wax

# **FUNCTIONS OF THE EAR**

## Middle Ear:

- It is a space between tympanic membrane and the inner ear (opens via Eustachian tube into nasopharynx)
- Content:
  - 1 Air
  - 2 Ossicles
    - Malleus
    - Incus
    - Stapes

- Malleus and Incus act as a single lever
- Tympanic membrane (Eardrum) and ossicles, conduct sound from the tympanic membrane through the middle ear to cochlea (the inner ear).
- In the **absence** of the ossicular system and tympanic
- Membrane: Sound waves can still travel directly through the air of middle ear and enter the cochlea at the oval window. However, the sensitivity for hearing is 15 to 20 decibels less than for ossicular transmission

#### 3 Muscles

- 1 Tensor tympani
- 2 Stapedius

Tensor tympani and stapedius muscles contract reflexly in response to constant loud sound



# **FUNCTIONS OF THE MIDDLE EAR**

# 1- Ossicles:

- Manbrium of the malleus attached to the back of the tympanic membrane and its short process attached to the incus.
- The incus then articulates with the head of the stapes, and its foot plate attached to the oval window



# **FUNCTIONS OF THE MIDDLE EAR**

#### 2- Muscles:

- Muscles contract reflexly in response to loud sound (over 70dB)
- Contraction of the tensor tympani pulls the manubruim & makes the tympanic m. tens. Thus decreasing the vibration.
- Contraction of the stapeduis pull the foot plate outward so that vibration reduced
- (protection from constant loud noise, but not sudden noise, latency of 40-80 msec.



# TRANSMISSION OF SOUND THROUGH THE MIDDLE EAR

- Sound waves vibrate the tympanic m.
- Tympanic membrane moves the handle of malleus
- Incus moves
- Stapes move in & out of the oval window.
- The pressure transmitted through cochlea cause stimulation of hair cells in the organ of corti, which stimulate the auditory nerve.



## **INNER EAR**

# Cochlea

- Snail like, coiled tubular system
- laying deep in the temporal bone)
  - Bony labyrinth
  - Membranous labyrinth

# **COCHLEA**

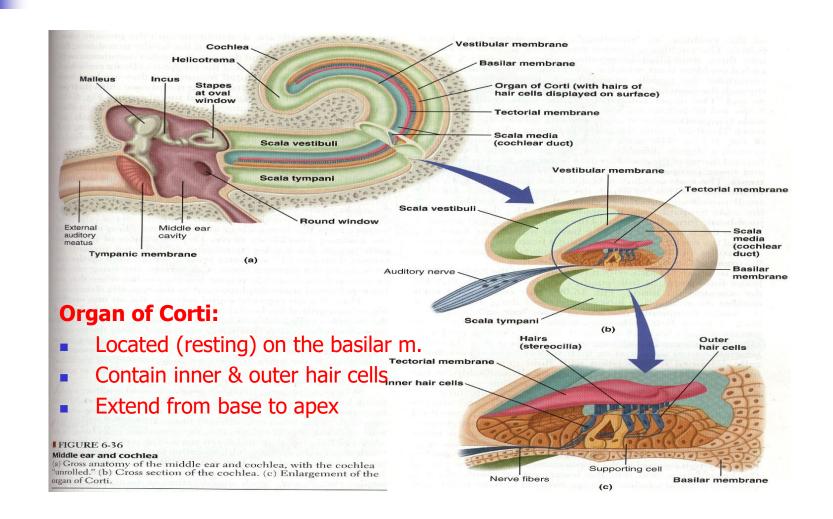
- This is a system of three coiled tubes
- The basilar m. & the reissners m divide it into three canals:
  - Scala Vestibuli
  - Scala Media
  - Scala Tympani

Scala Vestibuli: Na high K low

Scala Tympani: Na high K low

Scala Media : Na low K high

# **ORGAN OF CORTI**



# **ORGAN OF CORTI**

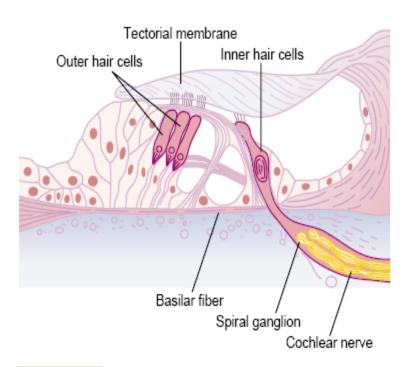


Figure 52-7

Organ of Corti, showing especially the hair cells and the tectorial membrane pressing against the projecting hairs.

or the inner han tens at unferent sound pitches, a

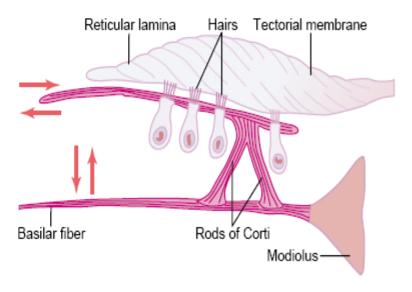


Figure 52-8

Stimulation of the hair cells by to-and-fro movement of the hairs projecting into the gel coating of the tectorial membrane.

Guyton & Hall, 2016; Chapter 53; pp 673-682



# **Arrangement:**

- Three rows of outer hair cells (attached to the reticular lamina or tectorial m.)
- One row of inner hair cells (not attached to tectorial m.)

# **Functions:**

 Inner hair cells are the primary receptors for sound, transducing fluid movement in cochlea into action potential in the auditory nerve



# RECEPTORS & ENDOCOCHLEAR POTENTIALS

- Sound transmission into the inner ear cause upper & lower movements of the reticular m. (tectorial m.)
- Produce bending of steriocillia of the hair cells alternatively open & close cation channels at the tip of the steriocillia



# RECEPTORS & ENDOCOCHLEAR POTENTIALS

- Inward current: Depolarization
- Outward current: Hyperpolarisation
- The net results is depolarization
- Production of cells receptors potentials
- Release of neurotransmitter
- Production of action potentials



- Organ of Corti
  - Located within the cochlea
  - Hearing receptors → hair cells on the basilar membrane
  - Gel-like tectorial membrane is capable of bending hair cells
  - Cochlear nerve attached to hair cells transmits nerve impulses to auditory cortex on temporal lobe



- This pathway begins in the organ of corti
- End in the primary auditory cortex (are 41 & 42, superior temporal gyrus in the temporal lobe of the brain
- Fibres end in the auditory area, where it is heard, then interpretation occurs in the auditory association areas (wernikes area)



- There is a bilateral cortical connection of auditory area
- Damage to one side only slightly reduces hearing
- Destruction of both primary auditory cortices greatly reduces sensitivity for hearing.
- Destruction of one side slightly reduces hearing in the opposite ear;
- It does not cause deafness in the ear because of many crossover connections from side to side in the auditory neural pathway.
   However, it does affect ability to localize the source of a sound.

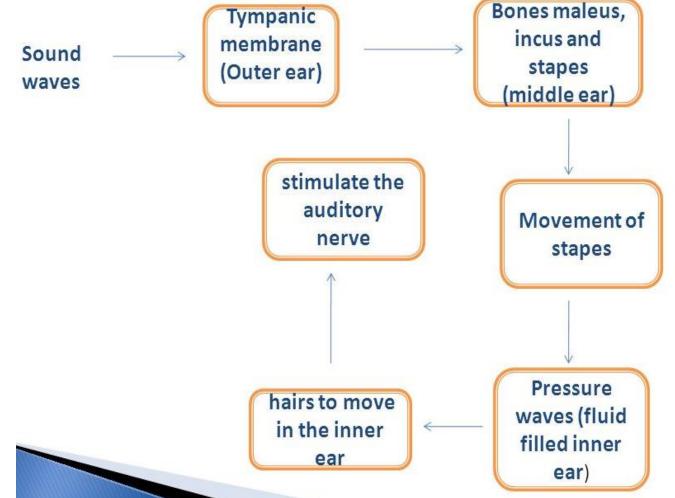
#### **Normal Frequency Range of Hearing:**

**Young Person:** Between 20 and 20,000 cycles/sec. Sound range depends to a great extent on loudness.

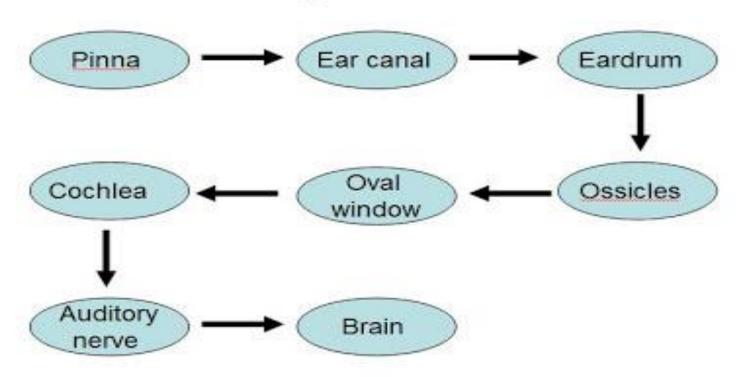
Old age: Frequency range is shortened 50 to 8000 cycles/ sec or less



# **General mechanism of hearing**



# Hearing Mechanism



#### **Events Involved in Hearing**

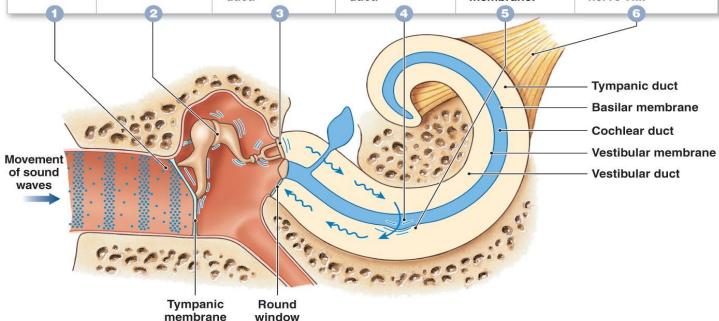
Sound waves arrive at the tympanic membrane.

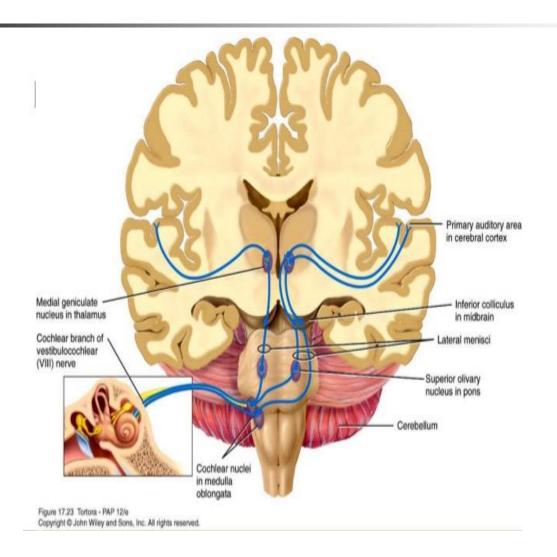
Movement of the tympanic membrane causes displacement of the auditory ossicles. Movement of the stapes at the oval window establishes pressure waves in the perilymph of the vestibular duct.

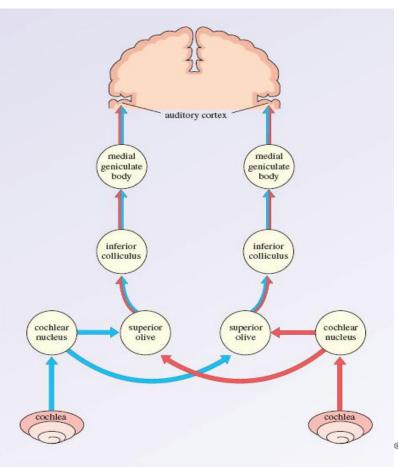
The pressure waves distort the basilar membrane on their way to the round window of the tympanic duct.

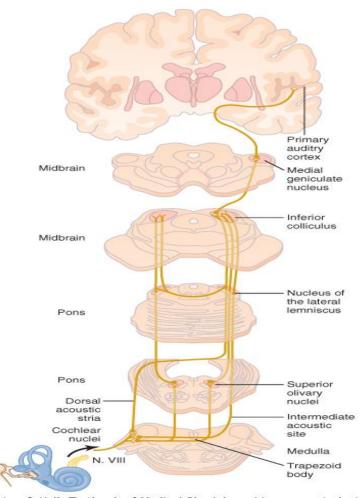
Vibration of the basilar membrane causes vibration of hair cells against the tectorial membrane.

Information about the region and the intensity of stimulation is relayed to the CNS over the cochlear branch of cranial nerve VIII.









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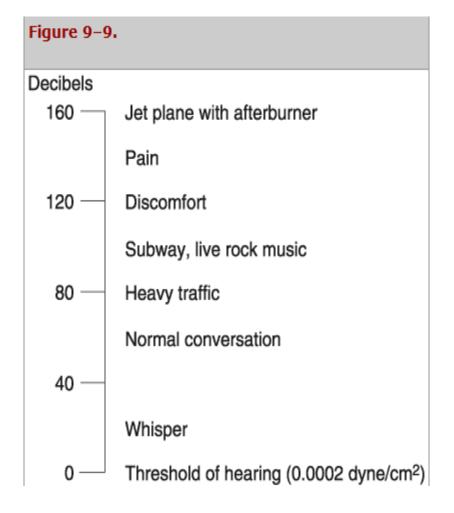


- Presence of one sound decreases an individual's ability to hear other sounds. This phenomenon is known as masking
- Presence of background noise affect the ability to hear another sound, due to some receptors are in refractory period
- Masking is more clear if two sound are having the same frequencies



# **NOISE POLLUTION**

- Noise pollution is an environmental hazard
- Exposure to sound intensity above 80dB may damage outer hair cells





# **CONDUCTION OF SOUND WAVE**

- Air conduction:
  - Normal situation of hearing, sound travel in air causes vibration of Tympanic m., transmitted by ossicles to the oval window



# **CONDUCTION OF SOUND WAVE**

- Bone conduction:
  - Sound cause vibration of skull bones directly transmitting the sound vibration to the cochlea (eg when placing tuning fork on the head or mastoid process)



- Conductive deafness
- Perceptive deafness



# **CONDUCTIVE DEAFNESS**

- Impairment of sound transmission through external or middle ear due to:
  - Wax
  - Repeated infection
  - Perforated drum
  - Destruction of ossicles
  - Osteosclerosis: Pathological fixation of stapes on the oval window
- All sound frequencies are equally affected
- Bone conduction is better than air conduction



# **PERCEPTIVE DEAFNESS**

# Due to congenital or damage to cochlea or auditory nerve pathway due to:

- Toxins (antibiotics, gentamycine)
- Inflammation
- Vascular
- Tumour

Both air and bone conduction are affected



# **TEST OF HEARING**

- Audiometery
- Rinnes test
- Weber test





# **TEST OF HEARING**

# Table 9–1. Common Tests with a Tuning Fork to Distinguish between Nerve and Conduction Deafness.

|                                     | Weber  | Rinne   | Schwabach  |
|-------------------------------------|--|---|--|
| Method                              | Base of vibrating<br>tuning fork placed on<br>vertex of skull.   | Base of vibrating<br>tuning fork placed<br>on mastoid process<br>until subject no<br>longer hears it,<br>then held in air next<br>to ear. | Bone conduction of patient compared with that of normal subject.                           |
| Normal                              | Hears equally on both sides.   | Hears vibration in air after bone conduction is over.   |  |
| Conduction<br>deafness<br>(one ear) | Sound louder in diseased ear because masking effect of environmental noise is absent on diseased side. | Vibrations in air not heard after bone conduction is over.  | Bone conduction<br>better than normal<br>(conduction defect<br>excludes masking<br>noise). |
| Nerve<br>deafness<br>(one ear)      | Sound louder in normal ear.  | Vibration heard in<br>air after bone<br>conduction is over,<br>as long as nerve<br>deafness is partial.                                   | Bone conduction<br>worse than normal.  |



# THANK POU