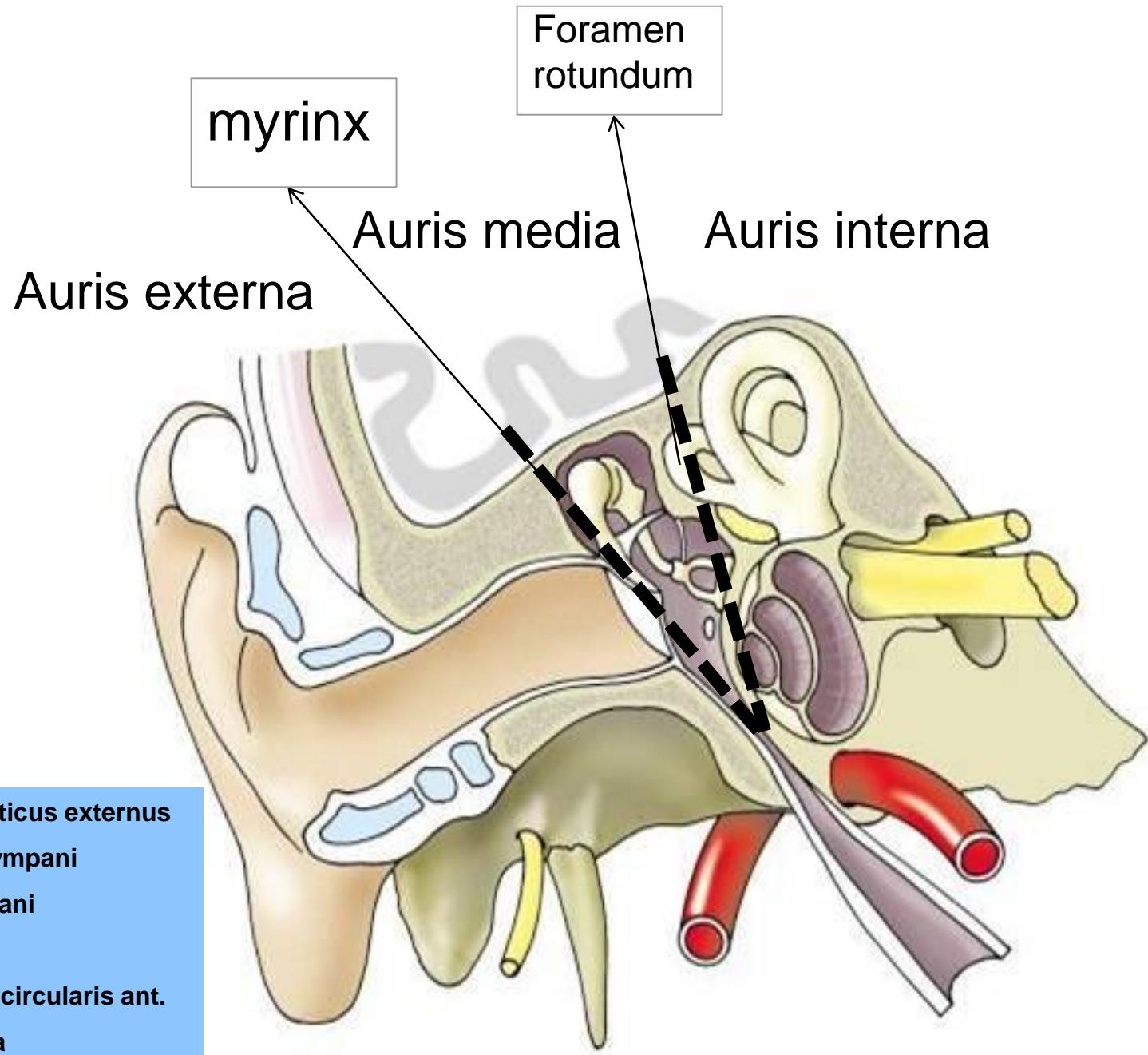
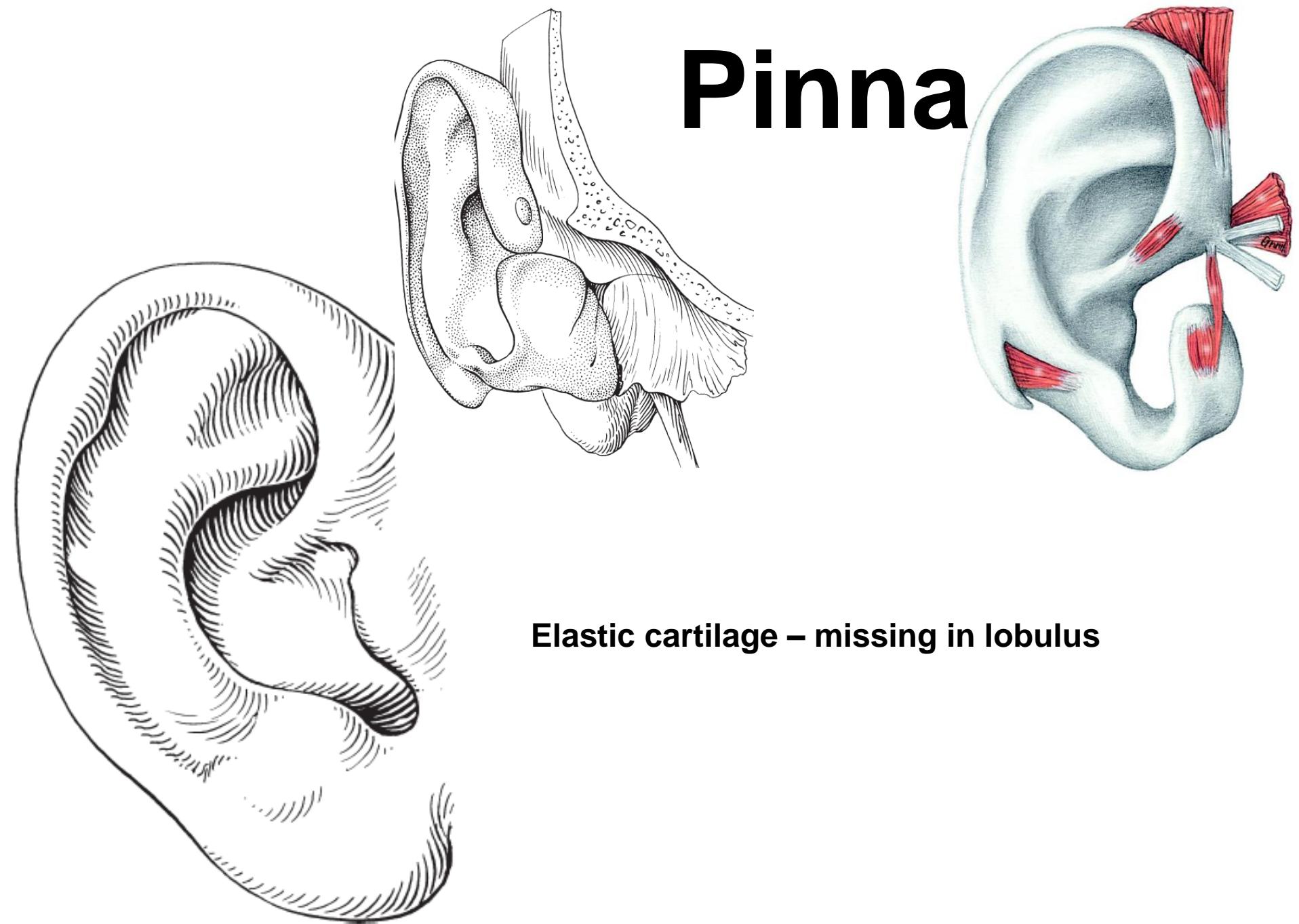


*Ear, auditory and vestibular system,
auditory pathway, embryology*

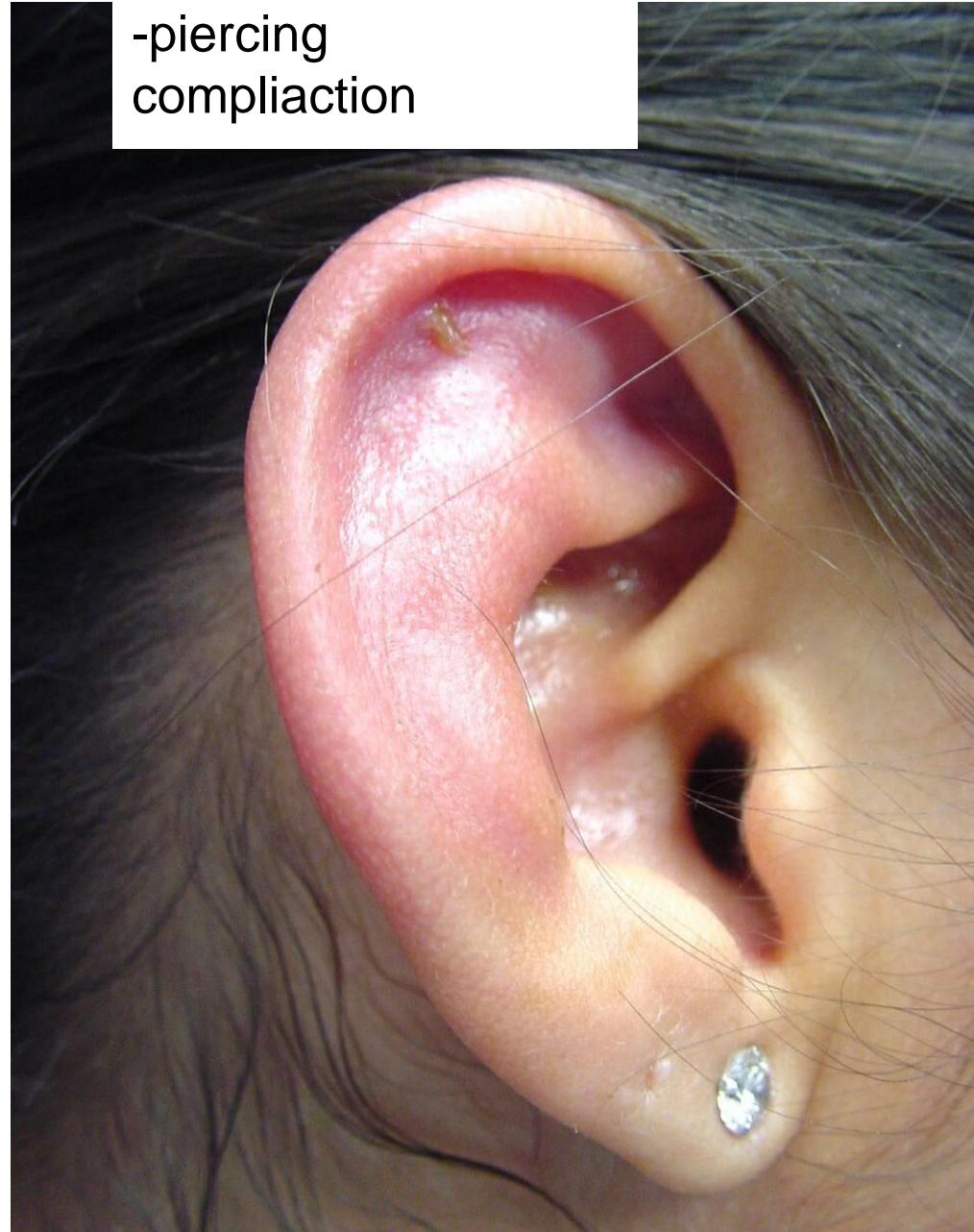
Zdeněk Fík



Pinna



Perichondritis
-piercing
complication



Cauliflower deformity
– wrestling fighter

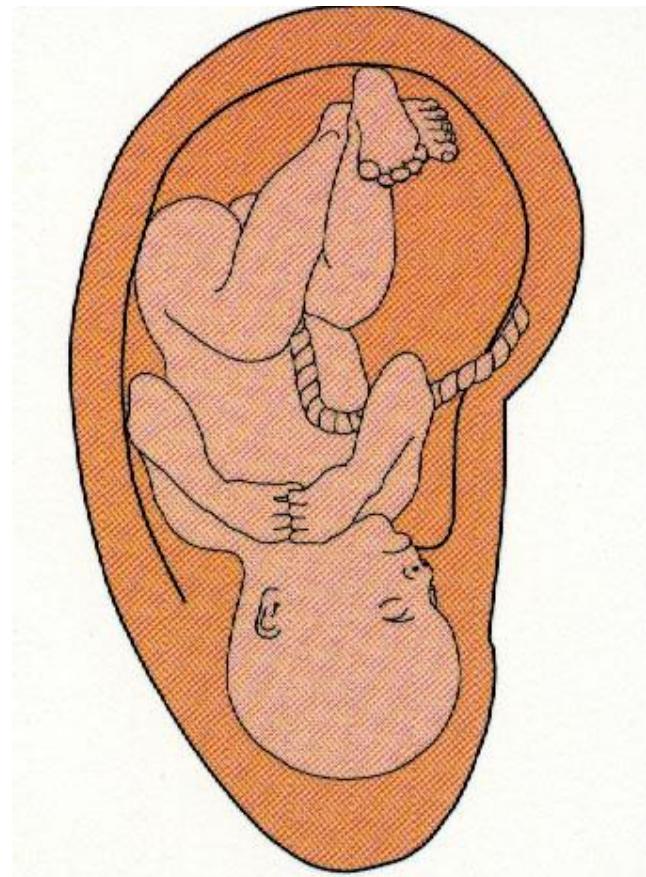
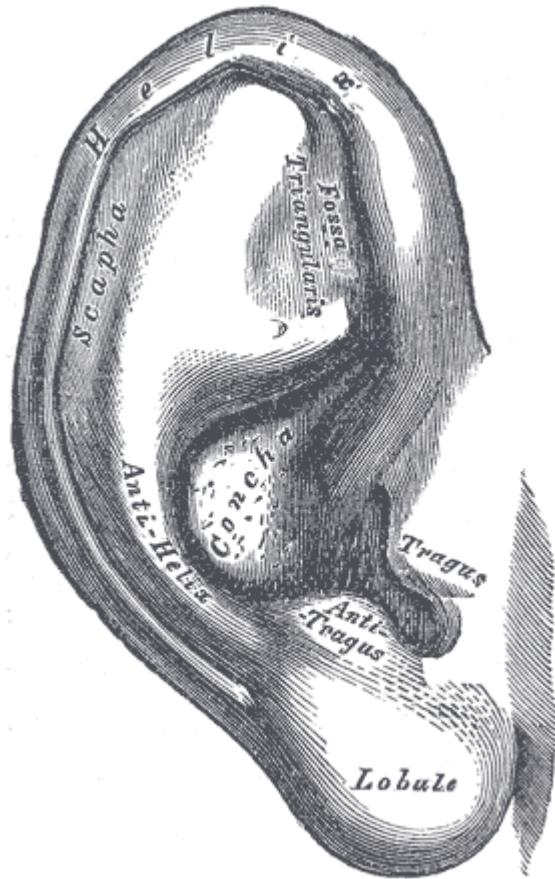




Otapestasis



Auricular acupuncture



Frank sign



Sign of early degeneration of elastic fibres in the skin and vessels.

Indicates possible damage of coronary arteries.

Griffing G. N Engl J Med 2014;370:e15.



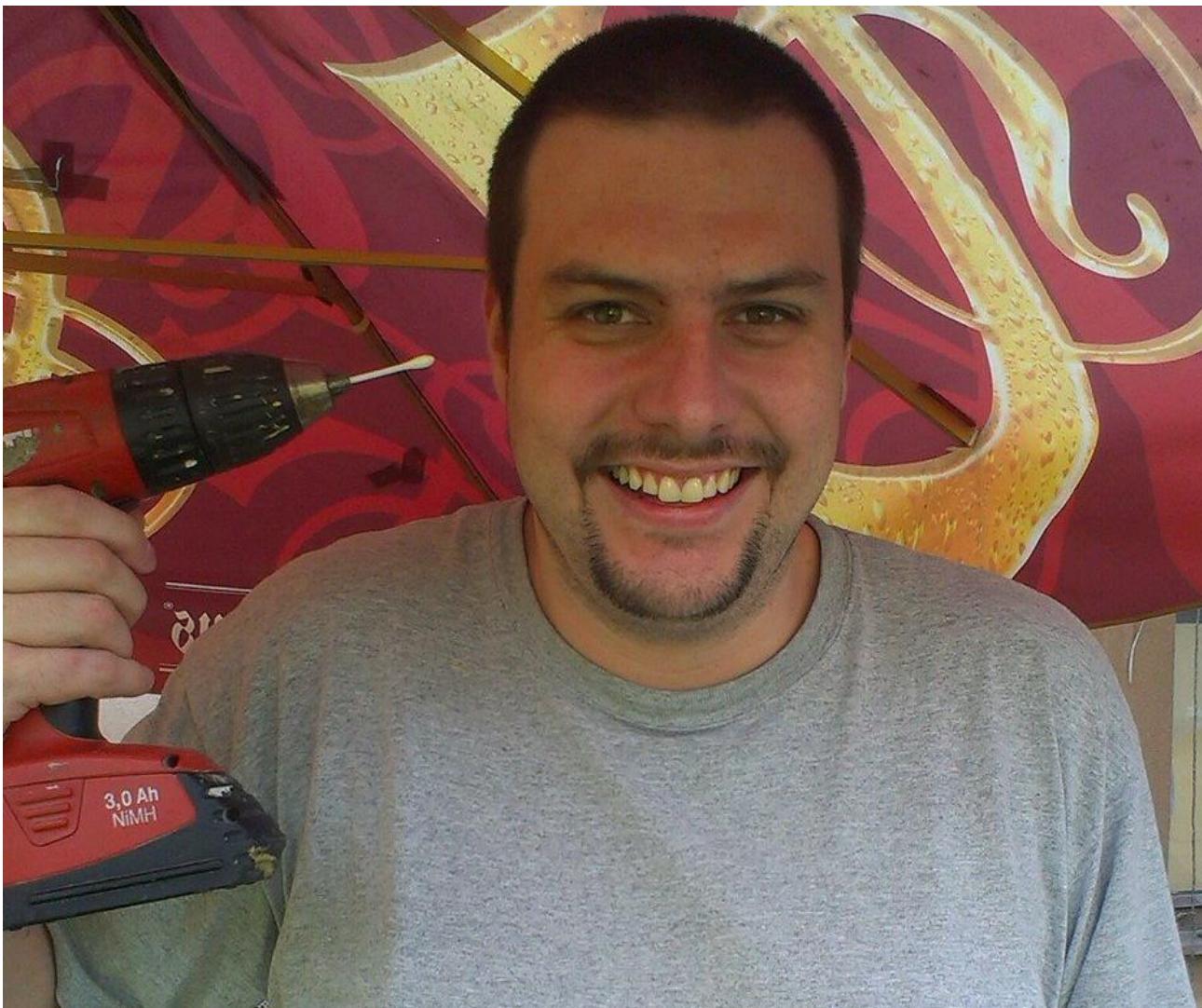
The NEW ENGLAND
JOURNAL of MEDICINE



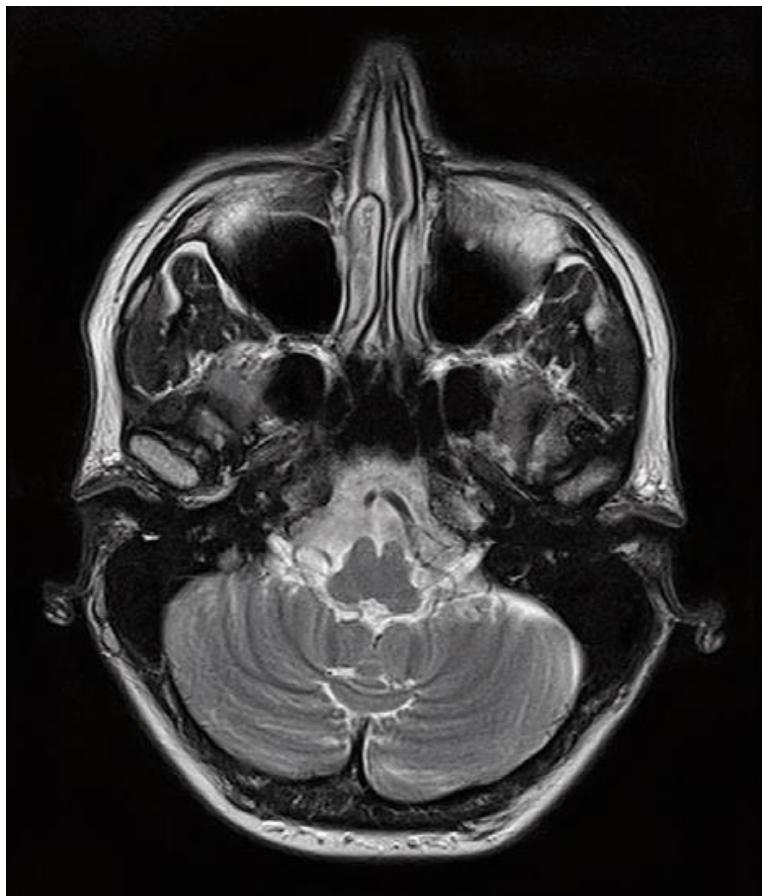


Nanda, A., et al. (2011). "Implant-supported auricular prosthesis." Indian J Dent Res **22**(1): 152-156.

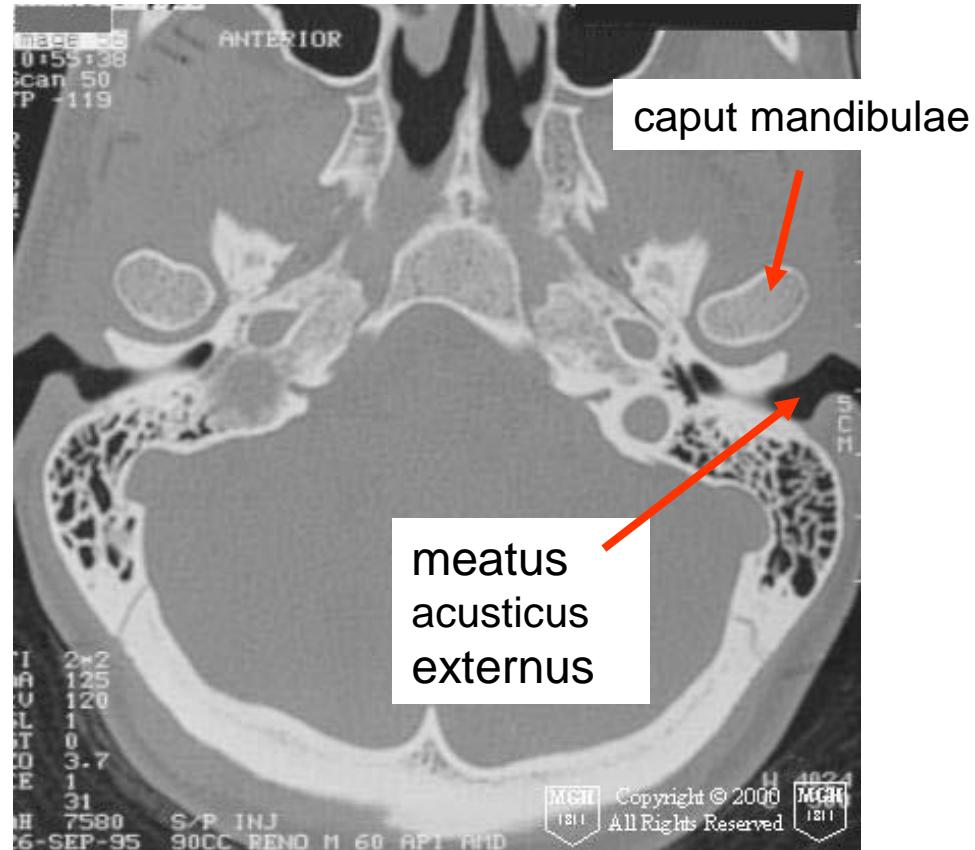
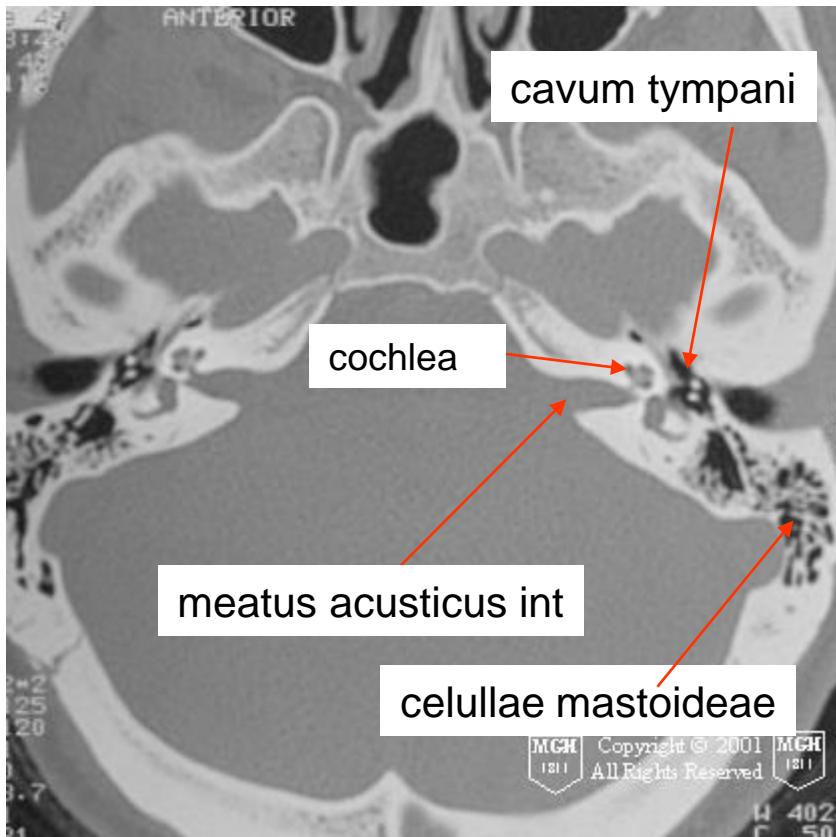
Ear canal

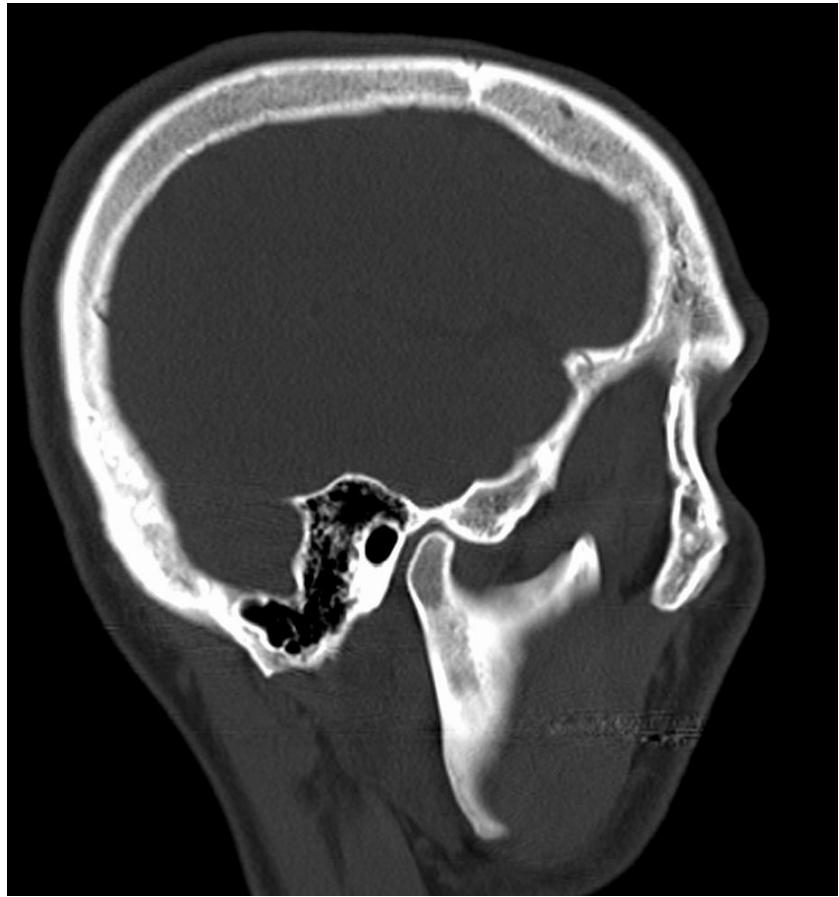


Meatus acusticus externus

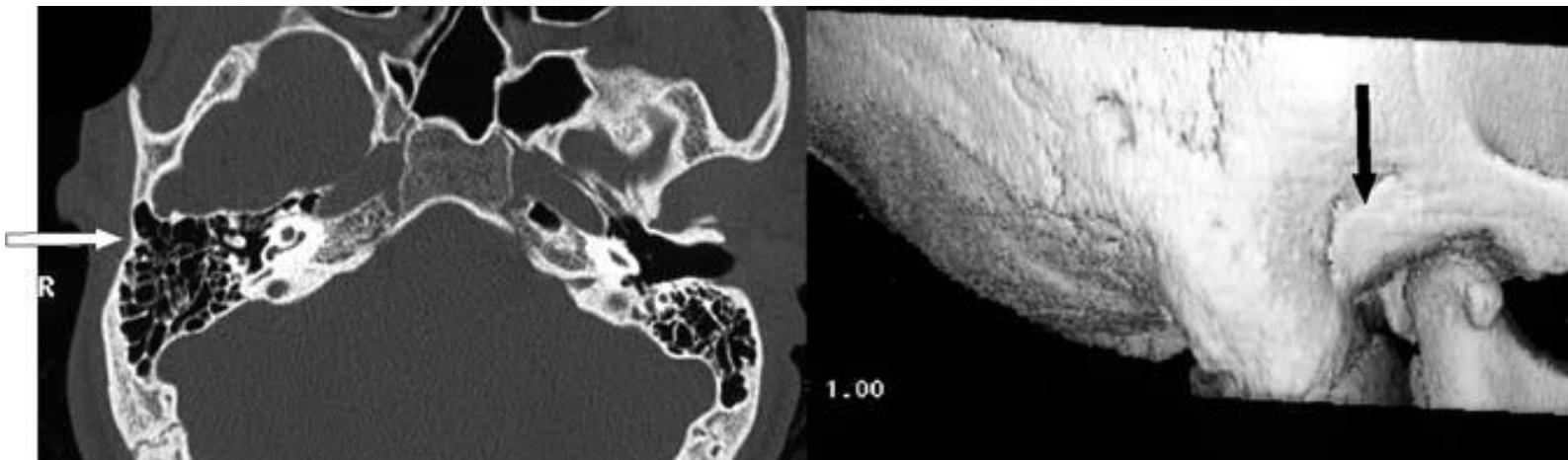


CT horizontal section





Ear canal atresia

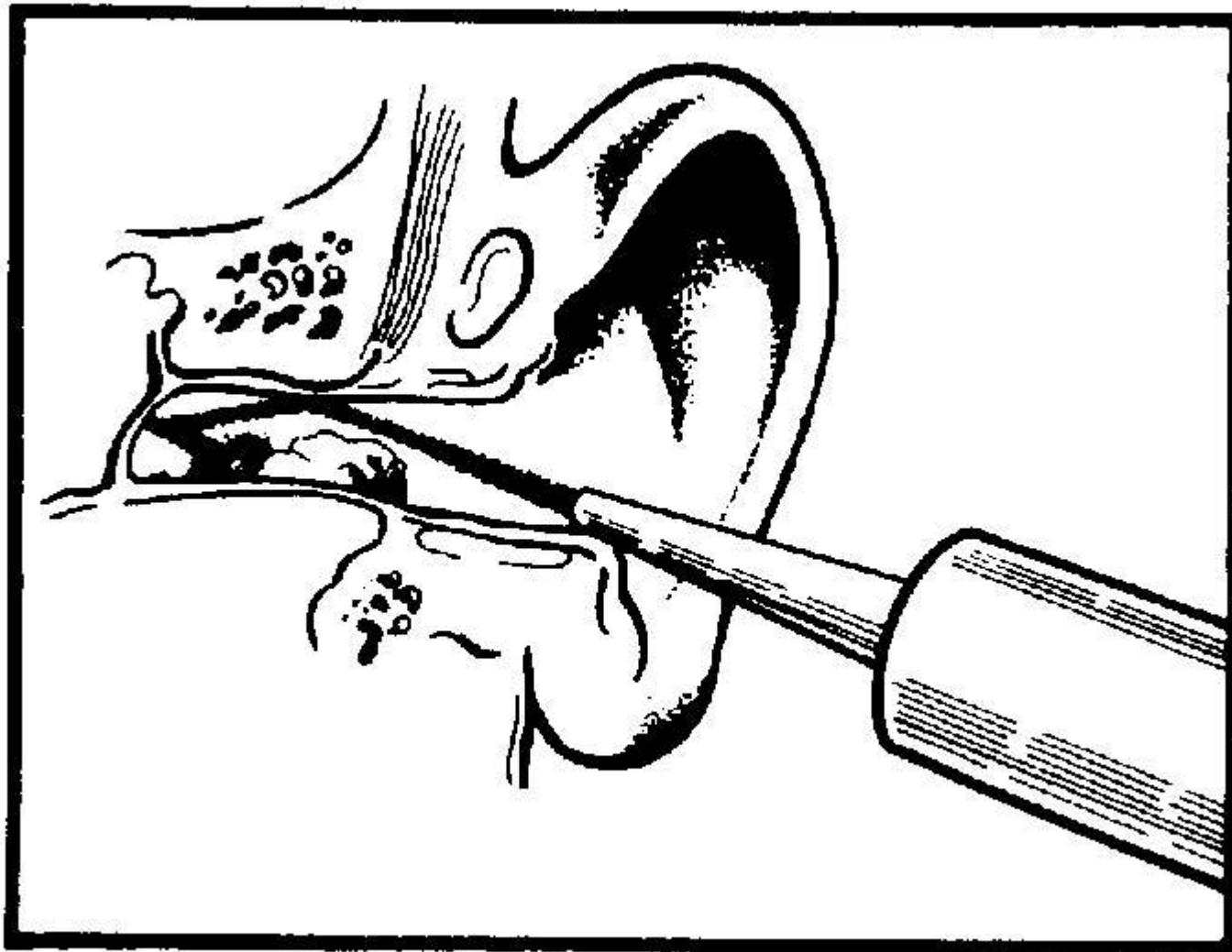


Tragi – hair in the ear canal (adults)



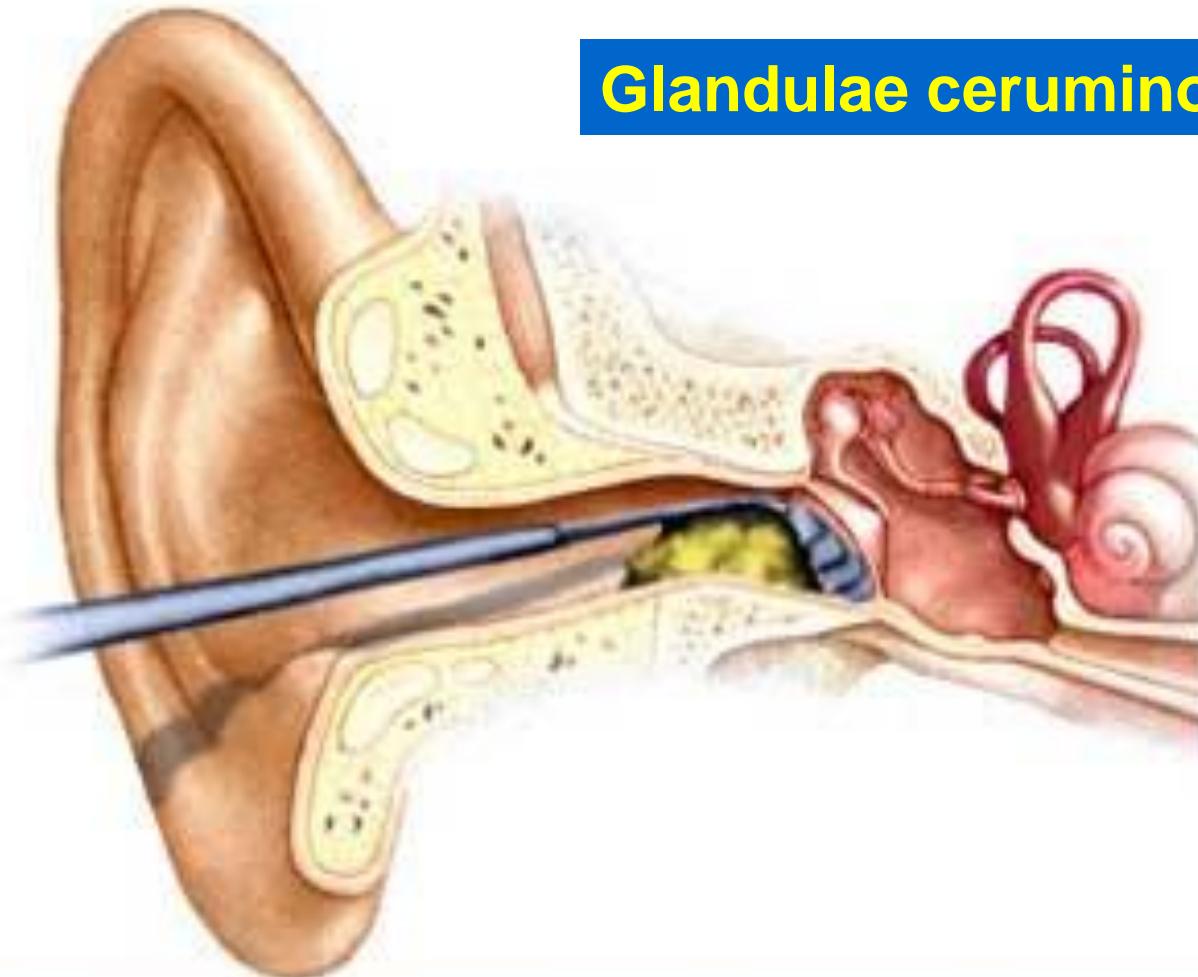
- Radchakanta Bažpaj and his 13 cm long tragi – Guinness world record

Ear canal irrigation

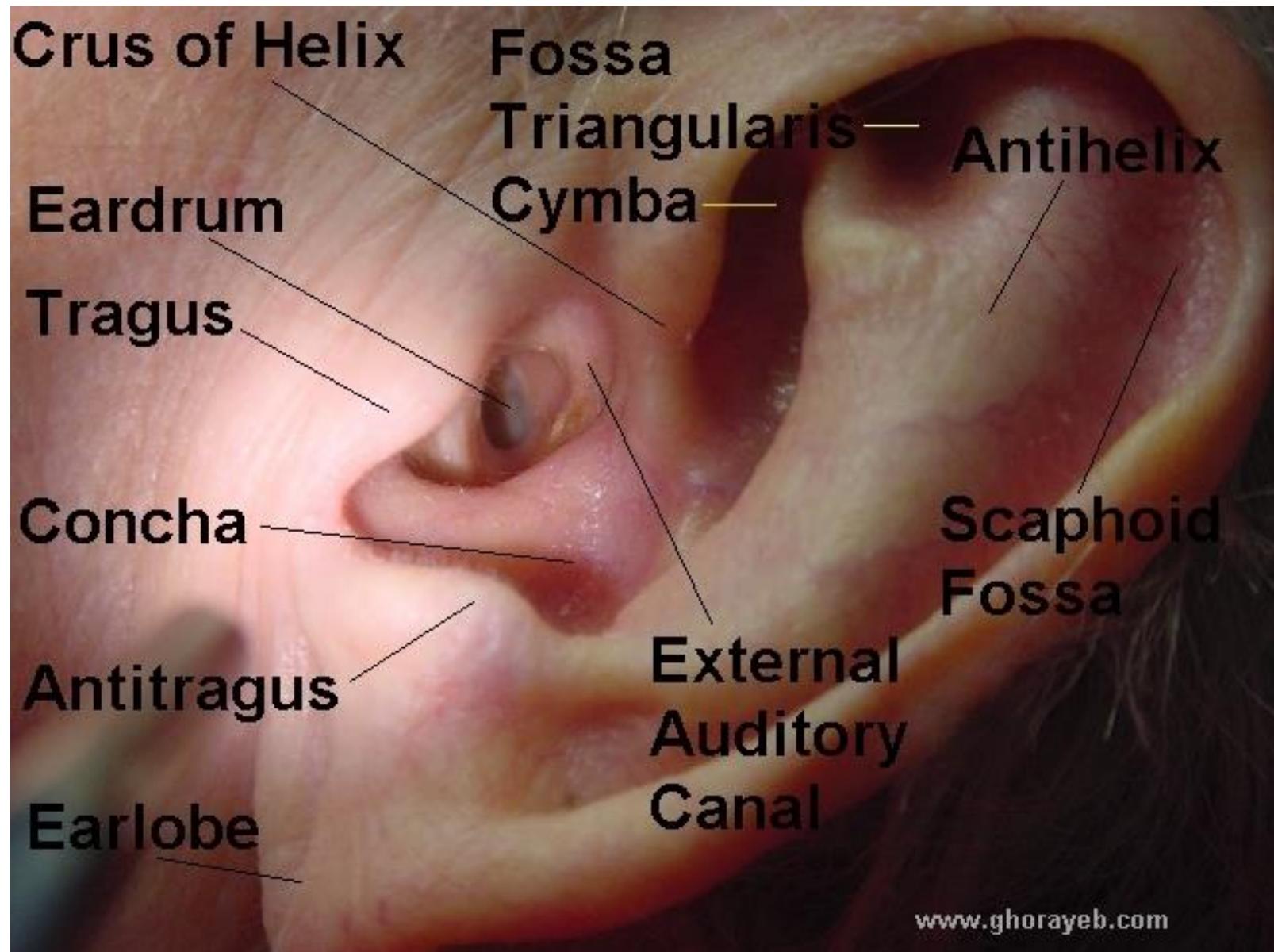


Earwax removal

Glandulae ceruminosae



Wide and straight ear canal



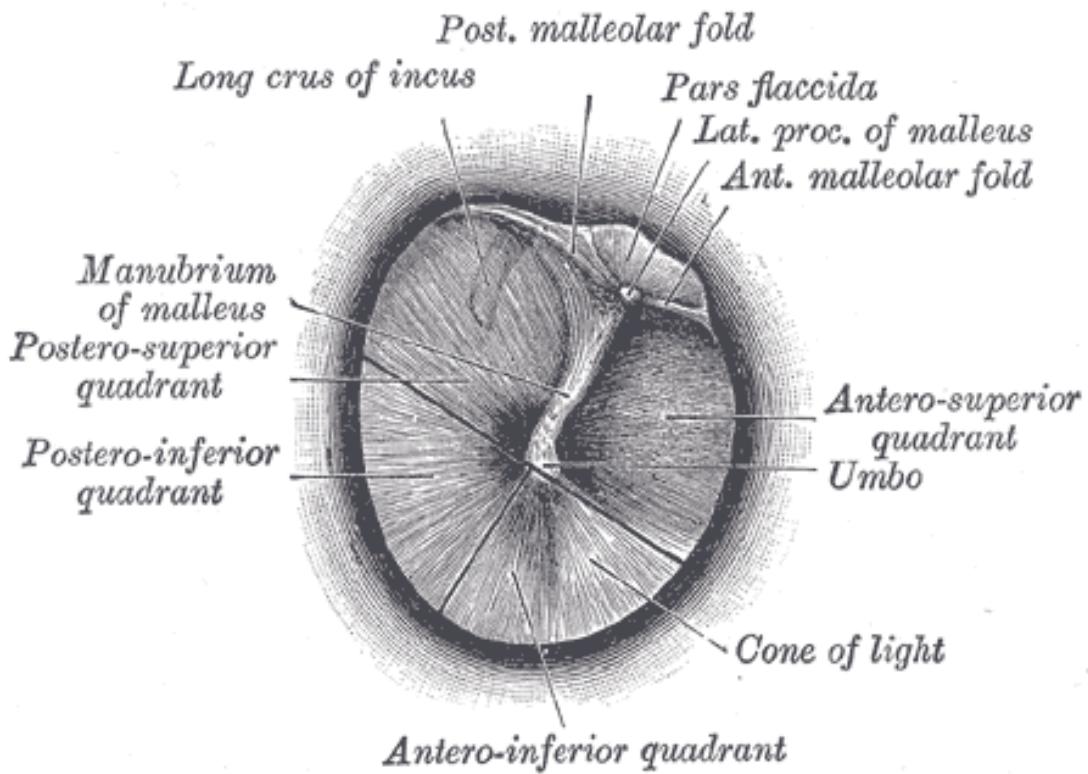
Eardrum



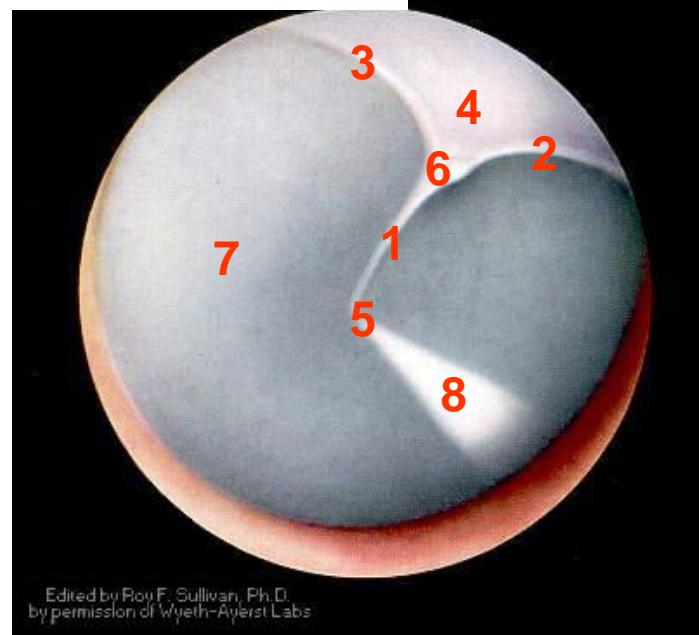
- 1 - stria mallearis
- 2 – plica mallearis ant
- 3 – plica mallearis post
- 4 – pars flaccida
membranae tympani
- 5 – umbo
- 6 - prominentia mallearis

- 7 – pars tensa
membranae
tympani
- 8 - reflex

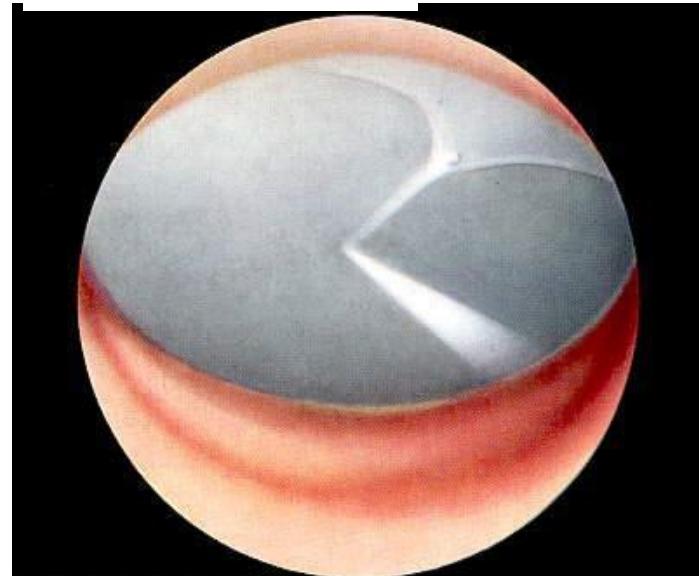
Otoscopic view

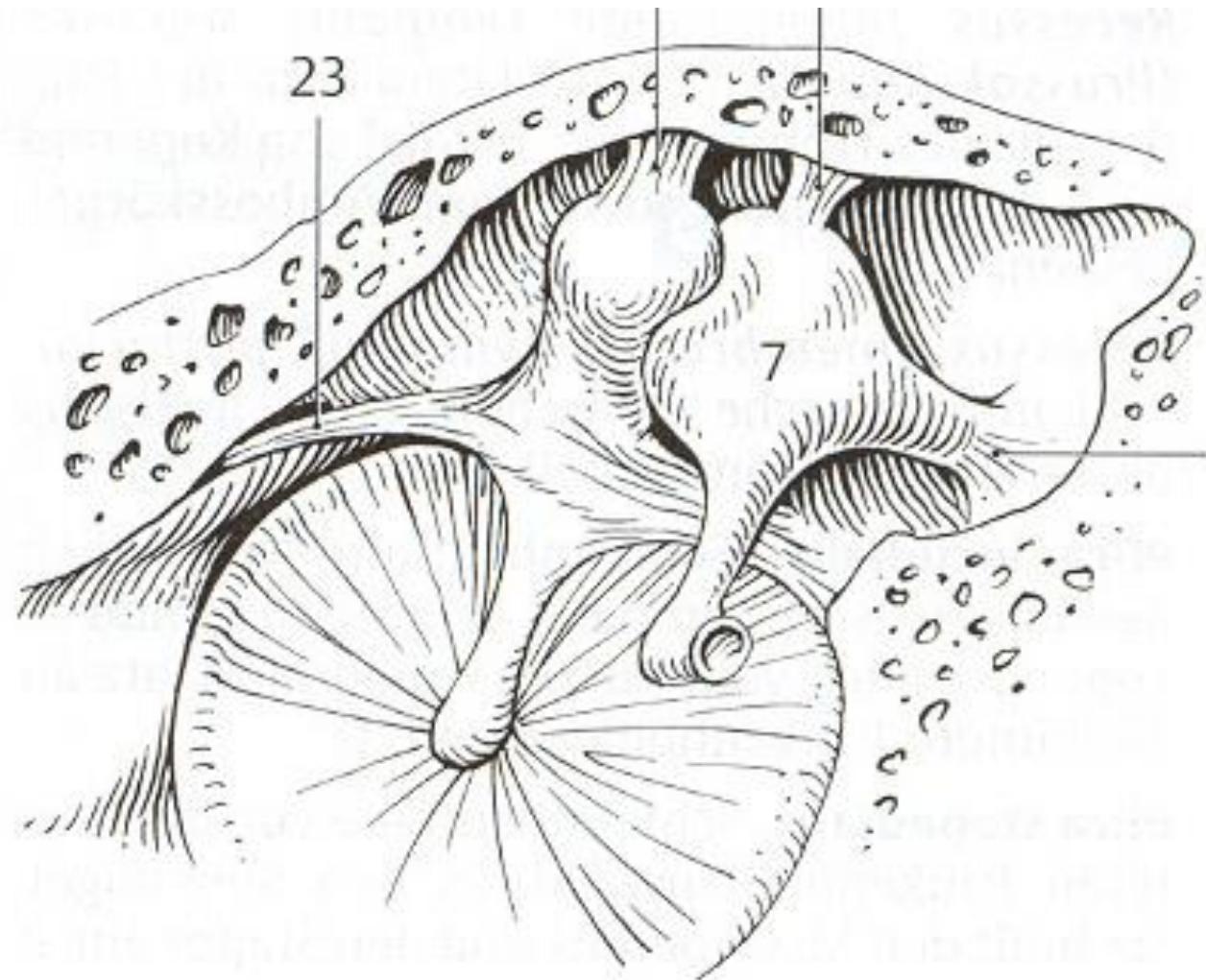


Eardrum - adult



Eardrum - child





Normal otoscopic view

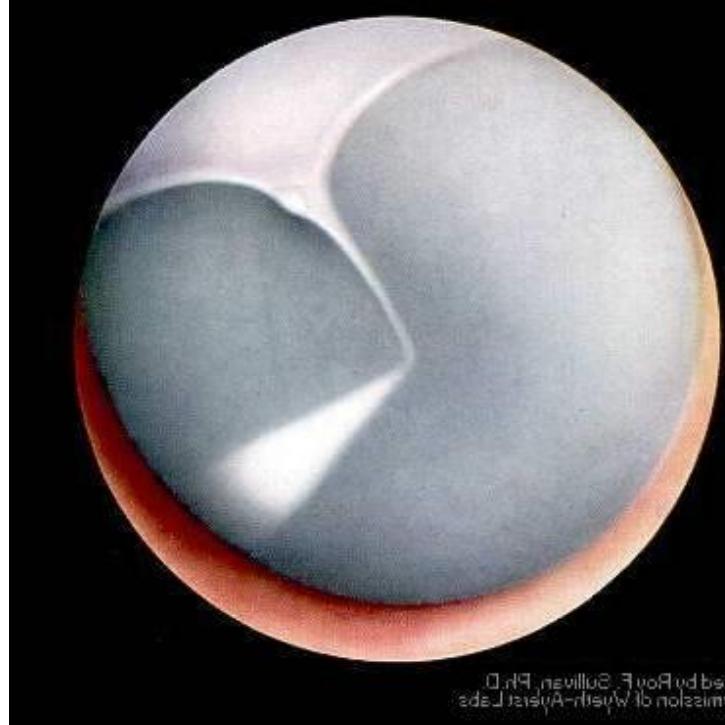
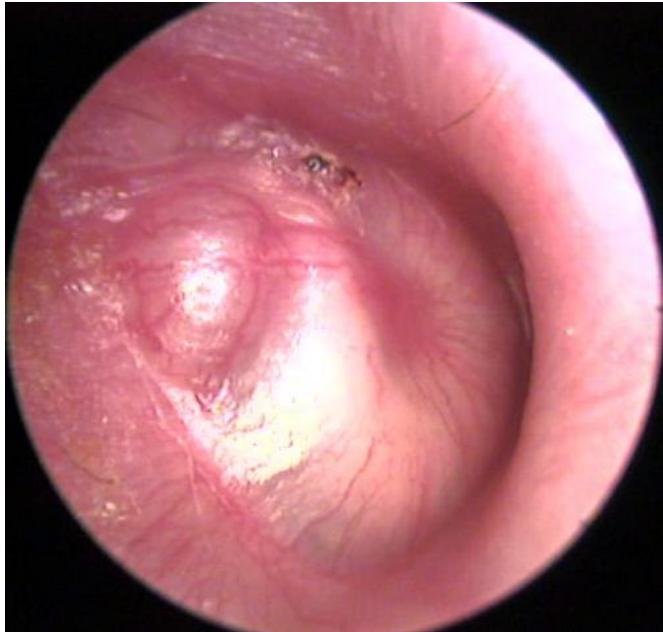


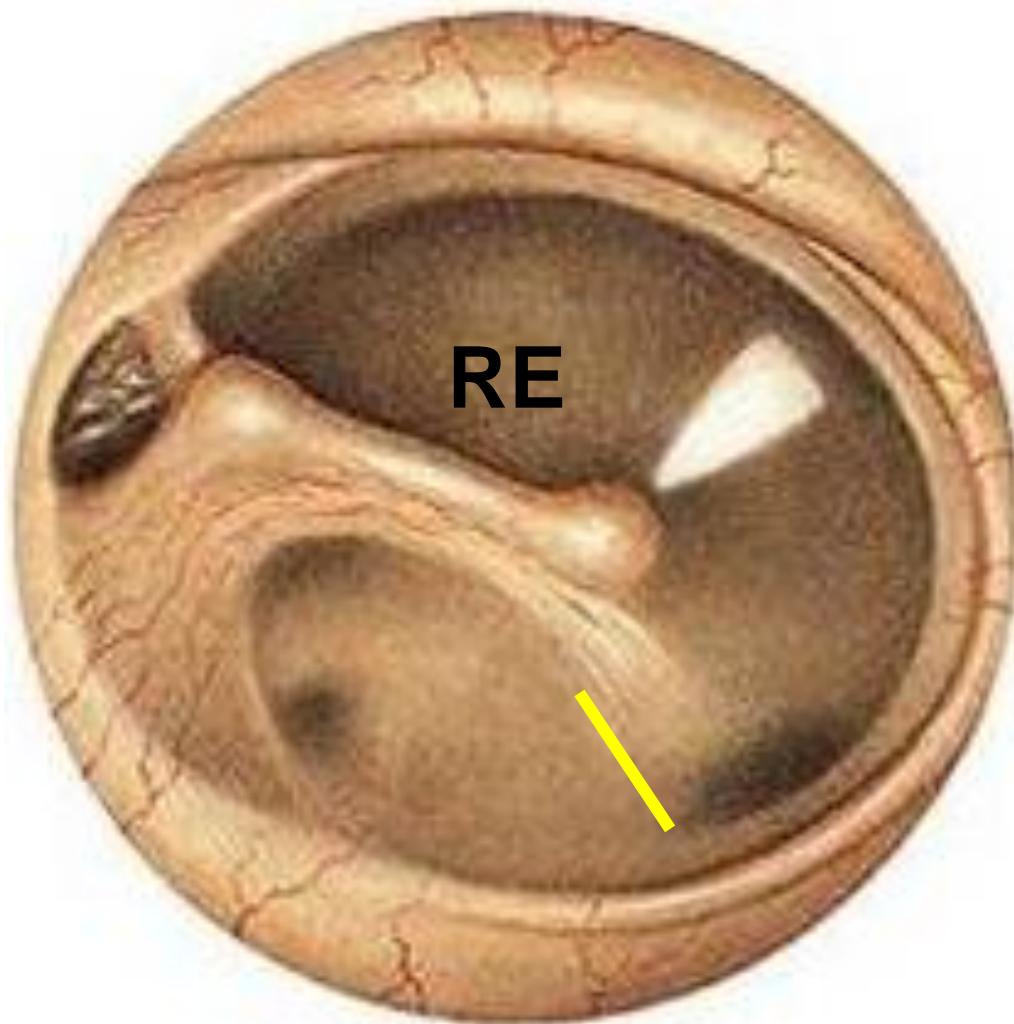
Diagram by Dr. E. Gilligan, PhD
Illustration of Normal Ear

Pathologic otoscopy view



Paracentesis

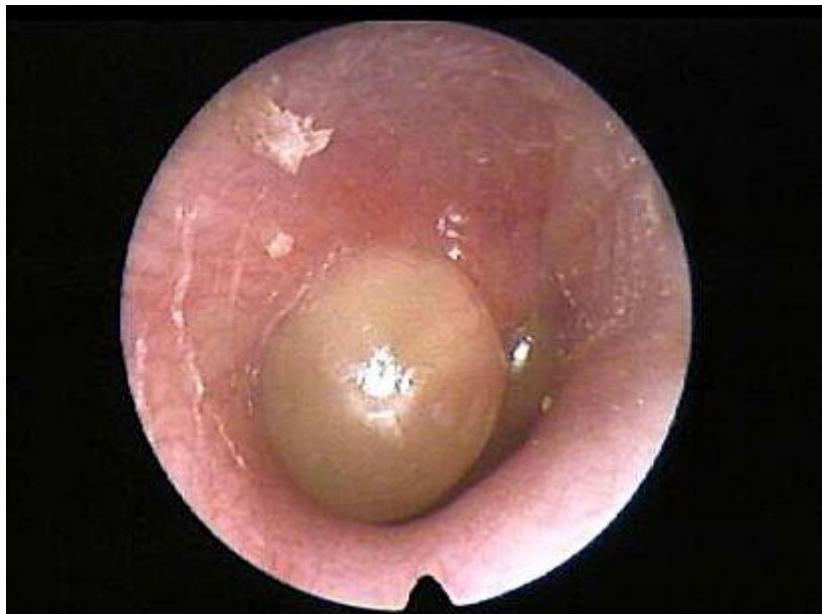
Hair?



nape

neck

Myringostomy – ventilation tube

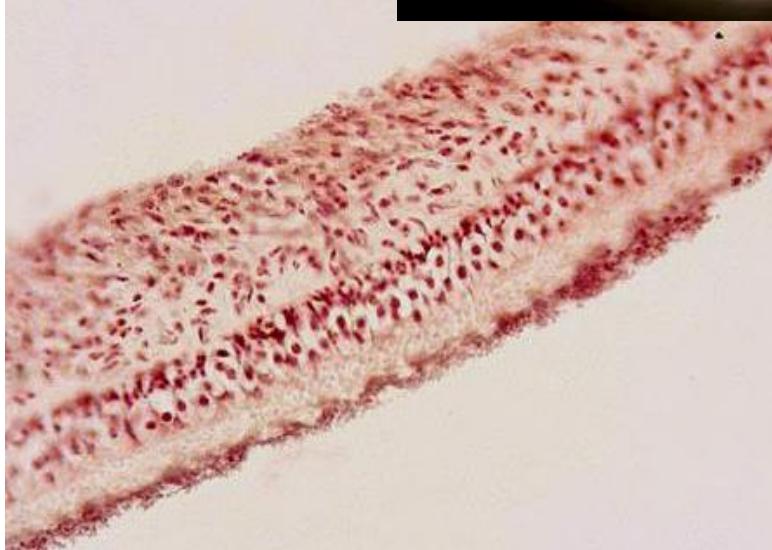
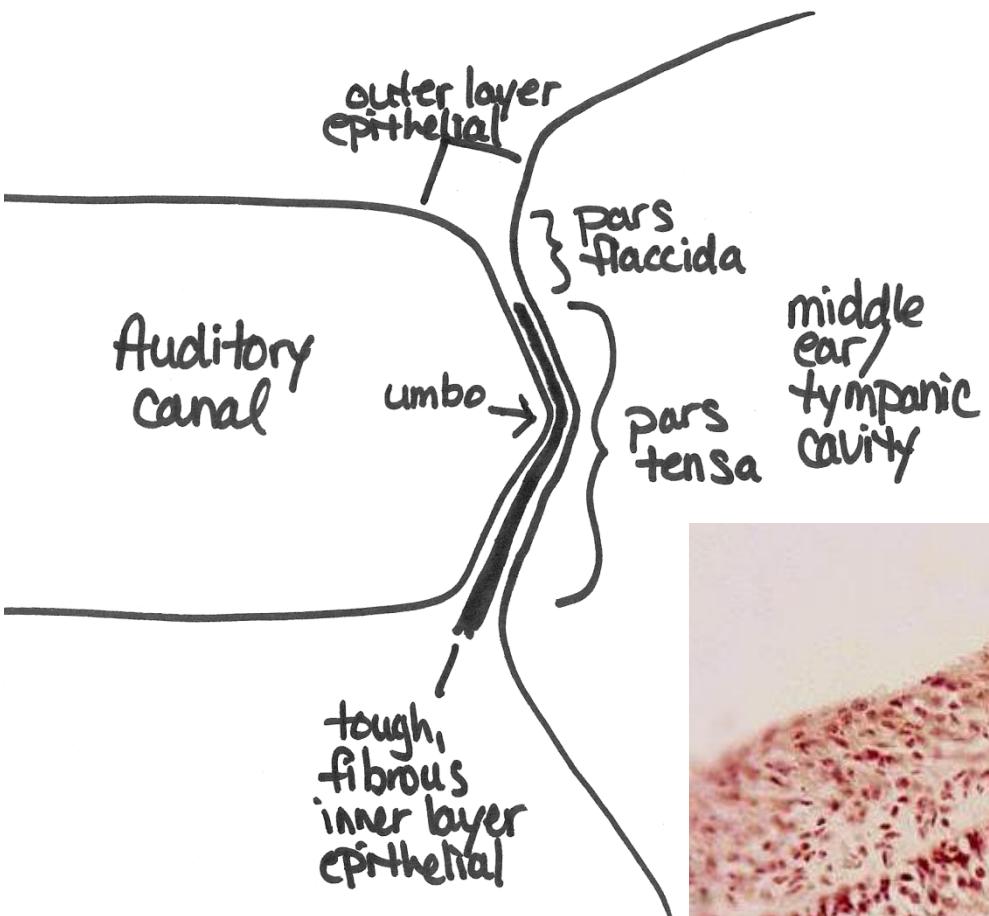


copyright Michael Hawke MD

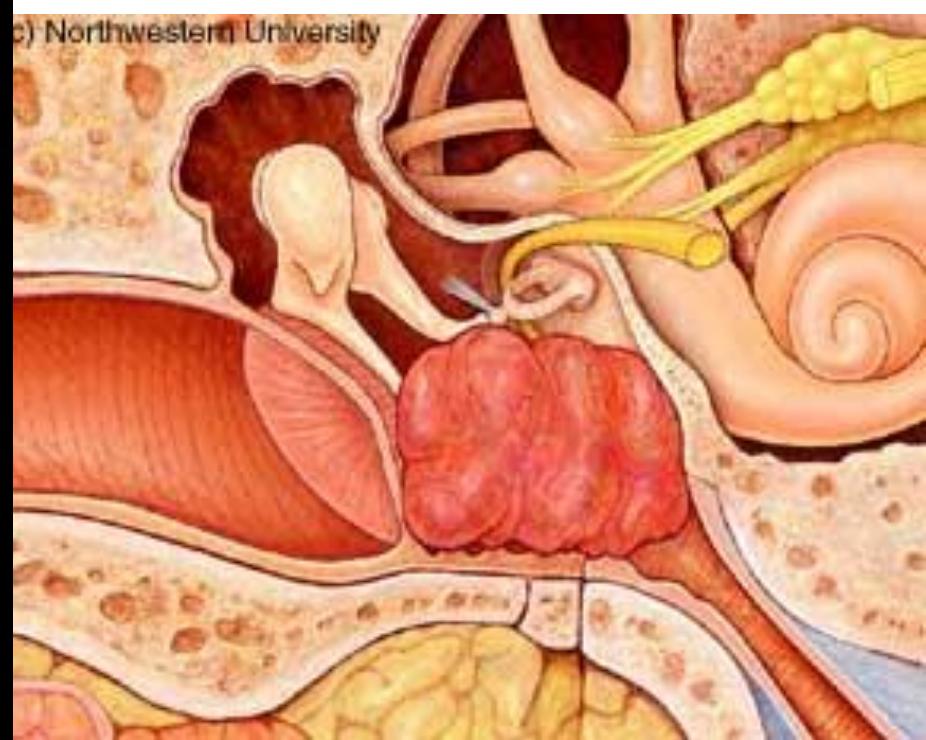
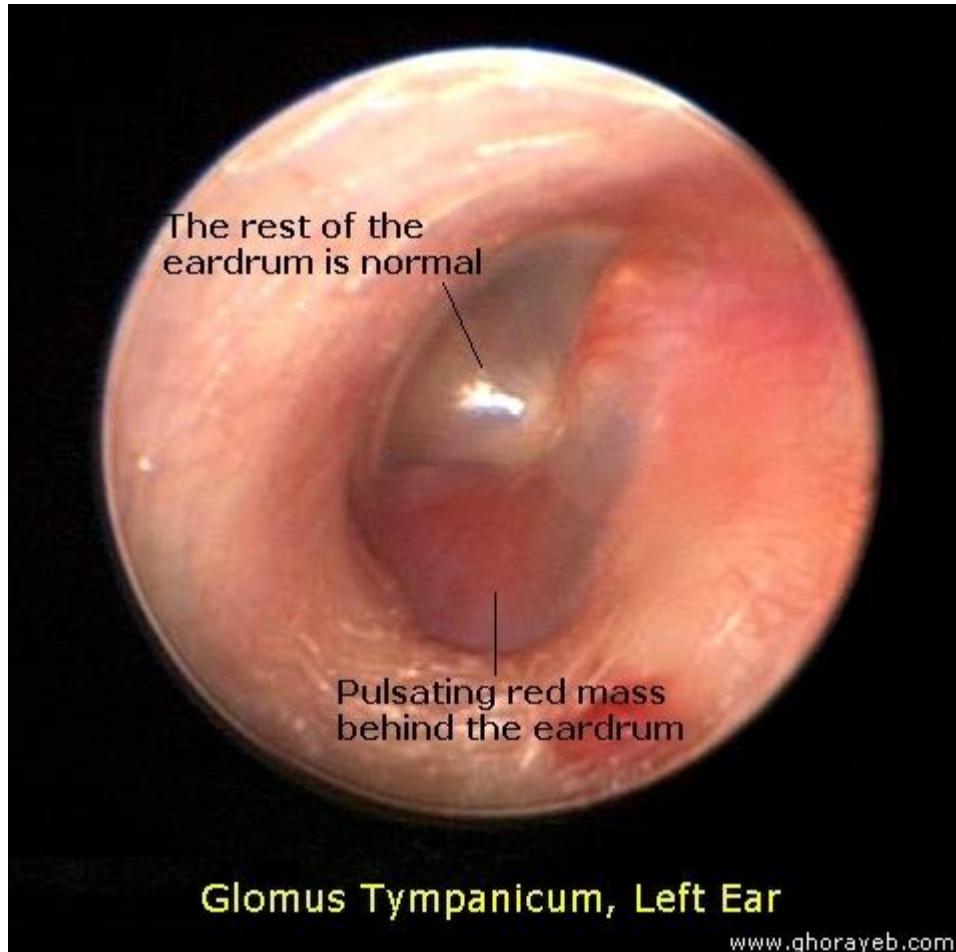
- Secretory otitis media

Pars flaccida

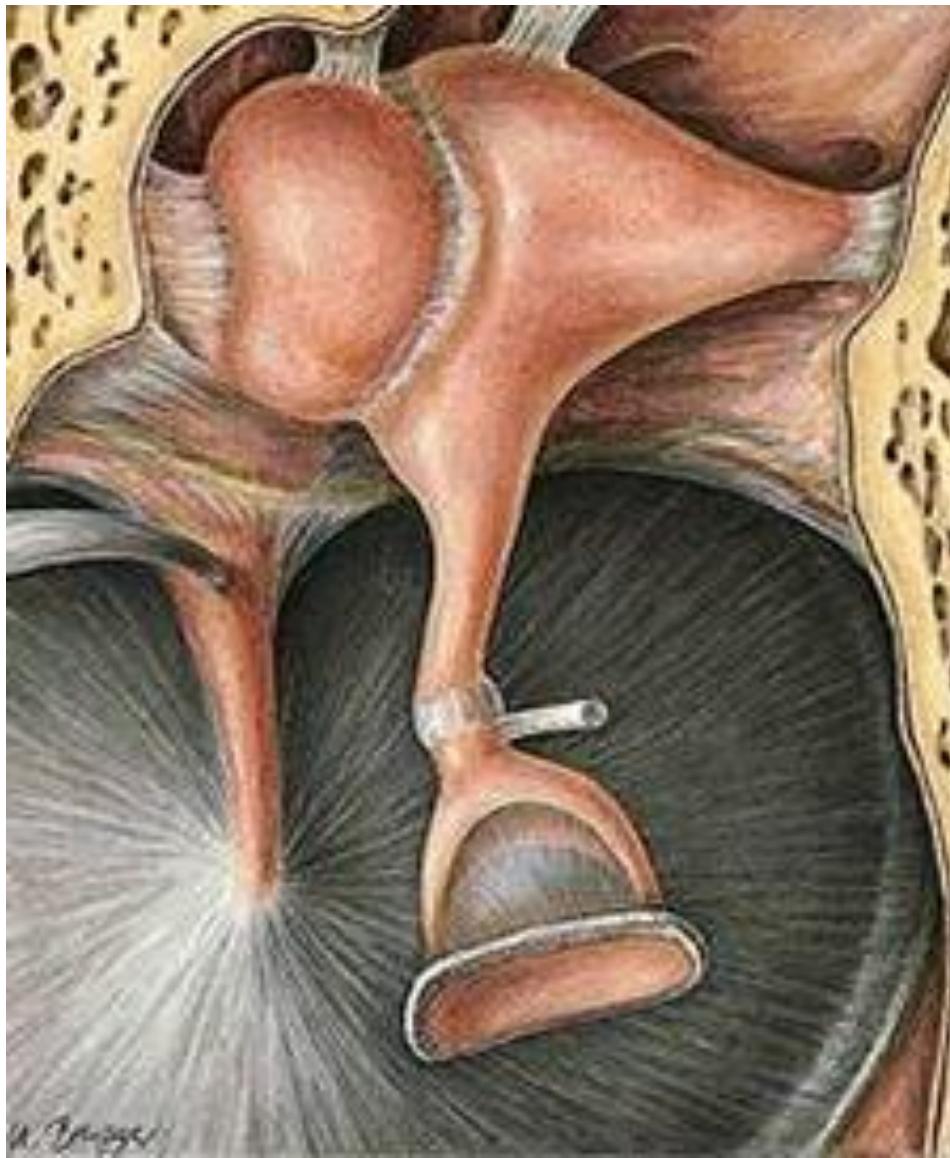
Pars tensa



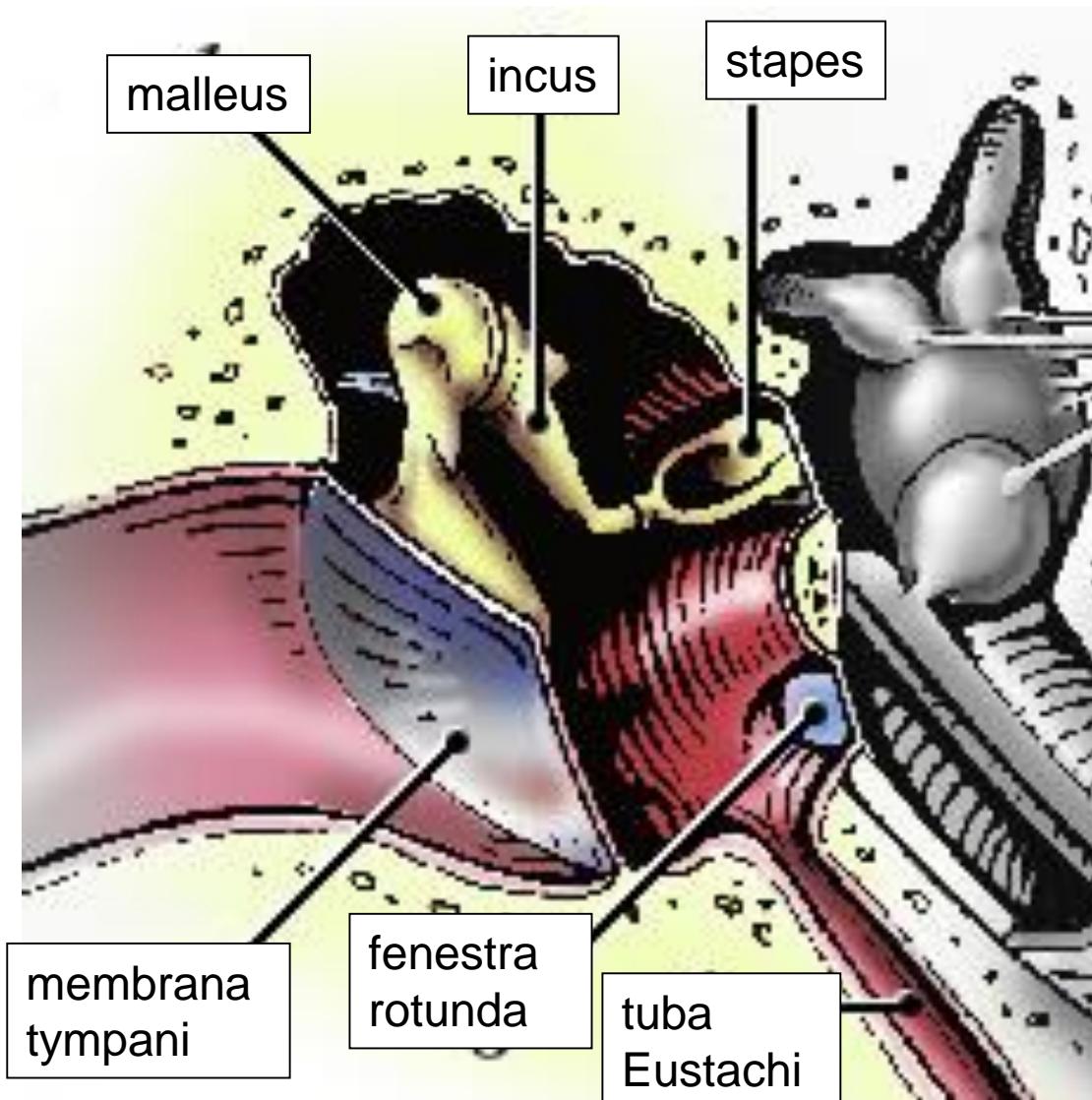
Tympanic paraganglioma



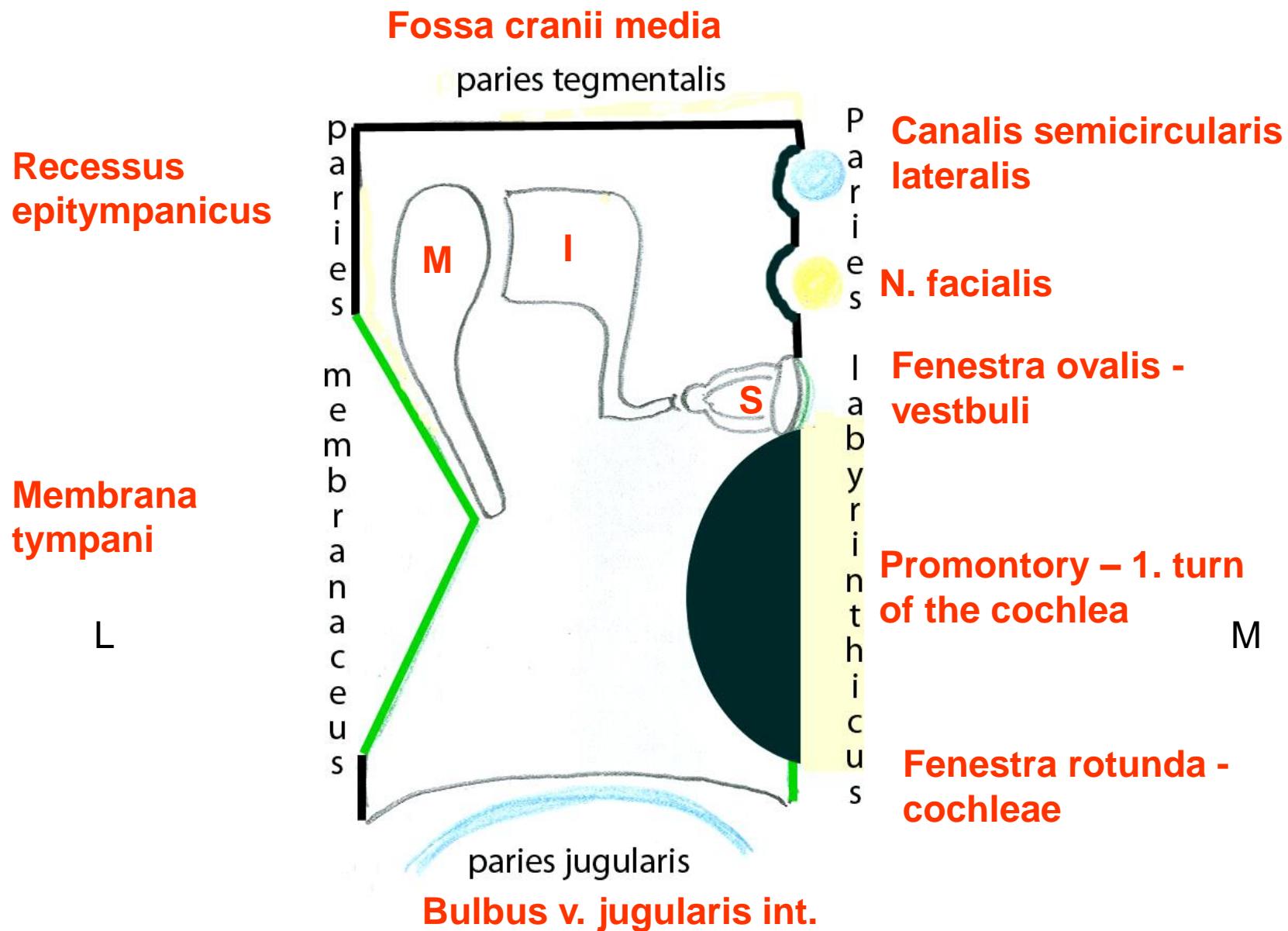
Middle ear



Tympanic cavity

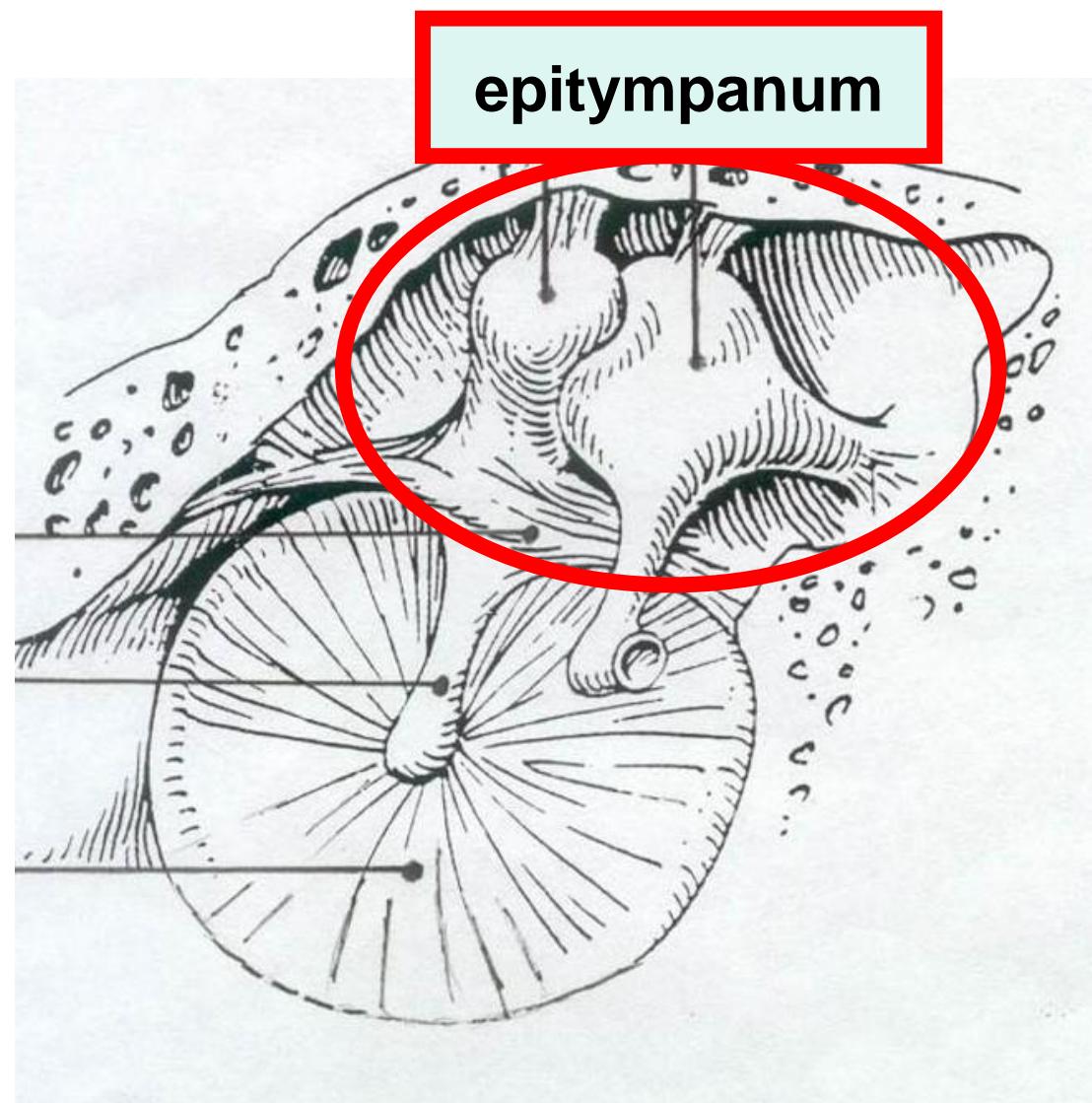


Tympanic cavity



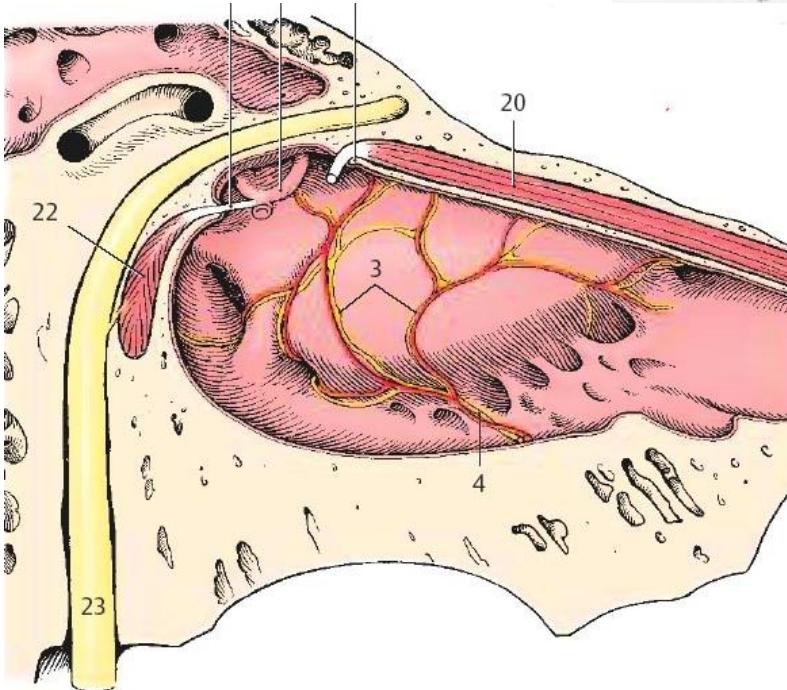
Paries membranaceus

- Lateral wall



Paries labyrinthicus

- Medial wall

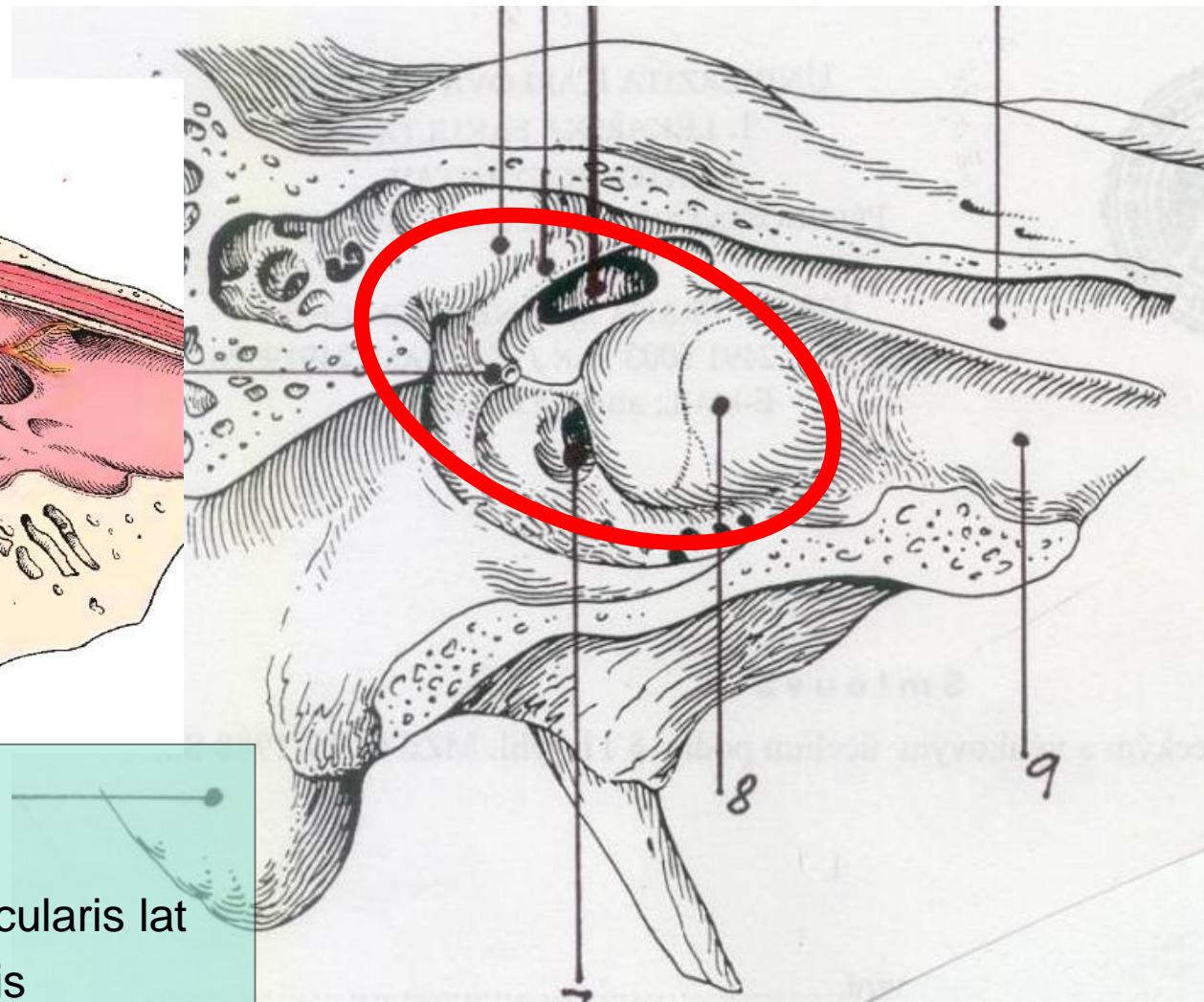


Fenestra vestibuli ovalis

Fenestra cochlae rotundum

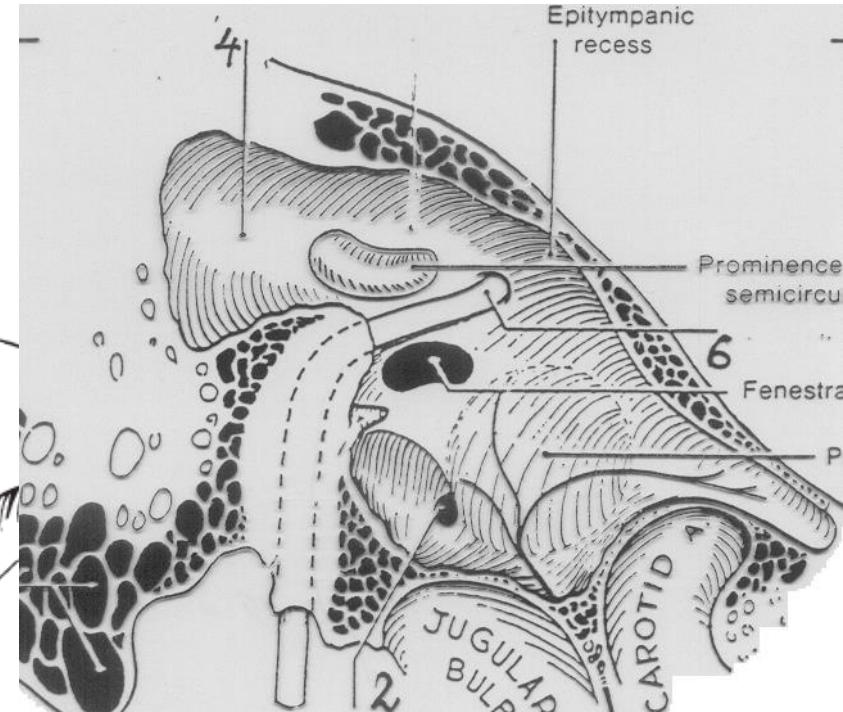
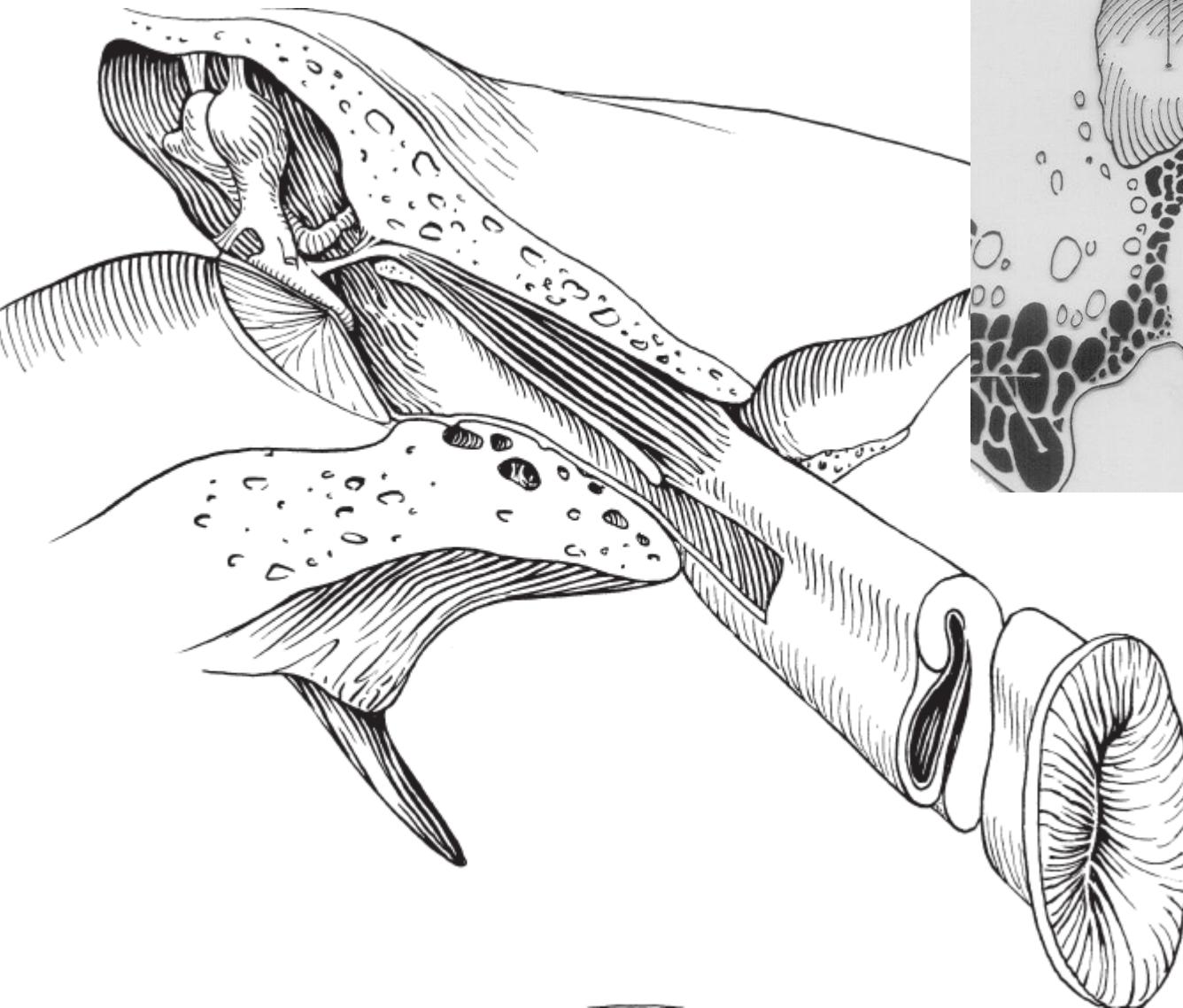
Prominentia canalis semicircularis lat

Prominentia canalis n.facialis



Paries caroticus

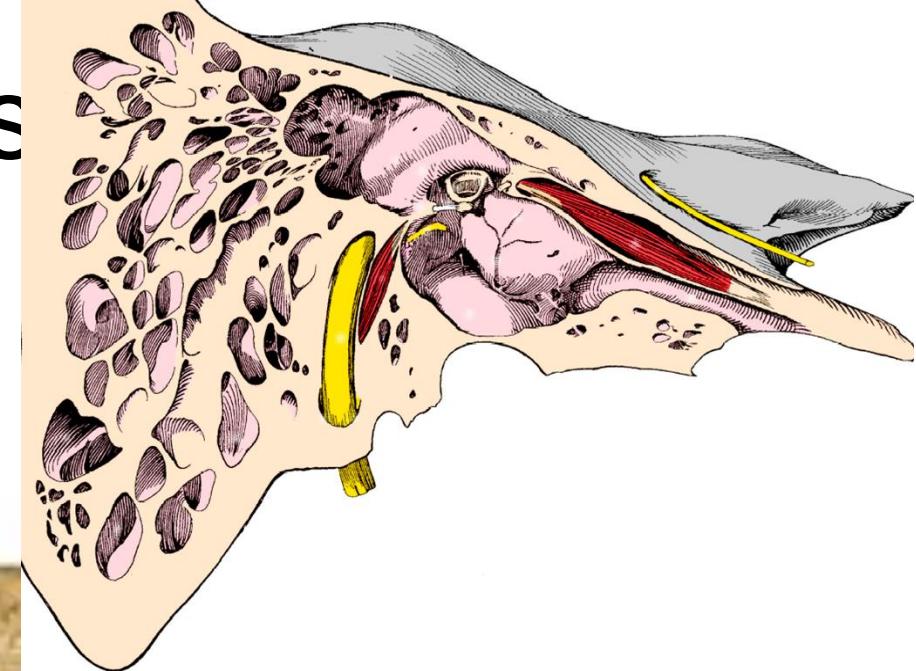
- Anterior wall



Tuba auditiva

Paries mastoideus

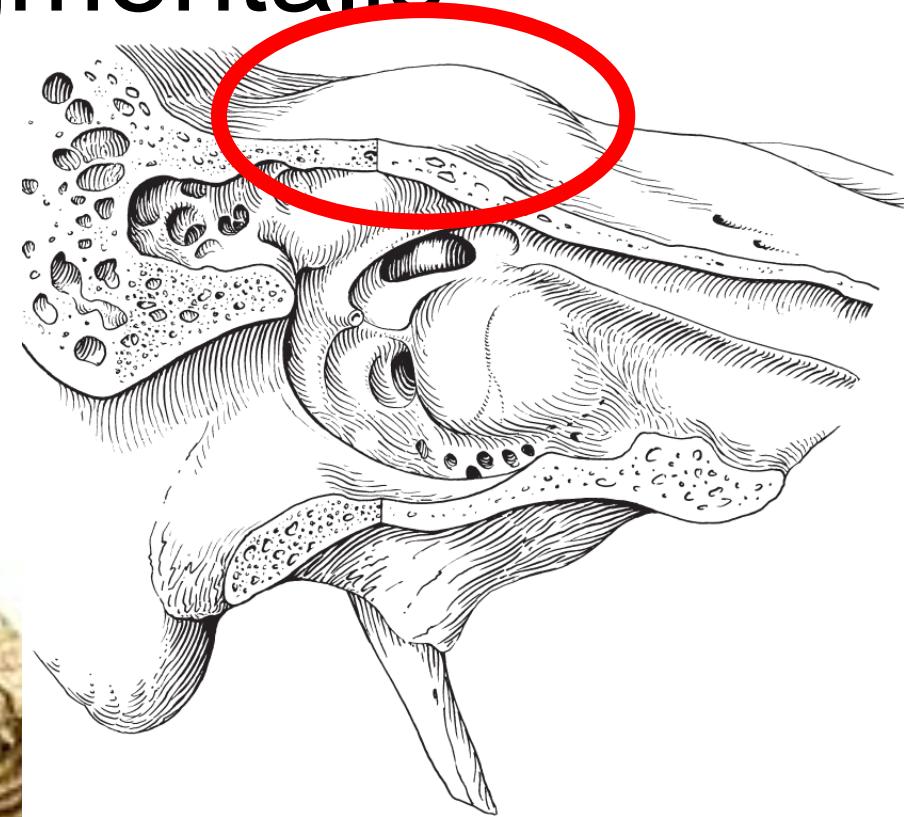
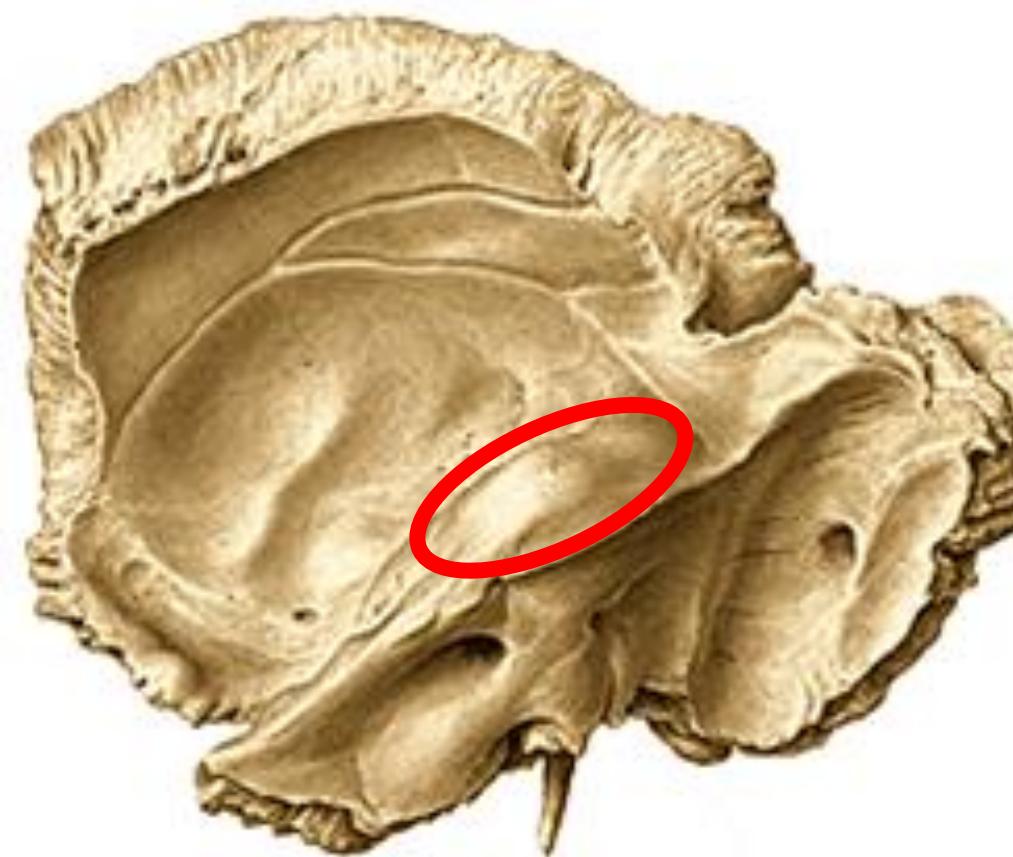
- Posterior wall



Antrum mastoideum
Eminentia pyramidalis
Chorda tympani

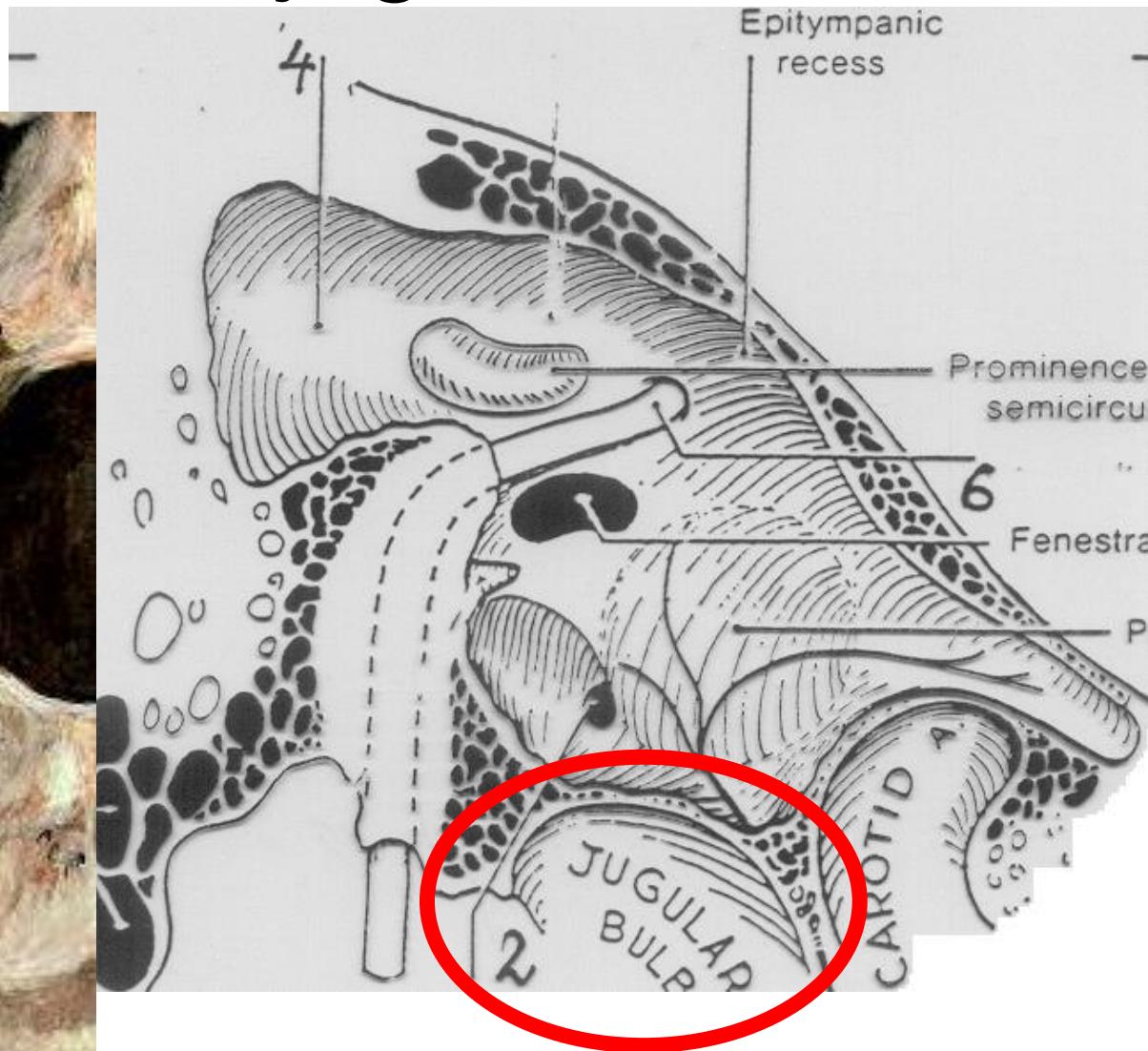
Paries tegmentalis

- Upper wall

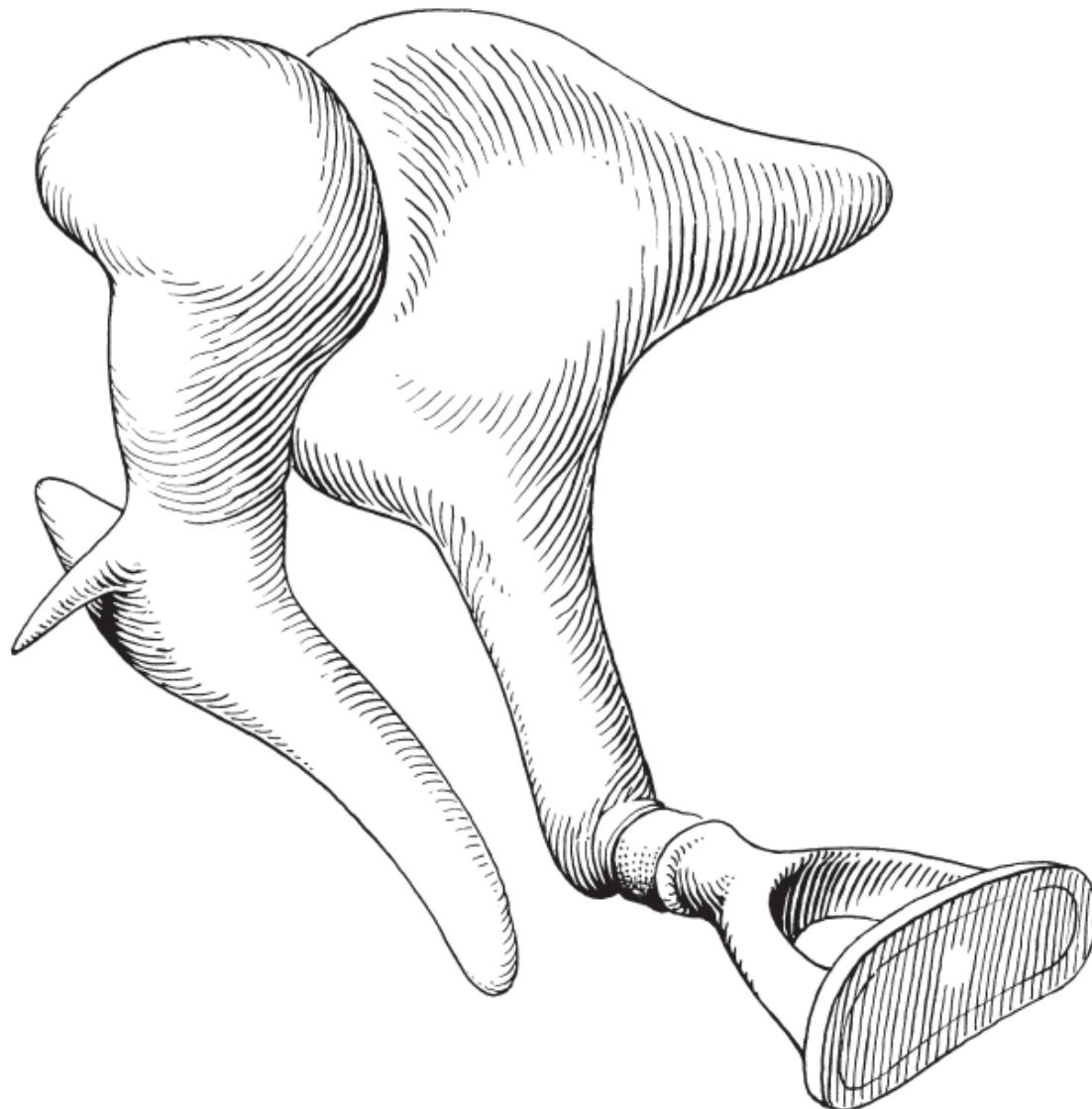


Paries jugularis

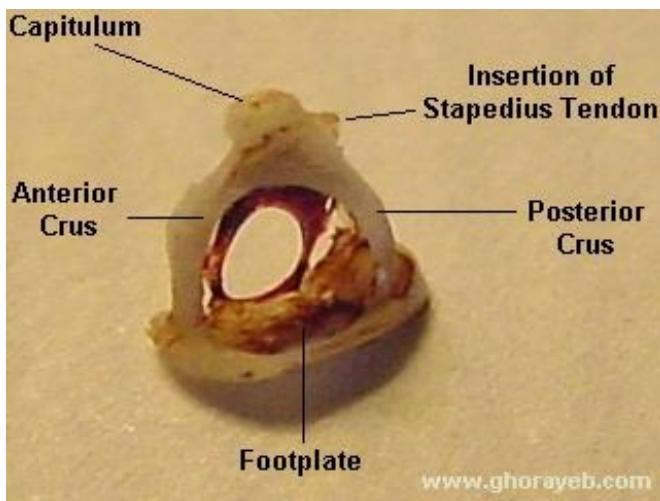
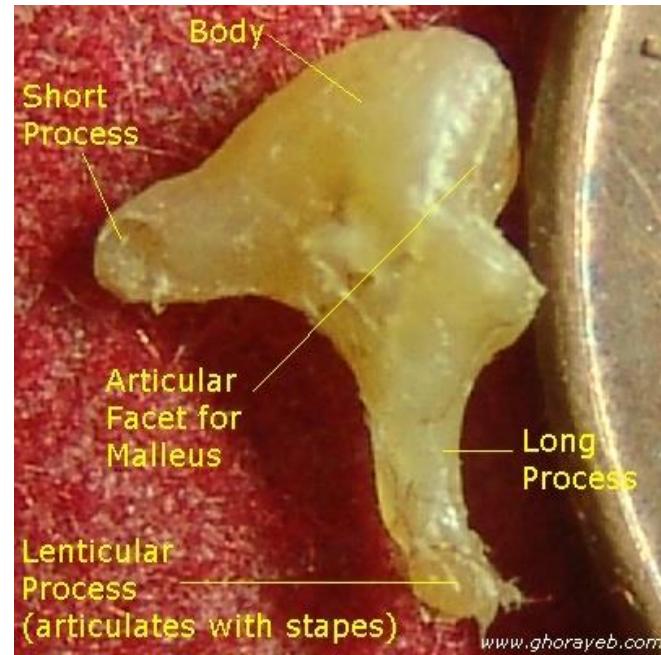
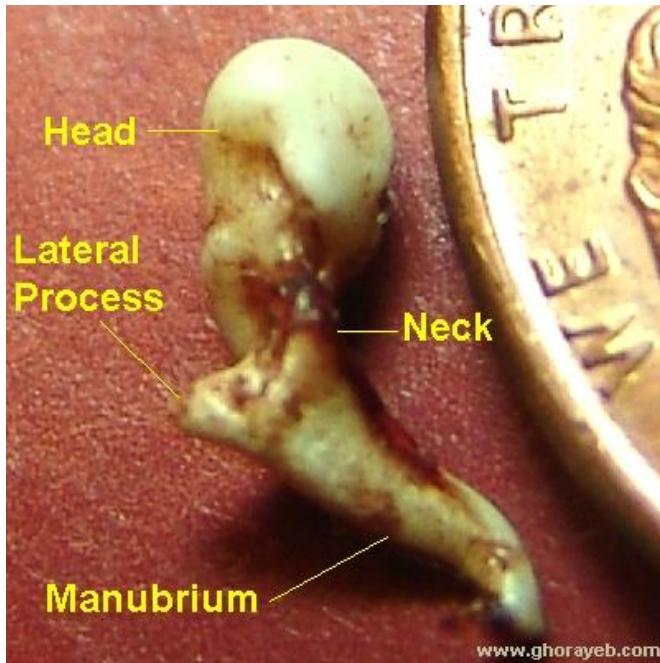
- Lower wall



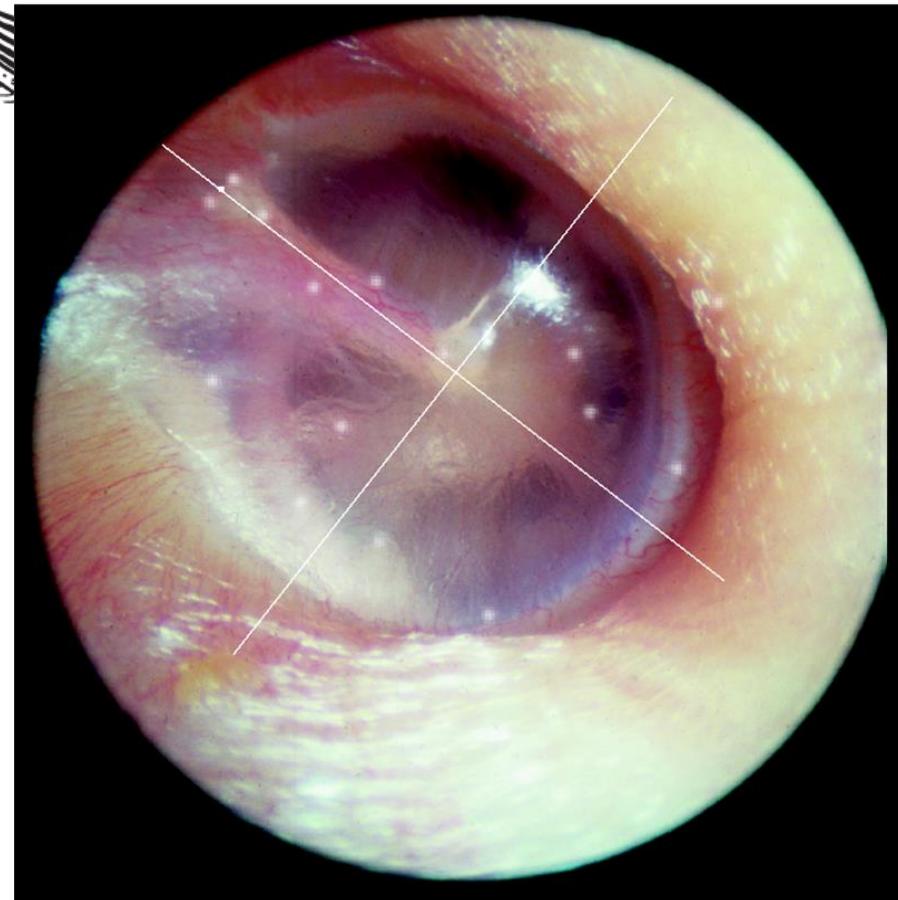
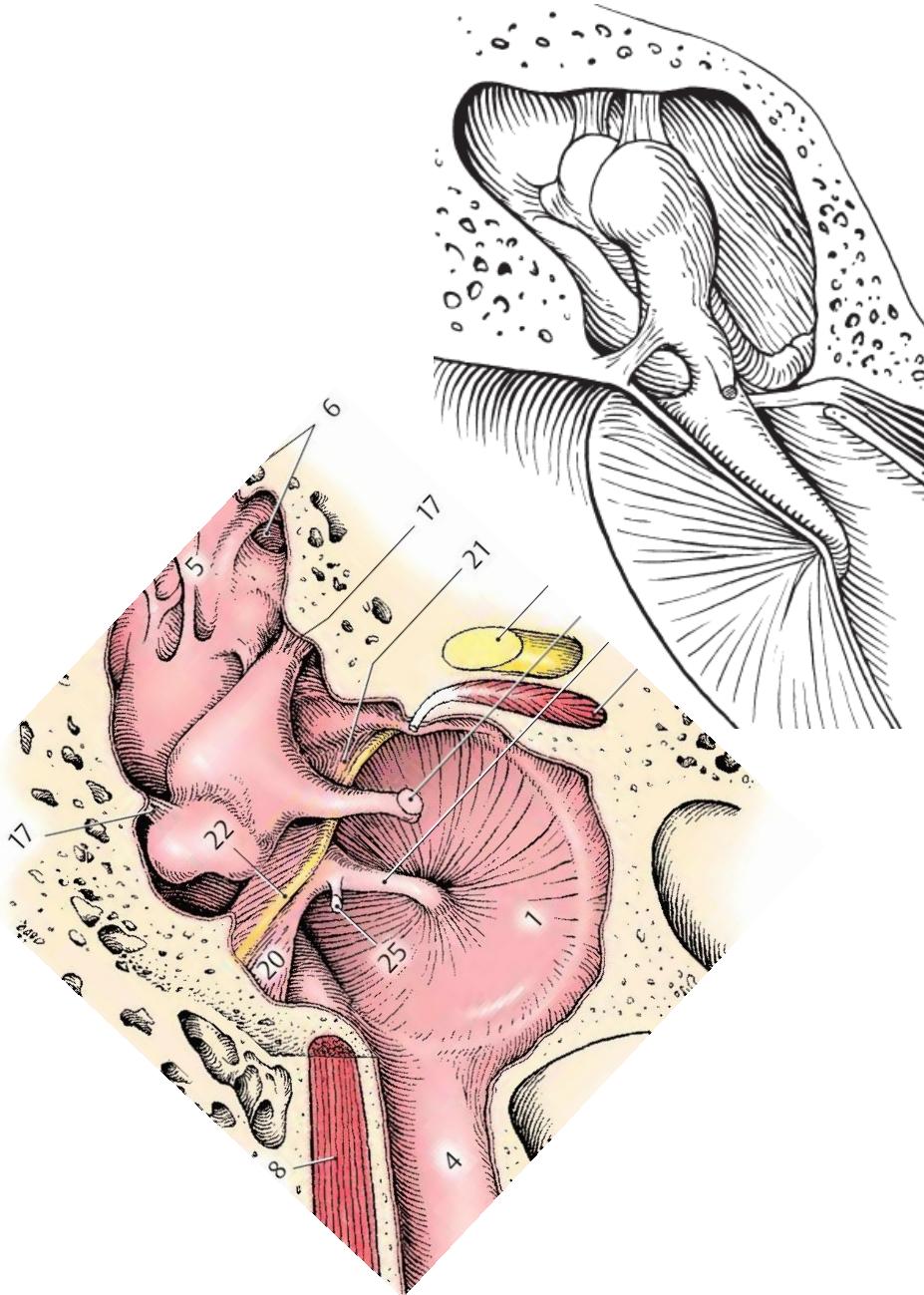
Ossicula auditus

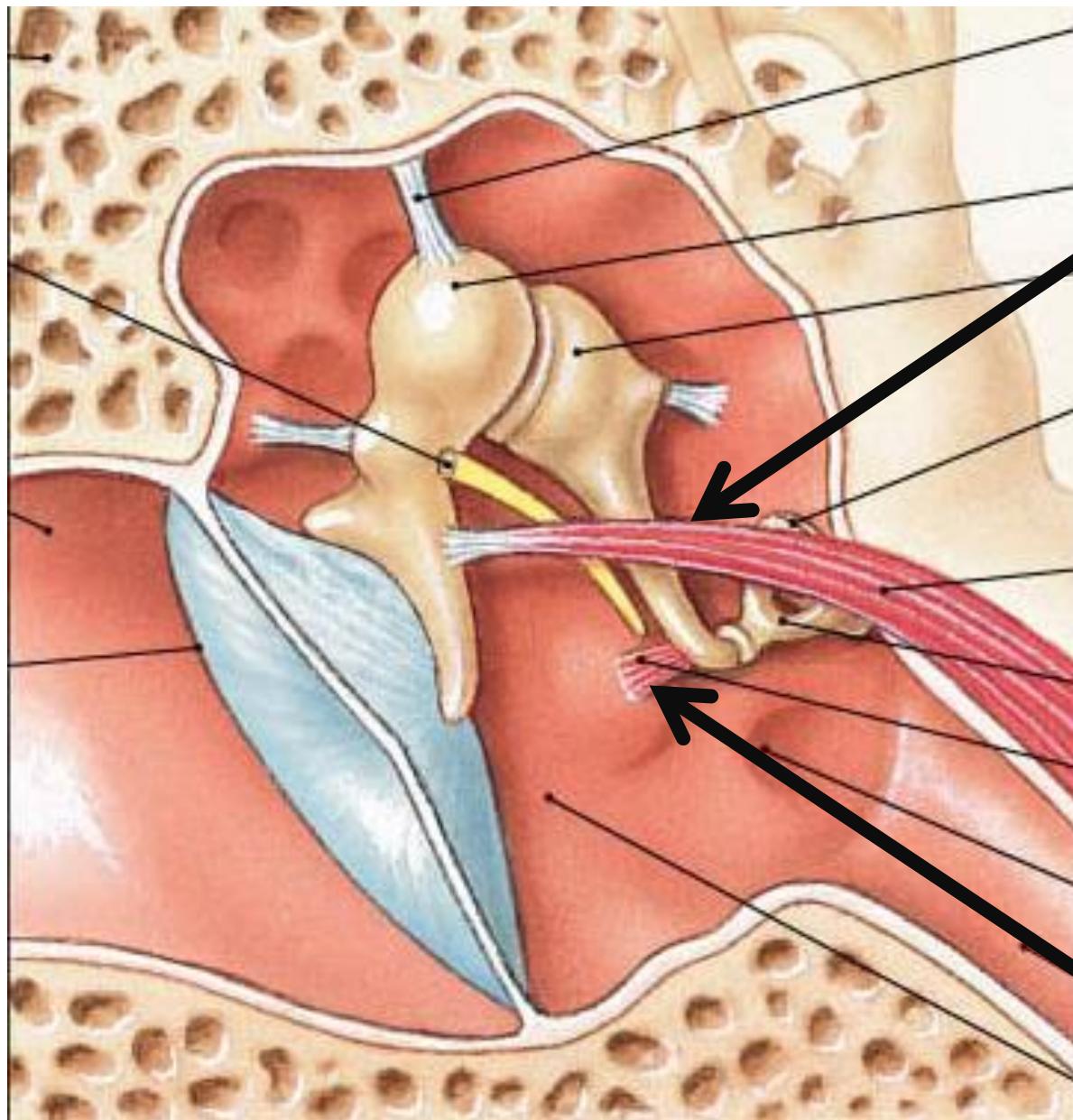


Malleus, incus, stapes



Ossicula auditus

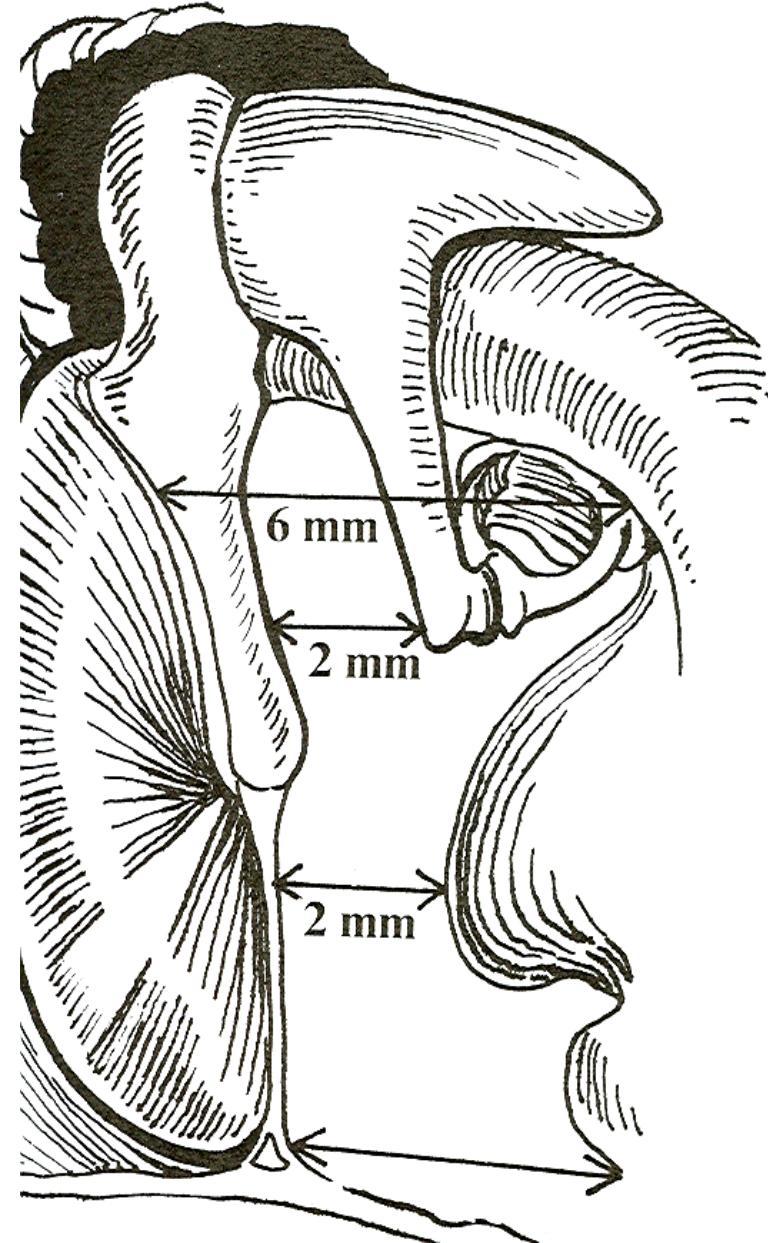




**Tensor tympani muscle
(n.V)**

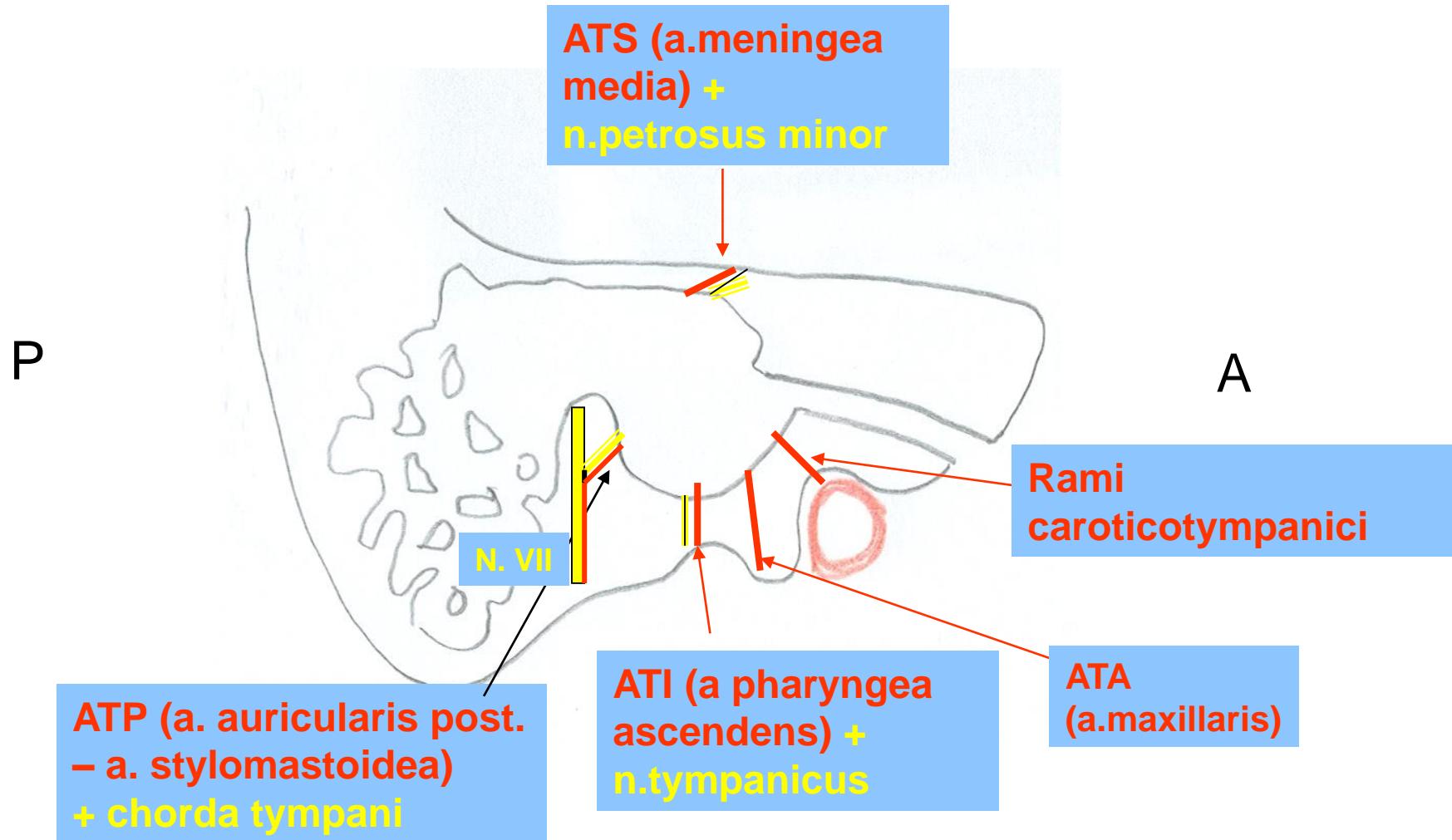
**Stapedial muscle
(n.VII)**

Tympanic cavity – proportions

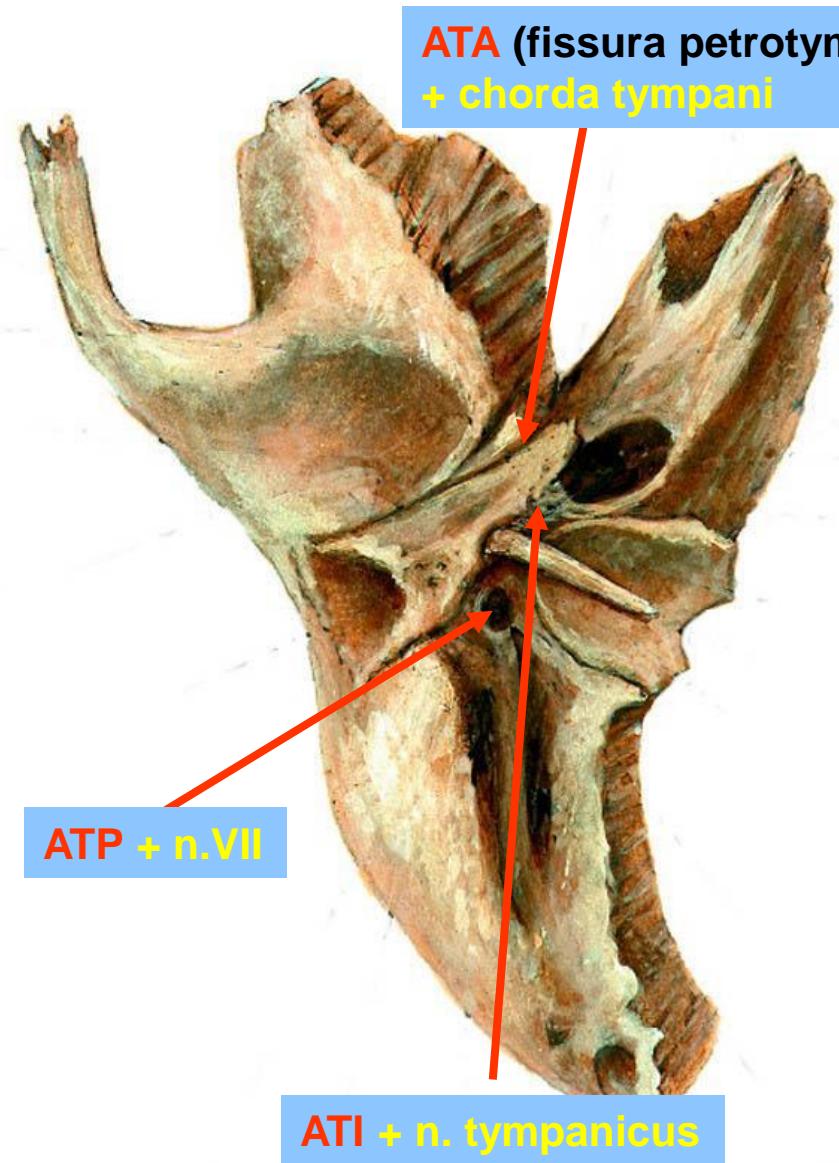


Cavum tympani – blood supply

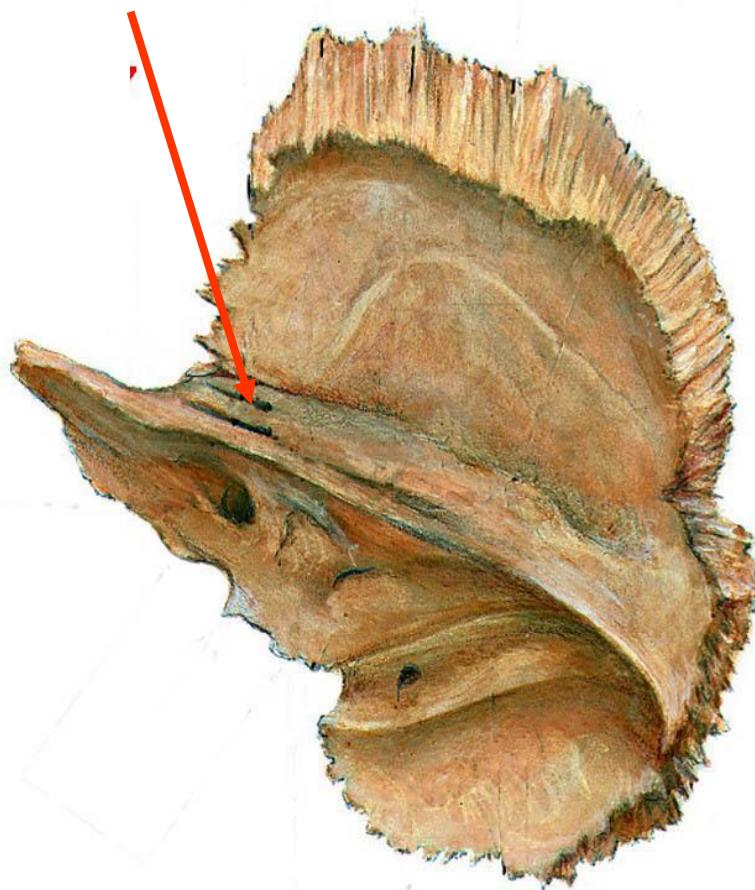
arterie tympanicae (superior, inferior, anterior, posterior) – AT (S,I,A,P)



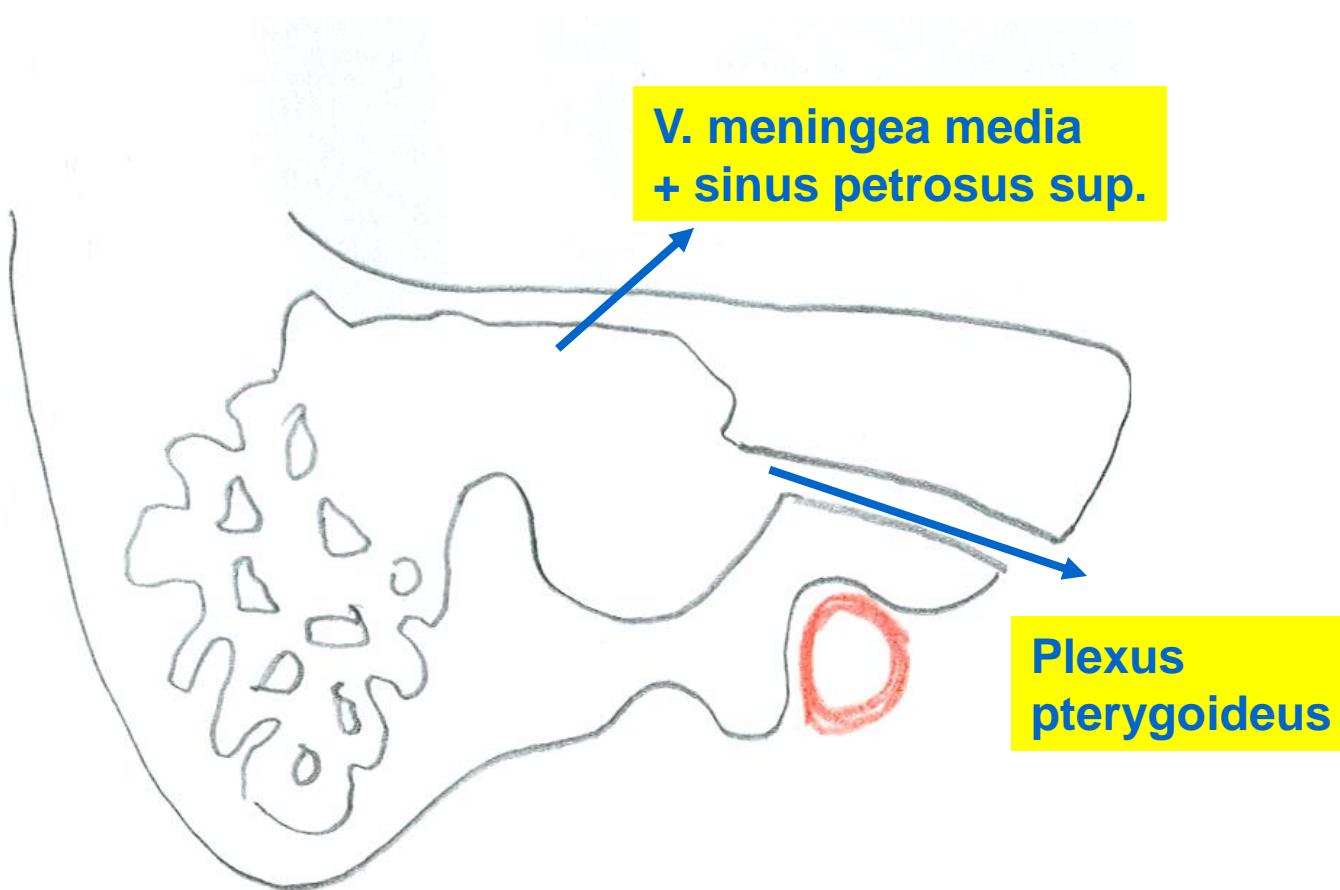
Blood and nervous supply



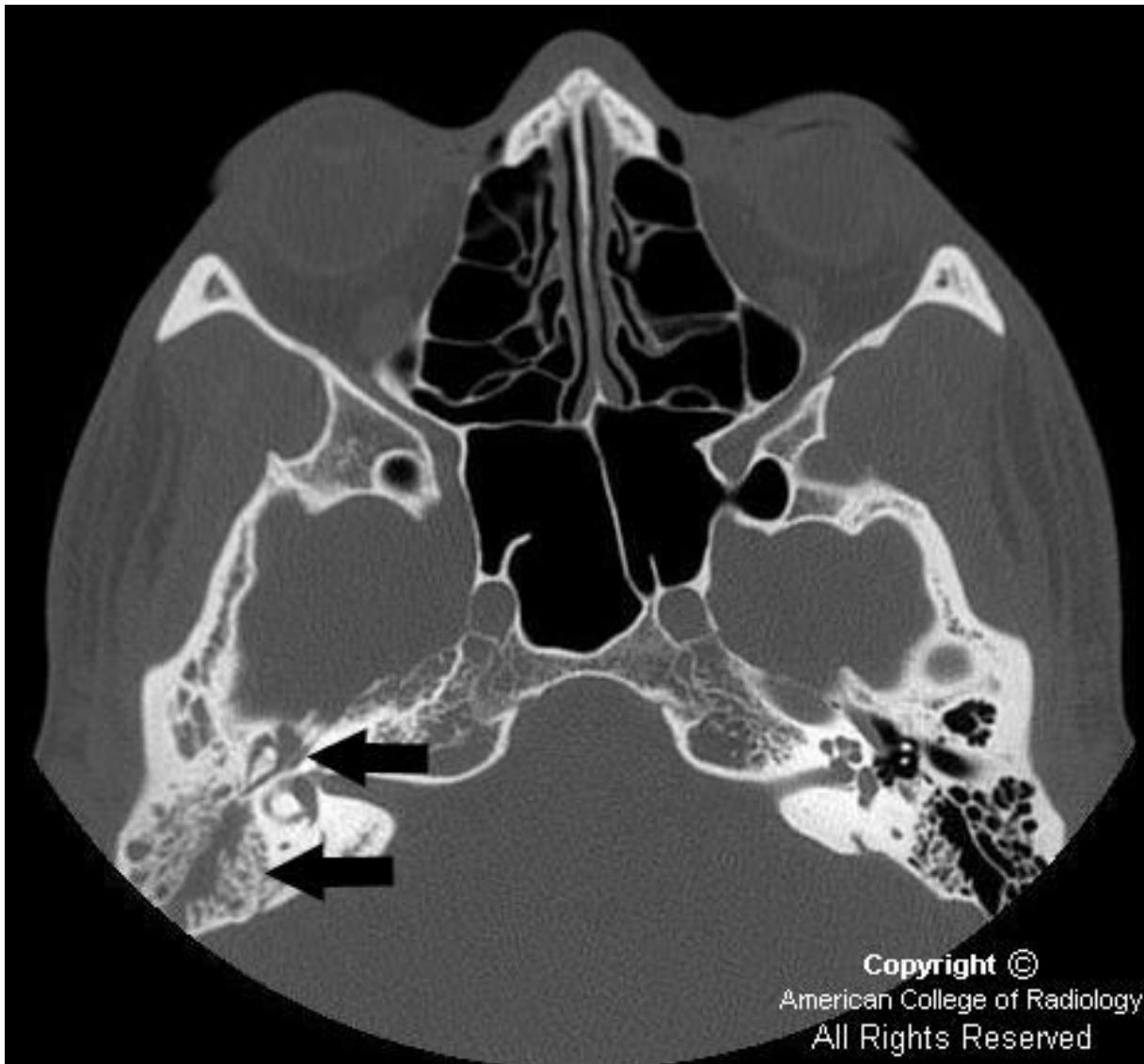
ATS +n.petrosus minor



Venous drainage

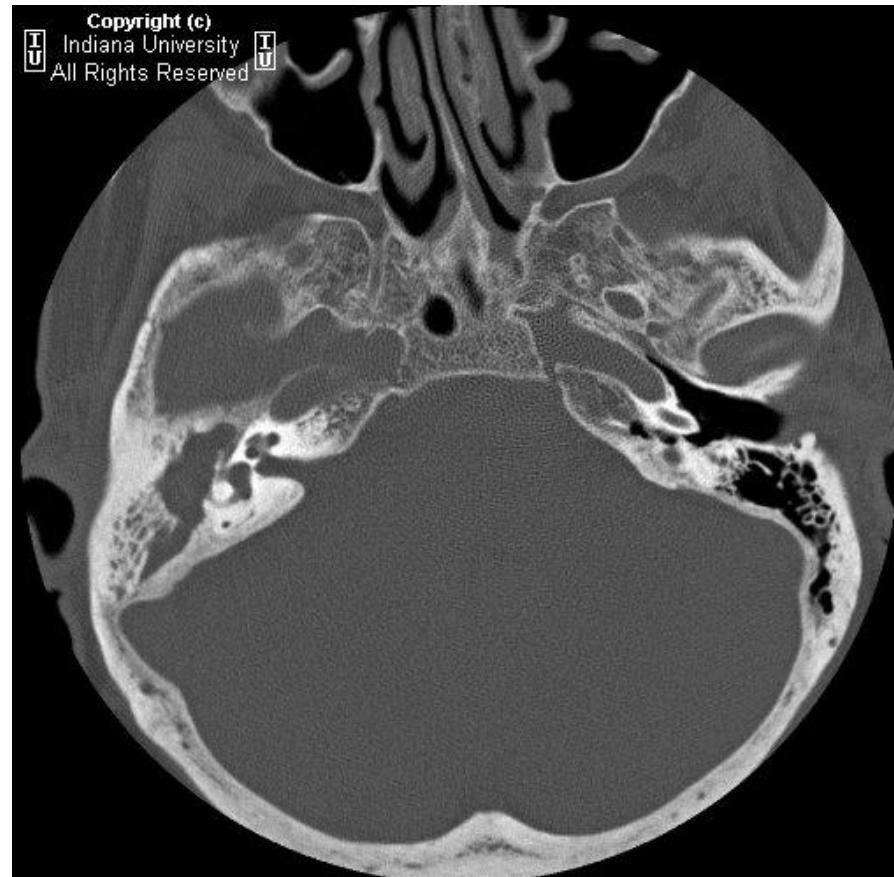
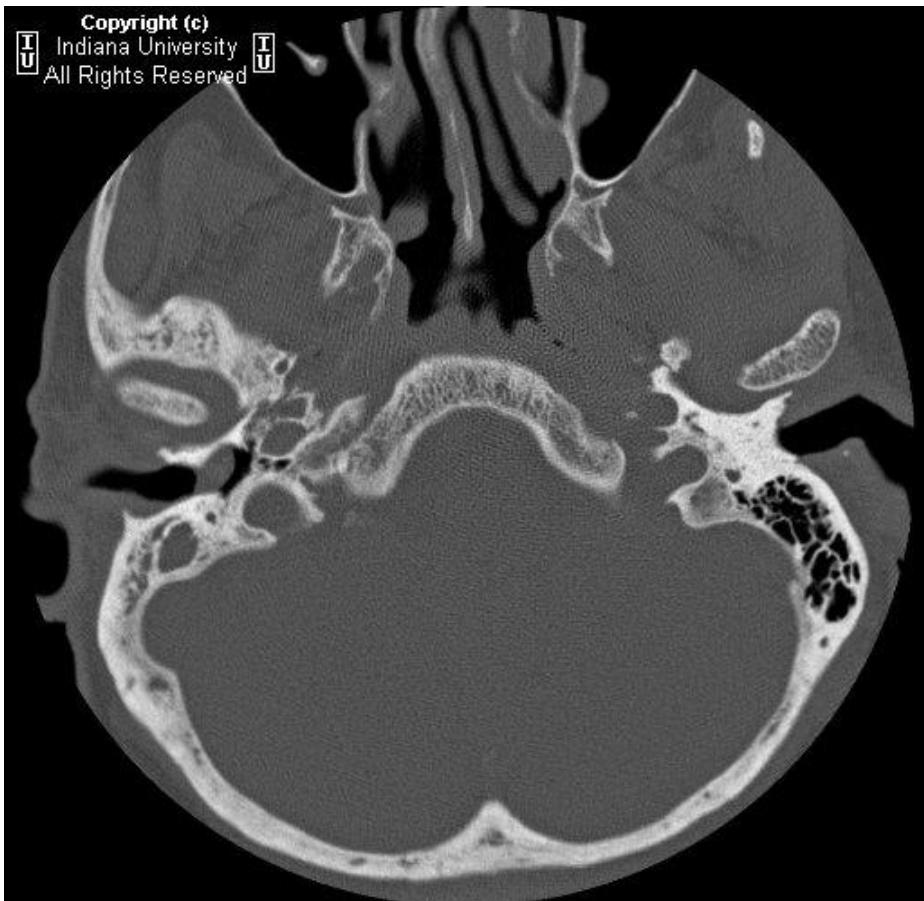


CT otitis and mastoiditis



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Cholesteatoma – right side

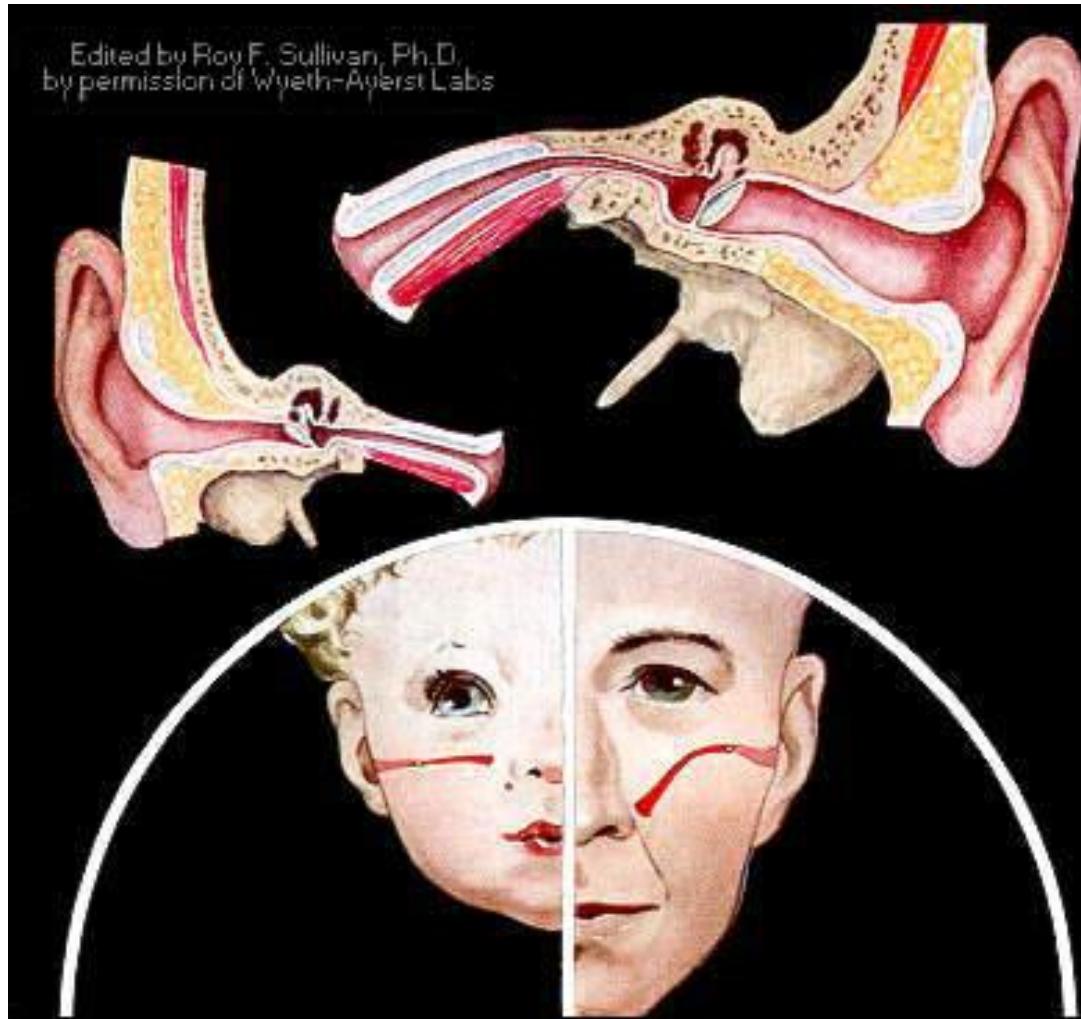


Eustachian tube

1/3 bone 2/3 cartilage

Children

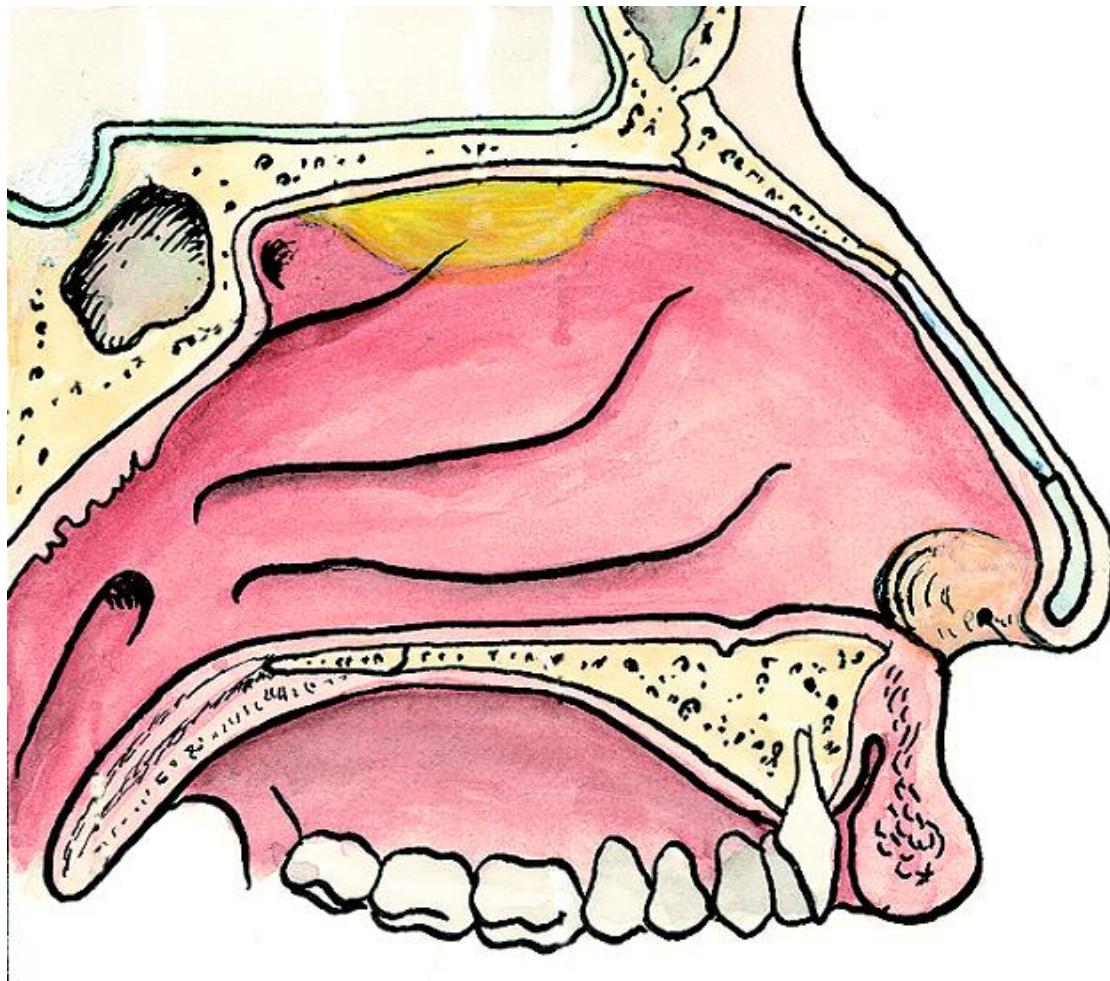
1. 3cm short
2. 2,5mm wide
3. open
4. straight



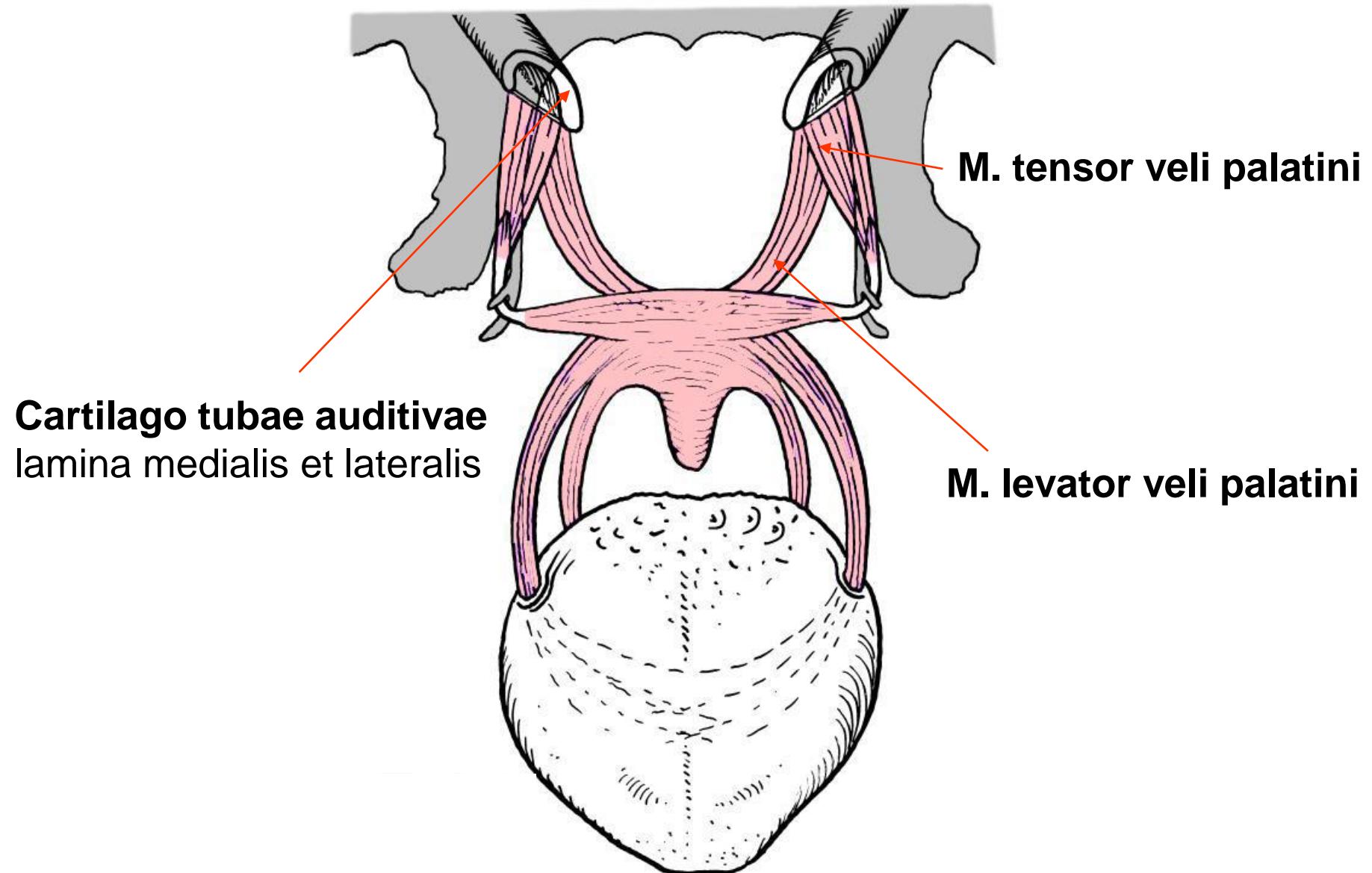
Adult

1. 3,8cm long
2. 1 mm narrow
3. partly open
4. bent

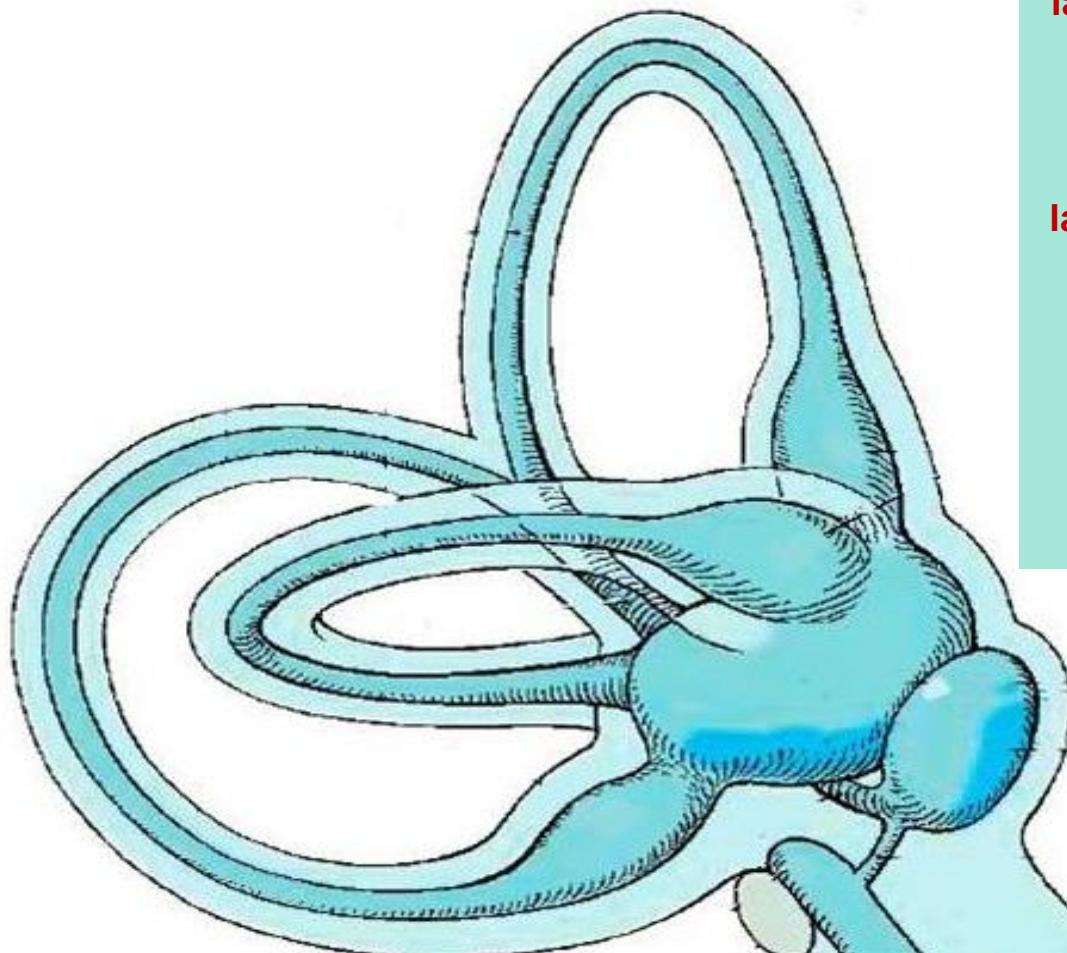
Tuba Eustachi



Middle ear ventilation during swallowing



Auris interna



labyrinthus osseus

cochlea

vestibulum

canales semicirculares

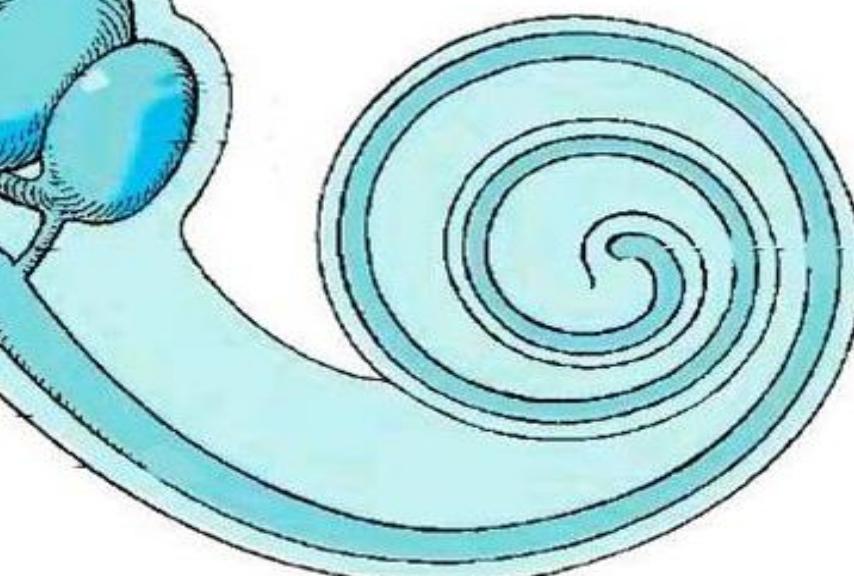
labyrinthus membranaceus

utriculus

sacculus

ductus semicirculares

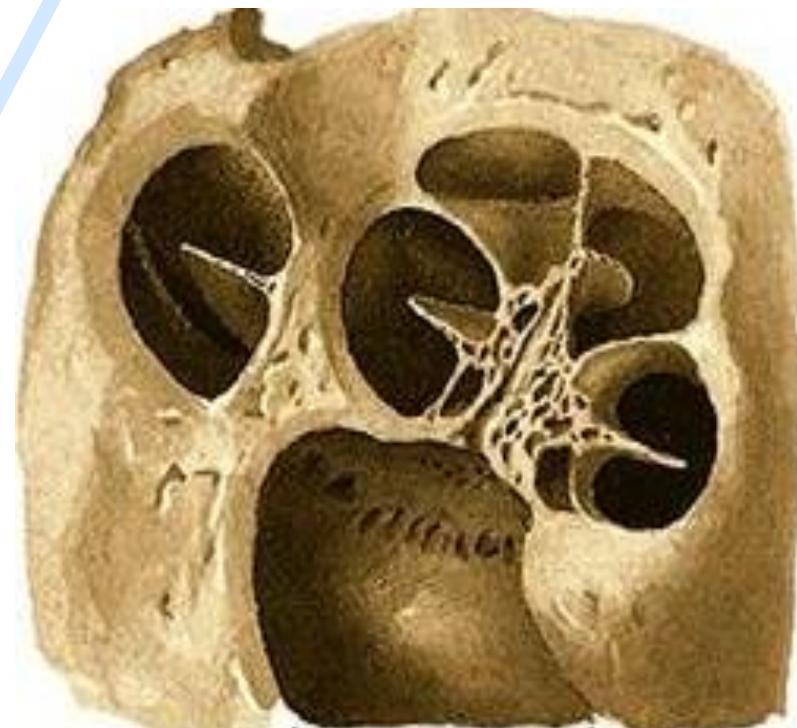
ductus cochlearis



Labyrinthus osseus



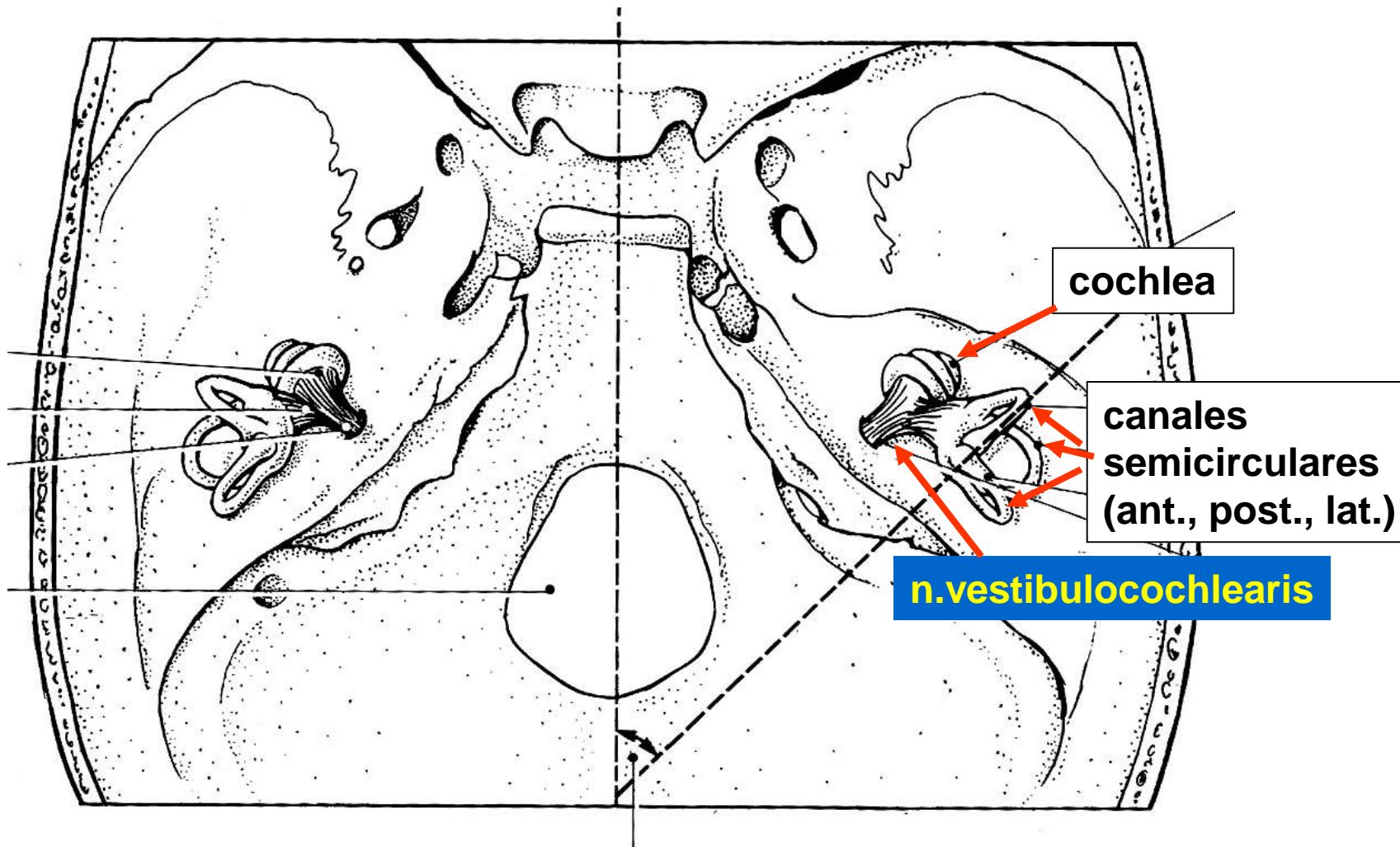
Separated with spongiosa
from os petrosum



Exceptions:

- Fundus meatus acustici interni
- Facies ventrobasalis ossis petrosis

Position of the inner ear



labyrinthus osseus

cochlea
vestibulum
canales semicirculares

labyrinthus membranaceus

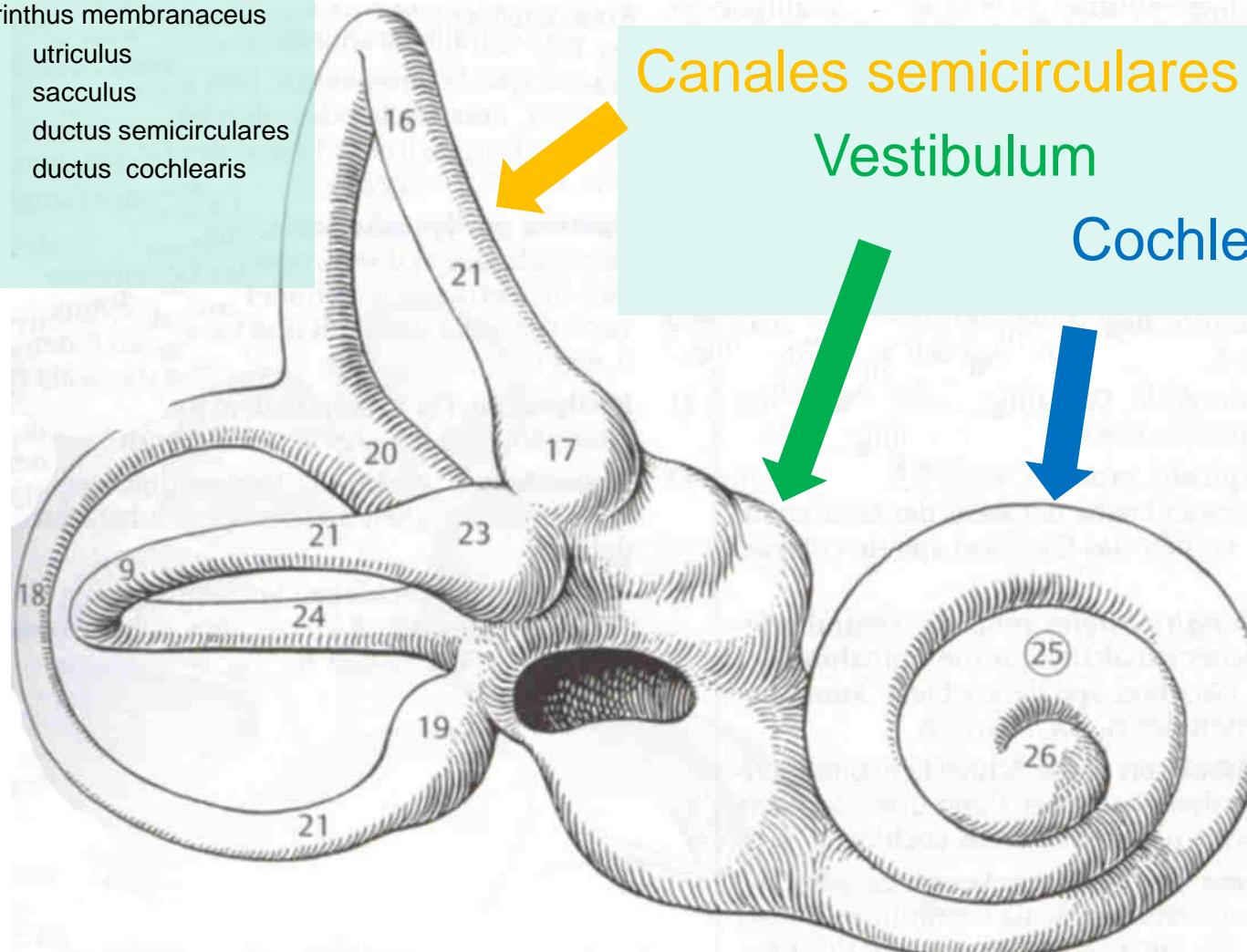
utriculus
sacculus
ductus semicirculares
ductus cochlearis

Labyrinthus osseus

Canales semicirculares

Vestibulum

Cochlea



Auris interna

labyrinthus osseus

cochlea

vestibulum

canales

semicirculares

labyrinthus membranaceus

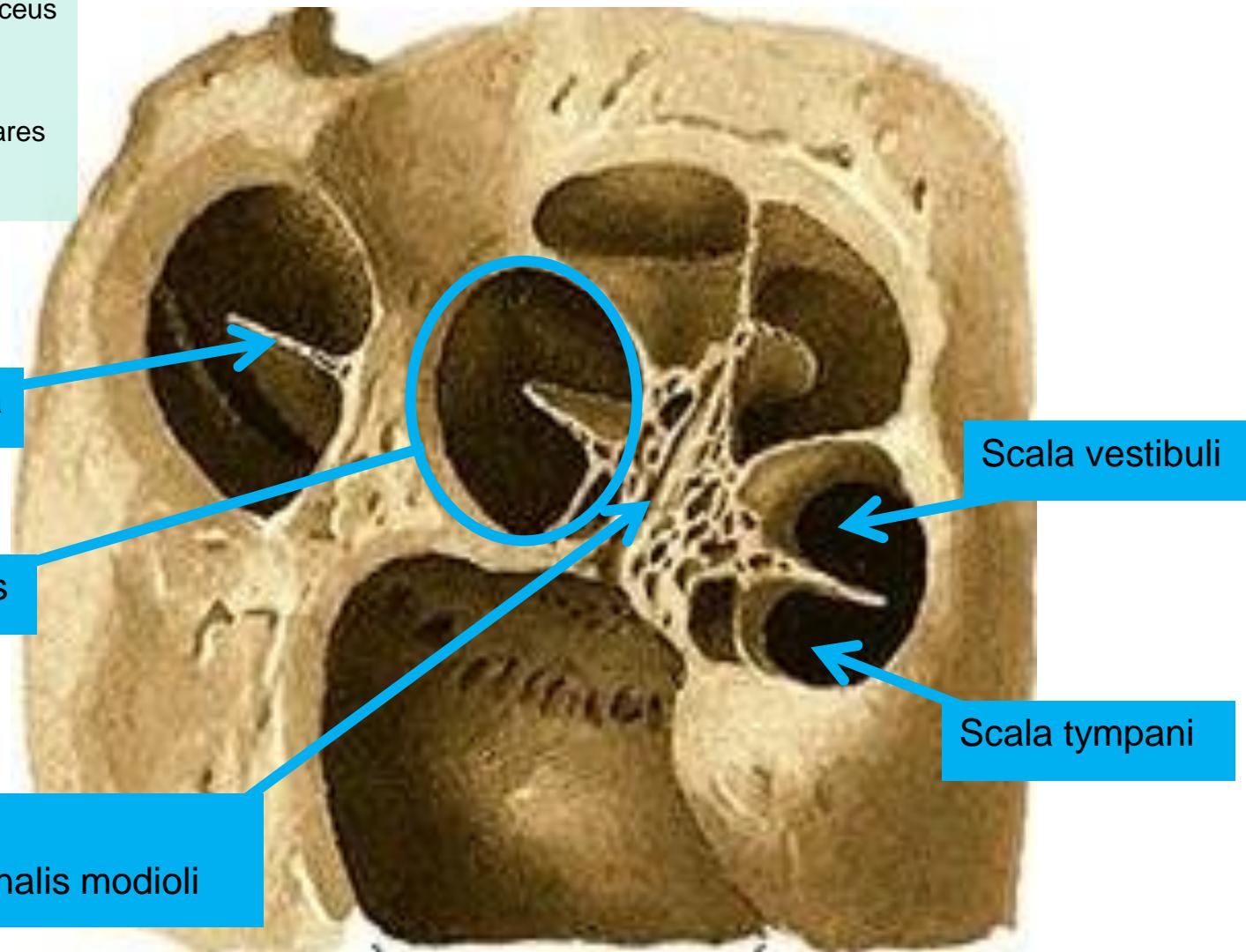
utriculus

sacculus

ductus semicirculares

ductus cochlearis

Cochlea



Auris interna

labyrinthus osseus

cochlea

vestibulum

canales

semicirculares

labyrinthus membranaceus

utriculus

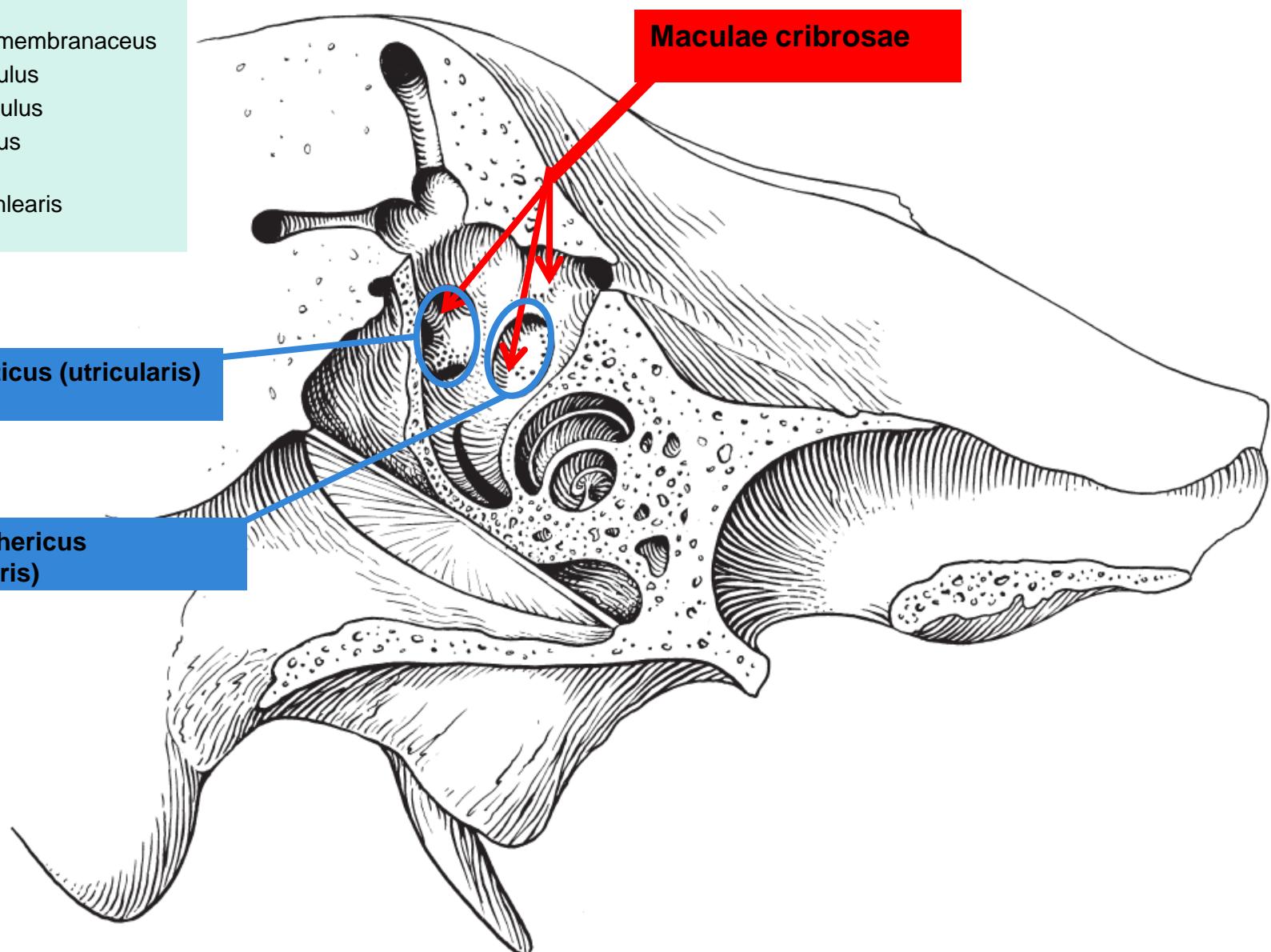
sacculus

ductus

semicirculares

ductus cochlearis

Vestibulum



Auris interna

labyrinthus osseus

cochlea

vestibulum

canales semicirculares

labyrinthus membranaceus

utriculus

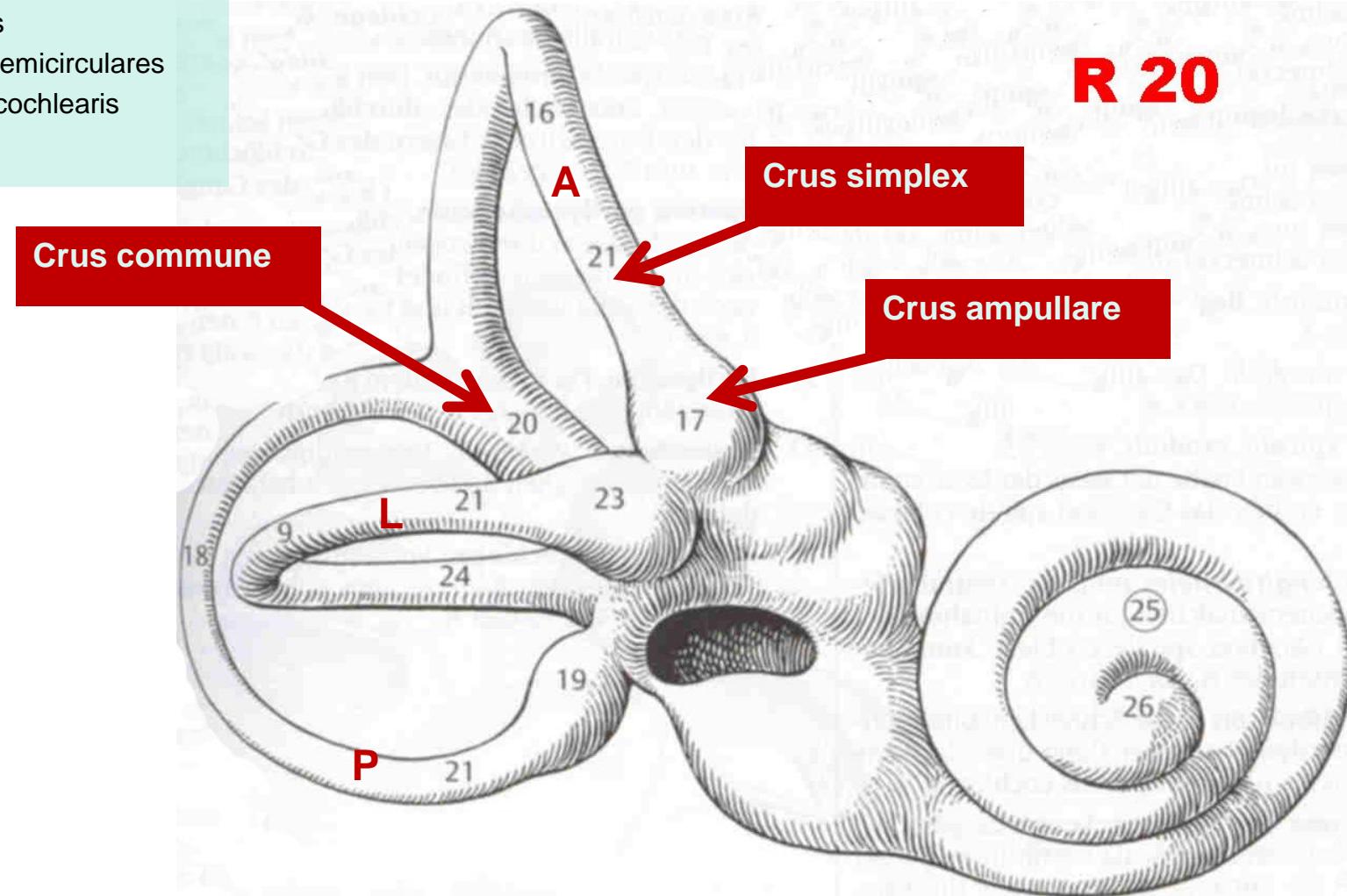
sacculus

ductus semicirculares

ductus cochlearis

Canales cemicirculares

R 20



Auris interna

labyrinthus osseus

cochlea

vestibulum

canales semicirculares

labyrinthus membranaceus

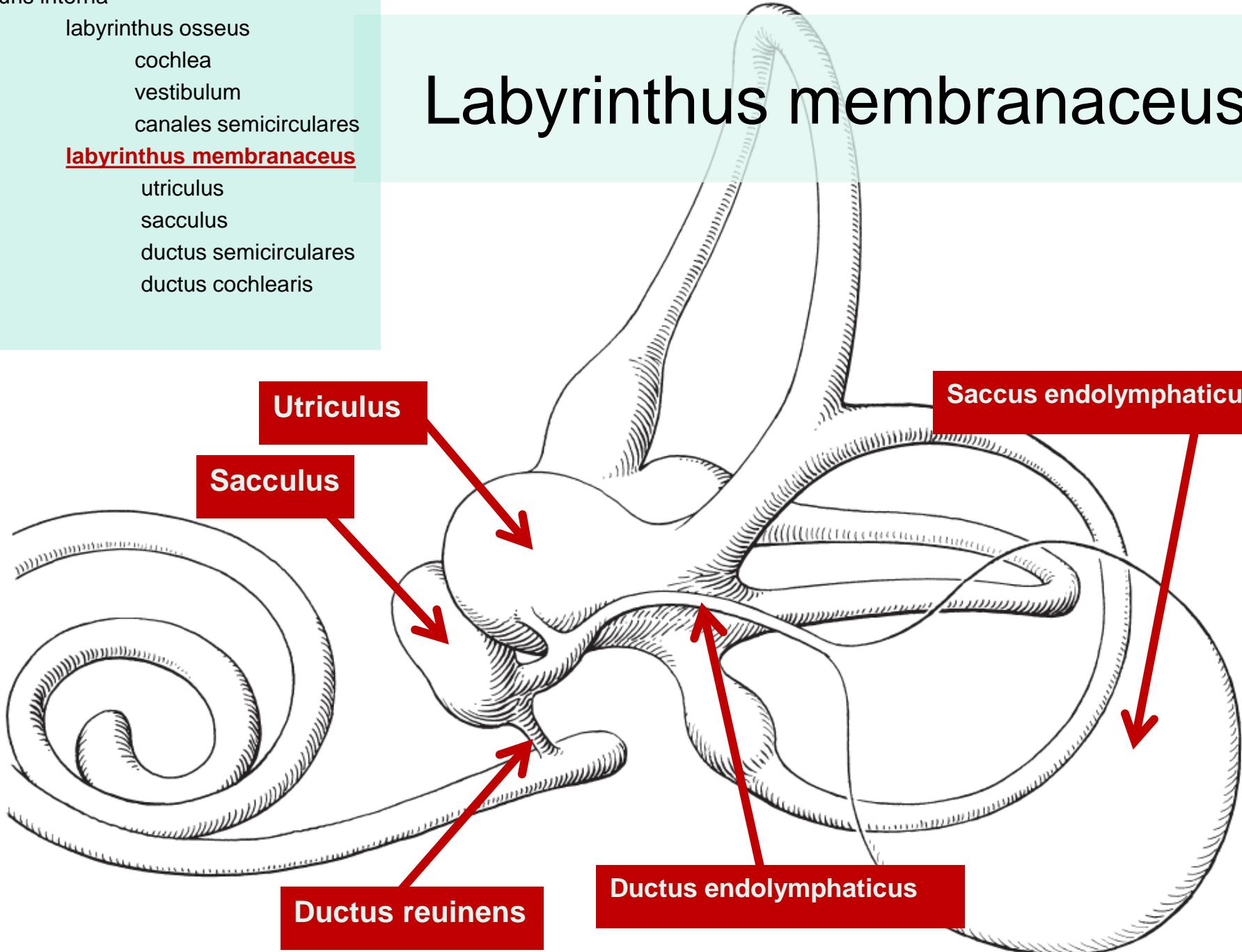
utriculus

sacculus

ductus semicirculares

ductus cochlearis

Labyrinthus membranaceus



Auris interna

labyrinthus osseus

cochlea

vestibulum

canales semicirculares

labyrinthus membranaceus

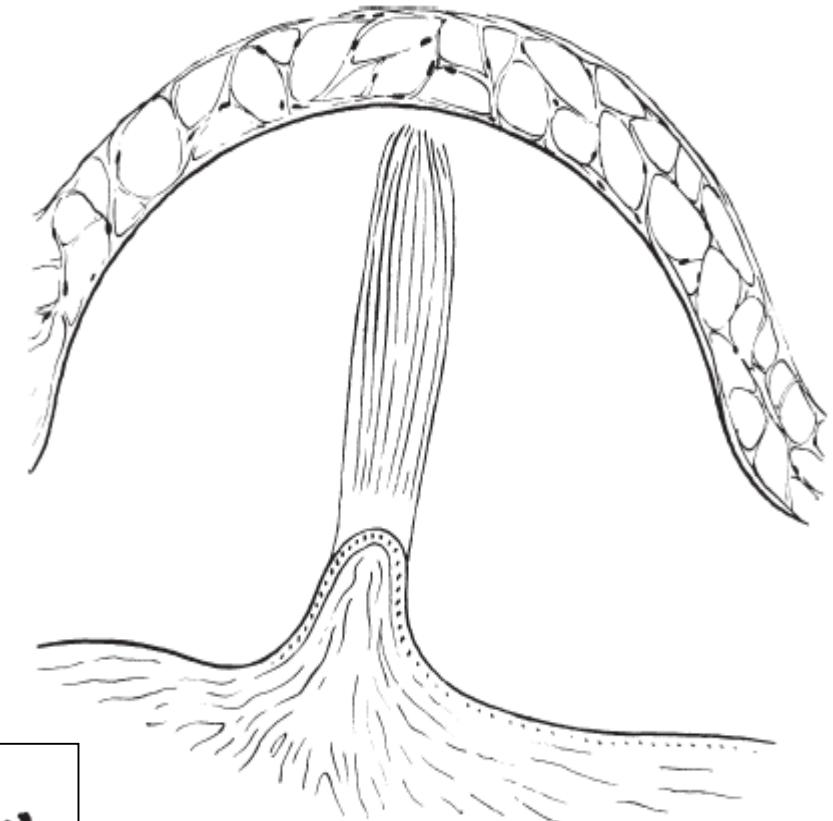
utriculus

sacculus

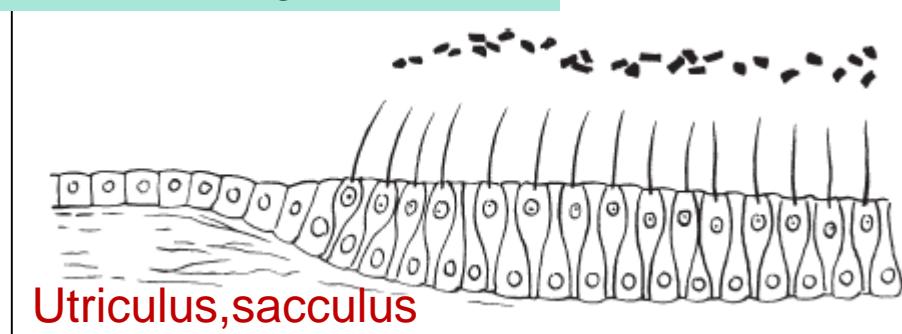
ductus semicirculares

ductus cochlearis

Irritation at the beginning and the end of movement



Irritation during movement



Utriculus,sacculus

Semicircular canal

Auris interna

labyrinthus osseus

cochlea

vestibulum

canales semicirculares

labyrinthus membranaceus

utriculus

sacculus

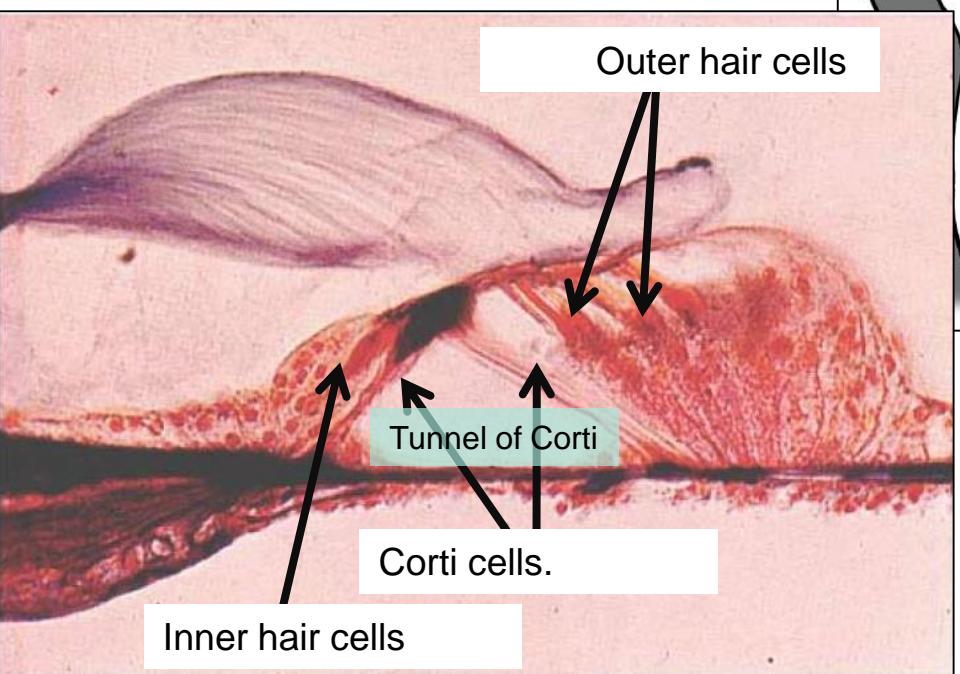
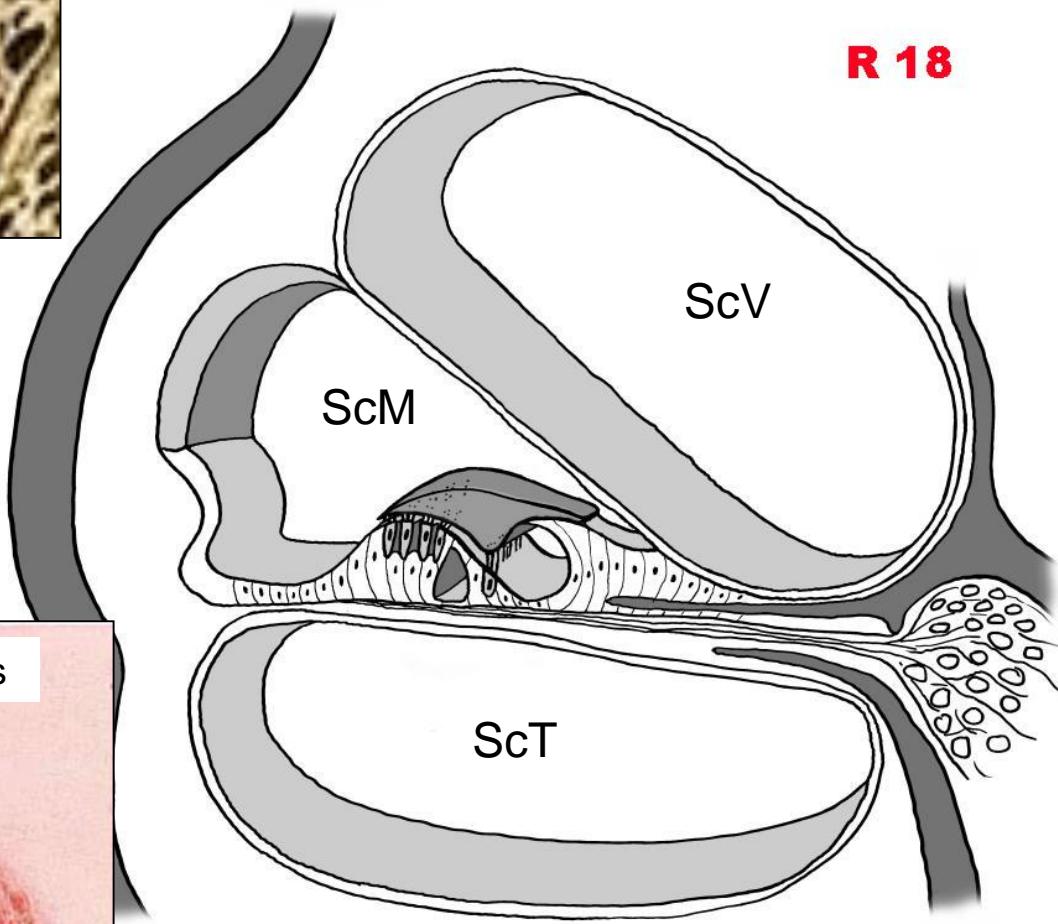
ductus semicirculares

ductus cochlearis



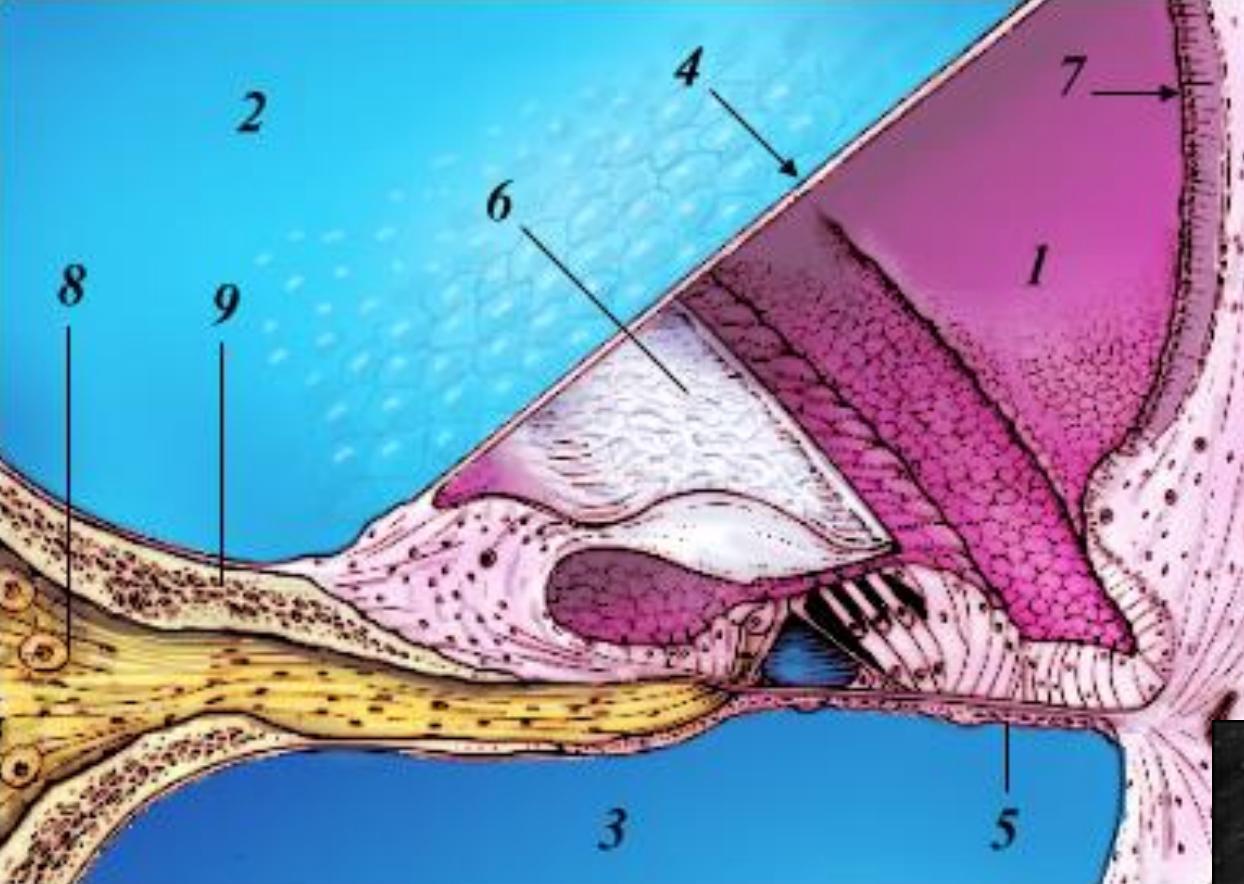
Ductus cochlearis

R 18

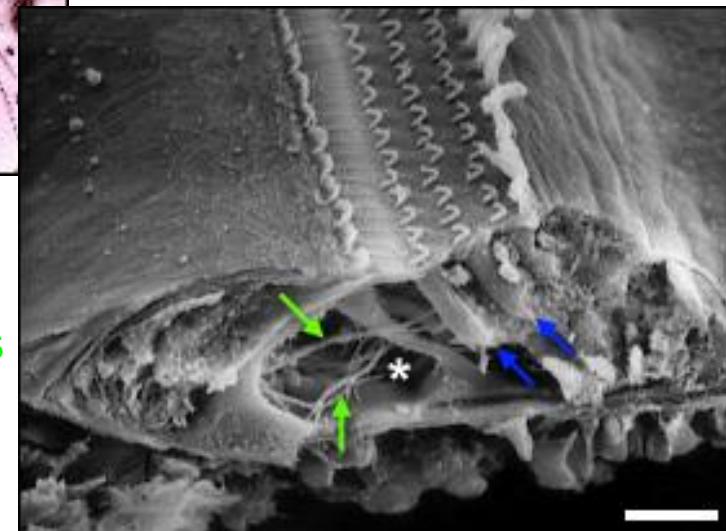


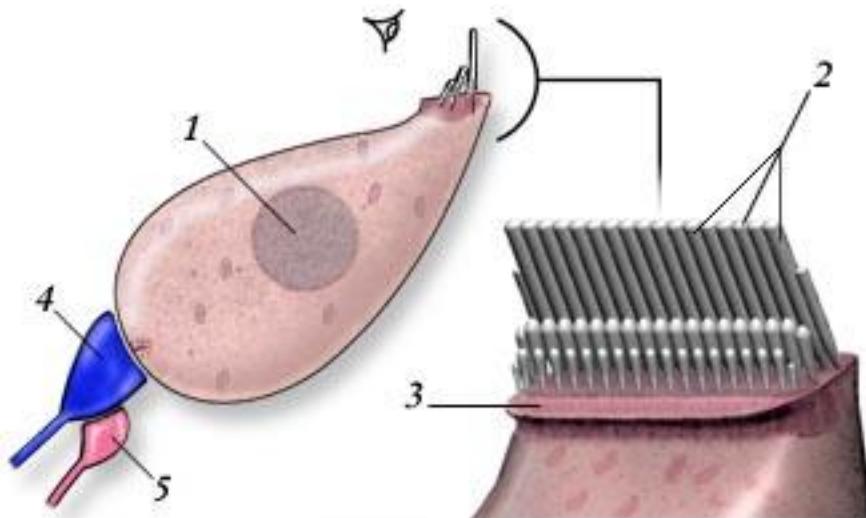
ScV, ScT – perilymph
ScM – endolymph

Cochlear section



- 1 - ductus cochlearis 5 - membrana basilaris
2 - scala vestibuli 6 - membrana tectoria
3 - scala tympani 7 - stria vascularis
4 - membrana vestibularis (Reissneri) 8 - ganglion spirale cochleae
9 - lamina spiralis ossea





Inner hair cell

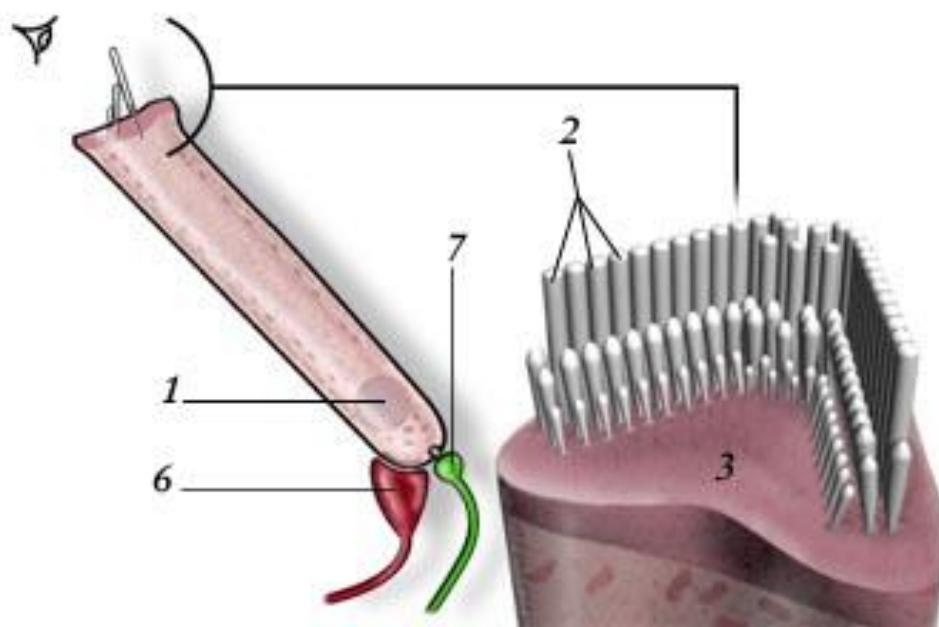
Afferent axon

Efferent axon

3 500

1 row

Contact with bipolar cells



Outer hair cell

Efferent axon

Afferent axon

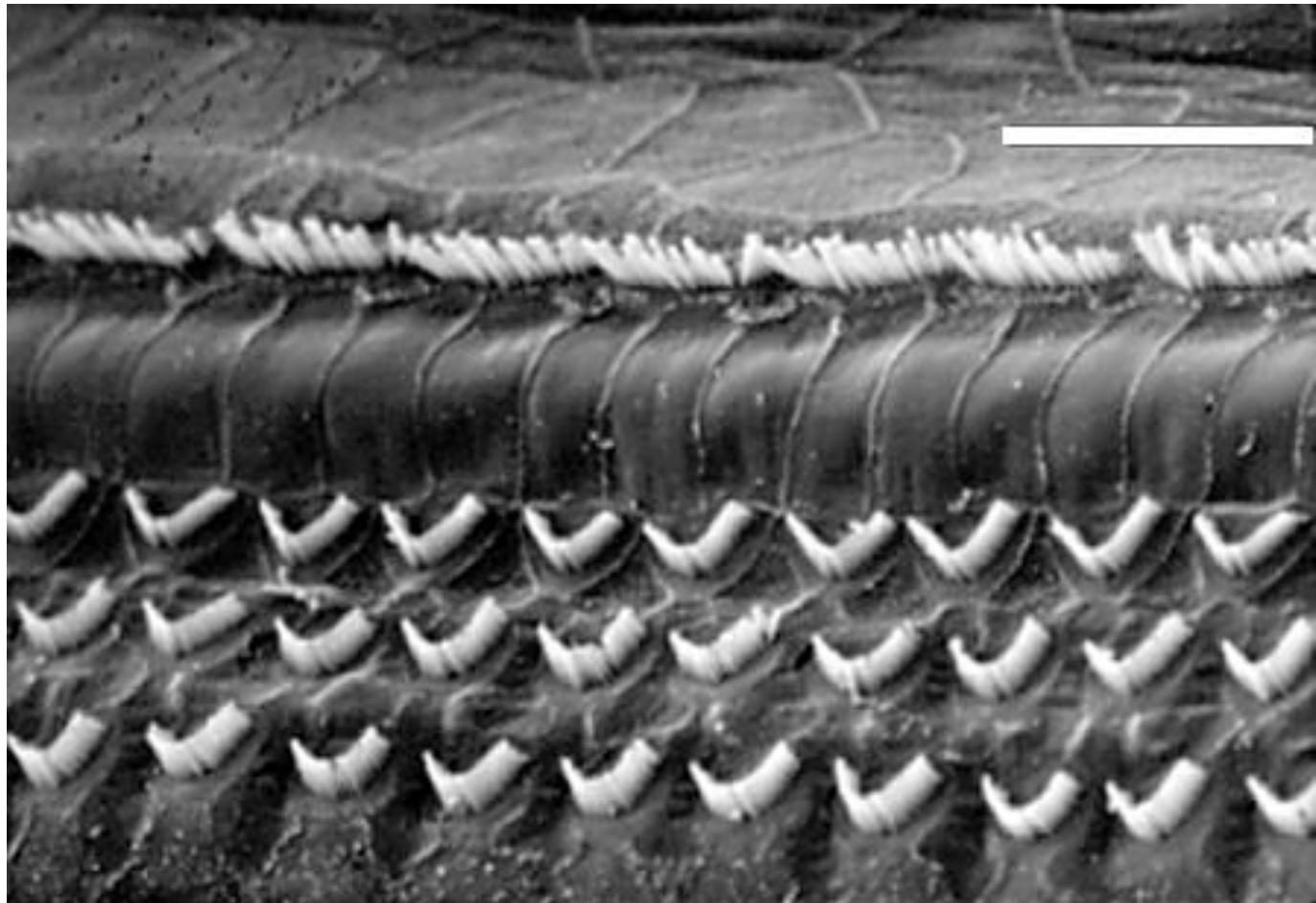
15 000

3-4 rows

Contact with unipolar cells

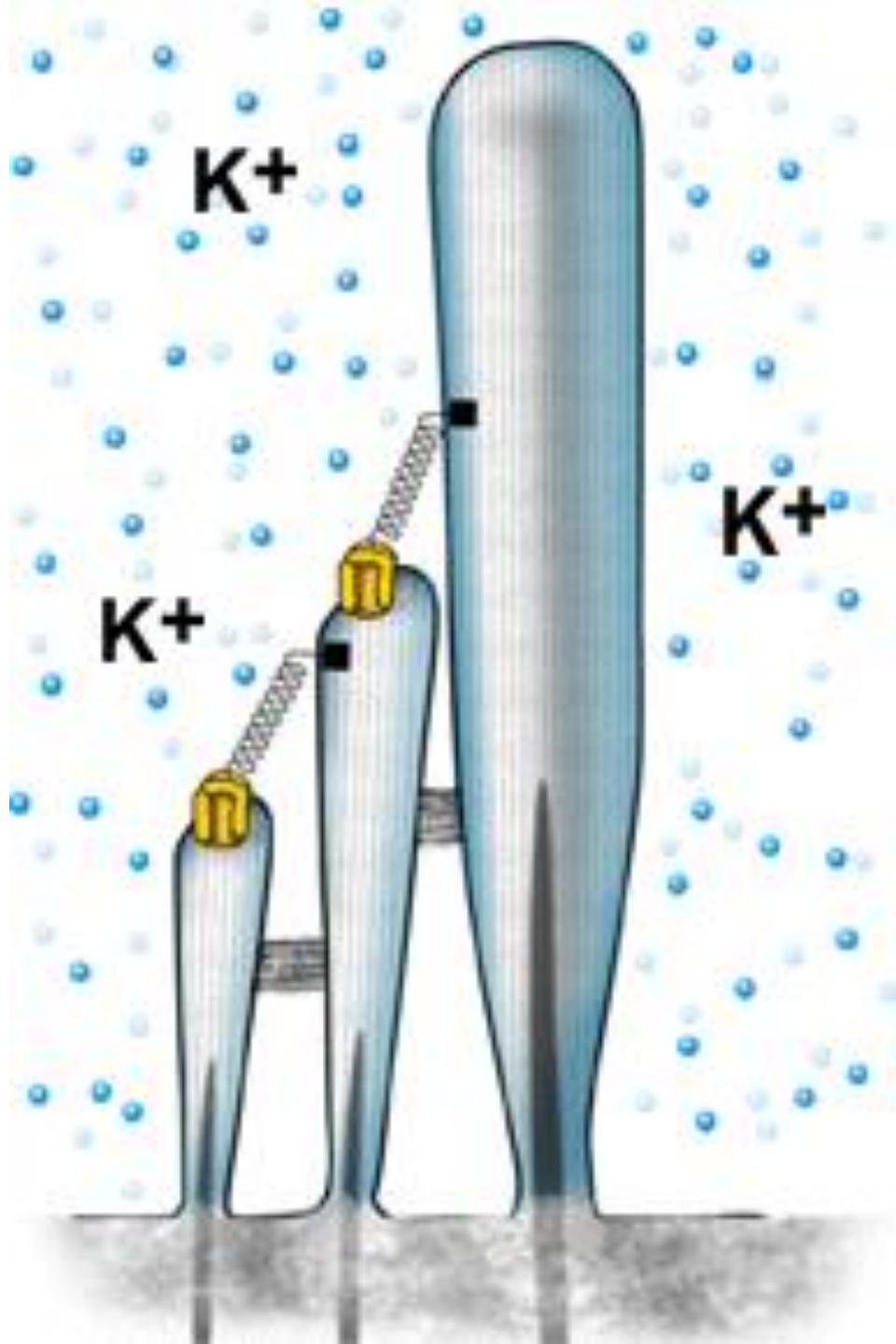
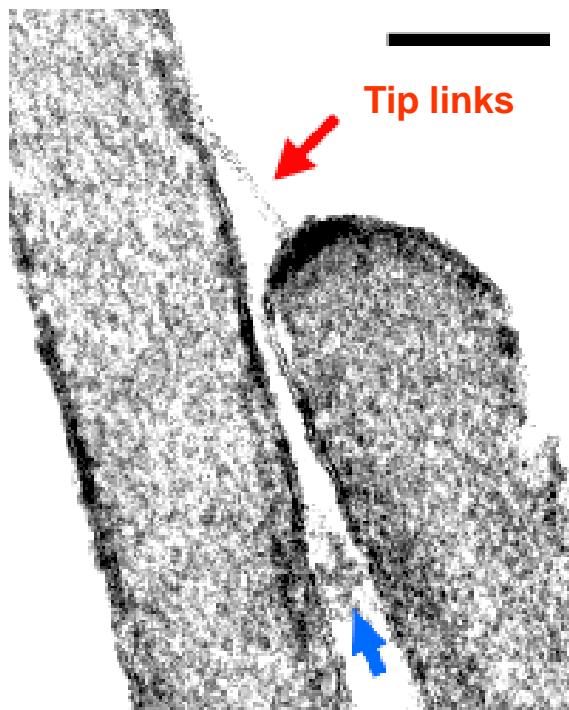
Electron microscopy

Inner

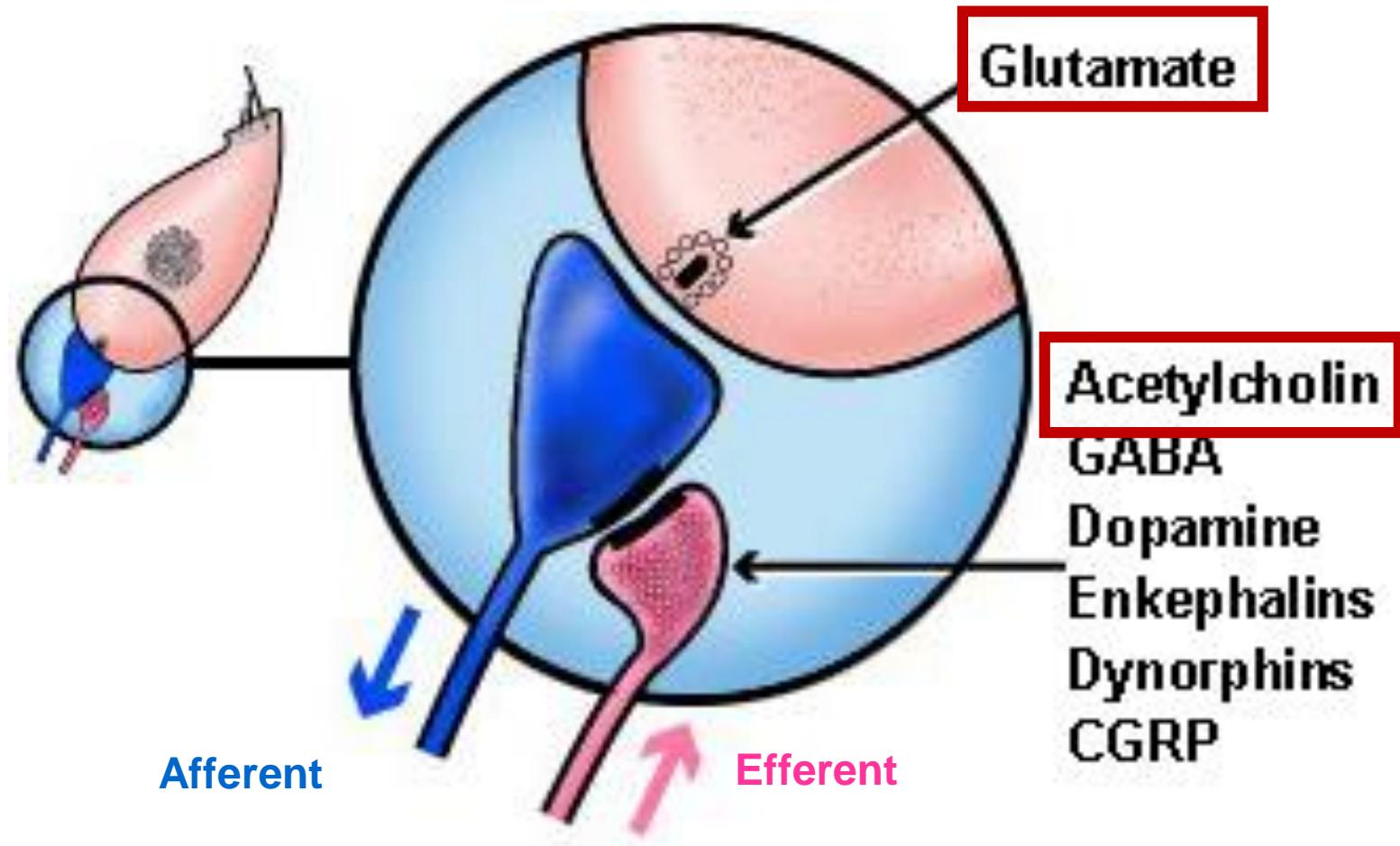


Outer

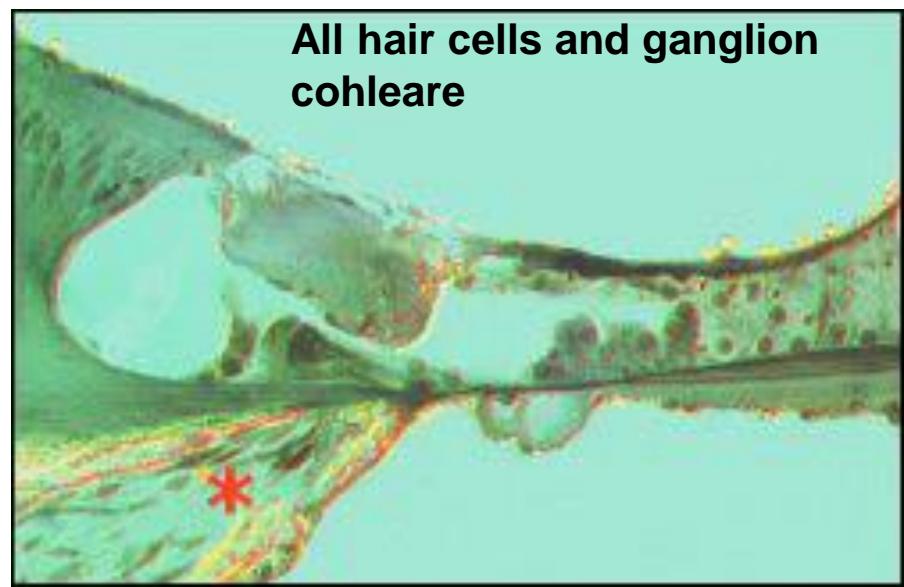
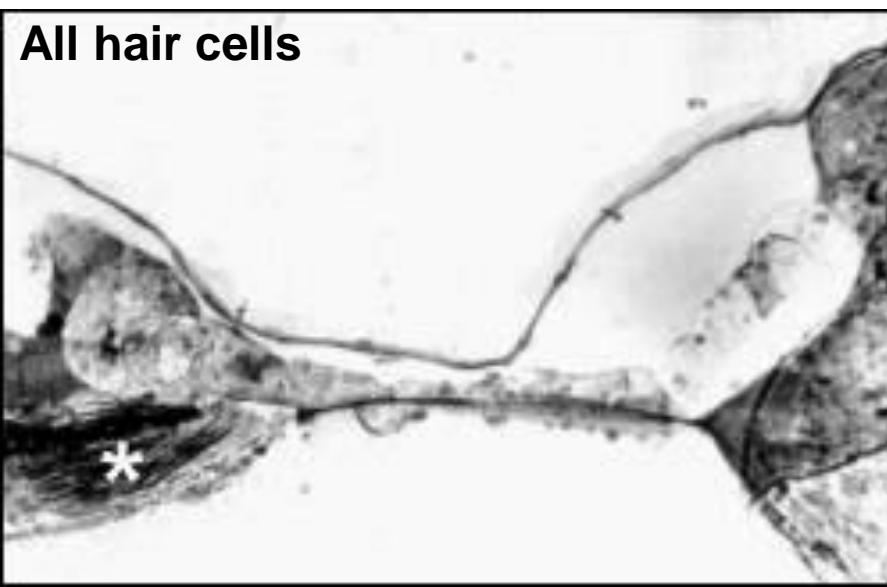
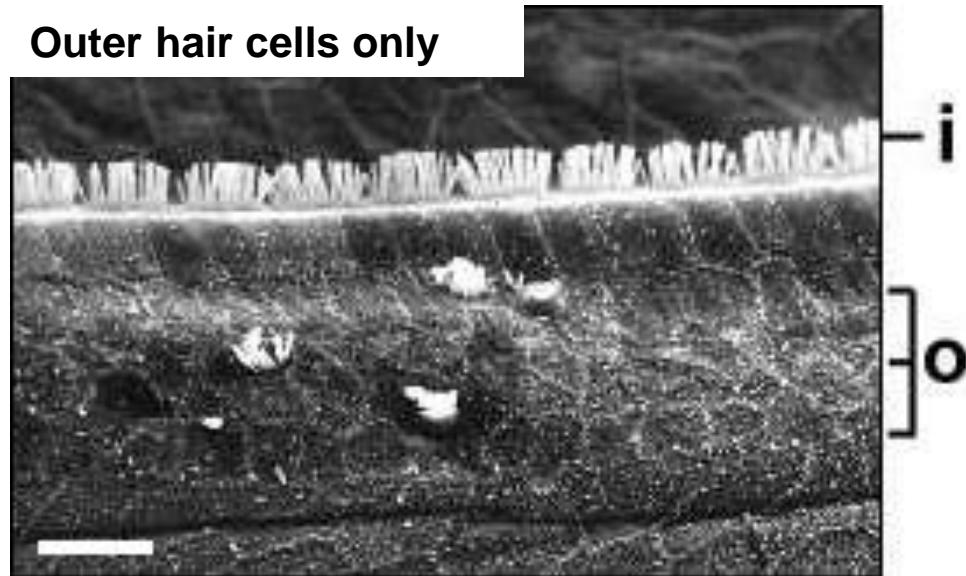
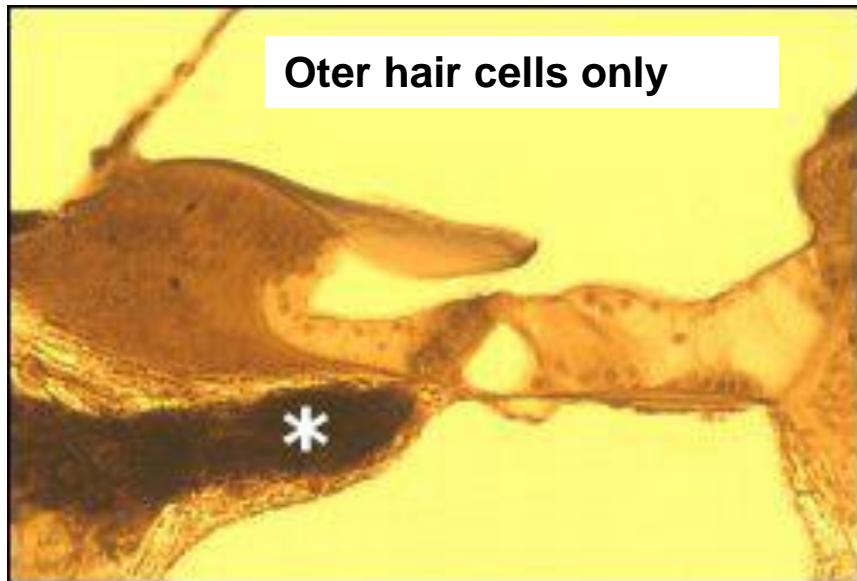
Mechanolectric transduction



Hair cells mediators

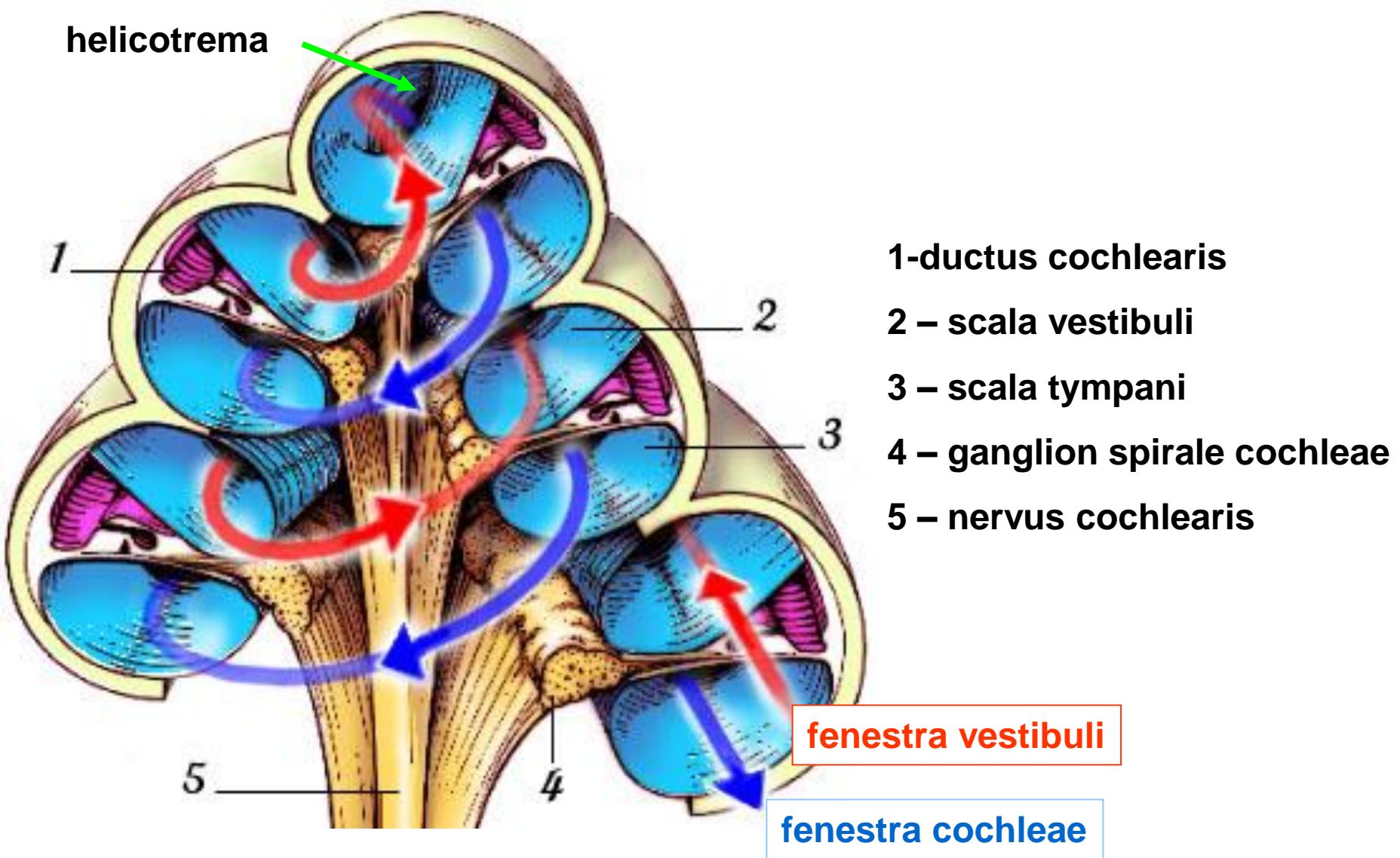


Organ of Corti damage

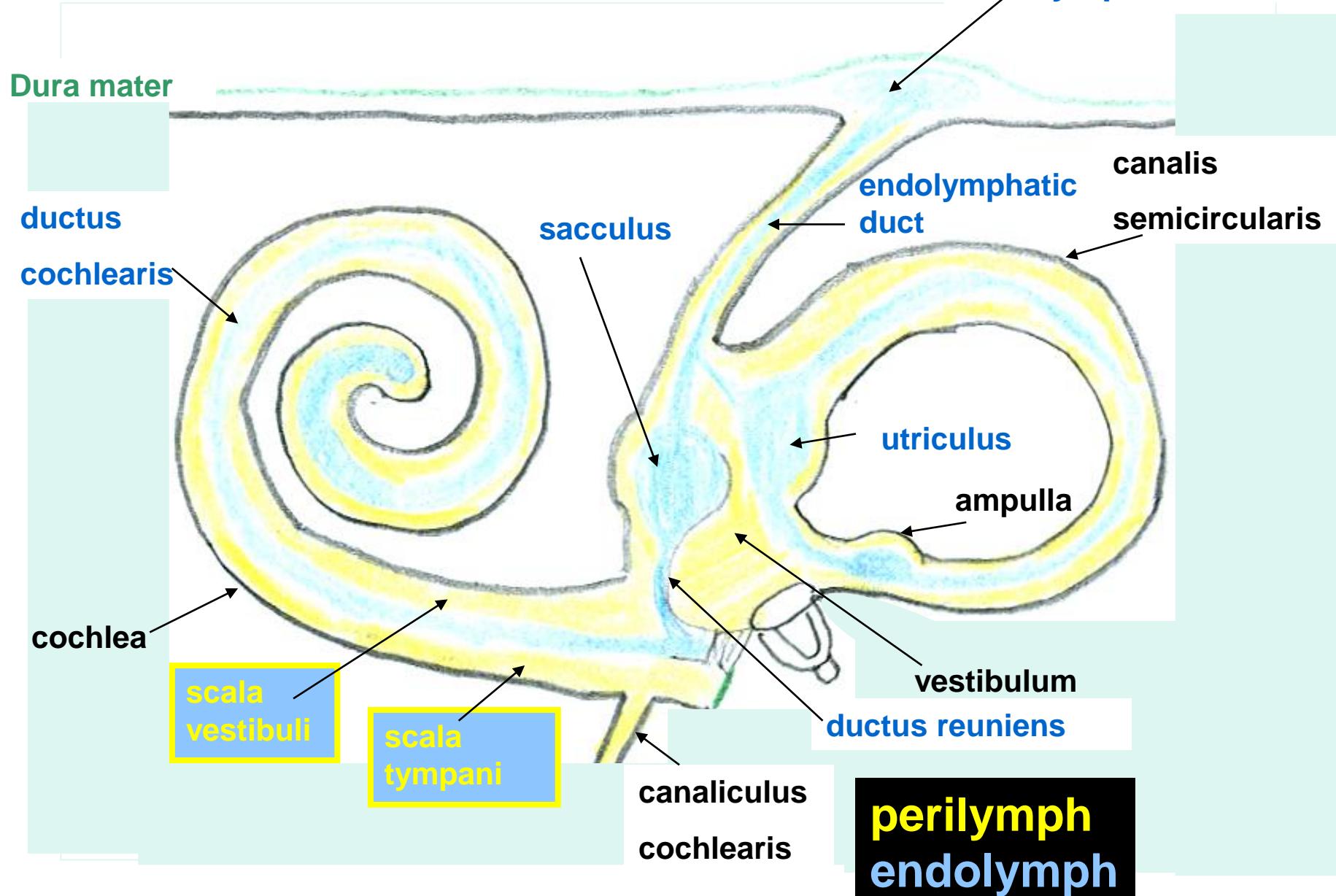


Cochlea

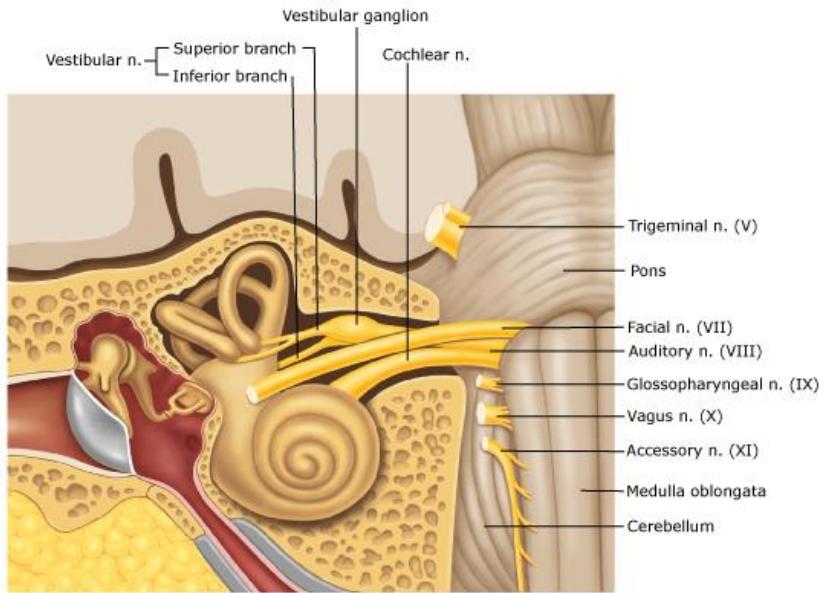
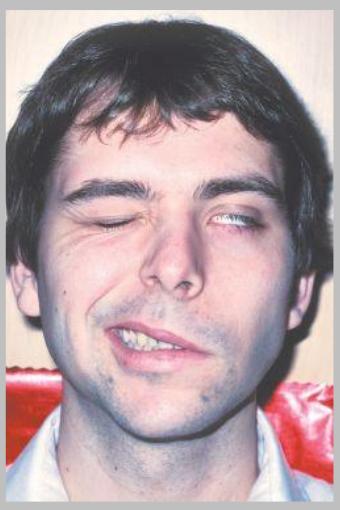
perilymph movement



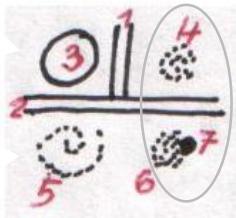
Inner ear



Meatus acusticus internus

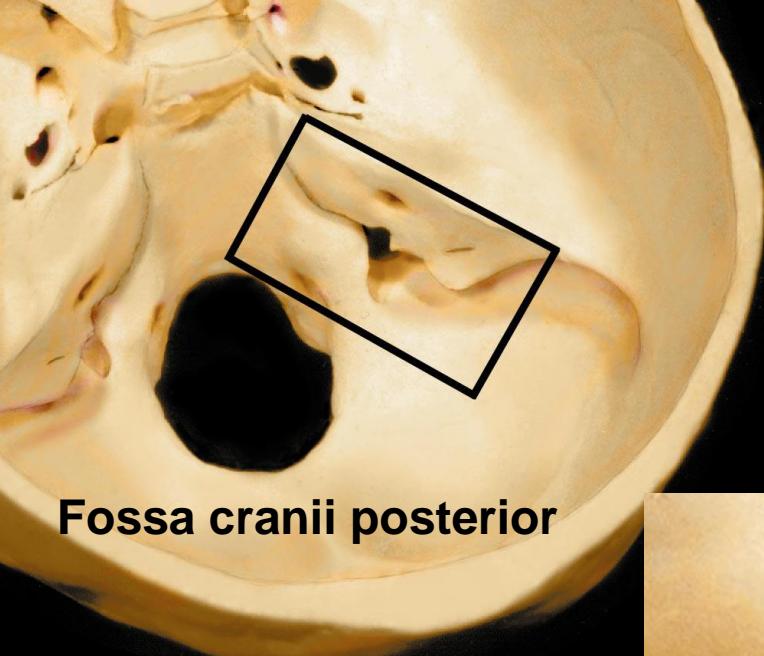


FUNDUS MEATUS ACUSTICI INTERNI (dx.)



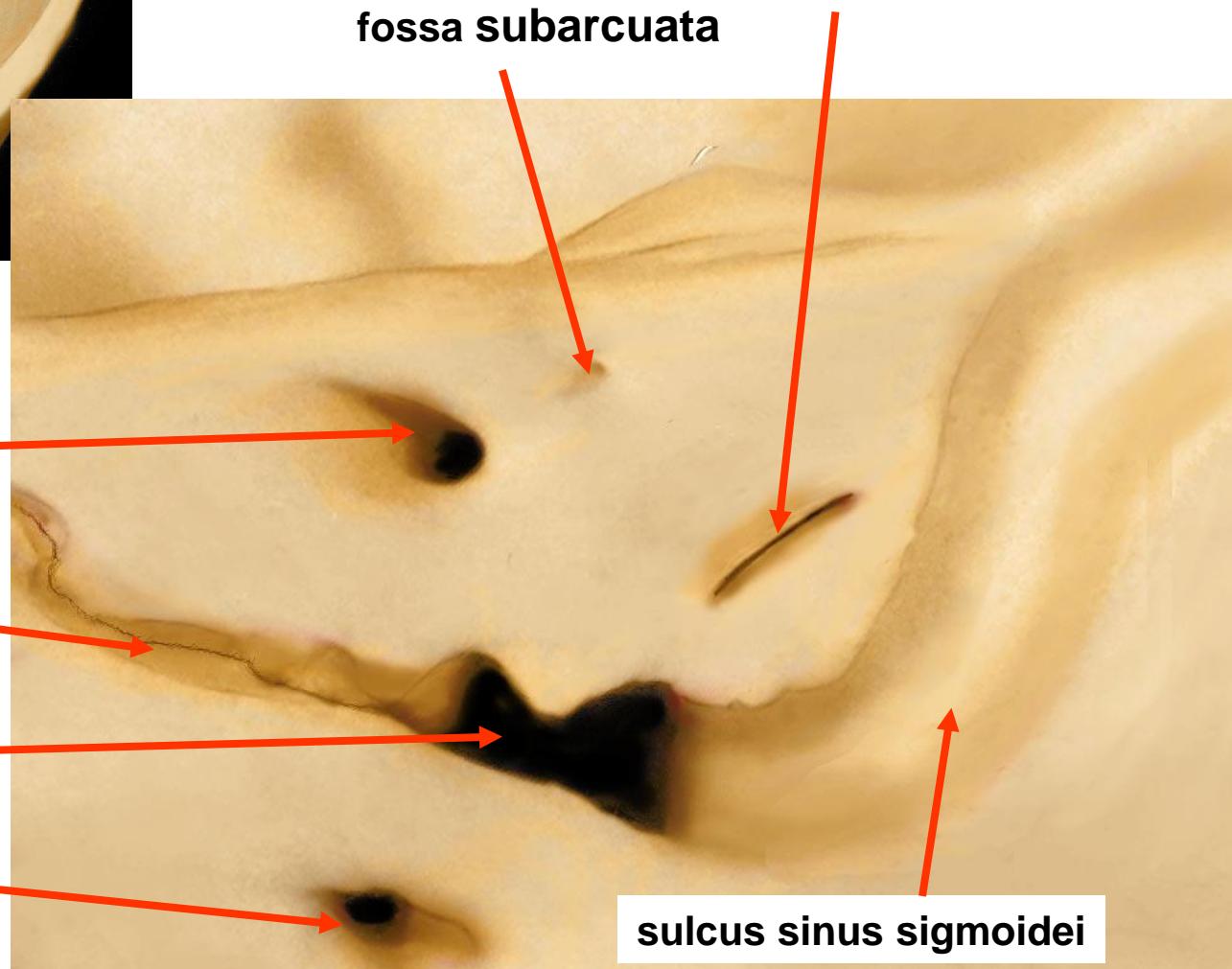
- 1 - crista verticalis
- 2 - crista transversa
- 3 - area n. facialis
- 4 - area vestibularis sup.: n. utriculoampullaris (n. vestibularis sup.)
- 5 - area cochleae: n. cochlearis (tractus spiralis foraminosus)
- 6 - area vestibularis inf.: n. saccularis (n. vestibularis inf.)
- 7 - foramen singulare: n. ampullaris post.



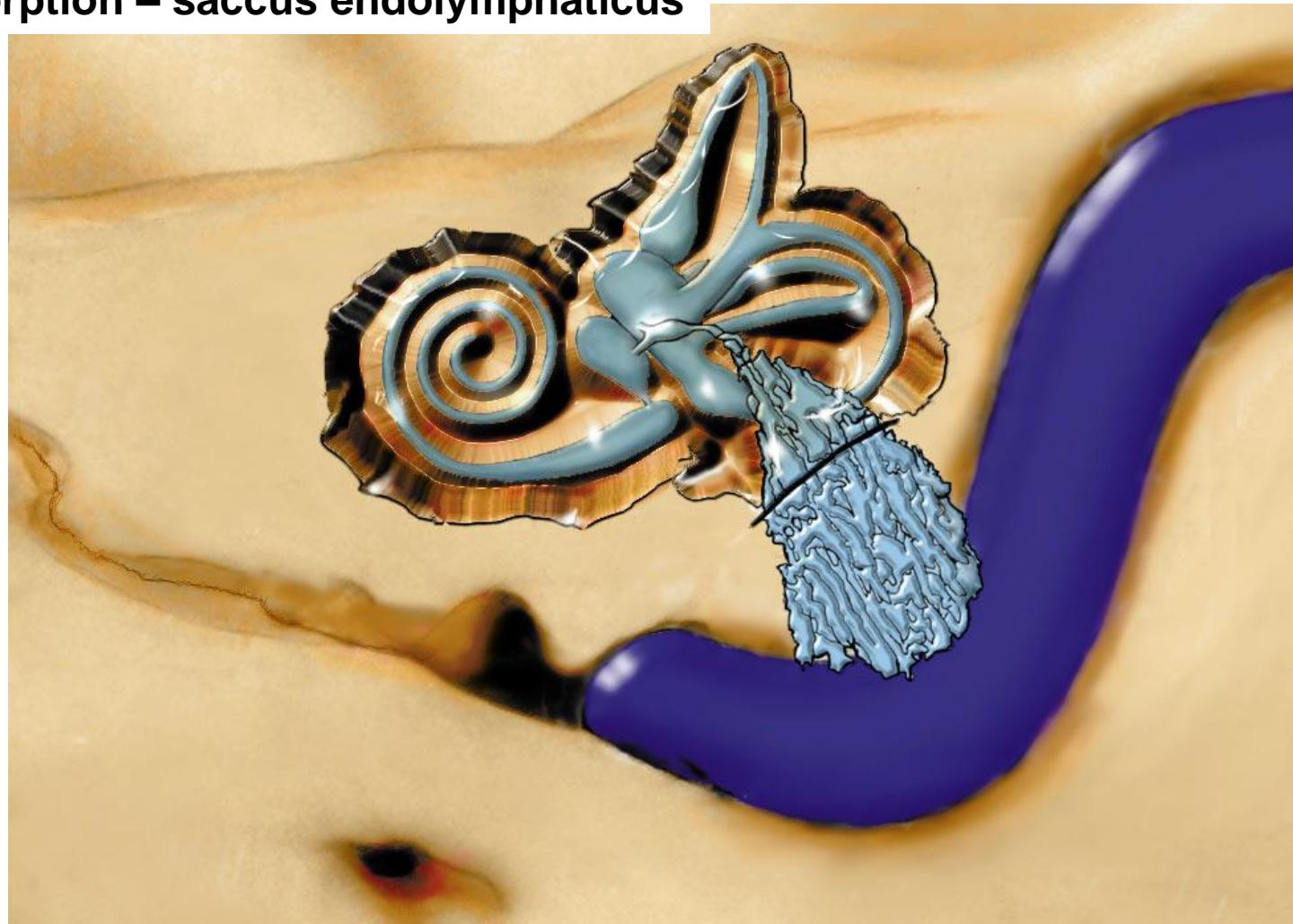


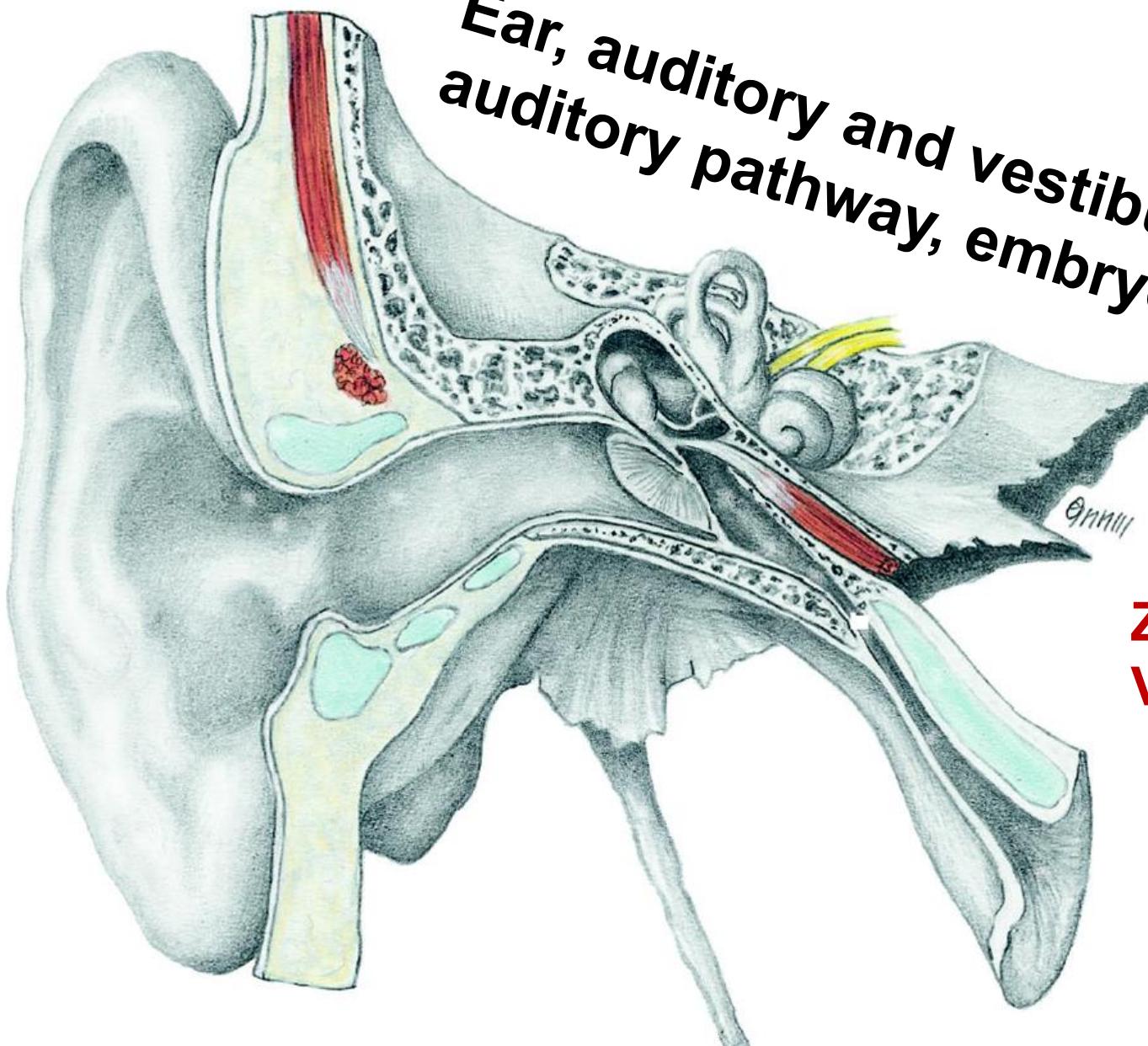
Posterior surface of the pyramid

apertura externa
aquaeductus vestibuli
fossa subarcuata



Endolymph:
production - stria vascularis
Resorption – saccus endolympaticus



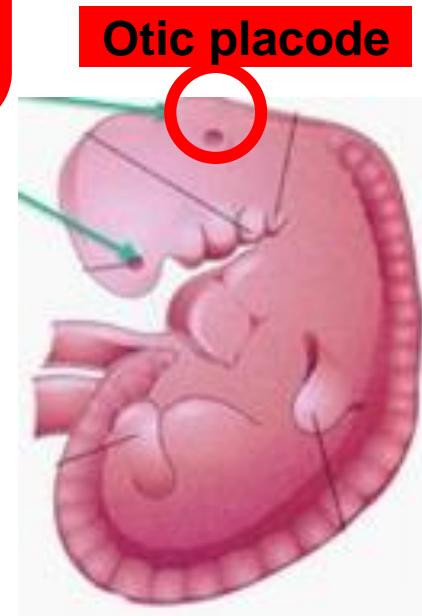
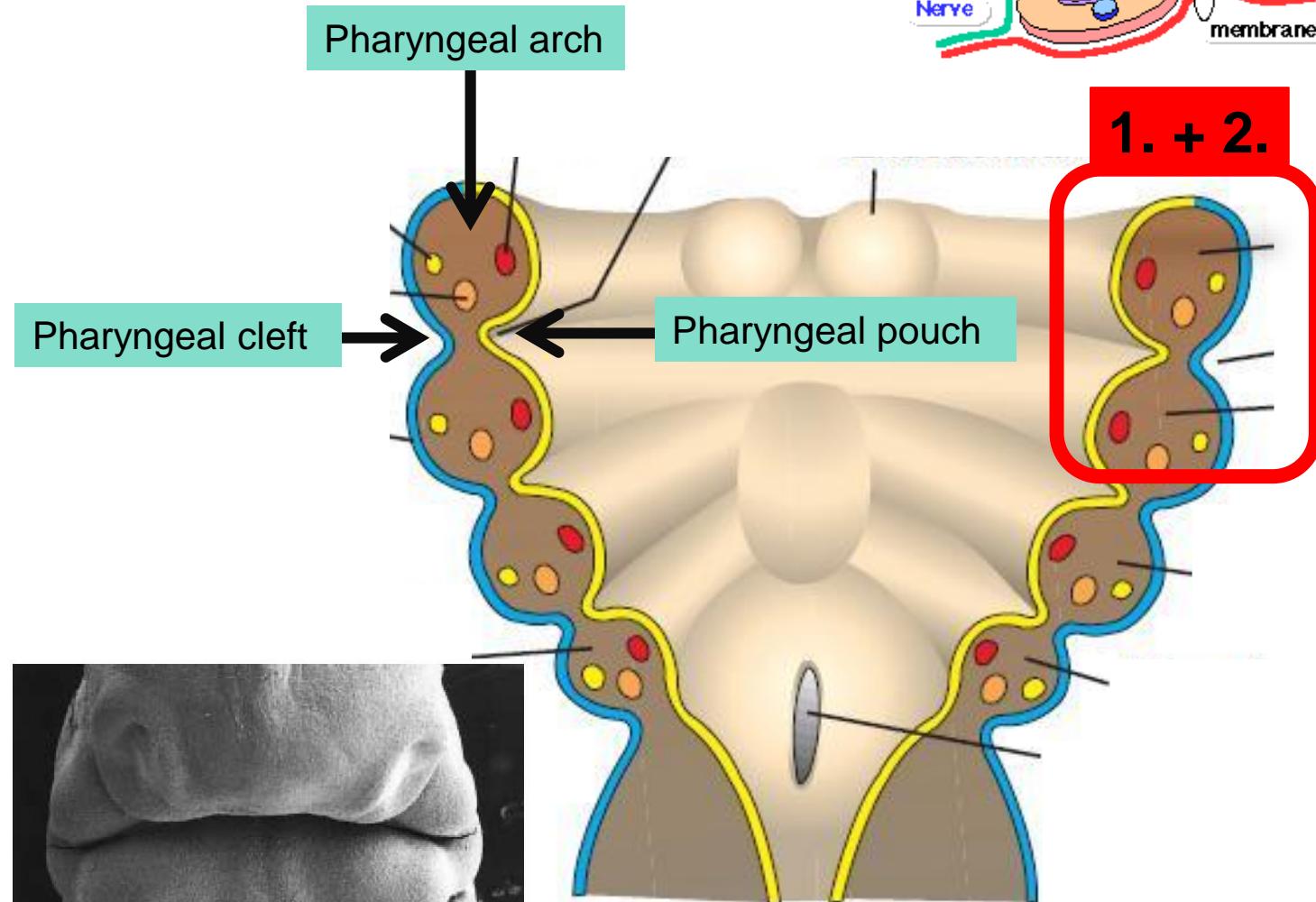
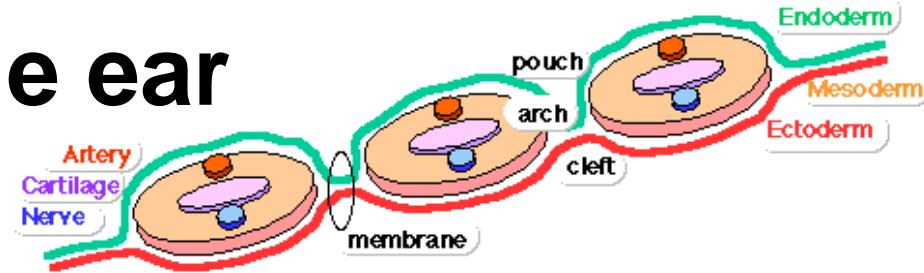


*Ear, auditory and vestibular system,
auditory pathway, embryology*

**Zdeněk Fík
Veronika Němcová**

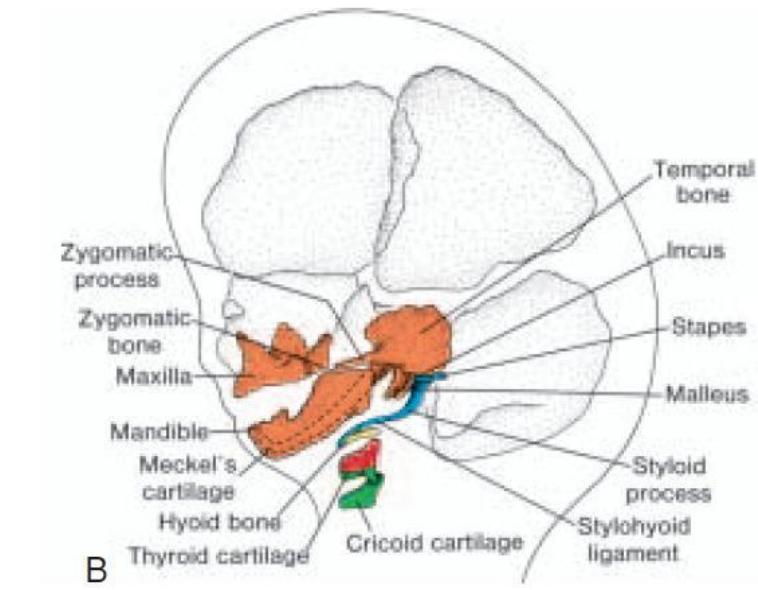
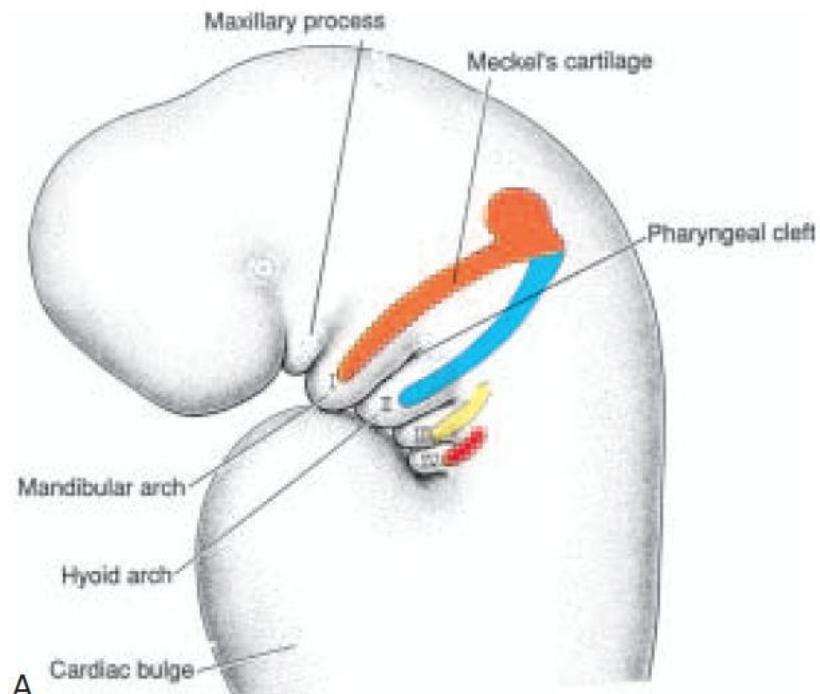
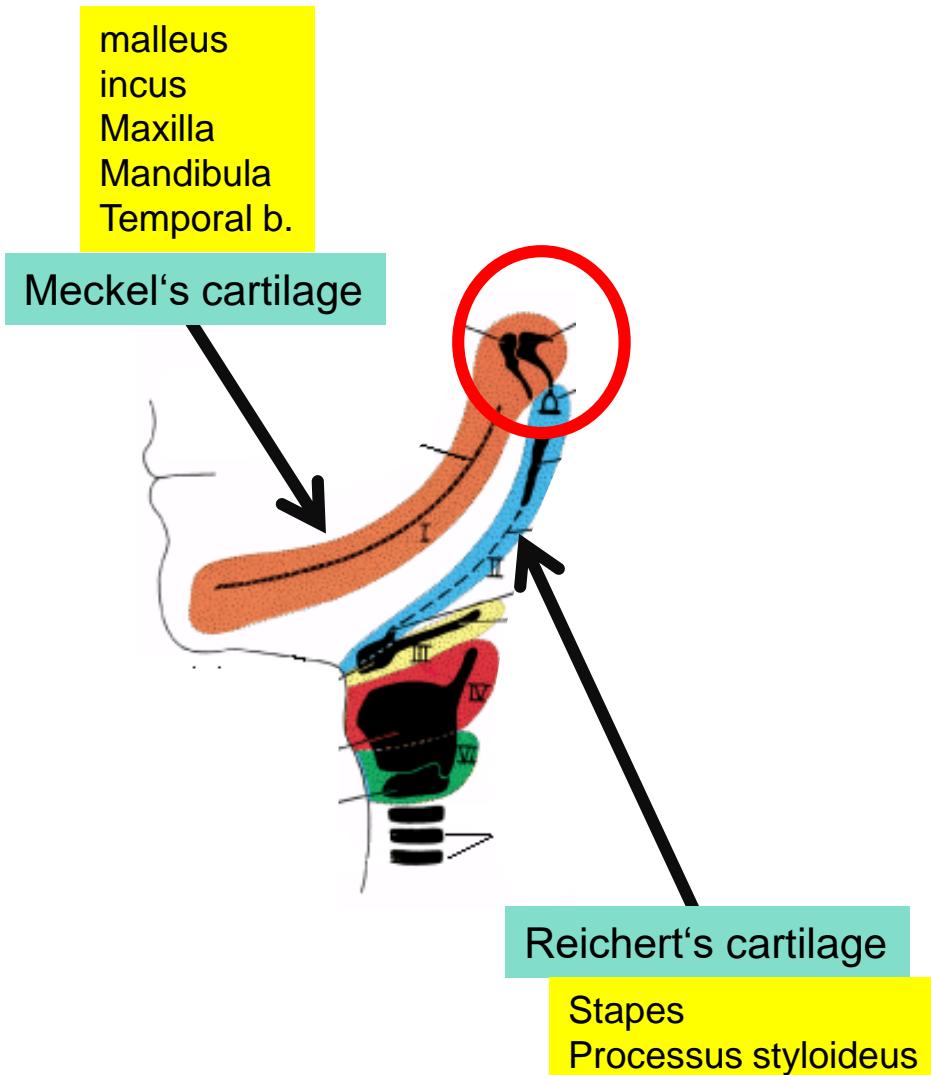
Embryology

External + middle ear

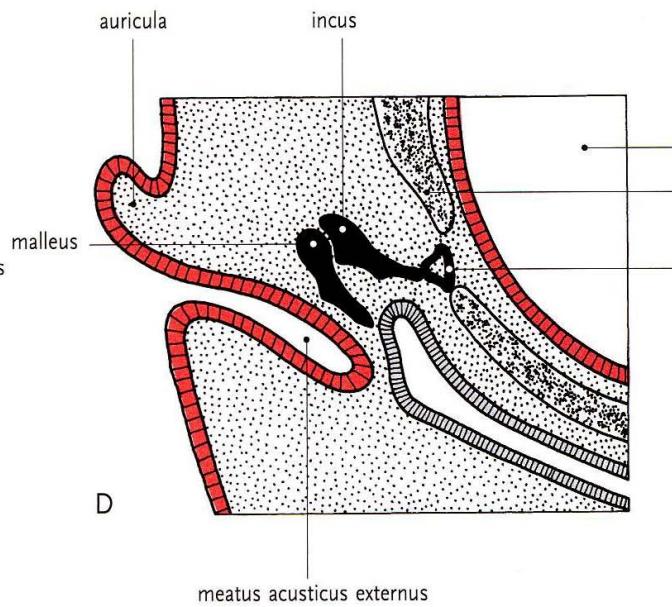
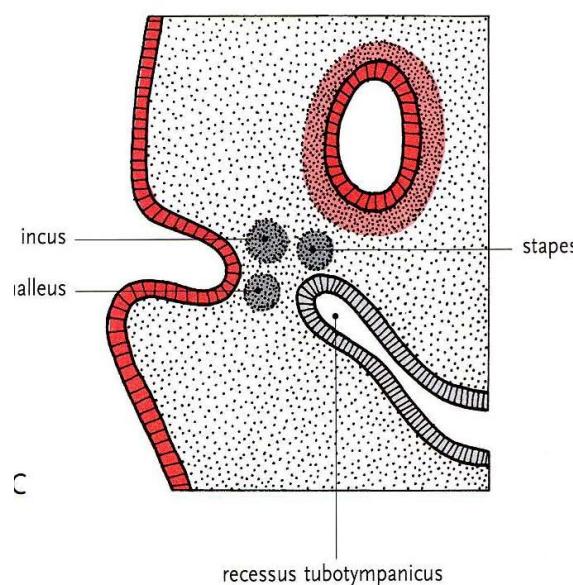


Sadler TW, Langman's Medical Embryology 10th Edition,
Lippincott Williams and Wilkins, Baltimore MD, 2006

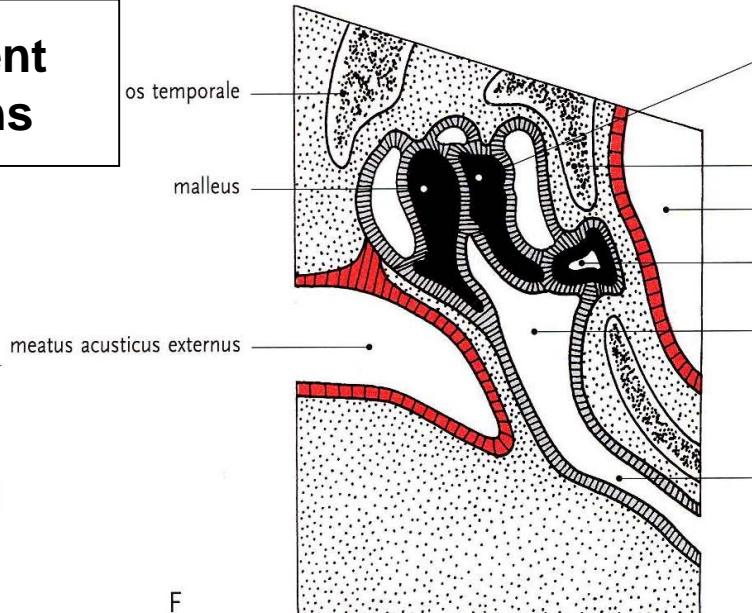
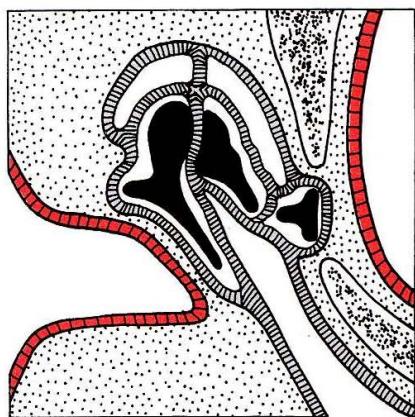
External + middle ear



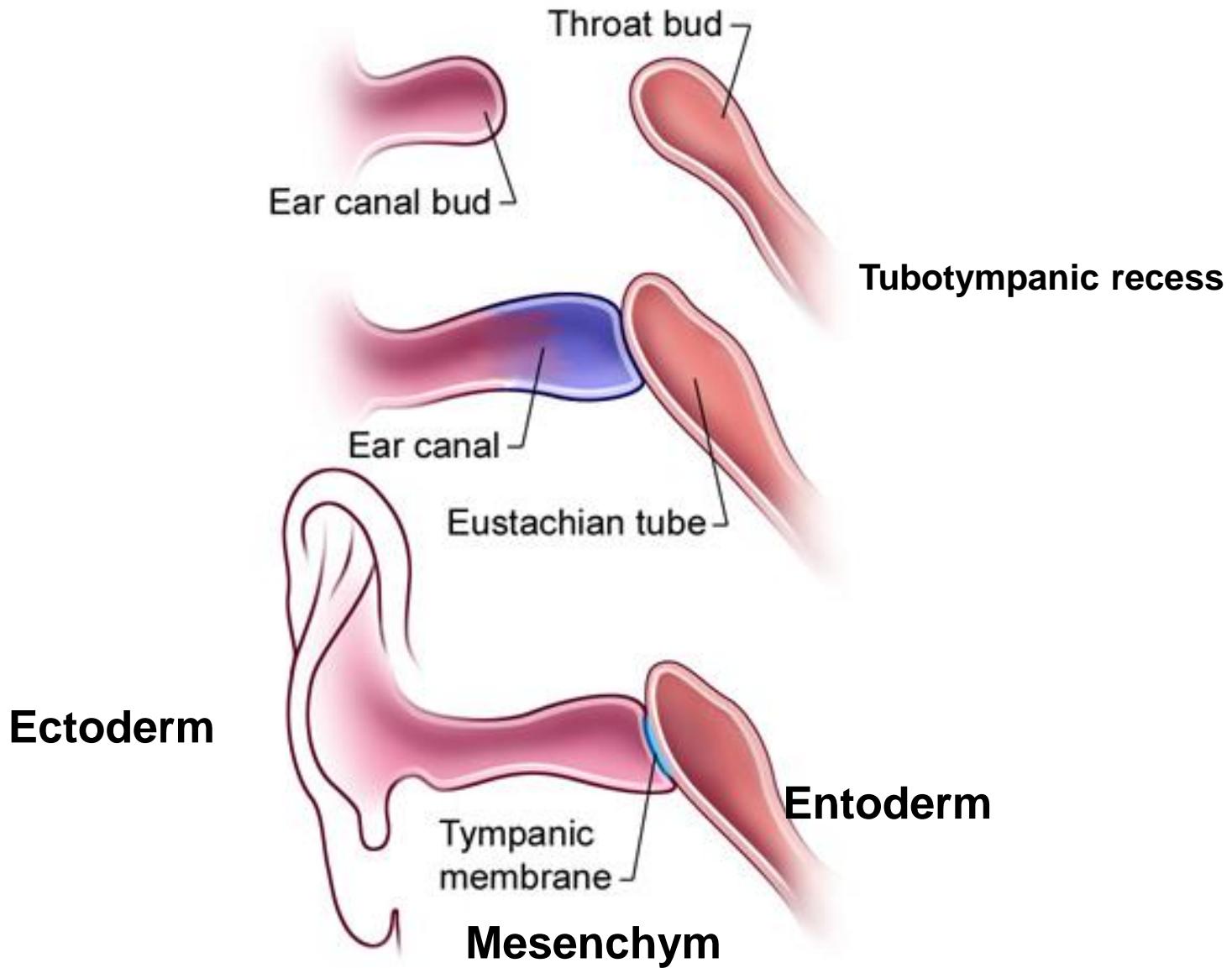
- Pinna**—hillocks of 1. and 2. branchial arch
- External ear canal**
ectoderm of the 1. branchial pit
- Drum**— 3 layers ectoderm, mesenchym, entoderm
- Cavum tympani, and tuba Eustachi** – from the 1. pharyngeal pouch - recessus tubotympanicus, entodermal epithelium
- Ossicles**— from the mesenchym of the 1. (malleus, incus) a 2. (stapes) branchial arch (cartilago Meckeli et Reicherti)
- Inner ear** –from the otic placode (ektodermal plate), which deepens and pinches off from the surface and forms the otic vesicle (**otocyst**). The membranous labyrinth is developed from the otocyst with ectodermal epithelium inside



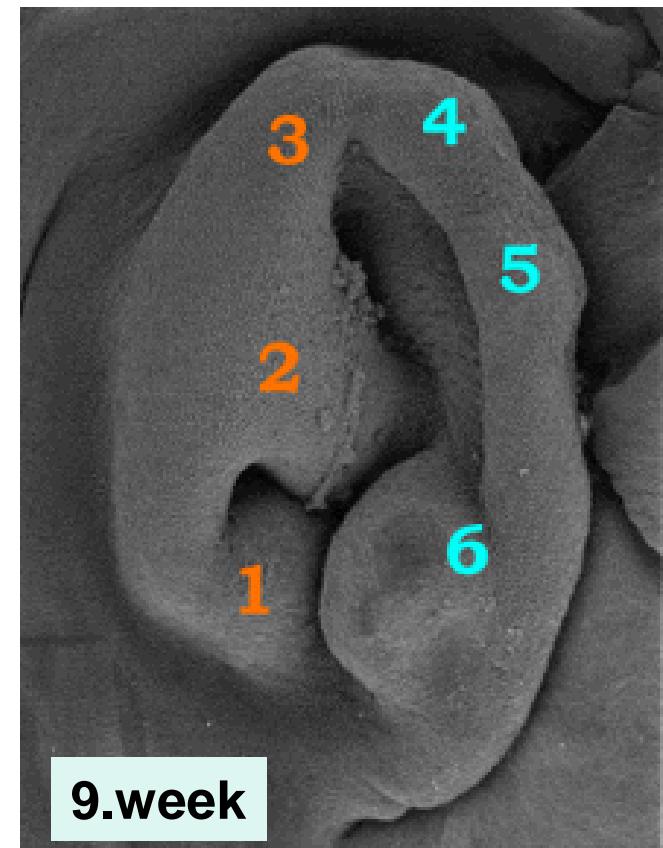
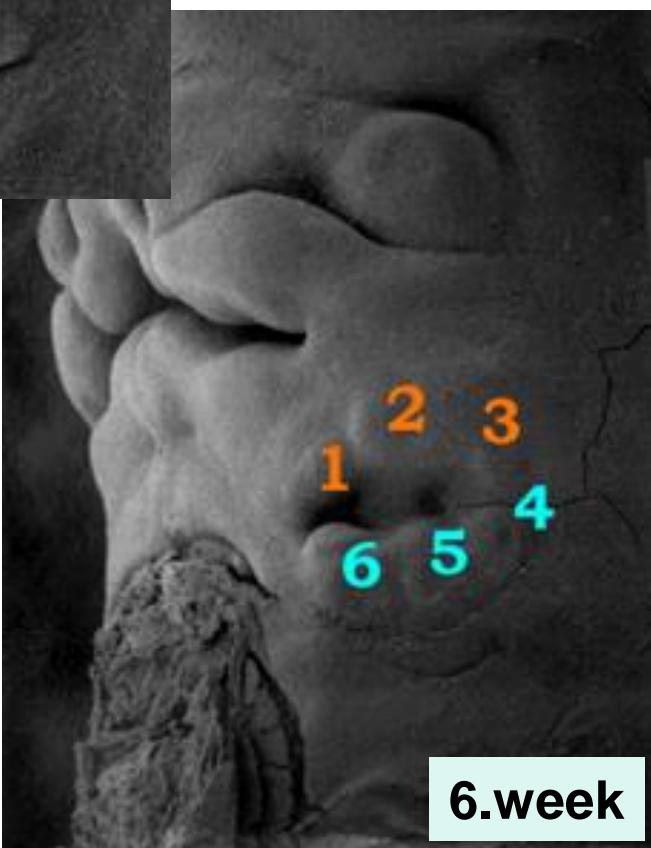
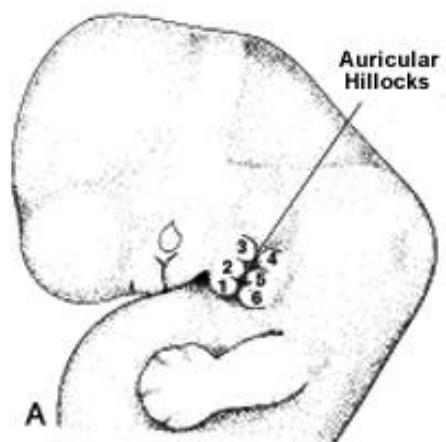
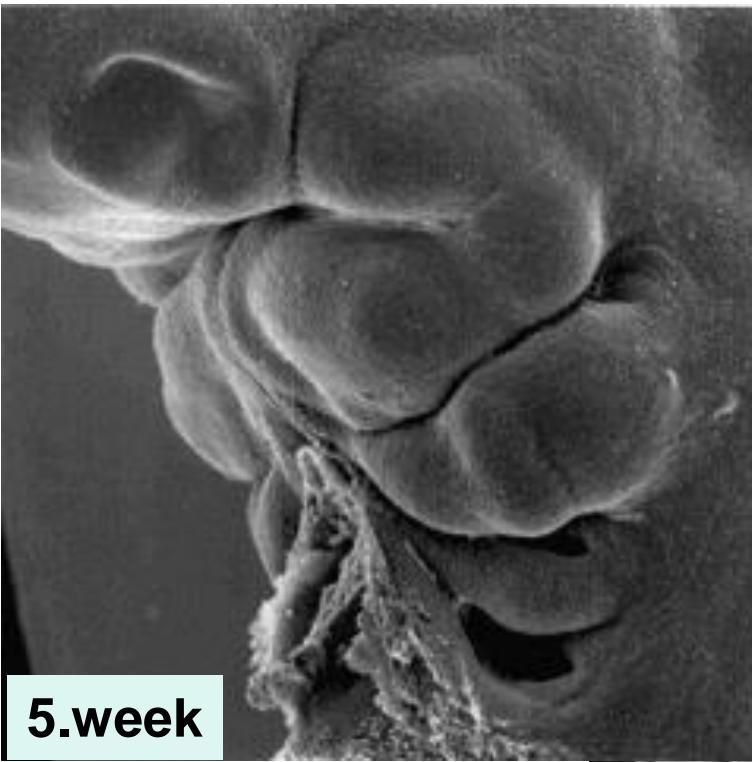
Ear development frontal sections



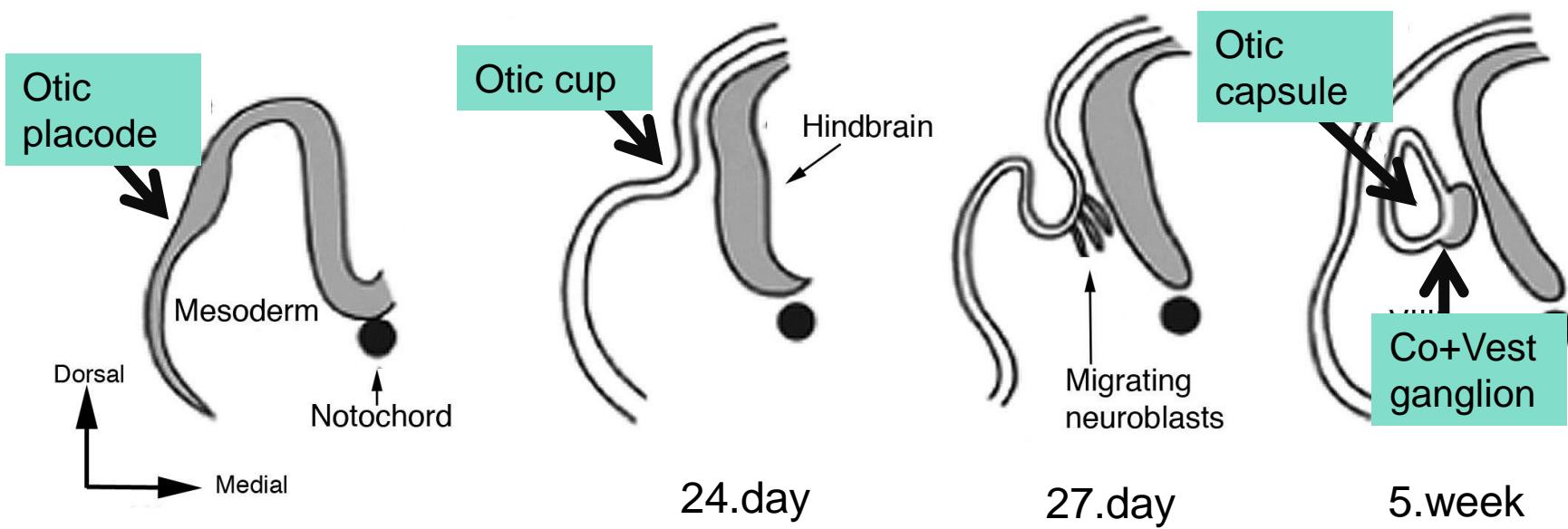
Outer and middle ear

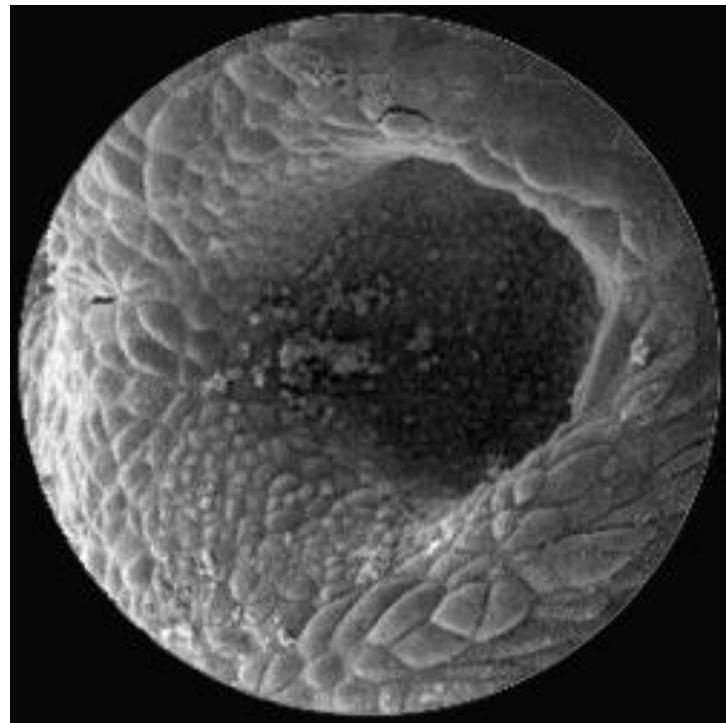
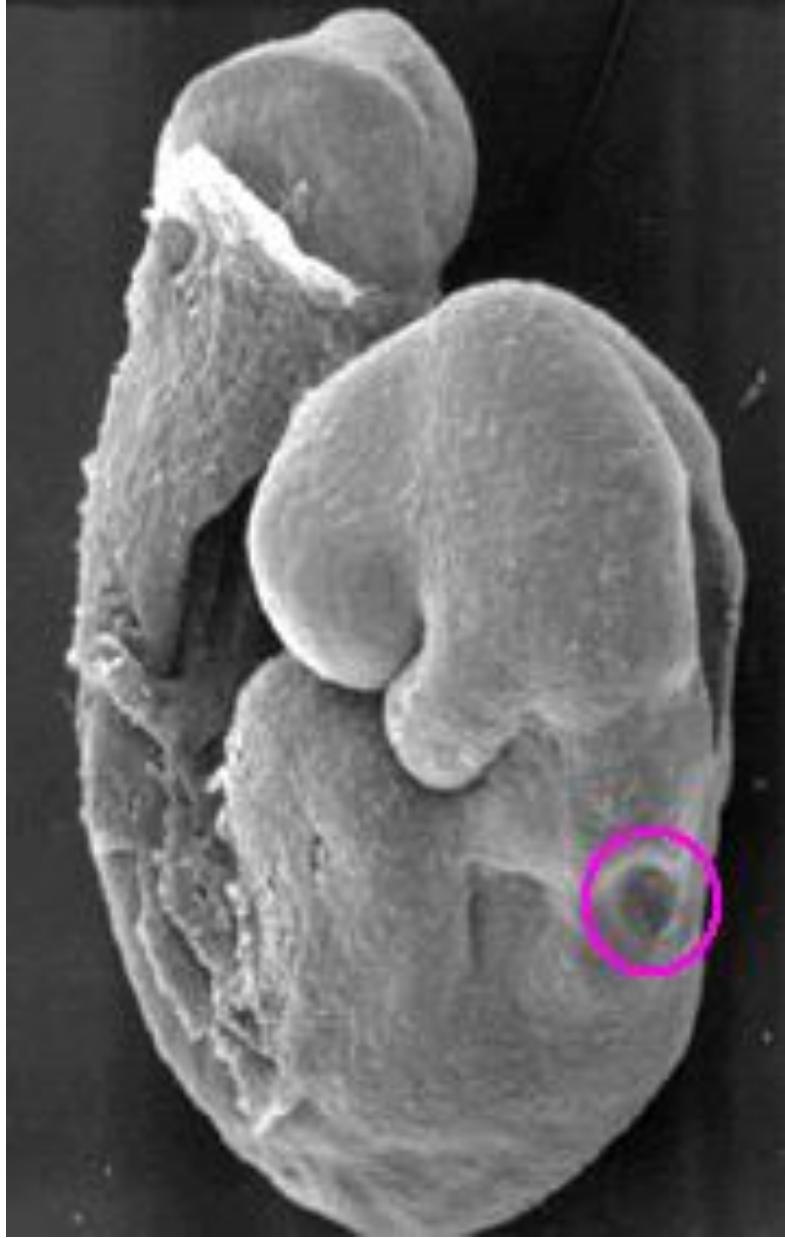


Pinna development



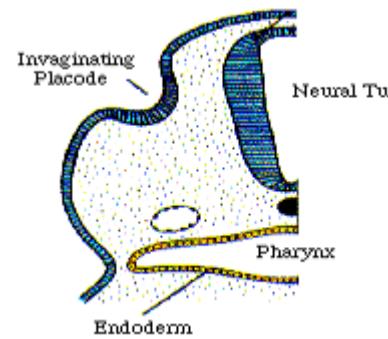
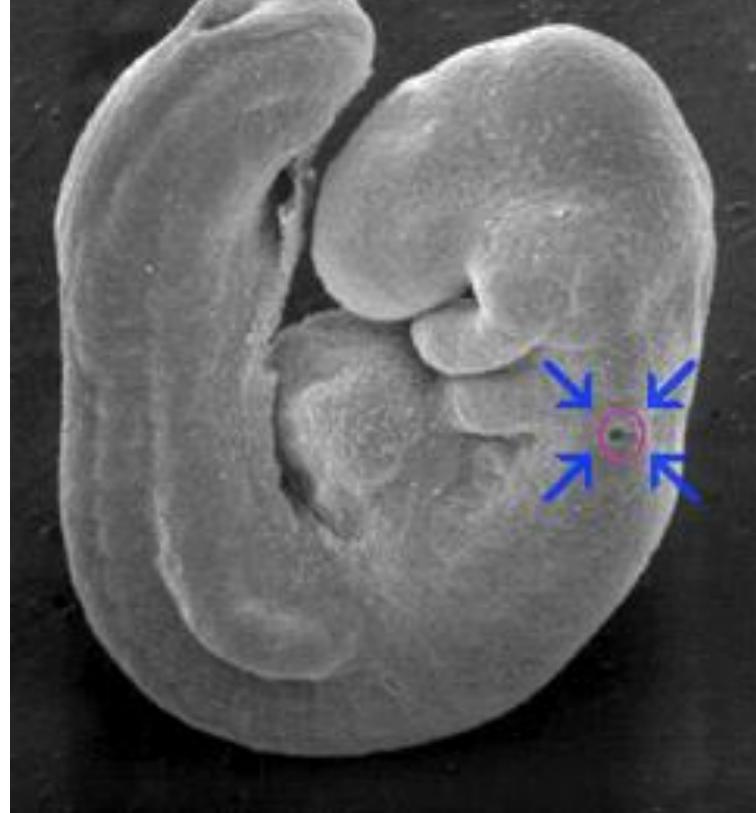
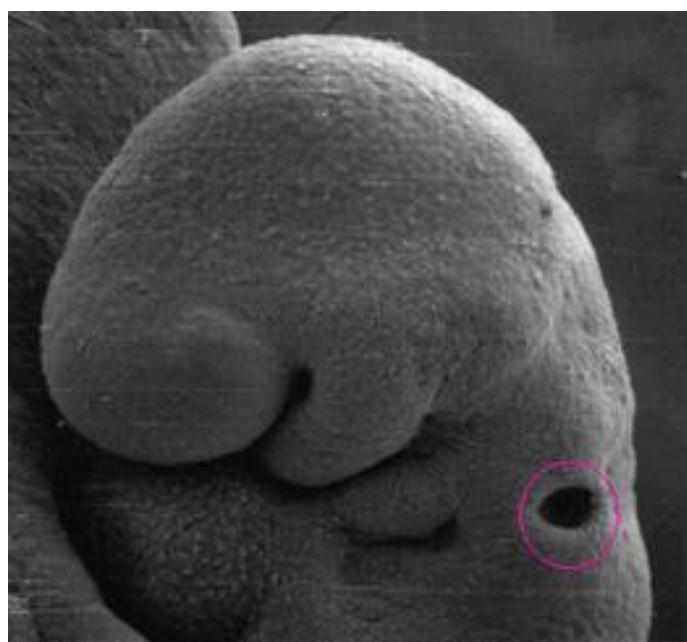
Inner ear





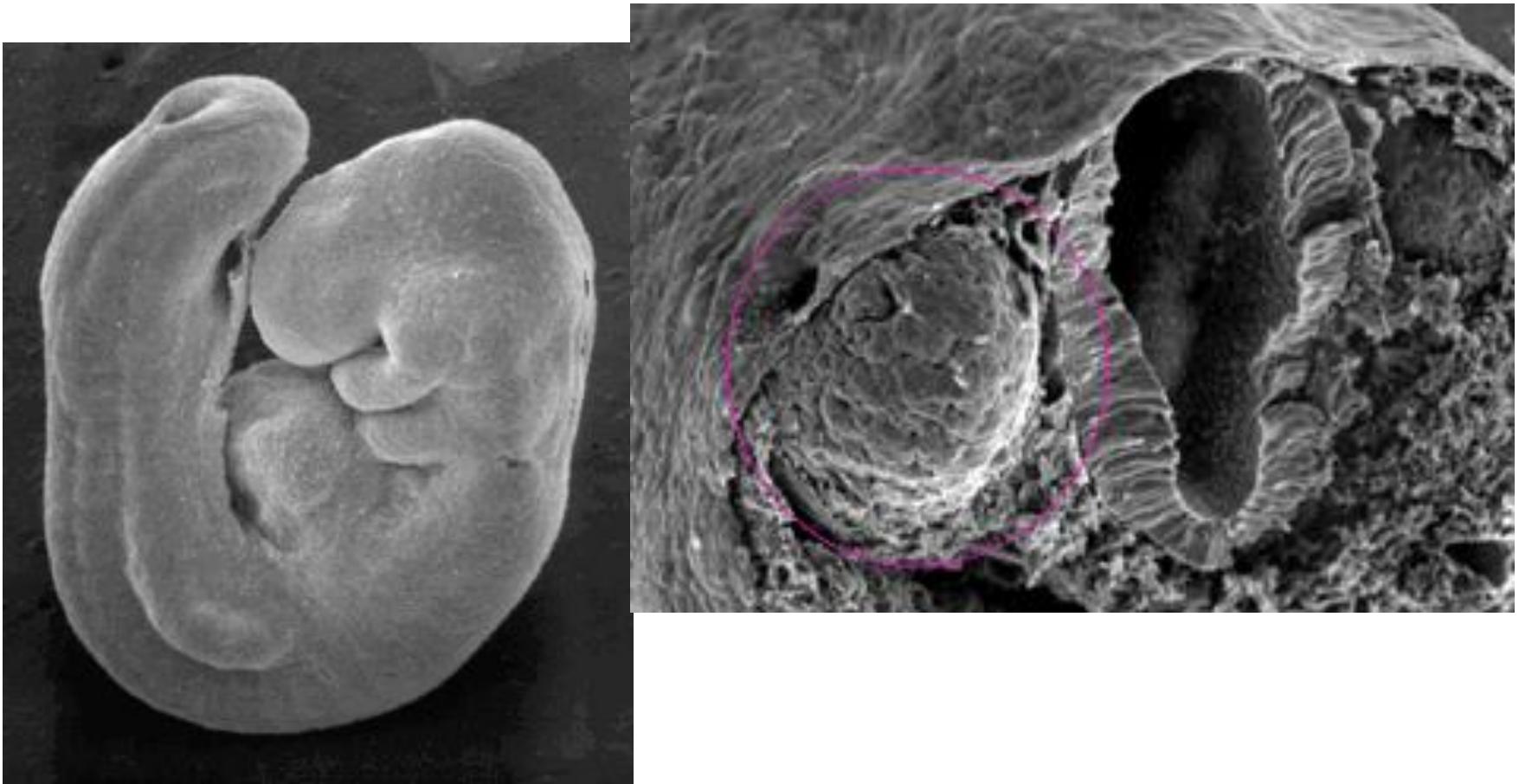
Day 26

- The **otic pit forms as this thickened (placodal) ectoderm invaginates**



Day 28

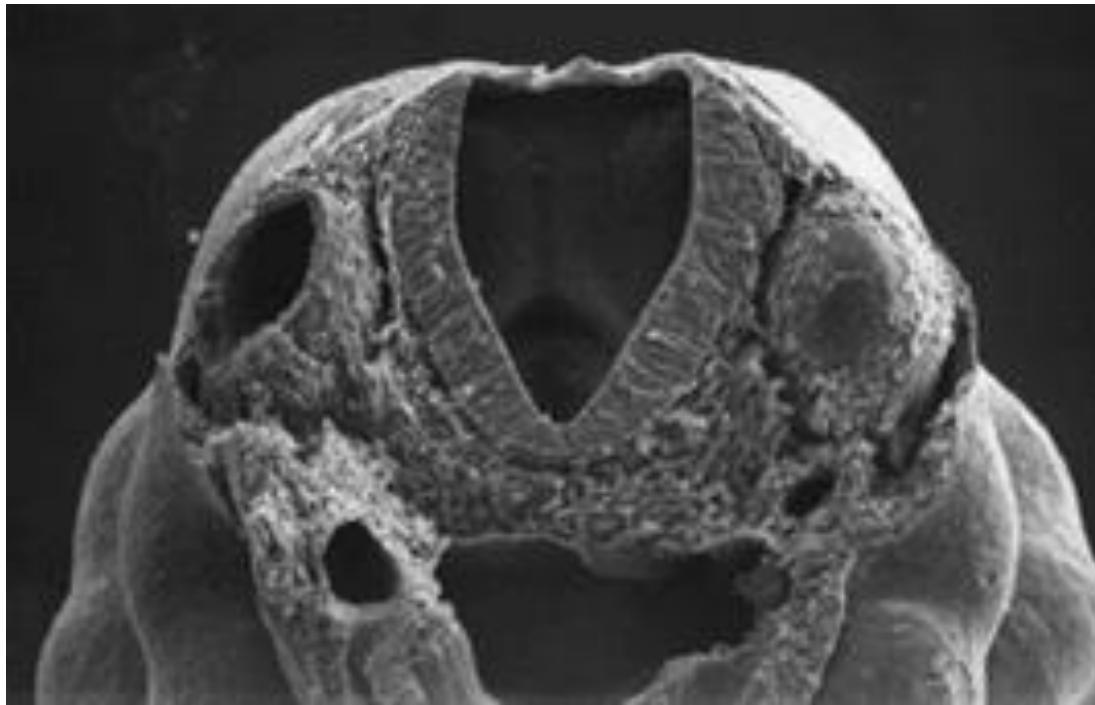
- The otic pit deepens and pinches off from the surface.



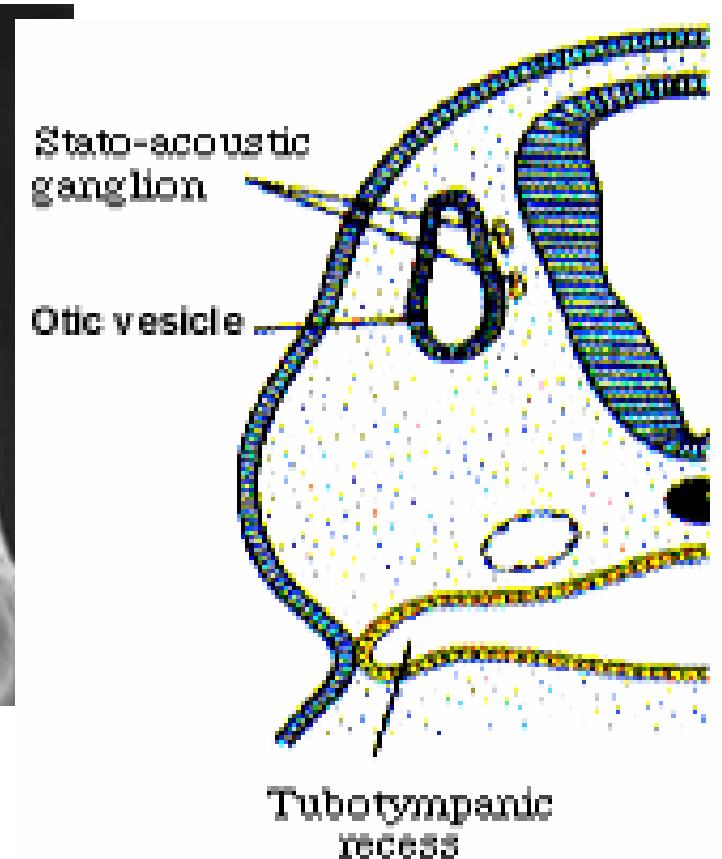
Day 29

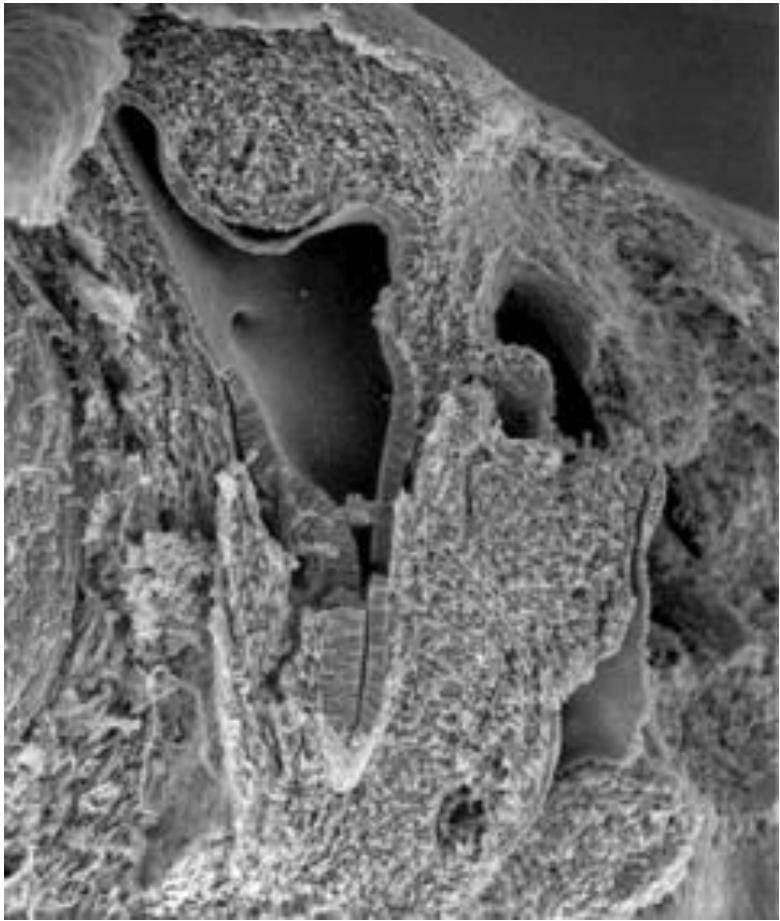
- A cut through the otic pit at the time it is completing its separation from the surface ectoderm illustrates

The stato (vestibulo)-acoustic ganglion begins to form between the **otic vesicle (otocyst)** and the neural tube.



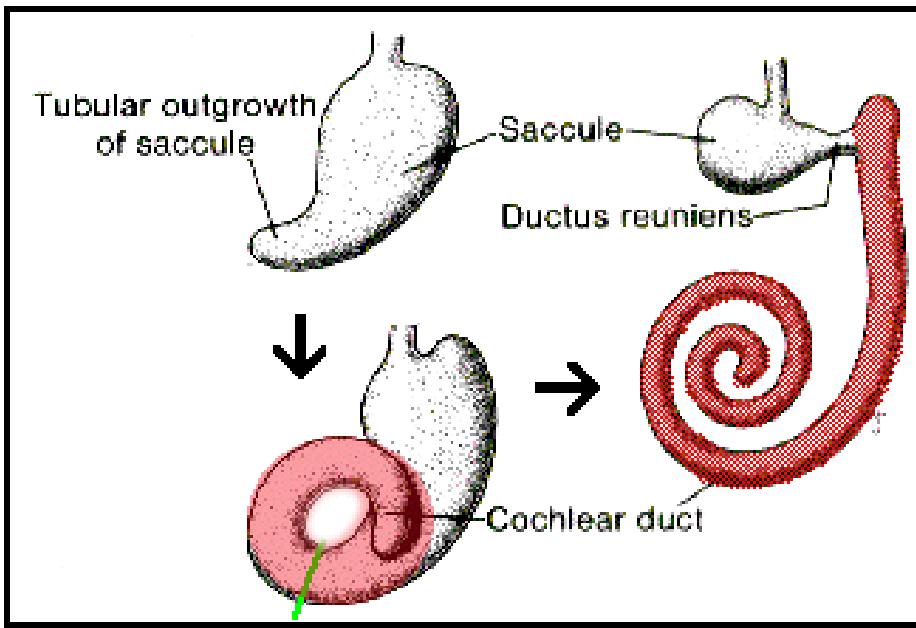
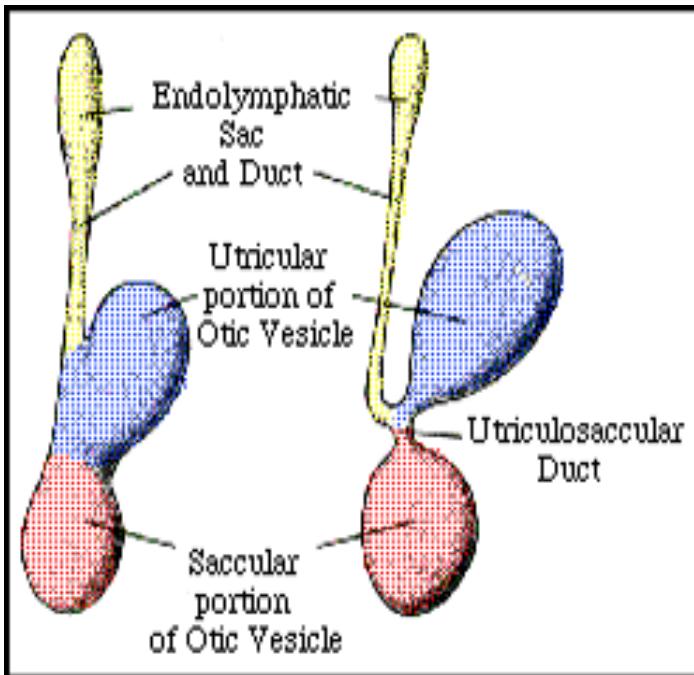
Day 30



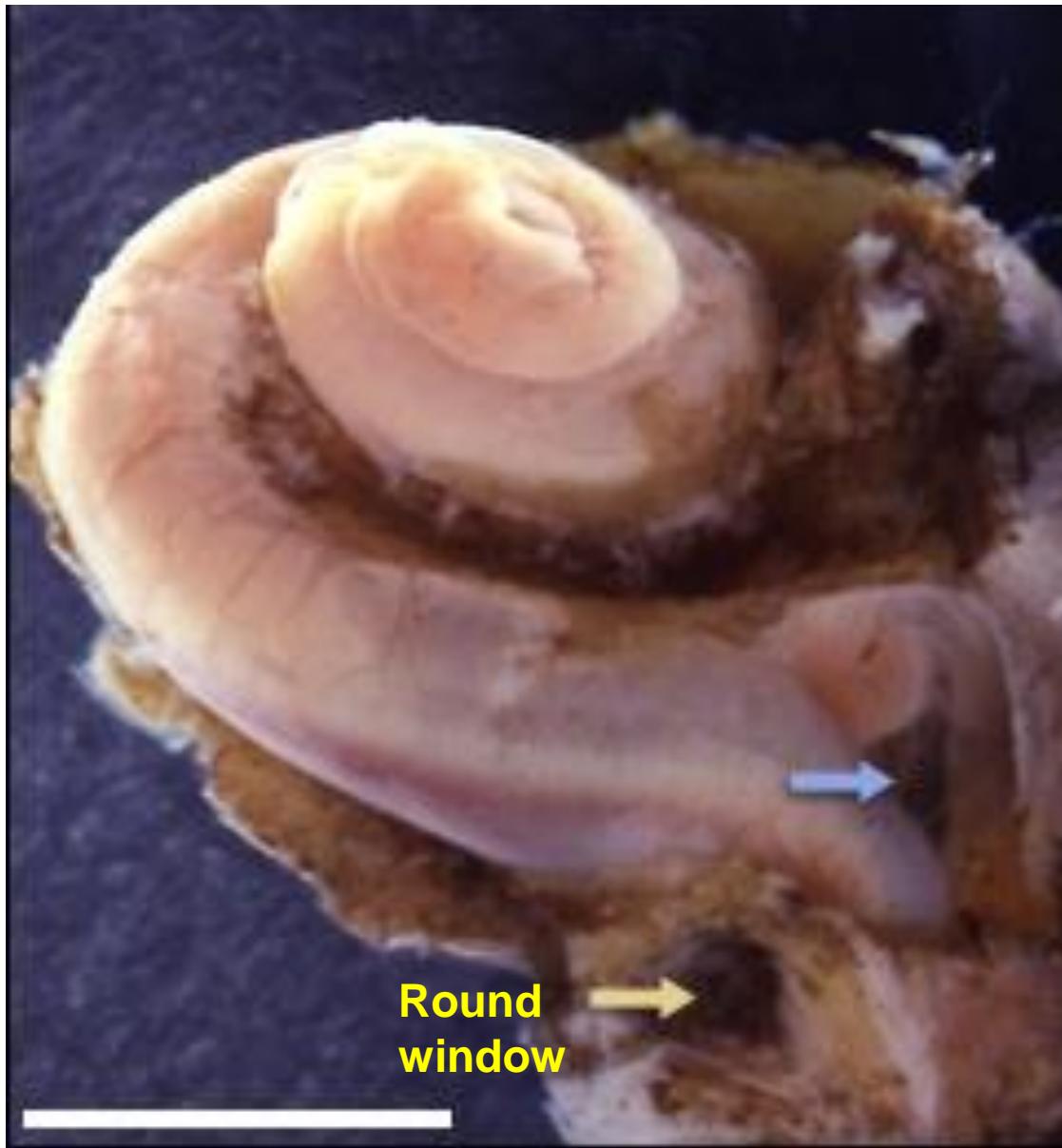


Day 36

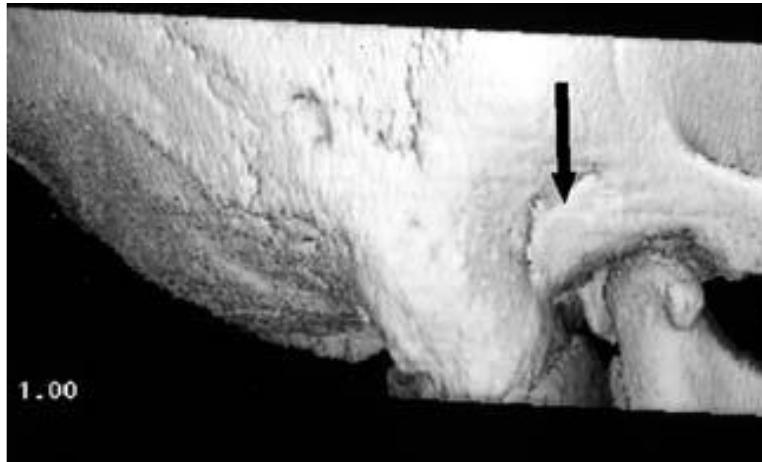
Development of the membranous labyrinth



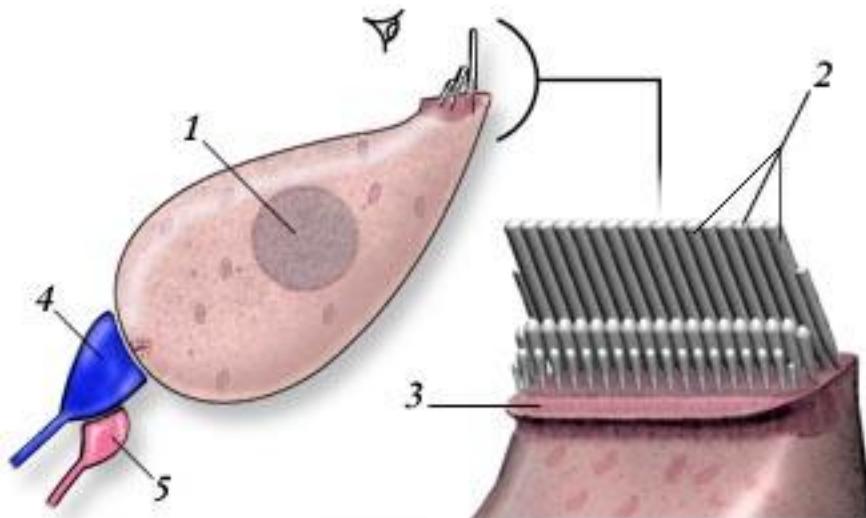
Cochlear duct of human fetus - 5 month of gestation



Developmental defects



Auditory pathway



Inner hair cell

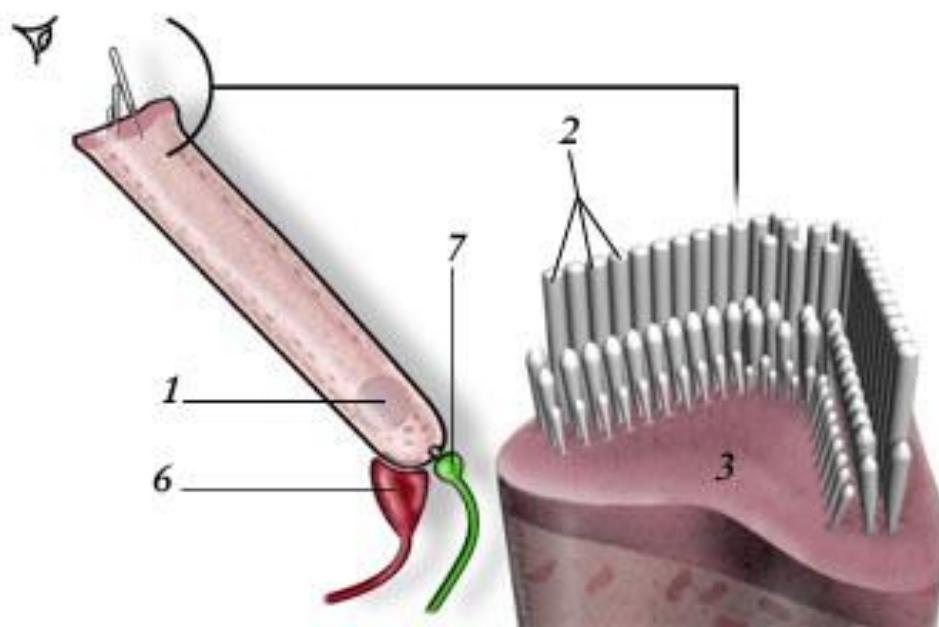
Afferent axon

Efferent axon

3 500

1 row

Contact with bipolar cells



Outer hair cell

Efferent axon

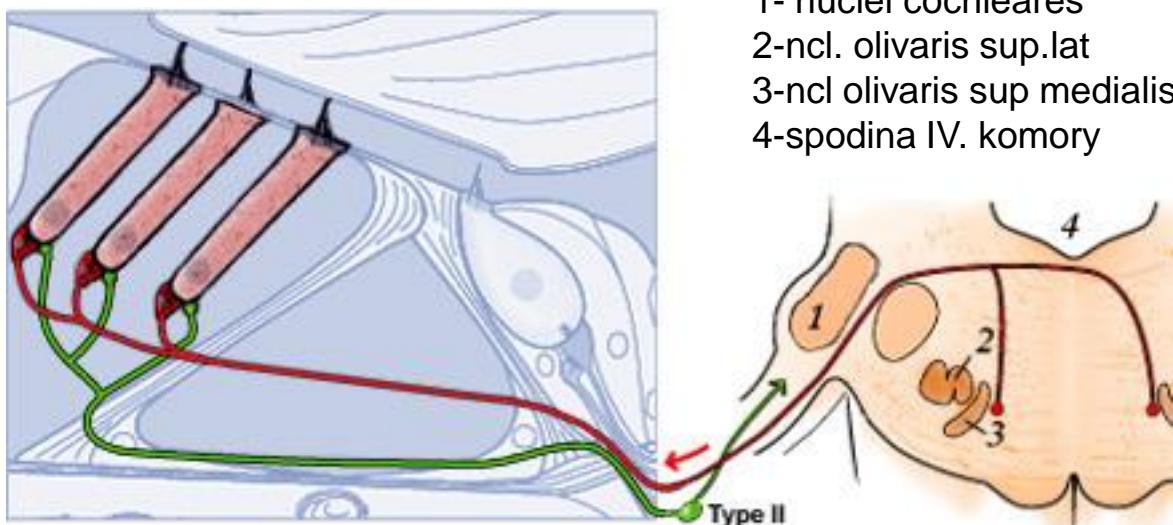
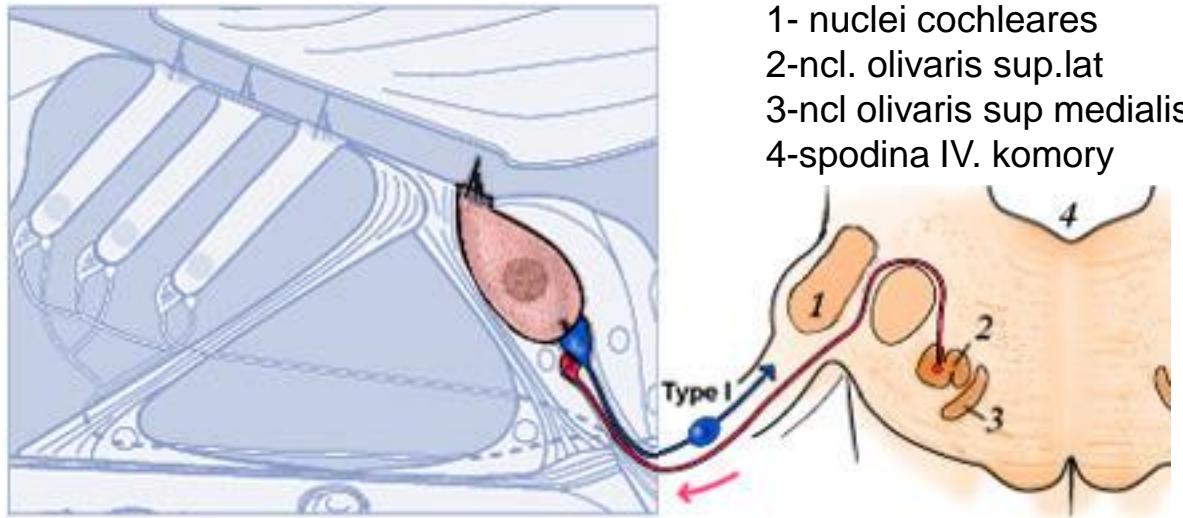
Afferent axon

15 000

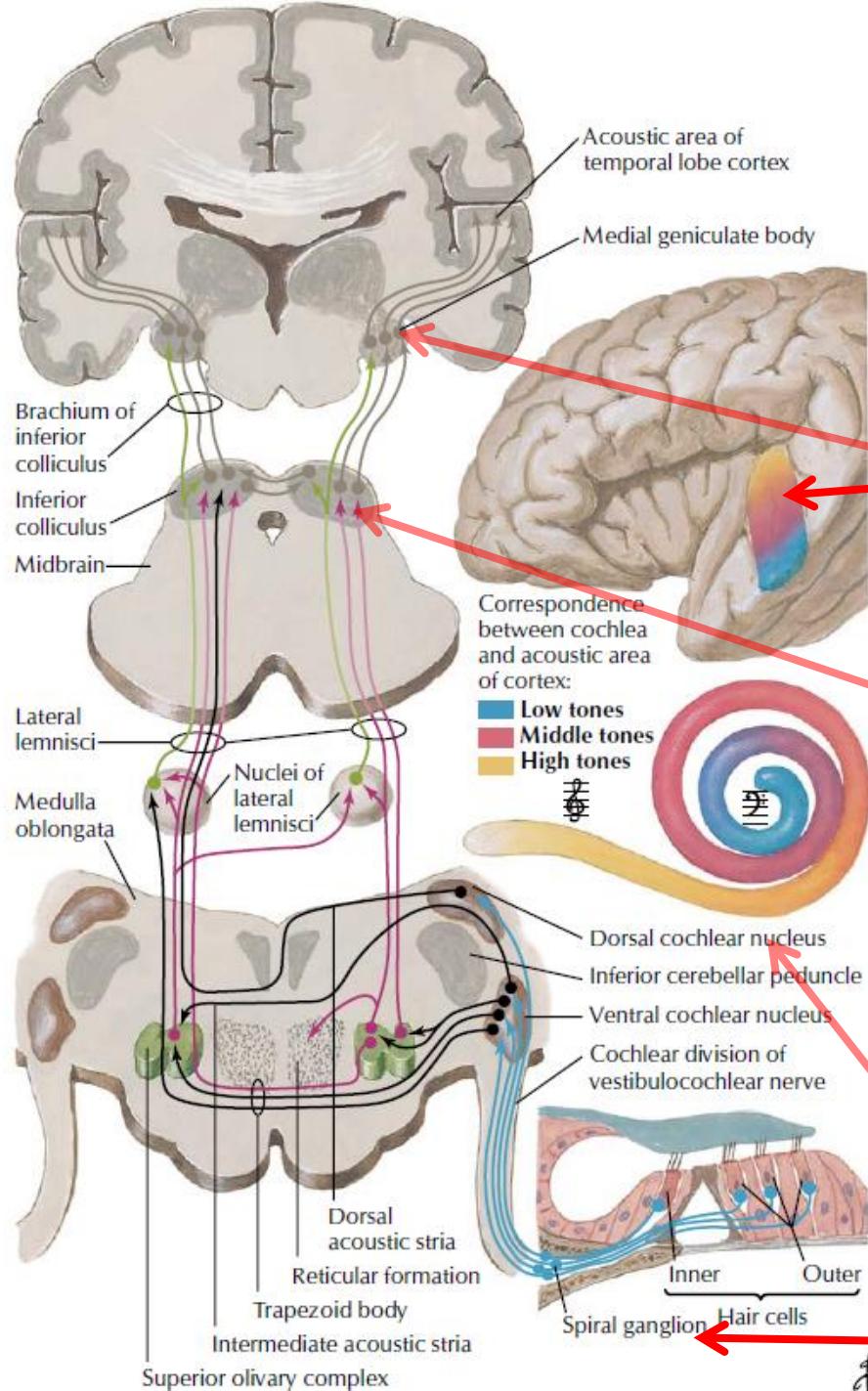
3-4 rows

Contact with unipolar cells

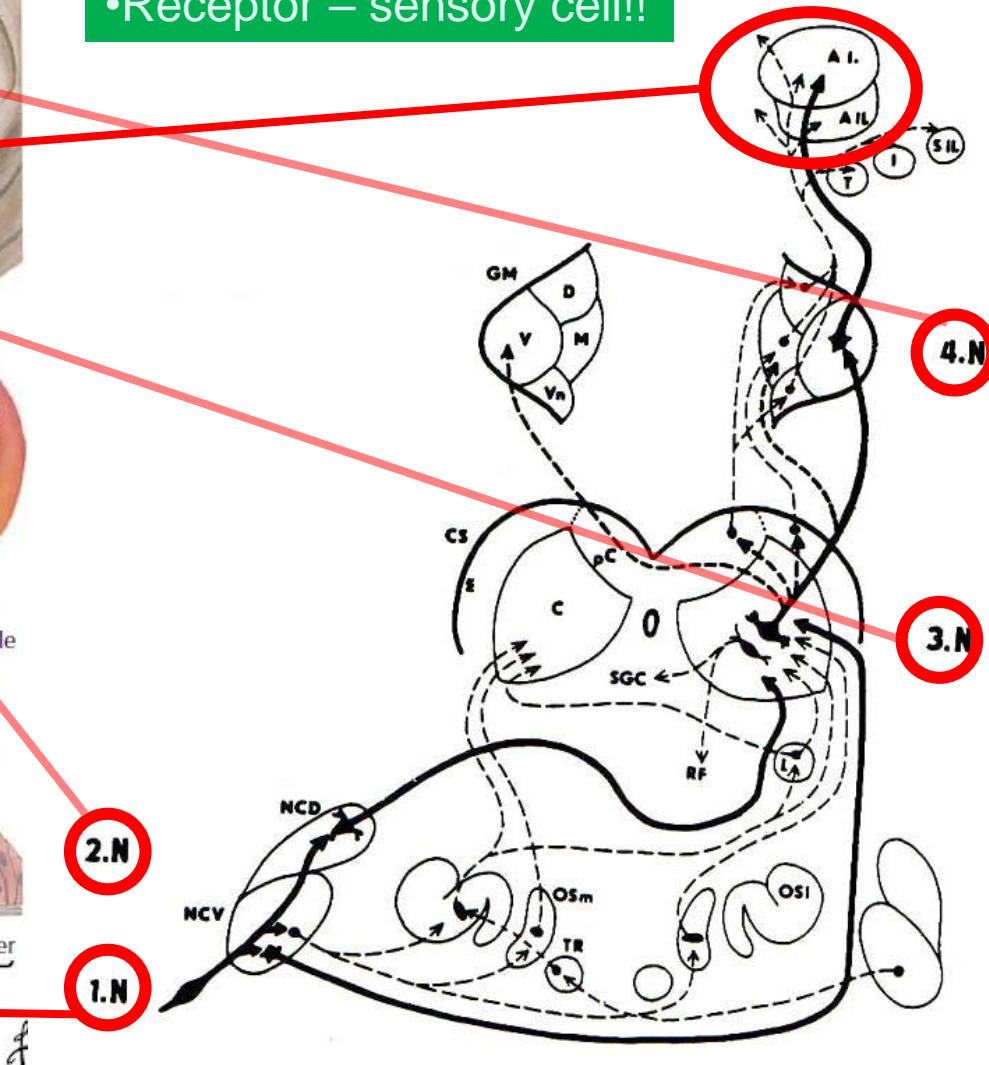
Afferents and efferents of the hair cells



Auditory pathway



- 4-neuron
- Receptor – sensory cell!!



Tonotopic organisation

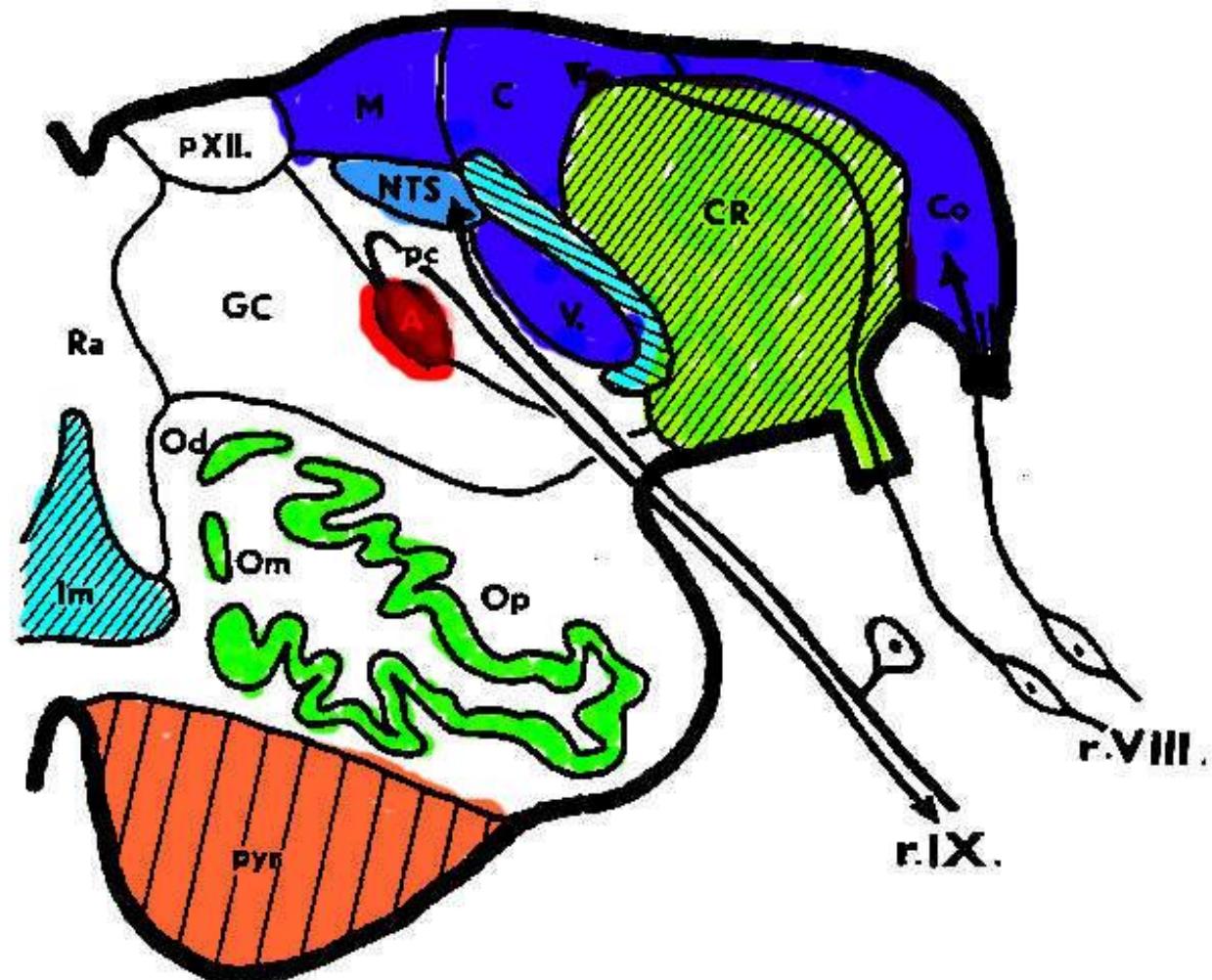
Membrana basilaris – apex – deep tones, basis high

Nuclei cochleares – deep tones ventrally

Colliculus inferior – deep tones dorsally

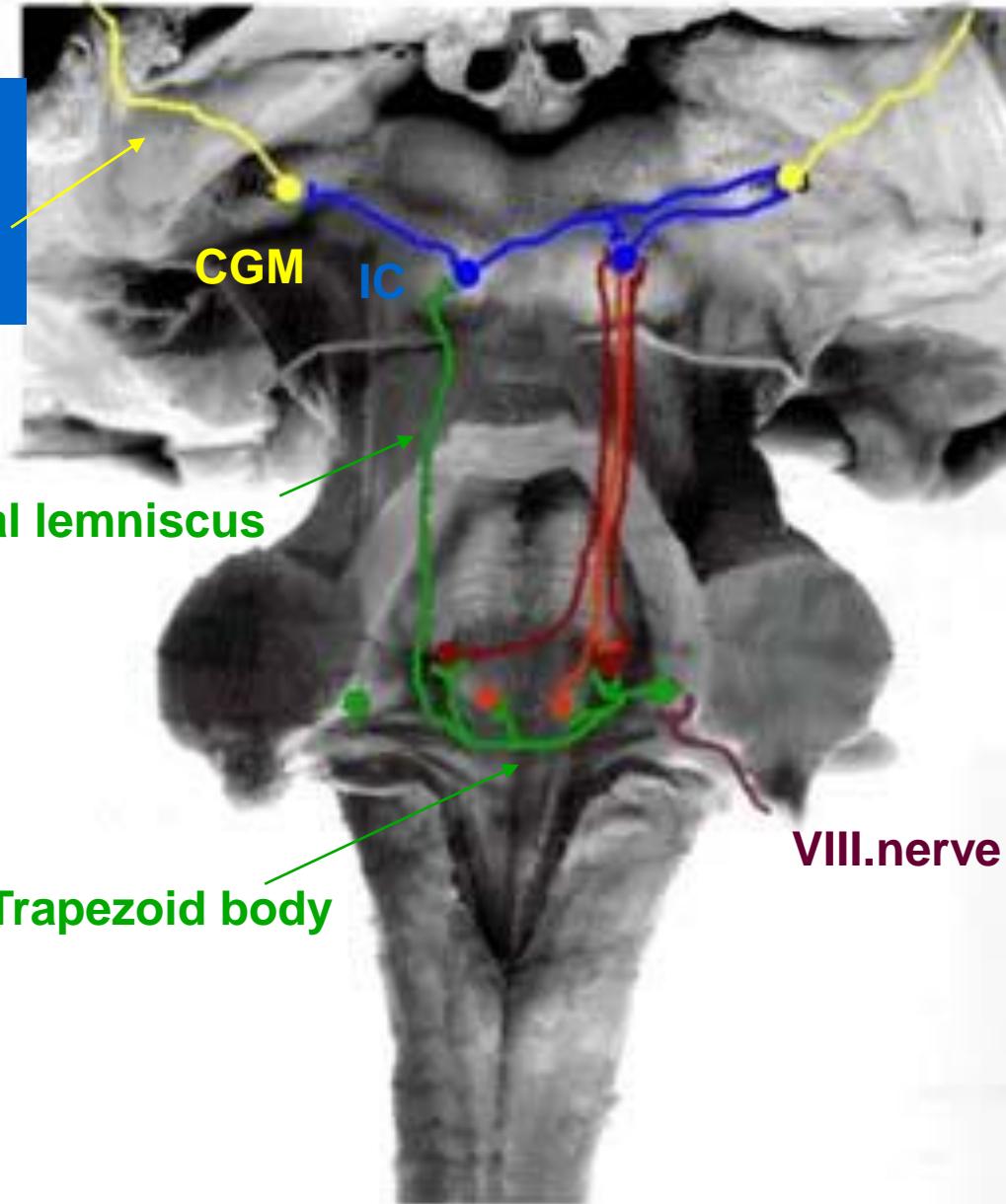
Corpus geniculatum mediale – deep tones laterally

Sluchová kůra – deep tones anteriorly

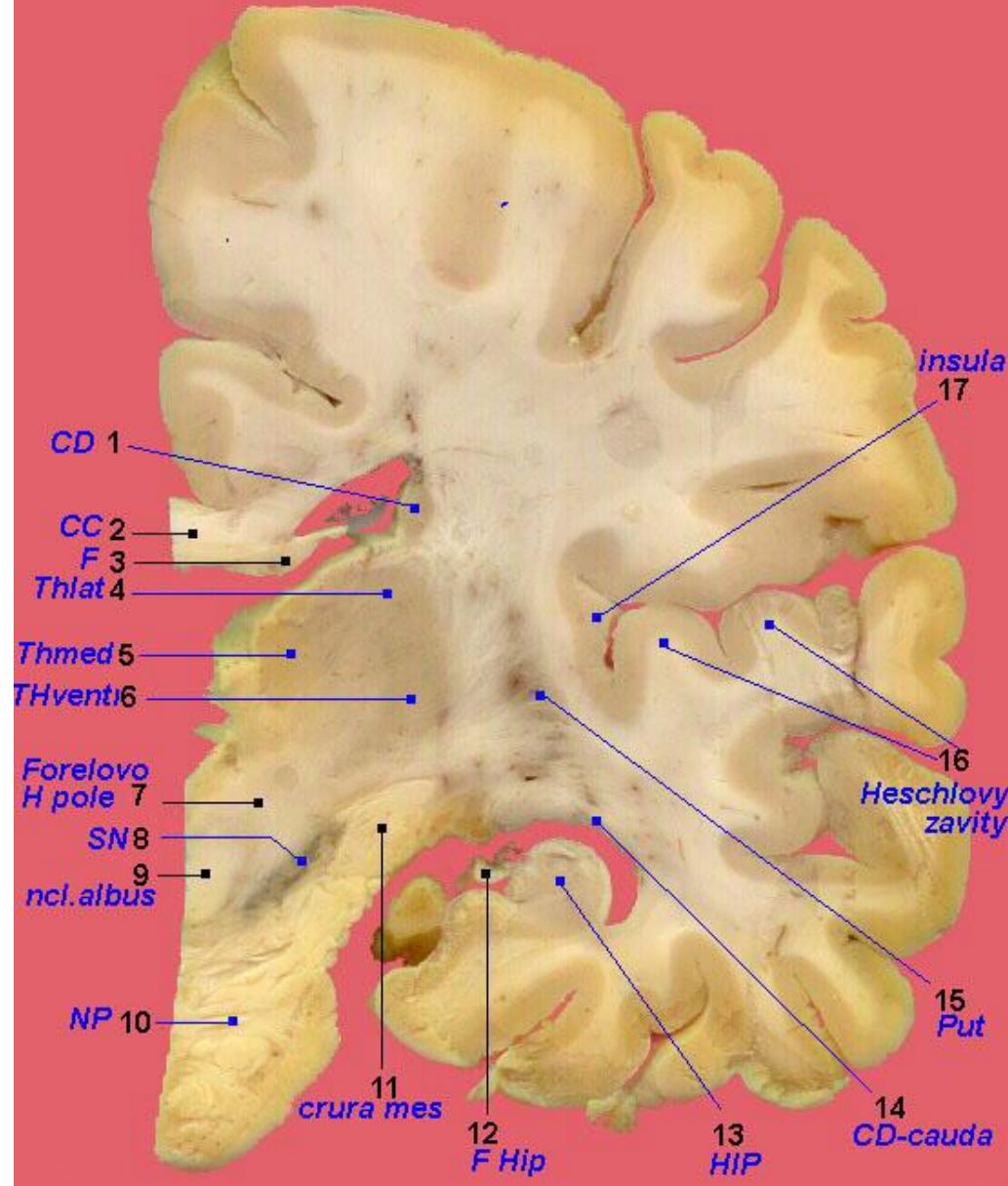


BA 41,42

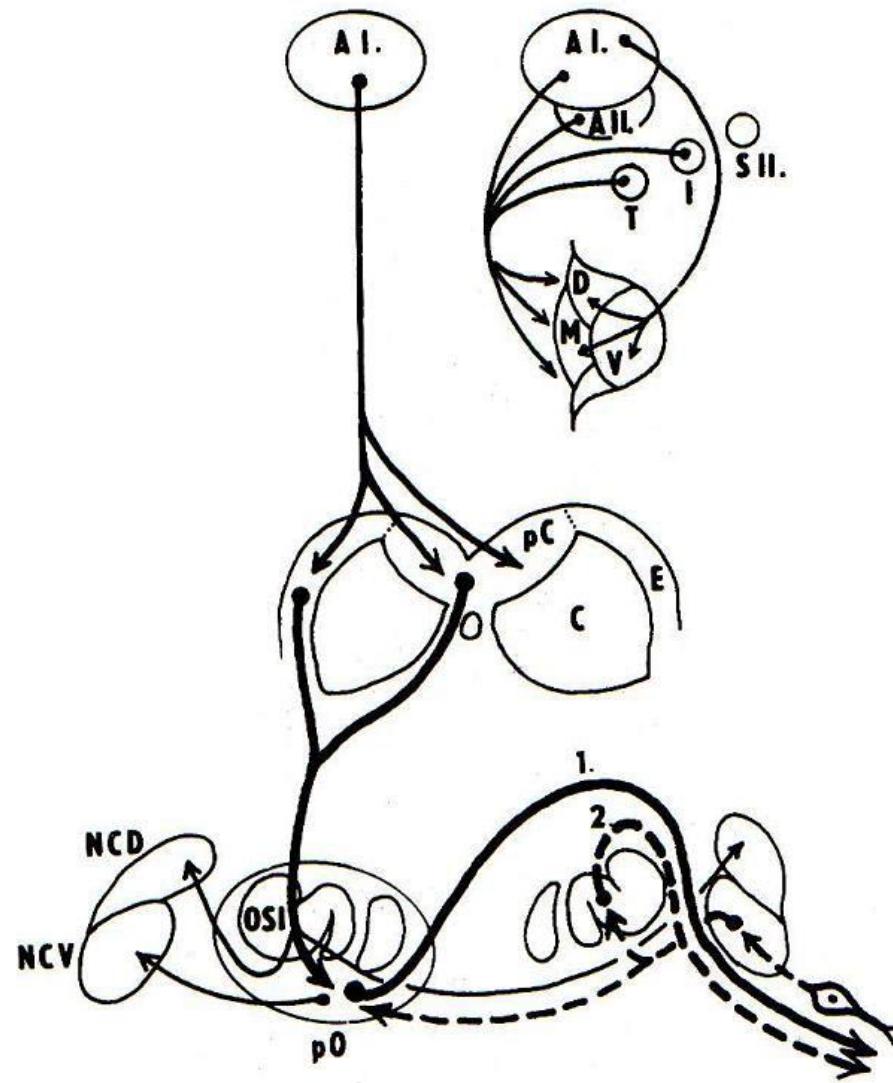
**Radiatio
acustica
(auditory
radiations)**







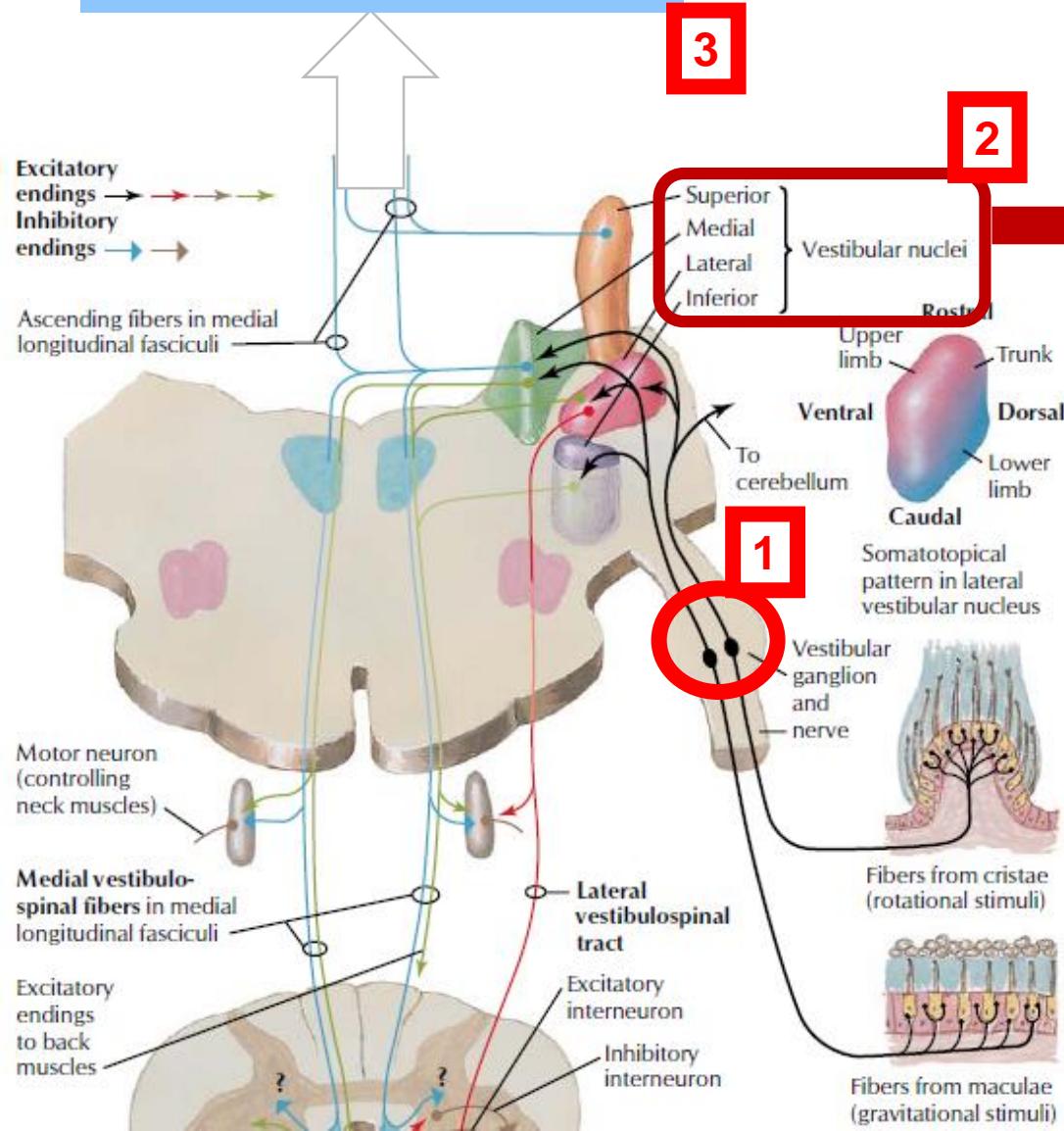
Descendent tracts in the auditory pathway



Vestibular pathway

Thalamus – VPL, VPM, VL

- 3-neuron
- Receptor – sensory cell!!



Tractus vestibulo

- spinalis
- cerebellaris
- nuclearis
- reticularis

M,L,S

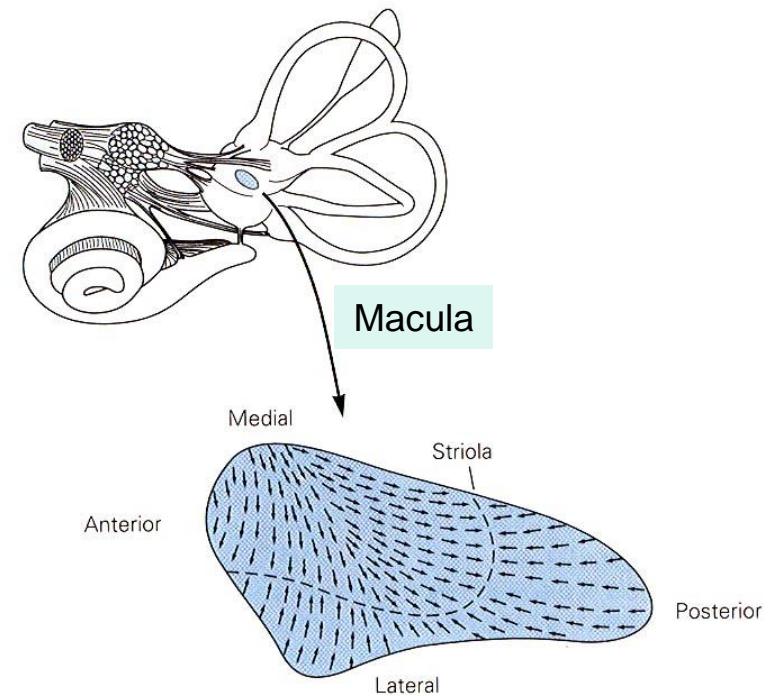
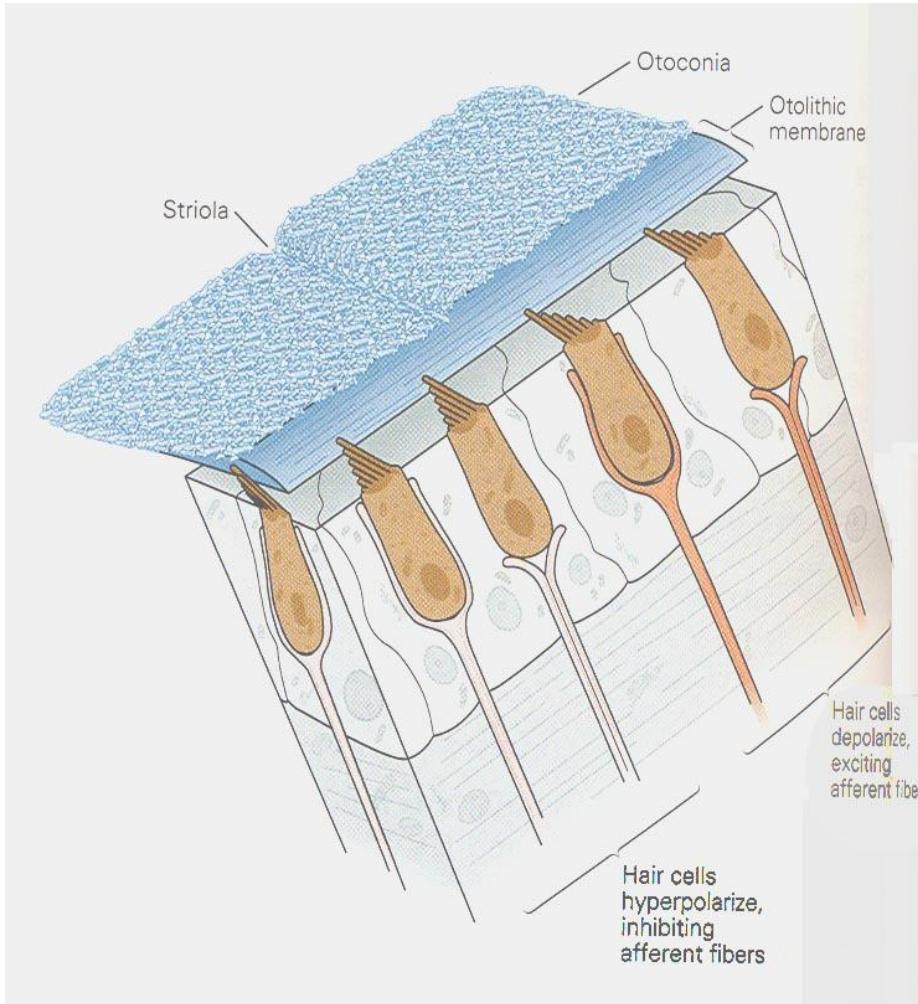
M,L,I

Vestibular pathway

- Receptor – hair cell in the macula sacculi et utriculi, cristae ampullares
- 1.N – bipolar cell in the ggl. vestibuli
- 2.N – vestibular nucleus
- 3.N – ventral nuclei of the thalamus

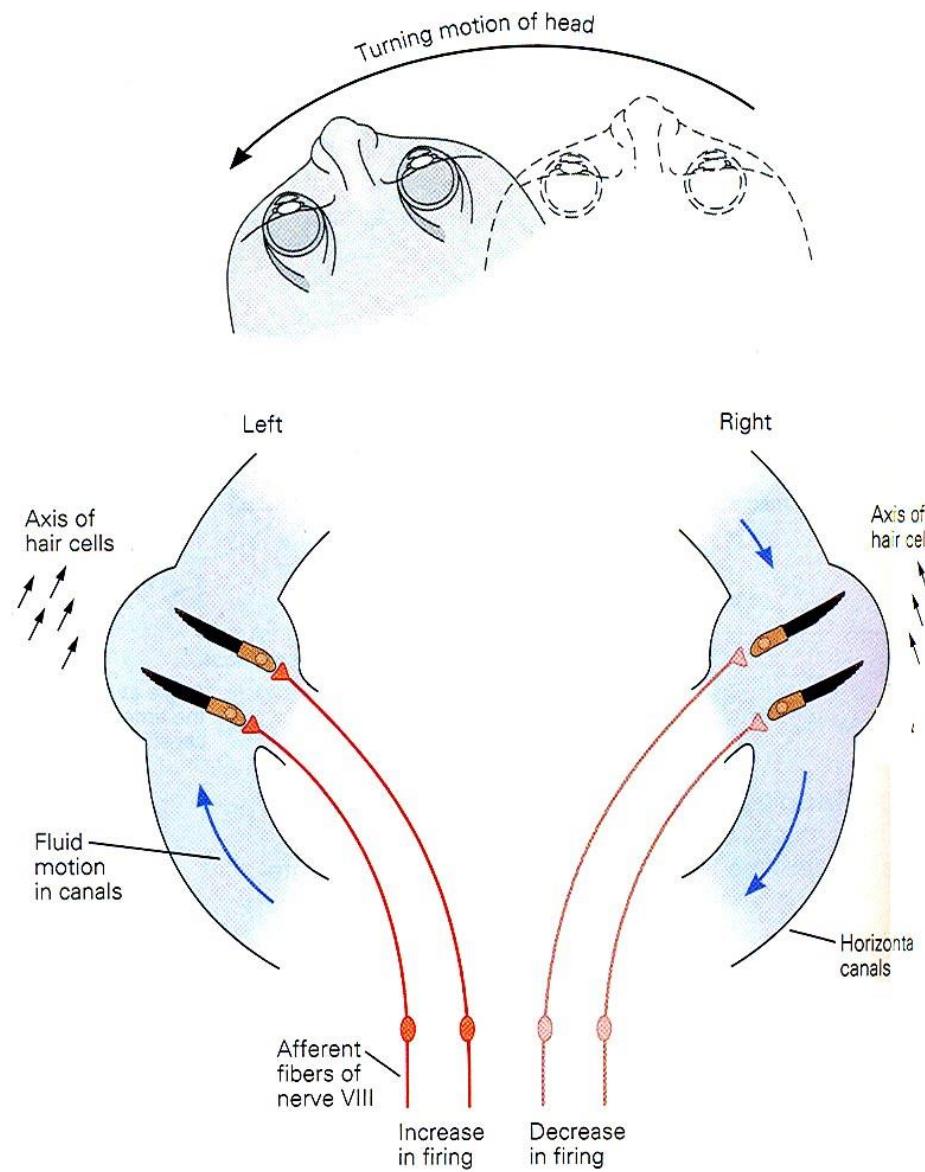
Cortex: temp. and pariet. lobe

The utricle and the saccule detect linear acceleration

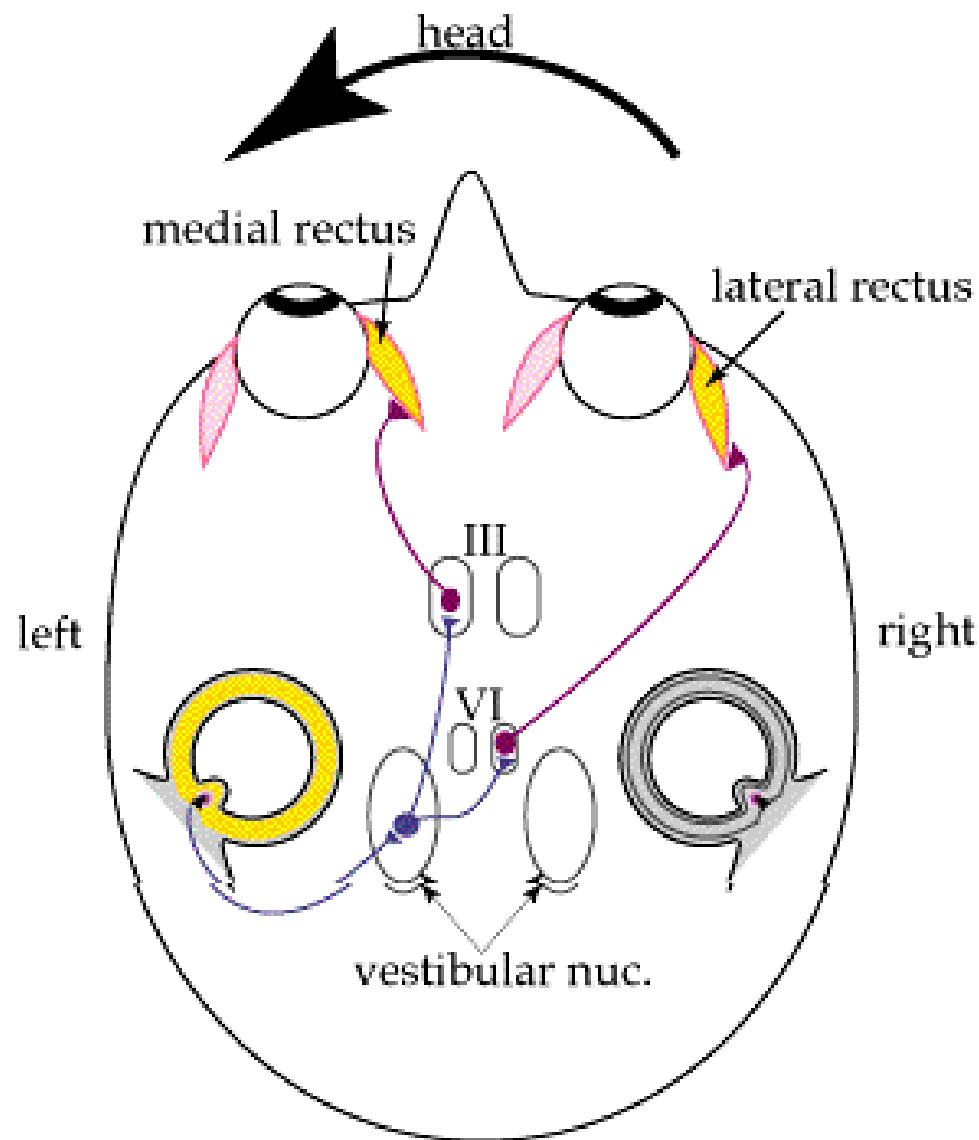


The axis of mechanical sensitivity of each hair cell in the utricle is orientated toward the striola

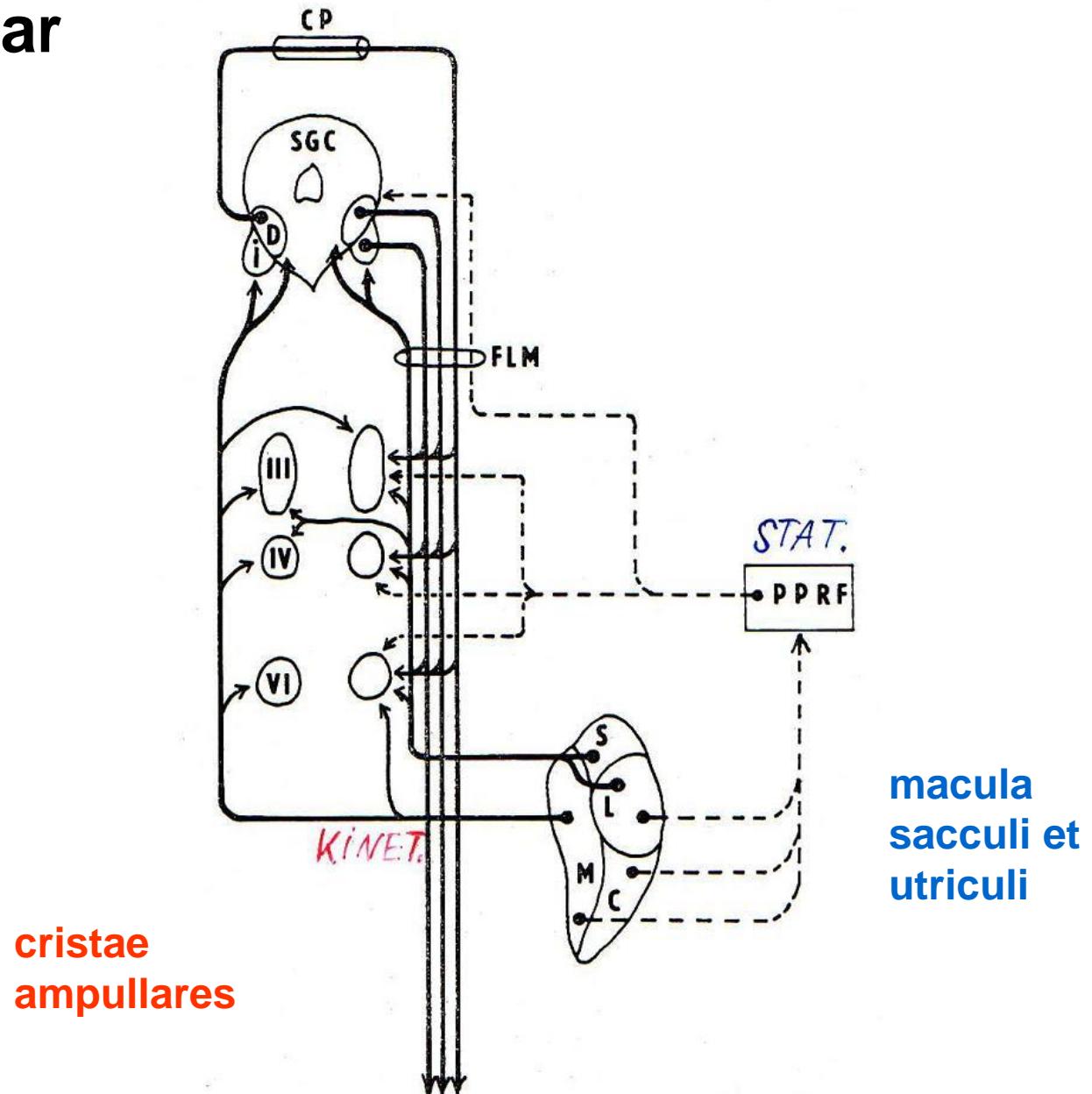
Function of the horizontal semicircular canals



Vestibulo-ocular reflex



Vestibulo-nuclear connections

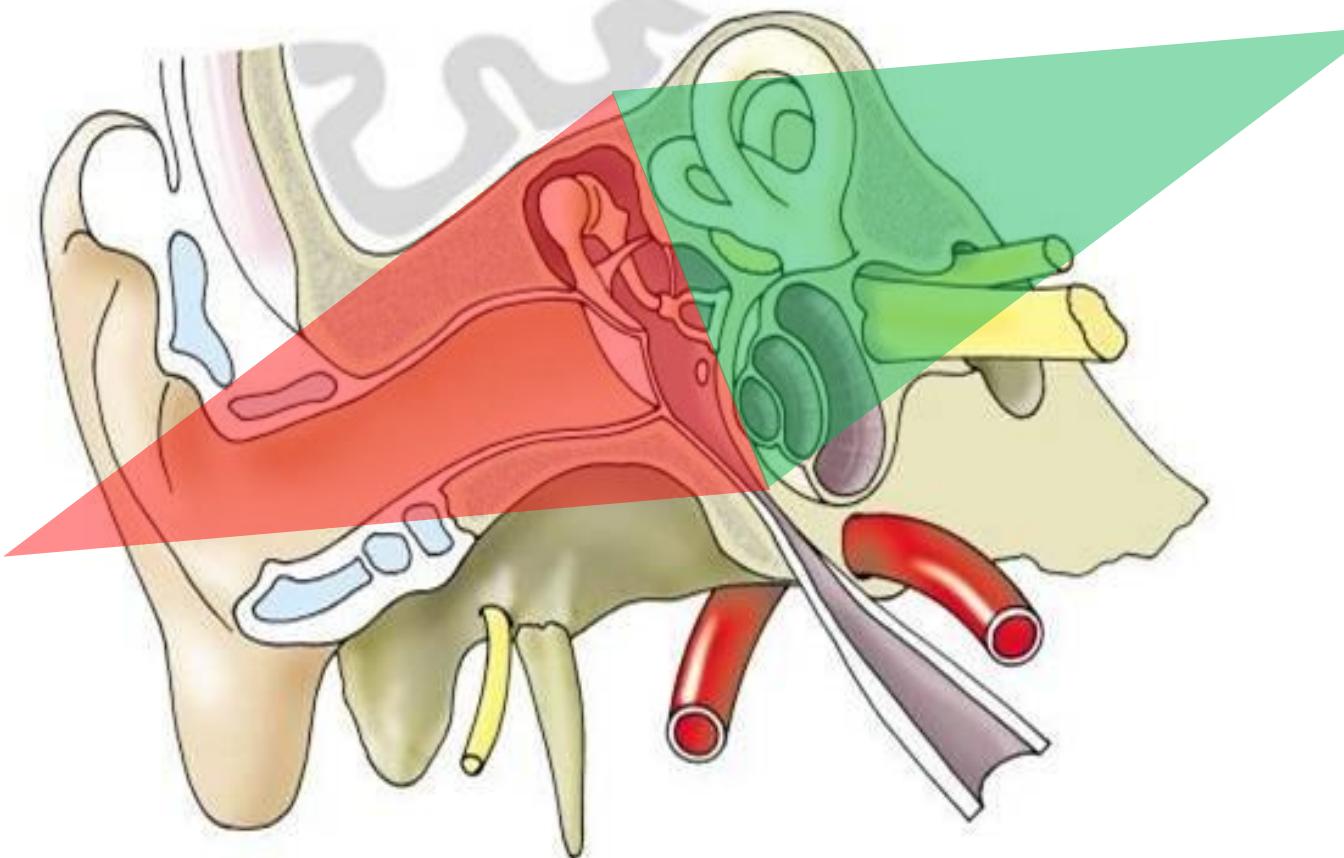


What with the imparied hearing??

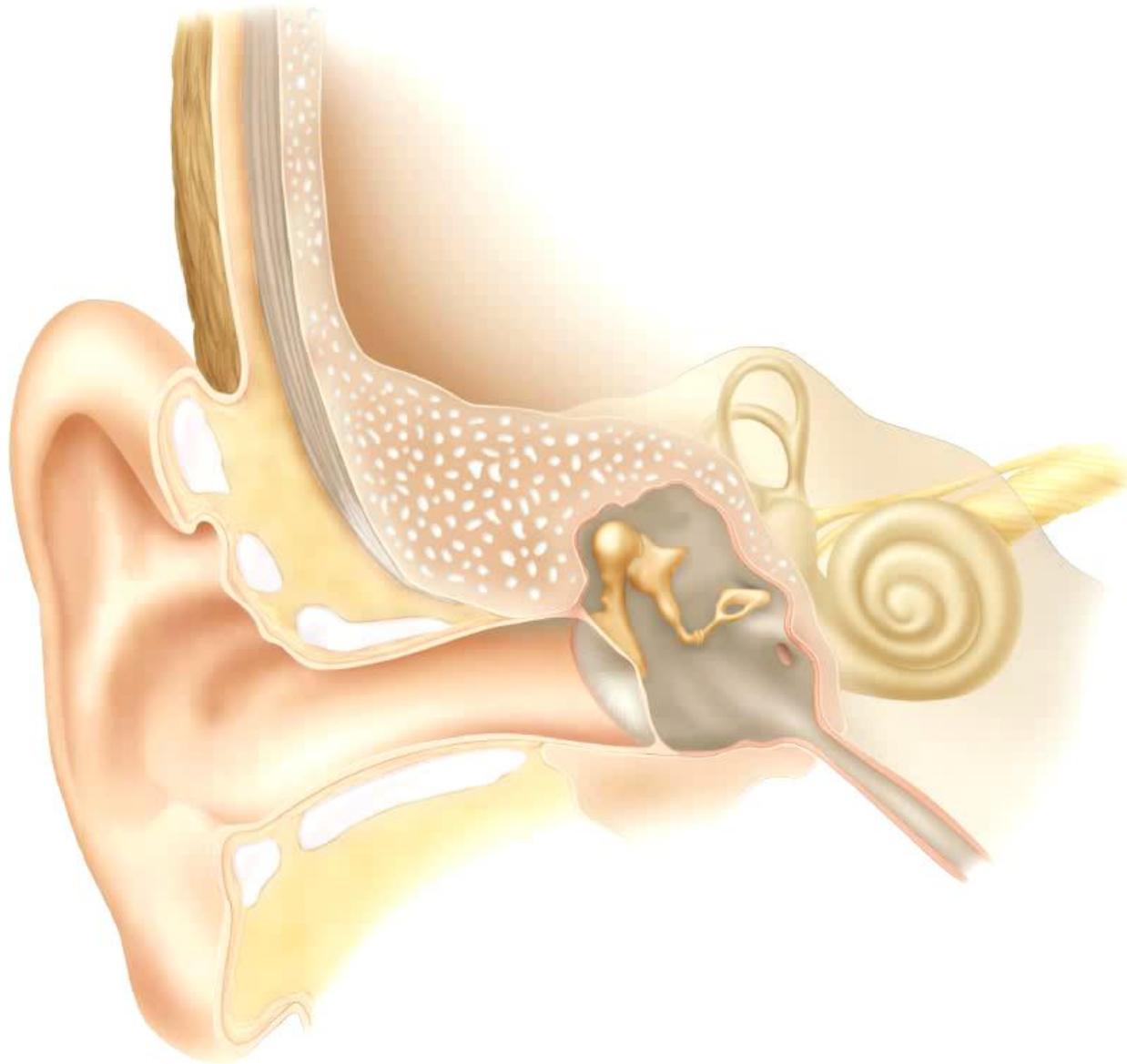


Types of hearing loss

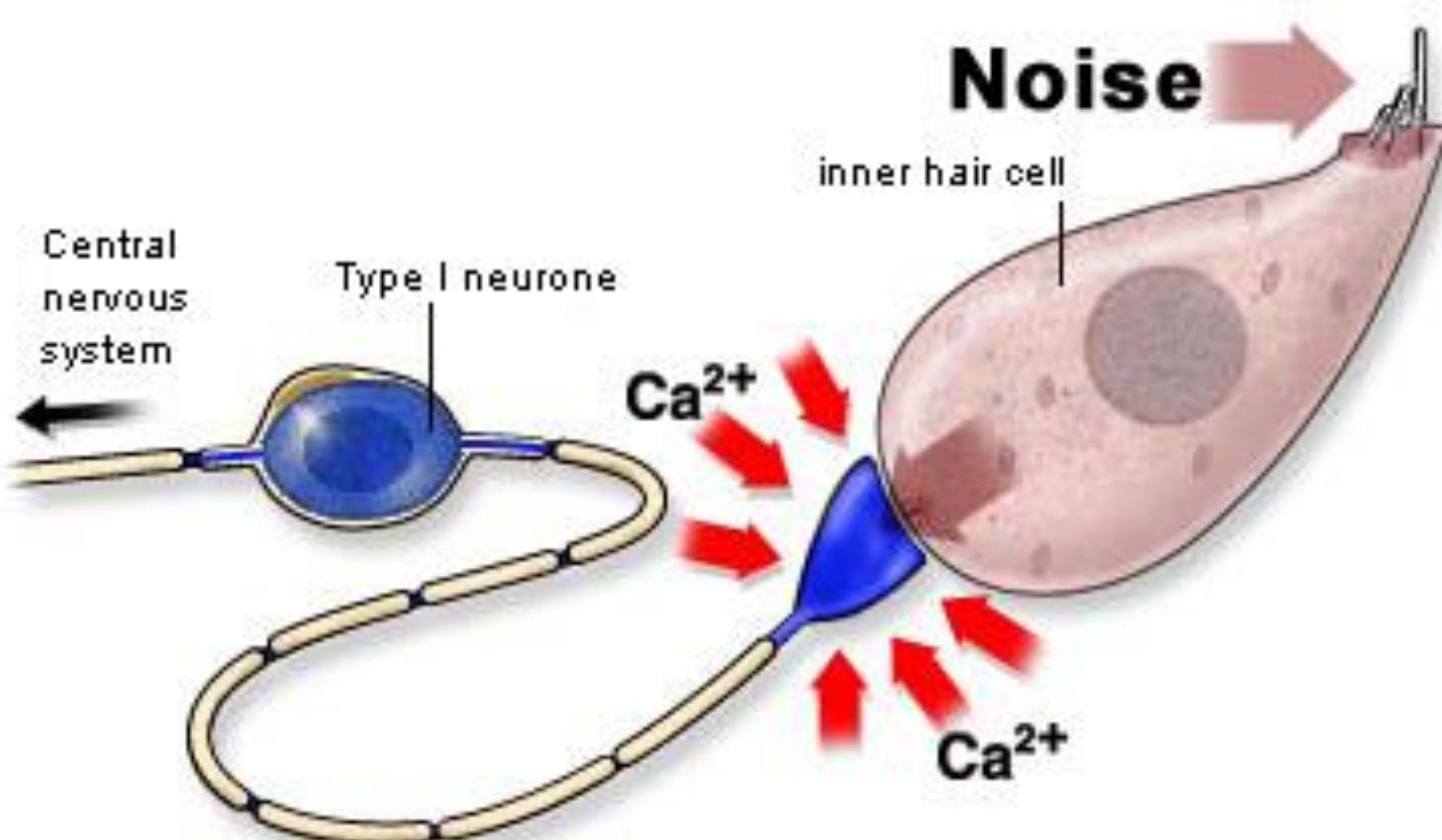
- **Conductive** – affected external or middle ear
- **Sensorineural** – affected inner ear, cochlear nerve or auditory tract
- **Mixed**



How we hear?



Noise



Presbyacusis

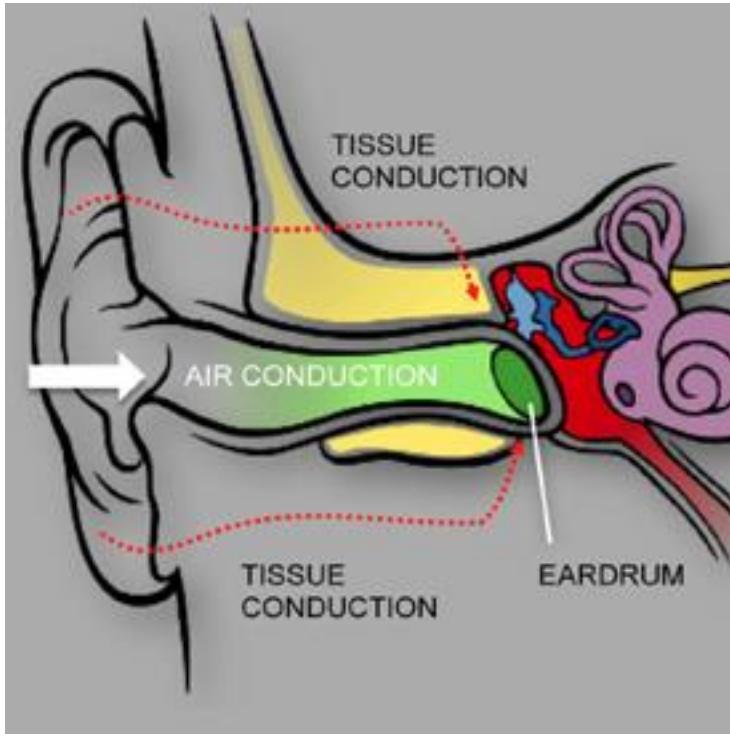
$$\int_{\text{Soil}}^{\text{NM}} R_x \text{ } dR_x + \int_{90}^{\text{HO}} \text{ } dB + \int_{A}^{\text{n}} \text{ } dt = \text{PTS} - \text{dB}$$

The equation illustrates the cumulative factors contributing to Presbyacusis (PTS). It includes:

- A graph of sound pressure level (dB) versus frequency, showing a bell-shaped curve peaking at 90 dB.
- A graph of time (dt) versus frequency, showing a bell-shaped curve peaking at n.
- A graph of sound intensity (dR_x) versus frequency, showing a bell-shaped curve peaking at NM.
- A hand holding a megaphone, representing noise exposure.
- A hand holding a lightning bolt, representing acoustic trauma.
- A hand holding a stylized ear, representing aging.
- A spiral arrow pointing away from the ear, labeled "PTS - dB", indicating the resulting hearing loss.

Hawkins, 1973 © Karger

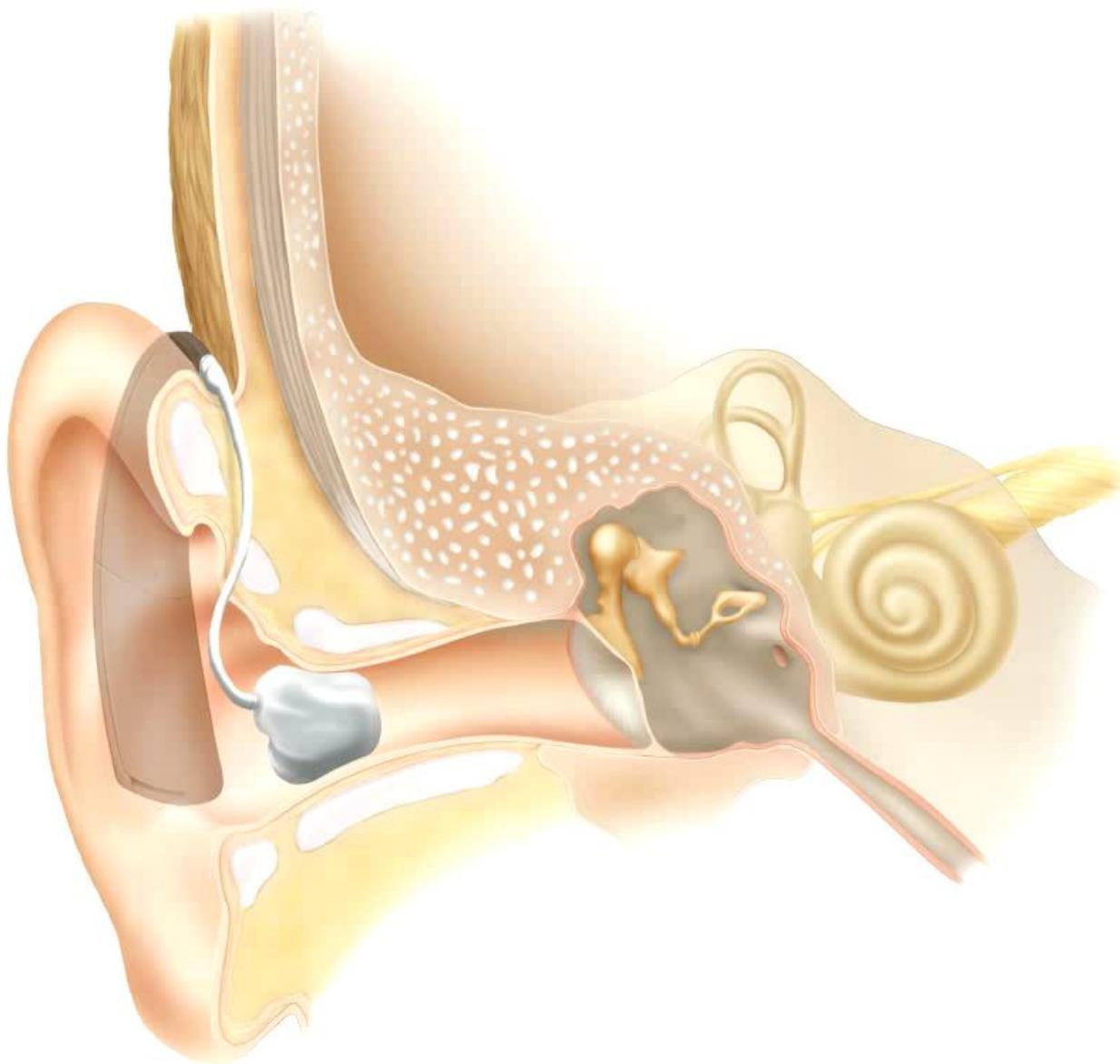
Bone conduction



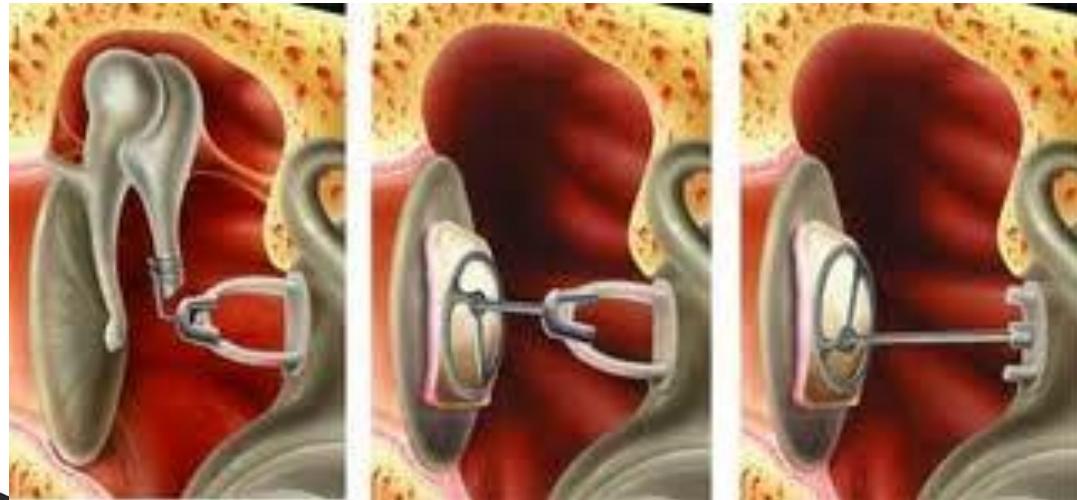
Hearing aids



Hearing aid

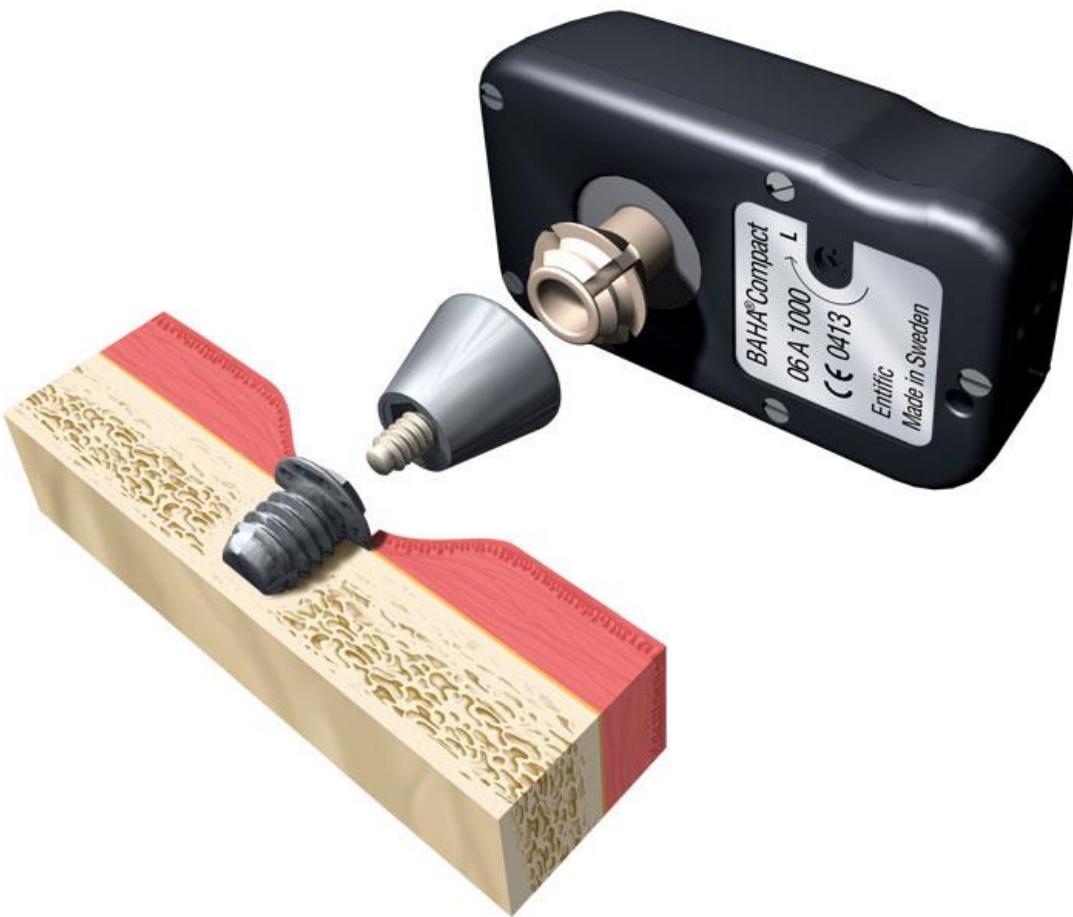


TORP/PORP

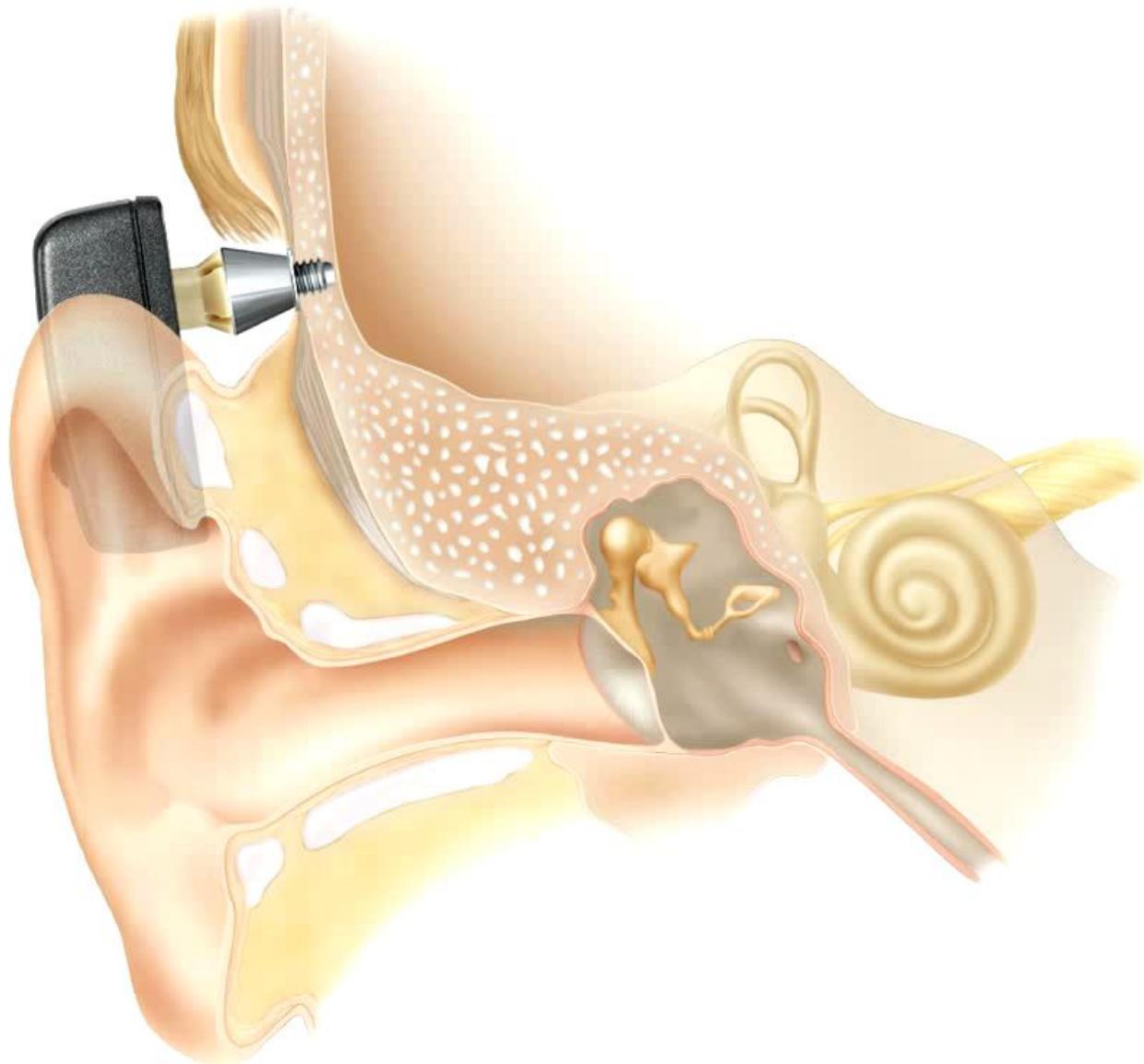


BAHA

(Bone anchored hearing device)



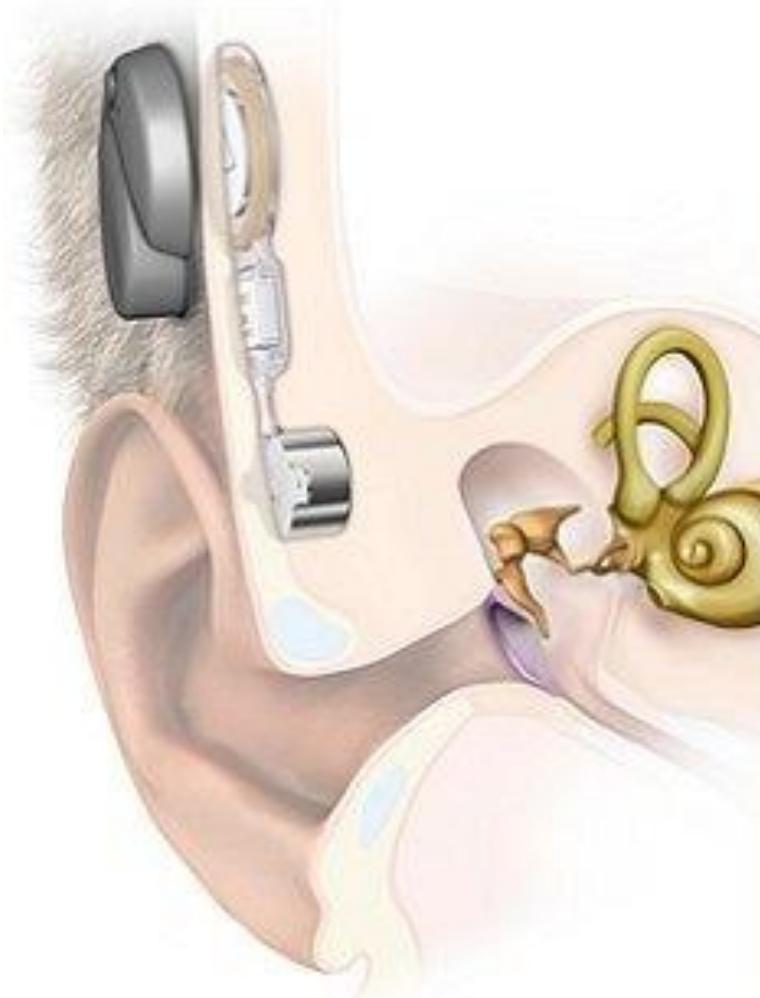
BAHA



BAHA



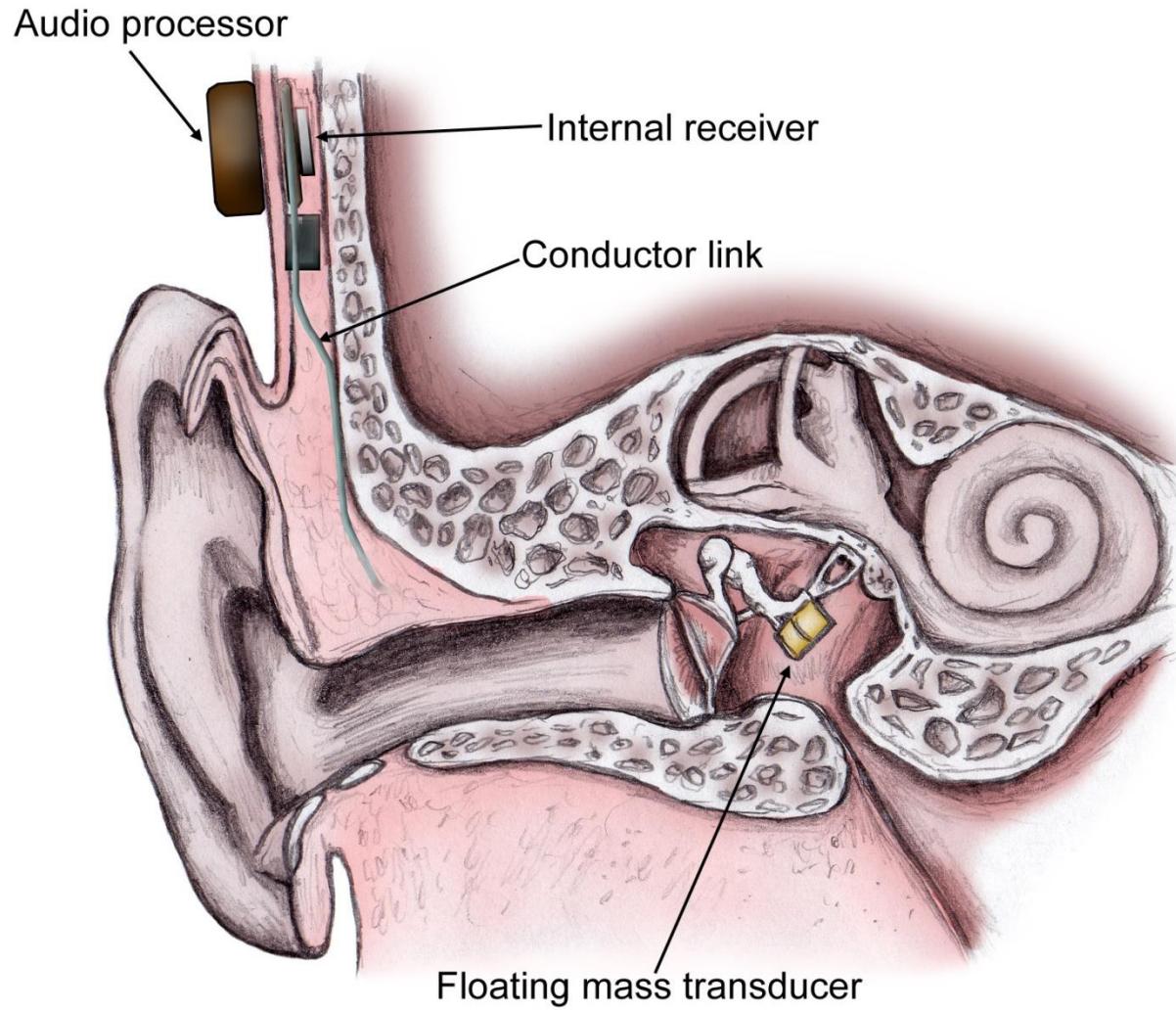
Bonebridge



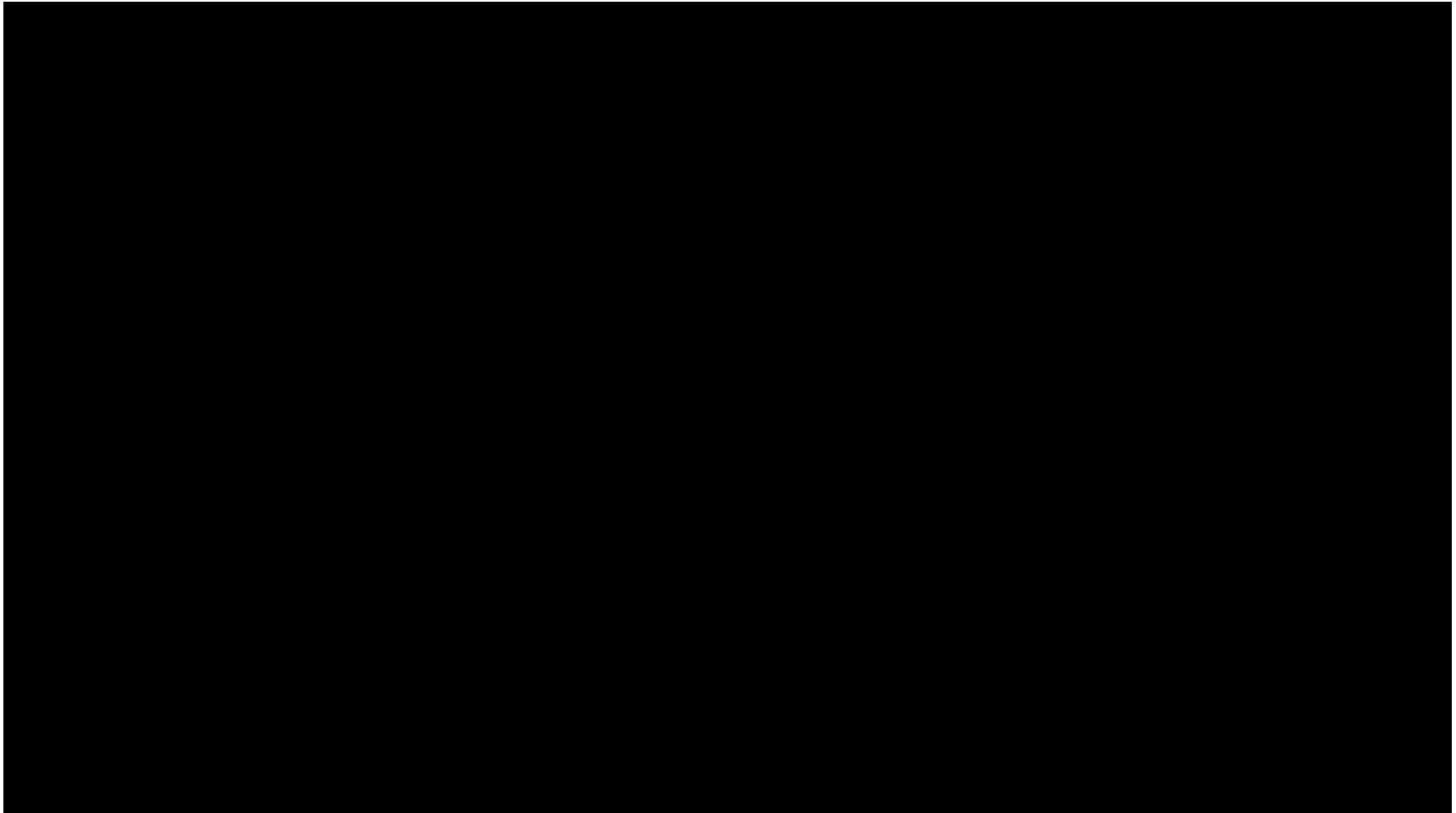
Bonebridge



Active middle ear implant

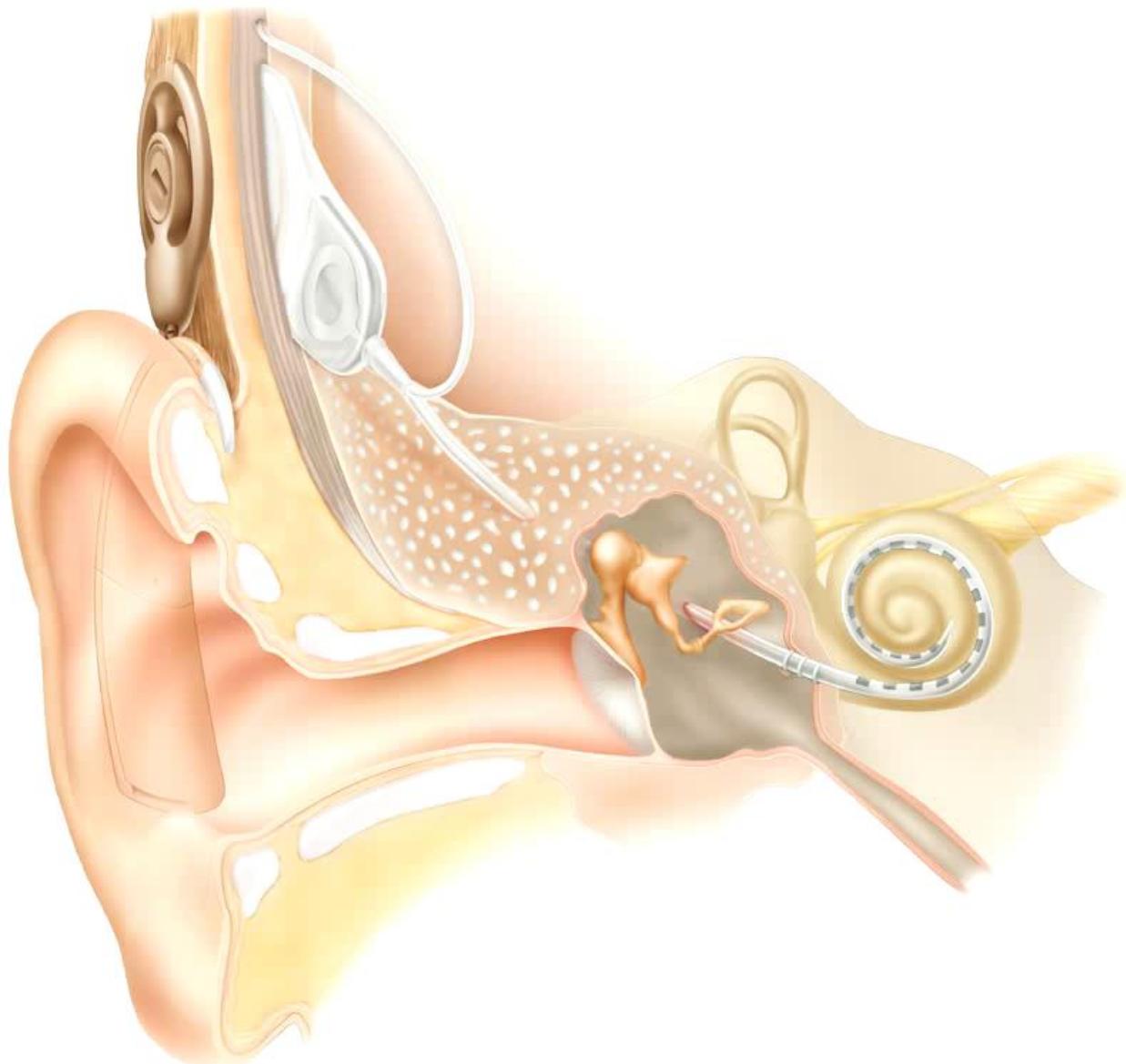


Vibrant soundbridge



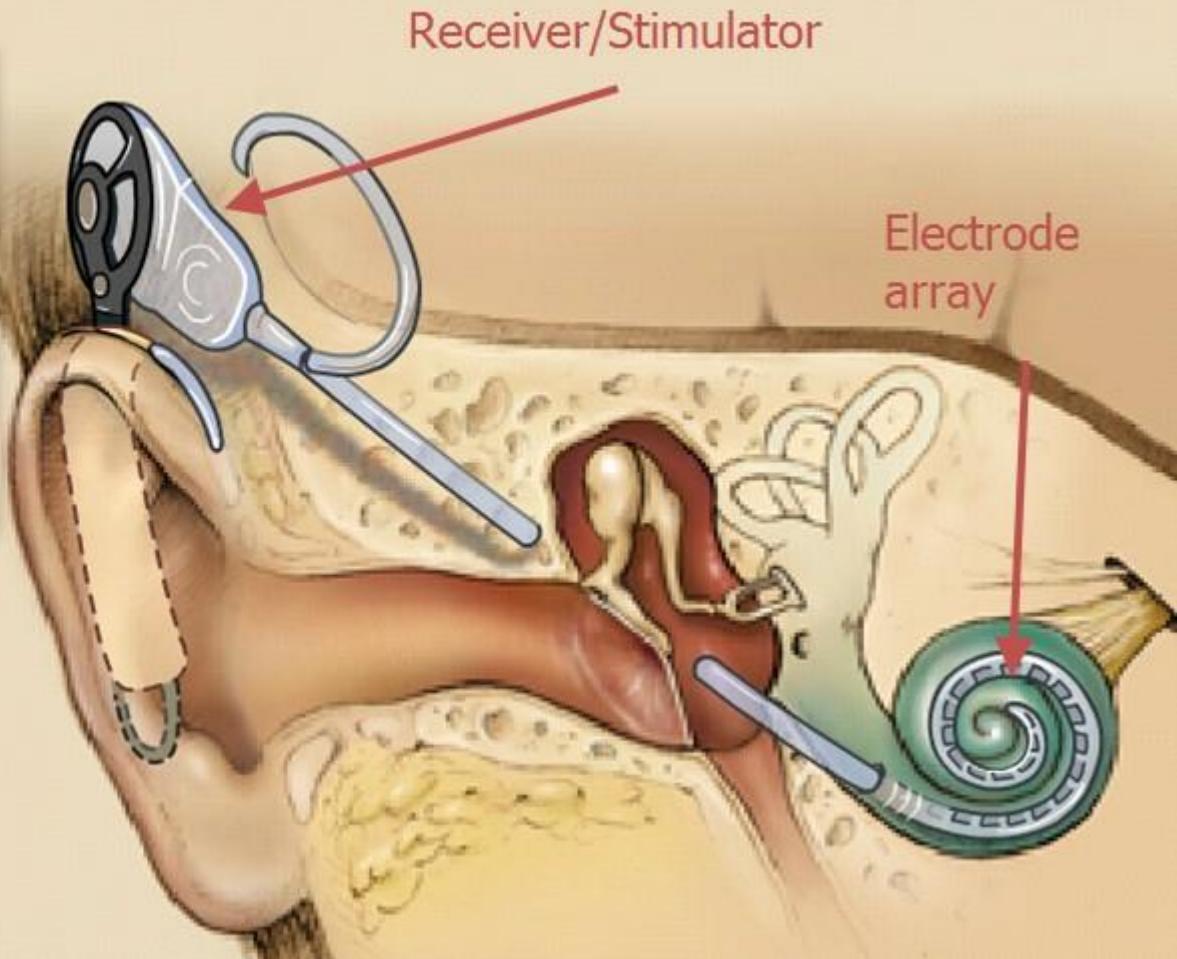
Cochlear implant







Transmitter



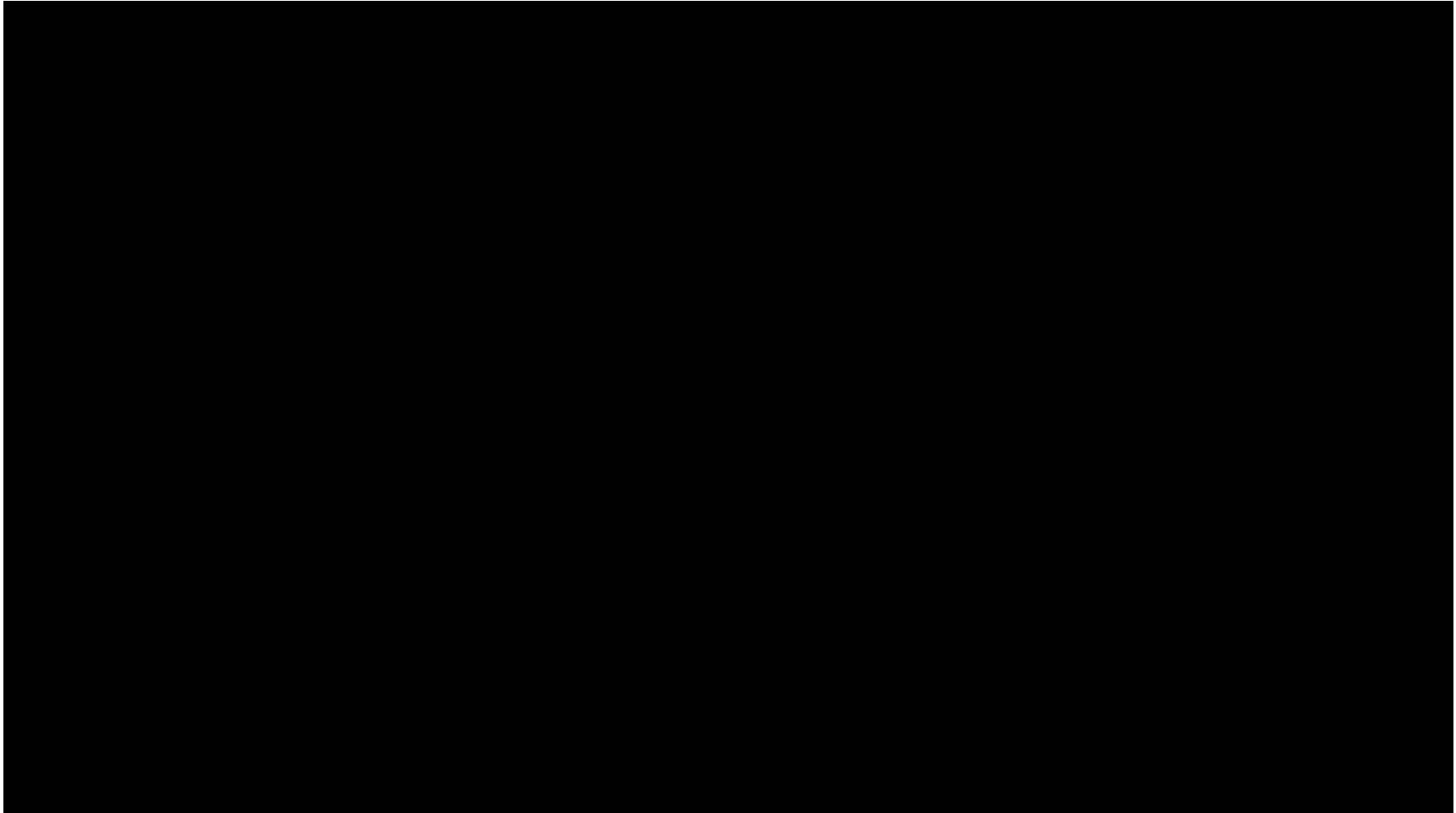
Receiver/Stimulator

Electrode array

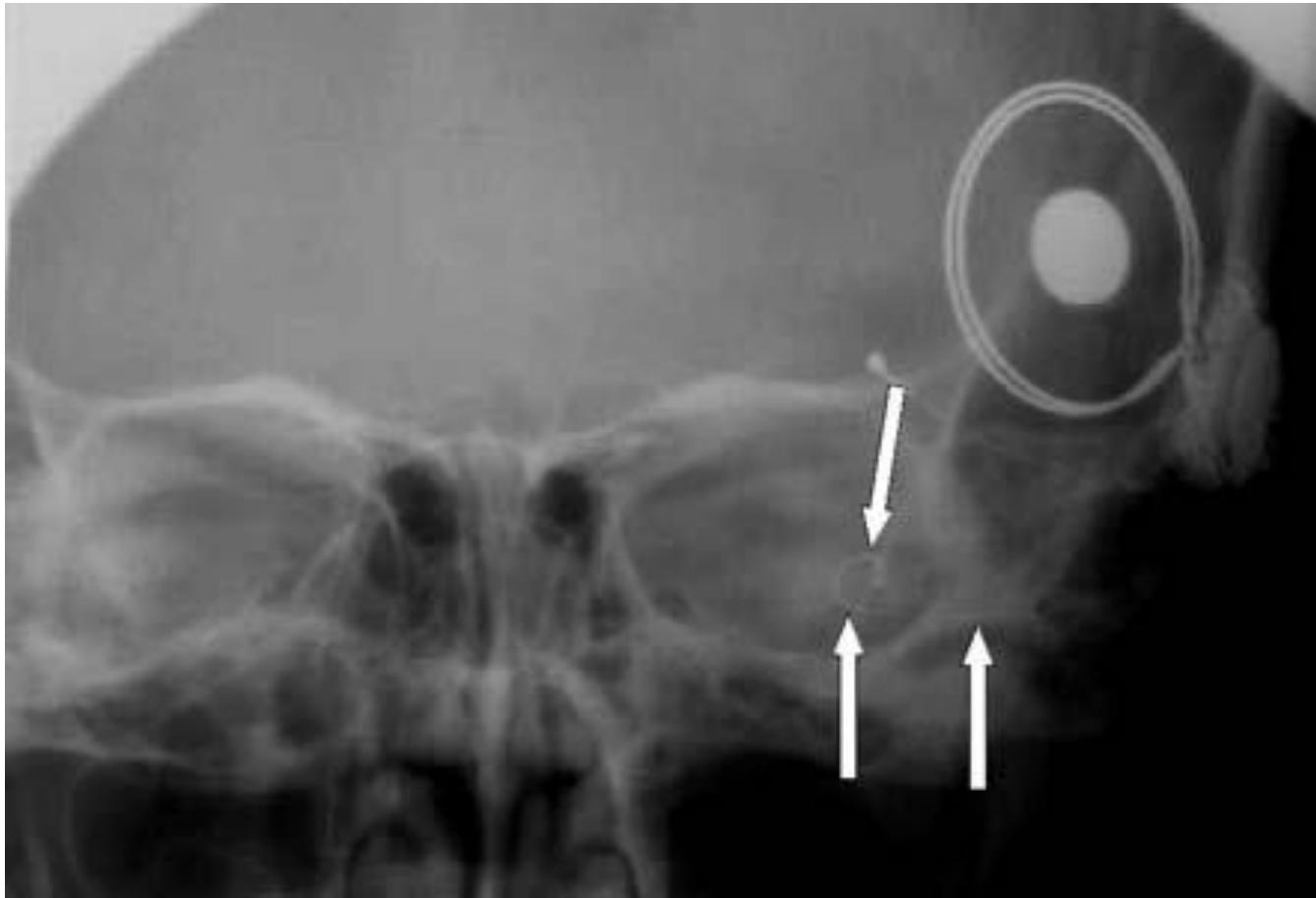
Speech processor
& microphone

Cochlear implant

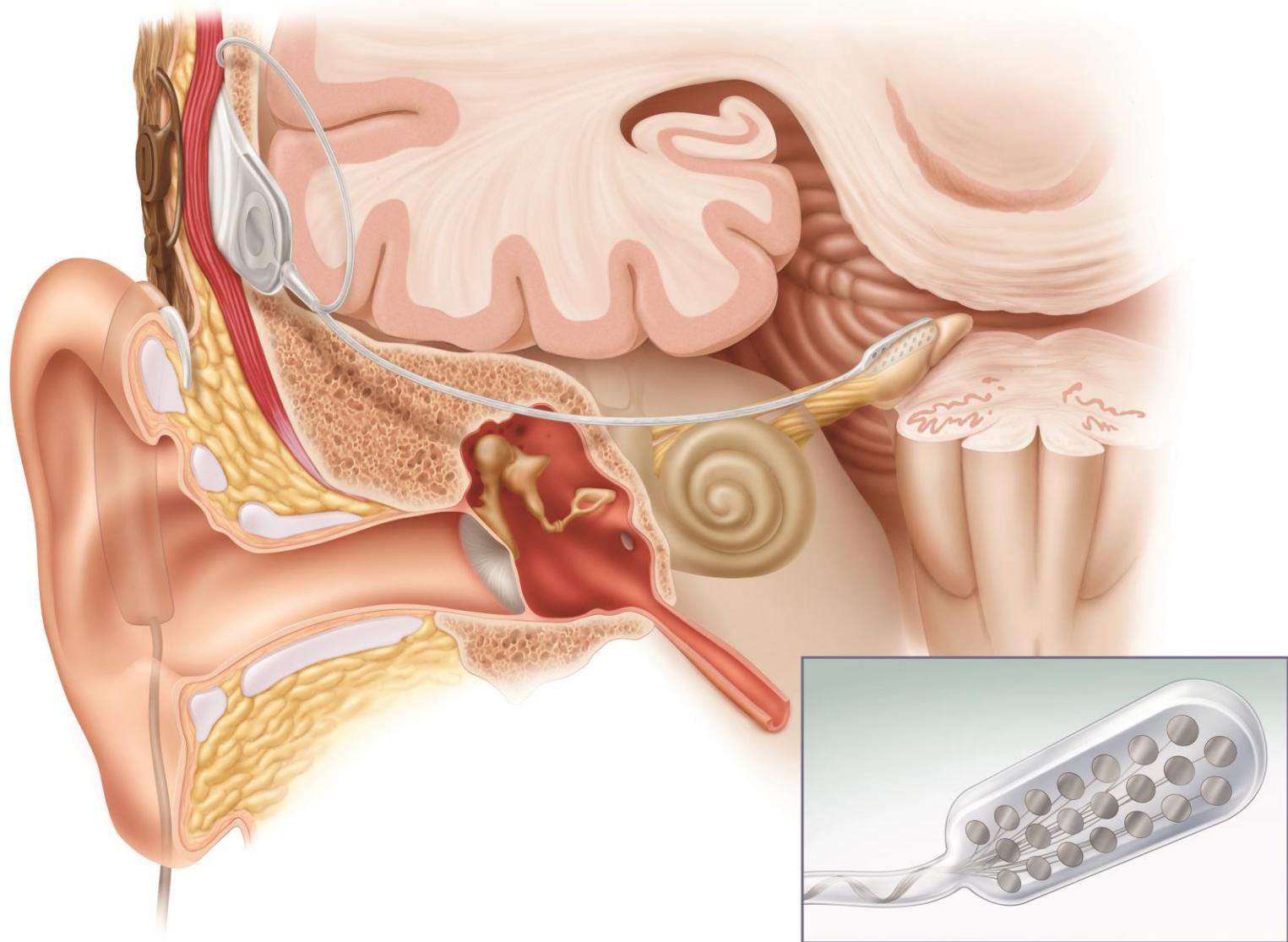
Elektroacoustic stimulation



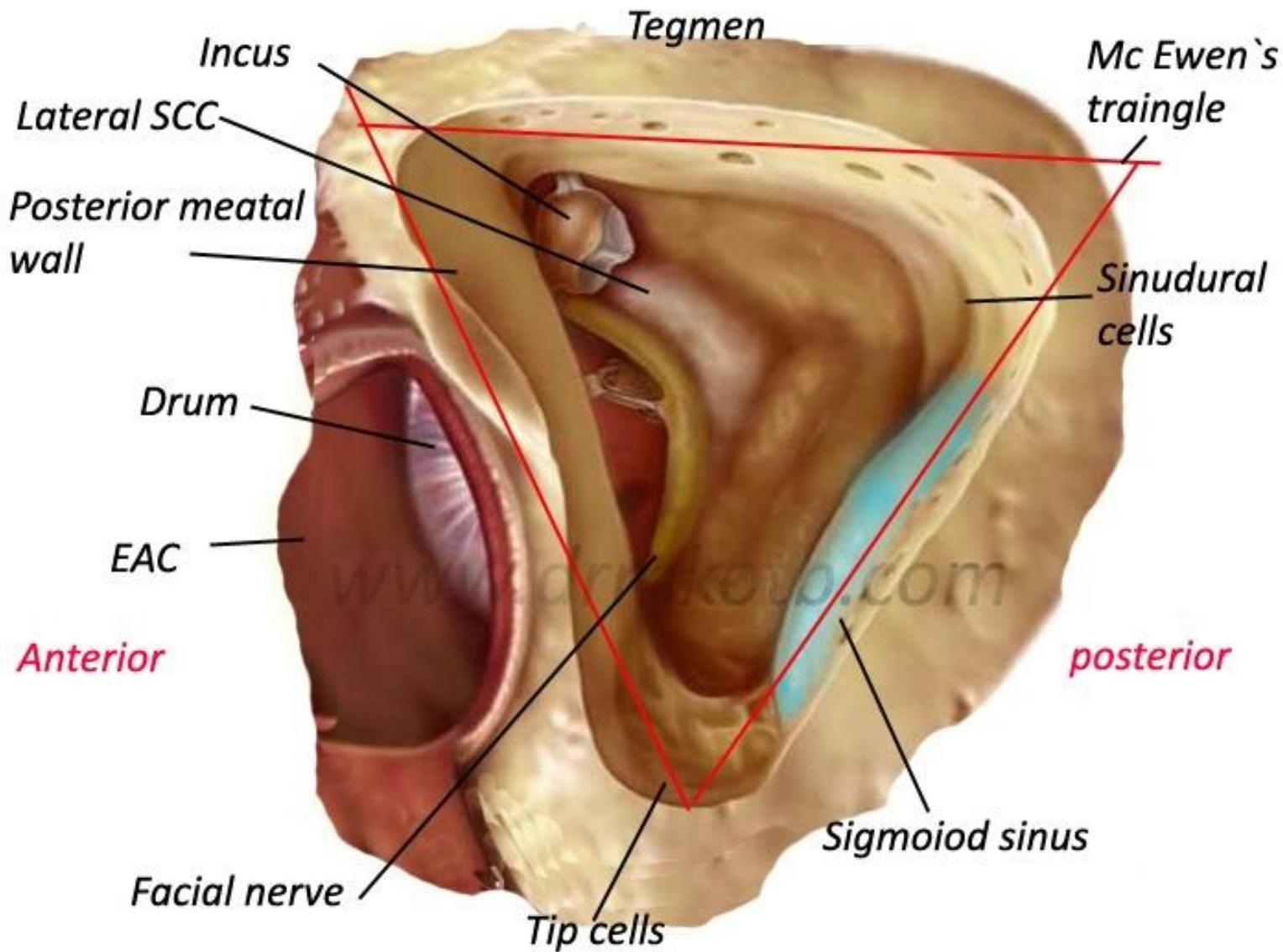
X-rays control



Brainstem implant



Surgical approaches



Suggested literature

- Petrovický, Anatomie III
- Černý, Betka, Atlas anatomie ucha
- Kahle, Frotscher, Color Atlas of Human Anatomy
- Gray, Anatomy
- tenDonkelaar et al., Klinische anatomie en embryologie
 - <http://www.iurc.montp.inserm.fr/cric/audition/english/corti/fcorti.htm>
 - <http://www.rcsullivan.com/www/ears.htm>
 - http://anatomy.uams.edu/anatomyhtml/neuro_atlas.html
 - <http://anatomy.uams.edu/anatomyhtml/gross.html>
 - <http://www.ghorayeb.com/Pictures.html>
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Thank you for attention