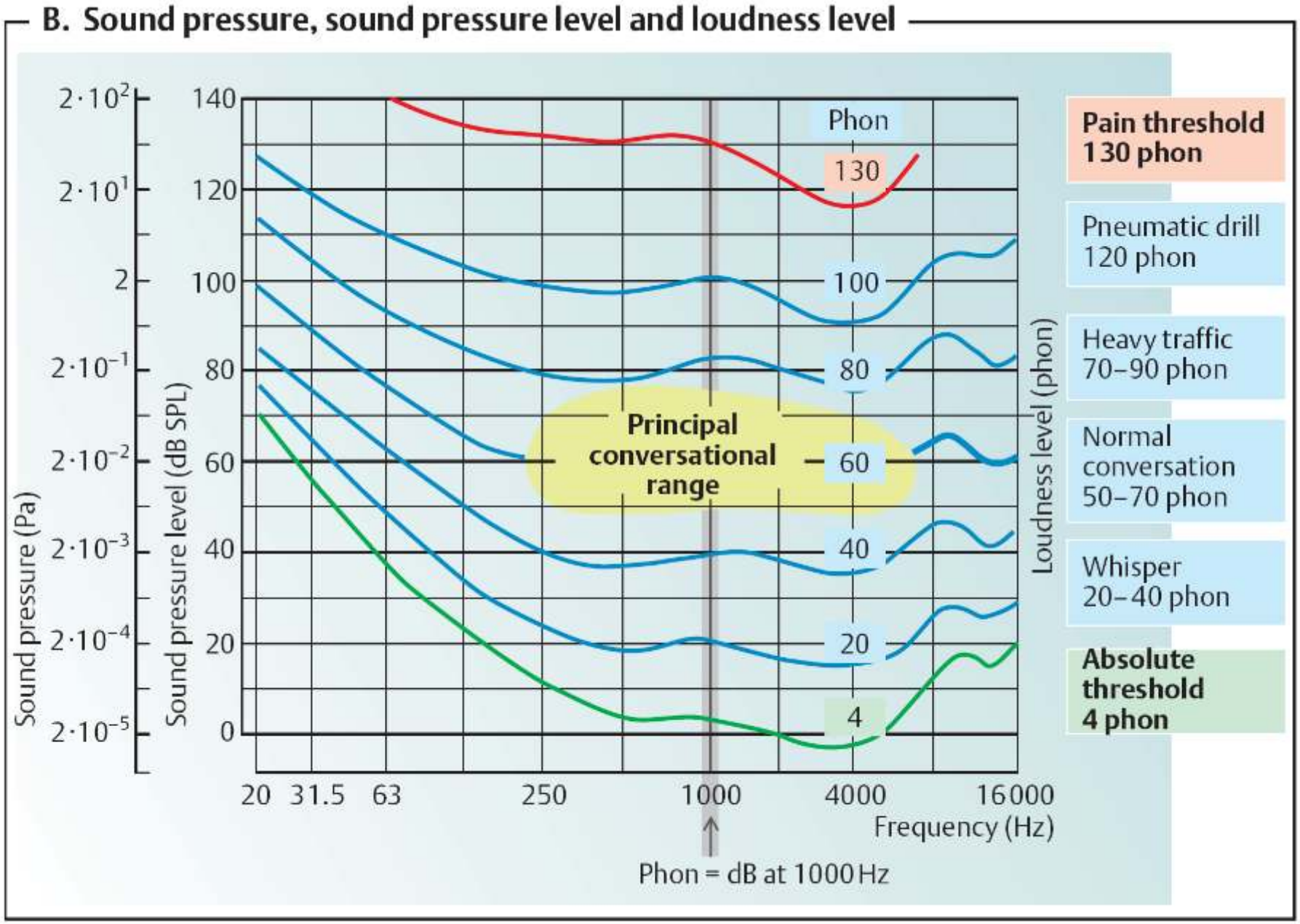
1st part: Hearing disorders

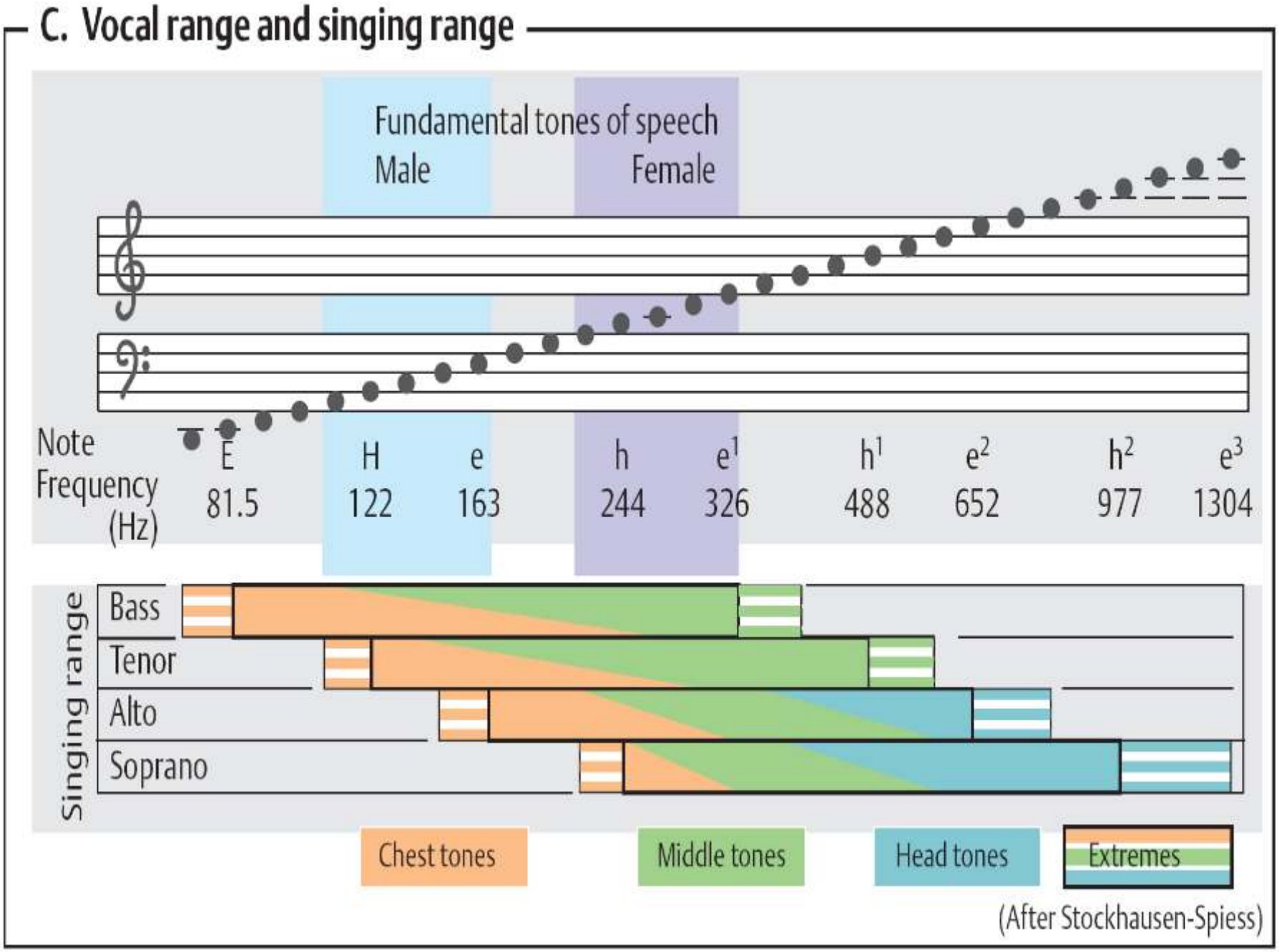
Charles University of Prague, First Medical Faculty

Outline of part 1

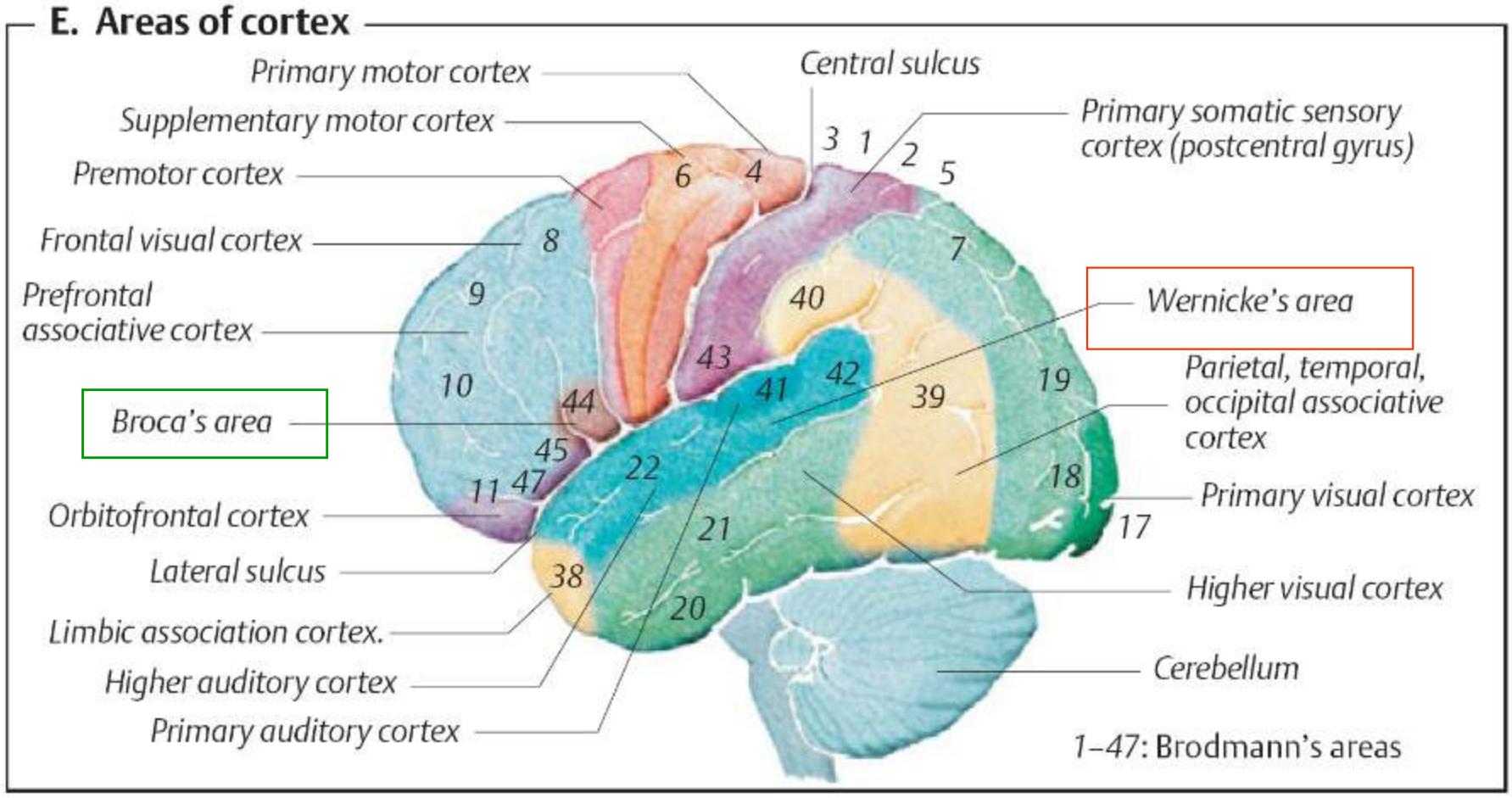
- **Intro: normal hearing, speech production and understanding**
- **Basics of anatomy of the ear -> for understanding the function**
- **Bone and air conduction**
- **Hearing disorders**
- **Functional classification of hearing performance**



Hearing range: frequencies and intensities



Vocal range and singing range



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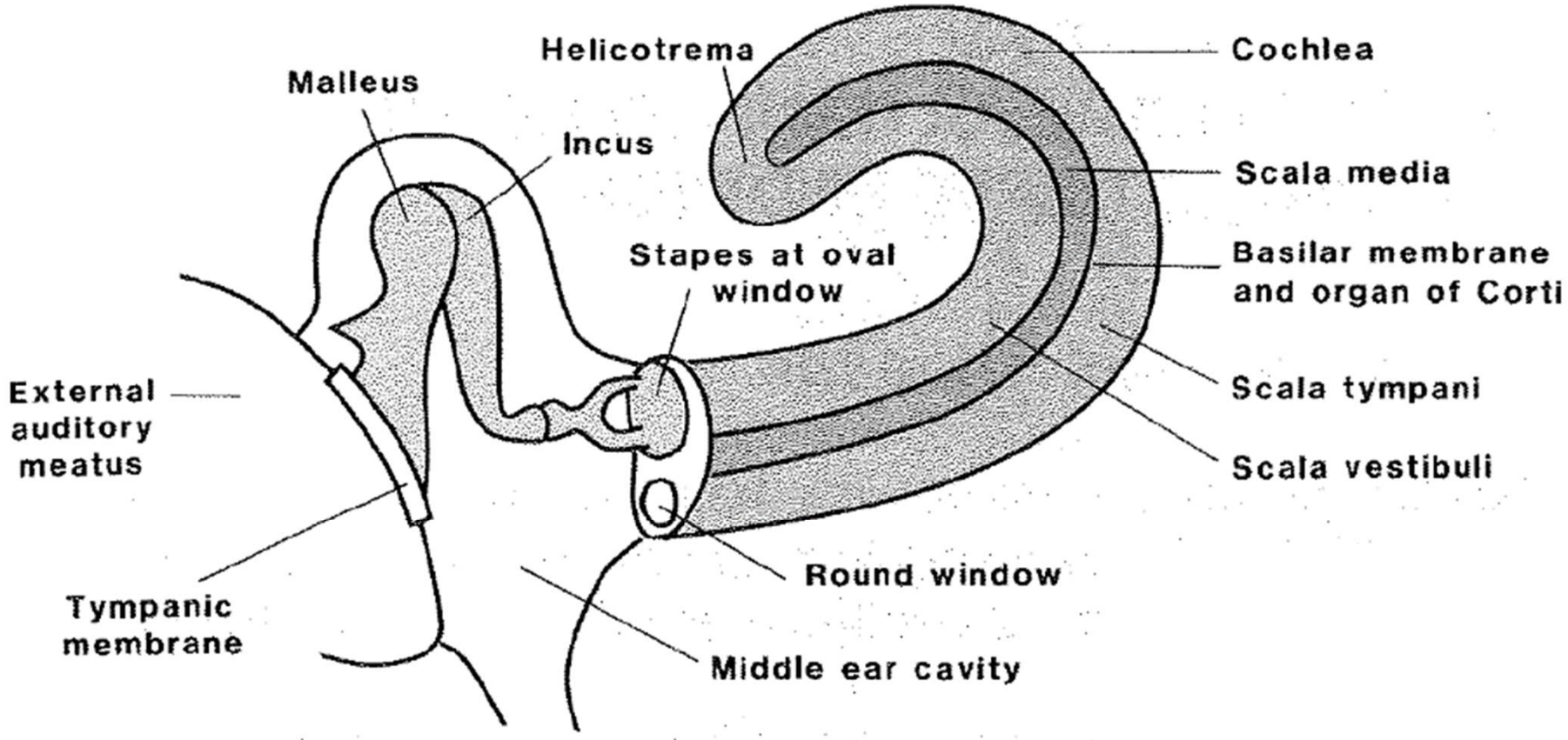
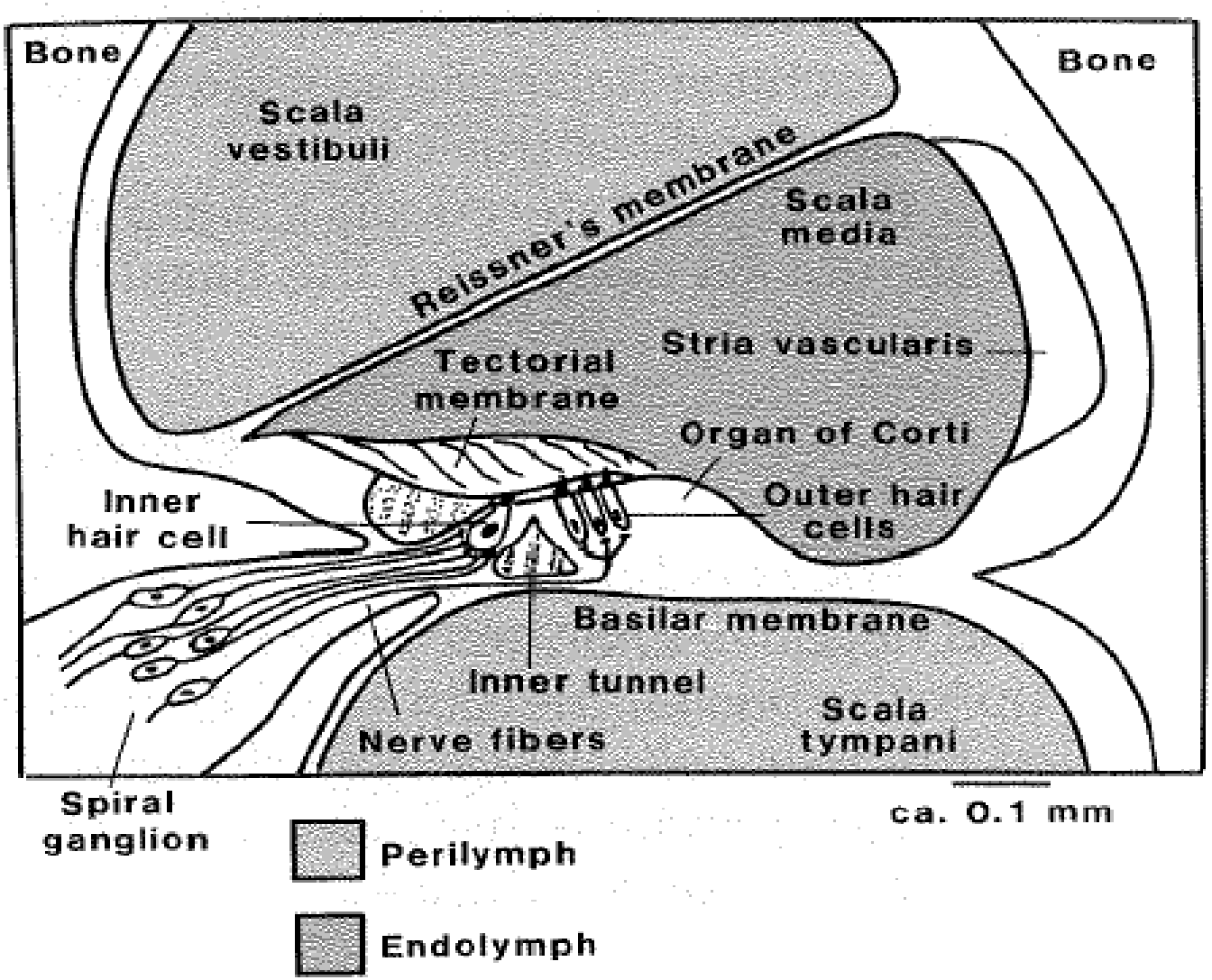
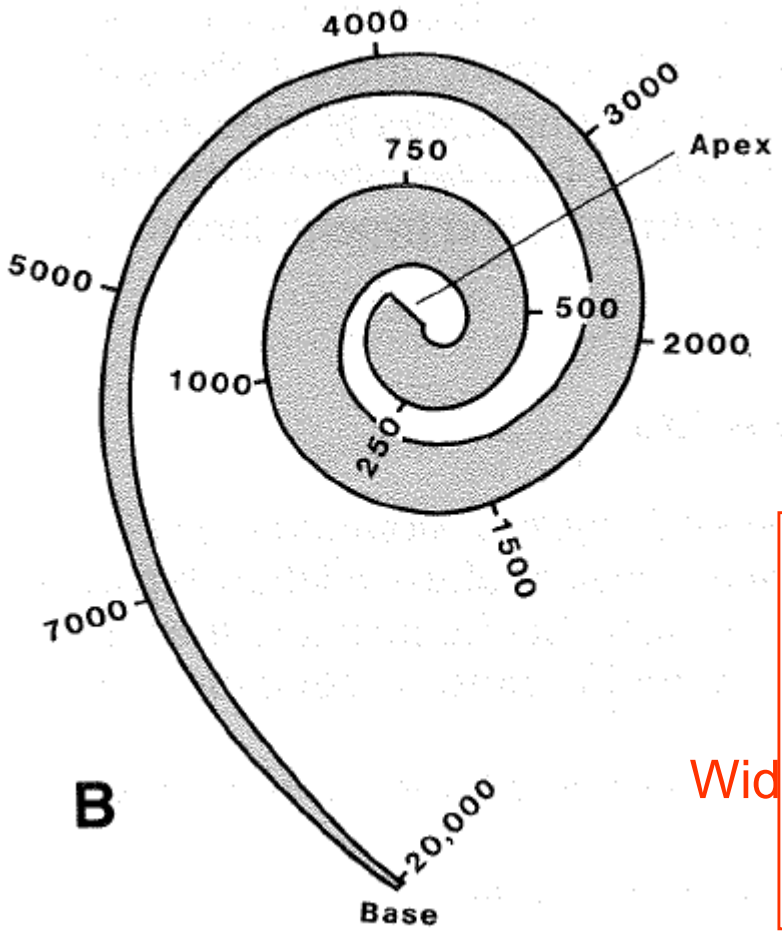
Two main speech centers within the Brodman areas

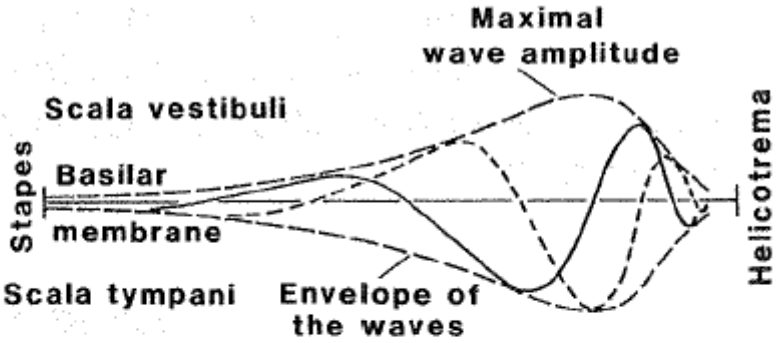


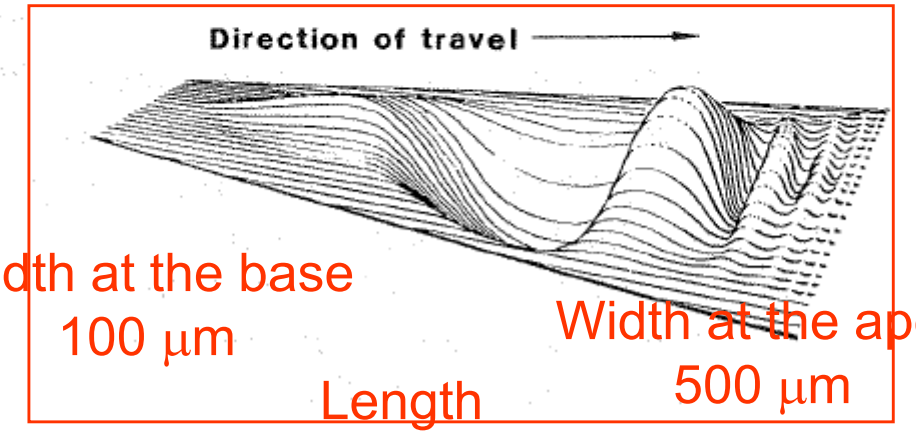
Outer, middle and inner ear



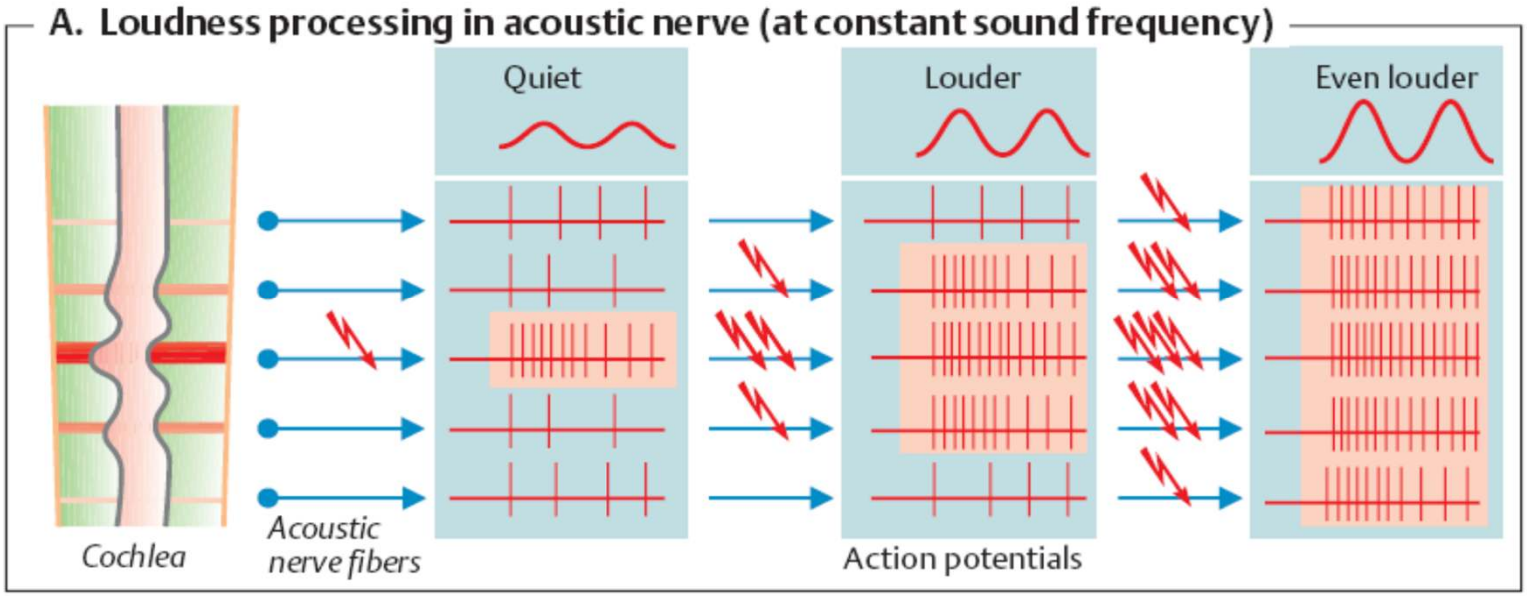
Organ of Corti

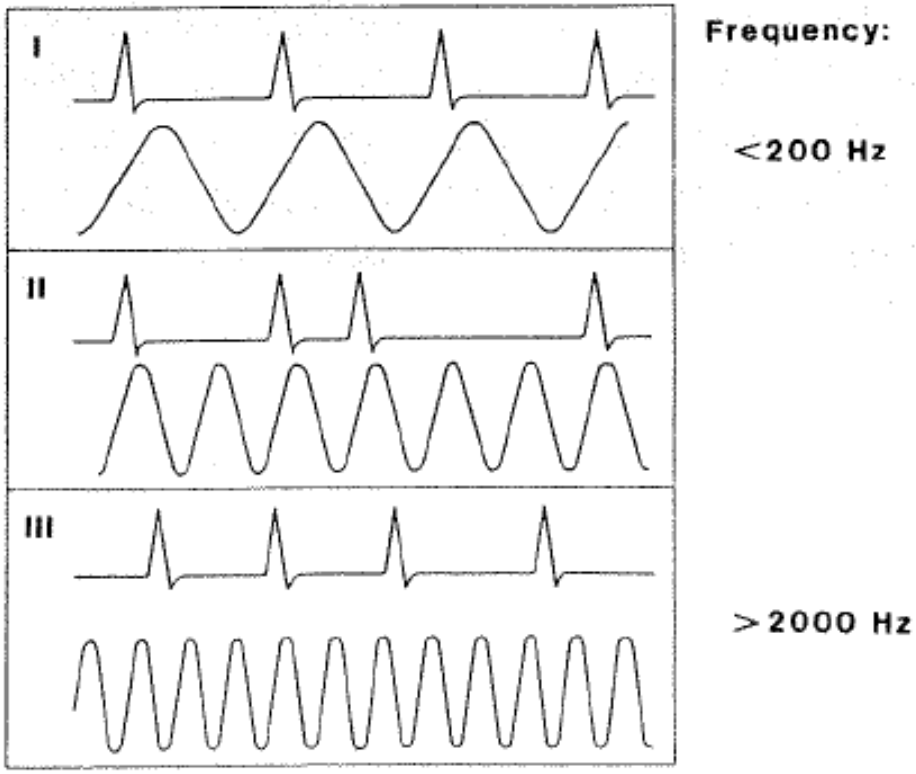






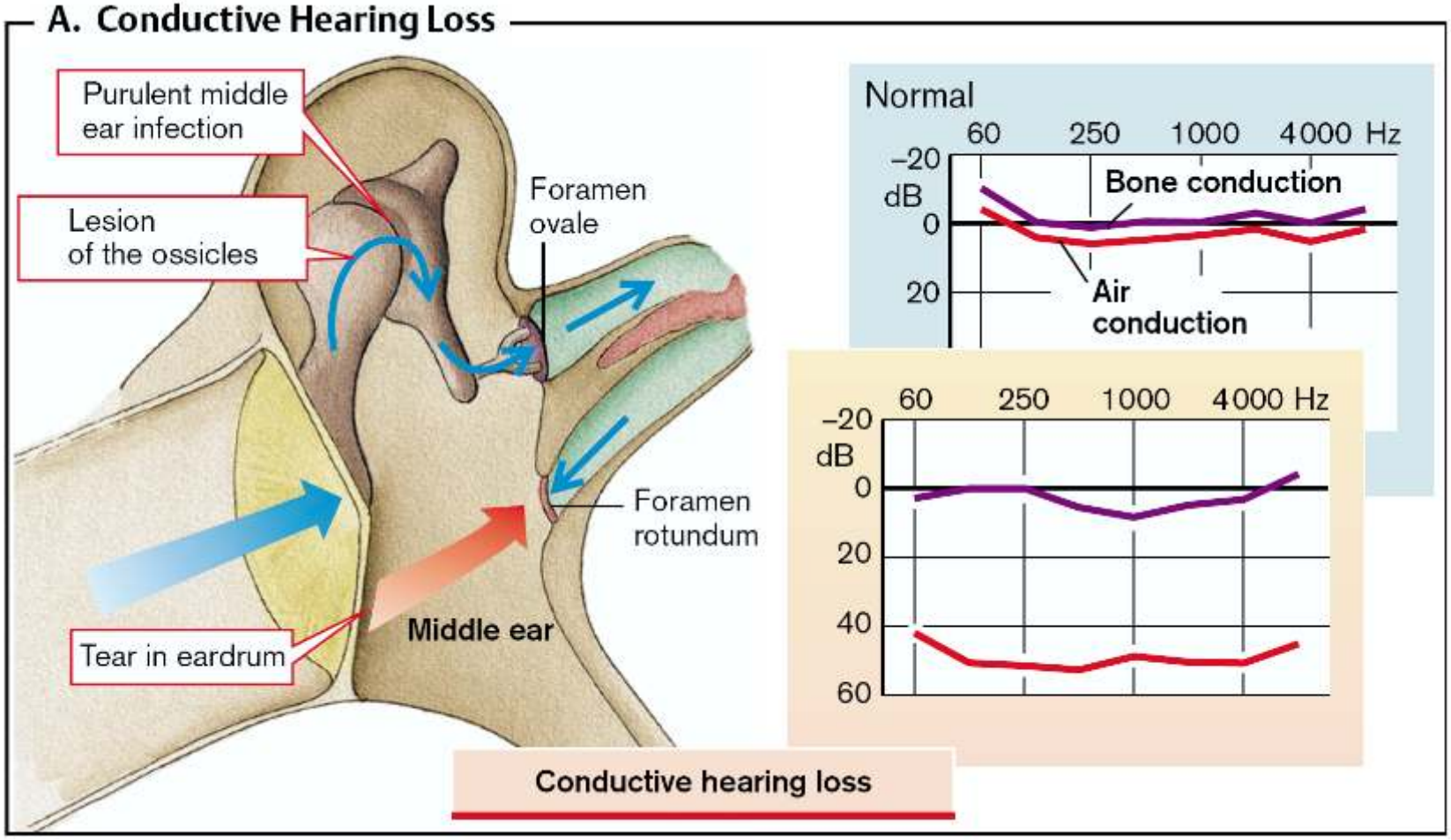
Basilar membrane – from above and unfolded into trapezoid plane



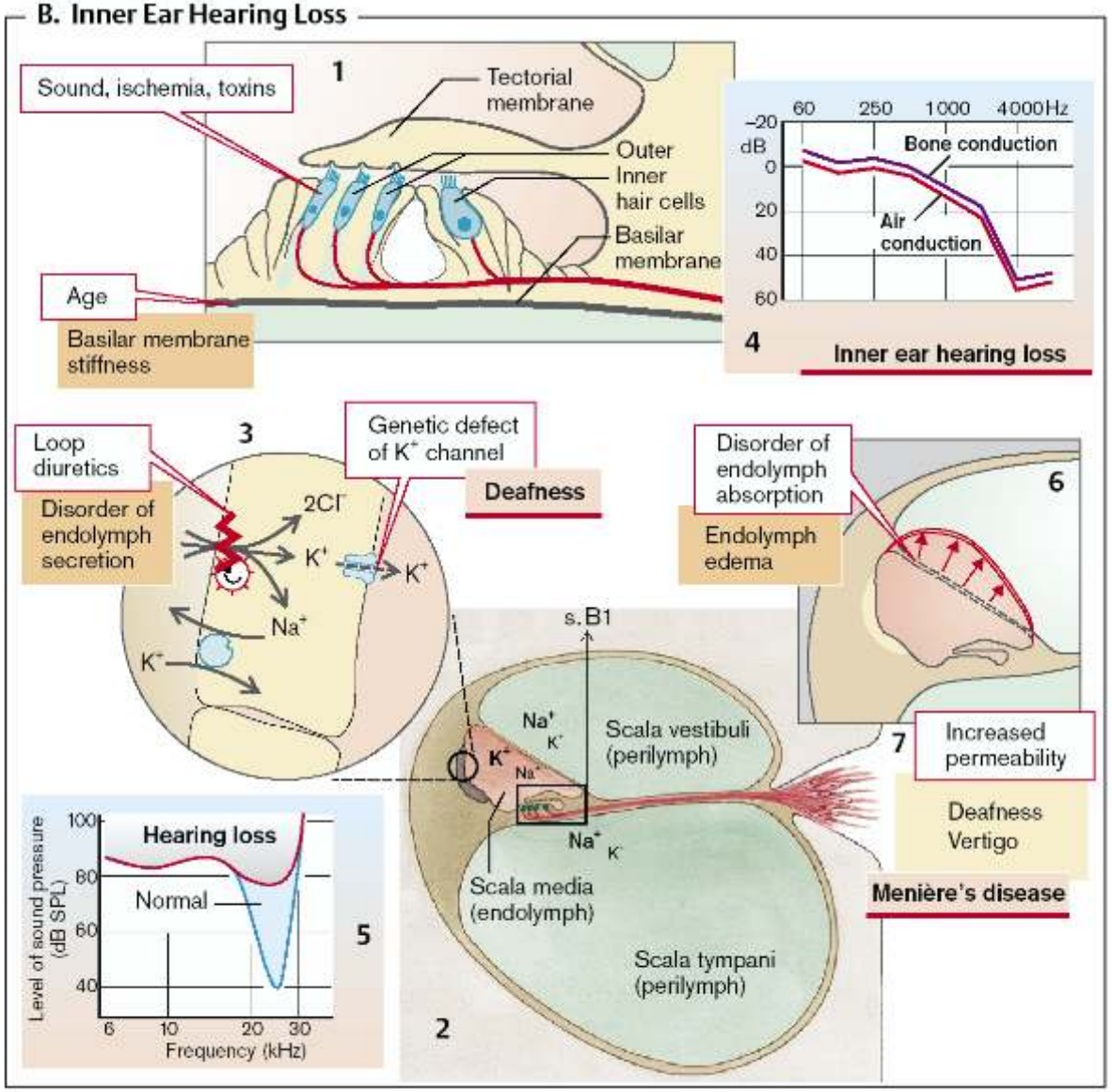


Encoding of sound loudness and frequency

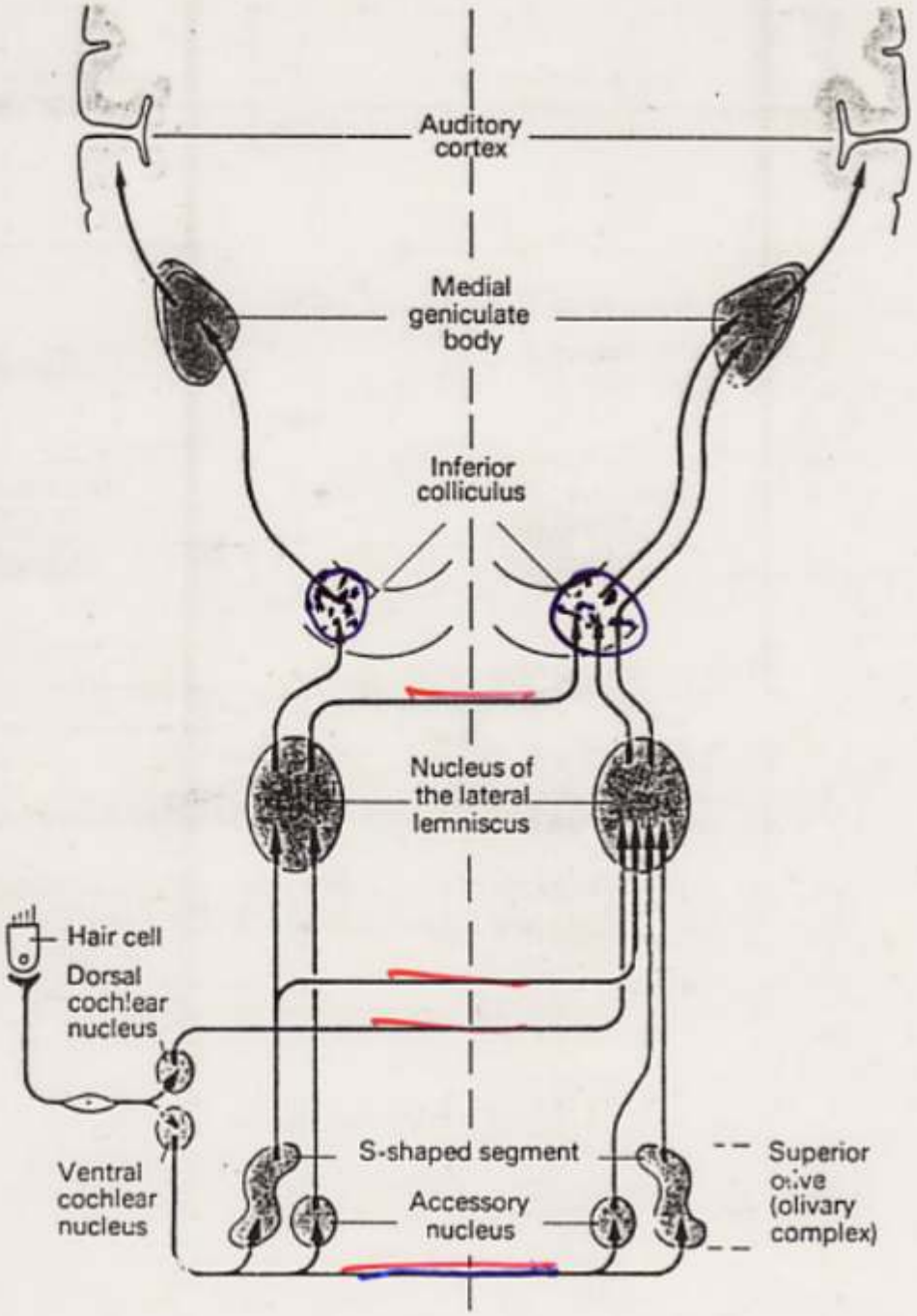
Conduction: through air and bone
Hearing loss: A. conductive, B. sensorineural

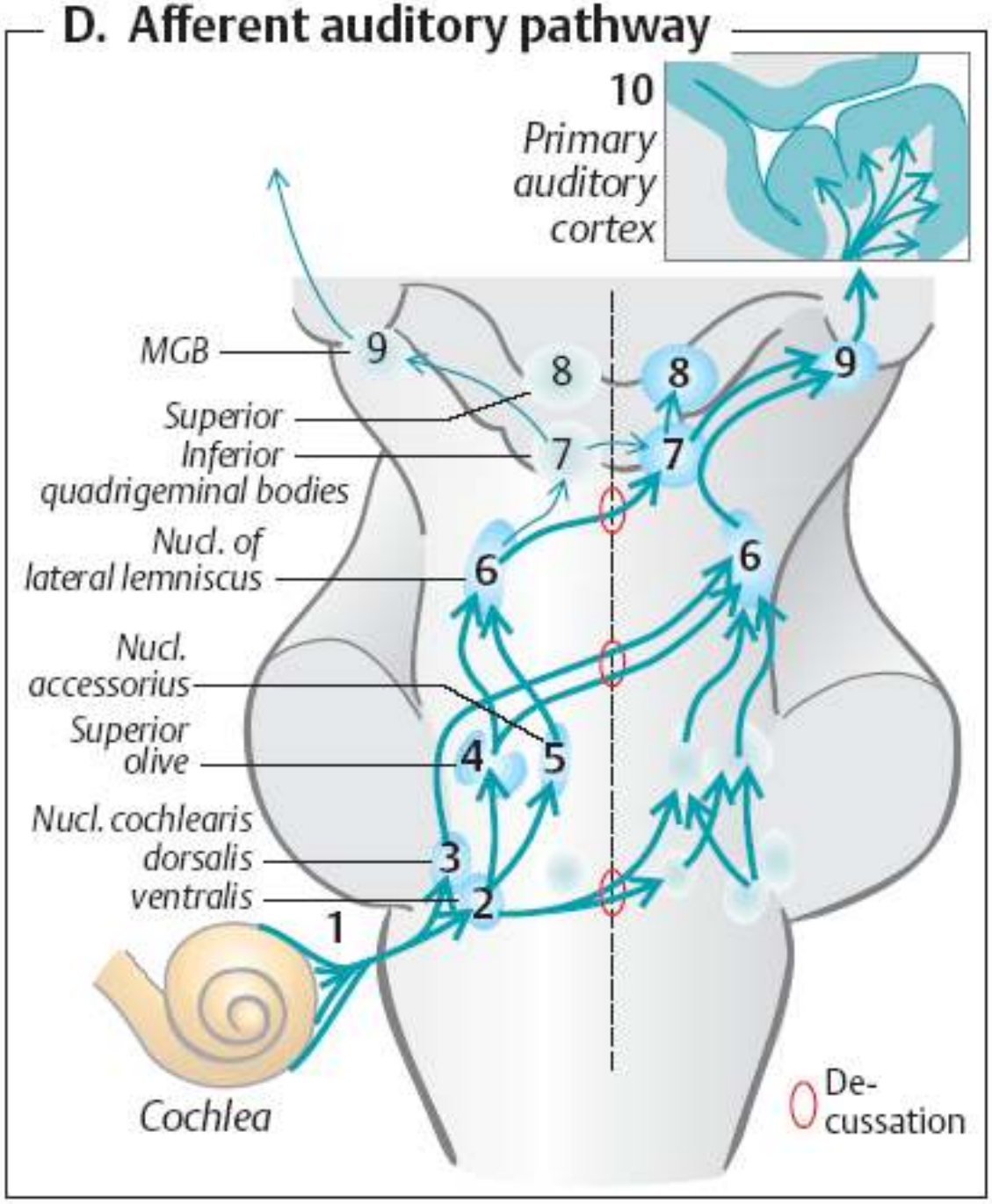


Hearing loss: A. conductive, B. sensorineural



Silbernagl/Lang, Color Atlas of Pathophysiology © 2000 Thieme


Auditory cortex
Medial geniculate body
Inferior colliculus
Nucleus of the lateral lemniscus
Hair cell
Dorsal cochlear nucleus
Ventral cochlear nucleus
S-shaped segment
Accessory nucleus
Superior olive (olivary complex)



Auditory pathway

Three notes to lateral symmetry of auditory pathway

>Compared to visual pathway, where left and right parts of visual scene only cross, the auditory pathway is from the third (first binaural) neuron on backed up by the crossings

>Speech centers are laterally assymetric (due to probable functional purpose)

>Difference between the left and the right ear is used in sound localization

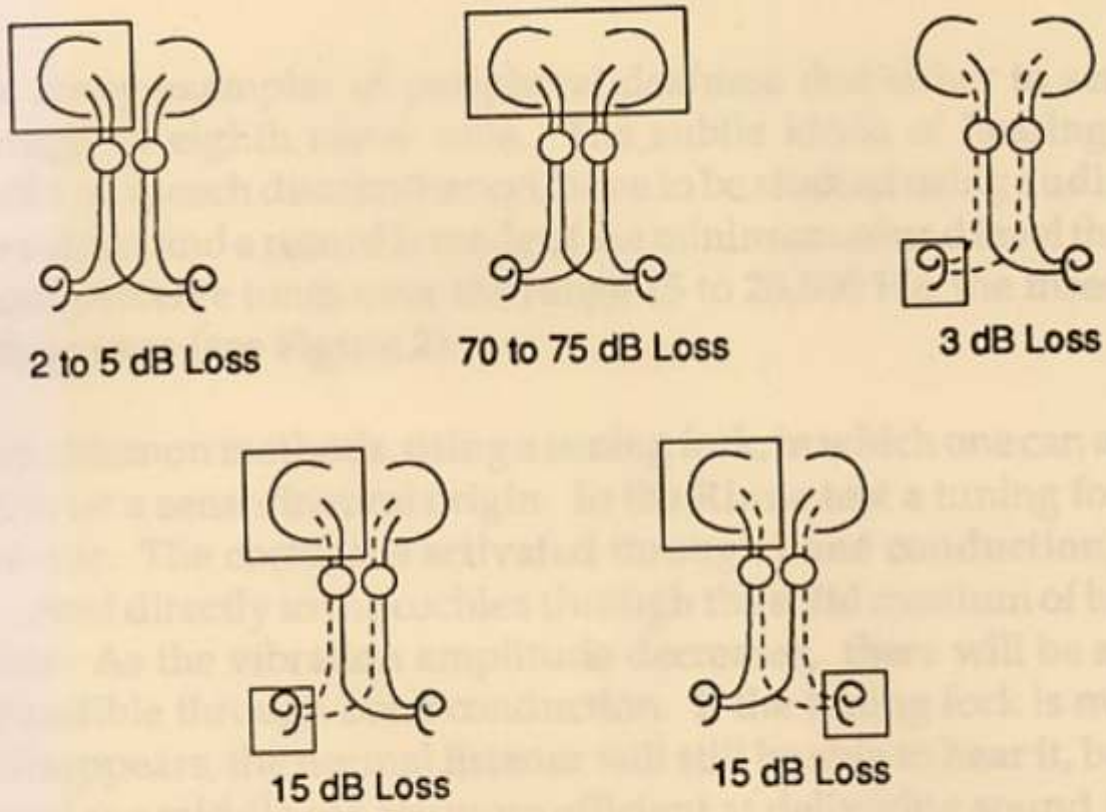


Figure 18. Summary of experiments demonstrating bilaterality of auditory pathways in dog. Number below each diagram is hearing loss in decibels; box around symbol for cerebral cortex or cochlea indicates destruction of it. In D, hearing depends on uncrossed fibers of left lateral lemniscus, whereas in E hearing depends upon crossed fibers of right lateral lemniscus. Hearing loss is equal in the 2 cases.

Functional classification of hearing loss

(measured without hearing aid)

1 normal hearing (threshold about 4 phon)

2 hardness of hearing

(hearing aid may be indicated:
at the band 500 Hz - 2 kHz bilaterally
threshold rise of 35 - 40 dB,
speech audiometry –threshold rise of more than 35 dB
low comprehension of loud speech at less than 4 m)

3 (practical) deafness

(does not hear loud voice at the ear, own voice,
threshold rise of 75 - 80 dB)

4 *deaf-and-dumbness*

(when the speech is not rehabilitated with inborn deafness)

Causes of hearing loss

- otosclerosis (in 0,5 - 1 % of elderly)
- conductive disorders
- hereditary and inborn disorders
- toxic damage
- meningoencefalitis
- profesional damage
- presbyakusia
- Menier’s disease

What and Where in auditory cortex

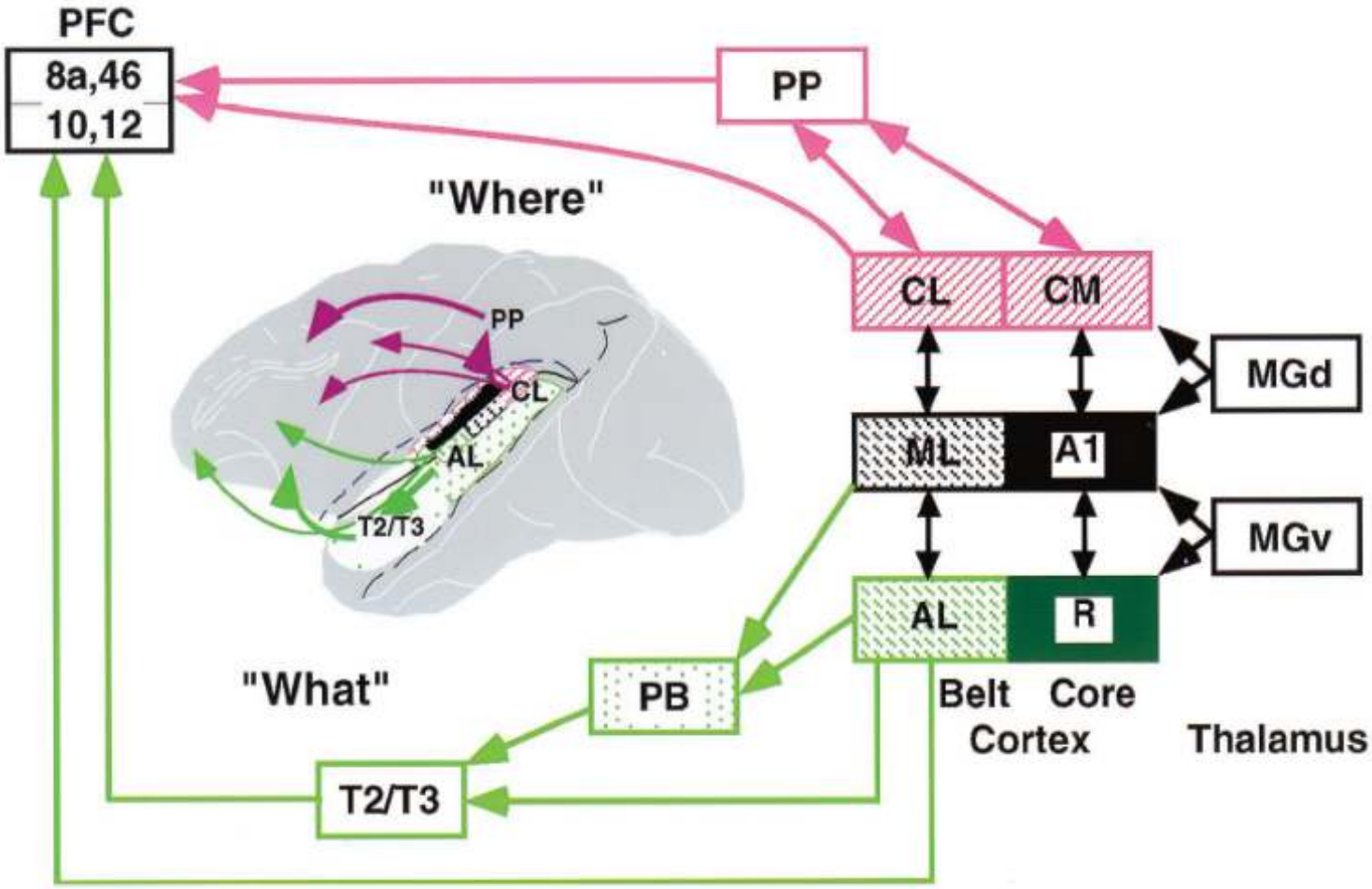


Fig. 6. Schematic flow diagram of "what" and "where" streams in the auditory cortical system of primates. The ventral "what"-stream is shown in green, the dorsal "where"-stream, in red. [Modified and extended from Rauschecker (35); prefrontal connections (PFC) based on Romanski *et al.* (46).] PP, posterior parietal cortex; PB, parabelt cortex; MGd and MGv, dorsal and ventral parts of the MGN.

"You have an inner ear disorder."

2nd part: Speech, development, perception and production. Hearing prosthetics, cochlear implants.

Charles University of Prague, First Medical Faculty

Outline of part 2

- **introduction: speech and development (ontogenesis) of speech**
- **perception and production of speech**
- **classical and revised view of speech ontogenesis, based on new experiments with infants**
- **hearing impairment and speech, cochlear implants**

Electrophysiology: non-invasive and invasive

„Psycho-physical“
and electro-
encephalo-graphic
responses
of infants and
small children

Stages of language acquisition

6 mo **Beginning of distinct babbling.**

1 y **Beginning of language understanding, one word utterances.**

1.5 y **Dictionary of 30 to 50 words.**

2 y **Dictionary of 50 to several hunderd words. Two word (telegraphic/ short message) speaker.**

2.5 y **Three or more word sentences. Many grammatical errors and idiosyncratic expressions. Good understanding of language.**

3 y **Dictionary of 1000 words.**

4 y **Dictionary of 2000 words. Speech competence close to adults.**

[Kandel, Schwartz, Jessel, Principles of Neural Science, 1991]

EN: babble, CZ: žvatlat, SK: džavotať, GE: plappern,

LAT: balbuties, et cetera…

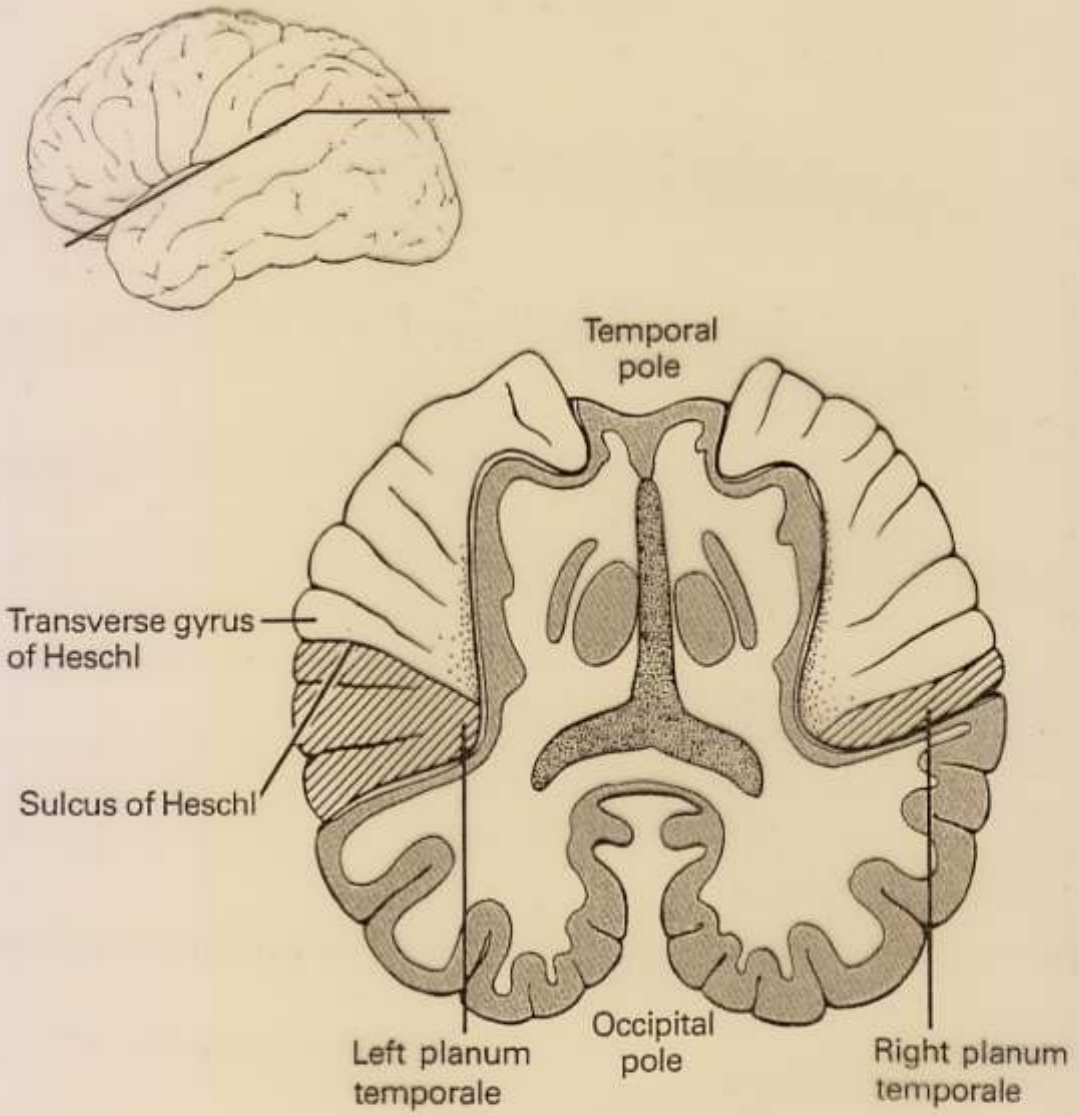


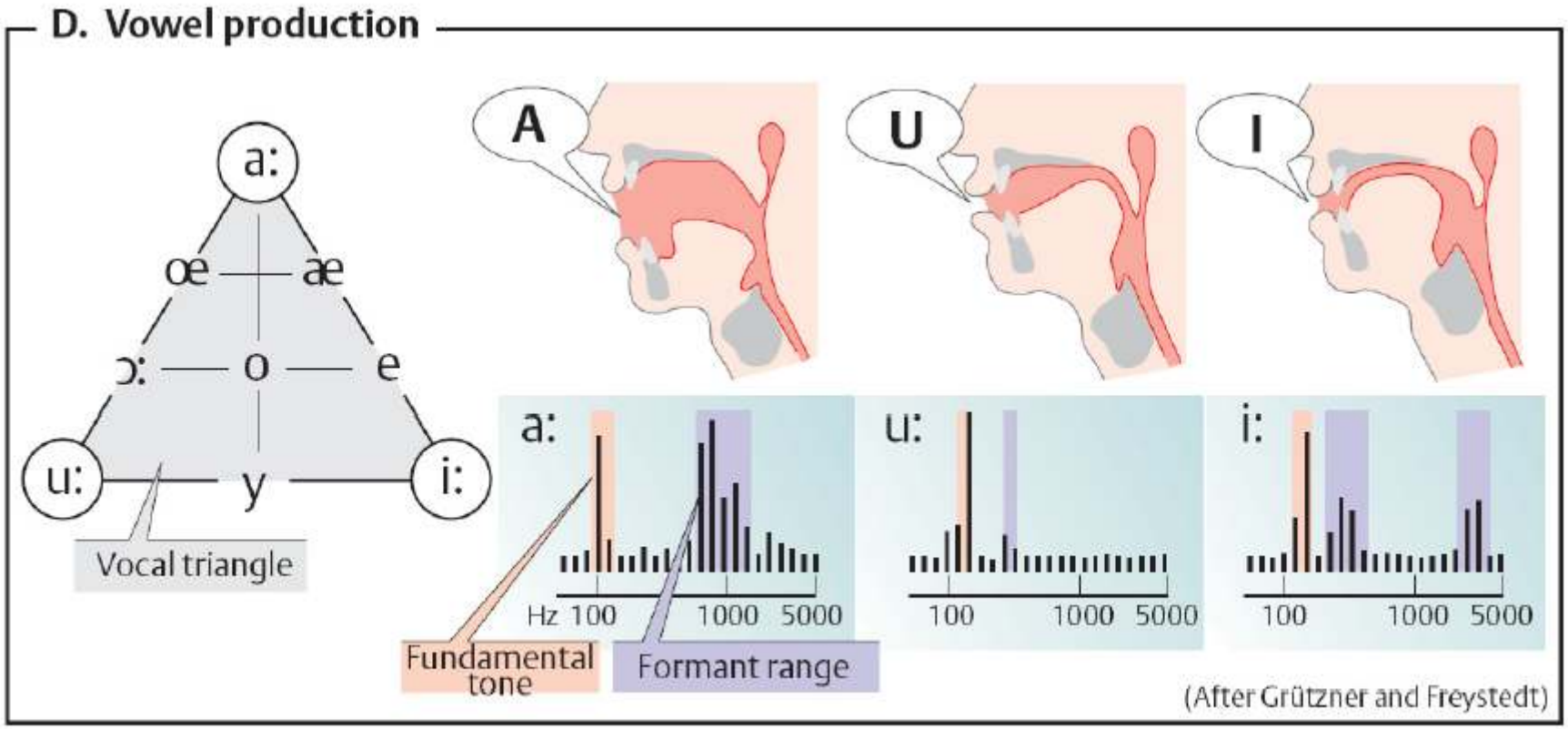
FIGURE 53–8
The planum temporale is larger in the left hemisphere than in the right in the majority of human brains (horizontal section in the plane of the Sylvian fissure). (Adapted from Geschwind and Levitsky, 1968.)

TABLE 53–2. Linguistic Dominance and Handedness

Handedness	Dominant hemisphere (%)		
	Left	Right	Both
Left or mixed handed	70	15	15
Right handed	96	4	0

(Data from Rasmussen and Milner, 1977.)

Formants of vowels in English



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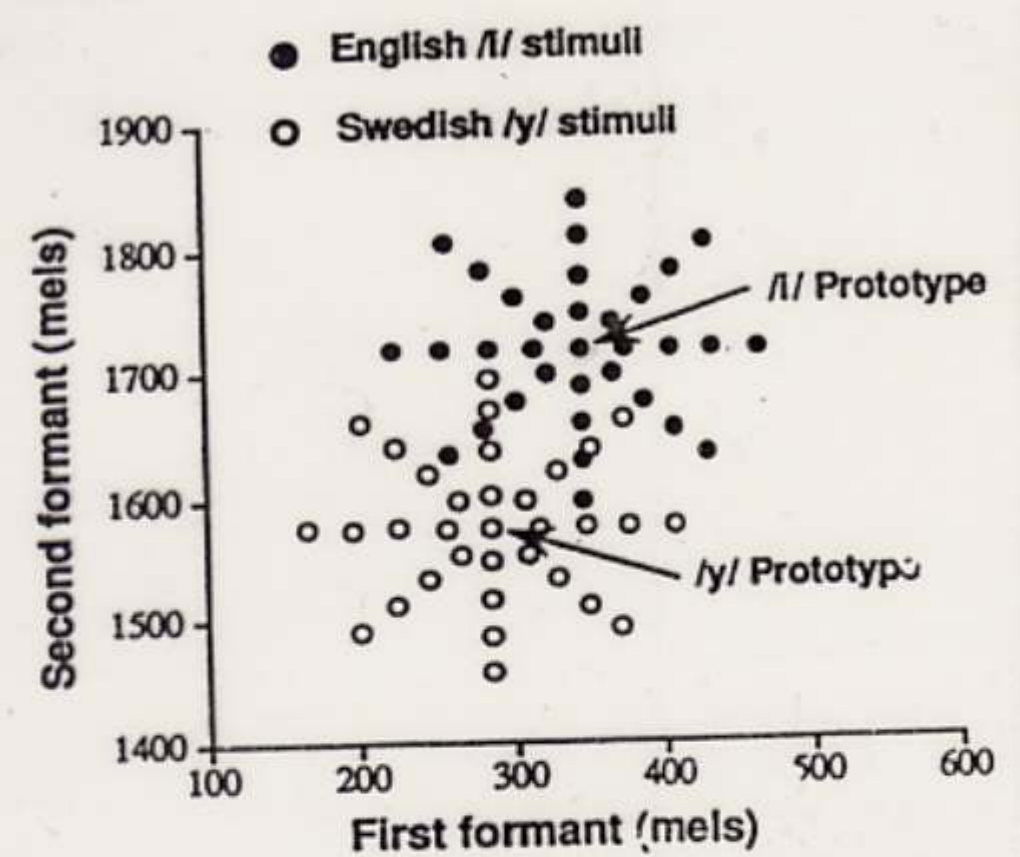


Fig. 1. Six-month-old infants from America and Sweden were tested with two sets of vowel stimuli, American English /i/ and Swedish /y/. Each set included an exceptionally good instance of the vowel (the prototype) and 32 variants that formed four rings (eight stimuli each) around the prototype (*8*).

Prototypes of vowels and synthetic vowels in formant space
[P. Kuhl et al., 1992]

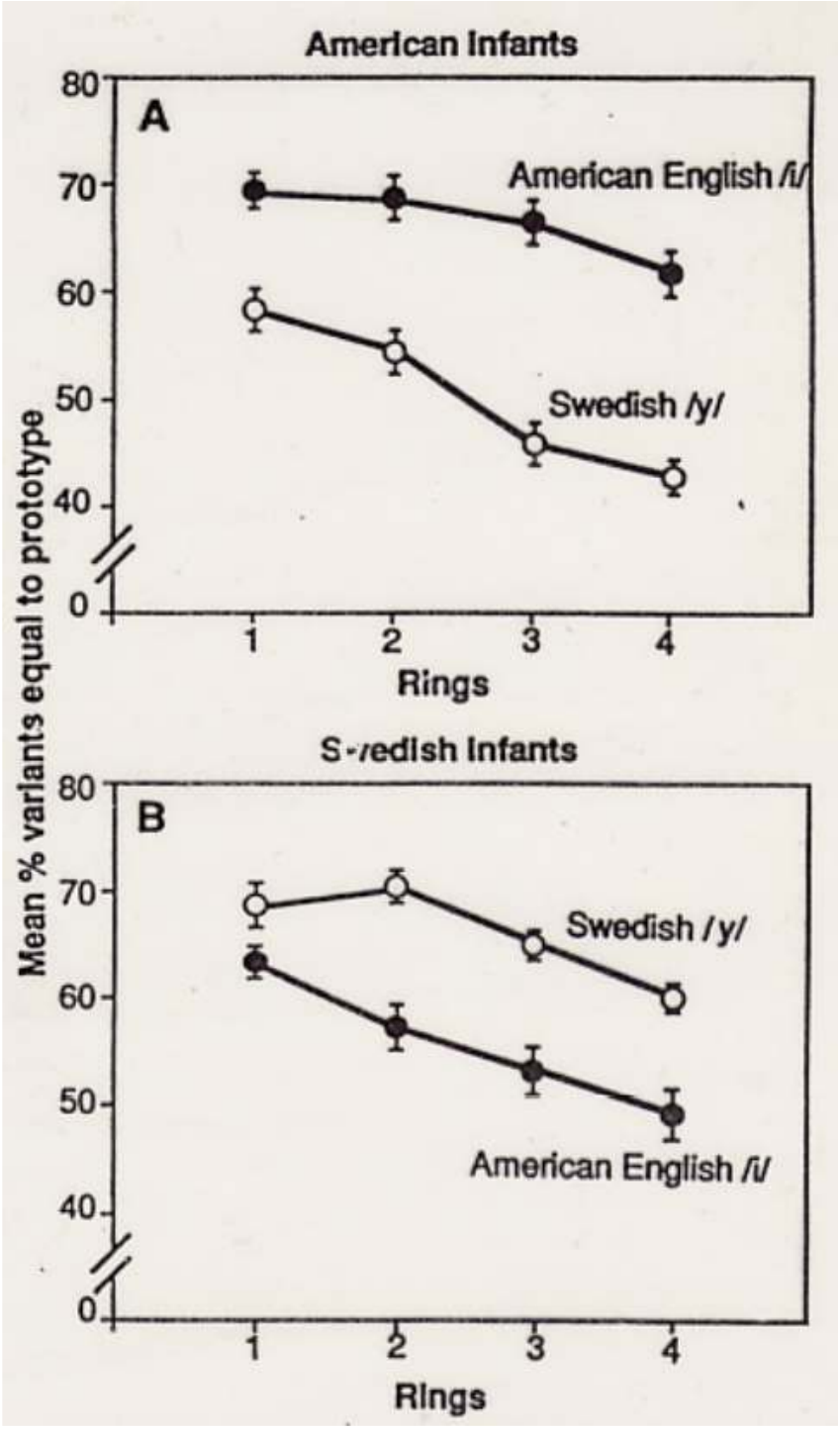
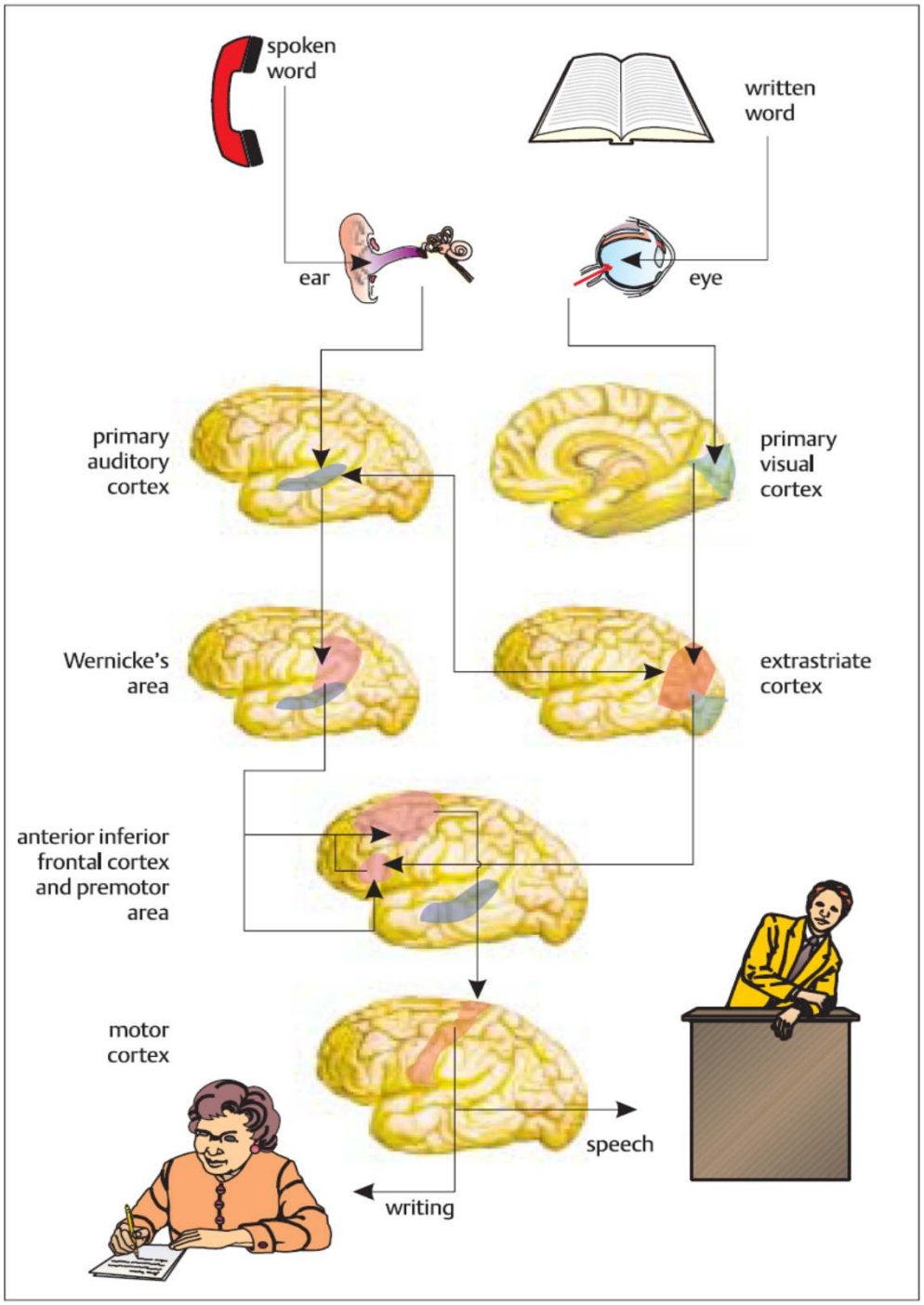


Fig. 2. Results showing an effect of language experience on young infants' perception of speech. Two groups of 6-month-old infants, (**A**) American and (**B**) Swedish, were tested with two different vowel prototypes, American English /i/ and Swedish /y/. The mean percentage of trials in which infants equated variants on each of the four rings to the prototype is plotted. Infants from both countries produced a stronger magnet effect (equated variants to the prototype more often) for the native-language vowel prototype when compared to the foreign-language vowel prototype. (Error bars = standard error.)

„Psycho-physical" responses of 6 month old infants to vowels of native and foreign language

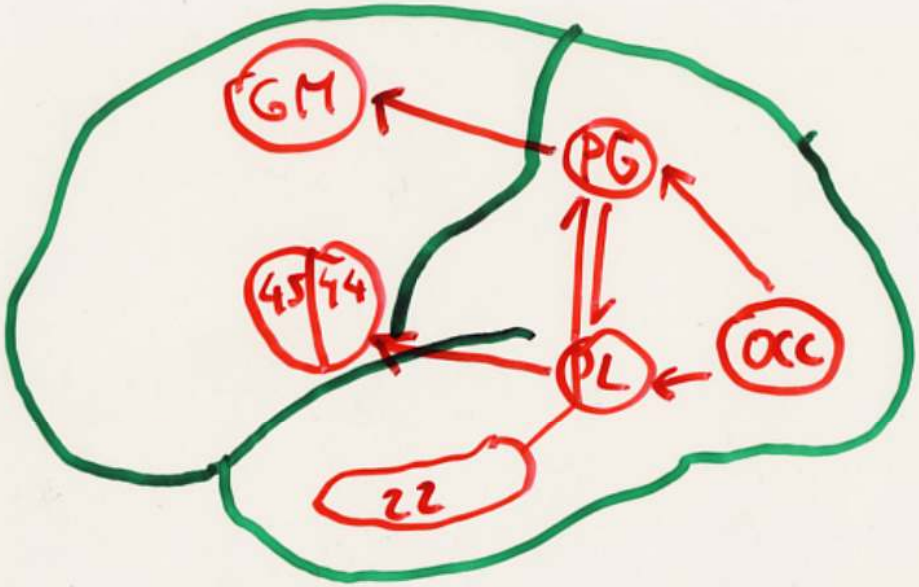
[P. Kuhl et al., 1992]



Speech processing in cerebral cortex

APHASIAS (acc. Hrbek, Trchý)

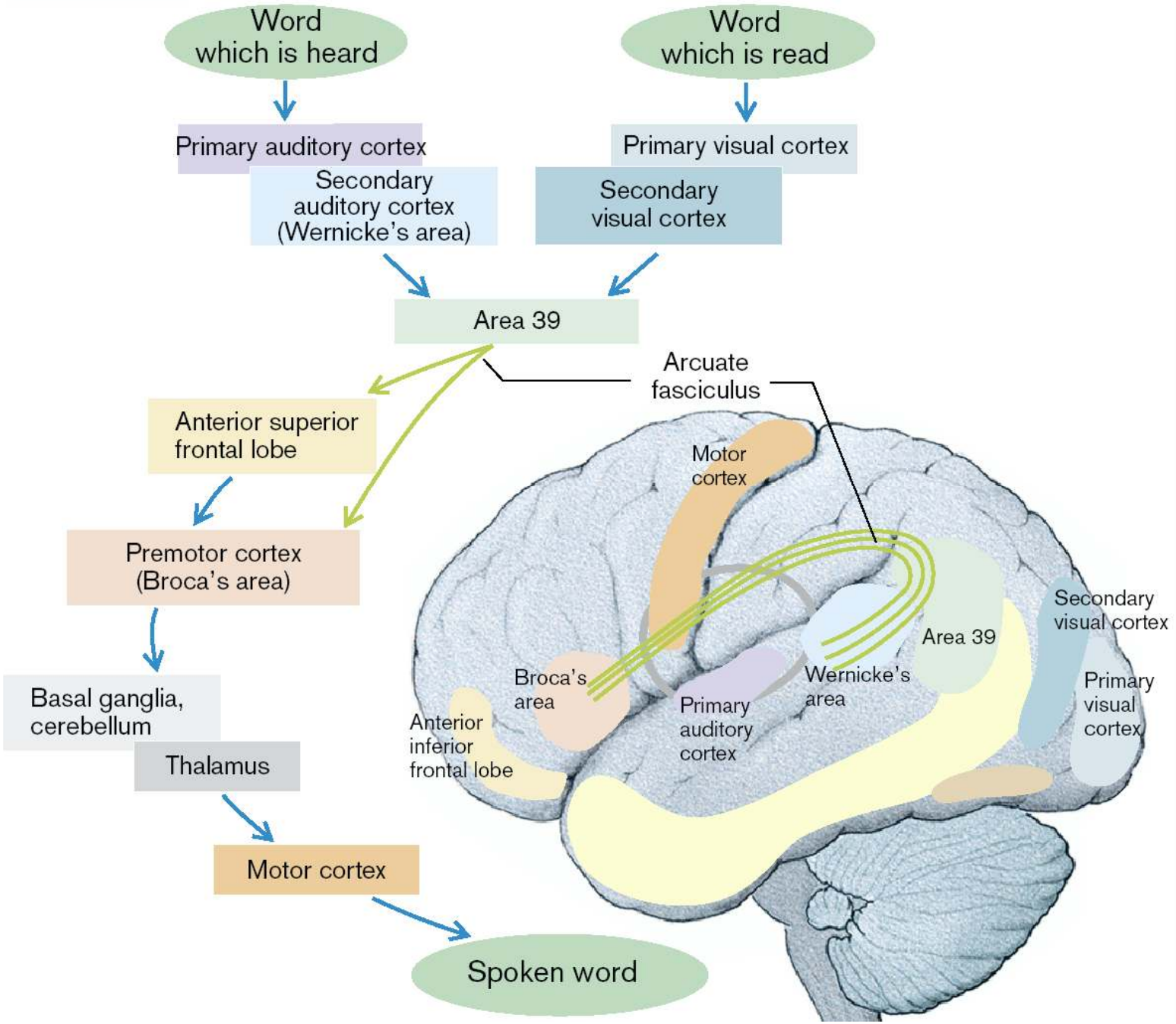
BARTEO, 1985



LEFT OUTER HEMISPHERE

PG - parietal graphesthetic center
PL - parietal logesthetic center
OCC - occipital assoc. center 22 - Wernicke's c. - (logesthetic c.)
GM - graphomotoric center 44, 45 - Broca's c. - (logomotoric c.)

A. Aphasias

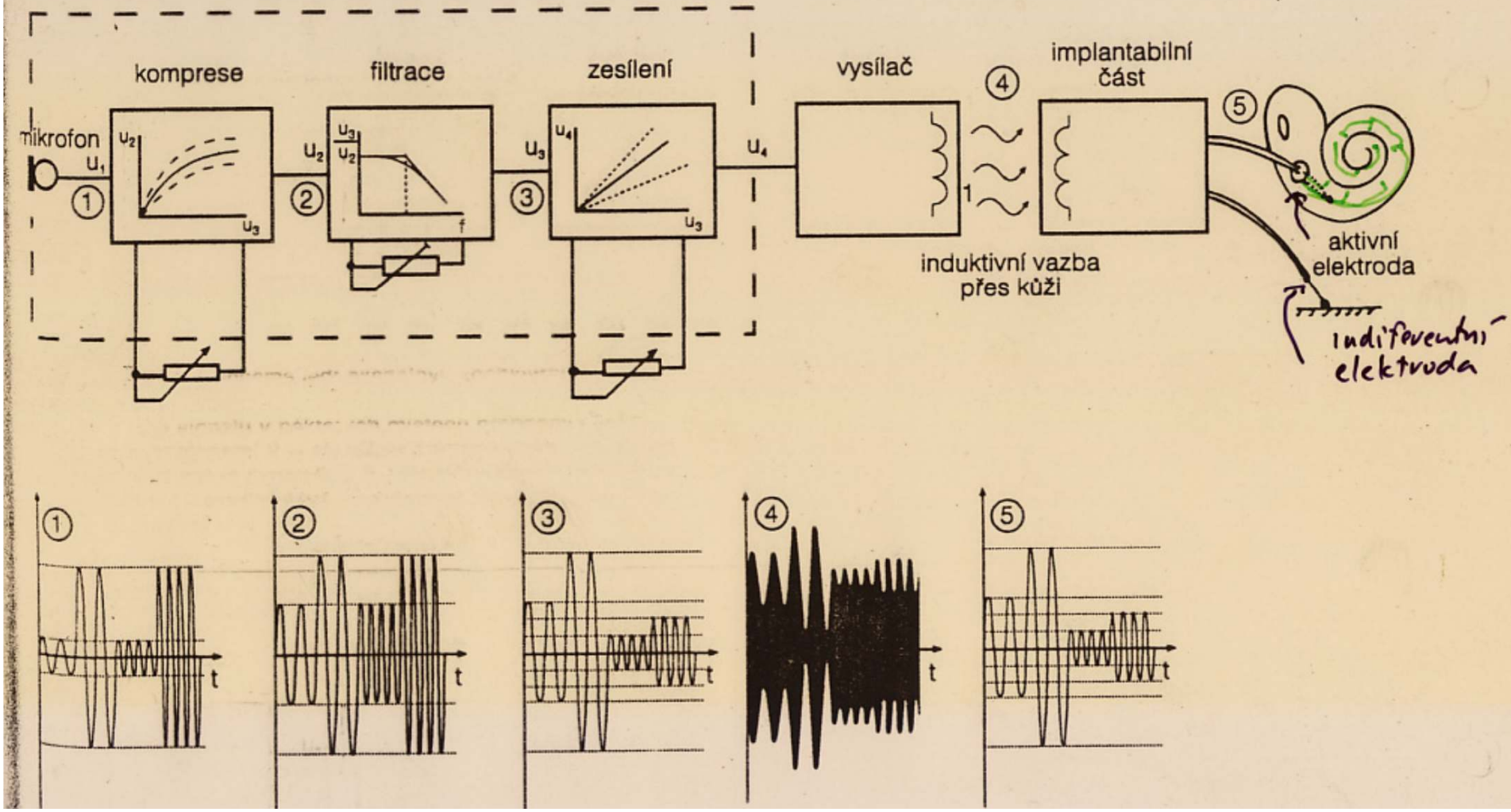

Word which is heard
Word which is read
Primary auditory cortex
Primary visual cortex
Secondary auditory cortex (Wernicke's area)
Secondary visual cortex
Area 39
Arcuate fasciculus
Anterior superior frontal lobe
Premotor cortex (Broca's area)
Basal ganglia, cerebellum
Thalamus
Motor cortex
Spoken word
Motor cortex
Broca's area
Anterior inferior frontal lobe
Primary auditory cortex
Wernicke's area
Area 39
Secondary visual cortex
Primary visual cortex

Type	Spontaneous speech	Repetition of words	Language comprehension	Finding words
Broca's aphasia	abnormal	abnormal	normal	impaired
Wernicke's aphasia	fluent (at times logorrhea, paraphasia, neologisms)	abnormal	impaired	impaired
Conduction aphasia	fluent, but paraphasic	markedly impaired	normal	abnormal, paraphasic
Global aphasia	abnormal	abnormal	abnormal	abnormal
Anomic aphasia	fluent	normal, but anomic	normal	impaired
Achromatic aphasia	fluent	normal, but anomic	normal	impaired
Motor transcortical aphasia	abnormal	normal	normal	abnormal
Sensory transcortical aphasia	fluent	fluent	abnormal	abnormal
Subcortical aphasia	fluent	normal	abnormal (transient)	abnormal (transient)

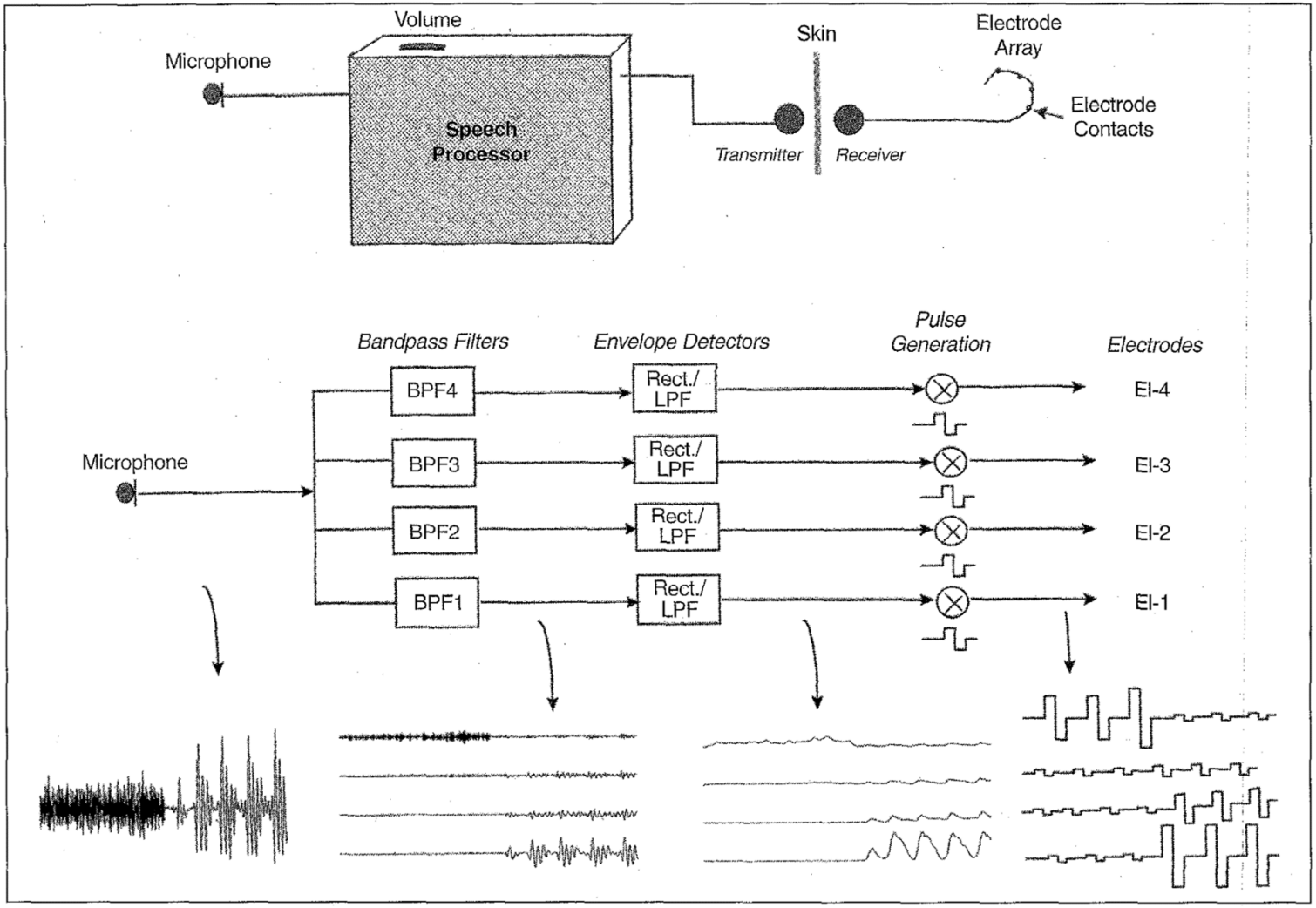
Cochlear implant – single channel

2. Nahoře – Blokové schéma jednokanálové kochleární neuroprotézy

Dole – Průběh signálu v některých místech přenosové cesty: 1 – signál za mikrofonem, 2 – signál za kompresorem (na všech kmitočtech redukována dynamika), 3 – signál za filtrem (potlačeny vyšší kmitočty), 4 – amplitudově modulovaný signál, 5 – signál po demodulaci (totožný s 3)

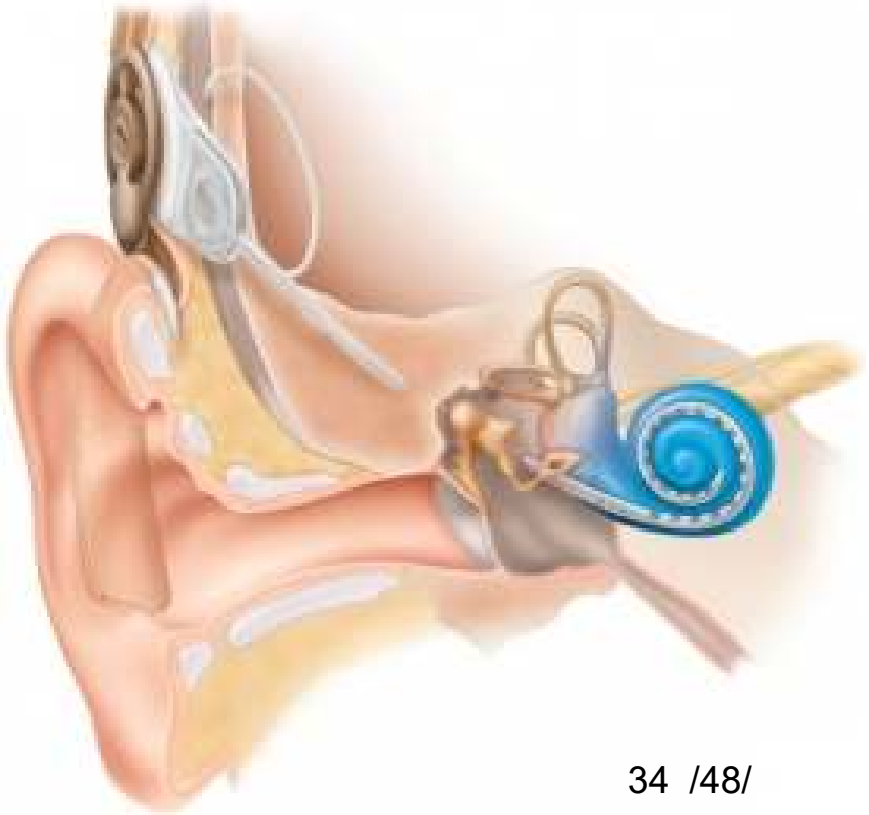


Cochlear implant – multi-channel



▲ *4. Diagram showing the operation of a four-channel cochlear implant. Sound is picked up by a microphone and sent to a speech processor box worn by the patient. The sound is then processed, and electrical stimuli are delivered to the electrodes through a radio-frequency link. Bottom figure shows a simplified implementation of the CIS signal processing strategy using the syllable "sa" as an input signal. The signal first goes through a set of four bandpass filters that divide the acoustic waveform into four channels. The envelopes of the bandpassed waveforms are then detected by rectification and low-pass filtering. Current pulses are generated with amplitudes proportional to the envelopes of each channel and transmitted to the four electrodes through a radio-frequency link. Note that in the actual implementation the envelopes are compressed to fit the patient's electrical dynamic range.*

Cochlear implant vs. hearing aid



Cochlear implant – performance in time

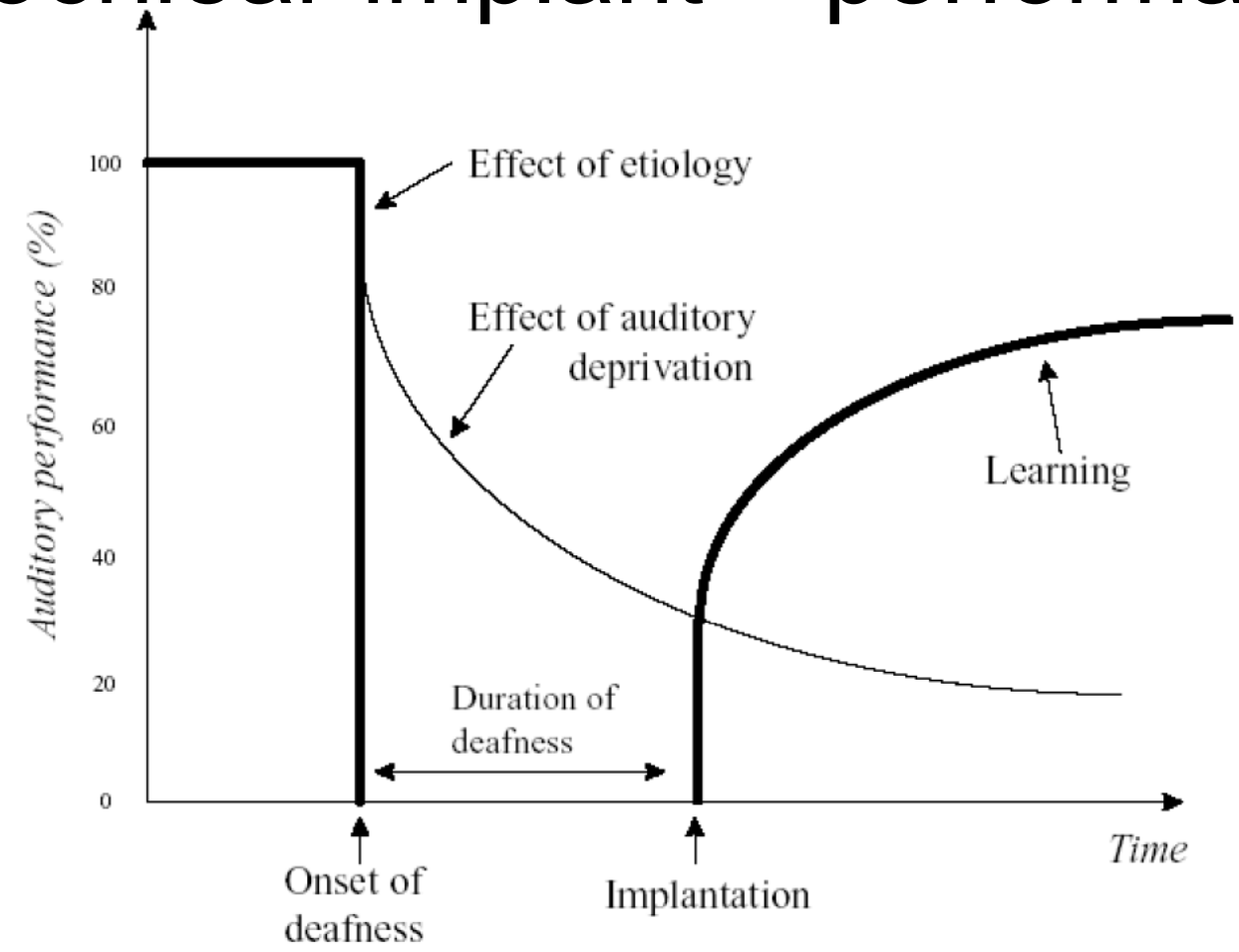


Figure 35. A three-stage model of auditory performance for postlingually deafened adults (Blamey et al. [80]). The thick lines show measurable auditory performance, and the thin line shows potential auditory performance.

END
OF THE LECTURE

Thanks for your attention

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Contact: Petr.Marsalek@LF1.CUNI.CZ

First Medical Faculty, Institute of Pathological Physiology