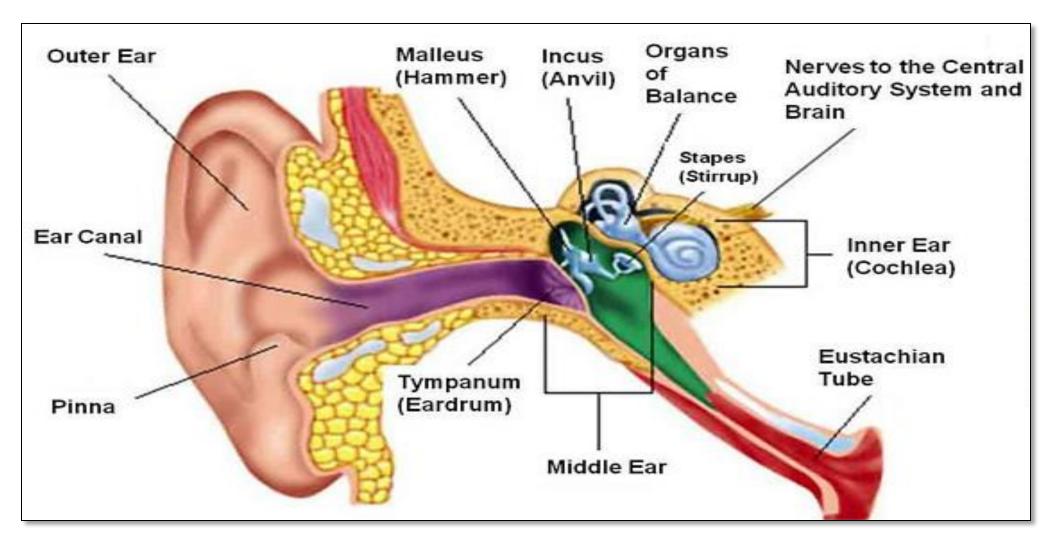
Hearing (Practical)

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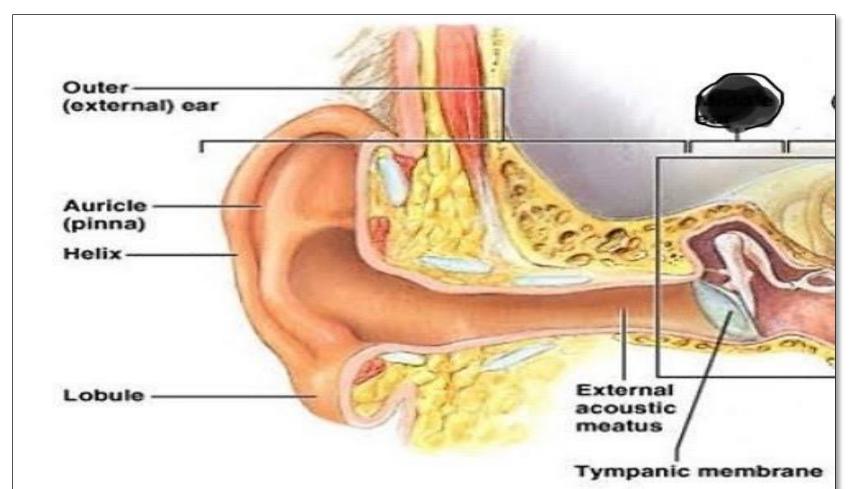
The human ear is divided into 3 parts

1- External ear. 2- Middle ear 3-Inner ear

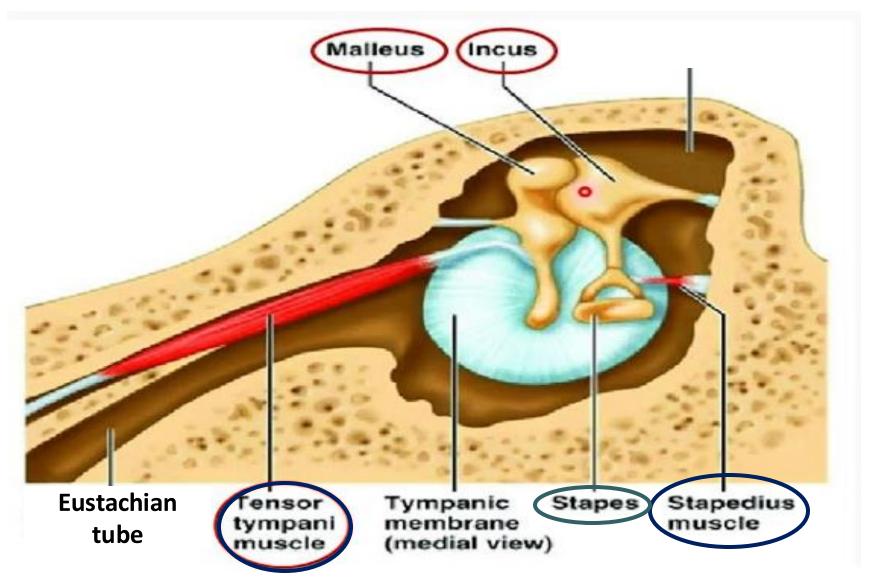


External Ear:

- 1- Ear pinna (auricle)
- 2- External auditory meatus / canal
- 3- Tympanic membrane



Middle ear





Ossicular conduction

Bone conduction

Air conduction

1) Ossicular route: •

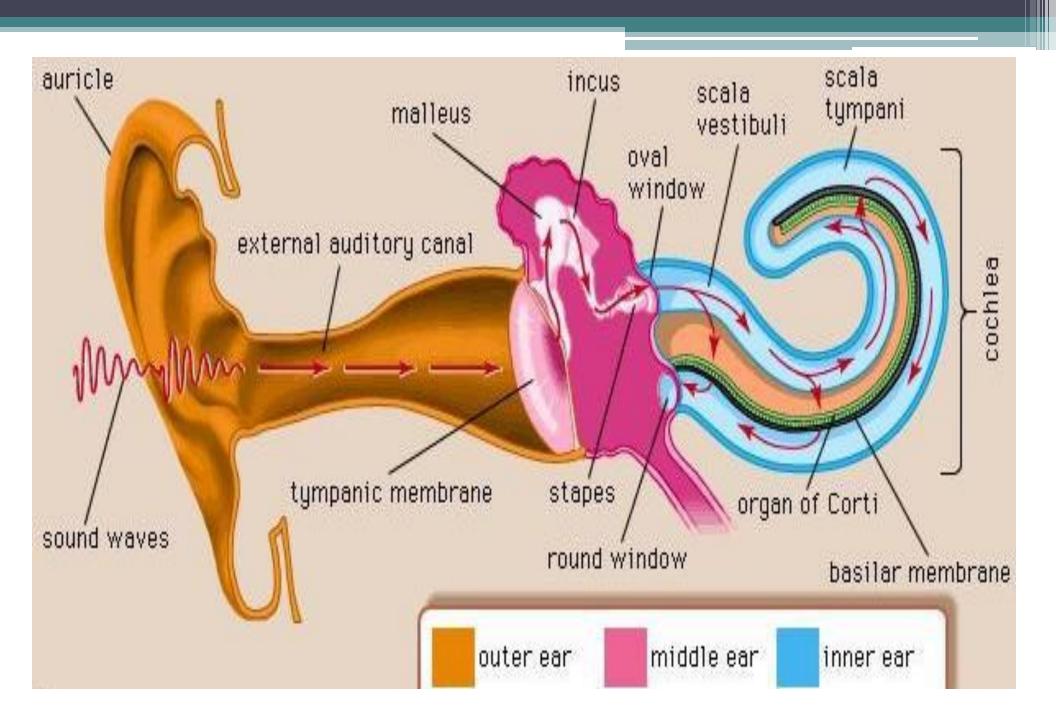
- It is the rout that occurs in healthy normal ear. •
- Mediated via tympanic membrane ⇒ **3 ossicles** ⇒ **oval** window. •
- It gives optimum and best hearing sensations. (22 times magnification). •

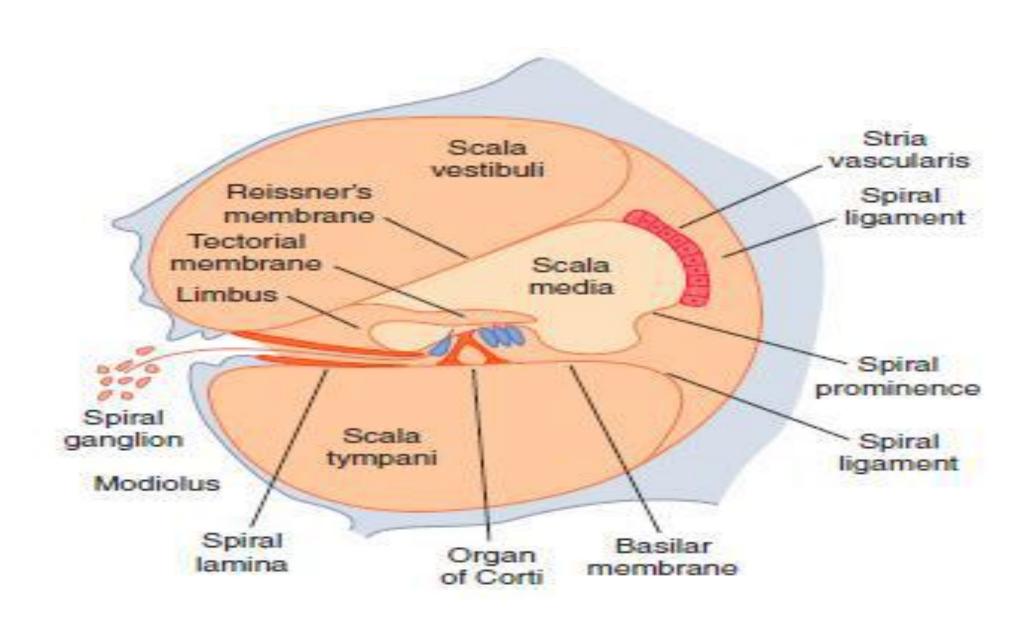
2) Air route: •

- It is inefficient & gives weak sensations. •
- Occurs when tympanic membrane and bony ossicles are destroyed.
- Sound waves cause vibration of the secondary tympanic membrane that
 covers the round window ⇒ vibrations are transmitted to the fluid of the
 inner ear ⇒ vibration of the basilar membrane.

3) Bone route or bone conduction: •

- It is inefficient in comparison to ossicular route. •
- Vibrations in bones ⇒ transmitted to the fluid in the inner ear. •
- It occurs either by: •
- a) Extreme loud sound. •
- b) Application of vibrating objects on skull or mastoid (tuning fork). •
- Bone conduction is better in case of conductive deafness. (no masking) •





Deafness

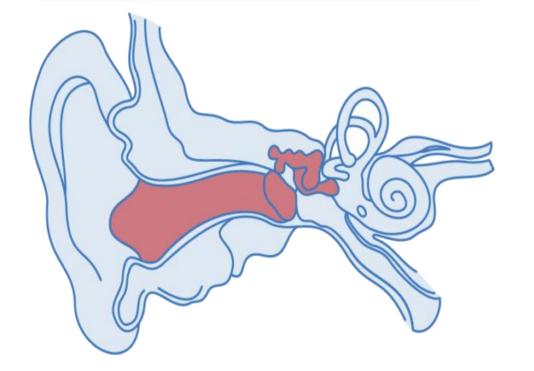
Definition: It is impairment of auditory acuity either partial or complete.

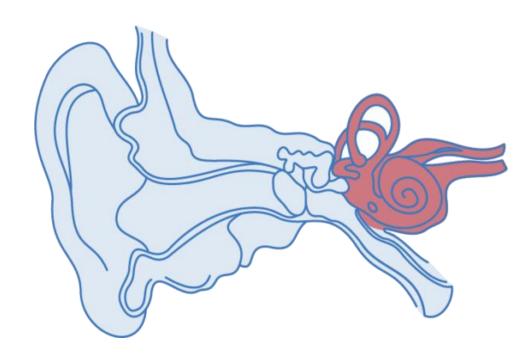
Types of deafness:

Deafness

Conductive deafness

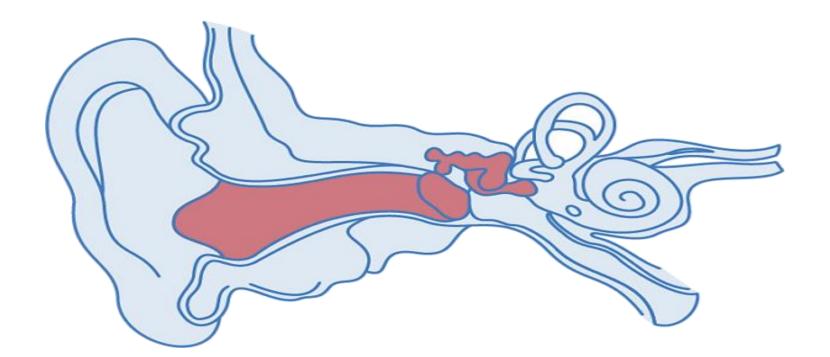
Nerve / perceptive/ sensineural deafness





Conductive deafness

 Occurs due to interference with the conduction of sound waves from external ear till the oval window.



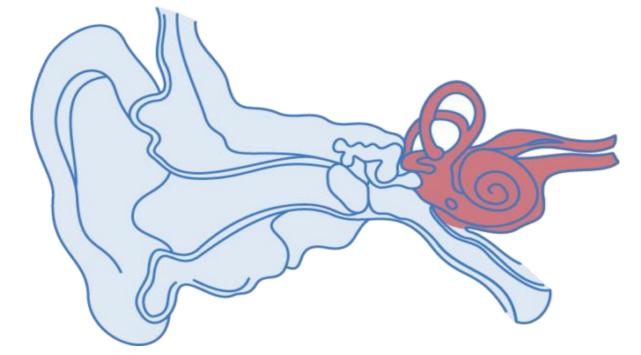
Criteria of conductive deafness

- > Bone conduction >> Ossicular conduction.
- ➤ Patient speaks at low voice (because he hears his sound magnified).

Nerve (Perceptive) deafness

Occurs due to interference with auditory transmission from oval window till the auditory

cortex.



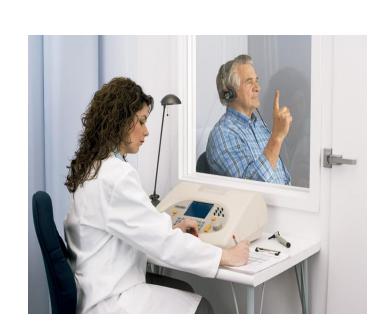
Criteria of nerve deafness

- Ossicular conduction>> Bone conduction But both ossicular & bone conduction are reduced than normal.
- > Patient speaks at high voice

Diagnosis of deafness

Watch test.

- Hearing tests.
- Audiometry.





Hearing tests

Hearing tests

Definition: comparative tests to diagnose type of deafness, either conductive deafness or perceptive deafness.

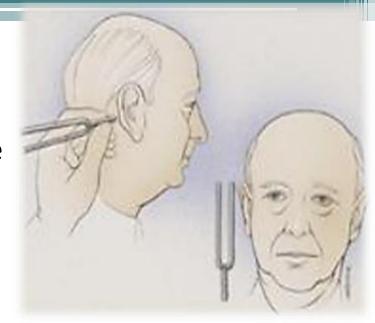
Types:

- 1) Rinne's test.
- 2) Weber test.
- 3) Schwabach's test.



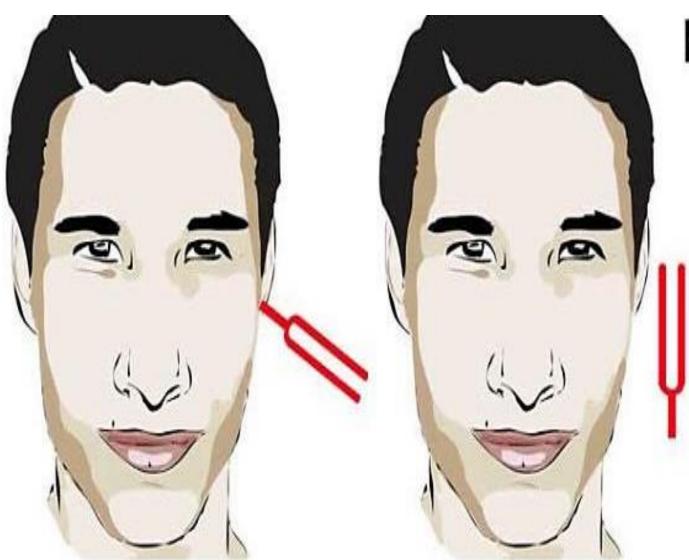
Rinne's test

- Compare between ossicular conduction & bone conduction in same person each ear separately.



-Results

- Normally: Ossicular conduction is better than bone conduction for 45 sec (Rinne +ve).
- •Conductive deafness: Bone conduction is better than ossicular conduction (Rinne –ve)
- Perceptive deafness: Ossicular conduction is better than bone conduction, but both are reduced (Reduced Rinne)



Rinne's Test

With a 512 Hz tuning fork press against the mastoid bone and then hold it 1cm away from the ear.

'Which is louder, behind the ear or in front?'

Weber test

- Compare bone conduction between the two ears, in the same person.



- Results:

- Normally: The sound is heard equally in both ears.
- Conductive deafness: Sound is louder in diseased ear (due to absent masking effect of noise on diseased ear).
- Perceptive deafness: Sound is louder in normal ear.

Schwabach's test

 Compare bone conduction between two persons: patient & examiner,
 Provided that, the examiner is normal.



-Results:

- Normally: Equal time of hearing.
- Conductive deafness: Patient is better (due to absent masking effect of noise on diseased ear).
- Perceptive deafness: Examiner is better i.e.; the patient stops hearing before the examiner.

Weber Test

Compare bone conduction in both ear.

Rinne Test

Compare ossicular and bone conduction.

Schwabach's Test

 Compare bone conduction between the subject &the examiner provided that the examiner is normal.

2-Audiometry



- *This instrument can generate sound waves of different frequencies from lowest to highest.
- *Intensity (loudness or volume) of sound at each frequency is adjusted based on previous studies in normal persons.
- *Thus, before calibrating the instrument, minimum (threshold) volume or intensity or loudness, for each frequency of sound heard by normal persons is determined.
- Minimum intensity is set in the instrument as zero. Now, while testing the patient, the loudness is increased above zero level
- ❖Intensity of sound is expressed in decibel (dB).

- The audiometry tests are conducted in a quiet sound-proof room. Earphones will be placed on your head. You will be asked to sit still and not talk.
- The earphones are connected to audiometer that will deliver the tones and different sounds of speech to your ears.
- In audiometer, in addition to being equipped with an earphones for testing ossicular conduction by the ear, is equipped with a mechanical vibrator for testing bone conduction from the mastoid process of the skull into the cochlea.

- *At a particular frequency, if the patient hears the sound with loudness of **30 dB** above zero level, the person is said to have **hearing loss of 30 dB** for that frequency.
- *During the tests by audiometer, the subject's ability to hear the sounds with 8 to 10 different frequencies is observed and the hearing loss is determined for each frequency.
- *By using these values, the audiogram is plotted.

- Hearing loss is often described as follows:
- -Normal = less than 25 dB HL.
- -Mild = 25-40 dB HL.
- -Moderate = 41-65 dB HL.
- -Severe = 66-90 dB HL.
- -Profound = more than 90 dB HL.

