

Author(s): Matthew Velkey, 2009

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Histology of the Ear

M1 – CNS Sequence
Matthew Velkey, Ph.D.

Winter, 2009



Histology of the ear

Matthew Velkey

Learning Objectives

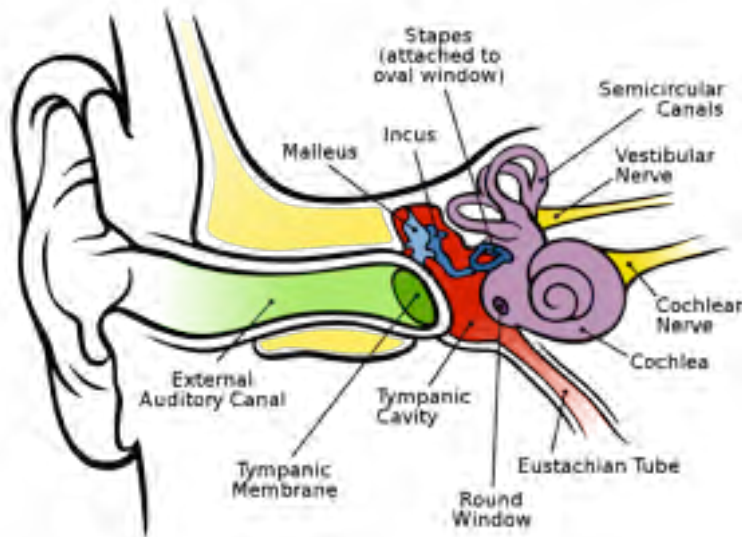
1. Understand the structures and fluid-filled compartments (and their functions) that comprise the membranous vs. the bony labyrinth of the inner ear.
3. Know the structures, locations, and specific cells of sensory areas within the membranous labyrinth (otolith organs, cristae ampullaris, and organ of Corti), and their different functions.
3. Understand how mechanosensory transduction takes place, including how a K^+ gradient is set up at the level of the hair cell.

Lecture Outline: Ear

- **Conducting and Sensory Structures**
 - Outer, middle, inner ear
- **Sensory Structures** (Vestibulocochlear apparatus):
 - Bony and Membranous Labyrinths
 - Vestibular System: utricle & saccule: macula
semicircular canals: crista
 - Auditory System: Cochlea: Organ of Corti

The Ear: equilibrium and hearing

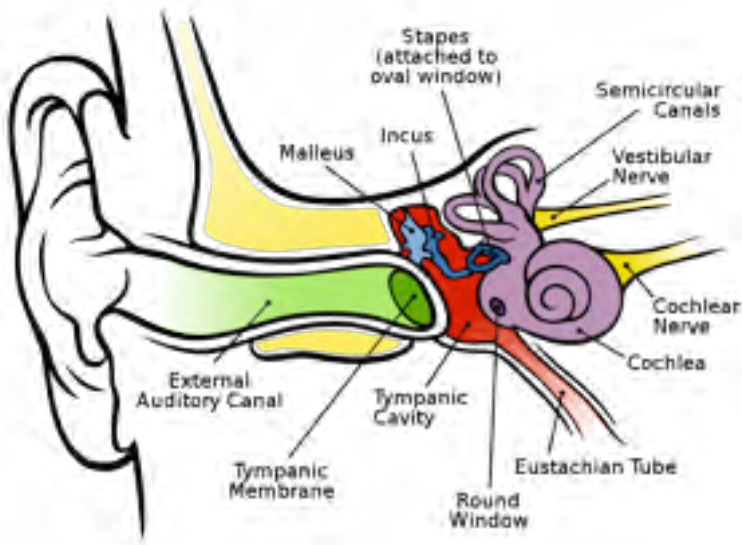
3 parts:



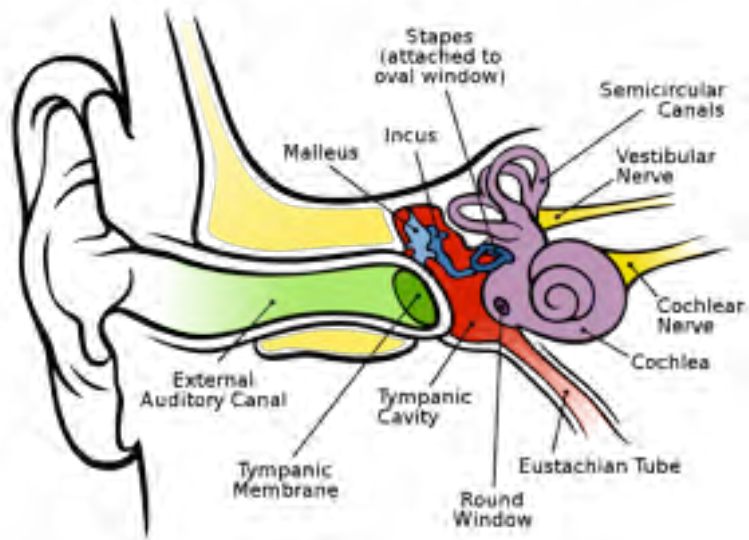
- **External ear:** receives sound waves
- **Middle ear:** transmission from air to bone & bone to inner ear
- **Inner ear:** vibrations transduced to nerve impulses, to acoustic nerve, to CNS

EXTERNAL EAR: transmission of sound waves to ossicles of middle ear

- **Pinna:** elastic cartilage, skin
- **External auditory meatus:** canal to tympanic membrane, lined by skin w/ hair and ceruminous (wax) glands
- **Ear drum:** epidermis, middle ct, inner simple cuboidal epith.



MIDDLE EAR: transmission from ossicles to oval window

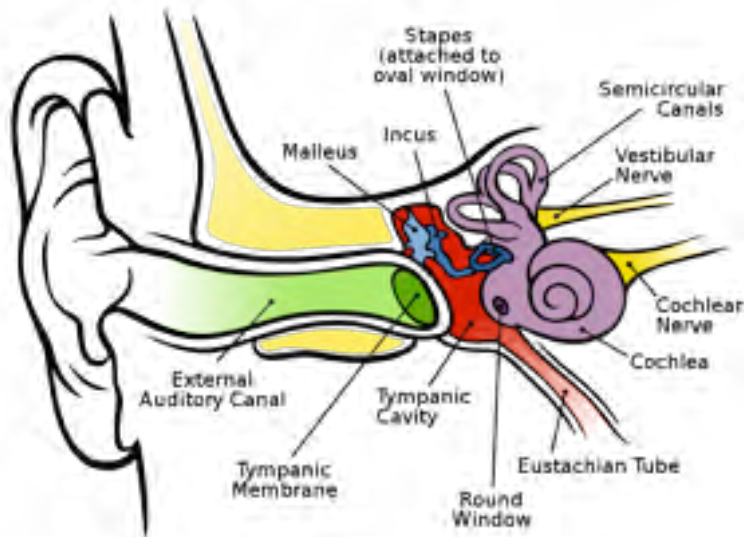


- Aka tympanic cavity (interior of temporal bone)
- S. squamous epith., thin lamina propria, periosteum
- Ossicles: malleus, incus, stapes
- Muscles: tensor tympani (V), stapedius (VII) – responsible for attenuation reflex
- Oval window
- Round window
- Eustachian tube, resp. epith.
- Mastoid sinuses
- Otitis media, mastoiditis

INNER EAR:

Vestibular: perception of body position (utricle and saccule, semicircular canals)

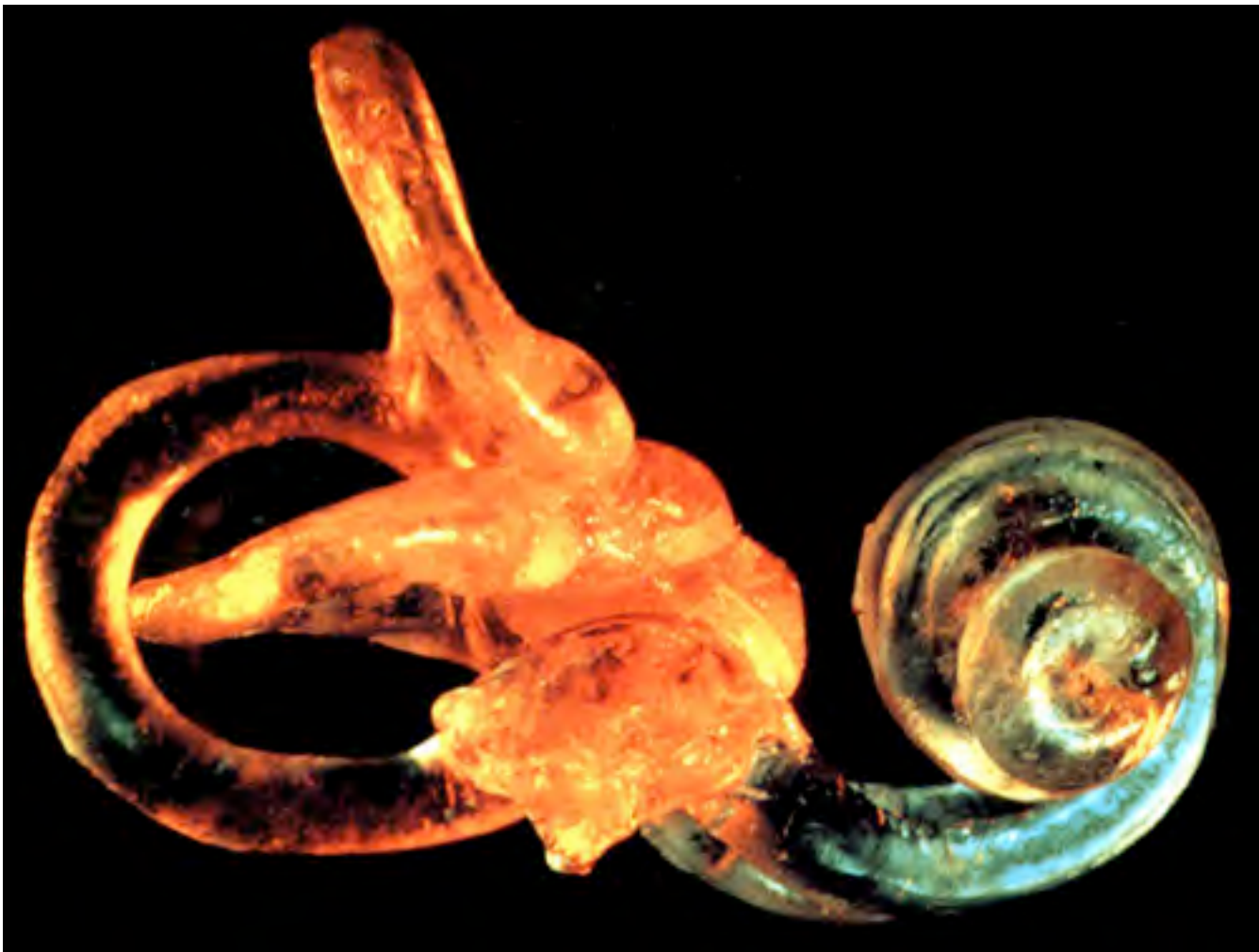
Hearing: vibrations at oval window transduced to fluid, then nervous impulses (cochlea)



Two Labyrinths:

- Bony labyrinth (encased within petrous portion of temporal bone)
- Membranous labyrinth (sac within bony labyrinth)

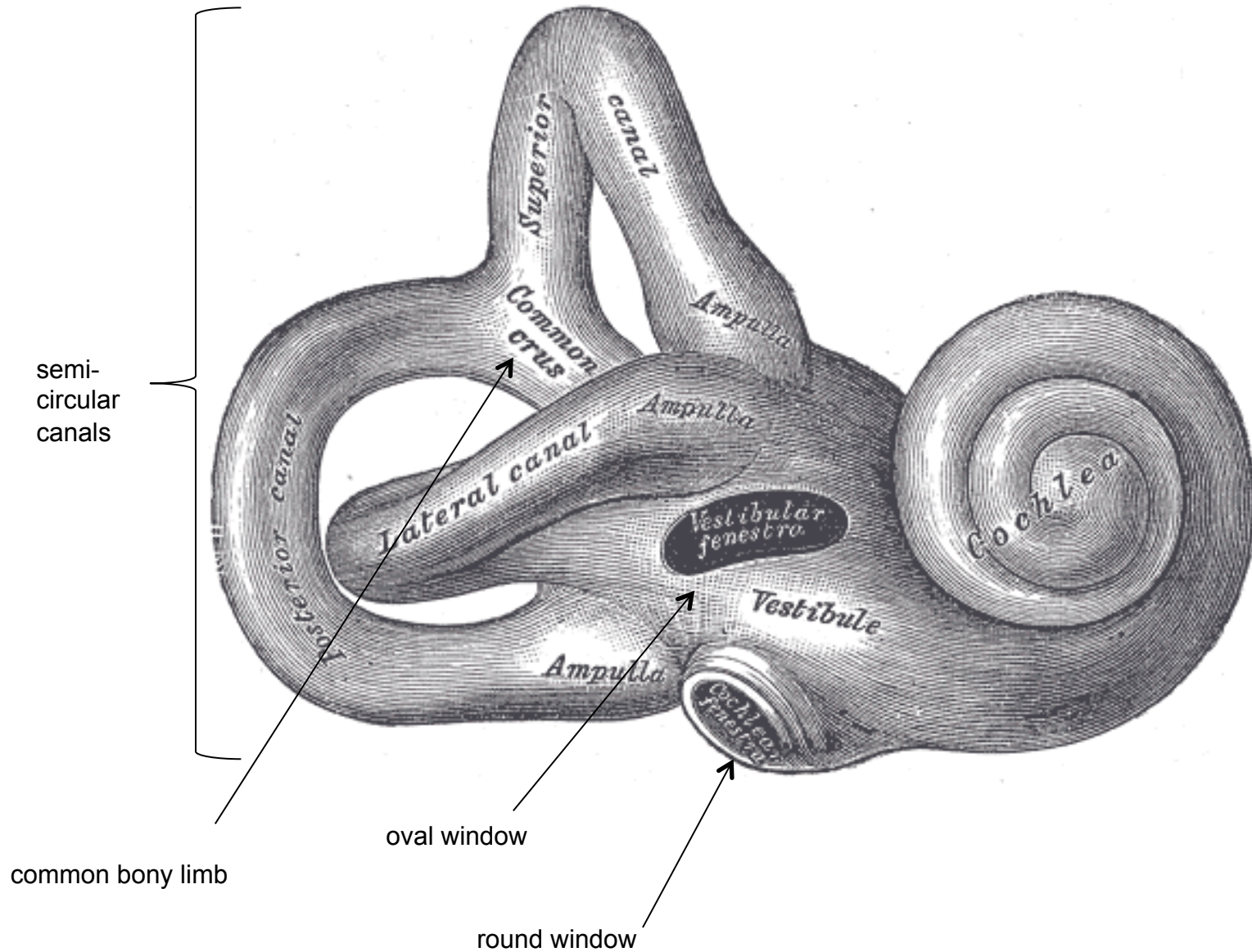
Cast of bony labyrinth



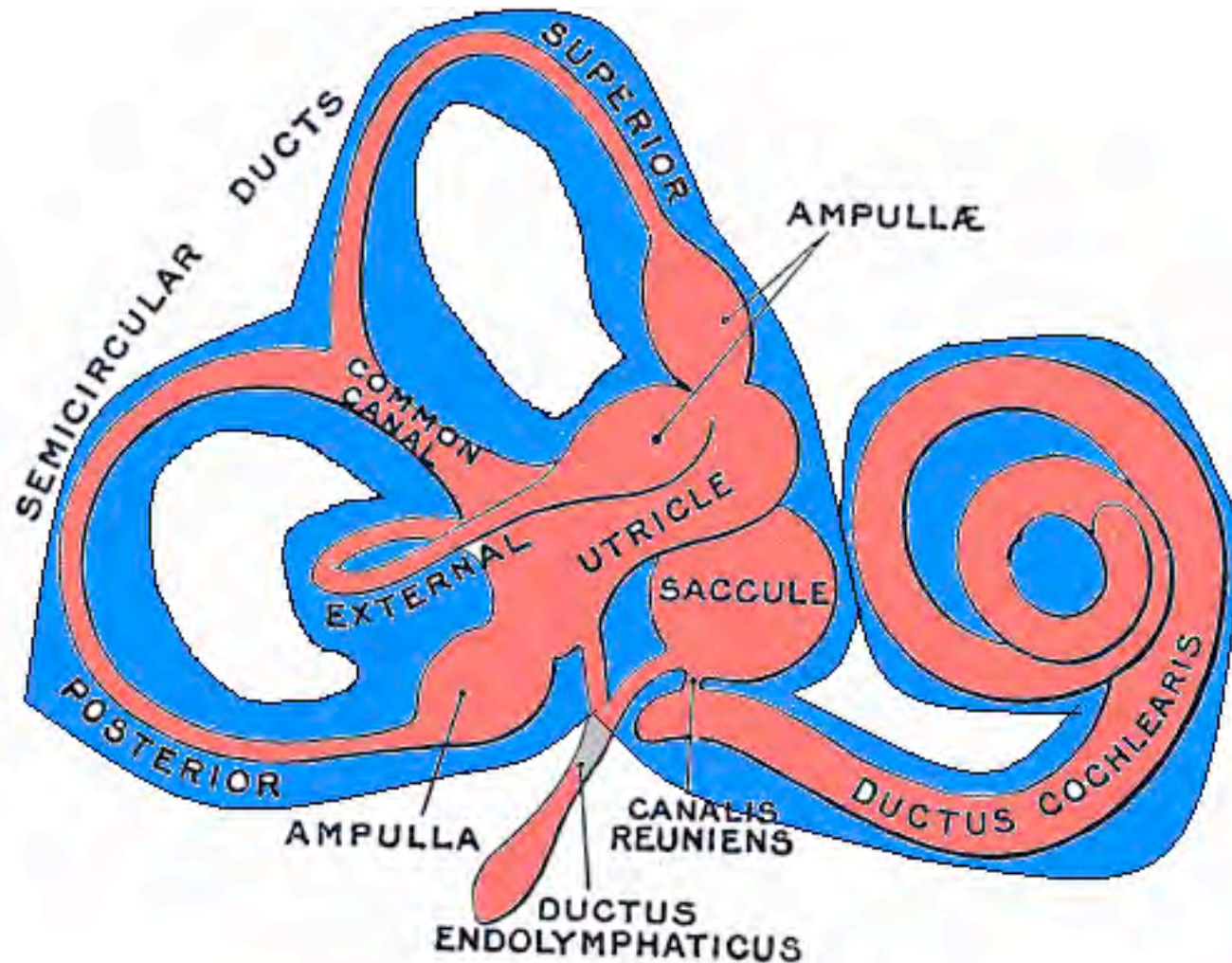
 Ross and Pawlina. (2006), *Histology: A Text and Atlas, 5th ed* Figure 25.6

Space in bone

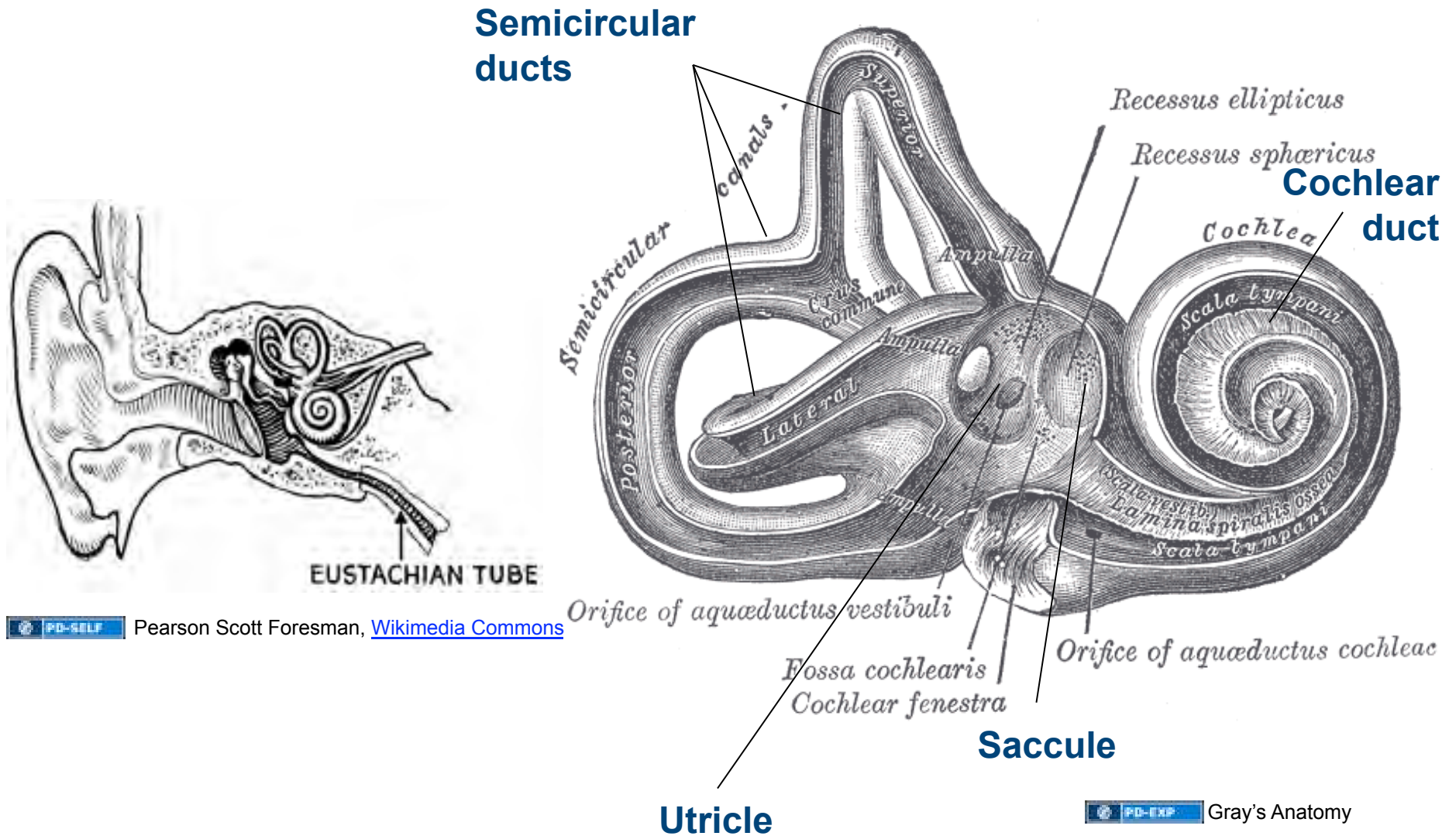
Bony labyrinth: perilymph



Membranous labyrinth: endolymph (red) / perilymph (blue)



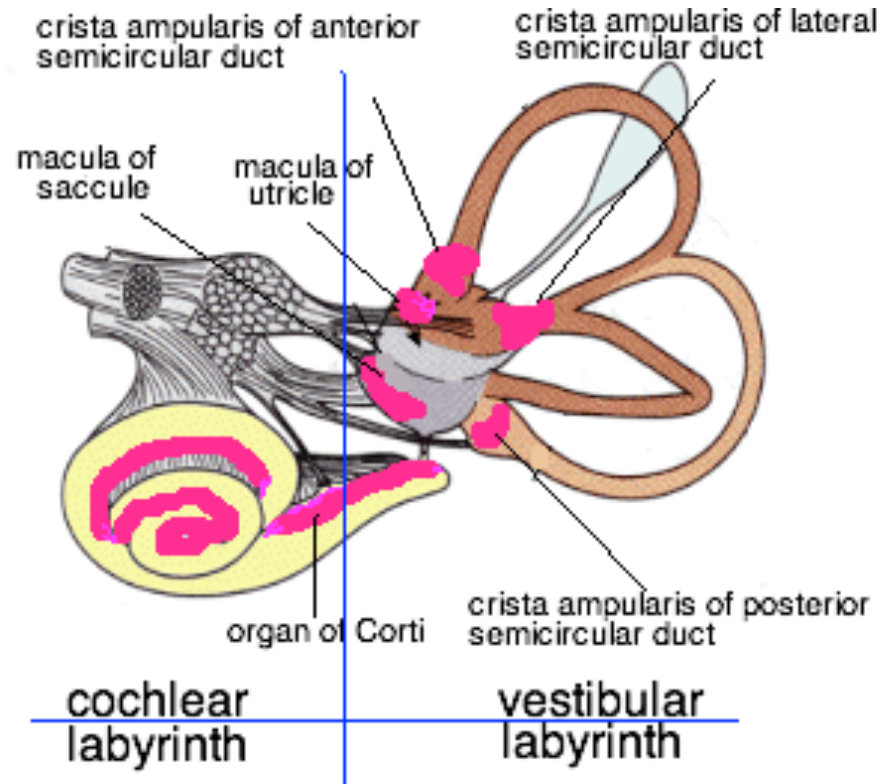
Bony and membranous labyrinths



Perilymph vs endolymph

- Perilymph: bony labyrinth
 - Like extracellular fluid
 - High sodium,
 - Low potassium
 - Ultrafiltrate of plasma
 - Low protein
- Endolymph: mem. labyrinth
 - Like intracellular fluid
 - Low sodium
 - High potassium
 - Produced by stria vascularis
 - Low protein

Sensory regions in Membranous Labyrinth



Sensory Regions in Membranous Labyrinth

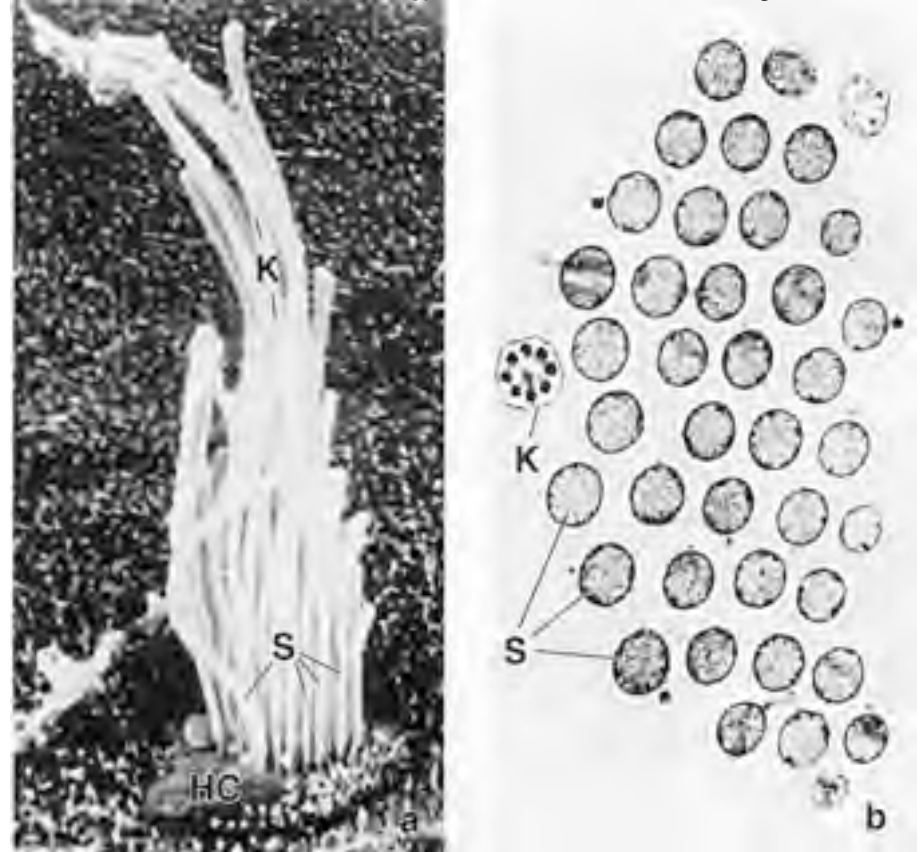


Sensory regions contain specialized sensory cells, aka “hair cells”

Drawing of Type I and Type II hair cells removed removed

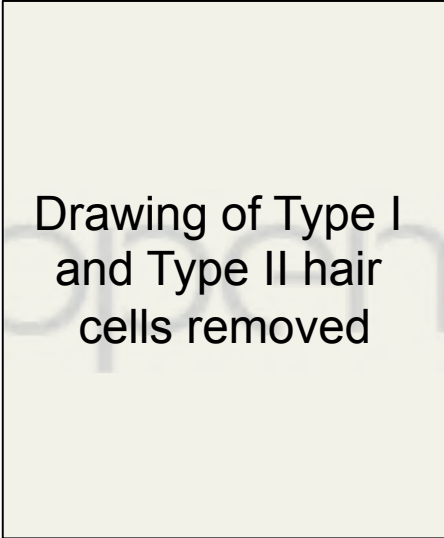
PD-INEL

Ross and Pawlina. (2006), *Histology: A Text and Atlas, 5th ed* Figure 25.8



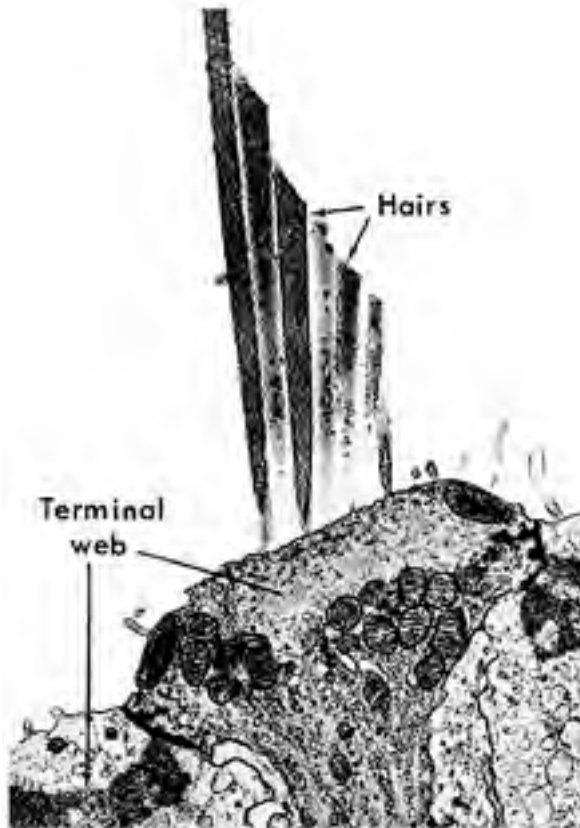
S = stereocilia (about 50-150 per cell) – very long microvilli with actin cores
K = kinocilium (1 per cell) – true cilium with 9+2 arrangement of microtubules

Sensory (hair) cells

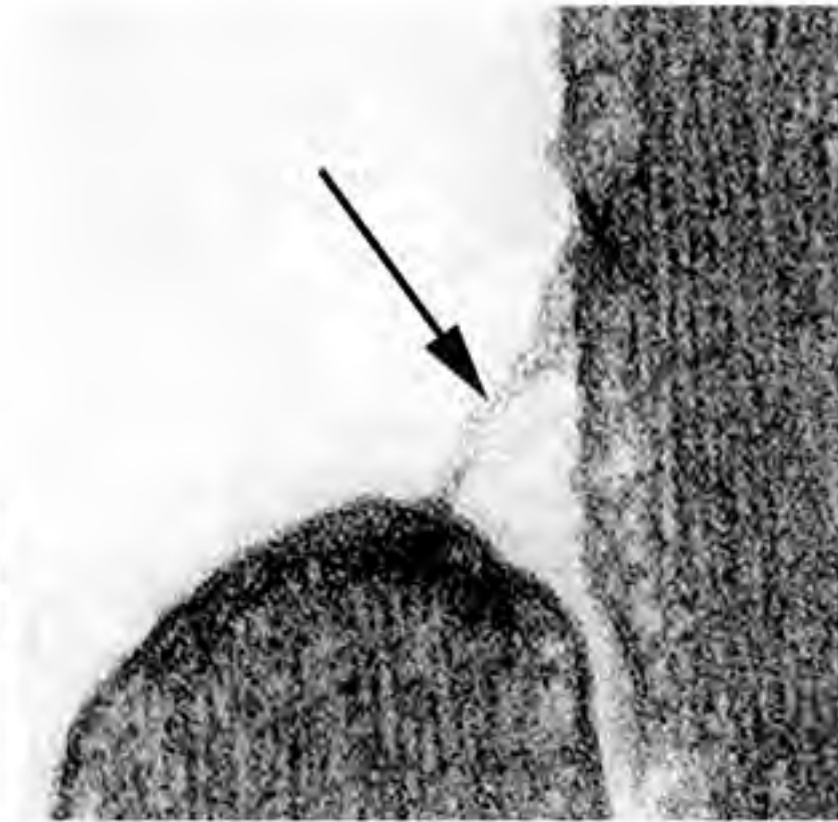


Drawing of Type I
and Type II hair
cells removed

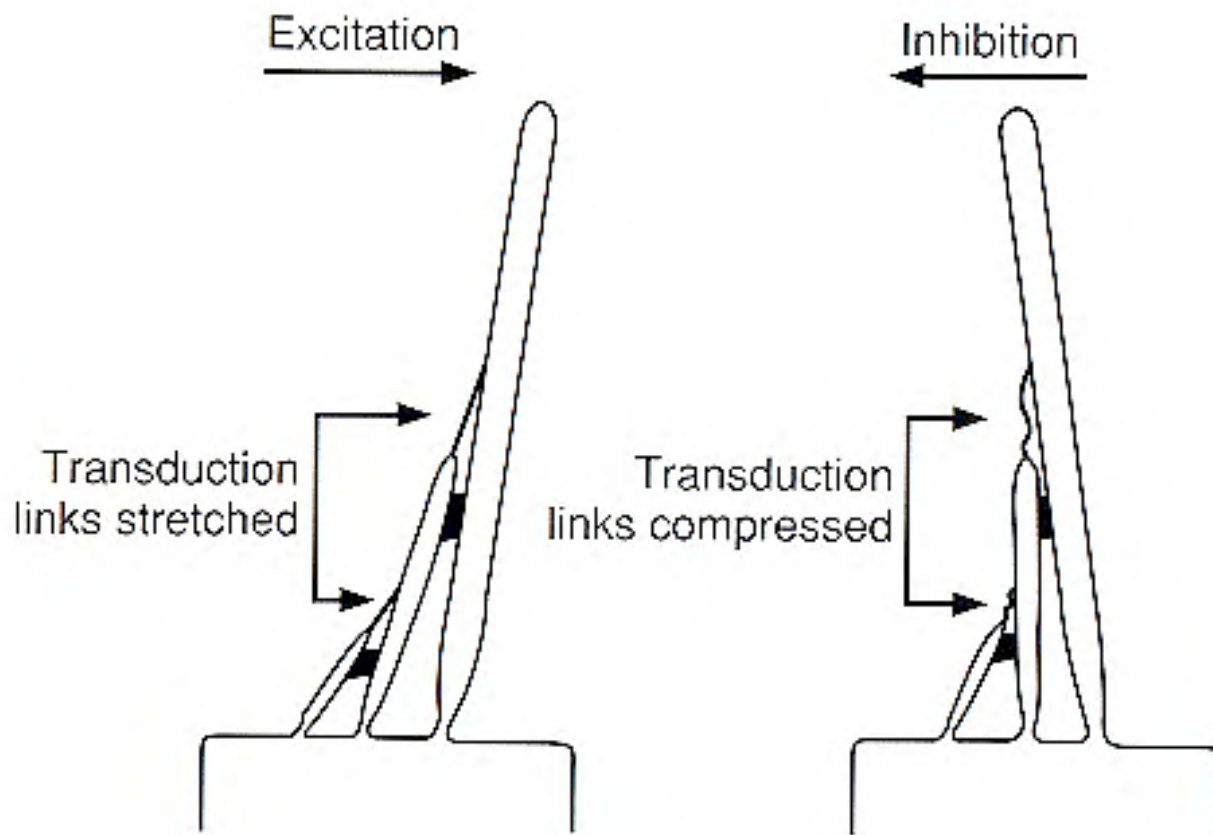
Stereocilia and tip links



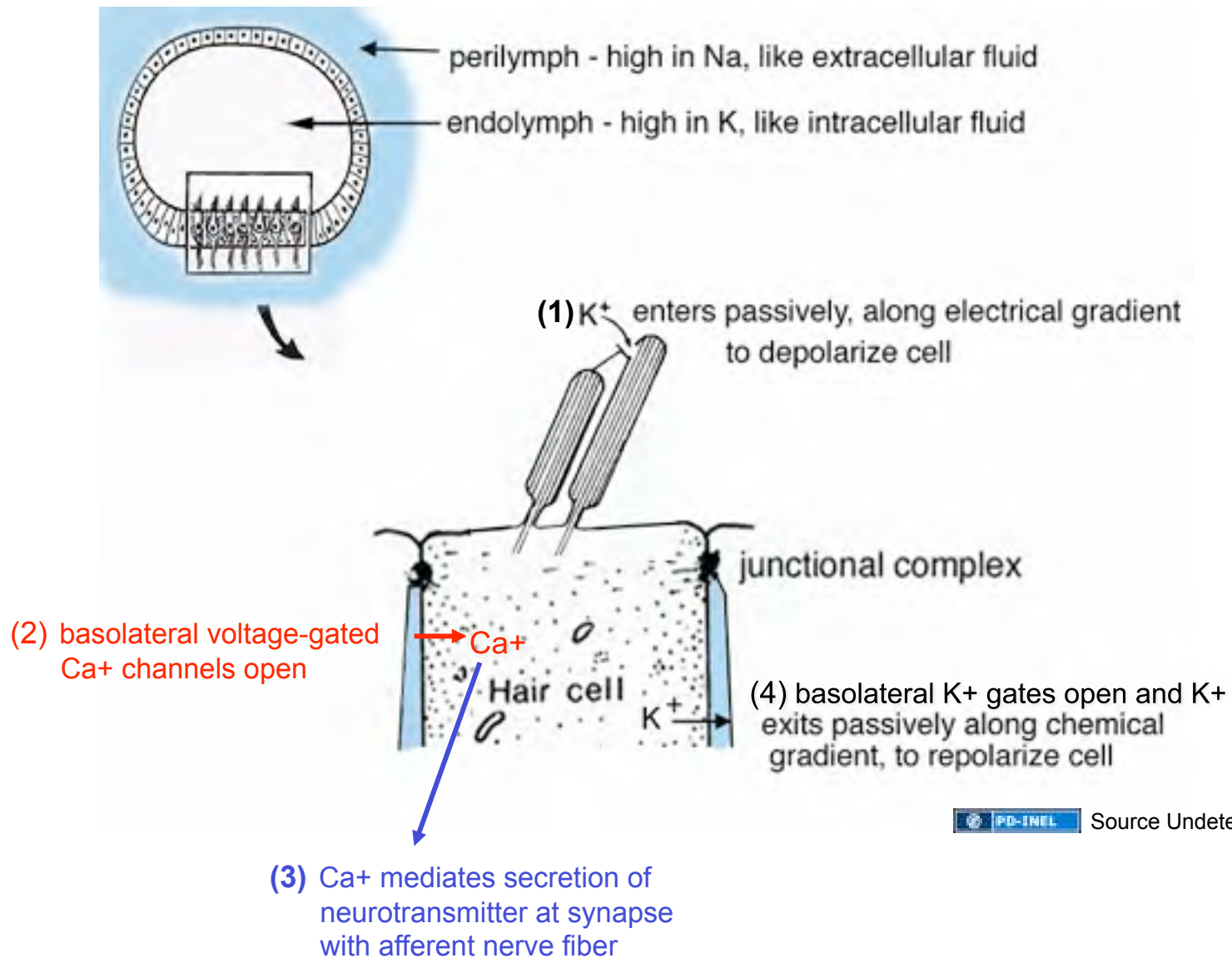
PD-INEL Source Undetermined



Tip-links open mechanically gated K^+ ion channels

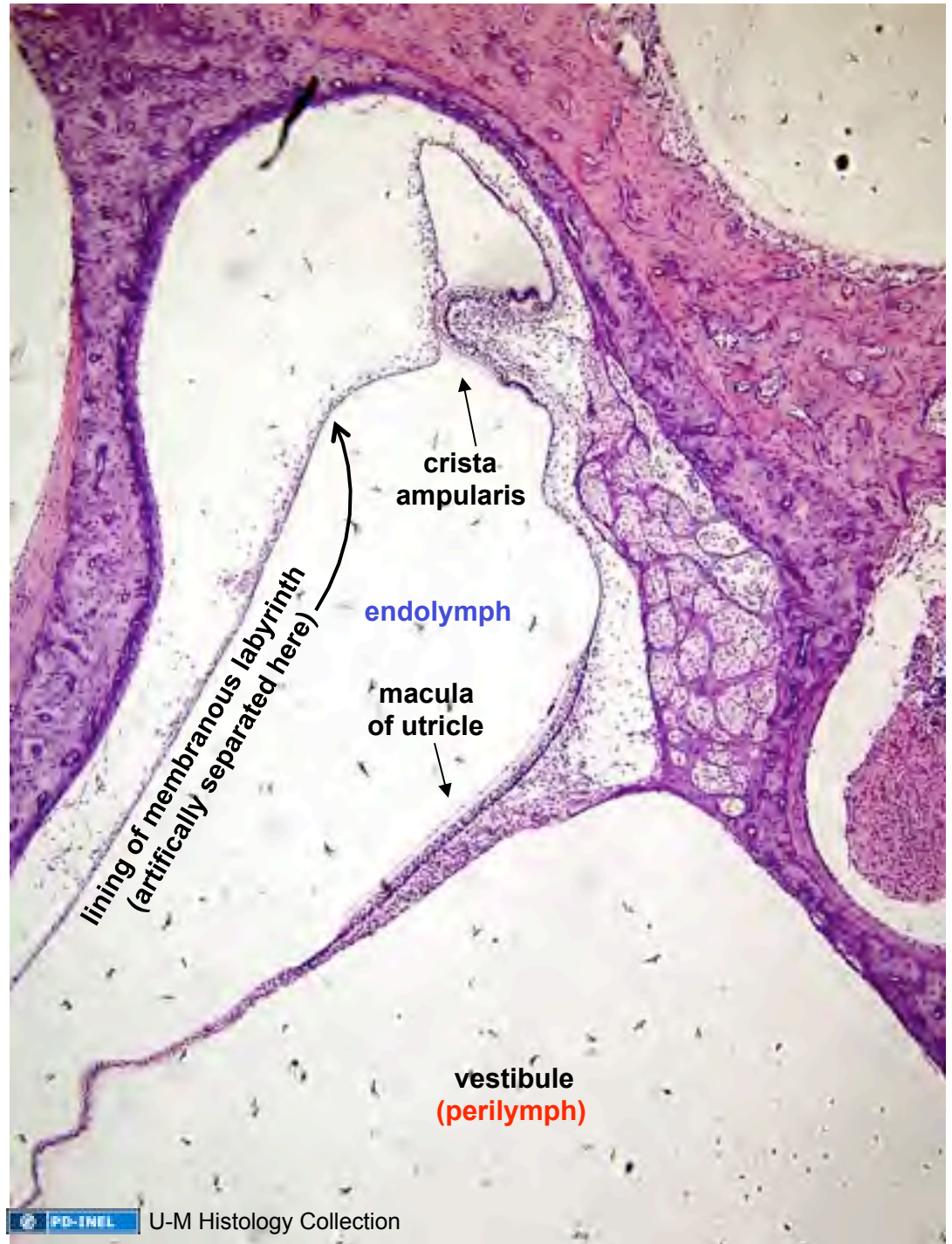


Potassium gradient drives depolarization



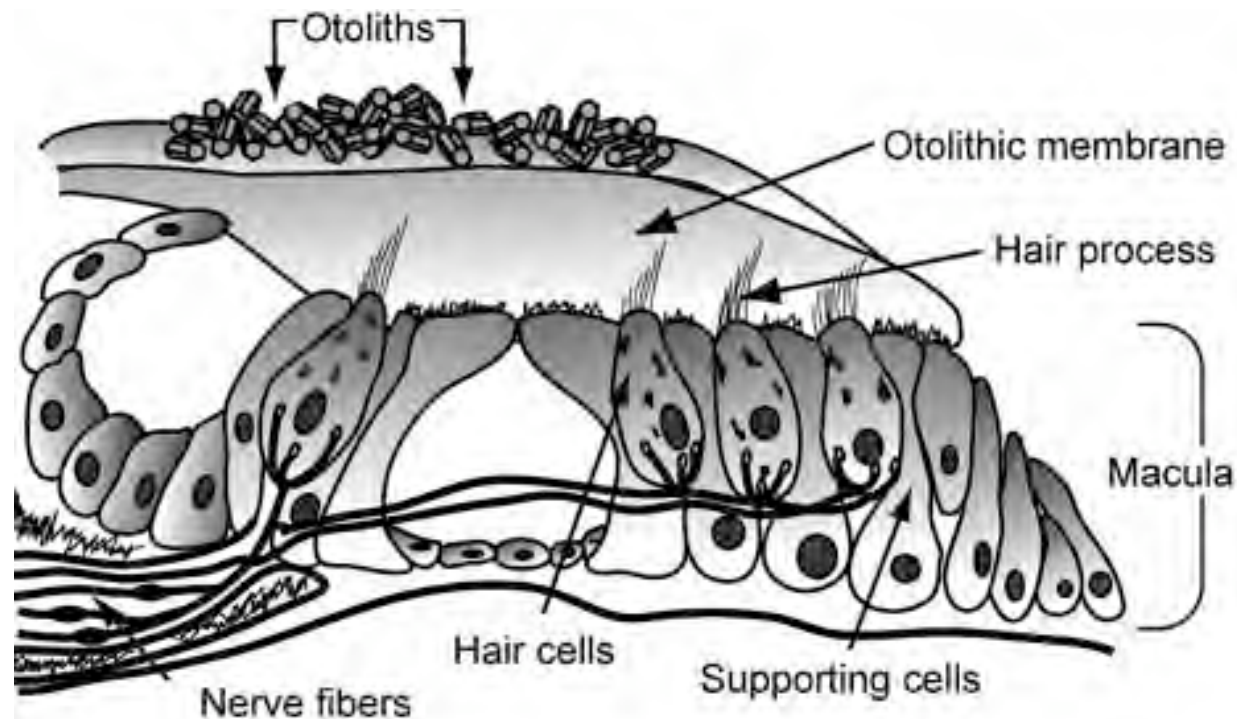
Macula: patch of sensory cells in utricle and saccule

innervated by branches of vestibular nerve



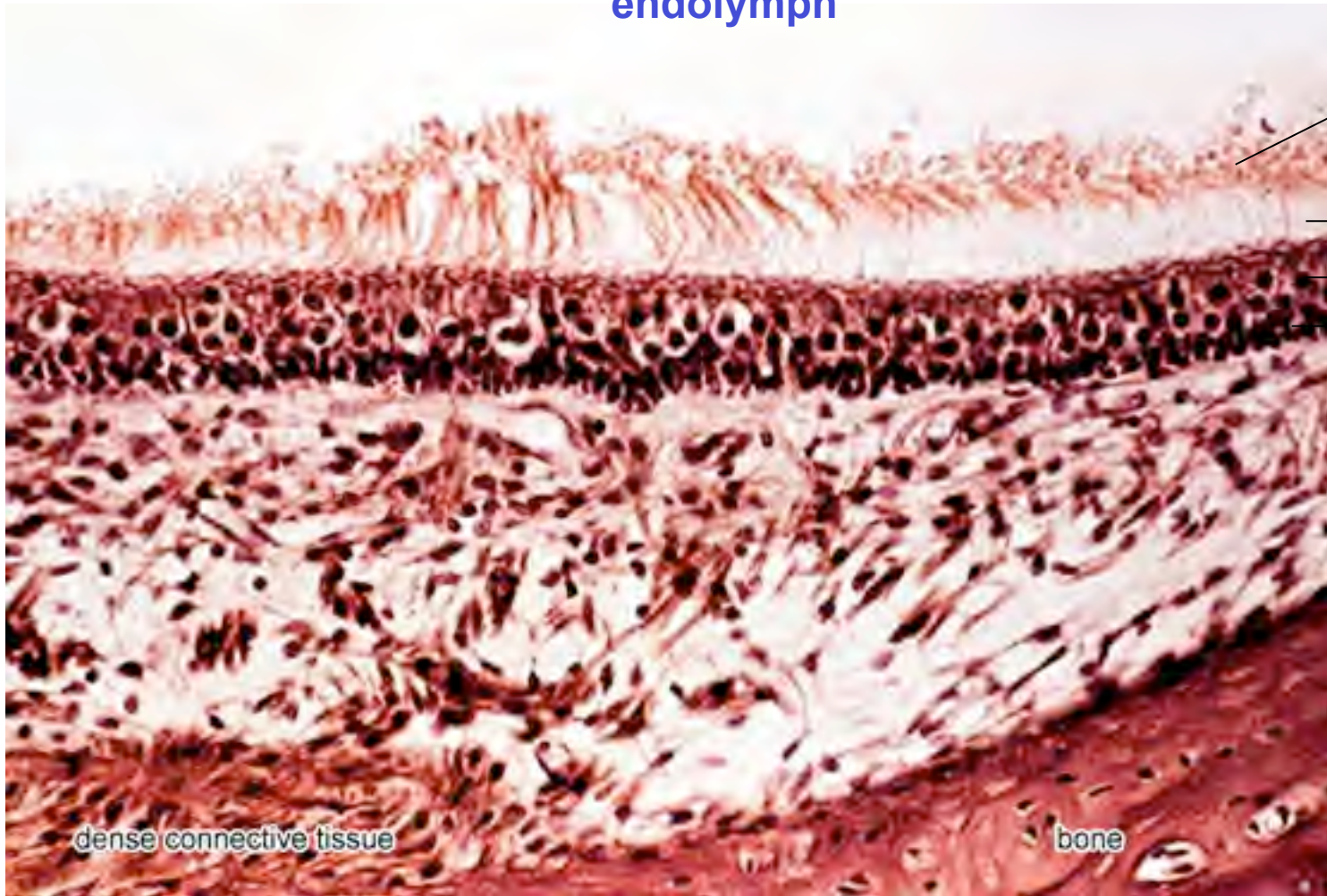
Maculae detect linear acceleration

Inertia causes otoliths and otolithic membrane to lag behind during linear acceleration; shearing effect bends stereocilia



Macula

endolymph



otoliths & otolithic membrane
(type II collagen, otogelin)

stereocilia

hair cells

sustentacular cells

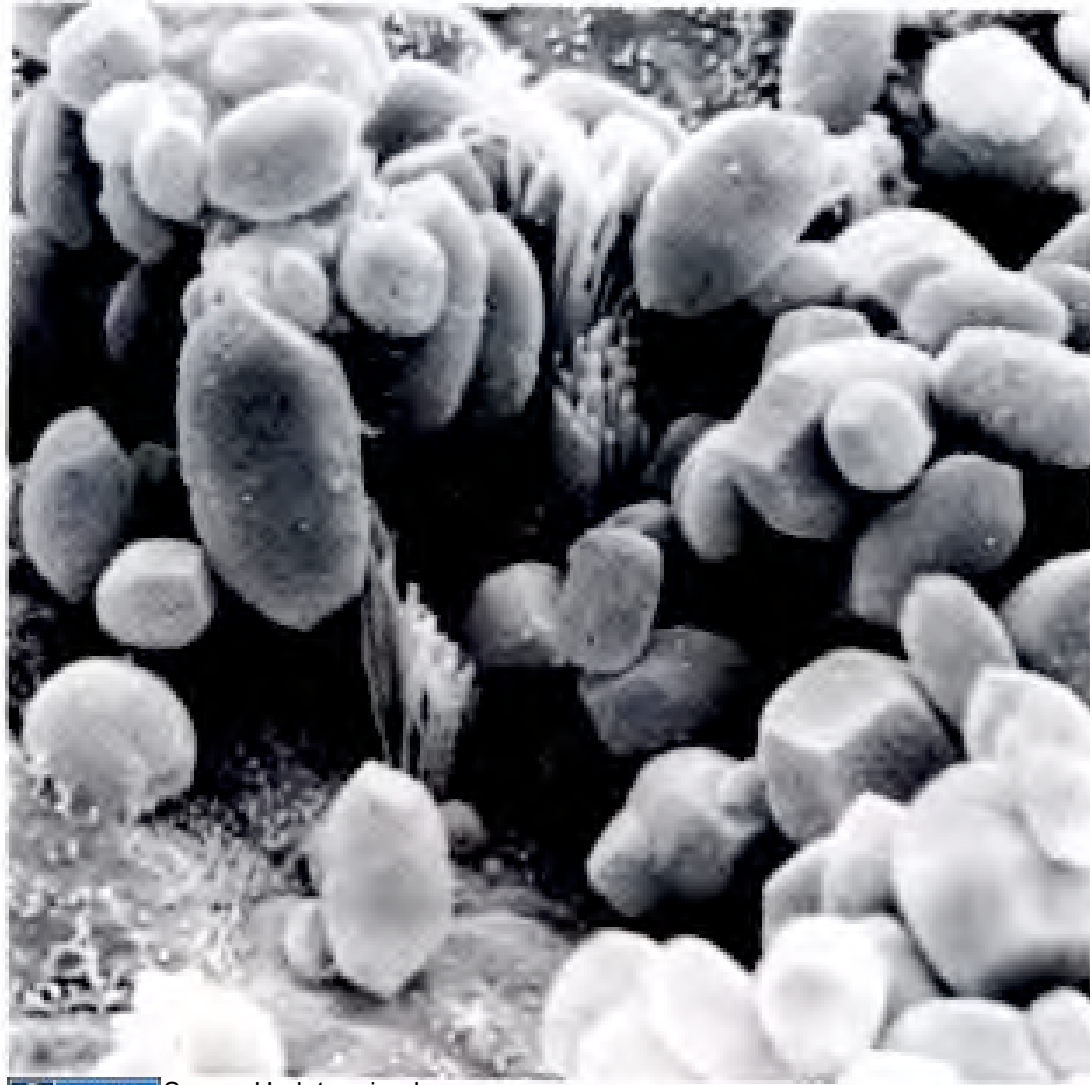
loose connective tissue:
• nerve fibers
• Schwann cells
• fibroblasts / collagen III
• extracellular fluid
(similar to perilymph)

dense connective tissue

bone

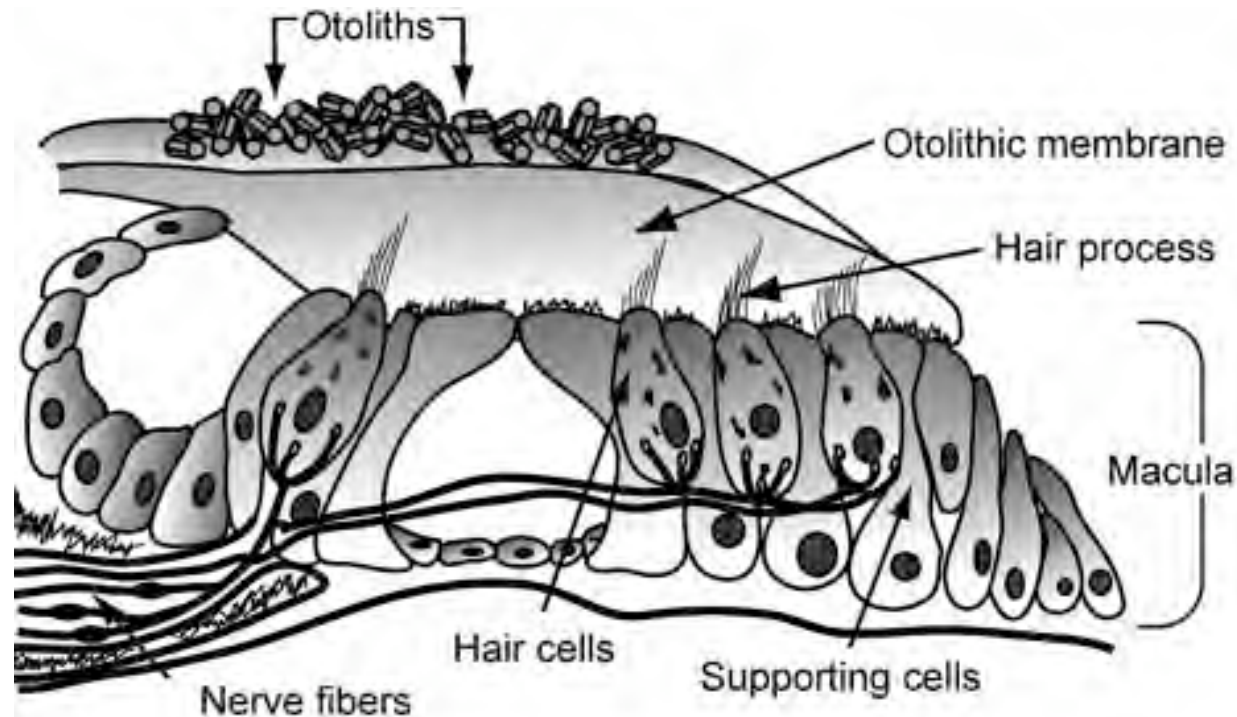
Otoconia/statoconia/otoliths (fish)

calcium carbonate, otoconins



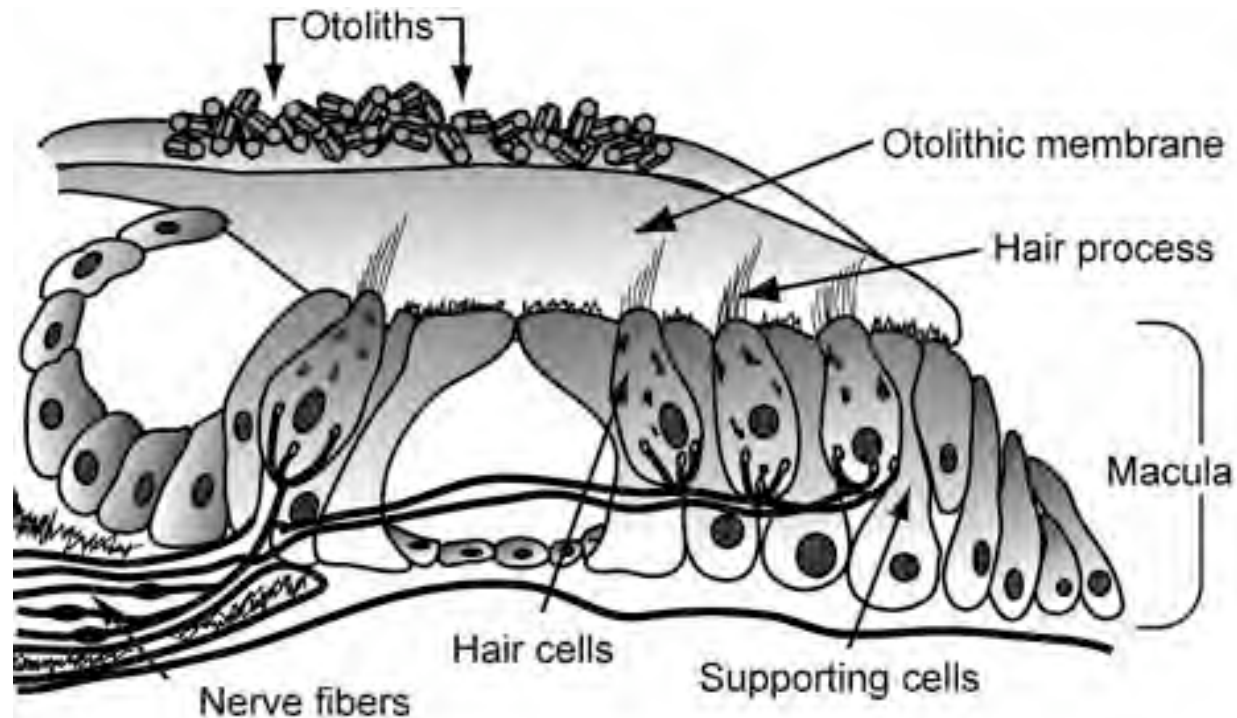
Maculae detect linear acceleration

Inertia causes otoliths and otolithic membrane to lag behind during linear acceleration; shearing effect bends stereocilia

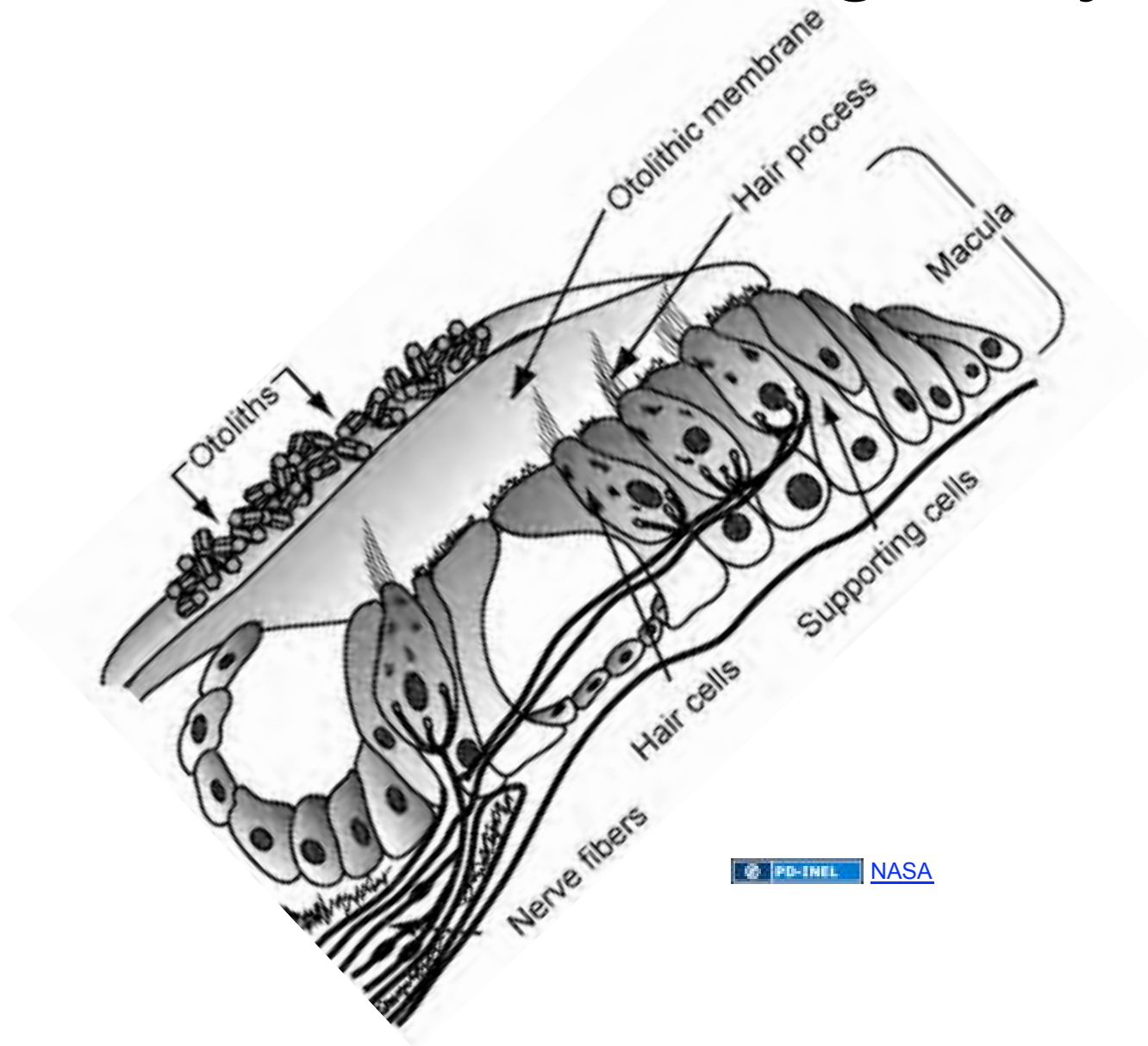


Maculae can also detect deceleration

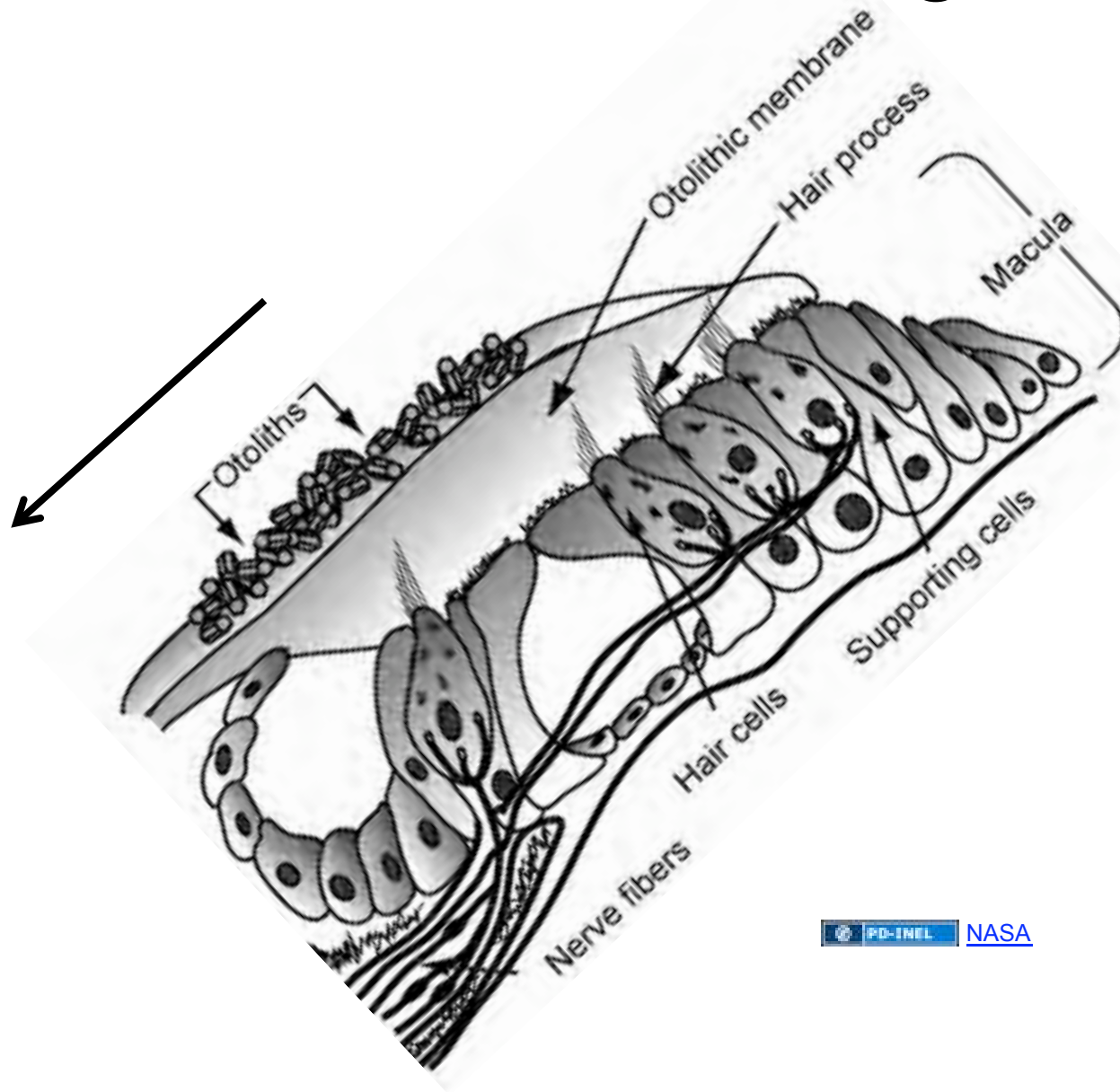
During deceleration, inertia carries otoliths and otolithic membrane forward and bends stereocilia in the other direction. This decreases their firing rate, which the brain interprets as deceleration.



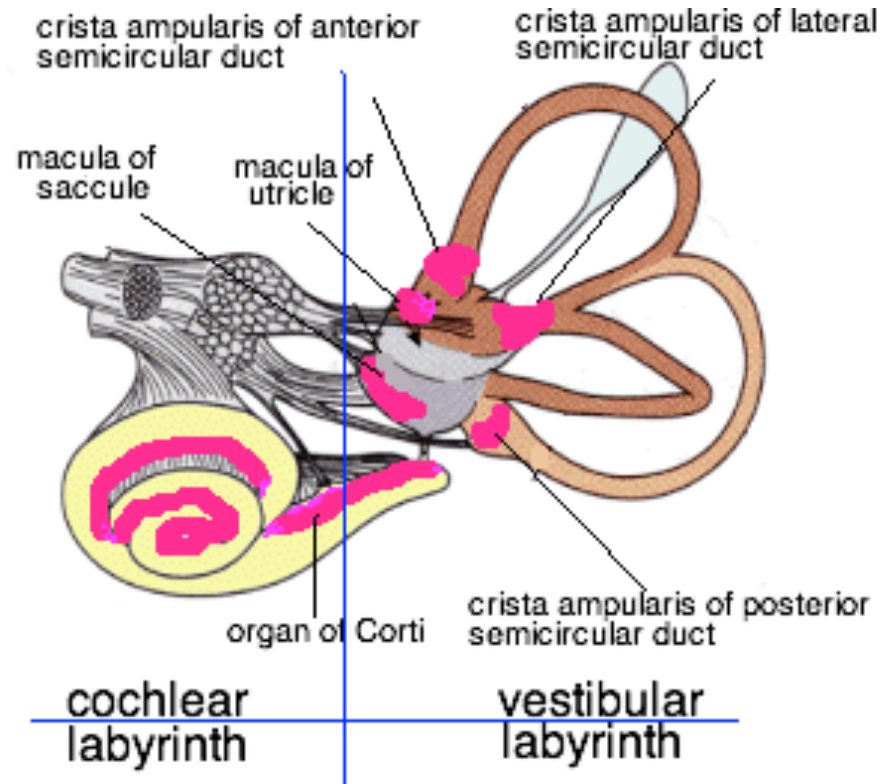
Maculae can detect gravity, too



Maculae can detect gravity, too



Sensory regions



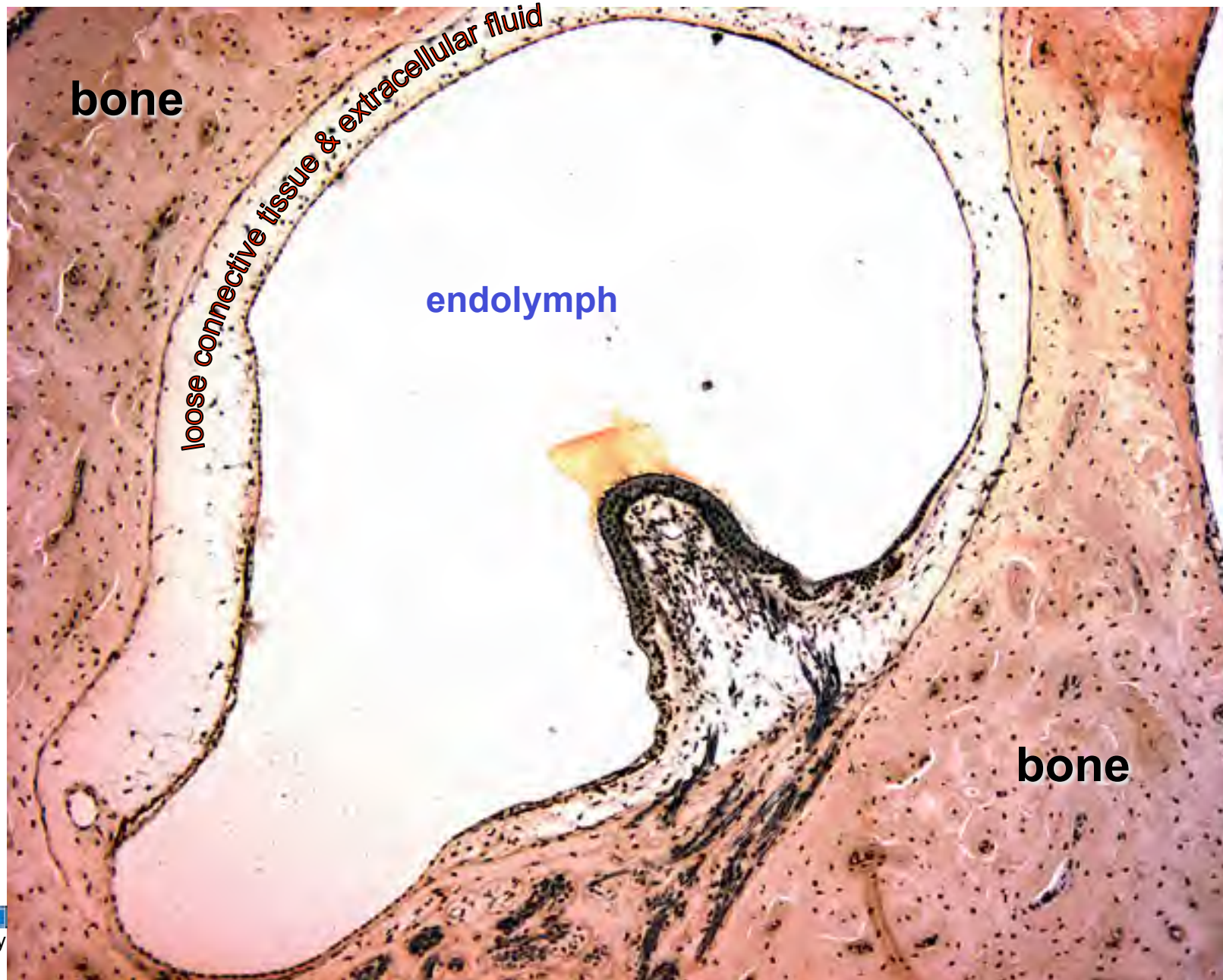
 Thomas.haslwanter, [Wikipedia](#)

Semicircular ducts

Crista ampullaris:
ridge of sensory cells in
ampulla of each
semicircular canal



Crista ampullaris



Crista Ampularis

Gelatinous cupula

Hair cells

Sustentacular Cells

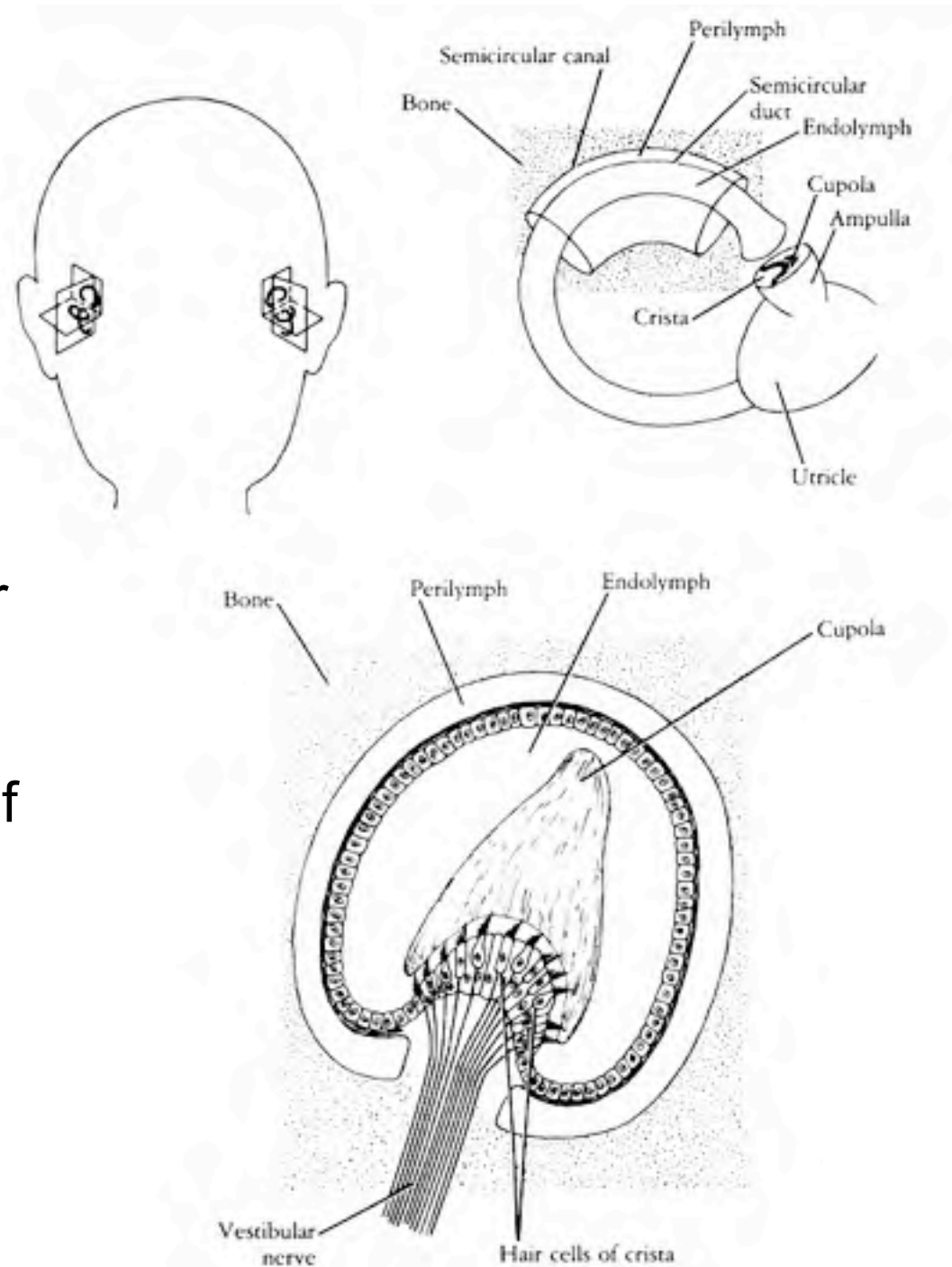
Nerve fibers
(and Schwann cells)

loose
connective
tissue



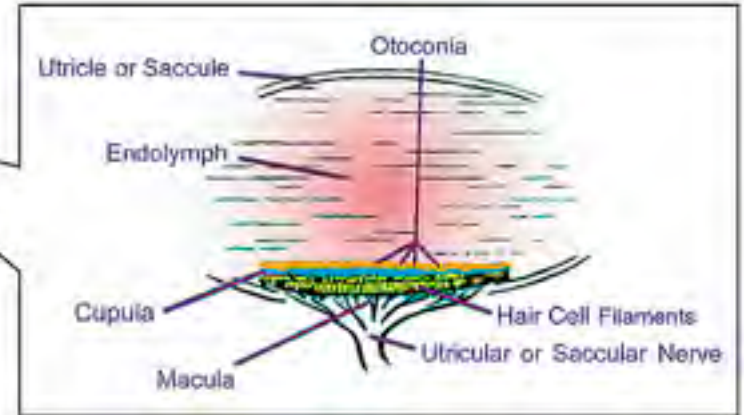
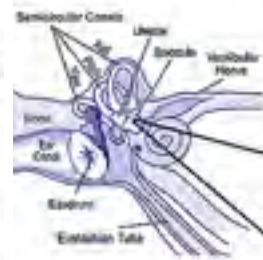
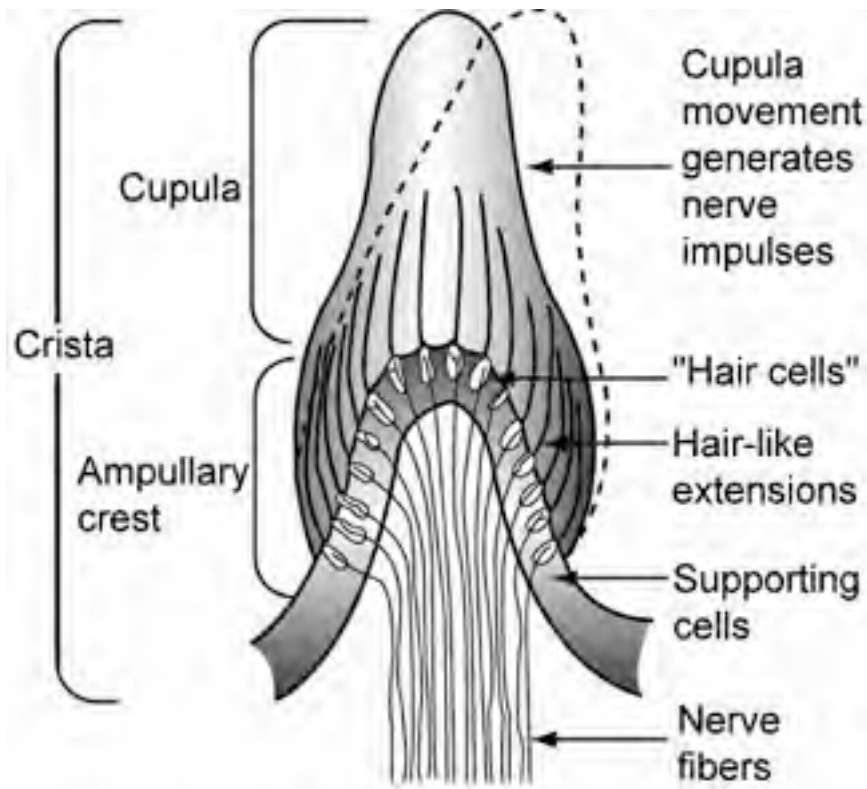
Deflection of stereocilia of crista ampularis hair cells:

When head is turned, fluid (endolymph) in semicircular canal lags behind causing deflection of cupola which in turn deflects stereocilia of hair cells.



Crista ampularis: angular acceleration

Macula: linear acceleration

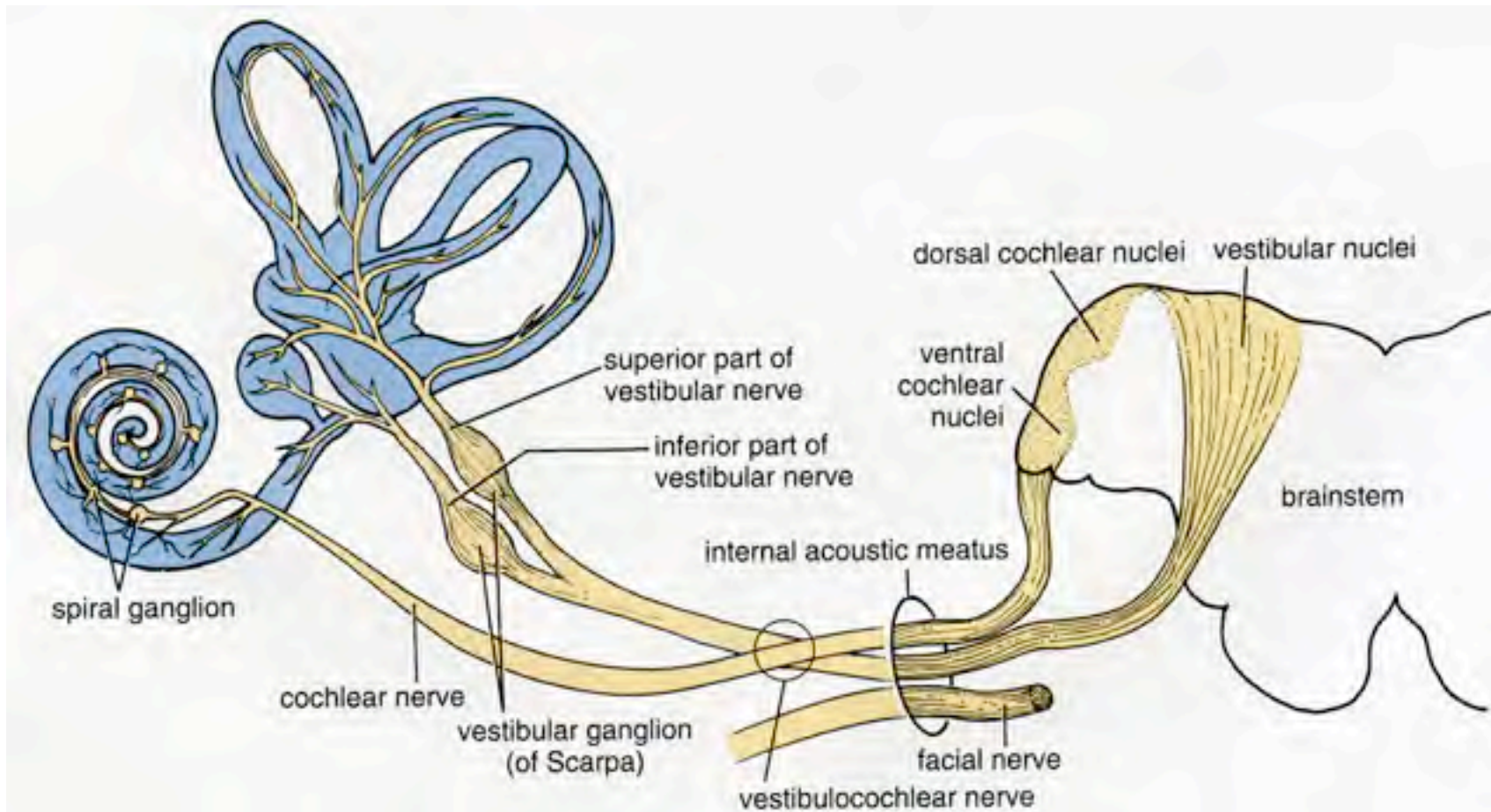


 U.S. Federal Government

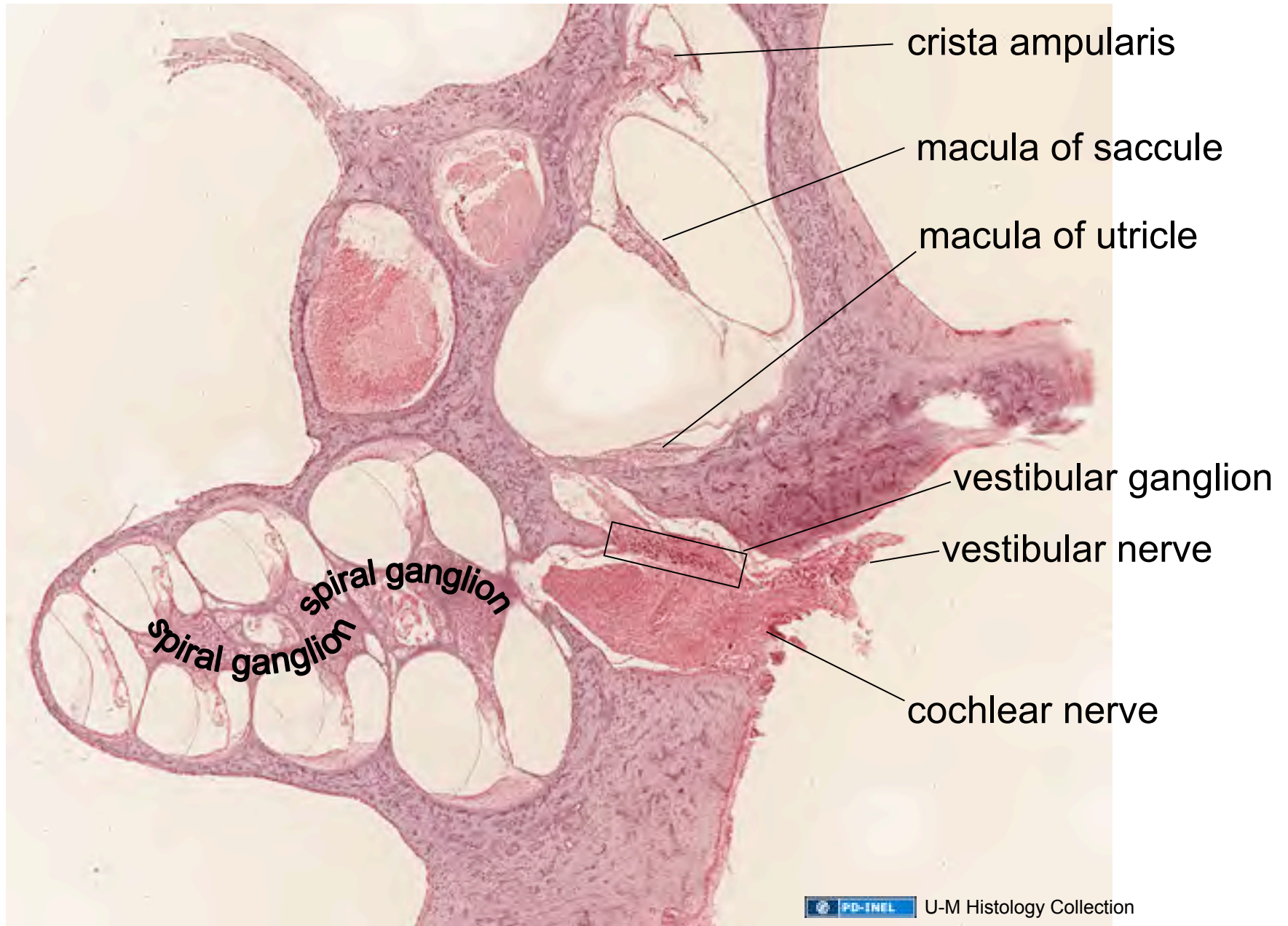
 NASA, [Wikimedia Commons](https://commons.wikimedia.org/)

Innervation of vestibular sense organs:

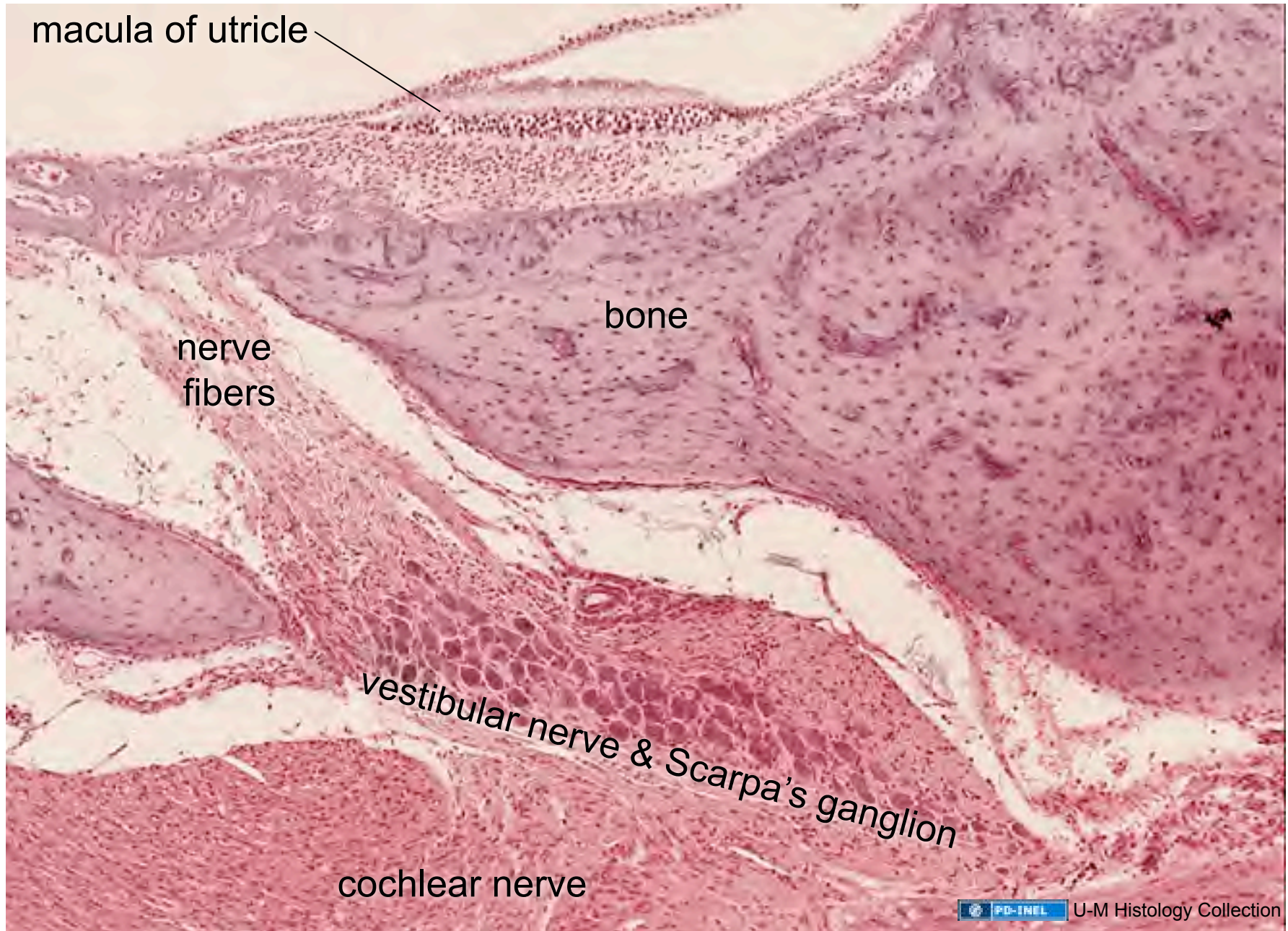
vestibular hair cells innervated by bipolar sensory neurons in vestibular (Scarpa's) ganglion



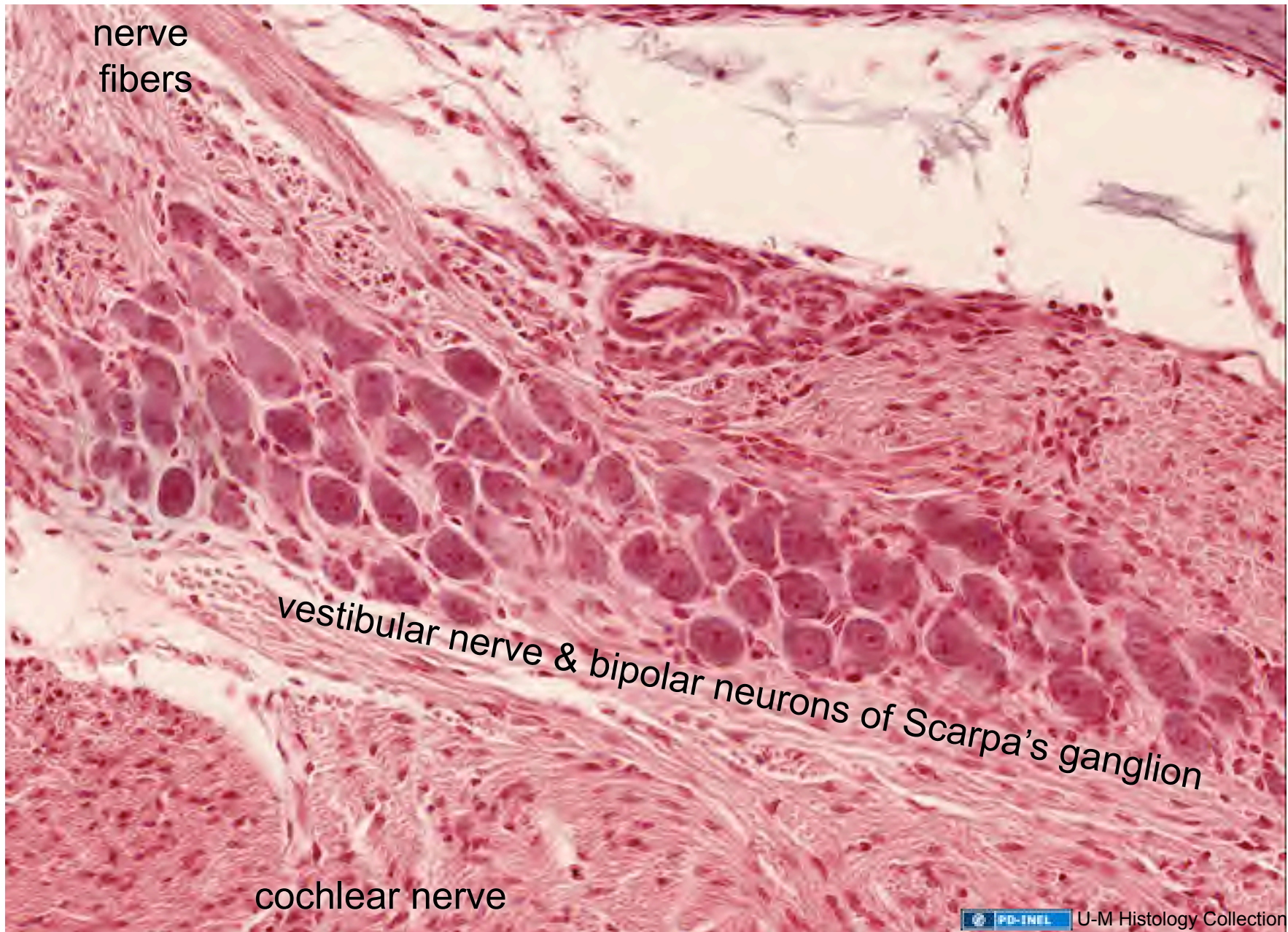
Vestibular (Scarpa's) ganglion



Vestibular (Scarpa's) ganglion



Vestibular (Scarpa's) ganglion



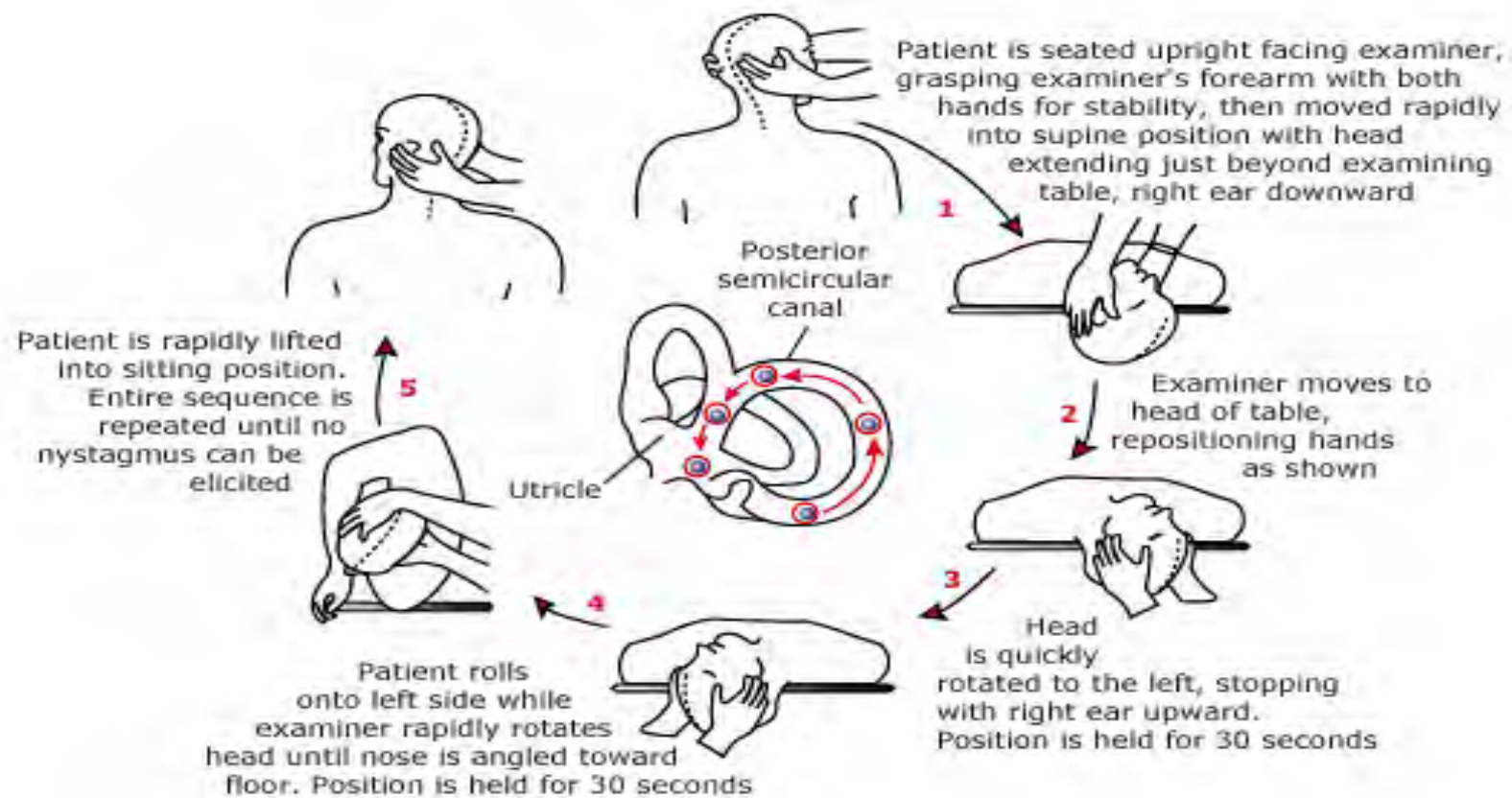
Benign Positional Vertigo:

or, what happens when an accelerometer becomes a gravitometer

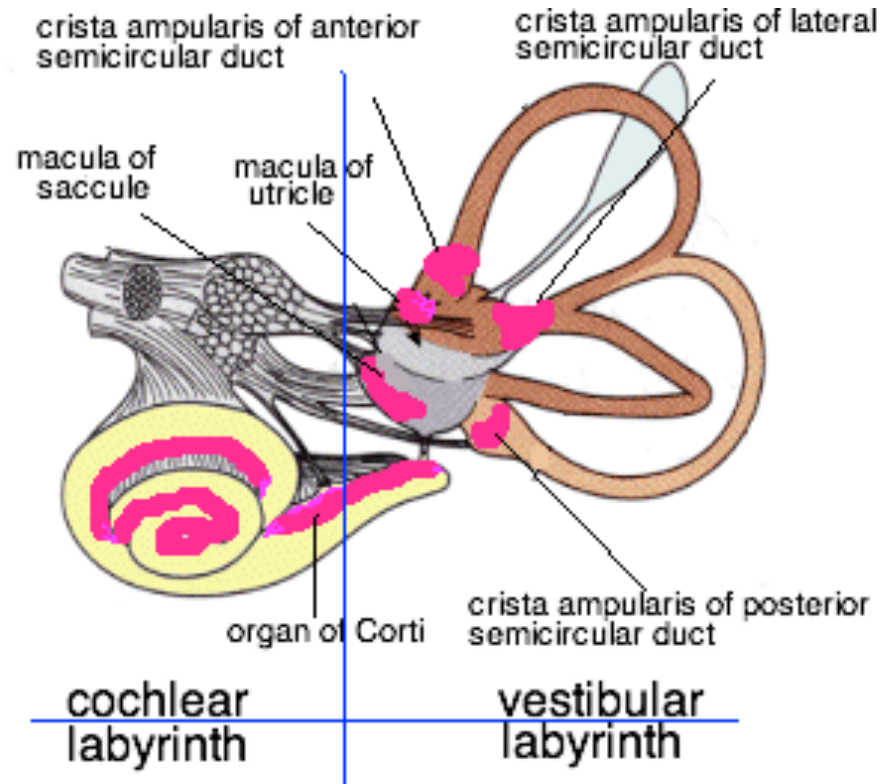
- otoliths dislodged from macula of utricle and become embedded in cupula of a crista ampularis (usually posterior semicircular canal)
- pull of gravity on otoliths deflects cupula stimulating the hair cells
- stimulation of crista hair cells interpreted by brain as angular acceleration –i.e. spinning sensation
- Can be treated by moving the head in such a way to return otoliths to macula (Epley maneuver)



The Epley Maneuver (purely FYI)

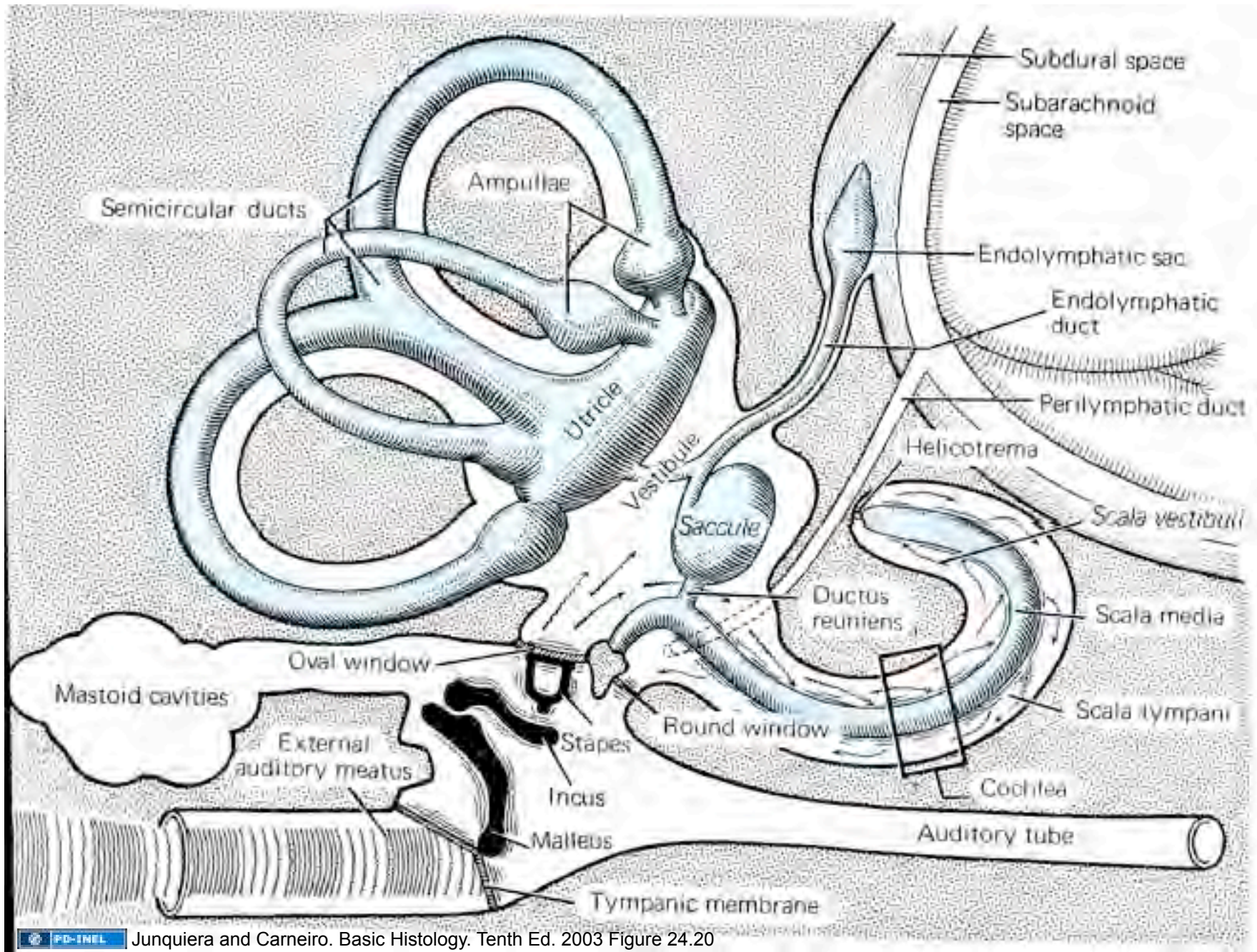


Sensory regions



 Thomas.haslwanter, [Wikipedia](#)

Cochlear duct: 35 mm, from saccule



Junquiera and Carneiro. Basic Histology. Tenth Ed. 2003 Figure 24.20

Cochlear canal: oval window to round window

The cochlear canal is wound around a central bony shaft (the modiolus)



Three spiraling compartments around a central shaft (the modiolus)

Scala vestibuli
(perilymph)

Scala media
(endolymph)

Scala tympani
(perilymph)

scala = stairway (latin)

Sound waves are converted into mechanical vibrations at tympanic membrane and travel up through perilymph in scala vestibuli...

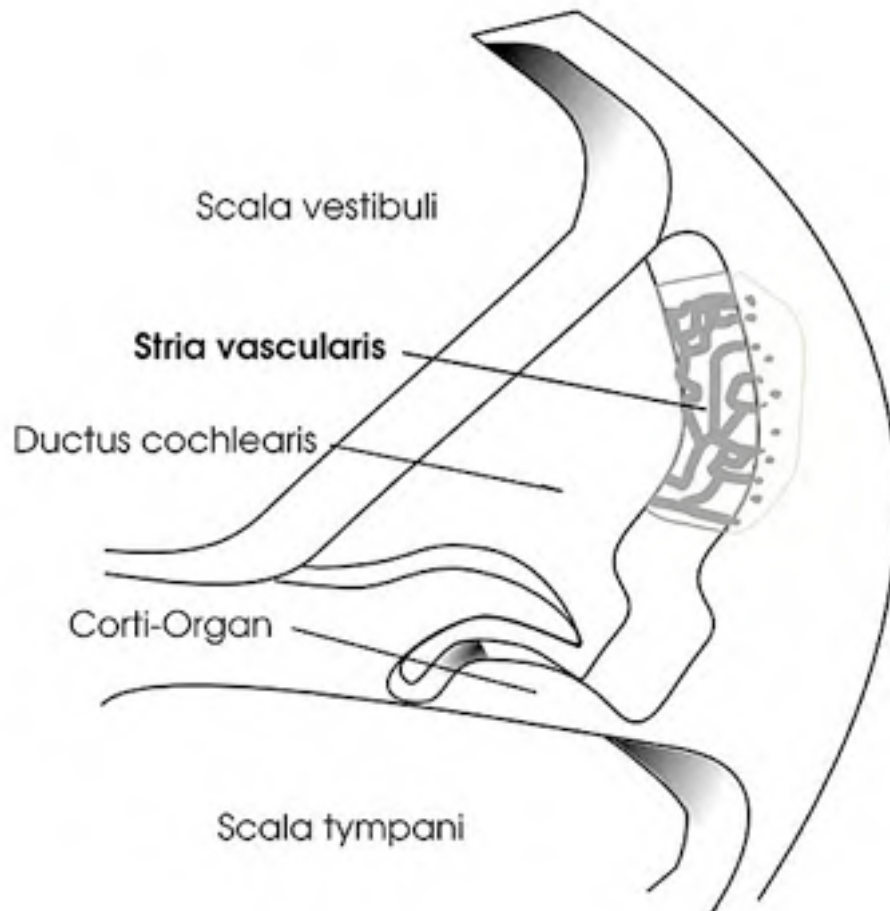
make U-turn at helicotrema...

travel down scala tympani...

and end at round window at the base of the cochlea.



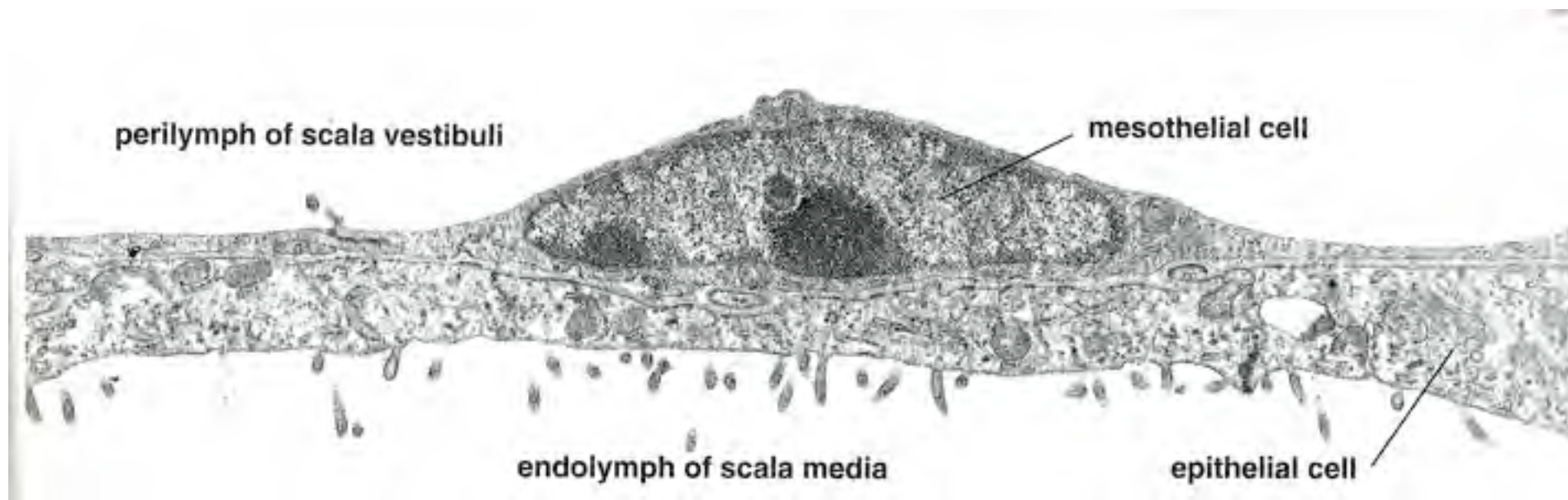
Cochlea



- Vestibular membrane
- Basilar membrane
- Tight Junctions
 - isolate endolymph from perilymph
- **Stria vascularis****
 - ion transport, produces endolymph
- Spiral ganglion cells
 - (bipolar sensory neurons)
- Osseous spiral lamina
 - (extend from the modiolus like threads of a screw)
- Tectorial membrane (gelatinous)
- Organ of Corti
- “Corticolymph” (like perilymph):
 - extracellular fluid within organ of Corti

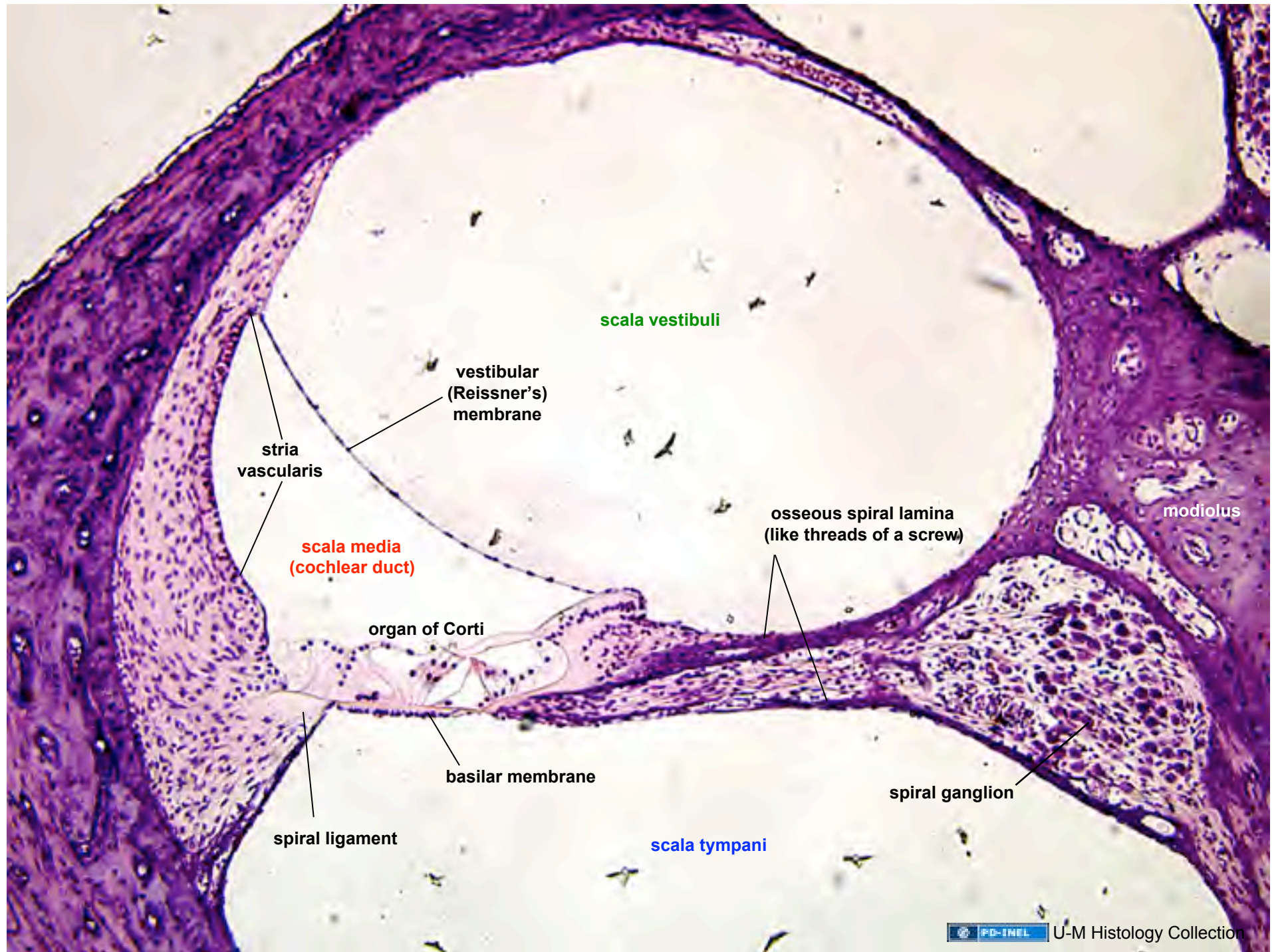
****Meniere’s syndrome:**
overproduction and/or poor drainage
of endolymph –dizziness, tinnitus

Vestibular Membrane

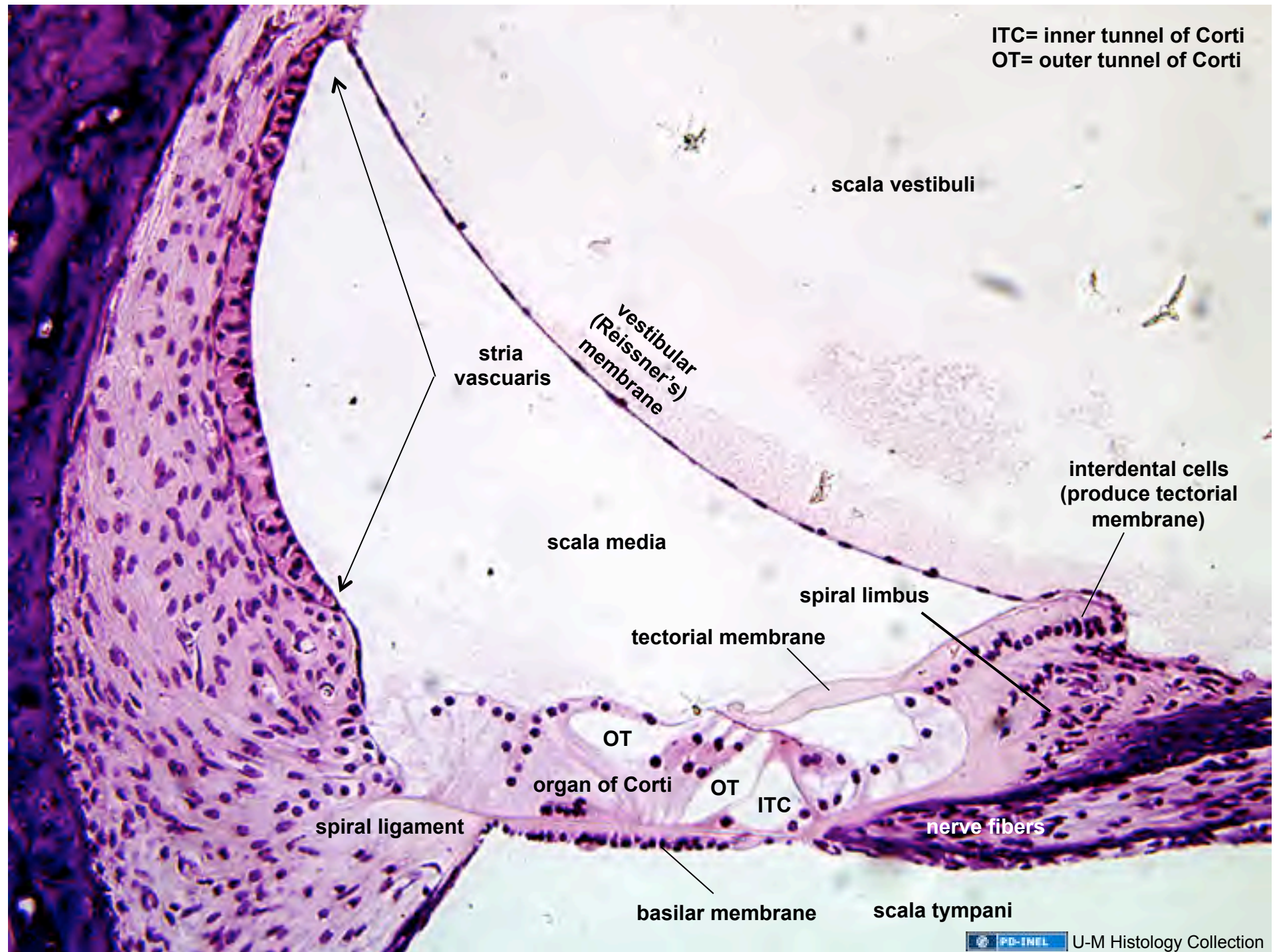


FD-INEL | Ross and Pawlina (2006), *Histology: A Text and Atlas, 5th ed.* Figure 25.15.

- Double epithelium (common basement membrane)
- Separates endolymph in scala media from perilymph in scala vestibuli (note junctions)



ITC= inner tunnel of Corti
OT= outer tunnel of Corti



scala vestibuli

stria vascularis
vestibular (Reissner's) membrane

scala media

interdental cells (produce tectorial membrane)

spiral limbus

tectorial membrane

OT

organ of Corti

OT

ITC

nerve fibers

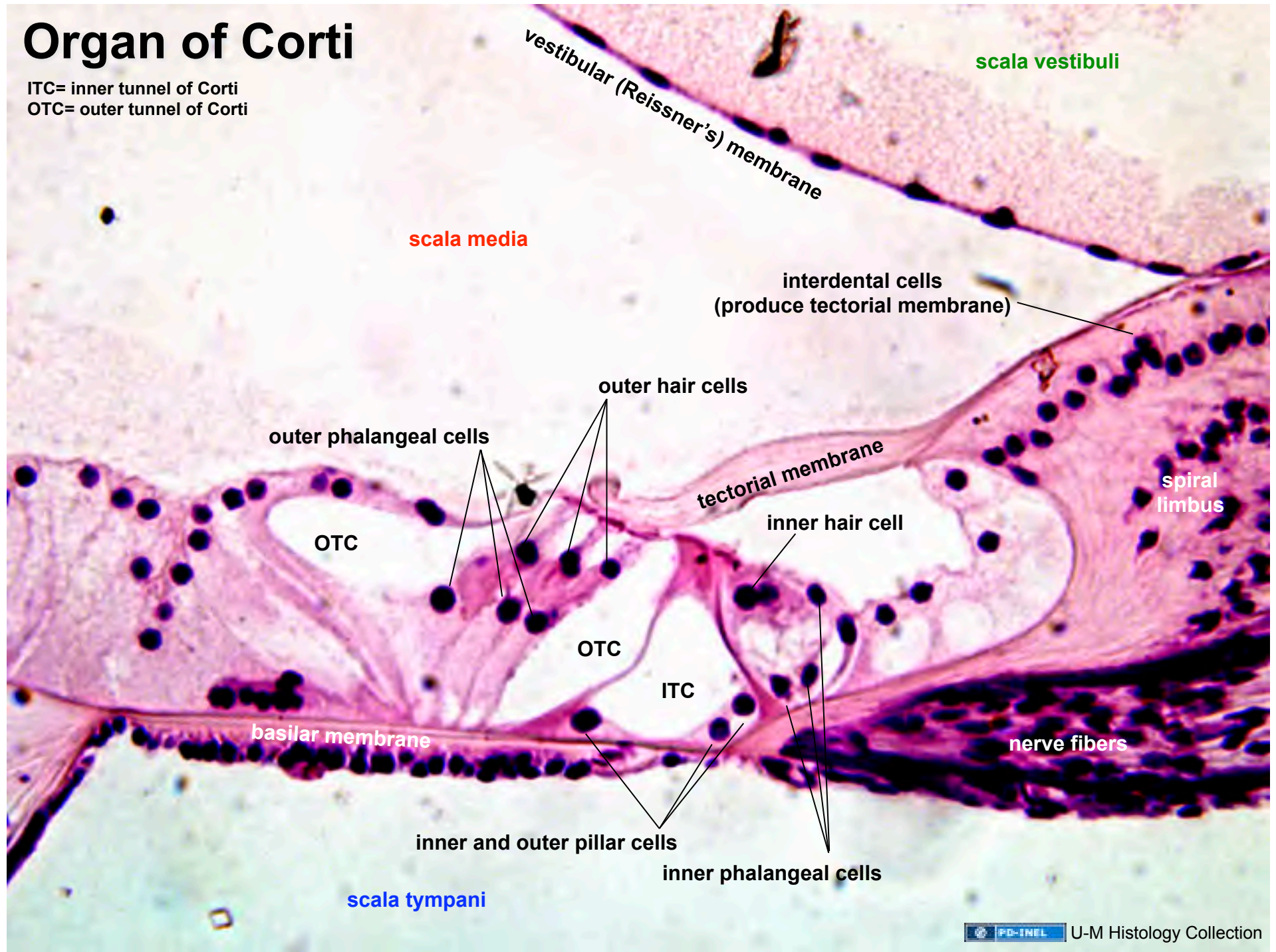
spiral ligament

basilar membrane

scala tympani

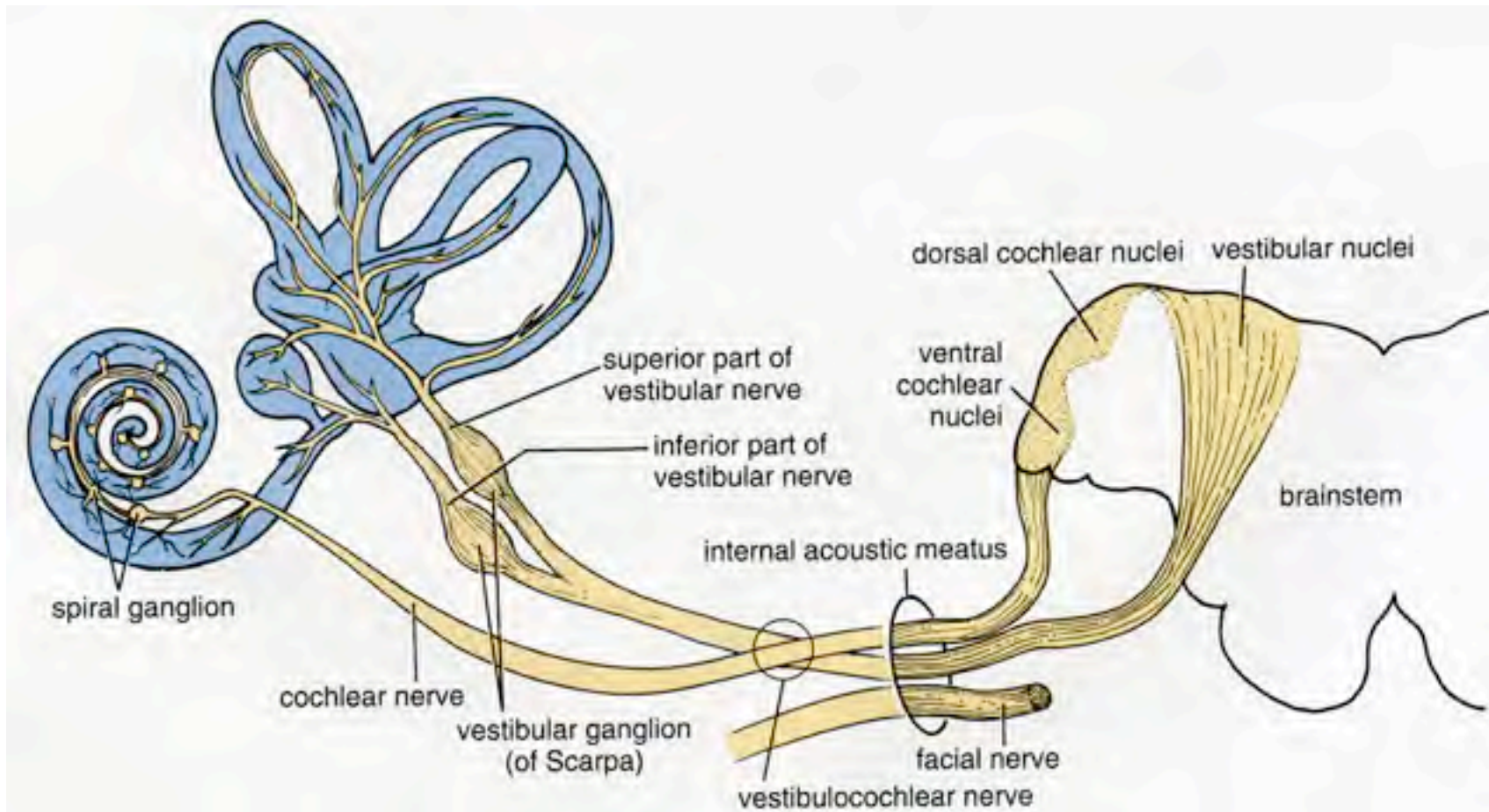
Organ of Corti

ITC= inner tunnel of Corti
OTC= outer tunnel of Corti

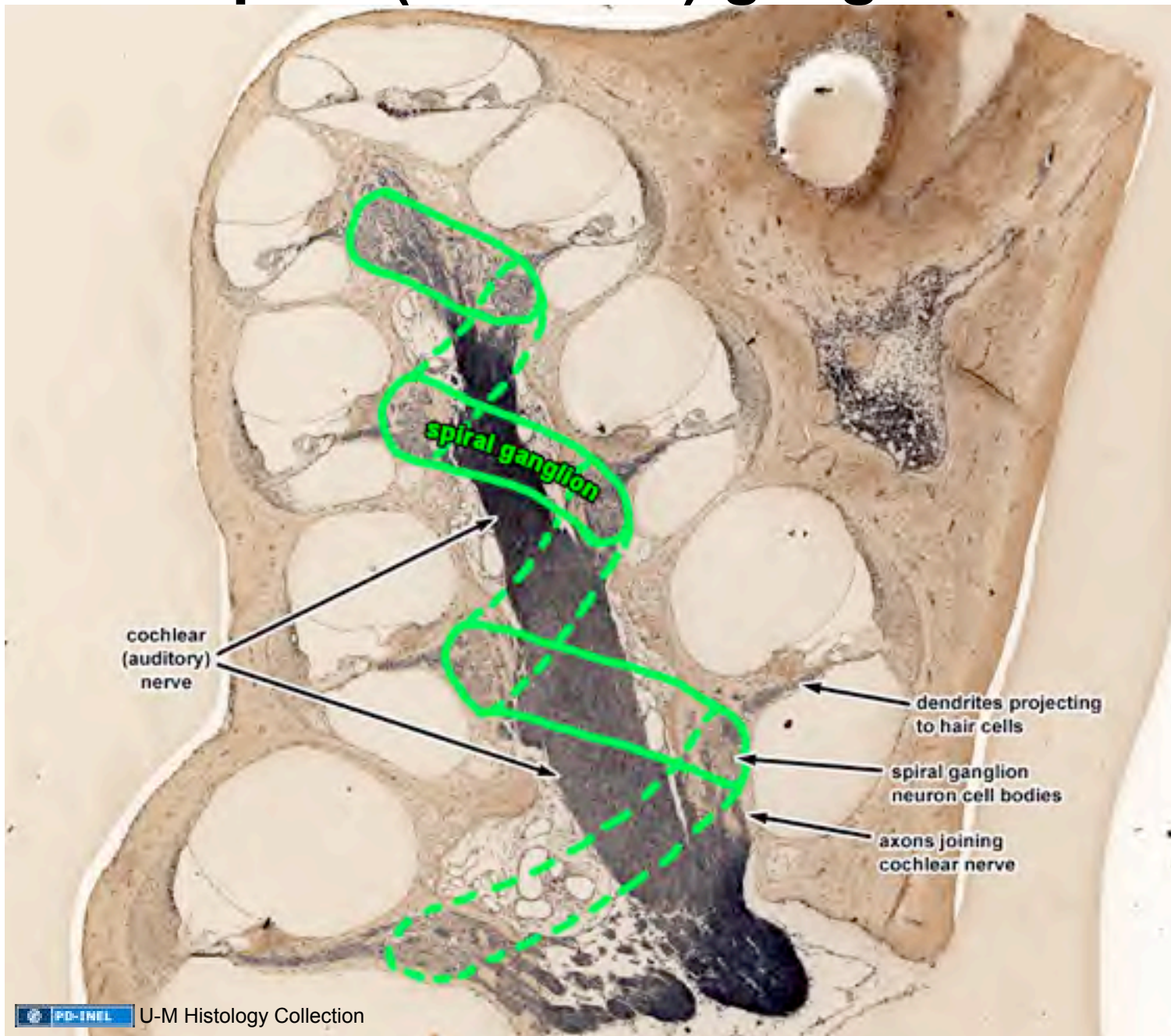


Innervation of the cochlea:

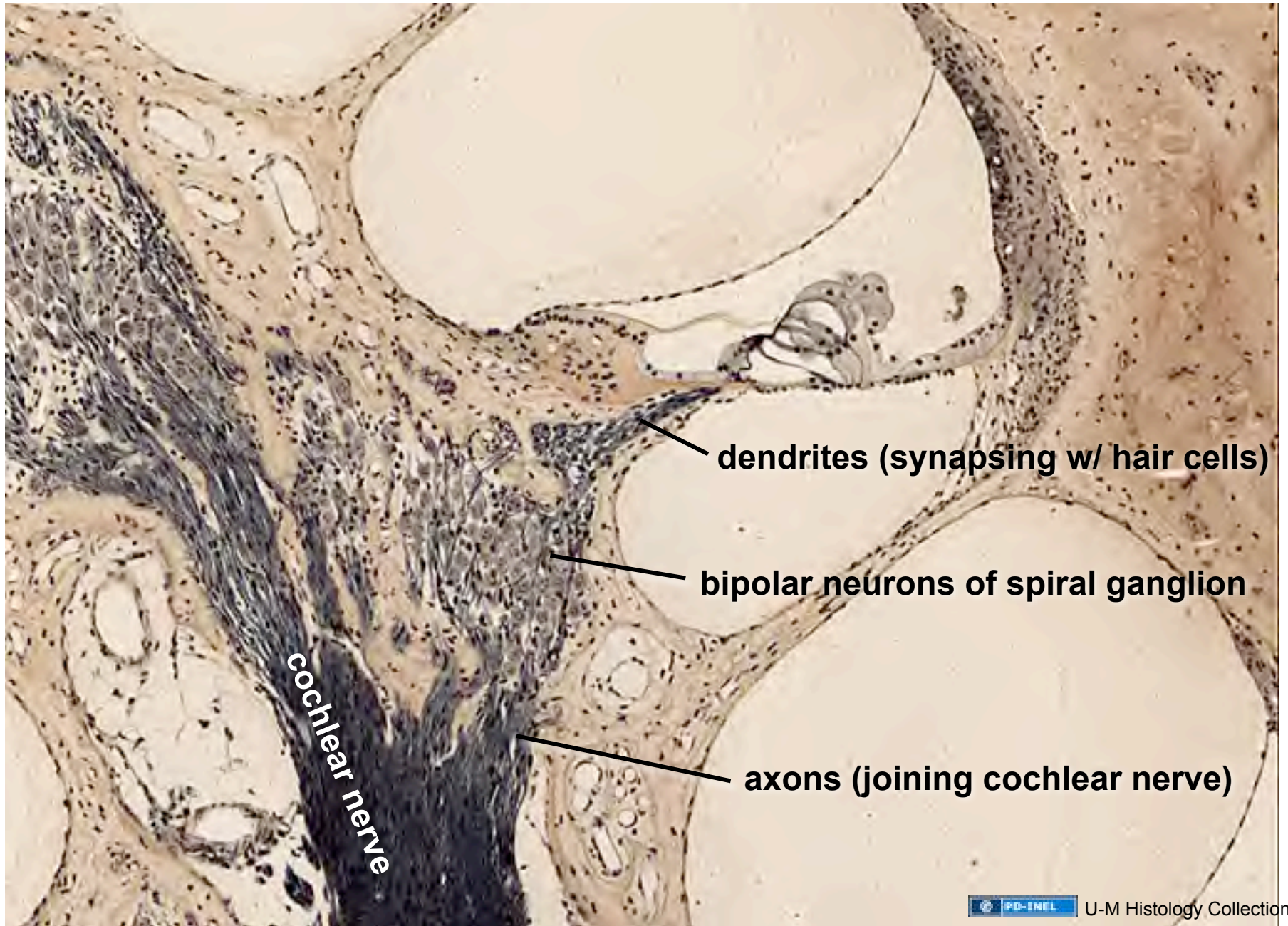
cochlear hair cells innervated by bipolar sensory neurons in spiral (coclear) ganglion



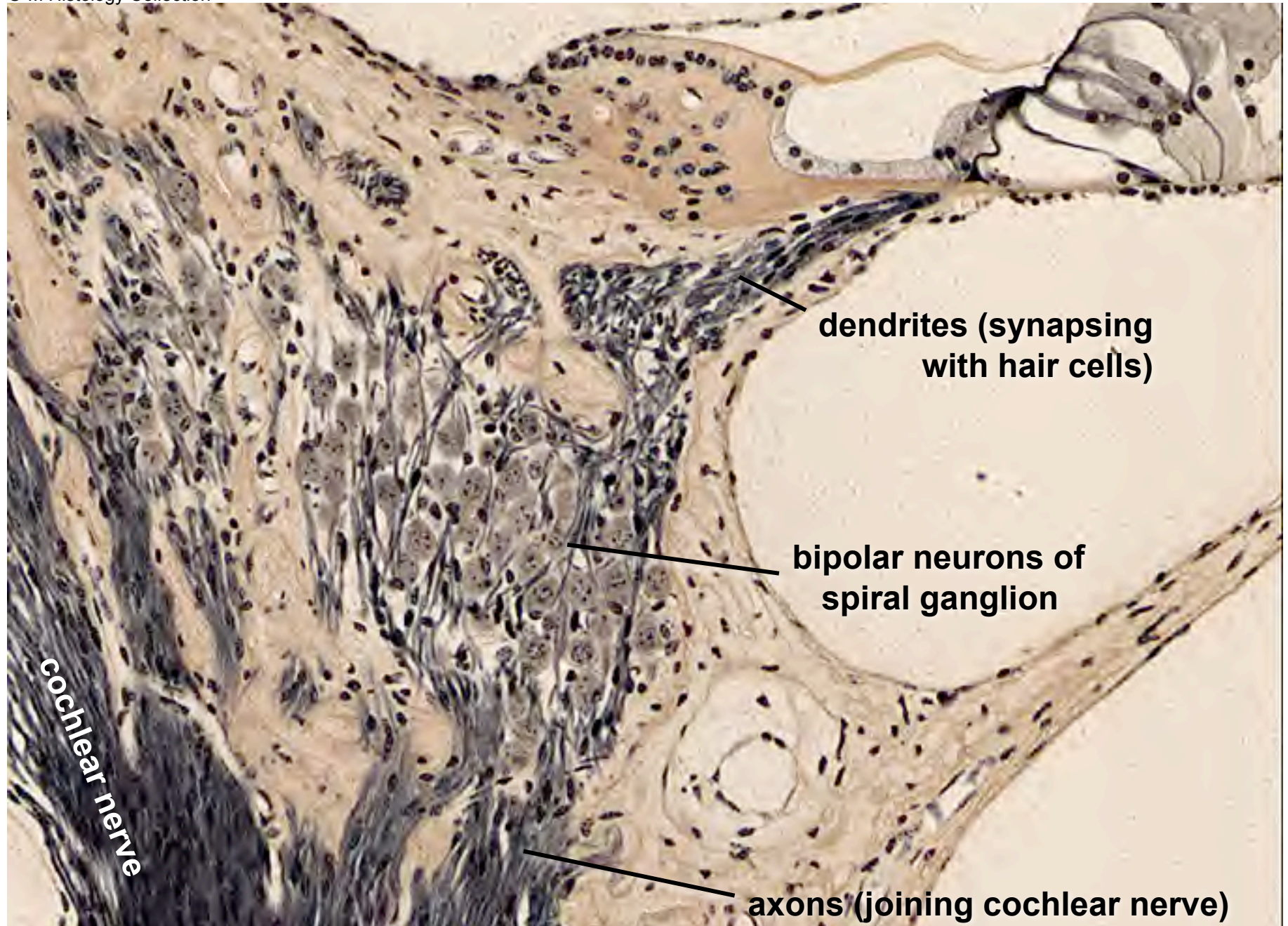
Spiral (cochlear) ganglion



Spiral (cochlear) ganglion

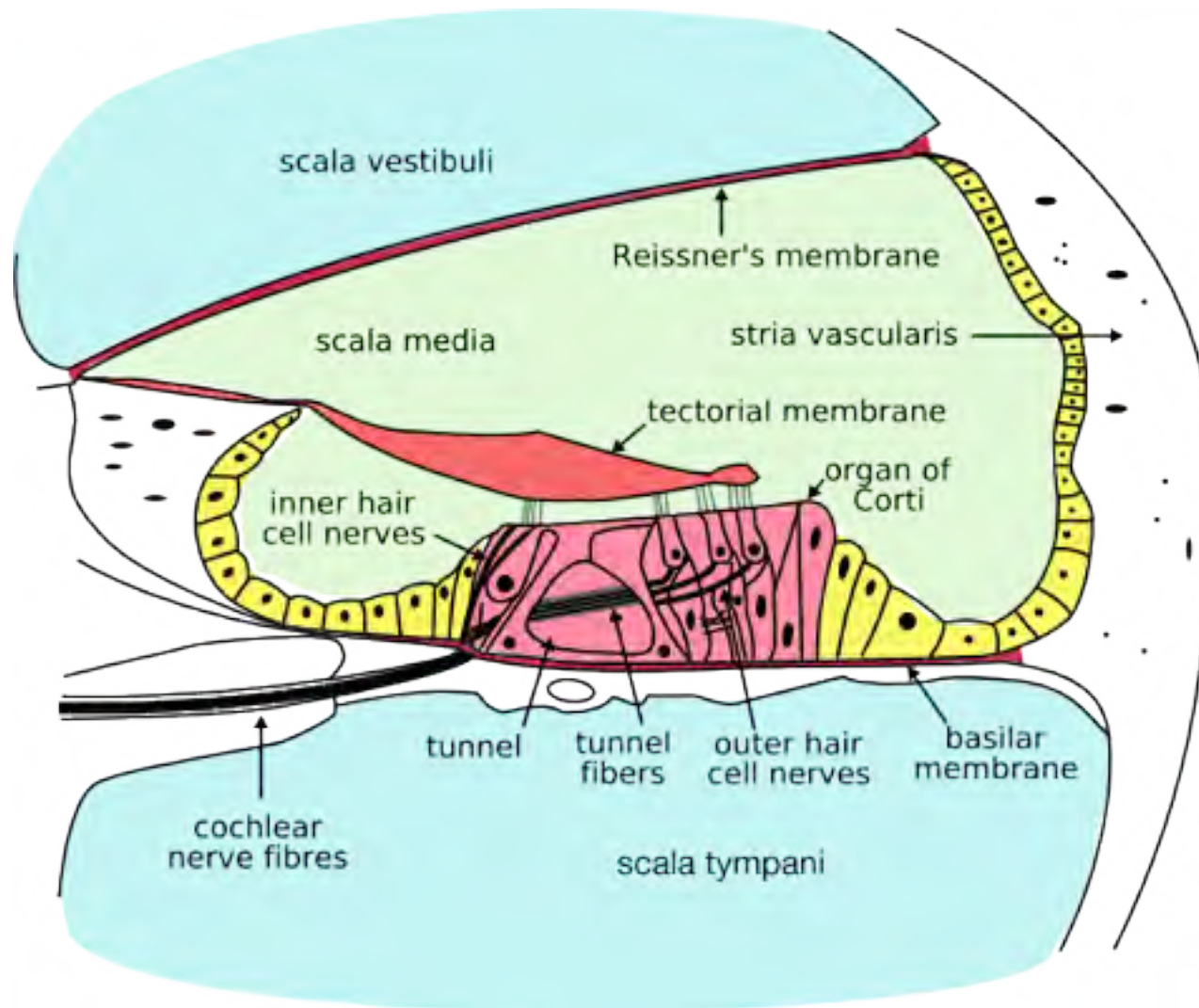


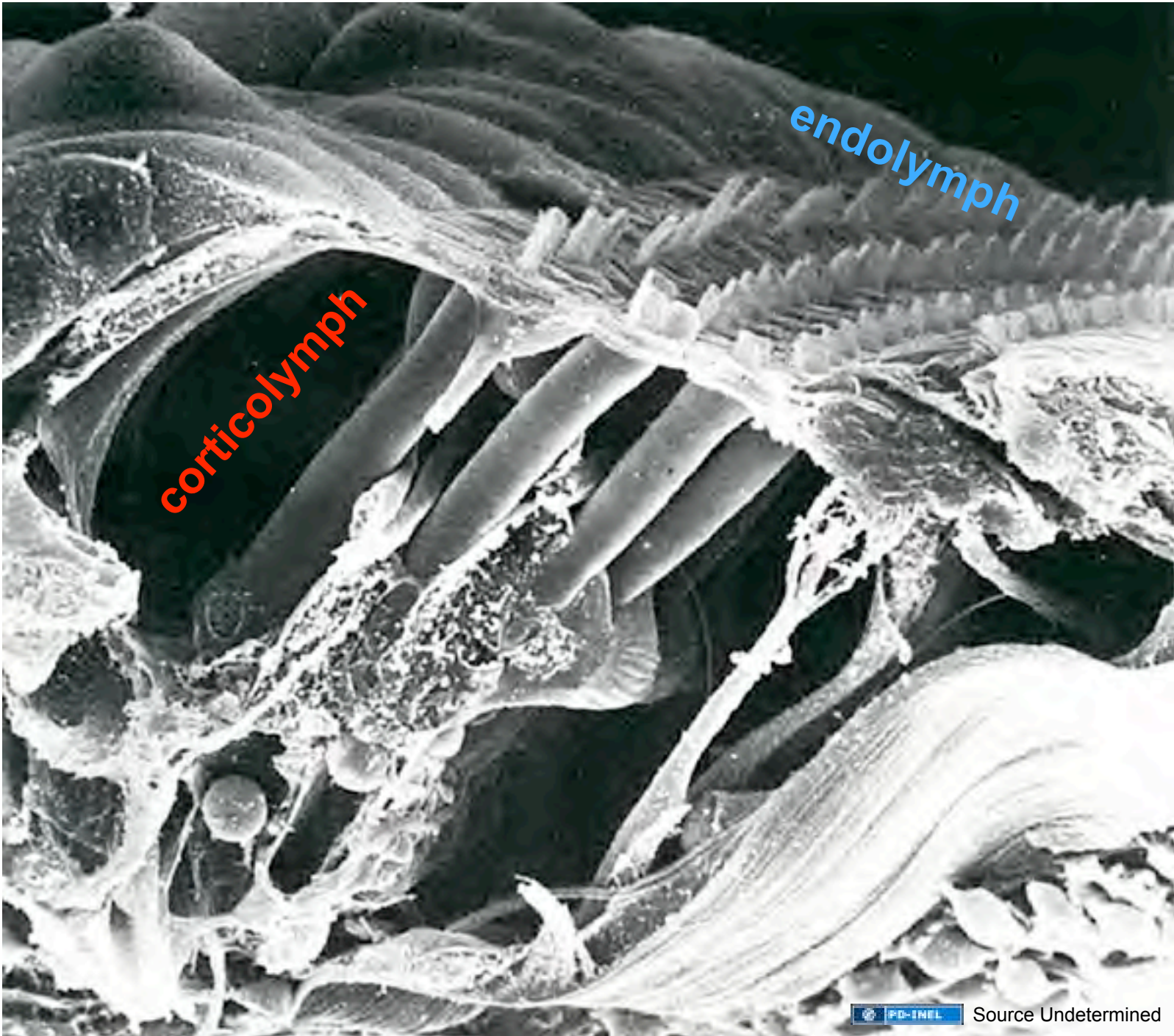
Spiral (cochlear) ganglion

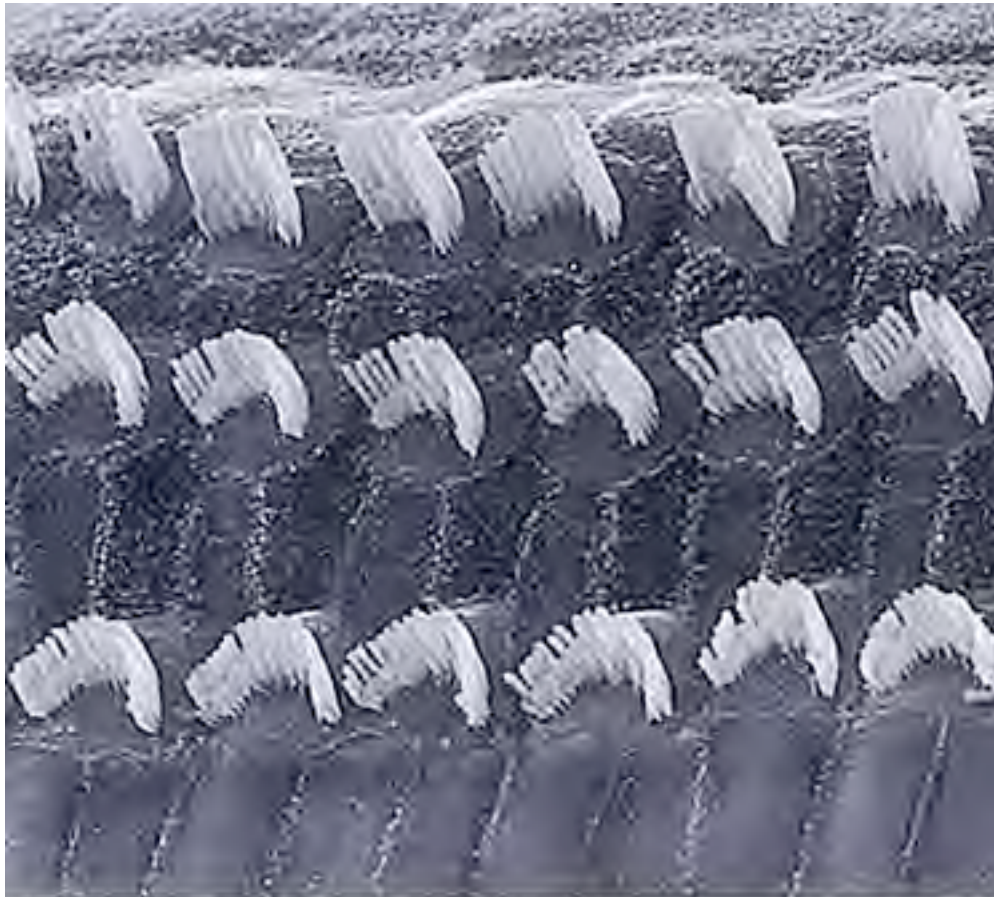


Organ of Corti: Sensory (hair) cells

Supporting cells: phalangeal, pillar







Stereocilia insert into tectorial membrane

OHC stereocilia arranged in a curve

outer hair cells ↑

↓ inner hair cells

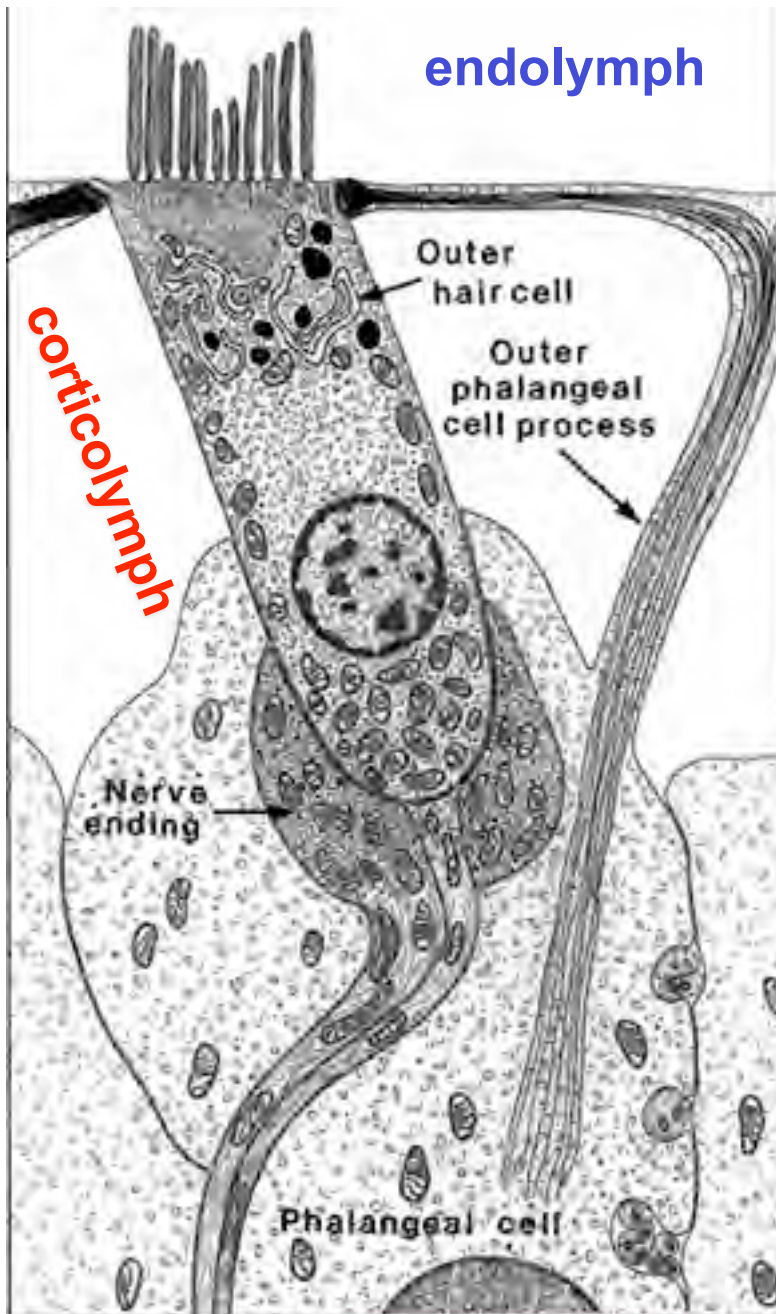


IHC stereocilia arranged in a line

no kinocilium

IPD-INEL

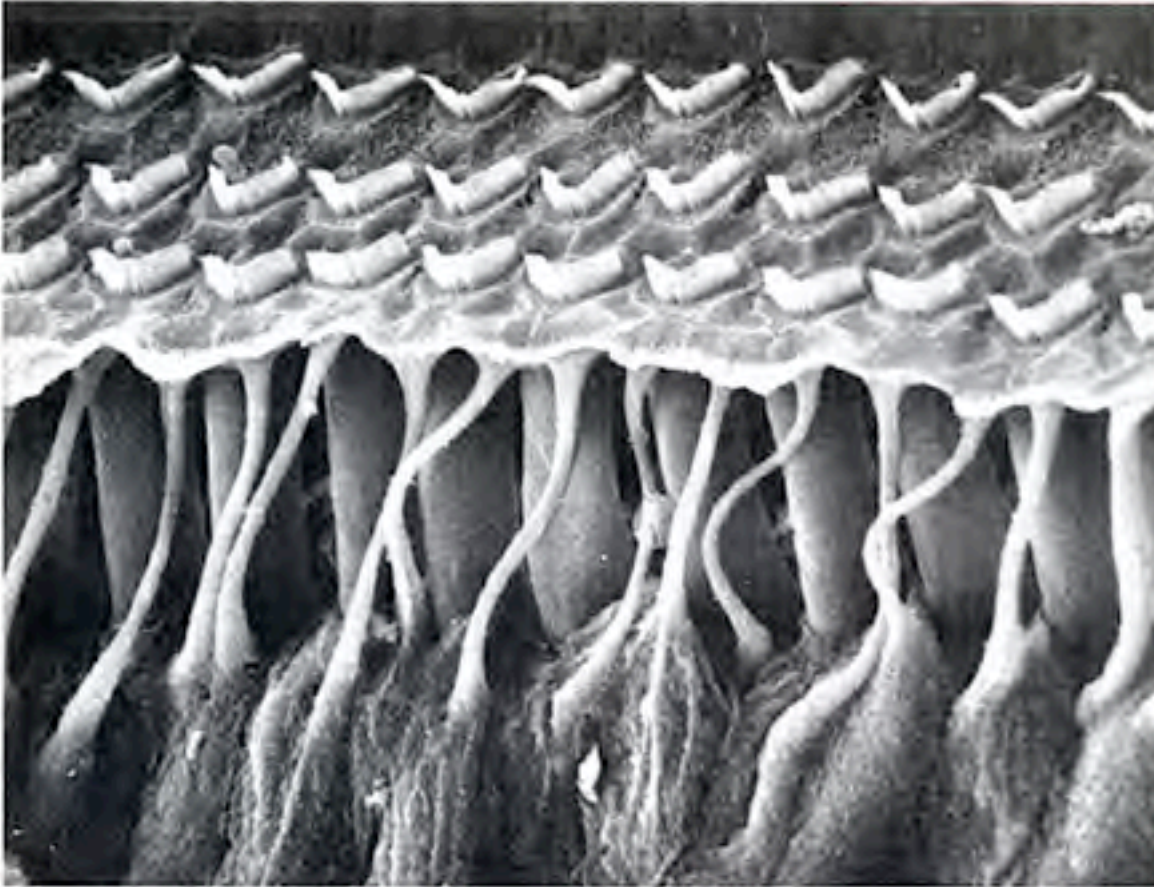
Junquiera and Carneiro. Basic Histology. Tenth Ed. 2003 Figure 24-25.



Phalangeal Cells

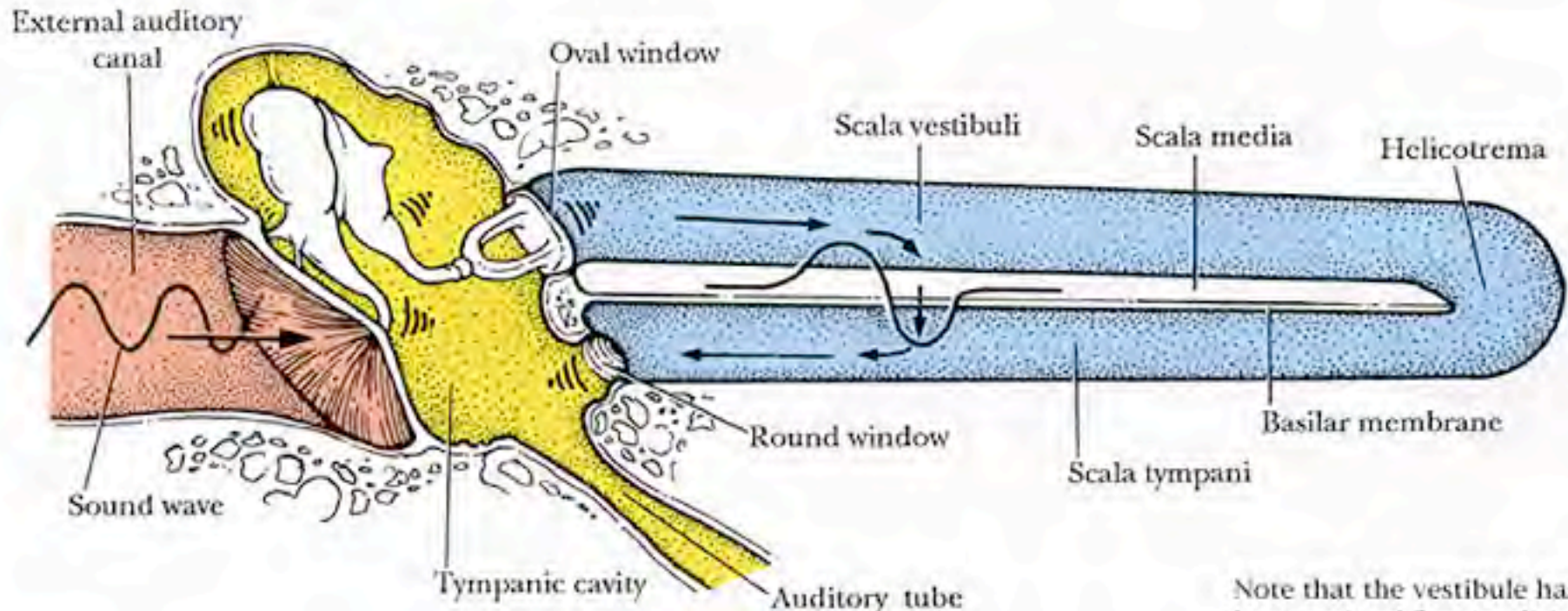
- Stabilize hair cells in reticular plate
- Tight junctions maintain ion gradient between endolymph and corticolymph

Phalangeal and hair cells



 Ross and Pawlina (2006), *Histology: A Text and Atlas, 5th ed.* Figure 25.20

Sound transduction



Note that the vestibule has been omitted for simplicity.

IPD-INEL Ross and Pawlina (2006), *Histology: A Text and Atlas, 5th ed.* Figure 25-21.

- Longitudinal waves: compression & rarefaction.
- Fluids in inner ear nearly incompressible
- Pressure changes transmitted across oval window,
- Resonance frequencies displace basilar membrane at specific locations: high frequency at base, low frequency at apex.

Sound transduction

OHCs

~10% of auditory input

alter length to “tune” organ of Corti

IHC

~90% of auditory input

movie found at:

<http://www.iurc.montp.inserm.fr/cric/audition/english/corti/fcorti.htm>

Outer hair cells are contractile

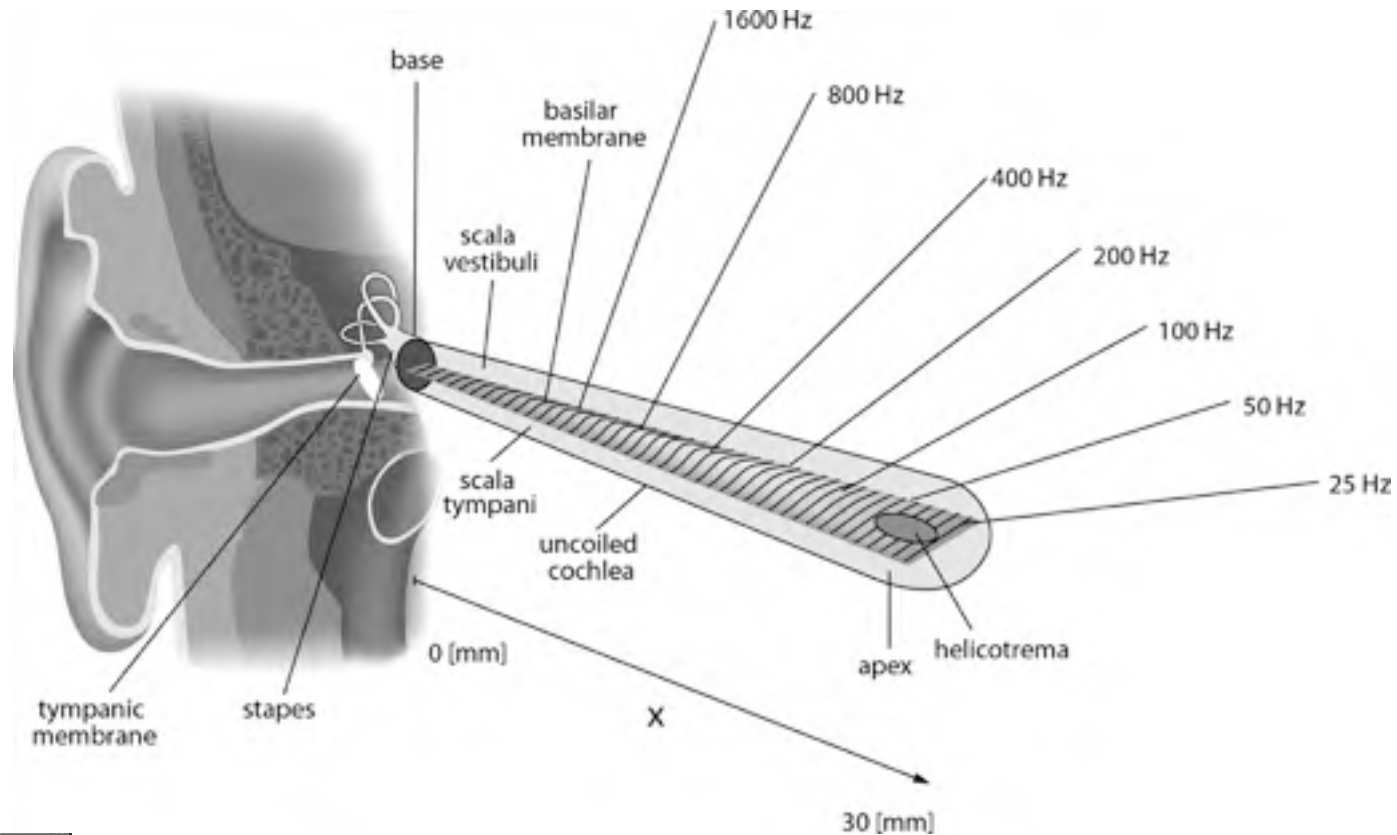
Movie of contracting OHC found at:

<http://www.physiol.ucl.ac.uk/ashmore/>

The movie shows an outer hair cell which has been patch-clamped using a whole cell recording pipette at its basal end. This allows the membrane potential of the cell to be varied. The low frequency envelope of Bill Haley and the Comet's "Rock Around The Clock" played into the stimulus input socket of the patch amplifier, with a peak-to-peak amplitude of about 100 mV. The hair cell changes length - but at constant volume - because it has a motor molecule in the membrane along the cell sides which responds to membrane voltage by changing area.

Frequency (pitch)

low frequency waves resonate at apex,
high frequency waves resonate at base



Frequency (pitch)

Basilar membrane is shorter at the base and longer at the apex, so...
low frequency waves resonate basilar membrane at the apex,
high frequency waves resonate basilar membrane at the base



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- Slide 10: Ross and Pawlina. (2006), *Histology: A Text and Atlas, 5th ed* Figure 25.6
- Slide 11: Gray's Anatomy, Gray's Anatomy, Wikimedia Commons, <http://en.wikipedia.org/wiki/File:Gray920.png>
- Slide 12: Gray's Anatomy, Wikimedia Commons, <http://en.wikipedia.org/wiki/File:Gray924.png>
- Slide 13: Pearson Scott Foresman, Wikimedia Commons, [http://commons.wikimedia.org/wiki/File:Ear_4_\(PSF\).png](http://commons.wikimedia.org/wiki/File:Ear_4_(PSF).png); Gray's Anatomy
- Slide 15: Thomas.haslwanter, [Wikipedia](#), <http://en.wikipedia.org/wiki/File:VestibularSystem.gif>
- Slide 16: U-M Histology Collection
- Slide 17: Ross and Pawlina. (2006), *Histology: A Text and Atlas, 5th ed* Figure 25.8
- Slide 19: Source Undetermined
- Slide 20: Source Undetermined
- Slide 21: Source Undetermined
- Slide 22: U-M Histology Collection
- Slide 23: NASA, Fig. 6 <http://weboflife.nasa.gov/learningResources/vestibularbrief.htm>
- Slide 24: Source Undetermined
- Slide 25: Source Undetermined
- Slide 26: NASA, Fig. 6 <http://weboflife.nasa.gov/learningResources/vestibularbrief.htm>
- Slide 27: NASA, Fig. 6 <http://weboflife.nasa.gov/learningResources/vestibularbrief.htm>
- Slide 28: NASA, Fig. 6 <http://weboflife.nasa.gov/learningResources/vestibularbrief.htm>
- Slide 29: NASA, Fig. 6 <http://weboflife.nasa.gov/learningResources/vestibularbrief.htm>
- Slide 30: Thomas.haslwanter, [Wikipedia](#), <http://en.wikipedia.org/wiki/File:VestibularSystem.gif>
- Slide 31: U-M Histology Collection
- Slide 32: U-M Histology Collection
- Slide 33: U-M Histology Collection

Slide 34: Source Undetermined

Slide 35: NASA, Wikimedia Commons, http://commons.wikimedia.org/wiki/File:Inner_ear%27s_cupula_transmitting_indication_of_acceleration.jpg; United States Federal Government

Slide 36: Ross and Pawlina (2006), *Histology: A Text and Atlas, 5th ed.* fig 25.22, pg. 882

Slide 37: U-M Histology Collection

Slide 38: U-M Histology Collection

Slide 39: U-M Histology Collection

Slide 40: U-M Histology Collection

Slide 41: *Up To Date*

Slide 42: Thomas.haslwanter, [Wikipedia, http://en.wikipedia.org/wiki/File:VestibularSystem.gif](http://en.wikipedia.org/wiki/File:VestibularSystem.gif)

Slide 43: Junquiera and Carneiro. Basic Histology. Tenth Ed. 2003 Figure 24.20

Slide 44: U-M Histology Collection

Slide 45: U-M Histology Collection

Slide 46: welleschik, [Wikipedia, http://commons.wikimedia.org/wiki/File:Stria_vascularis1.jpg#file](http://commons.wikimedia.org/wiki/File:Stria_vascularis1.jpg#file)

Slide 47: Ross and Pawlina (2006), *Histology: A Text and Atlas, 5th ed.* Figure 25.15.

Slide 48: U-M Histology Collection

Slide 49: U-M Histology Collection

Slide 50: Source Undetermined

Slide 51: Ross and Pawlina (2006), *Histology: A Text and Atlas, 5th ed.* fig 25.22, pg. 882

Slide 52: U-M Histology Collection

Slide 53: U-M Histology Collection

Slide 54: U-M Histology Collection

Slide 55: Oarih, [Wikipedia, http://en.wikipedia.org/wiki/File:Cochlea-crosssection.png](http://en.wikipedia.org/wiki/File:Cochlea-crosssection.png)

Slide 56: Source Undetermined

Slide 57: Junquiera and Carneiro. Basic Histology. Tenth Ed. 2003 Figure 24-25.

Slide 58: Source Undetermined

Slide 59: Ross and Pawlina (2006), *Histology: A Text and Atlas, 5th ed.* Figure 25.20

Slide 60: Source Undetermined

Slide 63: Kern A, Heid C, Steeb W-H, Stoop N, Stoop R, <http://www.ploscompbiol.org/article/info:doi/10.1371/journal.pcbi.1000161>

Slide 64: U-M Histology Collection