

auditory system:

- very fast processing (visual system slower)
↳ 2nd messengers etc.

- very sensitive: process 2 components of sound

1. amplitude of sound wave (decibels)

- human ear detects $0 \rightarrow 120$ dB, can detect 0.01 nm shift in air

frequency



amplitude

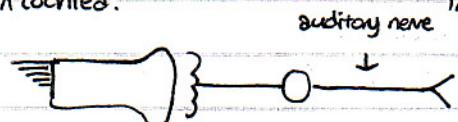
2. frequency of sound (Hz)

- $20 - 20,000\text{ Hz}$: speech $\sim 1000 - 3000\text{ Hz}$

- $50\mu\text{sec}$ detection (faster than synaptic transmission?) $\leftarrow 1\text{ ms}$

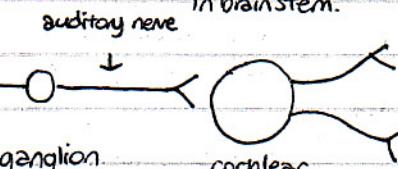
- more complex than visual system

in cochlea:



hair cell
(like photoreceptor
in visual system).

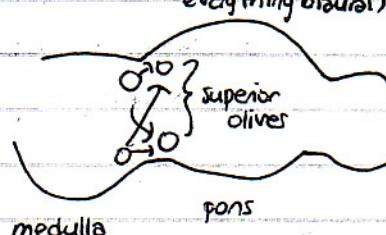
in brainstem:



ganglion cell

cochlear
nucleus
(between medulla
& pons)

(upstream from this,
everything biaural)



superior
olives
medulla
pons

contralateral projections
(each to other auditory
olivary nucleus), allows
to compare inputs from
each ear

(grand loc.)
Superior olive
nucleus

in thalamus:

medial
geniculate
nucleus

10 auditory
cortex
(Brodmann's
area 41/42):

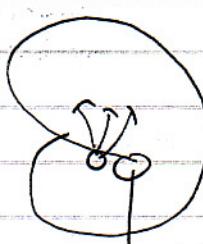
topological
by frequency
in superior
temporal gyrus



everything ipsi - & contralateral
past cochlear nucleus

(to get hearing loss in one ear,
must affect path before cochlear
nucleus)

past this, must have bilateral
lesions for hearing loss



association area

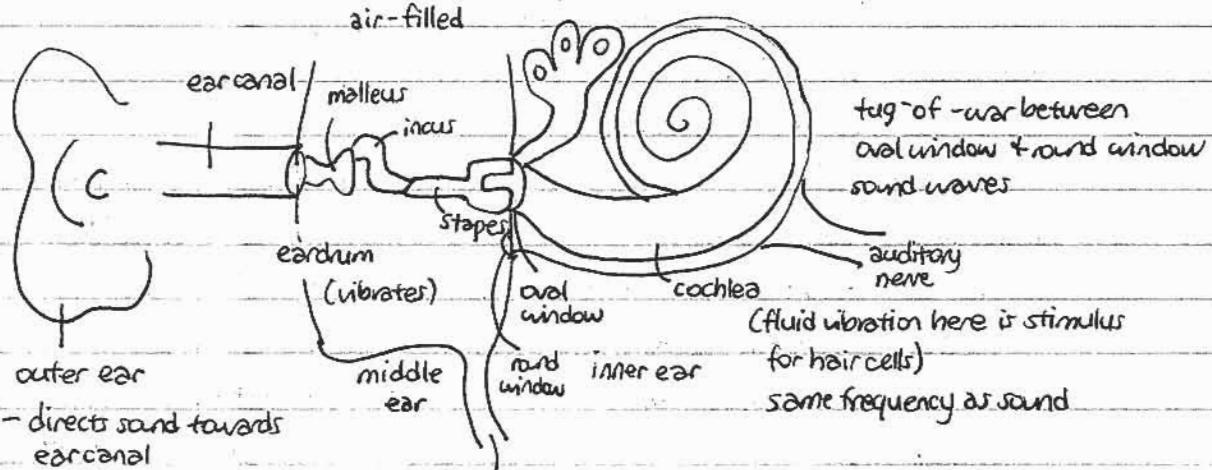
Wernicke's area: important for language,
unilateral lesion (esp. on left) can have
devastating effects

- hair cells have graded potentials (like PRs & bipolar cells)

- ganglion cells fire APs

(2 muscles that can reduce sound?)
air-filled

semicircular canals (balance)



- directs sound towards ear canal

(damage still lets you localize sound b/c one ear can do this somewhat)

if get ear infections, can get middle ear scar tissue

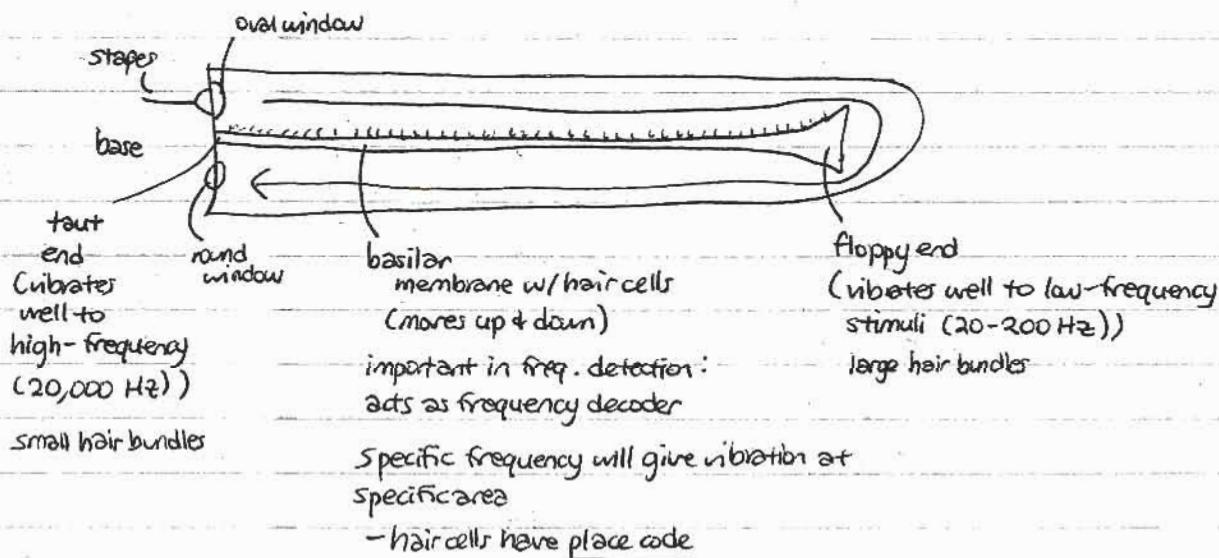
(common in children)

otosclerosis in old people, bone spurs in connective tissues
(can connect w/ prosthetic stapes)

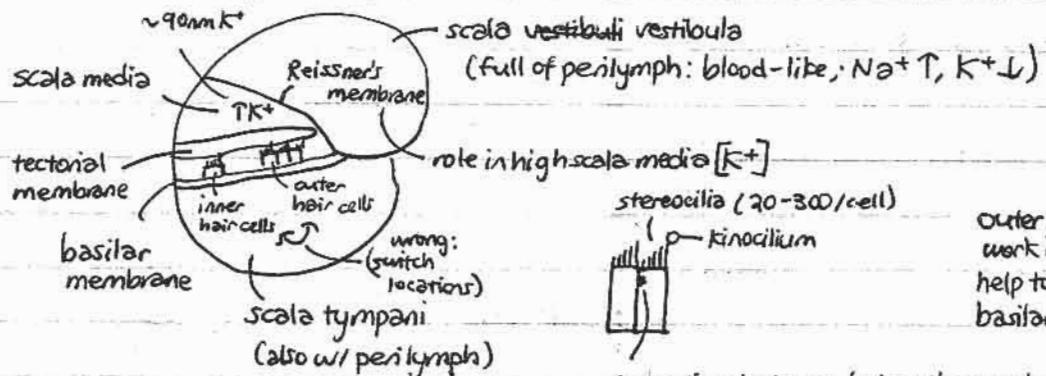
or damage to cochlea, certain frequencies you hear

unfold cochlea:

over & over



cochlear cross-section:



role in high scala media $\text{[K}^+\text{]}$

stereocilia (20-300/cell)

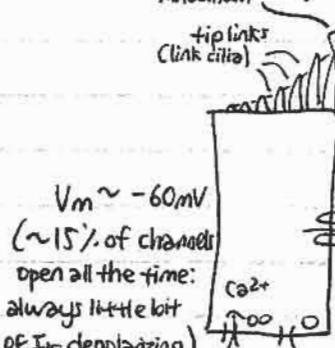
1 p-kinocilium

outer hair cells work in vibrating, help to vibrate basilar membrane

connections between hair cells so only cilia bathed in high K^+ (rest of hair cell in normal fluid)
(adherens junctions)

- as basilar membrane goes up, ///

kinocilium goes down, ///



open ($\rightarrow -40 \text{ mV}$)
close ($\rightarrow -70 \text{ mV}$)

stereocilia full of actin:
ion channels gated by tip links

15% open at resting now closed

cycle resting potential just like sound wave

-40
-70

ganglion cell

primary auditory nerve (can record from this)
(activity)

no sign change:

beta fire at slow constant rate;
more w/ sound,
less when sound off

unusual b/c charge carried by only one ion (Cl^-)

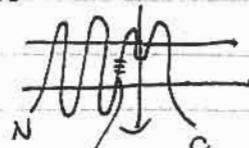
- this helps make it fast:

- direct gating of ion channel (cur timescale)

- K^+ can come in & leave

ion channel that mediates mechanotransduction yet to be cloned in humans pore

- trp channel
(K^+ channel)



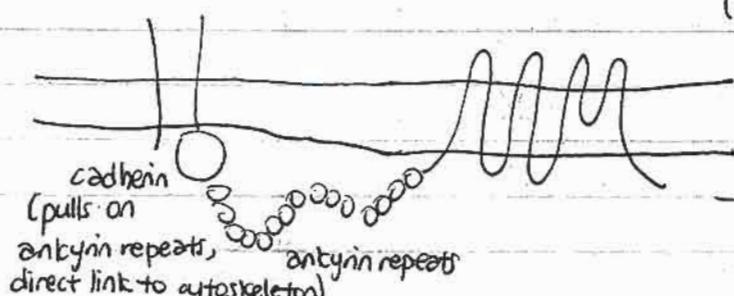
S4 voltage sensor (not in trp)

trp channels - 6 TM

- no S4

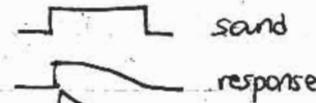
- very unusual N^+ termini (long, w/ ankyrin repeats)

↳ motif that binds cytoskeleton (eg actin)

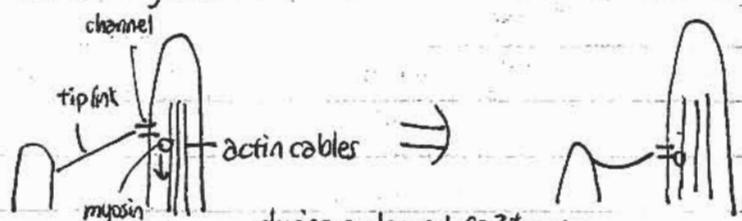


- when hair bundle shifted, little bit of Ca^{2+} goes in channel (along w/ K^+)

- adaptation to constant sound

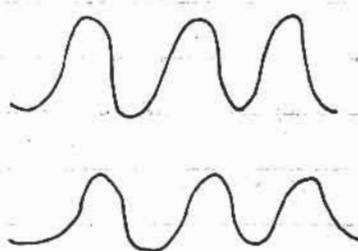


- change in way channel is gated



during prolonged Ca^{2+} entry,
binds myosin, drag/drown actin
cable, channels start to close!

now tip link doesn't activate channel anymore



stimulus stimulus locking:

hair cell V_m oscillates w/
movement of stereocilia

($\rightarrow 3 \text{ kHz}$)

in upper range, doesn't keep up but
talks to many ganglion cells



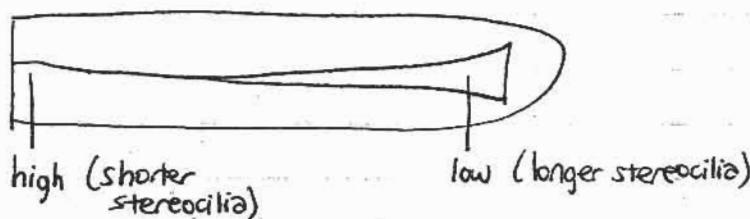
each hair cell talks to many (10-20) ganglion cells

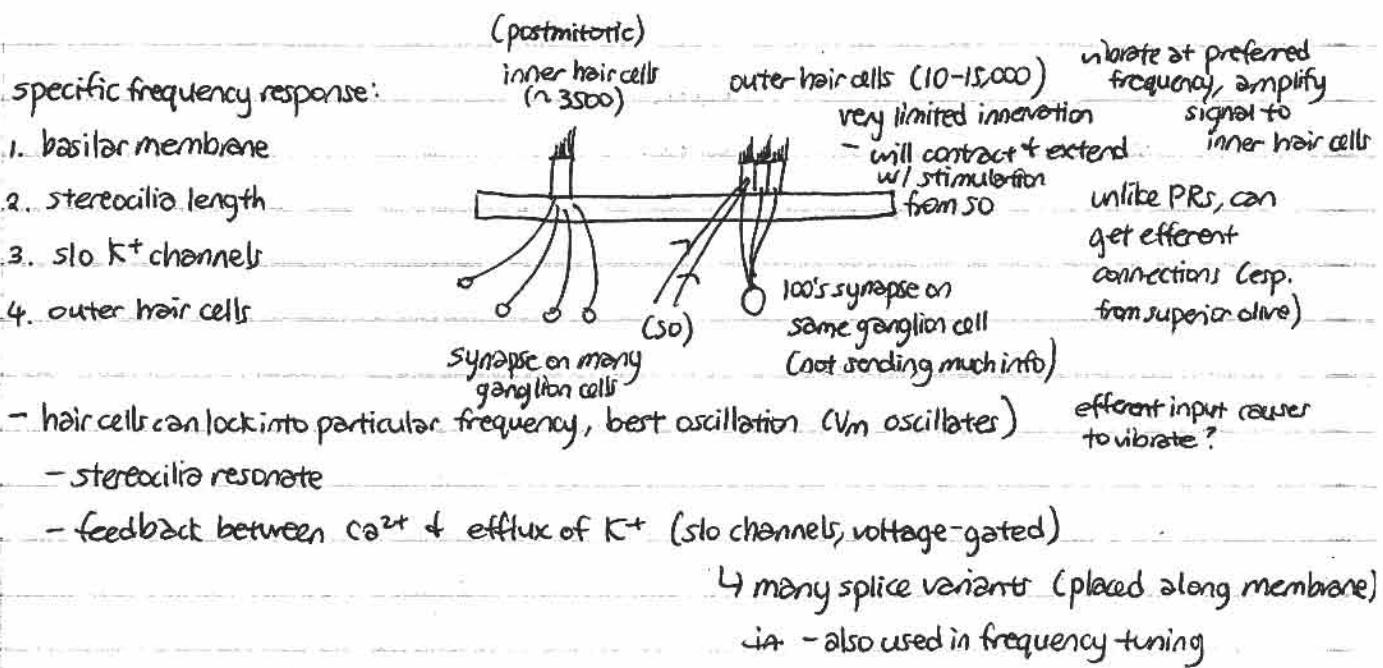
- need dense body (particular to hair cells): like conveyor belt
to release NT very rapidly

frequency
of firing matches
Stimulus oscillation

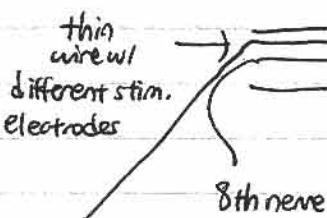
place code: depending on where hair cells are, encode particular frequencies

Stereocilia length
also help tune to
specific frequencies





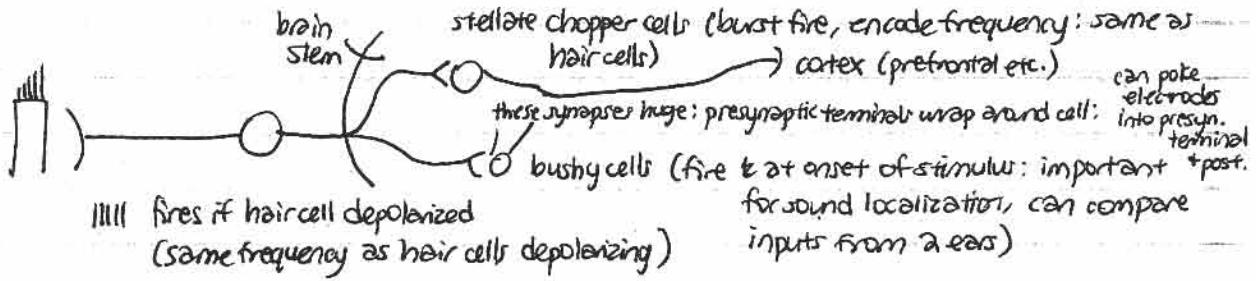
- aminoglycoside antibiotics (eg kanamycin, streptomycin) block mechanosensitive channels, can kill hair cells over time
- loud noise can shear stereocilia: worst if same frequencies over & over
 - correct w/ hearing aids at base of eardrum (tune to defective frequencies)
 - can also use cochlear implants: if ganglion cells still alive



packet,
motor,
amplifier
(frequency decoder)

(doesn't work if have 8th nerve damage)

↳ takes place of basilar membrane
frequency decoder, excite correct electrodes, stimulate correct axons



audio

no APs

visual

no APs