

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ
السَّلَامُ عَلَيْكُمْ وَرَحْمَةُ اللَّهِ وَبَرَكَاتُهُ



Ear and Facial Nerve

Vestibulo-Cochlear Nerve

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M N U



OBJECTIVES

By the end of the lecture, the student will be able to:

- **Define parts of the ear.**
- **Describe the nuclei of facial nerve.**
- **Locate the site of lesion in facial nerve.**
- **Describe the vestibulo-cochlear nerve.**

Special senses:

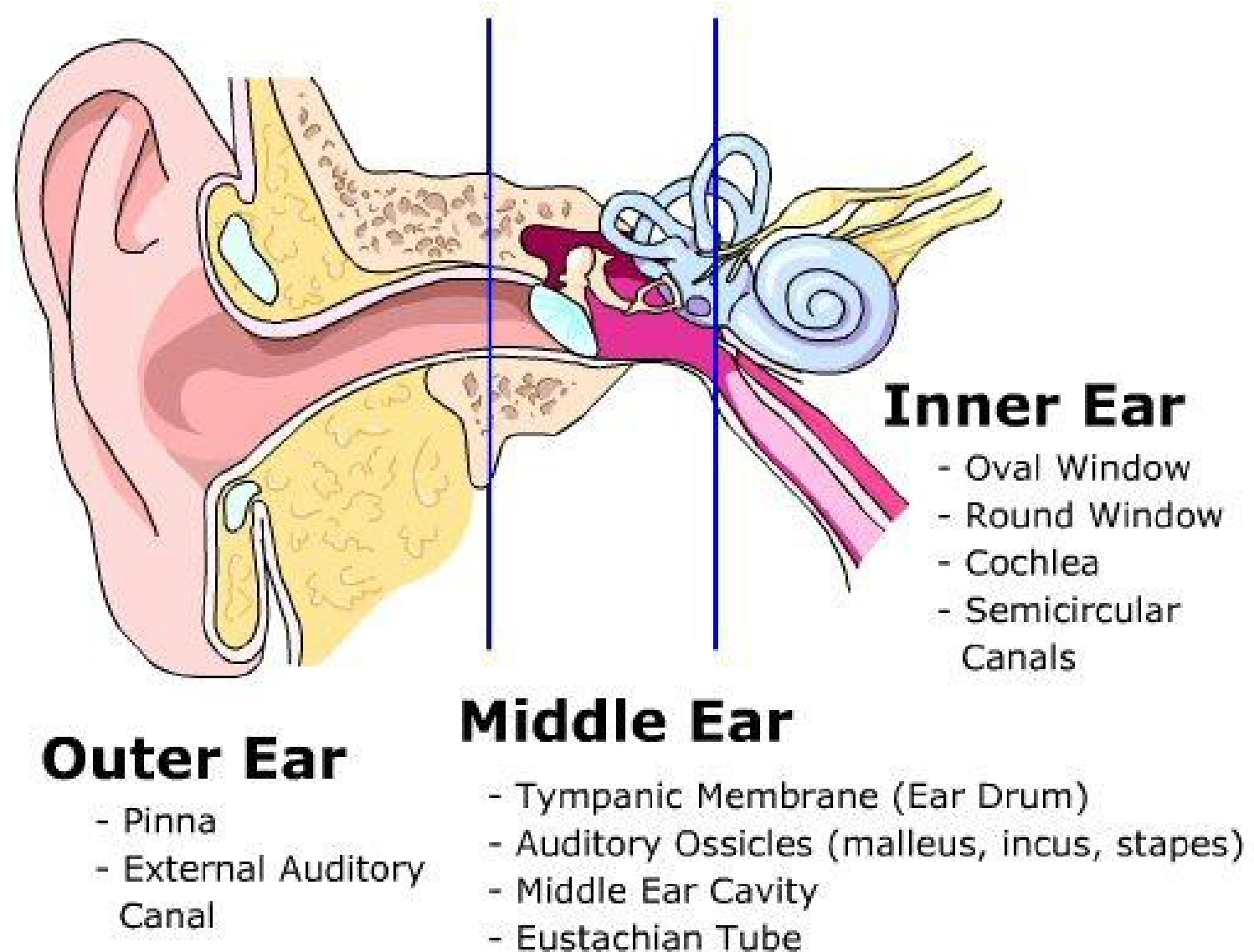
The ear

- The ear is designed for hearing and equilibrium.
- It receives sound vibrations, is sensitive to the force of gravity and reacts to the movement of the head.



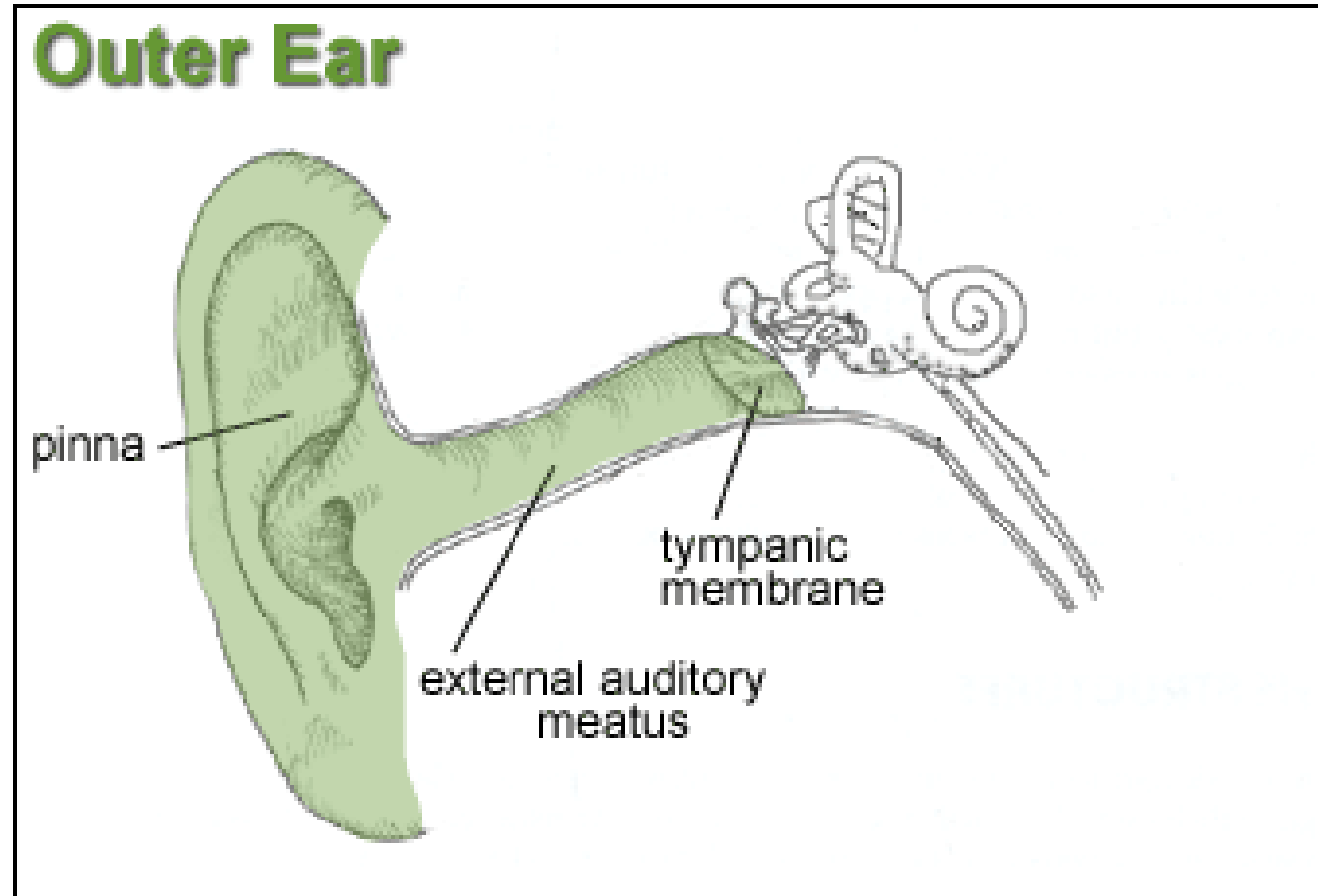
3 Parts

- Sense of Hearing
 - Outer ear
 - Middle ear
 - Inner ear
- Ear also functions as sense of equilibrium



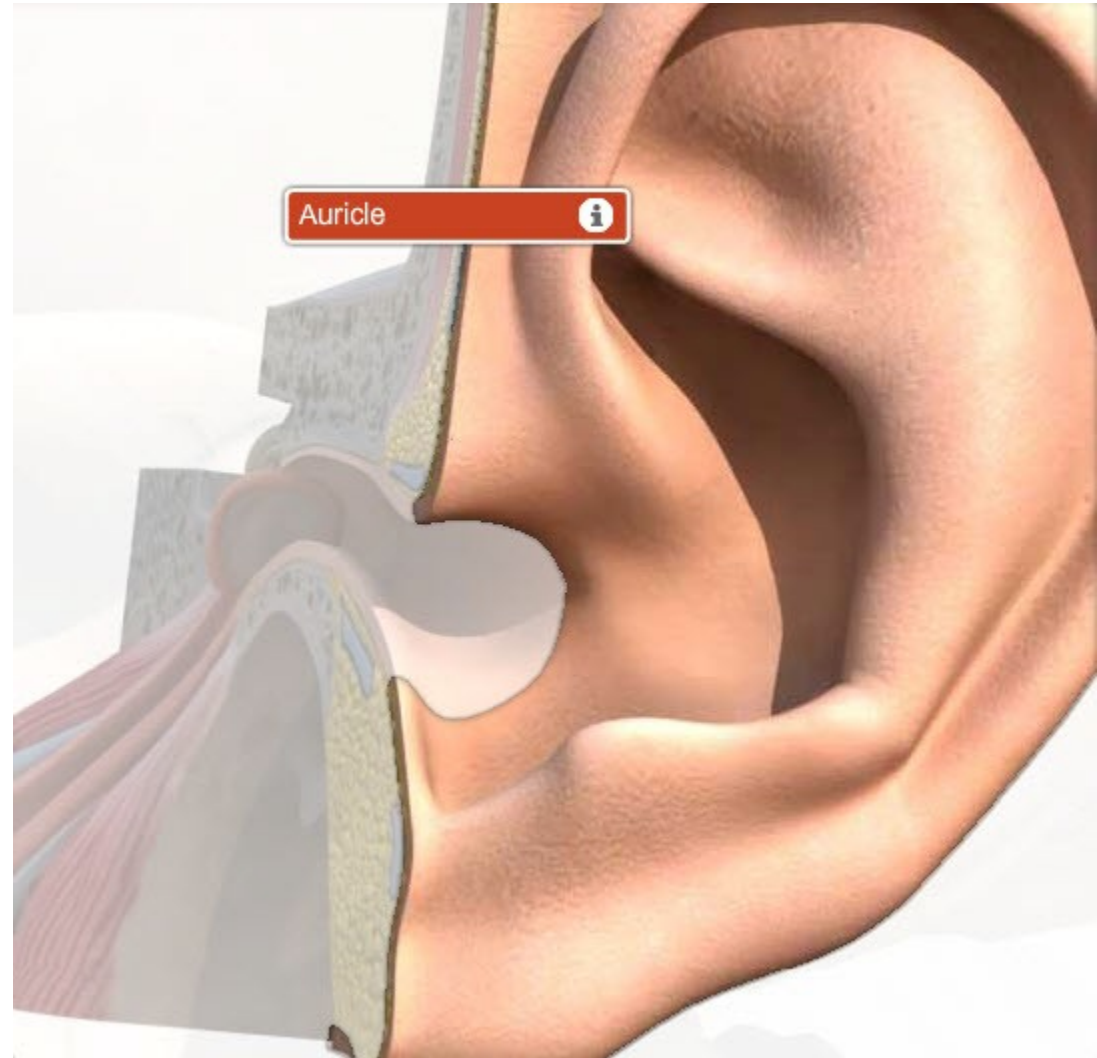
Outer (External) Ear

- 3 parts
 - **Auricle (Pinna)**
 - Funnel-like structure
 - **External Acoustic Meatus (External Auditory Canal)**
 - S-shaped tube
 - **Eardrum (tympanic membrane)**
 - Cone shaped
 - Sometimes considered part of middle ear



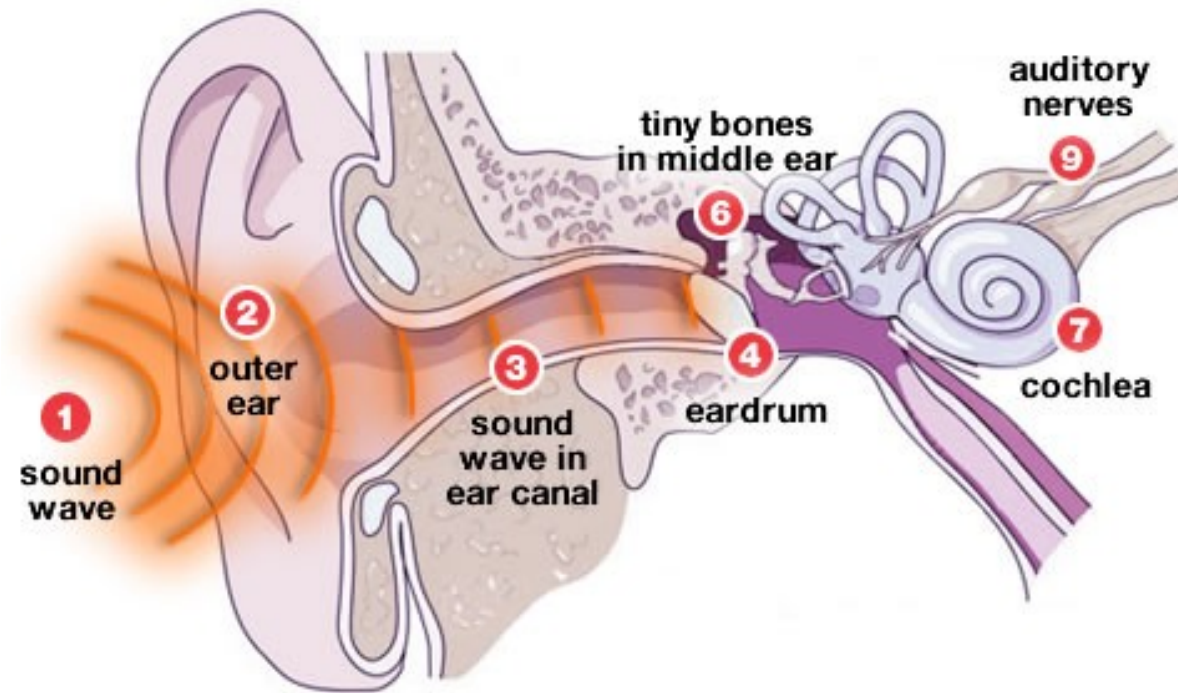
Auricle

- Helps collect sound waves traveling through the air and directs them into the external acoustic meatus.



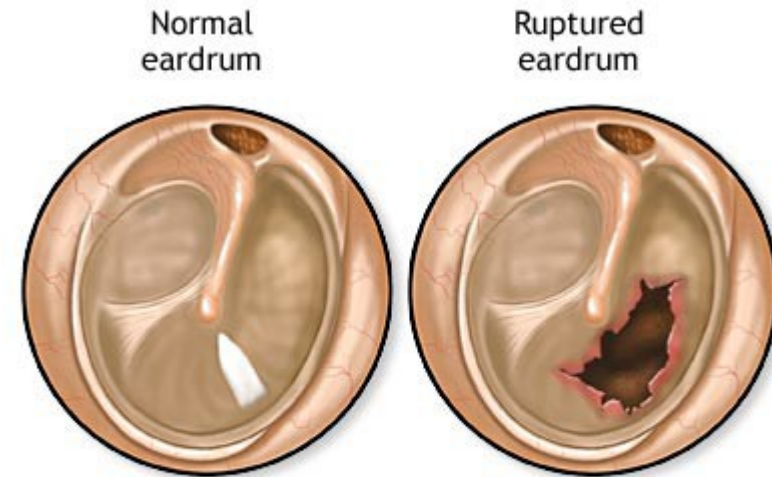
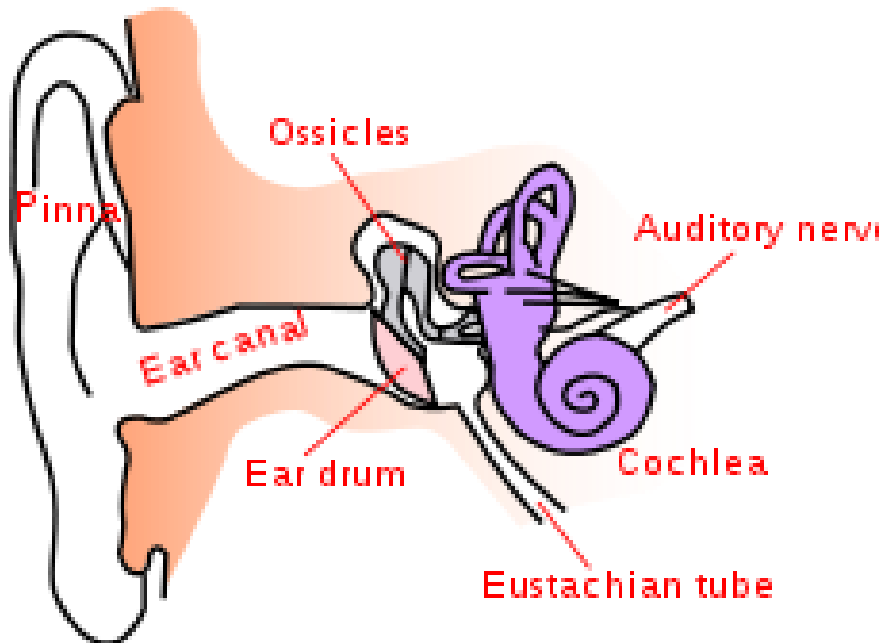
External Acoustic Meatus

- As sound waves enter, they change the pressure on the eardrum.



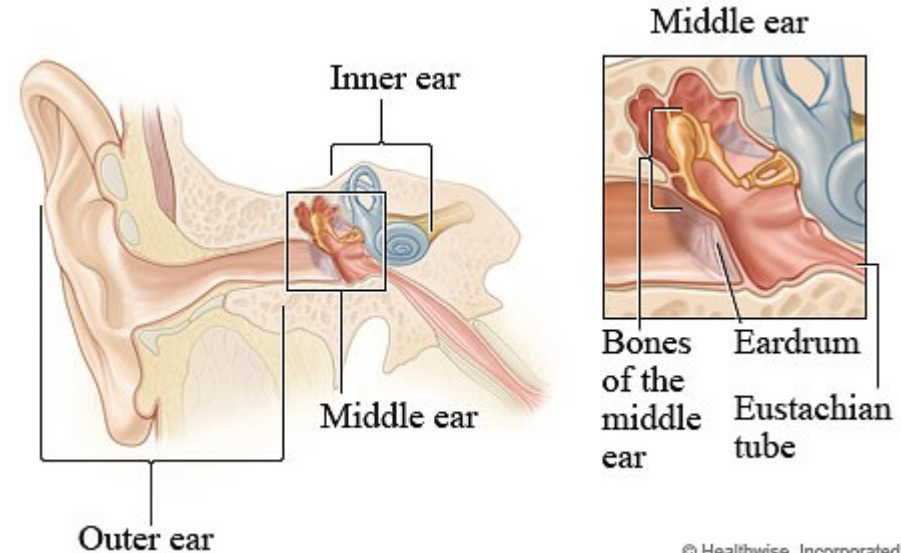
Eardrum

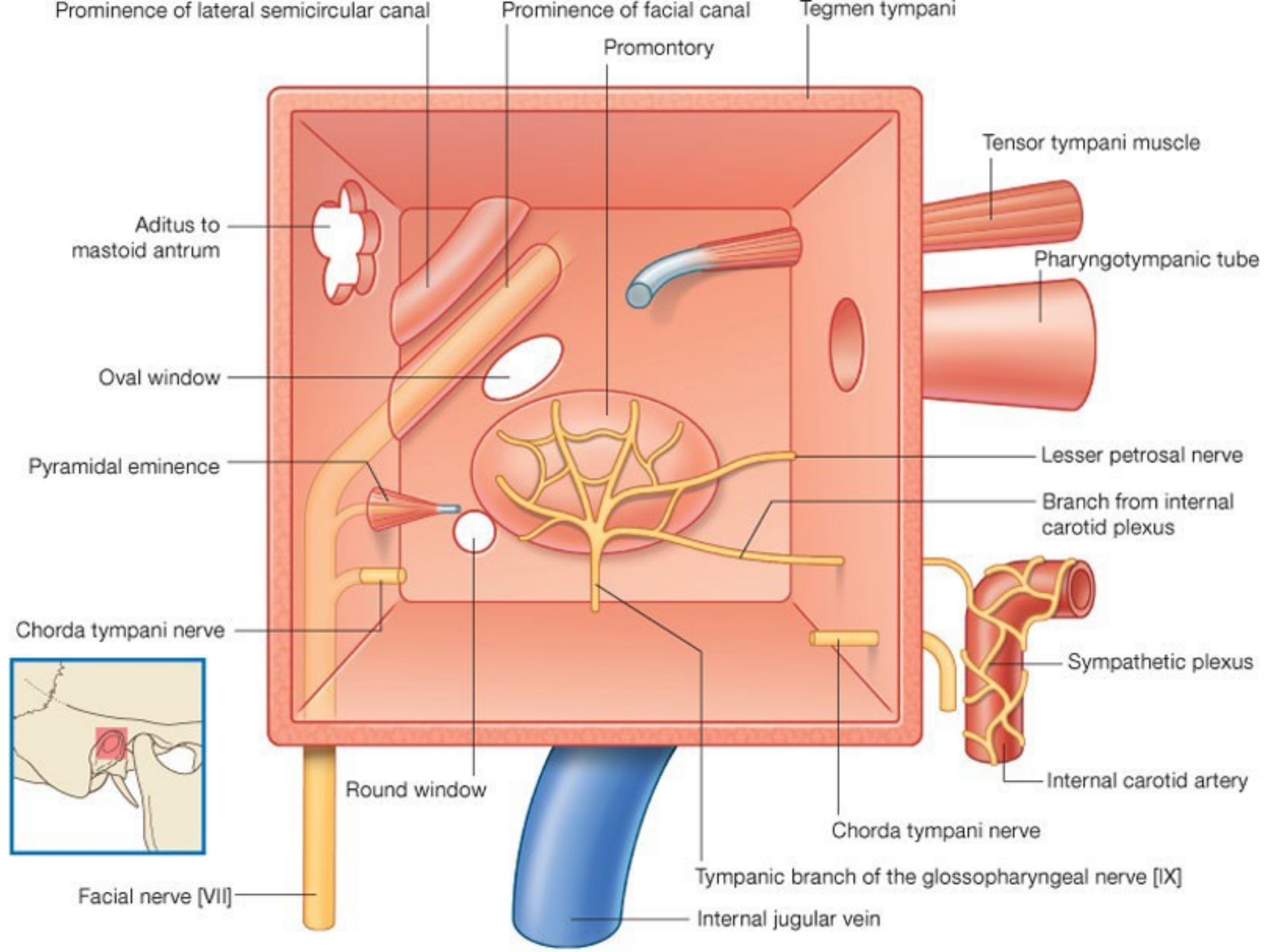
- Semitransparent membrane covered by a thin layer of skin on its outer surface and a mucous membrane inside
- Has an oval margin and cone-shape with the cone apex pointing inward.



Middle Ear (Tympanic Cavity)

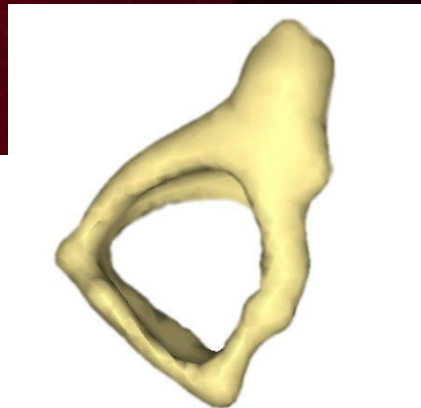
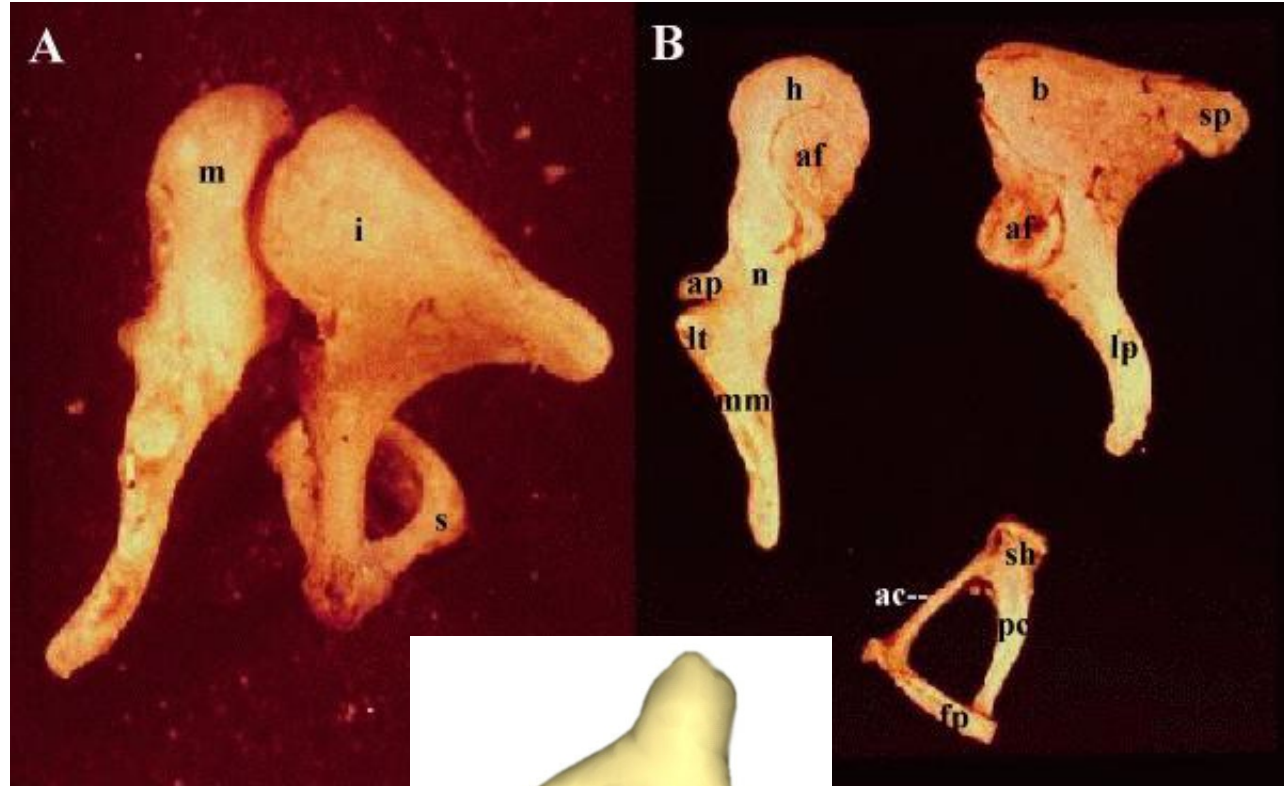
- Air-filled space in the temporal bone
- Contains three bones called Auditory Ossicles:
 - Malleus & Incus & Stapes
- Oval Window
 - Opening of tympanic cavity that leads to inner ear
- Auditory Tube (Eustachian Tube)
 - Connects middle ear to nasal cavity

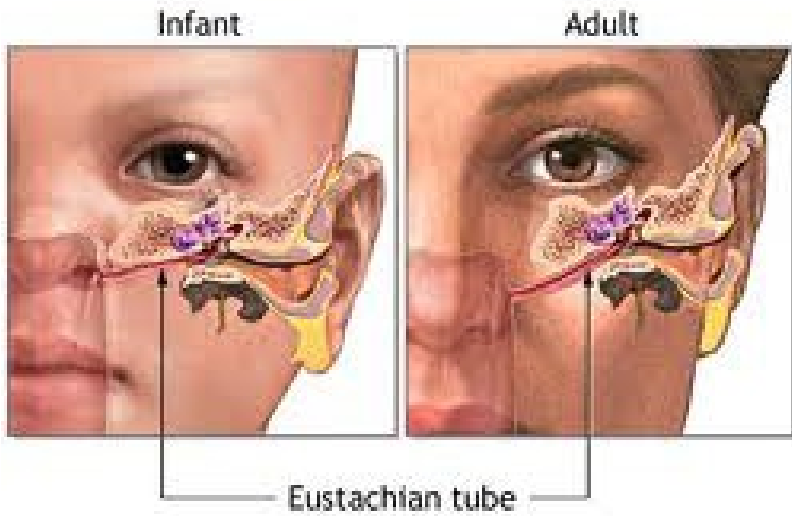




Ossicles

- Malleus (hammer)
- Incus (anvil)
- Stapes (stirrup)
smallest bone of the
body





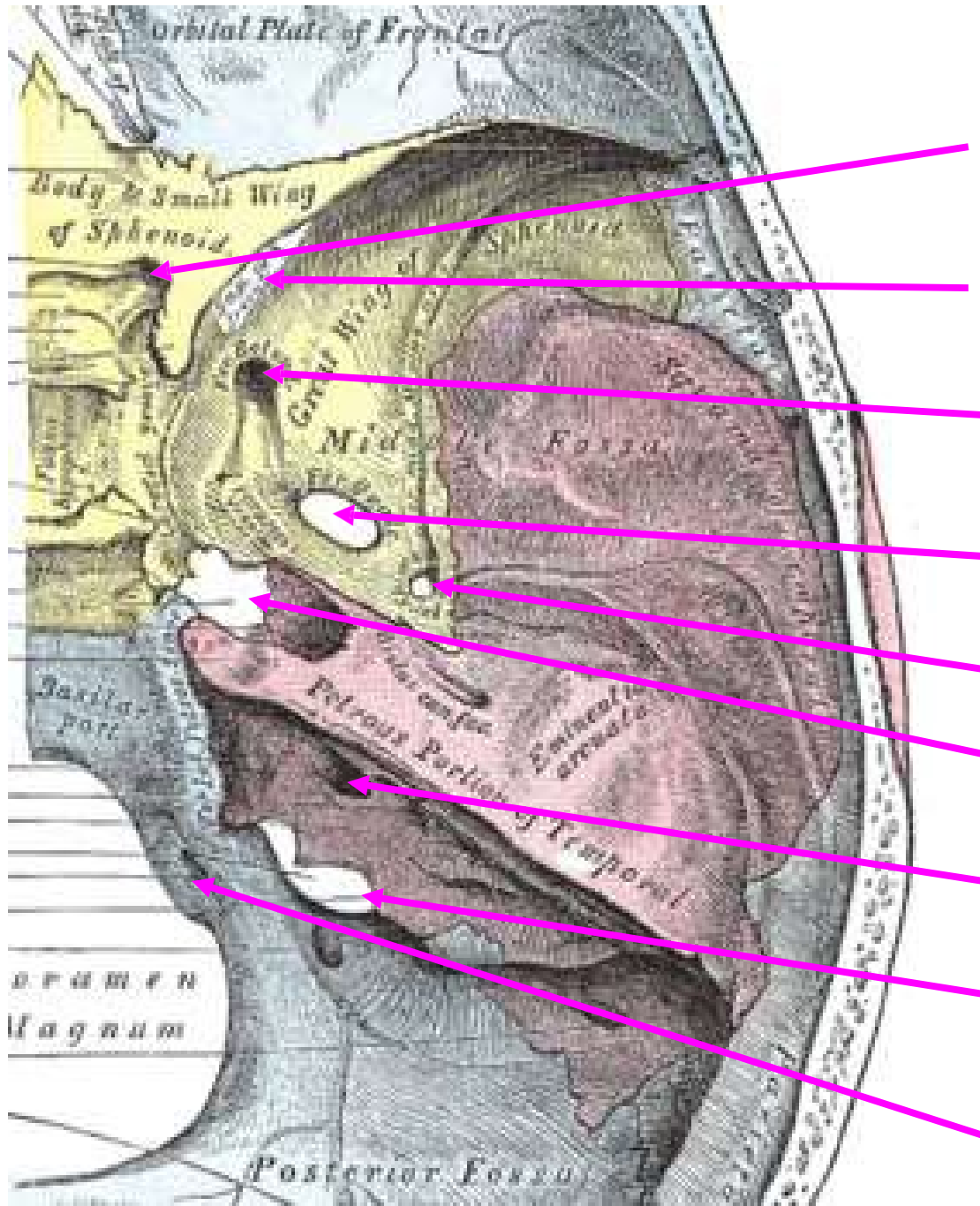
Auditory Tube Eustachian Tube

#ADAM

- Connects middle ear to back of nasopharynx
- Conducts air between tympanic cavity and the outside of body by way of nose and mouth
- Helps maintain equal pressure of both sides of eardrum
- Function is noticeable during rapid altitude changes
- Popping sound is heard when hearing is restored back to normal

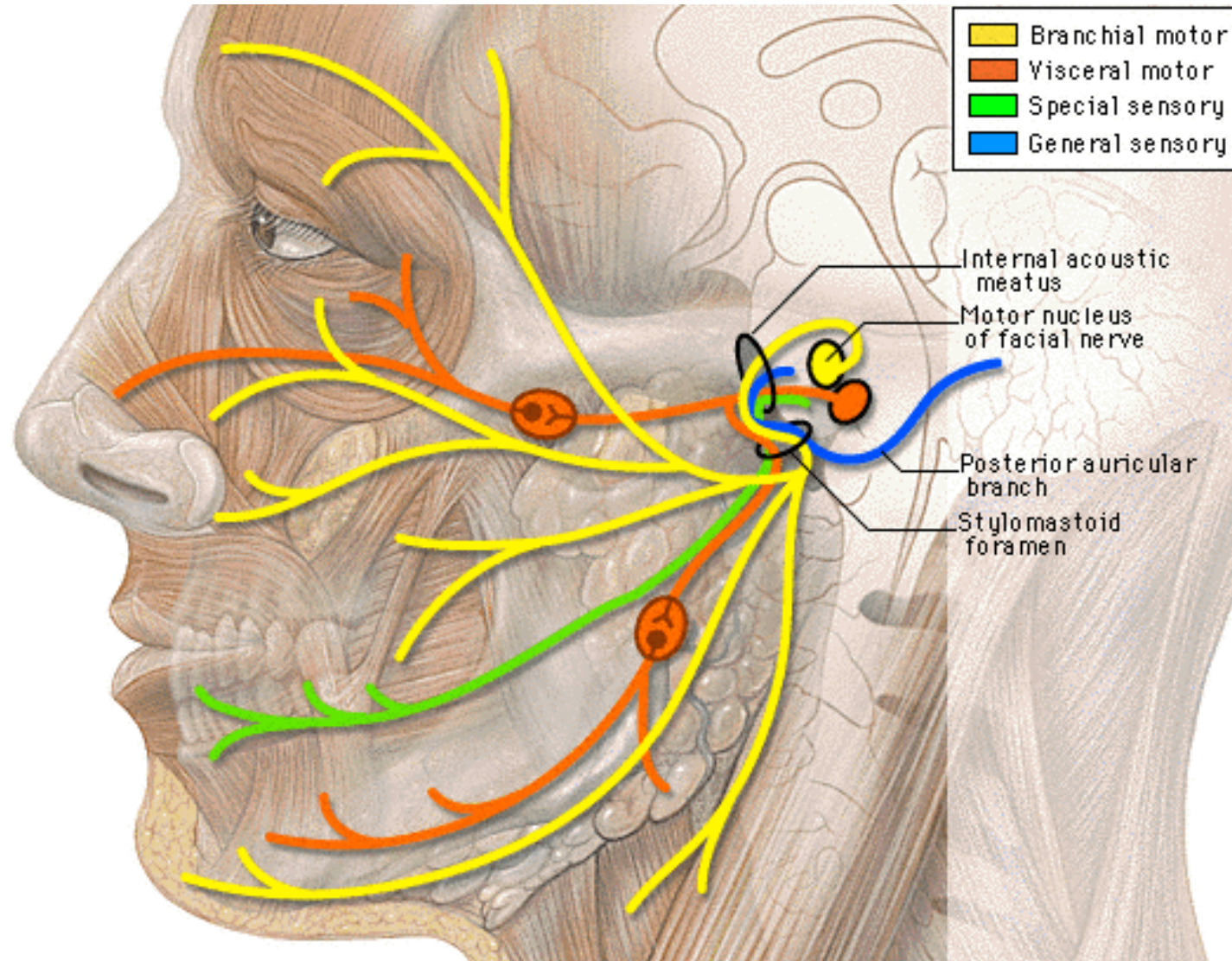
Cranial Nerve VII: Facial nerve

- Fibers leave the pons, travel through the internal acoustic meatus, and emerge through the stylomastoid foramen to the lateral aspect of the face.
- Motor functions include facial expression and the transmission of autonomic impulses to lacrimal and salivary glands.
- Sensory function is a taste from the anterior two-thirds of the tongue



Internal acoustic meatus
(VII, VIII)

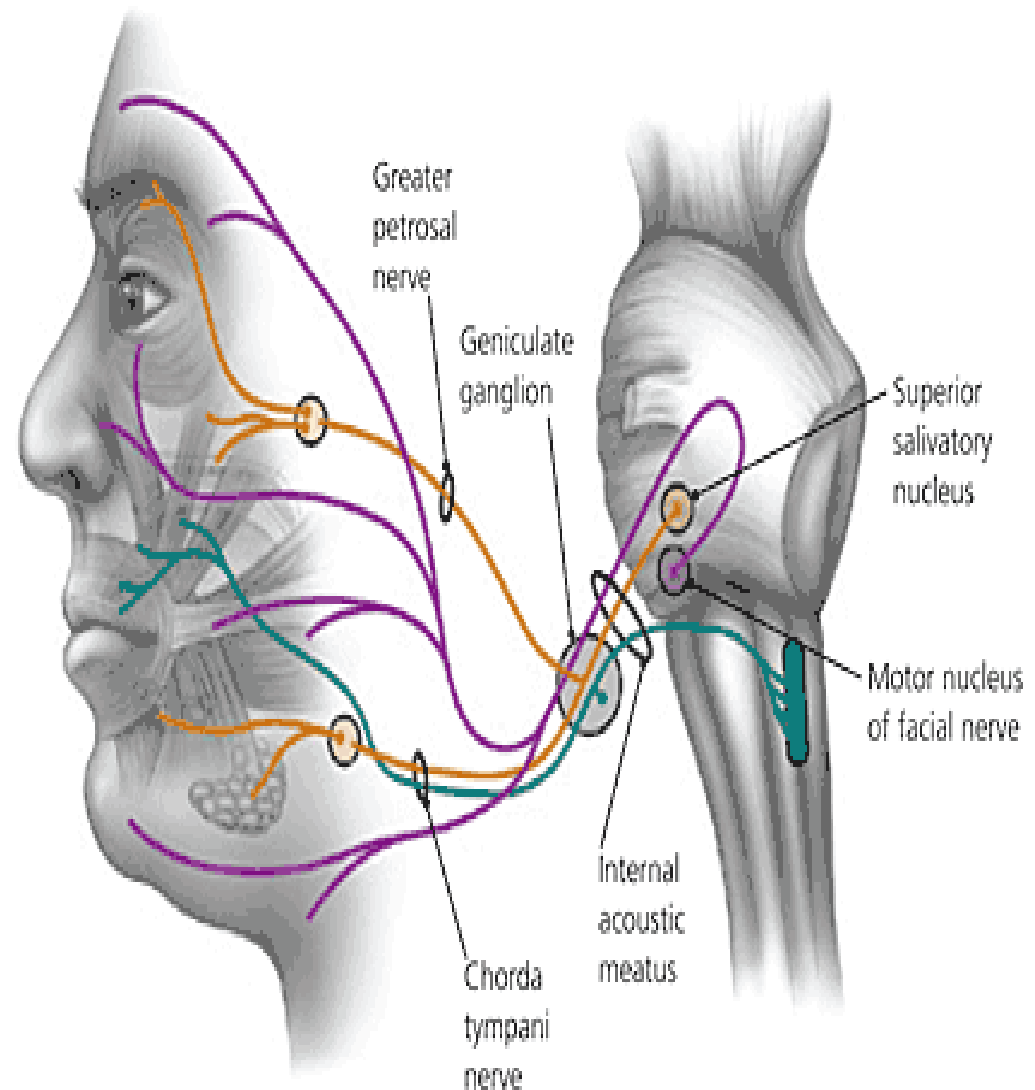
Facial Nerves VII



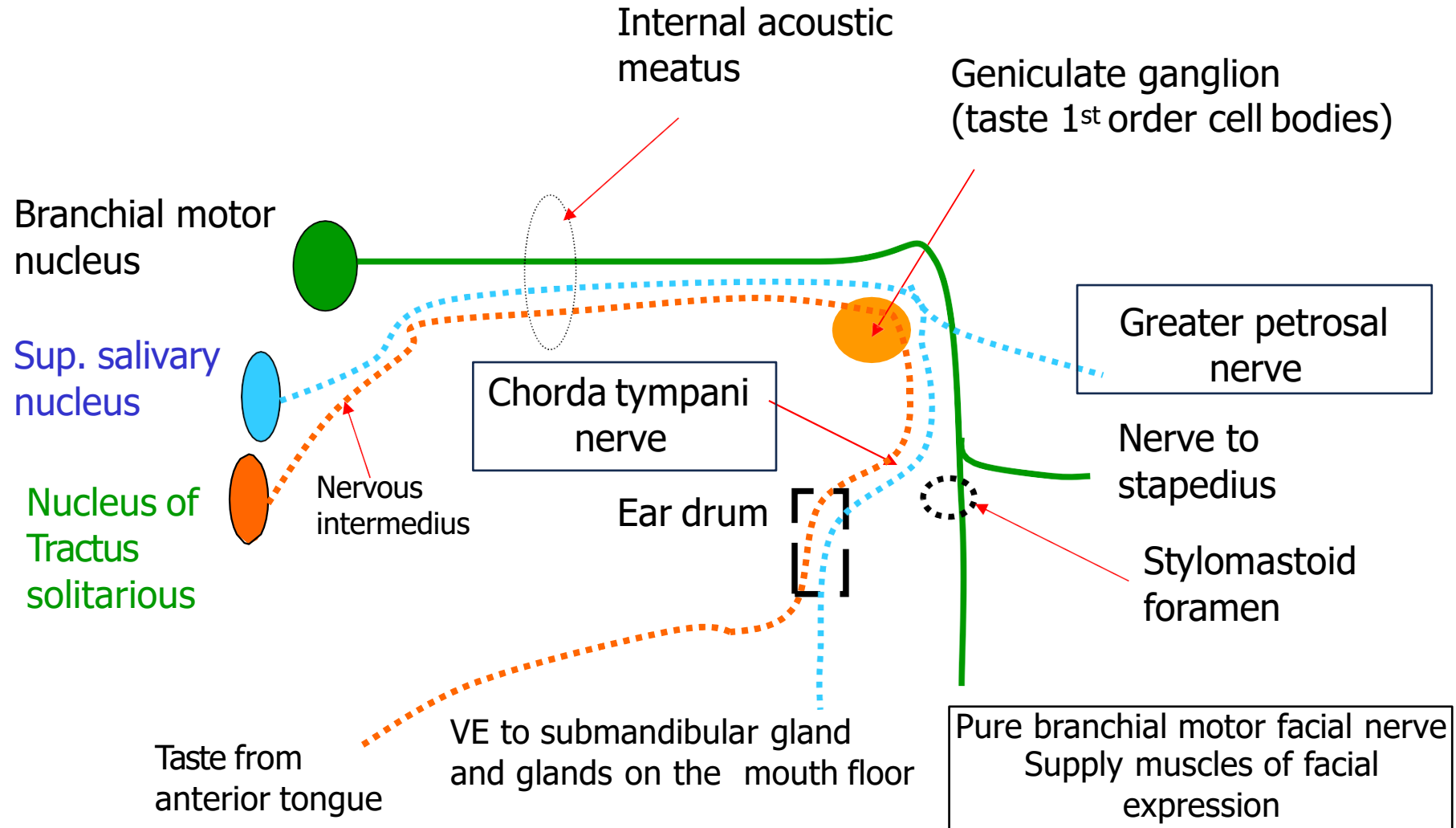
FACIAL NERVE NUCLEI

□ 4 nuclei:

- 1) **Motor** nucleus:
 - lower Pons below 4th ventricle
- 1) **Superior salivatory** nucleus:
 - dorsal to motor nucleus
- 3) Nucleus **solitarius**:
 - medulla oblongata
- 4) **Spinal trigeminal** nucleus.



Facial Nerve



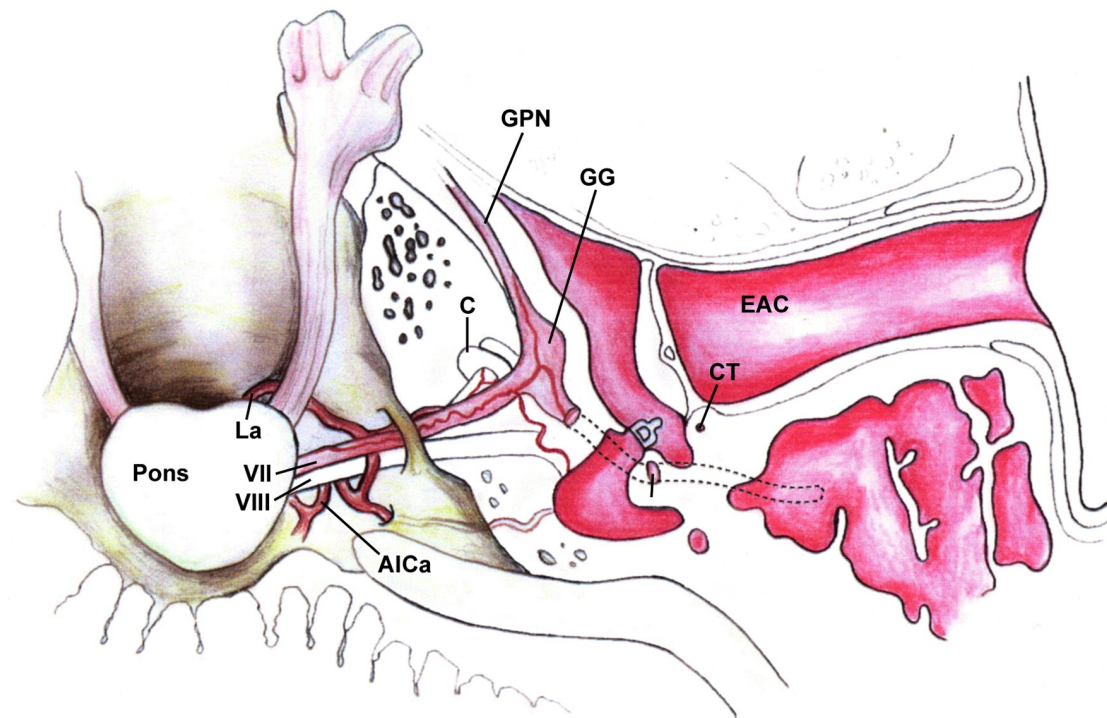
INTRA CRANIAL PORTION

□ From *brainstem* (Pons)

□ Facial Nerve **crosses CPA** (Cerebello-pontine angle) with 8th CN *to the* **Internal auditory meatus**

❖ **Surgical importance:**

- 1) **Iatrogenic trauma:** in CPA tumor surgery
- 2) Difficult to identify in schwannoma (no connective tissue)



TYMPANIC SEGMENT

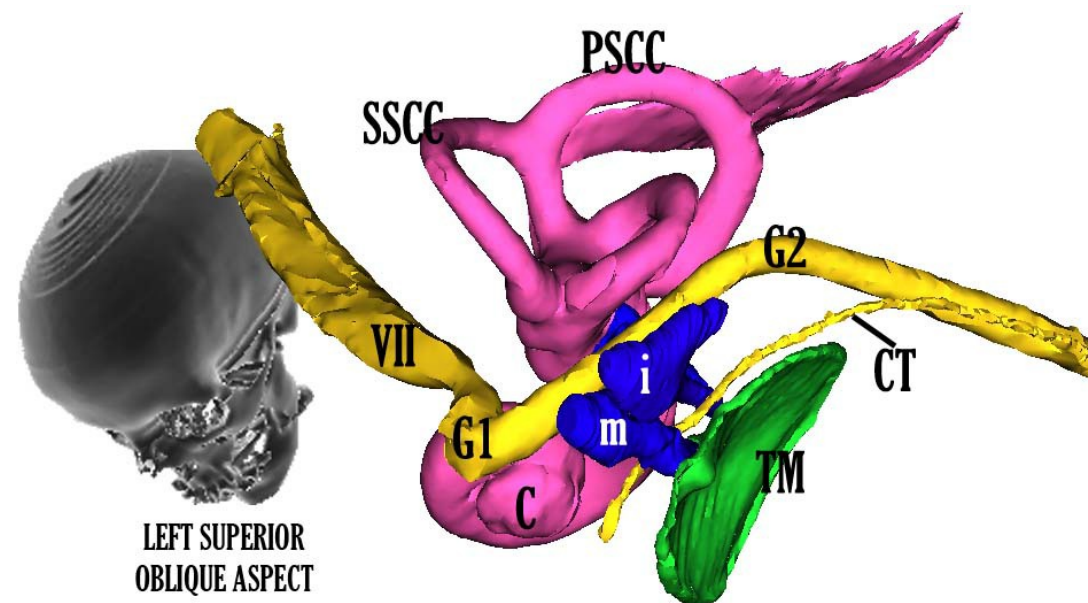
- *Geniculate ganglion:*

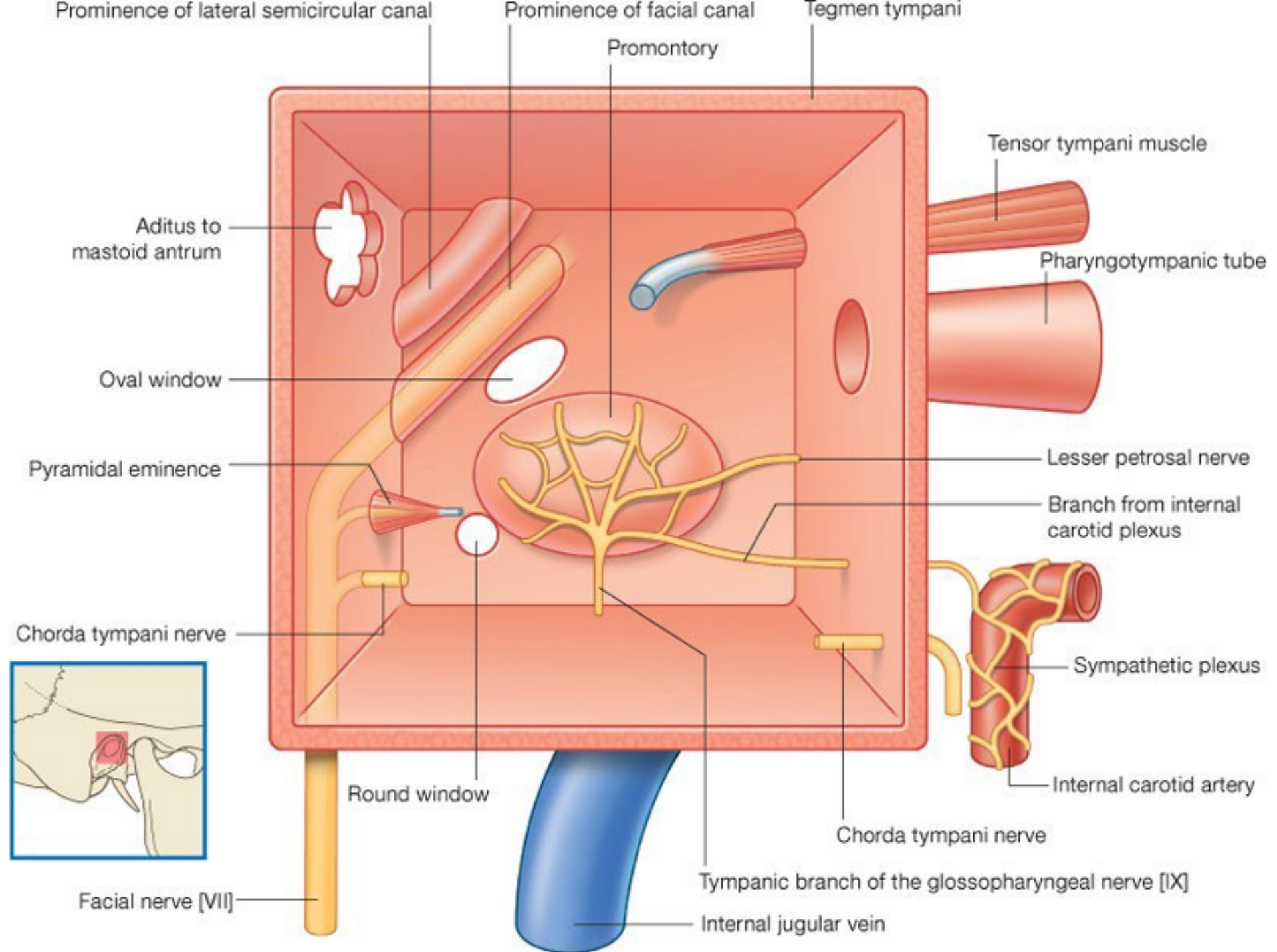
- Bipolar ganglion cells.

- **Horizontal segment:**

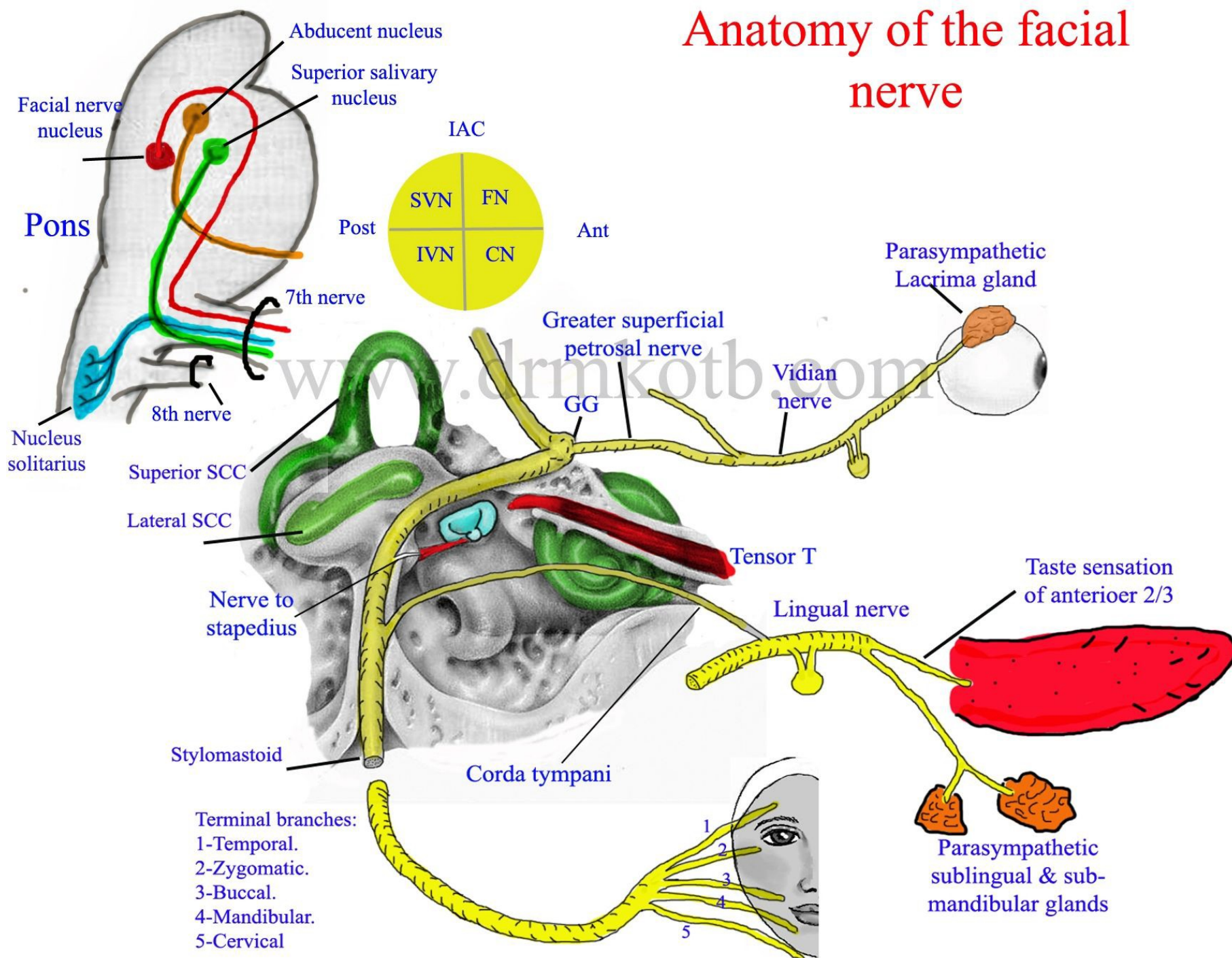
- From **Geniculate ganglion to 2nd genu**

- Lies beneath Lateral Semicircular Canal & above Oval Window





Anatomy of the facial nerve



EXTRA TEMPORAL REGION

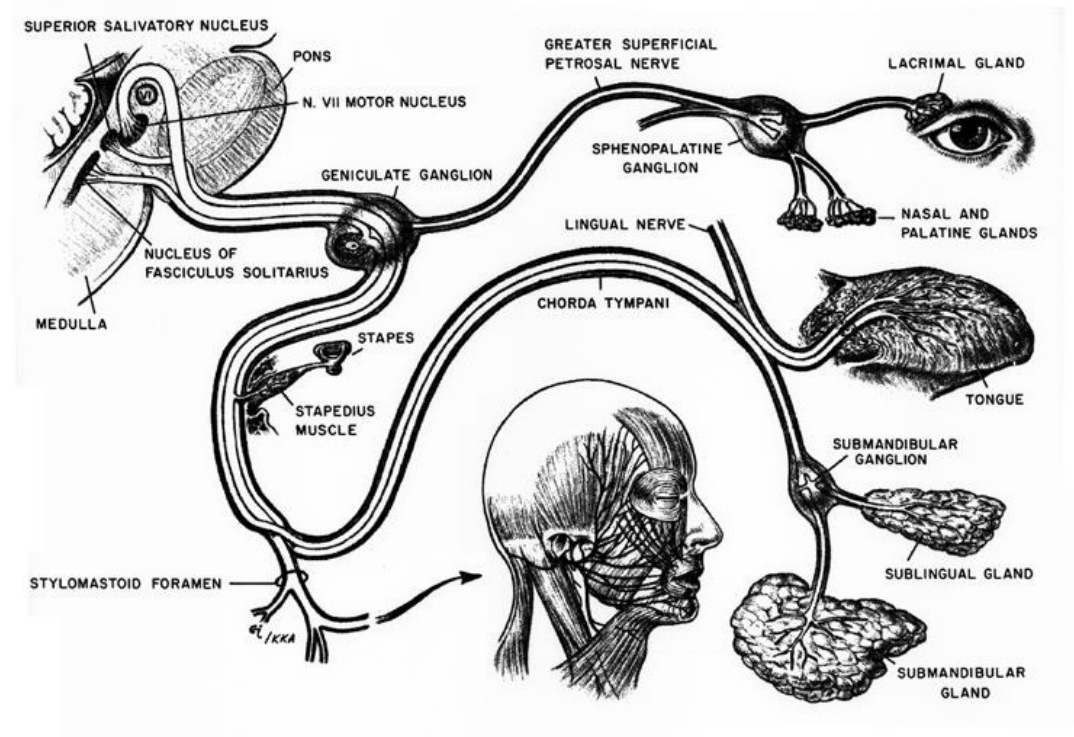
- From Stylomastoid Foramen to terminal branches.
- Runs in the substance of parotid gland.

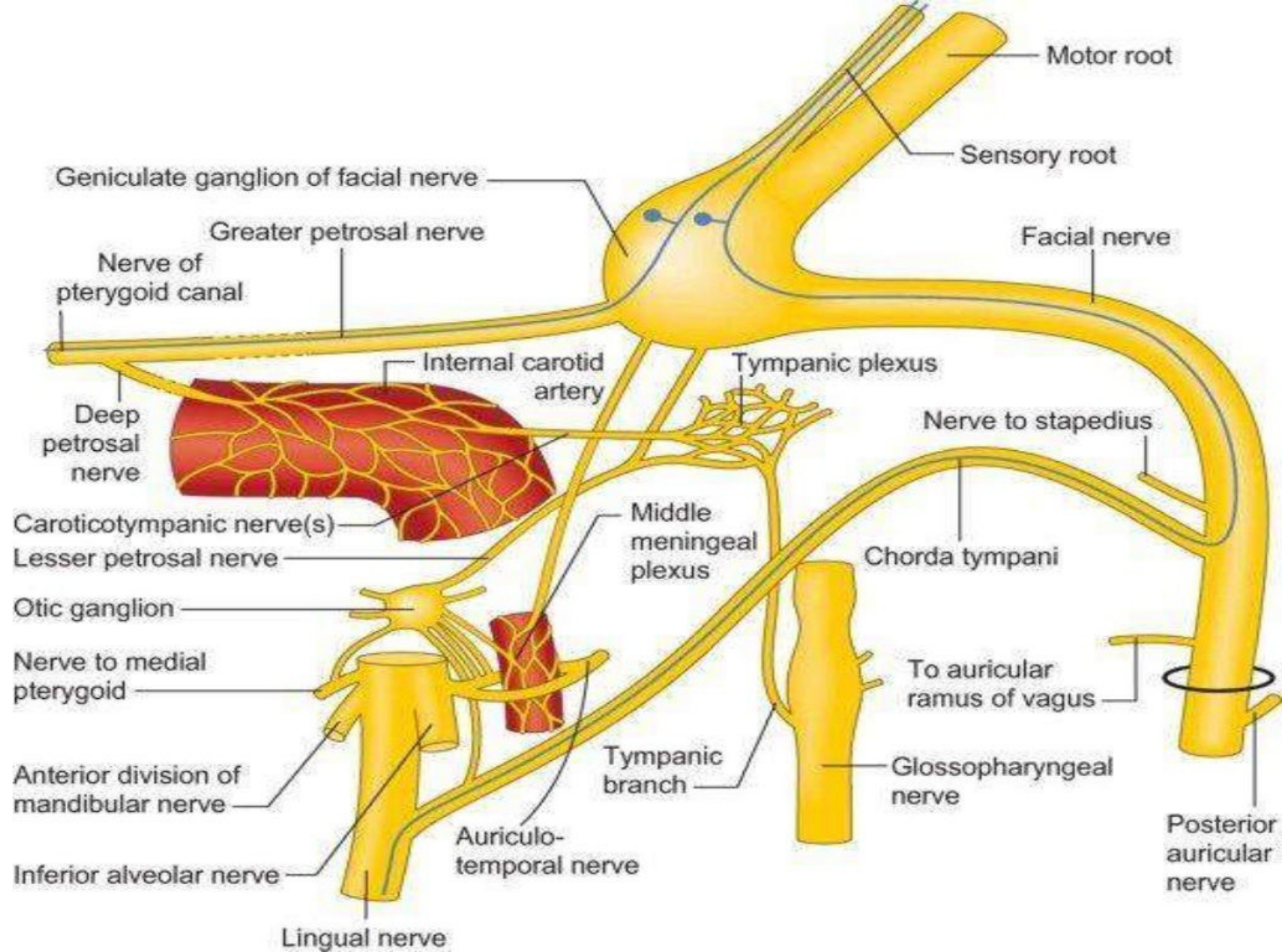


BRANCHES

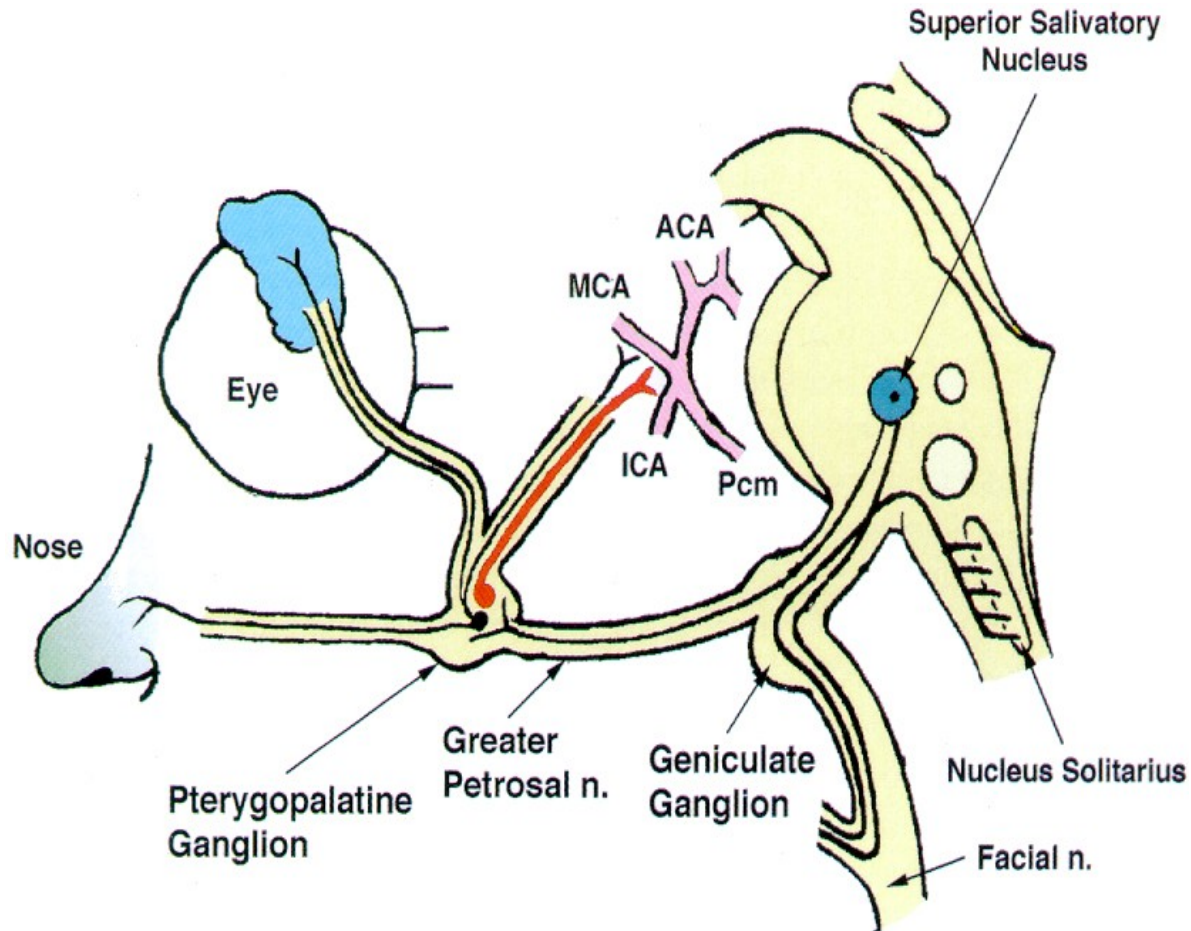
□ Intra temporal region :

- 1) GSPN
- 2) Nerve to stapedius
- 3) Chorda tympani
- 4) Sensory auricular branch





Greater Superficial Petrosal Nerve



▣ From GG

▣ 2 types of fibers:

1. Parasymp – lacrimal G.

2. Sensory fibers to nasal & palatine glands.

□ NERVE TO STAPEDIUS

- Supply stapedius muscle

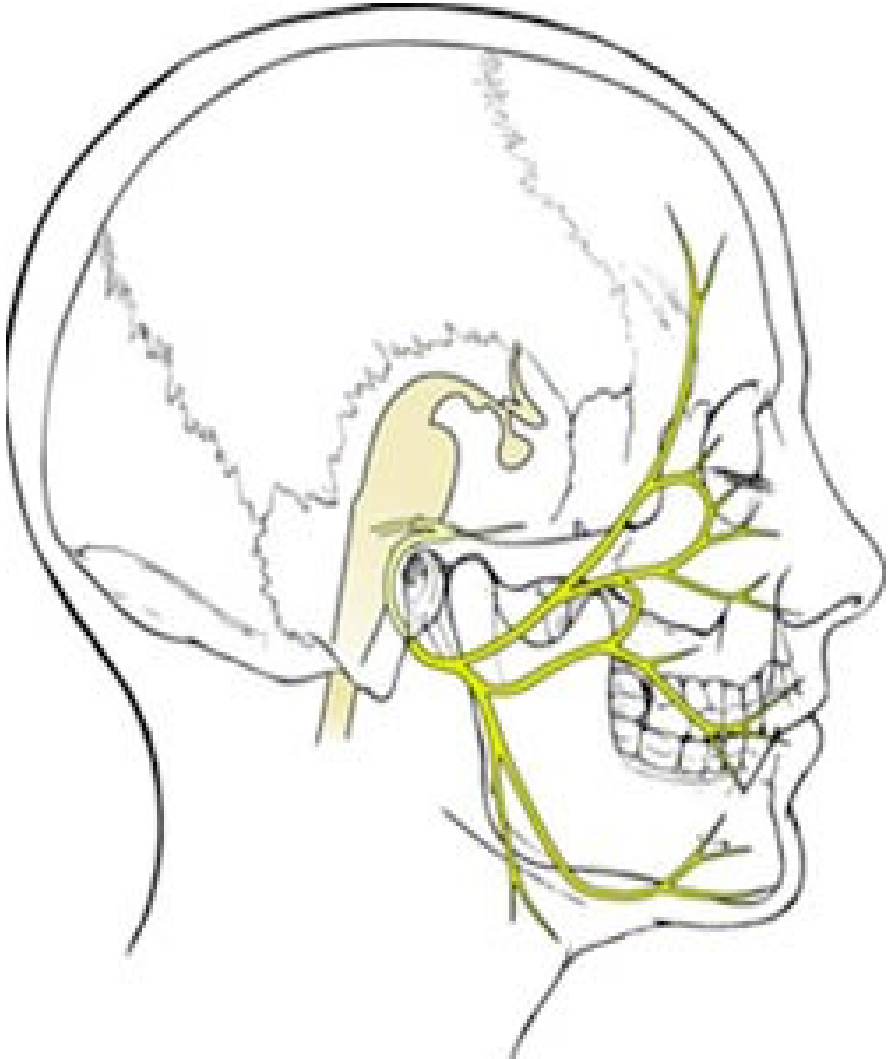
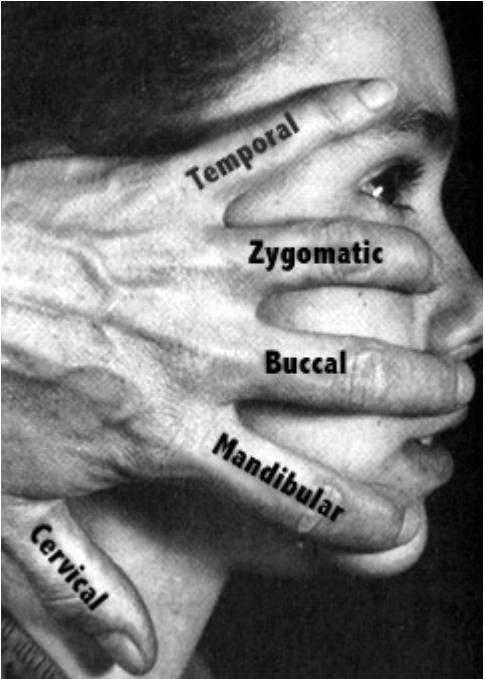
□ SENSORY AURICULAR BRANCH

- Joins auricular branch of vagus
- Supply retro auricular groove & concha.

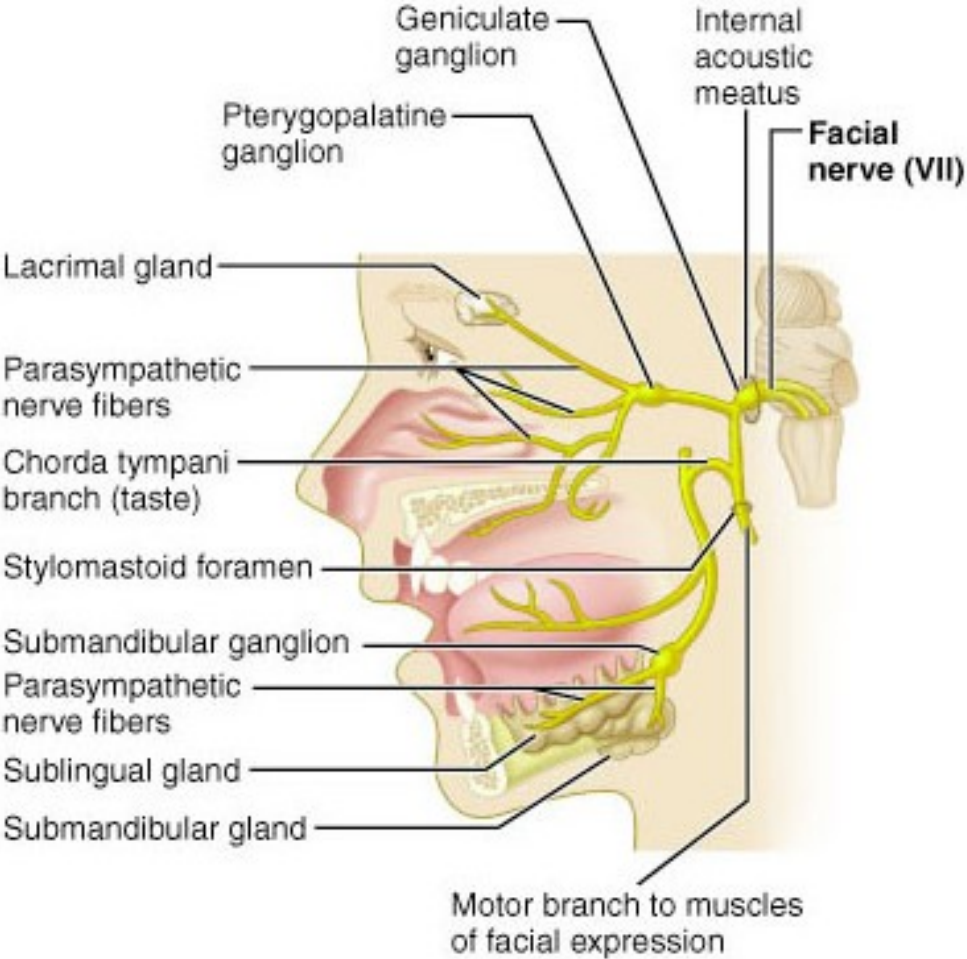
CHORDA TYMPANI

- ❖ 2 types of fibers
 1. Preganglionic **Parasympathetic** – submandibular & sublingual Glands
 2. **Special sensory** – anterior 2/3rd of tongue

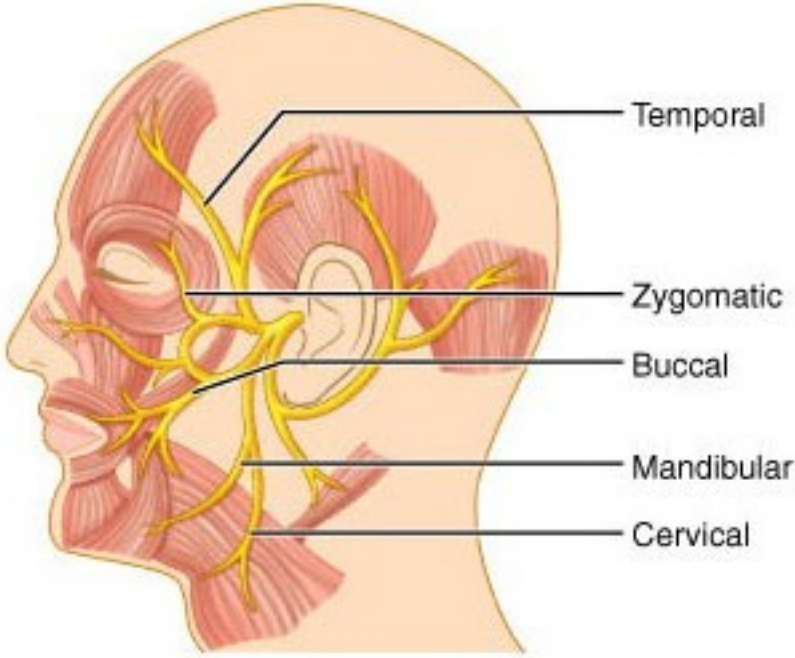
TERMINAL BRANCHES



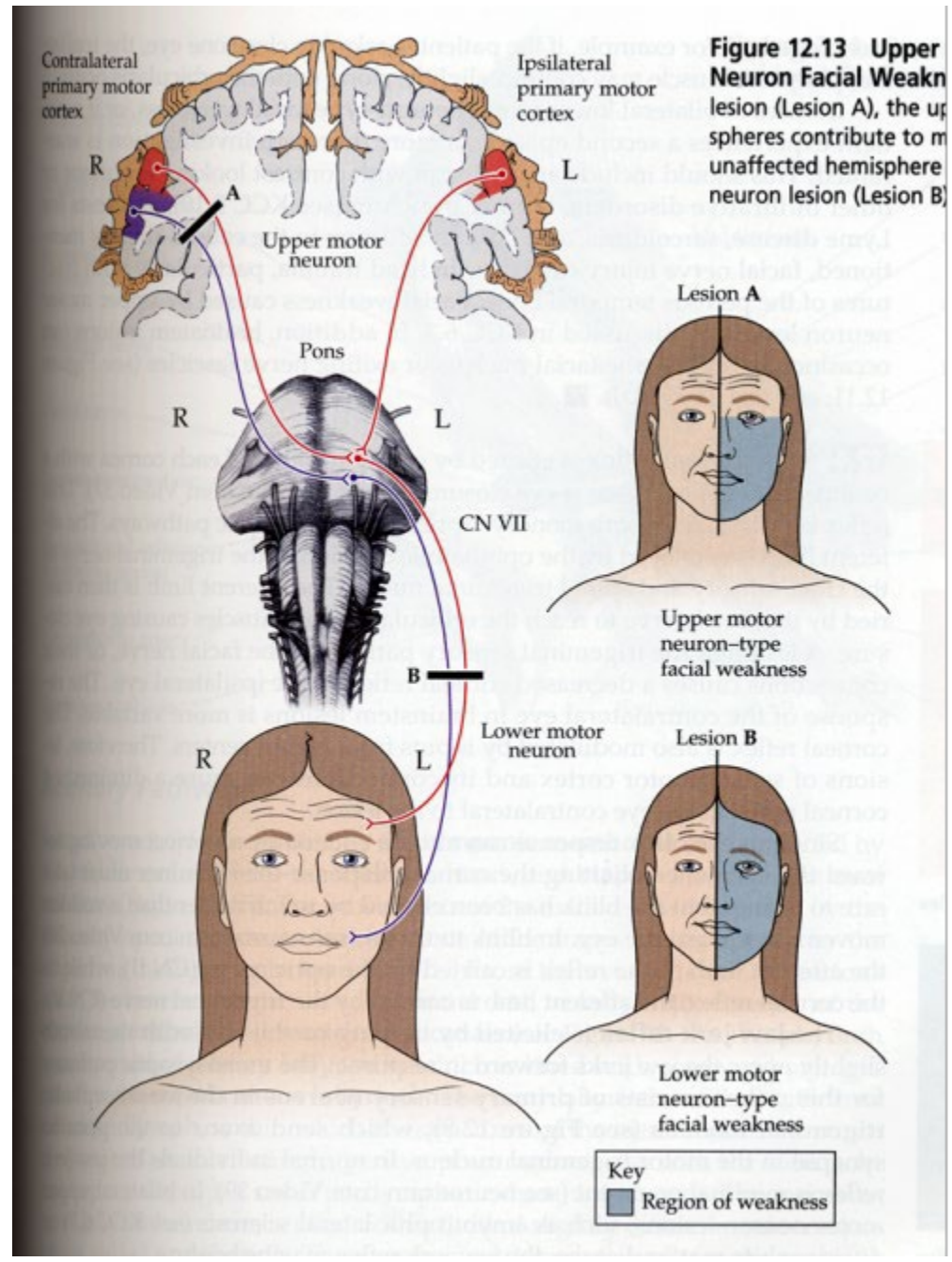
Cranial Nerve VII: Facial



(a) Parasympathetic efferents and sensory afferents



(b) Motor branches to muscles of facial expression and scalp muscles

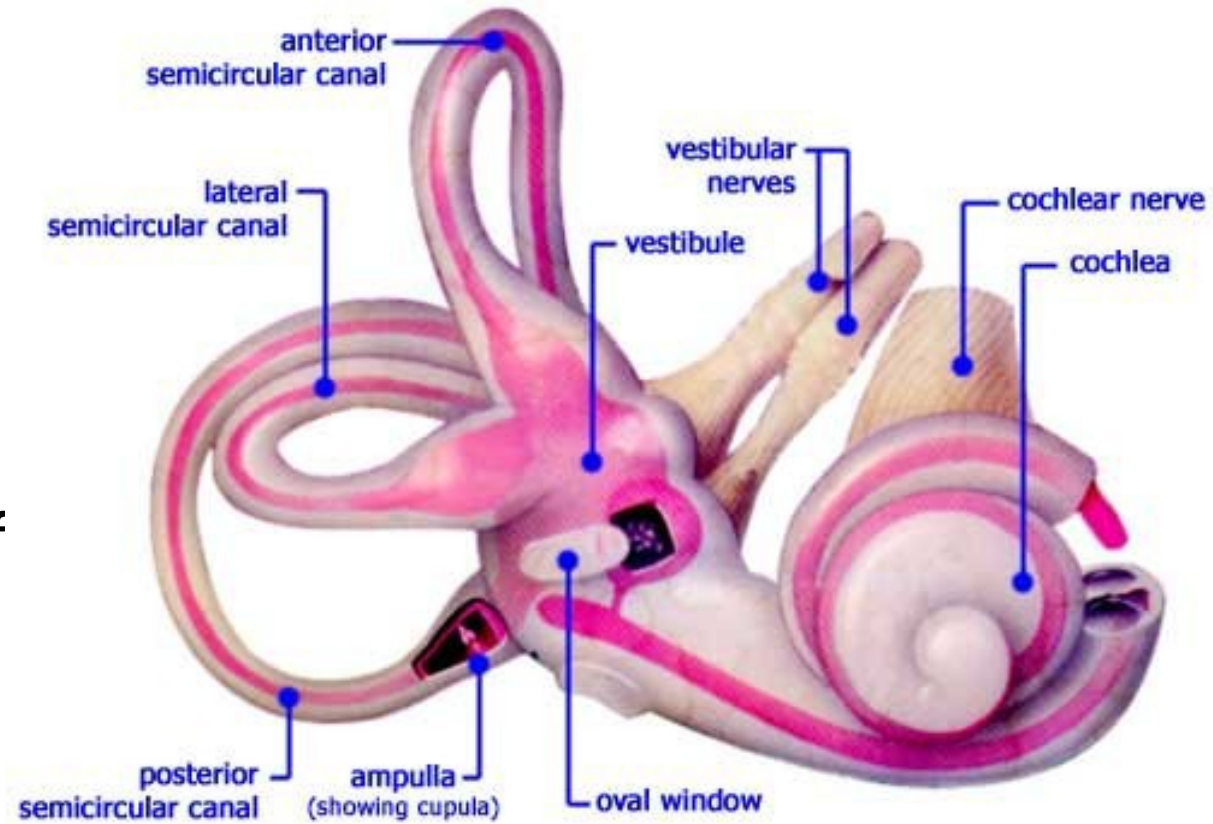


Facial nerve injury (Bell's Palsy)



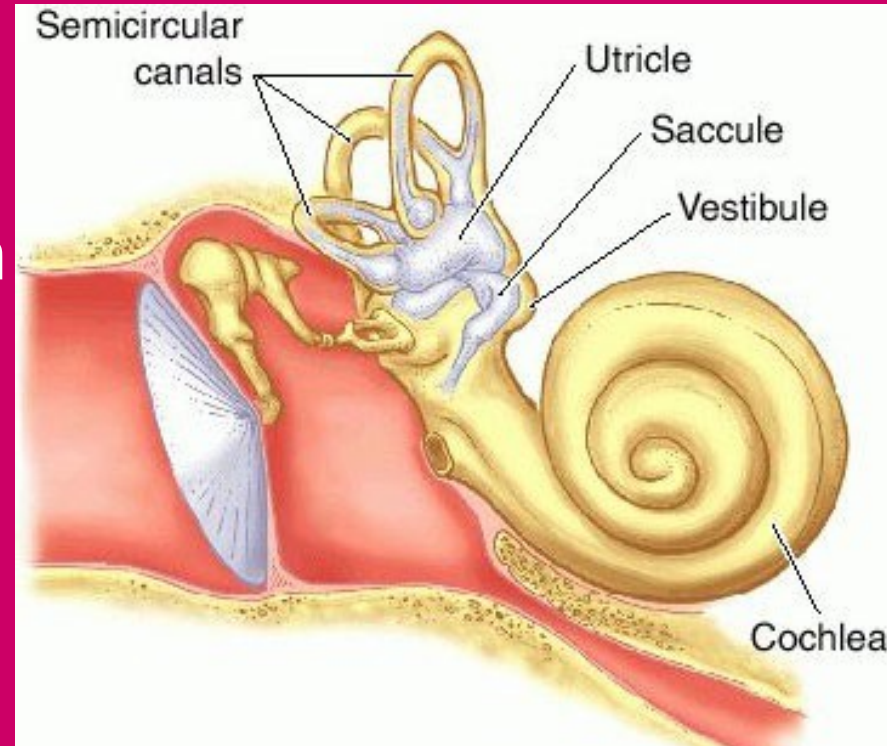
Inner (Internal) Ear

- Consists of:
 - Labyrinth
 - Semicircular canals
 - Cochlea
 - Round window
 - Spiral Organ (Organ of Corti)



The inner ear: vestibule and semicircular canals

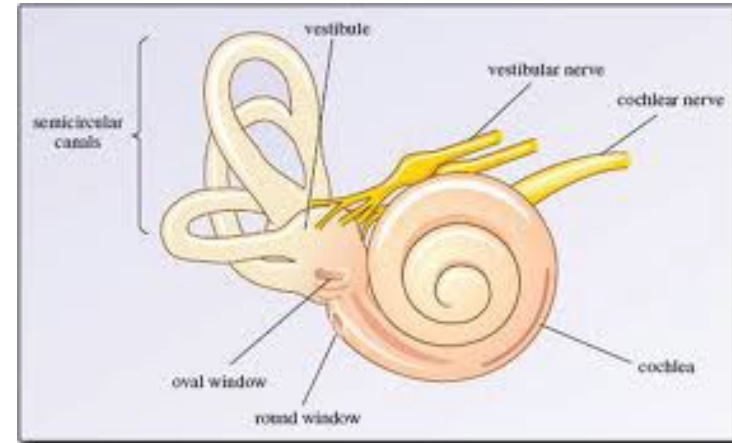
The vestibule and semicircular canals are bony structures lined with membranes and containing a fluid called perilymph which provides a sense of equilibrium.

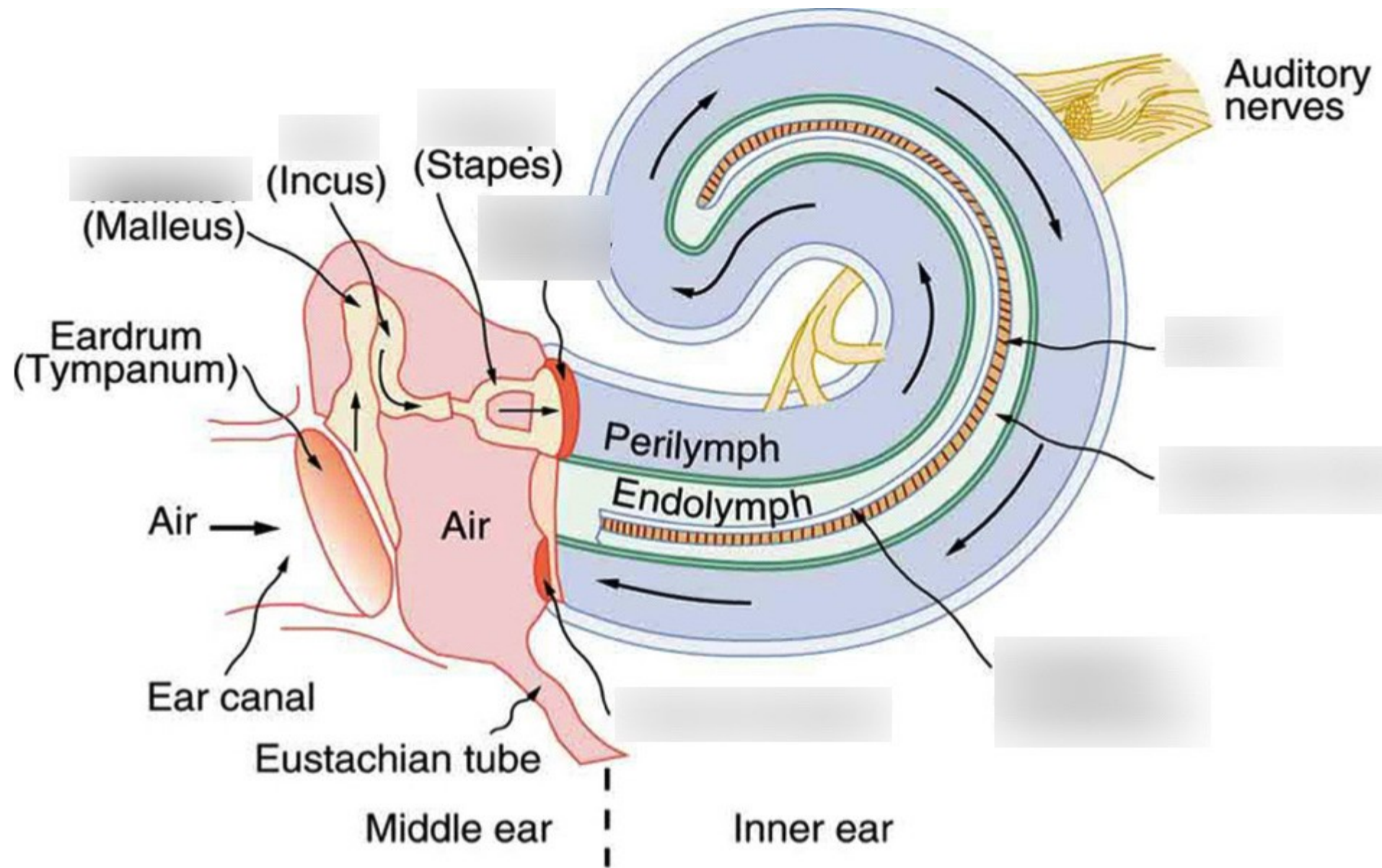


Changes in the position of the head cause this fluid to move against sensory receptors. Dizziness or motion sickness may be associated with rapid movements.

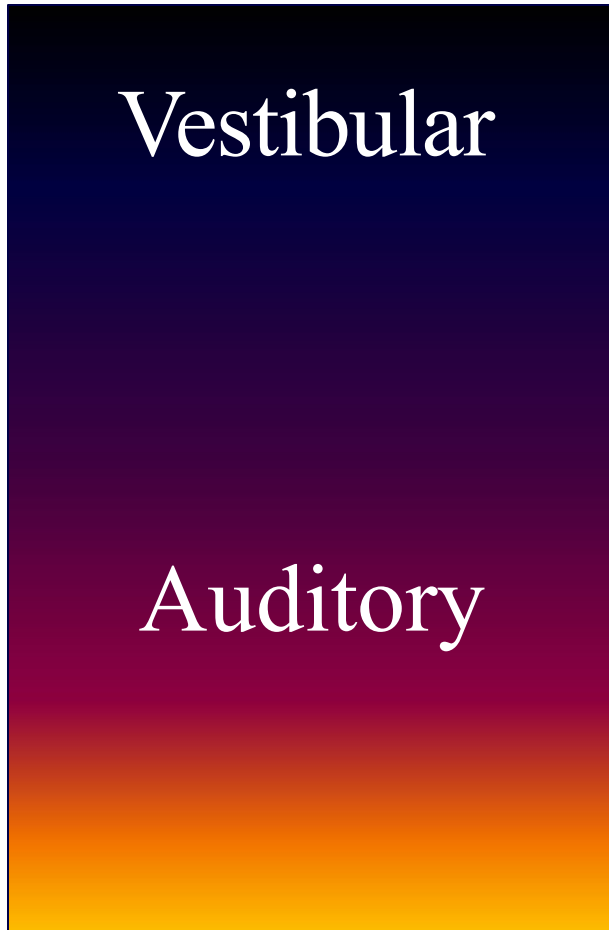
Semicircular Canals and Cochlea

- SCC
 - Part of labyrinth
 - Provide sense of equilibrium
- Cochlea
 - Functions in hearing
 - Has bony core and thin bony shelf that winds around the core like the threads of a screw





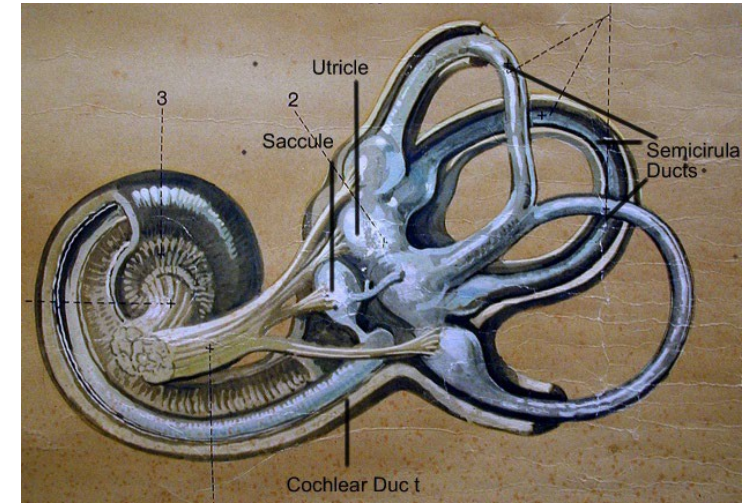
Inner Ear



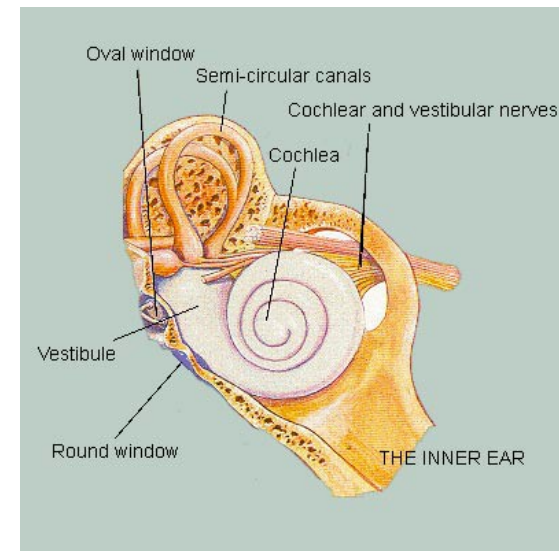
Vestibular

Semicircular canals

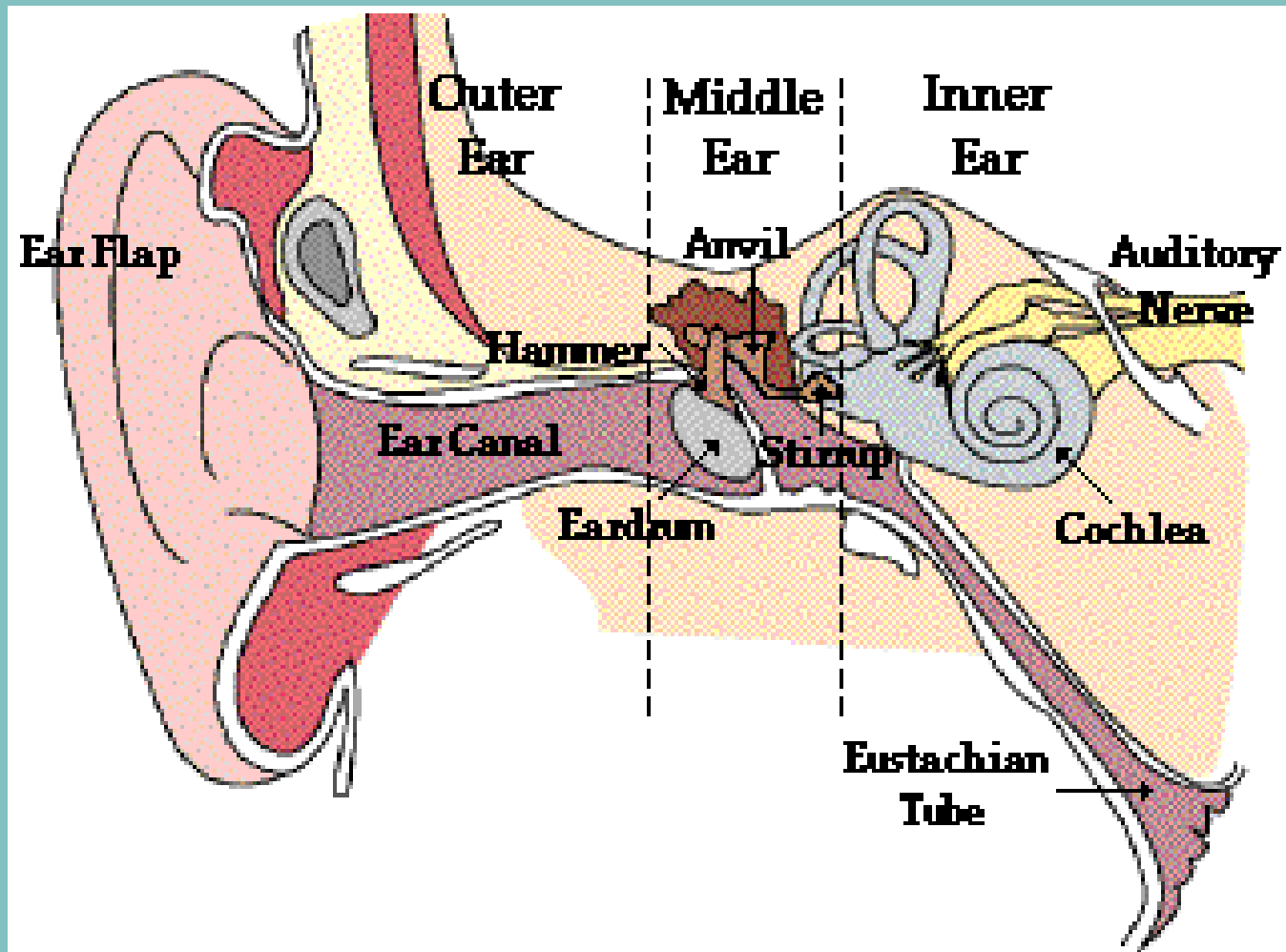
(utricle and saccule)



Cochlear



How Does the Ear Work?



■ Steps to Hearing:

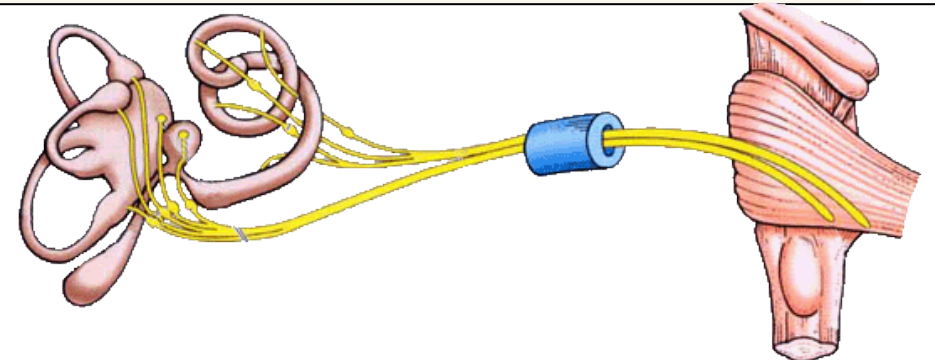
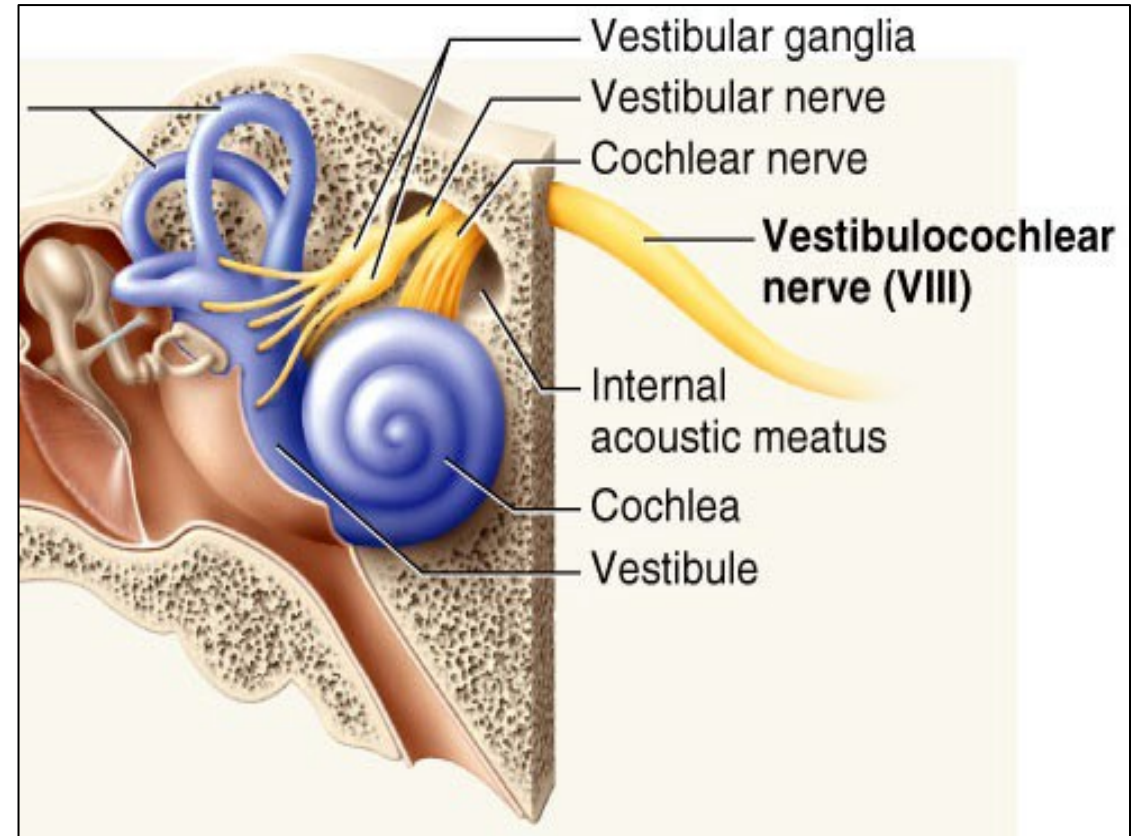
1. Vibrations move through the outer ear canal and vibrate the eardrum.
2. The eardrum passes its energy through a chain of three tiny bones, the anvil, hammer, and stirrup, in the middle of the ear.
3. The anvil, hammer, and stirrup pass the energy onto the cochlea.
4. The vibrations activate hair cells and fluid inside the cochlea.
5. Electrical signals are sent to the brain through the auditory nerve.

Cranial nerves – CN VIII

Vestibulo-Cochlear Nerve

Special sensory (SSA)

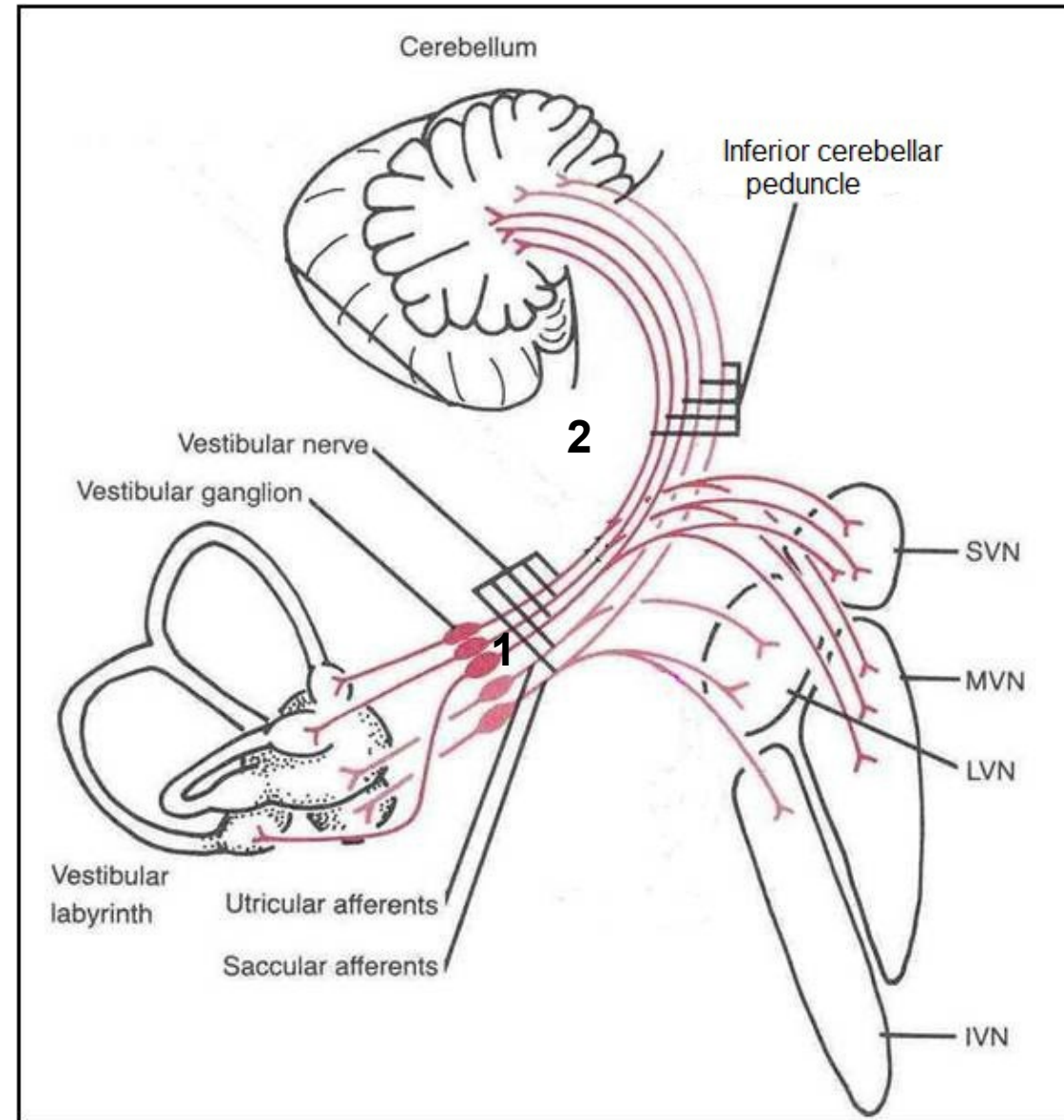
- **Vestibular part:** balance of body (position & movement of the head)
- **Cochlear part:** hearing
- Arise from the hearing and equilibrium apparatus of the inner ear, pass through the internal auditory meatus and enter the brainstem at the pons-medulla border



Vestibular Nerve

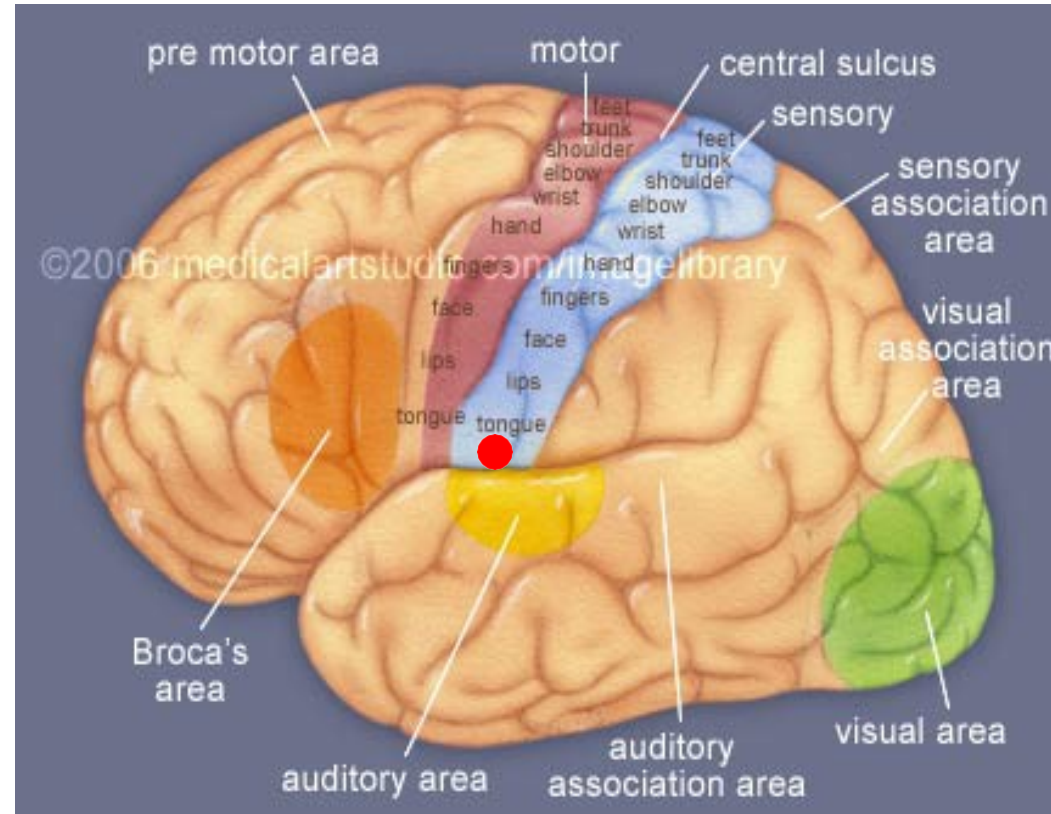
- The vestibular nerve fibers arise from hair cells of the membranous **labyrinth**.
- Their cell bodies (**1st order neurons**) are located in the **vestibular “Scarpa’s” ganglion** within the internal auditory meatus.
- Their central processes:
 - Mostly end up in the lateral, medial, inferior and superior **vestibular nuclei** (**2nd order neurons**) of the medulla and pons.

Some fibers go to the **cerebellum** through the inferior cerebellar peduncle



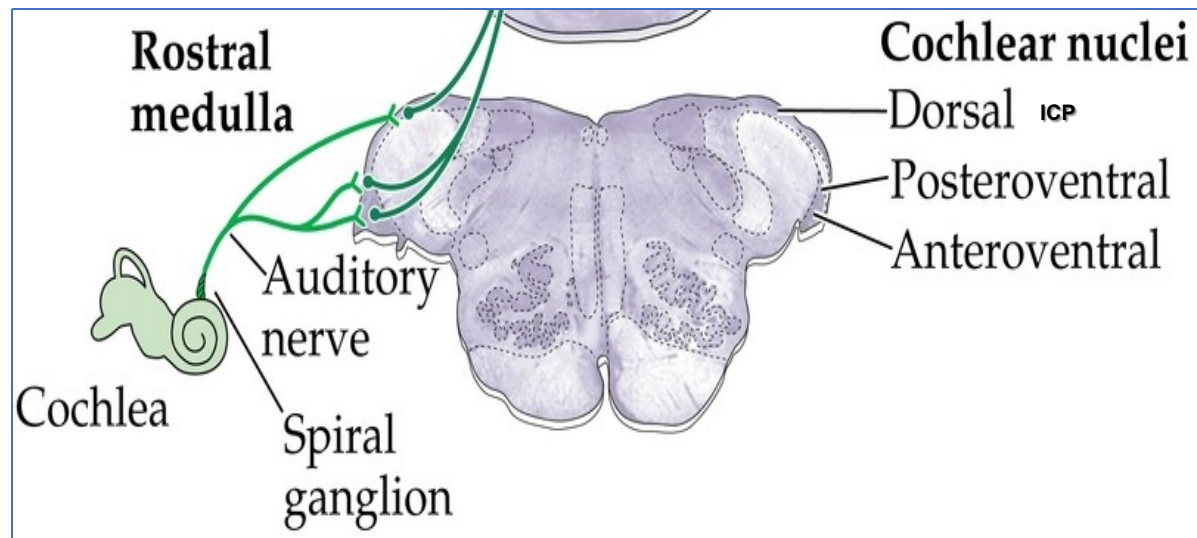
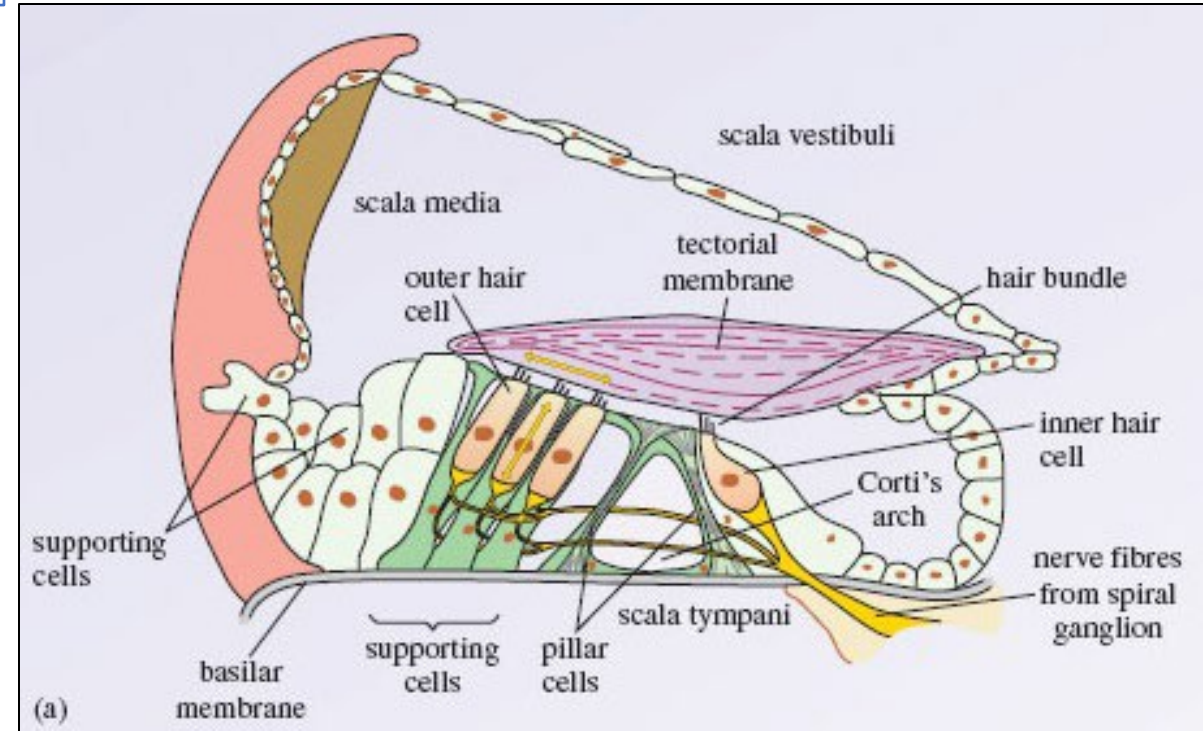
Vestibular Cortex

- Located in the lower part of post-central gyrus (head area).
- Responsible for conscious awareness of vestibular sensation (the position of the head in space).



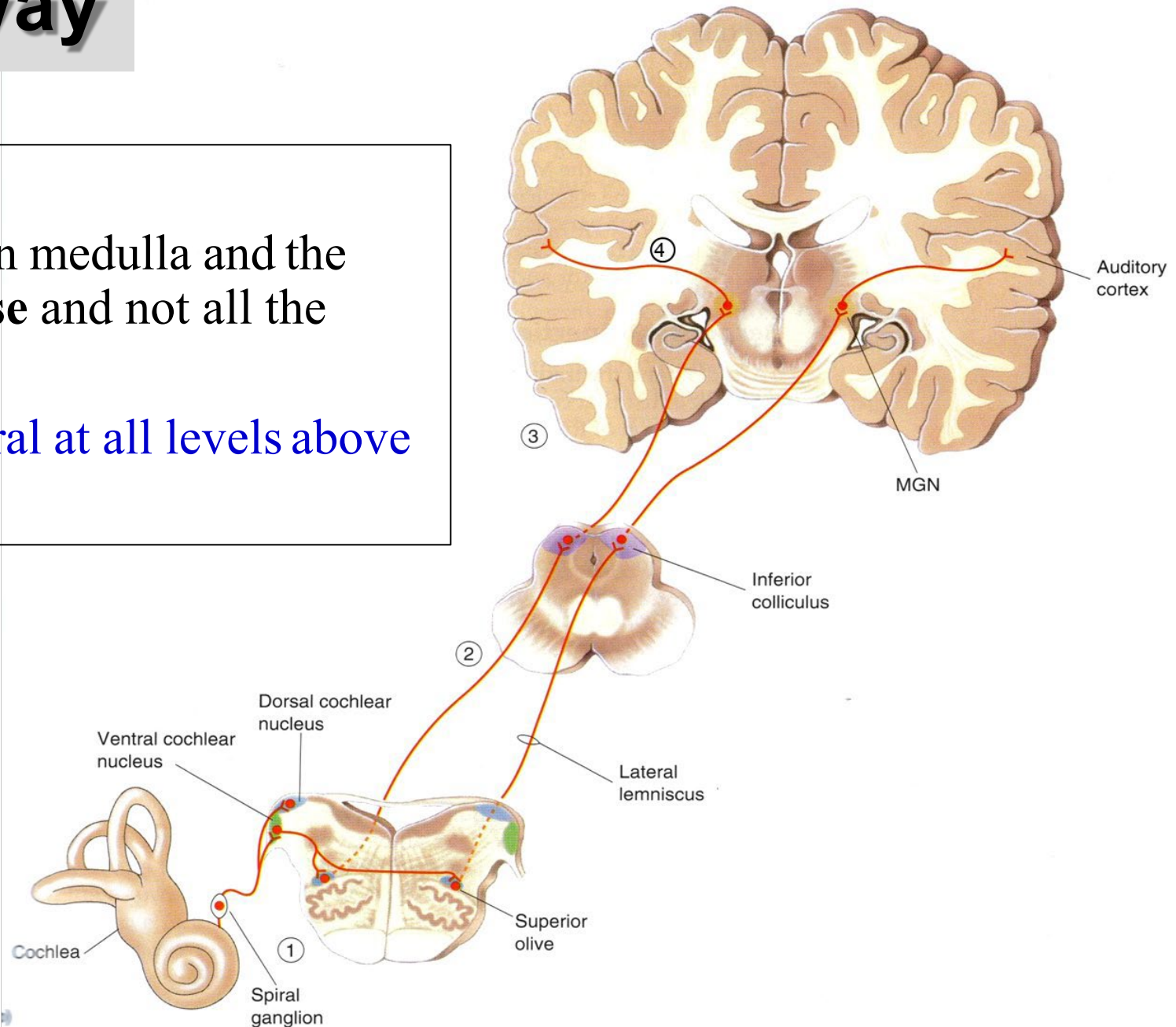
Cochlear (Auditory) Nerve

- The **cochlear nerve fibers** arise from hair cells of the **organ of Corti** within the cochlear duct of the inner ear.
- Their cell bodies (**1st order neurons**) are located within the cochlea in the **spiral ganglion**.
- Their central processes terminate in the dorsal and ventral **cochlear nuclei** (**2nd order neurons**)

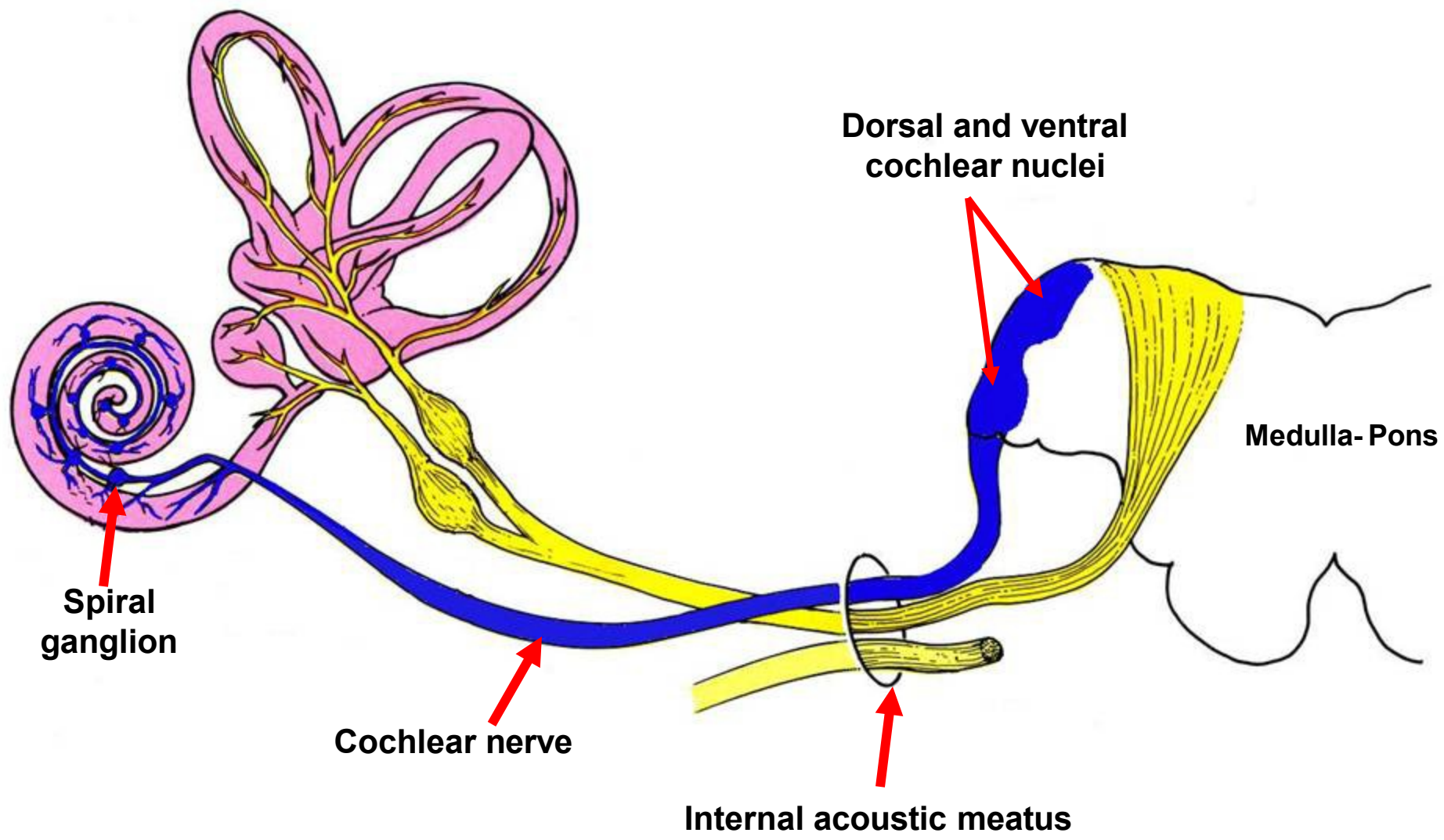


Auditory Pathway

- It is a **multisynaptic** pathway
- There are several locations between medulla and the thalamus where axons **may synapse** and not all the fibers behave in the same manner.
- Representation of cochlea is **bilateral** at all levels above cochlear nuclei.

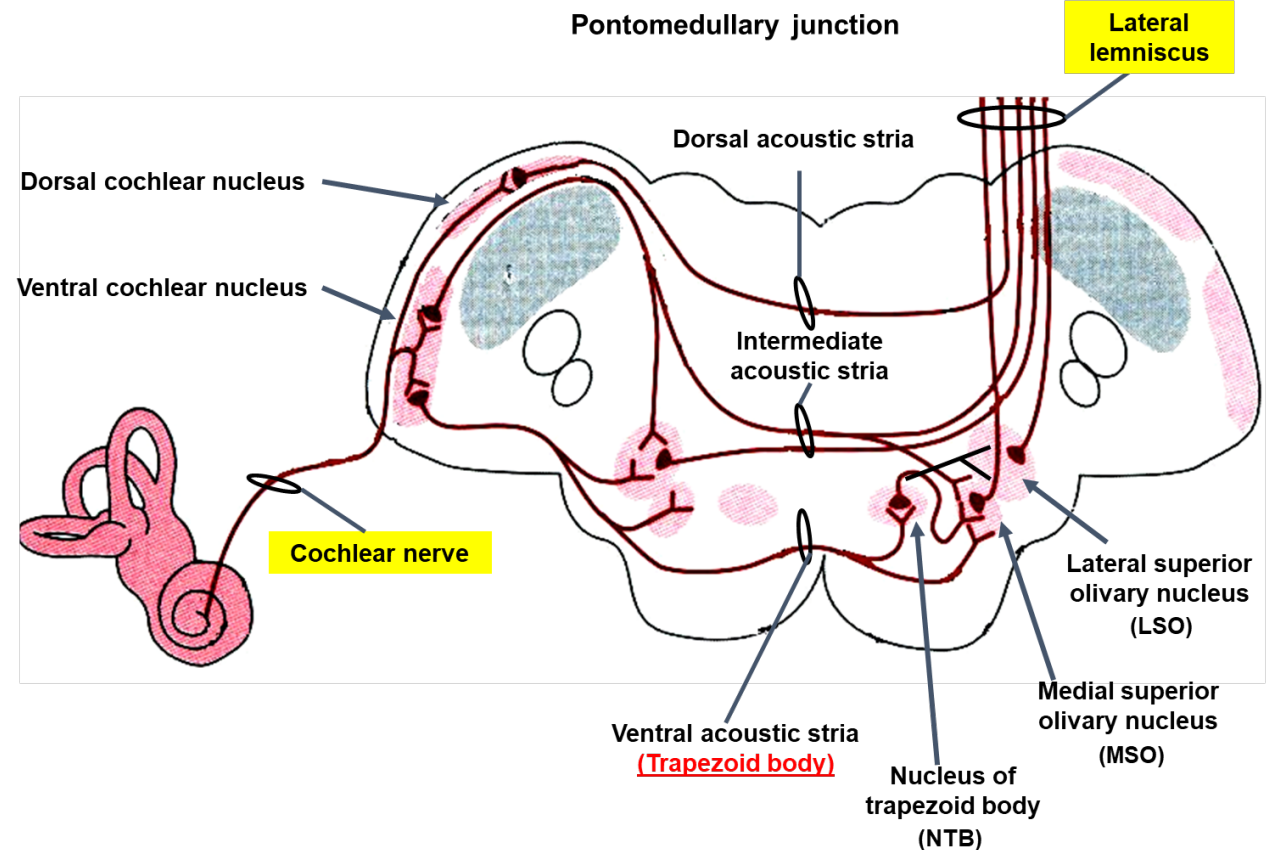


Cochlear nerve



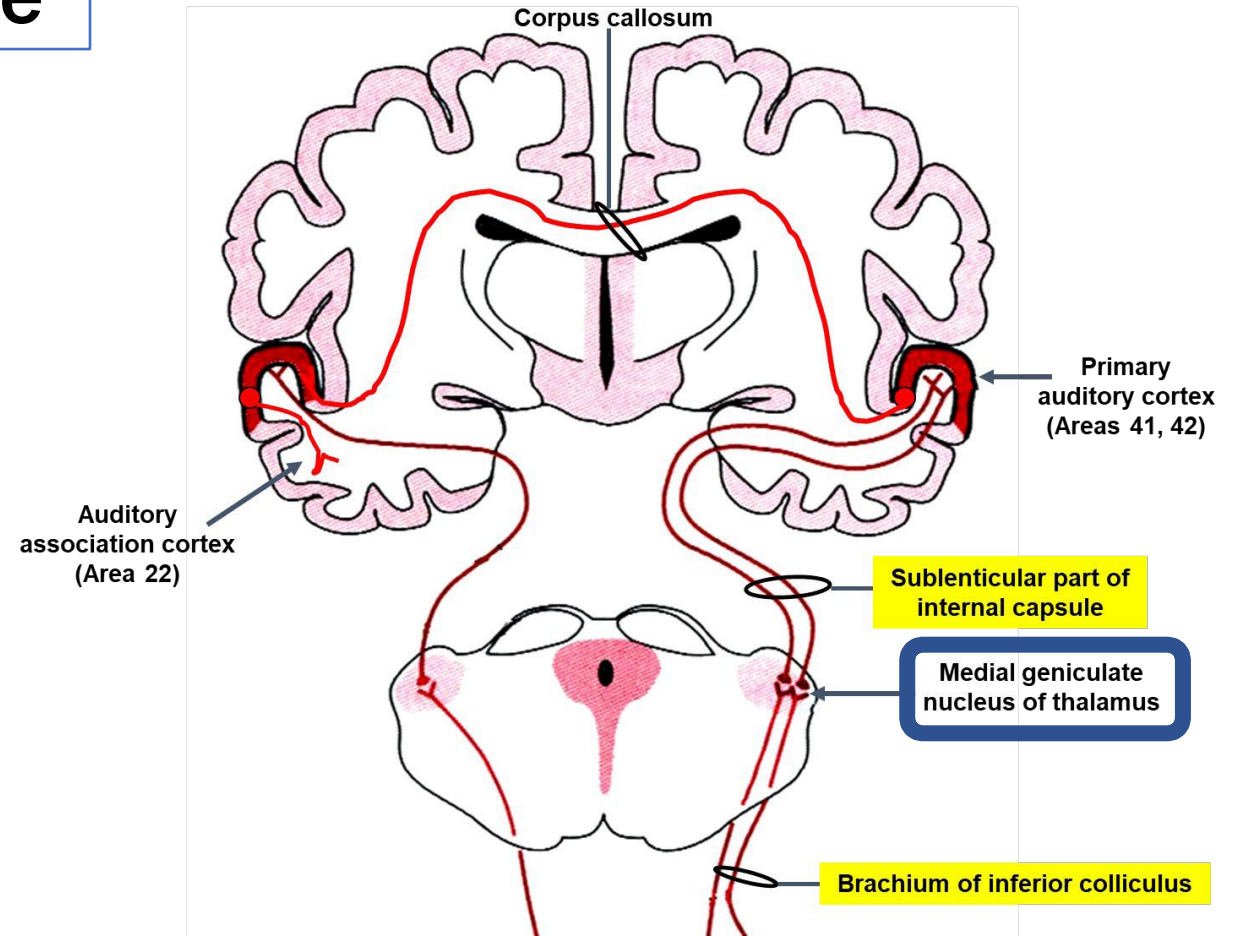
Cochlear (Auditory) Nerve

- From the **cochlear** nuclei, **2nd order neurons** ascend into the pons, where:
 - Some fibers **cross** the midline in **trapezoid body** and terminate in the **nucleus of trapezoid body** or in the contralateral **superior olivary nucleus**
 - Some fibers run **ipsilaterally** and terminate in the **superior olivary nucleus**
- From the superior olivary nuclei, ascending fibers comprise the **lateral lemniscus**, which runs through tegmentum of pons and terminate in the **inferior colliculus** of the midbrain.



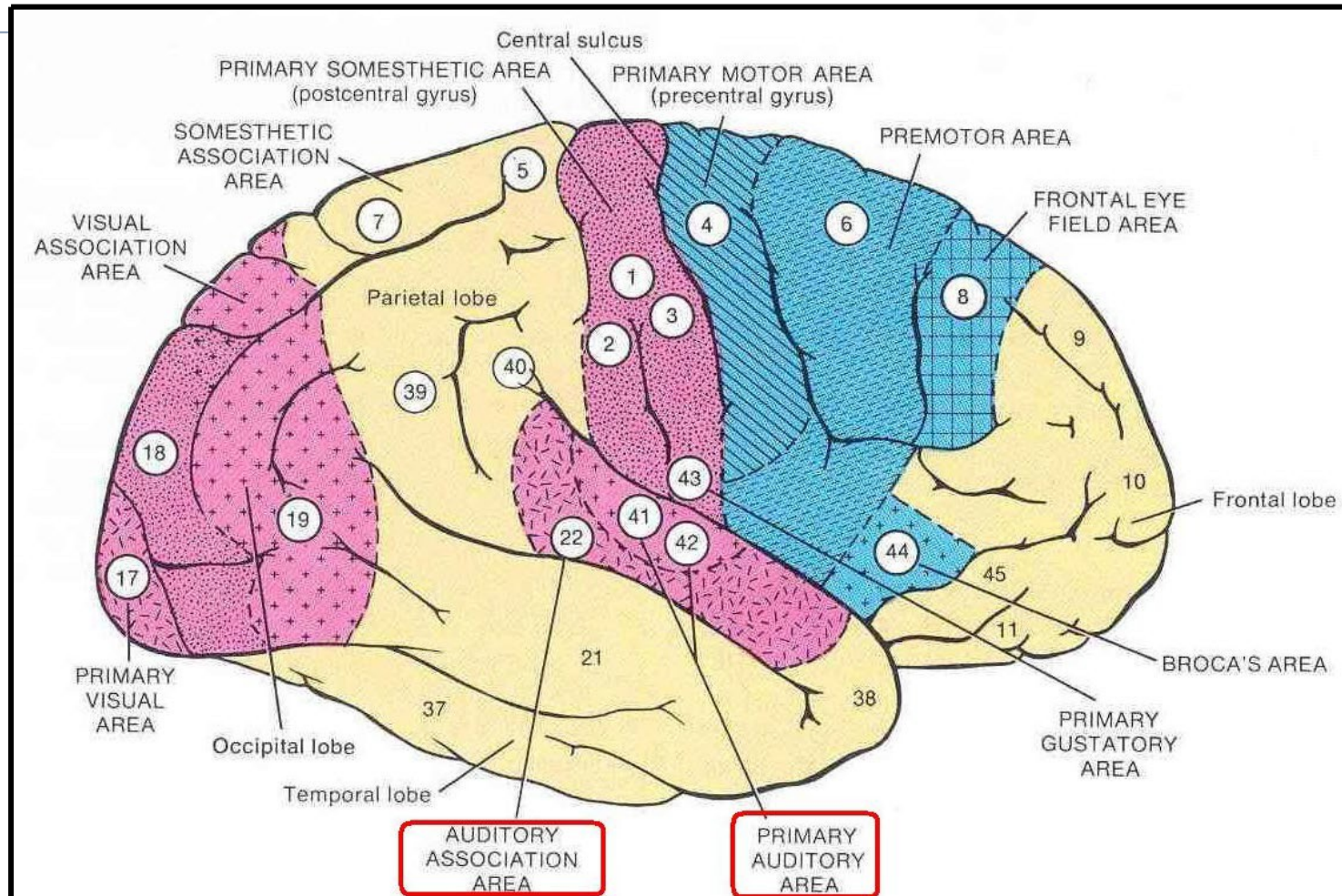
Cochlear (Auditory) Nerve

- Some axons within lateral lemniscus terminate in small **nucleus of the lateral lemniscus**
- The **inferior colliculi** project to **medial geniculate nuclei** of thalamus
- The axons originating in the medial geniculate nucleus (**auditory radiation**) pass through **sublenticular part of the internal capsule** to the **primary auditory cortex (BA 41, 42)**

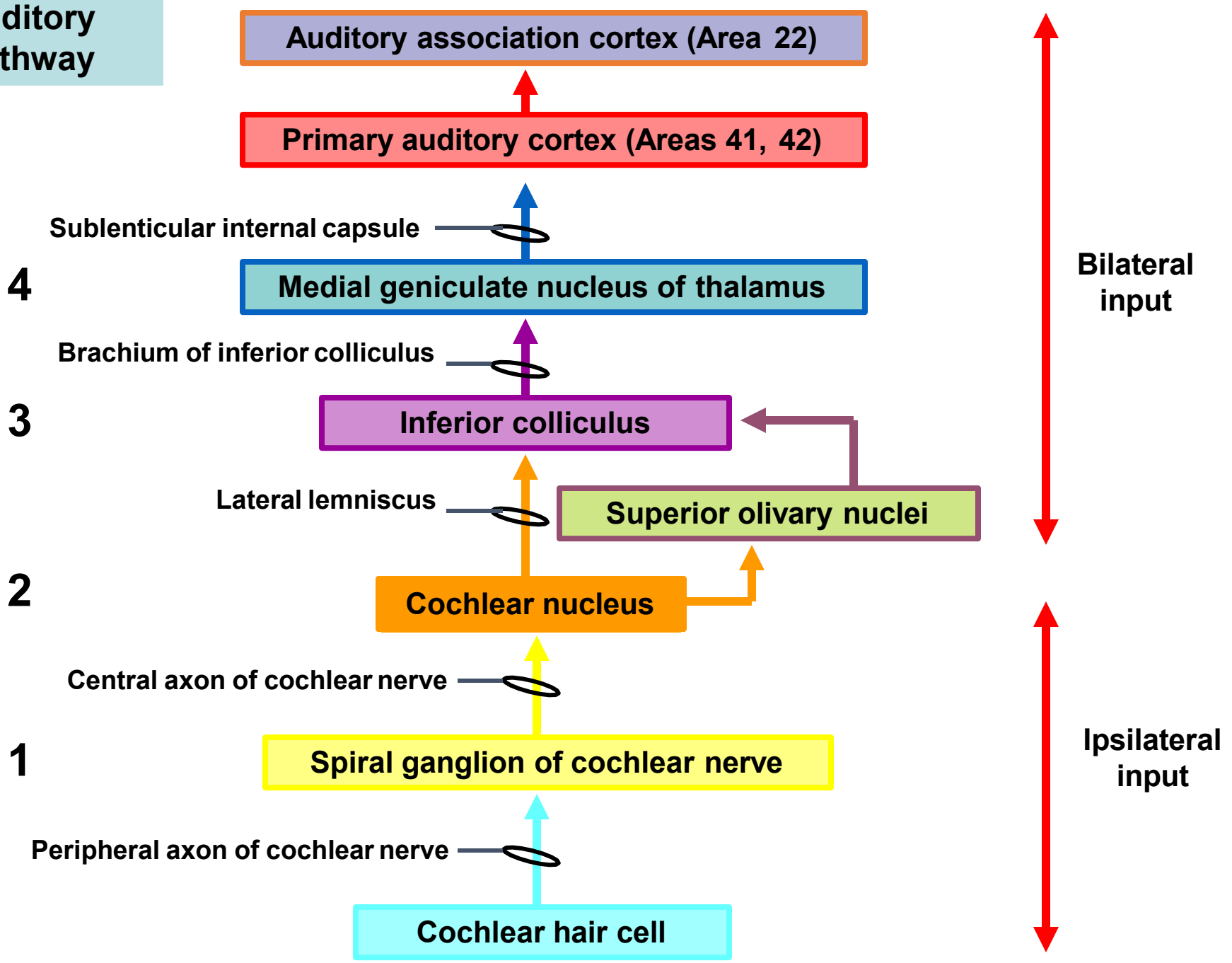


Cochlear (Auditory) Nerve

- The region surrounding the primary auditory cortex is known as the **auditory association cortex** or **Wernick's area (BA 22)**
- Wernick's area is related to recognition and processing of language by the brain

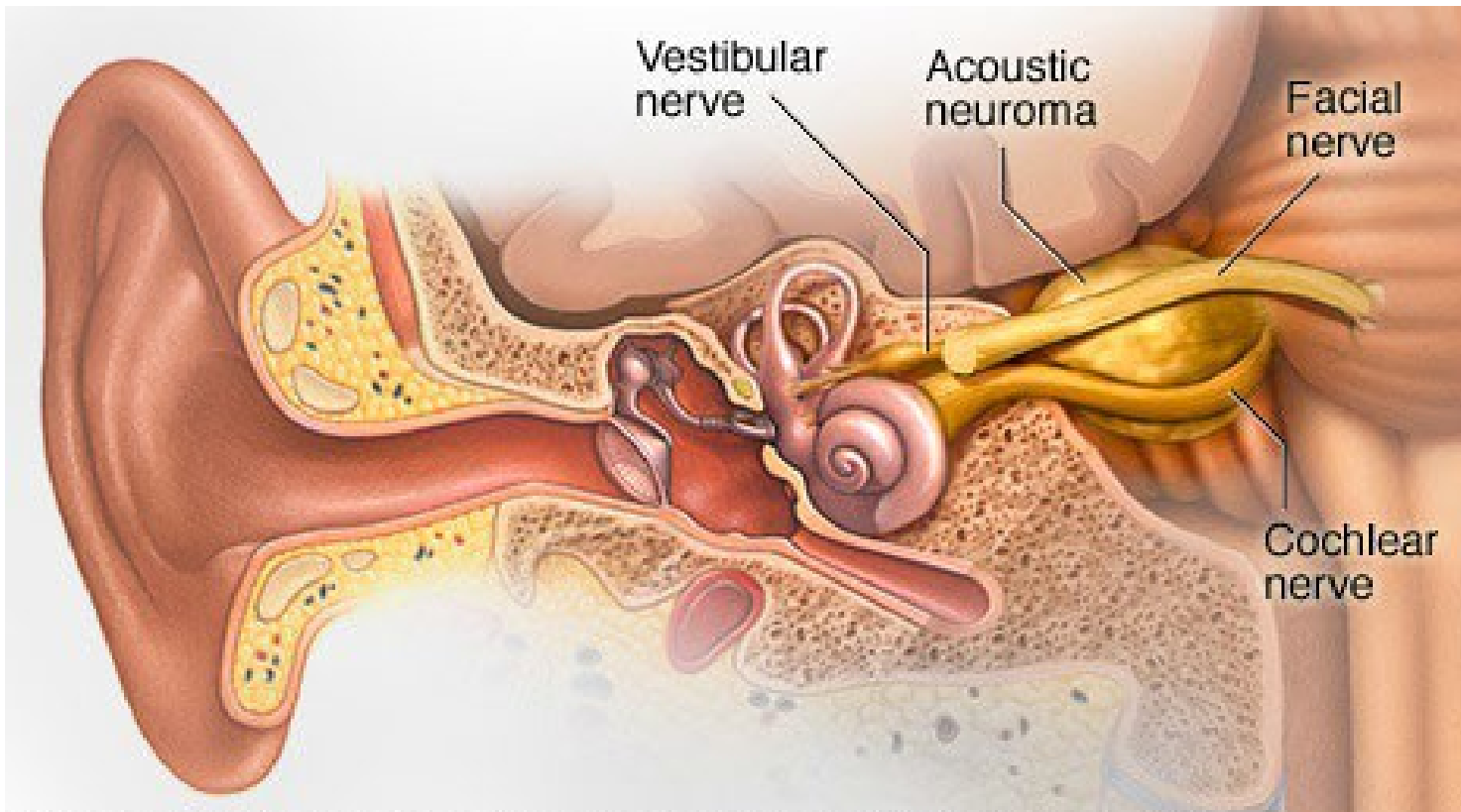


Auditory pathway



- **Superior olivary nucleus** sends olivocochlear fibers to end in organ of Corti through the vestibulocochlear nerve. These fibers are **inhibitory** in function and serve to **modulate** transmission to the cochlear nerve.
- **Superior olivary nucleus & the nucleus of the lateral lemniscus** establish reflex connections with motor neurons of trigeminal and facial motor nuclei mediating contraction of **tensor tympani** and **stapedius** muscles in response to **loud noise**.
- **Inferior colliculi** establish reflex connections with motor neurons in the cervical spinal segments (**tectospinal tract**) for the **movement** of **head and neck** in response to auditory stimulation.

Clinical Notes



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Lesion of vestibulocochlear nerve produces deafness (disturbance of cochlear nerve functions), tinnitus, vertigo, dizziness, nausea, nystagmus, loss of balance and ataxia (disturbance of vestibular nerve functions)

Acoustic neuroma: a benign tumor of 8th nerve leads to compression of the nerve leading to attacks of dizziness, and profound deafness and ataxia

