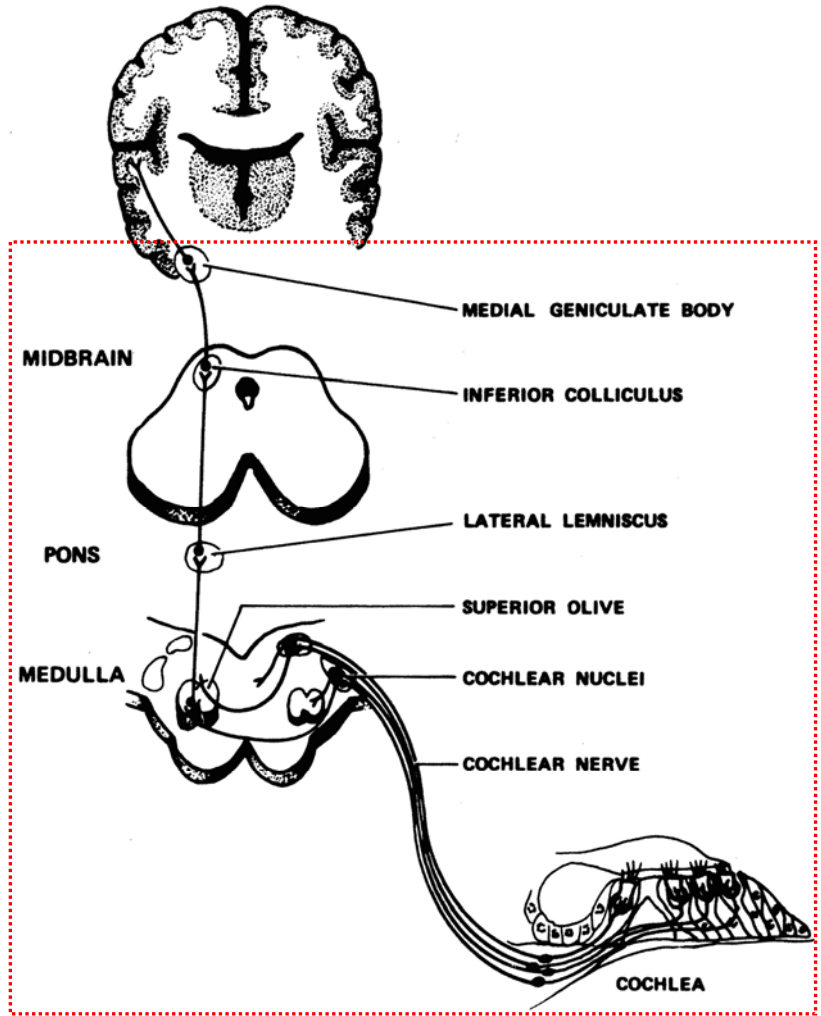
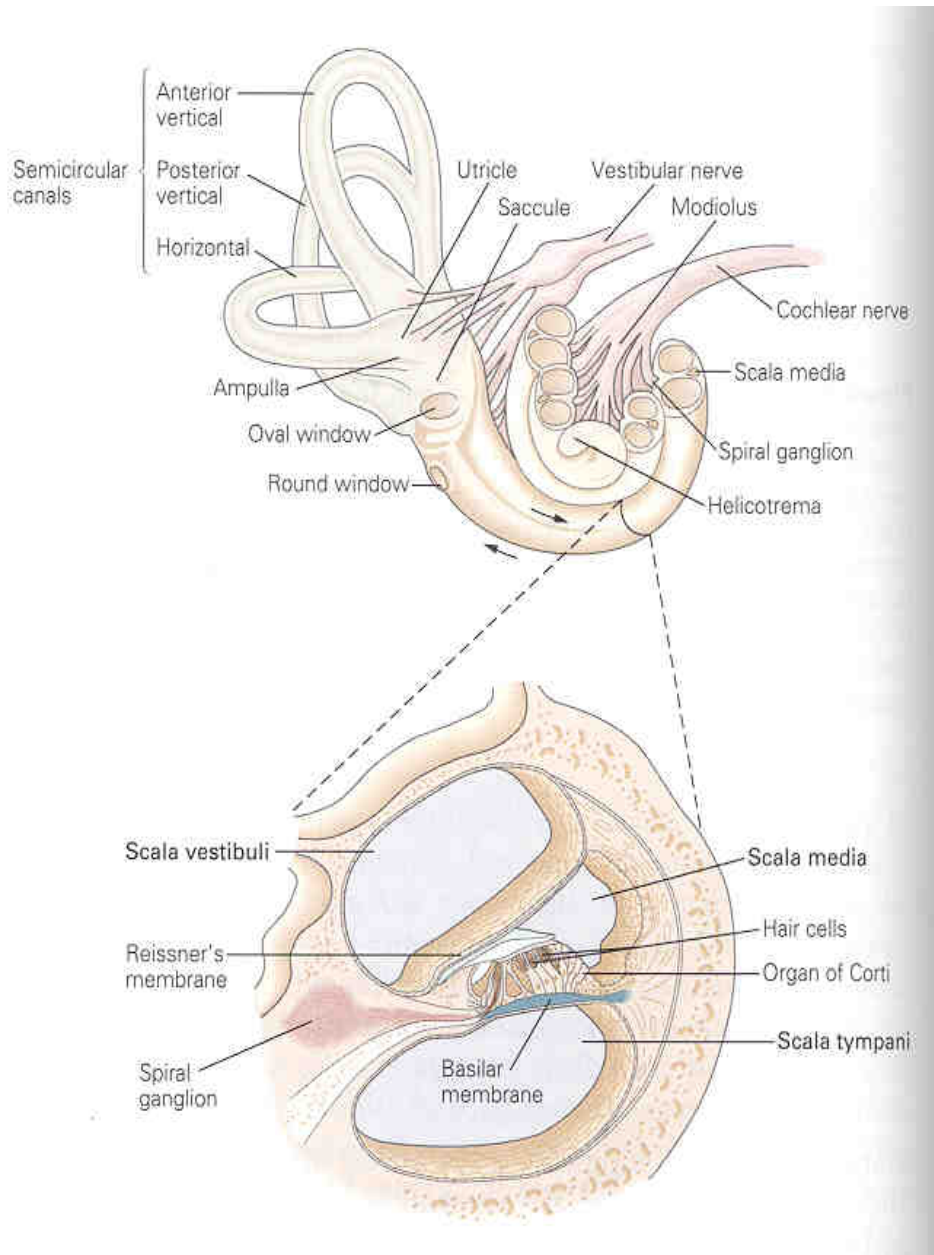


Biopotentials related with Hearing



Auditory Pathway



Sources of ABR
(lower part of auditory system)



Intro. BME

Compound Action Potential (ECAP)

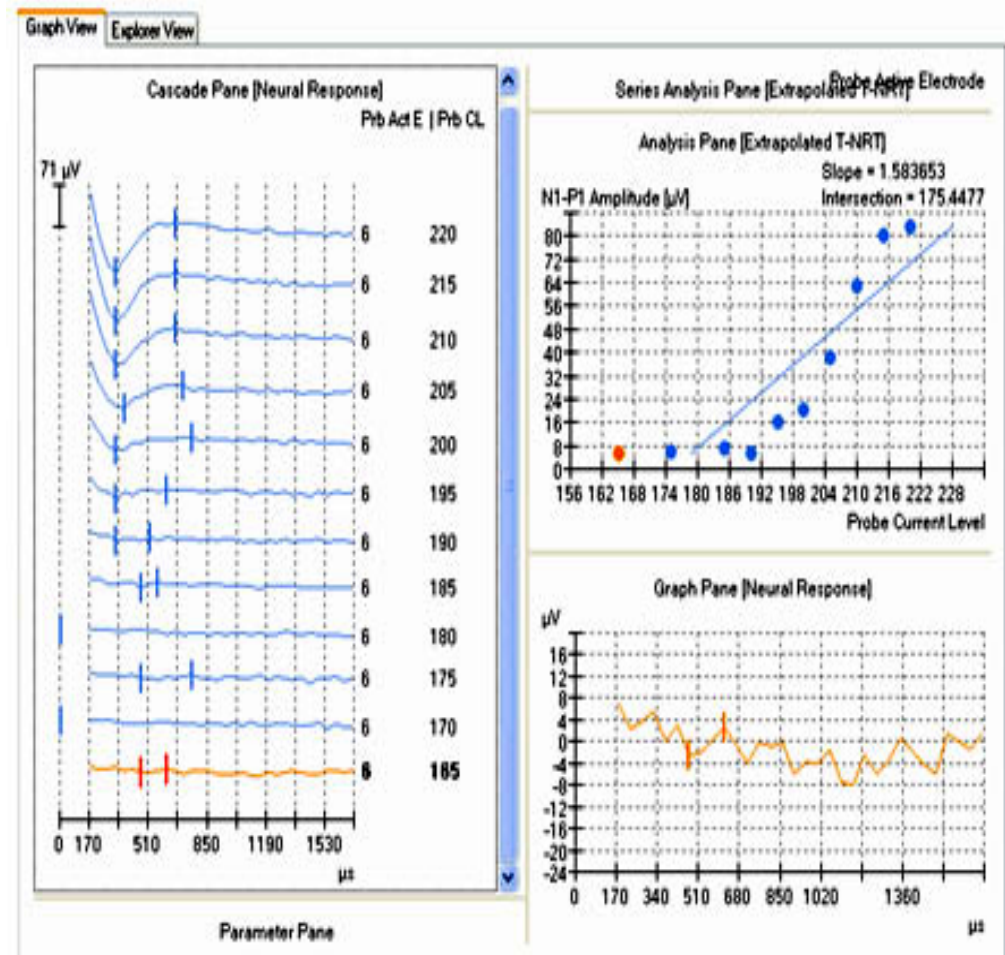
Electrically evoked potentials of auditory neurons.

- Very short latency (0.2 to 0.5msec)
- **Artifact removal** is the most important techniques for successful ECAP measure

Cochlear stimulating electrodes are used as recording electrodes

Every Cochlear Implant Manufacturers offer functions for ECAP measure/analysis

- (1) Cochlear Corp.
 - “NRT(Neural Response Telemetry)”
- (2) Advanced Bionics
 - “NRI (Neural Response Imaging)”
- (3) Med-El
 - “ART(Auditory nerve Response Telemetry)”



Artifact Removal in ECAP measure

✿ Alterating stimulus polarity (Brown *et al.*, 1990)

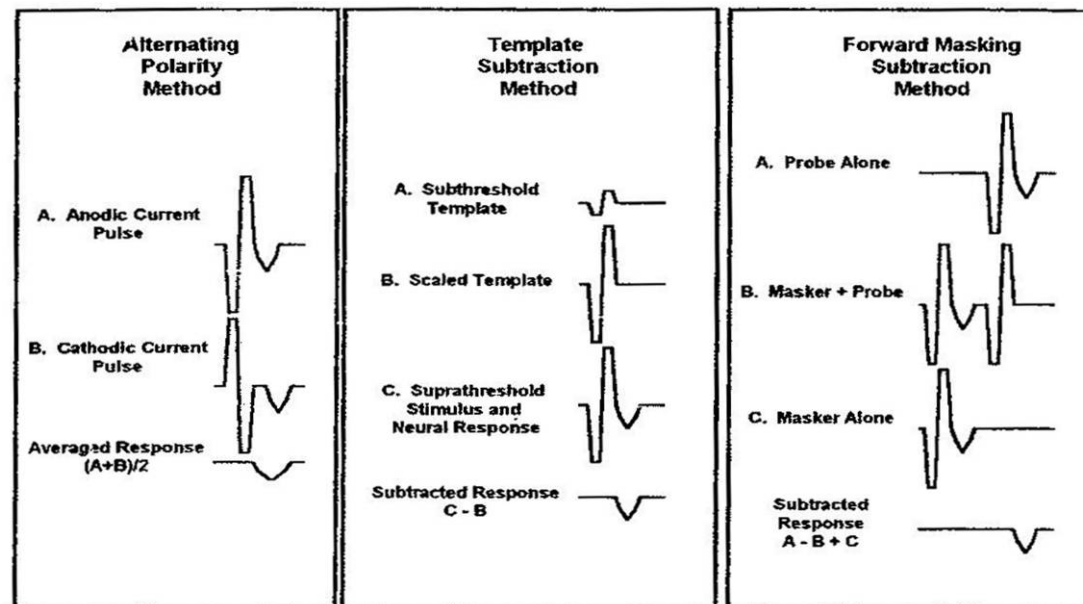
- relatively simple approach (used by Advanced Bionics Corp.)
- underlying assumption : “the neural response is identical either anodic or cathodic leading pulses.”
(but not always true (Van den Honert and Stypulkowski, 1987, Miller *et al.*, 1998)

✿ Template subtraction (Miller *et al.*, 1998)

- use subthreshold response as a template (very linear and accurate amplifier is needed)
- can be used with wide range of stimulus duration.

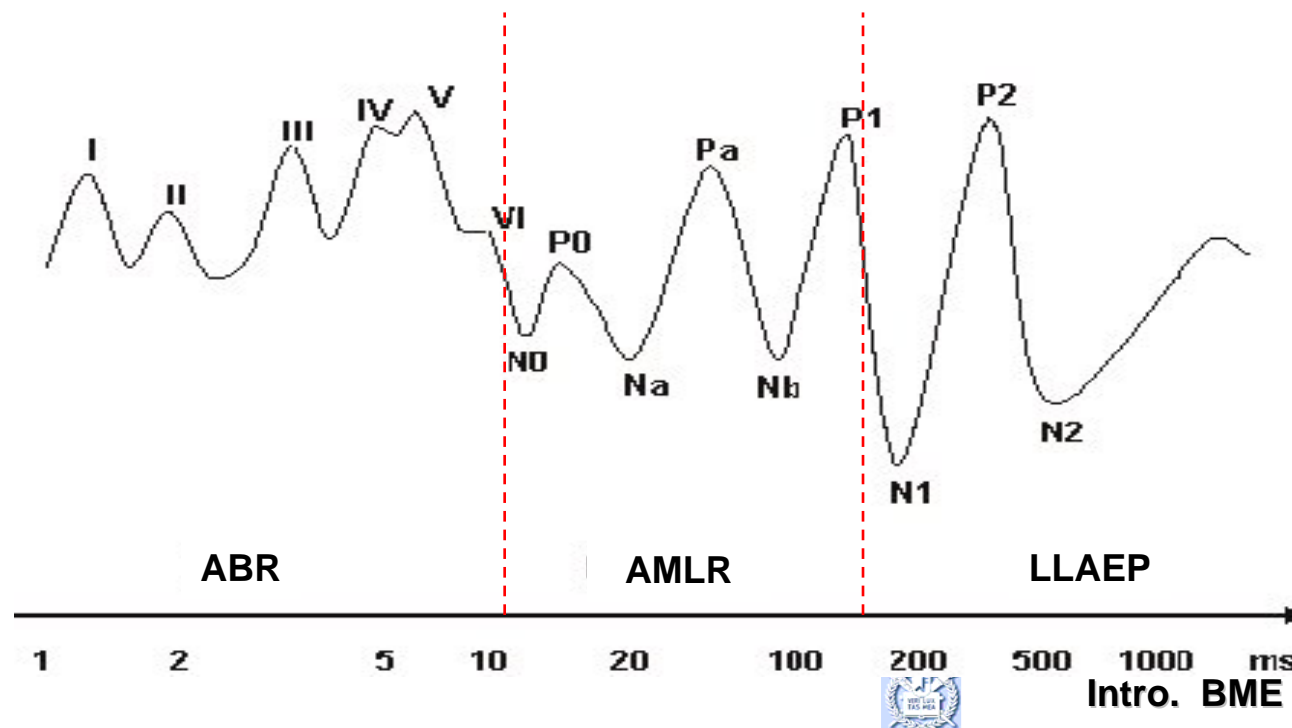
✿ Two-pulse subtraction (Brown *et al.*, 1990, Abbas *et al.*, 1999)

- the most commonly used (Ineraid → Cochlear Corp., → Advanced bionics)
- uses forward masking paradigm (refractory characteristic of neurons)
- need careful optimization of amplifier gain and another parameters



Auditory Evoked Potential (AEP)

- ✿ ABR, AMLR, LLAEP, etc.
- ✿ Tests are far field recordings of neurophysiological responses to auditory stimulation...in a bioelectric background!
- ✿ Can be measured using acoustic sound or electrical stimulation (C.I.)
- ✿ Used to identify auditory dys-synchrony (auditory neuropathy), a dysfunction of neural pathways



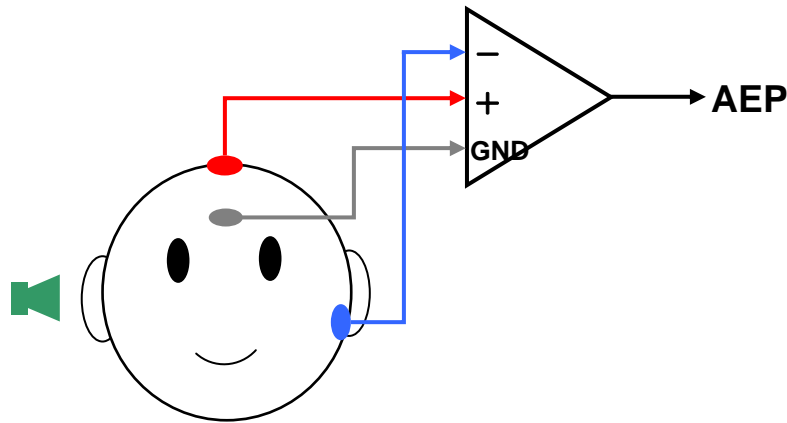
AEP Measure

✿ AEP can be measured non-invasively

- scalp electrode is used.

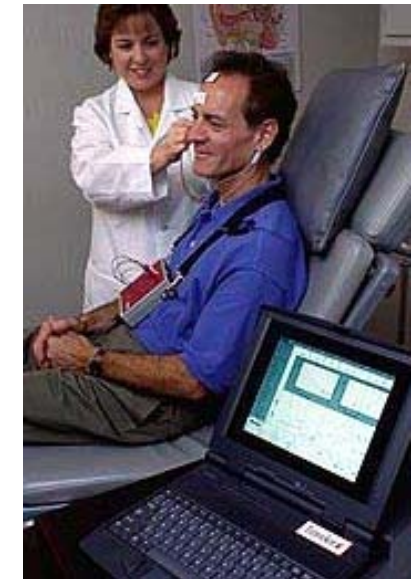
✿ Setup for AEP measure

- (1) Recording electrode – scalp electrode
- (2) Stimulator
 - for acoustic stimulation : speaker
(click or tone-burst sound)
 - for electrical stimulation : C.I. or other stimulator
- (3) Acquisition hardware
 - Amplification, filtering
 - data recording/analysis



Typical electrode montage for AEP measure

Vertex : non-inverting input
Forehead : ground
Contralateral earlobe : inverting input



Intro. BME

Auditory Brainstem Response (ABR)

Most well known AEP

- Primarily used to evaluate neurological disorders at level of auditory nerve and brainstem

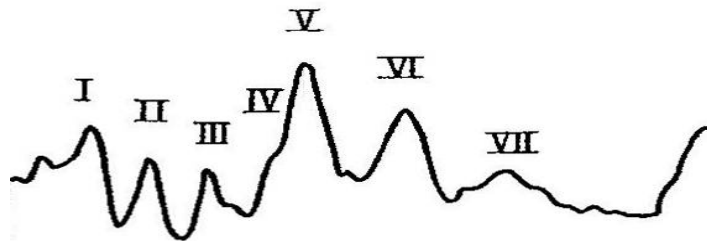
ABR (first described by Jewett and Williston, 1971)

- Short latency (~10msec) evoked potential
- ABR measure can access lower part of the auditory system
- Amplitude ranges a few uV

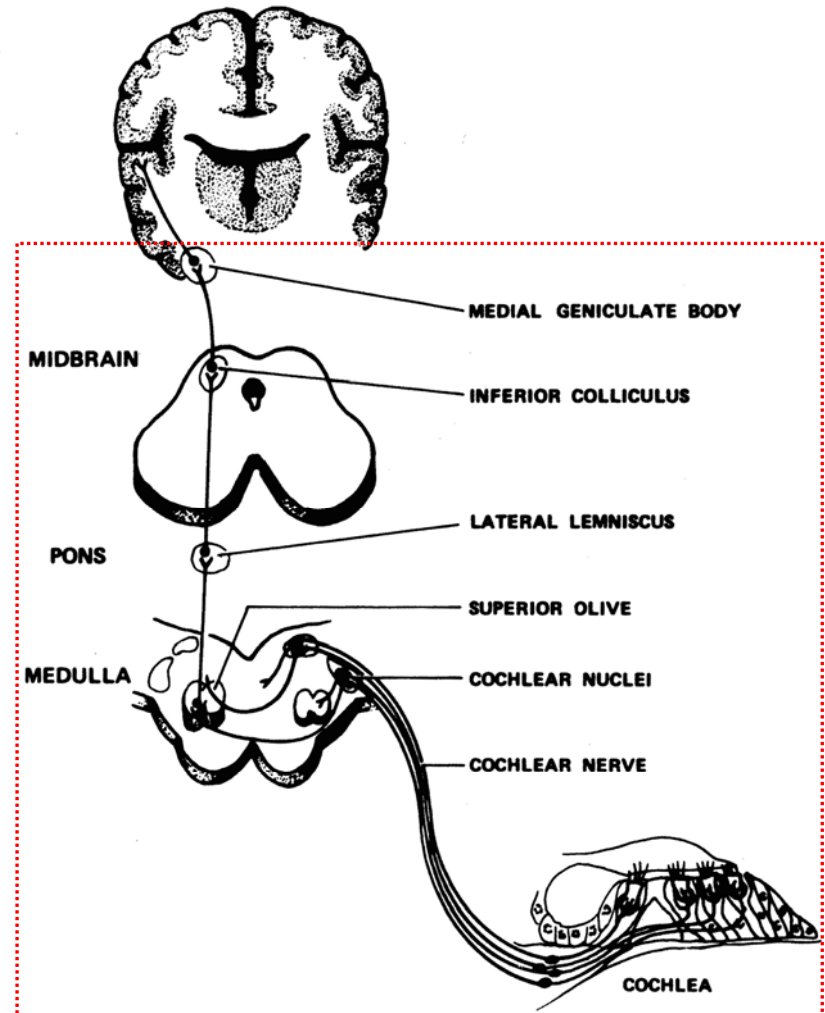
ABR consists of 7 peaks

- Wave I - compound action potential of cochlear nerve
- Wave II – proximal region of cochlear nerve
- Wave III – cochlear nucleus
- Wave IV – superior olivary complex
- Wave V – lateral lemniscus
- Wave VI and VII – inferior colliculus

(Presence of Wave V found to be reliable estimate of hearing ability in 2K-4K Hz range)



Typical ABR waveform



Sources of ABR
(lower part of auditory system)
Intro. BME



ABR vs. EABR

✿ EABR (Electrically evoked ABR)

: ABR evoked by electrical stimulation (such as C.I.)

✿ EABR has similar characteristic to ABR

- same auditory processes are used.

✿ Some important differences

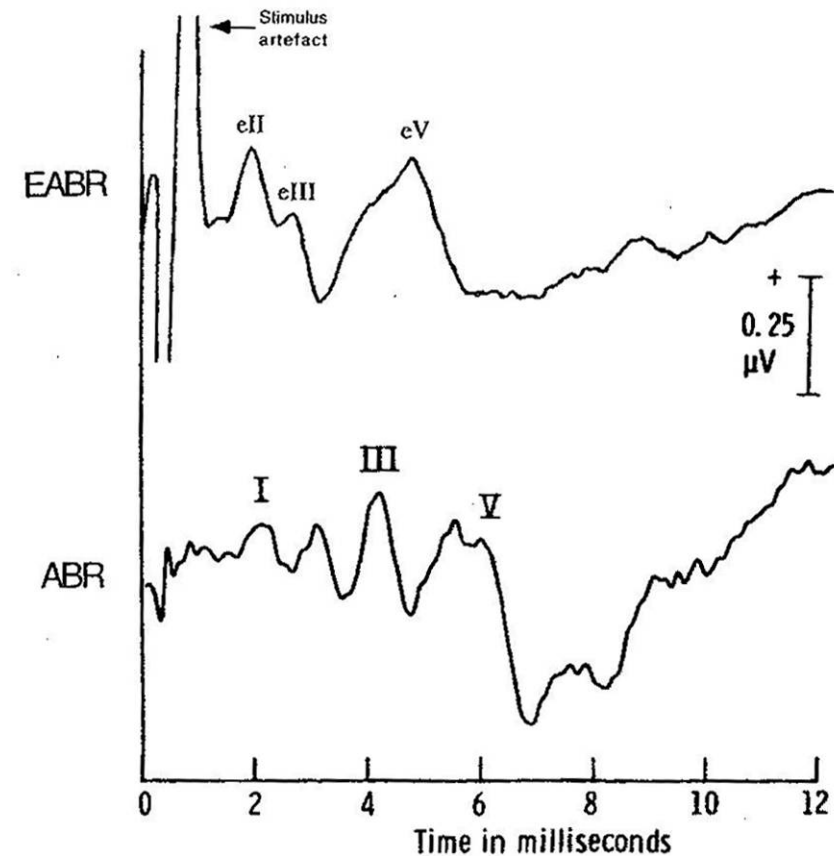
(1) Wave eI is usually obscured.

- due to stimulation artifact

(2) Shorter latency

- EABR arise 1.0~1.5msec earlier than ABR

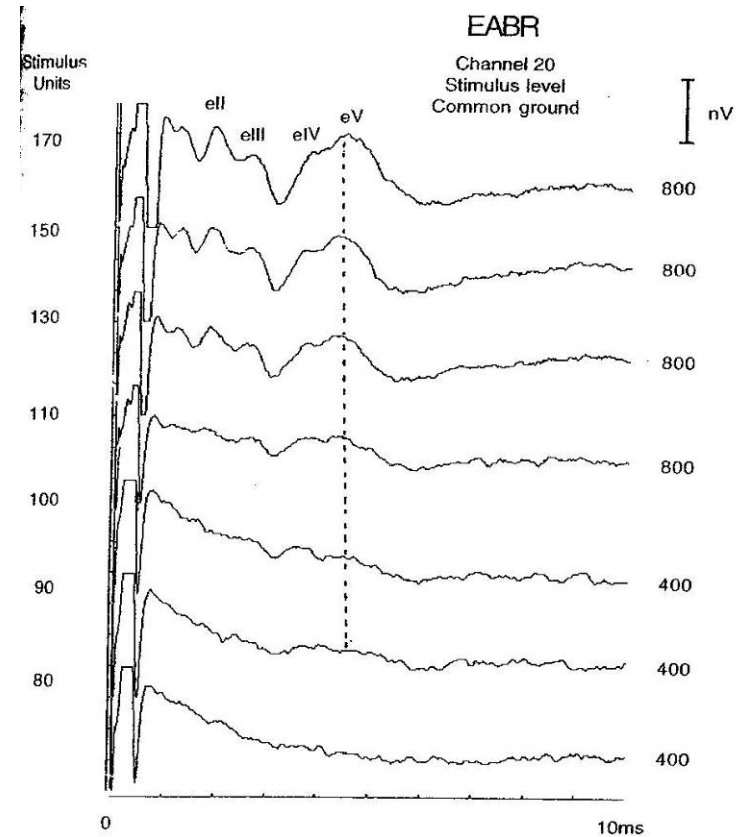
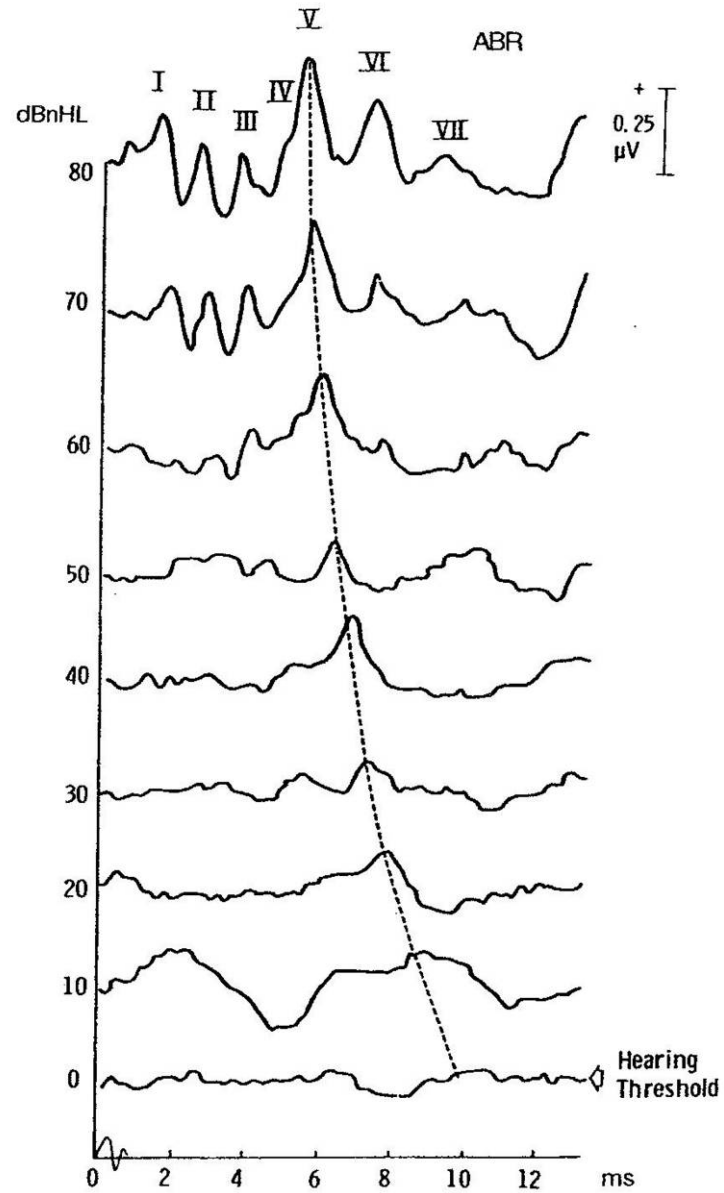
- Electrical stimulus bypasses the transmission process of sound.



Typical response wave forms for the ABR and the EABR



Intensity series of ABR and EABR



Other AEPs – AMLR, LLAEP, etc.

- ✿ **AMLR Auditory Middle Latency Response**

- ✿ **LLAEP Long-Latency Auditory Evoked Potential**
 - P300 Event Related Response

- **On-going studies regarding clinical utility of these tests continue...**

- **Most recorded since 1960s**

- : Not in widespread use outside of research sites**



Auditory Middle Latency Response (AMLR)

• AMLR

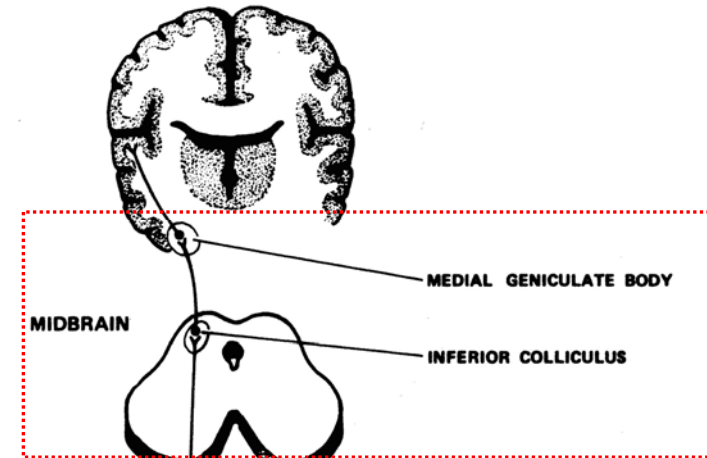
- AEP that occurs after the ABR
- Typical latency : 10msec ~ 100msec

• AMLR contains larger and broader peaks than those of ABR

- Na, Pa, Nb, Pb(o P1) peaks
(This form of representation is introduced by Goldstein and Rodman, 1967)
- Pa is mostly used for checking auditory function (often compared to wave V of ABR)
- Pb is highly variable and may not appear in normal subjects

• AMLR measure is helpful in studying central auditory function in patient with language, speech and learning

- Neural generator of AMLR
 - (1) subcortical portion of the auditory pathway that develops early
 - (2) cortical portion that developes later



Sources of AMLR

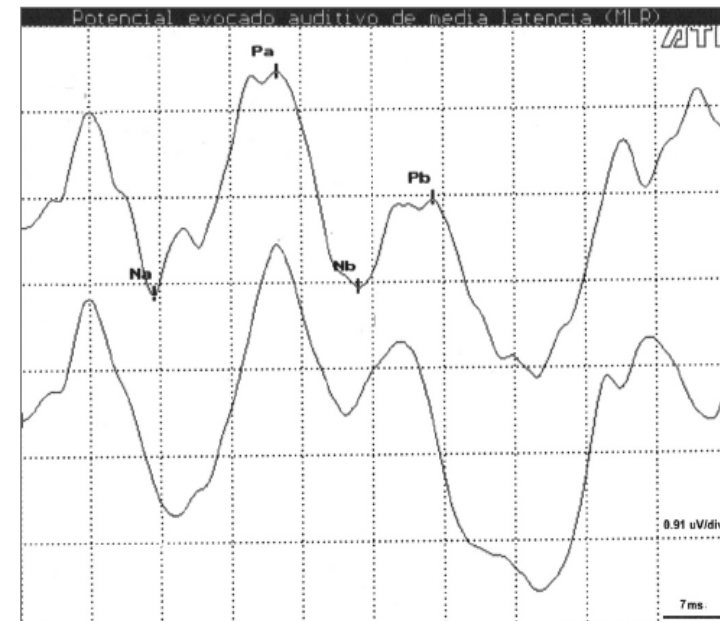


Figure 1. AMLR recording at 70 dBNA with replication.
Key: mV= microvolts; ms = milliseconds.

Long Latency Auditory Evoked Potential (LLAEP)

LLAEP is results of cognitive processing

- related with cognitive function of brain rather (than with physical sensory input)
- **P300 event related potential** is mostly invested by researchers

P300 event-related potential (Sutton et al, 1965)

- Positive peak with latency around 300msec after stimulation
- late cognitive component

Clinical use of P300

- diagnosis of
 - (1) epilepsy,
 - (2) Alzheimer disease,
 - (3) obsessive-compulsive disorder, etc.

