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The Physiology Of Balance:
Vestibular Function

The vestibular system is the sensory apparatus of the inner ear that helps the body maintain its postural equilibrium. The information furnished by the vestibular system is also essential for coordinating the position of the head and the movement of the eyes. There are two sets of end organs in the inner ear, or labyrinth: the semicircular canals, which respond to rotational movements (angular acceleration); and the utricle and saccule within the vestibule, which respond to changes in the position of the head with respect to gravity (linear acceleration). The information these organs deliver is proprioceptive in character, dealing with events within the body itself, rather than exteroceptive, dealing with events outside the body, as in the case of the responses of the cochlea to sound. Functionally these organs are closely related to the cerebellum and to the reflex centres of the spinal cord and brainstem that govern the movements of the eyes, neck, and limbs. Although the vestibular organs and the cochlea are derived embryologically from the same formation, the otic vesicle, their association in the inner ear seems to be a matter more of convenience than of necessity. From both the developmental and the structural point of view, the kinship of the vestibular organs with the lateral line system of the fish is readily apparent. The lateral line system is made up of a series of small sense organs located in the skin of the head and along the sides of the body of fishes. Each organ contains a crista, sensory hair cells, and a cupula, as found in the ampullae of the semicircular ducts. The cristae respond to waterborne vibrations and to pressure changes.

Detection of angular acceleration: dynamic equilibrium

Because the three semicircular canals—superior, posterior, and horizontal—are positioned at right angles to one another, they are able to detect movements in three-dimensional space. When the head begins to rotate in any direction, the inertia of the endolymph causes it to lag behind, exerting pressure that deflects the cupula in the opposite direction. This deflection stimulates the hair cells by bending their stereocilia in the opposite direction. The deflection of the cupula excites the hair cells by bending the cilia atop them: deflection in one direction depolarizes the cells; deflection in the other direction hyperpolarizes them. Electron-microscopic studies have shown how this polarization occurs. The hair bundles in the cristae are oriented along the axis of each canal. For example, each hair cell of the horizontal canals has its kinocilium facing toward the utricle, whereas each hair cell of the superior canals has its kinocilium facing away from the utricle. In the horizontal canals, deflection of the cupula toward the utricle—i.e., bending of the stereocilia toward the kinocilium—depolarizes the hair cells and increases the rate of discharge. Deflection away from the utricle causes hyperpolarization and decreases the rate of discharge. In superior canals these effects are reversed.

Detection of linear acceleration: static equilibrium

The gravity receptors that respond to linear acceleration of the head are the maculae of the utricle and saccule. The left and right utricular maculae are in the same, approximately horizontal, plane and, because of this position, are more useful in providing information about the position of the head and its side-to-side tilts when a person is in an upright position. The saccular maculae are in parallel vertical planes and probably respond more to forward and backward tilts of the head.

Disturbances of the vestibular system

The relation between the vestibular apparatus of the two ears is reciprocal. When the head is turned to the left, the discharge from the left horizontal canal is decreased, and vice versa. Normal posture

is the result of their acting in cooperation and in opposition. When the vestibular system of one ear is damaged, the unrestrained activity of the other causes a continuous false sense of turning (vertigo) and rhythmical, jerky movements of the eyes (nystagmus), both toward the uninjured side. When the vestibular hair cells of both inner ears are injured or destroyed, as can occur during treatment with the antibiotics gentamicin or streptomycin, there may be a serious disturbance of posture and gait (ataxia) as well as severe vertigo and disorientation. In younger persons the disturbance tends to subside as reliance is placed on vision and on proprioceptive impulses from the muscles and joints as well as on cutaneous impulses from the soles of the feet to compensate for the loss of information from the semicircular canals. Recovery of some injured hair cells may occur.