

Spatial Hearing



Nayiere Mansouri, Farzaneh Zamiri Abdollahi* and Meysam Nouri

Department of audiology, Tehran University of Medical Sciences, Iran

Submission: August 15, 2018; Published: August 29, 2018

*Corresponding author: Farzaneh Zamiri Abdollahi, Department of audiology, Tehran University of Medical Sciences, Iran,
Email: Audiology_zamiri@yahoo.com

Abstract

Spatial hearing is one of the most important and vital processing in the auditory system. It makes a base for higher level functions in the auditory system. In this paper some of these functions will be reviewed.

Keywords: Spatial Hearing; Auditory Localization; Speech Perception in Noise

Spatial Hearing and Auditory Localization

Spatial hearing is one of the incredible abilities of auditory system. It depends on binaural hearing and auditory localization [1,2]. Sound reaching two cochlea is delivered to central auditory system and in different stages signal from two ears are compared. One of the most important stages is superior olivary complex (SOC) which is the first stage in auditory system that binaural processing happens [3,4]. SOC neurons compare the time of arrival/phase and the intensity of signals between two ears. Based on interaural time/phase difference (ITD/IPD) and interaural intensity/level difference (IID/ILD), SOC encodes the sound source location. Other binaural nuclei in the auditory system work on this encoded signal from SOC and spatial hearing is sharpened and get more sophisticated (such as perception of moving sound source) [5,6]. In addition to central nuclei, the auditory cortex has a lot to do with spatial hearing and damage to the specific areas in the auditory cortex can destroy spatial hearing [7,8]. Furthermore, there are two parallel processing paths in the cortex for the auditory signals: one is "what" processing (content of the signal) and the other is "where" processing (spatial processing) [9-11]. This is indicative of spatial hearing importance. Auditory localization is a complex and advanced auditory function. We live in reverberations.

There are many echoes/reflections of the original sound source in the environment that reach to the ears with different delays, but we can localize the sound source with great precision. This is made possible by precedence effect. The auditory system uses only the first wave front to localize the sound source and other reflections are suppressed [12-14]. Studies have shown that this phenomenon is a high level process (from inferior colliculus to the cortex) [15]. but recent electrophysiologic studies on binaural interaction components (BICs) have shown that SOC might play a role as well because neurons in the SOC

respond to the ITDs beyond ecologic range for the species. ITDs and ILDs help horizontal localization. For vertical localization, pinna and concha play an important role. Pinna has multiple folds and based on the elevation of the sound source, there are different reflections and the spectrum of the sound will change accordingly. These reflections make a notch in the sound spectrum which is dependent of the source vertical position, and central auditory system (dorsal cochlear nucleus) is able to detect that notch and encodes the vertical location of the sound source [16-18].

Spatial Hearing and Speech Perception in Noise

Spatial hearing can enhance speech understanding in noise/competition. There are many studies to support this notion [19-21]. When target sound source is spatially separate from other competing sound sources, a normal functioning auditory system enable us to have better speech recognition. So, a normal auditory system can gain benefit from spatial cues for better speech perception [22]. This improvement has been shown in studies on subjects with hearing aid and cochlear implant. Patients with two sensory aid show better speech perception in noise and competition [23-25]. It seems the best binaural processing in bilateral cochlear implant happens when two devices are implanted symmetric. Electrophysiologic studies using BIC support this finding. In fact, localization cues help auditory scene analysis and perception of one signal among multiple competing signals [26,27].

Plasticity of Spatial Processing

Spatial processing is highly plastic. In animal studies it is shown that blocking one ear and therefore changing binaural cues cause localization errors at first but after a while the animals are able to localize signals precisely. Then by removing ear plug

again they show localization errors and again after a while their localization accuracy recovers. This plasticity is seen in both young and adult animals. So spatial plasticity remains even in adulthood [28-30]. Human studies have shown spatial processing plasticity as well. Few sessions of auditory localization in blind people under headphone or in the free field can significantly sharpen their localization skills and improve their quality of life and safety. Some studies show that sound localization is better in blind people than subjects with normal vision and they use echolocation for navigation in the environment [31-33]. In addition, auditory sound localization training can improve spatial hearing and speech in noise perception in children with (central) auditory processing disorder ((C)APD). This plasticity again is seen not only in children but also in adults [20]. Spatial hearing in normal hearing infants develops gradually from birth [34].

Spatial Processing Disorder

Spatial processing disorder (SPD) is relatively young term. It refers to children who suffer from binaural processing of spatial cues, so they are not able to benefit from these important cues for separating target from competing signals. These children show listening difficulty in classrooms which are inherently noisy places. This disorder can easily affect their academic performance. It is mostly seen in children with history of recurrent otitis media [35-37]. SPD or any localization/lateralization disorder can be seen in children with (C)APD. It can happen isolated or with other auditory processing disorders. It is emphasized that children suspected to (C)APD should be assessed in regard to their spatial processing skills and if there is a SPD, a deficit-specific training is mandatory to address this deficit [20,35,36].

Spatial Hearing Assessment

There are two well-known questionnaires for assessing spatial hearing and its related disability and handicap: The Speech, Spatial and Qualities of Hearing Scale (SSQ) and The Spatial Hearing Questionnaire (SHQ). The SSQ is composed of three subscales including speech hearing, spatial hearing and other qualities such as segregation of sounds, recognition, clarity/naturalness, and listening effort. SHQ focuses only on spatial hearing, covering areas of speech perception in quiet conditions, speech perception in spatial hearing situations, and localization of a sound source. It does not include questions on the quality of the speech or music [38-40]. There is a formal spatial test called spatial word in noise test (Farsi). This test performed under headphone. Monosyllabic words are presented randomly in presence of white noise in 7 different locations: -90, -60, -30, 0, +30, +60 and +90 degree azimuth. Child has to repeat the word and point to the spatial location that he hears it [20]. One formal and advanced spatial test is listening in spatialized noise-sentence/universal (LiSN-S/U) which is available in English language. This sophisticated test can easily and precisely measure child's ability in using spatial cues for understanding target speech from competing ones [41,42].

Conclusion

Spatial hearing is one the most important auditory processing that affects speech understanding in noise. There is an absolute need for appropriate tests for its evaluation. This processing shows great plasticity by training.

References

1. Blauert J (1997) Spatial hearing. The psychophysics of human sound localization: MIT press.
2. Hawley ML, Litovsky RY, Culling JF (2004) The benefit of binaural hearing in a cocktail party: Effect of location and type of interferer. The Journal of the Acoustical Society of America 115(2): 833-843.
3. Caird D, Klinke R (1983) Processing of binaural stimuli by cat superior olivary complex neurons. Experimental Brain Research 52(3): 385-399.
4. Moore DR (1991) Anatomy and physiology of binaural hearing. Audiology 30(3): 125-134.
5. Fitzpatrick DC, Kuwada S, Batra R (2002) Transformations in processing interaural time differences between the superior olivary complex and inferior colliculus: beyond the Jeffress model. Hearing research 168(1-2): 79-89.
6. Tollin DJ, Yin TC (2005) Interaural phase and level difference sensitivity in low-frequency neurons in the lateral superior olive. Journal of Neuroscience 25(46): 10648-10657.
7. Weeks RA, Aziz Sultan A, Bushara KO, Tian B, Wessinger CM, et al. (1999) A PET study of human auditory spatial processing. Neuroscience letters 262(3): 155-158.
8. Zatorre RJ, Penhune VB (2001) Spatial localization after excision of human auditory cortex. Journal of Neuroscience 21(16): 6321-6328.
9. Ahveninen J, Jääskeläinen IP, Raij T, Bonmassar G, Devore S, et al. (2006) Task-modulated "what" and "where" pathways in human auditory cortex. Proceedings of the National Academy of Sciences. 103(39): 14608-14613.
10. Rauschecker JP, Tian B (2000) Mechanisms and streams for processing of "what" and "where" in auditory cortex. Proceedings of the National Academy of Sciences 97(22): 11800-11806.
11. Zatorre RJ, Bouffard M, Ahad P, Belin P (2002) Where is 'where' in the human auditory cortex? Nature neuroscience 5(9): 905-909.
12. Lister JJ, Roberts RA (2005) Effects of age and hearing loss on gap detection and the precedence effect: narrow-band stimuli. Journal of Speech, Language, and Hearing Research 48(2): 482-493.
13. Litovsky R, Hawley M, Fligor B, Zurek P (2000) Failure to unlearn the precedence effect. The Journal of the Acoustical Society of America 108(5): 2345-2352.
14. Roberts RA, Lister JJ (2004) Effects of age and hearing loss on gap detection and the precedence effect: broadband stimuli. Journal of Speech, Language, and Hearing Research 47(5): 965-978.
15. Palmer AR, Kuwada S (2005) Binaural and spatial coding in the inferior colliculus. The inferior colliculus: Springer, pp. 377-410.
16. Geronazzo M, Spagnol S, Avanzini F (2018) Do we need individual head-related transfer functions for vertical localization? The case study of a spectral notch distance metric. IEEE/ACM Transactions on Audio, Speech and Language Processing (TASLP) 26(7): 1243-1256.
17. Jiang J, Xie B, Mai H, Liu L, Yi K, et al. (2018) The Effects of Dynamic Cue and Spectral Cue on Auditory Vertical Localization. Audio Engineering Society Conference: 2018 AES International Conference on Spatial Reproduction-Aesthetics and Science Audio Engineering Society.
18. Trussell LO, Oertel D (2018) Microcircuits of the Dorsal Cochlear Nucleus. The Mammalian Auditory Pathways: Springer, pp. 73-99.

19. Choi JE, Moon IJ, Kim EY, Park HS, Kim BK, et al. (2017) Sound localization and speech perception in noise of pediatric cochlear implant recipients: Bimodal fitting versus bilateral cochlear implants. *Ear and hearing* 38(4): 426-440.
20. Lotfi Y, Moosavi A, Abdollahi FZ, Bakhshi E, Sadjedi H (2016) Effects of an auditory lateralization training in children suspected to central auditory processing disorder. *Journal of audiology & otology* 20(2): 102.
21. Reeder RM, Cadieux J, Firszt JB (2015) Quantification of speech-in-noise and sound localisation abilities in children with unilateral hearing loss and comparison to normal hearing peers. *Audiology and Neurotology* 20(Suppl 1): 31-37.
22. Lo CY, Dillon H, Cameron S, McMahon C (2015) Evaluation of headphone effects on performance in the LiSN & Learn auditory training software.
23. Dorman MF, Loiselle LH, Cook SJ, Yost WA, Gifford RH (2016) Sound source localization by normal-hearing listeners, hearing-impaired listeners and cochlear implant listeners. *Audiology and Neurotology* 21(3): 127-131.
24. Gifford RH, Grantham DW, Sheffield SW, Davis TJ, Dwyer R, et al. (2014) Localization and interaural time difference (ITD) thresholds for cochlear implant recipients with preserved acoustic hearing in the implanted ear. *Hearing research* 312: 28-37.
25. Raj P, Saini S, Mishra A (2017) Sound localization performance in children with cochlear implants using bimodal stimulation. *Indian Journal of Otology* 23(1): 27-31.
26. Hu H, Kollmeier B, Dietz M (2016) Suitability of the Binaural Interaction Component for Interaural Electrode Pairing of Bilateral Cochlear Implants. *Physiology, Psychoacoustics and Cognition in Normal and Impaired Hearing: Springer* 894: 57-64.
27. Van Yper LN, Vermeire K, De Vel EF, Battmer RD, Dhooge IJ (2015) Binaural interaction in the auditory brainstem response: A normative study. *Clinical Neurophysiology* 126(4): 772-779.
28. Keating P, Dahmen JC, King AJ (2015) Complementary adaptive processes contribute to the developmental plasticity of spatial hearing. *Nature neuroscience* 18(2): 185-187.
29. Keating P, King AJ (2015) Sound localization in a changing world. *Current opinion in neurobiology* 35: 35-43.
30. Lohse M, Bajo VM, King AJ (2018) Development, organization and plasticity of auditory circuits: Lessons from a cherished colleague. *European Journal of Neuroscience*.
31. Finocchietti S, Cappagli G, Gori M (2017) Auditory spatial recalibration in congenital blind individuals. *Frontiers in neuroscience* 11: 76.
32. Vercillo T, Milne JL, Gori M, Goodale MA (2015) Enhanced auditory spatial localization in blind echolocators. *Neuropsychologia* 67: 35-40.
33. Voss P, Tabry V, Zatorre RJ (2015) Trade-off in the sound localization abilities of early blind individuals between the horizontal and vertical planes. *Journal of Neuroscience* 35(15): 6051-6056.
34. Litovsky R (2015) Development of the auditory system. *Handbook of clinical neurology*. 129: pp. 55-72.
35. Cameron S, Dillon H (2014) Remediation of spatial processing issues in central auditory processing disorder. *Handbook of Central Auditory Processing Disorder Comprehensive Intervention* San Diego, CA: Plural Publishing, pp. 201-224.
36. Cameron S, Dillon H, Glyde H, Kanthan S, Kania A (2014) Prevalence and remediation of spatial processing disorder (SPD) in Indigenous children in regional Australia. *International journal of audiology* 53(5): 326-335.
37. Graydon K, Van Dun B, Tomlin D, Dowell R, Rance G (2018) Remediation of spatial processing disorder (SPD). *International journal of audiology* 57(5): 376-384.
38. Delphi M, Abdolahi FZ, Tyler R, Bakhit M, Saki N, et al. (2015) Validity and reliability of the Persian version of spatial hearing questionnaire. *Medical journal of the Islamic Republic of Iran* 29: 231.
39. Ou H, Perreau A, Tyler RS (2017) Development of a Shortened Version of the Spatial Hearing Questionnaire (SHQ-S) for Screening Spatial-Hearing Ability. *American journal of audiology* 26(3): 293-300.
40. Zhang J, Tyler R, Ji H, Dunn C, Wang N, et al. (2015) Speech, Spatial and Qualities of Hearing Scale (SSQ) and Spatial Hearing Questionnaire (SHQ) changes over time in adults with simultaneous cochlear implants. *American journal of audiology* 24(3): 384-397.
41. Besser J, Festen JM, Goverts ST, Kramer SE, Pichora Fuller MK (2015) Speech-in-speech listening on the LiSN-S test by older adults with good audiograms depends on cognition and hearing acuity at high frequencies. *Ear and hearing* 36(1): 24-41.
42. Cameron S, Dillon H, Chong White N, Mealings K, Young T (2018) Listening in spatialized noise-universal test (LiSN-U).



This work is licensed under Creative Commons Attribution 4.0 License
DOI: [10.19080/GJO.2018.17.555960](https://doi.org/10.19080/GJO.2018.17.555960)

Your next submission with Juniper Publishers will reach you the below assets

- Quality Editorial service
- Swift Peer Review
- Reprints availability
- E-prints Service
- Manuscript Podcast for convenient understanding
- Global attainment for your research
- Manuscript accessibility in different formats
(Pdf, E-pub, Full Text, Audio)
- Unceasing customer service

Track the below URL for one-step submission
<https://juniperpublishers.com/online-submission.php>