

Sensory neural prostheses and brain plasticity

James B. Fallon 1,2, Dexter R. F. Irvine 1, and Robert K. Shepherd 1,2

1 The Bionic Ear Institute, Australia.

2 Department of Otolaryngology, University of Melbourne, Australia.

Address: 384-388 Albert St, East Melbourne, Vic, 3002.

Email: jfallon@bionicear.org

Phone: +61 3 9929 8397

Fax: +61 3 9667 7518

Introduction: The clinical performance of cochlear implant recipients improves over the post-implantation period, and it is increasingly apparent that the plastic response of the auditory pathway with implant use is an important factor in this improvement.

Methods: We assessed the plastic response of the primary auditory cortex (AI) to neonatal deafening with or without chronic cochlear implant use in seventeen cats. A combination of single tungsten and multi-channel silicon electrode arrays were used to record from 812 multi-unit clusters in AI.

Results: Long-term deafness had little effect on the basic response properties of AI neurons, but resulted in complete loss of the normal cochleotopic organization of AI and a greater spread of cortical activation at supra-threshold levels (Two-Way ANOVA; Bonferroni post-hoc; $p < 0.001$). Chronic implant use resulted in a cochlea-to-cortex mapping that was comparable to that seen in normal hearing controls, but with a greater spread of activation ($p < 0.001$).

Conclusions: We hypothesize that maintenance or re-establishment of a cochleotopically organized AI, resulting from chronic implant use, contributes to the improved clinical performance observed in human patients implanted at a young age. Furthermore, the plastic response of the brain – highlighted in the present study - has consequences for all neural prostheses.

Support provided by the NIDCD (HHS-N-263-2007-00053-C), The Bionic Ear Institute and the Victorian State Government.

Word Count (max 250) = 218