**Title**: Detecting and Disambiguating “Hidden” Cochlear Pathologies

**Data Description:** Some types of damage to the cochlea are not detected by standard, clinical hearing tests. In this study, I investigate two such “hidden” pathologies, inner hair cell (IHC) damage and cochlear synaptopathy (CS), which can masquerade as clinically normal hearing despite potentially having detrimental effects on suprathreshold listening and speech perception. This dataset aims to identify whether other biomarkers of auditory function are more sensitive to these two pathologies than the traditional hearing test, and if any of these biomarkers differentiate between IHC damage and CS.

16 chinchillas (Trevino et al., 2019) were randomly assigned to one of two exposure groups, maintaining an equal number of male and female chinchillas in each group. One group was exposed to a 1000 Hz octave-band noise for 2 hours to induce cochlear synaptopathy (Kujawa & Liberman, 2009). This group is labeled TTS because the noise exposure causes a temporary threshold shift (TTS) that recovers after two weeks. The other group was administered 38 mg/kg i.p. Carboplatin (CA) to induce mild (~15%) selective inner-hair-cell loss and significant stereocilia dysfunction in the surviving inner hair cells (Lobarinas et al., 2013). All data was collected at Purdue University as part of my thesis project. Both before and 2 weeks after the exposure, hearing was evaluated using 4 different biomarkers:

1. Auditory Brainstem Response (ABR) Thresholds: tone bursts at different frequencies elicit an electrical response which is measured from subdermal needle electrodes. The lowest sound level which elicits a repeatable response is deemed to be the hearing threshold. Thresholds were measured at 500, 1000, 2000, 4000, and 8000 Hz. This is the gold standard for clinically assessment of hearing loss.
2. Envelope Following Response (EFR): the electrophysiological response to a rectangular amplitude modulated (RAM) tone was recorded. The EFR amplitude was calculated as the sum of the first four harmonics of the modulation frequency (Vasilkov et al, 2019).
3. Middle Ear Muscle Reflex (MEMR) Threshold: The lowest noise level that elicited a contraction of the middle ear muscle was recorded (Mepani et al., 2020).
4. Distortion Product Otoacoustic Emissions (DPOAEs): DPOAEs were measured from 500-16000 Hz and reported as the weighted average at 9 discrete half-octave frequency bands from 750-12000 Hz (Abdala et al, 2018).

**Aims of the experiments**: The primary goal of this study is to investigate biomarkers for two different inner ear pathologies typically hidden from standard hearing testing. I will use this dataset to answer the following questions:

1. Are any of the biomarkers (ABR, EFR, MEMR, DPOAE) sensitive to inner hair cell damage or cochlear synaptopathy? i.e., are pre-exposure responses different from post-exposure responses for these measures?
2. Does IHC damage affect the biomarkers differently than CS? i.e., are post-exposure responses for the two groups different across any of the individual biomarkers?
3. Can integration of results across biomarkers better differentiate the groups than a single biomarker alone?

**Hypotheses:** Following the above aims, I hypothesize that:

1. ABR and DPOAEs will not be different before and after exposure since they are primarily driven by outer hair cell function rather than inner hair cell function. EFR amplitudes and MEMR thresholds will both be significantly worse in the post-exposure condition compared to the pre-exposure condition.
2. While both CS and IHC dysfunction will both reduce EFR amplitudes, MEMR thresholds will be reduced more in the CS group than the IHC group.
3. Integration across all biomarkers will differentiate between the IHC dysfunction and CS groups better than any individual metric.

**Proposed methods**: I have the full dataset organized into a single CSV that will need to be modified into relational data tables (each measure and subject information) to analyze and plot the data. I will need to compare the outcomes of a few different measures, so I plan to use tidyverse, ggplot2, and tidymodels. I will have some boxplots and some line graphs depending on the type of measure (see below). I will be using linear models and ANOVA to analyze this data for differences between the exposure groups and pre/post conditions. I hope to include some machine learning models for classification that we’ll talk about later in the course.

**Simple summary stats of the data:**

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| **FIGURE 1**  Average hearing thresholds for the two groups before (black) and after (red) exposure. One animal showed a significant elevation in thresholds after the CA exposure and one animal in the TTS group has elevated thresholds at baseline. | **FIGURE 2**  Average EFR amplitudes for the two groups before (black) and after (red) exposure. In general, both CA and TTS groups seems to show a reduction in EFR amplitudes after exposure, though it may be worse in the CA group than the TTS group. |
| A graph of different types of lines  Description automatically generated with medium confidence | **A graph with red and black squares  Description automatically generated** |

**GitHub Repository:** All code for this project (including the demo figures above) can be found at this link: <https://github.com/hausersn1/DS4B695_FinalProject>

**References**

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