



SPATIAL DISORIENTATION



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OBJECTIVES

- DEFINITION
- CAUSES
- SENSES OF ORIENTATION AND HOW THEY ARE AFFECTED
- TYPES OF SDO
- VESTIBULAR ILLUSIONS
- PREVENTION AND RECOVERY





DEFINITION

Spatial disorientation is a term used to describe a variety of incidents occurring in flight where the pilot fails to sense the position, motion or attitude of his aircraft or himself relative to the earth.

A state characterized by a pilot's erroneous perception of the magnitude of an aircraft control or performance parameter

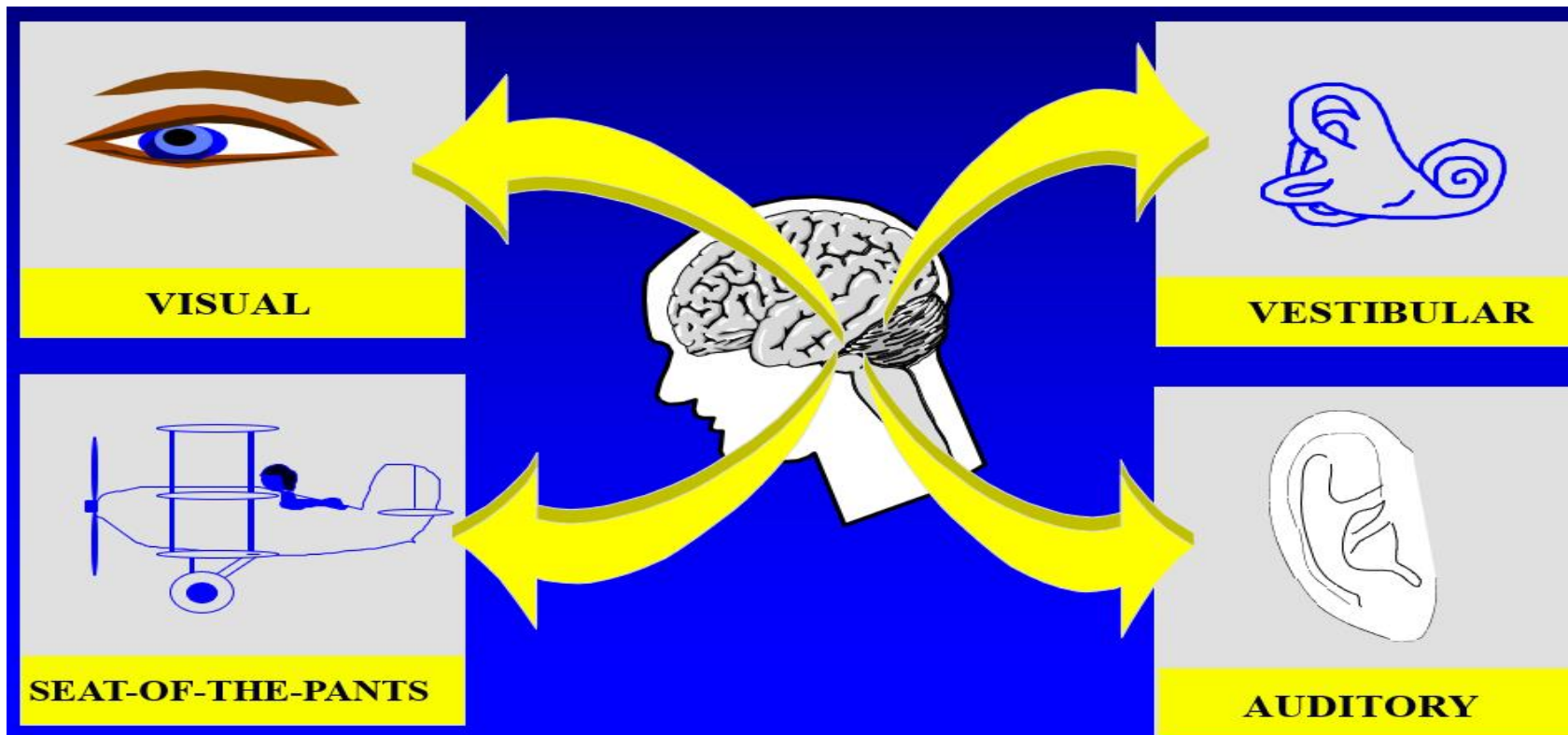




CAUSES OF SPATIAL DISORIENTATION

- LACK OF VISUAL CUES, CLOUD FLYING ETC.
- NIGHT FLYING.
- INATTENTION.
- INEXPERIENCE.
- HYPOXIA, COLD, ALCOHOL AND DRUG.
- VIOLENT MANEUVERS.
- UNNECESSARY HEAD MOVEMENT
- FATIGUE.
- ANXIETY, PREOCCUPATION AND EMOTIONAL STRESSES.
- GLARE AND DAZZLE.
- INADEQUATE CUES FROM VESTIBULAR AND OTHER MECHANORECEPTOR.
- DISEASES AFFECTING VESTIBULAR SYSTEM.

WHAT SENSES ARE USED DURING FLIGHT?



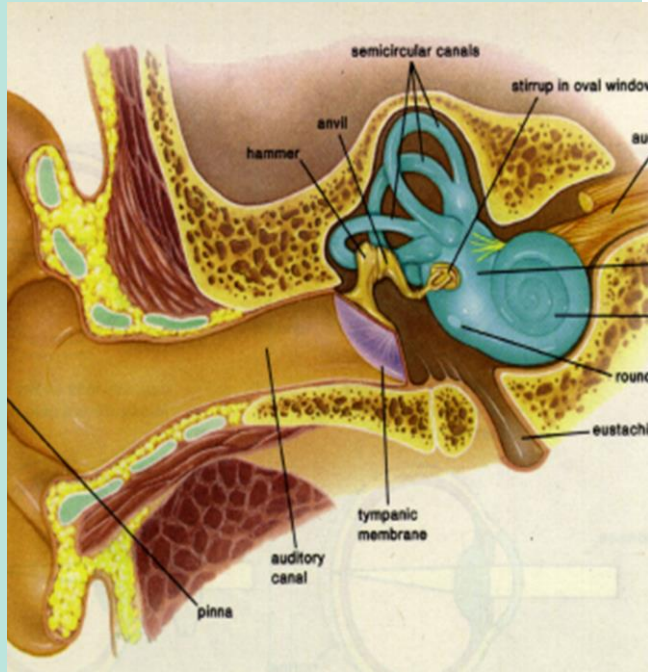


VISION

- THE MOST IMPORTANT SENSE FOR ORIENTATION
- MOTION, OBJECTS, REFERENCES, FLIGHT INSTRUMENTS



VESTIBULAR APPARATUS

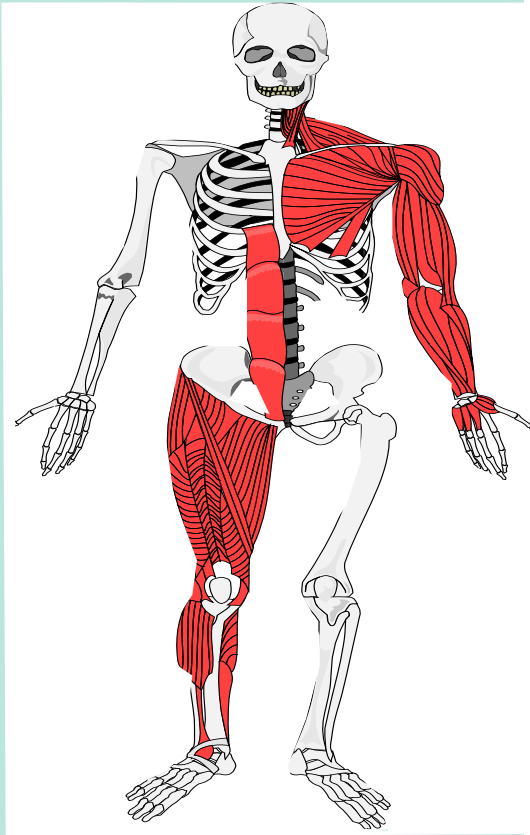


SEMICIRCULAR CANALS

- MONITORS ANGULAR ACCELERATIONS
- THREE LOCATED IN EACH EAR - YAW, PITCH & ROLL AXIS
- LOCATED IN THE BONY LABYRINTH

OTOLITH ORGANS

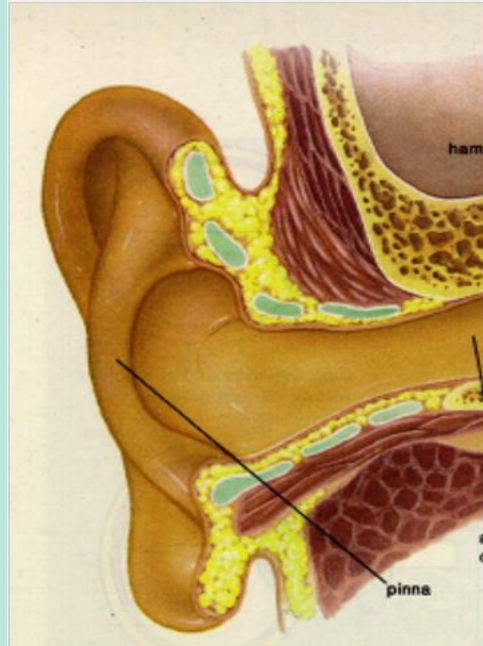
- MONITOR LINEAR ACCELERATIONS AND GRAVITY
- ALSO LOCATED IN THE BONY LABYRINTH
- CONTAIN SMALL SENSORY HAIRS WHICH PROJECT INTO A THIN MEMBRANE



PROPRIOCEPTIVE INPUT: SEAT OF THE PANTS

- STRETCH RECEPTORS
- MUSCULOTENDINOUS TENSION
- PRESSURE
- JOINT ANGULAR MOTION
- INPUT FROM BODY'S PRESSURE RECEPTORS
- MONITOR LINEAR ACCELERATION

AUDITORY CUES



- ENGINE NOISE
- CONFIGURATION CHANGES
- SLIPSTREAM NOISE
- AFFECTS SITUATIONAL AWARENESS

TYPES OF SPATIAL DISORIENTATION



- **TYPE-I:** THIS IS UNRECOGNIZED SD. HERE PILOT GET DISORIENTED, BUT DOES NOT RECOGNIZE IT AS SUCH LEADING TO WRONG DECISION AND ACCIDENT
- **TYPE-II:** RECOGNIZED SD. HERE PILOT KNOWS THAT HE IS DISORIENTED AND TAKES CORRECTIVE ACTION.
- **TYPE-III:** IS CALLED RECOGNIZED BUT INCAPACITATED TO TAKE ANY CORRECTIVE ACTION. INCAPACITATION MAY BE PSYCHOLOGICAL, PHYSIOLOGICAL OR PHYSICAL IN NATURE.

UNRECOGNIZED

- OCCURS WHEN A PILOT IS UNAWARE, THEY ARE EXPERIENCING DISORIENTATION DUE TO A MISMATCH BETWEEN THEIR VISUAL, VESTIBULAR (INNER EAR), AND PROPRIOCEPTIVE (BODY POSITION) SENSORY INPUTS
- OFTEN CAUSED BY FACTORS LIKE POOR VISIBILITY, RAPID MOVEMENTS, OR ILLUSIONS IN SPECIFIC SITUATIONS
- OCCURS WHEN PILOT IS BUSY, PRESSED, STRESSED, PREOCCUPIED, OR DISTRACTED





RECOGNIZED

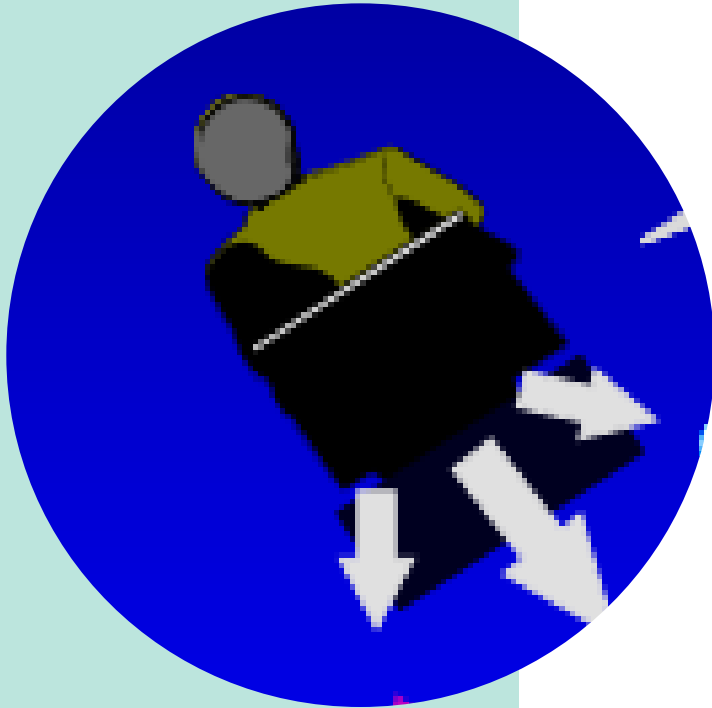
- OCCURS FREQUENTLY, BUT IS USUALLY BRIEF
- SENSORY CONFLICT IS RESOLVED BY PERFORMING AN INSTRUMENT CROSS-CHECK AND BELIEVING THE INSTRUMENTS

INCAPACITATING



- SIGNIFICANT DISORIENTATION (SEVERE)
- THINKING PROCESS BREAKS DOWN, RATIONAL THOUGHT PROCESSES CEASE, AIRCREW MAY FREEZE OR PANIC
- NYSTAGMUS
- VERTIGO

— VESTIBULAR ILLUSIONS



THE LEANS

- MOST COMMON SENSORY ILLUSION
- AFTER A SLOW OR PROLONGED ROLL
- ROLL OUT PERCEIVED AS ROLL IN OPPOSITE DIRECTION
- CORRECTION INTO THE ORIGINAL TURN
- **FIX IT:** TRUST YOUR INSTRUMENTS, NOT YOUR BODY

— VESTIBULAR ILLUSIONS

SOMATOGYRAL ILLUSIONS

GRAVEYARD SPIN AND SPIRAL

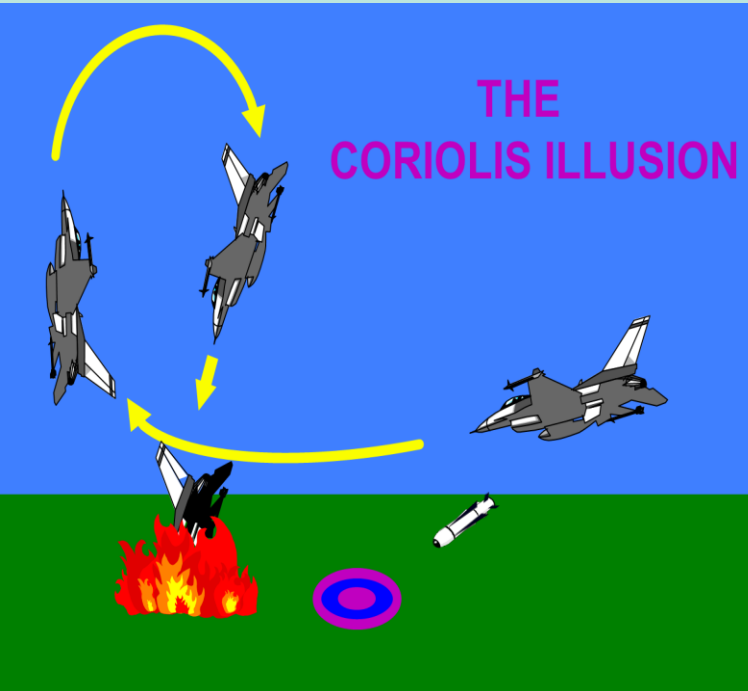
- THIS HAPPENS WHEN YOU FALL FOR THE LEANS
- SPIN OR SPIRAL GREATER THAN 20 SECONDS
- **FIX IT:** WATCH YOUR INSTRUMENTS TO STOP THE SPIRAL



VESTIBULAR ILLUSIONS

SOMATOGYRAL CORIOLIS ILLUSION

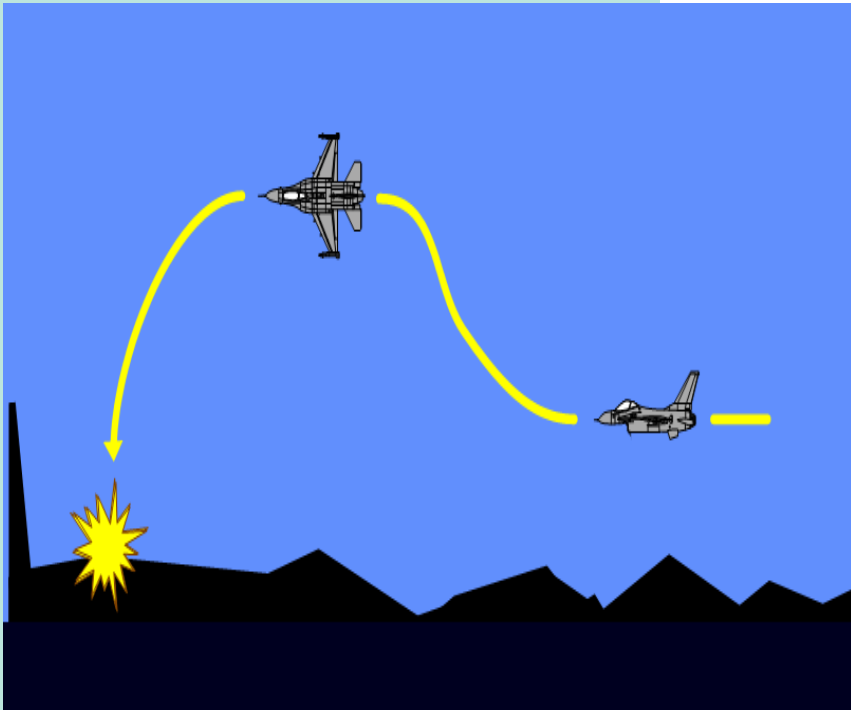
- MOST DANGEROUS OF VESTIBULAR ILLUSIONS
- OVERWHELMING DISORIENTATION
- OCCURS DURING CONSTANT TURN AND QUICK HEAD MOVEMENT
- GIVES ILLUSION OF A ROTATION PLANE MOVEMENT WHEN IT DOES NOT EXIST
- PREVENTION IS THE BEST: NO SUDDEN HEAD MOVEMENTS DURING TURNS



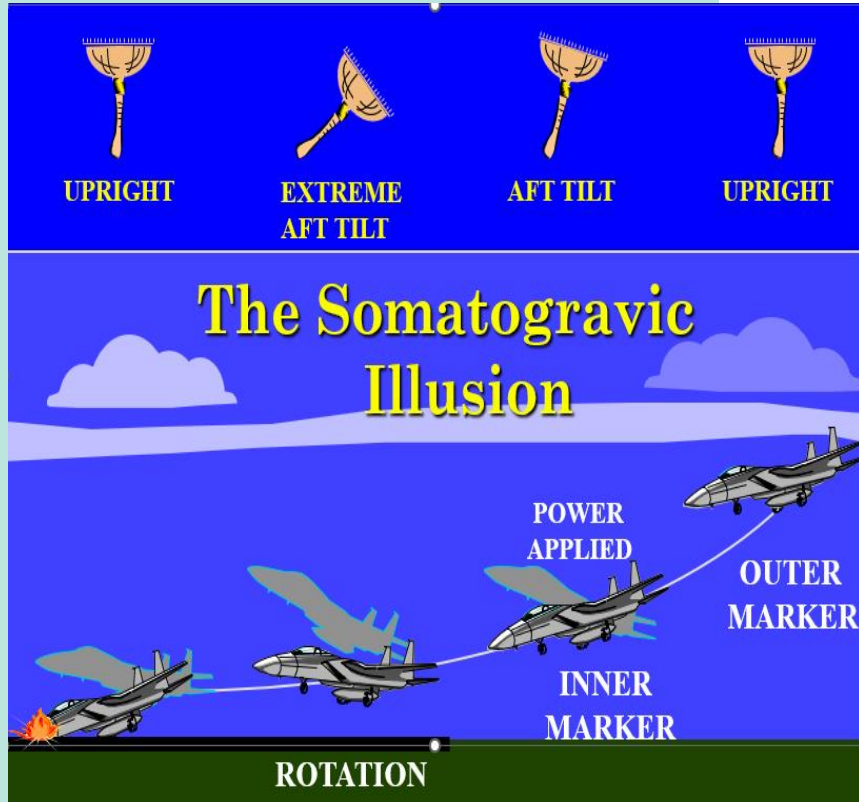
VESTIBULAR ILLUSIONS

GIANT HAND PHENOMENON

- OCCURS AFTER A STEEP BANKED TURN OR CORIOLIS ILLUSION
- AIRCRAFT IS IN SOME ATTITUDE OTHER THAN PLANNED
- ATTEMPTS TO CORRECT DON'T WORK BECAUSE HAND IS SUBCONSCIOUSLY MAKING THE INPUTS
- USUALLY OCCURS DURING INSTRUMENT CONDITIONS



VESTIBULAR ILLUSIONS



SOMATOGRAVIC ILLUSION

- FALSE SENSATION OF NOSE-HIGH PITCH ATTITUDE
- OCCURS DURING TAKE-OFFS OR MISSED APPROACHES WITHOUT EXTERNAL VISUAL REFERENCE

AERIAL PERCEPTION ILLUSIONS

RUNWAY WIDTH ILLUSION

WIDE RUNWAY: FEELS LOWER THAN YOU ARE, CAUSING YOU TO PITCH UP AND RISK STALLING

NARROW RUNWAY: FEELS HIGHER THAN YOU ARE, LEADING TO A STEEP DESCENT AND FASTER LANDING

SLOPING RUNWAY ILLUSION

UPSLOPING RUNWAY: FEELS HIGH, CAUSING A LOW APPROACH AND RISK OF TERRAIN COLLISION.

DOWN SLOPING RUNWAY: FEELS LOW, LEADING TO A HIGH APPROACH AND POSSIBLE MISSED LANDING OR STALL.



AERIAL PERCEPTION ILLUSIONS

SLOPING TERRAIN ILLUSION

- **UPSLOPING TERRAIN:** FEELS HIGH, RISKING A SHORT LANDING OR EARLY FLARE.
- **DOWN SLOPING TERRAIN:** FEELS LOW, CAUSING YOU TO OVERSHOOT THE LANDING SPOT.

BLACK-HOLE APPROACH

- AT NIGHT, A WELL-LIT RUNWAY SURROUNDED BY DARKNESS CAN FEEL HIGHER THAN IT IS, LEADING TO A DANGEROUSLY LOW APPROACH.



OTHER ILLUSIONS

AUTOKINETIC ILLUSION

- STARING AT A STATIONARY LIGHT IN THE DARK CAN MAKE IT SEEM LIKE THE LIGHT IS MOVING.
- **FIX IT:** DON'T FIXATE ON ONE LIGHT—KEEP SCANNING.

FALSE HORIZON ILLUSION

- IN LOW VISIBILITY, YOU MIGHT ALIGN WITH A FALSE HORIZON, LIKE CITY LIGHTS OR BANKED CLOUDS, CAUSING ALTITUDE LOSS OR A STALL.
- **FIX IT:** TRUST YOUR INSTRUMENTS, ESPECIALLY OVER FEATURELESS TERRAIN OR AT NIGHT.





HOW TO AVOID THESE ILLUSIONS

- USE VISUAL AIDS LIKE VASIS AND PAPIIS TO GUIDE YOUR APPROACH.
- CROSS-CHECK YOUR INSTRUMENTS TO STAY ON A STABLE PATH.
- STUDY RUNWAY AND TERRAIN DETAILS DURING FLIGHT PLANNING



Trust Instruments

Practice scanning and rely on instruments, not senses.



Train for Illusions

Use VR or training exercises to recognize illusions safely.



Plan Ahead

Know terrain, airport layouts, and weather risks.



Avoid Risks

Don't fly in worsening weather conditions.

PREVENTION OF SD



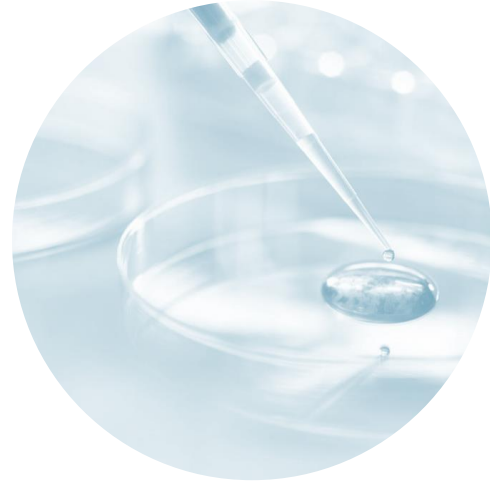
- TRAINING AND PROFESSIONAL KNOWLEDGE OF PROBLEMS
- EXPERIENCE
- OBTAINED RELIABLE VISUAL REFERENCES
- MINIMIZED HEAD MOVEMENTS
- FLY STRAIGHT AND LEVEL
- PROPER MISSION PREPARATION
- COMMUNICATE YOUR PROBLEM
- SIT-DOWN AND HOLD-ON



WHEN SPATIAL DISORIENTATION STRIKES:

- MAKE A POSITIVE EFFORT TO REDIRECT TO INSTRUMENT.
- BELIEVE IN YOUR INSTRUMENTS.
- DO NOT TRY TO ANALYZE THE SITUATION, THIS WASTES VALUABLE TIME, TRY TO MAKE YOUR INSTRUMENT READ RIGHT.
- MAINTAIN INSTRUMENT SCAN PATTERN.
- DO NOT ATTEMPT TO MIX INSTRUMENT FLYING AND FLYING BY VISUAL REFERENCE ONLY.
- HAND OVER CONTROL TO CO-PILOT IF AVAILABLE.
- TALK. TELL SOMEONE THAT YOU ARE DISORIENTED.
- ENGAGE AUTOPILOT.





THANK YOU

