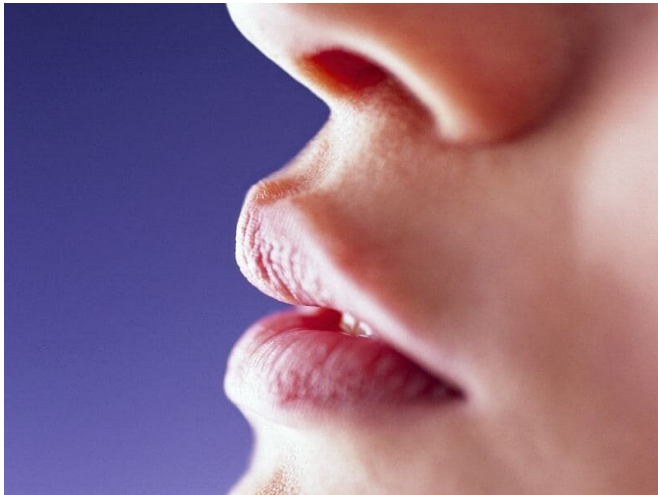


Taste, smell dysfunction with COVID-19 can be severe

22 June 2020



percent). Compared with [male patients](#), [female patients](#) were more likely to have a severe reduction of taste and smell (odds ratios, 3.16 [95 percent confidence interval (CI), 1.76 to 5.67] and 2.58 [95 percent CI, 1.43 to 4.65], respectively). There was no significant association noted between smoking and a severe reduction of taste (odds ratio, 0.95; 95 percent CI, 0.53 to 1.71) or smell (odds ratio, 0.65; 95 percent CI, 0.35 to 1.21).

"The [general practitioner](#) may play a pivotal role in identifying potential COVID-19 in [patients](#) at an early stage if taste and/or smell alterations manifest and in suggesting quarantine before confirmation or exclusion of the diagnosis," the authors write.

More information: [Abstract/Full Text](#)

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(HealthDay)—COVID-19 should be suspected when patients present with a severe reduction of taste and smell in the absence of severe nasal obstruction, according to a study published online June 18 in *JAMA Otolaryngology-Head & Neck Surgery*.

Giuseppe Mercante, M.D., from Humanitas University in Milan, and colleagues retrospectively surveyed 204 patients diagnosed with COVID-19 (March 5 to March 23, 2020; 53.9 percent male; mean age, 52.6 years), who were hospitalized or discharged from a single referral center.

The researchers found that 56.9 percent of patients had a reduction of taste and smell, 55.4 percent had taste reduction, and 41.7 percent had smell reduction. Four in 10 patients reported both. More than one-third had a severe reduction of taste (39.7 percent) or smell (35.3 percent). Severe nasal obstruction was present in a smaller percentage of patients with severe taste reduction (14.8 percent) or severe smell reduction (16.7

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