ABSTRACT

Objectives
To describe the clinical characteristics of postviral anosmia, comparing to anosmia related to chronic rhinosinusitis (CRS).
To analyze its response to corticosteroids treatment.

Methods
A retrospective study was performed on 66 patients with olfactory loss. Olfactory function was assessed at baseline using the Connecticut Chemosensory Clinical Research Center test. Clinical records were reviewed to discharge CRS, post-traumatic and other certain etiologies. CT and MRI imaging were reviewed. Topical, oral corticosteroid or both were used on postviral cases during at least 6 months. Results were evaluated after 6 and 12 months of followup.

Results
The mean age at the moment of the diagnosis was 53.8 (standard deviation 12.92). There were 74.2% females (49/66) and 25.8% males. The most frequent etiology was postviral anosmia, 51.5% of cases (34/66). At the time of diagnosis, the mean of the combined olfactometry in postviral anosmia (threshold test + identification test / 2) was 2.1 (standard deviation 1.7), without differences between corticosteroid treatment and therapeutic abstention.

After 12 months, the mean was 4.1 (standard deviation 1.7), a significant improvement comparing to idiopathic anosmia. In this group the improvement in combined olfactometry was 0.4.

METHODS AND MATERIALS

Retrospective study was performed on 66 patients with olfactory loss.

Olfactory function was assessed at baseline using the Connecticut Chemosensory Clinical Research Center test.

Clinical records were reviewed to discharge CRS, post-traumatic and other certain etiologies.

CT and MRI imaging were reviewed.

Topical, oral corticosteroid or both were used on a half of postviral cases during at least 6 months.

Results were evaluated after 6 and 12 months of followup.

INTRODUCTION

Smell disorders, produces important quality life detriment.

Our goal was to describe the clinical characteristics of postviral anosmia, comparing to anosmia no related to chronic rhinosinusitis (CRS) to analyze its response to corticosteroids treatment.

RESULTS

The mean age at the moment of the diagnosis was 53.8 (standard deviation 12.92). There were 74.2% females (49/66) and 25.8% males. The most frequent etiology was postviral anosmia, 51.5% of cases (34/66).

At the time of diagnosis, the mean of the combined olfactometry in postviral anosmia (threshold test + identification test / 2) was 2.1 (standard deviation 1.7), without differences between corticosteroid treatment and therapeutic abstention.

After 12 months, the mean was 4.1 (standard deviation 1.7), a significant improvement comparing to idiopathic anosmia. In this group the improvement in combined olfactometry was 0.4.

DISCUSSION

The improvement in those patients with postviral anosmia was statistically significant compared with olfactory improvement in idiopathic anosmia.

No significant differences between the improvement obtained with topical corticosteroid therapy and/or oral were found.

CONCLUSIONS

Anosmia occurs most often in women. Viral infection is the most common etiology. Olfactory recovery is similar in patients who received corticosteroid therapy in relation to those patients whom treatment has not been established.

REFERENCES
