

# Isolated, sudden, recoverable olfactory dysfunction: a pathognomonic sign of COVID-19

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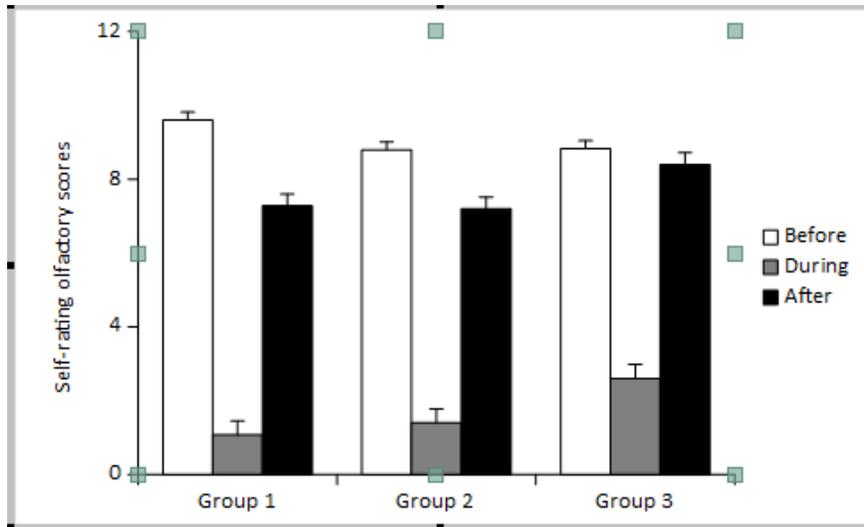
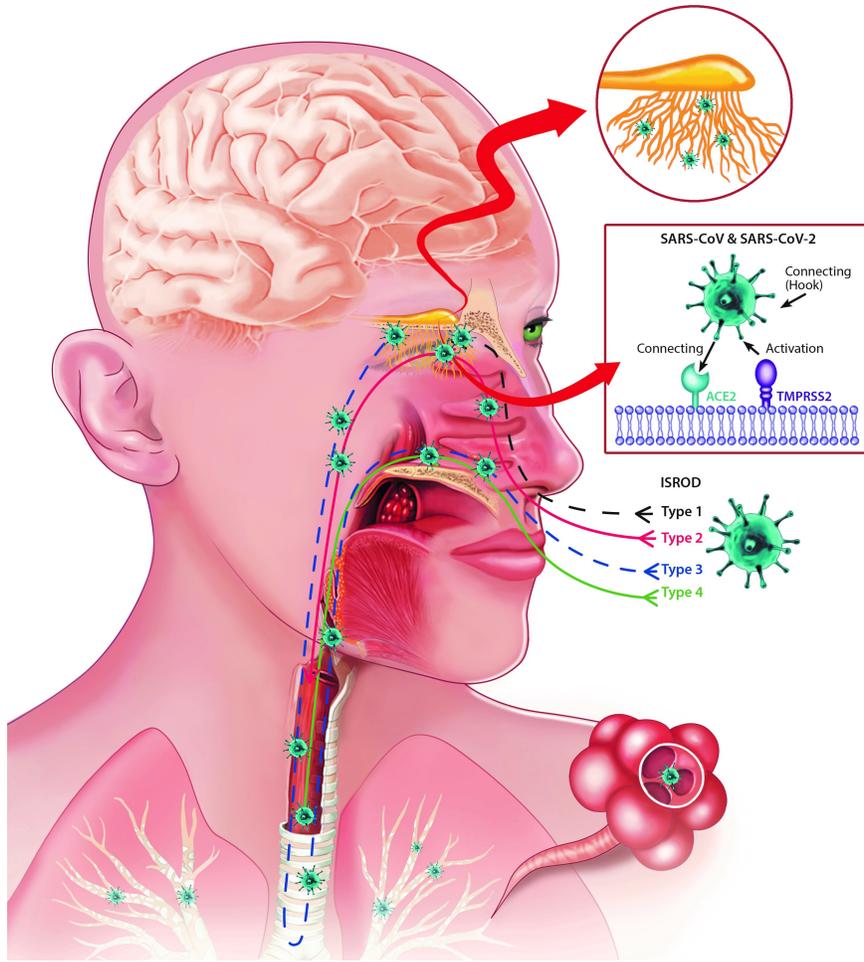
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## Abstract

**Objectives** This study aimed to define the clinical features of anosmia, a symptom observed in patients with coronavirus disease 2019 (COVID-19). **Methods** The presence of olfactory symptoms, such as loss of smell, in COVID-19 patients and their relationship with the disease process were evaluated. **Results** A total of 217 patients with COVID-19 were evaluated, of which 135 patients were interviewed via phone calls. The patients were divided into four subgroups: group 1 had only olfactory complaints (isolated, sudden-onset loss of smell); group 2 had isolated, sudden-onset loss of smell, followed by typical COVID-19 complaints; group 3 initially had typical COVID-19 complaints, but gradually developed olfactory complaints; and group 4 had no olfactory complaints. In total, 59.3% of the patients had olfactory complaints. In groups 1–3, the odor scores after the disease were significantly lower than those before the disease; this decrease was more evident in groups 1 and 2 than in group 3 ( $p = 0.003$ ,  $p = 0.000$ , and  $p = 0.014$ , respectively). Groups 1 and 2 had a greater loss of smell than group 3 ( $7.8 \pm 2.1$  in groups 1 and 2 vs.  $6.2 \pm 2.6$  in group 3;  $p = 0.01$ ). The odor scores completely returned to the pre-disease values in 51.2% of patients with olfactory dysfunction (41 patients); the mean duration of loss of smell was  $7.1 \pm 2.4$  days. **Conclusion** Timely detection of anosmia is important in patients with COVID-19 in order to help control the spread of this highly contagious disease.

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