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Title: Olfactory and Taste Dysfunction in Laryngectomy Patients: A Clinical Study

Body: Background

Patients undergoing laryngectomies can experience significant morbidities postoperatively. This can include olfactory and taste dysfunctions, believed to occur from both direct (olfactory bulb shrinkage from post-surgical anatomy) and indirect (adjuvant chemoradiation) processes. This can impose substantial quality of life burdens on top of additional challenges already associated with their postoperative care.

Methods

We conducted a single-centre retrospective cohort study of laryngectomy patients since 2015, using a survey questionnaire to characterise medical comorbidities, and severity and timeline of both olfactory and taste impairments.

Results

Of the 19 patients surveyed, 15 reported varying severities of olfactory dysfunction within the first 6 months. Almost all (18/19) reported immediate postoperative taste dysfunction. Both dysfunctions largely clinically improved 1 year postoperatively. Medical comorbidities- including presence of pre-existing sinus disease, preoperative cancer staging, or extent of surgical resection, did not reliably predict olfactory or taste dysfunction. Comparatively, there is a stronger predictor of adjuvant chemoradiation with (particularly immediate) onset of olfactory and taste dysfunction.

Conclusion

Most postoperative laryngectomy patients in an Irish setting can expect some degree of olfactory and taste dysfunction. Improvements to raise awareness about this often overlooked aspect of postoperative care can help optimis

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