

Ent Manifestaion During Corona Pandemic

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Abstract

In the current pandemic of COVID-19 we are having lots of difficulties day today life. The pandemic has also created impact on social life in day today activity. Similarly, it has impact on ENT fields as well. The aim of the current work was to detect and discuss the different otorhinolaryngology (ORL) manifestations those were reported in COVID-19 positive patients The patient who has been diagnosed to have covid-19 positive have exhibited different signs and symptoms across the globe. We are here to compare the signs and symptoms, assessment protocol and treatment option across different country. The following are the general signs and symptoms of patient who has been diagnosed to have covid-19. The COVID-19 is presented mainly by upper respiratory tract related symptoms such as fever, cough, dyspnea and chest tightness that could progress rapidly to acute respiratory distress syndrome (ARDS). However, COVID-19 causes also different upper respiratory tract related symptoms including nasal congestion, sore throat and smell dysfunction. El-Anwar et al (2020) found that non-ENT manifestation were the main and much more common than the ENT manifestations including fever (1303 patients, 73.5%), cough (1080 patients, 61%), expectoration (405 patients, 22.8%), dyspnea/shortness of breathing (288 patients, 16.2%), hemoptysis (10 patients, 0.6%), chest pain (2 patients, 0.1%), nausea/ vomiting (69 patients, 3.9%), constipation (2 patients, 0.1%), diarrhea (75 patients, 4.2%), malaise/ fatigue (484 patients, 27.2%), and myalgia/arthritis (185 patients, 10.4%). The most common ENT manifestations for COVID-19 were sore throat (11.3%) and headache (10.7%). It was found that the incidence of the ENT manifestation in COVID-19 patients is not as high as fever and cough. But it was reported that nasal congestion (4.1%) and pharyngeal erythema (5.3%) were reported to occur in nearly similar incidence to the occurrence of diarrhea in those patients (4.2%). Fever, fatigue and dry cough are the most common manifestations of COVID-19. Anorexia, dyspnea, sputum production, and myalgias are reported in more than 25% of cases. Sore throat, rhinorrhea, headaches, nausea, and diarrhea are less frequent and are mainly observed in mild or moderate forms of the disease. Cough, dyspnea, sore throat, rhinorrhea, nasal congestion, throat congestion, tonsils edema, enlarged cervical lymph nodes or dizziness are symptoms that otolaryngologist could encounter while examining patients with COVID-19. Guan W.J. et al (2020) Individuals with COVID-19 may experience sore throat or swelling of the pharyngeal lymphoid tissue, runny nose, nasal congestion or edema, sudden loss of smell that sometimes

accompanied by dysgeusia, cough that is mainly unproductive, dyspnea, hoarseness or cervical lymphadenopathy. McGrath B.A et al (2020) Laryngitis and laryngeal edema are other COVID-19-induced symptoms that ENT specialists and anesthesiologists must be aware of, especially while intubating and extubating tracheas of critically ill individuals. Among the Ent manifestations like loss of taste was one of diagnostic marker for the patient with covid-19 (mainly sweet and salt absence earlier than bitter and chili taste), the majority of patient got improving within 15 to 30 days after diagnostic of COVID-19. Runny nose, nasal blockage and loss of smell (reversible in most cases). The British Association of Otorhinolaryngology (ENT-UK) considers loss of sense of smell in their list of COVID-19's markers of infection. Throat pain, mouth ulcers, tonsils enlargement and enlargement neck lymph nodes were few other throat symptoms reported. El-Anwar et al (2020) concluded that the most common ENT manifestations of COVID-19 were sore throat (11.3%) and headache (10.7%). While the other reported ENT manifestations were pharyngeal erythema (5.3%), nasal congestion (4.1%), runny nose or rhinorrhea (2.1%), upper respiratory tract infection (URTI) (1.9%), and tonsil enlargement (1.3%). The following are the ear symptoms such as vertigo, imbalance, hearing loss both conductive hearing loss and sensorineural hearing loss after corona, sensation of ear fullness, ear pain (otalgia) are few among the symptoms report. Degen *et al* (2020) reported a previously well 60-year-old man with severe COVID-19 requiring ITU stay who developed right-sided deafness and left sensorineural hearing loss and received intratympanic steroids and a cochlear implant. Rhman *et al* (2020) reported an otherwise asymptomatic patient who presented to the clinic with sensorineural hearing loss and a SARS-CoV-2 positive swab and received intratympanic steroids which resulted in some improvement.

Few studies have been reported on hearing status and its difficulties among covid-19 patient and the following study will focus on hearing abilities of patient recovered covid-19. Our aim is to assess the hearing abilities of recovered with covid-19. Otorhinolaryngological manifestations are not rare symptoms of COVID-19, especially in mild or moderate form of the disease. The most common ENT dysfunctions observed in patients infected with SARS-CoV-2 are cough, mainly dry, sore throat and dyspnea. Rhinorrhea, nasal congestion and dizziness may also be present. The world is experiencing an unprecedented challenge during the COVID-19 pandemic. Lessons learned include the need to “flatten the curve” and prevent spread in the community; increased risks of transmission to otolaryngologists during the clinical examination and treatment. ENT manifestations for COVID-19 are not common as fever and cough. But a universal questionnaire using well-defined COVID-19 manifestations is needed to make the COVID-19 data precisely defined, complete and homogenous.

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