

SS1-7 Clinical Aspects of Taste Disorders — Assessment of Five Basic Taste Qualities —

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Taste disorders are frequently found in elderly people of fifties and sixties, and male/female ratio is 2/3. The disorders are classified by causes as follows:①drug-induced, ②due to systemic diseases(diabetes mellitus, renal dysfunction, liver dysfunction, iron deficiency anemia), ③post-influenza, ④due to oral infection, ⑤peripheral nerve disorder, ⑥Zinc deficiency, ⑦psychogenic, ⑧radiation induced and ⑨idiopathic. After taking of past history, especially on systemic diseases and influenza, and medication history, taste function is examined. Electrogustometry is done as a screening test. The filter paper disk method and a whole mouth gustatory test are applied to evaluate the quality of disturbed tastants. We additionally assess umami quality recently. Blood and urinary samples are examined hematologically and biochemically. Olfactory function is also examined. Drug induced dysgeusia is firstly tried by discontinuing, changing or eliminating the possible induced drugs. Ferruginous pills quickly recover hypogeusia due to iron deficiency anemia. Zinc supplement therapy is applied to the patients with zinc deficiency, renal dysfunction or idiopathic taste deficit. Nutritional advice to take zinc is essential.