

Smell disorders

Olfactory disorders are disorders of the n. olfactorius and olfactory pathways function.

Quantitative olfactory disorders

- In case of reduced sense of smell (hyposmia) or loss of sense of smell (anosmia), exclude diseases of the nasal cavity (chronic inflammation of the mucous membrane);
- **olfactory disorder after trauma** - contusion bulbus olfactorius, cranial base fracture at the level of the lamina cribiformis - weeks to months after the injury, most likely caused by cicatricial changes mening;
- **unilateral smell disorder** - in affections of the base of the frontal lobes - e.g. meningioma sulci olfactorii, aneurysm and. cerebri anterior ^[1];
- **hyperosmia** - increased perception.

Qualitative olfactory disturbances

- Qualitative olfactory disorders (**parosmia, dysosmia**) - in inflammation of the upper respiratory tract, in diabetes and Paget's disease;
- the nasal mucosa richly innervated from the n. V (irritating sensations), as free nerve endings (mediating pain) - hyposmia is usually caused by an affection of the nasal mucosa innervated by the n. V, aromatic sensations (soap, coffee) from irritants (vinegar, ammonia) will be distinguished by the *olfactory test* - if both are affected, this indicates an impairment of the nasal mucosa innervated by n. V;
- **olfactory hallucinations** - psychoses;
- **unciform crisis** - one form of epileptic aura, a seizure with hallucinations, induced from the area of the *uncus gyri hippocampi* by ^[1] irritation.

Links

References

1. SEIDL, Zdeněk – OBENBERGER, Jiří. *Neurologie pro studium i praxi*. 2. edition. Grada Publishing, 2004. ISBN 80-247-0623-7.

References

- AMBLER, Zdeněk. *NEUROLOGIE pro lékařské fakulty*. 2. edition. 2001. 399 pp. ISBN 80-246-0080-3.

Related Articles

- Olfactory Nerve
- Olfactory Track
- Facial nerve palsy
- Trigeminal neuralgia