



Post-Covid-19 persisting anosmia responding to auriculotherapy: a clinical observation in twelve cases

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Anosmia is among the symptoms of Covid-19 disease, without or with the complication of a respiratory distress syndrome. This symptom may remain after some or full recovery of the disease. In several cases of post-Covid anosmia this symptom fully disappeared after manual stimulation of auriculotherapy micro system reference points.

Key words:

Covid-19; anosmia, auriculotherapy, ear acupuncture

Case description

As a teacher in auriculotherapy the author was asked by students for any options to treat complications of Covid-19. One student who actually suffered from anosmia during more than six months after having had Covid-19 disease was particularly interested in therapeutic options to treat such anosmia. On theoretical grounds two ear acupuncture points (the master omega point and the olfactory system point) might be among the most appropriate options. These points could practically be detected in both her ears, not only by point pressure palpation, but as well with the combination of glass fibre pen detection with check for a vascular autonomous signal reaction (VAS). At her demand, both points at each auricle were stimulated by point pressure massage for 15 seconds: first point 2 (master omega) at each ear, next point 1 (olfactory system) at each ear. Previous to the check and the treatment she tested her olfactory function unsuccessfully by trying to smell and taste an apple. Immediately after the treatment she tested again. Instantaneously she could smell and taste the apple. At the next session of the course she reported that her olfactory function has remained normal. She also told that she applied this point pressure massage to a friend of hers, who likewise suffered for half a year from anosmia after previous Covid-19 disease, with the same immediate positive response to the auricular treatment. Since that experience the author reported the event at several occasions. At such occasions he has been asked several times by persons each suffering from post-Covid-19 anosmia for at least six months to check for and to treat appropriate auricle points. In each of the 12 cases the master omega and the olfactory system points were found. In each case these points were stimulated and each person experienced instantaneous and lasting recovery of the olfactory function.



Discussion

Covid-19 disease, also referred to as Coronavirus disease is an infectious disease caused by the SARS-CoV-2 virus.¹ Most people infected with this virus will experience no symptoms or just mild to moderate respiratory illness and recover without requiring special treatment. Some of them may fall seriously ill. Covid-19 disease predominantly affects the respiratory system, with symptoms such as cough, sneezing and dyspnoea. General symptoms such as fever and fatigue may be present in milder to severe cases. Extrapulmonary manifestations, such as renal, cardiac, hematologic, gastrointestinal, hepatobiliary, endocrinologic, cutaneous and neurologic manifestations, may occur. Among these neurologic manifestations of Covid-19 disease are anosmia, the loss of the ability to detect one or more smells, and ageusia, the loss of taste function. Among the possible routes by which SARS-CoV-2 can invade the central nervous system is transsynaptic transfer across infected neurons via the olfactory nerve.²

Post-Covid-19 anosmia is often transient but in certain cases persistent anosmia is present. In a multicentre study Lechien e.a. reported that olfactory dysfunction is more prevalent in mild forms of Covid-19 disease than in moderate to critical forms and that the olfactory dysfunction disappeared in 95% of patients regarding objective olfactory evaluations at 6 months.³ Taking the large number of SARS-CoV-2 infections worldwide into account, there will be a considerable number of ex Covid-19 disease patients suffering from persisting anosmia.

Impairment of olfactory function is known to affect the quality of life of those suffering from this symptom. Persons with olfactory dysfunction report decreased appetite and enjoyment of eating, challenges with maintaining personal hygiene and social relationships, fear of hazardous events or feeling less safe and depressive symptoms and loneliness.⁴

Auriculotherapy is a type of microsystem reflex zone therapy; when needles are applied to provide stimuli we speak of ear acupuncture. Among the stimuli applied in auriculotherapy are needling, application of semipermanent needles, point pressure massage, application of Vaccaria semen or magnetic ball press needle plasters, application of laser (405 nm, 780 nm and others), electrical stimulation and local cryo-application. Ear points of any clinical relevance can be detected with several techniques.⁵ Such points can be found with devices able to detect change in electrical resistance; the very same points appear to be painful to localized pressure. Experienced ear acupuncturists use specialized devices to elicit the vascular autonomous signal (VAS, originally described as reflexe auriculo-cardiaque)^{6, 7}, in order to find relevant ear points.

Somatotopic ear maps show ear points related to organs. Discussion of the background of such ear maps are beyond the scope of this publication. At Oleson's ear map the olfactory system finds its representation in the medial margin of the lobule near its insertion to the cheek⁸ (point nr. 1 in Figure 1). Slightly caudal, at the medial edge of the lobule a point named master omega (point nr. 2 in Figure 1) represents priming for ectodermal tissues, such as sensory and neuronal tissues, to react to auricular stimulation.

Auricle points are only detectable in case of any (at least functional) disturbance of some body part. There is a triangular relationship between some affected area at the body, the somatosensory cortex in the brain and the corresponding point at the auricle. Bossy described that the reticular formation in the brain stem is the linking factor.⁹ Alimi verified the triangular relationship between body part,



corresponding auricle point and somatosensory cortex by functional magnetic resonance imaging.¹⁰ Romoli e.a. provided preliminary evidence on the specificity of auricular acupoints.¹¹

With basic understanding of auriculotherapy the choice of search for the omega ectoderm and the olfactory system points makes sense in case of smelling disorders. It is not surprising that both points can be detected in patients with post-Covid-19 anosmia. In the case with such anosmia presented these points could be detected and subsequently be treated. The treatment resulted in instantaneous and permanent recovery form the anosmia.

The observation of such immediate and lasting recovery of olfactory function is very promising. Detection of both appropriate ear points in case of post-Covid-19 persisting anosmia and treatment by point pressure massage is very easy and can be done by any physician or therapist even in barefoot circumstances: if none of the devices shown in Figure 2 are at hand, a cotton swab, the rear end of a teaspoon, the button end of a ballpoint or a likewise (small tipped blunt) device can be used.

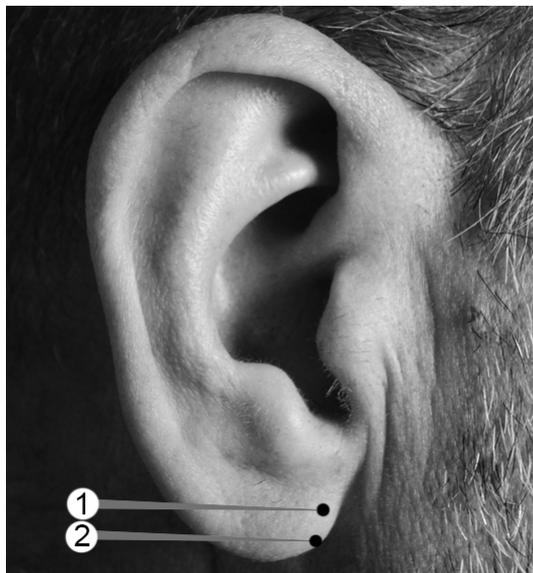


Figure 1
representation at the right auricle of the olfactory system (1) and ectodermal priming point master omega (2)



Figure 2
some auricle stimulating devices: auricle massage probe (above), glass rod (middle) and magnetic needle (bottom)

Conclusions

In case of post-Covid-19 anosmia the auricle points master omega and olfactory system can be detected and subsequently stimulated. This may result in instantaneous and lasting recovery of the olfactory function, as seen in the presented case. The technique can easily be performed by any health care professional in any professional or private setting, even without any experience in auricular medicine.

Further standardized study in groups of patients with post-Covid-19 persisting anosmia and follow up are required to assess the value of the intervention described as well as to assess whether the recovery of the olfactory function is temporary, lasting or permanent.



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Peer review

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