

**Reabilitação
Fonoaudiológica
Pós COVID- 19**

Prof^a Viviane Marques

**Neurofisiologista, Mestre em Fonoaudiologia,
Doutoranda em Psicanálise e Saúde**

www.fonovim.com.br

Fonovim
Fonoaudiologia Neurológica

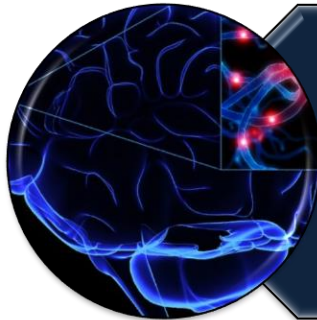


A COVID-19 embora seja principalmente uma doença do trato respiratório, é uma doença infecciosa que pode ter associação causal com uma infinidade de efeitos neurológicos, neuropsiquiátricos e psicológicos.

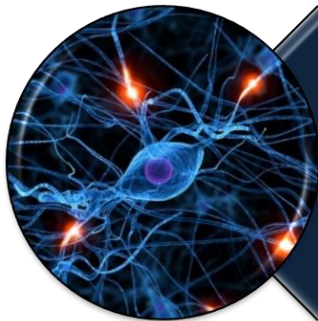




Sequelas



Graves



Moderadas à leves



As manifestações do sistema nervoso relatadas variam de anosmia e ageusia, alterações cognitivas a hemorragia cerebral e infarto. Embora o volume de estudos de caso relacionados ao COVID-19 continue a crescer, trabalhos anteriores examinando vírus relacionados sugerem mecanismos potenciais pelos quais o novo coronavírus pode impactar o SNC e resultar em complicações neurológicas.

Olfactory and gustator (COVID-19): a review of

Esmaeil Mehraeen¹ · Farzane Behzad
SeyedAhmad SeyedAlinaghi^{2,3}

Received: 18 May 2020 / Accepted: 8 June 2020
© Springer-Verlag GmbH Germany, part of Springer Nature 2020

Abstract

Introduction It is reported that coronavirus SARS-CoV-2 is the pathobiology of this virus is still unclear. Olfactory and gustatory dysfunctions caused by COVID-19.

Methods This study was a narrative review of the COVID-19. We searched eight databases to discover studies meeting the criteria. The appropriate studies were included in the review. A review of the COVID-19. We searched eight databases to discover studies meeting the criteria. The appropriate studies were included in the review. A review of the COVID-19. We searched eight databases to discover studies meeting the criteria. The appropriate studies were included in the review.

Keywords Olfactory dysfunction · COVID-19

✉ SeyedAhmad SeyedAlinaghi
s.a_alinaghi@yahoo.com

Esmaeil Mehraeen
es.mehraeen@gmail.com

Farzane Behzad
farzaneb1998@gmail.com

Mohammad Amin Sahbi
mohammadamin@gmail.com

Tayyebh Noori
t.noori25@gmail.com

Haraid Haraidi
haraid.haraidi@icloud.com

Published online: 17 June 2020



Published in final edited form
Nature, 2021 January

COVID-19 Treatment K18-hACE2 mice

Jian Zheng^{1,4}, Lokesh
Christine Wohlford-
Meyerholz², Paul B.

¹Department of Microbiology

²Department of Pediatrics

³Department of Pathology

Abstract

The ongoing COVID-19 pandemic has been less than ideal for patients with this disease. We have studied 24 current studies that show that using the epidemic of COVID-19 infection. A review of the COVID-19. We searched eight databases to discover studies meeting the criteria. The appropriate studies were included in the review.

Keywords

SARS-CoV-2; COVID-19

Users may view, print, copy, subject always to the full Creative Commons Attribution 4.0 International License. For more information, see the Creative Commons Attribution 4.0 International License. For more information, see the Creative Commons Attribution 4.0 International License.

COMPETING FINANCIAL
The authors have no competing financial interests.

Neurological Involvement and Potential Mechanisms

Ghazal Aghagholi^{1*}, Benjamin Gallo Marin¹, Nicolò
and Sarah A. Murphy^{1,2}

© 2020 Springer Science+Business Media, LLC, part of Springer Nature and HHS

Abstract

As the current understanding of COVID-19 continues to evolve, it is important to understand the potential mechanisms of neurological involvement. In this review, we describe potential neurologic manifestations of COVID-19, including olfactory and gustatory dysfunction, as well as other neurological symptoms. We discuss the pathophysiology of these symptoms and the potential mechanisms of involvement. We also discuss the potential for neurological involvement in patients with COVID-19 and the potential for neurological involvement in patients with COVID-19.

Keywords: Coronavirus, Neurology, Cerebrovascular

Introduction

The novel 2019 coronavirus disease (COVID-19) caused by Severe Acute Respiratory Syndrome coronavirus 2 (SARS-CoV-2) results in a variety of symptoms including fever, cough, and fatigue [1]. As more is learned about COVID-19, it has become apparent that neurological involvement is a common feature of the disease.

*Correspondence: ghazal_aghagholi@brown.edu
¹Warren, Ripert Medical School of Brown University, Providence, RI, USA
Full list of author information is available at the end of the article

Anosmia: an evolution of our understanding of its importance in COVID-19 and what questions remain to be answered

Sven Saussez^{1,2,3} · Jerome R. Lechien^{1,2,3,4} · Claire Hopkins^{5,6}

Received: 8 July 2020 / Accepted: 10 August 2020
© Springer-Verlag GmbH Germany, part of Springer Nature 2020

Abstract

Background From the start of the pandemic, many European otolaryngologists observed an unprecedented number of anosmic patients. Early reports proposed that anosmia could be the first or even the only symptom of COVID-19 infection, prompting calls for self-isolation in affected patients.

Methods In the present article, we review the COVID-19 anosmia literature and try to answer the following two questions: first, why is COVID-19 infection responsible for such a high incidence of anosmia? Second, in patients with more severe forms of anosmia really less prevalent and why?

Results In terms of the etiology of olfactory dysfunction, several hypotheses were proposed at the outset of the pandemic; that olfactory cleft inflammation and obstruction caused a localized conductive loss, that there was injury to the sustentacular supporting cells in the olfactory epithelium or, given the known neurotropic potential of coronavirus, that the virus could invade and damage the olfactory bulb. Olfactory cleft obstruction may contribute to the olfactory dysfunction in some patients, perhaps most likely in those that show very early resolution, it cannot account for the loss in all patients.

Moreover, disordered regrowth and a predominance of immature neurons have been shown to be associated with parosmia, which is a common finding amongst patients with Covid-related anosmia. A central mechanism therefore certainly seems to be consistent with the group of patients with more prolonged olfactory deficits. Sustentacular cells showing ACE-2 immunohistochemical expression 200 to 700 times greater than nasal or tracheal epithelia seem to be the main SARS-CoV-2 gateway. As the pathophysiology of COVID-19 anosmia seems to be better understood, the question of why patients with a moderate to severe form of COVID-19 infection have less olfactory involvement remains unresolved. Different potential explanations are discussed in this review.

Conclusions The last 5 months have benefited from great international collaborative research, first highlighting and then proving the value of loss of smell and taste as a symptom of COVID-19. Adoption of loss of smell into the case definition by international public health bodies will facilitate control of disease transmission.

Keywords Smell · Olfactory · COVID-19 · Coronavirus · Anosmia

Dear Editor,

From the start of the pandemic, many European otolaryngologists observed an unprecedented number of anosmic

✉ Sven Saussez
Sven.saussez@umons.ac.be

¹ COVID-19 Task Force of the Young-Otolaryngologists of the International Federations of Otorhinolaryngological Societies (YO-IFOS), Paris, France

² Department of Human Anatomy and Experimental Oncology, Faculty of Medicine, UMONS Research Institute for Health Sciences and Technology, University of Mons (UMons), Mons, Belgium

patients. Early reports proposed that anosmia could be the first or even the only symptom of COVID-19 infection, prompting calls for self-isolation in affected patients [1]. In

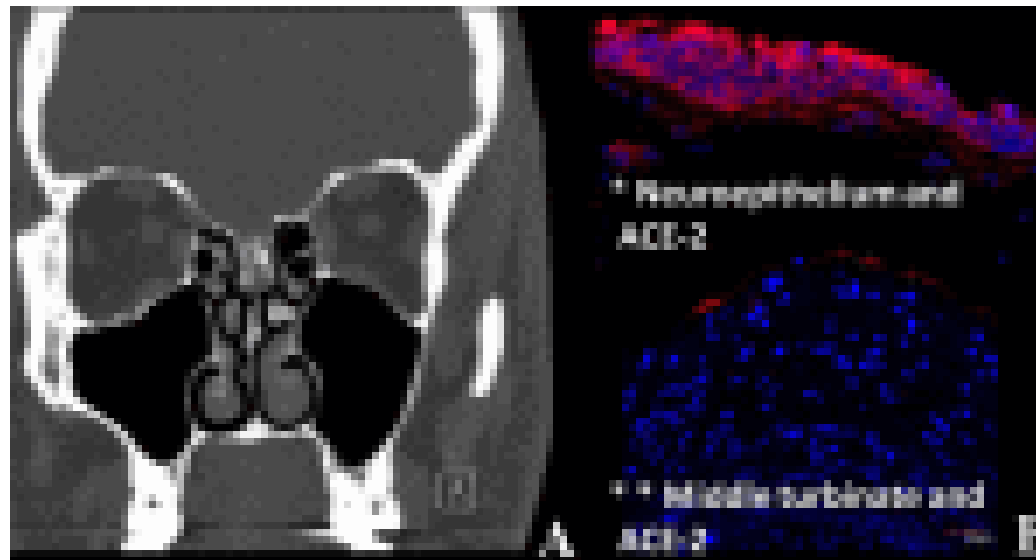
³ Department of Otorhinolaryngology and Head and Neck Surgery, CHU Saint-Pierre, School of Medicine, CHU de Bruxelles, Université Libre de Bruxelles, Brussels, Belgium

⁴ Department of Otolaryngology-Head and Neck Surgery, School of Medicine, UFR Simone Veil, Foch Hospital, Université Versailles Saint-Quentin-en-Yvelines (Paris Saclay University), Paris, France

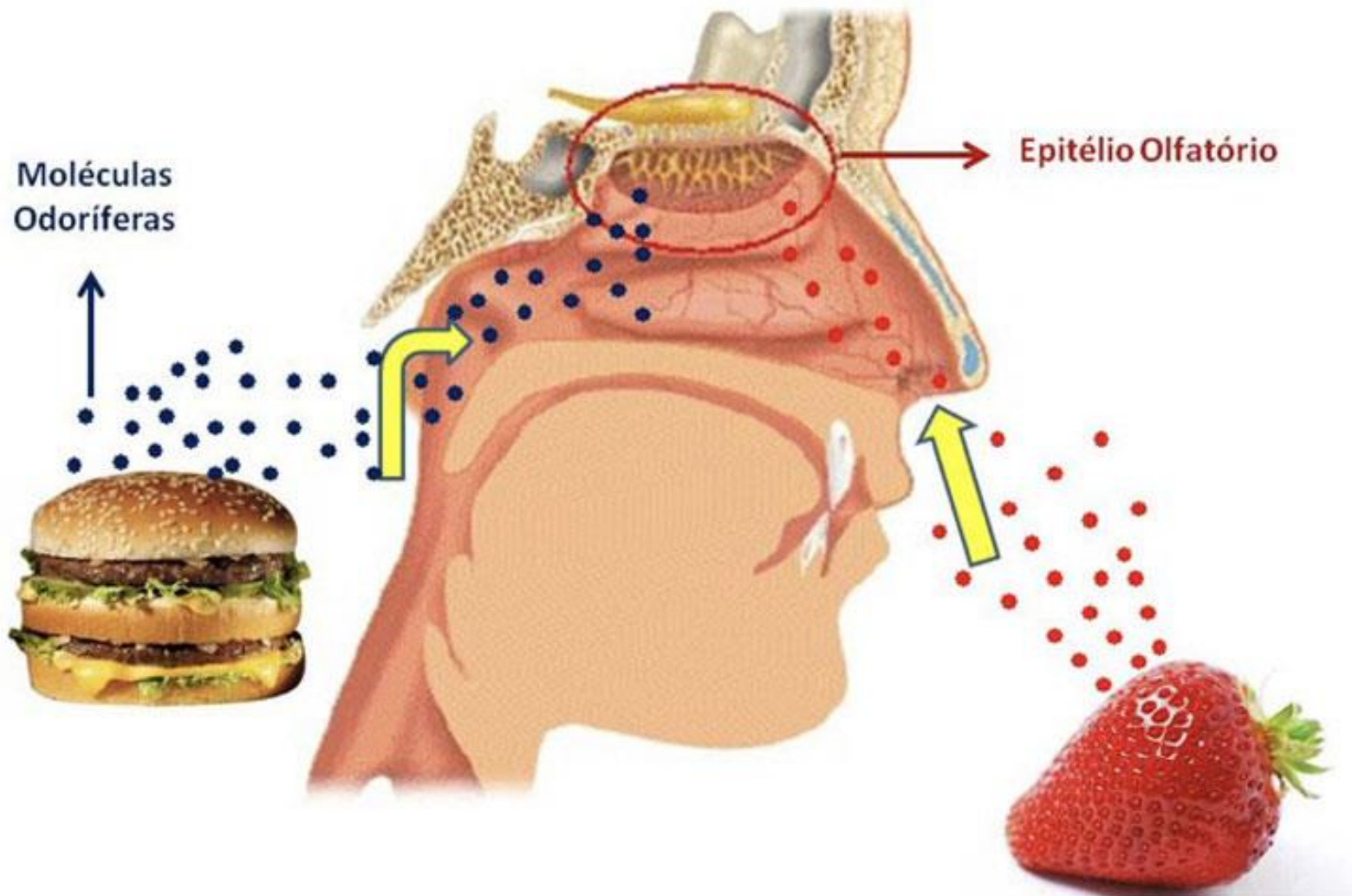
⁵ Gray's and St Thomas NHS Foundation Trust, London, UK

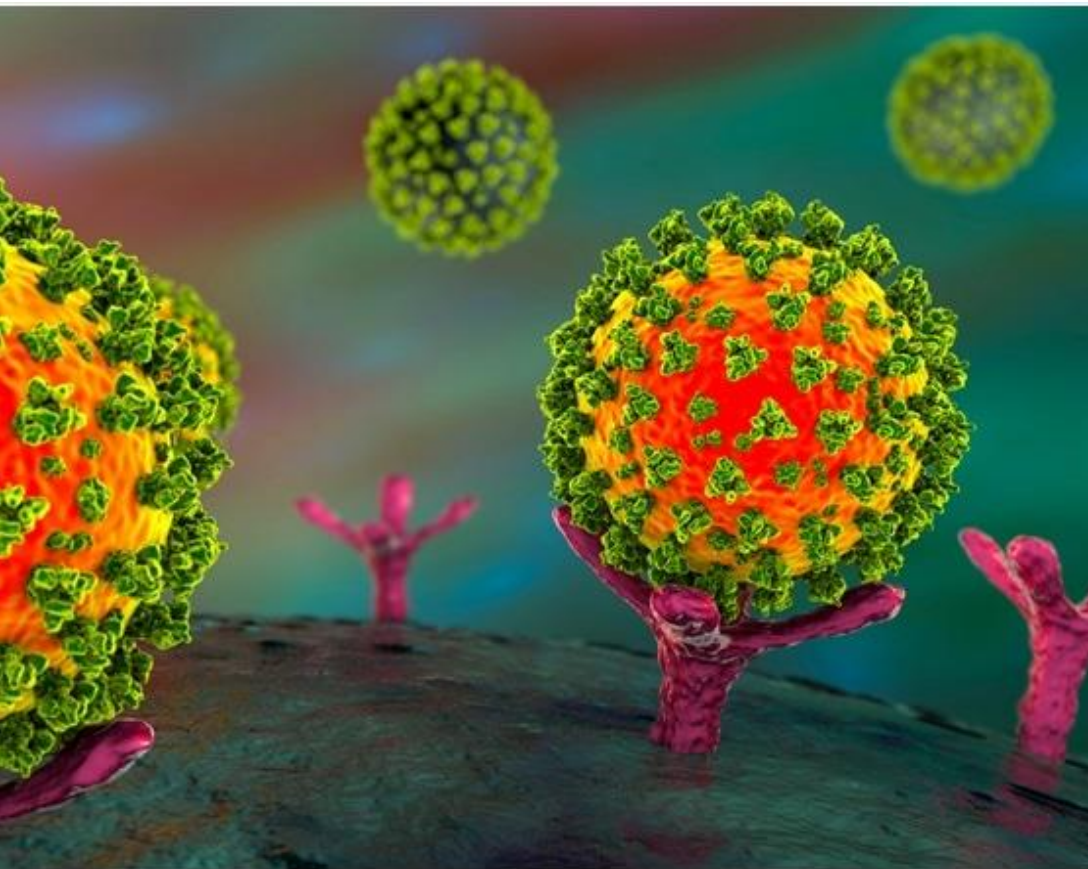
⁶ British Rhinological Society (President), London, UK

Published online: 09 September 2020



Achado por tomografia computadorizada de pacientes com anosmia por COVID-19 e imunomarcção ACE-2 do neuroepitélio olfatório e concha média. **uma** tomografia computadorizada de seio que mostra fenda olfatória completamente opacificada em paciente anósmico com COVID-19; **b** Usando um anticorpo monoclonal ACE-2 direcionado à parte extracelular do receptor, fomos capazes de mostrar que o neuroepitélio (*) expressou uma quantidade significativamente maior de ACE-2 em comparação com a concha média (**)

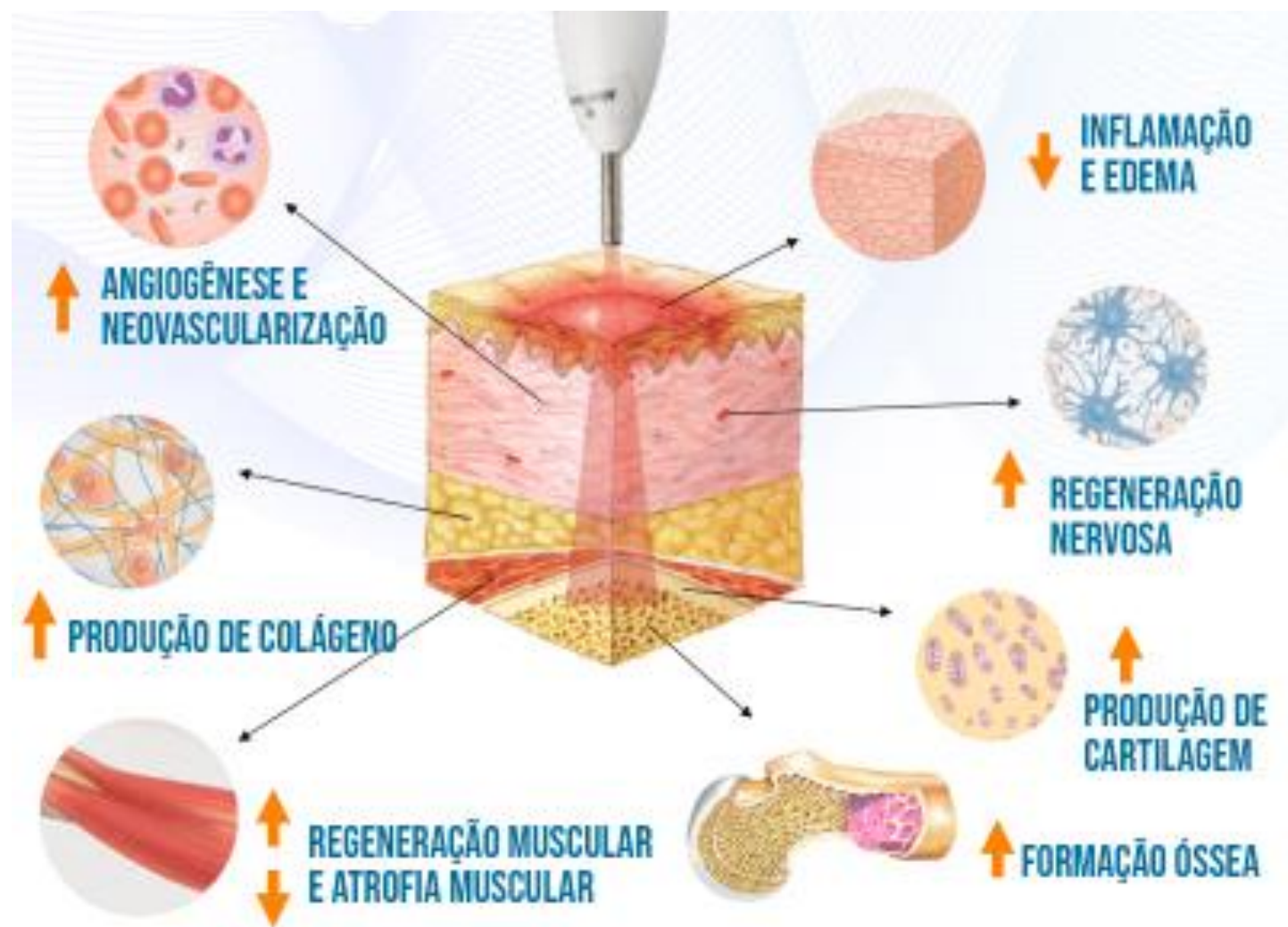




Foi demonstrado que o recrescimento desordenado e a predominância de neurônios imaturos estão associados à parosmia, que é um achado comum entre pacientes com anosmia relacionada a Covid. Um mecanismo central, portanto, certamente parece ser consistente com o grupo de pacientes com déficits olfatórios mais prolongados. Células sustentaculares com expressão imuno-histoquímica de ACE-2 200 a 700 vezes maior que epitélio nasal ou traqueal parecem ser a principal porta de entrada da SARS-CoV-2.

Saussez S, Lechien JR, Hopkins C.

2021 julho; 278 (7): 2187-2191. doi: 10.1007 / s00405-020-06285-0. .





**Fonoaudiologia sem Fototerapia
continua sendo Fonoaudiologia.
Fototerapia sem Fonoaudiologia
são somente aparelhos.**

Prof^a Viviane Marques



DOI: 10.1590/2317-1782/20162015255

Artigo Original
Original Article

Christiane Gouvêa dos Santos^{1,2}
Anke Bergmann²
Kaliani Lima Coça²
Angela Albuquerque Garcia³
Tânia Cristina de Oliveira Valente¹

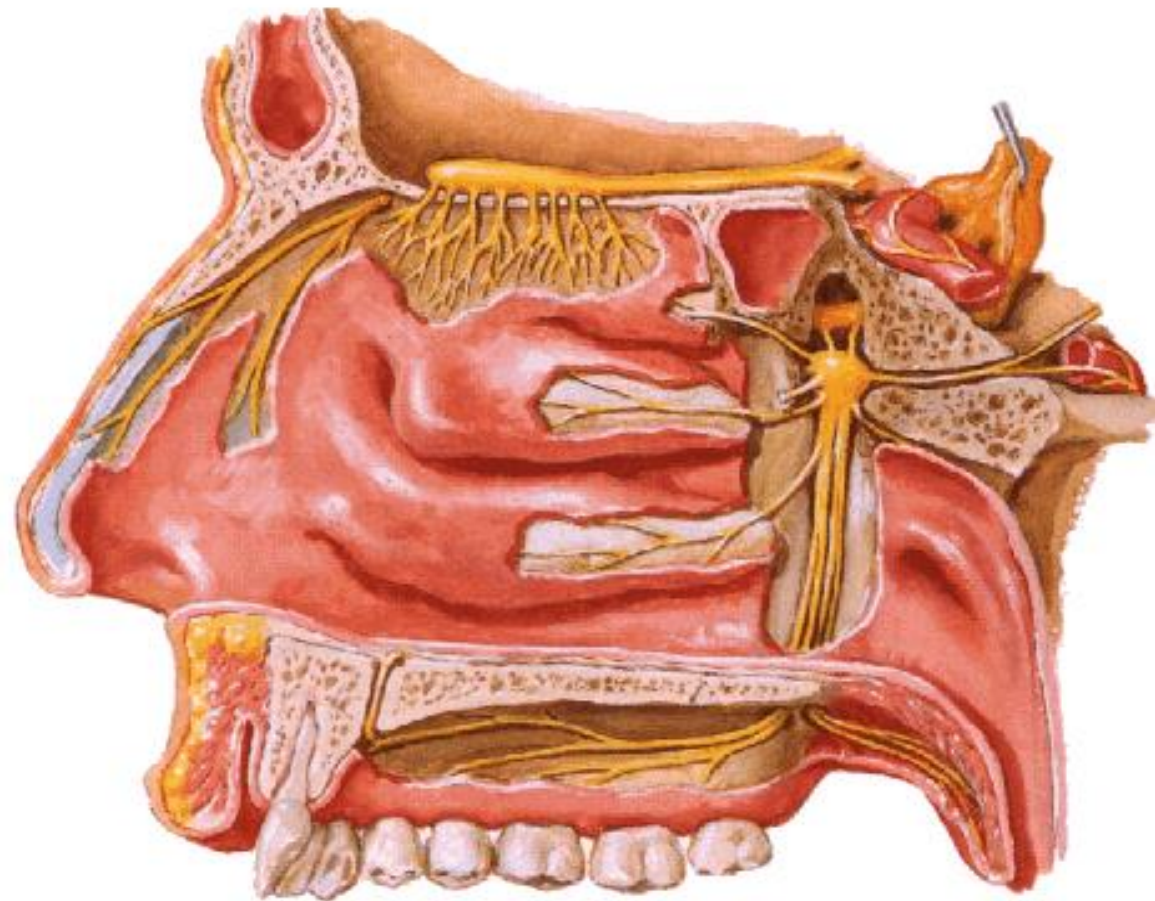
Função olfatória e qualidade de vida
após a reabilitação do olfato em
laringectomizados totais

*Olfactory function and quality of life after
olfaction rehabilitation in total laryngectomees*

Nasal Airflow-Inducing Maneuver é uma técnica de fácil e rápida aprendizagem, sem a necessidade de dispositivos, não invasiva, de baixo custo e com o objetivo de restabelecer o fluxo aéreo nasal, melhorando assim o olfato.



Olfato e Gustação





Doce
Salgado
Ácido
Amargo
Umami

Doces = Pirulito, chiclete, pó de gelatina
Sal = Queijo ralado, mix de ervas
Azedo = limão, abacaxi
Amargo = café, chá de camomila
Umami = aminoácidos, proteínas, glutamato monossódico

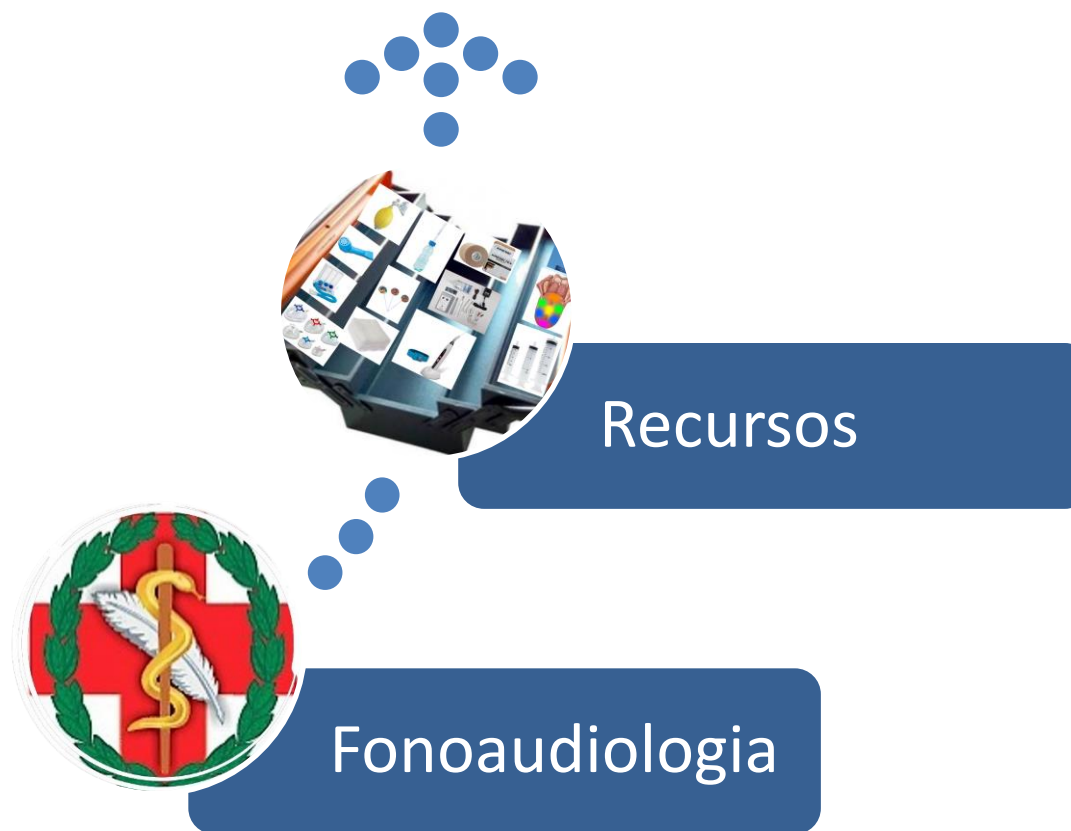


A Fonoaudiologia avalia e trata a anosmia e disgeusia pós Covid-19





Conforto e Qualidade de Vida





“Eu posso fazer coisas que você não consegue e você pode fazer coisas que eu não consigo, mas juntos podemos fazer coisas incríveis”

Madre Teresa de Calcutá
Feliz Dia do Fonoaudiólogo!

#juntosomosmaisfortes
#juntosafonoémaisforte

Obrigada!

@vivanemarquesfono
@fonovim