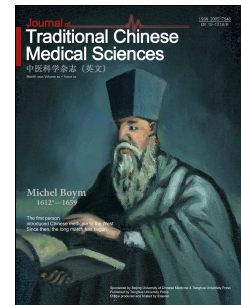


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Epidemiological survey on prevalence and associated risk factors of bitter taste among inpatients from four Grade 3A hospitals in Beijing

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Abstract

Objective: To study the possible etiology of bitter taste in the mouth and its diagnostic significance by an epidemiological survey on its associated diseases and influence factors.

Methods: A cross-sectional epidemiological study was conducted by recruiting patients from four Grade 3A hospitals in Beijing. The questionnaire incorporated five aspects i.e. general information, gustation, behavior, symptomology and past medical history. SPSS20.0 software package was used for data analysis. T-test and chi-square test were selected for evaluation. An observation of the correlation between different causative factors and the symptoms of bitter taste was analyzed by Logistic regression.

Results: Smoking and excessive consumption of meat and emotional stress are the risk factors, while eating fresh fruits and vegetables are key protective elements against the manifestation of bitter taste in the mouth. The incidence of bitter taste was high in patients suffering from gastroesophageal disease, hepatic and gallbladder diseases and neurological diseases.

Conclusion: Bitter taste is a common symptom in hospitalized patients, especially in patients with gastroesophageal reflux and liver and gallbladder diseases and the link to smoking, dietary and emotional stress. It is found that smoking is a sole risk factor for the manifestation of bitter taste.

KEYWORDS

Bitter taste;

Influence factor;

Epidemiology;

Cross-sectional study

1.0 Introduction

Bitter taste in the mouth (abbreviation as bitter taste), a common clinical symptom, is also an important symptom in the pattern differentiation theory of traditional Chinese medicine (TCM). Clinically, there are many patients whose chief complaint is “bitter taste” or “abnormal taste”. However, bitter taste is often ignored by Western medicine diagnosis mainly attributed to the lack of understanding of the pathophysiological basis of the symptom. Some researchers believe that it may be related to the increase of bile acid content in saliva¹ or possible link to esophageal

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