

Mouth Problems from Radiation

Overview

Radiation treatments to the head and neck, and certain chemotherapy drugs, can irritate your mouth and throat. These problems include:

- dryness (lack of saliva)
- mouth sores or ulcers
- increased risk for infections
- general soreness
- increased risk for cavities
- difficulty opening your mouth (trismus)

Some problems will go away in time but others need treatment to heal or lessen the symptoms. It is important to take very good care of your mouth and teeth before and during cancer treatment because some mouth problems will require that your treatment be delayed, or even stopped.

Symptoms

Report any of these symptoms to your doctor and/or dentist.

- Redness or soreness anywhere in your mouth
- Cracks, ulcers, blisters, white patches, bleeding
- Dry mouth
- Problems chewing or swallowing
- Temperature greater than 100.4°F (38°C)
- Pain in your teeth, gums, tongue or jaw

Preventing Problems

- Examine your mouth every day and look for any red or white patches, bleeding, or sores. (Use a flashlight if the room doesn't have good lighting.) Should you find any problems, report them to your doctor or nurse.
- Keep your mouth moist and drink lots of water. Artificial saliva products are available if necessary.
- Keep your mouth clean – brush your teeth, gums and tongue using a very soft toothbrush moistened with warm water. Use toothpaste that contains fluoride. If you use a water pick, use the weakest setting.
- Floss daily, avoid areas of bleeding or sores until they heal.
- After brushing your teeth, gargle with a mixture of ¼ teaspoon of salt in 1 cup of warm water. Swish it around in your mouth for a few minutes and then spit it out.
- Use a fluoride mouthwash. Check with your doctor or dentist as to what brand to use. Avoid products containing alcohol – it dries the tissues.

- If you wear dentures or removable appliances, make sure you clean them properly every day.
- Do not wear your dentures while you sleep at night.
- Weight gain or loss can cause dentures to lose their “fit”. Should this happen to you, have your dentist adjust them to avoid injuring the tissues in your mouth.
- Keep your lips moist by using lipstick, Blistex®, Vaseline® or Chapstick® every 2-3 hours to avoid dryness and cracking.

Treatment

- Brush your teeth even if your mouth is sore. If a toothbrush causes too much discomfort, you can use an oral swab (looks like a Q-tip with sponge, not cotton on the end).
- Eat soft foods. Avoid hard, crunchy and chewy foods.
- Drink lots of fluids to keep your mouth moist. Sucking on ice chips will provide moisture and may help alleviate some discomfort.
- Soften foods in a blender with some form of liquid such as gravy, juices, milk, or water and drink them from a cup or through a straw.
- If you have been prescribed pain medication for your mouth, take it 1 hour before eating or drinking.
- If your pain is constant, take your medication regularly, around-the-clock. If swallowing pills or capsules is difficult, ask your doctor to prescribe a liquid pain medication.
- For local mouth pain, use a topical anesthetic such as viscous lidocaine applied directly to the sore. You can also use this medication as a mouthwash and/or swallow it for pain in the mouth or throat.

What Else Can I Do?

To prevent aggravating any mouth problems, avoid:

- tobacco products (smoked or chewed)
- lemon and glycerin swabs
- alcohol and any products containing alcohol, such as certain mouthwashes
- spicy, hot, or acidic foods and drinks

Call Your Doctor If...

- you can't eat or drink because of your mouth problems (may lead to dehydration, which can be dangerous)
- Your present pain medication is not working.