

## Dry mouth comfort/care tips:

- Sip room-temperature water throughout the day and night and carry a water bottle with you at all times.
- Avoid drinking lots of water at an extreme water temperature (very hot or very cold).
- Only drink sugarless drinks and avoid carbonated beverages.
- Avoid drinks with caffeine because caffeine can dry out the mouth. Drinking coffee, tea or a diet soda occasionally is OK but don't overdo it.
- While eating a meal, make sure you include a beverage like water. Drink water before, during and after the meal.
- Chew sugarless gum or suck on sugarless candy to stimulate salivary flow.
- If you smoke or drink alcohol, don't! Both alcoholic beverages and smoking dry out the mouth and make you more susceptible to gum diseases and oral cancer.
- Elect an alcohol-free over-the-counter mouthwash if you are in the habit of using a mouthwash. Read the label and make sure alcohol is not listed as an ingredient.
- Try using a night time humidifier to moisten room air.

If you have a persistent dry mouth, you may be at greater risk for fungal or viral infections in your mouth. These ulcerations may also develop from trauma caused by friction of oral tissues against denture clasps, appliances or edges of worn or defective dental restorations.

There are many medications available for use in treating common infections associated with dry mouth.

Visit your local dentist to develop a comprehensive plan for treating and managing dry mouth. This plan may include more frequent trips to the dentist.

In-office dental treatment for dry mouth may include in-office topical fluoride treatments, prescription home fluoride, antibacterial/ antifungal mouthrinses or other products and Xylitol gum. Diagnostic x-rays may need to be taken more frequently to prevent and restore dental decay. In addition, self-care instruction must be reinforced to include brushing at least twice a day. Daily compliance with interdental plaque/biofilm removal is also important. Selfcare instruction should be customised according to patient needs.

Want to learn more about Dry Mouth and Oral Health?  
Talk to your dental professional or visit [oralb.co.uk](http://oralb.co.uk)



# DRY MOUTH (XEROSTOMIA)

## Does your mouth feel as dry as cotton?

Does your mouth feel dry and sticky when you first wake up in the morning? Do you feel the urge to drink lots of water?

Dry mouth can make it hard for you to swallow, chew your food or speak clearly. With a dry mouth your teeth can decay very quickly, and sometimes there are no warning signs for this condition.

Untreated dry mouth can also contribute to bad breath, and sometimes others will notice the stale odor. Dry mouth is a daily problem that makes you feel uncomfortable while you swallow, eat or speak. It is a condition in which you do not produce enough saliva (spit) to keep your mouth feeling wet. Your physician or nurse does not always talk about dry mouth as a side effect when they give you a prescription for medicine, but dry mouth can be caused by the medicine you take. Please check with your doctor if that is the case.

Whatever you do, don't stop taking your medicine but mention dry mouth to your nurse as soon as you can. Dry mouth can also be a sign of diseases and other conditions like diabetes - so make sure you tell your nurse or dental hygienist about dry mouth if it becomes a problem for you.

## Dry mouth symptoms:

- Dry or sticky feeling in the mouth like your mouth is stuffed with cotton balls.
- Burning feeling in mouth or tongue and sometimes tongue feels like shoe leather.
- Difficulty or discomfort when chewing, swallowing or speaking.
- Dry lips and throat or mouth sores.

Take a moment to determine your risk of dry mouth.

## Risk factors for dry mouth include:

- Medications- about 500 or more (!) so check with your medical or dental professional about dry mouth as a possible side effect.
- Sjögren's syndrome- dry mouth may be present in combination with dry eyes.
- Diabetes mellitus- poor glycemic control has been associated with dry mouth.
- HIV/AIDS
- Depression
- Uncontrolled high blood pressure
- Alzheimer's disease
- Addison's disease
- Alcoholic cirrhosis
- Generalized dehydration and salivary gland infection
- Years after onset of arthritis

## Questions - Yes/No:

1. Are you taking one or more prescription drugs on a daily basis?
2. Does your mouth feel sticky and dry when you wake up in the morning?
3. Do you have difficulty swallowing or speaking?
4. Does your throat feel dry and does your mouth sometimes burn?
5. Does your tongue burn or has it changed to a darker red color?
6. Does your tongue sometimes feel as dry as shoe leather?
7. Do you sometimes get mouth or tongue sores that will not go away?
8. Does the amount of saliva in your mouth seem to be too little?
9. Do you sip liquids to aid in swallowing dry foods?
10. Does your mouth feel dry after eating a meal?

If you responded "yes" to one or more questions, talk to your physician/nurse and visit your dentist/ dental hygienist for information on dry mouth and oral health.