**Building healthier lives** 

# **Burning Mouth Syndrome**

This leaflet has been designed to improve your understanding of any forthcoming treatment and contains answers to many of the commonly asked questions. If you have any other questions that the leaflet does not answer or would like further explanation please ask.

### What is burning mouth syndrome?

Burning mouth syndrome is a name given to discomfort or pain in the mouth. It often affects the tongue, lips and cheeks but other parts of the skin lining inside the mouth can also feel uncomfortable. Most people with the condition complain of a burning or scalded feeling.

Burning mouth syndrome is a common condition. It often affects women, particularly after the menopause, but men can sometimes get it too. Up to one in three, older women report noticing a burning sensation in their mouth.

### What is the cause?

The sensation of burning in the mouth can occasionally be the result of medical or dental problems. These include thrush infections and blood or vitamin deficiencies.

The hormonal changes around the menopause can be related to burning mouth syndrome. It can also occur or get worse when somebody is stressed, anxious or depressed, or going through a difficult time of life. Not knowing why your mouth is burning can also make you anxious.

## What will happen to me?

If you describe a burning sensation in your mouth you will be examined thoroughly to make sure another medical or dental cause is not responsible. Some blood tests may be arranged for you to look for such a possible cause.

Sometimes people get worried that they may have mouth cancer. This is quite a common anxiety of people with burning mouth syndrome. Carrying out a thorough examination and any necessary tests will enable your doctor to reassure you that all is normal with no signs of cancer.

## Is there any treatment?

Hormone replacement therapy hasn't been shown to improve the symptoms, and neither have vitamins if your blood tests are normal. Symptoms often improve following reassurance that there is no serious disease present in the mouth. The burning feelings can sometimes be worse at times of stress and go away when life is running more smoothly.

In the same way that low doses of antidepressants (e.g. amitriptyline) can help patients with neuralgia even if they are not depressed, sometimes low doses of antidepressants can relieve the symptoms of burning mouth syndrome. Other treatments recommended may include alpha lipoic acid, Difflam<sup>™</sup> (benzydamine hydrocholride), different antidepressant classes (e.g. selective serotonin reuptake inhibitors) and/or "talking therapies" (e.g. cognitive behavioural therapy).

# **Information for Patients**

### What if I don't get better?

We know that we can't always make you better. Trying not to focus on the feeling, learning to live with the sensation, and remembering that no serious disease has been found can sometimes be the best way of managing this common problem.

### **Contact Us**

If you have any questions our staff will always answer them as fully as possible at your next appointment. If you need any further information, please contact:

### Department of Oral Surgery: Telephone: 0121 424 5307

### **Additional Sources of Information:**

This leaflet is based on one designed by the British Association of Oral and Maxillofacial Surgeons, but has been modified by us to reflect local practices. For further information you can visit the British Association of Oral and Maxillofacial Surgeons website on <u>www.baoms.org.uk</u>.

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email patientexperience@uhb.nhs.uk.