

## Head and Neck Oncology Service

### Care of your mouth and teeth before and after cancer treatment

#### Everyday advice

- Using a small head, medium-textured tooth brush, brush all surfaces of your teeth at least twice daily for two minutes each time using fluoride toothpaste. Avoid whitening toothpastes which are harsh and abrasive. Brush teeth last thing at night and at least one other time during the day.
- It is better to brush your teeth before rather than after meals; this reduces oral bacteria (dental plaque) that is constantly forming on your teeth, certain oral bacteria reacts with sugary food to make acid which will, over time, weaken tooth enamel.
- Use a daily alcohol-free fluoride mouth rinse e.g. Fluorigard (daily 0.05% 225ppm fluoride). This mouth rinse is available at chemists or supermarkets. Use at a different time to brushing with a fluoride toothpaste. Fluoride is a naturally occurring mineral that strengthens tooth enamel and can help prevent tooth decay.
- Chew sugar free gum, if possible, after meals and snacks for 10–15 minutes. This may increase the production of saliva which helps wash away food particles and neutralise harmful acids which can weaken teeth and lead to tooth decay over time.
- Remember that water (not fizzy or flavoured), milk, tea, cheese and nuts are tooth-friendly food and drink snacks.
- Ensure you see a dentist or hygienist every 3–6 months who may apply fluoride varnish to strengthen your teeth.

#### Dry mouth information

Radiotherapy to the head and neck can affect the functioning of salivary glands leading to a reduction of saliva, causing a dry mouth, which can be permanent.

Chemotherapy can change the nature of saliva and the amount produced. This may be temporary with normal flow returning after treatment has been completed.

A dry mouth puts your teeth at higher risk of tooth decay, ask your dentist or doctor about using a **high-fluoride toothpaste** e.g. Duraphat toothpaste, which will help your teeth resist decay. This toothpaste is only available on prescription.

Patients with dry mouths are also more susceptible to gum disease, thrush and ulcers.

If you have difficulty in accessing a dentist ask your hospital doctors to refer you to Birmingham Dental Hospital for dental care.

### Dry mouth treatment

- Frequent sips of cold water/ice chips.
- Chewing sugar free gum can help some people who have non–functioning salivary glands to secrete saliva.
- Use water-based mouth moisturisers e.g. BioXtra oral gel or Oralieve mouth moisturising gel. A small amount of the gel needs to be massaged well into the soft tissues, it can be used on the lips, the cheeks, tongue, gums and the palate and even under dentures as many times as is beneficial. Mouth moisturising gel can also be applied before and after mouth cleaning and before and after eating, making these tasks less painful for patients with a severe dry mouth. A mouth moisturising gel is also available from the dental nurses at the hospital when you go for your outpatients appointment

**Please note:**

- not all patients will find these effective;
- some gels may contain animal products or ingredients derived from egg or milk – please read the labels.
- Using mild-flavoured, sodium lauryl sulphate free toothpaste may cause less irritation to a dry mouth. The ingredient, sodium lauryl sulphate (SLS), makes toothpaste foam but it can also have a drying effect on the mouth and should be avoided in patients who already have a dry mouth.

### Brands of non-foaming (SLS free) toothpastes and their fluoride content:

- Sensodyne daily care gel 1450ppm
- Sensodyne daily care 1450ppm
- Oralnurse unflavoured toothpaste 1450ppm
- Sensodyne pronammel 1450ppm
- Oralieve moisturizing toothpaste 1450ppm
- BioXtra toothpaste 1450ppm
- Biotene toothpaste 1450ppm

While you are having your radiotherapy and/or chemotherapy these products may be too harsh, the medical team will advise you on your mouth care at these times.

**The dental nurses are available in outpatient clinics to give oral care advice and support.**

### Maxillofacial/ENT

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