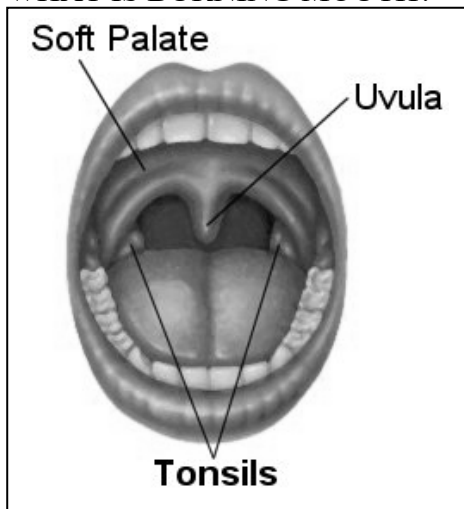


Burning mouth syndrome



WHAT IS BURNING MOUTH?



Chronic pain in your mouth that may affect your tongue, gums, lips, inside your cheeks, roof of mouth or your whole mouth. When severe, it may feel like you have scalded your mouth. Although the exact cause often cannot be determined, pain can often be controlled with various available treatments.

Also known as burning tongue syndrome, the condition is more common over the age of 50 and may cause pain that gets worse during the day, a sensation of dryness and thirst, and/ or a loss or change in taste.

In many cases there is no clear cause found. Dr Iseli may try a number of treatments for less common, reversible causes including:

- Xerostomia (dry mouth due to aging or medications)
- Oral conditions including yeast infection, allergies or ill fitting dentures
- Nutritional deficiencies including iron, B12, folate and zinc
- Acid reflux from the esophagus
- Irritation due to tongue thrusting, overuse of mouthwash or tongue brushing

WHAT TESTS MAY BE HELPFUL?

Dr Iseli will carefully examine your mouth and throat using a flexible telescope and may recommend some tests including blood tests, a CT scan and/or scrapings or a biopsy if any lesions are seen.

WHAT NON DRUG TREATMENTS MAY BE HELPFUL?

Although there is no cure in the majority of cases, most will get some relief after trying a few different treatments that target some common underlying problems. Not uncommonly, the condition may improve by itself with time and sometimes completely disappears. Its best to try non drug treatment for at least 2 months before embarking on medications. Non drug treatments include:

- Stop smoking to avoid irritating the mouth
- Drink plenty of water to lubricate the mouth (skim milk lasts longer)
- Avoid irritating foods including
 - Cinnamon or mint
 - Spicy foods
 - Acid foods such as tomatoes, orange juice, cola and coffee
- Try less irritating toothpastes such as Biotene, Sensodyne Cool Gel or Rembrandt
- Try Listerine tartar control mouthwash

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WHICH DRUG THERAPIES CAN BE HELPFUL?

Your GP can assist you with a trial of a number of treatments to see which is most helpful to you. Try one treatment at a time until you notice relief.

- A 10 day trial of antifungal treatment (amphoterecin lozenges one 3x/day)
- A 2 week trial of antihistamines (eg fexofenadine 180mg in the morning)
- A 6 week trial of antacid treatment (eg omeprazole 40mg at night).
- Dexamethasone 0.5mg/5mL (480mL bottle). Rinse 5mL for 2 minutes after each meal and bedtime then spit. Do not eat within 30 minutes.
- Gabapentin 300mg tablets. Start one tablet daily 3 days, then 1 twice daily 3 days, then 3x/day for 3 days (every third day, increase number of tablets to a maximum 900mg 3x/day until relief is observed).

RETURN TO SEE DR ISELI IF:

- You notice any new ulcers or lesions in your mouth or throat
- Your pain is worsening or changing
- You notice any lumps in your neck



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