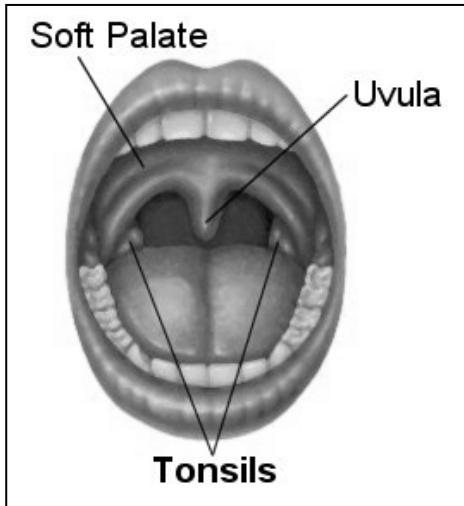


# Xerostomia (Dry mouth)



## WHAT IS XEROSTOMIA?

Dry mouth is due to decreased saliva - a common problem that is caused by many medical conditions, radiotherapy and medications. You may notice your saliva becomes thick, you may get cracked lips, bad breath and gum disease, altered taste and a sore throat that makes speaking and swallowing more difficult.

Common causes of a dry mouth include:

- Smoking
- Aging (particularly related to medications and medical conditions that develop with age)
- Radiotherapy (including radioiodine for thyroid cancer)
- Medications especially antidepressants, antihistamines, blood pressure medications, drugs for urinary incontinence and Parkinson's therapies.
- Sjogren's disease (an autoimmune condition that affects the saliva)
- Other medical problems including stroke, snoring, diabetes and Parkinson's

## 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 for Sjogren's, and/or scrapings or a biopsy if any lesions are seen. Occasionally a biopsy of the lower lip is necessary to confirm Sjogren's disease.

## 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. Non drug treatments include:

- Stop smoking to avoid irritating the mouth
- Drink plenty of water to lubricate the mouth (skim milk lasts longer)
- Restrict caffeine and alcohol intake
- Use sugar free gum and candy (look for Xylitol which is good for teeth)
- Put Vaseline or chapstick on the lips frequently during the day
- Sleep with a humidifier to moisten air at night
- Brush and floss your teeth twice a day and have regular dental checkups
- Try Biotene or Sensodyne Cool Gel toothpaste
- Try Oral balance gel at night (cool gel which spreads around mouth)
- Use fluoride mouthwash before bed (eg Act 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.

- Salivasure tablets – dissolve one tablet under tongue as needed (up to 1/hour)
- Saliva substitute (Roxane) 120mL bottle – tends to get expensive
- Pilocarpine drops are not recommended due to side effects

If you have increasing discomfort in the mouth, you may have a fungal infection, acid problem or allergies. Your GP may try a number of therapies including:

- 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).

## 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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