

# Oral care instructions for patients with cancer

A healthy mouth contributes to physical and mental wellbeing. A healthy mouth impacts general health, eating, speaking, smiling, social interactions, and quality of life. Oral health may feel like a minor factor when you are diagnosed with cancer, but it impacts many things in your life.

- Infections spread easily to the rest of the body via damaged teeth or mucous membrane.
- Regular, careful oral and dental care prevents infections.
- Typical oral problems during cancer treatment include reduced saliva production, broken mucous membranes and the pain it causes, bleeding, loss of taste, and swallowing difficulties. Frequent vomiting causes permanent damage to the tooth enamel and advances tooth decay.
- The best treatment for oral problems is prevention. The best tools for preventing oral problems are good oral hygiene and sufficient intake of nutrition rich in vitamins and minerals.

## Oral hygiene

- Brush your teeth twice a day. Use fluoride toothpaste and a soft toothbrush. We recommend changing the toothbrush every 1–3 months. You should also get a new toothbrush, for example, at the beginning of each hospital treatment period or after an infection with fever.
- Use dental floss, toothpicks or an interdental brush regularly and gently.
- If regular fluoride toothpastes taste too strong or irritate the mucous membranes, you can use a fluoride paste with a milder taste and less foam (e.g., Salutem®).
- If you have dental prostheses, wash them twice a day with a prostheses brush and a cleaning solution, or with mild soap. You should not use regular toothpaste because it damages the surface of the prostheses. Effervescent disinfectant tablets should be used once a week to clean the prostheses.
- After vomiting or drinking acidic drinks, cleanse your mouth with water or saline solution to reduce the tooth-eroding acidity in your mouth, and to clean your teeth and mucous membranes.
- Use xylitol products after meals (chewing gum or drops).



- Rinse and gargle your mouth primarily with water but you can also use:
  - Saline solution (1 teaspoon of salt + 1 teaspoon of bicarbonate soda / 1 liter of water).
  - Mild, lukewarm chamomile tea.
  - Chlorhexidine diluted to 1:4. Use this only as a course. Avoid using toothpaste for two
    hours before and after rinsing. If you receive radiation therapy to your head or
    neck, do not use chlorhexidine during the radiation therapy.
  - Alcohol-free mouthwash.
  - With 5 to 10 ml of Antepsin for 2 minutes 30 minutes before a meal. The Antepsin oral suspension forms a protective layer on the damaged mucous membrane and protects from soreness.

## Dry mouth

Saliva has an integral role in oral health. Saliva moisturizes and protects the mucous membrane, balances the regular bacterial flora of the mouth, neutralizes acidity, and improves digestion and sense of taste. Saliva is also an adhesive that keeps dental prostheses in their place.

Reduced saliva production can be caused by many things. Many medications, illnesses, and salivary gland dysfunctions can cause reduced saliva production. Reduced saliva, a dry mouth, increases the risk for caries as well as oral infections and damage to the mucous membranes. This is why enhanced oral care is important.

Care and moisturizing instructions for dry mouth:

- Take regular care of your mouth.
- Brush your teeth carefully and use fluoride toothpaste with a mild taste and no foam every day. If you cannot use toothpaste with fluoride, you can take fluoride pills instead.
- You can increase saliva flow by using fluoride tablets, and chewing gum or drops with xylitol.
- Chew your food thoroughly. Thorough chewing improves saliva flow.
- Use sauces in your foods and add oils to your salads.
- Drink plenty of water and carry a water bottle with you as needed.
- Avoid sugar and salt even if your sense of taste has weakened.



- Apply olive, rapeseed, or linseed oil to your gums regularly. Ceridal skin oil can also be used to treat oral mucous membranes.
- Use artificial saliva and gels, and alcohol-free mouthwash.
- Apply Vaseline on your lips.
- Suck on ice cubes and drink cold drinks.

#### Sore mouth

Pain in the mouth is usually due to mucosal damage from cytostatics or radiotherapy to the head and neck area, fungal infections, or blisters caused by herpes virus. Time is often the only thing that soothes difficult pain in the mouth.

Care instructions for sore mouth:

- Brush your teeth carefully and use fluoride toothpaste with a mild taste and no foam.
- You can use moist gauze pads to clean the mucous membranes.
- If brushing your teeth is temporarily difficult, you should rinse your mouth clean and take fluoride tablets to replace the fluoride from toothpaste.
- Sucking on Bepanthen lozenges can help with wounds in the mouth.
- If necessary, use Xylocaine solution or gel according to the doctor's instructions for example before meals or brushing your teeth.
- Apply cooking oil on the mucous membranes always when needed, for example before eating, drinking, and going to sleep. You can use, for example, peppermint to sweeten the cooking oil if you wish.
- Sucking on ice cubes before and during chemotherapy may reduce mucosal damage.
- Take pain medication as needed.

#### Eating:

Food should be only mildly/slightly seasoned/spiced and as mechanically non-irritating as possible.



- Jellies are easy to swallow.
- Yoghurt, ice-cream, viili, porridge, and soup are also suitable foods.
- You can also try soaked bread and cold cream.
- Puréed foods can be eaten with a large straw, this reduces irritation to the mucous membranes.
- Strawberries, tomatoes and citrus fruits may sting.
- Avoid very cold and hot meals and drinks if you have mouth pain.

### Treating infections:

- Yeast is the most common cause of infections.
- Maintain good oral hygiene.
- Treat the infection according to the doctor's instructions with yeast medication, for example.
- To support the medical treatment, you can have 2–3 teaspoons of unsweetened lingonberry or cranberry juice after meals.

#### **Dental** care

The doctor in charge of your treatment always estimates the need for dental care for each patient individually. The doctor will also decide when dental care is appropriate for cancer treatment. You need a permission from the doctor in charge of your treatment before you can go to a dentist. It is recommended to have your teeth checked by a dentist before chemotherapy begins because a dental infection can delay the therapy. If there is a need for extensive dental work, the doctor in charge of your treatment will refer you to the Oral and Maxillofacial Surgery Outpatient Clinic.

Kela pays reimbursement for part of the cost of oral and dental treatment provided by a dentist in private practice.

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