



Patient Information

MOUTH CARE

Oncology

Vitalité Zone: 1B 4 5 6

Facility: Dr. Léon-Richard Oncology Centre

This document includes information on:

- Mouth complications caused by radiation therapy and/or chemotherapy (stomatitis);
- Mouth care during your treatments;
- What to do if you experience mouth complications;
- How to use the mouthwash.

Mouth care

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Mouth care

What is stomatitis?

Radiation therapy and chemotherapy may cause changes inside the mouth to the stomach. Stomatitis is an inflammation and/or ulceration of the mouth tissues. It may be accompanied by pain, discomfort, infection and bleeding. It may affect eating, swallowing and language.

It appears slowly. This is a normal reaction to radiation therapy and/or in response to a few chemotherapy treatments.

Your care team (nurse, doctor, radiation therapist and dietitian) will explain what you can expect.

Why is mouth care important?

Benefits of mouth care:

- Minimize mouth changes;
- Maintain comfort and alleviate pain;
- Reduce mouth complications:
 - Cavities;
 - Ulcers (wounds);
 - Bleeding;
 - Infection;
- Help your mouth to heal after treatments.

Mouth care

General rules

- Keep your mouth clean.
- Keep your partial dentures or dentures clean.
- Treat your mouth gently.
- Examine your mouth every day.
- Drink plenty of water or other fluids every day.
- Have a water bottle with you. Take small sips often.
- Do not smoke or chew tobacco.
- Do not drink alcohol, beverages with caffeine, and acidic juices.
- Avoid toothpicks.
- Avoid using mouthwashes containing alcohol. Use only the homemade mouthwash for which the recipe is provided (p. 5).
- Avoid foods and beverages that are high in sugar.
- Eat normally until redness, pain, white spots or bleeding appear. If you experience these complications, avoid foods that are too hot and foods that are too spicy or too acidic that could irritate your mouth (e.g., pepper, vinegar, lemon).
- Use a cool mist humidifier, especially at night, to relieve dry mouth.

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Use of dental floss

- Do not start using dental floss if you do not usually use it.
- Use dental floss once daily before brushing your teeth (preferably at bedtime).
- Choose waxed dental floss as it is easier to use.
- Continue using dental floss until it causes too much discomfort.
- Stop using dental floss if it causes pain or bleeding that lasts more than 2 minutes and inform your care team.

Brushing your teeth

- Use a small soft or ultra soft toothbrush.
 - Do not use an electric toothbrush.
 - If needed, place your toothbrush under hot water for 30 seconds to soften the bristles.
- Use toothpaste with fluoride, mild flavour, and no whitening agent (e.g., Sendodyne®).
- Brush your teeth (dentures) gently 2-4 times a day for at least 2 minutes.
 - Brush your teeth after each meal and before bedtime.
 - Also brush your tongue, from back to front.
 - Brush your teeth after using dental floss.
- You may soak your toothbrush in the homemade mouthwash before brushing your teeth (if toothpaste causes too much discomfort).
- **If you cannot tolerate brushing, inform the staff.** In this case, you may use oral swabs (Toothette®) dipped in the homemade mouthwash to clean the inside of your mouth.

Particularities for dentures/partial dentures

- If you have dentures or partial dentures, remove them before starting your mouth care.
- Remove them from your mouth for a long period of time (at least 8 hours) every day (e.g., during the night) and soak them in water or a rinse solution.
- If your mouth is sensitive, try wearing your dentures during meals only.
- Do not wear poorly adjusted dentures (too small or too big).

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Homemade mouthwash

- Mix the following ingredients in a clean container:
 - ¼ teaspoon (1.25 mL) of salt
 - ¼ teaspoon (1.25 mL) of baking soda
 - 8 oz. (240 mL) of water
- Make a new mixture every day.
- Keep the mouthwash at room temperature.
- Your doctor may prescribe you another mouthwash in case of complications or pain.

Rinsing your mouth

The mouthwash helps to keep your mouth moist, remove remaining debris, and reduce the build-up of plaque (tartar) and risk of infection. Here is how:

- Rinse your mouth with 1 tablespoon (15 mL) of mouthwash for 30 seconds and then spit.
- Rinse your mouth rigorously 6-10 times a day.
- Rinse your mouth after brushing your teeth.
- Rinse your mouth after eating.
- Rinse your mouth after vomiting.
- If you have sores, try to rinse your mouth every 1-2 hours during the day and every 4 hours during the night (if you are awake).
- Avoid mouthwashes containing alcohol.
- **Tell the staff if you are unable to use the mouthwash.**

Lip care

- Use a water-based lubricant (e.g., Toothette®, E-Z®, Surgilube®).
- Apply the lubricant after mouth care, at bedtime, and as needed.
- **Do not use aloe-, oil- or petroleum jelly-based lubricants.**
- Do not lick your lips.
- Do not touch sores on your lips.
- You may apply saline compresses to your lips; a member of the care team may guide you with this.

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What should I do if my mouth is bleeding, if I have white spots or if I seem to have an infection?

Tell the care team if your mouth is bleeding, if you have white spots or if you seem to have an infection (redness, pain, swelling, fever).

How do I care for my mouth after treatments?

If you experienced mouth complications, continue to follow this advice until your mouth has healed. Stomatitis can last 1-6 weeks or more depending on your treatments (type, dosage, and duration).