
RESTORATIVE DEPARTMENT

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**Please speak to a member of staff if
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braille, audio or another language.**

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**Caring for your mouth during Chemotherapy
and Radiotherapy**



Royal Stoke University Hospital

Prevention of Dental Decay

If you find it difficult to reduce your sugar intake remember the frequency of sugar is worse than the actual amount consumed, therefore sugary foods/sugary drink consumed over a short period of time is less harmful than if they are eaten over a period of hours

Things to watch out for:-

- Ensure (nutritional drinks)– these are needed as part of your recovery but you should try consume within 5-10mins to minimize the risk of dental decay.
- carbonated drinks
- Tea and coffee containing sugar (swap for sweeteners)

Other things to consider

- Reduce excessive periods of sugar intake per day, stick to meal times only.
- Improve oral hygiene including tooth brushing technique and interdental cleaning.
- Check for 'hidden sugars' in processed foods
- Check for medications containing sugar. If in doubt check with your dietician.

During Radiotherapy.

Saliva moistens and lubricates the mouth. It protects against tooth decay and erosion/sensitivity. It also aids swallowing and speech. Radiotherapy frequency damages the glands which produce saliva and can make your mouth dry. Mucositis is a common side effect during radiotherapy, it affects the lining of your mouth and can cause mouth ulcers and pain or difficulty in swallowing.

During Chemotherapy.

Chemotherapy can also cause mucositis, this can also make the lining of the mouth very sore. Chemotherapy can also reduce the white cell count which may make you prone to dental infections.

What can I expect during cancer treatment?

About two weeks after the start of treatment you may notice an increase in mouth ulcers and mouth soreness, your mouth may feel uncomfortable towards the end of treatment and for up to 6 weeks after the completion of your treatment. Your mouth may also become dry and your taste can be affected. These changes will make it difficult to swallow, eat and clean your teeth.

What Might happen?

Short term effects	Long term effects
Dry mouth but can also be long term	Tooth decay
Altered taste	Teeth erosion
Difficulty swallowing	
Sore mouth	
Coated tongue	
Fungal infections	

What to Avoid

- Carbonated drinks
- Food or drinks containing sugar should be avoided in between meal times, especially 1 hour before bedtime
- Check with your doctor for alternative sugar free medicines
- Avoid tobacco products including 'vaping'
- Avoid alcohol and products containing alcohol
- Avoid spicy/acidic foods
- Do not scrub your teeth, brush gently
- Avoid drinks with caffeine switch to decaffeinated, as this may help with a dry mouth.

What can I do?

- Take regular sips of water to keep your mouth moist
(bottled water tastes better)
- Brush your teeth and tongue 3 x daily after meals with a soft small headed toothbrush. If the bristles are too rigid soften them in warm water.
- When possible use the interdental brushes / floss advised by your hygienist to clean the spaces in between your teeth.
- Brush with Duraphat 5000ppm toothpaste spit out after brushing, (do not rinse)
- Difflam Oral rinse 4 x daily during your treatment– may help with soreness. (on prescription)
- To reduce bacteria levels, use alcohol free Corsodyl (chlorhexidine) mouthwash 2 x daily, dilute if needed.
- Try chewing sugar free chewing gum, to encourage saliva flow.
- Have dietary foods such as milk or cheese at the end of meals to help neutralise any acid in your mouth.
- A teaspoon of sodium bicarbonate in a cup of warm water can be used as a mouthwash and help with a coated tongue.
- Soft, chilled foods and adding gravy/sauces to food may help with swallowing.