

Welcome to Module 6

Helping patients
with a dry mouth



HELPING PATIENTS WITH A DRY MOUTH

Diagnosis requires a thorough medical history with a particular focus on¹

- Reported symptoms
- Medication use
- Past medical history

A number of questionnaires have been developed in the past including¹

Thomson et al.

Questions/statements	Response/scoring
1. My mouth feels dry	Never = scoring 1
2. I have difficulty in eating dry foods	Hardly ever = scoring 2
3. I get up at night to drink	Occasionally = scoring 3
4. My mouth feels dry when eating a meal	Fairly often = scoring 4
5. I sip liquids to aid in swallowing food	Very often = scoring 5
6. I suck sweets or cough lollies to relieve dry mouth	
7. I have difficulty swallowing certain foods	
8. The skin of my face feels dry	
9. My eyes feel dry	
10. My lips feel dry	
11. The inside of my nose feels dry	

Pai et al.

Questions/statements	Response/scoring
1. Rate the difficulty you experience in speaking due to dryness	100mm horizontal scale
2. Rate the difficulty you experience in speaking due to dryness	
3. Rate how much saliva is in your mouth	
4. Rate the dryness in your mouth	
5. Rate the dryness in your throat	
6. Rate the dryness of your lips	
7. Rate the dryness of your tongue	
8. Rate the level of your thirst	

Fox et al.

Questions/statements	Response/scoring
1. Does the amount of saliva in your mouth appear to be too little, too much, or do you not notice it?	Yes/No
2. Do you have any difficulty swallowing?	
3. Does your mouth feel dry when eating a meal?	
4. Do you sip liquids to aid in swallowing dry foods?	



Osailan et al. developed a list of several helpful clinical signs when diagnosing dry mouth:¹

1. Sticking of an intraoral mirror to the buccal mucosa or tongue
2. Frothy saliva
3. No saliva pooling in the floor of the mouth
4. Loss of papillae of the tongue dorsum
5. Altered/smooth gingival architecture
6. Glassy appearance to the oral mucosa (especially the palate)
7. Lobulated/deeply fissured tongue
8. Cervical caries (more than two teeth)
9. Mucosal debris on palate (except under dentures)

Properties of saliva in patients with dry mouth

The saliva of patients with dry mouth becomes more viscous and foamy, losing its lubricating ability and adhering to teeth and mucous membranes. This thick saliva causes food and bacteria to adhere to the teeth, resulting in a build-up of plaque, which may ultimately contribute to periodontal disease.²



9 steps for managing a dry mouth³

1 Correct dehydration

- ✓ Drink enough water, and sip on water and other non-sugary fluids throughout the day. Rinse with water after meals.

2 Replace missing saliva

- ✓ Encourage patients to replace what their saliva has lost. This can be achieved with OTC or prescription products.

3 Stimulate saliva

- ✓ Recommend saliva stimulants such as sugar-free chewing gum with xylitol or diabetic sweets.

4 Avoid consuming dry foods

- ✓ Sip water or non-alcoholic drinks with meals to soften food. Avoid dry, hard or crunchy foods. Eat more foods with a high liquid content.

5 Avoid hot, dry environments

- ✓ Consider a humidifier for the bedroom

6 Protect against dental caries

- ✓ Avoid sugary foods and drinks
- ✓ Avoid sticky foods
- ✓ Keep your mouth very clean (twice daily toothbrushing and flossing)
- ✓ Use a fluoride toothpaste
- ✓ Have regular dental checks
- ✓ Keep dentures out at night

7 Protect the lips

- ✓ Apply a lip moisturiser





Protect against candida infection, periodontal disease and halitosis

- ✓ Keep your mouth very clean
- ✓ Keep your mouth as moist as possible
- ✓ Brush or scrape the tongue
- ✓ Keep dentures out at night
- ✓ Use antifungals if recommended by a specialist



Avoid anything that can make a dry mouth worse

Such as:

- ✓ Medication unless it is essential
- ✓ Alcohol (including mouthwashes)
- ✓ Smoking
- ✓ Caffeine
- ✓ Mouth breathing

References

1. Villa A, Connell C, Abati S. Diagnosis and management of xerostomia and hyposalivation. *Therapeutics and clinical risk management* 2015; 11: 45-51.
2. Cassolato S and Turnbull R. Xerostomia: clinical aspects and treatment.
3. Felix et al. Oral Medicine: 4. Dry Mouth and Disorders of Salivation. *Dental Update*. 2012; 39(10): 738-743.

Well done for
completing
Module 6!

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