

Oral Care Advice for Patients having Radiotherapy

Information for patients, relatives and carers

For more information, please contact:
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Radiotherapy and chemotherapy are treatments used to treat cancer. However, they can have some side effects in your mouth.

It is very important that you have a thorough dental check-up before starting your cancer treatment and your cancer team will advise you to see a NHS Restorative Dentistry Consultant or one of their team.

Before starting cancer treatment

Why do I need to see a Restorative Dentist before my cancer treatment?

It is important to have a thorough dental check-up before you start your treatment for cancer. The Restorative Dentist will:

- Advise you on how to look after your mouth during and after your cancer treatment
- Identify any teeth that need dental treatment before your cancer treatment
- Discuss and start to plan any dental treatment you may need following your cancer treatment

Why do I need to have dental treatment before starting radiotherapy?

If you were to have toothache or dental problems during your radiotherapy or chemotherapy, it might disrupt or delay your treatment: it is very important that this be avoided if at all possible.

It is also important to reduce the risk of future dental problems, and particularly the need for tooth extractions, in the area of your radiotherapy. Radiotherapy to the jaws affects the blood supply to the bone. This reduces the ability of the jawbone to heal if you have an infection, have a tooth removed or undergo any surgery in the area. If you have a tooth out in an area where you have had radiotherapy, the bone may not heal properly.

An infection can develop in the bone called Osteoradionecrosis (ORN). ORN can be very difficult to treat, requiring antibiotics or further surgery. ORN affects around seven percent of people who have extractions following high dose radiotherapy to the jaws.

What dental treatment might I need before starting cancer treatment?

You may not need any treatment other than advice about how to look after your mouth during and after your cancer treatment. Your GP will be asked to give you a repeat prescription for high fluoride toothpaste (Duraphat).

Using these will help protect your teeth. You can start using these straight away and continue long term.

If you are in the middle of orthodontic (brace) treatment, this will be stopped, and any fixed braces removed.

You may be advised to have a scaling, fillings or extraction (removal) of teeth. Sharp teeth or fillings may be smoothed. Teeth may require extraction because of decay, infection or gum disease, any of these mean it is very likely that the teeth will go on to cause you problems.

Your Restorative Dentist may recommend that some teeth be removed which do not seem to be causing you any problems. Sometimes people need the removal of many or all of their teeth before starting cancer treatment. This is because these teeth will be at high risk of causing problems in the future.

Who will do this dental treatment for me?

If you have your own dentist, they may be able to carry out fillings or extractions for you. If not, then you will be given an appointment at the Hospital for this.

Extractions should be carried out as soon as possible to allow the gum and bone to start to heal before your radiotherapy starts. If you need extraction of multiple teeth, this might be done under general anaesthetic.

If you are having an operation to remove your cancer, your extractions may be done at the same time.

During radiotherapy or chemotherapy treatment

What changes should I expect in my mouth during treatment?

Oral soreness (Mucositis)

Dry mouth

Altered taste

How do I need to look after my teeth during treatment?

It is very important that you keep your teeth and mouth as clean as possible to help reduce discomfort.

During your cancer treatment, your mouth may be too sore to use a normal toothbrush and toothpaste. Stop using high fluoride toothpaste and mouthwash during your treatment if your mouth becomes sore.

SLS free unflavoured toothpaste (such as Sensodyne Pronamel) or a children's toothpaste and a soft toothbrush may be helpful. If this toothpaste makes your mouth too sore, try brushing with only plain water on your toothbrush twice a day.

If toothbrushing is difficult, or you are unable to brush your teeth at all, you should follow the advice of the team at your oncology centre. This will vary depending on your level of discomfort.

They will have a range of recommendations for mucositis including ice chips/iced water to cool the mouth, frequent saline (salt water) mouth rinses, frequent sodium bicarbonate mouth rinses or a barrier mouth rinse such as Gelclair.

It is very important that you try to resume use of your normal brush and toothpaste as soon as possible once the mouth is comfortable and any ulceration has healed. This may take several weeks to progress from Children's toothpaste to use of the prescribed toothpaste and adults brush (Duraphat).

If you wear dentures, they may become uncomfortable while your mouth is sore because of your cancer treatment. You may need to stop wearing them during your treatment. However, if you have an obturator denture, it is important not to take this out for long periods. If you are having difficulty, please discuss this with your radiotherapy team. You may be advised to make an appointment with your Restorative Dentist for adjustment.

After cancer treatment

A Restorative Dentist will see you again after you have finished your radiotherapy at about three months. Depending on what dental treatment you need, this may be provided within the Hospital, or you may be discharged back to your own dentist.

Following radiotherapy, your teeth will be at a higher risk of decay. It is very important that you have regular dental check-ups with your own dentist: at least every three months initially. We will write to your dentist with some advice on how to help you keep your teeth healthy. For example, this may involve applying fluoride varnish to the teeth at regular intervals.

How do I look after my teeth long term?

Saliva helps protect teeth from decay and gum disease. Your cancer treatment may mean that you have less saliva, so your teeth are at a higher risk of decay and gum disease. Using high fluoride toothpaste and mouthwashes, as well as using floss or interdental brushes will help to protect your teeth.

Following your cancer treatment, you may experience lost or altered taste. It is important to avoid too much sugary foods or drinks because there is a high risk of damage to your teeth.

Once your dieticians are happy that you are maintaining your weight, sugary foods or drinks should ideally be kept to mealtimes only. If you have these between meals, before bed or overnight, you may rapidly get tooth decay. If your dietician has advised you to have high energy drinks/snacks, then brush your teeth or use fluoride mouthwash beforehand.

If you have a dry mouth, food may stick to your gums and teeth. Brushing your teeth or rinsing your mouth out with water or fluoride mouthwash after meals will remove the food and protect your teeth from decay.

Chewing sugar-free gum is sometimes helpful if you have a dry mouth. Some patients manage with frequent sips of water, or others use saliva substitutes.

Dental extractions should be avoided if possible in areas of your mouth where you have had radiotherapy. This is due to the risks of infection and osteoradionecrosis. If you need extractions following radiotherapy, your dentist may refer you to the Oral Surgery department for treatment. You will be told any precautions that are required to reduce the risk of problems afterwards.

Protecting your teeth

- Brush your teeth at least twice a day
- Use a high fluoride toothpaste (Duraphat)
- After brushing, spit out any excess but do not rinse out with water
- Use floss or interdental brushes as advised by your dentist
- Keep sugary food and drinks to mealtimes only
- Either brush your teeth or rinse with water or fluoride mouthwash after eating
- See a dentist every three to six months for checkups.

I have dentures, how will these be affected?

A reduction in the amount of saliva in your mouth may make dentures difficult to tolerate. Having less saliva to lubricate your mouth may mean that dentures are more likely to rub and cause soreness. If your dentures cause ulcers, do not wear them: see your dentist for adjustment.

Dentures may feel looser: the reduction in saliva also reduces the 'suction' that holds your dentures in place. If you have had surgery to your mouth, the muscles may not be able to control the dentures very well. Your dentist will tell you if you need new dentures. If you have had teeth extracted before radiotherapy, it will be several months before dentures can be constructed to allow for the jawbone to heal and bone remodelling to occur.

Following radiotherapy, you will be at higher risk of fungal infections (thrush). You should clean your dentures after meals and leave them out at night. You should soak your dentures overnight in an appropriate cleanser, e.g., Dentural.

If you have any questions, please ask a member of the Restorative Dentistry team.

Dental Nurse's answerphone 01904 726408 Department Secretary 01904 725614

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Jane Russell, Medical Secretary, The York Hospital, Wigginton Road, York, YO31 8HE, telephone 01904 725614 or email jane.russell9@.nhs.net

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

Please telephone or email if you require this information in a different language or format, for example Braille, large print or audio.

如果你要求本資 不同的 或 式提供,電或發電

Jeżeli niniejsze informacje potrzebne są w innym języku lub formacie, należy zadzwonić lub wysłać wiadomość e-mail

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