

Mouth and throat problems during cancer treatment

Patient information

Mouth and throat problems can occur in patients having anti-cancer treatment such as chemotherapy or radiation therapy to their head and neck area. Patients who have both treatments are likely to have more severe mouth problems.

What are the most common mouth problems?

The most common mouth and throat problems during cancer treatment are:

- Mucositis
- Stomatitis
- Dry mouth (xerostomia)
- Mouth infections
- Difficulty swallowing (dysphagia)
- Taste changes (dysgeusia)

Patients having radiation therapy may also experience:

- Difficulty opening your mouth (trismus)
- Voice and speech changes (dysphonia)

Important

Contact your doctor or nurse immediately if you:

- have a temperature of 38°C or higher
- have uncontrolled pain
- are unable to eat or drink
- are bleeding from the mouth
- have difficulty opening your mouth or swallowing
- have white spots in your mouth
- are coughing a lot when eating or drinking

If you cannot contact your treatment team, go to the nearest emergency department for help.

General information for mouth and throat care

You can help prevent and treat some mouth problems by keeping your mouth clean and moist.

Things to do to keep your mouth clean

- Brush your teeth and tongue gently after each meal and at bedtime using a soft or electric toothbrush and a mild toothpaste containing fluoride.
- Rinse your mouth and dentures after you eat or brush your teeth. Use either:
 - 1/4 teaspoon of salt or bicarbonate of soda mixed in 1 cup of warm water, or
 - an alcohol-free mouthwash.
- Take your dentures out when you do not need them and clean them well after using them.
- If your mouth is too sore to brush, or you have bleeding when you brush, rinse your mouth as above.
- **Remember:** DO NOT use a mouthwash that contains alcohol.

Dental flossing

- If you usually floss your teeth, you can continue during treatment, but only if there is no bleeding when you floss.
- If there is bleeding when you floss, stop flossing. This could cause an infection in the mouth or in the bloodstream.
- If you have never flossed do not start during treatment.

Mucositis and stomatitis

Mucositis happens when anti-cancer treatments damage the cells lining the gastrointestinal/digestive tract (gut). This can cause pain, sores and ulcers in the mouth, throat and gut.

- Chemotherapy can cause mucositis in the mouth, throat and anywhere in the gut.
- Radiation therapy only causes mucositis in the area where the treatment is given.

Stomatitis is inflammation (swelling) of the mouth. It can affect any part of your mouth and throat, including cheeks, gums, tongue, and lips.

Mucositis and stomatitis can stop you from eating, drinking, and sleeping properly. The ulcers/sores in your mouth may heal slower than usual, and this means there is more opportunity for infection to occur.

Signs and symptoms of mucositis and stomatitis include:

- shiny, swollen, or red gums
- painful spots, sores, ulcers in your mouth
- bleeding in your mouth
- a white coating on your tongue or in your throat
- mouth infections
- difficulty and pain with eating, swallowing, or wearing dentures
- sensitivity to hot, cold, salty, spicy, or acidic foods and drinks.

Mucositis and stomatitis usually get better a few weeks to months after the end of treatment but can take longer to improve if caused by radiation therapy.

Dry mouth

Dry mouth (xerostomia) happens when anti-cancer treatment damages the salivary glands, so they make less saliva (spit). Saliva is important for keeping your mouth healthy. Dryness of the mouth can lead to dental decay (holes in your teeth) and makes it difficult to eat.

Signs and symptoms of xerostomia include:

- thick or rope like saliva and difficulty with swallowing or spitting saliva out
- mouth infections
- a sticky or dry feeling in your mouth
- problems chewing and tasting food
- problems swallowing
- difficulty talking, as your tongue can get stuck to the inside of your mouth.

A dry mouth caused by radiation therapy can last for months after treatment and can be permanent in some patients.

Mouth infections

Mouth infections can happen when anti-cancer treatments upset the balance of bacteria in your mouth.

The most common infection is oral thrush. This usually appears as white or yellow patches or coatings on the lining of your mouth and tongue. The skin inside your mouth can be very red and sore. Infections are serious when you are having cancer treatment. Mouth infections should be assessed by a health professional, and treatment started immediately to help clear the infection. Talk to your treatment team if you think you have an infection.

Difficulty swallowing

Difficulty swallowing can happen when anti-cancer treatments weaken or damage the muscles and nerves used for swallowing. Some people have problems swallowing certain foods or liquids, while others cannot swallow at all.

Signs and symptoms of dysphagia include:

- gagging or choking when eating or drinking
- food or drink getting stuck in your throat or going down the “wrong way”
- needing to cough or clear your throat when eating and drinking
- eating a meal takes a long time (>30 minutes).

In severe cases, you might need to change to a liquid diet. Another option is to have food and drink given through a feeding tube that goes directly into your stomach.

Taste changes

Taste changes happen when anti-cancer treatments, affect your taste buds and salivary glands. The treatments can cause your sense of taste to change. Some foods may begin to taste bitter, too sweet, metallic or have no taste.

These changes may begin 2-3 weeks after starting treatment. Most changes get better with time, but in some cases the sense of taste may not fully return to the way it was before treatment.

Difficulty opening your mouth

It can be difficult or painful to open your mouth when the muscles you use to do this are in the area receiving radiation. Not being able to fully open your mouth can make it hard to clean your mouth properly, and hard to eat and talk.

This problem develops slowly and usually gets worse over time. It can become a permanent problem if not treated.

Voice and speech changes

Voice and speech changes happen when your voice box (larynx) is in the area receiving radiation. The radiation can also make it difficult to talk.

Voice and speech changes normally begin 2-3 weeks after starting radiation therapy. Your voice and speech often go back to normal after your treatment finishes but, for some people, the changes can be permanent.

Tips to help with mouth problems

Keep your mouth clean	<ul style="list-style-type: none">• Start mouth care, including cleaning your mouth at the beginning of your treatment.• See information above: <i>'Things to do to keep your mouth clean'</i>.
Protect your mouth	<ul style="list-style-type: none">• Stop or cut down on smoking, ask your doctor for help with this.• Keep your mouth and lips moist by using lip balm, sucking on ice chips or sugarless lollies, sipping water, or chewing sugarless gum.• Ask your doctor about gels, lozenges or mouth sprays that help make saliva (spit).
Check your mouth	<ul style="list-style-type: none">• Use a mirror and bright light to look inside your mouth every day. Check for sores, red or white areas, or bleeding.
Look after your teeth	<ul style="list-style-type: none">• See a dentist to have any dental problems fixed before you start your anti-cancer treatment.• Tell your dentist you are having cancer treatment at each visit.
Managing pain	<ul style="list-style-type: none">• Take your pain medicine as prescribed, particularly before meals.
Eating and drinking	<ul style="list-style-type: none">• Choose soft, moist, and easy to swallow foods, such as rice, mashed potatoes, scrambled eggs, and yoghurt.• Use gravies and sauces to make foods softer and easy to eat.• Do not eat crunchy, acidic, or spicy foods.• Do not drink alcohol, sour juice, or fizzy drinks.• Avoid very hot or very cold foods and drinks.• Try different foods and drinks. You might find you enjoy a food or drink that you previously did not like.
Mouth opening and swallowing	<ul style="list-style-type: none">• Perform any mouth and/or jaw exercises your treatment team give you. This will help strengthen muscles you use when eating and talking and help make it less painful to open your mouth.

Humidification

You can use humidification to warm and moisten the air you breathe in. To do this you can:

- get a humidifier from the pharmacy/chemist or
- turn on the shower and close all the windows and doors and let the room get steamy or
- lean over a bowl of hot water and place a towel over your head. Let the water cool slightly before breathing in the steam.

Be careful not to burn yourself or overheat when doing this.

Things to ask your doctor or nurse

- ✓ What problems should I call you about?
- ✓ What foods and drinks should I have?
- ✓ What kind of toothpaste and toothbrush are best for me?
- ✓ If brushing hurts, what other ways can I clean my mouth?
- ✓ What medicines and mouth products can help?

Contact numbers

Daytime: _____

Night/weekend: _____

For information for patient and carers scan the QR code



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