

Living with dry mouth: advice on self-care for those with Sjögren's Syndrome

By Rui Albuquerque, Academic Clinical Lecturer/Specialist Trainee in Oral Medicine, College of Medical & Dental Sciences, The School of Dentistry, University of Birmingham

The reduction of salivary flow, caused by Sjögren's syndrome, can have an important impact on a person's quality of life. Mouth dryness causes discomfort [perhaps due to ulceration, thinning of the lining of the mouth, thrush and other infections], difficulty in speaking and swallowing, and difficulty in wearing dentures. Whilst dry mouth can be very uncomfortable there are 3 important factors that can improve quality of life.

The 3 improvements:

Improve your: Mouth lubrication, Diet and Oral health care

1. Mouth lubrication:

Avoid alcohol, tobacco, smoking and dry environments. The use of salivary substitutes such as saliva replacement gels and sprays, sugar free chewing gums, lozenges/pastilles are very useful before meals and whenever one has a sensation of having a dry mouth.

There are a large range of products available, so try them and see what suits you best. Some products are designed to replace saliva (for example gels) whilst others are designed to stimulate the production of saliva (for example, lozenges or sugar free chewing gum). Your dentist, doctor or specialist may be able to advise you, particularly if there is no improvement of symptoms. The use of pilocarpine tablets is another option. These stimulate the production of saliva in people who have some salivary gland tissue that is still working. However they can produce some side effects such as stomach cramps, sweating and increased frequency of passing water. The use of creams, ointments and oils can be useful for dry, cracked lips.

2. Diet

Saliva is very important in keeping your teeth and the lining of the mouth healthy. Saliva neutralises the acids that occur when mouth bacteria break down sugars in food. Without enough saliva dental decay can occur much more readily.

Reduce your sugar intake and ideally avoid the intake of sugary and sticky foods or sugary drinks between meals. Acidic, abrasive or very spicy foods can irritate the lining of the dry mouth. Drink plenty of water during meals and when you want something sweet consider alternatives to sugar, for example low calorie sweeteners, as these are not broken down to acids by oral bacteria, and thus, cannot cause dental caries.

3. Oral Health Care

Regular dental care is very important so your dentist can identify dental decay early on together with any other problems that may be due to dry mouth. Regular professional cleaning of the teeth and gums with the dental hygienist is also very useful. The hygienist can also provide advice on how you can best look after your teeth and gums, showing you how to brush more effectively and providing advice on interdental cleaning with floss or special interdental brushes. You should ideally brush your teeth and gums after every meal and last thing at night. Topical fluoride applications are also very helpful in reducing dental decay. There are a variety of preparations available including mouthrinses, high fluoride concentration toothpastes and professionally applied varnishes.

If you wear dentures, these should always be taken out at night and soaked in a proprietary denture cleaner. Those containing hypochlorite are particularly effective for plastic dentures, but can tarnish metal dentures. There are alternative products specially made for metal dentures.

Other problems associated with dry mouth may include thrush, poor denture retention and salivary gland swelling. Your dentist can give advice as to how best to manage these conditions.