Head and Neck Radiation Treatment and Your Mouth

While head and neck radiation helps treat cancer, it can also cause side effects in your mouth. Some of these problems could cause you to delay or stop treatment. To help prevent serious problems, see a dentist at least two weeks before starting radiation.

How Does Head and Neck Radiation Affect the Mouth?

Doctors use head and neck radiation to treat cancer because it kills cancer cells. But radiation can harm normal cells, including cells in the mouth. Side effects include problems with your teeth and gums; the soft, moist lining of your mouth; glands that make saliva (spit); and jaw bones.

Side Effects in the Mouth Can be Serious.

- The side effects can be painful and make it hard to eat, talk and swallow.
- You are more likely to get an infection, which can be dangerous when you are receiving treatment.

If the side effects are bad, you may not be able to keep up with your cancer treatment. Your doctor may need to cut back on your treatment or may even stop it.

Do Children Get Mouth Problems Too?

The side effects head and neck radiation cause in children depend on the child's age. Problems with teeth are the most common. Permanent teeth may be slow to come in and may look different from normal teeth. Teeth may fall out. The dentist will check your child's jaws for any growth problems.

Before radiation begins, take your child to a dentist. The dentist will check your child's mouth carefully and pull loose teeth or those that may become loose during treatment. Ask the dentist or hygienist what you can do to help your child with mouth care.

Remember...

- Visit your dentist before your head and neck radiation treatment starts.
- Take good care of your mouth during treatment.
- Talk to your dentist about using fluoride gel and/or other products to help prevent cavities and other side effects that head and neck radiation causes.
- Talk regularly with your oncologist and dentist about any mouth problems you have during and after head and neck radiation treatment.

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What Side Effects Does Head and Neck Radiation Cause?

Some problems go away after treatment. Others last a long time, while some may never go away. You can see and feel most of these problems, so check your mouth every day for:

- Dry mouth.
- Higher risk of cavities.
- Loss of taste.
- Sore mouth and gums.
- Infections.
- Jaw stiffness and jaw bone changes.

Why Should I See a Dentist?

If you go to the dentist before head and neck radiation begins, you can help prevent serious mouth problems. Side effects often happen because a person's mouth is not healthy before radiation starts. Not all mouth problems can be avoided but the fewer side effects you have, the more likely you will stay on your cancer treatment schedule. It's important for your dentist and oncologist to talk to each other before your radiation treatment begins. Be sure to give your dentist your oncologist's phone number.

When Should I See a Dentist?

You need to see the dentist at least two weeks before your first radiation treatment. If you have already started radiation and didn't go to a dentist, see one as soon as possible. You should also see a dentist as recommended or needed during and after treatment.

What Will the Dentist and Dental Hygienist Do?

- Check your teeth and gums.
- Take x-rays if necessary.
- Take care of mouth problems especially infected teeth which may cause problems later.
- Show you how to take care of your mouth to prevent side effects.
- Show you how to prevent and treat jaw stiffness by exercising the jaw muscles 3 times a day. (Open and close the mouth as far as possible without causing pain 20 times.)

What Can I Do To Keep My Mouth Healthy?

See a dentist before you start cancer treatment. Ask about whether you may need artificial saliva, fluoride and/or other rinses. Once your treatment starts, look in your mouth every day for sores or other changes. These tips can help prevent and treat a sore mouth.

To keep your mouth moist:

- Sip water or sugarless drinks often.
- Suck on ice chips.
- Chew sugarless gum or suck on sugarless hard candy to stimulate saliva flow; citrus, cinnamon or mint-flavored candies are good choices.
- Use a saliva substitute.
- Don't use tobacco or alcohol. They dry out the mouth.
- Use a humidifier at night.

To clean your mouth, tongue, and gums:

Check with your oncologist or dentist regarding any restrictions or changes to brushing and flossing. Typically, you should brush your teeth, gums, and tongue with an extra-soft toothbrush after every meal and at bedtime. If brushing hurts, soften the bristles in warm water.

- Floss your teeth gently every day. If your gums bleed and hurt, avoid the areas that are bleeding or sore, but keep flossing your other teeth.
- Use fluoride toothpaste.
- Use the special fluoride gel and/or other products your dentist prescribes.
- Don't use mouthwashes with alcohol in them.
- Talk to your oncologist or dentist about your dentures, because dentures that don't fit well can cause problems.

If your mouth is sore or dry, watch what you eat and drink:

- Choose foods that are good for you and easy to chew and swallow.
- Take small bites of food, chew slowly, and sip liquids with your meals.
- Eat moist, soft foods such as cooked cereals, mashed potatoes, and scrambled eggs.
- Be aware that spicy, salty, or acidic foods may irritate your mouth.
- Avoid drinks with caffeine, such as coffee, tea, and some sodas. Caffeine can dry out the mouth.
- Stay away from sharp, crunchy foods which could scrape or cut your mouth.
- Sip water or a sugarless drink during meals. This will make chewing and swallowing easier. It may also improve the taste of food.

Call your doctor or nurse when your mouth hurts

Work with them to find medicines to help control the pain. If the pain continues, talk to your oncologist about stronger medicines.