

Dry mouth may be manifested by increased plaque accumulation and an increased need for frequent dental prophylaxis. The teeth may appear hypocalcified or badly decayed at the gum line. Cavities of this nature are termed cervical tooth caries or, more frequently, "amputation caries," as fracture of the tooth at the gum line or "neck of the tooth" may result. Tooth decay in individuals with xerostomia develops and progresses rapidly.

The tongue of a dry mouth patient may appear smooth, swollen, red and inflamed. This usually is associated with a severe burning feeling that may interfere with normal eating and drinking. Recurrent oral yeast infections may also appear as a "coated" tongue.

Scarring and marks of cheek biting are a common finding in xerostomic patients. In the absence of salivary lubrication that assists in sliding the oral tissues against each other, the cheeks tend to stick to the teeth and get trapped between the upper and lower teeth during chewing.

Swelling of the salivary glands, and dry and cracked lips are not uncommon findings in people with Sjogren's syndrome.

### **Management of Xerostomia**

Individuals suffering from xerostomia are more susceptible to extensive dental caries, periodontal (gum) diseases and to bacterial and yeast infection, due to the loss of the protective functions of saliva (Table 3). Therefore, frequent dental visits and special home dental care, flossing and brushing after each snack and meal is extremely important. Avoiding sugary snacks and daily use of fluoride gel are necessary measures to control the development and progression of dental caries. Yeast infections can be controlled by antifungal medications.

Table 3. Treatment Goals

1. Relieve oral dryness
2. prevent dental caries
3. treat yeast infection
4. monitor disease progression

Management of xerostomia, in most cases, is palliative and directed to relieving discomfort. Salivary substitutes can be helpful in some cases. Increasing fluid intake is recommended as well as using salivary stimulants, such as sugarless chewing gum and sugarless candies to stimulate the salivary output. However, sour lemon drops and citric acid juices are not recommended generally for patients with natural teeth because of the potential demineralizing (softening) effect on the teeth. Excessive use of citrus hard candies may also have the potential of irritating the dry oral mucosa. Frequent dental consultations and topical fluoride applications are necessary for the management of dental problems.