XEROSTOMIA ("DRY MOUTH")

What Is It?
Xerostomia, decreased or absent salivary flow, sometimes known as dry mouth, is not a normal part of aging. Medical conditions and medications increase the prevalence of xerostomia. The dental hygienist is often the first health care professional to examine a patient’s oral cavity. It is important to determine the underlying causes of dry mouth so that the most effective treatment plan can be presented to the patient.

Signs and Symptoms
Oral signs and symptoms in vary degrees can include:
- Dry, cracked lips and corners of the mouth
- Thicker or “ropey” saliva
- Dry thin pale oral mucosa
- Sticky and/or dry feeling
- Alterations in taste
- Sensation of burning and/or pain
- Difficulty with speaking/chewing/swallowing.

Consequences
Saliva plays an integral role in oral health. Saliva lubricates the oral tissues, maintains a neutral pH and assists in tasting, digesting and swallowing food. Among the oral health consequences of xerostomia:
- High risk of dental caries due to decrease in antibacterial and acid buffering properties of saliva
- Reddened/fissure tongue
- Predisposition to oral fungal infections (Candida Albicans)

Treatment and Management
Treatment and management are aimed at relieving dry mouth through the stimulation of saliva and use of products that moisturize oral tissues. Members of the dental team can help determine the appropriate management of xerostomia dependent on accurate diagnosis and individual patient preferences.
- Adequate hydration: increase intake of water and air humidifier and avoid alcohol containing products
- Saliva substitutes: Use rinses, sprays, moisturizing oral gels, lozenges
- Prescription medications: Stimulate salivary production or relieve symptoms
- Prevent caries and promote strengthening enamel (remineralization):
  - Nutrition/diet: Minimize sugar intake and choose sugar-free products
  - Fluoride treatments: Over-the-counter toothpastes/rinses; professional fluoride treatments/varnish; prescription-strength fluoride toothpastes
  - Oral self-care: Maintain regimen of tooth brushing and interdental cleaning with floss or other aids
  - Xylitol products: Gums/mint/lozenges
  - Dental hygiene recare: 3-6 months to monitor and adjust treatment regimens