

# Dental care and treatment for patients with head and neck cancer

Department of Restorative Dentistry

Information for patients

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## Why have I been referred to the Restorative Dentistry Team?

Treatment of most head and neck tumours will have an effect on your ability to eat, drink and speak. It may also alter your facial and dental appearance, and it is also likely that the quality and amount of saliva will be altered.

You have been referred to the Restorative Dentistry Team for detailed discussion about ways you could improve the look and function of your teeth and jaws.

If you require any urgent dental treatment, you may be advised to see your dentist and dental hygienist.

## How will my dental care be organised?

Your dental care will usually (although not always) be delivered in three stages:

1. Initial (before surgery)
2. Intermediate
3. Long-term

### 1. Initial dental management:

This will involve assessment of your teeth, gums and the soft tissue in your mouth. Any existing dentures, fillings, crowns and bridges will also be assessed. You will be given advice on oral hygiene and your diet.

We may need to obtain impressions (moulds) of your teeth before your cancer treatment begins. These moulds are useful in planning your surgery, radiotherapy and your dental requirements after treatment.

You may also need to have dental X-rays so that we can look at your teeth and the bone around them in detail.

**Health information and support is available at [www.nhs.uk](http://www.nhs.uk)  
or call 111 for non-emergency medical advice**

Visit [www.leicestershospitals.nhs.uk](http://www.leicestershospitals.nhs.uk) for maps and information about visiting Leicester's Hospitals  
To give feedback about this information sheet, contact [InformationForPatients@uhl-tr.nhs.uk](mailto:InformationForPatients@uhl-tr.nhs.uk)

## How will my dental care be organised? (continued)

You may be advised to have some, or (in some cases) all of your teeth removed. This will depend on their condition, and is particularly important if the teeth are close to the tumour site, or if you are going to have radiotherapy

You may also require fillings, other repair work at your dentist, or a dental hygiene appointment, before you start your cancer treatment.

### 2. Intermediate dental management:

The aim of intermediate dental treatment is to provide you with continued dental support as you recover from your cancer treatment.. This may involve the use of a temporary cover plate or denture (which may need adjusting as you recover), as well as advice about oral hygiene and how to look after your gums.

If you have had teeth removed, your dentist can usually organise tooth replacement with dentures or other dental appliances. However, in very complicated cases, dentures may have to be provided as part of your hospital treatment, or such treatment may not be possible.

### 3. Long-term dental management:

In more complex cases, we may wait for 12 to 18 months before deciding on what dental treatment you need. This is to allow for healing and jaw changes as you recover from treatment. If you have a hole in the roof of your mouth, this might include the use of an obturator (special plastic plate or denture with extension into the hole).

Additional procedures, such as flaps to close the hole and bone grafting to replace missing bone, may be used if appropriate for you. It may be possible to replace missing teeth with dental implants.

There are some pictures on the next page that may help you understand the information above.

## How might my cancer treatment affect my mouth?

### Surgery

Effects of surgery may include:

- Altered jaw shape
- Altered bite
- Restricted tongue movements, which may affect swallowing
- Isolated areas of discomfort or pain.

These will be discussed in detail by your surgeon and explained more fully in other leaflets, which you will be given.

## Pictures to help you understand the information above



Missing upper teeth



Replacement with dental bridge



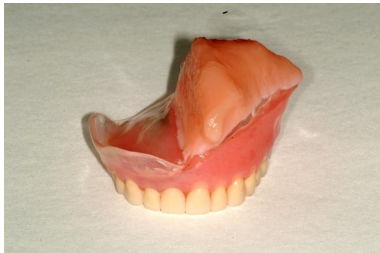
Altered facial appearance  
and reduced mouth opening



Provision of dentures



Tooth decay and gum problems can  
be made worse by radiotherapy



Dental obturator



Upper obturator and  
complete lower denture



Multiple implants in the lower  
jaw



Lower jaw restored with  
implant bridge

## How might my cancer treatment affect my mouth?

### Radiotherapy:

As part of your treatment you may be advised to have radiotherapy. Although the aim of radiotherapy is to stop the growth of cancer cells, side effects can also affect normal tissues around tumours. Before your radiotherapy treatment starts you will usually have an appointment for assessment and planning of your treatment to reduce the chance of any side effects.

It is vital to maintain good oral health before starting radiotherapy treatment.

Possible side effects of radiotherapy include:

- **Dry mouth** - radiotherapy could reduce the function of the salivary glands in your mouth, leading to dryness. This could make swallowing quite difficult and painful. Regular sips of water may help.
- **Tooth decay** - you are at a higher risk of developing tooth decay if you suffer from a dry mouth. Saliva normally helps to lubricate the mouth and dilute or wash away any acids formed by bacteria in the mouth. Fluoride toothpaste, gels and mouthwashes help to prevent tooth decay.
- **Ulcers and mouth tenderness** - may occur after a couple of weeks of treatment. Avoid spicy foods and try having a soft diet to help reduce discomfort.
- **Delayed healing** - radiotherapy affects blood vessels, and this results in a reduced blood supply to the mouth and jaw bones. This could lead to slower healing and possible jaw infections following dental extractions.
- **Mouth and gum infections** - there are normal bugs in the mouth that help to keep it healthy. The level of these bugs may be reduced as a result of radiotherapy, which could lead to infection in your mouth. You might also experience bleeding gums.
- **Reduced mouth opening** - some patients have problems opening their mouths fully after radiotherapy and surgery. This may affect future dental treatment and also cause problems with eating. You will be advised about things that may help, such as mouth opening exercises and using wooden spatulas and Therabite devices.

**Therabite device:**



**Wooden spatulas:**



## How can I reduce the side effects of radiotherapy?

### Before you start your radiotherapy:

Visit your dentist and dental hygienist for a check-up. You may require a scale and polish, fillings or removal of some teeth.

Before your planning scan you may be referred to have a mouth guard made. The mouth guard will:

- Help to ensure that the correct area is treated.
- Support mouth opening during treatment.
- Shield normal tissues by keeping a safe distance between them and the radiation source.
- Reduce long-term problems with mouth opening.

### During your radiotherapy:

Remember to have frequent sips of water to ease any discomfort, but avoid sugary drinks as these increase the risk of tooth decay.

You may find that, as your treatment progresses, mouth opening becomes increasingly difficult. Remember to carry out mouth exercises, and wear your mouth guard if you have one.

If your dentures hurt your gums, try taking them out, especially at night, and ask your dental team for advice.

### After your radiotherapy:

It is vital that your teeth and gums are kept as clean as possible. The use of fluoride toothpastes, gels and mouthwashes is helpful in reducing the risk of tooth decay. Other products are also available to help reduce tooth decay. Please ask a member of the dental team about these. Continue with the mouth exercises, and your mouth guard, as advised.

Maintaining a healthy diet is important. You should avoid sugary foods and acidic fizzy drinks, as these will increase your risk of tooth decay.

## Further information

Your radiotherapy team are able to provide you with further information. If you are concerned about any aspect of your dental care please contact a member of the Restorative Dentistry Team on:

Telephone: **0116 256 3525 or 0116 256 3526**

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على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل  
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Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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