

Recurring mouth ulcers

Oral & Maxillofacial Surgery

Information for Patients

Last reviewed: July 2025

Next review: July 2028

Leaflet number: 1258 Version: 2

What are mouth ulcers?

Mouth ulcers are painful patches that can appear anywhere inside the mouth. There are a number of different types and causes of mouth ulcers. 1 in 5 people can get an ulcer at some point in their lives. Women are more likely to get them than men.

Some people get mouth ulcers which keep coming back. This is called recurring mouth ulcers.

What can cause ulcers?

- **Immune response.** Ulcers are thought to happen because of the body's own immune system reacting against itself.
- **Vitamin deficiencies.** Deficiencies in iron and B12 can be a reason for ulcers. These ulcers often go away without treatment after 10 to 14 days. They come back if the vitamin levels are still low.
- **Injury** from ill-fitting dentures or trauma from a toothbrush.
- **Changes in hormone levels.** Some women get ulcers just before their period (menstruating), whilst others only get them after the menopause.
- **Stress and anxiety** can trigger ulcers in some patients.
- **Some medications** can cause ulcers:
 - Nicorandil, a medication used to treat angina.
 - Anti-inflammatory medications like ibuprofen.
 - Beta-blockers, medicines used to treat angina, high blood pressure, and abnormal heart rhythms.

Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice

Visit 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

- **Side effects** of chemotherapy or radiotherapy (known as mucositis).
- **Coeliac disease.** An immune disease where the body attacks itself when you eat foods that contains gluten.
- **Crohn's disease.** An inflammatory bowel disease, causing chronic inflammation of the digestive system.
- **Systemic lupus.** An inflammatory disease where the body attacks itself. It can affect the joints, skin, brain, kidneys, lungs and blood vessels.
- **Reactive arthritis.**, arthritis that happens in response to infection, elsewhere in the body.
- **Weakened immune system**, for example if you have had the cold or flu.

Aphthous ulcers

Aphthous ulcers are small, shallow but painful sores. They appear in the soft tissues of the mouth and at the base of your gums. These are the most common type of recurring mouth ulcers.

There are 3 main types of ulcers that can appear in the mouth. They are divided into different types based on their size, number and their healing pattern. However, they all appear yellow with a red border and oval or round shaped.

- **Minor** aphthous ulcers: the most common with 8 in 10 cases. They are often small, round or oval shaped, and less than 10mm across in size. They are pale yellow, with the area around looking red and swollen. 1 ulcer may appear, but up to 5 may appear at a time. It can take 7 to 10 days to heal without leaving a scar. In the mouth, they can appear inside the lips, cheeks, on the tongue and sometimes under the tongue.
- **Major** aphthous ulcers: these occur in 1 in 10 cases. They are 10mm or larger across. In most cases only 1 or 2 appear at a time, and can last for 2 weeks to several months. They heal but will leave a scar. They can be painful and make it painful to eat and swallow, especially if there is an ulcer on the roof of the mouth.
- **Herpetiform** ulcer: these occur in 1 in 10 cases. They are tiny, pin head sized ulcers, which are around 1 to 2 mm in size. Around 20 to 30 may appear at a time, which may all join together to form one large ulcerated area. These tend to appear under the tongue, on the sides of the tongue, but despite its name, is not caused by the herpes virus.

Is there any treatment available?

If the cause of your ulcer is linked to blood deficiencies (for example low iron or vitamin B12), then your GP can prescribe medications to correct this. If it is linked to things like chemotherapy/ radiotherapy, these will often settle once the treatment and its side effects on the body have eased.

When you get mouth sores that keep coming back, the main goal is to make them hurt less and help them heal faster.



Treatment options:

- **No treatment.** The ulcers often get better within 10 to 14 days on their own.
- **Steroid tablets.** For severe cases, we may prescribe dissolving steroids tablets, which you dissolve in 20mls of water. This mouthwash is held in the mouth for 3 minutes before spitting out. **This must not be swallowed.** This will help to reduce how often and how long you have the ulcers. In extreme cases, the clinician may consider prescribing steroids to be swallowed.
- **Anaesthetic mouthwash.** This can be used to help with discomfort. We often recommend **Diffiam** mouthwash/ spray. You can buy this over the counter at any pharmacy. If Diffiam is uncomfortable to use, there are also gel forms of numbing gel (topical anaesthetic). We would need to prescribe this.
- **Diluted Corsodyl mouthwash.** This can reduce how long you may have the ulcers and stop them becoming infected.

What can I do to help?

Your mouth may be sore or sensitive during a flare up. You may find your gums bleed when brushing, making it sore to brush as normal. However, you must continue keeping good oral hygiene to prevent plaque build up, as this can irritate your gums.

You may wish to try a soft or child's toothbrush. This will be gentler on the gums. Use small circular motions in each area. In addition, regular treatment with a hygienist is advised.

If you have an ulcer which stays longer than its usual cycle or up to 3 weeks and more, please see your dentist or GP as soon as possible.

Contact details

Maxillofacial Department, open Monday to Friday, 9am to 5pm.

Reception: **0116 258 5301**

Nurses station: **0116 258 5671**

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk