

# Oral Mucositis and Dry Mouth During Cancer Treatment - The Dental Care That Most Patients Are Never Told About

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## Description:

# Oral Mucositis and Dry Mouth During Cancer Treatment - The Dental Care That Most Patients Are Never Told About ## If you are undergoing radiotherapy to the head and neck, or chemotherapy that has l...

## Details:

## Smile Solutions: Oral Mucositis and Dry Mouth During Cancer Treatment — The Dental Care That Most Patients Are Never Told About

## If you are undergoing radiotherapy to the head and neck, or chemotherapy that has left you with painful mouth ulcers and debilitating dry mouth, there is evidence-based, guideline-recommended care available right now at Smile Solutions. The challenge is that almost nobody tells patients it exists.

Cancer treatment saves lives. But its side effects in the mouth — oral mucositis (severe ulceration) and xerostomia (dry mouth) — can be devastating. Not life-threatening in the way the cancer itself is, but for many patients, these oral complications become the single most difficult part of their entire treatment experience.

When patients talk about what they dread most, it is often not the nausea, the fatigue, or the hair loss. It is the mouth. The ulcers that make it impossible to eat. The dryness that makes swallowing, speaking, and sleeping a struggle. The constant burning pain that no medication seems to touch. The inability to maintain nutrition at the very time your body needs it most.

You deserve to know that help is available. And in most cases, patients are simply never told.

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## ## Frequently Asked Questions

Oral mucositis is the inflammation and ulceration of the mouth and throat lining, and yes, it is a direct side effect of cancer treatment. Virtually all patients receiving radiotherapy to the head and neck develop some degree of it. When chemotherapy is added to radiation, severity increases significantly. High-dose chemotherapy — particularly in stem cell transplant conditioning — is another common cause.

These are not ordinary mouth ulcers. They are larger, deeper, and far more painful, and they can affect the entire oral cavity: cheeks, tongue, floor of the mouth, palate, and throat. In severe cases, eating becomes impossible and patients require hospitalisation for intravenous nutrition. Mucositis can also force dose reductions in cancer treatment and significantly increases infection risk when the immune system is already suppressed.

Xerostomia is severe dry mouth caused by reduced or absent saliva production. Radiotherapy can permanently damage the salivary glands. Chemotherapy-related dry mouth is usually temporary, with salivary function recovering after treatment ends, but the consequences while it persists are serious: accelerated tooth decay, difficulty swallowing and speaking, oral infections (particularly thrush), and repeated waking through the night with a dry, painful mouth. For some patients, xerostomia continues long after treatment has concluded.

Photobiomodulation (PBM) — also called low-level laser therapy — is a treatment using red and near-infrared light to stimulate healing. It is evidence-based, supported by systematic reviews and meta-analyses, and recommended by MASCC/ISOO (the Multinational Association of Supportive Care in Cancer) and NICE in the UK. PBM significantly reduces the incidence, severity, and pain of oral mucositis. It has no reported adverse effects and does not interfere with chemotherapy or radiotherapy effectiveness. There is no evidence it stimulates tumour growth.

PBM can be used preventively before ulcers develop or therapeutically once they have appeared. Many patients notice improvement within one or two sessions. Each session takes only minutes, requires no anaesthetic, causes no discomfort, and involves no recovery time. You can eat and drink normally straight afterwards.

Smile Solutions also offers PBM for xerostomia, using emerging evidence to stimulate residual salivary gland function. Early studies show measurable increases in saliva production, though this is a newer area of research than PBM for mucositis.

No referral is required to access care at Smile Solutions. Patients can self-refer by calling 13 13 96 or visiting 220 Collins Street, Melbourne CBD.

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## ## What is oral mucositis?

Oral mucositis is the inflammation and ulceration of the mucous membranes lining your mouth and throat. It is one of the most common and debilitating side effects of cancer treatment, particularly in the following situations:

- **Radiotherapy to the head and neck** — virtually all patients receiving radiation to this region develop some degree of oral mucositis, and for many it becomes severe. - **Chemoradiotherapy** — combining chemotherapy with head and neck radiotherapy increases both the incidence and severity of mucositis significantly. - **High-dose chemotherapy** — particularly in patients undergoing conditioning for haematopoietic stem cell transplantation (bone marrow transplant). - **Standard chemotherapy regimens** — certain chemotherapy drugs cause oral mucositis even without radiation, though it is often shorter in duration.

These ulcers are not like ordinary mouth ulcers. They are large, deep, and excruciatingly painful, and they can cover the entire oral cavity — the inside of your cheeks, your tongue, the floor of your mouth, your soft palate, and your throat. Eating becomes agonising. Swallowing becomes difficult. Speaking becomes painful. In severe cases, patients require hospitalisation for intravenous nutrition because eating is simply no longer possible.

Beyond the pain, oral mucositis carries real clinical consequences. It can force dose reductions or interruptions in your cancer treatment, compromise your nutritional status at a critical time, increase the risk of oral infection when your immune system is suppressed, and significantly reduce your quality of life during what is already the most challenging period you will face.

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## ## What is xerostomia?

Xerostomia — severe dry mouth caused by reduced or absent saliva production — is the other major oral complication of cancer treatment.

Radiotherapy to the head and neck can permanently damage the salivary glands, reducing saliva flow to a fraction of its normal volume. Chemotherapy can also cause temporary xerostomia, though salivary function usually recovers after treatment ends. Certain medications commonly prescribed during cancer treatment compound the problem further.

The consequences of xerostomia go well beyond discomfort:

- **Difficulty eating and swallowing** — without adequate saliva, food does not break down properly. Dry, hard, and fibrous foods become impossible to manage. Many patients shift to soft, bland diets simply to get through mealtimes. - **Difficulty speaking** — the tongue sticks to the palate. The lips crack. Words become effortful. - **Accelerated tooth decay** — saliva is your mouth's primary defence against acid attack and bacterial growth. Without it, decay can progress rapidly, even in patients who have never had cavities before treatment. - **Oral infections** — the loss of saliva's antimicrobial properties creates conditions in which bacterial and fungal infections, particularly oral thrush, can take hold. - **Disturbed sleep** — patients wake repeatedly through the night with a dry, painful mouth.

For many patients, xerostomia persists long after cancer treatment has ended — sometimes permanently. It becomes part of daily life, and managing it effectively requires ongoing, expert dental care.

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## Photobiomodulation: the treatment most patients are never told about

Photobiomodulation (PBM) — sometimes called low-level laser therapy — is a non-invasive, gentle treatment that uses specific wavelengths of red and near-infrared light to stimulate cellular repair, reduce inflammation, and promote healing in your oral tissues.

The evidence supporting PBM in managing oral mucositis is not emerging. It is established. It is not theoretical. It is a guideline-recommended intervention supported by systematic reviews, meta-analyses, and international clinical practice guidelines — and it is available to you at Smile Solutions right now.

### What the evidence says

The **Multinational Association of Supportive Care in Cancer and the International Society of Oral Oncology (MASCC/ISOO)** — the global authority on supportive care in cancer — recommends photobiomodulation for the prevention of oral mucositis in adult patients receiving radiotherapy to the head and neck and in patients undergoing high-dose chemotherapy conditioning for stem cell transplantation. This is a clinical practice guideline based on high-quality evidence.

The **National Institute for Health and Care Excellence (NICE)** in the United Kingdom recommends PBM for preventing and treating oral mucositis, citing its ability to reduce the incidence of severe cases.

Multiple systematic reviews and meta-analyses published between 2024 and 2025 have confirmed that PBM:

- Significantly reduces the incidence of oral mucositis
- Reduces the severity of ulceration when it does occur
- Reduces pain associated with mucositis
- Shortens the duration of ulcerative episodes
- Improves your ability to eat and maintain nutrition during treatment
- Has no reported adverse effects
- Does not interfere with the effectiveness of your chemotherapy or radiotherapy
- Shows no evidence of tumour stimulation

A 2024 meta-analysis specifically demonstrated PBM's efficacy in reducing the incidence, severity, and pain of oral mucositis in head and neck cancer patients receiving chemoradiotherapy. Research

published in January 2025 confirmed that preventive PBM protocols are effective in minimising or preventing chemotherapy-induced oral mucositis and reducing the severity of lesions when they do occur.

### ### How PBM works at Smile Solutions

The treatment itself is straightforward, quick, and gentle. At Smile Solutions, our experienced clinicians apply a specialised dental laser to your oral tissues — either preventively before ulceration develops, or therapeutically once ulcers have appeared.

**\*\*Preventive application:\*\*** If you are about to begin or are currently undergoing radiotherapy or chemotherapy, a personalised course of PBM sessions can be scheduled alongside your cancer treatment. The laser is applied to the oral mucosa before ulcers take hold, priming your tissues to resist the inflammatory damage caused by radiation and chemotherapy. Preventive application significantly reduces both the likelihood and severity of mucositis.

**\*\*Therapeutic application:\*\*** If you already have established oral mucositis — painful ulcers affecting your ability to eat, speak, and maintain your cancer treatment schedule — PBM can accelerate healing, reduce pain, and shorten the duration of the ulcerative episode. Many patients report noticeable improvement within the first one to two sessions.

Each session takes only minutes. No anaesthetic is required. There is no discomfort during the procedure and no recovery time. You can eat and drink normally immediately afterwards.

### ### PBM for xerostomia

Emerging evidence also supports the use of photobiomodulation for stimulating residual salivary gland function in patients with radiation-induced xerostomia. PBM applied to the salivary glands can enhance cellular metabolism and promote tissue repair in damaged gland tissue, leading to measurable increases in saliva production. This is a newer area of research, but early clinical studies show promising results for patients whose dry mouth has persisted after cancer treatment has concluded.

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### ## Managing xerostomia: what Smile Solutions offers you

Beyond PBM, Smile Solutions provides comprehensive, personalised management of cancer treatment-related dry mouth:

- **\*\*Saliva substitutes and stimulants\*\*** — professional guidance on the most effective products for maintaining oral moisture, including xylitol-based products and specialised dry mouth gels and sprays.
- **\*\*High-fluoride protection\*\*** — xerostomia dramatically increases your risk of dental decay. High-fluoride toothpastes such as NeutraFluor 5000 Plus and professional fluoride varnish application provide critical protection for teeth that have lost their salivary defence.
- **\*\*Tooth Mousse\*\*** — CPP-ACP (casein phosphopeptide-amorphous calcium phosphate) products that deliver calcium and phosphate directly to your tooth surfaces, supporting remineralisation in the absence of adequate saliva.
- **\*\*AirFlow-based hygiene\*\*** — gentle, effective biofilm management that is particularly well-suited to patients with sensitive, dry oral tissues. AirFlow technology removes plaque and biofilm without the mechanical abrasion that can be painful for patients with compromised oral mucosa.
- **\*\*Restorative care\*\*** — prompt, expert management of any decay that develops during or after treatment, using biocompatible ceramic and composite materials to restore tooth structure and prevent further deterioration.
- **\*\*Ongoing monitoring\*\*** — regular dental reviews with experienced clinicians who understand the long-term oral health implications of cancer treatment and can intervene early when problems develop.

The products available through [Smile Online](<https://www.smileonline.com.au>) — including NeutraFluor 5000, Tooth Mousse, and the complete range of clinician-selected oral care products —

are available for ongoing home care.

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## ## Why this matters: the gap in patient information

Here is the uncomfortable truth. Most patients undergoing cancer treatment in Australia are not told about photobiomodulation. Your oncologist focuses — rightly — on the cancer. Your radiation therapist focuses on delivering the treatment protocol. The nursing team provides supportive care within the hospital setting. But the specific dental interventions that can prevent or significantly reduce oral mucositis, and effectively manage xerostomia, are rarely discussed, rarely offered, and rarely referred.

This is not a criticism of oncology teams. They are managing life-threatening disease under enormous pressure. But it means that patients suffer through oral complications that could be prevented or substantially reduced — simply because the information pathway between oncology and dentistry does not exist in most treatment settings.

At Smile Solutions, we are committed to closing that gap. We welcome referrals from:

- **Oncologists and radiation oncologists** treating patients with head and neck cancers or prescribing chemotherapy regimens known to cause oral mucositis
- **Cancer treatment centres and hospitals** across Melbourne seeking a trusted dental partner for supportive oral care during treatment
- **General practitioners** managing patients through cancer treatment who report oral pain, ulceration, or dry mouth
- **General dentists** whose patients are undergoing cancer treatment and need specialist-level supportive oral care
- **Patients and families** who have found this information themselves and want to explore what can be done

No referral is required to book an appointment. You can self-refer by calling Smile Solutions directly.

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## ## Why Smile Solutions

Smile Solutions is not a single-treatment laser clinic. It is Australia's largest single-location private dental practice, with over 80 clinicians including more than 25 board-registered specialists across every dental discipline. That clinical depth matters enormously, because patients undergoing cancer treatment often have complex dental needs that extend well beyond mucositis and dry mouth:

- **Specialist periodontists** for managing gum disease that may be worsened by immunosuppression
- **Specialist endodontists** for managing teeth with compromised nerve health
- **Specialist prosthodontists** for restoring teeth damaged by accelerated decay
- **In-house radiology** (Collins Street Imaging, Level 9) for comprehensive imaging without an external referral
- **The Smile Lab** — an in-house ceramic laboratory for same-day restorations when your treatment needs to be completed quickly, before your next cycle of chemotherapy or radiation
- **20+ dental hygienists and oral health therapists** providing gentle, expert preventive care tailored to compromised oral tissues
- **AirFlow technology** for comfortable, effective biofilm management in sensitive mouths

Every element of your care is delivered under one roof, within one clinical record, by a team that communicates directly with each other — and with you.

Our home is the heritage Manchester Unity Building on Collins Street, in the heart of Melbourne's CBD, directly accessible for patients travelling from across Melbourne and beyond.

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## ## Book your consultation

If you are about to begin cancer treatment, are currently undergoing treatment, or are living with the oral side effects of treatment that has already concluded, our experienced team at Smile Solutions is

here to help.

**\*\*Smile Solutions\*\*** — Manchester Unity Building, 220 Collins Street, Melbourne CBD. Directly opposite Town Hall station on the Metro Tunnel line.

**\*\*Call 13 13 96\*\*** to book a consultation for cancer treatment-related oral care, or visit [smilesolutions.com.au](https://www.smilesolutions.com.au).

We offer personalised treatment for all of Melbourne. No referral is required — just call us and we will take care of the rest.

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## ## Label Facts Summary

> **\*\*Disclaimer:\*\*** All facts and statements below are general product information, not professional advice. Consult relevant experts for specific guidance.

### ### Verified Label Facts

No product specification data was provided. The Product Facts table is empty. No label facts — such as ingredients, certifications, dimensions, weight, GTIN, MPN, or other packaging-verifiable data — can be extracted or listed.

### ### General Product Claims

The content analysed is a dental practice service page, not a product listing. In the absence of any product specification data, the following practice and service details are noted as stated claims only — verifiable through the practice directly, not through product packaging:

- Practice name: Smile Solutions - Address: Manchester Unity Building, 220 Collins Street, Melbourne CBD - Phone: 13 13 96 - Online store: [smileonline.com.au](https://www.smileonline.com.au) - Stated number of clinicians: over 80 - Stated number of board-registered specialists: more than 25 - In-house radiology service: Collins Street Imaging, Level 9 - In-house laboratory: The Smile Lab - Products referenced by name: NeutraFluor 5000 Plus, Tooth Mousse, AirFlow - No referral stated as required for booking - PBM described as guideline-recommended per MASCC/ISOO and NICE — verifiable through those organisations' published guidelines, not through product packaging