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Luton and Dunstable Hospital out of hours service ☎ **01582 491166**
and **ask for the maxillofacial doctor on call.**

Further information

www.nhs.uk/conditions/Mouth-ulcer

Patient Information

Recurrent Oral Ulceration (mouth ulcers)

Oral and Maxillofacial
Department

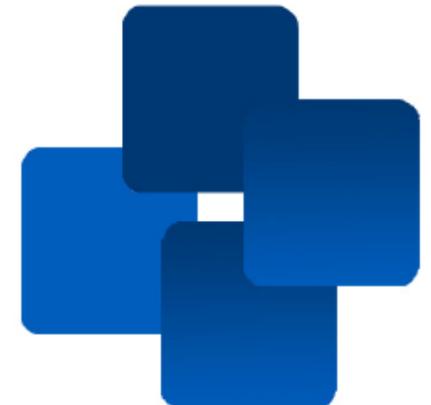
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Date of publication: September 2010
Author: Max Fax Team
Reference: MF05 Version: 4 (Aug 2017)
Review Date: August 2020
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Introduction

The purpose of this leaflet is to help you understand oral ulceration (mouth ulcers).

What are mouth ulcers?

Mouth ulcers are usually round or oval painful sores that appear inside the mouth. Recurrent oral ulceration is a term given to small mouth ulcers which typically last a few days but come back within a few weeks or months. Generally the tongue, lips and cheeks are affected, however any part of the mouth can get ulcers.

Ulcers are very common, often starting in childhood. About two in every three people will have been affected with recurrent oral ulceration at some point of their lives.

What causes mouth ulcers?

There are no definite proven causes for mouth ulcers, although the following may contribute:

- Traumatic injury, such as accidentally biting the inside of your cheek or a sharp tooth
- Poorly fitting dentures
- Stress
- Being unwell, tired or run-down
- Low vitamin or iron levels
- Steroids

The Oral Medicine Unit at Cardiff dental hospital found that certain foods or drinks may contribute. However, no definitive proof has been established that food or drinks cause ulcers. Below are some examples of those that may:

- Chocolate
- Liquorice
- Tomatoes
- Most fizzy drinks
- Crisps may cause recurrent ulceration in susceptible patients
- The preservatives E210-E219 (Benzoates)

Patients are advised to look out for a link between food stuffs and the onset of ulcers. Be aware that E210-E219 is widely used in foods.

What should I do if I think I have mouth ulcers?

Mouth ulcers are common and can usually be managed at home, without seeing your dentist or GP. Visit your pharmacist first, unless your ulcer has lasted longer than three weeks. In which case, visit your dentist or doctor who may be able to find the cause of the ulcers and provide treatment, or may arrange further tests or refer you to a specialist if necessary.

Should I worry about mouth ulcers?

No. If your ulcers do not heal within three weeks you should visit your dentist, who will examine your mouth and be able to tell if the ulcer is something which should be investigated further.

If you suffer from mouth ulcers which regularly come and go, you should visit your dentist to check they are not being caused by an underlying medical condition.

Can I prevent mouth ulcers?

You may be able to reduce the risk of mouth ulcers by:

- Maintaining good oral hygiene
- Eating a good diet which is rich in vitamins A, C and E and includes food such as fresh fruit and vegetables
- Regularly visiting your dentist

However, as there is no definitive knowledge of the cause of ulcers, none of these methods are guaranteed to help.

Are ulcers contagious?

No. Mouth ulcers are not caused by infection and therefore cannot be passed on to other people.

What treatments are there?

Treatment depends on the cause of the ulcers.

- Traumatic ulcers can be treated by removing the cause i.e. smoothing of sharp teeth and adjusting poorly fitting dentures.
- Using a mouthwash, such as Difflam, can help to reduce symptoms during an ulcer attack.
- Other weak steroid based oral products, such as mouthwashes, pastes and dissolving tablets can be used on the recommendation of your doctor or dentist.

These treatments may help your ulcers to heal quicker but will not prevent the next crop of ulcers from forming. Experiment with different toothpastes but avoid toothpastes with **Lauryl Sulphate** in them.

See your GP or dentist if:

- Your mouth ulcer has lasted for three weeks.
- You keep getting ulcers.
- You are unwell or your mouth ulcer becomes more painful or red - this could be a sign of a bacterial infection which may need treatment with antibiotics.