Guidelines for Management of Mucositis

**Signs and Symptoms:**
- child refuses food and drink
- pain in the jaw or face when opening the mouth
- difficulty swallowing, child may feel as if there is a lump in the throat, child may be drooling (This is because of swelling of the throat membrane.)
- red, raw patches, sores or white spots inside the mouth
- burning from acidic foods
- bleeding from lips, gums or inside mouth
- Any ulceration should have a diagnosis. Consider other signs and symptoms, and when in doubt, culture.

These symptoms are usually at their worst 5-7 days after chemotherapy starts. Mouth sores usually clear up 1-2 weeks after chemotherapy.
Management:

A. Prevention:
- Brush teeth with a soft toothbrush and gel toothpaste after every meal and before bedtime. If gums are bleeding or platelet count < 20 x 10^9/L or ANC <500, do not use a toothbrush or floss. Clean teeth with cotton swabs, damp gauze, or Q-tips.
- Rinse with 0.12% chlorhexidine mouthrinse (eg. Oro-X® with chlorhexidine 0.12% MIC) after mouth care during intensive phases of chemotherapy, when dental disease present, or when recommended by the IWK dentist. Wait at least 30 minutes after brushing teeth before using the chlorhexidine mouthrinse.
- Do not use commercial mouthwashes or agents that contain local anesthetics or alcohol (i.e. Peridex®, Pericleanse®).
- Wait 30 minutes after mouth care before eating.
- Use a new toothbrush every 3 months and after any infection.

B. Treatment:
- Check mouth daily.
- Avoid irritating foods (spicy; acidic, such as citric juices; temperature extremes such as too hot or cold).
- Nutritional supplementation required if unable to maintain healthy diet. Check with local dietician for age appropriate supplement.
- Avoid smoking and alcohol.
- Use systemic analgesics for painful mouth care. Do not use topical agents that contain local anesthetics.
- May use chlorhexidine gauze swabs on affected areas every 2-3 hours while awake and before bedtime.
- Moisturize lips with a lubricant jelly like vaseline. Avoid using commercial lip balms.
- Humidifier may be helpful. Change water every day.
- Straws may be used.

Dosing Guidelines:
- For uncomplicated oral thrush use clotrimazole oral suspension (Retail or Hospital Pharmacy must be notified to check if this product is available).
- If clotrimazole is not available, use nystatin oral suspension.
- Use clotrimazole or nystatin oral suspensions before chlorhexidine mouthrinse. Wait 30 minutes before using chlorhexidine mouthrinse.
- Chlorhexidine Gluconate 0.12% Mouth Rinse - alcohol free
  Dose:
  - < 6 years: 5 mL
  - > 6 years: 10 mL
  Swish and spit QID or swab mouth or rinse soother up to QID
- Clotrimazole 1 mg/mL Oral Suspension (IWK Formula)
  Dose:
  - < 1 Year: 3 mL
  - 1-3 Years: 5 mL
  - > 3 Years: 10 mL
  Swish and swallow or swab mouth QID
• **Nystatin 100,000 unit/mL** Oral Suspension
  
  **Dose:**
  
  Infant: 2 mL
  
  Children and Adults: 4-6 mL
  
  Swish and swallow or swab mouth QID

**References:**


**Date:** Revised December 2004