



PATIENT EDUCATION

Dry mouth (xerostomia) during radiation

A plain-language guide for patients and families. Bring this to your visit. It does not replace advice from your clinician.

What is xerostomia?

Xerostomia means the mouth feels dry because saliva is reduced. Radiation near the salivary glands can cause this during a course and, for some people, for months afterward. Saliva protects teeth, so dry mouth is not only comfort — it is a dental issue too.

What you may notice

- A sticky tongue, trouble speaking a long sentence, or food that will not pack into a bolus
- Night waking to sip water
- More cavities or a burning tongue over time if dryness lasts
- Taste changes that travel with the dryness

What helps day to day

Sip water or ice chips. Sugar-free gum or lozenges can prompt remaining saliva. Use a saliva substitute gel at night if recommended. A cool-mist humidifier by the bed helps some people. Avoid alcohol mouthwash, caffeine excess, and tobacco.

Where CureRays may fit. Ask about fluoride trays or a high-fluoride toothpaste if dryness is expected to last. Your dentist and radiation team should share one plan. Confirm products before you buy expensive “saliva cures” online.

What treatment usually involves

- Planning images help the team spare salivary glands when the cancer plan allows
- You may still have some dryness even with modern planning — we will say so honestly
- Weekly checks include mouth moisture, not only pain



Practical tips

- **Meals.** Add gravy, sauces, or broth. Cut food small.
- **Night.** Keep water at the bedside. A gel before sleep lasts longer than a sip.
- **Teeth.** Brush gently twice a day. See dentistry on the schedule you are given.
- Ask your pharmacist about saliva substitutes (examples people use: saliva gels and sprays). Some patients are prescribed pilocarpine (Salagen) — only if your clinician writes it.
- Thick saliva: sip 100 percent papaya juice if your team agrees, or warm liquids, to thin it. Avoid alcohol mouthwash, extra caffeine, and tobacco.

When to call the clinic

- Mouth sores, fever, or you cannot swallow because it is too dry and painful
- A tooth abscess, facial swelling, or jaw pain
- Choking or food going down the wrong way
- Depression or isolation because eating and talking feel too hard — we can help

Questions to ask

- How much dryness is expected for my field, and for how long?
- Which saliva substitute and fluoride plan do you recommend?
- Should I see a dentist during the course or only after?
- Are any of my other medicines making this worse?

How to schedule or learn more

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