



Mouthcare for people with swallowing problems



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What is a swallowing problem?

A swallowing problem is when food and drink does not pass easily from the mouth into the throat. It can lead to:

- Choking
- Dehydration
- Poor feeding and
- Chest infections

There are lots of reasons why people have this problem, such as stroke, infection, or trauma.

How do we know somebody has a swallowing problem?

Here are some of the signs, though they can be different from person to person:

- Drooling
- Coughing
- Choking
- Gurgled voice after swallowing
- Lots of chest infections
- Weight loss.

Problems affecting swallowing can include:

- Tongue weakness, where the tongue is unable to control food or drink in the mouth.
- The lips cannot close together
- Keeping food in the mouth, in the cheek or under the tongue
- Poor sensation, where someone is unable to feel food or drink in the mouth
- A dry mouth
- Difficulty moving food and drink through the throat so there is a risk of it going into the airway instead of the food pipe.

Oral Care Plans for Carers

If you are a carer and providing mouthcare for someone with swallowing difficulties or receiving palliative care, you will need to record their mouthcare in an Oral Care Plan. The plan should include dental history, oral care skills and medication.

When carrying out mouthcare, think about how to make the person comfortable.

- If they are sitting, make sure they have good head support.
- If they are lying down, try to raise or tilt their head very carefully to one side, using extra pillows.

Before tooth brushing, check and remove any food left in the mouth. Remove any extra food/fluid with suction or a clean towel.

To lower the risk of spreading illnesses such as Covid-19, avoid standing in front of someone while cleaning their teeth. A dry, manual toothbrush can also reduce the risk of spray along with spitting out into a paper towel or flannel at the end of brushing.



Mouthcare Products



Use a toothbrush to clean the mouth and teeth.

You can use:

- Electric, rechargeable, or suction toothbrush, if comfortable
- Mc3 mouth cleaners to clean the mouth if no teeth are present. They are not a substitute for a toothbrush when cleaning natural teeth
- A specialised toothbrush such as a Collis Curve or Superbrush may help if brushing is difficult.



A low or non-foaming toothpaste with 1450ppm should be used:

- Sensodyne Extra Whitening, Full Protection and Pronamel
- Corsodyl Fresh Mint, Ultra Clean and original
- All OraNurse, BioXtra, Biotene and AnOxidant Balance products
- These toothpastes do not contain sodium laureth sulfate (SLS)



DO NOT use mouthwash for gargling. Instead you can dip a toothbrush in mouthwash and gently brush round the mouth.

- Alternatively, if prescribed, anti-bacterial gel or spray, such as a Chlorhexidine based product can be used daily to improve general mouth hygiene.



Saliva Replacements:

- A natural pH (7) saliva replacement such as Biotene can be used
- DO NOT use artificial saliva (Glandosane) if natural teeth are present.

Oral Care

Natural Teeth

- Brush twice a day (in the evening and at another time) for two minutes with a soft, small, dry toothbrush and a pea-sized amount of non or low-foaming toothpaste
 - Remove any extra fluid from the mouth with suction or a clean towel
 - Apply lip moisturiser when needed
 - You can use a toothbrush dipped in antibacterial mouthwash or a Chlorhexidine Gluconate gel or spray around the gums, tongue, cheeks or palate.
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No Teeth

- Brush gums with a moist, small, soft toothbrush or Mc3 mouth cleaners twice a day
 - Remove any extra fluid from the mouth with suction or a clean towel
 - Apply lip moisturiser when needed
 - You can use a toothbrush dipped in antibacterial mouthwash or a Chlorhexidine Gluconate gel or spray around the gums, tongue, cheeks or palate.
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Dentures

- Brush denture with liquid soap or denture cream and a toothbrush for three minutes to remove food, plaque and any adhesive
 - Soak dentures in disinfecting fluid or chlorhexidine gluconate for 3 minutes
 - Rinse well under running water and store in plain water overnight in a named denture pot
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Oral care for nil by mouth

People who are nil by mouth are more likely to accidentally breathe in mouth fluids, like spit (saliva).

This includes those:

- With a feeding tube through the nose (nasogastric tube)
- With a feeding tube into the stomach (PEG- fed)
- In intensive care with a breathing tube (intubated/ventilated).

Even if a person is not able to eat or drink, it is very important to brush the mouth and teeth. Keeping the mouth and teeth clean will help stop infections, especially chest infections. If suction is used make sure the suction tip is changed every day.

Natural Teeth

- Brush twice a day (in the evening and at another time) for two minutes with a soft, small, dry toothbrush and a pea-sized amount of non or low-foaming toothpaste
 - Remove any extra fluid from the mouth with suction or a clean towel
 - Apply lip moisturiser when needed
 - You can use a toothbrush dipped in antibacterial mouthwash or a Chlorhexidine Gluconate gel or spray around the gums, tongue, cheeks or palate.
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Contact us

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