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## SELF-CARE INFORMATION FOR MOUTH ULCERS

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Mouth ulcers are common and should clear up on their own within a week or two. They're rarely a sign of anything serious but may be uncomfortable to live with. You may have more than one ulcer at a time, and they can change in size.

Mouth ulcers aren't contagious and shouldn't be confused with cold sores. Cold sores appear on the lips or around the mouth and often begin with a tingling, itching, or burning sensation.

If you have several mouth ulcers, this can be a symptom of:

- Hand, foot, and mouth disease, which also causes a rash on the hands and feet
- Oral lichen planus, which causes a white, lacy pattern inside the cheeks

### Managing your condition

Mouth ulcers need time to heal and there is no quick fix. Avoiding things that irritate your mouth ulcer should help:

- Speed up the healing process
- Reduce pain
- Reduce the chance of it returning

<b>Do</b>	<b>Don't</b>
<ul style="list-style-type: none"><li>• Use a soft-bristled toothbrush</li><li>• Drink cool drinks through a straw</li><li>• Eat softer foods</li><li>• Get regular dental check-ups</li><li>• Eat a healthy, balanced diet</li></ul>	<ul style="list-style-type: none"><li>• Eat very spicy, salty or acidic food</li><li>• Eat rough, crunchy food, such as toast or crisps</li><li>• Drink very hot or acidic drinks, such as fruit juice</li><li>• Use chewing gum</li><li>• Use toothpaste containing sodium lauryl sulphate</li></ul>

## How can I avoid triggers? / Suggested lifestyle changes

Most single mouth ulcers are caused by things you can try to avoid such as:

- Biting the inside of your cheek
- Badly fitting dentures, braces, rough fillings, or a sharp tooth
- Cuts or burns while eating or drinking – for example, hard food or hot drinks
- A food intolerance or allergy
- Damaging your gums with a toothbrush or irritating toothpaste
- Feeling tired, stressed, or anxious

Sometimes they're triggered by things you can't always control or prevent, for example:

- Hormonal changes – such as during pregnancy
- Your genes – some families get mouth ulcers more often
- A long-term condition – such as inflammatory bowel disease (IBD) or coeliac disease
- A vitamin B12 or iron deficiency
- Medications – including some NSAIDs, beta-blockers or nicorandil
- Stopping smoking – people may develop mouth ulcers when they first stop smoking

## How do I treat?

Your pharmacist may recommend treatments to help healing, prevent infection or reduce pain, e.g.:

- Antimicrobial mouthwash
- Painkilling mouthwash, gel, or spray such as "Difflam"
- Corticosteroid lozenges

You can buy these without a prescription, but they may not always work.

## When should I seek advice?

See a dentist or GP if your mouth ulcer:

- Lasts longer than 3 weeks
- Keeps coming back
- Becomes more painful and red – this may be a sign of an infection
- Your dentist or GP may prescribe stronger medication to treat recurrent, or infected ulcers.

Although most mouth ulcers are harmless, it is best to get a long-lasting mouth ulcer checked.

## Useful contacts

- Ask your pharmacist
- NHS Choices - [www.nhs.uk](http://www.nhs.uk)
- Patient UK - [www.patient.co.uk](http://www.patient.co.uk)

## ***If you have further questions:***

- *Call the practice on 01285 653184 or 01285 653122*
- If you require **urgent** medical advice, call 111 (24 hours)
- ***In an emergency call 999***