

“Burning Mouth Syndrome” and Tooth Root Decay
Or my opinions after three decades of experience, practice, research, and teaching

This is an update on one of the more difficult dilemma's facing dentists and patient's alike. I was prompted to write this update after reading one of the better written medical columns on this subject by Dr. Paul Donohue. Over the years, our treatment of various problems has evolved with the science and better understanding of the problems. We did not realize how much our approach had changed until we were asked to give a short synopsis of our treatment approach during a seminar in California this past summer.

There are numerous reasons a person can develop “burning mouth syndrome”, which can be related to many initiating sources. Our philosophy of keeping our treatments is simple and straightforward as possible. One of the simplest and newest adjuncts to “dry mouth” syndrome proved to be a very effective for “Burning Mouth Syndrome.” In the course of treating “Dry Mouth”, as often happens in the world of medicine, we unexpectedly stumbled upon a possible simple explanation and a treatment for the “burning mouth syndrome” that often accompanies “Dry Mouth”.

The naturally occurring bacteria in the mouth, or the oral flora, are extremely sensitive to changes in pH, or the acid-base balance in the mouth. Most diseases in the mouth, gingivitis, periodontal (gum) disease, and the disease of tooth decay (caries) which causes “cavities” are simply the symptoms of the healthy bacteria (oral flora) being replaced with disease causing bacteria (pathogenic bacteria) because the mouth has become too acidic. Acidic conditions allow disease causing-bacteria to thrive.

This understanding of the disease process led to one of the simplest, most effective, and cheapest treatments in dentistry. If you want healthy teeth and gums, change the pH (acidity) of the mouth from an acidic state to an alkaline environment hostile to disease-causing bacteria before you go to bed by brushing with baking soda and forcing the baking soda between the teeth and into gum pockets.

Alkalize your mouth by brushing with baking soda. Force baking soda between your teeth and down under the gum line. The neutral pH, the balance between acid and base is 7. Baking soda has a pH of 10. If you want healthy teeth and gums, brush your gumlines and force baking soda between your teeth and below the gums with an interproximal brush. A cheap, effective, and readily available interproximal pick is the Sunstar GUM Soft-Pick. Be SURE to rinse the baking soda out since it is a form of salt and CAN raise your blood pressure if you swallow a significant amount.

Another word of caution: pitch all your mouth washes out. Most mouthwashes are acidic, useless at best, and can be dangerous to your teeth and health if you are anything but a young and perfectly healthy person. Likewise, most toothpastes are too acidic and can be harmful if not used correctly despite all the claims of the cute and perky dentists hawking toothpaste on TV. Buyer Beware.

In the morning, your resting pH will have returned to acidic, and any toothpaste containing calcium will help restore lost calcium to the teeth. The calcium containing toothpastes will not work unless the mouth is acidic. One of the surprising serendipity side effects we observed was also a decrease in sensitivity because we had treated the CAUSE of tooth sensitivity rather than the SYMPTOMS by neutralizing acids and then making calcium available.

One of the other side effects we noticed was a slow and gradual decrease of “Burning Mouth Syndrome” in the patients that we had otherwise treated for other problems. What we were doing was obviously altering the oral flora, and in turn, the patients were having less and less sensitivity. We also were very aggressively treating the “Dry Mouth” condition that often accompanies immune diseases like diabetes, arthritis, and is a complication of radiation and chemotherapy. The accompanying change in oral flora can cause very rapid “root decay” and extensive damage in a short time frame unless the patient takes very specific steps to counter the acidity in the mouth caused by the low salivary flow associated with “Dry Mouth”. We were using a high pH (basic) liquid rinse as an alternative to baking soda (available as CariFree Treatment rinse, www.carifree.com). However, the rinse would cause intense burning of the mouth in some patients, and if the patient already had “burning mouth syndrome”, it was impossible to use because of the discomfort. In searching for something soothing to use, we tried the anti-yeast prescription rinse Nystatin. After two weeks of treatment, most patients could resume using the CariFree Treatment rinse, and we also rapidly reduced or eliminated the “Burning Mouth Syndrome” which was apparently related to a low grade or sub-clinical yeast infection of the teeth, gums, tongue, and other tissues of the mouth, an infection encouraged by an acidic mouth.

Our lead hygienist, Cathy White, helped develop this procedure and it was her observations that led to the treatment. Starting out simple, when a patient has “Burning Mouth Syndrome”, what usually works is a simple approach to changing the oral flora. The patient brushes with baking soda and nothing else but baking soda in the evening before bed, then rinses with CariFree Treatment Rinse. If the treatment rinse (and sometimes the baking soda) is too uncomfortable to use, rinse with prescription Nystatin rinse twice daily for two weeks then try the Treatment rinse again. In the morning, as soon as symptoms begin to disappear, then start using a calcium containing tooth paste or gel to put Calcium back into the teeth. There are a number of other adjuncts that will help alter tooth decay and gum diseases, and each person is different and may require a more customized treatment plan that Cathy White and her associates can help build for specific results.

Sometimes zinc supplements can help.

Finally, sometimes burning mouth could be associated with more serious underlying problems, like tumors. If our simple suggestions for managing burning mouth don't help, it's time to contact your physician.

If you have “Burning Mouth Syndrome”, if you have any immune related disease, if you are diabetic, you have rheumatoid arthritis, or you are undergoing treatment for cancer, you may also be very susceptible to rapid tooth decay. If your dentist, hygienist, or physician has not pointed out the importance of effective interceptive treatment, don't waste any time seeking effective treatment. Call us for an appointment.

J TIM RAINEY, D.D.S.

MINIMALLY INVASIVE DENTISTRY

SCIENTIFIC RESEARCH IN OPERATIVE DENTISTRY

This article and other opinions are available on the www.itimrainey.com website.

Dr. Rainey can be reached @ drainey@itimrainey.com or 361 526 4695

Dr. Rainey maintains a private practice in Refugio, Texas @ 606 Osage