Oral Health in Cancer Therapy Part II:
Management of Xerostomia and Pain in Cancer Patients

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Background

The May 2009 issue of the *Texas Dental Journal* addressed oral complications in cancer therapy in hematopioetic stem cell transplant, chemotherapy and radiation of the head and neck. These manuscripts were derived from the monograph *Oral Health in Cancer Therapy*. The content of the current issue is devoted to the management of xerostomia and pain in patients undergoing cancer therapy and are derived from the same source.

Hyposalivation is a devastating and consistent complication of head and neck radiation. The condition disrupts virtually all the functions of the oral cavity and the overall health of the patient. This article goes well beyond a discussion of the condition to provide a detailed guide to the management and specific agents available to minimize the discomfort, decrease the risks of rampant caries, increase remineralization, treat carious lesions based on the degree of hyposalivation and treat secondary mucosal and salivary gland infections. Although the recommendations are offered in the context of the management of cancer patients, the content is well suited to the treatment of patients suffering xerostomia due to other causes.

Adequate pain control is central to the overall health and psychological well being of patients in cancer therapy. Alleviating patients' fear of pain is as much a part of pain management as the modalities used to treat the pain. Patients experience pain on a personal level. Therefore scaling pain based on the individuals' perception is essential to effective management. A stepped approach to pain management and its treatment is an effective tool. Although this section addresses pain management specific to cancer therapy, dentists face the constant challenge of pain management in a variety of circumstances. The concepts and regimes presented are useful in the treatment of oral pain related to multiple etiologies.

About the Editors

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Oral Health in Cancer Therapy, Third edition

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The monograph was published in its entirety in August 2009. To obtain a printed copy of the monograph *Oral Health in Cancer Therapy*, contact Mr. Grady Basler at grady@doep.org. The monograph is also available for download in Adobe Acrobat format on the Dental Oncology Education Program website, doep.org.

Management of Oropharyngeal Mucositis Pain

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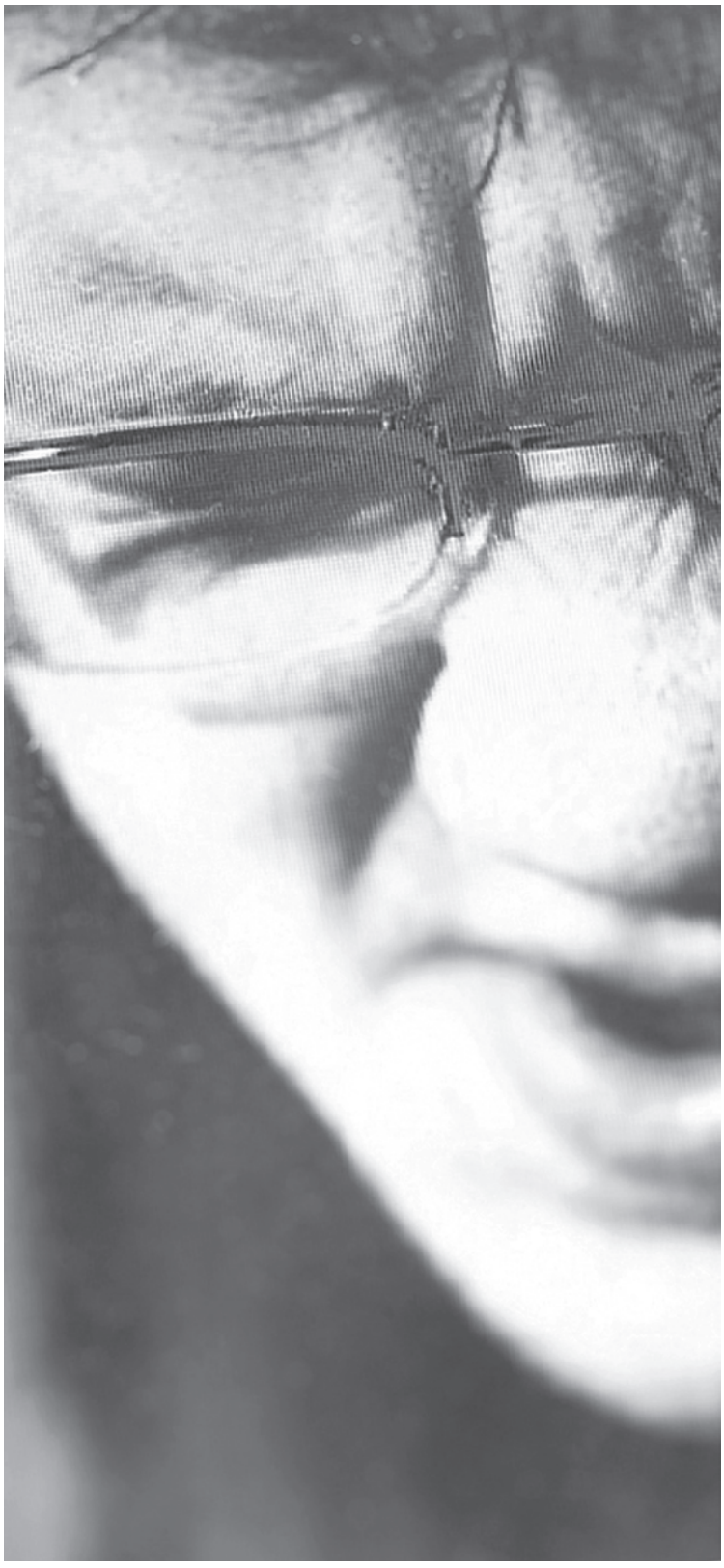

Introduction

One of the central fears of all cancer patients is pain — both pain caused by cancer and pain arising from cancer therapy. Patients can present with tumor pain involving various sites of the body, including the head and neck and oropharynx, treatment-related pain, and pre-existing pain complaints such as low back pain or other chronic pain problems. All these are intertwined in the patient's ongoing pain experience, and must be addressed if the patient's pain is to be successfully managed.

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Xerostomia Management in the Head and Neck Radiation Patient

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INTRODUCTION

Hyposalivation is a devastating and consistent complication of head and neck radiation. A detailed description of the management of this condition is presented here. Much of this material would also apply to any patient experiencing xerostomia.

Ionizing radiation that includes the salivary glands results in acinar damage and cell death and affects the vascular elements of the glands with subsequent fibrosis of the salivary glands. Decreased salivary flow has been reported at doses of 10 Gy, while permanent hyposalivation may occur at doses greater than 25 Gy. A loss or significant reduction of

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