Mouth Problems + HIV

Oral problems are very common in people with HIV.

This information is for people who have mouth (oral) problems related to HIV infection. It explains the most common oral problems linked to HIV and shows what they look like. It also describes where in the mouth they occur and how they are treated.

They are common

Oral problems are very common in people with HIV. More than a third of people living with HIV have oral conditions that arise because of their weakened immune system. And even though combination antiretroviral therapy has made some oral problems less common, others are occurring more often with this type of treatment.

They can be painful, annoying, and lead to other problems

You may be told that oral problems are minor compared to other things you have to deal with. But you know that they can cause discomfort and embarrassment and really affect how you feel about yourself. Oral problems can also lead to trouble with eating. If mouth pain or tenderness makes it difficult to chew and swallow, or if you can’t taste food as well as you used to, you may not eat enough. And, your doctor may tell you to eat more than normal so your body has enough energy to deal with HIV.

To help with a dry mouth, try these things:

• Sip water or sugarless drinks often
• Chew sugarless gum or suck on sugarless hard candy
• Avoid tobacco
• Avoid alcohol
• Avoid salty foods
• Use a humidifier at night

Talk to your doctor or dentist about prescribing artificial saliva, which may help keep your mouth moist.

They can be treated

The most common oral problems linked with HIV can be treated. So talk with your doctor or dentist about what treatment might work for you.

Remember, with the right treatment, your mouth can feel better. And that’s an important step toward living well, not just longer, with HIV.

If you have dry mouth

Dry mouth happens when you do not have enough saliva, or spit, to keep your mouth wet. Saliva helps you chew and digest food, protects teeth from decay, and prevents infections by controlling bacteria and fungi in the mouth. Without enough saliva you could develop tooth decay or other infections and might have trouble chewing and swallowing. Your mouth might also feel sticky, dry and have a burning feeling. And you may have cracked, chapped lips.

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### Mouth Problems + HIV continued

<table>
<thead>
<tr>
<th>It could be:</th>
<th>What &amp; where?</th>
<th>Painful?</th>
<th>Contagious?</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Red sores</strong>&lt;br&gt;Ulcers</td>
<td>Red sores that might also have a yellow-gray film on top. They are usually on the moveable parts of the mouth such as the tongue or inside of the cheeks and lips.</td>
<td>Yes</td>
<td>No</td>
<td>Mild cases: over-the-counter cream or prescription mouthwash that contains corticosteroids; more severe cases: corticosteroids in a pill form.</td>
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<tr>
<td><strong>Herpes</strong>&lt;br&gt;(HER-peez), a viral infection.</td>
<td>Red sores usually on the roof of the mouth. They are sometimes on the outside of the lips, where they are called fever blisters.</td>
<td>Sometimes</td>
<td>Yes</td>
<td>Prescription pill can reduce healing time and frequency of outbreaks.</td>
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<td><strong>Hairy Leukoplakia</strong>&lt;br&gt;(Loo-ko-PLAY-key-uh) caused by the Epstein-Barr virus.</td>
<td>White patches that do not wipe away; sometimes very thick and “hairlike”. Usually appear on the side of the tongue or sometimes inside the cheeks and lower lip.</td>
<td>Not usually</td>
<td>No</td>
<td>Mild cases: not usually required; more severe cases: a prescription pill that may reduce severity of symptoms. In some severe cases, a pain reliever might also be required.</td>
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<tr>
<td><strong>Candidiasis</strong>&lt;br&gt;(CAN-di-dye-uh-sis), a fungal (yeast) infection – also known as thrush.</td>
<td>White or yellowish patches (or can sometimes be red). If wiped away, there will be redness or bleeding underneath. They can appear anywhere in the mouth.</td>
<td>Sometimes, a burning feeling</td>
<td>No</td>
<td>Mild cases: prescription antifungal lozenge or mouthwash; more severe cases: prescription antifungal pills.</td>
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<tr>
<td><strong>Warts</strong></td>
<td>Small, white, gray or pinkish rough bumps that look like cauliflower. They can appear inside the lips and on the other parts of the mouth.</td>
<td>Not usually</td>
<td>Possibly</td>
<td>Inside the mouth: a doctor can remove them surgically or use “cryosurgery”, a way of freezing them off. On the lips: a prescription cream that will wear away the wart. Warts can return after treatment.</td>
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