

Patient information from the BMJ Group

Burning mouth syndrome

Burning mouth syndrome can be painful and annoying, but it's not harmful. Although there's no definite cure, there are treatments that may help ease the discomfort.

We've looked at the best and most up-to-date research to produce this information. You can use it to talk to your doctor and decide which treatments are right for you.

What is burning mouth syndrome?

If you've got burning mouth syndrome, your mouth feels sore most of the time. But it's normal apart from the burning feeling. No one knows for sure what causes it. It may happen because the nerves in your mouth are extra-sensitive.

Your doctor will check to see if there's another reason for the pain, such as a mouth infection, an allergic reaction, poorly-fitting false teeth (dentures), or not having enough spit (saliva).

You might be worried that your burning mouth syndrome is a sign of something serious, like cancer. But your doctor will rule out any other diseases of the mouth, including cancer.

If you are anxious or depressed, or have been having a lot of stress, you may be more likely to get burning mouth syndrome. You also have more chances of getting it if you are a woman who has reached the menopause.

What are the symptoms?

The main symptom is a hot, sore, or burning mouth. Your tongue, your lips, your gums, and the inside of your cheeks may feel sore. People often describe feeling as if they've scalded their mouth on a hot drink.

You may also find your mouth feels dry or tingles. You may find things taste different from usual. The pain may get worse as the day goes on. It may make it hard to get to sleep.

Your doctor will examine your mouth and ask questions. You may need a check-up with your dentist. You may also need blood tests or allergy tests, to rule out other problems.

What treatments work?

There's no definite cure for burning mouth syndrome. That's because no one knows exactly what causes it. You may feel better once you know your pain isn't a sign of a serious disease. If you stop worrying about the pain, you might stop noticing it so much. But there are some treatments that may be worth trying.

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Talking treatment

Cognitive behaviour therapy (CBT) is the treatment that's most likely to help.

CBT is a talking treatment (psychotherapy) that is often used for anxiety and depression. It might seem odd to have a talking treatment for your physical symptoms. But research shows CBT can help you cope better with pain. It may reduce the burning feeling, or make it go away altogether.

In CBT, you work with a therapist to make your thinking and behaviour more positive. You'll probably see the therapist once a week, for between six and 12 weeks. Each session will be about one hour long. Your doctor may refer you to a therapist, but there could be a waiting list for treatment.

Medicines

Medicines are not often used for burning mouth syndrome. When they are used, they are only available with a prescription from your doctor.

Antidepressants are usually used to treat depression, but some types are known to help with nerve pain. There's no reliable research to show they work for burning mouth syndrome. Antidepressants can cause side effects, including drowsiness, a dry mouth, shaking, constipation, and stomach upsets.

Burning mouth syndrome is more common in women who have reached the menopause. So doctors have looked at whether **hormone replacement therapy (HRT)** might help. One type of HRT called tibolone (brand name Livial) might help some women with burning mouth syndrome. But there hasn't been enough research to be sure. Tibolone may slightly increase the risk of breast cancer, although not as much as other types of HRT. You shouldn't take tibolone if you have breast cancer, or had it in the past.

Clonazepam (brand name Rivotril) is usually used to treat epilepsy. Some research shows that sucking a clonazepam tablet might reduce the pain in people with burning mouth syndrome. But clonazepam can have serious side effects, including drowsiness, dizziness, poor concentration, and confusion. It can also be addictive. It isn't often used for burning mouth syndrome in the UK.

Things you can do for yourself

You could try a painkilling mouthwash called **benzydamine** (brand names Difflam Oral Rinse and Difflam Sore Throat Rinse). You can buy it from a pharmacy. But there hasn't been enough research to say whether benzydamine mouthwash works. You may find it stings your mouth. If this happens, you can dilute it to half mouthwash and half water.

What will happen to me?

It's hard to know what will happen to you. Your burning mouth syndrome may get better, stay the same, or get worse.

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Research shows that about half of all people with burning mouth syndrome find it improves or goes away eventually. But it may take even years. One study found about 33 in 100 people thought their pain was somewhat better within five years of having treatment.

Remember that burning mouth syndrome may be uncomfortable, but it isn't dangerous. It won't damage your mouth or teeth.

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