

# Oral health and MS

## How might MS affect my oral health?

**M**ultiple sclerosis (MS) doesn't directly make you more likely to get dental problems than other people. But it might make it harder for you to keep your mouth and teeth in good shape or get dental treatment. This will depend on how your MS affects you and whether you're taking any medications.

## MS symptoms

You might find it harder to brush or floss your teeth if you have MS symptoms like muscle spasms, weakness or stiffness. There are often ways to work around this; some we describe later.

If MS makes it harder for you to eat or prepare food, and you're not getting the right nutrition, this can have an impact on your oral health too. A dietitian can help; ask your GP to refer you to one.

And if MS makes it hard for you to get to the dentist there's advice on page five in the section Going to the dentist.

## Medications

Some medications to treat MS or manage its symptoms can affect your mouth. A dry mouth and thrush in your mouth are the most common problems. These are covered in more detail later on.

## Looking after your mouth

Here are tips on keeping your mouth, teeth and gums in good shape:

- see a dentist for regular check-ups. He or she can also spot early signs of any mouth-related health problems
- brush your teeth twice a day (with a toothpaste that has fluoride in it)
- many people find electric toothbrushes easier to use. And if moving your arms is a problem an adapted toothbrush might help, eg, the handle is longer or at an angle. Speak to your dentist, dental hygienist or an occupational therapist about what might be best for you
- as well as brushing, floss twice a day - or use interdental brushes. These are very small brushes that clean between your teeth. Try them if you find flossing difficult. Your dentist will tell you which brush size you need
- mouthwashes can help keep your mouth clean for a short time if brushing becomes difficult. But you can't use mouthwash all the time instead of brushing. It can't remove food and plaque from between your teeth like brushing or flossing will. You need to remove this to stop tooth decay and gum disease
- if you use mouthwash (even one with fluoride in it) don't use it until at least half an hour after brushing. That's because mouthwash will wash away the fluoride left on your teeth by your toothpaste. Ask your dentist if mouthwash might help you and which one would be best

- if someone else helps you to brush, bring this person along to your dentist appointment if possible. Then they can be shown the best way to brush. An electric toothbrush can make it easier for them to brush your teeth
- give up smoking. Smoking makes you more likely to suffer from a dry mouth, stained teeth, gum disease, even oral cancer. Stopping smoking can also slow down how fast a person goes from relapsing MS to secondary progressive MS

## Dry mouth

Not having enough saliva (spit) to keep your mouth wet causes a dry mouth. Saliva keeps your teeth, tongue and gums clean by protecting them against infection; it also makes your mouth less acidic. Saliva helps you chew, swallow and speak clearly.

A dry mouth can be caused when medications cause your saliva glands to make less spit. These include many drugs for bladder problems, some antidepressants and some that treat muscle spasms (antispasmodics). Smoking also increases the risk of a dry mouth and this makes gum disease worse.

Tooth decay, infection and gum disease are far more common in people with a dry mouth, so it's important to speak to your dentist if you have this problem so they can help you protect your teeth. This might include seeing the dental hygienist more often.

### Things you can do about a dry mouth

Some people find these help:

- chewing sugar-free gum
- sucking pieces of ice
- frequent sips of water
- sucking sugar-free pastilles

If these don't help, try products like saliva replacements and special dry mouth toothpaste; you can get both on prescription. Chemist stock other products but you might need to order them specially.

## Thrush in your mouth

Thrush in your mouth (oral thrush) is caused by a fungus called candida. It's in most people's mouths, usually causing no problems, but sometimes it grows out of control. Signs of oral thrush include sore, white patches in your mouth and a burning feeling on your tongue. If you wear false teeth candida shows as a red (but not sore) area underneath them. Thrush is more likely if people with false teeth don't take them out at night. You might be more likely to have thrush for these reasons:

- a dry mouth
- difficulty in keeping your mouth clean
- you take steroids to treat MS relapses
- you take antibiotics (this can cause oral thrush)
- you take glatiramer acetate (Copaxone), a disease modifying therapy for MS (some people say they get thrush after taking it)

### Managing thrush in your mouth

You can treat oral thrush with antifungal medication. Although you can get this over the counter, you should still speak to your GP or dentist about it, especially if oral thrush keeps coming back. There may be an underlying cause that needs treating.

## Nutrition

If you don't eat a healthy diet it can affect your mouth, teeth and gums.

Avoiding a diet with lots of sugar will protect your teeth and gums, as will brushing twice a day and seeing a dentist regularly. Your dentist can give you advice on cutting down on sugar and protecting your teeth from the damage it causes.

Vitamin C is important for good gums and helps teeth repair themselves. There's no evidence that high doses are better than what you can get from a healthy diet. Foods high in vitamin C included red peppers, broccoli, brussels sprouts, oranges and strawberries.

You can find it harder to cook and eat when you have MS symptoms like tremor or problems with swallowing. If you're adding high energy supplements to your diet as a result, or if you've been prescribed pre-thickened juices, bear in mind that they're often high in sugar.

There's more information in the MS Society booklet [Diet and nutrition](#).

## Amalgam fillings

Amalgam is made from mercury and other metals and has traditionally been used to fill teeth. Dentists are using it less now. Some people have claimed that mercury leaks into the body from amalgam fillings making MS worse, and that taking the fillings out will help.

But there's no evidence that mercury from fillings causes MS or that removing them has any positive effect. Taking fillings out releases more mercury, so this risks you being exposed to much more of it compared to if you leave your fillings alone. Taking them out and re-drilling can damage teeth; it also costs a lot of money. All the same many dentists are sympathetic to the concerns people with MS might have. They should be happy to talk about alternatives to amalgam for any new fillings you need.

## Trigeminal neuralgia

Some people with MS can have a severe pain on one side of their face known as **trigeminal neuralgia**. You might wrongly think this is toothache. If you have this facial pain, it's important to talk to your GP and your dentist about it, as it can make brushing your teeth difficult or, if mistaken for toothache, lead to dental work you don't need. More information is in the MS Society booklet [Pain and sensory symptoms](#), or you can contact the Trigeminal Neuralgia Association (see page five).

## Going to the dentist

### Finding the right one

The right dentist can treat you but also refer you on if you need specialist services. You might need to find a dentist because you haven't got one – or perhaps your MS means your current dentist isn't able to treat you anymore.

You could ask people near you which dentist they use and whether that dental practice is accessible, eg, for parking or wheelchairs. Your local MS Society branch might have this information – find them on our website or through our MS Helpline (details at the end of this factsheet). Your MS nurse or current dentist can also help you find dental services in your area that are accessible or cater for your special needs.

### Access issues

Listed towards the end of this factsheet are websites and numbers in England and Wales where you can find out about the accessibility of dental practices. This includes whether they have step-free access, disabled parking and are wheelchair accessible. In Scotland or Northern Ireland you should check directly with each dentist to find out if their surgery is accessible.

No matter where you are, even if the practice itself is accessible, it's worth considering how easily you can use the dentist's chair. Some people who use a wheelchair find it difficult to get from one chair to the other. Family dentists don't usually have transfer boards or hoists.

Depending on the size of the surgery, you may be able to bring your own board or hoist if you have one. If you need help getting from one chair into another, arrange for someone to come with you. If you can't transfer between chairs and your wheelchair doesn't recline, this may limit the treatment you can have. If so, you might want to talk to your dentist about other ways you can get the dental care you need.

Most practices will be able to arrange appointment times that suit your needs, such as problems with fatigue or arranging transport. Let the receptionist know if you need extra time to get into or out of the surgery so they can allow for this. All this information can be added to your records, so that you don't have to go into detail every time you make an appointment.

If you can't use your regular dentist any more you should ask the staff how you can carry on getting dental care. Your dentist should be able to suggest another dental practice that is accessible or offer to refer you to a local dental hospital or community dental services. It's also possible to be treated in your own home but the treatment you can have at home is very limited.

### During your appointment

Before your appointment think about whether someone should come with you. For example, if someone helps you brush your teeth they may want to come with you. You may want to talk through any concerns with them before the appointment. Your dentist needs to know if someone helps you look after your mouth and teeth, so the dentist might want to speak to you both (if that's OK with you).

You'll know much more about MS and how it affects you than your dentist. You should tell your dentist that you have MS and the symptoms you get - especially if the symptom might get in the way of dental treatment, such as muscle spasms. Also say if you're taking medicines (and let the dentist know if your medication changes).

Agree a signal with your dentist that you can give during your treatment in case you want to stop because you don't feel well or need a rest.

If you're sensitive to light you might find the dentist's light uncomfortable. The dentist will probably have tinted safety glasses you can wear, or take sunglasses with you.

## Do I have to pay for my dental care?

Having MS doesn't mean that you automatically qualify for free NHS dental care. But there may be other reasons why you might qualify. Contact the NHS information service for your part of the UK to find out what the criteria are (see pages four and five).

As well as these criteria, a basic dental examination is free for everyone in Scotland. In Wales it's free for people aged 25 and under, or 60 and over.

If you don't qualify for free NHS dental care, ask your dental practice how much the charges are for treatment as they can vary.

## Useful organisations

### British Dental Health Foundation

Independent charity dedicated to improving oral health. Runs a dental helpline and has information on their website about looking after your teeth and gums.  
Smile House 2 East Union Street  
Rugby  
Warwickshire CV22 6AJ

 01788 539 780  
 [www.dentalhealth.org](http://www.dentalhealth.org)  
 [helpline@dentalhealth.org](mailto:helpline@dentalhealth.org)

### NHS online and telephone advice


These websites and telephone numbers can help you find a local dentist. You may not be able to tell if the surgery is accessible, so if in doubt call and ask.

#### England

 0300 311 2233 (NHS England)  
 [www.nhs.uk/service-search](http://www.nhs.uk/service-search)

#### Wales

 0845 46 47 (NHS Direct Wales)  
 [www.nhsdirect.wales.nhs.uk/localservices](http://www.nhsdirect.wales.nhs.uk/localservices)


**Scotland** 0800 22 44 88 (NHS Inform) 111 for NHS24 [www.knowwhatturnto.org](http://www.knowwhatturnto.org) [www.nhs24.com/FindLocal](http://www.nhs24.com/FindLocal)**Northern Ireland** [www.hscni.net](http://www.hscni.net) (search 'dentist')**Trigeminal Neuralgia Association**

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 01883 370 214 [www.tna.org.uk](http://www.tna.org.uk)

## About this resource

With thanks to Wendy Baird, Megan Burgess, Karen Kendall, Dr Paul Sharkey, Dr Margaret Kellett, Dr Noor Sacoor and all the people affected by MS who contributed to this factsheet.

Disclaimer: We have made every effort to ensure that the information in this publication is correct. We do not accept liability for any errors or omissions. The law and government regulations may change. Be sure to seek local advice from the sources listed.

### Let us know what you think

If you have any comments on this information or on the work of the MS Society, please send them to [resources@mssociety.org.uk](mailto:resources@mssociety.org.uk), or you can complete our short online survey at [www.surveymonkey.com/s/MSresources](http://www.surveymonkey.com/s/MSresources)



### References

A list of references is available on request, and all cited articles are available to borrow from the MS Society library (there may be a small charge). Contact the librarian on 020 8438 0900, or visit [www.mssociety.org.uk/library](http://www.mssociety.org.uk/library)

## Further information from the MS Society


### Library

For more information, research articles and DVDs about MS, contact our librarian.

 020 8438 0900 [librarian@mssociety.org.uk](mailto:librarian@mssociety.org.uk) [www.mssociety.org.uk/library](http://www.mssociety.org.uk/library)

### Resources



Our award winning information resources cover every aspect of living with MS.

 020 8438 0999 [shop@mssociety.org.uk](mailto:shop@mssociety.org.uk) [www.mssociety.org.uk/publications](http://www.mssociety.org.uk/publications)

### Helpline

The Freephone MS Helpline offers confidential emotional support and information for anyone affected by MS, including family, friends and carers.

Information is available in over 150 languages through an interpreter service.

 0808 800 8000 (weekdays 9am–9pm) [helpline@mssociety.org.uk](mailto:helpline@mssociety.org.uk)

More than 100,000 people live with multiple sclerosis in the UK. Every one of them shares the uncertainty of life with MS. We're funding research and fighting for better treatment and care to help people with MS take control of their lives.

With your support, we will beat MS.


## Contact us

### MS National Centre

 020 8438 0700

 [info@mssociety.org.uk](mailto:info@mssociety.org.uk)

### MS Helpline

 Freephone 0808 800 8000  
(weekdays 9am-9pm)

 [helpline@mssociety.org.uk](mailto:helpline@mssociety.org.uk)


### Online

 [www.mssociety.org.uk](http://www.mssociety.org.uk)

 [www.facebook.com/mssociety](http://www.facebook.com/mssociety)

 [www.twitter.com/mssocietyuk](http://www.twitter.com/mssocietyuk)

### MS Society Scotland

 0131 335 4050

 [msscotland@mssociety.org.uk](mailto:msscotland@mssociety.org.uk)

### MS Society Northern Ireland

 028 9080 2802

 [nireception@mssociety.org.uk](mailto:nireception@mssociety.org.uk)

### MS Society Cymru

 020 8438 0700

 [mscymru@mssociety.org.uk](mailto:mscymru@mssociety.org.uk)

As a charity, we rely on the generosity of people like you to fund our vital work. Thousands of people affected by MS turn to us for help and advice each year, and we want to make sure we are there for them whenever they need us. If you would like to make a donation, you can do so by:

- Calling us on: **0300 500 8084**.  
Lines are open Monday to Friday, 9am – 5pm
- Visiting us at: **[mssociety.org.uk/donate](http://mssociety.org.uk/donate)**
- Posting your donation to: MS Society, National Centre, 372 Edgware Road, London NW2 6ND.  
Please make cheques payable to the 'MS Society.'

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This factsheet will be reviewed within three years of publication.

### Multiple Sclerosis Society

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