

COPING WITH DESQUAMATIVE GINGIVITIS (DG)

This is a fairly common complaint, which more often occurs in women over 40 years old. Desquamative gingivitis (DG) describes the appearance of the gums and is usually related to several conditions that affect the skin and mucous membranes (for example Lichen Planus). DG may also be the result of chemical damage or an allergic reaction to various medications, mouthwashes, toothpastes, chewing gum or dental materials.

What are the signs and symptoms?

- DG is a chronic condition and can occur in mild, moderate and severe forms and can affect all or parts of the mouth.
- Mild forms of DG: - small areas of the gums become a deeper red colour and there is usually little discomfort. There may be some soreness especially worse when eating tomatoes, citrus fruits and other acidic food. During a routine check up, a dentist may also notice white, net like lines or patches on the tongue or the inside of both cheeks. This is typical of Lichen Planus.
- Moderate to severe forms of DG: - the gums become thin, red and shiny in appearance and painful to brush. The gums may bleed easily after brushing or when eating. Red patches, ulcers or blisters may appear in other parts of the mouth causing soreness, burning or pain. This may interfere with eating, speaking and swallowing. Lichen Planus can also cause this type of DG. However, there are a number of other less common reasons and you may be offered further tests.

How can it be treated?

Oral Hygiene: As long as there is no pain, treatment is not usually necessary.

- It is important to keep your mouth clean, as it stops the gums becoming infected.
- Use a soft toothbrush and try a mild flavour tooth paste or Corsodyl gel.
- For further information see the advice sheets on 'coping with a dry mouth' or 'preventing gingivitis'.

Mouthwashes: - can be diluted with water until they do not sting, for use when the mouth is sore.

- Corsodyl – Chlorhexidine 0.2% is an antiseptic rinse.
- Difflam – benzydamine 0.15 is a painkilling rinse

Try to identify factors that make the problem worse:

- Emotional stress, spicy foods (especially chillies), citrus fruits, alcohol, caffeine and smoking.
- Strong flavourings in some tartar control toothpastes and some whitening toothpastes.
- Cinnamon, spearmint oil and some flavourings and food additives.
- Colophony in chewing gum and stamp glue, ester gum in lipstick and lip balm.
- Your dentist may adjust any rough teeth and polish or replace very old fillings.
- However, changing medication is not easy if the drug is important to your health (for example drugs used in the treatment of arthritis, diabetes and high blood pressure).

Topical Steroid Preparations: - May be prescribed for some forms of DG.

- They are not absorbed into the body, as they only work on the area they are applied to.
- They should not cause side effects if they are not swallowed.
- Start with the least potent steroid, for example Adcortyl in Orabase – dry the area with a cotton wool bud before rubbing in a pea-sized amount of cream using a wet cotton wool bud. Using this at night so that it does not rub off during eating.