

MOUTH SORES

There are different kinds of mouth sores, some will heal on their own, and some will need professional intervention. Generally, any sore that does not heal within 2 weeks should be professionally evaluated to find the specific cause and to rule out **cancer**.

CANKER SORES (aphthous ulcers)

These are painful, grayish-white open sores, of varying size, found inside the mouth on the cheek, tongue, gums, roof of the mouth, or the inside lip. The exact cause is not well understood, but it may result from an abnormal immune system response. Emotional stress, fatigue, spicy or acidic foods, scratches from dentures or brushing, poor oral hygiene, and food allergies definitely influence and trigger these sores.

Options for symptomatic relief:

- A. Two non-prescription products that have worked well for my patients are *Zilactin-B* gel, and *Kank-a* liquid. Dry the sore by gently blotting, then apply your choice of medication with a cotton-tipped applicator until the sore turns white and is less sensitive. It only takes about 10 seconds. Reapply if pain returns.
- B. Rinse or apply a carbamide peroxide medication (such as Gly-oxide, Amosan, or Cankaid) to the sore.
- C. Apply non-prescription canker sore medications that usually contain benzocaine, menthol, camphor, eucalyptol and/or alcohol. Note: This is not recommended if you are in homeopathic treatment!!
- D. Apply a wet, black tea bag to the sore. It contains tannin, an astringent. A non-prescription product that contains tannin which can be applied is Tanac.
- E. Rinse with a solution of 1 tablespoon of hydrogen peroxide in a glass of water.
- F. Rinse with Folamint mouthwash. Note: This is not recommended if you are in homeopathic treatment!!
- G. Rinse with Mylanta or milk of magnesia.
- H. Rinse with a strong tea of goldenseal root.
 - I. Squeeze vitamin E oil onto the sore, and repeat several days.
- J. Touch the sore with a styptic pencil.
- K. Rinse with a mild solution of baking soda and water.
- L. At the onset of a sore, take a high dosage of vitamin B-complex.
- M. Allow a 50 mg zinc lozenge to dissolve directly on the sore 3xday.
- N. Rinse with a solution of Lactobacillus acidophilus 3xday (dissolve 10 capsules in water)
- O. Gargle with a deglycyrrhizinated licorice (DGL) solution 4xday (200 mg of DGL mixed in a glass of water)

Options for prevention or lessened frequency:

- A. Supplements have helped. One is *L-lysine*, which is an amino acid, in which a 600 mg tablet is taken 1-3 times a day. The other is Lactobacillus *acidophilus*, a natural intestinal bacteria, in which 1 capsule is taken 3 times a day. These are non-prescription supplements which must be taken continuously to be effective, much like vitamins. Try one or the other, not both simultaneously. The ideal dosage is determined through trial and error, so if necessary, increase the dosage until effective, or decrease an effective dosage until symptoms reappear to determine the minimum effective dosage. Instead of a capsule, you could eat 4 tablespoons of unflavored yogurt each day that contains the active cultures of Lactobacillus *acidophilus*.
- B. Avoid foods that seem to trigger the sores. Common food triggers are coffee, spices, citrus fruit, nuts high in arginine (especially walnuts), chocolate, strawberries, rye bread or rye crackers, and acid juices such as orange, tomato, grapefruit, pineapple, and Snappy Tom.
- C. Have a body chemistry that is balanced in minerals, acidity, and alkalinity.
- D. Constitutional classical homeopathy
- E. Check out if you have conditions that are conducive to canker sores, such as low phosphorus level in saliva, low amount of stomach acid, and low thyroid activity.
- F. Chinese medicine (acupuncture, acupressure, and tui na).
- G. Check for food allergies, especially to gluten.
- H. Check for a nutritional deficiency in iron, folate, vitamin B12, or zinc. If deficient, in addition to normal daily supplements, take 50 mg of zinc daily (don't if dissolving zinc lozenges directly on sore), take 1000 mg of vitamin C with bioflavonoids daily (3xday for the first 3 days), take 1000 mg of vitamin B12 under the tongue, take 60 mg of iron daily (only if your are iron deficient), take 800 mcg of folic acid daily, and take 400 IU of vitamin E daily.
 - I. Eliminate stress in your life or use relaxation therapies.
- J. Sodium lauryl sulfate, a common ingredient in toothpaste, can induce aphthous ulcers. Try a toothpaste that does not contain it.

TRAUMATIC SORES

These usually happen from events such as eating hot pizza or being bumped in the mouth. Generally, just avoid further irritating the area, and let your body heal the area. For symptomatic relief,

- A. Rinse with *calendula* (herbal) mouthwash.
- B. Treat as if it were a canker sore, and use the options listed for canker sores.

COLD SORES (fever blisters)

These are painful, fluid-filled blisters on or around the outside of the lips (not inside). They are contagious, so avoid touching the sore with your hands or contacting the sore to someone else, such as in kissing. Replacing your toothbrush at the onset of a cold sore, after a blister develops, and after the sore heals can reduce the frequency of cold sores. Also, don't touch your toothbrush to the opening of the toothpaste tube, rather put the toothpaste on your finger and dab the toothbrush into the toothpaste on your finger. Dental treatment should be postponed until the sore is healed. Sores are triggered by fever, colds, stress, strong wind or sun, trauma, mouth stretching (during dental treatment), intestinal upset, alcohol, sugar, concurrent viral infection, being run-down, or the start of menstruation.

Options for symptomatic relief:

- A. Apply *Zilactin* gel, just like for canker sores.
- B. Apply a 2% water-based zinc gluconate or zinc sulfate solution to the sore several times a day or let a zinc lozenge dissolve on the sore.
- C. Apply ice.
- D. Apply witch hazel or alcohol (to a sore that is broken open).
- E. Apply non-prescription medications that usually contain phenol or camphor. Note: This is not recommended if you are in homeopathic treatment!!
- F. Dab sores with the oil from a vitamin E capsule.
- G. Dab sores with vitamin C.
- H. At the onset of a sore, take a high dosage of vitamin B-complex.
- I. Apply lysine cream 2x/day.

Options for prevention or lessened frequency:

- A. Constitutional classical homeopathy.
- B. Supplement daily diet with 1-3 gm of *L-lysine*, and double the amount at the onset of a cold sore. Foods that contain lysine are fish, chicken, beef, goat and cow's milk, lamb, mung beans, pork, cheese, beans, brewers yeast, crustaceans, and eggs. Note: Excess lysine can interfere with normal growth or increase cholesterol production.
- C. Identify and avoid lifestyle triggers.
- D. Protect lips from sunburn or wind exposure.
- E. Avoid arginine-rich foods, such as chocolate, cola, peas, grain cereals, nuts, gelatin, cashews, peanut butter, cocoa powder, sesame seeds, jello, buckwheat flour, and beer. Note: The herpes virus requires L-arginine as an essential amino acid.
- F. Practice relaxation techniques, such as biofeedback, visualization, and meditation.
- G. Use *Lactobacillus acidophilus* as described for canker sores.
- H. Create a body chemistry that is balanced.
- I. In addition to daily supplements, take 3 capsules/day of *Lactobacillus acidophilus*, 3000 mg/day of L-lysine until symptoms lessen, then 500 mg/day, 50 mg/day of zinc, and 500 mg/day of vitamin C with bioflavonoids.

SORES AT THE CORNER OF THE MOUTH (angular cheilosis)

This is usually caused from a deficiency of vitamin B (riboflavin), but it can also be caused by saliva collecting at the corners of the mouth.

For prevention or lessened frequency: Have a good diet that contains riboflavin, plus take a vitamin B-complex supplement. Good food sources of riboflavin are liver, kidney, heart, poultry, fish, green leafed vegetables, nuts, fruit, legumes, dairy products, eggs, and whole grains.