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Dry mouth dry vagina

Dry mouth, also known as xerostomia, is a condition where your mouth doesn't have enough saliva. The most common cause is gland malfunction. Glands can malfunction because of stress, medication, nervousness, or autoimmune disorders. Smoking is another leading cause of dryness as well. People who smoke will find that their mouth always feels a little dry.Dry mouth leads to oral issues, such as swollen glands, gum disease and an increase in tooth decay. People with this condition have to follow a healthy oral routine. This includes regular professional cleanings and trips to the dentist. A dentist will inspect the salivary glands. When they find blockages then can remove them to stimulate salivary flow.Dry mouth can be uncomfortable and have serious consequences to your health. Dryness irritates the tissues of the mouth, which makes them prone to infection. Without the beneficial effects of saliva, tooth decay becomes a serious threat. Taking care of your teeth and gums is vital to overall wellness. URL of this page: Dry mouth is the feeling that there is not enough saliva in your mouth. Everyone has a dry mouth once in a while - if they are nervous, upset or under stress. But if you have a dry mouth all or most of the time, it can be uncomfortable and can lead to serious health problems. Symptoms of dry mouth include A sticky, dry feeling in the mouth Trouble chewing, swallowing, tasting, or speaking A burning feeling in the mouth A dry feeling in the throat Cracked lips A dry, rough tongue Mouth sores An infection in the mouth Dry mouth is not a normal part of aging. Causes include some medicines, radiation therapy, chemotherapy, and nerve damage. Salivary gland diseases, Sjogren's syndrome, HIV/AIDS, and diabetes can also cause dry mouth. Treatment depends on the cause. Things you can do include sipping water, avoiding drinks with caffeine, tobacco, and alcohol, and chewing sugarless gum or sucking on sugarless hard candy. NIH: National Institute of Dental and Craniofacial Research ClinicalTrials.gov: Xerostomia (National Institutes of Health) The information on this site should not be used as a substitute for professional medical care or advice. Contact a health care provider if you have questions about your health. Project Patient Voice is intended to be used with a healthcare professional when discussing the potential symptoms related to a cancer and cancer treatment. Do not rely on Project Patient Voice alone to make decisions about medical care. Do not use Project Patient Voice to substitute for advice from your health care professional. Conclusions about patient experiences with symptoms may be limited because not all symptoms may have been captured by the patient-reported questionnaire. – Back to summary table Download symptom data (XLSX, 24KB) In AURA3 Study, Patients Were Asked: "In the last 7 days, what was the SEVERITY of your DRY MOUTH at its WORST?" Patients scored the severity of their Dry Mouth on a 5-point scale (None, Mild, Moderate, Severe, Very Severe) Patient-Reported Dry Mouth During the First 24 Weeks on Treatment for Patients Who Completed a Questionnaire: Figure 1 shows the percentage of patients reporting the severity of their Dry Mouth at each time point. For example, at week 2, 36% of patients taking Tagrisso reported Dry Mouth (ranging from Mild to Severe). The range of patients who had any Dry Mouth during the first 24 weeks of treatment with Tagrisso was between 30% - 45%. Click here for more information on how to read the graphs below. Figure 1. Patient-Reported Dry Mouth During the First 24 Weeks on Treatment. All responses from patients' experiences just before and up to week 24 on-treatment were included in the analysis. Some patients did not report their symptoms every week, therefore the number of patients may vary between weeks. Furthermore, not all patients remained on the treatment for 24 weeks (e.g., some stop treatment for worsening disease) which is a reason for the change in the number of patients over the course of treatment. Worst Response Option for Dry Mouth That Patients Reported During the First 24 Weeks on Treatment Figure 2. Worst Patient-Reported Dry Mouth During the First 24 Weeks on Treatment. Patients with at least one on-treatment Dry Mouth score were included in the analysis. Tagrisso (N=99), Chemotherapy (N=55). Some Patients Did Not Report Dry Mouth Before Treatment: For patients that did not report Dry Mouth before treatment, Figure 3 shows the percentage of patients reporting the severity of their Dry Mouth between weeks 1 and 24. Figure 3. Patient-Reported Dry Mouth During the First 24 Weeks on Treatment: Patients Without Dry Mouth Before Treatment All responses from patients who did not report Dry Mouth before treatment were included in the analysis. Some patients did not report their symptoms every week, therefore the number of patients may vary between weeks. Furthermore, not all patients remained on the treatment for 24 weeks (e.g., some stop treatment for worsening disease) which is a reason for the change in the number of patients over the course of treatment. Worst Response Option for Dry Mouth That Patients Reported During the First 24 Weeks on Treatment, for Patients Who Did Not Have Dry Mouth Before Treatment: Figure 4. Worst Patient-Reported Dry Mouth During the First 24 Weeks on Treatment: Patients Without Dry Mouth Before Treatment Patients who had no Dry Mouth before treatment and at least one on-treatment Dry Mouth score were included in the analysis. Tagrisso (N=46), Chemotherapy (N=25). Q. I hope you can help me with a very annoying problem. My mouth and throat are constantly parched, even though I carry a water bottle and sip from it constantly. I know it's a small problem compared to all the things you write about, but it's very uncomfortable, and I'd appreciate any advice you can offer. A. Call it dry mouth, and it sounds like little more than a nuisance – but call it by its medical name, xerostomia, and it sounds fearsome. In most cases, dry mouth causes more discomfort than damage, but severe cases can lead to important complications. Dry mouth can rob you of the sense of taste, and it can make chewing slow and swallowing difficult. The combination may lead to malnutrition, and since saliva is important for dental health, tooth decay and periodontal disease can add to the problem. As a service to our readers, Harvard Health Publishing provides access to our library of archived content. Please note the date of last review or update on all articles. No content on this site, regardless of date, should ever be used as a substitute for direct medical advice from your doctor or other qualified clinician. Medically reviewed by University of Illinois — Written by Tim Newman on January 2, 2018CausesSymptomsRemediesTreatmentWe include products we think are useful for our readers. If you buy through links on this page, we may earn a small commission. Here's our process.Dry mouth is a symptom that leads to a lack of saliva. Individuals with dry mouth do not have enough saliva to keep the mouth wet. The condition is also informally known as xerostomia, pasties, cottonmouth, drooth, doughmouth, or des. This article will look at the causes, symptoms, diagnosis, and treatment of dry mouth. Share on PinterestDry mouth is often a side effect of pharmaceutical drugs. Possible causes include: Medications: Many prescription and OTC medications cause dry mouth, including antihistamines, decongestants, hypertensive medications (for high blood pressure), antiarrhythmals, muscle relaxants, urinary continence drugs, some Parkinson's disease medications, as well as a number of antidepressants. Age: Even though dry mouth is not a natural part of aging, older adults tend to take more medications than the rest of the population. Many of the medications taken by seniors cause dry mouth. Cancer treatment: Radiotherapy (radiation therapy) to the head and neck can damage the salivary glands, resulting in less saliva being produced. Chemotherapy can alter the nature of the saliva, as well as how much of it the body produces. Injury or surgery: This can result in nerve damage to the head and neck area can result in dry mouth. Tobacco: Either chewing or smoking tobacco increases the risk of dry mouth symptoms. Dehydration: This is caused by lack of sufficient fluids. Exercising or playing in the heat: The salivary glands may become dry as bodily fluids are concentrated elsewhere in the body. Dry mouth symptoms are more likely if the exercise or playing continues for a long time. Some health conditions, illnesses, and habits can cause dry mouth, such as: anxiety disordersdepressionHIV/AIDSParkinson's diseasepoorly controlled diabetesSjogren's syndromesleeping with the mouth openstroke and Alzheimer's disease, although these are more likely to cause a perception of dry mouth even when the salivary glands are functioning appropriately Signs and symptoms of dry mouth may include: bad breathcheilitis, or inflammation and fissuring (splitting or cracking) of the lipscracking and fissuring of the oral mucosa, or inner lining of the cheeks and lips, in which skin at the corners of the mouth may split or become soredryness in the mouthdysgeusia, or taste disordersfungal infections in the mouth, such as thrushglossodynia, or a painful tongueincreased need to drink water, especially at nightinflammation of the tongue, tongue ulcerslipstick sticking to teethmore frequent gum diseasemore tooth decay and plaqueproblems speakingproblems swallowing and chewing – especially dry and crumbly foods, such as crackers or cerealsproblems wearing dentures – problems with denture retention, denture sores, and the tongue sticking to the palatesialadenitis, a salivary gland infectiona sore throatslick salivastringy salivaThere are many ways to keep the mouth lubricated and prevent the symptoms of dry mouth.These include:sipping non-carbonated, sugar-free fluidschewing gum that contains xylitol, available for purchase online.using a carboxymethyl cellulose saliva substitute as a mouthwash may help avoiding mouthwashes that contain alcohol. A range of alcohol-free mouthwash is available for purchase online.not wear dentures during sleep.eating foods such as carrots or celery breathing through the nose, as this does not dry the mouth to the same extent as breathing through the mouth does. using a humidifier to add moisture to a bedroom, which may help reduce dry mouth symptoms that develop during sleep. Humidifiers are available for purchase online.Individuals should avoid: chewing or smoking tobaccosugary foods or drinksacidic foods or drinksdry foodspicy foodseatingirritantsexcessively hot or cold drinks Alcohol consumption should be kept to a minimum or avoided altogether, and caffeine should be only be consumed in moderation. Treatment for dry mouth depends on several factors such as whether the patient has an underlying condition or disease, or is taking certain medications that may be causing dry mouth. If an underlying cause is found, steps need to be taken to minimize its effect. Medications: If the dry mouth is thought to be caused by a particular medication, the doctor will either alter the dosage or prescribe another drug which is less likely to cause dry mouth. Stimulating saliva production: Medication may be prescribed to stimulate the production of saliva, such as pilocarpine (Salagen) or cevimeline (Evxac). Experts say that symptomatic treatment for dry mouth typically includes four areas: increasing the flow of salivaerplacing lost secretionscontrolling dental caries-specific measures, such as treating infections A person with dry mouth should pay special attention to oral/dental hygiene. This includes plaque removal and treatment of gingival infections, inflammation, and dental caries. Brushing teeth and flossing regularly is important. Diagnosis The doctor or dentist will probably examine the patient's mouth and review their medical history. Blood tests and imaging scans of the salivary glands may also be ordered. Sialometry: This is a simple procedure that measures the flow rate of saliva. Collection devices are placed over duct orifices of the saliva glands, and saliva production is stimulated with citric acid. Saliography: This is a radiographic examination of the salivary glands and ducts. It may be useful in identifying salivary gland stones and masses. Biopsy: A small sample of salivary gland tissue is taken. Often used in the diagnosis of Sjögren's syndrome. If malignancy (cancer) is suspected, the doctor may also order a biopsy. Many doctors report that often, even though the patient complains of severe dry mouth, the oral mucosa appears to be moist. Less frequently, it may be the other way round – the oral mucosa appears dry, but the individual does not complain of dry mouth symptoms. Dry mouth is sometimes referred to as xerostomia. Experts say that xerostomia is usually caused by inadequate function of the salivary glands. An individual with xerostomia typically finds it harder to enjoy food. Xerostomia is a common problem. It is a frequent side effect of medication, which may improve with a new prescription or an adjustment of dosage. We all get a dry mouth sometimes - when we are upset, under stress, or extremely frightened. Xerostomia is different - the individual's mouth is dry most of the time. Some patients may think dry mouth is a normal part of aging, but it is not. It is, however, more commonly found in older adults. Experts say the main reason is that elderly people take more medications compared with the rest of the population, and some of these medications cause xerostomia. Xerostomia may be a symptom of a serious systemic disease, such as systemic lupus erythematosus, rheumatoid arthritis, scleroderma, sarcoidosis, amyloidosis, Sjögren's syndrome, Parkinson's, Diabetes, or hypothyroidism. A systemic disease is one that affects the entire body. Dry mouth is not a disease but a symptom of other conditions. Last medically reviewed on January 2, 2018Public HealthEar, Nose, and ThroatSeniors / Aging What do I need to know about dry mouth? Dry mouth is the feeling that there is not enough saliva in the mouth. Everyone has a dry mouth once in a while -- if they are nervous, upset or under stress. But if you have a dry mouth all or most of the time, it can be uncomfortable and can lead to serious health problems. It can also be a sign of certain diseases and conditions. Dry mouth... can cause difficulties in tasting, chewing, swallowing, and speaking can increase your chance of developing dental decay and other infections in the mouth can be caused by certain medications or medical treatments Dry mouth is not a normal part of aging. So if you think you have dry mouth, see your dentist or physician -- there are things you can do to get relief. Symptoms include: a sticky, dry feeling in the mouth trouble chewing, swallowing, tasting, or speaking a burning feeling in the mouth a dry feeling in the throat cracked lips a dry, rough tongue mouth sores an infection in the mouth Why is saliva so important? Saliva does more than keep the mouth wet. It helps digest food It protects teeth from decay It prevents infection by controlling bacteria and fungi in the mouth It makes it possible for you to chew and swallow Without enough saliva you can develop tooth decay or other infections in the mouth. You also might not get the nutrients you need if you cannot chew and swallow certain foods. What causes dry mouth? People get dry mouth when the glands in the mouth that make saliva are not working properly. Because of this, there might not be enough saliva to keep your mouth wet. There are several reasons why these glands (called salivary glands) might not work right. Side effects of some medicines. More than 400 medicines can cause the salivary glands to make less saliva. For example, medicines for high blood pressure and depression often cause dry mouth. Disease. Some diseases affect the salivary glands. Sjogren's syndrome, HIV/AIDS, and diabetes can all cause dry mouth. Radiation therapy. The salivary glands can be damaged if they are exposed to radiation during cancer treatment. Chemotherapy. Drugs used to treat cancer can make saliva thicker, causing the mouth to feel dry. Nerve damage. Injury to the head or neck can damage the nerves that tell salivary glands to make saliva. What can be done about dry mouth? Dry mouth treatment will depend on what is causing the problem. If you think you have dry mouth, see your dentist or physician. He or she can try to determine what is causing your dry mouth. If your dry mouth is caused by medicine, your physician might change your medicine or adjust the dosage. If your salivary glands are not working right but can still produce some saliva, your physician or dentist might give you a medicine that helps the glands work better. Your physician or dentist might suggest that you use artificial saliva to keep your mouth wet. What can I do? Sip water or sugarless drinks often. Avoid drinks with caffeine, such as coffee, tea, and some sodas. Caffeine can dry out the mouth. Sip water or a sugarless drink during meals. This will make chewing and swallowing easier. It may also improve the taste of food. Chew sugarless gum or suck on sugarless hard candy to stimulate saliva flow; citrus, cinnamon or mint-flavored candies are good choices. Don't use tobacco or alcohol. They dry out the mouth. Be aware that spicy or salty foods may cause pain in a dry mouth. Use a humidifier at night. Tips for keeping your teeth healthy Remember, if you have dry mouth, you need to be extra careful to keep your teeth healthy. Make sure you: Gently brush your teeth at least twice a day. Floss your teeth every day. Use toothpaste with fluoride in it. Most toothpastes sold at grocery and drug stores have fluoride in them. Avoid sticky, sugary foods. If you do eat them, brush immediately afterwards. Visit your dentist for a check-up at least twice a year. Your dentist might give you a special fluoride solution that you can rinse with to help keep your teeth healthy. Sources: IMAGES PROVIDED BY: REFERENCES: National Institute of Dental and Craniofacial Research (www.nidcr.nih.gov) · Dry Mouth Originally published on July, 2016

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