

# Medicines and maintaining healthy teeth



This leaflet is for parents and carers about how to reduce the risk of tooth decay if your child is taking liquid medicines or has 'dry mouth' (because of a health condition or another medicine they are taking). The leaflet aims to support you in discussing any concerns with your doctor, dentist or nurse.

### Tooth decay

Tooth decay (also known as dental caries or cavities) occurs when bacteria break down sugar in the diet and produce acids, which damage the dental enamel (the hard outer white part of the tooth). Children's first teeth ('milk teeth') are especially at risk, as the enamel is thinner.

### How can medicines cause tooth decay?

- Many children's medicines come in liquid solutions to be swallowed.
- Often these liquids contain sugar to make them taste better. It is important to be aware of this, because sugar is a key cause of tooth decay.
- However, the amount of sugar in medicines is small, and if your child looks after their teeth as recommended by dentists, it should not be a cause for concern.

#### Sugar-free medicines

- Sugar-free versions are available for most commonly used children's liquid medicines. These may contain hydrogenated glucose syrup, mannitol or sorbitol, which provide a sweet flavour but are not thought to cause tooth decay, and do not contain sugar.
- Doctors and dentists are encouraged to use sugar-free medicines when possible.



• Check with your doctor, dentist or pharmacist about your child's medicine and ask if there is a sugar-free version.

## What can I do to reduce the risk of tooth decay with liquid medicines?

- When giving your child liquid medicine, encourage them to swallow it immediately, rather than holding it in the mouth, to minimise contact with the teeth.
- Give your child a small drink of water after taking the liquid medicine.
- Discuss with your doctor or pharmacist when the best time is for your child to take their medicine. Ask if it can be done at meal times.
- If you have to give a medicine at bedtime, do this before your child brushes their teeth.

- Brush your child's teeth for 2 minutes twice a day (morning and evening), using a fluoride-containing toothpaste, as recommended by your dentist.
- Once your child is old enough to swallow tablets often at about 8 years old – you may want to ask your doctor to change to a tablet or capsule form of the medicine.
- Resources for helping children and young people learn how to swallow tablets is available online from the KidzMed programme (NHS): <u>www.e-lfh.org.uk/</u> <u>programmes/kidzmed</u>

#### What is 'dry mouth'?

Dry mouth occurs when someone doesn't produce enough saliva. Saliva is important for the protection of teeth, so dry mouth may increase the risk of tooth decay. Some health conditions and some medicines can cause dry mouth. Medicines that can cause dry mouth include:

- antihistamines such as chlorphenamine (Piriton)
- medicines used to treat epilepsy, such as gabapentin (Neurontin) and carbamazepine (Tegretol)
- beta-blockers such as atenolol (Tenormin) and propranolol



 antacids such as omeprazole (Losec) and lansoprazole (Zoton).

Note that these are the most commonly used medicines that cause dry mouth but this is not a complete list of all medicines.

## What should I do if I think a medicine is causing my child to have dry mouth?

- Talk to your dentist or pharmacist, but continue to give the medicine as you have been told to in the meantime.
- Make sure your child drinks plenty of water which will help them produce to saliva.
- Your child should avoid drinks that contain caffeine (such as cola), as these can make the symptoms worse.
- Older children can try using an oral mouth wash or a sugar-free chewing gum to increase saliva production.

### Who to contact for more information

Your child's doctor, dentist, or pharmacist will be able to give you more information about children's medicines and sugarfree preparations. You can also get more information from:

England: NHS 111	Tel 111	www.nhs.uk
Scotland: NHS 24	Tel 111	www.nhs24.scot
Wales: NHS 111 Wales	Tel 111	www.111.wales.nhs.uk
Northern Ireland: NI Direct		www.nidirect.gov.uk

### www.medicinesforchildren.org.uk









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The primary source for the information in this leaflet is the British National Formulary for Children. For details on any other sources used for this leaflet, please contact us through our website,www.medicinesforchildren.org.uk. We take great care to make sure that the information in this leaflet is correct and up-to-date. However, medicines can be used in different ways for different patients. It is important that you ask the advice of your doctor or pharmacist if you are not sure about something. This leaflet is about the use of these medicines in the UK, and may not apply to other countries. The Royal College of Paediatrics and Child Health (RCPCH), the Neonatal and Paediatric Pharmacists Group (NPPG), WellChild and the contributors and editors cannot be held responsible for the accuracy of information, omissions of information, or any actions that may be taken as a consequence of reading this leaflet.