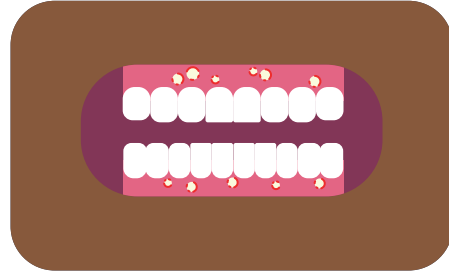


Patient presenting with Oral Mucositis



Is caused by damage to the cells that line a patients' mouth and tongue, usual by chemotherapy or radiotherapy in patients` receiving cancer treatment. Patients` will typically experience redness/ swelling in their mouth that can lead to ulcers and infection. It can be very painful and can cause patients` to experience difficulty eating, swallowing or talking. It may alter patients` sense of taste, and can cause bleeding and/or production of saliva which is thicker than normal.



Over-the-counter conversations:

When responding to symptoms in the pharmacy, it is important to establish which medications a patient is taking. This is because:

- It could be a side effect to a medicine
- It could be a reason to stop a medicine
- It can influence the over-the-counter advice/treatments you can recommend

You may want to incorporate the following questions into your conversations:

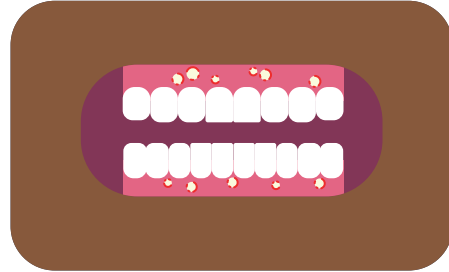
- Do you take any medicines prescribed by your GP?
- Are you on any treatment in/from the hospital?
- What condition do you have hospital treatment for?

**IF A PATIENT IS ON CANCER TREATMENT OR TREATMENT FROM THE HOSPITAL,
ALWAYS REFER TO YOUR PHARMACIST FOR FURTHER ASSESSMENT AND ADVICE**

The full Let's Communicate Cancer course is available by clicking [here](#)

Version 1: The information provided is in line current best practice guidance based on clinical practices March 2023. This guidance has been developed in line with the UKONS Acute Oncology Initial Management guidelines version 3

Patient presenting with Oral Mucositis



Pharmacist Intervention:

Assess the symptom

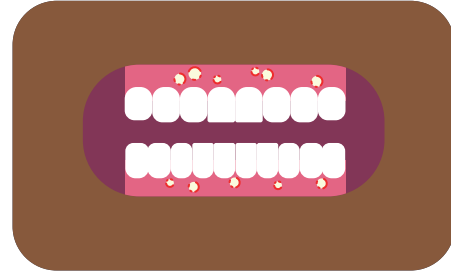
When assessing the patient's symptoms, it is important to try and address the following:

1. What type of cancer treatment they are receiving
 - Chemotherapy/Radiotherapy/Immunotherapy/Surgery
 - Route of administration - Oral/Injection/Infusion
2. Whether the symptom they are experiencing is a side effect that the hospital has made them aware of
 - Certain chemotherapy agents e.g. fluorouracil, capecitabine, anthracyclines, EGFR inhibitors, docetaxel, cyclophosphamide; are known to cause mucositis more than others
 - Patients receiving radiotherapy to the head and neck area may also experience mucositis
3. Has the hospital provided any advice or medicines on how to manage this side effect
 - Patients are usually advised about good oral hygiene and sometimes given prophylactic or treatment mouthwashes
4. The outcome of following this advice or supportive medications to try and manage the side effect

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Patient presenting with Oral Mucositis



Pharmacist Intervention (continued)

Assess the severity of the symptom

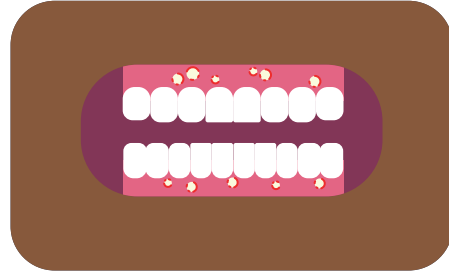
Ask patient if they have redness or ulcers inside their mouth? Can they eat/drink normally? Look inside their mouth – is there any evidence of infection? Assess the severity (grade) of mucositis they are experiencing using the table below:

Grade	0	1	2	3
Change from normal?	Normal, healthy appearance No pain and able to tolerate a normal diet without restriction	Mild – Increased redness +/- some limited ulcerations. Patients experience some pain but are still able to eat and drink normally	Moderate - Increased redness with ulceration. Patients experience moderate pain but are still able to eat solid foods	Severe – Increased redness with significant ulceration. Patients experience significant pain and can only tolerate liquids, or may be unable to tolerate any oral intake at all
Action	OTC advice / treatment	OTC advice / treatment	Offer OTC advice/treatment and refer to cancer team if no improvement in next 48hrs	Refer to cancer team

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Patient presenting with Oral Mucositis



Advice and over the counter treatments which can be provided in the pharmacy **GRADE 0-1/GRADE 2**

- Ensure basic oral care - regular teeth brushing using a baby toothbrush and toothpaste if needed
- Non-alcoholic mouthwashes can be offered. Can also use plain water or boiled and cooled salt water (1tsp salt in 1 pint of water) as a mouthwash
- Encourage patient to drink plenty of fluid and to eat soft foods
- Take painkillers to help the pain or soluble painkillers (paracetamol/aspirin) as a mouthwash

When to refer cross sector primary /secondary care **GRADE 2/GRADE 3**

Advise patient to contact their hospital,

- If there are signs of infection e.g. oral thrush
- If these symptoms are associated with fever as the mouth is a common source of infection – risk of neutropenic sepsis
- If symptoms continue for more than 48 hours and are associated with pain and a significantly reduced or no oral intake

How to refer cross sector primary/secondary care

- Clinical Nurse Specialist (CNS) in hospital cancer care team
- 24-hour hospital cancer treatment “hotline”

Additional Support

Comprehensive information regarding individual cancers, or cancer treatments, is available from the **Macmillan website**

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