

Dry mouth

Waha maroke

If your body does not make enough saliva to wet (lubricate) the inside of your mouth, you will get a dry mouth. This can cause problems with speech, taste, chewing and swallowing. It also increases your risk of developing tooth decay and getting mouth infections.

Symptoms of a dry mouth can include:

- difficulty chewing, swallowing or speaking
- thick or stringy saliva
- a feeling of sticky dryness in your mouth
- waking at night with your tongue stuck to the roof of your mouth
- a dry, rough sore tongue
- a burning sensation in your mouth
- mouth ulcers
- sore, cracked lips
- oral thrush (also called oral candida)
- difficulty or pain when wearing false teeth (dentures)
- changes in your taste
- bad breath.



Causes of a dry mouth

Many things can cause a dry mouth. These are some of the common causes.

Being unwell

Some auto-immune conditions, such as Sjögren's syndrome and Parkinson disease can cause a dry mouth. It can also be a symptom of HIV/Aids, diabetes and anxiety disorders.

Radiation therapy

People who have had radiation to their head and neck have a high risk of getting a dry mouth. This is partly because they produce less saliva.

Chemotherapy

Some drugs used in chemotherapy may make your saliva thick, so your mouth feels dry. This is usually temporary.

Medications

A dry mouth can be a side effect of many medications. These including medications used to treat depression, chronic (persistent) pain, allergies and high blood pressure.

Nerve damage

A head or neck injury or a stroke can damage the nerves of your salivary glands, which then do not produce enough saliva.

Other causes

Dehydration, smoking and age-related changes, such as menopause can cause a dry mouth.

Treating a dry mouth

- Sip water regularly, as this will help to keep your mouth fresh.
- Carry a bottle to sip water, sugar-free drinks or weak iced tea. A mix of water and glycerine might help.
- Avoid commercially prepared drinks, juices and energy drinks. These are acidic and can damage your teeth.
- Eat small amounts of soft, moist food (for guidelines for a soft foods diet, go to www.healthinfo.org.nz and search for “dietary suggestions”).
- Add extra gravy or sauces to your food to make it easier to swallow. Try instant packet sauces from the supermarket for a fast tasty sauce. Add extra liquid to thin the sauces if necessary.
- Choose foods that you do not need to chew much.
- Have small sips of water between mouthfuls of food.
- Have a water bottle or glass of water by your bed at night.
- Use a humidifier at night.
- See the ways to moisten your mouth below.

Foods you may need to avoid

Some foods make a dry mouth worse. Try to avoid them. They include:

- acidic fruits and vegetables such as citrus fruits, kiwifruit and fresh tomatoes
- spicy or salty foods such as curry, chilli and seasoned chips
- dry coarse foods such as toast, grainy breads and cereals, crackers, cakes, buns, muffins and scones
- sugary sweets and confectionery – a dry mouth makes tooth decay more likely.

Soften cereals and muesli by adding milk and leaving them to soak for a few minutes or mixing with yoghurt and leaving in the fridge overnight.



Ways to moisten your mouth

- Talk to your dentist, pharmacist or radiation team about a mouthwash that will be suitable.
- Brush your teeth with a fluoridated toothpaste.
- Gently floss and brush your teeth after meals.
- Make sure you see your dentist regularly.
- Chew sugar-free chewing gum containing xylitol. You can get this from a supermarket or pharmacy.
- Talk to your dentist or pharmacist about using oral lubricants such as Denta-Med Dry Mouth products, GC Dry Mouth Gel or Biotene Oral Balance. You could also try coconut oil.
- Add a drop of peppermint essence to 100 ml of grapeseed oil and apply a drop or 2 to your mouth when it starts to get dry.
- Suck crushed ice.

You should also talk to your dentist about how to protect your teeth from the dental decay that often happens when you have a dry mouth.

Written by Nutrition and Dietetics, Te Whatu Ora, Waitaha. Adapted by HealthInfo clinical advisers. Last reviewed March 2025.