Appendix 2.0:

Mouth Care Flow Chart

UK Oral Mucositis in Cancer Group | Mouth care guidance and support in cancer and palliative care

- A recognised grading system, e.g. the WHO Oral Toxicity Scale
- Assess high-risk patients on a daily basis

The relevant section of the main guidance document is listed here

SECTION 4.0

SECTION 5.0

SECTION 5.0

ALL PATIENTS

- Encourage good oral hygiene and a well-balanced diet
- Avoidance of alcohol and tobacco should be emphasised
- Use a saline mouthwash
- Treat dry lips using appropriate products

MODERATE-RISK PATIENTS

- Increased frequency of saline mouthwashes
- Consider the following:
 - Ice cubes to reduce oral damage and dry mouth
 - Anti-infective prophylaxis
 - Caphosol®
 - Mucosal protectant, MuGard® Gelclair® OraLife®

HIGH-RISK PATIENTS

- In addition to the interventions for moderate-risk patients, consider the following:
 - Caphosol®
 - Mucosal protectant, MuGard® Gelclair® OraLife®
 - Daily vitamin B supplements (if patient has known alcohol issues)
 - Prophylactic insertion of enteral feeding tube before commencement of treatment
 - Palifermin HSCT +/-TBI

GRADE 1 OR 2 OM

- Ensure good oral hygiene and increase the frequency of saline rinses
- Monitor nutritional status
- Monitor for oral infection, swab and treat as required
- Consider the following:
 - Paracetamol mouthwash 4 x per day
 - Benzydamine 0.15% mouthwash (Difflam®)
 - Caphosol®
 - Saliva replacement
 - Mucosal protectants, e.g. Episil®, Gelclair® or MuGard® OraLife®

GRADE 3 OR 4 OM

- Consider the following:
 - Opioid analgesics (severe OM may require a syringe driver)
 - Intravenous and/or enteral hydration and feeding
 - Increasing frequency of Caphosol®
 - Mucosal protectants, e.g. Episil®, Gelclair® or MuGard® OraLife®
 - Tranexamic acid to treat localised bleeding
- Take swabs to identify the nature of bacterial, fungal and/or viral infections and treat appropriately