

MOUTH ULCERS

Mouth ulcers are common and have been estimated to occur in 20-40% of the adult population. While other diseases can cause mouth ulcers, the most common cause is either herpes simplex virus Type I (HSV1) infection or recurrent aphthous stomatitis (RAS). The location and symptoms normally vary in these ulcerations but they can occur in the same locations and have the same symptoms. It is impossible to determine which disease is present without a biopsy and microscopic examination. Unfortunately, there is no definitive treatment for HSV1 ulcerations and treatment for RAS is uncertain. Therefore, unless clinical signs are certain for HSV1 infection, treatment for RAS is pursued. Before I go into treatments, let me more fully explain the diseases.

HSV1 normally involves the lips and inner lining of the mouth but may also involve the skin, eyes, and the central nervous system. The primary or initial infection is often a mild disorder that may go unnoticed. It may be severe, however, and ulcerations in the mouth are common. Because fever, and other more severe symptoms are apparent, the infection is usually diagnosed by a physician. Healing without scarring typically occurs in 10 to 14 days. Recurrent (secondary) herpetic infections are re-activated viruses that had been dormant and residing in an area of the nervous system. The reason the virus is re-activated is thought to be due to a variety of factors such as minor trauma, exposure to the sun, anxiety, fever, etc.

RAS is slightly more common in females and young white people. The cause of the disease is unknown but theories include a virus, L-forms of streptococci, an autoimmune or hyperimmune basis, stress, endocrine (hormonal) imbalance, environmental factors, heredity, and others. The cause may be a combination of many factors. Oral ulcers are often preceded by a sensation of pain and slight swelling. You may see a small blanched or whitened area with a "bump" followed in 24 hours by ulceration. These are shallow ulcers with a reddened border that vary in size, number, and distribution. The small ulcers (2-4 mm) are usually few in number but may join together to form a larger lesion or they may occur in clusters. They usually heal in 1-2 weeks. The larger (5mm or greater) often involve underlying tissues more extensively and may persist for longer periods of time. Some patients are seldom without recurring ulcerations of one type or the other. The ulcers are usually associated with severe pain, which may be provoked by various physical and chemical agents.

It is important to note that there are many other possible causes of oral ulcerations, but these cannot usually be definitively diagnosed without biopsies. Since the majority of the cases involve one of these two types of ulcerations, we generally wait and observe the course of the lesions. If they resolve within two weeks from onset, we assume it is one of these two types. If the lesions persist or reoccur, biopsy may be indicated. Also, you need to be aware that HSV1 can be spread to other areas or people by touching the lesion or close personal contact such as kissing. RAS is not thought to be infective but since the cause is unknown you would do well to avoid contacting the lesions.

Treatments for HSV1 infections are generally symptomatic only, meaning treatment of the discomfort. Antibiotics are used only when a secondary infection occurs. Treatment for RAS varies widely since the cause of the disease is unknown and individuals may respond differently with each treatment. Generally, whatever causes the healing to occur faster or more comfortably for you is the proper treatment. The following have been reported to be successful by some of my patients: Zilactin, ORA-5, kenalog in orabase, Kanka, L-Lysine, Zovirax, aloe gel and/or liquid, lactinex granules (lactobacillus), aloe toothpaste (Shane brand), Herpecin-L lip balm, non-sodium lauryl sulfate toothpaste (Natural Rembrandt brand), and a mixture of hydrocortisone powder, tetracycline, benadryl and mycostatin. Some of these treatments are prescription only. If you would like to try one or more of these treatments, I will be happy to prescribe a treatment regimen and modify it as necessary.