What is dry mouth?
Our mouths produce up to 1.5 litres (3 pints) of saliva a day. Consisting mostly of water, saliva cleanses the mouth and keeps it moist, which aids in tasting, chewing, swallowing, and speaking. Saliva contains antibacterial substances, minerals, and chemicals that neutralise acid, which all help protect teeth. Saliva also contains digestive enzymes and many other components.

Dry mouth, or xerostomia, occurs when the salivary glands do not produce enough saliva, or saliva becomes very thick. A dry mouth may feel uncomfortable and lead to soreness, a burning sensation, a dry or sore throat, hoarseness, or a rough or dry tongue. People with long-term dry mouth may feel thirsty and are prone to numerous oral problems; some examples are shown in the Box.

What causes dry mouth?
Dry mouth can develop when people get nervous, upset, stressed, or anxious, or when they breathe through the mouth, especially during sleep. The feeling of dry mouth can also be a side effect of medical treatments or caused by an underlying health condition—for example:

- Salivary gland disease, nerve damage, dehydration, hormonal disorders, hormonal changes such as during pregnancy or menopause
- Diabetes, Sjögren’s syndrome, Parkinson’s disease, Alzheimer’s disease, stroke, human immunodeficiency virus (HIV) infection, acquired immunodeficiency syndrome (AIDS)
- Radiation treatment (radiotherapy) or drug treatment (chemotherapy) for cancer of the head or neck
- Many drugs, including some used to treat allergies, colds, depression, anxiety, high blood pressure, diarrhoea, pain, motion sickness, muscle tension, and Parkinson’s disease
- Smoking or chewing tobacco

How can you relieve dry mouth?
Visit your doctor or dentist (1) if you have a persistent dry mouth, so underlying causes can be investigated; or (2) if you experience dry mouth after taking a certain drug, since an alternative drug or dosage may be available. For some people, there is no cure for dry mouth. Symptoms can be managed with saliva substitutes (eg, sprays, gels, lozenges, or rinses of artificial saliva) or, if you are still producing saliva, by stimulating saliva flow (eg, by chewing sugar-free gum or sucking sugarless sweets/candy); a saliva-stimulating drug can also be prescribed. Other tips are as follows:

- Frequently sip water or sugarless drinks, especially when eating food
- Avoid salty or spicy foods, since these irritate the mouth
- Suck on ice cubes; use alcohol-free mouthrinse
- Use a room humidifier; breathe through the nose rather than mouth; use lip balm to protect lips
- Limit intake of caffeine (eg, tea, coffee, some soft drinks) and alcohol, and avoid tobacco use, since these can dry out the mouth
- Protect teeth by avoiding fizzy drinks and sugary, sticky, or acidic food

Because dry mouth increases the risk of tooth and gum problems, it is important to maintain oral hygiene by brushing teeth with a fluoride toothpaste for at least 2 minutes twice a day and using floss or an interdental cleaner once a day. Make sure to get regular dental check-ups to detect and treat any oral problems early.

Dry mouth problems
- Mouth sores; cracked lips and lip sores
- Oral inflammation and infection, especially yeast infection
- Increased amount of tooth plaque
- Tooth decay and cavities
- Gum disease
- Difficulty in chewing, swallowing, and speaking
- A bad taste or bad breath
- An altered sense of taste
- Dentures, which depend on a thin layer of saliva to stay in place, may become loose and cause soreness


Written by Trevor Lane, DPhil; edited by Li-wu Zheng, DDS, MD. This Patient Page is for general informational use and is not a substitute for diagnosis; for specific oral health advice, please consult a dentist.

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