Patient Education

Neuromuscular Clinic for Swallowing and Speech Disorders



Tips for Managing Saliva

For many patients with motor neuron diseases, managing saliva — too thick or too thin can be a problem. This handout offers tips for dealing with saliva issues, dry mouth and drooling.

Management of saliva can be a difficult problem for patients with motor neuron diseases. At your clinic visit, please feel free to discuss these problems with the clinic staff. Here are some tips for managing saliva that we have found to be helpful.

There are two types of problems with saliva that we have seen:

- 1. Thick secretions that accumulate in the throat and may be accompanied with a feeling of dry mouth. This is most often caused by chronic dehydration (not enough fluid) and can be complicated by mouth breathing, especially at night.
- 2. Too much thin saliva, sometimes causing drooling.

While there is no evidence that motor neuron diseases cause increased saliva production, this condition most often develops when there is less frequent spontaneous swallowing or there is weakness of facial and lip muscles.



Neuromuscular Clinic for Swallowing and Speech Disorders Tips for Managing Saliva

Tips for Thick Saliva

- *Drink at least 2 quarts of liquid a day.* This helps most people to avoid dehydration. Juices, nectars, carbonated drinks (such as club soda) and thicker liquids may be easier to swallow than water. Small amounts spaced throughout the day are more beneficial.
- Avoid caffeinated drinks. Caffeine acts like a diuretic and causes fluid loss.
- The enzyme papase and club soda can help to thin secretions.

 This enzyme can be introduced by drinking papaya juice, chewing papaya tablets, or swabbing the mouth with meat tenderizer made from papaya. Club soda may also help cut thick secretions.
- **Suck on hard candies.** Sucking on hard candies (such as Altoid® mints) may help produce more saliva and stimulate swallowing.
- Drink plenty of liquids combined with these medicines:
 - Guaifenesin (found in <u>plain</u> Robitussin). Acts to increase secretions, thereby thinning them out.
 - SSKI (Potassium-Iodide). 10 drops in a glass of water, 2-3 times per day, causes an increase in salivary flow, thereby thinning secretions. The desired effects may not occur for 10-14 days, and a possible side effect is stomach upset.
- Avoid mucus thickening agents. Chocolate and dairy products like milk, cheese, and ice cream may cause phlegm.

Tips for ExcesiveThin Saliva

- Avoid putting tissues (kleenex) inside the mouth for drying up saliva. This tends to stimulate more saliva flow and can cause cracking of the lips. Use tissues only for saliva that is outside the mouth. Apply a balm to the lips to prevent chapping and skin breakdown.
- *Use a suction machine or aspirator* with a Yankaur tip (a hard plastic tip that is used only in the mouth and upper throat) to help manage saliva. Suctioning should be done only when needed. Chronic suctioning can deplete the body of important electrolytes in the saliva. Suctioning is only for saliva, not food.

- Drink plenty of fluids combined with these medicines:
 - Amitriptyline (Elavil). A side effect of this drug is a dry mouth. When taken in small doses (10-30 mg at bedtime), the drug does not alter mood, but may cause drowsiness. Prior to starting this drug therapy, one must be drinking at least 2 quarts of liquid per day.
 - Glycopyrrolate (Robinul). This drug, which is often used to dry saliva prior to surgery, can be effective in reducing secretions with few side effects. When taking any drying agent, one must keep drinking at least 2 quarts of liquid per day.

Other Options:

When other methods have failed, you may want to discuss other options with the clinic staff. Surgical procedures which have been used include: disconnecting the nerves to the salivary glands, rerouting the ducts which secrete saliva, and even the removal of some of the glands. Radiation of the salivary glands may be considered in some cases.

To learn more about saliva management, aspirations precautions, nutritional support, and choking first aid, please contact your doctor or the clinic staff at (206) 598-4022.

Questions?

Neuromuscular Clinic for Swallowing and Speech Disorders Call (206) 598-4022

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC Clinic staff are also available to help at any time.

Other clinics that can provide information are:

Rehabilitation Medicine/ Muscular Dystrophy Clinic: (206) 598-4295

Pulmonary Medicine Clinic: (206) 598-4615

Notes:



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