# ­­­Salisbury Hospital COVID-19 Mouth­­ Care Guidance

We advise that patients who have COVID-19, or who are suspected of having COVID-19, should follow careful steps to ensure good mouth care during and after their illness. This advice is based on: 1) research demonstrating that the mouth is a reservoir of SARS-CoV-2 (the virus that causes COVID-19) and is a site of virus copying; and 2) research which suggests that the virus could pass from saliva into the blood vessels of the mouth and then travel to the lungs via the bloodstream, rather than just by inhalation into the airways of the lungs.

**Why this is important for you**

* A teaspoon of saliva can contain over 500 million copies of the SARS-CoV-2 virus.
* The more virus there is in someone’s saliva has been linked to getting more severe COVID-19.
* High virus numbers in saliva is reported to be a stronger predictor of death from COVID-19 than a patient’s age.
* Having severe gum disease increases the risk of getting severe COVID-19.
* Research shows that those who die from COVID-19 are 8.8 times more likely to have had severe gum disease.
* Put another way, the increased risk of death from COVID-19 in people with severe gum disease is 780% higher.
* Research shows that the SARS-CoV-2 virus can be killed in the test tube with the use of some specific mouthwash products which are safe, cheap and easily available in supermarkets, pharmacies, and online (see list below).
* Simple oral healthcare measures have also been shown to improve the chance of recovery from other types of pneumonia in hospital patients. The same might be true for COVID-19.

**Guidance**

Here are the simple steps that adults can take every day to protect and improve their oral health.

1. Brush your teeth at least twice a day for at least 2 minutes using a fluoride toothpaste.
2. Brush last thing at night so there are lower numbers of troublesome bacteria in your mouth while you sleep.
3. Brush all surfaces of each tooth carefully and specifically clean well along the gum line.
4. Clean between the teeth by interdental brushing, or floss where the gaps are too tight to use interdental brushes.
5. Spit out after toothbrushing but do not rinse away the toothpaste with water as it contains protective agents against gum disease and decay. (Rinsing with a fluoride mouthwash clinically proven to reduce plaque offers further benefit.)
6. Use a fluoride-containing mouthwash clinically proven to reduce dental plaque (see list below).
7. If you wear dentures it is important to clean them after meals to remove debris. The mouth should also be cleaned with a soft toothbrush twice a day.

(These steps are based on advice from Public Health England (re-named in 2021 as the UK Health Security Agency): *Delivering Better Oral Health*, and The European Federation of Periodontology: *Primary Prevention of Periodontitis*.)

**Which mouthwash should I use?**

The following specific products have been shown to be active against SARS-CoV-2 in test tubes.

* **Dentyl Dual Action (contains fluoride and CPC) (requires shaking)**
* **Dentyl Fresh Protect (contains fluoride and CPC – also contains sodium benzoate)**
* **Listerine Advanced Defence Gum Treatment (contains ELA / LAE – also contains benzoic acid)**

These products are safe enough to be sold without prescription. Follow the instructions on the bottle.

Mouthwash should not be swallowed. (If someone does not understand that the mouthwash should not be swallowed, then it should not be used, or only used under supervision.)

**Note:** Mouthwashes containing only alcohol or chlorhexidine are effective at killing plaque bacteria which possibly encourage entry of SARS-CoV-2, but there is limited evidence that they directly kill the virus. Only products containing **Cetylpyridinium Chloride (CPC)** or **Ethyl Lauroyl Arginate (ELA / LAE)** have evidence for killing SARS-CoV-2 in the test tube. (We await the results of clinical trials of their effect in the mouth.)

**Should I use these mouthwashes and take particular care of my mouth if I have COVID-19?**

Even if you feel well, we suggest you start using one of these mouthwashes soon after testing positive for COVID-19 and continue its use for at least 2 weeks. The SARS-CoV-2 virus can stay in the saliva in the mouth for more than two months after infection. COVID-19 patients at Salisbury Hospital will be offered one of these mouthwashes. At this stage we do not know if these mouthwashes will improve your COVID-19, so the choice to use it is yours. You will also be supplied with a toothbrush and toothpaste if you do not have your own when you are admitted to the ward.

Please ask staff to supply these items for you, if they have not done so already.

**Note:** Alcohol and benzoic acid/benzoate can irritate the mouth and may not be suitable for prolonged use. If you have an allergy to food preservative like benzoates, then avoid these mouthwashes or seek advice from your dentist.

**Any questions?**

If you have any questions, please ask staff in the ward or department, or seek advice from your dentist.

Document author: Graham Lloyd-Jones (Consultant Radiologist, Salisbury NHS Foundation Trust)

Reviewed by: Iain Chapple (Professor of Periodontology, Birmingham University)

Mili Doshi (Consultant in Special Care Dentistry, Surrey and Sussex Healthcare NHS Trust)

Katy Kerr (Associate Postgraduate Dental Dean, Health Education England, South East)

**Updated version available here** - <https://www.salisbury.nhs.uk/coronavirus/covid-19-mouth-care/>

Date first written:  May 2021 Last amended: January 2022 Version: 1.7 Review due:  July 2022