

# Prescriptions

# Topical Antifungal Agents

For Angular Cheilitis best to use the creams or ointments

- Nystatin (*mycostatin*)  
ointment

Disp: 1 tube

**Sig:** apply to affected site  
after meals and at bedtime

- Clotrimazole (*lotrimin*,  
*mycellex*) cream otc

Disp: 1 tube

**Sig:** apply to affected areas  
after meals and before bed

# Angular Cheilitis Treatment (continued)

- **Nizoral** (*ketoconazole*)

Disp: one tube

**Sig:** apply to affected areas  
once per day at bedtime

- **Mycolog II** (*nystatin + triamcinolone*) ointment

Disp: one tube

**Sig:** apply to affected areas  
after meals and at bedtime

# Oral Candidiasis tx. Generalized Cases

- **Clotrimazole** (Mycelex)  
troches 10 mg.

Disp: 50 troches

Sig: dissolve one troche in  
mouth q4h until Rx is finished

- **Nystatin** (mycostatin) oral  
suspension

Disp: 300 ml.

Sig: rinse and swish then swallow q6h  
till Rx is finished

# Angular Cheilitis

- May want to combine with Vytone if we feel there is an inflammatory component to the area

## Rx

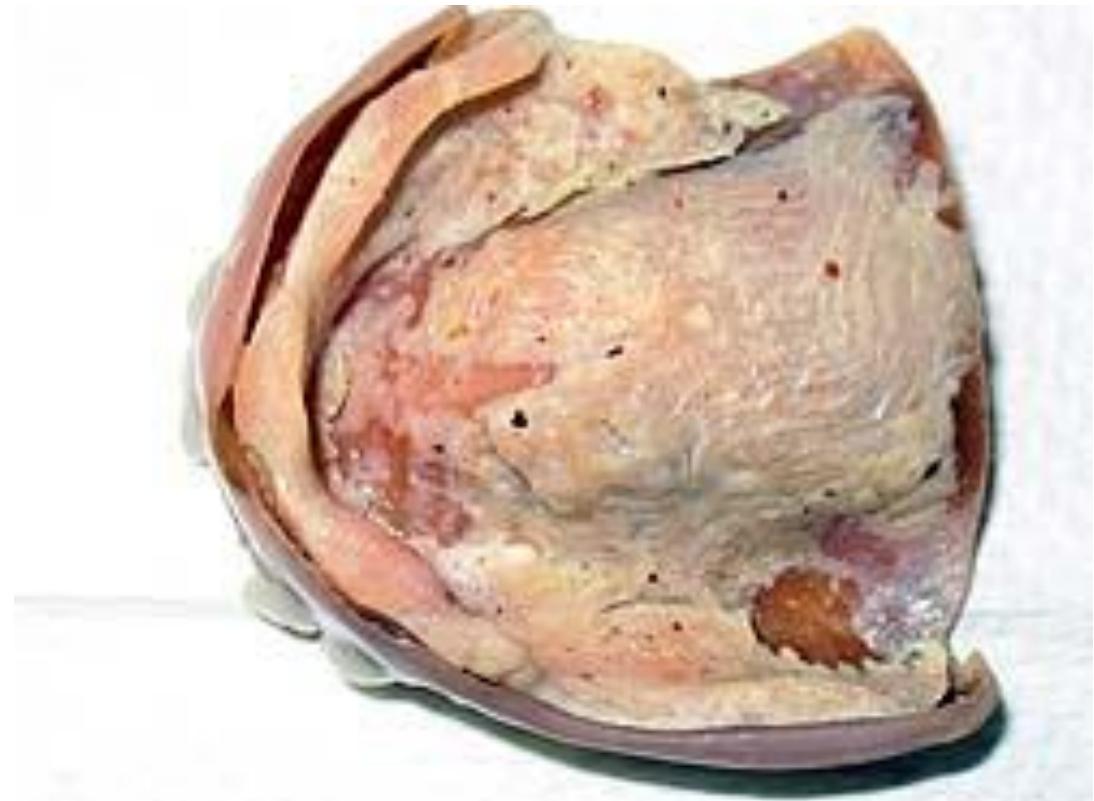
Vytone cream 1%

Disp: 1 15 gr. Tube

Sig : rub onto affected area tid prn

# Candidiasis Tx. (continued)

if a denture is involved soak the denture in Nystatin oral suspension or dilute sodium hypochlorite with H<sub>2</sub>O 1:10 and soak overnight



For patients who are “sick” debilitated or otherwise immune suppressed and have oral candidiasis:

- Use the aforementioned topical approaches and in addition, perhaps in consultation with the patients physician...

**\*\*** Fluconazole (*diflucan*) 100 mg,

Disp: 20 tablets

Sig: take one tablet per day till Rx is finished

**\*\*** up-regulates Coumadin and several

anticonvulsants

# Sodium Lauryl Sulfate (SLS)

All Crest and most Colgate tooth pastes have (SLS)

Tooth pastes that do not have (SLS):

- Tom's of Maine
- Jason Cosmetics Natural Toothpaste
- Sensodyne ProNamel Toothpaste
- Verve Ultra
- Squigle Tooth Builder Toothpaste
- Xyli-White Baking Soda Toothpaster
- Rembrandt Aphthous Ulcer Toothpaste



# Treatment of Aphthous Ulcers

There is no “standard of care” for treating Aphthous ulcers

- Protective covering
- Topical anesthesia paste
- Anesthetic rinses
- Topical steroids
- Systemic
- cauterization





# Canker Yanker

*Eat again. Drink again. Smile again.*

**DIETARY SUPPLEMENT**

Packed with Nutrients

for a **Healthy Mouth**

**15** POWDER  
PACKETS

loaded with a unique  
vitamin and mineral  
blend to keep  
your mouth  
feeling good!

*Orange  
Flavor*



15 - 6.1g Packets/  
Net Wt. 3.2oz (91.5g)

**POWDER MIX**





# Cauterizing Agents **very effective**

**But.....**

- Hurts a lot to apply (seconds)
- Can destroy local nerve endings
- Alter taste for weeks or months if get on the tongue
- Argyria
- Tattooing of attached gingiva



# Oralone (triamcinolone) .1 %

- Oralone Dental Paste



- Disp: 1 5g. Tube
- Sig: dry area with gauze and apply with Q-tip tid and before meals

Using Extreme Topical Steroids for Large Aphthous Ulcers, Erosive LP and Pemphigoid:

- Lidex

- Temovate

# Lidex (fluocinonide) .05 %



- Lidex ointment .05 %

Disp: 1 15 gr. Tube

Sig: apply to affected area qid

# Temovate (clobetasol) .05 %



- Temovate ointment .05%

Disp 1 15 gr. Tube

- Sig apply to affected area tid

**Pharmacist caveat**

# Aphthasol

(amlexanox) 5% oral paste

- Aphthasol

Disp 1 tube

Apply to the affected area  
with a Q-tip after drying qid





# Tetracycline

# Minocycline



- Tetracycline (250mg.) or Minocycline (100mg.)
- Disp 30 caps.
- Sig: open capsule and dissolve into 1 cup of water. Rinse qid till finished



# Multiple small lesions or herpetiform

- Xylocaine<sup>®</sup> Viscous 2%

Disp 500 ml. (about 16 oz.)

Sig: rinse with 1 tbs q2 hours

- **“Magic Mouthwash”**

(Benadryl elixr, lidocaine viscous,  
Maalox)

**Disp: 500 ml**

**Sig: rinse with 1 tbs. q 2 h**

# Penciclovir

- Two randomized, prospective, double blind, parallel group multicenter clinical trials performed in USA and Europe
- 4,573 Immune competent people
- 28 % faster resolution of pain
- 31 % faster healing

Raborn W et.al Effective treatment of herpes simplex labialis with penciclovir ***Journal of the American Dental Association*** March 2002. vol 133 (3) 303-309

# Denavir<sup>®</sup> (penciclovir 1 %)

- Denavir cream 1 %
- Disp: 1 5 gr. tube
- Sig : apply area q2h for 4 days while awake and as soon as symptoms start

# R<sub>x</sub> for Sitavig®

- Sitavig 50 mg.
- Disp: one blister packet
- Sig: apply as directed by packet

Dr. Q's suggestion...

# Benadryl® OTC for angioedema

- Benadryl (diphenhydramine) 25 mg,

Have patient purchase bottle at pharmacy

Adults 3 tabs q4h for 2 to 3 days

Children 6 to 12 1 tab q4h for 2 to 3 days or Benadryl liquid (12.5mg/ml) 2 tsp. every 4 hours for 2-3 days

Children < 6 send to pediatrician

**Warn patient about drowsiness/driving**

**If allergen is identified...obviously avoid...if not identified-refer**



Rx Xerostomia

- Rx Salagen tablets 5 mg.
- Disp : 90 tabs
- Take 1 tab tid

- Rx Evoxac (cemiveline HCL)
- Disp: 90 tabs
- Take 1 tab tid

# Saliva<sup>max</sup>

## •Rx

Salivamax

Disp: 30 packets

Sig: dissolve 1 packet in 1  
oz. of water and  
swish/rinse qid or as  
needed

Refills \_\_\_\_5\_\_\_\_

