

Therapeutic Agents Susan Müller, DMD, MS

A. Candidiasis

Mouthrinse

RX: Nystatin oral suspension 100,000 units/ ml Disp: 280 ml Sig: 1 tsp, qid, hold for 3 mins, expectorate, no food/liquid/rinsing for 30 mins

Note: If the patients wear dentures, these must be removed before rinsing

Ointments/Creams

RX: Nystatin ointment 100,000 units/gram (Mycostatin) Disp: 30 gm Sig: Apply thin film to inner surfaces of dentures and angles of mouth 2-4 times a day

RX: Ketoconazole 2% cream (Nizoral) or Clotrimazole 1% cream (Lotrimin-Rx) Disp: 30 gm Sig: same as for ointment

**RX: Nystatin and triamcinolone acetonide (Ointment or cream) Disp: 30 gm Sig: Apply to corner of mouth bid

**Note: This is good for angular cheilitis, particularly when there is an inflammatory component. The steroid quickly reduces the inflammation

Atrophic Candidiasis (Denture Stomatitis)

RX: Nystatin ointment 100,000 units/gram Disp. 30g. tube Sig. apply to denture base and insert denture, BID.

Lozenges

RX: Clotrimazole 10 mg (Mycelex oral troches) Disp: 70 troches Sig: Dissolve in mouth 5 tabs per day. NPO 30 mins

Note: Patients need to remove dentures before using the troche to ensure the medication reaches the mucosa underneath the denture

Systemic Treatment

RX: Fluconazole 100mg (Diflucan) Disp: 14 Sig: 1 tab qd *Note: Be aware of possible drug interactions with:* **warfarin, statins, oral hypoglycemic;** may need *a 4 week course*

B. Recurrent Oral Herpes Infection

Systemic

RX: Acyclovir 400mg (Zovirax) ** Disp 12 capsules Sig: 2 capsules tid at onset of symptoms for 2 days.

RX: Famciclovir 500 mg (Famvir) Disp: 3 Sig: 3 tablets at first sign of symptoms

RX: Valacyclovir 1 gm (Valtrex) Disp: 20 Sig: Take 1 tablet bid for 3 days

Note: Use all systemic HSV medications with caution when prescribing to patients with impaired renal function and hepatic disease. For use in pre-pubescent children use acyclovir

C. Primary Herpes Simplex Infection

RX: Famciclovir 500mg (Famvir) Disp: 20 tablets Sig: 1 BID for 10 days **Adults only

RX: Acyclovir 400 mg (Zovirax) Disp: 32 capsules Sig: 2 capsules TID for the first 3 days, then 1 capsule bid for 7 days

D. Ulcers, including Erosive Lichen Planus, Mucous Membrane Pemphigoid, Aphthous Stomatitis, and Traumatic Ulcers.

Topical Agents

RX: Fluocinonide 0.05%% (Lidex) or Clobetasol 0.05% (Temovate) (depending on where you use it prescribe gel or cream) Disp: 30 gm Sig: Apply to affected area BID-TID – depending on severity

Note: Please let patients know that the packaging says that the product cannot be used in the mouth, but that it is okay to use

Tacrolimus (Protopic) ointment 0.1% Disp. 30g tube Sig. apply thin layer to affected area tid. No food/liquid/rinsing for 30 mins

Mouthrinse

RX: Dexamethasone elixir 0.5mg/5ml Disp: 500 ml Sig: 1 tsp qid, hold for 3 mins, expectorate, no food/liquid or rinsing for 30 mins

Note: A low alcohol formulation (5%) is available as well, and may be better tolerated by some. You need to specify on prescription: Roxane Laboratories NDC # 00054-3177-63 NO SUBSTITUTIONS, PLEASE SPECIAL ORDER IF IT IS NOT AVAILABLE

RX: Triamcinolone rinse Directions to pharmacist: .96 grams triamcinolone powder with purified water and .24 g saccharin sodium QS to 240 ml to final concentration of 4mg/ml Sig: 1 tsp qid, hold for 3 mins, expectorate, no food/liquid or rinsing for 30 mins

RX: Tacrolimus rinse (compounded) Tacrolimus in distilled water 0.1mg/100mL Disp. 500mL Sig. Rinse with 1tsp of solution for 2 minutes expectorate rinse qid.

Systemic

Prednisone 10 mg

Disp:

Sig: 30 mg to 60 mg PO q AM. Sequence depends on disease severity. I often do 60 mg day 1, 50 mg day 2, 40 mg day 3, 30 mg day 4, 20 mg day 5-7, 10 mg day 8-12, then one every other day for 2 or 3 more doses.

Note: a.	Prednisone should be taken within 1½ hours after normal
	waking time to minimize side-effects

- b. Candidasis can be a side-effect of any steroid or antibiotic therapy, either topical or systemic.
- c. Diabetic patients need to monitor glucose levels carefully since prednisone increases blood glucose concentrations.

Intralesional Steroids

RX: Triamcinolone acetonide injectable 40 mg/ml Area should be anesthetized before injection Inject 10-40 mg (I use a 1 cc TB syringe and inject generally .5 cc or 20 mg) Useful in solitary major aphthous ulcers and traumatic ulcers

Anticollagenase Agents for Desquamative Gingivitis

RX: Doxycycline 50mg or 100mg Disp: 60 Sig: Take one tablet QD

Note: Usually the doxycycline medication is used for the initial 2-6 months of treatment and then topical steroids are used for maintenance.

Important: Remember that doxycycline may decrease the effectiveness of birth control pills, so those patients will need supplemental birth control. Also, remember to warn about possible photosensitivity.

E. Symptomatic Geographic Tongue

RX: Dexamethasone elixir 0.5mg/5mL Disp. 500mL Sig. 1 tsp, qid, hold for 3 mins, expectorate, no food/liquid/rinsing for 30 mins

F. Burning Mouth Syndrome

Over the counter agents

Oral balance gel prn Sugar-free gum/candy/lozenge prn

Systemic agents

RX: Clonazepam 0.5 mg (which is 5 ml of a 0.1 mg/ml solution) Swish for 5 minutes and spit out 3-4 times a day. If no improvement within 2 weeks, patient can swallow the night time dose.

This medication does not cure the problem but makes the burning more tolerable. Evaluate after 30 days. Depending on the circumstances, then slowly increase to 1 mg.