



National Institute of Dental
and Craniofacial Research

Burning Mouth Syndrome



KEY POINTS

- Burning mouth syndrome is burning pain in the mouth that may occur every day for months or longer.
- Burning mouth syndrome can be difficult to diagnose, and your dentist or doctor will rule out other conditions before diagnosing burning mouth syndrome. Advocating for yourself and forming a partnership with a dentist or doctor you trust can be helpful throughout the process of getting a diagnosis.
- No specific treatment works for all people. However, your health care provider(s) will help you understand your condition, encourage strategies to reduce burning sensations, and may prescribe medicine to help you manage mouth pain, dry mouth, or other symptoms.

SYMPTOMS

The main symptom of burning mouth syndrome (BMS) is pain in the mouth that feels like burning, scalding, or tingling. Or, the pain may happen with a feeling of numbness, which comes and goes. Other symptoms include dry mouth or altered taste in the mouth.

BMS is a painful condition. Usually, the tongue is affected but the pain may also be in the lips or roof of the mouth, or throughout the mouth.

BMS pain can last for months or years. Some people feel constant pain every day. For others, pain increases throughout the day. For many people, the pain is reduced when eating or drinking.

DIAGNOSIS

BMS is hard to diagnose. One reason is that people with BMS often don't have a mouth problem that can be seen during an exam.

Talk to your dentist first. About one-third of people with BMS have an oral habit such as tooth grinding or jaw clenching that can lead to BMS. Dentists are familiar with oral habits and can help you manage them.

Your dentist may refer you to a specialist in oral surgery, oral medicine, or oral pathology who can assist with diagnosing or treating BMS. Ear, nose, and throat specialists can also treat this condition.

The dentist or doctor will review your medical history and thoroughly examine your mouth. A lot of tests may be needed. Tests may include:

- Blood tests to check for certain medical problems
- Oral swab tests
- Allergy tests
- Salivary flow test
- Biopsy of tissue
- Imaging tests

PRIMARY AND SECONDARY BMS

Primary BMS: If tests do not reveal an underlying medical problem, the diagnosis is primary BMS. Experts believe that primary BMS is caused by damage to the nerves that control pain and taste.

Secondary BMS: Certain medical conditions can cause BMS. Treating the medical problem will cure the secondary BMS. Common causes of secondary BMS include:

- Oral habits, such as tooth grinding or jaw clenching
- Depression
- Hormonal changes, such as from diabetes or a thyroid problem
- Allergies to dental products, dental materials (usually metals), or foods
- Dry mouth, which can be caused by certain disorders (such as Sjögren's syndrome) and treatments (such as certain drugs and radiation therapy)
- Certain medicines, such as those that reduce blood pressure
- Nutritional deficiencies, such as a low level of vitamin B or iron
- Infection in the mouth, such as a yeast infection
- Acid reflux

TREATMENT

Your dentist or doctor will help you get relief.

- Your dentist may help you manage oral habits that contribute to BMS, such as tooth grinding or jaw clenching.
- Your dentist or doctor may prescribe medication that can help control pain and relieve dry mouth. Sometimes a small dose of topical or systemic clonazepam might help with BMS pain.

Because BMS is a complex pain disorder, the treatment that works for one person may not work for another.

Symptoms of secondary BMS go away when the underlying medical condition, such as diabetes or yeast infection, is treated. If a drug is causing secondary BMS, your doctor may switch you to a new medicine.

HELPFUL TIPS

To help ease the pain of BMS, sip a cold beverage, suck on ice chips, or chew sugarless gum.

Avoid irritating substances, such as:

- Tobacco
- Hot, spicy foods
- Alcoholic beverages
- Mouthwashes that contain alcohol
- Products high in acid, such as citrus fruits and juices

Ask your dentist and doctor for other helpful tips.

For more copies contact:

National Institute of Dental and Craniofacial Research
National Oral Health Information Center
1 NOHIC Way
Bethesda, Maryland 20892-3500
1-866-232-4528
www.nidcr.nih.gov

U.S. DEPARTMENT OF
HEALTH AND HUMAN
SERVICES

National Institutes of Health

NIH Publication No. 23-6288

November 2023

This publication is not copyrighted. Make as many photocopies as you need.