



Oral health for children and young people with cancer

An information guide for parents, carers and families

The purpose of this guide is to explain how to help take care of your child's mouth and teeth during treatment for cancer.

Cancer treatment can affect oral (mouth and teeth) health. During treatment there is a higher risk of tooth decay and gum problems. Looking after the mouth and teeth during treatment is very important. We know it can be hard to keep up with toothbrushing and mouth care when staying in hospital.

At the beginning of treatment

Dental assessment

It is best to begin cancer treatment with a healthy mouth and no signs of tooth decay or oral disease. Dental infections can be serious during cancer treatment because the body may be less able to fight infections.

Children and young people should have a dental check-up (including X-rays if needed) around the time of diagnosis. This helps to spot and treat problems early and lowers the risk of problems during cancer treatment.

This might not always be possible. Some hospitals may not have a dental team on site, and not everyone has a family dentist. Sometimes, cancer treatment needs to start straight away.

If a check-up cannot happen before treatment, your medical team will help to arrange one at the safest and most appropriate time. The check-up might be with a specialist children's dentist or a local dental service.

If your child already has a dentist, please let the medical team know.

Braces

Wearing braces can increase the risk of tooth decay and may cause discomfort or injury inside the mouth. If your child has braces, your medical team will contact the orthodontist, to decide if the braces should be removed during treatment.

If you're not sure who to speak to, please ask your medical team — they will help coordinate the right care.

During treatment

Oral care

Always bring a toothbrush and toothpaste for inpatient stays at the hospital. If you forget them, ask the ward staff if you are able to get a toothbrush and toothpaste from the ward or elsewhere in the hospital.

Follow the advice below about how to care for your mouth and teeth during treatment:

- brush teeth twice a day - last thing at night and at one other time
- use a fluoride toothpaste - a high fluoride toothpaste may be prescribed for children over 10 years old
- spit out after brushing, don't rinse - to help the fluoride stay on the teeth and protect them

- use a fluoride mouthwash - at a different time to brushing
- reduce sugary foods and drinks - especially between meals
- have regular dental check-ups and fluoride treatment
- ask for dietary support
- look at the resources on page 3 for more toothbrushing tips

If you're unsure about any part of your mouth care routine, please speak to your medical or dental team.

Feeling sick (nausea) and being sick (vomiting)

When someone is sick, stomach acid can coat the teeth and temporarily soften the enamel (the hard outer layer of the teeth). Brushing straight after being sick can damage this softened enamel. It is best to wait at least 30 minutes before brushing.

In the meantime, to help protect the teeth and freshen the mouth:

- rinse with a fluoride mouthwash or
- chew sugar-free gum to help clear the acid and reduce the taste.

Oral Mucositis

Cancer treatment can cause a painful mouth due to its effect on fast-growing cells. Oral mucositis is inflammation and cell damage in the mouth and gastrointestinal tract. It can cause a sore mouth, ulcers, bleeding or cracked lips. This can be painful when swallowing, eating, or talking. It is more common with certain chemotherapy drugs and head and neck radiotherapy. It usually occurs within a week of treatment.

When a child or young person has mucositis, it is important to keep their mouth clean to help prevent infection — even though this can be difficult when the mouth is sore.

Follow the tips below to help:

- use a soft, small toothbrush and non-foaming toothpaste
- if brushing is too painful, use mouthwashes which can be prescribed by your medical team
- keep the lips moisturised with lip balm to reduce dryness and discomfort.

The medical team can offer advice and support to help manage mouth care during this time.

There are a few ways to help reduce the chances of mucositis developing, or to make it less severe if it does happen.

For some types of chemotherapy, holding ice in the mouth during treatment (cryotherapy) can help. This can be hard to tolerate and may not be possible.

Some hospitals offer photobiomodulation. This is a type of light or laser treatment that can help prevent or reduce the severity of mucositis.

If mucositis does occur, numbing sprays and protective gels can be used to ease pain and discomfort.

For more information, see the oral mucositis leaflet available on the CCLG website.

Oral Infections

During cancer treatment, the body is less able to fight infection. This may increase the risk of mouth infections, such as oral thrush (candidiasis) and cold sores (herpes). Keeping the mouth clean with good oral hygiene can help to lower the risk of infections.

When helping a child or young person brush their teeth, check for white patches, blisters, ulcers, or sores. If you can see any of these, tell your medical team as soon as possible.

Dry Mouth

Saliva is a liquid produced in the mouth that keeps it moist. It helps protect teeth from decay, clears the mouth and prevents infection. Chemotherapy or head and neck radiotherapy can damage the glands that produce saliva. This can reduce the amount of saliva, increasing the risk of dental decay and oral infections.

Although a dry mouth can't be completely prevented, it may help to take frequent sips of water. Your team may offer saliva substitutes or suggest sugar-free gum to stimulate saliva flow. Please tell your medical team if the mouth feels very dry.

Dental check-ups

Regular dental check-ups should take place every 3 months during treatment. They may take place at a family dentist, community dentist or hospital dental setting, depending on what is available.

Check-ups are important to help spot tooth decay or other problems early. Any treatment needed can then be planned safely and at the right time.

Dental treatment

If dental treatment is needed, the type and timing must be carefully planned around cancer treatment. This is to make sure it is safe to go ahead, especially when blood counts are low or there is a higher risk of infection.

Maintaining good oral hygiene can help avoid the need for treatment during this time. If new dental issues arise, a safe plan will be made to manage them alongside cancer treatment.

Helpful resources

British Society of Paediatric Dentistry (BPSD)
www.bspd.co.uk/Patients/PatientInfo

Practical information about caring for your child's teeth.



A practical guide to children's teeth
www.bspd.co.uk/Patients/PatientInfo



Strategies to help with resistance to brushing
www.bspd.co.uk/Professionals/Resources/Mini-Mouth-Care-Matters



Advice for parents of children with autism
www.bspd.co.uk/Patients/PatientInfo

Leeds Children's Hospital Television
www.lchtv.com/photobiomodulation

Video created by Leeds Children's Hospital and JTV Cancer Support showing what photobiomodulation treatment is like. Children and young people share their experiences of mucositis and light (photobiomodulation) treatment. Made with support from the British Society of Paediatric Dentistry, the Royal College of Surgeons, and Candlelighters children's cancer charity.



Mucositis and photobiomodulation
<https://www.lchtv.com/photobiomodulation>

CCLG: The Children & Young People's Cancer Association publishes a variety of free resources to order or download at www.cclg.org.uk/publications



Scan to order or download this factsheet or any other CCLG publications FREE of charge.

Visit the CCLG supportive care information page to find resources about helping to prevent and manage side effects that children and young people may experience during treatment



Supportive care resources
www.cclg.org.uk/supportive-care

Other CCLG resources you may find helpful:



Helping your child to eat well during cancer treatment



Late effects: Oral health



The Children & Young People's Cancer Association

Century House, 24 De Montfort Street
Leicester LE1 7GB
0333 050 7654
info@cclg.org.uk | www.cclg.org.uk

    @cclguk

CCLG and The Children & Young People's Cancer Association are operating names of The Children's Cancer and Leukaemia Group, registered charity in England and Wales (1182637) and Scotland (SC049948).

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This edition: July 2026
Next review date: July 2029



This factsheet was written by Claudia Heggie (NIHR Doctoral Research Fellow & Senior Specialty Trainee in Paediatric Dentistry, Leeds Children's Hospital), Urshla Devalia (Consultant Paediatric Dentist, Royal National ENT & Eastman Dental Hospitals, London), Eloise Neumann (Advanced Nurse Practitioner, Birmingham Children's Hospital) and Colin Thorbison (Consultant Paediatric Oncologist, Alder Hey Children's Hospital, Liverpool) and reviewed by the CCLG Information Advisory Group, comprising parents, survivors and multiprofessional experts in the field of children and young people's cancer.

We are CCLG: The Children & Young People's Cancer Association, a charity dedicated to creating a brighter future for children and young people with cancer. Powered by expertise, we unite the children and young people's cancer community, driving collective action and progress.

We fund and lead pioneering research, provide trusted information and guidance for children and young people with cancer and their families, and bring together professionals to improve treatment, care and outcomes.

Our expert information helps children and young people, and everyone supporting them, to navigate the challenges of cancer and its impact, offering reassurance and clarity when it's needed most.

We make every effort to ensure that this information is accurate and up to date at the time of printing. Information in this publication should be used to supplement appropriate professional or other advice specific to your circumstances.

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