

AGD:FACTSHEET FOR THE PATIENT

Compiled for you by the Academy of General Dentistry



MOUTH RINSES (MOUTHWASH)

What are mouth rinses?

Mouth rinse or mouthwash is a product used for oral hygiene. Antiseptic and anti-plaque mouth rinse claims to kill the germs that cause plaque, gingivitis, and bad breath. Anti-cavity mouth rinse uses fluoride to protect against tooth decay. Mouth rinses are generally classified either as cosmetic, therapeutic, or a combination of the two. Cosmetic rinses are commercial, over-the-counter (OTC) products that help remove oral debris before or after brushing, temporarily suppress bad breath, diminish bacteria in the mouth, and refresh the mouth with a pleasant taste. Therapeutic rinses have all of the benefits of cosmetic rinses but also contain an added active ingredient that helps protect against some oral diseases. Therapeutic rinses also can be categorized according to use: anti-plaque/anti-gingivitis rinses or anti-cavity fluoride rinses, for example.

Dentists will prescribe special rinses for patients with more severe oral problems, such as cavities, periodontal disease, gum inflammation, and xerostomia (dry mouth). Therapeutic rinses also are strongly recommended for those who can't brush due to physical impairments or medical reasons.

Should I use a mouth rinse?

Whether or not you should use a mouth rinse depends upon your needs. Many dentists consider the use of fluoride toothpaste alone to be more than adequate protection against cavities. Although anti-cavity rinses with fluoride have been clinically proven to fight up to 50 percent more of the bacteria that cause cavities, and most rinses are effective at curbing bad breath and freshening the mouth for up to three hours, initial studies have shown that most OTC anti-plaque rinses and antiseptics are not much more effective against plaque and gum disease than rinsing with water.

Most dentists are skeptical about the value of these anti-plaque products, and studies point to only a 20 to 25 percent effectiveness, at best, in reducing the plaque that causes gingivitis. Mouth rinses can cause harm by masking the symptoms of an oral health disease or condition.

How should I use a mouth rinse?

Before using mouth rinses, dentists suggest that you brush and floss your teeth well. Then, measure the proper amount of rinse as specified on the container or as instructed by your dentist. With your lips closed and the teeth kept slightly apart, swish the liquid around with as much force as possible. Many rinses suggest swishing for 30 seconds or more. Finally, thoroughly spit the liquid from your mouth.

Teeth should be as clean as possible before applying an anti-cavity rinse to reap the full preventive benefits. Consumers should not rinse, eat, or smoke for 30 minutes after using rinses, as these practices will dilute the fluoride and rinse it away.

Are there any side effects?

Yes, and they can vary depending on the type of rinse. Habitual use of antiseptic mouthwashes that contain high levels of alcohol (18 to 26 percent) may produce a burning sensation in the cheeks, teeth, and gums. Many rinses with more concentrated formulas can lead to mouth ulcers, sodium retention, root sensitivity, stains, soreness, numbness, changes in taste sensation, and painful mucosal erosions. Most anti-cavity rinses contain sodium fluoride, which can lead to fluoride toxicity if taken excessively or swallowed. Because children tend to accidentally swallow mouthwash, they should only use rinses under adult supervision. If you experience any irritating or adverse reactions to a mouth rinse, discontinue its use immediately and talk to your dentist.

Do you have questions about dental health?

At the AGD's Web site, you can search more than 300 oral health topics, post a dental question, sign up for e-newsletters, find an AGD dentist, and more.

Visit us at www.agd.org.



> For more information, visit www.agd.org or call 1.877.2X.A.YEAR (1.877.292.9327).

> Would you like additional copies of this fact sheet for your patients? Call Jennifer Beale, AGD coordinator, circulation, at 888.243.3368, ext. 4345, or send an e-mail to jennifer.beale@agd.org. A nominal fee will be charged for each request. Members also can download this fact sheet and others from the AGD Web site at www.agd.org/members_only/patient_res.