FAST FACTS: Oral Pain

The oral cavity (oropharynx) consists of the mouth, pharynx (throat), and jaw. It serves both digestive and respiratory tract functions. The teeth are the most common source of oral pain, and are particularly vulnerable to the processes of aging. However, there are many other possible causes of oral pain, some are listed below. Oral pain may also be referred from other body regions and may actually be a symptom of disease in another body area.

Possible causes of oral pain
- Dental problems: Cavities; chipped, loose, damaged teeth; food between teeth; gum disease; abscess; tooth grinding.
- Oral conditions: infections such as thrush, shingles or cold sores; cancer or tumors of the mouth or tongue; disorders of the salivary glands.
- Jaw conditions: temporomandibular joint (TMJ) syndrome; arthritis; fracture or infection; cancer or tumor.
- Pain from other causes: cardiac pain (pain in lower jaw and/or neck); sinus infection (pain in upper teeth); central post-stroke pain; persistent idiopathic facial pain (cause unknown); facial pain attributed to multiple sclerosis; burning mouth syndrome.

Recognition: Signs suggesting the presence of oral pain or problems
- Swelling around the jaw line or neck, bad breath or mouth odor, not eating or chewing, facial grimace.

Assessment
- Characteristics of the pain e.g. onset, acute vs. chronic, location, radiation
- Precipitating factors (triggers)
- Associated symptoms: fever, weight loss, unable/unwilling to eat, fatigue, chest pain, shortness of breath
- Examine mouth and throat, using an adequate light source. Assess condition of:
  - The oral cavity (lips, gum line, oral mucosa, and tongue): The oral cavity should be pink, moist, and intact.
  - The presence or absence of natural teeth and/or dentures: Natural teeth should be intact and dentures (partial or full) should fit comfortably and not be moving when the older adult is speaking.
  - Ability to function (speak, chew and swallow) with or without natural teeth and/or dentures.
- Document and inform clinician of any abnormal findings, such as dryness, swelling, sores, ulcers, bleeding, white patches, broken/decayed teeth, halitosis, ill-fitting dentures, difficulty swallowing, signs of aspiration, and pain.
- Assessment Tool: The Oral Health Assessment Tool (OHAT)
- If chest pain is present, perform chest exam.
Interventions
- If cardiac cause of pain is suspected, notify clinician on-call or call 9-1-1 as per protocol.
- Pharmacologic: non-opioid and opioid
- Non-pharmacologic: oral hygiene including tongue and lips, soft foods, avoid spicy or acidic foods if these worsen symptoms; relaxation techniques; distraction, e.g. reading, TV, activities, music, etc.
- Reassessment

Nursing Diagnoses
- Alteration in Comfort
- Impaired Nutritional Status

References