

A close-up photograph of a man with dark, curly hair and a beard, wearing a blue t-shirt. He is brushing his teeth with a white toothbrush. The background is a solid blue color. The title 'WORD OF MOUTH' is overlaid in large, white, sans-serif capital letters.

WORD OF MOUTH

MAGAZINE

ISSUE 94 | SEPTEMBER 2022 This month we continue to raise awareness about the importance of good oral health focusing on how oral health may be linked to physical, mental, and sexual health.

Editor's Welcome

Hello and welcome to the latest edition of Word of Mouth – the Oral Health Foundation's digital magazine.

Earlier this month, Liz Truss was named new Prime Minister for the United Kingdom and it's fair to say, she's got her work cut out for her. With many people unable to access NHS dental care, and an NHS Dental Contract at crisis point, we've highlighted five essential policies that need her urgent attention.

In the issue, we are also raising concerns about the impact which the cost of living is having on the nation's oral health – including many who are being forced into making sacrifices which could put the health of their mouth at risk.

We're also giving plenty of advice when it comes to oral health and mental health, including the impact that having Alzheimer's disease can have on self-care. Similarly, we're also using this issue to call for more oral health information for the visually impaired.

Finally, supporting Recycle Week 2022, our team gives some top tips for recycling and reusing old oral care products.

We hope you enjoy this edition of Word of Mouth and we'll be back again in November for a special issue on Mouth Cancer Action Month.



Sophie Turner
Editor, Word of Mouth

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Improve support for people with visual impairments

One of the UK's leading dental experts Dr Nigel Carter has expressed major concerns over a lack of oral health information for the visually impaired.

The chief executive of the Oral Health Foundation believes more oral health information should be available to those who suffer sight difficulties, after many visually impaired people claim not enough is being done to cater for their disability.

With the number of visual impairments in the UK increasing, over half of people with sight problems say there is inadequate information concerning oral care available to them in the platforms they are able to access.

Dr Carter believes that oral health educators everywhere need to be more aware of visually impaired audiences and adjust the formats of their information so that it is accessible for everyone.

Dr Carter says: "More than two million people in the UK suffer from a range of visual impairment, from low vision to complete blindness.

"We need to make sure these people get the support they need. Hospitals, GPs and dental practices should be prepared to meet the

needs of those who struggle with their sight. This might include presenting oral health information in larger text, bold text, braille and/or recording audio versions."

Visual impairment can have a negative effect on oral hygiene, compared with those with full sight.

According to recent studies, those with visual impairments are more likely to have severe gum disease, a leading causes of tooth loss.

In previous studies, people in the UK who are visually impaired were less likely to attend for dental check-ups and more likely to only visit the dentist when in pain.

"To discover twice as many people with sight problems only visit the dentist when they are in pain is extremely worrying and highlights a severe gap in dental information to this vulnerable group," adds Dr Carter. "This needs to change immediately."

"Visiting the dentist regularly is vital in maintaining a good oral health

routine. Those who don't have a dentist are far more likely to suffer from oral health-related diseases.

"Poor oral health may not have a proven link to a loss of vision, but it has the potential to bring on diabetes, heart and lung disease, premature and low-weight babies and increases your chance of having a stroke.

"It is vital we increase the numbers of those registered to a dentist and going for regular check-ups and the only way we can do that is to educate people of the dangers of not visiting regularly.

"The majority of people with sight difficulties need a magnifier to read, while others rely on audio tapes and verbal instruction. We have set out a strategy to fill this audience gap which currently exists within dentistry, not only in the UK but across the world."

Caring for the oral health of a person with Alzheimer's

September is World Alzheimer's Month – a campaign where people from all over the world unite to raise awareness and highlight the challenges of Alzheimer's disease.



This year's theme is 'Know Dementia, Know Alzheimer's' with a focus on post-diagnosis support. The aim is to highlight the importance of providing help for people suffering from dementia and families or carers that support them.

Even in the early stages, Alzheimer's disease and dementia affect a person's oral health and daily routines. As a result, poor oral health can lead to pain and tooth loss, infections, negative effects on self-esteem, and the ability to eat, laugh and smile. This is why family members and carers should have a clear idea of how to maintain good oral hygiene routines for people with Alzheimer's and dementia.

Prevention

In the early stages of the disease, prevention is key. It is important to keep routine and regular check-ups in place for anyone living with the disease. Contact your local community dental service to find an appropriate professional who has experience working with dementia sufferers.

Get them to follow simple brushing and cleaning techniques between their teeth. This could prevent the need for extensive procedures in the future, caused by oral hygiene neglect,

especially when the person may become less able to tolerate them or have the dexterity to carry out a full oral hygiene routine by themselves.

Give short and coherent instructions

During the middle and late stages of Alzheimer's, a person would start or has already lost some of their cognitive abilities. This means taking care of their oral health without aid might become challenging. The person may forget about simple things such as what to do with toothpaste and a toothbrush, how to brush their teeth or rinse their mouth.

Make the processes of their oral care routine as clear and detailed as possible, do not be vague and just tell them to brush their teeth. Break the directions into steps and walk them through the process. Try putting yourself as an example and lead them through each step of the routine: hold the toothbrush, put the toothpaste on it and then brush. You can also try holding their hand and guiding the brush with them.

Apart from brushing, do not forget about cleaning their gums, tongue and roof of the mouth twice a day with the last brushing after the evening meal and any night-time medication.

Choose a suitable toothbrush

Some oral health products might be easier to use than others. For instance, a soft-bristled or angled toothbrush is easier to use than the regular one but be aware that electric toothbrushes may confuse a person with Alzheimer's.

Dentures and mouth pain

If the person with Alzheimer's has a set of dentures to wear, you will have to brush them daily to remove any food leftovers and rinse them with water after meals. Every night when the dentures are taken off, you will also have to soak them in a cleanser. After dentures are removed, make sure to use a soft toothbrush or appropriate aid to clean the gums, tongue, and other soft tissues inside the cheeks where pockets of food may trap.

Watch out for any signs of discomfort during mealtimes, facial expressions or if the person refuses to eat. It could mean that their dentures do not fit properly or indicate mouth pain which might require a dental check-up and further professional assistance.

It is important to remember that people suffering from dementia or Alzheimer's

might be struggling with receiving the information or learning how to do something, so it is better not to pressure them. If they become irritated or begin to feel uncomfortable, leave the attempts of teaching them for later and offer your guidance instead. This way they might start feeling a little bit more at ease and willing to try again soon. You might as well want to consider simplify the process by showing them diagrams or step-by-step pictures.

With a little help, there's no reason why somebody suffering with Alzheimer's disease or dementia cannot have a good standard of oral health.

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Cost of living could signal an oral health decline

The Oral Health Foundation is concerned that many may sacrifice their oral health to lower monthly spending..

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Rising costs have hit the poorest families hardest and now we are seeing this impact on the health of the mouth. It is an unjust and unfair travesty that some people are having to make choices between putting food on the table and heating their home, and buying toothpaste, deodorant and shampoo.

Dr Nigel Carter OBE
Chief Executive
Oral Health Foundation



The rise in cost of living could lead to a deterioration in the nation's oral health, according to the Oral Health Foundation.

New research by the charity shows more than nine-in-ten (94%) UK adults have been affected in some way by the rising cost of living, with nearly two-in-three (62%) experiencing a significant increase in their outgoings.

Data reveals around four-in-five (82%) are being forced into making sacrifices into their spending habits, with one-in-four (25%) cutting back on oral health products like toothpaste, mouthwash and interdental brushes.

The increase in living costs is also labelled as a factor for one-in-three (31%) who have not visited a dentist in over two years while one-in-four (25%) parents have had to spend less money on their oral health to look after their children's teeth.

Since the beginning of the pandemic, around one-in-ten (12%) say their oral health has declined.

The Oral Health Foundation is concerned that rising costs could lead to a widening of oral health inequalities and calls for more support to help those in the greatest need.

Dr Nigel Carter, chief executive of the Oral Health Foundation, says: "Rising costs have hit the poorest families hardest and now we are seeing this impact on the health of the mouth. It is an unjust and unfair travesty that some people are having to make choices between putting food on the table and heating their home, and buying toothpaste, deodorant and shampoo.

"Buying habits are linked to behavioural habits and we're concerned that many people feel like they have little choice but to give up twice daily brushing just to make their toothpaste last a little longer. Absolutely nobody should be put in the position where they have to make sacrifices to the health of their mouth.

"Government is rightly under increasing pressure to end the cost of living crisis. They must now commit to a levelling up agenda that prevents a widening of oral health inequalities so that everybody can achieve the standards of oral health that they deserve."

More data from the Oral Health Foundation suggests oral health products are some of the last



Every penny goes towards helping people achieve a healthy smile

essentials people are willing to go without. Luxuries like holidays (53%) and tv subscriptions (43%) come top of the list of items the UK public has given up over the last year.

Oral health was also deemed a greater priority than hair products, skin care products, and make-up.

On average, UK households spend £4.70 per week on oral health products, however, most (38%) spend as little as £2 a week. Worryingly, twice as many households (22%) are now cutting back on how much they spend on their oral health compared to those who are choosing to spend more (11%).

The rise in cost of living has led over half (55%) of UK adults to feel like they have neglected their teeth over the last two years. As a result, more than one-in-five (28%) now regularly feel self-conscious or anxious because of their smile.

"Many people view good oral health as an important factor in their overall appearance, and in most cases, the health of the mouth can play a significant role in a person's confidence to smile," adds Dr Carter.

"This is most likely because a healthy smile often

translates to an attractive smile, and this will make a person feel better about themselves. A smile communicates a sign of friendship, trust and acceptability. As these are things most people strive towards, it means that taking good care of the mouth is incredibly important."

For a healthy mouth, the Oral Health Foundation advises brushing teeth last thing at night and at one other time during the day with a fluoride toothpaste.

The charity is also keen to highlight the importance of cutting down on sugary foods and drinks you have and keeping to regular dental visits. Health experts also advise cleaning between your teeth with an interdental brush once a day while chewing sugar free gum can also be helpful to neutralise plaque acid build-up throughout the day.

Dr Carter says: "Look after the mouth is very easy and does not take a lot of time. Government must do more to allow people the means and opportunity to care for their own mouths and support those in financial difficulties with the basic tools that are needed to do this."

Everybody deserves to have good oral health.

By donating to the Oral Health Foundation you are helping the most vulnerable people to achieve a healthier life through better oral health.

Every penny counts. Please donate today.

www.dentalhealth.org/donate



Caring for the planet, as well as your mouth

In connection with this years Annual Recycling Week.

Gas emissions, air and water pollution seem to be the main causes of rapid climate change, long-term health effects and are particularly damaging to the environment. Recycling reduces the amount of waste we send to landfill and water and saves energy, minimising gas emissions and various types of pollution.

This year's annual Recycle Week has just come to an end, with its 'Let's Get Real' theme, challenging perceptions and myths around recycling and finding ways to improve how we recycle the things we no longer need.

Here's some quick tips for recycling oral health products, so we can take steps to look after the planet just as well as we do the health of our mouth.

Recycling oral care products

While most oral care companies are doing more to be full sustainable and reduce carbon emissions, the list of non-recyclable oral health products is much longer than those which are recyclable.

Most councils across the UK are unable to recycle items like toothbrushes and toothpaste because they are made up of different types of materials which are fused together.

There is, however, a few alternatives.

Since 2018, Colgate have been working with TerraCycle to offer free recycling programmes specifically for oral care products and set up various drop-off points across the UK. This initiative focuses on then remoulding those products to make new recycled goods and slowly stop continuous pollution of the environment.

You also have the option of switching to environmentally friendly substitutes and avoiding using non-recyclables in the first place. This market is expanding quickly. For instance, instead of a plastic toothbrush, buy a bamboo one. Bamboo has a smaller ecological footprint and is biodegradable. Once you finished using it, remove the bristles and compost the handle, minimising the waste.

Reusing oral care products

If you still feel stuck with purchasing non-recyclable oral care products, there are other ways to reduce the level of

unnecessary waste and pollution. For instance, you could reuse it within your household.

Our research is really encouraging here and shows that as many as 80% of UK households do reuse old oral care products around the house – that's excellent!

Some of the most popular uses for old toothbrushes include scrubbing bathroom or kitchen tiles, cleaning car parts, and even golf clubs. Any kind of narrow space can be cleaned with thin bristles, so the list of potential uses goes on and on.

Unfortunately, the inability to dispose of most oral care products in a sustainable way has resulted in millions of plastic waste, and over four gallons of water waste (from leaving the tap running while brushing) every year. The consequences of these can already be seen, felt and will leave a mark on the environment for decades to come.

The good news is that manufacturers seem determined to make positive changes. These changes might be made directly to their products, like switching to more environmentally friendly plastics, or looking at other processes along the manufacturing chain, and even distribution. New technologies will also play an important role here, as will our own attitudes towards recycling and reusing oral care products.

Campaigns like Recycle Week are critical for maintaining momentum and reminding us about the importance of recycling. By working together we can all do our bit, and create an environment that brings healthier living, a healthier mouth and a healthier planet.

Taking care of your mental and oral health whilst experiencing psychosis or psychotic episodes

Unfortunately, if you are someone who experiences psychosis, you're more likely to develop problems with their teeth and gums. The good news is that there are things that you, your mental health team and your dentist can do to make a difference.

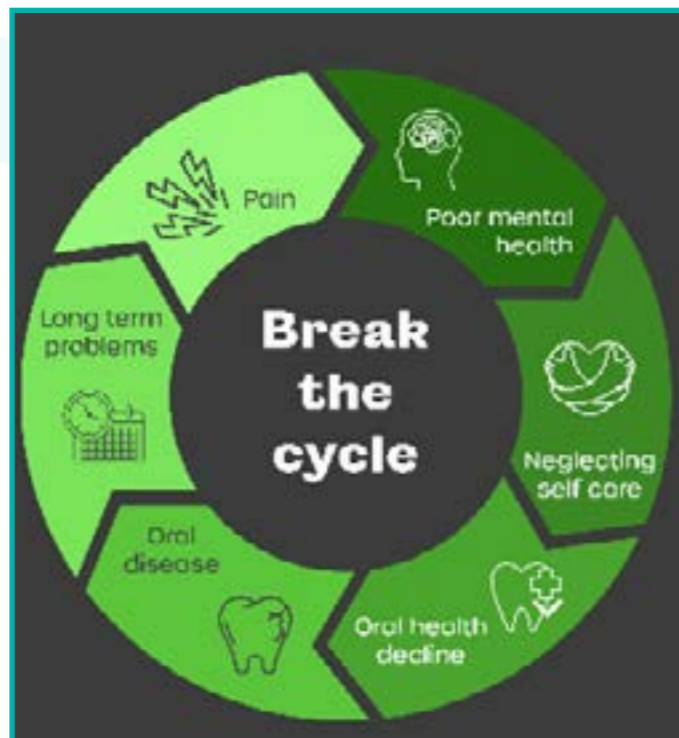
Oral health and mental health are closely connected. Make sure that you visit your dentist regularly, and if you have concerns about your mental health, don't delay discussing your problem with your doctor.

Why am I more at risk?

People who experience psychosis are more likely to get fillings, have teeth taken out, and have problems with gum disease.

- Changes in routine.
- Medication side effects.
- Stress.
- Fear of dentists.

How can my dental team help?



Dentists have gotten much better at understanding mental health symptoms and will do what they can to make you feel comfortable.

The best way to make sure that the dentist can help you during your appointment is to make them aware of any adjustments ahead of time.

Some things you can plan ahead of time include:

- Bring someone for support.

- Agree a signal with your dentist if you need a break.
- Bring things to help distract or ground you.
- Make a list of questions before your appointment.

Ask your dentist about:

- Any worries you have about your teeth and gums.
- What your options are if you need treatment.
- If high fluoride toothpaste is suitable.
- Pain relief if you are worried about discomfort.

Dentists are happy to answer questions you might have about your oral health. There are no silly questions. They will make sure you have all the support you need and cover all your treatment options.

Ask your mental health team if they can:

- Help find a dental product right for you.
- Help find a dentist and go with you.
- Help find out if you qualify for free treatment.
- Explain any side effects.

You're more likely to be engaged with your mental



Your mouth matters. The Oral Health Foundation is here for you.

We care about your oral health.

That's why, every year, we support thousands of people to help them achieve a healthier life through better oral health.

If you need help, or would simply like to support us in our mission, visit our website and get in touch.

www.dentalhealth.org

health team than your dental team if you see them more regularly. Pharmacists will also be able to talk you through medication side effects that might affect your oral health.

Here are some of our tips for managing your mental health and oral health

- If your medication causes dry mouth, try xylitol mints or chewing gum. Xylitol is a natural sweetener that helps you make more saliva, and it can also help prevent plaque and cavities.
- Celebrate small wins and be realistic with yourself. If some days you don't manage to clean your teeth twice but manage to do it before bed then that is better than skipping brushing completely.
- Clean between your teeth with dental floss or an interdental brushes.
- Stop smoking.
- Reduce alcohol use or stop drinking alcohol completely. Whilst you might want to use drugs or alcohol to cope with difficult feelings or symptoms, in the long run they can make you feel a lot worse and can prevent you from dealing with

any underlying problems or feelings. Plus alcohol use raises your risk of oral disease considerably.

- Cut back on sugary foods and drinks and monitor your diet. The less sugar you have, the lower your chances of developing tooth decay and needing dental treatment.
- Let your dentist know about your mental health, so they can better support you in managing your oral health.
- Invest in your oral health by seeing a dental hygienist for a deep clean to keep on top of any plaque build-up. A hygienist may also offer you a longer appointment so you can have plenty time to discuss any oral hygiene concerns.
- Eat a healthy, balanced diet. Eating regularly and keeping your blood sugar stable can make a difference to your mood and energy levels.



Do you know the difference between different dental professionals?

We spoke to different dental professionals this National Smile Month to learn more about their roles and their favourite moments from their career.

Dental Nurse

- Looks after patient records and makes notes when the dentist is examining you.
- Provides support with treatment.
- Assists the dentist chair-side.
- Supports other members of the team.
- Decontaminates the instruments and maintains equipment.
- Makes sure all relevant materials and supplies are ready.
- Can also work in hospital settings providing oral care.
- Offers reassurance, answers any questions and puts you at ease over any fears you may have.

Anita Stanforth is a dental nurse now working in a hospital with speech and language therapists, and she volunteered to speak about her experience as a dental nurse, sharing some of the most memorable moments from her career.

"I had a patient come in from a care home who was in a terrible state of oral health. His breath was so bad that none of the staff wanted to go into his room and give

him his personal care. So I was called in to see him and his tongue was totally coated and unpleasant, his teeth were filthy basically, and the dry mouth was making him struggle.

"It was more about guiding him with his oral health and showing him what to do. I had a nurse with me who was caring for him as we went through things, demonstrating and just generally showing him what to do. He was so grateful and I know it meant a lot to him because his main concern leaving hospital was whether or not the care home staff would be able to help him keep up his oral hygiene."

Dental Therapist

- Provides treatment in a range of places in the community, such as schools and care homes
- Gives oral health education.
- Clinical examinations, scaling and polishing teeth.
- Stop smoking advice and further care and treatment plans.
- Takes impressions and carry out restoration work.
- Mouth cancer screenings.
- Treats those with dental anxiety, existing medical conditions, physical or learning disabilities, or high levels of untreated decay.



Lauren Barry is a dental therapist working in the community and has lots of experience with different types of patients and helping people overcome challenges with their oral hygiene.

"I worked with a young girl who was probably about 7 or 8 who was really anxious and scared of the dentist, she wouldn't let anyone look in her mouth and she was also one of those children who just couldn't cope with the sensation of wobbly teeth.

"We worked together for months meeting regularly and just doing things in little steps. Gradually over time she would let me brush her teeth, then over time she would let me use my equipment on her teeth to get off the bits of plaque which she couldn't manage to get.



Anita Stanforth (left) Lauren Barry (centre) Anna Middleton (right)

"It got towards covid and because of the pandemic I couldn't see her anymore and it was quite sad because I do like to know how people are doing.

"She came back in for an examination with a dentist and she sat in the dentist's chair and had her exam and was totally fine, then she came back to see me another time and had the most lovely smile and super clean teeth!

"I know that helped her. I love that about my job, I love working with anxious patients and helping them with feeling empowered and confident to sit in a dental chair and have an exam done."

Dental Hygienist

Dental hygienists mostly focus on helping you prevent dental problems. and treating gum disease.

They show you how to take care of your mouth at home and help keep your teeth and gums healthy.

Some of the procedures which your dental hygienist can do include:

- Scaling and polishing teeth.
- Taking dental x-rays.
- Applying topical fluoride and sealants.

Most dental hygienists work in dental practices, but some may also appear in hospitals and community dental services.

Anna Middleton - aka LondonHygienist - told us how much being a dental hygienist means to her and how she has managed to help her patients find their smile again.

"I had a patient not so long ago who came to see me specifically because they'd read about me and the treatments that I carry out. They had bad experiences in the past and they were aware that they had several dental issues that needed correcting.

"We spent that first visit sort of acclimatizing and getting used to each other and getting them to trust me, showing them that I would do as much or as little as they wanted me to do.

"but at the end of that appointment I did say to them that I had identified that they would benefit from seeing other team members since they had some more advanced problems. I told him at his follow up appointment too that I felt I couldn't help him unless we do some of the other things that were needed.

"By this point she was enjoying coming in and felt she was in a safe environment and so she did go on to have some treatment with a periodontist and did unfortunately need to have some of her teeth extracted. But when we came to the end of her treatment she was periodontally stable and not only that but where she had some teeth missing these had now been restored.

"The patient also said that not only had the whole journey been really pleasant for her but she feels confident now smiling and she feels she now has the understanding to carry on looking after her oral health for the rest of her life."



Five oral health policies that should be Liz Truss' priority

New research from a leading UK oral health charity shows millennials outstrip other generations when it comes to spending on their smiles.

Dentistry in the UK has been described to be at 'crisis point' with many people unable to access treatment or find an NHS dental professional who can see them.

To stop the rot, the Oral Health Foundation has picked five key policies that Liz Truss and her cabinet must focus on.

More funding for NHS Dentistry

Although funding for NHS has been increasing over the years, the budget for dentistry has fallen behind and not risen in line with the needs of an ever-expanding population.

There are now around 67 million people living in the UK, compared to 55 million in 1970. That's a lot of extra mouths that need seeing.

An extra £50 million was promised by the government to NHS dentists by the end of the year, to help them see more patients, but this falls well short of what is needed. On average, spending has dropped from £41 to £36 per person in real terms.

It is essential that more funding is given to NHS dentistry.

Changes to the NHS Contract

For the past 16 years, those within the heart of delivering UK dentistry have made proposals to reform the NHS contract – which has been described as 'unfit for purpose'. Many of the changes that are needed for dentists to be able to see more patients have simply not materialised.

An amendment to the NHS dental contract is soon to be implemented across the UK, though it may not be far-reaching



enough to fully satisfy the needs of the entire population.

The new contract increases the amount of money that NHS dentists will be paid per treatment. However, with the rising cost of materials, utilities and staff, the extra funds might only cover current costs. Some dental practices might still be running at a loss, at risk of closure or being forced to move to private practice.

It is unknown how far this new funding will stretch. Any new dental contract must ensure enough funding for NHS dentists to see more people, many of whom are currently struggling to access NHS dental care.

Increase the number of dental professionals

On-going staff shortages have been at the forefront of dental news. There are simply not enough NHS dentists to meet the population's demands.

As a result, there have been many stories of people resorting to DIY dentistry at home and taking matters into their own hands.

This simply cannot be allowed to continue.

It is not only dentists that we are desperately in need of but also dental nurses, therapists, and hygienists. All these professionals play a vital part in taking care of people's teeth. Last year, 68% of the UK's dental practices that tried to recruit struggled.

More places must be made available at university for people to study dentistry and more must be done to make it appealing profession to enter into. Once qualified, the government must do more to support NHS dental professionals, so they do not feel like their only option is turning away from the NHS.

Prevention rather than treatment

Without effective oral health education, preventable problems will keep happening and dental disease will continue to thrive.

The first place that oral health education should start is in schools.

A child's early experiences of oral health can impact the rest of their life with how they develop habits over the years. If they receive encouragement from teachers, parents and dental professionals, there is a good chance they will develop fewer oral health problems. This means less need for treatment, with dental professionals being able to spend more time on check-ups, and advice on oral hygiene and diet.

A full and detailed commitment to oral health education in schools is needed. This will not only improve oral health but have a greater impact on the UK's overall wellbeing.

Clarity on which professionals can stay

Brexit has caused many issues from building a backlog to a lack of equipment and materials. One of the most serious ongoing issues is the lack of clarity on how one can stay to take on work within the dental profession.

A lot of people travel from all over the world to get the first-class education that dentistry schools in the UK can provide. However, due to the on-going debates on visas and the right to work, many prospective students are now coming to the UK, getting their education, and then leaving to return to their home country.

Previously, it was equal exchange and international travel, and immigration was easy.

Now, greater clarity is needed from the government so that people can make the decision easier and quicker about whether to stay in the UK.



Oral sex and oral health – what you need to know

In connection with sexual health awareness week 2022.

Think you're safe from STIs if you're not having intercourse? Think again - some STIs can be transmitted through oral sex just as easily.

If we're lucky, most of our sexual health education at school will have taught us about how to use condoms to prevent pregnancy and contracting STIs during sexual intercourse, but what about using protection during oral sex?

Why does it matter if I use protection to have oral sex?

There's no risk of pregnancy, but there is still a risk to your health.

Some of the most common STIs can be passed on through oral sex, and contracting them can have nasty consequences for you, your unborn child if you're pregnant, and your sexual partners if you don't get treated.

While the risk of contracting most STIs from oral sex is lower than for vaginal or anal sex, there is still the risk of transmission.

What STIs can I get from oral sex? Are they really that bad?

STIs like chlamydia, herpes, gonorrhoea, syphilis, and HPV can all be transmitted orally, meaning they can pass from one person's mouth to their partner's genitals or anus, or vice versa.

Some of these, like chlamydia, won't always

present symptoms straight away – in fact, in 70% of women and 50% of men chlamydia has no symptoms at all - but if left untreated can cause ongoing health and fertility issues. Others, like herpes, can't currently be cured, and may require lifelong, ongoing treatment.

HPV, or human papillomavirus, is well known for causing the development of abnormal cells that can lead to cervical, testicular and penile cancer, but can also cause mouth and throat cancer. In fact, HPV is one of the most common mouth cancer causes, which is why we always advocate for HPV vaccination for all genders at the Oral Health Foundation.

How can I protect myself from STIs during oral sex?

Of course, the best way to not contract an STI is to not get involved in any sexual activity, but if you are going to, then use a barrier contraception. Condoms and dental dams can be used to protect all parties involved in oral sex.

Condoms

We're all familiar with condoms, but most don't use them for oral sex since they're mainly used to prevent pregnancy. Condoms should be placed completely covering the penis and need to be thrown away after each use as well as



changed between having oral sex and penetrative sex.

Dental dams

Less people are familiar with dental dams than condoms, but they're also an effective way to stop STI transmission during oral sex. They can be used to cover the vulva and vagina or anus. Dental dams can be purchased but they're not as common as condoms so you might not find them in most pharmacies and they can also be expensive, so you can make them by cutting the tip and the ring off a regular condom, then cutting the condom open and laying it flat – see the diagram above.

Don't create dental dams out of condoms which use spermicide, as this shouldn't be ingested. It's recommended that you use a flavoured condom as these generally are spermicide free.



Dental dams should also be used only once and then thrown away. They should also not be flipped over to make sure they don't slip off.

There are other steps you can take to protect yourself from STIs during oral sex, including:

- Not having oral sex if you have cuts or sores in or near your mouth, have a sore throat, or a mouth or throat infection
- Not having sex (even with protection) if your partner has a visible sore, ulcer or lump on their genitals, anal area, or mouth
- Avoid brushing or flossing teeth right before or after oral sex. When you brush your teeth, you create lots of tiny abrasions along your gums which bacteria can get into.



What should I do if I think I have an STI from giving or receiving oral sex?

If you are sexually active, you should have a sexual health check at least every year and between every partner regardless of whether you have any STI symptoms. You can request this from your doctor, community-based testing sites or visit a sexual health clinic. In some areas, you can also order home testing kits.

If you think you may have contracted an STI from having oral sex, have any symptoms of STIs on your genitals, anus, mouth, or throat, or are worried after having unprotected oral sex, book in for a sexual health check. Once you know whether you have an STI, you can begin treatment if necessary.

If you find out that you have contracted an STI, you should tell any current and past sexual partners, so that they can be checked as well. It might be an awkward conversation but it's essential to keep them, as well as any of their future sexual partners, safe.

More information about sexual health

It's important that all people who are sexually active, or thinking about becoming sexually active, are aware of their sexual health and how to take care of it.

The NHS has some great sexual health resources, but you can also contact your local sexual health clinic or outreach team who will be able to give you advice and help you work out the best contraception methods for you.

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