

Mouth Care

How carers, nurses and family can help with mouth care to prevent chest infections

Mouth Care is important for everyone:

- Evidence shows good & regular mouth care for ill or frail patients in care & nursing homes drastically reduces chest infections and death.
- Mouth care removes bacteria from the mouth.
- Excessive amounts of bacteria in the mouth can cause chest infections (also called bacterial aspiration pneumonia).
- Patients with swallowing difficulties are at a higher risk of chest infections if their mouth is not clean.
 - It is the bacteria in the mouth that causes chest infections when it is aspirated (washed down) into the lungs with food, drink & saliva.
- However, Patients who do not have swallowing difficulties also aspirate saliva into their lungs at night when asleep, and so are at high risk of chest infections if their mouth is not clean.
- We all feel embarrassed when our mouths and teeth are dirty and our breath smells bad.

Mouth Care Equipment:

- **Pen torch** to look inside mouth & cheeks;
- **Soft-bristled toothbrush** as only brushing effectively removes plaque from teeth;
- **Smear of toothpaste** – consider non-foaming SLS-free (sodium lauryl sulphate);
- Oral swabs to mop out saliva, secretions, or toothpaste foam.

How to do Mouth Care well:

PREPARATION:

- **Sit as upright** as possible before and after mouthcare;
- **Communicate clearly** and do mouth care **slowly**, allowing time for swallowing and ensuring the patient feels safe and comfortable;
- Promote **independence** with mouth care if possible;
- **Remove dentures** to clean separately;
- **Look inside mouth** (at teeth & gums, roof of mouth, inside cheeks, tongue, back of throat), to check for food debris / pocketing of food, and any signs of thrush that need treatment.

MOUTH CARE:

- **Remove food debris** and excess saliva / mucus;
- **BRUSH** gently & thoroughly to clean teeth, gums, tongue, roof of mouth;
 - After brushing, **do not** rinse with water – spit or mop out any foam;
 - Consider **low-foaming toothpaste** (SLS-free) if spitting out foam is difficult;
- Moisturise **dry lips** by applying lubricant, and/or use artificial saliva if very dry mouth;
- Re-insert **dentures** ensuring they are clean and fit well.

FOLLOW-UP CARE:

- **REPEAT** mouth care **before and after every meal** to prevent chest infections from reducing the level of bacteria that is aspirated / washed down with food, drink and saliva;

- **At night**, remove dentures;
- **Refer to dentist** if dentures fit poorly.

Patients who are at *higher risk* of chest infection are those who:

- are **fed by others**;
- **depend on others for mouth care** & teeth brushing & denture care;
- have **poor oral health** (e.g. decayed teeth and/or gum disease);
- are **seriously ill or frail** (e.g. multiple medical conditions & medications (including antibiotics);
- have **impaired airway protection** (e.g. swallowing difficulties, poor cough - including smokers).

Extra care needed during mouth care for patients with:

- Difficulty moving their mouth – cannot clear food debris or spit out toothpaste foam;
- Difficulty swallowing – higher risk of aspiration;
- Confusion (e.g. dementia, delirium, learning difficulty) – need calm encouragement;
- Poor position (e.g. head / body reclined or forward) – risk of aspiration.

References & Further Information:

- Ashford JR (2024) **Impaired oral health: a required companion of bacterial aspiration pneumonia**. Front. Rehabil. Sci. 5:1337920. doi: 10.3389/fresc.2024.1337920.
- Public Health England Guidance: **Oral health toolkit for adults in care homes**. Published 27 November 2020.
 - Click on link: [Oral health toolkit for adults in care homes - GOV.UK](#)
- Mouth Care Matters [NHSE elfh Hub](#)

Online free training:

- NHS England's eLearning for Health. Click on link: [NHSE elfh Hub \(e-lfh.org.uk\)](#)

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