

soluble tablets p. 1281 dissolved in water can be used as a mouthwash to treat oral ulceration [unlicensed indication].

Systemic corticosteroid therapy (see under Corticosteroids, inflammatory disorders p. 1216), is reserved for severe conditions such as pemphigus vulgaris.

#### Local analgesics

Local analgesics have a limited role in the management of oral ulceration. When applied topically their action is of a relatively short duration so that analgesia cannot be maintained continuously throughout the day. The main indication for a topical local analgesic is to relieve the pain of otherwise intractable oral ulceration particularly when it is due to major aphthae. For this purpose lidocaine hydrochloride 5% ointment below or lozenges containing a local anaesthetic are applied to the ulcer. Lidocaine hydrochloride 10% solution as spray can be applied thinly to the ulcer [unlicensed indication] using a cotton bud. When local anaesthetics are used in the mouth care must be taken not to produce anaesthesia of the pharynx before meals as this might lead to choking.

**Preparations on sale to the public:** many mouth ulcer preparations, throat lozenges, and throat sprays on sale to the public contain a local anaesthetic. To identify the active ingredients in such preparations, consult the product literature of the manufacturer—the correct proprietary name should be ascertained as many products have very similar names but different active ingredients.

Benzylamine hydrochloride p. 1280 and flurbiprofen p. 1280 are non-steroidal anti-inflammatory drugs (NSAIDs). Benzylamine hydrochloride mouthwash or spray may be useful in reducing the discomfort associated with a variety of ulcerative conditions. It has also been found to be effective in reducing the discomfort of tonsillectomy and post-irradiation mucositis. Some patients find the full-strength mouthwash causes some stinging and, for them, it should be diluted with an equal volume of water. Flurbiprofen lozenges are licensed for the relief of sore throat.

Choline salicylate p. 1281 is a derivative of salicylic acid and has some analgesic action. The dental gel may provide relief for recurrent aphthae, but excessive application or confinement under a denture irritates the mucosa and can itself cause ulceration.

#### Other preparations

Doxycycline p. 1282 rinsed in the mouth may be of value for recurrent aphthous ulceration.

#### Periodontitis

Low-dose doxycycline (*Periostat*®) is licensed as an adjunct to scaling and root planing for the treatment of periodontitis; a low dose of doxycycline reduces collagenase activity without inhibiting bacteria associated with periodontitis.

For anti-infectives used in the treatment of destructive (refractory) forms of periodontal disease, see under Oropharyngeal infections, antibacterial therapy p. 1282. See also Mouthwashes and other preparations for oropharyngeal use p. 1275 for mouthwashes used for oral hygiene and plaque inhibition.

## ANAESTHETICS, LOCAL

### Lidocaine hydrochloride

11-Dec-2019

(Lignocaine hydrochloride)

#### ● INDICATIONS AND DOSE

##### Dental practice

- ▶ BY BUCCAL ADMINISTRATION USING OINTMENT
- ▶ Adult: Rub gently into dry gum

#### Relief of pain in oral lesions

##### ▶ TO THE LESION USING OINTMENT

- ▶ Adult: Apply as required, rub sparingly and gently on affected areas

#### XYLOCAINE®

#### Bronchoscopy | Laryngoscopy | Oesophagoscopy |

#### Endotracheal intubation

##### ▶ TO MUCOUS MEMBRANES

- ▶ Adult: Up to 20 doses

#### Dental practice

##### ▶ TO MUCOUS MEMBRANES

- ▶ Adult: 1–5 doses

#### Maxillary sinus puncture

##### ▶ TO MUCOUS MEMBRANES

- ▶ Adult: 3 doses

#### Relief of pain in oral lesions

##### ▶ TO THE LESION

- ▶ Adult: Apply thinly to the ulcer using a cotton bud

- **UNLICENSED USE** Spray not licensed for the relief of pain in oral lesions.
- **CAUTIONS** Avoid anaesthesia of the pharynx before meals—risk of choking · can damage plastic cuffs of endotracheal tubes
- **INTERACTIONS** → Appendix 1: antiarrhythmics
- **ALLERGY AND CROSS-SENSITIVITY**
  - ▶ Hypersensitivity and cross-sensitivity Hypersensitivity reactions occur mainly with the ester-type local anaesthetics, such as tetracaine; reactions are less frequent with the amide types, such as articaine, bupivacaine, levobupivacaine, lidocaine, mepivacaine, prilocaine, and ropivacaine. Cross-sensitivity reactions may be avoided by using the alternative chemical type.
- **PREGNANCY** Crosses the placenta but not known to be harmful in *animal* studies—use if benefit outweighs risk. When used as a local anaesthetic, large doses can cause fetal bradycardia; if given during delivery can also cause neonatal respiratory depression, hypotonia, or bradycardia after paracervical or epidural block.
- **BREAST FEEDING** Present in milk but amount too small to be harmful.
- **HEPATIC IMPAIRMENT** Manufacturer advises caution (risk of increased exposure).
- **RENAL IMPAIRMENT** Possible accumulation of lidocaine and active metabolite; caution in severe impairment.
- **PROFESSION SPECIFIC INFORMATION**
  - Dental practitioners' formulary Lidocaine ointment 5% may be prescribed. Spray may be prescribed as Lidocaine Spray 10%
- XYLOCAINE®
  - Dental practitioners' formulary May be prescribed as lidocaine spray 10%.

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug. Forms available from special-order manufacturers include: ointment

#### Spray

- ▶ Xylocaine (Aspen Pharma Trading Ltd)

Lidocaine 10 mg per 1 actuation Xylocaine 10mg/dose spray sugar-free | 50 ml [P] £6.29 DT = £6.29

#### Ointment

- ▶ Lidocaine hydrochloride (Non-proprietary)

Lidocaine hydrochloride 50 mg per 1 gram Lidocaine 5% ointment | 15 gram [P] £9.00 DT = £8.28