

# Methamphetamine "Meth" Mouth and Methadone

## THE DIFFERENCE BETWEEN METHADONE AND METHAMPHETAMINE?

**Methadone** is an FDA-approved medication commonly used to treat opioid use disorder (OUD). Opioid use disorder, sometimes referred to as opioid addiction, is the dependency and ongoing misuse of prescription drugs such as oxycodone, codeine, or fentanyl.

- Methadone is a synthetic opioid pain reliever (like morphine) used to manage cravings and reduce withdrawal symptoms for people dependant on opioids.
- Many people have successfully overcome their opioid use disorder through Methadone Maintenance Treatment (MMT).
- While not as common, methadone may also be used to treat methamphetamine dependency.

### Symptoms of Methadone Use

While MMT is used to treat opioid use disorder, common side effects include restlessness, nausea/vomiting, itchy skin, constipation, and sexual problems. Serious side effects requiring urgent medical attention include difficulty in breathing, light-headedness, chest pain, hallucinations, or confusion.

**Methamphetamine** is an illegal and highly addictive drug that can be swallowed, injected, snorted, or smoked.

- Also referred to as ice, meth, speed, crank, crystal, or chalk.
- The term "**meth mouth**" may be used to describe the mouth of a person who is a chronic methamphetamine user because of the serious damage this drug can cause to the mouth and teeth (and general health).

### Symptoms of Methamphetamine Use

Common signs of meth dependency include twitching, paranoia, skin sores, agitation, extreme weight loss, mood swings, rotting teeth, and dilated pupils.



"Tweaking" is also common, where the user experiences an extended period of anxiety and insomnia. Meth users typically have a reduced immune system and an increased risk of blood-borne or sexually transmitted diseases.

## THE IMPACT ON ORAL HEALTH

Methamphetamine and methadone both have similar impacts on the user's oral health.

- **Dry mouth (xerostomia)** - Methamphetamine tends to reduce saliva production, and Methadone, like many other medications, can cause dry mouth. A lack of saliva can make teeth more prone to the production of plaque, a major cause of gum disease and tooth decay.
- **Tooth decay** - A very high sugar content in the diets of meth users along with ineffective oral hygiene allows bacteria in the plaque to create acids that dissolve enamel, especially around the gum line where the concentration of plaque is highest. Methadone also increases cravings for sugary carbonated beverages and food, increasing risk of tooth decay.
- **Periodontal (gum) disease** - Methamphetamine causes the vessels in the oral cavity to shrink, which reduces the blood supply to the gums and can seriously damage or kill the tissues.

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In addition, methamphetamine users are susceptible to infection and gum disease, since immune systems are not able to fight off the germs living in the mouth.

- Broken or cracked teeth users tend to clench and/or **grind (bruxism)** their teeth. Nervousness and stress increase during drug use which can cause broken and cracked teeth.
- Methadone has high acid content, causing erosion of tooth enamel.

## THE ROLE OF THE DENTAL HYGIENIST

Prevention is extremely important. For those who are anxious about seeking dental treatment dental hygienists are experienced in anxiety management, putting clients at ease, and providing treatment in a non-judgemental supportive environment. Dental hygienists will:

- Complete and update a thorough medical history at each visit to ensure no contraindications to recommended dental treatment.
- Develop a preventative treatment regimen and customize a home care program (including plaque control and fluoride application if recommended).
- Advise on nutrition and healthy eating as well as minimizing sugar in food and beverages.
- Educate the client on reducing risk factors for enamel wear and prevention of tooth decay and gum disease.



- Maintain a proper home care program as directed by a dental hygienist.
- Help stimulate saliva flow by sipping water and chewing sugar free gum/lozenges with xylitol, sucking ice chips.
- Schedule regular dental hygiene appointments for checkup and provide treatment.
- Rinsing with water after taking methadone and waiting for 30 minutes to brush teeth.
- Always practise safe drug use (i.e. do not share drug paraphernalia).
- Seek drug counseling and treatment for substance use.

## HELPFUL RESOURCES

- Centre for Addition and Mental Health Information Centre – 1.800.463.6273 or [www.camh.net](http://www.camh.net).
- Ontario Drug and Alcohol Helpline Registry of Treatment – 1.800.565.8603.
- Kids Help Phone – 1.800.668.6868.
- Street Involved Youth Program – 416.967.1773 or [www.youthlink.ca/yskillzone.html](http://www.youthlink.ca/yskillzone.html).

NOTE: Additional fact sheets are available for information on

- [Dry Mouth \(Xerostomia\)](#)
- [Tooth Decay \(Caries\)](#)
- [Teeth Grinding \(Bruxism\)](#)
- [Periodontal \(Gum\) Disease](#)

## HOME CARE

It is essential for people with substance use disorders or those on ongoing recovery treatments such as Methadone Maintenance Therapy to:

As professional health-care providers, dental hygienists are primarily concerned with promoting good oral health. Dental hygiene is among the largest of the regulated health-care professions in the province. In Ontario all dental hygienists are registered with the College of Dental Hygienists of Ontario, which regulates the profession to ensure the public receives safe and ongoing comprehensive oral care.

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