

## CAN I SLOW DOWN LOSS OF SALIVA AND MUCUS DEVELOPMENT WITH FOOD?

### Loss of saliva and mucus development

Everyone is constantly producing saliva and unconsciously swallows it. While we eat, the salivary glands become more active which is when they excrete thin saliva. Saliva has an important part in digesting food. It's also important for oral hygiene. People who have ALS, especially those who have the bulbar kind, are often bothered by the saliva because they can't properly swallow it down. A speech therapist can teach you to consciously swallow the saliva. Your rehabilitation doctor can give you an explanation about the treatment possibilities of salivation: medication, radiotherapy or botulinum injections.

On this page you'll find advice from your dietitian.

### Tips for loss of saliva

- Avoid sour drinks like grapefruit juice, orange juice and citron juice;
- Avoid sour food such as fruit puree;
- Add a splash of non-whipped cream to sour food
- Avoid irritating substances and pungent spices and herbs in your food

### Tips for mucus development

It's possible that after you've eaten or drunk certain food, you'll be troubled by mucus that's developing.

- Avoid food which can cause mucus development: sweet dairy products such as milk, chocolate milk, all kinds of custard and pudding, chocolate.
- Replace sweet with sour dairy products; they cause less mucus development. Examples are butter milk, yogurt, soy milk, curd cheese and Biogarde (a different kind of yogurt which has a milder taste than regular yogurt).
- Use food that has a mucus resolving effect such as pineapple juice, (dark) beer, red wine and chamomile tea (gargling with this can also help).
- If you're bothered by mucus developing after eating or drinking, it can help to rinse your mouth with water after the meal.
- If you're bothered by mucus when using a feeding tube, rinsing with water can help. Talk this over with your dietitian, sometimes an adjustment in (administering) food through a feeding tube can lessen mucus development.

*Dietitians for Muscle Diseases*

Source: **Spierziekten Nederland**  
**ALS Centrum Nederland**

## REVIEW OF THE TREATMENT OPTIONS OF HYPERSALIVATION IN AMYOTROPHIC LATERAL SCLEROSIS

### Summary

Hypersalivation (sialorrhoea) or drooling is a fairly regular problem with patients who have Amyotrophic Lateral Sclerosis (ALS). In this review we describe the possible treatments for this problem. The current medical approach isn't always effective: Anticholinergic medication (atropine, gycopyrrolate, amitriptyline, hyoscyamine and transdermal scopolamine) are often used, but there is little proof of its effectiveness with patients who have ALS. More invasive treatments, such as botulinum toxin injections and/or (radiotherapy) radiation of the salivary

glands, can be considered if the anticholinergics don't work. In this review we also look into the possible surgical options for treating hypersalivation. Even though there are no specific studies executed concerning ALS patients, surgical therapies can be a good option to treat hypersalivation because there are no problems with reactions to medicine nor a need for repeated therapeutic sessions.

Source: **MDLinx**