

Food Allergy Testing Halifax

Food Allergy Testing Halifax - Officially called aphthous ulcers, canker sores are an irritated form of mouth ulcer. They appear as an open painful sore normally in of the mouth and at times on the upper throat. Canker sores are characterized by a break in the mucus membrane. The word aphtha means ulcer and it has been used for many years to define areas of ulceration on mucus membranes. Recurring aphthous stomatitis or likewise referred to as RAS could be distinguished from similar appearing oral lesions consisting of herpes simplex or some oral bacteria, due to their chronic nature and their multiplicity.

Even if canker sores are not contagious, the real cause is not known. Several individuals develop canker sores as a result of consuming too much acidic fruit. The condition is known as Sutton's Disease or aphthous stomatitis in the case of major recurring or multiple ulcers. At least ten percent of the population suffers from recurring canker sores. It is among the most common oral conditions and it seems to affect women more compared to men. About 30 to 40 percent of people who have persisting apthae report a family history.

According to the diameter of the lesion, canker sores are clinically classified. Lesions the size of 3 to 10mm are called minor ulcerations or minor aphthous ulcers. The appearance of the lesion is an erythematous halo with a greyish or yellowish color. Through this time, the ulcer will be really painful and the affected lip area could swell. This could last up to a couple of weeks. Major ulcerations have the same appearance but are larger than 10mm in diameter. Because of their size and how painful they are, they can take longer than a month to heal and often leave a scar. Normally these lesions take place on movable non-keratinizing oral surfaces but the ulcer border can even extend onto keratinized surfaces. Normally, these canker sores develop after puberty with frequent recurrences.

Herpetiform Ulcerations

The most severe type are the herpetiform ulcerations. The lesions are commonly found in adulthood, taking place more in females. These forms of canker sores typically heal in less than a month and usually have no scarring. It is usually recommended to use some supportive treatments.

Signs and Symptoms

The aphthous ulcer is characterized as a big aphthous ulcer on the lower lip. These ulcers typically start with a burning or tingling sensation. Within a few days, they normally progress to a bump or a red spot which is followed by an open ulcer. This ulcer appears as a white or yellow oval that has an swollen red border. At times there is a white halo or circle all-around the lesion that can be seen. These white or grey or yellow colored areas inside the red boundary is formed by layers of fibrin that is a protein involved in the clotting of blood.

These ulcers are very painful. If they become agitated, they can be accompanied by a painful swelling of the lymph nodes just below the jaw. This pain could be mistaken for a toothache and one more indication is a fever. Sores happening on the gums could be accompanied by discomfort or pain in the teeth.

Causes

The exact reason is unknown, however, there are many contributing factors to aphthous ulcers. Causes have consisted of sudden weight loss, stress, citrus fruits such as lemons and oranges, food allergies, lack of sleep, and some vitamin deficiencies like for instance iron, B12 and folic acid. Physical trauma and immune system reactions can also bring them on. Several types of chemotherapy and Nicorandil are also associated to aphthous ulcers. Several studies have shown a strong connection of canker sores and cow's milk. These lesions are usually found in people who have Crohn's disease and are likewise a major manifestation of Behçet disease.

Mouth trauma has shown to be the most common trigger. Laceration with abrasive foods like for example toast or potato chips as well as toothbrush abrasions has been some known precursors. Accidental biting or dental braces can also break the mucous membrane which can develop into aphthous ulcers. Various factors like chemical irritants or thermal injury could also cause the development of ulcers. Various individuals have also benefited from diets free of gluten.

Oral measures

If wearing braces, applying wax on top of the dental bracket can help prevent physical trauma to the mouth. These refer to traumas that happen on the oral mucosa with the wax being able to lessen the abrasion and friction. For some people, changing toothpaste has proven beneficial. Looking for a more naturally based brand name which is free from sodium lauryl sulphate or sodium dodecyl sulphate could be useful. This particular detergent is found in nearly all of toothpastes and making use of a paste that does not contain this particular component has been shown in some research to be able to help decrease the recurrence, size and amount of ulcers.

In people with recurring aphthous ulcers, zinc deficiency has even been reported. Although these studies have showed no direct therapeutic effect, the supplementation has reported positive outcome for people who have deficiency.

Treatment

For aphthous ulcers, there are a variety of treatments existing comprising aesthetic agents, analgesics, anti-inflammatory agents, antiseptics, tetracycline suspension and silver nitrate. Another item found useful has been Amlexanox paste that has been known to alleviate pain and speed healing.

Vitamin B12 is among the supplements which have been found useful. The dietary supplement L-lysine has been used to treat herpes type lesions and cold sores, however this supplement has shown no benefits on canker sores. It can be helpful to avoid spicy food and rinse the mouth with salt water.