

Bad breath

Causes and tips for controlling it

Bad breath—we've all had it at one time or another, but our shared experience doesn't make it any less embarrassing. Is there anything we can do to keep breath odor at bay? Knowing what causes bad breath can help you reduce the risk.

BAD BREATH TRIGGERS

Halitosis, or bad breath, most often starts in the mouth. Poor oral hygiene allows food particles to collect on the surface of the tongue, between the teeth or along the gingival (gum) tissue that surrounds the teeth. Naturally occurring bacteria in your mouth then break down those food particles, releasing chemicals that have a strong odor.

Saliva helps wash food particles from your mouth; thus, people with a dry mouth are at an increased risk of experiencing bad breath. Some medications, mouth breathing and smoking all can contribute to dry mouth.

Infections in the mouth, such as dental caries (tooth decay), periodontal (gum) disease or mouth sores related to other conditions may contribute to bad breath. Surgical wounds (from extracted teeth, for example) also can be a source of halitosis.

The bacterial film called "plaque" that occurs naturally in your mouth can build up if not removed regularly through good oral hygiene practices. The bacteria in plaque give off an odor that affects your breath.

Diet is a common bad breath culprit. Foods such as garlic and onions, in particular, can foul your breath. Once your food is digested, chemicals that cause odor can be absorbed into your bloodstream and from there into your lungs; these chemicals then are exhaled. Diets high in protein and sugar also have been associated with bad breath.¹

Bad breath can be a byproduct of certain health conditions. It may result from infections in the nose, throat or lungs; chronic sinusitis; postnasal drip; chronic bronchitis; or disturbances in your digestive system.²

FENDING OFF BAD BREATH

Knowing the cause is half the battle in fighting bad breath, and the best weapon you have is

good oral hygiene. Caring for your mouth will help limit food residue and plaque buildup and reduce the risk of developing caries and periodontal disease.

The American Dental Association recommends that you brush your teeth twice a day with a fluoride-containing toothpaste and clean between your teeth once a day by using an interdental cleaner such as floss. Brush your tongue, too, to remove bacteria that contribute to oral odors (especially in the back, where most of these bacteria are found). If you wear removable dentures, take them out at night and brush them thoroughly with a denture cleanser before replacing them the next morning. When choosing oral care products, look for those that display the ADA's Seal of



Acceptance, your assurance that they have met ADA criteria for safety and effectiveness.

If your problem seems to stem from a dry mouth, consider chewing sugar-free gum or sucking on sugar-free candies to help stimulate salivary flow. There also are artificial salivas on the market that may help.

Above all, talk with your dentist about your concerns. A thorough health history, including a list of medications and supplements you are taking, may be helpful in determining whether the cause of your bad breath is localized to the mouth or might be a systemic condition, in which case a physician should be consulted. If your breath problems stem from an oral cause, your dentist can work with you to develop a treatment plan that minimizes odor. This might include scraping the plaque off your tongue, using a special antibacterial mouthrinse or both. ■

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"For the Dental Patient" provides general information on dental treatments to dental patients. It is designed to prompt discussion between dentist and patient about treatment options and does not substitute for the dentist's professional assessment based on the individual patient's needs and desires.

1. Lee PPC, Mak WY, Newsome P. The aetiology and treatment of oral halitosis: an update. *Hong Kong Med J* 2004;10(6):414-418.

2. Kinberg S, Stein M, Zion N, Shaoul R. The gastrointestinal aspects of halitosis. *Can J Gastroenterol* 2010;24(9):552-556.