If you have been bothered by a sore in your mouth that made it painful to eat and talk, you are not alone. Many otherwise healthy people suffer from recurrent mouth sores. Two of the most common recurrent oral lesions are fever blisters (also called cold sores) and canker sores (aphthous ulcers). When they occur in the mouth, it may be difficult to distinguish one from the other. Since the treatment and cause of these two sores are completely different, it is important to know which is which.

**What Are Fever Blisters (Cold Sores)?**
These are common names for fluid filled blisters that commonly occur on the lips. They also can occur in the mouth, particularly on the gums and roof of the mouth (hard palate), but this is rare. Fever blisters are usually painful; in fact, the pain may precede the appearance of the lesion by a few days. The blisters rupture within hours, then crust over. They last about 7-10 days.

**Causes of Fever Blisters**
Fever blisters result from a herpes simplex virus which becomes active. This virus is latent (dormant) in afflicted people, but can be activated by conditions such as stress, fever, trauma, hormonal changes, and exposure to sunlight. When lesions reappear, they tend to form in the same location.

**Can Fever Blisters Be Spread?**
Yes, the time from blister rupture until the sore is completely healed is the time of greatest risk for spread of infection. The virus can spread to your own eyes and genitalia, as well as to other people.

*Prevention Tips for Fever Blisters:*
- avoid mucous membrane contact when a lesion is present
- do not squeeze, pinch or pick at the blister
- wash hands carefully before touching your eyes or genital area, or another person

Despite all caution, it is important to remember that it is possible to transmit herpes virus even when no blisters are present.

*Treatment for Fever Blisters*
A mouthwash of hydrogen peroxide and water can prevent secondary infection from mouth bacteria. In some cases coating the lesions with a protective barrier ointment containing an antiviral agent, for example 5% Acyclovir® ointment can shorten the healing time. Presently, there is no cure, but there is much research activity underway in this field.
What Are Canker Sores?
Canker sores (also called aphthous ulcers) are small, shallow ulcers occurring on the tongue, soft palate, or inside the lips and cheeks. They are quite painful, and usually last 5-10 days.

Causes of Canker Sores
The best available evidence suggests that canker sores result from an altered local immune response associated with stress, trauma, or local irritants, such as eating certain acidic foods (i.e., chocolate, citrus fruits and some nuts.)

Can Canker Sores Be Spread?
No, since they are not caused by bacteria or viral agents, they cannot be spread locally or to anyone else.

Treatment for Canker Sores
The treatment is directed toward relieving discomfort and guarding against infection. A topical corticosteroid preparation such as triamcinolone dental paste (Kenalog in Orabase 0.1%®) is helpful. A mixture of liquid Maalox™ and Benedryl™ syrup, both available without prescription is an effective mouthwash that can soothe sore areas. Unfortunately, no cure exists at present.

What About Other Sores?
General soreness or burning of the tongue or cheeks can occur from various irritants including acid foods (tomatoes, citrus, salad dressings, for example) or mouth care products such as harsh alcohol based mouthwashes or tooth pastes and whiteners containing sodium lauryl sulfate. Changing to less abrasive brands, such as those containing baking soda can be helpful for sensitive individuals. Burning mouth in the morning can be a sign of mild acid reflux, with acid migrating up from the stomach during the night.
Trauma from broken teeth or sharp dental appliances is a common cause of mouth sores. These can be aggravated by bite trauma or habits such as chewing or sucking on the lip or tongue.
Tobacco and heavy alcohol use significantly increase the risk that one of these lesions could turn cancerous.

For any mouth lesion that does not heal in a few weeks, you should see your physician or dentist.