



Managing Excess Saliva

Patients who experience swallowing problems often notice that they seem to salivate more. The fact is, they may not be salivating more, but the saliva is pooling in the mouth because of an inability to swallow it. Excessive saliva can be one of the most frustrating symptoms of ALS to manage. It can also be life threatening, since it frequently causes choking, especially at mealtimes when saliva secretion is increased and chance of aspiration is greatest.

Early in the course of the disease, excess salivation can be controlled by simply being aware of the problem and making a conscious effort to swallow the saliva or wipe it away with tissues. To some degree, these problems can be managed by controlling the intake of very sweet or very sour foods that cause hypersecretion. It may also be helpful to increase or decrease (as the case may be) foods of high water or fluid content.

With progression of the disease, however, patients may find that excess saliva has become a nuisance and an embarrassment, and needs to be controlled by other means. One helpful measure is to have a suction machine available in the home. Modern technology has provided portable, battery-operated suction machines for those “on the go.”

Your physician may prescribe certain medications to control saliva. The following is a list of prescription medications that have been used successfully in controlling saliva. If a single dose does not work, a combination may be tried. Most common side effects of these drugs are mild sedation, dizziness, difficulty in urination, and tachycardia. They are in the order most often used.

- Glycopyrrolate (Robinul) 1-2 mg every four hours. Robinul is also available in injectable form – 0.1 mg every four hours or 3-4 times a day. Maximum dose is 0.2 mg 4 times/day.
- Propantheline (Pro-Banthine) 15 mg one half hour before meals three times a day.
- Amitriptyline (Elavil) 10 mg three times a day or 10-25 mg at bedtime. Amitriptyline is also available in injectable form – 2 to 5 mg IM to start. Elavil is also used as an antidepressant.
- Nortriptyline HCL (Pamelor) 10-25 mg at bedtime
- Scopolamine (Transderm Scop) transdermal patch 1.5 mg programmed to deliver medication over a 72 hour period. Reported by patients to reduce saliva by 75-80%. Caution – may cause glaucoma.
- In addition, the use of Imipramine (Tofranil) 50-150 mg at bedtime to reduce anxiety and promote sleep; has also been noted to reduce choking on saliva at night.

This information should be discussed with the patient’s physician.



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for your information

The ALS Association does not promote, endorse or encourage the use of any of these medications. We are just providing information.



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