Recurring Mouth Ulcers: What Could Cause Them? | Core Dental

Canonical: https://www.coredental.com.au/mouth-ulcers-what-could-be-the-cause/

Details:

A mouth ulcer is a break in the tissue lining your mouth or the membrane covering your tongue. Recurring ulcers are often linked to a common condition called recurrent aphthous stomatitis, which may be triggered by factors such as genetics, stress or immune status. A single ulcer is more often caused by an injury, such as biting your cheek. At Core Dental our dentists can examine your mouth, talk through your history and advise whether your ulcers need further investigation.

What is a mouth ulcer?

A mouth ulcer is a break in the tissue lining the inside of your mouth, or in the membrane that covers your tongue. Ulcers can appear on the cheeks, lips, tongue, gums or floor of the mouth. They can be uncomfortable when you eat, drink or brush your teeth. Most are minor, but the cause is not always obvious, which is why a pattern of repeated ulcers is worth discussing with a dentist or doctor.

What is recurrent aphthous stomatitis and when does it usually start?

Recurrent aphthous stomatitis, often shortened to RAS, is a common cause of ulcers that keep coming back. It may be triggered by factors such as genetics, stress or immune status. Attacks typically begin in childhood and tend to peak during adolescence or early adult life. They usually happen at regular intervals, and the size and number of ulcers vary from person to person. Because the triggers differ for each individual, keeping a simple note of when ulcers appear, what you ate and how you were feeling can help your dentist look for a pattern.

Which autoimmune conditions can cause recurring mouth ulcers?

Some autoimmune conditions can cause recurring mouth ulcers. Examples include Sjögren's syndrome, lupus and mucocutaneous disorders. If your dentist suspects that an underlying condition is involved, they may suggest that you see your doctor for further tests. For ulcers linked to these conditions, a dentist may be able to prescribe topical ointments and mouth rinses that can help ease discomfort, reduce inflammation and support healing. What is suitable depends on your diagnosis and medical history, so please tell us about any conditions and medicines when you visit.

What usually causes a one-off mouth ulcer?

A single ulcer is mainly caused by trauma or injury to the mouth. Common examples include:

biting your tongue, lip or cheek

hot foods or drinks

sharp or rough objects, such as hard foods

nail biting

sharp teeth, rough fillings or ill-fitting dentures

If a tooth, filling or denture keeps rubbing on the same spot, ask us to check it. Smoothing or adjusting a rough edge may stop the same ulcer coming back. You can find more about our general dentistry services, including fillings and restorations and dentures .

How long do trauma-related mouth ulcers take to heal?

Ulcers caused by an injury usually heal within a few days once the trauma has occurred or the cause has been removed. This is often within two to three days, though healing time can differ between people. If an ulcer has not healed after around three weeks, or if you notice an ulcer that is unusual, painful without a clear reason or keeps growing, please arrange an examination promptly. Persistent ulcers should always be checked. You can read more in our article on mouth cancer .

When should you see a dentist about mouth ulcers?

It is sensible to book an appointment if you get ulcers often, if they are large or very painful, if they make eating difficult, or if one does not heal. A useful first step is to explain your concerns, symptoms and timing when you book. Bring relevant medical information and a current list of your medicines. Our dentist can then assess your teeth, gums, bite and the tissues of your mouth, request imaging when clinically appropriate, and explain which options are suitable.

It helps to ask what the recommended approach is intended to achieve, whether there are reasonable alternatives, and what risks or limitations apply. Treatment time and fees vary with the diagnosis and complexity of care, and a written treatment plan can help you compare stages and payment arrangements before you proceed.

What should you do in an emergency?

Call 000 immediately for uncontrollable bleeding, difficulty breathing or swallowing, serious facial injury or other life-threatening symptoms. Do not wait for a dental appointment in these situations. For severe tooth pain or swelling without these emergency signs, contact your nearest Core Dental practice promptly. Routine care and review intervals should be tailored to your individual oral health risks rather than assumed to be identical for every patient.

The most common cause is the least alarming one

Mouth ulcers prompt more worry than almost any other oral symptom, and the published advice starts by putting the common case first.

The Victorian Department of Health: "A mouth ulcer is the loss or erosion of part of the delicate tissue that lines the inside of the mouth (mucous membrane)."

The most common cause. "There are many things that cause mouth ulcers. The most common cause is injury (such as accidentally biting the inside of your cheek)."

And the usual outcome. "In most cases, mouth ulcers are harmless and resolve by themselves within 10 to 14 days without the need for treatment."

On recurring ulcers, which have their own name and a prevalence figure. "Aphthous ulcers are recurring ulcers which affect around 20 per cent of the population. Although in most people there is no known cause for aphthous ulcers, in a small number of people these ulcers may be due to an underlying Vitamin B, folate or iron deficiency."

Where they appear and what they look like: "Aphthous ulcers generally occur on the softer mouth lining of the lips, cheeks, sides of the tongue, floor of the mouth, back of the roof of the mouth and around the tonsil area. These ulcers are usually no larger than 5mm. You may develop more than one aphthous ulcer at a time, and sometimes these ulcers are joined together. These ulcers generally resolve within 10 to 14 days, but often they recur at varying intervals of time."

The full list of causes. "Accidentally biting the inside of your cheek"; "Injury from a toothbrush (such as slipping while brushing)"; "Constant rubbing against misaligned or sharp/broken teeth"; "Constant rubbing against dentures or braces"; "Burns from eating hot food"; "Irritation from strong antiseptics, such as a mouthwash"; "Aphthous ulcers"; "Viral infections such as the herpes simplex viral infection (cold sore virus)"; "Reaction to certain medications"; "Autoimmune diseases"; "Autoimmune-related inflammatory disorder (such as lichen planus)"; "Underlying Vitamin B2, folate or iron deficiency"; "Underlying gastrointestinal disease such as Crohn's disease or coeliac disease"; "Mouth cancer." And: "Ulcers may become worse during periods of stress, illness or extreme fatigue."

Four of those are worth drawing out , because they are fixable and often unsuspected: a toothbrush slip; constant rubbing against "misaligned or sharp/broken teeth"; rubbing against "dentures or braces"; and "irritation from strong antiseptics, such as a mouthwash". A recurring ulcer in the same spot is a reason to look for something rubbing.

The symptoms. "One or more painful sores on part of the mucous membrane lining the mouth"; "Swollen and red mucous membrane around the sores"; "Problems with chewing or tooth brushing because of the tenderness"; "Irritation of the sores by salty, spicy or sour foods"; "Irritation of the sores by dentures, orthodontic aligners or mouth splints."

And one line that reverses the usual assumption. "On occasions an ulcer may not be sore. This can occur in cases of mouth cancer."

A lack of pain is not reassurance. That is why the timeframe below is about duration rather than discomfort.

Sources: Better Health Channel (Victorian Department of Health), Mouth ulcers, betterhealth.vic.gov.au (reviewed 13 October 2025). Accessed 6 November 2026.

The two-week rule, and what can actually be done

One number does most of the work on this subject, and the published treatment advice is realistic about what it can and cannot achieve.

The rule. "See your dentist or doctor if your mouth ulcers don't clear up within 2 weeks, or if they frequently reoccur."

Why two weeks and not longer. "An ulcer that won't heal may be a sign of mouth cancer." And: "It is important not to ignore an ulcer that you have had for more than 2 weeks, especially if you use tobacco products and/or drink alcohol regularly. This is because tobacco use and drinking alcohol both (individually and together) increase your risk of mouth cancer."

The Department's dental anxiety page gives the same instruction: "If you notice a mouth ulcer that lasts for longer than 2 weeks, get it checked by a dentist as soon as you can." And on its mouth cancer page, "an ulcer that won't heal" is on the symptom list, with the balanced caveat that "having these symptoms does not mean that you have mouth cancer, but if you experience any of these for more than two weeks, you should speak to your dental practitioner or doctor".

When to go in sooner. "If ulcers are interfering with your normal daily activities, or have persisted for more than 2 weeks, see your dentist or an Oral Medicine Specialist dentist."

What might be investigated. "In some cases, you may need blood tests if it is suspected that you have an underlying deficiency (such as an iron, folate or vitamin B deficiency) or an inflammatory medical condition." And: "If your oral health professional cannot determine the cause of your mouth ulcers, or if the ulcers do not respond to the normal treatments, you may need to have a biopsy of part of the ulcer

and some of the surrounding tissue. A biopsy is a procedure where a tissue sample is taken for examination and diagnosis."

What treatment can honestly achieve. "It's not possible to speed up the recovery of ulcers, but the symptoms can be managed, and the risk of complications reduced."

That is the published position, and it is worth knowing before buying anything that promises faster healing.

The management options. "Avoid spicy, salty and sour foods until the ulcers heal"; "Drink plenty of fluids"; "Keep your mouth clean"; "Apply antiseptic gel to the ulcers"; "Rinse your mouth out with warm, slightly salted water, keeping the rinse in your mouth for up to 4 minutes at a time. Repeat four times daily"; "Use an alcohol-free medicated (preferably containing chlorhexidine gluconate) mouthwash twice daily"; "Use a topical alcohol-free steroid mouthwash or ointment - this is generally prescribed by your dentist or Oral Medicine Specialist"; and in severe cases, "immunosuppressant medication may be prescribed by your oral health professional or appropriate medical specialist".

Note the salt water instruction is more specific than usual: up to four minutes at a time, four times daily. And note that the mouthwashes recommended are alcohol-free — while "irritation from strong antiseptics, such as a mouthwash" is itself on the list of causes.

Which ulcers need something more than self-care. "Other types of mouth ulcers, such as the aphthous variety or those caused by herpes simplex infection or skin rashes in the mouth need topical treatment (such as a mouthwash, ointment or gel)."

Prevention. "Brushing your teeth gently with a soft toothbrush, taking care not to slip with the brush"; "Eating a well-balanced and nutritious diet"; "Making sure that underlying medical conditions are well-controlled."

One connection worth mentioning. Mouth ulcers appear on the Department's list of dry mouth symptoms, and "aphthous ulcers" appear among the oral problems most common in people who smoke or vape. If ulcers are recurring, those are two things worth raising.

Sources: Better Health Channel (Victorian Department of Health), Mouth ulcers, betterhealth.vic.gov.au (reviewed 13 October 2025); Mouth cancer, betterhealth.vic.gov.au (reviewed 11 September 2025); Dental anxiety and phobia, betterhealth.vic.gov.au (reviewed 22 October 2025); Dry mouth, betterhealth.vic.gov.au (reviewed 9 September 2025); Effects of smoking and vaping on oral health, betterhealth.vic.gov.au (reviewed 24 September 2025). All accessed 6 November 2026.

Frequently asked questions

Are recurring mouth ulcers serious?

Often they are not, and a common cause is recurrent aphthous stomatitis. However, ulcers that keep returning, are unusually large or do not heal can sometimes point to another cause. We recommend having a dentist or doctor examine them so that the cause can be identified.

Can stress cause mouth ulcers?

Stress is one of the factors that may trigger recurrent aphthous stomatitis, along with genetics and immune status. Triggers differ for each person, so your dentist may ask about your health, diet and habits to look for a pattern in your ulcers.

Can a sharp tooth or filling cause a mouth ulcer?

Yes. A sharp or broken tooth, a rough filling or an ill-fitting denture can repeatedly rub the soft tissues and lead to ulcers. If an ulcer keeps appearing in the same place, our team can check for a cause and discuss options.

Can a dentist treat mouth ulcers?

A dentist can examine your mouth, look for causes such as sharp teeth or fillings, and may prescribe topical ointments or mouth rinses to help ease discomfort and support healing. If another condition is suspected, we may suggest you also see your doctor.

Which ulcers need urgent attention?

An ulcer that has not healed after around three weeks, that is growing, or that comes with unexplained bleeding or numbness should be assessed promptly. Call 000 for life-threatening symptoms such as difficulty breathing or swallowing.

What is the most common cause of a mouth ulcer?

Injury. The Victorian Department of Health: "The most common cause is injury (such as accidentally biting the inside of your cheek)."

How long should one take to heal?

"In most cases, mouth ulcers are harmless and resolve by themselves within 10 to 14 days without the need for treatment."

What are aphthous ulcers?

"Aphthous ulcers are recurring ulcers which affect around 20 per cent of the population." They "generally occur on the softer mouth lining of the lips, cheeks, sides of the tongue, floor of the mouth, back of the roof of the mouth and around the tonsil area", are "usually no larger than 5mm", and "generally resolve within 10 to 14 days, but often they recur at varying intervals of time".

Could a deficiency be causing recurring ulcers?

Sometimes. "In a small number of people these ulcers may be due to an underlying Vitamin B, folate or iron deficiency." Blood tests may be used "if it is suspected that you have an underlying deficiency ... or an inflammatory medical condition".

What else can cause them?

A long list, including biting your cheek, "injury from a toothbrush (such as slipping while brushing)", "constant rubbing against misaligned or sharp/broken teeth", "constant rubbing against dentures or braces", "burns from eating hot food", "irritation from strong antiseptics, such as a mouthwash", viral infections, medication reactions, autoimmune diseases, deficiencies, gastrointestinal disease "such as Crohn's disease or coeliac disease", and mouth cancer. Ulcers "may become worse during periods of stress, illness or extreme fatigue".

An ulcer keeps coming back in the same spot. What should I look for?

Something rubbing. The Department names "constant rubbing against misaligned or sharp/broken teeth" and "constant rubbing against dentures or braces" among the causes — both fixable once identified.

When should I get an ulcer checked?

Two weeks. "See your dentist or doctor if your mouth ulcers don't clear up within 2 weeks, or if they frequently reoccur." Sooner "if ulcers are interfering with your normal daily activities".

Why is two weeks the threshold?

"An ulcer that won't heal may be a sign of mouth cancer." The Department adds: "It is important not to ignore an ulcer that you have had for more than 2 weeks, especially if you use tobacco products and/or drink alcohol regularly."

Does an ulcer that does not hurt mean it is fine?

Not necessarily. "On occasions an ulcer may not be sore. This can occur in cases of mouth cancer."

Can treatment make an ulcer heal faster?

No, and the Department is honest about it: "It's not possible to speed up the recovery of ulcers, but the symptoms can be managed, and the risk of complications reduced."

What can I do to manage the discomfort?

"Avoid spicy, salty and sour foods until the ulcers heal"; "Drink plenty of fluids"; "Keep your mouth clean"; "Apply antiseptic gel to the ulcers"; and "rinse your mouth out with warm, slightly salted water, keeping the rinse in your mouth for up to 4 minutes at a time. Repeat four times daily". It also suggests "an alcohol-free medicated (preferably containing chlorhexidine gluconate) mouthwash twice daily".

Why alcohol-free mouthwash?

Because "irritation from strong antiseptics, such as a mouthwash" is itself on the Department's list of causes — so the rinse it recommends for ulcers is specifically alcohol-free.

How can I avoid getting them?

"Brushing your teeth gently with a soft toothbrush, taking care not to slip with the brush"; "Eating a well-balanced and nutritious diet"; "Making sure that underlying medical conditions are well-controlled."

Related services and further reading

General dentistry

Dental check-ups

Emergency dentistry

Everything you may need to know about mouth cancer

Can chewing gum really clean your mouth?

4 things to avoid if you have sensitive teeth

5 tips for a healthier smile

How to keep your gums healthy

How can we help?

If you are troubled by mouth ulcers, our team can examine your mouth and talk through the possible causes at any of our nine Core Dental practices. Call 13 13 16 or book online. Learn more about our dentists and registered specialists .

Core Dental at a glance

Nine Core Dental clinics across Melbourne: Southbank, South Melbourne, Caroline Springs, Carrum Downs, Epping, Wyndham, Berwick, Bayside and Glenferrie.

Open six days a week: Monday to Friday 8.00am to 6.00pm and Saturday mornings.

Interest-free payment plans and HICAPS on-site claiming.

Call 13 13 16 or book online.

Contact Core Dental

Phone	13 13 16
Booking	Online via coredental.com.au, or call 13 13 16
Hours	Monday to Friday 8.00am to 6.00pm, Saturday 8.00am to 1.30pm, Sunday closed

Results, recovery times and potential risks vary for each individual. This information is general in nature and is intended for people over 18. Seek advice from a qualified, AHPRA-registered practitioner before proceeding.

What is recurrent aphthous stomatitis?

Recurrent aphthous stomatitis, or RAS, is a common cause of ulcers that keep coming back. It may be triggered by genetics, stress or immune status. Our Core Dental dentists can examine your mouth and advise whether further investigation is needed.

At what age do recurring mouth ulcers usually begin?

Attacks of recurrent aphthous stomatitis typically begin in childhood and tend to peak during adolescence or early adult life. They usually occur at regular intervals, and the size and number of ulcers vary between people.

Which medical conditions can lead to repeated mouth ulcers?

Autoimmune conditions such as Sjögren's syndrome, lupus and mucocutaneous disorders can cause repeated mouth ulcers. At Core Dental we may suggest you also see your doctor if we suspect an underlying condition.

What injuries commonly lead to a single mouth ulcer?

A single ulcer is mainly caused by trauma, such as biting the tongue, lip or cheek, hot food or drink, hard or sharp foods, nail biting, sharp teeth, rough fillings or ill-fitting dentures.

How quickly do injury-related mouth ulcers heal?

Ulcers caused by injury usually heal within a few days once the cause has been removed. If an ulcer has not healed after about three weeks, book an examination with a Core Dental dentist or your doctor.

Can Core Dental dentists prescribe something for ulcer pain?

Where suitable, our dentists can prescribe topical ointments and mouth rinses to help ease discomfort, reduce inflammation and support healing. The right option depends on your diagnosis and medical history.

What should I bring to a Core Dental appointment about ulcers?

Bring relevant medical information and a current medicines list, and be ready to describe when your ulcers appear and how long they last. This helps our team assess your mouth and explain suitable options.

How do I book a mouth check at Core Dental?

Call 13 13 16 or book online through coredental.com.au. We are open Monday to Friday 8.00am to 6.00pm and Saturday mornings across our nine Melbourne practices, and Sunday is closed.