

Referral Support Service

ENT

ENT11

Salivary Gland Disorders

Definition

Salivary lumps though mostly benign in nature have a wide differential diagnosis and should be referred for a specialist opinion.

They can be benign neoplasms, malignant neoplasms, salivary duct stones or duct stenosis and can be associated with HIV, Sjogrens etc.

Exclude Red Flag Symptoms

- Facial nerve weakness
- Rapidly growing lump
- Ulceration/Induration of the mucosa or skin
- Numbness of skin
- Severe progressing pain
- History of skin cancer, Sjogrens syndrome or radiation of the head and neck

Management

- Salivary lumps that are persistent for 3 weeks should be referred to ENT.
- Infections caused by salivary gland obstruction should be treated with hydration, sialogogues (citrus drinks), and an appropriate antibiotic. Massaging the gland from the back of the mouth to the front of the mouth may relieve symptoms.
- Fever or abscess formation should prompt immediate admission.
- Management of mumps in children (see [CKS mumps](#))
- Management of Bacterial Parotitis: seen in the elderly and immunocompromised patients. Usually caused by staph. aureus. First line treatment **flucloxacillin**

Referral Information

Information to include in referral letter

- Relevant past medical / surgical history
- Current regular medication
- Smoking status

Patient information leaflets/ PDAs

<http://patient.info/health/salivary-gland-stones-salivary-calculi>

References

Salivary Gland Swellings *BMJ* 2012;345:e6794

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Clinical Research & Effectiveness approved: Sep 2016

Date published: Sep 2016

Next Review: Sep 2018

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