Radiotherapy can be effective for primary Basal Cell Carcinoma (BCC), recurrent BCC or as adjuvant for incompletely excised BCC in patients where further surgery is neither possible nor appropriate. Brachytherapy is a mixture of superficial, electron beam, and radiotherapy for curved surfaces, it consists in treatment in fractions over several visits, this may produce better cosmetic outcomes than a single fraction treatment. Significant side effects are xerostomia, mucositis, caries and osteoradionecrosis. Brachytherapy has been widely used for the treatment of head and neck cancers. Mold therapy is excellent for the treatment of superficial carcinomas because it allows the planning of an adequate dose distribution before treatment and provides highly reproducible irradiation. The use of customized intraoral molds reduces the side effects that results so uncomfortable for the patient and affects the post-treatment phase of the therapy. Recently developed units with 192- Ir microsources have more flexible catheters and molds that are better suited to uneven regions such as the oral cavity.

**INTRODUCTION**

**LITERATURE REVIEW**

In the oral cavity it is difficult to keep the surrounding tissues such as the tongue, floor of mouth, buccal mucosa and other structures away from the source of radioactive emission. Therefore perioral and intraoral devices such as positioning stents, tongue depressor, catheters, and custom mouthguards can be used.

**OBJECTIVE**

Demonstrate the feasibility of mouthguards in patients with oral carcinomas undergoing radiotherapy.

**DISCUSSION**

Mold brachytherapy experience in oral cavity carcinomas is mostly with low dose rate brachytherapy. There are few reports in the literature on the use of HDR mold brachytherapy combined with or without external beam therapy and the optimal time; dose and fractionation for HDR brachytherapy has not yet been determined. Eliminating the morbidity of surgery, preserving the function of major salivary glands, being an outpatient treatment procedure, and allowing simple repeated noninvasive treatments are the advantages of HDR mold brachytherapy.

**CONCLUSION**

There are several intraoral devices that are designed to attenuate the radiation of healthy tissue, the material that produces greater attenuation of radiation is lead, therefore customized intraoral leaded molds are the best options protecting healthy tissue in the oral cavity during brachytherapy.

**REFERENCES**