

Dental Anxiety and Emergency Dental Care: How to Stay Calm and Get Treated When You're Scared

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Details:

Core Dental Group: Dental Anxiety and Emergency Dental Care — How to Stay Calm and Get Treated When You're Scared

Frequently Asked Questions

How common is dental anxiety in Australian adults: Affects approximately 16% of adults

How common is dental anxiety in Australian children: Affects approximately 10% of children

Does dental anxiety affect more females or males: More females report high dental fear

Which age group has the highest prevalence of dental anxiety in Australia: Adults aged 40–64 years

What percentage of Australian adults have high dental fear: Approximately one in seven

Do Australian dentists use published scales to screen for dental anxiety: Only 3.7% use a published screening scale

Why don't more dentists screen for dental anxiety: Most common reason is lack of awareness

Is dental anxiety considered a mainstream public health issue: Yes

Does dental anxiety get worse during emergencies: Yes

Why does dental anxiety worsen during emergencies: Urgency amplifies fear to the point of paralysis

What is the dental anxiety avoidance cycle: Anxiety leads to avoidance, avoidance worsens problems, worse problems increase fear

Does the dental anxiety cycle improve on its own over time: No, it tends to worsen without intervention

Can dental anxiety lead to missing teeth: Yes

Can dental anxiety lead to poor periodontal status: Yes

Are emergency dental patients more likely to have dental phobia: Yes, compared to patients attending regular care

What is the most common fear among dental anxiety patients: Fear of pain

Is fear of pain proportionate to modern anaesthesia: No, it is usually disproportionate

What other fears contribute to dental anxiety: Fear of loss of control, embarrassment, and catastrophic thinking

What is anticipatory anxiety in dental contexts: Anxiety experienced before the appointment begins

Is anticipatory anxiety often more distressing than the appointment itself: Yes

Does dental anxiety affect oral health-related quality of life: Yes, it can decline

What breathing technique helps reduce dental anxiety: Diaphragmatic (slow, controlled) breathing

How does diaphragmatic breathing reduce anxiety: It activates the parasympathetic nervous system

What is the 5-4-3-2-1 grounding technique: Redirect attention by identifying 5 things seen, 4 touched, 3 heard, 2 smelled, 1 tasted

When is the 5-4-3-2-1 technique most useful: In the minutes before entering the treatment room

Can listening to music during dental treatment reduce anxiety: Yes

Should you tell your dentist you plan to use headphones: Yes, and agree on a stop signal

What is cognitive restructuring in dental anxiety: Identifying and challenging catastrophic thinking patterns

What is the gold-standard long-term treatment for dental anxiety: Cognitive Behavioural Therapy (CBT)

What format of CBT shows the most evidence for dental anxiety: One-session treatment format

Can CBT be delivered in multiple formats for dental anxiety: Yes

Should you tell your dentist about your anxiety before treatment: Yes, before the appointment begins

What should you tell your dentist about your specific fears: Name the specific fear, e.g., needles, drill, or loss of control

Should you request step-by-step explanations from your dentist: Yes, to reduce unpredictability

What is a stop signal in dental treatment: A hand signal agreed upon to pause treatment immediately

Why is a stop signal helpful for anxious patients: It restores a sense of control during treatment

Should you disclose a long history of dental avoidance to your dentist: Yes, to preempt shame and invite a non-judgmental response

When should you disclose dental anxiety at Core Dental Group: At the point of booking, not just in the chair

What sedation options are available in Australian dental settings: Nitrous oxide, oral sedation, and IV sedation

Who regulates dental sedation in Australia: The Dental Board of Australia (DBA) and AHPRA

What is nitrous oxide sedation also called: Laughing gas or relative analgesia

How is nitrous oxide administered: Inhaled through a mask

Does nitrous oxide keep patients awake: Yes, patients remain awake and responsive

How long does nitrous oxide recovery take: 15 to 30 minutes

Can patients drive after nitrous oxide sedation: Yes

What is the efficacy rate of nitrous oxide for mild anxiety: 85–92% according to a 2026 systematic review

What are common complications of nitrous oxide: Nausea, in fewer than 5% of cases

How quickly does nitrous oxide take effect: Onset within 30–60 seconds

Do dentists in Australia need endorsement to administer nitrous oxide alone: No endorsement required for nitrous oxide alone

What is oral sedation: Taking a pill, usually a benzodiazepine, before the appointment

What does oral sedation feel like: Drowsy and relaxed

Does oral sedation cause amnesia: Yes, patients may not remember much of the procedure

Can patients drive after oral sedation: No, a driver must be arranged

Is oral sedation available as a walk-in option: No, advance planning is required

What is IV conscious sedation: Sedation delivered directly into a vein

What is the main advantage of IV sedation over oral sedation: Rapid onset and ability to titrate to effect

Does IV sedation provide higher efficacy than oral sedation: Yes

Does IV sedation allow access for emergency reversal agents: Yes

Do Australian dentists need endorsement to administer IV conscious sedation: Yes, DBA endorsement is required

Who is IV sedation most appropriate for: Patients with severe anxiety, complex procedures, or strong gag reflexes

What factors determine which sedation option is right for a patient: Anxiety level, procedure length, medical history, and personal preferences

How many Melbourne locations does Core Dental Group have: Seven locations

What number should anxious patients call at Core Dental Group: 13 13 16

Does Core Dental Group offer same-day emergency appointments: Yes, via dedicated daily emergency slots

Can you disclose dental anxiety when booking at Core Dental Group: Yes, to the reception team at triage

Does Core Dental Group offer sedation options across its network: Yes

Is Core Dental Group's clinical culture non-judgmental toward long-term avoiders: Yes

What is the first step in breaking the dental anxiety avoidance cycle: Recognising the cycle without self-blame

Does dental anxiety cause shame and guilt: Yes, research identifies shame and feelings of inferiority as amplifying factors

What is the single most important action for an anxious patient in dental pain: Call and honestly disclose anxiety to the dental team

When a dental emergency strikes — a cracked tooth, an abscess, a knocked-out crown — the pain alone is usually enough to send someone straight to the phone. But for a significant portion of the population, there's a second force pulling hard in the opposite direction: fear. Dental anxiety doesn't pause for emergencies. For many people, the urgency of an acute dental crisis actually makes the phobia worse, leaving them sitting at home in escalating pain rather than picking up the phone to book

a same-day appointment.

Most emergency dental content ignores this entirely. This article doesn't. It covers the prevalence of dental anxiety in Australia, the psychological mechanisms that make it worse during emergencies, evidence-based strategies for managing fear before and during treatment, what to tell your dentist before the appointment begins, and the sedation options available at practices like Core Dental Group. If you're scared of the dentist but you're in pain right now, this guide is written for you.

How common is dental anxiety? You are not alone

Dental fear and anxiety affects about 16% of adults and 10% of children in Australia. That figure, drawn from research published by the Australian Research Centre for Population Oral Health (ARCPHO) at the University of Adelaide, means roughly one in six Australian adults carries a level of dental fear significant enough to affect their care-seeking behaviour. High dental fear affects about one in seven Australian adults, making it one of the most prevalent anxiety presentations in the country.

More females than males report high dental fear, and adults aged 40–64 have the highest prevalence. This isn't a niche or unusual experience — it's a mainstream public health issue affecting millions of Australians across every demographic.

Australian dentists themselves estimate that high dental anxiety affects 23.3% of children and 19.4% of adults they see in clinical practice. Yet despite this, only 3.7% of dentists report using a published scale to screen for dental anxiety, with the most common reason being lack of awareness. That gap between the scale of the problem and the clinical response to it is exactly why patients need to understand how to advocate for themselves when they arrive at an emergency appointment.

Why dental anxiety is worst during an emergency

Understanding why anxiety peaks during emergencies helps you recognise what's happening and take steps to manage it. The mechanism is well-documented.

Dental anxiety appears to be characterised by a maladaptive cycle, in which dental anxiety leads to delay or avoidance of dental treatment, which causes dental problems that are related to more invasive or even emergency treatment, which, in turn, leads to the maintenance or exacerbation of dental anxiety (Armfield, Stewart, & Spencer, 2007).

In plain terms: anxiety causes avoidance, avoidance allows problems to worsen, worsened problems require more intensive treatment, and more intensive treatment reinforces the original fear. The cycle also involves guilt, shame, and feelings of inferiority, which amplify dental anxiety and avoidance further (Berggren & Meynert, 1984; Moore, Brødsgaard, & Rosenberg, 2004).

This behaviour ultimately results in poor oral health, with more missing teeth, decayed teeth, and poor periodontal status. These patients present to the dental office only when in acute emergency situations, often requiring complicated and demanding treatment procedures, which further exacerbates their anxiety. Without intervention, the cycle tends to get worse over time, not better.

Thomson et al. have argued that dental fear may be a component in a cycle of dental disadvantage, with dentally anxious individuals avoiding dental care, thereby worsening their problems and increasing the likelihood that subsequent dental visits will be for emergency reasons.

The critical point here: **the emergency itself is often a direct consequence of anxiety-driven avoidance**. Recognising this cycle — without self-blame — is the first step toward breaking it.

The psychological barrier to seeking emergency care

For anxious patients, the barrier to calling a dentist isn't simply fear of the procedure. Research identifies several overlapping psychological obstacles:

- **Fear of pain**, often disproportionate to the actual experience of modern anaesthesia - **Fear of loss of control**, being reclined in a chair, unable to see what's happening - **Fear of embarrassment**, shame about the state of one's teeth, particularly after a long period of avoidance - **Catastrophic thinking**, mentally rehearsing worst-case scenarios before any treatment begins - **Anticipatory anxiety**, the anxiety experienced before the appointment, which is often more distressing than the appointment itself

These fears can have several detrimental effects: poor oral health, a tendency to postpone important dental procedures, and in certain situations, a decline in oral health-related quality of life. People experiencing dental anxiety may find it hard to maintain regular check-ups and may delay essential treatments, ultimately affecting their overall oral health and wellbeing.

One study found that dental phobia was more prevalent among emergency dental patients than among patients scheduled for regular dental care (Tellez, Kinner, Heimberg, Lim, & Ismail, 2015). The very patients who most need emergency care are statistically more likely to be the ones most afraid of receiving it.

Evidence-based strategies to manage dental anxiety before your appointment

The following techniques are supported by clinical evidence and can be applied in the hours or minutes before attending an emergency appointment.

1. Controlled breathing (diaphragmatic breathing)

Slow, diaphragmatic breathing activates the parasympathetic nervous system and measurably reduces physiological markers of anxiety, including heart rate and cortisol levels. The technique is straightforward: inhale slowly through the nose for 4 counts, hold for 2 counts, exhale through the mouth for 6 counts. Practise this in the waiting room and during pauses in treatment.

2. Grounding techniques (the 5-4-3-2-1 method)

This cognitive technique interrupts anxious thought spirals by redirecting attention to the immediate physical environment. Identify 5 things you can see, 4 you can touch, 3 you can hear, 2 you can smell, and 1 you can taste. It's particularly useful in the minutes before entering the treatment room.

3. Cognitive restructuring

Simple techniques include helping patients recognise catastrophic thinking patterns, teaching breathing exercises, and gradually exposing them to dental stimuli in a controlled, supportive environment. You can begin this process yourself by writing down your specific fears before the appointment and then asking: *What is the realistic probability of this happening?* and *What is the most likely actual outcome?* Catastrophic thinking is almost always disproportionate to clinical reality.

4. Distraction during treatment

Many patients find that listening to music or a podcast through headphones during treatment significantly reduces anxiety. Tell your dentist you plan to use headphones and agree on a clear stop signal. That gives you both a shared protocol and preserves your sense of control.

5. Cognitive Behavioural Therapy (CBT)

For patients with severe or longstanding dental phobia, treatment techniques reviewed in the literature include various forms of cognitive-behavioural therapy (CBT), relaxation training, benzodiazepine premedication, self-hypnosis by audio therapy, hypnotherapy, and nitrous oxide sedation. CBT delivered in a variety of formats, including one-session treatment, showed the most evidence for reducing anxiety. If your phobia is severe, consider speaking with a psychologist who specialises in specific phobias between dental appointments. It's the most evidence-based long-term solution available.

What to tell your dentist before emergency treatment begins

One of the most effective anxiety-management strategies is also one of the simplest: communicate your fear clearly and specifically before the appointment begins. This isn't about complaining — it's about giving your clinical team the information they need to adapt their approach.

Here's a practical way to frame that conversation, whether you're calling to book or arriving at the practice:

| What to communicate | Why it matters | |---|---| | "I have significant dental anxiety" | Flags the need for a more patient-paced approach | | "My specific fear is [needles / the drill / loss of control]" | Allows targeted reassurance and technique modification | | "Please explain each step before you do it" | Reduces the unpredictability that amplifies anxiety | | "I would like a stop signal — I'll raise my left hand" | Restores your sense of control during treatment | | "I may need more time to settle before we begin" | Prevents rushed treatment that escalates anxiety | | "I've avoided the dentist for [X] years — please don't judge" | Preempts shame and invites a non-judgmental response |

These patients need to be identified at the earliest opportunity and their concerns addressed. The initial interaction between the dentist and the patient can reveal the presence of anxiety, fear, and phobia. A well-trained emergency dental team will use this information to adjust their communication style, pace the appointment appropriately, and offer pharmacological support where needed.

At Core Dental Group, patients are encouraged to disclose anxiety at the point of booking, not just once they're in the chair. This gives the clinical team time to prepare, allocate appropriate appointment length, and discuss sedation options before you arrive.

Sedation options for emergency dental procedures in Australia

For patients whose anxiety can't be managed through behavioural techniques alone, sedation dentistry offers a safe, evidence-based pharmacological pathway. In Australia, sedation in dentistry is regulated by the Dental Board of Australia (DBA) and the Australian Health Practitioner Regulation Agency (AHPRA), ensuring that only appropriately trained and endorsed clinicians can administer sedative agents.

Sedation options available in Australian dental settings include nitrous oxide, oral sedation, and intravenous (IV) sedation.

Nitrous oxide (relative analgesia / "happy gas")

Nitrous oxide sedation, often called laughing gas, is widely used for anxiety relief during dental procedures. It's inhaled through a mask, takes effect within 30–60 seconds, and induces relaxation while keeping the patient awake and responsive.

In Australia, dentists do not need to be endorsed to administer relative analgesia using nitrous oxide/oxygen on its own or in combination with local anaesthetic, as long as the state of conscious sedation is not achieved. This means nitrous oxide is broadly available at most general dental

practices. Recovery typically takes 15 to 30 minutes, and patients can drive and go about their day afterwards.

A 2026 systematic review published in *Cureus* (Mroczek & Orlanska) found that nitrous oxide excelled in mild anxiety, with 85–92% efficacy and fewer than 5% complications such as nausea, with rapid 30–60 second onset, making it ideal for short procedures with full recovery in five minutes.

Oral sedation

Oral sedation involves taking a pill, usually a benzodiazepine, before your dental appointment. It makes you feel drowsy and relaxed, and you may experience some amnesia — meaning you won't remember much of the procedure. It's a reasonable option for moderate dental anxiety or longer procedures.

You'll need someone to drive you to and from the appointment, as you won't be able to drive yourself. Oral sedation also requires advance planning and isn't available as a walk-in option, which is another reason to call ahead and disclose your anxiety at the time of booking.

IV (intravenous) conscious sedation

The main advantages of the IV route are rapid onset of action and the ability to titrate to effect and control the duration of sedation. Other advantages include higher levels of efficacy than oral or inhalation sedation and IV access for emergency drugs or reversal agents if needed.

In Australia, if a dentist wishes to induce a level of conscious sedation in a patient, they must be endorsed by the Dental Board of Australia prior to doing so. IV sedation is appropriate for patients with severe anxiety, complex procedures, or strong gag reflexes.

Choosing the right option

The appropriate sedation level for your emergency depends on the nature of the procedure, your medical history, and the severity of your anxiety. A dentist uses a sedation technique based on your anxiety level, length of the dental procedure, personal preferences, and health history. This is a clinical conversation, not a decision you need to make alone. Bring it up when you call to book.

How Core Dental Group supports anxious emergency patients

Core Dental Group's clinical team treats dental anxiety as a legitimate clinical consideration, not a personality quirk to be managed around. Several features of the practice model are directly relevant for anxious patients:

- **Seven Melbourne locations** mean you're more likely to find an available same-day appointment close to home, reducing the logistical stress that can compound anxiety (see our guide on [Core Dental Group Melbourne Locations Guide: Finding Your Nearest Emergency Dentist Across 7 Clinics](#)) -
- Dedicated daily emergency appointment slots** mean you're less likely to be turned away and forced to wait in pain (see our guide on [How to Book a Same-Day Emergency Dental Appointment at Core Dental Group](#)) -
- Transparent, upfront pricing** removes the financial uncertainty that often amplifies pre-appointment anxiety (see our guide on [Emergency Dentist Melbourne Cost Guide: What to Expect to Pay for Urgent Dental Care](#)) -
- Sedation options** are available across the network for patients who need pharmacological support to access care -
- A non-judgmental clinical culture** — patients who have avoided the dentist for years are welcomed, not shamed

When you call 13 13 16, you can disclose your anxiety to the reception team at the point of triage. This allows the clinical team to allocate appropriate appointment time and prepare any sedation support you may need before you arrive.

What to expect when you arrive: a step-by-step overview for anxious patients

Knowing what will happen, in sequence, is one of the most effective anxiety-reduction tools available. Here's what a typical emergency appointment at Core Dental Group looks like for an anxious patient:

1. **Arrival and check-in** — You advise reception you have dental anxiety. This is noted in your file.
2. **Brief triage conversation** — The dentist or dental nurse will ask about your specific concerns, medical history, and the nature of your emergency before any equipment is near you.
3. **Sedation discussion** — If you've requested or are likely to benefit from sedation, this is discussed and arranged before treatment begins.
4. **Examination** — A gentle clinical examination to diagnose the emergency. No treatment begins without your explicit consent.
5. **Treatment explanation** — The dentist explains exactly what they plan to do, in plain language, before they begin.
6. **Stop signal agreement** — You agree on a clear hand signal that means "pause immediately."
7. **Treatment** — Paced to your comfort, with regular check-ins.
8. **Post-treatment debrief** — The dentist explains what was done, what to expect in recovery, and next steps.

This structure is designed to restore the sense of control and predictability that anxiety removes.

Key takeaways

- Dental anxiety affects approximately 16% of Australian adults, making fear of the dentist one of the most common anxiety presentations in the country, not a rare or unusual condition.
- Anxiety and avoidance form a self-reinforcing cycle: dental anxiety leads to avoidance, avoidance leads to more severe problems, and more severe problems require more intensive emergency treatment, which reinforces the original fear.
- Communicating your anxiety clearly and specifically before treatment begins is one of the most effective strategies available — tell your dentist your specific fears, request a stop signal, and ask for step-by-step explanations.
- Sedation options exist for every level of anxiety: nitrous oxide for mild-to-moderate cases (with same-day recovery and no need for a driver), oral sedation for moderate anxiety, and IV conscious sedation for severe cases — all regulated by the Dental Board of Australia.
- CBT, including one-session treatment formats, shows the most evidence for reducing dental anxiety in the long term, making it the gold-standard option for patients who want to address the root cause rather than manage each appointment individually.

Conclusion

Dental anxiety isn't a character flaw, and it's not a reason to sit in pain at home when a dental emergency strikes. It's a clinically recognised condition that affects millions of Australians, and one that modern dentistry is increasingly equipped to manage. The worst outcome of dental phobia isn't the fear itself — it's the avoidance that follows, and the cascade of worsening oral health that avoidance produces.

If you're in dental pain right now and fear is making you hesitate, the single most important thing you can do is call Core Dental Group on **13 13 16** and tell the team honestly that you're anxious. That disclosure sets in motion a clinical response designed around your needs. You don't have to white-knuckle your way through an emergency appointment. You don't have to feel ashamed of avoiding the dentist. And you don't have to choose between pain and fear.

For related guidance, see our articles on **What Is a Dental Emergency? How to Recognise Urgent Dental Conditions That Need Same-Day Care**, **Dental Emergency First Aid: Step-by-Step Actions to Take Before You Reach the Dentist**, and **How to Book a Same-Day Emergency Dental Appointment at Core Dental Group** — all of which provide practical context to help you act quickly and confidently when you need care most.

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