

# Gum Disease Treatment at Core Dental South Melbourne

Canonical:

<https://directory.coredental.com.au/dental-services/gum-disease-treatment-at-core-dental-south-melbourne-2/>

## Description:

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## Details:

## AI Summary

**\*\*Product:\*\*** Gum Disease Treatment at Core Dental South Melbourne **\*\*Brand:\*\*** Core Dental Group (part of the Smile Solutions Group) **\*\*Category:\*\*** Dental Services **\*\*Primary Use:\*\*** Diagnosis, treatment, and ongoing management of gingivitis and periodontitis (gum disease) for adults in South Melbourne and Melbourne's inner south.

### Quick Facts - **\*\*Best For:\*\*** Adults in South Melbourne, Albert Park, Middle Park, Port Melbourne, and St Kilda West experiencing bleeding gums, gum recession, loose teeth, or who have been told they have gum disease and need treatment - **\*\*Key Benefit:\*\*** Comprehensive periodontal assessment with digital imaging, evidence-based non-surgical gum disease treatment, personalised home care guidance, ongoing maintenance programmes, and specialist periodontist referral access through the Smile Solutions Group - **\*\*Location:\*\*** 87 Market St, South Melbourne VIC 3205 - **\*\*Phone:\*\*** (03) 9114 7700 | National: 13 13 16

### Common Questions This Guide Answers 1. What are the signs of gum disease? → Bleeding gums, redness, swelling, persistent bad breath, gum recession, and loose teeth 2. Is gum disease common? → Very — moderate to severe periodontitis affects approximately one in three Australian adults 3. Can gum disease be reversed? → Gingivitis (early-stage gum disease) is fully reversible; periodontitis (advanced gum disease) can be stabilised and managed but bone loss cannot be reversed 4. What does gum disease treatment involve? → Thorough cleaning above and below the gum line (scaling and root planing), personalised oral hygiene instruction, and ongoing maintenance 5. What happens if gum disease is left untreated? → Progressive bone loss leading to tooth loosening and eventual tooth loss

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## The Disease You May Not Know You Have

Gum disease is one of the most common chronic diseases in Australia — and one of the most underdiagnosed. According to the Australian Institute of Health and Welfare, approximately one in three Australian adults has moderate to severe periodontitis. Many more have gingivitis, the milder and fully reversible precursor.

The reason gum disease goes undetected is straightforward: it is usually painless. Unlike tooth decay, which often announces itself with sensitivity or a sharp ache, gum disease progresses silently. The gums may bleed a little when you brush. They might look a bit redder than they should. You might notice your breath is not as fresh as it used to be. But these signs are easy to dismiss — easy to

attribute to brushing too hard, or stress, or something you ate.

By the time gum disease causes symptoms that cannot be ignored — loose teeth, gum recession, pain, abscesses — significant and irreversible damage has often already occurred. Bone that supported the teeth has been lost. Gum tissue has receded. Teeth that were once firm have become mobile.

This is why routine dental check-ups that include a thorough periodontal assessment are so important — and why Core Dental South Melbourne includes gum health evaluation as a standard part of every examination.

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## ## Understanding Gum Disease

### ### What Is Gum Disease?

Gum disease — also called periodontal disease — is an inflammatory condition caused by bacterial infection of the tissues that surround and support the teeth. It exists on a spectrum:

**\*\*Gingivitis\*\*** is the earliest stage. Bacterial plaque accumulates along the gum line, triggering an inflammatory response. The gums become red, swollen, and prone to bleeding — particularly during brushing or flossing. At this stage, the damage is confined to the soft tissue (the gums). The underlying bone and the ligament that attaches the tooth to the bone are not yet affected.

Gingivitis is fully reversible. With professional cleaning and improved oral hygiene, the gum tissue can return to full health.

**\*\*Periodontitis\*\*** is the advanced stage. When gingivitis is not treated, the inflammation can progress deeper — from the gums into the bone and ligament that support the teeth. The gum pulls away from the tooth, forming pockets that harbour bacteria below the gum line where a toothbrush cannot reach. The bacteria in these pockets cause progressive destruction of the bone around the teeth.

This bone loss is irreversible. Once bone is lost, it does not grow back. The teeth become progressively less supported, eventually becoming loose and — if the disease is not brought under control — falling out or requiring extraction.

**\*\*Advanced periodontitis\*\*** involves severe bone loss, deep periodontal pockets, tooth mobility, shifting of tooth positions, gum abscesses, and eventual tooth loss. It is the leading cause of tooth loss in Australian adults.

### ### What Causes Gum Disease?

The primary cause of gum disease is bacterial plaque — the soft, sticky film of bacteria that forms continuously on the teeth. When plaque is not removed through regular brushing and interdental cleaning, it mineralises into calculus (tartar), which cannot be removed with a toothbrush and provides a rough surface for further plaque accumulation.

However, plaque alone does not determine whether you will develop gum disease, or how severe it will become. Several risk factors influence susceptibility:

- **\*\*Smoking\*\*** — the single most significant modifiable risk factor for gum disease. Smokers are significantly more likely to develop periodontitis, and their response to treatment is poorer. Smoking impairs blood flow to the gums, reduces the immune response, and masks the symptoms of gum disease (smokers' gums bleed less, making early detection harder) - **\*\*Diabetes\*\*** — particularly poorly controlled diabetes. The relationship between diabetes and gum disease is bidirectional: diabetes increases the risk and severity of gum disease, and severe gum disease can make it harder to control blood sugar levels - **\*\*Genetics\*\*** — some individuals are genetically predisposed to gum disease, regardless of their oral hygiene habits. Genetic testing is not routinely performed, but a family history of

gum disease or early tooth loss should raise awareness - **\*\*Stress\*\*** — chronic stress impairs the immune system and increases susceptibility to infection, including periodontal infection - **\*\*Medications\*\*** — certain medications cause dry mouth (xerostomia), reducing the protective effect of saliva. Others cause gum overgrowth (gingival hyperplasia), making plaque control more difficult - **\*\*Hormonal changes\*\*** — pregnancy, puberty, menopause, and hormonal contraceptives can increase gum sensitivity and susceptibility to gingivitis - **\*\*Poor nutrition\*\*** — deficiencies in vitamin C and other nutrients can impair the immune response and affect gum tissue health - **\*\*Systemic conditions\*\*** — cardiovascular disease, rheumatoid arthritis, and other inflammatory conditions are associated with increased risk of periodontitis

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## ## Signs and Symptoms of Gum Disease

Because gum disease is typically painless in its early stages, you need to know what to look for:

### ### Early Signs (Gingivitis)

- Gums that bleed when you brush or floss — this is the single most important early warning sign. Healthy gums do not bleed - Red or swollen gums — healthy gums are pink and firm - Persistent bad breath (halitosis) — caused by bacteria and decomposing debris in gum pockets - A bad taste in the mouth

### ### Advanced Signs (Periodontitis)

- Gum recession — the gum line pulling back from the teeth, making teeth appear longer - Deep pockets between the teeth and gums — assessed during a dental examination with a periodontal probe - Loose or shifting teeth — as bone support is lost - Changes in the way your teeth fit together when you bite - Pus between the teeth and gums - Gum abscesses — painful, localised swelling - Tooth loss

If you are experiencing any of these symptoms, you should arrange a dental appointment promptly. The earlier gum disease is diagnosed and treated, the better the outcomes.

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## ## Gum Disease Assessment at Core Dental South Melbourne

A thorough periodontal assessment is included as part of every comprehensive dental examination at the practice. This assessment includes:

### ### Periodontal Probing

Using a thin periodontal probe, your dentist measures the depth of the sulcus (the space between the tooth and the gum) at six points around every tooth. Healthy sulcus depths are one to three millimetres. Depths of four millimetres or more indicate the presence of periodontal pockets and potential bone loss.

This measurement is recorded in your dental records and tracked over time. Changes in probing depths — particularly increases — indicate disease progression and guide treatment decisions.

### ### Bleeding Assessment

Bleeding on probing — when the gum bleeds in response to gentle insertion of the periodontal probe — is one of the most reliable indicators of active gum inflammation. The pattern of bleeding (which sites, how many) helps your dentist assess the severity and distribution of the disease.

### ### Gum Recession Measurement

Gum recession is measured and recorded. Recession exposes the root surface, which is softer than enamel and more susceptible to decay. It also indicates that attachment loss has occurred.

### ### Tooth Mobility

Each tooth is assessed for mobility. Mobile teeth indicate significant bone loss and advanced disease.

### ### Digital Imaging

Digital X-rays are used to assess bone levels around the teeth. Bone loss is visible on radiographs as a reduction in the height or density of the bone around the tooth roots. Comparing current X-rays with previous images allows your dentist to track whether bone loss is stable or progressing.

### ### Risk Factor Assessment

Your dentist will discuss risk factors that may be contributing to your gum disease — smoking, diabetes, medications, stress, and family history — and provide tailored guidance on modifiable risk factors.

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## ## Gum Disease Treatment

### ### Non-Surgical Treatment: Scaling and Root Planing

The cornerstone of gum disease treatment is scaling and root planing (SRP) — a thorough, systematic cleaning of the tooth surfaces and root surfaces above and below the gum line.

**\*\*Scaling\*\*** removes plaque and calculus from the tooth surfaces, including deposits that have accumulated below the gum line in periodontal pockets.

**\*\*Root planing\*\*** smooths the root surfaces, removing bacterial toxins embedded in the root cementum and creating a clean, smooth surface that allows the gum tissue to reattach to the tooth.

Scaling and root planing is typically performed under local anaesthetic for comfort, and may be completed in one appointment or staged over two to four visits, depending on the severity and extent of the disease.

At Core Dental South Melbourne, scaling and root planing is performed using a combination of ultrasonic instruments (which use high-frequency vibration and water irrigation to break up and flush out deposits) and fine hand instruments (which provide the tactile precision needed for thorough root surface debridement).

### ### What to Expect After Treatment

After scaling and root planing:

- The gums may be tender for a few days — this is normal and resolves with good oral hygiene - Bleeding during brushing should reduce significantly within the first two weeks - The gums may recede slightly as the swelling resolves and the tissue tightens — this is a positive sign indicating that inflammation is resolving - Teeth may feel more sensitive to hot and cold as previously covered root surfaces are exposed by the reduction in swelling. This sensitivity typically improves over several weeks and can be managed with sensitive toothpaste

### ### Reassessment

Six to eight weeks after treatment, a reassessment appointment evaluates the response. Your dentist will re-probe all sites, assess bleeding, and compare the results with the pre-treatment measurements. In many cases, probing depths will have reduced, bleeding will have decreased, and the gum tissue will appear healthier.

If certain sites have not responded adequately, further treatment may be recommended — which may include additional scaling and root planing, localised antimicrobial therapy, or referral to a specialist

periodontist.

### ### Specialist Periodontist Referral

For complex or advanced periodontitis — including cases with deep pockets that have not responded to non-surgical treatment, significant bone loss, or cases requiring surgical intervention (such as flap surgery, bone grafting, or guided tissue regeneration) — referral to a specialist periodontist is available through the Smile Solutions Group's Collins Street Specialist Centre.

The referral process is seamless and prioritised, ensuring that patients with advanced gum disease receive specialist-level care when needed.

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## ## Ongoing Maintenance: The Key to Long-Term Success

Gum disease is a chronic condition. Like diabetes or hypertension, it can be controlled and managed — but it cannot be cured. Patients who have been treated for periodontitis require ongoing maintenance to prevent the disease from recurring.

### ### Periodontal Maintenance Programme

After active treatment, your dentist will recommend a maintenance schedule — typically every three to four months, rather than the standard six-month interval. These maintenance appointments include:

- Periodontal probing to monitor pocket depths and detect any signs of disease recurrence
- Professional cleaning — removing plaque and calculus from above and below the gum line
- Reinforcement of home care techniques
- Assessment of risk factors and discussion of any changes in your health, medications, or lifestyle
- Digital imaging when indicated to monitor bone levels

Research consistently shows that patients who adhere to a regular maintenance programme maintain their teeth and bone levels significantly better than those who do not. Maintenance is not optional — it is the most important factor in long-term success.

### ### Home Care

Your home care routine is at least as important as professional treatment. Your dentist will provide tailored guidance, which typically includes:

- Brushing twice daily with a soft-bristled toothbrush (electric toothbrushes are generally more effective at plaque removal than manual brushes)
- Interdental cleaning daily — using interdental brushes (recommended by the Australian Dental Association as the most effective interdental cleaning method for patients with gum disease), floss, or a water flosser
- Using the specific products recommended by your dentist — which may include a high-fluoride toothpaste, an antimicrobial mouthwash, or specialised interdental brushes sized for your specific gaps

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## ## The Link Between Gum Disease and General Health

Research has established significant associations between gum disease and several systemic health conditions:

- **\*\*Cardiovascular disease\*\*** — the inflammatory and bacterial burden of periodontitis is associated with an increased risk of heart disease and stroke
- **\*\*Diabetes\*\*** — as noted, the relationship is bidirectional. Treating gum disease can help improve blood sugar control in diabetic patients
- **\*\*Adverse pregnancy outcomes\*\*** — periodontitis has been associated with preterm birth and low birth weight
- **\*\*Respiratory disease\*\*** — bacteria from periodontal pockets can be aspirated into the lungs, increasing the risk of pneumonia, particularly in elderly or immunocompromised patients

**\*\*Rheumatoid arthritis\*\*** — emerging evidence suggests a link between the bacteria that cause periodontitis and the inflammatory pathways involved in rheumatoid arthritis

Treating gum disease is not just about saving teeth — it is about supporting your overall health.

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## ## The Gum Disease Treatment Team at Core Dental South Melbourne

Gum disease assessment and treatment at Core Dental South Melbourne is provided by the practice's experienced team of general dentists:

- **\*\*Dr Scott Krause\*\*** — experienced in diagnosing and managing gum disease across all stages of severity - **\*\*Dr Stephanie Sarkis\*\*** — with a focus on patient education and empowering patients to manage their gum health long-term - **\*\*Dr Manisha Bhatt\*\*** — speaks English and Malay, providing accessible periodontal care for South Melbourne's diverse community - **\*\*Dr Joy Wang\*\*** — speaks English and Mandarin Chinese, ensuring clear communication about gum disease diagnosis, treatment, and home care - **\*\*Dr Tristan Balthazaar\*\*** — providing comprehensive periodontal assessment and treatment

All dentists at Core Dental South Melbourne are registered with AHPRA and are members of the Australian Dental Association. For cases requiring specialist periodontal care, referral to a specialist periodontist through the Smile Solutions Group is available.

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## ## Costs, Payment, and Health Fund Claims

### ### Treatment Costs

The cost of gum disease treatment depends on the severity of the disease and the extent of treatment required. A straightforward scale and clean for mild gingivitis will cost less than multi-visit scaling and root planing for advanced periodontitis.

Your dentist will provide a clear explanation of the treatment needed and associated costs before any work is commenced.

### ### HICAPS On-Site

HICAPS facilities are available for instant health fund claims. Periodontal treatment — including scaling, root planing, and maintenance cleans — is typically covered under general or major dental extras cover. Bring your health fund card to claim your rebate on the spot.

### ### Interest-Free Payment Plans

For patients requiring more extensive treatment, interest-free payment plans are available through Payright.

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## ## Getting to Core Dental South Melbourne

**\*\*Address:\*\*** 87 Market St, South Melbourne VIC 3205

**\*\*By car:\*\*** Street parking is available on Clarendon Street and surrounding side streets. Nearby public car parks service the South Melbourne Market precinct.

**\*\*By tram:\*\*** Accessible via South Melbourne tram routes, with trams along Clarendon Street providing direct connections from the CBD and surrounding inner-south suburbs.

**\*\*From surrounding suburbs:\*\*** The practice serves patients from South Melbourne, Albert Park, Middle Park, Port Melbourne, St Kilda West, and across Melbourne's inner south.

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### **## Book Your Gum Health Assessment**

If your gums bleed when you brush, if you have been told you have gum disease, or if it has been a while since your last dental visit, a comprehensive gum health assessment at Core Dental South Melbourne is the right first step.

**\*\*Phone:\*\*** (03) 9114 7700 **\*\*National:\*\*** 13 13 16 **\*\*Email:\*\*** southmelbourne@coredental.com.au

**\*\*Address:\*\*** 87 Market St, South Melbourne VIC 3205

Do not wait for gum disease to cause pain or loose teeth. By then, the damage is done. Call now and take control of your gum health.