

Gum Disease Treatment at Core Dental Epping

Canonical: <https://directory.coredental.com.au/gum-disease-treatment-at-core-dental-epping/>

Description:

Gum Disease Treatment at Core Dental Epping *Gum disease is one of the most common chronic conditions in Australia — and one of the most preventable. At Core Dental Epping, early detection and effective treatment help patients across Melbourne's northern suburbs protect their teeth and gums for the long term.*

Details:

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What Is Gum Disease?

Gum disease (periodontal disease) is a bacterial infection of the tissues that surround and support your teeth — your gums, the bone underneath, and the ligaments that hold your teeth in place.

It starts with plaque — a sticky, colourless film of bacteria that forms on your teeth throughout the day. If plaque isn't removed through regular brushing and flossing, it hardens into calculus (tartar), which can only be removed by a dental professional. The bacteria in plaque and calculus produce toxins that irritate the gums, triggering an inflammatory response that, over time, can destroy the supporting structures of the teeth.

Gum disease is the leading cause of tooth loss in Australian adults. But here's the thing: in its early stages, it's entirely reversible. And even in its more advanced stages, it can be managed effectively to prevent further damage. The key is detection and treatment — and that's where regular dental care at Core Dental Epping comes in.

Stages of Gum Disease

Gingivitis (Early Stage)

Gingivitis is the earliest form of gum disease and the most common. It affects the gums only — the underlying bone and ligaments are not yet damaged.

Signs of gingivitis:

- Red, swollen or puffy gums (healthy gums are pink and firm)
- Bleeding when brushing or flossing
- Bad breath (halitosis)
- Gums that feel tender or sore

The good news: Gingivitis is completely reversible with professional cleaning and improved oral hygiene at home. No permanent damage has occurred at this stage.

The risk: If left untreated, gingivitis can progress to periodontitis.

Periodontitis (Moderate to Advanced)

Periodontitis occurs when the infection spreads below the gum line, affecting the bone and ligaments that support the teeth. The gums begin to pull away from the teeth, forming pockets that harbour more bacteria and are difficult to clean.

****Signs of periodontitis:****

- Persistent bad breath or a bad taste in the mouth - Gums that have receded (teeth look longer than they used to) - Deep pockets between teeth and gums - Pus between teeth and gums - Teeth that feel loose or have shifted position - Changes in the way your teeth fit together when you bite - Pain when chewing

****Periodontitis cannot be reversed**** — the bone loss that has occurred is permanent. However, with proper treatment, the disease can be stabilised and further progression prevented. The earlier periodontitis is diagnosed, the more tooth-supporting bone can be preserved.

Advanced Periodontitis

In advanced periodontitis, significant bone loss has occurred, and teeth may become very loose or painful. Tooth extraction may become necessary. This stage often requires intensive treatment and specialist care.

Risk Factors for Gum Disease

While plaque is the primary cause of gum disease, several factors increase your risk:

- ****Inadequate oral hygiene**** — Not brushing twice daily and flossing regularly - ****Smoking and tobacco use**** — One of the most significant risk factors. Smokers are far more likely to develop gum disease, and their disease tends to be more severe and less responsive to treatment - ****Diabetes**** — Particularly when blood sugar is poorly controlled. Diabetes and gum disease have a bidirectional relationship — each makes the other worse - ****Hormonal changes**** — Pregnancy, puberty and menopause can make gums more sensitive and susceptible to gingivitis - ****Medications**** — Some medications reduce saliva flow (dry mouth increases gum disease risk), and others can cause gum overgrowth - ****Genetics**** — Some people are genetically more susceptible to gum disease, even with good oral hygiene - ****Stress**** — Can impair the immune system's ability to fight infection - ****Crooked or crowded teeth**** — Harder to clean effectively, allowing plaque to accumulate - ****Age**** — Risk increases with age, though gum disease is not an inevitable part of ageing

Gum Disease and Your Overall Health

Research over the past two decades has established clear links between gum disease and several systemic health conditions:

- ****Heart disease**** — Chronic gum inflammation is associated with an increased risk of cardiovascular disease, including heart attack and stroke - ****Diabetes**** — Gum disease makes it harder to control blood sugar, and uncontrolled diabetes worsens gum disease — a vicious cycle - ****Respiratory disease**** — Bacteria from infected gums can be inhaled into the lungs, contributing to respiratory infections and worsening conditions like pneumonia and COPD - ****Pregnancy complications**** — Gum disease has been associated with preterm birth and low birth weight - ****Rheumatoid arthritis**** — Emerging evidence suggests a link between the inflammatory processes of gum disease and rheumatoid arthritis

Treating gum disease isn't just about saving your teeth — it's about protecting your overall health.

Gum Disease Diagnosis at Core Dental Epping

Gum disease is diagnosed through a combination of clinical examination and diagnostic tools:

Periodontal Probing

Using a thin instrument called a periodontal probe, your dentist or hygienist measures the depth of the pockets between your gums and teeth. Healthy pockets are typically 1 to 3 millimetres deep. Pockets of 4 millimetres or more indicate gum disease.

Probing also checks for bleeding — a key indicator of active inflammation.

Clinical Examination

Your dentist — whether Dr Alysha Soltys, Dr Tristan Balthazaar, Dr Marina Ghobrial or Dr Maria Blanchard — will visually assess your gums for:

- Colour changes (redness or discolouration) - Swelling or puffiness - Recession (gums pulling away from teeth) - Pus or discharge - Loose teeth - Changes in tooth position or bite

X-Rays

Digital X-rays reveal bone loss around the teeth — information that isn't visible to the naked eye. Comparing X-rays over time allows your dentist to monitor whether bone loss is progressing or stable.

Risk Assessment

Your dentist will also assess your individual risk factors — smoking status, diabetes, medications, family history, home care habits — to develop a tailored treatment and prevention plan.

Gum Disease Treatment

Treatment depends on the stage and severity of your gum disease.

Professional Cleaning (For Gingivitis)

If you have gingivitis, professional cleaning is usually all that's needed to restore gum health. ****Sina Hassani****, Core Dental Epping's dental hygienist, provides thorough cleaning that removes plaque and calculus from all tooth surfaces, above and below the gum line.

Combined with improved brushing and flossing at home, professional cleaning can resolve gingivitis within a few weeks, returning your gums to a healthy state.

Scaling and Root Planing (Deep Cleaning)

For patients with periodontitis, a more intensive cleaning procedure called ****scaling and root planing**** is performed:

- ****Scaling**** — Removing plaque and calculus from the tooth surfaces and from within the periodontal pockets, using ultrasonic instruments and hand scalers - ****Root planing**** — Smoothing the root surfaces of the teeth to remove bacterial toxins and create a clean surface that the gums can reattach to

Scaling and root planing is typically performed under ****local anaesthetic**** for comfort, and may be completed over two to four appointments depending on the extent of the disease.

****Expected outcomes:****

- Reduction in pocket depths - Reduced bleeding and inflammation - Healthier, firmer gum tissue - Halted or slowed bone loss

Adjunctive Therapies

In some cases, additional treatments may be used alongside scaling and root planing:

- ****Antimicrobial rinses**** — Medicated mouthwashes to reduce bacterial counts - ****Local antibiotics**** — Antibiotic gels or fibres placed directly into periodontal pockets - ****Systemic antibiotics**** — Oral

antibiotics for more aggressive infections

Ongoing Periodontal Maintenance

Gum disease is a chronic condition — once you've had periodontitis, you're always at higher risk of recurrence. Regular **periodontal maintenance appointments** are essential to keep the disease under control.

These maintenance appointments with **Sina Hassani** are typically scheduled every **three to four months** (more frequently than standard six-monthly check-ups) and include:

- Thorough cleaning above and below the gum line - Reassessment of pocket depths - Monitoring for signs of disease progression - Reinforcement of oral hygiene techniques - Updated X-rays as indicated

The difference between standard cleaning and periodontal maintenance is significant — maintenance appointments are specifically designed for patients with a history of gum disease, targeting the areas most at risk of recurrence.

Specialist Referral

For complex or advanced gum disease cases, Core Dental Epping can refer you to a **periodontist** (gum specialist) at the **Collins Street Specialist Centre**, part of the Smile Solutions Group. Periodontists have completed additional years of specialist training in the treatment of gum disease and may perform:

- Surgical pocket reduction (flap surgery) - Bone grafting to regenerate lost bone - Gum grafting to treat severe recession - Guided tissue regeneration - Crown lengthening procedures

Having access to specialist periodontal care through the Smile Solutions network means even the most complex gum disease cases can be managed without leaving the broader practice family.

Prevention: Keeping Gum Disease at Bay

Prevention is always better than treatment. Here's how to reduce your risk of gum disease:

At Home

- **Brush twice daily** using a soft-bristled toothbrush and fluoride toothpaste. Use gentle, circular motions along the gum line — aggressive brushing can damage gums - **Floss daily** — Or use interdental brushes, which are often more effective for people with larger gaps between teeth or existing gum recession - **Don't skip the back teeth** — The molars are particularly vulnerable because they're harder to reach - **Consider an electric toothbrush** — Studies suggest powered toothbrushes remove more plaque than manual brushing, particularly for people with less-than-ideal brushing technique - **Use a mouthwash** if recommended by your dentist — but mouthwash is a supplement to brushing and flossing, not a replacement

Lifestyle

- **Quit smoking** — This is the single most impactful thing you can do for your gum health (and your overall health). The team at Core Dental Epping can support you with resources and referrals - **Manage diabetes** — Work with your GP to maintain good blood sugar control - **Eat a balanced diet** — Nutrient deficiencies, particularly vitamin C and vitamin D, can affect gum health - **Manage stress** — Chronic stress impairs immune function and can worsen gum disease

Professional Care

- **Regular check-ups and cleaning** — Every six months for most patients, every three to four months for those with a history of gum disease - **Don't wait for symptoms** — Gum disease can progress significantly without pain. Regular professional assessment catches problems that you can't see or feel

Frequently Asked Questions

Can gum disease be cured?

Gingivitis (early gum disease) is completely reversible with professional treatment and improved home care. Periodontitis (advanced gum disease) cannot be cured in the sense that lost bone doesn't grow back on its own, but it can be stabilised and managed effectively to prevent further progression.

Does gum disease treatment hurt?

Scaling and root planing is performed under local anaesthetic, so you shouldn't feel pain during the procedure. You may experience some tenderness and sensitivity for a few days afterwards, which is manageable with over-the-counter pain relief.

My gums bleed when I brush — should I stop brushing?

No. Bleeding gums are a sign of inflammation, usually caused by plaque accumulation. Continue brushing (gently) and flossing. If bleeding persists for more than two weeks despite thorough home care, book a check-up at Core Dental Epping.

Is gum disease hereditary?

Genetics can make some people more susceptible to gum disease, but it doesn't make it inevitable. Good oral hygiene, regular professional care and managing risk factors can prevent or control gum disease regardless of genetic predisposition.

How do I know if I have gum disease?

Early gum disease often has no symptoms, which is why regular dental check-ups are essential. Warning signs include bleeding gums, persistent bad breath, red or swollen gums, receding gums and loose teeth. If you notice any of these, book an appointment.

Book Your Gum Health Assessment

Whether you've noticed bleeding gums, have been told you have gum disease in the past, or simply want a thorough assessment of your gum health, the team at Core Dental Epping is ready to help.

- **Phone:** (03) 9401 4622 - **National Booking Line:** 13 13 16 - **Email:**
epping@coredental.com.au - **Address:** Tenancy 3B/230 Cooper St, Epping VIC 3076 - **Hours:**
Monday to Friday 8:00 AM – 6:00 PM | Saturday 8:00 AM – 1:30 PM

Core Dental Epping is approximately a 10-minute walk from **Epping Station** and serves patients from Epping, South Morang, Mill Park, Lalor, Thomastown and Wollert.

Core Dental Epping is part of the Smile Solutions Group. For advanced gum disease requiring specialist periodontal care, referral to periodontists at the Collins Street Specialist Centre is available.