

Gum Disease Treatment at Core Dental Southbank

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Description:

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Details:

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Don't Ignore Your Gums — They're the Foundation of Your Smile

When people think about dental health, they tend to focus on their teeth — cavities, whitening, straightening. But the gums and bone that support those teeth are just as important, and gum disease is one of the most common chronic health conditions in Australia.

The tricky part? Early gum disease often has no symptoms. No pain, no obvious problems. By the time you notice something — bleeding when you brush, receding gums, loose teeth — the disease may have been progressing for months or years.

At Core Dental Southbank, gum health assessment is a standard part of every dental examination. We catch problems early, provide effective treatment, and when advanced gum disease requires specialist care, we refer directly to periodontists at the Collins Street Specialist Centre at the Manchester Unity Building.

If you've noticed bleeding when you brush, persistent bad breath, or gums that seem to be pulling away from your teeth, don't ignore it. These are signs that something needs attention — and the sooner it's addressed, the better the outcome.

What Is Gum Disease?

Gum disease — known clinically as periodontal disease — is an infection of the tissues that surround and support your teeth. It's caused by bacteria in dental plaque, the sticky film that constantly forms on your teeth.

When plaque isn't removed through regular brushing and flossing, it hardens into tartar (calculus), which can only be removed by a dental professional. The bacteria in plaque and tartar produce toxins that irritate the gums, triggering an inflammatory response. Over time, this inflammation damages the gum tissue and, in more advanced stages, the underlying bone.

Gingivitis: The Early Stage

Gingivitis is the earliest form of gum disease. It affects only the gum tissue — the bone and ligaments that anchor your teeth to the jaw are not yet involved.

****Signs of gingivitis include:****

- Red, swollen or puffy gums (healthy gums are pink and firm) - Gums that bleed when you brush or floss - Bad breath (halitosis) - Gums that feel tender to the touch

****The good news:**** Gingivitis is fully reversible. With professional cleaning and improved home care, the inflammation resolves, and the gums return to health. No permanent damage occurs at this stage.

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

Periodontitis: The Advanced Stage

Periodontitis occurs when the infection spreads below the gumline, affecting the deeper structures — the periodontal ligament and the alveolar bone that holds your teeth in place.

In periodontitis, the gums pull away from the teeth, forming pockets that trap more bacteria. As the disease progresses, these pockets deepen, more bone is destroyed, and teeth gradually lose their support.

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

- Persistent bad breath or bad taste - Gums that have pulled away from the teeth (recession) - Deep pockets between teeth and gums - Loose or shifting teeth - Changes in how your teeth fit together when you bite - Pus between the teeth and gums - Pain when chewing

****The critical difference:**** Unlike gingivitis, the bone loss caused by periodontitis is not reversible. Treatment can stop the disease from progressing and preserve remaining bone, but bone that's already been lost doesn't grow back on its own (though some regenerative procedures may help in certain cases).

Risk Factors for Gum Disease

While plaque buildup is the primary cause, several factors increase your risk of developing gum disease or make existing disease worse:

- ****Poor oral hygiene**** — Inconsistent brushing and flossing allows plaque to accumulate and harden into tartar - ****Smoking and tobacco use**** — One of the most significant risk factors. Smoking impairs blood flow to the gums, reduces the body's ability to fight infection, and slows healing after treatment - ****Diabetes**** — People with diabetes (particularly poorly controlled diabetes) are at significantly higher risk of gum disease, and gum disease can make blood sugar harder to control — a two-way relationship - ****Genetics**** — Some people are genetically predisposed to gum disease, even with good oral hygiene - ****Hormonal changes**** — Pregnancy, menstruation and menopause can make gums more sensitive and susceptible to inflammation - ****Medications**** — Some medications reduce saliva flow (dry mouth) or cause gum overgrowth, both of which increase gum disease risk - ****Stress**** — Chronic stress weakens the immune response and is associated with increased risk of periodontal disease - ****Age**** — Gum disease prevalence increases with age, though it is not an inevitable part of ageing - ****Crowded or misaligned teeth**** — Teeth that are difficult to clean effectively are more prone to plaque accumulation

Gum Disease and Your Overall Health

Research has established links between periodontal disease and several systemic health conditions:

- ****Cardiovascular disease**** — Gum disease is associated with an increased risk of heart disease and stroke, possibly through the chronic inflammatory burden and bacterial entry into the bloodstream -

****Diabetes**** — The relationship is bidirectional — gum disease can worsen blood sugar control, and diabetes increases gum disease risk - ****Respiratory infections**** — Bacteria from the mouth can be aspirated into the lungs, particularly in older adults or those with compromised immunity - ****Adverse pregnancy outcomes**** — Some research suggests a link between periodontal disease and preterm birth or low birth weight - ****Rheumatoid arthritis**** — Emerging evidence suggests a connection between the inflammatory processes in gum disease and rheumatoid arthritis

While gum disease alone doesn't cause these conditions, managing periodontal health is an important part of overall health maintenance. Your dentist isn't just looking after your teeth — they're contributing to your whole-body health.

This is one of the reasons we take gum health assessment so seriously at Core Dental Southbank. A few minutes of periodontal screening at each check-up can identify problems that have implications well beyond the mouth.

How We Diagnose Gum Disease

At Core Dental Southbank, gum health assessment is included in every routine examination. Your dentist uses several methods to evaluate the health of your gums and supporting structures:

Visual Examination

Your dentist examines the colour, texture and shape of your gums, looking for signs of inflammation, recession, swelling or other abnormalities.

Periodontal Probing

A small, calibrated instrument called a periodontal probe is gently inserted between the tooth and gum to measure pocket depth. Measurements are recorded at multiple points around each tooth:

- ****1–3mm**** — Normal, healthy pocket depth - ****4mm**** — Early pocketing; may indicate gingivitis or early periodontitis - ****5mm or greater**** — Deeper pockets indicative of periodontitis

Bleeding on Probing

Whether the gums bleed during probing is a key indicator of active inflammation. Bleeding on probing suggests the tissue is inflamed and the disease is active.

Digital X-rays

X-rays reveal the level of bone around the teeth. In periodontitis, the bone loss pattern helps your dentist assess the severity and distribution of the disease.

Assessment of Tooth Mobility

Your dentist may check whether any teeth are loose or mobile, which can indicate significant bone loss.

Gum Disease Treatment at Core Dental Southbank

Treatment depends on the stage and severity of the disease.

Treatment for Gingivitis

Gingivitis is treated with:

- ****Professional cleaning (scale and clean)**** — Your dentist or hygienist removes plaque and tartar deposits from above and below the gumline using ultrasonic and hand instruments - ****Oral hygiene**

instruction** — Personalised guidance on brushing technique, flossing, interdental cleaning, and any recommended products (such as antibacterial mouthwash) - **Follow-up** — A review appointment to check that the inflammation has resolved with improved home care

Most cases of gingivitis resolve completely with professional cleaning and consistent daily oral hygiene. The key is acting early — gingivitis that's caught and treated is a minor inconvenience, while gingivitis that's ignored can progress to irreversible bone loss.

Treatment for Periodontitis

Periodontitis requires more intensive treatment:

Scaling and Root Planing (Deep Cleaning)

This is the primary non-surgical treatment for periodontitis. It involves:

- **Scaling** — Removing plaque and tartar from above and below the gumline, including from the surfaces of tooth roots within the periodontal pockets
- **Root planing** — Smoothing the root surfaces to remove bacterial toxins and create a clean surface that allows the gums to reattach to the teeth

Scaling and root planing is typically performed under local anaesthesia for comfort, and may be completed in one or more appointments depending on the extent of the disease.

After treatment, the gums should begin to heal, pockets should reduce in depth, and bleeding should decrease. Improved home care is essential to maintaining the results.

Antimicrobial Therapy

In some cases, your dentist may recommend:

- **Antibacterial mouthwash** (such as chlorhexidine) for a prescribed period
- **Local antibiotic application** — Antimicrobial agents placed directly into periodontal pockets
- **Systemic antibiotics** — In cases of aggressive periodontitis or infection that isn't responding to local treatment

Ongoing Maintenance

Periodontitis is a chronic condition. Even after successful treatment, patients with a history of periodontitis require more frequent professional maintenance — typically every three to four months rather than the standard six-monthly schedule. This prevents disease recurrence and catches any progression early.

When to See a Periodontist

Some cases of gum disease require specialist expertise. Your dentist at Core Dental Southbank may recommend referral to a periodontist at the **Collins Street Specialist Centre** if:

- Periodontitis is moderate to severe, with significant bone loss
- The disease is not responding adequately to non-surgical treatment
- Surgical intervention is needed (such as flap surgery, bone grafting or guided tissue regeneration)
- You have aggressive periodontitis (rapid progression, often in younger patients)
- Complex cases involving implant placement in areas of previous periodontal disease
- Gum recession is causing sensitivity or cosmetic concerns and may benefit from gum grafting

The referral pathway is direct and seamless. Your records, X-rays and periodontal charting are shared with the periodontist, who has full context before your first specialist appointment. The Collins Street Specialist Centre at the Manchester Unity Building is a short walk or tram ride from Southbank.

After specialist treatment, you return to Core Dental Southbank for ongoing maintenance and monitoring. Your general dentist and the periodontist work collaboratively to manage your long-term

gum health.

Preventing Gum Disease

Prevention is always better — and cheaper — than treatment. Here's how to protect your gums:

At Home

- **Brush twice daily** — Use a soft-bristled toothbrush (manual or electric) and fluoride toothpaste. Angle the bristles toward the gumline at 45 degrees to clean where the gum meets the tooth. - **Floss once daily** — Flossing removes plaque from between teeth where your toothbrush can't reach. If you find traditional floss difficult, try interdental brushes, floss picks or a water flosser. - **Don't skip the back teeth** — The molars at the back of the mouth are the most common sites for gum disease because they're harder to clean. - **Consider an antibacterial mouthwash** — Your dentist may recommend one if you're at higher risk. - **Don't smoke** — If you smoke, quitting is the single most impactful thing you can do for your gum health (and your health overall).

At the Dentist

- **Regular check-ups and cleans** — Every six months for most patients, or every three to four months if you have a history of gum disease - **Early intervention** — If your dentist identifies gingivitis, treating it promptly prevents progression to periodontitis - **Professional advice** — Your dentist can identify risk factors specific to you and provide targeted prevention strategies

Gum Disease and Dental Implants

If you're considering dental implants (or already have them), gum health is critical. The same bacterial processes that cause periodontal disease around natural teeth can cause a condition called **peri-implantitis** around dental implants — leading to bone loss and potential implant failure.

Patients with a history of periodontal disease are at higher risk of peri-implantitis and require diligent home care and more frequent professional maintenance to protect their implant investment.

If you have gum disease and are considering implants, your dentist at Core Dental Southbank will ensure your periodontal health is stabilised before implant treatment begins, and will work with the specialist team to develop a maintenance plan that protects both your natural teeth and your implants.

Book a Gum Health Assessment

If you've noticed bleeding gums, persistent bad breath, gum recession, or it's been a while since your last dental check-up, don't wait. Early detection and treatment of gum disease can save your teeth and protect your overall health.

Core Dental Southbank 55 City Road, Southbank VIC 3006

Phone: (03) 8547 0780 **National Bookings:** 13 13 16 **Email:** southbank@coredental.com.au

Hours: Monday – Friday: 8:00 am – 6:00 pm Saturday: 8:00 am – 1:30 pm Sunday: Closed

Call us to book a comprehensive examination, including a thorough gum health assessment. Our dentists will identify any issues, explain your treatment options clearly, and help you get your gum health on track.

Gum disease is common, treatable, and preventable — but only if you take the first step. Book your appointment today.

