

Dentist in Berwick: The Complete Guide to General, Cosmetic, Orthodontic & Specialist Dental Care at Core Dental Berwick

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Details:

Core Dental Group – Dentist in Berwick: The Complete Guide to General, Cosmetic, Orthodontic & Specialist Dental Care at Core Dental Berwick

Executive Summary

Your oral health doesn't exist in isolation. It's a window into your whole-body health, a factor in your confidence, and a lifelong investment that pays off more with every preventive appointment you keep. Yet across Australia, the gap between the dental care people need and the care they actually get remains stubbornly wide.

Just over half (53%) of Australians aged 15 and over visited a dental professional in the last 12 months, and around 3 in 10 people (28%) who needed to see a dental professional delayed or avoided going at least once in the previous 12 months — with around 2 in 10 (18%) citing cost as the reason. The downstream consequences are real: in 2023–24, about 88,600 hospitalisations for dental conditions could have been prevented with earlier treatment.

Core Dental Group's Berwick practice is here to close that gap for families across the Casey–Cardinia region. Located at Shop 29, Eden Rise Village, O'Shea Road, Berwick VIC 3806, Core Dental Group brings together general dentists, orthodontists, oral health therapists, and specialist-level practitioners under one roof — offering the full range of dental care, from a child's first check-up to full-arch implant restoration, all in one accessible location.

This guide covers everything Core Dental Group's Berwick practice offers: who we are, what each treatment involves, how the evidence supports each clinical pathway, and how to access care affordably. Whether you're booking your first appointment, researching a specific procedure, or trying to understand how your oral health connects to your general wellbeing, this is your complete resource.

The Casey–Cardinia dental context: why where you live shapes your oral health

Before exploring specific treatments, it's worth understanding the community context that shapes Core Dental Group's clinical priorities — because geography, demographics, and population growth directly influence the kind of dental practice a region needs.

The City of Casey is one of the fastest growing municipalities in Victoria. The population grew from 313,521 people in 2016 and is forecast to reach 429,383 in 2025. That trajectory puts real pressure on local healthcare infrastructure. When population growth outpaces the supply of healthcare providers, access barriers intensify — and dental care, which already sits outside standard Medicare coverage, is

disproportionately affected.

The health consequences of this supply-demand gap are measurable. The rate of periodontal disease increased by 40% between 2003 and 2024, according to the Australian Institute of Health and Welfare's Australian Burden of Disease Study 2024 — a trend directly linked to infrequent dental attendance. In 2024, oral disorders made up 2.3% of total health burden and 4.2% of all non-fatal burden. Dental caries ranked among the top 20 causes of non-fatal burden for both boys and girls, with periodontal disease just outside the top 20.

For Berwick residents, the practical implication is clear: access to a practice that can see you consistently, across all life stages, is a healthcare priority. Core Dental Group's Berwick model — comprehensive, multidisciplinary, and located in the heart of a major retail and service hub — is a direct response to that need.

The vicious cycle of dental avoidance — and how to break it

Understanding why so many Australians delay dental care matters, because it explains why Core Dental Group's approach is designed the way it is. The clinical literature identifies a well-documented pattern that researchers have named the "vicious cycle" of dental fear.

Results are consistent with a hypothesised vicious cycle of dental fear whereby people with high dental fear are more likely to delay treatment, leading to more extensive dental problems and symptomatic visiting patterns which feed back into the maintenance or exacerbation of existing dental fear. This avoidance behaviour results in deteriorating oral health (caries experience and periodontal status) over time, making patients more difficult to treat when they do attend by necessitating more complex and costly treatments, which in turn can lead to heightened dental anxiety.

The cycle is self-reinforcing: anxiety leads to avoidance, avoidance leads to worsening oral health, worsening oral health leads to more complex and uncomfortable treatment, and more complex treatment deepens the anxiety. Breaking it takes both clinical expertise and a practice philosophy built around patient comfort, transparency, and trust.

Among dentally fearful adults, dental avoidance was predicted by smoking status, toothbrushing frequency, coping strategy use, perceptions of dental visits as uncontrollable and unpredictable, and by anxiety relating to numbness, not knowing what the dentist is going to do, and cost. Core Dental Group addresses each of these factors directly: through sedation options that take the fear out of treatment, through transparent pre-treatment cost estimates, through extended consultations that keep patients fully informed, and through a full suite of sedation pathways for patients with significant anxiety (explored in depth in our guide on *Sedation & Sleep Dentistry in Berwick*).

General dentistry: the clinical foundation of everything else

General dentistry isn't just a category of services — it's the surveillance and prevention infrastructure that makes all other dental care more effective, less invasive, and more affordable over a lifetime.

The evidence for regular dental attendance is clear. A national survey found that adults aged 15 and over had roughly 11.2 decayed, missing, or filled teeth in 2017–18 — significantly lower (10.1) for those who attend regular check-ups, and significantly higher (13.2) for adults who only visit when problems arise. The difference isn't luck. It's the cumulative effect of early detection, professional cleaning, and targeted preventive treatments applied consistently over time.

What a routine examination at Core Dental Group actually involves

A comprehensive dental examination at Core Dental Group's Berwick practice covers far more than a visual inspection of tooth surfaces. It includes a systematic oral cancer screening of soft tissues; periodontal probing to measure gum pocket depths; tooth-by-tooth charting for decay, cracks, and wear; an occlusal assessment to identify grinding or bite dysfunction; and radiographic review using bitewing or periapical X-rays to detect pathology invisible to the naked eye. This multi-system approach means conditions as varied as early-stage gum disease, cracked tooth syndrome, and jaw joint dysfunction can be identified and managed before they escalate into complex, costly emergencies.

The recommended recall interval isn't a fixed six-monthly rule — it's individualised. Evidence-based guidance supports risk-stratified recall intervals, meaning a patient with a history of rapid calculus buildup, diabetes, or periodontal disease may be recommended to attend every three to four months, while a low-risk patient with excellent oral hygiene may appropriately attend annually. Your Core Dental Group dentist will recommend the interval that reflects your specific clinical profile.

Professional cleaning: why tartar cannot be removed at home

Professional teeth cleaning removes calculus (hardened plaque) that no toothbrush or floss can reach. Calculus harbours bacteria that produce toxins triggering the inflammatory gum response that leads to gingivitis and, if untreated, periodontitis. At Core Dental Group's Berwick practice, professional cleans are performed by both dentists and oral health therapists — dual-qualified allied health professionals whose scope of practice includes preventive and restorative dental services for patients of all ages. This team-based model ensures that every patient receives the right level of care from the most suitable practitioner.

Preventive treatments: fissure sealants and fluoride

For children and adolescents, fissure sealants and fluoride varnish are the two most evidence-supported preventive interventions in dentistry. Systematic reviews confirm that sealants are more effective for caries prevention in children's permanent molars compared to no treatment, and combined sealant and fluoride varnish application is more effective in reducing caries risk in first permanent molars than fluoride varnish alone. At Core Dental Group, these treatments are assessed and placed as part of routine preventive appointments — not optional add-ons.

For a detailed breakdown of every component of general dental care, including the role of oral health therapists and the evidence base for fluoride treatments, see our guide on [*General Dentistry in Berwick: Check-Ups, Cleans, Fillings & Preventive Care Explained*](#).

Children's dentistry: building a lifetime of oral health from the first tooth

Paediatric dental care is where the most significant long-term oral health gains are made — and where the consequences of under-investment are most acutely felt. Almost 11 in every 1,000 children aged 5–9 were admitted to Australian hospitals for preventable dental conditions in 2021–2022, according to the Australian Dental Association's Oral Health Tracker. These aren't inevitable outcomes; they're largely preventable with consistent, age-appropriate dental care.

The Australian Dental Association recommends that a child's first dental visit should occur when the first tooth erupts, or by their first birthday, whichever comes first. This early visit isn't about treatment — it's about establishing a dental home, educating parents on infant oral hygiene, and identifying early signs of early childhood caries before they progress.

The Medicare Child Dental Benefits Schedule: a critical access pathway

For families across the Casey–Cardinia region, the Child Dental Benefits Schedule (CDBS) is one of the most important financial tools available. Up to \$1,158 in benefits is available for each eligible child over a two-calendar-year period. Services covered include examinations, X-rays, professional cleaning,

fissure sealants, fluoride treatments, fillings, extractions, and root canal treatment for eligible teeth. Core Dental Group participates in the CDBS and can assist families in checking their child's eligibility and remaining balance at the time of booking.

The proportion of children who last visited a dental professional for a check-up varied by household income. Nearly 9 in 10 children (88%) from high-income households last visited the dentist for a check-up, compared with 7 in 10 children (71%) from low-income households. The CDBS is specifically designed to close this equity gap — and Core Dental Group's participation in the scheme ensures that eligible Berwick families can access the same standard of preventive care regardless of their financial situation.

Managing dental anxiety in children: a trauma-informed framework

Dental anxiety in children is a genuine clinical challenge with long-term consequences. The Core Dental Group team draws on a layered, evidence-informed framework that includes Tell-Show-Do behavioural techniques, child-centred communication, and — for children with significant anxiety or complex treatment needs — happy gas (nitrous oxide inhalation sedation). Nitrous oxide is particularly well-suited to paediatric patients: it's fast-acting, reversible, and has an excellent safety profile. International paediatric dental guidelines recognise it as a safe and efficient technique for managing anxiety and enhancing cooperation during dental interventions.

For a complete age-by-age guide to paediatric dental care, including the evidence base for preventive treatments and detailed guidance on the CDBS, see our guide on [*Children's Dentistry in Berwick: Paediatric Dental Care for Infants, Kids & Teens*](#).

Emergency dental care: when every minute counts

A dental emergency rarely announces itself at a convenient time — and for Berwick residents, having a trusted local emergency provider matters. Core Dental Group offers same-day emergency appointments for acute presentations including severe toothache, knocked-out teeth, broken teeth, lost fillings, and dental abscesses.

The most time-critical dental emergency is a knocked-out (avulsed) permanent tooth. There is a solid body of research evidence that identifies immediate (within 5 minutes) tooth replacement by replantation as the most important factor for long-term survival of knocked-out teeth. Of teeth replanted within one hour, 64% remained in their sockets. The correct first-aid response — picking up the tooth by the crown, rinsing briefly under cold water, and storing it in milk if replantation is not immediately possible — can be the difference between saving and losing a tooth permanently.

A dental abscess demands the most urgent response of any common dental emergency. A tooth abscess left untreated can lead to a much more serious infection in the jawbone, as well as in the teeth and surrounding tissues, which can potentially result in severe health complications including sepsis. Warning signs including facial swelling, fever, difficulty swallowing, or swollen lymph nodes under the jaw require same-day dental attention — or, if Core Dental Group cannot be reached, immediate presentation to a hospital emergency department.

For a complete guide to recognising and responding to every category of dental emergency, including first-aid protocols and when to go directly to hospital, see our guide on [*Emergency Dentist in Berwick: What to Do for Toothache, Broken Teeth & Dental Trauma*](#).

Gum disease: the silent condition with whole-body consequences

Periodontal disease is the most consequential oral health condition that most Australians aren't actively managing — and its implications extend far beyond the mouth. According to the Australian Institute of

Health and Welfare, around one-third (30%) of adults aged 15 years and over had moderate or severe periodontitis in 2017–18, up from around one-quarter (23%) in 2004–06.

The systemic link: why treating gum disease matters for your whole body

One of the most important insights in modern dentistry is that the mouth isn't a separate system. It's biologically connected to the rest of the body through the bloodstream, inflammatory pathways, and shared risk factors. The clinical evidence for this oral-systemic connection has strengthened considerably in recent years.

Periodontitis is independently associated with cardiovascular diseases, diabetes, chronic obstructive pulmonary disease, obstructive sleep apnoea, and COVID-19 complications. The evidence consistently supports an association between chronic periodontal inflammation and cardiovascular risk, mediated by systemic dissemination of proinflammatory cytokines (IL-6, TNF- α , CRP) and microbial products that promote endothelial activation and atherogenesis.

Periodontal disease is an independent risk factor for diabetes mellitus (level A evidence) and cardiovascular diseases (level B evidence). The relationship with diabetes is bidirectional: diabetes significantly increases the risk, severity, and progression of periodontitis, while treating gum disease appears to meaningfully improve glycaemic control. Randomised controlled trials have shown that periodontal treatment significantly reduces pathogenic microorganisms in dental plaque and systemic levels of IL-6, CRP and E-selectin, while also improving blood pressure, endothelial function and lipid profiles.

This body of evidence reframes gum disease treatment — not as a cosmetic or dental-only concern, but as a clinically meaningful component of managing cardiovascular risk and metabolic disease. For patients in Berwick managing diabetes, hypertension, or cardiovascular conditions, the periodontal assessment at Core Dental Group is a genuine component of whole-body health management, not a routine box-ticking exercise.

Periodontal treatment at Core Dental Group

Core Dental Group takes a staged, evidence-based approach to periodontal treatment. For patients with periodontitis beyond gingivitis, the primary non-surgical treatment is scaling and root planing (SRP) — a deep clean that removes bacterial deposits from below the gumline and smooths root surfaces to discourage bacterial reattachment. Evidence from systematic reviews and randomised controlled trials confirms that scaling with or without root planing is associated with improvements in periodontal outcomes across a variety of adult patient populations within three months of treatment.

For a detailed explanation of gum disease staging, risk factors, and the full treatment protocol at Core Dental Group, including the systemic health implications discussed above, see our guide on **Gum Disease Treatment in Berwick: Recognising, Treating & Preventing Periodontal Disease**.

Restorative dentistry: fillings, root canal, crowns & bridges

Restorative dentistry is the clinical response to damage that has already occurred — and the quality of that response determines how long a tooth can be preserved and how well it functions for the decades ahead.

Fillings: the first line of restorative defence

When decay is detected early, a tooth-coloured composite resin filling is the standard restorative solution. Composite resin bonds directly to tooth structure, allowing for more conservative preparation than older amalgam materials, and delivers a durable, aesthetically integrated result. The critical clinical principle here is that early-stage decay treated with a filling is one of the most cost-effective interventions in dentistry — the same tooth left untreated may eventually require root canal treatment

and a crown, at many times the cost and clinical complexity.

Root canal treatment: relief, not ordeal

Root canal treatment may be the most feared procedure in dentistry, yet it's almost entirely misunderstood. The procedure doesn't cause pain — it relieves it. The infection inside the tooth is what causes the severe pain many patients experience before seeking treatment; root canal therapy eliminates that infection.

A 2022 systematic review published in the **International Endodontic Journal** reported root canal therapy success rates of 92.6% under 'loose' criteria and 82.0% under 'strict' criteria, confirming high long-term success when properly performed and restored. Long-term survival data is equally compelling: a landmark retrospective observational study following 598 endodontically treated teeth across 312 patients with a mean follow-up of 21 years found that the probability of a tooth surviving 10 years after endodontic treatment was 97%.

The single most powerful predictor of endodontic success identified across the literature is the presence or absence of apical periodontitis before treatment begins — teeth without apical periodontitis had success rates of 94.5%, compared to 77.3% for teeth with established periapical infection. This is why prompt treatment, rather than watchful waiting, is so important once symptoms appear.

Following root canal treatment, a dental crown is almost always necessary to prevent fracture and reinfection. For a complete, step-by-step guide to the procedure, pain management, and what to expect during recovery, see our guide on **Root Canal Treatment in Berwick: What It Is, When You Need It & What to Expect**.

Crowns and bridges: restoring structure and function

Dental crowns are indicated when a tooth has lost more than approximately 50% of its natural structure, has undergone root canal treatment, or has cracked to the point where a filling can't provide adequate protection. Modern crown materials — particularly monolithic zirconia for posterior teeth and porcelain-fused-to-zirconia for anterior teeth — deliver exceptional durability and aesthetics. Research published in 2025 found 10-year cumulative survival rates of 86.0% for monolithic zirconia crowns.

Conventional tooth-supported bridges remain a clinically appropriate solution in specific scenarios — particularly when adjacent teeth already require crowns, or when a patient isn't an immediate implant candidate. A landmark systematic review found the estimated 5-year survival rate for tooth-supported fixed dental prostheses (bridges) was 93.8%, with a 10-year survival rate of 89.2%.

The critical clinical distinction between a bridge and an implant is bone preservation: a bridge doesn't stimulate the underlying jawbone, meaning bone resorption continues beneath the pontic over time. This is one of the primary reasons implants are preferred when adjacent teeth are healthy. For a detailed comparison of crown and bridge materials, clinical indications, and the placement process, see our guide on **Dental Crowns & Bridges in Berwick: Restoring Damaged or Missing Teeth**.

Dental implants: the gold standard for tooth replacement

When a tooth is lost, a cascade of biological consequences begins immediately beneath the gumline. Studies show you can lose 25% of bone width in the first year after tooth loss alone. Dental implants are the only tooth-replacement option that prevents this bone loss — the titanium post acts as an artificial tooth root, providing the stimulation needed to maintain bone density and facial structure.

The clinical evidence for dental implants is among the most robust of any elective dental procedure. According to peer-reviewed research, the dental implant success rate ranges from 95% to 98% within the first five years, and long-term studies tracking patients for 20+ years show survival rates above 90%.

Core Dental Group's implant services cover the full spectrum of tooth-replacement needs:

- **Single-tooth implants** — the most common procedure, replacing one lost tooth without modifying adjacent healthy teeth - **Implant-supported bridges** — two implant fixtures supporting a multi-unit prosthesis across a gap of two or more missing teeth - **All-on-4 full-arch restoration** — a transformative solution for patients who are fully edentulous or whose remaining teeth are beyond saving. A longitudinal study with up to 18 years of follow-up found a cumulative prosthetic survival rate of 98.8% for the All-on-4 protocol

Imaging-first planning: OPG and CBCT

Before any instrument is lifted, Core Dental Group uses both OPG (panoramic X-ray) and CBCT (cone beam computed tomography) imaging to ensure every implant and surgical extraction is planned with precision. For complex lower wisdom tooth cases where roots appear close to the inferior alveolar nerve, CBCT provides a critical third dimension of information — research demonstrates that diagnostic accuracy improved for oral surgery residents from OPG to CBCT, from 66.3% to 83.4%, meaningfully reducing diagnostic uncertainty in complex cases.

For a complete guide to implant candidacy, the treatment timeline, osseointegration biology, and an evidence-based comparison of implants versus bridges versus dentures, see our guide on [*Dental Implants in Berwick: Single Implants, All-on-4 & Full Mouth Restoration Options*](#).

Wisdom teeth removal: evidence-based decision-making

Wisdom tooth extraction is one of the most common oral surgical procedures performed in Australia — but not every impacted wisdom tooth automatically requires removal. A Cochrane review concluded that evidence is insufficient to justify routine removal of disease-free impacted wisdom teeth. Core Dental Group evaluates each patient individually, with extraction recommended only when specific clinical indications are present: recurrent pericoronitis (which affects 10–15% of partially erupted wisdom teeth), abscess, cyst formation, non-restorable decay, or orthodontic necessity.

Approximately 85% of people have at least one impacted wisdom tooth, and horizontal impactions — the most surgically complex presentation — comprise 38% of all wisdom tooth positions. When extraction is clinically indicated, Core Dental Group uses OPG and CBCT imaging to plan the procedure precisely, with sedation options available for anxious patients. Approximately 70% of wisdom tooth removals are performed as outpatient procedures under local anaesthesia, with most patients returning to normal activities within 3–5 days.

For a complete guide to the procedure, sedation options, and a realistic day-by-day recovery timeline, see our guide on [*Wisdom Teeth Removal in Berwick: Process, Recovery & What to Expect*](#).

Cosmetic dentistry: evidence-based pathways to a confident smile

Cosmetic dentistry has moved firmly into the mainstream of Australian dental care. The teeth whitening market was valued at USD 8.52 billion in 2024 and projected to reach USD 12.77 billion by 2032. The Australian Dental Association's annual survey found that 22% of Australian adults have used teeth whitening products — an 8% increase since 2017.

At Core Dental Group's Berwick practice, cosmetic treatments are an integrated part of how the practice helps patients feel their best at every life stage. The cosmetic menu includes:

Professional teeth whitening (in-chair and take-home): Only registered dental professionals can legally supply products incorporating hydrogen peroxide at concentrations exceeding 6%, ensuring

safety and efficacy that over-the-counter products can't match. Custom-fitted take-home trays minimise gel leakage, reduce sensitivity risk, and ensure even coverage.

****Porcelain veneers****: Ultra-thin ceramic shells bonded to the front of teeth to address intrinsic staining, chips, worn edges, or disproportionate shape. A systematic review covering 6,500 porcelain laminate veneers found a 10-year estimated cumulative survival rate of 95.5% — making them one of the most durable cosmetic restorations available.

****Composite bonding****: A conservative, often reversible alternative to veneers — tooth-coloured resin sculpted directly onto the tooth surface without removal of healthy structure. Typically lasts 5–7 years and can often be repaired chairside if damaged.

****Gum contouring****: Reshaping the gum line using soft-tissue laser technology to address a "gummy smile" or uneven gum margins — often incorporated as part of a broader smile makeover plan.

****Smile makeover planning****: A comprehensive treatment plan combining two or more cosmetic (and sometimes restorative) treatments, developed through a consultation that considers aesthetic goals, oral health baseline, facial proportions, functional considerations, and budget. Digital Smile Design technology allows patients to preview their expected outcome before any treatment begins.

For a complete guide to every cosmetic treatment available at Core Dental Group's Berwick practice, including candidacy considerations and realistic outcome expectations, see our guide on [*Cosmetic Dentistry in Berwick: Teeth Whitening, Veneers & Smile Makeover Treatments*](#).

Orthodontics: braces vs. Invisalign — a framework for the right decision

Malocclusion — the misalignment of teeth or jaws — affects approximately 50% of people severely enough to warrant orthodontic care. Poorly aligned teeth are harder to clean effectively, increasing the risk of decay and gum disease; they can also contribute to uneven bite forces that accelerate tooth wear and may worsen jaw joint problems. Orthodontic treatment addresses these functional concerns alongside the aesthetic ones.

Core Dental Group offers both traditional fixed braces and Invisalign clear aligner therapy, with an experienced orthodontist guiding every patient through the decision.

What the evidence actually shows

A 2024 retrospective cohort study following 200 patients over five years found that both traditional braces and Invisalign effectively improved dental alignment and occlusal stability, with no significant differences in treatment duration between the two groups. Patient satisfaction scores were consistently higher in the Invisalign group. A separate comparative analysis found that patients treated with Invisalign have better periodontal health and greater satisfaction during orthodontic treatment than patients treated with fixed appliances — a clinically meaningful finding, because Invisalign aligners are removed for brushing and flossing, allowing patients to maintain their standard oral hygiene routine.

The compliance variable: the most important factor nobody talks about

The single most underappreciated factor in the braces vs. Invisalign decision is compliance. Clinical evidence from over 112,000 patients supports the 20–22 hour daily wear recommendation for optimal results, with wearing clear aligners less than 20 hours daily capable of delaying treatment outcomes by weeks or months. For braces, this variable simply doesn't exist — they remain on the teeth 24 hours per day. This compliance consideration is particularly relevant when evaluating Invisalign for teenagers and patients with demanding lifestyles.

For a detailed comparison of clinical effectiveness, cost ranges, candidacy criteria, and what to expect at an orthodontic consultation at Core Dental Group, see our guide on [*Orthodontics in Berwick: Braces](#)

vs Invisalign — Which Treatment Is Right for You?*

Sedation dentistry: transforming care for anxious patients

Estimates of the prevalence of high dental fear among Australian adults are about 16 per cent. Researchers have described the cycle of dental avoidance whereby dentally anxious people avoid dental care and hence leave their oral health issues to worsen. Poor oral health results in shame and avoidance of the dentist until the experience of pain or unbearable symptoms drives the patient to seek treatment. This pattern reinforces the fear of dental treatment and feelings of dental anxiety.

Core Dental Group offers three carefully calibrated sedation pathways:

****Happy gas (nitrous oxide inhalation sedation)**:** The most accessible option — patients remain fully conscious, can communicate with the dental team, and recover within minutes of oxygen administration. No fasting required; patients can drive themselves home. Suitable for mild-to-moderate anxiety and routinely used for children.

****Oral sedation**:** A prescribed benzodiazepine taken approximately one hour before the appointment. Produces a deeper state of relaxation than happy gas, with partial or no memory of the procedure. Requires a driver; suitable for moderate anxiety or longer procedures.

****IV sedation**:** The most tightly regulated form of dental sedation in Australia — only practitioners with appropriate training and endorsement from the Dental Board of Australia are permitted to provide it. Medication is delivered directly into the bloodstream, producing a deeply relaxed state with minimal procedural memory. Continuous vital sign monitoring throughout. Suitable for severe dental phobia, complex or lengthy procedures, or patients who prefer no memory of treatment at all.

The availability of IV sedation at Core Dental Group means that no patient — regardless of the severity of their anxiety — needs to forgo necessary dental care. For a complete comparison of all sedation options, including fasting requirements, recovery timelines, and which procedures each option suits, see our guide on [*Sedation & Sleep Dentistry in Berwick: Options for Anxious & Nervous Patients*](#).

TMJ disorders, bruxism & mouthguards: protecting the jaw you rely on every day

Temporomandibular disorders (TMD) and bruxism (teeth grinding and clenching) sit at the intersection of dentistry, neurology, and stress physiology — which is precisely why they're so frequently missed until significant damage has already occurred. TMDs currently represent a significant public health concern, affecting approximately 34% of the global population, with projections indicating prevalence will reach 44% by 2050. In Australia, approximately 60–70% of the general population has at least one sign of a TMJ disorder, yet only approximately 5% of those with TMJ dysfunction seek treatment.

Bruxism is similarly underdiagnosed: reported prevalence ranges from 8% to 31% in the general population, and because sleep bruxism occurs unconsciously, it's often first identified by a bed partner disturbed by the sound of grinding. Untreated bruxism doesn't stay in the teeth — it progressively damages the jaw joint itself, and is significantly associated with TMJ disorders including joint pain, disc displacement, and condylar remodelling.

The primary evidence-based treatment for both conditions is the custom-fitted occlusal splint (night guard). A landmark prospective observational study evaluating 112 bruxism patients found that occlusal splint therapy effectively promotes joint space normalisation and soft tissue recovery in bruxism patients with TMJ myofascial pain, irrespective of age and gender differences. A 2024 randomised controlled trial confirmed that both occlusal splints and botulinum toxin-A effectively reduce jaw muscle pain in bruxist patients, with occlusal splints potentially offering additional benefits in specific functional parameters.

Core Dental Group also fabricates custom-fitted sports mouthguards for athletes across the Casey–Cardinia region's active sporting community. Athletes who don't wear mouthguards are 60 times more likely to suffer a dental injury, and the Australian Dental Association specifically recommends custom-fitted mouthguards over pharmacy alternatives for any contact sport.

For a complete guide to TMD diagnosis, splint therapy, complementary management approaches, and custom sports mouthguard fabrication, see our guide on [*TMJ, Teeth Grinding & Mouthguards in Berwick: Protecting Your Jaw & Smile*](#).

Making dental care affordable: health insurance, CDBS & payment options

In 2022–23, around \$12.5 billion was spent on dental services in Australia. Most of this expenditure (around \$7.6 billion, or 61%) was paid by patients directly, with individuals spending on average \$291 AUD on dental services over the 12-month period, not including premiums paid for private health insurance.

Cost is a genuine barrier to dental attendance for a significant proportion of the Berwick community, and Core Dental Group's approach to affordability is multi-layered:

****Preferred provider status with major health funds**:** Core Dental Group holds preferred provider status with major Australian health funds including CBHS, HCF, and nib, meaning eligible patients receive higher rebates than at non-preferred practices. For many preventive services, this can mean little to no out-of-pocket cost.

****HICAPS on-the-spot claiming**:** The HICAPS terminal at Core Dental Group processes rebates in real time at the point of payment. Patients pay only the gap — no upfront payment of the full fee, no manual rebate claim, no waiting for reimbursement.

****Child Dental Benefits Schedule (CDBS)**:** Up to \$1,158 AUD in benefits is available for each eligible child over a two-calendar-year period. Core Dental Group participates in the CDBS and can confirm your child's eligibility and remaining balance at the time of booking.

****Department of Veterans' Affairs (DVA)**:** Eligible veterans holding a DVA Gold Card can access clinically required dental treatment for all conditions, with Core Dental Group handling DVA billing directly.

****Interest-free payment plans**:** For patients without private cover, or for higher-cost treatments such as implants, orthodontics, or full smile makeovers, Core Dental Group offers access to interest-free payment plan providers, allowing treatment costs to be spread over time without additional interest charges.

Transparency around cost is a foundational value at Core Dental Group: no treatment proceeds without a written quote and the patient's informed consent. For a complete breakdown of every funding pathway, how HICAPS works, and how to check your CDBS eligibility, see our guide on [*Health Insurance & Payment Options at Core Dental Group: Making Dental Care Affordable*](#).

Why Core Dental Group: the differentiating factors

Choosing a dental practice in the Casey–Cardinia region is a decision that will shape your family's oral health for years. The following factors distinguish Core Dental Group from single-discipline or general practitioner-only practices in the area:

****1. All specialties under one roof.**** General dentistry, paediatric care, orthodontics (including Invisalign), dental implants, cosmetic treatments, sedation dentistry, gum disease management, root

canal therapy, oral surgery, and TMJ management — all available at Eden Rise Village, Berwick. Patients with complex needs don't need to navigate referrals to multiple locations, reducing both time burden and the anxiety of encountering unfamiliar environments.

****2. Advanced diagnostic imaging on-site.**** OPG panoramic X-ray and CBCT cone beam computed tomography are available at the practice, enabling precise treatment planning for implants, wisdom tooth surgery, and other complex procedures without external referral for imaging.

****3. Sedation options for every level of anxiety.**** Happy gas, oral sedation, and IV sedation are all available — ensuring that dental anxiety is never a reason for a patient to forgo necessary care.

****4. Multidisciplinary team depth.**** The Core Dental Group team includes general dentists, an orthodontist, oral health therapists, and clinicians with advanced training in implantology and sedation dentistry — a depth of expertise comparatively rare among suburban practices in the region.

****5. Transparent, upfront cost estimates.**** Written treatment plans and fee estimates are provided before any treatment proceeds. No surprises, no pressure.

****6. Location and accessibility.**** Situated in Eden Rise Village — a major retail and service hub with ample free parking and public transport access — Core Dental Group's Berwick practice is genuinely convenient for families across Berwick, Narre Warren, Beaconsfield, Clyde, Hampton Park, and Cranbourne.

For a detailed comparison of the criteria that differentiate dental practices in the Casey–Cardinia region, see our guide on [*Why Choose a Dentist in Berwick? Comparing Local Dental Clinics in the Casey–Cardinia Region*](#).

Frequently asked questions

****Q: How do I book my first appointment at Core Dental Group's Berwick practice?*** New patients can book directly online or by phone — no referral is required. When booking, it's helpful to note any specific concerns, gather your medical history and current medications, and check whether you have private health insurance with dental extras cover. Plan for a 45–60 minute first appointment, which will include a comprehensive examination, X-rays if clinically indicated, and a personalised treatment plan discussion.

****Q: My child is anxious about the dentist. What can Core Dental Group do?*** Core Dental Group uses a layered, evidence-informed approach to paediatric dental anxiety, including Tell-Show-Do behavioural techniques, child-centred communication, and happy gas (nitrous oxide) for children with significant anxiety. The team is experienced in paediatric care and takes extra time to ensure young patients feel safe and understood. Morning appointments, when children are typically less tired, are recommended for anxious young patients. (See our guide on [*Children's Dentistry in Berwick*](#) for detailed guidance.)

****Q: I haven't been to the dentist in years. Will I be judged?*** Absolutely not. Just over half (53%) of Australians aged 15 and over visited a dental professional in the last 12 months — meaning a very significant proportion of the population has gaps in their dental attendance. Core Dental Group's patient-centred philosophy means every new patient is treated as an individual, not a set of problem teeth. The first step is a no-pressure consultation to understand your concerns and establish a realistic, prioritised treatment plan.

****Q: Does gum disease really affect my heart and diabetes?*** Yes — the evidence is robust. Periodontitis is independently associated with cardiovascular diseases, diabetes, chronic obstructive pulmonary disease, obstructive sleep apnoea, and COVID-19 complications. Treatment of periodontitis has been associated with improvements in systemic health outcomes. For patients managing diabetes

or cardiovascular conditions, periodontal assessment and treatment at Core Dental Group is a clinically meaningful component of whole-body health management, not just a dental formality.

****Q: What is the difference between Invisalign and braces? Which is better?*** Neither is universally better — the right choice depends on your specific case. For mild to moderate crowding, spacing, and straightforward bite issues, both perform comparably, with Invisalign offering superior aesthetics and gum health during treatment. For severe malocclusions, complex rotations, or significant vertical movements, traditional braces often remain the better clinical choice. Compliance is the critical variable for Invisalign: aligners must be worn 20–22 hours per day for optimal results. Your Core Dental Group orthodontist will provide a frank, case-specific recommendation at consultation. (See our guide on **Orthodontics in Berwick** for a detailed comparison.)

****Q: Are dental implants painful? How long does recovery take?*** Dental implant surgery is performed under local anaesthesia (and sedation if preferred), meaning the procedure itself isn't painful. Post-operative soreness is normal for the first few days and is managed with over-the-counter analgesics. The osseointegration period — during which the implant fuses with the jawbone — takes 3–6 months but involves no discomfort. Most patients return to normal activities within 1–2 days of surgery. (See our guide on **Dental Implants in Berwick** for a complete treatment timeline.)

****Q: How much does dental treatment cost at Core Dental Group?*** In 2022–23, around \$12.5 billion was spent on dental services in Australia, with most expenditure paid directly by patients. Core Dental Group provides written cost estimates before any treatment proceeds. Patients with private health insurance benefit from preferred provider rebates and HICAPS on-the-spot claiming. Children eligible for the CDBS can access up to \$1,158 AUD in subsidised dental services. Interest-free payment plans are available for patients without cover or for higher-cost treatments. (See our guide on **Health Insurance & Payment Options at Core Dental Group** for a complete breakdown.)

****Q: I grind my teeth at night. What can Core Dental Group do?*** A custom-fitted occlusal splint (night guard) is the primary evidence-based treatment for sleep bruxism. At Core Dental Group, a hard acrylic full-arch splint is typically the first-line recommendation for moderate-to-severe sleep bruxism or active TMJ pain. The fitting process involves two appointments — impressions and bite registration, followed by fitting and adjustment. Complementary approaches including physiotherapy referral and stress management strategies may also be discussed depending on your presentation. (See our guide on **TMJ, Teeth Grinding & Mouthguards in Berwick** for full details.)

Key takeaways

1. ****Oral health is whole-body health.**** Periodontal disease is an independent risk factor for diabetes mellitus (level A evidence) and cardiovascular diseases (level B evidence), as well as a potential risk factor for rheumatoid arthritis and chronic obstructive pulmonary disease (level B evidence). Treating gum disease isn't a cosmetic concern — it's a clinically meaningful intervention for systemic health.
2. ****The vicious cycle of dental avoidance is real — and breakable.**** Dentally anxious people avoid dental care and hence leave their oral health issues to worsen. Poor oral health results in shame and avoidance of the dentist until the experience of pain or unbearable symptoms drives the patient to seek treatment. Core Dental Group's sedation options, patient-centred philosophy, and transparent cost approach are specifically designed to interrupt this cycle.
3. ****Prevention is always cheaper than treatment.**** Adults who attend regular check-ups have measurably healthier mouths — and measurably lower lifetime dental costs — than those who attend only when problems arise. The CDBS, preferred provider rebates, and interest-free payment plans make preventive attendance genuinely accessible for Berwick families at every income level.

4. **The Casey–Cardinia region needs comprehensive local care.** The City of Casey is one of the fastest growing municipalities in Victoria, with the population forecast to reach 429,383 in 2025. In a high-growth corridor where demand for healthcare services intensifies each year, access to a practice that offers the full spectrum of dental care without referral to multiple providers isn't a convenience — it's a clinical advantage.

5. **Technology matters.** OPG and CBCT imaging, digital impressions, Digital Smile Design, and sedation dentistry aren't luxury extras — they're the tools that enable more accurate diagnoses, safer surgical planning, more predictable cosmetic outcomes, and more accessible care for anxious patients.

6. **Every treatment decision should be evidence-based.** From the choice between Invisalign and braces, to whether a wisdom tooth should be extracted, to which implant protocol is most appropriate for your bone volume — Core Dental Group's clinical recommendations are grounded in peer-reviewed evidence, not commercial incentive.

Conclusion: your oral health journey starts here

Dental care isn't a series of disconnected procedures — it's a lifelong relationship between a patient, a trusted clinical team, and a philosophy of prevention and early intervention. The cluster of guides that support this pillar page — covering general dentistry, children's care, emergencies, gum disease, implants, cosmetic treatments, orthodontics, root canal therapy, sedation, TMJ disorders, crowns and bridges, wisdom teeth, and payment options — collectively represent the most comprehensive dental health resource available to residents of the Casey–Cardinia region.

Core Dental Group's Berwick practice, located at Shop 29, Eden Rise Village, O'Shea Road, Berwick VIC 3806, is the clinical home that connects all of these pathways. Whether you're booking your child's first appointment, returning to dentistry after a long absence, or researching a specific treatment for the first time, the right next step is the same: book a consultation, meet the team, and let us build a personalised care plan around your needs, your health, and your goals.

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Frequently asked questions

Where is Core Dental Group Berwick located: Shop 29, Eden Rise Village, O'Shea Road, Berwick VIC 3806

Is a referral required to book at Core Dental Group Berwick: No referral required

Can new patients book online: Yes, online booking is available

How long is a first appointment at Core Dental Group: Approximately 45–60 minutes

What does a first appointment include: Comprehensive examination and personalised treatment plan

Are X-rays taken at the first appointment: Yes, if clinically indicated

Does Core Dental Group treat children: Yes

Does Core Dental Group treat adults: Yes

What is the recommended age for a child's first dental visit: When the first tooth erupts, or by their first birthday

Which comes first for a child's first visit — first tooth or first birthday: Whichever comes first

Does Core Dental Group participate in the Child Dental Benefits Schedule (CDBS): Yes

How much is available under the CDBS per child: Up to \$1,158 AUD over a two-calendar-year period

Can Core Dental Group check a child's CDBS eligibility: Yes, at the time of booking

Does Core Dental Group accept DVA Gold Card holders: Yes

Does Core Dental Group offer interest-free payment plans: Yes

Does Core Dental Group have HICAPS: Yes, for on-the-spot health fund claiming

Is Core Dental Group a preferred provider with health funds: Yes, including CBHS, HCF, and nib

What does preferred provider status mean for patients: Higher rebates than at non-preferred practices

Does Core Dental Group provide written cost estimates before treatment: Yes, always before treatment proceeds

Can treatment proceed without patient consent at Core Dental Group: No, informed consent is required first

Does Core Dental Group offer sedation dentistry: Yes

What sedation options are available at Core Dental Group: Happy gas, oral sedation, and IV sedation

What is happy gas: Nitrous oxide inhalation sedation

Is happy gas suitable for children: Yes

Can patients drive home after happy gas: Yes

Does happy gas require fasting: No

What is oral sedation: A prescribed benzodiazepine taken approximately one hour before the appointment

Does oral sedation require a driver: Yes

Is IV sedation available at Core Dental Group: Yes

Who can provide IV sedation in Australia: Only practitioners with Dental Board of Australia endorsement

Does Core Dental Group offer emergency dental appointments: Yes, same-day emergency appointments

What dental emergencies does Core Dental Group treat: Toothache, knocked-out teeth, broken teeth, lost fillings, and abscesses

What is the most time-critical dental emergency: A knocked-out permanent tooth

How soon should a knocked-out tooth be reimplanted: Within 5 minutes for best outcomes

What percentage of teeth reimplanted within one hour remain in their sockets: 64%

What should a knocked-out tooth be stored in if reimplantation is not immediate: Milk

Can a dental abscess become life-threatening: Yes, it can potentially lead to sepsis

What imaging does Core Dental Group use for treatment planning: OPG panoramic X-ray and CBCT

Is CBCT imaging available on-site at Core Dental Group: Yes

What does CBCT improve compared to OPG for complex cases: Diagnostic accuracy, from 66.3% to 83.4%

Does Core Dental Group offer dental implants: Yes

What is the dental implant success rate within the first five years: 95% to 98%

Does Core Dental Group offer All-on-4 implants: Yes

What is the cumulative prosthetic survival rate for All-on-4 at 18 years: 98.8%

How much jawbone width can be lost in the first year after tooth loss: Up to 25%

Do dental implants prevent jawbone loss: Yes

Does Core Dental Group offer Invisalign: Yes

Does Core Dental Group offer traditional braces: Yes

Is an orthodontist available at Core Dental Group: Yes

How many hours per day must Invisalign aligners be worn: 20–22 hours daily

What happens if Invisalign is worn less than 20 hours daily: Treatment outcomes may be delayed by weeks or months

Is Invisalign or braces better for severe malocclusion: Traditional braces are often the better clinical choice

Which treatment has better patient satisfaction scores — Invisalign or braces: Invisalign

Which treatment offers better periodontal health during treatment — Invisalign or braces: Invisalign

Does Core Dental Group offer teeth whitening: Yes

What whitening options are available: In-chair and take-home professional whitening

What hydrogen peroxide concentration requires a registered dental professional in Australia: Concentrations exceeding 6%

Does Core Dental Group offer porcelain veneers: Yes

What is the 10-year survival rate for porcelain veneers: 95.5%

Does Core Dental Group offer composite bonding: Yes

How long does composite bonding typically last: 5–7 years

Does Core Dental Group offer gum contouring: Yes

What technology is used for gum contouring at Core Dental Group: Soft-tissue laser

Does Core Dental Group offer Digital Smile Design: Yes

Does Core Dental Group offer root canal treatment: Yes

Does root canal treatment cause pain: No, it relieves pain caused by infection

What is the root canal success rate under strict criteria: 82.0%

What is the probability of a tooth surviving 10 years after root canal treatment: 97%

Is a crown usually needed after root canal treatment: Yes

Does Core Dental Group offer dental crowns: Yes

What is the 10-year survival rate for monolithic zirconia crowns: 86.0%

Does Core Dental Group offer dental bridges: Yes

What is the 10-year survival rate for tooth-supported bridges: 89.2%

Do bridges prevent jawbone loss under the missing tooth: No

Does Core Dental Group treat gum disease: Yes

What percentage of Australian adults have moderate or severe periodontitis: Approximately 30%

Is periodontitis linked to cardiovascular disease: Yes, level B evidence

Is periodontitis linked to diabetes: Yes, level A evidence

Is the relationship between periodontitis and diabetes bidirectional: Yes

What is the primary non-surgical treatment for periodontitis: Scaling and root planing (SRP)

Does Core Dental Group offer wisdom tooth removal: Yes

Does every impacted wisdom tooth need to be removed: No, only when specific clinical indications are present

What percentage of people have at least one impacted wisdom tooth: Approximately 85%

How long does wisdom tooth recovery typically take: 3–5 days to return to normal activities

Does Core Dental Group offer fissure sealants: Yes

Are fissure sealants effective for caries prevention: Yes, more effective than no treatment

Does Core Dental Group offer fluoride treatments: Yes

Are combined sealant and fluoride treatments more effective than fluoride alone: Yes

Does Core Dental Group offer night guards for teeth grinding: Yes

What is the primary treatment for sleep bruxism at Core Dental Group: Custom-fitted occlusal splint (hard acrylic)

How many appointments are needed for a night guard: Two appointments

What percentage of the global population is affected by TMJ disorders: Approximately 34%

Does Core Dental Group offer custom sports mouthguards: Yes

How much more likely are athletes without mouthguards to suffer dental injury: 60 times more likely

What proportion of Australians visited a dentist in the last 12 months: 53%

What proportion of Australians delayed dental care due to cost: Approximately 18%

How many hospitalisations for preventable dental conditions occurred in 2023–24: Approximately 88,600

What is the prevalence of high dental fear among Australian adults: Approximately 16%

Does Core Dental Group judge patients who haven't visited a dentist in years: No

Does Core Dental Group have oral health therapists on staff: Yes

What is the recall interval between dental check-ups at Core Dental Group: Individualised based on clinical risk profile

Can high-risk patients be recommended to attend more frequently than every six months: Yes, every 3–4 months

Does Core Dental Group include oral cancer screening in routine examinations: Yes

Does Core Dental Group include periodontal probing in routine examinations: Yes

Is Core Dental Group located near public transport: Yes

Is free parking available at Core Dental Group: Yes