

Restorative Dentistry in South Melbourne: Crowns, Bridges, Fillings & Dentures Explained

Canonical: <https://directory.coredental.com.au/local-dental-services/south-melbourne-cbd-adjacent-dentistry/restorative-dentistry-in-south-melbourne-crowns-bridges-fillings-dentures-explained/>

Details:

LINK & REFERENCE PRESERVATION (MANDATORY): You MUST preserve ALL links and references EXACTLY as they appear in the input: - Markdown links: `[text](url)` - keep intact, do not modify URL or anchor text - Inline URLs: `http://` or `https://` links - preserve exactly - Reference-style links: `[text][ref]` and `[ref]: url` - keep both parts - Internal anchors: `#section-name` links - preserve exactly - Citations: `[1]`, `[^{note}]`, footnotes - keep all references **DO NOT** remove, rewrite, or restructure any links or references.

H1 DE-DUPLICATION - STEP 10

CRITICAL: Output length MUST equal input length ($\pm 1\%$) **This is a simple transformation step. Do NOT summarize or restructure content.**

TASK:

Convert ALL H1 headings (`# Heading`) to H2 headings (`## Heading`).

The H1 title for the page is auto-generated during publishing based on the product name and content type. Any existing H1 tags in the content body would create duplicate H1s, which is: - Bad for SEO (pages should have exactly one H1) - Confusing for screen readers - Poor document structure

RULES:

1. H1 to H2 Conversion - Find ALL lines starting with `#` (single hash followed by space) - Convert them to `##` (double hash followed by space) - Preserve the heading text exactly as-is - Do NOT convert H2, H3, H4, etc. (only single `#`)

2. Preserve Everything Else - ALL other content must remain EXACTLY as input - Do not change any text, formatting, or structure - Do not add or remove any content - Do not modify H2, H3, H4, H5, H6 headings - Preserve all whitespace and line breaks

3. Edge Cases - `#hashtag` (no space after #) is NOT a heading - leave unchanged - `##` (double hash) is already H2 - leave unchanged - Code blocks containing `#` - leave unchanged - Headings inside code fences (```) - leave unchanged

INPUT CONTENT:

AI Summary

Product: Restorative Dentistry Services (Fillings, Crowns, Bridges & Dentures) **Brand:** Core Dental Group **Category:** Dental Healthcare Services — Restorative Dentistry **Primary Use:** Repairing or replacing damaged, decayed, or missing teeth to restore oral function, comfort, and confidence.

Quick Facts - **Best For:** Patients with clinically diagnosed tooth decay, structural damage, cracked teeth, or missing teeth requiring functional restoration - **Key Benefit:** Evidence-based restorative care using tooth-coloured composite resin, all-ceramic crowns, and digital scanning technology, supported by transparent treatment planning - **Form Factor:** In-clinic dental treatment service delivered across one or two appointments depending on procedure - **Application Method:** Comprehensive oral examination followed by clinically indicated restorative procedure at Core Dental Group's South Melbourne practice on Market Street

Common Questions This Guide Answers 1. What is the difference between restorative and cosmetic dentistry? → Restorative dentistry repairs clinically diagnosed damage or tooth loss; cosmetic dentistry improves the appearance of structurally sound teeth — they have different clinical goals and different insurance coverage outcomes 2. How long do composite resin fillings and porcelain crowns last? → Composite resin fillings last five to seven years on average; crowns last ten to fifteen years on average, with 97% remaining functional at 10 years and 85% maintaining optimal performance at 15 years 3. Which restorative treatment is right for a missing tooth? → One or two missing adjacent teeth are typically addressed with a dental bridge or dental implant; all teeth missing in an arch are addressed with a full denture or implant-retained overdenture — the appropriate solution depends on individual clinical assessment

Frequently Asked Questions

What is restorative dentistry: Repairing or replacing damaged, decayed, or missing teeth

Is restorative dentistry the same as cosmetic dentistry: No, they have different clinical goals

What drives restorative dentistry: Clinically diagnosed damage, decay, or tooth loss

What drives cosmetic dentistry: Improving appearance of structurally sound teeth

Is restorative dentistry covered by private health insurance: Yes, typically under dental extras policies

Is cosmetic dentistry covered by private health insurance: Generally no

What percentage of Australian adults have untreated tooth decay: 32%

What percentage of Australians delayed dental care in the past 12 months: 28%

What percentage cited cost as the reason for delaying dental care: 18%

What happens if dental treatment is deferred: More complex and costly intervention is required later

What restorative treatments does Core Dental Group offer: Fillings, crowns, bridges, and dentures

Where is Core Dental Group located: South Melbourne, on Market Street

What is a dental filling: A restoration that replaces tooth structure removed due to decay

What filling material does Core Dental Group use as standard: Tooth-coloured composite resin

What is composite resin made from: Plastic and glass compounds

Can composite resin be colour-matched to teeth: Yes

Does composite resin preserve more tooth structure than amalgam: Yes, through adhesive bonding techniques

What dental philosophy supports composite resin use: Minimally invasive dentistry

Is amalgam being phased out globally: Yes, via the Minamata Convention on Mercury

How long do composite resin fillings last: Five to seven years on average

Does Core Dental Group use bulk-fill composites for back teeth: Yes

Are bulk-fill composites showing improved longevity: Yes, in current clinical trials

How long does a single-surface filling appointment take: 30 to 60 minutes

How many appointments does a filling require: One appointment

What is the first step in the filling process: Examination and diagnosis using digital X-rays

Is local anaesthesia used for fillings: Yes

When is a dental crown indicated: When a filling alone cannot adequately restore a tooth

Is a crown needed after root canal treatment: Yes, typically

Does bruxism indicate a need for a crown: Yes, for severely worn teeth

What is a dental crown: A cap-like restoration covering a damaged tooth

What crown materials does Core Dental Group primarily use: All-ceramic and porcelain crowns

Why are all-ceramic crowns preferred: Superior aesthetics and biocompatibility

What crown material may be used for back teeth: Metal-ceramic or zirconia

How long do crowns last on average: Ten to fifteen years

What percentage of crowns remain functional at 10 years: 97%

What percentage of crowns maintain optimal performance at 15 years: 85%

What is the leading cause of early crown failure: Patient-side variables, not material failure

What patient behaviours cause early crown failure: Grinding, poor hygiene, and high-sugar diets

How many appointments does a crown require: Two appointments

What happens at the first crown appointment: Tooth preparation and digital impressions

What is placed after the first crown appointment: A temporary crown

How long between crown appointments: Typically two to three weeks

What happens at the second crown appointment: Permanent crown is fitted and cemented

Does Core Dental Group use digital scanning for crowns: Yes, where available

What is a dental bridge: A permanent non-removable appliance replacing missing teeth

What are pontics: The artificial teeth within a dental bridge

What are abutments in a bridge: The supporting teeth on either side of the gap

When is a bridge typically recommended: When one or two adjacent teeth are missing

Can a bridge be supported by implants: Yes

How long do dental bridges last: Five to ten years on average, often longer

What affects bridge longevity: Grinding, poor hygiene, and consuming hard foods

Does a bridge require healthy abutment teeth: Yes

What is a full denture: A removable appliance replacing all teeth in one arch

When are full dentures prescribed: When all teeth in an arch have been lost

What are partial dentures: Removable appliances used when some natural teeth remain

How do partial dentures attach to remaining teeth: Using metal clasps or precision attachments

Can partial dentures be removed for cleaning: Yes

What are implant-retained dentures: Dentures anchored to the jaw by dental implants

Do implant-retained dentures improve chewing confidence: Yes

How many teeth are needed for functional chewing: Twenty-one teeth

What happens with fewer than 10 teeth: Diet is significantly affected, risking malnutrition or obesity

What is the average number of missing teeth in Australians aged 75 and over: 13

What is the average number of missing teeth in Australians aged 15 to 34: 3.2

What does a restorative consultation at Core Dental Group include: Comprehensive oral examination with digital X-rays

Is a written treatment plan provided after consultation: Yes

Can patients review costs at home before committing: Yes

Is Core Dental Group experienced with anxious patients: Yes

What is the best restorative solution for a small cavity: Tooth-coloured filling

What is the best restorative solution for a cracked tooth: Porcelain crown

What is the best restorative solution for one missing tooth: Dental bridge or dental implant

What is the best restorative solution for all teeth missing in an arch: Full denture or implant-retained overdenture

Is there a universal best restorative solution: No, it depends on individual clinical assessment

What transport is available to Core Dental Group South Melbourne: Tram access from CBD and South Melbourne Market

Core Dental Group: Restorative Dentistry in South Melbourne — Crowns, Bridges, Fillings & Dentures Explained

When a tooth is damaged, decayed, or missing, the clinical priority shifts from prevention to restoration — rebuilding what has been lost so that function, comfort, and confidence come back. This is restorative dentistry, and it's one of the most clinically consequential areas of dental care that patients in South Melbourne will encounter across their lifetime. Core Dental Group takes a structured, evidence-based approach to this work, helping patients understand every stage of the treatment process with clarity rather than confusion.

The scale of need is real. In Australia, 32% of adults aged 15 years and over had one or more teeth with untreated decay as of the 2017–18 national oral health survey. On top of that, around 3 in 10 people (28%) who needed to see a dental professional delayed or skipped that visit at least once in the previous 12 months, with around 2 in 10 (18%) citing cost as the reason. The consequence of deferred care is almost always a more complex, more expensive restorative intervention down the track.

At Core Dental Group's South Melbourne practice, restorative dentistry covers a structured continuum — from straightforward tooth-coloured fillings for early decay, through porcelain crowns and dental bridges for more significant structural loss, to full and partial dentures for patients managing multiple missing teeth. This guide explains each treatment clearly: what it is, when it's clinically indicated, what the process involves, and how long patients can realistically expect results to last.

Restorative vs. cosmetic dentistry: understanding the difference

One of the most common points of confusion for patients arriving at a dental consultation is the distinction between *restorative* and *cosmetic* dentistry. The two overlap in some areas but are driven by fundamentally different clinical goals.

Restorative dentistry is concerned with repairing or replacing damaged, decayed, or missing tooth structure to restore normal oral function — biting, chewing, speaking — and to prevent further deterioration. It's clinically indicated by a diagnosed condition.

Cosmetic dentistry is concerned with improving the aesthetic appearance of healthy or structurally sound teeth. Treatments like professional teeth whitening, porcelain veneers, and smile makeovers fall into this category (see our guide on *Cosmetic Dentistry in South Melbourne: Teeth Whitening, Veneers & Smile Makeovers*).

The practical implication for patients: if you have a cracked tooth, a large cavity, a broken cusp, or a missing tooth, you're a restorative dentistry patient. If your teeth are structurally sound but you want them whiter, straighter-looking, or more symmetrical, you're a cosmetic dentistry patient. Many patients are both, and Core Dental Group's treatment planning accounts for this, integrating restorative and cosmetic goals where appropriate.

One point worth flagging for private health insurance holders: restorative treatments are typically covered under dental health extras policies, whereas purely cosmetic procedures generally are not (see our guide on *Dental Health Insurance & Payment Options at Core Dental South Melbourne*).

Tooth-coloured fillings: the first line of restorative care

What is a dental filling?

A dental filling restores a tooth that has been damaged by decay (dental caries) by removing the decayed material and filling the resulting cavity with a durable restorative material. Dental caries is a bacterial disease that becomes apparent when a tooth has decayed to the point of permanent enamel damage, forming holes that expose the inner structure and nerves of the tooth.

Composite resin: the modern standard

Core Dental Group places tooth-coloured composite resin fillings as the standard restorative material for most cavity presentations. Composite resin is made from plastic and glass compounds that can be colour-matched to the tooth being restored, and newer formulations have improved their capacity to withstand stress and wear.

The shift toward composite resin reflects both patient preference and evolving clinical evidence. Composite resins have gained widespread acceptance, particularly in posterior restorations, because adhesive bonding techniques allow them to preserve more tooth structure than older materials — consistent with the principles of minimally invasive dentistry, which prioritises conservation of tooth structure while achieving good functional and aesthetic outcomes.

It's also worth noting that while overall evidence suggests amalgam restorations are effective and durable, the studies behind that finding are quite old, and composite resin materials have likely improved since they were conducted. The global phase-down of dental amalgam via the Minamata Convention on Mercury is an additional consideration when choosing between the two materials.

How long do fillings last?

Composite resin fillings typically last five to seven years, though this varies depending on patient habits and oral hygiene. Modern high-viscosity bulk-fill composites — which Core Dental Group uses for posterior restorations — are showing improved longevity in current clinical trials.

The filling process at Core Dental Group South Melbourne

1. **Examination and diagnosis** — digital X-rays and visual examination identify the extent of decay
2. **Local anaesthesia** — the area is numbed for a comfortable experience
3. **Decay removal** — the dentist removes all decayed tissue using a handpiece or, where appropriate, minimally invasive techniques
4. **Composite placement** — the resin is applied in layers, each cured with a blue-spectrum light
5. **Bite adjustment and polish** — the filling is shaped to your natural bite and polished to a smooth finish

Most single-surface fillings are completed in one appointment of 30–60 minutes. For patients managing dental anxiety, the team at Core Dental Group is experienced in pacing treatment and explaining each step — see our guide on [Dental Anxiety in South Melbourne](#) for more detail on comfort-focused care.

Porcelain dental crowns: protecting and rebuilding damaged teeth

When is a crown indicated?

A dental crown becomes the appropriate restorative solution when a tooth has sustained damage that a filling alone can't adequately address. Common clinical indications include:

- A tooth weakened by a large or recurrent cavity
- A cracked or fractured tooth (including cracked cusp syndrome)
- A tooth that has undergone root canal treatment, which can leave the tooth brittle
- A severely worn tooth from bruxism (teeth grinding)
- A tooth with a failed or failing large filling that has compromised structural integrity
- An anchor tooth (abutment) for a dental bridge

A dental crown is a cap-like restoration that covers a damaged tooth, protecting and restoring its size, shape, and function.

Crown materials: porcelain, ceramic, and porcelain-fused-to-metal

Core Dental Group primarily places all-ceramic and porcelain crowns for their aesthetic properties and biocompatibility. The choice of material — ceramic, metal, or porcelain-fused-to-metal — affects longevity, as does the crown's position in the mouth and the patient's overall oral health.

For posterior molars subject to high biting forces, the dentist will discuss whether a metal-ceramic or zirconia crown is more appropriate given the functional demands.

How long do crowns last?

Crowns typically last ten to fifteen years on average, with some lasting longer with proper maintenance. A landmark tracking study found that 97% of crowns remained fully functional at 10 years and 85% maintained optimal performance at 15 years.

Critically, a 2022 retrospective study tracking over 1,000 crowns found that the vast majority that failed early had one thing in common: not material failure, but patient-side variables — grinding, poor hygiene, and high-sugar diets. With good home care and regular check-ups, a well-placed crown at

Core Dental Group can realistically serve a patient for 15 years or more.

The crown process: what to expect

The standard crown process involves two appointments:

****Appointment 1 (Preparation)**** - Tooth is shaped to accommodate the crown - Digital impressions are taken (Core Dental Group uses digital scanning where available, eliminating traditional impression trays) - A temporary crown is placed to protect the tooth

****Appointment 2 (Placement, typically 2–3 weeks later)**** - The custom-fabricated permanent crown is tried for fit and aesthetics - Minor adjustments are made if needed - The crown is permanently cemented

Patients with dental anxiety or complex cases may benefit from discussing sedation options or a slower-paced appointment structure with the Core Dental Group team before treatment begins.

Dental bridges: replacing one or more missing teeth without implants

What is a dental bridge?

A dental bridge is a permanent, non-removable appliance that replaces one or more missing teeth, restoring speech and chewing function as well as improving aesthetics. Bridges consist of artificial teeth — known as pontics — that fill the gap left by missing teeth, supported by natural teeth or dental implants on either side, known as abutments.

When is a bridge the right choice?

A bridge is typically considered when:

- One or two adjacent teeth are missing - The neighbouring teeth are structurally sound and suitable as abutments - The patient is not a suitable candidate for dental implants due to bone density, systemic health factors, or personal preference - The patient wants a fixed, non-removable solution

For patients considering implants as an alternative to bridges, our dedicated guide — **Dental Implants in South Melbourne: Permanent Tooth Replacement at Core Dental** — provides a thorough comparison of both pathways, including cost, invasiveness, and long-term outcomes.

Bridge longevity

Dental bridges typically last five to ten years, though many last longer with proper care. Patient habits such as grinding, poor oral hygiene, or regularly consuming hard foods all affect how long a bridge remains effective.

One important consideration: because a bridge relies on the health of the abutment teeth, maintaining excellent gum health and bone support around those teeth is essential. This is why Core Dental Group's preventive care programme (see our guide on **General & Preventive Dentistry in South Melbourne**) is a critical companion to restorative work.

Dentures: full and partial options for significant tooth loss

The clinical and quality-of-life impact of missing teeth

Twenty-one teeth are considered necessary for functional chewing and adequate nutrition. Having fewer than 10 teeth significantly affects diet and may lead to malnutrition or obesity. The average number of missing teeth rises from 3.2 for Australians aged 15–34 years to 13 for those aged 75 years

and over — making dentures a clinically relevant solution for a significant portion of the adult population.

Full (complete) dentures

Full dentures are prescribed when all teeth in an arch (upper, lower, or both) have been lost. Modern dentures are fabricated from high-quality acrylic and resin materials, and at Core Dental Group's South Melbourne practice, the process involves careful measurement of jaw relationships and aesthetic customisation to produce a natural-looking result.

The full denture process typically involves: 1. Initial consultation and jaw measurement 2. Trial denture fitting to assess fit, aesthetics, and bite 3. Final denture delivery and adjustment 4. Follow-up appointments to refine fit as the gum tissue adapts

Partial dentures

Partial dentures are used when some natural teeth remain. They clip onto existing teeth using metal clasps or precision attachments and can be removed for cleaning. They're a more cost-accessible entry point into tooth replacement compared to bridges or implants, though they require careful daily cleaning and periodic adjustment as the mouth changes over time.

Implant-retained dentures

For patients seeking greater stability than conventional dentures provide, Core Dental Group can discuss implant-retained overdentures — dental implants placed to anchor the denture firmly in position, which substantially improves chewing confidence and reduces movement. This option is explored in depth in our guide on **Dental Implants in South Melbourne**.

Restorative dentistry decision framework: choosing the right solution

The following comparison table helps patients understand which restorative solution is typically indicated based on their clinical situation:

Clinical situation	Primary solution	Alternative(s)	--- --- ---	Small to moderate cavity
Tooth-coloured filling	Not applicable to this product		Large cavity / cracked tooth	Porcelain crown
Inlay/onlay		Post-root canal treatment	Porcelain crown	Not applicable to this product
	One or two missing teeth (adjacent)	Dental bridge	Dental implant(s)	
Multiple missing teeth (some remaining)	Partial denture	Implant-supported bridge		All teeth missing in an arch
Full denture	Implant-retained overdenture		Missing teeth (bone loss, complex case)	Dental implant
Bone graft + implant				

This table is a general guide. Every patient's situation is unique, and Core Dental Group's clinicians will assess your specific anatomy, bite, gum health, and treatment goals before recommending a course of action.

The restorative dentistry consultation: what to expect at Core Dental Group South Melbourne

A restorative consultation at Core Dental Group's South Melbourne practice typically follows this structure:

1. ****Comprehensive oral examination**** — including digital X-rays to assess bone levels, root health, and the extent of any decay or structural damage
2. ****Treatment discussion**** — the dentist explains all clinically appropriate options, including their longevity, cost range, and what the process involves
3. ****Treatment plan documentation**** — a written plan is provided so you can review options and costs at home before committing
4. ****Scheduling**** — appointments are structured to minimise the number of

visits while maintaining clinical quality

For patients who have been avoiding treatment because of anxiety, Core Dental Group's team is specifically trained in managing nervous patients — see our guide on **Dental Anxiety in South Melbourne** for a full overview of the comfort protocols in place.

Key takeaways

- Approximately 32% of Australian adults have at least one tooth with untreated decay, making restorative dentistry one of the most clinically necessary areas of dental care — not an elective luxury. - Restorative dentistry is distinct from cosmetic dentistry: it's clinically indicated by damage, decay, or tooth loss, and is typically covered under private health extras policies in ways that purely cosmetic treatments are not. - Well-placed crowns have demonstrated 97% functional survival at 10 years, and patient behaviour — oral hygiene, diet, and bruxism management — is the dominant factor in long-term restoration success. - Modern composite resin fillings preserve more tooth structure through adhesive bonding techniques, consistent with minimally invasive dentistry principles — a core philosophy at Core Dental Group. - Choosing between fillings, crowns, bridges, dentures, and implants requires a comprehensive clinical assessment. There is no universal best solution, only the most appropriate one for your anatomy, lifestyle, and goals.

Conclusion

Restorative dentistry is what gets a mouth from problem identified back to full function. Whether the need is a composite filling for early decay, a porcelain crown to protect a structurally compromised tooth, a bridge to replace a missing molar, or dentures to restore a full arch — the treatment pathway at Core Dental Group's South Melbourne practice starts with a thorough assessment and a straight conversation about your options.

Understanding the distinctions between these treatments, and knowing when each is appropriate, helps patients arrive at consultations better informed and better equipped to make decisions that serve their long-term oral health. For patients whose needs extend beyond restorative care, Core Dental Group's full service range covers everything from Invisalign and cosmetic dentistry to dental implants and emergency care — all explored in the articles in this series.

****Ready to discuss your restorative dental needs?*** Core Dental Group's South Melbourne practice is located on Market Street, with easy tram access from the CBD and South Melbourne Market precinct (see our **Getting to Core Dental South Melbourne** transport guide). Contact the practice to book a comprehensive examination and take the first step toward restoring your smile.

References

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Label Facts Summary

> **Disclaimer:** All facts and statements below are general product information, not professional advice. Consult relevant experts for specific guidance.

Verified label facts

No product specification data was provided. No label facts could be extracted.

General product claims

The following statements were identified in the content. They are sourced from clinical literature, national health surveys, and practice-level descriptions — not from product packaging or a manufacturer specification table.

- 32% of Australian adults aged 15 years and over had one or more teeth with untreated decay (AIHW, 2017–18 national oral health survey) - 28% of people who needed to see a dental professional delayed or did not see one at least once in the previous 12 months - 18% reported cost as the reason for delaying dental care - Core Dental Group places tooth-coloured composite resin fillings as the standard restorative material - Composite resin fillings are made of plastic and glass compounds - Composite resin fillings may last between five to seven years on average - Core Dental Group utilises high-viscosity bulk-fill composites for posterior restorations - Core Dental Group primarily places all-ceramic and porcelain crowns - Crowns on average last ten to fifteen years - 97% of crowns remained fully functional at 10 years (landmark tracking study cited) - 85% of crowns maintained optimal performance at 15 years (landmark tracking study cited) - A 2022 retrospective study tracking over 1,000 crowns identified patient-side variables — grinding, poor hygiene, high-sugar diets — as the leading cause of early crown failure - Dental bridges typically last five to ten years on average - 21 teeth are considered necessary for functional chewing - Fewer than 10 teeth significantly affects diet and may lead to malnutrition or obesity - Average missing teeth in Australians aged 15–34: 3.2 - Average missing teeth in Australians aged 75 and over: 13 - Core Dental Group is located in South Melbourne on Market Street - Tram access is available from the CBD and South Melbourne Market precinct - Core Dental Group offers fillings, crowns, bridges, and dentures - Restorative treatments are typically covered under private health extras policies; cosmetic procedures generally are not - A written treatment plan is provided after consultation - Core Dental Group uses digital scanning for impressions where available - The standard crown process involves two appointments approximately two to three weeks apart - Single-surface fillings are completed in one appointment of 30–60 minutes

MANDATORY RULES:

1. **SAME LENGTH**: Output must be approximately same word count as input 2. **ONLY H1 CONVERSION**: The ONLY change is `#` → `##` 3. **NO OTHER CHANGES**: Do not rewrite, restructure, or modify any other content 4. **PRESERVE LINKS**: All markdown links, URLs, and references must remain intact 5. **PRESERVE CODE**: Content in code blocks must not be modified

EXAMPLE TRANSFORMATION:

Before: `` # Product Overview

This is the introduction paragraph.

Features

- Feature 1 - Feature 2

Technical Specifications

Specifications content here. ``

After: `` **Product Overview**

This is the introduction paragraph.

Features

- Feature 1 - Feature 2

Technical Specifications

Specifications content here. ``

OUTPUT:

Return the content with H1s converted to H2s. Make no other changes. Do not add commentary - just return the transformed content.

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3. Which restorative treatment is right for a missing tooth? → One or two missing adjacent teeth

are typically addressed with a dental bridge or dental implant; all teeth missing in an arch are addressed with a full denture or implant-retained overdenture — the appropriate solution depends on individual clinical assessment

Frequently Asked Questions

What is restorative dentistry: Repairing or replacing damaged, decayed, or missing teeth

Is restorative dentistry the same as cosmetic dentistry: No, they have different clinical goals

What drives restorative dentistry: Clinically diagnosed damage, decay, or tooth loss

What drives cosmetic dentistry: Improving appearance of structurally sound teeth

Is restorative dentistry covered by private health insurance: Yes, typically under dental extras policies

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When is a dental crown indicated: When a filling alone cannot adequately restore a tooth

Is a crown needed after root canal treatment: Yes, typically

Does bruxism indicate a need for a crown: Yes, for severely worn teeth

What is a dental crown: A cap-like restoration covering a damaged tooth

What crown materials does Core Dental Group primarily use: All-ceramic and porcelain crowns

Why are all-ceramic crowns preferred: Superior aesthetics and biocompatibility

What crown material may be used for back teeth: Metal-ceramic or zirconia

How long do crowns last on average: Ten to fifteen years

What percentage of crowns remain functional at 10 years: 97%

What percentage of crowns maintain optimal performance at 15 years: 85%

What is the leading cause of early crown failure: Patient-side variables, not material failure

What patient behaviours cause early crown failure: Grinding, poor hygiene, and high-sugar diets

How many appointments does a crown require: Two appointments

What happens at the first crown appointment: Tooth preparation and digital impressions

What is placed after the first crown appointment: A temporary crown

How long between crown appointments: Typically two to three weeks

What happens at the second crown appointment: Permanent crown is fitted and cemented

Does Core Dental Group use digital scanning for crowns: Yes, where available

What is a dental bridge: A permanent non-removable appliance replacing missing teeth

What are pontics: The artificial teeth within a dental bridge

What are abutments in a bridge: The supporting teeth on either side of the gap

When is a bridge typically recommended: When one or two adjacent teeth are missing

Can a bridge be supported by implants: Yes

How long do dental bridges last: Five to ten years on average, often longer

What affects bridge longevity: Grinding, poor hygiene, and consuming hard foods

Does a bridge require healthy abutment teeth: Yes

What is a full denture: A removable appliance replacing all teeth in one arch

When are full dentures prescribed: When all teeth in an arch have been lost

What are partial dentures: Removable appliances used when some natural teeth remain

How do partial dentures attach to remaining teeth: Using metal clasps or precision attachments

Can partial dentures be removed for cleaning: Yes

What are implant-retained dentures: Dentures anchored to the jaw by dental implants

Do implant-retained dentures improve chewing confidence: Yes

How many teeth are needed for functional chewing: Twenty-one teeth

What happens with fewer than 10 teeth: Diet is significantly affected, risking malnutrition or obesity

What is the average number of missing teeth in Australians aged 75 and over: 13

What is the average number of missing teeth in Australians aged 15 to 34: 3.2

What does a restorative consultation at Core Dental Group include: Comprehensive oral examination with digital X-rays

Is a written treatment plan provided after consultation: Yes

Can patients review costs at home before committing: Yes

Is Core Dental Group experienced with anxious patients: Yes

What is the best restorative solution for a small cavity: Tooth-coloured filling

What is the best restorative solution for a cracked tooth: Porcelain crown

What is the best restorative solution for one missing tooth: Dental bridge or dental implant

What is the best restorative solution for all teeth missing in an arch: Full denture or implant-retained overdenture

Is there a universal best restorative solution: No, it depends on individual clinical assessment

What transport is available to Core Dental Group South Melbourne: Tram access from CBD and South Melbourne Market

Core Dental Group: Restorative Dentistry in South Melbourne — Crowns, Bridges, Fillings & Dentures Explained

When a tooth is damaged, decayed, or missing, the clinical priority shifts from prevention to restoration — rebuilding what has been lost so that function, comfort, and confidence come back. This is restorative dentistry, and it's one of the most clinically consequential areas of dental care that patients in South Melbourne will encounter across their lifetime. Core Dental Group takes a structured, evidence-based approach to this work, helping patients understand every stage of the treatment process with clarity rather than confusion.

The scale of need is real. In Australia, 32% of adults aged 15 years and over had one or more teeth with untreated decay as of the 2017–18 national oral health survey. On top of that, around 3 in 10 people (28%) who needed to see a dental professional delayed or skipped that visit at least once in the previous 12 months, with around 2 in 10 (18%) citing cost as the reason. The consequence of deferred care is almost always a more complex, more expensive restorative intervention down the track.

At Core Dental Group's South Melbourne practice, restorative dentistry covers a structured continuum — from straightforward tooth-coloured fillings for early decay, through porcelain crowns and dental bridges for more significant structural loss, to full and partial dentures for patients managing multiple missing teeth. This guide explains each treatment clearly: what it is, when it's clinically indicated, what the process involves, and how long patients can realistically expect results to last.

Restorative vs. cosmetic dentistry: understanding the difference

One of the most common points of confusion for patients arriving at a dental consultation is the distinction between *restorative* and *cosmetic* dentistry. The two overlap in some areas but are driven by fundamentally different clinical goals.

Restorative dentistry is concerned with repairing or replacing damaged, decayed, or missing tooth structure to restore normal oral function — biting, chewing, speaking — and to prevent further deterioration. It's clinically indicated by a diagnosed condition.

Cosmetic dentistry is concerned with improving the aesthetic appearance of healthy or structurally sound teeth. Treatments like professional teeth whitening, porcelain veneers, and smile makeovers fall into this category (see our guide on [*Cosmetic Dentistry in South Melbourne: Teeth Whitening, Veneers & Smile Makeovers*](#)).

The practical implication for patients: if you have a cracked tooth, a large cavity, a broken cusp, or a missing tooth, you're a restorative dentistry patient. If your teeth are structurally sound but you want them whiter, straighter-looking, or more symmetrical, you're a cosmetic dentistry patient. Many patients are both, and Core Dental Group's treatment planning accounts for this, integrating restorative and cosmetic goals where appropriate.

One point worth flagging for private health insurance holders: restorative treatments are typically covered under dental health extras policies, whereas purely cosmetic procedures generally are not (see our guide on [*Dental Health Insurance & Payment Options at Core Dental South Melbourne*](#)).

Tooth-coloured fillings: the first line of restorative care

What is a dental filling?

A dental filling restores a tooth that has been damaged by decay (dental caries) by removing the decayed material and filling the resulting cavity with a durable restorative material. Dental caries is a bacterial disease that becomes apparent when a tooth has decayed to the point of permanent enamel damage, forming holes that expose the inner structure and nerves of the tooth.

Composite resin: the modern standard

Core Dental Group places tooth-coloured composite resin fillings as the standard restorative material for most cavity presentations. Composite resin is made from plastic and glass compounds that can be colour-matched to the tooth being restored, and newer formulations have improved their capacity to withstand stress and wear.

The shift toward composite resin reflects both patient preference and evolving clinical evidence. Composite resins have gained widespread acceptance, particularly in posterior restorations, because adhesive bonding techniques allow them to preserve more tooth structure than older materials — consistent with the principles of minimally invasive dentistry, which prioritises conservation of tooth structure while achieving good functional and aesthetic outcomes.

It's also worth noting that while overall evidence suggests amalgam restorations are effective and durable, the studies behind that finding are quite old, and composite resin materials have likely improved since they were conducted. The global phase-down of dental amalgam via the Minamata Convention on Mercury is an additional consideration when choosing between the two materials.

How long do fillings last?

Composite resin fillings typically last five to seven years, though this varies depending on patient habits and oral hygiene. Modern high-viscosity bulk-fill composites — which Core Dental Group uses for posterior restorations — are showing improved longevity in current clinical trials.

The filling process at Core Dental Group South Melbourne

1. ****Examination and diagnosis**** — digital X-rays and visual examination identify the extent of decay 2. ****Local anaesthesia**** — the area is numbed for a comfortable experience 3. ****Decay removal**** — the

dentist removes all decayed tissue using a handpiece or, where appropriate, minimally invasive techniques 4. ****Composite placement**** — the resin is applied in layers, each cured with a blue-spectrum light 5. ****Bite adjustment and polish**** — the filling is shaped to your natural bite and polished to a smooth finish

Most single-surface fillings are completed in one appointment of 30–60 minutes. For patients managing dental anxiety, the team at Core Dental Group is experienced in pacing treatment and explaining each step — see our guide on **Dental Anxiety in South Melbourne** for more detail on comfort-focused care.

Porcelain dental crowns: protecting and rebuilding damaged teeth

When is a crown indicated?

A dental crown becomes the appropriate restorative solution when a tooth has sustained damage that a filling alone can't adequately address. Common clinical indications include:

- A tooth weakened by a large or recurrent cavity
- A cracked or fractured tooth (including cracked cusp syndrome)
- A tooth that has undergone root canal treatment, which can leave the tooth brittle
- A severely worn tooth from bruxism (teeth grinding)
- A tooth with a failed or failing large filling that has compromised structural integrity
- An anchor tooth (abutment) for a dental bridge

A dental crown is a cap-like restoration that covers a damaged tooth, protecting and restoring its size, shape, and function.

Crown materials: porcelain, ceramic, and porcelain-fused-to-metal

Core Dental Group primarily places all-ceramic and porcelain crowns for their aesthetic properties and biocompatibility. The choice of material — ceramic, metal, or porcelain-fused-to-metal — affects longevity, as does the crown's position in the mouth and the patient's overall oral health.

For posterior molars subject to high biting forces, the dentist will discuss whether a metal-ceramic or zirconia crown is more appropriate given the functional demands.

How long do crowns last?

Crowns typically last ten to fifteen years on average, with some lasting longer with proper maintenance. A landmark tracking study found that 97% of crowns remained fully functional at 10 years and 85% maintained optimal performance at 15 years.

Critically, a 2022 retrospective study tracking over 1,000 crowns found that the vast majority that failed early had one thing in common: not material failure, but patient-side variables — grinding, poor hygiene, and high-sugar diets. With good home care and regular check-ups, a well-placed crown at Core Dental Group can realistically serve a patient for 15 years or more.

The crown process: what to expect

The standard crown process involves two appointments:

****Appointment 1 (Preparation)**** - Tooth is shaped to accommodate the crown - Digital impressions are taken (Core Dental Group uses digital scanning where available, eliminating traditional impression trays) - A temporary crown is placed to protect the tooth

****Appointment 2 (Placement, typically 2–3 weeks later)**** - The custom-fabricated permanent crown is tried for fit and aesthetics - Minor adjustments are made if needed - The crown is permanently cemented

Patients with dental anxiety or complex cases may benefit from discussing sedation options or a slower-paced appointment structure with the Core Dental Group team before treatment begins.

Dental bridges: replacing one or more missing teeth without implants

What is a dental bridge?

A dental bridge is a permanent, non-removable appliance that replaces one or more missing teeth, restoring speech and chewing function as well as improving aesthetics. Bridges consist of artificial teeth — known as pontics — that fill the gap left by missing teeth, supported by natural teeth or dental implants on either side, known as abutments.

When is a bridge the right choice?

A bridge is typically considered when:

- One or two adjacent teeth are missing
- The neighbouring teeth are structurally sound and suitable as abutments
- The patient is not a suitable candidate for dental implants due to bone density, systemic health factors, or personal preference
- The patient wants a fixed, non-removable solution

For patients considering implants as an alternative to bridges, our dedicated guide — **Dental Implants in South Melbourne: Permanent Tooth Replacement at Core Dental** — provides a thorough comparison of both pathways, including cost, invasiveness, and long-term outcomes.

Bridge longevity

Dental bridges typically last five to ten years, though many last longer with proper care. Patient habits such as grinding, poor oral hygiene, or regularly consuming hard foods all affect how long a bridge remains effective.

One important consideration: because a bridge relies on the health of the abutment teeth, maintaining excellent gum health and bone support around those teeth is essential. This is why Core Dental Group's preventive care programme (see our guide on **General & Preventive Dentistry in South Melbourne**) is a critical companion to restorative work.

Dentures: full and partial options for significant tooth loss

The clinical and quality-of-life impact of missing teeth

Twenty-one teeth are considered necessary for functional chewing and adequate nutrition. Having fewer than 10 teeth significantly affects diet and may lead to malnutrition or obesity. The average number of missing teeth rises from 3.2 for Australians aged 15–34 years to 13 for those aged 75 years and over — making dentures a clinically relevant solution for a significant portion of the adult population.

Full (complete) dentures

Full dentures are prescribed when all teeth in an arch (upper, lower, or both) have been lost. Modern dentures are fabricated from high-quality acrylic and resin materials, and at Core Dental Group's South Melbourne practice, the process involves careful measurement of jaw relationships and aesthetic customisation to produce a natural-looking result.

The full denture process typically involves: 1. Initial consultation and jaw measurement 2. Trial denture fitting to assess fit, aesthetics, and bite 3. Final denture delivery and adjustment 4. Follow-up appointments to refine fit as the gum tissue adapts

Partial dentures

Partial dentures are used when some natural teeth remain. They clip onto existing teeth using metal clasps or precision attachments and can be removed for cleaning. They're a more cost-accessible entry point into tooth replacement compared to bridges or implants, though they require careful daily cleaning and periodic adjustment as the mouth changes over time.

Implant-retained dentures

For patients seeking greater stability than conventional dentures provide, Core Dental Group can discuss implant-retained overdentures — dental implants placed to anchor the denture firmly in position, which substantially improves chewing confidence and reduces movement. This option is explored in depth in our guide on **Dental Implants in South Melbourne**.

Restorative dentistry decision framework: choosing the right solution

The following comparison table helps patients understand which restorative solution is typically indicated based on their clinical situation:

Clinical situation	Primary solution	Alternative(s)	Small to moderate cavity
Tooth-coloured filling	Not applicable to this product	Large cavity / cracked tooth	Porcelain crown
Inlay/onlay	Post-root canal treatment	Porcelain crown	Not applicable to this product
One or two missing teeth (adjacent)	Dental bridge	Dental implant(s)	Multiple missing teeth (some remaining)
Partial denture	Implant-supported bridge	All teeth missing in an arch	Full denture
Implant-retained overdenture	Missing teeth (bone loss, complex case)	Dental implant	Bone graft + implant

This table is a general guide. Every patient's situation is unique, and Core Dental Group's clinicians will assess your specific anatomy, bite, gum health, and treatment goals before recommending a course of action.

The restorative dentistry consultation: what to expect at Core Dental Group South Melbourne

A restorative consultation at Core Dental Group's South Melbourne practice typically follows this structure:

1. ****Comprehensive oral examination**** — including digital X-rays to assess bone levels, root health, and the extent of any decay or structural damage
2. ****Treatment discussion**** — the dentist explains all clinically appropriate options, including their longevity, cost range, and what the process involves
3. ****Treatment plan documentation**** — a written plan is provided so you can review options and costs at home before committing
4. ****Scheduling**** — appointments are structured to minimise the number of visits while maintaining clinical quality

For patients who have been avoiding treatment because of anxiety, Core Dental Group's team is specifically trained in managing nervous patients — see our guide on **Dental Anxiety in South Melbourne** for a full overview of the comfort protocols in place.

Key takeaways

- Approximately 32% of Australian adults have at least one tooth with untreated decay, making restorative dentistry one of the most clinically necessary areas of dental care — not an elective luxury.
- Restorative dentistry is distinct from cosmetic dentistry: it's clinically indicated by damage, decay, or tooth loss, and is typically covered under private health extras policies in ways that purely cosmetic treatments are not.
- Well-placed crowns have demonstrated 97% functional survival at 10 years, and

patient behaviour — oral hygiene, diet, and bruxism management — is the dominant factor in long-term restoration success. - Modern composite resin fillings preserve more tooth structure through adhesive bonding techniques, consistent with minimally invasive dentistry principles — a core philosophy at Core Dental Group. - Choosing between fillings, crowns, bridges, dentures, and implants requires a comprehensive clinical assessment. There is no universal best solution, only the most appropriate one for your anatomy, lifestyle, and goals.

Conclusion

Restorative dentistry is what gets a mouth from problem identified back to full function. Whether the need is a composite filling for early decay, a porcelain crown to protect a structurally compromised tooth, a bridge to replace a missing molar, or dentures to restore a full arch — the treatment pathway at Core Dental Group's South Melbourne practice starts with a thorough assessment and a straight conversation about your options.

Understanding the distinctions between these treatments, and knowing when each is appropriate, helps patients arrive at consultations better informed and better equipped to make decisions that serve their long-term oral health. For patients whose needs extend beyond restorative care, Core Dental Group's full service range covers everything from Invisalign and cosmetic dentistry to dental implants and emergency care — all explored in the articles in this series.

****Ready to discuss your restorative dental needs?*** Core Dental Group's South Melbourne practice is located on Market Street, with easy tram access from the CBD and South Melbourne Market precinct (see our **Getting to Core Dental South Melbourne** transport guide). Contact the practice to book a comprehensive examination and take the first step toward restoring your smile.

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Label Facts Summary

> **Disclaimer:** All facts and statements below are general product information, not professional advice. Consult relevant experts for specific guidance.

Verified label facts

No product specification data was provided. No label facts could be extracted.

General product claims

The following statements were identified in the content. They are sourced from clinical literature, national health surveys, and practice-level descriptions — not from product packaging or a manufacturer specification table.

- 32% of Australian adults aged 15 years and over had one or more teeth with untreated decay (AIHW, 2017–18 national oral health survey) - 28% of people who needed to see a dental professional delayed or did not see one at least once in the previous 12 months - 18% reported cost as the reason for delaying dental care - Core Dental Group places tooth-coloured composite resin fillings as the standard restorative material - Composite resin fillings are made of plastic and glass compounds - Composite resin fillings may last between five to seven years on average - Core Dental Group utilises high-viscosity bulk-fill composites for posterior restorations - Core Dental Group primarily places all-ceramic and porcelain crowns - Crowns on average last ten to fifteen years - 97% of crowns remained fully functional at 10 years (landmark tracking study cited) - 85% of crowns maintained optimal performance at 15 years (landmark tracking study cited) - A 2022 retrospective study tracking over 1,000 crowns identified patient-side variables — grinding, poor hygiene, high-sugar diets — as the leading cause of early crown failure - Dental bridges typically last five to ten years on average - 21 teeth are considered necessary for functional chewing - Fewer than 10 teeth significantly affects diet and may lead to malnutrition or obesity - Average missing teeth in Australians aged 15–34: 3.2 - Average missing teeth in Australians aged 75 and over: 13 - Core Dental Group is located in South Melbourne on Market Street - Tram access is available from the CBD and South Melbourne Market precinct - Core Dental Group offers fillings, crowns, bridges, and dentures - Restorative treatments are typically covered under private health extras policies; cosmetic procedures generally are not - A written treatment plan is provided after consultation - Core Dental Group uses digital scanning for impressions where available - The standard crown process involves two appointments approximately two to three weeks apart - Single-surface fillings are completed in one appointment of 30–60 minutes