

DENTAL BOOTCAMP

FactSheet

► Getting a little long in the tooth?

Receding gums, often coined, “getting long in the tooth” are not a direct result of natural aging. A common cause can be the development of inflammation within the gum. This eventually undermines the gums resulting in shrinkage and recession of the gums.

A common cause can be the development of inflammation within the gum. This eventually undermines the gums resulting in shrinkage and recession of the gums. The inflammation within the gums before their recession may be caused either by trauma to the gums and/or accumulation of dental plaque bacteria. Ongoing trauma to the gum area, over time, leads the gums to pull away from the teeth.

Receding gums can be due to genetics, but more often they are due to over brushing of your teeth. Other causes of trauma include malocclusion, lip and tongue piercing, smoking and poorly fitting partial dentures.

The Australian Dental Association (ADA) says anecdotal reports suggest around two out of every three people apply too much pressure when brushing their teeth, which can cause receding gums. Gingivitis and periodontitis (commonly known as gum disease) are other causes of receding gums.

Over time, if the problem gets worse, the root of the tooth can become exposed, leading to sensitive teeth and more seriously, increasing the risk of root decay and eventual loss of the tooth. Root decay is more difficult to treat and often needs specialised dental treatment.

Signs and symptoms:

It is possible to check for receding gums by examining the gum area around your teeth – especially your back teeth. Another indicator can also be sensitive teeth, especially when brushing and consuming hot and cold beverages and foods. Make sure you discuss any concerns you have with your dentist.

Factors causing receding gums include:

- Vigorous tooth brushing using inappropriate techniques (i.e. horizontal, scrubbing action) is one of the most common causes. Ensure your toothbrush has soft bristles and replace it regularly. When brushing, hold your toothbrush at a 45 degree angle and move the brush in small circular motions, concentrating on one tooth at a time, cleaning front, back and underneath the tooth. Carefully brush around the top of the tooth and the gum line – but avoid harsh scrubbing.
- Gingivitis and periodontitis are prevalent in people over 40, and often goes unnoticed. It can lead to the breakdown of gum tissue, resulting in receding gums. Maintaining a daily oral health regime that includes brushing and flossing is essential to help prevent gum disease.
- Chronic plaque accumulation can result in gum inflammation and associated localised gum recession.
- Some people have a genetic predisposition to receding gums because their gums are naturally thin. The thickness of the gums is an important determinant of the chance of gum recession if you have inflammation. Regular check ups with the dentist can help manage this because the dentist can advise on the best brushing techniques and treatment for your needs.

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Root decay:

Receding gums expose the roots to the risk of decay. This type of decay is harder to treat than decay that attacks the enamel on teeth.

Treatment and prevention:

- Brush your teeth at least twice a day and make sure your technique is correct. Your dentist can recommend a toothbrush and technique specific to your teeth
- Floss daily to help remove plaque build up between your teeth and to help prevent gum disease

→ Have regular dental check ups, at least once every twelve months where the dentist will inspect your teeth and gums, especially those towards the back of your mouth to check for receding gums

→ If you notice blood when you clean your teeth or floss, this could be an indicator that you have gum disease.

→ If you suspect you may have receding gums or root decay, speak with your dentist who can discuss preventative and management options

