Allergic Reaction to Amalgam Filling: Symptoms | Core Dental

Canonical: https://www.coredental.com.au/allergic-reaction-amalgam-filling/

Details:

Yes, it is possible to have an allergic reaction to an amalgam filling, although it is uncommon. A reaction occurs in people who are allergic to mercury or to one of the other metals in the amalgam, after the filling has been in the mouth for some time. It usually shows as redness or itching inside the mouth. At Core Dental we examine the area first, because other causes can look similar, and your dentist can replace a filling with a tooth-coloured material if that is appropriate for you.

What is dental amalgam made of?

Dental amalgam is a mixture of several metals. It combines mercury with silver, tin, zinc and copper. Amalgam is often called a silver filling, and it has been used for many years to restore teeth with decay. Today many people choose tooth-coloured materials instead, and our dentists explain the options that suit each tooth. You can read about the differences in our article on silver fillings and white fillings .

What are the symptoms of an allergic reaction to an amalgam filling?

A reaction may occur with or without pain, but it almost always appears as redness or itching inside the mouth, similar to an allergic skin reaction. This is known as a contact lichenoid reaction, named because the area is shaped like the plant lichen. The cheeks and the sides of the tongue are the most commonly affected places, usually where they touch the filling.

Please contact us if you notice an area of redness, a white or red patch, soreness or itching that does not settle. Any mouth ulcer or patch that does not heal within a few weeks should be checked by a dentist or doctor. Our article on mouth ulcers has more information.

Could other conditions cause similar symptoms?

Yes. Similar symptoms can come from other causes, such as:

a broken filling with a sharp or rough surface that rubs against the cheek or tongue

reactions to spicy foods that are not linked to a filling

certain additives and preservatives in toothpaste

some medications

Because of this, we do not assume that a filling is the cause. Your dentist examines the filling, the surrounding tissues and your medical history, and may suggest a review or a referral if needed.

How is an allergic reaction to an amalgam filling treated?

If your dentist suspects a reaction to an amalgam filling, they can replace it with a tooth-coloured material such as composite resin, or with one of the other filling materials that suit your tooth. The right

material depends on the size and position of the filling, your bite and your general health. Removing an amalgam filling that is not causing a problem is not usually needed, so please talk to your dentist before making any changes. Read more about what happens when you get a filling .

What should you tell your dentist about allergies?

When you visit Core Dental, please tell us about any known allergies, including allergies to metals, latex or medications, and about any medicines you take. We ask about your medical history at your first visit so that we can choose suitable materials and plan your care safely.

How can we help?

If you are worried about an existing filling, or about redness or itching in your mouth, our team can examine you at any of our nine practices. We quote before treatment starts, and we offer interest-free payment plans where suitable. Call 13 13 16 to book.

What the published advice covers — and what it pointedly does not

This page is about a reaction to a filling, so it is worth being precise about what the state health advice actually establishes, because the gap is as informative as the content.

What it does cover: amalgam and mercury, at the population level. The Victorian Department of Health gives this its own heading — "Amalgam ('silver') fillings are safe" — and sets out the reasoning in two sentences: "Some people have concerns about dental amalgam fillings because they contain mercury." And: "High amounts of mercury are harmful to human health, but the amount of 'free' mercury (mercury that could get into the body) in set amalgam fillings is so low that it has no effect on health."

Note the precision. It concedes that amalgam contains mercury and that mercury in quantity is harmful. What it disputes is the inference, and the hinge is the phrase "free" mercury — mercury that could actually get into the body, as distinct from mercury bound in a set filling.

What it does not cover: allergy. The Department's dental fillings page says nothing at all about allergy or hypersensitivity to amalgam or to any other filling material. No symptoms, no diagnostic test, no indication of how common it is, no management advice.

That absence is why you will not find a percentage on this page. "Safe for the population" and "safe for you specifically" are different claims, and the published advice answers only the first. An individual reaction to a material is not ruled out by a population-level safety statement — it is simply a question the published advice does not address.

So if you have come here looking for a figure, we would rather tell you that none exists in the state health advice than supply one that sounds authoritative. Any prevalence number you encounter for filling-material allergy is coming from somewhere other than the Victorian Department of Health, and is worth asking about before relying on it.

One thing the published advice also does not do is recommend removing existing amalgam fillings — in either direction. There is no such recommendation on the page. What is worth weighing is that removing a sound filling means removing some healthy tooth along with it, against the Department's own general position that "an intact tooth is stronger than a filled one".

Sources: Better Health Channel (Victorian Department of Health), Dental fillings, betterhealth.vic.gov.au (page reviewed 1 August 2025; accessed 5 November 2026).

Why a symptom near a filling needs examining rather than diagnosing

The practical risk with a page like this is not that someone reads a wrong number. It is that a symptom gets attributed to the filling material when something else is going on — and several of the alternatives are treatable, time-sensitive, or both.

Consider what else produces discomfort around a restored tooth. The Victorian Department of Health's published list of symptoms of a damaged or diseased tooth pulp includes "sensitivity to hot and cold drinks and foods", "pain when biting or chewing", "unprovoked or spontaneous pain", "swelling of the gum near the affected tooth" and "facial swelling".

And among its published causes of pulp damage: "decay beneath a deep filling". A filling that has been in place for years can have decay developing underneath it, and the symptoms of that overlap substantially with what someone might reasonably interpret as a reaction to the material itself.

The filling may also simply have failed. The Department is direct about this: "All fillings need to be replaced eventually", check-ups catch "fillings that are worn out due to chewing", and "fillings also sometimes fall out. If part of your filling breaks off or if your whole filling falls out, see your oral health professional as soon as possible."

A broken edge on a filling can irritate the tongue or cheek, trap food, and produce exactly the kind of persistent local complaint that invites a material explanation.

Why the distinction is urgent rather than academic. The published consequences of leaving pulp infection untreated are not mild: infection that spreads, where "once the pulp becomes infected, it loses its ability to fight the spread of the infection"; "bone loss in the area"; and loss of the tooth, with the added note that "tooth replacement options are available but may be limited if the infection has already caused advanced bone loss."

That last clause is the reason not to spend months investigating a material question first. Delay does not only risk the tooth — it can narrow what can be done afterwards.

So what is the sensible sequence? Be seen, and describe the symptom accurately: what it feels like, when it started, what provokes it, and whether anything has changed about the filling. The Department's description of an examination is that the dentist "will check each tooth using small instruments, such as a mirror and probe (a fine, pick-like tool)", that x-rays may be needed where a problem is "difficult to see", and that "if there's a problem, your dentist will explain the treatment options and give you an estimate of the cost and the time it will take."

And if replacement is the answer , the published list of materials is wider than most people assume: composite resin, glass-ionomer cement, dental amalgam, gold and porcelain. The Department's framing is that "each different material has benefits and limitations" and that "some types of material may be better than others in certain situations", with the choice guided by "the size, shape and location of the filling". That is a conversation to have with someone who can see the tooth — which is, in the end, the honest answer to every question on this page.

Sources: Better Health Channel (Victorian Department of Health), Dental fillings, betterhealth.vic.gov.au (reviewed 1 August 2025); Root canal treatment, betterhealth.vic.gov.au (reviewed 14 July 2025); Dental treatment, betterhealth.vic.gov.au (reviewed 3 June 2026). All accessed 5 November 2026.

Frequently asked questions

How common is an allergy to amalgam?

An allergic reaction to amalgam is uncommon. It occurs in people who are allergic to mercury or to one of the other metals in the filling. If you have symptoms, your dentist will examine you to confirm the cause.

Does an amalgam allergy always cause pain?

No. A reaction may occur with or without pain, but it almost always appears as redness or itching inside the mouth, usually on the cheeks or sides of the tongue near the filling.

Should I have my amalgam fillings removed?

Not necessarily. Fillings that are not causing a problem do not usually need to be replaced just because of the material. Please discuss your concerns with your dentist, who can examine your fillings and explain the choices.

What can replace an amalgam filling?

Your dentist can use a tooth-coloured composite resin or another suitable filling material. Which one is appropriate depends on the tooth, the size of the filling and your bite, and we explain the options before any work starts.

Can a sharp filling cause the same symptoms?

Yes. A broken filling with a rough or sharp edge can irritate the cheek or tongue and look similar to a reaction. This is why we examine the filling and the tissues before deciding on treatment.

Does the state health advice discuss allergy to fillings at all?

No. The Victorian Department of Health's dental fillings page covers mercury safety but says nothing about allergy or hypersensitivity to amalgam or any other filling material — no symptoms, no test, no indication of how common it is. Where this page describes a reaction as uncommon, that is our own clinical experience rather than published state health advice, and we would rather label which is which.

Is amalgam considered safe for the general population?

That is the Department's published position, under the heading "Amalgam ('silver') fillings are safe": the amount of "free" mercury "in set amalgam fillings is so low that it has no effect on health". Note that this is a statement about the population, which is a different question from whether an individual has reacted to something.

What does "free" mercury mean?

Mercury that could actually get into the body, as opposed to mercury bound in a hardened filling. The Department accepts that amalgam contains mercury and that "high amounts of mercury are harmful to human health" — the distinction it draws is availability, and the word "set" is doing the work.

Could my symptoms have a different cause?

Quite possibly, and several alternatives are treatable. Sensitivity to hot and cold, pain on biting, gum swelling and facial swelling all appear on the Department's published list of symptoms of damaged or

diseased tooth pulp, and "decay beneath a deep filling" is on its list of causes. A filling that has worn or broken can also irritate locally. Those need examining rather than assuming.

Does the published advice recommend removing amalgam fillings?

No — it makes no recommendation either way. Worth weighing is that removing a sound filling takes some healthy tooth with it, against the Department's general position that "an intact tooth is stronger than a filled one".

Related services and further reading

Fillings and restorations

Silver fillings versus white fillings

What happens when you get a dental filling

How do I know if I need a filling?

Difference between a crown and a porcelain filling

Cracked tooth: how is it treated?

Dental check-ups

Understanding your treatment

Core Dental at a glance

Nine Core Dental clinics across Melbourne: Southbank, South Melbourne, Caroline Springs, Carrum Downs, Epping, Wyndham, Berwick, Bayside and Glenferrie.

Open six days a week: Monday to Friday 8.00am to 6.00pm and Saturday mornings.

We quote before treatment starts and offer interest-free payment plans, with HICAPS on-site claiming.

Call 13 13 16 or book online.

Contact Core Dental

Phone	13 13 16
Booking	Online through your practice page, or call 13 13 16
Hours	Monday to Friday 8.00am to 6.00pm, Saturday mornings, Sunday closed

This article is general in nature and does not replace advice from a registered dental practitioner who has examined you. Results, recovery times and potential risks vary for each individual. Seek advice from a qualified, AHPRA-registered practitioner before proceeding.

Can dental amalgam cause an allergic reaction?

Yes, but it is uncommon. A reaction can happen in people allergic to mercury or another metal in amalgam. At Core Dental we examine the area to confirm the cause before suggesting any treatment.

What metals are in an amalgam filling?

An amalgam filling combines mercury with silver, tin, zinc and copper. Core Dental dentists can explain the filling materials available for each tooth, including tooth-coloured options.

What does a contact lichenoid reaction look like?

It usually appears as redness or itching inside the mouth, often on the cheeks or the sides of the tongue near an amalgam filling. It is named after the plant lichen. A Core Dental dentist can examine it.

What else can look like an amalgam allergy?

A rough or broken filling, spicy foods, certain toothpaste additives and preservatives, and some medications can cause similar symptoms. Core Dental dentists consider these possibilities when they examine you.

How does Core Dental treat a suspected amalgam reaction?

If a reaction is suspected, our dentists may replace the amalgam with tooth-coloured composite resin or another suitable material. We explain options, risks and costs, and quote before treatment starts.

Should I tell my dentist about allergies?

Yes. Please tell Core Dental about any allergies, including metals, latex and medications, when you book or at your first visit. This helps us choose suitable materials and plan your care safely.

How do I book a filling review at Core Dental?

Call Core Dental on 13 13 16 or book online through your nearest practice page. We are open Monday to Friday 8.00am to 6.00pm and Saturday mornings.

Does Core Dental offer payment plans for fillings?

Yes. Core Dental offers interest-free payment plans so you can spread the cost of treatment over time. Eligibility terms apply, and we quote before treatment starts.