Does Smoking Affect Dental Implants? | Core Dental

Canonical: https://www.coredental.com.au/does-smoking-affect-dental-implants/

Details:

Yes. Smoking is a recognised risk factor for dental implant problems and can reduce the chance of an implant healing and lasting well. Smoking reduces blood flow in the mouth, changes the balance of oral bacteria, slows wound healing and alters the body's immune response. At Core Dental our dentists discuss smoking openly before implant treatment, because it affects both planning and long-term care. Results vary for each person.

How does smoking affect your mouth and your implants?

Smoking affects the mouth in several connected ways:

Reduced blood flow: the gums and bone rely on a good blood supply to heal, and smoking narrows blood vessels.

A shift in oral bacteria: smoking is linked with a change in the balance of bacteria in the mouth towards types that are more harmful to gum tissue.

Slower wound healing: after an implant is placed, the bone and gum need to heal around it, and smoking can slow that process.

A changed immune response: the body may be less able to fight infection around the implant.

These effects are linked with a range of oral health problems, including gum disease, tissue loss, tooth loss, peri-implantitis and implant failure, and smoking is also a risk factor for oral cancer. For more general information, see our article on how smoking affects your oral health .

What is peri-implantitis and how is it linked to smoking?

Peri-implantitis is inflammation of the gum and bone around a dental implant. It can create deep pockets beside the implant and lead to bone loss. Signs can include bleeding, swelling, a loose feeling in the implant and, in some cases, pain. Smoking is linked with peri-implantitis, and the condition can be challenging to manage in people who continue to smoke. If you notice bleeding, bad taste or looseness around an implant, please see your dentist promptly.

Does smoking cause bone loss around dental implants?

Smoking is associated with more bone loss around implants after they are placed. Because an implant depends on the surrounding bone to hold it steady, losing bone around it can reduce its stability over time. Regular check-ups and X-rays, where appropriate, help your dentist monitor the bone level around your implant.

Can smoking affect bone grafting for dental implants?

Yes. Some people need a bone graft to build up the jaw before an implant can be placed. Smoking is associated with reduced graft success, which can mean less bone is available to hold an implant. Your dentist will talk with you about this during planning, because it may influence the timing and type of treatment recommended. You can read more about the options on our dental implants page and our conventional implants page .

What should you do if you smoke and want an implant?

An honest conversation with your dentist is a good starting point. Many dentists encourage patients to stop smoking, or at least to cut down, before and after implant treatment, and your dentist may advise waiting. Support is available through your GP and through Quitline, which you can reach on 13 7848. We will not judge you for smoking. Our aim is to give you accurate information so you can decide what is right for you.

Ask your dentist:

how smoking might affect your particular treatment plan

whether other options, such as dentures or bridges, are suitable

how often you should have your implants checked

what daily cleaning routine will help protect your implants

Smoking is named, by the Department of Health, as an implant risk factor

The answer to whether smoking affects dental implants does not depend on our opinion. The Victorian Department of Health names smoking explicitly, in the risk list on its own cosmetic dentistry page, and it is worth quoting exactly rather than paraphrasing.

The risk: "The bone may not fuse to the implant, and the implant will need to be removed."

Who is at greater risk of that: "People who are at a greater risk include those who: smoke ; have diabetes; have some bone conditions such as osteoporosis; are immune compromised."

Smoking is first on that list of four. The Department does not publish a figure for how much the risk increases — and neither will we, because converting a named risk group into a percentage would mean inventing the percentage. What the published advice establishes is the direction, not the magnitude.

What "the bone may not fuse" actually means. This is the mechanism worth understanding, because it explains why the risk is not about the day of surgery. The Department describes an implant as "a titanium screw that fuses with the jaw bone and a ceramic tooth that fits over the screw", and it explains elsewhere that "titanium is a safe material that allows bone to grow around it". The screw is not held in by being tight; it is held in because bone grows onto it.

That growth takes time: "It can take up to 6 months for the bone to fuse strongly to the screw. A temporary tooth may be provided for you to wear in the meantime."

So the vulnerable period is a months-long biological process, not an operation. Anything that affects how well bone heals is operating across that whole window, which is why the question of smoking is a question about the months after surgery as much as the weeks before it.

If fusion does not happen, the published consequence is unambiguous: the implant "will need to be removed". That is not a complication to be managed — it is the loss of the treatment.

And the assessment comes first. "Your general health" is one of the five things the Department lists as needing study before an implant is judged suitable, alongside "the gum and bone health, amount of space, your bite". Which means being straightforward about smoking at the planning stage is part of getting a sound plan, not a confession. A dentist who knows will plan differently; a dentist who does not

know is planning on wrong information.

Sources: Better Health Channel (Victorian Department of Health), Cosmetic dentistry and teeth whitening, betterhealth.vic.gov.au (reviewed 12 December 2025); Dental treatment, betterhealth.vic.gov.au (reviewed 3 June 2026). Both accessed 5 November 2026.

The second risk, which arrives later: gum disease around the implant

Failure to fuse is the risk in the first months. There is a second one that runs for as long as you have the implant, and smoking is a named risk factor for that too — through a different route.

The Department's statement on the implant itself: "It is more difficult to clean around an implant than a natural tooth. Gum disease around an implant can be very difficult to treat. If severe, the implant will need to be removed. This area may no longer be suitable for future implants."

Three escalating facts in one passage. Harder to clean than a natural tooth. Harder to treat if disease develops. And if it becomes severe, you may lose not only the implant but the possibility of replacing it at that site.

Now the connection. On gum disease generally, the Department's prevention guidance lists "quitting smoking" among the measures that reduce risk, and names smoking among the risk factors for gum disease. So smoking appears twice in this story: once as a named risk factor for the bone failing to fuse, and again as a named risk factor for the gum disease that can cost an implant later.

That second pathway is the slower one and the easier one to overlook, because it does not announce itself at the six-month mark. It is also the one most affected by what happens at home. The Department's position on cosmetic treatment generally applies squarely here: "Most cosmetic dental treatment requires extra care at home to prevent tooth decay, gum disease or other problems. Cleaning the area well and having a healthy diet is essential."

What the published advice does not provide , and what we are therefore not going to state: any figure for how long you should stop smoking before or after implant surgery. There is no such period in the state health advice we have read, and inventing one would be worse than useless — someone who could not meet an arbitrary deadline might conclude the treatment is closed to them, and someone who met it might believe the risk had been eliminated. Neither is true. What the published advice supports is that stopping reduces a named risk, and that the timing question belongs to the clinician planning your treatment.

Nor does it say smoking rules out an implant. It says smokers are in a group at greater risk of one specific failure. Those are different statements, and the difference is the whole basis of a sensible conversation about whether to proceed.

One related published figure, for a different procedure , since it is often confused with this one: the Department's wisdom teeth guidance advises not smoking for at least 48 hours after a tooth is removed, because of the effect on healing. That is advice about an extraction socket, not about implant fusion. Do not read it as the answer to how long to stop before implant surgery — the two are different procedures with different timeframes, and only the first has a published number.

If you smoke and you are considering an implant, the useful next step is an assessment that takes it into account. We would rather plan around a real risk than quote you a rule that does not exist.

Sources: Better Health Channel (Victorian Department of Health), Cosmetic dentistry and teeth whitening, betterhealth.vic.gov.au (reviewed 12 December 2025); Gum disease, betterhealth.vic.gov.au (reviewed 1 August 2025); Wisdom teeth, betterhealth.vic.gov.au (reviewed 3 June 2022). All accessed 5 November 2026.

Frequently asked questions

Can I get dental implants if I smoke?

Some people who smoke still have implants, but the risks are increased, and your dentist may recommend stopping or reducing first. A full assessment of your gums, bone and general health is needed before any plan is made.

Do vaping and other tobacco products affect implants?

Research on vaping is still developing, so we cannot say it is safe for implants. Nicotine and other tobacco products can affect blood flow and healing in similar ways. Please tell your dentist what you use so your care can be planned properly.

How long should I stop smoking before implant surgery?

There is no single answer, because it depends on your health and treatment plan. Your dentist or doctor can advise you on how long to stop before and after surgery. Stopping before surgery and staying smoke free afterwards generally supports healing.

What are the signs that an implant has a problem?

Bleeding or swelling around the implant, a bad taste, pain, a loose feeling or a visible change in the gum can all be warning signs. Please contact us promptly if you notice any of them, because early care helps protect the implant.

How can I protect my implant if I have quit smoking?

Brush twice a day with fluoride toothpaste, clean between your teeth or around the implant, and attend regular check-ups and professional cleans. Your dentist or hygienist can show you cleaning methods suited to your implant.

Where exactly does the published advice name smoking?

In the implant risk list. The Victorian Department of Health states that "the bone may not fuse to the implant, and the implant will need to be removed", and that "people who are at a greater risk include those who: smoke; have diabetes; have some bone conditions such as osteoporosis; are immune compromised." Smoking is first of the four.

Does smoking increase the risk by a known amount?

Not according to anything published that we have read. The Department names smoking as a risk factor without quantifying it, so we will not attach a percentage to it. The published advice establishes the direction of the risk, not its size.

Why does the risk last for months rather than days?

Because fusion is a biological process, not a fitting. The published description is that an implant is "a titanium screw that fuses with the jaw bone", and "it can take up to 6 months for the bone to fuse strongly to the screw". Anything affecting bone healing is acting across that whole period.

Is there a second way smoking can cost an implant?

Yes, and it is slower. The Department states that "it is more difficult to clean around an implant than a natural tooth", that "gum disease around an implant can be very difficult to treat", and that if severe "the implant will need to be removed. This area may no longer be suitable for future implants." Smoking is separately named among the risk factors for gum disease, and quitting appears in the Department's gum disease prevention advice.

Does the 48-hour no-smoking advice apply to implants?

No — that figure belongs to a different procedure. The Department's wisdom teeth guidance advises not smoking for at least 48 hours after a tooth is removed. There is no equivalent published period for implant surgery, so treat the two separately and ask the clinician planning your treatment.

Related services and further reading

Dental implants

Conventional implants

How does smoking affect your oral health?

All about dental implants

Everything you need to know about dental implants

Dental implants at Core Dental Wyndham

Dental implants or root canal treatment: which is right for me?

Why do people suffer from gum disease?

How can we help?

If you smoke and are thinking about dental implants, our team can talk through your options at any of our nine Core Dental clinics. Call 13 13 16 or book online. We will examine your teeth, gums and bone, explain the risks and quote before treatment starts, with interest-free payment plans available for some treatment and terms confirmed when you book. Explore our dental implants and specialist care services.

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.

Interest-free payment plans, HICAPS on-site claiming and bulk billing for eligible children under the Child Dental Benefits Schedule.

Call 13 13 16 or book online.

Contact Core Dental

Phone	13 13 16

Booking	Online via coredental.com.au, or call 13 13 16
Hours	Monday to Friday 8.00am to 6.00pm, Saturday 8.00am to 1.30pm (Bayside Saturday 8.30am to 1.30pm), Sunday closed
Clinics	Southbank , South Melbourne , Caroline Springs , Carrum Downs , Epping , Wyndham , Berwick , Bayside , Glenferrie

Results, recovery times and potential risks vary for each individual. This information is general in nature and is intended for people over 18. Seek advice from a qualified, AHPRA-registered practitioner before proceeding.

How does smoking harm the success of an implant?

Smoking reduces blood flow, changes oral bacteria, slows healing and alters the immune response. These effects can raise the risk of gum problems, bone loss and implant failure. Core Dental dentists discuss your individual risks before treatment.

What is peri-implantitis?

Peri-implantitis is inflammation of the gum and bone around a dental implant, which can cause deep pockets, bleeding, looseness and sometimes pain. Smoking is linked with it. Core Dental recommends prompt review if you notice these signs.

Does smoking affect bone around an implant?

Smoking is associated with more bone loss around implants after placement, which can reduce stability over time. Core Dental dentists monitor bone levels with check-ups and X-rays where appropriate.

Can smoking affect a bone graft before implant surgery?

Yes. Smoking is associated with reduced bone graft success, which can leave less bone to hold an implant. Core Dental dentists consider this when planning treatment and explain your options.

Where can I get help to stop smoking before implant treatment?

Your GP can advise on support, and Quitline is available on 13 7848. Core Dental dentists can discuss timing of implant treatment with you and will not judge your smoking history.

How do I book an implant consultation at Core Dental?

Call Core Dental on 13 13 16 or book online at coredental.com.au. We examine your teeth, gums and bone, explain risks and quote before treatment starts. We are open six days a week, with Sunday closed.