Traditional and Clear Braces in Melbourne | Core Dental

Canonical: https://www.coredental.com.au/orthodontics/orthodontic-braces/

Details:

Orthodontic braces use brackets and wires to move teeth into a planned position and improve your bite. At Core Dental we offer traditional metal braces and clear (ceramic) braces, and we also offer internal lingual braces fitted to the backs of the teeth. Braces are an alternative to Invisalign, and the right choice depends on an examination of your teeth, gums and bite. Treatment time and results vary for each person.

What are orthodontic braces?

Orthodontic braces involve brackets and wires that are fixed to either the front of the teeth or the back of the teeth, where they are known as lingual braces. They are used to correct the position of the teeth and improve your bite, and they are an alternative to Invisalign clear aligners. Because braces are fixed in place, they cannot be taken out, and they are not misplaced the way a removable aligner can be.

How do traditional braces move teeth?

Traditional braces consist of a bracket attached to each tooth and an arch wire that runs through slots in the brackets. When the wire is tensioned, it slowly moves the teeth towards the desired position. Traditional braces are typically made of metal.

What are clear braces?

Clear braces, also known as ceramic or porcelain braces, are made from a ceramic material that matches the colour of your surrounding teeth. As with traditional braces, the clear brackets are attached to each tooth and a clear arch wire runs through the slots to guide the teeth into their new positions as it is tightened. Because the brackets are tooth-coloured or clear, they can be less noticeable during treatment than metal brackets.

Are braces suitable for you?

Braces are a way to straighten the teeth and correct the bite. They suit people whose overall oral health is good. If you have decay or gum problems, those may need separate treatment first.

Braces can be a good option in complex cases where Invisalign may not achieve the planned result.

Because braces preserve the natural teeth, they are conservative, and they are commonly used for children and teenagers.

Fixed braces do not depend on you remembering to put aligners back in.

There are also drawbacks to consider:

Some people find braces unsightly.

The brackets and wires may feel uncomfortable.

They cannot be removed, so brushing and flossing take extra time, and some foods may need to be avoided.

Lingual braces, which are attached to the inside of the teeth, can overcome some of these problems, and their fees differ from braces fixed to the outside of the teeth.

Your dentist or orthodontist will explain which option suits you and what the alternatives are.

What is the process for braces treatment?

Treatment starts with impressions and photos of your teeth, an OPG (orthopantomogram, a panoramic X-ray of the mouth and jaw) and a treatment plan that sets out the proposed final position of your teeth. Other treatment you need, such as fillings, extractions or cleans, is generally completed before orthodontic treatment begins.

Next, a set of brackets and wires, which may be metal or clear, is fitted. This appointment is often called the band up. The wires are then adjusted over several months to move your teeth gradually into position. As a general rule you attend for adjustments every six to eight weeks, and the visits may become more frequent later on as fine corrections are made. After treatment, you will usually need to wear a retainer, and your clinician will explain what is involved.

What are the risks and limits of braces?

Braces can cause soreness after fitting and after adjustments. Plaque can build up around brackets if cleaning is not thorough, which can lead to decay or gum inflammation, so careful brushing, cleaning between your teeth and regular check-ups matter throughout treatment. Treatment times differ for each person, and the final result depends on your teeth, your bite and how well you follow instructions. Your clinician will explain the risks before you decide.

How much do braces cost, and how can you pay?

Fees depend on the type of braces, how complex your case is and how long treatment takes, so we give you a written treatment plan and quote before treatment starts. We offer interest-free payment plans through Payright for amounts up to $20,000 over 3 to 30 months with fortnightly repayments, subject to eligibility and approval. HICAPS claiming is available on-site, and any rebate depends on your own health fund cover. Terms were published as at September 2026, so please confirm them when you book.

Where can you have braces at Core Dental?

Braces are available through our practices across Melbourne, and our specialist orthodontist Dr David Austin sees patients at Caroline Springs , Epping and South Melbourne . Dr Steven Smith is also listed as a specialist orthodontist on our team page. Confirm the practice and session when you book. See our orthodontist page and our dentists and registered specialists page for more.

Can orthodontic treatment reduce the risk of a dental injury?

This is a reason for braces that rarely appears in a price comparison, and for some patients it is the most substantial one.

The Australian Dental Association, in its policy on preventing and managing oral injuries, states that "children with prominent front teeth may be a higher risk of injury and may benefit from orthodontic

assessment and early treatment to reduce this risk." Teeth that sit forward of the lip line are simply more exposed to a blow, and bringing them back into the arch reduces that exposure.

The ADA's reason for treating injury prevention seriously is what an injury costs afterwards rather than at the time: "oral damage is often irreversible, frequently complex, difficult, and costly to repair." It also identifies who is most exposed, noting that "young children and teenagers have been identified as high-risk groups, particularly when learning to walk and when new and/or high-risk activities are involved" — which is the same age band in which orthodontic treatment is usually considered.

None of that makes injury risk the main reason to straighten teeth, and it is not a reason to begin treatment that is not otherwise indicated. It is a factor an orthodontic assessment can weigh alongside the others, and worth raising at a consultation if your child plays sport or has noticeably prominent upper front teeth.

Source: Australian Dental Association, Policy Statement 2.2.5, ada.org.au (reviewed 19 April 2024; accessed 3 November 2026).

What about protecting your teeth while you are in braces?

Playing sport in fixed appliances raises a real question, and the general principle the ADA applies is useful even though the appliance complicates it.

The ADA's position is that "the need to wear a mouthguard should be assessed by a dentist based on risk factors, including an individual's sporting or occupational activities and dental anatomy." Dental anatomy is named explicitly, and a mouth with brackets bonded to the teeth is a different proposition from one without. That assessment is therefore not something to settle from a website: ask at an appointment, because the answer depends on your appliance, your stage of treatment and your sport.

The ADA's sport risk tiers still indicate where the question is most pressing. It places in the group where a mouthguard is strongly recommended "off-road bike riding, skateboarding, rock climbing, white-water rafting, trampolining, combat sports, football, basketball, squash, and field hockey." It considers one "impractical or not warranted due to low risk of injury" in "swimming, athletics, aerobics, and rowing." Where head protection is already worn, it notes this "may thus obviate the need for mouthguards".

Two further points from the same policy apply during orthodontic treatment as much as at any other time. Protective equipment "should be used during training as well as competition". And "oral piercing jewellery may also increase the risk and degree of oral injury", which is worth knowing if you have an oral piercing and are about to have appliances fitted.

Who regulates the orthodontic title?

Because the word "orthodontist" is used loosely in advertising, it is worth stating what it means formally.

Orthodontics is one of the thirteen dental specialties in Australia approved by the Australian Health Workforce Ministerial Council and recognised by the Dental Board of Australia. Specialist registration in it requires a qualification in the specialty, all the requirements for general registration as a dentist, and a minimum of two years general dental practice.

A general dentist may provide orthodontic treatment, including braces and aligners, and many do so competently. What a general dentist may not do is hold specialist registration in orthodontics without meeting those requirements. The distinction is recorded publicly: Ahpra's online register of dental practitioners shows current registration status and, for dentists with specialist registration, the specialty concerned. You can check at ahpra.gov.au which applies to the clinician you are seeing.

Source: Dental Board of Australia, Specialist Registration, dentalboard.gov.au (page reviewed 18 March 2025; accessed 3 November 2026).

Frequently asked questions

Are braces or Invisalign the right choice for me?

It depends on your bite, your goals and how you would manage each option. Your dentist or orthodontist will explain both and recommend what suits your teeth after an examination.

How often will I need adjustments with braces?

As a general rule, adjustments are every six to eight weeks. Visits may become more frequent later in treatment as fine corrections are made.

Can children have braces?

Yes. Braces are commonly used for children and teenagers. An orthodontic assessment can be useful from around age 9 to 10, and our clinicians will explain whether to wait or start.

What is the difference between traditional and clear braces?

Traditional braces are typically metal. Clear braces use ceramic brackets that match the colour of your teeth and a clear wire, so they can be less noticeable. Both work in the same way.

Do I need other dental treatment before braces?

Possibly. Fillings, extractions or cleans are generally completed first so your teeth and gums are healthy before braces are fitted.

Can braces reduce the chance of a knocked-out tooth?

The Australian Dental Association notes that children with prominent front teeth may be at higher risk of injury, and may benefit from orthodontic assessment and early treatment to reduce that risk. It is one factor among several that an assessment can weigh, rather than a reason to start treatment that is not otherwise indicated.

Can I wear a mouthguard with braces?

That needs to be assessed rather than assumed. The ADA's position is that the need for a mouthguard should be assessed by a dentist based on risk factors including the individual's sporting or occupational activities and their dental anatomy, and fixed appliances change that anatomy. Ask at an appointment, because the answer depends on your appliance, your stage of treatment and your sport.

Which sports carry the highest risk to teeth?

The ADA places in its strongly-recommended group off-road bike riding, skateboarding, rock climbing, white-water rafting, trampolining, combat sports, football, basketball, squash and field hockey. It regards a mouthguard as impractical or not warranted for swimming, athletics, aerobics and rowing, and notes that existing head protection may remove the need in some sports.

Is "orthodontist" a protected title?

Orthodontics is one of the thirteen dental specialties recognised by the Dental Board of Australia and approved by the Australian Health Workforce Ministerial Council, and specialist registration in it requires a qualification in the specialty, general registration as a dentist and a minimum of two years general dental practice. A general dentist may provide orthodontic treatment without holding that specialist registration. The Ahpra register at ahpra.gov.au records which applies to a given clinician.

Do oral piercings matter during orthodontic treatment?

The ADA states that oral piercing jewellery may increase both the risk and the degree of oral injury. If you have an oral piercing and are about to have appliances fitted, mention it at your appointment.

Related services and further reading

Orthodontics

Invisalign

Invisalign fees

Types of Invisalign

Internal lingual braces

Children's braces and Invisalign

Orthodontist

Children's dentistry

Dental payment plans

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 and HICAPS on-site claiming.

Traditional braces, clear braces and internal lingual braces, as well as Invisalign.

Call 13 13 16 or book online.

Contact Core Dental

Phone	13 13 16
Booking	Online through 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	Find your nearest practice

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.

What are orthodontic braces at Core Dental?

Orthodontic braces at Core Dental use brackets and wires, fixed to the front or back of the teeth, to correct tooth position and improve the bite. They are an alternative to Invisalign clear aligners.

What force moves teeth with traditional braces at Core Dental?

Traditional braces have a bracket on each tooth and an arch wire running through slots in the brackets. At Core Dental, the wire is tensioned at adjustment visits and slowly moves the teeth towards the planned position.

What are traditional braces made of at Core Dental?

Traditional braces are typically made of metal. Core Dental also offers clear braces, made from ceramic that matches your teeth, and internal lingual braces fitted to the backs of the teeth.

How often are Core Dental braces adjusted?

As a general rule, you attend for adjustments every six to eight weeks during braces treatment at Core Dental. Visits can become more frequent later as fine corrections are made. Your clinician confirms your schedule.

What happens at the start of braces treatment at Core Dental?

Treatment starts with impressions and photos of your teeth, an OPG panoramic X-ray and a treatment plan showing the proposed final position. Fillings, extractions or cleans are generally completed before the braces are fitted.

Are braces suitable for children at Core Dental?

Braces are commonly used for children and teenagers because they preserve the natural teeth. Core Dental can assess a child from around age 9 to 10 and will explain whether treatment should start or wait.

Can I pay for braces at Core Dental over time?

We quote before treatment starts and offer interest-free Payright plans for amounts up to $20,000 over 3 to 30 months, subject to eligibility and approval. HICAPS claiming is available on-site. Terms published as at September 2026.

How do I book a braces consultation at Core Dental?

Call Core Dental on 13 13 16 or book online through coredental.com.au. Tell us you would like to discuss braces, and we will arrange an orthodontic assessment at a suitable practice.