Dental Splints and When a Dentist Recommends One | Core Dental

Canonical: https://www.coredental.com.au/what-are-dental-splints-and-why-would-my-dentist-recommend-them/

Details:

A dental splint, also called a nightguard or occlusal bite splint, is a custom-made appliance, usually made from hard acrylic, that fits over the biting surfaces of all the teeth in the upper or lower jaw. At Core Dental our dentists may recommend a splint as part of managing temporomandibular disorder (TMD), which involves the jaw joints or jaw muscles and can cause pain, restricted mouth opening or headaches. Splints are also used when clenching and grinding, known as bruxism, is wearing the teeth. Whether a splint suits you depends on an examination.

What is temporomandibular disorder and how is it linked to splints?

Temporomandibular disorder, or TMD, refers to any issue with the jaw joints (the temporomandibular joints) or the muscles used for chewing (the masticatory muscles). It may cause pain, restricted mouth opening, headaches or other signs and symptoms. Possible risk factors include trauma to the joint and muscle areas, clenching or grinding, stress and anxiety, and habits such as nail biting.

Clenching and grinding, called bruxism, is a relatively common sign of TMD. When your dentist suspects it, a splint is often one part of a wider management plan, which may also include advice about stress, habits, jaw exercises and review of your bite.

What is bruxism and what causes it?

Bruxism is the clenching or grinding of the teeth, and it can happen during the day, during sleep, or both.

Awake bruxism is mostly a semi-voluntary reaction to stress and anxiety.

Sleep bruxism has a cause that is still not fully understood. It has been associated with stress and anxiety, obstructive sleep apnoea, heavy alcohol or caffeine use, smoking and some antidepressant medicines.

If you suspect sleep apnoea, tell your dentist or doctor, because it may need its own assessment.

What damage can bruxism cause if it is not managed?

Over time, repeated clenching and grinding can place heavy loads on the mouth. Your dentist may look for:

Tooth wear and cracks. The biting surfaces can wear down, which is called attrition, and the teeth can crack under excessive force.

Strain on supporting structures. The gums, ligaments and bone around each tooth carry these forces. They may become sore, and the gums can recede or shrink as the tissues are irritated.

Jaw joint wear. Pressure can pass into the jaw joints and, over time, contribute to wear on the joint surfaces. You may notice clicking or grating sounds when you open and close, or limited mouth opening.

Muscle fatigue. The jaw muscles work overtime, so they may feel sore and tired. Other signs include headaches on waking and cheek biting.

How can a dental splint help protect your teeth and jaw?

A splint forms part of the management of sleep bruxism associated with TMD. It works in a few ways:

It provides a flat surface that spreads pressure evenly across all the teeth when you clench or grind, so force is not concentrated on one tooth or a small group of teeth.

It absorbs some of the forces created during bruxism, which helps protect the tooth surfaces.

It stops the teeth from being guided into unfavourable positions when you bite together, which steadies the relationship between the upper and lower jaws.

Its thickness keeps the mouth open slightly, similar to the jaw's natural resting position, which may help ease stress on the joints and muscles.

A splint does not cure the habit of grinding. It is designed to protect your teeth and support your jaw while the underlying causes are managed. Your dentist can tell you what to expect in your own situation.

What is the process of getting a dental splint?

If your dentist advises that you wear a splint at night, the usual steps are:

Assessment. Your dentist examines your teeth, jaw joints and muscles, asks about your symptoms and habits, and explains whether a splint is suitable.

Impression. An impression or mould of your teeth is taken and sent to a laboratory, where the splint is made to fit closely around your teeth.

Fitting. When the splint returns, it is placed in your mouth and your bite is checked. If needed, it is adjusted so that you bite evenly against the opposing teeth.

Review. Over time a splint can wear down with use and may need replacing. Regular reviews with your dentist help keep your teeth and surrounding structures healthy.

How do you look after a dental splint?

Your dentist will give you instructions for your own splint. In general, people clean the splint as advised, store it in its case when it is not in the mouth and bring it to check-ups so the fit and wear can be reviewed. If it cracks, feels uncomfortable or no longer fits, contact us rather than adjusting it yourself.

What should you ask your dentist about a splint?

It is reasonable to ask:

What do you think is causing my symptoms?

Is a splint suitable for me, and for which jaw?

When should I wear it, and for how long?

What are the limitations, and what else could help?

How often should the fit be reviewed?

What will it cost, and are there payment options?

How can we help?

If you are waking with sore jaws, headaches or worn teeth, our team can examine you at any of our nine Core Dental practices and talk through your options. Call 13 13 16 or book online. If you have trouble sleeping or suspect sleep apnoea, ask us about sleep dentistry , which is offered at select sites. We quote before treatment starts and can discuss interest-free payment plans.

What a splint does, and what the state health advice says it will not do

A splint is often presented as the answer to grinding. It is worth being precise about what it is for, because the published position is narrower than the way it is usually described — and knowing that in advance changes what you expect from it.

The Victorian Department of Health lists a bite splint among the treatment options for bruxism, and attaches a caveat to it in the same breath: "a special mouthguard ('bite splint') to wear at night to protect your teeth. In most cases, a bite splint will only help with the symptoms and will not stop you from grinding altogether. "

That is the sentence to hold onto. A splint is a shield, not a cure. It takes the wear that would otherwise fall on your teeth and reduces the strain reaching the jaw joint. It does not switch off the behaviour, and a dentist who tells you it will is overstating it.

The Department sets a splint alongside three other things it expects a clinician to do, and these are the parts most often skipped:

"repair of tooth damage" — dealing with what the grinding has already done.

"ruling out other types of tooth wear such as erosion" — worn teeth are not automatically ground teeth. Acid erosion looks different and has a different cause, and treating it as bruxism would miss the real problem.

"assessing risk factors including sleep disordered breathing" — the Department lists snoring and obstructive sleep apnoea among the risk factors for grinding. That matters well beyond your teeth, and a splint fitted without asking the question leaves it unasked.

Alongside the appliance, the Department lists management that has nothing to do with your mouth: "stress management therapy", "relaxation techniques", "cognitive behaviour therapy", "hypnotherapy", "good sleep hygiene" and "regular exercise". We mention these not to deflect from treatment but because the published list puts them next to the splint rather than after it.

So the honest framing of a splint is this: it protects the teeth you have while the causes are worked on separately. If stress, sleep or medication are part of the picture, the splint alone will not reach them.

Source: Better Health Channel (Victorian Department of Health), Teeth grinding, betterhealth.vic.gov.au (page reviewed 17 October 2025; accessed 4 November 2026).

How common grinding is, and why you may not know you do it

Two published figures put the problem in proportion, and they are worth separating because they describe different things.

The Department of Health states: "Bruxism is the involuntary clenching, grinding and gnashing of the teeth. About half of the population does it from time to time. Around 5% of the population grind their teeth regularly."

Occasional grinding, in other words, is close to ordinary. Regular grinding — the kind that wears teeth and strains the joint — is a much smaller group. Which group you are in is a clinical question, not

something to settle from an article.

The reason it goes unnoticed is structural: "Usually, a person doesn't realise that they grind their teeth in their sleep. The partner who shares their bed (and hears the grinding noises at night) is often the first to notice the problem. Parents may also hear it in their sleeping children."

That is why we look for the signs rather than waiting to be told. The Department's list of problems caused by grinding includes a "cracked tooth", "more wear and tear on the teeth than is normal", "broken teeth or broken restorations (for example, fillings)", "strain on the jaw joint (temporomandibular joint)", "pain or limited movement in the jaw joint", "sore jaw muscles", teeth "more sensitive to hot and cold things", and — both listed as rare — "tooth loss" and "enlargement of the jaw muscles".

Several of those are visible to us at a routine examination before you have noticed anything, which is a practical argument for mentioning any morning jaw ache or tooth sensitivity when you come in, even if it seems minor.

Source: Better Health Channel (Victorian Department of Health), Teeth grinding, betterhealth.vic.gov.au (page reviewed 17 October 2025; accessed 4 November 2026).

Frequently asked questions

Is a dental splint the same as a nightguard?

Yes, in everyday use the terms are often interchanged. A nightguard, occlusal bite splint and dental splint all describe a custom-made appliance, usually hard acrylic, that covers the biting surfaces of the teeth in one jaw. Your dentist can explain the type that suits you.

Will a splint stop me grinding my teeth?

Not necessarily. A splint is designed to protect your teeth and ease strain on the jaw while you grind or clench, rather than to remove the habit. Managing stress, sleep and other contributing factors may also be part of your plan.

Can I wear a splint on the upper or lower teeth?

A splint can cover the upper or lower teeth, giving full coverage of all the teeth in that jaw. Your dentist will recommend which jaw suits your bite and symptoms after examining you.

Does a splint last forever?

No. A splint can wear down with use and may need to be replaced. Regular reviews let your dentist check the wear and the fit and tell you when a replacement is sensible.

Is a splint uncomfortable to wear?

It can feel unusual at first. Your dentist checks and adjusts the fit so that you bite evenly. If it stays uncomfortable, tell us so it can be reviewed.

What does the published advice say a bite splint achieves?

The Victorian Department of Health puts it plainly: a bite splint is worn "at night to protect your teeth", and "in most cases, a bite splint will only help with the symptoms and will not stop you from grinding

altogether". It is protection, not a cure, and we would rather you knew that before it is made than after.

Should anything be checked before a splint is made?

The Department lists three things alongside the appliance: repairing existing tooth damage, "ruling out other types of tooth wear such as erosion", and "assessing risk factors including sleep disordered breathing". Worn teeth are not automatically ground teeth, and snoring and obstructive sleep apnoea are on its list of risk factors for grinding — so those are fair questions to ask at the appointment.

What else is recommended alongside a splint?

The Department's management list is "stress management therapy", "relaxation techniques", "cognitive behaviour therapy", "hypnotherapy", "good sleep hygiene" and "regular exercise". It sets these next to the splint rather than after it. Which, if any, suit you is a conversation to have with your dentist and, where relevant, your doctor.

How common is teeth grinding?

The Department of Health states that "about half of the population does it from time to time" and "around 5% of the population grind their teeth regularly". Occasional grinding is close to ordinary; regular grinding is a much smaller group, and which one applies to you is a clinical judgement rather than something to settle from a website.

Why might I not realise I grind my teeth?

Because it usually happens in your sleep. In the Department's words, "usually, a person doesn't realise that they grind their teeth in their sleep. The partner who shares their bed (and hears the grinding noises at night) is often the first to notice the problem." We often see the evidence — unusual wear, a cracked tooth, broken restorations, sore jaw muscles — before a patient has noticed anything, which is a reason to mention a morning jaw ache even if it seems trivial.

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Ways to manage grinding teeth

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Sleep dentistry

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, offer interest-free payment plans and claim from your health fund on the spot with HICAPS.

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.

Who might need a night splint at Core Dental?

People who clench or grind their teeth, or who have jaw joint or jaw muscle problems linked to temporomandibular disorder, may be offered a splint by a Core Dental dentist. We examine you first to confirm whether a splint suits your symptoms and bite.

What are dental splints made of?

Dental splints are usually made from hard acrylic. At Core Dental your dentist takes an impression of your teeth, the splint is made to fit closely over the biting surfaces of one jaw, and we check your bite when it is fitted.

How is a splint fitted at Core Dental?

Our dentist takes an impression or mould of your teeth, which is sent to a laboratory to make the splint. When it returns we place it, check that you bite evenly against the opposing teeth, and adjust it if needed.

What signs of teeth grinding should I mention to my dentist?

Tell our team if you notice worn or cracked teeth, sore or tired jaw muscles, headaches on waking, clicking or grating from the jaw, limited mouth opening, gum recession or cheek biting. These can be signs of bruxism or TMD.

Why might a splint need replacing?

A splint can wear down with use, particularly if you grind heavily. Core Dental dentists review the wear and fit at check-ups and will tell you when replacement is sensible. Contact us if it cracks or stops fitting.

What causes sleep bruxism?

The cause of sleep bruxism is still not fully understood. It has been linked with stress and anxiety, obstructive sleep apnoea, heavy alcohol or caffeine use, smoking and some antidepressants. Our dentists can discuss what may apply to you.

How do I book a jaw or grinding assessment at Core Dental?

Call Core Dental on 13 13 16 or book online through coredental.com.au. We are open Monday to Friday 8.00am to 6.00pm and Saturday mornings. Mention your jaw symptoms or grinding so we can plan your examination.

Does Core Dental offer payment plans for splints?

We quote before treatment starts so you know the cost up front, and we offer interest-free payment plans for dental treatment, with terms and eligibility set by the provider. HICAPS claiming is available on the spot at our clinics.