Custom vs Regular Sports Mouthguards | Core Dental

Canonical: https://www.coredental.com.au/what-is-the-difference-between-a-custom-fitted-sports-mouthguard-and-a-regular-sports-mouthguard/

Details:

A regular sports mouthguard is a plastic guard you can buy over the counter at a pharmacy or sports store, either as a solid guard in a range of sizes or a "boil-and-bite" type that you soften in warm water and mould to your teeth. A custom-fitted mouthguard is prescribed by a dentist and made from a detailed mould of your teeth and mouth. At Core Dental we can talk you through both options so you can choose a guard that suits your sport.

What is a regular sports mouthguard?

A regular sports mouthguard is made of plastic and is readily available from pharmacies and sports stores. It comes in two types:

Solid mouthguards , sold in a range of sizes.

"Boil-and-bite" mouthguards , which you soften in warm water and then mould to your teeth yourself.

Regular mouthguards are not individually made, so they do not fit exactly to the shape of your teeth. How much protection any mouthguard gives also depends on the amount and type of force applied, the thickness of the guard, whether it was moulded properly, and how well it stays on your teeth.

What are the pros and cons of a regular sports mouthguard?

Regular mouthguards have some practical advantages. They are easy to find, quick to fit and generally affordable, which is why many people start with one.

There are also drawbacks to consider. Because a regular guard does not match your teeth exactly, it may offer less protection for your teeth and jaws. Some people find it can affect speech, feel uncomfortable or make breathing harder, and a poorly fitting guard can be a potential choking hazard. Regular mouthguards may also not last as long as a custom-made one, so they may need replacing sooner.

What is a custom-fitted sports mouthguard?

A custom-fitted sports mouthguard is prescribed by a dentist and designed to fit your mouth, based on a detailed mould of your teeth. It is made by layering thermoplastic material, which is why it is often called a dual laminated mouthguard. Layering is intended to make the guard comfortable and durable. You can usually choose a colour or design, which many people, especially young players, enjoy.

Because it is made for you, a custom guard is shaped to your teeth and bite. It is designed to sit securely, which reduces the chance of it coming out during play.

How is a custom-fitted mouthguard made?

The process is simple and usually takes two appointments.

Examination. Your dentist examines your teeth to check whether you need any dental work that could affect how the mouthguard fits.

Moulds. Moulds of your upper and lower teeth are taken, either physically or digitally.

Making the guard. A dual laminated mouthguard is fabricated, and you can choose a colour or design.

Fitting. A short second appointment, usually after about two weeks, lets your dentist check the fit and show you how to care for the guard.

Timeframes can vary, so please ask us when you book.

What are the pros and cons of a custom-fitted mouthguard?

The advantages of a custom guard are that it is designed to protect the teeth and jaws, it is shaped for comfort, it is made to be durable, it should not restrict talking or breathing in the way a poorly fitting guard can, and it can come in a colour or design you choose.

The drawbacks are that you need a dental appointment and that it generally costs more than a regular guard. Fees vary, so we quote before treatment starts. The Australian Dental Association recommends custom-fitted mouthguards, and many people find the added comfort and fit worthwhile if they play contact or high-impact sport.

How should you look after a mouthguard?

Rinse your mouthguard after use, let it dry, and store it in a ventilated case away from heat. Check it regularly for wear, and bring it to your check-ups so your dentist can see whether it still fits. Children's teeth and jaws change as they grow, so a guard may need to be replaced or reviewed more often for young players.

How can we help?

If you or your child play sport, our team can talk about a custom-fitted mouthguard at any of our nine Core Dental practices. We can also check your teeth first so the guard fits well. Call 13 13 16 or book online. If a tooth is knocked out or damaged, contact us promptly and see our guidance on what to do if a tooth is knocked out .

What the profession's current policy actually says

The difference between a custom-fitted and an over-the-counter mouthguard is stated plainly in the Australian Dental Association's current policy, and the wording is more useful than a simple "custom is better".

"The most effective protection against oral damage is a custom fitted mouthguard, where precision fit and quality materials offer maximum comfort & injury prevention. Over-the-counter mouthguards provide better protection than no mouthguard, however their protection varies depending on the design, comfort, adaptation and thickness of the final product. Quality control of at-home custom adaptation is not achievable."

Three things in that passage. A custom-fitted guard is the most effective. An over-the-counter guard is better than nothing — the ADA says so explicitly, which matters for anyone choosing between a shop guard today and a custom one next month. And the reason the shop option varies is that "quality control of at-home custom adaptation is not achievable": you cannot verify your own boil-and-bite fit.

The Victorian Department of Health reaches the same conclusion: "A mouthguard, custom-fitted by your dentist, is considered to provide the best protection for the teeth, lips and jaw." It also describes custom-fitted guards as "made by a dentist or a dental technician to fit the person's mouth", which "provide the best protection due to their close fit, comfort and cushioning (shock absorption) effect", and notes that they "are the most expensive option. However, the cost of an injury to the teeth or jaw will be a lot more expensive. Dentists recommend custom-fitted mouthguards."

On the shop alternative it adds a replacement note: "A 'boil-and-bite' mouthguard should be replaced each season."

Whether you need one at all is a clinical judgement , not a sport-by-sport rule you can apply yourself. The ADA: "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."

Sources: Australian Dental Association, Policy Statement 2.2.5 - Prevention and Management of Oral Injuries, ada.org.au (the policy states it was approved 19 April 2024); Better Health Channel (Victorian Department of Health), Mouthguards, betterhealth.vic.gov.au (the page states its review date as 30 November 2014 - its qualitative statements are used here and no figures are taken from it). Both accessed 6 November 2026.

The four risk tiers, and the rules people break

The ADA's policy sorts activities into four tiers rather than giving a single list, and two of its other instructions are the ones most often ignored.

Tier one, 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."

Trampolining and rock climbing on a dental list surprise people. So does squash.

Tier two, where head protection "may thus obviate the need for mouthguards" : "full-face helmets in ice hockey and goalkeepers in field hockey cricket, rollerblading, and cycling."

Tier three, where a mouthguard "could be justified under certain circumstances" : "high diving, surfboarding, and skiing."

Tier four, "impractical or not warranted due to low risk of injury" : "swimming, athletics, aerobics, and rowing."

Rule one that gets broken: training counts. "Protective equipment such as helmets and mouthguards should be used during training as well as competition." The Department says the same: "Always wear a mouthguard for all sports and training where there is a risk of mouth injury, such as football, rugby, soccer, basketball, netball, water polo or hockey."

Rule two: braces and prominent teeth change the risk. The Department's risk factors for dental injury include "protrusive ('buck') front teeth"; "inadequate lip coverage over the front teeth"; "current orthodontic treatment, such as wearing braces"; and "participation in sports or leisure activities that carry a high risk of collision or falls".

The ADA adds a longer-term point: "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." Orthodontics Australia makes the same observation: "Protrusive upper front teeth can make your child prone to injury - particularly while playing sports."

And one risk factor nobody expects. "Oral piercing jewellery may also increase the risk and degree of oral injury."

What a mouthguard should feel like , from the Department's list: "be comfortable yet tight-fitting"; "allow normal breathing and swallowing"; "allow normal speech"; "not cause gagging"; "be odourless and tasteless". A guard that fails any of those is a guard that will not be worn.

Why the stakes are high. The ADA: "Oral damage is often irreversible, frequently complex, difficult, and costly to repair." And it identifies who is most at risk: "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."

Work, not just sport. The ADA lists occupational risks too: "Physical impact from work equipment where fracturing of teeth is likely, including labourers, tradespeople, and riggers", and "tooth abrasion where abrasive dust or particles may enter the mouth, including miners, bricklayers, and tilers."

If an injury happens. "Persons who have suffered oral injury should be promptly assessed by a dentist and be treated and reviewed as recommended by the dentist." The Department's first aid for a knocked-out adult tooth is to put it back "straight away" and "seek professional help immediately", and for a chipped or cracked tooth to be seen "as soon as possible because early repair can improve the survival of a damaged tooth".

There is also an Australian standard , which the ADA names: "Further information is contained in Australian Standard HB209-2003 'Handbook: Guidelines for the Fabrication, Use and Maintenance of Sports Mouthguards'."

Sources: Australian Dental Association, Policy Statement 2.2.5 - Prevention and Management of Oral Injuries, ada.org.au (the policy states it was approved 19 April 2024); Better Health Channel (Victorian Department of Health), Mouthguards, betterhealth.vic.gov.au (the page states its review date as 30 November 2014); Dental injuries, betterhealth.vic.gov.au (reviewed 4 August 2026); Teeth and mouth care, betterhealth.vic.gov.au (reviewed 25 July 2025); Orthodontics Australia (Australian Society of Orthodontists), When to see an Orthodontist, orthodonticsaustralia.org.au . All accessed 6 November 2026.

Frequently asked questions

Can I buy a mouthguard from a pharmacy instead?

Yes. Regular mouthguards are sold at pharmacies and sports stores, and some people use them. They are not made for your teeth, so they may fit less closely. Ask your dentist whether a custom guard would suit you.

How long does it take to get a custom mouthguard?

You usually need an examination and moulds at the first visit, then a short follow-up appointment after about two weeks for the fitting. Timing can vary, so please ask our team when you book.

Can children have a custom-fitted mouthguard?

Yes, children can have a custom guard. Because young mouths change as they grow, your dentist can advise how often the guard should be checked or replaced. Eligible children may also have a check-up covered under the Child Dental Benefits Schedule.

Does a mouthguard make it hard to breathe or talk?

A poorly fitting guard can be uncomfortable and make speech or breathing harder. A guard made from a mould of your teeth is designed to sit securely, and your dentist checks the fit and can adjust it where needed.

Can I choose the colour or design?

Yes. When a custom mouthguard is made, you can choose a colour or design. Ask us about available options when you book your appointment.

Is a custom-fitted mouthguard really better?

Yes, and the Australian Dental Association says why: "The most effective protection against oral damage is a custom fitted mouthguard, where precision fit and quality materials offer maximum comfort & injury prevention."

Is a shop-bought one useless then?

No — the ADA is explicit that it is better than nothing: "Over-the-counter mouthguards provide better protection than no mouthguard, however their protection varies depending on the design, comfort, adaptation and thickness of the final product."

Why does a boil-and-bite guard vary so much?

Because you cannot check your own fit. "Quality control of at-home custom adaptation is not achievable." The Victorian Department of Health adds that boil-and-bite guards "may not conform to the person's bite and can be uncomfortable to wear", and that one "should be replaced each season".

Who decides whether I need one?

A dentist. "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."

Which activities most need one?

The ADA's strongly-recommended tier is "off-road bike riding, skateboarding, rock climbing, white-water rafting, trampolining, combat sports, football, basketball, squash, and field hockey".

Which need one least?

Its lowest tier, where a mouthguard is "impractical or not warranted due to low risk of injury", is "swimming, athletics, aerobics, and rowing".

Do I need it at training as well as games?

Yes. "Protective equipment such as helmets and mouthguards should be used during training as well as competition." The Department asks you to "always wear a mouthguard for all sports and training where there is a risk of mouth injury".

Does wearing braces change things?

It is a listed risk factor. The Department includes "current orthodontic treatment, such as wearing braces" among its risk factors for dental injury, alongside "protrusive ('buck') front teeth" and "inadequate lip coverage over the front teeth".

My child has prominent front teeth. Should I do anything?

The ADA suggests an assessment: "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."

Does a mouth piercing matter?

The ADA says it can: "Oral piercing jewellery may also increase the risk and degree of oral injury."

What should a mouthguard feel like?

The Department's list: "be comfortable yet tight-fitting"; "allow normal breathing and swallowing"; "allow normal speech"; "not cause gagging"; "be odourless and tasteless".

Is this only about sport?

No. The ADA lists occupational risks too: "Physical impact from work equipment where fracturing of teeth is likely, including labourers, tradespeople, and riggers", and "tooth abrasion where abrasive dust or particles may enter the mouth, including miners, bricklayers, and tilers."

What if an injury happens anyway?

"Persons who have suffered oral injury should be promptly assessed by a dentist and be treated and reviewed as recommended by the dentist." For a knocked-out adult tooth, put it back "straight away" and "seek professional help immediately"; for a chip or crack, be seen "as soon as possible".

Related services and further reading

Sport mouthguards

General dentistry

Children's dentistry

Emergency dentistry

What to do if a tooth is knocked out

What to do in a dental emergency

Top tips for children's dental hygiene

Understanding your treatment

Planning your care

When you book, tell us about your sport, any previous dental injuries and any dental work you have had, and bring relevant medical information. Ask what the recommended approach is intended to achieve, whether there are reasonable alternatives, and what it will cost. Fees, offers, rebates and finance terms can change, so confirm current written terms, what a quoted figure includes and any health fund rebate before booking or paying.

Call 000 immediately for uncontrollable bleeding, difficulty breathing or swallowing, serious facial injury or other life-threatening symptoms.

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.

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

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	Southbank , South Melbourne , Caroline Springs , Carrum Downs , Epping , Wyndham , Berwick , Bayside , Glenferrie

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.

What are boil-and-bite mouthguards?

Boil-and-bite mouthguards are a type of regular sports mouthguard sold over the counter. You soften the plastic in warm water and mould it to your teeth. Core Dental can explain how they differ from custom-fitted guards.

Where can I buy a regular sports mouthguard?

Regular sports mouthguards are readily available over the counter at pharmacies and sports stores, as solid guards in a range of sizes or boil-and-bite types. Core Dental can advise whether a custom guard suits you better.

How is a custom mouthguard made at Core Dental?

Our dentist examines your teeth, takes moulds of your upper and lower teeth physically or digitally, and a dual laminated guard is made with your choice of colour or design. A short fitting visit follows.

Why do dentists use layered material for custom mouthguards?

A dual laminated custom mouthguard is made by layering thermoplastic material, which is intended to make it comfortable and durable. Core Dental dentists can show you the options when you book.

Who recommends custom-fitted mouthguards?

The Australian Dental Association recommends custom-fitted mouthguards. At Core Dental we can examine your teeth, discuss your sport and explain whether a custom guard is suitable for you or your child.

What can affect how well any mouthguard protects teeth?

Protection depends on the force involved, the thickness of the guard, whether it was moulded properly and whether it stays in place. Core Dental dentists can check the fit and advise you.

How do I book a custom mouthguard 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 across our nine Melbourne clinics, and we quote before treatment starts.

Does Core Dental offer payment plans for sports mouthguards?

Core Dental offers interest-free payment plans for dental treatment and HICAPS on-site claiming. Fees vary, so we quote before treatment starts and you should confirm current terms and any health fund rebate.