What Should I Know About Dental Crowns? | Core Dental

Canonical: https://www.coredental.com.au/what-should-i-know-about-dental-crowns/

Details:

A dental crown, also called a dental cap, is a fixed restoration that covers a tooth completely to help restore its strength, shape and appearance. At Core Dental our dentists may recommend a crown when a tooth has lost a lot of its structure, for example from a large cavity, after root canal treatment, or because it is worn, chipped or weakened. Crowns are made to match the neighbouring teeth and fit onto the prepared tooth. Whether a crown suits you depends on an examination.

What is a dental crown?

A dental crown is a cover that fits over an existing tooth, sitting over the whole visible part of the tooth above the gum. It is designed to match your neighbouring teeth in shape and shade and to fit closely onto the tooth that has been prepared. The aim is a durable restoration that protects the tooth and helps it work normally when you bite and chew. Your dentist will explain how a crown could apply to your own tooth.

When might a dentist recommend a crown?

Crowns may be considered in several situations:

A tooth that has lost a lot of its structure

A cavity too large for a filling to repair

A tooth that has had root canal treatment and needs protection

A missing tooth, where a crown is placed on a dental implant

Teeth that are worn, chipped or weakened

Discoloured or badly shaped teeth, for cosmetic reasons

A bridge, where crowns on the teeth either side of a gap help to support the replacement tooth

Your dentist will look at the tooth, the gum and your bite before suggesting an option, and will explain reasonable alternatives.

What types of dental crown are there?

There are generally three main types: gold crowns, porcelain (ceramic) crowns, and porcelain fused to metal crowns. Each has different advantages and limitations, and the right choice depends on the tooth, where it sits in your mouth, your bite and your preferences.

Why are gold crowns usually used on back teeth?

Gold crowns are strong, resist fracture and generally need little tooth preparation. Because of their distinctive gold colour, they are typically suggested for back teeth where they are not easily seen. Many people prefer a tooth-coloured material for visible teeth, and we can talk through the options with you.

Why are porcelain crowns often used for front teeth?

Porcelain, or ceramic, crowns are designed to resemble natural teeth closely in shape and colour, so they are often chosen for front teeth. For front teeth they may be made from ceramic alone, or from two layers, with a strong core covered by a ceramic layer. Your dentist can show you which material may blend with your teeth.

Can you have a same-day crown at Core Dental?

Some of our clinics, including Epping, South Melbourne and Caroline Springs, offer CEREC same-day crowns, where the crown is designed and milled during the one visit. Not every tooth or situation suits this approach, so please ask when you book and confirm availability at your clinic. You can read more about CEREC same-day crowns .

How do you look after a crown?

A crown does not decay, but the tooth underneath and the gum around it still can. Brushing twice a day with fluoride toothpaste, cleaning between your teeth and having regular check-ups help protect it. Please tell us if the crown feels high, loose or sensitive, because it may need adjusting.

How can we help?

If you are thinking about a crown, our team can examine your tooth and explain your options at any of our nine Core Dental practices. Call 13 13 16 or book online. We quote before treatment starts and offer interest-free payment plans. See our page on dental crowns or read which dental crown you might choose .

Crown, onlay or veneer: three things that are routinely conflated

People arrive asking for a crown when they mean a veneer, and are quoted for a crown when an onlay would do. The Victorian Department of Health defines all three on one page, in wording precise enough to tell them apart, so it is worth setting the three side by side.

Crowns and onlays , as the Department words it: "Crowns or onlays – these are caps that are permanently cemented or bonded to a tooth. Crowns cover the whole tooth and can be made of porcelain, metal, or a combination of both depending on the area and the aesthetic or functional needs. Onlays cover the tooth less extensively than a crown and may be used if there is enough tooth structure remaining to support it."

Two distinctions are packed in there. The first is coverage: a crown covers the whole tooth, an onlay covers it less extensively. The second is the condition attached to the onlay — it "may be used if there is enough tooth structure remaining to support it". That is the clinical question that decides between them, and it is a property of your tooth, not a preference. If enough sound tooth remains, less of it needs covering. If it does not, the choice has already been made for you.

Veneers are a different thing altogether: "a veneer is a thin layer of resin or porcelain that is permanently glued to the front of the tooth. Sometimes the tooth needs to be slightly ground down to allow space for the veneer."

Note the front of the tooth . A veneer addresses an appearance problem on a visible surface. It is not a cap, does not cover the whole tooth, and is not a structural repair for a tooth that has lost substance.

The second sentence is the one worth not skipping — the Department says the tooth may need to be "slightly ground down", which makes a veneer an irreversible alteration rather than something applied on top and removable later.

And the simplest option is on the same list : "Composite resins - chipped, discoloured or oddly shaped teeth can be treated by bonding a tooth-coloured resin filling to improve the appearance of the affected tooth. This resin may need to be replaced in future if it chips, wears or stains."

So the published advice offers an ascending set: bond resin to the tooth, glue a thin layer to the front of it, cover part of it, or cover all of it. The Department frames all four as treatments that "help restore the appearance, shape and function of your teeth" — appearance is listed first, but shape and function are in there too, which is why the same vocabulary gets used for cosmetic and structural work and why the two get confused.

On materials, the Department's statement for crowns is that they "can be made of porcelain, metal, or a combination of both depending on the area and the aesthetic or functional needs". Again a dependency rather than a ranking: where the tooth is, and whether you are solving a look or a load.

One thing the published advice does not do is tell you how long any of these last. It gives no lifespan for a crown, an onlay, a veneer or a bonded resin — its only durability statement is the one above, that composite resin may need replacing if it chips, wears or stains. Where figures for longevity appear elsewhere on our site they come from practice experience rather than published state health advice, and we would rather mark the difference than blur it.

Source: Better Health Channel (Victorian Department of Health), Dental treatment, betterhealth.vic.gov.au (page reviewed 3 June 2026; accessed 4 November 2026).

Why a root-filled tooth so often ends up under a crown

If you have been told you need a crown after root canal treatment, it can sound like an upsell. The published advice explains why it is usually neither optional nor cosmetic, and the reasoning is structural.

The Victorian Department of Health's account of the final stage of root canal treatment:

"Making the tooth functional again – to make sure no bacteria from the mouth can leak back into the tooth, a large, well-sealed restoration is put on the tooth. Teeth that require root canal treatment have sometimes lost a lot of tooth structure due to previous decay or cracks and may require further protection in the form of posts, crowns or other similar materials."

Two separate jobs in one sentence. The first is a seal — keeping mouth bacteria out of canals that have just been cleaned and filled. The Department is explicit about why that matters: earlier in the same account, the aim of filling the canals is "to prevent bacteria from re-infecting the empty canals in your tooth". A leaking restoration undoes the treatment.

The second job is mechanical. The phrase is "have sometimes lost a lot of tooth structure due to previous decay or cracks" — the tooth needing a root canal is frequently a tooth that was already badly damaged, which is how the pulp got infected in the first place. The Department's companion guidance states it directly: "After root canal treatment is completed, the biting surface is covered with filling material or a crown. This also protects the tooth from breaking after root canal treatment."

Protects it from breaking. That is the argument, and it is about the tooth that is left rather than the treatment just performed.

Posts. The published wording groups "posts, crowns or other similar materials" together as further protection. A post is not a separate treatment you are being sold on top; it is part of the same problem of giving a weakened tooth something to hold onto.

There is also a colour consequence, and it is specific. The Department: "A normal tooth with a healthy pulp is yellowish-white in colour. A pulp-free tooth that is sealed with a filling rather than covered by a

crown may eventually turn grey." Read the construction — the greying is attributed to being sealed with a filling rather than covered by a crown. So the choice between a filling and a crown on a root-treated tooth has an appearance dimension as well as a structural one, and that is published advice rather than a sales point. The Department adds that "the dentist can advise you on appropriate aesthetic (cosmetic dentistry) procedures to help with this", which is an acknowledgement that it can be addressed afterwards too.

What the published advice does not promise. It gives no figure for how long a crowned, root-filled tooth lasts, saying only that a treated tooth "should last a very long time, provided that you maintain good oral hygiene, avoid consuming too much sugar and have regular dental check ups" — and then adding the honest qualifier: "Of course, no therapy or replacement will last as well as a healthy tooth."

On outcomes it is willing to be numerical, but only about one thing. Its statement is that "about 90 to 95 per cent of people who undergo root canal treatment can expect a functional tooth after the treatment". That measure is a functional tooth — not a guarantee of comfort, not a promise that nothing further will ever be needed. Quoted with its own wording it is genuinely encouraging; stretched into anything else it stops being what the Department said.

Sources: Better Health Channel (Victorian Department of Health), Root canal treatment, betterhealth.vic.gov.au (reviewed 14 July 2025); Dental treatment, betterhealth.vic.gov.au (reviewed 3 June 2026). Both accessed 4 November 2026.

Frequently asked questions

Is a dental crown the same as a dental cap?

Yes. The two names describe the same thing: a fixed restoration that covers a tooth. Dentists more often say crown. Your dentist can explain which material and design may suit your tooth.

Does getting a crown hurt?

We usually use local anaesthetic so you should not feel pain during preparation. Your tooth or gum may feel tender afterwards for a short time. If discomfort continues, let us know so we can check your bite and the fit.

How many visits does a crown take?

A traditional crown generally takes more than one visit, with a temporary crown fitted in between. Some of our clinics offer CEREC same-day crowns. Your dentist will explain what suits your tooth and clinic.

Can a crown be used with a dental implant?

Yes. When a tooth is missing, a crown can be fitted on top of a dental implant to replace the visible part of the tooth. Your dentist or a specialist will assess whether an implant is suitable for you.

How long will a crown last?

How long a crown lasts depends on the material, the tooth, your bite and how well you care for your teeth and gums. Regular check-ups let your dentist monitor it, and results vary for each person.

What is the difference between a crown and an onlay?

How much of the tooth is covered, and whether enough tooth is left to allow the smaller option. The Victorian Department of Health's wording is that "crowns cover the whole tooth" while "onlays cover the tooth less extensively than a crown and may be used if there is enough tooth structure remaining to support it". That condition is the deciding factor, and it is a property of your tooth rather than a preference.

Why is a crown sometimes needed after root canal treatment?

For two reasons the published advice states separately. One is sealing: a "large, well-sealed restoration is put on the tooth" so "no bacteria from the mouth can leak back into the tooth". The other is strength — teeth needing root canal treatment "have sometimes lost a lot of tooth structure due to previous decay or cracks", and covering the biting surface "protects the tooth from breaking after root canal treatment".

Is a veneer an alternative to a crown?

Usually not, because they solve different problems. A veneer is "a thin layer of resin or porcelain that is permanently glued to the front of the tooth" — a visible-surface treatment, not a cap over the whole tooth. It is also not reversible: the Department notes that "sometimes the tooth needs to be slightly ground down to allow space for the veneer".

Can a root-filled tooth change colour?

It can, and the published advice ties this to how the tooth is restored. The Department states that "a pulp-free tooth that is sealed with a filling rather than covered by a crown may eventually turn grey", and that a dentist "can advise you on appropriate aesthetic (cosmetic dentistry) procedures to help with this" if it happens.

What is a post, and why would my tooth need one?

It is part of the same problem as the crown. The published wording groups "posts, crowns or other similar materials" together as "further protection" for a tooth that has lost a lot of structure — so a post is not an extra treatment added on top, but a way of giving a weakened tooth something to hold the restoration.

Related services and further reading

Dental crowns

CEREC same-day crowns

Which dental crown should I choose?

When should I consult a specialist for a dental problem?

General dentistry

Dental implants

Contact Core Dental

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.

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 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.

What does a dental crown do for a damaged tooth?

A crown covers the whole visible part of a tooth to help restore its strength, shape and appearance. Core Dental dentists may suggest one when a tooth has lost a lot of structure, and will explain alternatives first.

When might Core Dental recommend a crown?

Our dentists may consider a crown for a cavity too large for a filling, a tooth after root canal treatment, worn, chipped or weakened teeth, cosmetic concerns, to cover an implant, or to support a bridge.

Which crown materials are used at Core Dental?

Generally the main types are gold, porcelain (ceramic) and porcelain fused to metal. Our Core Dental dentists help you choose by considering the tooth, its position, your bite and your preferences.

What makes gold crowns a common choice for molars?

Gold crowns are strong and need little tooth preparation, but their colour is noticeable, so they are typically suggested for back teeth. Core Dental dentists can discuss tooth-coloured options for visible teeth.

Where does Core Dental offer CEREC same-day crowns?

Core Dental offers CEREC same-day crowns at Epping, South Melbourne and Caroline Springs, where a crown is designed and milled in one visit. Please confirm availability and suitability when you book.

How do I care for a dental crown?

Brush twice daily with fluoride toothpaste, clean between teeth and attend regular check-ups at Core Dental. The tooth under a crown can still decay, so good hygiene helps protect it.

How do I book a crown consultation at Core Dental?

Call 13 13 16 or book online through coredental.com.au. Our team will arrange an examination, explain your options and provide a quote before treatment starts, with interest-free payment plans available.