Why Do People Suffer From Gum Disease? | Core Dental

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Details:

Gum disease starts when plaque builds up on the teeth and under the gum line. Plaque is a sticky film of bacteria and food debris. If daily brushing and cleaning between the teeth do not remove it, it can harden into calculus (tartar), which can spread under the gums and, over time, damage the bone that supports the teeth. Smoking, diabetes, hormonal changes, genetics and nutrition can all play a part. At Core Dental we can examine your gums and explain what applies to you.

How does gum disease develop?

Your teeth are supported by surrounding bone and connective fibres, with blood vessels and nerves running through them. The small pocket between the gum and the tooth can be a place where bacteria grow if it is not cleaned properly.

Without regular brushing and flossing, the bacteria in plaque can multiply and harden onto the tooth surface, forming tartar or calculus. Once tartar has formed, it is difficult to remove at home and can spread underneath the gums, eventually destroying the bone that supports the tooth.

Can gum disease be diagnosed and treated?

Periodontitis is a diagnosis that a dental health professional makes after careful examination of the mouth. Its predecessor, gingivitis, is inflammation of the gums. Gingivitis is generally reversible with treatment and good home care. Unlike gingivitis, periodontitis is not usually reversible, but it can be stabilised with professional treatment and ongoing maintenance. You can read about what gum disease treatment involves .

What causes gum disease, and how would you know if you have it?

The main causes of periodontitis include a lack of regular brushing and flossing, smoking and diabetes. Other contributors can include genetics, hormonal changes and nutritional deficiencies.

The early stages can go unnoticed, but things you may notice include:

Bleeding gums when you brush or floss.

Blood on your pillow when you wake up.

Swollen, puffy gums that look bright red.

Gums that recede, which can make your teeth sensitive.

A foul taste or odour coming from an area of your mouth.

Bad breath.

Teeth that drift or loosen, with new gaps developing between them.

A change in how your teeth feel when you bite down.

Pain when eating or chewing.

If you notice any of these, please book an examination so that we can find out what is causing them.

How does smoking affect gum disease?

Smoking is a recognised risk factor for gum disease. It reduces blood flow to the oral tissues, affects the body's immune response and can slow the healing of your gums. Smoking can also mask the signs of gum disease by reducing the bleeding and inflammation you might otherwise see, while it speeds up the destruction of bone. Many people who quit find that their gums respond to treatment, and your dentist or GP can support you. Your dentist can also talk about how smoking affects your gum health and your risk of oral cancer.

Is there a link between diabetes and gum disease?

Yes. People with elevated or poorly controlled blood glucose have a higher risk of developing severe gum disease, and the relationship can work both ways, because gum disease can make it harder to control blood glucose. If you have diabetes, please tell your dentist and keep up regular check-ups. See also how diabetes affects your oral health .

Can hormonal changes contribute to gum disease?

Yes. Hormonal changes, for example during pregnancy and menopause, can create conditions in which gum tissue is more reactive to plaque, and some people notice bleeding or sensitive gums. If you are pregnant or going through menopause, a check-up and a hygiene visit can help you look after your gums. See also our article on dental health during pregnancy .

What can you do at home to protect your gums?

These daily habits help reduce plaque:

Floss daily. A manual, waxed floss is a good option, and using any floss is worthwhile. Flossettes can help in hard-to-reach areas, and interdental brushes can clean larger gaps between teeth that have drifted apart. Choose a brush size that fits comfortably between two teeth. If you have braces or a bridge, ask us about floss designed to thread under wires and bridges.

Check your brushing technique. Many people brush every day but miss the area where the tooth meets the gum, where plaque tends to collect. We suggest brushing for two minutes in gentle circular motions with a soft-bristled toothbrush, electric or manual, and a fluoride toothpaste. If your teeth are sensitive, your dentist can suggest products that may help.

Rinse with warm salt water. A warm salt-water rinse can help reduce bacteria in the mouth and is simple and inexpensive. A dentist may recommend a chlorhexidine mouthwash for short-term use if it is needed.

Talk about smoking. Speaking with your dentist or GP is a worthwhile step towards healthier gums.

Why do regular dental visits matter?

Your dentist may refer you to a gum specialist (periodontist) or ask you to attend every six or twelve months for a thorough clean, depending on the state of your gums. Regular visits allow us to reach areas that are hard to clean at home, remove hardened tartar and keep track of any changes in your gums. Our team can also show you how to improve your technique.

How can we help?

Our dentists and hygienists can assess your gums and explain your options at any of our nine Core Dental practices. Call 13 13 16 or book online. If you feel anxious, let us know and we will go at your pace.

Why it is so common, and the three things that change your risk

The first thing worth knowing about gum disease is how ordinary it is. The Victorian Department of Health opens with it: "gum disease affects most people at some stage in their life."

That is not a reason to shrug. It is a reason to understand the mechanism, because the mechanism explains why it recurs and why there is no one-off cure.

"Gum disease is usually caused by a build-up of plaque on teeth and along the gum line. Plaque is a sticky coating containing bacteria. The immune system tries to get rid of plaque with an inflammation response. This is seen as redness and swelling of the gum around the tooth."

Two things follow from that description. The inflammation you can see is your own immune system , not the bacteria directly — which is why gum disease varies so much between people with similar brushing habits. And plaque is not an occasional visitor: "everybody has a range of bacteria in their mouth. Plaque is constantly being formed by some of these bacteria when they feed on the sugars in the foods and drinks you consume."

Constantly formed. That is why daily cleaning is the whole of prevention, and why stopping for a fortnight shows up.

Beyond cleaning, the Department names three modifiable risks.

Sugar, specifically in drinks. "Excess sugar consumption can lead to gum disease and tooth decay. Limit your intake of food and drinks containing sugars (soft drink, fruit juices, cordial, sports drinks, energy drinks, and hot drinks sweetened with sugar or honey)." Note what is on that list: fruit juice and sweetened hot drinks, which people rarely count. Its other advice is to avoid sugary food and drink "especially between meals" — frequency matters as much as quantity.

Smoking. Listed as a risk factor for both gum disease generally and periodontitis specifically. The Department points to Quitline for help.

Diabetes, if poorly managed. Also listed twice, and the Department puts the lever plainly: "for people with diabetes, keeping blood sugar levels well-controlled will help to reduce the risk of gum disease."

If any of those three apply to you, say so when you come in. They change what we look for and how often we would want to see you — and the Department's closing advice on intervals is exactly that: "ask your oral health professional how often you should visit for a check-up", rather than assuming a standard gap.

Source: Better Health Channel (Victorian Department of Health), Gum disease, betterhealth.vic.gov.au (page reviewed 1 August 2025; accessed 4 November 2026).

What is actually being damaged, and why dentures are on the list

"Gum disease" undersells what is at stake, because the gum is not the structure that holds a tooth in.

The Department of Health explains the anatomy: "the job of the gum is to provide a protective covering for the bone that holds your teeth in place. The periodontium is the name given to the group of gum and bone structures that surround and support the teeth, keeping them in place. The gum protects the periodontium by forming a seal that runs around the neck of the tooth."

So the gum is a seal over the thing that matters. Periodontitis is "the inflammation of the periodontium, caused by the bacteria in plaque and the body's immune response to it", and what it damages is "the covering of the tooth root (cementum), the bone and the fibres that connect the tooth root to the bone (periodontal ligament)".

Once that seal fails, the process becomes self-feeding: "when the seal of the gum is damaged by gum disease, spaces can form between the tooth root and the gum. These spaces are called 'periodontal pockets'. Bacteria get trapped in these pockets and cause even more damage to the periodontium. Over time, bone is damaged and lost, and larger spaces or pockets begin to form between the tooth and the gum."

A pocket shelters the bacteria that deepen the pocket. That is the honest reason home cleaning stops being sufficient at some point — not a failure of effort, but a space a toothbrush cannot reach.

And the endpoint, stated without euphemism: "if periodontitis is not treated, the structures that hold the tooth firmly into the gum can become so damaged that teeth become loose and painful and may need to be removed."

One prevention item deserves separate mention , because it surprises people and is easy to overlook: "clean dentures every day. Plaque can easily build up on dentures, increasing the risk of gum disease around your natural teeth." A partial denture that is not cleaned daily is a reservoir sitting against the teeth you still have.

Source: Better Health Channel (Victorian Department of Health), Gum disease, betterhealth.vic.gov.au (page reviewed 1 August 2025; accessed 4 November 2026).

Frequently asked questions

Is bleeding when I brush normal?

Bleeding when you brush or floss is not something to ignore. It can be an early sign of gum inflammation. Keep cleaning gently and book an examination so we can find out the cause.

Can gum disease be reversed?

Gingivitis, the early stage, is generally reversible with professional cleaning and good home care. Periodontitis is not usually reversible, but it can often be stabilised with treatment and regular maintenance.

Does smoking hide gum disease?

It can. Smoking may reduce the bleeding and redness you would normally see, which means gum disease can progress without obvious warning signs. Regular examinations help us find it early.

Should I use mouthwash for gum disease?

Mouthwash does not replace brushing and cleaning between your teeth. A warm salt-water rinse can help reduce bacteria, and a dentist may recommend a chlorhexidine mouthwash for short-term use in some cases.

How often should I have a check-up if I have gum disease?

It depends on your gums. Some people need a professional clean every three or six months, while others may attend every twelve months. Your dentist or hygienist will recommend a schedule that suits you.

How common is gum disease?

Very. The Victorian Department of Health's opening statement is that "gum disease affects most people at some stage in their life." It gives no percentage, and neither will we.

Why do some people get it despite brushing well?

Because the visible inflammation is the immune response, not the bacteria themselves. The Department describes the immune system trying "to get rid of plaque with an inflammation response", seen "as redness and swelling of the gum around the tooth" — and that response varies between people. Plaque is also "constantly being formed", so cleaning is maintenance rather than a one-off fix.

Which drinks are worth cutting back?

The Department's list is specific and includes some people do not count: "soft drink, fruit juices, cordial, sports drinks, energy drinks, and hot drinks sweetened with sugar or honey". It also advises avoiding sugary food and drink "especially between meals" — how often matters, not just how much.

Does smoking or diabetes make gum disease more likely?

Both are named risk factors. The Department lists "smoking and poorly managed diabetes" for gum disease and again for periodontitis, and notes that "for people with diabetes, keeping blood sugar levels well-controlled will help to reduce the risk of gum disease." Tell us if either applies — it changes what we look for.

Why would a pocket make cleaning harder?

Because it shelters the bacteria that deepen it. The Department explains that when the gum's seal is damaged, "spaces can form between the tooth root and the gum", called periodontal pockets, and "bacteria get trapped in these pockets and cause even more damage". Over time "bone is damaged and lost, and larger spaces or pockets begin to form". A toothbrush cannot reach into that space, which is why professional cleaning becomes necessary rather than optional.

Related services and further reading

General dentistry

Dental hygiene

Periodontics

What does treatment of gum disease involve?

How to keep your gums healthy

How does smoking affect your oral health?

How does diabetes affect your oral health?

4 things to avoid if you have sensitive teeth

5 tips for a healthier smile

Planning your care

When you book, describe your symptoms and when they started, and bring relevant medical information and a current medicines list. Your practitioner can assess your teeth, gums and bite, request imaging when clinically appropriate and explain which options suit you. Ask what the recommended approach is intended to achieve, what alternatives exist, what aftercare involves and what risks apply. Treatment time, fees and maintenance vary with the diagnosis, and a written treatment plan lets you compare stages and payment arrangements before proceeding.

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 at our clinics.

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 is the main cause of gum disease?

Core Dental explains that gum disease is caused by bacterial growth and plaque build-up. Plaque left on the teeth hardens into calculus (tartar), which can spread under the gums and damage the bone supporting the teeth.

What is plaque?

Plaque is a sticky film of bacteria and food debris that forms on tooth surfaces, under the gum line and between the teeth. At Core Dental we recommend removing it daily with brushing and cleaning between the teeth.

What are common signs of gum disease?

Core Dental lists bleeding gums, swollen red gums, receding gums, bad breath, loose or drifting teeth and pain when chewing as common signs. Early gum disease may have no symptoms, so examinations matter.

What is the difference between gingivitis and periodontitis?

Gingivitis is inflammation of the gums and is generally reversible. Periodontitis involves the supporting bone and is not usually reversible, but Core Dental practitioners can help stabilise it with treatment and maintenance.

Why can smokers have gum disease without obvious bleeding?

Smoking can reduce the bleeding and inflammation you would normally see, so gum disease may be hidden while it damages bone. Core Dental dentists can check your gums and talk about support to quit.

Does diabetes affect gum health?

Yes. Elevated blood glucose can raise the risk of severe gum disease, and gum disease can make glucose harder to control. Tell your Core Dental dentist if you have diabetes so we can plan care.

Which interdental cleaning aids can Core Dental help me choose?

Our team can help you choose between floss, flossettes and interdental brushes depending on the gaps between your teeth, and whether you have braces or a bridge. Brush size should fit comfortably between your teeth.

How do I book a gum check 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 clinics in Melbourne.