Visiting the Dentist During COVID-19 Lockdown | Core Dental

Canonical:
https://www.coredental.com.au/why-it-is-safe-and-essential-to-continue-visiting-the-dentist-during-covid-19/

Details:

On 22 June 2020, during the COVID-19 lockdown, we published a message that Core Dental was open and that it remained safe and important to keep seeing the dentist. We explained that Universal Cross Infection Control is the foundation of how our teams work, described what happens between patients, and explained why waiting and seeing rarely helps dental disease. This is a historical article, kept for context. It is not current public-health or infection-control advice, so please follow current government guidance and ask your clinic about its current arrangements.

What is Universal Cross Infection Control?

Within dentistry, our teams are trained in Universal Cross Infection Control, a method of working that promotes a safe environment for patients. Infectious diseases are not new, and many services manage them every day. A barber disinfects combs between clients, a restaurant makes sure cutlery is safe for the next diner and a hotel changes the linen before the next guest. The aim in each case is to make sure equipment is safe when it passes from person to person, so that any infection is stopped in its tracks. Dentistry works in much the same way, and our teams have long applied these routines.

What happens after every appointment?

After every appointment we carry out what we call the breakdown. All equipment used on the last patient is either:

disposed of in designated medical waste containers, or

processed through our sterilisation facilities, where it goes through an autoclave and is returned to storage sterilised in sealed packaging.

All surfaces within the surgery are then wiped down with disinfectant to return the room to a condition that allows us to bring our next patient through.

What protective equipment do dental teams use?

Personal protective equipment received a lot of news coverage in 2020, but within the dental profession it has long been a standard part of the working day. Our teams practise careful hand hygiene, face masks have always been used, and gloves are changed between every patient. A key role for our dental nurses is the use of high-volume suction to help reduce aerosol production. Our adherence to Universal Cross Infection Control is designed to provide a safe environment for our patients and for us.

Why does it matter to keep seeing the dentist regularly?

Dental disease is unlike many other ailments, because it does not get better if you wait and see. Damage to teeth and gums builds up over time, with incremental injury piled upon incremental injury

leading to tooth decay or gum disease. Teeth cannot heal themselves, and gum disease cannot be reversed, although it can be managed. When decay develops or gum disease begins, if it is left untreated the holes get bigger and the gums recede further.

How does a small problem become a bigger one?

When a tooth begins to decay, the decay breaks through the enamel and spreads through the dentine, growing millimetre by millimetre. If it reaches the nerve, a sensitive tooth can become painful. Bacteria can then invade the pulp chamber, the pulp can die, and infection can spread around the tooth's supporting structures. Occasional toothache can give way to constant pain, and an abscess may form.

If the dentist intervenes at the first sign of decay, the tooth can often be treated with a simple filling. Once the disease has progressed, the tooth may instead need root canal treatment or an extraction. Dental disease tends to follow this path, which is why dental professionals focus on timely intervention and health promotion, such as your regular check-up and clean. As the saying goes, a stitch in time saves nine. Whether a particular treatment suits you depends on an examination, and results vary for each person.

What should you do today?

Our nine clinics are open six days a week, and we reserve appointments each day for dental emergencies whenever possible. Please follow current government and health guidance, and ask your clinic about its current arrangements when you book. Call us on 13 13 16 or book online. Call 000 immediately for uncontrolled bleeding, difficulty breathing or swallowing, or a serious facial injury.

What a check-up finds that you cannot

The "essential" half of this question has a concrete answer: there is a published list of things an examination looks for, and most of them are invisible or silent to the person they are happening to.

The Department's own framing. "The early signs of dental disease can be difficult to see. An oral health professional is trained to spot and treat any problems early, which can prevent bigger problems developing. They can also provide you with care to prevent disease, such as fluoride treatments and dental sealants to prevent tooth decay."

What the examination covers. "Your dentist will check each tooth using small instruments, such as a mirror and probe (a fine, pick-like tool). The dentist looks for issues such as tooth decay, gum disease and other conditions." Then: "Soft tissues in the mouth (gums, tongue, lips, cheeks and palate) are also checked for signs of oral cancer and other possible problems. Your dentist may also check your jaw joints and the lymph nodes in your neck."

And what cannot be seen at all without an image. "If a suspected dental problem is difficult to see (for example, possible decay between two touching teeth, or an infection), x-rays may be needed." The decay page is blunter: "X-rays are often needed to diagnose decay as it can occur in areas not visible to the naked eye", and "a tooth can appear intact from the outside".

Three things that are specifically silent.

Early decay. Its first sign is "a chalky white spot on the tooth", a stage at which "the decay process can be reversed". In young children the equivalent is "a dull white band on the tooth surface closest to the gum line - this is the first sign of decay and is hard for parents to spot".

Pulp damage. "Sometimes, tooth pulp may become damaged or diseased without any symptoms. In these cases, the problem is usually diagnosed by special tests or x-rays during a dental check-up or treatment for other dental concerns."

An ulcer that is not sore. "On occasions an ulcer may not be sore. This can occur in cases of mouth cancer."

Which is why the Department's warning is repeated across its pages: "Having no pain does not always mean that your teeth and mouth are healthy."

Sources: Better Health Channel (Victorian Department of Health), Dental treatment, betterhealth.vic.gov.au (reviewed 3 June 2026); Teeth and mouth care, betterhealth.vic.gov.au (reviewed 25 July 2025); Tooth decay, betterhealth.vic.gov.au (reviewed 28 June 2025); Tooth decay - young children, betterhealth.vic.gov.au (reviewed 11 February 2026); Root canal treatment, betterhealth.vic.gov.au (reviewed 14 July 2025); Mouth ulcers, betterhealth.vic.gov.au (reviewed 13 October 2025). All accessed 6 November 2026.

The one check with a published reason to not postpone

Of everything an examination covers, one has an explicit early-diagnosis argument attached, and it is the strongest case against letting years pass.

Mouth cancer. The Victorian Department of Health: "Mouth cancer can be treated if diagnosed early, so it's important to see your dental practitioner or doctor immediately if you notice any changes in your mouth." And: "Treatment for mouth cancer is most effective if the disease is diagnosed early."

How it spreads if it is not caught. "Without treatment, squamous cell carcinoma can spread deeper, including to the muscle and bone, or to the throat or lymph glands in the neck. Mouth cancer can also spread to other parts of the body if it gets into the bloodstream or lymphatic system, so it's important to diagnose and treat it early."

How common it is here. "More than 853 people in Victoria are diagnosed with mouth cancer each year - that's over 16 people diagnosed every week."

And why a dental appointment is where this often surfaces. "During regular check-ups, dentists also check for signs of mouth cancer. This is especially important for those who smoke or regularly drink alcohol, and even more so for those who do both."

The symptoms, with the Department's own balance. "A visible mass or lump that may or may not be painful"; "An ulcer that won't heal"; "White or red patches on the mouth, tongue or gums"; "Loss of sensation anywhere in the mouth"; "Trouble swallowing"; "Reduced tongue movement"; "Difficulty moving your jaw"; "Loose teeth or sore gums"; "Changes in taste"; "Swollen lymph glands." Then: "Having these symptoms does not mean that you have mouth cancer, but if you experience any of these for more than two weeks, you should speak to your dental practitioner or doctor."

Two weeks, and the reassurance that these symptoms are usually something else. Both halves belong together.

Two other published timeframes worth knowing. Bleeding gums that do not settle "after four weeks" warrant an appointment. And "if you notice a mouth ulcer that lasts for longer than 2 weeks, get it checked by a dentist as soon as you can."

What you are entitled to be told if something is found. "If there's a problem, your dentist will explain the treatment options and give you an estimate of the cost and the time it will take."

And on how often, which is a conversation rather than a rule. "Ask your oral health professional how often you should have a dental check-up." For erosion the Department's interval is "every six to twelve months"; for decay, "regular visits to the dentist (every 6 to 12 months) are important so that decay can be identified at this early stage when a filling can be avoided".

Sources: Better Health Channel (Victorian Department of Health), Mouth cancer, betterhealth.vic.gov.au (reviewed 11 September 2025); Dental anxiety and phobia, betterhealth.vic.gov.au (reviewed 22 October 2025); Gum disease, betterhealth.vic.gov.au (reviewed 1 August 2025); Dental treatment, betterhealth.vic.gov.au (reviewed 3 June 2026); Dental erosion,

betterhealth.vic.gov.au (reviewed 22 October 2025); Tooth decay, betterhealth.vic.gov.au (reviewed 28 June 2025). All accessed 6 November 2026.

Frequently asked questions

Was Core Dental open during the 2020 COVID-19 lockdown?

Yes. In our message of 22 June 2020 we said that Core Dental was open and ready to care for patients. This article is a historical record, and current arrangements may differ.

Is this article current COVID-19 advice?

No. It records what we published in 2020 and is kept for context. Please follow current government and health guidance, and ask your clinic about its present infection control arrangements.

Why shouldn't I wait and see with a dental problem?

Dental disease builds up over time, and teeth cannot heal themselves. Decay that is caught early can often be treated with a simple filling, whereas advanced decay may need root canal treatment or extraction.

How often should I have a check-up and clean?

Review intervals should suit your own oral health risks rather than being the same for everyone. Your dentist will advise how often to return after examining you.

What does an examination actually look at?

"Your dentist will check each tooth using small instruments, such as a mirror and probe (a fine, pick-like tool). The dentist looks for issues such as tooth decay, gum disease and other conditions." Then "soft tissues in the mouth (gums, tongue, lips, cheeks and palate) are also checked for signs of oral cancer and other possible problems", along with "your jaw joints and the lymph nodes in your neck".

Why would I need an x-ray if I have no symptoms?

Because some problems cannot be seen. "X-rays are often needed to diagnose decay as it can occur in areas not visible to the naked eye", and "a tooth can appear intact from the outside".

Which problems are completely silent early on?

Three in the published advice. Early decay, whose first sign is "a chalky white spot on the tooth". Pulp damage, where "sometimes, tooth pulp may become damaged or diseased without any symptoms". And an ulcer that does not hurt: "On occasions an ulcer may not be sore. This can occur in cases of mouth cancer."

Is mouth cancer common enough to matter?

"More than 853 people in Victoria are diagnosed with mouth cancer each year - that's over 16 people diagnosed every week."

Why does early diagnosis matter so much for it?

"Mouth cancer can be treated if diagnosed early." Without treatment, it "can spread deeper, including to the muscle and bone, or to the throat or lymph glands in the neck", and "can also spread to other parts of the body if it gets into the bloodstream or lymphatic system".

Who most needs that check?

"This is especially important for those who smoke or regularly drink alcohol, and even more so for those who do both."

What symptoms should I report?

"A visible mass or lump that may or may not be painful"; "An ulcer that won't heal"; "White or red patches on the mouth, tongue or gums"; "Loss of sensation anywhere in the mouth"; "Trouble swallowing"; "Reduced tongue movement"; "Difficulty moving your jaw"; "Loose teeth or sore gums"; "Changes in taste"; "Swollen lymph glands."

Do those symptoms mean something is seriously wrong?

Usually not. "Having these symptoms does not mean that you have mouth cancer, but if you experience any of these for more than two weeks, you should speak to your dental practitioner or doctor."

What are the other published timeframes?

Bleeding gums that have not settled "after four weeks", and a mouth ulcer lasting "longer than 2 weeks".

If nothing hurts, is a check-up worth it?

Yes. "The early signs of dental disease can be difficult to see", and "having no pain does not always mean that your teeth and mouth are healthy".

Will I be told the cost before anything is done?

"If there's a problem, your dentist will explain the treatment options and give you an estimate of the cost and the time it will take."

How often should I be seen?

There is no universal interval: "Ask your oral health professional how often you should have a dental check-up." The Department's range for catching decay early is "every 6 to 12 months".

Related services and further reading

A message from Core Dental about COVID-19

Dental health in the COVID-19 world

Neglecting your oral health during COVID

Emergency dentistry

Dental check-ups

Root canal therapy

Affordability at Core Dental

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.

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

Invisalign Blue Diamond provider, as stated on coredental.com.au.

Call 13 13 16 or book online.

Contact Core Dental

Phone	13 13 16
Booking	Online via coredental.com.au
Hours	Monday to Friday 8.00am to 6.00pm, Saturday 8.00am to 1.30pm (Bayside 8.30am to 1.30pm), Sunday closed

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.

When did Core Dental publish its message about visiting the dentist during lockdown?

We published this message on 22 June 2020, during the COVID-19 lockdown, to say that Core Dental was open and that it remained important to keep seeing the dentist.

What infection control method do Core Dental teams follow?

Our teams are trained in Universal Cross Infection Control, a method of working that promotes a safe environment for patients. It covers how equipment, surfaces and protective gear are handled between patients.

What does the breakdown at Core Dental involve?

After each appointment, used equipment is either placed in designated medical waste containers or sterilised in an autoclave and stored in sealed packaging. Surgery surfaces are then wiped down with disinfectant.

How do dental teams reduce aerosols during treatment?

Core Dental nurses use high-volume suction as a key part of their role, which helps to reduce aerosol production. Teams also practise hand hygiene, wear masks and change gloves between every patient.

Can tooth decay heal on its own?

No. Teeth cannot heal themselves. Decay can spread through the dentine toward the nerve over time, which is why we encourage regular check-ups so that problems are found early.

What happens if tooth decay is left untreated?

Untreated decay can reach the nerve, cause pain and lead to infection or an abscess. A tooth treated early may need only a filling, while later treatment can mean root canal treatment or extraction.

Where do I find current Core Dental guidance on COVID-19?

This article is a 2020 historical record. For current arrangements, follow government and health guidance and ask your Core Dental clinic when you book, or call us on 13 13 16.