

The Hub Dental Practice

Tooth Abrasion

What is Tooth Abrasion?

Abrasion is the loss of tooth structure and is usually caused by brushing too hard. If untreated then the destruction can be rapid.

Once past the enamel, abrasion quickly destroys the softer dentin and cementum structures. This is especially true as you get older.

Is it serious?

It certainly can be. Eventually the destruction will reach the nerve and the tooth will then probably die. If this happens then the tooth will either need a root treatment/crown or be extracted.

The consequences become much more serious as patients get older due to changes in saliva.

What can be done?

Firstly you need to stop whatever caused the problem (poor brushing technique, acidic drinks etc) and you need to stop the damage from getting worse.

Then we try to stop it getting worse by using special tooth pastes and in severe case, by placing protective bonded tooth coloured fillings.

Often all you need to do is change your toothpaste and the way you brush.

What can the patient do to help?

You can:

- Change your brushing method
- Use a soft tooth brush head
- Reduce your intake of sugar.
- Use of fluoridated non abrasive toothpaste
- Have regular dental checkups

What can the dentist do to help?

We will show you how to brush correctly.

We can apply concentrated fluoride and other sealants, and if the damage is very severe we can apply a bonded composite filling to help protect the soft dentine from further destruction.

What can I do to stop the sensitivity?

Good oral hygiene and diet are a good start as they reduce the amount of acid which is what causes the sensitivity.

Will these special toothpastes help?

Some do and some don't. It is best to try each out and see the result. Irrespective, you must maintain your brushing, flossing and sugar intake.

Toothpastes that are labeled "whitening" or "tartar control" can sometimes be too rough on receding gums and exposed roots, wearing away the root's protective layer.

Patients can be reasonably sure that their toothpaste is non-abrasive if it's labeled "sensitive".

How does Fluoride help?

Fluoride hardens the outer enamel layer of teeth, may stop a developing cavity, and gives you more resistance to future cavities.



Why do you suggest fillings?

We do sometimes, especially when the destruction of the dentine is very severe and close to the nerve.

In this case we are trying to keep the tooth alive and so it may be essential to put a hard layer (filling) on top of the dentine.

This extra layer over the dentine reduces sensitivity and the risk of nerve exposure.

What the best brushing method?

Use proper brushing technique. Angle the bristles of the brush along the gum line at a 45 degree angle and apply just enough pressure so the bristles slide under the gum line. Vibrate the brush while you move it in short back and forth strokes and in small circular motions.

Don't brush too hard. If you're not sure whether you're pressing too hard, try holding the brush with two fingers.

That's all the force the brush needs to remove bacteria from the gum line. Here's another tip: if your brush bristles have bent over with time, you probably have been pressing too hard.

If you find that you have a hard time brushing gently, consider using an electric toothbrush. They remove food, bacteria, and plaque very well, and they make it much easier to use less pressure.

These days, some advanced electric toothbrushes will even stop or alert you when you are pressing too hard. And don't forget to floss. Brushing harder won't get bacteria out from between the teeth.

How do you put on the bonded fillings?

We clean away any film on the surface of the damaged tooth and then apply an etch, the filling is then bonded to the tooth structure using a light activate composite material. Simple as that!!

We then polish the surface to leave a smooth, easy to clean surface. Patients should take special care to keep the filling clean as it can become stained if it is not looked after.

These bonded filling rarely require an injection and apart from the taste of the etch the process is normally quite straight forward and painless.

But my old dentist said there was nothing I could do?

Perhaps when the old dentist was trained most people lived to 60, now they live to 80+.

We see lots of new patients who come to us with abscesses in teeth with abrasion cavities and they are often very upset when they realise that they could easily have saved their teeth.

Are some people more susceptible?

Some patients have very weak bone around their teeth and if their teeth are positioned too far outwards then abrasion is more likely.

However the tooth brushing technique is often to blame as well.

In our experience even the most susceptible patients can arrest the destruction and stop it reaching the point where active treatment is needed.

But it all depends on whether the problem is identified quickly and whether the patient uses active preventative measures.

What would happen if I ignore the abrasion cavity?

Eventually the cavity will eat into the nerve and the tooth will then probably die, meaning an abscess may form and the tooth may need to be crowned or even extracted.

Now that patients are living much longer we need to keep our teeth for much longer too. Ignoring a problem now may mean big problems further down the line.

