

Gum disease

Orthodontics and Restorative Dentistry

Last reviewed: November 2025

Next review: November 2028

Information for Patients

Leaflet number: 400 Version: 4

What is gum (periodontal) disease?

Gum disease or 'periodontal disease' is a condition that affects the tissues that surround and support the teeth. This can cause spaces or 'pockets' in the gums that become infected; and can affect the bones that support your teeth.

If you do not get treatment for gum disease, it can lead to loosening and loss of teeth.

What are the signs of gum disease?

You may have gum disease without any symptoms. However some of the warning signs include:

- Red or purple gums
- Swollen or bleeding gums
- Teeth that move
- Gums shrinking down (recession)
- Bad breath

Am I at risk of gum disease?

You are more at risk of gum disease if you:

- have plaque and tartar (calculus)
- smoke

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- have diabetes
- have a family history of gum disease (genetic predisposition)

Being very overweight (obese), having a poor diet and stress have also been suggested as risk factors.

Why is treatment important?

Treatment of gum disease can help you keep your teeth for longer. As the swelling (inflammation) around your teeth gets better, your gums will appear healthier, bleeding should stop and your teeth should move less.

There is also evidence that treatment of gum disease can improve your general health. For example, if you have diabetes, good control of periodontal disease can help control blood sugar levels.

What can I do to help my gums?

Keeping your mouth and teeth clean (good oral hygiene) is the most important factor when treating gum disease. You should brush your teeth with a fluoride toothpaste for 3 minutes, 2 times a day. When you brush your teeth you must also brush the edges of your gums. This prevents plaque building up in this area.

Bleeding gums is a sign that your gums are not clean enough. If you clean your gums well, the bleeding should stop within 2 weeks.

It is also important to use interdental brushes (such as TePe brushes) to clean between your teeth every day. Interdental brushes get to the areas your toothbrush cannot reach. You should choose interdental brushes that fit snugly between your teeth. You are likely to need a selection of interdental brushes to use throughout your mouth. Your dentist or dental hygienist can help you choose the right sizes.



Interdental brushes come in different sizes.

Smoking reduces the blood supply to the gums and is one of the main risk factors for gum disease. Stopping smoking will help your gums and your general health. If you smoke, your gum disease is unlikely to get completely better, even if you have excellent oral hygiene.

Treatment for gum disease

Scaling and polishing

This is the removal of plaque, calculus and debris from the tooth surface above the gum line. This is carried out using ultrasonic and hand instruments by a dental professional.

Scaling can make the teeth sensitive. If your teeth are sensitive after scaling, put a small amount of fluoride toothpaste on your finger and rub it into the roots of the sensitive teeth, spit out the extra and do not rinse your mouth out. If you do this over several months a barrier will form and your teeth will become harder and less sensitive.

Root surface debridement

This is the removal of plaque, calculus and debris from the root surface below the gum line. This is carried out using ultrasonic and hand instruments by a dental professional. This procedure can take up to 2 hours (often over 2 visits). You will usually need to have a local anaesthetic.

Local anaesthetic lasts a few hours and care should be taken during this time. Be particularly careful when drinking and eating whilst you are numb as you can bite your lips and cheeks. Avoid very hot and cold foods whilst you are numb as these can burn your mouth.

After successful root surface debridement you may get some gum shrinkage which makes the teeth look longer. This is a sign that your gums are becoming healthier.

These before and after pictures show the improvements that can be achieved with good oral hygiene and root surface debridement:





Gum (periodontal) surgery

If pocketing remains after root surface debridement gum (periodontal) surgery may be done under local anaesthetic in the dental surgery. This allows direct access to the root surface for cleaning. Periodontal surgery is not normally considered unless oral hygiene is excellent.

Who will carry out my treatment?

Treatment should usually be carried out by your usual dentist.

If periodontal disease is very severe or complicated by medication or medical factors we may provide treatment within our department at Leicester's Hospitals (Glenfield).

Long term care

Once periodontal treatment has been completed you need to see your usual dentist on a regular basis (usually every 3 months) so they can monitor the health of your gums. Your dentist should check that you are cleaning your teeth properly and carry out regular scaling and root surface debridement as needed.

Contact details

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