

Gum Recession

Gum recession (receding gums) refers to the progressive loss of both (**Gums and Bone**), which can eventually result in tooth root exposure if left untreated. Gum recession is most common in adults over the age of 40, but the process can begin in the teenage years. Gum recession can be difficult to self-diagnose in its earlier stages because the changes often occur asymptotically and gradually. Regular dental checkups will help to prevent gum recession and assess risk factors.



Image 1: Gum Recession showing loss of gums and bone (which is normally under the gums), thereby showing the root and causing tooth looseness

The following symptoms may be indicative of gum recession:

- **Sensitive teeth** – When the gums recede enough to expose the root, the teeth become sensitive
- **Visible roots** – This is one of the main characteristics of a more severe case of gum recession.
- **Longer-looking teeth** – Individuals experiencing gingival recession often have a “toothy” smile. The length of the crown is normal, but the gum tissue has been lost, making the teeth appear longer.
- **Bad Breath, inflammation and bleeding** – These symptoms are characteristic of gingivitis or periodontal disease. A bacterial infection causes the gums to recede and may cause tooth loss if not treated promptly.

What are the causes of gum recession?

The most common causes of gingival recession are:

- **Aggressive brushing** – Over brushing or brushing with a hard-bristled toothbrush can erode the tooth enamel at the gum line, and irritate or inflame gum tissue.
- **Poor oral hygiene** – When brushing and flossing are performed improperly or not at all, plaque build up can begin to affect the teeth. The plaque contains various bacterial toxins which can promote infection and erode the underlying jawbone.
- **Tobacco** – Smoking any kind of tobacco use has devastating effects on the entire oral cavity. Chewing tobacco in particular, aggravates the gingival lining of the mouth and causes gum recession if used continuously.
- **Periodontal disease** – Periodontal (Gum) disease can be a result of improper oral hygiene or is caused by systemic diseases such as diabetes. The excess sugar in the mouth and narrowed blood vessels experienced by diabetics create a perfect environment for oral bacteria. The bacteria causes an infection which progresses deeper and deeper into the gum and bone tissue, eventually resulting in tooth loss.

What are the treatment options for gum recession?

- Every case of gum recession is slightly different, and therefore many treatment options are available. The nature of the problem which caused the recession to begin with needs to be addressed first.
- If overly aggressive brushing techniques are eroding the gums, a softer toothbrush and a gentler brushing technique should be used. If poor oral hygiene is a problem, prophylaxis (professional dental cleaning) may be recommended to rid the gum pockets of debris and bacteria. In the case of a severe calculus (tartar) build up, scaling and root planing will be performed to heal gum inflammation and clean the teeth.

**** Note: The widely marketed (Pin - Hole) technique has shown poor long-term success, recurrence of the recession and is no longer used or recommended**

1 The VISTA Technique (Vestibular incision subperiosteal tunnel access)

This entails making an access incision in the maxilla, followed by elevation of a subperiosteal tunnel. VISTA provides access and allows coronal repositioning of gingival margins. The remote incision reduces the possibility of traumatizing the gingiva of the teeth being treated while maintaining integrity of interdental papillae by avoiding papillary reflection. (Images 1 and 2)



Gum Recession treated with the VISTA technique involving minimal access with the addition of a gum graft using a tunnel

2 Free Gingival Graft -FGG

Involves using gum tissue from the roof of the mouth and is mostly used to treat the lower teeth due to the thin nature of the tissue. The graft produces very thick tissue that is the most stable overtime. A clear stent (Protective cover) is made by the office so that the patient can protect the roof of the mouth. This is the oldest grafting technique in Periodontics (Images 3 and 4)



Gum Recession treated with the free gingival graft which allows for the most thickness and KG

3 Connective Tissue Graft -CTG

Involves using tissue from the roof of the mouth but because a tiny single incision is used, it heals very quickly it tends to be the most comfortable healing following a palatal procedure. This procedure is the most widely used by current periodontists, and is backed by a significant amount of research. (Images 5 and 6)



Gum Recession treated with the the connective graft which allows for the most natural looking soft tissue.