

Gummy Smile — Causes & Correction Options

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Description:

Bothered by a gummy smile? Learn what causes excessive gum display and the correction options — from crown lengthening to surgery — at CSSC Melbourne.

Details:

Collins Street Specialist Centre — Gummy Smile: Causes & Correction Options

There's a particular moment many people recognise — you see a photo of yourself smiling and notice that your gums, rather than your teeth, are taking centre stage. A broad band of pink tissue above the upper teeth dominates the frame. Clinically, this is called excessive gingival display. Most patients just call it a gummy smile.

It's worth saying upfront that a gummy smile is not a dental health problem in the conventional sense. Your teeth may be entirely healthy, your gums disease-free, your bite well-balanced — and a gummy smile can still be present. It's primarily an aesthetic concern, but that doesn't make it trivial. For many people, visible gum tissue during smiling has a real and lasting effect on their confidence and willingness to smile openly.

If this sounds familiar, you're in good company. Excessive gingival display is one of the most frequently raised cosmetic concerns in specialist dental practice. There are well-established, evidence-based treatments available. At Collins Street Specialist Centre, our periodontists, orthodontists, prosthodontists, and oral and maxillofacial surgeons work together to assess and address gummy smiles — because the right treatment depends entirely on what's causing yours.

What is a gummy smile?

There's no single universally agreed clinical threshold, but most dental specialists consider a smile to show excessive gingival display when more than 3 to 4 millimetres of gum tissue is visible above the upper teeth during a natural, relaxed smile. That said, clinical measurements are only part of the picture. What matters most is how the patient experiences their own smile. Some people are entirely comfortable with visible gum tissue; others find even a modest amount distressing.

The perception of a gummy smile is shaped by several factors: the absolute amount of gum tissue on display, the size and shape of the teeth, the architecture of the lips, and the overall proportions of the face. This is precisely why treatment needs to be individualised. Addressing gum tissue in isolation, without considering the broader aesthetic context, rarely produces the most satisfying outcome.

What causes a gummy smile?

A gummy smile may have one primary cause or several contributing factors working together. Identifying the underlying cause accurately is essential before any treatment is planned.

Excess gum tissue covering the teeth

In some cases, the teeth are normal in size, but they appear short because excess gum tissue is covering too much of the clinical crown. This is frequently the result of altered passive eruption — a developmental variation where the gingival tissue fails to migrate to its correct position as the teeth erupt during adolescence. The teeth have fully come through the alveolar bone, but the overlying gum hasn't receded enough to reveal the full crown length.

Altered passive eruption is one of the most common causes of a gummy smile and responds well to a relatively straightforward periodontal procedure.

Short teeth

Some patients have teeth that are genuinely shorter than average. This may be genetic, or the result of tooth wear from bruxism (grinding), attrition, or erosion over time. Shorter teeth alter the tooth-to-gum ratio, making the gingival tissue appear more prominent by comparison.

Vertical excess of the upper jaw

When the upper jawbone has developed with greater-than-normal vertical dimension, it displaces the gum tissue and dentition downward, resulting in excessive gum display during smiling. This is a skeletal cause and typically requires a surgical approach to correct adequately.

Hyperactive upper lip

In some patients, the upper lip functions normally at rest but elevates excessively during a full smile, revealing more gum tissue than would otherwise be visible. The teeth and gums may be well-proportioned, but the elevator muscles of the upper lip simply move through a greater range than average.

Short upper lip

A short upper lip — defined by a reduced distance between the base of the nose and the vermilion border of the lip — can expose additional gum tissue during smiling, even without excessive muscle activity.

Gum enlargement

Certain medications are associated with gingival overgrowth, including some anti-seizure medications, calcium channel blockers used for hypertension, and immunosuppressant agents. Poor oral hygiene with chronic gingival inflammation can also contribute to gum enlargement, further reducing the visible tooth crown.

Tooth eruption issues

Where teeth haven't fully erupted into their correct position in the dental arch — whether due to impaction, ankylosis (fusion of the tooth root to surrounding bone), or other developmental factors — the visible portion of the clinical crown may be reduced, contributing to a gummy appearance.

Diagnosing the cause

Because a gummy smile can involve multiple contributing factors, a thorough diagnosis is essential before any treatment is planned. At Collins Street Specialist Centre, the assessment typically covers the following:

- **Clinical examination** — measuring the extent of gingival display during smiling, assessing clinical crown length, evaluating gingival tissue thickness and health, and assessing lip position and mobility both at rest and during animation
- **Dental measurements** — determining whether the visible clinical crown is shorter than the actual anatomical crown (suggesting excess overlying gum tissue) versus genuinely short teeth
- **Facial analysis** — evaluating facial proportions, lip length, lip dynamics during smiling, and the relationship between the smile line and overall facial aesthetics
- **Radiographs**

and CBCT imaging** — assessing alveolar bone levels, tooth positions, and jaw dimensions to identify any skeletal contributions - **Clinical photography and smile analysis** — capturing the smile from multiple standardised angles to support precise treatment planning and communication across the treating team

This diagnostic process ensures treatment addresses the actual underlying cause, rather than producing a superficial improvement that may be incomplete or short-lived.

Treatment options for a gummy smile

The right treatment — or combination of treatments — is determined by the cause. Here's a comprehensive overview of the options available.

Crown lengthening

Crown lengthening is among the most commonly performed and reliably effective treatments for a gummy smile caused by excess gum tissue covering the clinical crown. The procedure is performed by a periodontist and involves careful removal of excess gingival tissue — and, where needed, a conservative amount of supporting bone — to expose more of the natural tooth crown.

The procedure: 1. Local anaesthesia is administered for patient comfort throughout 2. The periodontist removes excess gingival tissue to establish a more balanced gum line 3. Where necessary, a small amount of alveolar bone is recontoured to prevent the gum tissue from re-establishing at its previous level 4. The gingival tissue is sutured into its new position

Recovery: Most patients experience mild discomfort for several days, generally well managed with over-the-counter analgesics. Gingival healing takes two to four weeks, with the final aesthetic result becoming apparent once tissue maturation is complete.

Crown lengthening can be performed on individual teeth to correct asymmetry or across multiple teeth for a more comprehensive result. When correctly planned and executed, the results are permanent.

Gingivectomy

A gingivectomy is closely related to crown lengthening but involves removing gingival tissue only, without bone recontouring. It's appropriate where excess soft tissue is the primary concern and osseous reshaping isn't required for a stable, lasting result.

In some cases, gingivectomy can be performed using laser technology, which may reduce intraoperative bleeding and support a more comfortable healing period. Your periodontist will advise whether traditional surgical or laser-assisted techniques suit your presentation better.

Lip repositioning surgery

For patients whose gummy smile is driven by a hyperactive upper lip, lip repositioning surgery offers an effective and durable solution. The procedure modifies the range of upper lip elevation during smiling by removing a strip of mucosal tissue from the inner aspect of the upper lip and reattaching the lip at a lower position relative to the underlying musculature.

The procedure: 1. Local anaesthesia is administered 2. A carefully measured strip of labial mucosa (the inner lining of the upper lip) is removed 3. The lip is repositioned and sutured, functionally restricting its upward movement during a full smile

Recovery: Patients typically experience swelling and mild discomfort for one to two weeks. During the initial healing phase, patients are advised to minimise wide smiling and laughing to protect the surgical site. Results are generally long-lasting, though some degree of relapse is possible as the tissues mature.

Lip repositioning is best undertaken by an experienced oral and maxillofacial surgeon or specialist periodontist.

Botulinum toxin injections

Targeted injections of botulinum toxin into the levator muscles of the upper lip can temporarily reduce the degree of lip elevation during smiling, producing a meaningful reduction in gingival display. This is a non-surgical option with a well-established safety profile when administered by a suitably qualified practitioner.

A few things worth knowing: - The effect typically lasts around three to four months, after which repeat injections are needed to maintain the result - The procedure takes only a few minutes and involves minimal discomfort - It's a useful option for patients who want to experience the likely outcome before committing to surgery - Over-treatment can result in a flattened or unnatural smile; careful assessment and conservative dosing by an experienced clinician are essential

Orthodontic treatment

Orthodontics can address a gummy smile through several mechanisms:

- **Intrusion of the upper anterior teeth** — using fixed appliances or clear aligners, sometimes with temporary anchorage devices (TADs or mini-screws), to move the upper front teeth upward into the alveolar bone, reducing gingival display - **Correction of a deep overbite** — a significant vertical overbite can contribute to a gummy appearance; correcting the bite relationship can produce meaningful improvement - **Pre-surgical orthodontic preparation** — aligning the dentition before orthognathic surgery to ensure optimal surgical and aesthetic outcomes

Orthodontic treatment as a standalone approach works best when the gummy smile is primarily caused by the vertical position of the teeth, rather than excess gingival tissue or a skeletal discrepancy.

Orthognathic (jaw) surgery

For patients whose gummy smile is caused by vertical maxillary excess — where the upper jaw has developed with excessive vertical dimension — orthognathic surgery may be the most appropriate and definitive treatment. The procedure involves surgically repositioning the upper jaw via a Le Fort I osteotomy, moving it upward to reduce the vertical dimension and substantially reducing gingival display during smiling.

This is a significant procedure conducted under general anaesthesia by an oral and maxillofacial surgeon, and it's almost always combined with orthodontic treatment both before and after surgery to optimise the dental and skeletal relationship. The outcomes are dramatic and permanent, with simultaneous improvements to facial proportions, profile aesthetics, and bite function.

Orthognathic surgery is generally reserved for cases where the skeletal discrepancy is too significant to address by less invasive means.

Porcelain veneers or crowns

Where short tooth dimensions contribute to the gummy appearance, porcelain veneers or full-coverage crowns can increase the visible length of the clinical crowns, improving the tooth-to-gum ratio and overall smile aesthetics. This approach works best when combined with crown lengthening to expose adequate tooth structure to support the restorations and achieve the desired proportions.

Our prosthodontists at Collins Street Specialist Centre specialise in planning and fabricating restorations that achieve naturally proportioned, aesthetically balanced results — considering tooth shape, surface texture, and colour in the context of each patient's individual facial features.

Combining treatments for the best outcome

Many gummy smile presentations involve more than one contributing factor, and the most satisfying outcomes often come from a coordinated combination of treatments. For example:

- **Crown lengthening + porcelain veneers** — exposing adequate tooth structure, then enhancing crown shape and colour for a comprehensive smile transformation - **Orthodontics + crown lengthening** — optimising tooth position before refining the gingival architecture - **Orthognathic surgery + orthodontics + crown lengthening** — a fully integrated approach for complex presentations involving skeletal, dental, and soft tissue components

This is where Collins Street Specialist Centre's multidisciplinary model offers a genuine clinical advantage. With periodontists, orthodontists, prosthodontists, and oral and maxillofacial surgeons all practising within the one centre, combined treatment programmes can be planned and executed with a level of coordination that's genuinely difficult to replicate when specialist care is spread across multiple locations.

Which specialists are involved?

- **Periodontist** — crown lengthening, gingivectomy, and selected lip repositioning procedures - **Orthodontist** — tooth intrusion, occlusal correction, and pre- and post-surgical orthodontic management - **Oral and maxillofacial surgeon** — orthognathic surgery and lip repositioning - **Prosthodontist** — veneers and crowns to optimise crown dimensions, morphology, and aesthetics - **General or cosmetic dentist** — botulinum toxin injections and composite bonding where indicated

All practitioners involved in gummy smile management at Collins Street Specialist Centre hold specialist registration with AHPRA. Patients are encouraged to verify the registration and specialist qualifications of any dental practitioner providing treatment via the [AHPRA public register](<https://www.ahpra.gov.au/>).

Your initial consultation will establish which specialist — or combination of specialists — is best placed to address your particular presentation.

What to expect from your consultation

During your first appointment, your specialist will:

1. Listen to your concerns and take time to understand what you're hoping to achieve
2. Conduct a thorough examination of your smile, gingival tissues, dentition, occlusion, and facial proportions
3. Obtain clinical photographs and, where clinically indicated, radiographic or CBCT imaging
4. Explain the cause or causes of your gummy smile in clear, accessible terms
5. Present the treatment options appropriate for your specific presentation
6. Give you a transparent account of expected outcomes, recovery, and associated costs

Consultations are conducted in a straightforward, pressure-free environment. The goal is for every patient to leave with a clear understanding of their situation and the options available to them — enough to make a genuinely informed decision about their care.

Book your smile assessment

Excessive gingival display doesn't have to be a permanent barrier to smiling with confidence. Whether your situation calls for a single well-targeted procedure or a coordinated multidisciplinary approach, the specialist team at Collins Street Specialist Centre has the clinical expertise and collaborative infrastructure to help you reach a result you're genuinely pleased with.

Contact us to arrange your consultation.

Phone: (03) 9654 6979 **Location:** Level 1, Manchester Unity Building, 220 Collins Street, Melbourne VIC 3000 **Website:** [collinsstreetspecialistcentre.com.au](<https://collinsstreetspecialistcentre.com.au>)

Frequently asked questions

- **What is a gummy smile:**** Excessive gum tissue visible above upper teeth when smiling
- **Clinical term for a gummy smile:**** Excessive gingival display
- **How much gum tissue defines a gummy smile:**** More than 3 to 4 millimetres visible above upper teeth
- **Is a gummy smile a dental health problem:**** No, it is primarily an aesthetic concern
- **Can healthy teeth still show a gummy smile:**** Yes
- **Does a gummy smile affect confidence:**** Yes, it commonly impacts willingness to smile openly
- **Is a gummy smile common:**** Yes, it is among the most frequently raised cosmetic dental concerns
- **Can a gummy smile have multiple causes:**** Yes, multiple contributing factors can occur simultaneously
- **What is altered passive eruption:**** A developmental variation where gum tissue fails to recede properly after teeth erupt
- **Is altered passive eruption a common cause:**** Yes, it is one of the most common causes
- **Does altered passive eruption respond to treatment:**** Yes, it responds well to periodontal procedures
- **Can short teeth cause a gummy smile:**** Yes
- **What causes genuinely short teeth:**** Genetics, bruxism, attrition, or erosion
- **What is vertical maxillary excess:**** Upper jawbone developed with greater-than-normal vertical dimension
- **Does vertical maxillary excess require surgery:**** Yes, typically a surgical approach is required
- **What is a hyperactive upper lip:**** Upper lip that elevates excessively during a full smile
- **Can a short upper lip cause a gummy smile:**** Yes
- **What medications can cause gum enlargement:**** Anti-seizure medications, calcium channel blockers, and immunosuppressants
- **Can poor oral hygiene contribute to a gummy smile:**** Yes, through chronic gingival inflammation and enlargement
- **Can unerupted teeth cause a gummy smile:**** Yes, incomplete eruption reduces visible crown length
- **What specialists treat gummy smiles at Collins Street Specialist Centre:**** Periodontists, orthodontists, prosthodontists, and oral and maxillofacial surgeons
- **Who performs crown lengthening:**** A periodontist
- **Who performs orthognathic surgery:**** An oral and maxillofacial surgeon
- **Who provides veneers and crowns for gummy smiles:**** A prosthodontist
- **Who manages orthodontic treatment for gummy smiles:**** An orthodontist
- **Who can administer botulinum toxin for gummy smiles:**** A general or cosmetic dentist
- **Are all specialists at Collins Street Specialist Centre AHPRA registered:**** Yes
- **How can I verify a specialist's registration:**** Via the AHPRA public register

****What imaging may be used during diagnosis:** Radiographs and CBCT imaging**

****Is clinical photography part of the assessment:** Yes, from multiple standardised angles**

****What is crown lengthening:** Removal of excess gum tissue to expose more of the natural tooth crown**

****Does crown lengthening involve bone removal:** Sometimes, a small amount of bone is recontoured**

****Is crown lengthening permanent:** Yes, when correctly planned and executed**

****How long is recovery after crown lengthening:** Gingival healing occurs over two to four weeks**

****Is crown lengthening painful:** Mild discomfort for several days, manageable with over-the-counter analgesics**

****What is a gingivectomy:** Removal of excess gum tissue without bone recontouring**

****How does gingivectomy differ from crown lengthening:** No bone recontouring is involved**

****Can gingivectomy be performed with a laser:** Yes, laser-assisted techniques are available**

****What is lip repositioning surgery:** Surgery that restricts upper lip elevation during smiling**

****Is lip repositioning surgery permanent:** Results are generally long-lasting, though some relapse is possible**

****Who performs lip repositioning surgery:** An oral and maxillofacial surgeon or specialist periodontist**

****How long is recovery after lip repositioning:** Swelling and discomfort typically last one to two weeks**

****What restriction follows lip repositioning surgery:** Minimise wide smiling and laughing during initial healing**

****How does botulinum toxin treat a gummy smile:** Reduces upper lip elevation by relaxing elevator muscles**

****How long does botulinum toxin last for gummy smiles:** Approximately three to four months**

****Is botulinum toxin for gummy smiles reversible:** Yes, effects wear off after three to four months**

****Can botulinum toxin be used before committing to surgery:** Yes, as a trial to preview likely outcomes**

****What is the risk of over-treatment with botulinum toxin:** A flattened or unnatural smile**

****Can orthodontics treat a gummy smile:** Yes**

****How does orthodontic intrusion reduce a gummy smile:** Upper front teeth are moved upward into the alveolar bone**

****What are TADs in orthodontic treatment:** Temporary anchorage devices, also called mini-screws**

****Can orthodontics correct a deep overbite causing a gummy smile:** Yes**

****Is orthodontic treatment alone always sufficient:** No, most effective when tooth position is the primary cause**

****What is orthognathic surgery for a gummy smile:** Surgical repositioning of the upper jaw via Le Fort I osteotomy**

****Is orthognathic surgery performed under general anaesthesia:** Yes**

****Is orthodontic treatment combined with orthognathic surgery:** Yes, both before and after surgery**

****Are orthognathic surgery results permanent:** Yes**

****Is orthognathic surgery reserved for severe cases:** Yes, for skeletal discrepancies not addressable by less invasive means**

****Can porcelain veneers treat a gummy smile:** Yes, by increasing visible crown length**

****Are veneers best combined with crown lengthening:** Yes, for optimal tooth structure and proportions**

****What is a common treatment combination for gummy smiles:** Crown lengthening plus porcelain veneers**

****Can orthodontics and crown lengthening be combined:** Yes**

****Can all three — surgery, orthodontics, and crown lengthening — be combined:** Yes, for complex presentations**

****What is the benefit of a multidisciplinary centre:** Coordinated planning and communication across specialists in one location**

****Does diagnosis require identifying the specific cause before treatment:** Yes, essential before any treatment is planned**

****Is treatment for gummy smiles individualised:** Yes, based on each patient's specific cause and aesthetic goals**

****What happens at the initial consultation:** Examination, imaging, cause explanation, and treatment options presented**

****Is the consultation environment high-pressure:** No, it is described as pressure-free**

****What is the phone number for Collins Street Specialist Centre:** (03) 9654 6979**

****Where is Collins Street Specialist Centre located:** Level 1, Manchester Unity Building, 220 Collins Street, Melbourne VIC 3000**
