



GUM CARE • RECESSIION TREATMENT

# Gum Grafting: How We Cover Exposed Roots and Stop Recession

*When gums recede, the roots underneath are unprotected. Modern grafting restores tissue, stops the recession, and — done well — looks better than what was there before.*

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"My gums look like they're melting away" is one of the most common things we hear from new patients at Bedrock Periodontics. Gum recession is gradual, often painless, and surprisingly common — and once exposed roots are visible, the recession is already moderate.

The good news: we can fix it. Gum grafting is one of the most refined procedures in modern periodontology, and the results, in experienced hands, are nearly invisible.

## Why gums recede

- Aggressive brushing — hard-bristle brushes and horizontal scrubbing strip thin tissue.
- Periodontitis — the bone underneath recedes, and the gum follows.
- Thin biotype — some people are simply born with thinner, less robust gum tissue.
- Tooth position and crowding — teeth that sit forward in the bone have less tissue support.
- Bruxism (grinding) — chronic loading bends teeth and damages attachment.
- Smoking and vaping — vasoconstriction reduces blood flow and accelerates recession.

## Why exposed roots matter

Recession isn't just cosmetic. Exposed roots are softer than enamel, more sensitive to cold, more prone to decay, and harder to clean. Untreated, they progress — sometimes to tooth loss.

## How we graft

We tailor the technique to the patient. The most common approaches we use:

- Connective tissue graft (CTG) — the gold standard. Tissue is harvested from the palate and tunneled under the recessed area. Excellent root coverage, very natural look.
- Free gingival graft (FGG) — thicker tissue from the palate placed at the gum line. Best when you need to build attached gum tissue, less ideal for root coverage.

- Allograft / acellular dermal matrix — donor-tissue grafts. No second surgical site, faster recovery, and outcomes are now comparable to autografts in many cases.
- Pinhole and tunnel techniques — minimally invasive approaches that avoid traditional flaps. We use them where the recession pattern fits.

## Comfort, sutures, and recovery

Modern grafting is far less invasive than it was a decade ago. We use microsurgical instruments, fine sutures, and — critically — ComfortLase photobiomodulation after the procedure to speed healing. Most patients are back to normal activities the next day. Eating is restricted to soft foods on the surgical side for 1-2 weeks.

## What this means for you

1. **Don't wait.** Recession progresses. Earlier intervention means less tissue needed and better results.
2. **Switch to a soft brush.** Electric brushes with pressure sensors are the safest choice.
3. **Address bruxism.** A night guard protects both your teeth and your graft.
4. **Ask which graft fits.** CTG, allograft, and tunnel techniques all have different trade-offs.
5. **Quit nicotine.** Smoking and vaping reduce graft success significantly.

## The bottom line

Recession is treatable, and modern grafting techniques are remarkably refined. The earlier we see you, the more options we have — and the more invisible the result.

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### Worried about receding gums?

Schedule a periodontal exam. We'll assess your recession pattern, gum biotype, and bone level, and walk you through the grafting approach that fits.

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Call (512) 660-5008 or visit [bedrockperio.com](http://bedrockperio.com) to book a consultation.

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