



THE WHITENING PROTOCOL

Real results without wrecking your enamel

Whitening is a chemistry problem, not a scrubbing one. Here is what genuinely works, what fades, and what quietly damages your teeth.

~3 yrs

HOW LONG GOOD RESULTS LAST

2/3

FEEL MILD, BRIEF SENSITIVITY

0

SHADES A CROWN WILL WHITEN



WHY IT WORKS

Whitening bleaches colour out. It does not scrub it off.

Real whitening relies on peroxide. Hydrogen peroxide is small enough to diffuse into the enamel and dentin, where it oxidises the dark pigment molecules left by coffee, tea, wine and time, breaking them into colourless ones so the tooth reflects more light.

That is the line that matters. Anything that only buffs the surface is removing stain, not changing the colour of the tooth.

THE CATCH

Peroxide only lightens natural tooth structure. Crowns, veneers and fillings keep their original shade, so they can end up visibly mismatched.

Source: American Dental Association (2024)



THE PROTOCOL

How to whiten well, in order

- 1 Get checked first.** A dentist clears decay, exposed roots and gum issues, and flags restorations that will not lighten. Whitening over those problems turns a cosmetic gel into a source of injury.
- 2 Match the dose to the goal.** Dentist-fitted take-home trays at lower concentration are the gentlest route to a durable result. In-office is faster; ADA-Seal strips are the one consumer product that genuinely bleaches.
- 3 Protect the gums.** Use a well-fitting tray and only a small bead of gel. Wipe away anything that touches the gums to avoid irritation and white patches.
- 4 Manage sensitivity, do not push through it.** Use a potassium-nitrate and fluoride toothpaste before and during, and space out or skip days if zings build up. It settles within days of stopping.
- 5 Maintain it.** Colour fades fastest in the first weeks. Keep your trays for short top-ups and limit coffee, tea, red wine and tobacco.



THE ONE RULE

Lower concentration is the smarter choice, not the weaker one

The instinct is to reach for the strongest gel. The evidence points the other way. A systematic review found lower hydrogen peroxide concentrations caused less sensitivity and produced greater objective colour change over time.

High-strength gels spike sensitivity and temporarily soften the enamel surface. Saliva and fluoride re-harden it within about a week, so the real danger is not one careful session. It is overuse, ill-fitting trays and chasing speed.

Source: ADA · Cochrane Review (2018)



MYTHS, CHECKED

What the evidence actually says

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Charcoal toothpaste whitens safely. Mostly refuted. The ADA has accepted no charcoal toothpaste. Any brightening is abrasion of surface stain, and that same grit wears enamel, exposes dentin and often lacks fluoride.
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Whitening permanently thins your enamel. Mostly refuted. Peroxide oxidises pigment, it does not strip enamel. It causes brief softening that remineralises within days. Misuse and acidic DIY products are the real risk, not careful whitening.
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Drugstore strips equal a dentist's results. It is mixed, not settled. ADA-Seal strips can reach a similar final shade that looks comparable to the eye, but in-office is faster and measurably stronger on deeper and uneven staining.

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Baking soda is a safe everyday whitener. Also mixed. It is low-abrasive and lifts surface stain, but using it alone every day



MAKE IT YOURS

Adjust for your own mouth

Sensitive teeth

Start with a low-concentration take-home tray, prime with potassium-nitrate and fluoride toothpaste for a week or two, and shorten wear time if zings appear.

Kids and teens

Hold off. Whitening is for 18 and over. Pediatric guidance discourages full-arch bleaching in younger mouths; a single trauma-darkened tooth is a dentist’s call.

Crowns, veneers, braces

Restorations will not change colour, so whiten natural teeth first then colour-match new work. With fixed braces, wait until they come off for even results.

Keeping it

Results are front-loaded and fade. Do brief top-ups in your trays every 6 to 12 months and keep up cleanings rather than over-whitening.



SEE A DENTIST

When to get a professional involved

- ✓ A single tooth is grey or much darker than the rest, often after an old injury
- ✓ Deep banded staining from childhood antibiotics or fluorosis, which bleaches slowly or not at all
- ✓ Sensitivity that is severe, spontaneous or lasts beyond about a week
- ✓ You have crowns, veneers or fillings on show and want the final smile to match
- ✓ You are pregnant or breastfeeding, or have untreated decay or gum disease

THE SAFE ROUTE

In the UK, anything above 0.1% peroxide is dentist-only, capped at 6% for home use. Salon and unregulated online kits are illegal and linked to chemical burns. Supervised whitening is the safe one.

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YOUR NEXT STEP

Whiten smart, protect the tooth underneath

Real whitening is peroxide chemistry, done at the right strength, with your gums protected and your expectations set. The rest is maintenance and patience.

BOOK A CHECK-UP

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Next week — The Flossing & Interdental Protocol