SYMPTOM

# Tooth - abnormal shape

An abnormally shaped tooth looks unusually small, large, pointed, grooved, joined, chipped, or worn.

**WHAT IT FEELS LIKE**
A tooth looks pointed, grooved, joined, chipped, or worn

**WHERE IT IS FELT**
One or more teeth

**MOST COMMON CAUSES**
Natural development, tooth wear, chips or decay

**WHEN IT IS URGENT**
New facial swelling, fever, or severe worsening tooth pain

**USUALLY LASTS**
Persistent unless wear, damage, or dental treatment changes it

**SEE A DOCTOR IF**
A new change persists or affects comfort or chewing

## Overview

Teeth naturally come in different shapes and sizes. An unusually shaped tooth may have developed that way before it entered the mouth. It may also have changed because of wear, injury, tooth decay, or previous dental treatment.

The shape alone often causes no health problem. However, grooves, sharp edges, or an uneven bite can trap food, irritate the mouth, or make cleaning and chewing harder.

A dentist can check whether the shape is a healthy variation or a sign of damage. This page cannot identify the cause from appearance alone.

## What it may feel or look like

You may notice that a tooth is:

An unusual shape may be painless. Some teeth become sensitive to cold, heat, sweetness, or biting pressure. A rough edge may rub your tongue or cheek. Deep grooves can collect plaque and food.

New front teeth in children sometimes have small rounded bumps along the biting edge. These are called mamelons . They are part of normal tooth development and often become less noticeable with ordinary use.

- Smaller, larger, narrower, or wider than nearby teeth
- Pointed, cone-shaped, notched, deeply grooved, or unusually bumpy
- Joined to another tooth or split into two sections
- Flattened, shortened, chipped, cracked, or jagged
- Different in colour as well as shape
- No longer fitting comfortably against the opposite teeth

## Common causes

Natural development is a common explanation, especially when a tooth has looked different since it appeared. Some people have a small, peg-shaped side front tooth, an extra point called a cusp, or a wider tooth. These differences may affect one tooth without causing a wider health problem.

Everyday wear can gradually shorten or flatten teeth. Clenching or grinding, also called bruxism , can speed up this process. Acid from frequent acidic drinks, acid reflux, or repeated vomiting can soften the hard outer enamel and change the tooth's outline. Aggressive brushing may also contribute to wear near the gumline.

Chips, cracks, and tooth decay can change a previously normal shape. Tooth decay weakens enamel and may cause part of the tooth to break away. Fillings, crowns, and other dental work also change a tooth's outline, sometimes becoming worn or damaged over time.

Less common developmental differences include two forming teeth joining together, or one tooth bud partly dividing. Rare conditions affecting enamel or the softer layer beneath it, called dentine, can change the shape, colour, and strength of several teeth. An injury or infection involving a baby tooth can occasionally affect the adult tooth developing underneath it.

## When to seek medical care

An unusual shape that has been present for years and causes no symptoms is usually suitable for a routine dental visit.

Arrange a dental appointment if the shape is new, appears to be changing, or causes

sensitivity, food trapping, mouth irritation, difficulty cleaning, or problems with your bite. A sharp edge, loose filling, visible crack, or tooth that keeps chipping should also be checked.

Seek same-day urgent dental care for:

Call emergency services if swelling affects your breathing or swallowing, spreads quickly into your neck or around an eye, or follows a serious injury to your face or jaw.

- Facial or gum swelling, especially with fever
- Severe or rapidly worsening tooth pain
- A broken tooth with a red or bleeding centre
- A tooth loosened or moved by an injury
- Swelling or pain that makes opening your mouth difficult

## How the cause is found

A dentist will ask when you first noticed the shape and whether it has changed. They may ask about pain, sensitivity, injuries, grinding, acidic drinks, reflux, vomiting, and similar teeth in family members.

They will examine the tooth, gums, bite, and nearby teeth. They may check for soft decay, cracks, worn enamel, or an uneven contact between your upper and lower teeth.

Dental X-rays are sometimes used to look beneath the enamel, check the roots, or see how a developing tooth formed. Photographs, previous X-rays, or older dental records can help show whether the change is recent.

## Treatment and self-care

A healthy tooth that is simply a different shape may not need treatment. If its appearance or position concerns you, a dentist can explain what changes are possible without removing unnecessary healthy tooth material.

Depending on the cause, treatment may include bonding with tooth-coloured material, repairing decay, replacing a damaged filling, or covering a weakened tooth with a crown. A badly injured tooth may need treatment to the soft inner tissue, called the pulp. Orthodontic treatment may help when the shape or position affects the bite.

For tooth wear, treatment focuses on the cause. This might include addressing grinding, reducing frequent acid exposure, or discussing reflux or repeated vomiting with a healthcare

professional. A dentist may recommend a protective appliance when appropriate.

At home:

- Brush gently twice daily with fluoride toothpaste
- Clean between the teeth each day
- Avoid biting hard objects or using teeth to open packages
- Do not file, cut, or reshape the tooth yourself
- Cover a temporary sharp edge with dental wax until it is assessed

## What to expect

A tooth that developed in an unusual shape will usually keep that shape unless it is treated or becomes worn. Teeth cannot regrow lost enamel, so a new chip or area of wear does not repair itself.

Many shape differences remain stable and cause no difficulty. If treatment is needed, the outlook depends on how much healthy tooth remains, whether decay or infection is present, and how the tooth meets the rest of your bite. Regular dental checks can help detect further wear or damage.

## Common questions

Does an unusually shaped tooth mean it is unhealthy?

Not necessarily. A tooth may be naturally small, pointed, wide, or grooved and still be healthy. Pain, a recent change, decay, or repeated breakage makes an assessment more important.

Will a child outgrow it?

Baby teeth are eventually replaced, but an adult tooth will not be replaced naturally. Normal bumps on newly erupted adult front teeth may smooth with use. A dentist can confirm whether a child's tooth is developing as expected.

Can an abnormal tooth shape run in families?

Some developmental tooth features and rare enamel or dentine conditions can be inherited. A single unusual tooth does not by itself show that an inherited condition is present.

Can a dentist simply file the tooth smooth?

Sometimes a very small rough area can be polished, but removing enamel is permanent. The

dentist must first check the tooth's thickness, bite, and cause of the shape change.

## Sources

- National Institute of Dental and Craniofacial Research: Tooth Decay
- NHS: Chipped, Broken or Cracked Tooth
- NHS: Dental Abscess
- Merck Manual Professional Edition: Developmental and Acquired Dental Abnormalities
- American Academy of Pediatric Dentistry: Management of the Developing Dentition and Occlusion in Pediatric Dentistry