Where it bleeds, brush gently.

Gums that bleed when you brush are usually a sign of gum inflammation.[1][2] It is not a signal to stop brushing.

Why gums bleed

It's usually inflammation, not an injury

Plaque builds up
Plaque collects where the teeth meet the gums

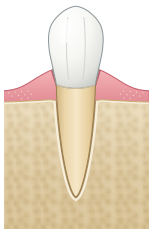
The gums get inflamed
Toxins from the bacteria in plaque inflame the gums

They bleed easily
Red, swollen gums bleed even when the bristles just touch them[1]

Healthy gums rarely bleed with normal brushing. But scrubbing hard with a stiff toothbrush can really injure the gums.[3][4]

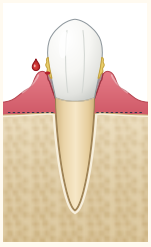
Gingivitis and periodontitis

The difference: has supporting bone been lost?



Healthy

Firm gums that rarely bleed

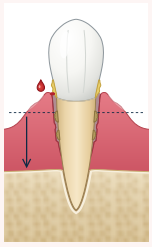


Gingivitis

Reversible

Swollen gums that bleed easily. No bone loss.[5] Removing the plaque brings the gums back to health.[6]

Treatment: daily brushing and cleaning between the teeth



Periodontitis

Lost bone doesn't grow back

Bone is lost and the gap gets deeper. Lost bone doesn't grow back,[6] but treatment can stop it getting worse.[5]

Treatment: brushing, plus removal of tartar below the gums at a dental clinic[5]

Gum · Inflamed gum · Bone supporting the tooth · Plaque · Tartar · Healthy bone level

Red drops mean the gums bleed easily. Shapes are simplified

Gums bleed at both stages. You can't tell which one it is from the amount of bleeding or how it looks; a dental clinic measures the depth of the gum pockets.

Many people don't notice their gums bleed

About half
people aged 50–54 had bleeding gums at a dental exam[7]

Yet only **about 1 in 10** said "my gums bleed when I brush."[7] Early gum disease rarely causes symptoms you'd notice.[8] **No bleeding doesn't mean you're fine.**

Smokers, take extra care. Smoking narrows the blood vessels in the gums, so bleeding and swelling show less even when there is inflammation.[2][6]

From your clinic A clinic stamp is fine for contact details

Phone _____ **Hours** _____ **Notes** _____

Now ☐ Gingivitis ☐ Periodontitis ☐ To be checked ☐ Other ( )

Between teeth ☐ Interdental brush (size) ☐ Floss Watch this area ( )

Next visit ☐ Gum exam ☐ Tartar removal ☐ Check-up Date: Time:

References [1] Ministry of Health, Labour and Welfare (Japan), e-health net. What is periodontal disease? Updated Nov 2022. [2] Ministry of Health, Labour and Welfare (Japan), e-health net. Smoking and periodontal disease. Updated Jan 2020. [3] Holmstrup P, et al. Non-plaque-induced gingival diseases. J Periodontol. 2018;89 Suppl 1:S28-S45. [4] Ranzan N, et al. Are bristle stiffness and bristle end-shape related to adverse effects on soft tissues during toothbrushing? A systematic review. Int Dent J. 2019;69(3):171-182. [5] Japanese Association for Dental Science. Basic approach to periodontal treatment (Mar 2026). [6] Chapple ILC, et al. Periodontal health and gingival diseases and conditions on an intact and a reduced periodontium. J Clin Periodontol. 2018;45 Suppl 20:S68-S77. [7] Ministry of Health, Labour and Welfare (Japan). Survey of Dental Diseases 2024: summary (rev. Dec 2025). [8] Ministry of Health, Labour and Welfare (Japan), e-health net. Symptoms and self-check of periodontal disease. Updated Nov 2021.

Written by a practising dentist (Zubora Ha Lab, Japan) · November 2026 edition

If your clinic's instructions differ, follow your clinic. Free to use; terms of use: zubora-lab.com/sheets/ (Japanese)

Bleeding without brushing? See a dentist soon.

What you can do today

A soft toothbrush, used gently

1 Switch to a soft brush

Stiff bristles caused more gum injuries.[4] **Just pick "soft" next time you buy one**, and you won't have to watch how hard you press every day.

2 Don't press; touch lightly

Even a soft brush can hurt your gums if you press hard.[9]

3 Clean between teeth once a day

Use an interdental brush where it fits and floss where it doesn't.[10] Gums may bleed more for the first few days; keep going gently.

Don'ts

× Avoiding the spots that bleed

Plaque stays and the inflammation goes on

× Scrubbing hard with a stiff brush

It can injure your gums[3][4]

× Squeezing out the blood

Pressing out "bad blood" doesn't remove the plaque that causes it

× Relying on toothpaste or mouthwash alone

The basics are a toothbrush plus interdental brushes or floss to remove plaque[5]

Common myths

Myth **"Brushing will fix it quickly."** Gingivitis does go away,[6][5] but not "quickly." If it has become periodontitis, tartar below the gums has to be removed at a dental clinic.[5]

Myth **"Bleeding means I'm losing bone fast."** Most periodontitis progresses slowly.[5] But lost bone doesn't grow back.[6] Your teeth won't fall out soon, but it's not something to leave alone.

When to see a dentist

See a dentist soon

- **Bleeding without brushing** (a taste of blood when you wake up, blood on your pillow, etc.)
- Gums are **swollen and painful**, pus, or a loose tooth
- Bleeding that won't stop, bruising or nosebleeds easily, ongoing fever or breathlessness → **see a doctor too**[6][11]
- A painless lump, a hard spot, a sore that won't heal, a red-and-white patch, or no improvement with treatment → **dentist or oral surgeon**[3][12]

Book a visit

- **Bleeding only when brushing or flossing** → no rush. Book if it lasts over 2 weeks despite careful brushing, or if it's been a while since your last check-up
- **Pregnant, diabetic or a smoker** → have your gums checked at regular check-ups[6][8]

OK to wait and see

- A clear cause, such as hard food or brushing too hard, and the bleeding **happened once and stopped quickly**

If you take blood thinners Don't stop them on your own; talk to the doctor who prescribes them and your dentist.[13]

Clinic contact (stamp is fine)

Notes

References ([1]–[8] on page 1)

[9] American Dental Association. Toothbrushes. Oral Health Topics (accessed Oct 2026). [10] Chapple ILC, et al. Primary prevention of periodontitis: managing gingivitis. J Clin Periodontol. 2015;42 Suppl 16:S71-S76. [11] National Cancer Center Japan, Cancer Information Service. Acute myeloid leukemia (accessed Oct 2026). [12] Nagoya City. Self-check for oral cancer. Updated Oct 2025. [13] Japanese Society of Dentistry for Medically Compromised Patient, et al., eds. Guideline for tooth extraction in patients on antithrombotic therapy, 2025 edition. 2025.

Written by a practising dentist (Zubora Ha Lab, Japan) · November 2026 edition

If your clinic's instructions differ, follow your clinic. Free to use; terms of use: zubora-lab.com/sheets/ (Japanese)