



Noma (Cancrum oris):

-Is an opportunistic infection that occurs in children with immune systems compromised by malnutrition

-Starts as a mouth ulcer which if untreated in the early stage can rapidly penetrate and destroy soft tissues and bones of the face, permanently ravaging features, and leaving the child grotesquely disfigured

-Claims 140,000 children/year, mostly in the African Sahel, 70-90% of whom die



Predisposing factors:

- Chronic micronutrient malnutrition beginning before birth
- Lack of exclusive breast feeding in the first six months
- Poor oral hygiene
- Household exposure to livestock
- Fecal contamination of food and water
- Lack of timely access to medical care
- Extreme poverty

What can be done to prevent noma:

Micronutrient nutrition: Universal home food fortification for all women and children, to treat and prevent deficiency of essential micronutrients are known to be associated with noma and immune deficiency, oral lesions and poor healing.

Oral hygiene: A simple zinc enriched dentifrice used with a traditional chewing stick can promote oral health.

Immunizations: Especially measles vaccination, since noma usually follows measles, but also malaria and other diseases that cause overwhelming infection in malnourished children

Sanitary and nutrition practices: Community education for promotion of: Exclusive breast feeding for 6 months, better infant weaning practices, incorporation of locally available nutritious foods such as eggs and oil into the diet of young children, and food and water sanitation.

Deworming and Vitamin A Capsule distribution: Child survival interventions that have had good impact on maternal and child health in many developing countries.

Improved access at the village level to early detection and treatment of noma: Health workers in close proximity to children at risk for noma must have a dependable supply of curative medicines to prevent the progression of early noma lesions to irreversible gangrene and permanent loss of facial features.

Eradication of poverty: Interventions that improve maternal and child health will help to break the vicious cycle of poverty, improving the intellectual and physical potential of mothers and their children who represent the hope of the next generation.

Treatment for noma: Oral antibiotics must be started immediately in the earliest stage of noma, when there is viable tissue to be saved. Any delay in treatment increases the risk of loss facial features and death. While transportation to the hospital is being arranged, attention to oral hygiene, fluids, and nutrition must begin.