

NOMA, cancrum oris is a horrible neglected disease that affects mainly African children. Although it is almost too painful to view pictures of children with noma, it seems the best way to convey the reality of this disease that claims more than 140,000 victims per year, most of whom (70-90%) die.

Survivors face a lifetime with sometimes grotesque facial deformities that make them into social outcasts. With restorative facial surgery, they may be able to eat and speak again, but the scars are permanent. Sometime, the children lose the majority of their facial features to this disease.

We now know why children get noma, how to prevent it with inexpensive, safe means such as vitamin A distribution, addressing micronutrient malnutrition in women and children, deworming, immunizations and health and hygiene teaching. We know how to limit the severity of the infection with inexpensive oral antibiotics. The public health interventions that would prevent noma are being implemented with great success in many developing countries, but not in large areas of the African



Sahel. And the interventions that will eradicate noma as a public health problem will also impact maternal and child mortality from other common infections.

Now is the time to work for Child Survival. MAMA Project, Inc. in cooperation with the University of Maryland Dental School is proposing a set of interventions that are based on the scientific knowledge gleaned from decades of noma research in Sokoto villages. These tools include systems for rapid field assessment of maternal and child malnutrition, Essential Micronutrient supplement designed to prevent and treat micronutrient deficiencies encountered in women and children in these villages, a zinc enriched dentifrice to promote healing of pre-noma oral lesions, systems and trainings in early detection and treatment of noma, and implementation of community-based Child Survival programs. Please join us in this effort.