



EDITORIAL

Mis-noma, right case

This issue contains two editorials and two articles about noma, also named cancrum oris (in a grammatical blunder that has been perpetuated by idle plagiarism through generations). Noma is in many ways an emblem for Africa. A disease so awful, so lethal and so cruel to its survivors, it occurs in extraordinary volume in sub-Saharan Africa and yet scarcely impinges on western medicine, let alone the rich world's public. Its root causes are poverty, hunger, contaminated water, and absence of medical care. Astoundingly, we see evidence that it once haunted the now rich temperate countries of the first world, which have largely shaken off these scourges of the equatorial regions.

There are many ways to look at the globe: Australians relish the disorientation the English experience when seeing a globe with the Southern Hemisphere at the top, offering an insight into the way in which simple conventions can reinforce our own sense of importance and value. The converse also occurs. The Mercator projection of the globe is sometimes criticised for over representing the temperate latitudes whilst under representing the equatorial regions, giving a subtle message that the latter, the world's greatest repositories of poverty, hunger and disease, are better minimised. Even though the British Prime Minister declared 'Africa' his passion, the lack of tangible assistance

must sometimes make Africans believe that the globes of the west have an ocean where their continent should be.

Facing Africa (www.facingafrica.co.uk) is a charity dedicated to prevention and treatment of noma. It offers practical initiatives and sponsors medical teams to treat the survivors. Plastic surgeons may feel they have more than others to give. In a culture where so much reconstructive expertise and training is spent on lucrative surgery of far less immediate importance, there may be some who will wonder what else they might be able to do to help not just noma sufferers, but also those with other disfiguring consequences of neglect and poverty. How poignant that the clinical teams observed, when they appealed for patients with noma to come forward, that many untreated cleft lip and palate cases also showed up. Will anyone else find it ironic that the error is that 'cancrum oris' is the accusative?

Simon Kay
Editor, BJPS

*Department of Plastic Reconstructive Surgery,
St James University Hospital, Chancellors Wing,
Beckett Street,
Leeds, UK*