Neglected tropical diseases (NTDs) are a group of infectious diseases that mostly affect vulnerable and marginalized populations belonging to the tropical and subtropical regions of the world, which include the North America, South America, Africa, Asia, and Australia. Till date, 20 diseases (Snake bite and 19 communicable diseases) have been listed in the NTDs category by the World Health Organization (WHO). The burden of NTDs is devastating. An estimated number of 200,000 mortality and 19 million disability adjusted life years (DALYs) are attributed to NTDs each year. It has been estimated that more than 1.5 billion people are at risk of NTDs.

NTDs are the disease most often of underprivileged communities of the world comprising mostly illness associated with bacterial, viral and parasites. The most prevalent ones include intestinal worms, schistosomiasis, trachoma, malaria, dengue fever, and sleeping sickness. NTDs are so called as because they get little attention in the global platform. Many people suffer from NTDs, causing serious health problems. They even impose long term complications and sometimes disfigurement of affected ones. The ultimate effect is addition of social burden and economic crisis.

On 15th December 2023, WHO announced an addition of noma (cancrum oris or gangrenous stomatitis) in its list of NTDs. This came under the recommendation of the 17th meeting of the Strategic and Technical Advisory Group for Neglected Tropical Diseases (STAG-NTD) held at WHO headquarters, Geneva, Switzerland. Noma is a rapidly progressing infectious disease of orofacial region, particularly reported in Sub-Saharan Africa, Southeast Asia and South America. Over 770,000 people in the world has been estimated to be suffering from noma. However, accurate estimation of people affected by noma is still challenging. Due to the rapid spread and associated social stigma, many of the cases remain hidden.

Noma is characterized by severe tissue destruction causing disfigurement of face. This is prevalent among malnourished young children between the age group 2-6 years. Apart from malnutrition, noma has been linked to children with poor oral hygiene and lack of proper health care.

In the early phase, noma initiates in the mouth as bacteria-induced necrotizing gingivitis. Later it transforms into necrotizing periodontitis and necrotizing stomatitis. Eventually, with the presence of risk factors noma progresses to necrotizing fascitis, myonecrosis and osteonecrosis. If diagnosed in the early stages, the treatment with appropriate antibiotics, analgesics and maintenance of proper oral hygiene, can enhance proper wound healing. If diagnosed in late phase can lead to facial disfigurement, difficulty of eating, speaking. Children can also suffer from social stigma and psychological problems.

NTDs impose significant social burden. They lack attention and funding leading to ineffective interventions in the area of need. However, there is a need of preventive measures, innovative treatments, development of strategies to control NTDs. There is a need of further research to decrease the disease burden associated with NTDs. Noma has been a neglected disease in the tropical and subtropical continent from a long time. Although it is a noncontagious disease, it has a major humanitarian concern, requiring attention from all over the world. The addition of noma in the list of NTDs by WHO also shows the alarming situation of this disease and the needful attention, so that public awareness of this disease is increased worldwide, open new avenue of research and generate funding and strengthen collaborative researches to disease control.

There has been a case reported in Nepal. This can also help us to assume that noma does not have very alarming situation in Nepal. However, we should also move ahead with international collaborators along with their research and strengthen our knowledge and skills. Whenever a case of noma is identified, it should be taken care with proper nutrition, immunization, hygiene and ultimately dental care.
REFERENCES:


