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INFANT ORAL MUTILATION (IOM)

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Objective: *The removal of primary canine tooth buds is a harmful oral mutilation. It is performed in infants/babies aged 12 months and below, in many countries of eastern Sub-Saharan Africa and is justified by a therapeutic reason. This library-based research shows the epidemiology of IOM, the believed therapeutic meaning, the management of the practice and the risks and consequences for the children, in the short and in the long term. Design:* *A review of the literature from 1960s, on infant oral mutilation in Africa and his diffusion in the world. Methods:* *Journal articles on search engines like PubMed, Scopus, Dentaid Organization, Google and their bibliography. Results:* *Infant oral mutilation is a practice performed by a variety of village healers and it is a custom that passes between communities and tribes. IOM causes severe pain, serious oral health complications and, often times, death. The beliefs and attitude of parents and relatives about teething have serious implications for management of childhood fevers which may deserve urgent medical treatment. Long term effects of IOM can include malformations of primary and permanent teeth, missing teeth, facial disfigurement and transmission of blood borne disease such as HIV/AIDS. Failure of parents to disregard these attitudes and beliefs is indeed worrisome as serious childhood illness, which are unrelated to teething, are likely to be left untreated or may not be given the seriousness they deserve. Conclusions:* *Protecting children against the practice of IOM is everyone's responsibility. This kind of violence against infants is not justifiable or acceptable at all. International human rights laws are based on respect for every person's human dignity. Infants, as people, should receive no less protection than adults. There have been several reports of IOM being seen in immigrants from many countries of eastern sub-Saharan Africa to France, Israel, Norway, Sweden, Uk, USA, Australia and New Zealand. Dental professionals who practice in developed Countries must be aware of possible occurrence of IOM consequences in their patients.*

KEYWORDS: Forensic Odontology, Child abuse, Dental mutilation

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