

YEAR	RELEVANCE	AUTHORS	IOM COUNTRY	TITLE / JOURNAL or PUBLISHER	SUMMARY/CONCLUSION
1905	The earliest mention of IOM as a treatment for febrile illnesses - in an American Home Encyclopaedia of Health 1905. Has this teaching been taken to Africa etc from the USA?	Richardson J G		Difficult teething. Medicology - Home Encyclopaedia of Health. New York 1905. Page 467	
1932	VERY IMPORTANT: the earliest reference so far found of IOM, but as a prophylaxis.	Seligman C G, Seligman B Z	SUDAN	Pagan Tribes of the Nilotic Sudan. Book published 1932	This book details the customs and beliefs of the pagan tribes of the Nilotic Sudan in great detail
1969	First use of the term "mutilation"	Pindborg J J	UGANDA	Dental mutilation and associated abnormalities in Uganda. American Journal of Physical Anthropology 1969 Vol 31. Pg 383-390	None of the Acholis subjected to IOM could give a reason for the custom.
1971	The association of teeth with superstitions. Only description of a "fundi" - village tooth extractor	Halestrap D J	UGANDA	Indigenous Dental practice in Uganda British Dental Journal 1971 Nov 16. Pg 463-464	Throughout Uganda the teeth have a special significance and folklore indicates they have a strong association with witchcraft and superstition.
1975	The myths and the true facts about teething. Shows that serious symptoms have been wrongly attributed to teething from very early times.	Editorial. No author listed		Teething Myths British Medical Journal 1975 Dec 13. 604	
1979	IMPORTANT: States: Duku (1976) reported that this phenomenon had started among Sudanese refugees in Zaire in 1967, initiated by a dismissed Zairian medical assistant. IOM procedure witnessed and tissue excised was investigated.	Abusinna I M	SUDAN	Lugbara teeth germectomy of canines for the newborn babies a magico-religious phenomena in some African tribes Egyptian Dental Journal 1979 25:3 209-213	Parasitic infestations are common and can occur in the oral cavity. None seen in this study. Not easy to solve medically because of magico-religious dimension.
1983		Mosha H J	TANZANIA	Dental mutilation and associated abnormalities in Tanzania Odontostomatol.Trop 1983 VI:4 215-217	This practice is encouraged to make money for local practitioners. It was surprising to find that well educated and high officials in the community fall victim to this bad practice, which was even performed by some private medical doctors.
1987	VERY IMPORTANT: 'Excellent description of technique, sequelae, and spread of practice	Stefanini A	UGANDA	Influence of education on local beliefs Tropical Doctor 1987 July 132-134	A "curative" approach implies acceptance of the practice. Younger mothers were more reluctant to allow IOM, some escaping from their families.
1987	IMPORTANT: Recommendations on teaching how to treat diarrhoea etc in the first place should be noted	Wahab M M A	SUDAN	Traditional practice as a cause of infant morbidity and mortality in Juba area (Sudan) Annals of Tropical Paediatrics 1987 Vol 7: 18-21	Recommendations: 1) A health education programme which teaches the mothers: (a) that both milk teeth and permanent teeth are true teeth; (b) The cause of diarrhoea and vomiting and how to treat it at home or in hospital using Oral Rehydration Salt ; (c) The possible complications that can result from extraction of milk teeth. 2) Medical personnel, especially those who practise extraction, should be informed that it is an illegal procedure and asked to stop doing the operation.
1988	Lists preventive measures used by traditional healers	Rawal, Yogini	UGANDA	"Ebiino: Belief or Fact? Half-yearly Dental News Letter Uganda Dental Association. Dec 1988. 18-23	A challenge for dental health workers to educate people out of this belief.
1989	Importance of educating traditional healers	Walker ARP et al	SOUTH AFRICA	Appendicitis in Soweto, South Africa: Traditional healers and Hospitalization The Journal of the Royal Society for the Promotion of Health 1989 Vol 109.6: 190-192	

1989		Baba S P, Kay E J	SUDAN	The mythology of the killer deciduous canine tooth in southern Sudan Journal of Pedodontics 1989 Vol 14: 48-49	A major educational campaign should be launched. (1989)
1989	PROVISION OF TOOTHBRUSH: Recommends the local chewing stick rather than an old toothbrush. Not relevant to IOM group, but to School Sponsorship programmes!	Normark S, Moshia H J	TANZANIA	Relationship between habits and dental health among rural Tanzanian children Community Dent Oral Epidemiology 1989 Vol 17: 317-321	INTERESTING: no difference in caries levels between brushing with nylon toothbrush or using local chewing stick (miswaki). Chewing sticks probably preferable to worn-out toothbrush. Therefore the miswaki is recommended.
1989	INTERESTING USE OF PLACEBO.	Bwengye E	UGANDA	Uganda: newborns, false teeth and diarrhoea Dialogue on diarrhoea 1989 Issue 39 6	
1990		Dagneu MB, Damena M	ETHIOPIA	Traditional health practices in communities in north-west Ethiopia Tropical Doctor 1990 Vol 20: 40-41	After milk teeth extraction, complications such as otitis and osteomyelitis were observed.
1991	IOM not practised everywhere in Tanzania. Important for health workers to determine the practices of their local area and educate accordingly. (1991)	Matee M I N, Palenstein Helderma W H van	TANZANIA	Extraction of 'nylon teeth' and associated abnormalities in Tanzanian children African Dental Journal 1991 Vol 5: 21-25	Practice still prevalent in Singida, Dodoma, Tanga and Morogoro regions and in the Acholi tribe. Other tribes - Basigus, Bakigas and Batoros - did not show this type of mutilation. In Tanzania, pregnant women and under-5's attend Maternal & Child Health clinics for monthly prenatal and medical checkups preceded by a health talk. Once a year, this contains an OHE talk. Dental workers should determine the existence of the 'nylon' teeth problem in this area to give appropriate OHE. (1991)
1991	Quotes a 1905 American health care book: "A very common cause of diseases of the stomach and bowels, and also of convulsions in children, is to be found in the hardening or induration of the gums at the time of teething, and this blunder of nature's ought to be promptly remedied whenever the gums in infants at the time of the first dentition are found to be red, swollen and hot to the touch. <i>by the use of the lancet.</i> "	Gibbons HL, Hebdon CK		Teething as a cause of death West J Med 1991 Dec 155 658-659	
1991	IOM not mentioned here - but an interesting insight into the perceived relationship between teething and diarrhoea.	Adetunji J A		Response of parents to five killer diseases among children in a Yoruba community, Nigeria Soc.Sci. Med. Vol 32: 12 1379-1387. 1991	Teething was the major cause of diarrhoea reported (about 44%).
1992	"Haifat" - the lancing of the gum- is the practice described here. Says that the 'lugbara' practice of removing the tooth buds is new in southern Sudan (1992) brought in by refugees from neighbouring countries.	Rasmussen P, Elkhidir Elhassan F, Raadal M	SUDAN	Enamel defects in primary canines related to traditional teething problems in Sudan International Journal of Paediatric Dentistry 1992 Vol 2: 151-155	The most serious problem may be that the belief in teething as the cause of severe health problems will distract parents; attention from the real cause of disease and thus from necessary medical help.
1992	Reports that the government has condemned the practice, (doesn't say when) but in 1990 it was still prevalent and practised secretly because of the government.	Hiza J F, Kikwilo E N	TANZANIA	Missing primary teeth due to tooth bud extraction in a remote village in Tanzania International Journal of Paediatric Dentistry 1992 Vol 2: 31-34	The practice of tooth bud extraction still exists in some parts of Tanzania.
1993	Women may have better access to modern health care than the men.	Welbury R R, Nunn J H, Gordon P H et al	ETHIOPIA	"Killer" canine removal and its sequelae in Addis Ababa Quintessence International 1993 Vol 24:5 323-327	More children of married mothers had undergone killer canine removal. In spite of comprehensive health care available at Gemini Trust, some parents still rely heavily on traditional health practices.
1994	IMPORTANT: Evidence that IOM is still practised among the Ethiopian community in Israel (1994)	Holan G, Mamber E	ETHIOPIA	Extraction of primary canine tooth buds: prevalence and associated dental abnormalities in a group of Ethiopian Jewish children International Journal of Paediatric Dentistry 1994 Vol 4: 25-30	Practice still continuing (1994)
1994	EDUCATION TECHNIQUE Important to teach mothers the causes of diarrhoea	Ahmed I S, Eltom A R, Karrar Z A et al	SUDAN	Knowledge, attitudes and practices of mothers regarding diarrhoea among children in a Sudanese rural community East African Medical Journal 1994 Vol 71: 716-719	Importance of education as to the causes of diarrhoea and its prevention.

1994	IMPORTANT: describes importance of traditional healers to villagers. Not about IOM	Ngilisho L A F, Moshah H J, Poulsen S.	TANZANIA	The role of traditional healers in the treatment of toothache on Tanga Region, Tanzania Community Dental Health 1994 Vol 11: 240-242	Many patients went to healer first and only went to health centre if still in pain. Many healers claimed to refer patients to clinic if their treatment did not work.
1995	Suggests including social anthropologists to combat the belief.	Hassanali J, Amwayi P, Muriithi A	KENYA	Removal of deciduous canine tooth buds in Kenyan rural Maasai East African Medical Journal 1995 Vol 72:4 207-209	There is a strong belief among the Maasai that fever etc is caused by 'nylon' teeth. A multi-disciplinary approach involving social anthropologists in addition to dental and medical personnel is recommended in order to discourage this harmful operation that appears to be on the increase. (1995)
1995		Nyandindi U, Milen A, Palin-Palokas T et al	TANZANIA	Training teachers to implement a school oral health education programme in Tanzania Health Promotion International 1995 Vol 10:2 93-100	Investment in workshops is necessary to assure correct teaching of OHE.
1997		National Committee on Traditional Practices of Ethiopia	ETHIOPIA	Children's Teeth and their Care. Booklet published 1997	IOM reported to be decreasing in 55% of regions but no change in 30% and an increase in a few.
1997	Importance of understanding the Ethiopian beliefs about health and medicine when preparing educational material	Hodes R	ETHIOPIA	Cross-cultural medicine and diverse health beliefs. Ethiopians abroad. Western Journal of Medicine 1997 Vol 166: 29-36	Health education must address Ethiopian concerns and customs
1997	IMPORTANT: Since 1983 several interventions condemning the practice have been begun in Tanzania; public addresses by politicians; use of mass media for health education; police arrests of traditional healers. Useful questionnaires for future studies	Kikwilu E N, Hiza J F R	TANZANIA	Tooth bud extraction and rubbing of herbs by traditional healers in Tanzania: prevalence, and sociological and environmental factors influencing the practices International Journal of Paediatric Dentistry 1997 Vol 7: 19-24	Most of the parents went to a hospital more than three times before they went to a healer, reflecting inadequate management in the hospitals. It is recommended that intensive health education on the causes, treatment and prevention of fevers and diarrhoea, in conjunction with effective management of these diseases by health facilities, should be instituted to combat the beliefs that lead to treatment by traditional healers.
1998	Careful methodology indicates that extraction of milk teeth in the infant can cause weight loss.	Asefa M, Hewison J, Drewett R	ETHIOPIA	Traditional nutritional and surgical practices and their effects on the growth of infants in south-west Ethiopia Paediatric & Perinatal Epidemiology 1998 Vol 12: 182-198	A reduction in unnecessary uvulectomy and milk teeth extraction would be desirable.
1999	The first report of a case of dental mutilation from Ethiopia (in Sweden)	Eriandsson AL, Backman B	ETHIOPIA	A case of dental mutilation Journal of Dentistry for Children 1999 July/Aug 278-279	Indicates that the practice was still in use in Ethiopia in the 1980's.
1999		Kirunda W	UGANDA	"Ebino" (false teeth): how the problem was tackled in Tororo Tropical Doctor 1999 July: 190	Education of students and TDP's can reduce practice of IOM
2000	IMPORTANT: Criteria for suspected canine enucleation very useful for future studies. Need for UK dental professionals to be aware of these cultural practices.	Rodd H D, Davidson L E	SOMALIA	Ilko dacowo: canine enucleation and dental sequelae in Somali children International Journal of Paediatric Dentistry 2000 Vol 10: 290-297	Culturally sensitive education is indicated to discourage this ritual practice. Dental professionals should be aware of such cultural practices.
2000	VERY IMPORTANT: Excellent overview; the best summary of consequences yet.	Graham E A, Domoto P K, Egbert M A.	SOMALIA	Dental Injuries due to African traditional therapies for diarrhoea Western Journal of Medicine 2000 Vol 173 135-137	Consequences of IOM: mandible has been documented to be smaller in IOM cases; hypoplasia of abutting primary and permanent teeth; retention of lower B's with distal eruption of lower 2's along with displacement and impaction of lower 3's ; Odontoma; infection, fatal sepsis; decreased growth for up to 4 months after IOM.

2000	VERY IMPORTANT Comprehensive account of beliefs (often verbatim); in depth analysis of the whole topic.	Mogensen H O	UGANDA	'False teeth' and real suffering: the social course of 'Germectomy' in Eastern Uganda Culture, Medicine and Psychiatry 2000 Vol 24: 331-351	'False teeth' as a disease, appeared in the late 1970's or 80's.
2000	VERY IMPORTANT: Health education has been implemented in the hospital including videos and education sessions targeting ebino.	Iriso R Accorsi S, Akena S et al	UGANDA	Killer' canines: the morbidity and mortality of ebino in northern Uganda Tropical Medicine and International Health 2000 Vol 5:10 706-710	Use of same unsterilised tool on several infants has serious implications in Gulu District because of the high HIV rate. Health education has been implemented in the hospital including videos and education sessions targeting ebino.
2000		Macknin ML, Piedmonte M, Jacobs J, Skibinski C.		Symptoms associated with teething: a prospective study. Pediatrics 2000; 105: 747-52	Increased biting, drooling, gum-rubbing, sucking, irritability, wakefulness, ear-rubbing, facial rash, decreased appetite for solid foods, and mild temperature elevation were all statistically associated with teething. Congestion, sleep disturbance, stool looseness, increased stool number, decreased appetite for liquids, cough, rashes other than facial rashes, fever over 102 degrees F, and vomiting were not significantly associated with tooth emergence
2000	IOM not mentioned but a useful study concluding that there is good evidence that tooth eruption is not strongly associated with significant symptoms.	Wake M, Hesketh K, Lucas J.		Teething and Tooth Eruption in Infants: a Cohort Study Pediatrics 2000 Vol 106: No 6.1374-1379	Did not confirm the expected strong relationships between tooth eruption and a range of teething symptoms in children 6 to 30 months old.
2001	An example of IOM at the Eastman Dental Hospital, UK. The first such report of a family emigrated from Africa.(2001). Author suggests prevention of febrile illness the most important way of preventing IOM.	Dewhurst S N, Mason C	UGANDA	Traditional tooth bud gouging in a Ugandan family: a report involving three sisters 'International Journal of Paediatric Dentistry 2001 Vol 11: 292-297	The mother of these children intimated that tooth bud gouging might be practised in Britain but not directly admitted due to fear or embarrassment. Improvements in sanitation, nutrition and vaccination are probably the best ways to reduce the prevalence of IOM by preventing severe febrile illness.
2001	The myths and modern approaches to teething	Ashley M.P.		It's only teething. ... A report of the myths and modern approaches to teething British Dental Journal Vol 191; No 1; July 14 2001. 4-8	
2002	Refers to Ibyinyo as a disease - "swelling due to tooth pressure". No mention of IOM or treatment.	Dresch-Bogale S., Rwamfizi V	RWANDA	KAP Study on Infant and Young Child Feeding Consultancy Report Ministry of Health, Kigali, Rwanda / UNICEF. Oct 2002	Diseases traditionally known as Ibyinyo (dental swelling due to bad tooth pressure) and Uburo are quite frequent in some areas like Muhura, Kibungo Health District and Nyanza. There is no mention of IOM as a treatment for Ibyinyo or for diarrhoea.
2002	Opinions of parents and health professionals on tooth eruption symptoms. Only 9% of paediatricians believe that diarrhoea is associated with teething compared with 56.7% parents and 52% paediatric dentists.	Barlow B S. Kanellis M J; Slayton R L.		Tooth eruption symptoms: a survey of parents and health professionals ASDC journal of dentistry for children 2002 Vol 69 (2) 148-50	Differences exist regarding teething symptoms between parents, paediatricians and paediatric dentists.
2003	Only mention so far of IOM in Rwanda	Benzian H	RWANDA	World Dental Development Fund: Rwanda Project Visit Report. Developing Dentistry 2003 Vol 3:	Still ongoing when report written
2003	IMPORTANT: very comprehensive review of current literature. Excellent introduction. Gives many more local terms for ebino.	Accorsi S, Fabiani M, Ferrarese N et al	UGANDA	The burden of traditional practices, ebino and tea-tea, on child health in northern Uganda. Social Science and Medicine 2003 Vol 57:11 2183-2191	Hospital based studies are prone to selection bias. The authors plan to supplement this with population based studies in order to better understand the sociological and cultural factors, prevalence and impact of these interventions.
2003	The first article introducing Dentaid as a force in the fight against IOM	Wordley J		Infant Oral Mutilation - a tragic misconception Developing Dentistry 2003 Vol 3: 19-20	

2004	IMPORTANT paper on beliefs about teething	Kasangaki A	UGANDA	The mothers' experience of their infants teething at three different settings in Uganda and South Africa Submitted in part fulfillment of the requirements for the degree of Master of Science in dentistry in the Faculty of Dentistry and World Health Organisation Oral Health Collaborating Centre, University of The Western Cape 2004	Further studies exploring both the child health care professionals' and the mothers' understanding of teething. □□ Further studies aimed at an in-depth exploration which could probably provide a deeper insight into the mothers' understanding of teething. □□ Prospective observational studies will be valuable to probably clarify and/or evidence the signs and symptoms that could be associated with the eruption of the primary dentition. □□ Educate mothers what teething is and what it is not and how to respond to the various ascribed signs and symptoms to teething Bearing in mind parental health beliefs in relation to diarrhoea, much harm could be prevented by counselling mothers on the possible causes and presentation of diarrhoea and on how and how not to respond to it.
2004	2004 World Medical association called for an end to IOM, at the first ever planning conference for oral health in Africa.	Odigwe C (Report on speech by James Appleyard (below))		World Medical Association 'appalled' at oral mutilation in parts of Africa 'British Medical Journal 2004 Vol 328 (7446): 976	
2004	2001 Study shows that 12.3% of missing permanent teeth in Kenyans resulted from extractions for traditional practice	Sanya B O, Ng'and'a P M, Ng'ang'a RN	KENYA	Causes and patterns of missing permanent teeth among Kenyans East African Medical Journal Vol 81. No. 6. June 2004	Indicates a need to establish, within specific communities, to what extent this tradition is being practised.
2005		Ellis J, Arubaku W	UGANDA	Complications from traditional tooth extraction in South-western Uganda Tropical Doctor 2005 Vol 35(4) 245-246	Systemic complications of IOM are mostly infective due to late presentation of the original illness or complications of the procedure. Poor growth in infants has been noted. Local complications are haemorrhage and chronic damage to erupting teeth and/or bone.
2005		Bataringaya A, Ferguson M, Lalloo R	UGANDA	The impact of ebinyo, a form of dental mutilation, on the malocclusion status in Uganda Community Dental Health 2005 Vol 22(3): 146-150	The practice of ebinyo can impact on the occlusal status in the permanent dentition years later.
2005	IMPORTANT: Comprehensive overview of IOM especially its history	Johnston N L, Riordan P J		Tooth follicle extirpation and uvulectomy Australian Dental Journal 2005 Vol 50:4 267-272	
2005	IOM not mentioned, but an interesting study into the beliefs of parents and health workers about teething.	Sarrell EM, Horev Z, Cohen Z et al		Parents' and medical personnel's belief about infant teething Patient Educ Couns 2005 Vo 57(1) 122-125	Almost all parents, the majority of nurses, and many physicians believe teething is associated with minor symptoms. A substantial minority ascribe potentially serious symptoms to teething.
2006	VERY IMPORTANT:	Africare- Community Based Integrated Management of Childhood Illness (CIMCI) project	UGANDA	Operations Research into Oburo and Ebinyo Folk Diseases Report prepared July 2006	Both beliefs still widespread with more people believing in <i>ebinyo</i> than <i>oburo</i> . Recommended that Africare and its health partners carry out increased sensitization and health education about the dangers of <i>extraction</i> .
2007	VERY IMPORTANT: 2007. Strategy against IOM recommended for Muhimbili Dental School.	Kahabuka F K	TANZANIA	The "Nylon teeth myth" Tanzania Dental Journal 2007 Vol 14(1): 5-6	DDS students (2006-7) recommended a strategy for the dental school at Muhimbili to adopt.
2007	VERY IMPORTANT Describes IOM education strategy used in Uganda in 2003 (?) and subsequent effect after 1.5 years Analysis of beliefs VERY IMPORTANT.	Jamieson L M	UGANDA	Using qualitative methodology to elucidate themes for a traditional tooth gauging education tool for use in a remote Ugandan community Health Education Research 2006 Vol 21(4) 477-487	Increased awareness. Ebinyo education incorporated into other areas of hospital services. Topic of discussion in church services.
2007	Interesting reversal of ideas: Some of the respondents believe that the diarrhoea causes <i>false teeth</i> .	Nuwaha F, Okware J, Hannington T, Charles Mwebaze	UGANDA	False Teeth "ebinyo" and millet disease "oburo" in Bushenyo district of Uganda African Health Sciences. 2007. Vol 7 (1); 25-32	1 in 2 families reported a child with <i>false teeth</i> or <i>millet disease</i> in the past five years.
2008	3 year old Ethiopian child, recently adopted in USA, with missing lower deciduous canines	Mestman, S	USA	A Timely Article Journal of the American Dental Association 2008 Vol 139: 659	

2008	Sudanese migrant to Australia - case report. 15 yr old boy has IOM in Uganda when a toddler 1994-5?	Amailuk P, Grubor D	SUDAN	Erupted compound odontoma: case report of a 15-year-old Sudanese boy with a history of dental mutilation British Dental Journal 2008 Vol 204(1): 11-14	A rare case. Australia has a large population of recent immigrants from areas in Africa where IOM is practised and more patients with abnormalities are likely.
2008	VERY IMPORTANT: The overview is excellent Definition of IOM: performed for perceived medical reasons; performed on infants who cannot consent; can have disastrous health consequences	Edwards P C, Levering N, Wetzel E. Saini T	SUDAN	Extirpation of the Primary Canine Tooth Follicles: A Form of Infant Oral Mutilation Journal of the American Dental Association 2008 Vol 139: 442-450	Importance of dentists and allied personnel in developed countries being aware, when treating refugees from undeveloped areas, of the social factors being IOM and the dental and physiological sequelae
2008	VERY IMPORTANT Used as the basis of the Dentaid Overview document	Gollings J	TANZANIA	'Meno ya plastiki': A literature review and prevalence study on a group of Tanzanian school children Unpublished report. 2008	Culturally sensitive education programmes required. Also health centres in the UK should be aware of the practice and educate accordingly.
2008	Emphasises the importance of sustained and informed support (respecting cultural traditions) if changes in practice are needed.	Veloso Y C		Knowledge and practice: using water in the home Footsteps; Tearfund 2008 71-80: 74	Essential to have ongoing education to achieve change.
2008	VERY IMPORTANT: FDI paper. Community Health Education programmes have been carried out amongst the Maasai since the 1990's. Evaluation in 2005 showed 72% of mothers had IOM on their children. Knowing the hazards, only 20% of the people advocate it to be stopped. (2007)	Hassanali, Jameela; Wanzala, Peter		Enucleation of Deciduous Canine Tooth Buds in Infants in Sub-Saharan Africa Developing Dentistry Vol 9. No 1.2008	"IOM could be addressed through WHO/AFRO Regional Strategy for oral health in Africa with sharing of experiences of intervention strategies being implemented by key researchers in the SubSaharan region in workshops and field stations."
2009	First report of Chad immigrants in France. In 1998 and 2000 , both at 3 months of age, 2 children had IOM in Chad.	Khonsari RH, Corre P, Perrin J-P, Piot B	CHAD	Orthodontic Consequences of Ritual Dental mutilations in Northern Chad J.Oral Maxillofac Surgery 67:902-905, 2009	First account of Angolan immigrants having undergone the practice from so northern a region as Tchad.
2009	Report of IOM in DR Congo	Dhego G	DR CONGO	Comparative study of the primary dentition with the eruption of the teeth called Refugee Teeth or Plastic Teeth	
2009	Somalian migrant to Norway - case report. 10 yr old girl had IOM in Somalia in 2000/2001?	Espelid I, Agnalt R	SOMALIA	Removal of Tooth Buds by traditional healers in Africa (translated from Norwegian) Nor Tannlegeforen Tid 2009: 119:294-297	Somalis are the fifth largest immigrant group in Norway
2009	Report of 2005 study interviewing parents, medical staff and traditional healers. 125 people from 11 tribes were interviewed: they had 404 children between them. 210 children had Xns; 48% from the Acholi tribe. 6 tribes had no children with Xns.	Odong P O; Laruni C; Opio A; Okullo I et al	UGANDA	Killer canine teeth: knowledge, attitude and practice in Bardege Division, Gulu district, Northern Uganda. J Kenya Dental Association Vol 1. No 2. January 2009	"Traditional healers and community members should be sensitized about safety practices in the treatment of false teeth and traditional extractions should be discouraged."
2009	Gukura icinyo (is this IOM?) as cause of HIV/AIDS	Phocas n, Lawrence N, Caraziwe C.	BURUNDI	Information Report on the Problem of the fight against HIV/AIDS	
2010	Reports the inaccurate historical association between teething and significant morbidity and mortality	Sood M, Sood S		Problems with Teething in children Pediatric Oncall (serial online) 2010 (cited 2010 April 1); 7. Art # 20	
2010	Reports the influence of Traditional Birth Attendants (TBAs) in continuing the practice of IOM.	Mutai J, Muniu E, Saw J, Hassanali J, Kibet P, Wanzala P	KENYA	Socio-cultural practices of deciduous canine tooth bud removal among Maasai children. International; Dental Journal (2010) 60: 94-98	There is need for TBAs to be continuously trained and monitored with a view to advancing feasible strategies to address the main causes of illnesses amongst children.
2010	Only evidence so far of IOM in Burkina Faso	Sent by Rev James, World in Need, Burkina Faso	BURKINA FASO	IOM document. Personal contribution only	
2011	First evidence of IOM in African immigrants in New Zealand.	Fleur O de Beavis; Amelia C Foster; Kathrn N Fuge; Robin Whyman	SUDAN; KENYA;	Infant Oral Mutilation : a New Zealand case series New Zealand Dental Journal 107. No 2. 57-59 June 2011	Dental professionals in new Zealand should be aware of the practice and its sequelae, particularly with an increase in migrant populations from Eastern African countries.