

EDITORIAL ON THE SPECIAL EDITION OF ANNALS OF IBADAN POSTGRADUATE JOURNAL OF MEDICINE ON MANAGEMENT OF CLEFT LIP

This special edition contains nine articles covering various aspects of cleft lip and palate. It's a rich contribution from several specialties that highlights the collaborative nature of the management of the disease. From this, one can conclude that research in cleft lip and palate is rapidly evolving in our sub-region. There is an unusual insertion of crossword and diagrammatic puzzles designed to ease the tension of learning.

The first article: Antenatal events amongst mothers of babies with orofacial clefts was an observational cross-sectional study using questionnaires. This came up with the finding of the use of certain medications in pregnancy amongst 72 mothers. There was an interesting finding of herbal medication in about 20% of them. However no antenatal predisposing factors were identified. Because the mean age of mothers in the series was about 35 years, the authors indicated that the role of advanced parental age on the prevalence of congenital anomaly was not consistent in literature. This aspect therefore requires further investigation.

The second paper is an interesting electronic search bordering on systematic review through PubMed and Google Scholar on the subject of Hemifacial Microsomia (HM). This literature review on the second most common craniofacial birth defect is pertinent here. The author described methods of classification of HM and came up with Vento and associates' proposed classification called by the acronym OMENS which mirrors UICC and TNM systems of classification of cancers. They also discussed that the new classifications of HM deformities failed to galvanize broad acceptability since its introduction about 20 years ago. This is the kind of vagary that occurs when several classification methods are brought to view. The popularity of such methods of classification depends on the acceptability and the way such can be applied to day-to-day use in clinical practice.

There was only one case report. This was on a missed diagnosis of an isolated transverse facial cleft presenting as a delayed case due not to the caregivers but to Healthcare workers failure to diagnose. Repair of such anomaly is usually gratifying of course made a lot of difference in the psyche of the patient concerned.

In the molecular genetics review paper by Oboli *et al.* it is gratifying to note that genetic studies of cleft lip

and palate are gradually increasingly becoming popular in our environment. The next review, Orofacial clefts and cardiovascular risk and diseases discussed the causal association of the two. It has been known for a long time that congenital cardiac anomalies are common with cleft lip and palate and this comprehensive review spells out common syndromes with congenital cardiac anomalies and the role of the paediatric cardiologist in the management of such patients.

Onah *et al.*'s Orthodontic needs of patients with cleft lip and palate is a longitudinal study that shows that there is a need for long-term follow-up of these patients. In another cohort study of 115 surgeries the authors' outcomes of a high incidence rate of 39%, a little over half of these developing fistula. Also, a little over half of the patients were considered to have to have near normal speech. This kind of review is encouraged.

In the article of speech articulation errors in Nigerian individuals with cleft lip following repair Olusanya *et al.*, in bringing up this preliminary overview indicated that at the present infancy level of care, five centres in Nigeria provided speech therapy services under the Smile Train partnership.

The last of the broadly distributed publications is a review of perioperative antibiotic therapy in orofacial clefts surgery by Olawoye *et al.* Their reporting on a large retrospective series comprising 3,108 patients from India in which there was no difference in the wound infection rates between the group which had postoperative antibiotics and the group which did not is instructive.

There is certainly an improvement in the science compared to research of 20 years ago when the investigations were largely epidemiological. The time has come to emphasize the importance of translational research which should dovetail to improved management of these patients and provide a good avenue for comparison with management in other climes especially those with more advanced technology.

O.M. Oluwatosin
Professor of Surgery.