

Research Article

Treatment of Emerging Skin Diseases Using a New Lotion (Oronsfranklo)[®]

Oronsaye FE¹, PI Oronsaye¹, SI Oronsaye¹¹ Professor, Department of Medical Laboratory Science, College of Medical Sciences, University of Benin City, Nigeria.

Copyright: © 2018 Oronsaye FE, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

Background: The emergence of new diseases of unknown aetiology is a common health challenge in developing countries. These diseases have defiled all known medications. They affect upper region of the body, particularly the face, neck and the jaw.

Methods: One hundred subjects comprising 20 children, 50 adults and 20 elderly subjects who were discovered having bumps 'as it is called' on the face, scalp and neck were randomly recruited into the study. Their consent was obtained verbally. And we assured strict confidentiality: The subjects were given the lotion *oronsfranklo*(R) which was applied to the affected areas using sterile cotton wool swabs twice daily, preferably morning and evening. The lotion is currently being investigated for its toxicity in the Department of Pharmacology and toxicology University of Benin City Nigeria. The lotion is exclusively for external use. This lotion has been successfully tried for treating both superficial fungal and bacterial infections in Benin Nigeria.

Results: the most dramatic effect of the lotion is the fact that during its application, successful clinical response was achieved within three days. Therefore, it is rightly called, the 'three days cure'. and in some cases, it is applied only once. And has long term shelf life of >five years making it every economical to the users.

Conclusion: We present in this study, the effect of *ORONFRANKLO*(R) in treating all kinds of superficial skin infections in Benin City Nigeria of (Figure 1 and 2). The lotion has already been registered with the ministry of commerce and industry, Nigeria as a pre-registration requirement by NAFDAC Nigeria, before they certify any drug for commercial use. So *ORONFRANKLO* is the trade registered mark of this lotion by the ministry of commerce and industry Nigeria.

Introduction

Climate change that has enveloped the world for some years now may be responsible for the emergence of previously unsown diseases that are ravaging the world now, especially in the developing countries, where the Medicare is still at the low level. Most of these diseases affect the fore skin and particularly sites of the body that are exposed to the atmosphere, which in tropical countries are of more significance than in climate regions. The upper regions of the body such as the face upper limbs, neck area are the areas mostly vulnerable [1]. Since these diseases are new, treatment for them is still being developed. These diseases present as vswellings, inflammations and boils and some may present as rasches, which could burst and result in spreading to areas not previously affected [2,3]. Thus, they can be classified as contagious. However, there has been no wide spread of the diseases so, measures to check the epidemic nature have not been put in place or may not be necessary for now, since only very few individuals in certain communities have been infected [4]. Nevertheless, proper preventive and treatment measures are necessary at this stage to prevent and stop the disease from assuming an epidermis nature. Consequently, the need for adequate treatment of these emerging ailments cannot be over emphasised.

Subjects and Methods

One hundred subjects comprising 30 children, 50 adults and 20 elderly persons encountered during a free rural health campaign in three rural areas of Edo state, Nigeria who were suffering from various kinds of superficial skin infections of unknown eteology were randomly recruited into the study. Their consent was obtained verbally and were assured strict confidentiality, before the commencement of the study [5]. Subjects had different types of skin rashes, swollen and irritation, the face neck region, the groin, upper and lower limbs were the sites mostly affected. In some cases the skin look cancerous. All

the sites were related with the lotion *ORONFRANKLO*(R) composed of ethyl salicilates. administered twice daily using sterile cotton wool buds.

Results

Satisfactory clinical response was achieved, after two weeks of treatment. (Figure 1 and 2) shows one of the cases of the subjects.

Discussions

This study presents, the treatment of emerging diseases using a new lotion (*ORONFRANKLO*). The disease that affects the neck region is often referred to as bumps by Physicians. It is an ulcerating swollen around the neck region and could be haemorrhagic in very severe cases [6,7]. those that affect the feet are similar to *Athelets foot* However, all the cases responded to the application of the lotion. There was no Laboratory diagnosis to identify and classify the types and of infectious agents responsible for the ailment, this was largely due to the rural setting where the study was carried out [8,9]. idiagnostic procedures would have been very relevant and would have given credence to the study and useful epidemiologically and statistically [10,11].

*Corresponding author: Oronsaye FE, Professor, Department of Medical Laboratory Science, College of Medical Sciences, University of Benin City, Nigeria, Tel: +2347085424003; Fax: +2347085424003; E-mail: sayfrankon@yahoo.com

Received: September 24, 2018; **Accepted:** October 08, 2018; **Published:** October 12, 2018

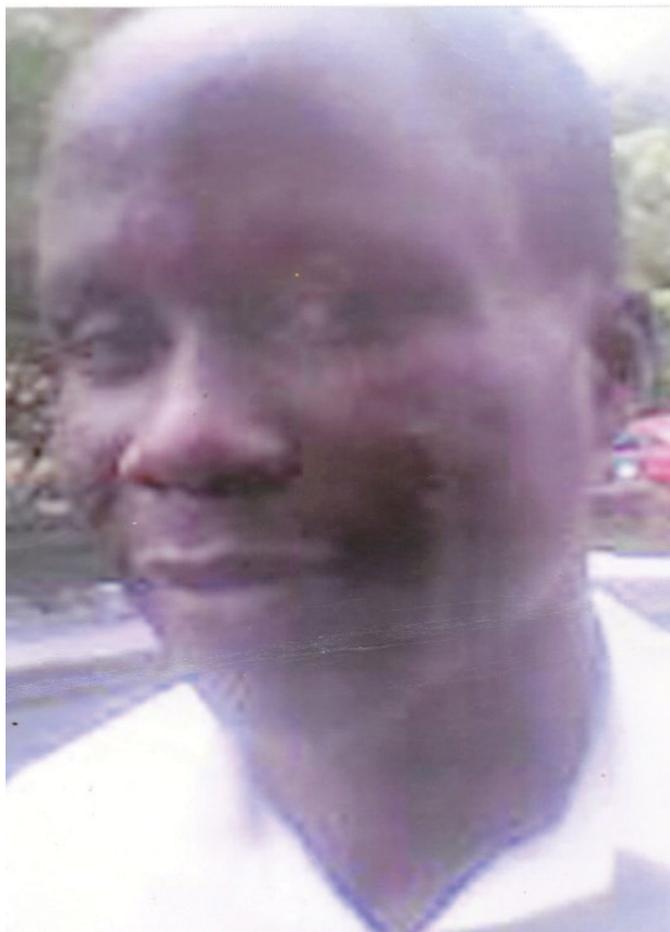


Figure 1: Before Treatment



Figure 2: After treatment

Conclusion

This study presents, the treatment of various skin lesions suffered by rural subjects in Edo state Nigeria.

References

1. Strains WHO (2014) First global report of antibiotic resistance, reveals serious worldwide threat to public health. WHO monthly report, 2014.
2. Smith J T (1984) The mode of action of the fluoroquinolones and possible mechanism of resistance. J A C Suppl. D
3. Cowan ST, Steel KJ (1974) Manual for the identification of the medical bacteria. 2 EDITION Cambridge University press. London pp. 15-21.
4. Gurrant TL (82) Nausea, vomiting and non-inflammatory diarrhoea Principles and practice of infectious diseases 3rd Edition Church Hill Living stone New York. 837-851
5. Hancock DD and Riley LW (1995) Ecology of E coli 0157 in cattle and impact management and practice in 85-91 C O Brien AD Edition E coli 0157 and other shiga producing E. Coli strains. America society of microbiology Washington DC 85-91pp.
6. Gross RJ, Holmes DD (1990) Enterotoxin testing n of Escherichia coli causing epidemic infantile enteritis in the UK i LANCET 1: 112-118.
7. Oronsaye FE (2013) Prevention of HIV/AIDS from sociocultural perspective. Pan African Journal (in Press).
8. Oronsaye FE, Iyoha O (2012) Environmental health risks posed by liquid/ solid waste and coew droplets in Nigerria. *Journal of biological science and Bioconservation* 4: 39-41.
9. Oronsaye FE, Yussuf EO (2005) Health risks posed by vegetables sold in markets in Benin city Nigerias. *International Journal of food science technology* 29(10): 60-62.
10. Idu M, SE Omonigho, nIgeleke C I9, Oronsaye FE, Orhue EB (2008) Microbial load contamination of medicinal plants sold in markets in Benin city Nigeria. *India Journal of traditional knowledge* 7: 669-672.
11. Oronsaye FE, Yussuf EO, Esiekpe E (2015) Treatment of stubborn fungal infection of the skin using a new lotion African Journal series (press).