

## SanoSkin® -OXY

The **SanoSkin® OXY** consists of vegetable ozonated oil, sanoskin® OXY has strong antimicrobial properties. Ozone is known to kill E. coli 3125 times faster than Chlorine and is used in a variety of industrial processes. (Chemical Technology An Encyclopaedic treatment, Vol 1, New York: Barnes & Noble Inc., 1968, p 82-83). In 1904 Nicolas Tesla, started to produce ozonated oil known as Glycozone, many scientific articles were published about its use in wounds. SanoSkin® - OXY is a gentle gel that is able to create a moist wound healing environment. It will facilitate wound debridement and due to the presence of ozonides it will act bacteriostatic (will stop growth of bacteria in wound). To cover the wound SanoSkin® Foam can be used as a secondary dressing. Available as 20 gram tubes. The SanoSkin® -OXY is also an excellent product to treat acne, eczema, and fissures.

Product Code	Description	Contents	Contents over box
OX30	SanoSkin-OXY 30 gram	1 tube à 30 g	12 x1 tube



SanoSkin® Oxy comes in plastic tubes of 30 g

### LOWER LIMBS ULCERS. OZONATED OIL THERAPY STUDY

Performed in: "LOUIS PASTEUR" POLICLINIC & NATIONAL CENTRE FOR SCIENTIFIC RESEARCH. (France, 2000)

#### MATERIALS AND METHODS:

The sample was composed of 120 patients with lower limb ulcers (post traumatic or due to chronic venous insufficiency) of 1 to 4 centimeters diameter, at random distributed among two groups: Ozonated Oil group and Control Group. Ulcers were of recent origin or up to 3 years old, even some were suffered torpid evolution.

#### Treatment:

The treatment for this study was recommended to patients for 30 days at home.

Control group: 60 patients, treated as:

- Venous repose.
- Hyposodic diet.
- Oral analgesics, if needed.
- Cures twice a day as follows:
  - Mechanical cleaning of the area with benzalconium chloride
  - Local application of antibiotics.

The first cure was performed by the physician to instruct the patient and/or the accompanying person how to repeat the subsequent at home.

Ozonated Oil Group: 60 patients, treated with the same procedures but with ozonated oil, instead of antibiotics.

Evaluation Criteria:

Evolution: as to the behaviour of patients signs and symptoms.

Healing: as to the cicatrisation of wounds. After the period of the study, in cases not healed, remission to hospital was considered.

#### RESULTS AND DISCUSSION:

Table I shows distribution of ulcers between groups according to etiology. Most of them were of venous insufficiency origin, as usual, and their distribution was homogeneous. Also homogeneous were the distributions of sex and age between groups.

**TABLE I**

#### **LOWER LIMB ULCERS: PATIENTS DISTRIBUTION ACCORDING TO ETHIOLOGY.**

ETHIOLOGY	OZONE		CONTROL		TOTAL	
	Pats. N°	%	Pats. N°	%	Pats. N°	%
VENOUS INSUFIC.	54	(90)	53	(88)	107	(89)
POST-TRAUMATIC	6	(10)	7	(12)	13	(11)
<u>TOTAL</u>	<u>60</u>	<u>(50)</u>	<u>60</u>	<u>(50)</u>	<u>120</u>	<u>(100)</u>

In Table II, the evolution of signs and symptoms show that better results were achieved with ozonated oil at the end of the first half of the treatment period.

**TABLE II**

## LOWER LIMB ULCERS: SYMPTOMS & SIGNS DISAPPEARANCE

Symptoms Disappnce.	OZONE GROUP				CONTROL GROUP			
	< 15 days		> 15 days		< 15 days		> 15 days	
	Pats.	(%)	Pats.	(%)	Pats.	(%)	Pats.	(%)
Inflammation	57	(95)	3	(5)	7	(12)	53	(88)
Fetidness	60	(100)	-	-	60	(100)	-	-
Pain	58	(97)	2	(3)	38	(63)	22	(37)

Clinically it was observed that fetidness, pain and itching disappeared from the first 24 hours on and inflammation from the third day on in most of this patients. Granulation tissue appeared around the 5<sup>th</sup> day, followed by the initiation of the ulcer diameter reduction.

On the other hand, in control group patients the evolution was significantly slower in all aspects. Inflammation and, in lesser extension, pain remained present in many patients for more than 15 days.

Regarding healing of ulcers, it was very remarkable the fact that most of patients with ozonated oil treatment (95 %) healed within the first 15 days (Table III) and the remaining three patients within the following 5 days. In control group instead, only a few patients healed in the first 15 days. Most of them healed from the day 16 to 20, and 8 patients did not heal up to the end of the 30 days period and had to be submitted for hospital treatment.

**TABLE III**

### LOWER LIMB ULCERS: HEALING PERIODS

HEALING PERIOD	OZONE GROUP		CONTROL GROUP	
	Pats.	%	Pats.	%
≤ 15 days	57/60	(95)	7/60	(12)
16 - 20 days	3/60	(5)	45/60	(75)
21 - 30 days	-	-	-	-
No healing	-	-	8/60	(13)

All differences between groups were statistically significant, in favour of the higher effectivity of ozonated oil.

## **CONCLUSIONS:**

Ozone oil resulted much more effective than conventional treatments for healing of lower limb ulcers of venous or traumatic origin.

Patients symptoms disappeared faster and completely in those treated with ozonated oil, as compared with control group.

Lower limb ulcers in ozonated oil group healed within less than 15 days in 95% of patients, while in control group this was achieved in only 11,6% of patients.





**Case:** Female 73 years with skin tears was treated with SanoSkin®-OXY and was fully healed and closed after 50 days. Wound was covered with SanoSkin Foam and irrigated and cleaned with SanoSkin® Cleanser.