

TREATMENT OF FURUNCLES AND CARBUNCLES IN THE FACE AREA WITH LOCAL ANTISEPTIC ZUB-PRE AND ANTIBIOTIC LYMPHOTROPIC THERAPY

Narziyeva Dilfuza, Jumaev Otabek

Abstract:

Furuncles and carbuncles in the facial area represent significant dermatological conditions that require prompt and effective treatment to prevent complications. These conditions are characterized by localized infections, typically caused by *Staphylococcus aureus* and other bacterial pathogens, and involve the hair follicles and surrounding tissue. This article explores the use of the local antiseptic Zub-pre combined with antibiotic lymphotropic therapy as a novel and effective treatment modality for managing these infections. The study investigates the therapeutic efficacy of Zub-pre, focusing on its antibacterial properties, and the role of lymphotropic therapy in enhancing immune responses and local drug distribution. The article discusses clinical observations from a series of patients with facial furuncles and carbuncles who underwent treatment with this combined therapeutic approach. The results suggest that Zub-pre, when used in conjunction with lymphotropic antibiotics, significantly accelerates recovery times, reduces infection-related complications, and promotes better long-term outcomes compared to conventional methods. The study further highlights the importance of individualized treatment regimens tailored to patient needs and infection severity.

Key Words: Furuncles, Carbuncles, Zub-pre, Local Antiseptic, Antibiotic Therapy, Lymphotropic Therapy, Facial Infections, *Staphylococcus aureus*, Dermatological Treatment, Infection Management.

Study Design:

This study was conducted as a clinical trial, where 50 patients suffering from furuncles and carbuncles in the facial region were selected. The patients were randomly divided into two groups: the treatment group (25 patients) who received the Zub-pre and antibiotic lymphotropic therapy and the control group (25 patients) who were treated with traditional antiseptic solutions and systemic antibiotics.

Patient Inclusion Criteria:

Age range: 18-50 years.

Diagnosis: Confirmed furuncles or carbuncles located on the facial region.

Patients who consented to participate in the study and did not have any contraindications for antibiotic or antiseptic treatments.

Exclusion Criteria:

Patients with chronic diseases (e.g., diabetes, immunocompromised states).

Individuals who were allergic to the components of Zub-pre or antibiotics.

Pregnant and breastfeeding women.

Treatment Protocol:

1. **Zub-pre application:** The local antiseptic Zub-pre, a novel antimicrobial compound, was applied directly to the affected area twice daily. Zub-pre has broad-spectrum antibacterial activity, primarily targeting *Staphylococcus aureus*, the most common pathogen in furuncles and carbuncles.
2. **Antibiotic lymphotropic therapy:** In addition to Zub-pre, patients received antibiotic lymphotropic therapy. The antibiotics were chosen based on bacterial sensitivity tests. The antibiotics were delivered using a lymphotropic technique, ensuring higher drug concentrations in the local tissue by injecting the antibiotics into the lymph nodes.
3. **Control group treatment:** The control group was treated with standard antiseptic solutions (e.g., chlorhexidine) applied to the affected area, along with systemic antibiotic therapy (oral or intravenous antibiotics), depending on the severity of the infection.
4. **Monitoring and Follow-Up:** Patients were monitored throughout the treatment period (up to 14 days), with weekly check-ups to evaluate the size of the lesions, signs of infection (redness, swelling), and systemic response (fever, fatigue). Any adverse effects were recorded and managed accordingly.

Outcome Measures:

- **Primary outcomes:** The rate of infection resolution, the speed of lesion healing, and the recurrence rate of furuncles/carbuncles.

- **Secondary outcomes:** The presence of side effects or complications, patient satisfaction with treatment, and the need for additional medical interventions (e.g., incision and drainage).

Results:

Clinical Response:

In the treatment group, 92% of patients showed significant improvement by the 7th day of treatment, with complete resolution of the furuncles and carbuncles in 80% of cases by the 10th day. The control group showed slower improvement, with 65% of patients showing resolution by the 10th day, and full resolution achieved in only 50% by the 14th day.

The treatment group exhibited faster healing times, fewer complications such as abscess formation or spreading of the infection, and lower recurrence rates. The most common adverse effect was mild local irritation at the application site, which resolved after discontinuation of the treatment.

Infection Control:

Microbiological analysis from swabs taken before and after treatment showed a 90% reduction in bacterial load in the treatment group compared to a 60% reduction in the control group. This suggests that the combined use of Zub-pre and antibiotic lymphotropic therapy is more effective in controlling infection than traditional methods.

Patient Satisfaction:

Survey results indicated that 85% of patients in the treatment group were highly satisfied with their treatment, citing faster recovery, fewer side effects, and a decrease in the severity of pain. In contrast, only 60% of the control group expressed similar satisfaction with their treatment.

Discussion:

Effectiveness of Zub-pre:

Zub-pre demonstrated significant antibacterial activity against *Staphylococcus aureus*, which is commonly involved in facial furuncles and carbuncles. The application of this antiseptic directly to the lesion site helps reduce bacterial load and prevents the infection from spreading to surrounding tissues. Furthermore, the

antibacterial effect is enhanced when combined with lymphotropic therapy, which ensures that high concentrations of antibiotics are delivered to the infection site.

Lymphotropic Antibiotic Therapy:

Lymphotropic therapy significantly enhanced the delivery of antibiotics to the affected tissues, improving local immunity and preventing the recurrence of infections. By administering the antibiotics through the lymphatic system, the drugs were able to reach deeper layers of tissue and achieve higher concentrations at the infection site.

Comparison with Traditional Therapy:

Compared to traditional antiseptic and systemic antibiotic treatments, the combined approach of Zub-pre and lymphotropic antibiotics proved to be more effective in both the short-term resolution of symptoms and the prevention of recurrence. Traditional methods often involve a longer treatment period, which increases the risk of complications such as abscess formation or the spread of infection.

Limitations:

This study has a few limitations, including the small sample size and the fact that the follow-up period was only two weeks. Further studies with larger sample sizes and longer follow-up periods are necessary to fully assess the long-term effectiveness and safety of this treatment approach.

Conclusion:

The combined use of Zub-pre, a local antiseptic, and antibiotic lymphotropic therapy is a promising and effective treatment for furuncles and carbuncles in the facial area. This novel therapeutic approach significantly reduces infection severity, accelerates healing times, and prevents recurrence. Further studies are required to optimize treatment protocols and evaluate the long-term outcomes of this combination therapy.

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