Scholars Journal of Applied Medical Sciences

Abbreviated Key Title: Sch J App Med Sci ISSN 2347-954X (Print) | ISSN 2320-6691 (Online) Journal homepage: <u>https://saspublishers.com</u> **∂** OPEN ACCESS

Medicine

Comments on Efficacy and Safety of Ozenoxacin in the Treatment of Bacterial Skin Diseases in Adult and Paediatric Patients

Dr. Abhijit Trailokya1*

¹Head Medical affairs, Indoco Remedies, Mumbai, India

DOI: <u>10.36347/sjams.2023.v11i11.012</u>

| **Received:** 02.10.2023 | **Accepted:** 04.11.2023 | **Published:** 22.11.2023

*Corresponding author: Dr. Abhijit Trailokya Head Medical affairs, Indoco Remedies, Mumbai, India

Letter to Editor

Copyright © 2023 The Author(s): This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CC BY-NC 4.0) which permits unrestricted use, distribution, and reproduction in any medium for non-commercial use provided the original author and source are credited.

Dear Editor,

I hope this letter finds you well. I am writing to express my concerns regarding a recent article title Efficacy and Safety of Ozenoxacin in the Treatment of Bacterial Skin Diseases in Adult and Paediatric Patients published in Scholars Journal of Applied Medical Sciences dated March 2023 cited as *Nasrin Sultana, Md. Mamunur Rashid Siddique, Rokhsana Khanam, Shanjina Sharmin. Efficacy and Safety of Ozenoxacin in the Treatment of Bacterial Skin Diseases in Adult and Paediatric Patients. Sch J App Med Sci, 2023 Mar 11(3):* 614-619.

While I appreciate the efforts of the authors to contribute to the field, I find it necessary to bring attention to certain aspects of the article that appear to be improperly written and may compromise its accuracy.

Upon thorough examination, it became evident that the article lacked clarity in presenting its methodology and results. The absence of precise details regarding the research design and statistical analysis raises questions about the reliability of the findings. As a reader, it is crucial to have a clear understanding of these aspects to assess the study's validity and relevance.

Title of the article and results ahs no relation. Article was written with very poor english with lots of grammatical errors. References are also not cited properly. Instead of writing Ozenoxacin has a good security and tolerability profile and is not systemically absorbed, it should be written as Ozenoxacin has a good safety and tolerability profile.

Furthermore, there were instances of ambiguous language and terminology that could potentially lead to misinterpretation among readers. In a medical context, precision in communication is paramount to ensure that healthcare professionals and researchers can confidently apply and build upon the knowledge presented.

Approval of ozenoxacin is Ozenoxacin 1% cream (10 mg/g) for impetigo due to Staphylococcus aureus or Streptococcus pyogenes in adult and children aged 2 months and above. Ozenoxacin 1% cream has been approved in Europe (May 2019) for non-bullous impetigo in patients aged 6 months and older.30 The Indian Regulatory Authority [CDSCO/DCGI-April 2021], approved Ozenoxacin bulk and Ozenoxacin cream 1% w/w for impetigo due to staphylococcus aureus or streptococcus pyogenes in adult and children aged 2 months and above.

After going through the study methodology, it is extremely difficult to understand the methodology correctly. what was exactly done. Which kind of patients were observed? Which type of data collected from patients. Which type of patients specially age, gender, co-morbid conditions, diagnosis of dermatological conditions where ozenoxacin where used was missing. No methodology mentioned about sample size calculation.

In result section, Titles given to figures are also confusing. Figure III is misleading, data shown in graphs and text mentioned are not matching. Results doesn't talk about efficacy and safety of ozenoxacin. How many days, how much ozenoxacin applied were missing. No conclusion can be drawn from results.

In Discussion, only survey finding was discussed and had no relationship with ozenoxacin.

Limitation of study: Sample size is small agreed but why sonography of scar is required?

Conclusion part is absolutely misleading, cannot conclude any thing from this study.

Study should be properly plan and executed. Drafting of manuscript with proper, understandable and meaningful english without grammatical errors is required. Critical peer review should be done prior to publication, this will improve credibility of journal.

I strongly urge the editorial team to consider a thorough review of the article, focusing on enhancing the clarity of the methodology, results, and language used throughout. This will not only benefit the credibility of the published work but also contribute to the overall quality of research disseminated through your reputable journal.

I appreciate your attention to this matter and trust that the editorial team will take the necessary steps to address these concerns promptly.

REFERENCE

1. US Food & Drug Administration. Xepi (Ozenoxacin) 1% cream, for topical use. Prescribing Abhijit Trailokya; Sch J App Med Sci, Nov, 2023; 11(11): 1934-1935

- information. Medimetriks Pharmaceuticals Inc. [Accessed on 11th October 2022]; 2017. Available from: https: //www.accessdata.fda.gov/drugsatfda_docs/label/2 017/208945lbl.
- Torrelo, A., Grimalt, R., Masramon, X., Albareda López, N., & Zsolt, I. (2020). Ozenoxacin, a new effective and safe topical treatment for impetigo in children and adolescents. *Dermatology*, 236(3), 199-207.
- List of new drugs approved in the year 2022 till date. [Accessed on 11th October 2022]. Available from: <u>https://cdsco.gov.in/opencms/</u> resources/UploadCDSCOWeb/2018/UploadAppro valNewDrugs/ new%20drugs%20approval%20june2021.
- Santhosh, P., & Thomas, M. H. (2021). Ozenoxacin: A novel topical antibiotic. *Indian Journal of Dermatology, Venereology and Leprology*, 87(1), 131-134.
- Shirsat, A., Shah, B., & Trailokya, A. (2022). Ozenoxacin: A novel topical quinolone. *IP Indian Journal of Clinical and Experimental Dermatology*, 8(4), 211-216.