

Honey and medicinal plants in the management of certain surgical bovine clove affections

Abstract

Owing to the worldwide spread of bacterial antimicrobial resistance, it is of great concern to search for antimicrobial agents of natural origin. Since the antimicrobial activity of honey was widely documented, the study aimed to evaluate its use comparing with certain medicinal plants extracts as surgical dressing of bovine clove affections. Aqueous extracts of *Thymus vulgaris* (*T. vulgaris*), *Matricaria chamomilla* (*M. chamomilla*) and *Origanum vulgare* (*O. vulgare*) were prepared to be used *in vitro* and *in vivo* studies in this work. Clinical aerobic or anaerobic bacterial strains were isolated from some clinical surgical bovine clove affections, and were used to determine the minimal inhibitory concentrations (MICs) of the prepared extracts against these pathogens. The study concluded that all tested aerobic bacterial strains were inhibited with 10 % of all tested extracts, while the anaerobic strains were inhibited with 10 % of *T. vulgaris* and 15 % of both *O. vulgare* and *M. chamomilla* extracts. According to the achieved MICs values, lotions and ointments of the entended medicinal plants were made to be used during the *in vivo* study as follow: 20 lactating dairy cows suffering from different surgical clove affections were classified to equal four groups (A–D) which were managed with surgical dressing and received: honey (A); *T. vulgaris* (B), *M. chamomilla*: (C) and *O. vulgare*: (D) extracts with their MICs. All cows of groups A & B (no = 10) as well as one cow from group (C) showed complete healing by the day 30 while, none of group (D). The study concluded that with the alternative medical trends, application of honey – as it is – in surgical dressing of bovine digital dermatitis or inter digital necrobacillosis is the most effective valuable economic tool among the four materials studied for its superurity and feasibility followed by the use of *T. vulgaris* extract 10% in lotion and ointment preparation.

Keywords: honey, *thymus vulgaris*, *origanum vulgare*, *matricaria chamomilla*, digital dermatitis and interdigital necrobacillosis

Volume 9 Issue 3 - 2017

Ali MA,¹ Saleh AS,¹ Abdul-Hafeez MM,² Koreim AM²

¹Department of surgery, Assiut University, Egypt

²Department of surgery, Assiut University, Egypt

Correspondence: Abdul-Hafeez MM, Animal Health Research Institute, Faculty of veterinary medicine, Department of surgery, Assiut University, Egypt, Email lab.moh_hafeez55@yahoo.com

Received: April 03, 2017 | **Published:** November 20, 2017

Introduction

By the increase worldwide spread of multidrug resistant pathogens rather than the public health hazard of antibiotic residues in bovine milk and meat; searching for antimicrobial agents other than antibiotic becomes an issue of great interest. Moreover; the ability of bacteria to develop biofilm-associated drug resistance have further increased the number of life threatening bacterial infections in humans. Honey has recently received attention as a complementary and alternative treatment in modern medicine,² and there is attention its use as a topical therapeutic agent for wound infection and becomes part of conventional medicine for wound care.³ since; it promotes healing process.⁴ it contains antibacterial compounds against multidrug-resistant bacterial infections.⁵ rather than; prevention biofilm formation; and decrease production of bacterial virulence factors.⁶

Essential oils (EOs) extracted from medicinal plants are considered attractive natural antimicrobial agents. *T. vulgaris* is a medicinal plant which its EO –with the main component thymol– is active against *Salmonella*; *Staphylococcus*.^{7–9} *Streptococcus mutans* and *Lactobacillus* species.¹⁰ *T. vulgaris* essential oils are widely used in food preservation mainly meat industry as its antibacterial agents.¹¹ *M. chamomilla* flower extract contain potential sources of antimicrobial nano molecules and with antimicrobial activities.¹² mainly; against *S. aureus*; *E. coli*.¹³ and *C. albicans*.⁵ and reduces bacterial biofilm accumulation.¹⁴ When; it was used as wound dressing loaded with 15% chamomile extract were remarkably capable to heal (99±0.5%) after 14 days post-treatment periods.¹⁵ *O. vulgare* EO is effective against *Salmonella enterica*; *S. mutans*; molds and yeasts; and mesophilic aerobic bacteria.⁷ *Escherichia*

coli; *Clostridium perfringens*; and *Salmonella*.¹⁶ where carvacrol and thymol are the major components responsible for the antimicrobial effects of *O. vulgare* EO.¹⁷ *O. vulgare* EO has also antifungal activity with minimal fungicidal concentrations 0.05% v/v.¹⁸ The present work aimed to evaluate the use of honey comparing with some medicinal plant extracts in management of certain bovine clove affections.

Materials and methods

Medicinal plant extracts

T. vulgaris leaves; *O. vulgare* leaves and *M. chamomilla* flowers let to be dried in open air. Each dried plant was soaked in freshly boiled distilled water for 24 hours to collect plant aqueous extract.¹⁹ Different concentrations (2.5% · 5% · 10% · 15%) of each herbal extract were prepared to be standard extract concentrations (SE conc.) used during the work either *in vitro* or *in vivo* procedures.

Bacterial strains

From clinical bovine clove affections (sole ulcer; interdigital dermatitis; interdigital necrobacillosis and digital dermatitis); clinical bacterial strains were isolated as follows; the cloves were washed and cleansed to remove mud and manure using sterile distilled water. Gentle curetting of lesion edges with a disinfected curette; then samples were taken aseptically from the affected areas using sterile bacteriological swabs soaked in sterile modified transport broth. Each sample was divided into two brain heart infusion broth tubes. The first portion was incubated aerobically for 24 h to isolate and identify aerobic bacterial contents.²⁰ The second was incubated anaerobically for 48 h. for isolation and identification.²¹

MIC determination

MIC of medicinal plant extracts was done to perform the effective solutions and ointments used during the study. The different obtained SE concentrations were used instead of distilled water to prepare blood agar with 10% of citrated sheep blood.²⁰ and fusobacterium egg yolk agar plates.²¹ The isolated aerobic strains were streaked onto blood agar and incubated at 37 °C for 24 h while the anaerobic isolates were streaked onto fusobacterium egg yolk agar at 37 °C for 48 h.

Preparation of herbal ointments

applicable ointment was achieved by adding the obtained SE conc. as herbal MIC to melted petroleum jelly.¹⁹

Tested animals

20 lactating dairy Holstein cows in a dairy farm at Assiut government aging 4 – 6 years old weighing about 400 – 450 gk. body weight. Cows were suffering lameness with active lesions (digital dermatitis and interdigital necrobacillosis). Animals were maintained under the same management; housing conditions and were fed the same ration. They were randomly divided to four equal groups of 5 cows (group A; B; C and D); where :

- a. was managed with honey as it is.
- b. was managed with MIC lotion and ointment of *T. vulgaris*.
- c. was managed with MIC lotion and ointment *M. chamomilla*.
- d. was managed with MIC lotion and ointment *O. vulgare*.

Cows were managed surgically as: application protocol required to wash and cleansed the lesion with a low-pressure water hose. Group (A) treated by honey; after washing and cleaning the lesion; the honey was applied topically; then protected by means of bandage. For other groups (B; C and D); by using calibrated sprayer bottles for spraying the MIC lotions; then the ointment applied topically and protected by means of bandage. On day (0); prior to any treatment; all cows were evaluated for pain; lameness and lesion dimension scores. All cows were treated once daily for 5 consecutive days; 2 days without management; then treated once daily for other 3 days only up to 14 days. Cows were managed twice weekly for other two weeks. Cows were re-examined on days 14 and 30 for pain; lameness; and lesion scores.²²

Results

In vitro study: extracts of *T. vulgaris* leaves (B); *O. vulgare* leaves (C) and *M. chamomilla* (D) flowers containing their active principles were tested against the isolated bacterial strains with concentrations (2.5% ◊ 5% ◊ 10% ◊ 15%). All tested aerobic bacterial strains were inhibited with MICs values 10 % of all extracts; while anaerobic ones were inhibited with 10 % of *T. vulgaris* and 15 % of both *O. vulgare* and *M. chamomilla* (Table 1). About the *in vivo* work: according to the obtained tested extract MICs; lotion and ointment of *T. vulgaris* were prepared of 10 %; but for *M. chamomilla* and *O. vulgare* were that of 15 % (Table 1). All cows (no = 20) in the four tested groups –before any interference– showed (severe degree of pain and lameness where the lesion dimensions ø were above 2 cm). Table 2 showed all testing score on day 14 & 30; where by the day 30; all managed cows constituted both groups A & B (no = 10) and only one cow belonged to group C showed complete healing with pain and lameness relieved as well as healthy skin (table 2 and fig 1;2;3); while none of group D cured or healed completely (Table 2 & Figure 4).

Table 1 The minimal inhibitory concentration (MIC) of medicinal plant extracts for the isolated micro organisms from clinical cases

Isolated Micro-Organisms	B	C	D
Aerobic			
<i>Staph aureus</i>			
<i>Strept pyogenes</i>	10 %		
<i>Corynebacterium pyogenes</i>			
<i>Fusobacterium necrophorum</i>			
<i>Bacteroides nodosus</i>			
Anaerobic			
<i>Peptostreptococcus anaerobs</i>	10 %	15 %	
<i>Clostridium sp.</i>			

B: *T. vulgaris*; C: *M. chamomilla*; D: *O. vulgare* extracts.

Table 2 Different treatment managements with medicinal plant extracts and surgical curing scores along the full experimental course

Day 30	Day 14	Day 0	No. of Cows in Each Group	Testing Score
D C B A	D C B A	D C B A		
2 1 - -	2 1 - -	5 5 5 5		Severe
3 3 - -	3 4 4 3	- - - -		Mild
- 1 5 5	- 1 2 - - -	- - - -		Pain relieved
3 1 - -	5 - - -	5 5 5 5		Initial wound ø was more than 2.5 cm = 2.5 cm
2 4 - - -	3 4 3 - - - -	- - - -		Final wound ø was (>2.5- 0) cm
- - 5 5	- 2 1 2 - - - -	- - - -	5	Severe
3 - - - -	- - - -	5 5 5 5		Moderate
2 - - -	3 4 4 3 - - - -	- - - -		Mild
- 4 - -	2 1 1 2 - - - -	- - - -		Lameness
- 1 5 5	- - - - - - - -	- - - -		Lameness relieved



Figure 1 Planter aspect of right hind limb showing digital dermatitis of medial claw (arrows) before and after honey treatment.



Figure 2 Dorsal aspect of left fore limb showing interdigital necrobacillosis (arrows) before and after *Thymus vulgaris* extract treatment.

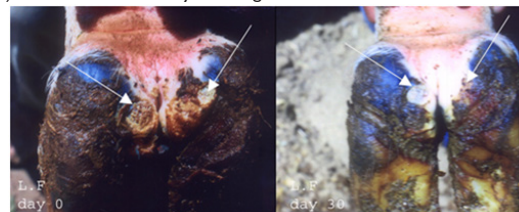


Figure 3 Palmer aspect of left fore limb showing digital dermatitis of medial and lateral claws (arrows) before and after *Matricaria chamomilla* extract treatment.



Figure 4 Planter aspect of right hind limb showing digital dermatitis of lateral claw (arrows) before and after *Origanum vulgare* extract treatment.

Discussion

Honey dressing is increasingly being used for wound infections with great success because of its multiple benefits over conventional therapy. Thus is due to its antibacterial activity⁵ (either by the high osmotic pressure; low pH acidic environment; low protein content; high carbon to nitrogen ratio; other chemical agents phytochemicals.²³ by the direct action of liberated H₂O₂; by the synergistic antioxidant compounds flavonoid and polyphenols.²⁴ or combination of these factors according the floral nectar.²⁴ Moreover; *in vivo* application it was a favorable for its healing promoting effects.²⁵ and its immunomodulating action.^{26,27} especially; honey – with proliferation of both B & T lymphocytes – does not help in the growth of yeast and bacteria.²³ rather than its great economic impact. Honey was tested *in vitro* against aerobic bacteria such as; *S. aureus*,²⁸ MRSA,^{29–31} *E. coli*,³² *S. typhimurium*,³³ *Klebsiella pneumonia*,³⁴ *Ps. Aeruginosa*³⁵ and anaerobic *Porphyromonas gingivalis*.³⁶ Also its antifungal activity against *Candida* sp.³⁷ or *Leptospermum scoparium*.³⁸ is documented.

According to its *in vivo* studies; honey topical application is recommended in difficult surgical wounds such as burns,³⁹ chronic leg wounds,²⁵ venous leg ulcers,⁴⁰ or diabetic foot lesions.⁴¹ Carnwath et al (2014) tested *in vitro* the antimicrobial activity of different honey batches against 10 different bacterial species concluding that it may be effective topical treatment up to 16 concentration. Tramuta et al; (2017) recommended manuka honey or honeydew to form honey based membrane as a topical application for wound dressing in veterinary clinical medicine. So; the study aimed to evaluate its use comparing with certain medicinal plants extracts as surgical dressing of bovine claw affections judging by the clinical parameters (pain testing; lameness and wound contractin dimentions).

In the present study; with the terminal end of the experiment (day 30); both honey and *T. vulgaris* resulted in complete healing process. But honey use was more preferable as cows treated with honey relieved the initial testing scores by the day 14 earlier than those treated with *T. vulgaris*. So; honey is recommended for its superiority as well as its use feasibility since it is used as it is in the dressing instead of lotion and ointment. Honey through different studies has almost equal or slightly superior effects when compared with conventional treatments for acute wounds.³⁴ especially pan- or multidrug-resistant bacterial infections.⁵ Consequently; honey is getting worldwide attention as a topical therapeutic agent for wound infection and potential future candidate for systemic infections.⁴²

Thyme essential oil has a significant bacteriostatic activity against the microorganisms^{9,10} which is more pronounced against the Gram's +ve bacteria.¹² so it is widely used in food preservation mainly meat industry as its antibacterial agents.¹¹ *M. chamomilla* flower extract containing potential sources of antimicrobial nano molecules.⁴³ and reduces biofilm accumulation with 1%.¹⁴ *M. chamomilla* antimicrobial activity is conflicting issue since; good activity was recorded through

wound dressing samples loaded with 15% extract were remarkably capable to heal the wounds up to 99±0.5% after 14 days post-treatment periods.¹⁵ On the other hand; during a study,⁴⁴ the authors examined the antibacterial effect of several medicinal plants E. oils against 3 Gram's +ve and 3 Gram's –ve concluded no bacterial inhibition activity for *M. chamomilla* against all tested bacterial species. Another study stated that among 7 tested medicinal plant E. oils; *M. chamomilla* showed the least antibacterial effect against the tested bacterial sp.⁴⁴ Although; *O. vulgaris* extract exhibit good bactericidal; antibiofilm activity.¹⁷ and rich in small terpenoids and phenolic compounds; which are known to have antimicrobial activities.⁷ rather than another study,¹⁸ estimated their antifungal activity in very low concentrations (less than 0.05 %); it resulted delayed healing and persistence of testing scores (pain; lameness and wide wound) in all cows of group (D) during the present study with the least positive effects to be unfavorable not recommendable treatment.

Conclusion

The study concluded that with the alternative medical trends; application of honey – as it is – in surgical dressing of bovine digital dermatitis or interdigital necrobacillosis is the most effective valuable economic tool among the four materials studied for its superiority and feasibility followed by the use of *T. vulgaris* extract 10% in lotion and ointment preparation.

Acknowledgments

None.

Conflicts of interest

The authors declare that there are no conflicts of interest.

References

- Swamy MK, Akhtar MS, Sinniah UR. Antimicrobial Properties of Plant Essential Oils against Human Pathogens and Their Mode of Action: An Updated Review. *Evid Based Complement Alternat Med*. 2016;3012462.
- Jull AB, Rodgers A, Walker N. Honey as a topical treatment for wounds. *Cochrane Database Syst Rev*. 2015;4:CD005083.
- Mogib El- Dahtory FA, Yahia S. Cytoprotective effect of honey against chromosomal breakage in fanconi anemia patients *in vitro*. *Indian J Hum Genet*. 2011;17(2):77–81.
- Molan PC. The Role of Honey in the Management of Wounds. *J Wound Care*. 1999;8(8):415–418.
- Hussain MB. Role of honey in topical and systemic bacterial infections. *Journal of alternative and complementary medicine*. 2017;9.
- Maddocks SE, Jenkins RE. Honey: A sweet solution to the growing problem of antimicrobial resistance? *Future Microbiol*. 2013;8(11):1419–1429.
- Kwon SJ, Chang Y, Han J. Oregano essential oil-based natural antimicrobial packaging film to inactivate *Salmonella enterica* and yeasts/molds in the atmosphere surrounding cherry tomatoes. *Food Microbiology*. 2017;65:114–121.
- Soković M, Glamočlija J, Marin PD, et al. van Griensven LJ: Antibacterial effects of the essential oils of commonly consumed medicinal herbs using an *in vitro* model. *Molecules*. 2010;15(11):7532–7546.
- Prasanth R, Ravi V, Varsha PV, et al. Review on *Thymus vulgaris* traditional uses and pharmacological properties. *Med Aromat Plants*. 2014;3(4):1–3.
- Tardugno R, Pellati F, Iseppe R, et al. Phytochemical composition and *in vitro* screening of the antimicrobial activity of essential oils on oral pathogenic bacteria. *Nat Prod Res*. 2017;17:1–8.

11. Ballester-Costa C, Sendra E, Fernández-López J, et al. Assessment of Antioxidant and Antibacterial Properties on Meat Homogenates of Essential Oils Obtained from Four *Thymus Species* Achieved from Organic Growth. *Foods*. 2017;6(8):pii: E59.
12. Miraj S, Alesaeidi S. A systematic review study of therapeutic effects of *Matricaria recutita chamomile (chamomile)*. *Electron Physician*. 2016;8(9):3024–3031.
13. Dogru E, Demirbas A, Altinsoy B, et al. Formation of *Matricaria chamomilla* extract-incorporated Ag nanoparticles and size-dependent enhanced antimicrobial property. *J Photochem Photobiol*. 2017;B 174: 78–83.
14. Goes P, Dutra CS, Lisboa MR, et al. Clinical efficacy of a 1% *Matricaria chamomile* L. mouthwash and 0.12% chlorhexidine for gingivitis control in patients undergoing orthodontic treatment with fixed appliances. *J Oral Sci*. 2016;58(4):569–574.
15. Motealleh B, Zahedi P, Rezaeian I, et al. Morphology, drug release, antibacterial, cell proliferation, and histology studies of chamomile-loaded wound dressing mats based on electrospun nanofibrous poly(varepsilon-caprolactone)/polystyrene blends. *J Biomed Mater Res B Appl Biomater*. 2014;102(5):977–87.
16. Du E, Gan L, Li Z, et al. *In vitro* antibacterial activity of thymol and carvacrol and their effects on broiler chickens challenged with *Clostridium perfringens*. *J Anim Sci Biotechnol*. 2015;6:58.
17. Khan ST, Khan M, Ahmad J, et al. Thymol and carvacrol induce autolysis, stress, growth inhibition and reduce the biofilm formation by *Streptococcus mutans*. *AMB Express*. 2017;7(1):49.
18. Brochot A, Guilbot A, Haddioui L, et al. Antibacterial, antifungal, and antiviral effects of three essential oil blends. *Microbiol Open*. 2017;6(4).
19. Chevallier A. The encyclopedia of medicinal plants. (1st edn), DK publishing Inc. London, 1996:pp. 76–295.
20. Quinn PJ, Carter ME, Markey BK, et al. Clinical Veterinary Microbiology. Virginia Tech, Blacksburg, USA 1994.
21. Koneman EW, Allen DS, Jang W M, et al. J Colour Atlas and text book of diagnostic microbiology. 4th (4th edn), J.B. Lippincott Co. Philadelphia, USA 1992.
22. Hernandez J1, Shearer JK, Elliott JB. Comparison of topical application of Oxytetracycline and four nonantibiotic solutions for treatment of papillomatous digital dermatitis in dairy cows. *J Am Vet Med Assoc*. 1999;214(5):688–690.
23. Samarghandian S, Farkhondeh T, Samini F. Honey and Health: A Review of Recent Clinical Research. *Pharmacognosy Res*. 2017;9(2):121–127.
24. Alzahrani HA, Boukraa L, Bellik Y, et al. Evaluation of the antioxidant activity of three varieties of honey from different botanical and geographical origins. *Glob J Health Sci*. 2012;4(6):191–196.
25. Yaghoobi R, Kazerouni A, Kazerouni O. Evidence for Clinical Use of Honey in Wound Healing as an Anti-bacterial, Anti-inflammatory Anti-oxidant and Anti-viral Agent: A Review. *Jundishapur J Nat Pharm Prod*. 2013;8 (3):100–104.
26. Sayed SM, Abou El-Ella GA, Wahba NM, et al. Immune defense of rats immunized with fennel honey, propolis, and bee venom against induced staphylococcal infection. *J Med Food*. 2009;12(3):569–575.
27. Hegazi A, Amr MA, Fyrouz AA. Influence of Honey on Immune Response Against Newcastle Disease Vaccine. *International Journal of Basic and Applied Virology*. 2013;2(1):01–05.
28. Aamer AA, Abdul-Hafeez MM, Sayed SM. Minimum Inhibitory and Bactericidal Concentrations (MIC and MBC) of Honey and Bee Propolis against Multi-Drug Resistant (MDR) *Staphylococcus sp.* Isolated from Bovine Clinical Mastitis. *Alternative & Integrative Medicine Altern Integ Med*. 2014;3:4
29. Almasaudi SB, Al-Nahari AAM, Abd El-Ghany ESM, et al. Antimicrobial effect of different types of honey on *Staphylococcus aureus*. *Saudi J Biol Sci*. 2017;24(6):1255–1261.
30. Rani GN, Budumuru R, Bandaru NR. Antimicrobial Activity of Honey with Special Reference to Methicillin Resistant *Staphylococcus aureus* (MRSA) and Methicillin Sensitive *Staphylococcus aureus* (MSSA). *J Clin Diagn Res*. 2017;11(8):DC05–DC08.
31. Pasupuleti VR, Sammugam L, Ramesh N, et al. Honey, Propolis, and Royal Jelly: A Comprehensive Review of Their Biological Actions and Health Benefits. *Oxid Med Cell Longev*. 2017;1259510.
32. Emineke S, Cooper AJ, Fouch S, et al. Diluted honey inhibits biofilm formation: potential application in urinary catheter management? *J Clin Pathol*. 2017;F 70 (2):140–144.
33. Ekhtelat M, Ravaji K, Parvari M. Effect of Iranian Ziziphus honey on growth of some foodborne pathogens. *J Nat Sci Biol Med*. 2016;7(1):54–57.
34. El-Kased RF, Amer RI, Attia D, et al. Honey-based hydrogel: *In vitro* and comparative *In vivo* evaluation for burn wound healing. *Sci Rep*. 2017;7(1):9692.
35. Prateeksha, Singh BR, Shoeb M, Sharma S, et al. Scaffold of Selenium Nanovectors and Honey Phytochemicals for Inhibition of *Pseudomonas aeruginosa* Quorum Sensing and Biofilm Formation. *Front Cell Infect Microbiol*. 2017;7:93.
36. Eick S, Schäfer G, Kwieciński J, et al. Honey—a potential agent against *Porphyromonas gingivalis*: an *in vitro* study. *BMC Oral Health*. 2014;14:24.
37. Firdose A, Nisar A, Dsouz, MR. Evaluation of *in vitro* antimicrobial activity of Indian honey on burnwound isolates. *Journal of Chemical and Pharmaceutical Research*. 2016;8(3):1027–1034.
38. Adams CJ, Manley-Harris M, Molan PC. The origin of methylglyoxal in New Zealand manuka (*Leptospermum scoparium*) honey. *Carbohydr Res*. 2009;344(8):1050–1053.
39. Shupp JW, Nasabzadeh TJ, Rosenthal DS, et al. A reviews of the local pathophysiologic bases of burn wound progression. *J Burn Care Res*. 2010;31(6):849–873.
40. Gethin G, Cowman S, Kolbach DN. Debridement for venous leg ulcers. *Cochrane Database Syst Rev*. 2015;(9):CD008599.
41. Jull AB, Walker N, Deshpande S. Honey as a topical treatment for wounds. *Cochrane Database Syst Rev*. 2013;2:CD005083.
42. Paramasivan S, Drilling AJ, Jardeleza C, et al. Methylglyoxal-augmented manuka honey as a topical anti-*Staphylococcus aureus* biofilm agent: safety and efficacy in an *in vivo* model. *Int Forum Allergy Rhinol*. 2014;4(3):187–195.
43. Mekonnen A, Yitayew B, Tesema A, et al. *In Vitro* Antimicrobial Activity of Essential Oil of *Thymus schimperii*, *Matricaria chamomilla*, *Eucalyptus globulus*, and *Rosmarinu officinalis*. *Int J Microbiol*. 2016;9545693.
44. Herman A. Comparison of antimicrobial activity of essential oils, plant extracts and methylparaben in cosmetic emulsions: 2 months study. *Indian J Microbiol*. 2014;54(3):361–364.
45. Tramuta C, Nebbia P, Robino P, et al. Antibacterial activities of Manuka and Honeydew honey-based membranes against bacteria that cause wound infections in animals. *Schweiz Arch Tierheilkd*. 2017;159(2):117–121.
46. Carnwath R, Graham EM, Reynolds K, et al. The antimicrobial activity of honey against common equine wound bacterial isolates. *Vet J*. 2014;199(1):110–114.