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## **RESEARCH ARTICLE**

# MICROBIOLOGICAL QUALITY ANALYSIS OF ORAL LIQUID ANTIBIOTICS AND ASSESSMENT OF THE ANTIMICROBIAL EFFICACY

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ARTICLE INFO	ABSTRACT			
Article History: Received 20 <sup>th</sup> July, 2018 Received in revised form 15 <sup>th</sup> August, 2018 Accepted 28 <sup>th</sup> September, 2018 Published online 31 <sup>st</sup> October, 2018	The current study was designed to demonstrate the microbiological quality of oral liquid antibiotics. The <i>in vitro</i> antibacterial potential of the antibiotics was checked. In this regard three samples of oral liquid suspension of Flucoxacillin collected from different drug stores of Dhaka city were tested. All the samples were found to be loaded with total viable bacteria and fungi in the average of $10^4$ cfu/ml and the bacterial and fungal load exceeded United States Pharmacopeia (USP) or British Pharmacopeia (BP) limit ( $\leq 10^2$ cfu/ml for bacteria and 10 cfu/ml for fungi). Pathogenic bacteria were			
<i>Key words:</i> Efficacy of Flucoxacillin, Antibiotic Quality, Oral liquid Suspension Efficacy.	- also encountered among which <i>Pseudomonas</i> spp. was predominant as they found in all samples. <i>Escherichia coli</i> and <i>Staphylococcus</i> spp. were found in majority of the samples. All the samples of antibiotic exhibited substantial killing effect on <i>E. coli</i> , <i>Staphylococcus</i> spp. and fungi. Flucoxacillin samples had effect on them. <i>E. coli</i> , <i>Klebsiella spp., Staphylococcus</i> spp. and fungi. Flucoxacillin had the elevated antimicrobial effect on <i>Staphylococcus</i> spp.			

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# **INTRODUCTION**

Bacterial infections are among the important infectious diseases. Hence, over 5 decades of extensive researches have been launched for achieving new antimicrobial medicines isolated from different sources for combating bacterial infections that once ravaged humankind (Moat et al., 2002, Kamat et al., 2006, Lovine et at., 2008). Different antibiotics exercise their inhibitory activity on different pathogenic organisms. Despite progress in development of antibacterial agents, there are still special needs to find new antibacterial agents due to development of multidrug resistant bacteria (Sayeed *et al.*, 2014). The increasing phenomenon of acquisition of resistance among microorganisms to antimicrobial drugs is attributed to the indiscriminate and

\*Corresponding author: Md. Tanjidul Hasan, Scientific Officer, Universal Medical College and Hospital. improper use of current antimicrobial drugs (Usha et al., 2010). Today, clinically important bacteria are characterized not only by single drug resistance, but also by multiple antibiotic resistance - the legacy of past decades of antimicrobial use and misuse. Drug resistance presents an ever increasing global health threat that involves all major microbial pathogens and antimicrobial drugs. Antibiotics that work today may not work tomorrow. It is essential to investigate newer drugs to which there is lesser resistance (Levy, 2002). Beside the resistance concern, presence of microorganism in oral suspention liquid (syrup) antibiotic preparation is a great public health concern globally (Cundell 2005a, 2005b, Prescott et al., 2005). Contaminations in pharaceutical preparations with microorganisms irrespective of being pathogenic and nonpathogenic can bring about changes in their physical characteristics, breaking of emulsion, fermentation appearance of turbidity or deposit and producing off odors and color changes (Hugo and Russel, 1988, Squadritoa et al, 1998, Cabiscol et al., 2000, Schutterm et al., 2000).

Moreover, paediatric oral liquid drug formulations may introduce pathogenic microorganisms to infants. Further, these pathogenic organisms may be highly detrimental for immunocompromised infants. Therefore, microbiological quality of such oral liquid medicines is a very important factor for the above mentioned patients (Hossain *et al.*, 2009, Sykes *et al.*, 1971). By considering the facts discussed above, the present study was undertaken to investigate the microbiological attributes of commonly available antibiotics Flucoxacillin.

### **MATERIALS AND METHODS**

**Sample Collection and processing:** Liquid suspension of antibiotics such Flucoxacillin of the three different companies (Phylopen –Square, Flux- Opsonin, Revistar- Biopharma) were collected from different drug store of Dhaka City. A total of 250 mg suspension powder of both types of antibiotic were mixed with 10 ml autoclaved distilled water. All the suspensions were then diluted up to  $10^{-2}$  following standard guidelines (Choudhury *et al.* 2015; Cappuccino and Sherman 1996; Acharjee *et al.* 2013; Ahmed *et al.* 2014).

### **Microbiological Analysis**

**Estimation of Total Viable Bacteria and Fungi:** For the enumeration of total viable bacteria (TVB) and the total fungal load, 0.1 ml of each sample from the dilutions  $10^{-1}$  and  $10^{-2}$  was introduced onto the nutrient agar (NA) plate (Hi media laboratories Pvt. Ltd Mumbai, India) and Sabouraud's dextrose agar (SDA) plates (Bhiwadi- 301019, Rajasthan India), respectively, by means of spread plate technique .Plates were incubated at 37 °C for 24 hours and at 25 °C for 48 hours for total viable bacteria and fungi, respectively (Sharmin *et al.*, 2015; Cappuccino and Sherman, 1996; Acharjee *et al.*, 2013; Acharjee *et al.*, 2014; Ahmed *et al.*, 2014).

Estimation of Escherichia coli, Klebsiella spp., Staphylococcus spp. and Pseudomonas spp., Bacillus spp: From the dilutions  $10^{-1}$  and  $10^{-2}$ , 0.1 ml of each sample was spread onto the Mac Conkey agar plate (Hi media laboratories Pvt. Ltd Mumbai, India) for the enumeration of coliforms (especially, Escherichia coli and Klebsiella spp.), respectively. Plates were incubated for 24 hours at 37 °C for coliforms, correspondingly. Likewise, Staphylococcus spp., Pseudomonas spp., Bacillus spp. were isolated onto Mannitol Salt Agar (MSA) plate (Hi media laboratories Pvt. Ltd Mumbai, India) and Pseudomonas agar plate, Starch agar (Hi media laboratories Pvt. Ltd Mumbai, India) respectively by adding 0.1 ml of diluted sample each, and all the plates were then incubated at 37 °C for 24 hours (Sharmin et al., 2015; Cappuccino and Sherman, 1996; Acharjee et al., 2013; Acharjee et al., 2014; Ahmed et al., 2014).

**Biochemical identification of the isolates:** All the isolates were biochemically examined following standard procedures as described earlier (Sharmin *et al.*, 2015; Cappuccino and Sherman, 1996; Acharjee *et al.*, 2013; Acharjee *et al.*, 2014; Ahmed *et al.*, 2014). Biochemical testing was performed for selection specific microorganisms such as Triple Sugar Iron (TSI) Slants (Hi media laboratories Pvt. Ltd Mumbai, India), Methyl-Red (MR), Voges-Proskauer (VP), Motility Indole Urease (MIU) semisolid medium (Hi media laboratories Pvt.

Ltd Mumbai, India), Citrate Utilization Slants (Becton Dickinson and company, France), Catalase test and Oxidase test.

Assay of determining anti-bacterial properties of samples through agar well diffusion method: Agar well diffusion method was performed to determine the antimicrobial activity of the Antibiotic samples (Jagessar et al., 2008). Individual bacterial pathogens (Pseudomonas spp, Klebsiella spp, E.coli, Staphylococcus aureus and Bacillus spp) were spreaded properly over Muller Hinton Agar (Oxoid, Ltd Hampshire England) plates using sterile cotton swabs (Ahmed et al., 2013). Wells were made in MHA by cork borer. Each of the antibiotics were used directly on MHA, separately. Sample solutions were added in wells along with a positive control (Gentamycin disc: 10µg) and a negative control (Normal Saline). The presence of antimicrobial activity was determined by the production of a clear zone around the wells and the diameters of these zone s were then measured. (Hussain et al., 2010).

### **RESULTS AND DISCUSSIONS**

Microbiological quality of antibiotic samples: Many factors can increase microbial contamination during consumption includes improper storage conditions, unhygienic handling of the product, not following aseptic procedures when opening of the bottles and reconstituting. Air, water, reconstituting equipment's, reconstituting personnel and the consumer can be taken as the major sources of microbial contamination of oral liquid drug formulations. There have been an increasing number of reports of infections due to above mentioned reasons (Adeshina et al., 2009). In present study microbial contaminations were evident. All the samples were found to harbor viable bacteria and fungi in average of 10<sup>-4</sup> cfu/ml irrespective of the type of antibiotic tested (Table I). Pseudomonas spp. was predominantly present in all the samples in a range of 10<sup>2</sup> to 10<sup>4</sup> cfu/ml. However E.coli and *Bacillus* spp. were found in six samples in a range of  $10^2$  to  $10^3$ cfu/ml; whereas, Staphylococcus spp. were encountered in five samples. Three samples found to harbor *Klebsiella* spp. (Table II). Presence of pathogenic bacteria was confirmed by biochemical identification test (Table II). According to USP or BP, the finished products of the oral aqueous preparation should not go over the limit  $of10^2$  cfu/ml for total aerobic microbial count and 10 cfu/ml for total yeast mold count. E. *coli* must be absent from both categories of oral preparations (Noor et al., 2015). The microbial load found in our study clearly exceeded the USP or BP recommended microbial limit. Presence of microorganisms in oral liquid was also previously evident in different formulation of oral liquid drugs in Bangladesh (Noor et al., 2015, Khanom et al., 2013, Urmi and Noor, 2014).

Antimicrobial activity of antibiotics: Antimicrobial activities of non-antibiotic drugs have been demonstrated in several Studies previously (Noor *et al.*, 2015, Akon *et al.*, 2015, Quaiyum *et al.*, 2014, Sharmin *et al.*, 2014,Sultana *et al* 2014).Our current study aimed to investigate the antimicrobial effect of locally available oral suspension of antibiotics. All the samples of both Flucoxacillin were effictive in killing of *E. Coli, Staphylococcus* spp., *Klebsiella* spp. and fungi. as large zone of inhibition representing sensitivity was found (Table III). *Bacillus* spp. were found to acquire resistance against all the samples of Flucoxacillin.

#### Table 1. Microbial proliferation in Flucoxicillin

Antibiotic	biotic Micobial load (cfu/ml)							
	TVB	TFC	E. coli	Klebsiella spp.	*Bacillus spp.	Pseudomonas spp.	Staphylococcus spp.	
Flucoxacillin								
1	$4.5 \times 10^{4}$	$8.0 \times 10^{3}$	$2.3 \times 10^{3}$	2.3×10 <sup>3</sup>	0	$2.1 \times 10^{3}$	0	
2	$1.3 \times 10^{4}$	$7.5 \times 10^{3}$	$1.2 \times 10^{3}$	0	$1.8 \times 10^{2}$	$1.7 \times 10^{3}$	$3.0 \times 10^{3}$	
3	$1.6 \times 10^{4}$	6.0×10 <sup>3</sup>	9.0×10 <sup>3</sup>	9.0×10 <sup>3</sup>	$1.2 \times 10^{2}$	$1.1 \times 10^4$	$2.5 \times 10^{3}$	

TVB= Total viable bacteria; TFC= Total fungal count The experiments were in triplicates. Average count (cfu/ml or g) from all samples have been shown here.

\*Bacterial load after enrichment (Prior to enrichment, the recovery was nil).

Vibrio spp. and Shigella spp. were absent in all samples.

USP or BP microbial limit: TVMC  $\leq 10^2$  cfu/ml; not more than 10 cfu/ml TYMC; *E. coli* should be absent.

#### Table 2. Biochemical identification of pathogenic isolates

Organisms		TS	[		Motility	Indole	MR	VP	Citrate	Catalase	Oxidase
	Slant	Butt	Gas	$H_2S$							
E.coli	Y	Y	+		+	+	+	_	+	+	
Klebseilla spp.	Y	Y	+	_	+	+	+	_	+	+	_
Staphylococcus spp.	Y	R		_			+	+	_	+	_
Pseudomonas spp.	R	R	_	—	_	_			-	+	+
Bacillus spp.	Y	R	_	_	+	_	_	+	+	+	_

Table 3. Antimicrobial activit	v of antibiotics against	laboratory microbial isolates
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Antibiotic		Zone of inhibition (mm) against test bacteriaand fungus							
	E. coli	Fungi	Klebsiella spp.	Bacillusspp.	Pseudomonas spp.	Staphylococcus spp.			
Flucoxacillin									
1	40mm	19 mm	23mm	0mm	8mm	43mm			
	(S)	(S)	(S)	(S)	(R)	(S)			
2	42mm	20 mm	21mm	0 mm	0mm	40mm			
	(S)	(S)	(S)	(S)	(R)	(S)			
3	38mm	24mm	18mm	0 mm	0mm	42mm			
	(S)	(S)	(S)	(S)	(R)	(S)			

### Conclusion

All the oral liquid antibiotic samples contained a significantly higher number of microorganisms including the pathogenic ones. The microbial load exceeded the USP or BP recommended microbial limit to an extent which accounts for high public health concern. Thus, the local pharmaceutical industries need to be more careful and attentive about following the safety rules and standard regulations in all stages of manufacturing, packaging and distribution of the products. The local stores should maintain the appropriate conditions for the storage of the pharmaceutical products. Presence of some resistant pathogenic isolates against the tested antibiotics was also of a major concern.

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