## Available online at <u>www.scholarsresearchlibrary.com</u>



# Scholars Research Library

Annals of Biological Research, 2011, 2 (6):536-541 (http://scholarsresearchlibrary.com/archive.html)



# Contamination rate of Iranian Traditional Kuzehei cheese to Coagulase Positive Staphylococcus aureus by Culture and PCR Method

Mansoor Khakpoor<sup>1</sup> and Saeid Safarmashaei<sup>2</sup>

<sup>1</sup>Department of Pathobiology, Tabriz branch, Islamic Azad University, Tabriz, Iran <sup>2</sup>Young Researchers Club, Tabriz branch, Islamic Azad University, Tabriz, Iran

# ABSTRACT

Cheese has an outstanding nutritional quality, but is also an efficient vehicle for transmission of diseases to humans and is an excellent medium for bacterial growth and an important source of bacterial infection when consumed without pasteurization. S. aureus is an important pathogen due to a combination of toxin-mediated virulence, invasiveness, and antibiotic resistance. Milk products are a good substrate for S. aureus growth and enterotoxin production. The aim of this study was to determination of Contamination rate of Iranian Traditional Kuzehei cheese to Staphylococcus aureus by Culture and PCR Method in Tabriz city. A total of 100 cheese samples were collected and collected samples were cultured on selective media and identification of the isolated colonies identified by PCR method. In this study 10% of Iranian Traditional Kuzehei cheeses contaminated to Coagulase Positive Staphylococcus aureus were detected. It can be concluded that raw milk is contaminated by this pathogen in this area as well as in other countries and might constitute a risk for S. aureus enterotoxin food poisoning.

Key words: Iranian Traditional Kuzehei cheese, Coagulase Positive Staphylococcus aureus, Culture, PCR.

## **INTRODUCTION**

Kuzehei cheese is widely produced in North-west of Iran. Traditionally, they were manufactured as artisanal cheeses, and nowadays they are manufactured on an industrial scale, and rigorous control of the production and maturation processes is essential. It is evident that the rate of survival and/or growth of pathogenic bacteria in cheeses depend on the ecological conditions (Aw (water activity), pH, salt content, temperature of maturation) within the cheese and/or brine. The quality of the raw milk, heat treatment of the milk, activity of the starter culture and the salting process—together with the storage in brine—

Scholars Research Library

are the most important control points for the prevention of growth/survival of undesirable micro-organisms during the manufacture of white-brined cheeses [1]. Kuzehei cheese is a firm pickled cheese with its origins in Cyprus where it is made from sheep or goat milk or admixture of both. It can also be made from cow milk. Starter is not used. The cheese may be eaten fresh or after storage in a cool store. If it is stored at below 12oC it will keep for several months. After salting the cheese pieces may also be stored in plastic bags without brining; if stored at about 10oC the cheese has a shelf-life of two to three months. About one kilogram of cheese will be obtained from five liters of milk. Stages for produce of this cheese is contain of: Heat fresh milk to 35oC and add salt to give a 7-10% salt solution in the milk. Add rennet or rennet extract to obtain a firm coagulum in four to six hours. Transfers the coagulum to wooden moulds lined with muslin and allows the whey to drain overnight. Cut the curd into 10 cm cubes. Put the cubes into tins or other suitable airtight containers. Fill the tin or container with whey and seal. Cheese making evolved centuries ago as a means of concentrating raw milk via acid precipitation of milk. Fermentation of the milk sugars would cause the acidified milk to curdle and the swaying motion would break up the curd and provide solid curd and drinkable whey. The curds would be removed, drained and lightly salted to provide a tasty and nourishing high protein food [2].Food poisonings are due to many factors. Bacteria are major causative agents of food borne diseases. Staphylococcus aureus is one of the main pathogen involved in food poisonings related to dairy products [3]. Staphylococcal food poisonings are occurred by staphylococcal enterotoxins produced by S. aureus strains contaminating foodstuffs. S.aureus 0.5–1.59m in diameter are spherical Gram positive, non motile, non-spore forming facultative anaerobes which ferment most of the sugars except raffinose and salicin producing lactic acid during fermentation. They are catalase and coagulase positive and flourish between a pH of 7.4–7.6. They exist in air, dust water, sewage, meat and meat products, poultry and egg products, salad such as tuna, chicken, potato and macaroni, bakery products such as cream filled pastries, cream pies, chocolates éclairs, and sandwich fillings and in milk and milk products [4]. Pathogenesis of S.aureus is due to repertoire toxins, exoenzyme adhesions and immune modulating protein that it produces. 20-30% of healthy people may carry this bacterium on their skin surface and nasal passage. It causes a variety of superlative infections by producing leukocidin, a toxin that destroys the white blood cells and leads to the formation of pus and toxinosis in humans .The presence of S.aureus in food causes food poisoning by releasing enterotoxins into the food and it can also cause Toxic Shock Syndrome by release of super antigens into the blood stream [3-6]. The major observations is the wet poor hygienic practices in the farm and during marketing which contributes a lot to the quality of raw milk before it reaches the consumers. Accordingly it was expected that milk would have a moderate to poor hygienic quality [11]. In Tabriz milk is produced mostly in non-organized way and usually it is being supplied to the consumers from the urban and rural areas by milk vendors or from the groceries. The distribution of milk to the consumers is completely in poor hygienic conditions. On the other hand, milk is an excellent media for growth of a wide variety of bacteria [10]. One of the requirements of production of the high quality milk is maintaining the bacteria count level of microorganisms in a product and to study the hygienic and sanitary conditions, under which milk was produced, handled, transported and processed [7]. Polymerase chain reaction (PCR)-based analytical methods for ascertaining the occurrence of pathogenic or toxigenic microorganisms in food are widely recognized as capable of decreasing detection time and increasing the specificity and sensitivity. Currently these advantages are gained after pre-enrichment steps when important pathogens are to be found, because of unsatisfactory detection levels. Staphylococcus aureus is a food borne pathogen responsible for an intoxication resulting from the ingestion of food containing preformed heat-stable enterotoxins, usually produced by this microorganism and representing a sanitary risk when levels of specific bacterial counts at least as high as 105 CFU g)1 or ml of sample are detected. Staphylococcus aureus is a ubiquitous bacterium, both human and animal commensal [6]. Consequently, many foods can be contaminated by this species thus representing hazard for human health. PCR has been often experimented in milk and cheeses for the direct detection of Staphylococcus aureus [8, 9, 10]. The PCR-based detection of pathogens is made more difficult when raw material with high level of background microflora or complex food matrices are considered .Often, when speciesspecific sequences from rRNA genes are chosen as target, falsepositive results may occur because of parallel amplification of target genes from closely related species .It is well known that different substances such as calcium ions, plasmin and proteins can inhibit amplification. The efficiency of the approach can be also dependent on the specific nucleic acid targeted. Moreover, with particular regard to Staph. aureus, not only the presence of the pathogen but also of the genes encoding for SEs production is important to evaluate as enterotoxins nonproducing strains may also occur [6,8,9,10]. The aim of this study was to determination of Contamination rate of Kuzehei cheese to Staphylococcus aureus by Culture and PCR Method in Tabriz city (center of East Azerbaijan province).

### MATERIALS AND METHODS

A total of 100 Kuzehei cheese samples were collected and samples were collected aseptically from market agents and transported on ice to the laboratory of microbiology in veterinary faculty of Tabriz branch Islamic Azad University for analysis. The collected Kuzehei cheese samples were cultured on selective media and identification of the suspected colonies were carried out according to [13, 14, 15, 16]. For coagulase positive bacteria, after extraction of DNA, PCR analysis, based on nuc gene, was done using the following primers [11-14].

Primer 1:5'-GCG ATT GAT GGT GAT ACG GTT-3',Primer 2:5'-AGC CAA GCC TTG ACG AAC TAA AGC-3'

After extraction of DNA, we added the PCR materials to micro tubes and by using the PCR program below, we ran the test in 35 cycles [13, 14, 15, 16].

### PCR materials:

Template DNA dNTPs Enzyme (Taq DNA polymerase) Buffer (10X) MgCl<sub>2</sub> Primer D.W.

2 μl 1μl (10 mM) 1 μl (5U/μl) 6 μl 2.5 μl (50 mM) 1 μl 36.5 μl

#### Mansoor Khakpoor et al

### PCR program:

95°C	10 min (initial denaturation)
94°C	1min (denaturation)
55°C	30s (annealing)
72°C	1.5min (extension)
Go to 2	37 cycles
72°C	5 min (final extension)

At last PCR products were separated based on their sizes, using gel electrophoresis method. In this method agarose 1.5%, with voltage of 85-100, was used [13, 14, 15, 16].

### **RESULTS AND DISSCUSION**

The results of culture method in this research displayed that 10% of the examined Kuzehei cheese samples were contaminated to coagulase positive *S. aureus*; also results belong to PCR method demonstrated that all of these contaminated Kuzehei cheese samples were infected to coagulase positive *S. aureus*. PCR results showed that 10% of samples were contaminated *to S. aureus* (Fig. 1).

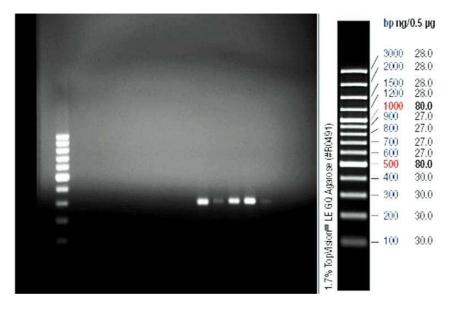


Figure 1: 270bp PCR products

Staphylococcus aureus is one of the most common agents in bacterial food poisoning outbreaks. It is also a major causative pathogen of clinical or subclinical mastitis of dairy domestic ruminants. Poultry, meat and egg products as well as milk and milk products have been reported as common foods that may cause staphylococcal food poisoning [17]. Foods of animal origin, especially milk and dairy products, are associated with food borne disease [18]. Staphylococcus aureus is one of the commonest a etiological agents of bacterial diseases worldwide due to its ability to produce a broad range of exotoxins and other virulence factors. Among them, the staphylococcal enterotoxins produced by some S. aureus strains are the main causal agents of one of the most widespread food borne intoxications, the staphylococcal food poisoning and,

Scholars Research Library

together with toxic shock syndrome toxin-1, are responsible for toxic shock syndrome, and staphylococcal scarlet fever [11, 12]. Contamination of dairy products with S. aureus may be due to the presence of this pathogen in the basic raw material milk. This is very important, especially in countries producing large amounts of milk products such as cheese. In Palestine, cheese is mostly prepared from unpasteurized cows and sheeps milk and therefore can contribute to the sources of staphylococcal food poisoning. To our knowledge, this is the first survey to estimate the prevalence of enterotoxigenic S. aureus from raw milk used for human consumption in Palestine. It can be concluded that raw milk is contaminated by this pathogen in this area as well as in other countries and might constitute a risk for S. aureus enterotoxin food poisoning [19]. This result was consistent with previous reports from Japan, Poland and Slovakia, where 64% to 85% of the enterotoxigenic S. aureus isolates recovered from raw poultry meat or different food samples and food manufacturers harbored the toxin gene [20, 21, 22]. In conclusion, dairy animals with subclinical S. aureus mastitis may shed large numbers of S. aureus organisms into the milk. However, contamination of raw milk and raw milk products from human handling or from the environment during manufacture also is possible. These contaminations may cause important public health risks. Therefore, greater attention should be given to bacteriological standards for the milk that is used in cheese and ice cream production [23]. When scaling up food production from household level to industrial level, general hygienic practices need to be integrated into the process. Teaching and training programs, for those working at the dairies, can possibly improve the situation. Researches on quality of cottage cheeses indicate considerable percentage of studied samples of cottage cheeses in terms of its microbiological contamination [24, 25]. Studies of Waliszewska and co indicated that it is common to observe contamination of cottage cheeses with pathogenic staphylococcus [26]. Moreover researches carried out in years 1997-2003 by Steinka and co. also confirmed low microbiological quality of these cheeses [27]. Studies on supplementing sheep's milk cheese with herbs showed that this kind of supplementation does not affect important physicochemical properties whereas organoleptic test of the herbs supplemented cheese was satisfying [24-27]. Therefore if these foods are contaminated with S.aureus, they mean a serious health problem.

### Acknowledgment

We acknowledge the vice chancellor in research affairs of Tabriz Islamic Azad University for funding of our research and from the microbiology laboratory of veterinary faculty of Tabriz Islamic Azad University for their helps.

### REFERENCES

[1] Bintsis, T., and P., Papademas, International Journal of Dairy Technology, 55,113-120.

[2] Pesicmikulec T., L., Jovanovicm, applied ecology and environmental research, 4(1): 129-134.

[3] Soomro A.H., Arain M.A., Khaskheli M., Bhutto B. 2003. Online Journal of Biological Sciences, 3, 1: 91–94.

[4] Baird-Parker A. 1962. Journal of applied bacteriology, 25: 12–19.

[5] Presscott L.M., Harley J.P., Klein D.A. **2002**. Text book of Microbiology. Brown Publishers. 5th ed.: 441–442.

[6] D. Ercolini, G. Blaiotta, V. Fusco and S. Coppola, 2004. *Journal of Applied Microbiology*, 96, 1090–1096.

[7] AdilM. A. Salman1 and Hind A. Elnasri, **2011**. *Journal of Cell and Animal Biology*, 5 (10):223-230.

[8] Ramesh, A., Padmapriya, B.P., Chandrashekar, A. and Varadaraj, M.C. (2002) *Molecular and Cellular Probes* 16, 307–314.

[9] Tamarapu, S., McKillip, J.L. and Drake, M. (**2001**) *Journal of Food Protection* 64, 664–668. [10] D. Ercolini, G. Blaiotta, V. Fusco and S. Coppola, **2004**. *Journal of Applied Microbiology*, 96, 1090–1096.

[11] Balaban, N., Rasooly, A., **2000**. *International Journal of Food Microbiology* 61, 1–10.

[12] Holtfreter, S., Bauer, K., Thomas, D., Feig, C., Lorenz, V., Roschack, K., Friebe, E., Selleng, K., Lovenich, S., Greve, T., Greinacher, A., Panzig, B., Engelmann, S., Lina, G., Broker, B.M., **2004**. *Infection and Immunity* 72, 4061–4071.

[13] Krystyna, K., 2003. Bull.vet.inst., 47; pp:183-190.

[14] Lovseth, A., S. Loncarevic and K.G. Berdal, 2004. J. Clin. Microbiol. 42, pp:3869–3872.

[15] Stepan, J., R. Pantucek and J. Doskar, 2004. Folia Microbiol. (Praha) 49, pp:353–386.

[16] Brakstad O.G., K. Aasbakk and J.A. Macland, **1992** J. Clin. Microbiol., 30, pp:1654-1660.

[17] Le Loir Y, Baron F, Guatier M. Genet Mol Res. 2: 63-76, 2003.

[18] Asao, T., Kumeda, Y., Kawai, T., Shibata, T., Oda, H., Haruki, K., Nakazawa, H., Kozaki, S., **2003**. *Epidemiol. Infect.* 130, 33–40.

[19] Ghaleb Adwan, Bassam Abu-Shanab, Kamel Adwan. Staph, 2005. Turk J Biol, 29, 229-232.

[20] Kitai S, Shimizu A, Kawano J , 2005. J Vet Med Sci 67: 269-74.

[21] Bystron J, Molenda J, Bania J, 2005. Pol J Vet Sci 8: 37-40.

[22] Holeckova B, Holoda E, Fotta E, 2002. Ann Agric Environl Med 9: 179-182.

[23] Fulya Tasci1, Fatma Sahindokuyucu and Dilek Ozturk, .2011. African Journal of Agricultural Research. 6: 937-942.

[24] Kornacki K., Kłębukowska L., Pruszyńska M., Pol. J. Natural Sci., 2002, 2, 115-122.

[25] Szponar L., Traczyk I., The State of Food Safety in Poland, Żywn. Żyw. Prawo a Zdr., **2000**, 3, 282-294.

[26] Waliszewska D., Sawicka-Wrzosek K., Maciak T., Przegl. Mlecz., 1998, 12, 393-394.

[27] Steinka I., Walczak I., Brom. Chem. Toksykol. – Suplement, 2005, 377-381.