

# THE SUSCEPTIBILITY PATTERN AND EFFICACY OF COMMERCIALLY AVAILABLE DISINFECTANTS TO STAPHYLOCOCCUS AUREUS ISOLATED FROM BUTCHERS TABLE IN ABAKALIKI MEAT MARKET

<sup>1</sup>Agumah N. B., <sup>2</sup>Nwakaeze E. A., <sup>3</sup>Nwadiogbu I., <sup>4</sup> Mbamalu C. J., <sup>5</sup>Ebiega-Oselebe I. N., <sup>6</sup>Iyidiobi T. C. <sup>7</sup>Okonkwo E. C. <sup>8</sup> Ugbo E. <sup>1.2,3,7,8</sup> Department of Applied Microbiology, Ebonyi State University. Abakaliki- Nigeria <sup>4,6</sup> Federal Teaching hospital Abakaliki. Nigeria <sup>5</sup> Department of Epidemiology and Medical statistics, University of Ibadan Nigeria

### Abstract

This study investigated the susceptibility pattern and efficacy of commercially available disinfectants to Staphylococcus aureus isolated from butchers table in Abakaliki meat market. Butchers' tables were swabbed using appropriately labelled sterile cotton swab sticks. The labelled swab sticks were transported to the laboratory for immediate microbiological analysis. The susceptibility pattern of Staphylococcus aureus was determined using the modified Kirby-Bauer susceptibility test method using Dettol, Purit, Isol, and Savlon for which the percentage susceptibility at 25% and 50% concentrations were 78.6% (22), 78.6%(22), 96.4% (27), 82.1%(23) and 89.3%(25), 89.3%(25), 92.9%(26), and 78.6%(22) respectively. This indicates the occurrence of antimicrobial resistant strains of food borne Staphylococcus aureus. Effective cleaning and a safe level disinfection of butchers environment (implements, wooden slabs, and tables) as a means of safe guarding consumers' health is strongly recommended.

Keyword: Susceptibility, Pattern, Efficacy, Disinfectants and Staphylococcus aureus

### Background to the Study

Food-borne pathogens are the leading cause of illness and death in developing countries resulting in the loss of labor force which could have contributed in the economic growth (Fratamico *et al*; 2005). *Staphylococcus aureus* are Gram positive facultative anaerobic spherical bacteria that produces a very heat stable toxin. The bacteria are borne by humans as part of body normal flora of the skin, nasal nares which are transported to food. The bacteria grow best at our body temperature and also at room temperature. *Staphylococcus aureus* can multiply rapidly in food held at room temperature and the toxin can be produced by the microorganism growing in the food. This toxin is called enterotoxin because it causes gastroenteritis or inflammation of the lining of the

http://internationalpolicybrief.org/journals/edu-and-science-journal-vol5-no2 ISSN PRINT: 2315-8425, ONLINE 2354-1660

intestinal tract. (Centre for Disease Prevention and Control, 2013). Contaminated raw meat is one of the main sources of food-borne illnesses (Bhandare *et al;* 2007). The risk of the transmission of zoonotic infections is also associated with contaminated meat (Hedberg *et al;* 1992). International Food Management Agencies, especially the World Health Organizations (WHO), the Food and Agriculture Organization (FAO) and the International Hazard Analysis Critical Control Point Alliance (HACCP) have already provided guidelines to member countries about safe handling procedures such as HACCP and Good Manufacturing Practices (GMPs).

The widespread habit of raw beef consumption is a potential cause if food-borne illnesses besides the common factors such as over-crowding, poverty inadequate sanitary condition and poor general hygiene (Siddiqui *et al;* 2006). Ikeme (1990) noted that sources of surface fresh meat contamination could be from polluted air in the environment, unsterile knives, equipments and utensils, clothing and hands of personnel. Antibiotic resistance levels are also elevated among food-borne pathogens as in *staphylococcus* (Mache, 2002). Although, it is difficult to prove a direct role of drug resistance in bacteria contaminating food items with increased clinical cases of resistant infections, the presence of such bacteria in food items could play a role in the spread of antimicrobial resistance amongst food-borne pathogens (Farzana *et al;* 2009). Lack of awareness about food safety and hygiene among butchers results in food contamination, the butchers or personnel can be carriers of this pathogen who eventually transfer these food-borne pathogen to consumers (Toit *et al;* 2005).

# Objective of the Study

The objective of this study is to investigate the susceptibility pattern and efficacy of commercially available disinfectants to *Staphylococcus aureus* isolated from butchers table in Abakaliki meat market. Butchers' tables were swabbed using appropriately labelled sterile cotton swab sticks.

# Materials and Method

Study Area/Setting: The samples for study were obtained from meat market butchers tables. Meat market is located along gunning road intersecting Abakpa main market in Abakaliki metropolis. Meat market slaughterhouse is the largest of its kind in Abakaliki city. Abakaliki coordinates 6°20′N 8°06′E/6.333°N 8.100°E with a total population of one hundred and forty one thousand four hundred and thirty eight (141,438) people as at 2006 population census. The propensity of food-borne pathogen contamination is high owing to the overcrowded nature of the market, as well as unchecked and bad drainage system in the market.

Sample Collection: Twenty-eight swab samples were collected at random from the butchers table using sterile swab sticks. The samples were sent to the microbiology laboratory immediately for analysis.

Bacteriological Analysis: All the samples were aseptically cultured on bacteriological culture media including nutrient agar, mannitol salt agar, and nutrient broth and the plates were incubated at 37°C for 18-24 hrs. Each of the samples was first inoculated in nutrient broth overnight at 37°C prior to subculture onto solid culture media plates as aforementioned. Suspect colonies were subcultured onto fresh culture plates to get pure cultures (Cheesbrough, 2006).

Morphological Characterization: The morphological characteristics of colonies of the pure culture growing on the media were examined as described by (Clement *et al*; 2002) with reference to their sizes, pattern of edge and margin, surface texture, elevation, consistency and colour.

Antimicrobial Susceptibility Test: Antimicrobial susceptibility test of S. aureus was performed on Mueller Hinton agar (oxoid, England) using antimicrobial disinfectants diluted at 50% and 25% concentration. The disinfectants used were Dettol, Savlon, Purit, Isõl diluted at 50% concentration and 25% concentration respectively. The resistance and susceptibility patterns of S. aureus were determined by the modified Kirby-Bauer susceptibility test method as recommended by the NCCLS (now CLSI). Morphologically identical 4-6 bacterial colonies from an overnight culture were suspended in 5ml nutrient broth and incubated for 4 hours at 37C. Turbidity of the broth culture was equilibrated to match 0.5McFarland standards. The surface of Mueller Hinton agar (oxoid, England) plate was evenly inoculated with the cultures using a sterile cotton swab stick. After this, four (4) holes were pierced through the surface of the Mueller-Hinton agar media designated "S", "P", "I", and "D", denoting savlon, purit, Isol and Dettol respectively using a sterile cork borer. A drop of these antimicrobial disinfectants was placed in each of these holes using a Pasteur pipette. After 18-24 hours of incubation, the diameter of growth inhibition was measured and interpreted as sensitive or resistant by the NCCLS (NCCLS, 1999).

## Result

The result of this research work which was carried out using twenty-eight swab samples collected from twenty-eight different butchers table at meat market in Abakaliki metropolis following routine bacteriological analytical procedure and biochemical characterization are tabulated as:

Table 1: Diameter of Inhibition (Mm) Reading at 50% Concentration of Disinfectants

Sample (S/No	) D	P	I	S
1. 1.	30mm	28mm	27mm	30mm
2. 2.	27mm	32mm	40mm	22mm
3.	31mm	28mm	25mm	28mm
4.	27mm	27mm	29mm	38mm
5.	27mm	20mm	30mm	20mm
6.	33mm	30mm	25mm	40mm
7.	R	25mm	24mm	R
8.	28mm	25mm	26mm	28mm
9.	25mm	30mm	20mm	R
10.	20mm	24mm	28mm	27mm
11.	28mm	29mm	36mm	30mm
12.	27mm	25mm	30mm	20mm
13.	30mm	31mm	35mm	33mm
14.	25mm	R	25mm	R
15.	20mm	28mm	24mm	R
16.	20mm	30mm	35mm	20mm
17.				
18.	30mm	29mm	32mm	30mm
19.	30mm	38mm	25mm	25mm
20.	30mm	33mm	29mm	R
21.	30 mm	34mm	30mm	32mm
22.	R	20mm	25mm	20mm
23.	32mm	30mm	32mm	32mm
24.	30mm	30mm	35mm	30mm
25.	25 mm	20mm	27mm	30mm
26.	28mm	20mm	27mm	20mm
27.	R	R	R	20mm
28.	25mm	R	R	R
29.	28mm	20mm	32mm	20mm
Key: D=	Dettol, P=Purit,	I=Isol, S=Savlon	, R=Resistance	

Table 2: Diameter of Inhibition (Mm) At 25% Concentration of Disinfectants

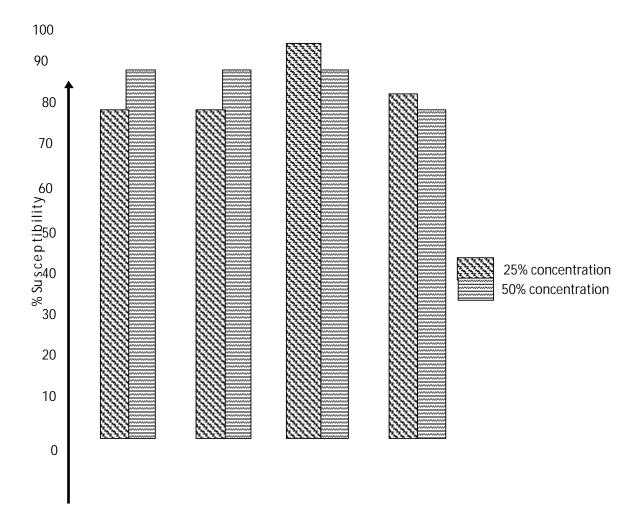
(S/No)         1.       25mm         2.       24mm         3.       28mm         4.       32mm         5.       28mm         6.       30mm         7.       32mm         8.       R         9.       34mm         10.       36mm         11.       20mm         12.       R         13.       22mm         14.       R         15.       25mm         16.       22mm         17.       22mm         20.       22mm         20.       22mm         21.       26 mm         22.       20mm         23.       20mm         24.       30mm         25.       26 mn	29mm 20mm 20mm 26mm 21mm 26mm 27mm 24mm 32mm 24mm	32mm 32mm 30mm 32mm 35mm 32mm 24mm 32mm 32mm	25mm 24mm 23mm 30mm 25mm 30mm 28mm 28mm
2.       24mm         3.       28mm         4.       32mm         5.       28mm         6.       30mm         7.       32mm         8.       R         9.       34mm         10.       36mm         11.       20mm         12.       R         13.       22mm         14.       R         15.       25mm         16.       17.       22mm         18.       26mm         19.       28mm         20.       22mm         21.       26 mm         22.       20mm         23.       20mm         24.       30mm         25.       26 mm	20mm 20mm 26mm 21mm 26mm 27mm 24mm 32mm 24mm	32mm 30mm 32mm 35mm 32mm 24mm 32mm	24mm 23mm 30mm 25mm 30mm 28mm
3. 28mm 4. 32mm 5. 28mm 6. 30mm 7. 32mm 8. R 9. 34mm 10. 36mm 11. 20mm 12. R 13. 22mm 14. R 15. 25mm  16. 17. 22mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	20mm 26mm 21mm 26mm 27mm 24mm 32mm 24mm	30mm 32mm 35mm 32mm 24mm 32mm	23mm 30mm 25mm 30mm 28mm
4. 32mm 5. 28mm 6. 30mm 7. 32mm 8. R 9. 34mm 10. 36mm 11. 20mm 12. R 13. 22mm 14. R 15. 25mm  16. 17. 22mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	26mm 21mm 26mm 27mm 24mm 32mm 24mm	32mm 35mm 32mm 24mm 32mm	30mm 25mm 30mm 28mm
5. 28mm 6. 30mm 7. 32mm 8. R 9. 34mm 10. 36mm 11. 20mm 12. R 13. 22mm 14. R 15. 25mm  16. 17. 22mm 18. 26mm 19. 28mm 20. 22mm 21. 26 mn 22. 20mm 23. 20mm 24. 30mm 25. 26 mn	21mm 26mm 27mm 24mm 32mm 24mm	35mm 32mm 24mm 32mm	25mm 30mm 28mm
6. 30mm 7. 32mm 8. R 9. 34mm 10. 36mm 11. 20mm 12. R 13. 22mm 14. R 15. 25mm  16. 22mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	26mm 27mm 24mm 32mm 24mm	32mm 24mm 32mm	30mm 28mm
7. 32 mm 8. R 9. 34 mm 10. 36 mm 11. 20 mm 12. R 13. 22 mm 14. R 15. 25 mm  16. 25 mm 20. 22 mm 21. 26 mm 22. 20 mm 23. 20 mm 24. 30 mm 25. 26 mm	27mm 24mm 32mm 24mm	24mm 32mm	28mm
8. R 9. 34mm 10. 36mm 11. 20mm 12. R 13. 22mm 14. R 15. 25mm  16. 22mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	24mm 32mm 24mm	32mm	
9. 34mm 10. 36mm 11. 20mm 12. R 13. 22mm 14. R 15. 25mm  16. 17. 22mm 18. 26mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	32mm 24mm		28mm
10. 36mm 11. 20mm 12. R 13. 22mm 14. R 15. 25mm  16. 25mm  19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	24mm	30mm	~~111111
11.       20mm         12.       R         13.       22mm         14.       R         15.       25mm         16.       22mm         18.       26mm         19.       28mm         20.       22mm         21.       26 mm         22.       20mm         23.       20mm         24.       30mm         25.       26 mm			30mm
12. R 13. 22mm 14. R 15. 25mm  16. 22mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm		38mm	25mm
13. 22mm 14. R 15. 25mm  16. 22mm 18. 26mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	23mm	24mm	25mm
14.       R         15.       25mm         16.       17.       22mm         18.       26mm         19.       28mm         20.       22mm         21.       26 mm         22.       20mm         23.       20mm         24.       30mm         25.       26 mm	25mm	28mm	20mm
15. 25mm  16. 17. 22mm  18. 26mm  19. 28mm  20. 22mm  21. 26 mn  22. 20mm  23. 20mm  24. 30mm  25. 26 mn	22mm	20mm	20mm
16. 17. 22mm 18. 26mm 19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	R	25mm	20mm
17.       22mm         18.       26mm         19.       28mm         20.       22mm         21.       26 mn         22.       20mm         23.       20mm         24.       30mm         25.       26 mn	21mm	26mm	23mm
17.       22mm         18.       26mm         19.       28mm         20.       22mm         21.       26 mn         22.       20mm         23.       20mm         24.       30mm         25.       26 mn			
18.       26mm         19.       28mm         20.       22mm         21.       26 mn         22.       20mm         23.       20mm         24.       30mm         25.       26 mn			
19. 28mm 20. 22mm 21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	22mm	36mm	30mm
20. 22mm  21. 26 mn  22. 20mm  23. 20mm  24. 30mm  25. 26 mn	29mm	28mm	26mm
21. 26 mm 22. 20mm 23. 20mm 24. 30mm 25. 26 mm	R	30mm	R
22.       20mm         23.       20mm         24.       30mm         25.       26 mn	R	28mm	R
22.       20mm         23.       20mm         24.       30mm         25.       26 mn	20mm	28mm	20mm
23. 20mm 24. 30mm 25. 26 mm	R	22mm	20mm
24. 30mm 25. 26 mn	24mm	28mm	30mm
25. 26 mn	25mm	30mm	22mm
	22mm	30mm	R
26. R	28mm	22mm	20mm
27. R	R	25mm	R
28. 20mm	R	26mm	R
29. R		R	R
	R	Savlon, R=Resistance	

Table 3: Percentage Susceptibility at 25% & 50% Concentration of Antimicrobial Disinfectants

(%)Dilution	Dettol	Purit	Isol	Savlon
25	78.6%(22)	78.6%(22)	96.4%(27)	82.1%(23)
50	89.3%(25)	89.3%(25)	92.9%(26)	78.6%(22)

Table 4: Percentage Resistance at 25% & 50% Concentration of Disinfectants

(%)Dilution	Dettol	Purit	Isol	Savlon	
25	21.4%(6)	21.4%(6)	3.6%(1)	17.9%(5)	
50	10.7%(3)	10.7%(3)	7.1%(2)	21.4%(6)	



Discussion, Conclusion and Recommendation

The result of this study showed that at 50% concentration of the disinfectants, *Staphylococcus aureus exhibited* a high percentage of susceptibility as against *Staphylococcus aureus susceptibility* at 25% concentration of the disinfectants. The susceptibility readings at 50% concentration of disinfectants are 89.3%(25) for Dettol, 89.3%(25) for Purit, 92.9%(26) for Isol, and 78.6%(22) for savlon while at 25% concentration of the disinfectants it reads 78.6%(22) for Dettol, 78.6%(22) for purit, 96.4%(27) for Isol, and 82.1%(23) for savlon, with Isol at its peak in both the two tests. This is in agreement with (Russell and McDonnell, 2000) that the efficacy of antimicrobial products may depend on, and vary significantly with the formulation used. However, from this study, *S. aureus* are more sensitive to Isol than the rest of the disinfectants. At 25% concentration of the disinfectants, Dettol is 21.4% resistant, Purit 21.4%, Isol is 3.6%, Savlon is Dettol is 10.7%, Purit is 10.7%, Isol is 7.1%, Savlon is 21.4%. It was observed that *Staphylococcus aureus* was least resistant to Isol at both 25% and 50%

concentration. This is followed by Dettol and Purit. The scientific committee on Emerging and Newly Identified Health risks (2009) reported that bacteria resistance arises from a mechanism causing decrease in intracellular concentrations of biocides below a threshold level that is harmful to the bacterium. McDonnell and Russell (2000) also found put that resistance is either a hereditary natural property of an organism, or acquired by mutation and acquisition of plasmids or transposons. However, this resistance is likely due to the presence of active efflux. In appropriate use of antimicrobial agent as in low dosage, short contact, or irregular application is primarily responsible for the emergence of many resistant bacteria species including staphylococci (Yilmax and Kaleta, 2009). Thus, resistance to disinfecting agents induced by sub-lethal concentrations of the active compound will significantly increase minimum inhibitory concentration values for most antimicrobials. Hogan and Smith (2008) who tested eight strains of S. aureus to determine if repeated in vitro exposure to sub-lethal concentrations of four commercial biocides could enhance bacterial tolerance. They found that the responses of S. aureus to chlorhexidine, sodium hypochlorite and iodophor were not affected by prolonged exposure to these reagents. Efflux pumps have been shown to decrease the efficacy of numerous biocides including quaternary ammonium compounds, phenolic parabens, and intercalating agents, most notably in  $\check{S}$ . aureus that express pumps such as QacA-D, Qach, and QacH.

### References

- Bhandare. S. G., Sherikarv A. T., Paturkar.A. M., Waskar V. S., Zende R.J.(2007). A comparison of microbial contamination on sheep/goat carcasses in a modern Indian abattoir and traditional meat shops. Food control. 18:854-868.
- Center for disease Prevention and control CDC,2013. Staphylococal food poisoning. Cheesbrough, M. (2006). District Laboratory for Tropical Countries. Low price ed. Cambridge University Press, London. Pp. 62-193.
- Chiang Y. C, Liao W.W., I<sup>7</sup>an CM., Pai W. Y., Chiou C. S., Tsen H. Y.(2008). PCR detection of staphylococcat enierotoxins (SEs) N,O,P<sub>3</sub>Q,R,U, and Survey of SE types in Staphylococus aureus isolates from food-poisoning cases in Taiwan. Int. J. food Microbiol. 121:66-73.
- Fratamico P. M., Bhunia A.K., Smith J.L. Food-borne pathogens in Microbiology and Molecular Biology. Wymondham, Norfolk, UK: Caister Academic Press; 2005. Pp.273,
- Farzana K, Akhtar S, Jabecn. F. (2009). Prevalence and antibiotic resistance of bacteria in two ethnic milk based products. PakJBotAl:935-943.
- Ikeme A. J. (1990). Meat Science and Technology, a comprehensive approach, Africana-Feb. publisher Limited. 1 AfricanaFeb. Drive, Onitsha, Nigeria Pp 1-254.
- Siddiqui F. J., Rabbani F., Hasan R., Nizami S. Q., Bhutta Z.A.(2006). Typhoid fever in children, some epidemiological considerations from Karachi, Pakistan. Int. J Infect Disease. 10:215-222.
- Yilmax A, kaleta E. F. (2009). Suitability of two commercial preparations for disinfections against Methicillin-Resistant Staphylococcus aureus in veterinary medicine., 116:180-185.