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1	Characterization and Antibiotic Sensitivity Testing of Clinical
2	Bacteria Species Isolated from Kunu Drink Sold in
3	Rumuolumeni, Rivers State
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8 Abstract

The isolation, characterization and antibiotic sensitivity tests of some clinical bacteria species 9 isolated from Kunu drink sold in Rumuolumeni, Rivers State was carried out. Samples of the 10 Kunu drink was bought from vendors indifferent locations and their bacteriological counts 11 enumerated using standard microbiological methods by the pour plate technique. The 12 antibiotic sensitivity pattern of the pure bacteria isolates against some antibiotics was 13 determined using the disc diffusion method. The total bacterial counts of the Kunu in the 14 different locations ranged from 4.0x102 to 8.6x102 cfu/ml. Four species of bacteria including 15 Escherichia coli, Enterohacter aerogenes, Staphylococcus aureus and Streptococcus spp were 16 isolated and identified by grain staining and their biochemical reactions. The most prevalent 17 isolate in terms of occurrence was Escherichia coli (50 18

19

Index terms— Samples of the Kunu drink was bought from vendors indifferent locations and their bacteriological counts 20 21 enumerated using standard microbiological methods by the pour plate technique. The antibiotic sensitivity 22 pattern of the pure bacteria isolates against some antibiotics was determined using the disc diffusion method. 23 The total bacterial counts of the Kunu in the different locations ranged from 4.0x10 2 to 8.6x10 2 cfu/ml. Four 24 25 species of bacteria including Escherichia coli, Enterohacter aerogenes, Staphylococcus aureus and Streptococcus 26 spp were isolated and identified by grain staining and their biochemical reactions. The most prevalent isolate in terms of occurrence was Escherichia coli (50%) followed by Enierobacter aerogenes (30%), Staphylococcus areus 27 (10%) and Streptococctts spp (10%). The antibiotic tests showed that Escherichia coli had high resistance to 28 Chloramphenicol (70%), followed by Septrin (62.7%) and Spartloxacin (62.7%), while Enterobacter aerogenes, 29 Streptococcus spp and Staphylococcus areus had low rates of resistance to all the antibiotics tested. The results 30 of this study demonstrated that Kunudrink sold in Rumuolumeni was contaminated with potentially pathogenic 31 bacteria species, including antibiotic Introduction ccording to Maji et al., (2011), Kunu drink is a locally prepared 32 indigenous non-alcoholic beverage normally prepared and consumed in large quantity in Nigeria, especially in the 33 northern part of the country (Amusa and Aswaye, 2009). It can be consumed during the wet and dry seasons due 34 to its thirst quenching properties. Umaru et al., ??2014) reported that Kunu drink is sold in many public places 35 36 such as markets, offices, schools, motor parks and as drinks during festival, weddings and naming ceremonies. It 37 is an appetizer and food complement used to quench hunger ??Adelekan et al., 2014). Kunu drinks are usually 38 produced using maize, guinea corn, millet or sorghum in varying proportions (Maji et al, 2011) to which sweet potato sometimes is added to increase the taste of the Kunu, which is a major factor that attracts consumers 39 to the product. This common drink is usually packaged and sold in 50ml to 1L plastic bottle and at times tied 40 in some disposal polythene bags the drink is mostly consumed within 20-35 hours of production due to its poor 41 keeping quality (Akoma et al, 2012). This drink is not expensive because the grains and other ingredients used for 42 production are locally sourced. The packaging materials are also readily available, cheap and affordable within 43

44 the communities.

8 G) ANTIBIOTIC SUSCEPTIBILITY TEST

Different workers have reported that Kunuis rich in vitamins, minerals, carbohydrates and proteins ??Adebayo
 et

47 1 Materials and Methods

$_{48}$ 2 a) Study Area

⁴⁹ The study was conducted in Rumuolumeni, Port Harcourt, Rivers state, Nigeria. Port Harcourt lies between ⁵⁰ latitude 4°46'38.71"N and longitude 7°00'48.24"E. and located in the tropical rainforest in Nigeria.

⁵¹ 3 b) Collection of Sample

52 Five bottles of hawked kunu samples were bought from vendors in different locations in Rumuolumeni, properly

⁵³ labelled, placed in a sterile plastic container and transported to the Biology laboratory, Ignatius Ajuru University

54 of Education for microbiological analysis.

⁵⁵ 4 c) Processing of Sample

The samples were mixed gently and 10ml of each was added to 90 ml distilled water with a clean pipette. The solution was mixed and diluted serially by transferring 1 ml of the stock sample into sterilized test tubes containing 9ml of peptone water. The procedure was repeated for the third and fourth test tubes to make a dilution of 10³ and 10?.

60 5 d) Preparation of Media

61 All the glassware used such as petri-dishes, conical flasks, test tubes and pipettes were washed with detergent,

⁶² rinsed in water, dried and sterilized in the hot air oven at 60° c for 1 hour. Different culture media such as Nutrient

Agar, MacConkey Agar, Salmonella-Shigella Agar (SSA), Trisulphate Citrate Bile Salt Agar (TCBS) and Manitol
 Salt Agar (MSA) were used for isolation. Each of the media was prepared by weighing out appropriate quantities

according to the manufacturers instruction and dissolved completely in the required volume of distilled water.

⁶⁶ The media were autoclaved at 121°C for 15 minutes and allowed to cool at 45-50°C. The media was dispensed

⁶⁷ aseptically into the petri-dish plates and left on the table to solidify at room temperature.

68 6 e) Isolation and Preservation

69 Using a sterile loop, discrete colonies were all sub-cultured onto another media to obtain pure colonies. This

- $_{\rm 70}$ $\,$ was done by streaking a loopful of a particular isolate into freshly prepared culture media plates for bacteria.
- 71 The sub-cultured nutrient agar plates were incubated at 37°c. Bacteria pure cultures were accordingly stored in
- $_{\rm 72}$ $\,$ sterile agar slants for preservation and further analysis at 4°c.

⁷³ 7 f) Identification of Isolates

The isolates were identified using gram staining and biochemical tests such as: motility test, urease test, citrate utilization test, indole test, oxidase test, coagulase test, catalase test, vogues proskauer reaction and methyl red test. Identification was based on comparison of the characteristics of the isolates described by (Chess brough, 2006).

78 8 g) Antibiotic Susceptibility Test

The isolates were screened for antimicrobial sensitivity using the Kirby-Bauer agar disk diffusion method (CLSI, 79 2009). A suspension of each isolate was prepared in peptone water to match 0.5 McFarland turbidity standards in 80 order to standardize the inoculum. The standardized inoculum of each isolate was inoculated onto the surface of 81 plain Mueller-Hinton agar plates and Septrin (30 µg), Chloramphenicol (30 µg), Sparfloxacin (5 µg), Amoxycillin 82 (30 µg), Ciprofloxacin (5 µg) Augmentin (30 µg), Gentamicin (10 µg), Pefloxacin (10 µg), Tarivid (30 µg) 83 and Streptomycin (10 µg) discs were placed and incubated at 37°C for 24 hours. The zones of inhibition 84 were measured and compared with the Clinical and Laboratory Standards Institute. 3 shows the Antibiotic 85 resistance pattern of the bacterial species isolated from Kunun drinks sold in Rumuolumeni, Port Harcourt 86 metropolis. E. coli exhibited very high percentage resistance to chloramphenicol (75.0%) followed by Septrin 87 88 (68.7%) and Sparfloxacin (68.7%) respectively, whereas there was no resistance to Perfloxacin (0.0%). The 89 highest percentage resistance for Enterobacter aerogenes was recorded with Augmentin (50.0%) and the least 90 resistance was recorded with Ciprofloxacin (7.1%). The percentage resistance Streptococcus spp. isolated was 91 relatively low which ranged from 38.3% to 33.3% for the antibiotics to which this species showed resistance (Trivid, Sparfloxacin, Ciprofloxacin, Augmentin and Streptomycin). However, the isolates of the Streptococcus spp. 92 showed completely no resistance (0.0%) to Septrin, Chloramphenicol, Amoxicillin, Gentamicin and Perfloxacin. 93 Similarly, the percentage resistance of Staphylococcus aureus isolated was relatively low which ranged from 94 33.4% to 16.7% for the antibiotics to which these isolates showed resistance (Gentamicin, Perfloxacin, Septrin, 95

96 Sparfloxacin, Ciprofloxacin and Streptomycin).

97 **9 III.**

98 10 Results

99 IV.

100 11 Discussion

The relative high numbers of microbial counts obtained from the different samples of kunu in the study were 101 indicative of high level of microbial contamination of the product. The Kunu sold at Town Hall had the highest 102 counts of 8.6×10 2 cfu/ml, while the one from St Johns location had the lowest counts of 4.0×10 2 cfu/ml. 103 The high microbial counts experienced may be attributed to lack of effective precautions on hygiene practice in 104 handling procedures during processing of the beverage. The practice of addition of some quantity of water to 105 Kunu after fermentation may also be a source of microbial contaminants, which may have come from the water 106 itself or from the utensils used for such purposes. In an earlier report, Amusa and Ashwaye (2009) had stated 107 that the presence of coliforms such as Esherichia coli in hawked Kunu was as a result of contaminated water, 108 containers, as well as dirty environment where the Kunu were being processed and hawked. The identification of 109 Escherichia coli, Staphylococcus aureus, Streptococcus spp and Enterobacter aerogenes in the samples analyzed is 110 a positive sign to the fact that the Kunu drink sold in the different locations in the community was contaminated 111 with potentially pathogenic bacteria and this may have come from the water used for domestic purposes, or 112 the human handlers during processing and sales of the product, respectively. This is in agreement with Amusa 113 and Ashwaye (2009) and Akoma et al., ??2013), who had noted that water used for production coupled with 114 the crude method of production and packaging under improper sanitary conditions predisposes Kunudrink to 115 microbial contamination of both gram negative and gram positive bacteria. The source of contamination may 116 also have come from the spices used additives (Essien et al., 2009, Lawal, 2012). There is therefore need for 117 surveillance by Public Health officials to ensure safety of the Kunu sold for to public. There is need to also ensure 118 that the water used for production especially post-heating processing of the Kunu is safe and free from microbial 119 contaminants. 120

Antibiogram of the isolates revealed varying levels of resistance to the antibiotics tested. Escherichia coli 121 showed high resistance to chloramphenicol (75% is a reflection of the use and misuse of the antibiotics in the 122 society. This is not surprising because outside the hospital environment, the general populace have access to 123 various kinds of antibiotics at any drug store even without any prescription from a medical practitioner. The 124 Public Health implication of this study is that antimicrobial resistant strains of pathogenic bacteria may colonize 125 the human population through consumption of contaminated Kunun and this would lead to chemotherapeutic 126 failures among the human consumers of this popular beverage in the Rumuolumeni, Port Harcourt metropolis. 127 128 V.

129 **12** Conclusion

The presence of resistant strains of E. coli, Enterobacter aerogenes, Staphylococcus aureus and Streptococcus spp in Kunun sold in Rumuolumeni suggests that consumption of this beverage has potential health hazard to the consumers in Rumuolumeni, Port Harcourt, Nigeria. The consumers of this popular drink are therefore at health risk, which may culminate into failures of commonly used clinical antibiotics for the treatment of the infections.

¹³⁴

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Figure 1:



Figure 2: Plate 1 :

Figure 3:

1

drink results from the processing activities and materials used such as water, handling and presentation techniques. The water content coupled with the crude method of production and packaging under poor sanitary conditions predisposes the drink to sudden microbial contamination (Akoma et al, 2012). Again, there is no public health regulatory agency that monitors the production processes in spite of the associated harm that kunu drink causes Bukar et al., (2010). The aim of this study is to characterize and determine the antibiotic sensitivity of some pathogenic bacteria species isolated from Kunu drink sold in Rumuolumeni, Rivers State.

Location	Kunu
А	5.1×10
	2
В	$6.2{ imes}10$
	2
С	4.6×10
	2
D	$7.1{ imes}10$
	2
E	4.1×10
	2
F	

[Note: Keys: A = Waterside, B = Big tree market, C = Akar Junction, D = Iwofe school gate, E = St. John's, F = Town Hall]

Figure 4: Table 1 :

$\mathbf{2}$

Locations				
Bacteria Isolates				
Escherichia coli	+ + + + + +			
Staphylococcus aureus	+ + _ +			
Streptococcus spp	+ +			
Enterobacteria aerogenes	+ + + _ + +			

Figure 5: Table 2 :

3

Figure 6: Table 3 :

the antibiotics tested. However, E. coli had very high

sensitivity to Pefloxacin (100%), followed by Gentamicin

(88%), Augmentin (75%), tarivid (68.7%) and Percentage Resistance of Isolates Streptomycin (68.7%). Streptomycin (68.7%) Antibiotics Conc. (µg) susceptible isolates which had very high sensitivity Escherichia coli Enterobacter Aer

Septrin30 Chloramphenicol, Chloramphenicol 30 Amoxicillin, Perfloxacin, respectively. Staphylococcusaureu

Sparfloxacin 5 Amoxicillin,	68.7	35.7
Ciprofloxacin 5	50.0	7.1
Amoxicillin 30	12.0	35.7
Augmentin30	25.0	50.0
Gentamicin10	12.0	14.3
Pefloxacin10	0.0	42.9
Tarvid 30	31.3	28.8
Streptomycin 10	31.3	14.3

Figure 7:

12 CONCLUSION

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