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Profiling of Microbiota in Liquid Baby Formula and a **Baby Drink Consumed with an Artificial Nipple**

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- \checkmark Liquid baby formula is ready-to-use and safe for infants, and is widely used in many countries.
- ✓ Upon natural disasters, liquid baby formula has been well received as part of overseas relief supplies.
- ✓ Powdered milk has been permitted to use for infants as baby formula for several decades in Japan.
- ✓ In 2019, Japanese food companies have brought Japanese-produced liquid baby formulas to market.



Japan-products

Advantages

- It can be kept at room temperature, and used immediately after opening. \checkmark
- \checkmark We don't have to spend time to prepare it.
- \checkmark It can reduce burden of childcare, and may provide social advantages.

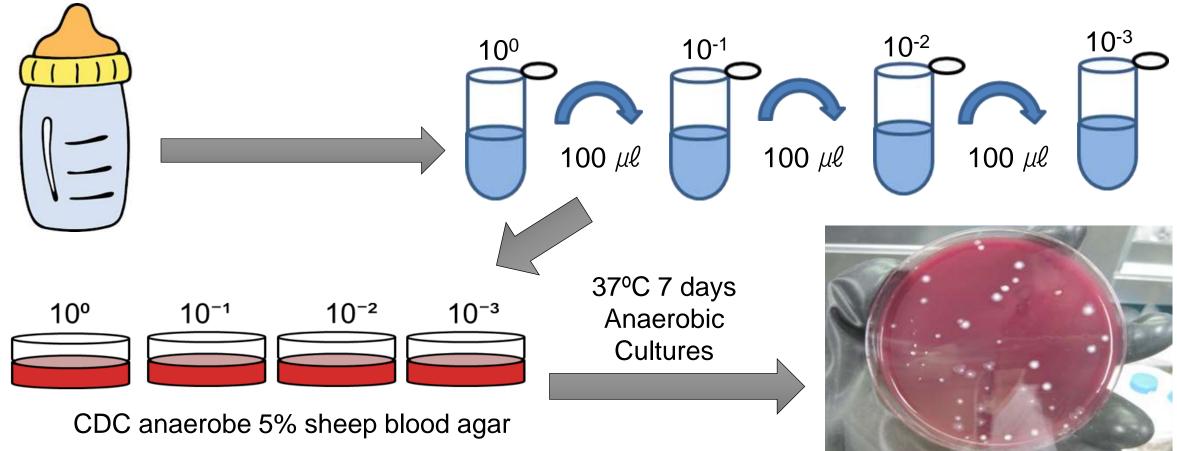
Food companies recommend that any remaining liquid baby formula should be discarded after feeding. However some consumers may store the remaining liquid baby formula after feeding and use it later. **Due to its** relatively high price in Japan

Materials & Methods

Sampling and Culturing of samples

After obtaining informed consent, 8 healthy human subjects (19-23 years old) were asked to drink liquid baby formula (Hohoemi RakuRaku Milk[®]) or baby-drinks (Bean Stalk[®]) via the artificial nipples of a baby bottle (ca. 50 mL each).

The samples of liquid baby formula immediately after drinking and after storage at 4°C for 3 h, 12 h, and 24 h were mixed vortexing. The diluted samples were spread onto the surface of CDC blood agar plates, and incubated anaerobically at 37°C for 7 days.





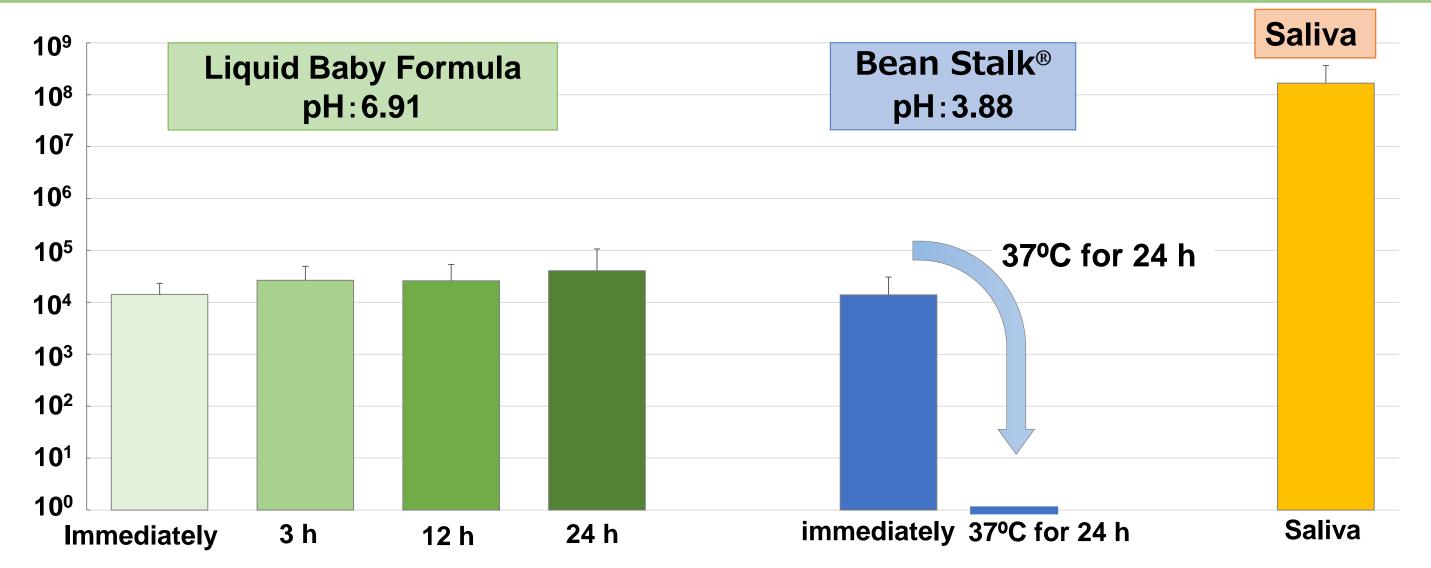
It is suspected that oral bacteria can be transferred to liquid baby formula through artificial nipples and that the bacteria can proliferate in the bottles after feeding.

To elucidate the effect of bacteria on liquid baby formula by after feeding,

The present study examined that **1**The transfer of oral bacteria through artificial nipples **2**Their multiplication and survival in liquid baby formula and baby drinks

Baby drinks (Bean Stalk[®]), an infant-specific ion supply drink was examined in this study \rightarrow

Results 1: Bacterial amounts (CFU) & pH

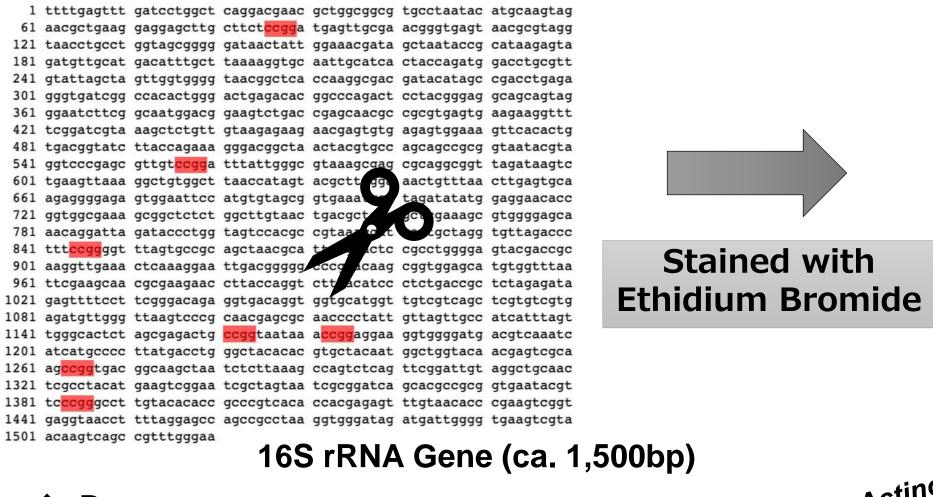


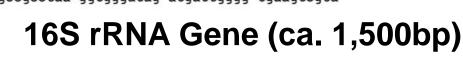
DNA extraction and identification of isolates by DNA sequence analisis

Genomic DNA was then extracted from single colonies using InstaGene Matrix kit. The 16S rRNA gene were individually digested with *Hpall*, and digested products were separated on 2% agarose gels.

Stained with

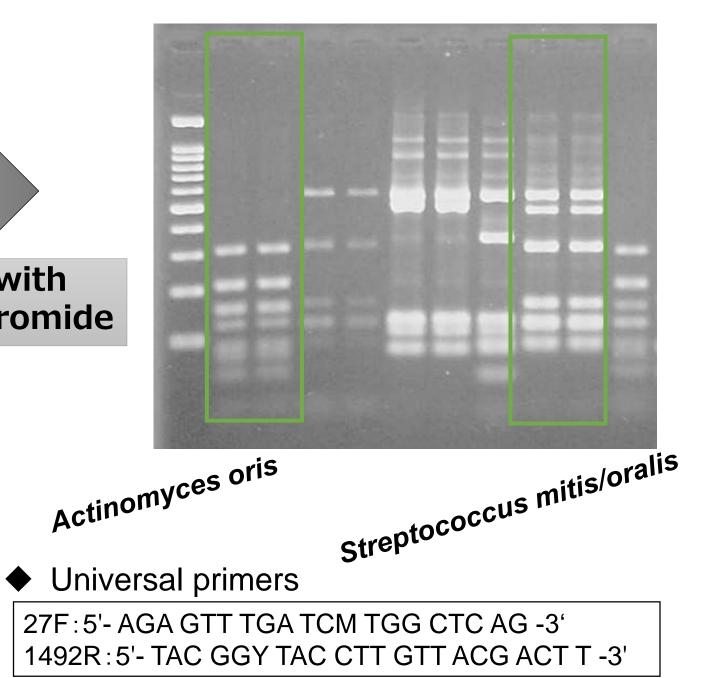
Isolates were identified according to PCR-RFLP analysis and sequence.





Program

Initial heat activation	95°C	5min	
Denaturation	94°C	1min	
Annealing	55°C	1min	30 cycles
Extension	72ºC	1.5min	
Final extension	72ºC	10min	



The mean concentrations of bacteria in remaining liquid baby formula were 1.4 × 10⁴, 2.7 × 10⁴, 2.6 × 10⁴ and 4.1 × 10⁴ CFU/mL immediately after drinking and after storage at 4^oC for 3h, 12h and 24h, respectively. In baby-drinks (Bean Stalk®), CFU was 1.4×10^4 immediately after drinking. No bacteria were detected in the remaining baby-drink after incubation at 37°C for 24 h.

The mean concentration of bacteria in salivary samples was 1.7×10^8 CFU/ml.

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Results 2: Bacterial Compositions

	Liquid Baby Formula (n=4)								
	Immediately		Stored at			Bean Stalk [®]			Saliva
	after		4°C fo	or 12 h		(1)	i=9)		(n=10)
Total (%)	127	(100.0)	160	(100.0)		258	(100.0)	34	3 (100.0)
Anaerobes	26	(20.5)	27	(16.9)		78	(30.2)	5	7 (16.6)
Veillonella	13	(10.2)	15	(9.4)		36	(14.0)	18	3 (5.2)
Prevotella	3	(2.4)	7	(4.4)		13	(5.0)	1	7 (5.0)
Propionibacterium	1	(0.8)				7	(2.7)	7	(2.0)
Atopobium	1	(0.8)	4	(2.5)		1	(0.4)	4	(1.2)
Porphyromonas	6	(4.7)				3	(1.2)	4	(1.2)
Fusobacterium						3	(1.2)	3	(0.9)
Leptotrichia								1	(0.3)
Megasphaera								1	(0.3)
Selenomonas			1	(0.6)		1	(0.4)	1	(0.3)
Solobacterium								1	(0.3)
Eubacterium						3	(1.2)		
Olsenella						7	(2.7)		
Oribacterium	1	(0.8)							
Peptostreptococcus	1	(0.8)				4	(1.6)		
Aerotorelant anaerobes					· _	6	(2.3)		
Cutibacterium						6	(2.3)		
Facultative anaerobes	99	(78.0)	117	(73.1)	· _	170	(65.9)	27	
Streptococcus	56	(44.1)	73	(45.6)		92	(35.7)	17	
Schaalia	6	(4.7)	11	(6.9)		60	(23.3)	3	
Neisseria	17	(13.4)	5	(3.1)		1	(0.4)	22	
Actinomyces	8	(6.3)	11	(6.9)		9	(3.5)	19	
Rothia	4	(3.1)	8	(5.0)		1	(0.4)	10	
Gemella	4	(3.1)	4	(2.5)		3	(1.2)	10	
Staphylococcus							_	6	
Campylobacter	2	(1.6)				2	(0.8)	1	
Capnocytophaga	1	(0.8)	2	(1.3)		2	(0.8)	1	(0.3)
Corynebacterium	1	(0.8)	3	(1.9)					
Unknown					· _	4	(1.6)	5	(1.5)
Lost	2	(1.6)	16	(10.0)				3	(0.9)

- Streptococcus (40.7%), Neisseria (11.3%), Veillonella (10.7%) and Actinomyces (9.3%) species were predominantly recovered from the samples immediately after drinking (n=4), followed by Schaalia (5.3%), Porphyromonas (4.0%), Prevotella (3.3%), Rothia (3.3%) and Gemella (2.7%) species.
- ◆ In contrast, Streptococcus (43.2%), Veillonella (9.3%), Schaalia (8.2%) and Actinomyces (7.1%) species were predominant in the samples after storage at 4°C for 12 h (n=4), followed by Rothia (4.4%), Prevotella (4.4%), Neisseria (3.3%), Gemella (2.7%) and Atopobium (2.2%) species.
- ◆ In the remaining baby drink (Bean Stalk[®], n=9), Streptococcus (35.7%), Schaalia (23.3%) and Veillonella (14.0%) were predominantly recovered followed by Prevotella (5.0%), Actinomyces (3.5%), *Propionibacterium* (2.7%) and *Cutibacterium* (2.3%)
- From saliva (n=10), Streptococcus (50.1%), Schaalia (9.0%) and Neisseria (6.4%) were predominantly detected, followed by Actinomyces (5.5%), Veillonella (5.2%), Prevotella (5.0%), Rothia (4.7%), Gemella (2.9%) and Propionibacterium (2.0%).
- The bacterial compositions of the liquid baby formula and baby drink after drinking were similar to those of human saliva and that the predominant species in the saliva infiltrated the liquid baby formula and baby drink via the artificial nipples of baby bottles.

Discussion

More than ten thousand per mL of oral bacteria such as *Streptococcus*, *Actinomyces* and Veillonella infiltrated into baby drinks after drinking.

The bacterial compositions of drinks was similar to that of saliva, indicating that the infiltrated bacteria originated from saliva.

The levels of bacteria immediately after drinking and after storage at 4°C for 12 h were similar, suggesting that remaining liquid baby formula may be preserved safety in a refrigerator for a specified amount of time.

No bacteria were detected in remaining baby drink even after incubation at 37°C for 24 h; this was likely due to the low pH (3.88 \pm 0.01) of the baby drink, when compared to the pH of liquid baby formula (6.91 \pm 0.01). This suggests that the remainder of low-pH drinks may be preserved for a longer time period than neutral-pH drinks from the view point of bacterial concentrations.