ORIGINAL ARTICLE Traceability of Sources of Contaminants of some Preserved Oral Non Sterile Syrups

¹Rania Abdelmonem Khattab^{*}, ¹Alaa El-Din Shawky Hosny and ²Lobna Aref Deif

^{1*}Microbiology and Immunology Department, Faculty of Pharmacy, Cairo University, Kasr Al-Aini, Cairo, Egypt.
² Mamphis company for pharmaceutical and chemical industries, El-Sawah, Cairo, Egypt.

	ABSTRACT
Key words:	Background: Microbial contamination sources in the manufacturing process of some oral pharmaceutical syrups may be a leading cause of diseases in children, elderly and
Aspergillus flavus, Oral syrup, GMP, Preservatives, Sources of contamination and pharmaceutical products	immunosuppressed individuals. Objectives : Traceability of some sources of contamination in manufacturing process of some oral pharmaceutical syrup. Methodology : Analysis of 400 oral syrup samples, raw materials, water and air samples using classical pharmacopeia techniques. Results : In this study, fungal contaminants were more common in pharmaceutical syrup than bacteria and air was an important source of contamination in finished product.

INTRODUCTION

The control of microbial contamination of pharmaceutical products may be controlled through upgrading of GMP rules as well as preservation However there have been reports about drug borne human infection worldwide². Moreover contamination of pharmaceuticals can cause changes in their physical characteristics, this include emulsion, thinning of creams, fermentation of syrups, appearance of turbidity or deposit and changes in odor and color³. Therefore a preservation may be included to minimize the risk of spoilage or to kill low levels of contaminants in multi dose preparations⁴. Identification as well as quantitation of pathogenic and opportunistic microorganisms in oral pharmaceutical products is recommended especially when the products intended for use by children, elderly and immune suppressed patients 5 .

The objective of this study was to evaluate the number and type of microbial contaminants of some oral pharmaceutical products in the egyptian market and to trace the sources of contamination.

METHEDOLOGY

1- Preparation of the raw material sample:

The method for sample preparation depends on the physical characteristics of the material to be tested.

*Corresponding Author:

a. Water-Soluble raw material: The raw material to be examined was diluted 1/10 in a soya bean casein digest broth. If necessary, pH was adjusted to 6-8. Further dilutions, when necessary, were prepared with the same diluent.

- **b.** Non fatty raw material insoluble in Water: The raw material was suspended 1 in 10 in a Soya bean-Casein Digest Broth. A surface-active agent such as 1 g per L of polysorbate 80 may be added to assist the suspension of poorly water soluble substances. If necessary, pH was adjusted to 6-8.Further dilutions, when necessary, were prepared with the same diluent.
- *c. Fatty raw material:* The raw material was mixed with the minimum necessary quantity of sterile polysorbate 80 or another non inhibitory sterile surface-active reagent, heated, if necessary, to not more than 40°C or, in exceptional cases, to not more than 45°C. Mixed carefully and if necessary the temperature in a water bath was maintained. A sufficient quantity of the pre warmed chosen diluent was added to make a 1 in 10 dilution of the original raw and mixed carefully, while maintaining the temperature for the shortest time necessary for the formation of an emulsion. Further serial 10-fold dilutions may be prepared using the chosen diluent containing a suitable concentration of sterile polysorbate 80 or another non inhibitory sterile surface-active reagent.

2- Cultivation by pour plate method:

One mL of the prepared sample was added to 15 to 20 mL of Soybean-Casein Digest Agar or Sabouraud Dextrose Agar.

The plates were incubated for the determination of total aerobic microbial count (TAMC) at 32.5°C for 3 days. For the determination of total combined yeast and molds count (TYMC), the plates were incubated at 22.5°C for 5 days. Pour plate Method at least in

Rania Abdelmonem Khattab Microbiology and Immunology Department, Faculty of Pharmacy, Cairo University, Kasr Al-Aini 11562, Cairo, Egypt. E-mail: rania.khatab@pharma.cu.edu.eg; khattab500@yahoo.com; Tel.: +2 01005183478

Water (A)

Sucrose (A)

duplicate for each medium was used, and the mean count of the colonies was obtained.

The mean count of the organisms was calculated and the number of CFU in the original inoculum was obtained.

3- Syrup sample preparation:

Membrane Filtration: Membrane filters having a nominal pore size not greater than 0.45μ m were used.

A suitable quantity of the prepared sample was transferred immediately, and the membrane filter was rinsed with an appropriate volume of diluent.

For the determination of total aerobic microbial count (TAMC), the membrane filter was transferred to the surface of the Soybean-Casein Digest agar and incubated at 32.5°C for 3 days. For the determination of total combined yeast and molds count (TYMC), the membrane was transferred to the surface of the Sabouraud dextrose agar and incubated at 22.5 °C for 5 days.

4- Microbiological air monitoring using agar exposure plates (Passive Monitoring):

Petri dishes (90mm in diameter) containing Trypticase Soya Agar and Sabouraud Dextrose Agar were used. The entire agar surface, was completely exposed for at least 4 hours.

5- Water analysis:

Using membrane filtration, 100 ml of purified water were filtered and the membrane filter was transferred to plate count agar and incubated for 72 hour at $32^{\circ}C^{6}$.

6- Isolation and identification of microbial isolates:

The cultured plates from air, raw material, water and finished formula were selected and their representative colonies were picked up, and streaked using a sterile loop on Trypticase Soya Agar for bacteria and Sabouraud Dextrose Agar for fungi to obtain pure separate colonies. The plates were incubated aerobically at 32°C for 24 hours for bacteria and at 22°C for 14 days for fungi. The isolated colonies from each plate were spread on a clean slide and examined by the routine bacteriology methods.

RESULTS

A total of 39 fungal isolates were recovered from two pharmaceutical finished preserved products (200 samples for each), while the number of bacterial isolates were 3 organisms.

Air, water and raw material samples were examined for the presence of bacterial and fungal contaminants. The majority of isolates were obtained only from air samples. Recovered isolates from air were 64 fungal isolates and 188 bacterial isolates. The results are shown in tables 1, 2 and 3.

vas	Source Of isolate	Types of isolates	number
	Air	Aspergillus flavus	31
		Aspergillus fumigatus	3
а		Aspergillus niger	17
•		Penicillium	13
vas		Gram positive rods	117
vas		Gram positive cocci	66
		Gram negative rods	5
oial	Stored samples (A)	Aspergillus flavus	10
to	(12 months)	Aspergillus niger	1
ind		Aspergillus fumigatus	2
of		Gram positive cocci	1
the	Stored samples (B)	Aspergillus flavus	12
the	(12 months)	Aspergillus niger	2
r 5		Penicillium	3
		Gram positive cocci	1
gar		Gram positive rods	1
	Fresh samples (A)	Aspergillus niger	1
ing		Aspergillus flavus	3
gar	Fresh samples (B)	Penicillium	3

Table	1:	Types	of	contami	inants	obtai	ned	from
finishe	d	produ	ict	and	diffe	rent	po	ssible
contan	nina	ting sou	irce	s.				

Table 2: Result of ra	w materials and	water samples
analysis in product	preserved with b	enzoic acid.

Aspergillus niger

Gram negative rods

Gram positive rods

2

3

4

Sample	Number of	TBC	TYC
~~~~	samples	CFU/gm	CFU/gm
Calcium	3	0	0
glubionate		0	0
-		0	0
Calcium	3	0	0
lactobionate		0	0
		0	0
Benzoic acid	3	0	0
		0	0
		0	0
Citric acid	3	0	0
		0	0
		0	0
Sucrose	3	3	0
		1	0
		0	0
Saccharine	3	0	0
		0	0
		0	0
Sorbitol	3	0	0
		0	0
		0	0
	3	2CFU/100 ml	0
Water		1CFU/100 ml	0
		0	0

Sample	Number of	TBC	TYC
	samples	CFU/gm	CFU/gm
Chlorpheniramine	3	0	0
maleate		0	0
		0	0
Sodium benzoate	3	0	0
		0	0
		0	0
Lactic acid	3	0	0
		0	0
		0	0
Sucrose	3	0	0
		0	0
		0	0
Neurily oil	3	0	0
		0	0
		0	0
Flavoring agent	3	0	0
0.0		0	0
		0	0
Water	3	0	0
		0	0
		0	0

Table 3: Result of raw materials and water samples
analysis in product preserved with sodium benzoate.

### DISSCUSION

In developing countries, the possibility of the disease incidence is very high due to the unstable environmental condition, poor hygienic practices, and consumption of contaminated food and water ⁷. Smaller numbers of opportunistic pathogens become infectious when resistance mechanisms are impaired, either by severe underlying disease, or by use of immunosuppressive drugs ^{8,9}. Microbial contamination in non-sterile oral drugs is more important because the patients, who are taking the drug, are already diseased. Therefore, it is very necessary to examine the efficacy and/or potency of some drugs which are commonly used.

In the current study, from 400 tested sample of two types of oral pharmaceutical syrups, 39 fungal isolates and 3 bacterial isolates were recovered and identified microscopically. Isolates from air, raw material and water were obtained.

Most of isolates in finished products were fungi (*Aspergillus flavus*) which may be due to high osmotic pressure of syrup. Microbial count in the pharmaceutical syrup samples, air, water and raw material did not exceed the United State Pharmacopeia limits. For the environmental and syrup samples, air was an important contamination source.

Some of the dosage forms of oral drugs, if stored in unfavorable environment, can serve as substrates for

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microorganisms ^{10,11,12,13}. Moisture and high amount of sugar in the oral liquid drugs in particular can support the microbial growth. Oral liquid drug formulations such as aqueous solutions, suspensions, emulsions and syrups are at a greater risk of microbial contamination due to sweetening agents, improper storage and handling defects. Microbial contaminations may ultimately contribute to secondary bacterial infections in patients ^{14,15,16}.

In conclusion, in order to combat the microbial contamination in the oral drugs, proper implementation of good manufacturing practice (GMP) together with the total quality management (TQM) during product manufacturing in a microbiologically controlled environment must be done. Regular quality assessment during storage of the finished products, and appropriate aseptic handling of the drugs would be effectual^{17,18,19,20,21}.

### REFERENCES

- 1. Bloomfield SF. Control of microbial contamination in non sterile pharmaceuticals, cosmetics and toiletries. In: Microbial quality assurance in pharmaceuticals, cosmetics and toiletries. St edn. Chichester, Ellis Horwood Limited and Halsted Press, 1988; p 150.
- Coker M. An assessment of microbial contamination during drug manufacturing in Ibadan, Nigeria, *Eur J Scientific Res* 2005; 7: 19-23.
- 3. Shaikh D, Jamshed TA, Shaikh R. Microbial contamination of pharmaceutical preparations, *Pak J Pharm Sci* 1988; 1: 61-6.
- Denyer SP, Hodges NA, Gorman SP, Hugo W, Russell A. Pharmaceutical Microbiology. *Thedn. London, U. K., Blackwell Science*, 2004; p 220, 240.
- Manu-Tawiah W, Brescia BA, Montgomery ER.Setting threshold limits for the significance ofobjectionable microorganisms in oral pharmaceutical products, PDA J Pharm SciTechnol 2001; 55: 171-175.
- 6. United state pharmacopeia.
- 7. Prüss-Üstün A, Corvalán C. Preventing disease through healthy environments: Towards an estimate of the environmental burden of disease. Geneva, Switzerland: WHO Press; 2006.
- Noor R, Saha SR, Rahman F, Munshi SK, Uddin MA, Rahman MM. Frequency of opportunistic and other intestinal parasitic infections among the HIV infected patients in Bangladesh. *Tzu Chi Medical Journal* 2012; 24(4): 191-195.
- Manu-Tawiah W, Brescia BA, Montgomery ER. Setting threshold limits for the significance of objectionable microorganisms in oral pharmaceutical products, PDA. J Pharm Sci Technol 2001; 55: 171-175.

- 10. Hossain J. Importance of the bioburden test in pharmaceutical quality control. *Pharmaceutical Microbiology Forum* 2009;15(1): 2-14.
- 11. Shaikh D, Jamshed TA, Shaikh R. Microbial contamination of pharmaceuticals preparation. *Pakistan J Pharm Sci* 1988; 1(1):61-66.
- 12. Lund W. The Pharmaceutical Codex. 12th ed. London: The Pharmaceutical Press; 1994.
- Lowe RA, Shaw RJS. Storage, stability and in-use shelf-life guidelines for non-sterile medicines. Eastern and South East London: Quality Assurance Service; 2001.
- Mugoyela V, Mwambete KD. Microbial contamination of nonsterile pharmaceuticals in public hospital settings. *Ther Clin Risk Manag* 2010; 6: 443–448.
- Nirmala MJ, Chandrasekaran N, Mukherjee A. Enhanced solubilization of aqueous insoluble antihypertension drug. *Int J Pharm Pharma Sci* 2012; 4(5): 366-368.

- Adeshina GO, Ajayi S, Onaolapo JA. Microbiological quality of some commercially available paediatric anti-malarial and cough preparations in Ilorin, Nigeria. *Niger J Pharm Sci* 2009;8(1): 109–117.
- 17. United States Pharmacopeia (USP). Microbiological examination of nonsterile products: Tests for specified microorganisms. *Pharm Forum* 2003; 29(5):1722–1733.
- Hugo WB, Russell AD. Pharmaceutical microbiology.6th ed. Oxford, UK: Blackwell Scientific Publications; 1998.
- 19. Lund W. The Pharmaceutical Codex. Ed 12, London:The Pharmaceutical Press, 1994.
- 20. Halls N. Microbiological contamination control in pharmaceutical clean rooms. CRC Press, 2004.
- Coker M. An assessment of microbial contamination during drug manufacturing in Ibadan, Nigeria. *EurJScientific Res* 2005; 7:19-23.