

Effect of Probiotic Bifidobacterium Bifidum PTCC1644 on Lipid Profile in Rat

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Abstract: Background: The preventive effects of probiotics on hyperlipidemia have been reported in recent studies. Bifido bacteria as type of lactic acid bacteria, among probiotics, are one of the most numerous probiotics in the mammalian gut. The present aims to investigate the effect of Bifidobacterium bifidum PTCC1644 on lipid profile in rat serum. **Methods:** The sample of eighteen male rat of Wistare race were assigned into three groups as follows: SD group, fed standard diet; FSD group, fed fat diet; FSD-LAB group, fed fat diet supplemented with LAB (Bifidobacterium strain). At the first (8 week) and end (17 week) of study, lipid serum levels (TC, HDL-C, LDL-C, TG) were measured. **Results:** B. bifidum PTCC1644 decreased serum total cholesterol, LDL- cholesterol and triglycerides; it also increased HDL- cholesterol slightly in FSD-LAB than FSD groups. **Conclusion:** the results showed that daily consumption of Bifidobacterium strain used in this study can be effective in managing serum lipid profile and coronary heart disease.

[Mohammad Mahdi Norouzi, Mohammad Reza Fazaeli, Mohammad Abdollahi, Mojgan Oshaghi, Nasrin Samadi, Hossein Jamalifar. **Effect of Probiotic Bifidobacterium Bifidum PTCC1644 on Lipid Profile in Rat.** *J Am Sci* 2013;9(8):447-451]. (ISSN: 1545-1003). <http://www.jofamericanscience.org>. 49

Keywords: Probiotic Bifidobacterium, Bifidum PTCC1644, Cardiovascular diseases (CVDs)

Introduction:

Cardiovascular diseases (CVDs) are considered as the major reason of death globally, many people die due to CVDs than other causes [1]. CVDs associated with hyperlipidemia are leading causes of death in Iran, like many other countries. Studies done on Animal and human have shown that the reduction of cholesterol or low-density-lipoprotein (LDL) in plasma may lead to reduction of risk associated with CVDs [2]. Living microbial supplement is referred to Probiotics that improve host animal's intestinal microbial balance [3]. A number of therapeutic role have been reported for probiotics like lowering plasma lipids [4, 5]. Bifidobacteria as a type of lactic acid bacteria are the major bacteria in the intestines of newborn babies and one of the most numerous probiotics in the gut. These bacteria have been used extensively and well-tolerated.

In one study, a Subspecies of Bifidobacterium longum revealed a significant effect in lowering Serum total cholesterol than a mixed culture of Streptococcus thermophilus and Lactobacillus delbrueckii Subspecies bulgaricus both in rat and human [6]. In another study, Bifidobacterium longum SPM1207 lowered serum total cholesterol and LDL levels significantly, and

slightly increased serum HDL[7]. Another randomized, placebo-controlled and parallel designed study was done to check the ability Lactobacillus plantarum CK102 in cholesterol lowering effect. In this study, thirty-two Sprague-Dewls(SD) male rats fed with $500 \times 10^7 \left(\frac{CFU}{ml}\right)$ daily to 6 week and the result showed that concentration of total cholesterol compared to the control was reduced significantly by 50.3% [8]. The present study aimed to investigate the effect of B. bifidum PTCC1644 on lipid profile in rat serum.

Material and methods

Bacterial strain and culture

Table 1 shows the origins of the strain and culture media and methods used in this study. B. bifidum PTCC (Persian Type Culture Collection-Iran) 1644 was provided by microbial collection from the department of food and drug control, faculty of pharmacy, Tehran university medical sciences. The selected B. bifidum PTCC1644 was resistant to acidic PH[9].

Table 1 Culthure media and procedure

Media	Main counted microorganisms	Incubation time(day)
Anaerobic cultur^a		
MRS agar and broth medium^b	<i>Bifidobacterium bifidum</i> PTCC1644	2

^a → Culture media were prepared and dispensed into plates on a clean bench under the laboratory biologic hood. plates were incubated in a CO₂ incubator (Memert. Germany) with anaerobic jars (H₂/CO₂/N₂: 5:5:90, Whitley Jar, UK). A sample of each dilution was plated on each medium under the laboratory biologic hood. Pelates were incubated in anaerobic condition at 37°C for 48- h.

^b → MRS, deMan Rogosa Sharp (Merck, Germany)

B. bifidum was inoculated in 200 ml deMan-Rogosa-Sharp (MRS) broth, the cultured media incubated at 37°C in anaerobic conditions for 48-h, bacterial suspension were diluted serially 10 fold with MRS broth and turned in to 10⁻¹ to 10⁻⁸ into tubes (1 $\frac{ml}{tube}$). The tubes were stored at 4°C to be used later. The content of each tube with concentration 10⁸ ($\frac{cfu}{ml}$) was used as a unit of bacterial daily dose through oral gavage to each rat. The bacterial viability and its concentration were checked with the application of MRS agar plating during the storage period [10].

Animal and treatment

A total of 18 Wistare male rat (7-week-old) were purchased from Pasteur Institute (Iran) and were maintained in stainless steel cages with room temperature – controlled (22±2°C) with a 12h light/dark cycle and humidity 55±5%.

All the animals were fed on a standard diet for 1 week. After this adaptation period, the rats were assigned into three experimental groups randomly, each groups contains six rats according to the type of diet and test material. As shown in Table2, group1 (SD) was fed a standard diet and MRS broth (1 $\frac{ml}{day}$); group2(FSD) was fed a 1% cholesterol mixed to standard diet and MRS broth (1 $\frac{ml}{day}$); and group3 (FSD-LAB) was fed a 1% mixed to standard diet and MRS broth containing

Bifidobacterium bifidum
10⁸ – 10⁹ ($\frac{cfu}{ml}$) once a day.

Sampling and Analytical Procedures

At the first (8-week-old) and end (17-week-old) of the study, fasting blood samples were collected by jugular vein under diethyl ether anaesthesia. The serum was separated from the blood by centrifugation at 4.000 rpm for 10 min. The total-cholesterol(TC), high density lipoprotein-cholesterol(HDL-C), low density lipoprotein-cholesterol(LDL-C) and triglyceride levels in the serum were determined by an enzymatic colorimetric methods[11-13], using commercially analytic kits (Pars azmoon. Iran) and kinetic UV assay using a auto-analyser (Hitachi 707- Germany and Japan) in Lab (Noor Pathobiology. Iran).

Statistical analysis

All the data are presented as Mean±Standard Deviation (SD). Two T-test was used (spss version 17) to compare data before and after intervention in each group. P value of less than 0.05 showed statistical significance.

Table 2. Feeding schedules used in the present study

Groups	Rat	Food	Treatment (oral administration for 9 week)
SD	6	standard diet	sterilized MRS broth (1ml)
FSD	6	standard diet mixed 1% cholesterol	sterilized MRS broth (1ml)
FSD-LAB	6	standard diet mixed 1% cholesterol	sterilized MRS broth (1ml) containing LAB (10 ⁸ cfu)

Results

Triglycerides

Changes Triglyceride concentration in different groups is shown in Figure 1. The end of study in compared with start, the amount of Triglycerides showed meaningful statistical change in FSD group (P<0.05) but didn't show any statistical meaningful change in SD and FSD-LAB groups.

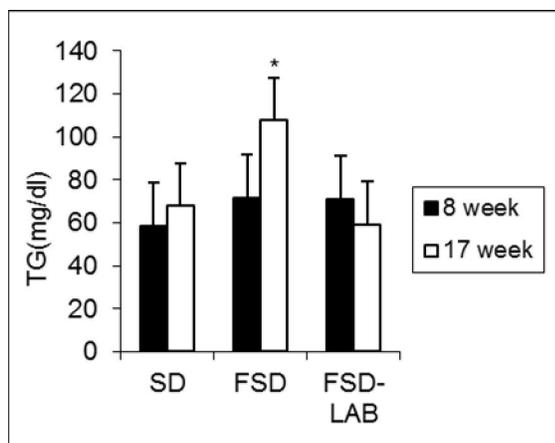


Figure 1: Effect of *B. bifidum* PTCC1644 on Triglyceride levels.

The entire animal was adapted to the standard diet for 1 week. Then the rats in group 1 to 3 received daily 1 ml MRS broth or MRS broth containing *B. bifidum* PTCC1644 ($10^8 - 10^9$ CFU/ml)

* $p < 0.05$ significantly different compared with 8 week

Total cholesterol

Table 3 shows the changes in Total cholesterol concentration. The amount of TC serum rats in FSD group showed significant increment in the increment of TC after 9 weeks (17 weeks than 8 weeks) ($P < 0.05$); but with spite of small reduction and increment of TC in SD and FSD-LAB groups, no meaningful statistical change was observed ($P > 0.05$).

Low – density lipoprotein cholesterol

Table 3 shows the changes in LDL-C concentration. During the study, the amount of LDL-C showed meaningful statistical change in FSD and FSD-LAB groups ($P < 0.05$); but in spite of small increment in LDL-C in SD group, no meaningful statistical change was observed ($P > 0.05$).

High – density lipoprotein cholesterol

Table 3 shows the changes in HDL-C concentration. The amount of HDL-C serum rats in FSD group showed meaningful change in the reduction of HDL-C after 9 weeks (17 weeks than 8 weeks) ($P < 0.05$); but in spite of small reduction of HDL-C in FSD-LAB and SD groups, no meaningful statistical change was observed didn't show any statistical meaningful change in SD and FSD-LAB groups ($P > 0.05$).

Discussion

Cardiovascular diseases are considered as the major reason of death globally [1]. Hypercholesterolemia is strongly associated with

coronary heart disease and atherosclerosis [14-16]. The risk of heart attack is increased three times higher with hypercholesterolemia, compared to those who have normal blood lipid profile [17]. Probiotics as an alternative biological method for chemical agents in managing the reduction of serum lipid levels have attracted much attention. The potential hypocholesterolemic activity of bacterial strains such as *Lactobacillus* sp. and *Bifidobacterium* sp. have been the focus of many studies [18-21]. In our study the effect of *B. bifidum* PTCC1644 in reduction of rat's Triglyceride level in FSD-LAB was observed when compared with FSD group. On the other hand, a small increment was observed in the amount of TC level in FSD-LAB in comparison with the beginning of study (week 8). But according to the increment of TC in FSD-LAB and FSD groups which were 3.52 % and 42.6% respectively at the end of the study (week 17), this finding shows that *B. bifidum* PTCC1644 might have a reduction effect on TC level. Investigating of HDL-C serum rats at the first (week 8) and end of (week 17) the study, although the reduction of HDL-C serum rats was observed in all groups, there was also lower reduction in FSD-LAB group in comparison with FSD (24.88% and 29.44% respectively), this finding shows that *B. bifidum* PTCC1644 might have an increment effect on HDL-C level. Investigating of LDL-C serum rats at the first (week 8) and end of (week 17) the study, showed an increment in the amount of LDL-C in all groups but there was also lower increment in FSD-LAB in comparison with FSD- groups (126/47% and 256.24% respectively), this finding shows that *B. bifidum* PTCC1644 might have a reduction effect on LDL-C level.

These results are in agreement with other studies.

Abeer et al results indicated that, supplementation with *Bifidobacterium* and *Lactobacillus acidophilus* alone and in combination significantly decreased the mean value of serum Total cholesterol, LDL-cholesterol and Triglycerides but increased HDL-cholesterol [19]. In other experiments, Hyang et al., it was shown that at the end of the 7-week experimental period, the *Bifidobacterium pseudocatenulatum* and *Bifidobacterium longum* slightly decreased the concentration of Total cholesterol, LDL-cholesterol and Triglycerides in rats [20]. In another study, Sadeq et al. showed that the yoghurt containing *Bifidobacterium pseudocatenulatum* G4 or *Bifidobacterium longum* BB536 can reduce the concentration of serum cholesterol, LDL-cholesterol and Triglycerides but increased HDL-cholesterol in rats [21].

Cholesterol reduction by lactic acid bacteria can be explained by many mechanisms: which contains enzymatic deconjugation of bile acids by bile- salt hydrolase of Probiotics [22]. Assimilation of cholesterol by Bifidobacterium sp[23]. Co- precipitation of cholesterol with deconjugated bile by Lactobacilli strains [24]. Cholesterol binding to cell walls of Lactobacilli strains and Bifidobacteria[25]. Incorporation of cholesterol into the cellular membrane of Lactobacilli strains during growth [26]. Conversion of cholesterol into coprostanol by Lactobacilli [27] and production of short-chain fatty acids upon fermentation by Lactococcus lactis KF147 In the presence of prebiotics[28]. In addition, strong effects B.bifidum PTCC1644 of toward the reduction of triglyceride levels was shown in this study.

Table 3 serum levels of Total cholesterol, HDL – cholesterol and LDL – cholesterol ($\frac{mg}{dl}$) in rats fed experimental diet

	8-week-old	17-week-old
Total cholesterol		
SD	70.5 \pm 6.9	67.83 \pm 8.1
FSD	56.33 \pm 3.8 ^a	80.33 \pm 10.9 ^a
FSD-LAB	66.16 \pm 8.8	68.5 \pm 9.6
LDL-cholesterol		
SD	12.00 \pm 2.2	13.66 \pm 2.2
FSD	10.66 \pm 1.3 ^a	38.00 \pm 10.2 ^a
FSD-LAB	11.33 \pm 2.7 ^b	25.66 \pm 8.5 ^b
HDL-cholesterol		
SD	43.00 \pm 4.2	36.83 \pm 4.9
FSD	34.00 \pm 3.0 ^a	24.00 \pm 5.1 ^a
FSD-LAB	37.5 \pm 5.9	28.16 \pm 8.2

¹SD, standard diet and MRS broth ($1 \frac{ml}{day}$); FSD, standard diet mixed 1% cholesterol and MRS broth ($1 \frac{ml}{day}$); FSD-LAB, standard diet mixed 1% cholesterol and MRS broth containing Bifidobacterium bifidum $10^8 - 10^9 (\frac{cfu}{ml})$ once a day.

Each value represents the Mean \pm SD of six rats. Means with similar small letters superscripts are significantly different ($P < 0.05$).

Conclusion

The finding of this study indicated that B.bifidum PTCC1644 can be effective in managing serum lipid profile and coronary heart disease by decreasing Total cholesterol, LDL-cholesterol and Triglyceride and slightly increasing HDL-cholesterol levels.

References:

1. Global status reported on noncommunicable disease 2010. Geneva, World Health Organization, 2011. Available at: http://www.who.int/nmh/publications/ncd_report_full_en.pdf
2. Bogers RP, Bemelmans WJ, Hoogenveen RT, Hoogenveen RT, Boshuizen HC, Woodward M, Knekt P, van Dam RM, Hu FB, Visscher TL, Menotti A, Thorpe RJ Jr, Jamrozik K, Calling S, Strand BH, Shipley MJ: Association of overweight with increased risk of coronary heart disease partly independent of blood pressure and cholesterol levels: a meta-analysis of 21 cohort studies including more than 300 000 persons. Arch intern Med 2007; 167(16):1720-8.
3. FAO/WHO: Guidelines for the evaluation of probiotics in food. Food and Agriculture Organization of the United Nations and World Health Organization Working Group Report. 2002. http://www.fao.org/es/ESN/food/foodandfood_probio_en.stm (accessed 11 December 2011).
4. Yong Zhang, Heping Zhang: The Effect of Probiotics on Lipid Metabolism. In Tech Open 2013. Available at: <http://dx.doi.org/10.5772/51938>
5. Guo Z, Liu XM, Zhang QX, Shen Z, Tian FW, Zhang H, Sun ZH, Zhang HP, Chen W: Influence of consumption of probiotics on the plasma lipid profile: A meta-analysis of randomised controlled trials. Nutrition, Metabolism & Cardiovascular Diseases 2011: 21(11):844-850.
6. Xiao JZ, Kondo S, Takahashi N, Miyaji K, Oshida K, Hiramatsu A, Iwatsuki K, Kokubo S, Hosono A: Effects of milk products fermented by Bifidobacterium longum on blood lipids in rats and healthy adult male volunteers. J Dairy Sci 2003, 86:2452-2461
7. Abd El-Gawad, I. A.; El-Sayed, E.M.; Hafez, S.A.; El-Zeini, H. M.; Saleh, F.A: The Hypocholesterolaemic Effect of Milk Yoghurt and Soy-Yoghurt Containing Bifidobacteria in Rats Fed on a Cholesterol-Enriched Diet. Int. Dairy J. 2005, 15, 37-44.
8. Ha, C.G.; Cho, J.K.; Lee, C.H.; Chai, Y.G.; Ha, Y.A.; Shin, S.H. Cholesterol Lowering Effect of Lactobacillus plantarum Isolated from Human Feces. J.Mol. Microbiol. Biotechnol. 2006, 16:1201-1209.
9. Jamalifar H, Bigdeli B, Nowroozi J, Zolfaghari H.S, Fazeli M.R: Selection for autochthonous bifidobacterial isolates adapted to simulated gastrointestinal fluid. Daru. 2010, 18(1):57-63

10. Saarela M, Rantala M, Hallamaa K, Nohynek L, Virkajärvi I, Mätö J. Stationary-phase acid and heat treatments for improvement of the viability of probiotic lactobacilli and bifidobacteria. *J Appl Microbiol.* 2004;96:1205–1214.
11. Artiss JD, Zak B: Measurement of cholesterol concentration. In: Rifai N, Warnick GR, Dominiczak MH, eds. *Handbook of lipoprotein testing*, Washington: AACC Press. 1997: 99-114.
12. Wiebe DA, Warnick GR: Measurement of high-density-lipoprotein cholesterol. In: Rifai N, Warnick GR, Dominiczak MH, eds. *Handbook of lipoprotein testing*, Washington: AACC Press. 1997: 127-144.
13. Bachelor PS: Measurement of low-density-lipoprotein cholesterol. In: Rifai N, Warnick GR, Dominiczak MH, eds. *Handbook of lipoprotein testing*, Washington: AACC Press. 1997: 145-160.
14. Lee YW, Roh WS and Kim JG: Benefits of fermented milk in rats fed by hypercholesterolemic diet (II). *Kor J Food Hyg* 1992;7:123–135
15. Anderson JW and Gilliland SE: Effect of fermented milk (yogurt) containing *Lactobacillus acidophilus* L1 on serum cholesterol in hypercholesterolemic humans. *J Am Coll Nutr* 1999, 18:43–50.
16. Law MR, Wald NJ, Wu T, Hackshaw A and Bailey A: Systematic underestimation of association between serum cholesterol concentration and ischaemic heart disease in observational studies. *BMJ.* 1994, 308(6925):363–366.
17. Lay-Gaik Ooi and Min-Tze Liong: Cholesterol-Lowering Effects of Probiotics and Prebiotics: A Review of in Vivo and in Vitro Findings. *Int. J. Mol. Sci.* 2010, 11, 2499-2522.
18. Aziz H, Laleh P, Aslan A: Effects of Probiotics on Lipide Profile. *Am. J. Food Technol.* 2012, 7(5): 251-265.
19. Abeer El, Sayed El, khamisy: Effect of *Bifidobacterium* and *Lactobacillus acidophilus* in diabetic rats. Lecturer of Home economic Department, Faculty of Specific Education, Suez Canal University. 2010.
20. Hyang Mi, Shin Young, Do Kyung, Min Kyeong, Si Won, Hyn Taeck, Kyung Jea, Nam Joo: Antiobesity and lipid-lowering effect of *Bifidobacterium* spp. In high fat diet-induced obese rat. *Lipid in Health and Disease.* 2011, 10:116
21. A sheraji, sadegh H, Ismail A, Manap Y, Mustafa S, Yosuf M, Hassan A: Hypocholesterolaemic effect of yoghurt containing *Bifidobacterium pseudocatenulatum* G4 or *Bifidobacterium longum* BB536. *Food chemistry.* 2012, 135: 356-361
22. Lye HS, Kuan CY, Ewe JA, Fung WY, Liong MT: The improvement of hypertension by probiotics: effects on cholesterol, diabetes, renin, and phytoestrogens. *Int. J. Mol. Sci.* 2009, 10: 3755-3775.
23. Beena A, Prasad V: Effect of yogurt and bifidus yogurt fortified with skim milk powder, condensed whey and lactosehydrolysed condensed whey on serum cholesterol and triacylglycerol levels in rats. *J. Dairy. Res.* 1997, 64:453-457.
24. Liong M.T, Shah N.P: Bile salt deconjugation ability, bile salt hydrolase activity and cholesterol co-precipitation ability of lactobacilli strains. *Int. J. Dairy.* 2005, 15: 391–398
25. Dora I. A. Pereira and Glenn R. Gibson: Cholesterol Assimilation by Lactic Acid Bacteria and Bifidobacteria Isolated from the Human Gut. *Appl. Environ. Microbiol.* 2002, 68(9):4689-4693.
26. Noh D.O, Kim S.H, Gilliland S.E: Incorporation of Cholesterol into the Cellular Membrane of *Lactobacillus acidophilus* ATCC 43121. *J. Dairy Sci.* 1997, 80(12): 3107-3113.
27. Lye H.S, Rusul G, Liong M.T: Removal of cholesterol by lactobacilli via incorporation and conversion to coprostanol. *J. Dairy Sci.* 2010, 93(4):1383-1392.
28. Wesam A. Hassanein, Nadia M. Awany and Shimaa M. Ibraheim: Reduction of cholesterol by *Lactococcus lactis* KF147. *Scholarly J. Biol. Sci.* 2013, 2(3): 30-38.

12/4/2012