

# RESEARCH OPINIONS IN ANIMAL & VETERINARY SCIENCES

# **Research Article**

# Microbial quality and chemical composition of traditional ice cream collected from Kermanshah province, Iran

Yasser Shahbazi\*, Afsaneh Ghobadian Emarat and Freshte Ebrahimi

Department of Food Hygiene and Quality Control, Faculty of Veterinary Medicine, Razi University, Kermanshah, Iran

Article history

Received: 12 May, 2015 Revised: 3 Jun, 2015 Accepted: 4 Jun, 2015

#### **Abstract**

The aim of the present study was to investigate microbial quality and chemical composition of sold ice cream in retail markets of different parts of Kermanshah city, west of Iran. A total 120 samples of traditional ice cream collected from different local markets (north, south, east, west and centre of city). Out of total 120 samples, 93 ice cream samples (77.5%) exceeded standard value of total bacterial count, which is  $5\times10^5$  CFU/g. In case of total *Enterobacteriacea* count, 81 samples (67.5%) crossed the standard value which is 100 CFU/g. Similarly, 27 samples (22.5%) and 57 samples (47.5%) were found crossing the standard value of Staphylococcal count (100 CFU/g) and *E. coil* (0 CFU/g), respectively. The mean values of the main components of ice cream were  $9.18\pm1.36\%$  fat,  $2.67\pm1.01\%$  protein,  $33.28\pm1.89$  total solids (%),  $0.64\pm0.01\%$  ash and  $9.56\pm2.29\%$  sucrose. Our findings indicate that traditional ice creams produced in different parts of Kermanshah city has poor microbiological quality. It is imperative that bacteriological standards be enforced in order to prevent traditional ice cream-borne diseases.

**Keywords:** Traditional ice cream; bacterial contamination; chemical composition; Kermanshah; Iran

**To cite this article:** Shahbazi Y, AG Emarat and F Ebrahimi, 2015. Microbial quality and chemical composition of traditional ice cream collected from Kermanshah province, Iran. Res. Opin. Anim. Vet. Sci., 5(5): 237-241.

## Introduction

In recent years, ice cream, a frozen milk based product, is one of the most popular milk based-products of dairy industry among children and adults especially during summer season throughout worldwide (ME-Elahi et al., 2002). In Iran, it is produced both in package (cups, cones and cartons) and in 'open' containers at the retail outlets or artisanal ice cream, which is distributed manually in scoops or cones across the counter. In general, this type of ice cream is manufactured in small-scale production unit, which do not follow completely a standard procedure for

production of ice cream (Ghasemi et al., 2009; Hazhir et al., 2005). The microbial quality of retail outlets or artisanal ice cream significantly depends on extrinsic factors that include the post production proper handling of the product as well as sanitary storage frozen conditions (Warke et al., 2000; Pooran et al., 2012).

EISSN: 2223-0343

Ice cream can be considered an excellent medium for growth of numerous pathogens such as *Listeria monocytogenes*, *Yersinia enterocolitica*, *Bacillus cereus*, *Staphylococcus aureus*, *Escherichia coli*, and *Salmonella* spp. due to its nutrient content (proteins, lipids, carbohydrates, minerals and vitamins), almost neutral pH (pH 6-7) and long storage period (Pietranera

\*Corresponding author: Yasser Shahbazi, Department of Food Hygiene and Quality Control, Faculty of Veterinary Medicine, Kermanshah, Iran; Email: yasser.shahbazi@yahoo.com; Tel: +98 83 38324042; Fax: +98 83 38320041

et al., 2003; Pooran et al., 2012). Pasteurization, freezing and hardening steps are the most important steps of the ice cream production that can eliminate most of these pathogens. However, due to lack of efficient frozen storage chain and also improper sanitation of equipment and environment during processing and handling, there is chance of microbial contamination after pasteurization of ice cream. As well as, any of contaminated ingredients such as eggs and eggs products stabilizer, scoop water, milk, cream, colouring material, flavours, fruits, nuts, sweetening agents can account for the various specific species of bacteria (Pietranera et al., 2003; Ahmed et al., 2009; Movassagh et al., 2011).

Several studies from different countries such as India (Warke et al., 2000), Republic of Korea (Jo et al., 2007), Trinidad and Tobago (Pooran et al., 2012), Costa Rica (Windrantz et al., 2000), Nepal (Joshi et al., 2004) and Turkey (Kanbakan et al., 2004) reported contamination of ice cream and identification revealed presence of pathogenic or fecal indicator bacteria that included S. aureus, E. coli, Klebsiella, Enterobacter, L. monocytogenes, Y. enterocolitica, B. cereus, and Salmonella spp. To date, the microbial contamination of ice cream has been studied in some parts of Iran (Ghasemi et al., 2009; Hazhir et al., 2005; Dabbagh Moghaddam et al., 2010; Movassagh et al., 2011; Rahimi et al., 2011). However, no data is available on the incidence of the most important food-borne bacteria such as S. aureus, E. coli, L. monocytogenes, Y. enterocolitica, B. cereus and Salmonella spp. and chemical composition in traditional ice cream collected from the different parts of Kermanshah province, west of Iran. Hence, the aim of the present study was to investigate microbial contamination (enumeration of bacteria count. Enterobacteriaceae Staphilococcal count and identification of S. aureus, E. coli, L. monocytogenes, Y. enterocolitica, B. cereus and Salmonella spp.) and chemical composition of sold ice cream in retail markets of different parts of Kermanshah city. The results of the current research will help to understand precisely the microbial quality of ice cream and whether the product conform to the specifications prescribed by the Iranian public health regulatory authority.

# **Materials and Methods**

In this study, a total 120 samples of traditional ice cream collected randomly from five different large local markets of Kermanshah province, west of Iran (north, south, east, west and centre of city). The samples were collected in an ice box and immediately taken to the laboratory where they were kept in deep freezer at -20°C, until they were examined for the bacteriological quality. Samples were kept at 4°C for 10

min until the microbiological analyses. Ten ml of each ice cream sample were diluted with 90 ml 0.1% peptone and plated on to Plate Count Agar (PCA; Merck). The plates were incubated at 30°C for 48 hours. Colonies were enumerated and total bacteria (colony forming unites) yield from each sample calculate. Enterobacteriaceae count was determined by the pour plate technique with an overlay using Violet Red Bile Glucose (VRBG) agar incubated at 37°C for 24h. Large purple colonies with the purple zone were counted as Enterobacteriaceae (Djenane et al., 2012). For detection of pathogenic bacteria, MacConkey Agar (coliforms), Eosin Methylene Blue Agar (EMB) (Escherichia coli), Baird-Parker Agar and Manitol salt Agar (S. aureus), Bacillus cereus selective Agar (B. cereus), Palcam Listeria Selective Agar (Listeria) were used (Wouafo et al., 1998). Salmonella were identified using ISO Standard 6579 method. In this method, firstly, the ice cream sample was thawed at 25°C, then, 9g of each sample was transferred to a sterile bag mixer containing 90ml sterile peptone water (Merck). After homogenization for 2min, the sample was incubated at 37°C for 24h. Then, 0.1ml portion of the incubated peptone water was added to 10ml Rappaport Vasiliadis broth (RV; Merck) medium and another 1ml portion of this medium (incubated peptone water) was added to 10ml Selenite Cystine broth (SC; Merck). RV broth was incubated for 24h at 41.5°C. As well as, SC broth was incubated for 24h at 37°C. After incubation, from the broths one loopful was subcultured on Brilliant green Phenol Red Lactose Agar (BPLS) (BPLS; Merck) and Bismuth Sulphite agar (BSA; Merck). The media were incubated at 37°C for 24h (for BPLS) and 48h (for BSA). Then, suspected colonies were transferred onto Salmonella-Shigella agar (SS; Merck) plates. After incubation of plates at 37°C for 24h, two or more typical Salmonella colonies were suspended in to biochemical identification media including Triple Sugar Iron agar (TSI; Merck), Simmons Citrate agar (Merck), Voges Proskauer (VP; Merck), Methyl Red (MR; Merck), Sulfide-Indole-Motility (SIM; Merck) and Urea agar (Merck). This bacterium causes a reddening of the slant and acidifies the depths of the TSI tube. The biochemical reaction of Salmonella in SIM, VP and Urea agar is negative. As well as, this bacterium is Simmons Citrate positive (Jamshidi et al., 2010). Fat content was assessed by Gerber method, total solids and ash contents were determined according to the modified method of AOAC (1998), the protein content was determined by Kieldahl method (AOAC, 1998) and total sugars by Lane and Eynon micrometric method of AOAC (1998).

# Statistical analysis

Data were verified and analyzed using SPSS for WINDOWS statistical software (version 16.0; SPSS

Inc, Chicago). Chi-square  $(x^2)$  Fishers exact test was employed to statistically evaluate the data.

#### **Results and Discussion**

Based on the result of Table 1, it was found that out total 120 samples, 93 ice cream samples (77.5%) exceeded standard value of total mesophilic aerobic count, which is  $5\times10^5$  CFU/g (Anonymous, 1992). In case of total Enterobacteriacea count, 81 samples (67.5%) crossed the standard value which is 100 CFU/g. Similarly, 27 samples (22.5%) and 57 samples (47.5%) were found crossing the standard value of Staphylococcal count (100 CFU/g) and E. coil (0 CFU/g), respectively. However, none of the samples were found to be contaminated with L. monocytogenes, Y. enterocolitica, B. cereus and Salmonella spp. (Table 2). The average counts for total mesophilic aerobic bacteria, Enterobacteriacea and Staphylococcus were found to be  $4.8 \times 10^6$ ,  $1.7 \times 10^3$  and  $1.2 \times 10^2$  CFU/g respectively. Our result also indicated Enterobacteriacea count was significantly high in north and south compared to the other localities. Similarly, Staphylococcus was also significantly low in west compared to the other locations. From the results obtained in the study, it was evident that more strict regulatory limitations and legislations must be used to reduce bacterial load of traditional ice cream in Kermanshah province. Moreover, good manufacturing practices as well as distribution and retail storage practices for ensuring microbiological safety of ice cream must was be applied. The high total bacterial count, Enterobacteriacea count and Staphylococcal count recorded in the present study agreed with those reported by other authors (Warke et al., 2000; Kanbakan et al., 2004: Ghasemi et al., 2009). It is noteworthy that Staphylococcus spp can enter into milk and various dairy products from food handlers either suffering from an acute pyogenic infection or being in a state of healthy carriers harbouring the organisms in nose or throat (ME-Elahi et al., 2002). Our results on the total bacterial and Enterobacteriacea count were higher than those of other findings in Iran (Javadi et al., 2011) and Turkey (Wilson et al., 1997). The use of nonpotable water and the disrespect to the hygienic rules during the production can be main reasons of microbial

contamination (Wouafo et al., 1998). High percentage of *Enterobacteriacea* family in the present study could be attributed to long time storage of ice cream mix under inappropriate environment before freezing (Pietranera et al., 2003).

Ice cream samples from west part of the city had significantly less (P<0.05) Staphylococcal count compared to those obtained from any other area. As shown in Table 1, significantly high total bacterial count was found in the north and south of the city. Staphylococcal count was significantly low in west compared to the other parts of the city. The low level of microbial contamination of ice cream collected from west part compared to other areas could be attributed to high sanitation and appropriate hygiene behaviour of ice cream handlers. However, this study shows that the overall microbial quality of traditional ice cream samples being sold in Kermanshah is poor.

Based on our finding, Vanilla flavoured ice cream was the most contaminated type of ice cream compared to the other three flavours (Table 3). For Vanilla ice cream, the average TBC was 9.00×10<sup>6</sup> CFU/g, whereas for chocolate, strawberry and saffron the bacterial count was  $8.02 \times 10^6$ ,  $2.97 \times 10^6$  and  $1.25 \times 10^6$  CFU/g respectively. The results of the present study agreed with those reported by other authors (Maifreni et al., 1999; Pooran et al., 2012). One of the most important reasons of high contamination of traditional ice cream is ingredients used in the preparation of ice cream that are potential sources of contamination (Reij et al., 2004). Enterobacteriacea and Staphylococcal count was high in chocolate (100 and 46.66% respectively) and lowest in saffron (40% and 3.33% respectively) as shown in Table 3. Similarly, the results also indicated that with decreasing temperature, the number of bacterial count also decreases (Table 4). High storage temperature of ice cream. especially those sold in open containers lead to multiplication of bacteria (El-Sharef et al., 2005). Warke et al. (2000) reported that during 10 days of frozen storage, L. monocytogenes counts grew to >1 log and 1 log cycle at 8-10°C and 2-4°C respectively.

The mean chemical components of ice cream samples collected from Kermanshah city, Iran are presented in Table 5.

Moreover, Table 6 shows the chemical composition of different flavours. There was no significant difference in chemical composition of

Table 1: The bacteriological status of the traditional ice cream samples (CFU/g)

Tuble 1. The bacteriological status of the traditional fee cream samples (CI C/g)								
		Total bacterial count (×10 <sup>6</sup> )		Enterobacteriacea count ( $\times 10^3$ )		Staphylococcal count (×10 <sup>2</sup> )		
Area	No	SV*	Average	SV*	Average	SV*	Average	
North	24	$5 \times 10^{5}$	$8.57^{a}$	$1 \times 10^{2}$	$2.20^{a}$	$1 \times 10^{2}$	$2.20^{a}$	
South	24		$9.75^{a}$		$2.97^{a}$		1.26 <sup>a</sup>	
East	24		1.87 <sup>b</sup>		$1.01^{a}$		1.25 <sup>a</sup>	
West	24		$1.20^{b}$		1.11 <sup>a</sup>		$0.25^{b}$	
Centre	24		$2.92^{b}$		$1.33^{a}$		1.25 a	

<sup>\*</sup>Standard Value (Anonymous, 1992); Different superscripts in a column differ significantly (P<0.05)

Table 2: Comparison of the bacteriological status of the traditional ice cream samples (CFU/g) with the standard value

No. of sample	TBC	Enterobacteriacea	S. aureus	E. coli	Salmonella	Listeria	Bacillus	Y. entrocolitica
samples exceeded standard (n)	93	81	27	57	0	0	0	0
Samples exceeded standard (%)	77.5	67.5	22.5	47.5	0	0	0	0

TBC: Total Bacterial Count.

**Table 3:** Frequency and counts of bacteria in ice cream by popular flavours (CFU/g)

Flavour	No	Total bacterial count		Enterobacteriacea		Staphylococcal count	
		No. exceeded Average		No. exceeded	Average	No. exceeded	Average
		standard	$(\times 10^{6)}$	standard	$(\times 10^{3)}$	standard	$(\times 10^2)$
Vanilla	30	29(96.66%)	$9.00^{a}$	19(63.33%)	$2.00^{a}$	14(46.66%)	$3.10^{a}$
Chocolate	30	28(96.66%)	$8.02^{a}$	30(100%)	$3.07^{a}$	9(30%)	$1.20^{a}$
Strawberry	30	20(66.66%)	$2.97^{\rm b}$	20(66.66%)	1.57 <sup>a</sup>	3(10%)	$2.20^{a}$
Saffron	30	16(53.33%)	1.25 <sup>b</sup>	12(40%)	$1.20^{a}$	1(3.33%)	$0.27^{b}$

Different superscripts in a column differ significantly (P<0.05)

**Table 4:** Microbial load of ice cream by temperature of product on purchase

			Average	
Range of temperature °C	No	Total bacterial count (×10 <sup>6)</sup>	Enterobacteriacea (×10³)	Staphylococcal count (×10²)
< -5.21	24	8.31 <sup>a</sup>	3.99 <sup>a</sup>	4.45 <sup>a</sup>
-5.22 to -6.3	24	$7.75^{a}$	1.99 <sup>b</sup>	2.25 <sup>b</sup>
-6.4 to -7.45	24	$6.62^{a}$	1.09 <sup>b</sup>	1.49 <sup>b</sup>
-7.46 to -8.7	24	5.67 <sup>a</sup>	$1.08^{b}$	1.21 <sup>b</sup>
< -8.8	24	$2.92^{b}$	$1.00^{b}$	$0.27^{c}$

Different superscripts in a column differ significantly (P<0.05)

Table 5: Average chemical composition of ice cream samples collected from Kermanshah city, Iran

	Fat (%)	Protein (%)	Total solids (%)	Ash (%)	Sucrose (%)
Samples	9.18±1.36	2.67±1.01	33.28±1.89	$0.64\pm0.01$	9.56±2.29
Standard value*	5-9.5	-	30-33.5	-	9-13

<sup>\*</sup> Standard Value (Anonymous, 1992)

**Table 6:** Effect of type of flavour on chemical composition of ice cream

Composition	Vanilla	Chocolate	Strawberry	Saffron
Fat (%)	$6.01\pm2.56^{a}$	$6.37\pm3.45^{a}$	$6.89\pm4.41^{a}$	$6.14\pm3.12^{a}$
Protein (%)	$2.34\pm1.10^{a}$	$2.45\pm0.89^{a}$	$2.89\pm1.71^{a}$	$2.89\pm0.97^{a}$
Total solids (%)	$34.62\pm2.89^{a}$	$36.89\pm4.67^{a}$	$32.75\pm2.89^{a}$	$32.25\pm3.66^{a}$
Ash (%)	$0.47\pm0.25^{a}$	$0.52\pm0.34^{a}$	$0.55\pm0.34^{a}$	$0.46\pm0.26^{a}$
Sucrose (%)	9.17±1.21 <sup>a</sup>	$8.98\pm1.87^{a}$	9.15±1.87 <sup>a</sup>	9.21±1.03 <sup>a</sup>

Same superscripts in a column do not differ significantly (P>0.05).

different flavours. Generally, these levels are in accordance with other authors (El Owni et al., 2009; El-Sharef et al., 2005). Moreover, the chemical composition of the ice cream falls within the standard values indicating that the microbial contamination may probably due to unhygienic conditions.

#### Conclusion

Our findings indicate that traditional ice cream collected from different parts of Kermanshah city represent a significant vehicle for human pathogenic bacteria. Moreover, the present study shows the substandard microbiological quality of open/artisanal ice cream and encourages the consumers to shift to the packed/industrial ice cream with consistently good quality.

#### References

Ahmed K, Hussain A, Imran QM, Hussain W (2009) Microbiological quality of ice cream sold in Gilgit town. Pak J Nutr 8: 1397-1400.

AOAC (1998) Association of Official Analytical chemist. Official Methods of Analysis, 16th ed. Washington, D.C. pp: 17-21.

Anonymous (1992) Institute of Standard and Industrial Research of Iran. Ice cream-Specifications and test methods. National Standard. 5th. Revision. No. 2450. pp: 20-22.

Dabbagh Moghaddam A, Madad Jirhandeh S, Akbarein H, Ghanbari Sagharlou N (2010) A bacteriological survey on traditional ice creams in retailers of Rasht (Guilan province, North of Iran) in spring of 2009. J Vet Lab Res 2: 141-150.

- Djenane D, Aïder M, Yangüela J, Idir L, Gómez D, Roncalés P (2012) Antioxidant and antibacterial effects of *Lavandula* and *Mentha* essential oils in minced beef inoculated with *E. coli* O157: H7 and *S. aureus* during storage at abuse refrigeration temperature. Meat Sci 92: 667-674.
- El-Sharef N, Ghenghesh KS, Abognah YS, Gnan SO, Rahouma A (2005) Bacteriological quality of ice cream in Tripoli, Libya. Food Control 17: 637-641.
- El Owni OAO, Zeinab KK (2009) Chemical composition of ice cream produced in Khartoum State, Sudan. Pak J Nut 8: 158-160.
- Ghasemi MSA, Azadnia P, Maghsoodi A (2009) Comparison of the Microbial quality of traditional Ice cream produced by small scale manufactures in Kazeroon with the Iranian National standard. Res J Bio Sci 4: 925-927.
- Hazhir M, Rashidi K, Senoubar TN, Reshadmanesh N, Mofareh N (2005) Assessment of the types and rate of contamination in traditional ice-cream in Kurdistan province and its relationship to environmental and personal health care. Sci J Kurdistan Uni Med 10: 53-60.
- Jamshidi A, kalidari GA, Hedayati M (2010) Isolation and identification of Salmonella enteritidis and Salmonella typhimurium from the eggs of retail stores in Mashhad, Iran using conventional culture method and multiplex PCR assay. J food Safety 30: 558-568.
- Javadi A, Safarmashaei S (2011) Faecal coliforms and faecal streptococci contamination of traditional Ice cream in Tabriz. Am Eurasian J Agric Environ Sci 11: 812-814.
- Jo C, Kim HJ, Kim DH, Lee WK, Ham JS, Byun MW (2007) Radiation sensitivity of selected pathogens in ice cream. Food Control 18: 859-865.
- Joshi DR, Shah PK, Manandhar S, Sharma S, Banmali P (2004) Microbial quality of ice cream sold in Kathmandu. J Nepal Health Res Counc 2: 37-40.
- Kanbakan U, Con AH, Ayar A (2004) Determination of microbiological contamination sources during ice cream production in Denizli, Turkey. Food Control 15: 463-470.

- ME-Elahi ATM, Habib S, Rahman MM, Rahman GI, Bhuiyan MJU (2002) Sanitary quality of commercially produced ice cream sold in the retail stores. Pak J Nutr 1: 93-94.
- Maifreni M, Civilini M, Domenis C, Manzano M, Di Prima R, Comi G (1999) Microbiological quality of artesanal ice cream. Int J Hyg Environ Med 194: 553-570.
- Movassagh MH, Movassagh A, Mahmoodi H, Servatkhah F, Sourorbakhsh MR (2011) Microbiological contamination of the traditional chocolate Ice cream sold in the Northwest Region of Iran. Global Vet 6: 269-271.
- Pietranera MA, Narvaiz P, Horak C, Kairiyama E (2003) Irradiated ice creams for immunosuppressed patients. Radiat Phys Chem 66: 357-365.
- Pooran A, Seepersadsingh N, Georges K, Adesiyun AA (2012) Evaluation of the bacteriological quality of ice cream sold in Trinidad. J Food Agric Environ 10: 39-45.
- Rahimi E, Ameri M, Momtaz H (2010) Prevalence and antimicrobial resistance of *Listeria* species isolated from milk and dairy products in Iran. Food Control 21: 1448-1452.
- Reij MW, Den Aantrekker ED (2004) ILSI Europe Risk Analysis in microbiology task force. Recontamination as a source of pathogens in processed foods. Int J Food Microbiol 91: 1-11.
- Warke R, Kamat A, Kamat M, Thomas P (2000) Incidence of pathogenic *Psychrotrophs* in ice creams sold in some retail outlets in Mumbai, India. Food Control 11: 77-83.
- Wilson IG, Heaneg JC, Weathrup ST (1997) The effect of ice cream scoop water on the hygiene of ice cream. Epidemiol Infect 119: 38-40.
- Windrantz P, Arias ML (2000) Evaluation of the bacteriological quality of ice cream sold at San Jose, Costa Rica. Arch Lat Nutr 50: 301-303.
- Wouafo MN, Njine T, Tailliez R (1998) Hygiene and microbiological quality of ice cream produced in Cameroon. A problem of public health. Bull Soc Pathol Exot 89: 358–362.