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# **RESEARCH ARTICLE**

## **Antibacterial Effect of Different Concentrations of Silver Nanoparticles**

ABSTRACT

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#### ARTICLE HISTORY (17-327)

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Silver has been in use since time immemorial in the form of metallic silver, silver nitrate, silver sulfadiazine for the treatment of burns, wounds and several bacterial infections. Silver has long been known to show a strong antimicrobial effect to microorganisms. The antimicrobial effect of 30 and 100 ppm silver nanoparticles were investigated against Escherichia coli, Staphylococcus aureus, Salmonella typhimurium, Enterococcus faecalis, Bacillus cereus, Bacillus subtilis, Paenibacillus larvae, Candida albicans and Aspergillus niger. The microorganisms were diluted with sterile distilled water and prepared dilutions of 10<sup>6</sup> of test microorganisms. Dilutions of microorganisms cultured to blood agar base and incubated at 37°C for 24 hours. One mL dilution of 106 of all of microorganisms was centrifuged at 3500 rpm for 20 minutes then 30 and 100 ppm of silver nanoparticle solutions were added. Samples were inoculated in blood agar for different time intervals i.e., 0, 2, 5, 10, 30, 60 minutes and 24 hour. Antibacterial activity of silver nanoparticles against various microorganisms was detected at 0, 2, 5, 10, 30, 60 minutes and 24 hours. As results, yeast, fungi and bacteria were inhibited at 30 and 100 ppm. But, P. larvae were not inhibited, while B. subtilis also could not be inhibited at 30 ppm. The antibacterial activity of 100 ppm was stronger than the antibacterial activity of 30 ppm of nanoparticles. Nanosilver is very effective to important pathogens.

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### INTRODUCTION

Silver is used in medical and surgical equipment such as endotracheal tubes, surgical meshes, catheters, dental filling materials, bandages, medical dressings and a topical cream to prevent burn-associated infections (Silver, 2003). Silver has long been known to show a strong antimicrobial effect to microorganisms (Liau et al., 1997). The nanosilver is effective against bacteria resistant to antibiotics, fungi and virus (Feng et al., 2000; Radzig et al., 2013). Silver nanoparticles are reported to be effective against fungi and bacteria as well as multidrug-resistant bacteria i.e., Escherichia coli (E. coli), Staphylococcus aureus (S. aureus), Pseudomonas aeruginosa (P. aeruginosa), Proteus vulgaris (P. vulgaris), Bacillus subtilis (B. subtilis), Aspergillus niger (A. niger), Candida albicans (C. albicans), Penicillium citrinum (Pen. citrinum) (Kim et al., 2007; Lara et al., 2010; Marambio-Jones and Hoek 2010; Lalueza et al., 2011).

Silver nanoparticles show great antibacterial effectiveness on important foodborne pathogens (include: *Escherichia coli* O157:H7, *Listeria monocytogenes, Salmonella typhimurium* and *Vibrio parahaemolyticus*) (Zhang *et al.*, 2016). Also, nanosilver has antifungal effect on *Candida albicans, Candida glabrata, Candida crusei, Candida parapsilosis* and *Trichophyton mentagrophytes* (Kim *et al.*, 2008). Silver nanoparticles have antiviral effect on human immunodeficiency virus-I (Lara *et al.*, 2010) and herpes simplex (Barm-pinto *et al.*, 2009).

Silver has been used as in creams, wound dressing, different medical devices, food containers, and water disinfection for antimicrobial agent. The new strains of bacteria were resistant to antibiotics. Therefore, new bactericides were development. The nanosilver is very effective for multidrug-resistant bacteria (Morones *et al.*, 2005).

Silver in ionized form or in nanoparticles have got excellent antimicrobial, antifungal activities and was used for coating medical devices for preventing biofilm formation by pathogenic bacteria, water purification, (Bandyopadhyay *et al.*, 2008; Chang *et al.*, 2008; El-Naggar *et al.*, 2016) and wound dressing for the promotion of healing (Feng *et al.*, 2000; Abboud *et al.*, 2014).

In this study, antimicrobial effect of 30 and 100 ppm silver nanoparticles were determined against *E. coli, S. aureus, S. typhimurium, Ent. faecalis, B. cereus, B. subtilis, P. larvae, C. albicans, A. niger.* We detected antibacterial effect of nanosilver on *P. Larvae*, which causes American foulbrood for honeybees the first time. We compared the efficacy of 30 and 100 ppm concentrations of silver.

## MATERIALS AND METHODS

Escherichia coli (ATCC 25922), Staphylococcus aureus (ATCC 25923), Salmonella typhimurium (CCM 5445), Enterococcus faecalis (ATCC 29212), Bacillus cereus (ATCC 6633), Bacillus subtilis (ATCC 6051), Paenibacillus larvae (ATCC 25747), Candida albicans (ATCC 90028), Aspergillus niger (Clinical isolate, Uludag University, Medicine Faculty) were used for of antibacterial and antifungal activity of nanosilver. Bacteria and C. albicans were purchased from American Type Culture Collection (ATCC). The activity of nanosilver on P. larvae was determined for the first time in this study. E. coli, S. aureus, S. typhimurium, Ent. faecalis, B. cereus, B. subtilis, P. larvae and C. albicans were incubated in Fluid Thioglycollate Medium at 37°C for 24 hours and A. niger at 37°C for 7 days. The cells were washed twice and centrifuged at 3500 rpm for 20 minutes then suspended in distilled water, obtaining a final concentration of 10<sup>6</sup> cells/100 ml (Sondi and Salopek-Sondi, 2004). Each culture was divided into two replicates. The cultures were then supplemented with 100 µl of 30 ppm and 100 ppm nanosilver solutions, respectively. Samples with different concentration of nanosilver were inoculated on blood agar at the exposure time of 0, 2, 5, 10, 30, 60 minutes and 24 hours. The cultures were incubated at 37°C for 24 hours. The number of bacteria was determined by counting the colonies.

Table I: Microorganisms and inhibition periods (30 ppm of nanosilver)

Antifungal effect of nanosilver for A. niger was determined according to The National Committee for Clinical Laboratory Standards (NCCLS) M29 method. A. niger was incubated Potato dextose agar at 37°C for 7 days. After, A. niger was inoculated to 1 ml of 0.85% sterile saline and, added 0.01 ml of Tween 20. Suspension of A. niger was homogenized with vortex for 15 seconds Spacciapoli et al. (2001). 1 ml dilution of 106 of A. niger was centrifuged at 3500 rpm for 20 minutes. A 100 µl of 30 and 100 ppm silver solutions were added to two different cultures. Samples with nanosilver were inoculated on Potato Dextrose Agar (Bragg and Rannie, 1974) at 2, 5, 10, 30, and 60 minutes. The cultures were incubated at 37°C for 7 days. Plates without silver nanoparticles were used as negative control. We counted microorganisms growing on plates as colonies following Ki-Young et al. (2007) and Samarajeewa et al. (2017).

### **RESULTS AND DISCUSSION**

Thirty ppm of nanosilver solution inhibited the growth of *S. typhimurium* in 2 minutes. *E. coli, S. aureus, A. niger, C. albicans, Ent. faecalis* and *B. cereus* were inhibited on different time intervals of the exposure. But *S. aureus* was not inhibited in 24 hours time interval of exposure. *P. larvae* were not inhibited even in 60 min and 24 hours exposure. *Bacillus subtilis* was not inhibited by 30 ppm of nanosilver solution. Micro-organisms and inhibition periods are shown in Table 1.

*Ent. faecalis, S. typhimurium, B. cereus* and, *C. albicans* were inhibited by 100 ppm of nanosilver within 2 minutes. *E. coli* did not grow at 10 minutes. *S. aureus* were inhibited at 5 minutes. *A. niger* and *B. subtilis* were not inhibited in the first 10 minutes but lost activity completely after 30 minutes. *P. larvae* were inhibited in the first 30 minutes and 24 hours. Microorganisms and inhibition periods are shown in Table 2.

Susceptibility to nanosilver is depended on the concentration. *P. larvae* inhibited in the first 30 minutes but it was not inhibited by 30 and 100 ppm of nanosilver solutions.

Microorganism	Starting	Decrasing values of microorganisms (Kob/ml)						
	number of	0. min	2.min	5. min	10 min	30. min	60. min	24 hours
	microorganism	Kob/ml	Kob/ml	Kob/ml	Kob/ml	Kob/ml	Kob/ml	Kob/ml
	kob/ml							
E.coli	106	6x10 <sup>6</sup>	5.1 × 10 <sup>6</sup>	1.2 × 10 <sup>6</sup>	No growth	No growth	No growth	No growth
ATCC 25922								
Staphylococcus aureus	106	6x10 <sup>6</sup>	$6 \times 10^{2}$	No growth	No growth	No growth	No growth	6x10 <sup>2</sup>
ATCC 25923								
Salmonella	106	No growth	No growth	No growth	No growth	No growth	No growth	No growth
typhimurium								
CCM 5445								
Enterococcus faecalis	106	5×105	1.84 x10⁵	No growth	No growth	No growth	No growth	No growth
ATCC 29212								
Bacillus cereus	106	8x10 <sup>3</sup>	8.2×10 <sup>3</sup>	9.4×10 <sup>3</sup>	8.5×10 <sup>3</sup>	No growth	No growth	No growth
ATCC 6633								
Bacillus subtilis	106	10 <sup>9</sup>	109	10 <sup>9</sup>	109	109	10 <sup>9</sup>	109
ATCC 6051								
Paenibacillus larvae	106	No growth	No growth	No growth	No growth	No growth	6x10 <sup>6</sup>	2×104
ATCC 25747								
Candida albicans	106	6x10 <sup>3</sup>	No growth	No growth	No growth	2x10 <sup>2</sup>	No growth	No growth
ATCC 90028								
Aspergillus niger	1 0 <sup>6</sup>	6x10 <sup>6</sup>	4 × 10 <sup>3</sup>	2.1 × 10 <sup>3</sup>	$1.2 \times 10^{3}$	No growth	No growth	No growth
Clinical isolate								

Microorganism	Starting number	Decrasing values of microorganisms (Kob/ml)							
	of microorganism	0. min	2.min	5. min	10 min	30. min	60. min	2424 hours	
	kob/ml	Kob/ml	Kob/ml	Kob/ml	Kob/ml	Kob/ml	Kob/ml	Kob/ml	
Escherichiae coli	106	10 <sup>6</sup>	I,2 × I0⁴	5,0 × 10 <sup>2</sup>	No growth	No growth	No growth	No growth	
ATCC 25922									
Staphylococcus aureus	106	106	4,0 × 10 <sup>2</sup>	No growth	No growth	No growth	No growth	No growth	
ATCC 25923									
Salmonella typhimurium	106	106	No growth	No growth	No growth	No growth	No growth	No growth	
CCM 5445									
Enterococcus faecalis	106	106	No growth	No growth	No growth	No growth	No growth	No growth	
ATCC 29212									
Bacillus cereus	106	106	No growth	No growth	No growth	No growth	No growth	No growth	
ATCC 6633									
Bacillus subtilis	106	106	2 × 10 <sup>6</sup>	1,7 × 10 <sup>6</sup>	1,2 × 10 <sup>6</sup>	I× 106	No growth	No growth	
ATCC 6051									
Paenibacillus larvae	106	106	No growth	No growth	No growth	No growth	7.2× 10 <sup>3</sup>	1.3x10 <sup>2</sup>	
ATCC 25747									
Candida albicans	106	106	No growth	No growth	No growth	No growth	No growth	No growth	
ATCC 90028									
Aspergillus niger	106	1 O <sup>6</sup>	3,2 × 10 <sup>3</sup>	2,1 × 10 <sup>3</sup>	1,2 × 10 <sup>3</sup>	No growth	No growth	No growth	
Clinical isolate									

Esherichia coli, Staphlococcus aureus, Aspergillus niger, Candida albicans, Enterococcus faecalis and Bacillus cereus were inhibited in different time intervals (minutes).

*P. larvae* inhibited the first 30 minutes but after it was not inhibited by 30 and 100 ppm of nanosilver solutions. Nanosilver was not effective for *P. larvae. E. faecalis, S. typhimurium, B. cereus and, C. albicans* were inhibited by 100 ppm of nanosilver within 2 minutes. We did not detect growth on plates. *E. coli* did not grow at 10 minutes. *S. aureus* were inhibited at 5 minutes. *A. niger* and, *B. subtilis* were not inhibited in first 10 minutes but it lost activity completely after 30 minutes.

The antibacterial activity of 100 ppm of nanoparticles was stronger than the antibacterial activity of 30 ppm of nanoparticles. But *P. larvae* were not inhibited after 60 minutes and 24 hours by both nanoparticle solutions. *B. subtilis* was not inhibited by 30 ppm nanosilver. *S. aureus* was inhibited at 5, 10, 30, 60 minutes but it was grown in 24 hours.

In one study, different concentrations of silver on *E. coli* were investigated in vitro. According to the research, it was determined that nano silver at 10 µg/cm<sup>3</sup> concentration was effective at 70% on 10<sup>5</sup> CFU of *E. coli*. 50-60 µg/cm<sup>3</sup> nanosilver concentration was effective for 100%. In the same study, 20 µg/cm<sup>3</sup> of nano silver completely inhibited 10<sup>4</sup> CFU of *E. coli*. As the number of bacteria decreased, nano silver was effective at lower concentrations (Yoon *et al.*, 2007). 70 µg/mL concentration of silver nanoparticles were found to be effective on *B. subtilis* and *E. coli*. *B. subtilis* was found to be more susceptible to silver than *E. coli* (Ki-Young *et al.*, 2007).

In another study, antimicrobial effect of a commercial nanosilver product, NanoCidR L2000, against some foodborne pathogens was evaluated. The MIC values of Ag NPs against tested pathogens were in the range of 3.12-6.25 µg/mL. While *Listeria monocytogenes* showed the MIC value of 6.25 µg/mL, *Escherichia coli* O157:H7, *Salmonella typhimurium* and *Vibrio parahaemolyticus* all showed the MIC values of 3.12 µg/mL. However, all the pathogens showed the same MBC value of 6.25 µg/mL (Zarei *et al.*, 2014). Sixty-five bacterial isolates were isolated from 40 diabetic patients, *S. aureus* (37%) and *P.* 

*aeruginosa* (18.5%) were the predominant isolates in the ulcer samples. Squilla chitosan silver nanoparticles (Sq. Cs-Ag(0)) showed the maximum activity against the resistant bacteria (El-Naggar *et al.*, 2016).

Thirty ppm of nanosilver solution inhibited *Salmonella typhimurium* in 2 minutes. These results are similar to our research findings.

**Conclusions:** The antibacterial activity of 100 ppm of nanoparticles was stronger than the antibacterial activity of 30 ppm of nanoparticles. Nanosilver is very effective to important pathogens. Antimicrobial activity of nanosilver can be used for pathogens.

Author contribution: AEB helped in study design, conduction of the laboratory investigations, collection of data and manuscript preparation. MEG helped in conduction of laboratory investigations and collection of data.

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