

ISSN-0976-0245 (Print) • ISSN-0976-5506 (Electronic)

Volume 11

Number 01

January 2020



Indian Journal of Public Health Research & Development

An International Journal

Website:
www.ijphrd.com

XII

155. A Study on Work Life Balance and Stress of Female Employees in IT Sector: A Study with Special Reference to Employees in Chennai.....829
Mary Sudharshini Fernando, M. Kavitha
156. Effectiveness of Sublingual Versus Oral Misoprostol for Induction of Labour at Term834
Rekha Parimkayala, Shraddha Shetty K.
157. Study of Death among Children Below Five Years of Age and its Relation with Socio Economic Status and Place of Residence Using Verbal Autopsy as a Tool in Deharadun.....839
Sushil Dalal, Kiran Pande, Md Abu Bashar
158. Impact of Body Mass Index and Age on Mental Health of Adolescents Girls843
Reeta Venugopal, Priyamvada Srivastava, Aniksha Varoda, Mahendra Kumar
159. Early Childhood Caries and its Prevalence among the Preschool Children's Attending the Anganwadi's at Ukkali Vijayapura District, Karnataka India850
Shardha Bai Rathod, Anand V. Nimbale, Padmashree S., Sanjeev Khanagoudra, Ishwar B. Bagoji, G.A. Hadimani
160. Knowledge, Attitude and Practices of Biomedical Waste Management among Dental Practitioners in Karad City, Maharashtra, India856
Surabhi Mahajan, Shivakumar K.M., Vidya Kadashetti
161. Exploring the Role of Hatha Yoga in Altering Dispositional Mindfulness862
Teesta Saksena, Ritu Sharma, Ishwar V. Basavaraddi
162. Morphometry of Acromion Process of Scapula with Respect to Gender.....868
Pushpa N.B., Roshni Bajpe, Pushpalatha K., Deepabhat
163. Evaluation of Knowledge and Attitude of Undergraduate Medical and Dental Students towards Integrative Medicine and Integrative Dentistry: A Questionnaire Study874
Jaber Emad Mohamed, Ishita Mittal, Sukanya Goswami, Swathi Pai, Vishal Bhat
164. Antibacterial Activity of Combination between Probiotic Milk and Mango Honey Against Streptococcus Mutans.....879
Inaarah Waachidah Azzulfiyyah, Isnaeni, Noor Erma
165. Prevalence of Premarital Sex among Adolescents in Kulende, Sango in Ilorin South Local Government Area, Kwara State, Nigeria.....884
Oniyangi, Shuaib Olanrewaju, Jamiu Abdul Qudus Tosin, Umar Ibrahim Babangida, Ahmad Makama Getso, Sindama Helen
166. Perceived Effect of Sleep Deprivation on the Health of Undergraduates in Kwara State University, Malete, Nigeria889
Oniyangi, Shuaib Olanrewaju, Jamiu Abdul Qudus Tosin, Umar Ibrahim Babangida, Ahmad Makama Getso, Sindama Helen
167. Noise Relationship with Complaints of Disorders of Hearing in Crafts Industry with Iron in Parigi Moutong District.....894
Abdul Hamid, Abdul Rohim Tualeka



Indian Journal of Public Health Research & Development

www.ijphrd.com

Contents

Volume 11, January 01

January 2020

1. Study Protocol: A Randomised Controlled Trial on Effectiveness of a Worksite Health Intervention on Common Musculoskeletal Problems and Work-Related Quality of Life (WRQoL) among Female Workers in the Garment Manufacturing Sectors 1
A. Santham Lilly Pet, Timsi Jain, Bobby Joseph, Pethuru Devadason, Gayathri M
2. Health of the Elderly in India: A Socio-Legal Study 7
Arti, J.K. Mittal
3. General Awareness of Diabetes Mellitus among a Hospital Population in Chennai: A Survey 12
Sridhar M., Abilasha Ramasubramanian
4. Vitamin D Deficiency in Rural Area of Gautam Buddh Nagar: An Observational Study 16
Vijay Deepak Verma, Ajai Kumar Garg, Suresh Babu, Ashish Satyarathi
5. Identifying the Status of Menstrual Hygiene Management 20
Amrita Shilpi, Rajasree Roy, Gobina, Spriha Roy
6. Effect of Strengthening of Scapular Stabilizers in Treatment of Rounded Shoulder Posture in Dental Students 27
Ankita M. Patil, Sayali Gijare
7. Elder Abuse in Indian Setting—A Misconception or a Reality— A Deductive Analysis 31
Anusha Rashmi, Linda Sequeira, Prianka Shashi Kumar, Rashmi
8. A Study on Women Entrepreneurs Dealing Through Stress 35
Archana R.V., K. Vasanthi Kumari
9. Effect of Bilateral Scapular Muscles Strengthening on Dynamic Balance in Post Stroke Individuals 38
Arpan Dhoka, G. Varadharajulu
10. In Vitro Antibacterial and Anticancer Study of Bioactive Compounds Isolated from Punica Grantum Peel. 45
Arunava Das, J. Bindhu, M. Bharath, Nithin Johnson, M. Jeevanantham
11. A Study on Utilization of Primary Health Care Services among the People Residing in a Semi-Urban Area 53
B. Charumathi, D. Jayashri, S. Manisha, Aadithya, C. Hemanthkumar, Timsi Jain
12. An Empirical Relationship between Stress and Job Performance: A Study with Private School Teachers 57
D.S. Premalatha, S. Subramanian

Antibacterial Activity of Combination between Probiotic Milk and Mango Honey Against *Streptococcus Mutans*

Inaaroh Waachidah Azzulfiyyah¹, Isnaeni¹, Noor Erma¹

¹Chemistry Pharmacy, Faculty of Pharmacy, Universitas Airlangga, Dharmawangsa Dalam Street No.4 - 6, Airlangga, Surabaya (60286), Indonesia

Abstract

Background: *Streptococcus mutans* commonly found in oral cavity and can be a pathogenic bacteria that leads to dental caries. Rinsing the oral cavity with antibiotic oral therapy is not suggested as the treatment of dental caries, because it has side effects. It can cause resistance of *Streptococcus mutans* towards antibiotic.

Objective: To analyze the antibacterial activity of honey of mango, prebiotic milk, and the combination of both against *Streptococcus mutans* bacteria

Method: The antibacterial activity test was performed by agar diffusion method with Müeller Hinton agar medium to determine the minimal inhibitory concentration inhibition (MIC). A study had been conducted on the antibacterial activity of the combination of honey of mango and probiotic milk of *Lactobacillus paracasei* ATCC BAA52 on the growth of *Streptococcus mutans*. Fermented milk was made by inoculating *Lactobacillus paracasei* ATCC BAA52 fermented milk, mango honey and their combination at optimum ratio (propotion) into fresh milk at 45°C, then incubated for 24 hours at room temperature

Result: The result of probiotic milk characterization showed that the pH of probiotic milk decreased compared to fresh milk from from pH 6.33 to 3.89. Furthermore, the MIC of each samples against *Streptococcus mutans* were determined

Conclusion: Combination between mango honey (*Mangifera indica*) and probiotic mlik (*Lactobacillus paracasei* ATCC BAA52) can give optimum anti bacteria activities against *Streptococcus mutans*

Keywords: Antibacterial activity, probiotik milk of *Lactobacillus paracasei* ATCC BAA52, Mango Honey, *Streptococcus mutans*.

Introduction

Streptococcus mutans is a facultative anaerobic bacterium, gram positive cocci bacterium. It is commonly found in human oral cavity and being the most pathogenic bacteria which causes dental caries⁽¹⁾. The characteristics of *S. mutans* are acidogenic, which produces acid, acidoduric, which is capable surviving in

an acid environment, and capable to produce a sticky polysaccharide, called dextran. *S. mutans* can adhere to the dental enamel and promote other acidoduric bacteria towards dental enamel, which leads to dental caries⁽¹⁾.

Rinsing the oral cavity with liquid containing antibiotic is one of solution to prevent dental caries. Unfortunately, it can not prevent dental caries completely because it has side effect that leads to that antibiotic resistance⁽²⁾. To avoid the antibiotic resistance, scientists nowadays develop extracts and biological active compounds isolated from nature that used for herbal medicine⁽³⁾.

Exploring the probiotics usage is one of the ways to resolve that problem. Probiotic contains hydrogen

Correspondence Author:

Isnaeni

Chemistry Pharmacy, Faculty of Pharmacy, Universitas Airlangga, Dharmawangsa Dalam Street No.4 - 6, Airlangga, Surabaya (60286), Indonesia
e-mail: akhmadkusumaW@gmail.com
Phone Number: +6281999201024

peroxide (H_2O_2), organic acids, and peptide compounds namely bacteriocin which are active as antibacterial⁽⁴⁾. Probiotic milk *Lactobacillus paracasei* has ability to inhibit the growth of pathogenic bacteria *S. mutans* in its host⁽⁵⁾. Consuming probiotics regularly can inhibit the growth *S. mutans* without causing side effects.

In addition to probiotics, currently it has been developed the treatment using natural ingredients that have activity as antimicrobial, on of which using honey. Honey is a sweet liquid that derived from plant nectar, which processed by bees and stored in honeycomb cells⁽⁴⁾. The high concentration of sugar in honey, which is 38.5% fructose, can cause hypertonic condition that promotes bacterial cell plasmolysis. It results inhibiting bacterial growth and promoting bacterial cell death⁽⁶⁾. The carbohydrates in honey are in the form of reducing sugars, which are glucose and fructose, with minimum content is 65%⁽⁷⁾.

Both probiotic milk and honey have antibacterial activity with different mechanism⁽⁸⁾. Probiotic milk *Lactobacillus paracasei* contains hydrogen peroxide (H_2O_2), organic acids, and peptide compounds namely bacteriocin which are active as antibacterial⁽⁹⁾. Honey also has ability to inhibit the growth of pathogenic bacteria, such as *E. coli*, *Listeria monocytogenes*, and *S. aureus*, which is influenced by the concentration of reducing sugars and high concentration of sucroses in honey⁽⁶⁾.

Probiotic milk *Lactobacillus paracasei* and honey of mango *Mangifera indica* have a different ingredient, which is active as antibacterial. This study will observe the antibacterial activity of combination of probiotic milk *Lactobacillus paracasei* and honey of mango *Mangifera indica* in various ratio, then it will be found the combination of both ingredients in certain ratio which has maximum antibacterial activity⁽¹⁰⁾. The purpose of this study is to observe the best ratio of mango honey and probiotic milk to impede the growth of *mutans*.

Materials and Method

Materials: The samples includes, *Lactobacillus paracasei* ATCC BAA52 honey mangoes and *Streptococcus mutans*. The media was *de Man Ragosa Sharpe Agar* (MRS) (Himedia Lab), Müeller Hinton Agar (OXOID), NaCl (Pa Merch), clindamycin antibiotic (p.g.) as positive control group, and sterile distilled water from the Microbiology Laboratory.

Equipment: The equipment that used in this study were analytic scales (Sartorius BL10S), incubator (Menmert), Öse (Sengkelit), ring (Silinder), vernier caliper (Jason), vortex (Maxi Mix II Type 37600), micro pipette (Socorex), autoclaf (Huxley HL-340), spectrophotometer (Parkin Elmer Lambda EZ201), ependorf, shaker, colony counter, centrifuge (EBA 20), Oswald viscosity-meter, Cup and Bob viscosity meter, pH meter (Schott glass mainz tipe CG 842), laminar air flow cabinet, petri dish and the other laboratory glassware.

Results

Table 1: The minimum inhibitory concentration of probiotic *Lactobacillus paracasei* against *Streptococcus mutans* in various concentrations (% v/v)

Probiotic Milk Concentration (% v/v)	The diameter of inhibitory zone against <i>Streptococcus mutans</i> (mm)			Mean \pm SD
	Replication 1	Replication 2	Replication 3	
100	15,35	16,40	15,75	15,38 \pm 0,53
90	14,10	14,95	15,05	14,70 \pm 0,52
80	11,75	12,05	11,55	11,78 \pm 0,25
70	11,60	11,85	11,05	11,50 \pm 0,41
60	11,05	11,75	10,80	11,20 \pm 0,49
55	11,00	10,50	10,45	10,65 \pm 0,30
Control (+)	26,75	26,70	27,20	26,88 \pm 0,28

The results showed the minimum inhibitory concentration of probiotic milk *Lactobacillus paracasei* against *Streptococcus mutans* is 10.65 + 0.30 mm at concentration 55%. It can be interpreted if the

concentration of probiotic milk *Lactobacillus paracasei* was less than 55%, so it could not inhibit the growth of *Streptococcus mutans*.

Table 2: The minimum inhibitory concentration of honey of mango in various concentration (% v/v)

Concentration of honey of mango (% v/v)	The diameter of inhibitory zone against <i>Streptococcus mutans</i> (mm)			Mean + SD
	Replication 1	Replication 2	Replication 3	
50	14,80	16,55	17,35	16,23 + 1,30
25	13,50	13,20	12,00	12,90 + 0,79
12,5	-	-	-	-
6,2	-	-	-	-
3,1	-	-	-	-
1,6	-	-	-	-
Control (+)	26,75	26,70	27,20	26,88 + 0,28

The result shows that the minimum inhibitory concentration of honey of mango was 10,40 + 0,96 mm at concentration 17.5% against the growth of *Streptococcus*

mutans. It can be interpreted if the concentration of honey of mango solution that was less than 17.5%, could not inhibit the growth of *Streptococcus mutans*.

Table 3: The minimum inhibitory concentration of honey of mango in various concentration (% v/v)

Concentration of honey of mango (% v/v)	The diameter of inhibitory zone against <i>Streptococcus mutans</i> (mm)			Mean + SD
	Replication 1	Replication 2	Replication 3	
22,5	11,95	11,80	12,40	12,13 + 0,24
20	11,50	11,20	10,05	10,91 + 0,77
17,5**	9,50	11,40	10,30	10,40 + 0,96
15	-	-	-	-
Control positive	26,75	26,70	27,20	26,88 ± 0,28

The measurement diameter of inhibitory zone of combination honey of mango and probiotic milk *Lactobacillus paracasei* against tested bacterial in various concentration is displayed in Table 5 and Figure 4. The test of antibacterial activity of the combination honey of mango and probiotic milk *Lactobacillus paracasei*

was conducted at ratio 1:9, 2:8, 3:7, 4:6, 5:5, 6:4, 7:3, 8:2, 9:1. The antibacterial activity was determined by the clear zone around hole, that could be measured. To obtain the combination which had maximal antibacterial activity could be done by measuring the diameter of inhibitory zone using Vernier Caliper⁽⁹⁾.

Table 4. The antibacterial activity of the combination honey of mango and probiotic milk *Lactobacillus paracasei* against *Streptococcus mutans* at various ratio (% v/v)

The ratio of (% v/v) honey of mango solution 50% : probiotic milk	Diameter of Inhibitory Zone (mm)			Mean	SD
	Replication 1	Replication 2	Replication 3		
1:9	15,75	14,50	15,40	15,22	0,64
2:8	14,10	16,35	14,20	14,88	1,27
3:7	15,15	15,65	15,30	15,37	0,25
4:6	12,50	12,90	13,50	12,97	0,50
5:5	14,80	14,10	16,10	15,00	1,01
6:4	14,30	16,15	14,40	14,95	1,04
7:3	16,05	15,95	16,35	16,12	0,21
8:2**	17,35**	16,90**	17,10**	17,12**	0,22**
9:1	15,30	16,85	17,50	16,55	1,13
Honey of mango solution 50%	14,80	16,55	17,35	16,23	1,30
Probiotic milk <i>L. paracasei</i> 100%	12,95	14,50	14,15	13,87	0,81
Control positive	18,15	18,10	18,10	18,12	0,03

Discussion

The result of this research shows the positivity. The combination of honey of mango and probiotic milk *L. paracasei* at the ratio 8:2 showed the optimum antibacterial activity against *S. mutans*, with diameter of inhibitory zone as $17,12 \pm 0,22$ mm. Based on statistical analysis using one way ANOVA, the combination honey of mango and probiotic milk *L. paracasei* at the ratio of 8: 2 did not show a significant difference in antibacterial activity compared to the inhibition zone of 50% honey of mango solution. Despite the diameter of inhibition zone of probiotic milk *L. paracasei* is greater than the diameter of inhibition zone of a honey of mango solution. However, when compared to the inhibitory zone of probiotic milk *L. paracasei*, there were significant differences in antibacterial activity⁽¹¹⁾.

The result shows that there was a decrease in the diameter of the inhibition zone along with the decreasing concentration of honey of mango. It can be seen from the diameter of the inhibition zone produced by 50% and 25% honey of mango of 13.03 ± 0.15 mm and 13.03 ± 0.57 respectively. While the concentration honey of mango below 25% did not produce antibacterial activity. The test results showed that the MIC of mango honey solution to *S. mutans* was at a concentration of 17.5% with a inhibition zone diameter of 10.40 ± 0.96 mm.

After that, the determination of MIC in probiotic milk *L. paracasei* was carried out at various concentrations, namely at concentrations of 100%, 90%, 80%, 70%, 60%, 55%, 50%, 45%, 25%, 12.5%, 6.2%, 3.1% and 1.6%. In the result was found that the MIC of probiotic milk *L. paracasei* against *S. mutans* was at a concentration of 55%, with a inhibition zone diameter of 10.65 ± 0.30 mm. By knowing the MIC of probiotic milk *L. paracasei* at a concentration of 55%, it proved that probiotic milk *L. paracasei* has a smaller antibacterial activity compared to honey of mango which has MIC at a concentration of 17.5%⁽¹²⁾.

The result showed the combination honey of mango and probiotic milk *L. paracasei* at the selected ratio was 25% with inhibition zone diameter 13.03 ± 0.57 mm against *S. mutans*. When compared to MIC each sample of honey of mango and probiotic milk *L. paracasei*, it can be said that the combination of honey of mango and probiotic milk *L. paracasei* at the selected ratio has a minimum inhibitory concentration greater than honey of mango⁽¹³⁾. But it is lower than the concentration minimum inhibition of probiotic milk *L. paracasei*. Then

the optimum combination characterization was carried out, which included organoleptic (color, taste odor), pH, viscosity and specific gravity⁽¹⁴⁾. Based on the results of the selected combination characterization it has a pH of 3.89 ± 0.00 , the viscosity is 5.33 ± 0.390 cps and the specific gravity is 1.096 ± 0.000 g/mL.

In the combination of honey of mango and probiotic milk *L. paracasei* at the optimum ratio 8:2, there was a synergistic effect even though the concentration of probiotic milk was less than honey of mango⁽¹⁴⁾. It caused by honey of mango containing more sources which can be used as an energy for probiotic bacteria *L. paracasei*. In a combination honey of mango and probiotic milk *L. paracasei*, honey of mango can play a role in two things, namely as an energy source for probiotic milk bacteria *L. paracasei* or can inhibit the growth of probiotic milk bacteria *L. paracasei*⁽¹⁵⁾. This study examines the effect honey of mango on the growth of probiotic bacteria *L. paracasei*, proved that mango honey did not inhibit the growth of probiotic bacteria *L. paracasei*.

The analysis of antibacterial activity in this study using diffusion method, because of its advantages. This method is quite simple, does not require long time and preparation, and can also be used to see the sensitivity of antibacterial samples at certain concentration of various types of tested bacteria⁽¹⁶⁾. The standard solution used in this study was clindamycin with a concentration of 0.01 ppm which was previously optimized for the antibacterial activity of clindamycin with various concentrations of *S. mutans*⁽³⁾. A concentration of 0.01 ppm was chosen because at concentrations above 0.01 ppm clindamycin produced a diameter of the inhibition zone that was too large which could lead to difficulty of measuring the diameter of the sample inhibition zone. Clindamycin is chosen as a standard solution or positive control because it is an effective antibacterial used to cure tooth damage due to the growth of Streptococci bacteria⁽¹⁷⁾.

Conclusion

Based on the results of this study, it can be concluded that the Minimum Inhibitory Concentration (MIC) of probiotic milk *Lactobacillus paracasei* ATCC BAA52 on *Streptococcus mutans* was 55%, with inhibition zone diameter of 10.65 ± 0.30 mm. Minimum Inhibitory Concentration (MIC) of honey of mango solution against *Streptococcus mutans* was 17.5%, with inhibition zone diameter 10.40 ± 0.96 mm.

Minimal Inhibition Concentration (MIC) combination of honey of mango (*Mangifera indica*) and probiotic milk *Lactobacillus paracasei* ATCC BAA52 at a ratio of 8: 2 to *Streptococcus mutans* by 25% with inhibition zone diameter 13.03 ± 0.57 mm.

Ethical Clearance: This research process did not involve any participant in the survey, but instead using agar diffusion method in laboratory in accordance with the ethical research principle based on the regulation of research ethic committee. The present study was carried out in accordance with the research principles. This study implemented the basic principle ethics of respect, beneficence, non-maleficence, and justice.

Conflict of Interest: There is no report about any conflict related with this author's research.

Source of Funding: This study is funded by the author self only.

References

1. Hamada S, Slade HD. Biology, immunology, and cariogenicity of *Streptococcus mutans*. *Microbiol Mol Biol Rev. Am Soc Microbiol*; 1980;44(2):331–84.
2. Addy M. Oral hygiene products: potential for harm to oral and systemic health? *Periodontol* 2000. Wiley Online Library; 2008;48(1):54–65.
3. Yadav NR, Garla BK, Reddy VK, Tandon S, Prasad S. Antimicrobial Effect of Honey on *Streptococcus Mutans* of Dental Plaque. *J Oral Heal Community Dent*. 2014;8(2).
4. Bogdanov S, Jurendic T, Sieber R, Gallmann P. Honey for nutrition and health: a review. *J Am Coll Nutr. Taylor & Francis*; 2008;27(6):677–89.
5. Truusalu K, Naaber P, Kullisaar T, Tamm H, Mikelsaar R-H, Zilmer K, et al. The influence of antibacterial and antioxidative probiotic lactobacilli on gut mucosa in a mouse model of *Salmonella* infection. *Microb Ecol Health Dis. Taylor & Francis*; 2004;16(4):180–7.
6. Mundo MA, Padilla-Zakour OI, Worobo RW. Growth inhibition of foodborne pathogens and food spoilage organisms by select raw honeys. *Int J Food Microbiol. Elsevier*; 2004;97(1):1–8.
7. Watanabe T, Katayama S, Matsubara M, Honda Y, Kuwahara M. Antibacterial carbohydrate monoesters suppressing cell growth of *Streptococcus mutans* in the presence of sucrose. *Curr Microbiol. Springer*; 2000;41(3):210–3.
8. HERMAWATI AH. AKTIVITAS KOMBINASI MADU MANGGA dan SUSU PROBIOTIK SEBAGAI ANTIBAKTERI TERHADAP *Staphylococcus aureus* ATCC 6538 dan *Escherichia coli* ATCC 8739 PENELITIAN EKSPERIMENTAL LABORATORIS. Universitas Airlangga; 2016.
9. Mufida L, Setijanto RD, Palupi R, Bramantoro T, Ramadhan C, Ramadhani A. Caries and dental and oral hygiene profile of drug (narcotics and dangerous drugs) users at drug rehabilitation centers. *J Int Oral Heal. Medknow Publications*; 2019;11(7):6.
10. Yudaniayanti IS, Primarizky H, Nangoi L. The effects of honey (*Apis dorsata*) supplements on increased bone strength in ovariectomized rat as animal model of osteoporosis. In: AIP Conference Proceedings. AIP Publishing; 2018. p. 20004.
11. Samot J, Badet C. Antibacterial activity of probiotic candidates for oral health. *Anaerobe. Elsevier*; 2013;19:34–8.
12. Israili ZH. Antimicrobial properties of honey. *Am J Ther. LWW*; 2014;21(4):304–23.
13. PANGESTU L. DAYA HAMBAT PROBIOTIK TERHADAP PERTUMBUHAN KOLONISASI *Streptococcus mutans*. Universitas Airlangga; 2017.
14. Steinberg D, Kaine G, Gedalia I. Antibacterial effect of propolis and honey on oral bacteria. *Am J Dent*. 1996;9(6):236–9.
15. Li P, Gatlin III DM. Dietary brewers yeast and the prebiotic Grobiotic™ AE influence growth performance, immune responses and resistance of hybrid striped bass (*Morone chrysops* × *M. saxatilis*) to *Streptococcus iniae* infection. *Aquaculture. Elsevier*; 2004;231(1-4):445–56.
16. Liang C-C, Park AY, Guan J-L. In vitro scratch assay: a convenient and inexpensive method for analysis of cell migration in vitro. *Nat Protoc. Nature Publishing Group*; 2007;2(2):329.
17. Lee SS, Zhang WU, Li Y. The antimicrobial potential of 14 natural herbal dentifrices: results of an in vitro diffusion method study. *J Am Dent Assoc. Elsevier*; 2004;135(8):1133–41.

Indian Journal of Public Health Research & Development

EXECUTIVE EDITOR

Prof. Vidya Surwade

Deptt. of Community Medicine, Dr Baba Saheb Ambedkar, Medical College & Hospital, Rohini, Delhi

INTERNATIONAL EDITORIAL ADVISORY BOARD

1. **Dr. Abdul Rashid Khan B. Md Jagar Din**, (*Associate Professor*)
Department of Public Health Medicine, Penang Medical College, Penang, Malaysia
2. **Dr. V Kumar** (*Consulting Physician*)
Mount View Hospital, Las Vegas, USA
3. **Basheer A. Al-Sum**,
Botany and Microbiology Deptt, College of Science, King Saud University,
Riyadh, Saudi Arabia
4. **Dr. Ch Vijay Kumar** (*Associate Professor*)
Public Health and Community Medicine, University of Buraimi, Oman
5. **Dr. VMC Ramaswamy** (*Senior Lecturer*)
Department of Pathology, International Medical University, Bukit Jalil, Kuala Lumpur
6. **Kartavya J. Vyas** (*Clinical Researcher*)
Department of Deployment Health Research,
Naval Health Research Center, San Diego, CA (USA)
7. **Prof. PK Pokharel** (*Community Medicine*)
BP Koirala Institute of Health Sciences, Nepal

NATIONAL SCIENTIFIC COMMITTEE

1. **Dr. Anju D Ade** (*Professor*)
Community Medicine Department, SVIMS, Sri Padamavati Medical College, Tirupati,
Andhra Pradesh.
2. **Dr. E. Venkata Rao** (*Associate Professor*) Community Medicine,
Institute of Medical Sciences & SUM Hospital, Bhubaneswar, Orissa.
3. **Dr. Amit K. Singh** (*Associate Professor*) Community Medicine,
VCSG Govt. Medical College, Srinagar – Garhwal, Uttarakhand
4. **Dr. R G Viveki** (*Associate Professor*) Community Medicine,
Belgaum Institute of Medical Sciences, Belgaum, Karnataka
5. **Dr. Santosh Kumar Mulage** (*Assistant Professor*)
Anatomy, Raichur Institute of Medical Sciences Raichur(RIMS), Karnataka
6. **Dr. Gouri Ku. Padhy** (*Associate Professor*) Community and Family
Medicine, All India Institute of Medical Sciences, Raipur
7. **Dr. Ritu Goyal** (*Associate Professor*)
Anaesthesia, Sarswati Institute of Medical Sciences, Panchsheel Nagar
8. **Dr. Anand Kalaskar** (*Associate Professor*)
Microbiology, Prathima Institute of Medical Sciences, AP
9. **Dr. Md. Amirul Hassan** (*Associate Professor*)
Community Medicine, Government Medical College, Ambedkar Nagar, UP
10. **Dr. N. Girish** (*Associate Professor*) Microbiology, VIMS&RC, Bangalore
11. **Dr. BR Hungund** (*Associate Professor*) Pathology, JNMC, Belgaum.
12. **Dr Sartaj Ahmad**, PhD Medical Sociology, *Associate Professor*,
Swami Vivekananda Subharti University Meerut UP India
13. **Dr Sumeeta Soni** (*Associate Professor*)
Microbiology Department, B.J. Medical College, Ahmedabad, Gujarat, India

NATIONAL EDITORIAL ADVISORY BOARD

1. **Prof. Sushanta Kumar Mishra** (*Community Medicine*)
GSL Medical College – Rajahmundry, Karnataka
2. **Prof. D.K. Srivastava** (*Medical Biochemistry*)
Jamia Hamdard Medical College, New Delhi
3. **Prof. M Sriharibabu** (*General Medicine*) GSL Medical College, Rajahmundry,
Andhra Pradesh
4. **Prof. Pankaj Datta** (*Principal & Prosthodontist*)
Indraprastha Dental College, Ghaziabad

NATIONAL EDITORIAL ADVISORY BOARD

5. **Prof. Samarendra Mahapatro** (*Pediatrician*)
Hi-Tech Medical College, Bhubaneswar, Orissa
6. **Dr. Abhiruchi Galhotra** (*Additional Professor*) Community and Family
Medicine, All India Institute of Medical Sciences, Raipur
7. **Prof. Deepti Pruthvi** (*Pathologist*) SS Institute of Medical Sciences &
Research Center, Davangere, Karnataka
8. **Prof. G S Meena** (*Director Professor*)
Maulana Azad Medical College, New Delhi
9. **Prof. Pradeep Khanna** (*Community Medicine*)
Post Graduate Institute of Medical Sciences, Rohtak, Haryana
10. **Dr. Sunil Mehra** (*Paediatrician & Executive Director*)
MAMTA Health Institute of Mother & Child, New Delhi
11. **Dr Shailendra Handu**, *Associate Professor*, Phrma, DM (Pharma, PGI
Chandigarh)
12. **Dr. A.C. Dhariwal**: *Directorate* of National Vector Borne Disease
Control Programme, Dte. DGHS, Ministry of Health Services, Govt. of
India, Delhi

Print-ISSN: 0976-0245-Electronic-ISSN: 0976-5506, Frequency: Quarterly
(Four issues per volume)

Indian Journal of Public Health Research & Development is a double blind peer reviewed international journal. It deals with all aspects of Public Health including Community Medicine, Public Health, Epidemiology, Occupational Health, Environmental Hazards, Clinical Research, and Public Health Laws and covers all medical specialties concerned with research and development for the masses. The journal strongly encourages reports of research carried out within Indian continent and South East Asia.

The journal has been assigned International Standards Serial Number (ISSN) and is indexed with Index Copernicus (Poland). It is also brought to notice that the journal is being covered by many international databases. The journal is covered by EBSCO (USA), Embase, EMCare & Scopus database. The journal is now part of DST, CSIR, and UGC consortia.

Website : www.ijphrd.com

©All right reserved. The views and opinions expressed are of the authors and not of the Indian Journal of Public Health Research & Development. The journal does not guarantee directly or indirectly the quality or efficacy of any product or service featured in the advertisement in the journal, which are purely commercial.

Editor

Dr. R.K. Sharma
Institute of Medico-legal Publications
Logix Office Tower, Unit No. 1704, Logix City Centre Mall,
Sector- 32, Noida - 201 301 (Uttar Pradesh)

Printed, published and owned by

Dr. R.K. Sharma
Institute of Medico-legal Publications
Logix Office Tower, Unit No. 1704, Logix City Centre Mall,
Sector- 32, Noida - 201 301 (Uttar Pradesh)

Published at

Institute of Medico-legal Publications
Logix Office Tower, Unit No. 1704, Logix City Centre Mall,
Sector- 32, Noida - 201 301 (Uttar Pradesh)