

Microwave heat treatment application to pasteurization of human milk

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1 **Abstract**

2 A prototype of microwave pasteurizer has been proposed as an alternative for holder
3 pasteurization (HP) routinely used in Human Milk Bank (HMB), ensuring
4 microbiological safety of human milk (HM). It was shown that the time of heat
5 generation was about 15-16 min shorter by applying the microwave than in HP. Total
6 inactivation of heat-sensitive bacteria *Escherichia coli*, *Pseudomonas aeruginosa*,
7 *Staphylococcus aureus*, and *Staphylococcus epidermidis*, suspended in milk, occurred
8 in the temperature 62-72°C in HP. In the case of heat-resistant enterococci the level of
9 inactivation depended on the conditions of the process and the properties of the
10 strains. The application of microwave heating allows to obtain lower D-value than
11 those achieved during HP. The using of microwave heating at 62.5 or 66°C for 5 or 3
12 min, respectively, allows to inactivation of HM microbiota. Appropriate
13 microbiological quality of milk is critical for the effectiveness of the pasteurization
14 process.

15 **Industrial relevance:** Looking for new methods of donor human milk (HM)
16 preservation is dictated by the necessity of providing microbiological safety and, at
17 the same time, maintain its high nutritional and biological value. The holder
18 pasteurization used in the Human Milk Banks (HMB) (heating at 62°C for 30 min)
19 leads to inactivation of all vegetative forms of microorganisms. Unfortunately, this
20 method causes significant reduction of health benefitting properties of HM. The paper
21 demonstrates the possibility of using the new microwave pasteurizer for preservation
22 of HM, allowing for quick heating of milk to the appropriate temperature and
23 maintaining it in these conditions for a required time. It was shown that the decimal
24 reduction times (D) for strains inoculated to UHT or human milk are several times
25 shorter by using microwave heating than in the commercial pasteurization method.
26 The total inactivation of HM microbiota is obtained after heating at 62.5 and 66°C for
27 5 and 3 min, respectively.
28
29 **Keywords:** microbiota of human milk; microwave pasteurization; enterococci;
30 decimal reduction time; holder pasteurization

31 1. Introduction

32 Breastfeeding is unquestionably the best way of feeding newborns and infants.
33 Composition of HM is perfectly adapted in quality and quantity of compounds to the
34 needs of developing children at every stage of their growth. Breast milk provides not
35 only the basic nutrients but also is the source of biological components increasing the
36 child's immunity against bacteria and viruses. A newborn does not yet have a mature
37 immune system, so this first food supplements these deficiencies.

38 There are situations when a baby cannot be directly fed with its mother's milk.
39 This regards to especially premature infants, fed in the initial period only
40 intravenously, and children with extremely low birth weight or health problems. Then
41 it is essential to collect and appropriately preserve the breast milk, so that a baby can
42 be fed with it in the chronological order. This task is carried out at the HMB. HM is
43 not a sterile product and contains microorganisms, which are commonly found in
44 mammary glands and on the skin of the mother. Among them sometimes are
45 pathogenic species such as, for example, *S. aureus*. Inappropriate handling of milk
46 can also lead to cross-contamination. In many studies the incidental presence of
47 microorganisms in milk, such as *Escherichia coli*, *Klebsiella* sp. (Eja, Asikong, Udo,
48 Mbotto, & Arikpo, 2006), *Acinetobacter* (*Acinetobacter baumannii*, *Acinetobacter*
49 *lwoffii*, *Acinetobacter haemolyticus*), *Citrobacter freundii*, *Serratia liquefaciens* and
50 aerobic gram-positive bacilli (Kamianowska, Szczepański, Bebko, Kamianowski, &
51 Milewski, 2008), *Listeria monocytogenes* (Svabic-Vlahovic, Pantic, Pavicic, &
52 Bryner, 1988) or rickettsia *Coxiella burnetii* (Kumar, Yadav, & Kakkar, 1981) has
53 been noted. Milk intended for the beneficiaries of HMB should not contain any
54 pathogens and viruses. For this reason, milk in HMB is usually pasteurized at 62.5°C
55 for 30 min (it is so-called holder pasteurization). Heating in these conditions leads to



56 eliminating potentially dangerous microorganisms (viruses and pathogenic vegetative
57 bacteria) from HM. It is carried out in special pasteurizers that make it possible to
58 control the pasteurization process and rapid cooling of the milk to 4°C. The
59 conditions (temperature, time) of holder pasteurization were adopted on the basis of
60 researches conducted at the turn of the XIX/XX century. Based on these studies, in
61 1924, Public Health Reports defined pasteurization as a heating process at
62 temperature not less than 61.1°C by 30 min (Holsinger, Rajkowski, & Stabel, 1997)
63 and was called Low-Temperature-Long-Time (LTLT) pasteurization. This method
64 allows for the effective elimination of most vegetative pathogenic microorganisms,
65 however, leads to a significant decrease of the content of many nutrients and bioactive
66 milk components. Therefore, to guarantee microbiological safety and simultaneously
67 to maintain the high nutritional and biological value of HM, new techniques of
68 preservation are searched for. An alternative method may be the use of High-
69 Temperature-Short-Time (HTST) pasteurization. The possibility of using HTST
70 pasteurization, which would allow for better preservation of biochemical properties of
71 HM than LTLT pasteurization, is rarely tested because of the lack of the necessary
72 equipment for such processing of small amounts of HM (Jensen & Jensen, 1992). The
73 use of HTST rather than LTLT pasteurization is dictated by the principle, which says
74 that the microorganisms are destroyed faster than nutrients during rising of the
75 temperature of pasteurization. This phenomenon is used in food processing, where the
76 goal is to replace the heating at lower lethal temperatures in a longer time with
77 heating at high temperatures and in a shorter time to achieve the same biological
78 effect. This procedure contributes to the protection of nutrients during the heat
79 pasteurization process.



80 The aim of these studies was determination of survival of selected bacterial
81 strains inoculated into cow milk – (UHT, 3.2% of fat) or into sterilized HM (as a
82 model condition), and microbiota of HM, after microwave HTST pasteurization at
83 different temperatures and comparison with traditional HP. A specially designed
84 microwave pasteurizer (Enbio Technology – prototype) was used in these studies.
85 This device differs from common microwave ovens because it allows for
86 pasteurization of small volumes of milk in strictly programmed time (several seconds)
87 at a given temperature. This device has the function of rapid cooling of milk and self-
88 cleaning option. In addition, all experiments were carried out under conditions that
89 can be applied at HMB.

90 **2. Material and methods**

91 **2.1. Materials**

92 UHT milk with a fat content of 3.2% from one manufacturer was purchased from a
93 local market. Mature milk was collected from healthy mothers who gave birth on the
94 scheduled date and without complications at the Department of Obstetrics of the
95 Clinical Hospital in Gdańsk. All newborns were in good health (Apgar score of 9 -
96 10) with normal birth weight (3100 ÷ 3800 g). The collected milk was pooled, divided
97 into 50 mL samples and heated at different conditions.

98 All of the experimental procedures were approved by the Local Ethics
99 Committee of the Medical University of Gdansk. The patients gave written consent to
100 participate in the study.

101 **2.2. Cultures and growth conditions**

102 The following bacterial strains were used: *Escherichia coli* K-12 PCM2560 (NCTC
103 10538), *Pseudomonas aeruginosa* PCM499, *Staphylococcus aureus* PCM 2054
104 (ATCC 25923), *Staphylococcus epidermidis* PCM 2118, *Enterococcus faecalis*



105 PCM896 and PCM1861, as well as *Enterococcus hirae* PCM2559 and *Enterococcus*
106 *durans* PCM1857 from the Polish Collection of Microorganisms, Ludwik Hirszfeld
107 Institute of Immunology and Experimental Therapy of the Polish Academy of
108 Sciences, Wrocław, Poland.

109 The cultures in stationary phase were prepared by inoculating 100 mL of TSB
110 (tryptic soy broth) with 100 μ L of liquid culture (at stationary phase of growth) and
111 incubating it at 37 °C for 24 h with shaking.

112 **2.3. Preparation of cell suspensions**

113 The cells in the stationary phase of growth were resuspended in UHT milk or in HM,
114 previously sterilized at 121°C for 20 min, to give viable counts of about 10⁵ CFU/mL
115 of the final concentration. The size of the inoculum has been determined on the basis
116 of the maximum microbial contamination of human milk that is accepted in HMB
117 (Arslanoglu et al., 2010; Malinowska-Pańczyk & Rosiak, 2017).

118 **2.4. Microwave heating**

119 The samples of milk (50 mL) in breastmilk bottles (Medela Ltd.) were placed into the
120 chamber of microwave pasteurizer. The milk was pasteurized using the prototype
121 EnbioJet Microwave Flow Pasteurizer (Enbio Technology Co., Kosakowo, Poland)
122 dedicated to small volume of liquid products (Patent Application no. PL 384854).
123 This equipment allows on quick heating of a small volume of milk, and rigorous
124 control of temperature and process time. The samples were heated at temperature
125 from the range of 62.5 - 72°C for 0, 1, 3, 5 and 10 min, and then were automatically
126 cooled to about 15°C. Triplicate determinations were made for each time and
127 temperature.

128 **2.5. Holder pasteurization**



129 Milk was pasteurized following the procedure of the Human Milk Banking. The
130 samples (50 mL) in breastmilk bottles (Medela Ltd.) were placed in a water bath,
131 heated to 62.5-72°C and keep at this temperature for 0 (immediately after reaching the
132 set temperature), 10, 20 and 30 min. The temperature of milk during heat processing
133 was monitored using a calibrated thermometer placed into control bottle, containing
134 the same volume of non-contaminated milk, and heated in a water bath with all the
135 other samples. After the heat processing, the milk was rapidly cooled in an ice bath
136 and stored prior to determination of viable counts. Untreated samples were used as
137 control.

138 **2.6. Enumeration of viable cells**

139 The control (unpasteurized) and heat treated milk were serially diluted with
140 buffered saline peptone water (pH 7.0). Dilutions of the milk samples were plated on
141 appropriate media and the plates were incubated for 48 h at 37°C. The media and
142 growth conditions of microbiota of human milk are presented in the Table 1. The
143 media were purchased from Merck KGaA.

144 **2.7 Statistical analysis**

145 The data presented in the figures and table are average values of at least three
146 replications with standard deviation. Analysis of variance (one-way procedure) was
147 performed to evaluate differences between treatments using the Statistica 8.0.

148 **3. Results and discussion**

149 **3.1. Effect of heating on bacteria inoculated in milk**

150 Depending on the method used to generation of heat, the time needed to reach
151 the temperature in the range of 62.5 - 72°C was different. In the case of HP it was
152 about 18 min. During microwave-induced heating the required temperature was
153 achieved in 1.4 min or 3 min for 62.5°C and 66-72°C, respectively (Table 2).



154 The results shown in a Table 3, indicate, that the gram-negative bacteria *E. coli*
155 and *P. aeruginosa* and gram-positive bacteria *S. aureus* and *S. epidermidis* have been
156 completely inactivated already at the time of reaching the temperature in the range 62.5-
157 72°C during HP. Czank, Prime, Hartmann, Simmer, and Hartmann, (2009) showed that
158 holding at 62.5°C caused lowering the number of *E. coli*, *S. epidermidis* and *S. aureus*
159 by 1 log cycle after 5.4 min, 5.6 min and 11.9 min, respectively. These differences
160 between our data and those of Czank et al. (2009) may results from variation in heat-
161 resistance of particular strains belonging to the same species as well as from the method
162 of heating of samples (especially from the sample size). In the case of thermoresistant
163 strains *Enterococcus* sp., the populations decreased as the temperature increased and
164 only after the time of reaching the temperature 72°C all enterococci strains were not
165 detected in 1 mL of sample (Table 3).

166 During microwave heating, when the required temperature was achieved, the
167 number of microorganisms decreased depending on the thermal sensitivity of the tested
168 strains. Total inactivation of all thermosensitive strain (*E. coli*, *P. aeruginosa*, *S. aureus*,
169 *S. epidermidis*) and *E. faecalis* PCM896 were observed immediately after reaching
170 72°C. The time needed to reach the required temperatures exerts important effect on
171 the survival fraction of tested microorganisms inoculated in milk.

172 The survival of microorganisms during heating decreased linearly with time,
173 indicating a first order kinetics. To compare the effectiveness of the heating methods
174 and optimize the pasteurization process conditions, the calculation of inactivation rate
175 (*k*) and decimal reduction times (*D_T*-value) was carried out for the strains surviving at
176 the time of achieving the required temperature, according to equations:

177
$$D_T = t / \log_{10} (N_0 / N_t)$$

178
$$k = 2,3026 / D_T$$



179 where: N_0 - the initial cell count, N_t - the number of cells after time t of heating at
180 temperature T .

181 Table 4 shows D_T -values and k parameters for thermosensitive bacteria heated
182 using microwave fields. Decreasing the population of these bacteria by one log cycle
183 was possible after less than 0.5 min. At temperature 62.5°C the most resistant was
184 *E. coli* strain because the $D_{62.5^\circ\text{C}}$ for this strain was the longest and the rate of
185 inactivation was 6.4 min⁻¹. At higher temperatures the differences between the strains
186 were statistically insignificant.

187 In the case of thermoresistant enterococci heated by HP, the $D_{62.5^\circ\text{C}}$ amounted
188 to 5.67 and 33.2 min for *E. hirae* and *E. durans*, respectively. The number of cells in
189 population of *E. faecalis* strains decreased only slightly after 30 min treatment in this
190 temperature, therefore, the calculated $D_{62.5^\circ\text{C}}$ were very high and reached 66.2 min and
191 71.1 min for *E. faecalis* PCM896 and *E. faecalis* PCM1861, respectively. The value
192 of the inactivation rates $k_{62.5^\circ\text{C}}$ was very low for all enterococcus strains. Bacteria
193 belonging to *Enterococcus* sp. are considered, as the most heat-resistant among non-
194 spore forming bacteria (Garg & Mital, 1991; Perez, Lorenzo, Garcia, Hernandez, &
195 Ordonez, 1982) and showed only about 0.5 log cycle loss of viability after heating in
196 neutral environment at 60°C by 30 min (Clark, Witter, & Ordal, 1968). At 66°C, the
197 most heat resistant was *E. faecalis* PCM896. Heating for 12 min is needed to reduce
198 the population of this strain by one log cycle at 66°C. The most sensitive was *E. hirae*
199 with $D_{66^\circ\text{C}} = 0.1$ min. Strains *E. faecalis* PCM896, *E. hirae* and *E. durans* were not
200 detected already after reaching of temperature 70 and 72°C and it was impossible to
201 calculate the D-values. Only the strain *E. faecalis* PCM1861 survived the time to
202 reach temperature of 70°C and $D_{70^\circ\text{C}}$ amounted to 0.95 min (Table 3). In turn, Perez et
203 al., (1982) have shown that heating at 64°C results in the inactivation of 90% of the

204 population of *E. durans*, *E. faecium* and *E. faecalis* suspended in cow's milk after
205 13.4, 6.3 and 4.5 min respectively. Similarly to our results, with increasing
206 temperature, the D-values of these strains were shorter. Heating at 72°C led to
207 shortening of the D time to a few seconds. Many factors influence the thermal
208 resistance of enterococci, such as time-temperature combinations and properties of
209 particular strains. It is known that the differences in heat sensitivity can appear not
210 only between species but also among strains within one species and can result from
211 various k and D_T -values.

212 Application of microwave heating allows to obtain lower D-value for
213 enterococci than those achieved during HP. This parameter estimated for these
214 bacteria, at all temperatures, was in the range 1.5 - 4 min depending on properties of
215 the strain and temperature used, except $D_{62.5^\circ\text{C}}$ calculated for *E. faecalis* PCM1861 and
216 *E. durans*.

217 The available literature data regarding the effect of microwave heating on
218 survival of microorganisms are difficult to compare, because the process parameters
219 are often described only by the power unit or the frequency of electromagnetic waves
220 in microwave oven without temperature value. Górecka, Grochowska, Windyga,
221 Ścieżyńska, and Karłowski, (1999) showed that microwave assisted heating (600 W)
222 for 6 min caused complete inactivation of a strain belonging to *Enterococcus* sp. (initial
223 number 10^7 CFU/mL). On the other hand microwave heating with a frequency of 2450
224 MHz with a power of 1500 W for 30 min on *E. faecalis* (initial number of cells was 10^9
225 per mL) reduced the population only by 1 log cycle (Lechowich, Beuchat, Fox, &
226 Webster, 1969). These discrepancies are probably due to different heat resistance of the
227 strains belonging to this species or initial population size. It is known that the lethal
228 effect of temperature is also dependent on level of initial contamination.



229 In the literature there are few data about heat-sensitivity of enterococci in HM
230 (introduced to HM or microbiota). It has been checked whether the same time of
231 heating is sufficient to achieve the total inactivation if the bacteria were suspended in
232 HM instead of UHT milk. In both, UHT milk and HM, complete inactivation of
233 bacteria occurred after the same time of HP (data not shown). In the case of
234 microwave heating enterococci suspended in HM were more resistant than in UHT
235 milk. To achieve total inactivation, longer heating times were needed in some cases
236 (Table 6). As was reviewed by Andreas, Kampmann, and Mehring Le-Doare (2015)
237 and Lis, Orczyk-Pawiłowicz, and Kałnik-Prastowska (2013) the composition of cow
238 milk differ from HM. Especially a content of carbohydrates can affect the protective
239 effect. HM contains 70 g/L of lactose and 7 g/L of oligosaccharides, whereas UHT
240 milk only 48 g/L and 0,1 g/L, respectively.

241 **3.2. Effect of heating method on microbiota of breast milk**

242 It was demonstrated that the time needed to achieve complete inactivation of
243 microbiota depends on the process temperature and initial microbial contamination of
244 milk. Figures 1, 2, 3 and 4 show survival of natural and cross-contaminated
245 microbiota of HM (TBC, LAB, enterococci, coagulase-positive staphylococci and coli
246 group bacteria). HP at 62.5°C for 30 min did not allow a complete reduction all
247 groups of microorganisms when the initial TBC was above the maximum permissible
248 level ($>10^5$ CFU/mL). After this time lactic acid bacteria (LAB) were detected in milk
249 (about 1 log CFU/mL) (Fig. 1B). The use of microwave heating at this temperature
250 for the pasteurization of HM with high initial contamination also did not allow to
251 achieve the total pasteurization effect even after 10 min of the process (Fig. 2C). The
252 efficiency of pasteurization at 62.5°C was higher when the initial contamination of



253 milk was lower (Fig. 1A, 2A and B). Bacteria were not detected in 1 mL of milk after
254 reaching 62.5°C during HP or after 3 or 5 min of microwave assisted heating.

255 Increasing the temperature to 66°C allowed to reduce the heating time needed
256 to completely inactivate of the bacteria compared to the effect of 62.5°C. The
257 population of HM microbiota did not survive just after reaching the set temperature
258 (HP) when its number did not exceed 10⁵ CFU/mL (TBC) (Fig. 3A). While the initial
259 contamination was greater than 10⁵ CFU/mL, the same level of inactivation was
260 possible after 30 min of heating at this temperature (Fig. 3B). Microwave heating at
261 66°C caused total pasteurization effect after 1 or 3 min of heating depending on the
262 initial level of TBC (Fig. 4).

263 Coliform bacteria (similar to *E. coli* at model conditions) were sensitive to HP
264 conditions and were not detected after reaching of temperature 62.5°C and 66°C (Fig.
265 1 and 3). Microwave pasteurization inactivated the coliforms after 3 min of heating at
266 62.5°C or after reaching of 66°C (Fig. 2 and 4). It was a time shorter than the one for
267 *E. coli* in model conditions. In the case of coagulase-positive staphylococci when the
268 number of cells was about 10³ CFU/mL, HP and microwave heating caused total
269 inactivation after reaching the temperature 62.5 and 66°C (Fig 1A, 2, 3 and 4). A
270 longer time (30 min at 62.5°C) was needed to inactivate all coagulase-positive
271 staphylococci when their number in raw milk was about 10⁵ CFU/mL (Fig. 1B).

272 The number of enterococci in most milk samples ranged from 0-10³ CFU/mL,
273 except for the sample heated during HP at 62.5°C (Fig. 1B). This group of bacteria
274 was sensitive to heating at 62.5 and 66°C and was not detected usually after reaching
275 the required temperature (Fig 1A and 3A, B). The longest time needed to complete
276 inactivation of enterococci by microwave heating was 3 min (Fig. 2 and 4). In recent
277 years there have been reports that bacteria from *Enterococcus* genus can be

278 opportunistic pathogens and cause infection especially of hospitalized,
279 immunocompromised patients. Among the species, which caused the disease are
280 mentioned strains of *E. faecalis* and less *E. faecium*. They have the ability of
281 transferring virulence factors and antibiotics resistance into closely related strains or
282 cells of other species of bacteria. However, it has been shown, that strains isolated
283 from HM do not possess the characteristic features of pathogenic strains (Reviriego et
284 al., 2005; Togay, Temiz, Çelebi, Acik, & Yalcin, 2014). On the other hand, these
285 bacteria are commonly found in the environment and in the intestinal tract of healthy
286 humans and animals, as well as in the HM. Some strains belonging to *Enterococcus*
287 genus are used as probiotic, which exert positive impact on intestinal tract of humans.
288 Enterococci also produce natural antimicrobial substances with broad-spectrum
289 inhibiting the growth of pathogenic microorganisms. Both, European and American
290 organizations responsible for food safety did not regulate permissible, acceptable
291 levels of these microorganisms in food products, as well as in breast milk. Due to the
292 lack of virulence among strains found in breast milk, a small number of the
293 population of these bacteria after pasteurization should not raise objections.

294 **4. Conclusions**

295 In the last 50 years there have been several reports in the literature regarding
296 the possibility of using the HTST method to preserve HM (Dhar, Fichtali, Skura,
297 Nakai, & Davidson, 1996; Giribaldi et al., 2016; Goldblum et al., 1984; Klotz et al.,
298 2017). However, it is difficult to compare the obtained results due to the many
299 differences in the conditions used: temperature, heating time, sample size, challenging
300 test used to determine the effectiveness of pasteurization. Some of the device
301 prototypes used need to be adapted so that they can be routinely used in HMB. In our
302 work we showed that total pasteurization can be achieved in shorter time than by



303 using the holder method. The using of microwave heating allows to inactivate of all
304 bacterial strains inoculated to human milk and its microbiota. The factor determining
305 the effectiveness of the pasteurization process is the appropriate microbiological
306 quality of milk. The contamination of milk with microorganisms above 10^5 CFU/mL
307 may cause that even 30 min heating at 62.5°C will not effectively eliminate all
308 bacteria in milk.

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312 **References**

- 313 Andreas, N. J., Kampmann, B., & Mehring Le-Doare, K. (2015). Human breast milk:
314 A review on its composition and bioactivity. *Early Human Development*, *91*(11),
315 629–635. <https://doi.org/10.1016/j.earlhumdev.2015.08.013>
- 316 Arslanoglu, S., Bertino, E., Tonetto, P., De Nisi, G., Ambrozzi, A. M., Biasini, A., ...
317 Moro, G. E. (2010). Guidelines for the establishment and operation of a donor
318 human milk bank. *The Journal of Maternal-Fetal and Neonatal Medicine*, *23*, 1–
319 20.
- 320 Clark, C. W., Witter, L. D., & Ordal, Z. J. (1968). Thermal injury and recovery of
321 *Streptococcus faecalis*, *16*(11), 1764–1769.
- 322 Czank, C., Prime, D. K., Hartmann, B., Simmer, K., & Hartmann, P. E. (2009).
323 Retention of the immunological proteins of pasteurised human milk in relation to
324 pasteurizer design and practise. *Pediatric Research*, *66*(4), 374–379.
- 325 Dhar, J., Fichtali, J., Skura, B. J., Nakai, S., & Davidson, A. G. F. (1996).
326 Pasteurization efficiency of a HTST system for human milk. *Journal of Food*
327 *Science*, *61*(3), 569–573. <https://doi.org/10.1111/j.1365-2621.1996.tb13160.x>

- 328 Eja, M. E., Asikong, B. E., Udo, S. M., Mbotto, C., & Arikpo, G. E. (2006).
329 Microbiological and biochemical assessment of the surface area of breast nipples
330 and breast milk of lactating women in Calabar South Eastern Nigeria. *The*
331 *Southeast Asian Journal of Tropical Medicine and Public Health*, 37, 215–221.
- 332 Garg, S. K., & Mital, B. K. (1991). Enterococci in milk and milk products. *Critical*
333 *Reviews in Microbiology*, 18, 15–45.
334 <https://doi.org/10.3109/10408419109113508>
- 335 Giribaldi, M., Coscia, A., Peila, C., Antoniazzi, S., Lamberti, C., Ortoffi, M., ...
336 Cavallarin, L. (2016). Pasteurization of human milk by a benchtop High-
337 Temperature Short-Time device. *Innovative Food Science and Emerging*
338 *Technologies*, 36, 228–233. <https://doi.org/10.1016/j.ifset.2016.07.004>
- 339 Goldblum, R. M., Dill, C. W., Albrecht, T. B., Alford, E. S., Garza, C., & Goldman,
340 A. S. (1984). Rapid high-temperature treatment of human milk. *The Journal of*
341 *Pediatrics*, 104(3), 380–385. [https://doi.org/10.1016/S0022-3476\(84\)81099-9](https://doi.org/10.1016/S0022-3476(84)81099-9)
- 342 Górecka, K., Grochowska, A., Windyga, B., Ścieżyńska, H., & Karłowski, K. (1999).
343 The effect of microwave irradiation on survivability of pathogens. (in Polish)
344 [Http://Www.Pzh.Gov.Pl/Oldpage/Biblioteka/Badania/1999/19_8.html](http://www.pzh.gov.pl/oldpage/biblioteka/badania/1999/19_8.html).
- 345 Holsinger, V. H., Rajkowski, K. T., & Stabel, J. (1997). Milk pasteurisation and
346 safety: a brief history and update. *Revue Scientifique et Technique (International*
347 *Office of Epizootics)*, 16, 441–451.
- 348 Jensen, R. G., & Jensen, G. L. (1992). Specialty lipids for infant nutrition. I. Milks
349 and formulas. *Journal of Pediatric Gastroenterology and Nutrition*, 15, 232–245.
- 350 Kamianowska, M., Szczepański, M., Bebko, B., Kamianowski, G., & Milewski, R.
351 (2008). Analiza bakteriologiczna pokarmu kobiecego, uzyskanego w warunkach
352 szpitalnych i domowych od matek noworodków z małą urodzeniową masą ciała.



- 353 *Przeegląd Pediatryczny*, 38, 291–297.
- 354 Klotz, D., Joellenbeck, M., Winkler, K., Kunze, M., Huzly, D., & Hentschel, R.
355 (2017). High-temperature short-time pasteurisation of human breastmilk is
356 efficient in retaining protein and reducing the bacterial count. *Acta Paediatrica*,
357 *International Journal of Paediatrics*, 106(5), 763–767.
358 <https://doi.org/10.1111/apa.13768>
- 359 Kumar, A., Yadav, M. P., & Kakkar, S. (1981). Human milk as a source of Q-fever
360 infection in breast-fed babies. *Indian Journal of Medical Research*, 73, 510–512.
- 361 Lechowich, R. V, Beuchat, L. R., Fox, K. I., & Webster, F. H. (1969). Procedure for
362 evaluating the effects of 2,450-Megahertz microwaves upon *Streptococcus*
363 *faecalis* and *Saccharomyces cerevisiae*. *Applied Microbiology*, 17, 106–110.
- 364 Lis, J., Orczyk-Pawilowicz, M., & Kątnik-Prastowska, I. (2013). Promotion of
365 breastfeeding in Europe: Pilot testing the blueprint for action' project. Protection,
366 promotion and support of breast-feeding in Europe: progress from 2002 to 2007.
367 *Postępy Higieny i Medycyny Doświadczalnej*, 67, 529–547.
- 368 Malinowska-Pańczyk, E., & Rosiak, E. (2017). Bezpieczeństwo postępowania z
369 mlekiem w banku mleka. Potencjalne zagrożenia związane z mlekiem kobiecym
370 z banku mleka. In A. Wesołowska (Ed.), *Banki mleka w Polsce. Funkcjonowanie*
371 *w podmiotach leczniczych - idea i praktyka* (pp. 149–155). Warszawa, Bank
372 Mleka Kobiecego.
- 373 Perez, B. S., Lorenzo, P. L., Garcia, M. L., Hernandez, P. E., & Ordonez, J. A. (1982).
374 Heat resistance of enterococci. *Milchwissenschaft*, 37, 724–726.
- 375 Reviriego, C., Eaton, T., Martin, R., Jimenez, E., Fernandez, L., Gasson, M. J., &
376 Rodriguez, J. M. (2005). Screening of virulence determinants in *Enterococcus*
377 *faecium* strains isolated from breast milk. *Journal of Human Lactation*, 21, 131–



378 137.

379 Svabic-Vlahovic, M., Pantic, D., Pavicic, M., & Bryner, J. H. (1988). Transmissin of
380 *Listeria monocytogenes* from mother's milk to her baby and to puppies. *Lancet*,
381 19, 1201.

382 Togay, S. Ö., Temiz, A., Çelebi, A., Acik, L., & Yalcin, S. S. (2014). Investigation of
383 potential virulence genes and antibiotic resistance characteristics of
384 *Enterococcus faecalis* isolates from human milk and colostrum samples. *Turkish*
385 *Journal of Biology*, 38, 357–364.

386

387 **Figure captions**

388 Figure 1.

389 The effect of HP at 62,5°C on viability of microbiota of HM; (■) TBC; (□) LAB; (⊘)

390 enterococci; (⊞) coli group; (⊞) coagulase-positive staphylococci;

391 A and B mean samples with different initial contamination

392 Figure 2.

393 The effect of microwave heating at 62,5°C on viability of microbiota of HM (■) TBC;

394 (□) LAB; (⊘) enterococci; (⊞) coli group; (⊞) coagulase-positive staphylococci;

395 A, B and C mean samples with different initial contamination

396 Figure 3.

397 The survival of microbiota of HM during HP at 66°C; (■) TBC; (□) LAB; (⊘)

398 enterococci; (⊞) coli group; (⊞) coagulase-positive staphylococci;

399 A and B mean samples with different initial contamination

400 Figure 4.

401 The survival of microbiota of HM during microwave heating at 66°C; (■) TBC; (□)

402 LAB; (⊘) enterococci; (⊞) coli group; (⊞) coagulase-positive staphylococci;

403 A and B mean samples with different initial contamination

Table 1. Media and growth conditions

	Medium	Conditions
Total Bacterial Count (TBC)	Plate count agar	
Lactic Acid Bacteria (LAB)	MRS agar	30°C for 48 h
Coliform bacteria	Chromocult® Coliform agar	
<i>Enterococcus</i> sp.	Chromocult® Enterococci agar	
Coagulase-positive <i>Staphylococcus</i> sp.	Baird-Parker agar	37°C for 48 h
Strains suspended in UHT and HM	Tryptic soy agar (TSA)	

Table 2. Average time of reaching the set temperature depending on the method of heating

Method of heating	Time of reaching of temperature [min]			
	62,5°C	66°C	70°C	72°C
HP	18±0.8 ^{a,b,A}	17±1.0 ^{a,A}	18±1.2 ^{a,b,A}	19±0.9 ^{b,A}
Microwave	1.4±0.3 ^{a,C}	3±0.5 ^{b,C}	3±0.5 ^{b,B}	3±0.5 ^{b,C}

a-b values for a particular column followed by different letters differ significantly ($p < 0.05$)
A-C values for a particular row followed by different letters differ significantly ($p < 0.05$)
(mean ± SD, n = 3)

Table 3. The effect of temperature reaching time on the reduction (N_r/N_0) of population of bacteria inoculated into cow milk

Strain	Temperature [°C]	HP	Microwave heating
		Log N_r/N_0	
<i>E. coli</i> K-12	62.5	5.9±0.21*	0.3±0.15
	66.0	5.9±0.13*	3.8±0.17
	70.0	5.9±0.15*	3.7±0.30
	72.0	5.9±0.19*	5.4±0.21*
<i>P. aeruginosa</i> PCM499	62.5	5.8±0.10*	1.9±0.24
	66.0	5.8±0.05*	4.6±0.11
	70.0	5.8±0.3*	4.3±0.20
	72.0	5.8±0.25*	4.8±0.13*
<i>S. epidermidis</i> PCM 2118	62.5	5.5±0.18*	3.3±0.25
	66.0	5.5±0.14*	3.4±0.07
	70.0	5.5±0.23*	3.5±0.18
	72.0	5.5±0.15*	5.0±0.13*
<i>S. aureus</i> PCM 2054	62.5	5.2±0.15*	0.9±0.18
	66.0	5.2±0.20*	3.2±0.02
	70.0	5.2±0.05*	3.5±0.10
	72.0	5.2±0.04*	4.8±0.05*
<i>E. faecalis</i> PCM896	62.5	<0.2	<0.2
	66.0	0.5±0.05	-
	70.0	5.2±0.20*	1.0±0.02
	72.0	5.2±0.32*	1.4±0.05
<i>E. faecalis</i> PCM1861	62.5	<0.2	<0.2
	66.0	0.7±0.21	3.6±0.30
	70.0	4.8±0.20	3.7±0.20
	72.0	5.3±0.30*	4.9±0.06*
<i>E. hirae</i> PCM2559	62.5	0.62±0.03	<0.2
	66.0	3.8±0.11	0.5±0.02
	70.0	5.2±0.40	0.5±0.03
	72.0	5.4±0.10*	0.6±0.02
<i>E. durans</i> PCM1857	62.5	<0.2	<0.2
	66.0	0.5±0.16	1.1±0.18
	70.0	5.4±0.24*	1.8±0.06
	72.0	5.4±0.06*	2.6±0.2

N_r – bacterial count [CFU/mL] after reaching time for required temperature; N_0 – bacterial initial population [CFU/mL]; * – total inactivation of bacterial population; (mean ± SD, n = 3)

Table 4. Inactivation rates (k) and decimal reduction time (D_T -value) of selected thermosensitive bacteria suspended in cow milk during microwave pasteurization

Species	Temperature [°C]	Microwave heating	
		k [min ⁻¹]	D_T [min]
<i>E. coli</i> K-12	62.5	6.40	0.36
	66	15.35	0.15
	70	46.05	0.05
	72	-	0.003
<i>P. aeruginosa</i> PCM499	62.5	7.94	0.29
	66	16.44	0.14
	70	46.05	0.05
	72	-	0.003
<i>S. epidermidis</i> PCM 2118	62.5	12.79	0.18
	66	14.40	0.16
	70	46.05	0.05
	72	-	0.003
<i>S. aureus</i> PCM 2054	62.5	13.54	0.17
	66	23.03	0.10
	70	46.05	0.05
	72	-	0.003

Table 5. Effect of heating method on the inactivation rates (k) and decimal reduction time (D_T -value) of selected enterococci suspended in cow milk during holder and microwave pasteurization

Species	Temperature [°C]	HP		Microwave heating	
		k [min ⁻¹]	D_T [min]	k [min ⁻¹]	D_T [min]
<i>E. faecalis</i> PCM896	62.5	0.035	66.2	0.17	13.7
	66	0.19	12.1	0.61	3.8
	70	-	N.d.	1.32	1.75
	72	-	N.d.	1.50	1.54
<i>E. faecalis</i> PCM1861	62.5	0.032	71.1	1.54	1.5
	66	0.352	6.53	2.56	0.9
	70	2.423	0.95	2.65	0.87
	72	-	N.d.	3.65	0.63
<i>E. hirae</i> PCM2559	62.5	0.406	5.67	0.57	4.07
	66	23.02	0.1	0.89	2.6
	70	-	N.d.	1.35	1.7
	72	-	N.d.	1.54	1.5
<i>E. durans</i> PCM1857	62.5	0.07	33.2	0.16	14.7
	66	0.51	4.5	1.15	2.0
	70	-	N.d.	1.35	1.7
	72	-	N.d.	1.53	1.5

N.d. – not determined, inactivation took place during reaching of required temperature

Table 6. Heating time needed to achieve complete inactivation of selected bacteria inoculated into HM

Strain	Heating time [min] at temperature							
	62.5°C		66°C		70°C		72°C	
	UHT	HM	UHT	HM	UHT	HM	UHT	HM
<i>E. coli</i> (5.1±0.06)*	5	10	5	10	1	3	TRT	TRT
<i>P. aeruginosa</i> (5.0±0.03)*	5	5	3	3	1	3	TRT	TRT
<i>S. epidermidis</i> (5.2±0.05)*	5	5	3	5	1	3	TRT	TRT
<i>S. aureus</i> (4.7±0.12)*	5	5	1	3	1	3	TRT	TRT
<i>E. faecalis</i> PCM 896 (5.1±0.01)*	- ¹	- ¹	10	- ¹	10	- ¹	10	10
<i>E. faecalis</i> PCM1861 (4.7±0.60)*	10	- ¹	10	- ¹	3	10	3	3
<i>E. hirae</i> (4.6±0.08)*	- ¹	- ¹	-	- ¹	5	5	1	5
<i>E. durans</i> (4.4±0.01)*	- ¹	- ¹	10	- ¹	3	3	5	5

TRT – temperature reaching time;

* - log CFU/mL in control sample; ¹ – no total inactivation in experimental conditions

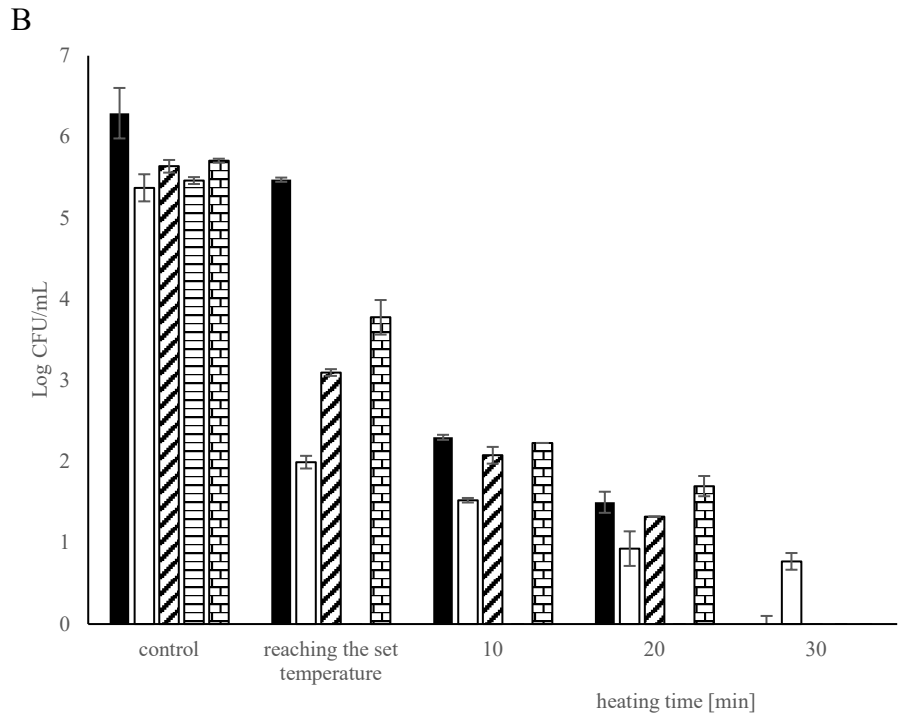
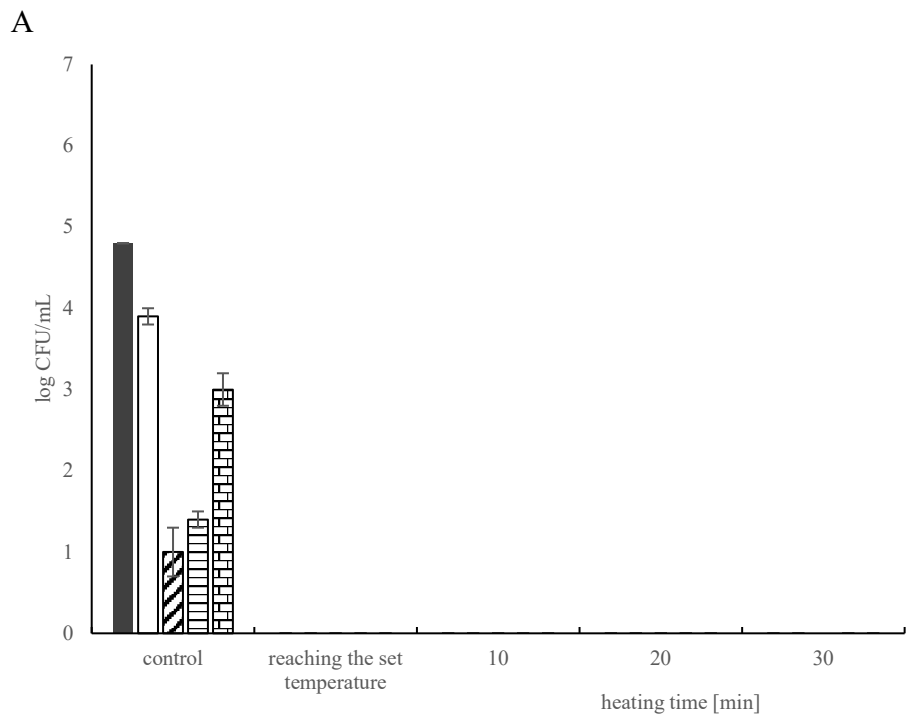
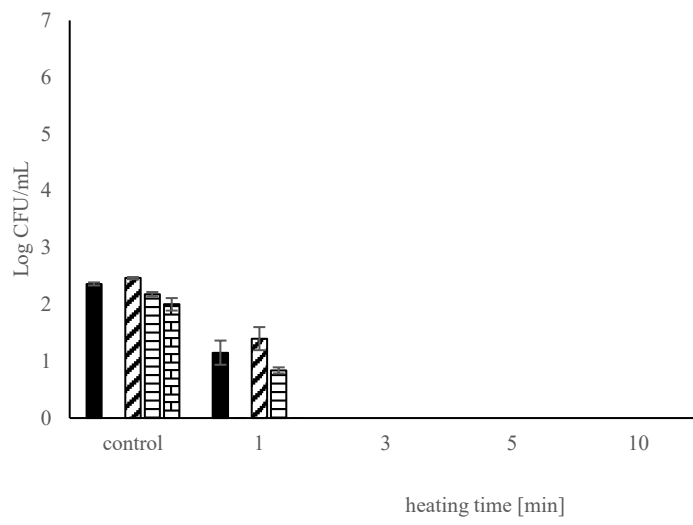
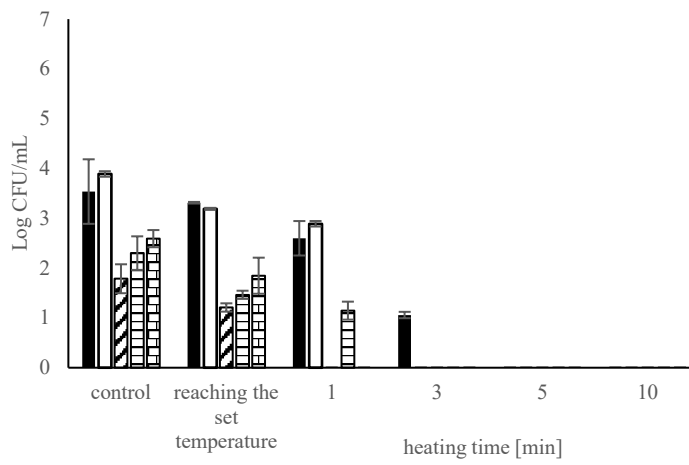


Figure 1.

A



B



C

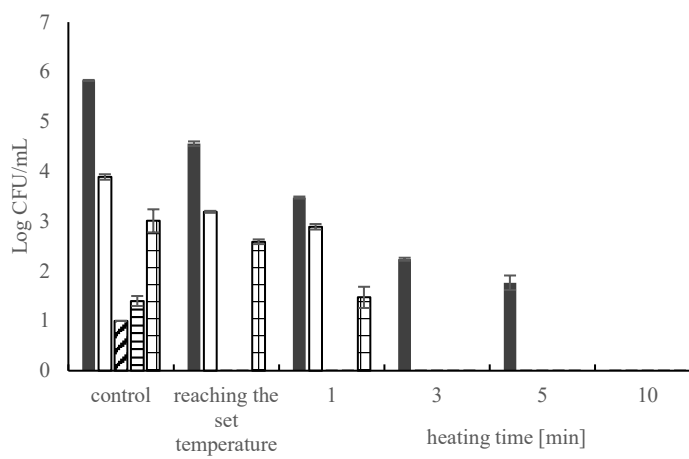


Figure 2.



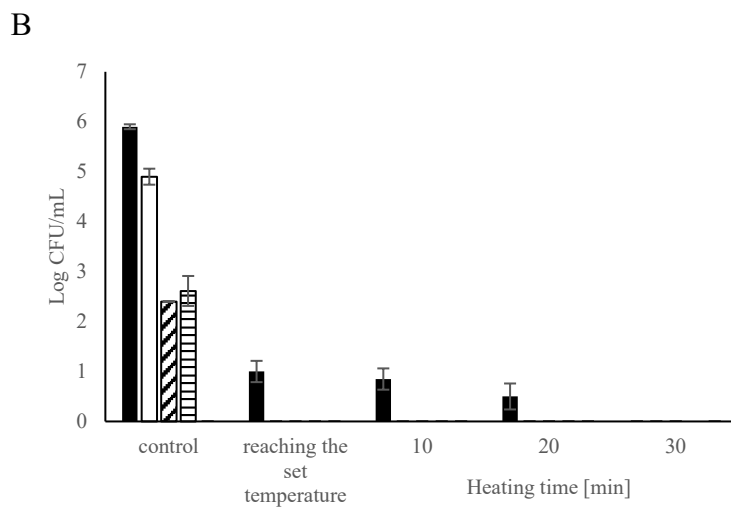
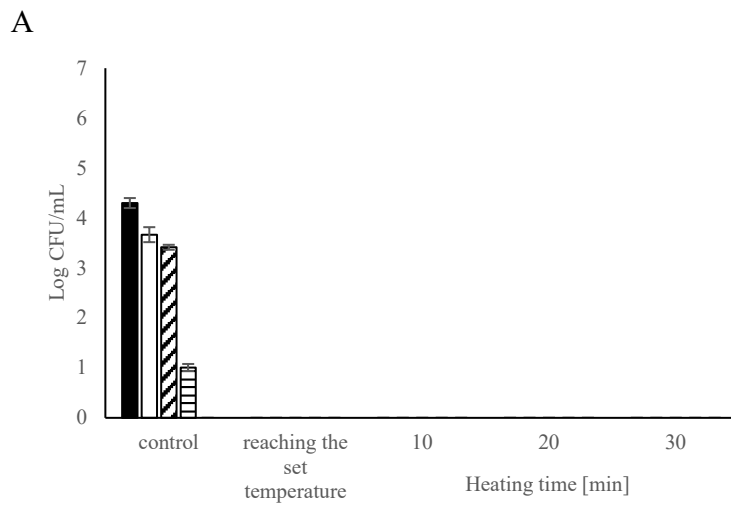


Figure 3.

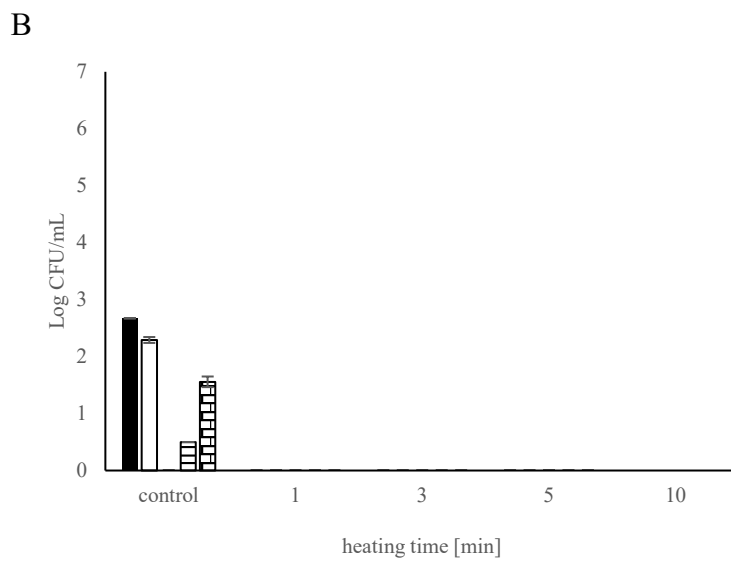
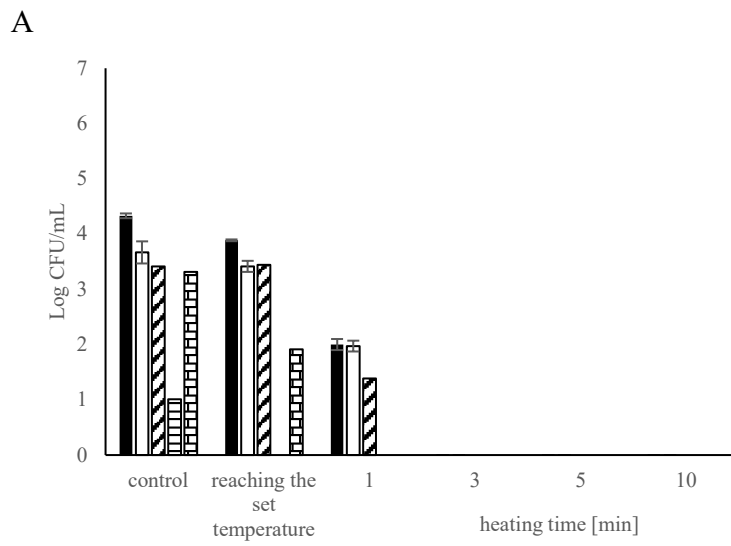


Figure 4.