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# *Lactobacillus rhamnosus* **V5 Prevents** *Salmonella enterica* **Serovar Typhimurium Invasion in Cell Culture and Mice Infection**

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## *Authors' contributions*

*This work was carried out in collaboration among all authors. Author CTT performed lactobacilli growth; author PCDS worked with animals in vivo assay; author EKN performed statistical analysis; author RSA identified lactobacilli (16S); author LAP designed the in vivo assays; author AASB performed bacteriocin assay; author SG isolated lactobacilli; authors DOP and EJAA performed histological analysis; author MCG worked with cell culture (adhesion and invasion); author RKTK performed the results analsysis; author GN designed the study. All authors read and approved the final manuscript.*

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# **ABSTRACT**

**Aims:** The aim of this study was to evaluate the protective capacity of the exopolysaccharideproducing *Lactobacillus rhamnosus* V5 against invasion *in vitro* and *in vivo* with *S. typhimurium*. **Methodology:** We tested the antimicrobial activity of the compound extracted from the

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lactobacilli against *S. typhimurium* directly, also we tested the interference of this compound in *S. typhimurium* adherence and invasion of HeLa and HEp-2 cells (*in vitro* testings). For *in vivo* experiments, we used 16 BALB/c female mice. Through gavage method we introduced *L. rhamnosus* as probiotic and then infected mice with *S. enterica* serovar typhimurium. After euthanasia, spleen, liver and Peyer's patches removed for microbiological and histopathological analysis.

**Results:** The results showed that lactobacilli were able to produce antimicrobial compounds against *S. typhimurium*. These lactobacilli inhibited the adhesion and invasion of *S. typhimurium* in HeLa and HEp-2 cells, respectively. The challenge assay in the murine model demonstrated a decrease in pathogen translocation in the spleen and liver from mice treated with probiotic as well as protection of ileal tissue in lactobacilli-treated mice. The histopathological analysis demonstrated the presence of prominent lymphoid nodules in the ileum from the non-treated lactobacilli mice.

**Conclusion:** Our results suggest that *L. rhamnosus* improved the effectiveness of the intestinal barrier and, thus, could be a potential probiotic to control salmonellosis.

*Keywords: Bacteriocins; protection; lactic acid bacteria; adhesion assays; murine model; histopathological analysis.*

# **1. INTRODUCTION**

Probiotics are live microorganisms that confer a health benefit for the host through the production of bioactive compounds or equilibrating the gastrointestinal tract microbiota [1] when administered in adequate amounts [2]. Probiotics are usually incorporated supplements and pharmaceutical products [3]. The use of probiotics is advantageous by virtue of the property of non-selection of multidrug resistant bacteria, especially for broad-spectrum antimicrobials [4]. Probiotics has not been associated with side effects, they rarely cause a complication in healthy hosts, but they should be used with caution in patients with serious illnesses or in severely immunocompromised people [5]. Probiotics can also act as an alternative growth promoter in animal production [6].

Besides these positive effects, probiotics are useful for prevention and treatment of gastrointestinal diseases, such as irritable bowel syndrome [7], inflammatory bowel disease [8], necrotizing enterocolitis [9], food allergy [10], and infectious diarrhea [11], as well as presenting great effectiveness in the treatment of rotavirus and pouchitis [5].

Lactobacillus and Bifidobacterium are the most common genus of probiotics [12] Lactobacillus belongs to the group of lactic acid bacteria (LAB) that is composed of Gram-positive, nonsporulating, anaerobic or facultative aerobic cocci or rods, which produce lactic acid as one of the main fermentation end products of the

catabolism of simple carbohydrates [13]. This lactic acid reduces the pH of the intraluminal environment and inhibits multiplication of pathogenic bacteria. In this sense, it is suggested that organic acids can penetrate the bacterial cell wall and change their normal physiology of species of microorganisms [4]. LAB can provide immune-modulating and immune-stimulating activities [14] or non-immune mechanisms [15]. They can exert direct antimicrobial activity against pathogens by increasing phagocytosis [16], modifying and enhancing the cytokine production [17,18]. The strength in prevention or treatment by LAB probiotics is well demonstrated in investigations concerning *Helicobacter pylori* gastroenteritis, cancer [19,20], lactose intolerance [21] and C. albicans in oral candidiasis [22]. Found in normal intestinal microbiota, *Lactobacillus rhamnosus* is a potential probiotic essential for gut homeostasis and capable of benefit dysbiosis-related diseases [23]. Recent studies have proven that Lactobacillus administration prevents intestinal infection with *Salmonella*, and also act as a probiotic agent capable to attenuate severity of salmonellosis [24,25,26].

According to the Centers for Disease Control and Prevention (CDC) of the United States [27], approximately 1.2 million illnesses are caused by *Salmonella* spp. every year, causing 19,000 hospitalizations and 380 deaths. Children up to four years old are the most likely to contract salmonellosis. The *Salmonella* genus consists of only two species. According to the Kauffman-White classification system, *Salmonella* enterica has more than 2,600 serovars [28]. The serovar *Salmonella* typhimurium induces rapid host death, mainly in susceptible hosts [29]. It causes a considerable number of human diseases in developed nations [30] and variants of *S. enterica* serovar typhimurium have been described as causing highly invasive illnesses in Africa [30,31].

*S. enterica* is one of the most common causal agents of foodborne illnesses associated with the consumption of fresh leafy vegetables [32], tomatoes, alfalfa sprouts, and orange juice [33,34]. This pathogen can be ingested in beef, pork, turkey and principally in chicken, due to the ubiquity of bacteria and its capacity to grow at a wide range of temperatures: from 7 to 45°C [27]. *S. enterica* serovar typhimurium can resist the low pH of gastric secretion, invade and translocate from the intestinal barrier, and survive inside macrophages [35,36]. Robinson [29] proposes that this pathogen induces the production of type I interferon, which drives necroptosis of macrophages and allows them to evade the immune response. In this report, we explored the protective ability of a strain of *Lactobacillus rhamnosus* against the invasion *in vitro* and *in vivo* by *S. enterica* serovar typhimurium.

## **2. METHODOLOGY**

# **2.1 DNA Extraction and PCR Amplification**

The total genomic DNA of Lactobacillus rhamnosus V5 was extracted using the Puregene® Blood core kit B (Qiagen, Hilden, Gemany) according to the manufacturer's instructions. Bacterial ribosomal subunits 16S primers were used in this study (primers set: 16S Fw: 5'-GAGTTTGATCCTGGCTCAG-3' and 16S Rev: 5'-AGAAAGGAGGTGATCCAGCC-3'). The PCR melting temperature was 59°C. A PCR reaction mixture contained: 2 μL of extracted template DNA (50 ng), 2 μL of dNTPs (0,2 mM; Invitrogen, USA), 0.2 μL of Taq High Fidelity (5 U/μL; Invitrogen, USA), 5 μL of buffer (10 x; Invitrogen, USA), 3 μL of MgSO4 (50 mM; Invitrogen, USA) and 37 μL of deionized water, totaling a final volume of 50 μL. The PCR cycles consisted of 94°C of initial denaturation for 5 min, 35 cycles of 94°C for 1 min, 59°C for 1 min and 68°C for 2 min, followed by 10 min of final extension at 68°C. PCR products were analyzed by agarose gel electrophoresis in 1% in TAE (20 mM Tris acetate, pH 8.0; 0.5 mM EDTA) at 80 V and 400 mA for 30 min. After that, the DNA was

extracted from the gel and purified using quick gel extraction Kit PureLink TM (Invitrogen, USA).

# **2.2 Pathogenic Bacteria**

The mice were infected with an attenuated pathogen, *S. typhimurium* χ3985 UK1 (ΔcyaΔcrp) strain from the Center for Infectious Diseases and Vaccinology, Biodesign Institute and School of Life Sciences, Arizona State University, Tempe, AZ, United States of America [36]. The use of an attenuated strain allows evaluation of the process of translocation in the mouse, which would not be possible with a virulent strain. *S. typhimurium* χ3985 UK1 (ΔcyaΔcrp) has a deletion in the adenylate cyclase and cyclic AMP receptor protein [37], however, it continues with its immunogenic action, being able to infect and persist in the organs of mice, such as in the Peyer's patches, spleen, and liver. These bacteria were grown in Luria-Bertani (LB) broth (Difco, Franklin Lakes, NJ, USA) at a temperature of 37°C for 18 h.

# **2.3 Probiotic**

The *Lactobacillus rhamnosus* V5 strain was obtained from a mixture of various bacteria from "Viili" given in Department of Food Science and Technology, Agricultural Science Center, State University of Londrina, Londrina, Paraná, Brazil. The *L. rhamnosus* strain was grown in De Man, Rogosa and Sharpe (MRS) broth medium (Difco, Franklin Lakes, NJ, USA), at a temperature of 37°C, in an atmosphere of 5% (v/v) CO2 for 18 h.

## **2.4 Adhesion and Invasion in Cell Culture**

## **2.4.1 Cultivation of HEp-2 and HeLa cells**

Cell cultures were grown in a 24-well plate (BD Falcon, Bedford, MA, USA) in Dulbecco's Modified Eagle Medium (DMEM) (Sigma-Aldrich, St. Louis, MO, USA) supplemented with 10% fetal bovine serum which was incubated in a 5% CO2 atmosphere at a temperature of 37°C, for 48 h. The cell monolayer was grown for approximately 24 h at 37°C with 5% CO2 to give at least 80% confluency.

## **2.4.2 Inhibition of bacterial adhesion**

The assay was performed according to the methodology described by Cravioto and collaborators [32]. HeLa cells were cultured in a 24-well plate (BD Falcon microplates, Bedford,

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MA, USA) on sterile round coverslips (13 mm in diameter) that were placed before the cells.

First, we added  $10^7$  cfu of lactobacilli into a well to 1 mL of DMEM, for 2 h in the CO2 oven (5%), at a temperature of 37 $^{\circ}$ C. Next, we added 10 $^{\prime}$  cfu of *S. typhimurium*, leaving the well for 3 h under the same conditions. After the period, the monolayers were washed with sterile 0.05 M phosphate buffered saline (PBS, pH 7.4) and incubated for another 3 h. Then, we washed the coverslips five times with PBS, fixed with methanol (Merck, Darmstadt, Germany) for 10 min, and stained with May-Grunwald (Sigma-Aldrich, St. Louis, MO, USA) and Giemsa (Sigma-Aldrich, St. Louis, MO, USA). The slides were examined under a light microscope using an oil immersion lens. Finally, we quantified adhered bacteria for each 100 HeLa cells from different fields of the coverslip.

## **2.4.3 Inhibition of bacterial invasion**

Invasion testing by *S. enterica* serovar Typhimurium strain and inhibition of invasion by *L. rhamnosus*. were performed according to Sansonetti and collaborators [38,39]. First the HEp-2 cells were washed twice with Phosphate Buffered Saline - PBS (137 mM NaCl, 2.7 mM KCl, 10 mM Na2HPO4, 1.76 mM KH2PO4, pH 7.4) thereafter they were added to 50μL medium and a suspension containing 108 cfu/mL of *L. rhamnosus* was incubated for 2 h in a CO2 incubator (5%) at 37°C. Next, 100 µL of suspension containing 107 cfu/mL of *S. typhimurium* invading bacteria was added and left to act for 2 h. After this period the plate passed through the washing process as described above. Then 1 mL of gentamicin (Sigma-Aldrich, St. Louis, MO, USA) was added to each well in a concentration of 100 μg /mL and allowed to act for 2 h. The aim of the antibiotic is to kill the bacteria that did not invade the cells.

After the effect of the antibiotic, the plate was passed 3 times through wash steps, after which 500 μL of 1% Triton (Sigma-Aldrich, St. Louis, MO, USA) was added and left to act for 5 min, to lyse the cell function to release the invading bacteria. Next, 100 µL of each well was withdrawn and transferred to a microtube. From this serial dilution (10-1, 10-2,10-3) was carried out and plated in triplicate in MacConkey (MC) agar (Difco, Franklin Lakes, NJ, USA). Analysis was performed after incubating for 24 h at a temperature of 37°C.

# **2.5 Antibacterial Activity of the Supernatant**

## **2.5.1 Obtaining supernatant from**  *Lactobacillus rhamnosus*

*L. rhamnosus* V5 strain was grown in a tube containing 10 mL of MRS broth (Difco, Franklin Lakes, NJ, USA) at a temperature of 37°C, for 18 h. After growth, the culture was centrifuged at 7000 rpm for 10 min. The clear supernatants obtained were used in the experimental trials as follows: (I) Clear supernatants were filter sterilized through membrane filtration, 0.22 μm pore size and 25 mm diameter (Millipore, Billerica, MA, USA), and used in the assay. (II) The pH of clear supernatants was adjusted to pH 6.5–7.0 with 0.1 NaOH and used in the assay after filter sterilization. (III) Clear supernatants with no treatment were subjected to heat treatment at 100°C for 10 and 20 min and then used in the assay after filter sterilization [40].

## **2.5.2 Antimicrobial susceptibility testing**

After obtaining supernatants (I, II, III), susceptibility testing was performed to determine the Minimal Inhibitory Concentration (MIC) using the microdilution method, as standardized by the National Committee for Clinical Laboratory Standards - CLSI [41]. The test was performed in triplicate in a 96-well plate, with a U-bottom shape.

*S. enterica* serovar Typhimurium was initially cultivated in Nutrient Agar (AN) (Difco, Franklin Lakes, NJ, USA) at 37°C for 18 h and was then standardized to 0.5 McFarland standard (corresponding to  $\approx$  1.5 x 108 bacteria/mL) and diluted 1:100 in saline (0.9% NaCl) to reach a concentration of approximately 106 cfu/mL. In the positive control, Müller-Hinton (MH) broth (Difco, Franklin Lakes, NJ, USA) medium and the bacteria were added, while in the negative control only MH broth was added. Microdilutions were made with the supernatant final concentrations ranging from 0.62 to 20%. Each well was inoculated with 50 µL of the bacterial suspension prepared above, (bacteria final concentration:  $\approx$  5x105 cfu/mL) and the 96-well plate was incubated at 37°C for 24 h and the bacterial growth visually assessed.

## **2.5.3 Time-kill curve**

After analyzing the MIC of the supernatant (I) a time-kill curve was performed. *S. typhimurium* assay was grown in NA (Difco, Franklin Lakes, NJ, USA) medium and incubated at 37°C for 18 h after bacterial growth. The culture was adjusted to a concentration of  $\approx$  1.5 x 108 bacteria/mL (0.5 of McFarland) and 10 μL placed in three microtubes, with supernatant concentrations of 20%, 10%, and the control, containing the bacterium and MH broth. The microtubes were incubated at 37°C and evaluated at the following moments; 0 h, 2 h, 4 h, 7 h, 10 h, and 24 h. This evaluation consisted in serial dilutions and triplicate plating in MH agar medium were performed in each period. The cfu count was performed after 24 h of incubation at 37ºC.

## **2.5.4 "Spot-on-the-lawn" antagonism method**

The antimicrobial activity of lactobacilli against *S. typhimurium* was determined by the "spot on the lawn" antagonism method, performed according to the methodology described by Lima and collaborators [42]. The lactobacilli were grown in MRS broth, and incubated at a temperature of 37°C, for 24 h under aerobic conditions. Subsequently, aliquots of this culture were punctually added on MRS agar plate. After drying was complete, the plate was incubated under aerobic conditions at a temperature of 37°C, for 8 h.

*S. typhimurium* was previously seeded in NA at 37°C for 24 h and the culture was adjusted in saline according to the McFarland 0.5 scale. Next, 250 μL of the adjusted culture was transferred to an erlenmeyer flask containing 25 mL of MH semi-solid agar, where it was homogenized and poured onto the *L. rhamnosus* dish. After complete solidification of the upper layer, the plate was incubated for an additional 24 h at 37°C under aerobic conditions. The presence of inhibition halo indicated the *L. rhamnosus* production of substances with antimicrobial activity.

## **2.6** *In vivo Assay*

## **2.6.1 Animals**

In total, 16 BALB/c female, mice weighting approximately 20 g, 4- to 6-weeks-old, were tested. These animals were maintained in a pathogen-free animal facility of the State University of Londrina (Londrina, PR, Brazil).

## **2.6.2** *In vivo* **challenge using mice**

The *in vivo* assay and microbiological analysis were performed according to the protocol of Coconnier et al. [43]. The mice were divided into two groups: the treated group which received<br>orally, through gavage method, three through gavage method, three inoculations of an 18 h grown culture of *L. rhamnosus* containing 10<sup>9</sup> cfu in 0.2 mL, on alternate days, and the control group that received 0.2 mL of PBS.

After one day of treatments with *L. rhamnosus*, a 108 cfu suspension of *S. enterica* serovar Typhimurium was inoculated. After 10 and 14 days of pathogen inoculation, 4 mice from each group were euthanized by cervical dislocation (treated with lactobacilli and non-treated control) and the spleen, liver, and Peyer's patches removed for microbiological and histopathological analysis.

#### **2.6.3 Microbiological analysis**

Microbiological analysis was performed to evaluate the translocation of *S. enterica* serovar Typhimurium. After collection, a small part of the organs was cut and reserved for histology. The other portion of the organs was weighed, crushed with macerators, homogenized, and individually reserved in Falcon type tubes containing 5 mL of PBS. Serial dilutions (10-1, 10-2, 10-3) were made and 10 μL of these bacterial suspensions were plated in triplicate in MC agar at 37°C; after 24 h the cfu was determined by direct counting.

## **2.6.4 Histopathological analysis**

The collected material was processed and analyzed by the Department of Histology, Center for Biological Sciences, State University of Londrina, PR, Brazil. The organs were fixed by immersion in Bouin solution for 24h. All collected organs and the ileum were included in paraffin following the conventional protocol; 7-μmsections were stained with hematoxylin and eosin (HE). The images were captured using photomicroscopy (Zeiss Axiophot) coupled to a high-resolution camera (Moticam 2300 3.0 MP). Alterations in the histological structure were investigated.

## **2.7 Statistical Analysis**

Differences in the *in vitro* and *in vivo* tests were compared using the Student t test. For statistical analysis *in vivo*, data were normalized by total cfu per milliliter (cfu/mL) for the Peyer's patches, spleen, and liver.

For analysis of the growth and death curve data, analysis of variance (ANOVA) was performed, and the Tukey test to compare the means, considering a factorial design, the factors being the treatments, and the levels the times. The significance level adopted was 5%, and the analyses were performed using software R version 3.4.4 (2018).

# **3. RESULTS**

## **3.1 Identification of** *Lactobacillus rhamnosus* **Strain V5**

The molecular characterization of the specie was performed through PCR in which the amplified region was the 16S ribosomal RNA gene whose sequence was deposited in GenBank database under accession number MG209517.

## **3.2 Adhesion and Invasion in Cell Culture**

The adhesion assays using HeLa cells showed an inhibition of *Salmonella*-adherence in the presence of *L. rhamnosus*. The addition of probiotic together with *Salmonella* presented the highest inhibition when compared with previous treatment (Table 1).

## **Table 1. Inhibition of the** *Salmonella* **adhesion in HeLa cells by** *Lactobacillus rhamnosus*



*\*Lactobacillus strain added together Salmonella strain.*

*\*\*Lactobacillus strain added 3 h before the addition of Salmonella strain.*

*\*\*\*Lactobacillus strain added 5 h before the addition of Salmonella strain.*

The inhibition of *Salmonella* invasion in HEp-2 cells was also observed in the presence of probiotic (Fig. 1), showing a significant reduction of invasive cells in the presence of *L. rhamnosus* compared to control.

## **3.3 Antibacterial Activity of the Supernatant**

## **3.3.1 MIC**

In the present study, the supernatant (I) demonstrated antimicrobial activity. The minimal inhibitory concentration of the supernatant against *S. typhimurium* was 10%. The supernatant (II) was sensitive to neutralization with 1N NaOH solution, totally losing its inhibitory capacity, demonstrating that the antimicrobial activity verified in the experiment may have been due to the presence of acids, leading to a drop in the pH of the medium. During the growth of lactic acid bacteria, a fall in pH occurs, making the environment quite acid, mainly due to the production of acids such as lactic acid. The supernatant (III) was resistant to thermal treatments. The minimal inhibitory concentration of the supernatant against *S. typhimurium* was 10%, demonstrating that the antimicrobial activity verified in the experiment may have been due to the presence of acids. Bacteriocin produced by LAB has low molecular weight and are easily denatured by thermal treatments [44].

#### **3.3.2 Growth and death curve**

After determining the minimum inhibitory concentration of the supernatant not neutralized against *S. typhimurium*, the time-kill curve assay was performed. The results showed statistically significant differences ( $p \le 0.05$ ). The 10% supernatant was able to inhibit the growth of the bacterium, but after the period of 10 h the bacteria began to multiply and at the end of 24 h had an increase of one log in relation to the initial inoculum, demonstrating a bacteriostatic effect. However, in the time of 24 h showed a difference of 4 logs (Fig. 2). The supernatant at 20% presented bactericidal action, gradually decreasing the number of viable cells, eliminating 100% of the bacterial population in 24 h (Fig. 2).

#### **3.3.3 Spot-on-the-lawn antagonism method**

The "Spot-on-the-lawn" antagonism method showed the antimicrobial activity of lactobacilli against *S. typhimurium*, forming zones of inhibition of 21 mm in diameter.

## **3.4** *In vivo* **Assay**

## **3.4.1 Microbiological analysis**

Ten days post-infection with *S. typhimurium*, we observed a significant decrease ( $p < 0.05$ ) in the

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number of *Salmonella* colonies in the spleen when treated with probiotic (Fig. 3A). Other organs (liver and Peyer's patches) did not present significant differences between the treated and control animals (non-treated). However, after 14 days the number of probiotic (Fig. 3A). Other<br>Peyer's patches) did not<br>differences between the<br>ol animals (non-treated).

Salmonella colonies in the spleen Salmonella colonies was lower in all<br>ed with probiotic (Fig. 3A). Other organs from mice treated with lactobacilli, mainly<br>er and Peyer's patches) did not the liver  $(p < 0.05)$ , (Fig. 3B). organs from mice treated with lactobacilli, mainly Salmonella colonies was lower in all<br>organs from mice treated with lactobacilli, mainly<br>the liver (p < 0.05), (Fig. 3B). Some non-treated (control) mice died (data not shown) and their (control) mice died (data not shown) and their<br>organs were not collected for microbiological analysis.



**Fig. 1. Count of invasive bacteria ( 1.** *Salmonella Typhimurium***) in HEp-2 cells treated and not 2 treated with** *L. rhamnosus*



**Fig. 2. Growth and death curve of Growth and** *Salmonella* **Typhimurium in the presence of supernatant not neutralized from**  *L. rhamnosus*

*(\*) Significant reduced growth of S. typhimurium (P < 0.05)*



**Fig. 3. Counting of colony forming unit from liver, spleen and Peyer' patches after 10 (A) and spleen and 14 (B) days post post-infection in murine model** 

# *(\*) Significant decrease in the number of S. typhimurium (P < 0.05)*

#### **3.4.2 Histopathological analysis**

The ileum samples collected from the control group demonstrated the presence of prominent lymphoid nodules both at 10 days (Fig 14 days (Fig. 4C) post-infection. Mice treated with *L. rhamnosus* did not present alterations in the histological characteristics of the ileum at either moment (Fig. 4B and 4D). The ileum samples collected from the control<br>group demonstrated the presence of prominent<br>lymphoid nodules both at 10 days (Fig. 4A) and post-infection. Mice treated<br>did not present alterations in<br>aracteristics of the ileum at<br>4B and 4D).<br>es of non-treated mice<br>resence of inflammatory foci<br>ig. 4E) and at 14 days (Fig.

The liver samples of non-treated mice demonstrated the presence of inflammatory foci both at 10 days (Fig. 4E) and at 14 days (Fig 4G) post-infection. Mice treated with *L. rhamnosus* did not present inflammatory foci at either moment (Fig. 4F and 4H). Intestinal epithelial cells, and the spleen and liver of all groups did not show detectable histopathological alterations under light microscopy. sus did not present inflammatory foci at<br>noment (Fig. 4F and 4H). Intestinal<br>I cells, and the spleen and liver of all<br>did not show detectable histopathological<br>ns under light microscopy.<br>**CUSSION**<br>studies have reported dif

## **4. DISCUSSION**

Several studies have reported different probiotics to prevent infections against foodborne pathogens [25,26,45]. In this report, we showed pathogens [25,26,45]. In this report, we showed<br>that *L. rhamnosus* V5 promoted protection *in vitro* and *in vivo* against *S. enterica* serovar Typhimurium UK1, attenuated ΔcyaΔcrp (χ3985 UK1 [ΔcyaΔcrp]) (strain from Center for Infectious Diseases and Vaccinology, The Biodesign Institute and School of Life Sciences, Arizona State University, Tempe, AZ [36]. This infection model was used to evaluate the infection model was used to evaluate the<br>translocation process in mice, although S. *typhimurium* mutant decreased its virulence by deletion in the receptor protein of the adenylate n from Center for<br>d Vaccinology, The<br>chool of Life Sciences,<br>Tempe, AZ [36]. This

cyclase and cyclic AMP, this strain keeps<br>invading host cells [37]. Due to the characteristic of this pathogen strain, this *in vivo* model evaluated the probiotic effect.

Several mechanisms have been proposed to explain the beneficial effects of probiotics. For example, bacteriocins produced by probiotics can inhibit pathogenic bacteria, preventing infection in humans or other animals [46]. However, our results support that the inhibitory activity observed in *in vitro* assays was due to the production of organic acids, which reduced the pH of the medium. This effect was similar to the studies of Ogawa and collaborators [4 Pereira and Gómez [48]. ianisms have been proposed to<br>eneficial effects of probiotics. For<br>teriocins produced by probiotics<br>pathogenic bacteria, preventing<br>humans or other animals [46]. red in *in vitro* assays was due to<br>i of organic acids, which reduced<br>medium. This effect was similar to<br>Ogawa and collaborators [47] and

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invading host cells (37). Due to the characteristic<br>
monostrated the mesone of prominent evaluated the probiotic effect.<br>
Invading host cells Probiotics can also inhibit pathogen adherence in host cells by competition in linkage to host receptors [49]. In this sense, we observed that the presence of *L. rhamnosus* decreased the number of *Salmonella*-adhered in HeLa mainly when the probiotic was added together with the pathogen (Table 1). Interestingly, the non-adherence of *L. rhamnosus* suggests that the bacteriocins or presence of acids from probiotics can prevent bacterial adhesion or colonization. Cell invasion ability is an important virulence characteristic of *Salmonella*. *L. rhamnosus* V5 to reduces the number of invasive bacteria in HEp-2 cells, as also demonstrated in previous studies [49,50]. Thus, the results of adhesion in HeLa and Thus, the results of adhesion in HeLa and<br>invasion\_assays\_in\_HEp-2 cells\_showed\_that\_cell culture is an interesting *in vitro* tool to select an applicant for probiotic. in also inhibit pathogen adherence in<br>y competition in linkage to host<br>]. In this sense, we observed that<br>of *L. rhamnosus* decreased the<br>Salmonella-adhered in HeLa cells, idded together<br>:erestingly, the<br>in HEp-2 cells acteriocins or presence of<br>cs can prevent bacterial<br>tion. Cell invasion ability is<br>llence characteristic of<br>mosus V5 to reduces the<br>bacteria in HEp-2 cells, as



**Fig. 4. Photomicrograph of ileus intestinal tissues and liver of mice treated and non-treated with probiotics at 10 and 14 days post-infection with** *S. typhimurium***. Photomicrograph of intestine (ileum) and liver of mice infected with** *S. typhimurium***. A: Ileum of non-treated mice at 10 days post-infection with** *Salmonella***. Note prominent lymphoid nodule (\*). B: Group treated with** *L. rhamnosus* **at 10 days post-infection. C: Non-treated mice at 14 days post-infection with** *Salmonella***. Note prominent lymphoid nodule (\*). D: Group treated with** *L. rhamnosus* **at 14 days post-infection. Intestinal epithelium (long arrows). E: Liver of non-treated mice at 10 days post-infection with** *Salmonella***. F: Group treated with** *L. rhamnosus* **at 10 days of infection. G: Non-treated mice at 10 days post-infection with** *Salmonella***. Note inflammatory foci (\*). H: Group treated with** *L. rhamnosus* **at 14 days of infection. Hepatocyte (short arrows). Stained with Hematolin-Eosin (HE)**

As *L. rhamnosus* V5 demonstrated a protective effect *in vitro* against infection, we evaluated if this positive effect would also be observed in mice infected with *S. enterica* serovar Typhimurium UK1. In this way, it was verified that the number of *Salmonella* bacteria in the organs of the three treated mice was significantly lower than the untreated mice after 14 days of infection. Thus, the microbiological evaluation after 14 days of infection in this model showed effective partial protection.

Acursio et al. [51] tested the protective effect of Lactobacillus plantarum and *L. rhamnosus* inoculating a single dose of fermented milk containing of 8.0 log10 cfu/mL. Afterwards, live *S. typhimurium* was inoculated five days after mono-association with Lactobacillus strains. On day 20 post-challenge with *S. typhimurium*, translocation was found in the liver of mice treated with L. plantarum but not in those treated with *L. rhamnosus*. This result is very important to highlight that not all species of the Lactobacillus genus are able to present a protective effect.

Our *in vivo* results confirmed the decrease in the invasion *in vitro*, showing that cell culture assays have been used previously to assess the effective probiotic potential. Thus, other tests using alternative models would be interesting in an initial screening assessment of the effectiveness of probiotics [52-54].

The presence of prominent inflammatory foci in the intestinal mucosa was observed only in mice non-treated with *L. rhamnosus* It is known that these inflammatory foci are common in the ileal mucosa, but they tend to increase in quantity and size when the intestinal barrier is ruptured. As no change was observed in the larynx of mice treated with probiotics, it is suggested that *L. rhamnosus*. V5 was more effective for the intestinal barrier.

The literature already describes that Lactobacillus protects the integrity of the intestinal epithelial barrier from *Salmonella* infection [55], which corroborates our results.<br>Researchers showed the efficiency of showed the efficiency of Lactobacillus fructosus and *L. rhamnosus* in maintaining the integrity of Caco-2 culture cells [55,56]. Reduction in inflammatory foci leads to a progressive decrease in intestinal inflammation of the Peyer's patches, spleen, and peritoneum of mice treated with L. casei [22]. The absence of changes in the spleen, liver, and Peyer's patches

at 10 days post-infection suggests that bacterial translocation was under control.

It is known that *Salmonella* bacteria attack enterocytes, promoting rupture of occlusive junctions [55,56,57] and M cells, provoking intense inflammatory response [58]. Untreated mice infected with *Salmonella* bacteria presented more inflammatory nodules in the ileum and the presence of bacteria in the liver. On the other hand, mice treated with *L. rhamnosus* V5 and infected with *Salmonella* bacteria presented reduced inflammatory nodules in the ileum and no histological alterations in the liver. Considering this, it is reasonable to consider that *L. rhamnosus* V5 used as a probiotic was able to improve the intestinal barrier. Therefore, the use of *L. rhamnosus* V5 as a probiotic could be a viable alternative for controlling salmonellosis. Further studies using transmission electron microscopy could provide detailed information about the ultrastructure of the intestinal wall of these mice and contribute to understanding the mechanisms involved in the beneficial action of *L. rhamnosus* V5 as a probiotic.

#### **5. CONCLUSION**

We conclude that *L. rhamnosus* V5 was able to control *S. typhimurium*, inhibiting the adhesion and invasion of *Salmonella* bacteria *in vitro* and in mice *in vivo*. Because of this, *L. rhamnosus* V5 was able to control pathogen translocation in the spleen and liver. Thus, *L. rhamnosus* V5 could be used as a probiotic to control salmonellosis. Moreover, the histological assay is interesting tool to analyze the probiotic effects in intestinal tissues. This study showed the importance to search new lactobacilli as applicant probiotic for development of a new product.

#### **ETHICAL APPROVAL**

The project was approved by the Ethics Committee for Animal Experimentation of the State University of Londrina (CEUA / UEL), protocol no104/2013.

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#### **COMPETING INTERESTS**

Authors have declared that no competing interests exist.

## **REFERENCES**

1. Costa GN, Miglioranza LHS Probiotics: The Effects on Human Health and Current Prospects. In: Rigobelo EC (ed) Probiotics; 2012. Available:https://www.intechopen.com/boo

ks/probiotics/probiotics-the-effects-onhuman-health-and-current-prospects Accessed 10 May 2020.

2. FAO / WHO. Food and Agriculture Organization / World Health Organization. Guidelines for the Evaluation of Probiotics in Food; 2002. Available:http://www.who.int/foodsafety/fs\_ management/en/probiotic\_guidelines.pdf. Accessed 10 March 2016

Accessed 10 May 2020.

3. Sanders ME, Guarner F, Guerrant R, Holt PR, Quigley EM, Sartor RB, et al. An update on the use and investigation of probiotics in health and disease. Gut. 2013;62:787–796.

DOI: 10.1136/gutjnl-2012-302504.

- 4. Ferreira CLLF. Prebióticos e Probióticos: Atualização e Prospecção. 2nd edn. Rubio, Rio de Janeiro; 2018.
- 5. Williams NT. Probiotics. Am J Health Syst Pharm. 2010;67:449–458. Available:https://doi.org/10.2146/ajhp0901 68.
- 6. Higgins JP, Higgins SE, Wolfenden AD, Henderson SN, Torres-Rodriguez A, Vicente, JL, Hargis BM, Tellez G. Effect of lactic acid bacteria probiotic culture treatment timing on *Salmonella* Enteritidis in neonatal broilers. Poult Sci. 2010;89:243–247. Available:https://doi.org/10.3382/ps.2009- 00436.
- 7. Clarke G, Cryan JF, Dinan TG, Quigley EM. Review article: Probiotics for the treatment of irritable bowel syndrome focus on lactic acid bacteria. Aliment Pharmacol Ther. 2012;35:403–413.

DOI: 10.1111/j.1365-2036.2011.04965.x.

8. Tursi A, Brandimarte G, Papa A, Giglio A, Elisei W, Giorgetti GM, Forti G, Morini S, Hassan C, Pistoia MA, Modeo ME, Rodino' S, D'Amico T, Sebkova L, Sacca' N, Di Giulio E, Luzza F, Imeneo M, Larussa T, Di Rosa S, Annese V, Danese S, Gasbarrini A. Treatment of relapsing mild-to-moderate ulcerative colitis with the probiotic VSL#3 as adjunctive to a standard pharmaceutical treatment: A double-blind, randomized,

placebo-controlled study. Am J Gastroenterol. 2010;105:2218–2227. DOI:10.1038/ajg.2010.218.

- 9. Deshpande G, Rao S, Patole S, Bulsara M. Updated meta-analysis of probiotics for preventing necrotizing enterocolitis in preterm neonates. Pediatrics. 2010;125:921–930. DOI: 10.1542/peds.2009-1301.
- 10. Fölster-Holst R. Probiotics in the treatment and prevention of atopic dermatitis. Ann Nutr Metab. 2010;57:16–19. Available:https://doi.org/10.1159/00030905 4.
- 11. Guandalini S. Probiotics for prevention and treatment of diarrhea. J Clin Gastroenterol. 2011;45:S149–S153. DOI: 10.1097/MCG.0b013e3182257e98.
- 12. Song D, Ibrahim S, Hayek S. Recent application of probiotics in food and agricultural science. In: Rigobelo EC (ed) Probiotics; 2012. Available:http://dx.doi.org/10.5772/50121
- 13. Hayek SA, Ibrahim SA. Current limitations and challenges with lactic acid bacteria: A review. Food Nutr Sci. 2013;4:73–87. Available:https://doi.org/10.1016/j.jbiotec.2 016.08.008.
- 14. Pagnini C, Saeed R, Bamias G, Arseneau KO, Pizarro TT, Cominelli F. Probiotics promote gut health through stimulation of epithelial innate immunity. Proc Natl Acad Sci USA. 2010;107:454–459. DOI: 10.1073/pnas.0910307107.
- 15. Lebeer S, Vanderleyden J, De Keersmaecker SCJ. Genes and molecules of lactobacilli supporting probiotic action. Microbiol Mol Biol Rev. 2008;72:728–764. DOI: 10.1128/MMBR.00017-08.
- 16. De Moreno de LeBlanc A, Castillo NA, Perdigon G. Anti-infective mechanisms induced by a probiotic Lactobacillus strain<br>against Salmonella enterica serovar Salmonella enterica serovar Typhimurium infection. Int J Food Microbiol. 2010;138:223–231. Available:https://doi.org/10.1016/j.ijfoodmic ro.2010.01.020
- 17. Castillo NA, Perdigón G, de Moreno de Leblanc A. Oral administration of a probiotic Lactobacillus modulates cytokine production and TLR expression improving the immune response against *Salmonella enterica* serovar Typhimurium infection in mice. BMC Microbiol. 2011;11:177. Available:https://doi.org/10.1186/1471- 2180-11-177
- 18. Galdeano CM, Perdigon G. The probiotic bacterium lactobacillus casei induces activation of the gut mucosal immune system through innate immunity. Clin Vaccine Immunol. 2006;13:219–226. DOI: 10.1128/CVI.13.2.219-226.2006.
- 19. Reddy BS, Riverson A. Inhibitory effect of *Bifidobacterium longum* on colon, mammary and liver carcinogenesis induced by 2-amino-3-methylimidazo [ 4,5 f] quinoline, a food mutagen. Cancer Res. 1993;53:3914–3918.
- 20. Rowland I. Probiotics and benefits to human health – The evidence in favour. Environ. Microbiol. 1999;5:375– 382.

DOI: 10.1046/j.1462-2920.1999.00064.x.

- 21. Marteau P, Flourie B, Pochart P, Chastang C, Desjeux JF, Rambeau JC. Effect of the microbial lactase activity in yoghurt on the intestinal absorption of lactose: An in vivo study in lactase-deficient humans. Braz. J. Nutr. 1990;64:71–79.
- 22. Mailander-Sanchez D, Braunsdorf C, Grumaz C, Muller C, Lorenz S, Stevens P, Wagener J, Hebecker B, Hube B, Bracher F, Sohn K, Schaller M. Antifungal defense of probiotic *Lactobacillus rhamnosus* GG is mediated by blocking adhesion and nutrient depletion. PLoS One. 2017;12(10): e0184438.

Available:https://doi.org/10.1371/ journal.pone.0184438

- 23. Martín R, Chamignon C, Mhedbi-Hajri N, Chain F, Derrien M, Escribano-Vázquez U, Garault P, Cotillard A, Pham HP, Chervaux C, Bermúdez-Humarán LG, Smokvina T, Langella P. The potential probiotic *Lactobacillus rhamnosus* CNCM I-3690 strain protects the intestinal barrier by stimulating both mucus production and cytoprotective response. Sci Rep. 2019; Available: https://doi.org/10.1038/s41598-019-41738- 5.
- 24. Nakazato G, Paganelli FL, Lago JC, Aoki FH, Mobilon C, Brocchi M, Stehling EG, Silveira, WD. Lactobacillus acidophilus decreases Salmonella typhimurium invasion *in vivo*. Journal of Food Safety. 2011;31(2):284-289.
- 25. Forkus B, Ritter S, Vlysidis M, Geldart K, Kaznessis YN. Antimicrobial probiotics reduce *Salmonella enterica* in Turkey gastrointestinal tracts. Sci Rep. 2016;7:1– 9.

DOI:10.1038/srep40695.

- 26. Hirano S, Yokota Y, Eda M, Kuda T, Shikano A, Takahashi H et al. Effect of Lactobacillus plantarum Tennozu-SU2 on *Salmonella* Typhimurium Infection in human enterocyte-like HT-29-Luc cells and BALB/c mice. Probiotics Antimicrob Proteins. 2017;9:64–70. Available:https://doi.org/10.1007/s12602- 016-9243-9.
- 27. Centers for Disease Control and Prevention – CDC National Enteric Disease Surveillance: *Salmonella* Annual Report, 2012. Atlanta, Georgia; 2014. Available:http://www.cdc.gov/ncezid/dfwed/ pdfs/*Salmonella*-annual-report-2012- 508c.pdf. Accessed 05 May 2016.
- 28. Hurley D, McCusker M, Fanning S, Martins M. *Salmonella*–host interactions – modulation of the host innate immune system. Front Immunol. 2014;5:1–11. Available:https://doi.org/10.3389/fimmu.20 14.00481.
- 29. Robinson N, McComb S, Mulligan R, Dudani R, Krishnan L, Sad S. Type I interferon induces necroptosis in<br>macrophages during infection with macrophages during infection with *Salmonella enterica* serovar Typhimurium. Nat Immunol. 2012;13:954–962. DOI:10.1038/ni.2397.
- 30. Kingsley RA, Msefula CL, Thomson NR, Kariuki S, Holt KE, Gordon, MA, Harris D, Clarke L, Whitehead S, Sangal V, Marsh K, Achtman M, Molyneux ME, Cormican M, Parkhill J, MacLennan CA, Heyderman RS, Dougan G. Epidemic multiple drug resistant *Salmonella* Typhimurium causing invasive disease in sub-Saharan Africa have a distinct genotype. Genome Res. 2009;19:2279–2287. DOI: 10.1101/gr.091017.109.
- 31. Ley B, Le Hello S, Lunguya O, Lejon, V, Muyembe J-J, Weill F-X, Jacobs J. Invasive *Salmonella enterica* serotype Typhimurium Republic of the Congo, 2007-2011. Emerg Infect Dis. 2014;20:701–704. DOI: 10.3201/eid2004.131488.
- 32. Warriner K, Namvar A. The tricks learnt by<br>human enteric pathogens from human enteric pathogens from phytopathogens to persist within the plant environment. Curr Opin Biotechnol. 2010;21:131–136. Available:https://doi.org/10.1016/j.copbio.2 010.01.004.
- 33. Behravesh BC, Mody RK, Jungk J, Gaul L, Redd JT, Chen S, Chen S, Cosgrove S, Hedican E, Sweat D, Chávez-Hauser L,

Snow SL, Hanson H, Nguyen TA, Sodha SV, Boore AL, Russo E, Mikoleit M, Theobald L, Gerner-Smidt P, Hoekstra RM, Angulo FJ, Swerdlow DL, Tauxe RV, Griffin PM, Williams IT; *Salmonella* Saintpaul Outbreak Investigation Team. 2008 Outbreak of *Salmonella* Saintpaul Infections Associated with Raw Produce. N Engl J Med. 2011;364:918–927. DOI: 10.1056/NEJMoa1005741.

- 34. Mody RK, Greene SA, Gaul L, Sever A, Pichette S, Zambrana I, Dang T, Gass A, Wood R, Herman K, Cantwell LB, Falkenhorst G, Wannemuehler K, Hoekstra RM, McCullum I, Cone A, Franklin L, Austin J, Delea K, Behravesh CB, Sodha SV, Yee JC, Emanuel B, Al-Khaldi SF, Jefferson V, Williams IT, Griffin PM, Swerdlow DL. National outbreak of *Salmonella* serotype saintpaul infections: importance of Texas restaurant investigations in implicating jalapeño peppers. PLoS One. 2011;6:e16579. Available:https://doi.org/10.1371/journal.po ne.0016579.
- 35. Gonzalez-Escobedo G, Marshall JM, Gunn JS. Chronic and acute infection of the gall bladder by *Salmonella* Typhi: understanding the carrier state. Nat Rev Microbiol. 2011;9:9–14. DOI:10.1038/nrmicro2490.
- 36. Curtiss R, Kelly SM, Gulig PA, Nakayama K. Selective delivery of antigens by recombinant bacteria. Curr Top Microbiol Immunol. 1989;146:35–49.
- 37. Curtiss R, Kelly SM. *Salmonella* Typhimurium deletion mutants lacking adenylate cyclase and cyclic AMP receptor protein are avirulent and immunogenic. Infect Immun. 1987;55:3035–3043. Available:http://iai.asm.org/content/55/12/3 035.short.
- 38. Cravioto A, Gross RJ, Scotland SM, Rowe B. An adhesive factor found in strains of Escherichia coli belonging to the traditional infantile enteropathogenic serotypes. Curr Microbiol. 1979;3:95–99. Available:https://doi.org/10.1007/BF02602

439.

39. Sansonetti PJ, Ryter A, Clerc P, Maurelli AT, Mounier J. Multiplication of Shigella flexneri within HeLa cells: lysis of the phagocytic vacuole and plasmid-mediated contact hemolysis. Infect Immun. 1986;51:461–469.

- 40. Aslim B, Yuksekdag ZN, Sarikaya E, Beyatli Y. Determination of the bacteriocinlike substances produced by some lactic acid bacteria isolated from Turkish dairy products. LWT - Food Sci Technol. 2005;38:691–694. Available:https://doi.org/10.1016/j.lwt.2004. 08.001.
- 41. CLSI Clinical and Laboratory Standards Institute. Performance Standards for Antimicrobial Susceptibility Testing, 21st Informational Supplement. CLSI Document M100-S21. Clinical and Laboratory Standards Institute, Wayne; 2011.
- 42. Lima ET, Filho ARL, Okamoto AS, Noujaim JC, Barros MR, Crocci AJ. Evaluation *in vitro* of the antagonistic substances produced by Lactobacillus spp. isolated from chickens. Can J Vet Res. 2007;71:103–107. Available:https://www.ncbi.nlm.nih.gov/pm
- c/articles/PMC1829185/. 43. Coconnier MH, Lievin V, Hemery E, Servin AL. Antagonistic activity against helicobacter infection *in vitro* and *in vivo* by the human Lactobacillus acidophilus strain LB. Appl Environ Microbiol. 1998;64:4573– 4580.

Available:http://aem.asm.org/content/64/11 /4573.long

- 44. Hayek SA, Ibrahim SA. Current limitations and challenges with lactic acid bacteria: A review. Food Nutr Sci. 2013;4:73–87. Available:https://doi.org/10.1016/j.jbiotec.2 016.08.008.
- 45. Tellez G, Rodríguez-Fragoso L, Kuttappan V, Kallapura G, Velasco X., Menconi A. Probiotics for human and poultry use in the control of gastrointestinal disease: A review of real-world experiences. Altern Integr Med. 2013;2:1–6. DOI: 10.4172/2327-5162.1000118.
- 46. Gómez NC, Ramiro JMP, Quecan BXV, de Melo Franco BDG. Use of potential probiotic Lactic Acid Bacteria (LAB) biofilms for the control of listeria monocytogenes, *Salmonella* Typhimurium, and *Escherichia coli* O157:H7 Biofilms Formation. Front Microbiol. 2016;7:1–15. Available:https://doi.org/10.3389/fmicb.201 6.00863.
- 47. Ogawa M, Shimizu K, Nomoto K, Tanaka R, Hamabata T, Yamasaki S, Takeda T, Takeda Y. Inhibition of *in vitro* growth of Shiga toxin-producing *Escherichia coli* O157:H7 by probiotic Lactobacillus strains

due to production of lactic acid. Int J Food Microbiol. 2001;68:135–140. Available:https://doi.org/10.1016/S0168- 1605(01)00465-2.

- 48. Pereira VG, Gómez RJHC. Antimicrobial activity of Lactobacillus acidophilus against foodborne pathogens. Semina: Ciênc Agrár. 2007;28:229–240. Available:http://dx.doi.org/10.5433/1679- 0359.2007v28n2p229.
- 49. Chen C-Y, Tsen H-Y, Lin C-L, Yu B, Chen, C-S. Oral administration of a combination of select lactic acid bacteria strains to reduce the *Salmonella* invasion and inflammation of broiler chicks. Poult Sci. 2012;91:2139–2147. Available:https://doi.org/10.3382/ps.2012- 02237
- 50. Nakazato G, Paganelli FL, Lago JC, Aoki FH, Mobilon C, Brocchi M, et al. *Lactobacillus acidophilus* decreases *Salmonella* Typhimurium invasion *in vivo*. J Food Safety. 2011;31:284–289. DOI: 10.1111/j.1745-4565.2011.00299.x.
- 51. Acurcio LB, Sandes SHC, Bastos RW, Sant'anna FM, Pedroso DC, Reis DC, Nunes ÁC, Cassali GD, Souza MR, Nicoli JR. Milk fermented by Lactobacillus species from Brazilian artisanal cheese protect germ-free-mice against *Salmonella* Typhimurium infection. Benef Microbes. 2017;8:579-588.

Available:https://doi.org/10.3920/BM2016.0 163

- 52. Kim Y, Mylonakis E. Caenorhabditis elegans immune conditioning with the probiotic bacterium Lactobacillus acidophilus strain NCFM enhances grampositive immune responses. Infect Immun. 2012;80:2500–2508. DOI: 10.1128/IAI.06350-11.
- 53. Lee J, Yun HS, Cho KW, Oh S, Kim SH,
	- Chun T, Kim B, Whang KY. Evaluation of probiotic characteristics of newly isolated Lactobacillus spp.: Immune modulation

and longevity. Int J Food Microbiol. 2011;48:80–86.

Available:https://doi.org/10.1016/j.ijfoodmic ro.2011.05.003

54. Trapecar M, Goropevsek A, Gorenjak M, Gradisnik L, Slak Rupnik M. A co-culture model of the developing small intestine offers new insight in the early immunomodulation of enterocytes and macrophages by lactobacillus spp. through STAT1 and NF-kB p65 translocation. PLoS One. 2014;9:e86297. Available:https://doi.org/10.1371/journal.po

ne.0086297

- 55. Yu Q, Yuan L, Deng J, Yang Q. Lactobacillus protects the integrity of intestinal epithelial barrier damaged by pathogenic bacteria. Front Cell Infect Microbiol. 2015;5:26. Available:https://doi.org/10.3389/fcimb.201 5.00026.
- 56. Kemgang TS, Kapila S, Shanmugam VP, Reddi S, Kapila R. Fermented milk with probiotic *Lactobacillus rhamnosus* S1K3 (MTCC5957) protects mice from *Salmonella* by enhancing immune and non-immune protection mechanisms at intestinal mucosal level. J Nutr Biochem. 2015;30:62-73.

Available:https://doi.org/10.1016/j.jnutbio.2 015.11.018

- 57. Shen T-Y, Qin H-L, Gao Z-G, Fan X-B, Hang X-M, Jiang Y-Q. Influences of enteral nutrition combined with probiotics on gut microflora and barrier function of rats with abdominal infection. World J Gastroenterol. 2006;12:4352–4358. DOI: 10.3748/wjg.v12.i27.4352.
- 58. Jones BD, Ghori N, Falkow S. *Salmonella* Typhimurium initiates murine infection by penetrating and destroying the specialized epithelial M cells of the Peyer's patches. J Exp Med. 1994;180:15–23. Available:https://www.ncbi.nlm.nih.gov/pm c/articles/PMC2191576/

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