

1 *In vitro* effect of commercial sweeteners on *Streptococcus Mutans* and  
2 *Lactobacillus acidophilus* growth.

3  
4 Abstract

5 **Purpose:** To evaluate the effect of two commercial sweeteners based on steviol  
6 glycosides or sucralose on *Streptococcus mutans* and *Lactobacillus acidophilus*  
7 growth and biofilm formation, as well as the pH change produced by their  
8 metabolism.

9 **Materials and methods:** 420 bacterial inoculum were assigned to 12 study groups  
10 (n=35) according to bacterial type (*Streptococcus mutans* or *Lactobacillus*  
11 *acidophilus*), sweetener type (sucrose, sucralose, steviol glycosides) and incubation  
12 time (one hour or 24 hours). Bacterial growth and biofilm formation were measured  
13 by spectrophotometry. The pH value was determined using a potentiometer.

14 **Results:** ANOVA and student t tests showed statistically significant differences in  
15 bacterial growth and biofilm formation with both strains and the three sweeteners.

16 **Conclusions:** The sweeteners evaluated do not only present the active substance  
17 they promote, they use a mixture of different sweeteners and additives whose impact  
18 on the growth of acidogenic bacteria may not be beneficial for the prevention of  
19 caries.

20  
21 **Keywords:** Dental caries, commercial sweeteners, *Streptococcus mutans*,  
22 *Lactobacillus acidophilus*, bacterial growth.

25 Introduction

26 Dental caries is one of the most prevalent diseases in the world. In the Global Burden  
27 of Disease Study, the World Health Organization (WHO) reports that oral diseases  
28 affect half of the world's population (3580 million people). Dental caries in permanent  
29 teeth is the most prevalent disorder in the world .<sup>17</sup> Approximately 2.4 billion people  
30 have permanent tooth caries and 486 million children have temporary tooth caries.<sup>18</sup>

31

32 Dental caries can be prevented with good hygiene habits, moderating the  
33 consumption of cariogenic foods and keeping the acidogenic bacteria in  
34 balance.<sup>1,9,14,18</sup> Sucrose is considered the most important cariogenic food in the  
35 human's diet.<sup>7,16,19</sup> Its abuse promotes diabetes and obesity and provides a  
36 favorable oral environment for the proliferation of acidophilus bacteria that include  
37 *Streptococcus mutans* and *Lactobacillus acidophilus*.<sup>7,10</sup>

38

39 Dietary modification is a useful strategy to decrease the sucrose use.<sup>13</sup> Consumption  
40 of commercial sweeteners promises a sweet taste with fewer calories, accessible  
41 costs, and claim to be better nutritional supplements. However, most studies  
42 conducted to evaluate the effect of sweeteners have focused on measuring the  
43 effects of the active substance.<sup>11</sup> Unfortunately, the use of sweeteners at the  
44 population level is through commercial presentations and not only is the active  
45 substance consumed. Additional components (additives) may influence the results  
46 of the active substance.

47

48 Materials and methods

49 An experimental study was carried out. 210 inoculums of *Streptococcus mutans*  
50 strains (ATCC 25175) and 210 inoculums of *Lactobacillus acidophilus* strains (ATCC  
51 4356) were used. Twelve study groups (n=35) were formed as indicated in Table 1.

52

### 53 Preparation of inoculums

54 The bacteria were inoculated in dextrose-free nutrient broth sterile and incubated at  
55 37°C for 24 hrs. Subsequently, the bacterial growth was adjusted with dextrose-free  
56 nutritive broth sterile until a level of 0.05 on the McFarland scale, equivalent to 0.08  
57 turbidity at a length of 630 nm was reached so that all inoculums started with the  
58 same concentration of bacterial cells.

59

### 60 Sweeteners solutions

61 Standard sweetener solutions were made, according to the manufacturer's  
62 specifications, at a concentration equivalent to 2 teaspoons (common amount used  
63 to sweeten beverages) as follows:

64 Sucrose solution (control group): 5g sachet was dissolved in 250 ml of sterile distilled  
65 water. Commercial sweetener solution based on sucralose: one 1g sachet was  
66 diluted in 250 ml of sterile distilled water. Commercial sweetener solution based on  
67 steviol glycosides: one 1g sachet was diluted in 250 ml of sterile distilled water.

68

### 69 Bacterial growth

70 8ml of sterile glucose-free soy broth was placed in test tubes. Subsequently, 1ml of  
71 the bacterial inoculum and 1ml of the sweetener solution to be evaluated were

72 added. They were incubated at 37°C without agitation and 1h and 24 hrs were  
73 evaluated after incubation.

74

75 Measurement of bacterial growth

76 Bacterial growth was homogenized by tube inversion. Subsequently, 3 ml of the  
77 inoculated culture medium was taken and placed in spectrophotometer cells.

78 Absorbance was measured at a wavelength of 630nm. Uninoculated broth was  
79 used as a control. <sup>7</sup>

80

81 pH measurement

82 The pH was measured using a microelectrode coupled to a portable pH meter that  
83 was previously calibrated with pH 7 and pH 4 buffer solutions. Initially, the tip of the  
84 pH electrode was soaked in KCl solution. Once prepared, the electrode was stored  
85 in a reference buffer (pH = 7). Before and after each reading, the electrode was  
86 calibrated against the standard pH buffers at pH 4 and 7. Between each reading,  
87 the electrode was cleaned in distilled water and dried on absorbent paper.

88

89 Study and quantification of biofilm formation.

90 Staining tests were carried as follows: In sterile Petri dishes, sterile coverslip were  
91 placed individually. They were covered with 1 ml of Mc Farland's 0.05 bacterial  
92 inoculum, 1 ml of sweetener solution and 8 ml of sterile glucose-free soy trypticasein

93 broth. They were incubated at 37°C. 6 groups were incubated for one hour and 6  
94 groups were incubated for 24 hours as specified in Table 1.

95

96 After incubation, the coverslip was removed and washed with 5ml of sterile distilled  
97 water three times. The biofilm formed on the coverslip was stained with 1 ml of crystal  
98 violet and allowed to stand for 45 minutes at room temperature. It was then washed  
99 5 times with sterile distilled water to eliminate non-adherent bacteria. Subsequently,  
100 3 ml of 95% ethanol was added to obtain the stained biofilm. It was left to rest for 3  
101 minutes. Finally, the 3 ml of alcohol with colored biofilm were collected from each  
102 sample and placed in cells for spectrophotometer. The optical density was measured  
103 at 540 nm with a spectrophotometer. Wells without bacterial inoculum were used as  
104 negative controls.

105

#### 106 Data processing

107 All experiments were performed in triplicate in independent trials. Quantitative  
108 variables generated were analyzed descriptively. Means and standard deviations  
109 were calculated. Mean comparisons were made using ANOVA and student t.  
110 Statistical analyses were performed using the statistical package stata version 15.

111

#### 112 Results

##### 113 Measurement of bacterial growth

114 All study groups showed higher bacterial growth at 24 hrs. The groups of the  
115 commercial sweetener based on steviol glycosides showed greater bacterial growth  
116 from the first hour of incubation. The results are shown in Table 2.

117 *S. mutans* had a higher growth both in incubation of one hour and 24 hours in the  
118 presence of the commercial sweetener based on steviol glycosides, even with higher  
119 growth than the control group added with sucrose (Table 3). *L. acidophilus* growth  
120 was higher in the presence of the commercial steviol glycoside based sweetener for  
121 all evaluations. The results are shown in Table 3.

122

123 pH measurement

124 No statistically significant differences were found in the pH values. In general, pH  
125 values ranged between 5.6 and 7.1 for groups with sucrose, 5.7 and 6.9 for groups  
126 with sucralose sweetener and between 5.7 and 7.3 for groups with commercial  
127 steviol glycoside sweetener.

128

129 Biofilm

130 Statistically significant differences were observed for all measurements as shown in  
131 Table 4.

132

133 Discussion

134 The highest bacterial growth was observed at 24 hours in all study groups, this  
135 coincides with the knowledge that people who do not have habits that help them  
136 eliminate dentobacterial plaque acidogenic immediately after consuming food are  
137 exposed to increased cariogenic activity. The time of formation and maturation of  
138 dentobacterial plaque is a process that lasts up to approximately 2 weeks, but the  
139 first 48 hours are essential for bacterial colonization.<sup>15</sup>

140

141 The hypothesis of this study proposed that the greatest bacterial growth would be  
142 found in the sucrose control groups, since it is considered the most cariogenic  
143 sweetener. However, the study group supplemented with commercial sweetener  
144 based on steviol glycosides (which also contains sucrose and sucralose) exceeded  
145 the levels of bacterial growth and acid pH of sucrose.

146

147 These results contrast with the publications by Brambilla, Ferrazzano and Siraj<sup>3,6,17</sup>  
148 which classify steviol glycosides as an excellent sweetener attributing anti-  
149 cariogenic and antiperiodontopathic properties. It is important to note that in these  
150 background studies, only the active substance of the sweetener was evaluated. This  
151 study, on the other hand, found that the commercial presentation promotes bacterial  
152 growth by providing acidogenic bacteria with an optimal environment for their  
153 development from the first hour of incubation. It is possible to suggest that the  
154 commercial presentation of steviol glycosides evaluated, because it is added with  
155 sucrose and sucralose can greatly affect the oral health of the population.

156

157 The commercial sweetener based on sucralose was found to be added with dextrose  
158 and maltodextrin. It maintained bacterial growth levels like the sucrose control group  
159 except after 24 hours of incubation. At this point the bacterial growth was lower.  
160 Possibly, in the long term, additives do not provide an optimal environment for  
161 bacterial growth such as sucrose.

162

163 With respect to the pH obtained in the study, we can observe that all the groups  
164 include critical pH values. It has been documented that lower pH levels from 5.5  
165 demineralize dental enamel.<sup>5</sup> After 24 hours the pH increased and we can observe  
166 that the levels are close to the optimal pH levels in the mouth (6.7). This aspect is  
167 important because according to Carter, Marsh and Zambrano,<sup>4,12,20</sup> the effect of  
168 cariogenic foods, especially sucrose, resides in the lowering of pH levels. The  
169 microorganisms found in the dentobacterial plaque metabolize the sugar and acidify  
170 the oral environment, which causes demineralization of the dental enamel and  
171 results in caries.

172

### 173 Conclusions

- 174 • The sweeteners evaluated do not present only the active substance they  
175 promote. They use a mixture of different sweeteners and additives.



- 176 • The commercial sweetener based on steviol glycosides (added with sucrose and  
177 sucralose) promotes bacterial growth of *Streptococcus mutans* and *Lactobacillus*  
178 *acidophilus*.
- 179 • The commercial sweetener based on sucralose (added with dextrose and  
180 maltodextrin) showed a lower growth than the control group sucrose and the  
181 commercial sweetener based on steviol glycosides.
- 182 • The biggest promoter of biofilm was the sweetener based on sucralose. Its use  
183 could impact on the dentobacterial plaque formation at a level that could be  
184 detrimental to the prevention of caries.
- 185 • The sweeteners evaluated generate a critical pH, which could increase the risk  
186 of caries.
- 187 • The use of commercial sweeteners for the prevention of caries or to promote oral  
188 health may not be appropriate.

189

## 190 REFERENCES

191

- 192 1. American Dietetic Association. Position of the American Dietetic Association:  
193 Use of nutritive and nonnutritive sweeteners. Journal Of The American  
194 Dietetic Association, 2014;104:255-275  
195 <https://doi.org/10.1016/j.jada.2003.12.001> PMID:14760578
- 196 2. Brambilla E, Cagetti MG, Ionescu A, Campus G, Lingström P. An in vitro and  
197 in vivo comparison of the effect of *Stevia rebaudiana* extracts on different

- 198 caries- related variables: a randomized controlled trial pilot study. Caries Res  
199 2014;48:19–23. <https://doi.org/10.1159/000351650>
- 200 3. Carter K, Landini G, Walmsley DA. Automated quantification of dental plaque  
201 accumulatioos using digital imaging. Journal Of Dentistry, 2004; 32: 623-628.  
202 <https://doi.org/10.1016/j.ident.2004.06.006> PMID:15476956
- 203 4. Dong YM, Pearce EIF, Yue L, Larsen MJ, Gao XJ, Wang JD. Plaque pH and  
204 Associated Parameters in Relation to Caries. Caries Res 1999;33:428-436.  
205 doi: 10.1159/000016547
- 206 5. Ferrazzano GF, Cantile T, Alcidi B, Coda M, Ingenito A, Zarrelli A, Di Fabio  
207 G, Pollio A. Is Stevia rebaudiana Bertoni a Non Cariogenic Sweetener? A  
208 Review. Molecules. 2015 Dec 26;21(1):E38. doi:  
209 10.3390/molecules21010038.
- 210 6. Ganter J, Hellwig E, Doerken S et al. Clin Oral Invest 2019.  
211 <https://doi.org/10.1007/s00784-019-02908-x>
- 212 7. Gutiérrez LA, Agudelo DA, Control del crecimiento In Vitro sobre cepas Gram  
213 positivas y Gram negativas productoras de mastitis. Rev. Lasallista de  
214 Investigación 2009, 6.
- 215 8. Harris N, García-Godoy F. Nielsen Nathe C. Primary Preventive Dentistry.  
216 England, Pearson Education Limited, 2014.
- 217 9. Krzyściak W, Jurczak A, Kościelniak D, Bystrowska B, Skalniak A. The  
218 virulence of *Streptococcus mutans* and the ability to form biofilms. Eur J Clin  
219 Microbiol Infect Dis 2014;33:499–515 DOI: 10.1007/s10096-013-1993-

- 220 10.Lohner S, Toews I, Meerpohl JJ. Health outcomes of non-nutritive  
221 sweeteners: analysis of the research landscape. *Nutr J* 2017;16(1):55.  
222 <https://doi.org/10.1186/s12937-017-0278-x>
- 223 11.Marsh PD. Dental plaque as a biofilm and Microbial community-implications  
224 for health and disease. *BMC Oral Health*. 2006;6:1-7. doi: 10.1186/1472-  
225 6831-6-S1-S14
- 226 12.Miller D. Micro-Organisms and Dental Caries *Am J Dent Sci*. 1884 Aug; 18(4):  
227 164–173. PMID: 30757759
- 228 13.Moynihan P. Sugars and Dental Caries: Evidence for Setting a  
229 Recommended Threshold for Intake. *American Society For Nutrition* 2016;  
230 7:149–56 DOI: 10.3945/an.115.009365
- 231 14.Rugg-Gunn A. Dental Caries: Strategies to control this preventable disease.  
232 *Acta Medica Academica* 2013;42(2):117-130. DOI: 10.5644/ama2006-  
233 124.80
- 234 15.Alex MV. The Structure of Dental Plaque Microbial Communities in the  
235 Transition from Health to Dental Caries and Periodontal Disease, *J Molec Biol*  
236 2019;431(16):2957-2969, <https://doi.org/10.1016/j.jmb.2019.05.016>.
- 237 16.Siraj ES, Pushpanjali K, Manoranjitha BS. Efficacy of stevioside sweetener  
238 on pH of plaque among young adults. *Dent Res J (Isfahan)*. 2019 Mar-  
239 Apr;16(2):104-109 PMID: 30820204; PMID: PMC6364349.
- 240 17.World Health Organization. World Oral Health Report 2018. [internet]  
241 Accessed 20 september, 2019. Available from: [https://www.who.int/es/news-](https://www.who.int/es/news-room/fact-sheets/detail/oral-health)  
242 [room/fact-sheets/detail/oral-health](https://www.who.int/es/news-room/fact-sheets/detail/oral-health)

243 18.Xiao MI, Klein ML, Falsetta B Lu CM, Delahunty JR Yates, et al. The  
244 exopolysaccharide matrix modulates the interaction between 3D architecture  
245 and virulence of a mixed-species oral biofilm PLoS Pathog 2012 Article  
246 e1002623, 10.1371/journal.ppat.1002623

247 19.Zambrano AM, Suárez LL. Biofilms:implications for health and disease.  
248 Univeristas Odontológicas 2006;25(5-7):19-25.

249

250

251

252

253

254

255

256

257

258

259

260

261

262

<b>Table 1. Study groups distribution</b>				
<b>Group</b>	<b>n</b>	<b>Bacteria</b>	<b>Commercial sweetener</b>	<b>Incubation time</b>
<b>1</b>	35	<i>Streptococcus mutans</i>	Sucrose	1hr
<b>2</b>	35	<i>Streptococcus mutans</i>	Sucrose	24hr
<b>3</b>	35	<i>Streptococcus mutans</i>	Commercial sweetener based on sucralose (additives: dextrose and maltodextrin)	1hr
<b>4</b>	35	<i>Streptococcus mutans</i>	Commercial sweetener based on sucralose (additives: dextrose and maltodextrin)	24hr
<b>5</b>	35	<i>Streptococcus mutans</i>	Commercial sweetener based on steviol glycosides (additives: sucrose and sucralose)	1hr
<b>6</b>	35	<i>Streptococcus mutans</i>	Commercial sweetener based on steviol glycosides (additives: sucrose and sucralose)	24hr
<b>7</b>	35	<i>Lactobacillus acidophilus</i>	Sucrose	1hr
<b>8</b>	35	<i>Lactobacillus acidophilus</i>	Sucrose	24hr
<b>9</b>	35	<i>Lactobacillus acidophilus</i>	Commercial sweetener based on sucralose (additives: dextrose and maltodextrin).	1hr
<b>10</b>	35	<i>Lactobacillus acidophilus</i>	Commercial sweetener based on sucralose (additives: dextrose and maltodextrin).	24hr
<b>11</b>	35	<i>Lactobacillus acidophilus</i>	Commercial sweetener based on steviol glycosides (additives: sucrose and sucralose)	1hr
<b>12</b>	35	<i>Lactobacillus acidophilus</i>	Commercial sweetener based on steviol glycosides (additives: sucrose and sucralose)	24hr

263

264

265

266

**Table 2. Mean difference in bacterial growth between groups of sweetener with different incubation time**

<b>Group</b>	<b>Commercial sweetener</b>	<b>Bacteria</b>	<b>Incubation time</b>	<b>Mean value</b>	<b>SD</b>	<b>p</b>
<b>1</b>	Sucrose	<i>S. mutans</i>	1hr	0.497	0.037	<b>≤0.01</b>
<b>2</b>			24hr	<b>1.288</b>	0.133	
<b>3</b>	Commercial sweetener based on sucralose (additives: dextrose and maltodextrin)	<i>S. mutans</i>	1hr	0.515	0.044	<b>≤0.01</b>
<b>4</b>			24hr	<b>1.105</b>	0.134	
<b>5</b>	Commercial sweetener based on steviol glycosides (additives: sucrose and sucralose)	<i>S. mutans</i>	1hr	1.281	0.089	<b>0.02</b>
<b>6</b>			24hr	<b>1.319</b>	0.0393	
<b>7</b>	Sucrose	<i>L. acidophilus</i>	1hr	0.485	0.039	<b>≤0.01</b>
<b>8</b>			24hr	<b>0.691</b>	0.189	
<b>9</b>	Commercial sweetener based on sucralose (additives: dextrose and maltodextrin)	<i>L. acidophilus</i>	1hr	0.485	0.039	<b>≤0.01</b>
<b>10</b>			24hr	<b>0.691</b>	0.189	
<b>11</b>	Commercial sweetener based on steviol glycosides (additives: sucrose and sucralose)	<i>L. acidophilus</i>	1hr	0.532	0.045	<b>≤0.01</b>
<b>12</b>			24hr	<b>1.540</b>	0.129	

Abs: Absorbance. SD: Standar deviation. Student T test for mean difference  $p \geq 0.05$ .