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FACTORS AFFECTING BACTERIA CONTAMINATION AMONG FOOD HANDLERS AT A PUBLIC HOSPITAL IN SOUTH SUMATRA, INDONESIA

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Abstract. Food-borne diseases caused by pathogenic bacteria (especially *Escherichia coli*) are one of the main causes of mortality in some developing 19 intries. Hospitals are one of the potential places from where food-borne diseases might spread. The food handlers working in the hospital have a major role in the distribution of pathogenic bacteria because they are directly involved in the hospital's food chain. This study aimed to determine bacteria contamination among 30 food handlers based on some influencing factors, such as education level, work experience, worker's behavior, and hygiene training at a public hospital in South Sumatra, Indonesia. To study the correlation between some factors with the level of *E. coli* contamina 12, the bivariate analysis was performed. The results of the bivariate analysis revealed that there 13 s a significant relationship between the education level and work experience of the food handlers with the level of *E. coli* contamination (p-value \leq 13 b). In the other hand, there was no significant relationship between behavior and hygiene training with the level of *E. coli* contamination (p-value \geq 0.05). This study indicates the importance of socialization about food hygiene and regular rectal swab test for food handlers to ensure their health level.

Keywords: Escherichia coli, rectal swab, hygiene, infection, bivariate analysis

Introduction

Food handlers working in hospitals are people who directly involved in the food chain processing until the food distribution to the patients. The role of food handlers in spreading diseases is the contact between food handlers suffering infectious diseases with the food source itself. Subsequently, the food is consumed by the patient and causes nosocomial infections.

Food handlers who work in the food service sector with potential source of pathogenic organism infection (Acikel et al., 2008; Mukhopadhyay et al., 2016; Anjum et al., 2017; Gemeda et al., 2018). The food contamination occurs during food chain process including preparation, production, processing, and the food distribution (Permenkes RI, 2011; Anuradha and Dandekar, 2014; Mukhopadhyay et al., 2016). The risk of bacteria contamination to the food

handlers depends on their health status, personal hygiene, knowledge, and the hygiene præsice (Esparar et al., 2010; Dahiru et al., 2016).

Foodborne disease is defined as illness resulting from the consumption of contaminated food; food can be contaminated with microbial pathogens or a toxic substance (Unicomb, 2009). Most of the foodborne diseases happen because the food handlers have tras mitted the bacteria or viruses through improper food handling and poor sanitation. The hands of food-handlers can serve as vectors in the spread of food-borne diseases due to poor personal hygiene or cross-contamination. Recent days, the food-borne diseases become a major health problem in developing countries, such as Ethiopia (Girma et al., 2017; Gemeda et al., 2018), Nigeria (Dahiru et al., 2016), Iran (Heyda Hengami et al., 2018), and Indonesia (Chantika, et al., 2016; Kurniasih et al., 2015). The global incidence of food-borne diseases is difficult to estimate, but it was reported that in 2005 there were 1.8 million people killed from diarrheal diseases. This case can be linked to food and drinking water pollution (WHO, 2007, 2008).

As located in a developing country, the health problem is one of the concerning issues in Palembang, South Sumatra-Indonesia. The public hospital in South Sumatra serves many patients every day. Based on the preliminary research, the supervision of food hygiene and sanitation by the Environmental Health Department and the Nutritional Departments should be improved to ensure the public hospital sanitation. In the other hand, the Department of Infectious Disease only evaluates adherence of the hygiene activities in the food sanitation. Therefore, further study is required to perform the synergistic responsible of the three departments for food sanitation and hygiene. The food processing at a public hospital in South Sumatra should be improved to ensure the quality of food services, especially for patients.

Commonly, the parameter of hygiene is the presence of *Staphylococcus aureus* bacteria, while the parameter of sanitation is *Escherichia coli* contamination. This research is focused on *E. coli* contamination which 15 pund in food handlers due to the poor sanitation of the hospital's workers (Hanekom et al., 2010; Kurniasih et al., 2015; Switaj et al., 2015; Dahiru et 22, 2016; Nasrolahei et al., 2016). *Escherichia coli* or commonly abbreviated as *E. coli* is one of the common gram-negative bacteria. In general, these bacteria can be found in the human colon and fec 21 (Switaj et al., 2015; Nasrolahei et al., 2017). Most of *E. coli* is harmless, however, *E* 111 pli type O157: H7 can cause bloody diarrhea because produces verotoxins (Lourenco et al., 2011; Switaj et al., 2015).

This study was to overview the *E. coli* contamination among food handlers at a public hospital in South Sumatra and also analyzes the factors affecting *E. coli* contamination among food handlers at the Nutrition Department and apublic hospital in South Sumatra. In addition, this research also offers an effort to reduce the risk of *E. coli* contamination in the food handlers.

4 Materials and methods

This study was a cross-sectional design including data collection simultaneously with a descriptive quantitative approach, bacteria investigation, and factors that influence the health rate of food handlers at a public hospital in South Sumatra. The study was conducted to determine bacteria contamination among 30 food handlers at a public hospital in South Sumatra, as the population in this study. The dependent variable was *E. coli* contamination on food handler's sample. The independent variables were

education level, work experience, behavior, and hygiene training. The education level was divided into two sub-variables, which consisted of a middle (senior high school) and low (elementary and junior high school). The work experience was divided into two sub-variables which consisted of more and less than 3 years. The worker's behavior was divided into two sub-variables which consist of following and not following Standard Operation Procedure. The hygiene training was also divided into two sub-variables, which consist of attending and not attending the training related to the hygiene process.

Interviews were conducted with all food handlers working at the hospital. Total of 30 respondents was interviewed and 30 samples of rectal swabs were obtained from the corresponding workers for further testing. Preparation of the bacteria samples follows the WHO standard (WHO, 2003) using a rectal swab for *E. coli* bacteria (Esparar et al., 2004). Swab sampling and laboratory identification were analyzed in the Laboratory of Environmental Health 4enter Palembang.

Bivariate analysis was carried out to investigate the quantitative distribution of independent and dependent variables. Bivariate analysis was also performed to examine the correlation between each of the independent variables and the dependent variable. This was achieved by comparing the p-value to study the level of significance (Emzir, 2009). The factors investigated were education level, work experience, behavior, and hygiene training for staff at a public hospital in South Sumatra.

Results

The *E. coli* contamination shows the sanitation rate of the hospital's employees. *Table 1* shows that 36.7% of the food handlers staff at a public hospital in South Sumatra are positively contaminated with *E. coli*, while 63.3% of them are not indicated to be contaminated with *E. coli*.

Table 1. Analysis of E. coli contamination among the food handlers a public hospital in South Sumatra

No	Results	Food	Food handlers		
No		Quantity	Percent (%)		
1.	Not contaminated	19	63.3		
2.	Contaminated	11	36.7		
	Total	30	100		

Bivariate analysis was carried out on the characteristics of respondents and risk factors for $E.\ coli$ exposure, especially those with a probability value less than 0.05 (p < 0.05). The analysis results will describe the risk factors for $E.\ coli$ contamination without considering the existence of other independent variables. The bivariate analysis was carried out by making a double crosstab (2 × 2), the respondent's characteristics, and the risk factors which estimated to affect the $E.\ coli$ contamination.

Tab 102 shows the correlation between education levels and E. coli contamination. The p-value is 0.015 or $p \le 0.05$ indicating that there is a significant correlation between the education level and E. coli contamination incident.

Table 3 reveals a correlation between work experience and E. coli contamination incident. The obtained p-value is 0.02 or p \leq 0.05 indicating the significant correlation between work experience and the E. coli contamination.

Table 4 shows correlation between food handler's behavior and *E. coli* contamination. The p-value is 0.37 or $p \ge 0.05$ indicating no significant correlation between worker's behavior and the *E. coli* contamination.

Table 5 shows the correlation tetween training related to the food handler's job and $E.\ coli$ contamination. The p-value is 0.15 or $p \ge 0.05$ indicating that there is no significant correlation between the training profile and $E.\ coli$ contamination incident.

Table 2. Correlation between education level and E. coli contamination

E coli	Edu	p-value			
E con	Low	%	Middle	%	
Negative	1	5	19	95	
Positive	4	40	6	60	0.015
Total	5	16.7	25	83.3	30

Table 3. Correlation between work experience and E. coli contamination

EP	Work experience				
E coli	<3 years	%	> 3 years	%	p-value
Negative	6	30	14	70	
Positive	9	90	1	10	0.02
Total	15	50	15	50	30

Table 4. Correlation between behavior of food handlers and E. coli contamination

E and	Behavior				
E coli	Following SOP	%	Not following SOP	%	p-value
Negative	6	30	14	70	
Positive	7	70	3	30	0.37
Total	13	43.3	17	56.7	30

Table 5. Correlation between food handler's training and E. coli contamination

EE					
E coli	No	%	Yes	%	p-value
Negative	2	10	18	90	
Positive	5	50	5	50	0.15
Total	7	23.3	23	76.7	30

Discussion

E. coli contamination is exclusively coming from fecal. It is transmitted through the fecal contamination of food and water, as well as cross-contamination, and by human contact during the food preparation. Meanwhile, the primary contamination source is the consumption of contaminated food, such as undercontaged food or raw milk. For this reason, Lambrechts et al. (2014) proposed that *E. coli* contamination of the hands of

3

food handlers as an indicator of a hand-washing efficiency. The hands of ready-to-eat food service food handlers have been the main vector for spreading food-borne diseases. Furthermore, Hoses et al. (1996) stated that improper food handlers practice contributed up to 97% of foodborne illnesses in 3 od service establishments and homes. Even, the study of Wilson et al. (2017) revealed that food poisoning originated from the catering industry contributed 70% higher than that caused by other sectors.

Factors affecting *E. coli* contamination of food handlers include the knowledge and the food handling process. The food handler's responsibilities include providing the foodstuffs, storing the foodstuffs, processing the food, and distributing the food to patients or other hospital staffs. Our investigation reveals that there are still less than 50% of food handlers at a public hospital in South Sumatra who work not in accordance with the SOP. The reason given by workers regarding this problem is they are not familiar and they feel uncomfortable when using the work equipment (apron, gloves, head cover, etc.).

A total of 63.3% of food handlers are not indicated in *E. coli* contamination, while 36.7% of food handlers are indicated *E. coli* contamination. In general, 75% of the food handlers worker a public hospital in South Sumatra have a high school education background, 33.3% of them still have work experience less than 3 years, 26.7% of them do not follow the SOP in their work, and 33.3% of them have never attended the formal training related to their work.

These results are in accordance with the previous study conducted by Lazarevic et al. (2013). They revealed that the most general isolated bacteria in food handler's cases are *E. coli*. Another study by Nasrolahei et al. (2016) showed that there were 29.2% of 220 respondents contaminated with *E. coli* bacteria. Oundo et al. (2008) studied *E. coli* contamination of food handlers in three different locations in Kenya. They got 1.2% samples in Diani, 4% samples in Malindi, and 1.8% samples in Nairobi are contaminated by *E. coli*.

By finding a significant relationship between work experience, the food handler's behavior, and the *E. coli* contamination; special attention is required to improve the employee's behavior. The effort to reduce contamination of *E. coli* bacteria at a public hospital in South Sumatra is by providing socialization or related training about hygiene implementation as well as regular health checks for the food handlers. Because 36.7% of food handlers at a public hospital in South Sumatra are infected with *E. coli*, it is necessary to have rectal swab test intensively to check the health level of the footh handlers. This suggestion is in accordance with several studies conducted by El Derea et al. (2008), Lazarevic et al. (2013), Ngivu (2016), Sande et al. (2014), Sharif et al. (2013, 2015), and Zaglool, et al. (2011).

Conclusion

24

A total of 36.7% of food handlers at a public hospital in South Sumatra are indicated to have *E. coli* contamination. The results of the bivariate analysis show that some factors including the education level and words xperience significantly affected the factors including the education level and words xperience significantly affected the factors including the education level and words xperience significantly affected the factors including the education level and hygiene training with the *E. coli* contamination level. This study revealed the importance of socialization about food hygiene and regular rectal swab test for food handlers to reduce the risk of *E. coli* contamination among the food handlers. Future studies may include investigation of other bacteria and

viruses that might contaminate the food handlers as well as the effectiveness of lathering on bacteria removal from hands.

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