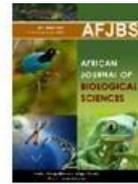


<https://doi.org/10.33472/AFJBS.6.10.2024.4509-4523>



African Journal of Biological Sciences

Journal homepage: <http://www.afjbs.com>



Research Paper

Open Access

Microbiological Hazards of *S. aureus* Contaminant in Street Food in Developing Countries: A Literature Review

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Article History

Volume 6, Issue 10, 2024

Received: 28 Apr 2024

Accepted : 25 May 2024

doi: 10.33472/AFJBS.6.10.2024.4509-4523

ABSTRACT

Aims: This literature review aims to explain the microbiological dangers of *S. aureus* in street food based on the level of contamination, the spread of *S. aureus* from the habitat to entering the food and the dangers posed by this contamination.

Methodology and results: The study was conducted by searching for articles from 2010-2023 from electronic databases such as Google Scholar, Scopus, Science Direct, and PubMed. Articles were extracted using Boolean logic operators (“AND,” “OR,” “NOT”). All articles obtained were analyzed for their relevance to the topic raised in this article. *Staphylococcus aureus*, primarily residing in the nose, throat, skin, and mucous membranes, can contaminate food via unhygienic practices by food handlers. It's prevalent in snacks in developing nations like Nigeria, with contamination rates up to 60%. The bacteria produce heat-resistant toxins causing food poisoning and can lead to infections, contributing to over 100,000 cases of bacteremia annually in the US and 434 food-borne outbreaks in the EU.

Conclusion, significance, and impact of the study: This literature review underscores the critical microbiological risks posed by *Staphylococcus aureus* contamination in street food, particularly in developing countries where street food consumption is widespread. The significance of this study lies in its revelation of the pervasive threat posed by *S. aureus* in street food, which impacts millions of individuals worldwide. The findings of this study have implications for public health interventions, food safety policies, and research agendas aimed at mitigating the adverse effects of *S. aureus* contamination in street food.

Keywords: *Staphylococcus aureus*, Street Food, Food Poisoning, Food Infection

INTRODUCTION

The Global Report on Food Crises in 2022 showed that 258 million people, or 22.7% of the world's population, face acute food insecurity in 58 countries. This situation is projected to affect over a quarter of a billion people in 2023 (FSIN and Global Network Against Food Crises, 2023). Beyond the issue of food insecurity, ensuring food safety is an important concern. Every individual globally has the right to access food that is safe, nutritious, and healthy (FAO/WHO, 2023). The World Health Organization (WHO) estimated that 1 out of 10 people globally falls ill each year due to consumption of contaminated food. Foodborne diseases have led to 600 million people falling sick and 420,000 premature deaths annually with 30% occurring in children under the age of 5 years (Long et al., 2023; Loukieh, 2018; Todd, 2020). Ingesting food that contains harmful substances like bacteria, viruses, parasites, or chemicals such as heavy metals can result in the development of more than 200 different illnesses. Annually, around 5 million people lose their lives due to microbial infections resistant to antibiotics transmitted through food (Banna et al., 2022; FAO/WHO, 2023). The cases of foodborne diseases predominantly occur in many developing countries due to the consumption of street food (Jahan et al., 2018; Jores et al., 2018; Rosales et al., 2023). Following that, street food denotes food and drinks that are prepared and sold by street vendors or hawkers in public areas, which are ready for immediate consumption. (Bellia et al., 2022; Das et al., 2019). RTE food requires no further preparation except reheating (Ayamah et al., 2021). Consuming food contaminated with pathogenic bacteria such as *Staphylococcus aureus*, *Salmonella typhi*, *Escherichia coli*, *Vibrio cholera*, *Campylobacter jejuni*, *Listeria monocytogenes*, *Bacillus cereus*, and *Clostridium perfringens* can lead to foodborne diseases. Among these bacteria, *S. aureus* is the most commonly found in street food (Amare et al., 2019; Sonune, 2022; Tshipamba et al., 2018). *S. aureus* is a commensal bacteria exhibiting pathogenic traits (Fei et al., 2022; Proctor, 2021), colonizing around 30% of the human population (Laux et al., 2019; Martins et al., 2024), and can thrive in food, leading to ingestion by humans and causing foodborne infections. Moreover, it easily grows in food, producing toxins that, when consumed, result in poisoning, commonly referred to as foodborne intoxication (Bintsis, 2017; Nwachukwu et al., 2020; Wan et al., 2021). *S. aureus* is a major foodborne pathogen with 65-85% of the members capable of producing biofilm as a highly significant virulence factor causing various infections in humans (Avila-Novoa et al., 2022; Ballah et al., 2022). Biofilm formation is a crucial factor contributing to *S. aureus* resistance to various antibiotics, posing a threat to treatment efficiency (Derakhshan et al., 2021; Shin et al., 2013; Tahaei et al., 2021). *S. aureus* is also recognized as a significant cause of food poisoning cases associated with the consumption of raw, undercooked, or mishandled food globally. Subsequently, food poisoning occurs due to the presence of stable Staphylococcal enterotoxins (SEs) during food processing (Haghi et al., 2021; Le et al., 2021). This article endeavours to reveal harmful bacterial contaminants in street food that are prevalent in developing countries. Furthermore, it is structured based on a literature review published in international journals related to foodborne diseases resulting from consuming street food contaminated by *S. aureus*. A review of the level of microbiological contamination of *S. aureus* in street food, sources of contaminant bacteria and several cases of food poisoning caused by Staphylococcal enterotoxin and the ability of *S. aureus* to produce biofilms that are closely related to foodborne infections.

Method

This literature review aims to explain the microbiological dangers of *S. aureus* in street food based on the level of contamination, the spread of *S. aureus* from the habitat to entering the food and the dangers posed by this contamination. The study was conducted by searching for articles from 2010-2023 from electronic databases such as Google Scholar, Scopus, Science Direct, and PubMed. Articles were extracted using Boolean logic operators (“AND,” “OR,”

“NOT”) with a combination of the main keywords *S. aureus*, street food, food poison, and food infection. All articles obtained were analyzed for their relevance to the topic raised in this article. This study found that the natural habitat of *S. aureus* is the nose, throat, hair, skin, and mucous membranes in healthy individuals and can be transmitted to food through food workers who do not pay attention to hygiene factors.

RESULTS AND DISCUSSION

Contamination levels of *S. aureus* in street food in developing countries

Microbial contamination in food is unavoidable and occurs at every stage of the food chain, from harvesting in agricultural fields and processing to serving at the dining table. At each stage, contact with the hands of workers, equipment, and the surrounding air presents a potential source of contaminant, posing potential health risks (Erdoğan & Pamuk, 2020; Tropea, 2022). Foodborne diseases have posed serious global health concerns, as evidenced in the United States in 2020, with 299 instances leading to 5,987 cases of illness, 641 hospitalizations, and 40 fatalities. Similarly, in Europe, there were 3,166 reported incidents of foodborne illnesses, resulting in 22,010 cases of illness, 1,838 hospitalizations, and 48 deaths. (Zheng et al., 2023). The global focus on the primary cause of the diseases revolves around the microbiological quality of food (Nethathe et al., 2023). The microbiological quality of RTE food sold on the street has raised public health concerns, specifically in developing countries (Ibrahim, 2020; Sonune, 2022). In India, a test of 120 street food samples in the Amravati region of Maharashtra showed that 68 samples were contaminated with *S. aureus*, representing the highest contamination level at 56.67%. Additionally, *Escherichia coli* was found in 60 samples (50%), *Enterobacter* in 44 samples (36.7%), *P. aeruginosa* in 32 samples (26.67%), and *Salmonella* sp. in 20 samples (16.67%). All samples had an average total viable count (TVC) $\geq 10^5$ CFU/g (Sonune, 2022). In South Indian City, analysis of a consistent set of 142 samples tested from July to December 2017 showed predominant contamination levels with *K. pneumoniae* (40%), *P. aeruginosa* (40%), *Proteus* sp. (29%), *E. coli* (31%), and *S. aureus* (23%) (Siddabathuni, 2019). In Pakistan, the test of contaminant bacteria in raw and cooked cow, goat, and fish meat included 150 samples. Contaminant bacteria in raw meat were dominated by *E. coli* (45%, 30%, and 25%) and *S. aureus* (30%, 25%, and 25%). Meanwhile, cooked meat showed a decrease in *E. coli* (25%, 25%, and 20%) and *S. aureus* (15%, 15%, and 10%) (Ansari et al., 2022). In Nigeria, the highest contamination level from testing 30 street food samples was dominated by *P. aeruginosa* (90%), followed by *S. aureus* (60%), *Enterobacter* spp. (50%), *E. coli* (40%), *B. cereus* (40%), *Salmonella* spp. (30%), *Micrococcus* spp. (30%), and *Alcaligenes faecalis* (10%) (Osalumhense, 2021).

In Cambodia, an investigation on contaminant bacteria in chicken meat and pork was predominantly represented by *Salmonella* spp. at 42.1% (155/532) and *S. aureus* at 29.1% (155/532). This contamination level was determined by testing 532 samples collected from 52 traditional markets and 6 supermarkets across 25 provinces from October 2018 to August 2019 (Rortana et al., 2021). In a contaminant bacteria test of 17 restaurants, *S. aureus* was found to dominate at 46.88% in sushi samples (75/160) and 34.29% in sashimi samples (Tientip, 2020). The test on RTE Kebabs sold on the KNUST campus and the surroundings in Ghana showed that all samples contained *S. aureus* contaminant at $3.1 \times 10^2 - 9.6 \times 10^6$ CFU/g for beef kebabs and $3.6 \times 10^3 - 2.9 \times 10^7$ CFU/g for chevon kebabs (Ayamah et al., 2021). In South Africa, the contamination level of bacteria in RTE Street-Vended Foods (SVFs), based on the test of 205 samples, was dominated by *L. monocytogenes* (46.36%), *S. aureus* (31.8%), and *Salmonella* spp. (21.8%) (Asiegbu et al., 2020). In Northwest Ethiopia, 44 out of 72 SVFs tested (61.1%) were found to be contaminated with bacteria. Among the 44 contaminated samples, 63 isolates were found with 34 identified as *S. aureus* (53.96%), *E. coli* (23.8%), *Enterobacter* (15.87%),

and *Citrobacter* (6.3%) (Amare et al., 2019). In Malaysia, the test of 31 Street-Vended Beverages in Chow Kit, Kuala Lumpur, showed that approximately 90.3% were contaminated with coliform, *E. coli*, and *S. aureus*. The highest contamination levels were coliform (71%) and *S. aureus* (58.1%) with only 1 sample testing positive for *E. coli* (Nawawee et al., 2019). In Bangladesh, research on bacteria loads in beef carcasses was conducted in various slaughterhouse locations in Barishal City from April to October 2017. Contaminant bacteria test from 200 swab samples showed that *S. aureus* (78.5%), *Salmonella* spp. (64.5%), and *E. coli* (64.0%) were the most commonly found bacteria on the surfaces of freshly slaughtered beef carcasses (Das et al., 2019). In Vietnam, a contaminant bacteria test was conducted on 2 popular street foods in 4 districts of Can Tho City, including 263 sandwich samples and 131 sugar cane juice samples. The average contaminant bacteria count in sandwich samples was dominated by coliform at 2.5-7.9 log CFU/g, followed by yeast and mold (2.0-7.4), *S. aureus* (1.7-6.6), and *E. coli* (1.0-5.9) log CFU/g. The test results for sugar cane juice samples were also dominated by coliform (6.02±1.21), followed by yeast and mold (5.56±0.71), *E. coli* (2.26±1.31), and *S. aureus* (1.47±0.77) log CFU/g (Thi, 2021).

Sources of *S. aureus* contamination in street food

S. aureus is a commensal bacteria capable of forming colonies on the skin, nasal cavities, and the human digestive tract. Subsequently, food contamination can occur through manual hand contact or respiratory secretions, serving as a source for both foodborne infections and staphylococcal food poisoning (Bencardino et al., 2021). The human body is an ecological habitat for various microbial communities, such as the skin inhabited by *Staphylococcus*, *Propionibacterium*, and *Corynebacterium*. Although *Staphylococcus aureus* is present in the nasal microbiome of approximately 30% of people, it has the potential to become a dangerous and potentially fatal pathogen (Laux et al., 2019). Transmission of *S. aureus* from the human nasal habitat to food can occur directly or indirectly through the hands of contaminated food handlers. During preparation and processing, food handlers may introduce enterotoxigenic *S. aureus* isolates from the nasal cavity into the food (Akinnola et al., 2022; Mahdi, 2023), acting as a vector for the transmission of microbes responsible for foodborne diseases, a major public health concern globally. Poor hygiene during food preparation remains a primary source of diseases caused by pathogenic microbes (EL-Maghraby et al., 2018; Sharma et al., 2021). Street food serves as a source of foodborne infections, with *S. aureus* playing a crucial role as an infectious agent transmitted through various sources, including street food (Sivakumar et al., 2019). *S. aureus* is commonly found in milk, meat, and processed products, including sausages and pork (Ghabbour et al., 2022; Pal, 2022; Rashed & Zaid, 2022). According to Anihouvi et al. (2020), *S. aureus* contamination can originate from raw materials used in processed food products, equipment used in processing and selling environments, workers' hands, and less hygienic processing methods. One of the most frequently used raw materials in almost all street food products is water, both as a raw material and for washing equipment used in the processing, and can be a source of *S. aureus* contamination. During March 2017 and March 2018, microbial tests conducted on 552 samples from drinking water fountains in four public parks in Sao Paulo City, Brazil, showed that 25.2% were contaminated with *S. aureus* (Salamandane et al., 2021). The test results of water raw materials in 40 Panipuri street food samples collected aseptically from various areas in Morbi City-Gujarat, India, showed that 82% of Panipuri water samples had high levels of pathogenic bacteria, namely *Escherichia coli* (42%), *S. aureus* (30%), *Klebsiella* sp. (20%), and *Pseudomonas* sp. (6%) (Mehta, 2020). Subsequently, the use of ice in meat preservation also served as a source of microbial contamination. The collective bacterial examination findings for seafood, poultry, and livestock meat were 4.88, 4.18, and 6.11 log₁₀ CFU/g, respectively, with the primary bacteria of concern being predominantly *Staphylococcus aureus* (Hamat et al., 2019), followed by *Salmonella*, *V.*

parahaemolyticus, and *L. monocytogenes*, and over 90% tested positive for coliform (Liao et al., 2023). Microbiological test results on fresh vegetable raw materials from 274 samples and RTE vegetables from 92 samples marketed in Tehran, Iran, showed *S. aureus* contamination at 42.3% and 19.6%, respectively (Azimirad et al., 2021). The quantity of contaminant bacteria in chicken raw materials for Street-Vended Chicken Products sold in Nairobi County, Kenya, in 15 samples with 3 repetitions found *Salmonella*, *E. coli*, *Campylobacter jejuni*, and *S. aureus* at 6.42 ± 1.64 , 6.60 ± 1.25 , 8.95 ± 0.94 , and 6.92 ± 1.32 log CFU 10/g, respectively (Birgen et al., 2020). Meanwhile, the total bacteria contamination level in tested meat raw materials from Mangaung Metropolitan Municipality, South Africa, averaged $4.8 \times 10^5 - 5 \times 10^6$ CFU/g (Moloi et al., 2021). Contamination test results on raw materials for fish and sago starch used in the production of keropok lekor in Kuala Terengganu and Marang, Malaysia, were $\geq 10^5$ CFU/g and $\geq 10^3$ CFU/g, respectively (Hamat et al., 2019).

In addition to raw materials, contamination with *S. aureus* in street food processing can originate from factors such as the hygiene of workers' hands and the cleanliness of equipment used in the process (Tasanapak et al., 2023). Out of 650 samples examined, 200 isolates with the most elevated contamination levels were found primarily on food handlers (78%), followed by chopping boards (26%), plates (23%), knives (16%), spoons (13%), and glasses (5%) (Tasanapak et al., 2023). The highest *S. aureus* contamination was due to contact with food handlers hands, knives, and tables used for selling meat in butchery outlets in north-central Nigeria at 48.4% compared to other bacteria (Alimi et al., 2022). Due to the rising incidence of staphylococcal food poisoning outbreaks, efforts to detect *S. aureus* in food handlers in the food processing industry were intensified. A swab test conducted on the hands of 167 workers showed that over 11% tested positive for *S. aureus* (Fernandes et al., 2022). An investigation on contaminant bacteria count on Street-Vended Chicken Products from 15 samples, which was repeated 3 times, showed *Salmonella*, *E. coli*, *C. jejuni*, and *S. aureus* by $3:53 \pm 2:17$, $3:74 \pm 1:92$, $6:48 \pm 0:99$, and $4:85 \pm 1:00$, respectively (Birgen et al., 2020). Subsequently, out of 300 samples from food workers, 125 isolates were identified as *S. aureus* with 42 (33.6%), testing positive for more than one enterotoxins-producing gene (Çakici et al., 2023). Poor personal hygiene practices by food handlers could contribute to the spread of *S. aureus* in street food (Sabry et al., 2017).

Food poisoning by *S. aureus*

Enterotoxigenic *S. aureus* is one of the most common bacteria causing food poisoning worldwide. This bacteria can produce emetic toxins classified in the pyrogenic toxin superantigen family due to the biological activity (Cavaiuolo et al., 2023; Kazem & Jarallah, 2022). Street food can be susceptible to the spread of enterotoxigenic *S. aureus* through diverse pathways, including airborne transmission and contamination from processing equipment and food handlers. Earlier investigations showed a prevalence of *S. aureus* carriers, particularly through nasal passages, among food handlers (Çakici et al., 2023; EL-Maghraby et al., 2018). *S. aureus* exhibits robust resilience on inanimate objects, enabling it to outcompete less resistant microorganisms, even under conditions of elevated temperatures, high osmotic pressure, and relatively low humidity (Fisher et al., 2018; Le et al., 2021). This bacteria can also produce SEs during the storage of platelet concentrates, affecting its safety (Kumar et al., 2023). Similarly, food samples testing positive for SEs can potentially cause poisoning when consumed (Alhashimi et al., 2017). Food infection by *S. aureus* occurs through a toxigenic mechanism caused by the production of heat-resistant SEs, commonly found in dairy products such as milk, cheese, and cream, as well as meat and fish (Sirotamarat et al., 2022; Yildirim et al., 2019).

Enterotoxins are low molecular weight proteins resistant to protease enzymes in the stomach and can withstand high temperatures of about 126.7°C for 6.2 minutes (Melo et al., 2020). *S. aureus* can produce various enterotoxins such as SEA-SEE, SEG-SEI, and SER-SET, exhibiting

heat resistance at 121°C for 10 minutes (Argudín et al., 2010; Pexara et al., 2018; Tsutsuura et al., 2013). Consequently, these toxins are thermo-persistent, and resistant to elimination through heating processes (Chi et al., 2023). SEs are produced by *S. aureus* during the growth, along with several other virulence factors (Etter, Schelin, et al., 2020). This bacteria generates several types of enterotoxins (Banaszkiewicz et al., 2023). A test on 125 isolates from clinical samples identified the presence of 5 types of enterotoxins (Johora et al., 2021). These types of SEs are in line with those tested on monkey feed causing vomiting reactions by Thomas (2007) showing the emetic activity of SEA, SEB, SEC, SED, and SEE (Johler et al., 2013). The emetic activity of SEs refers to the ability of toxins to induce vomiting symptoms (Lalnunfela, 2021), and these 5 types of SEs are then called classical enterotoxins encoded by the genes SEA, SEB, SEC, SED, and SEE (Nguyen Do et al., 2020) (Schwendimann *et al.*, 2021). Subsequently, new types of enterotoxin genes, including SEj, SEl, SEq, SEm, and SEr, have also been identified in *S. aureus* isolates from various sources (Hu, 2016). SEs can act as superantigens, leading to T-cell activation for cytokinin production leading to multisystem failure (Chung, 2023; Johler et al., 2013). Poisoning symptoms usually manifest 1-7 hours after consuming food contaminated with SEs, leading to vomiting, diarrhea, nausea, fatigue, abdominal cramps, pain, headaches, and, in severe cases, death. Immediate hospital treatment is essential in such situations (Etter, Schelin, et al., 2020; Le et al., 2021; H. na Li et al., 2023). The regulation of SEs expression is also associated with accessory gene regulators (Agr) and environmental factors such as temperature, pH, and the presence of specific sugars. Different temperature and pH levels have been found to influence enterotoxin synthesis by *S. aureus* (Hunt et al., 2014). Temperature is a key factor in stimulating SEA and SEB expression with high expression at 30°C (Li et al., 2023). Enterotoxin synthesis in milk medium is achieved after entering the stationary growth phase at 18-66 hours. Optimal synthesis occurs at pH 6.5 and a temperature of 37°C for SEC (Hunt et al., 2014). Meanwhile, synthesis for SEA is achieved after the 7-log CFU/ml growth phase, starting at a minimum of 1-2 hours of incubation at 37°C (Tsutsuura et al., 2013).

Foodborne infection by *S. aureus*

S. aureus is a major cause of clinical infection, resulting in over 100,000 cases of bacteremia each year in the United States and 434 foodborne outbreaks in the European Union. This bacteria is a pathogenic zoonosis responsible for various infectious diseases characterized by septicemia and sepsis (Crombé et al., 2013; Song et al., 2015; Zhang et al., 2018). Subsequently, it is commonly found worldwide as the causative agent of diseases ranging from sinusitis, respiratory tract infections, and skin infections to myocarditis, endocarditis, osteomyelitis, pneumonia, urinary tract infections, and other soft tissue infections in the human body (Cheung et al., 2021; Guo et al., 2021; Jang et al., 2021; Rahimi et al., 2016).

Cases of localized skin infections may often resolve on their own but can serve as entry points for *S. aureus* into deeper tissues and the bloodstream (Yarovoy et al., 2019). This bacteria can cause various types of invasive infections, but not everyone colonized by it will experience symptoms. Approximately 30% of the human population permanently colonized by *S. aureus* in the nasal passages may not show any symptoms (Bitschar *et al.*, 2020; Etter, Corti, et al., 2020; Laux et al., 2019). This bacteria was previously considered an extracellular pathogen, but increasing evidence supports *S. aureus* as an intracellular pathogen capable of infecting, replicating, and persisting in host cells to evade bactericidal immune attacks and antibiotic treatments (Casadevall & Fang, 2020; Jin et al., 2023; Soe et al., 2021). *S. aureus* induces diseases through diverse mechanisms, including the capacity to survive inside cells, infect epithelial cells, evade host immunity, and replicate in host cells (Jin et al., 2023; Wilson et al., 2011). This bacteria produces toxins and virulence factors that damage host cells and inhibit adaptive immunity (Jang et al., 2021).

Biofilm formation is one of the most significant virulence mechanisms in the attachment of staphylococcal strains to living or non-living surfaces and resistance to antibiotics. It is the term used to describe the complex structure formed by bacteria, such as *S. aureus*, on surfaces. Biofilm production by *S. aureus* has been identified in various environments, including dairy processing settings (Ramachandran et al., 2023; Vargová et al., 2023).

The capability to produce biofilm varies among different strains, with some exhibiting a higher biofilm-forming ability than others (Alonso et al., 2021). Vargova (2023) stated that *S. aureus* is the most commonly found pathogen in milk and on surfaces. In all tested strains, the bacteria count required for biofilm formation is $>5 \text{ Log}_{10} \text{ CFU/cm}^2$, except for the reference strain. *S. aureus* isolates show superior biofilm production compared to the reference strain in the first 3 hours. This biofilm on milking equipment poses a persistent contamination source (Vargová et al., 2023), and has been associated with chronic infections such as infective endocarditis and is believed to contribute to *S. aureus* ability to cause persistent infections (Alonso et al., 2021; Yee et al., 2022).

Certain strains identified as culprits behind mastitis in cows possess the capability to generate a dense extracellular polysaccharide layer, also known as slime or biofilm. This layer is deemed a virulence factor because it aids in the adherence of bacteria to mammary epithelial cells and shields them from opsonization and phagocytosis (Dubravka et al., 2010). Biofilm formation also leads to bacteria attachment on the surfaces of inanimate objects such as implant medical devices, causing infections impacting patients' morbidity and mortality (Bimanand et al., 2018). Furthermore, it is a sophisticated and intricately organized assemblage of stationary bacteria developed on either living or non-living surfaces, encased within a self-generated extracellular matrix comprising exopolysaccharides, proteins, and DNA. (Gowrishankar et al., 2012; Neopane et al., 2018; Salamandane et al., 2021). The extracellular polysaccharide produced by *S. aureus* is known as polysaccharide intercellular adhesin (PIA) or poly- β (1-6)-N-acetylglucosamine (PNAG). This polysaccharide functions in adhesion and provides protection against antibiotics (Karygianni et al., 2020; Parastan et al., 2020). Most research identified the *icaA*, *D*, *B*, and *C* operons, responsible for producing PIA, as the primary mechanism for biofilm formation (Bimanand, 2017). The test of *S. aureus* producing biofilm from various food samples with a total of 97 isolates showed that 72% tested positive for biofilm-encoding genes *icaABCD*, *clfA/B*, *cidA*, and *fib* (Chen et al., 2020).

CONCLUSION

Based on the explanation that has been given, the following conclusions can be drawn regarding the microbiological hazards of the contaminant bacterium *S. aureus* found in various snack foods in developing countries:

1. *S. aureus* is the most common commensal bacterium that causes foodborne intoxication and foodborne infection cases transmitted through food in various countries worldwide, especially in developing countries.
2. *S. aureus* is frequently found in street food in developing countries such as Bangladesh, Nigeria, Malaysia, India, Cambodia, Pakistan, and South Africa.
3. The sources of *S. aureus* contamination in street food originate from raw materials used in food processing, water, ice as a chilling medium, processing equipment, and the hygiene of food handlers.
4. Most *S. aureus* strains discovered can produce five types of heat-resistant enterotoxins (SEA, SEB, SEC, SED, and SEE), leading to various cases of poisoning due to consuming contaminated food.
5. In addition to producing staphylococcal enterotoxins, *S. aureus* was found to be primarily capable of producing biofilms associated with various cases of infection and causing antibiotic resistance properties that can jeopardize the disease healing process.

Continuous assessment of various types of *S. aureus* found in food is necessary to develop preventive measures, food processing strategies, and disease mitigation efforts.

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