

# Overview of Major Bacterial Contaminants of Drinking Water in Nigeria: A Review

Oche Joseph Otokpa

*School of Public Health Texila American University Georgetown, Guyana*

*Email: ochejoseph@yahoo.com*

## ABSTRACT

***Aim and Objectives:*** *The objective of this study was to provide an overview of the microorganisms implicated in the contamination of household drinking water in Nigeria, their pattern of distribution and the regulatory gap(s) if any that is responsible for the cases of drinking water contamination and water borne diseases in Nigeria.*

***Study Design and Methodology:*** *The methodology employed for this study involved a comprehensive and critical review of ten randomly selected studies to identify the major bacterial contaminants of drinking water in Nigeria and their distribution. This review was restricted to microbiological measures of drinking water contamination excluding chemical aspects of water quality.*

***Results:*** *Escherchia coli was found to be the predominant microbial contaminant of drinking water in the studies reviewed with 70%, Klebsiella sp 60%, Pseudomonas aeruginos 60%, Staphylococcus aureus 50% , Proteus sp 50%, Enterobacter aerogenes 40% , Streptococcus fecalis 30%, Salmonella typhi 30% and 10 % for Vibrio Cholerae and Shigella sp.*

***Conclusion:*** *The presence of microbes in drinking water especially E.coli reported in 70 percent of the studies reviewed is a source of concern. The presence of toxin producing strains of E.coli*

*like the O157:H7 in drinking water can result in fatal consequences like hemorrhagic diarrhea and kidney failure. The widespread presence of other disease-causing organisms further confirms that a good number of the drinking water presented as safe for consumption across Nigeria are actually not fit for human consumption. The gaps reported in most of the studies reviewed were mainly oversight gaps in monitoring by the National Agency for Food and Drug Administration and control, NAFDAC, the agency charged with monitoring food and drugs in the country.*

**KEY WORDS:** Drinking water, Pathogens, Microbiological Contamination, Water Quality

## **INTRODUCTION**

The quality of household drinking water is an important for health and overall well being of household members. According to the UNICEF report, around 90.8 per cent of households in Nigeria drink water contaminated by feaces and other contaminating agents like E coli, the report noted that although 64.1 per cent of the population of the country had access to improved drinking water sources, the states that make up the North-East region were lagging behind with 52.4 per cent, while South-West states top the chart with 87.3 per cent of its residents having access to improved water sources, about two out of every three households use improved water sources according to the report , while a little more than one-third use improved sanitation compared to 58.5 percent and 31 per cent respectively in 2011. <sup>[1]</sup>

Figure 1: Common Sources of Drinking water In Nigeria



A Sample of Sealed Sachet Water In Nigeria



A Sample of Sealed Bottled Water In Nigeria

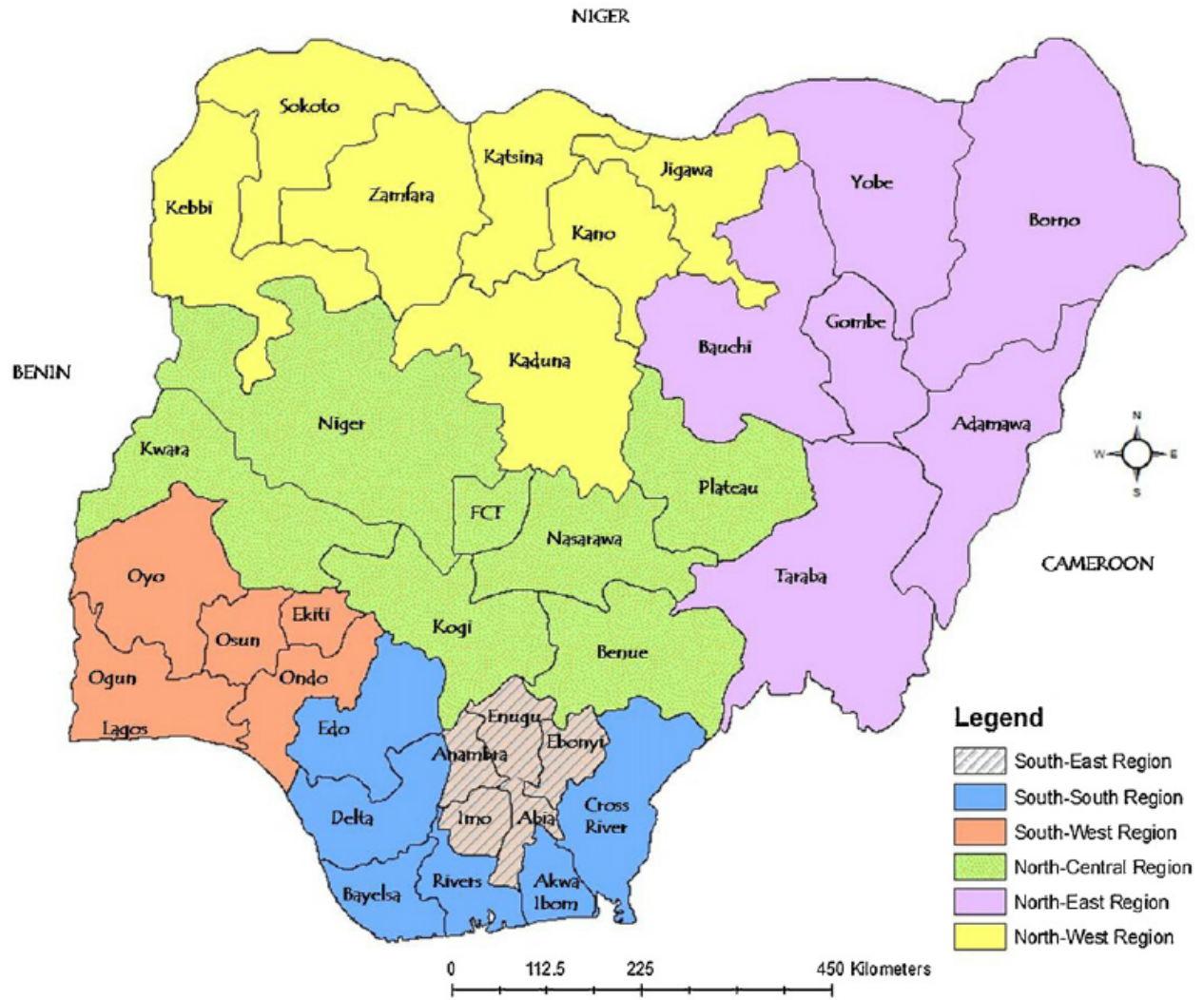


## Young Girls Fetching Water Borehole in Nigeria







Drinking water is a major source of microbial pathogens in developing countries, although poor sanitation and food sources are integral to enteric pathogen exposure, gastrointestinal disease outcomes are also more severe, due to under-nutrition and lack of intervention strategies in these countries with protozoa and bacteria being the major **causative agents of water borne diseases.** <sup>[2]</sup> **Poor water quality, sanitation and hygiene account for some 1.7 million deaths a year world-wide mainly through infectious diarrhea, nine out of 10 such deaths are in children**

and virtually all of the deaths are in developing countries due to the introduction of pathogens into drinking water leading to diseases such as cholera, amoebiasis, typhoid fever, giardiasis and dysentery. <sup>[2]</sup> In addition, microbial contamination of drinking water sources and the resultant diseases have become a major water quality concern all over the world. <sup>[3]</sup> It has therefore become imperative to synergistically synthesize knowledge from multiple fields covering comparative aspects of pathogen contamination, and unify them in a single place in order to present an overview of microbes implicated and proffer solution to the problem as a whole.

Figure 2: Showing Map of Nigeria and Six the Geopolitical zones []



**Legend**

-  South-East Region
-  South-South Region
-  South-West Region
-  North-Central Region
-  North-East Region
-  North-West Region

## OBJECTIVE

The financial burden of treating water borne diseases can be high, especially for rural dwellers , the objective of this study is to aggregate the various findings and provide a clear overview of water quality and various microorganisms implicated in the contamination of household drinking water as well as the activities that is principally responsible for drinking water contamination in Nigeria.

## METHODOLOGY

The methodology employed for this study involved a comprehensive and critical review of ten studies to identify the major bacterial contaminants of drinking water in Nigeria and their distribution. This review was restricted to microbiological measures of drinking water contamination excluding chemical aspects of water quality.

## FINDINGS

### *Escherchia coli*

This organism is a rod-shaped facultative anaerobe, belonging to the genus Escherichia that mainly indicate fecal content contamination, most strains of this Gram-negative organism are harmless or cause relatively brief diarrhea but virulent strains, such as E. coli O157:H7 can cause severe symptoms including bloody diarrhea and vomiting. <sup>[4]</sup> This organism is the most common bacterial contaminant in drinking water as it was reported by 7 of 10 studies under review, representing 70 % of the studies.

### ***Klebsiella species***

*Klebsiella species* is a Gram-negative, non-motile, oxidase-negative, rod-shaped bacteria. Although *Klebsiella species* are found everywhere in nature, they frequently cause human nosocomial infections and account for a significant proportion of hospital-acquired pneumonia, septicemias, soft tissue infections and urinary tract infections.<sup>[5]</sup> Six out of ten (60%) studies under review reported the presence of this organism in drinking water samples analyzed.

### ***Staphylococcus aureus***

*Staphylococcus aureus* is a Gram-positive, round-shaped bacterium, It is a major human pathogen which causes a wide range of clinical infections and a leading cause of infective endocarditis, pleuropulmonary bacteremia, osteoarticular, skin and soft tissue, and device-related infections.<sup>[6]</sup> Fifty percent of the studies under review reported the presence of this organism in drinking water samples analyzed.

### ***Pseudomonas aeruginosa***

*Pseudomonas aeruginosa* is a Gram-negative, rod-shaped bacterium which has become an important cause of infection in patients with compromised defense mechanism, the organism has also emerged as the most important pathogen during the past two decades causing between ten and twenty percent of infections in most hospitals.<sup>[7]</sup> Studies which evaluated mortality among patients with *Pseudomonas aeruginosa* bloodstream infections reported a morbidity and a mortality rate ranging from eighteen to sixty one percent.<sup>[8]</sup> About 60% of the studies under review report the presence of this organism in drinking water samples analyzed.

### ***Enterobacter aerogenes***

*Enterobacter aerogenes* is a Gram-negative, rod-shaped bacterium usually found in the human gastrointestinal tract and does not generally cause disease in healthy individuals but recognized as an important bacterial pathogen in hospital-acquired infections and opportunistic infections.<sup>[9]</sup> This organism was isolated in 40% of the studies that analysed drinking water samples.

### ***Streptococcus fecalis***

*Streptococcus fecalis* is a gram positive bacterium found in the gastrointestinal tracts of humans and other mammals, it contributes to a number of infections especially in immunocompromised humans, this can include bacteremia, abdominal and pelvic infections, urinary tract infections, oral infections, particularly with root canals, septicemia, wound infections, enterococcal meningitis.<sup>[10]</sup> This organism was isolated in 3 out of 10 studies representing 30% of the studies that analyzed drinking water samples.

### ***Proteus Species***

*Proteus* species are part of the Enterobacteriaceae family of gram-negative bacilli which are usually found in the human intestinal tract as part of normal intestinal flora, *Proteus* organisms are implicated in the causation of serious infections in humans, along with *Escherichia*, *Klebsiella*, *Enterobacter*, and *Serratia* species.<sup>[11]</sup> This organism was also isolated in 3 out of 10 studies representing 50% of the studies that analysed drinking water samples.

### ***Salmonella typhi***

*Salmonella typhi* is the causative agent of typhoid fever, a serious disease condition with an annual global burden of approximately 16 million cases, leading to 600,000 fatalities, *S typhi* typically live in animal and human intestines and Humans become infected by the consumption



of contaminated water or food. <sup>[12]</sup> *S. typhi* was found in drinking water analyzed by 30% of the studies under review.

***Shigella species***

*Shigella species* is a group of gram-negative, intracellular pathogens, the organism is a major public health problem in most developing countries because it causes significant diarrheal disease and mortality in humans, as there are approximately 163 million episodes of shigellosis and 1.1 million deaths annually. <sup>[13]</sup> Data from studies under review indicate that just 10% reported *Shigellas* species contamination of drinking water.

***Vibrio Cholerae***

*Vibrio cholerae* is a Gram-negative, highly motile, gram-negative, curved or comma-shaped rods with a single polar flagellum, the organism is the causative agent of cholera, an acute diarrhoeal infection that results in 21 000 to 143 000 deaths worldwide. <sup>[14]</sup> This organism was also isolated in 1 out of 10 studies representing 10% of the studies under review.

**Table 1.** Shows the distribution of organisms found in drinking water.

Research	VC	ST	SPP	KP	SF	SA	PA	EC	ETA	PR
Shittu et al 2008	+	+	+							
Adekunle et al 2004				+	+		+			
Omezuruike,et al 2008		+		+		+	+	+	+	+
Olaoye et al 2009				+		+	+	+	+	+
Ibiebele et al 1989				+		+	+	+		+

Ezeugwunne et al 2009				+	+	+		+		
Oladipo et al 2009								+	+	+
Mgbakor et al 2011				+			+			+
Muazu et al 2012		+					+	+		
Onifade et al 2008					+	+		+	+	
Percentage %	10	30	10	60	30	50	60	70	40	50

## CODES

VC= *Vibrio Cholerae*    SA= *Staphylococcus aureus*    PA= *Pseudomonas aeruginosa*.

SF= *Streptococcus fecalis*    EC= *Escherchia coli*    KP= *Klebsiella species*

ST = *Salmonella typhi*    SPP= *Shigella species*    ETA = *Enterobacter aerogenes*

PR= *Proteus Species*



## DISCUSSION

A physico-chemical and bacteriological analyses of water used for drinking and swimming in Abeokuta, South West Nigeria, reported that none of the samples analyzed complied with expected bacteriological standards required for potable water, it reported that the total coliform counts across samples exceeded the 1,600 MPN/ml stipulated, the pathogen count for organisms such as *Vibrio cholerae* and *Salmonella-Shigella* were also very high. <sup>[15]</sup> The

findings from this study aligns with the results of the bacteriological quality assessment of the potability of water from some hand-dug shallow water wells in Awka metropolis in South Eastern Nigeria used for drinking and other domestic purposes. The study reported the presence of both *Salmonella typhi* and *Vibrio cholerae* in the water wells sampled.<sup>[16]</sup> This is in contrast with the findings of another study which analyzed the bacterial load of potable water in areas with reported cholera outbreaks in Ogun, Oyo and Lagos States, Nigeria which reported that although, thermo-tolerant coliforms were isolated from some samples, *Vibrio cholera* was not isolated, but *Vibrio parahaemolyticus* was isolated from 5 (10%) of the well water samples.<sup>[17]</sup> This variation may be due to the difference in the sources and exposure of drinking water analyzed as stated in the studies

A study which assessed the health and social economic implications of sachet water in Ibadan, South west Nigeria submitted that drinking water samples collected in Ibadan, showed bacterial growth which included: *Klebsiella sp* *Streptococcus faecalis* and *Pseudomonas aeruginosa*.<sup>[18]</sup> This agrees with the findings of a recent study which evaluated the physicochemical and microbial qualities and mineral profile of some elected brands of bottled water marketed and consumed in Asaba, Delta state, South South Nigeria which reported that 5.2 % of tested samples analysed confirmed the presence of *Klebsiella sp.*, *Streptococcus faecalis* and *Pseudomonas aeruginosa*.<sup>[19]</sup> A similar study which analysed the quality of packaged waters sold in Ibadan, Nigeria reported that 5% of the 78 samples of A type (packed and sealed bottled water by larger factories and sealed nylon sachets water by small scale industries) and 28% of the 30 samples type B (Manually tied by itinerary vendors) showed positive coliform counts and the dominant bacteria were also *Klebsiella sp.*, *Streptococcus faecalis* and *Pseudomonas aeruginosa*.<sup>[20]</sup> These two studies align with the submission of Omalu *et al* which affirmed earlier findings and linked the contamination of sachet drinking water in Nigeria with *Bacillus sp.*, *Pseudomonas sp.*, *Klebsiella sp.*, *Streptococcus sp.*, and oocysts of *Cryptosporidia sp* to the

inadequacy of pipe borne water-supply and the resort to buying water from vendors, and sachet or bottled water. <sup>[21]</sup> In contrast, a study which also evaluated the quality of packaged drinking water in Edo state, South South Nigeria reported the presence of *Pseudomonas* sp and other microorganisms identified as *Staphylococcus aureus*, *Aeromonas* sp., *Corynebacterium* sp., *Bacillus* sp., *Bacillus badius*, *Proteus vulgaris* and *Escherichia coli*. <sup>[22]</sup> This variation in microbial contamination of water could be due to difference in geographical sites where the studies were conducted or samples collected. <sup>[23]</sup>

In another study on drinking water quality Omezuruike *et al* (2007) reported the presence of *Staphylococcus aureus*, a major human pathogen which causes a wide range of clinical infections, *Salmonella* sp., and *Escherichia coli* among several other microorganism from drinking water samples collected in Abeokuta, Ogun State and Ojota in Lagos State all in South west Nigeria. <sup>[24]</sup> Similarly, Ibiebele *et al* (2009) reported the presence of *Staphylococcus* spp., *Pseudomonas* spp., *Klebsiella* spp., *Proteus* spp., *Enterococcus faecalis*, *Aeromonas* spp., *Escherichia coli*, *Chromobacterium* spp., *Flavobacterium* spp., and *Serratia* spp from communal well water around Port Harcourt, South South, Nigeria.<sup>[25]</sup> The discovery of these isolates in drinking water aligns with the findings of another study conducted in Nassarawa State, North Central Nigeria, the study published in the British Microbiology Research Journal analyzed five randomly selected water samples from different boreholes sources and isolated six genera of bacteria which were identified as *Staphylococcus* spp, *Escherichia* spp, *Klebsiella* spp, *Salmonella* spp, *Pseudomonas* spp and *Proteus* spp.<sup>[26]</sup> This also agrees with a similar study which investigated the bacteriological contamination of drinking water from wells in Wukari, Taraba State, North east Nigeria, the study reported that *Staphylococcus aureus* was the highest isolated organism (53.33%) followed by *Escherichia coli* (46.67%), *Pseudomonas* species and *Proteus* species (33.37%), *Salmonella* species (26.67%), *Enterobacter* species (20.00%) while *Klebsiella* species and *Enterococcus* species were the least with 13.33%

occurrence respectively.<sup>[27]</sup> The findings of another study conducted on similar sample sources does not align with the findings above, the study which was conducted to determine the physicochemical and microbiological characteristics of groundwater in boreholes used as drinking water in Mgboushimini community in Obio Akpor Local Government Area of Rivers State, South South Nigeria reported that a total of four (4) genera of organisms were isolated from the water samples which were identified as *Klebsiella* spp., *Proteus* spp., *Citrobacter* spp, and *Candida* spp. This variation in microbial population despite similar sources of samples could be linked to geo- environmental and natural factors as reported by <sup>[28]</sup> and <sup>[29]</sup>

Olaoye *et al* (2009) reported the presence of *E. coli*, *Pseudomonas aeruginosa*, *Enterobacter aerogenes*, *Klebsiella* sp., *Proteus vulgaris*, *Alcaligenes faecalis*, *Bacillus cereus*, *Staphylococcus aureus*, *Streptococcus lactis*, *Aeromonas* sp. and *Micrococcus luteum*, in sachet-packaged drinking water in Western Nigeria.<sup>[30]</sup> This is similar to the findings of Oladipo *et al* (2009) in their work titled microbiological assessment of vended drinking water in Ogbomosho Osun State Nigeria. They isolated *Enterobacter aerogenes* in addition to *Proteus mirabilis*, *Bacillus subtilis* and *Pseudomonas putida*.<sup>[31]</sup> Both findings are similar to the result a bacteriological quality assessment and antibiogram profile of bacteria associated with sachet drinking water conducted in Zaria, North western Nigeria, a decade later which also reported the presence of *Enterobacter aerogenes* and other bacteria identified as *Escherichia coli*, *Salmonella* sp, *Citrobacter freundii* and *Proteus vulgaris* in samples of sachet-packaged drinking water analyzed.<sup>[32]</sup> However, this findings differ from another study on the bacteriological profile of packaged drinking water in bottles which reported that 5.2 % of tested samples had *Klebsiella* sp., *Streptococcus faecalis* and *Pseudomonas aeruginosa*.<sup>[17]</sup> This difference in the bacterial population of bottle and sachet water could be due to variation in the water purification techniques because both microbial activity and bacterial diversity during water treatment process show obvious spatial variation especially during chlorination.<sup>[33]</sup>

Another study by Ezugwune *et al* (2009) analyzed the prevalence of bacteria in packaged sachets water sold in Nnewi, South East, Nigeria and reported that percentages of the different organism isolated from drinking water, were *E. coli* (36%), *Streptococcus faecalis* (19.4%), *Klebsiella pneumoniae* (19.4%) and *Staphylococcus aureus* (25%).<sup>[34]</sup> This is in agreement with the findings of a study which analyzed a total of 50 drinking water samples comprising; 20 well water, 15 sachet water, 10 borehole water and 5 river water in Sokoto, Northwest Nigeria, the distribution of the bacteria isolated and identified from the study indicated that, *Escherichia coli* had the highest total prevalence of (40.31%) and occurring in all the water samples. *Klebsiella* spp had (17.13%) occurring in all the sources, *Salmonella* spp (7.44%) occurring in all the sources except for borehole, *Pseudomonas* species (15.22%) occurring in all the sources, *Staphylococcus aureus* with 115 (19.90%) occurring in all the sources except for borehole.<sup>[35]</sup> The finding reported above are at variance with a similar study on bacteriological evaluation of sachet drinking water in Owerri, Imo State, South east Nigeria which reported that *Klebsiella pneumoniae* [7(29.2%)] was the most predominant and closely followed by *Serratia* spp. [6(25.0%)] and *Proteus mirabilis* [6(25.0%)] while *Pseudomonas aeruginosa* [3(12.5%)] and *Chromobacterium* spp. [2(8.3%)] was least predominant<sup>[36]</sup> In a separate study conducted in Maiduguri, North eastern Nigeria, Muazu reported that 55% of the brands of packaged sachet water analyzed had fecal coliforms, 25% had *Pseudomonas aeruginosa*, 15% had *Salmonella* sp. while 5% of the sample brand had *E. coli*.<sup>[37]</sup> Majority of drinking water samples analyzed were unsafe for human consumption as reported Onifade *et el* who in addition to the presence of *Escherichia coli*, *Staphylococcus aureus* *Streptococcus faecalis* and *Enterobacter aeogenes* also isolated *Alcaligenes faecalis*, *Bacillus subtilis*, and *Micrococcus luteus*. [38] The presence of these organisms constitutes public health significance which agrees with the conclusion of another study which analyzed a total of 30 samples from 10 brands of sachet water and 42 samples from 21 communal boreholes serving as drinking water sources in seven different wards of Mubi, Adamawa state, North east Nigeria and isolated 49 non-repetitive bacterial

species. <sup>[39]</sup> This conclusion is in contrast with the conclusion with the findings of a similar study which despite reporting the isolation of *Escherichia coli*, *Enterobacter aerogenes*, *Salmonella sp*, *Citrobacter freundii* and *Proteus vulgaris*, concluded that most (90%) of the water analyzed fell within the statutory limits. While, the remaining (10%) fell within the contamination level, which recorded high bacterial counts beyond the standard of safe drinking water set by water and food regulatory bodies. <sup>[32]</sup> A conclusion also reported by Osagie et al. <sup>[40]</sup>.

## CONCLUSION

The presence of *E.coli* in 70 percent of the studies reviewed is a source of concern, because although most strains of *E.coli* are harmless and form a substantial part of the normal flora of the intestines, the presence of toxin producing strains of *E.coli* like the O157:H7 in drinking water is a major public health concern because of its ability to trigger hemorrhagic diarrhea and kidney failure. The isolation of several pathogenic and non pathogenic bacteria from drinking water sources in Nigeria, clearly indicates that drinking water processing and handling procedures in Nigeria needs to be reviewed to meet global best practices that will ensure that drinking water does not continue to serve as a major portal for the introduction disease causing microorganisms into the body. The presence of these organisms in drinking water used by households in Nigeria cannot be extricated from recent water borne epidemic recorded in some parts of the country and with the reported level of non-compliance with standards and guidelines by water processing and packaging firms and the low level of oversight by the regulatory agencies. There is also the need to review the parameters for licensing and registration of drinking water processing and packaging companies and the intervals for unscheduled routine inspection to drinking water processing and packaging plants to enhance drinking water quality in Nigeria.

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