

3 **Antimicrobial Properties of the African Locust Bean (*Parkia***
4 ***biglobosa*) Effluent and its Chaff**

5 **Abstract**

6 **Aim:** The aim of this study is to determine the antimicrobial properties of the *Parkia biglobosa* (Jacq.)
7 *R.Br. ex G.Don* effluent. The effluents were tested against some pathogenic microorganisms for their
8 antimicrobial properties using the conventional antibiotics as the control.

9 **Study Design:** Effluent with and without chaff is to serve as agents used to determine whether it has
10 antimicrobial properties on the clinical and typed isolates.

11 **Place and Duration of Study:** This study was carried out between November, 2015 and July, 2016 at
12 the Department of Microbiology Laboratory, Federal University of Technology Akure, Ondo State, Nigeria.

13 **Methodology:** Locust beans bought from "Oja Oba" market, Ikare-Akoko, Ondo state were cooked until
14 the coat was soft and the effluent was decanted, cooked again and the effluent with chaffs was also
15 decanted. Both effluents (with and without chaffs) were used against the test and clinical microorganisms
16 using agar well diffusion method. The Minimum inhibitory concentration was carried out using tube
17 dilution method using Mueller Hinton broth

18 **Results:** When the pathogenic microorganisms were subjected to antimicrobial tests using the *P.*
19 *biglobosa* effluents at 100mg/mL; the effluents and effluent without chaffs were able to inhibit *S. aureus*
20 (ATCC 43300), *S. typhi* (ATCC 35240), *E. coli* (ATCC 35218) while *P. aeruginosa* (ATCC 27853) and *K.*
21 *pneumonia* (ATCC 48891) were resistant to the effluent. The clinical isolates were more resistant to the
22 effluents. *E.coli* (ATCC 35218) had the lowest susceptibility at 6.33 ± 0.58^b and *S. pyogenes* (ATCC
23 29212) had highest susceptibility with 13.00 ± 1.73^a zones of inhibition for locust beans effluent. For the
24 clinical isolate, *E. coli* and *S. pyogenes* had the lowest and highest susceptibility at 4.00 ± 0.00^b and 12.33
25 $\pm 0.58^a$ respectively for the locust beans effluent while *P. aeruginosa* and *K. pneumoniae* isolates were
26 resistant to both effluents.

27 **Conclusion:** This study has provided useful information on the antimicrobial activities of the effluents
28 against clinical and typed microorganisms used in this study.

29 **Keyword:** *Parkia biglobosa*, Effluents, Antimicrobial, Antibiotics, Bactericidal.

30 **INTRODUCTION**

31 *Parkia biglobosa* is a deciduous perennial tree of the Fabaceae family [1] It is popularly known as
32 the Africa locust beans or néré, Dadawa (Hausa), Origili (Ibo) and Iru (Yoruba) [2] It is found in a wide
33 range of environments in Africa and is primarily grown for its pods that contain both a sweet pulp and
34 valuable seeds. Processing of locust beans fruits to food condiment, involves different unit
35 operations after harvesting; such unit operations include depodding, and removal of the yellowish
36 pulp to produce locust beans seeds. Other processing operations are cleaning, boiling, dehulling,
37 washing, re-cooking, and then fermentation to produce the food condiment which is used as soup
38 seasoning/spices [3].



40 Plate 1: Africa Locust Beans Seeds Used for this Study

41 The quest for solutions to the global problems of antibiotic resistance in pathogenic
42 bacteria has often focused on the isolation and characterization of new antimicrobial compounds from a
43 variety of sources including medicinal plants [4]. This is probably because the efficacies of these
44 plant products have been confirmed in different disease situations in different parts of the world
45 and that their little or no known side effects have made them succeed where most synthetic or
46 conventional agents have failed. It may also be because scientists have established that crude
47 extracts of some plants and some pure compounds from such plants can potentiate the activity of
48 antibiotics *in-vitro* [5]. In Africa, medicinal preparations from plants have been used over a long
49 period for the treatment of ailments. This is because orthodox medicine is not available in some
50 places due to a wide range of reasons, among which includes that the first line drugs which are
51 cheap and affordable have become ineffective because of resistance. However, these plant
52 preparations are becoming more widely used by people all over the world as they understand the
53 strength in them and the fact that most of them can be used safely without any known side
54 effect which is not the case in drug or pills [6]. This plant has been used extensively for medicinal
55 purposes by the Hausa people of Northern Nigeria and other parts of West Africa. A decoction
56 of the stem bark is used as a mouthwash to steam, relieve toothache as well as a bath for fever
57 and tonic for diarrhoea and as an enema [7, 8, 9]. The leaves are also active against bronchitis, pile,
58 cough, amoebiasis, dental carries and conjunctivitis [10]. The aqueous and acetone extract of
59 *P. biglobosa* raw beans have also demonstrated termicidal properties [11]. There is little or no study on
60 the effluents of *P. biglobosa* as a medium of treatment of ailment, for this reason this study is to
61 determine the antimicrobial properties of the locust beans effluents (with or without chaffs).

62

63 2. METHODOLOGY

64 2.1 Sample Source

65 The locust beans seeds were purchased at Oja Oba, (King's market) Ikare Akoko, Ondo state, Nigeria
66 and washed thoroughly, they were cooked until the coats of the seeds were soft enough to peel. The
67 effluent (water containing seed coats chaff) was decanted and kept in an air tight container; the peeled
68 seeds were re-washed and re-cooked until it was very soft. Then the effluent (water without chaff) was
69 also decanted and kept in separate air tight container. The samples which were the two different fluents
70 were transported to Microbiology Laboratory of the Federal University of Technology, Akure, Nigeria for
71 additional analyses.

72

73 2.2 Source and Preservation of Bacterial Isolates Used

74 Pure clinical isolates (*E. coli*, *S. typhi*, *P. aeruginosa*, *K. pneumoniae*, *S. aureus*, *S. pneumoniae*) were
75 obtained from the stock culture of States Specialists Hospital, Akure, Ondo State, Nigeria and typed
76 isolates (*E.coli*: ATCC 35218, *S. typhi*: ATCC 35240, *P. aeruginosa*: ATCC 27853, *Kl.pneumoniae*: ATCC
77 48891, *S. aureus*: ATCC 43300, *S. pneumoniae*) were obtained from Pathological and Clinical Laboratory
78 of Lagos State University Teaching Hospital (Pathcare), Lagos State, Nigeria. Pure isolates were
79 maintained on Nutrient agar slants in the refrigerator at 4°C until further investigative procedure.

80

81 2.3 Antibiotic Sensitivity Profile

82 The antibiotic sensitivity profile was investigated in order to compare the sensitivity of the
83 microorganisms to the different conventional antibiotics. The disc diffusion method was used to determine
84 the susceptibility and resistance of the microorganisms to the antimicrobial drugs. Twenty milliliter of
85 sterile Mueller-Hilton agar was aseptically poured into sterile Petri dishes and allowed to gel. Each plate
86 was seeded with the test organism before aseptically introducing the antibiotic disc with sterile forceps
87 onto the surface of the solidified Mueller Hilton agar plate and incubated at 37°C for 24 hours. After
88 incubation, clear zones around the disk were measured in millimeter and recorded as the zones of
89 inhibition. Diameters of zone of inhibition was measured with a calibrated ruler and then compared with
90 clinical and laboratory standards for their sensitivity or resistance. Seeded plates without antibiotic disk
91 served as the control. The antibiotic sensitivity profile was carried out in triplicates.

92

93 2.4 Standardization of Test Microorganism

94 A loopful of the bacterial culture was aseptically inoculated into freshly prepared sterile nutrient broth
95 and incubated for 24 hours. 0.2 mL was pipetted from the 24 hours broth culture of the test organism and
96 was dispensed into 20 ml sterile nutrient broth and incubated for another 4 hours to standardize the
97 culture to 0.5 McFarland's standard (10^6 cfu/mL) before use as described by [12].
98

99 2.5 Reconstitution of *P. biglobosa* Effluent

100 The *P. biglobosa* effluent was filtered with 0.2 µm pore filter membrane and 1mL of the *P. biglobosa*
101 effluent were decanted in 10 mL of Dimethyl Sulfoxide and the concentrate was subjected to antimicrobial
102 activities.
103

104 2.6 Determination of Antimicrobial activities of *P. biglobosa* Effluents

105 *Parkia biglobosa* (100mg/mL) effluent and the effluent with chaffs were used against the test
106 microorganisms using agar well diffusion method with Chloramphenicol as antibiotic control. Mueller-
107 Hinton and Sabouraud dextrose agar plates were used for bacterial and fungal isolates respectively.
108 Observation and determination of zones of inhibition (ZI) were preceded with an aerobic overnight
109 incubation at 37°C for 24 hours and at 27°C for 48 hours for bacteria and fungi respectively.
110

111 2.7 Minimum Inhibitory Concentration (MIC)

112 The Minimum inhibitory concentration was carried out using tube dilution method using Mueller Hinton
113 broth. The tube dilution susceptibility test was used to determine the MIC values for the locust beans
114 effluent, a series of Mueller-Hinton broth tubes containing varying two fold concentrations of the various
115 *P. biglobosa* effluent samples in the range of 6.25mg/mL to 100mg/mL was prepared and incubated with
116 a previously standardized density of the test microorganisms (0.5mL). The lowest concentration of the *P.*
117 *biglobosa* effluent samples resulting in no growth following visual inspection after 18-24 hours of
118 incubation for bacteria and 24-72 hours for yeast and mould using spectrophotometer was recorded as
119 the MIC.
120

121 2.8 Statistical Analysis

122 Data obtained were subjected to one way analysis of variance while the mean were compared by
123 Duncan's New Multiple Range Test at 95% confidence interval using Statistical Package for Social
124 Sciences version 16.0. Differences were considered significant at $p \leq 0.05$. Errors were calculated as
125 standard error.
126

127 3.0 RESULTS

128 The Antibiotics sensitivity pattern of the clinical bacteria used for the antimicrobial test against the
129 effluents are shown in Table 1. The clinical bacteria; *S. aureus*, *P. aeruginosa*, *K. pneumoniae*, *S. typhi*,
130 *E. coli* and *S. pyogenes* were tested against some conventional antibiotics using an antibiotics sensitivity
131 disc. The antibiotics used were Septrin (30µg), Ciprofloxacin (10µg), Amoxicillin (10µg), Gentamycin
132 (10µg), Pefloxacin (30µg), Streptomycin (30µg), Ampiclox (30µg), Zinnacef (20µg), Rocephin (25µg),
133 Erythromycin (10µg), Chloramphenicol (30µg), Sparfloxacin (10µg), Augmentin (30µg), and Tarivid
134 (10µg).

135 The results show that *S. aureus* was susceptible to Septrin, Amoxicillin, Ampiclox, Zinnacef,
136 Rocephin, Chloramphenicol, and Tarivid, with Septrin and Zinnacef having the lowest and highest zones
137 of inhibition at 4.33 ± 0.58^b and 12.67 ± 0.58^b respectively, and it was resistant to the remaining
138 antibiotics; *P. aeruginosa* was inhibited by Rocephin and Tarivid at 4.33 ± 0.58^b and 6.67 ± 0.58^b
139 respectively, which were the lowest and highest zones of inhibition and it was resistant to other
140 antibiotics; *K. pneumoniae* was susceptible to Chloramphenicol, Gentamycin, and Tarivid. Gentamycin
141 and Chloramphenicol had the lowest and highest zones of inhibition with 6.00 ± 0.00^a and 8.67 ± 0.58^c
142 respectively.
143

144 Table 1: Different Antibiotics concentrations sensitivity pattern of the clinical bacteria
145

Antibiotics	<i>Staphylococcus aureus</i>	<i>Pseudomonas aeruginosa</i>	<i>Klebsiella pneumoniae</i>	<i>Salmonella typhi</i>	<i>Escherichia coli</i>	<i>Streptococcus pyogenes</i>
SXT	4.33±0.58 ^b	None	None	None	None	16.00±0.00 ^e
CPX	None	None	None	10.33±0.58 ^c	14.33±0.58 ^d	None
AM	8.33±0.58 ^c	None	None	None	10.00±0.00 ^c	None
CN	None	None	6.00±0.00 ^b	4.33±0.58 ^b	10.33±0.58 ^c	10.33±0.58 ^c
PEF	None	None	None	None	None	4.67±0.58 ^b
S	None	None	None	None	None	None
APX	13.00±1.00 ^d	None	None	None	4.33±0.58 ^b	10.33±0.58 ^c
Z	13.33±0.58 ^d	None	None	None	None	None
R	7.67±1.15 ^c	4.33±0.58 ^b	None	None	10.00±0.00 ^c	None
E	None	None	None	None	None	14.33±0.58 ^d
CH	8.33±0.58 ^c	None	8.67±0.58 ^c	None	None	None
SP	None	None	None	None	20.33±0.58 ^e	None
AU	None	None	None	None	None	None
OFX	12.67±0.58 ^d	6.67±0.58 ^c	8.33±0.58 ^c	12.33±0.58 ^d	14.33±0.58 ^d	10.67±0.58 ^c

146 Data are presented as Mean±S.D (n=3). Values with the same superscript letter(s) along the same
 147 column are not significantly different (P=0.05).

148 Legend:

149 SXT = Septrin (30µg), CPX = Ciprofloxacin (10µg), AM = Amoxicillin (10µg), CN = Gentamycin (10µg),
 150 PEF = Pefloxacin (30µg), S = Streptomycin (30µg), APX = Ampiclox (30µg), Z = Zinnacef (20µg), R =
 151 Rocephin (25µg), E = Erythromycin (10µg), CH = Chloramphenicol (30µg), SP = Sparfloxacin (10µg), AU
 152 = Augmentin (30µg), OFX = Tarivid (10µg)
 153

154 The antibiotics sensitivity pattern of the typed bacteria used for the antimicrobial test against the effluents
 155 is shown in Table 2. The typed bacteria; *S. aureus*, *P. aeruginosa*, *K. pneumoniae*, *S. typhi*, *E.coli* and *S.*
 156 *pyogenes* show almost the same susceptibility to the sensitivity disc as clinical bacteria.
 157

158 **Table 2: Different Antibiotics concentrations sensitivity pattern of the typed bacteria**

Antibiotics	<i>Staphylococcus aureus</i>	<i>Pseudomonas aeruginosa</i>	<i>Klebsiella pneumonia</i>	<i>Salmonella typhi</i>	<i>Escherichia coli</i>	<i>Streptococcus pyogenes</i>
SXT	4.33±0.58 ^b	None	None	None	None	16.00±0.00 ^e
CPX	None	None	None	10.33±0.58 ^c	14.33±0.58 ^d	None
AM	8.33±0.58 ^c	None	None	None	10.00±0.00 ^c	None
CN	None	None	6.00±0.00 ^b	4.33±0.58 ^b	10.33±0.58 ^c	10.33±0.58 ^c
PEF	None	None	None	None	None	4.67±0.58 ^b
S	None	None	None	None	None	None
APX	13.00±1.00 ^d	None	None	None	4.33±0.58 ^b	10.33±0.58 ^c
Z	13.33±0.58 ^d	None	None	None	None	None
R	7.67±1.15 ^c	4.33±0.58 ^b	None	None	10.00±0.00 ^c	None
E	None	None	None	None	None	14.33±0.58 ^d
CH	8.33±0.58 ^c	None	8.67±0.58 ^c	None	None	None
S P	None	None	None	None	20.33±0.58 ^e	None
AU	None	None	None	None	None	None
OFX	12.67±0.58 ^d	6.67±0.58 ^c	8.33±0.58 ^c	12.33±0.58 ^d	14.33±0.58 ^d	10.67±0.58 ^c

160 Data are presented as Mean±S.D (n=3). Values with the same superscript letter(s) along the same
 161 column are not significantly different (P=0.05).
 162
 163

164 Legend

165 SXT = Septrin (30µg), CPX = Ciprofloxacin (10µg), AM = Amoxicillin (10µg), CN = Gentamycin (10µg),
 166 PEF = Pefloxacin (30µg), S = Streptomycin (30µg), APX = Ampiclox (30µg), Z = Zinnacef (20µg), R =
 167 Rocephin (25µg), E = Erythromycin (10µg), CH = Chloramphenicol (30µg), SP = Sparfloxacin (10µg), AU
 168 = Augmentin (30µg), OFX = Tarivid (10µg).

169
 170 Antimicrobial activities of locust beans effluent and effluent with chaffs, on typed microorganisms at
 171 100mg/ml are presented in Table 3. For the typed isolates, at 100mg/ml the effluent of the *P. biglobosa*
 172 effluent and with chaffs were able to inhibit *S. aureus* (ATCC 43300), *S. typhi* (ATCC 35240), *E. coli*
 173 (ATCC 35218) and *S. pyogenes* (ATCC 29212) while *P. aeruginosa* (ATCC 27853) and *K. pneumoniae*
 174 (ATCC 48891) were resistant to the effluent. *E.coli* (ATCC 35218) had the lowest susceptibility at $6.33 \pm$
 175 0.58^b and *S. pyogenes* (ATCC 29212) had highest susceptibility with 13.00 ± 1.73^a zones of inhibition for
 176 effluent. While for effluent with chaffs *E. coli* (ATCC 35218) and *S. pyogenes* (ATCC 29212) had the
 177 lowest and highest zones of inhibition at 4.33 ± 0.58^a and 11.33 ± 0.58^a respectively while *P. aeruginosa*
 178 (ATCC 27853) and *S. pyogenes* (ATCC 29212) had the lowest and highest zones of inhibition at $18.67 \pm$
 179 0.58^b and 24.33 ± 0.58^c respectively when tested against Chloramphenicol (control).

180
 181 **Table 3: Antimicrobial activities of locust beans effluent and with chaffs on typed**
 182 **microorganisms at 100mg/mL**

Microorganisms	ELB	ELBC	C
<i>Staphylococcus aureus</i> (ATCC 43300)	8.67 ± 0.58^b	6.00 ± 0.00^a	20.33 ± 0.58^c
<i>Pseudomonas aeruginosa</i> (ATCC 27853)	None	None	18.67 ± 0.58^b
<i>Klebsiella pneumoniae</i> (ATCC 48891)	None	None	19.33 ± 0.58^b
<i>Salmonella typhi</i> (ATCC 35240)	12.67 ± 0.58^b	9.67 ± 1.15^a	24.00 ± 0.00^c
<i>Escherichia coli</i> (ATCC 35218)	6.33 ± 0.58^b	4.33 ± 0.58^a	21.33 ± 0.58^c
<i>Streptococcus pyogenes</i> (ATCC 29212)	13.00 ± 1.73^a	11.33 ± 0.58^a	24.33 ± 0.58^c

183 Data are presented as Mean \pm S.D (n=3). Values with the same superscript letter(s) along the same row
 184 are not significantly different (P=0.05).

185 Legend:

186 ELB- Effluent of locust beans,
 187 ELBC- Effluent of locust beans with chaffs,
 188 C- Chloramphenicol.

189
 190 Antimicrobial activities of locust beans effluent and with chaffs on clinical bacteria at 100mg/mL are
 191 presented in Table 4. For the clinical isolates, *P. biglobosa* effluent with chaffs and without chaffs at
 192 100mg/mL inhibited *S. aureus*, *Salmonella typhi*, *E. coli*, and *S. pyogenes* while *P. aeruginosa* and *K.*
 193 *pneumonia* were resistant to both effluents. *E. coli* and *S. pyogenes* had the lowest and highest
 194 susceptibility at 4.00 ± 0.00^b and 12.33 ± 0.58^a respectively for the effluent; while *Staphylococcus aureus*,
 195 and *S. pyogenes* had the lowest and highest susceptibility at 2.33 ± 0.58^a and 9.33 ± 0.58^a respectively for
 196 effluent with chaffs while *P. aeruginosa* and *K. pneumoniae* isolates were resistant to both effluents. *S.*
 197 *aureus* and *S. pyogenes* had the lowest and highest susceptibility at 16.67 ± 0.58^c and 21.33 ± 0.58^c
 198 respectively when tested against Chloramphenicol (control).

199
 200 **Table 4: Antimicrobial activities of locust beans effluent and effluent with chaffs on clinical**
 201 **microorganisms at 100mg/mL**

Microorganisms	ELB	ELBC	C
<i>Staphylococcus aureus</i>	4.00±0.00 ^b	2.33±0.58 ^a	16.67±0.58 ^c
<i>Pseudomonas aeruginosa</i>	None	None	17.33±0.58 ^b
<i>Klebsiella pneumonia</i>	None	None	18.67±0.58 ^b
<i>Salmonella typhi</i>	10.67±1.15 ^b	8.33±0.58 ^a	20.33±0.58 ^c
<i>Escherichia coli</i>	4.00±0.00 ^b	2.33±0.58 ^a	18.67±0.58 ^c
<i>Streptococcus pyogenes</i>	12.33±0.58 ^b	9.33±0.58 ^a	21.33±0.58 ^c

202 Data are presented as Mean±S.D (n=3). Values with the same superscript letter(s) along the same row
 203 are not significantly different (P=0.05).

204 Legend:

205 ELB- Effluent of locust beans

206 ELBC- Effluent of locust beans with chaffs

207 C- Chloramphenicol.

208
 209 Minimum inhibitory concentration of *P. biglobosa* effluent and without chaffs in mg/mL is shown in Table
 210 5. When effluents were tested against the typed and clinical isolates, the result showed the MIC of *S.*
 211 *aureus* and *E. coli* (Clinical) was 100mg/mL for both effluents. The MIC of *S. typhi* (ATCC 35240) (Typed)
 212 was 50mg/mL for both effluents. The MIC of *S. aureus* (ATCC 43300) (Typed) was 25mg/mL for effluent
 213 and 50mg/mL for effluent with chaffs. *P. aeruginosa*, *K. pneumoniae* (Clinical and typed cultured) and *S.*
 214 *typhi* (Clinical) showed no zone of inhibition.

215
 216 **Table 5: Minimum inhibitory concentration of *P. Biglobosa* effluent and effluent with**
 217 **chaffs in mg/mL**

Microorganisms	ELB	ELBC
<i>Staphylococcus aureus</i>	100	100
<i>Staphylococcus aureus</i> (ATCC 43300)	25	50
<i>Pseudomonas aeruginosa</i>	NI	NI
<i>Pseudomonas aeruginosa</i> (ATCC 2853)	NI	NI
<i>Klebsiella pneumoniae</i>	NI	NI
<i>Klebsiella pneumoniae</i> (ATCC 48891)	NI	NI
<i>Salmonella typhi</i>	50	25
<i>Salmonella typhi</i> (ATCC 35240)	50	50
<i>Escherichia coli</i>	100	100
<i>Escherichia coli</i> (ATCC 35218)	50	100
<i>Streptococcus pyogenes</i>	100	50
<i>Streptococcus pyogenes</i> (ATCC 29212)	100	50

218 Legend:

219 ELB: Effluent of locust beans,

220 ELBC: Effluent of locust beans with chaffs.

221
 222 **DISCUSSION**

223 It was discovered that most microorganisms obtained in this study were susceptible to these effluents
 224 which implies that the effluents can be used in the treatment of the diseases caused by those
 225 microorganisms. The antimicrobial activities of the *P. biglobosa* effluent and effluent with chaffs were
 226 tested against clinical and typed microorganisms. The effluent had higher zone of inhibition on the test
 227 microorganisms than the effluent with chaffs; this might be as a result of the phytochemical component
 228 present in the effluents which could be detrimental to the isolates. The presence of tannins in *P. biglobosa*
 229 was confirmed by [7] after studying the phytochemical and antibacterial properties of *P. biglobosa* and its

230 leaf extracts. The clinical isolates were more resistant compared with the typed microorganisms to the *P.*
231 *biglobosa* effluents, though the effluent were able to inhibit *S. aureus*, *S. typhi* and *E. coli*. [13] reported
232 that phytochemical screening of the root bark of the plant contains a lot of glycosides and tannins,
233 appreciable amounts of saponins and traces of alkaloids. The presence of such bioactive compounds
234 has been linked to the antibacterial activity such as inhibition of growth [14] and offering some
235 protection to the plant against microbial infections [15]. This findings also correlate with the report of
236 [16] who reported that *P. biglobosa* has been reported to be rich in tannins, flavonoids and saponins
237 among others which are secondary metabolites known to have antibacterial activities.

238 For both the typed and clinical isolates at 100mg/ml, *P. aeruginosa* (ATCC 27853) and *K. pneumoniae*
239 (ATCC 48891) were resistant the effluents of the *P. biglobosa*. This correlates with the report of [13] who
240 reported that *P. aeruginosa* is however less susceptible, for example bacteria like *P. aeruginosa* has
241 intrinsic antimicrobial resistance due to the permeability of the membrane and has a wide range of efflux
242 pumps. Some strains of *P. aeruginosa* show mutations in the fluoroquinolone binding site, loss of porin
243 channels, and increased production of beta - lactamase as well as cephalosporinase. It may acquire
244 additional resistance mechanisms through external plasmids and has a high potential to be resistant
245 against antimicrobials used during the treatment [7] also reported that *B. cereus* was more susceptible
246 while *P. aeruginosa* was not susceptible to *P. biglobosa* (Jacq.) extract.

247

248 CONCLUSION

249 This study has provided useful information on the antibacterial activity of the effluents against both the
250 typed and clinical microorganisms used in this study. Further work can be carried out on the effluent such
251 as determining the toxic dose and extraction of the bioactive component for use in production of drugs.

252 COMPETING INTERESTS

253 Authors have declared that no competing interests exist.

254

255

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