Antimicrobial Property of Titanium Plates Treated with Silica-Bound Protamine

Hiroyuki OWADA, Hideaki NARUSAWA*, Yu KATAOKA and Takashi MIYAZAKI

Abstract: Antimicrobial activity is necessary for dental prosthetic devices to maintain oral and systemic health in elderly people wearing prostheses. In particular, dental prosthetic devices with antifungal properties are urgently needed to prevent aspiration pneumonia. However, practical application methods to deliver antimicrobial properties to dental prosthetic devices have not yet been established. Therefore, in this study we aimed to fix protamine on titanium plates treated with silica coating using a Silano-Pen, and to evaluate the antimicrobial properties of the titanium plates against Candida albicans. Strong antifungal properties were obtained by soaking titanium plates in an aqueous protamine solution after silica coating treatment. Since this brand-new method is simple, its practical application is expected in the near future.

Key words: antimicrobial, protamine, titanium, silica coating

Introduction

According to the demographic statistics of the Japanese Ministry of Health, Labour and Welfare, 35,740 people died with aspiration pneumonitis in 2017, ranking it as the seventh leading cause of death in Japan\(^1\). Oral care is effective in preventing this disease;\(^2\) however, elderly people often wear dental prosthetic devices (dentures), which can provide a scaffold for microbial growth. To prevent this, it is necessary to keep the denture clean, but it is difficult for many patients to obtain frequent professional care. Therefore, it is desirable that the dentures themselves have antimicrobial properties. However, antimicrobial dental materials are not yet available, and when antimicrobial substances are incorporated into dental materials, side effects and the development of antimicrobial resistance may arise. Numerous attempts have been made to solve these problems, such as mixing with antibacterial inorganic powders\(^3\)–\(^6\) and organic liquids\(^7\)–\(^10\). But these attempts have not been successful practically.

One promising approach is to adsorb an antimicrobial protein contained in saliva onto the surface of the dental prosthetic devices to obtain a persistent effect. Because such peptides are very expensive, we searched for commercially available antimicrobial peptides that might have a similar effect. Protamine, a natural food preservative, has been used by food suppliers since the...
1980s because of its strong antimicrobial effects\textsuperscript{11}. Protamine is extremely heat stable and has a preservative effect in neutral and alkaline foods.

In the dental field, Miura \textit{et al}\textsuperscript{12,13} reported the efficacy of protamine against periodontal pathogenic bacteria and modified its antifungal activities with polymethyl methacrylate. Maruha Nichiro Corp.\textsuperscript{14,15} found that hydrolyzed protamine acquires antifungal activity. Matsuda found that protamine and a silica aqueous solution precipitates immediately after mixing and the powder shows antibacterial and antifungal effects\textsuperscript{16}. We suspected that attaching protamine to the silica surface might produce a similar change in the peptide structure to that induced by hydrolysis.

In dentistry, silicatization has been used for the pretreatment of adhesion enhancement materials for crowns and bridges since the 1980s\textsuperscript{17} (e.g., the Silicoater System; Kulzer & Co. GmbH, Hanau, Germany, and the Silano-Pen; Bredent, Senden, Germany). Among the materials for dental prosthetic devices, titanium has recently become the most popular because of its excellent biocompatibility and mechanical properties and it is now widely applied to many kinds of devices, including removable dentures.

Therefore, in this study, we firstly aimed to perform silicatization onto a titanium surface using the Silano-Pen because it is a handy and clinically acceptable device. Additionally, we verified spectroscopically that protamine could adsorb onto the silica adhering to the titanium surface, and then examined its antimicrobial properties. Additionally, because silica treatment is not generally used on acrylic resin denture bases, we describe a silica treatment method that does not cause damage to the denture.

\textbf{Materials and methods}

\textit{Reflection-absorption spectroscopy (RAS) and micro Fourier-transform infrared (FTIR) analysis of titanium surfaces treated with silicatization}

Sample plates with a thickness of 1.3 mm were prepared from a pure titanium rod (JIS class II) by slicing with a slow saw cutter (Buehler Isomet\textsuperscript{8}, Lake Bluff, IL, USA). Each plate was polished with silicon carbide paper #800 and a diamond paste. Next, the titanium plates were treated with a Silano-Pen (Fig. 1) following the manufacturer’s instructions. The plates were then dipped into an aqueous 4\% protamine solution (Maruha Nichiro, Tokyo, Japan).

To analyze surface absorption, RAS-FTIR analysis was performed (PR-510, JASCO, Tokyo, Japan) with the angle of the plate being 70°. An RAS-FTIR spectrum was obtained and, after the plate was washed with water to remove soluble material, the spectrum was obtained again. The sample surface was then scraped to collect a specimen for direct micro-FTIR analysis using a JASCO IRF-3000 instrument. The material was mixed with potassium bromide powder and pressed to make a thin pellet.

\textit{Antimicrobial testing of the titanium plates}

A titanium plate with a thickness of 2 mm was cut to 50 × 50 mm using a wire-type electrical discharge machining device (FANAC RoboCut α-0iA, Yamanashi, Japan) and the plate surface
was treated as described above. An antimicrobial test was performed according to ISO 22196 (JIS Z2801) "Measurement of antibacterial activity on plastics and other non-porous surfaces". Culture fluid (0.1 ml) containing *Staphylococcus aureus* (NBRC12732) at $2.6 \times 10^5$ colony-forming units (CFU)/ml, *Escherichia coli* (NBRC3972) at $1.0 \times 10^6$ CFU/ml, or *Candida albicans* (NBRC1594) at $3.7 \times 10^4$ CFU/ml were spotted onto each sample, and a polypropylene film covered the sample (N = 3). The samples were incubated at 35°C for 3 hr for bacteria or 24 hr for *C. albicans*. A soybean-casein digest agar with lecithin and polysorbate agent was used to wash out the microbes, and a standard agar medium was added and incubated at 37°C for 24 hr. After this, the colonies were counted.

**Denture surface treatment trial**

An acrylic resin plate was prepared using auto cure type resin (GC, Unifast II Tokyo, Japan) formed between glass plates. Information on the temperature at the time of treatment with a Silano-Pen was collected using a FLIR ONE Pro (FLIR Systems Inc., Portland, OR, USA) thermal imaging camera.

**Results**

**Surface analysis**

Figure 2 shows the RAS-FTIR spectra of the protamine-treated polished titanium plates before and after the water wash. Amide peaks disappeared after the wash. RAS-FTIR spectroscopy created a strong-intensity enhancement on adsorbed polished metal. Therefore, this finding suggests that protamine was attached to the metal surface before the wash, and disappeared from the metal surface after the wash. The unaffected Si-O band at around 1,200 cm$^{-1}$ indicates that the silica remained firmly attached to the surface.

Figure 3 shows an image of how the sample surface was scraped and mixed with potassium bromide (left), a microscopic view of the sample (middle), and the micro-FTIR spectrum (right). The scraped surface powder contained clear amide peaks in the FTIR spectroscopy, indicating that protamine was present in the silica powder scraped from the surface. When combined with the data in Figure 2, these findings suggest that protamine did not attach directly to the metal surface but did adsorb onto the surface-attached silica.

**Antimicrobial tests**

Figure 4 shows the result of ISO 22196 (JIS Z2801) antimicrobial tests, with the mean number of microbes plotted on a logarithmic scale. The initial value shows the number of microbes collected and counted immediately after inoculation. Two kinds of control data were obtained: for film (Control in the figure) and the untreated titanium (Ti in the figure).

The colony count was markedly lower in treated specimens. According to the test standard, a decrease of 2 log-units after 24 hr is an antimicrobial effect; our treatment resulted in a $10^3$ decrease in the colony count of *S. aureus* and a $10^4$ decrease in *E. coli* after 3 hr. Of important note was a decrease of more than 4 log-units in the *C. albicans* count after 24 hr.
Fig. 1. The Silano-Pen, commercially available as a dental bonding system.

Fig. 2. Right panel shows the reflection-absorption spectroscopy Fourier-transform infrared (RAS-FTIR) spectrum of the titanium surface, before and after washing. Left panel shows the hypothesis: Protamine molecules are attached on metal and silica (upper). Water stream (white arrow) washes protamine off the metal surface. Even if protamine is attached to the silica, it does not appear in the RAS-FTIR spectrum (lower).

Fig. 3. Scraping of the surface of the plate with a chisel (left panel); microscopic view of the scraped and collected powder packed with potassium bromide powder (middle panel); and a micro Fourier-transform infrared spectrum showing amide peaks, which is different from the lower spectrum in Fig. 2, despite being the same (right panel).
Acrylic denture surface treatment

We investigated the treatment of dentures with the Silano-Pen to determine whether silica could be applied without damaging the denture (for subsequent application of antimicrobial protamine).

Figure 5 shows the flame of the Silano-Pen (upper, normal; lower, thermography). Thermography shows that the flow of silica particles rises sharply at the tip of the flame, even though the flow is invisible to the human eye. The flame cannot be brought close to the denture surface as it would cause burning. Therefore, the denture treatment should be carried out from just below the denture at a distance of 10 cm, so that the temperature of the denture surface does not exceed 100ºC, and the denture will not be damaged (Fig. 6). In this case, the treated area was 6–7 cm in diameter.

Discussion

Many household goods, such as wallpaper, bath tubs, refrigerators, cutting boards etc., have passed the JIS Z 2801 test and are considered to have antimicrobial properties. The method reported in this paper achieved antimicrobial properties equal to, or better than, those described above.

However, the environment of the oral cavity is much harsher than the home living environment, and the antimicrobial coating needs to withstand any side effects and fungal change phenomena, while not affecting the intestinal and oral cavity bacterial flora.

A simple static electric force with ionic bonds causes binding between silica and protamine. Protamine is a cationic peptide; several antimicrobial materials are cationic. For example, hystatin and cystatin are saliva peptides, and polylysine is a food preservative (as is protamine). It is suspected that these substances might act in the same manner as protamine. However, more
research is needed to confirm this hypothesis.

The method described in this paper is limited in its efficacy; nevertheless, the materials are easy to apply (just blow and soak), removable (polish as usual or remove peptides with chemicals or enzymes), exchangeable (protamine from other species, other useful peptides), appendable (just rinse and soak) and safe (all materials used are food or food additives). Therefore, the authors of this study believe the findings described here could be useful in reducing the incidence of infectious diseases derived from artificial medical devices.

Conclusion

Protamine can be adsorbed onto silica-treated titanium surfaces. The number of live *S. aureus*, *E. coli* and *C. albicans* decreased by 1,000 fold (or more). Silica-bound protamine had a wide antimicrobial spectrum, including fungi. However, further investigation is needed to confirm its clinical efficacy.

Acknowledgments

I am indebted to the staff of the Department of Oral Biomaterials and Technology and to Dr. Masato Yamamoto whose research and comments helped me greatly throughout this study. I would also like to express my gratitude to my family for their moral support and warm encouragement. We thank Helen Jeays, BDSc AE, from Edanz Group (www.edanzediting.com/ac) for editing a draft of this manuscript.
Conflicts of interest disclosure

The authors have no conflicts of interest to disclose.

References

1) Ministry of Health, Labour and Welfare. Jinko dotai tokei geppo nenkei (gaisu). Kekka no gaiyo. 2017. (accessed 2018 Sep 12) Available from: https://www.mhlw.go.jp/toukei/sakain/hw/jinkou/geppo/nengai17/dl/kekka.pdf

2) Yoneyama T, Yoshida M, Sasaki H, et al. A study of the effects of oral health care on the prevention of aspiration pneumonia in the compromised elderly patient. J Jpn Assoc Dent Sci. 2001;20:58-68. (in Japanese).

3) Syaffiuddin T, Igarashi T, Shimomura H, et al. Bacteriological and mechanical evaluation of antibacterial filler-containing composite resins. J Showa Univ Dent Soc. 1993;13:443-449. (in Japanese).

4) Yoshida K, Tanagawa M, Atsuta M. Characterization and inhibitory effect of antibacterial dental resin composites incorporating silver-supported materials. J Biomed Mater Res. 1999;47:516-522.

5) Kawahara K, Tsuruda K, Morishita M, et al. Antibacterial effect of silver-zeolite on oral bacteria under anaerobic conditions. Dent Mater. 2000;16:452-455.

6) Ahn SJ, Lee SJ, Kook JK, et al. Experimental antimicrobial orthodontic adhesives using nanofillers and silver nanoparticles. Dent Mater. 2009;25:206-213.

7) Imazato S, Kinomoto Y, Tarumi H, et al. Antibacterial activity and bonding characteristics of an adhesive resin containing antibacterial monomer MDPB. Dent Mater. 2003;19:313-319.

8) Zhang K, Cheng L, Imazato S, et al. Effects of dual antibacterial agents MDPB and nano-silver in primer on microcosm biofilm, cytotoxicity and dentine bond properties. J Dent. 2013;41:464-474.

9) Li F, Chai ZG, Sun MN, et al. Anti-biofilm effect of dental adhesive with cationic monomer. J Dent Res. 2009;88:372-376.

10) Xie D, Weng Y, Guo X, et al. Preparation and evaluation of a novel glass-ionomer cement with antibacterial functions. Dent Mater. 2011;27:487-496.

11) Agren G. Investigations of substances inhibiting or stimulating the growth of some lactobacilli. II. The effect of 5-nitouracil on the growth of L. casei. Acta Pathol Microbiol Scand. 1954;35:91-96.

12) Miura T, Iohara K, Kato T, et al. Basic peptide protamine exerts antimicrobial activity against periodontopathic bacteria - growth inhibition of periodontopathic bacteria by protamine. J Biomed Sci Eng. 2010;3:1069-1072.

13) Miura T, Hayakawa T, Okumori N, et al. Antifungal activity against Candida albicans on PMMA coated with protamine derivatives. J Oral Tissue Eng. 2010;8:30-38.

14) Antifungal peptide or peptide composition containing the same and a manufacturing method thereof. Japan patent JP4520477B2. 2007 Mar 23. (Internet). (accessed 2018 Dec 19) Available from: https://patents.google.com/patent/JP4520477B2/en

15) Inoue T, Kawano A, Horiguchi M, et al. Antibacterial agent and antibacterial product. World patent WO/2011/049201. 2011 Apr 28. Japanese (Internet). (accessed 2018 Dec 19) Available from: https://patentscope2.wipo.int/search/en/detail.jsf?docId=WO2011049201

16) Matsuda Y. Development and applications of novel bio-silica forming polypeptides. (accessed 2018 Dec 19) Available from: https://shingi.jst.go.jp/past_abst/abst/p/10/1040/kwansei2.pdf

17) Tiller HJ, Gobel R, Magnus B, et al. A new concept of metal-resin adhesion using an intermediate layer of SiO (X)-C. Thin Solid Films. 1989;169:159-168.

18) International Organization for Standardization. ISO 22196:2011. Measurement of antibacterial activity on plastics and other non-porous surfaces (Internet). 2011 Aug. (accessed 2018 Dec 19) Available from: https://www.iso.org/standard/54431.html

19) Nihon Kogyo Kikaku. Antibacterial products-Test for antibacterial activity and efficacy. JIS Z2801:2010 (Internet). (accessed 2018 Dec 19) Available from: http://kikakurui.com/j2/Z2801-2012-01.html
20) Hartstein A, Kirtley JR, Tsang J. Enhancement of the infrared absorption from molecular monolayers with thin metal overlayers. *Phys Rev Lett*. 1980;45:201-204.

21) Kato T. Inhibitory effects of salivary peptides and rice peptides on periodontopathic bacteria and their endotoxin activities. *Shika Gakuho*. 2013;113:557-562. (in Japanese).

[Received November 28, 2018 : Accepted February 19, 2019]