



was analysed using Nucleotide Basic Local Alignment Search Tool (BLASTN) to search for highly similar sequence alignments within the nucleotide collection database. The contig was entered into MacVector 12.5 sequence analysis software and open reading frames (ORFs) 150 nucleotides or greater (50 amino acids) were identified. The ORFs were translated using MacVector 12.5 and the protein sequences were entered into Protein BLAST (BLASTP) and used to search for non-redundant protein sequence alignments.

While we have not attempted to characterise these viral proteins, our preliminary database search showed that the majority of these sequences have high homology to viral (phage) proteins (Table 1). These viral proteins were identified by setting up the selection search to the minimum size of the ORF's to be more than 50 amino acids in length. Generally, the majority of the identified phage related proteins seemed to be associated with an insertion into the *Neisseria* genome. A significant number of the identified phage proteins have strong association with *Neisseria meningitidis*, which might suggest that an identified virus might be a specific prophage for the bacterium *Neisseria meningitidis*. However, based on the fact that almost all of the identified proteins were associated with insertion into different *Neisseria* genomes, we can safely speculate that the identified virus is a specific phage for the *Neisseria* genus.

Furthermore, the preliminary sequence analyses have revealed a number of interesting observations including findings of putative bacterial promoter sequences, which were identified at -35 (TTGACA) and -10 (TATAAT). Intriguingly, these sequences were identified for the vast majority (79%, 19/24) of the identified phage related genes (Figure 1). However, it is rather difficult to accurately identify the exact promoter sequence for the identified phage proteins without experimental validation. Hence, further analyses and characterisation of the identified phages are being undertaken on a high scale by our research group.

## Discussion and Conclusion

There is an ever constant increase in the reported cases of multiple antibiotic-resistant pathogenic bacteria [12], which has prompted many researchers to revisit an older antibacterial therapy that utilises bacteriophages. Multi drug resistant bacterial pathogens pose a major threat to human health as well as to the long term efficacy of commonly used antibiotics [13]. The last few years have seen a significant increase in the number of new bacteriophage research programs, encompassing different delivery routes, the most popular being oral and parenteral

Research that focuses on the oral route of 'anti-bacterial' therapy revolves around the scenario of the potential isolation of specific bacteriophages from the human oral cavity, and investigating the possibility of utilising these phages as potential antibacterial agents. Bacteriophages isolated from the human oral cavity will more likely be useful in the development of antibacterial therapies for antibiotic resistant oral pathogens. Also, most of the published reports on human oral lytic phage isolation have encountered and/or reported the formation of lysis zones [2].

Bachrach et al. (2003) [14] reported the isolation of a lytic bacteriophage which they speculate contributes to the ecosystem of the human oral cavity and also possibly to overall human health since the phage is ubiquitously associated with its bacterium host. Oral pathogens are therefore noted to be found both in healthy and diseased individuals [3]. Thus, the presence of phages in healthy individuals may, although does not necessarily prove, the theory that they, phages somehow contribute to the overall health of the oral flora. While a number of studies who reported the isolation of bacteriophages from healthy human individuals indicated somewhat the likelihood of phages contributing on maintaining the oral flora [1,11,15], many others have argued otherwise [16,17].

This study provides proof of concept that bacteriophages may be isolated from healthy human individuals and that this fact (isolation from healthy individuals), prompted us to speculate that the isolated phage is likely to play a role in the maintenance of the oral flora. This warrants further investigations into the promising utility of bacteriophages therapy as an antibacterial modality. Furthermore, the identified bacteriophage could be utilised or further developed into making specific antibiotic treatments that could potentially target the host, *Neisseria meningitidis*, or the *Neisseria* species in general. Currently, we are further validating and characterising this isolated phage as well as determining the biological role that these phages might play in health and disease- which we believe can significantly improve the development of specific bacteriophage therapy.

## Acknowledgment

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Query    1  MAATLNLPINNSLGFAYIVPFQ-----NRK-----EN-----V-----T--- 29
ZP_05985602 64 MAATLNLPINNSLGFAYIVPFQ-----NRK-----EN-----V-----T--- 92
ZP_00135136 72 MAATLNLPQNGLGFAYIVPYQ-----NRK-----EK-----K-----T--- 100
ZP_06066245 70 MAATLNLPINNNLGFAYIVPFK-----NNK-----EN-----K-----I--- 98
ZP_05992197 69 MAATLNLLALQNLGFAYIVPYQ-----NRK-----EK-----K-----  T--- 97
ZP_08250835 68 MAATLNLPQNGLGFAYIVPFR-----NNK-----EK-----K-----T--- 96

Query    30 --EAQFQLGYKGFQIQLAQRSGQFKRINACPVYD-TD-V-----E----- 64
ZP_05985602 93 --EAQFQLGYKGFQIQLAQRSGQFKRINACPVYD-TD-A-----E----- 127
ZP_00135136 101 --EAQFQLGYKGLIQLAQRSGQFKRLVAVPVYE-KQLI-----A----- 136
ZP_06066245 99 --EAQFQLGYKGYIQLAQRSGQFSRIAATPVYD-GQLI-----S----- 134
ZP_05992197 98 --EAQFQLGYKGLIQLAQRSGQFKRLVAVPVYE-KQ-LL-----A----- 133
ZP_08250835 97 --EAQFQIGYKGFQIQLAQRSGQFKRLVALPVYK-KQLI-----K----- 132

Query    65 -E---DVIYQRLT-----S--L-----I-----P---R---K--P--S-G 81
ZP_05985602 128 -E---DVIYQRLT-----S--L-----I-----P---R---K--P--S-G 144
ZP_00135136 137 -E---DPINGFE-----F--D-----W-----K---Q---K--P--A-K 153
ZP_06066245 135 -E---NPLLYE-----F--D-----W-----S---V---K--P--N-G 151
ZP_05992197 134 -E---DPINGFE-----F--D-----W-----K---Q---K--P--A-K 150
ZP_08250835 133 -K---DFINGFE-----F--D-----W-----E---Q---E--PEQN-E 151

Query    82 ---Q---IGYIAYFQLNGYEANLMTMEELEAH--AKRYSQT---Y----- 118
ZP_05985602 145 ---Q---IGYIAYFQLNGYEANLMTMEELEAH--AKRYSQT---Y----- 181
ZP_00135136 154 DE--K---P-IGYYAYFKLINEFTAELYMSTQDVYDH--AARYSQT---Y----- 192
ZP_06066245 152 ---N---P-IGYVAFKLINEFTAELYMSKEEVMKH--ANKYSQT---A----- 188
ZP_05992197 151 DE--K---P-IGYYAYFKLINEFTAELYMTTQEVHHDH--ANRYSQT---Y----- 189
ZP_08250835 152 ---N---P-IGYYAYFKLVNDFSaelymshddk14(1)5219----E--PEQN-E--Y----- 189
    
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References

- Machuca P, Daille L, Vinés E, Berrocal L, Bittner M (2010) Isolation of a novel EDFWHULRSKDJH VSHFL<sub>2</sub>F IRU WKH SHULRGRQWDO (204)WKRJHQ )XVREDFWHULXP QXFQHDWXP Appl Environ Microbiol 76: 7243-7250.
- +LWFK \* 3UDWWHQ - 7D\ORU 3: ,VRODWLRQ RI EDFWHULRSKDJH )URP WKH RUDO cavity. Lett Appl Microbiol 39: 215-219.
- Rylev M, Kilian M (2008) Prevalence and distribution of principal periodontal SDWKRJHQV ZRUOGZLGH - &OLQ 3HULRGRQWRO Methods 159: 194-199.
- 3DOPHU 5- -U \*RUGRQ 60 &LVDU -2 .ROHQEUDQG HULRQJHUJDWLRQ mediated interactions of streptococci and actinomyces detected in initial human GHQWDO SODTXH - %DFWHULRO Methods 159: 194-199.
- Ryan EM, Gorman SP, Donnelly RF, Gilmore BF (2011) Recent advances in bacteriophage therapy: how delivery routes, formulation, concentration and WLPLOJ LQAXHQFH WKH VXFFHVV RI SKDJH WKHUDS (204)WKRJHQ )XVREDFWHULXP QXFQHDWXP Methods 159: 194-199.
- Delisle AL, Rostowski CA (1993) Lytic Bacteriophages of Streptococcus mutans. Curr Microbiol 27: 165-167.
- +RXVE\ -1 0DQQ 1+ 3KDJH WKHUDS\ 'UXJ 'LVF Methods 159: 194-199.
- 7DQJ .+ <XVRII . 7DQ :6 'LVSOD\ RI KHSDWLW RQ EDFWHULRSKDJH 7 DQG LWV SRWHQWLDO LQ JH Methods 159: 194-199.
- +DXEHN ' :LOOL . 3RXOVHQ . 0H\HU - .LOLDQ Methods 159: 194-199.

bacteriophage Aa phi 23 correlates with the population genetic structure of \$FWLQREDFLOOXV DFWLQRP\FHWHPFRPLWDQV (XU Bacteriophage Isolation from human saliva. Lett Appl Microbiol 36: 50-53.

10. Hiroki H, Shiki A, Totsuka M, Nakamura O (1976) Isolation of bacteriophages VSHFL¿F IRU WKH JHQXV 9HLOORQHOOD \$UFK 2UDO %LRO

11. \$O -DUERX \$1 \*HQRPLF /LEUDU\ 6FUHHQLQJ IRU 9LUXVHV IURP WKH +XPDQ 'HQWDO 3ODTXH 5HYHDOHG 3DWKRJHQ 6SHFL¿F /\WLF 3KDJH 6HTXHGFHV &XUU Microbiol 64: 1-6.

12. Chanishvili N, Chanishvili T, Tediashvili M, Barrow PA (2001) Phages and their DSSOLFDWLRQ DJDLQVW GUXJ UHVLVWDQW EDFWHULD - &KHP 7HFKQRO %LRWHFKQRO 699.

13. Cars O, Högberg LD, Murray M, Nordberg O, Sivaraman S, *et al.* (2008) 0HHWLQJ WKH FKDOOHQJH RI DQWUHLRWLF UHVLVWDQFH %0- D

14. Bachrach G, Leizerovici-Zigmond M, Zlotkin A, Naor R, Steinberg D (2003) Bacteriophage Isolation from human saliva. Lett Appl Microbiol 36: 50-53.

15. &DR - 6XQ < %HUJOLQGK *et al.* (2000) Herdfect pylori =