

Research article

Restriction fragment length polymorphisms of mutans streptococci in forensic odontological analysis

Paul Spradbery*

University of Chester, Chester, UK.

* Corresponding author: Intertek 4-Front Research plc, Capenhurst Technology Park, Chester CH1 6EH, UK. Tel: +44 151 347 4810. Email: paul.spradbery@googlemail.com

Supervisors: Dr Ian McDowall and Dr Philip Wood, Department of Biological Sciences, University of Chester, Chester, UK.

Humans bite each other with alarming frequency. Such injuries can result in forensic investigation and, ultimately, criminal prosecution. Bite mark analysis techniques include odontometric measurement. ABO serotyping and DNA profiling, none of which is infallible. Research into additional techniques would be advantageous. Biting involves, also, bacterial transfer from teeth to skin and vice versa. The principal species found on anterior teeth is Streptococcus mutans, which is universal among humans. The aim of this research was to establish, in the context of forensic odontology, whether chromosomal DNA profiles of this ubiquitous oral bacterium would vary significantly among a sample of Caucasian individuals (P = 0.05). Hence, if sufficient discriminatory power were present, the technique could be deemed useful to forensic investigation. Oral fluid was recovered from the lower incisors of 10 adults. Samples were cultured selectively using mitis salivarius bacitracin agar and microbiological tests carried out for the purpose of differential identification. These included visual assessment of colony morphology, Gram staining and microscopic analysis, followed by chemical testing for the enzyme catalase. Chromosomal DNA was extracted from subcultured cells, resolved by agarose gel electrophoresis and viewed using ultraviolet transillumination. The presence of DNA was confirmed. Subsequently, the 16S ribosomal RNA gene was amplified by polymerase chain reaction using specific 27 forward and 1492 reverse primers. Amplicons were resolved and viewed as previously. Amplified products were digested by incubation with restriction endonuclease Haell, resolved by polyacrylamide gel electrophoresis and viewed. Linear regression analysis of gel profiles was used to calculate restriction fragment lengths. A Kruskal-Wallis (analysis of variance) test was performed on ranked data (H = 8.161, df = 9, P = 0.518). Consequently, the null hypothesis (no inter-subject variation) was accepted. However, all but two profiles were proved to be unique. Proof of principle was provided regarding the application of oral bacterial genotyping to forensic bite mark cases.

Key words: Streptococcus mutans, restriction fragment length polymorphism, polymerase chain reaction, mitis salivarius bacitracin agar, restriction endonuclease HaellI, 16S ribosomal RNA gene.

Submitted on 29 September 2009; accepted on 22 April 2010

Introduction

Background and theory

Darwin described biting as a form of assault exhibited by all the Carnivora.¹ In primates, this occurs in self-defence² or as an act of either physical or sexual aggression.³ Its prevalence in human conflicts, ranging from playground fights to rape and child abuse, bears witness to its evolutionary origins.⁴ One per cent of all visits to American medical emergency departments are bite-related.⁵ Many more cases doubtless go unrecorded. In the UK, bites from humans are even more common than those from either dogs or cats. Police officers, health workers and other institutional staff, who constitute a significant proportion of the population, are at particular risk. Males are bitten most frequently on the upper limbs, whereas females are more likely to suffer bites

on the legs, breasts and genitalia.⁶ Evidence shows that perpetrators are significantly more likely to be male than female,⁷ and the superior force exerted by male jaws increases the potential severity of the trauma.^{8, 9}

Bite injuries can precipitate many clinical complications, including damage to nerves, vessels and tendons.¹⁰ Transmission of infections is more serious: saliva contains up to 100 million microorganisms per millilitre, and it has been estimated that 10–18% of bites become infected.¹⁰ Microbial pathogens include hepatitis B and C, Herpes simplex, tuberculosis, tetanus and syphilis.¹¹ Clearly, therefore, high incidence of such injuries warrants effective forensic analysis.

Odontological evidence is routinely presented in courts of law. Several aspects of bite mark analysis are currently used, but legal contention is well documented and has valid foundation.¹² Odontometry, or tooth measurement, is predicated on two assumptions: first, that each individual's dentition is unique and, secondly, that this uniqueness is identifiable from a bite mark.¹³ Supporting evidence is inconclusive,¹⁴ and laboratory protocols are unreliable.¹⁵ Unusual dental characteristics include congenital malformations. incisal-edge fractures and longitudinal rotations. Although helpful in differential identification, the majority of individuals do not have them, which restricts their usefulness to the forensic odontologist.¹⁶

The matching of a bite mark to an individual requires experienced, and sometimes subjective, judgement.¹⁷ Herein lies the controversy: the technique is flawed if it is not based on the scientific method.¹⁸ There are, as yet, no established critical methodologies, databases, nor probabilistic models, and error rates remain undetermined.¹⁹

Skin is, by virtue of its curves, irregularities and elasticity, a poor impression material; oedema, lividity and bloodclotting can induce post-traumatic distortion.⁴ Moreover, marks deteriorate on healing,²⁰ which introduces a time constraint. These drawbacks are compounded by innate limits to interpersonal dental anatomical variation. Even sex differentiation can prove difficult. Iscan and Kedici²¹ reported specificity of <77%. More fundamentally, false-positive diagnoses have been published. An impression made by a bottle top was once erroneously identified as a bite mark.²²

Since the first bite mark conviction, in 1975,²³ referrals to Courts of Appeal, and subsequent acquittals, have occurred.²⁴ Exonerations have been based on hair and fingerprint evidence,²⁵ DNA profiling²⁶ and irreconcilable disagreement among forensic odontologists.²⁷ Most infamously, a death sentence was overturned.²⁸ Drawbacks of such enormity imply that unless techniques are either improved or superseded, then forensic odontology could become devalued.

Approximately 80% of humans are secretors.²⁹ ABO blood groups of 90% of these can be determined by serotyping cell-surface antigens present in saliva.³⁰ Hence, more than one-quarter of potential aggressors are unidentifiable.

This, combined with relatively low discriminatory power, renders blood serotyping susceptible to eventual obsolescence. Presently, its legal application is limited to a small number of exoneration cases.³¹

The ultra-high discriminatory power of 'genetic fingerprinting' revolutionized forensic identification.³² DNA profiles can be generated from epithelial cells deposited in bite marks. For example, Kobilinsky *et al.*³³ documented a criminal case in which a serial killer was convicted following analysis of salivary DNA recovered from a coffee cup. However, molecular degradation constitutes a major impediment to DNA extraction from bite mark residue.³⁴ This occurs when the phosphodiester bonds are hydrolysed by nucleases,³⁵ secreted by the parotid gland.³⁶ Thus, salivary DNA concentration decreases with time since deposition.³⁷

Locard's Exchange Principle—'every contact leaves a trace'³⁸—invites the question: what other biological entities, apart from blood-type antigens and DNA, could be transferred during biting? Perhaps the most obvious are microbes. Some species of oral bacteria adhere plentifully to enamel by means of glucans, whose synthesis is catalysed by glucosyltransferase (GTF).³⁹ For effective forensic application, bacterial isolates would require effective typeability. Phenotypic methods include biotyping and serotyping,⁴⁰ although discriminatory power is poor in comparison with genotypic alternatives, and antisera availability is limited to very few species.⁴¹ Bacteriocin typing can provide an alternative but is expensive and technically demanding.⁴²

Bacterial DNA profiling was considered for experimental study. The most prevalent genus found on anterior teeth is *Streptococcus*, ⁴³ followed by *Actinomyces* and *Veillonella*.⁴⁴ Thermophysiological research has shown that oral streptococci thrive only in the oral cavity.⁴⁵ This implies no host contribution to the streptococcal flora of a bite mark on human skin. Recovered cells would be likely, therefore, to have originated solely from the perpetrator.

The 'mutans streptococci' (MS) (Fig. 1) are especially significant. *Streptococcus mutans* and *Streptococcus sobrinus* are commonly found; the others are extremely rare.⁴⁶ *Streptococcus mutans* is carried by all humans; *S. sobrinus* is found in only 8–35%, depending on geographical origin.⁴⁷ Thus, the ubiquity of *S. mutans*, combined with its low tendency to colonize extraorally, renders this species potentially useful in forensic identification.

As with salivary DNA degradation on human skin, the *S. mutans* cell count deteriorates with time, the rate of reduction of viable cells being \sim 50% per hour.⁴⁸ Nevertheless, Borgula *et al.*⁴⁹ were able to recover more than 1000 viable cells after 24 h. Loss of bacteria would appear less problematic than comparable host DNA degradation, as bacterial DNA can easily be replicated by further culture.

Characteristics of *S. mutans* are: coccobacilli; diameter $0.5-2.0 \mu$ m; paired or chained; non-motile and non-sporing;

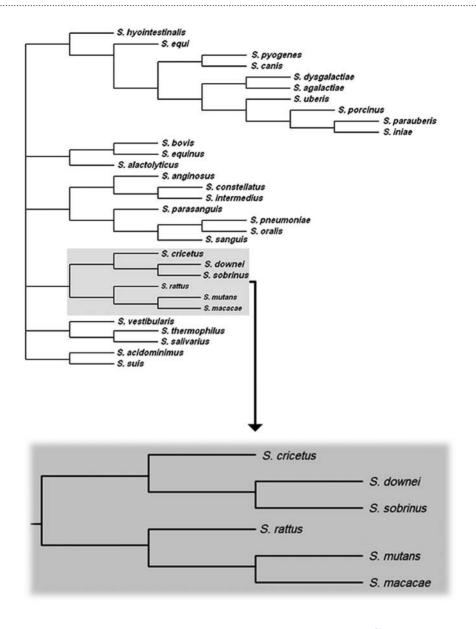


Figure 1. Dendrograms illustrating phylogenetic relationships of *Streptococcus* spp. (mutans group shaded).⁸¹ Evolutionary interspecies distances are not represented quantitatively. Dendrograms constructed using GenoPro2007[®] Online Software.

Gram-positive; facultatively anaerobic; fermentative metabolism producing lactate without gas; catalase negative; and mesophilic.⁵⁰ *Streptococcus mutans* colonizes the oral cavity when the first (deciduous) teeth erupt.⁵¹ Transmission occurs principally via maternal saliva,⁵² and the first colonizing strain is purported to persist throughout life.⁵³ Therefore, if the *S. mutans* profile is not liable to change with time, as is true with the host DNA fingerprint, then its forensic application would, in principle, be further endorsed. Lindquist and Emilson⁵⁴ discovered that *S. mutans* colonization was equally high on all teeth, whereas that of *S. sobrinus* was relatively low on incisors.⁵⁵ Bite marks, generally, involve only incisors and canines,⁵⁶ where the frequency ratio of *S. mutans* to *S. sobrinus* happens to be greatest. Hence, differential transfer during biting would be maximized in favour of *S. mutans*. These data are highly convenient to forensic bacterial genotyping.

Justification of methodology

Experimental objectives were: extraction of *S. mutans* from human incisors; selective microbiological culture and subsequent identification; formulation of an effective protocol for DNA extraction from Gram-positive cells; and generation of individual genetic profiles using a specific polymorphic marker. Methods of tissue sampling, bacterial culture and DNA profiling were selected in the light of previous research. Sampling techniques, compared by Wennerholm *et al.*,⁵⁷ showed that recovery of greatest bacterial yield was provided by wooden toothpicks, as opposed to metal instruments or dental floss. Alternative techniques, using plastic strips, precluded bacterial growth in a significant proportion of samples.⁵⁸

Several agar media have been used to culture *S. mutans* selectively. These include mitis salivarius bacitracin (MSB),⁵⁹ tryptone yeast-extract cystine⁶⁰ and trypticase yeast-extract cystine sucrose bacitracin.⁶¹ The yeast-extract media produced greater recovery than MSB⁶⁰ but yielded numerous non-mutans bacteria also.⁶¹ Given the greater selectivity of MSB agar, in which bacitracin is utilized for its long-proven antibiotic capability against extraneous Gram-positive species,⁶² it is used most frequently for *S. mutans* isolation.^{63, 64}

Species identification methods include the use of monoclonal antibodies raised against MS strains, enzymes or cell markers.⁴¹ High specificity has been observed using two different types of immunoassay.⁶⁵ Biochemical tests are a common alternative,⁶⁶ and frequently involve carbohydrate fermentation.^{67, 68} Colony morphology provides dependable provisional differentiation.^{69–71} Gram staining and light microscopy enhances diagnostic power, which can be increased further by catalase-testing.⁵⁰

Several markers have been genotyped successfully. Hamada and Slade⁶⁹ analysed extrachromosomal DNA but noted that plasmid occurrence in human *S. mutans* was only 5%. Analysed chromosomal genes include those coding for dextranase,⁷² GTF,^{73, 74} 16S ribosomal RNA (rRNA)⁷⁵ and the 16S–23S rRNA intergenic spacer.⁷⁶ Matsuyama *et al.*⁷⁷ compared the dextranase, GTF and 16S rRNA genes on the basis of detection frequency using their respective primers and polymerase chain reaction (PCR) amplification. It was concluded that the 16S rRNA gene offered greatest sensitivity for MS detection. Consequently, it is widely used to identify MS and many other bacterial pathogens.⁷⁸

The *S. mutans* (UA159) genome has been sequenced fully.⁷⁹ There are 2 030 936 bp,⁸⁰ and the 16S rRNA gene is 1552 bp long.⁷⁹ Bentley *et al.*⁸¹ analysed a 1334-nucleotide region and calculated that it exhibited 94.5% sequence homology with *S. sobrinus*. In fact, up until the mid-1980s, the two human MS species (*S. mutans* and *S. sobrinus*) were indistinguishable.⁸²

Restriction fragment length polymorphism (RFLP) analysis, the first forensic DNA technique,⁸³ has been applied frequently following DNA extraction from Gram-positive bacteria.⁸⁴ 16S rRNA genes of other oral genera, *Veillonella*⁸⁵ and *Actinomyces*, ⁸⁶ have been similarly typed. The *Hae*III enzyme, isolated from *Haemophilus aegyptius*, ⁸⁷ recognizes the palindromic nucleotide sequence GGCC and cleaves both DNA strands at the same location, producing blunt-ended fragments.⁸⁸ It has been used to digest the 16S rRNA gene of *S. mutans*, ⁸⁹ yielding RFLP patterns in accordance with Genbank.⁷⁵ The gene contains 13 potential *Hae*III restriction sites (Table 1), and the number of possible fragment lengths comprising an RFLP

Table 1. Streptococcus mutans UA159 16S rRNA complete nucleotide sequence (1552 bp) (NCBI, 2008, Sequence Viewer 2.0. β , Accession NC_004350.1, nucleotides 185 749–187 300 inclusive)

Nucleotides	Base sequence
1-40	AGAGTTTGATCCTGGCTCAGGACGAACGCTGGCGGCGTGC
41-80	CTAATACATGCAAGTGGGACGCAAGAGGACACACTGTGCT
81-120	TGCACACCGTGTTTTCTTGAGTCGCGAACGGGTGAGTAAC
121-160	GCGTAGGTAACCTGCCTATTAGCGGGGGATAACTATTGGA
161-200	AACGATAGCTAATACCGCATAATATTAATTATTGCATGAT
201-240	AATTGATTGAAAGATGCAAGCGCATCACTAGTAGATGGAC
241-280	CTGCGTTGTATTAGCTAGTTGGTAAGGTAAGAGCTTACCA
281-320	AGGCGACGATACATAGCCGACCTGAGAGGGTGATC <u>GGCC</u> A
321-360	CACTGGGACTGAGACAC <u>GGCC</u> CAGACTCCTACGGGAGGCA
361-400	GCAGTAGGGAATCTTCGGCAATGGACGAAAGTCTGACCGA
401-440	GCAACGCCGCGTGAGTGAAGAAGGTTTTCGGATCGTAAAG
441-480	CTCTGTTGTAAGTCAAGAACGTGTGTGAGAGTGGAAAGTT
481-520	CACACAGTGACGGTAGCTTACCAGAAAGGGACGGCTAACT
521-560	ACGTGCCAGCAGCCGCGGTAATACGTAGGTCCCGAGCGTT
561-600	GT <u>CCGG</u> ATTTATTGGGCGTAAAGGGAGCGCAGGCGGTCAG
601-640	GAAAGTCTGGAGTAAAAGGCTATGGCTCAACCATAGTGTG
641-680	CTCTGGAAACTGTCTGACTTGAGTGCAGAAGGGGAGAGTG
681-720	GAATTCCATGTGTAGCGGTGAAATGCGTAGATATATGGAG
721-760	GAACACCAGTGGCGAAAGCGGCTCTCTGGTCTGTCACTGA
761-800	CGCTGAGGCTCGAAAGCGTGGGTAGCGAACAGGATTAGAT
801-840	ACCCTGGTAGTCCACGCCGTAAACGATGAGTGCTAGGTGT
841-880	TA <u>GGCC</u> CTTT <u>CCGG</u> GGCTTAGTG <u>CCGG</u> AGCTAACGCAATA
881-920	AGCACTCCGCCTGGGGAGTACGACCGCAAGGTTGAAACTC
921-960	AAAGGAATTGACGGG GGCC CGCACAAGCGGTGGAGCATGT
961–1000	GGTTTAATTCGAAGCAACGCGAAGAACCTTACCAGGTCTT
1001-1040	GACATCCCGATGCTATTCTTAGAGATAGGAAGTTACTTCG
1041-1080	GTACATCGGAGACAGGTGGTGCATGGTTGTCGTCAGCTCG
1081-1120	TGTCGTGAGATGTTGGGTTAAGTCCCGCAACGAGCGCAAC
1121–1160	CCTTATTGTTAGTTGCCATCATTAAGTTGGGCACTCTAGC
1161–1200	GAGACTG <u>CCGG</u> TAATAAA <u>CCGG</u> AGGAAGGTGGGGATGACG
1201-1240	TCAAATCATCATGCCCCTTATGACCTGGGCTACACACGTG
1241–1280	CTACAATGGTCGGTACAACGAGTTGCGAG <u>CCGG</u> TGACGGC
1281–1320	AAGCTAATCTCTGAAAGCCGATCTCAGTTCGGATTGGAGG
1321–1360	CTGCAACTCGCCTCCATGAAGTCGGAATCGCTAGTAATCG
1361–1400	CGGATCAGCACGCCGCGGTGAATACGTTC <u>CCGGGCC</u> TTGT
1401–1440	ACACACCGCCCGTCACACCACGAGAGTTTGTAACACCCGA
1441–1480	AGTCGGTGAGGTAACCTTTTAGG GGCC AGCCGCCTAAGGT
1481–1520	GGGATGGATGATTGGGGTGAAGTCGTAACAAGGTAGCCGT
1521–1552	ATCGGAAGGTGCGGCTGGATCACCTCCTTTCT

HaellI restriction sites are given in bold type and underlined.

profile is given by the expression: $1/2 (x^2 + 3x + 2)$, where *x* represents the number of restriction sites. (Note: This algebraic expression is original and, therefore, requires no citation.)

Each subject would, therefore, yield between 1 and 14 restriction fragments from a combination of 105 possible lengths, assuming that all sizes were different. This could provide adequate informativeness. In the 1980s, RFLP analysis was often impractical, partly because of the relatively large amount of DNA required. This has been alleviated by the advent of PCR.⁹⁰

Selected specific primers were 27f (forward) and 1492r (reverse) (Fig. 2).^{77, 91} Given that some DNA fragments were predicted to be shorter than 500 bp (Table 2), electrophoresis using polyacrylamide gel was preferred, for quantitative analysis, to agarose gel by virtue of its higher

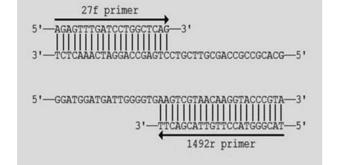


Figure 2. Schematic representation of PCR amplification of *S. mutans* 16S rRNA gene, using 27 (forward) and 1492 (reverse) primers.

Table 2.	Potential	Haelll-digested	restriction	fragment	lengths (bp)

resolution capability.⁹² However, for qualitative purposes—that is, to confirm the presence (or absence) of DNA—agarose was deemed adequate.

The hypothesis to be tested was that individual DNA profiles of *S. mutans* would exhibit inter-subject variation (at a confidence level of 5%).

Materials and methods

Microbiological culture and identification

About 660 mg bacitracin powder (Fluka[®], Chemie AG, Buchs, Switzerland) was dissolved in 250 ml dH₂O. A 20 ml aliquot was extracted by a sterile syringe and injected through a sterile, surfactant-free cellulose acetate syringe filter, diameter 26 mm, pore size $0.2 \,\mu\text{m}$ (Corning[®], Corning, NY, USA), and collected in a sterile 30 ml bottle. (Fresh solutions were prepared for each subsequent culture.)

Twenty-seven grams of mitis salivarius agar powder (Fluka[®]) were dissolved in 300 ml dH₂O, autoclaved for 15 min at 121°C before being cooled in a water bath to ~55°C. Three hundred microlitres of sterile 1% potassium tellurite solution (Fluka[®]) and 375 µl bacitracin solution were added, in turn, and agitated gently for 10 s. Approximately 20 ml was dispensed into each of 12 sterile Petri plates, covered, allowed to cool to 20°C and refrigerated until required.

Oral fluid was sampled from the incisal/labial enamel surfaces of the each subject's anterior teeth, using a sterile wooden toothpick, and streaked directly across its corresponding plate.⁵⁸ A positive control plate was prepared

		Primer 27f	Restriction site no. (3' end)												Primer	
			1	2	3	4	5	6	7	8	9	10	11	12	13	1492r
Primer	27f	-	297	319	544	824	832	845	917	1149	1160	1251	1371	1374	1445	1465
Restriction site no. (5' end)	1		-	22	247	527	535	548	620	852	863	954	1074	1077	1148	1168
	2			-	225	505	513	526	598	830	841	932	1052	1055	1126	1146
	3				-	280	288	301	373	605	616	707	827	830	901	921
	4					-	8	21	93	325	336	427	547	550	621	641
	5						-	13	85	317	328	419	539	542	613	633
	6							-	72	304	315	406	526	529	600	620
	7								-	232	243	334	454	457	528	548
	8									-	11	102	222	225	296	316
	9										-	91	211	214	285	305
	10											-	120	123	194	214
	11												-	3	74	94
	12													-	71	91
	13														-	20
Primer	1492r															-

with precultured *S. mutans*, and a negative with *Escherichia coli*.⁹³ The plates were placed in an anaerobic system (BBLTM GasPakTM, Becton, Dickinson & Company, Oxford, UK) and incubated at 37°C for 72 h.⁹⁴

All plates were assessed for bacterial growth, characteristics being: number, colour, size, form, elevation, margin, consistency and odour.⁹⁵ A small drop of sterile dH₂O was placed onto each of a series of clean microscope slides. A single, well-isolated colony was removed from each plate using a sterile metal loop and emulsified on its corresponding slide. Gram staining was carried out on each slide in turn. Oil immersion microscopy was used to assess cell morphology and aggregation.

A single colony was recovered from each plate and streaked across a corresponding nutrient agar (NA) (Lab M^{TM} Ltd, Bury, UK) plate.⁹⁶ These were incubated anaerobically, as previously,⁹⁴ and exposed to air for 30 min.⁹⁷ One drop of 30% (w/v) hydrogen peroxide (Fisher Scientific, Loughborough, UK) was placed onto a clean microscope slide. A single, well-isolated colony was recovered, using a sterile wooden toothpick, from each NA plate, emulsified in fresh solution and any gaseous production observed.⁹⁸ *Staphylococcus aureus* was employed as a positive control,⁹⁷ *Lactococcus lactis* as a negative control.⁵⁰

From each MSB plate, a single, well-isolated colony was streaked across a corresponding fresh MSB plate and incubated anaerobically.⁹⁴ Following incubation, the procedure was repeated using the resultant (first) subcultures, and subsequent (second) subcultures were grown.

Liquid culture of Streptococcus mutans

Yeast glucose buffered broth was prepared by dissolving the following ingredients in 500 ml dH₂O: 6.5 g Nutrient Broth No. 2 (Lab MTM, Bury, UK); 0.5 g D-glucose (anhydrous) (Fisons Scientific Equipment, Loughborough, UK); 1.84 g potassium dihydrogen orthophosphate (VWR International Ltd, Poole, UK); and 0.66 g di-potassium hydrogen orthophosphate (anhydrous) (Fisher Chemicals, Loughborough, UK).⁹⁹ pH was adjusted to 7.2 by adding 1.0 M aqueous sodium hydroxide, as required. The buffered solution was autoclaved at 121°C for 15 min. A single colony from each second MSB subculture was suspended in a corresponding sterile glass universal bottle containing 4 ml broth and incubated at 37°C for 72 h.⁹⁴

DNA extraction and isolation

DNA was extracted from each broth sample using the Wizard[®] Genomic Purification Kit A1120 (Promega Corporation, Madison, WI, USA). In accordance with recommended proportions, 100 mg lysozyme preparation (Sigma[®], St Louis, MO, USA) was dissolved in 10 ml dH₂O. One millilitre broth culture was transferred to a 1.5 ml microcentrifuge tube and centrifuged for 2 min at 15 000 rpm. The supernatant was removed and the cells

were suspended in 480 µl 50 mM ethylenediaminetetraacetic acid (EDTA) (pH 8.0). One hundred and twenty microlitres of lysozyme solution were added and the mixture was incubated at 37°C for 45 min. Centrifugation was repeated, for 2 min at 15 000 rpm, and the supernatant discarded. Six hundred microlitres of Nuclei Lysis Solution (Promega) were added and agitated gently. This was incubated at 80° C for 5 min and cooled to room temperature (20° C). Three microlitres of RNase solution (Promega) were added, mixed, incubated at 37°C for 60 min, and then cooled to room temperature. Two hundred microlitres of Protein Precipitation Solution (Promega) were added, vortexed for 10 s and incubated on ice for 5 min. The mixture was centrifuged for 3 min at 15 000 rpm. The supernatant was transferred to a clean 1.5 ml tube containing 600 µl (room temperature) isopropanol and mixed gently by repeated inversion. This was centrifuged for 2 min at 15 000 rpm and the supernatant decanted. Six hundred microlitres of (room temperature) 70% ethanol were added, mixed and centrifuged for 2 min at 15 000 rpm. The ethanol was aspirated, and the pellet air-dried for 15 min and rehydrated in 100 µl Rehydration Solution (Promega) for 1 h at 65°C. The isolated DNA was refrigerated at 2°C until required.

PCR amplification and restriction fragment resolution

Two grams of agarose (Fisher Scientific) were added to 100 ml dH₂O and heated until dissolution was complete. After cooling to ~60°C, 2 ml 50× Tris-Acetate-EDTA (TAE) buffer and 10 µl GelRedTM fluorescent nucleic acid gel stain (Biotium Inc., Cambridge, UK) were added. The mixture was stirred to homogenize and poured into a casting tray. Fifteen microlitres of each (unamplified, whole genomic) DNA sample were transferred to a corresponding, fresh 0.5 ml tube. Ten microlitres of a 1 kb marker were added to an additional tube. Three microlitres of $6 \times$ blue/ orange Loading Dye (Promega) were added to each sample and the marker. After solidification, 500 ml $1 \times$ TAE running buffer was poured into the tray until the gel was submerged. Twelve microlitres of each sample were introduced into its corresponding well. Electrophoresis was carried out at 100 V for 80 min. The gel was removed from the tray, placed in a Gel Doc 2000 ultraviolet (UV) transilluminator (BioRad, Hemel Hempstead, UK) and DNA products were visualized.

Primer sequences were: 27F, 5'-AGAGTTTGATCCTGG CTCAG-3'; and 1492R, 5'-TACGGGTACCTTGTTACGA CTT-3' (Eurofins MWG, London, UK).^{77, 91} About 1608 μ l sterile dH₂O was added to the 27F primer, and 1185 μ l to the 1492R. About 50 μ l of each was added to a 0.5 ml tube containing a further 100 μ l sterile dH₂O, making a total volume of 200 μ l. A 10 μ l aliquot of primer mix was added to a fresh 0.5 ml tube containing 125 μ l 2× Premix E reaction buffer (FailSafeTM, Epicentre Biotechnologies, Madison, WI, USA). To this was added

5 μl (25 units) GoTaqTM DNA polymerase (Promega) and 60 μl sterile dH₂O, making a total volume of 200 μl. A 5 μl aliquot of each of the 10 DNA samples was transferred to a corresponding 0.5 ml PCR tube containing 20 μl master mix. The 10 samples were amplified using a TECHNE TC-312 thermal cycler, programmed as follows: 95°C for 15 min (initial heat activation); followed by 35 cycles of 94°C for 1 min (denaturation), 52°C for 1 min (annealing) and 72°C for 1.5 min (extension); and 72°C for 10 min (final extension).⁹¹

About 10 μ l of each PCR product was transferred to a corresponding series of 10 fresh 0.5 ml tubes. Ten microlitres of DNA Step Ladder (1 kb) (Promega) were added to two further tubes. Two microlitres of loading dye were then added to all 12 tubes and samples were loaded into agarose wells. Amplicons were resolved by electrophoresis and profiles visualized.

A digestion master mix was prepared as follows: 195.6 µl sterile dH₂O was transferred to a fresh 0.5 ml tube; 24 µl 10× Multi-coreTM buffer was added, followed by 2.4 µl acetylated bovine serum albumin (10 mg/ml), making a total volume of 222 µl, in accordance with a protocol issued by Promega.¹⁰⁰ About 18.5 µl master mix was transferred to a series of 12 fresh 0.5 ml tubes. One microlitre of PCR product was added, in turn, to 10 of these, leaving two to serve as controls (i.e. containing no DNA). About 0.5 µl (5 units) *Hae*III was added to all preparations apart from one of the controls (i.e. containing neither DNA nor restriction enzyme), making a total volume of 20 µl per reaction. Samples were incubated at 37°C for 2.5 h, before being frozen at -20° C until required.

A 10% Tris-Borate-EDTA (TBE) 15-well polyacrylamide gel (InvitrogenTM, Paisley, UK) was loaded into a vertical electrophoresis kit. Approximately 1 litre $1 \times$ TBE buffer was added, ensuring complete coverage of wells. A 50 ml syringe was filled with buffer and any air bubbles above the gel were flushed out. The gel was pre-run at 300 V for 10 min, ensuring a surface temperature of 50°C. For each sample and two controls, 3 µl loading dye was added to a fresh 0.5 ml tube containing 10 µl restriction digest. The same amount of dye was added to 10 µl marker. The mixtures were spun in a microcentrifuge for 10 s. All wells were reflushed with buffer. A 10 ml aliquot of each sample was loaded into a corresponding well. The gel was run at 300 V for 60 min, removed from the cast and immersed in GelRedTM staining solution (Biotium Inc., Cambridge, UK). This was placed in a Stuart Orbital Incubator SI50 (Barloworld Scientific, Stone, UK) at 50 oscillations per minute for 30 min. The gel was transferred to a UV transilluminator and DNA products were visualized.

Statistical analysis

A Kruskal-Wallis (non-parametric) test for analysis of variance by ranks (Statistical Package for the Social Sciences, SPSS)¹⁰¹ was conducted to compare PCR-RFLP profiles of the 10 test samples.

Results

Microbiological culture and identification

All colonies had a purple, metallic, frosted appearance. Colony diameter ranged from 0.5 to 1.5 mm. Elevation was variable, and margins were not well-defined, owing, at least partly, to coalescence. All plates were odour-free. The positive control plate, streaked with S. mutans, showed similar growth. The negative control plate, streaked with E. coli, was not growth-free but showed fewer than 10 colonies in total. A distinctive odour, characteristic of E. coli, was evident. Colonies recovered from test and positive control plates tested Gram-positive. Microscopy revealed ovoid coccobacilli $\sim 0.5-1.0 \,\mu\text{m}$ in diameter. Cells were either isolated or aggregated in tightly packed chains 2-10 units in length. Colonies taken from the negative control plate tested Gram-negative; cells were exclusively bacilli and non-chained. Colonies recovered from NA test plates produced no gas on immersion in hydrogen peroxide solution. However, a single, isolated and markedly larger, colony taken from each of plates 4 and 9 effervesced vigorously. Gaseous production was apparent from colonies recovered from the positive control plate but not from the negative. Broth cultures of all test samples exhibited high turbidity and noticeable precipitation.

Electrophoresis and gel analysis

The presence of (unamplified) DNA was visualized in every lane except '2' (Fig. 3). All bands were of comparable length. The presence of DNA was visualized in every lane containing amplified 16S rRNA genes (Fig. 4). All amplicons appeared to be of the same length, although the signal in lane 10 was relatively weak. Amplicons measured between 1000 and 2000 bp, in accordance with the expected 1552 bp value.⁷⁹

Multiple DNA restriction fragment bands were visualized in all 10 lanes containing digested samples. The maximum

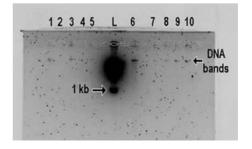


Figure 3. Electrophoregram of *S. mutans* whole genome, confirming presence of DNA.

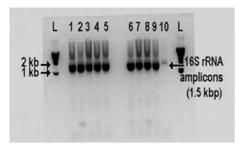


Figure 4. Electrophoregram of 16S rRNA gene. DNA amplicons 1–9 (inclusive) exhibited strong signals.

number was five (lanes 1, 3 and 9), minimum three (lanes 4 and 7). Profiles were dissimilar, with the exception of identical samples 5 and 6. No bands were apparent in the two control lanes (11 and 12) (Fig. 5).

Evidence of sample overload is apparent in each of the three gel images (Figs 4-6). This occurred, principally, as a result of a lack of prior knowledge with regard to the quantity of DNA extracted from the broth cultures.

Using Fig. 5, electrophoretic migration distances were measured (Table 3). Calibration data (Table 4) were used to generate a (log-lin) standard curve and its linear equation (SPSS) (Fig. 6). By interpolation, fragment lengths were calculated to range from 100 to 400 bp (Table 5).

A Kruskal–Wallis test revealed no significant difference between PCR-RFLP profiles of *S. mutans* samples at a confidence level of 5%, i.e. H = 8.161, df = 9, P = 0.518.

A graphical profile comparison is illustrated in Fig. 7.

Discussion

The extent of *S. mutans* genotypic variation was comparable to related research.^{49, 94} Despite the Kruskal–Wallis *P*-value of 0.518, all but two of the 10 profiles, namely samples 5 and 6, were unique. For the purpose of positive forensic identification, individuality is key.¹⁰² That is, profile variation is more crucial than the actual degree of variation. Numerical

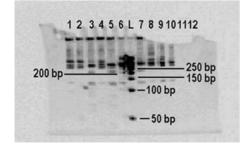


Figure 5. Electrophoregram of *Hae*III-restricted digests of 16S rRNA amplicons.

difference in DNA fragment length, providing that it exists and is discernible, has no effect on discriminatory power.

Microbiological methods were effective. MSB agar facilitated selective culture and standard concentrations of bacitracin and potassium tellurite⁶³ promoted sufficient MS growth. However, the presence of *E. coli* on the negative control plate demonstrated that false-positive results can occur. These have been documented previously.¹⁰³

Confirmation that DNA had been extracted from the same species in each sample was provided by the wholegenome electrophoregram (Fig. 3). All bands migrated similar distances, indicating similar-sized genomes. For example, the *S. mutans* genome is 15% smaller than that of *Streptococcus sanguinis*¹⁰⁴ and less than half that of *E. coli*.¹⁰⁵ Such differences would have been detectable in the banding pattern. The band of the sample 10 amplicon (Fig. 4) was less intense than the others owing to random error. PCR-RFLP techniques were successful in generating legible profiles (Fig. 5), in accordance with Sato *et al.*⁷⁵

Subject selection was, genetically, non-random. All subjects were Caucasian British, between 20 and 45 years old. It is not known whether *S. mutans* profiles vary significantly between groups of different racial or geographic origin, although *S. mutans* chromosomal genotypes have been shown to exhibit less variation among (unrelated) Caucasians than among Asians.¹⁰⁶

Different restriction enzymes yield different numbers of fragment lengths per DNA sample. In this case, a mean average of only 4.1 restriction fragments per sample meant that discriminatory power was limited. This, and hence statistical power, could be increased by using additional enzymes in parallel with *Hae*III.¹⁰⁷

Järvinen *et al.*¹⁰⁸ found that both *S. mutans* and *S. sobrinus* were susceptible to ampicillin, penicillin, cefuroxime and tetracycline. Consequently, recovery of *S. mutans* for genotyping could be diminished if a suspect had recently undergone antibiotic therapy. Furthermore,

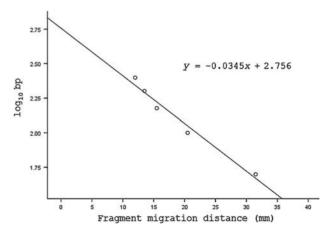


Figure 6. Haelll-restricted 16S rRNA gene standard curve (SPSS).

Sample									
1	2	3	4	5	6	7	8	9	10
	distances (mm)								
5.0	5.0								
							6.0		
								7.5	
			8.0						
8.5	8.5	8.5					8.5	8.5	8.5
						9.5	9.5	9.5	9.5
				10.0	10.0				
10.5	10.5	10.5	10.5					10.5	10.5
		11.0							
11.5	11.5		11.5	11.5	11.5				
		13.0		13.0	13.0	13.0			
							16.5	16.5	16.5
17.5		17.5		17.5	17.5	17.5			

Table 3. Migration distances of HaellI-restricted S. mutans 16S rRNA gene

Profiles 5 and 6 were seen to be identical.

sensitivity varies according to serotype.⁹³ Similar complications might result following the use of chlorhexidine, a commonly used agent in antiseptic mouthwashes.¹⁰⁹ Emilson *et al.*⁷⁰ isolated *S. mutans* from only 28% of incisors following intensive chlorhexidine therapy. The most widely used oral antibacterial, however, is fluoride.¹¹⁰ Present almost universally in dentifrices, it denatures enolase and thus disrupts glycolysis.¹¹⁰ Taking the form of sodium fluoride in commercial brands such as Crest[®], ¹¹¹ a synergistic effect has been observed when used with chlorhexidine.¹¹²

Forensic bacterial genotyping need not be confined to odontological cases, providing that fundamental conditions are met. These include: a bacterial species highly specific to the relevant area of the body; a means of reliable culture and DNA isolation; a genetic marker sufficiently polymorphic; and preservation of transferred cells for an adequate period. These criteria are satisfied by sex crimes where either assailant or victim has gonorrhoea, the causative agent, *Neisseria gonorrhoeae* (gonococcus), being a genital tract pathogen of both sexes.¹¹³ In contrast to

 Table 4. Calibration data for HaellI-restricted 16S rRNA gene of S. mutans

Marker fragment size (bp)	Migration distance (mm)
50	31.5
100	20.5
150	15.5
200	13.5
250	12.0

S. mutans, where interpersonal transmission takes place from a surface on which the species thrives (teeth) to one where lysis readily occurs (skin), the gonococcus has the advantage of exchanging one optimum environment for another. Thus, its survival, post-transmission, is more assured. The UK's first forensic analysis of this type was carried out in 2007.¹¹⁴ Gonococcal isolates were recovered from a child and an adult male. Respective genotypes were

 Table 5. Calculated band lengths of HaellI-restricted 5. mutans 16S

 rRNA gene

Sample											
1	2	3	4	5	6	7	8	9	10		
Fragm	ent leng	gths (bp)								
383*	383										
							354				
								314			
			302								
290	290	290					290	290	290		
						268	268	268	268		
				258	258						
248	248	248	248					248	248		
		238									
229	229		229	229	229						
		203		203	203	203					
							154	154*	154		
142		142		142	142	142					

*Fragments 1 and 37 in Fig. 7.

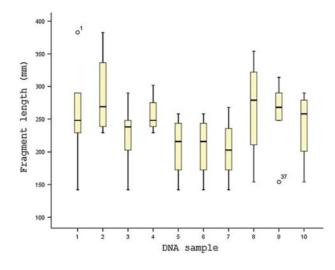


Figure 7. A boxplot of 16S rRNA gene PCR-RFLP profiles of *S. mutans* samples recovered from 10 subjects. Central bands represent median fragment lengths; whiskers represent highest and lowest values; and box lengths represent differences between respective 25th and 75th percentiles. Outliers are present in two samples: the 383 bp fragment in Sample 1 and the 154 bp fragment in Sample 9.

matched and a guilty verdict was secured. Recent figures suggest that a mere 6% of reported rape offences result in conviction, 40% of cases not reaching trial owing to insufficient evidence.¹¹⁵ Further refinement of this technique could, therefore, benefit what is a complex, and at present unsatisfactory, area of the criminal justice system.

PCR-RFLP analysis of *S. mutans* could be extended to other polymorphic markers. Mattos-Graner *et al.*¹¹⁶ digested GTF amplicons using enzymes *BsrI* and *SspI*, which yielded a large total number of restriction sites. Total genomic bacterial DNA has also been analysed, using *Eco*RI and *Hind*III.¹¹⁷

Neither this nor the aforecited research involved sample recovery from human skin, which would mimic a forensic investigative scenario. Subsequent research might, therefore, involve swabbing self-inflicted bites and attempting to match genotypes with those generated from oral samples.¹¹⁸ One approach would be to compare profiles of two sample groups—one set taken from teeth and the other from skin—in which only the 'perpetrator' had supplied both.

Skin might not be the only substrate from which *S. mutans* could be obtained. Others include pipe stems and writing utensils, although foodstuffs would be more likely.¹¹⁹ These might create a different effect by virtue of nutrient content. *Streptococcus mutans* is aciduric and readily metabolizes sucrose.¹²⁰ Therefore, its capacity for survival might be influenced by foodstuff characteristics such as pH, and protein and carbohydrate content, as well as by environmental temperature.⁵⁰ Arakawa *et al.*¹²¹ isolated *Streptococcus* spp. from spoilage microbiota found in milk biscuits and carried out 16S rRNA genotyping. It was

concluded that milk-based substrates could prolong cell viability. Controlled experiments using different foodstuffs are indicated.

During the course of this study, Beecher-Monas¹²² argued that court rulings are now regularly being overturned by DNA evidence because odontometric analysis has no empirical basis. Consequently, the number of exoneration cases could reach a critical threshold and precipitate a *Daubert* motion *in limine*, ¹²³ causing forensic odontometric evidence to become inadmissible. If so, alternative techniques, such as bacterial genotyping, could be advocated for more intensive study.

Conclusion

Proof of principle has been provided to support the forensic application of PCR-RFLP analysis for genotypic comparison of *S. mutans* recovered from bite mark injuries. The emergence of bacterial genotyping could, therefore, extend the applicability of Locard's Exchange Principle:³⁸ an individual, when in any form of physical contact with another, stands to transfer not only his own genetic identity, but also those of the myriad other organisms with whom he inevitably co-exists.

Acknowledgements

The author would like to extend sincere gratitude to the University of Chester, for accepting the research proposal and providing academic, technical and administrative support. Particular thanks are offered to Dr Ian McDowall and Dr Philip Wood, Programme Leaders in Forensic Biology and Biomedical Sciences, respectively.

Funding

The author would like to thank the Department of Biological Sciences at the University of Chester for funding this research in its entirety.

Author biography

Paul Spradbery graduated with First Class Honours in Forensic Biology at the University of Chester. He also holds a degree in Dental Surgery and has been awarded the Freedom of the City of London. Having been recruited by a major international scientific research organization, his future aspirations involve a range of biological disciplines. These include odontology, genetics and further forensic work, in particular DNA profiling techniques.

References

- 1. Darwin CR (1872) The Expression of the Emotions in Man and Animals. London: HarperCollins.
- 2. Maynard Smith J (1958) *The Theory of Evolution*. Cambridge: Cambridge University Press.
- de Waal F (2000) Chimpanzee Politics: Power and Sex Among Apes. Baltimore, MD: Johns Hopkins University Press.
- 4. Rothwell BR (1995) Bite marks in forensic dentistry: a review of legal, scientific issues. J Am Dent Assoc 126: 223–232.
- Liston PN, Tong DC, Firth NA, Kieser JA (2001) Bite injuries: pathophysiology, forensic analysis, and management. N Z Dent J 97: 58–63.
- Pretty IA, Anderson GS, Sweet DJ (1999) Human bites and the risk of human immunodeficiency virus transmission. *Am J Forensic Med Path* 20: 232–239.
- Freeman AJ, Senn DR, Arendt DM (2005) Seven hundred seventy eight bite marks: analysis by anatomic location, victim and biter demographics, type of crime, and legal disposition. J Forensic Sci 50: 1436–1443.
- 8. Garner LD, Kotwal NS (1973) Correlation study of incisive biting forces with age, sex, and anterior occlusion. J Dent Res 52: 698–702.
- Waltimo A, Könönen M (1993) A novel bite force recorder and maximal isometric bite force values for healthy young adults. Scand J Dent Res 101: 171–175.
- McLeod IK, Gallagher DJ III, Revis DR Jr, Seagle MB (2008) Human Bites. Retrieved 26 March 2009 from the eMedicine® website: https:// medscape.comarticle881270-overview.
- 11. Wienert P, Heiss J, Rincker H, Sing A (1999) A human bite. Lancet 354: 572.
- 12. Whittaker DK, MacDonald DG (1989) A Colour Atlas of Forensic Dentistry. London: Wolfe.
- 13. Pretty IA, Turnbull MD (2001) Lack of dental uniqueness between two bite mark suspects. J Forensic Sci 46: 1487-1491.
- 14. Sweet D, Pretty IA (2001) A look at forensic dentistry—Part 2: Teeth as weapons of violence—identification of bitemark perpetrators. *Br Dent J* 190: 415–418.
- Pretty IA, Sweet DJ (2006) The judicial view of bitemarks within the United States Criminal Justice System. J Forensic Odontostomatol 24: 1–11.
- Rothwell BR (1994) Bitemarks in forensic odontology: fact or fiction? Worthington P, Evans JR, eds, *Controversies in Oral and Maxillofacial Surgery*. Philadelphia, PA: WB Saunders Company, pp. 588–600.
- 17. Dixon B (2006) Identifying bite marks. Lancet Infect Dis 6: 127.
- Bowers CM (1996) DNA & Bite Mark Analysis, Retrieved 31 March 2009 from the ExpertLaw[®] website: http://www.expertlaw.comlibraryidentificationdna_ bite_marks.html.
- 19. Beecher-Monas E (2007) Evaluating Scientific Evidence: An Interdisciplinary Framework for Intellectual Due Process. Cambridge: Cambridge University Press.
- 20. Leung CKK (2008) Forensic odontology. Hong Kong Med Diary 13: 16-20.
- Iscan MY, Kedici PS (2003) Sexual variation in bucco-lingual dimensions in Turkish dentition. *Forensic Sci Int* 137: 160–164.
- 22. James H, Cirillo GN (2004) Bite mark or bottle top? J Forensic Sci 49: 119–121.
- 23. Scheid RC, Woelfel JB (2007) *Woelfel's Dental Anatomy: Its Relevance to Dentistry*. London: Lippincott Williams & Wilkins.
- 24. Bowers CM (2006) Problem-based analysis of bitemark misidentifications: the role of DNA. *Forensic Sci Int* 159: S104–S109.
- 25. *State of Mississippi v Bourne* (1993) 93-10, 214 (3), Jackson County Circuit Court.
- 26. State of Mississippi v Gates (1998) 5060, Humphrey County Circuit Court.

- 27. State of Florida v Morris (1997) Pasco County, 97-3251 CFAES.
- 28. State of Arizona v Krone (1995) 182 Ariz. 319, 897 P.2d 621.
- 29. Jackson ARW, Jackson JM (2004) Forensic Science. Harlow: Pearson.
- de Silva RHA, Sales-Peres A, de Oliveira RN, de Oliveira FT, de Carvalho Sales-Peres SH (2007) Use of DNA technology in forensic dentistry. J Appl Oral Sci 15: 156–161.
- Gefrides LA, Welch KE (2006) Serology and DNA. In Mozayani A, Noziglia C, eds, *The Forensic Laboratory Handbook: Procedures and Practice*. London: Springer, pp. 1–27.
- Jeffreys AJ, Wilson V, Thein SL (1985) Individual-specific 'fingerprints' of human DNA. *Nature* 316: 76–79.
- Kobilinsky LF, Liotti TF, Oeser-Sweat J, Watson JD (2004) DNA: Forensic and Legal Applications. Chichester: Wiley.
- 34. Gunn A (2006) Essential Forensic Biology. Chichester: Wiley.
- Bernard PH (1999) Physiology of the exocrine pancreas. In Baert AL, Delorme G, van Hoe L, eds, *Radiology of the Pancreas*. London: Springer, pp. 9–18.
- Yaegaki K, Sakata T, Ogura R, Kameyama T, Sujaku C (1982) Influence of aging on DNase activity in human parotid saliva. J Dent Res 61: 1222–1224.
- Sweet D, Lorente JA, Valenzuela A, Lorente M, Villanueva E (1997) PCR-based DNA typing of saliva stains recovered from human skin. J Forensic Sci 42: 447–451.
- Pepper IK (2005) Crime Scene Investigation: Methods and Procedures. Maidenhead: McGraw-Hill.
- Hacker J, Dobrindt U (2006) Pathogenomics: Genome Analysis of Pathogenic Microbes. Weinheim: Wiley-VCH.
- Maslow J, Mulligan ME (1996) Epidemiologic typing systems. Inf Cont Hosp Epidemiol 17: 595–604.
- 41. Grönroos L (2000) Academic Dissertation: Quantitative and Qualitative Characterization of Mutans Streptococci in Saliva and in Dentition, Retrieved 1 September 2008 from the University of Helsinki website: http://tethesis.helsinki.fijulkaisutlaahammavkgronroosch2.htm.
- Arbeit R (1995) Laboratory procedures for the epidemiologic analysis of microorganisms. In Murray P, Baron EJ, Pfaller M, eds, *Manual of Clinical Microbiology*. Washington, DC: ASM Press, pp. 190–208.
- Okada M, Soda Y, Hayashi F et al. (2002) PCR detection of Streptococcus mutans and S. sobrinus in dental plaque samples from Japanese pre-school children. J Med Microbiol 51: 443–447.
- 44. Wilson M (2005) Microbial Inhabitants of Humans: Their Ecology and Role in Health and Disease. Cambridge: Cambridge University Press.
- Ma Y, Marquis RE (1997) Thermophysiology of Streptococcus mutans and related lactic-acid bacteria. Antonie Leeuwenhoek 72: 91–100.
- Facklam R (2002) What happened to the streptococci: overview of taxonomic and nomenclatural changes. *Clin Microbiol Rev* 15: 613–630.
- University of Newcastle (2007) Streptococcus mutans and the mutans streptococci. Retrieved 27 May 2008 from the University of Newcastle website: http://www.ncl.ac.uk/dental/oralbiol/oralenv/tutorials/mutans.htm.
- Brown KA, Elliot TR, Rogers AH, Thonard JC (1984) The survival of oral streptococci on human skin and its implications in bite-mark investigation. *Forensic Sci Int* 26: 193–197.
- Borgula LM, Robinson FG, Rahimi M et al. (2003) Isolation and genotypic comparison of oral streptococci from experimental bitemarks. J Forensic Odontostomatol 21: 23–30.
- Holt JG, Krieg NR, Sneath PHA, Staley JT, Williams ST (1994) Bergey's Manual of Determinative Bacteriology. Baltimore, MD: Lippincott Williams & Wilkins.
- Berkowitz RJ, Jordan HV, White G (1975) The early establishment of Streptococcus mutans in the mouths of infants. Arch Oral Biol 20: 171–174.
- Carletto Körber FP, Cornejo LS, Giménez MG (2005) Early acquisition of Streptococcus mutans for children. Acta Odontol 18: 69–74.

176

- 53. Alaluusua S, Alaluusua SJ, Karjalainen J *et al.* (1994) The demonstration by ribotyping of the stability of oral *Streptococcus mutans* infection over 5 to 7 years in children. *Arch Oral Biol* 39: 467–471.
- 54. Lindquist B, Emilson CG (1990) Distribution and prevalence of mutans streptococci in the human dentition. J Dental Res 69: 1160–1166.
- Lindquist B, Emilson CG (1991) Dental location of *Streptococcus mutans* and *Streptococcus sobrinus* in humans harbouring both species. *Caries Res* 25: 146–152.
- 56. Dorion RBJ (2004) Bitemark Evidence. London: CRC Press.
- 57. Wennerholm K, Lindquist B, Emilson CG (1995) The toothpick method in relation to other plaque sampling techniques for evaluating mutans streptococci. *Eur J Oral Sci* 103: 36–41.
- del Rio Gomez I, Bratthall D (1990) Sample, count, identify, and store the mutans streptococci. Scand J Dent Res 98: 106–111.
- Gold OG, Jordan HV, van Houte J (1973) A selective medium for Streptococcus mutans. Arch Oral Biol 18: 1357–1364.
- 60. Wade WG, Aldred MJ, Walker DM (1986) An improved medium for isolation of *Streptococcus mutans. J Med Microbiol* 22: 319–323.
- Svanberg M, Mjör IA, Ørstavik D (1990) Mutans streptococci in plaque from margins of amalgam, composite, and glass-ionomer restorations. *J Dent Res* 69: 861–864.
- Johnson BA, Anker H, Meleney FL (1945) Bacitracin: a new antibiotic produced by a member of the *B. subtilis* group. *Science* 102: 376–377.
- 63. Gamboa F, Estupinan M, Galindo A (2004) Presence of *Streptococcus mutans* in saliva and its relationship with dental caries: antimicrobial susceptibility of the isolates. *U Scientiarum* 9: 23–27.
- Moreira M, Vicente VA, Glienke C (2007) Genetic variability of *Streptococcus* mutans isolated from low-income families, as shown by RAPD markers. *Braz* J Microbiol 38: 729–735.
- de Soet JJ, van Dalen PJ, Appelmelk BJ, de Graaff J (1987) Identification of *Streptococcus sobrinus* with monoclonal antibodies. *J Clin Microbiol* 25: 2285–2288.
- Baca P, Castillo AM, Baca AP, Liebana MJ, Junco P, Liebana J (2008) Genotypes of *Streptococcus mutans* in saliva versus dental plaque. *Arch Oral Biol* 53: 751–754.
- Järvinen H, Tenuvuo J, Huovinen P (1993) In vitro susceptibility of *Streptococcus mutans* to chlorhexidine and six other antimicrobial agents. *Antimicrobial Agents Chemother* 37: 1158–1159.
- Spolidorio DMP, Höfling JF, Pizzolitto AC, Rosa EA, Negrini TdC, Spolidorio LC (2003) Genetic polymorphism of *Streptococcus mutans* in Brazilian family members. *Braz J Microbiol* 34: 213–217.
- Hamada S, Slade HD (1980) Biology, immunology, and cariogenicity of Streptococcus mutans. Microbiol Rev 44: 331–384.
- Emilson CG, Lindquist B, Wennerholm K (1987) Recolonization of human tooth surfaces by *Streptococcus mutans* after suppression by chlorhexidine treatment. *J Dent Res* 66: 1503–1508.
- Liu J, Bian Z, Fan M *et al.* (2004) Typing of mutans streptococci by arbitrarily primed pcr in patients undergoing orthodontic treatment. *Caries Res* 38: 523–529.
- Igarishi T, Yamamoto A, Goto N (1996) Direct detection of *Streptococcus* mutans in human dental plaque by polymerase chain reaction. Oral Microbiol Immunol 11: 294–298.
- Oho T, Yamashita Y, Shimazaki Y, Kushiyama M, Koga T (2000) Simple and rapid detection of *Streptococcus mutans* and *Streptococcus sobrinus* in human saliva by polymerase chain reaction. *Oral Microbiol Immunol* 15: 258–262.
- Yano A, Kaneko N, Ida H, Yamaguchi T, Hanada N (2002) Real-time PCR for quantification of *Streptococcus mutans*. *FEMS: Lett Appl Microbiol* 217: 23–30.
- 75. Sato T, Hu JP, Ohki K et al. (2003) Identification of mutans streptococci by restriction fragment length polymorphism analysis of polymerase chain

reaction-amplified 16S ribosomal RNA genes. *Oral Microbiol Immunol* 18: 323–326.

- Hoshino T, Izumi T, Ooshima T, Fujiwara T (2005) Method for rapid identification of oral streptococci by PCR using 165-23S ribosomal RNA intergenic spacer gene. *Pediatric Dental J* 15: 185–190.
- 77. Matsuyama J, Sato T, Washio J *et al.* (2005) PCR for detection of mutans streptococci in human dental plaque. *Proceedings of the International Symposium for Interface Oral Health, Sendai, Japan: International Congress Series* 1284: 158–162.
- 78. Longhi E, Foschi A, Bestetti G et al. (2007) PCR with universal primers targeting the small ribosomal RNA (16S rRNA) gene of bacteria as a diagnostic tool in 15 hospitalised patients with infectious diseases. 17th European Congress of Clinical Microbiology and Infectious Diseases and 25th International Congress of Chemotherapy, Munich, Germany, Abstract No. 1733 907.
- National Center for Biotechnology Information (NCBI) (2008) *Streptococcus mutans UA159, complete genome,* Retrieved 13 October 2008, from the NCBI website: http://www.ncbi.nlm.nih.govprojectssviewer?id=NC_ 004350.
 1&v=175672..187377.
- Ajdić D, McShan WM, McLaughlin RE *et al.* (2002) Genome sequence of *Streptococcus mutans* UA159, a cariogenic pathogen. *Proc Natl Acad Sci* 99: 14434–14439.
- Bentley RW, Leigh JA, Collins MD (1991) Intrageneric structure of Streptococcus based on comparative analysis of small-subunit rRNA sequences. Int J Syst Bact 41: 487–494.
- Russell RRB (2008) The molecular biology of cariogenic bacteria. In Rogers AH, ed. *Molecular Oral Microbiology*, Norwich: Horizon Scientific Press, pp. 109–133.
- 83. Winter PC, Hickey GI, Fletcher HL (2004) Genetics, Abingdon: BIOS.
- Demezas DH (1998) Fingerprinting bacterial genomes using restriction fragment length polymorphisms. In de Bruijn FJ, Lupski JR, Weinstock GM, eds, *Bacterial Genomes: Physical Structure and Analysis*. London: Springer, pp. 383–398.
- Sato T, Sato M, Matsuyama J, Hoshino E (1997) PCR-restriction fragment length polymorphism analysis of genes coding for 16S rRNA in *Veillonella* spp. Int J Syst Bact 47: 1268–1270.
- Hall V, Lewis-Evans T, Duerden BI (2001) Identification of actinomyces, propionibacteria, lactobacilli and bifidobacteria by amplified 16S rDNA restriction analysis. *Anaerobe* 7: 55–57.
- 87. Tagu D, Moussard C (2006) Techniques of Molecular Biology. Plymouth: Science.
- Roberts RJ (1980) Restriction and modification enzymes and their recognition sequences. *Nucleic Acids Res* 8: 63–80. Retrieved 29 January 2009, from the Pubmedcentral website: http://www.pubmedentral.nih.gov/ picrender.fcgi?artid=327257&blobtype=pdf.
- Caufield PW, Walker TM (1989) Genetic diversity within *Streptococcus* mutans evident from chromosomal dna restriction fragment polymorphisms. J Clin Microbiol 27: 274–278.
- 90. Strachan T, Read AP (2004) Human Molecular Genetics. Abingdon: Garland.
- Washio J, Sato T, Koseki T, Takahashi N (2005) Hydrogen sulphideproducing biofilm and their relationship with oral malodour. J Med Microbiol 54: 889–895.
- Bartlett JMS (2003) Technical notes for the detection of nucleic acids. In Bartlett JMS, Stirling D, eds, *PCR Protocols*. Totowa, NJ: Humana Press, pp. 65–76.
- Little WA, Thomson LA, Bowen WB (1979) Antibiotic susceptibility of Streptococcus mutans: comparison of serotype profiles. Antimicrob Agents Chemother 15: 440–443.
- Rahimi M, Heng HCK, Kieser JA, Tompkins GR (2005) Genotypic comparison of bacteria recovered from human bite marks and teeth using arbitrarilyprimed PCR. J Appl Microbiol 99: 1265–1270.
- 95. Jones A, Reed R, Weyers J (2003) Practical Skills in Biology. Harlow: Pearson.

- 96. Chauhan HVS, Roy S (1996) *Poultry Diseases, Diagnosis and Treatment*. New Delhi, India: New Age International.
- Health Protection Agency (HPA) (2007) Catalase Test. National Standard Method BSOP TP8, Retrieved 6 October 2008 from the HPA website: http: www.hpa-standardmethods.org.ukpdf_sops.asp.
- Lanyí B (1987) Classical and rapid identification methods for medically important bacteria. In Colwell RR, Grigorova R, eds, Methods in Microbiology (Volume 19). Oxford: Elsevier, pp. 1–67.
- 99. National Collection of Industrial, Marine and Food Bacteria (NCIMB) (2008) Acc. No. 11516 Streptococcus mutans, Retrieved 4 December 2008, from the NCIMB website: http://www.ncimb.comsearch.php?parent=culture :_type=bact&txt_query-streptococcus+mutans&cmb_search_type=All.
- Promega Corporation (2009) Restriction Enzyme Usage Information. Retrieved 5 February 2009, from the Promega website: http://www. promega.comapplicationscloningREDigests.pdf.
- 101. Statistical Package for the Social Sciences (SPSS) (2007) SPSS Version 16.0, Chicago, IL: SPSS Inc.
- 102. Nickell J, Fischer JF (1998) Crime Science: Methods of Forensic Detection. Lexington, KY: University Press of Kentucky.
- Yoo SY, Kim PS, Hwang HK *et al.* (2005) Identification of non-mutans streptococci organisms in dental plaques recovering on mitis-salivarius bacitracin agar medium. *J Microbiol* 43: 204–208.
- Xu P, Alves JM, Kitten T et al. (2007) Genome of the opportunistic pathogen Streptococcus sanguinis. J Bact 189: 3166–3175.
- 105. Blattner FR, Plunkett GIII, Bloch CA *et al.* (1997) The complete genome sequence of *Escherichia coli* K-12. *Science* 277: 1453–1474.
- Caufield PW, Saxena D, Fitch D, Li Y (2007) Population structure of plasmidcontaining strains of *Streptococcus mutans*, a member of the human indigenous biota. *J Bact* 189: 1238–1243.
- 107. Grattard F, Pozzetto B, Ros A, Gaudin OG (1994) Differentiation of *Pseudomonas aeruginosa* strains by ribotyping: high discriminatory power by using a single restriction endonuclease. *J Med Microbiol* 40: 275–281.
- Järvinen H, Pienihäkkinen K, Huovinen P, Tenuvuo J (1995) Susceptibility of Streptococcus mutans and Streptococcus sobrinus to antimicrobial agents after short-term oral chlorhexidine treatments. Eur J Oral Sci 103: 32–35.
- 109. Wray D, Stenhouse D, Lee D, Clark A (2003) *Textbook of General and Oral Surgery*. Oxford: Elsevier.
- 110. Nicholson JW, Czarnecka B (2008) Fluoride in dentistry and dental restoratives. In Tressaud A, Haufe G, eds, *Fluorine and Health: Molecular*

Imaging, Biochemical Materials and Pharmaceuticals. Oxford: Elsevier, pp. 334-378.

- 111. Swarbrick J, Boylan JC (2004) *Encyclopedia of Pharmaceutical Technology*. London: Informa Healthcare.
- 112. Grönroos L, Mätto J, Saarela M *et al.* (1995) Chlorhexidine susceptibilities of mutans streptococcal serotypes and ribotypes. *Antibacterial Agents Chemother* 39: 894–898.
- 113. Heritage J, Evans EGV, Killington RA (1999) *Microbiology in Action*, Cambridge: Cambridge University Press.
- 114. Martin IMC, Foreman E, Hall V, Nesbitt A, Forster G, Ison CA (2007) Non-cultural detection and molecular genotyping of *Neisseria gonorrhoeae* from a piece of clothing. *J Med Microbiol* 56: 487–490.
- 115. Houston J, Galloway S (2008) Sexual Offending and Mental Health: Multi-disciplinary Management in the Community. London: Jessica Kingsley.
- Mattos-Graner RO, Napimoga MH, Fukushima K, Duncan MJ, Smith DJ (2004) Comparative analysis of Gft isozyme production and diversity in isolates of *Streptococcus mutans* with different biofilm growth phenotypes. J *Clin Microbiol* 42: 4586–4592.
- 117. Kulkarni GV, Chan KH, Sandham HJ (1989) An investigation into the use of restriction endonuclease analysis for the study of transmission of mutans streptococci. *J Dent Res* 68: 1155–1161.
- 118. Hsu LT-T, Power DA, Burton JP, Hauman JH, Tagg J, Tompkins GR (2008) Comparison of Streptococcal DNA amplified from Bite Marks and Teeth. 47th Annual Scientific Meeting for the Australia and New Zealand Division of the International Association for Dental Research, Toronto, Canada, Abstract No. 3416.
- 119. Chayko GM, Gulliver ED (1999) *Forensic Evidence in Canada*. Aurora, ON: Canada Law Book.
- Stevens DL, Kaplan EL (2000) Streptococcal Infections: Clinical Aspects, Microbiology, and Molecular Pathogenesis. Oxford: Oxford University Press.
- 121. Arakawa K, Kawai H, lioka H *et al.* (2008) Microbial community analysis of food-spoilage bacteria in commercial custard creams using culturedependent and independent methods. *J Dairy Sci* 91: 2938–2946.
- 122. Beecher-Monas E (2009) Reality Bites: The Illusion of Science in Bite-Mark Evidence, Volume 30, Wayne State University Law School Research Paper No. 08-44, Cardozo Law Review, Retrieved 13 February 2009 from the Social Science Research Network website: httpssrn.comabstract=1311999.
- 123. House of Commons Science and Technology Committee (2005) *Forensic Science on Trial (HC96-I)*. London: The Stationery Office Limited.