

Myths and Potential Benefits of Kombucha as a Functional Food: A Review

¹Rosalina Ilmi Amalia., ^{1,2}Fahmi Ilman Fahrudin., ²Adeel Shahzad Alvi., ²Pilairuk Intipunya

¹Department of Food Technology, Faculty of Science, Universitas Muhammadiyah Bandung 40614, Indonesia

²Department of Food Science and Technology, Faculty Agro-Industry, Chiang Mai University 50200, Thailand

DOI: https://doi.org/10.51584/IJRIAS.2024.906043

Received: 31 May 2024; Revised: 11 June 2024; Accepted: 15 June 2024; Published: 19 July 2024

ABSTRACT

Functional foods, known for their health benefits, are gaining popularity with increased public health awareness, and fermented foods and beverages like kombucha are remarkably esteemed. Kombucha, a fermented Japanese tea, ferments sugared black tea with a SCOBY, creating a drink rich in polyphenols, organic acids, vitamins, amino acids, and micronutrients. This review explores kombucha's health benefits, including antihypertensive effects, blood glucose regulation, antidiarrheal properties, and antithrombotic activity. Additionally, kombucha enhances immune function through riboflavin production, exhibits antihyperglycemic effects in diabetic models, and shows antiproliferative activities against cancer cells. Its cardiovascular benefits are linked to improved blood cholesterol, blood pressure, and endothelial function. The fermentation process also produces a cellulose biofilm with diverse applications. As a functional food, Kombucha holds promise for preventing and managing various health conditions, warranting further research into its bioactive components and mechanisms.

Keywords: Kombucha, Bioactive compounds, Functional food, Health benefits, Fermentation.

INTRODUCTION

Functional foods are those that offer health benefits to consumers (Das et al., 2011). With increasing public awareness of healthy eating, these foods have become trendy. Fermented foods and beverages are a popular type of functional food among people. The health benefits of certain foods have long been recognised. Building on extensive anecdotal evidence, recent studies have investigated various potential advantages, such as antihypertensive effects, particularly in fermented foods. (Ferreira et al., 2007 Nakamura et al., 2013 Koyama et al., 2014 Ahren et al., 2014), Blood glucose-bringing down advantages (Kamiya et al., 2013; Goodness et al., 2014), antidiarrheal (Kamiya et al., 2013; Parvez et al., 2006), and antithrombotic properties (Kamiya et al., 2013). The extensive assessment of matured nourishment substances and how they may give medical advantages has prompted the focus on recognisable proof of specific vitamins, minerals, amino acids, and phytochemicals (e.g., phenolics, unsaturated fats, and saccharides) that recognise aged sustenances from their nonfermented frames (Rodgers, 2008 Rodriguez et al., 2009 Capozzi et al., 2012 Sheih et al., 2014 Xu et al., 2015). Furthermore, the evidence for bioactive components resulting from the fermentation of plants and animal products is rapidly increasing with the application of new technologies, such as metabolomics (Lee *et al.,* 2009; Yang *et al.,* 2009; Kim *et al.,* 2012; Liu *et al.,* 2014). Fermented drinks are widely known by the people: kefir, yoghurt, tepache, wine, and kombucha.

Kombucha, a fermented tea beverage from Japan, is believed to have body-nourishing properties. It is made by fermenting sugared black tea with a symbiotic culture of acetic acid bacteria and yeast, forming a cellulose-like pellicle on the surface over about 14 days. Kombucha comprises a floating cellulose pellicle layer and a sour liquid broth (Chen & Liu, 2000). This beverage has been consumed in Asia for over two millennia and is famous worldwide among traditional fermented foods. The putative health benefits associated with drinking



kombucha have been primarily attributed to the polyphenolic components of kombucha that have been transformed from black tea. In addition, organic acids, vitamins, amino acids, antibiotics and a variety of micronutrients produced during the fermentation of kombucha may also have a role in the health benefits to some extent (Vijayaraghavan *et al.*, 2000). This journal will discuss the myth of the benefits of consuming kombucha.

LITERATURE REVIEW

Kombucha

Kombucha is a fermented beverage globally consumed because of the health benefits reported by the users. This product has a slightly acidic, carbonated, sweet taste and is mainly prepared at home. The fermentation process results from the metabolic activity of kombucha culture (*symbiosis of bacteria and yeasts*) on sweetened black or green tea, the most common substrate. During fermentation, acetic acid bacteria also produce the cellulosic pellicle layer, and this biofilm has numerous applications (Jayabalan et al., 2016). Successful kombucha fermentation is conducted in glass vessels under static conditions, on substrates that contain a source of carbon (mainly sucrose) and nitrogen (different tea components) atoms, protected from direct sunlight at room temperature.

Kombucha is made by fermenting the sugar present in the tea solution using SCOBY (symbiotic culture of bacteria and yeast), which consists of bacteria in the form of Acetobacter aceti and yeast in the form of Saccharomyces cerevisiae. In addition to Acetobacter xylinum and Saccharomyces cerevisiae, according to Greenwalt et al. (2000), kombucha culture consists of Acetobacter xylinum, Acetobacter aceti, Acetobacter pasteurianus, Gluconobacter and yeast species Brettanomyces (Bretanomyces bruxellensis, Brettanomyces intermedius), Candida (Candida fatama), Mycoderma, Mycotorula, Phichia (Pichia membrana efacius), Saccharomyces (Saccharomyces cerevisiae subp. Aceti, Schizosaccharomyces), Torula, (Torulaspora delbbrueckii, Torulopsis), Zygosaccharomyces (Zygosaccharomyces bailii, Zigosaccharomyces rouziz).

Acetobacter xylinum and Saccharomyces cerevisiae initiate reshuffle by breaking sucrose into glucose and fructose (Chen & Liu, 2000; Loncar *et al.*, 2006 in Kustyawati and Ramli, 2008). Then, glucose and fructose are continuously broken down into organic acids and alcohol until the sugar in the kombucha solution runs out. So, the resulting acid will continue to increase as the fermentation time gets longer (Aditiwati & Kusnadi, 2003).

Fermentation occurs when carbohydrates, amino acids, and fats are broken down with the help of enzymes from certain microbes that can produce organic acids, carbon dioxide, and other substances. The fermentation process can change the physical and chemical properties of foodstuffs, including starch content, alcohol content, total acid, and pH (Winarno, 2002). The longer kombucha fermentation increases acidity (Aditiwati & Kusnadi, 2003).

The yeast grown in a medium with a high sugar concentration will synthesise glucose by 3-20%, while the remaining glucose will be utilised through the fermentation pathway (Moat et al., 2002). Fermentation through the glycolysis pathway produces pyruvic acid. Under anaerobic conditions, pyruvate decarboxylase will decompose pyruvic acid into ethanol and carbon dioxide (Madigan *et al.*, 2002).

According to Wood (1998), the process of fermenting sugar (conversion of glucose into alcohol and O_2) by yeast occurs through the following reactions:

 $\begin{array}{ccc} C_6H_{12}O_6 & \underbrace{\text{Yeast}}_{\text{anaerobic}} & 2C_2H_5OH & + & 2CO_2 \\ \hline \text{(Glucose)} & \text{anaerobic} & \text{Ethyl alcohol (ethanol)} & (Carbon diokside) \end{array}$

Moat *et al.* (2002) add that yeast's ability to ferment sugar is determined by a transportation system and an enzyme system that hydrolyse sugar with an alternative electron acceptor other than oxygen under anaerobic facultative conditions.

In the yeast fermentation process, *Saccharomyces cerevisiae* produces alcohol anaerobically. Then alcohol stimulates *Acetobacter xylinum* growth to produce acetic acid in aerobic, while acetic acid stimulates Saccharomyces cerevisiae's growth. This continues until the sugars in the kombucha solution turn into organic acids needed by the body, such as acetic acid and others (Chen & Liu, 2000; Loncar *et al.*, 2006 in Kustyawati and Ramli, 2008). *During fermentation, saccharomyces cerevisiae can produce 70% organic acids such as acetic, malic, succinic, and pyruvic acid* (Akita, 1999 in Gandjar *et al.*, 2006). Yeast of the genus *Issatchenkia, Kluyveromyces, Saccharomyces* and *Zygosaccharomyces* can also ferment glucose (Barrnet *et al.*, 1990; Kurzman and Fell., 1998).

Acetobacter xylinum can simultaneously oxidise glucose to gluconic acid and other organic acids. In addition, Acetobacter xylynum can synthesise glucose into polysaccharides or cellulose as white fibres. Cellulose forms a gradual jelly-like layer until it reaches a thickness of about 12 mm at the end of fermentation, which can be used as an inoculum in the further fermentation process (Aditiwati & Kusnadi, 2003).

According to Dufresne and Farnword (2000), kombucha has efficacy for human health, including Atherosclerosis and cardiovascular diseases, cancer and gene mutations, Diabetes and renal failures, Antibacterial and antiviral activity, etc. Kombucha also contains organic acids, vitamins, amino acids, antibiotics, and various micronutrients (Vijayaraghavan *et al.*, 2000).

Health Benefits from Kombucha

Imune Sistem Source

The types of polyphenols and flavonoids serve to keep the immune system, but some can also turn into riboflavin. Riboflavin serves as a precursor for the coenzymes flavin adenine dinucleotide (FAD) and flavin mononucleotide (FMN) and, therefore, plays a crucial role in energy metabolism, especially metabolism of fats, ketone bodies, carbohydrates, and proteins, as well as drug metabolism. Riboflavin supports the immune and nervous system, forms red blood cells, produces cells, and activates folate and pyridoxine. Riboflavin also has a powerful antioxidant potential derived from its role as a precursor to FMN and FAD. Consequently, riboflavin deficiency is associated with increased lipid peroxidation (Frias *et al.*, 2017)

In 1970, van Veen and Steinkraus reported an increase of riboflavin in fermented food that was confirmed in 1984 by Murdock and Fields, who observed that the riboflavin content in fermented commeal was increased compared to the unfermented control. The changes in vitamin content mainly occur at the beginning of fermentation. The riboflavin concentration in commeal increased from 1.4 μ g/g in the control to 2.9 μ g/g after one day and 4 μ g/g after two days of fermentation (Friaz *et al.*, 2017).

In kombucha fermentation, the bacterial Candida fatama can produce riboflavin. It is the same line with (Burgess *et al.*, 2006; LeBlanc *et al.*, 2011; Russo *et al.*, 2014). They said that the screening of strains for riboflavin generation brought about an impressive number of microbial varieties, for example, *B. subtilis, Ashbya gossypii, Candida famata, Corynebacterium ammoniagenes,* and a few LAB. Among Them, *the most promising were Lactobacilli, Leuconostoc, Lactococci, and Propionibacterium.*

Diabetes Mellitus

Diabetes mellitus is a gathering of metabolic issues portrayed by hyperglycaemia coming about because of deformities in insulin discharge, activity or both. Some thoughts outline the antihyperglycemic impacts of lyophilised concentrates from kombucha in streptozotocin-prompted mice. After the test time of 45 days, we watched that kombucha supplementation with 6 mg/kg bw fundamentally diminished glycosylated haemoglobin (HbA1c) and expanded the levels of plasma insulin, haemoglobin and tissue glycogen, which was diminished up on streptozotocin (STZ) treatment and essentially switched the adjusted exercises of



gluconeogenic proteins, glucose-6-phosphatase, fructose-1,6-bisphosphatase and glycolytic catalysts, for example, hexokinase in the tissues of trial rats. In this way, our outcomes substantiate that kombucha was found to have a hypoglycaemic impact on STZ-prompted diabetic rats. These discoveries recommend that kombucha might be considered a potential utilitarian sustenance contender for future applications as a helpful nourishment supplement for the treatment and anticipation of diabetes (Srihari et al., 2013a)

Anticancer

Chemoprevention utilising a mix of dietary phytochemicals with various components has been proposed as a fruitful way to control diverse kinds of disease with fewer symptoms. Kombucha tea has been genuinely asserted to have anticancer properties by kombucha consumers for a long time. It has been asserted to have anticancer properties, given individual perceptions and tributes. A populace has likewise guaranteed its contemplation led in Russia by the "Focal Oncological Exploration Unit" and the "Russian Institute of Sciences in Moscow" in 1951 (Dufresne & Farnworth, 2000). Cetojevic-Simin and others (2008) researched the antiproliferative action of kombucha drinks from dark tea and winter savoury tea (Satureja montana L.) on HeLa cells (cervix epithelial carcinoma), HT-29 (colon adenocarcinoma), and MCF-7 (bosom adenocarcinoma) utilising the sulforhodamine B colourimetric test. They detailed that the antiproliferative impact of kombucha winter exquisite tea was tantamount to that of conventional kombucha dark tea and reasoned that kombucha arranged from winter appetising tea may have more dynamic antiproliferative parts than basic water concentrates of winter savoury tea. An ethyl acetic acid derivation part of kombucha dark tea, which contained dimethyl 2-(2-hydroxy-2-methoxypropylidene) malonate and vitexin at a convergence of 100 µg/mL, caused cytotoxic consequences for 786-O (human renal carcinoma) and U2OS (human osteosarcoma) cells, altogether lessened the cell attack and cell motility in A549 (human lung carcinoma), U2OS and 786-O cells, and decreased the exercises of framework metalloproteinase-2 (MMP-2) and MMP-9 out of 786-O cells and MMP-2 movement in A549 cells (Jayabalan, et al 2011). Lyophilised kombucha tea remove altogether diminished the survival of prostate tumour cells by downregulating the declaration of angiogenesis stimulators like network metalloproteinase, cyclooxygenase-2, interleukin, endothelial development factor, and human inducible factor-1 α (Srihari et al., 2013b). This examination demonstrated the exceptional capability of kombucha in repressing angiogenesis through modifications in the outflow of angiogenic stimulators. The conceivable anticancer components of tea polyphenols acknowledged by most analysts presently are as per the following: (1) restraint of quality transformation; (2) hindrance of malignancy cell multiplication; (3) enlistment of growth cell apoptosis; and (4) end of metastasis (Conney and others 2002; Ioannides & Yoxall, 2003; Stop and Dong 2003). Anticancer properties of kombucha tea may be because of the nearness of tea polyphenols and their corruption items shaped amid ageing.

Lowering of blood cholesterol, blood pressure and incidence of cardiovascular diseases

Kombucha is produced using different kinds of tea, from dark to green. The mitigation of MetS by tea is relied upon to diminish the hazard of CVDs (Deka & Vita, 2011; Di Castelnuovo et al., 2012; Munir et al., 2013). Two investigations from China and Japan accounted for the relationship between the utilisation of tea and the diminished danger of stroke (Liang et al., 2009; Kokuboyo et al., 2013). A meta-examination of 14 forthcoming investigations, covering 513,804 members with a middle follow-up of 11.5 years, found a reverse relationship between tea utilisation and the danger of stroke, and the defensive impact of green tea had all the earmarks of being more grounded than that of dark tea (Shen, L. et al., 2012). Many, yet not all, examined in the U.S. Furthermore, Europe exhibited a converse relationship between dark tea utilisation and CVD chance (Deka & Vita, 2011; de Koning et al., 2010; Mukamal et al., 2006; Sesso et al., 2003). A meta-examination, including six case-control and 12 partner ponders (5 estimated green tea and 13 estimated dark tea as the introduction), found a decreased danger of coronary supply route illness by 28% utilizing green tea utilisation; nonetheless, there was no critical defensive impact from dark tea (Wang et al., 2011).

Green tea has appeared to diminish plasma cholesterol levels and pulse and additionally enhance insulin affectability and endothelial capacity in people (Munir et al., 2013; Hartley et al., 2011). A deliberate audit and meta-investigation of 10 preliminaries (834 members) on the impacts of green tea on circulatory strain in prehypertensive and hypertensive people indicated huge decreases in systolic and diastolic pulse with tea



utilisation (Yarmolinsky et al., 2015). A comparative meta-investigation of 14 RCTs additionally found that GTE supplementation caused a little, however critical, decrease in circulatory strain among overweight and fat grown-ups (Li G et al., 2015).

Useful impacts of tea catechins in bringing down plasma cholesterol levels, anticipating hypertension and enhancing endothelial capacity add to the counteractive action of CVDs. The cholesterol-bringing impact is likely due to the lessening of cholesterol assimilation or reabsorption by catechins and, in addition, the decline of cholesterol combination employing the restraint of HMGR (intervened by the initiation of AMPK). Upgraded nitric oxide flagging has been recommended as a typical instrument for catechins to diminish pulse and the seriousness of myocardial dead tissue (Munir et al., 2013). A few investigations have demonstrated that green tea or dark tea polyphenols expanded endothelial nitric oxide synthase (eNOS) movement in cowlike aortic endothelial cells and rodent aortic rings (Jouchmann et al., 2008; Aggio et al., 2013; Ng HL et al., 2017). An ongoing report in rodent skeletal muscle proved that the EGCG-instigated vasodilation was intervened by eNOS (Ng HL et al., 2017). Tea catechins may likewise stifle the declaration of caveolin-1, a negative controller of eNOS, bring down the statement of endothelin-1, and lessen vasoconstrictor tone; along these lines, expanding bioavailability of nitric oxide to enhance endothelial capacity (Li Y., 2009; Akiyama et al., 2009). EGCG has appeared to initiate the outflow of heme oxygenase 1 in aortic endothelial cells (Pullikotil et al., 2012), and this may increment calming action to profit the cardiovascular framework. While direct measurements of EGCG have yielded advantageous impacts, a high dosage (1% in eating less carbs) has appeared to advance, as opposed to lessening, vascular irritation in hyperglycemic mice (Pea M et al., 2012). In an ongoing traverse RCT with 19 hypertensive patients, supplementation with dark tea (150 mg polyphenols twice a day by day for 8 days) expanded practically dynamic circling angiogenic cells and stream interceded enlargement (Grassi et al., 2016). These discoveries exhibit that dark tea likewise has vascular defensive properties.

CONCLUSION

Kombucha is a beverage fermented by a mixed microorganism culture between bacteria and yeasts derived from various types of tea. Kombucha can be used as functional food because it is an anticancer source, reducing blood pressure, reducing the occurrence of degenerative diseases. microorganisms present in kombucha can produce Riboflavin which is useful for health

REFERENCE

- 1. Aditiwati, P., and Kusnadi., 2003, Kultur Campuran dan Faktor Lingkungan Mikroorganisme yang Berperan dalam Fermentasi Tea-Cider, PROC. ITB Sains dan Teknologi, 35 A(2), 147-162.
- 2. Aggio A, Grassi D, Onori E, D'Alessandro A, Masedu F, Valenti M, et al. Endothelium/nitric oxide mechanism mediates vasorelaxation and counteracts vasoconstriction induced by low concentration of flavanols. Eur J Nutr 2013;52:263-72.
- 3. Ahren, I.L., Xu, J., Önning, G., Olsson, C., Ahrne, S., Molin, G., 2014. Antihypertensive activity of blueberries fermented by Lactobacillus plantarum DSM 15313 and effects on the gut microbiota in healthy rats. Clinical Nutrition 34, 719–726.
- 4. Akiyama S, Katsumata S, Suzuki K, Nakaya Y, Ishimi Y, Uehara M. Hypoglycemic and hypolipidemic effects of hesperidin and cyclodextrin-clathrated hesperetin in GotoKakizaki rats with type 2 diabetes. Biosci Biotechnol Biochem 2009;73:2779e82.
- 5. Barnett, J. A. Payne R. W. dan Yarrow I. J. 1990. Yeast: characterization and identification, 2nd edn. Cambridge University Press, London.
- 6. Burgess, C.M., Smid, E.J., Rutten, G., van, S.D., 2006. A general method for selection of riboflavinoverproducing food grade micro-organisms. Microbial Cell Factories 5, 24.
- Capozzi, V., Russo, P., Dueñas, M.T., Lopez, P., Spano, G., 2012. Lactic acid bacteria producing Bgroup vitamins: a great potential for functional cereals products. Applied Microbiology and Biotechnology 96, 1383–1394.



- 8. Cetojevic-Simin DD, Bogdanovic GM, Cvetkovic DD, Velicanski AS. 2008. ´Antiproliferative and antimicrobial activity of traditional kombucha and Satureja montana L. Kombucha. J BUON 133:395–401.
- 9. Chen, C., & Liu, B. Y. (2000). Changes in major components of tea fungus metabolites during prolonged fermentation. Journal of Applied Microbiology, 89, 834–839.
- 10. Conney AH, Lu YP, Lou YR, Huang MT. 2002. Inhibitory effects of tea and caffeine on UV-induced carcinogenesis: relationship to enhanced apoptosis and decreased tissue fat. Eur J Cancer Prev 2:28–36.
- 11. Das, S.K., T. Hashimoto, K. Kanazawa. 2011. Growth inhibition of human hepatic carcinoma hepg2 cells by fucoxanthin is associated with down-regulation of cyclind. Biochimica et Biophysica Acta, 1780: 743-749.
- 12. Deka A, Vita JA. Tea and cardiovascular disease. Pharmacol Res 2011;64:136-45 [in Eng].
- 13. de Koning Gans JM, Uiterwaal CS, van der Schouw YT, Boer JM, Grobbee DE, Verschuren WM, et al. Tea and coffee consumption and cardiovascular morbidity and mortality. Arterioscler Thromb Vasc Biol 2010;30:1665-71 [in Eng].
- 14. Di Castelnuovo A, di Giuseppe R, Iacoviello L, de Gaetano G. Consumption of cocoa, tea and coffee and risk of cardiovascular disease. Eur J Intern Med 2012;23:15-25 [in Eng].
- 15. Dufresne C, Farnworth E. 2000. Tea, kombucha, and health: a review. Food Res Int 33:409-21.
- 16. Gandjar, Indrawati, Wellyzar Sjamsuridzal dan Ariyanti Oetari, 2006. Mikologi Dasar dan Terapan. Yayasan Obor Indonesia Jakarta.
- 17. Grassi D, Draijer R, Schalkwijk C, Desideri G, D'Angeli A, Francavilla S, et al. Black tea increases circulating endothelial progenitor cells and improves flow mediated dilatation counteracting deleterious effects from a fat load in hypertensive patients: a randomized controlled study. Nutrients 2016:8.
- 18. Greenwalt, C. J., Steinkraus, K. H., & Ledford, R. A. (2000). Kombucha, the fermented tea: microbiology, composition, and claimed health effects. Journal of Food Protection, 63(7), 976-981.
- 19. Ferreira, I.M.P.L.V.O., Eça, R., Pinho, O., Tavares, P., Pereira, A., Roque, A.C., 2007. Development and validation of an HPLC/UV method for quantification of bioactive peptides in fermented milks. Journal of Liquid Chromatography & Related Technologies 30, 2139–2147.
- 20. Friaz, Juana., Cristina MV., Elena P. 2017. Fermented Foods in Health and Disease Prevention. Book Journal. Elsevier, San Diego-United States
- 21. Hartley L, Flowers N, Holmes J, Clarke A, Stranges S, Hooper L, et al. Green and black tea for the primary prevention of cardiovascular disease. Cochrane Database Syst Rev 2013;6. CD009934.
- 22. Ioannides C, Yoxall V. 2003. Antimutagenic activity of tea: role of polyphenols. Curr Opin Clin Nutr Metab Care 6:649–56
- 23. Jayabalan, R., Malbaša, R. V., & Sathishkumar, M. (2016). Kombucha Tea: Metabolites. Fungal Metabolites: 1-14.
- 24. Jochmann N, Lorenz M, Krosigk A, Martus P, Bohm V, Baumann G, et al. The efficacy of black tea in ameliorating endothelial function is equivalent to that of green tea. Br J Nutr 2008;99:863-8.
- 25. Kamiya, S., Owasawara, M., Arakawa, M., Hagimori, M., 2013. The effect of lactic acid bacteriafermented soybean milk products on carragenan-induced tail thrombosis in rats. Bioscience of Microbiota, Food and Health 32, 101–105
- 26. Kim, A.J., Choi, J.N., Kim, J., Kim, H.Y., Park, S.B., Yeo, S.H., Choi, J.H., Liu, K.H., Lee, C.H., 2012. Metabolite profiling and bioactivity of rice koji fermented by Aspergillus strains. Journal of Microbiology and Biotechnology 22, 100–106.
- 27. Kokubo Y, Iso H, Saito I, Yamagishi K, Yatsuya H, Ishihara J, et al. The impact of green tea and coffee consumption on the reduced risk of stroke incidence in Japanese population: the Japan public health center-based study cohort. Stroke 2013;44:1369-74.
- 28. Koyama, M., Hattori, S., Amano, Y., Watanabe, M., Nakamura, K., 2014. Blood pressure-lowering peptides from neo-fermented buckwheat sprouts: a new approach to estimating ACE-inhibitory activity. PLoS One 9, e105802
- 29. Kurtzman, C. P. dan Fell. 1998. The yeasta, a taxonomic study. Elsevier Amsterdam
- 30. Kustyawati ME, Ramli S. Pemanfaatan hasil tanaman hias rosella sebagai bahan minuman. In: Universitas Lampung, ed prosiding Seminar nasional sains dan teknologi-II, 2008 ; 127-35.



- 31. LeBlanc, J.G., Laino, J.E., del Valle, M.J., Vannini, V., van, S.D., Taranto, M.P., de Valdez, G.F., de Giori, G.S., Sesma, F., 2011. B-group vitamin production by lactic acid bacteria–current knowledge and potential applications. Journal of Applied Microbiology 111 (6),1297–1309.
- 32. Lee, J.E., Hwang, G.S., Lee, C.H., Hong, Y.S., 2009. Metabolomics reveals alterations in both primary and secondary metabolites by wine bacteria. Journal of Agricultural and Food Chemistry 57, 10772–10783.
- 33. Liang W, Lee AH, Binns CW, Huang R, Hu D, Zhou Q. Tea consumption and ischemic stroke risk: a case-control study in southern China. Stroke 2009;40:2480-5 [in Eng].
- 34. Li G, Zhang Y, Thabane L, Mbuagbaw L, Liu A, Levine MA, et al. Effect of green tea supplementation on blood pressure among overweight and obese adults: a systematic review and meta-analysis. J Hypertens 2015;33:243-54.
- 35. Liu, M., Bienfait, B., Sacher, O., Gasteiger, J., Siezen, R.J., Nauta, A., Geurts, J.M., 2014. Combining chemoinformatics with bioinformatics: in silico prediction of bacterial flavor-forming pathways by a chemical systems biology approach "reverse pathway engineering". PLoS One 9, e84769
- 36. Li Y, Ying C, Zuo X, Yi H, Yi W, Meng Y, et al. Green tea polyphenols down-regulate caveolin-1 expression via ERK1/2 and p38MAPK in endothelial cells. J Nutr Biochem 2009;20:1021-7.
- 37. Madigan, J.P., Chotkowski, H.L., Glaser, R.L. (2002). DNA double-strand break-induced phosphorylation of Drosophila histone variant H2Av helps prevent radiation-induced apoptosis. Nucleic Acids Res. 30(17): 3698--3705.
- 38. Moat, Albert G.; Foster, John W. and Spector, Michael P. Microbial Physiology. 4th ed. New York, Wiley-Liss, 2002. 736 p. ISBN 0-471-39483-1
- 39. Mukamal KJ, Alert M, Maclure M, Muller JE, Mittleman MA. Tea consumption and infarct-related ventricular arrhythmias: the determinants of myocardial infarction onset study. J Am Coll Nutr 2006;25:472-9 [in Eng].
- 40. Munir KM, Chandrasekaran S, Gao F, Quon MJ. Mechanisms for food polyphenols to ameliorate insulin resistance and endothelial dysfunction: therapeutic implications for diabetes and its cardiovascular complications. Am J Physiol Endocrinol Metab 2013;305:E679-86.
- 41. Nakamura, K., Naramoto, K., Koyama, M., 2013. Blood pressure-lowering effect of fermented buckwheat sprouts in spontaneously hypertensive rats. Journal of Functional Foods 5, 406–415.
- 42. Ng HL, Premilovac D, Rattigan S, Richards SM, Muniyappa R, Quon MJ, et al. Acute vascular and metabolic actions of the green tea polyphenol epigallocatechin 3-gallate in rat skeletal muscle. J Nutr Biochem 2017;40:23-31.
- 43. Oh, M.R., Park, S.H., Kim, S.Y., Back, H.I., Kim, M.G., Jeon, J.Y., Ha, K.C., Na, W.T., Cha, Y.S., Park, B.H., Park, T.S., Chae, S.W., 2014. Postprandial glucose-lowering effects of fermented red ginseng in subjects with impaired fasting glucose or type 2 diabetes: a randomized, doubleblind, placebo-controlled clinical trial. BMC Complementary and Alternative Medicine 14, 237.
- 44. Pae M, Ren Z, Meydani M, Shang F, Smith D, Meydani SN, et al. Dietary supplementation with high dose of epigallocatechin-3-gallate promotes inflammatory response in mice. J Nutr Biochem 2012;23:526-31 [in Eng].
- 45. Park AM, and Dong Z. 2003. Signal transduction pathways: targets for green and black tea polyphenols. J Biochem Mol Biol 6:66–77
- 46. Parvez, S., Malik, K.A., Kang, S.A., Kim, H.Y., 2006. Probiotics and their fermented food products are beneficial for health. Journal of Applied Microbiology 100, 1171–1185.
- 47. Pullikotil P, Chen H, Muniyappa R, Greenberg CC, Yang S, Reiter CE, et al. Epigallocatechin gallate induces expression of heme oxygenase-1 in endothelial cells via p38 MAPK and Nrf-2 that suppresses proinflammatory actions of TNFalpha. J Nutr Biochem 2012;23:1134-45.
- 48. Rodgers, S., 2008. Novel applications of live bacteria in food services: probiotics and protective cultures. Trends in Food Science and Technology 19, 188–197.
- Rodriguez, H., Curiel, J.A., Landete, J.M., de las Rivas, B., Lopez de Felipe, F., Gomez-Cordoves, C., Mancheno, J.M., Muñoz, R., 2009. Food phenolics and lactic acid bacteria. International Journal of Food Microbiology 132, 79–90.
- Russo, P., Capozzi, V., Arena, M.P., Spadaccino, G., Duenas, M.T., Lopez, P., Fiocco, D., Spano, G., 2014. Riboflavin-overproducing strains of Lactobacillus fermentum for riboflavin-enriched bread. Applied Microbiology and Biotechnology 98 (8), 3691–3700.



- 51. Sesso HD, Gaziano JM, Liu S, Buring JE. Flavonoid intake and the risk of cardiovascular disease in women. Am J Clin Nutr 2003;77:1400-8 [in Eng].
- 52. Shen L, Song LG, Ma H, Jin CN, Wang JA, Xiang MX. Tea consumption and risk of stroke: a dose-response metaanalysis of prospective studies. J Zhejiang Univ Sci B 2012;13:652-62 [in Eng].
- 53. Srihari T., Krishnamoortthy K., Natarajan A., Uppala Satyanarayana. Antiphyperglycaemic efficacy of kombucha in streptozotocin-induced rats. Journal Functional Foods. Elsevier.
- 54. Srihari T, Arunkumar R, Arunakaran J, Satyanarayana U. 2013b. Downregulation of signalling molecules involved in angiogenesis of prostate cancer cell line (PC-3) by kombucha (lyophilized). Biomed Prev Nutrit 3:53–8.
- 55. Wang ZM, Zhou B, Wang YS, Gong QY, Wang QM, Yan JJ, et al. Black and green tea consumption and the risk of coronary artery disease: a meta-analysis. J Clin Nutr 2011;93:506-15 [in Eng].
- 56. Sheih, I.C., Fang, T.J., Wu, T.K., Chen, R.Y., 2014. Effects of fermentation on antioxidant properties and phytochemical composition of soy germ. Journal of the Science Food and Agriculture 94, 3163–3170.
- 57. Vijayaraghavan, R., Singh, M., Rao, P. V. L., Bhattacharya, R., Kumar, P., Sugendran, K., Kumar, O., Pant, S. C., & Singh, R. (2000). Subacute (90 days) oral toxicity studies of Kombucha Tea. Biomedical and Environmental Sciences, 13, 293–299.
- 58. Winarno, FG. 2002. Kimia Pangan dan Gizi. Gramedia. Jakarta.
- 59. Wood, J. B. 1998. Microbiology of Fermented Foods. Blackie Academic and Professional, an Imprint of Thomson Science 2–6 Boundary Row, London SEI 8 HN, UK.
- 60. Xu, L., Du, B., Xu, B., 2015. A systematic, comparative study on the beneficial health components and antioxidant activities of commercially fermented soy products marketed in China. Food Chemistry 174, 202–213
- 61. Yang, S.O., Kim, M.S., Liu, K.H., Auh, J.H., Kim, Y.S., Kwon, D.Y., Choi, H.K., 2009. Classification of fermented soybean paste during fermentation by 1H nuclear magnetic resonance spectroscopy and principal component analysis. Bioscience Biotechnology and Biochemistry 73, 502–507.
- 62. Yarmolinsky J, Gon G, Edwards P. Effect of tea on blood pressure for secondary prevention of cardiovascular disease: a systematic review and meta-analysis of randomized controlled trials. Nutr Rev 2015;73:236-46.