

Functional probiotic fermented dairy foods for a healthy life-style – a review

Abstract

Purpose: Health consciousness, increased interest in healthy foods, and rising medical costs have all contributed to the strong global trend of consumers favouring functional and nutritious foods. Prophylactic properties of traditional fermented dairy products can be enhanced with dietary interventions such as probiotics, prebiotics, synbiotics and postbiotics. Fermented dairy products are considered as a suitable matrix in comparison to non-fermented dairy products for probiotic carrier owing to its healthy image and protection of probiotic viability due to the milk protein. Retention of normal gut flora is of prime importance for good health as any disturbance in gut composition results in dysbiosis. The purpose of this paper was to review the functional properties of probiotics to project probiotic fermented dairy foods as a new dimension in the functional food market in the current era of self-care and complementary medicine.

Design/methodology/approach: An attempt was made to search the literature (review and researched papers) to highlight the beneficial features of probiotics and their suitability during the formulation of fermented dairy functional foods. Key factors for successful application of probiotics during functional food formulation was also considered. Keywords used for data searched included dairy-based functional foods, probiotic functional foods, factors affecting probiotic viability and health benefits of probiotic containing fermented milk functional foods.

Findings: Functional dairy products, formulated with the inclusion of probiotic are efficacious in alleviating diverse diseases like diabetes, lactose-intolerance, obesity, non-alcoholic fatty liver disease, immune function, necrotizing enterocolitis, Respiratory tract infections, high cholesterol levels, diarrhoea, inflammation, irritable bowel syndrome, osteoporosis, halitosis, colonic cancer etc. For success of probiotic fermented dairy foods, appropriate selection of probiotic strains, dairy food matrix and processing technologies are of prime importance. Systematic clinical trials must be performed prior to its application as functional foods.

Originality/value: Functional probiotic fermented dairy foods may attract food manufacturers to cater health-conscious consumers in the current era of self-care and complementary medicine.

Keywords: probiotics, gut flora, health benefits, functional foods, fermented dairy foods

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Introduction

Fermentation is known as the oldest method of preservation. Fermentation of milk under the influence of beneficial microorganisms results in formulation of diverse range of fermented dairy products like yoghurt (Indian *dahi*), acidophilus milk, bifidus milk, kefir, kumiss etc. Fermented dairy products are superior to un-fermented dairy products in terms of their nutritional and therapeutic profiles. Globally, consumer's inclination towards functional foods is noticed due to their greater health consciousness coupled with enhanced health-care cost, especially in ageing populations due to heart disease, cancer, diabetes¹ or to combat with the severe side effects of drugs and pharmaceuticals.² According to Functional Food Center, functional food may be defined as natural or a processed food that contains known or unknown biologically active compounds, the foods, in defined, effective and non-toxic amounts, provide a clinically proven and documented health benefit for the prevention, management or treatment of chronic disease.³ Later, Granato et al.,⁴ defined "functional foods" as industrially processed or natural foods that when regularly consumed within a diverse diet at efficacious levels have potentially positive effects on health beyond basic nutrition. It has been declared that for consideration of any fresh, unprocessed or processed food as

functional, its efficacy should be confirmed by randomized, double-blind, placebo-controlled clinical trials⁵ and supported by substantial experimental evidence of safety.⁴

Consumer demand, societal attitudes,¹ scientific proof of the health benefits of a specific ingredient for humans,² and commercial interest in enhancing the value of current foods⁶ could all contribute to the widespread acceptance of functional foods. Intense consumer inclination towards much healthier foods and innovative fermented milk products containing probiotic organisms⁷ coupled with documented health benefits of probiotics have led to an aggravated interest in probiotics as functional foods in the current era of self-care and complementary medicine.^{8,9,10} Proficiency of probiotics to promote a healthier gut microbiome has led to projection of probiotic foods as functional foods for improvement of human health,¹¹ that basically provide health benefits in addition to their fundamental nutrients.^{12,13} The global market for functional food is booming and is expected to get projected from \$281.14 billion to \$529.66 billion from 2021 to 2028, with a Compounded Annual Growth Rate (CAGR) of 9.5%¹⁴ whereas for probiotics products, it is expected to get projected from \$48.88 billion to \$94.48 billion from 2019 to 2027, with a CAGR of 7.9%.¹⁵ Probiotics are "live microorganisms that, when administered

in adequate amounts, confer a health benefit on the host¹⁶ and health benefits extended by probiotic dairy food have been reviewed.¹⁷ Fermented milk products may be considered as most suitable food matrix for functional food formulation due to its healthy image^{18,19} and capability of milk proteins to confer protection to the probiotic bacteria during passage through the stomach.²⁰ Ecological balance in GIT can be maintained by dietary interventions such as probiotic, probiotics, synbiotics and postbiotics and their supplementation results in diverse functional foods.¹¹ In the present review, potentiality

of probiotic dairy foods as functional food and their limitations have been highlighted.

Significance of gut flora

At birth the intestinal flora of human is sterile and undergoes significant developments during the first three years of life.^{21–24} Microbiome diversity at different stages during the first 1000 days of life has been shown in (Table 1).

Table 1 Microbiome diversity at different stages during the first 1000 days of life.²⁵

Neonatal (First 4 Weeks of Life)		Early infancy (1-6 Months)		Mid infancy (6-12 Months)	Late infancy to early toddlerhood (12-24 Months)	Toddlerhood (Around 2-3 Years)
Vaginal	Cesarean	Dominant in Exclusively Breast-fed infants	More common in formula-fed infants	Shifts due to solid food introduction	Continued Diverfication	Resembling Adult Microbiome
Bifidobacterium	Klebsiella	B. infantis,	Collinsella	Bacteroides	Bacteroides,	Bacteroides
Bacteroides	Clostridia	B. breve	Enterococcus	Faecalibacterium	Faecalibacterium	Faecalibacterium
Parabacteroides	Enterobacter	B. Bifidum	Escherichia	Blautia,	Lachnospiraceae	Lachnospiraceae
Lactobacillus	Streptococcus,	B. longum Bacteroides	Clostridia	Roseburia,		
Collinsella	Staphylococcus			Anaerostipes		
Escherichia						

Development of the intestinal microbiota of infants is influenced by the mode (vaginal or cesarean) of delivery,^{26,27} feeding (breast milk or formula) practices,^{28–30} gestational,^{31–33} maternal microbiome,^{34,35} maternal diet,^{36,39} antibiotic exposure,^{29,40} diseases and therapies used⁴¹ and lifestyle.^{42,43}

It has been established that human microbiota is linked with health and disease⁴⁴ and the individual bacterial species of the gut microbiota is positively correlated with an overall health⁴⁵ by development and adaptation with the host,⁴⁶ thus maintaining the immune homeostasis and host energy metabolism.⁴⁷ Key factors of intestinal microbial flora towards positive health effects may be attributed to the production of different nutrients, prevention of pathogenesis of intestinal mucosa, protection of epithelial cells barriers and metabolism of the body.⁴⁸ Any imbalances in gastro-intestinal (GI) microbiota have been referred as dysbiosis, which results in several health problems such as allergies, obesity, diabetes,⁴⁹ cardiovascular diseases and tumour development.⁴⁴ Ormazabal et al.,⁵⁰ noticed a significant abatement in metabolic diseases resulting from changes in dietary habits, sedentary lifestyles, and rising obesity rates. Additionally, a gradual

decline in the proportion of beneficial bacteria in the intestine was also encountered with the age resulting in physiological disturbances, malfunctions of the immune system and several metabolic disorders.⁵¹ Ecological balance in GIT can be maintained by dietary interventions with the inclusion of probiotic dairy products as functional foods.

Concept of probiotics as a functional food

Recent trend of consumers towards healthful foods due to increased awareness and knowledge⁵² has led to the development of functional dairy products that basically provide health benefits in addition to their fundamental nutrients.¹² Functional foods have been defined by various agencies and there is no globally recognized definition. The Academy of Nutrition and Dietetics recognized that although all foods provide some level of physiological function and defined functional foods as whole foods along with fortified, enriched, or enhanced foods that have a potentially beneficial effect on health when consumed as part of a varied diet on a regular basis at effective levels based on significant standards of evidence.⁵³ Definition of Functional foods has also been modified by different scientists or organizations and are chronologically presented in (Table 2).

Table 2 Chronological presentation of definitions of Functional Foods

Year	Definition of functional foods	Reference
1994	Any modified food or food ingredient that may provide a health benefit beyond the traditional nutrients it contains.	IOM/NAS, ⁵⁴
1999	Foods that, by virtue of the presence of physiologically-active components, provide a health benefit beyond basic nutrition.	ILSI ⁵⁵
1999	Whole, fortified, enriched, or enhanced, but, more importantly, states that such foods must be consumed as a part of a varied diet on a regular basis, at effective levels.	ADA (1999)
1999	A food can be regarded as functional if it satisfactorily demonstrated the beneficial effects for one or more target functions in the body, beyond adequate nutritional effects in such a way which is relevant to either the state of well-being and health or reduction in disease risk.	Diplock et al., ⁵⁶

Table 2 Continued...

2000	Functional foods are those providing health benefits beyond basic nutrition and include whole, fortified, enriched or enhanced foods which have a potentially beneficial effects on the health, when consumed as part of a varied diet on a regular basis at efficacious levels.	Hasler, ⁵⁷
2000	A food or beverage that imparts a physiological benefit that enhances overall health, helps prevent or treat a disease/condition, or improves physical or mental performance via an added functional ingredient, processing modification, or biotechnology.	Sloan, ⁵⁸
2001	The term “functional food” was coined in Japan in late 1980s and includes foods that have been fortified with ingredients capable of manifesting health benefits.	Stanton et al., ⁵⁹
2002	Nutrients that are separated from their established nutritional functions and some of these nutrients are proposed to promote GI mucosal integrity.	Duggan et al., ⁶⁰
2004	Functional foods as similar in appearance to a conventional food, consumed as part of the usual diet, with demonstrated physiological benefits, and/or to reduce the risk of chronic disease beyond basic nutritional functions.	Health Canada, ⁶¹
2005	Functional food refers to foods or ingredients of foods providing an additional physiological benefit beyond their basic nutritional needs.	Riezzo et al., ⁶²
2013	Whole foods along with fortified, enriched, or enhanced foods that have a potentially beneficial effect on health when consumed as part of a varied diet on a regular basis at effective levels.	Crowe and Francis, ⁵³
2015	Natural or a processed food that contains known or unknown biologically active compounds, the foods, in defined, effective and non-toxic amounts, provide a clinically proven and documented health benefit for the prevention, management or treatment of chronic disease	Martirosyan and Singh, ³
2020	Industrially processed or natural foods that when regularly consumed within a diverse diet at efficacious levels have potentially positive effects on health beyond basic nutrition.	Granato et al., ⁴

Source: Author's own creation

Globally, intensified inclination of consumers towards much healthier foods or innovative fermented milk products containing probiotic organisms have mushroomed the market for functional foods. Functional properties of probiotics have projected them as a new ingredient in functional food market in the current era of self-

care and complementary medicine. Probiotics have always been a vital component and commercial target for providing potential health benefits.^{63,64} “Probiotics” is derived from Greek and means “pro-life”. Definition of probiotics has also been modified by different scientists are chronologically presented in (Table 3).

Table 3 Chronological presentation of definitions of Probiotics.

Year	Definition of Probiotics	Reference
1965	Substances secreted by one microorganism which stimulates the growth of another.	Lilly and Stillwell, ⁶⁵
1974	Organisms and substances, which contribute to intestinal microbial balance.	Parker, ⁶⁶
1989	A live microbial feed supplement, which beneficially affects the host animal by improving its intestinal microbial balance.	Fuller, ⁶⁷
1992	A viable mono-or mixed culture of microorganisms which applied to animal or man, beneficially affects the host by improving the properties of the indigenous microflora.	Havenaar and Huis in't Veld, ⁶⁸
1996	A live microbial culture or cultured dairy product, which beneficially influences the health and nutrition of the host	Salminen, ⁶⁹
1996	Oral probiotics are living microorganisms which upon ingestion in certain numbers exert health effects beyond inherent basic nutrition.	Schaafsma, ⁷⁰
2001	A preparation of or a product containing viable, defined microorganisms in sufficient numbers, which alter the microflora (by implantation or colonization) in a compartment of the host and by that exert beneficial health effects in this host.	Schrezenmeir and de Vrese, ⁷¹
2001	Live microorganisms which when administered in adequate amounts confer a health benefit on the host.	FAO/WHO, ⁷²
2003	Living microorganisms in foodstuffs which when ingested at certain levels provide equilibrium of the intestinal flora thus exhibiting a positive effect of consumer's health.	Tomasik and Tomasik, ⁷³
2006	Living microorganisms, which upon ingestion in certain numbers have beneficial effects on human health beyond inherent general nutrition.	Dinkci et al., ⁷⁴
2006	Live microbial food ingredient that, when ingested in sufficient quantities, exert health benefits on the consumer.	Donor and Gorbach, ⁷⁵
2014	Live strains of strictly selected microorganisms which, when administered in adequate amounts, confer a health benefit on the host.	Hill et al., ¹⁶

Source: Author's own creation

It has been established that probiotic-based functional foods should provide 10^6 cfu/g live microorganisms^{76,77} for exhibiting clinical effects and multispecies probiotics are more efficacious than single species preparations.^{78,79} Therefore viability of probiotic cultures is the critical factor for exhibiting health benefits, which is governed by diverse factors such as food matrix, processing and storage conditions as well as stability during gastric transit. Lower viability of probiotics in dairy products have been reported due to the concentration of lactic acid acetic acid, hydrogen peroxide, oxygen content,⁸⁰ low pH, storage temperature⁸¹ and osmotic stress.^{82,83}

Selection of probiotics

Four categories can be used to categorise the selection criteria for probiotic strains used in food or nutraceutical applications: technological, safety, functional, and physiological properties.^{84–87} Probiotics are Generally Recognized as Safe (GRAS) but safety and effectiveness of a probiotic strain must be evaluated for the following factors prior to its application as probiotics:

Probiotic strains should be non-pathogenic, non-immunogenic nature, resistance to antibiotic-resistant, prolonged stability in the gastrointestinal tract, during production, processing and preservation^{88,89}

- 1) Identification by genus, species and strain⁹⁰
- 2) Ability to adhere to the intestinal epithelial cells
- 3) Ability to produce antimicrobial compounds
- 4) Ability to inhibit the known gut pathogens^{91,92}
- 5) Sufficiently characterized
- 6) Safe for the intended use
- 7) Supported by at least one positive human clinical trial

- 8) Alive in the product at an efficacious dose throughout the shelf life¹⁶
- 9) Incorporating with Probiotic strains must be accurately characterized to ensure identification, purity, and viability⁹³
- 10) Capability to inactivate enzymes (nitrate reductase, β -glucosidase, β -glucuronidase) involved in carcinogen activation⁹⁴
- 11) Capability to secrete conjugated linoleic acid for exhibiting anti-carcinogenic activity⁹⁵
- 12) Should have clinically documented and validated health effects⁹⁶

Health benefits of functional probiotic fermented dairy foods

The gut microbiota is the largest population of bacteria that changes and adapts with the host, greatly influencing human health and diseases.⁴⁶ Pathogenesis is caused by an imbalance in the gut microbiota, compromised gut integrity, bacterial invasion, and weakened immunity.⁹⁷ Positive impact of gut microbiota on human metabolic health has been extensively documented^{38,98} and colonization of the gut with beneficial microbes are able to ameliorate the overall health of humans by restructuring the gut microbial balance.⁹⁹ Reviewed literature indicated that probiotics are linked with diverse health benefits.^{100–103} and prophylactic properties of fermented milk products can be enhanced with the inclusion of probiotic organisms in conjugation of normal starter cultures and recommended application of probiotics as a pharmaceutical agent.^{8,9} Maftai et al.,¹⁰² delineated that diverse probiotic organisms extend wide spectrum of health benefits including diarrhea, inflammatory bowel disease, cancer, cholesterol, anti-inflammatory, diabetic, urinary tract Infections, irritable bowel disease, gingivitis, anti-inflammatory, anti-mutagenic effects, ulcerative colitis etc. Health benefits of functional probiotic milk products are enumerated in Table 4.

Table 4 Health benefits of functional probiotic fermented dairy foods

Ailments	Probiotic Organisms	References
Diabetes	Lactobacillus acidophilus La5, Bifidobacterium lactis Bb12	Ejtahed et al. ¹⁰⁴
	Lactobacillus casei 2 W, Lactobacillus rhamnosus 27	Chen et al. ¹⁰⁵
	Lactobacillus plantarum, Lactobacillus fermentum, Lactobacillus casei	Panwar et al. ¹⁰⁶
Lactose-intolerance	Lactobacillus delbrueckii subsp. bulgaricus, Streptococcus thermophilus	Shah et al. ¹⁰⁷
Anti Obesity	B. pseudocatenulatum SPM 1204, B. longum SPM 1205, B. longum SPM 1207	An et al. ¹⁰⁸
	Lactobacillus gasseri SBT 2055, Lactobacillus rhamnosus ATCC 53103, L. rhamnosus ATCC 53102, Bifidobacterium lactis Bb12	Mekkes et al. ¹⁰⁹
	Lactobacillus plantarum, Lactobacillus gasseri	Million et al. ¹¹⁰
Normalization of gut flora	Bifidobacterium animalis subsp lactis Bb-12	Merenstein et al. ¹¹¹
Non-alcoholic fatty liver disease	L. rhamnosus GG, L. reuteri 17938, VSL #3, Bifidobacteria species	Larroya-García et al. ¹¹²
Immune function	Lactobacillus acidophilus La5, Bifidobacterium lactis Bb12	Nabavi et al. ¹¹³
	Lactobacillus rhamnosus GR-I	Irvine et al. ¹¹⁴
	Lactobacillus casei, Bifidobacterium breve	Braga et al. ¹¹⁵
Necrotizing Enterocolitis	Bifidobacterium infantis, Streptococcus thermophilus, Bifidobacterium lactis	Jacobs et al. ¹¹⁶
	Bifidobacterium infantis, Lactobacillus, Bifidobacterium lactis	Roy et al. ¹¹⁷
	Lactobacillus reuteri	Shadkam et al. ¹¹⁸
Respiratory tract infections	Bifidobacterium breve, Streptococcus, L. rhamnosus GG, Lactobacillus acidophilus, Lactobacillus reuteri DSM 17938	Cruchet et al. ¹¹⁹
	Lactobacillus acidophilus, Bifidobacterium spp.	Denkel et al. ¹²⁰
	Bifidobacterium lactis Bb12	Kabeerdoss et al. ¹²¹
Cholesterol	Lactobacillus acidophilus SPP, Bifidobacterium bifidum	Salarkia et al. ¹²²
Diarrhoea	Lactobacillus acidophilus La5, Bifidobacterium lactis Bb12	Ejtahed et al. ¹¹⁴
	Lactobacillus acidophilus LA-5, Bifidobacterium lactis Bb-12	Holzwarth et al. ¹²³
	Streptococcus thermophilus	Tims et al. ¹²⁴

Table 4 Continued...

Anti-inflammatory	<i>Limosilactobacillus reuteri</i>	Howarth and Wang, ⁹⁷
Irritable Bowel Syndrome	<i>Escherichia coli</i> Nissle 1917	Kruis et al. ¹²⁵
Osteoporosis	<i>L. reuteri</i>	Yu et al. ¹²⁶
Halitosis	<i>Streptococcus salivarius</i> K12	Bustamante et al. ¹²⁷ ;
Colonic Cancer	<i>Escherichia coli</i> K-12, <i>Lactobacillus rhamnosus</i> , <i>Bifidobacterium latiss</i>	Shringeri et al. ¹²⁸ Altonsy et al. ¹²⁹

Source: Author's own creation

Avadhani¹³⁰ classified available evidence for health benefits conferred by probiotics into three groups:

- 1) Level A recommendation is based on strong, positive, well-conducted controlled studies in the primary literature, which are not in abstract form.
- 2) Level B recommendation is based on positive controlled studies, but in the presence of some negative studies.
- 3) Level C recommendation is based on some positive studies, but clearly an inadequate amount of data to establish the certainty of Levels A or B recommendation.

All probiotic cultures are not capable of alleviating all disease and are dependent on diverse factors such as strains of probiotic cultures, gastrointestinal physiological status, endogenous gut environment, gut microbiota prior to probiotic intervention, dosages and intervention period.⁴⁴ International Scientific Association for Probiotics and Prebiotics (ISAPP) have extended following recommendations to arrive upon a consistent health benefits due to probiotic supplementation.¹³¹

- a) Clearly define the end goal
- b) Design the study
- c) Base the selection of the intervention on scientific investigations
- d) Carefully select the study cohort

Mechanisms of probiotic action

It has been established that probiotic cultures employed for the formulation of functional dairy foods exert diverse health benefits through a combination of different mechanisms as depicted below.

- 1) Competitive exclusion of pathogens for adhesion sites, improvement of the intestinal mucosal barrier, gut immunomodulation, and neurotransmitter synthesis^{101,132}
- 2) Bile salt deconjugation and secretion
- 3) Lactose hydrolysis
- 4) Reduction in toxigenic and mutagenic reactions in gut¹³³
- 5) Competing with pathogens for nutrients and receptor-binding sites¹³⁴
- 6) Production of anti-microbial agents^{135,136}
- 7) Regulation of the expression of tight junction proteins and the immune response^{137,138}
- 8) Production of anti-inflammatory cytokines while interacting with intestinal epithelial cells and attracting macrophages and mononuclear cells¹³⁹

Limitations of probiotic application

- 1) All probiotic strains are not equally efficacious towards all human diseases and are also strain specific. Million et al.¹¹⁰ declared that

administration of *Lactobacillus plantarum* and *Lactobacillus gasseri* resulted in weight loss whereas *Lactobacillus acidophilus*, *Lactobacillus fermentum*, *Lactobacillus reuteri* and *Lactobacillus ingluviei* resulted in a significant weight gain.

- 2) All probiotic cultures may not have similar biotechnological activities and retain its viability in a particular food matrix.^{140,141} Therefore, selection of a suitable food system to deliver probiotics is a vital factor¹⁴² and retention of viability and sensory characteristics are the major criteria for the success of these products in the market.¹⁴³
- 3) Adverse effect of probiotic administration has been reported in critically ill patients.¹⁴⁴
- 4) Probiotics may not be equally efficacious for all individuals due to variation in the gastrointestinal physiological status, endogenous gut environment, gut microbiota prior to probiotic intervention, dosages and intervention period.⁴⁴
- 5) Viability of probiotic cultures in considerable number is required for exhibiting health benefits. It has been reported that the “minimum therapeutic” level of probiotics should be 10⁶ cfu/g throughout the product shelf-life¹⁴⁵ and must be ingested daily at a level of 10⁸-10⁹ cfu/ml for conferring health effects.¹⁴⁶
- 6) Health benefits extended by probiotics are disease-specific¹⁴⁷ and dependent on the host's innate immune system.^{148,149}

Conclusion

Functional fermented dairy foods formulated with the inclusion of probiotic cultures is an attracting functional food for consumers, who are inclined towards healthful foods. Efficacy of functional fermented dairy foods towards health restoration will primarily depend on the strain of probiotic cultures employed, processing technology, product matrix, viability of probiotics, gastrointestinal physiological status, endogenous gut environment, gut microbiota prior to probiotic intervention, dosages and intervention period. Clinical trials are suggested prior to the consideration of functional fermented dairy foods as dietary adjunct.

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Conflicts of interest

No potential conflict of interest was reported by the author.

References

1. Baker MT, Lu P, Parrella JA, et al. Consumer acceptance toward functional foods: A scoping review. *Int J Environ Res Public Health*. 2022;19(3):1217.

2. Bigliardi B, Galati F. Innovation trends in the food industry: the case of functional foods. *Trends Food Science and Technology*. 2013;31(2):118–129.
3. Martirosyan DM, Singh JA. New definition of functional food by FFC: what makes a new definition unique? *Funct Foods Health Dis*. 2015;5:209–223.
4. Granato D, Barba FJ, Kovacevic DB, et al. Functional foods: product development, technological trends, efficacy testing, and safety. *Annu Rev Food Sci Technol*. 2020;11:93–118.
5. Assmann G, Buono P, Daniele A. Functional foods and cardiometabolic diseases* international task force for prevention of cardiometabolic diseases. *Nutr Metab Cardiovasc Dis*. 2014;24(12):1272–300.
6. Sarkar S. Innovative approaches to upgrade functional properties of dahi. *Int J Microbiol Adv Immunol*. 2016;4:1.
7. Sarkar S. Approaches for enhancing the viability of probiotics: a review. *Br Food J*. 2010;112(4):329–349.
8. Sarkar S. Probiotics as functional foods: documented health benefits. *Nutr Food Sci*. 2013;43(2):107–115.
9. Sarkar S. Probiotics as functional foods: gut colonization and safety concerns. *Nutr Food Sci*. 2013;43(5):496–504.
10. Sarkar S. Spray drying encapsulation of probiotics for functional food formulation: a review. *Nov Tech Nutr Food Sci*. 2020;5(2):000610.
11. Sarkar S. Postbiotics: potential as functional ingredients—a review. *Food Nutr Chem*. 2024;2(3):241.
12. Shiba VK, Mishra HN. Fermented milks and milk products as functional foods: a review. *Crit Rev Food Sci Nutr*. 2013;53(5):482–496.
13. Hammoudi Halat D, Soltani A, Dalli R, et al. Understanding and fostering mental health and well-being among university faculty: A narrative review. *J Clin Med*. 2023;12(13):4425.
14. Fortune Business Insights. Food supplements – functional foods market. Market Research Report. 2020.
15. Fortune Business Insights. Food supplements – probiotics market. Market Research Report. 2019.
16. Hill C, Guarner F, Reid G, et al. Expert consensus document: The International Scientific Association for probiotics and prebiotics consensus statement on the scope and appropriate use of the term probiotic. *Nat Rev Gastroenterol Hepatol*. 2014;11:506–514.
17. Hati S, Prajapati JB. Use of probiotics for nutritional enrichment of dairy products. *Funct Food Health Dis*. 2022;12:713–733.
18. Divya JB, Varsha KK, Nampoothiri KM, et al. Probiotic fermented foods for health benefits. *Eng Life Sci*. 2012;12(4):377–390.
19. Pandey SM, Mishra HN. Optimization of the prebiotic and probiotic concentration and incubation temperature for the preparation of synbiotic soy yoghurt using response surface methodology. *LWT Food Sci Technol*. 2015;62(1):458–467.
20. Pereira MC, Steffens RS, Jablonski A, et al. Characterization, bioactive compounds and antioxidant potential of three Brazilian fruits. *J Food Compos Anal*. 2013;29(1):19–24.
21. Milani C, Duranti S, Bottacini F, et al. The first microbial colonizers of the human gut: composition, activities, and health implications of the infant gut microbiota. *Microbiol Mol Biol Rev*. 2017;81:e00036–17.
22. Robertson RC, Manges AR, Finlay BB, et al. The human microbiome and child growth—first 1000 days and beyond. *Trends Microbiol*. 2019;27(2):131–147.
23. Wang S, Ryan CA, Boyaval P, et al. Maternal vertical transmission affecting early-life microbiota development. *Trends Microbiol*. 2020;28(1):28–45.
24. Xiao L, Zhao F. Microbial transmission, colonisation and succession: from pregnancy to infancy. *Gut*. 2023;72(4):772–786.
25. Nunez H, Nieto PA, Mars RA, et al. Early life gut microbiome and its impact on childhood health and chronic conditions. *Gut Microbes*. 2025;17(1):2463567.
26. Dominguez-Bello MG, Costello EK, Contreras M, et al. Delivery mode shapes the acquisition and structure of the initial microbiota across multiple body habitats in newborns. *Proc Nat Acad Sci U S A*. 2010;107(26):11971–11975.
27. Shao Y, Forster SC, Tsaliki E, et al. Stunted microbiota and opportunistic pathogen colonization in caesarean-section birth. *Nature*. 2019;574(7776):117–121.
28. Backhed F, Roswallm J, Pengm Y, et al. Dynamics and stabilization of the human gut microbiome during the first year of life. *Cell Host Microbe*. 2015;17(5):690–703.
29. Azad MB, Konya T, Persaud RR, et al. Impact of maternal intrapartum antibiotics, method of birth and breastfeeding on gut microbiota during the first year of life: a prospective cohort study. *BJOG*. 2016;123(6):983–993.
30. Stewart CJ, Ajami NJ, O'Brien JL, et al. Temporal development of the gut microbiome in early childhood from the TEDDY study. *Nature*. 2018;562(7728):583–588.
31. Dahl C, Stigum H, Valeur J, et al. Preterm infants have distinct microbiomes not explained by mode of delivery, breastfeeding duration or antibiotic exposure. *Int J Epidemiol*. 2018;47(5):1658–1669.
32. Korpela K, Blakstad EW, Moltu SJ, et al. Intestinal microbiota development and gestational age in preterm neonates. *Sci Rep*. 2018;8:2453.
33. Fouhy F, Watkins C, Hill CJ, et al. Perinatal factors affect the gut microbiota up to four years after birth. *Nat Commun*. 2019;10:1517.
34. Yassour M, Jason E, Hogstrom LJ, et al. Strain-level analysis of mother-to-child bacterial transmission during the first few months of life. *Cell Host Microbe*. 2018;24(1):146–154.
35. Feehily C, O'Neill IJ, Walsh CJ, et al. Detailed mapping of Bifidobacterium strain transmission from mother to infant via a dual culture-based and metagenomic approach. *Nat Commun*. 2023;14(1):3015.
36. Chu DM, Antony KM, Ma J, et al. The early infant gut microbiome varies in association with a maternal high-fat diet. *Genome Med*. 2016;8(1):77.
37. Fan HY, Tung YT, Yang YC, et al. Maternal vegetable and fruit consumption during pregnancy and its effects on infant gut microbiome. *Nutrients*. 2021;13(5):1559.
38. Fan Y, Pedersen O. Gut microbiota in human metabolic health and disease. *Nat Rev Microbiol*. 2021;19(1):55–71.
39. Cabrera-Rubio R, Pickett-Nairne K, Gonzalez-Solares S, et al. The maternal diet index and offspring microbiota at 1 month of life: insights from the mediterranean birth cohort MAMI. *Nutrients*. 2024;16(2):314.
40. Gasparrini AJ, Wang B, Sun X, et al. Persistent metagenomic signatures of early-life hospitalization and antibiotic treatment in the infant gut microbiota and resistome. *Nat Microbiol*. 2019;4(12):2285–2297.
41. Matamoros S, Gras-Leguen C, Vacon FL, et al. Development of intestinal microbiota in infants and its impact on health. *Trends Microbiol*. 2013;21:167–173.
42. Kortman GAM, Timmerman HM, Schaafsma A, et al. Mothers' breast milk composition and their respective infant's gut microbiota differ between five distinct rural and urban regions in Vietnam. *Nutrients*. 2023;15:4802.
43. Morandini F, Perez K, Brot L, et al. Urbanization associates with restricted gut microbiome diversity and delayed maturation in infants. *iScience*. 2023;26(11):108136.

44. Ma T, Shen X, Shi X, et al. Targeting gut microbiota and metabolism as the major probiotic mechanism—an evidence-based review. *Trends Food Sci Technol.* 2023;138:178–198.
45. Granato D, Branco GF, Nazzaro F, et al. Functional foods and non-dairy probiotic food development: Trends, concepts, and products. *Compr Rev Food Sci Food Safety.* 2010;9(3):292–302.
46. Minagar A, Jabbour R, Jabbour H. The human gut microbiota: a dynamic biologic factory. In *Advances in Biochemical Engineering/Biotechnology, Series Editor Roland Ulber*, Springer, Berlin Heidelberg, Berlin, Heidelberg. 2023:1–16.
47. Pflughoeft K J, Versalovic J. Human microbiome in health and disease. *Annu Rev Pathol.* 2012;7:99–122.
48. Firoozeh F. Gut microbiome and human health. *Int J Enteric Pathog.* 2019;7:30.
49. Biedermann L, Rogler G. The intestinal microbiota: its role in health and disease. *Eur J Pediatr.* 2015;174(2):151–167.
50. Ormazabal V, Nair S, Elfeky O, et al. Association between insulin resistance and the development of cardiovascular disease. *Cardiovasc Diabetol.* 2018;17(1):122.
51. Tingirikari JMR, Sharma A, Lee HJ. Ethnic foods: impact of probiotics on human health and disease treatment. *J Ethn Foods.* 2024;11(1):31.
52. Vella M N, Stratton L M, Sheeshka J, et al. Functional food awareness and perceptions in relation to information sources in older adults. *Nutr J.* 2014;13:44.
53. Crowe K M, Francis C. Academy of nutrition and dietetics position of the academy of nutrition and dietetics: functional foods. *J Acad Nutr Diet.* 2013;113(8):1096–1103.
54. Institute of Medicine, National Academy of Sciences. *Opportunities in the Nutrition and Food Sciences*. Washington, DC: National Academy Press; 1994:109.
55. International Life Sciences Institute. Safety assessment and potential health benefits of food components based on selected scientific criteria. *Crit Rev Food Sci Nutr.* 1999;39:203–216.
56. Diplock AT, Agget PJ, Ashwell M, et al. Scientific concepts of functional foods in Europe: consensus document. *Br J Nutr.* 1999;81:1–27.
57. Hasler C M. The changing face of functional foods. *J Am Coll Nutr.* 2000;19(5 suppl):499–506.
58. Sloan AE. The top ten functional food trends. *Food Technol.* 2000;54(4):33–62.
59. Stanton C, Gardiner G, Meehan H, et al. Market potential for probiotics. *Am J Clin Nutr.* 2001;73(2 suppl):476S–483S.
60. Duggan C, Gannon J, Walker W A. Protective nutrients and functional foods for the gastrointestinal tract. *Am J Clin Nutr.* 2002;75(5):789–808.
61. Health Canada. Final policy paper on nutraceuticals/functional foods and health claims on foods. Health Canada; 2004.
62. Riezzo G, Chiloiro M, Russo F. Functional foods: salient features and clinical applications. *Curr Drug Targets Immune Endocr Metabol Disord.* 2005;5(3):331–337.
63. Sanz Y, Portune K, Gómez del Pulgar EM, et al. Targeting the microbiota: considerations for developing probiotics as functional foods. *The Gut–Brain Axis.* 2016:17–30.
64. Hamad G, Omarak RA, Eskander M, et al. Detection and inhibition of *Clostridium botulinum* in some Egyptian fish products by probiotics cell-free supernatants as bio-preservation agents. *LWT.* 2022;163:113603.
65. Lilly DM, Stillwell RH. Probiotics: growth-promoting factors produced by microorganisms. *Science.* 1965;147:747–748.
66. Parker R B. Probiotics, the other half of the antibiotics story. *Anim Nutr Health.* 1974;29:4–8.
67. Fuller R. Probiotics in man and animals. *J Appl Bacteriol.* 1989;66(5):365–378.
68. Havenaar R, Huis in't Veld JHL. Probiotics: a general view. In: Wood BJB, editor. *The Lactic Acid Bacteria in Health and Disease*. Vol. 1. 1992:163.
69. Salminen S. Uniqueness of probiotic strains. *IDF Nutr Newslett.* 1996;5:16–18.
70. Schaafsma G. State of the art concerning probiotic strains in milk products. *IDF Nutr Newslett.* 1996;5:23–24.
71. Schrezenmeier J, de Vrese M. Probiotics, prebiotics, and synbiotics—approaching a definition. *Am J Clin Nutr.* 2001;73(2 suppl):361S–364S.
72. FAO/WHO. Regulatory and clinical aspects of dairy probiotics. Food and Agriculture Organization of the United Nations, World Health Organization; 2001.
73. Tomasik PJ, Tomasik P. Probiotics and prebiotics. *Cereal Chem.* 2003;80:113–137.
74. Dinkci N, Unal G, Akalin S, et al. The importance of probiotics in pediatrics. *Pak J Nutr.* 2006;5:608–611.
75. Donor S, Gorbach SL. Probiotics: their role in the treatment and prevention of disease. *Expert Rev Anti Infect Ther.* 2006;4(2):261–275.
76. Foligne B, Daniel C, Pot B. Probiotics from research to market: the possibilities, risks and challenges. *Curr Opin Microbiol.* 2013;16(3):284–292.
77. Dinkci N, Akdeniz V, Akalin AS. Survival of probiotics in functional foods during shelf life. *Food Quality and Shelf Life.* 2019:201–233.
78. Chapman CM, Gibson GR, Rowland I. Health benefits of probiotics: are mixtures more effective than single strains? *Eur J Nutr.* 2011;50(1):1–17.
79. Hell M, Bernhofer C, Stalzer P, et al. Probiotics in *Clostridium difficile* infection: reviewing the need for a multi-strain probiotic. *Benef Microbes.* 2013;4:39–51.
80. de Vos P, Faas MM, Spasojevic M, et al. Encapsulation for preservation of functionality and targeted delivery of bioactive food components. *Int Dairy J.* 2010;20(4):292–302.
81. Meybodi NM, Mortazavian AM, Arab M, et al. Probiotic viability in yogurt: a review of influential factors. *Int Dairy J.* 2020;109:104793.
82. Fu N, Chen XD. Towards a maximal cell survival in convective thermal drying processes. *Food Research International.* 2011;44(5):1127–1149.
83. Bustos P, Borquez R. Influence of osmotic stress and encapsulating materials on the stability of autochthonous *Lactobacillus plantarum* after spray drying. *Dry Technol.* 2013;31(1):57–66.
84. Ouwehand A, Isolauri E, Kirjavainen P, et al. Adhesion of four *bifidobacterium* strains to human intestinal mucus from subjects in different age groups. *FEMS Microbiol Lett.* 1999;172(1):61–64.
85. O'Brien J, Crittenden R, Ouwehand A C, et al. Safety evaluation of probiotics. *Trends Food Sci Technol.* 1999;10(12):418–424.
86. Sanders ME, Klaenhammer TR, Ouwehand AC, et al. Effects of genetic, processing, or product formulation changes on efficacy and safety of probiotics. *Ann N Y Acad Sci.* 2014;1309:1–18.
87. Tripathi MK, Giri SK. Probiotic functional foods: survival of probiotics during processing and storage. *J Funct Foods.* 2014;9:225–241.
88. Yoha K, Nida S, Dutta S, et al. Targeted delivery of probiotics: perspectives on research and commercialization. *Probiotics Antimicrob Proteins.* 2022;14(1):15–48.

89. Im EJ, Lee HHY, Kim M, et al. Evaluation of enterococcal probiotic usage and review of potential health benefits, safety, and risk of antibiotic-resistant strain emergence. *Antibiotics (Basel)*. 2023;12:1327.
90. Ansari J M, Colasacco C, Emmanouil E, et al. Strain-level diversity of commercial probiotic isolates of bacillus, Lactobacillus, and saccharomyces species illustrated by molecular identification and phenotypic profiling. *PLoS One*. 2019;14(3):e0213841.
91. Carlson J, Slavin J. Health benefits of fibre, prebiotics and probiotics: a review of intestinal health and related health claims. *Qual Assur Saf Crops Foods*. 2016;8:539–554.
92. Gheorghita R, Anchidin-Norocel L, Filip R, et al. Applications of biopolymers for drugs and probiotics delivery. *Polymers*. 2021;13(16):2729.
93. Mazziotta C, Tognon M, Martini F, et al. Probiotics mechanism of action on immune cells and beneficial effects on human health. *Cells*. 2023;12:184.
94. Kumar M, Nagpal R, Verma V, et al. Probiotic metabolites as epigenetic targets in the prevention of colon cancer. *Nutr Rev*. 2013;71:23–34.
95. dos Reis SA, da Conceição LL, Siqueira NP, et al. Review of the mechanisms of probiotic actions in the prevention of colorectal cancer. *Nutr Res*. 2017;37:1–19.
96. Reid G, Gadir AA, Dhir R. Probiotics: reiterating what they are and what they are not. *Front Microbiol*. 2019;10:424.
97. Howarth GS, Wang H. Role of endogenous microbiota, probiotics and their biological products in human health. *Nutrients*. 2013;5:58–81.
98. Liu J, Tan Y, Cheng H, et al. Functions of gut microbiota metabolites, current status and future perspectives. *Aging Dis*. 2022;13:1106–1126.
99. Nueno-Palop C, Narbad A. Probiotic assessment of *Enterococcus faecalis* CP58 isolated from human gut. *Int J Food Microbiol*. 2011;145(2–3):390–394.
100. Ranjha MMAN, Shafique B, Batool M, et al. Nutritional and health potential of probiotics: a review. *Appl Sci*. 2021;11(23):11204.
101. Latif A, Shehzad A, Niazi S, et al. Probiotics: mechanism of action, health benefits and their application in food industries. *Front Microbiol*. 2023;14:1216674.
102. Maftei NM, Raileanu CR, Balta AA, et al. The potential impact of probiotics on human health: an update on their health-promoting properties. *Microorganisms*. 2024;12:234.
103. Sarita B, Samadhan D, Hassan MZ, et al. A comprehensive review of probiotics and human health: current perspectives and applications. *Front Microbiol*. 2025;15:1487641.
104. Ejtahed HS, Niafar M, Mofid V, et al. Effect of probiotic yogurt containing Lactobacillus acidophilus and bifidobacterium lactis on lipid profile in individuals with type 2 diabetes mellitus. *J Dairy Sci*. 2011;94(7):3288–3294.
105. Chen P, Zhang Q, Dang H, et al. Screening for potential new probiotic based on probiotic properties and α -glucosidase inhibitory activity. *Food Control*. 2014;35(1):65–72.
106. Panwar H, Calderwood D, Grant IR, et al. Lactobacillus strains isolated from infant faeces possess potent inhibitory activity against intestinal α - and β -glucosidases suggesting anti-diabetic potential. *Eur J Nutr*. 2014;53:1465–1474.
107. Shah NP, da Cruz AG, Faria JDAF. Probiotics and probiotic foods: technology, stability and benefits to human health. *Nova Science Publishers*. 2011.
108. An HM, Park SY, Lee DK, et al. Antiobesity and lipid-lowering effects of bifidobacterium spp. in high fat diet-induced obese rats. *Lipids Health Dis*. 2011;10:116.
109. Mekkes MC, Weenen TC, Brummer RJ, et al. The development of probiotic treatment in obesity: a review. *Benef Microbes*. 2014;5:19–28.
110. Million M, Maraninchi M, Henry M, et al. Obesity-associated gut microbiota is enriched in Lactobacillus reuteri and depleted in Bifidobacterium animalis and Methanobrevibacter smithii. *Int J Obes (Lond)*. 2012;36:817–825.
111. Merenstein DJ, Tan TP, Molokin A, et al. Safety of Bifidobacterium animalis subsp. lactis strain BB-12-supplemented yogurt in healthy adults on antibiotics: a phase I safety study. *Gut Microbes*. 2015;6:66–77.
112. Larroya-García A, Navas-Carrillo D, Orenes-Piñero E. Impact of gut microbiota on neurological diseases: diet composition and novel treatments. *Crit Rev Food Sci Nutr*. 2019;59:3102–3116.
113. Nabavi S, Rafrat M, Somi M H, et al. Effects of probiotic yogurt consumption on metabolic factors in individuals with nonalcoholic fatty liver disease. *J Dairy Sci*. 2014;97(12):7386–7393.
114. Irvine SL, Hummelen R, Hekmat S, et al. Probiotic yogurt consumption is associated with an increase of CD4 count among people living with HIV/AIDS. *J Clin Gastroenterol*. 2010;44:201–205.
115. Braga TD, da Silva GAP, de Lira PIC, et al. Efficacy of bifidobacterium breve and lactobacillus casei oral supplementation on necrotizing enterocolitis in very-low-birth-weight preterm infants: a double-blind randomized controlled trial. *Am J Clin Nutr*. 2011;93(1):81–86.
116. Jacobs SE, Tobin JM, Opie GF, et al. Probiotic effects on late-onset sepsis in very preterm infants: a randomized controlled trial. *Pediatrics*. 2013;132:1055–1062.
117. Roy A, Chaudhuri J, Sarkar D, et al. Role of enteric supplementation of probiotics on late-onset sepsis by candida species in preterm low birth weight neonates: a randomized double-blind placebo-controlled trial. *North Am J Med Sci*. 2014;6(1):50–57.
118. Shadkam MN, Jalalizadeh F, Nasiriani K. Effects of probiotic lactobacillus reuteri DSM 17938 on the incidence of necrotizing enterocolitis in very low birth weight premature infants. *Iran J Neonatol*. 2015;6(4):15–20.
119. Cruchet S, Furnes R, Maruy A, et al. The use of probiotics in pediatric gastroenterology: a review of the literature and recommendations by latin-american experts. *Pediatr Drugs*. 2015;17(3):199–216.
120. Denkel L A, Schwab F, Garten L, et al. Protective effect of dual-strain probiotics in preterm infants: a multicenter time series analysis. *PLoS One*. 2016;11(6):e0158136.
121. Kabeerdoss J, Devi RS, Mary RR, et al. Effect of yoghurt containing Bifidobacterium lactis Bb12® on faecal excretion of secretory immunoglobulin A and human beta-defensin 2 in healthy adult volunteers. *Nutr J*. 2011;10:138.
122. Salarkia N, Ghadamli L, Zaeri F, et al. Effects of probiotic yogurt on performance, respiratory and digestive systems of young adult female endurance swimmers: a randomized controlled trial. *Med J Islam Repub Iran*. 2013;27(3):141–146.
123. Holzwarth M, Korhummel S, Siekmann T, et al. Influence of different pectins, process and storage conditions on anthocyanin and colour retention in strawberry jams and spreads. *LWT Food Sci Technol*. 2013;52:131–138.
124. Tims S, Roelofs M, Roug C, et al. Fermented infant formula with bifidobacterium breve C50 and streptococcus thermophilus O65 modulates gut microbiota toward breastfed infants. *Clin Nutr*. 2021;40(3):778–787.
125. Kruis W, Chrubasik S, Boehm S, et al. A double-blind placebo-controlled trial to study therapeutic effects of probiotic Escherichia coli Nissle 1917 in subgroups of patients with irritable bowel syndrome. *Int J Colorectal Dis*. 2012;27:467–474.
126. Yu J, Wong HS, Cheung WH, et al. The role of gut microbiota in bone homeostasis: a systematic review of preclinical animal studies. *Bone Joint Res*. 2021;10(1):51–59.

127. Bustamante M, Oomah BD, Mosi-Roa Y, et al. Probiotics as an adjunct therapy for the treatment of halitosis, dental caries and periodontitis. *Probiotics Antimicrob Proteins*. 2020;12(2):325–334.
128. Shringeri PI, Fareed N, Battur H, et al. Role of probiotics in the treatment and prevention of oral malodor/halitosis: A systematic review. *J Indian Assoc Public Health Dent*. 2019;17(2):90–96.
129. Altonsy MO, Andrews SC, Tuohy KM. Differential induction of apoptosis in human colonic carcinoma cells (Caco-2) by atopobium, and commensal, probiotic and enteropathogenic bacteria: Mediation by the mitochondrial pathway. *Int J Food Microbiol*. 2010;137(2–3):190–203.
130. Avadhani A. Probiotics: Review of evidenc. *GSTF International Journal of Nursing and Health Care*. 2013;1(1):29–36.
131. Reid G, Gaudier E, Guarner F, et al. Responders and non-responders to probiotic interventions: how can we improve the odds? *Gut Microbes*. 2010;1(3):200–204.
132. Fusco A, Savio V, Cimini D, et al. In vitro evaluation of the most active probiotic strains able to improve the intestinal barrier functions and to prevent inflammatory diseases of the gastrointestinal system. *Biomedicine*. 2023;11(3):865.
133. Suchetha A, Vinaya Shree M P, Apoorva S M, et al. Probiotics: a legacy of good health. *J Res Med Dent Sci*. 2015;3(1):1–6.
134. Plaza-Díaz J, Ruiz-Ojeda F J, Gil-Campos M, et al. Mechanisms of action of probiotics. *Adv Nutr*. 2019;10(suppl-1):S49–S66.
135. Fantinato V, Camargo HR, Sousa ALOP. Probiotics study with *Streptococcus salivarius* and its ability to produce bacteriocins and adherence to KB cells. *Rev Odontol UNESP*. 2019;48:1–9.
136. Ahire, J, Jakkamsetty C, Kashikar, MS. et al. In vitro evaluation of probiotic properties of *Lactobacillus plantarum* UBLP40 isolated from traditional indigenous fermented food. *Probiotics Antimicrob Proteins*. 2021;13(5):1413–1424.
137. Bu Y, Liu Y, Liu Y, et al. Screening and probiotic potential evaluation of bacteriocin-producing *Lactiplantibacillus plantarum* in vitro. *Foods*. 2022;11(11):1575.
138. Ma XY, Son YH, Yoo JW, et al. Tight junction protein expression-inducing probiotics alleviate TNBS-induced cognitive impairment with colitis in mice. *Nutrients*. 2022;14:2975.
139. Petruzzello C, Saviano A, Ojetto V. Probiotics, the immune response and acute appendicitis: a review. *Vaccines (Basel)*. 2023;11(7):1170.
140. Rosburg V, Boylston T, White P. Viability of *bifidobacteria* strains in yogurt with added oat beta-glucan and corn starch during cold storage. *J Food Sci*. 2010;75(5):C439–C444.
141. Al-Sheraji SH, Ismail A, Manap MY, et al. Viability and activity of *bifidobacteria* during refrigerated storage of yoghurt containing mangifera pajang fibrous polysaccharides. *J Food Sci*. 2012;77(11):M624–630.
142. Ranadheera RDCS, Baines SK, Adams MC. Importance of food in probiotic efficacy. *Food Res Int*. 2010;43(1):1–7.
143. Rouhi M, Sohrabvandi S, Mortazavian AM. Probiotic fermented sausage: viability of probiotic microorganisms and sensory characteristics. *Crit Rev Food Sci Nutr*. 2013;53(4):331–348.
144. Lee ZY, Lew CCH, Ortiz-Reyes A, et al. Benefits and harm of probiotics and synbiotics in adult critically ill patients: a systematic review and meta-analysis of randomized controlled trials with trial sequential analysis. *Clin Nutr*. 2023;42:519–531.
145. Neffe-Skocińska K, Rzepkowska K, Szydłowska A, et al. Trends and possibilities of the use of probiotics in food production. In: *Academic Press*. 2018;65–94.
146. Calinoiu LF, Vodnar D, Precup G. The probiotic bacteria viability under different conditions: a review. *Food Sci Technol*. 2016;73(2):55–60.
147. Sniffen JC, McFarland LV, Evans CT, et al. Choosing an appropriate probiotic product for your patient: an evidence-based practical guide. *PLoS One*. 2018;13(12):e0209205.
148. Varsha KK, Maheshwari AP, Nampoothiri KM. Accomplishment of probiotics in human health pertaining to immune regulation and disease control. *Clin Nutr ESPEN*. 2021;44:26–37.
149. Clare M Hasler, Amy C Brown. Position of the american dietetic association: functional foods. *J Am Diet Assoc*. 2009;109(4):735–746.