carried out for the following parameters: annealing temperature, $MgCl_2$ concentration, primer and template DNA concentration. Analytical sensitivity and specificity of the *Sec Y* conventional PCR and real time PCR was evaluated. Further sensitivity of *Sec Y* and flaB conventional PCR was also evaluated.

Results: Using conventional PCR the *Sec Y* primers amplified all pathogenic *Leptospira* strains tested. The sensitivity of the flaB conventional PCR was 1000 copy numbers and *Sec Y* conventional PCR was 100 copy numbers while the real time PCR detected up to 30 genomic copy numbers of leptospiral DNA extracted from *Leptospira* culture isolate. The R^2 value of standard curve was 99.5%.

Conclusion: *Sec Y*Real time PCR technique was found to be highly sensitive and thus can be efficiently used as a diagnostic tool for diagnosis of leptospirosis and to determine the leptospiral loads in patients.

PP35

High sensitive C reactive protein in lumbar disc herniated subjects with positive and negative disc microbes

Withanage ND[1], Pathirage S[2], Peiris H[3], Perera S[4], Athiththan LV[3]

[1]Department of Allied Health Sciences, Faculty of Medical Sciences, University of Sri Jayewardenepura, [2]Medical Research Institute, Colombo 08, [3]Department of Biochemistry, Faculty of Medical Sciences, University of Sri Jayewardenepura, [4]The Central Hospital, Colombo 8

Objectives: To identify the association of hs-CRP in lumbar disc herniated (LuDH) patients with positive and negative disc microbes.

Methods: Venous blood sample was obtained from 96 subjects who were undergoing lumbar discectomy and 200 µL of serum aliquot was taken for hs-CRP and analyzed using KONE 20 XT autoanalyzer. Surgically removed disc was taken for aerobic and anaerobic studies whereas muscle biopsies were used as controls. Gram stain, coagulase and catalase test were performed for the isolates and RapID ANA II ID kit (remel,USA) was used for the identification of anaerobes.

Results: Among the 18 (19%) subjects who were positive for disc microorganisms; 12 were positive for aerobes and 6 for anaerobes. There were 30/96 with elevated level of hs-CRP (>3 mg/L) and 34/96 with slightly elevated hs-CRP (1-3mg/L). All the anaerobic positive patients had either elevated or slightly elevated values for hs-CRP, but only 5/12 aerobic positive patients had either elevated or slightly elevated values. Though there was no significant relationship between elevated hs-CRP and presence of microorganisms, 66.7 % of the LuDH patients had either elevated or slightly elevated values. Mean hs-CRP values were high in both negative (4.14±7.1 mg/L) and positive microbial disc cultures (5.13±11.9mg/L).

Conclusions: Mean hs-CRP were higher in both microorganism positive and negative patients. No significant relationship was observed between elevated hs-CRP and presence of microorganisms though the mean value was high in microbe positive subjects. The majority (66.7%) of the LuDH patients had either elevated or slightly elevated values for hs-CRP.