

**Objective** To analysis the GMP-140, TAT of intravenous thrombolytic therapy using recombinant staphylokinase (r-SAK) and urokinase in acute myocardial infarction (AMI).

**Methods** 68 patients with AMI were randomised to receive either r-SAK or urokinase. Group A (35 cases) accepted staphylokinase was administered as intravenous bolus injections of 10 mg 30 min apart; Group B (33 cases) accepted urokinase was administered as 1.5 million units intravenous dropping within 30 min; Determination of A, B groups before thrombolytic therapy, thrombolysis, after 2 h, 24 h, 48 h in plasma platelet  $\alpha$ -granule membrane protein (GMP-140), thrombin-anti-thrombin complex (TAT) levels and other related indicators.

**Results** A, B 2 h after treatment, the plasma GMP-140 were increased, B group of GMP-140 in plasma was significantly increased. A group 2 h after treatment, TAT concentration in plasma was not significant, B group 2 h after treatment, the plasma concentration of TAT increased significantly.

**Conclusion** r-SAK superior efficacy of thrombolysis with urokinase, r-SAK has a stronger selective thrombolysis, procoagulant activity of weak, low incidence of bleeding complications, and promote platelet activation injury is low, reduce the prothrombotic state of myocardial injury can improve myocardial microperfusion.

[gw22-e0263]

**ANALYSIS GMP-140, TAT OF R-SAK AND UROKINASE AS THROMBOLYTICS IN TREATMENT OF PATIENTS WITH ACUTE MYOCARDIAL INFARCTION**

Guo-tao Wang *Department of Cardiology, The Fourth Hospital of Daqing, Daqing, China*

10.1136/heartjnl-2011-300867.350