Objective To evaluate the value of ischaemia modified albumin (IMA) in the diagnosis on coronary atherosclerotic heart disease (CAD) and analyse the correlation between IMA and the extent of myocardial ischaemia.

Methods One hundred and twenty nine patients who had signed a consent form were randomly selected for clinical suspicion of myocardial ischaemia, and these patients were ready to undergoing coronary angiography which was the gold standard for diagnosis of CAD. The IMA was detected with ACB test before coronary angiography.

Results The average IMA level of non-CAD group was (67.68±29.61) U/ml, as that of CAD group was (90.24±29.61) U/ml. In the CAD group, the average IMA level of one lesion group, two lesions group, three lesions group was (79.87±18.37) U/ml, (98.10±23.39) U/ml, (98.06±33.47) U/ml, respectively. IMA level and the number of diseased vessels of coronary were significantly positively correlated ($p < 0.01$, $r = 0.299$). When the cut-off threshold derived from the receiver operating characteristics (ROC) curve (ROC analysis) was determined as 93.07 U/ml, the sensitivity of admission IMA for a final diagnosis of CAD with myocardial ischaemia was 0.49, specificity was 0.90, negative predictive value was 0.45, positive predictive value was 91%.

Conclusion IMA showed considerable value on the diagnosis of CAD, which had high specificity and positive predictive value. IMA level and the number of diseased vessels of coronary were significantly positively correlated.

[gw22-e0125] **THE VALUE OF ISCHAEMIA MODIFIED ALBUMIN IN THE DIAGNOSIS ON CORONARY ATHEROSCLEROTIC HEART DISEASE**

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