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A RETROSPECTED STUDY ON DOSAGE OF UFH FOR PERCUTANEOUS CORONARY INTERVENTION IN PATIENTS WITH CORONARY DISEASE IN THE LMWH PREVIOUS SURGERYWang Jun *Department of Cardiology, Affiliated Hospital of Hainan Medical College*

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Objective To evaluate the efficacy and safety of reducing the dosage of UFH for elective percutaneous coronary intervention in patients with Coronary disease in the LMWH previous surgery.

Methods From January 2006 to December 2008., 1011 patients with CAD underwent PCI received enoxaparin (40 mg, q12h, at least four times and UFH 2000u Sheath injection Immediately after the success of the arterial puncture, with reduced additional UFH Sheath injection before PCI, n=720) or UFH (2000u Sheath injection, before CAG with additional UFH Sheath injection before PCI, n=291), the sheath of both were withdrawn after the procedure when UFH was excreted completely.

Results One patient in enoxaparin group developed acute thrombosis and 1011 patient developed subacute thrombosis. The incidence of in-hospital major adverse cardiac events were 0.42% in the LMWH group and 0.69% in the UFH group. Haematoma at the puncture site happened in 22 patients (6.79%) in the LMWH group and 19 in patients (7.86%, $p<0.05$) in the UFH group.

Conclusions Our results suggest that it is safe and effect to give enoxaparin at least four times and UFH, 2000u Sheath injection immediately after the success of the arterial puncture,

with reduced additional UFH Sheath injection before PCI and the sheathe can be withdrawn early.