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## EFFECTS OF ATORVASTATIN ON TRANSIENT SODIUM CURRENTS IN RAT NORMAL/SIMULATED ISCHEMIA/REPERFUSION VENTRICULAR CELL

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**Background** Some clinical trials have shown statins have anti-arrhythmic effects and can improve clinical results. But its mechanism is unclear.

**Objective** observing the effects of atorvastatin on transient sodium currents in rat normal/simulated ischemia/reperfusion ventricular cell.

**Methods** Taking whole-cell patch clamp method to record  $I_{\rm Na}$  and measuring the expression level of SCN5A by western blot technique of simulated ventricular ischemia /reperfusion cell. **Results** The short-time effects of atorvastatin on the rat normal and simulated ischemia ventricular peak  $I_{\rm Na}$  were inhibited about 25% (p<0.05), and after elution, inhibition disappeared. However 15 min after simulated ischemia atorvastatin inhibited the  $I_{\rm Na}$  decreasing progress. In simulated reperfusion status,  $I_{\rm Na}$  reduced and atorvastatin inhibited the reduction degree, while  $I_{\rm Na}$  of the atorvastatin and wortmannin combination group had no difference with which of reperfusion group (p>0.05). The expression level of SCN5A had the almost same changes with  $I_{\rm Na}$ .

**Conclusion** (1) The short time (3 min) effect of Atorvastatin in  $I_{Na}$  of the normal and simulated ischemia rat ventricular myocytes is inhibition, similar to sodium channel blockers. (2) Atorvastatin can protect the decrease of  $I_{Na}$  in the status of simulated long-time (>15 min) ischemia/reperfusion. (3) Effects of Atorvastatin in the status of simulated ischemic/reperfusion can be partly overcome by Wortmannin, which means atorvastatin can affect  $I_{Na}$  and the expression level of SCN5A through the way of RISK signal pathway especially of PI3K.