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EFFECT OF VITAMIN B6 AND ANTIHELICOBACTER PYLORI ON PROGNOSIS AND SERUM LEVELS OF INFLAMMATION MEDIATORS IN PATIENTS WITH ACUTE CORONARY SYNDROME

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Aim To study the effect of administration of vitamin B₆ and antihelicobacterial agents on coronary events and the serum levels of inflammatory mediators in patients with acute coronary syndrome.

Methods One hundred and eighty patients with acute myocardial infarction with coincidental proven helicobacter pylori infection were randomised into one control group (n=58) and two treatment groups (n1=60, n2=62). Antibacterial agents only were given in the control group, with the addition of omeprazole (20 mg, twice a day), clarithromycin (500 mg, twice a day) and amoxicillin (500 mg, three times a day) in the first therapy group. Besides the administration of agents in the first therapy group, vitamin B₆ (10 mg, three times a day) was given in the second therapy group. All the patients were treated for 10 days. The incidence of coronary events was observed. IgG of helicobacter pylori (HpIgG) was measured. Hypersensitivity C-reactive protein (hsCRP) and interleukin 6 (IL-6) were assayed.

Results All the patients were followed up for 12 months. The incidence of coronary events was 27.9% in the control group, 15.7% in the first therapy group, 11.94% in the second therapy group. The difference among the three therapy groups was significant (p<0.05). In contrast, in the control group, the levels of HpIgG, hsCRP and IL-6 were decreased significantly (p<0.05). The difference between the two therapy groups was significant (p<0.05).

Conclusions The administration of vitamin B₆ and antihelicobacter antibacterial agents can reduce the incidence of coronary events and decrease the level of inflammation mediators in blood. This may potentially be beneficial to the secondary prevention of acute coronary syndrome.