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RISK EVALUATION OF COMBINED DETECTION OF SERUM HCY, CD62P, HS-CRP IN PATIENTS WITH HYPERTENSION

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Objectives To explore homocysteine platelet membrane glycoprotein, CD62p microparticles and high-sensitivity C reactive protein level and assess risk stratification in patients with hypertension in order to make early effective treatment.

Methods Using flow cytometry (FCM) and monoclonal antibody labelling method, to detect serum Hcy, platelet membrane glycoproteins CD62p and Hs-crp levels in 150 cases of hypertension patients and 30 healthy controls.

Results The patients with essential hypertension complicated with coronary heart disease group especially unstable angina group serum HCy, CD62p, Hs-crp levels were significantly higher than those without coronary heart disease patients with hypertension. Serum HCy, CD62p, Hs-crp levels were significantly higher than those in the control group.

Conclusions Patients with hypertension in outpatient treatment process for simple serum homocysteine Hcy detection is necessary. Target organ damage in screening on high homocysteine in patients must be performed, timely early effective treatment can bring greater benefit to the patient.