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CLINICAL FEATURE ANALYSIS OF VENTRICULAR LATE POTENTIAL BETWEEN ACUTE STEMI AND NSTEMI PATIENTS

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Objectives To discuss the positive rate of ventricular late potential (VLP) between acute ST-segment elevation myocardial infarction (STEMI) and acute non ST-segment elevation myocardial infarction (NSTEMI) patients.

Methods 376 cases of acute myocardial infarction patients (304 cases of STEMI patients and 72 cases of NSTEMI patients), which were admitted to the first affiliated hospital of China Medical University between January 2011 and July 2011, were underwent VLP examination.

Results The VLP positive rate of STEMI group was 53.6%, while that of NSTEMI group was 38.9%, and the differences have statistics meaning ($X^2=5.053$, $p<0.05$). The occurrence rate of malignant ventricular arrhythmia in VLP positive patients was 14.1%, while in VLP negative patients was 7.0% ($X^2=4.996$, $p<0.05$). VLP positive was a risk factor of malignant ventricular arrhythmia (OR=2.178, 95% CI 1.087 to 4.366).

Conclusions The VLP positive rate of STEMI group is higher than that of NSTEMI group. The occurrence rate of malignant ventricular arrhythmia in VLP positive patients is higher than that in VLP negative patients. VLP is one of the important indicators to predict the malignant ventricular arrhythmia attack in acute myocardial infarction patients.