

GW23-e0531

THE ANTICOAGULANT THERAPY OF HAEMODIALYSIS PATIENTS WITH ACUTE CORONARY SYNDROME

doi:10.1136/heartjnl-2012-302920k.53

¹Tang Hao, ¹Wu Jingguo, ²Xu Jia, ¹Chen Zhibin, ¹Ma Zhongfu. ¹Department of General Internal Medicine of the First Affiliated Hospital of Sun Yat-sen University;

²Department of Emergency Room of the First Affiliated Hospital of Sun Yat-sen University

Objectives To evaluate the effect of different dose of anticoagulants in haemodialysis patients with acute coronary syndrome (not including ST-elevate myocardial infarction).

Methods 28 patients with ACS (not including ST-elevate myocardial infarction) were enrolled between March 2008 and March 2012 who started haemodialysis for 5–10 years in regular pattern. The patients were randomly divided into two groups: the routine group (n=12) and strengthen group (n=16). All patients were given routine therapy including regular heparinised haemodialysis (three times a week), rest, oxygen inhaling, antiplatelet, reducing blood lipid levels, controlling the blood pressure. The patients in the routine group were given the factor X a inhibitor fondaparinux 2.5 mg every day except the haemodialysis days. The patients in the strengthen group were given fondaparinux 2.5 mg every day including the haemodialysis days. The course of treatment was 7 days. Observe the symptom, electrocardiogram, cardiac troponin T, coagulation function (PT, APTT, INR) for 14 days.

Results One patient in routine group was died of heart failure, another patients in strengthen group exited because of gastrointestinal bleeding. The basic characteristics of the two groups were identical ($p>0.05$). Patients' symptom relieved in (3.1 ± 2.8) days in strengthen group and (5.0 ± 3.6) days in routine group ($p<0.05$). Patients' electrocardiogram returned to the origin in (4.5 ± 2.1) days in strengthen group and (5.8 ± 4.3) days in routine group ($p<0.05$). The cardiac troponin T of patients in strengthen group reduced to stable level in (4.7 ± 5.2) days and (5.8 ± 2.9) days in routine group ($p<0.05$). In the 3rd day and 5th day and 7th day and 9th day, the PT, APTT, INR in strengthen group were significantly longer than those in routine group ($p<0.05$).

Conclusions Strengthen anticoagulant therapy in haemodialysis patients with acute coronary syndrome (not including ST-elevate myocardial infarction) is more effective than routine therapy, but we must be care of the risk of haemorrhage.