

Results Compared with the control group, the recurrence rate of cardiac angina was significantly reduced in the treatment group ($p<0.05$). Clinical symptoms and the depression of ST segment in electrocardiograph were improved apparently ($p<0.05$), and there was little influence on the index of blood clotting ($p>0.05$).

Conclusions The treatment of clopidogrel combined with the traditional anticoagulant drugs would be more effective and safe to NSTEMI.

Community-based management of cardiovascular disease

GW23-e1067

THE VALUE OF CLOPIDOGREL TO ACUTE NON-ST ELEVATION MYOCARDIAL INFARCTION

doi:10.1136/heartjnl-2012-302920ab.1

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Objectives To observe and evaluate the clinical efficacy and safety of clopidogrel on acute non-STelevation myocardial infarction (NSTEMI).

Methods 30 patients with acute NSTEMI in the control group were treated with Low Molecular Heparin, Aspirin and other anti-anginal drugs. Another 30 patients with acute NSTEMI were treated with Low Molecular Heparin, Aspirin combined with Clopidogrel, which the initial dose is 300 mg and followed 75 mg/d for 2 weeks in treatment group.