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THE INFLUENCE OF INTEGRATIVE MEDICINE CLINICAL PATHWAYS ON PROGNOSIS FOR ACUTE MYOCARDIAL INFARCTION: A NON-RANDOMISED CONTROLLED TRIAL

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¹Wang lei, ¹Zhang Minzhou, ¹Guo Liheng, ¹Qi Jianyong, ¹Zhang Jun, ¹Zhao Xujie,²Luo Haiming, ³He Hankang, ⁴Wang Xiaolong, ⁵Wu Yang, ¹Zhang Minzhou.¹Guangdong Provincial Hospital of Chinese Medicine; ²Shanghai University of Chinese Medicine, Yueyang Hospital of Integrated medicine; ³Guangxi University of Chinese Medicine, Third Affiliated Hospital; ⁴Shanghai University of Chinese Medicine, Shuguang Hospital; ⁵Beijing University of Chinese Medicine, Oriental Hospital

Objectives To construct and evaluate the efficacy of clinical pathways of acute myocardial infarction (AMI) based on the Integrative Medicine, for the purpose of providing the optimal programmes for the treatments of AMI.

Methods On the basis of AMI guidelines, expert comments and the clinical experience of Benifiting Qi and Promoting Blood Circulation therapeutics, we established the Integrative Medicine clinical pathways of AMI. A Multi-centre, retrospective methods were used to evaluate the eff According to the clinical pathway, we divided the study group into two units, one is the treatment group (clinical pathway group, CPG, 194 cases), using Astragalus injection and compound danshen dripping pills (CSDP), and the other is the control group (non-clinical pathway group, NCPG, 505 cases), combined with Yiqihuoxue method. Observing CPG and NCPG costs, days in-hospital and major cardiovascular events (MACE) during period of hospitalisation.

Results The CPG days in-hospital was significantly shortened compared with NCPG (9.2 ± 4.2 days vs 12.7 ± 8.6 , $p=0.00$). After standardise the prices, the average CPG costs in-hospital was reduced compared with NCPG (46365.7 ± 18266.9 ¥ vs 52866.0 ± 35404.4 ¥, $p=0.003$). It was shortened 3.5 days in-hospital in average, and reduced 4820.00 ¥ costs in-hospital in average. There were statistically significantly differences in MACE between these two groups during period of hospitalisation (2.5% vs 6.9%, $p=0.03$).

Conclusions The AMI Integrative Medicine clinical pathway, which is based on the Yiqihuoxue therapeutics, can significantly reduce the AMI days in-hospitalisation, controlling the patient's hospitalisation costs, completely demonstrating the value of Integrative Medicine in AMI hospital management and quality control.