and reduced to 50 mg/d in the second year after surgery. At last the longest lasted for 5 years. Primary endpoint events were observed within 5 years such as myocardial infarction, recurrent angina, death, stent thrombosis, in-stent restenosis and adverse reactions (symptoms, blood analysis, fecal occult blood, liver and kidney function).

Results Adverse cardiovascular event rate (<5%) and adverse drug reactions (<1%) were very low within 5 years after operation.

Conclusions It is effective and safe of dual antiplatelet therapy, combined with domestic clopidogrel, in patients with acute coronary syndrome after PCI in long-term follow-up.

GW23-e1475

LONG-TERM FOLLOW-UP OBSERVATION OF DOMESTIC BISULPHATE CLOPIDOGREL AFTER PCI IN ACUTE CORONARY SYNDROME

doi:10.1136/heartjnl-2012-302920l.49

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Objectives To observe the efficacy and safety of domestic clopidogrel after PCI in acute coronary syndrome.

Methods From July 2003 to March 2007, totally 352 patients with acute coronary syndrome (ACS), which were underwent PCI successfully in our hospital, were given dual antiplatelet therapy such as aspirin and domestic bisulphate clopidogrel (75 mg/d, trade name Taijia, Shenzhen Salubris Pharmaceutical Co., Ltd. production) before and after surgery. Clopidogrel was used at least 1 year