Conclusions QT/RR slope of DCM sudden death group was higher than DCM non sudden death and Con group significantly. QT/RR slope show high predicting value for sudden death in DCM patients independently or combined with NSVT or LVEF.

**e0336** EFFECT OF TAURINE ON VASCULAR SMOOTH MUSCLE CELLS APOPTOSIS IN ATHEROSCLEROTIC RABBITS

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Objective To study the effect of taurine on the apoptosis of vascular smooth muscle cells in atherosclerotic model of rabbits and the mechanism of anti-atherosclerosis.

Methods 21 male Japanese white rabbits were divided into three groups: normol control group, high cholesterol group and taurine group. The normal control group were fed with standard chow diet and two other groups with a high fat diet. The taurine group were fed with taurine solution once a day; two other groups were given normal saline gastric feeding. Twelve weeks later the modelling was determined successful, all rabbits were killed with air embolism method and exposed the heart, isolated and cut aorta from aortic valve to the bifurcation of abdominal aorta blood vessel. Observing the pathomorphological changes in aorta wall and ultra-structures of VSMCs were observed by electronic microscopy, the apoptotic rate of VSMCs detected by electronic microscopy, the apoptotic rate of VSMCs detected by Western blot.

Results The aortic intima of normal control group was smooth, no plaque formation; the high cholesterol group was uneven and rough, there were many needle-like white mastoid processes, some fused into pieces; the above-mentioned diseases of the taurine group were less and not typical.

Conclusions Taurine can prevent the formation of atherosclerosis and inhibit the apoptosis of VSMCs in the atherosclerotic plaque by regulating the bcl-2, bad and caspase-3 proteins.

**e0337** MALLEOLUS ARM INDEX CLINICAL PRACTICE ANALYSIS

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Objective To evaluate ABI abnormalities and associated risk fators, we measured ankle brachial index (ABI) of cardiovascular- event high-risk patients. The first step enquires the cardiovascular-event high-risk to win high limit of the ABI abnormality.

Methods We measured the ABI of 775 cases of hospitalised cardiovascular-event high-risk patients. ABI<0.9 and ABI>1.3 are defined as abnormal. Collected data and process statistics analysis to investigate the independent risk factors of ABI.

Results The incidence of abnormal ABI is 54%. Among them ABI<0.9 have 12.4%, independent risk factors to predict ABI abnormalities are: sex, age, diabetes, creatinine abnormalities, mellitus, hypertension, high cholesterol, high smoking. In cardiovascular-event high-risk ABI<0.9 and ABI>1.3 all show obvious difference. The ABI no show obvious difference in difference clan.

Conclusions Patients with cardiovascular-event high-risk ABI<0.9 and ABI>1.3 are abnormal. ABI abnormalities are particularly prevalent in the old, smokers and patients with hypertension, diabetes or dyslipidemia. The difference of ABI between each clan did not show statistics to learn the difference.