RISK FACTOR OF NON-VALVULA ATRIAL FIBRILLATION COMBINING WITH THROMBOSIS

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Objectives It has been reported that brain natriuretic peptide (BNP) levels and C-reactive protein (CRP) levels are elevated in patients with atrial fibrillation (AF). The aim of this study is to investigate alteration of plasma BNP and CRP count in patients with non-valvula atrial fibrillation combining thrombus. In patients with non-valvula atrial fibrillation combining thrombus.

Methods 154 patients with AF (with thrombus 46, non-thrombus 108) were detected the concentration of CRP, BNP in scatt turbidimetry and D-dimer in immunoturbidimetry. They were examined transesophageal echocardiography (TEE) and echocardiography (LAd, FS, LVEF).

Results In aspect of BNP, CRP, LAd and LVEF, the patients in thrombus are significant difference with patients in non-thrombus, respectively: BNP (1168.39±1013.89 pg/ml vs 347.75±429.24 pg/ml p<0.001) CRP (5.77±6.37 mg/l vs 1.73±2.39 mg/L P=0.003), LAd (59.86±10.70 mm vs 47.97±13.19 mm p<0.001), LVEF (58.75±8.28% vs 64.10±6.75% p<0.001). The results of Logistic regression analysis: BNP≥400 pg/ml (OR 3.260 95% CI 1.397 to 7.608 p=0.006), CRP≥1.3 mg/l (OR 2.615 95% CI 1.141 to 5.992 p=0.023) are independent risk factors of patients with non-valvula atrial fibrillation combining with thrombosis.

Conclusions CRP and BNP are independent risk factors of patients with non-valvula atrial fibrillation combining with thrombosis.