

**Methods** The levels of serum cardiac troponin I (cTnI) of 174 patients with chronic heart failure (CHF) were detected. The patients were divided into two groups: cTnI -positive group with serum cTnI  $\geq 0.16$  ng/ml (n=78) and cTnI-negative group with serum cTnI  $< 0.16$  ng/ml (n=96). Ventricular arrhythmia was assessed by 24 h Holter monitoring in two groups. The incidence of adverse cardiac events, re-hospitalisation mortality during the period of in-hospital and the 6 months of out-of-hospital were observed and followed up.

**Results** Mean hourly number of single ventricular premature beats, Mean hourly ventricular pairs, and the frequency of ventricular tachycardia episodes per 24 h in cTnI-positive group were significantly higher than those in cTnI-negative group (all  $p < 0.01$ ); during the period of observation and follow-up, the incidence of adverse cardiac events, re-hospitalisation and mortality of patients in cTnI-positive group were significantly higher than those in cTnI-negative group (all  $p < 0.05$ ).

**Conclusions** Serum cTnI levels correlated with ventricular arrhythmia and late prognosis, which could be used as a prognosis predicting for patients with CHF.

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**CORRELATION OF CARDIAC TROPONIN I WITH VENTRICULAR ARRHYTHMIA AND LATE PROGNOSIS IN THE PATIENTS WITH CHRONIC HEART FAILURE**

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**Objectives** TO investigate correlation of cardiac troponin I (cTnI) with ventricular arrhythmia and late prognosis in the patients with chronic heart failure (CHF).