**Results**  Compared with the control group, the recurrence rate of cardiac angina was significantly reduced in the treatment group (p<0.05). Clinical symptoms and the depression of ST segment in electrocardiograph were improved apparently (p<0.05), and there was little influence on the index of blood clotting (p>0.05).

**Conclusions** The treatment of clopidogrel combined with the traditional anticoagulant drugs would be more effective and safe to NSTEMI.

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**Community-based management of cardiovascular disease**

**THE VALUE OF CLOPIDOGREL TO ACUTE NON-ST ELEVATION MYOCARDIAL INFARCTION**

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**Objectives** To observe and evaluate the clinical efficacy and safety of clopidogrel on acute non-ST-elevation myocardial infarction (NSTEMI).

**Methods** 30 patients with acute NSTEMI in the control group were treated with Low Molecular Heparin, Aspirin and other anti-anginal drugs. Another 30 patients with acute NSTEMI were treated with Low Molecular Heparin, Aspirin combined with Clopidogrel, which the initial dose is 300 mg and followed 75 mg/d for 2 weeks in treatment group.