five age-gender matched control subjects without ELC were enrolled into this study. All subjects' EAT thickness and CIMT were measured ultrasonographically. Both groups are compared according to the EAT and CIMT.

Results: Demographical, biochemical and clinical characteristics of ELC and normal group is given in table 1. Mean EAT thickness of ELC group was significantly higher than the control group (0,57±0,12 versus 035±0,05, respectively, p<0,0001) and also CIMT is significantly higher in ELC group than normal group. (0,85±0,16 versus 0,60±0,15, respectively, p<0,0001) (Table 2). Multivariate logistic regression analysis showed that presence of ELC was indepedently associated with CIMT and EAT thickness.

Conclusion: We have shown for the first time that a significant and independent association between presence of ELC and increased EAT thickness and CIMT in subjects free of clinical cardiovascular disease

Table-1. Demographical, biochemical and clinical characteristics of ELC and normal groups

Parameter	ELC	Normal	p value
Age (year)	57.9	56.2	0.20
Gender (male)	64.6	67.7	0,71
Hypertension (%)	38.5	36.5	0.85
Diabetes mellitus (%)	9.2	6.2	0.74
Smoking (%)	24.6	20.0	0.67
Family history (%)	18.5	20.0	0.82
Body mass index (kg/m²)	27.7	28.2	0.56
LDL (mg/dl)	120.5	113.7	0.17
HDL (mg/dl)	43.1	44.6	0.31
Triglyceride (mg/dl)	149.6	155.6	0.61
Fasting blood glucose (mg/dl)	101.6	97.4	0.52

Table-2. Comparison of EAT thickness and CIMT between ELC and normal groups

Parameters	ELC	Normal	P value
EAT thickness (mm)	0.57±0.12	35.0±0.05	0.0001
CIMT (mm)	0.85±0.16	0.60±0.15	0.0001

PP-344

Red Eye and Red Face Following Defibrilation

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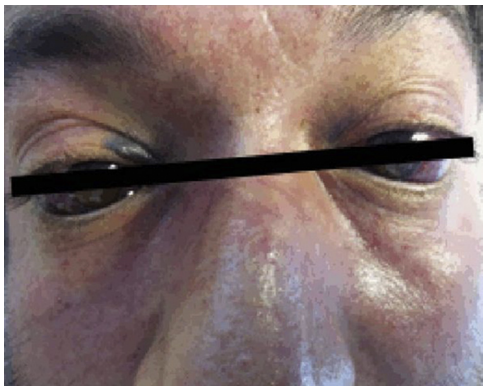
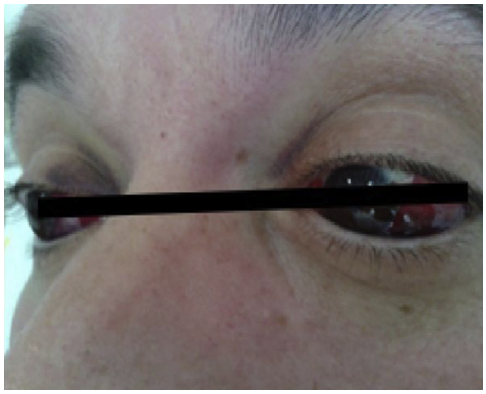
We present here the case of a 45 -year-old man that developed subconjunctival hemorrhage and facial petechiae after defibrilation. The most likely explanation of this condition is the increase of intrathoracic or abdominal pressure due to mechanical factors or a valsalva maneuver which lead the rupture of capillaries in the skin and conjunctiva. Cardiologist should therefore be aware of this rare and reversible complication





PP-345

Patients who have 4G Alleles in Plasminogen Activator Inhibitor1 Gene Have Higher Mean Platelet Volume Values at the Time of ST-Elevation Myocardial Infarction

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Aım: Mean platelet volume (MPV) is an indicator of platelet activation. High MPV values have been found to be associated with adverse outcomes in patients with acute coronary syndromes (ACS) and ST-elevation myocardial infarction (STEMI). Presence of 4G alleles in the promoter region of platelet activator inhibitor1 (PAI-1) gene has been found to be associated with increased thrombotic events. The aim of our study is to investigate the association between MPV and PAI-1 genotype in patients presenting with acute STEMI.

Methods: Patients presenting with acute STEMI undergoing primary percutaneous coronary intervention had been included in our study. Mean platelet volume values were studied from blood samples obtained from patients on admission, before initiation of any medical and/or interventional therapy. PAI-1 gene was studied in blood samples obtained from peripheric venous system. Patients were grouped according to their PAI-1 genotype. Comparison of MPV values between groups was made by one-way analysis of variance (ANOVA) test.

Results: A total of 189 patients (43 in 4G/4G, 91 in 4G/5G and 55 in 5G/5G groups) were included in our study. Mean ages and distribution of risk factors were similar between 3 groups. Mean platelet volume values were significantly lower in patients with PAI-1 5G/5G group (5G/5G group: 9.57±1.40 fL, 4G/5G group: 10.33±1.52 fL, 4G/4G group: 10.45±1.13 fL; p=0.002). Platelet counts were similar in three groups (p=0.486).

Conclusion: Mean platelet volume values seem to be higher in patients with acute STEMI having 4G alleles in the promoter region of PAI-1 gene. There is a predisposition to thrombosis in patients with these genotypes, which may lead to extra activation of platelets. On the other hand, these findings may be coincidental. Further, prospective, well-planned studies are required for more precise results.

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