

CORRECTIONS

Kusumoto FM, Bailey KR, Chaouki AS, et al.

Systematic review for the 2017 AHA/ACC/HRS guideline for management of patients with ventricular arrhythmias and the prevention of sudden cardiac death: a report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines and the Heart Rhythm Society



J Am Coll Cardiol 2018;72:1653-76.

1. On page 1657, in the left column, second paragraph, fifth sentence, the *P* value has been updated to “*P*=0.20.”
2. On page 1662, in the final paragraph of the section titled “Selection and Characteristics of Studies,” “Foundations” has been updated to “Foundation.”
3. On page 1663, in the left column, fourth paragraph, last sentence, “CI” has been added after “95%.” The updated text reads, “(95% CI: 0.37 to 0.78).”
4. On page 1675, in the title of Appendix 1, an asterisk has been added after “Entities.” The updated title reads, “Appendix 1. Evidence Review Committee Relationships With Industry and Other Entities* (Relevant)—Systematic Review for the 2017 AHA/ACC/HRS Guideline for Management of Patients With Ventricular Arrhythmias and the Prevention of Sudden Cardiac Death (October 2017).”

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Al-Khatib SM, Stevenson WG, Ackerman MJ, et al.

2017 AHA/ACC/HRS Guideline for Management of Patients With Ventricular Arrhythmias and the Prevention of Sudden Cardiac Death: Executive Summary: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines and the Heart Rhythm Society



J Am Coll Cardiol 2018;72:1677-749.

1. On page 1683, in the right column, a new paragraph has been added at the end of section 1.4., Scope of the Guideline. It reads, “During final production review of the guidelines, several recommendations were refined to better reflect the data and current recommended medical practice. These refinements were reviewed and approved by the writing committee, the Task Force, and ACC, AHA, and HRS organizational leadership. These recommendations were:
 - Section 6.1.1., recommendation 1
 - Section 6.1.3., recommendation 2
 - Section 6.2.1., recommendation 1
 - Section 6.9.1.4., recommendation 2
 - Section 9.4., recommendation 6Readers should refer to these sections for the updated text.”
2. On page 1693, in Table 7, in the entry for “Diltiazem [IV]”, first column, third line, “Qq” has been updated to “qd:”.
3. On page 1698, under the heading “6.1.1. Secondary Prevention of SCD in Patients With Ischemic Heart Disease,” in recommendation 1, “stable VT” has been updated to “stable sustained VT.” The updated recommendation reads, “1. In patients with ischemic heart disease, who either survive SCA due to VT/VF or experience hemodynamically unstable VT (LOE: B-R) (S6.1.1-1–S6.1.1-4) or stable sustained VT (LOE: B-NR) (S6.1.1-5)...”

4. On page 1700, under the heading “6.1.3. Treatment and Prevention of Recurrent VA in Patients With Ischemic Heart Disease,” in recommendation 2, “VT or VF storm” has been updated to “VT storm.” The updated recommendation reads, “2. In patients with prior MI and recurrent episodes of symptomatic sustained VT, or who present with VT storm....”
5. On page 1702, under the heading “6.2.1. Secondary Prevention of SCD in Patients With NICM,” in recommendation 1, “stable VT” has been updated to “stable sustained VT.” The updated recommendation reads, “1. In patients with NICM who either survive SCA due to VT/VF or experience hemodynamically unstable VT (LOE: B-R) (S6.2.1-1–S6.2.1-4) or stable sustained VT (LOE: B-NR) (S6.2.1-5)....”
6. On page 1706, in Table 8, several changes have been made:
 - The section prefix “S6.4-” has been added to the references (eg, reference 1 is now reference S6.4-1).
 - The following references have been renumbered:
 - Reference 54 is now reference S6.4-40.
 - Reference 40 is now reference S6.4-41.
 - Reference 55 is now reference S6.4-42.
 - Reference 56 is now reference S6.4-43.
 - Reference 52 is now reference S6.4-44.
7. On page 1707, under the heading “6.6. Cardiac Sarcoidosis,” in recommendation 2, a comma has been added after “permanent pacing.” The updated recommendation reads, “2. In patients with cardiac sarcoidosis and LVEF greater than 35% who have...an indication for permanent pacing, implantation of an ICD is reasonable....”
8. On page 1709, under the heading “6.8. Neuromuscular Disorders,” in recommendation 2, “a meaningful survival” has been updated to “meaningful survival.” The updated recommendation reads, “...an ICD is reasonable if meaningful survival of greater than 1 year is expected (S6.8-3–S6.8-8).”
9. On page 1713, under the heading “6.9.1.3. Brugada Syndrome,” in recommendation 2, “a meaningful survival” has been updated to “meaningful survival.” The updated recommendation reads, “...an ICD is recommended if meaningful survival of greater than 1 year is expected (S6.9.1.3-4,S6.9.1.3-6).”
10. On page 1715, under the heading “6.9.1.4. Early Repolarization ‘J-wave’ Syndrome,” in recommendation 2, the following text has been added: “if meaningful survival greater than 1 year is expected.” The updated recommendation reads, “...an ICD is recommended if meaningful survival greater than 1 year is expected (S6.9.1.4-3,S6.9.1.4-4).”
11. On page 1719, under the heading “9.4. Adult Congenital Heart Disease,” in recommendation 6, the following text has been added: “if meaningful survival greater than 1 year is expected.” The updated recommendation reads, “...implantation of an ICD is reasonable if meaningful survival greater than 1 year is expected (S9.4-1,S9.4-19,S9.4-20).”
12. On page 1720, in Table 11, several changes have been made:
 - The section prefix “S9.4-” has been added to the references (eg, reference 1 is now reference S9.4-1).
 - The following references have been renumbered:
 - Reference 44 is now reference S9.4-33
 - Reference 47 is now reference S9.4-34
 - Reference 57 is now reference S9.4-35
 - Reference 58 is now reference S9.4-36
 - Reference 59 is now reference S9.4-37
 - Reference 60 is now reference S9.4-38
 - Reference 61 is now reference S9.4-39
 - Reference 62 is now reference S9.4-40
 - Reference 63 is now reference S9.4-41
 - Reference 34 is now reference S9.4-42
 - Reference 36 is now reference S9.4-43
 - Reference 46 is now reference S9.4-44
 - Reference 54 is now reference S9.4-45
 - Reference 55 is now reference S9.4-46
 - Reference 56 is now reference S9.4-47
 - Reference 62 is now reference S9.4-48
 - Reference 63 is now reference S9.4-49

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