Erratum

In the article “Usefulness of LDL-C-Related Parameters to Predict Cardiovascular Risk and Effect of Pravastatin in Mild-to-Moderate Hypercholesterolemia” by Kyoichi Mizuno, et al., which appeared in JAT 2012, 19: 176-185, are incorrect. Results on page 1 in abstract is corrected as below:

False

Results: Significantly graded correlations were found between CVD and LDL-C/HDL-C and non-HDL-C. Significantly more CVD events were associated with LDL-C/HDL-C > 186 mg/dL and LDL-C/HDL-C > 2.9. Furthermore, LDL-C/HDL-C or non-HDL-C was more predictive than LDL-C. By measuring LDL-C/HDL-C or non-HDL-C, we allocated 32% of the diet plus pravastatin group into a different risk category. The lowest significant incidence of CVD was found in patients with LDL-C 119.8-133.4 mg/dL, LDL-C/HDL-C <1.9, and non-HDL-C 145.2-160.8 mg/dL.

Correct

Results: Significantly graded correlations were found between CVD and LDL-C/HDL-C and non-HDL-C. Significantly more CVD events were associated with non-HDL-C > 186 mg/dL and LDL-C/HDL-C > 2.9. Furthermore, LDL-C/HDL-C or non-HDL-C was more predictive than LDL-C. By measuring LDL-C/HDL-C or non-HDL-C, we allocated 32% of the diet plus pravastatin group into a different risk category. The lowest significant incidence of CVD was found in patients with LDL-C 119.8-133.4 mg/dL, LDL-C/HDL-C <1.9, and non-HDL-C 145.2-160.8 mg/dL.