

In this article ‘Development of a Cardiovascular Disease Risk Prediction Model Using the Suita Study, a Population-Based Prospective Cohort Study in Japan’ by Michikazu Nakai *et al.*, which appeared in J Atheroscler Thromb, 2020; 27: 1160-1175, a term on page 1162 has been found to be incorrect.

## Development of a Cardiovascular Disease Risk Prediction Model Using the Suita Study, a Population-Based Prospective Cohort Study in Japan

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(on page 1162)

### Incorrect

Since CVD risk increases with age, categories for age were based on 10-year intervals up to age 60 years and 5-year intervals thereafter. Diabetes mellitus (DM) is defined as having a fasting blood glucose level of  $\geq 126$  mg/dL, currently using anti-diabetic medication, or both. Cigarette smoking was dichotomized as current versus other. Low-density lipoprotein cholesterol (LDL-C) was calculated using the Friedewald equation<sup>27</sup>. Non-HDL-C was calculated by subtracting HDL-C from **TG**. If the TG level was greater than 400 mg/dL, we set the value as missing ( $n=96$ ).

### Correct

Since CVD risk increases with age, categories for age were based on 10-year intervals up to age 60 years and 5-year intervals thereafter. Diabetes mellitus (DM) is defined as having a fasting blood glucose level of  $\geq 126$  mg/dL, currently using anti-diabetic medication, or both. Cigarette smoking was dichotomized as current versus other. Low-density lipoprotein cholesterol (LDL-C) was calculated using the Friedewald equation<sup>27</sup>. Non-HDL-C was calculated by subtracting HDL-C from **TC**. If the TG level was greater than 400 mg/dL, we set the value as missing ( $n=96$ ).