Correction to
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Correction to: Post-discharge prognosis of patients admitted to hospital for heart failure by world region, and national level of income and income disparity (REPORT-HF): a cohort study

The international registry to assess medical practice with longitudinal observation for treatment of heart failure (REPORT-HF) cohort was designed to assess international variations in clinical practice patterns and outcomes for patients with acute heart failure. We reported on differences in 1-year all-cause mortality according to geographic region, country income classification, and country level income inequality (Gini index). We identified an error in the dataset, which affected some of the variables reported. The overall distribution of the LVEF categories in the entire cohort and between geographical and income regions remained similar, heart failure cause was corrected in table 2.

After correct classification and adding patients based on semi-quantitative values, the primary conclusion that patients with acute heart failure from low income countries had worse mortality (hazard ratio [HR] 1·58; 95% CI 1·41–1·77) remained. Regional differences in outcome remained similar, where patients from southeast Asia (2·04, 1·74–2·38), central and south America (1·70, 1·48–1·95), and eastern Mediterranean and Africa (1·77, 1·53–2·04) had the worst 1-year all-cause mortality. The interaction between Gini coefficient and income class remained significant in multivariable analyses (pinteraction <0·001). Patients with HFmrEF (0·83, 0·74–0·92) and HFP EF (0·67, 0·61–0·74) still had better 1-year mortality rates than patients with HFrEF. The interaction between heart failure status (HFrEF vs HFP EF) and country income level remained significant (pinteraction <0·001), as previously reported.

The updated Article and online material with tracked changes showing the effects of correctly classifying the misclassified patients and adding patients based on their semi-quantitative measurements are added to this letter as an appendix. We declare no competing interests. GF and SPC contributed equally.

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