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2019 ESC/EAS Guidelines for the management of dyslipidaemias: lipid modification to reduce cardiovascular risk (vol 290, pg 140, 2019)

Mach, F.; Baigent, C.; Catapano, A.L.; Koskinas, K.C.; Casula, M.; Badimon, L.; ... ; ESC Comm Practice Guidelines CPG

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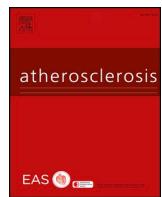
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Corrigendum

Corrigendum to “2019 ESC/EAS Guidelines for the management of dyslipidaemias: lipid modification to reduce cardiovascular risk” [Atherosclerosis 290 (2019) 140–205]



Task Force Members (Francois Mach^{a,*²}, Colin Baigent^{b,**²}, Alberico L. Catapano^{c,***^{1,2}}, Konstantinos C. Koskinas^d, Manuela Casula^{e,f¹}, Lina Badimon^g, M. John Chapman^{h,i,c,m,¹}, Guy G. De Backer^j, Victoria Delgado^k, Brian A. Ference^l, Ian M. Graham^m, Alison Hallidayⁿ, Ulf Landmesser^{o,p,q}, Borislava Mihaylova^{r,s}, Terje R. Pedersen^t, Gabriele Riccardi^{u,¹}, Dimitrios J. Richter^v, Marc S. Sabatine^w, Marja-Riitta Taskinen^{x,¹}, Lale Tokgozoglu^{y,¹}, Olov Wiklund^z), ESC National Cardiac Societies (Djamaeddine Nibouche^{an}, Parounak H. Zelveian^{ao}, Peter Siostrzonek^{ap}, Ruslan Najafov^{aq}, Philippe van de Borne^{ar}, Belma Pojskic^{as}, Arman Postadzhiyan^{at}, Lambros Kypris^{au}, Jindrich Spinar^{av}, Mogens Lytken Larsen^{aw}, Hesham Salah Eldin^{ax}, Margus Viigimaa^{ay}, Timo E. Strandberg^{az}, Jean Ferrieres^{ba}, Rusudan Agladze^{bb}, Ulrich Laufs^{bc}, Loukianos Rallidis^{bd}, Laszlo Bajnok^{be}, Thorbjorn Gudjonsson^{bf}, Vincent Maher^{bg}, Yaakov Henkin^{bh}, Michele Massimo Gulizia^{bi}, Aisulu Mussagaliyeva^{bj}, Gani Bajraktari^{bk}, Alina Kerimkulova^{bl}, Gustavs Latkovskis^{bm}, Omar Hamoui^{bn}, Rimvydas Slapikas^{bo}, Laurent Visser^{bp}, Philip Dingli^{bq}, Victoria Ivanov^{br}, Aneta Boskovic^{bs}, Mbarek Nazzi^{bt}, Frank Visseren^{bu}, Irena Mitevska^{bv}, Kjetil Retterstol^{bw}, Piotr Jankowski^{bx}, Ricardo Fontes-Carvalho^{by}, Dan Gaita^{bz}, Marat Ezhov^{ca}, Marina Foscoli^{cb}, Vojislav Giga^{cc}, Daniel Pella^{cd}, Zlatko Fras^{ce}, Leopoldo Perez de Isla^{cf}, Emil Hagstrom^{cg}, Roger Lehmann^{ch}, Leila Abid^{ci}, Oner Ozdogan^{cj}, Olena Mitchenko^{ck}, Riyaz S. Patel^{cl}), ESC Committee for Practice Guidelines (CPG) (Stephan Windecker^{aa}, Victor Aboyans^{ab}, Colin Baigent^{ac}, Jean-Philippe Collet^{ab}, Veronica Dean^{ab}, Victoria Delgado^{ad}, Donna Fitzsimons^{ac}, Chris P. Gale^{ac}, Diederick Grobbee^{ad}, Sigrun Halvorsen^{ae}, Gerhard Hindricks^{af}, Bernard Jung^{ab}, Peter Juni^{ag}, Hugo A. Katus^{af}, Ulf Landmesser^{af}, Christophe Leclercq^{ab}, Maddalena Lettino^{ah}, Basil S. Lewis^{ai}, Bela Merkely^{aj}, Christian Mueller^{aa}, Steffen Petersen^{ac}, Anna Sonia Petronio^{ah}, Dimitrios J. Richter^{ak}, Marco Roffi^{aa}, Evgeny Shlyakhto^{al}, Iain A. Simpson^{ac}, Miguel Sousa-Uva^{am}, Rhian M. Touyz^{ac})

^a Cardiology Department, Geneva University Hospital, 4 Gabrielle-Perret-Gentil, 1211, Geneva, Switzerland

^b Nuffield Department of Population Health, University of Oxford, Richard Doll Building, Roosevelt Drive, Oxford, OX3 7LF, United Kingdom

^c Department of Pharmacological and Biomolecular Sciences, University of Milan, Multimedica IRCCS, Via Balzaretti, 9, 20133, Milan, Italy

^d Cardiology, Bern University Hospital (Inselspital), Bern, Switzerland

^e Epidemiology and Preventive Pharmacology Service (SEFAP), Department of Pharmacological and Biomolecular Sciences (DiSFeB), University of Milan, Milan, Italy

^f IRCCS MultiMedica, Sesto S. Giovanni, Milan, Italy

^g Cardiovascular Program-ICCC and CiberCV, IR-Hospital de la Santa Creu i Sant Pau, Barcelona, Spain

^h National Institute for Health and Medical Research (INSERM), Sorbonne University, Paris, France

ⁱ Division of Endocrinology- Metabolism, Pitie-Salpetriere University Hospital, Paris, France

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* Corresponding author.

** Corresponding author.

*** Corresponding author.

¹ Representing the EAS.

² The three chairpersons contributed equally to the document.

E-mail addresses: francois.mach@hcuge.ch (F. Mach), colin.baigent@ndph.ox.ac.uk (C. Baigent), alberico.catapano@unimi.it (A.L. Catapano).

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- ^j Public Health and Primary Care, Faculty of Medicine and Health Sciences, Ghent University, Ghent, Belgium
^k Cardiology, Leiden University Medical Center, Leiden, Netherlands
^l Centre for Naturally Randomized Trials, Department of Public Health and Primary Care, University of Cambridge, Cambridge, United Kingdom
^m Cardiology, Trinity College, Dublin, Ireland
ⁿ Nuffield Department of Surgery, University of Oxford, NIHR Oxford Biomedical Research Centre, Oxford, United Kingdom
^o Department of Cardiology, Charite Universitätsmedizin Berlin, Berlin, Germany
^p Berlin Institute of Health (BIH), Berlin, Germany
^q German Center of Cardiovascular Research (DZHK), Berlin, Germany
^r Nuffield Department of Population Health and NIHR Oxford Biomedical Research Centre, University of Oxford, Oxford, United Kingdom
^s Barts and the London School of Medicine and Dentistry, Queen Mary University of London, London, United Kingdom
^t Preventive Cardiology, Oslo University Hospital, Aker, Oslo, Norway
^u Clinical Medicine and Surgery, Federico II University, Naples, Italy
^v Cardiac Department, Euroclinic, Athens, Greece
^w TIMI Study Group, Division of Cardiovascular Medicine, Brigham and Women's Hospital and Harvard Medical School, Boston, MA, USA
^x Research Program for Clinical and Molecular Metabolism, University of Helsinki, Helsinki, Finland
^y Cardiology, Hacettepe University, Ankara, Turkey
^z Institute of Medicine, The Sahlgrenska Academy at University of Gothenburg, Gothenburg, Sweden
^{aa} Algerian Society of Cardiology, Algeria
^{ab} Armenian Cardiologists Association, Armenia
^{ac} Austrian Society of Cardiology, Austria
^{ad} Azerbaijan Society of Cardiology, Azerbaijan
^{ar} Belgian Society of Cardiology, Belgium
as Association of Cardiologists of Bosnia and Herzegovina, Bosnia and Herzegovina
at Bulgarian Society of Cardiology, Bulgaria
^{au} Cyprus Society of Cardiology, Cyprus
^{av} Czech Society of Cardiology, Czech Republic
^{aw} Danish Society of Cardiology, Denmark
^{ax} Egyptian Society of Cardiology, Egypt
^{ay} Estonian Society of Cardiology, Estonia
^{az} Finnish Cardiac Society, Finland
^{ba} French Society of Cardiology, France
^{bt} Georgian Society of Cardiology, Georgia
^{bc} German Cardiac Society, Germany
^{bd} Hellenic Society of Cardiology, Greece
^{be} Hungarian Society of Cardiology, Hungary
^{bf} Icelandic Society of Cardiology, Iceland
^{bg} Irish Cardiac Society, Ireland
^{bh} Israel Heart Society, Israel
^{bi} Italian Federation of Cardiology, Italy
^{bj} Association of Cardiologists of Kazakhstan, Kazakhstan
^{bk} Kosovo Society of Cardiology, Republic of Kosovo
^{bl} Kyrgyz Society of Cardiology, Kyrgyzstan
^{bm} Latvian Society of Cardiology, Latvia
^{bn} Lebanese Society of Cardiology, Lebanon
^{bo} Lithuanian Society of Cardiology, Lithuania
^{bp} Luxembourg Society of Cardiology, Luxembourg
^{br} Maltese Cardiac Society, Malta
^{br} Moldavian Society of Cardiology, Republic of Moldova
^{bs} Montenegro Society of Cardiology, Montenegro
^{bt} Moroccan Society of Cardiology, Morocco
^{bu} Netherlands Society of Cardiology, Netherlands
^{bv} North Macedonian Society of Cardiology, North Macedonia
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^{bz} Romanian Society of Cardiology, Romania
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^{ch} Swiss Society of Cardiology, Switzerland
^{ci} Tunisian Society of Cardiology and Cardio-Vascular Surgery, Tunisia
^{cj} Turkish Society of Cardiology, Turkey
^{ck} Ukrainian Association of Cardiology, Ukraine
^{cl} British Cardiovascular Society, United Kingdom of Great Britain and Northern Ireland
^{aa} Switzerland
^{ab} France
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^{ad} Netherlands
^{ae} Norway
^{af} Germany

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^{ai} Israel
^{aj} Hungary
^{ak} Greece
^{al} Russian Federation
^{am} Portugal

In row 4 of Table 3, ‘should’ should read as ‘may’;

In 4.2.1, paragraph 3, ‘should’ should read ‘may’ to read ‘Overall, CAC score assessment with CT may be considered in individuals ...’ Also in the second row of ‘Recommendations for cardiovascular imaging for risk assessment of atherosclerotic cardiovascular disease,’ the Class should read ‘1lb’;

In the second paragraph of 7.5.2, ‘5–10 mg of monacolin K’ should read ‘2.5–10 mg’; and in the Key messages section, number 4, ‘ApoB may be a better measure of an individual’s exposure to atherosclerotic lipoproteins’ should read ‘ApoB may be a better measure of an individual’s exposure to pro atherogenic lipoproteins’.