CORRIGENDUM

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Corrigendum to "Do Mortality Risk Scores Predict The Severity Of Coronary Artery Disease In Patients With Myocardial Infarction With St Elevation?"

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The following is the statement provided by the corresponding author:

We identified an error in the published article, which we had overlooked and noticed upon reviewing the article again. We would like to correct Table 2, in which the patient numbers were inadvertently grouped incorrectly. The table was created to show the baseline demographic data comparing the total patient group and the high-risk and low-risk patient groups. However, the patient numbers were inadvertently grouped incorrectly in this table, which was created after the analysis of the study was completed in order to show the groups separately as high-risk and low-risk. The table showing the main results of the study and the statistical analyses (ROC analysis) were performed using the correct patient groups from the correct dataset, with the correct patient numbers and percentages. This inadvertent error occurred because Table 2 was created later. We would like to state that this correction does not affect or change the basic methodology, findings, or scientific results of the study.

The corrections are as follows:

Incorrect:

- Table 2, columns 3 and 4: the headings "SYNTAX 0-22 (n = 181)" and "SYNTAX ≥ 23 (n = 112)" and the values given in these two columns
- Abstract: "The number of patients with high SS was 112 (%38.2)."
- Results section: "38.2% of the patients had a high SYNTAX score."

Correct:

- Table 2, columns 3 and 4: the headings "SYNTAX 0-22 (n = 186)" and "SYNTAX ≥ 23 (n = 107)" and the corresponding values, as shown in the corrected table below
- Abstract: "The number of patients with high SS was 107 (%36.5)."
- Results section: "36.5% of the patients had a high SYNTAX score."

The Editors of the *Eastern Journal of Medicine* apologize for any inconvenience caused. The original article remains unchanged and should be read together with this corrigendum.

Table 2: Baseline Demographic and Laboratory Characteristics of the Patients

Variable	TOTAL PATIENTS (n = 293)	SYNTAX 0-22 (n = 186)	SYNTAX ≥ 23 (n = 107)
Age (year)	61.6 ± 12.6	59.6 ± 12.3	65.1 ± 12.5
Gender (Male, %)	235 (%80.2)	154 (82.8)	81 (75.7)
SBP (mmHg)	119.6 ± 18.7	120.4 ± 17.9	118.3 ± 20.1
HR (bpm)	80 ± 18	78.1 ± 17.5	83.3 ± 18.6
HT (number, %)	89 (%30.4)	49 (26.3)	40 (37.4)
DM (number, %)	69 (%23.5)	39 (21)	30 (28)
CAD (number, %)	56 (%19.1)	37 (19.9)	19 (17.8)
CVD (number, %)	29 (%9.9)	14 (7.5)	15 (14)
COPD (number, %)	6 (%2)	3 (1.6)	3 (2.8)
AF (number, %)	7 (%2.4)	4 (2.2)	3 (2.8)
Cardiac arrest (number, %)	27 (%9.2)	13 (7)	14 (13.1)
Killip Classification (n, %)			
1	230 (%78.5)	156 (83.9)	74 (69.2)
2	51 (%17.4)	26 (14)	25 (23.4)
3	3 (%1)	0 (0)	3 (2.8)
4	9 (3.1)	4 (2.2)	5 (4.7)
EF (%)	42.3 ± 8.6	44.1 ± 8.2	39.2 ± 8.5
Post TIMI Flow (number, %)	28 (%9.6)	16 (8.6)	12 (11.2)
0	1 (%0.3)	0 (0)	1 (0.9)
1	5 (%1.7)	1 (2.3)	4 (3.7)
2	259 (%88.4)	169 (90.9)	90 (84.1)
3			
Hb (g/dl)	14.4 ± 2.2	14.4 ± 2.2	14.2 ± 2.4
Glu (mg/dl)	155.1 ± 95.2	145.7 ± 77.2	171.5 ± 119
Cre (mg/dl)	1.07 ± 0.82	1.06 ± 0.87	1.08 ± 0.72
TC (mg/dl)	201.3 ± 58.7	202.3 ± 51	199.5 ± 70.3
LDL (mg/dl)	133.9 ± 39.4	135.4 ± 37.2	131.3 ± 43.3
HDL (mg/dl)	42.2 ± 10	42.5 ± 9.2	41.7 ± 11.3
TG (mg/dl)	152.3 ± 125.7	162.2 ± 140.4	135.1 ± 92.9
Troponin (pg/ml)	19.3 ± 22.7	16.9 ± 20.4	23.4 ± 25.9
GRACE	123 ± 35.25	116.8 ± 34	133.7 ± 34.9
TIMI	3.77 ± 2.69	3.26 ± 2.64	4.67 ± 2.55
PAMI	3.82 ± 3.34	3.1 ± 3.16	5.08 ± 3.28
ZWOLLE	3.27 ± 3.03	2.58 ± 2.79	4.47 ± 3.08
CADILLAC	5.11 ± 3.90	4.13 ± 3.65	6.81 ± 3.75
SYNTAX	20.1 ± 11.78	12.9 ± 5.87	32.5 ± 8.73

Abbreviations: SBP: Systolic Blood Pressure, HR: Heart Rate, bpm: bpm: beats per min, HT: hypertension, DM: diabetes mellitus, CAD: coronary artery disease, CVD: Cerebrovascular disease, COPD: chronic obstructive pulmonary disease, AF: atrial fibrillation, EF: Ejection Fraction, Hb: hemoglobin, Glu: Glucose, Cre: Creatinine, TC: Total Cholesterol, LDL: Low-density lipoprotein, HDL: High-density lipoprotein, TG: Triglyceride, GRACE: Global Registry for Acute Coronary Events, TIMI: Thrombolysis In Myocardial Infarction, PAMI: Primary Angioplasty in Myocardial Infarction, CADILLAC: Controlled Abciximab and Device Investigation to Lower Late Angioplasty Complications