

## Corrigendum

# Corrigendum to “Identification of Patients Affected by Mitral Valve Prolapse with Severe Regurgitation: A Multivariable Regression Model”

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In the article titled “Identification of Patients Affected by Mitral Valve Prolapse with Severe Regurgitation: A Multivariable Regression Model” [1], references [2, 3] should have been included as references 24 and 25 in the original article.

Accordingly, in the introduction section, the text reading “Echocardiographically, MVP is defined as a single or bileaflet prolapse, at least 2 mm beyond the long-axis annular plane, while the assessment of valve regurgitation takes into account the effective regurgitant orifice area (EROA) [2]” should be changed to “Echocardiographically, MVP is defined as a single or bileaflet prolapse, at least 2 mm beyond the long-axis annular plane, while the assessment of the severity of MR relies on several parameters according to the current recommendations [24, 25].”

Additionally, the Acknowledgments section should be updated as follows:

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## References

- [1] P. Songia, B. Porro, M. Chiesa et al., “Identification of Patients Affected by Mitral Valve Prolapse with Severe Regurgitation: A Multivariable Regression Model,” *Oxidative Medicine and Cellular Longevity*, vol. 2017, Article ID 6838921, 6 pages, 2017.
- [2] W. A. Zoghbi, D. Adams, R. O. Bonow et al., “Recommendations for noninvasive evaluation of native valvular regurgitation: a report from the American Society of Echocardiography developed in collaboration with the Society for Cardiovascular Magnetic Resonance,” *Journal of the American Society of Echocardiography: official publication of the American Society of Echocardiography*, vol. 30, no. 4, pp. 303–371, 2017.
- [3] R. A. Nishimura, C. M. Otto, R. O. Bonow et al., “2014 AHA/ACC Guideline for the management of patients with valvular heart disease: executive summary: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines,” *Circulation*, vol. 129, no. 23, pp. 2440–2492, 2014.



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