In the article, “Dietary Omega-3 Fatty Acids and Susceptibility to Ventricular Fibrillation: Lack of Protection and a Proarrhythmic Effect” by Billman et al, which was published in the June 2012 issue (Circ Arrhythm Electrophysiol. 2012;5:553–560), in the following instances, the coding printed instead of the symbol.

Page 555, left column, paragraph 1, line 1: The dogs were maintained on a diet that did not contain any n-3 PUFAs (Harlan Teklad, Harlan Laboratories, Inc, Indianapolis, IN), beginning 1 week before the instrumentation surgery (total duration ≈4 months).

Page 555, left column, paragraph 2, lines 6 and 9: Fasting blood samples (5 mL) were drawn into EDTA tubes from a cephalic vein between 8:00 and 9:00 am at the following time points: 1 day before treatment and when tissue was harvested at the end of the study (≈14 weeks of treatment). Right atrial and left ventricular tissues were obtained when the hearts were harvested; the tissue and red blood cells (RBC) were flash-frozen in liquid nitrogen and stored at –80°C for subsequent analysis.

Page 555, right column, paragraph 6, line 3: No VF– dogs died spontaneously in either the placebo-treated (Figure 3A) or the n-3 PUFA-treated groups (Figure 3B).

Page 556, left column, paragraph 1, line 4: The exercise plus ischemia test did not alter arrhythmias in the 10 placebo-treated dogs (Figure 3A) but induced arrhythmias in 7 of 21 (2 of 5 with 2 g/d and 4 of 15 with 4 g/d) n-3 PUFA-treated animals (Figure 3B), including the induction of VF in 3 dogs.

Page 556, left column, paragraph 2, line 9: However, none of 195 noninfarcted dogs died spontaneously after thoracic surgery in previous studies (n-3 PUFA-treated versus historic data, P=0.0010).

Page 556, legend to Figure 2, line 3: Only the results of the postmyocardial infarction animals used in the study 2 are shown.

Page 556, legend to Figure 3, line 2: Only the results of the postmyocardial infarction animals used in the study 2 are shown.

Page 558, left column, paragraph 1, line 6: Thus, as emphasized in a recent review,14 the effects of n-3 PUFA on sudden death—whether harmful or beneficial—have yet to be convincingly demonstrated.

Page 558, left column, paragraph 2, lines 27 and 28: Specifically, azimilide (10%, 1 of 10), d-sotolol (11.1%, 2 of 18), and dofedilide (14.3%, 1 of 7) (used without success in the clinical trials ALIVE, SWORD, and DIAMOND) each failed to provide protection from VF, whereas clinically effective agents, β-adrenoceptor blockers (68.4%↓, 63 of 92) and amiodarone (94.2%↓, 33 of 35), successfully reduced VF in our model.23,27,40

Page 558, left column, paragraph 3, line 16: A mean RBC n-3-PUFA concentration of 6.9% was associated with a 90% reduction in the risk for sudden death, a value that compares favorably with that obtained the present study (after 3 months at 4 g/d, mean RBC concentration was ≈6.8%; range, 4.3–10.7%).

Also, the number of males has been corrected in the following sentence:

Page 554, right column, paragraph 2, line 4: Heart-worm free, mixed breed dogs (n =115, 39 males, 76 females, 2–3 years old) weighing 19.4±0.2 kg were used in this study (Figure 1).

The online version has been corrected. The publisher regrets these errors.
Correction

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