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**Edição de Março 2007, vol. 88 (3) pág. 251-57**

No *summary* do artigo: “**Ativação Elétrica Ventricular na Ressincronização Cardíaca Caracterizada pelo Mapeamento Eletrocardiográfico de Superfície**”, página 251, considerar correto:

key words: Bundle-branch block; heart failure, congestive; cardiac pacing, artificial; body surface potential mapping.

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**Edição de Fevereiro 2007, vol. 88 (2), págs. 240-42**

No artigo: “**Padrão Circadiano dos Episódios de Taquicardia Ventricular em Portadores de Cardiopatia Chagásica**”, página 240, considerar correto os autores: Mauricio Abello, Jorge González-Zuelgaray, María E. Daglio, Carlos Lopez, Sebastián Garraza, Ariel Szyszko.

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**Edição de Janeiro 2007, vol. 88 (1) págs. 52-58**

No artigo: “**Echocardiography Evaluations for Asymptomatic Patients with Severe Obesity**”, página 52, dos autores: Isaura Elaine Gonçalves Moreira Rocha, Edgar Guimarães Victor, Maria Cynthia Braga, Oswaldo Barbosa e Silva, Mônica de Moraes Chaves Becker, considerar correto o *summary* abaixo:

**Summary**

**Objective:** To study the systolic and diastolic function of asymptomatic patients with severe obesity using a Doppler echocardiography.

**Methods:** Thirty candidates for bariatric surgery, with an average BMI of  $49.2 \pm 8.8 \text{ kg/m}^2$  and no previous history of heart disease were evaluated through transthoracic echocardiography.

**Results:** Enlarged left chambers were observed in 42.9% of the sample, diastolic dysfunction in 54.6% and left ventricular hypertrophy in 82.1%, of which 50% of the cases presented the geometric pattern of eccentric hypertrophy. Indexation of left ventricular mass to height resulted in a significantly higher number of diagnoses for hypertrophy than indexation to body surface area ( $p = 0.0053$ ), demonstrating that this index is more appropriate to determine ventricular hypertrophy in obese people. Correlations between left ventricular hypertrophy with obesity duration and pressure levels were positive as well as correlations between body mass index and diastolic dysfunction indicators.

**Conclusion:** This study demonstrated that echocardiograms performed on asymptomatic severely obese patients can detect alterations in the cardiac structure that are common in cases of obesity cardiomyopathy and can be associated with the development of heart failure, arrhythmias and sudden death, enabling the identification of patients with greater cardiovascular risk.

**Key words:** Left ventricular hypertrophy, obesity cardiomyopathy, severe obesity, echocardiography.

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**Edição de Novembro 2003, vol. 81 (5), págs. 483-93**

No artigo: “**Avaliação Cardíaca por Métodos não Invasivos em Filhos de Portadores de Lúpus Eritematoso Sistêmico**”, considerar correto o nome do co-autor Paulo Roberto Benchimol Barbosa como Benchimol-Barbosa PR.