

ERRATUM

Association between Intraoperative Hypotension and Hypertension and 30-day Postoperative Mortality in Noncardiac Surgery: Erratum

In the article beginning on page 307 of the August 2015 issue, there are errors in table 5. The reference group for the “Percent change from baseline SBP” should be “Reference ($\leq 29\%$).” The values under the “Percent change from baseline SBP” should be “SBP” with incremental increases from baseline SBP ranging from 30% to greater than 50%. The corrected table is printed below.

Table 5. Patient Counts, 30-day Mortality Rates, and Adjusted OR for Percent Change from Baseline Thresholds (n = 12,675)

Threshold	Unadjusted		Risk-adjusted*	
	Total Patients	Death (%)	OR (95% CI)	P Value
Percent change from baseline SBP				
Reference ($\leq 29\%$)	2,288	23 (1.01)		
SBP decrease 30%–39% for 2–4.9 min	1,017	13 (1.28)	0.783 (0.379–1.618)	
SBP decrease 30%–39% for ≥ 5 min	2,665	25 (0.94)	0.568 (0.310–1.039)	
SBP decrease 40%–49% for 2–4.9 min	1,276	16 (1.25)	0.619 (0.311–1.231)	0.16
SBP decrease 40%–49% for ≥ 5 min	2,124	33 (1.55)	0.786 (0.439–1.405)	
SBP decrease $\geq 50\%$ for 2–4.9 min	896	24 (2.68)	1.306 (0.701–2.436)	
SBP decrease $\geq 50\%$ for ≥ 5 min	1,075	28 (2.60)	1.338 (0.738–2.423)	
Reference ($\leq 29\%$)	2,288	23 (1.01)		
SBP increase 30%–39% for 2–4.9 min	981	25 (2.55)	1.428 (0.757–2.693)	
SBP increase 30%–39% for ≥ 5 min	489	5 (1.02)	0.581 (0.208–1.619)	
SBP increase 40%–49% for 2–4.9 min	623	7 (1.12)	0.560 (0.224–1.400)	1
SBP increase 40%–49% for ≥ 5 min	274	4 (1.46)	0.769 (0.242–2.438)	
SBP increase $\geq 50\%$ for 2–4.9 min	646	19 (2.94)	1.530 (0.764–3.063)	
SBP increase $\geq 50\%$ for ≥ 5 min	542	18 (3.32)	1.307 (0.651–2.622)	
Percent change from baseline MBP				
Reference ($\leq 29\%$)	2,697	27 (1.00)		
MBP decrease 30%–39% for 2–4.9 min	1,088	17 (1.56)	1.059 (0.551–2.035)	
MBP decrease 30%–39% for ≥ 5 min	2,928	30 (1.02)	0.688 (0.394–1.204)	
MBP decrease 40%–49% for 2–4.9 min	1,266	21 (1.66)	1.240 (0.671–2.293)	0.005
MBP decrease 40%–49% for ≥ 5 min	1,924	28 (1.46)	0.999 (0.564–1.770)	
MBP decrease $\geq 50\%$ for 2–4.9 min	627	15 (2.39)	1.421 (0.707–2.856)	
MBP decrease $\geq 50\%$ for ≥ 5 min	656	25 (3.81)	2.721 (1.489–4.974)	
Reference ($\leq 29\%$)	2,697	27 (1.00)		
MBP increase 30%–39% for 2–4.9 min	1,013	17 (1.68)	1.423 (0.724–2.796)	
MBP increase 30%–39% for ≥ 5 min	511	8 (1.57)	1.179 (0.496–2.803)	
MBP increase 40%–49% for 2–4.9 min	596	11 (1.85)	1.492 (0.683–3.260)	0.97
MBP increase 40%–49% for ≥ 5 min	248	3 (1.21)	0.888 (0.246–3.199)	
MBP increase $\geq 50\%$ for 2–4.9 min	587	13 (2.21)	1.653 (0.783–3.492)	
MBP increase $\geq 50\%$ for ≥ 5 min	385	15 (3.9.0)	2.800 (1.376–5.694)	
Percent change from baseline DBP				
Reference ($\leq 29\%$)	1,520	13 (0.86)		
DBP decrease 30%–39% for 2–4.9 min	953	7 (0.73)	0.648 (0.248–1.688)	
DBP decrease 30%–39% for ≥ 5 min	2,335	22 (0.94)	0.987 (0.477–2.039)	
DBP decrease 40%–49% for 2–4.9 min	1,239	23 (1.86)	1.560 (0.754–3.226)	0.06
DBP decrease 40%–49% for ≥ 5 min	1,931	31 (1.61)	1.578 (0.790–3.150)	
DBP decrease $\geq 50\%$ for 2–4.9 min	1,266	22 (1.74)	1.630 (0.782–3.397)	
DBP decrease $\geq 50\%$ for ≥ 5 min	1,728	43 (2.49)	2.359 (1.204–4.625)	
Reference ($\leq 29\%$)	1,520	13 (0.86)		
DBP increase 30%–39% for 2–4.9 min	1,159	17 (1.47)	1.464 (0.674–3.182)	
DBP increase 30%–39% for ≥ 5 min	547	6 (1.10)	0.965 (0.345–2.700)	
DBP increase 40%–49% for 2–4.9 min	795	9 (1.13)	1.216 (0.494–2.988)	1
DBP increase 40%–49% for ≥ 5 min	307	5 (1.63)	1.287 (0.418–3.960)	
DBP increase $\geq 50\%$ for 2–4.9 min	1,111	24 (2.16)	2.227 (1.069–4.639)	
DBP increase $\geq 50\%$ for ≥ 5 min	879	21 (2.39)	1.975 (0.934–4.174)	

*P values and odds ratios are in bold font when the P values are less than or equal to 0.05.

DBP = diastolic blood pressure; MBP = mean blood pressure; OR = odds ratio; SBP = systolic blood pressure.

Reference

Monk TG, Bronsert MR, Henderson WG, Mangione MP, Sum-Ping J, Bentt DR, Nguyen JD, Richman JS, Meguid RA, Hammermeister KE: Association between intraoperative hypotension and hypertension and 30-day postoperative mortality in non-cardiac surgery. *ANESTHESIOLOGY* 2015; 123:307–19