sense, it would have been very interesting to analyse whether PRS combined with results of SCB and other risk factors could better define the arrhythmic risk in BrS. In other words, an important study, an important first step that needs further scientific follow-up; an important analysis that, like all significant analyses, gives us some answers but opens up multiple new questions (Figure 1).

Conflicts of interest: none declared.

References

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In the original version of this article, a small number of the MMM Investigators were missing or recorded incorrectly, and an author’s affiliation was incorrect. This has now been corrected online and in print.

The authors apologise for the error.

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