

Author Correction: The prevalence of vision impairment and blindness among older adults in India: findings from the Longitudinal Ageing Study in India

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In the version of the article initially published, there was an error in the variable used for near visual acuity in our analysis. During a recent review of the analysis code, we discovered an incorrect variable name had been used for near vision. Upon rectifying this variable name, we observed changes in the prevalence of near vision impairment in our study on vision impairment in India.

These modifications have implications for the data presented in the article. In the Abstract, “(76.3%, 95% confidence interval: 75.88%, 76.77%)” previously read “(43.0%, 95% confidence interval: 42.45%, 43.46%)”. In the first paragraph of the Results, “79% of the respondents” previously read “43%”; in the second paragraph, “15% of respondents (95% CI: 14.68%, 15.42%) had mild VI, 58% (95% CI: 57.71%, 58.73%) had moderate VI, and 3% (95% CI: 2.89%, 3.23%) had severe VI or were blind” previously read “13% of respondents (95% CI: 12.72%, 13.40%) had mild VI, 24% (95% CI: 23.85%, 24.71%) had moderate VI, and almost 6% (95% CI: 5.39%, 5.85%) had severe VI or were blind”; and in the fourth paragraph, “1.5 (95% CI: 1.43, 1.63) and 2.7 (95% CI: 2.42, 2.95)” previously read “4.4 (95% CI: 4.12, 4.77) and 8.7 (95% CI: 7.93, 9.59)”. In Table 2, the “Near vision (95% CI) row was updated to read “23.67 (23.23, 24.12); 15.04 (14.68, 15.42); 58.22 (57.71, 58.73); 3.06 (2.89, 3.23)”. Additionally, the final sentence of the fourth paragraph in the Results and the sixth paragraph of the Discussion have now been added to the article. Supplementary Tables 4 and 5 have also been updated as these tables utilize the near vision impairment prevalence estimates, and Supplementary Table 3 has been updated as the male and female data had been switched.

It is crucial to note that while these changes affect specific estimates related to the prevalence of near vision impairment, they do not alter the overall direction of the association or the broader trends presented in the paper. Our primary focus in the paper pertains to distance vision impairment, and we wish to emphasize that the data and conclusions related to distance vision impairment remain entirely unchanged. Consequently, the central findings and conclusions of the paper remain consistent.

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