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Editor-in-Chief, *Journal of the American College of Cardiology*

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Dear Dr. Fuster,

On behalf of my co-authors, I would like to submit our manuscript entitled “Predicted cardiovascular risk for US adults with diabetes, chronic kidney disease, and ≥65 years of age” for consideration as an Original Investigation in the *Journal of the American College of Cardiology*.

The 2017 American College of Cardiology/American Heart Association blood pressure (BP) guideline recommends using 10-year predicted atherosclerotic cardiovascular disease (ASCVD) risk to guide decisions to initiate antihypertensive medication. We set out to determine if the majority of US adults in subgroups defined by diabetes, chronic kidney disease (CKD), and age ≥65 years have high ASCVD risk (i.e., 10-year predicted ASCVD risk ≥10% or clinical CVD), and estimate the age-adjusted probability of having high ASCVD risk. We found that most US adults with diabetes, CKD, or age ≥65 years had high ASCVD risk. However, many with stage 1 hypertension and diabetes or CKD did not. We consider that the current manuscript merits publication in the *Journal of the American College of Cardiology* as these results have high clinical relevance and support the ACC/AHA guideline’s recommendation to compute 10-year predicted risk for all adults with hypertension.

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Please do not hesitate to contact me if you have questions or correspondence on this manuscript.

Sincerely,

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