

Clinical utility of patiromer, sodium zirconium cyclosilicate, and sodium polystyrene sulfonate for the treatment of hyperkalemia: an evidence-based review [Erratum]

Beccari MV, Meaney CJ. *Core Evid.* 2017;12:11–24.

On page 12, in the “Core evidence clinical impact summary for patiromer, sodium zirconium cyclosilicate, and sodium polystyrene sulfonate in the treatment of hyperkalemia” section, the “Implications” text for “Patient-oriented evidence” was incorrectly listed as: “Iloperidone was more effective than placebo and similar to haloperidol, risperidone, and ziprasidone in several psychometric scales and in symptoms assessment.”

The correct details are: “Patiromer and ZS-9 allowed for the initiation, titration, and maintenance of renin-angiotensin-aldosterone system inhibitor therapy in patient populations that derive significant benefit, such as chronic kidney disease and heart failure. The ability of SPS to maintain normokalemia during renin-angiotensin-aldosterone system inhibitor continuation or dose titration is unclear.”

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