CORRECTION



Correction to: Patterns of Use and Clinical Outcomes with Long-Acting Somatostatin Analogues for Neuroendocrine Tumors: A Nationwide French Retrospective Cohort Study in the Real-Life Setting

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Correction to: Adv Ther (2022) 39:3059–3060 https://doi.org/10.1007/s12325-022-02060-1

In the article "Patterns of use and clinical outcomes with long-acting somatostatin analogs for neuroendocrine tumors: a nationwide French retrospective cohort study in the real-life setting" by Brooke Harrow, Francis Fagnani, Camille Nevoret, Xuan-Mai Truong Thanh, Marie de Zélicourt, and Louis de Mestier (Advances in Therapy, 2022, Vol. 39, No. 4, pp. 1754–1771. https://doi.org/10.1007/s12325-022-02060-1) there was an error in the caption of Fig. 3 and in the fifth paragraph of the Results as well as in the accompanying infographic summary.

The values for median time to second-line treatment for patients with GEP-NETs receiving

The original article can be found online at https://doi.org/10.1007/s12325-022-02060-1.

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L. de Mestier (☒) Department of Gastroenterology-Pancreatology, Beaujon Hospital (APHP), Université de Paris, 100 bd du Général Leclerc, 92100 Clichy, France e-mail: louis.demestier@aphp.fr rect value for median time to second-line treatment for patients receiving OCT is: 98.7 months (95% CI: 65.8—NA). These values have been corrected within the caption of Fig. 3.

The fifth paragraph of the Results section, "Time to second-line treatment (GEP-NETs

lanreotide autogel (LAN) versus octreotide long-

acting release (OCT) were switched in the caption of Fig. 3. The correct value for median time

to second-line treatment for patients receiving

is: 80.9 months (95% CI: 69.9-97.0). The cor-

The fifth paragraph of the Results section, "Time to second-line treatment (GEP-NETs subgroup only)" reflected the error in the caption of Fig. 3. The paragraph has been corrected and now reads as follows:

In the GEP-NETs subgroup, there was no significant difference in time to second-line treatment, estimated from a Kaplan–Meier survival model, for patients in the LAN group compared with patients in the OCT group (LAN: 80.9 months [95% CI: 69.9–97.0] vs. OCT: 98.7 months [95% CI: 65.8–NA]; log–rank p value = 0.97; Fig. 3). The results remained non-significant even after adjusting for covariates (adjusted HR: 1.0 [95% CI: 0.9–1.2]). This analysis was not performed in the overall study population.

The figure displaying "Median time to second-line treatment" and corresponding footnotes in the infographic summary have likewise been adjusted, so that the value for LAN is 80.9 months (95% CI: 69.9–97.0) and the

388 Adv Ther (2023) 40:387–388

value for OCT is 98.7 months (95% CI: 65.8–NA).

The original article has been corrected.

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