Correction to
Management of Patients with Type 2 Diabetes with Once-Weekly Semaglutide Versus Dulaglutide, Exenatide ER, Liraglutide and Lixisenatide: A Cost-Effectiveness Analysis in the Danish Setting (Diabetes Therapy, (2019), 10.1007/s13300-019-0630-6)
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Correction to: Management of Patients with Type 2 Diabetes with Once-Weekly Semaglutide Versus Dulaglutide, Exenatide ER, Liraglutide and Lixisenatide: A Cost-Effectiveness Analysis in the Danish Setting

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In the original publication, Figs. 3 and 5 and the final sentence in the final paragraph of Results/Sensitivity Analyses were incorrectly published. The corrected statement and the figures are given below.

Additionally, the last few lines under the heading ‘Sensitivity Analyses’ should read as:

At a willingness-to-pay threshold of DKK 250,000 per QALY gained (a representative value based on GBP 20,000 in the UK), the probabilities of once-weekly semaglutide 0.5 mg and 1 mg being considered cost-effective were 72.4% and 96.5%, respectively, versus dulaglutide 1.5 mg (Fig. 5).

The original article can be found online at https://doi.org/10.1007/s13300-019-0638-y.

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Fig. 3 Discounted direct costs over patient lifetimes in the primary analysis based on SUSTAIN 7. DKK 2017 Danish kroner
Fig. 5 Cost-effectiveness acceptability curve for the primary analysis versus dulaglutide, based on SUSTAIN 7. DKK 2017 Danish kroner, QALY quality-adjusted life year

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