

ERRATUM

Erratum to: Early Glycemic Response Predicts Achievement of Subsequent Treatment Targets in the Treatment of Type 2 Diabetes: A Post hoc Analysis

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The third sentence of the “Patient Disposition and Demographics” subsection within the “Results” section should read:

“For metformin and sulfonylurea, 72% and 74% of patients also had HbA_{1c} assessed at week 52.”

The third paragraph of the “Predictive Parameters” subsection within the “Results” section should read:

“The predictive parameters for improvements in HbA_{1c} for week 24, based on the composite unified early-response measure (reduction in HbA_{1c} level of $\geq 1.0\%$ or HbA_{1c} level of $< 7.0\%$) for metformin were 0.83, 0.81, 0.44, and 0.96;

for sulfonylurea, 0.79, 0.94, 0.71, and 0.96; and for insulin glargine, 0.67, 0.89, 0.65, and 0.90.”

Within the footnote to Table 5, the optimal early-response measure should be defined as:

“HbA_{1c} reduction of $\geq 1.0\%$ for sulfonylurea and glargine at week 24 and for sulfonylurea at week 52, HbA_{1c} reduction of $\geq 0.8\%$ for metformin at week 24, and HbA_{1c} reduction of $\geq 0.6\%$ for metformin at week 52”.

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