ERRATUM

Erratum to: Microvascular effects of glucagon-like peptide-1 receptor agonists in type 2 diabetes: a meta-analysis of randomized controlled trials

Ilaria Dicembrini¹ · Besmir Nreu¹ · Alessia Scatena² · Francesco Andreozzi³ · Giorgio Sesti³ · Edoardo Mannucci¹ · Matteo Monami¹

Published online: 19 September 2017
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Erratum to: Acta Diabetol DOI 10.1007/s00592-017-1031-9

In the manuscript, the events of nephropathy and retinopathy recorded for the LEADER trial (Marso et al. 2016) were erroneously imputed; the numbers reported in Table 1 for that trial refer to serious adverse events, and not to total events, as stated in Methods. The correct figures are 268 and 416 cases of nephropathy, and 106 and 92 cases of retinopathy in liraglutide and control arms, respectively.

As a consequence, the overall risk (MH-OR [95% CI]) of nephropathy and retinopathy with GLP-1RA (vs all comparators) is 0.77 [0.67–0.88], $p < 0.001$, and 0.99 [0.80–1.21], $p = 0.90$, respectively. The analyses reported in Figs. 1 and 2 were also corrected and reported below, together with supplementary figures 3 and 5. Please note that liraglutide is associated with a significant reduction in the incidence of nephropathy, whereas for retinopathy the difference from placebo is no longer statistically significant.

The online version of the original article can be found under doi:[10.1007/s00592-017-1031-9](https://doi.org/10.1007/s00592-017-1031-9).

✉ Matteo Monami
matteo.monami@unifi.it

Edoardo Mannucci
edoardo.mannucci@unifi.it

¹ Diabetology, Azienda Ospedaliero Universitaria Careggi, University of Florence, Via delle Oblate 4, 50141 Florence, Italy

² Diabetology Unit, Ospedale San Donato Arezzo, Arezzo, Italy

³ Department of Medical and Surgical Sciences, University Magna Graecia of Catanzaro, Catanzaro, Italy

Suppl. Figure 3 Mantel-Haenszel odds ratio for retinopathy with 95% CI. GLP1-RA: Glucagon-Like Peptide 1 Receptor Agonists

Suppl. Figure 5 Mantel-Haenszel odds ratio for nephropathy with 95% CI. GLP1-RA: Glucagon-Like Peptide 1 Receptor Agonists

Fig. 1 MH-OR with 95% CI for GLP-1 receptor agonists versus different comparators for nephropathy (a) and retinopathy (b)

Fig. 2 MH-OR with 95% CI for different GLP-1 receptor agonists versus other comparators for nephropathy (a) and retinopathy (b)