CORRECTION

Correction to: Reassessing Coronary Artery Bypass Surgery Versus Percutaneous Coronary Intervention in Patients with Type 2 Diabetes Mellitus: A Brief Updated Analytical Report (2015–2017)

Xia Dai · Zu-chun Luo · Lu Zhai · Wen-piao Zhao · Feng Huang

Published online: October 6, 2018
© The Author(s) 2018

Correction to: Diabetes Ther
<https://doi.org/10.1007/s13300-018-0504-3>

In the original publication, Conclusion was incorrectly updated in the article main text. The complete statement is given below.

Conclusions

Mortality (1–5 years) did not significantly differ between the CABG and PCI patients with T2DM. However, rates of other major adverse events were significantly higher in the PCI

patients, suggesting that CABG is more advantageous than PCI in patients with T2DM.

Open Access. This article is distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits any noncommercial use, distribution, and reproduction in any medium, provided you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license, and indicate if changes were made.

The original article can be found online at <https://doi.org/10.1007/s13300-018-0504-3>.

X. Dai · L. Zhai · W. Zhao
Department of Endocrinology, The First Affiliated Hospital of Guangxi Medical University, Guangxi, China

Z. Luo
Department of Internal Medicine Education, The First Affiliated Hospital of Guangxi Medical University, Guangxi, China

F. Huang (✉)
Institute of Cardiovascular Diseases and Guangxi Key Laboratory Base of Precision Medicine in Cardio-cerebrovascular Disease Control and Prevention and Guangxi Clinical Research Center for Cardio-cerebrovascular Diseases, The First Affiliated Hospital of Guangxi Medical University, Guangxi, China
e-mail: huangfeng7925@163.com