



Author Correction to: The effectiveness and safety of bevacizumab versus cetuximab in the treatment of colorectal cancer: a systematic review and meta-analysis

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In the original publication of the article, “TARE3” is corrected as “TRAE3-5” throughout the article.

In the introduction section, the sentence “with demonstrated benefits in overall survival” is removed and “with demonstrated benefits in overall survival in patients after complete resection of CRC metastases” is included.

The sentence “studies used bevacizumab containing regimens as an intervention group and cetuximab-containing regimen as a control group;” is removed and “studies that compared bevacizumab containing regimens and cetuximab-containing regimens” is included.

The sentence “consulting with a third reviewer” is changed to “discussion”.

The sub-section “Overall survival” is corrected as below,

A total of 8 studies reported OS [4, 15–20, 22]. The results of the meta-analysis showed that bevacizumab-containing regimens were significantly associated with longer OS than cetuximab-containing regimens in patients with CRC (HR 0.90, 95% CI 0.82 to 0.99, $P < 0.0001$, Fig. 3A). Similarly, the subgroup analysis of observational cohort studies showed a significantly longer OS in the bevacizumab-containing regimens (HR, 0.73, 95% CI 0.57–0.92, $P = 0.008$, Fig. 3A). However, the subgroup analysis of

RCTs did not show significant differences in OS between the two regimens (HR 0.94, 95% CI 0.85–1.05, $P = 0.28$, Fig. 3A). There was no difference between the above subgroups ($P_{\text{interaction}} = 0.05$). There was significant heterogeneity between the studies ($I^2 = 65\%$) (Fig. 3A). There was no publication bias.

The sub section “Progression-free survival” is corrected as below,

We included a total of 8 studies that reported PFS [4, 15–21]. The results of the meta analysis found no significant differences in PFS between the bevacizumab-containing regimens and the cetuximab-containing regimens (HR 0.96, 95% CI 0.91 to 1.02, $P = 0.14$, Fig. 3B). We found a difference in PFS between bevacizumab-containing regimens and cetuximab-containing regimens in the subgroup analysis of RCTs (HR 0.91, 95% CI 0.83–1.00, $P = 0.05$, Fig. 3B) but not in the subgroup analysis of observational cohort studies (HR 0.99, 95% CI 0.92–1.06, $P = 0.82$, Fig. 3B). Furthermore, there were no significant differences between RCTs and observational cohort studies ($P_{\text{interaction}} = 0.14$). There was significant heterogeneity between the ($I^2 53.2\%$) (Fig. 3B) but no publication bias (Supplemental Fig. 1B).

In the discussion section, the sentence “The subgroup analysis of RCTs did not show significant differences in OS between the bevacizumab and cetuximab-containing regimens.” is included.

The correct Fig. 3 is given below,

The original article has been corrected.

The original article can be found online at <https://doi.org/10.1007/s11096-022-01415-6>.

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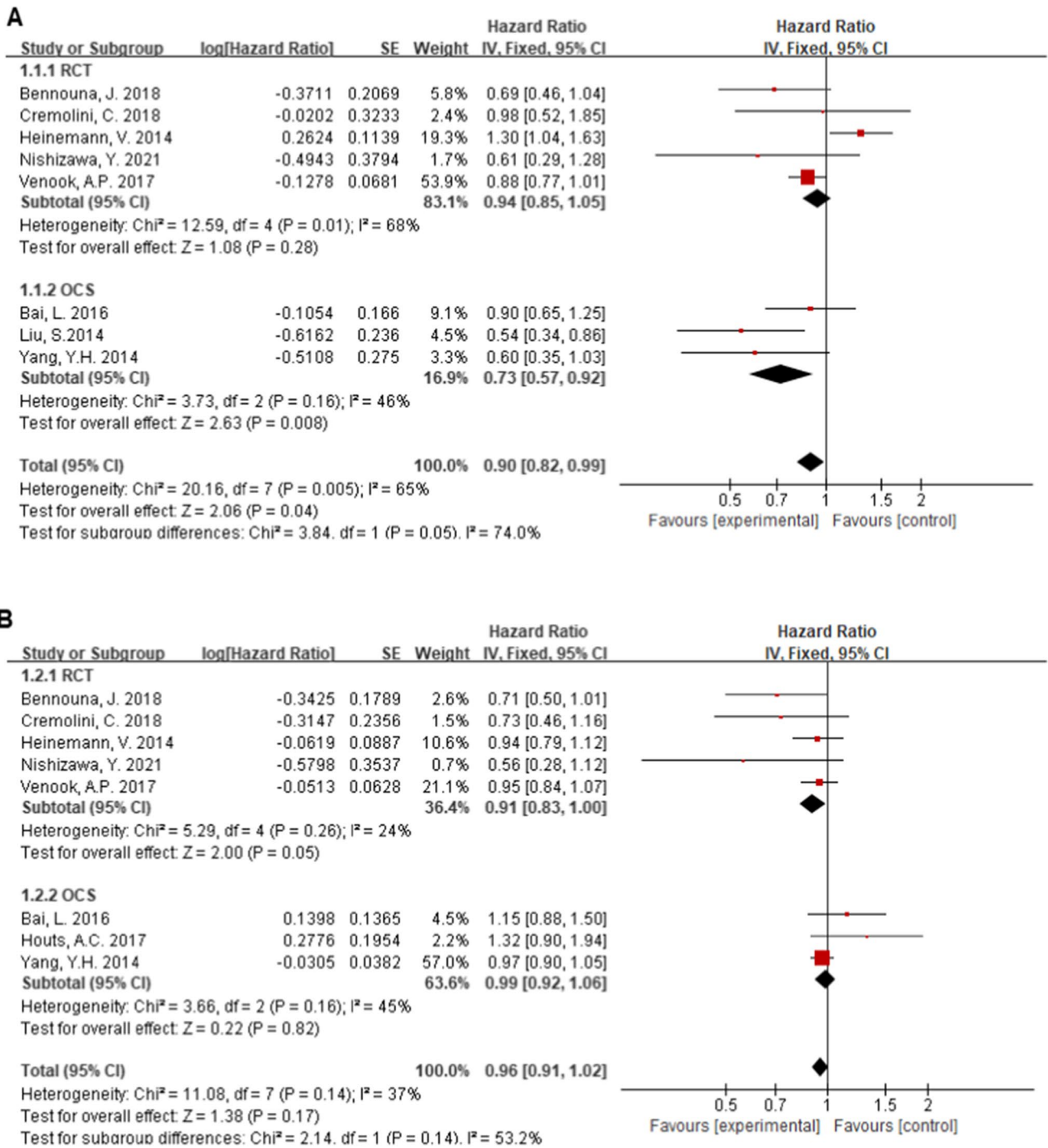


Fig. 3 Comparison of overall survival (3A) and progression-free survival (3B) between bevacizumab-based regimen (experimental) and cetuximab-based regimen (control)