## CORRECTION



## Correction to: Relationship Between Asthma Control Status and Health-Related Quality of Life in Japan: A Cross-Sectional Mixed-Methods Study

Hiroyuki Nagase 💿 · Risako Ito · Moe Ishii · Hideki Shibata · Shintaro Suo · Isao Mukai · Shiyuan Zhang 💿 · Kieran J. Rothnie · Claire Trennery · Liza Yuanita · Takeo Ishii 💿

Published online: December 1, 2023 © Springer Healthcare Ltd., part of Springer Nature 2023

## Correction to: Adv Ther (2023) 40:4857–4876 https://doi.org/10.1007/s12325-023-02660-5

In the Results for this article, under the subsection *Quantitative Research: Patient Questionnaires, WPAI: Asthma*, there is incorrect inclusion of % symbols where WPAI:Asthma data are described as below:

"The mean (SD) percentages of Absenteeism, Impairment while working, Overall work impairment, and Activity impairment for the overall population were 0.03 (0.13), 0.17 (0.24), 0.18 (0.26), and 0.19 (0.26), respectively (Fig. 2c, Table S5). Significantly greater work and activity impairment was reported by the NWC asthma subgroup compared with the WC

The original article can be found online at https://doi. org/10.1007/s12325-023-02660-5.

H. Nagase (⊠) Division of Respiratory Medicine and Allergology, Department of Medicine, Teikyo University School of Medicine, 2-11-1 Kaga, Itabashi-ku, Tokyo 173-8605, Japan e-mail: nagaseh@med.teikyo-u.ac.jp

R. Ito  $(\boxtimes) \cdot T$ . Ishii Value Evidence and Outcomes, GSK, 1-8-1 Akasaka, Minato-ku, Tokyo 107-0052, Japan e-mail: risako.2.ito@gsk.com asthma subgroup. Patients with NWC asthma had significantly higher mean (SD) percentage of Absenteeism (0.04% [0.15%] vs. 0.02% [0.12%], *p* < 0.0001), Impairment while working (0.29% [0.27%] vs. 0.06% [0.14%], p < 0.0001), Overall work impairment (0.30% [0.29%] vs. 0.07% [0.17%], p < 0.0001), and Activity impairment (0.33% [0.28%] vs. 0.08% [0.17%], p < 0.0001) scores compared with patients with WC asthma (Fig. 2c, Table S5). The covariate-adjusted analysis confirmed that WPAI:Asthma scores were significantly higher in the NWC asthma subgroup versus the WC asthma subgroup for Impairment while working, Overall work impairment, and Activity impairment domains (p < 0.0001) and were numerically higher for Absenteeism (0.1926) (Table S4). Data for class impairment

M. Ishii · H. Shibata · S. Suo Mebix, Inc., Minato-ku, Tokyo, Japan

I. Mukai · L. Yuanita Medical Affairs Asthma & COPD, GSK, Minato-ku, Tokyo, Japan

S. Zhang Value Evidence and Outcomes, GSK, Collegeville, PA, USA

K. J. Rothnie · C. Trennery Value Evidence and Outcomes, GSK, Brentford, Middlesex, UK domains were not included in the analysis because these questions were relevant for only a few patients (n = 12)."

The correct WPAI:Asthma data are given below:

"The mean (SD) percentages of Absenteeism, Impairment while working, Overall work impairment, and Activity impairment for the overall population were 0.03 (0.13), 0.17 (0.24), 0.18 (0.26), and 0.19 (0.26), respectively (Fig. 2c, Table S5). Significantly greater work and activity impairment was reported by the NWC asthma subgroup compared with the WC asthma subgroup. Patients with NWC asthma had significantly higher mean (SD) percentage of Absenteeism (0.04 [0.15] vs. 0.02 [0.12], p < 0.0001), Impairment while working (0.29 [0.27] vs. 0.06 [0.14],

p < 0.0001), Overall work impairment  $(0.30 \ [0.29] \text{ vs. } 0.07 \ [0.17], p < 0.0001)$ , and Activity impairment (0.33 [0.28] vs. 0.08 [0.17], p < 0.0001) scores compared with patients with WC asthma (Fig. 2c. Table S5). The covariate-adjusted analysis confirmed that WPAI:Asthma scores were significantly higher in the NWC asthma subgroup versus the WC asthma subgroup for Impairment while working, Overall work impairment, and Activity impairment domains (p < 0.0001) and were higher for Absenteeism numerically (p = 0.1926) (Table S4). Data for class impairment domains were not included in the analysis because these questions were relevant for only a few patients (n = 12)."

The original article has been corrected.

**Open Access.** This article is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License, which permits any non-commercial use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are

included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit http://creativecommons.org/licenses/bync/4.0/.