Correction to: Ambrisentan ± tadalafil in WHO functional class II/III pulmonary arterial hypertension: a guide to its use in the EU

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Correction to:
Drugs & Therapy Perspectives 2018;34(7):289–99
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Page 290, column 1, first bullet point: the following text, which previously read:

“Pharmacological agents that manage symptoms by targeting the key pathways responsible for the pathogenesis of PAH, such as propanoic acid (ambrisentan) and sulphonamide (bosentan and macitentan), ET-1 receptor antagonists”,

Should read:

“Pharmacological agents that manage symptoms by targeting the key pathways responsible for the pathogenesis of PAH, such as propanoic acid ET-1 receptor antagonists (ambrisentan), sulphonamide ET-1 receptor antagonists (bosentan and macitentan)”,

Page 290, column 1, last paragraph, sentence 1: the following text, which previously read:

“The use of tadalafil, a selective inhibitor of cyclic guanosine monophosphate (cGMP)”,

Should read:

“The use of tadalafil [a PDE5 inhibitor that prevents the degradation of cyclic guanosine monophosphate (cGMP)]”

Page 291, Table 1, row titled ‘Patients hypersensitive to any substance in the formulation’, column 2: the following text, which previously read:

“(i.e. rare hereditary problems of lactose intolerance, lactase deficiency or glucose-galactose malabsorption)”

Should read:

“(i.e. rare hereditary problems of galactose intolerance, Lapp lactase deficiency or glucose-galactose malabsorption)”

Page 292, column 2, section “Risk of clinical-failure events”, paragraph 2, sentence 4: the following text, which previously read:

“by 21 and 40% of those with SCc-PAH”

Should read:

“by 21 and 40% of those with SSc-PAH”.

The original article can be found online at <https://doi.org/10.1007/s40267-018-0531-1>.

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