CORRECTION

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Correction: Cardiorenal effectiveness of empagliflozin vs. glucagon-like peptide-1 receptor agonists: final-year results from the EMPRISE study

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Following publication of the original article [1], the authors noticed an error in the hazard ratio (HR) for the hospitalization for heart failure (HHF) outcome in the abstract. The numbers in the other parts of the manuscript and the tables were correct.

In abstract section, the correct sentence should read "Compared with GLP-1RA, empagliflozin was associated with similar risks of MI or stroke [HR: 0.99 (0.92, 1.07);

RD: -0.23 (-1.25, 0.79)], and lower risks of HHF [HR: 0.69 (0.62, 0.77); RD: -2.28 (-2.98, -1.59)], MACE [HR: 0.90 (0.82, 0.99); RD: -2.54 (-4.76, -0.32)], cardiovascular mortality or HHF [HR: 0.77 (0.69, 0.86); RD: -4.11 (-5.95, -2.29)], and ESKD [0.75 (0.60, 0.94); RD: -6.77 (-11.97, -1.61)]."

Figure 3 was also cut off on the right side with some columns missing which has now been corrected (Fig. 3).

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Population	No. of matched pairs	Empagliflozin Events (Rate)	GLP-1RA Events (Rate)	HR (95% CI)	Empagliflozin vs. GLP-1RA	p-value for homogeneity	RD/1000PY (95% CI)	Empagliflozin vs. GLP-1RA	p-value for homogeneity
MI or stroke									
Age≥65	72,602	756 (15.05)	887 (18.21)	0.82 (0.75, 0.91)	H H -1		-3.16 (-4.77, -1.55)		0.0000
Age<65	69,101	409 (8.07)	340 (7.19)	1.13 (0.98, 1.30)	r -	0.0005	0.89 (-0.21, 1.98)	t-	•
Males	76,326	784 (13.71)	786 (14.94)	0.93 (0.84, 1.02)	⊢ ●-1	0.4184	-1.23 (-2.65, 0.19)	⊢ ●-†	0.3511
Females	65,659	528 (12.05)	534 (12.31)	0.98 (0.87, 1.10)			-0.26 (-1.73, 1.20)		
HHF									
Age≥65	72,602	606 (12.04)	782 (16.04)	0.75 (0.67, 0.83)		0.1380	-3.99 (-5.47, -2.52)		0.0000
Age<65	69,101	76 (1.49)	119 (2.51)	0.58 (0.44, 0.78)			-1.02 (-1.59, -0.46)	H e H	
Males	76,326	310 (5.39)	408 (7.73)	0.70 (0.60, 0.81)		0.6350	-2.33 (-3.30, -1.38)	⊢● →	0.3980
Females	65,659	215 (4.89)	288 (6.62)	0.74 (0.62, 0.88)			-1.73 (-2.75, -0.73)	⊢ •	
MACE									
Males	27,665	479 (23.55)	516 (27.02)	0.87 (0.77, 0.99)	⊢ ∎-1	0.5775	-3.47 (-6.63, -0.33)	• • •••	0.4529
Females	26,677	360 (20.57)	388 (22.36)	0.92 (0.80, 1.06)			-1.79 (-4.87, 1.29)		
HHF or CV death									
Males	27,665	324 (15.85)	372 (19.39)	0.81 (0.70, 0.94)			-3.54 (-6.17, -0.93)	·•	
Females	26,677	225 (12.81)	258 (14.82)	0.87 (0.73, 1.04)		0.6365	-2.01 (-4.48, 0.46)	, — • – †	0.3998
				0.	43 < 0.86	\longrightarrow		-6.64 -1.64	>
					Favors Empagliflozin	Favors GLP-1RA		Favors Empagliflozin	Favors GLP-1RA

Fig. 3 Subgroup analyses for primary outcomes by age and sex. CAPTION: On the relative scale, empagliflozin was associated with a lower risk of MI/stroke in patients 65 years or older, while it was not associated with MI/stroke in patients younger than 65 years. The HR estimates were consistent across other subgroups for all outcomes. For all outcomes, RD estimates were larger in older than in younger patients, while they did not differ by sex

Reference

 Htoo PT, Tesfaye H, Schneeweiss S, Wexler DJ, Everett BM, Glynn RJ, Schmedt N, Koeneman L, Déruaz-Luyet A, Paik JM, Patorno E. Cardiorenal effectiveness of empagliflozin vs. glucagon-like peptide-1 receptor agonists: final-year results from the EMPRISE study. Cardiovasc Diabetol. 2024;23(1):57. https://doi.org/10.1186/s12933-024-02150-0.

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