

What is the impact of GOLD 2017 recommendations in primary care? – a descriptive study of patient classifications, treatment burden and costs [Erratum]

Gayle A, Dickinson S, Morris K, Poole C, Mathioudakis AG, Vestbo J. *Int J Chron Obstruct Pulmon Dis.* 2018;13: 3485–3492.

On page 3488, Results section, 2nd paragraph, first sentence, “When applying GOLD 2013 criteria, less than half of the cohort (46%) was assigned to GOLD A or B, as compared to 86% when applying GOLD 2017 (Figure 1)” was incorrect. The corrected sentence is “When applying GOLD 2013 criteria, less than half of the cohort (46%) was assigned to GOLD A or B, as compared to 84% when applying GOLD 2017 (Figure 1)”. On page 3488, Results section, 2nd paragraph, third sentence, “Fifteen percentage (n=2,939) of the total cohort could not be classified into the GOLD group due to missing symptom data (mMRC or CAT)” was incorrect. The corrected sentence is “Fifteen percent (n=2,939) of the

total cohort could not be classified into the GOLD group due to missing symptom data (mMRC or CAT)”.

On page 3490, Discussion section, 5th paragraph, final sentence, “After excluding these patients, the proportion of patients who were classified as C or D decreased from 53% using GOLD 13% to 16% using GOLD 2017, consistent with our main findings suggesting that spirometry alone is not sufficient in distinguishing patients with overlap syndrome” was incorrect. The corrected sentence is “After excluding these patients, the proportion of patients who were classified as C or D decreased from 53% using GOLD 2013 to 16% using GOLD 2017, consistent with our main findings suggesting that spirometry alone is not sufficient in distinguishing patients with overlap syndrome”.

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