CORRIGENDUM

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Cost-Effectiveness of Humidified High-Flow Therapy (HHFT) for COPD Patients on Long-Term Oxygen Therapy [Corrigendum]

Groessl EJ, Tally SR, Hillery N. Clinicoecon Outcomes Res. 2023;15:239-250.

Page 244, Results, first paragraph, the text "The main results of the Markov decision tree model are presented in Table 2. Over the course of the 5-year time horizon, the model estimated that 2.058 QALYs accumulated in the HHFT group while 1.996 QALYs accumulated in the standard LTOT group. The incremental difference of 0.062 QALYs is substantial given the 12% annual mortality rate in this cohort, and about half the cohort would be assumed to be deceased after 4 years. In addition to experiencing better health over time, the HHFT group also accrued lower total costs. Total costs from our 5-year model were \$50,409 for the group receiving HHFT and \$53,304 for those on standard LTOT therapy. This indicates that the costs associated with fewer moderate and severe exacerbations of COPD more than offset the device cost. A meaningful ICER cannot be calculated because the HHFT group was dominant, accruing better health at a lower cost"

should read

"The main results of the Markov decision tree model are presented in Table 2. Over the course of the 5-year time horizon, the model estimated that 2.047 QALYs accumulated in the HHFT group while 1.989 QALYs accumulated in the standard LTOT group. The incremental difference of 0.058 QALYs is substantial given the 12% annual mortality rate in this cohort, and about half the cohort would be assumed to be deceased after 4 years. In addition to experiencing better health over time, the HHFT group also accrued lower total costs. Total costs from our 5-year model were \$47,516 for the group receiving HHFT and \$51,455 for those on standard LTOT therapy. This indicates that the costs associated with fewer moderate and severe exacerbations of COPD more than offset the device cost. A meaningful ICER cannot be calculated because the HHFT group was dominant, accruing better health at a lower cost".

The authors apologize for this error.

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