

CORRIGENDUM

Corrigendum: Diabetes: how to manage chronic kidney disease

Abstract

The authors wish to make the following corrections to their article:

Clements JN. Diabetes: how to manage chronic kidney disease. *Drugs Context*. 2022;11:2021-9-10. <https://doi.org/10.7573/dic.2021-9-10>

Corrigendum

The authors regret that there are errors in their original paper.

The following shows where original text has been removed (strikethrough) and new wording introduced (underlined).

Page 6, Table 4

Table 4. General summary of finerenone. Adapted from ref.³⁹

Indication	Reduced risk of sustained eGFR decline, ESRD, CV death, non-fatal MI and HHF for those with CKD associated with T2D
Contraindications	Strong CYP3A4 inhibitors; adrenal insufficiency
Interaction	Weak to strong CYP3A4 inhibitors; grapefruit and grapefruit juice
Dosing	10 or 20 mg PO QD (initial) 20 mg PO QD (target)
Dosing per eGFR	≤ 60 mL/min/1.73 m ² = 20 mg PO QD ≥ 25 to <50 <u><60</u> mL/min/1.73 m ² = 10 mg PO QD <25 mL/min/1.73 m ² = do not use

CKD, chronic kidney disease; CV, cardiovascular; CYP, cytochrome; eGFR, estimated glomerular filtration rate; ESRD, end-stage