

Corrigendum

A previous version of this report was published in July 2013.¹ The report was corrected on page v in November 2013. For further information, or for copies of the original material, please contact Nihredit@soton.ac.uk.

Summary of changes

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Original

The mixed-treatment comparison demonstrated that, in patients with non-squamous disease, pemetrexed (Alimta[®], Eli Lilly and Company; PEM) + platinum (PLAT) increases OS statistically significantly compared with gemcitabine (Gemzar[®], Eli Lilly and Company; GEM) + PLAT [hazard ratio (HR) = 0.85; 95% confidence interval (CI) 0.74 to 0.98] and that paclitaxel (Abraxane[®], Celgene Corporation; PAX) + PLAT increases OS statistically significantly compared with docetaxel (Taxotere[®], Sanofi-aventis; DOC) + PLAT (HR = 0.79, 95% CI 0.66 to 0.93).

Correction

The mixed-treatment comparison demonstrated that, in patients with non-squamous disease, pemetrexed (Alimta[®], Eli Lilly and Company; PEM) + platinum (PLAT) increases OS statistically significantly compared with gemcitabine (Gemzar[®], Eli Lilly and Company; GEM) + PLAT [hazard ratio (HR) = 0.85; 95% confidence interval (CI) 0.74 to 0.98] and that docetaxel (Taxotere[®], Sanofi-aventis; DOC) + PLAT increases OS statistically significantly compared with paclitaxel (Abraxane[®], Celgene Corporation; PAX) + PLAT (HR = 0.79, 95% CI 0.66 to 0.93).

Reference

1. Brown T, Pilkington G, Bagust A, Boland A, Oyee J, Tudur Smith C, *et al*. Clinical effectiveness and cost-effectiveness of first-line chemotherapy for adult patients with locally advanced or metastatic non-small cell lung cancer: a systematic review and economic evaluation. *Health Technol Assess* 2013;**17**(31).