

ERRATUM: Valentine V, Hinnen D. Clinical Implications of Canagliflozin Treatment in Patients With Type 2 Diabetes. *Clinical Diabetes* 2014;33:5–13 (DOI: 10.2337/diaclin.33.2.96)

In the print version of the article listed above, there is an inconsistency in Table 1 on page 8. The weights given in the row summarizing changes in body weight should have been provided in kilograms instead of pounds, given that all weight data discussed in the article was expressed as kilograms. The corrected table row appears below:

The online version reflects these changes.

TABLE 1. Summary of Efficacy and Safety of Canagliflozin as Add-On to Metformin, Metformin Plus Sulfonylurea, and Insulin in Patients With Type 2 Diabetes Over 52 Weeks (3,30–33,50,53)

	Canagliflozin as:		
	Add-on to MET	Add-on to MET + SU	Add-on to insulin
Changes in key efficacy parameters			
Body weight (kg)	GLIM	PBO	PBO
	Baseline: 86.6	Baseline: 90.8	Baseline: 97.7
	Change: +1.0% (+0.7)	Change: –0.9% (–1.0)	Change: +0.1% (+0.1)
	CANA 100 mg	CANA 100 mg	CANA 100 mg
	Baseline: 86.8	Baseline: 93.5	Baseline: 96.9
	Change: –4.2% (–3.7)	Change: –2.2% (–2.0)	Change: –2.4% (–2.3)
	CANA 300 mg	CANA 300 mg	CANA 300 mg
	Baseline: 86.6	Baseline: 93.5	Baseline: 96.7
	Change: –4.7% (–4.0)	Change: –3.2% (–3.1)	Change: –3.1% (–3.0)
	SITA	SITA	
	Baseline: 87.6	Baseline: 89.6	
	Change: –1.3% (–1.2)	Change: +0.3% (+0.1)	
	CANA 100 mg	CANA 300 mg	
	Baseline: 88.7	Baseline: 87.6	
	Change: –3.8% (–3.3)	Change: –2.5% (–2.3)	
	CANA 300 mg		
	Baseline: 85.4		
	Change: –4.2% (–3.7)		

CANA, canagliflozin; GLIM, glimepiride; MET, metformin; PBO, placebo; SITA, sitagliptin; SU, sulfonylurea.