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ERRATUM

Weight maintenance and additional weight loss with liraglutide after low-calorie-diet-induced weight loss: The SCALE Maintenance randomized study

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The publisher would like to apologize for an error in Table 2.

For the comorbidity data, the numbers and percentages were presented the wrong way round. The corrected table is shown below.

Table 2. Demographics and disease-specific characteristics for all randomized individuals

	Liraglutide 3.0 mg (n = 212)	Placebo (n = 210)
Age (years) at screening	45.9 (11.9)	46.5 (11)
Men/women (%)	16/84	21/79
Race		
White	170 (80)	185 (88)
Black or African–American	32 (15)	24 (11)
Asian and other	10 (5)	1 (1)
Comorbidities present	94 (44)	96 (46)
Hypertension	71 (33)	61 (29)
Dyslipidemia	59 (28)	65 (31)
Weight (kg)	100.4 (20.8)	98.7 (21.2)
BMI (kg m^{-2})	36.0 (5.9)	35.2 (5.9)
Waist circumference (cm)	109.4 (15.3)	107.8 (15.2)

Abbreviation: BMI, body mass index. Numbers are for individuals in the safety analysis set (n = 422) at randomization unless specified. Data are mean (s.d.) or number (%). Dyslipidemia was defined as low-density lipoprotein cholesterol $\geqslant 4.14$ mmol l^{-1}, triglycerides $\geqslant 1.7$ mmol l^{-1} or high-density lipoprotein cholesterol (HDL cholesterol) < 1.04 mmol l^{-1} (males) or < 1.3 mmol l^{-1} (females).[32,33] Hypertension was defined as systolic blood pressure $\geqslant 140$ mm Hg and/or diastolic BP $\geqslant 90$ mm Hg).[34] Participants receiving anti-hypertensive drugs, or drugs related to HDL cholesterol and triglycerides, were considered to fulfill elevated blood pressure or lipid-related criteria.

The corrected article appears in this issue and the html and online pdf versions have also been amended.