


## Erratum to: Efficacy of Zofenopril vs. Irbesartan in Combination with a Thiazide Diuretic in Hypertensive Patients with Multiple Risk Factors not Controlled by a Previous Monotherapy: A Review of the Double-Blind, Randomized “Z” Studies

Stefano Omboni  · Ettore Malacco · Claudio Napoli · Pietro Amedeo Modesti · Athanasios Manolis · Gianfranco Parati · Enrico Agabiti-Rosei · Claudio Borghi

Published online: April 27, 2017  
© The Author(s) 2017. This article is an open access publication

Erratum to: Adv Ther (2017) 34:784–798  
DOI 10.1007/s12325-017-0497-8

Author wants to correct the text under the heading of Introduction.

The sentence is written as:

“In the ZENITH study, both treatments had a similar positive effect on regression of cardiac

and renal damage, whereas a larger proportion of patients showing carotid plaque regression was observed under zofenopril (31.6% vs. 16.1%;  $p = 0.047$ ), particularly in the subgroup of patients taking the low dose of zofenopril (30 mg) plus HCTZ 12.5 mg (4.7% vs 10.0% irbesartan 150 mg plus HCTZ 12.5 mg;  $p = 0.043$ ”.

The correct sentence should read:

“In the ZENITH study, both treatments had a similar positive effect on regression of cardiac

The online version of the original article can be found under doi:[10.1007/s12325-017-0497-8](https://doi.org/10.1007/s12325-017-0497-8).

S. Omboni (✉)  
Clinical Research Unit, Italian Institute of Telemedicine, Varese, Italy  
e-mail: stefano.omboni@iitelemed.org

E. Malacco  
L. Sacco Hospital, Milan, Italy

C. Napoli  
Department of Internal Medicine and Specialistic Units, U.O.C. of Clinical Immunology, Immunohematology, Transfusion Medicine and Organ Transplantation, Azienda Ospedaliera Universitaria (AOU), Second University of Naples, Naples, Italy

C. Napoli  
SDN Foundation and IRCCS, Naples, Italy

P. A. Modesti  
Department of Clinical and Experimental Medicine, Careggi Hospital, University of Florence, Florence, Italy

A. Manolis  
Asklepeion General Hospital of Voula, University of Athens, Athens, Greece

G. Parati  
Department of Cardiovascular, Neural and Metabolic Sciences, Istituto Auxologico Italiano, Milan, Italy

G. Parati  
Department of Medicine and Surgery, University of Milano-Bicocca, Milan, Italy

E. Agabiti-Rosei  
Division of Medicine and Surgery, Spedali Civili and University of Brescia, Brescia, Italy

C. Borghi  
Department of Internal Medicine, University of Bologna, Bologna, Italy

and renal damage, whereas a larger proportion of patients showing carotid plaque regression was observed under zofenopril (31.6% vs. 16.1%;  $p = 0.047$ ). Interestingly, in the subgroup of patients taking the low dose of zofenopril (30 mg) plus HCTZ 12.5 mg the rate of those exhibiting a carotid plaque at study end was significantly lower than that in the subgroup of patients taking the low dose of irbesartan (150 mg) plus HCTZ 12.5 mg (4.7% vs 10.0%;  $p = 0.043$ )”.

**Open Access.** This article is distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits any non-commercial use, distribution, and reproduction in any medium, provided you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons license, and indicate if changes were made.