



Correction: Healthcare costs associated with short-acting β 2-agonists in asthma: observational UK SABINA study

In the Research article by Attar-Zadeh et al. *Healthcare costs associated with short-acting β 2-agonists in asthma: observational UK SABINA study* BJGP Open 2023; DOI: <https://doi.org/10.3399/BJGPO.2023.0015>, the healthcare resource utilisation costs were extrapolated to the overall Integrated Care System (IC) UK population ($N = 1\,700\,000$) instead of the intended IC asthma population ($N = 85\,429$). This has been corrected throughout the article. Under the *Methods, Statistical analysis* section, the hypothetical 'average' IC asthma population has been corrected from 1 700 000 to 85 429.

In the *Results, Extrapolation of asthma-related HCRU to UK, IC and PCN populations* section, the sentence "The proportionately higher HCRU in the high-SABA group translated to an additional £41 186 153/year and £1 211 357 /year in the IC and PCN populations, respectively, versus the extrapolated low-SABA group" has been corrected to "The proportionately higher HCRU in the high-SABA group translated to an additional £2 069 701/year and £1 211 357/year in the IC and PCN asthma populations, respectively, versus the extrapolated low-SABA group".

We apologise for these errors. The online version has been corrected.