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# Corrigendum: Case report: Selexipag in pediatric pulmonary hypertension: initiation, transition, and titration

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## KEYWORDS

pediatric pulmonary hypertension, selexipag, treprostinil, initiation, transition, prostacyclin

## A Corrigendum on

### Case Report: Selexipag in pediatric pulmonary hypertension: initiation, transition, and titration

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In the published article, there was an error. The text of the article is corrected to reflect the most current pediatric selexipag data available at time of publication. This original statement in the abstract was from when the center-specific selexipag process was developed and implemented (April 2020). However by the time of publication (2023), more robust data on selexipag use was available and the manuscript is now corrected to reflect this.

A correction has been made to the **Abstract** section. The sentence previously stated:

“Although experience in the pediatric population is limited to case reports in older adolescent patients and selexipag is not approved for use in the pediatric pulmonary hypertension population, many pediatric centers are expanding the use of this therapy to this population.”

The corrected sentence appears below:

“Although experience in the pediatric population is generally limited and selexipag is not approved for use in the pediatric pulmonary hypertension population, many pediatric centers are expanding the use of this therapy to the younger population.”

A correction has been made to the **Introduction** section, paragraph two. The sentence previously stated:

“Therefore, although experience in the pediatric population is limited primarily to case reports in adolescent patients and selexipag is not approved for use in the pediatric

pulmonary hypertension population, many pediatric centers are expanding the use of this therapy to this population (4–8).”

The corrected sentence appears below:

“Despite the lack of randomized clinical trials in pediatrics, an increasing number of centers are reporting the successful use of

selexipag through case reports, series and observational studies (4–8).”

The authors apologize for this error and state that this does not change the scientific conclusions of the article in any way. The original article has been updated.