# Erratum - Challenges and evolution of the Italian National Health Service: between crisis and reform

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This corrects the article published in *Italian Journal of Medicine* 2025;19:2100 (https://doi.org/10.4081/itjm.2025.2100).

## Error description

1) Corrections to the reference list
During a post-publication check, we identified inaccuracies in several references. The corrections are purely bibliographic and do not affect the results or conclusions.
The correct list of references is provided below:
1. *Ricciardi W, Tarricone R. The evolution of the Italian National Health Service. Lancet. 2021 Dec 11;398(10317):2193-2206. doi: 10.1016/S0140-6736(21)01733-5.*
2. *Piscitelli P, Miani A, Schittulli F, Anelli F, Gesualdo L, Colao A. Recognizing the limits of the 21 different Italian healthcare regional systems: an opportunity for change? Lancet Reg Health Eur. 2025 Mar 10;51:101250. doi: 10.1016/j.lanepe.2025.101250.*
3. *Maruotti A. Catastrophe and impoverishment in paying for health care: the Italian case. Lancet Reg Health Eur. 2025 Mar 1;51:101251. doi: 10.1016/j.lanepe.2025.101251.*
4. *Lorusso S, Battilomo S, Boldrini R, Latella GP. Italian health data system: current data interconnection and digital health ecosystem evolution. Lancet Reg Health Eur. 2025 Mar 7;51:101259. doi: 10.1016/j.lanepe.2025.101259.*
5. *The Lancet Regional Health-Europe. The Italian health data system is broken. Lancet Reg Health Eur. 2025 Jan 3;48:101206. doi: 10.1016/j.lanepe.2024.101206.*

2) Clarification regarding Prof. Maruotti's work
A sentence in the Discussion could be interpreted differently from our intended meaning concerning Prof. Maruotti's contribution.
The correction is provided below:
- Current sentence: "Financial austerity has severely impacted human resources. Staff hiring freezes, reduced training slots in medicine and nursing, and increased retirement age, without proportional wage adjustments, have led to professional dissatisfaction and emigration of health workers".
- Correction: "Rising healthcare costs are increasingly being shifted onto households. Families face higher out-of-pocket spending, copays, deductibles, medications, private visits and tests and indirect costs like transportation and lost wages, which strain budgets and delay access to care".

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