

Correction

Ramiro S, Stolwijk C, van Tubergen A, *et al.* Evolution of radiographic damage in ankylosing spondylitis: a 12 year prospective follow-up of the OASIS study. *Ann Rheum Dis* 2015;74:52–9. In the last column of table 2 the figures are correct, but they have inadvertently been changed between rows. Consequently, the last sentence of the second section of the results (entitled ‘Progression in mSASSS’) should be adjusted to: ‘When taking only the first 2 year interval into consideration, 46% of patients did not show any mSASSS progression, 25% showed progression ≥ 2 units and 12% showed progression ≥ 5 units.’ The corrected table 2 is given below.

Table 2 Progression of radiographic damage over time

Progression [§]	Number of intervals out of all 2-year intervals (n (%)) (N=520)	Number of patients during all 2-year intervals (maximum progression)* (n (%)) (N=186)	Number of patients from the ‘12-year completers’ during all 2-year intervals (maximum progression)* (n (%)) (N=68)	Number of patients during the first 2-year interval (Y0–Y2) (n (%)) (N=164)
0 mSASSS-units	204 (39)	45 (24)	12 (18)	75 (46)
>0 & <1 mSASSS-units**	0 (0)	8 (4)	1 (1)	11 (7)
≥ 1 mSASSS-unit	282 (54)	133 (72)	54 (79)	78 (48)
≥ 2 mSASSS-units (mean progression) [¥]	152 (29)	86 (46)	39 (57)	41 (25)
≥ 1 & <3 mSASSS-units	161 (31)	60 (32)	21 (31)	42 (26)
≥ 3 mSASSS-units	121 (23)	73 (39)	33 (49)	36 (22)
≥ 3 & <5 mSASSS-units	58 (11)	32 (17)	12 (18)	16 (10)
≥ 5 mSASSS-units	63 (12)	41 (22)	21 (31)	20 (12)

mSASSS – modified Stoke Ankylosing Spondylitis Spine Score.

[§]Categories of progression are not mutually exclusive.

*Number and proportion of patients, whose maximum 2-year progression score, during follow-up (up to 12 years), met the criterion of each of the rows.

**This category of progression existed because of imputations, which made some status scores and hence progression scores have decimal values.

[¥]Mean progression taking all 2-year intervals into account.



CrossMark

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