Correction: *Dual neutralisation of interleukin-17A and interleukin-17F with bimekizumab in patients with active ankylosing spondylitis: results from a 48-week phase IIb, randomised, double blind, placebo-controlled, dose-ranging study*

Van der Heijde D, Gensler LS, Deodhar, *et al.* Dual neutralisation of interleukin-17A and interleukin-17F with bimekizumab in patients with active ankylosing spondylitis: results from a 48-week phase IIb, randomised, double blind, placebo-controlled, dose-ranging study. *Ann Rheum Dis* 2020;79:595–604. doi: 10.1136/annrheumdis-2020-216980

The authors have been made aware that one patient initially randomised to the bimekizumab 320 mg group withdrew from the study during the dose-blind period due to an event of oral candidiasis. Therefore, the current article contains an error in the Safety section of the Results and Discussion section:

In both instances, the statements regarding the lack of study withdrawals/discontinuations due to oral candidiasis are incorrect, as one patient withdrew from the study due to oral candidiasis.

The correct text should state:

Safety section of the Results

Oral candidiasis was reported by 3 (4.9%) patients in the bimekizumab 320 mg group during the double-blind period (table 5) and 16/303 (5.3%) of bimekizumab-treated patients in total. All cases were mild to moderate, none were serious, and resolved with systemic or topical antifungal treatment. One patient withdrew from the study during the dose-blind period due to oral candidiasis.

Discussion

Consistent with the mechanism of action of therapies targeting the IL-17 pathway, 16 cases (5%) of oral candidiasis were reported in bimekizumab-treated patients across the 48 weeks of treatment.^{11 33} However, all cases were mild or moderate, and most did not lead to discontinuation.

OPEN ACCESS

Open access This is an open access article distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited, appropriate credit is given, any changes made indicated, and the use is non-commercial. See: <http://creativecommons.org/licenses/by-nc/4.0/>.

© Author(s) (or their employer(s)) 2021. Re-use permitted under CC BY-NC. No commercial re-use. See rights and permissions. Published by BMJ.

Ann Rheum Dis 2021;**80**:e186. doi:10.1136/annrheumdis-2020-216980corr2