

Erratum to the prevalence of pulmonary hypertension in patients with obesity hypoventilation syndrome: a prospective observational study

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In the article that appeared on Page 779–788, Vol 9, No 3 (March 2017) Issue of the *Journal of Thoracic Disease* (1), there are some mistakes in the arterial blood gases, FEV₁ and FVC results presented in *Table 1*. The correct table should have been shown as below:

Table 1 Demographic and sleep characteristics of all participants and comparisons between patients with low and high pulmonary artery pressure (PAP)

	All (n=77)	High SPAP (n=53) (SPAP>40 mmHg)	Normal SPAP (n=24) (SPAP≤40 mmHg)	P value
Males (%)	21 (27.3)	13 (24.5)	8 (33.3)	0.5
Age (years)	60.5±11.7	62.0±11.5	56.3±11.4	0.057
Body mass index (kg/m ²)	43.2±10.4	44.3±11.6	42.8±10.1	0.6
Smoking				
Active (%)	4 (5.2)	4 (7.5)	0	1
Ex-smoker (%)	10 (13)	6 (11.3)	4 (16.6)	0.5
Epworth Sleepiness Scale	11.4±5.5	11.4±5.5	9.7±4.3	0.2
pH	7.38±0.7	7.38±0.1	7.4.0±0	0.7
PaCO ₂ (mmHg)	57.9±9.5	57.8±10.2	57.9±8.0	0.6
PaO ₂ (mmHg)	61.1±12.5	60.0±11.9	63.6±13.5	0.2
HCO ₃ (mmol/L)	33.5±5.8	33.0±6.2	33.6±7.7	0.8
Hemoglobin level (g/dL)	13.3±2.5	14.1±1.8	13.7±2.5	0.1
Hematocrit	39.5±7.2	41.6±5.3	40.6±7.3	0.2
FEV ₁ (% predicted)	56.1±17.8	51.0.8±16.9	63.2±20.2	0.02
FVC (% predicted)	55.2±19.4	53.0±15.8	64.4±21.4	0.003
FEV ₁ /FVC %	82.1±9.9	82.5±12.6	81.5±9.6	0.4
SPAP (mmHg)	54.1±22.5	65.5±16.3	27.0±4.3	<0.001

PaCO₂, arterial partial pressure of carbon dioxide; PaO₂, arterial partial pressure of oxygen; FEV₁, forced expiratory volume in 1 second; FVC, forced vital capacity; SPAP, systolic pulmonary artery pressure.

We regret the errors.

References

1. Almeneessier AS, Nashwan SZ, Al-Shamiri MQ, et al. The prevalence of pulmonary hypertension in patients with obesity hypoventilation syndrome: a prospective observational study. *J Thorac Dis* 2017;9:779-88.

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