





Corrigendum

Corrigendum to “Maternal and Perinatal Outcome in Women with Systemic Lupus Erythematosus: A Retrospective Bicenter Cohort Study”

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In the article titled “Maternal and Perinatal Outcome in Women with Systemic Lupus Erythematosus: A Retrospective Bicenter Cohort Study” [1], the authors identified some discrepancies in the data following its publication.

There are very small changes in incidence of HELLP syndrome ($N = 5$ instead of $N = 7$), preeclampsia ($N = 22$ instead of 24), and mild hypertensive disorder ($N = 19$ instead of 21), which showed no significant difference in the preeclampsia group. The incidence of preeclampsia <34 weeks, eclampsia, and HELLP syndrome were too low to conduct the generalized estimating equations (GEE) analysis; therefore, a new p value cannot be produced. Due to the very small differences, we believe that our conclusions are not changed. As already described on page 6 of the article: “In our cohort, we only found an association with APS and HELLP. However, considering the low numbers of HELLP in the paper by Moroni et al. (2 out of 71 pregnancies = 2.6%) and our study (7 out of 144

pregnancies = 4.9%), we do not venture to interpret these findings.”

The corrected Table 3 is shown below.

Additionally, in Section 3.3.2, the sentence “Of all preterm births (<37 weeks), 44.2% occurred spontaneously, and in the others, labour was induced. Main indications for preterm induction of labour (<37 weeks) were HD (54.1%) and IUFD (12.5%).” should be corrected to “Of all preterm births (<37 weeks), 61.9% occurred spontaneously. Main indications for preterm induction of labor (<37 weeks) were HD (30.8%) and IUGR (23.1%). IUFD as reason for preterm induction of labor occurred once (7.7%).”

Also, the email address of the corresponding author should be changed to “s.kroese@hagaziekenhuis.nl.”

The authors confirm that this does not affect the results and conclusions of the article, and the editorial board agrees to the publication of a corrigendum.

TABLE 3: Maternal and perinatal pregnancy complications in all study pregnancies.

	Total	SLE-aPL	SLE + aPL	SLE + APS	<i>p</i> value
<i>Maternal complications</i>	<i>N</i> = 144	<i>N</i> = 117	<i>N</i> = 14	<i>N</i> = 13	
Mild HD	19/144 (13.2)	16/117 (13.7)	1/14 (7.1)	2/13 (15.4)	ns
Severe HD	24/144 (16.7)	18/117 (15.4)	2/14 (14.3)	4/13 (30.8)	ns
Preeclampsia	22/141 (15.6)	17/114 (14.9)	2/14 (14.3)	3/13 (23.1)	ns
Onset preeclampsia <34 weeks	8/22 (36.4)	7/17 (41.2)	1/3 (33.3)	0 (0)	—
Eclampsia	1/140 (0.7)	1/113 (0.9)	0/14 (0)	0/13 (0)	—
HELLP syndrome	5/144 (3.5)	3/117 (2.6)	0/14 (0)	2/13 (15.4)	—
<i>Perinatal complications</i>	<i>n</i> = 147	<i>n</i> = 119	<i>n</i> = 15	<i>n</i> = 13	
IUFD	6/147 (4.1)	6/119	0/15	0/13	ns
Preterm birth	48/147 (32.7)	40/119 (33.6)	4/15 (26.7)	4/13 (30.8)	ns
SGA infant	21/142 (14.8)	18/115 (15.7)	2/15 (13.3)	1/12 (8.3)	ns
Neonatal lupus	2/147 (1.4)	2/119 (1.7)	0/15 (0)	0/13 (0)	ns

References

- [1] S. J. Kroese, C. N. H. Abheiden, B. S. Blomjous et al., “Maternal and perinatal outcome in women with systemic lupus erythematosus: a retrospective bicenter cohort study,” *Journal of Immunology Research*, vol. 2017, Article ID 8245879, 2017.