



Correction to: Effectiveness and safety profile of cladribine in an Italian real-life cohort of relapsing–remitting multiple sclerosis patients: a monocentric longitudinal observational study

Chiara Zanetta^{1,2} · Maria A. Rocca^{1,3,4} · Alessandro Meani³ · Vittorio Martinelli¹ · Laura Ferrè^{1,2} · Lucia Moiola¹ · Massimo Filippi^{1,2,3,4,5}

© The Author(s) 2023

Correction to: Journal of Neurology

<https://doi.org/10.1007/s00415-023-11700-7>

The original version of this article unfortunately contained a mistake. The several values in Table 1 have shifted up from the correct row. Category of *N* Previous treatments, *N%*” has 4 sub-entries, with which the values should be aligned. And the same is for “Type of Last Previous Treatments, *N%*”, which has 7 sub-entries with which the values should be aligned.

The corrected Table 1 is given in the following page.

The original article can be found online at <https://doi.org/10.1007/s00415-023-11700-7>.

✉ Massimo Filippi
filippi.massimo@hsr.it

¹ Neurology Unit, IRCCS San Raffaele Scientific Institute, Via Olgettina, 60, 20132 Milan, Italy

² Neurorehabilitation Unit, IRCCS San Raffaele Scientific Institute, Milan, Italy

³ Neuroimaging Research Unit, Division of Neuroscience, IRCCS San Raffaele Scientific Institute, Milan, Italy

⁴ Vita-Salute San Raffaele University, Milan, Italy

⁵ Neurophysiology Service, IRCCS San Raffaele Scientific Institute, Milan, Italy

Table 1 Demographic, clinical and MRI characteristics of multiple sclerosis patients starting cladribine at baseline

	All	Naives	1st-lines	2nd-lines	<i>p</i>
Total <i>N</i> (female <i>N</i> ; %)	114 (82; 71.9)	57 (42, 73.7)	35 (21, 60.0)	22 (19, 86.4)	0.102 ^a
Age at CLAD start (years), mean (SD)	33.0 (9.2)	32.4 (9.9)	33.3 (9.3)	34.1 (7.1)	0.747 ^b
MS duration pre CLAD start (years), median (IQR)	3.0 (0.7–8.3)	0.7 (0.3–1.5)	7.2 (3.1–11.7)	8.3 (5.1–12.5)	< 0.001 ^c
EDSS at CLAD start, median (IQR)	2.0 (1.5–2.5)	2.0 (1.5–2.5)	1.5 (1.0–2.5)	1.5 (1.0–2.5)	0.159 ^c
1 year before ARR, mean (SD)	1.3 (0.8)	1.6 (0.6)	1.1 (0.8)	1.0 (0.9)	< 0.001 ^c
2 years before ARR, mean (SD)	1.2 (0.8)	1.3 (0.6)	1.0 (0.7)	1.3 (1.1)	0.068 ^c
Treatment characteristics					< 0.001 ^c
<i>N</i> previous treatments, median (IQR)	0.5 (0.0–2.0)	–	1.0 (1.0–2.0)	2.0 (1.0–3.0)	
Category of <i>N</i> previous treatments, <i>N</i> (%)					
0	57 (50.0)	57 (100.0)	–	–	
1	26 (22.8)	–	18 (51.4)	8 (36.4)	
2	15 (13.2)	–	10 (28.6)	5 (22.7)	
> 2	16 (14.0)	–	7 (20.0)	9 (40.9)	
Type of last previous treatments, <i>N</i> (%)					
Interferon	4 (3.5)	–	4 (11.4)	–	
Glatiramer acetate	9 (7.9)	–	9 (25.7)	–	
Teriflunomide	5 (4.4)	–	5 (14.3)	–	
Dimethyl fumarate	17 (14.9)	–	17 (48.6)	–	
Fingolimod	17 (14.9)	–	–	17 (77.3)	
Natalizumab	4 (3.5)	–	–	4 (18.2)	
Ocrelizumab	1 (0.9)	–	–	1 (4.5)	
Brain T2-weighted lesion count, median (IQR)	16.0 (10.0–30.0)	16.0 (10.0–33.5)	13.5 (10.0–25.0)	22.0 (10.0–31.0)	0.538 ^c
Brain gadolinium-enhancing lesion count, median (IQR)	1.0 (0.0–3.0)	2.0 (1.0–3.0)	1.0 (0.0–2.0)	1.0 (0.0–1.5)	0.019 ^c
Follow-up post CLAD start (m), median (IQR)	25.2 (14.6–38.7)	24.0 (14.0–39.6)	22.9 (16.2–34.3)	30.9 (14.6–43.5)	0.558 ^c

N number of subjects included in the study, *CLAD* cladribine, *Y* years, *SD* standard deviation, *IQR* interquartile range, *MS* Multiple Sclerosis, *EDSS* Expanded Disability Status Scale, *ARR* Annualized Relapse Rate, *m* months

^aFisher's exact test

^blinear models

^cKruskal–Wallis Test

Open Access This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated

otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit <http://creativecommons.org/licenses/by/4.0/>.