

Repetitive Saliva Swallowing Test Predicts COPD Exacerbation [Corrigendum]

Yoshimatsu Y, Tobino K, Sueyasu T, et al. *Int J Chron Obstruct Pulmon Dis*. 2019;14:2777–2785.

Page 2780, left column, line 2, the text “42.9% and 96.4%” should read “96.4% and 42.9%”.

Page 2780, left column, lines 1 and 2 from the bottom, the text “[...] in patients with a history of exacerbation in the past year than in those with no such history [...]” should read “[...] in patients with no history of exacerbation in the past year than in those with a history [...]”.

Figure 1 on page 2780, the sensitivity and specificity values are incorrect. The correct Figure 1 is shown below.

Page 2781, Figure 2 legend, the text “[...] in patients with a history of exacerbation in the past year than in those with no such history [...]” should read “[...] in patients with no history of exacerbation in the past year than in those with a history [...]”.

Page 2782, Figure 3 legend, the text “[...] in patients with a history of exacerbation in the past year than in those with no such history [...]” should read “[...] in patients with no history of exacerbation in the past year than in those with a history [...]”.

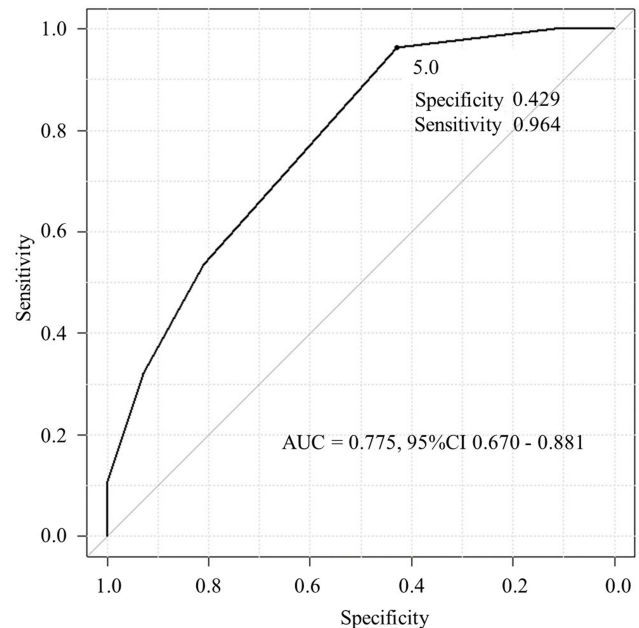


Figure 1 Results of an ROC curve analysis using the swallow frequency in RSST. When the RSST cut-off value was set at 5.0, the sensitivity and specificity were 0.964 and 0.429, respectively, and the area under the ROC curve was 0.775.

The authors apologize for these errors and advise they do not affect the results of the paper.

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