Attitude and willingness of attendance for participating in or completing acupuncture trials: a cross-sectional study [Corrigendum]

Li X, Cao H, Zhang Y, Hu R, Lai B, Zhao N, Hu H, Xie Z, Liu JP. *Patient Preference Adherence*. 2019;13:53–61.

Page 53, Abstract, Results section, the text “Multivariate LRA showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70) to be an important factor, while the participants having medical insurance (OR 1.45, 95% CI –0.20–0.93) thought informed consent was important. Meanwhile, participants with higher education preferred regular follow-up (OR 1.16, 95% CI 0.02–0.28).” should read “Multivariate LRA showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70) to be an important factor, while the participants having medical insurance (OR 1.45, 95% CI 0.82–2.54) thought informed consent was important. Meanwhile, participants with higher education preferred regular follow-up (OR 1.16, 95% CI 1.02–1.32).”

Page 57, The LRA for factors influencing patients’ involvement in acupuncture clinical trials section, third paragraph, the text “Furthermore, the multivariate LRA was conducted to explore the relationship between demographic characteristics and potential influential factors. The results showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70),

treatment regimen (OR 0.55, 95% CI –0.81 to –0.38), and timely follow-up (OR 0.92, 95% CI –0.53 to –0.07) as more important factors; the participants who had medical insurance (OR 1.45, 95% CI –0.20–0.93) thought that informed consent was more important. Meanwhile, participants with higher education level preferred regular follow-up (OR 1.16, 95% CI 0.02–0.28), as well as by those who had medical insurance (OR 2.07, 95% CI 0.19–1.26) or whose medical expenses were paid by public expense (OR 3.89, 95% CI 0.34–2.37).” should read “Furthermore, the multivariate LRA was conducted to explore the relationship between demographic characteristics and potential influential factors. The results showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70), treatment regimen (OR 0.55, 95% CI 0.44–0.68), and timely follow-up (OR 0.92, 95% CI 0.59–0.93) as more important factors; the participants who had medical insurance (OR 1.45, 95% CI 0.82–2.54) thought that informed consent was more important. Meanwhile, participants with higher education level preferred regular follow-up (OR 1.16, 95% CI 1.02–1.32), as well as by those who had medical insurance (OR 2.07, 95% CI 1.21–3.53) or whose medical expenses were paid by public expense (OR 3.89, 95% CI 1.40–10.70).”

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