Open Access Full Text Article

CORRIGENDUM

Association Between Experimental Pain Thresholds and Trajectories of Postoperative Recovery Measures After Benign Hysterectomy [Corrigendum]

Lukas P, Gerdle B, Nilsson L, et al. J Pain Res. 2022;15:3657-3674.

Table 3 on page 3663, the number of patients in PPT was 403 and not 402, the corrected Table 3 is below.

Table 5 on page 3665, several of the numbers and frequencies, in particular in the HPT >25th-percentile column are incorrect, and the legends of the CPT groups has been mixed up. However, all p-values are correctly noted. The corrected Table 5 is below.

Figure 2 on pages 3667 and 3668, the graphic legends for the CPT groups, have been mixed up in Figure 2A–C, the corrected Figure 2 is below.

Table 3 Pain threshold Modalities, Locations Of Measurement, the Mean of the Three Measurements on Each Location, and theAverage of All Locations. Median (Range) and Lower Quartiles Presented for Pressure and Heat Pain Thresholds, and Upper Quartilefor Cold

Pain Threshold Modality	Location of Measurement ^a		Mean (SD)	Median (Range)	25th -Percentile	75th -Percentile
PPT	L5		625 kPa (280)			
	Abd. right side		414 kPa (215)			
	Abd. left side		411 kPa (189)			
	Dominant leg		578 kPa (261)			
Average PPT		(n=403)	507 kPa (206)	482 kPa (93–1384)	368 kPa	-
НРТ	L5		46.6°C (3.5)			
	Abd. right side		47.8°C (2.9)			
	Abd. left side		47.7°C (2.9)			
	Dominant leg		47.8°C (2.6)			
Average HPT		(n=406)	47.5°C (2.6)	48.1°C (36–51)	46.4°C	-
СРТ	L5		5.0°C (8.9)			
	Abd. right side		3.1°C (6.9)			
	Abd. left side		4.1°C (7.9)			
	Dominant leg		3.2°C (7.0)			
Average CPT		(n=406)	3.8°C (6.4)	0.0°C (0 – 27)	-	5.7°C

Notes: ^aThe locations of measurement: L5, the medial plane of the low back just below the fifth lumbar vertebra; Abd. right side, the abdominal wall 7 cm to the right of the umbilicus; Abd. left side, the abdominal wall 7 cm to the left of the umbilicus; and the dominant leg, 4 cm distally from the tuberositas tibiae (the control area). **Abbreviations:** CPT, cold pain threshold; HPT, heat pain threshold; PPT, pressure pain threshold; SD, standard deviation.

Table 5 Demographic and Clinical Factors in Relation to Pain Thresholds for Pressure (PPT) and Heat (HPT) Categorized After the 25th -Percentile, and Cold (CPT) After the 75th Percentile

Factor	Mode of Pain Threshold											
	РРТ			НРТ			СРТ					
	≤ 25th -Percentile	> 25th -Percentile	p-value	≤ 25th -Percentile	> 25th -Percentile	p- value	≥ 75th -Percentile	< 75th -Percentile	p-value			
Age (years)	47.1 (5.8)	46.4 (5.3)	0.21ª	46.4 (5.3)	46.6 (5.5)	0.76 ^a	45.9 (5.8)	46.8 (5.3)	0.18ª			
Age group												
≤ 40 years	II (I0. 9 %)	40 (13.2%)	0.28 ^b	17 (16.7%)	35 (11.5%)	0.32 ^b	18 (17.7%)	34 (11.2%)	0.18 ^t			
40–50 years	62 (61.4%)	201 (66.6%)		61 (59.8%)	203 (66.8%)		60 (58.8%)	204 (67.1%)				
> 50 years	28 (27.7%)	61 (20.2%)		24 (23.5%)	66 (21.7%)		24 (23.5%)	66 (21.7%)				
BMI (kg/m ²)	27.2 (4.4)	26.5 (4.5)	0.22 ^a	26.6 (4.1)	26.7 (4.6)	0.85 ^a	26.7 (4.1)	26.6 (4.6)	0.83 ^a			
BMI group												
Normal weight	41 (40.6%)	136 (45.0%)	0.27 ^b	44 (43.1%)	136 (44.7%)	0.96 ^b	43 (42.2%)	137 (45.1%)	0.81 ^t			
Overweight	31 (30.7%)	103 (34.1%)		35 (34.3%)	100 (32.9%)		34 (33.3%)	101 (33.2%)				
Obese	29 (28.7%)	63 (20.9%)		23 (22.6%)	68 (22.4%)		25 (24.5%)	66 (21.7%)				
Parous	93 (92.1%)	254 (85.0%)	0.07 ^c	86 (84.3%)	265 (87.8%)	0.37 ^c	89 (87.3%)	262 (86.8%)	0.90			
Smoking	14 (14.0%)	35 (12.0%)	0.61 ^c	(.3%)	38 (12.8%)	0.71°	(.0%)	38 (12.9%)	0.61			
Gainfully employed	89 (88.1%)	280 (92.7%)	0.15 ^c	91 (89.2%)	281 (92.4%)	0.31°	91 (89.2%)	281 (92.4%)	0.319			
Physical workload												
Sedentary	19 (20.6%)	79 (27.8%)	0.38 ^b	25 (26.6%)	75 (26.3%)	0.77 ^b	24 (25.3%)	76 (26.8%)	0.47 ^t			
Medium	27 (29.4%)	80 (28.2%)		29 (30.8%)	78 (27.4%)		23 (24.2%)	84 (29.6%)				
Heavy	46 (50.0%)	125 (44.0%)		40 (42.6%)	132 (46.3%)		48 (50.5%)	124 (43.6%)				
Comorbidity												
Cardio-vascular disease	20 (19.8%)	37 (12.3%)	0.06 ^c	18 (17.7%)	39 (12.8%)	0.23 ^c	18 (17.6%)	39 (12.8%)	0.23			
Mental illness	16 (15.8%)	38 (12.6%)	0.41 ^c	20 (19.6%)	34 (11.2%)	0.03 ^c	20 (19.6%)	34 (11.2%)	0.039			
Chronic pain disorder	32 (31.7%)	61 (20.2%)	0.02 ^c	33 (32.4%)	63 (20.7%)	0.02 ^c	33 (32.4%)	63 (20.7%)	0.02			
Previous laparotomy	30 (29.7%)	101 (33.9%)	0.44 ^c	35 (34.6%)	97 (32.2%)	0.65 ^c	34 (33.7%)	98 (32.6%)	0.849			
Hysterectomy indication												
Myoma uteri	43 (43.0%)	151 (50.2%)	0.31 ^d	50 (49.0%)	143 (47.4%)	0.99 ^d	48 (47.1%)	145 (48.0%)	0.87 ^c			
Bleeding disorder	30 (30.0%)	75 (25.0%)		27 (26.5%)	79 (26.2%)		30 (29.4%)	76 (25.2%)				
Myoma and bleeding	8 (8.0%)	36 (12.0%)		10 (9.8%)	35 (11.6%)		9 (8.8%)	36 (11.9%)				
Cervical dysplasia	(.0%)	25 (8.3%)		9 (8.8%)	28 (9.3%)		9 (8.8%)	28 (9.3%)				
Pain	8 (8.0%)	14 (4.7%)		6 (5.9%)	17 (5.9%)		6 (5.9%)	17 (5.6%)				
ASA classification	. ,	. ,						. ,				
Class I	56 (55.4%)	211 (69.9%)	0.02 ^b	64 (62.8%)	206 (67.7%)	0.63 ^b	62 (60.8%)	208 (68.4%)	0.21 ^t			
Class 2	42 (41.6%)	82 (27.1%)		35 (34.3%)	89 (29.3%)		38 (37.2%)	86 (28.3%)				
Class 3	3 (3.0%)	9 (3.0%)		3 (2.9%)	9 (3.0%)		2 (2.0%)	10 (3.3%)				

Notes: Figures indicate mean (SD) or number of women (%).^aOne-way analysis of variance;^bPearson's chi-squared test (df=2);^cPearson's chi-squared test (df=1);^dPearson's chi-squared test (df=4). Abbreviations: BMI, body mass index; CPT, cold pain threshold; HTP, heat pain threshold; PPT, pressure pain threshold.

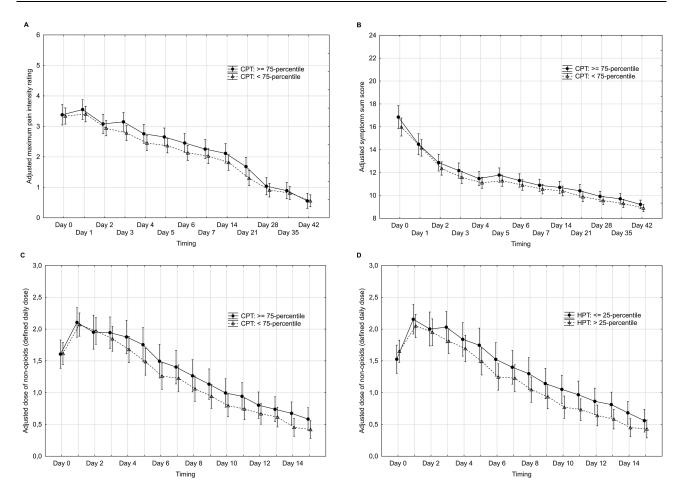


Figure 2 Graphic presentation of outcome variables that were statistically significant between pain threshold categories (repeated measures ANOVA adjusted for confounders). (A) Maximum pain intensity in relation to cold pain threshold (CPT) categories. (B) Symptom sum score in relation to CPT categories. (C) Dose of non-opioids (defined daily dose) in relation to CPT categories. (D) Dose of non-opioids (defined daily dose) in relation to heat pain threshold (HPT) categories. Plots indicate means and bars show 95% confidence intervals.

The authors apologize and advise none of these errors influence the results or the conclusion.

Journal of Pain Research

Dovepress

Publish your work in this journal

The Journal of Pain Research is an international, peer reviewed, open access, online journal that welcomes laboratory and clinical findings in the fields of pain research and the prevention and management of pain. Original research, reviews, symposium reports, hypothesis formation and commentaries are all considered for publication. The manuscript management system is completely online and includes a very quick and fair peer-review system, which is all easy to use. Visit http://www.dovepress.com/testimonials.php to read real quotes from published authors.

Submit your manuscript here: https://www.dovepress.com/journal-of-pain-research-journal

f 🄰 in 🕨 DovePress

679