Correction

Longterm Survival and Associated Risk Factors in Patients with Adult-onset Idiopathic Inflammatory Myopathies and Amyopathic Dermatomyositis: Experience in a Single Institute in Japan

Yamasaki Y, Yamada H, Ohkubo M, Yamasaki M, Azuma K, Ogawa H, Mizushima M, Ozaki S. Longterm survival and associated risk factors in patients with adult-onset idiopathic inflammatory myopathies and amyopathic dermatomyositis: Experience in a single institute in Japan. J Rheumatol 2011;38:1636-43. In Figures 1, 2, and 3 the details of numbers of patients are incorrect. Here we publish corrected Figures 1, 2, and 3. We regret the error.
doi:10.3899/jrheum.100002C1

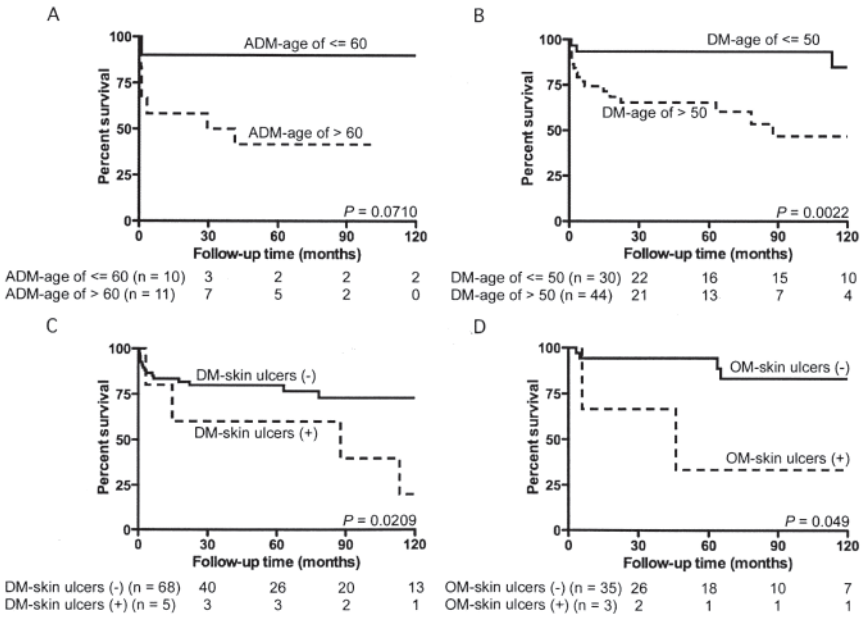

Figure 1. Survival curves of patients with idiopathic inflammatory myopathies including amyopathic dermatomyositis (A) and patients classified by each subgroup (B). Shown below the figures are number of patients at risk at 30, 60, 90, and 120 months. PM: polymyositis; OM: overlap myositis; DM: dermatomyositis; ADM: amyopathic dermatomyositis; CAM: cancer-associated myositis.

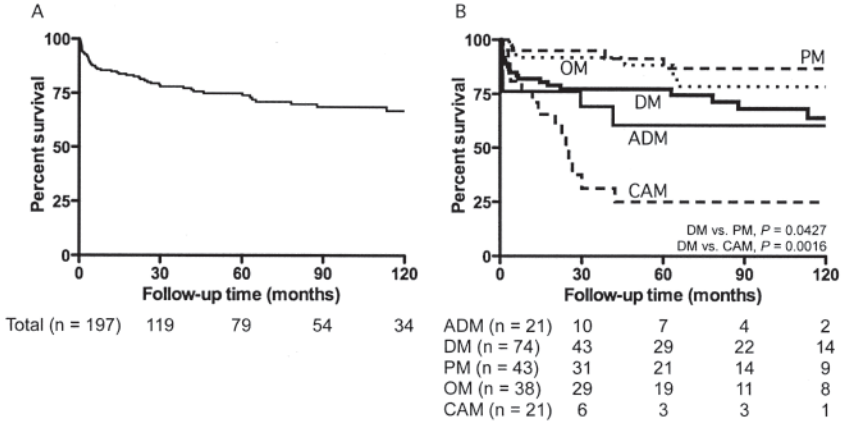

Figure 2. Survival curves in patients with clinically amyopathic dermatomyositis (ADM; A) and primary dermatomyositis (DM; B) sorted by age at initial presentation. Comparison of survival curves in patients with or without skin ulcers in primary DM (C) and overlap myositis (OM; D). Number of patients at risk at 30, 60, 90, and 120 months shown below the figures.

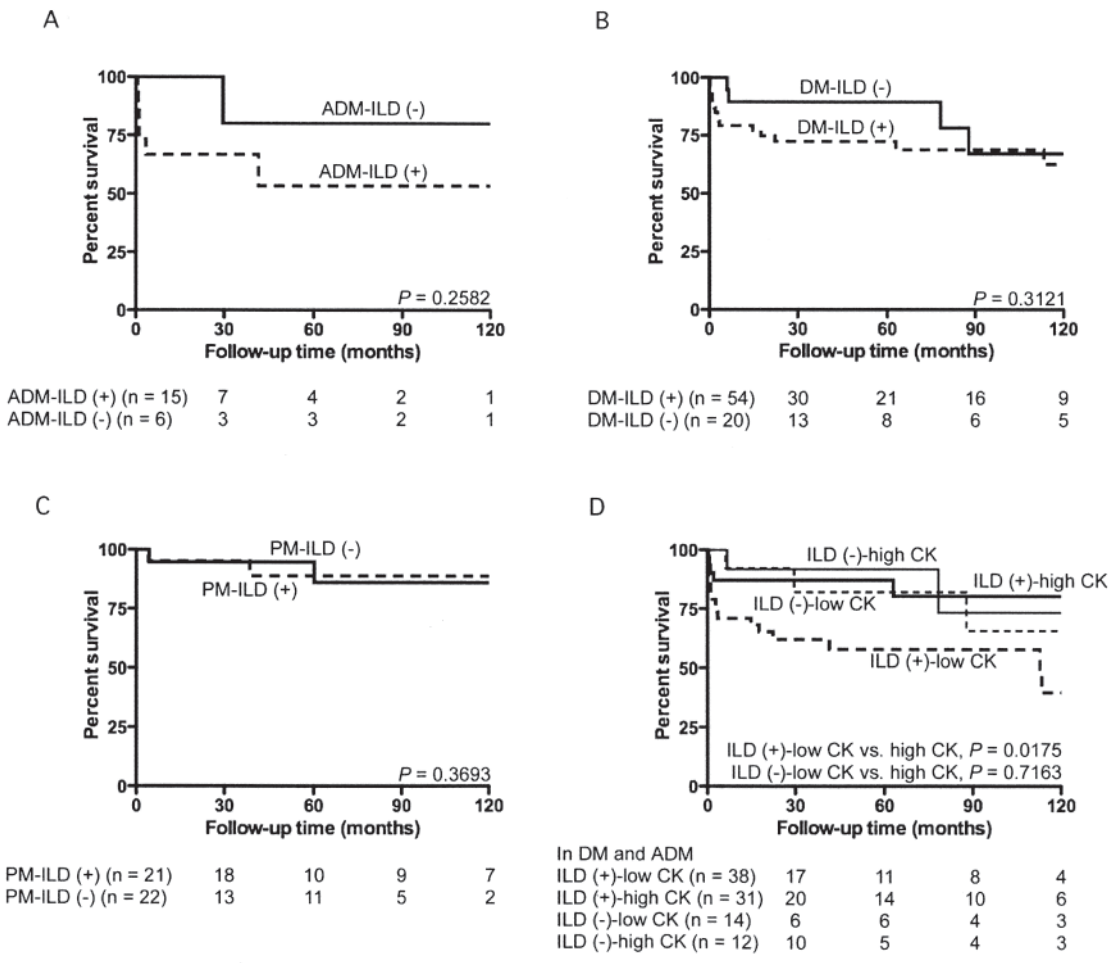

Figure 3. Survival curves of patients with or without ILD in clinically amyopathic dermatomyositis (ADM; A), primary dermatomyositis (DM; B), and primary polymyositis (PM; C). Comparison of survival curves between patients with lower serum creatine kinase levels (< 500 IU/l) and higher CK levels (≥ 500 IU/l) in patients with ADM and DM, subdivided by the presence or absence of ILD (D). Number of patients at risk at 30, 60, 90, and 120 months shown below the figures. ILD: interstitial lung disease; CK: creatine kinase.