

CORRECTION

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Correction: Patient-reported outcomes of upadacitinib versus abatacept in patients with rheumatoid arthritis and an inadequate response to biologic disease-modifying antirheumatic drugs: 12- and 24-week results of a phase 3 trial

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Following publication of the original article [1], the authors reported an error in Additional files 1 and 2 as the axes on the supplemental figures were unclear. The additional files were updated.

The original article [1] has been updated.

Supplementary Information

The online version contains supplementary material available at <https://doi.org/10.1186/s13075-022-02940-5>.

Additional file 1: Figure S1. Proportion of Patients Reporting PRO Scores \geq Normative Values at Baseline and weeks 12 and 24. ^aABA IV at day 1 and weeks 2, 4, 8, 12, 16, and 20 (<60 kg: 500 mg; 60–100 kg: 750 mg; >100 kg: 1,000 mg). ABA, abatacept; BL, baseline; EQ-5D-5L (index score), EQ-5D 5-Level; FACIT-F, Functional Assessment of Chronic Illness Therapy-Fatigue; HAQ-DI, Health Assessment Questionnaire Disability Index; IV, intravenous; LDA, low disease activity; MCS, Mental Component Summary; PCS,

Physical Component Summary; PRO, patient-reported outcome; PtGA, Patient Global Assessment of Disease Activity; SF-36, 36-Item Short Form Health Survey; UPA, upadacitinib. * $P < 0.05$ for UPA vs ABA. † $P = 0.05$ for UPA vs ABA.

Additional file 2: Figure S2. Proportion of Patients Reporting SF-36 Scores \geq Normative Values at Baseline and weeks 12 and 24. ^aABA IV at day 1 and weeks 2, 4, 8, 12, 16, and 20 (<60 kg: 500 mg; 60–100 kg: 750 mg; >100 kg: 1,000 mg). ABA, abatacept; BL, baseline; BP, bodily pain; GH, general health; IV, intravenous; MH, mental health; PF, physical functioning; RE, role emotional; RP, role physical; SF, social functioning; SF-36, 36-Item Short Form Health Survey; UPA, upadacitinib; VT, vitality. * $P < 0.05$ for UPA vs ABA.

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1. Bergman M, Tundia N, Martin N, et al. Patient-reported outcomes of upadacitinib versus abatacept in patients with rheumatoid arthritis and an inadequate response to biologic disease-modifying antirheumatic drugs: 12- and 24-week results of a phase 3 trial. *Arthritis Res Ther.* 2022;24:155. <https://doi.org/10.1186/s13075-022-02813-x>.

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