## CORRECTION

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# Check for updates

**open-label study** Heinz Reichmann<sup>1</sup>, Andrew Lees<sup>2</sup>, José-Francisco Rocha<sup>3</sup>, Diogo Magalhães<sup>3,5</sup>, Patrício Soares-da-Silva<sup>4,5,6\*</sup> and the

Correction to: Effectiveness and safety of

opicapone in Parkinson's disease patients

with motor fluctuations: the OPTIPARK

OPTIPARK investigators

### Correction to: Transl Neurodegener (2020) 9:9 https://doi.org/10.1186/s40035-020-00187-1

In this published article [1], the efficacy data for the below outcomes were unfortunately not supplied based on the Full Analysis Set (FAS) at 3 and/or 6 months for specific outcomes under the statistical analysis plan (SAP). The SAP specified that the efficacy data should be based overall on the FAS at 3 months for the primary (with last observation carried forward, LOCF) and secondary (no LOCF) efficacy endpoints and 6 months for UK only (no LOCF). The amendments do not change the conclusions of the paper, and the corrected data are given below.

#### Clinician and patient global impressions of change Correction to CGI-C 6-month data (UK patients only)

[ ... ] For those UK patients (n = 95) who were also assessed at 6 months, 85.3% were judged as improved since commencing treatment (8.4% very much improved and 49.5% much improved) while 8.4% were judged as showing 'no change' and 6.4% as having worsened. [ ... ]

Correction to Fig. 2b **Rating scale outcomes** *Correction to UPDRS analyses (Table 2)* 

The original article can be found online at https://doi.org/10.1186/s40035-020-00187-1.

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N numbers for UPDRS Part II were 475 at baseline and 389 at 3 months (Visit 4); results of the change from baseline analysis remain unchanged. N numbers for UPDRS Part III were 476 at baseline and 391 at 3 months; results of the change from baseline analyses remain unchanged.

*Correction to* Table 2.

#### Levodopa dosing

#### Correction to levodopa dosing

After 3 months of treatment with opicapone, most patients remained on the same total daily levodopa frequency (77.1% had no change, 10.4% had an increase and 12.5% had a decrease in dosing frequency), resulting in an overall mean change of approximately – 10 mg/day. [...].

#### Discussion

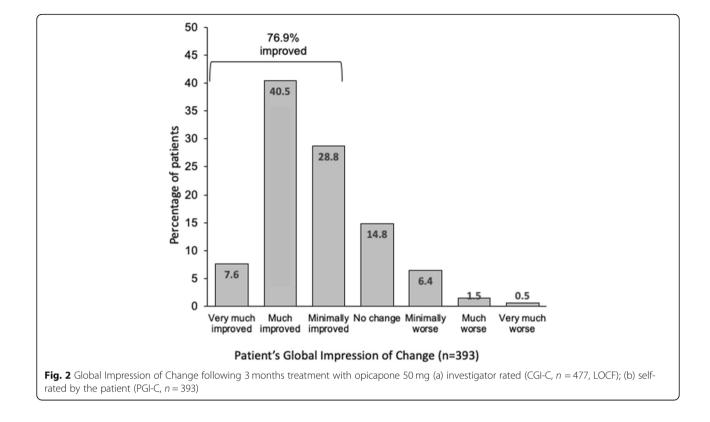
#### Correction to discussion

[ ... ] These judgements made by the investigators were corroborated by the patients themselves.

with 48.1% patients reporting they were much or very much improved after 3 months treatment with opicapone 50 mg. [  $\dots$  ]



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#### Table 2 Rating scale assessments

Rating scale	
[]	
UPDRS Part II (ADL during OFF); mean $\pm$ SD	
Baseline ( $n = 475$ )	17.1 ± 7.0
3 months ( <i>n</i> = 389)	$13.9\pm6.8$
Change from baseline ( $n = 389$ )	$-3.0\pm4.6$
P value vs. baseline	< 0.0001
UPDRS Part III (motor scores during ON); mean $\pm$ SD	
Baseline ( $n = 476$ )	26.5 ± 12.1
3 months (n = 391)	21.5 ± 11.0
Change from baseline ( $n = 391$ )	$-4.6 \pm 8.1$
P value vs. baseline	< 0.0001
[]	

NMSS Non-motor symptom scale, UPDRS Unified Parkinson's Disease Rating Scale, PDQ-8 Parkinson's Disease Questionnaire

#### Supplementary material

Correction to Supplementary Table 2

Results of the change from baseline in perceptual problems/hallucinations was updated to  $0.0 \pm 2.01$ . Results from all other analyses remain unchanged.

Supplementary Table 2 Change from baseline in NMSS domains

NMSS domain	Mean ± SD
[]	
Perceptual problems/hallucinations	
Baseline	0.8 ± 2.45
Change from baseline (p value)	$0.0 \pm 2.01 \ (p = 0.7437)$
[]	

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