Exercise therapy versus arthroscopic partial meniscectomy for degenerative meniscal tear in middle aged patients: randomised controlled trial with two year follow-up

Some errors have been found in the descriptive statistics of this paper (BMJ 2016;354:i3740, doi:10.1136/bmj.i3740, 20 July 2016) by Kise and colleagues. The errors are insignificant and do not influence the results or interpretation of the study (see below and table in supplementary file). The study and subscale specific cut-off for a clinically relevant difference between groups in KOOS (primary outcome) was reported to be 10.1 but the correct cut-off value is 10.9. This means that for the KOOS subscales (secondary outcomes) the correct cut-off values are: pain 8.1 [not 7.4], symptoms 9.2 [not 8.4], activities of daily living 5.0 [not 4.1], sport and recreation function 11.5 [not 10.9], and quality of life 15.1 [not 13.6].

Three sentences in the results section are also affected. Firstly, in the first paragraph of the primary outcomes subsection the text should have said: The study specific and subscale specific cut-off for a clinically relevant difference between groups in KOOS was 10.9 [not 10.1]. Secondly, in the fourth paragraph of the primary outcomes subsection the text should have said: For the intention to treat population, 81% [not 80%] in the exercise group and 77% [not 81%] in the meniscectomy group improved more than 10.9 [not 10.1] points, with little difference in the per protocol (88% [not 81%] and 76% [not 79%], respectively) and as treated populations (88% [not 81%] and 76% [not 79%], respectively). Finally, in the first paragraph of the secondary outcomes subsection the text should have said: The study specific and subscale specific cut-offs for interpretation of clinically relevant differences were: 8.1 [not 7.4] for pain, 9.2 [not 8.4] for symptoms, 5.0 [not 4.1] for activities of daily living, 11.5 [not 10.9] points for function in sport and recreation, and 15.1 [not 13.6] points for knee related quality of life.

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