#### **Open Access Full Text Article**

## CORRIGENDUM

# Attitude and willingness of attendance for participating in or completing acupuncture trials: a cross-sectional study [Corrigendum]

Li X, Cao H, Zhang Y, Hu R, Lai B, Zhao N, Hu H, Xie Z, Liu JP. *Patient Prefer Adherence*. 2019;13:53–61.

Page 53, Abstract, Results section, the text "Multivariate LRA showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70) to be an important factor, while the participants having medical insurance (OR 1.45, 95% CI –0.20–0.93) thought informed consent was important. Meanwhile, participants with higher education preferred regular follow-up (OR 1.16, 95% CI 0.02–0.28)." should read "Multivariate LRA showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70) to be an important factor, while the participants having medical insurance (OR 1.45, 95% CI 0.82–2.54) thought informed consent was important. Meanwhile, participants with higher education preferred regular follow-up (OR 1.16, 95% CI 1.02–1.32)."

Page 57, The LRA for factors influencing patients' involvement in acupuncture clinical trials section, third paragraph, the text "Furthermore, the multivariate LRA was conducted to explore the relationship between demographic characteristics and potential influential factors. The results showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70),

treatment regimen (OR 0.55, 95% CI -0.81 to -0.38), and timely follow-up (OR 0.92, 95% CI -0.53 to -0.07) as more important factors; the participants who had medical insurance (OR 1.45, 95% CI -0.20-0.93) thought that informed consent was more important. Meanwhile, participants with higher education level preferred regular follow-up (OR 1.16, 95% CI 0.02-0.28), as well as by those who had medical insurance (OR 2.07, 95% CI 0.19-1.26) or whose medical expenses were paid by public expense (OR 3.89, 95% CI 0.34-2.37)." should read "Furthermore, the multivariate LRA was conducted to explore the relationship between demographic characteristics and potential influential factors. The results showed that elder people considered cost (OR 1.36, 95% CI 1.09–1.70), treatment regimen (OR 0.55, 95% CI 0.44-0.68), and timely follow-up (OR 0.92, 95% CI 0.59-0.93) as more important factors; the participants who had medical insurance (OR 1.45, 95% CI 0.82-2.54) thought that informed consent was more important. Meanwhile, participants with higher education level preferred regular follow-up (OR 1.16, 95% CI 1.02-1.32), as well as by those who had medical insurance (OR 2.07, 95% CI 1.21-3.53) or whose medical expenses were paid by public expense (OR 3.89, 95% CI 1.40-10.70)."

### **Patient Preference and Adherence**

## **Dove**press

599

Publish your work in this journal

Patient Preference and Adherence is an international, peer-reviewed, open access journal that focuses on the growing importance of patient preference and adherence throughout the therapeutic continuum. Patient satisfaction, acceptability, quality of life, compliance, persistence and their role in developing new therapeutic modalities and compounds to optimize clinical outcomes for existing disease states are major areas of interest for the journal. This journal has been accepted for indexing on PubMed Central. 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: http://www.dovepress.com/patient-preference-and-adherence-journa



Patient Preference and Adherence 2019:13 599

© 2019 Li et al. This work is published and licensed by Dove Medical Press Limited. The full terms of this license are available at https://www.dovepress.com/terms.php and incorporate the Creative Commons Attribution — Non Commercial (unported, v3.0) License (http://creativecommons.org/licenses/by-nd/3.0/). By accessing the work you hereby accept the Terms. Non-commercial uses of the work are permitted without any further permission from Dove Medical Press Limited, provided the work is properly attributed. For permission for commercial use of this work, please see paragraphs 4.2 and 5 of our Terms (https://www.dovepress.com/terms.php).