

CORRECTION

# Correction: Combining MAD and CPAP as an effective strategy for treating patients with severe sleep apnea intolerant to high-pressure PAP and unresponsive to MAD

Hsiang-Wen Liu, Yunn-Jy Chen, Yi-Chun Lai, Ching-Yi Huang, Ya-Ling Huang, Ming-Tzer Lin, Sung-Ying Han, Chi-Ling Chen, Chong-Jen Yu, Pei-Lin Lee

[Fig 4](#) is incorrect. Please see the corrected [Fig 4](#) here.



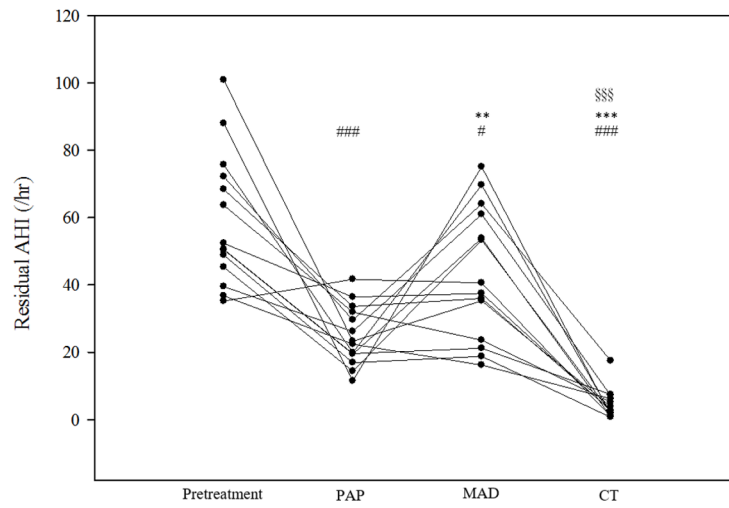
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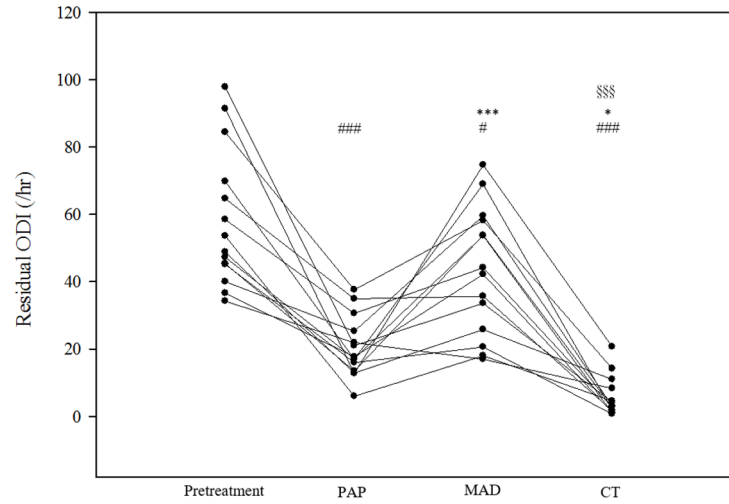
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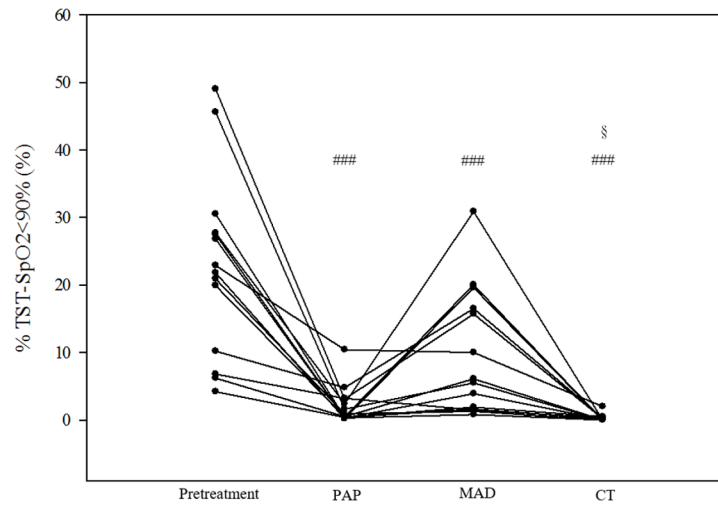
A



B



C



**Fig 4.** The (A) residual apnea-hypopnea index (AHI), (B) residual oxygen desaturation index (ODI), and (C) residual percentage of total sleep time with SpO<sub>2</sub> <90% (%TST-SpO<sub>2</sub> <90%) before and under treatments with PAP, MAD, and CT in 14 patients. PAP, continuous positive airway pressure; MAD, mandibular advancement device; CT, combination therapy. Each dot represents a measurement of an individual patient. The *p* values were analyzed by Tukey's correction: # *p* < 0.05 and ### *p* < 0.005 compared with pretreatment values; \* *p* < 0.05, \*\* *p* < 0.01, and \*\*\* *p* < 0.005 compared with PAP therapy; § *p* < 0.05 and §§§ *p* < 0.005 compared with MAD therapy.

<https://doi.org/10.1371/journal.pone.0196319.g001>

## Reference

1. Liu H-W, Chen Y-J, Lai Y-C, Huang C-Y, Huang Y-L, Lin M-T, et al. (2017) Combining MAD and CPAP as an effective strategy for treating patients with severe sleep apnea intolerant to high-pressure PAP and unresponsive to MAD. *PLoS ONE* 12(10): e0187032. <https://doi.org/10.1371/journal.pone.0187032> PMID: 29073254