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Correction to: Valenzuela-Aedo F, Reyes-Moreno C, Balboa-Castillo T. © Effectiveness of assisted standing on bone mineral density in children with cerebral palsy. A systematic review

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By mistake, when mentioning the total number of participants analyzed in the 4 studies included in the review, the total number of participants was considered and not only those who met the inclusion criterion (children with GMFCS IV and V classification). In this way, where it says "The 4 studies included a total of 71 children aged 2.25 to 12 years classified as GMFCS level IV and V." should say "The 4 studies included a total of 42 children aged 2.25 to 12 years classified as GMFCS level IV and V."

Consequently, Tables 2 and 3 were modified to reflect this modification referring to the articles by Wren et al. and Damcott et al. and to add more information about the interventions:

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TABLE 2 incorrect:

Reference	Type of study	Participants	Variables	Intervention	Stander
Caulton et al. 2003 ¹⁷	RCT	26 children with CP, nonwalkers. Aged between 4.3 and 10.8 years.	Spine BMD measured by CT scan (mg/cm ³).	Increased of usual standing by 50% for 9 months.	Static prone and supine
Wren et al. 2010 ¹⁸	Quasi- experiment	17 children with CP, GMFCS IV and V, aged 6 to 12 years (mean: 9.4, SD: 1.4).	Spine BMD and cross-section of the spine with CT scan (mg/cm ³).	10 minutes of dynamic standing per day for 6 months. Follow-up or 6 and 12 months.	Supine vibration platform
Damcott et al. 2013 ¹⁶	Quasi- experiment	21 children with CP, aged 4 to 9 years, GMFCS IV and V.	Femur BMD measured by DXA (mg/cm ²).	30 minutes of standing, 5 days per week for 15 months. Follow-up at 3, 6, 9, 12, and 15 months.	Dynamic supine stander
Han et al. 2017 ¹⁹	RCT	7 children with CP, aged 2.25 to 6.4 years, GMFCS V.	Femur BMD measured by DXA (mg/cm ²).	Assisted standing for more than 2 hours per day, more than 5 days per week for 6 months.	Static supine stander

TABLE 2. Characteristics of individual studies

RCT: randomized clinical trial, CP: cerebral palsy, BMD: bone mineral density, SD: standard deviation, CT: computed tomography, DXA: dual x-ray absorptiometry, GMFCS: Gross Motor Function Classification System.

TABLE 2 correct:

TABLE 2. Characteristics of individu	al studies
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Reference	Type of study	Participants	Variables	Intervention	Stander
Caulton et al. 2003 ¹⁷	RCT	26 children with CP, nonwalkers. Aged between 4.3 and 10.8 years.	Spine BMD measured by CT scan (mg/cm ³).	Increased of usual standing by 50% for 9 months.	Static prone and supine
Wren et al. 2010 ¹⁸	Quasi- experiment	2 children with CP, GMFCS IV and 15 children GMFCS III V, aged 6 to 12 years (mean: 9.4, SD: 1.4)*.	Spine BMD and cross-section of the spine with CT scan (mg/cm ³).	10 minutes of dynamic standing per day for 6 months. Follow-up or 6 and 12 months.	Dinamic platform
Damcott et al. 2013 ¹⁶	Quasi-experiment	7 children with CP, aged 4 to 9 years, GMFCS IV and V.	Femur BMD measured by DXA (mg/cm ²).	30 minutes of standing, 5 days per week for 15 months, in 3 phases. Follow-up at 3, 6, 9, 12, and 15 months.	Dynamic supine/prone stander
Han et al. 2017 ¹⁹	RCT	7 children with CP, aged 2.25 to 6.4 years, GMFCS V.	Femur BMD measured by DXA (mg/cm ²).	Assisted standing for more than 2 hours per day, more than 5 days per week for 6 months.	Static supine stander

RCT: randomized clinical trial, CP: cerebral palsy, BMD: bone mineral density, SD: standard deviation, CT: computed tomography, DXA: dual x-ray absorptiometry, GMFCS: Gross Motor Function Classification System.

*Data combined for GMFCS III and IV children.

TABLE 3 incorrect:

TABLE 3. Summary of results

Reference	Sample size	Intervention	Stander	Body site for BMD measurement	% of change in BMD after the intervention
Caulton et al. 2003 ¹⁷	26 children	Increased of usual standing by 50% for 9 months.	Static prone and supine	Spine	6% (95% CI: 1.93–14.39, <i>p</i> = 0.01)
Wren et al. 2010 ¹⁸	17 children	10 minutes of dynamic standing per day for 6 months. Follow-up for 6 and 12 months.	Dynamic supine stander	Spine	1.6% (95% CI: 7.7–10.9, <i>p</i> = 0.73)
Damcott et al. 2013 ¹⁶	21 children	30 minutes of standing, 5 days per week of static standing for 15 months. Follow-up at 3, 6, 9, 12, and 15 months.	Dynamic supine stander	Femur	9.5%, p < 0.044
Han et al. 2017 ¹⁹	7 children	Standing for more than 2 hours per day, more than 5 days per week for 6 months.	Static supine stander	Femur	3.61% (95% CI: 2.59–4.63, <i>p</i> = 0.713

BMD: bone mineral density.

TABLE 3 correct:

TABLE 3. Summary of results

Reference	Sample size	Intervention	Stander	Body site for BMD measurement	% of change in BMD after the intervention
Caulton et al. 2003 ¹⁷	26 children	Increased of usual standing by 50% for 9 months.	Static prone and supine	Spine	6% (95% CI: 1.93–14.39, <i>p</i> = 0.01)
Wren et al. 2010 ¹⁸	2 children	10 minutes of dynamic standing per day for 6 months. Follow-up for 6 and 12 months.	Dynamic supine stander	Spine	1.6% (95% CI: 7.7–10.9, <i>p</i> = 0.73)*
Damcott et al. 2013 ¹⁶	7 children	30 minutes of standing, 5 days per week of static standing fo 15 months, in 3 phases. Follow-up at 3, 6, 9, 12, and 15 months.	Dynamic supine/prone stander	Distal femur	9.5%, p < 0.044
Han et al. 2017 ¹⁹	7 children	Standing for more than 2 hours per day, more than 5 days per week for 6 months.	Static supine stander	Proximal femur	3.61% (95% CI: 2.59–4.63, p = 0.713

BMD: bone mineral density.

*Data combined for GMFCS III and IV children.

In section "2. Changes in bone mineral density according to the type of stander. **Dynamic supine stander**" should read "2. Changes in bone mineral density according to the type of stander. **Dynamic supine/prone stander**".

Referring to the article by Damcott et al. "... they mention a value of p < 0.044, with a stander vibration of 1 Hz, imitating the hertz of the gait cadence." It should say "...they mention a value of p < 0.044, with a weight change between both legs close to 1 Hz, imitating the hertz of the gait cadence."

The modifications do not change the overall results of the review or the conclusions presented.

We regret the mistakes made. The original article has been corrected.