

European Academy of Neurology/Peripheral Nerve Society guideline on diagnosis and treatment of chronic inflammatory demyelinating polyradiculoneuropathy: Report of a joint Task Force—Second revision

In the co-publication article by Van den Bergh et al. [1, 2], this sentence within the Table 2 footnote was incomplete: 'If distal CMAP amplitudes are severely reduced (<1 mV), recording from more proximal muscles innervated by the peroneal, median, ulnar or radial nerve'. The complete sentence should read as: If distal CMAP amplitudes are severely reduced (<1 mV), recording from more proximal muscles innervated by the peroneal, median, ulnar or radial nerve may be attempted to demonstrate motor nerve conduction abnormalities meeting electrodiagnostic criteria.

The term 'but in only one nerve' was inadvertently inserted in Table 3 under the subheading 'Possible CIDP' and it should be deleted. The word 'amplitude' has been inserted in point (2)b. The correct Table 3 is provided below below:

TABLE 3 Sensory nerve conduction criteria.

(1) CIDP

- Sensory conduction abnormalities (prolonged distal latency, or reduced SNAP amplitude, or slowed conduction velocity outside of normal limits) in two nerves

(2) Possible CIDP

- As in (1)
- Sensory CIDP with normal motor nerve conduction studies needs to fulfil a. or b.:
 - a. sensory nerve conduction velocity < 80% of LLN (for SNAP amplitude >80% of LLN) or < 70% of LLN (for SNAP amplitude <80% of LLN) [85] in at least two nerves (median, ulnar, radial, sural nerve), or
 - b. sural sparing pattern (abnormal median or radial sensory nerve action potential [SNAP] amplitude with normal sural nerve SNAP amplitude) (excluding carpal tunnel syndrome) [88-90].

Note 1. Skin temperature should be maintained to at least 33°C at the palm and 30°C at the external malleolus. 1. Since these criteria do not permit to identify normal reference values compatible with sensory nerve demyelination, sensory CIDP cannot be more than a possible diagnosis as based on clinical and electrophysiological criteria.

Note 2. Decline in sural nerve action potential amplitude occurs with age and use of age-dependent reference values after age 60 is advised [91].

Abbreviations: CIDP, chronic inflammatory demyelinating polyradiculoneuropathy; LLN, lower limit of normal; SNAP, sensory nerve action potential.

Table 2 & 3 have been corrected in the original versions for readability [Correction added after first online publication on 3 February 2022: Additional points were included in this erratum.].

REFERENCES

1. Van den Bergh PYK, van Doorn PA, Hadden RDM, et al. European Academy of Neurology/Peripheral Nerve Society guideline on diagnosis and treatment of chronic inflammatory demyelinating polyradiculoneuropathy: Report of a joint Task Force—Second revision. *Eur J Neurol*. 2021;3556–3583. <https://doi.org/10.1111/ene.14959>
2. Van den Bergh PYK, van Doorn PA, Hadden RDM, et al. European Academy of Neurology/Peripheral Nerve Society guideline on diagnosis and treatment of chronic inflammatory demyelinating polyradiculoneuropathy: Report of a joint Task Force—Second revision. *J Peripher Nerv Syst*. 2021;242–268. <https://doi.org/10.1111/jns.12455>