"Balloon pulmonary angioplasty in chronic thromboembolic pulmonary hypertension." Irene Lang, Bernhard C. Meyer, Takeshi Ogo, Hiromi Matsubara, Marcin Kurzyna, Hossein-Ardeschir Ghofrani, Eckhard Mayer and Philippe Brenot. *Eur Respir Rev* 2017; 26: 160119.

Unfortunately, the second row was missing in table 1 of this article in the March 2017 issue of the *European Respiratory Review*. Please find the new row below. The study summarised in this row was also not cited where table 1 was introduced in the section "History, evolution and evidence for BPA". Thus, a citation of reference [43] has been added as follows: "Published studies of BPA are discussed below and summarised in table 1 [9, 15–32, 43]." The article has been corrected and republished online.

TABLE 1 Published results with balloon pulmonary angioplasty (BPA) in the management of patients with chronic thromboembolic pulmonary hypertension (CTEPH)

First author, year [ref.]	Patients (location)	Procedures	CTEPH medical therapy pre-BPA	Mean age years	Reduction in mPAP mmHg	FC improvement	6MWD improvement	Complications	Acute mortality (<30 days after BPA)	Long-term outcomes
Mizoguchi, 2012 [43]	68 (Japan)	255 sessions; 2–8 sessions per patient; 1–14 vessels dilated per session	68/68 epoprostenol 1–5 $ng \cdot kg^{-1} \cdot min^{-1}$ for ~5 days pre-BPA	62.2±11.9	45.4±9.6 to 24±6.4 (p<0.01)	WHO FC 3.0 to 2.0 (p<0.01)	296 to 368 m (p<0.01)	76/255 sessions RPO 4/68 patients MV	1 RHF, day 28	66/68 (97%) alive at 2.2±1.4 years