

# Erratum to: “Chemotherapy-free combination of ibrutinib and obinutuzumab for untreated advanced follicular lymphoma: results of a phase II study from the German Lymphoma Alliance”

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With reference to our article published in the December issue of *Haematologica*,<sup>1</sup> we apologize for the following mistakes that we missed in spite of proofreading our manuscript various times:

## Point 1

In the last paragraph of the Secondary outcomes section, the following sentence had errors in percentages, and we erroneously included results from a previous analysis with a shorter follow-up:

Among patients with evaluable staging after salvage therapy, ten had CR (20%) and six had PR (50%), resulting in an overall response rate of 60%. The 1- and 2-year overall survival rates of progressed patients from the time of disease progression were 85% (95% CI: 73.5-98.1%) and 78% (95% CI: 64.5-93.9%), respectively (*Online Supplementary Figure S1*).

### *The sentence should be corrected to:*

Among patients with evaluable staging after salvage therapy, ten had a documented CR (33%), six had PR (20%) and two had CR or PR (7%), resulting in an overall response rate of 60%. The 1- and 2-year overall survival rates of progressed

patients from the time of disease progression were 89% (95% CI: 80-99%) and 78% (95% CI: 66-92%), respectively (*Online Supplementary Figure S1*).

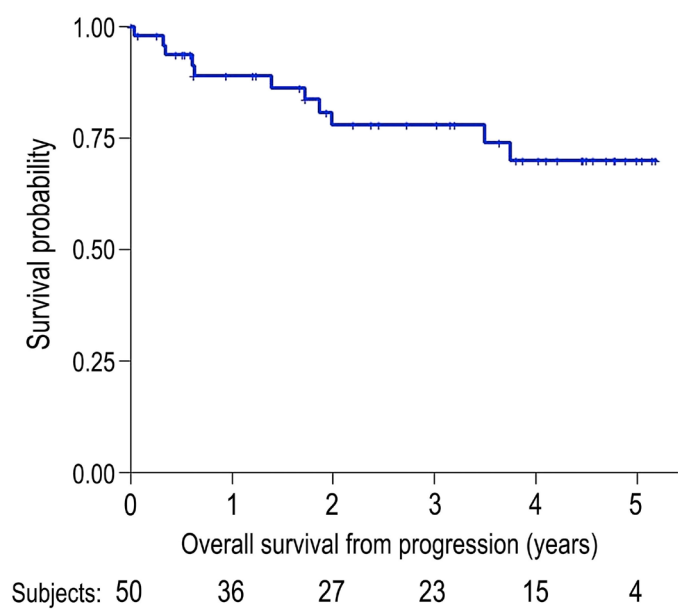
## Point 2

In the second paragraph of the Safety section, one frequency and three percentage numbers were wrong in the following sentence:

The most common AE of grade 3/4 during maintenance were lung infection (7 AE in 5 [5%] patients), fatigue (5 AE in 5 [5%]) patients), neutropenia (5 AE in 3 [3%] patients), hypertension (4 AE in 4 [4%] patients) and sepsis (4 AE in 2 [2%] patients).

### *The sentence should be corrected to:*

The most common AE of grade 3/4 during maintenance were lung infection (7 AE in 6 [7%], patients), fatigue (5 AE in 5 [6%] patients), neutropenia (5 AE in 3 [3%] patients),



**Online Supplementary Figure S1. Overall survival from progression.** Kaplan-Meier estimates of overall survival from time of progression among 50 patients with progression of disease.

hypertension (4 AE in 4 [5%] patients) and sepsis (4 AE in 2 [2%] patients).

**Point 3**

*Online Supplementary Figure S1* erroneously presented

the results from the analysis with a shorter follow-up, so the Kaplan-Meier curve showed the overall survival from progression for 37 progressed patients instead of 50 patients. The above figure, with corrected legend, shows the updated Kaplan-Meier curve.

**References**

1. Schmidt C, Scheubeck G, Jurinovic V, et al. Chemotherapy-free combination of ibrutinib and obinutuzumab for untreated advanced follicular lymphoma: results of a phase II study from the German Lymphoma Alliance. *Haematologica* 2025;110(12):3022-3031.