Correction to: Odontogenic keratocyst and ameloblastoma: radiographic evaluation

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In the original publication of the article, the following two papers are missing from Table 4 and Table 5, and should be added to the references.

40. MacDonald-Jankowski DS. Keratocystic odontogenic tumour: systematic review. *Dentomaxillofac Radiol.* 2011;40(1):1–23.
41. MacDonald-Jankowski DS, Yeung R, Lee KM, Li TK. Ameloblastoma in the Hong Kong Chinese. Part 2: systematic review and radiological presentation. *Dentomaxillofac Radiol.* 2004;33(3):141–51.

The correct Tables 4 and 5 are given in this correction.

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Table 4 Comparison of clinical and radiographic findings of OKCs with previous reports

Author	Number of OKCs	Mean age (year)	Male: female	Maxilla: mandible	Most common site	Unilocular: multilocular	Association with impacted tooth	Most commonly associated impacted tooth	Displacement of adjacent teeth	Root resorption	Bone expansion
Alves et al. [17] ^a	9	34.4	1:0.8	NA	Mand post	1:0.3	44%	Mand third M and C	NA	13%	77%
Chirapathomsakul et al. [21]	67	36.9	1:1.2	1:2.2	Mand post	1:0.4	31.3%	Third M	NA	1.5%	NA
Apajalahti et al. [22]	46	46	1:0.5	1:1.4	Mand molar, ramus and angle	NA	28%	Third M	17%	13%	NA
Boffano et al. [23]	261	43.3	1:0.5	1: 2.7	Mand ramus and angle	1:0.2	NA	NA	NA	NA	NA
Buckley et al. [24] ^a	83	NA	1:0.7	NA	Mand post	1:0.9	NA	NA	39%	15%	NA
Chow HT [25]	76	32.8	1:0.6	1:2.5	Mand post	NA	52.8%	Mand third M	NA	NA	NA
Gumusok et al. [27]	28	34.5	1:1	1:3.7	Mand molar, retromolar and ramus	1:1	39%	Mand third M	100%	30%	26%
Habibi et al. [28]	83	27.1	1:0.7	1:2.1	Mand post	NA	33.7	NA	NA	NA	NA
MacDonald-Jankowski and Li [30], MacDonald-Jankowski DS [40]	33	30.6	1:0.8	1:1.5	Mand post	1:1.1	56%	Max third M	69%	41%	82%
Sansare et al. [33]	72	30.7	1:0.3	1:2.6	Mand post	1:0.6	NA	NA	NA	NA	NA
Myoung et al. [36]	256	30.8	1:0.7	1:2.1	Mand molar	NA	NA	NA	NA	NA	NA
Simiya et al. [37]	22	27.5	1:0.7	1:2.5	Mand post	1:1.4	9.1%	Mand third M and max C	NA	NA	NA
Titinechi and Nortje [38]	145	34.5	1:0.6	1:3	Mand post	1:0.4	52.4%	Mand third M	NA	0.7%	NA
This study	100	31.4	1:1.1	1:1.4	Mand post and ramus	1:0.3	42%	Max third M	33.7%	7%	64%

Mand mandibular, *NA* data not available, *Post* posterior region, *M* molar, *Max* maxillary, *C* canine

^aAll studied lesions are in the mandible

Table 5 Comparison of clinical and radiographic findings of ameloblastomas with previous reports

Author	Number of ameloblastomas	Mean age (year)	Male: female	Maxilla: mandible	Most common site	Unilocular: multilocular	Association with impacted tooth	Most commonly associated impacted tooth	Displacement of adjacent teeth	Root resorption	Bone expansion
Reichart et al. [5]	3677	36	1:1	1:5	Mand Post	1:1	NA	NA	NA	NA	NA
Alves et al. [17] ^a	9	31.8	1:0.8	NA	Mand Post	1:0.3	44%	Mand third M	NA	75%	89%
Dhanuthai et al. [26]	1289	38.3	1:1	1:9.8	Mand Post	1:1	10.4%	NA	NA	NA	NA
Kim et al. [29]	71	30.4	1:0.8	1:6.8	Mand Post	1:0.4	NA	NA	NA	NA	NA
MacDonald-Jankowski et al. [31, 41]	61	30.5	1:1	1:5.1	Mand Post	1:0.6	39%	Mand third M	73%	59%	100%
Philipsen and Reichart [32] ^b	193										
Initially diagnosed as DC	90	16.5	1:0.7	1:3–13	Mand Post	1:0.2	NA	Mand third M	NA	NA	NA
Initially diagnosed as non-DC	103	35.2	1:1.8	1:3–13	Mand Post	1:0.9	–	–	NA	NA	NA
Siar et al. [34]	340	30.3	1:0.7	1:10.7	Mand Post	1:1.8	3.4%	NA	NA	6.7%	NA
This study	101	34.9	1:1.1	1:9.1	Mand Post	1:2.2	19%	Mand third M	55.8%	66.7%	96.3%

NA data not available, *Mand* mandibular, *Post* posterior region, *M* molar, *DC* dentigerous cyst

^aAll studied lesions are in the mandible

^bAll cases are unicystic ameloblastoma