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CORRECTION

Correction to: Direct oral anticoagulants in patients with severe inherited thrombophilia: a single-center cohort study

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In the original publication of the article, the following errors were corrected.

In the abstract, in line 5, there is one space missing, instead of "apixabanin 14 (25%)", it should read as "apixaban in 14 (25%)".

In the Laboratory Investigations section, the reference range for total PS antigen was incorrectly published (5–140%). The correct reference range for total PS antigen is: 75–140%.

In the Follow-up section of Results, there was an error in the description of the third patient with VTE recurrence. The patient should be presented as follows: The third patient, a 56-year-old woman with PS deficiency, FVL mutation and coexisting comorbidities, was hospitalized due to pneumonia while on rivaroxaban for 9 months (…) She was treated with enoxaparin for 4 weeks and then wanted to return to the treatment with rivaroxaban. During 10 months' follow-up, no recurrent VTE was observed, but she reported slight hematuria and easy bruising. Treatment with rivaroxaban was continued.

In the description of last case, there was an error in the mutation type, instead of heterozygous FVL, it was heterozygous prothrombin 20210A mutation.

In the Table 2, in the description of the third patient, in the column "thrombophilia", the mutation should read as "FVLGA" (instead of FII20210A), in the column "current DOAC" rivaroxaban should appear instead of "apixaban", as well as, in the column "event time", instead of 6, there should appear 9 months.

In the Table 3, in the description of the sixth patient, in the column "thrombophilia", the mutation should read as "FVLGA" (instead of FII20210A) and in the column "current DOAC" rivaroxaban should appear instead of "apixaban.

These corrections now appear in the article online.

The original article can be found online at https://doi.org/10.1007/s12185-020-03012-7.

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Table 2 Patients with recurrent thromboembolism during treatment with direct oral anticoagulants (DOAC)

Case	Age	Sex	Thrombophilia	Protein level (time of diagnosis)	Index manifestation	Family history	DOAC	Triggering factor, if identifiable	Event time (months)	Current DOAC	Follow-up (months)
1	32	F	PS deficiency type I	Free antigen 19% (total antigen 22%)	DVT + PE	Negative	Rivaroxaban	Interruption of anticoagulation during menstruation	6	Apixaban	54
2	59	M	FII20210AA	n/a	DVT + PE	Positive	Rivaroxaban	After a long flight	12	Dabigatran	58
3	56	F	FVLGA + PS deficiency type I	Free antigen 40% (total antigen 46%)	DVT	Negative	Rivaroxaban	Interruption of anticoagulation after surgery	9	Rivaroxaban	54
4	55	M	FII20210A + PC deficiency type I	Free antigen 55% (total antigen 60%)	DVT	Positive	Rivaroxaban	Interruption of anticoagulation, drug unavailable at a pharmacy	13	Rivaroxaban	26
5	60	M	FVLGA + FII20210A	n/a	DVT + PE	Negative	Apixaban	Interruption of anticoagulation after surgery	21	Rivaroxaban	27

FII20210AA and FII20210A homozygous and heterozygous variants of prothrombin 20210A gene mutation, *FVLGA* heterozygous variant of factor V Leiden mutation, *P* provoked, *PC* protein C, *PS* protein S, *DVT* deep vein thrombosis, *PE* pulmonary embolism

Table 3 Patients with major or clinically relevant bleeding during treatment with direct oral anticoagulants

Case	Age	Sex	Thrombophilia	Protein activity/level (time of diagnosis)	Manifestation	Family history	DOAC	TYPE of bleeding	Event time (months)	Current DOAC	Follow-up (months)
1	51	M	AT deficiency type I	Activity 39% (AT antigen 0.1 g/l)	DVT + PE	Positive	Apixaban	major, upper GI	27	Apixaban	34
2	42	F	AT deficiency type II	Activity 48% (AT antigen 0.21 g/l)	DVT + PE	Positive	Rivaroxaban	major, HMB	1	Apixaban	30
3	56	M	AT deficiency type I	Activity 49% (AT antigen 0.16 g/l)	DVT	Positive	Apixaban	CRNMB, lower GI	1	Dabigatran	30
4	45	F	AT deficiency type I	Activity 46% (AT antigen 0.15 g/l)	DVT + PE	Positive	Rivaroxaban	CRNMB, HMB	1	Apixaban	35
5	32	F	PS deficiency type I	Free antigen 19% (total antigen 22%)	DVT + PE	Negative	Rivaroxaban	CRNMB, HMB	5	Apixaban	54
6	56	F	FVLGA + PS deficiency type I	Free antigen 40% (total antigen 46%)	DVT	Negative	Rivaroxaban	CRNMB, haematuria	8	Rivaroxaban	54

FII20210A heterozygous variant of prothrombin 20210A gene mutation, *AT* antithrombin, *PS* protein S, *DVT* deep vein thrombosis, *PE* pulmonary embolism, *GI* gastrointestinal, *HMB* heavy menstrual bleeding, *CRNMB* clinically relevant non-major bleeding