

CORRECTION

Correction: Full-field optical coherence tomography for the diagnosis of giant cell arteritis

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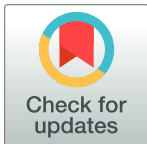
The legends for Figs 1–4 are missing from the article. The captions have been provided here:

Fig 1. TAB architecture imaging. Arterial wall (A, D), *vasa vasorum* (B, E), and red blood cells (C, F) imaging with FF-OCT (A to C) and conventional histology following HES staining (D to F). Scale bars represent 50 μ m. Black arrows show the IEL. White arrows show arterial thrombosis. Asterisks mark red blood cells. Legend: a, adventitia; i, intima; m, media.

Fig 2. Qualitative imaging of TAB specimens. Comparison of FF-OCT (A, C, E) and conventional histology (B, D, F) imaging. A and B correspond to niTABs (n = 9), C and D to ihTABs (n = 3), E and F to gcaTABs (n = 4). Scale bars represent 100 μ m. Black arrows show the IEL. White arrows show rupture of the circular symmetry and mononuclear infiltrate. Legend: a, adventitia; i, intima; m, media.

Fig 3. Image analysis of TAB sections. ihTAB1 FF-OCT translational section (A). ImageJ graphical plot of ihTAB1 FF-OCT translational section (B). Orientation maps after Gabor filtering of ihTAB1 FF-OCT translational section (C). gcaTAB3 FF-OCT translational section (D). ImageJ graphical plot of gcaTAB3 FF-OCT translational section (E). Orientation maps after Gabor filtering of gcaTAB3 FF-OCT translational section (F).

Fig 4. Quantitative analysis of TAB sections. FF-OCT and conventional histology (HI) cross-sectional match for the visualization of the temporal artery wall (A). Comparison of FF-OCT and HI-based intima-to-media ratios for both healthy and GCA-positive TAB sections (B). Correlation curves between FF-OCT and HI for the measurement of intima (C) and media (D) thickness. Scale bars represent 100 μ m. Legend: a, adventitia; i, intima; m, media.



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Reference

1. Maldiney T, Greigert H, Martin L, Benoit E, Creuzot-Garcher C, Gabrielle PH, et al. (2020). Full-field optical coherence tomography for the diagnosis of giant cell arteritis. PLoS ONE 15(8): e0234165. <https://doi.org/10.1371/journal.pone.0234165> PMID: 32866179