"Clinical experience with antifibrotics in fibrotic hypersensitivity pneumonitis: a 3-year real-life observational study" Vasilios Tzilas, Argyris Tzouvelekis, Evangelos Bouros, Theodoros Karampitsakos, Maria Ntassiou, Eleni Avdoula, Athena Trachalaki, Katerina Antoniou, Ganesh Raghu and Demosthenes Bouros. *ERJ Open Res* 2020; 6: 00152-2020.

This article was originally published with an error in figure 1. The corrected figure is shown below, and the article has been corrected and republished online.

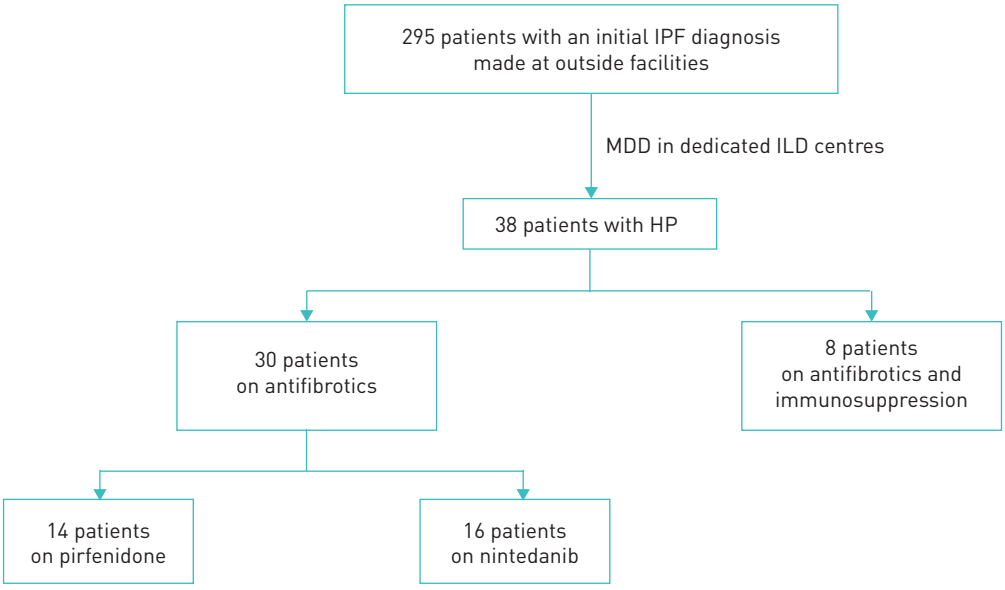

FIGURE 1 Flowchart of the study. Multidisciplinary team discussion (MDD) was performed by two pulmonologists experienced in interstitial lung disease (ILDs), a thoracic radiologist and a pathologist in cases with available lung biopsy. There was one patient with a usual interstitial pneumonia (UIP) pattern (and bronchoalveolar lavage (BAL) lymphocytosis >20%), five patients with possible UIP pattern (n=3 with BAL lymphocytosis >20%) and 24 patients with mosaic attenuation, most (n=16) with "head and cheese sign" (n=6 with BAL lymphocytosis >20%). IPF: idiopathic pulmonary fibrosis; HP: hypersensitivity pneumonitis.

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