

Erratum

Erratum to “Variation of the Lateral Sacral Artery in relation to Sciatic Neuropathy”

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In the abstract “The current study of 342 specimens from 171 cadavers (79 male, 92 female)” is corrected as “The current study of 342 specimens from 171 cadavers (92 male, 79 female).”

As a result “the lateral sacral artery is congenital absence in 0.3%.” is corrected as “lateral sacral artery is congenital absence in 0.4%.”

Tables 1 and 2 of the published paper are corrected as the following tables.

TABLE 1: Origin of the lateral sacral artery.

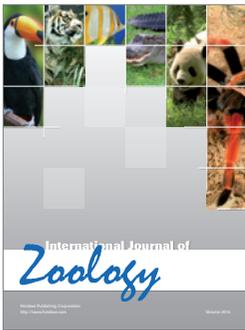
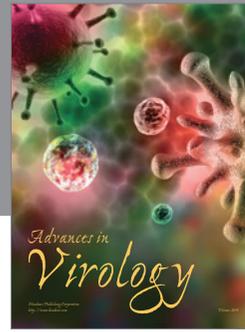
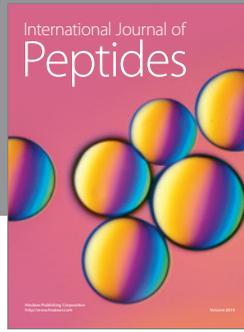
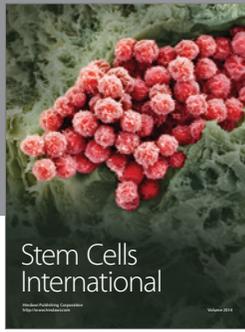
Origin	Incidence ¹
Anterior trunk of the internal iliac artery	1.0%
Dorsomedial aspect of the internal iliac artery	3.7%
Posterior trunk of the internal iliac artery	79.1%
Superior gluteal artery	16.8%
Inferior gluteal artery	5.4%
Internal pudendal artery	0.3%
Persistent sciatic artery	8.8%
Congenital absence	0.4%

¹The lateral sacral artery commonly arose from the posterior trunk of the internal iliac artery. Occasionally, it arose from different arteries. Due to coexistence of double and triple as well as quadruple lateral sacral artery, its incidence becomes more than 100%. It is a congenital absence in 0.4%. Observations based on 342 specimens (45 specimens have been excluded due to missing data).

TABLE 2: The incidence of the lateral sacral arteries number observed in series studies and current study.

Number\study	Tonkoff [10]	Naguib et al. [12]	Sadler [13]	Sharpey et al. [14]	Poynter [15]	Current study
Single	0%	30%	55%	26%	50%	77.2%
Double	98%	48%	45%	61.5%	42.5%	19.8%
Triple	2%	9%	0%	11%	7.5%	2.3%
Quadruple	0%		0%	1.5%		0.3%

The lateral sacral artery commonly arose from the internal iliac artery in different numbers but was found to be absent in one specimen (**0.4%**). Observations based on 342 specimens (45 specimens have been excluded due to missing data).



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