Pathophysiologic differences between the 2 subgroups are warranted. In addition, differences in the extent of skin involvement and disease severity should be explored. However, as noted, clinical features of individual patients could not be assessed in our study, as we used claims data.

In conclusion, it would have been interesting to perform subgroup analyses classifying the subtypes of PPP, as Yatsu-zuka and Murakami suggested. However, these subgroup analyses require a different observational study design that thoroughly clinically evaluates individual patients, such as a multicenter cohort study. If the disease entity of PPP is elucidated through epidemiological and experimental studies on various racial and ethnic groups in different countries, exploring the disease nature as in this study, evidence for subtype classification of PPP will be accumulated.

Dong Hyo Kim, MD
Soo Ick Cho, MD, PhD
Seong Jin Jo, MD, PhD

Author Affiliations: Department of Dermatology, Seoul National University College of Medicine, Seoul, South Korea.

Corresponding Author: Seong Jin Jo, MD, PhD, Department of Dermatology, Seoul National University College of Medicine, 101 Daehak-ro, Jongno-gu, Seoul 03080, Korea (s.jo@snu.ac.kr).

Published Online: August 31, 2022. doi:10.1001/jamadermatol.2022.3595

Conflict of Interest Disclosures: Dr Jo reported personal fees from AbbVie, Eli Lilly, Janssen, Novartis, and Sanofi as well as grants from Boehringer Ingelheim, Bristol Myers Squibb, Celtrion Healthcare, Green Cross Laboratories, Pfizer, UCB, and LEO Pharma outside the submitted work. No other disclosures were reported.


CORRECTION

Errors in Figure 2 and Table 3: In the Original Investigation titled “Long-term Efficacy and Safety of Up to 108 Weeks of Ixekizumab in Pediatric Patients With Moderate to Severe Plaque Psoriasis: The IXORA-PEDS Randomized Clinical Trial,” which was published online April 13, 2022, and in print in the May 2022 issue, there were errors in the key for Figure 2 A and B and in footnote f in Table 3. The key for Figure 2 A and B should be “Ixekizumab” (closed circles) and “Placebo” (open circles). In Table 3, footnote f should state that all cases of inflammatory bowel disease were Crohn disease. This article was corrected online.