Letters

Error in Abstract: In the Original Investigation titled "Efficacy and Safety of Deep Brain Stimulation in Tourette Syndrome: The International Tourette Syndrome Deep Brain Stimulation Public Database and Registry," published online January 16, 2018, there was an error in the Abstract. In the Results section of the Abstract, the sentence beginning “The mean (SD) motor tic subscore improved from 21.00 (3.72) at baseline to 12.97 (5.58) after 1 year...” should have read “12.91 (5.78) after 1 year.” This article was corrected online.


Incorrect Terminology: In the Original Investigation titled "Prevalence of Intracranial Aneurysm in Women With Fibromuscular Dysplasia: A Report From the US Registry for Fibromuscular Dysplasia," published online July 17, 2017, and in the September 2017 print issue, “dystrophy” should have been “dysplasia” in the titles of Tables 1 and 4, and “US Registry for Fibromuscular Dystrophy” should have been “US Registry for Fibromuscular Dysplasia” in the Limitations and Conclusions sections. “Dystrophy” has been changed to “dysplasia” in the corrected online version.


Errors in Abstract and Figures 2 and 3: In the Original Investigation titled "Low-Dose vs Standard-Dose Alteplase for Patients With Acute Ischemic Stroke: Secondary Analysis of the ENCHANTED Randomized Clinical Trial," published in the November 2017 issue, there were errors in the Abstract and Figures 2 and 3. In the Objective section of the Abstract, the sentence "To assess whether older, Asian, or severely affected patients with AIS who are considered at high risk of thrombolysis may benefit more from low-dose rather than standard-dose alteplase treatment" should have read “at high risk of bleeding after thrombolysis.” In Figure 2, under the Safe Implementation of Thrombolysis in Stroke Monitoring Study (SITS-MOST), the odds ratio for an age of 70 to 79 years should be 0.70. In Figure 3, the percentage of Asian patients who received low-dose alteplase and had a modified Rankin Scale (mRS) score of 1 should be 21.7%, the percentages of non-Asian patients who received low-dose alteplase and had mRS scores of 0, 1, and 2 should be 22.0%, 21.6%, and 17.0%, respectively, and the percentages of non-Asian patients who received standard-dose alteplase and had mRS scores of 0, 1, and 2 should be 19.9%, 25.4%, and 15.4%, respectively. This article was corrected online.


Error in Author Affiliations and Missing Degree: In the Original Investigation titled "Efficacy and Safety of Deep Brain Stimulation in Tourette Syndrome: The International Tourette Syndrome Deep Brain Stimulation Public Database and Registry," published online January 16, 2018, there were errors in the affiliations of Drs Meng, Kuhn, Huys, Baldermann, Hariz, Silburn, Coyne, Khandhar, Mallet, Kaido, Schrock, Foote, and Okun, and an additional degree was added for Dr Meng. This article was corrected online.


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Conflict of Interest Disclosures: Dr Aminoff is the author or editor of books, chapters, and electronic resources on clinical neurology published by Elsevier, Wolters Kluwer, McGraw-Hill, and Oxford University Press.

CORRECTION

Error in Data Presentation: The Original Investigation by Chen et al titled “Treatment Outcomes in Patients With Newly Diagnosed Epilepsy Treated With Established and New Antiepileptic Drugs: A 30-Year Longitudinal Cohort Study,” published on December 26, 2017, included an error in the Treatment Outcomes subsection of the Results section. “A total of 816 patients (45.4%) achieved at least 1 year of seizure freedom by taking their first AED, and 212 patients (28.6%) had achieved it while taking the second regimen” has been corrected to read “A total of 820 patients (45.7%) achieved at least 1 year of seizure freedom by taking their first AED, and 208 patients (28.0%) had achieved it while taking the second regimen.”