ing greater than 0.4 mg daily, but it did not differ statistically from other groups.

As stressed by Voinescu and colleagues, the results of our observational study indicating increased childhood cancer risk with high-dose folic acid supplementation needs to be replicated in independent studies. However, this discussion also highlights the need to determine what dose levels of folic acid are needed to obtain the beneficial effects. In the absence of this information, we suggest following guidelines for pregnant women in general and to supplement at least 0.4 mg daily for women with epilepsy keeping folic acid doses less than or equal to 4 mg daily. Given the importance of the issue, it seems appropriate to consider performing randomized clinical studies comparing different dose levels of periconceptional folic acid supplementation to mothers receiving treatment for epilepsy.

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Published Online: March 6, 2023. doi:10.1001/jamaneurol.2023.0092

Conflict of Interest Disclosures: Dr Tomson reported receiving grants from NordForsk, Eisa, GSK, UCB, Bial, Sanofi, Teva, GW Pharma, Angelini Pharma and speaker/advisory board fees from Sanofi, Sun Pharma, Arvelle, GW Pharma, Eisai, and UCB outside the submitted work. Dr Bjørk reported receiving grants from NordForsk and Research Council of Norway; consultant/advisory board/speaker fees from Novartis Norway, Jazz Pharmaceuticals, Angelini Pharma, Teva, Lilly, Lundbeck, and fees paid to institution from market authorization holders of valproate mandated contract research outside the submitted work. No other disclosures were reported.

Additional Contributions: We thank Jakob Christensen, MD, PhD, DrMedSci, from Aarhus University in Denmark, for his important contributions in writing this letter. Dr Christensen is supported by the Health Research Foundation of the Central Denmark Region, the Novo Nordisk Foundation, and the Danish Epilepsy Association.


CORRECTION

Error in Figure: In the Original Investigation titled “Head-to-Head Comparison of B Plasma Amyloid-β 42/40 Assays in Alzheimer Disease,” published online January 3, 2023, there were errors in the byline, Article Information, and Table 1. On the byline, the spelling of Shinichi Wada’s name was fixed, and the middle initial was added to Espen S. Kristoffersen’s name. In the Article Information, the affiliations for Macha and Kallmünzer as well as Salemo and Michel were updated. In the vitamin K antagonists row of Table 1, the values were updated so 689 patients were included in the control column and 0 were included in the patients with recent ingestion of DOACs column. This article was corrected online.


Error in Byline, Affiliations, and Table 1: In the Original Investigation titled “Intravenous Thrombolysis in Patients With Ischemic Stroke and Recent Ingestion of Direct Oral Anticoagulants,” published online January 3, 2023, there were errors in the byline, Article Information, and Table 1. On the byline, the spelling of Shinichi Wada’s name was fixed, and the middle initial was added to Espen S. Kristoffersen’s name. In the Article Information, the affiliations for Macha and Kallmünzer as well as Salemo and Michel were updated. In the vitamin K antagonists row of Table 1, the values were updated so 689 patients were included in the control column and 0 were included in the patients with recent ingestion of DOACs column. This article was corrected online.


Updates to Table 1, the Institutional Review Board Statement, the Additional Information Section, and References: In the Original Investigation titled “Functional Impairment in Individuals With Prodromal or Unrecognized Parkinson Disease,” published online December 19, 2022, and in the February 2023 issue, in Table 1, the age group data were updated and the data for proxy required and 1 or more imputed item were removed. Also, the institutional review board statement was changed, reference 6 was replaced, and the Additional Information section was updated. This article has been corrected online.


Error in Methods Section: In the Original Investigation “Association Between Blood Pressure and Later-Life Cognition Among Black and White Individuals,” published in the July 2020 issue, there was an error in the Methods section. In the Study Design, Participants, and Measurements subsection, 1 or more measurements of blood pressure before the first cognition measurement was required. This error has been corrected online.