solutions in this context are unnecessary and in fact result in worse outcomes.

Mild acute gastroenteritis with minimal to no dehydration has been medicalized in developed countries. The leading commercial rehydration solution costs approximately $25 per liter. Parents are under the impression that they need to go buy this expensive drink or go back to a physician for advice about which drink to use. In fact, all they need to do is water down their child’s preferred beverage, which is about 50 times cheaper (half-strength apple juice costs approximately 50 cents/L).

Eric R. Coon, MD, MS
Ricardo A. Quinonez, MD
Alan R. Schroeder, MD

Author Affiliations: Division of Pediatric Inpatient Medicine, University of Utah School of Medicine, Primary Children’s Hospital, Salt Lake City, Utah (Coon); Section of Pediatric Hospital Medicine, Department of Pediatrics, Baylor College of Medicine, Houston, Texas (Quinonez); Department of Pediatrics, Stanford University School of Medicine, Stanford, California (Schroeder).

Corresponding Author: Eric R. Coon, MD, MS, Division of Inpatient Medicine, Department of Pediatrics, University of Utah School of Medicine, Primary Children’s Hospital, 100 N Mario Capecchi Dr, Salt Lake City, UT 84113 (eric.coon@hsc.utah.edu).


Conflict of Interest Disclosures: None reported.


CORRECTION

Coding Error in Meta-analysis: In the article titled “Comparative Effectiveness and Safety of Cognitive Behavioral Therapy and Pharmacotherapy for Childhood Anxiety Disorders: A Systematic Review and Meta-analysis,” published online August 31, 2017, and in the November 2017 issue of JAMA Pediatrics, coding errors occurred with one of the included studies, and data from 2 arms in that study were erroneously reversed. All analyses were recalculated after correcting this error; a few of the relative risks changed, which affected data in the Abstract, text, Figures 1 and 2, and eTable 9 in the Supplement. Cognitive behavioral therapy alone no longer significantly improved remission compared with sertraline alone. The overall conclusions remained unchanged. This article was corrected online.


Error in Citation Order: An Editorial titled “Structuring Research to Address Discrimination as a Factor in Child and Adolescent Health,” published online on August 20, 2018, had 2 citations incorrect in the sentence “Similar findings were reported in 2 systematic reviews by Sanders-Phillips et al and Priest et al focusing on children in which racial discrimination was most commonly associated with depression and anxiety in childhood and adolescence.” The Sanders-Phillips et al article was reference number 5 but was cited with a number 4; the Priest et al article was reference number 4 but was cited with a number 5. The citation order has been corrected.


Error in Author Byline: In the Letter in Reply titled “Bariatric Surgery May Improve Type 2 Diabetes and Its Comorbidities by Reducing Interleukin 32 Levels,” published online August 13, 2018, there was an error in the author byline. The second author, Philip S. Zeitler, was omitted from the byline and should be listed as “Philip S. Zeitler, MD, PhD.” This article was corrected online.