for the conclusions of this study. Thus, after correcting this error, our original conclusions, as stated in the Abstract and Discussion, remain unchanged. Specifically, we continue to find that volume is reduced in youths with psychosis spectrum symptoms in a pattern distributed widely across the gray matter of the brain, including medial temporal lobe volume loss that relates selectively to the burden of psychosis spectrum symptoms. These findings continue to support our broadest and most important conclusion, namely that structural brain abnormalities commonly reported in adults with psychosis are present early in life in youths with psychosis spectrum symptoms.

On behalf of our coauthors, we regret and apologize to the readers and editors of JAMA Psychiatry for these errors, and we have requested that the original article be corrected online.2

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Conflict of Interest Disclosures: Dr Gur reported participating in an advisory board for Otsuka Pharmaceuticals. No other disclosures were reported.


CORRECTION

Methodologic Error Affecting Study Results: In the article titled "Structural Brain Abnormalities in Youth With Psychosis Spectrum Symptoms," published online March 16, 2016, and also in the May 2016 issue of JAMA Psychiatry, a methodologic error occurred, affecting some of the results reported in the article’s Abstract, Results and Discussion sections, Figure 1, and the Figure and eTables 4 and 5 in the online Supplement. All analyses were recalculated.2 While the error inflated apparent group differences in coarse measures of brain volume, the study’s main conclusion did not change.


Errors in Subtitle, Group Author Byline, Key Points, and Methods: In the Original Investigation titled "D-Cycloserine Augmentation of Exposure-Based Cognitive Behavior Therapy for Anxiety, Obsessive-Compulsive, and Posttraumatic Stress Disorders: A Systematic Review and Meta-analysis," published online January 25, 2017, there were errors in the subtitle, group author information, and Key Points. The subtitle should read as follows: "A Systematic Review and Meta-analysis of Individual Participant Data." In the byline, it should read "and the DCS Anxiety Consortium" instead of "for the DCS Anxiety Consortium." In the first sentence of the Findings paragraph of the Key Points, "systematic reviews" should be removed so it reads, "in this meta-analysis of individual participant data from 21 trials, when controlling for antidepressant use, participants receiving DCS showed greater improvement from pretreatment to posttreatment but not from pretreatment to midtreatment or from pretreatment to follow-up." The 95% CIs in the Results section of the Abstract and the ninth paragraph of the Results section were inverted and should read as follows: "When controlling for antidepressant use, participants receiving DCS showed greater improvement from pretreatment to posttreatment but not from pretreatment to midtreatment or from pretreatment to follow-up." The first sentence of the Table 4 caption should be removed so it reads, "Results showed that antidepressant use did not moderate any of the effects of DCS on outcome (Table 1)."