CORRECTIONS

Author Corrections

The February 1, 2012, Statistics in Oncology article by Rimawi and Hilsenbeck, entitled “Making Sense of Clinical Trial Data: Is Inverse Probability of Censoring Weighted Analysis the Answer to Crossover Bias?” (J Clin Oncol 30:453-458, 2012), contained an error.

In Figure 1, the following permission statement and reference citation were inadvertently omitted: “Fig 1. Schematic of randomized clinical trial with selective crossover introduced after positive primary results (**adapted with permission^{1a}**).”

In the References section, reference 1a should have been given as: **1a.** Regan MM, Colleoni M, Giobbie-Hurder A, et al: Adjusting for selective crossover in analyses of letrozole versus tamoxifen in the BIG 1-98 trial. Presented at the 32nd Annual CTCR-AACR San Antonio Breast Cancer Symposium, San Antonio, TX, December 9-11, 2009 (abstr 16)

The authors apologize for the mistake.

DOI: 10.1200/JCO.2012.44.6062; published July 1, 2012

The February 20, 2012, article by Yi et al, entitled “Evaluation of a Breast Cancer Nomogram for Predicting Risk of Ipsilateral Breast Tumor Recurrences in Patients With Ductal Carcinoma in Situ After Local Excision” (J Clin Oncol 30:600-607, 2012), contained an error.

In Table 2, the following statement should have been included as a footnote: “Time period of treatment was dichotomized as 1990-1998 and 1999-2006 and number of excisions was dichotomized as ≤ 2 and ≥ 3 in the MSKCC cohort.”

The authors apologize for the oversight.

DOI: 10.1200/JCO.2012.44.6070; published July 1, 2012

The May 1, 2012, editorial by Dhesy-Thind, entitled “Screening for Osteoporosis in Postmenopausal Women With Breast Cancer Receiving Aromatase Inhibitors: Less Is More?” (J Clin Oncol 30:1408-1410, 2012), contained errors.

In the third sentence of the fourth paragraph, the last screening protocol was identified as being the most cost-effective, whereas it should have been identified as the least cost-effective, as follows: “The final option is found to be the **least** cost-effective use of societal resources.”

In the third sentence of the eighth paragraph, treatment was suggested for patients with BMD T-scores of 2.5 or less, whereas it should have been for patients with BMD T-scores of

–2.5 or less, as follows: “Pharmacologic intervention is suggested for women with BMD T-scores of –2.5 or less (WHO osteoporosis definition).”

In the fourth sentence of the eighth paragraph, screening was suggested for patients with BMD T-scores greater than 2.5, whereas it should have been for patients with BMD T-scores greater than **–2.5, as follows: “Annual BMD screening is recommended for patients with BMD T-scores greater than –2.5.”**

The online version has been corrected in departure from the print. The author apologizes for the mistakes.

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