

## Corrigendum

# Proteomic analysis of stage I primary lung adenocarcinoma aimed at individualization of postoperative therapy

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Owing to an error on the part of the authors, mistakes were made in the assignment of protein names to the peptides found as biomarkers in the above paper.

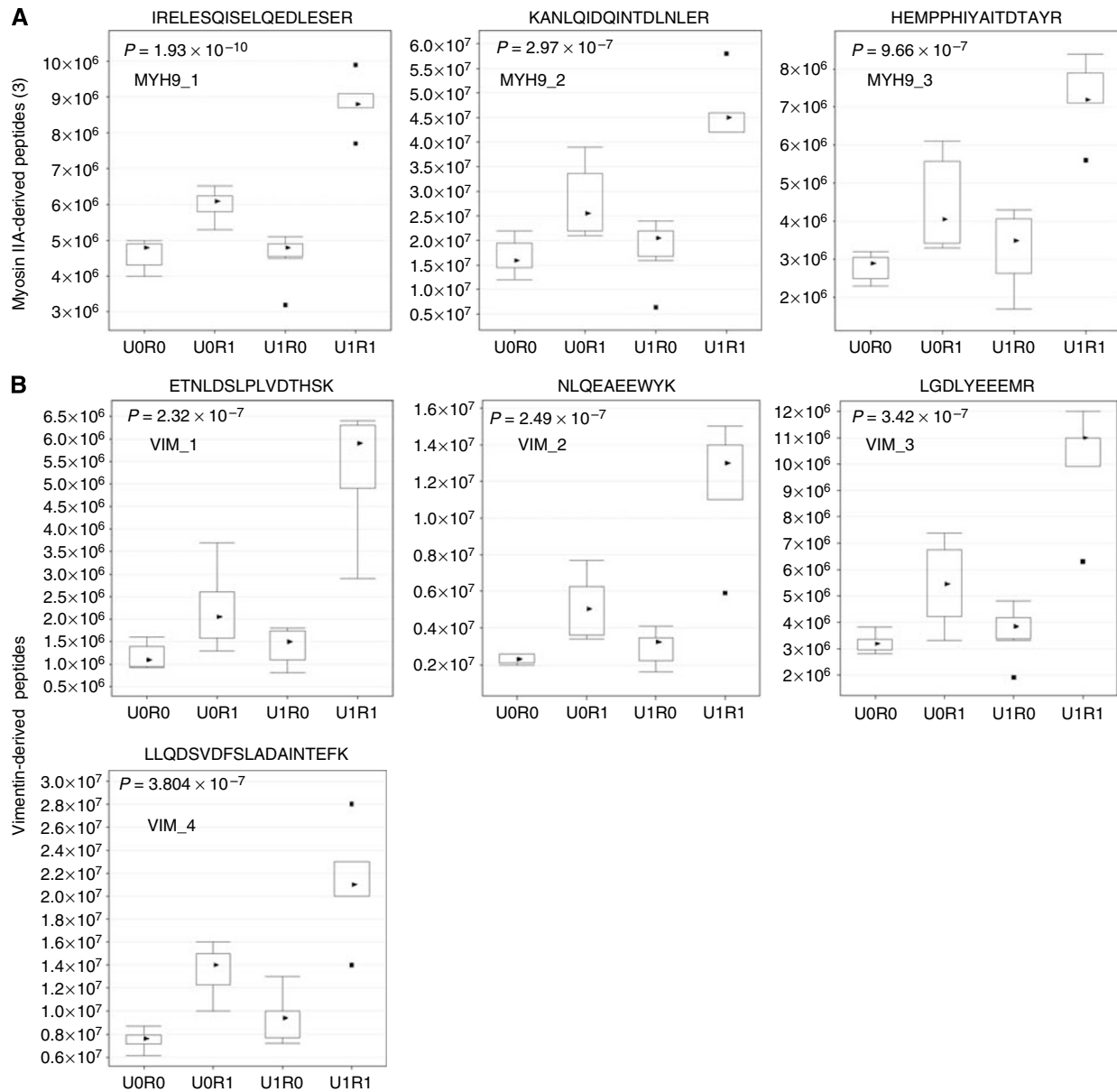
The last two graphs in Figure 1 entitled 'VIM\_5' (lower middle) and 'VIM\_6' (lower right) should be removed. They are not vimentin-derived peptide signals. The caption of Figure 1B should also be corrected from 'These six peptide signals' to 'These four peptide signals'. Also in the last part of the caption, ' $P < 8.3 \times 10^{-6}$ ' should be changed as ' $P < 3.8 \times 10^{-7}$ '.

In the legend to Figure 3, an error was made in the description of the two graphs (A and B), with the graphs being transposed. The first line of the legend should have read: 'Kaplan–Meier curves for disease-free survival after complete resection in patients with stage I lung adenocarcinoma who received PAC with uracil-tegafur (B), or did not receive any PAC (A).'

The last two rows of Table 3 should also be removed. The amino-acid sequences assigned as 'VIM\_5' and 'VIM\_6' should not be assigned as Vimentin.

**Table 3** Amino-acid sequences from the selected peptide ion signals

| Name   | Fraction  | Sequence            |
|--|-----------|---------------------|
| <i>Myosin, heavy polypeptide 9, non-muscle</i> |           |                     |
| MYH9_1   | Insoluble | IRELESQISELQEDLESER |
| MYH9_2   | Insoluble | KANLQIDQINTDLNLER   |
| MYH9_3   | Insoluble | HEMPPHIYAITDTAYR    |
| <i>Vimentin</i>                                |           |                     |
| VIM_1  | Insoluble | ETNLDLPLVDTHSK      |
| VIM_2  | Insoluble | NLQEAEEWYK          |
| VIM_3  | Insoluble | LGDLYEEEMR          |
| VIM_4  | Insoluble | LLQDSVDFSLADAINTEFK |



**Figure 1** Comparison of the intensity of peptide signals originating from the same protein molecule in each group detected by LC-MS. The vertical axis indicates normalised signal intensity measured by LC-MS. In each box plot, the upper and lower sides of the box represent the upper and the lower quartile values (Q3/Q1), and the upper and lower horizontal bars outside the box indicate the upper and the lower adjacent values (UAV/LAV). Note that UAV is the largest observation value that is less than or equal to  $Q3 + 1.5 \times (Q3 - Q1)$ , and LAV is the smallest observation greater than or equal to  $Q1 - 1.5 \times (Q3 - Q1)$ . Black triangle marks represent the median values, and black square marks represent outliers. U0R0: patients without PAC showing no recurrence within 5 years after surgery. U0R1: patients without PAC showing recurrence within 5 years after surgery. U1R0: patients who received PAC with uracil-tegafur and showed no recurrence within 5 years after surgery. U1R1: patients who received PAC with uracil-tegafur and showed recurrence within 5 years after surgery. **(A)** These three peptide signals were shown by MS/MS to have originated from myosin IIA. There was a significant difference between the U1R1 and the other groups ( $P < 9.7 \times 10^{-7}$ ). **(B)** These four peptide signals were shown by MS/MS to have originated from vimentin. There was also a significant difference between the U1R1 and the other groups ( $P < 3.8 \times 10^{-7}$ ).