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CORRIGENDA

Early human milk feeding is associated with a lower risk of necrotizing enterocolitis in very low birth weight infants

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Correction to: *Journal of Perinatology* (2007) **27**, 428–433. doi:10.1038/sj.jp.7211758.

Following the publication of this article, it was discovered that the data in Table 1 were misaligned. The data for 'Enteral feed volume before NEC onset (ml/kg/day)' is aligned with 'Surgical NEC' with all the data below also off by one line. Following is the corrected version of Table 1:

Table 1 Infant characteristics by human milk group

	Low HM < 50% of HM in enteral feed first 14 days of life N = *46*	*High HM ⩾50% of HM in enteral feed first 14 days of life* N = *156*
Necrotizing enterocolitis	5 (10.9%)	5 (3.2%)[a]
Age of onset (days)	21.8±6.7	24.2±5.6
Enteral feed volume prior to NEC onset (ml/kg/day)	46.5±14.8	32.3±4.1
Surgical NEC	1 (2.1%)	2 (1.3%)
Death	1 (2.1%)	2 (1.3%)
Suspected cases	6 (13.0%)	22 (14.1%)
Birth weight (g)	1184.2±30.2	1112.8±17.8[a]
Gestational age (weeks)	29.2±0.3	28.1±0.2[a]
Respiratory distress syndrome	30 (65.2%)	136 (87.1%)[a,b]

Abbreviations: HM, human milk, NEC, necrotizing enterocolitis.
All continuous data are expressed as mean±s.e.m. Categorical data are expressed as number (percentage).
[a]Unadjusted values significantly different, $P<0.05$.
[b]No longer significant when adjusted for gestational age, remained significantly different after controlling for birth weight.

International collaborative research. A Colombian model that promotes infant health and research capacity

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Following the publication of this article, Dr Rojas would like to emphasize the following points:

1. Both Colombian and US partners participated in study design activities.

2. Laura Charry participated as research assistant in the Colombian CPAP trial.