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Corrigendum: Risk of colorectal cancer for carriers of a germ-line mutation in *POLE* or *POLD1*

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The abstract to this article contained errors in the Results and Conclusions section. The corrected sections are shown below:

Results: We observed 67 CRCs (mean age at diagnosis = 50.2 (SD = 13.8) years) among 364 first- and second-degree relatives from 41 *POLE* families, and 6 CRCs (mean age at diagnosis = 39.7 (SD = 6.83) years) among 69 relatives from 9 *POLD1* families. We estimated risks of CRC up to the age of 70 years (95% confidence interval) for males and females, respectively, to be 28% (95% CI, 10–42%) and 21% (95% CI, 7–33%) for *POLE* mutation carriers and 90% (95% CI, 33–99%) and 82% (95% CI, 26–99%) for *POLD1* mutation carriers.

Conclusion

CRC risks for *POLE* mutation carriers are sufficiently high to warrant consideration of colonoscopy screening and implementation of management guidelines recommended for *MSH6* mutation carriers in cases of Lynch syndrome. Refinement of estimates of CRC risk for *POLD1* carriers is needed; however, clinical management recommendations could follow those made for *POLE* carriers.

In addition, the first sentence of the fifth paragraph of the Discussion section (page 5) is incorrect. The sentence should have read as follows:

In summary, the increased CRC risks for all carriers of a *POLE* pathogenic or likely pathogenic exonuclease domain variant warrant consideration of annual colonoscopy screening and clinical management guidelines currently recommended for people with Lynch syndrome, especially *MSH6* mutation carriers.