CORRECTIONS & AMENDMENTS

ADDENDUM

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Post-traumatic stress disorder is associated with PACAP and the PAC1 receptor

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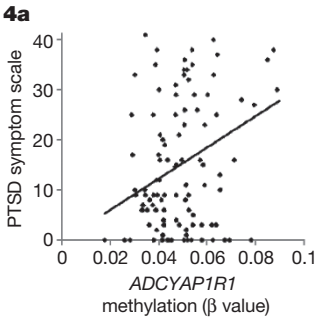
Half of the data points were inadvertently omitted from the published version of Fig. 4a; the statistical analyses in the text and figure legend, however, do refer to the complete data set. The corrected figure is shown here and has been corrected in the online versions of the paper.

In addition, we present additional information to clarify two results reported in the Article regarding plasma pituitary adenylate cyclase-activating polypeptide (PACAP) levels and post-traumatic stress disorder (PTSD) symptom associations. In the Article, we reported replication of the association between PACAP levels and hyperarousal subscale, because this was the most robust association in the initial cohort. We now present the analyses separately for initial, replication and combined cohorts in Table 1. All associations but one are significant in the replication cohort. The second issue concerns potential medical confounds that could underlie the reported association. Although we do not have medical chart data on most patients, we do have responses from a health questionnaire administered during collection of trauma history and other data. We have now reanalysed the associations for the PTSD symptom scale (PSS) hyperarousal and total symptoms using subjective reports of health condition from the questionnaires as covariates. These data are presented in Table 2 and do not show any effect of health- and illness-related questions on the relationship between PACAP and PTSD symptoms. None of these additions affect the results and conclusions of the original Article.



1. *Diagnostic and Statistical Manual of Mental Disorders* 4th edn (text rev.) (American Psychiatric Association, 2000).

Table 1 | PACAP associations with PTSD symptoms

	Initial $n = 34$	Replication $n = 74$	Combined $n = 108$
**Correlation of PACAP level with PSS hyperarousal score	0.006	0.015	0.001
*High PACAP level with PSS hyperarousal score (Fig. 1c)	0.001	0.01	0.0004
*High PACAP level with PSS hyperarousal score (Fig. 1d, adjusted)	0.01	0.001	0.00005
*High PACAP level with PSS total score (Fig. 1b)	0.0003	0.15	0.008
*High PACAP level with PSS total score (adjusted)	0.004	0.04	0.002
*High PACAP level with clinically significant PTSD symptoms (Fig. 1d, adjusted)	0.0002	0.01	0.0003
*High PACAP levels with PSS-based PTSD diagnosis[1] (adjusted)	0.01	0.02	0.0008

The table shows *P* values of correlations and regression analyses for the initial, replication and combined cohort analyses: 2-tailed for initial and combined; 1-tailed for replication. 'Adjusted' means adjusted for age, substance use and trauma.
** Bivariate correlation.
* Analysis of variance (ANOVA).

Table 2 | Health-adjusted PACAP associations

	Initial $n = 28$	Replication $n = 58$	Combined $n = 86$
Health adjusted-association of high PACAP levels with PSS hyperarousal score	0.031	0.005	0.001
Health adjusted-association of high PACAP levels with PSS-based PTSD diagnosis[1]	0.05	0.03	0.002

The table shows *P* values of correlations and regression for the initial, replication and combined cohort analyses: 2-tailed analyses for initial and combined; 1-tailed for replication.