

CORRIGENDA

Generation and characterization of a novel hematopoietic progenitor cell line with DC differentiation potential

C Rathinam, M Sauer, A Ghosh, C Rudolph, A Hegazy, B Schlegelberger, K Welte and C Klein

Leukemia (2012) 26, 2302; doi:10.1038/leu.2012.132

Correction to: *Leukemia* (2006) 20, 870–876; doi:10.1038/sj.leu.2404157

Since the publication of this article, the authors have noticed that the primer sequences indicated for murine IFN- α cDNA are incorrect. The correct sequences are as follows:

mIFN- α forward primer: 5'-ATGGCTAGGCTCTGTGCTTTC-3'

mIFN- α reverse primer: 5'-AAGACAGGGCTCTCCAGACTT-3'

The authors would like to apologize for any inconvenience this may have caused.

Nilotinib vs imatinib in patients with newly diagnosed Philadelphia chromosome-positive chronic myeloid leukemia in chronic phase: ENESTnd 3-year follow-up

RA Larson, A Hochhaus, TP Hughes, RE Clark, G Etienne, D-W Kim, IW Flinn, M Kurokawa, B Moiraghi, R Yu, RE Blakesley, NJ Gallagher, G Saglio and HM Kantarjian

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Correction to: *Leukemia* (2012) 26, 2197–2203; doi:10.1038/leu.2012.134; published online 15 June 2012

Since the publication of this article, the authors have noticed several errors that appeared in their article. They are as follows:

On page 2, under the heading: 'Efficacy', there are two instances where ' \leq ' has been incorrectly written instead of '<'. The correct sentence is as follows:

Consistent with the results at 1 and 2 years of follow-up, the MMR rate by 3 years (Figure 1) was significantly higher for nilotinib 300 mg twice daily (73%, $P < 0.0001$) and nilotinib 400 mg twice daily (70%, $P < 0.0001$) compared with imatinib (53%).

On Page 3, within the following paragraph, there are three instances where ' \leq ' has been incorrectly written instead of '<'. The correct sentence is as follows:

Similarly, the rate of MR⁴ by 3 years was significantly higher for nilotinib 300 mg twice daily compared with imatinib (50% vs 26%, $P < 0.0001$) and nilotinib 400 mg twice daily compared with imatinib (44% vs 26%, $P < 0.0001$; Figure 2a). Also, the achievement of MR^{4.5} by 3 years was significantly higher for nilotinib 300 mg twice daily compared with imatinib (32% vs 15%, $P < 0.0001$) and for nilotinib 400 mg twice daily compared with imatinib (28% vs 15%, $P = 0.0003$; Figure 2b).

The errors have now been rectified, and the correct article appears in this issue. The html and online pdf versions have also been rectified, and now carry the correct paper.

The authors would like to apologise for any inconvenience this may have caused.