

ERRATUM: Adiponectin acts in the brain to decrease body weight

Yong Qi, Nobuhiko Takahashi, Stanley M Hileman, Hiralben R Patel, Anders H Berg, Utpal B Pajvani, Philipp E Scherer & Rexford S Ahima
Nat. Med. 10, 524–529 (2004)

Three sentences in this article appeared incorrectly. On p. 524, in the second paragraph after the abstract, the fifth sentence should read “ADP circulates in serum as low-molecular-weight dimers of trimers and high-molecular weight complexes⁵.” On p. 525, in the first paragraph in the right column, the second sentence should read “We also injected ADP (2 g/g) or PBS i.v. and measured serum and CSF ADP.” In the second paragraph in the same column, several words were repeated in the second and third sentences; the second sentence should read “ADP (0.1 g/g, i.c.v.) induced Fos-positive cells in the paraventricular nucleus (PVN; Fig. 2d).”

We regret the errors.

ERRATUM: Depletion of host Langerhans cells before transplantation of donor alloreactive T cells prevents skin graft-versus-host disease

Miriam Merad, Petra Hoffmann, Erik Ranheim, Sarah Slaymaker, Markus G Manz, Sergio A Lira, Israel Charo, Donald N Cook, Irving L Weissman, Samuel Strober & Edgar G Engleman
Nat. Med. 10, 510–517 (2004)

TCD bone marrow was defined in the article as “T-cell-derived” bone marrow. The correct definition is “T-cell-depleted” bone marrow.

We regret the error.

CORRIGENDUM: Direct evidence that the VEGF-specific antibody bevacizumab has antivasculature effects in human rectal cancer

Christopher G Willett, Yves Boucher, Emmanuelle di Tomaso, Dan G Duda, Lance L Munn, Ricky T Tong, Daniel C Chung, Dushyant V Sahani, Sanjeeva P Kalva, Sergey V Kozin, Mari Mino, Kenneth S Cohen, David T Scadden, Alan C Hartford, Alan J Fischman, Jeffrey W Clark, David P Ryan, Andrew X Zhu, Lawrence S Blaszkiwsky, Helen X Chen, Paul C Shellito, Gregory Y Lauwers & Rakesh K Jain
Nat. Med. 10, 145–147 (2004)

The complete trial schema was omitted from the article. The protocol is outlined below.

Cycle 1: weeks 1 and 2		M	Tu	We	Th	Fr	Sa	Su	M	Tu	We	Th	Fr	Sa	Su
BV		X													
Cycle 2: weeks 3 and 4		M	Tu	We	Th	Fr	Sa	Su	M	Tu	We	Th	Fr	Sa	Su
BV		X													
5-FU		X	X	X	X	X	X	X	X	X	X	X	X	X	X
EBRT		X	X	X	X	X			X	X	X	X	X		
Cycle 3: weeks 5 and 6		M	Tu	We	Th	Fr	Sa	Su	M	Tu	We	Th	Fr	Sa	Su
BV		X													
5-FU		X	X	X	X	X	X	X	X	X	X	X	X	X	X
EBRT		X	X	X	X	X			X	X	X	X	X		
Cycle 4: weeks 7 and 8		M	Tu	We	Th	Fr	Sa	Su	M	Tu	We	Th	Fr	Sa	Su
BV		X													
5-FU		X	X	X	X	X	X	X	X	X	X				
EBRT		X	X	X	X	X			X	X	X				

One cycle consisted of 2 weeks. Treatment was for a maximum of four cycles. Bevacizumab (BV) was delivered as intravenous infusion (5 mg/kg) on day 1 of each cycle for four cycles (days 1, 15, 29, 44). 5-Fluorouracil (5-FU) was administered by an infusion pump over 24 h each day (at a fixed daily dose of 225 mg/m²/24 h) throughout each treatment week of cycles 2–4. External beam radiation therapy (EBRT) was delivered at 1.8 Gy/d, 5 d/week (excluding holidays) for a total radiation dose of 50.4 Gy in 28 fractions over a period of 6 weeks. Surgery was carried out 7–9 weeks after completion of preoperative bevacizumab, 5-FU and EBRT. All six patients completed therapy without dose-limiting toxicity.