CORRECTION OPEN



Correction: Efficacy of GV1001 with gemcitabine/capecitabine in previously untreated patients with advanced pancreatic ductal adenocarcinoma having high serum eotaxin levels (KG4/2015): an open-label, randomised, Phase 3 trial

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In this article the unit of eotaxin blood concentration should be pg/mL, but there were two typos in ng/mL. This has been corrected.

In section "Methods", Study design and treatment, 3rd paragraph: Patients with high serum eotaxin levels (>81.02 ng/mL) were randomly assigned in a 2:1 ratio to receive either GemCap with GV1001 (GV1001 group) or GemCap (control group).

It should read:

Patients with high serum eotaxin levels (>81.02 pg/mL) were randomly assigned in a 2:1 ratio to receive either GemCap with GV1001 (GV1001 group) or GemCap (control group).

Caption of figure 1:

Flow diagram of patient disposition. A total of 511 pancreatic adenocarcinoma patients were screened, of 148 patients were enrolled.

Patients with high serum eotaxin levels (>81.02 ng/mL) were randomly assigned in a 2:1 ratio to receive either Gemcitabine/ Capecitabine with GV1001 (GV1001 group) or Gemcitabine/ Capecitabine (control group). Finally, 148 patients were assigned to the GV1001 group (n=75; all eotaxin-high) and control group (n=73; 36 eotaxin-high and 37 eotaxin-low).

It should read:

Flow diagram of patient disposition. A total of 511 pancreatic adenocarcinoma patients were screened, of 148 patients were enrolled.

Patients with high serum eotaxin levels (>81.02 pg/mL) were randomly assigned in a 2:1 ratio to receive either Gemcitabine/ Capecitabine with GV1001 (GV1001 group) or Gemcitabine/ Capecitabine (control group). Finally, patients were assigned to the GV1001 group (n = 75; all eotaxin-high) and control group (n = 73; 36 eotaxin-high and 37 eotaxin-low).

The original article has been corrected.

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