

CORRIGENDUM

Corrigendum to ‘Role of up-front autologous stem-cell transplantation in peripheral T-cell lymphoma for patients in response after induction: an analysis of patients from LYSA centers’



[Annals of Oncology Volume 29, Issue 3, March 2018, Pages 715-723]

G. Fossard^{1,2,3}, F. Broussais¹, I. Coelho⁴, S. Bailly^{5,6}, E. Nicolas-Virelizier⁷, E. Toussaint⁸, C. Lancesseur⁹, F. Le Bras¹⁰, E. Willems¹¹, E. Tchernonog¹², T. Chalopin¹³, R. Delarue¹⁴, R. Gressin¹⁵, A. Chauchet¹⁶, E. Gyan¹³, G. Cartron¹², C. Bonnet¹¹, C. Haioun¹⁰, G. Damaj⁹, P. Gaulard¹⁰, L. Fornecker⁸, H. Ghesquière¹, O. Tournilhac^{5,6}, M. Gomesda Silva⁴, R. Bouabdallah¹⁷, G. Salles^{1,2,3} & E. Bachy^{1,2,3*}

¹Hematology Department, CHU Lyon Sud, Hospices Civils de Lyon, Pierre Benite; ²Claude Bernard Lyon 1 University, Lyon; ³Cancer Center of Lyon (CRCL), INSERM U1052 — CNRS UMR5286, Lyon, France; ⁴Hematology Department, Portuguese Institute of Oncology, Lisbon, Portugal; ⁵Hematology and Cell Therapy Department, Hôpital Estaing, CHU de Clermont-Ferrand, Clermont-Ferrand, France; ⁶Clermont Auvergne University, Clermont-Ferrand; ⁷Hematology Department, Centre Leon Berard, Lyon; ⁸Hematology Department, CHU de Strasbourg, Strasbourg; ⁹Hematology Institute, CHU de Caen, Caen; ¹⁰Hematology Department, CHU Henri Mondor, Creteil, France; ¹¹Hematology Department, CHU de Liège, Liège, Belgium; ¹²Hematology Department, CHU de Montpellier, Montpellier, France; ¹³Hematology Department, CHU de Tours, Tours; ¹⁴Hematology Department, CHU Necker Enfants Malades, AP-HP, Paris; ¹⁵Hematology Department, CHU de Grenoble, Grenoble; ¹⁶Hematology Department, CHU de Besançon, Besançon; ¹⁷Hematology Department, Institut Paoli Calmette, Marseille, France

The authors regret that there is an error in the abstract. In the sentence “Among 527 patients screened from 14 centers in France, Belgium and Portugal, a final cohort of 269 patients ≤ 65 years old with PTCL-not otherwise specified (NOS) (N = 78, 29%), angioimmunoblastic T-cell lymphoma (AITL) (N = 123, 46%) and anaplastic lymphoma kinase-positive anaplastic large cell lymphoma (ALK-ALCL) (N = 68, 25%) with partial (N = 52, 19%) or complete responses (N = 217, 81%) after induction was identified and information about treatment allocation was carefully collected before therapy initiation from medical records”, the term “anaplastic lymphoma kinase-positive anaplastic large cell lymphoma” should read “anaplastic lymphoma kinase-negative anaplastic large cell lymphoma”.

The authors would like to apologise for any inconvenience caused.

DOI of original article: <https://doi.org/10.1093/annonc/mdx787>

*Correspondence to: E. Bachy.

E-mail: emmanuel.bachy@chu-lyon.fr (E. Bachy).

0923-7534/© 2021 European Society for Medical Oncology. Published by Elsevier Ltd. All rights reserved.