Erratum

In the article by Brugger et al entitled “Positively selected autologous blood CD34+ cells and unseparated peripheral blood progenitor cells mediate identical hematopoietic engraftment after high-dose VP16, ifosfamide, carboplatin, and epirubicin,” which appeared in the September 1, 1994, issue of Blood (84:1421-1426), there were 2 omissions.

Figures 1 and 2 contained hematopoietic recovery data not from all 15 study patients, as the text suggests, but from only 12 study patients. In fact, at the time of submission, all 15 patients had been transplanted and all had recovered. The 3 additional patients all had rapid recovery of neutrophils and platelets (upper range of time to recovery) when compared to the other patients. Reanalysis of the original data of all 15 study patients indicates that the conclusions are clearly the same. The time of platelet count > 50,000/μL and the time to absolute neutrophil count > 500/μL should have read 16 (11-24) days (not 15 (10-20), as shown in the publication) and 12 (10-18) days (not 12 (8-16) days), respectively. The reanalysis of the “yield of CD34+ cells” after column separation revealed that not all 21 patients contributed to this number, as suggested by Table 2. Actually, very “high” levels of yield (eg, 629%) were not considered for analysis. This was not stated and explained in the paper.

Also, it was not stated in the paper that the median blood counts after hematopoietic engraftment were not derived from all patients. In this clinical phase I/II study with advanced disease patients, the patients were discharged from the hospital as early as possible, depending on the clinical performance, achievement of neutrophil regeneration (> 500/μL), and platelet transfusion independency.

Note: Submitted December 20, 1999.—Ed.