Leukemia (2019) 33:1055–1062
https://doi.org/10.1038/s41375-019-0424-x

CORRECTION

Correction: The ribosomal RPL10 R98S mutation drives IRES-dependent BCL-2 translation in T-ALL

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Published online: 8 March 2019

Correction to: Leukemia 33, 319–332 (2019); https://doi.org/10.1038/s41375-018-0176-z; published online 21 February 2019.

Following the publication of this article, the authors noted that Dr Laura Fancello was not listed among the authors. The corrected author list is given below. Additionally, the following was not included in the author contribution statement: 'L.F. analyzed RNA sequencing data'.

The authors wish to apologise for any inconvenience caused.

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Author contributions K.R.K. designed research, performed research, collected data, analyzed data and wrote the paper. S.O.S. conducted the BCL2 IRES-reporter assays and wrote and edited the manuscript. B.V. and S.V. generated the CRISPR-Cas9 Jurkat clones. T.G. and JOdB generated Ba/F3 clones containing human RPL10 WT or R98S, G.R. and S.F. performed and interpreted the $^{13}C_6$-Glucose tracing experiment. J.V. facilitated the mice studies, and P.S. performed ATP analysis. A.U., A.V.M., C.J.H., J.P.P.M., and J.C. provided the pediatric T-ALL patient data and samples. P.V. and D.C. measured uric acid levels in serum samples. K.D.K. designed research, supervised the study and wrote the paper.

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Leukemia (2019) 33:1056
https://doi.org/10.1038/s41375-019-0408-x

Correction: Early myeloma-related death in elderly patients: development of a clinical prognostic score and evaluation of response sustainability role

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Published online: 8 March 2019

Correction to: Leukemia;
https://doi.org/10.1038/s41375-018-0072-6;
published online 23 February 2018.

Following the publication of this article, the author notes that the following information was missed from the acknowledgments section:

Acknowledgment of research support: This study was supported by the Cooperative Research Thematic Network grants RD12/0036/0058 and RD12/0036/0046 of the Red de Cancer (Cancer Network of Excellence); Instituto de Salud Carlos III, Spain, Instituto de Salud Carlos III/Subdirección General de Investigación Sanitaria part-financed by the European Regional Development Fund (FIS: PI12/01761; PI12/02311; PI13/01469; PI14/01867, G03/136; Sara Borrell: CD13/00340); Asociación Española Contra el Cáncer (GCB120981SAN) and FEDER.

The authors wish to apologise for any inconvenience caused.

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The original article can be found online at https://doi.org/10.1038/s41375-018-0072-6.

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Leukemia (2019) 33:1057
https://doi.org/10.1038/s41375-019-0407-y

Correction: Novel evidence that extracellular nucleotides and purinergic signaling induce innate immunity-mediated mobilization of hematopoietic stem/progenitor cells

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Published online: 8 March 2019

Correction to: Leukemia 32; 1920–1931 (2018);
https://doi.org/10.1038/s41375-018-0122-0;
published online: 30 March 2018

Following the publication of this article, the authors noted that the following should be included in the Acknowledgements section: "MA is the recipient of a START scholarship (0785) from FNP". The authors wish to apologise for any inconvenience caused.

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Leukemia (2019) 33:1058
https://doi.org/10.1038/s41375-019-0411-2

Correction: Cancer from the perspective of stem cells and misappropriated tissue regeneration mechanisms

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Published online: 7 March 2019

Correction to: Leukemia (2018) **32**:2519–2526;
https://doi.org/10.1038/s41375-018-0294-7;
published online 30 October 2018

The original version of this Article omitted the following from the Acknowledgements:

OPUS grant UMO-2016/21/B/NZ4/00201 was awarded to MK.

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Leukemia (2019) 33:1058–1059
https://doi.org/10.1038/s41375-019-0410-3

Correction: Management of relapsed and refractory multiple myeloma: novel agents, antibodies, immunotherapies and beyond

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Published online: 6 March 2019

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Study	Phase of study	Novel agent	RCT	RR/ ≥ CR/ ≥ VGPR in intervention arm	Median PFS (months) HR	Median OS (months)	Median number of prior lines	ASCT	Refractory to last regimen	Bort- & Len-Refractory	Remark	Year of publication
SIRIUS	2	daratumumab	No	29.2/2.8/12.2%	3.7 m	17.5 m 64% at 12 m	5	80%	97%	95%	Refractory MM	2016 [21]
GEN501	2	daratumumab	No	36/5/10%	5.6 m	77% at 12 m (16 mg/kg)	4	76%	80%	64%	Refractory MM	2016 [22]
MM-003	3	pomalidomide	POM-dex vs HD-Dex	31/1/5%	3.8 m vs 1.9 m HR: 0.48	11.9 vs 7.8 m HR: 0.74	95% ≥ 3	70%	82%	75/74%	Refractory MM	2013 [17]
CASTOR	3	daratumumab	DVd vs Vd	83/19/59%	NR vs 7.2 m HR: 0.39	NR in both arms	2	62%	30%	Nil	PI-refractory excluded	2016 [18]
POLLUX	3	daratumumab	DRd vs Rd	93/43.1/75.8%	NR vs 18.4 m HR: 0.37	NR in both arms	1	63%	28/26.9%	Nil	Len- refractory excluded MRD-ve: 22.4% vs 4.6%	2016 [23]
Eloquent-2	3	elotuzumab	Elo-Rd vs Rd	79/7/33%	19.4 m vs 14.9 m HR: 0.70	43.7 m vs 39.6 m HR: 0.77	2	55%	35%	Nil	21% bort-refractory	2015 [20, 45]
ASPIRE	3	carfilzomib	KRd vs Rd	87/17.7/70%	26.3 m vs 17.6 m HR: 0.69	NR in both HR: 0.79	2	NR	?Nil	Nil		2015 [15]
TOURMALINE-MM1	3	ixazomib	IRd vs Rd	78/12/36%	20.6 m vs 14.7 m HR: 0.74	NR in both arms	90% had ≤ 2 lines	57%	11%	Nil	Bort- or Len-refractory excluded	2016 [16]
Endeavor	3	carfilzomib	Kd vs Vd	77/11/42%	18.7 m vs 9.4 m HR: 0.53	47.6 m vs 40 m HR: 0.79	2	NR	Nil	Nil	Bort-refractory excluded	2016 [19,26]

POM pomalidomide, *HD* high-dose, *MM* multiple myeloma, *NR* not reached, *HR* hazard ratio, *Bort* bortezomib, *Len* lenalidomide, *DRd* daratumumab/lenalidomide/dexamethasone, *KRd* carfilzomib/lenalidomide/dexamethasone, *IRd* ixazomib/lenalidomide/dexamethasone, *Kd* carfilzomib/dexamethasone, *Vd* bortezomib/dexamethasone, *MRD-ve* minimal residual disease negativity

Correction to: Leukemia 32, 252–262 (2018); https://doi.org/10.1038/leu.2017.329; published online February 2018

Following the publication of this article the authors noted that the MRD data under the Table 1 column "Remark" of Aspire should go to that of Pollux. The authors wish to apologize for any inconvenience caused. The corrected table is attached to this correction.

Table. Major clinical trials of next generation PIs (carfilzomib, Ixazomib), next generation IMiDs (pomalidomide) and monoclonal antibody.

Compliance with ethical standards

Conflict of interest CSC received sponsorship and honoraria from Celgene, Amgen, Takeda, and Janssen. SKK received research funding for clinical trials from Celgene, Takeda, Janssen, BMS, Sanofi, Kite, Merck, Abbvie, Medimmune, Novartis, Roche-Genentech, Amgen; served as consultants or advisory board members of Celgene, Takeda, Janssen, KITE, Merck, Abbvie, Medimmune, Genentech, Amgen; and received personal honoraria from Oncopeptides, Adaptive. RZO served as advisory board member for Amgen, Bristol-Myers Squibb, Celgene, Janssen Kite Pharma, Sanofi-Aventis, and Takeda. Received research support from Amgen, BioTheryX, and Spectrum Pharma. GC received research support and honoraria from Celgene, Janssen-Cilag, and Takeda; and honoraria from Amgen, Bristol-Myers Squibb, GlycoMimetics, Seattle Genetics, Karyopharm, and Sanofi. PGR has served as a member of advisory committees to Janssen, Amgen, Celgene, Takeda, Karyopharm, and Oncopeptides, and has received research funding from Takeda, Oncopeptides, Celgene & Bristol Myers Squibb. MAG received personal fees from Ionis/Akcea, Alnylam, Prothena, Celgene, Janssen, Annexon, Appellis, Amgen, Medscape, Physicians Education Resource, Abbvie's Data Safety Monitoring board, Research to Practice; receives grants and personal fees from Spectrum; received speaker fees from Teva, Johnson, and Johnson, Medscape, DAVA oncology; received royalties from Springer Publishing; received grant funding from Amyloidosis Foundation & International Waldenstrom Foundation; and served as advisory board for Pharmacyclics and Proclara outside the submitted work. SG served as advisory board members of Amgen, Actinuum, Celgene, Johnson & Johnson, Jazz Pharmaceutical, Takeda, Novartis, Kite & Spectrum Pharma; received research funding from Amgen, Actinuum, Celgene, Johnson & Johnson, Miltenyi & Takeda. MVM received honoraria from Janssen, Celgene, Amgen, Takeda, GSK, Abbvie, Seattle Genetics, Pharmamar for lectures and advisory boards. XL received honoraria from Celgene, Amgen, Takeda, BMS, Merck, Janssen, Karyopharm, Novartis, Gilead, Sanofi, Roche, Oncopeptides. KCA served as advisor/consultant to Celgene, Millennium-Takeda, Gilead, Janssen & Bristol Myers Squibb and served as scientific founder of Oncopep & C4 Therapeutics.

Leukemia (2019) 33:1060
https://doi.org/10.1038/s41375-019-0405-0

Correction: Assay to rapidly screen for immunoglobulin light chain glycosylation: a potential path to earlier AL diagnosis for a subset of patients

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Published online: 28 February 2019

Correction to: Leukemia (2019)33: 254–257;
https://doi.org/10.1038/s41375-018-0194-x;
published online 6 July 2018

Following the publication of this article, the authors noted that Patrick M. Vanderboom was inadvertently omitted from the author list. The correct author list is as follows: Sanjay Kumar, David Murray, Surendra Dasari, Paolo Milani, David Barnidge, Benjamin Madden, Patrick M. Vanderboom, Taxiarchis Kourelis, Bonnie Arendt, Giampaolo Merlini, Marina Ramirez-Alvarado, Angela Dispenzieri. Patrick M. Vanderboom is affiliated with the Mayo Clinic in Rochester, MN.

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Leukemia (2019) 33:1061–1062
https://doi.org/10.1038/s41375-019-0426-8

Correction: Inotuzumab ozogamicin in pediatric patients with relapsed/refractory acute lymphoblastic leukemia

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Published online: 7 March 2019

Correction to: Leukemia (2018);
https://doi.org/10.1038/s41375-018-0265-z;
published online 28 September 2018

In the original version of this Article the following authors were omitted:

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• Keith August (Children's Mercy Hospital, Kansas City, MO, USA)

All authors agree to the inclusion of these added authors

The acknowledgments section has also been updated to read:

We thank the research coordinators and following physicians at pediatric cancer centers for contributing data to this project: Prashant Hiwarkar and Jayashree Motwani, Birmingham Women's and Children's Hospital, UK; Kelly Maloney, Children's Hospital of Colorado, USA; Mylene Bassal, Children's Hospital of Eastern Ontario, Canada; Yoav Messinger and Joanna Perkins, Children's Hospital of Minnesota, USA; Van Huynh, Children's Hospital of Orange County, USA; Richard Ho, Children's Hospital at Vanderbilt, USA; Joanne Chuah and Jessa Morales,

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This has now been corrected in both the PDF and HTML versions of the Article.