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Clinical Cancer Research

Correction

Correction: A Phase I Pharmacologic Study of Necitumumab (IMC-11F8), a Fully Human IgG_1 Monoclonal Antibody Directed against EGFR in Patients with Advanced Solid Malignancies

In this article (Clin Cancer Res 2010;16;1915–27), which was published in the March 15, 2010 issue of *Clinical Cancer Research* (1), Table 3 was incorrectly formatted. The correct table appears below:

Table 3. Adverse events related to necitumumab

Adverse event*	Arm A (n = 29)			Arm B (n = 31)		
	All grades	Study day	Grade ≥3†	All grades	Study day	Grade ≥3†
Acne	16 (55.2%)	152	1 (3.4%)	10 (32.3%)	26	1 (3.2%)
Acneform dermatitis	3 (10.3%)		0	11 (35.5%)		0
Anemia	1 (3.4%)		0	3 (9.7%)	50	1 (3.2%)
Blood magnesium decreased	1 (3.4%)		0	1 (3.2%)	101	1 (3.2%)
Diarrhea	1 (3.4%)		0	1 (3.2%)	11	1 (3.2%)
Dry skin	12 (41.4%)		0	6 (19.4%)		0
Fatigue	7 (24.1%)	36, 43	2 (6.9%)	9 (29.0%)	23, 70	2 (6.5%)
Headache	10 (34.5%)		0	15 (48.4%)	1, 1	2 (6.5%)
Hypokalemia	0		0	1 (3.2%)	56	1 (3.2%)
Nausea	9 (31.0%)		0	11 (35.5%)	2	1 (3.2%)
Pruritus	3 (10.3%)		0	7 (22.6%)		0
Pyrexia	6 (20.7%)		0	13 (41.9%)		0
Skin fissures	10 (34.5%)		0	3 (9.7%)		0
Vomiting	6 (20.7%)		0	6 (19.4%)	2	1 (3.2%)

*Most common and most severe adverse events (all events of worst grade ≥3 or affecting at least 20% of patients in either arm).
†Worst grade per patient.

Also, on page 1,922, the last sentence should read, "For example, in patients treated with necitumumab 800 mg every 2 weeks, trough concentrations (14 days posttreatment and immediately prior to the next treatment) averaged 83 μg/mL after the final dose of cycle 1," not "between 78 and 83 μg/mL, respectively, after the first and final dose of cycle 1."

Reference

1. Kuenen B, Witteveen PO, Ruijter R, Giaccone G, Dontabhaktuni A, Fox F, Katz T, Youssoufian H, Zhu J, Rowinsky EK, Voest EE. A phase I pharmacologic study of necitumumab (IMC-11F8), a fully human IgG_1 monoclonal antibody directed against EGFR in patients with advanced solid malignancies. Clin Cancer Res 2010;16:1915–27.

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