

Erratum to: New Treatment Modalities for Hepatocellular Cancer

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The original version of this article unfortunately contained mistakes. Correct information is presented as follows.

- (1) The name of the third author should have been displayed as “Nishant Poddar” (as shown above), not “Nishant Podda”.
- (2) Under the heading “RFA Versus Surgical Resection”,
 - Third paragraph, the sentence:

“Among the strengths of RFA in the treatment of HCC is the relatively low mortality and morbidity profile, with three recent multi-center studies have concluding mortal-

ity rates of less than 0.5 % as well as major complication rates of 2.0 to 3.5 % and minor complication rates of 5 to 8.9 %.”

SHOULD READ

“Among the strengths of RFA in the treatment of HCC is the relatively low mortality and morbidity profile, with three recent multi-center studies have concluded mortality rates of less than 0.5 % as well as major and minor complication rates of 2.0–3.5 % and 5–8.9 % respectively.”

- Fourth paragraph, the sentence:

“For very early-stage HCC, our preference is RFA when technically feasible.”

SHOULD READ

“For very early-stage HCC, our preference is RFA / MWA when technically feasible.”

- (3) Under the heading, “Early-Stage HCC”, the sentence:

“Similar to very early-stage HCC, the choice of therapy in terms of RFA versus surgical resection is controversial with RCTs reporting conflicting outcomes, rendering it difficult to draw conclusions regarding the optimal choice of therapy.”

SHOULD READ

“In contradiction to the very early stage HCC where RFA / MWA is the preferred treatment, the choice of therapy in the early stage HCC in terms of RFA versus surgical

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resection is controversial with RCTs reporting conflicting outcomes.

- (4) The heading “Combination Therapy—DEB-TACE and RFA Versus Monotherapy With RFA” SHOULD READ **“Combination Therapy (DEB-TACE and RFA) Versus Monotherapy With RFA”**.
- (5) The heading captured as “Very Early-Stage HCC, Early-Stage HCC, Intermediate-Stage HCC, Advanced-Stage HCC” SHOULD READ **“Newer Percutaneous Ablation Therapies”** and it is a sub-heading to *Early-Stage HCC*.
- (6) Under the heading “Intermediate-Stage HCC”, the sentence:

“Treatment options for this stage include transarterial therapies, including conventional transarterial chemoembolization (cTACE), transarterial chemoembolization with drug-eluting beads (DEB-TACE), embolization (TAE) [27], and radioembolization (TARE) and in certain circumstances, combination therapy [3••].”

SHOULD READ

“Treatment options for this stage include transarterial therapies, including conventional transarterial chemoembolization (cTACE), transarterial chemoembolization with drug-eluting beads (DEB-TACE), bland embolization (TAE) [27], and transarterial radioembolization (TARE) and in certain circumstances, combination therapy [3 ••].”

- (7) In Table 1, the following changes are made.

- In row 1, in the column with the heading *Tumor characteristics*:

“<2 cm or single HCC or 3 nodules less than 3 cm”

SHOULD READ

“<2 cm (very early) or single HCC / 3 nodules less than 3 cm (early)”.

- In row 1, in the column with the heading *Available treatment options*:

“RFA, surgical resection”

SHOULD READ

“RFA / MWA, surgical resection”

- In row 3, in the column with the heading *Available treatment options*:

“RFA, MWA, combination therapy”

SHOULD READ

“RFA / MWA, combination therapy”

- Table 1 footnote: “*MWA* Microwave Ablation” is added.