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CORRECTION

Correction to: Neuroendocrine characteristics of induced pluripotent stem cells from polycystic ovary syndrome women

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In the original publication the Fig. 2 and the Supplementary Material 1 was incorrect. The correct version of Fig. 2 and the Supplementary Material are provided in this correction article.

NESTIN should be corrected to PAX6 in Fig. 2C legend and at page 528 and Supplementary Material 1. NANOG should be corrected to PAX6 in Fig. 2C picture.

The original article can be found online at https://doi.org/10.1007/s13238-018-0600-1.

Electronic supplementary material The online version of this article (https://doi.org/10.1007/s13238-019-00664-y) contains supplementary material, which is available to authorized users.

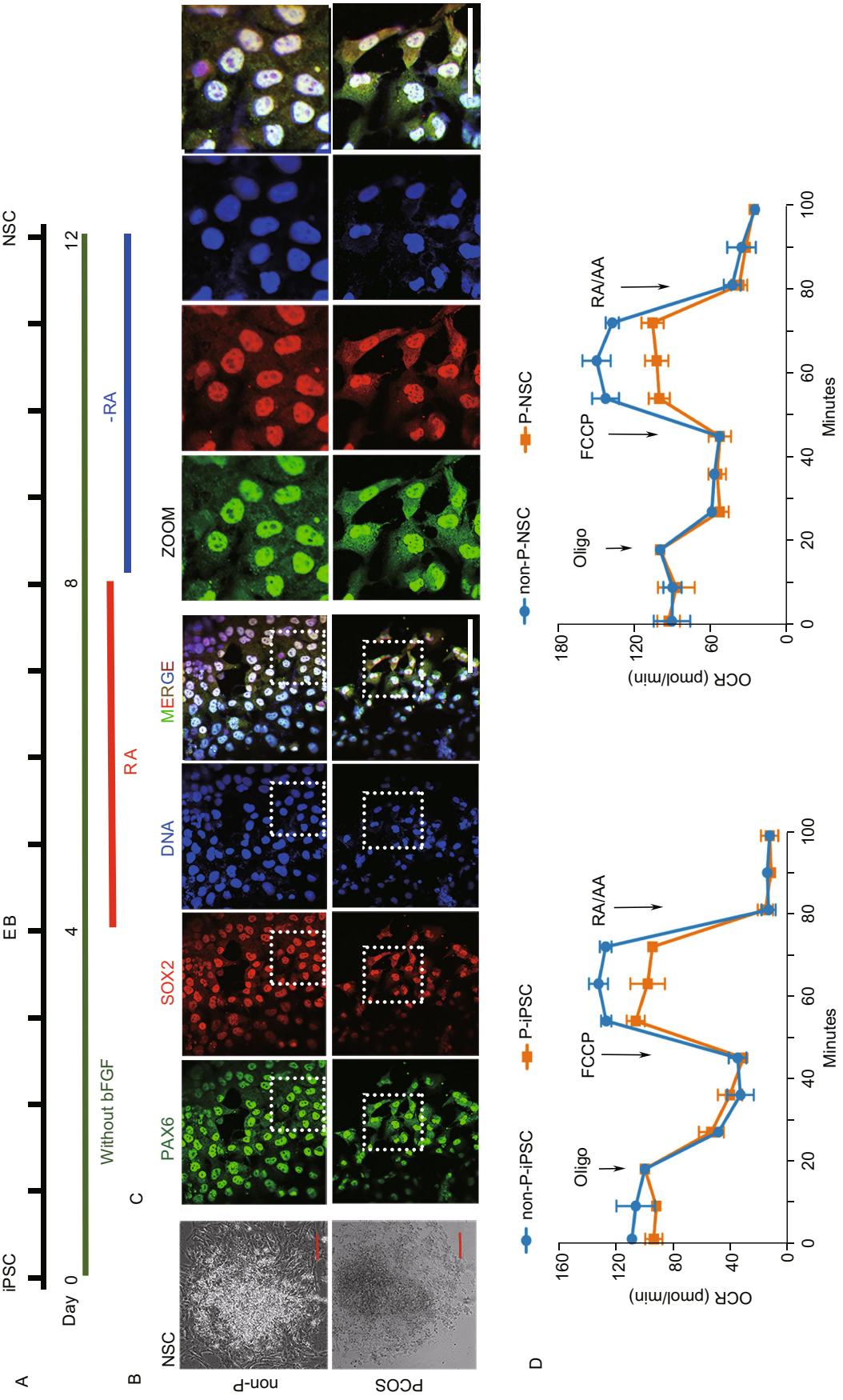

Figure 2. Differentiation and identification of NSCs from PCOS-derived iPSCs. (A) Schematic procedure of NSCs differentiation from iPSCs. NSC: Neural stem cell; EB: embryoid body. (B) The phenotype of specific differentiated NSCs. Scale bars = 100 μm. (C) Immunofluorescence images of the NSC markers SOX2 and PAX6. Scale bars = 50 μm. ZOOM, scale bars = 25 μm. (D) The mitochondrial respiration function of PCOS- and non-PCOS-derived iPSCs and NSCs. (E) Quantitative analysis of basal oxygen consumption, ATP production, maximal respiration, and proton leak. (F) Proposed neuroendocrine state in normal and PCOS patients. In normal patients, the GnRH pulsatile frequency is critical for steroidogenesis and follicular development. Low frequency pulses prefer FSH, and high frequency pulses favour LH. In PCOS, the increased GnRH release led to a high level of LH pulsatility, impairing the preferential release of FSH and follicular maturation, thus leading to polycystic ovaries. Red: increased; Blue: decreased. Solid arrow: up regulated; Dotted arrow: down regulated.

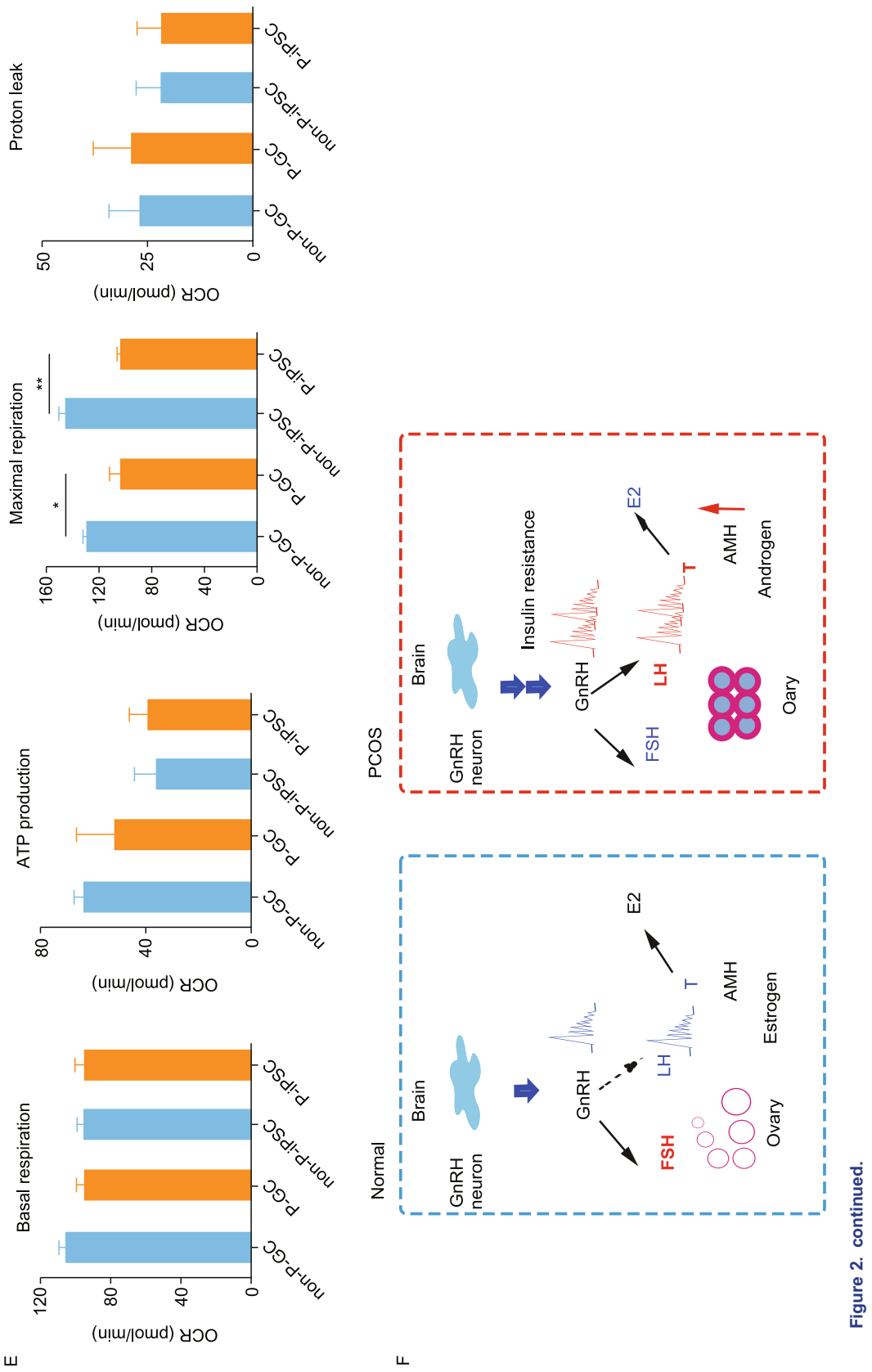

Figure 2. continued.