Erratum

In the article "Skin-Sparing Mastectomy and Immediate Reconstruction with a Deep Inferior Epigastric Perforator Flap" by Yano K, *et al.*, which appeared in *Breast Cancer* 10(3):275-280, 2003, all figure legends are incorrect. The editorial staff apologizes to the authors and all readers. The correct figure legends are presented with corresponding figures below.

Fig 1. Typical preoperative markings on the lower abdomen of a patient undergoing breast reconstruction using the DIEP flap. Designation of tissue zones (I-IV) based on vascularity to the different areas of the DIEP flap. Anastomosis of the thoracodorsal vessels with the inferior epigastric vessels and placement of the DIEP flap.

Fig 2. A 62-year-old woman (case 1) after a right skin-sparing mastectomy with nipple resection for breast carcinoma. The intraoperative marking of the DIEP flap is shown. The perforators are indicated by the black circles in the periumbilical region.

Fig 3. Intraoperative view of the DIEP flap showing the pedicle without the rectus abdominis muscle. The flap contains only skin, fat, and perforating vessels.

Fig 4. The nipple was reconstructed by means of a skate flap on the DIEP flap (arrow).

Fig 5. Left breast reconstruction by the DIEP flap at one year after operation. Nipple tattoo was performed.

Fig 6. Breast reconstruction by the DIEP flap at one year after operation (case 2). The abdomen demonstrates minimal donor-site deformity.

Fig 7. Three types of skin-sparing mastectomy incisions: Type 1 is a periareolar incision. Type 2 is a periareolar with medial or lateral incision, or both. Type 3 is a keyhole pattern or Wise pattern incision used in large and ptotic breasts.