ERRATA

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A randomized comparative study of endocrine monotherapy and a combination of estramustine phosphate with the endocrine therapy in patients with untreated stage D prostate cancer

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Errors appeared in the article cited above.

Tables 1–3 and Figures 1–3 should have appeared as follows:

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Table 1. Distribution of patient characteristics

Characteristics	Endocrine + EMP	Endocrine alone	<i>P</i> value
Randomized (<i>n</i>)	33	30	
Not eligible (<i>n</i>)	2	4	
Eligible (<i>n</i>)	31	26	
Age (years)			
Mean ± SE	69.8 ± 1.0	70.0 ± 1.2	0.9636 ^a
Median (range)	70 (57–78)	69 (60–79)	
Endocrine therapy (<i>n</i>)			
LH-RH agonist ± anti-androgen	22	27	0.2007 ^b
Others	9	5	
Performance status (<i>n</i>)			
0	14	14	
1	11	10	
2	4	0	0.4139 ^b
3	2	2	
Pathological grade (<i>n</i>)			
Well diff.	2	4	
Moderately diff.	19	13	0.7793 ^b
Poorly diff.	10	9	
EOD grade (<i>n</i>)			
0	2	0	
1	16	10	
2	10	11	0.1183 ^b
3	3	5	
Metastatic sites (<i>n</i>)			
Lung	0	1	
Bone	29	27	
Lymph node	11	13	
Liver	0	1	
Pretreatment			
PSA (ng/ml)			
Mean ± SE	673.8 ± 224.8	946.6 ± 315.7	0.4748 ^a
Median (range)	171.2 (2.3–4800)	230 (1.8–5930)	
Follow-up time			
(weeks)			
Mean ± SE	94.3 ± 13.4	96.4 ± 14.4	0.8552 ^a
Median (range)	76.3 (8.3–228.1)	92.3 (1.4–243.7)	

^a *t*-test

^b Mann-Whitney test

Table 2. Analysis of overall survival in both groups

Characteristics	Number of patients (<i>n</i>)		Median survival (weeks)		<i>P</i> value (log-rank test)
	E + EMP	E	E + EMP	E	
PS					
0	13	13	Not reached	Not reached	0.2834
1–3	13	10	Not reached	133	0.0422
Age (years)					
<74	17	16	Not reached	121	0.0259
≥74	9	7	Not reached	Not reached	0.7322
Baseline PSA (ng/ml)					
≤20	2	4	Not reached	Not reached	0.4945
>20	24	19	Not reached	133	0.0373
EOD grade					
0–2	23	19	Not reached	Not reached	0.0529
3–4	3	4	Not reached	Not reached	0.8140
Pathological grade					
Well	2	3	Not reached	Not reached	0.1308
Moderate, poor	24	20	Not reached	166	0.0290
PSA evaluation at 12 weeks					
CR	14	14	Not reached	Not reached	0.2134
PR	9	8	Not reached	102	0.0262

E, endocrine therapy; EMP, estramustine phosphate

Table 3. Incidence of side effects

	E + EMP (<i>n</i> = 31)	E (<i>n</i> = 26)
Gastrointestinal toxicity	4 (2)	1
Liver dysfunction	4	3
Cardiovascular disorder	5 (1)	1 (1)
Anemia	3	0
Others	3	3
Total number of cases	14/31 (45.2%)	7/26 (26.9%)

E, endocrine therapy; EMP, estramustine phosphate

Numbers in parentheses indicate grade 3 or higher side effects

Fig. 2. Kaplan-Meier estimate of overall survival. The median time to death was not reached in the combination therapy group (*thick line*) vs 166 weeks in the endocrine monotherapy group (*thin line*). Log-rank, *P* = 0.0394; generalized Wilcoxon test, *P* = 0.0145 **Fig. 1.** Kaplan-Meier estimate of progression-free survival. The median time to progression was 107 weeks in the group with a combination of endocrine therapy and EMP (*thick line*) vs 48 weeks in the endocrine monotherapy group (*thin line*). Log-rank, *P* = 0.3599; generalized Wilcoxon test, *P* = 0.0680 **Fig. 3.** Kaplan-Meier estimate of overall survival in patients who had three poor prognosis factors (performance status [PS] of 1 to 3, pretreatment prostate-specific antigen [PSA] level of more than 20 ng/ml, and moderately or poorly differentiated carcinoma). The median time to death was 215 weeks in the combination therapy group (*thick line*) vs 133 weeks in the endocrine monotherapy group (*thin line*). Log-rank, *P* = 0.0429; generalized Wilcoxon test, *P* = 0.0171