Correction to: Population pharmacokinetics of trastuzumab emtansine in previously treated patients with HER2-positive advanced gastric cancer (AGC)

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Correction to:
Cancer Chemother Pharmacol (2017) 80:1147–1159
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The author would like to correct the errors in the publication of the original article. The corrected details are given below for your reading.

In the “Introduction” section, last sentence of the second paragraph should read as:

The estimated clearance, volume of distribution of the central compartment (V_c), and terminal elimination half-life of T-DM1 were 0.676 L/day, 3.127 L and 3.94 days, respectively [13].

In the “PK sampling and bioanalytic method” section, Third sentence should read as:

For the T-DM1 2.4 mg/kg qw regimen, additional PK samples were collected at end of infusion on day 8 and day 15 of Cycle 1. Post-T-DM1 regimen-selection analysis, PK samples were collected at predose and end of infusion of Cycle 1 and 4 (day 1); predose Cycle 2. Patients were defined as evaluable for PopPK analysis if they had at least one adequately documented dose of T-DM1 and a corresponding PK sample.

Table 1 should read as:

The original article can be found online at <https://doi.org/10.1007/s00280-017-3443-1>.

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Table 1 Covariate values of GATSBY PopPK dataset

	2.4 mg/kg qw		3.6 mg/kg q3w	
	<i>N</i>	Median (min, max)	<i>N</i>	Median (min, max)
Continuous covariates				
Age (years)	101	61 (22, 78)	35	64 (24, 78)
BW (kg)	101	63.0 (35.2, 99.6)	35	58.8 (42.5, 94.9)
CRCL (mL/min)	97	74.5 (29.3, 175.0)	35	74.2 (25.6, 120.2)
SGOT (U/L)	95	23 (9, 103)	35	23 (12, 92)
SGPT (U/L)	96	16 (5, 67)	35	16 (5, 57)
TBIL (μmol/L)	96	8.6 (3.4, 25.1)	35	8.0 (3.3, 27.4)
ALKP (U/L)	95	129 (42, 596)	35	130 (42, 613)
PLAT (× 10 ⁹ /L)	93	230 (107, 595)	34	227 (123, 853)
ECD (ng/mL)	85	9.0 (2.2, 515.3)	33	8.6 (2.2, 241.9)
TMBD (mm)	90	57 (10, 210)	31	67 (15, 246)
TBL (μg/mL)	98	0.65 (0.00, 42.50)	35	0.00 (0.00, 38.70)
Categorical covariates				
Sex (male/female)	75/26		26/9	
Race (White/Asian/other)	38/59/4		14/18/3	
ECOG PS (0/1)	49/52		13/22	
Measurable disease (yes/no)	90/11		31/4	
Visceral disease (yes/no)	61/40		20/15	
Number of disease sites (< 3/≥ 3)	45/56		14/21	
Cancer type (gastric/GEJ)	72/29		25/10	
Cancer histologic subtype (intestinal/diffuse/mixed/unknown) ^a	39/23/5/34		13/3/1/18	
Prior gastrectomy (yes/no)	30/71		11/24	
Bone metastasis (yes/no)	7/94		2/33	
Liver metastasis (yes/no)	49/52		15/20	
Lung metastasis (yes/no)	28/73		7/28	

ALKP alkaline phosphatase concentration, *BW* body weight, *CRCL* creatinine clearance, *ECD* serum human epidermal growth factor receptor 2 shed extracellular domain concentration, *ECOG PS* Eastern Cooperative Oncology Group performance status, *GEJ* gastroesophageal, *PLAT* baseline platelet count, *PopPK* population pharmacokinetics, *SGOT* serum aspartate aminotransferase concentration, *SGPT* serum alanine aminotransferase concentration, *TBL* baseline trastuzumab concentration, *TBIL* total bilirubin concentration, *TMBD* tumor burden, *qw* every week, *q3w* every 3 weeks

^aPer investigator assessment

In the “Discussion” section, tenth sentence should read as:

The interaction between trastuzumab and its target, the membrane-bound receptor HER2, may account for the non-linear elimination pathway.

In the “Discussion” section, eleventh sentence of the fourth paragraph should read as:

GATSBY successfully addressed this concern and the regimen that was selected for further evaluation in the phase III portion of the study was 2.4 mg/kg qw.

Reference 6 should read as:

Kadcyla™ (ado-trastuzumab emtansine) (2013) Prescribing information (USA). Genentech. http://www.access-data.fda.gov/drugsatfda_docs/label/2013/1254271bl.pdf. Accessed June 2016.