Erratum to liver transplantation for unresectable pancreatic neuroendocrine tumors with liver metastases in an era of transplant oncology

Keita Shimata, Yasuhiko Sugawara, Taizo Hibi

Department of Transplantation and Pediatric Surgery, Kumamoto University Graduate School of Medical Sciences, Kumamoto, Japan *Correspondence to:* Taizo Hibi. Department of Transplantation and Pediatric Surgery, Kumamoto University Graduate School of Medical Sciences, 1-1-1 Honjo, Chuo-ku, Kumamoto 860-8556, Japan. Email: taizohibi@gmail.com.

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It has come to the authors' attention that their article included several errors in Table 1 on page 44 of the 2018 February Issue of Gland Surgery (GS) (1). In the table, the reference numbers in brackets were wrong and there was also a meaningless series of digits following the word "Milan criteria".

Here, we declare the corrected version is as follows (*Table 1*):

Table 1 Milan criteria, UNOS guidelines, and ENETS guidelines on LT for pNETLM

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Index	Milan criteria (17)	UNOS 2015 (19)	ENETS 2016 (11)
Histology grade	G1–G2*	G1–G2*	G1–G2*
Primary tumor site	Drained by the portal system	Drained by the portal system	NA
Tumor involvement	<50% of the liver volume	<50% of the liver volume	NA
Primary tumor resection and interval of stable disease	Resection of primary tumor and all extra-hepatic tumor deposits and stable disease/good response to therapies for at least 6 months	Resection of primary malignancy and extra-hepatic disease without any evidence of recurrence at least 6 months	NA
Recipient age	<60 years (relative criteria)	<60 years	NA
Others	None	Neuroendocrine liver metastasis limited to the liver, bi-lobar, not amenable to resection	Early refractory to multiple systemic treatment Exclusion of extrahepatic disease Low bilirubin Carcinoid syndrome or functional NETs

*, World Health Organization classification of neuroendocrine tumors 2010. UNOS, United Network for Organ Sharing; ENETS, European Neuroendocrine Tumor Society; LT, liver transplantation; pNETLM, pancreatic neuroendocrine tumor liver metastases; NA, not applicable.

We are sorry for the inconvenience caused.

References

1. Shimata K, Sugawara Y, Hibi T. Liver transplantation for unresectable pancreatic neuroendocrine tumors with liver metastases in an era of transplant oncology. Gland Surg 2018;7:42-6.

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