Cancer Epidemiology, Biomarkers & Prevention

Correction: Effect of Oral Snus and Medicinal Nicotine in Smokers on Toxicant Exposure and Withdrawal Symptoms: A Feasibility Study

In this article (1), which was published in the January 2011 issue of *Cancer Epidemiology, Biomarkers & Prevention*, the following modifications were requested by the authors. The corrected data include the following: (i) Table 1 and Subjects portion of results section: Baseline FTND score was 5.2 ± 1.8 for those receiving Camel Snus, 5.3 ± 1.9 for those receiving medicinal nicotine, and 5.5 ± 1.7 for those receiving Taboka ($P = 0.78$). For those who completed the study, FTND scores were 5.4 ± 1.9 for those receiving Camel Snus, 5.1 ± 2.0 for those receiving medicinal nicotine, and 5.2 ± 2.0 for those receiving Taboka. For those who did not complete the study, FTND scores were 5.0 ± 1.6, 5.6 ± 1.8, and 6.0 ± 1.1, respectively; (ii) Outcome Measures portion of Methods section: The items in the withdrawal symptoms scale used were craving, irritability/frustration/anger, anxiety, difficulty concentrating, restlessness, increased appetite/weight gain, depressed or sad mood, and insomnia/sleep problems; (iii) Table 1: The average age reported for becoming a regular smoker in the Taboka group was based on 51 subjects; and (iv) Statistical Analysis portion of the Methods section: Each repeated-measures model included the treatment effect, a visit effect, the interaction between treatment and visit, and the between-subject error and within-subject error terms.

Reference

1. Kotlyar M, Hertsgaard LA, Lindgren BR, Jensen JA, Carmella SG, Stepanov I, et al. Effect of oral Snus and medicinal nicotine in smokers on toxicant exposure and withdrawal symptoms: a feasibility study. Cancer Epidemiol Biomarkers Prev 2011;20:91–100.

doi: 10.1158/1055-9965.EPI-11-0050
Published online May 5, 2011.