Anhedonia and reward-circuit connectivity distinguish nonresponders from responders to dorsomedial prefrontal rTMS in major depression

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Erratum to: “Cognitive-Behavioral Therapy as Continuation Treatment to Sustain Response After Electroconvulsive Therapy in Depression: A Randomized Controlled Trial” by Brakemeier et al. which appeared in *Biological Psychiatry* (2014; 76:194-202).

The incorrect clinical trials information was inadvertently included in the paper. The correct information regarding the trial is: ClinicalTrials.gov Number NCT00437385; Evaluation of Three Continuation Therapies After ECT Concerning Efficacy and Cognition in Severely Depressed Patients (EFFECT); http://clinicaltrials.gov/ct2/show/NCT00437385.

Erratum to: “Deep Brain Stimulation in Major Depression: Plastic Changes of 5-Hydroxytryptamine Neurons” by Artigas which appeared in *Biological Psychiatry* (2014;76:174-175). On page 175, column 1, 8th line from the bottom, the findings were inadvertently misstated as a decrease rather than an increase. The full corrected sentence is: “Using this procedure, the authors found that CSDS induced a robust and significant increase of the density of 5-HT nerve endings in various forebrain areas, including the vmPFC, the basolateral amygdala, and the dentate gyrus of the hippocampal formation, which was normalized after long-term DBS treatment.”

Erratum to: “Adding Low-Field Magnetic Stimulation to Noninvasive Electromagnetic Neuromodulatory Therapies” by Shafi et al.

Erratum to: “Anhedonia and Reward-Circuit Connectivity Distinguish Nonresponders from Responders to Dorsomedial Prefrontal Repetitive Transcranial Magnetic Stimulation in Major Depression” by Downar et al. which appeared in *Biological Psychiatry* (2014;76:176-185).

The authors inadvertently misreported the outcome rates for the secondary measure (Beck Depression Inventory) in the 3rd sentence of the 1st paragraph of the Results section. The revised and corrected sentence is: “On the secondary measure (BDI-II), outcomes were similar, with 21 of 47 patients (44.7%) reporting a ≥50% reduction in symptoms and 19 of 47 patients (40.4%) achieving the remission criterion of BDI-II ≤12 posttreatment.” The authors have verified that all other values are correct as reported.