

## Erratum

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# Longitudinal Diffusion-Weighted Whole-Body MRI Demonstrates Dynamic Changes in Muscle Integrity in Motor Neuron Disease

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There are some inaccuracies in the abstract, particularly in the methods, preliminary results and the conclusion.

On page S47:

“TE = 66 ms, TI = 250 ms, b = 0,1000 s/mm<sup>2</sup> voxel size = 2.3 × 2.3 × 5 mm<sup>3</sup>, 8 stations”

Should instead read:

“TE = 66 ms, TI = 250 ms, b = 0,1000 s/mm<sup>2</sup> voxel size = 2.3 × 2.3 × 5 mm<sup>3</sup>, 8 Stations”

The correct preliminary results and the conclusion should be:

“Preliminary results: MND patients exhibited higher multi-region ADC than controls at baseline ( $1.53$  vs  $1.47 \times 10^{-3}$  mm<sup>2</sup>/s,  $p = 0.027$ ), but this result did not survive correction for multiple comparisons. Higher baseline ADC in right and left tibialis anterior was associated with greater clinical weakness ( $p = 0.031$  and  $p = 0.004$ , respectively) and lower MUNIX ( $p = 0.002$ ) in this muscle. There were no associations between multi-region ADC and functional questionnaires, power scores or disease duration. There were no longitudinal ADC changes.

Conclusions: Biologically feasible associations between higher ADC, reflecting greater free diffusion, and greater clinical weakness and loss of motor units were evident. Whilst there was a suggestion that MND patients had higher ADC than controls, this did not survive multiple comparisons correction, and no longitudinal changes were found. As applied in this study, ADC appears less sensitive to detect progressive muscle denervation in MND than other previously tested modalities.”