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definition of B–C is constrained by A–B and A–C. Therefore, the B \rightarrow C pair, which is not a true direct-transmission pair, is likely to be misclassified as such, introducing a misclassification of the outcome measure. Accounting for nonindependence of outcome measure (e.g., a random effect) in a regression model might mitigate the bias introduced by the misclassification of the outcome measure (B \rightarrow C) by giving it reduced weight in the model but could also affect other truly independent outcome measures (A \rightarrow C and B \rightarrow C). In one of the sensitivity analyses of our work, we showed that the effect size of most point estimates increased, suggesting the introduced bias of misclassification drove our findings toward a null value (1).

Regarding the issue of independent and identical distribution, using the same dataset from our study, we first showed that the SE of β values for all covariates remained almost unchanged once the sample size of control pairs exceeded approximately 10,000 (Figure 1). We then compared the *P* values of the naive logistic regression model with the permutation-based *P* values and found that the *P* values of the naive logistic regression model were usually similar to or larger than the permutation-based *P* values. This finding suggests that the repeated use of individual-level data in many pairs does not create any correlation and therefore did not violate the assumption of independent and identical distribution.

Additional material related to this response is available at https:// shorturl.at/osOAJ.

<u>Author disclosures</u> are available with the text of this letter at www.atsjournals.org.

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References

- Trevisi L, Brooks MB, Becerra MC, Calderón RI, Contreras CC, Galea JT, et al. Who transmits tuberculosis to whom: a cross-sectional analysis of a cohort study in Lima, Peru. Am J Respir Crit Care Med 2024;210: 222–233.
- Colangeli R, Gupta A, Vinhas SA, Chippada Venkata UD, Kim S, Grady C, et al. Mycobacterium tuberculosis progresses through two phases of latent infection in humans. Nat Commun 2020;11:4870.

- Huang CC, Trevisi L, Becerra MC, Calderón RI, Contreras CC, Jimenez J, et al. Spatial scale of tuberculosis transmission in Lima, Peru. Proc Natl Acad Sci USA 2022;119:e2207022119.
- 4. Kenny DA, Kashy DA, Cook WL. Dyadic data analysis. New York: Guilford; 2020.
- Yang C, Sobkowiak B, Naidu V, Codreanu A, Ciobanu N, Gunasekera KS, et al. Phylogeography and transmission of *M. tuberculosis* in Moldova: a prospective genomic analysis. *PLoS Med* 2022;19:e1003933.
- Warren JL, Chitwood MH, Sobkowiak B, Colijn C, Cohen T. Spatial modeling of *Mycobacterium tuberculosis* transmission with dyadic genetic relatedness data. *Biometrics* 2023;79: 3650–3663.

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Erratum: Lung Microbiota and Metabolites Collectively Associate with Clinical Outcomes in Milder Stage Chronic Obstructive Pulmonary Disease

There is an error in the article by Madapoosi and colleagues (1), published in the August 15, 2022 issue of the *Journal*. In the second sentence in the data sharing footnote, the accession number for the 16S rRNA gene sequence used in the article was listed without its final digit. The correct accession number is PRJNA673153.

For the convenience of our readers, the *Journal* is replacing the online version of the article with a corrected version.

Reference

 Madapoosi SS, Cruickshank-Quinn C, Opron K, Erb-Downward JR, Begley LA, Li G, Barjaktarevic I, Barr RG, Comellas AP, Couper DJ, Cooper CB, Freeman CM, Han MK, Kaner RJ, Labaki W, Martinez FJ, Ortega VE, Peters SP, Paine R, Woodruff P, Curtis JL, Huffnagle GB, Stringer KA, Bowler RP, Esther CR Jr, Reisdorph N, Huang YJ; SPIROMICS Research Group. Lung microbiota and metabolites collectively associate with clinical outcomes in milder stage chronic obstructive pulmonary disease. *Am J Respir Crit Care Med* 2022;206: 427–439.

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