



Corrigendum: Adenosine Kinase Inhibition Protects against Cranial Radiation-Induced Cognitive Dysfunction

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Keywords: adenosine, adenosine kinase, astrogliosis, radiation, cancer therapy, cognition, neuroprotection

OPEN ACCESS

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Received: 02 June 2017

Accepted: 23 June 2017

Published: 10 July 2017

Citation:

Acharya MM, Baulch JE, Lusardi TA,
Allen BD, Chmielewski NN,
Baddour AAD, Limoli CL and
Boison D (2017) Corrigendum:
Adenosine Kinase Inhibition Protects
against Cranial Radiation-Induced
Cognitive Dysfunction.
Front. Mol. Neurosci. 10:218.
doi: 10.3389/fnmol.2017.00218

A corrigendum on

Adenosine Kinase Inhibition Protects against Cranial Radiation-Induced Cognitive Dysfunction

by Acharya, M. M., Baulch, J. E., Lusardi, T. A., Allen, B. D., Chmielewski, N. N., Baddour, A. D., et al. (2016). *Front. Mol. Neurosci.* 9:42. doi: 10.3389/fnmol.2016.00042

In the original article, in **Figure 2** the fourth column (IRR + 5-ITU group) accidentally had incorrect photomicrographs inserted for each channel shown (Merged, ADK, and GFAP). The corrected **Figure 2** appears below.

Similarly, the reference for Osman, A. M. et al. (2014; doi: 10.3727/096368913X674648) has been incorrectly cited. It should be disregarded. The authors apologize for these errors and state that this does not change the scientific conclusions of the article in any way.

Conflict of Interest Statement: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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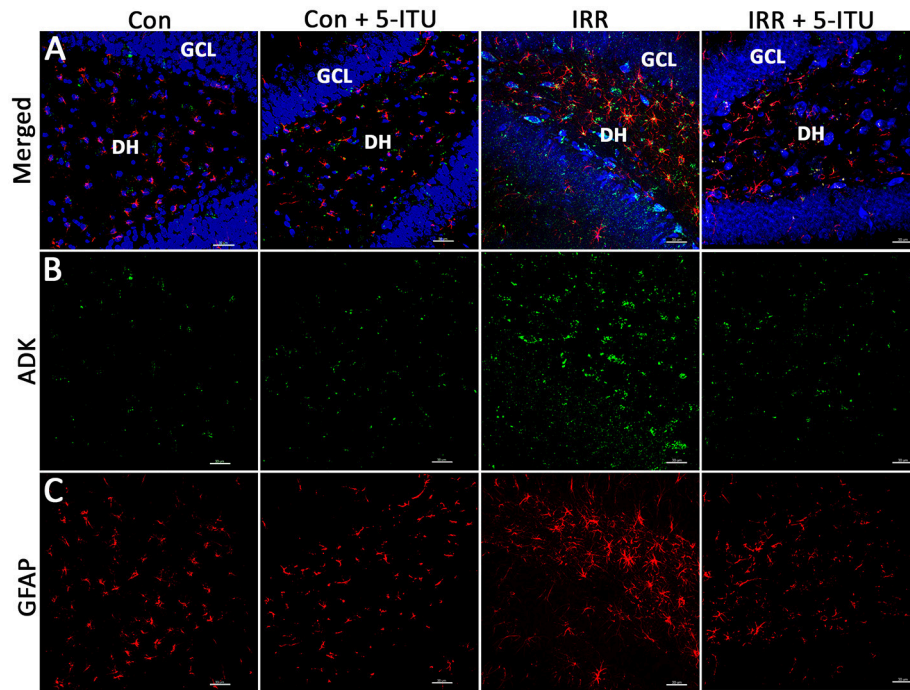


FIGURE 2 | Cranial irradiation elevates adenosine kinase (ADK) immunoreactivity and astrogliosis. Immunofluorescence analysis demonstrates that at 1 month post-treatment, compared to controls (Con and Con + 5-ITU), exposure to cranial irradiation (10 Gy) leads to elevated ADK immunoreactivity (**A,B**; IRR group; ADK, green; DAPI nuclear counterstain, blue) that is reduced to control levels in irradiated animals treated with 5-ITU (IRR + 5-ITU). Representative confocal micrographs show the presence reactive astrocytic cell bodies (**A,C**; glial fibrillary acidic protein; GFAP, red) in the hippocampal dentate hilus (DH), sub-granular zone and granule cell layer (GCL) indicating astrogliosis. IRR + 5-ITU animals showed reduced ADK and GFAP immunoreactivity compared to IRR animals. Scale bar: 30 μ m.