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Corrections



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[http://dx.doi.org/10.1016/S1473-3099\(18\)30208-1](http://dx.doi.org/10.1016/S1473-3099(18)30208-1)

Okokhere P, Colubri A, Azubike C, et al. *Clinical and laboratory predictors of Lassa fever outcome in a dedicated treatment facility in Nigeria: a retrospective, observational cohort study.* *Lancet Infect Dis* 2018; published online March 6. [http://dx.doi.org/10.1016/S1473-3099\(18\)30121-X](http://dx.doi.org/10.1016/S1473-3099(18)30121-X)—In this Article, in the eleventh paragraph of the Results, the sentence beginning on the ninth line should have read “This difference in case-fatality rate is considerably smaller than that for creatinine (25% vs 62%)”. This correction has been made to the online version as of March 16, 2018, and will be made to the printed Article.



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Flacco ME, Manzoli L, Rosso A, et al. *Immunogenicity and safety of the multicomponent meningococcal B vaccine (4CMenB) in children and adolescents: a systematic review and meta-analysis.* *Lancet Infect Dis* 2018; published online Jan 19. [http://dx.doi.org/10.1016/S1473-3099\(18\)30048-3](http://dx.doi.org/10.1016/S1473-3099(18)30048-3)—In this Article, the author name ‘Mario Bergamini’ should read ‘Mauro Bergamini’. In the seventh paragraph of the Results, ‘M110713’ should read ‘M10713’. In the fifth paragraph of the Discussion, the sentence ‘whereas in the UK only two doses and a booster dose are recommended for all infants and children after age 5 months.’⁵⁴ should read ‘whereas in the UK only two doses and a booster dose are recommended for all infants and children after age 2 months.’⁵⁴. In the final paragraph of the Discussion, the sentence ‘Among adolescents, immunogenicity persists up to 6 months after vaccination, but data are limited to one trial.’ should read ‘Among adolescents, immunogenicity persists after 6 months from vaccination, but data are limited to one trial.’ These corrections have been made to the online version as of March 16, 2018, and will be made to the printed Article.



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Zignol M, Maurizio Cabibbe A, Dean AS, et al. *Genetic sequencing for surveillance of drug resistance in tuberculosis in highly endemic countries: a multi-country population-based surveillance study.* *Lancet Infect Dis* 2018; published online March 21. [https://doi.org/10.1016/S1473-3099\(18\)30073-2](https://doi.org/10.1016/S1473-3099(18)30073-2). The key for figure 4 was incorrect, and should have read “Genetic sequencing” and “Phenotypic testing”. This correction has been made to the online version as of March 27, 2018, and the printed Article will be corrected.

Nguyen T-N, von Seidlein L, Nguyen T-V, et al. *The persistence and oscillations of submicroscopic Plasmodium falciparum and Plasmodium vivax infections over time in Vietnam: an open cohort study.* *Lancet Infect Dis* 2018; **18**: 565–72—In this Article, the lowest parasite densities shown in figure 3 were found to be below the lower limit of accurate quantification of the PCR method used in the study (22 parasites per mL). The analysis was therefore redone after excluding these low parasite densities. The overall findings remain unchanged. The end of the third paragraph in the Results section has been amended to state: The geometric mean parasite density in participants in the *P falciparum* group with a single positive uPCR test was 1957 parasites per mL (95% CI 948–4041), whereas those with five positive uPCR tests had a geometric mean maximum parasite density of 96 679 parasites per mL (7500–1 246 310; test for trend $p < 0.0001$). Figure 3 has also been updated. These corrections have been made to the online version as of April 19, 2018, and the printed Article is correct.