



Erratum to laparoscopic needle catheter jejunostomy by using a double semipurse string suture method in minimally invasive Ivor Lewis esophagectomy

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This article that appeared on Page: 240-248, Vol 12, No 3 (March 2020) Issue of the *Journal of Thoracic Disease (JTD)* (1), contained three mistakes.

The details are as followings:

- (I) On the second line of the *methods* paragraph on page 240, and in the first sentence of the paragraph of *methods* on page 241, “March 2014” need to be corrected as “March 2011”.
- (II) On page 241, in the paragraph of *methods*, the first sentence “..... receiving MIILE in our hospital” should be corrected as “..... receiving MIILE performed by Dr. Wu’s team”
- (III) On page 243, in Table 1, “stage III” should be revised as “stage III/IV”.

The corrected version of Table 1 is presented here (*Table 1*).

The authors regret the error.

Table 1 Patient basic characteristics and postoperative clinical data

Variable	n=206
Age (years)	64.61±8.12
Sex (male:female)	186:20
Tumor pathology, n (%)	
Squamous cell carcinoma	184 (89.32)
Adenocarcinoma	12 (5.83)
Others	10 (4.85)
Tumor location, n (%)	
Middle esophagus	86 (41.75)
Lower esophagus	109 (52.91)
Gastro-esophageal junction	11 (5.34)
Prior abdominal surgery, n (%)	27 (13.11)
Body mass index (kg/m ³)	21.80±2.70
Tumor stage*, n (%)	
Stage 0/I	42 (20.39)
Stage II	75 (36.41)
Stage III/IV	89 (43.20)
Operative time of catheter jejunostomy (min)	10.56±2.04
Postoperative hospitalization time (days)	13.11±7.22
Starting time of enteral nutrition support (days)	1–3
Retention time of jejunostomy tube (days)	96.52±10.45

Data are shown as n (%) or mean ± SD. *, according to TNM staging standard of esophageal cancer in AJCC (7th edition).

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References

1. Peng X, Zhu X, Wu Z, et al. Laparoscopic needle catheter jejunostomy by using a double semipurse string suture method in minimally invasive Ivor Lewis esophagectomy. *J Thorac Dis* 2020;12:240-8.

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