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Corrigendum: Prebiotic effect of fructooligosaccharides from *Morinda officinalis* on Alzheimer's disease in rodent models by targeting the microbiota-gut-brain axis

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A Corrigendum on

Prebiotic effect of fructooligosaccharides from *Morinda officinalis* on Alzheimer's disease in rodent models by targeting the microbiota-gut-brain axis

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In the published article, there was an error in Figure 3E and Figure 6 as published. The H&E image of the brain of OMO-100 in Figure 3E was used incorrectly, and the IHC images in Figure 6 were misused. The corrected Figure 3 and Figure 6 and their captions appear below.

The authors apologize for these errors and state that they do not change the scientific conclusions of the article in any way. The original article has been updated.

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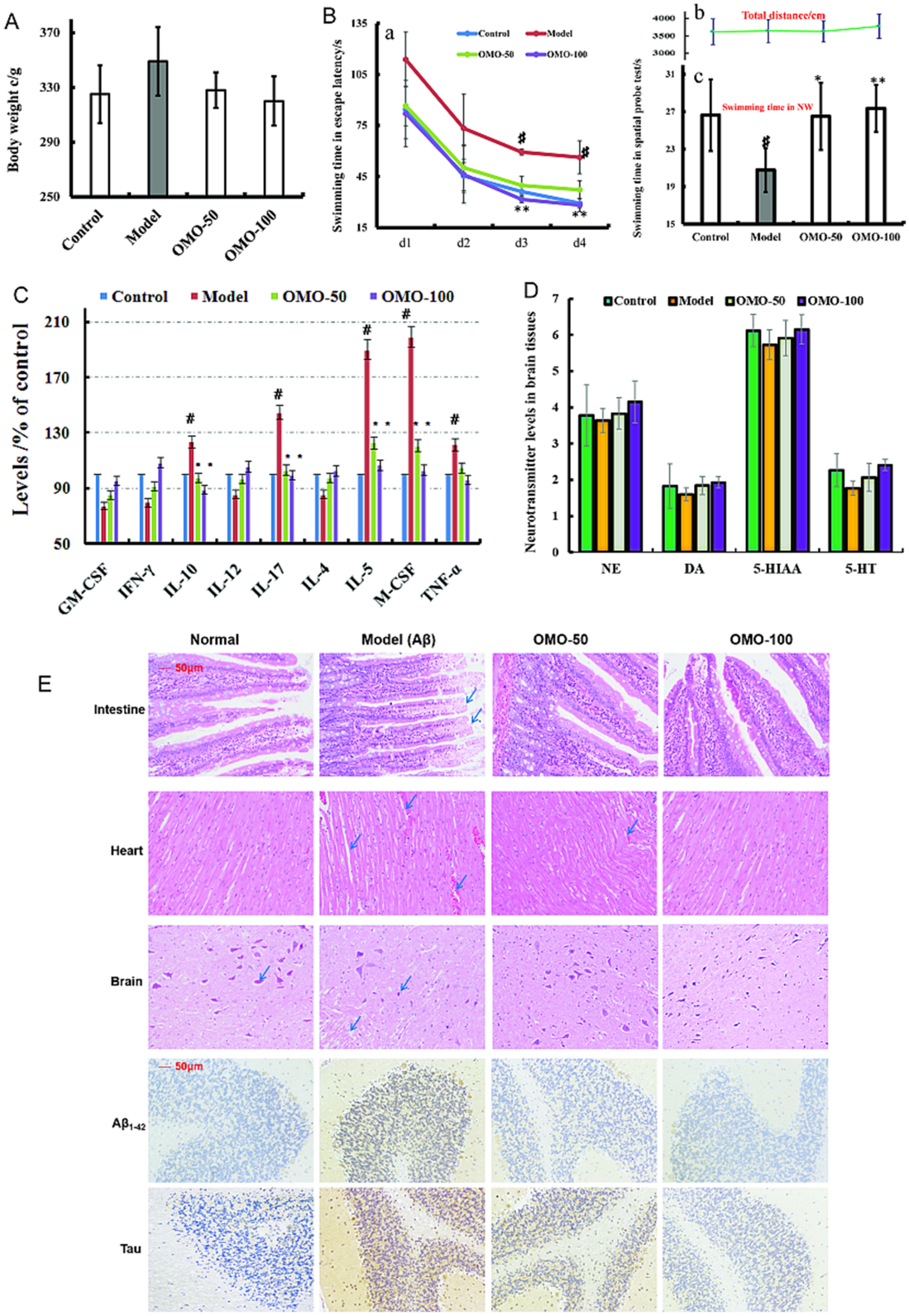

FIGURE 3
Effect of OMO in Aβ1-42-induced deficient rats. **(A)** Body weight changes during the treatments time. **(B-a)** Escape latency in the MWM. **(B-b)** Swimming distance. **(B-c)** Swimming time in the platform quadrant during the spatial probe test. **(C)** Level of cytokines GM-CSF, TNF-γ, 1L-10, IL-12, 1L-17α, 1L-4, TNF-α, and VGEF-α in the serum. **(D)** Levels of monoamine neurotransmitters (NE, DA, 5-HT, and 5-HIAA) in the brain tissue. **(E)** Histopathological changes in the intestine, heart, and brain, and the expressions of $A\beta_{1-42}$ and Tau proteins in brain tissues by immunohistochemistry. The graph Control, control group; Model, model group; OMO-50 mg, low-dose group that received D-galactose (100 mg/kg/d) i.p. and gavage at a dosage of 50 mg/[kg·d] in OMO; OMO-100 mg, high-dose group that received D-galactose (100 mg/kg/d) i.p. and gavage at a dosage of 100 mg/[kg·d] in OMO. Values are represented as mean ± SD ($n = 6$) and expressed as the percentage of the control group, #p < 0.01 vs. control group, $^{*}p < 0.05$ vs. model group, $^{**}p < 0.01$ vs. model group.

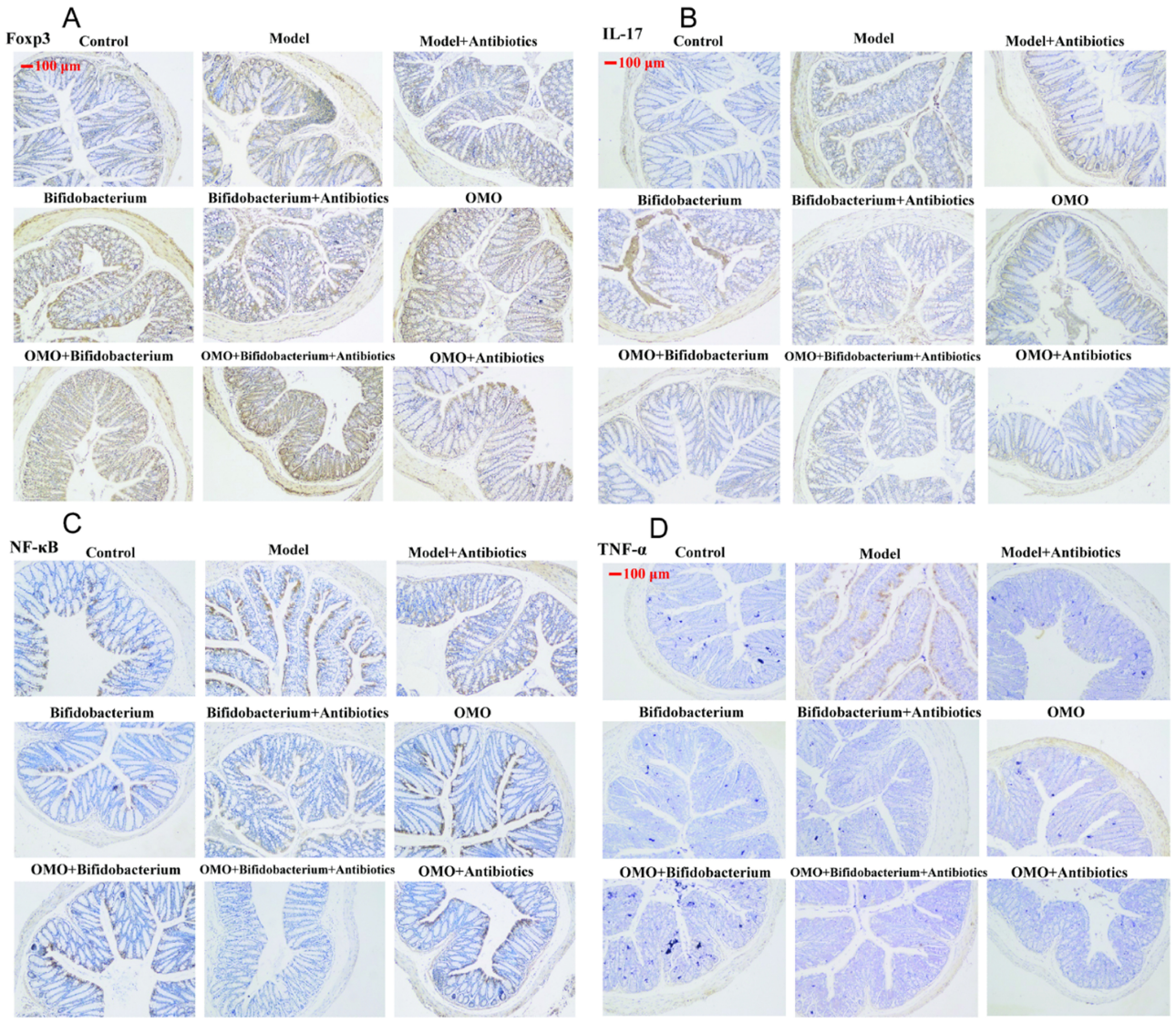

FIGURE 6
Immunohistochemistry staining of Foxp3 **(A)**, IL-17 **(B)**, NF-κB p65 **(C)**, and TNF-α **(D)** in the colons of different experimental groups in high-dose broad spectrum antibiotics and TNBS-induced IBD mice after treatment with OMO.