

## **OPEN ACCESS**

EDITED AND REVIEWED BY Takahiro Kodama, Osaka University, Japan

\*CORRESPONDENCE

Jian-Hong Zhong

Zhongjianhong@gxmu.edu.cn

<sup>†</sup>These authors have contributed equally to this work

RECEIVED 20 July 2025 ACCEPTED 08 August 2025 PUBLISHED 27 August 2025

### CITATION

Peng N, Mao L-F, Su J-Y, Liu S-P, Ou J-J, Chen S-C, Su Z, Li W-F, Yang F-Q, Zhou Y-H, Li L and Zhong J-H (2025) Correction: The efficacy and safety of tislelizumab with or without tyrosine kinase inhibitor as adjuvant therapy in hepatocellular carcinoma with high-risk of recurrence after curative resection. *Front. Immunol.* 16:1669840. doi: 10.3389/fimmu.2025.1669840

## COPYRIGHT

© 2025 Peng, Mao, Su, Liu, Ou, Chen, Su, Li, Yang, Zhou, Li and Zhong. This is an openaccess article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

# Correction: The efficacy and safety of tislelizumab with or without tyrosine kinase inhibitor as adjuvant therapy in hepatocellular carcinoma with high-risk of recurrence after curative resection

Ning Peng<sup>1†</sup>, Lin-Feng Mao<sup>1†</sup>, Jia-Yong Su<sup>2†</sup>, Shao-Ping Liu<sup>3†</sup>, Jun-Jie Ou<sup>4</sup>, Shu-Chang Chen<sup>4</sup>, Ze Su<sup>5</sup>, Wen-Feng Li<sup>6</sup>, Fu-Quan Yang<sup>6</sup>, Yong-Heng Zhou<sup>1</sup>, Le Li<sup>2</sup> and Jian-Hong Zhong <sup>6</sup> on behalf of the GUIDANCE investigators

<sup>1</sup>Hepatobiliary Surgery Department, The First Affiliated Hospital of Guangxi Medical University, Nanning, China, <sup>2</sup>Hepatobiliary Surgery Department, Guangxi Medical University Cancer Hospital, Nanning, China, <sup>3</sup>Hepatobiliary Surgery Department, Guigang City People's Hospital, Guigang, China, <sup>4</sup>General Surgery Department, The People's Hospital of Wuzhou, Wuzhou, China, <sup>5</sup>Hepatobiliary Pancreatic Surgery Department, The First People's Hospital of Nanning, Nanning, China, <sup>6</sup>Hepatobiliary and Pancreatic Surgery Department, The First People's Hospital of Yulin, Yulin, China

hepatocellular carcinoma, high-risk of recurrence, tislelizumab, recurrence-free survival, adjuvant therapy

## A Correction on

The efficacy and safety of tislelizumab with or without tyrosine kinase inhibitor as adjuvant therapy in hepatocellular carcinoma with high-risk of recurrence after curative resection

By Peng N, Mao L-F, Su J-Y, Liu S-P, Ou J-J, Chen S-C, Su Z, Li W-F, Yang F-Q, Zhou Y-H, Li L and Zhong J-H (2025) *Front. Immunol.* 16:1593153. doi: 10.3389/fimmu.2025.1593153

In the published article, there was an error in **Supplementary Tables 1** and **2**. Several units and the order in which the baseline variables appear are written incorrectly. The supplementary material has been updated in the original article.

In the published article, there was also several errors in the text. In the **Abstract**, the hazard ratio of "1.46" was erroneous due to a typographical mistake. The accurate hazard ratio value is "1.046".

A correction has been made to **Abstract**, *Results*, paragraph 1. This sentence previously stated:

"For both groups, the median recurrence-free survival (hazard ratio 1.46, 95%CI 0.58-1.90) and median overall survival (hazard ratio 1.06, 95%CI 0.42-2.67) were not reached, with no significant difference between the two groups."

Peng et al. 10.3389/fimmu.2025.1669840

The corrected sentence appears below:

"For both groups, the median recurrence-free survival (hazard ratio 1.046, 95%CI 0.58-1.90) and median overall survival (hazard ratio 1.06, 95%CI 0.42-2.67) were not reached, with no significant difference between the two groups."

In the *Results*, the hazard ratio of "1.46" was erroneous due to a typographical mistake. The accurate hazard ratio value is "1.046".

A correction has been made to **Results**, *Comparison of RFS and OS between tislelizumab with and without TKIs group*, paragraph 6. This sentence previously stated:

"The median RFS between the tislelizumab group and the tislelizumab plus TKIs group was not reached, with no significant difference (HR 1.46, 95%CI 0.58–1.90, Figure 3A)."

The corrected sentence appears below:

"The median RFS between the tislelizumab group and the tislelizumab plus TKIs group was not reached, with no significant difference (HR 1.046, 95%CI 0.58–1.90, Figure 3A)."

The original article has been updated.

# Publisher's note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.