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Corrigendum: First-in-human phase 1 dose-escalation results with livmoniplimab, an antibody targeting the GARP: TGF-ß1 complex, as monotherapy and in combination with the anti–PD-1 antibody budigalimab in patients with advanced solid tumors

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A Corrigendum on

First-in-human phase 1 dose-escalation results with livmoniplimab, an antibody targeting the GARP: TGF-ß1 complex, as monotherapy and in combination with the anti–PD-1 antibody budigalimab in patients with advanced solid tumors

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In the published article, there were errors in Figure 4 as published. The graph included incorrect labeling of livmoniplimab doses for a few patients, including for the patient with deepest response (corrected from livmoniplimab 100mg to livmoniplimab 1500mg) in Figure 4B. The corrected Figure 4 and its caption appear below.

The authors apologize for this error and state that this does not change the scientific conclusions of the article in any way. The original article has been updated.

Publisher's note

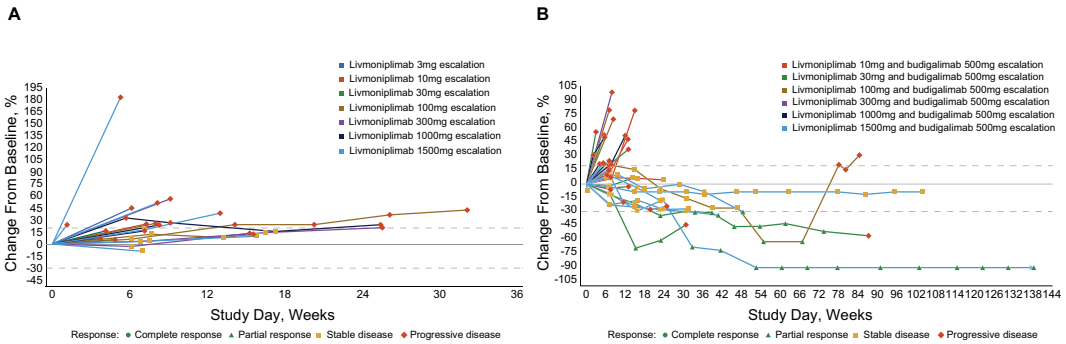

FIGURE 4
Percentage change in target lesion sum diameter measurements from baseline over time per investigator assessment in response-evaluable set (efficacy-evaluable patients defined as patients who have received at least 1 dose of study drug and have either had at least 1 postdose tumor assessment or discontinued treatment due to AE, progressive disease, or death); per RECIST v1.1 and iRECIST. **(A)** Livmoniplimab monotherapy (Q2W) cohorts (N=22). **(B)** Livmoniplimab (Q2W) and budigalimab combination therapy cohorts (N=34). → Denotes patients still on treatment. One patient did not have on-study tumor measurement data due to early death. AE, adverse event; iRECIST, modified RECIST v1.1 criteria for immune-based therapeutics; Q2W, once every 2 weeks; RECIST, Response Evaluation Criteria in Solid Tumors.