The Journal of Prevention of Alzheimer's Disease 13 (2026) 100668

Contents lists available at ScienceDirect

The Journal of Prevention of Alzheimer's Disease

journal homepage: www.elsevier.com/locate/tjpad

Corrigendum

Corrigendum to "Real-world long-term continuation of lecanemab therapy and the clinical utility of phosphorylated tau 181" [The Journal of Prevention of Alzheimer's Disease (2026) 100664]

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The authors regret that the patient number values in Figs. 2A and 2B (including their legends), and the values in Supplementary Tables 2 and 3 were incorrect and have been corrected to the correct values. The p-values on page 3 of the text that relate to Supplementary Tables 2 and 3 have been correctly revised, and the following sentence "Although the differences did not reach statistical significance, women had a more than 2-fold higher discontinuation rate than men and non-carriers, respectively (Supplementary Table 3) " has been deleted.

Note: This represents only the relevant sentences from the entire legend or text. Underlined text indicates changes.

Figure 2A legend (corrected):

The analyses include 63 individuals who continued treatment beyond 18 months and who discontinued treatment before completing 18 months.

Figure 2B legend (corrected):

The analyses include 64 individuals who continued treatment beyond 18 months and who discontinued treatment before completing 18 months.

The *p*-values on page 3

Comparison of baseline demographics between the treatment-persistent and discontinued groups revealed that participants with ≥2 microbleeds were significantly more likely to discontinue for all reasons than those with 0-1 microbleeds ($p = 0.010$, Supplementary Table 2). Additionally, the proportion of participants with IADL impairment at baseline tended to be higher in the discontinued group than in the persistent group, although this difference did not reach statistical significance ($p = 0.068$). Moreover, individuals in the high ptau group and those with ≥2 microbleeds were significantly more likely to experience ARIA-related discontinuation than those in the low ptau group and those with 0-1 microbleeds ($p = 0.024$ and $p = 0.012$, respectively, Fig 2A, 2B, Supplementary Table 3).

The authors would like to apologise for any inconvenience caused.

DOI of original article: https://doi.org/10.1016/j.tjpad.2026.100664.

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https://doi.org/10.1016/j.tjpad.2026.100668

Available online 15 September 2026

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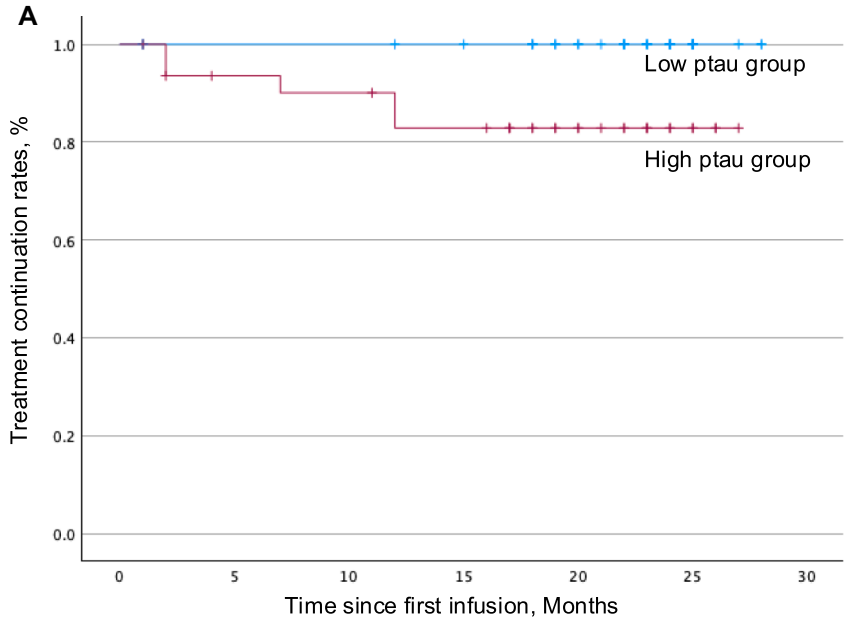
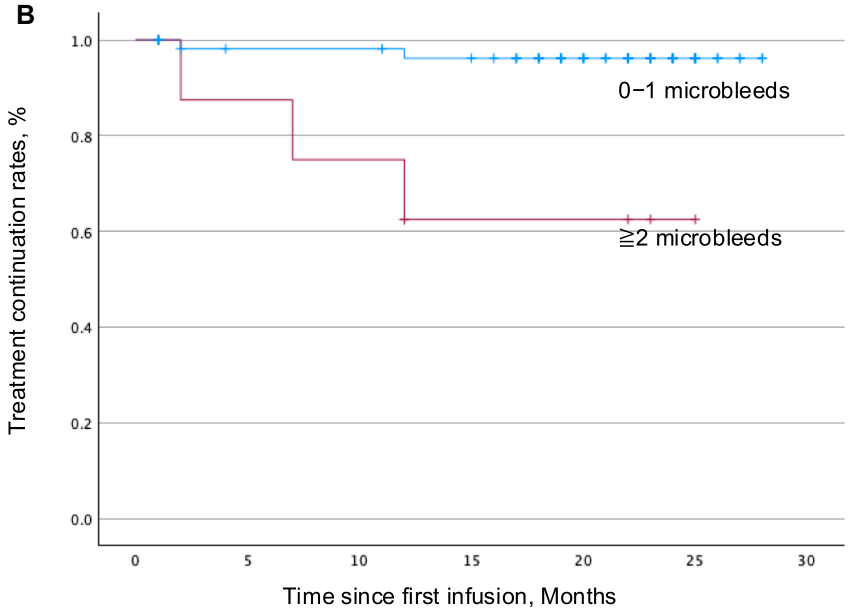


No. of patients	BL	6-mo	12-mo	18-mo	24-mo
Low ptau group	32	30	30	28	13
High ptau group	31	27	25	22	7



No. of patients	BL	6-mo	12-mo	18-mo	24-mo
0−1 microbleeds	56	51	50	47	19
≧2 microbleeds	8	7	6	3	1

The authors would like to apologise for any inconvenience caused.

Supplementary materials

Supplementary material associated with this article can be found, in the online version, at doi:10.1016/j.tjpad.2026.100668.