

Correction

Correction: Circulating microRNA signature as liquid-biopsy to monitor lung cancer in low-dose computed tomography screening**Stefano Sestini^{1,*}, Mattia Boeri^{2,*}, Alfonso Marchiano³, Giuseppe Pelosi^{4,5}, Carlotta Galeone⁶, Carla Verri², Paola Suatoni¹, Nicola Sverzellati⁷, Carlo La Vecchia^{8,*}, Gabriella Sozzi^{2,*}, Ugo Pastorino^{1,*}**¹Unit of Thoracic Surgery, Fondazione IRCCS Istituto Nazionale Tumori, Milan, Italy²Unit of Tumor Genomics, Department of Experimental Oncology, Fondazione IRCCS Istituto Nazionale Tumori, Milan, Italy³Unit of Radiology, Fondazione IRCCS Istituto Nazionale Tumori, Milan, Italy⁴Department of Pathology and Laboratory Medicine, Fondazione IRCCS Istituto Nazionale Tumori, Milan, Italy⁵Department of Clinical and Biomedical Sciences Luigi Sacco, University of Milan, Milan, Italy⁶Department of Statistics and Quantitative Methods, Division of Biostatistics, Epidemiology and Public Health, Laboratory of Healthcare Research and Pharmacoepidemiology, University of Milano-Bicocca, Milan, Italy⁷Department of Clinical Sciences, Section of Radiology, University of Parma, Milan, Italy⁸Department of Clinical Sciences and Community Health, University of Milan, Milan, Italy

*These authors have contributed equally to this work

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A significant reduction in lung cancer mortality was reported among the subjects enrolled in the LDCT arm of the National Lung Screening Trial (NLST) when compared to the chest X-ray arm, along with a false discovery rate of 96.4% and an overdiagnosis global rate of 18.5%, reaching 78.9% for indolent cancers in the LDCT arm.

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