

CORRECTION

[View Article Online](#)
[View Journal](#) | [View Issue](#)



Cite this: *Nanoscale Horiz.*, 2023, **8**, 1288

Correction: Plasma extracellular vesicle phenotyping for the differentiation of early-stage lung cancer and benign lung diseases

Liwen Yuan,^a Yanpin Chen,^b Longfeng Ke,^c Quan Zhou,^d Jiayou Chen,^e Min Fan,^a Alain Wuethrich,^{*d} Matt Trau^{*df} and Jing Wang^{*a}

DOI: 10.1039/d3nh90028b

rsc.li/nanoscale-horizons

Correction for 'Plasma extracellular vesicle phenotyping for the differentiation of early-stage lung cancer and benign lung diseases' by Liwen Yuan *et al.*, *Nanoscale Horiz.*, 2023, **8**, 746–758, <https://doi.org/10.1039/d2nh00570k>.

The authors regret that an incorrect version of Fig. 6E and G was included in the originally published article. The correct version of Fig. 6 is shown below.

^a Key Laboratory of OptoElectronic Science and Technology for Medicine of Ministry of Education, Fujian Provincial Key Laboratory of Photonics Technology, Fujian Normal University, Fuzhou 350117, China. E-mail: jing.wang@fjnu.edu.cn

^b Department of Pathology, Clinical Oncology School of Fujian Medical University, and Fujian Cancer Hospital, Fuzhou, Fujian 350014, China

^c Laboratory of Molecular Pathology, Clinical Oncology School of Fujian Medical University and Fujian Cancer Hospital, Fuzhou, Fujian 350014, China

^d Centre for Personalized Nanomedicine, Australian Institute for Bioengineering and Nanotechnology (AIBN), The University of Queensland, Brisbane, QLD 4072, Australia. E-mail: a.wuethrich@uq.edu.au, m.trau@uq.edu.au

^e Department of Radiology, Clinical Oncology School of Fujian Medical University and Fujian Cancer Hospital, Fuzhou, Fujian 350014, China

^f School of Chemistry and Molecular Biosciences, The University of Queensland, Brisbane, QLD 4072, Australia



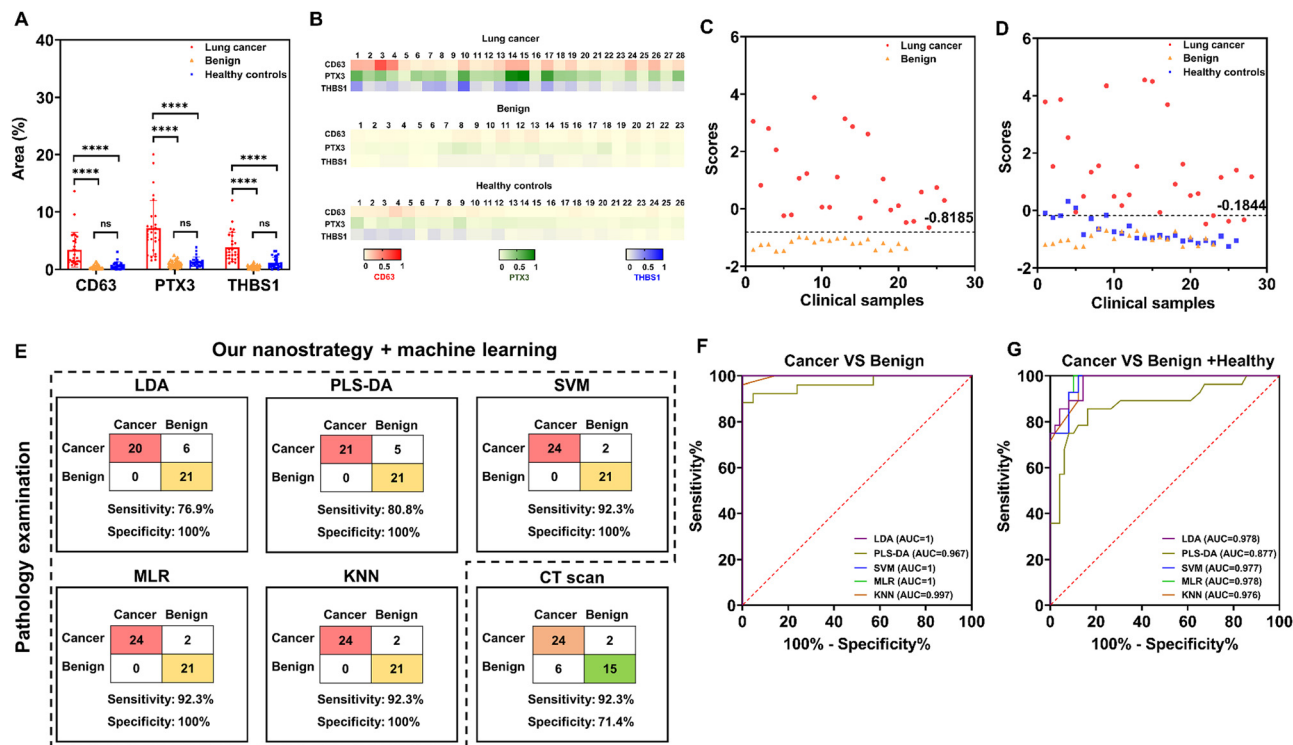


Fig. 6 Clinical sample analysis. (A) SERS measurements of target marker levels on the surface of plasma EVs among clinical groups. (B) Heat map results representing the EV SERS signature of individuals. (C) LDA discriminant scores obtained from a discriminant model for classifying 26 early-stage lung cancer patients and 21 patients with benign lung diseases. (D) LDA discriminant scores obtained from a discriminant model for differentiating 28 early-stage lung cancer patients and controls consisting of 23 patients with benign lung diseases and 26 healthy controls. (E) The clinical detection sensitivity and specificity of our nanostrategy in combination with machine learning algorithms (LDA, PLS-DA, SVM, MLR, or KNN) and a CT scan differentiating 26 early-stage lung cancer patients and 21 patients with benign lung diseases. ROC curves reflected the diagnostic ability of our nanostrategy in combination with different machine learning algorithms for the differentiation of (F) early-stage lung cancer and benign lung diseases, and (G) early-stage lung cancer and controls (benign lung diseases and healthy controls). Data in (A) are represented as mean \pm standard deviation, where error bars represent the standard deviation of biological replicates. **** $P < 0.0001$; ns, not significant.

The Royal Society of Chemistry apologises for these errors and any consequent inconvenience to authors and readers.

