

in each chapter, mention of certain nuclear neuroimaging modalities is neglected a few times, and certain important references or review articles on SPECT/CT and PET/CT are omitted.

Summing up, there can be a prospective study in which PET/CT is performed immediately after clinical evaluation and then the incremental value of adding MR imaging is determined. Taking the value of CT for granted and trying to prove the incremental value of PET/CT might not always be justified when PET/CT is a single technique and PET/MR imaging is a hybrid technique awaiting validation of its clinical efficacy over time. What we call comparative effectiveness research might replace the present concept in which imaging studies are clinically validated one at a time; that is to say, first CT, then MR imaging, and then PET. After the full employment of hybrid imaging technologies, the present

custom of our medical community to try to prove incremental value will become obsolete.

Dong-Soo Lee

*Seoul National University
28 Yungundong Chonnogu
Seoul 110-744, Korea
E-mail: dsl@snu.ac.kr*

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Erratum

There were errors in the reprint permission statements for Figures 2C and 2D in “Acoustic and Photoacoustic Molecular Imaging of Cancer,” by Wilson et al. (*J Nucl Med.* 2013;54:1851–1854). Figure 2C was reproduced with the permission of the American Chemical Society from Homan KA, Souza M, Truby R, et al. Silver nanoplate contrast agents for in vivo molecular photoacoustic imaging. *ACS Nano.* 2012;6:641–650. Figure 2D was reproduced with the permission of the Radiological Society of North America from Herzog E, Taruttis A, Beziere N, Lutich AA, Razansky D, Ntziachristos V. Optical imaging of cancer heterogeneity with multispectral photoacoustic tomography. *Radiology.* 2012;263:461–468. We regret the errors.