

# Intranasal Delivery of Immunotherapeutic Nanoformulations for Treatment of Glioma Through in situ Activation of Immune Response [Corrigendum]

Yin P, Li H, Ke C, et al. *Int J Nanomedicine*. 2020;15:1499—1515.

poly(I:C)+TMZ and day 28 Au@PP/poly(I:C)+TMZ in the HE 200× row were duplicated. The correct Figure 5 is shown below.

The authors have advised Figure 5A on page 1511 is incorrect. Due to an error at the time of figure assembly day 21 Au@PP/

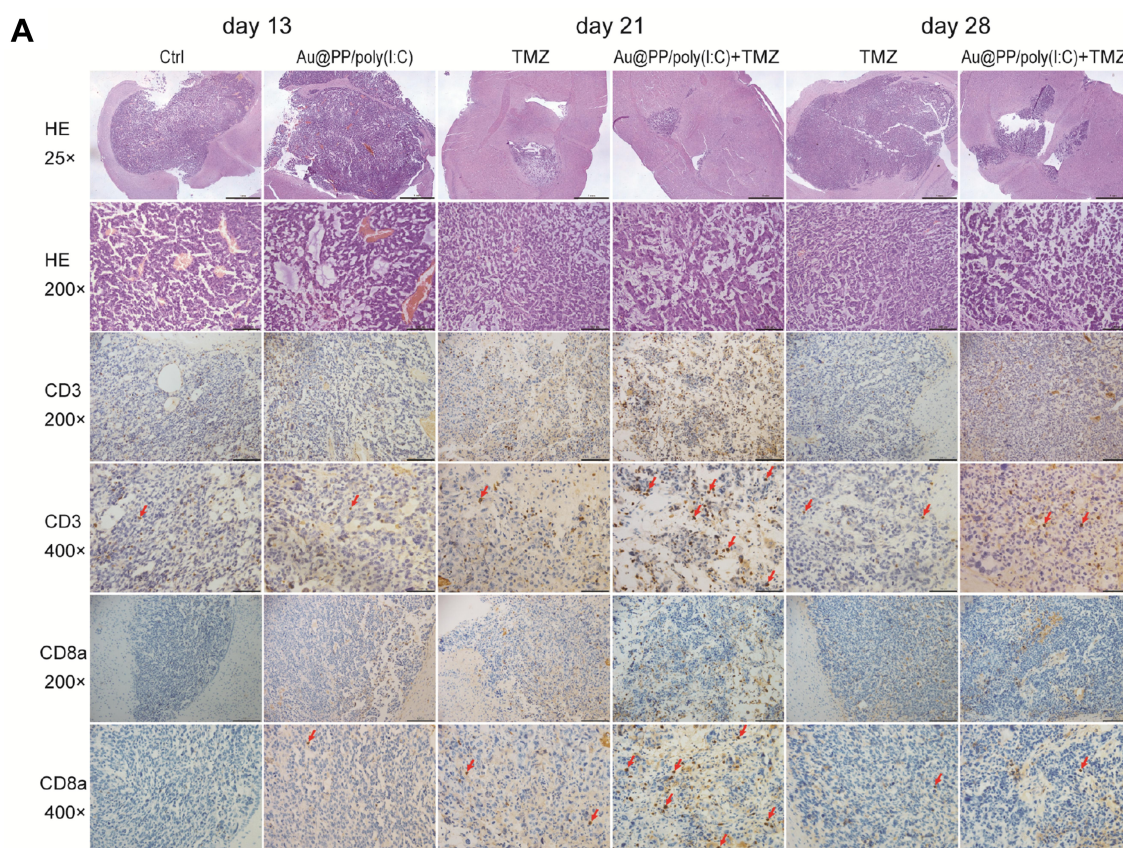
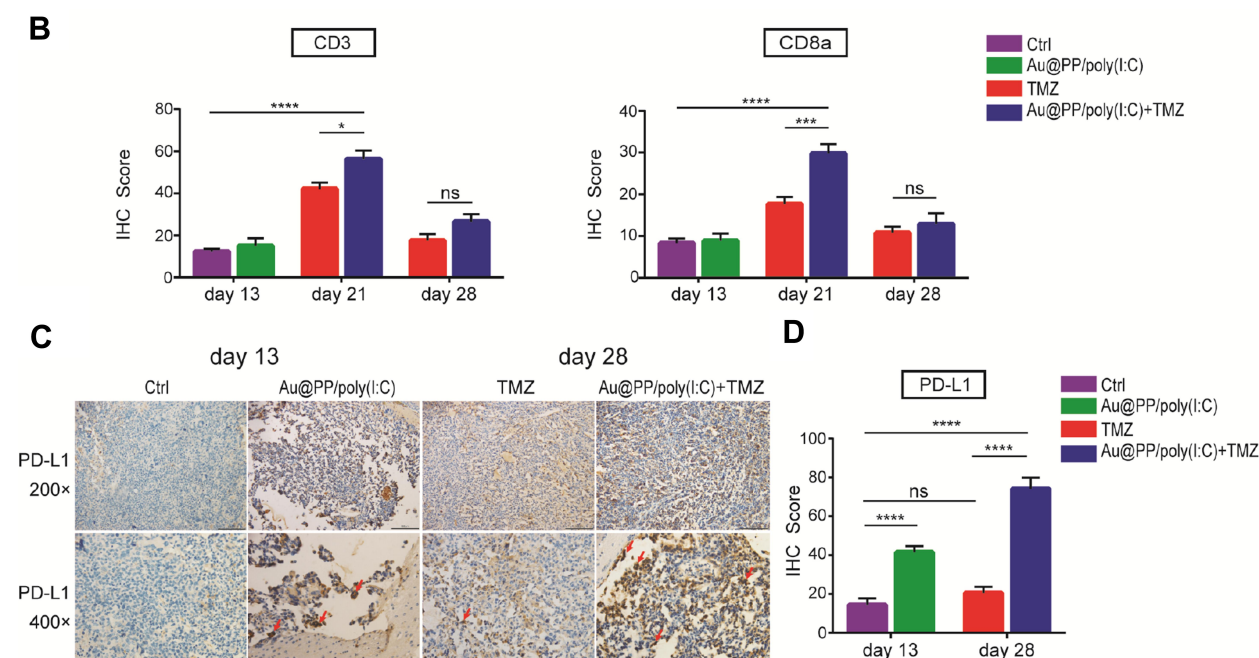


Figure 5 Continued.



**Figure 5** Intranasal Au@PP/poly(l:C) combined with TMZ improves T-cell infiltration and PD-L1 expression in intracranial glioma. **(A, C)** Representative images of H&E and immunohistochemical staining for CD3, CD8a and PD-L1 in GL261 glioma. The tumor tissue was collected on day 13, day 21 and day 28 after cell inoculating. The images are magnified 25×, 200× and 400× (the scale bars within the photomicrographs are 1000, 100 and 50 microns in length). The red arrows show the positive cells. **(B, D)** The IHC membrane staining intensity of each cell in a fixed field is determined as 0, 1+, 2+, or 3+, and the IHC score was assigned using the following formula:  $[1 \times (\% \text{ cells } 1+) + 2 \times (\% \text{ cells } 2+) + 3 \times (\% \text{ cells } 3+)]$ . We took 3 pictures with 200× magnification per cut section of the brain tumors and counterstained cells from each picture and calculated an average from the three. The results at least include 6 mice per each group. Mean±SEM, n=6–9 in each group. ns: no significant difference, \*p<0.05, \*\*p<0.001 and \*\*\*p<0.0001.

The authors apologize for this error and advise it does not affect the results of the paper.