

MiR-144 Suppresses Cell Proliferation, Migration, and Invasion in Hepatocellular Carcinoma by Targeting SMAD4 [Retraction]

Yu M, Lin Y, Zhou Y, et al. *Onco Targets Ther.* 2016;9:4705—4714.

At the request of the authors, the Editor and Publisher of *OncoTargets and Therapy* wish to retract the published article. We were notified by the authors of potential issues relating to the reliability of the data in the published article. Specifically:

- Figure 3A panel MHCC-97H 0 h NC appears to be duplicated with panel HepG2 0 h miR-144.
- Table 1 describes the forward and reverse primers used for the miRNA has-MiR-144. The forward and reverse primers are 50% identical and completely identical to the forward and reverse primers of the miRNA has-miR-502-3p, respectively, described in Table 1 of Jin et al ‘MiR-502-3P suppresses cell proliferation, migration, and invasion in hepatocellular carcinoma by targeting SET’ (<https://doi.org/10.2147/OTT.S87183>).
- Figure 1B shows the relative expression of miR-144 (normalized by U6) in which the Y-axis values are negative, yet no logarithmic calculation was described.
- Figure 5E shows the relative SMAD4 level (tumor/para-tumor $\Delta\Delta Ct$) in which the Y-axis values are also negative, yet no logarithmic calculation was described.
- Table 2 shows an error in the number of high and low expression miR-144 patients. The high expression

group was 15, while the low expression group was 85. In the subgroup of liver cirrhosis, the high expression group was given as 16 and the low expression group was 84.

The authors explained that some of the images had been mislabelled which led to the duplication of images in Figure 3A. The authors explained the primers were designed using the poly A tail-length method and included universal sequences requiring specific changes according to the miRNA. This led to the similarities of the primers described in Table 1 to those described in Jin et al. For Figure 1B, the Y-axis was calculated by log2 function, and for Figure 5e, the log2 ratio of tumor vs para-tumor was depicted. There was a mistake in the numbers provided for the subgroup of liver cirrhosis shown in Table 2. In addition, the authors could not provide any raw data for the western blots shown in the article.

Given the errors and lack of available raw data the authors requested for the article to be retracted and the editor has agreed with this decision. The authors wish to apologise for this error.

Our decision-making was informed by our policy on publishing ethics and integrity and the COPE guidelines on retraction.

The retracted article will remain online to maintain the scholarly record, but it will be digitally watermarked on each page as “Retracted”.

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