
Gottfried Schmalz, DDS, PhD,*† Matthias Widbiller, DDS, PhD,* and Kerstin M. Galler, DDS, PhD*

From the *Department of Conservative Dentistry and Periodontology, University Hospital Regensburg, Regensburg, Germany; and † Department of Periodontology, University of Bern, Bern, Switzerland

The authors regret that several corrections were not made before final publication. They are marked in bold:

The last sentence under the heading “Immature Teeth,” should read: “Clinical situations that may necessitate endodontic intervention in immature teeth are pulp necrosis, with and without AP, pulp exposure without loss of vitality, and irreversible pulpitis/coronal pulpitis.”

The fourth sentence under the heading “Pulp Necrosis with and without AP” should read: “The pulp tissue also has a nutritive function because arterioles and subodontoblastic capillaries supply the odontoblasts and other cells with oxygen and metabolites.”

The last sentence of the first paragraph under “Conventional/Classic Procedures” should read: “Recently, it was demonstrated by finite element analysis that the apposition of dentin to increase root length and thickness significantly reduces stress."  

Figure 1’s legend should read: “A histological image of the pulp-dentin interface. The dental pulp serves a formative, defensive, sensory, and nutritive function. Kluver-Barrera staining, scale bar = 50 μm.

The first sentence of the second paragraph under “Conventional/Classic Procedures” on page S164 should read: “In a recent systematic review and metaanalysis including mature and immature teeth, partial pulpotomy in treating permanent posterior teeth with carious vital pulp exposure showed a clinical success rate of 98%, 96%, and 92% after 6 months, 1 year, and 2 years, respectively.”

The first sentence under “Conclusions” on page S166 should read: “For an amputated pulp situation in immature vital teeth, the biological condition for coronal pulp regeneration is comparatively good, and animal studies in mice, rats, and ferrets have shown promising results.”

The last sentence of the fourth paragraph under “Regenerative Procedures” should read: “However, further prospective clinical studies with a larger patient collective are necessary.”

The sixth sentence under the first “Conclusion” section on page S168 should read: “However, the first clinical trials show that cell transplantation is a very demanding procedure with respect to cost, safety, availability of suitable stem cells, extracorporal cell expansion, and transplantation."  

The third sentence under the second “Conclusions” section on page S168 should read: “Classic/conventional methods (root canal treatment) applied after pulp necrosis are successful; however, they are less effective as after pulpectomy.”

The first sentence of the third paragraph under “Conclusive Remarks” on page S170 should read: “Although the feasibility of cell transplantation has been shown in 2 studies, this approach is associated with numerous technical, economical, and ethical problems."  

In addition, a new reference should be added to the References list:


All subsequent references in the text and reference list should have 1 added to their current number.

The authors apologize for the errors.