



Correction

Correction: Anastopoulos et al. Multi-Drug Featurization and Deep Learning Improve Patient-Specific Predictions of Adverse Events. *Int. J. Environ. Res. Public Health* 2021, 18, 2600

Ioannis N. Anastopoulos ^{1,2}, Chloe K. Herczeg ², Kasey N. Davis ² and Atray C. Dixit ^{2,*} 

¹ Biomolecular Engineering, University of California, Santa Cruz, CA 95064, USA; ianastop@ucsc.edu

² Coral Genomics, Inc., 953 Indiana St., San Francisco, CA 94107, USA; chloe@coralgenomics.com (C.K.H.); kasey@coralgenomics.com (K.N.D.)

* Correspondence: atray@coralgenomics.com

In the original publication [1], there was a mistake in the colors associated with Figure 4A. The colors of the boxplots were incorrect. The correct legend appears below.

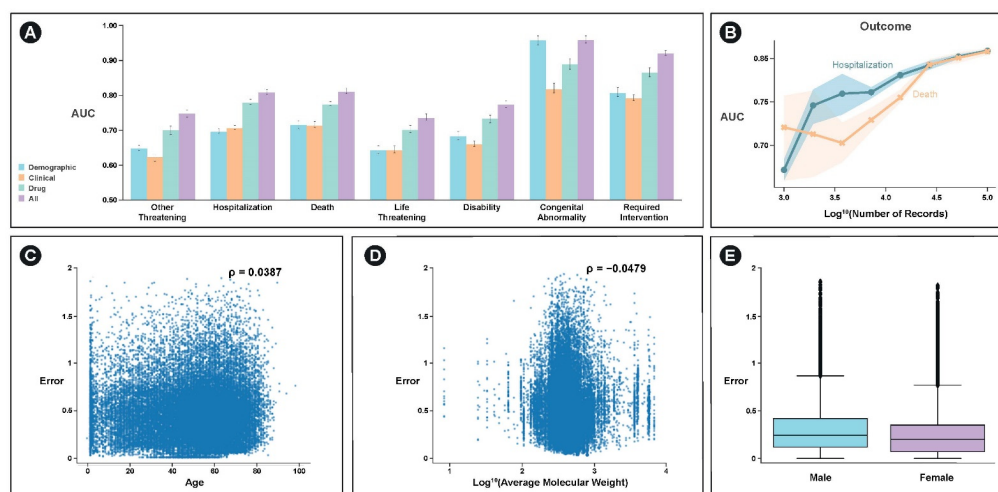


Figure 4. Performance comparisons on the FAERS dataset. **(A)** Predictive utility of various features and model architectures for predicting adverse events in the FAERS dataset. X-axis labels correspond to adverse event categories for a particular case. Y-axis is the AUC at predicting each of the labels. Colors correspond to various feature subsets tested. Error bars correspond to 95% confidence interval derived from bootstrapping on 5-fold cross-validation (each fold contains 28,682 records). **(B)** Power analysis demonstrating improvement in performance as a function of the number of patient records examined. Blue corresponds to hospitalization model performance and orange corresponds to performance of model predicting death. X-axis is log₁₀ (number of records) Y-axis is AUC. Shaded error region corresponds to 95% confidence interval derived from bootstrapping on 5-fold cross-validation in a subsampled dataset corresponding to the X-axis location. **(C)** Plot demonstrating relationship between model error across all outcomes and age, **(D)** average molecular weight of drugs patient is taking, and **(E)** patient sex.

The authors apologize for any inconvenience caused and state that the scientific conclusions are unaffected. The original publication has also been updated.

Reference

1. Anastopoulos, I.N.; Herczeg, C.K.; Davis, K.N.; Dixit, A.C. Multi-Drug Featurization and Deep Learning Improve Patient-Specific Predictions of Adverse Events. *Int. J. Environ. Res. Public Health* **2021**, *18*, 2600. [\[CrossRef\]](#) [\[PubMed\]](#)



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