

CORRECTION

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Correction to: Consistent effects of non-invasive vagus nerve stimulation (nVNS) for the acute treatment of migraine: additional findings from the randomized, sham-controlled, double-blind PRESTO trial

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Correction

Following publication of the original article [1], the authors notified us that the citation within the Table 1 legend was not presented as initially requested. Also, the word “efficacy” was missed from the background section.

The original publication has been corrected. The incorrect and correct table citations as well as background information are presented below.

- Originally published citation:

© 2018 Tassorelli C, Grazzi L, de Tommaso M, Pierangeli G, Martelletti P, Rainero I, Dorlas S, Geppetti P, Ambrosini A, Sarchielli P, Liebler E, Barbanti P, PRESTO Study Group (2018) Non-invasive vagus nerve stimulation as acute therapy for migraine: the randomized PRESTO study [published online June 15, 2018]. *Neurology*: <https://doi.org/10.1212/WNL.0000000000005857>. www.neurology.org. Adapted with permission

Abbreviations: *DB* Double-blind, *NA* Not applicable, *nVNS* Non-invasive vagus nerve stimulation, *SD* Standard deviation

^aNo. of days the patient typically takes acute migraine medication per month. ^bPatients with no reported baseline severity were excluded from this analysis

- Corrected citation:

© 2018 Tassorelli C, Grazzi L, de Tommaso M, et al. Noninvasive vagus nerve stimulation as acute therapy for migraine: the randomized PRESTO study. *Neurology*. 2018;91(4):e364-e373. Adapted with permission

- Original Background paragraph:

Opioids should be discouraged for the acute treatment of migraine due to significant safety concerns and lack of documented but remain frequently used in the emergency department setting, which significantly increases health-care costs

- Corrected Background paragraph:

Opioids should be discouraged for the acute treatment of migraine due to significant safety concerns and lack of documented **efficacy** but remain frequently used in the emergency department setting, which significantly increases healthcare costs

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