

We are not as convinced as Dr. Meador, however, that the real enemy is bias and not COI. Too much emphasis on the consequence (bias) might detract from the needed motivation and individual commitment to disinterestedness as an important norm for maintaining objectivity in the guideline development process even if COI self-awareness is at times difficult. It also presupposes that the current mechanisms in place to control biasing effects (e.g., explicit procedures, peer review, public access of data) are capable of maintaining this objectivity even in the face of progressive commercialization. We are not so sanguine.

In addition to better understanding the biasing effects of different types of conflicts, a continued commitment to the ideals of impartiality will also optimize the chances of properly exercising judgment when grading evidence and formulating recommendations.

*R.G. Holloway, C.J. Mooney, Rochester, NY;
T.S.D. Getchius, W.S. Edlund, Rochester, MN;
J.O. Miyasaki, Toronto, ON, Canada*

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CORRECTION

Incidental MRI anomalies suggestive of multiple sclerosis: The radiologically isolated syndrome

In the article “Incidental MRI anomalies suggestive of multiple sclerosis: The radiologically isolated syndrome” by D.T. Okuda et al. (*Neurology*® 2009;72:800–805), there is an error in table 2. The values in the last line, Exposure to disease modifying therapy, should read “Yes: 7 (16%); no: 37 (84%).” The publisher regrets the error.

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CORRECTION

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