

**To:** Michael D. Roy  
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**From:** David A. Brent, MD  
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**Re:** Brent, David, et al. "Association of FKBP5 polymorphisms with suicidal events in the Treatment of Resistant Depression in Adolescents (TORDIA) study." American Journal of Psychiatry 167.2 (2009): 190-197.

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The Suicidal Ideation Questionnaire- Jr. (Reynolds WM, Mazza JJ, 1999) consists of 15 items each scored on a seven-point scale from 0 ("I never had this thought") to 6 (Almost every day"). A total score ranging from 0 to 90 is calculated as the sum of each item. "Clinically significant" suicidal ideation is defined as a total score greater or equal to 31.

In our database, we incorrectly coded each item on a 1 to 7 scale, which inflated the total score by 15 points. Therefore, the means and the cut-point for "clinically significant" suicidal ideation we reported are incorrect. Corrections are below:

1) Page 194 - Participant Characteristics

*Reported:* "A high proportion of participants entered the study with clinically significant suicidal ideation (59.1% had a score  $\geq 31$  on the Suicidal Ideation Questionnaire–JR)"

*Corrected:* "A high proportion of participants entered the study with clinically significant suicidal ideation (38.4% had a score  $\geq 31$  on the Suicidal Ideation Questionnaire–JR)"

2) Page 194 - Characteristics of those with a suicidal event

*Reported:* "Suicidal Ideation Questionnaire–JR score, mean=51.5 [SD=22.1] compared with mean=40.3 [SD=20.5]"

*Corrected:* "Suicidal Ideation Questionnaire–JR score, mean=36.5 [SD=22.1] compared with mean=25.3 [SD=20.5]"