

When reporting a homoallelic result, particularly in infantile/juvenile cases, a clear mention should be made of the possibility of having missed a large expansion, if complementary methods have not been used or have been uninformative; a request for additional familial samples may also be appropriate; this is particularly important for SCA2 and SCA7.

The report of a homoallelic result should also reflect the population frequency of that allele and that particular genotype, wherever this information is available.

A comment on mitotic instability of expanded and intermediate alleles is appropriate for those alleles at loci known to undergo further large expansion on occasion (as is the case of SCA7); it is also appropriate to mention the increased risk relating to the gender of the transmitting parent.

There must be a recommendation of a referral for genetic counselling in the case of a confirmation of a diagnosis, or in cases in which no mutation is detected in a patient with symptoms and a family history of the disease.

The implications of the confirmation of a diagnosis for relatives of the proband and the availability of testing of other family members and PND should be clearly stated.

If a SCA8 expansion is detected, the report needs to discuss the uncertainty of its significance and the possibility that other mutations may be segregating in the family; a referral for genetic counselling must also be recommended.

In cases in which no mutation is detected in a patient with symptoms, the report should recommend a re-evaluation of the clinical diagnosis and further testing (eg, other SCAs, recessive ataxias, FXTAS, HD), where appropriate.

The report of a 'non-carrier' result in PST should reflect the degree of certainty of the genetic diagnosis in the family; if the correct diagnosis in a proband could not be confirmed or is uncertain, this must be clearly stated in the report.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

Corrigendum to: EMQN Best Practice Guidelines for molecular genetic testing of SCAs

Prepared on behalf of the European Molecular Quality Genetics Network (EMQN), Jorge Sequeiros, Joanne Martindale and Sara Seneca, following an EMQN Best Practice Meeting, 17–19 October 2007, Porto, Portugal, as a part of the EU Network of Excellence EuroGentest, and subsequent electronic group discussion in 2008. Endorsed by the EMQN board in 2009

European Journal of Human Genetics (2010) **18**, 1176–1177; doi:10.1038/ejhg.2010.152

Correction to: *European Journal of Human Genetics* advance online publication, 24 February 2010; doi:10.1038/ejhg.2010.8

Since the publication of the above paper the authors realized that the other co-authors who took part to the EMQN Best Practice Meeting and electronic discussion were not indexed as such. Their name and affiliations are listed below.

Giunti Paola: Department of Molecular Neuroscience, Institute of Neurology, University College of London, London, UK

Kämäräinen Outi: European Molecular Genetics Quality Network, St Mary's Hospital, Hathersage Road, Manchester, UK

Volpini Victor: Center for Molecular Genetic Diagnosis of Hereditary Diseases, Biomedical Research, Institute of Bellvitge, IDIBELL, Barcelona, Spain

Weirich Helga: Department of Medical Genetics, Medical University of Innsbruck, Schöpfgasse 41, Innsbruck, Austria

Christodoulou Kyproula: The Cyprus Institute of Neurology and Genetics, Nicosia, Cyprus

Bazak Nazli: Bogazici University, Department of Molecular Biology and Genetics, Neurodegeneration Research Laboratory, Istanbul, Turkey

Sinke Richard: UMC Utrecht, Department of Medical Genetics, Utrecht, The Netherlands

Sulek-Piatkowska Anna: Department of Genetics, Institute of Psychiatry and Neurology, Sobieskiego 9, Warsaw, Poland

Garcia-Planells Javier: Instituto Valenciano de Genética (IVGEN), Valencia, Spain

Davis Mark: Neurogenetics Unit, Department of Anatomical Pathology, Royal Perth Hospital, Perth, Australia

Frontali Marina: INMM-CNR, Rome, Italy

Hämäläinen Petra: Department of Medical Biochemistry and Genetics, University of Turku, Turku, Finland

Wieczorek Stefan: Ruhr-University, Human Genetics, Bochum, Germany

Zühlke Christine: Institut für Humangenetik, Universität Lübeck, Lübeck, Germany

Saraiva-Pereira Maria-Luiza: Serviço de Genética Médica, Hospital de Clínicas de Porto Alegre, Porto Alegre, Brazil

Warner Jon: Molecular Genetics Service Edinburgh, Western General Hospital, Edinburgh, UK

Leguern Eric: UF de Neurogénétique Fédération de Génétique, Groupe Hospitalier Pitié-Salpêtrière, Paris Cedex 13, France

Thonney Francine: Service de génétique médicale, CHUV, Lausanne, Switzerland

Quintáns Castro Beatriz: Fundación Pública Galega de Medicina Xenómica, Hospital Clínico Universitario, Santiago de Compostela (La Coruna), Spain

Jonasson Jenni: Clinical Genetics, Laboratory Medicine, University Hospital of Umea, Umea, Sweden

Storm Katrien: Center of Medical Genetics, University Hospital of Antwerp, Antwerp, Belgium

Andersson Anna: Department of Clinical Genetics, Lund University Hospital, Lund, Sweden

Ravani Anna: Genetica Medica, Università di Ferrara, Ferrara, Italy

Correia Luís, Silveira Isabel, Alonso Isabel, Martins Carla, Pinto Basto Jorge, Coutinho Paula, Perdigão Andreia: UnIGENe, IBMC, University of Porto, Porto, Portugal

Barton David: National Centre for Medical Genetics, Our Lady's Children Hospital, Dublin, Ireland

Davis Mary: Neurogenetics Unit, National Hospital for Neurology and Neurosurgery, London, UK