Letter to the Editor

Correction to psychotic like experiences as part of a continuum of psychosis: associations with effort-based decision-making and reward responsivity

Changes to results section with corrected Snaith Hamilton Pleasure Scale Scoring

Snaith Hamilton Pleasure Scale
Mean = 24.02
SD = 5.835

Here is the text of the original paragraph looking at Scores on the SNAITH.

3.4. Addressing potential confounds

Higher YPARQ scores were related to both higher depression levels as measured by the CESD-R-10 (r = 0.34, p < .001) and higher anxiety as measured by the MASQ (r = 0.57, p < .001), though not with anhedonia as measured by the SNAITH (r = 0.12, p = .19). The measures of depression, anhedonia, and anxiety did not correlate with either effort allocation (rs < |0.12|) or consummatory (rs < |0.18|) or anticipatory responses (rs < |0.13|) in the gambling task. Nevertheless, to ensure that anxiety and depression were not confounding the results, we conducted partial correlations controlling for depression, anhedonia, and anxiety. When examining YPARQ and effort, our findings remained the same even with the addition of these covariates, suggesting that greater willingness to expend effort was related to higher YPARQ scores (r = 0.21, p < .05) even when controlling for anhedonia, depression and anxiety. Further, higher scores on the YPARQ were still significantly related to average consummatory response to reward (r = 0.21, p < .05) even when controlling for depression, anhedonia and anxiety, though not to average consummatory response to loss (r = 0.14, p < .12).

Contributors
Authors EKM, AJC and DMB designed the study and wrote the protocol. Authors JAE and EKM managed the literature searches and the statistical analysis. JAE wrote the first draft of the manuscript, and authors EKM, AJC and DMB provided critical revision. All authors contributed to and have approved the final manuscript.

Declaration of competing interest
JAE, EKM and AJC have no conflicts to report. DMB is a consultant for Pfizer on studies related to the treatment of negative symptoms in schizophrenia.

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