




teremia—14 years in one case.<sup>26</sup> In another case, an invasive cecal carcinoma was reported 28 months after a negative initial screening colonoscopy.<sup>27</sup>

Colon cancer cases also have been reported in association with infections with enterococci, bacteroides, *Streptococcus agalactiae*, *E coli*, *Klebsiella oxytoca*, *Clostridium septicum*,

*Clostridium perfringens*, *Streptococcus salivarius*, and *Streptococcus viridans*.<sup>28,29</sup>

However, no data currently indicate that *S bovis* bacteremia is a risk factor for the future development of colon cancer. So until further data are available, we suggest continued screening of patients such as ours every 10 years, as for average-risk patients, unless other risk factors emerge. 

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## CORRECTION

### Hereditary hemochromatosis

In the March 2002 issue, the article “Hereditary hemochromatosis: A common, often unrecognized genetic disease” (Cleve Clin J Med 2002; 69:224–237) erroneously stated that no genetic test is available for

the mutation H63D. This mutation can indeed be tested for. The editors regret the error, which was introduced during the editing process, and thank reader Edmond G. Lemire, MD, PhD, for calling it to our attention.