

We agree with the suggestion from Christmann et al that nutritional intake may be considered as a covariate for neurodevelopmental outcome. Randomized trials have demonstrated conflicting effects of early additional parenteral nutrition on head circumference,^{2,3} and other trials are ongoing.⁴ However, we caution that nutritional intake has the potential to be both a confounder and intermediate. For example, the administration or escalation of parenteral or enteral nutrition may be slower in infants with higher illness severity. Marginal structural models may therefore represent an ideal analytical approach when adjusting for nutritional intake.

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CORRECTION

Addition of Open Access, Funding/Support, and Role of Funder/Sponsor Information: In the Original Investigation titled "Child and Adolescent Health From 1990 to 2015: Findings From the Global Burden of Diseases, Injuries, and Risk Factors 2015 Study,"¹ published in the June issue of *JAMA Pediatrics*, CC-BY Open Access, Funding/Support, and Role of Funder/Sponsor paragraphs were added to the Article Information section. The following Open Access paragraph was added: "Open Access: This is an open access article distributed under the terms of the CC-BY License." The following Funding/Support paragraph was added: "The Institute for Health Metrics and Evaluation received funding from the Bill & Melinda Gates Foundation." The following Role of Funder/Sponsor paragraph was added: "The BMGF has no role in the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication." This article was corrected online.

1. Global Burden of Disease Child and Adolescent Health Collaboration. Child and adolescent health from 1990 to 2015: findings from the Global Burden of Diseases, Injuries, and Risk Factors 2015 Study. *JAMA Pediatr*. 2017;171(6):573-592.