

Erratum to: Changes of myocardial gene expression and protein composition in patients with dilated cardiomyopathy after immunoadsorption with subsequent immunoglobulin substitution

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Unfortunately, the original version of this article contains an error. Table 1 contains the wrong information on the number of males in the non-responder group. All parameter values calculated for the non-responder group were correct

and based on 13 non-responders. Additionally, the abbreviation of the statistical test for NYHA subclasses in responders and non-responders was changed to “f” (Fisher’s exact test, two-tailed) to display the test applied correctly. The corrected table is given below and the correct number of male subjects is given in bold.

S. Ameling and G. Bhardwaj contributed equally.

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Table 1 Baseline characteristics of DCM patients

	Responder (<i>n</i> = 20)	Non-responder (<i>n</i> = 13)	Responder vs. non-responder <i>p</i> value
Age (years) ± SD ^a	48 ± 10	53 ± 8	0.145 ^e
Gender (♂/♀)	14/6	9/4	1.000 ^f
LVEF (%) ± SD ^a	33 ± 6	35 ± 7	0.406 ^e
LVIDD (mm) ± SD ^a	67 ± 7	74 ± 7	0.022 ^e
NYHA classification II/III (<i>n</i>)	10/10	7/6	1.000 ^f
NT-pro BNP (pg/ml) ± SD ^a	1035 ± 1372	1047 ± 992	0.428 ^e
Disease duration (months) ± SD ^a	13 ± 13	49 ± 42	0.003 ^e
Body mass index (kg/m ²) ± SD ^a	28 ± 5	27 ± 4	0.645 ^e
Inflammation positive (<i>n</i>) ^b	14	8	0.714 ^f
Fibrosis grade ^c (<i>n</i>) 0/1/2/3	0/12/4/4	0/4/4/5	0.25 ^g
Virus genomes PVB19/PVB19 + HHV6/other ^d (<i>n</i>)	4/1/15	4/0/9	
Medication (<i>n</i> /total)			
β-Blocker	20/20	13/13	
ACE inhibitors and/or	16/20	11/13	
AT1 antagonists	5/20	5/13	
Diuretics	20/20	13/13	
Digitalis	2/20	5/13	

LVEF left ventricular ejection fraction, *LVIDD* left ventricular internal diameter at diastole, *NYHA* New York Heart association, *NT-pro BNP* N-terminal, pro brain natriuretic peptide, *PVB19* parvovirus B19, *ACE* angiotensin converting enzyme, *AT1* angiotensin-II-receptor-subtype-1

^a Mean values with standard deviation (SD) are shown

^b Endomyocardial biopsies were considered to be inflamed if immunohistochemistry revealed focal or diffuse mononuclear infiltrates with >14 leucocytes per mm² (CD3⁺ T-lymphocytes and/or CD68⁺ macrophages) in addition to enhanced expression of HLA class II molecules [31, 38]

^c The amount of cardiac fibrosis in HEMBs was determined and categorized as grade 0 = no, grade 1 = mild, grade 2 = moderate, grade 3 = severe

^d Other virus types: *HHV6* human herpesvirus 6, *EBV* Epstein–Barr virus, Enteroviruses

^e Mann–Whitney test, two-tailed

^f Fisher's exact test, two-tailed

^g Chi squared test