



e-ISSN 2329-0358 © Ann Transplant, 2019; 24: 174 DOI: 10.12659/AOT.916307

Received:2019.03.18Accepted:2019.03.18Published:2019.03.29

Re: Association Between Renal Dysfunction and Major Adverse Cardiac Events After Liver Transplantation: Evidence From an International Randomized Trial of Everolimus-Based Immunosuppression

- BDF 1 Faouzi Saliba
- BDF 2 Lutz Fischer
- BDF 3 Paolo de Simone
- CDF 4 Peter Bernhardt
- CDF 4 Giovanni Bader
- BDF 5 John Fung

1 Hepato-Biliary Center, AP-HP Hôpital Paul Brousse, Université Paris-Sud, Villejuif, France

- 2 Department of Hepatobiliary Surgery and Transplantation, University Medical Center Eppendorf, Hamburg, Germany
- 3 Hepatobiliary Surgery and Liver Transplantation, University of Pisa, Pisa, Italy 4 Novartis Pharma AG, Basel, Switzerland
- 4 Novartis Pharma AG, Basel, Switzerland
- 5 Transplantation Center, Cleveland Clinic, Cleveland, OH, U.S.A.

Corresponding Author: Faouzi Saliba, e-mail: faouzi.saliba@pbr.aphp.fr

Ann Transplant. 2018 Oct 26;23:751-757. doi: 10.12659/AOT.911030. PMID: 30361470, PMCID: PMC6248043

In the paper, the sentence on page 754, first column, lines 4, 5, and 6 has been incorrectly written: At the month 24 study visit, mean (SD) eGFR was 74.7 (26.1), 67.8 (21.0), and 77.5 (26.2) mL/min/1.73 m2 in the EVR/rTAC, **TAC Elimination, and TAC Control groups**, respectively (p=0.007). The corrected sentence should read:

At the 24-month study visit, mean (SD) eGFR was 74.7 (26.1), 67.8 (21.0), and 77.5 (26.2) mL/min/1.73 m2 in the EVR/rTAC, **TAC Control, and TAC Elimination groups**, respectively (p=0.007).

Full-text PDF: https://www.annalsoftransplantation.com/abstract/index/idArt/916307

