



Corrigendum: Angiotensin Converting Enzyme 2 (ACE2) in Pregnancy: Preeclampsia and Small for Gestational Age

Sonia Tamanna ^{1,2,3}, Vicki L. Clifton ^{4,5}, Kym Rae ⁵, Dirk F. van Helden ², Eugenie R. Lumbers ^{1,2,3} and Kirsty G. Pringle ^{1,2,3*}

¹ Priority Research Centre for Reproductive Sciences, University of Newcastle, Newcastle, NSW, Australia, ² School of Biomedical Sciences and Pharmacy, Faculty of Health and Medicine, University of Newcastle, Newcastle, NSW, Australia, ³ Pregnancy and Reproduction Program, Hunter Medical Research Institute, University of Newcastle, Newcastle, NSW, Australia, ⁴ School of Medicine, Robinson Research Institute, University of Adelaide, Adelaide, SA, Australia, ⁵ Mater Medical Research Institute and Translational Research Institute, University of Queensland, Brisbane, QLD, Australia

Keywords: angiotensin converting enzyme 2 (ACE2), angiotensin peptides, preeclampsia, pregnancy, small for gestational age

A Corrigendum on

OPEN ACCESS

Edited and reviewed by:

Amanda Sferruzzi-Perri, University of Cambridge, United Kingdom

*Correspondence:

Kirsty G. Pringle kirsty.pringle@newcastle.edu.au

Specialty section:

This article was submitted to Developmental Physiology, a section of the journal Frontiers in Physiology

> Received: 09 April 2021 Accepted: 16 April 2021 Published: 20 May 2021

Citatio

Tamanna S, Clifton VL, Rae K, van Helden DF, Lumbers ER and Pringle KG (2021) Corrigendum: Angiotensin Converting Enzyme 2 (ACE2) in Pregnancy: Preeclampsia and Small for Gestational Age. Front. Physiol. 12:692761. doi: 10.3389/fphys.2021.692761 Angiotensin Converting Enzyme 2 (ACE2) in Pregnancy: Preeclampsia and Small for Gestational Age

by Tamanna, S., Clifton, V. L., Rae, K., van Helden, D. F., Lumbers, E. R., and Pringle, K. G. (2020). Front. Physiol. 11:590787. doi: 10.3389/fphys.2020.590787

In the original article, there was a mistake in **Figure 3A** and **G** as published. In **Figure 3A** it was written P=0<.001 instead of P<0.001 and Figure 3G it was written P=0.0012 instead of P=0.012. The corrected **Figure 3** appears below.

In the original article, there was an error. In the results section, one of the *P*-values was stated incorrectly.

A correction has been made to Results, ACE, ACE2, NEP, and ANG-(1-7) levels, ACE2 activity, and the ACE2/ACE ratio in women with preeclampsia, paragraph 2:

"Figure 5E shows the plasma Ang-(1-7) levels in women with normal pregnancies and women with PE. Women with PE had reduced levels of plasma Ang-(1-7) compared with levels in women with normal pregnancies (P = 0.034; Figure 5E). The ACE2/ACE ratio was increased in PE compared with normal pregnancies (P < 0.001; Figure 5F)."

The authors apologize for this error and state that this does not change the scientific conclusions of the article in any way. The original article has been updated.

Copyright © 2021 Tamanna, Clifton, Rae, van Helden, Lumbers and Pringle. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

1

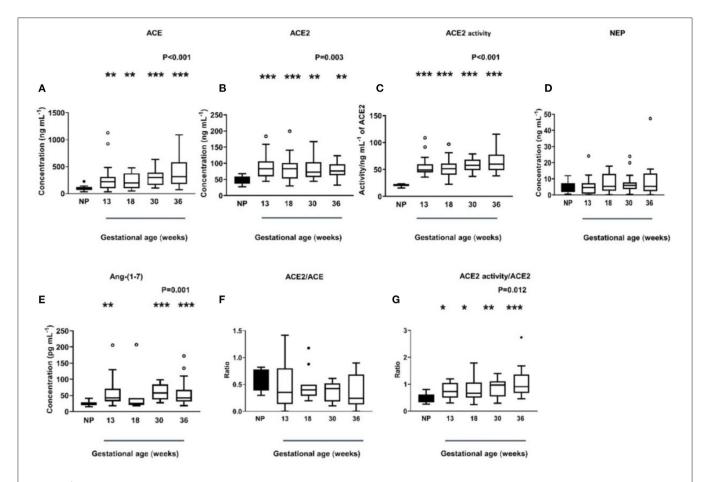


FIGURE 3 | Plasma levels and activity of ACE, ACE2, and NEP in non-pregnant (NP) and pregnant women **(A–D)**. Plasma levels of Ang-(1-7) were measured by radioimmunoassay in NP and pregnant women **(E)**. Plasma ACE2/ACE ratio and ACE2 activity/ACE ratio in NP and pregnant women **(F,G)**. Data are expressed as median and interquartile range. n = 9–10 samples for the NP group (black box), n = 7–35 samples/group for 13, 18, 30, and 36 weeks of normal pregnancy (white box). P-values were calculated using a Kruskal–Wallis test (with Dunn's multiple comparison test). P < 0.00, P < 0.01, P < 0.001 versus NP.