



Corrigendum: Advantages and pitfalls of clinical application of sugammadex

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In the article by Lee and Jung in the July 2020 issue of Anesthesia & Pain Medicine (Advantages and pitfalls of clinical application of sugammadex [pages 259-268]), the article contained an error in the main text (the corrected contents are displayed in underline).

1. In the first paragraph of 'Optimal dose of sugammadex for an obese patient' section (p. 260)

Before: Badaoui et al. [23] reported that the dose of sugammadex for the reversal of deep NMB in the obese patient was 130–150% of weight based dosage (4 mg/ calculated IBW).

After: Badaoui et al. [23] reported that the dose of sugammadex for the reversal of deep NMB in the obese patient was weight based dosage (4 mg/ calculated IBW) plus 35–50%.

2. In the first paragraph of 'Failure of reversal, recurarization, and resensitization?' section (p. 261)

Before: Recently, a report indicated that rescue administration of sugammadex (200 mg) after administration of neostigmine (50–70 mg/kg) for NMB reversal can result in a paradoxical reduction in the TOF ratio.

After: Recently, a report indicated that rescue administration of sugammadex (200 mg) after administration of neostigmine (50–70 µg/kg) for NMB reversal can result in a paradoxical reduction in the TOF ratio [52].

The authors apologize for any inconvenience that it may have caused.

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