

CORRECTION

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Correction to: Sepsis increases perioperative metastases in a murine model

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Correction

It has been highlighted that the original manuscript [1] contains a typesetting error in Fig. 1 and the Fig. 1c panel has been inadvertently duplicated in panel Fig. 1d. This does not affect the results and conclusions of the article. The correct version of Fig. 1 is included with this Correction. The original article has been updated.

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1. Tai LH, et al. Sepsis increases perioperative metastases in a murine model. *BMC Cancer*. 2018;18:277. <https://doi.org/10.1186/s12885-018-4173-4>.

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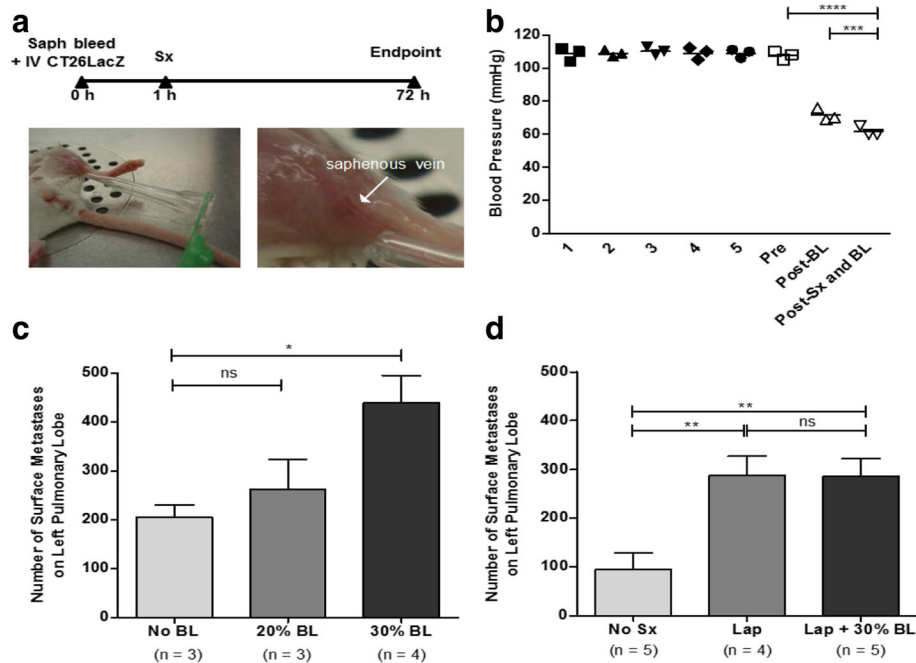


Fig. 1 Hemorrhagic shock does not increase metastatic disease. **a** *Experimental overview*. BALB/c mice were bled through the saphenous vein (indicated by the white arrow) and subsequently injected intravenously (IV) through the tail vein with 3×10^5 CT26LacZ cells. Approximately 1 h later, surgical stress (sx) was generated by laparotomy (Lap) (5 cm incision). Mice were sacrificed at 72 h to quantify lung metastases. **b** *Blood pressure is reduced following surgical stress and blood loss*. Blood pressure (mmHg) was measured following a 5-day training period (Day 1–5), prior to bleeding (Pre), immediately following bleeding (Post-BL), and immediately following surgical stress (Post-Sx and BL, $n = 3$). **c** *Blood loss increases metastatic burden*. Lung metastases were measured on Day 3 following no blood loss (no BL, $n = 3$) or 20% (20% BL, $n = 3$) or 30% blood loss (30% BL, $n = 4$). **d** *Blood loss does not increase metastatic disease in conjunction with surgical stress*. Lung metastases were measured on Day 3 in mice that did not undergo surgical stress (No Sx, $n = 5$) and animals undergoing a laparotomy (Lap, $n = 4$) alone or in combination with 30% blood loss (Lap + 30% BL, $n = 5$). Error bars represent \pm SEM