CORRECTION

Correction: Increased Levels of Plasma Soluble Sema4D in Patients with Heart Failure

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There are errors in Fig 5 and Fig 6. Please see the correct Fig 5 and Fig 6 here.





Citation: Lu Q, Dong N, Wang Q, Yi W, Wang Y, Zhang S, et al. (2019) Correction: Increased Levels of Plasma Soluble Sema4D in Patients with Heart Failure. PLoS ONE 14(3): e0214894. https://doi. org/10.1371/journal.pone.0214894

Published: March 28, 2019

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Fig 5. Sema4D expression on lymphocytes in HF patients and healthy donors. Fresh PBMCs from HF patients and healthy donors were double-stained and analyzed by FACS. The region corresponding to lymphocytes (R1) was selected using an FSC-H/SSC-H density plot. Using an FITC-density plot applied to the R1 region, the regions R2 and R3 corresponding to CD3⁺ and CD19⁺ cells, respectively, were defined (upper panels of 5A and 5B). In the PE density plot (middle panels of 5A and 5B), the right region delimits CD3⁺ and CD19⁺ cells with high expression of Sema4D, respectively. PE-conjugated IgG was used as an isotypic control. The percentage of Sema4D^{high} CD3⁺ cells and Sema4D^{high} CD19⁺ cells in healthy donors (HD) and HF patients (HF) were analyzed (lower panels of 5A and 5B). *P* values were obtained using ANOVA followed by a Tukey post test.

https://doi.org/10.1371/journal.pone.0214894.g001



Fig 6. Sema4D expression on T cell subpopulations in HF patients and healthy donors. Fresh PBMCs from HF patients and healthy donors were double-stained and analyzed by FACS. The region corresponding to lymphocytes (R1) was selected using an FSC-H/SSC-H density plot. Using a FITC-density plot applied to the R1 region, the regions R4 and R5 corresponding to $CD4^+$ and $CD8^+$ cells, respectively, were defined (upper panels of 6A and 6B). In the PE density plot (middle panels of 6A and 6B), the right region delimits $CD4^+$ and $CD8^+$ cells with high expression of Sema4D, respectively. PE-conjugated IgG was used as an isotypic control. The percentage of Sema4D^{high} CD4⁺ cells and Sema4D^{high} CD8⁺ cells in healthy donors (HD) and HF patients (HF) were analyzed (lower panels of 6A and 6B). *P* values were obtained using ANOVA followed by a Tukey post test.

https://doi.org/10.1371/journal.pone.0214894.g002

Reference

 Lu Q, Dong N, Wang Q, Yi W, Wang Y, Zhang S, et al. (2013) Increased Levels of Plasma Soluble Sema4D in Patients with Heart Failure. PLoS ONE 8(5): e64265. <u>https://doi.org/10.1371/journal.pone.0064265</u> PMID: 23741311