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Correction: Dapaglifozin reduces the vulnerability of rats with pulmonary arterial hypertension-induced right heart failure to ventricular arrhythmia by restoring calcium handling

Jinchun Wu^{1,2,3,4†}, Tao Liu^{1,2,3*†}, Shaobo Shi^{1,2,3}, Zhixing Fan^{1,2,3}, Roddy Hiram⁵, Feng Xiong⁵, Bo Cui^{1,2,3}, Xiaoling Su⁴, Rong Chang⁶, Wei Zhang^{1,2,3}, Min Yan^{1,2,3}, Yanhong Tang^{1,2,3}, He Huang^{1,2,3}, Gang Wu^{1,2,3*} and Congxin Huang^{1,2,3*}

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Following publication of the original article [1], the author noticed the error in Fig. 6. In the published article, Figs. 4 and 6 look same. The author has wrongly uploaded

Fig. 6 in the manuscript package which has been processed by the typesetter. However, the text citations and caption of Fig. 6 seems to be correct. Now this has been corrected with this erratum. The corrected Fig. 6 has been given in this correction.

The original article can be found online at https://doi.org/10.1186/s12933-022-01614-5

¹ Department of Cardiology, Renmin Hospital of Wuhan University, No. 238 Jiefang Road, Wuhan 430060, People's Republic of China Full list of author information is available at the end of the article



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[†]Jinchun Wu and Tao Liu contributed equally to the study as the first authors

^{*}Correspondence: taoliu@whu.edu.cn; wugangmd@163.com; huangcongxin@vip.163.com

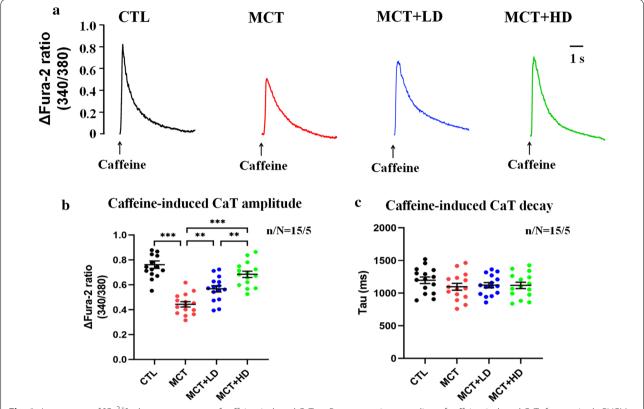


Fig. 6 Assessment of $[Ca^{2+}]_{SR}$ by measurement of caffeine-induced CaTs. **a** Representative recording of caffeine-induced CaTs from a single RVCM for the 4 groups (caffeine = 10 mmol/L), which was used to estimate the total $[Ca^{2+}]_{SR}$ content. **b** CaT amplitude. **c** CaT decay time constant. Each point represents the result from a single RVCM. *RVCM* right ventricular cardiomyocyte, CaT Ca²⁺ transient, $[Ca^{2+}]_{SR}$ sarcoplasmic reticulum Ca²⁺ content. n/N = 15/5 = cells/rats per group. The horizontal lines show the mean \pm SEM. One-way ANOVA or the nonparametric Wilcoxon signed-rank test. *p < 0.05, **p < 0.01, ***p < 0.001

Author details

¹Department of Cardiology, Renmin Hospital of Wuhan University, No. 238 Jiefang Road, Wuhan 430060, People's Republic of China. ²Cardiovascular Research Institute, Wuhan University, 238 Jiefang Road, Wuhan 430060, People's Republic of China. ³Hubei Key Laboratory of Cardiology, 238 Jiefang Road, Wuhan 430060, People's Republic of China. ⁴Department of Cardiology, Qinghai Provincial People's Hospital, No. 2 Gong He Road, Xining 810007, People's Republic of China. ⁵Department of Medicine, Faculty of Medicine, Montreal Heart Institute (MHI), Universite de Montreal, Montreal, QC, Canada. ⁶Department of Cardiology, Shenzhen Longhua District Central Hospital, The Affiliated Central Hospital of Shenzhen Longhua District, Guangdong Medical University, No. 187 Guanlan Road, Longhua District, Shenzhen 518109, China.

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