### Check for updates

### **OPEN ACCESS**

APPROVED BY Frontiers Editorial Office, Frontiers Media SA, Switzerland

### \*CORRESPONDENCE

Fei Li lifei\_union@hust.edu.cn Nianguo Dong 1986xh0694@hust.edu.cn Si Chen Sichen@hust.edu.cn

<sup>†</sup>These authors have contributed equally to this work

SPECIALTY SECTION This article was submitted to Heart Failure and Transplantation, a section of the journal Frontiers in Cardiovascular Medicine

RECEIVED 25 May 2022 ACCEPTED 26 May 2022 PUBLISHED 18 August 2022

#### CITATION

Zheng Y, Xu L, Cai Z, Tu J, Liu Y, Wang Y, Chen S, Dong N and Li F (2022) Corrigendum: The predictive role of intraoperative blood transfusion components in the prognosis of heart transplantation. *Front. Cardiovasc. Med.* 9:952663. doi: 10.3389/fcvm.2022.952663

### COPYRIGHT

© 2022 Zheng, Xu, Cai, Tu, Liu, Wang, Chen, Dong and Li. 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.

# Corrigendum: The predictive role of intraoperative blood transfusion components in the prognosis of heart transplantation

Yidan Zheng<sup>1,2†</sup>, Li Xu<sup>1,2†</sup>, Ziwen Cai<sup>1</sup>, Jingrong Tu<sup>1,2</sup>, Yuqi Liu<sup>1</sup>, Yixuan Wang<sup>1,2</sup>, Si Chen<sup>1,2\*</sup>, Nianguo Dong<sup>1,2\*</sup> and Fei Li<sup>1,2\*</sup>

<sup>1</sup>Department of Cardiovascular Surgery, Union Hospital, Tongji Medical College, Huazhong University of Science and Technology, Wuhan, China, <sup>2</sup>Key Laboratory of Organ Transplantation, Ministry of Education, NHC Key Laboratory of Organ Transplantation, Key Laboratory of Organ Transplantation, Chinese Academy of Medical Sciences, Wuhan, China

### KEYWORDS

heart transplantation, blood transfusion, red blood cell, platelet, plasma

### A corrigendum on

## The predictive role of intraoperative blood transfusion components in the prognosis of heart transplantation

by Zheng, Y., Xu, L., Cai, Z., Tu, J., Liu, Y., Wang, Y., Chen, S., Dong, N., and Li, F. (2022). Front. Cardiovasc. Med. 9:874133. doi: 10.3389/fcvm.2022.874133

In the published article, there was an error in affiliation **1**. Instead of "Department of Cardiovascular Surgery, Tongji Medical College, Union Hospital, Huazhong University of Science and Technology, Wuhan, China," it should be "Department of Cardiovascular Surgery, Union Hospital, Tongji Medical College, Huazhong University of Science and Technology, Wuhan, China."

There was a mistake in Figure 4 as published. The incorrect figure was uploaded. The corrected Figure 4 appears below.

There was a mistake in the legend for Figure 4 as published. "(A) red blood cell (before matching), p < 0.0001; (B) red blood cell (after matching), p = 0.00073; (C) platelet (before matching), p = 0.00017; (D) platelet (after matching), p = 0.085; (E) plasma (before matching), p < 0.0001; (F) plasma (after matching), p = 0.018." is incorrect.

The correct legend appears below.

"(A) Red blood cell (before matching), p < 0.0001; (B) red blood cell (after matching), p = 0.0028; (C) platelet (before matching), p = 0.00017; (D) platelet (after matching), p = 0.072; (E) plasma (before matching), p < 0.0001; (F) plasma (after matching), p = 0.012."

There was an error. The data in Figure 4 was mis-described.

A correction has been made to "Result", "Propensity Score Matching and Survival Analysis", Paragraph 2:

"The result of Kaplan–Meier survival analysis showed that the survival curves of three pairs of groups were all significantly separated. The groups with high-amounts transfusion of RBC, platelet, and plasma had significantly lower survival rates compared to the low-amount ones (p < 0.0001, p = 0.00017, p < 0.0001, respectively). The significant separation of the groups with a higher amount of RBC and plasma transfusion remained consistent after propensity score matching, with p = 0.0028and p = 0.012, respectively. However, the survival results failed to expose significant separation in a high amount of platelet transfusion group, with p = 0.072 (Figure 4)." 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.

### Publisher's note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.



frontiersin.org