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## KEYWORDS

acute rheumatic fever, Th17 cells, IgG subclass, autoimmunity, group A streptococci

# A Corrigendum on

IgG2 rules: N-acetyl- $\beta$ -D-glucosamine-specific IgG2 and Th17/Th1 cooperation may promote the pathogenesis of acute rheumatic heart disease and be a biomarker of the autoimmune sequelae of *Streptococcus pyogenes* 

by Kirvan CA, Canini H, Swedo SE, Hill H, Veasy G, Jankelow D, Kosanke S, Ward K, Zhao YD, Alvarez K, Hedrick A and Cunningham MW (2023). Front. Cardiovasc. Med. 10: 919700. doi: 10.3389/fcvm.2022.919700

In the published article, there was an error in Figure 5 as published. One of the original figures was accidentally replicated and the correct figure left out. The corrected Figure 5 and its caption appear below.

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.



#### FIGURE 5

Immunohistochemistry for IgG subclasses reveals strong human IgG2 deposition in RHD heart tissues from four different patients compared to other subclasses as seen by Fast Red stain of IgG subclass deposition. Red staining of cells indicates a positive IgG binding (see arrows). RHD 1 IgG2 staining is 4+, RHD 2 IgG2 staining is 3+, RHD 3 IgG2 is 4+, RHD 4 IgG2 staining is 2+. Faint staining IgG3 (RHD 3 0.5+) and IgG4 (RHD 2 1 =, RHD 3 0.5+) staining was present. No visible IgG1 staining was observed for any of the four RHD samples. IgG subclass deposition is absent from Isotype control and non-RHD heart tissue(CONTROL). Magnification 400X.