

Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.

doi: 10.1016/j.bja.2022.07.020 Advance Access Publication Date: 27 August 2022 Corrigendum

CORRIGENDUM

Corrigendum to 'Impaired systemic oxygen extraction long after mild COVID-19: potential perioperative implications' (Br J Anaesth 2022; 128: e246–9)

Paul M. Heerdt^{1,*}, Ben Shelley² and Inderjit Singh³

¹Department of Anesthesiology, Applied Hemodynamics, Yale School of Medicine, New Haven, CT, USA, ²Golden Jubilee National Hospital/West of Scotland Heart and Lung Centre, University of Glasgow Academic Unit of Anaesthesia, Pain and Critical Care, Glasgow, Scotland, UK and ³Division of Pulmonary, Critical Care, and Sleep Medicine, Department of Medicine, Yale School of Medicine, New Haven, CT, USA

*Corresponding author. E-mail: paul.heerdt@yale.edu DOI of original article: https://doi.org/10.1016/j.bja.2021.12.036.

An astute reader noted an error in the reported values for oxygen delivery (DO₂) in our recent publication describing the response to invasive cardiopulmonary exercise testing (CPET) in patients nearly 1 yr after recovery from severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2) infection.¹ In Table 1, the DO₂ data are off by a factor of 10. Accordingly, in the table CPET – resting DO₂ should be 14 (2.4) ml min⁻¹ kg⁻¹ for post-COVID-19 patients and 12 (3.5) ml min⁻¹ kg⁻¹ for control patients. Similarly, CPET – peak DO₂ should be 36 (14) ml min⁻¹ kg⁻¹ for post-COVID-19 patients and 42 (15) ml min⁻¹ kg⁻¹ for controls.

Importantly, this error does not alter the intent or conclusions of the report. We thank the reader for their careful attention to detail. The corrected table appears below.

Reference

 Singh I, Joseph P, Heerdt PM, et al. Persistent exertional intolerance after COVID-19: insights from invasive cardiopulmonary exercise testing. Chest 2022; 161: 54–63

© 2022 British Journal of Anaesthesia. Published by Elsevier Ltd. All rights reserved. For Permissions, please email: permissions@elsevier.com

Table 1 Baseline characteristics and relevant cardio-pulmonary exercise data. Data presented as mean (standard deviation) or median (inter-quartile range [IQR]). Highlighted rows emphasise differences between groups. DO₂, oxygen delivery; EO₂, oxygen extraction ratio; FEV₁, forced expiratory volume in 1 s; FVC, forced vital capacity; SaO₂, oxygen saturation in arterial blood; VO₂, oxygen consumption. Data adapted from Ref. 1.

	Post-COVID-19	Control (n=10)	P-value
	(<i>n</i> =10)		
Characteristics			
Age, yr (range)	48 (28–79)	48 (40–68)	0.87
Female/male	9/1	8/2	0.53
BMI (kg m ⁻²)	28 (6)	24 (6)	0.11
Haemoglobin (g dl ⁻¹)	13.4 (1.1)	14.2 (1.4)	0.16
Interval time from acute infection (months)	11 (1)	Not applicable	
Pulmonary function tests			
FEV ₁ (% predicted)	97 (1)	100 (1)	0.34
FVC (% predicted)	96 (1)	104 (1)	0.19
FEV1/FVC (% predicted)	101 (3)	98 (5)	0.18
CPET – resting			
SaO ₂ (%)	98 (IQR 97–98)	98 (IQR 97–98)	0.64
Mixed venous O ₂ saturation (%)	73 (3)	66 (6)	0.01
Stroke volume index (ml m ⁻²)	36 (10)	40 (13)	0.44
Cardiac index (L min ⁻¹ m ⁻²)	3.2 (0.6)	2.8 (0.5)	0.13
DO ₂ (ml min ⁻¹ kg ⁻¹)	14 (2.4)	12 (3.5)	0.59
VO ₂ (ml min ⁻¹ kg ⁻¹)	3.7 (0.5)	4.4 (0.8)	0.04
Systemic EO ₂ (ratio)	0.26 (0.03)	0.36 (0.01)	0.01
CPET peak exercise			
Heart rate (% predicted)	84 (8)	84 (2)	0.85
SaO ₂ (%)	98 (IQR 98–98)	97 (IQR 97 – 98)	0.01
Mixed venous O ₂ saturation (%)	50 (10)	22 (5)	< 0.0001
Stroke volume index (ml m ⁻²)	54 (21)	64 (22)	0.34
Cardiac index (L min ⁻¹ m ⁻²)	7.8 (3.1)	8.4 (2.3)	0.59
DO_2 (ml min ⁻¹ kg ⁻¹)	36 (14)	42 (15)	0.21
VO_2 (ml min ⁻¹ kg ⁻¹)	17 (4)	34 (13)	0.001
Systemic EO ₂ (ratio)	0.49 (0.1)	0.78 (0.1)	< 0.0001