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EDITED AND REVIEWED BY

Peter Katsikis,
Erasmus University Rotterdam,
Netherlands

*CORRESPONDENCE

Evangelos J. Giamarellos-Bourboulis
egiamarel@med.uoa.gr

†These authors share senior authorship

SPECIALTY SECTION

This article was submitted to
Immunological Memory,
a section of the journal
Frontiers in Immunology

RECEIVED 13 August 2022

ACCEPTED 15 August 2022

PUBLISHED 31 August 2022

CITATION

Tsilika M, Taks E, Dolianitis K,
Kotsaki A, Leventogiannis K,
Damoulari C, Kostoula M, Paneta M,
Adamis G, Papanikolaou I,
Stamatelopoulos K, Bolanou A,
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Akinosoglou K, Perdikouli A,
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Athanassopoulou E, Kalpaki E,
Efstratiou L, Perraki V,
Papadopoulos A, Netea MG and
Giamarellos-Bourboulis EJ (2022)
Corrigendum: ACTIVATE-2: A
double-blind randomized trial of BCG
vaccination against COVID-19 in
individuals at risk.
Front. Immunol. 13:1018384.
doi: 10.3389/fimmu.2022.1018384

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Delavinia, Perdios, Pandi, Tsiakos, Proios,
Kalogianni, Delis, Skliros, Akinosoglou,
Perdikouli, Poulakou, Milionis,
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Perraki, Papadopoulos, Netea and
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Corrigendum: ACTIVATE-2: A double-blind randomized trial of BCG vaccination against COVID-19 in individuals at risk

Maria Tsilika¹, Esther Taks², Konstantinos Dolianitis³,
Antigone Kotsaki¹, Konstantinos Leventogiannis¹,
Christina Damoulari¹, Maria Kostoula¹, Maria Paneta¹,
Georgios Adamis⁴, Ilias Papanikolaou⁵,
Kimon Stamatelopoulos⁶, Amalia Bolanou¹,
Konstantinos Katsaros⁷, Christina Delavinia⁶, Ioannis Perdios⁴,
Aggeliki Pandi⁵, Konstantinos Tsiakos⁸, Nektarios Proios¹,
Emmanouela Kalogianni⁶, Ioannis Delis⁹, Efstathios Skliros¹⁰,
Karolina Akinosoglou¹¹, Aggeliki Perdikouli¹,
Garyfallia Poulakou⁸, Haralampos Milionis¹²,
Eva Athanassopoulou¹, Eleftheria Kalpaki¹, Leda Efstratiou¹³,
Varvara Perraki¹³, Antonios Papadopoulos¹, Mihai G. Netea^{2,14†}
and Evangelos J. Giamarellos-Bourboulis^{1,13*†}

¹4thDepartment of Internal Medicine, National and Kapodistrian University of Athens, Medical School, Athens, Greece, ²Department of Internal Medicine and Center for Infectious Diseases, Radboud University, Nijmegen, Netherlands, ³Department of Internal Medicine, "Bodosakeio" General Hospital of Ptolemaida, Ptolemaida, Greece, ⁴1stDepartment of Internal Medicine, "G.Gennimatas" Athens General Hospital, Athens, Greece, ⁵Department of Pulmonary Medicine, Aghia Eirini General Hospital of Kerkyra, Kontokali, Greece, ⁶Department of Therapeutics, National and Kapodistrian University of Athens, Athens, Greece, ⁷Department of Surgery, General Hospital of Argos-Unit of Nafplion, Nafplion, Greece, ⁸3rdDepartment of Internal Medicine, National and Kapodistrian University of Athens, Athens, Greece, ⁹Department of Internal Medicine, General Hospital of Karditsa, Karditsa, Greece, ¹⁰Nemea Health Center, Nemea, Greece, ¹¹Department of Internal Medicine, Patras University Hospital, Rio, Greece, ¹²1stDepartment of Internal Medicine, University Hospital of Ioannina, Ioannina, Greece, ¹³Hellenic Institute for the Study of Sepsis, Athens, Greece, ¹⁴Department of Immunology and Metabolism, Life and Medical Sciences Institute, University of Bonn, Bonn, Germany

KEYWORDS

BCG, COVID-19, SARS-CoV-2, elderly vaccination, trained immunity

A Corrigendum on

ACTIVATE-2: A double-blind randomized trial of BCG vaccination against COVID-19 in individuals at risk.

by Tsilika M, Taks E, Dolianitis K, Kotsaki A, Leventogiannis K, Damoulari C, Kostoula M, Paneta M, Adamis G, Papanikolaou I, Stamatelopoulos K, Bolanou A, Katsaros K, Delavinia C, Perdios I, Pandi A, Tsiakos K, Proios N, Kalogianni E, Delis I, Skliros E, Akinosoglou K, Perdikouli A, Poulakou G, Milionis H, Athanassopoulou E, Kalpaki E, Efstratiou L, Perraki V, Papadopoulos A, Netea MG and Giamarellos-Bourboulis EJ (2022). *Front. Immunol.* 13:873067. doi: 10.3389/fimmu.2022.873067

In the published article, there were errors in the body text.

A correction has been made to the **Abstract**. This sentence previously stated:

“These data indicate that BCG vaccination confers some protection against possible COVID-19 among patients older than 50 years with comorbidities.”

The corrected sentence appears below:

“The ACTIVATE II trial did not meet the primary endpoint of the reduction of the risk for COVID-19 3 months after BCG vaccination; however, the secondary endpoint of the reduction of the risk for COVID-19 6 months after BCG vaccination was met.”

A correction has also been made to **Results, Study End Points**, paragraph 1. This sentence previously stated:

“During these first 3 months after the vaccination the overall incidence of COVID-19 in Greece was low, and thus the number of COVID-19 diagnoses was low in both groups (10 patients in placebo vs. two participants in BCG group, $p=0.086$.”

The corrected sentence appears below:

“The primary endpoint was met in 10 participants in the placebo group and two participants in the BCG group ($p= 0.086$). This may be due to the low overall incidence of COVID-19 in Greece the first 3 months after the vaccination.”

A correction has also been made to **Discussion**, paragraph 1. This sentence previously stated:

“BCG vaccination resulted in a substantially lower incidence of possible/probable/definitive COVID-19 in an elderly population 6-months after vaccination, than in the placebo group.”

The corrected sentence appears below:

“Although the primary endpoint of the decrease of the incidence of possible/probable/definitive COVID-19 3-months after vaccination was not met, the trial managed to achieve the secondary endpoint and demonstrate lower incidence of possible/probable/definitive COVID-19 in a population with comorbidities 6-months after vaccination.”

The authors apologize for these errors and state that they do not change the scientific conclusions of the article in any way. The original article has been updated.

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