



Corrigendum: CCR2 Is Dispensable for Disease Resolution but Required for the Restoration of Leukocyte Homeostasis Upon Experimental Malaria-Associated Acute Respiratory Distress Syndrome

Emilie Pollenus¹, Thao-Thy Pham¹, Leen Vandermosten¹, Queeny Robalo¹, Hendrik Possemiers¹, Sofie Knoops¹, Ghislain Opdenakker² and Philippe E. Van den Steen^{1*}

¹ Laboratory of Immunoparasitology, Department of Microbiology, Immunology and Transplantation, Rega Institute for Medical Research, KU Leuven, University of Leuven, Leuven, Belgium, ² Laboratory of Immunobiology, Department of Microbiology, Immunology and Transplantation, Rega Institute for Medical Research, KU Leuven, University of Leuven, Leuven, Belgium

Keywords: malaria, inflammation, resolution, monocytes, immunology, parasitology, eosinophils

A Corrigendum on

CCR2 Is Dispensable for Disease Resolution but Required for the Restoration of Leukocyte Homeostasis Upon Experimental Malaria-Associated Acute Respiratory Distress Syndrome

By Pollenus E, Pham T-T, Vandermosten L, Robalo Q, Possemiers H, Knoops S, Opdenakker G and Van den Steen PE (2021) *Front. Immunol.* 11:628643. doi: 10.3389/fimmu.2020.628643

“Queeny Robalo” was not included as an author in the published article. The corrected Author contributions statement appears below.

AUTHOR CONTRIBUTIONS

EP, T-TP, LV, QR, HP and SK performed the experiments. EP and QR analyzed the data. PVdS, EP and GO conceived the study. EP and PVdS wrote the first drafts of the manuscript. EP, T-TP, LV, HP, SK, GO and PVdS critically read and edited the manuscript. All authors contributed to the article, read the article and approved the final version.

Furthermore, one picture of the lungs in **Figure 1F** in the published article was inadvertently duplicated and mislabeled as “ART+CQ d15” instead of “ART+CQ d14”. The corrected **Figure 1** appears below.

The authors apologize for these errors 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.

Copyright © 2022 Pollenus, Pham, Vandermosten, Robalo, Possemiers, Knoops, Opdenakker and Van den Steen. 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.

OPEN ACCESS

Edited and reviewed by:

Janos G. Filep,
Université de Montréal,
Canada

*Correspondence:

Philippe E. Van den Steen
Philippe.vandensteen@kuleuven.be

Specialty section:

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

Received: 22 April 2022

Accepted: 16 May 2022

Published: 01 June 2022

Citation:

Pollenus E, Pham T-T,
Vandermosten L, Robalo Q,
Possemiers H, Knoops S,
Opdenakker G and Van den Steen PE
(2022) Corrigendum: CCR2 Is
Dispensable for Disease Resolution
but Required for the Restoration of
Leukocyte Homeostasis Upon
Experimental Malaria-Associated
Acute Respiratory Distress Syndrome.
Front. Immunol. 13:926032.
doi: 10.3389/fimmu.2022.926032

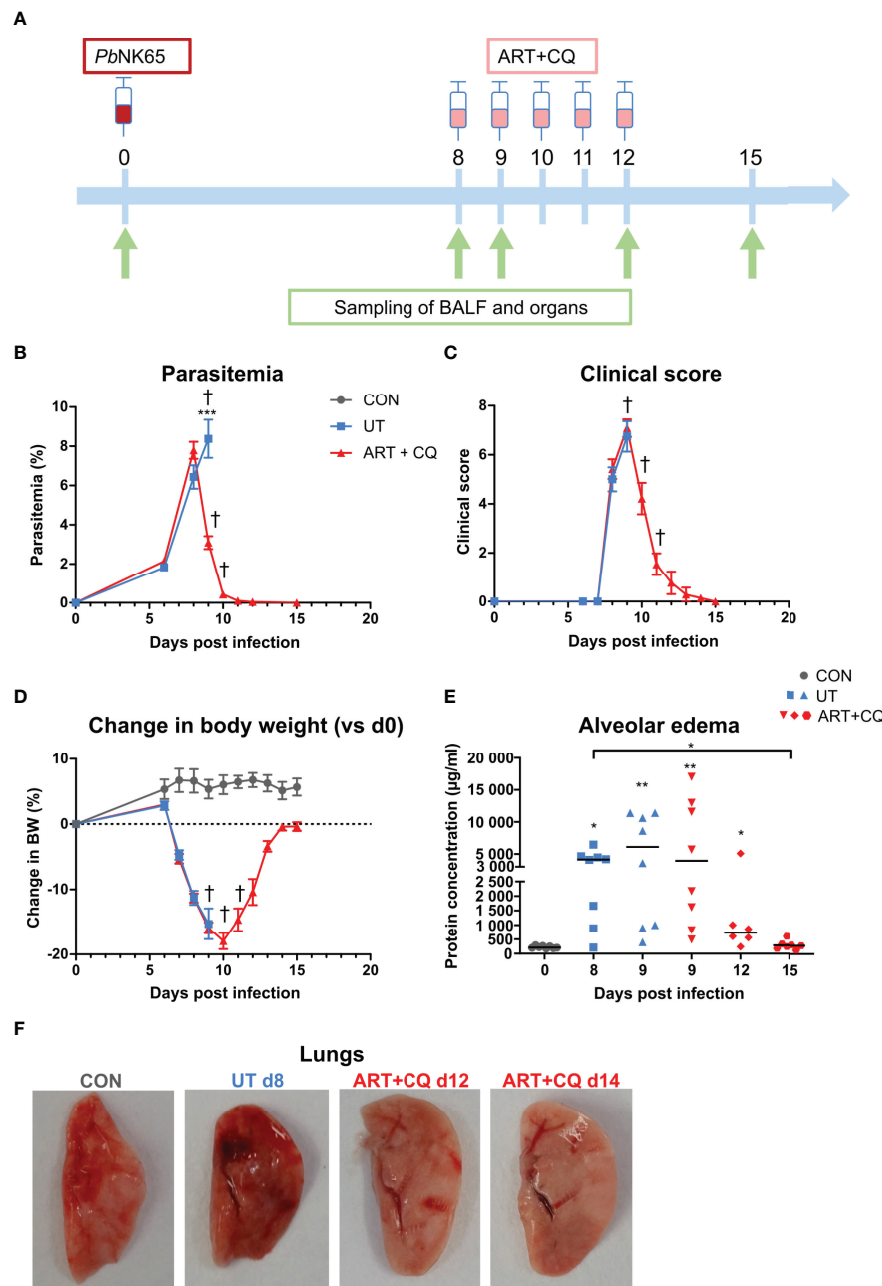


FIGURE 1 | A mouse model to study the resolution of malaria-associated acute respiratory distress syndrome (MA-ARDS) after antimalarial treatment. C57BL/6 mice were infected with PbNK65. Mice were injected daily from 8 until 12 days p.i. with 10 mg/kg ART + 30 mg/kg CQ (ART+CQ). **(A)** Schematic representation of the timing of infection and antimalarial treatments in the mouse model. **(B)** Parasitemia was determined using Giemsa-stained blood smears. **(C)** The clinical score was monitored daily starting at 6 days p.i. **(D)** The change in body weight was calculated compared to day 0 p.i. starting at 6 days p.i. **(B, D)** Compilation of two experiments. Data are means \pm SEM. $n=8$ for uninfected controls (CON), $n=8-16$ for the infected untreated group (UT), $n=7-21$ for the infected ART+CQ-treated group. **(E)** The protein concentration in the BALF was determined as a measure of alveolar edema. Compilation of two experiments. Each symbol represents data of an individual mouse. $n=8$ for CON on day 0, UT at 8 and 9 days p.i. and ART+CQ at 9 days p.i., $n=6$ for ART+CQ at 12 days p.i., $n=7$ for ART+CQ at 15 days p.i. **(F)** Representative pictures of the left lung.