

Correction

Correction: The role of corticosteroids in severe community-acquired pneumonia: a systematic reviewJorge IF Salluh^{1,2}, Pedro Póvoa³, Márcio Soares¹, Hugo C Castro-Faria-Neto², Fernando A Bozza⁴ and Patrícia T Bozza²¹Intensive Care Unit, Instituto Nacional de Câncer, Praça Cruz Vermelha, 23, 10 andar – Centro, Rio de Janeiro-RJ, Brazil 20230-130²Immunopharmacology Laboratory, Instituto Oswaldo Cruz, FIOCRUZ, Av. Brasil, 4365, Rio de Janeiro-RJ, Brazil 21045-900³Medical Intensive Care Unit, Hospital de São Francisco Xavier. Centro Hospitalar de Lisboa Ocidental, Estrada do Forte do Alto do Duque, CEP 1449-005 Lisboa, Portugal⁴Instituto de Pesquisa Clínica Evandro Chagas, Fundação Oswaldo Cruz, Av. Brasil, 4365, Rio de Janeiro-RJ, Brazil 21045-900Corresponding author: Jorge IF Salluh, jorgesalluh@yahoo.com.br

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Following the publication of the above article [1], we noticed that in Table 1, concerning the data of the study from Garcia-Vidal the dose of methylprednisolone is not 14.5 mg/day but 45 mg/day.

Reference

1. Salluh JI, Povoia P, Soares M, Castro-Faria-Neto HC, Bozza FA, Bozza PT: **The role of corticosteroids in severe community-acquired pneumonia: a systematic review.** *Crit Care* 2008, **12**:R76.

Competing interests

The author(s) declare that they have no competing interests.

Table 1**Recent literature on the role of corticosteroids in severe community-acquired pneumonia**

Reference	Study design	Sample size, number	Patient selection	Corticosteroids (drug/regimen)	Primary endpoints	Level of evidence and recommendation
Marik, <i>et al.</i> [21]	Single-center RCT	30	Severe CAP	Hydrocortisone 10 mg/kg versus placebo 30 minutes before antibiotics	Mortality, clinical course, and serum TNF- α levels	Weak recommendation, moderate-quality evidence
Confalonieri, <i>et al.</i> [6]	Multicenter RCT	46	Severe CAP	Hydrocortisone 200 mg + hydrocortisone 10 mg/hour, for 7 days versus placebo	Mortality, clinical course, and systemic inflammation	Strong recommendation, moderate-quality evidence
Mikami, <i>et al.</i> [20]	Open label RCT	31	Moderate and severe CAP	Prednisolone 40 mg qd, for 3 days versus placebo	Mortality and clinical course	Weak recommendation, low-quality evidence
Garcia-Vidal, <i>et al.</i> [19]	Retrospective cohort study	308	Severe CAP	Methylprednisolone 45 mg (or equivalent) qd for 11.4 days	Mortality	Strong recommendation, low-quality evidence

CAP, community-acquired pneumonia; qd, *quaque die* (every day); RCT, randomized controlled trial; TNF- α , tumor necrosis factor-alpha.