

Immunological Features in Influenza A H1N1 Pneumonitis

I read the recent publication by Wen et al [1] on immunological features in influenza A H1N1 pneumonitis with great interest. The authors stated that “serial measurements of cytokines showed that only TGF- β 1 was overproduced, possibly in relation to the early use of corticosteroids, which may have downregulated immune responses to H1N1 infection.”

The finding on poor cytokine response to the infection in this report is very interesting, as it contrasts with those in recent reports by Lee et al [2] and Ito et al [3] in larger groups of patients. Both the small sample size and possible selection bias could account for this finding.

References

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influenza A H1N1 infection. *J Investig Allergol Clin Immunol.* 2011;21(1):44-50.

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3. Ito Y, Torii Y, Ohta R, Imai M, Hara S, Kawano Y, Matsubayashi T, Inui A, Yoshikawa T, Nishimura N, Ozaki T, Morishima T, Kimura H. Increased levels of cytokines and high-mobility group box 1 are associated with the development of severe pneumonia, but not acute encephalopathy, in 2009 H1N1 influenza-infected children. *Cytokine.* 2011 Nov;56(2):180-7.

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ERRATUM

Baççioğlu Kavut A, Kalpaklioğlu F, Birben E, Ayaslioğlu E. Association Between Tuberculosis and Atopy: Role of the CD14-159C/T Polymorphism. *J Investig Allergol Clin Immunol.* 2012;22(3):201-7.

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Table 1. Column headers

“Before” “After” “Before” “After” should read as follows:

“Total (N=180)” “Atopic (n=118)” “Control (n=62)” “P Value”

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The frequency of atopic phenotypes—except asthma, allergen sensitization, levels of sCD14, IFN- γ , and total IgE—was similar between the groups of tuberculosis scores and CD14 genotypes in atopic patients (Table 3).

should now read as follows:

The frequency of atopic phenotypes—except asthma—allergen sensitization, levels of sCD14, IFN- γ , and total IgE were similar between the groups of tuberculosis scores and CD14 genotypes in atopic patients (Table 3).