



OPEN ACCESS

*CORRESPONDENCE

Judith Martini,
✉ judith.martini@i-med.ac.atRECEIVED 01 April 2026
REVISED 02 April 2026
ACCEPTED 23 April 2026
PUBLISHED 06 May 2026

CITATION

Mathis S, Putzer G, Gasteiger L, Staier N, Schlosser L, Tscholl P, Breitkopf R, Cardini B, Kofler A, Oberhuber R, Resch T, Schneeberger S and Martini J (2026) Correction: Effect of normothermic machine perfusion on glycocalyx shedding during liver transplantation - a prospective pilot study. *Transpl. Int.* 39:16694. doi: 10.3389/ti.2026.16694

COPYRIGHT

© 2026 Mathis, Putzer, Gasteiger, Staier, Schlosser, Tscholl, Breitkopf, Cardini, Kofler, Oberhuber, Resch, Schneeberger and Martini. This is an open-access article distributed under the terms of the [Creative Commons Attribution License \(CC BY\)](https://creativecommons.org/licenses/by/4.0/). 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.

Correction: Effect of normothermic machine perfusion on glycocalyx shedding during liver transplantation - a prospective pilot study

Simon Mathis¹, Gabriel Putzer¹, Lukas Gasteiger¹, Nikolai Staier¹, Lisa Schlosser³, Pia Tscholl³, Robert Breitkopf¹, Benno Cardini², Alexander Kofler², Rupert Oberhuber², Thomas Resch², Stefan Schneeberger² and Judith Martini^{1*}

¹Department of Anaesthesiology and Critical Care Medicine, Medical University of Innsbruck, Innsbruck, Austria, ²Department of Visceral, Transplant and Thoracic Surgery, Medical University of Innsbruck, Innsbruck, Austria, ³Data Lab Hell GmbH, Zirl, Austria

KEYWORDS

glycocalyx, heparan sulfate, liver transplantation, normothermic machine perfusion, syndecan-1

A Correction on

Effect of normothermic machine perfusion on glycocalyx shedding during liver transplantation - a prospective pilot study

by Mathis S, Putzer G, Gasteiger L, Staier N, Schlosser L, Tscholl P, Breitkopf R, Cardini B, Kofler A, Oberhuber R, Resch T, Schneeberger S and Martini J (2026). *Transpl. Int.* 39:15502. doi: 10.3389/ti.2026.15502

There was a mistake in [Figures 1–3](#) as published. The figures were placed in the wrong order in the text. The corrected [Figures 1–3](#) appears below.

There was a mistake in the caption of [Figure 2](#) as published. The corrected caption of [Figure 2](#) appears below.

There was a mistake in the caption of [Figure 3](#) as published. The corrected caption of [Figure 3](#) appears below.

There was a mistake in the caption of [Figure 4](#) as published. The corrected caption of [Figure 4](#) appears below.

A correction has been made to the section **Results**, Sub Section “*Glycocalyx Damage Parameters during NMP*”, Subsub Section “*Heparan Sulfate*”, Paragraph “1”. The Sentence: “No significant dynamics of heparan sulfate were observed during NMP ($p = 0.100$) ([Figure 4](#))” has been changed to: “No significant dynamics of heparan sulfate were observed during NMP ($p = 0.100$) ([Figure 2](#)).”

A correction has been made to the section **Results**, Sub Section “*Outcome Associations of Glycocalyx Injury During NMP*”, Paragraph “1”. The Sentence: “Furthermore, perfusate syndecan-1 values were significantly higher in grafts of recipients who developed EAD ($n = 10$) compared to those without EAD ($n = 11$) (4,331.5 (4,180.3–5,033.7) ng/mL vs. 2,800.7 (2,480.5–3,618.7) ng/mL; $p = 0.024$ and 9,379.7 (6,181–104,923) ng/mL vs. 4,338.9

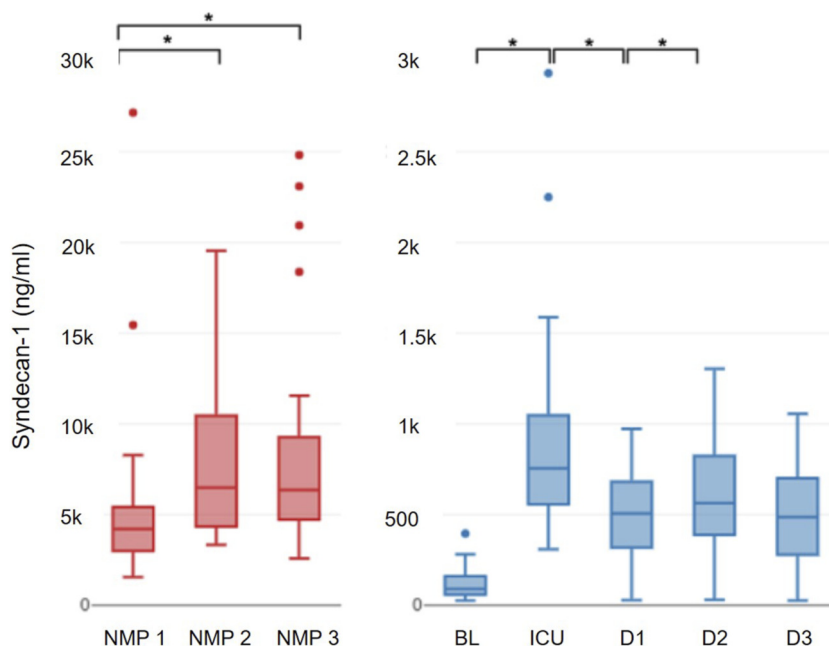


FIGURE 1 Progression of syndecan-1.

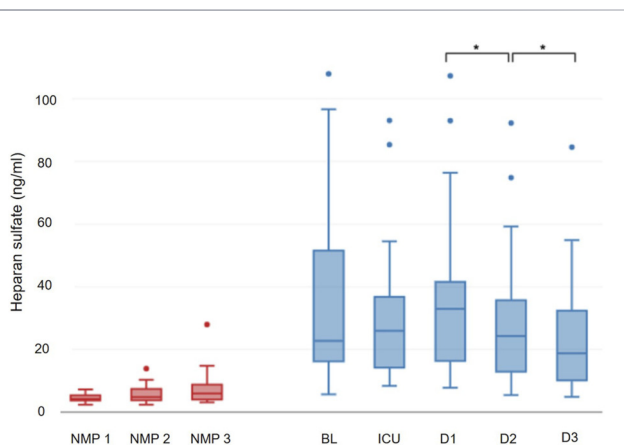


FIGURE 2 Progression of heparan sulfate.

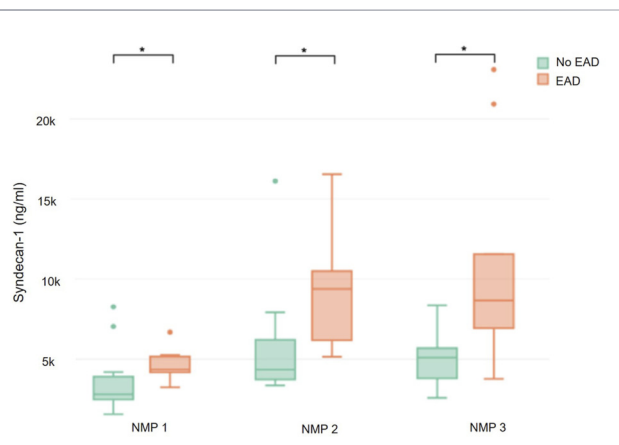
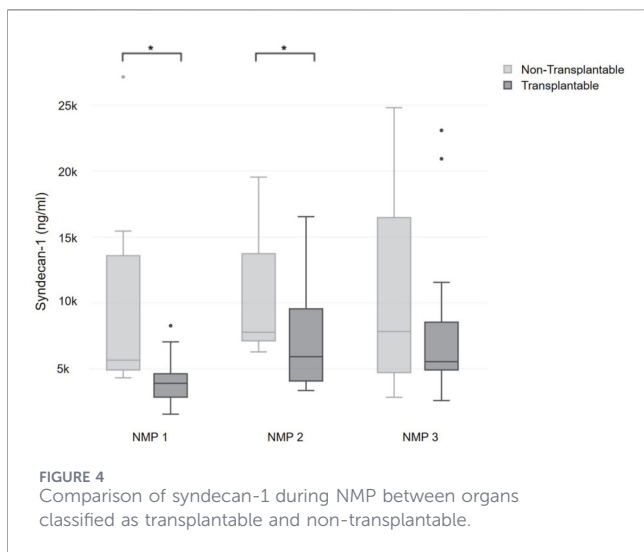


FIGURE 3 Syndecan-1 during NMP depending on the occurrence of EAD.

(3,730–6,201.3) ng/mL; $p = 0.013$ and 8,663.6 (6,926.2–11,551.9) ng/mL vs. 5,096.5 (3,795–5,679.5) ng/mL; $p = 0.013$) (Figure 2).” should be changed to: “Furthermore, perfusate syndecan-1 values were significantly higher in grafts of recipients who developed EAD ($n = 10$) compared to those without EAD ($n = 11$) (4,331.5 (4,180.3–5,033.7) ng/mL vs. 2,800.7 (2,480.5–3,618.7) ng/mL; $p = 0.024$ and 9,379.7 (6,181–104,923) ng/mL vs. 4,338.9 (3,730–6,201.3) ng/mL; $p = 0.013$ and 8,663.6 (6,926.2–11,551.9) ng/mL vs. 5,096.5 (3,795–5,679.5) ng/mL; $p = 0.013$) (Figure 3).”

A correction has been made to the section Section “Results”, Sub Section “Outcome Associations of Glycocalyx Injury During NMP”, Paragraph “2”. The Sentence: “Grafts

that were classified as transplantable ($n = 23$) exhibited significantly lower syndecan-1 levels at the onset of perfusion (3,892.6 (2,883.7–4,561.2) ng/mL) and after six hours of perfusion (5,915.7 (4,082.2–9,379.7) ng/mL) when compared to grafts that were classified as unsuitable for transplantation due to their metabolic profile (5,653.7 (5,074–11,706.6) ng/mL; $p = 0.001$ and 7,764.8 (7,133.6–12,740.7) ng/mL; $p = 0.037$) (Figure 3).” should be changed to “Grafts that were classified as transplantable ($n = 23$) exhibited significantly lower syndecan-1 levels at the onset of perfusion (3,892.6 (2,883.7–4,561.2) ng/mL) and after six hours of perfusion (5,915.7 (4,082.2–9,379.7) ng/mL) when compared to grafts that were classified as unsuitable for



transplantation due to their metabolic profile (5,653.7 (5,074–11,706.6) ng/mL; $p = 0.001$ and 7,764.8 (7,133.6–12,740.7) ng/mL; $p = 0.037$) (Figure 4).”

A correction has been made to the section Section “**Results**”, Sub Section “*Glycocalyx Damage Parameters in the Recipient*”, Paragraph “2”. The Sentence: “However, from postoperative day 1 to postoperative day 2 (24.3 (13.2–35.1) ng/mL; $p = 0.006$) and postoperative day 3 (18.7 (10.1–30.8) ng/mL; $p = 0.008$), heparan sulfate levels experienced a decrease, reaching values below the preoperative baseline ($p = 0.006$) (Figure 4).” should be changed to “However, from postoperative day 1 to postoperative day 2 (24.3 (13.2–35.1) ng/mL; $p = 0.006$) and postoperative day 3 (18.7 (10.1–30.8) ng/mL; $p = 0.008$), heparan sulfate levels experienced a decrease, reaching values below the preoperative baseline ($p = 0.006$) (Figure 2).”

The original article has been updated.

Generative AI statement

Any alternative text (alt text) provided alongside figures in this article has been generated by Frontiers with the support of artificial intelligence and reasonable efforts have been made to ensure accuracy, including review by the authors wherever possible. If you identify any issues, please contact us.