



# **Correction in the article by Abdelrazek Ali et al.** **“Management of collaterals after Glenn procedure and its impact on patients with a single ventricle: a single-center study”, REC Interv Cardiol. 2024;6:296-304**

*Corrección en el artículo de Abdelrazek Ali et al. «Tratamiento de colaterales tras cirugía de Glenn y su impacto en pacientes con ventrículo único: un estudio unicéntrico», REC Interv Cardiol. 2024;6:296-304*

SEE RELATED CONTENT  
<https://doi.org/10.24875/RECICE.M24000472>

In the article by Abdelrazek Ali et al. “Management of collaterals after Glenn procedure and its impact on patients with a single ventricle: a single-center study” (REC Interv Cardiol. 2024;6:296-304), Table 3 has been modified for clarification. Denominators have been added to explain the percentages. The amended version of Table 3 is:

**Table 3.** Angiographic assessment of collaterals

Catheterization		N = 56
<b>Aortopulmonary collaterals</b>		
Presence	Yes	37/56 (66.1%)
Number	One	9/37 (24.3%)
	Multiple	28/37 (75.7%)
Size	Small	28/37 (75.7%)
	Moderate/large	9/37 (24.3%)
Origin	Descending aorta	23/37 (62.2%)
	Aorta	11/37 (29.7%)
	Left subclavian artery	0/37 (0.0%)
	RIMA and aortic arch	1/37 (2.7%)
	LIMA	1/37 (2.7%)
	Aorta and left subclavian artery	1/37 (2.7%)
Drainage	Left	19/37 (51.4%)
	Right	7/37 (18.9%)
	Both	11/37 (29.7%)

(Continues)

This correction was made on 27 January 2025 in the electronic version of the article, at <https://doi.org/10.24875/RECICE.M24000472>.

Online 27 January 2025.

2604-7322 / © 2025 Sociedad Española de Cardiología. Published by Permanyer Publications. This is an open access journal under the CC BY-NC-ND 4.0 license.

**Table 3.** Angiographic assessment of collaterals (*continued*)

Venovenous collaterals		
Presence	Yes	41/56 (73.2%)
Number	One	7/41 (17%)
	Few (2-3)	3/41 (7.3%)
	Multiple	31/41 (75.6%)
Size*	Small	11/41 (26.8%)
	Moderate/large	31/41 (75.6%)
Origin**	Left innominate vein	35/41 (85.4%)
	Right innominate vein	1/41 (2.4%)
	Subclavian vein	1/41 (2.4%)
	Azygous and hemi-azygous	1/41 (2.4%)
	SVC	1/41 (2.4%)
	Undefined	2/41 (4.8%)
Drainage***	Pericardium	3/41 (7.3%)
	Epicardial	14/41 (34%)
	IVC	9/41 (22%)
	Coronary sinus	7/41 (17%)
	Abdominal vein	2/41 (4.8%)
	Azygous	3/41 (7.3%)
	Left pulmonary	5/41 (12.2%)

IVC, inferior vena cava; LIMA, left internal mammary artery; RIMA, right internal mammary artery; SVC, superior vena cava.

\* One patient had both small and large venovenous collaterals.

\*\* Two patients had undefined origin of venovenous collaterals.

\*\*\* Two patients had different draining sites of venovenous collaterals.

The Ethical considerations section has been expanded to explicitly state that the required consent to publish images had been obtained. The section now reads:

This study was approved by the research ethics committee of the faculty of medicine of Ain Shams University (FMASU MS 507/2022). Verbal and written informed consent (for study participation, tests, and publication—including photographs—) was obtained from participants aged 18 years and older or from the participant's guardian in patients aged less than 18 years after the aim of the study was explained to them. Patient images have been adapted as much as possible to preserve privacy while retaining sufficient information to illustrate research. Our research was carried out in accordance with internationally accepted recommendations for clinical investigation (Declaration of Helsinki of the World Medical Association). Possible sex/gender biases have been considered in the preparation of this article.