

Correction

## Correction: Stewart, E.R.; Thompson, G.R. Treatment of Primary Pulmonary Aspergillosis: An Assessment of the Evidence. *J. Fungi* 2016, 2, 25.

Ethan R. Stewart <sup>1</sup> and George R. Thompson III <sup>1,2,\*</sup>

<sup>1</sup> Department of Internal Medicine, Division of Infectious Diseases, Davis Medical Center, 4150 V Street, Suite G500, Sacramento, CA 95817, USA; ethanstewart@gmail.com

<sup>2</sup> Department of Medical Microbiology and Immunology, University of California, Rm. 3138, Tupper Hall, One Shields Ave, Davis, CA 95616, USA

\* Correspondence: grthompson@ucdavis.edu; Tel.: +1-916-734-3815; Fax: +1-530-752-8692

Academic Editor: William J. Steinbach

Received: 3 November 2016; Accepted: 4 November 2016; Published: 4 November 2016

The authors of the published paper [1] would like to correct Table 1. The sixth row in the second column should have been Amphotericin B Lipid Complex (ABLC). Therefore, Table 1 should read as follows:

**Table 1.** Treatment recommendations for invasive aspergillosis.

| Recommendation | Drug                                | Dosing  | Comments   |
|----------------|-------------------------------------|---|--|
| Primary        | Voriconazole                        | 6 mg/kg IV every 12 h times two then 4 mg/kg IV every 12 h  | Oral therapy at mg/kg dosing or 200–300 mg every 12 h; TDM required              |
| Alternatives   | Liposomal amphotericin B (L-AMB)    | 3–5 mg/kg/day IV  |  |
|                | Isavuconazole                       | 200 mg every 8 h IV or PO times six then 200 mg daily IV or PO  | Need for TDM remains undefined   |
|                | Voriconazole plus Anidulafungin     | Voriconazole as above plus Anidulafungin 200 mg IV daily times one then 100 mg IV daily   | Combination therapy considered in severe disease and with hematologic malignancy |
|                | Amphotericin B Lipid Complex (ABLC) | 5 mg/kg/day IV  |  |
| Secondary      | Caspofungin                         | 70 mg IV daily times one then 50 mg IV daily  | Monotherapy as salvage   |
|                | Posaconazole                        | Oral suspension: 200 mg PO every 8 h, Tablet: 300 mg PO every 12 h times two then 300 mg PO daily, Intravenous: 300 mg IV every 12 h times two then 300 mg IV daily | Caution in use of tablet formulation with acid suppression; TDM required         |
|                | Itraconazole                        | 200 mg PO every 12 h  | TDM required   |

We apologize for any inconvenience caused to readers. The manuscript will be updated and the original will remain available on the article webpage.

**Conflicts of Interest:** The authors declare no conflict of interest.

## Reference

1. Stewart, E.R.; Thompson, G.R. Treatment of Primary Pulmonary Aspergillosis: An Assessment of the Evidence. *J. Fungi* **2016**, *2*, 25. [[CrossRef](#)]



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