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Erratum to: Diastolic dysfunction and mortality in septic patients: a systematic review and meta-analysis

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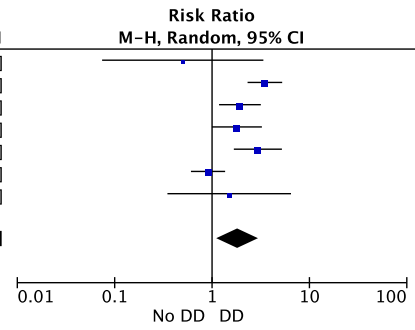
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Incorrect versions of Fig. 2a, b were supplied for publication. The authors regret any inconvenience caused and are pleased to provide the correct figures here.

a

Study or Subgroup	DD		No DD		Weight	Risk Ratio M-H, Random, 95% CI
	Events	Total	Events	Total		
Ethecopar 2008	1	7	8	28	5.0%	0.50 [0.07, 3.37]
Landesberg 2012	88	143	21	119	18.6%	3.49 [2.32, 5.25]
Landesberg 2014	29	53	15	53	17.5%	1.93 [1.18, 3.17]
Mokart 2007	12	18	10	27	16.3%	1.80 [1.00, 3.25]
Moraud 2014	25	33	10	39	16.6%	2.95 [1.67, 5.22]
Pulido 2012	19	39	30	56	18.6%	0.91 [0.61, 1.36]
Sturgess 2010	4	12	2	9	7.4%	1.50 [0.35, 6.46]
Total (95% CI)		305		331	100.0%	1.82 [1.12, 2.97]
Total events	178		96			
Heterogeneity: Tau ² = 0.29; Chi ² = 26.42, df = 6 (P = 0.0002); I ² = 77%						
Test for overall effect: Z = 2.40 (P = 0.02)						

**b**

Study or Subgroup	SD		No SD		Weight	Risk Ratio M-H, Random, 95% CI
	Events	Total	Events	Total		
Ethecopar 2008	3	16	6	19	8.2%	0.59 [0.18, 2.00]
Landesberg 2012	32	61	77	201	27.7%	1.37 [1.02, 1.84]
Landesberg 2014	14	27	30	79	22.9%	1.37 [0.86, 2.16]
Moraud 2014	10	39	16	33	17.9%	0.53 [0.28, 1.00]
Pulido 2012	13	29	47	77	23.4%	0.73 [0.47, 1.14]
Total (95% CI)		172		409	100.0%	0.93 [0.62, 1.39]
Total events	72		176			
Heterogeneity: Tau ² = 0.13; Chi ² = 12.31, df = 4 (P = 0.02); I ² = 68%						
Test for overall effect: Z = 0.34 (P = 0.73)						

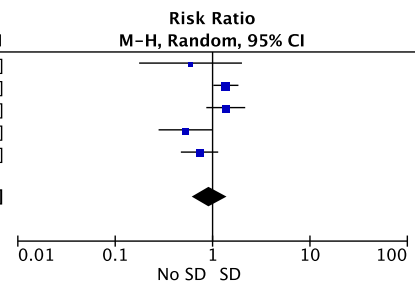


Fig. 2 a Effect of diastolic dysfunction vs no diastolic dysfunction on mortality at longest follow-up in septic patients. **b** Effect of systolic dysfunction vs no systolic dysfunction on mortality at longest follow-up in septic patients