

CORRECTION

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# Correction: End-ischemic hypothermic oxygenated perfusion for extended criteria donors in liver transplantation: a multicenter, randomized controlled trial—HOPEXt

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The original article has been corrected.

Following publication of the original article [1], we have been informed that Table 1 has been misaligned during typesetting.

<sup>†</sup>Jean-Yves Mabrut and Mickaël Lesurtel share the senior author position.

The original article can be found online at <https://doi.org/10.1186/s13063-023-07402-0>.

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**Table 1** Schedule of enrolment, interventions, and assessments in the HOPEExt trial

STAGES	V1 Screening	V2 Inclusion	V3	V4	V5–V11	V12	V13–V16	
<b>Time point</b> Actions	<b>At inscription for LT or at pre LT visit</b>	<b>D0 At hospitaliza- tion for LT</b>	<b>D0 HOPE group only</b>	<b>D0 + 6 h (± 2 h) after LT</b>	<b>D0 + 12 h (± 2 h) after LT</b>	<b>Day 1 to day 7 (± 1 day)</b>	<b>End of hospi- tal stay</b>	<b>M3; M6; M9 and M12 (± 30 days)</b>
<b>Inclusion / non-inclusion criteria</b>	X	X						
<b>Informed consent</b>	X							
<b>Medical history and patient characteristics<sup>1</sup></b>	X							
<b>MELD score</b>	X At inscription	X						
<b>Randomization<sup>2</sup></b>		X						
<b>Clinical examination<sup>3</sup></b>		X				X	X	
<b>Biological analyses<sup>4</sup></b>		X (before LT)		X	X	X	X	X
<b>CHILD–PUGH score</b>		X (before LT)						
<b>Donor characteristics<sup>5</sup></b>		X						
<b>HOPE perfusion parameters<sup>6</sup></b>			X					
<b>Bacteriological and fungal analyses<sup>7</sup></b>		X	X					
<b>Intra-operative data<sup>8</sup></b>		X						
<b>Liver Biopsy<sup>9</sup></b>		X both groups	X					
<b>Machine perfusate sample<sup>10</sup></b>			X					
<b>ICU and hospital stay</b>						X		
<b>Morbidity (Clavien-Dindo Score, CCI)</b>						X	X	At M3 only
<b>Concomitant Medication</b>		X	X	X	X	X	X	
<b>Adverse events</b>		X	X	X	X	X	X	
<b>Abdominal contrast enhanced MRI/MRCP</b>								X At M12 only

<sup>1</sup> patient characteristics: age, gender, height, weight, BMI, blood group, cause of cirrhosis, indication for transplantation, medical history (diabetes mellitus, arterial hypertension, transjugular intrahepatic portosystemic shunt) pretransplant status of residence (home, hospital ward or intensive care unit (ICU))

<sup>2</sup> Randomization will be performed after the harvesting team has macroscopically assessed the graft and confirmed that the graft will be harvested. After checking the inclusion and non-inclusion criteria an online randomization tool will be used. Randomization will be stratified by center and MELD score at the time of transplantation with a cut-off of 30

<sup>3</sup> Clinical examination: vital signs (temperature, blood pressure, heart rate), body weight, height, BMI

<sup>4</sup> Biological analyses: AST, ALT, GGT, Alkaline Phosphatase, bilirubin, factor V, INR, platelets, creatinine, GFR, lactates

At V2 only, a pregnancy test (beta HCG) will be done for women of childbearing age

<sup>5</sup> Donor characteristics: age, gender, height, weight, BMI, blood group, length of stay in intensive care unit, cause of death, occurrence of cardiac arrest, biological test (AST, ALT, natremia)

<sup>6</sup> Parameters measured during HOPE perfusion (only in HOPE group): perfusion pressure, flow, temperature, duration of machine perfusion, perfusate oxygenation (partial pressure O<sub>2</sub>) and CO<sub>2</sub> content (partial pressure CO<sub>2</sub>) at the beginning and at the end of machine perfusion; perfusate AST and ALT, LDH, hyaluronic acid, lactate levels at 30 minutes and at the end of machine perfusion

<sup>7</sup> Bacteriological and fungal samplings will be taken on static storage solution (IGL-1) at the end of the back-table in both groups, and of the perfusion solution at the end of machine perfusion for HOPE group

<sup>8</sup> Intra-operative data: surgical technique of transplantation (piggy-back vs. vena cava resection), length of procedure, transfusion needs (fresh frozen plasma, red blood cell, thrombocyte concentrate), occurrence of post-reperfusion syndrome (decrease of 50% of the median arterial pressure during the 5 minutes after the revascularisation), cold ischemia time, circulatory support at the end of transplantation (noradrenaline (mg/h))

<sup>9</sup> A biopsy will be taken on the back-table before machine perfusion in both study groups, immediately after liver machine perfusion in the HOPE group, and after reperfusion of the liver in both groups

<sup>10</sup> 3ml sample will be taken from machine perfusion solution during HOPE perfusion (only in HOPE group), at 30 minutes and at the end of machine perfusion

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## Reference

- Pradat Pierre, et al. End-ischemic hypothermic oxygenated perfusion for extended criteria donors in liver transplantation: a multicenter, randomized controlled trial—HOPEExt. *BMC Trials*. 2023;24:379. <https://doi.org/10.1186/s13063-023-07402-0>.