Erratum to: Treatment of Non-Tuberculous Mycobacterial Lung Disease

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The original version of this article unfortunately contained a mistake. The alignment of entries in Tables 5, 6, and 7, was incorrect.

The corrected Tables 5, 6, and 7 is given below.

Table 5. Treatment of *Mycobacterium szulgai*

Regimen	Drug	Dose and schedule	Known adverse effects
No proven regimen. Daily therapy for >12 months of negative cultures.	Clarithromycin <i>and</i>	1000 mg QD	See above
	Rifampin <i>and</i>	10 mg/kg QD (max 600 mg)	See above
	Ethambutol <i>and</i>	15 mg/kg QD (max 2.4 gram)	See above
	± Ciprofloxacin	250–750 mg BID	See moxifloxacin above
Key References: [72, 73]			

Table 6. Treatment of *Mycobacterium xenopi*

Regimen	Drug	Dose and schedule	Known adverse effects
No proven regimen. Daily therapy for >12 months of negative cultures.	Clarithromycin <i>and</i>	1000 mg QD	See above
	Rifampin <i>and</i>	10 mg/kg QD (max 600 mg)	See above
	Ethambutol	15 mg/kg QD (max 2.4 grams)	See above
	± Moxifloxacin	400 mg QD	See above
	± amikacin ^a	10–25 mg/kg IV or IM TIW for the first 2–3 months	See above
Key References: [26, 45••]			
^a Based on an <i>in vivo</i> murine study [83••]			

Table 7. Treatment of *Mycobacterium simiae*

Regimen	Drug	Dose and schedule	Known adverse effects
No proven regimen. Relationship of <i>in vitro</i> susceptibility and clinical outcome is not clear.	Clarithromycin <i>and</i>	1000 mg QD	See above
	Rifampin <i>and</i>	10 mg/kg QD (max 600 mg)	See above
	Ethambutol	15 mg/kg QD (max 2.4 grams)	See above
	± Moxifloxacin	400 mg QD	See above
	± Trimethoprim-sulfamethoxazole	One double-strength tablet BID	Hypersensitivity, rash, myelosuppression, interstitial nephritis, increased liver function tests
Key References: [29]			