CORRECTION

Correction to: The Aetiopathogenesis of Late Inflammatory Reactions (LIRs) After Soft Tissue Filler Use: A Systematic Review of the Literature

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The authors note that an incorrect version of their article was published. Please see below updated text for the section “Recommendations for Injection Techniques and Treatment Options” and correct Fig. 4.

Based on this review we propose the following treatment algorithm for LIRs (Fig. 4). As stated above, culture proven infections are common after filler injection. Therefore, when clinical features of inflammation such as oedema, heat, erythema, tenderness or pain are present, the first choice should be conservative treatment with oral antibiotics. We recommend the use of tetracyclines (such as doxycycline or minocycline (100–200 mg daily) or clarithromycin because of their dual action as antimicrobial and immune modulatory medication. In some cases, non-steroidal anti-inflammatory drugs (NSAIDs) or oral corticosteroids can be added. When conservative treatment fails, it may be necessary to remove any residual filler material. Treatment option may be hyaluronidase (enzymes that are able to degrade hyaluronic acid) or intralesional laser treatment (ILT; removing the

Fig. 4 Algorithm for treatment of LIRs

material in a microinvasive manner). When the aforementioned treatment options fail, or are not applicable, surgical treatment may be required.

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