Correction to: Antimicrobial-coated sutures to decrease surgical site infections: a systematic review and meta-analysis

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In the original version of this article, reference citations found in Tables 2, 3, and 4 contain errors in linking. The correct tables are reproduced below.

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Table 2 Characteristics of included studies

Study	Year	Type of study	Type of procedures	Wound classification	Sample size (study/control)	Interventions	Follow-up	SSI rates (study versus control)
Baracs et al. [32]	2011	RCT	Colorectal surgery	Clean-contaminated	385 (188/197)	PP versus P	30 days	12% versus 12% ($p > 0.05$)
Diener et al. [18]	2014	RCT	Midline abdominal laparotomy	Mixed	1185 (587/598)	PP versus P	30 days	14.8% versus 16.1% (OR: 0.91; 95% CI: 0.66–1.25; $p = 0.64$)
Justinger et al. [22]	2013	RCT	Colorectal surgery	Mixed	856 (485/371)	PP versus P	2 weeks	6.4% versus 11.3% (OR: 0.501; 95% CI: 0.3–0.9; $p < 0.05$)
Chen et al. [31]	2011	Retrospective study	Head or neck cancer surgery	Clean	241 (112/129)	VP versus V	NR	14.9% versus 14.7% ($p > 0.05$)
Ford et al. [34]	2005	RCT	Mixed types of paediatric surgery	Mixed	147 (98/49)	VP versus V	80 days	3.1% versus 0%
Galal et al. [30]	2011	RCT	Mixed types of surgery	Mixed	450 (230/220)	VP versus V	30 days	7% versus 15% ($p = 0.011$)
Hoshino et al. [23]	2013	Retrospective study	Digestive tract surgery	Mixed	1078 (467/611)	VP versus V	30 days	6.6% versus 12.2% ($p = 0.002$)
Isik et al. [27]	2012	RCT	Cardiac surgery	Clean	510 (170/340)	VP versus V	30 days	2.4% versus 3.5% ($p = 0.0596$)
Mingmalairak et al. [33]	2009	RCT	Appendectomy	Clean-contaminated	100 (50/50)	VP versus V	12 m	10% versus 8% ($p = 0.727$)
Nakamura et al. [21]	2013	RCT	Colorectal surgery	Mixed	410 (206/204)	VP versus V	30 days	4.3% versus 9.3% ($p = 0.047$)
Okada et al. [17]	2014	Prospective study	Pancreaticoduodenectomy	Clean-contaminated	198 (88/110)	VP versus V	30 days	33% versus 47%
Rasic et al. [29]	2011	RCT	Colorectal surgery	Clean-contaminated	184 (91/93)	VP versus V	NR	4.3% versus 13.2%
Seim et al. [25]	2011	RCT	Coronary artery bypass grafting	Clean	323 (160/163)	VP versus V	4 weeks	10.0% versus 10.4% ($p > 0.05$)
Ueno et al. [19]	2013	Retrospective study	Spinal surgery	Mixed	405 (200/205)	VP versus V	NR	0.5% versus 3.9% ($p = 0.020$)
Laas et al. [26]	2012	Prospective study	Mastectomy	Clean	190 (98/92)	VP/MP versus V/M	30 days	6% versus 11% ($p = 0.2$)
Thimour-Bergstrom et al. [20]	2013	RCT	Coronary artery bypass grafting	Clean	374 (184/190)	VP/MP versus V/M	60 days	12.5% versus 20.0% (RR: 0.63; 95% CI: 0.39–1.00; $p = 0.0497$)
Turtainen et al. [24]	2012	RCT	Peripheral vascular surgery	Clean	276 (139/137)	VP/MP versus V/M	1 m	22.3% versus 21.9% (OR: 1.10; 95% CI: 0.61–2.01; $p = 0.75$)
Williams et al. [28]	2011	RCT	Breast cancer surgery	Clean	146 (73/73)	VP/MP versus V/M	6 weeks	12.3% versus 15.1% ($p > 0.05$)

RCT, randomized controlled trial; OR: odds ratio; CI: confidence interval; RR: relative risk; NR, not reported; PP, PDS Plus; P, PDS II; VP, Vicryl Plus; V, Vicryl; MP, Monocryl Plus; M, Monocryl (all from Ethicon, Johnson & Johnson, Somerville, NJ, USA)

Table 3 Methodological quality and risk of bias in included RCTs

Study	Sequence generation	Allocation concealment	Participants blinded	Care providers blinded	Outcome assessors blinded	Incomplete outcome data	Selective outcome reporting	Other sources of bias
Baracs et al. [32]	Low risk	Low risk	Low risk	Low risk	Low risk	High risk	Low risk	–
Diener et al. [18]	Low risk	Low risk	Low risk	Low risk	Low risk	High risk	Low risk	Industry sponsorship
Ford et al. [34]	Unclear	Unclear	High risk	High risk	High risk	Low risk	Low risk	Industry sponsorship
Galal et al. [30]	Unclear	Unclear	Low risk	Low risk	Unclear	Low risk	Low risk	–
Isik et al. [27]	Low risk	Unclear	Low risk	Low risk	Low risk	Low risk	Low risk	–
Justinger et al. [22]	Low risk	Low risk	Low risk	Low risk	Unclear	High risk	Low risk	Industry sponsorship
Mingmalairak et al. [33]	Unclear	Low risk	Low risk	High risk	Low risk	Low risk	Low risk	–
Nakamura et al. [21]	Low risk	Low risk	Unclear	Unclear	Unclear	Low risk	Low risk	–
Rasic et al. [29]	Unclear	Low risk	Low risk	High risk	Unclear	Low risk	Low risk	–
Seim et al. [25]	Low risk	Low risk	Low risk	Low risk	Low risk	High risk	Low risk	–
Thimour-Bergstrom et al. [20]	Low risk	Low risk	Low risk	Low risk	Low risk	High risk	Low risk	Industry sponsorship
Turtiainen et al. [24]	Low risk	Low risk	Low risk	Low risk	Low risk	High risk	Low risk	–
Williams et al. [28]	Low risk	Low risk	Low risk	Low risk	Low risk	High risk	Low risk	Industry sponsorship

Table 4 Methodological quality and risk of bias in included OBSs

Study	Selection		Comparability		Outcome		Total
	Representativeness of the exposed cohort	Selection of the non-exposed cohort	Ascertainment of exposure	Demonstration that outcomes of interest are not present at start of study	Assessment of outcome	Adequacy of follow-up of cohorts	
Chen et al. [31]	*	*	*	*	No description	No description	6*
Hoshino et al. [23]	*	*	*	*	No description	*	6*
Laas et al. [26]	*	*	*	*	No description	No description	6*
Okada et al. [17]	*	*	*	*	*	*	6*
Ueno et al. [19]	*	*	*	*	No description	No description	6*