

In article Oral N-Acetyl cysteine versus rectal indomethacin for prevention of post ERCP pancreatitis: a multicenter multinational randomized controlled trial, DOI: doi.org/10.1590/S0004-2803.202204000-90, published in journal Arq Gastroenterol. 2022;59(4): 508-12, in page 510, table 4:

Which was read

TABLE 4. Relative prevalence of PEP in study groups based on severity.

Mild PEP	2	15	3	10	30
	(22.2%)	(62.5%)	(33.3%)	(52.6%)	(49.18%)
Moderate	7	6	6	7	26
PEP	(77.7%)	(25%)	(66.6%)	(36.8%)	(42.62%)
Severe PEP	0	3	0	2	5
	(0%)	(12.5%)	(0%)	(10.5%)	(8.19%)
Total	9	24	9	19	61

PEP: post ERCP pancreatitis; ERCP: endoscopic retrograde cholangiopancreatography.

Read

TABLE 4. Relative prevalence of PEP in study groups based on severity.

Severity	Group A (NAC)	Group B (supp indometacin)	Group C (NAC + supp indometacin)	Group D (placebo)	Total
Mild PEP	2 (22.2%)	15 (62.5%)	3 (33.3%)	10 (52.6%)	30 (49.18%)
Moderate PEP	7 (77.7%)	6 (25%)	6 (66.6%)	7 (36.8%)	26 (42.62%)
Severe PEP	0 (0%)	3 (12.5%)	0 (0%)	2 (10.5%)	5 (8.19%)
Total	9	24	9	19	61

PEP: post ERCP pancreatitis; ERCP: endoscopic retrograde cholangiopancreatography.