

CORRECTION

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Correction to: Rapid development of HIV elite control in a patient with acute infection



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After publication of the original article [1], we were notified that a column needed to be removed from Table 1.

The correct version can be found below:

Furthermore, the words “Hiv specific antibody levels and” should be deleted from the ‘Case presentation’ section in the Abstract.

The original article has been corrected.

The publisher apologies for the inconvenience.

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1. Morley, et al. *BMC Infect Dis.* 2019;19:875. <https://doi.org/10.1186/s12879-019-4374-8>.

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Table 1 Results of HIV molecular testing, Antigen/Antibody screening assay, and CD4 count from time first presentation (June 2014) to initiation of ARV therapy

Time	Viral Load (RNA copies/ml)		Forth Generation Antigen/Antibody HIV Test (s/co –relative quantity of HIV Ab)			Confirmatory Test INNO-LIA	CD4+ T Cells/uL (%)
	Viral Load	SCA	ARCHITECT (S/Co)	VIDAS (S/Co)	GS		
Jun 2014	71550 ^a	–	7 ^b	NEG	NEG	–	–
Oct 2014	< 200	–	11.1 ^c	13.72 ^c	–	gp41 (3+), p31 (1+), p24 (3+), p17 (1+) ^c	–
Nov 2014	< 40	–	–	–	–	–	616 (45%)
Dec 2014	–	–	–	–	–	–	–
Oct 2015	< 40	–	–	–	–	–	459 (46%)
Apr 2016	< 40	–	–	–	–	–	558 (40%)
Sep 2016	–	0.84 ^d	–	–	–	–	–
Antiretroviral therapy commenced September 2016 ^d							
Oct 16	–	–	–	–	–	–	585 (47%)

Fourth Generation HIV Antigen/Antibody test: ARCHITECT® Abbott; VIDAS® BioMerieux; GS = GeneScreen® Bio-Rad, INNO-LIA, Fujirebio®

SCA Single copy assay, S/Co Signal/cutoff

^a Retrospective molecular test on stored sample from June 2014

^b Read as equivocal value at time of testing

^c Positive test

^d ARV commenced on clinical grounds-patient presented with furunculosis