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Author Correction: Enoxaparin augments alpha-1-antitrypsin inhibition of TMPRSS2, a promising drug combination against COVID-19

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The original version of this Article contained an error in the x-axis labels of Figure 5B, C, where in Figure 5B, the spacing of "-" and "+" indicators was incorrect and in Figure 5C, the "-" and "+" indicators were missing.

The original Figure 5 and accompanying legend appear below.

The original Article has been corrected.

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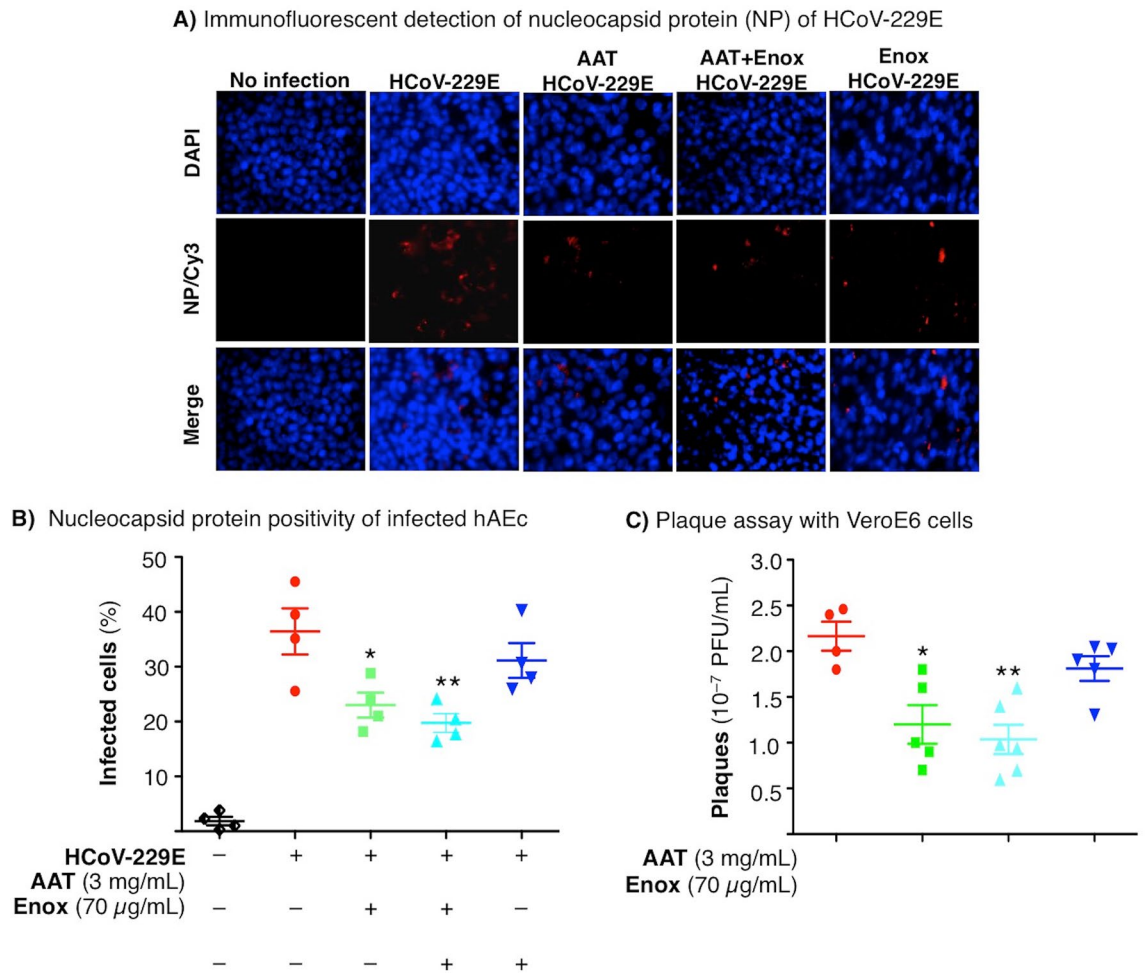



Figure 5. Effects of AAT, enoxaparin, or both on infection of hAEC with HCoV-229E. **(A)** Immunofluorescence analysis of HCoV-229E-infected hAEC grown in air–liquid interface. The hAEC were pre-treated with AAT (3 mg/mL), enoxaparin (70 µg/mL), or both for 1 h, and then infected with HCoV-229E at a multiplicity-of-infection of 1 hAEC:0.01 HCoV-229E. Three days after infection, the cells were fluorescently immunostained for the nucleocapsid protein of HCoV-229E. The nuclei were stained with DAPI. Fluorescent images were taken at a magnification of 400X by confocal microscopy (Carl Zeiss Axiovert 200 M). **(B)** Percentage of HCoV-229E-infected hAEC with >700 total cells counted for each condition. Data shown are the mean \pm SEM of three independent experiments. * $p < 0.05$, ** $p < 0.01$ compared to HCoV-229E infection alone. **(C)** Plaque assay. The apical chamber medium of HCoV-229E-infected hAEC were used to infect VeroE6 cells and incubated for 4–5 days. Infection of the hAEC were done in triplicates and subsequent infection of VeroE6 cells with the supernatant of HCoV-229E-infected hAEC were each done in triplicates. Thus, the data shown are the triplicate means \pm SEM of the original triplicate experiments. * $p < 0.05$ and ** $p < 0.01$ compared to cells infected with HCoV-229E only without treatment. hAEC = primary human airway epithelial cells, HCoV-229E = human coronavirus 229E.

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