

CORRECTION

Open Access



Correction: Pro-inflammatory diet and depressive symptoms in the healthcare setting

Rachel Belliveau¹, Sydney Horton², Courtney Hereford³, Lance Ridpath⁴, Robert Foster⁵ and Emily Boothe^{6*}

Correction: *BMC Psychiatry* 22, 125 (2022)
<https://doi.org/10.1186/s12888-022-03771-z>

Following publication of the original article [1], the authors identified an error in Table 3. The correct table is given below.

The original article [1] has been corrected.

Author details

¹University of North Carolina Health Care, 2201 S Sterling St, Morganton, NC, USA. ²University of Texas Health Science Center at Tyler, 11937 US-271, Tyler, TX, USA. ³Center for Rural and Community Health, West Virginia School of Osteopathic Medicine, 400 N Lee St, Lewisburg, WV, USA. ⁴Institutional Research Assessment Educational Development, West Virginia School of Osteopathic Medicine, 400 N Lee St, Lewisburg, WV, USA. ⁵West Virginia School of Osteopathic Medicine, 400 N Lee St, Lewisburg, WV, USA. ⁶Department of Psychiatry, Princeton Community Hospital, 122 12th St, Princeton, WV, USA.

Published online: 30 December 2022

Reference

1. Belliveau R, et al. Pro-inflammatory diet and depressive symptoms in the healthcare setting. *BMC Psychiatry*. 2022;22:125. <https://doi.org/10.1186/s12888-022-03771-z>.

The original article can be found online at <https://doi.org/10.1186/s12888-022-03771-z>.

*Correspondence: emily.boothe@pchonline.org

⁶ Department of Psychiatry, Princeton Community Hospital, 122 12th St, Princeton, WV, USA

Full list of author information is available at the end of the article



© The Author(s) 2022. **Open Access** This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit <http://creativecommons.org/licenses/by/4.0/>. The Creative Commons Public Domain Dedication waiver (<http://creativecommons.org/publicdomain/zero/1.0/>) applies to the data made available in this article, unless otherwise stated in a credit line to the data.

Table 3 EDII score compared to PHQ-9 score. Low EDII score correlates to a lower PHQ-9 score; high EDII score correlates to a higher PHQ-9 score

EDII Score	PHQ-9 Score		
	N	Mean	SD
<i>Low (-12 to -2)</i>	166	5.83	5.42
<i>Moderate (-1 to +1)</i>	306	6.60	5.50
<i>High (+2 to +10)</i>	159	8.45	5.78

Key: *N* Population, *SD* Standard deviation