ERRATUM

Concerning the article:
Ross D. Pollock; Caroline J. Jolley; Nadia Abid; John H. Couper; Luis Estrada-Petrocelli; Peter D. Hodkinson; Steffen Leonhardt; Snapper Magor-Elliott; Tobias Menden; Gerrard Rafferty; Graham Richmond; Peter A. Robbins; Grant A. D. Ritchie; Mitchell J. Segal; Alec T. Stevenson; Henry D. Tank; Thomas G. Smith. ***Pulmonary effects of sustained periods of high-G acceleration relevant to suborbital spaceflight.*** **Aerosp Med Hum Perform. 2021; 92(8):633–641.**

In this article, **Figures 1 and 3** should have been printed in color. They were inadvertently printed in black and white. We are publishing the color figure herein. We apologize for this error and the inconvenience it has caused. The corrected article is available online at: https://www.ingentaconnect.com/content/asma/amhp.

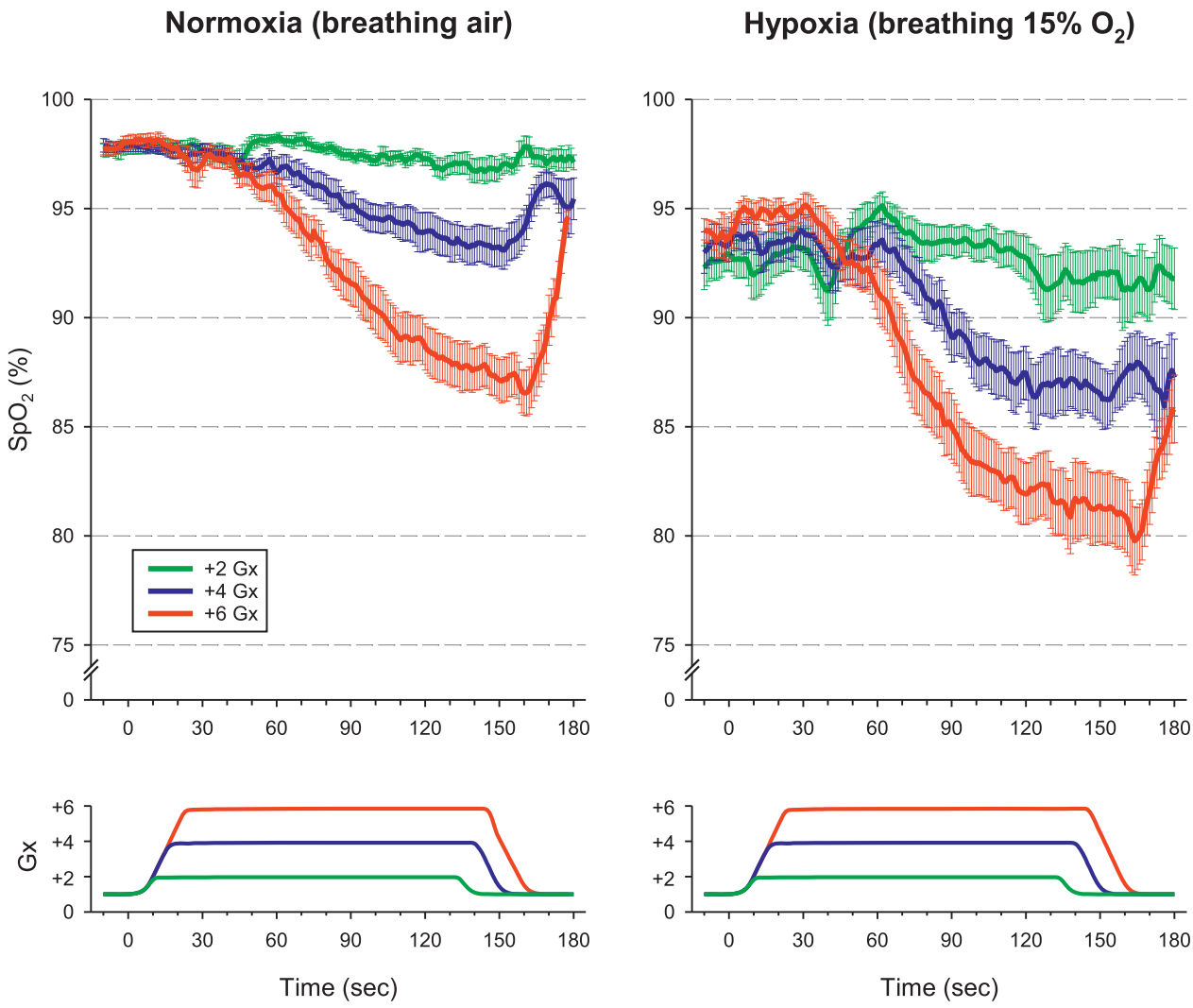

Fig. 1. Arterial oxygen saturation during +Gx acceleration Upper panels show arterial oxygen saturation (S_pO_2) and lower panels show applied acceleration (Gx). Left panels show measurements breathing air and right panels show measurements breathing 15% oxygen to simulate a cabin pressure altitude of 8000 ft (2438 m). Data are mean ± SEM.

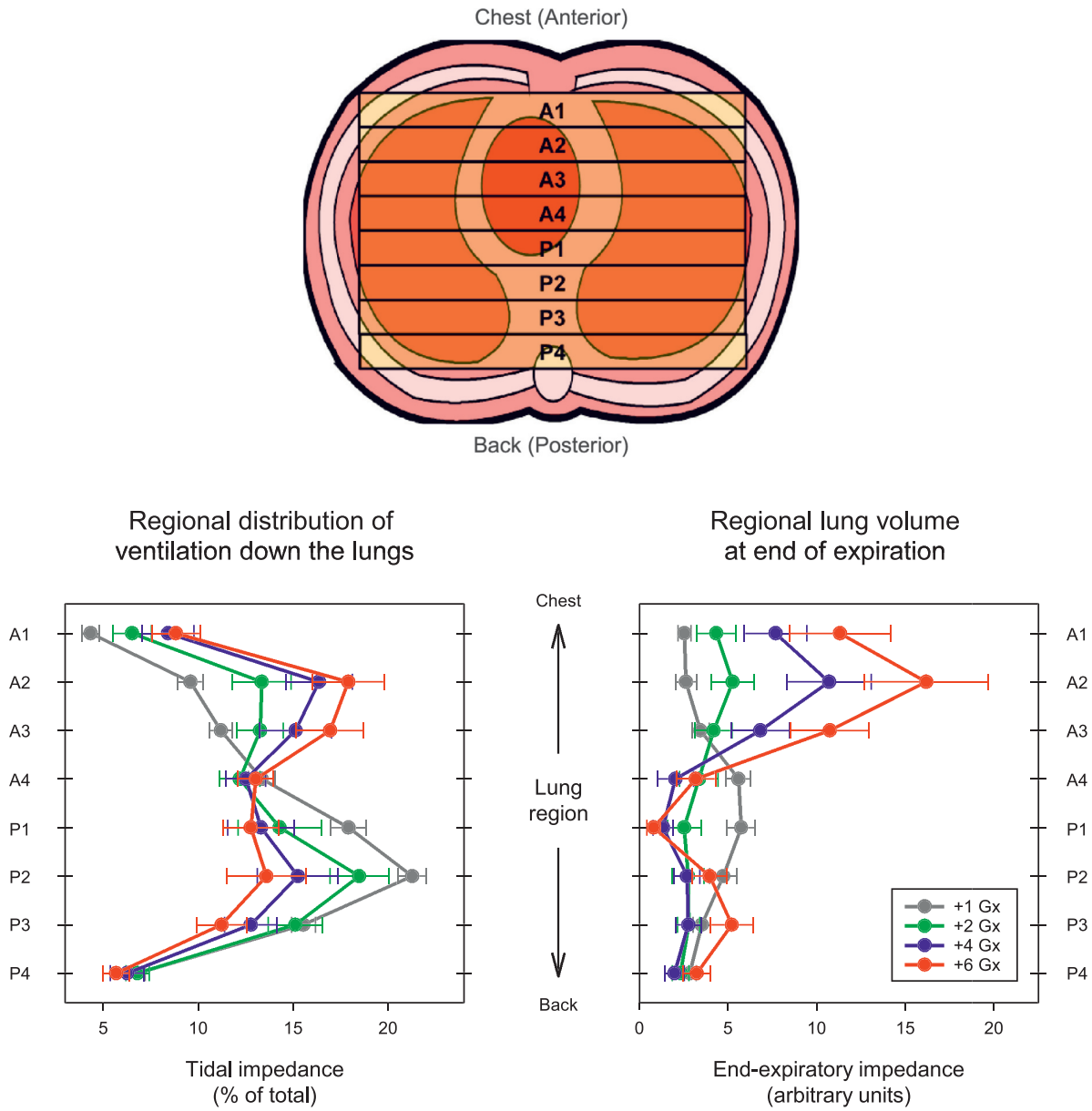

Fig. 3. Regional distribution of ventilation in the lungs during +Gx acceleration. Electrical impedance was averaged in eight regions of interest in the lung defined as anterior (A1–A4) and posterior (P1–P4) moving from chest to back (illustrated in upper panel). Lower left panel shows the regional distribution in tidal ventilation derived from tidal impedance expressed as a percentage of global impedance. Lower right panel shows the regional lung volume at the end of expiration derived from end-expiratory impedance. Data are mean ± SEM.