In the case report by Sónia Barrosa, Joana Roseira, Paulo Caldeira, Ana Margarid Vaz, Horácio Guerreiro, Oscar Condon et al. entitled “Rectal Perforation by a Balloonspace – A Rare Cause of Rectal Perforation Addressed Endoscopically” [GE Port J Gastroenterol., DOI: 10.1159/000511647] six corrections are necessary.

The first correction is on page 1, 2 and 3. In the published version, the name of the last author reads: “Codon.” The correct version should read: “Condon.”

The second correction is on the page 2, “Introduction,” line 34. The published version reads: “Few and rare complications have been documented in addition to perianal discomfort during placement [7].” The reference is incorrect, and the sentence and reference should be disregarded.

The third correction is on page 2, “Case Presentation,” line 5. The published version reads: “In order to minimize rectal irradiation, an ultrasound-guided balloon spacer (BioProtect®) was implanted using blunt dissection.” The correct version should read: “In order to minimize rectal irradiation, an ultrasound-guided balloon spacer (BioProtect®) was implanted using needle dissection, this technique is no longer used to reduce risk of rectal injury. The hydrodissection is now carried out using a beveled tip dilator implantation technique with reduced risk of perforation of the rectal wall.”

The fourth correction is on page 2, “Discussion/Conclusion,” line 7. The published version reads: “In our case report, an expert radiologist performed the balloon spacer placement manoeuvres without detectable immediate complications.” The correct version should read: “In our case report, an expert radiation oncologist performed the balloon spacer placement manoeuvres without detectable immediate complications.”

The fifth correction is on page 3, “Discussion/Conclusion,” lines 7–8. The published version reads: “Schörghofer et al. [9] stated that the balloons’ rigid structure and size may make them more prone to cause rectal lesions.” The correct version should read: “Schörghofer et al. [9] stated that the most likely cause of rectum perforations was an unprecise placement of the needle in the retroprostatic space behind the Denovillier fascia prior to hydrodissection.”