



Corrigendum

Corrigendum to “Examination of scenarios introducing rubella vaccine in the Democratic Republic of the Congo” [Vaccine: X 9 (2021) 100127]



Alvan Cheng<sup>a,1</sup>, Kurt Frey<sup>b,\*,1</sup>, Guillaume Ngoie Mwamba<sup>c</sup>, Kevin A. McCarthy<sup>b</sup>, Nicole A. Hoff<sup>a</sup>, Anne W. Rimoin<sup>a</sup>

<sup>a</sup> Department of Epidemiology, University of California, Los Angeles, CA, USA

<sup>b</sup> Institute for Disease Modeling, Bill & Melinda Gates Foundation, Seattle, WA, USA

<sup>c</sup> VillageReach, Ngaliema, Kinshasa, The Democratic Republic of the Congo

The authors regret age-specific fertility rates were incorrectly applied when determining burden of congenital rubella syndrome (CRS). Annual fertility rates, averaged over 3 years, were used as rate-per-3-years. Estimated CRS burden in all scenarios should be 3 times greater than indicated.

Corrected scales for the x-axis in Figs. 3 and 4 should be 0–6 (instead of 0–2 as depicted). Corrected scale for the y-axis in Fig. 5a should be 0–3 (instead of 0–1 as depicted), and the corrected scale for the x-axis in Fig. 5b should be 0–12 (instead of 0–4 as depicted).

Fig. 3:

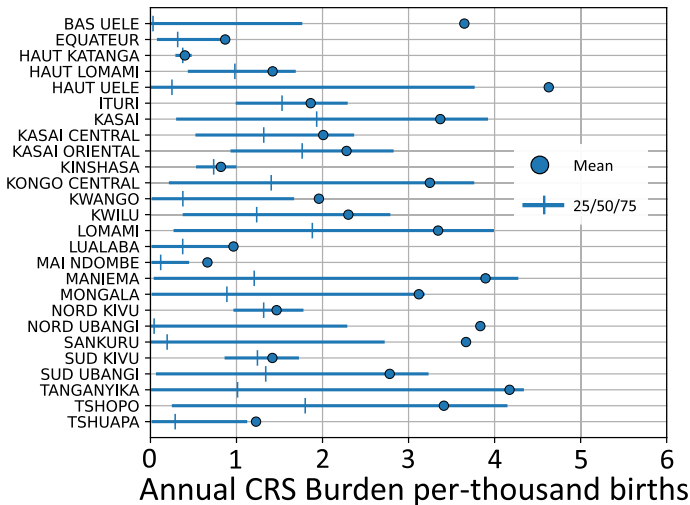
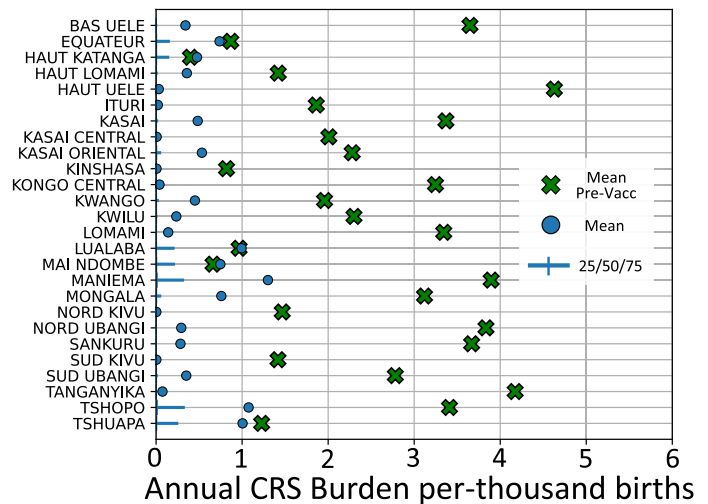


Fig. 4:



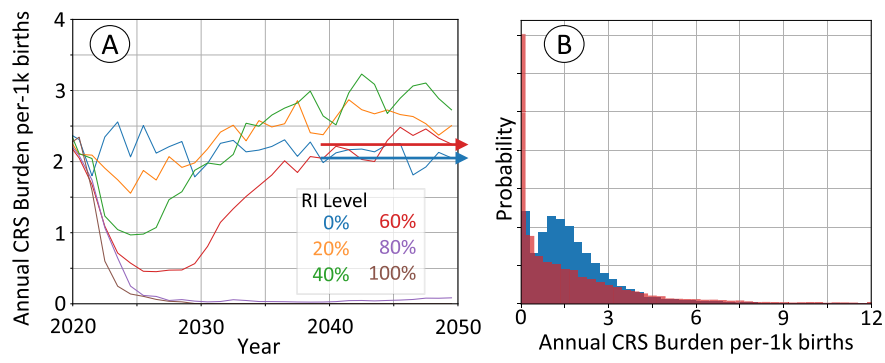
DOI of original article: <https://doi.org/10.1016/j.jvax.2021.100127>

\* Corresponding author.

E-mail address: [kfrey@idmod.org](mailto:kfrey@idmod.org) (K. Frey).

<sup>1</sup> Authors contributed equally.

Fig. 5:



The authors would like to apologise for any inconvenience caused.