

## Erratum

# Erratum to “Readiness of Sub-Saharan Africa Healthcare Systems for the New Pandemic, Diabetes: A Systematic Review”

**Bernardo Nuche-Berenguer** <sup>1</sup> and **Linda E. Kupfer** <sup>2</sup>

<sup>1</sup>National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health, Bethesda, MD 20892-1804, USA

<sup>2</sup>Fogarty International Center, National Institutes of Health, Bethesda, MD 20814, USA

Correspondence should be addressed to Linda E. Kupfer; [kupferl@mail.nih.gov](mailto:kupferl@mail.nih.gov)

Received 8 May 2018; Accepted 10 June 2018; Published 8 July 2018

Copyright © 2018 Bernardo Nuche-Berenguer and Linda E. Kupfer. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

In the article titled “Readiness of Sub-Saharan Africa Healthcare Systems for the New Pandemic, Diabetes: A Systematic Review” [1], the format of Table 1 was unclear. The updated table is shown below.

TABLE 1: Examples of interventions to improve patient adherence to diabetes treatment in SSA.

Country	Summary of intervention	Outcomes
Mozambique [42] Rwanda [50]	Improvement of care through establishment of partnerships and systematic care	Increased information about diabetes and access to care for patients
Cameroon [27, 66] Kenya [33]	Integration of diabetes care into primary care facilities	Reduced transportation barriers and improved patient retention rates
Kenya [52] DRC [68]	Cell phone-based home glucose monitoring programs	The clinical outcomes have not been evaluated yet
Kenya [34] Nigeria [69]	Establishment of home-based screening for diabetes	No improvement in clinical outcomes
Kenya [35] Cameroon [70]	Introduction of self-monitoring blood glucose programs	No improvement in clinical outcomes
South Africa [67]	Establishing of mobile testing units	Improvement in linkage to care
Ghana [71]	Setting off electronic reminders on risk management for diabetic patients	Increased adherence to treatment and reducing of FBG
Cameroon [72, 73] Kenya [36, 44]	Different approaches to establish peer support for diabetes patients	Increased adherence to treatment and improvement in clinical outcomes

## References

- [1] B. Nuche-Berenguer and L. E. Kupfer, "Readiness of sub-Saharan Africa healthcare systems for the new pandemic, diabetes: a systematic review," *Journal of Diabetes Research*, vol. 2018, Article ID 9262395, 12 pages, 2018.