

CORRIGENDUM

Correlation Between Postpartum Myometrial Elasticity and Obstetric Complications in Pregnant Women with Gestational Diabetes Mellitus [Corrigendum]

Jin J, Xia H, Su Y, et al. J Multidiscip Healthc. 2023;16:4139-4147.

The authors wish to correct Figure 1 on page 4143 and Figure 2 on page 4144 after it came to their attention an error had been made during the process of composing images.

The corrected Figure 1 is shown below:

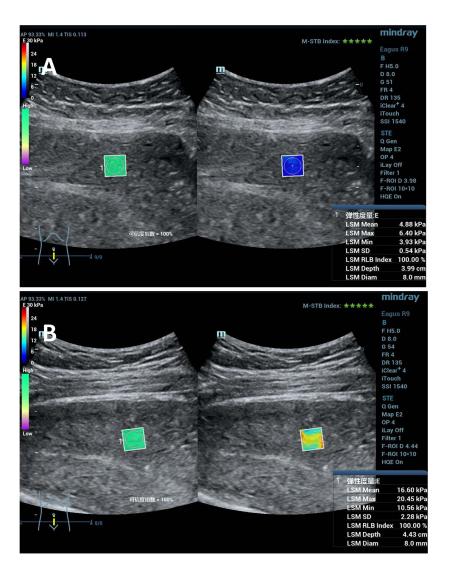
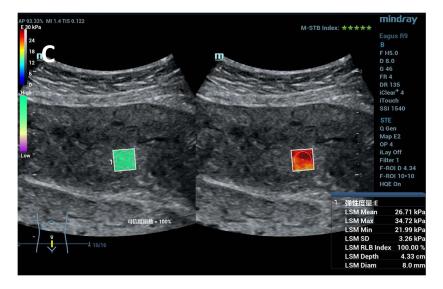


Figure I Continued.



 $\textbf{Figure I} \ \ \text{SWE images of postpartum anterior uterine walls}.$

Notes: (A). The SWV of 4.88kPa in the postpartum anterior uterine wall for normal pregnant woman with the placenta not located on the anterior wall during pregnancy. (B). The SWV of 16.60kPa in the postpartum anterior uterine wall for normal pregnant woman with the placenta located on the anterior wall during pregnancy. (C). The SWV of 26.71kPa in the postpartum anterior uterine wall for pregnant woman complicated by diabetes mellitus with the placenta located on the anterior wall during pregnancy.

The corrected Figure 2 is shown below:

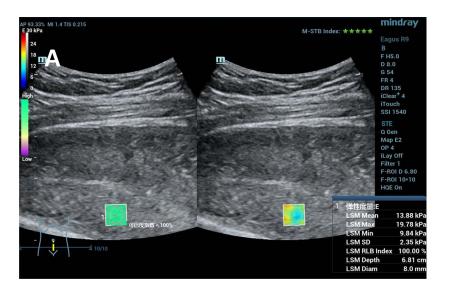
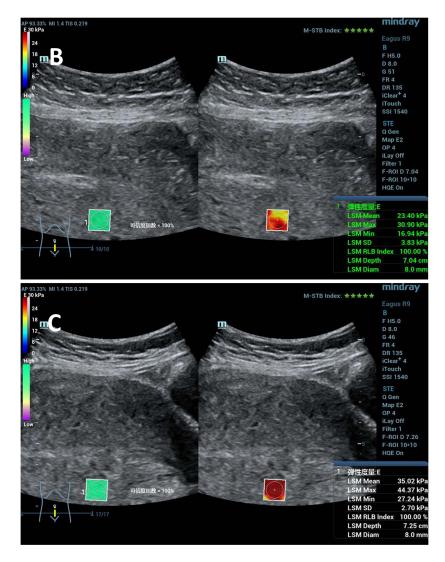


Figure 2 Continued.

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 $\textbf{Figure 2} \ \mathsf{SWE} \ \mathsf{images} \ \mathsf{of} \ \mathsf{postpartum} \ \mathsf{posterior} \ \mathsf{uterine} \ \mathsf{walls}.$

Notes: (**A**) The SWV of 13.88kPa in the postpartum posterior uterine wall for normal pregnant woman with the placenta not located on the posterior wall during pregnancy. (**B**) The SWV of 23.40kPa in the postpartum posterior uterine wall for normal pregnant woman with the placenta located on the posterior wall during pregnancy. (**C**) The SWV of 35.02kPa in the postpartum posterior uterine wall for pregnant woman complicated by diabetes mellitus with the placenta located on the posterior wall during pregnancy.

The authors apologize for any inconvenience caused by these errors and for any confusion that may have arisen as a result. They would like to assure the readers that these corrections do not affect the results or conclusions of the paper.

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