Erratum

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

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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.