frontiers | Frontiers in Endocrinology

TYPE Correction
PUBLISHED 23 November 2022
DOI 10.3389/fendo.2022.1054322

OPEN ACCESS

APPROVED BY
Frontiers Editorial Office,
Frontiers Media SA, Switzerland

*CORRESPONDENCE
Hua Chen
chuadr@aliyun.com
Shasha Mei
15502124912@163.com

†These authors have contributed equally to this work and share first authorship

SPECIALTY SECTION
This article was submitted to Clinical Diabetes, a section of the journal Frontiers in Endocrinology

RECEIVED 26 September 2022
ACCEPTED 08 November 2022
PUBLISHED 23 November 2022

CITATION
Dai J, Zhou Y, Mei S and Chen H (2022) Corrigendum: Application of the distally based sural neurocutaneous flaps in the management of foot and ankle defects in patients with diabetic foot. *Front. Endocrinol.* 13:1054322. doi: 10.3389/fendo.2022.1054322

Corrigendum: Application of the distally based sural neurocutaneous flaps in the management of foot and ankle defects in patients with diabetic foot

Jiezhi Dai[1†], Yu Zhou[2†], Shasha Mei[3*] and Hua Chen[1*]

[1]Department of Orthopedic Surgery, Shanghai Jiao Tong University Affiliated Sixth People's Hospital, Shanghai, China, [2]Department of Orthopedic Surgery, Civil Aviation Hospital of Shanghai, Shanghai, China, [3]Department of Anesthesiology, Shanghai Jiao Tong University Affiliated Sixth People's Hospital, Shanghai, China

KEYWORDS

diabetic foot, diabetic wound defect, distally based sural flap, wound healing, foot and ankle reconstruction

A Corrigendum on

Application of the distally based sural neurocutaneous flaps in the management of foot and ankle defects in patients with diabetic foot.

by Dai J, Zhou Y, Mei S and Chen H (2022) *Front. Endocrinol.* 13:1009714. doi: 10.3389/fendo.2022.1009714

In the published article, there was an error in Figure 1 as published. As the authors were careless in picture editing, they have amended the figure to provide improved clarity. The corrected Figure 1 and its caption "Case 1: Te distally based sural neurocutaneous flaps for reconstruction of the heel soft tissue defect. **(A)** Diabetic wound at the heel. **(B)** Harvest of the distally based sural neurocutaneous flap. **(C)** The defect was reconstructed with a flap, and the donor site was covered with skin graft. **(D)** The flap and the donor site were completely healed at follow-up" appear below.

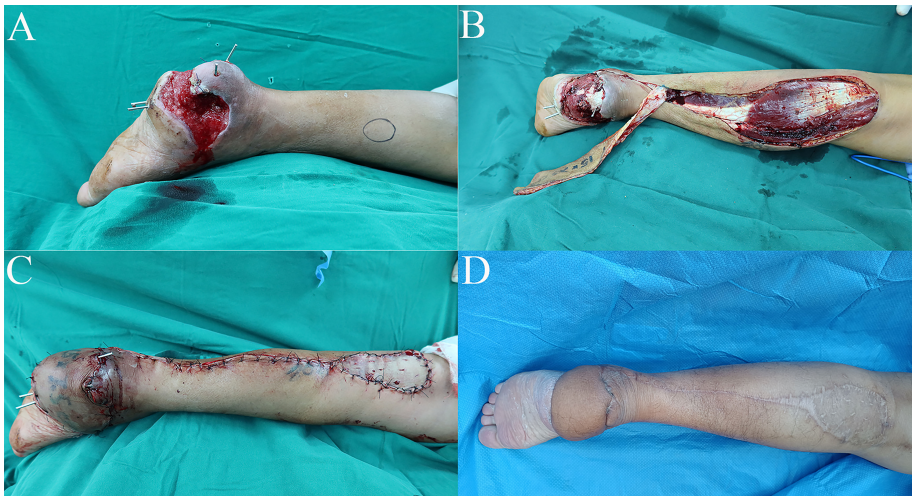

FIGURE 1
Case 1: Te distally based sural neurocutaneous flaps for reconstruction of the heel soft tissue defect. **(A)** Diabetic wound at the heel. **(B)** Harvest of the distally based sural neurocutaneous flap. **(C)** The defect was reconstructed with a flap, and the donor site was covered with skin graft. **(D)** The flap and the donor site were completely healed at follow-up.

The authors apologize for this error and state that this does not change the scientific conclusions of the article in any way. The original article has been updated.

Publisher's note