



Corrigendum

Corrigendum to “Predictor of Spontaneous Rupture of Malarial Spleen: A Systematic Review and Meta-analysis.” [Sudan Journal of Medical Sciences, Volume 20, Issue no. 1, pp. 91–98]

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The publisher has been informed of the errors that have occurred on pages 91, 92, 93, 94, 95, and 96, where the following corrections have been made that do not alter the statistical analysis or the study conclusions.

1. Page 91

In the **Abstract**, under the **Results** section, the last sentence has been revised to read as follows: Despite the possibility of the presence of a confounding factor, blood pressure could be the sole predictor of SPRMS.

2. Page 92

In the **Results** section, the number of local citizens has been revised from 74 to 78.

3. Page 93

- a. In the first paragraph, the sentence “Right-sided abdominal tenderness was reported in 97 cases, palpable spleen in 49, and hepatosplenomegaly in 21.” has been revised to read: Left-sided abdominal tenderness was reported in 97 cases, palpable spleen in 49, and hepatosplenomegaly in 21.
- b. The second paragraph has been corrected to read: *Plasmodium falciparum* was more predominant than *P. vivax* among travelers, while *P. vivax* was more prevalent among citizens and military personnel, as shown in Table 2.
- c. The third paragraph has been revised to read: The tendency toward preserving splenic function in 57 patients, along with three patients treated with pulmonary artery embolization, is shown in Table 3.

4. Page 94

Table 3 has been updated as follows.

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Table 3: Distribution of the final treatment with the different types of plasmodia.

	Conservative	Splenectomy	Splenic artery embolization	Laparoscopic converted to open splenectomy	Total
<i>P. falciparum</i>	21	20	1	0	42
<i>P. vivax</i>	23	23	2	0	48
<i>P. ovale</i>	4	3	0	1	8
<i>P. falciparum</i> and <i>P. vivax</i>	8	3	0	0	11
<i>P. knowlesi</i>	1	1	0	0	2
Total	57	50	3	1	111

5. Page 95

In Table 4, the count for conservative management has been revised to 57 from 59.

6. Page 96

In the **Conclusion** section, the phrase “as a possible” has been added to the third sentence to read: Our finding that BP as a possible predictor for SPRMS paves the way for the compelling, best-available evidence for early diagnosis and management to secure patient safety as a cornerstone of clinical governance.

On behalf of the authors, the publisher wishes to apologize for this error. The online version of the article has been updated on August 4, 2025 and is available at <https://doi.org/10.18502/sjms.v20i1.16587>.