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A Corrigendum on
Normal High HbA1c a Risk Factor for Abnormal Pain Threshold in the Japanese Population

*by Itabashi, C., Mizukami, H., Osonoi, S., Takahashi, K., Kudo, K., Wada, K., et al. (2019). Front. Endocrinol. 10: 651. doi: 10. 3389/fendo. 2019. 00651*

In the original article, old type of electrodes were incorrectly identified as (NM-990W) instead of (NM-983W). In addition, the average of P-IES in non-diabetic/IFG subjects was incorrect. The correct value is “ 0. 15 ± 0. 01.”

A correction has been made in the following places:

The Material and Methods section, subsection P-IES Measurement, paragraph 1:

“ For nociceptive stimulation, an IES method was adopted using a disposable concentric bipolar needle electrode (NM-983W; Nihon Kohden Corp., Tokyo, Japan) which was connected to a specific stimulator for cutaneous Aδ and C fibers as previously described (PNS-7000; Nihon Kohden) (15).”

The Abstract, subsection Results:

“ P-IES was elevated with increasing of age in women but not in men. Average P-IES (mA) was increased in IFG subjects ( *n* = 55, 0. 20 ± 0. 03) compared with normoglycemic/non-IFG individuals ( *n* = 894, 0. 15 ± 0. 01) ( *p* < 0. 01). It was comparable between IFG and a group of normal high HbA1c (5. 9–6. 4%). Univariate linear regression analyses showed no influence of sex, triglyceride, or cholesterol on the value of P-IES. In contrast, there were significant correlations between P-IES and serum HbA1c level (ß = 0. 120, *p* < 0. 001) Adjustments for the multiple clinical measurements confirmed positive correlation of P-IES with HbA1c (ß = 0. 077, *p* = 0. 046).”

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.