Corrigendum: normal high hba1c a risk factor for abnormal pain threshold in the j...

**Health & Medicine** 



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  $\pm$  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.  $20\pm0.03$ ) compared with normoglycemic/non-IFG individuals ( n=894, 0.  $15\pm0.01$ ) ( 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,

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there were significant correlations between P-IES and serum HbA1c level ( $\beta$  = 0. 120, p < 0. 001) Adjustments for the multiple clinical measurements confirmed positive correlation of P-IES with HbA1c ( $\beta$  = 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.