



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

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A Corrigendum on

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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 A δ 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 ($\beta = 0.120$, $p < 0.001$). 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.

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