Errata

Achenbach P, Warncke K, Reiter J, Naserke HE, Williams AJK, Bingley PJ, Bonifacio E, Ziegler A-G: Stratification of type 1 diabetes risk on the basis of islet autoantibody characteristics. *Diabetes* 53:384–392, 2004

In Fig. 4 of the above-listed article, three column heads ("A. Total cohort," "B. Single antibody," and "C. Multiple antibodies") were inadvertently deleted. The correct Fig. 4 appears on the following page.

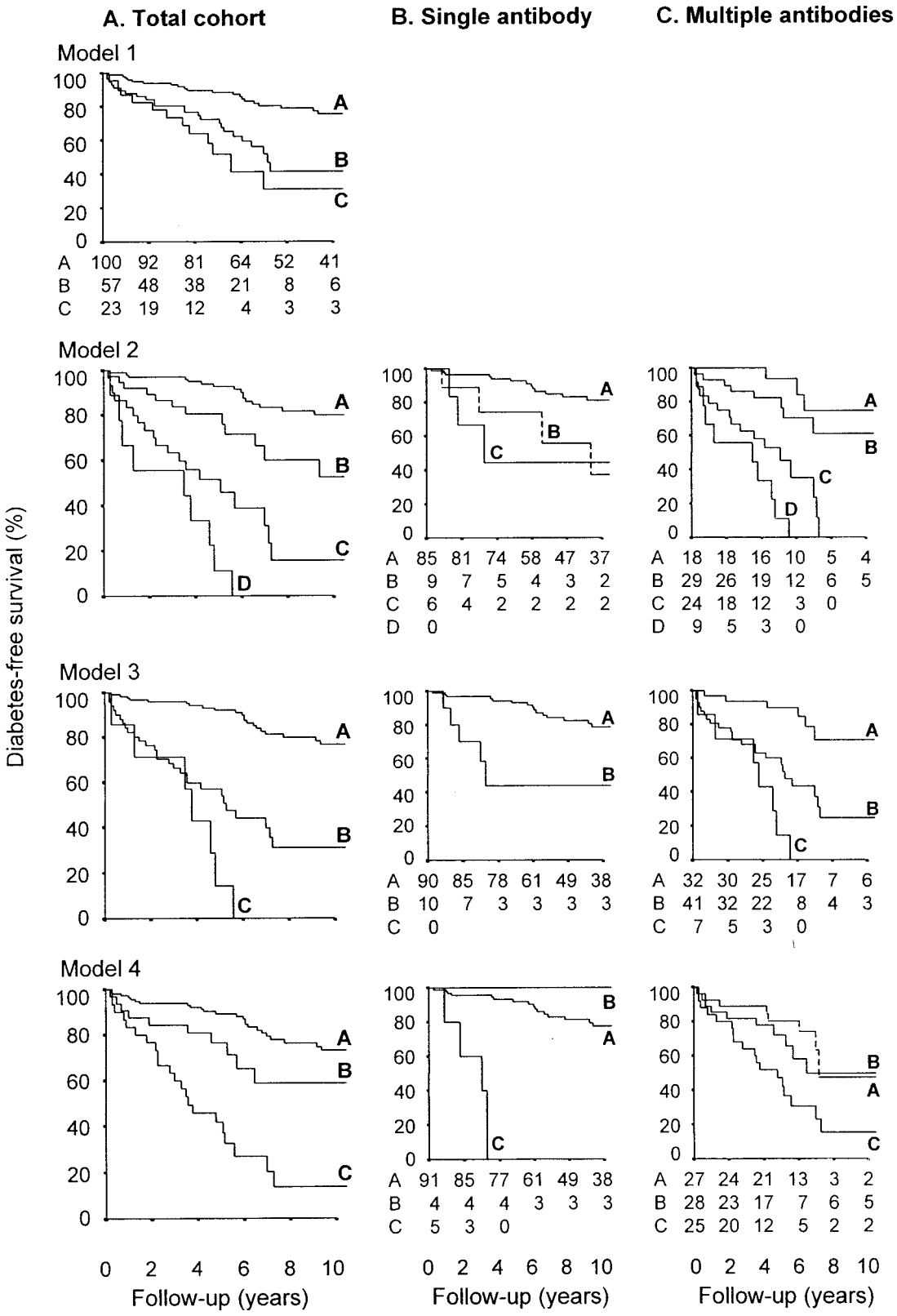

FIG. 4. The cumulative risk of diabetes in autoantibody-positive relatives classified on the basis of islet autoantibody characteristics. Stratification is shown for the total cohort (*A*), for the 100 relatives with one islet autoantibody (*B*), and for the 80 relatives with two or more islet autoantibodies (*C*). Model 1 shows stratification of relatives by the number of islet autoantibodies (A = one autoantibody, B = any two autoantibodies, C = all three autoantibodies). Model 2 shows stratification of relatives by their autoantibody titer and subclass (A = none, B = one, C = two, and D = all three of high titer IA-2A, positivity for IgG2 or IgG4 IA-2A, and positivity for IgG2, IgG3, or IgG4 IAA). Model 3 shows stratification of relatives by their autoantibody titer (A = none, B = one, C = both of high titer IA-2A or high titer IAA). Model 4 shows stratification of relatives by their IA-2A and IA-2β autoantibody status (A = IA-2A negative, B = IA-2A positive/IA-2β autoantibody negative, C = IA-2β autoantibody positive).

Mathews CE, Bagley R, Leiter EH: ALS/Lt: a new type 2 diabetes mouse model associated with low free radical scavenging potential. *Diabetes* 53 (Suppl. 1):S125–S129, 2004

Because it is difficult to distinguish the line graphs in Figs. 2–4 of the above-listed article, the following new figures are provided.

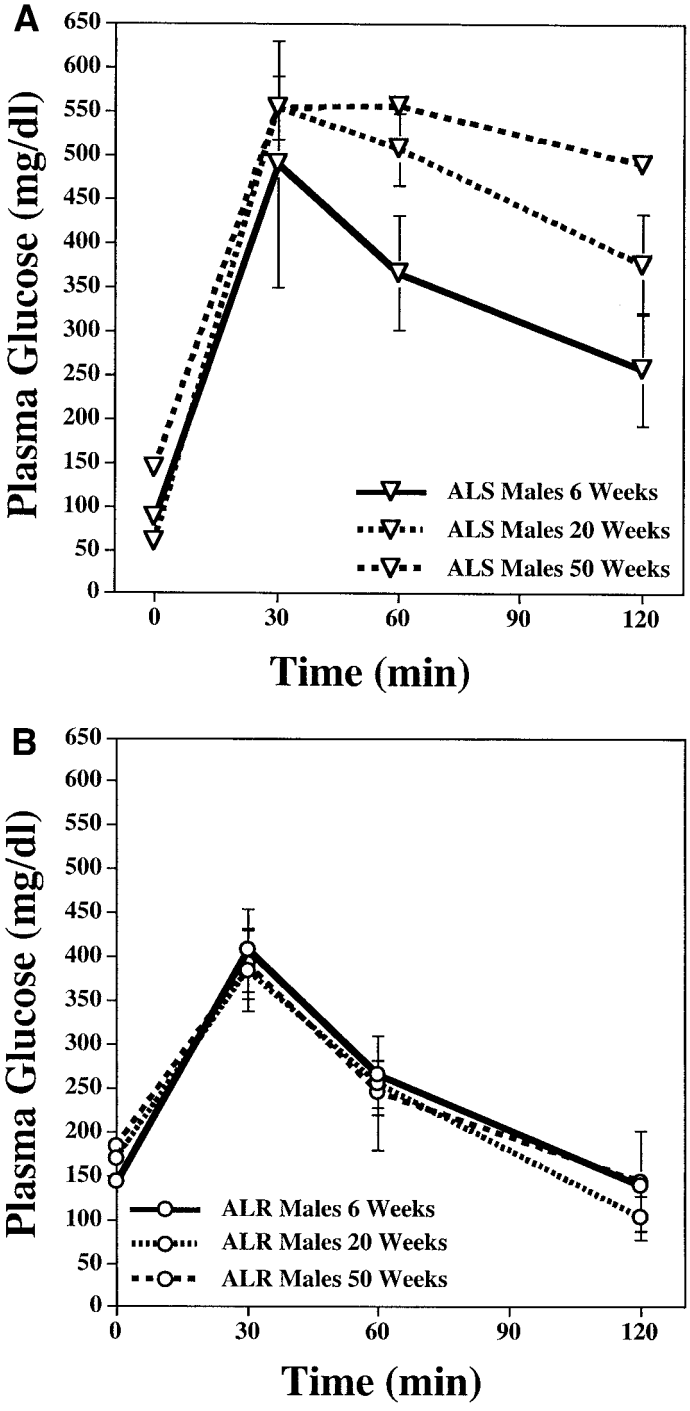

FIG. 2. IGT develops early in ALS/Lt males and worsens with age (*A*). In comparison, males of the closely related ALR/Lt strain do not exhibit glucose intolerance (*B*).

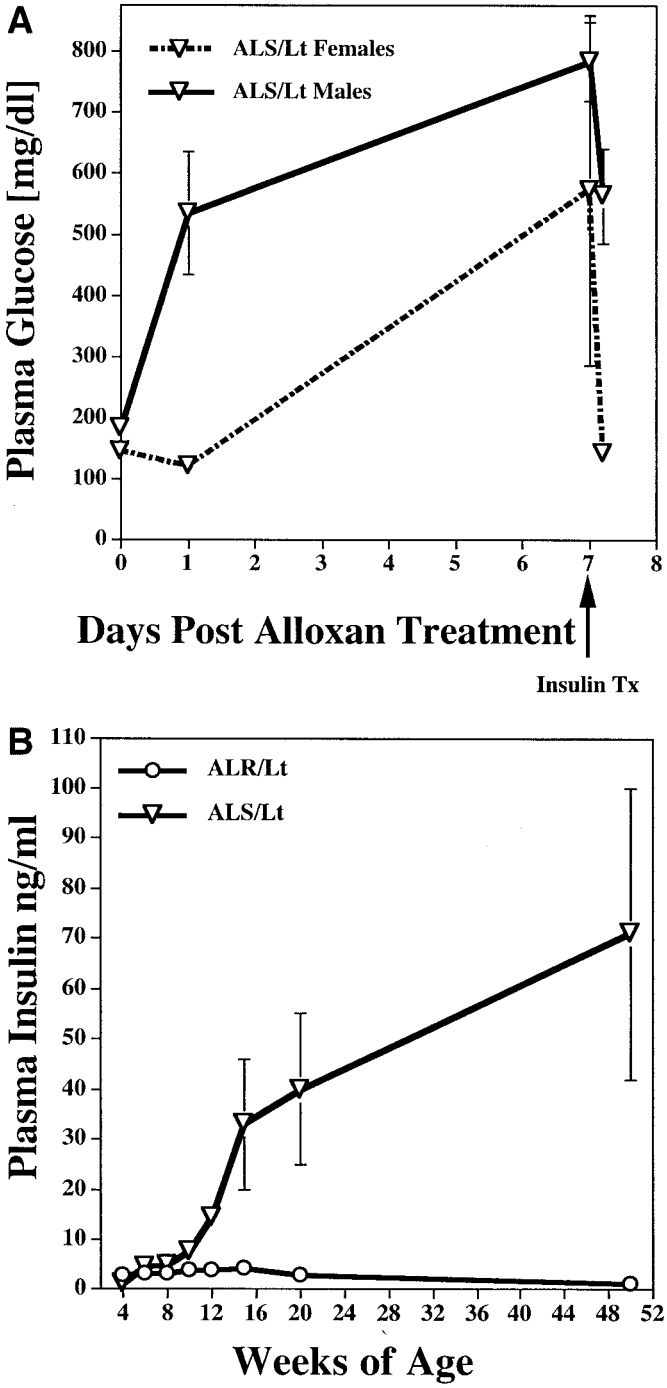

FIG. 3. ALS/Lt males exhibit insulin resistance. *A*: Alloxan-treated ALS males show strong resistance to insulin. Alloxan-treated (52 mg/kg) ALS males (solid line) and females (broken line) were treated with 1 unit porcine insulin 7 days after AL administration. One hour later, a blood sample was drawn to test plasma glucose. Figure 3*A* is the only experiment included in this study where mice were treated with AL. *B*: ALS/Lt males spontaneously develop hyperinsulinemia and present with insulin resistance as early as 10 weeks of age. Plasma insulin levels were monitored in unmanipulated ALS/Lt and ALR/Lt males from 4 to 52 weeks of age.

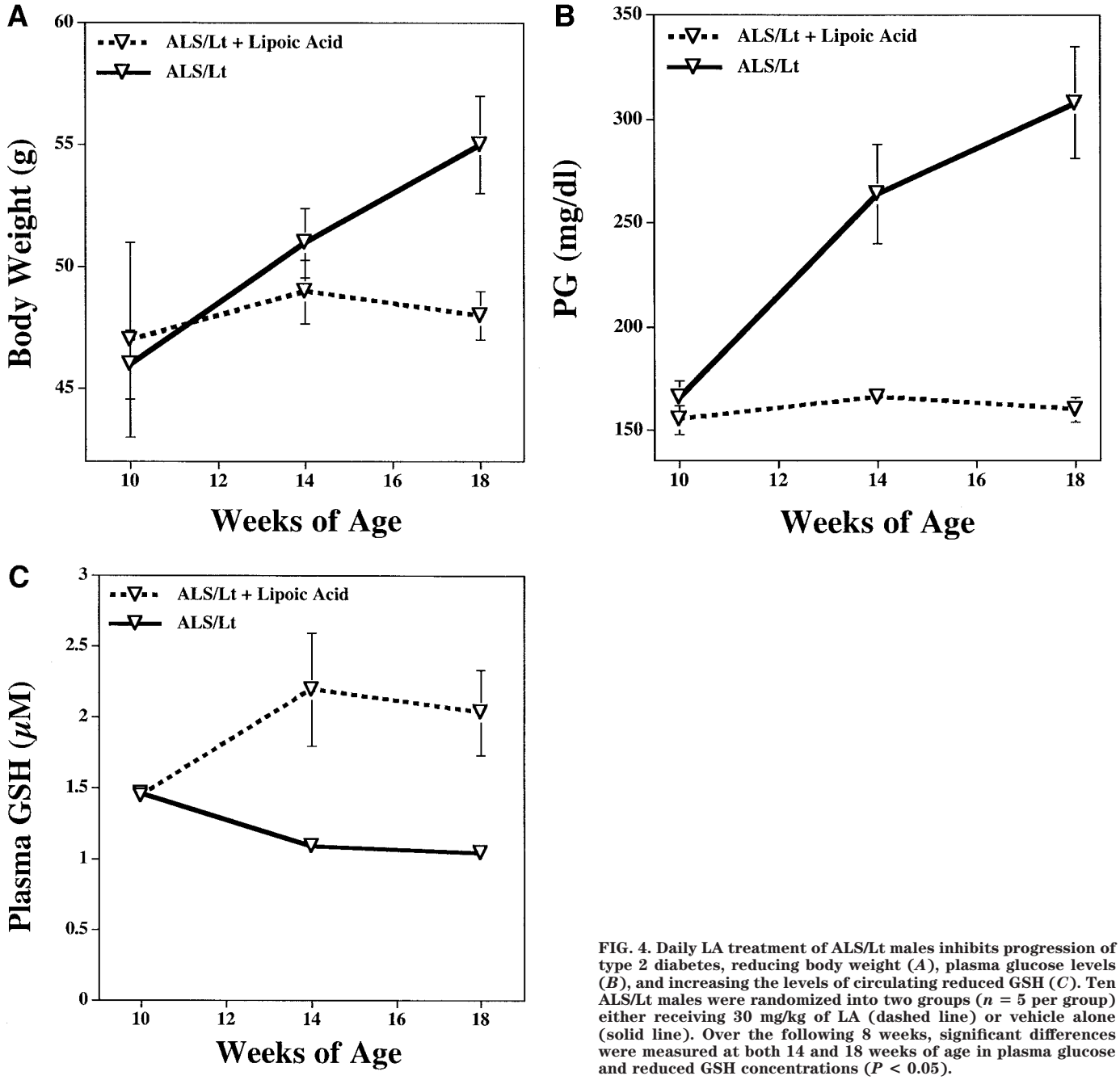

FIG. 4. Daily LA treatment of ALS/Lt males inhibits progression of type 2 diabetes, reducing body weight (*A*), plasma glucose levels (*B*), and increasing the levels of circulating reduced GSH (*C*). Ten ALS/Lt males were randomized into two groups ($n = 5$ per group) either receiving 30 mg/kg of LA (dashed line) or vehicle alone (solid line). Over the following 8 weeks, significant differences were measured at both 14 and 18 weeks of age in plasma glucose and reduced GSH concentrations ($P < 0.05$).