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Title

Erratum. Urine Complement Proteins and the Risk of Kidney Disease Progression and Mortality in Type 2 Diabetes. *Diabetes Care* 2018;41:2361-2369

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Errata

Erratum. Secular Trends in Diabetes in India (STRiDE-I): Change in Prevalence in Ten Years Among Urban and Rural Populations in Tamil Nadu. Diabetes Care 2019;42:476–485

<https://doi.org/10.2337/dc19-er06>

Arun Nanditha, Chamukuttan Snehalatha, Krishnamoorthy Satheesh, Priscilla Susairaj, Mary Simon, Lakshminarayanan Vijaya, Arun Raghavan, Ramachandran Vinitha, and Ambady Ramachandran

In the article cited above, changes have been made in Table 2 on page 480 (for values under “Self-reported” and “New”) and in the text under the RESULTS section on page 481 under the heading “Diabetes,” where the final sentence was revised to read: Percentage of new diabetes increased in both the urban and rural areas ($P < 0.0001$).

The changes do not modify the overall results of the study.

The online version of the article has been corrected to reflect these changes.

Erratum. Urine Complement Proteins and the Risk of Kidney Disease Progression and Mortality in Type 2 Diabetes. Diabetes Care 2018;41: 2361–2369

<https://doi.org/10.2337/dc19-er06a>

Tomas Vaisar, Blythe Durbin-Johnson, Kathryn Whitlock, Ilona Babenko, Rajnish Mehrotra, David M. Rocke, and Maryam Afkarian

In the article cited above, the authors miscategorized CD59 as a transmembrane protein when it is in fact a glycosylphosphatidylinositol-anchored surface protein. The sentence on page 2367 in the last paragraph of the first column was corrected to read: CD59, a major regulator of the complement activity, is a glycosylphosphatidylinositol-anchored membrane protein that binds to the C5–8 complex and inhibits assembly of C9 monomers into the terminal complement complex, thus protecting cells from complement-mediated injury (33).

The error does not change the results or conclusions of the article.

The online version of the article has been corrected to reflect these changes.