

malization of the E/I ratio, despite an improvement in glycohemoglobin that was only marginal. It is unfortunate that glycohemoglobin measurements could not have been performed more frequently. We suspect, on the basis of the R-R studies, that glycohemoglobin may have been frequently in the normal range between October 1984 and July 1985.

Our results with elderly diabetic patients over the past 1.5 yr show much less improvement in E/I, despite greater improvement in glycohemoglobin. This suggests that perhaps the improvement in autonomic nerve conduction resulting from improved glycemia occurs much more rapidly before maturity.

Controlled studies are urged.

RICHARD K. BERNSTEIN, M.D.

Address reprint requests to Richard K. Bernstein, M.D., 516 West Post Road, Mamaroneck, New York 10543.

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Glucose-Induced Alterations in Nerve Metabolism: A Reply

Greene and co-workers in their interesting review¹ underline the ability of gangliosides, glycosphingolipids of the neuronal membranes "to counteract the depressant effect of diabetes on the Na⁺-K⁺-ATPase activity." This hypothesis was supported by the experimental evidence that nanomolar concentration of GM₁ ganglioside increases Na⁺-K⁺-ATPase activity² and that the intraperitoneal injection in *ob/ob* mice of extractive gangliosides improve nerve conduction velocity.³ Furthermore, other studies in animals have suggested that gangliosides, too, could increase the physiologic processes of reinnervation by stimulating "sprouting" mechanism.^{4,5} These experimental data suggested the opportunity to test gangliosides in the treatment of subjects with diabetic peripheral neuropathy. We therefore planned a multicenter, randomized, crossover double-blind controlled-versus-placebo trial on the effect of gangliosides (20 mg/dl i.m. for 6 wk) in diabetic peripheral neuropathy. The trial involved 140 subjects affected by diabetic peripheral neuropathy with impairment of nerve conduction velocity and with (43 subjects) or without (97 subjects) severe neurologic symptoms.

The results showed a significant improvement of some symptoms and nerve conduction velocities in subjects treated

with gangliosides with no change in plasma glucose and glycosylated hemoglobin levels.⁶

These data, confirmed later by other trials,⁷⁻⁹ underline further the positive effect of the ganglioside in improving some metabolic abnormalities of the diabetic nerves.

DOMENICO FEDELE, M.D.
GAETANO CREPALDI, M.D.

From the Department of Internal Medicine, University of Padua, Via Giustiniani, 2-35100 Padova, Italy.

Address reprint requests to Prof. Domenico Fedele at the above address.

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Sources of Disparity in Incidence and Prevalence Studies of Diabetic Retinopathy: Influence of Selective Survival on Risk Factor Assessment

The diabetes literature is comprised almost exclusively of prevalence studies, in which antecedent characteristics cannot be distinguished from consequent findings. Prevalence