

CORRECTION

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Correction: Toe brachial index and not ankle brachial index is appropriate in initial evaluation of peripheral arterial disease in type 2 diabetes

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Correction: Diabetology & Metabolic Syndrome (2024)16: 52

<https://doi.org/10.1186/s13098-024-01291-2>

Following publication of the original article [1], the authors would like to correct the number 0.9 in the conclusion under the main heading of abstract.

The sentence currently reads:

CONCLUSION ABI < 0.9 detects PAD reliably, but presence of PAD in patients with ABI > 9.0 including the normal of ABI (0.9–1.3) can be confirmed with TBI, which correlated strongly with CTA. TBI is also non-inferior for PAD detection, when ABI < 0.9. TBI and not ABI can be utilized for assessment of PAD in subjects with T2D.

The sentence should read:

CONCLUSION ABI < 0.9 detects PAD reliably, but presence of PAD in patients with ABI > 0.9 including the normal of ABI (0.9–1.3) can be confirmed with TBI, which correlated strongly with CTA. TBI is also non-inferior for PAD detection, when ABI < 0.9. TBI and not ABI can be utilized for assessment of PAD in subjects with T2D.

Published online: 21 March 2024

Reference

1. Singhania P, Das TC, Bose C, et al. Toe brachial index and not ankle brachial index is appropriate in initial evaluation of peripheral arterial disease in type 2 diabetes. *Diabetol Metab Syndr* 2024;16:52. <https://doi.org/10.1186/s13098-024-01291-2>.

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The online version of the original article can be found at <https://doi.org/10.1186/s13098-024-01291-2>.

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