

## References

- 1 Bartalena L, Marcocci C, Bogazzi F, Manetti L, Tanda ML, Dell'Unto E, Bruno-Bossio G, Nardi M, Bartolomei MP, Lepri A, Rossi G, Martino E, Pinchera A. Relation between therapy for hyperthyroidism and the course of Graves' ophthalmopathy. *N Engl J Med* 1998; 338: 73–78
- 2 Chiavato L, Santini F, Vitti P, Bendinelli G, Pinchera A. Appearance of thyroid stimulating antibody and Graves' disease after radioiodine therapy for toxic nodular goitre. *Clin Endocrinol (Oxf)* 1994; 40: 803–806
- 3 Cseke B, Balazs C. Development of Basedow disease after radioiodine therapy for nodular goiter. *Orv Hetil* 2003; 144: 2327–2329
- 4 Marcocci C, Bartalena L, Tanda ML, Manetti L, Dell'Unto E, Mazzi B, Rocchi R, Barbesino G, Pinchera A. Graves' ophthalmopathy and 131I therapy. *Q J Nucl Med* 1999; 43: 307–312
- 5 Nygaard B, Faber J, Veje A, Hegedus L, Hansen JM. Transition of nodular toxic goiter to autoimmune hyperthyroidism triggered by 131I therapy. *Thyroid* 1999a; 9: 477–481
- 6 Nygaard B, Metcalfe RA, Phipps J, Weetman AP, Hegedus L. Graves' disease and thyroid associated ophthalmopathy triggered by 131I treatment of non-toxic goiter. *J Endocrinol Invest* 1999b; 22: 481–485
- 7 Orsolon P, Lupi A, Antoni De, Migliorati G, Vianello, Dri A. Appearance of Graves'-like disease following regression of autonomously functioning thyroid nodules. Two case reports. *Minerva Endocrinol* 1998; 23: 53–56
- 8 Pedersen IB, Knudsen N, Perrild H, Ovesen L, Laurberg P. TSH-receptor antibody measurement for differentiation of hyperthyroidism into Graves' disease and multinodular toxic goitre: a comparison of two competitive binding assays. *Clin Endocrinol (Oxf)* 2001; 55: 381–390
- 9 Perros P, Kendall-Taylor P, Neoh C, Frewin S, Dickinson J. A prospective study of the effects of radioiodine therapy for hyperthyroidism in patients with minimally active Graves' ophthalmopathy. *J Clin Endocrinol Metab* 2005; 90: 5321–5323
- 10 Rasmussen AK, Nygaard B, Feldt-Rasmussen U. (131)I and thyroid-associated ophthalmopathy. *Eur J Endocrinol* 2000; 143: 155–160
- 11 Smyth PP, Neylan D, O'Donovan DK. The prevalence of thyroid-stimulating antibodies in goitrous disease assessed by cytochemical section bioassay. *J Clin Endocrinol Metab* 1982; 54: 357–361
- 12 Leussen JJ van, Edelbroek MA, Talsma MA, Heide LJ de. Graves' disease induced by Na(131)I therapy for toxic multinodular goitre. *Neth J Med* 2000; 57: 194–197
- 13 Wallaschofski H, Kuwert T, Lohmann T. TSH-receptor autoantibodies – differentiation of hyperthyroidism between Graves' disease and toxic multinodular goitre. *Exp Clin Endocrinol Diabetes* 2004; 112: 171–174
- 14 Wallaschofski H, Muller D, Georgi P, Paschke R. Induction of TSH-receptor antibodies in patients with toxic multinodular goitre by radioiodine treatment. *Horm Metab Res* 2002; 34: 36–39
- 15 Wallaschofski H, Orda C, Georgi P, Miehle K, Paschke R. Distinction between autoimmune and non-autoimmune hyperthyroidism by determination of TSH-receptor antibodies in patients with the initial diagnosis of toxic multinodular goiter. *Horm Metab Res* 2001; 33: 504–507

## Erratum

Unfortunately two mistakes occurred in the publication of the article Davis MD et al. Early retinopathy progression in four randomized trials comparing insulin glargine and NPH insulin. *Exp Clin Endocrinol Diabetes* 2007; 115: 240–243. The title is incorrect: 'Nph' should be read in capitals as 'NPH'.

In the results section on page 241 it incorrectly reads 'type 1 diabetes' in "There were no notable differences between treatment groups except for a slightly greater proportion of patients with no retinopathy in the insulin glargine group in the US type 1 diabetes trial." Correctly it should read 'type 2 diabetes'.