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Original Research

Clinical Care/Education/Nutrition/Psychosocial Research

► **1071** Ginseng and ginsenoside Re do not improve β -cell function or insulin sensitivity in overweight and obese subjects with impaired glucose tolerance or diabetes

D.N. Reeds, B.W. Patterson, A. Okunade, J.O. Holloszy, K.S. Polonsky, S. Klein

1077 Diabetes as a cause of clinically significant functional cobalamin deficiency

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► **1081** Vitamin D levels, microvascular complications, and mortality in type 1 diabetes

C. Joergensen, P. Hovind, A. Schmedes, H.-H. Parving, P. Rossing

1086 Understanding physicians' challenges when treating type 2 diabetic patients' social and emotional difficulties: a qualitative study

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1089 Basal insulin requirement is ~30% of the total daily insulin dose in type 1 diabetic patients who use the insulin pump

A. Kuroda, H. Kaneto, T. Yasuda, M. Matsuhisa, K. Miyashita, N. Fujiki, K. Fujisawa, T. Yamamoto, M. Takahara, F. Sakamoto, T. Matsuoka, I. Shimomura

1091 First-trimester circulating 25-hydroxyvitamin D levels and development of gestational diabetes mellitus

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1094 Diabetes-related distress and physical and psychological health in Chinese type 2 diabetic patients

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1097 Medical expenditures associated with diabetes among privately insured U.S. youth in 2007

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1102 Diabetes and the risk of developing Parkinson's disease in Denmark

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1109 Risk of diabetes among young adults born preterm in Sweden

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1114 Serum 25-hydroxyvitamin D levels and prediabetes among subjects free of diabetes

A. Shankar, C. Sabanayagam, S. Kalidindi

1120 Ethnicity modifies the relationships of insulin resistance, inflammation, and adiponectin with obesity in a multiethnic Asian population

C.M. Khoo, S. Sairazi, S. Taslim, D. Gardner, Y. Wu, J. Lee, R.M. van Dam, E.S. Tai

1127 Effect of socioeconomic status on mortality among people with type 2 diabetes: a study from the Scottish Diabetes Research Network Epidemiology Group

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1133 Serum 25-hydroxyvitamin D, calcium intake, and risk of type 2 diabetes after 5 years: results from a national, population-based prospective study (the Australian Diabetes, Obesity and Lifestyle study)

C. Gagnon, Z.X. Lu, D.J. Magliano, D.W. Dunstan, J.E. Shaw, P.Z. Zimmet, K. Sikaris, N. Grantham, P.R. Ebeling, R.M. Daly

1139 Prevalence of and risk factors for hepatic steatosis and nonalcoholic fatty liver disease in people with type 2 diabetes: the Edinburgh Type 2 Diabetes Study

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1192 Long-term effects of irbesartan treatment and smoking on nucleic acid oxidation in patients with type 2 diabetes and microalbuminuria: an Irbesartan in Patients With Type 2 Diabetes and Microalbuminuria (IRMA 2) substudy

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1211 Additional autoimmune disease found in 33% of patients at type 1 diabetes onset
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Online Letters: Observations

e52 Hypoglycemia in patients with diabetes on antidiabetic medications who fast for laboratory tests
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Online Letters: Comments and Responses

e53 Comment on: American Diabetes Association. Standards of medical care in diabetes—2011. *Diabetes Care* 2011;34(Suppl. 1):S11–S61
V. Basevi, S. Di Mario, C. Morciano, F. Nonino, N. Magrini

e54 Response to comment on: American Diabetes Association. Standards of medical care in diabetes—2011. *Diabetes Care* 2011;34(Suppl. 1):S11–S61
C.H. Wysham, M.S. Kirkman

e55 Comment on: Chen et al. Utilizing the second-meal effect in type 2 diabetes: practical use of a soya-yogurt snack. *Diabetes Care* 2010;33:2552–2554
C.K. Rayner, J. Ma, K.L. Jones, M. Horowitz

e56 Response to comment on: Chen et al. Utilizing the second-meal effect in type 2 diabetes: practical use of a soya-yogurt snack. *Diabetes Care* 2010;33:2552–2554
R. Taylor, M.J. Chen

e57 Comment on: Polonsky et al. Structured self-monitoring of blood glucose significantly reduces A1C levels in poorly controlled, noninsulin-treated type 2 diabetes: results from the Structured Testing Program study. *Diabetes Care* 2011;34:262–267
J.W. Stephens, J.E. Carman, C.J. Brooks, R.A. Lyons, D.V. Ford, D.E. Price, S.C. Bain

e58 Response to comment on: Polonsky et al. Structured self-monitoring of blood glucose significantly reduces A1C levels in poorly controlled, noninsulin-treated type 2 diabetes: results from the Structured Testing Program study. *Diabetes Care* 2011;34:262–267
W.H. Polonsky, L. Fisher, C.H. Schikman, D.A. Hinnen, C.G. Parkin, Z. Jelsovsky, B. Petersen, M. Schweitzer, R.S. Wagner

e59 Comment on: Boronat et al. Differences in cardiovascular risk profile of diabetic subjects discordantly classified by diagnostic criteria based on glycated hemoglobin and oral glucose tolerance test. *Diabetes Care* 2010;33:2671–2673
C.K. Kramer, M.R. Araneta

e60 Response to comment on: Boronat et al. Differences in cardiovascular risk profile of diabetic subjects discordantly classified by diagnostic criteria based on glycated hemoglobin and oral glucose tolerance test. *Diabetes Care* 2010;33:2671–2673
M. Boronat, F.J. Növoa