

Correction

This is a correction of the abstract: **Correlations of sleep quality with serum leptin and leptin resistance in type 2 diabetes** (*Rev Romana Med Lab.* 2018;26(2): S118-S119), published in the Supplement of April 2018 issue of Romanian Journal of Laboratory Medicine, which has no Acknowledgement.

The correct abstract is presented below:

Correlations of sleep quality with serum leptin and leptin resistance in type 2 diabetes

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Introduction: Sleep disorders are frequent in patients with type 2 diabetes (T2D) and constitute risk factors for altered metabolic control, through insufficiently clarified mechanisms. There is lack of data regarding the correlation of leptin resistance with sleep duration (SD) and quality (SQ) in patients with T2D, while data on leptinemia are contradictory. The aim of this evaluation was to clarify these relationships.

Material and methods: In this cross-sectional study, 237 patients with T2D were included (63.4±8.0 years). SQ/SD were assessed by Pittsburgh Sleep Quality Index. Serum leptin and soluble leptin receptor were analyzed by ELISA and leptin resistance was evaluated by free leptin index (FLI) in 176 subjects. Statistical significance was assumed at $p < 0.05$.

Results: Serum leptin was significantly correlated with overall poorer SQ (0.289 [95%CI: 0.14; 0.42], $p < 0.0001$), even after adjustment for T2D duration and age ($p < 0.001$). Leptinemia negatively correlated with habitual sleep efficiency (-0.182 [95%CI: -0.32; -0.03], $p < 0.05$), but not SD (p : NS) and increased with longer sleep latency (8.0±7.9 ng/ml (<15min) vs 9.5±7.0 ng/ml (16-60 min) vs 13.3±6.8 ng/ml (>60min); $p < 0.01$). Leptin resistance correlated with SQ (0.274 [95%CI: 0.12; 0.40], $p < 0.001$) and habitual sleep efficiency (-0.185 [95%CI: -0.32; -0.03], $p < 0.05$), but not with SD (p : NS). FLI increased with longer sleep latency (0.49±0.63 ng/ml (<15min) vs 0.55±0.49 ng/ml (16-60 min) 0.83±0.53 ng/ml (>60min); $p < 0.01$). Patients with good SQ had lower serum leptin concentrations (8.15±7.7 vs 10.29±7.1 ng/ml, $p < 0.01$) and FLI (0.47±0.58 vs 0.62±0.52 ng/ml, $p < 0.05$).

Conclusions: Hyperleptinemia and leptin resistance were associated with poorer SQ, longer sleep latency and poorer sleep efficiency, but not SD in patients with T2D.

Keywords: leptin, sleep, T2D

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The Journal regrets missing information.