a target dose of 30 or 60 μg.

In patients with type 2 diabetes, the starting dose is 60 μg before meals, which can be increased to 120 μg if there has been no nausea for 3 to 7 days.

In either type of diabetes, the insulin dose is adjusted to achieve optimal glycemic control after the pramlintide dosage is stable.

Symlin is available in vial form, but since many injectable compounds for diabetes come in pen form, it is reasonable to assume this delivery device may be available in the future.

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CORRECTION

Primary hyperparathyroidism

(DECEMBER 2005)

The article "Primary hyperparathyroidism: 7,000 years of progress" by Dr. Michael A. Levine in the December 2005 issue of the *Cleveland Clinic Journal of Medicine* (Cleve Clin J Med 2005; 72:1084–1098) contained a typographical error. On page 1095, in the discussion of familial hypocalciuric hypercalcemia, the defect is in fact due to an inactivating mutation in the gene encoding the calcium-sensing receptor (CASR), not an activating mutation as printed. We would like to thank Dr. Paul Sacks, of Phoenix, AZ, for pointing this out.