

References

1. Vialettes B, Vovan L, Simon MC, Lassmann W, Altomare E, Vague P (1982) Kinetics of fast haemoglobin in diabetic rats. *Diabetologia* 22: 264–268
2. Flückiger R, Winterhalter KH (1976) In vitro synthesis of hemoglobin A_{1c}. *FEBS Lett* 71: 356–360
3. Garrick LM, Sharma VS, McDonald MJ, Ranney HM (1975) Rat haemoglobin heterogeneity. *Biochem J* 149: 245–258
4. Bunn HF (1981) Evaluation of glycosylated hemoglobin in diabetic patients. *Diabetes* 30: 613–617
5. Riemerová M, Rác O, Varga J (1982) Glycosylation of hemoglobin in rats. *Bratislavské Lekárske Listy* 79 (in press) (Slovak with English abstract)
6. Blanc MH, Rhié FH, Dunn PJ, Soeldner JS (1981) The determination of glycosylated hemoglobins in rats using high pressure liquid chromatography. *Metabolism* 30: 317–322
7. Sevendsen PA, Christiansen JS, Soegaard U, Welinder BS, Nerup J (1981) Rapid changes in chromatographically determined haemoglobin A_{1c} induced by short-term changes in glucose concentration. *Diabetologia* 19: 130–136
8. Beach KW (1979) A theoretical model to predict the behaviour of glycosylated hemoglobin levels. *J Theor Biol* 81: 547–561

Drs. O. Rác
Department of Pathophysiology
Medical School
Safarik University
CS-04180 Košice
Czechoslovakia

Red Blood Cell Volume and Glycaemic Control in Diabetes

Dear Sir,

The occurrence of an increased mean red cell volume (MCV) in diabetes, not correlated with glycosylated haemoglobin (HbA_{1c}), has been reported by Davidson et al. [1]. This finding has been recently

Table 1. Red blood cell volume and indices of diabetic control

	Control Subjects (n = 50)	Diabetic patients (n = 50)
Age (years)	40 ± 7.8	41 ± 7.0
Sex (M:F)	25:25	25:25
Blood glucose (mmol/l)	4.95 ± 0.45	9.85 ± 0.74
Stable HbA _{1c} (%)	6.23 ± 0.68	10.18 ± 1.70
Glycosylated serum proteins (HMF ^a nmol/mg protein)	0.64 ± 0.26	0.95 ± 0.42
Mean corpuscular volume (fl)	87.87 ± 3.54	90 ± 5.87

Data are expressed as mean ± SD; ^a HMF = Hydroxymethylfurfural

Book Reviews

J. C. Brown. Gastric Inhibitory Polypeptide (Monographs on Endocrinology). Berlin, Heidelberg, New York: Springer 1982. 32 figs, pp 88, hardback DM 68.00/US \$ 30.20. ISBN: 3-540-11271-5

J. C. Brown, the discoverer of gastric inhibitory polypeptide presents a monograph on this hormone. This book tells in a concise form the story of the analysis of an observation leading to the discovery of a new

hormone. The first section covers the problem of enterogastrone and incretin, two physiological principles, which, at least in part, are believed to be related to gastric inhibitory polypeptide (GIP). In section two, the chemistry of GIP is described together with the recent correction of the amino acid sequence. Modern separation and isolation techniques are presented and details on the biological activity of synthetic fragments of GIP are given. Chapter three describes the physio-

questioned by Beautyman [2], who observed that severe hyperglycaemia may cause inaccuracy in automated measurement of corpuscular indices [3].
We investigated MCV, blood glucose, stable HbA_{1c} and glycosylated serum proteins (which measure long- and short-term control respectively [4] in 50 healthy subjects and in 50 diabetic patients matched for age and sex (Table 1). An increased MCV in the diabetic patients (90 ± 5.87 versus 87.87 ± 3.54 fl, mean ± SD; *p* < 0.05) and a linear correlation between MCV and serum glycosylated proteins (*r* = 0.42, *p* < 0.01) were observed. The lack of correlation between MCV and stable HbA_{1c} and the good correlation with glycosylated proteins suggest that short-term metabolic control may influence MCV in diabetes.

Moreover, as the methods for measurement of stable HbA_{1c} and glycosylated proteins were not affected by free serum glucose (both methods, by dialyzing samples, remove labile glucose adducts [5, 6], our data provide further evidence that changes in glycaemic control in diabetes may lead to haematological alterations, such as polycythaemia [7] and increased reticulocyte counts [8].

Yours sincerely,

A. Ceriello, P. Dello Russo, F. Curcio, C. Balsamo
and C. Pietrantuono

References

1. Davidson R, Evan-Wong LA, Stowers JM (1981) The mean red cell volume in diabetes mellitus. *Diabetologia* 20: 583–584
2. Beautyman W (1982) Red cell volume in diabetes. *Diabetologia* 22: 220 (Letter)
3. Strauchen AJ, Alston W, Anderson J, Gustafson Z, Fajardo LF (1981) Inaccuracy in automated measurement of hematocrit and corpuscular indices in the presence of severe hyperglycaemia. *Blood* 57: 1065–1067
4. Kennedy AL, Merimee TJ (1981) Glycosylated serum proteins and haemoglobin A_{1c} levels to measure control of glycaemia. *Ann Int Med* 96: 56–58
5. Compagnucci P, Cartechini MG, Bolli G, De Feo P, Santeusano F, Brunetti P (1981) The importance of determining irreversibly glycosylated haemoglobin in diabetics. *Diabetes* 30: 607–612
6. Kennedy AL, Mehl TD, Merimee TJ (1980) Non-enzymatically glycosylated serum protein: spurious elevation due to free glucose in serum. *Diabetes* 29: 413–415
7. Graham JJ, Ryall RG, Wise PH (1980) Glycosylated haemoglobin and relative polycythaemia in diabetes mellitus. *Diabetologia* 18: 205–207
8. Ceriello A, Dello Russo P, Sgambato S, Giugliano D (1982) Glycosylated haemoglobin and reticulocyte count in diabetes. *Diabetologia* 22: 223 (Letter)

Dr. A. Ceriello
Laboratorio di Chimica e Divisione
di Medicina Generale
USL 38 – Ospedale S. Paolo
Via Terracina
I-80125 Naples, Italy