

- therapeutic modalities. *Ann Periodontol* 2001; **6**: 113–118.
46. Ramasamy R, Yan S F, Schmidt A M. Receptor for AGE (RAGE): signalling mechanisms in the pathogenesis of diabetes and its complications. *Ann NY Acad Sci* 2011; **1243**: 88–102.
 47. Grossi S G, Genco R J. Periodontal disease and diabetes mellitus: A two-way relationship. *Ann Periodontol* 1998; **3**: 51–61.
 48. Taylor G W. Bidirectional interrelationships between diabetes and periodontal diseases: an epidemiologic perspective. *Ann Periodontol* 2001; **6**: 99–112.
 49. Nishimura F, Iwamoto Y, Mineshiba J, Shimizu A, Soga Y, Murayama Y. Periodontal disease and diabetes mellitus: the role of tumour necrosis factor-alpha in a 2way relationship. *J Periodontol* 2003; **74**: 97–102.
 50. Genco R J, Grossi S G, Ho A, Nishimura F, Murayama Y. A proposed model linking inflammation to obesity, diabetes, and periodontal infections. *J Periodontol* 2005; **76**(Suppl 11): 2075–2084.
 51. Pisched N, Heng N, Bernimoulin J P, Kleber B M, Willich S N, Pisched T. Obesity, inflammation, and periodontal disease. *J Dent Res* 2007; **86**: 400–409.
 52. Demmer R T, Desvarieux M, Holtfreter B et al.
 - Periodontal status and A1C change: longitudinal results from the study of health in Pomerania (SHIP). *Diabetes Care* 2010; **33**: 1037–1043.
 53. Preshaw P M, Alba A L, Herrera D et al. Periodontitis and diabetes: a two-way relationship. *Diabetologia* 2012; **55**: 21–31.
 54. Saito T, Shimazaki Y, Kiyohara Y et al. Relationship between obesity, glucose tolerance, and periodontal disease in Japanese women: the Hisayama study. *J Periodontal Res* 2005; **40**: 346–353.
 55. Cutler C W, Shinedling E A, Nunn M et al. Association between periodontitis and hyperlipidemia: cause or effect? *J Periodontal* 1999; **70**: 1429–1434.
 56. Cutler C W, Iacopino A M. Periodontal disease: Links with serum lipid/triglyceride levels? Review and new data. *J Int Acad Periodontol* 2003; **5**: 47–51.
 57. Darré L, Vergnes J N, Gourdy P, Sixou M. Efficacy of periodontal treatment on glycaemic control in diabetic patients: A metaanalysis of interventional studies. *Diabetes Metab* 2008; **34**: 497–506.
 58. Simpson T C, Needleman I, Wild S H, Moles D R, Mills E J. Treatment of periodontal disease for glycaemic control in people with diabetes. *Cochrane Database Syst Rev* 2010; CD004714.
 59. Stratton I M, Adler A I, Neil H A et al. Association of glycaemia with macrovascular and microvascular complications of type 2 diabetes (UKPDS 35): prospective observational study. *BMJ* 2000; **321**: 405–412.
 60. Saremi A, Nelson R G, Tulloch-Reid M et al. Periodontal disease and mortality in type 2 diabetes. *Diabetes Care* 2005; **28**: 27–32.
 61. Chapple I L, Genco R J. Diabetes and periodontal diseases: consensus report of the Joint EFP/AAP Workshop on Periodontitis and Systemic Diseases. *J Clin Periodontol* 2013; **40** (Suppl 14): S106–S112.
 62. Chapple I L, Genco R J. Diabetes and periodontal diseases: consensus report of the Joint EFP/AAP Workshop on Periodontitis and Systemic Diseases. *J Periodontol* 2013; **84** (Suppl 4): S106–S112.
 63. Cullinan M P, Ford P J, Seymour G J. Periodontal disease and systemic health: current status. *Aust Dent J* 2009; **54** (Suppl 1): S62–69.
 64. Lalla E, Kunzel C, Burkett S, Cheng B, Lamster I B. Identification of unrecognized diabetes and pre-diabetes in a dental setting. *J Dent Res* 2011; **90**: 855–860.
 65. Wang Y, Rimm E B, Stampfer M J, Willett W C, Hu F B. Comparison of abdominal adiposity and overall obesity in predicting risk of type 2 diabetes among men. *Am J Clin Nutr* 2005; **81**: 555–563.

Corrigendum

Practice article (*BDJ* 2013; **214**: 551–557)

'Caries detection and diagnosis, sealants and management of the possibly carious fissure'

In the above practice article, the figure captions for Figures 2, 5 and 9 were incorrect. The correct figures captions are as follows:

Fig. 2 Possibly carious occlusal fissure upper right first permanent molar (tooth 16)

Fig. 5 Bitewing radiograph of upper right 6 (16) seen in Figure 2

Fig. 9 A buccal pit in a lower right first permanent molar (tooth 46), which would benefit from having been sealed

The author apologises for any confusion caused.