

cardiac sampling has been associated with lower total WBC and lymphocyte concentrations compared to other sampling sites.^{1,4}

We conclude, based on the results in the present study, that chronic IVIG administration to mice is unlikely to induce significant hematologic deficits.

Sincerely,

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References

1. **Doeing DC, Borowicz JL, Crockett ET.** 2003. Gender dimorphism in differential peripheral blood leukocyte counts in mice using cardiac, tail, foot, and saphenous vein puncture methods. *BMC Clin Pathol* 3:3.
2. **Loeffler DA, Smith LM, Klaver AC, Brzezinski HA, Morrison EI, Coffey MP, Steficek BA, Cook SS.** 2012. Development of antihuman IgG antibodies and hematologic deficits but not clinical abnormalities in C57BL/6 mice after repeated administration of human intravenous immunoglobulin. *Comp Med* 62:31–36.
3. **National Institutes of Health. Office of Animal Care and Use. Animal Research Advisory Committee.** [Internet]. Guidelines for Survival Bleeding of Mice and Rats. [Cited 17 March 2014]. Available at: http://oacu.od.nih.gov/ARAC/documents/Rodent_Bleeding.pdf
4. **Nemzek JA, Bolgos GL, Williams BA, Remick DG.** 2001. Differences in normal values for murine white blood cell counts and other hematological parameters based on sampling site. *Inflamm Res* 50:523–527.

Editors' Note

Linda A Toth and Ravi J Tolwani

In this issue, we are publishing a letter to the editor from Loeffler and colleagues, authors of the article entitled “Development of Antihuman IgG Antibodies and Hematologic Deficits But Not Clinical Abnormalities in C57BL/6 Mice after Repeated Administration of Human Intravenous Immunoglobulin.”¹ The article, which appeared in our February 2012 issue (*Comp Med* 62:31–36), investigated whether repeated administration of intravenous immunoglobulin (IVIG) to mice would induce serum sickness. Since then, the authors have completed a follow-up study with the goal of determining the mechanisms responsible for these hematologic deficits. The authors, however, were not able to replicate their original results and have concluded that chronic IVIG administration to mice is unlikely to induce significant hematologic deficits. Following their discovery, the authors contacted our office to enquire about a mechanism to disseminate these new results.

We would like to commend the authors for making the readership aware of their new findings based on more recent results. We hope the authors' initiative serves as an example of commitment to scientific integrity for future investigations.

Reference

1. **Loeffler DA, Smith LM, Klaver AC, Brzezinski HA, Morrison EI, Coffey MP, Steficek BA, Cook SS.** 2012. Development of antihuman IgG antibodies and hematologic deficits but not clinical abnormalities in C57BL/6 mice after repeated administration of human intravenous immunoglobulin. *Comp Med* 62:31–36.

Letters to the Editor

Letters discuss material published in *CM* in the previous 3 issues. They can be submitted through email (journals@aalas.org) or by regular mail (9190 Crestwyn Hills Dr, Memphis, TN 38125). Letters are not necessarily acknowledged upon receipt nor are the authors necessarily consulted before publication. Whether published in full or part, letters are subject to editing for clarity and space. The authors of the cited article will generally be given an opportunity to respond in the same issue in which the letter is published.

Erratum

In the article entitled “Facilitating Multimodal Preclinical Imaging Studies in Mice by Using an Immobilization Bed.” (**Geoffrey S Nelson, Jessica Perez, Marta V Colomer, Rehan Ali, Edward Graves.** 2011. *Comp Med* 61:499–504), the name of one author was inadvertently published incorrectly.

The authors should appear as: **Geoffrey S Nelson, Jessica Perez, Marta Vilalta, Rehan Ali, Edward Graves.**