

Table 2 Frequency of HLA-A antigens in patients with small-cell lung cancer

	HU + (n = 19)	HU - (n = 30)	p Value
A1	6	10	>0.9999
A2	10	13	0.5688
A3	2	4	>0.9999
A9	6	7	0.5297
A10	1	4	0.6359
A11	1	4	0.6359
A19	7	7	0.346
A28	3	3	0.6649
B5	5	7	>0.9999
B7	1	7	0.1284
B8	5	5	0.4799
B12	4	7	>0.9999
B13	1	2	>0.9999
B14	1	1	>0.9999
B15	3	3	0.6649
B16	1	3	>0.9999
B17	1	3	>0.9999
B18	5	4	0.2816
B21	0	1	>0.9999
B22	1	0	0.3878
B27	1	2	>0.9999
B35	2	2	0.6359
B40	1	1	>0.9999
B41	0	1	>0.9999
B48	0	1	>0.9999
B53	0	1	>0.9999
	(n = 18)	(n = 29)	
DR1	3	6	>0.9999
DR2	5	11	0.5406
DR3	6	7	0.5207
DR4	2	5	0.6918
DR5	4	8	0.7441
DR6	7	9	0.7526
DR7	6	7	0.5207
DR8	1	1	>0.9999

Another explanation for this negative result, which cannot be ruled out, is that we did not analyze appropriate loci because we did not study HLA-C and DQB1. The associations between these HLA antigens and disease, however, also involve the HLA class I A or B and the HLA class II DR alleles,⁶ which we did study.

In summary, our results do not support the HuD antigen being recognized as foreign only by individuals with specific haplotypes. If the HuD antigen is recognized as foreign by all HLA haplotypes, HuD antigen could be appropriately presented on the tumor cells in only a minority of patients with SCLC. Some evidence suggests that the expression of major histocompatibility proteins, which are required to present the antigen to the immune system, is restricted to the tumor cells of patients with PNS¹⁰; this could explain why a small fraction of patients develop an anti-Hu immune response.

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Correction

In the article "The apolipoprotein E $\epsilon 4$ allele is not associated with psychiatric symptoms and extrapyramidal signs in probable Alzheimer's disease" by Lopez et al. (*Neurology* 1997;49:794-797), two errors were noted after publication. In the second paragraph of the Methods section, the first sentence should note that the genotype $\epsilon 3/3$ was present in 78 patients, not 70. In the fourth paragraph of the Results section, the first sentence should note that extrapyramidal signs were examined in 75 patients identified by genotype $\epsilon 3/3$, not $\epsilon 3/4$. Please note that the information regarding the statistical analysis is correct.

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Correction

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