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most of human history. Evidence to support the first statement is based on studies of skeletal remains (1). However, there are problems with interpreting paleodemographic data, including whether the skeletons reflect actual mortality by age and sex in the population being studied and whether mortality in the populations being studied reflects mortality more generally. To construct an accurate life table from skeletons would require all or a random sample of deaths to be found at the burial sites, either a stationary population so that the age distribution of deaths in the population is the same as that in the life table or a stable population with known rate of growth, and accurate estimation of age at death and determination of sex. Evidence against both the first and the second statements is provided by estimated mortality rates from more recent populations with very high mortality but with data whose reliability is far more certain. In Sweden, the country with the longest historical series of reliably recorded mortality data, expectation of life at birth (e_0) for females has exceeded that for males since the first period (1751–1790, when e_0 was 36.6 years for females and 33.7 years for males) that official estimates are available (2). Estimated life tables for other high-mortality populations also show a female advantage; in India [from the first period (1872-1881) for which estimates are available, when e₀ was 25.6 years for females and 23.7 years for males, through 1911-1921 (3)], among immigrants to Liberia [1820-1843, when e₁ was 24.6 years for females and 22.9 years for males who survived the calendar year of arrival (4)], and among the British peerage [from the first period (1550-1574) when estimates are available, when e_0 was 38.2 years for females and 37.8 years for males, through 1700-1724 (5)]. The statistics Mann gives for female and male life expectancy for the United States in 1920 are correct, but the differential favoring females also existed for each year from 1900 to 1919 (6). Although there are no official national estimates before 1900, when the national death registration area was established, estimated life expectancy for females has exceeded that for males in Massachusetts since the first year (1850) that estimates are available (5). In 1995, expectation of life at birth for females is estimated to exceed that for males in every country except Bangladesh, Bhutan, India, Nepal, and Pakistan (7). Discrimination against females in South Asia has long been recognized by demographers as the source of this anomaly. James Trussell

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MHC Class I Gene Expression

Harald Neumann *et al.* (Reports, 28 July, p. 549) elegantly demonstrate that major histocompatibility complex (MHC) class I genes are expressed by a portion of neurons cultured from the rat hippocampus. Cells expressing the MHC class I antigen did not exhibit spontaneous action potentials, while neurons that did not express the antigen had spontaneous action potentials. Treatment of electrically "silent" cells with gamma interferon increased expression of MHC.

We have previously demonstrated (1) that neurons of murine trisomy 16 (mts16) fetuses (16 to 18 days after conception) in vivo expressed large amounts of class I MHC H-2Kk antigen and increased synthesis of messenger RNA that binds a 33-base antisense complementary DNA probe to a region in exon 2 of the H-2Kk sequence. The reactive neurons were from the trigeminal ganglion, thalamus, and cerebellum. This finding is related to the report by Neumann et al. because mts16 animals have an increased gene dosage for interferon alpha and beta receptors (2); both interferons increase expression of class I MHC antigens, and an increased gene dosage for the receptor may cause cells to respond in a manner similar to that observed when high doses of interferons are administered.

An implication of the findings of Neumann *et al.* is that expression of class I MHC molecules occurs in functionally impaired neurons. The cerebellum is one of the more developmentally disturbed regions in mts16 brain (1). The neural dysgenesis seen in mts16 conceptuses may be a consequence of high numbers of interferon receptors on these cells and the resulting increase in MHC class I expression. Alternatively, it may result from other factors.

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Corrections and Clarifications

- In the editorial "In transition" by Barbara Jasny (20 Oct., p. 359), the genus of the organism Mycoplasma genitalium was inadvertently given as "Mycobacterium" in the last line of the first paragraph.
- In the first report listed in the Table of Contents in the issue of 13 October (p. 211), the name of author C. M. Lieber was misspelled.
- The URL address listed for Pete Goldie in his letter of 13 October (p. 218) was incorrect. It should have read, "http://lbin.com"
- In the Research News article "Designer tissues take hold" by Robert F. Service (13 Oct., p. 230), Katherine Tweden's name was spelled incorrectly. Also, her experimental results were completed in 3 weeks, not 33.
- In Paul Selvin's article "The future university: Leaner and meaner?" (Careers '95: The future

of the Ph.D., 6 Oct., p. 135) it was reported that the University of Michigan's Institute for Mental Health Research was closed during the 1980s. In fact, the institute is now celebrating its 40th anniversary. The institute that was closed was the Institute for the Study of Mental Retardation and Related Disabilities, which had formerly been the Institute for the Study of Mental Retardation. Science regrets the error.

ETTERS

In the Book Reviews section of 13 October, the two photographs at the bottom of page 319 were inadvertently interchanged.

The News article "Wing scales may help beat the heat" by Wade Roush (29 Sept., p. 1816), should have described Urania fulgens as a moth, not a butterfly.

Letters to the Editor

Letters may be submitted by e-mail (at science_letters@aaas.org), fax (202-289-7562), or regular mail (Science, 1333 H Street, NW, Washington, DC 20005). Letters will not be routinely acknowledged. Full addresses, signatures, and daytime phone numbers should be included. Letters should be brief (300 words or less) and may be edited for reasons of clarity or space. Beginning in October 1995, our previous policy of consulting with all letter authors before publication will be discontinued.

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