

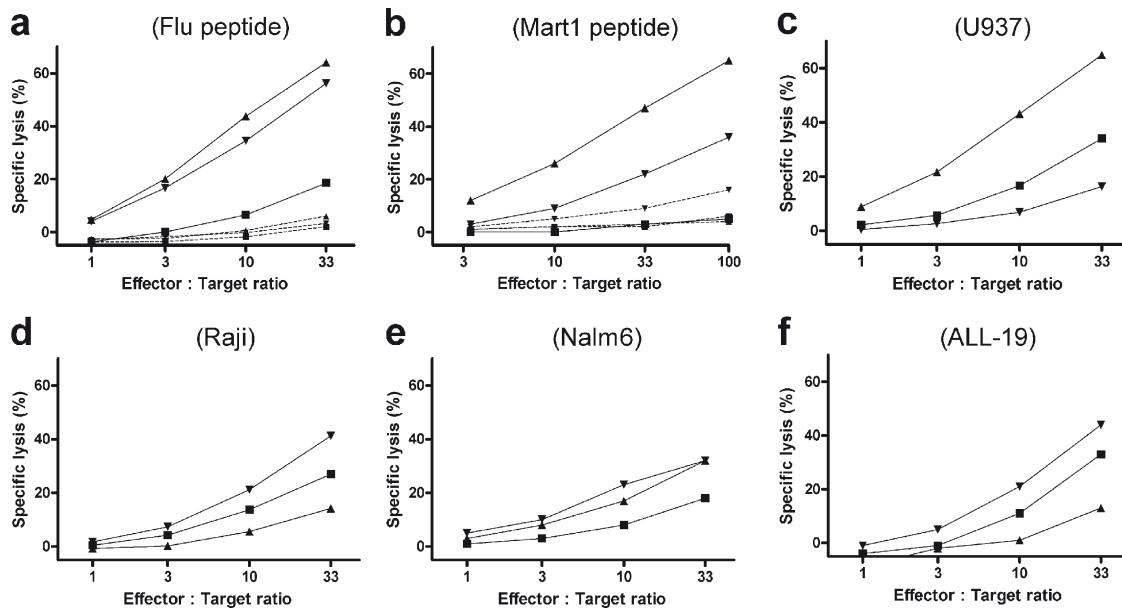
## Antibody to the dendritic cell surface activation antigen CD83 prevents acute graft-versus-host disease

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Due to clerical error, incorrect data were displayed in the original Figure 6, panel d, resulting in the inadvertent duplication of data in panels a and d. The corrected figure is below.

In addition, on page 394, paragraph three, the final sentence should read, “For each of the four leukemic cell lines tested, cells from RA83-treated mice produced T cell–mediated lytic responses and, for two of the cell lines, these responses were equal to or greater than those from the cells from RAneg-treated hu-SCID mice (Fig. 6, c–f).”



**Figure 6.** RA83 treatment of hu-SCID mice did not impair subsequent in vitro induction of antiviral and allo antileukemic cytotoxic T cell effectors from cells recovered from hu-SCID mice. 10-d posttransplant hu-SCID mice treated with 125  $\mu$ g RA83 ( $n = 19$  mice; GVHD score = 0.5 on day 9) or RAneg ( $n = 5$  mice; GVHD score = 3.25 on day 9) were killed, cells from spleen, bone marrow, and peritoneal washings were combined, and human leukocytes recovered (see Materials and methods). These cells and, as a control, an equal number of freshly thawed PBMC from the same donor, were stimulated in vitro with irradiated autologous PBMC plus either peptide antigen or irradiated leukemic cell lines. After two rounds of stimulation, T cell–mediated lysis of FMP peptide-loaded T2 cells (a), U937 (c), Raji (d), Nalm6 (e), and ALL-19 (a human primary ALL passaged in NOD-SCID mice [reference 40]; f) leukemic cell lines was measured by  $^{51}\text{Cr}$  release assay. Specific killing of T2 cells loaded with peptide from the naïve melanoma-associated antigen Mart1 was assayed after four rounds of stimulation (b). (▲, RA83; ▼, RAneg; ■, freshly thawed donor PBMC). Dashed lines in a and b show minimal lysis of T2 cells loaded with irrelevant HIV peptide (RA83,  $P < 0.01$  for FMP and 0.001 for Mart1 compared with HIV). Data are from one representative experiment of three using one HLA-A\*0201+ PBMC donor.