carrier rate of HIB and other encapsulated organisms including pneumococci, meningococci, and *E. coli*, since it is sensitive, highly specific, and allows rapid testing of many specimens. The results of our HIB pharyngeal carrier study also demonstrate the potential of this medium for semiquantitative studies. Other applications include studies of the role of HIB in such conditions as pneumonia, sinusitis, conjunctivitis, and orbital cellulitis of childhood.

SUMMARY

An antiserum agar medium was found to provide a rapid, sensitive, and highly specific method for pharyngeal culture and quantitation of HIB.

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Letter to the Editor

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The report by Dr. Cox *et al.* (1) of chromosomal mosaicism in amniotic fluid cell cultures prompts us to report our experience with similar specimens.

In a series of 350 cultures of amniotic fluid cells, 5 showed the presence of cells with abnormal chromosome complements. Four of these demonstrated trisomy 2, the fifth involved a possible isochromosome D. In each case the abnormal cells were restricted to a single colony.

We agree with the necessity of establishing the karyotype by analyzing cells from discrete colonies in preparations processed *in situ*. This procedure will also make possible the identification of maternal cells which might contaminate the culture.

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Corrigendum

Responsivity of Pituitary Gonadotropes to Luteinizing Hormone-releasing Factor in Idiopathic Precocious Puberty, Precocious Thelarche, Precocious Adrenarche, and in Patients Treated with Medroxyprogesterone Acetate

By E. O. Reiter *et al.*

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p. 114— —In Table 4, for steroid levels in adrenarche, the values 19, 56, and <15, which appear under E_1, should have appeared under T, and the values 40, 141, and <100, which appeared under E_2, should have appeared under 17-OHP.

p. 115— —In Table 5, values for female patients in the last column are measures of estradiol levels in ng/ml rather than of testosterone in ng/dl.