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National Institutes of Health
National Cancer Institute
Bethesda, Maryland 20892

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H.H. EXECUTIVE SECRETARIAT

Dr. Harold E. Varmus, Director
National Institutes of Health
9000 Rockville Pike
Building 1, Room 126
Bethesda, MD 20892

Dear Dr. Varmus,

You were influenced in a negative way concerning statements attributed to me about culturing LAV or the lack of culturing LAV in my laboratory.

I have felt that this point in the discussion in the Popovic et al paper (for which I have taken full responsibility) was self-evident, as referring to the French not to Popovic's success, and I hope and believe that most readers understood it in that manner. Denials by me elsewhere of culturing LAV always meant we did not (as far as I know then or know now) intentionally continuously grow "LAV", i.e., misappropriate it for the blood test. I believed this was the only concern of any rational person.

However, in any event, when our four Science papers were submitted in March '84 my understanding about "LAV" culturing by Popovic was very meager, and it was my understanding that it was only for a short period (some days rather than some weeks). Indeed, I never discussed it in any detail with Popovic who has acknowledged I also knew we had many isolates of our own, including some in cell lines growing continuously. These were not only the "pool" virus (IIIB) which we selected for the blood test (which I could not know was contaminated with LAI, a French earlier and unknown contamination of their own LAV!) but also included other isolates like RF.

I am writing this letter now to enclose three documents: (1) a letter of June '84 from Montagnier to Nature, (2) a pre-print typed at the Pasteur Institute in June 1984 of a planned joint publication between Montagnier et al me and my colleagues in which we compared the antigenic relatedness of their "LAV" (really LAI) and isolates from our lab. (Montagnier decided not to publish this which I have in writing); (3) comparison chart which Montagnier and Sarngadharan prepared. However, the French knew "LAV" was in a cell line from our laboratory, and they proved they knew by June 1984. Indeed, I believe I told this to Chermann (Montagnier's former co-worker) in April '84 when I visited Paris to tell them about our results. Chermann has confirmed this, and I believe he will do so now - again. I first learned "LAV" had been grown by Popovic in a cell line only in January '84 i.e. only a few months before Montagnier, and as I said my information about it was meager. Moreover, I sincerely believed it was irrelevant to our work and only of a very short duration.

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Lack of understanding about what I knew and exaggerations of the importance of the "LAV" culturing have produced distortions which have caused me considerable harm. I hope you will help correct this.

A second point is whether I knew LAV (really LAI) was the same subtype as some of our isolates. Of course, this was a strong suspicion. However, we needed to do antigenic, and molecular comparisons with the French, and I arranged to do so immediately upon submission of our papers. This is one reason why I went to Paris (April 1984) and sent my Colleague Sarngadharan to Paris with reagents and with IIB in H9 cells (May 1984). Indeed, that led to the data in the enclosed pre-print and a molecular analysis draft paper (Wong-Staal et al) which also was not published. (Montagnier believed that the sequence data soon to come out with make our collaboration comparisons superfluous). Nonetheless, there were many conflicting data suggesting that they might be different subtypes (like HTLV-1 and HTLV-2 or like HIV-2 is to HIV-1). One example is the enclosed comparison in Montagnier's handwriting - done with Sarngadharan in May '84 in which he argues then (as he did in early April '84 when we met) that LAV had no gp41. This was his error. Of course, gp41 was one of the main antigens in our blood test, and it is the transmembrane portion of the HIV envelope. Obviously, there are still other things which are brought up which also do harm. Virtually every one of these have been misrepresented, and I believe it is intentional.

Sincerely,



Robert C. Gallo, M.D.
Chief
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