



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

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Dr. Luc Montagnier
Institut Pasteur
25 Rue Du Docteur Roux
Paris, France

Dear Luc:

I agree with everything as you have sent it to me except for:

1. A very minor correction in p. 3, paragraph 1, last sentence. Regarding HTLV-II isolation: as I wrote this, it may appear that HTLV-II is simply a second isolates (of HTLV-I). Before I had Popovic's reference included which was a numerous new isolate of HTLV-I from many patients and permanent growth of HTLV-I (in cell lines). You and I agreed that I would remove this reference and discussion since it was not so critical. However, removal causes confusion in the HTLV-II. Therefore, I simply add the phrase second "type of retrovirus." I am sure this is agreeable to you because it adds nothing; is true; and makes the matter clear.
2. On p. 5: Regarding the May 1984 reports from my group I have double-spaced each publication to be consistent with all others in this chronology. I have put the precise reference after each one. I have added Popovic's name to references 3 and 4; and I have noted that gp41 was identified as a major antigen associated with the virus. The latter, is the only new point I have changed (substantially) and it is in keeping with what was my interpretation of our discussion. It is true and it is an important as mentioning p. 18 or p. 24 in your reports (earlier). I am satisfied with your reference to Levy. It is fair, and it is accurate.

You mention that you proposed that I cut two references for balance so as to stop in January 1985. Although your point is not unreasonable, the gp41 as a component of the viral envelope and heterosexual transmission are, of course, were not only important then, they remain very important today. Regarding a balance: yes, I agree with you, we have 19 and you have 13 on AIDS only. However, you have the key earliest and included in my 19 AIDS references are four which have to do with a putative HTLV-I variant and not with the causative agent. Moreover,

in fact there is not a more or less balance in number of lines on the key AIDS papers. Your group has 52. Mine has 33, which is only a little better than half. If you include my HTLV-I (presumed variant) AIDS papers (which does not help me), then we have 39 lines, which is only 3/4 of yours. Finally, not that our group is better, but we did publish many more papers during that key period than any other group.

So Luc, it appears it all depends on the angle one looks from. Therefore, I suggest we keep it as we agreed. I think it is fair to both in balance. I have signed it, and please do the same, and let's send it to John Maddox immediately. I have spoken to every one here and everyone agrees to send it in now.

With kind regards and looking forward to many future discussions and happy meetings with you.

Sincerely yours,



Robert C. Gallo, M.D.