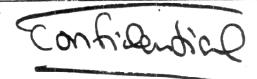
DEPARTMENT OF HEALTH SERVICES
2151 BERKELEY WAY
BERKELEY, CA 94704





September 5, 1985

James Curran M.D., M.P.H. Chief, AIDS Branch Room 288, Building 6 Centers for Disease Control Atlanta, GA 30333

Dear Jim.

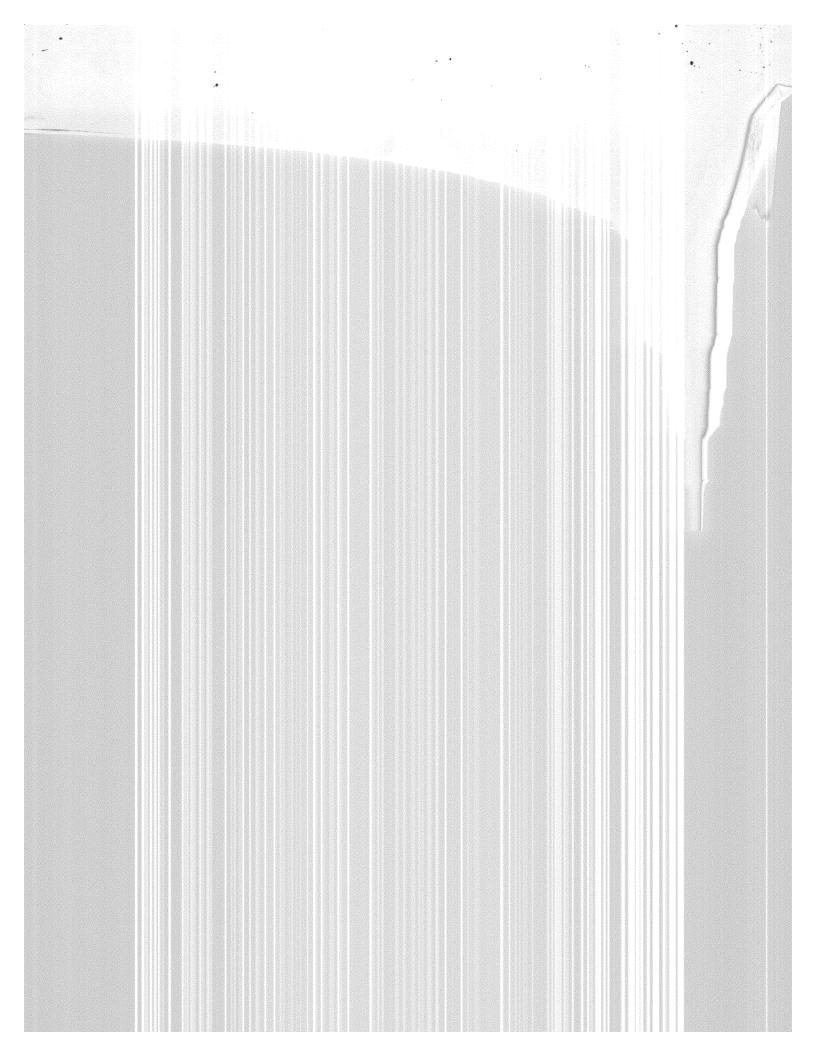
Enclosed are some of the material which documents collaboration between the Institut Pasteur and CDC. There is more somewhere in my moved material, but this is all I could find today.

I am not familiar with the legal issues being addressed by the French litigation, but there are really important ethical and scientific issues that the Public Health Service should consider before putting up a strong defense. I am sure that I am not alone in believing that Bob Gallo exceeded ethical bounds in his dealings with the French. If this litigation gets into open court, all of the less-than-admirable aspects will become public and. I think, hurt science and the Public Health Service. The French clearly found the cause of AIDS first and Dr. Gallo clearly tried to upstage them one year later. The major questions that could come out in public are:

- 1. Is HTLV-III actually derived from a culture of LAV?

 LAV was certainly sent to Gallo's lab. The nucleic acid sequences of the two isolates (LAV and HTLV-III) are identical (variations within accuracy of assay systems). No other isolates are identical. Could this occur by chance? Probably not.
- 2. Did Dr. Gallo practice good scientific ethics regarding this subject?

 Science must build on the work of others. It is accepted practice to acknowledge the work of others. Gallo was certainly aware of the French work. He reviewed their first paper, co-edited a book with the earliest serologic description and was consulted by phone and in person on multiple occasions. Yet, he was very reluctant to acknowledge their work in his papers and in his presentations. In fact, he actually depricated their work. The major question is: did he, in fact suspect that the two viruses were the same? Before his press conference and his papers he knew the highly unusual morphology of the two isolates was the same. He knew that CDC-supplied sera from patients reacted to ELISA antigens in a similar manner and he knew (by conversations with you and me before his press conference) that other American Isolates (CDC) were indistinguishable by competition RIA.



Even with the knowledge that they were the same virus, he actively prevented the comparison which is required by ethical scientific practices. He was very reluctant to send his virus to Paris. He was reluctant to send it to CDC and only did so after making us promise not to use our comparative assay (RIA) which was the only one available at the time.

With these serious violations of normal practices, we should caution the PHS regarding their defense of the NCI stance.

Sincepel

Donald P. Francis, M.D., D.Sc.

AIDS Advisor

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