Dr. Albert B. Sabin
Children's Hospital Research Foundation
University of Cincinnati College of Medicine
Cincinnati 29, Ohio

Dear Doctor Sabin:

Our laboratory has recently become involved in a study of human and animal mycoplasma strains. In conversation with Dr. Isaac Ruchman earlier this year, he indicated that he had retained two vials of lyophilized type A and C mouse PPLO from your laboratory in the early 1940s. These cultures had been dried in 1943 and he had retained them when the bulk of the cultures proved to be nonviable. We persuaded him to part with these two vials and in early June were successful in recovering PPLO from both the A and C types. At the present time these cultures are in the 32nd passage and appear to conform very closely to the characteristics you originally described for them.

We have recently secured a decendent of the second Findlay-Klieneberger L5 strain (PG-28) from Dr. Chanock, as well as the KSA strain of Lemcke (J. Hygiene, vol. 59, 401, 1961) which also appears to be a strain of Mycoplasma neurolyticum. The type A strain isolated is immunologically related to both PG-28 and KSA strains but unrelated to the type C strain by both fluorescent antibody and agglutination tests. In addition, we have succeeded in reproducing rolling disease in mice with both the type A and KSA strains. Undiluted fluid cultures of these strains given intravenously to young mice will kill 100% of mice within a few hours and all will demonstrate the neurological syndrome.

While the type A strain can be related to other serotypes of mycoplasma and will produce rolling disease, we have only the morphological characteristics of the C strain on which to base our identification of the recovered PPLO. We have not had success in inducing arthritis in mice with this strain and it does not appear related to the L4 rat strain or other mycoplasma.

I believe there is little doubt that we are dealing with both the A and C strains you originally isolated. We would, however, like to positively relate the C strain, if possible, to the original culture.
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one of Dr. Freundt's publications he indicated you still had antiserum to these strains. If a small amount of type A and C antiserum still exists, we would greatly appreciate receiving an amount sufficient for indirect fluorescent antibody tests. I will be glad to let you know the results of these tests.

Very sincerely,

Joseph G. Tully, Ph.D.
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