

THE CHILDREN'S HOSPITAL RESEARCH FOUNDATION  
ELLAND AVE. AND BETHESDA  
CINCINNATI 29, OHIO

COPY

May 26, 1955

Dr. Henry W. Kumm  
The National Foundation for  
Infantile Paralysis  
120 Broadway  
New York 5, N. Y.

Dear Henry:

When I saw you in New York last week I told you of my desire to meet with appropriate members of either the "virus committee" or the "vaccine advisory committee" to discuss the general plan of future work with attenuated strains of poliomyelitis virus in human volunteers for the remainder of 1955, as well as for 1956, in the light of the results I have obtained thus far. After a private discussion early in April, Dr. Rivers told me that the authorization which I now have from the NFIP for studies in human volunteers applied only to the 3 strains with which I have worked thus far, and that studies on new strains would have to be approved by the appropriate committee of the NFIP. For reasons that are inherent in the results I have obtained thus far, I believe that the next step should consist of a study of additional monkey-intracerebrally avirulent strains in human volunteers. I now have two strains of Type 1, one of Type 2, and one of Type 3 polio virus recovered from American children who had no contact with clinically diagnosed cases of poliomyelitis, as well as the Li and Schaeffer L5c derivative of Mahoney virus, which have been studied in monkeys and chimpanzees and are suitable candidates for human investigations. Results which I have recently obtained in human volunteers possessing barely detectable or low levels of antibody as a result of natural infection or ingestion of one of my attenuated viruses, indicate that no virus multiplication may occur in the throat or in the lower alimentary tract or in both sites when the dose of ingested virus contains less than  $10^7$  TCD<sub>50</sub>. This means that any quantitative comparative studies on different strains of virus in human volunteers must be carried out in individuals without demonstrable antibody unless it can be shown that low levels of antibody resulting from killed virus vaccine do not interfere with multiplication of  $10^6$  to  $10^7$  TCD<sub>50</sub> of ingested virus in human beings.

My work at the Chillicothe Reformatory, which provides an excellent place for studies on young human adults, would have to stop unless I obtain the required authorization from the appropriate NFIP committee whose counsel I am seeking. I have just discussed this matter with Dr. Rivers over the phone, and he indicated that in his opinion the "virus research" committee would be the appropriate committee. I shall be in Atlantic City on June 7 for the A.M.A. poliomyelitis symposium, and if it is at all feasible, would appreciate it if such a conference could be arranged for June 8.

Sincerely yours,

ABS/jab

cc: Dr. Thomas M. Rivers

Albert B. Sabin, M.D.