



Medical College of Virginia
Virginia Commonwealth University

5/5/86

Perry A. Chapdelaine, Sr.
Executive Director/Secretary
Rheumatoid Disease Foundation
Rt. 4, Box 137
Franklin, TN 37064

Dear Mr. Chapdelaine:

I have received your detailed letter of April 19 and following closely after, a letter and phone call from Dr. Pybus. I understand that you and Dr. Pybus plan to visit MCV on July 3. I had planned to be away from the latter part of June until mid-July. Each year about that time we take a family vacation in the mountains where we have a time-share arrangement, which this year falls during the week of 6/28-7/5. The week of 7/6-7/13 I will be attending the 6th International Congress on Immunology in Toronto. I tell you this in case there is a change in Dr. Pybus's itinerary. Recognizing the importance of Dr. Pybus's visit, the extraordinary lengths he has to travel, and the timeliness of the visit relative to the RDF seminar July 16-19, however, I will be at your disposal on the third.

Certainly we have much to discuss. I have enclosed a copy of the interim report which I sent Dr. Pybus. Apparently no one has been able to confirm Dr. Wyburn-Mason's identification of limax amoebae in rheumatoid tissues. From your letter of 4/19 and from talking with Dr. Pybus, I believe we are thinking along similar lines insofar as the direction for future basic research efforts. I refer you to a letter written March 8, 1985, in response to certain questions you had after reviewing my initial proposal. The second to last paragraph reads:

Finally, you raise the relevant and appropriate question of what if, despite our diligent efforts, attempts to isolate the amoeba are unsuccessful. For verification of the Wyburn-Mason hypothesis isolation of the putative pathogen is crucial. This is the explicit reason for choosing the specific aims advocated in the proposal, even while recognizing the potential impasse. There is room, however, for lateral thinking. The cooperative interactions between pathologists, rheumatologists, and basic scientists involved in initiating this project will automatically result in the generation of new ideas and approaches. Therefore if we run into a predicament, after consultation with my collaborators I would channel the course of the investigation along new lines where it is felt progress can be made. An alternative area of investigation consistent with the accumulated expertise of the group, for example, would be an examination of the effects of anti-amoebic medications used as a part

of the Foundation's recommended therapy on the subsets of cells (T cells, B cells, macrophages, etc.) mediating and regulating the inflammatory reaction of the synovium in rheumatoid disease. At the time of such an eventuality we would specify our new research initiatives for the Foundation's directorate. Overall, I feel confident that we will be able to make progress in a direction consistent with objectives of the Foundation, and funds granted by the Foundation will be spent consonantly.

Perhaps we have arrived at that point. It will certainly be an important topic for our discussion July 3, and I will have detailed suggestions for new directions to pursue. (Indeed, we could initiate a new line of investigation while you are here at MCV by, as suggested in your letter, running tests, to determine whether you demonstrate a significantly elevated immune reactivity to antigens from species of free-living limax amebae.)

Thank you for your continued support and encouragement.

Sincerely yours,



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