

Destruction of Isolates from the Pittsburgh Veterans Affairs Laboratory

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The Pittsburgh Veterans Affairs hospital administration closed the research laboratory directed by Victor Yu and Janet Stout and destroyed isolates collected as part of a series of clinical studies over 25 years. This article discusses the implications and protests such destruction as an affront to science and scientific study. A petition signed by 243 individuals accompanies this article.

The Pittsburgh Veterans Affairs (VA) Special Pathogens Laboratory, headed by Victor Yu, MD, and Janet E. Stout, PhD, was terminated by the Pittsburgh VA administration in July 2007, under protest from Dr. Yu. During the administrative dispute, the collection of clinical specimens and microbiological isolates obtained by investigators from around the world were destroyed. These materials were collected as part of numerous prospective observational studies and infection control–related studies. For almost 30 years, Drs. Yu and Stout set the standards for our understanding of the epidemiology of *Legionella* infection, as well as for our understanding of the control of environmental *Legionella* infection.

Dr. Yu also established a series of national and international collaborations to elucidate our understanding of the microbiological and clinical management issues of bacteremia due to many different or-

ganisms. These studies were seminal in many respects. They changed our understanding of the relationship between appropriate and inappropriate therapy, the relationship between the MICs of isolates and outcome, the molecular epidemiology of relapse and reinfection, and the relatedness of strains throughout the world. The studies are far too numerous to articulate in detail or even to list here in total, but they include studies of the major pathogens that confound us today, including *Staphylococcus aureus*, *Pseudomonas aeruginosa*, extended-spectrum β -lactamase–producing *Klebsiella pneumoniae*, *Enterobacter* species, *Stenotrophomonas maltophilia*, *Enterococcus* species, *Bacteroides fragilis*, *Streptococcus pneumoniae*, and *Candida* species. The concept was simple: observe the clinical presentation of bacteremia or fungemia, and follow outcomes while correlating the microbiology to the outcome. The studies were all prospective, and the isolates were collected and sent to a central laboratory for more-definitive analysis. Each of the studies emanating from this collection has changed our knowledge base and has contributed significantly toward optimal treatment of patients with these infections. Moreover, the careers of a number of

prominent academicians were launched when they coordinated these large-scale studies and had the opportunity to analyze the data as trainees.

Capturing the isolates and making sure they were sent to the laboratory was an important and difficult task—especially for fastidious organisms like *S. pneumoniae* and *Bacteroides* species. Given the international component, as well the requirements for sending specimens across national borders, these studies were difficult to perform. All studies were approved in accordance with local institutional review board requirements, and permits were obtained from regulatory authorities. Nevertheless, the number of studies and important insights total >100 peer-review articles (see References [online only] for selected articles) and have provided important information that correlates outcome with the use of certain antibiotic classes, as well as levels of susceptibility. Some of the studies challenged prevailing dogma and helped provide data for the Clinical and Laboratory Standards Institute.

All of these isolates, many of which were still being studied, were destroyed. The samples were incinerated without warning or notification to Drs. Yu and Stout, such

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that it became an irrevocable action. These isolates were accrued purely for the advancement of science, and the beneficiaries of these studies were the patients infected with these microbes. Moreover, these isolates and samples would have proven to be invaluable in the future, because having these strains would enable comparison over time, for changes in pathogen virulence, antimicrobial susceptibility correlation with outcome, and changing genetic diversity, as well as the development of new molecular tests. Their destruction can by no means be considered to be justifiable. Add your name to the petition or review details at the Call for Inquiry Web site (<http://www.legionella.org/vaspl.asp>). It is in this context that this petition is being published.

PETITION FOR VA ACCOUNTABILITY

We, the undersigned, respectfully request that VA Central Office convene an investigative committee to review the actions of the Pittsburgh VA Healthcare System regarding the closure of the Special Pathogens Laboratory and the destruction of a scientifically valuable collection of microorganisms.

The collection of microorganisms was created and preserved by Victor L. Yu, MD and Janet E. Stout, PhD over a 25-year period in the Special Pathogens Laboratory in Pittsburgh. The entire collection was incinerated without informing Drs. Yu and Stout. This action was taken despite efforts by Drs. Yu and Stout to appropriately transfer the collection to the University of Pittsburgh.

The collection contained stored patient sera, urine samples from patients infected by unusual *Legionella* species and respiratory tract specimens yielding rare *Legionella* species dating back to 1979. Among the several thousand *Legionella* isolates destroyed were environmental and patient isolates from 20 VA hospitals experiencing outbreaks of hospital-acquired Legionnaires' disease. For some of us, *Le-*

gionella isolates from our VA hospital were among those destroyed.

These *Legionella* isolates and specimens were being stored for future epidemiologic investigation; providing an invaluable resource for elucidating the source of Legionnaires' disease at VA Medical Centers. As importantly, emergence of resistance of *Legionella* to disinfectants has been reported by us and the storage of the original isolates from each hospital allows documentation of this possibility in the event of failure of disinfection. Finally, molecular fingerprinting would allow individual VA hospitals to ascertain the source of the infecting *Legionella* in VA patients should future outbreaks occur.

Among the isolates in the collection were several thousand well-characterized microorganisms from multinational observational studies. These disease-causing strains of *Pseudomonas aeruginosa*, *Enterobacter* species, *Enterococcus* species, *Bacteroides fragilis*, *Stenotrophomonas maltophilia*, *Klebsiella* species, *Candida* species and *Cryptococcus neoformans* were also destroyed.

This unique collection of specimens and isolates were being used to develop new diagnostic tests, new therapies, and to study resistance and mechanisms of disease transmission. The results of these studies benefited veterans nationwide.

To remove the appearance of impropriety, we request that an outside scientific body with no relationship to the VA be convened to ascertain the appropriateness of this action.

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