JID 2001;183 (15 June)

## Correspondence

approximately 330 kDa protein are linked to chloroquine-resistant P. fal-

- *ciparum* in Southeast Asia and Africa. Cell **1997**;91:593–603.
  6. Fidock AD, Nomura T, Talley KA, et al. Mutations in the *P. falciparum* digestive vacuole transmembrane protein PfCRT and evidence for their role in chloroquine resistance. Mol Cell **2000**;6:861–71.
- Djimdé A, Doumbo OK, Cortese JF, et al. A molecular marker for chloroquine-resistant falciparum malaria. N Engl J Med 2001;344:257–63.

All patients signed an informed consent statement.

Reprints or correspondence: Dr. Mariano Gustavo Zalis, Malaria Laboratory, Universidade Federal do Rio de Janeiro, Brazil (mgzalis@IBCCF.biof.ufrj.br).

The Journal of Infectious Diseases 2001;183:1832-3

© 2001 by the Infectious Diseases Society of America. All rights reserved. 0022-1899/2001/18312-0021\$02.00

## Investigations of Axillary and Inguinal Adenopathies during Primary Human Immunodeficiency Virus Infection: Other Lymphadenopathies Could Bring Additional Information

To the Editor—We read with interest the study by Schacker et al. [1] on the production of human immunodeficiency virus (HIV)–infected T cells in lymphoid tissues (LTs) during primary HIV infection. However, we would like to add a comment on the choice of LT analyzed. In that study, biopsies were performed on axillary and inguinal adenopathies, which are the most common sites explored because of relatively easy access. We reported that, after univariate analysis, supraclavicular adenopathy diagnosed at the time of primary HIV infection was highly associated with the progression to AIDS [2]. Thus, we think that, to complete the data of Schacker et al., immunological and viral investigations on supraclavicular adenopathies would be desirable.

If investigations show that acute pathogenetic mechanisms observed in cervical or inguinal adenopathies differ from those in supraclavicular adenopathies, the respective role of LTs in the early stage of HIV infection would bring additional information for explaining disease progression.

Philippe Vanhems<sup>1</sup> and Bernard Hirschel<sup>2</sup>

<sup>1</sup>Laboratory of Epidemiology and Public Health, INSERM U271, Université Claude Bernard, and Epidemiology Unit, Edouard Herriot Hospital, Lyon, France; <sup>2</sup>Division of Infectious Diseases, University Hospital, Geneva, Switzerland

## References

- Schacker T, Little S, Connick E, et al. Productive infection of T cells in lymphoid tissues during primary and early human immunodeficiency virus infection. J Infect Dis 2001;183:555–62.
- Vanhems P, Lambert J, Cooper DA, et al. Acute HIV-1 illness severity and prognosis: a dose-response effect. Clin Infect Dis 1998;26:323–9.

Reprints or correspondence: Dr. Philippe Vanhems, Laboratory of Epidemiology and Public Health, INSERM U271, Université Claude Bernard, 8 ave. Rockefeller, Lyon Cedex 08, 69373, France (philipva@lyon-sud.univ-lyon1.fr).

## The Journal of Infectious Diseases 2001;183:1833

© 2001 by the Infectious Diseases Society of America. All rights reserved. 0022-1899/2001/18312-0022\$02.00

1833