

with receipt of genetically engineered factor concentrates or of albumin, the only human plasma-derived material present in these recombinant products. The child in this report had received only recombinant product during the period in which infection was likely to have been acquired.

HIV infection has been acquired through percutaneous exposure during home treatment of patients with AIDS and hemophilia. The report highlights the need for proper infection control procedures to reduce risk of blood-borne pathogen transmission during home infusion therapy.

FROM: CDC. Transmission of hepatitis C virus infection associated with home infusion therapy for hemophilia. *MMWR* 1997;46:597-599.

## HIV Transmission From Deep Kissing?

Investigators from the CDC recently reported a case of HIV transmission from an HIV-infected man to his uninfected female sexual partner. They were enrolled in a study for couples with one HIV-infected partner and one noninfected partner and were counseled extensively and tested periodically for HIV. Information was obtained separately from each partner by two independent interviews during the investigation and from study records before they were aware of HIV transmission. The couple reported using latex condoms during sex, usually with the spermicide nonoxynol-9. Neither reported condom breakage or slippage during the time period that transmission likely occurred, and both denied having had anal sex. The couple did engage in deep kissing (open mouth to open mouth). The man indicated that his gums frequently bled after he brushed and flossed his teeth at night before they engaged in sexual intercourse and deep kissing. The man had been infected since 1988 as a result of injecting drugs, and he reported long-standing poor dentition and occasional sores in his mouth. The woman underwent dental evaluation in August 1994 and was diagnosed with periodontitis with inflamed gingival mucosa. The dentist was negative for HIV.

Although the exact route of transmission cannot be determined after an epidemiological investigation, the most likely possibility is that the woman became infected through oral mucous membrane exposure to the man's saliva, which was contaminated by blood from his bleeding gums, or by exudate from undetected oral lesions. Exposure to saliva uncontaminated with blood is considered to be a rare mode of HIV transmission for a number of reasons, including the following: (1) saliva inhibits HIV infectivity; (2) HIV is isolated infrequently from saliva; (3) none of the approximately 500,000 cases of AIDS reported

to the CDC have been attributed to exposure to saliva; (4) levels of HIV are low in saliva of HIV-infected persons, even in the presence of periodontal disease; and (5) transmission of HIV in association with kissing has not been documented in studies of nonsexual household contacts of HIV-infected persons.

Other routes of exposure to the man's semen or blood cannot be excluded definitely, including vaginal intercourse (both partners reported consistent condom use) and sharing toothbrushes or razors (the woman reported that shared use of these items occurred only once).

FROM: Centers for Disease Control and Prevention. Transmission of HIV possibly associated with exposure of mucous membrane to contaminated blood. *MMWR* 1997;46:620-623.

## Russia to Open New TB Center

Two new laboratories are scheduled to be built in Moscow to study tuberculosis and hospital-acquired infections. Funding for these laboratories came from a donation of \$3 million by philanthropist George Soros. The funds will be administered by the nonprofit Public Health Research Institute (PHRI) located in New York City and are intended to increase Russia's capability to deal with these infectious diseases.

Since the Soviet Union dissolved in 1991, Russia's medical community has not been able to control the rise of TB, diphtheria, and other infectious diseases adequately. The annual number of new TB cases reportedly has increased by 42% from 1991 to 1994; the death rate, 87%. The tuberculosis laboratory will be located at the Central Institute of Lung Disease in Moscow and the hospital-acquired infections laboratory at the First Moscow Medical Academy. If PHRI can raise another \$5 million, Soros will match it with \$2 million more. PHRI emphasizes that more funds will be needed and points out that New York City has spent nearly \$1 billion in the past few years to upgrade its facilities for fighting TB's resurgence, even though New York was much better equipped at the start than is Moscow.

FROM: Holden C. Russia to get new TB center. *Science* 1997;227:185.

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*Additional news items in this issue: Microbiological Factors and Mortality of Septicemia, page 621; Check Out These Web Sites, page 632; The HIV Postexposure Prophylaxis Registry, page 636.*

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