

Table 1. Patients' characteristics

Patients (sex/age)	Site of tumour	Cells injected ( $\times 10^6$ )	Day of infusion	Response
1 (M/20)	Nodule	12	40	SD (1 month)
2 (M/52)	Nodule	62	40	PD
3 (F/34)	Nodule	150	40	PD
4 (F/36)	Lymph node	86	40	PD
5 (F/42)	Nodule	63	35	SD (1 month)
6 (F/54)	Lymph node	42	35	PD
7 (F/54)	Lymph node	58	30	PD

SD = stable disease, PD = progressive disease.

We have cultured 10 tumour samples from such non-responders to obtain TIL. Only 7 out of 10 patients received a TIL infusion and were evaluable (Table 1). In the 3 non-infused patients, 1 had progressive disease during TIL culture, 1 had two samples cultured at one month without TIL development and, for the third, growth was insufficient. All patients, except 1 (no. 7), had an IL2 infusion ( $16 \times 10^6/\text{m}^2$  per day) over 4 days starting at the end of the TIL infusion. In general, tolerance was excellent apart from a few chills. 1 patient (no. 5) had an endotoxic shock 6 h after the end of the injection; *Candida parakrusei* was isolated both from blood and cell cultures. As described previously [2,

4] TIL grew easily in samples from melanoma patients but we did not see responses in patients who had failed on IL2.

1. Rosenberg SA, Lotze MT, Muul LM, *et al.* A progress report on the treatment of 157 patients with advanced cancer using lymphokine-activated killer cells and interleukin-2 or high dose interleukin-2 alone. *N Engl J Med* 1987, **316**, 889–897.
2. Topalian SL, Muul LM, Solomon D, Rosenberg SA. Expansion of human tumor infiltrating lymphocytes for use in immunotherapy trials. *J Immunol Methods* 1987, **102**, 127–141.
3. Mathiot C, Robin E, Gey A, *et al.* Phenotypic and analysis of tumor-infiltrating lymphocytes (TIL) from patients with melanoma and other metastatic cancers. *Eur J Cancer* (submitted).
4. Rosenberg SA, Packard B, Aebersold PM, *et al.* Use of tumor-infiltrating lymphocytes and Interleukin-2 in the immunotherapy of patients with metastatic melanoma: A preliminary report. *N Engl J Med* 1988, **319**, 1676–1680.

## Correction

**Resistance modification by PSC-833, a novel non-immunosuppressive cyclosporin A.** We apologise to Dr P.R. Twentyman and Dr N.M. Bleehen for wrongly adding the letter "A" to cyclosporin in the title and the first line of the abstract in their paper (Vol. 27, 1639–1642).