# The relevance of Ignaz Semmelweis

- Between 2006 and 2011 New York City Health department was notified of 11 cases of genital herpes infection in new-born boys.
- 5 of the boys went on to develop CNS herpes encephalitis
- All 5 severely neurologically impaired at follow-up



#### MAP. HSV-1 and untyped neonatal HSV infection among male and female infants, by zip code of residence, April 2006-December 2012, New York City



#### What else do you want to know?

- All HSV-1 infections
- 6 out of 11 delivered by Caesarian section
- In the 5 delivered vaginally, 4 of the mothers were negative for HSV-1 or HSV-2
- Lesions appeared between day 15 and day 29 of life

- Why is this occurring only in boys?
- Why are they all HSV-1?
- Why are they occurring in HSV negative mothers?
- Why are they presenting with genital herpes?
- Why are the cases apparently clustering?

• What is the mechanism?

# Metzitzah

- According to Biblical Law, a male infant should be circumcised at the age of 8 days (Genesis 17:10-14; Leviticus 12:3)
- The Babylonian Talmud states that for the sake of the infant the *mohel* is obliged to perform the metzitzah "so as not to bring on risk".
- Metzitzah = direct orogenital suction (DOS)

#### Has this been described before?

#### Neonatal Genital Herpes Simplex Virus Type 1 Infection After Jewish Ritual Circumcision: Modern Medicine and Religious Tradition

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Pediatrics 114;259-263. 2004

- Do you know of any other diseases spread by this mechanism?
- Tuberculosis
- Ignaz Semmelweis observed this and advised against the practice of metzitzah

#### Ignaz Semmelweis

- Who was he?
- Hungarian physician, b July 1818, d. Aug 1865
- Described as "the saviour of mothers".
  Famous as an early pioneer of antiseptic procedures.







# The "Semmelweis Reflex"

 Reflex rejection of new knowledge because it contradicts entrenched norms, beliefs or paradigms.

# **Neonatal HSV infection**

- HSV infection in neonatal period
- 5% acquired in utero
- 85% acquired during delivery
- 10% acquired post-natally via direct transmission from adults

# In utero HSV infection

- Microcephaly
- Cataracts
- Intracranial calcification
- IUGR
- Vesicular rash



### Neonatal HSV infection

- 3 categories
  - Skin, eye and mouth disease (43%)
  - Disseminated disease (23%)
  - Encephalitis (34%)

# Neonatal HSV encephalitis

- Usual presents with non-specific features during second or third week of life e.g. poor oral intake, behavioural change, fever
- Progresses to:
  - Focal or generalised seizures
  - Apnoea
  - Lethargy
  - coma

### Neonatal HSV encepahalitis

- In 1/3 of cases HSV confined solely to CNS
- Mechanism of virus entering CNS via haematogenous spread from acute infection

# Diagnosis

- Clinical history and presentation
- Isolation of virus from skin or mucous membrane lesions
- CSF
  - Raised protein
  - Lymphocytic pleocytosis
  - Detection of HSV DNA by PCR
- EEG
  - Slow background with paroxysmal discharges that may be periodic

#### Neuroimaging



Okanishi et al. Brain and Development 2015

#### Treatment

- Supportive care
- Acyclovir 20 mg/kg Q8h for 21 days

#### Outcome

- 10% mortality
- 40% of surviving infants will have severe neurological sequelae despite acyclovir therapy
- Fewer than 40% will recover to baseline
- Permanent pseudobulbar palsy with mutism and feeding difficulties has been described.