2013 ALERT # 7

UPDATE: Neonatal herpes infection following ritual Jewish circumcision

Please Share This Alert with All Emergency Medicine, Pediatric, Pediatric Infectious Diseases, Infection Control, and Microbiology Laboratory Staff

- Second case in 3 months of neonatal herpes in a male newborn following ritual Jewish circumcision reported in New York City
- When evaluating a newborn for sepsis, consider herpes infection and, for recently circumcised males, inquire about direct oral suction during ritual Jewish circumcision

April 3, 2013

Direct oral suction of the infant penis during ritual Jewish circumcision (metzitnah b’peh) has been documented to transmit herpes simplex virus (HSV) type 1 to newborn males (1-5). In March 2013, the New York City Department of Health and Mental Hygiene (DOHMH) received a report of a new case of HSV-1 in a newborn male attributable to direct oral suction. This is the second such case reported in New York City in a 3-month span and the 13th such case since 2000.

Similar to previous cases, the March case developed vesicular lesions on the scrotum in the weeks after ritual circumcision, and HSV-1 was isolated from lesions. In this specific case, the infant developed fever 7 days after circumcision and vesicular lesions the following day, and HSV-1 was isolated from lesions on the genitals. The infant had disseminated herpes infection but survived. Because only 70% of babies with neonatal herpes have vesicular lesions and 40% have fever at presentation, health care providers should consider herpes infection in infants being evaluated for sepsis, even in the absence of fever or vesicular lesions. In recently circumcised males, providers should also inquire about direct oral suction during ritual Jewish circumcision.

New York City law requires that health care providers:

- Report all cases of neonatal herpes (clinically diagnosed and laboratory-confirmed) to DOHMH. Case report forms can be found at: http://www.nyc.gov/html/doh/html/hcp/hcp-urf2.shtml.
- Collect vesicular swab specimens from all infants with suspected HSV infection, not just those following ritual Jewish circumcision. Specimens should be sent to the New York State Wadsworth Center Laboratories for diagnostic testing via their local clinical laboratory. Guidance regarding specimen collection and shipping can be found at: https://a816-health29ssl.nyc.gov/sites/NYCHAN/Lists/AlertUpdateAdvisoryDocuments/HAN_MBPandNewRegs.pdf

DOHMH advises providers to consult with a pediatric infectious disease specialist when evaluating and managing an infant with suspected herpes infection. A complete diagnostic evaluation for suspected neonatal HSV includes collection of multiple specimen types for herpes testing, including cerebral spinal fluid, and liver function tests (6).
Sincerely,

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References