Dr. Semmelweis on Deathtrap of Childbed Fever: Unusual Cases of Rose and Kelly

By Simon Yu, MD

Ignaz Semmelweis, a young Hungarian doctor working in the obstetrical ward of Vienna General Hospital in the late 1840s, was alarmed at the high death rate among his patients. He had noticed that nearly 20% of the women under his and his colleagues’ care in the ward attended by male physicians died shortly after childbirth with fever, commonly known as Childbed Fever. On the other hand, he noted that the death rate was four to five times less in the ward attended by female midwives who had no advanced medical training.

To salvage the high death rate due to childbed fever in his ward, Dr. Semmelweis instituted a strict hand washing policy for the male students and attending physicians as they came from the autopsy room to the delivery room. At the time, it was a common practice to perform an autopsy and go directly to the obstetric ward to deliver babies without washing their hands.

Everyone was required to wash their hands with chlorinated lime water prior to attending patients. Mortality rates immediately dropped from 18.3% to 1.3%. Not a single woman died from childbirth between March and August of 1848 in his obstetric ward.

Despite the dramatic reduction in the mortality rate in Semmelweis’ ward, his colleagues and the greater medical community in Vienna greeted his finding with hostility and contempt. This occurred even when he presented his finding to the Viennese Medical Society.

After years of controversy and repeated rejection of his work by the medical community, he suffered a mental breakdown. Semmelweis died in 1865 in an Austrian mental institution.

His story reminds me of Rose and Kelly. Rose presented with advanced kidney cancer with metastasis to her lung. She was given three months to live. Kelly had breast cancer with a highly unusual burning pain on her breast.

Rose, an 86 year old woman widowed with six children, came to see me in August 2007 with the grim news that she has kidney cancer which had spread to her lung. Chemotherapy was recommended to her although she was told she had three months to live.

She didn’t like the options. She came to see me with two of her adult children for a second opinion. One was open to alternative medicine. The other was skeptical and almost hostile to my kind of integrative medicine.

My evaluation on her started with Acupuncture Meridian Assessment. (See articles on my web site for an explanation of this evaluation methodology.) Her main disturbance signals came from the liver, stomach, pancreas, and large intestine meridians.

Her kidney and lung meridians were in fairly good condition despite her diagnosis with kidney cancer and metastasis to her lung. She was started on parasite medications including alinia, praziquental, ivermectin and many detoxification herbs, homeopathic remedies and combinations of anti-oxidants.

Eighteen month later, she was spunky as ever. She had no complaints except for the “hardship” of taking all those vitamins and minerals. I’m not actively following her with CT scans but she has no signs of active cancer. I joke to her that I believe she will outlive her oncologist and may outlive her children.
I saw Kelly in September 2007. She was 49 years old and recently diagnosed with left breast cancer. She had recently had a lumpectomy. She developed a most unusual burning pain on her left breast and shoulder blade area after the operation. She had a history of multiple chemical sensitivities. She was wearing wooden shoes and brought her own wooden chair on which to sit. She could not tolerate any chemicals and was riding in the van on a wooden chair for three hours to visit me.

Her behavior seemed very peculiar, weird and restless. The Acupuncture Meridian Assessment indicated multiple meridian disturbances on allergy points, spleen, kidney, stomach, liver and gall bladder, and pancreas meridians. She was started on gentle homeopathic detoxifications.

As she was getting stronger, she was started on multiple courses of parasite medications including tinidazole, mebendazole, pyrantel pamoate, alinia and ivermectin. The last time I saw her in January 2009, she no longer had her most unusual pain. She appeared calm and happy. She seemed more concerned for her husband’s health. There was a dramatic change in her aura.

I treated Rose and Kelly with many different nutritional supplements, homeopathic remedies and body detoxification herbs. They were also both treated with multiple prescribed parasite medications which were different for each of them as dictated by their individual evaluations.

Unrecognized infection, whether bacterial, viral, fungal or parasitic, seems to be playing a major role in much of the chronic illness and suffering in our population. From a biological evolutionary point of view, microbes, especially parasites, are one of the most advanced intelligent creatures who have adapted to the constant change in the environment from the beginning of life on earth. They’ll invade the host and reproduce in a most extraordinary complex life cycle. These parasitic aliens are constantly invading us and play an important role in unexplainable chronic illness.

Semmelweis didn’t know much about microbes but he knew hand washing dramatically reduced Childbed Fever and its death rate in Vienna in the 1840s. I’ve been using prescribed parasite medications to balance the acupuncture meridians. As a result, I’ve noticed some of the most difficult patients began to improve when the best known western medical therapy failed.

The lesson of these stories is not “don’t see the white male doctors from Vienna” but to understand why there was such resistance to change. Even if they didn’t understand the role of infectious microbes at the time, overwhelming facts supported the importance of hand washing for the prevention of Childbed Fever. What were those prominent physicians in Vienna thinking? Why were they dismissing Dr. Semmelweis’ finding?

I don’t fully understand why parasite medications balance so many disturbed meridians for some of the most difficult patients who then get well. There seem to be many infectious microbes, including parasites, that aren’t easily detected by current medical science. We need more young scientists to investigate and validate these parasite related phenomena.

There are too many Roses, Kellys, and others unnecessarily suffering from current medical care. We need to think differently! We need a new generation of Dr. Semmelweises to save us from the deathtraps of the modern scourges of heart disease, cancer and iatrogenic (doctor induced) death rather than rejecting non-traditional thinkers. I will continue to use parasite medications based on Acupuncture Meridian Assessment until there are better biometric systems to detect hidden infections.

Dr. Simon Yu, M.D. is a Board Certified Internist. He practices Internal Medicine with an emphasis on Alternative Medicine to use the best each has to offer. For more articles and information about alternative medicine as well as patient success stories visit his web site at
Weaving Internal Medicine with Alternative Medicine to Use the Best Each Has to Offer