

***Mezizah Be-Peh* and the Killing of Jewish Infants**

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It is difficult to believe I am writing about *mezizah be-peh*, that there is a necessity to address this topic once again. Apparently, yet [another Jewish infant](#) has succumbed to an infection and died due to the practice of *mezizah be-peh*. Even if this case turns out to be unrelated, the practice of *mezizah be-peh* among *mohalim* (Jewish ritual circumcisers) is on the rise, and inevitably, the death-toll will rise with it.

Basic Information

1) What is *mezizah be-peh*?

It is the act of sucking the blood from the circumcised penis of the infant child by direct oral contact.

2) How do children get ill and die from this?

Since the penis has just been cut, the wound can be infected with any germs present in the mouth of the *mohel*. Nowadays, the main culprit is herpes, as documented by the [New York City health commissioner](#). In the 19th century it was

¹ Morethodoxy shut down, so I am posting my previously published articles as PDFs here. They have not been revised.

syphilis and in the 20th century there were cases of tuberculosis and diphtheria; there have certainly been other illnesses as well.²

3) What is the purpose of the ritual?

The ritual was originally invented for what were believed to be health benefits. In pre-modern times, before circulation was discovered, it was believed that if too much blood congregated in one spot it could rot and turn to pus, thereby causing illness. The sucking out of the “dangerous” blood was considered similar to the sucking out of poison from a snake-bite victim.

4) Why is the ritual still done now?

Some have a mistaken belief that this ritual is part of the mitzvah of *milah* (circumcision). Others believe that if the rabbis of old thought this practice was healthy, then so it must be, and that anything that has been a part of Jewish practice for centuries cannot possibly be dangerous.

***Mezizah* in Halakha**

Mezizah is mentioned in the Mishna (m. *Shabbat* 9:2) when listing all the parts of the circumcision ritual that are permitted on the Sabbath.

² For a thorough discussion of this, see Dr. [Shlomo Sprecher](#), “*Mezizah be-Peh* – Therapeutic Touch or Hippocratic Vestige?” *Hakirah* 3 (2006): 15–66. I make much use of this excellent article in this blog-post. Also see some of the response letters in *Hakirah* 4, especially that of Dr. Marc Shapiro.

One does all the necessities for circumcision on Shabbat, the *milah* (circumcision), the *priyah* (uncovering of the corona), and the *mezizah* (sucking of the wound). One places a poultice and cumin upon [the wound]. If one did not grind [the cumin] before Shabbat one can crush it with one's teeth and apply it. If one has not mixed wine and oil before Shabbat, one can put each on separately. One cannot make a bandage for it *ab initio*, but one can wrap a rag around it. If one did not have [a rag] available before Shabbat, one may wrap one around one's finger and carry it [to the infant], even through someone else's courtyard.

Clearly, the point of the Mishna is that not only the circumcision itself, but even all the health measures taken to protect the infant afterwards are permitted on Shabbat. Additionally, it is clear that the poultice, the cumin, the bandage, the wine and oil are all meant as health measures. Where does the *mezizah* fit in? Does it go with *milah* and *priyah* as essential parts of the circumcision ritual or does it go with the poultice and the cumin as part of the medicinal requirements?

The answer to this question is made clear in the Babylonian Talmud (b. *Shabbat* 133b).

Rav Papa said: “Any professional [*moהל*] that does not suck out [the blood] – this is dangerous and he should be removed from his position.”

Rav Papa states plainly that *mezizah* is a medical practice. Furthermore, it is such a vital one, in his opinion, that any *mohel* who is willing to forgo it and risk an infant's life must be removed from his position.

In case this was not sufficiently clear, the Talmud comments further on Rav Papa's words:

Obviously! From the fact that Shabbat is violated to do this, clearly it is a matter of danger. What might you have thought? That the blood was already pooled [and removing it would not be a Sabbath violation] – we learn that [the blood being sucked out] is still in the skin [and sucking it out would violate Shabbat if it weren't for the medical necessity.] It is parallel to the poultice and the cumin: just like the poultice and cumin, if one were not to do this it would be dangerous, so too, if one were not to [suck out the blood] it would be dangerous.

In the Talmud's analysis, the fact that *mezizah* is a part of the post-circumcision medical intervention is a given: *mezizah* is a medical intervention parallel to bandaging the wound and applying healing ointments; it is not part of the circumcision itself.

***Mezizah* and Modern Medicine**

There is no question that modern medicine denies any substantial health benefit to post-circumcision *mezizah* but if that were the only critique, the practice could be safely continued as harmless. The problem lies in the fact that, with the discovery

of germs and contagion, modern medicine actually demonstrates the dangerous nature of the practice. Sadly, this is the exact opposite of what the practice was invented to do.

In truth, many practices once thought to be helpful have turned out to be harmful, blood-letting being the most obvious example. Once it became clear – two centuries ago – that *mezizah* is dangerous, and that Jewish infants were, in fact, dying because of this practice, the question became, “what to do about it?” Although some authorities held tenaciously to a requirement to do *mezizah be-peh*, others, such as R. Chaim Soloveitchik of Brisk and Chief Rabbi of Israel Yitzhak Herzog, advocated stopping the practice. Three models were suggested; I will call them the clean-bill-of-health model, the *mezizah*-equivalent model and the ritual-*mezizah* model (I am only comfortable with the last two, but will explain all three).

The Clean Bill of Health Model

Officially suggested by R. Dr. Mordechai Halperin, M.D., the suggestion is to devise a method to ensure that the *mohalim* who perform *mezizah be-peh* do not have any illnesses, including sores in the mouth that can transfer disease. (I have heard that this is the practice in England among *mohalim* that perform *mezizah be-peh*.) The mohel would have to go through whatever testing deemed medically necessary to ensure the *mezizah* is safe, and he would need to constantly renew this clean bill of health. Any mohel without this “license” would be barred from performing *mezizah be-peh*, and any who did so anyway would be banned from practicing by the community.

Although Halperin's suggestion is commendable, I am personally uncomfortable with this suggestion. Since *mezizah be-peh* has no medical benefit and no halakhic basis nowadays, I see no reason to continue with a practice that reflects antiquated medicine in such a graphic manner and may even be dangerous to the infant if not monitored properly. Personally, I feel that doing so sends the wrong message. However, since there are those that stridently disagree, I have included Halperin's model in the hope that the opposition may at least adopt this, thereby protecting the lives of the infant boys who are otherwise in harm's way.

The *Mezizah*-Equivalent Model

R. Shlomo Ha-Kohen of Vilna (1828–1905) wrote in a responsum (*Binyan Shlomo* 2, YD 19) that there is no *mitzvah* to perform *mezizah*. Instead, he argued, *mezizah* should be viewed as part of the general requirement to keep the infant healthy. Therefore, he claims, whatever modern medicine determines to be the best medical practice for keeping the child healthy should be considered the equivalent of *mezizah*.

According to R. Ha-Kohen, the practice he witnessed in his time period, where the mohel would wrap the penis in rags (*smartutin*) was the equivalent of *mezizah*, and that he could not venture to say what the practice would look like in the future. This is because the practice is purely medical and, as he reminds the questioner, he is not a doctor. Applying Ha-Kohen's analysis to our times, the modern *mohel* should sterilize his equipment and use whatever bandages and antibacterial creams are necessary to reduce the risk of infection. In this way he has fulfilled the

requirement that is at the root of the – now defunct – requirement to suck out the blood from the wound.

The Ritual-*Mezizah* Model

Some authorities were less comfortable with cancelling the practice altogether, although they were certainly unwilling to risk the lives of Jewish infants to keep it. Hence the idea of a *mezizah* performed without direct contact between the *mohel*'s mouth and the infant's penis was suggested, and two basic forms of this practice were put forward. One idea, advocated by R. Moshe Schreiber (Sofer), known as the *Hatam Sofer*, was to use a sponge around the corona, with the *mohel* applying (slight) squeezing pressure to remove some blood.

Another method that is popular with a number of Modern Orthodox *mohalim* today was to use a glass pipet. The *mohel* would place the pipet upon the wound and suck from the other side, stopping when some blood would come out of the wound. This method was advocated (or at least permitted) by a number of halakhic authorities, such as R. Malkiel Tenenbaum, R. Elyakim Shapiro of Grodno and R. Avraham Kook. It also seems to be the preferred solution of R. Moshe Pirutinsky in his influential compendium *Sefer ha-Brit*.

Fundamentalist Fear

Despite the cogency of the argument for choosing one of the two alternative models, and the obvious danger to the infant of practicing the original ritual, a large part of the Orthodox community still advocates for *mezizah be-peh*.

Historically, this misplaced allegiance can be traced to the Orthodox battle against

the early reformers in 19th century Europe. At a time when many early reformers were questioning the need for circumcision altogether a ban was passed among the reformers against *mezizah be-peh*. In response to this ban, many traditionalists, such as R. Moshe Shik (1807–1879), dug in their heels and defended the practice.

Despite the difficulty in endorsing the stance taken by these rabbis, it is important to note that in this period of time there was a widespread feeling that traditional religion was under attack and that it was important to defend every last inch of Jewish law and custom, lest one small change lead to an avalanche of irreligiosity. Furthermore, modern medicine as a scientific discipline was still in its early phases.

Nowadays, neither of these factors is operative. Orthodox Judaism has carved for itself a solid niche and cannot reasonably be described as threatened by the Reform movement. Modern medicine has more than established itself as the dominant paradigm, and every school-child knows that an open wound is susceptible to germs from anything with which it comes into contact. Any doctor that would touch an open wound without gloves and sterilized equipment would be opening him- or herself up for a lawsuit. And yet, there are still defenders of *mezizah be-peh*.

Some have defended the practice on qabbalistic grounds. Now, I am not a qabbalist so I cannot respond to the merits of this claim. However, *qabbalah*, in my opinion, does not have the power to make binding normative claims on practice the way halakha does. Furthermore, even if one believes that *qabbalah* does have such a power, it certainly cannot be used to override health concerns.

Ancient Rabbis, Ancient Science

One popular response to the critique of the practice of *mezizah be-peh* has been that if the Sages of old defended the practice, it must be safe and even life-sustaining. It would be beyond the scope of this post to respond in full to this argument, but it is important to note that such an argument suffers from the fallacy of granting the Talmudic Sages superhuman intelligence, making them not only the expositors of traditional Torah laws, but also the repository of all scientific knowledge, past and future. It reflects the belief that the rabbis knew all of science and natural law.

When faced with contradictions between the statements of the rabbis and the reality as described by modern science, these more extreme apologists will even argue that the Talmud is correct and modern physicians are mistaken. This, of course, conflicts with all evidence and any semblance of reason. It reflects the fear that if one admits that the Sages were humans – albeit very wise ones – and that they erred in scientific knowledge, someone could suggest that their views on religion were also in error.

One can appreciate the fear of these ultra-conservatives based on what is at stake. Nevertheless, to me, the very idea that anyone would defend a practice that by any reasonable modern standard is dangerous to infants – that has in fact killed a number of infant Jewish boys over the years – in order to support a misguided view of the Talmudic Sages' infallibility is unfathomable. One cannot hide one's head in the sand and protect an outdated and fictitious worldview at the expense of the lives of our sons; no matter how small the percentage of deaths may be – and it is admittedly rather small – it is an unacceptable cost.

Additionally, it appears to me that claiming the performance of *mezizah* is part of the *mitzvah* must be considered a distortion of the *mitzvah* itself. One who makes this claim, despite the obvious evidence from the Talmud to the contrary, is in serious danger of violating the prohibition of *bal tosif* – not adding on to the mitzvot of the Torah. It is well known that one of the categories of this prohibition is changing the form of a *mitzvah*; the claim that *mezizah* is a *milah*-requirement and not a safety-requirement does just that -- it changes the form of the mitzvah.

Finally, the *hillul ha-shem* (desecration of God's name) factor cannot be ignored. Religion in our society is constantly under a microscope. Although Judaism and Torah observance often requires acts that have no objective basis in empirical observation, but stem from our claims of revelation and tradition, we at least want to demonstrate that our religion is not harmful. Circumcision is controversial enough, with the helpful vs. harmful aspects of the practice debated in a number of societies across the world. Since circumcision is a mitzvah from the Torah and a core identity marker for Jews, we have defended this practice – and will continue to do so – in every conceivable manner.

However, why should we defend *mezizah be-peh*, a practice which is neither a mitzvah and contains no material benefit to the child, only harm? With medical journals publishing pieces like Benjamin Gesundheit et al.'s [Neonatal Genital Herpes Simplex Virus Type 1 Infection after Jewish Circumcision: Modern Medicine and Religious Tradition](#) – *Pediatrics* 114.2 (2004): 259-263 – the defense of circumcision becomes that much harder, and the idea of Jews being “a light unto the Nations” – well-nigh impossible.

What Would Rav Papa Say?

Perhaps the saddest irony is how the current practice of *mezizah be-peh* utterly distorts the words of Rav Papa. Rav Papa's great concern was the safety of Jewish infants, and it was for the sake of safety that he ruled that any *mohel* who does not perform *mezizah* should be barred from practice. He believed that skipping this act would endanger the child. Nowadays we understand that, in fact, performing this act endangers the child.

If Rav Papa were around today, following his own logic, he would have said that any *mohel* who touches the open wound without gloves and sterilized instruments – including with his mouth to perform the outdated and discredited medical practice of sucking at an open wound – must be barred from practice. Every *mohel* who practices *mezizah be-peh* nowadays, risking the life an infant Jewish boy in the name of Rav Papa, is, in fact, driving a knife into the very heart of Rav Papa himself. A greater insult to a greater man is hardly imaginable.

Suggested Policy

Since this issue cannot be settled with blog-posts and articles, I would like to suggest a practical step for our community. The Modern Orthodox community should declare *mezizah be-peh* – at least without the *mohel* having attained a “clean-bill-of-health” to be *assur* (forbidden). More than that, the practice should be declared a *sakkanat nefashot* (a life-threatening danger), as it already has been by the [New York City Department of Health](#), and a gratuitous one, since *mezizah* is not a mitzvah and there are other ways to accomplish it even if it were.

As such, I suggest the following policies be established in our communities.

1. Our members will not use *mohalim* that do *mezizah be-peh*. Only *mohalim* that follow either the *mezizah*-equivalent model (i.e. no *mezizah* just bandages and sterilization) or ritual-*mezizah* model (pipet or some other indirect method) will be used.
2. Our rabbis will not officiate at any *brit* that has a *mohel* that does *mezizah be-peh*.
3. Our synagogues will not allow the use of our sanctuaries, social halls or any part of our buildings for a *brit* if there will be *mezizah be-peh*, at least until such time as these *mohalim* have instituted Halperin's clean-bill-of-health model.

This is a matter of the safety of our children, and we are accountable for any child that is hurt or dies because we were not strict about this. It is my fervent hope that in taking a strong stance on this issue, all Jewish communities will eventually follow suit. In a matter of life or death, can we really afford to do less?