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**“Supporting Fair and Proper Due Process in Medical Peer Review without Compromising
Medical Ethics or Patient Care”**

PRESS RELEASE

In 1847, Dr. Ignaz Semmelweis pioneered the prevention of transmission of disease by washing hands (Prophylaxis), reducing the mortality rate due to Puerperal Fever from 12% to almost ZERO by enforcing the washing of hands with chlorinated lime.

At the time, Dr. Semmelweis' hypothesis was considered extreme and was widely rejected and ridiculed. When he refused to compromise his beliefs, the hospital that employed him was pressured into terminating his clinical privileges.

Semmelweis' sole "crime" was that he proposed a contrarian idea to current thinking, which directly challenged the (incorrect) current medical theories of his time.

Despite the continued ridicule, hostility, and unemployment, Dr. Semmelweis tirelessly promoted his theory, sometimes denouncing physicians who refused to wash their hands as irresponsible murderers. His contemporaries eventually concluded that he was crazy and, in 1865, committed him to a mental institution where he was beaten to death by guards.

Dr. Semmelweis's theory was considered irrelevant, _until Louis Pasteur connected germs to disease, _and Prophylaxis is now considered standard practice around the world. The 1800s medical community's refusal to consider his theories earlier clearly resulted in the continued unnecessary spread of disease and death throughout the world.

Backward and reactionary thinking did not die with Dr. Semmelweis in 1865.

Highly qualified and competent physicians, scientists, healthcare personnel, and government employees continue to suffer similar retaliation throughout the United States, which is why organizations like Semmelweis Society International and the Alliance for Patient Safety participated in the recent Whistleblower Week in Washington.

The Semmelweis Society International annually recognizes individual Healthcare Providers, Researchers, and associated personnel, who have regularly challenged the status quo, who have reported issues, often controversial issues, regarding patient health and safety. Semmelweis Awardees have often had to endure the tyranny of threats and retaliation, and actual financial ruination, in some cases. Without these courageous individuals, progress and innovation in medicine, public service, and industry is inhibited, or negated.

One Semmelweis Laureate is Peter Duesberg, PhD. (<http://www.duesberg.com/>), Professor of Molecular Biology at the University of California, Berkeley.

Dr Duesberg has asked legitimate but "outside the box" questions about the connection of HIV to

AIDS, and even further questions regarding the documented toxicity of AIDS drugs. Drugs that are commonly used to fight the very immune deficiencies that these medications are known to affect adversely, or even to cause.

Dr. Duesberg does **not** advocate the reduction of clinical services or aid to Asia or Africa. Dr. Duesberg simply questions the administration of drugs that are known to compromise human immune systems to patients whose immune systems are already compromised by poverty, malnutrition, unsanitary conditions, dirty water, drug use, or dangerous sexual practices. If Duesberg's contrarian concerns are true, the AIDS drugs themselves may be the proximate cause of some or all of the death statistics that pharmaceutical companies currently rely upon to promote the sale of their drugs.

Because the anti-AIDS Pharma Industry has already generated more than \$200 billion in Pharma income from US government/US taxpayer funding, it is understandable why that same Pharma industry might attack individuals who propose alternative ideas and treatments that could save the lives of millions of AIDS sufferers around the world, but without their products (and at the loss of their profits).

A simple double blind parallel treatment study, with flawless monitoring in the gathering of clear and specific data, would allow evidence based approach to this question, and would be a standard for the industry as opposed to the present dogmatic approach.

In an era of evidence based medicine based on real reproducible results, how does one explain why organizations that are ostensibly pursuing the cure for AIDS would deliberately attack rational alternative solutions?

Members of Semmelweis Society International represent thousands of years of medical expertise and practice. They understand the power of competing ideas and the importance of open and rigorous debate. In the case of HIV/AIDS, the debate has been inexplicably muted by individuals and agencies that have handsomely profited by the hysteria related to HIV/AIDS. History reminds us that solid ideas are easily defended, while lesser theories can only be defended with fear, intimidation, and ridicule. If anything, these anti innovation strategies should sound the alarm for the medical community that treats AIDS patients.

The overt Hysteria deployed against those who are simply proposing the clinical and fully scientific review of new ideas should alarm public servants and elected officials who are responsible for supporting the First Amendment right for rational discourse.

American taxpayers have not been told the whole truth about the still-unidentified HIV virus, and its arguable relationship to the disease of AIDS, while ignoring the known toxicity of the drugs currently used to fight AIDS.

The taxpayers deserve a better break and a much clearer knowledge of how (and why and by whom) their tax dollars are being spent.

If Professor Duesberg and others are wrong, nothing is lost. But if Dr. Duesberg is correct, thousands, if not millions of people around the world may have died due to the toxic properties of AIDS drugs and the misdiagnosis/mistreatment of a still poorly understood disease.

Semmelweis Society International does not present the Clean Hands Award lightly. In Dr. Duesberg case, it is hard to imagine anyone more deserving than Professor Peter Duesberg and

investigative reporter Celia Farber. These two have withstood a vicious and ongoing multiyear multicontinent personal onslaught against their livelihoods, their character, and their families that is unparalleled since the Spanish Inquisition.

Their sole "crime" is to ask if there has not been a colossal error in our thinking to date.

The simple facts are that nobody has ever been cured of AIDS. No Vaccine has ever been developed. Something is wrong here.

Dr. Duesberg has an idea, a contrarian idea; to be sure, it is an idea, nothing more, but nothing less.

Celia Farber's "crime" is to have reported this contrarian idea, into a First Amendment Free Speech Protected Society, or so we all thought.

We pray that our elected officials will not succumb to the hostility and pressures that the AIDS/Pharma industry will use to discredit and further silence this most vital debate.

We at Semmelweis are proud of our decision to present Dr. Peter Duesberg and Celia Farber with our highest honor and wish them both all the best as they continue to find concrete answers to this elusive and misunderstood disease.

Sincerely,

Roland F. Chalifoux Jr., DO
President, Semmelweis Society International

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