

KidsHealth

Circumcision

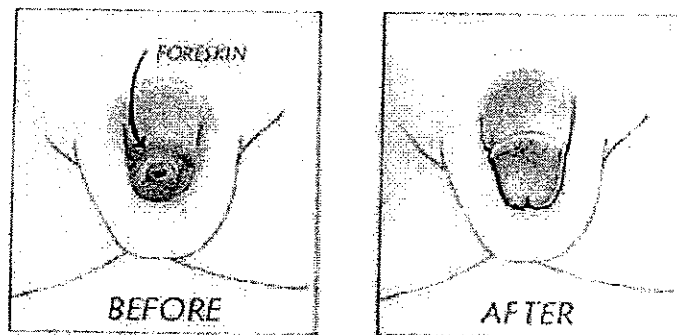
Your wait is finally over - you're the proud new parents of a baby boy. But if you haven't already thought about it, you need to make an important decision for your son before you take him home: whether to circumcise him.

For some families, the choice is simple because it's based on cultural or religious beliefs. But for others, the right option is not as clear-cut. Before you make a circumcision decision, you should talk to your child's doctor and consider some of the issues.

What Is Circumcision?

Boys are born with a hood of skin, called the foreskin, covering the head (glans) of the penis. In circumcision, the foreskin is surgically removed, exposing the end of the penis. Parents who choose circumcision often do so based on religious beliefs, concerns about hygiene, or cultural or social reasons, such as the wish to have their son look like other men in the family.

Approximately 1.2 million newborn boys are circumcised annually in the United States. The practice is much more widespread in the United States, Canada, and the Middle East than in Asia, South America, Central America, and most of Europe, where it's not common. Current estimates indicate that within the United States, white babies (81%) are more likely to be circumcised than black (65%) or Latino (54%) babies.



Circumcision is usually performed during the first 10 days of life, either in the hospital or, for some religious ritual circumcisions, at home. If you decide to have your son circumcised at the hospital, a doctor will perform the procedure before you bring your baby home. In preparation, your baby will be placed in a padded restraint chair and given local anesthesia. Then the doctor will slit the foreskin and insert a device under the foreskin to hold it away from, and protect, the glans. When the instrument has been in place for a few minutes, the doctor quickly cuts off the foreskin, removes the device, and covers the incision with an antibacterial ointment and gauze coated with petroleum jelly.

Pros and Cons of Circumcision

Although circumcision appears to have some medical benefits, it also carries potential risks - as does

any surgical procedure. These risks are small, but you should be aware of both the possible advantages and the problems that can be associated with the procedure before you make your decision.

Complications of newborn circumcision are uncommon, occurring in between one in 200 and one in 500 cases. Of these, the most frequent are minor bleeding and local infection, both of which can be easily treated by your child's doctor. Even rarer are instances where either too little or too much skin is removed. The former requires a repeat circumcision, whereas the latter can take longer to heal or, occasionally, may lead to reconstructive penile surgery (this extreme measure is only necessary if a significant amount of skin is mistakenly cut, which happens very infrequently in the hands of an experienced circumciser).

Pain is another consideration. Although the procedure is painful, local anesthesia can greatly reduce your baby's discomfort. If you decide to circumcise your son, talk with your child's doctor about anesthesia options.

Some people also claim that circumcision either lessens or heightens the sensitivity of the tip of the penis, decreasing or increasing sexual pleasure later in life. But neither of these subjective findings has been proven to be true.

On the plus side, studies indicate that circumcised infants are less likely to contract a urinary tract infection (UTI) in the first year of life. About one out of every 1,000 circumcised boys has a UTI in the first year, whereas the rate is one in 100 for uncircumcised infants. Circumcised men may also be at lower risk for penile cancer, although the disease is rare in both circumcised and uncircumcised males. The procedure might offer an additional line of defense against sexually transmitted diseases (STDs), particularly HIV, but the results of studies in this area are conflicting and difficult to interpret. It's also easier to keep a circumcised penis clean, although uncircumcised boys can learn how to clean beneath the foreskin once the foreskin becomes retractable (usually some time before age 5). However, some uncircumcised boys do end up with infected foreskins as the result of poor hygiene.

Making a Circumcision Decision

Despite the possible benefits and risks, circumcision is neither essential nor detrimental to a boy's health. Indeed, the American Academy of Pediatrics (AAP) does not find sufficient evidence to medically recommend circumcision or argue against it. As a parent, you need to choose what is right for your child.

In addition to the medical issues discussed above, religious and cultural beliefs often figure into the circumcision decision. If these are important to you, they deserve to be considered seriously. You might also ask yourself if it will matter whether your son "looks like" other men in the family or maybe even his peers someday.

Perhaps one of the hardest parts of this decision is accepting that circumcision can be painful. The AAP recommends the use of pain relief measures for the procedure. Most doctors use one of three types of local anesthesia - a topical cream, a nerve block via injection at the base of the penis, or a nerve block via injection under the skin around the penis shaft - to make the operation less painful. Besides anesthesia, securing your child in the padded restraint chair and giving him a sugar-dipped pacifier can help reduce his level of stress (and yours). Used together, these methods can decrease discomfort by more than 50%.

If you do opt for circumcision, it's best to perform the operation within the first 2 to 3 weeks of life, as circumcision can become more complicated as a child gets older.

In some instances, though, the doctor may decide to delay the procedure or forgo it altogether. Premature or medically unstable babies are not circumcised until they are ready to leave the hospital. And babies born with physical abnormalities of the penis that need to be corrected surgically are often not circumcised at all because the foreskin may eventually be used as part of a reconstructive operation.

Caring for the Penis

Whether you choose circumcision or not, keeping your son's penis clean is important. Regardless of your son's circumcision status, wash his penis with soap and warm water when you bathe him. You do not need to use cotton swabs, astringents, or any special bath products.

With an uncircumcised boy, never forcibly pull back the foreskin to clean beneath it. Instead, gently tense it against the tip of the penis and wash off any smegma (the whitish "beads" of dead skin cells mixed with the body's natural oil). Over time, the foreskin will retract on its own so it can be pulled away from the glans toward the abdomen. This happens at different times for different children, but most boys can retract their foreskins by the time they are 5 years old.

As your son grows up, teach him to wash beneath the foreskin by gently pulling it back from the glans, rinsing the glans and the inside of the foreskin with soap and warm water, then pulling the foreskin back over the head of the penis.

There are no special washing precautions with newly circumcised babies, other than to be gentle. If your son has a bandage on his incision, you might need to apply a new one whenever you change his diaper for a day or 2 after the procedure (put petroleum jelly on the bandage so it will not stick to his skin). It usually takes between 7 to 10 days for a penis to heal.

Until it does, the tip may seem raw or yellowish in color. Although this is normal, certain other symptoms are not. Watch for persistent bleeding, redness around the tip of the penis that gets worse after 3 days, fever, or signs of infection such as the presence of pus-filled blisters. If you notice any of these, or if your baby does not urinate normally within 6 to 8 hours after the circumcision, call your child's doctor right away. With quick intervention, almost all circumcision-related problems are easily treated.

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