

Religious and Cultural Consideration:

"Whilst circumcision has always been a feature of Judaism and Islam, uptake even within these religious groups is now the subject of far greater debate." (Crane, McCann, & Evans, 2008)

Dawson (2015) sums up cultural considerations nicely on his webpage, Netdoctor.co.uk:

Judaism

In the book of Genesis (17: 10-14), circumcision represents the covenant made by God with Abraham and his descendants. Traditional religious circumcision is performed by a mohel (pronounced mo-hell in Hebrew or moyle in Yiddish). It is usually carried out on the eighth day after birth, unless there is a danger to the child's health, in which case it should be delayed until that danger has passed.

Islam

The divine law or sharia defines every aspect of Muslim life. It is based upon the Holy Koran, the hadith (the sayings of the Prophet Mohammed) and the sunnah (Prophet's tradition). All Muslims agree that these are the three sources of Islamic law, but different groups interpret their application in different ways. Circumcision is not mentioned in the Koran, but has the status of sunnah. Only the Shafiite school of law regards circumcision as obligatory (wajib), while the Hanafite, Jafarite, Malikite, Hanbalite and Zaidite regard it as only recommended, because it is sunnah.

Even those who consider circumcision an obligatory duty for themselves do not see it as an essential requirement for others to become a Muslim. However, the procedure is very commonly practised and is certainly seen as an important external symbol of submission to God's will.

Procedure Details:

Circumcision is the surgical removal of the protective double-layer fold of skin (foreskin or prepuce) that normally covers and protects the glans (head) of the penis. A baby's foreskin and glans are developed as one tissue, actually fused to each other, and will fully separate from each other during the normal course of puberty. During the procedure, the baby is strapped into a sterile mold to hold the baby very still. Local anesthetic may or may not be administered. Before a baby's foreskin is cut off, it must be forcibly separated from the glans with a metal instrument. The foreskin is then pinched to reduce blood flow, and then an initial incision is made. A device is inserted over the glans, and the foreskin is then cut away; revealing the raw glans. The entire glans of the baby's penis and the site of the incision are then raw, open wounds. You should, therefore, watch your baby carefully the first few days for possible complications. (National Organization of Circumcision Information Resource Centers, 2007)

Potential Benefits:

"Benefits to circumcision are generally seen only when a rare problem presents." (Dawson, 2015)

If a person develops **phimosis** the opening of the foreskin is narrowed, preventing retraction. The foreskin becomes very tight and cause pain during urination, inability to urinate, or bleeding from the edge of the foreskin during sex or masturbation. Only about 1% of males experience this by age 17 (Dawson, 2015).

About 3% of males develop **acute balanoposthitis** (Dawson, 2015), a redness and swelling of the foreskin, together with a discharge of pus from the space between the foreskin and the glans. Sometimes the whole penis may be swollen and inflamed. Balanoposthitis is very occasionally the first sign of diabetes. If there is no underlying cause, *simple hygiene measures*, mild painkillers and the avoidance of tugging the foreskin are the only necessary treatments. Most cases will recover without further intervention.

Circumcision is only recommended for recurrent cases of balanoposthitis.

<i>Risks:</i>	Pain
Bleeding	Adhesions
Infection	Meatitis
Urinary retention	Meatal stenosis
Urethral fistula	Preputial stenosis
Dislodged plastibell device	Buried penis
Anesthetic complications	Painful erections
STDs:	Desensitization

Circumcised men are more at risk from **penile warts** than uncircumcised men (Dawson, 2015).

“Far more effective and reliable methods than circumcision exist to reduce the risk of contracting **sexually transmitted diseases**, such as the use of condoms and adoption of safer sexual practices. Thus circumcision cannot be recommended to prevent these infections.” (Dawson, 2015)

Dawson (2015) shares that the *British Journal of Urology* concluded that there is no link between having an intact foreskin and **HIV infection**.

Care of the Circumcised Penis:

Dressing changes: If a Plastibell device was used, no dressing changes are required. If your baby was circumcised with a Gomco Clamp, some recommend gently replacing the gauze bandage when this dressing is soiled while others will have you remove the dressing at the next diaper change. It is usually recommended to apply a petroleum jelly to the penis to prevent it sticking to the diaper while it is healing. As the glans heals, it may develop a yellowish crust that will fall off on its own. (NOCIRC, 2007)

Bathing: It is best to rinse away poop with warm water during the healing period. Wash cloths or wipes may irritate the wound or introduce bacteria.

Preventing adhesions: According to the National Organization of Circumcision Information Resource Centers (NOCIRC), “Adhesions form when raw surfaces of the glans and remaining penile skin fuse together. This can be prevented by pulling the penile shaft skin behind the line of incision gently away from the glans once a day after the initial healing of the wound (seven to ten days). This should be done until your baby is at least one year old to ensure that the deeper layers of the wound heal without fusing to adjacent tissue.”

Care of the Intact Penis:

The intact penis needs no special care. The tissue that connects the foreskin and the glans dissolves naturally over time – a process that should never be hurried. The boy will naturally discover when the foreskin can be retracted without pain – usually during his teen years. Therefore, the first person to retract a child’s foreskin should be the child himself. (NOCIRC, 2007)

Cleaning: Cleaning the intact infant penis is simple; wipe away the poop and urine gently with a wipe or wet cloth. Do not wipe inside of the foreskin. Rinse the penis under warm water if there is poop that seems to be inside the foreskin.

Retraction: Do NOT force the foreskin back to reveal the glans – it can be very painful and can cause problems; including bleeding, infection, adhesions, and pain. Instruct your doctor, daycare, babysitters and family members to leave the foreskin alone.

For adolescents and teens: NOCIRC (2007) states, "The young boy usually pulls his foreskin outward. This is normal and natural and no cause for concern; he won't hurt himself. Once a boy discovers that his foreskin is retractable (a wondrous discovery for the intact child), he can easily learn to care for himself. Telling your son about retractability beforehand will keep him from becoming alarmed the first time his foreskin retracts. When a boy is old enough to bathe himself, he can wash his penis when he washes the rest of himself. Simple instructions may be helpful:

1. Gently slip your foreskin back (if it is retractable).
2. Rinse your glans and the inside fold of your foreskin with warm water.
3. Slip your foreskin forward, back in place over your glans.

At puberty, you can let your son know that with hormonal activity comes new responsibility, including genital hygiene."

If the foreskin appears to be red:

This is usually a reaction from poop and urine that causes a sort of diaper rash. Change the baby's diaper often. Redness is also caused by:

- bubble baths
- chlorinated water (swimming pools)
- washing the penis with too much soap
- laundry detergents
- antibiotic use
- concentrated urine caused by dehydration

To aid healing: Increase water intake, soak in a warm bath (with no soap), and allow the penis to "air out" - spend time without a diaper on daily or nightly for 10-15 minutes.

"Care of the uncircumcised boy is quite easy. "Leave it alone" is good advice. External washing and rinsing on a daily basis is all that is required. Do not retract the foreskin in an infant, as it is almost always attached to the glans. Forcing the foreskin back may harm the penis, causing pain, bleeding, and possibly adhesions. The natural separation of the foreskin from the glans may take many years. After puberty, the adult male learns to retract the foreskin and cleanse under it on a daily basis." (Newborns: Care of the Uncircumcised Penis, 1990).

References:

Crane, R., Mccann, P., & Evans, S. (2008). Cultural Circumcision. Retrieved June 09, 2016, from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2216737/>

Dawson, C. (2015). Circumcision. Retrieved June 09, 2016, from <http://www.netdoctor.co.uk/medicines/sexual-health/a11996/circumcision/>

National Organization of Circumcision Information Resource Centers. (2007). *Answers to Your Questions about Your Young Son's Intact Penis* [Brochure]. San Anselmo, CA: Author.

National Organization of Circumcision Information Resource Centers. (2007). *Answers to Your Questions about Your Young Son's Circumcised Penis* [Brochure]. San Anselmo, CA: Author.

Newborns: Care of the Uncircumcised Penis. (1990). Retrieved June 09, 2016, from <http://www.cirp.org/library/normal/aap/>