

The aim of this leaflet is to clarify current information about circumcision to help you decide whether to have your son circumcised.

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Circumcision

*a parents' guide to
routine circumcision
of male infants
and boys*



What is circumcision?

Circumcision is the operation to remove the foreskin, which is the flap of skin naturally covering the tip of the penis.

Circumcision has been performed on boys for several thousands of years. It probably started out as a hygienic measure in communities living in hot, dry, dusty climates and then became a cultural and religious ritual which has continued to this day. In the last 100 years, circumcision rates gradually increased and circumcision became a fairly routine practice in most English speaking countries by the 1950s. However, by the 1980s, the trend had reversed and about 40% of infant boys were then being circumcised in Australia. In the 1990s, the rate continued to fall and now fewer than 10% of boys are circumcised. In many European countries the rate is even lower.

Most circumcisions today are carried out for family, cultural or religious reasons. Some parents choose the procedure for social reasons such as to be similar to other family members, or because of a preference for the look of a circumcised penis. Sometimes circumcision needs to be performed for medical reasons, such as when the foreskin is excessively tight (despite appropriate treatment).

Whatever the reason for considering circumcision, parents should think through both the possible risks and possible benefits of this operation on their child.

why not?

Why CHOOSE NOT to have your son circumcised?

Some reasons why parents choose not to have their sons circumcised are:

- Parents may wish to preserve the natural state of their newborn child and to avoid any surgical intervention, unless it is essential.
- Any surgical procedure carries some risk, and this is also the case for circumcision. Complications are uncommon and include local infection, bleeding and, rarely, damage to the tip of the penis.
- Some people believe that removal of the foreskin may lead to less sensitivity of the tip of the penis, perhaps causing less sexual pleasure later in life.
- Circumcision can be painful for the child, both at the time of the operation and for some days after.

Why CHOOSE circumcision for your son?

Recent research suggests that:

- Circumcision may lower a boy's chances of getting a urinary tract infection, particularly in the first year of life. A number of studies have shown that circumcised infants run a risk of about one in 500 of getting a urinary tract infection, whereas the risk for boys who are not circumcised is around one in 100.
- Circumcision eliminates the risk of infections under the foreskin which may happen in infancy and later in childhood. Nevertheless, there is a small risk of inflammation of the extreme tip of a circumcised penis, particularly in infancy.
- Circumcision almost eliminates the risk of developing cancer of the penis later in life. It should be stressed, however, that this is a very rare condition with an incidence of 1 in 100,000.
- Circumcised men run a lower risk of getting sexually transmitted diseases, perhaps including AIDS, than men who are not circumcised. However, circumcision is no substitute for appropriate public health measures (such as condom use).

why?

After extensive review of the literature, the Paediatrics & Child Health Division of the Royal Australasian College of Physicians has concluded that there is no medical reason for routine newborn male circumcision.

Summary

In our community today, there are some people who strongly favour, and many who are strongly opposed to, circumcision of boys. Parents need to be aware that there are conflicting points of view about the risks as well as the possible benefits of circumcision.

If circumcision is to be performed, parents and their doctor should ensure that it is done by an experienced and competent person using an appropriate anaesthetic.

To reduce the risks and the discomfort for the child, the operation is best performed under a general anaesthetic after the age of six months.