

Circumcision

What is a circumcision?

A circumcision is an operation to remove your foreskin which is the skin that covers the sensitive head (glans) of your penis.

Worldwide, circumcisions are most commonly performed for religious or cultural reasons.

Circumcisions are usually recommended only for the following medical reasons:

- Persistent tightening of the foreskin (phimosis), where you are unable to pull back the foreskin. Generally ointments and gentle self-retraction are tried prior to circumcision.
- Balanitis OR Balanoposthitis (infection of the foreskin and head of the penis), especially if recurring despite good hygiene and treatment with antibiotics.
- Recurrent urinary tract infections, especially in boys under the age of 12 months (ten-fold risk reduction).
- Balanitis xerotica obliterans (BXO), which is an uncommon condition where the foreskin becomes thickened and white, making it difficult to pull back. BXO can cause the opening of our urethra (tube that carries urine and semen to the tip of your penis) to narrow affecting your urine flow.
- Pain during sex from a tight or non-retractile foreskin.

Are there any alternatives to circumcision?

For phimosis or recurrent balanitis, topical steroid ointment and gentle foreskin retraction is usually tried first (50-80% successful) and a circumcision recommended if unsuccessful.

If BXO is suspected, a circumcision is the only dependable way to cure the condition.

For other conditions, a dorsal split operation or a preputioplasty may be recommended. These operations involve widening the foreskin but not removing it. However, they may give a poorer cosmetic appearance and your condition can recur after a preputioplasty.

What will happen if I decide not to have the operation?

If you do not have a circumcision, your symptoms will continue. If you have BXO, it can spread onto the end of your penis and even internally to the urethra causing narrowing (rarely this can still happen even after circumcision).

What does the operation involve?

Dr Delaney performs the operation under a general anaesthetic with a penile nerve block. A penile nerve block involves injections of local anaesthetic around the penis to help the pain during and after the operation. You may be given antibiotics during the operation to reduce the risk of infection. The foreskin is retracted, cleaned and marked; then it is removed. Bleeding is checked and controlled. The skin edges are stitched together with dissolving stitches which will fall out after a few weeks. The operation usually takes about 30 minutes.

Please read the "Preparation for surgery – general information sheet" to understand the risks related to anaesthetic and any procedure.

It is also important to read and follow the instructions on the post-op information sheet "Circumcision Aftercare".

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Specific complications of this operation

- Not enough foreskin is removed. You may need or want another operation (risk: 1 in 100).
- Too much foreskin is removed. This is uncommon and usually gets better without another operation.
- Difficulty passing urine (urine retention) – try voiding in shower or bath. You may need a catheter (tube) passed into your bladder to drain the urine, this may remain for one or two days.
- Developing an ulcer at the tip of your penis (meatal ulceration) caused by your penis rubbing against underwear. This usually gets better or prevented by following the post-op instructions. Vaseline in underwear will help prevent this.
- Narrowing of the opening of your urethra (meatal stenosis) caused by injury during the circumcision or inflammation afterwards (risk: less than 1 in 10). This leads to difficulty passing urine. You may need another operation.
- Damage to your urethra (urethral fistula). This is rare and you will need another operation.
- Change in sensation with sex which may reduce pleasure or improve it (rare).
- Injury to the glans of your penis. This is serious but rare and needs specialist treatment.
- Priapism – persistent, usually painful erection. See post-op information sheet for management – usually resolves spontaneously.

How soon will I recover?

Your penis will usually look swollen or bruised, and may feel sore for the first two weeks. This is a normal reaction to the operation.

Follow the instructions on the discharge information sheet.