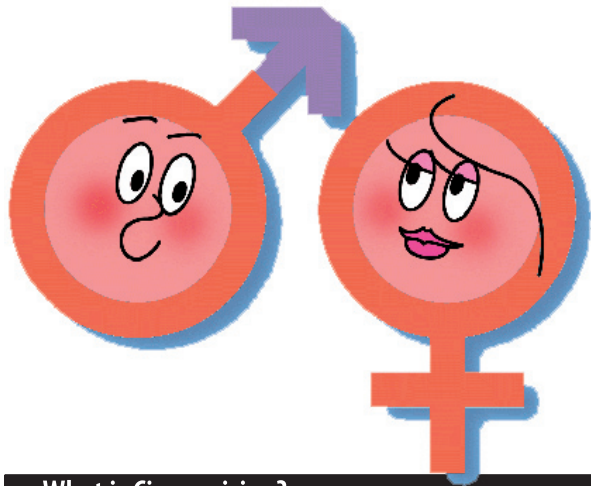


Questions girls ask about male Circumcision



What is Circumcision?

Circumcision is the removal of the foreskin or loose sleeve of skin covering the end of the penis so as to permanently expose the glans (head or knob). Ideally it should result in full exposure of the whole glans and what is named the 'coronal groove' behind it. In such examples there is no bunching of shaft skin in the groove, leaving it smooth and unable to trap smegma. Smegma is a disagreeable smelly cheesy-white substance formed in damp folds of skin on the human body. It accumulates when such places are not cleaned in normal hygiene routines and has been implicated as a possible cause of cancer of the penis in uncircumcised men and of the cervix of their partners.

Worldwide, around a third of all adult men are circumcised. This varies from country to country. Over 85% of Americans are done (in part because of the great economic emphasis placed on preventative health issues in that country). Around 20% of British men have been circumcised and similar proportions in Canada, New Zealand and Australia. It is the norm amongst most African tribes and a strict religious requirement for Jewish males, who are ritually done eight days after birth, and a custom amongst Muslims who have it performed at varying ages before puberty. Indeed almost the only groups worldwide that have not practised circumcision regularly are the Mediterranean Europeans, South Americans, Scandinavians and non-Moslem Asians.

But I'm Female, Why Tell Me?

As a future mother you will have to decide whether to circumcise your sons at birth or to cure problems arising through to their teenage years. Your boyfriend or husband may have foreskin problems about which he has not been properly taught by parents or school. These problems can adversely impact on your own sexual health and satisfaction. If you are aware of the possible problems and their simple cure you can help him to provide a more fulfilling and healthy experience for both of you.

Why Circumcise?

For some people, as explained, circumcision is a religious requirement, whilst for others it is a social indicator marking a boy's progression into manhood. In countries like the USA, it has become an approved medical and social custom for the majority. There are strong medical reasons for circumcision – many of which actually underlie the religious and social performance of the rite.

Circumcision totally prevents Phimosis – a condition in which the opening at the end of the foreskin is too small and tight to allow it to be freely retracted over the whole glans when both flaccid and erect. For some boys this opening is so tight that the whole foreskin balloons out painfully when urinating. This is unnatural and, if not treated, can cause severe bladder and kidney problems in later life, or even death from urinary tract obstruction, infection, anuria and kidney failure.

Circumcision totally prevents Paraphimosis – a condition in which the foreskin can be retracted over the glans when flaccid, often with some difficulty, but then becomes trapped in the coronal groove as the glans swells with erection. The constriction of the foreskin causes the glans to swell even more and a vicious circle sets in. Prompt professional action can return the foreskin to its original state of covering the glans but, if left, a paraphimosis can cause gangrene and loss of the glans. A boy who has suffered an incidence of paraphimosis should be circumcised, after the immediate relief of the symptoms, to prevent it from happening again – as it surely will whilst he is enjoying sex!

Circumcision prevents Balanitis – infection of the foreskin and glans caused by bacteria and fungi which thrive on stale urine, unremoved smegma and the warm, moist environment beneath the foreskin. Irritation can also result from some individual's reaction to body soaps which contact this sensitive area. In addition, it can sometimes be set off by certain detergents used to wash underwear. When this occurs, the inflamed area then becomes colonized by harmful bacteria. It follows that if a foreskin is removed it cannot become infected. The bared glans of a circumcised penis changes slightly and is not susceptible to this sort of infection.

Circumcision corrects Frenulum Breve – a condition in which the frenulum (a cord of skin joining the foreskin to the glans in the cleft on the underside) is short and tight, thus pulling the tip of the glans over to a point of pain. It forms a tight web preventing the retracted foreskin from lying flat along the shaft. If not attended to, the short frenulum can rip during sex with painful and bloody consequences. It can also inhibit a boy's enjoyment of sex as he strives never to put any strain on the frenulum and thus limits retraction and suppresses his erections. Some women report that this tight band can rub and cause them pain during intercourse. In all circumcisions the frenulum is severed in part and in most it is removed altogether.

Circumcision increases 'staying power' – The most common complaint from women regarding sex is that their partners 'come' too quickly and they themselves are not brought to orgasm. Men naturally reach their orgasm quicker than women. Unless you take the time and trouble to learn to delay orgasm until a partner has had hers, sex becomes a one-sided affair. By slightly reducing sensitivity of the glans, circumcision helps delay orgasm and thus improves sexual relations. Another bonus reported by both partners is that, because there is no foreskin to get in the way, the rim of the glans can be felt by the woman giving her better stimulation and the man a more sensual teasing during such movements. It is significant that almost all the artificial penises on sale are modelled on the circumcised shape, ie a larger, fuller and rounded shaped glans rather than the smaller elliptical one of the uncircumcised.

Circumcision improves genital health – Research has shown that circumcised boys suffer fewer urinary tract infections than uncircumcised boys by a factor of 10. There is also clear evidence that circumcision makes a man up to 60% less susceptible to catching the AIDS virus. It is also well known that cervical and penile cancer are reduced by circumcision. Urologists have observed that a much higher percentage of uncircumcised men need their professional attention in old age. An uncircumcised man whose partner suffers from 'thrush' (monillia) will harbour the infection himself (although often without symptoms). After the female partner has undergone a course of treatment and sex is resumed he re-infects her from under his foreskin. This does not happen with circumcised men.

But Isn't the Foreskin Useful?

Like the appendix, the foreskin is a remnant from our evolutionary past and now serves no essential purpose. Unlike the appendix, which is buried deep inside the abdomen, the foreskin is easily and safely removed as a preventative measure.

Whilst one never encounters male animals without a penis sheath, nature often produces boys who have little or no foreskin (effectively naturally circumcised).

Furthermore, around 10% of men have foreskins which are so short that they retract fully behind the glans at or before puberty and play no further part in sexual activities. If man needed the foreskin for anything then these apparent anomalies wouldn't occur.

An additional hazard of having a redundant foreskin is the ease with which it can get caught in a zipper – a problem which occurs particularly in the young, growing male.

Many women complain of lack of stimulation because a long or tight foreskin can stick to the walls of the vagina and their partners virtually masturbate themselves inside their own foreskins.

Uncircumcised males and their partners use the foreskin during foreplay, but this is more 'because it is there' than from any real benefits it confers. Indeed the direct stimulation the rim of a bared glans gives and receives can greatly improve lovemaking as well as being more pleasant for oral sex.

But Isn't Circumcision Only Done For Babies?

Circumcision can be done at any age. Around 70% of all circumcisions in Britain are done in infancy whilst about another 10% are done of necessity in early childhood. About 2% are in old age (mainly as a result of problems which could have been totally prevented by earlier circumcision anyway) and the remainder for teenagers and young adults. Circumcision is performed by the Jewish and Moslem communities soon after birth (or up to puberty by Moslems) for religious reasons. Non-religious circumcisions are done to cure phimosis and, more importantly, as a prophylactic measure to prevent all the problems mentioned earlier.

Isn't Circumcision Very Painful?

As with any surgery there is a degree of discomfort involved but always using modern, safe anaesthetics and analgesics makes this insignificant. Babies neither anticipate and fear possible pain, nor remember it afterwards. They are also unable to localise it and don't in any way relate their circumcision to 'sex'.

For the informed teenager and adult the small amount of discomfort is usually considered well worthwhile for the improved appearance, sex life and lifelong health benefits it brings.

Indications For Teen/Adult Circumcision.

By no later than 8 years old boys should be able to fully retract their foreskins to urinate and to clean under them. Inability to do so by ones teens is a sign of serious developmental problems which need urgent attention. A teenager or adult absolutely needs to be circumcised if when either flaccid or erect:

- The foreskin is too tight to slide back over the whole glans including the coronal rim. (Phimosis).
- Having slid back over the glans the foreskin gets trapped in the coronal groove and will not return without a lot of manipulation. (Paraphimosis).
- The foreskin will uncover the glans but cannot be smoothed down the shaft because it is too tight underneath where the little cord (the frenulum) is; or in smoothing it right back the glans is distorted due to the frenulum pulling on it too much. (Frenulum Breve).
- He can retract, but only rather painfully.
- His foreskin balloons out whilst urinating.
- His foreskin develops splits or tears following masturbation or sexual activity.

Circumcision should also be seriously considered if:

- He has difficulty keeping smegma under control.
- His foreskin and/or glans repeatedly become infected or very sore.
- He suffers from annoying itching of the foreskin that is often related to herpes infection. This may be particularly noticeable in the summer months, in hot climates or after playing sports. (Balanitis).

Are There Any Alternatives to Circumcision?

This is the inevitable question when circumcision is suggested.

A partial circumcision – removing just the constricting tip of the foreskin – is a possibility, but many who have had that done find that the remaining very loose foreskin gets in the way too much during sex. It also does nothing to prevent smegma production.

A dorsal slit – (ie cutting a slit along the top of the foreskin) is sometimes suggested. If the slit is kept short then similar problems to partial circumcision can arise. If the slit is long (as is usual) then the glans is permanently bared and the remnant of foreskin partially retracts leaving the top surface just as if it had been properly circumcised whilst the spare skin bunches underneath leaving a less than fully attractive result, which can also cause discomfort to a sexual partner.

A technique known as preputioplasty may be effective in some cases of phimosis without balanitis or frenulum breve. This consists of making a short dorsal slit but then re-stitching the edges across the penis instead of along it. A small T-shaped scar remains on the tip of the foreskin and, like all scars, is less elastic than the

surrounding skin but the opening in the end of the foreskin is enlarged slightly, but may tighten again over time.

Stretching the foreskin – may work where there is only very slight phimosis. However if too much stretching is done minute tears are caused in the thin inner layer and these heal to tiny scars which are even less elastic than the skin around them – thus the phimosis actually gets worse and circumcision is eventually necessary.

Creams and ointments – can temporarily relieve the itching from balanitis, but cannot remove the underlying cause – indeed they may actually make matters worse by trapping bacteria and fungi that might otherwise have been washed or rubbed away. Only removal of the foreskin to allow permanent exposure of the infected glans to the drying effects of the air will eliminate balanitis.

Aesthetics and Body Image

Aside from all these considerations is the question of aesthetics and body image. This is entirely a personal judgement but it is significant that the great majority of men and, especially, women consider that the circumcised penis is more aesthetically pleasing.

As with all preferences there are opposing views and these are often expressed very forcefully by an emotional minority who take them. The discourse you have read represents majority mainstream opinion. You will find those who refute it all very fiercely and produce their own reasons for opposing circumcision – indeed, some would legislate to eliminate it. Their particular concern is for the vast majority of baby boys who are circumcised before they are even aware that they have a foreskin. They argue that the boys should be given a choice rather than having a choice made for them by concerned, conscientious parents. In practice the vast majority of these boys grow up to be grateful that the operation was performed at an age when they don't remember it. Along the way, they see and appreciate that it has prevented the range of problems outlined above.

After reading this we hope you are better informed to make your decision or to assist your boyfriend or husband make his. For further information see our publication 'Parental Rights, Parental Duties' and others at <http://www.circinfo.com>



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