

# Vitals

## The Great Debate

Parents weighing the pros and cons of circumcision

**C**ary White knew she didn't want her sons circumcised. "It started off as an instinct, and then I found a long list of reasons not to do it," says the mother of two boys, ages 6 months and 3 years.

White is among a growing number of parents choosing not to circumcise their sons, or rather, leave them "intact." There are many other like-minded parents in Richmond — White is an administrator with Natural and Attachment Parents of Richmond ([www.naprichmond.com](http://www.naprichmond.com)), a message board dedicated to attachment parenting and family living. The group launched in July and is about 70-strong; as far as White knows, no members' sons are circumcised.

It's difficult to know just how many parents are anti-circumcision since numbers vary widely, but according to the National Hospital Discharge Survey, 62.7 percent of infant males nationwide were circumcised in 1994, compared to 57.4 percent in 2004.

Why the shift in thinking? Male circumcision, which removes all or a portion of the foreskin covering the end of the penis, became more widely practiced in America during the Victorian era, but it really took off during the Cold War. And although medical professionals extolled the procedure with claims of cleanliness, it often was, and perhaps still is, believed that circumcision cures boys and men of masturbation.

Additionally, albeit rare, there are risks associated with male circumcision, including infections, severe bleeding and the narrowing of the opening of the urethra. These complications, which range from mild to severe, occur in two to six surgeries per thousand, says Dr. Jack Swanson, a pediatrician in Ames, Iowa, who was on the 1999 American Academy of Pediatrics Task Force on Circumcision.

There's also a common misconception that all circumcisions are performed without anesthetic. While there are physicians who believe the nerve endings in the penis aren't fully formed and therefore the infant doesn't need pain relief, many others disagree, including Dr. John Edmondson, a pediatric urologist with Children's Urology of Virginia. At Children's

Urology of Virginia, circumcisions performed on infants up to 1 month of age include a local numbing cream before the surgery and local anesthesia and sugar water (sugar water causes a surge of endorphins, which suppresses pain) during the procedure. If the child hasn't been circumcised in the first month of life, Edmondson recommends waiting until age 6 months so the child can receive general anesthesia. Prior to 6 months of age, the risks associated with sedation are much greater, he says. Circumcisions shouldn't be performed until at least 12 to 24 hours after birth.

White's reasons for keeping her sons intact included avoiding pain and a purported decrease in sexual pleasure (however, according to the American Academy of Family Physicians there is no solid evidence to prove that circumcision affects sexual satisfaction.). "It's their body," White says. "They should make that decision." >



On the other hand, the benefits of circumcision are still being touted, including the decreased penile cancer and urinary tract infection rates. According to the American Academy of Pediatrics, the risk of urinary tract infections is 1 in 1,000 among circumcised males compared to 1 in 100 among uncircumcised males. There are also studies that have found that circumcision reduces a man's chances of contracting sexually transmitted diseases such as HIV/AIDS; a study published in the Wall Street Journal in 2005 found that male circumcision

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reduces the risk that men will contract HIV through intercourse with an infected woman by 70 percent.

It's important to note, however, that these studies were conducted in Africa, where the incidence of AIDS is much higher than in the United States. In fact, a radio correspondent in Zambia was circumcised during a broadcast in December to further protect himself against AIDS. These studies are inconclusive, however, and medical professionals stress that abstinence, safe sex and having few partners remain the best protection against STDs.

On top of the conflicting research, respected medical organizations aren't taking a hard stance either for or against male circumcision, which in some states has caused Medicaid and insurance companies to stop covering circumcision unless it's medically necessary. The American Academy of Family Physicians "recommends physicians discuss the potential harms and benefits of circumcision with all parents or legal guardians considering this procedure for their newborn son."

And Swanson says of the AAP's 1999 Task Force on Circumcision, "The academy doesn't feel that every boy should have a circumcision for medical benefits."

Many parents do their own research, taking religious and cultural traditions into account, before making a decision. White's decision to keep her sons intact led her to an unintended benefit: The foreskin makes the urine stream go down, she says, so she's never been drenched during a diaper change. —Sarah K. McDonald