

Factors Affecting Circumcision Decision in Male
And its Complications & Management

Thesis

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Presented By:

SAMEH EL-ADL EBRHEEM BADWY

(M.B.B.Ch)

Supervised By:

Prof. Dr. Khalid M. Fawzy

Prof. of Urology

Faculty of Medicine

Cairo University

Prof. Dr. Mohamed Amr Lotfi

Prof. of Urology

Faculty of Medicine

Cairo University

Dr. Hany Abd EL-Raouf Morsi

Lecturer of Urology

Faculty of Medicine

Cairo University

FACULTY OF MEDICINE

Cairo University

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Abstract

Although There continues to be Considerable Debate Over The Merits of Circumcision, It is clear that Preservation of the Pediatric Foreskin, Even in the Presence of Phimosis, is a Viable Option. Steroid Topical Cream is a Painless, Less-complicated, and More Economical Alternative to Circumcision for treating Phimosis. Success Rates are quite High, Especially when Patient Selection is Appropriate and Parents are adequately Instructed on Application. In Those Children in Whom Topical Steroid Therapy has failed, There remains a Variety of Foreskin-preserving Surgical Options for Treating Phimosis. Compared to Circumcision, These Less-invasive Techniques are associated with Lower Morbidities and Cost. Furthermore, Depending on the Tissue-Preserving Technique used, Satisfactory Cosmesis is also Achieved.

Key Words :

Circumcision Decision – sexually Transmitted diseases .

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Table of Content

	Page
-Chapter I:-	
-Introduction.....	1
-History of Circumcision.....	3
-Anatomy and Embryology.....	10
-Development of the prepuce.....	12
-Chapter II:-	
Urgent Indications of Circumcision.....	13
-Phimosis.....	13
-Paraphimosis.....	16
-Balanoposthitis.....	17
-Chapter III:-	
Prophylactic Neonatal Circumcision.....	21
-Sexually Transmitted Diseases & HIV.....	21
-Recurrent Urinary Tract Infections.....	25
-Congenital Anomalies Such as Vesicoureteral Reflux(VUR)....	29
-Infants Requiring Continuous Intermittent Catheterization(CIC)	29
-Balanitis Xerotica Obliterans(BXO).....	30
-Carcinoma of the Penis.....	31
-Chapter IV:-	
Contraindications of Circumcision.....	35
- Merits and Arguments Favouring Neonatal Circumcision.....	37
-Optimum Age for Circumcision.....	39
-Chapter V:-	
-Different Opinions In Neonatal Circumcision.....	41
-Chapter VI:-	
The use of Local, Regional and General anesthetic Techniques During Circumcision.....	46
1-The use of Lidocaine-Prilocaine Cream.....	46
2-General Anesthesia.....	46
3-Regional Anesthesia	
-Caudal Epidural Anesthesia.....	47
-Spinal (Subarachnoid).....	48
-Dorsal Penile Nerve Block (DPNB).....	48

-Chapter VII:-

Methods of Circumcision:-.....	51
-Bamboo method.....	51
-Lazem or Kalloba method.....	51
-Ritual Jewish Circumcision.....	51
a) Old Ritual Jewish Circumcision.....	52
-Bone Forceps Method.....	55
-Dorsal Slit and Dissection Method.....	57
-Circumcision by Special Instruments.....	58
-Gomco Clamp.....	59
-Plastibell(Hollister) Device.....	59
-Immediate Complication after Plastibell.....	62
-Mogen Clamp.....	64
-Simple Device for Circumcision.....	64
-Sleeve Resection Technique.....	65
-Free Hand Method.....	68
-Dorsal Slit Without Cutting of the Skin of the Prepuce.....	69
-Ross Circumcision Ring.....	70

-Chapter VIII:-

Complications of Circumcision.....	71
Circumcision: Cost and Reimbursement.....	78

Chapter IX:-

-Alternative Treatments to Circumcision.....	79
-Topical Steroid Therapy.....	79
-Surgical Treatment.....	80
-Dorsal Slit	
-Simple Dorsal Slit.....	81
-Full Dorsal Slit With Transverse Closure.....	81
-Two Comparative Studies of Circumcision and Full Dorsal Slit.....	81
-Lateral Preputial Plasty.....	82
-Triple Incision Plasty.....	82
-Pascotto/Giancotti Preputial Plasty.....	82
-La Vega Slit (Ventral Slit).....	83
-Balloon Dilatation.....	83
-Multiple Y-V Plasties (The Ebbelohj Procedure).....	83
-Aim of The Work.....	85

Chapter X:-

-Patients and Methods.....	86
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Chapter XI:-

-Discussion.....	92
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-Conclusion :.....	101
-Chapter XII:-	
-References.....	110
-Chapter XIII:-	
-Arabic Summary.....	120

Table of Content

	Page
1- Figure (1): Ancient Egyptian Temple of Circumcision.....	5
2- Figure (2): Circumcised Pharaonic Sandek.....	6
3- Figure (3): Tomb of Ankh Mahor 16 th dynasty Sakkara.....	7
4- Figure (4) Celebration of Sultan Ahmed III's of his Sons Circumcision in 1720 for 14-days.....	9
5- Figure (5): Complications of Circumcision and Phimosis.....	13
6- Figure (6): Lazem Instrument.....	52
7- Figure (7): Jewish Ritual Operation.....	53
8- Figure (8): Old Instruments & Accessories 18 th Century of Jewish Circumcision.....	54
9- Figure: (9) Bone Cutting Forceps.....	55
10- Figure: (10) Gomco Clamp.....	61
11- Figure: (11) Sleeve Resection procedure.....	65
12- Figure: (12) Dorsal Slit Without Cutting of the Prepuce.....	69
13- Table (1) Risks of Circumcision.....	104
14- Table (2) Absolute Indications & Contraindications of Circumcision..	105

INTRODUCTION

- Circumcision is One of the Oldest Operation in the History and the First Unequivocal Description of Circumcision is found in the Forth Dynasty Egyptian Tombs (3000 B.C.). Herodotus Reported that Circumcision was practiced at Puberty and the Egyptians taught the Procedure to Jews, Syrians, and Phoenicians. Jews practice it on the Eight Day after Birth. From Jews, It passes to Christians who performed it for Hygienic Purposes then passed to Muslims as an Important Ritual of Cleanliness for Males. According to Prophet Mohamed Saying Circumcision is advised for Males and There is no Specific Age for Circumcision Among Muslims but It is Usually performed Early in Life. Prophet Ibrahim was circumcised When He was an Adult While Prophet Mohamed and His Grandsons Hassan and Hussein were circumcised on the 7th Day.

- Circumcision, The Removal of the Foreskin, is Currently the Most Frequently performed Elective Surgical Procedure for Males Throughout the World. Neonatal Circumcision may be performed for Medical, Cultural, or Religious Reasons. A Review of Risks and Benefits of Circumcision, Individual Indications for Circumcision, as well as both Medical and Surgical Alternatives to Circumcision in the Pediatric Population with Phimosis are presented. Male Circumcision has been practiced As A Form of Prophylactic Therapy, As a Religious Rite and a Means of Relieving Established Disease Such as Carcinoma, Venereal Warts and Paraphimosis. Male Circumcision is practiced by All Muslims and Jewish and Also by Some Christians in Egypt, United States and Canada. Male circumcision is better performed at the Third Week. In Hospitals, Male Circumcision is performed by Junior Gynecologists, Urologists, Surgeons or House Officers.

- Egyptian Mummies and Wall Carvings offer Some of The Earliest Recorded History of Circumcision Dating Over 15,000 years ago. Ritualistic Circumcision has been carried out in West Africa for Over 5,000 years and In the Middle East for at Least 3,000 years (**Warner & Strashin, 1981**). Muslims Incorporated Ritualistic Circumcisions As A Pubertal Rite of Passage into Manhood Among Older Boys.

- The Transformation of This Ancient Ritual into a Routine Medical Operation began Late in the 19th Century. This was Primarily The Result of Several Published Works by Prominent Physicians of the time. They believed that Constriction of the Glans by the Prepuce led to Nervous Irritation in Other Organ Systems. Several Published Works cited "Reflex Neuroses," Puzzling Syndromes with no Somatic Explanation, As being caused by Constriction of the Glans (**Alanis & Lucidi, 2004**). Soon the List of Medical Indications grew, and Physicians in England and America began to offer Circumcision for Masturbation, Headache, Strabismus, Rectal Prolapse, Asthma, Enuresis, and Gout (**Gollaher, 1994**). By The Early 20th Century, There was near Universal Agreement Among Physicians that Circumcision should be done on a Routine Basis.

- Rates of Circumcision began to Drop in Britain in 1948, When a Nationalized Health Care System Analyzed Cost Versus Benefit. Circumcision is Currently Available through National Health Insurance for Medical Indications only. In the early 1970s, both the Australian and the Canadian Pediatric Societies followed, Stating that Routine Neonatal Circumcision was not Medically Indicated. Despite These Changes, Rates of Circumcision remained High in The United States.

HISTORY OF CIRCUMCISION

Definition:- Cuts or Otherwise Removes Some or All of the Foreskin (Prepuce) from the Penis. The Frenulum may also be cut away at the Same Time, in a Procedure called Frenectomy • The word "Circumcision " comes from Latin *Circum* (meaning "Around") and *Caedere* (meaning "to Cut")(Persad, et al 1995)

Circumcision in The Ancient World

Circumcision is One of The Oldest Operation in the History and The First Unequivocal Description of Circumcision is found in the Forth Dynasty Egyptian Tombs (3000 B.C.) (Figure, 1,2,3). According to Herodotus, It was practiced at Puberty . It is carved on Portraits in The Karnak Temple of Mount Sinai Statues of Pharaohs. Its Technique is seen in a Basic Brief on Mastaba of Sakkara in the Fifty Dynasty (Bistschai and Brodnay, 1956; Arnaout et al., 1962 and Badr , 1963). Whether It had a Religious or Hygienic Purposes in Ancient Egypt, It is Unknown. (Darby, Robert ; 2005)

According to Herodotus , The Egyptians taught the Procedure to Jews, Syrians and Phoenicians. Later, the Custom spread to Ethiopians but Herodotus did not know That Columbus would find The Natives of The West Indies

Circumcised. Captain Cook found the practice used by Natives of Australia, Fiji, New Caledonia, New Hebrides and Madagascar (Blandy, 1968). In The Aftermath of The Conquests of the Alexander Great, Greek dislike of Circumcision led to a Decline in Its Incidence Among Many Peoples That had Previously practiced it. (Lee, R.B. et al 2005)

Medical Circumcision in The 19th &20th Centuries

●Several Hypotheses have been raised in Explaining The American Public's Acceptance of Infant Circumcision As Preventive Medicine.

●The Success of the Germ Theory of Disease had not Only enabled Physicians to Combat Many of the Post Operative Complications of Surgery , But had made The Wider Public Deeply Suspicious of Dirt & Bodily Secretions. Accordingly, The Smegma That collects Under the Foreskin was viewed as Unhealthy & Circumcision Readily accepted As A Good Penile Hygiene (*Ng, WT; et al 2001*)

●Second, Moral Sentiment Of The Day Regarded Masturbation as not Only Sinful, But Also Physically & Mentally Unhealthy, Stimulating The Foreskin so Circumcision employed as Means of Discouraging Masturbation. (Holman, John R.; Keith A. Stuessi 1999)

By The 1920s, Advances In The Understanding of Disease had undermined Much of The Original Medical Basis for Preventive Circumcision to A Handful of Local Conditions To The Penis: Balanitis ,Phimosis &Penile Cancer. (Glass, J.M. 2006)

Circumcision Since 1950

In 1949, United Kingdom's Newly-formed National Health Service to remove Routine Circumcision from Its List of Covered Services, This Rejection is due to Douglas Gairdner's Famous Study, *The Fate Of The Foreskin*, Revealed That 16 children / Year had died in England (1942-1947) (Gairdner, 1949)

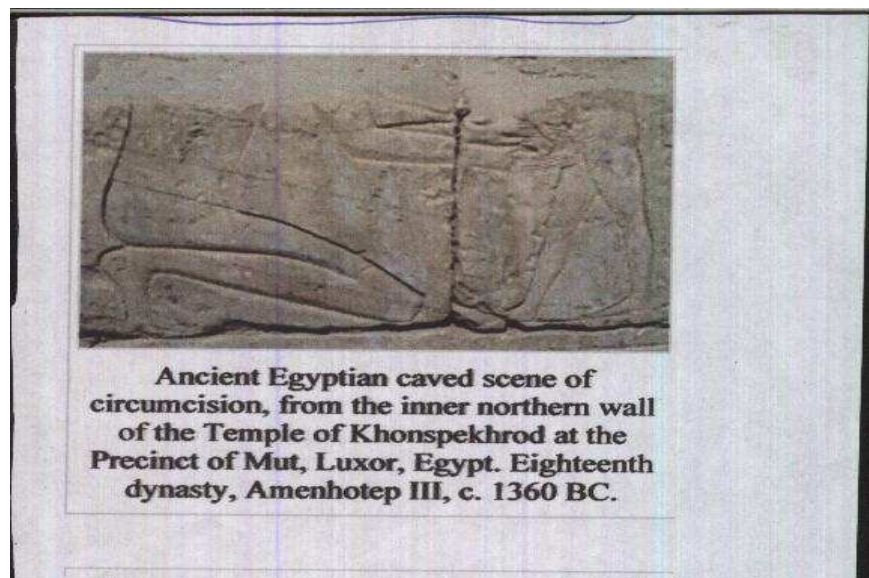
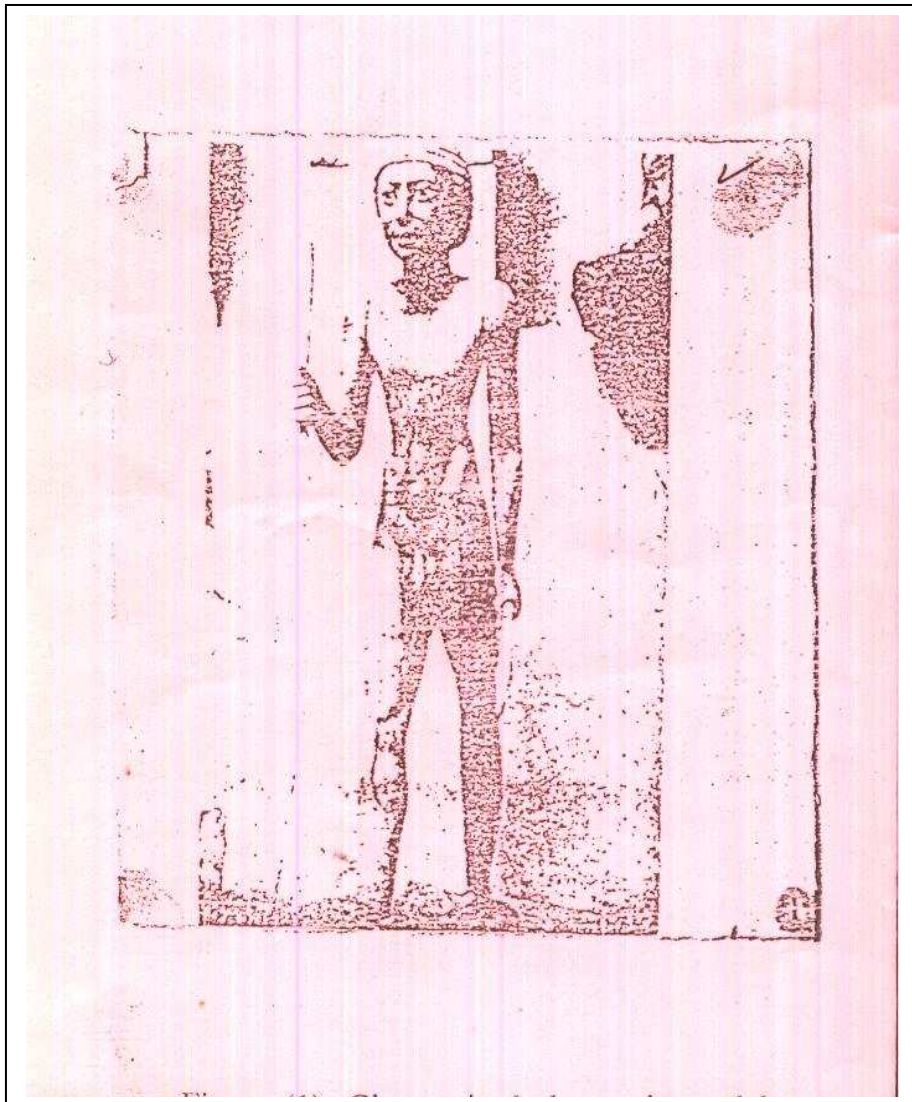


Figure (1) : Ancient Egyptian Caved Scence of Circumcision, from the Inner Northern Wall of The Temple of Khonsperkhrod at The Percinct of Mut, Luxor, Egypt. Eighteenth Dynasty, Amenhotep III, C. 1360 BC.

Figure (2) Circumcised Pharaohic Sandek



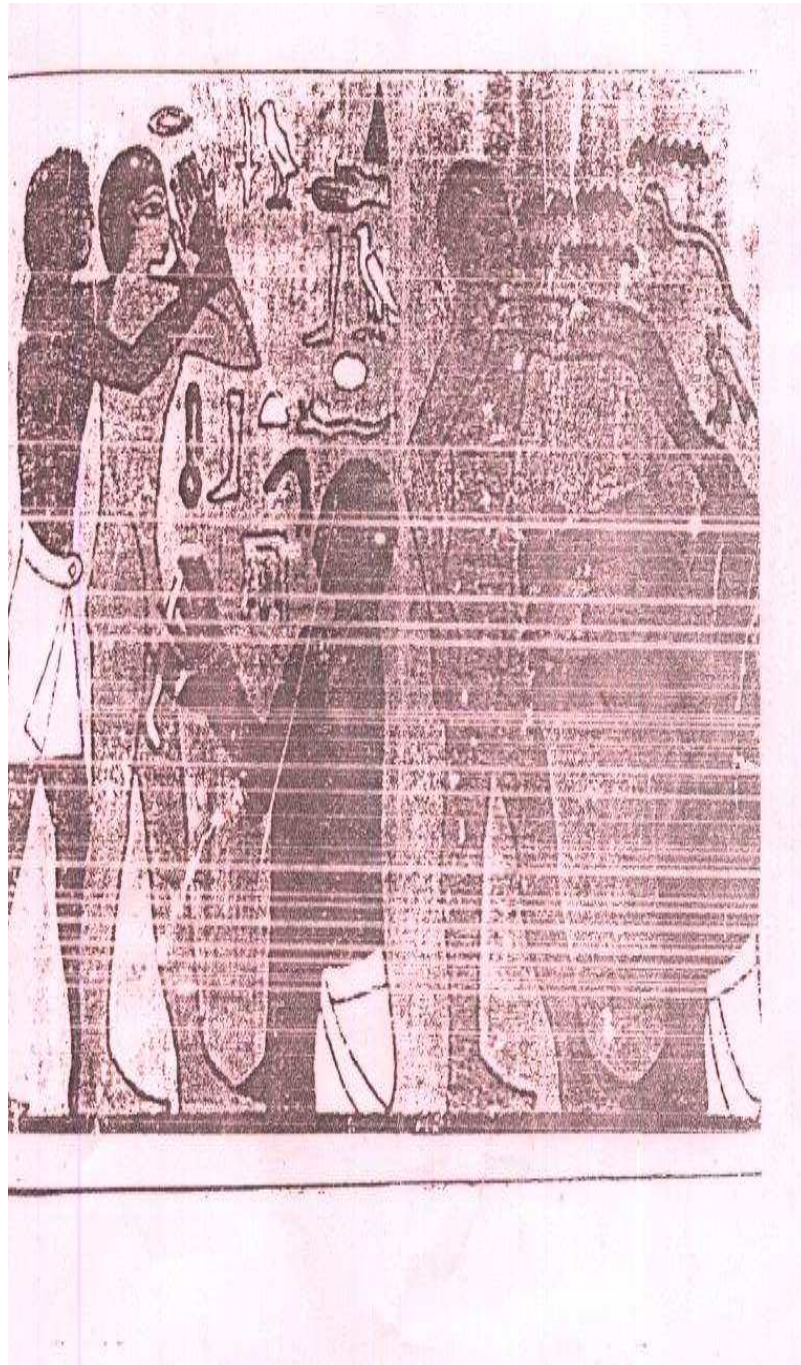


Figure (3) Tomb of Ankh Mahor 16th. Dynasty Sakkara

- **By The Early 20th Century**, There was near Universal Agreement Among Physicians That Circumcision should be done on a Routine Basis.

- Rates of Circumcision began to drop in Britain in 1948, when a Nationalized Health Care System analyzed Cost Versus Benefit. Circumcision is Currently Available Through National Health Insurance for Medical Indications Only. **In The Early 1970s**, Both The Australian and The Canadian Pediatric Societies followed, Stating That **Routine Neonatal Circumcision was not Medically Indicated**. Despite These Changes, Rates of Circumcision remained High in the United States.

- In The United States, **The American Academy of Pediatrics (AAP) (1971)** has vacillated on Its Stance Regarding Circumcision. **In 1971**, The American Academy of Pediatrics Task Force on Circumcision Concluded That "There are no Valid Medical Indications for Circumcision in the Neonatal Period" (AAP, 1977,). **Similar Views were expressed in 1975 and 1977**, When New Evidence Showed That Circumcision Effectively reduced Male Urinary Tract Infections (UTIs) and Sexually Transmitted Diseases, The AAP Concluded That Newborn Male Circumcision "has Potential Health Benefits and Advantages as well as Disadvantages and Risks" (**Task Force on Circumcision, 1989,**). However, The AAP Returned to a More Cautious View On Routine Circumcision, Stating "Existing Scientific Evidence demonstrates Potential Medical Benefits of Newborn Male Circumcision; However, These Data are not Sufficient to Recommend Routine Neonatal Circumcision" (**Task Force on Circumcision, 1999,**).