Circumcision – in boys

What is a circumcision?

Circumcision is an operation to remove the foreskin. The foreskin is the sleeve of skin around the tip of the penis.

Removing the foreskin changes the appearance of the penis and so, unless your child is too young, it is important to discuss this with your son before surgery to prepare him.

Why is the operation needed?

Circumcision may be carried out on boys for any one of the following reasons:

- Most commonly circumcision is performed on boys who have a very tight scarred foreskin which is likely to be caused by a penile skin condition called lichen sclerosis or ‘Balanitis Xerotica Obliterans’ when it affects the foreskin / head of the penis.
- Circumcision may be performed to try and prevent further infections in boys who have had a history of recurrent troublesome infections of the foreskin/penis (referred to as ‘balanitis’ or ‘balanoposthitis’).
- Sometimes circumcision is performed in boys who have had a history of urinary tract infections (urine infections) to try and prevent further infection.
- In boys with recurrent ‘paraphimosis’; that is, when the foreskin has been pulled back behind the head of the penis and cannot be moved forward again over the tip of the penis. The foreskin then becomes swollen which can slow the blood to the tip of the penis.
- Circumcision may also be carried out (although not on the NHS) for religious or cultural reasons.

The operation

- Circumcision will normally be carried out as a day case so that your son can return home on the same day as the operation.
- The operation involves the surgeon cutting away the foreskin. Stitches may/may not be put around the head of the penis.
- Sometimes a skin adhesive (called ‘Dermabond ®’) may also be used in addition to the use of stitches. Your nurses/doctor will inform you if Dermabond® has been applied to your son’s wound as its use affects the advice pertaining to care at home. If you are unsure please ask us.
After the operation

Unless he is too young, it is important to tell your son about the change in appearance of his penis.

After the operation the penis will look red and quite swollen for a number of days. This is normal and is part of the healing process. The swelling and redness will gradually settle but may take a few weeks. Your son will be observed for a few hours on the ward after his operation but will then usually be able to go home after he has passed urine.

Risks of this operation will be discussed fully with you when you sign the consent form. Risks are rare but include bleeding and infection.

Looking after your son at home

- Allow babies to spend time (where possible) without a nappy on. When changing nappies during the first few days after the operation, if Dermabond® has not been applied at the time of surgery, it is advised that a coating of Vaseline is smeared onto the inside of the nappy. This prevents any friction between the wound and the nappy. If Dermabond® has been applied; Vaseline must not be used as this can reduce the effectiveness of Dermabond®.
- In older boys, for comfort and support it is advisable for boys to wear supportive, but not tight, underwear for a few weeks. If Dermabond® has not been applied at the time of surgery, some Vaseline can be smeared on the inside of the underwear to prevent friction on the wound. If Dermabond® has been applied; Vaseline must not be used as this can reduce the effectiveness of Dermabond®.
- It is important to remember that Vaseline can stain the skin. Hands should therefore be washed after application and if any staining occurs on the penis, this will wash off once baths are recommenced. Vaseline is also flammable to ensure it is kept away from any flames.
- We advise that, to prevent discomfort, your son wears loose fitting clothes for the journey home and for a few days after the operation (for example, tracksuit trousers, ‘jogging bottoms’ rather than jeans.)
- Before leaving hospital you may be given some antibiotic ointment to apply to the tip of your son’s penis. This should be applied twice daily and should continue until the penis is dry. (Antibiotic ointment will not be prescribed for boy’s whose wounds have had Dermabond® applied as the ointments contain some ingredients similar to Vaseline).
- Your son should be given painkilling medicine as directed by your nurse. Always read the instructions on the bottle. It is advised that the painkilling medicine is given regularly for the first 48 hours to prevent discomfort becoming too bad.
- Your son should not be bathed for five days after surgery. Sponge washes/quick showers are allowed. This is to prevent infection.
- Occasionally a dressing is put on over the penis. This dressing usually falls off on its own.
However, if still in place by the time your son is allowed a bath, the dressing can be soaked off in the bath (sometimes it may take a few consecutive baths before the dressing comes off completely).

- Your son should rest at home for a few days and should not take part in any sport or strenuous activities until his penis has healed and is dry. This usually takes about 10-14 days. Sometimes a scab may form at the tip of the penis which may take a few weeks to fall off.
- If stitches are used, these are dissolvable (it can take a few weeks for them to dissolve completely) and so do not require removing.

**Follow up arrangements**

Your son will be reviewed in the outpatient clinic. This may be between two weeks and three months after the operation depending on the reason for the circumcision being undertaken. The doctors/nurses will let you know when your son is due to return for his check up and the actual appointment will be sent to you in the post. At the outpatient appointment your son will be asked (if toilet trained) to undertake a urine test so it is important that he arrives at the appointment with a ‘full bladder’.

**Chaperoning**

During your child’s hospital visits he will need to be examined to help diagnose and to plan care. Examination, which may take place before, during and after treatment, is performed by trained members of staff and will always be explained to you beforehand. A chaperone is a separate member of staff who is present during the examination. The role of the chaperone is to provide practical assistance with the examination and to provide support to the child, family member/carer and to the person examining.

**For information or questions before or after admission please call:**

Clinical nurse specialists: 01223 586973 (08:00 to 18:00 Monday to Friday)

Ward…………………………………………………………………………………………………………………………
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