



**Gentle
Procedures
Clinic**

TORONTO | WEST GTA

Adult Circumcision

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You are either considering or about to have a circumcision. Patients who are informed and prepared for circumcision can recover in less time and with less pain. This booklet will give you the general information you need. Read this booklet with care. We hope that you find this booklet a useful reference guide before, during and after your procedure.

***IMPORTANT:** If your surgeon gives you different advice than what has been provided in this booklet, please follow the specific directions you receive.

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Welcome

Welcome to Gentle Procedures Clinic! We thank you for your trust in us. Our mission at Gentle Procedures Clinic is to deliver world-class expertise locally. We maintain the highest standards of patient care and pride ourselves in providing surgical excellence and serving as a surgical training centre for physicians around the world.

In keeping with this philosophy and to ensure that all parents are properly prepared before their surgical procedure, we have prepared this booklet which you should read with care.

About Us

Gentle Procedures Clinics are located in Canada, the United States, the United Kingdom and Australia. Our clinic locations in Toronto and Mississauga are dedicated to baby circumcision and vasectomy. We further focus on adult circumcision at a fully equipped level 3 private operating room suite, located offsite in Richmond Hill. With multiple locations across the GTA, you can book an appointment in just days or weeks.

Our Procedures

Gentle Procedures Clinic is the largest circumcision and no-scalpel vasectomy provider in Ontario. Our clinics are unique in that they are limited to only these surgical procedures.

Our Doctor

Dr. Roland Sing has been practising Urology since 1998. He is a member of the Royal College of Surgeons and holds a clinical fellowship in Endourology.

Dr. Sing has made Vasectomy and Circumcision a primary focus of his clinic, training and adopting the technique of Dr. Neil Pollock, one of North America's foremost authorities in these procedures.

Dr. Sing offers his patients advanced techniques in no-scalpel vasectomy, and an advanced method of circumcision using the renowned Pollock Technique, safely performed on thousands of patients around the world.



What is Circumcision

Circumcision is a simple procedure in which the foreskin that sheathes the head of the penis is removed. It is regarded as one of the safest routine procedures today. The Pollock Technique is known for its quickness and comfort. In conjunction with this technique we apply the most extensive pain control methods available.

Circumcision in adults is a more significant procedure than with newborns and babies, but with the surgical expertise of Dr. Sing any pain or possible complications from the procedure are minimized.

WHAT ARE THE POTENTIAL BENEFITS OF CIRCUMCISION?

- 1. Improved hygiene** – It is well known that microorganisms accumulate under the foreskin which fosters inflammation which can lead to conditions such as balanitis/balanoposthitis (inflammation of the head of the penis). The incidence of balanitis is twice as high as those who are uncircumcised. Smegma, which is a cheesy like secretion, can also accumulate under the foreskin combining with bacteria to produce an offensive odor.
- 2. Reduced risk of urinary tract and bladder infections** – Because microorganisms can accumulate under and adhere to the foreskin, bacteria has a greater chance of migrating up the urethra causing urinary tract infections (UTIs) especially in infancy. Studies suggest an over 10-fold decrease in risk of urinary tract infection in circumcised infants. UTIs are a potentially painful and dangerous condition as it can result in kidney inflammation and scarring. Studies suggest that the protective effect of circumcision against UTIs when done as a newborn continues into adulthood.
- 3. Reduced risk of phimosis** – Phimosis is a condition where the foreskin becomes so tight that it cannot be pulled back fully, resulting in UTIs, local skin infection, pain when passing urine, retention of urine, kidney stones, and sexual dysfunction. Circumcision eliminates the risk of phimosis, which affects 1 in 10 older boys and men.
- 4. Reduced risk of penile cancer** – Studies have shown an over 20-fold risk reduction for invasive penile cancer in individuals circumcised as babies. It is thought that the improved hygiene reduces chronic inflammation and reduces adherence of human papillomavirus to the penis. There is no phimosis because the foreskin is removed. Invasive penile carcinoma is highly associated with a history of phimosis.

5. **Reduced risk of prostate cancer** – Uncircumcised men have a 1.6-2.0-fold higher incidence of prostate cancer, which is thought to correspond with a higher chance of sexually transmitted infections resulting in a chronic state of inflammation.
6. **Reduced risk of HIV/AIDS** – Circumcision reduced the risk of getting HIV/AIDS by 60% during sex with an infected woman. This is because the HIV virus enters through the inner lining of the foreskin which is thin and vulnerable. Ulceration and tearing are also more common in uncircumcised men, adding to the risk of HIV entry.
7. **Reduced risk of STDs** – Circumcision can significantly reduce their risk of acquiring two common sexually transmitted infections — herpes simplex virus type 2 (HSV-2), the cause of genital herpes, and human papillomavirus (HPV), which can cause cancer and genital warts.
8. **Reduced cervical cancer in women** – Circumcision reduced cervical cancer risk of a man's female partner by 5.6 times as there is less risk of adherence and colonization of human papillomavirus.

WHAT ARE THE RISKS OF CIRCUMCISION?

1. **Bleeding** – 1 in 500 circumcisions may experience some bleeding that is usually stopped with direct pressure or less commonly with stitches or cautery. If there is a bleeding disorder such as hemophilia, then our doctor will need advice from a hematologist before proceeding.
2. **Infection** – there is always a possibility that there could be a generalized infection requiring antibiotics after the surgery (1/4000). Serious infections are rare (1/5000).
3. **Concealed penis** – when there is a good amount of fat around the penis (pubic fat), the penis may retract inward and increase the chances the penis gets partially buried and requiring medical intervention (1/800).
4. **Meatal stenosis** – this is a narrowing of the urethra that may occur after the procedure requiring medical intervention (1/1000).
5. **Phimosis** – this is a narrowing of the shaft skin opening over the head of the penis requiring medical intervention (1/500)
6. **Trauma or partial amputation of the head of the penis** – (1/10,000)
7. **Suboptimal cosmetic result** – (1/500)
8. **More serious complications including death** – (1/1,000,000)

Instructions Before Circumcision

7 DAYS BEFORE CIRCUMCISION

- DO NOT take/give your son any anti-inflammatory medications such as Ibuprofen, Diclofenac, Naproxen, or Aspirin. These medications prevent blood clotting. If you have taken such medications within 5 days of surgery we must reschedule you for safety! You will also be billed the OR costs of your unused 1 hour block!

DAY OF CIRCUMCISION

Before your arrive

- Plan to be at the clinic for at least 3hours. This includes preparation time, surgery and recovery time to make sure that you are ready to travel home.
- **!**Please arrive 60 minutes before your appointment time. Late arrivals may be rescheduled for another date. You will also be billed the OR costs of your unused 1 hour block!
- **!**DO NOT eat anything or drink anything before surgery! You must FAST at least 8 hours prior to your procedure. If you don't your surgery will be rescheduled and you will be billed the OR costs of your unused 1 hour block!
- Patients must wear comfortable, loose fitting pants or trousers such as pyjamas or sweat pants. Underwear should be supportive to keep the penis immobile after surgery.
- Things to bring to the clinic to ensure comfort:
 - athletic support to hold the penis upright against your body - in addition to underwear
 - a few small icepacks to apply to the penis after surgery
 - Tylenol to take after discharge, especially if you have a long journey home
 - books or a mobile device to distract you before and after surgery
 - plenty of cold fresh water to hydrate after surgery
 - snacks to have after surgery, since you have fasted most of the day

Please make arrangements for someone to transport you home. If you don't do this, the OR cannot discharge you home for safety reasons.

After the Circumcision

After surgery you may feel a little bit of discomfort, especially at the tip of the penis. Take Tylenol every 4 - 6 hours for pain control. In rare instances, some patients may appear pale and feel dizzy or light-headed. The symptoms should disappear in a few minutes.

FIRST 24 HOURS:

- Check the area for active bleeding every 1 - 2 hours for the first 12 hours.
- Make sure you / your son are able to urinate, which should be possible within 8 - 12 hours after leaving the clinic. Make sure you urinate sitting down on the first day, taking as much time as possible. If you / your son have not urinated for more than 8 hours, please call the clinic on 416-551-7070, or if after hours, Dr Sing on 647-985-0575. If urination occurs, it is common to see some drops of blood the first time.
- Painful erections occur during the first 24 hours, and may last several more days. You can reduce the effects by applying ice and keeping your bladder empty. Sudafed tablets may also help.
- For older adolescents and adults: Take Tylenol every 4 - 6 hours. Do not take Ibuprofen, Aspirin or Diclofenac for the first 48 hours.
- Keep the dressing as dry and intact as possible. Clean around the penis area with a soft cloth dipped in lukewarm water.

After Day 1

AFTER 1 DAY:

- Some minimal swelling may develop. This is part of the normal healing process.
- Come back to the clinic the day after the surgery. Take / give 1 dose of Tylenol 1 hour before the appointment. Some of the bandages may be removed at this time.
- You will be given packages of sterile gauze and a tube of Vaseline to be applied to the wound from the 2nd day forward after the surgery. A staff member will teach you how to change the bandages at home.

AFTER 2 DAYS:

- A full shower may be taken. Gently clean the penis with lukewarm water to make sure that all dried blood and extra glue have been washed off.
- Change the bandages after taking a shower. Apply antibiotic ointment (Polysporin) and Vaseline onto the wound using a cotton bud or Q-tip. Wrap with the sterile gauze we have provided.
- Shower and change the bandages daily for 7 days.
- Take Advil 200 mg tablets, 1-2 tablets every 4 to 6 hours as needed to reduce pain and swelling. It is okay to take Advil at this point as the bleeding risk has gone away.

AFTER 1 - 2 WEEKS:

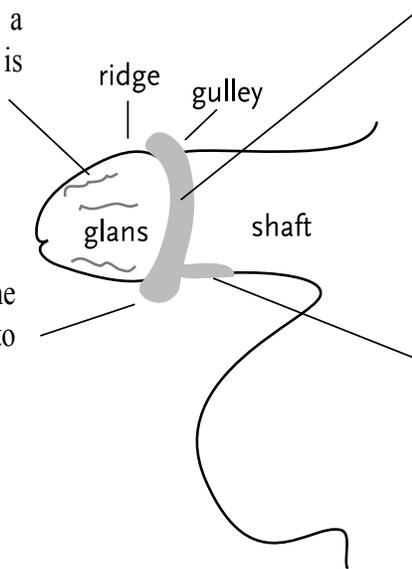
- Continue applying antibiotic ointment (Polysporin) until the wound is completely dry and healed.
- Visit the clinic for an assessment of the healing process. Any stitches may be removed at this time.

THE HEALING PROCESS

5 Days to 2 – 3 Weeks

You will see a yellow/green, slimy discharge on the glans, it is normal. It is serous fluid (same as in a blister) mixed with Vaseline and is not an infection.

The tissues are thicker on the underside, so the swelling tends to be greater here.



The swollen, red 'collar' temporarily obscures the back of the glans, but will soften in colour and flatten out over the next 1 - 2 weeks.

There is often a patch of yellow / green here as well. This is a scab made up of serum, called granulation tissue. Just like a red scab, which is made up of whole blood, this will fall off when the underlying tissues have healed.



Parents/patients often comment on the deep, ruby red colour of the glans – this is the normal colour of the glans while it is inside the foreskin. After several weeks of being exposed to the outside, it will become lighter in colour. After the cut foreskin stops bleeding, it will continue to ooze plasma for about a week or so, and when it dries and mixes with Vaseline, it takes on that slimy, yellow appearance.

If you have any concerns regarding the appearance of the penis, book an appointment with the office for re-examination by Dr Sing.

Please call the clinic first on 416-551-7070. If after hours, please call Dr Sing on 647-985-0575.

What to Watch For

Please watch carefully for the following possible complications:

Fever – If the patient (yourself or your son) feels warm or has a temperature greater than 39 degrees Celsius, please let Dr Sing know immediately.

Infection – If you notice redness, pus, or foul smell coming from the surgical area, call the practice immediately. The most common time for infection to present itself is in the first week after surgery.

Bleeding – Having a few drops of blood on the gauze, the size of a dollar, is normal. Blood dripping off the penis is NOT normal. If you see this, hold pressure on the bleeding area for two minutes and call the practice immediately.

Peeing / urination – The patient (yourself or your son) may not urinate for a few hours after surgery. It is nothing to worry about as it is not uncommon after surgery due to discomfort, anxiety and effects of sedating medication. However, if there is no urination at all after 8 hours, call the practice. If there has been no urination for 12 hours you need to see Dr Sing (or the Emergency Department) immediately.

Concealed Penis – When the length of the penile shaft is no greater than the diameter, or when there is a good amount of pubic fat, the penis may retract inward. This is normal. If you or your son fits this profile, you can reduce the chance of a concealed penis by applying a thin layer of Vaseline to the entire glans once a day, until the glans takes on a healed appearance (about 1 - 2 months).

- To expose the glans that has retracted inward, place gentle downward pressure on either side of the base of the penis. Consult with Dr Sing if the head of the penis cannot be fully exposed or if any connecting bridges form between the shaft skin and the head of the penis.

Dr Sing's emergency phone number is 647-985-0575

Common Questions

How will I / my son feel after the circumcision?

It is not unusual to sleep 6 - 8 hours after the procedure and to miss a meal.

Will it hurt when urinating?

It may sting a little bit for the first 24 hours, after that it should not be painful.

How often should Tylenol be taken?

Every 4 - 6 hours on the first day with the dosage based on age and weight, then as needed.

When to take a bath?

No shower until Dr Sing or his staff tell you it is ok to have a shower or a full bath. You can have, or give your son a sponge bath and gently clean around the penis area with a soft cloth in lukewarm water. Usually 2 days after the procedure, we will allow the patient to have a shower.



PEDIATRICS

Circumcision Policy Statement

TASK FORCE ON CIRCUMCISION

PEDIATRICS Volume 130, Number 3, September 2012

abstract

Male circumcision is a common procedure, generally performed during the newborn period in the United States. In 2007, the American Academy of Pediatrics (AAP) formed a multidisciplinary task force of AAP members and other stakeholders to evaluate the recent evidence on male circumcision and update the Academy's 1999 recommendations in this area. **Evaluation of current evidence indicates that the health benefits of newborn male circumcision outweigh the risks** and that the procedure's benefits justify access to this procedure for families who choose it. Specific benefits identified included prevention of urinary tract infections, penile cancer, and transmission of some sexually transmitted infections, including HIV. The American College of Obstetricians and Gynecologists has endorsed this statement. *Pediatrics* 2012;130:585–586

POLICY STATEMENT

Systematic evaluation of English-language peer-reviewed literature from 1995 through 2010 indicates that **preventive health benefits of elective circumcision of male newborns outweigh the risks of the procedure. Benefits include significant reductions in the risk of urinary tract infection in the first year of life and, subsequently, in the risk of heterosexual acquisition of HIV and the transmission of other sexually transmitted infections.**

The procedure is well tolerated when performed by trained professionals under sterile conditions with appropriate pain management. Complications are infrequent; most are minor, and severe complications are rare. Male circumcision performed during the newborn period has considerably lower complication rates than when performed later in life.

Although health benefits are not great enough to recommend routine circumcision for all male newborns, the benefits of circumcision are sufficient to justify access to this procedure for families choosing it and to warrant third-party payment for circumcision of male newborns. **It is important that clinicians routinely inform parents of the health benefits and risks of male newborn circumcision in an unbiased and accurate manner.**

Parents ultimately should decide whether circumcision is in the best interests of their male child. They will need to weigh medical information in the context of their own religious, ethical, and cultural beliefs and practices. The medical benefits alone may not outweigh these other considerations for individual families.

The American College of Obstetricians and Gynecologists has endorsed this statement.



TASK FORCE ON CIRCUMCISION

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**Key points bolded and underlined by
Dr. Pollock for your ease of reference.**

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