



**Gentle
Procedures
Clinic**

TORONTO | WEST GTA

Infant & Baby Circumcision

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You are either considering or about to have circumcision performed on your son. Parents who are informed and prepared for circumcision can help their newborn son recover in less time by being better prepared. 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 son's 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 son's circumcision, 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. At our clinic locations in Toronto and Mississauga, we have created private surgical rooms allowing patients convenient access to avoid long waits at local hospitals. We serve patients from all over Ontario. With two convenient locations, you can book an appointment within just days or weeks.

Our Doctor

Dr Roland Sing has been practicing 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.



Getting Started

WHAT IS CIRCUMCISION?

Circumcision is a simple procedure in which the foreskin that sheathes the head of the penis is removed. Since foreskin traps bacteria and other infectious agents, its removal may improve genital hygiene and reduce risk of disease over the lifetime of the boy and his future sexual partners. In 2012, the American Academy of Pediatrics issued a statement that the health benefits of circumcision outweighed the risks. The Canadian Pediatrics Society acknowledges the potential benefits of circumcision but stops short of routine recommendation for newborns. Thus, circumcision for your son is a personal decision that you must make with your partner after weighing the benefits and risks and often involves religious or cultural preferences as well.

WHAT IS THE IDEAL AGE FOR CIRCUMCISION?

Anything done under 3 months of age is preferable. We have abundant experience with boys up to 12 months of age, if for some reason you can't meet the 3 month time frame.

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 reduction in the risk of invasive penile cancer which is thought to arise from adherence of high-risk human papillomavirus to the foreskin and smegma causing chronic inflammation and recurrent infections resulting in phimosis. Invasive penile carcinoma is highly associated with a history of phimosis.
5. **Reduced risk of prostate cancer** – Uncircumcised men have a 1.6 to 2-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** – in 1 in 500 circumcision there may be some bleeding that is usually stopped with pressure or less commonly with stitches. If a bleeding disorder such as hemophilia, then our doctors will need advice from a pediatric hematologist prior to 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)

Our Approach

All the following preparatory steps are taken to ensure your son is as comfortable as possible during the procedure. You will see that four actions will be taken to provide the best possible experience for your child.

Baby Tylenol Just Before You Come to the Clinic

We will ask that you give your infant son acetaminophen (aka Tempra/Tylenol) just before you leave home. Do not give Ibuprofen (aka Advil/Motrin) to your son, and breastfeeding mothers should not be taking Ibuprofen prior to the procedure.

Topical Anesthetic Cream to Numb the Skin

In our office, your child will have topical anesthetic applied to his penis. This is an anesthetic cream that numbs the skin. This surface painkiller is the second step we take to minimize discomfort during circumcision.

Pain Blocking Injection – Local Anesthetic

Next, once the skin is numb, your son will be given an injection called a dorsal penile ring block into the soft tissue alongside the penis. Our doctors use a combination block of both short and long acting anesthetic. This provides comfort and coverage for both the procedure and for hours after. Since the topical anesthetic has already numbed the skin, the injection is hardly felt.

Sugar Pacifier during the Brief Circumcision Operation

5-10 minutes after the injection, the penis is fully desensitized and the circumcision can be done. During the circumcision, soothing music is played, room temperature is increased and your son will receive sugar pacifiers to suck on for additional comfort. Studies show that the sweet flavours distract babies and reduce their perception of pain.

Caring Team Always Available

We understand that safety concerns are always number one. For your peace of mind, your doctor will be available 24 hours a day. All clients are given our 24 hour contact information so they can reach the doctor directly 24/7 should any concerns arise.

Patient Instructions

BEFORE CIRCUMCISION

Before your arrive

- On the day of your son's circumcision it is best to feed your baby just before you travel to our office. After you arrive, avoid feeding baby until the circumcision is complete.
- Please give your son Tylenol or Temptra according to weight before leaving home. Do not give Motrin, Aleve, Advil, Ibuprofen etc (anti-inflammatories or NSAIDs).
- Please arrive at your scheduled appointment time. This will avoid overcrowding of the clinic, and will assist in social distancing and infection control.
- Please bring a diaper that is one size larger than the one your son is currently using.
- Plan to be in our office for at least 60 minutes.

At the clinic

- We first apply a topical anesthetic ointment to your son's penis to numb the skin.
- Next your son will receive a dorsal penile ring block, an injection through a tiny needle, into the area that has already been numbed by the topical cream. After 5-10 minutes, the penis will be frozen.
- Your son will receive a sugar pacifier to suck on while the circumcision is completed, usually in 1 minute or less.

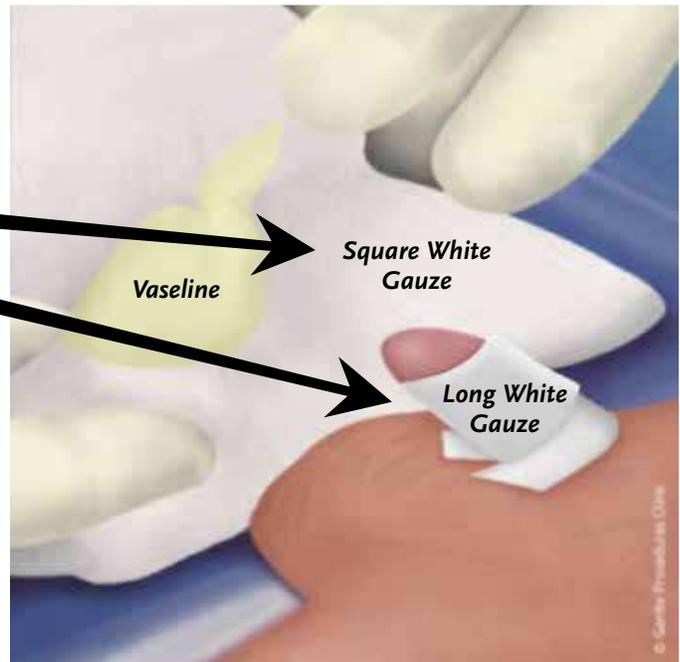
AFTER CIRCUMCISION

First 24 hours following the circumcision:

- Upon leaving the clinic, please have your son double diapered for the car ride home and for the next 72 hours. When you arrive at home, please swaddle him below the belly button and continue to do it for the next 24 hrs.
- There will be a **long** gauze with Vaseline wrapped around the head of your son's penis. Leave the gauze in place and let it fall off on it's own. For each diaper change, throw away the **square 3X3** gauze and replace it with a new gauze with Vaseline. Continue for 72 hrs. After that you can apply Vaseline directly to the penis. Your son can also start bathing at this time as well.
- Please check the diaper EVERY HOUR for the next 24 hours to look for any abnormal bleeding. If he is sleeping just look at the front of the diaper; if no blood has seeped through, his penis is likely not actively bleeding. **It is normal to see blood stains the size of a one dollar coin with each diaper change. It is NOT normal to see blood dripping from the penis.**

- If the long gauze is lightly soiled with stool or urine don't worry just leave it alone. If heavy stool soilage, review "Common Questions", page 11.
- It is normal for your son to be a little irritable or very sleepy for the first 24 hours following the circumcision. Missing one or two feeds is common. If they are eating less, then they may urinate less as well. Over the next week, normal findings will include:
 - bruising around the base of the penis/scrotum, as a result of the local anesthetic injection
 - the head of the penis could be very red and swollen

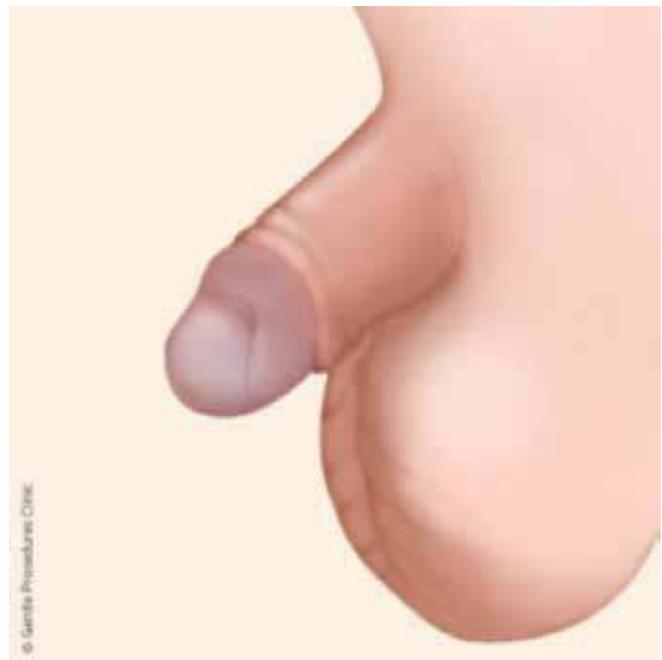
Here you see the square 3X3 white gauze with Vaseline that you will replace for the first 72 hours. The long white gauze that is wrapped around the head of the penis can be left to fall off on it's own, usually within the first 24 hours after surgery. Sometimes it stays longer, but will come off when your son starts to bathe again.



GENERAL CARE FOLLOWING THE CIRCUMCISION

- Healing is promoted by keeping the area clean and dry. Use disposable diapers for the first week; they are less irritating and help keep the area drier and cleaner. Do not bathe your son until at least 72 hours after surgery. You may sponge bathe the rest of your son's body in the meantime. You may also gently clean the area around the penis with warm water and a soft washcloth. Do NOT use baby wipes, towelettes, alcohol, powders or lotion as these may cause irritation.
- Avoid unnecessary car travel as car seats can be irritating to a newly circumcised penis. If you are using a car seat, a folded diaper placed between your baby and the car seat straps will help prevent pressure on the penis.
- For the following weeks after circumcision, put a generous amount of Vaseline on your finger and rub it over the incision site placing a thick layer of ointment over the entire head of the penis every diaper change.
- It is important to push the skin down off the head of the penis if it has moved up a little to ensure it heals properly just behind the back rim of the head. Make sure you can visualize the entire head of the penis all the way around; if you are unsure you may see us in the clinic or send a photo to the doctor. Do not do any pushing on the skin for the first 7 days because it will be swollen from the surgery. It is important to avoid "skin bridging" which results from the shaft skin or mucosa attaching to the head of the penis. Again, if you are unsure of the appearance of your son's penis, bring him to see one of our doctors, and they will adjust the skin for you if required.

Here you see a part of the mucosa attaching to the head of the penis. This is an example of "bridging" that requires a simple adjustment by the doctor.



THE HEALING PROCESS AFTER CIRCUMCISION

- Healing is usually rapid and occurs in several stages. Remember that a circumcision is like any other cut. There are many factors that influence healing; but most importantly, every child heals differently.
- First, the cut edge seals and bleeding ceases within minutes, hours, or even over the course of an entire day. The area just behind the penile head (especially the underside) will become swollen. Sometimes parents mistake this for a blister. In fact, this is normal and will subside within a week or two.
- In the first two days, there may be an **off-white or yellowish**, patchy appearance or discoloration of the penile head. These patches are a type of scab and are associated with normal healing. After a few days the area where the skin was cut may look green and yellow. **THIS IS NOT PUS OR INFECTION.** It is part of the normal healing process and it can take this color for up to two weeks after the circumcision. Some physicians are not familiar with this healing process and may mistake this for infection. Please follow up with our clinic if you are concerned. If your baby had glue applied to the cut line, it will flake off like a scab in a few days. Again please follow up with our clinic if you are concerned.

Refer to the figure on the right, which is a few days post op. It is NORMAL to see a very red colour to the penis, along with yellow blotches - this is NOT infection. Swelling at the bottom is also expected, is NOT infection, and resolves in 1-2 weeks.

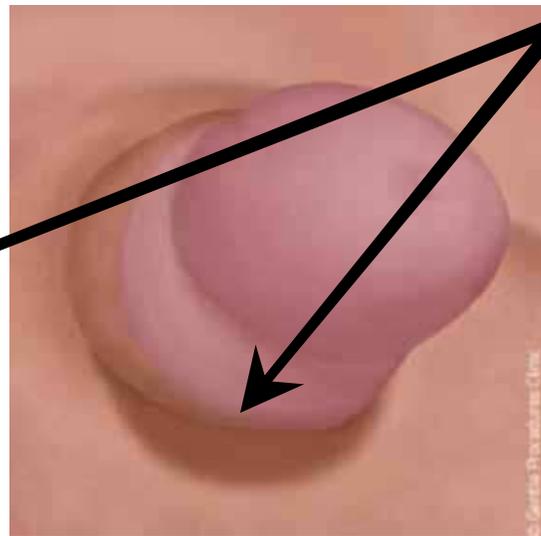


- You will also notice that the penile head appears red and glossy sometimes purple or blue. This is because the skin covering the penile head of an uncircumcised penis is mucous membrane (like the skin inside your cheek). Once exposed, the mucous membrane will toughen (or keratinize), and, in time, take on a normal appearance. It takes about a month for the penis to take on a normal, healed appearance.

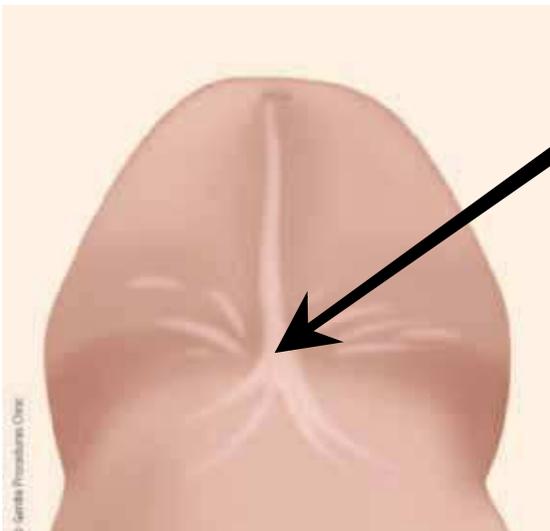
THE APPEARANCE OF THE PENIS AFTER HEALING

A common concern for parents is aesthetics. Remember that penises come in all shapes and sizes. While most penises “look normal” within days of the circumcision, some do not take on a “completely normal appearance” until after the penis starts to grow after many years. For example, there may be more mucosal tissue on one side compared to the other; this is a normal anatomical variation after circumcision that will resolve with time after your son grows older. Furthermore, although the penis may appear smaller after circumcision, it is not! This appearance is mostly due to the relaxation of skin surrounding the penis, which prior to circumcision held the penis up in a more erect state.

In nearly all these cases, the penis will heal properly, and, in time, take on a normal appearance. If you are concerned in anyway about the appearance of your son’s penis, please call to consult us.



You will notice a mucosal ring at the base of the penis head. Sometimes it is more prominent on one side than the other. This is normal and of no cause for concern.



You may notice a band on the bottom of the penis after circumcision. This is normal and of no concern.

Common Questions

How will my baby behave after circumcision?

It is not unusual for a baby to sleep 6-8 hours after the procedure and to miss a few feeds. While some babies can be irritable after the procedure most are back to their normal selves within 48 hours.

Will it hurt my baby when he urinates?

Usually the first time is the worst. He may be very comfortable after the procedure, then suddenly gets very upset and fussy for no reason. This is common and will settle with subsequent urination.

How do I clean the gauze on the penis if there is stool on it?

In the first 24 hours, please leave the gauze alone if you can. If there is heavy soiling, remove the gauze, put baby on a diaper and gently run small amounts of warm water on the dirty areas and let the diaper absorb. Put baby on fresh diaper and replace vaseline and gauze.

When can I start bathing my baby or immersing him in water?

72 hours/3 days

How long do I apply the Vaseline to the penis for?

Apply a generous amount of Vaseline over the incision and the entire penis head with each diaper change. This is done for up to 2 weeks. If you want, you can apply Vaseline to a fresh gauze and put the gauze and Vaseline down on the penis.

What happens if the gauze falls off early?

If the long white gauze wrapped around the penis falls off, leave it off. Just make sure that you have applied the square gauze with generous amounts of Vaseline.

How do I remove the gauze if it's sticking?

With baby on a diaper, you can run warm water on the gauze to soak it. This will make it easier to remove. After about 5 minutes, hold the base of the penis to stabilize it and then pull on the gauze slowly and gently. Still having problems? Reach us at the clinic.

If I remove the gauze and there is bleeding what should I do?

To stop bleeding, smear a small amount of Vaseline on a fresh gauze and apply on top of the penis. Next grasp the gauze and apply pressure through the gauze onto the penis with your thumb, index finger and middle finger (similar to holding a pen or pencil). Firm and constant pressure is applied for 5 minutes. Apply the same amount of pressure that you would use to stop a bleeding cut on your finger. Your baby should fuss a bit, otherwise the pressure is not great enough. Attempt this twice and if you can't stop the bleeding, contact the doctor as soon as possible.

What do I do if there appears to be bridging of the skin to the head of the penis?

Please call our office to book an appointment for our doctor to examine your baby.

What do I do if I can't see the head of the penis after the gauze falls off?

Please call our office to book an appointment for one of our doctors to examine your baby.

Why is my baby's penis retracting into his body looking "concealed"?

When there is a good amount of pubic fat or when the penile shaft is no greater than its diameter, the penis may tend to retract inward. This is normal. If your son fits this profile you can reduce the chance of a concealed penis by applying Vaseline to the entire penile head once a day until the penile head takes on a healed appearance (up to 6 months). To expose the penile head that has retracted inwards, place gentle downward pressure on either side of the penis and consult with the doctor if the head cannot be fully exposed. This may take months up to a few years before the penis stays persistently outward.



POLICY STATEMENT

Circumcision Policy Statement

TASK FORCE ON CIRCUMCISION

KEY WORDS

male circumcision, penis, prepuce, phimosis, sexually transmitted infections, HIV, urinary tract infection, analgesia, parental decision-making, ethics

ABBREVIATION

AAP—American Academy of Pediatrics

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All policy statements from the American Academy of Pediatrics automatically expire 5 years after publication unless reaffirmed, revised, or retired at or before that time.

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.

Findings from the systematic evaluation are available in the accompanying technical report. The American College of Obstetricians and Gynecologists has endorsed this statement.

TASK FORCE ON CIRCUMCISION

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