

matically decreased. They felt that their penises began to toughen, not unlike callouses on our hands, and they felt like they were “wearing a glove.” They described their sexual experience as shifting from color to black and white. They felt their foreskins had protected their glans and provided a great deal more sexual stimulation to that exposed area during sex play and intercourse prior to their surgery.

Do we really want this for our sons? Let’s look at the arguments:

The foreskin serves a definite purpose. It is nature’s way of protecting the sensitive glans from irritating urine or feces. It also protects our urinary opening from becoming susceptible to ulcers, inflammation, or narrowing.

The American Academy of Pediatrics has stated that there is no medical reason to circumcise a baby. Arguments relating to hygiene are unfounded in my experience, and in the vast majority of the population.

Actually, the problem of painful erections is far more common among males who have had too much tissue removed in their circumcisions, rather than among uncircumcised males.

This operation, like all such operations, could cause death, infection or hemorrhage; too much skin could be removed, or, not enough mucous membrane, or so forth depending on the skill of the person with the knife. That it may cause psychic damage is apparent in the emergence of foreskin restoration clinics where men are able to regain their natural covering by stretching or grafting to overcome their foreskin obsession and again become “completely male.”

We used to believe that circumcision did not hurt male babies because they were so easily comforted when hugged or suckled immediately following the cutting. Now it seems clear that this mutilation is very painful. Just ask anyone who has heard their baby scream at the moment of cutting. A baby can’t be given general anesthesia, and local anesthesia distorts the area too much for successful surgery.

One argument against circumcision is that,

“He’ll look different than his father and many of his peers.” With 42% of newborns currently keeping their foreskins, it’s not clear who will look different than whom. As far as my son knowing he looks different from me - he has blue eyes. I have green. He’ll likely have little body hair. I have plenty.

And so forth. It was certainly no big deal for my son when we talked about our differences. I believe this one is way overplayed.

Regarding cleanliness, circumcision is credited with removing the need to regularly cleanse smegma, a normal accumulation of penile secretions and naturally shed skin cells, from the foreskin.

This one too is overplayed. Very little extra effort is needed to remove smegma in the case of uncircumcised males. During baths the smegma should be simply wiped from the tip. This advice also applies when white “pearls” or lumps of smegma appear under the foreskin, indicating that normal separation of foreskin and glans is occurring.

One other reason given for cutting has been that it corrects *phimosis* (from the Greek word meaning “muzzling”), a condition where the foreskin cannot be retracted over the glans. This condition, however, rarely causes problems except in very unusual circumstances such as when urination is blocked or erections are painful. Usually even when these dysfunctions occur they may be relieved with remedies less painful than circumcision.

One other potential problem related to uncircumcised males is called *paraphimosis*. Here a tight foreskin, if forcibly retracted, may get stuck behind the glans, trapping blood and causing swelling. Normally even this condition may be relieved well short of circumcision.

On balance, I believe, there is little to recommend circumcision for the population in general. Given that belief and my own and my wife’s decision to leave Kyle uncut, here is some advice for other fathers (and mothers) who have, or will have, uncut sons:

The foreskin of an intact boy should never be pulled back because it is attached to the glans and the opening is typically only big enough for urination. It will work its way back naturally. In most boys this occurs by age three or four, but it may gradually occur all the way until a male is about eighteen years old. Even at eighteen if the foreskin is not fully retractable but no discomfort accompanies erections, nothing needs to be done. If this condition is somewhat painful, gradual stretching or a small dorsal slit are often all that are needed. A general regular washing of the penis does not require retracting the foreskin since the natural penis is well “packaged” like one’s tongue and keeps itself clean.

Forcing the foreskin back may not only cause pain and bleeding, but also scarring. This may result in a foreskin that does not stretch normally, a condition called adhesions, which may need to be treated medically.

Most problems now arise from over-fastidiousness. The natural secretions are intended as aids in intercourse and other functions; so, the best advice is to wash as needed and let nature take its course.

Most of what we are given at birth serves a useful function. Who among us really believes we can improve significantly on the functionality nature has endowed us with? Do we really believe we can fool mother nature?

As you can tell, I have become quite biased regarding this issue after having reviewed a sampling of the available literature. Apparently the major insurance companies agree with my position as very few are now covering the costs of this “unnecessary surgery.” Their reluctance, and not articles such as mine, is currently the primary reason that the incidence of this practice is declining.

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Daddy, Why Is Your Penis Different From Mine?

by Dick Gilkeson in MENTOR Magazine, Fall 1992, Volume 4 Number 3, p. 11-12



About a month ago my five-year-old son finally asked why his penis is different from mine.

Fewer and fewer men are simply opting to have their sons circumcised “because we are.” It is no longer, if it ever truly was, a strictly medical procedure. We now know that the practice does not curtail masturbation, and that doctors have a large financial stake in keeping this unnecessary surgery going.

Historically, these kinds of rationalizations and peer pressure seemed to be what drove the practice in the U.S. “Hygiene” has most often been the reason for this procedure; however, that excuse presumes that we males are too ignorant to wash our genitals.

With so few documented medical reasons for this practice, it is hard to imagine how we reached the point as a nation where 85% of our boys were regularly circumcised at the peak of cutting in 1980. It remains the second most frequently performed operation in this country today, directly involving 58% of our boys. These statistics are very confounding when one considers that in Great Britain, by contrast, only one percent of the males currently undergo this ritual cutting. The reality is that we are

the last major nation on Earth to engage in widespread nonreligious circumcision.

Circumcision is one of the oldest operations on record. The Egyptians performed it more than 5000 years ago. The Hebraic practice is believed to have originated with Abraham, who circumcised himself at age 99 following a divine revelation. He then circumcised his son Ishmael and all the males of his household, including his slaves. When Isaac was born, he was circumcised on the eighth day—creating the sacred ritual still followed today.

Those who take the Bible literally are unlikely to be swayed by current thinking. I can understand their reluctance to abandon the practice in light of the passage in Genesis 17:10 that states:

“This is my covenant, which ye shall keep, between me and you and thy seed after thee: Every man child among you shall be circumcised.”

It must be truly difficult for the very small minority of Jewish people who are currently breaking with their tradition by creating alternative bris support groups. Their circumcision ceremonies are being conducted as tradition has dictated, but without cutting.

Muslims have a culturally defined use for circumcision as well as a religious one. Moslem boys are routinely circumcised at age 12 as a rite of puberty. This ritual cutting is also delayed in several other cultures to test the males’ ability to withstand pain, and thus demonstrate their readiness to become adults. Body mutilations of young males still abound around the world. Most lead to further desensitizing of young males as part of creating brave men.

I say it’s time to rethink the purposes served by the binding of feet, knocking out of teeth, piercing of noses, lips, and ears, excising of clitorises, and mutilating of male foreskins. Can it possibly be that we need violence to teach us not to do violence? Surely that is not the case in the most criminally violent country in the world.

Our tradition has not always existed. Actually, among the non-Jewish population in this country, prior to 1920, the circumcised male was the exception. This changed dramatically in the 20’s and 30’s. After World War II the practice became almost universal for newborn males.

We are told on page 37 in *Love’s Body* by Norman O. Brown, that the piece of flesh that is cut is “the size of a quarter, containing more than three million cells, twelve feet of nerves, one hundred sweat glands, fifty nerve endings, three feet of blood vessels... and [the] penis’s own personal lubrication... An essentially internal organ [has been] made permanently external with the drying out and desensitization that accompanies any moist, sensitive skin adapting itself to frequent contact with an often abrasive world.”

Dr. Thomas Ritter, a writer on this subject, tells us that the exposed glans becomes dry, less purple-red, less smooth, less expansive, develops a layer of keratin, and is less sensitive.

This makes it easy for me to accept reports where men circumcised as adults describe their sexual pleasure as having been dra-