
■ NOCIRC OF MICHIGAN ■

INFORMANT

PREVENTING INFANT CIRCUMCISION — FOR THE WELL-BEING OF ALL

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A First-Year Doc Says No To Circumcision

by James Darryl Foust, MD

I successfully completed one year of training in the Family Practice Residency Program in August 1997 at Saginaw General Hospital, in Saginaw, Michigan. During my first month in the obstetrics department, I voiced my disapproval of circumcision very clearly and stated to senior residents who supervised me that I wanted nothing to do with the procedure.

They told me that performing circumcisions is a requirement, that I would have to learn how, and that the first-year residents did all the circumcisions. They said there was no way I could be a family practice physician and not do circumcisions. An older, very stern and closed-minded female senior resident told me the issue was settled.

When I mentioned my disapproval to my colleagues, they usually made penis jokes or else asked me if I was circumcised. So I slipped away, hid, and avoided circumcisions whenever I could.

At the times of the day when a circumcision was to be done, I went to the cafeteria, the smoking area, or the residents lounge. I even avoided attending deliveries where I knew a male was to be born. It saddened me to deliver a male baby, knowing what was to come next!

I knew no way to make a stand, refuse or cleanly get out of it. So I went a whole month hiding this way, and my supervisors failed me. They said they never wanted me back in their department again and said I should be dropped immediately from the residency program.

My residency director tried to find out if I had a personal or psychiatric problem, but I never told him a thing. I was required to see a psychiatrist to try to understand why I could have such “discrepancies” in my work. I never told the psychiatrist anything, and he pronounced me healthy.

For the record, I made 91% on the obstetrics in-service exam, which is scored nation-

ally. I placed in the top 10% in the nation in obstetrics. The obstetrics department had to take me back.

I was rotated back into the obstetrics department. Now it was either do circumcisions or lose my residency training. I finally gave in, but tried to rationalize the situation so that I would not feel responsible. I did the procedure three times with a resident observing me. I rationalized away my guilt because it was someone else’s patient, another resident got the consent, and another person brought the baby to the treatment room. I had someone standing over me telling me every step, so I felt like I was only his “hands,” and it was really him doing the circumcision.

It was important that one be “signed off” on the procedure so that the resident can do circumcisions without any supervision. This means doing one while the old obstetrician in charge watched. I managed to wait until the last day of my rotation.

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DIRECTOR’S MESSAGE

Most of us take pride in our right to self-determination. Therefore, it comes as a surprise to many men to realize that when it comes to their penis, a doctor’s hand was already there long ago, changing how they look.

Physicians, whether they approve of circumcision or not, let parents decide on this medically unnecessary, irreversible removal of a normal body part. Nowhere else can parents ensure that a doctor cut off normal, healthy tissue from their child.

Most American physicians and their medical organizations have yet to find the will and the courage speak out authorita-

tively against routine circumcision. Their backbones have bowed to their training, tradition, culture, political correctness, and the desire to make more money by keeping parents happy. Holding on to the status quo has long been their means of getting ahead.

Meanwhile, there are millions of men in the US who are walking around without a foreskin because their mothers thought it looked ugly, their fathers wanted sons to match their own disfigured image, and their doctor said, “Well alright, if you insist.”

On behalf of all the children, Norm Cohen, Director

Again, I isolated most of the guilt from what I was doing because I was under supervision, doing what I was told. I am sure that it was a drastically more negative experience for the baby than it was for me. However, I will never forget it. It will forever remain etched in my mind. He was a cute little baby, and he still had milk on his mouth.

I share my story with the hope that no one will condemn me, for I am trying now to take my past transgressions and use my experience for a good purpose. I also did what I did in a work environment that was not conducive to individual thought, and was filled with intimidation, trickery, and threat. I was dealing with a very hard, regimented group. I could not bargain with them. I was coerced to do something that I felt for sure was morally wrong. Nonetheless, I do not consider this an appropriate excuse for the circumcisions I performed.

I was rotated back to Obstetrics yet again. Now I was “signed off” and expected to do circumcisions all by myself. I think it took about a week before I found myself trapped.

It was a Sunday morning after being on call all night. There had been several deliveries in the night, and all the circumcisions were about to fall on me alone.

I pleaded with one mother not to consent. I did my best to talk her out of it. I told her that “circumcision alters the sex organs from that which is normal . . . is done without his permission . . . reduces sexual pleasure . . . can result in complications . . . has no medical indications . . . causes your baby a lot of pain . . . and your grown son may not appreciate what would be done today.”

I had performed four circumcisions and witnessed many others. My education, license, and government all said that I was able to do circumcisions, so I think my opinion should be considered valid.

The mother was still adamant that a circumcision be done, but she signed the consent form with a trembling hand.

Next, I was met at the door by a very cheerful nurse, who asked me in the nicest tone, “Would you like for me to take these babies to the treatment room for you to do the circumcisions?”

That was it. I had enough. In front of the mother, I told her no, that I was not going to do any circumcisions and that the shift changed in one hour and she would just have to get someone else to do them then!

The dust had settled for me and the air cleared. I knew who would be responsible if I did a circumcision. It was not good enough to blame it on the parents. I was out of the circumcision business! I went home.

The next morning the department sent a senior resident to see me about the incident. She explained that the mother “freaked out” when they came in to circumcise the baby, and she and another resident had to spend an hour or more calming her. Finally, though, the baby went home with a body just as whole and intact as he was when he came into the world!

This resident told me that I no longer had to get consent, do circumcisions, or have anything to do with the procedure. I thanked her. They never again troubled me with doing them.

I started reading about circumcision, instead of just listening to what I was told. The need for learning more about it began by being forced to do something that I instinctively felt sure was morally wrong. I never knew that foreskin restoration was possible until I began this research. I grew tired of defending everyone else’s, and not having one myself. I decided to rebuild a foreskin of my own.

A loss of sensitivity or other physical problems were not the reasons that motivated me to start restoring. I simply disliked the fact that whenever I looked in the mirror after a shower, or in the hazy reflection in the water, I saw, in the reflection of myself, my private parts rearranged according to whatever plan some nervy bastard had decided upon. More important though was a deep desire to have my body in its normal condition, which by definition must be the best, and this was my most important reason.

With all the admiration people the world over have for the beauty of youth, the perfection of nature, and the wonder of a sunrise, I will never, ever comprehend the practice of circumcision, which is contrary to all of this.

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MISSION STATEMENT

NOCIRC of MICHIGAN

NOCIRC of Michigan is a non-profit, consumer rights advocacy group that educates people about circumcision and about the benefits of intact genitals.

We inform parents and healthcare providers in Michigan about the impact of circumcision and about the proper care of intact genitals. We protect consumers from fraudulent medical claims. We promote the benefits of normal genitals and foreskin restoration.

We know the removal of normal, healthy tissue from a child’s genitals—in the name of medicine, religion or social custom—results in a loss of sexual function and is a violation of human rights.

We are a group of dedicated consumer activists and health care professionals. We are committed to effective education, advocacy and activism on behalf of children to protect them from harm. We are part of a worldwide movement to end all forms of male and female genital mutilation.

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La Leche League Says No to NOCIRC

Moms and Babies Suffer as a Result

by Norm Cohen

NOCIRC's information table was well-received at the 2005 La Leche League of Michigan Breastfeeding and Parenting Conference last April. Many conference attendees stopped by our table to get our free information on circumcision and on how circumcision impacts breastfeeding. Many asked questions and held meaningful discussions with our staff during the conference.

Several League mothers were proud to let us know that they had left their own sons intact and that they were glad we were there.

Therefore, we were surprised and saddened to learn that we have been barred from exhibiting again this year at the Michigan area conference. We received a letter from the organizer stating that "La Leche League finds **NOCIRC's** unwavering stance on circumcision to be in conflict with La Leche League's policy of not mixing causes."

It is noteworthy that most of the exhibitors and advertisers at the last conference were not related to breastfeeding nor to the mission statement of La Leche League (LLL). Other exhibitors at the conference offered information on health and beauty products, toys, diapers, and natural family planning.

While hiding behind their mantra of "not mixing causes," La Leche League regularly "mixes causes" in the operation of its conferences and catalog business. It sells conference sessions and books on parenting topics far beyond the breastfeeding relationship.

In private disclosures from our supporters within League, we were told that La Leche League has itself mixed personal and religious causes to stop the free exchange of information to its members who are genuinely interested in learning about circumcision's negative impact on breastfeeding success.

Researchers have found that circumcision interferes with breastfeeding initiation. A newly circumcised baby may not be able to nurse at all until the pain diminishes. Most good breastfeeding positions put pressure on the penis, increasing his pain.

In La Leche League's own *Breastfeeding Answer Book* (3rd revised edition, p. 27), we read: "When a baby undergoes a painful medical procedure, such as a heel stick, injection, spinal tap, or circumcision, he may shut down and be unreceptive to feedings until he is feeling better."

NOCIRC of Michigan has exhibited successfully at over 150 conferences locally and statewide. Each year, we exhibit at the breastfeeding conferences held by the Michigan Association of Lactation Consultants and the University of Michigan Medical Center.

We are asked back to these conferences year after year. We hand out our information pamphlets in a non-confrontational manner to those who approach our table because they are sincerely interested in learning from us. Last October, our national office staffed a well-received exhibit booth for pediatricians attending the American Academy of Pediatrics conference in Washington, DC.

NOCIRC already counts among its supporters hundreds of LLL members and alumnae. What we learned from last year's conference is that the majority of LLL members are on

our side, but a few influential members object to our presence. Simply having the **NOCIRC** information booth present at the conference serves as a lightning rod that may require some to explain to their peers at League why they circumcised their sons. Like La Leche League itself, we have been falsely accused of "making mothers feel guilty" for their parenting decisions.

La Leche League's board of directors have placed a higher priority on protecting religious circumcision than on breastfeeding success for the 94% of non-Jewish, non-Muslim moms in the United States.

Are you surprised by La Leche League's behavior on this issue? If so, then write to their international board of directors. Their names and email addresses are listed at: www.lalecheleague.org/BOD/BOD.html.

Ask the Board to stop this censorship and to trust their membership to make their own informed choice about circumcision. On behalf of babies yet to be born and mothers yet to be educated, ask La Leche League to permit the free exchange of information that will allow **NOCIRC** be a participant in breastfeeding success.



John Geisheker, Leonard Glick, Marilyn Milos, and Norm Cohen staff the **NOCIRC** information booth at the 2005 National Conference of the American Academy of Pediatrics last October in Washington, DC

By restoring my foreskin, I did gain sensitivity, dramatically. No one ever had any right to take this away from me. My penis returned to the exquisite sensitivity that I remember as an early teenager.

In my lifetime of personal experience, and through my education as a physician, I have witnessed many tragedies and even horrific things. However, all pale by comparison to the routine alteration of sexual organs, without permission, from that which is normal.

A person is held by force, often given no anesthesia (laboratory standards require anesthesia even for rats), his foreskin is peeled from his penis, indeed, skinned from his penis, then cut off and discarded.

The screams this produces should give anyone with any degree of insight the conviction that it is probably a kind of agony which is unique in the human experience, especially when one considers that the tissue being torn apart is the most sensitive in the male body.

The penis and the clitoris both come from the same embryologic structures, are innervated by the same nerves, and are in a true sense the same things, just in two basic variations of humanity. Therefore, a circumcision can be imagined and comprehended by both men and women.

Perverved logic is used to claim that circumcision is proper because it is done to an infant. However, a man is physically changed by what was done to him in infancy at a time and place when he was powerless. It is not as though infants are another creature of some kind. The infant becomes the man and

the man was once an infant at a real moment in time who does still exist in memory in a global way through the man's personality.

What is so terrifying is that children are so powerless. Children make such easy victims. Look at what is done to them. These people, who are the least powerful, the most dependent, and need the most to just be loved and protected, are treated the most despicably. What does that say?

A new residency director took over and, as one of his first decisions, he made sure I was denied a new contract needed to complete the remaining two years of my medical training. That was it. I was terminated.

The directors of the residency program sent me out with good letters of recommendation. They said that I did not fit in, and they believed it was because I'm from the South.

If one adult were to take another adult by force and alter his or her sexual organs with a knife from a normal state to another state which is somehow "better" in the perpetrator's mind, I think most courts and juries would place such a person so far into the prison system that they would never come out. Yet within the confines of an infant's situation, such an assault is demanded. I bothered to question why.

James Darryl Foust, MD now resides in Tennessee. He never completed his residency training but did complete his own foreskin restoration.

Do You Want to Change the World?

53,000 newborn boys are circumcised each year in Michigan. Many of these circumcisions are requested by parents out of sincere ignorance of how unnecessary they are.

Would you like to make Michigan a better place to be born?

Please call our office at (248) 642-5703 or email Lori Hanna, Education Coordinator, at Lori@NOCIRCofMI.org. Volunteers are needed to help staff our information tables, contact legislators, and maintain our websites. A little bit of your time will make a big difference in the lives of baby boys.

Special Offer to Members Join or Renew Now!

New or renewing members of **NOCIRC of Michigan** who contribute \$35 or more are eligible to receive a copy of the book, *Circumcision Exposed: Rethinking a Medical and Cultural Tradition* by Billy Ray Boyd, as a thank-you for their generous support.

This 148-page book is an easy introduction into the controversy behind male circumcision. It surveys all of the reasons why people are rejecting the practice. It makes an excellent gift for expectant parents, childbirth educators, nurses, midwives, and physicians.

To get the book, please send in this coupon with your donation.

Thank you for your support!

BAD IDEAS FROM THE HISTORY OF MEDICINE

Real Quotes From Real Doctors

"When these [uncircumcised] children grow up, and start having sex, we are guaranteeing they will be at a greater risk. Why would we want to do that?"

Dr. Thomas J. Coates, MD
Prof. of Infectious Diseases, UCLA School of Medicine
quoted in the *Los Angeles Times*, November 28, 2005 about circumcision and the transmission of HIV

FACT: Over 500,000 circumcised American men have been infected with the AIDS virus through sexual contact since the epidemic began.

TELL THE TRUTH ABOUT CIRCUMCISION

How to Become An Informant

- ◆ Help us to educate parents and health care providers! A *tax-deductible* membership fee of \$30 or more will make you a **NOCIRC of Michigan Informant**.
- ◆ Free pamphlets and newsletters are available in bulk to anyone wishing to distribute them to parents and care providers.
- ◆ We exhibit at many conferences and health fairs each year. Please call to volunteer to help staff our information tables.
- ◆ Please let us know about relevant conferences or fairs that **NOCIRC of Michigan** may exhibit at anywhere in the state.

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