

CIRCUMCISION - A UNIVERSAL PROCEDURE WITH NO UNIFORM TECHNIQUE AND PRACTICED BADLY

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Circumcision is a universal religious requirement for all Muslim and Jewish males. Male circumcision has several advantages, such as personal hygiene, reducing the incidence of malignancy and prevention of infections. It is known that Jews, who have their circumcision soon after the birth, never develop cancer of the penis where as in Muslims it is rare. This fact is due to removal of smegma under the prepuce early in life, which is a known carcinogen¹.

If religious considerations are not taken into account many people of other religious beliefs also choose circumcision for scientific reasons mentioned above.

In the western countries like Australia^{2,3} and America till recently the circumcision was fairly widely practiced for reason of maintaining hygiene. But there has been recent trend against this procedure because of it's complications³. In various studies the complications that are quoted include immediate surgical complications and long term, psychological trauma¹ mutilation of genital organ,¹ loss of all important sexual sensations, problems of neonatal and maternal bonding¹ and personality disorders are some of the arguments used against circumcision.

Irrespective of any argument, in a country like Pakistan all Muslims males should be circumcised. But unfortunately there are no laid down standards for this procedure. People from all walks of life do circumcision to enhance their livelihood. They vary from technician, barbers, general practitioners, gynecologist and obstetrician, hospital directors to surgeons. It is a common observation that most of these people have not had appropriate training in the principles of performing this procedure. Hence the complications are rife. Excessive removal of skin from the body of penis, although inappropriate, some how has come to be considered a religious requirement. Often parents inquire about inadequate removal of skin.

Since circumcision is a surgical procedure, it requires application of all the principles needed in performing a surgical procedure. This means aseptic technique with sterilized instruments, drapes, antiseptic solution, disposable syringe and local anaesthetic agent for all patients. In older children proper general anaesthesia is also desirable¹.

There are different kinds of surgical techniques for the circumcision. To achieve haemostasis for this. various innovations are employed such as the use of improvised crushing clamps, artery forceps, bone cutters and thread tourniquet. Various forms of ointments, pastes, coal ash, cow dung are also used to control bleeding of circumcision. Many of these methods have no scientific basis and are positively dangerous. Similarly Post operative dressing methods also differ in different hands. Most people consider application of water to the sight of circumcision harmful (although

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bathing the circumcised wound is the best method of keeping the site clean).

In the present times an important thought emerges of the possibility of transmission of hepatitis through this procedure and requires study and appropriate precautions to prevent this happening. Besides further studies are required to assess as to where the maximum number of complications occur.

In view of the above description it is obvious that plethora of disasters will continue to occur which includes hemorrhage, sepsis, inadequate procedure, excessive loss of skin, injury to the glans and occasionally its amputation. Some of these damages may be irreversible and many require major plastic surgical procedures to achieve some semblance of cosmetic appearance and functional organ.

For access to optimal, safe, expedient and economically cheap circumcision, a study is required to put forward appropriate recommendations.

Like constant evolution and refinements of other surgical procedures one must also search and establish the newer techniques of circumcision which should be safe with minimal complications, cheap and which may be performed at every level of the community including rural areas by trained persons.

To make circumcision safe, ideally on job training program of people of different sections of community is required, through structured workshops in different parts of the country by the trained surgeons on regular basis. If one assumes that PlastiBell technique appears to be the best procedure for neonates and infants, which is quick, least traumatic, with minimal blood loss and have least number of complications, an observation which is also corroborated in a large number of cases and reported in an article in this issue by Dr. Iftikhar A. Jan, then a strategy of practical demonstration and on job practical training is required through regular workshops in different parts of the country, to provide a uniform practice and access to a safe surgical procedure in male children.

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Note: A practical procedure of steps of PlastiBell techniques of circumcision with pictorial demonstration prepared by Prof. Naeem Khan, also appears in this issue of Pakistan Journal of Medical Sciences on page 277