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The Australian College of Paediatrics

Position Statement

The Australian College of Paediatrics has prepared the following statement on routine circumcision of infants and boys to assist parents who are considering having this procedure undertaken in their male children and for doctors who are asked to advise on or undertake it.

ROUTINE CIRCUMCISION OF NORMAL MALE INFANTS AND BOYS

Circumcision of males has been undertaken for religious and cultural reasons for many thousands of years. It probably originated as a hygiene measure in communities living in hot and dry environments. It remains a very important ritual in some religious/cultural groups.

During the last 50-100 years, neonatal male circumcision became widespread in English-speaking countries. Until the late 1960s or early 1970s, it was generally performed without any form of anaesthesia. In Australia, the circumcision rate has fallen very considerably in recent years and it is estimated that currently only 10 percent of male infants are routinely circumcised. It is now generally performed with some form of local or general anaesthesia.

There have been increasing claims of health benefits from routine male circumcision. There are, however, also risks associated with the procedure from infection, bleeding and damage to the glans penis. The College has recently reviewed evidence in relation to risks and benefits and has concluded that it is not possible to be dogmatic on the exact risk/benefit ratio. There are suggestions of reductions in the risk of urinary tract infections, of local inflammatory conditions of the penis and later cancer of the penis. It has also been claimed that there is a reduction in the risk of sexually transmitted disease (especially HIV) and of cancer of the cervix in partners of circumcised males. However, studies claiming these benefits do have methodological problems which could influence findings and these problems will be difficult to overcome. Therefore, at the present time it would be wrong either to claim that there are definite health benefits or to deny that they exist.

The possibility that routine circumcision may contravene human rights has been raised because circumcision is performed on a minor and is without proven medical benefit. Whether these legal concerns are valid will probably only be known if the matter is determined in a court of law.

The [Australasian Association of Paediatric Surgeons](#) has informed the College that it is its view that routine male circumcision should not be performed prior to the age of 6 months. It considers that "Neonatal male circumcision has no medical indication. It is a traumatic procedure performed without anaesthesia to remove a normal and healthy prepuce."

The College believes informed discussion with parents regarding the possible health benefits of routine male circumcision and the risks associated with the operation are essential. Up-to-date, unbiased written material summarising the evidence in plain English should be widely available to parents.

If the operation is to be performed, the medical attendant should ensure this is done by a competent operator, using appropriate anaesthetic techniques and under medical conditions that minimise the hazards.

In the majority of cases, parents will decide for or against a routine male circumcision on family, social, aesthetic and religious grounds rather than on medical ones. In all cases the medical attendant should avoid exaggeration of either benefits or risks of this procedure.

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