

# CIRCUMCISION

THIS INFORMATION EXPLORES THE DETAILS AROUND CIRCUMCISION INCLUDING:

- WHAT IS A CIRCUMCISION?
- WHY SHOULD I HAVE A CIRCUMCISION?
- WHAT ARE THE BENEFITS OF HAVING A CIRCUMCISION?
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- WHAT CAN I EXPECT BEFORE, DURING AND AFTER MY SURGERY?
- WHAT SHOULD I DO ONCE I AM DISCHARGED HOME?
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## WHAT IS A CIRCUMCISION?

A CIRCUMCISION IS AN OPERATION TO REMOVE THE FORESKIN LEAVING THE HEAD (OR GLANS) OF THE PENIS EXPOSED.

## WHY SHOULD I HAVE A CIRCUMCISION?

THIS IS NORMALLY DONE:

- IF THE FORESKIN HAS BECOME TIGHT MAKING IT DIFFICULT TO PULL BACK AND WASH UNDERNEATH
- FOR RECURRENT INFLAMMATION OR INFECTION
- FOR PAIN OR BALLOONING OF THE FORESKIN DURING THE PASSAGE OF URINE
- FOR PRE-CANCEROUS OR CANCEROUS CELLS OF THE FORESKIN
- FOR A TIGHT FORESKIN THAT IS CAUSING PAIN DURING AN ERECTION.

## WHAT ARE THE BENEFITS OF HAVING A CIRCUMCISION?

THE BENEFITS OF HAVING THE OPERATION ARE THAT YOU WILL NOW BE ABLE TO CLEAN AROUND THE GLANS OF THE PENIS, REDUCING THE RISK OF INFECTION. IT WILL RESOLVE THE PROBLEM OF PAIN AND DISCOMFORT WHICH YOU MAY HAVE HAD DUE TO THE FORESKIN BEING TIGHT. ALSO IN SOME CIRCUMSTANCES, IF THE DOCTOR IS CONCERNED, IT CAN BE USED TO SHOW IF ANY CANCEROUS CELLS ARE PRESENT. THIS WILL HELP YOUR DOCTOR TO SEE IF ANY FURTHER TREATMENT IS NECESSARY.

## WHAT ARE THE RISKS OF HAVING A CIRCUMCISION?

ALL PATIENTS WHO UNDERGO SURGERY HAVE A RISK OF DEVELOPING A COMPLICATION; ALTHOUGH THE MAJORITY OF PATIENTS DO NOT SUFFER FROM ANY ISSUES. HOWEVER, THE COMPLICATIONS INCLUDE:

- **INFECTION** IF YOU NOTICE PAIN, SWELLING OR AN OFFENSIVE DISCHARGE AND DEVELOP A FEVER YOU MAY HAVE AN INFECTION IN THE WOUND AND YOU SHOULD SEEK ADVICE FROM YOUR GP OR THE CHRISTIE. (CONTACT NUMBERS ARE AT THE END OF THIS LEAFLET).

- **BLEEDING** YOU MAY INITIALLY NOTICE SOME SPOTTING OF BLOOD ON YOUR UNDERWEAR WHICH SHOULD SETTLE WITHIN THE FIRST FEW DAYS. IF THE BLEEDING PERSISTS OR BECOMES HEAVY YOU NEED TO SEEK MEDICAL ADVICE.
- **SWELLING** YOUR PENIS WILL SWELL A LITTLE; THIS IS NORMAL. IF YOU FEEL THE SWELLING IS WORRYING YOU SHOULD CONTACT YOUR DOCTOR
- **SENSORY CHANGES** THE END OF THE PENIS MAY BECOME OVERSENSITIVE OR UNDERSENSITIVE. IN MOST CASES THIS IS NOT TROUBLESOME, BUT CAN OCCASIONALLY CAUSE DIFFICULTY DURING SEXUAL ACTIVITY.
- **VISUAL CHANGES** (COSMETIC DISSATISFACTION) YOU MAY FEEL THAT YOUR PENIS PHYSICALLY LOOKS SHORTER BUT THIS IS NOT THE CASE. AS THE SKIN HAS BEEN REMOVED YOUR PENIS WILL LOOK COSMETICALLY DIFFERENT.
- **PAIN** THIS IS COMMON BUT IS USUALLY EASILY TREATED WITH PAINKILLERS WHICH YOU WILL TAKE HOME WITH YOU.
- **ALLERGIC REACTIONS** YOU MAY HAVE ALLERGIC REACTIONS TO MEDICATION WHICH YOU HAVE BEEN GIVEN. THESE ARE RARE BUT IF YOU ARE AWARE OF ANY ALLERGIES PLEASE TELL US BEFORE THE OPERATION.
- **ANAESTHETIC ISSUES** THESE CAN INCLUDE CHEST INFECTIONS, PULMONARY EMBOLISM, STROKE, DEEP VEIN THROMBOSIS AND HEART ATTACKS.

## WHAT OTHER OPTIONS DO I HAVE

ALTHOUGH A CIRCUMCISION IS OFTEN YOUR BEST OPTION THERE MAY BE SOME ALTERNATIVES THAT MAY BE CONSIDERED. YOUR SURGEON WILL ADVISE YOU OF THE BENEFITS AND DISADVANTAGES OF THESE IF THEY ARE APPROPRIATE.

## WHAT CAN I EXPECT BEFORE, DURING AND AFTER MY SURGERY?

ABOUT TWO WEEKS BEFORE THE OPERATION, WE WILL ASK YOU TO ATTEND THE HOSPITAL FOR 'PRE-OP CLERKING'. THIS IS WHERE A NURSE PRACTITIONER OR DOCTOR WILL CHECK THAT YOU ARE PREPARED FOR THE OPERATION. THE VISIT WILL INCLUDE BLOOD TESTS ALONG WITH AN EXAMINATION OF THE CHEST, HEART AND ABDOMEN. THEY WILL ASK YOU QUESTIONS ABOUT YOUR GENERAL HEALTH, OTHER PREVIOUS ILLNESSES AND ANY MEDICATION OR TABLETS YOU ARE TAKING. THERE WILL BE AN OPPORTUNITY FOR YOU TO ASK QUESTIONS OR RAISE CONCERNS AT THIS TIME. THE PRE-ASSESSMENT NURSES WILL TAKE A URINE SPECIMEN TO ENSURE THAT YOU DO NOT HAVE A URINARY TRACT INFECTION AND THEY WILL ALSO TAKE SOME SWABS FROM YOUR NOSE, MOUTH AND GROIN. THIS IS TO ENSURE THAT YOU ARE FREE FROM INFECTION PRIOR TO YOUR SURGERY. IF YOU ARE FOUND TO HAVE AN INFECTION, YOUR SURGERY MAY BE DELAYED UNTIL THIS IS COMPLETELY TREATED.

IF YOU ARE DIABETIC IT IS IMPORTANT TO GET YOUR DIABETES AS WELL-CONTROLLED AS POSSIBLE TO REDUCE THE RISK OF INFECTIONS AND AID WITH YOUR RECOVERY.

BEFORE THE OPERATION WE WILL ASK YOU TO STOP EATING AND DRINKING (ABOUT 4-6 HOURS BEFOREHAND). THIS INCLUDES CHEWING GUM. YOU MAY DRINK WATER UP TO TWO HOURS BEFORE THE OPERATION.

YOU WILL BE ADMITTED ON THE DAY OF THE OPERATION WHEN YOU WILL MEET SOME OF THE STAFF WHO WILL BE LOOKING AFTER YOU DURING YOUR STAY IN HOSPITAL. THE WARD STAFF WILL FAMILIARISE YOU WITH THE ROUTINE OF THE WARD AND SHOW YOU WHERE THE FACILITIES ARE.

## DURING THE SURGERY

THE OPERATION CAN BE DONE UNDER EITHER A LOCAL ANAESTHETIC (NUMBS THE AREA), GENERAL ANAESTHETIC (WHERE YOU ARE UNCONSCIOUS/ASLEEP), OR SPINAL/EPIDURAL (WHICH NUMBS FROM THE WAIST DOWN).

THE OPERATION TAKES APPROXIMATELY 60 MINUTES. THE FORESKIN IS REMOVED AND THE REMAINING SKIN IS STITCHED TO THE BASE OF THE GLANS WITH DISSOLVABLE SUTURES. THE TISSUE THAT IS REMOVED IS USUALLY SENT TO THE LABORATORIES TO BE ASSESSED.

## AFTER YOUR CIRCUMCISION?

YOU CAN EXPECT TO STAY FOR AT LEAST 4 HOURS AFTER RETURNING TO THE UNIT. HOWEVER, EVERYONE IS DIFFERENT AND SO RECOVERY TIMES DO VARY. OCCASIONALLY, WE MAY ASK PATIENTS TO STAY OVERNIGHT IF THEIR RECOVERY IS SLOWER THAN PLANNED. YOU WILL ALSO NEED TO PASS URINE BEFORE YOU ARE DISCHARGED. YOU WILL NEED TO ARRANGE FOR SOMEONE TO COLLECT YOU FROM HOSPITAL AS YOU CANNOT DRIVE YOURSELF HOME. WE RECOMMEND THAT THERE SHOULD BE AN ADULT WITH YOU AT HOME OVERNIGHT AND FOR 24 HOURS FOLLOWING A GENERAL ANAESTHETIC.

WHEN YOU ARE READY TO GO HOME THE NURSES WILL COMPLETE ALL THE NECESSARY PAPERWORK. A FOLLOW UP APPOINTMENT WILL EITHER BE GIVEN TO YOU BEFORE DISCHARGE OR SENT TO YOU IN THE POST.

YOU MAY HAVE SOME DISCOMFORT OR PAIN FROM THE OPERATION FOR THE FIRST FEW DAYS; THIS CAN USUALLY BE CONTROLLED WITH PAINKILLERS SUCH AS PARACETAMOL.

## WHAT SHALL I DO ONCE I AM DISCHARGED HOME?

### PAIN

FOLLOWING YOUR SURGERY YOU MAY EXPERIENCE SOME DISCOMFORT. WHEN AT HOME PLEASE TAKE THE PAINKILLERS PROVIDED TO YOU BY THE HOSPITAL PHARMACY REGULARLY. DO NOT EXCEED THE STATED DOSE. YOU SHOULD NOTICE THAT THE PAIN SEEMS TO SETTLE AFTER THE FIRST 3-7 DAYS AFTER THE SURGERY, ALTHOUGH YOU MAY STILL GET SOME MILD DISCOMFORT UP TO 3 WEEKS AFTER SURGERY.

SUPPORTIVE UNDERWEAR MAY HELP WITH ANY DISCOMFORT BY PREVENTING THE PENIS FROM MOVING AROUND TOO MUCH.

### WOUND CARE

THE DAY AFTER YOUR SURGERY YOU CAN REMOVE YOUR DRESSING CAREFULLY. PLEASE TRY AND KEEP YOUR WOUND AS CLEAN AND DRY AS POSSIBLE.

YOU CAN SHOWER THE DAY AFTER SURGERY IN THE EVENING BUT ADVISE THAT YOU DO NOT SOAK FOR LONG PERIODS UNTIL THE WOUND IS COMPLETELY HEALED. TRY AND AVOID GETTING SOAP ON THE WOUND WHICH CAN CAUSE SOME IRRITATION, HOWEVER IT IS IMPORTANT TO KEEP THE HEAD OF THE PENIS AND UNDER THE FORESKIN CLEAN. IF THE WOUND GETS WET, DRY IT CAREFULLY BY PATTING IT WITH GAUZE BUT DO NOT RUB. PLEASE DO NOT TOUCH THE WOUND WITH YOUR HANDS UNLESS THEY HAVE BEEN THOROUGHLY WASHED.

### ANTIBIOTICS

YOU WILL BE GIVEN 7 DAYS OF ANTIBIOTICS TO TAKE HOME FOLLOWING YOUR OPERATION TO REDUCE THE RISK OF INFECTIONS. PLEASE TAKE THE ANTIBIOTICS FOR THE ENTIRE TIME PRESCRIBED AND AVOID MISSING ANY DOSES.

### STITCHES

ALL THE STITCHES USED IN YOUR OPERATION ARE DISSOLVABLE AND DO NOT NEED REMOVING. THEY CAN TAKE UP TO 6-8 WEEKS TO COMPLETELY DISSOLVE.

### WORK

YOU WILL NEED APPROXIMATELY 2 WEEKS OFF WORK, ALTHOUGH IF YOUR JOB INVOLVES WORKING IN DIRTY ENVIRONMENTS OR MANUAL HANDLING YOU MAY WISH TO TAKE LONGER (UP TO 6 WEEKS) TO REDUCE THE RISK OF ANY COMPLICATIONS. WE WILL PROVIDE YOU WITH A SICK CERTIFICATE IF REQUIRED. PLEASE NOTE YOU CAN SELF-CERTIFY FOR THE FIRST WEEK. TRY TO AVOID ANY HEAVY LIFTING FOR AT LEAST 2 WEEKS

### DRIVING

YOU CAN DRIVE WHENEVER YOU FEEL THAT YOUR PAIN LEVEL IS LOW ENOUGH. YOU SHOULD NOT DRIVE IF YOU ARE STILL TAKING STRONG PAINKILLERS.

## **OUTPATIENT APPOINTMENTS**

YOU WILL BE SEEN IN CLINIC 2-3 WEEKS AFTER YOUR SURGERY, WHEN YOU WILL BE EXAMINED TO SEE IF YOUR WOUNDS HAVE HEALED AND THE RESULTS OF YOUR SURGERY DISCUSSED IF AVAILABLE.

### **WHAT TO LOOK OUT FOR**

- PERSISTENT BLEEDING FROM THE WOUND SITE
- PAIN WHICH IS NOT CONTROLLED BY THE PAINKILLERS PRESCRIBED OR IS GETTING WORSE
- A FEVER OF 100°F (38°C) OR HIGHER
- SWELLING, REDNESS AND/OR DISCHARGE FROM THE WOUND