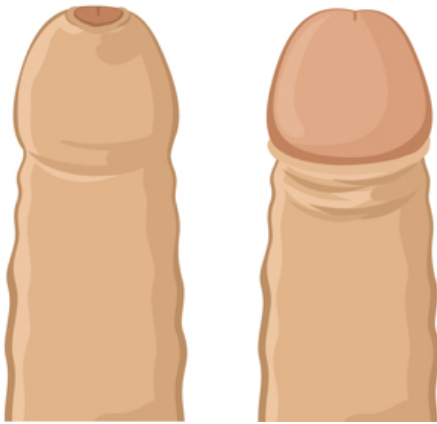


Circumcision

Procedure information



Uncircumcised penis

Circumcised penis

About circumcision

Circumcision is a procedure performed in men to completely remove the foreskin, leaving the head of the penis exposed.

Why is circumcision required?

Circumcision in adolescent and adult males may be performed to treat:

- Scarring around the opening of the foreskin which prevents the foreskin from being pulled back over the head of the penis (phimosis).
- Skin diseases affecting the foreskin, such as Balanitis xerotica obliterans (BXO) / Lichen sclerosis (LS) which causes scarring and hardening of the foreskin.
- Recurrent Urinary tract infection and infections under the foreskin (balanitis).
- Abnormal growths (including cancers) on the foreskin or head of the penis.

What does circumcision involve?

Circumcision is usually performed under general anaesthetic (completely asleep), but spinal anaesthetic (numb from the waist down), or local anaesthetic (numbing injection) can be used instead.

We make an incision below the head of the penis and remove the whole foreskin.

We use dissolvable stitches to join the skin beneath the head of the penis to the skin on the shaft of the penis.

The procedure is usually performed as day surgery – you can go home on the same day of the surgery as long as you are accompanied by a responsible adult.

What is the recovery after circumcision?

There will be some swelling of the penis which will go away after a few weeks. It will take at least six weeks for the penis to reach its final appearance.

You will need to abstain from sex for four to six weeks after the procedure.

You can usually return to driving 24 hours after the procedure.

You can usually return to work one to two days after the procedure.

What are the risks of circumcision?

Common risks (1/2 – 1/10)

- Change in sensation in the penis.

Occasional risks (1/10 – 1/50)

- Bleeding requiring further surgery to correct.
- Wound splitting open and taking longer to heal.
- Wound infection requiring antibiotics.

Rare risks (1/50 – 1/250)

- Scarring at the opening of the urethra blocking the flow of urine and requiring further surgery to correct.
- Dissatisfaction with the final appearance of the penis

The risks of anaesthesia have not been listed here.

What are the alternative treatment options?

- Conservative management – no treatment.
- Topical steroid cream.
- Stretching the foreskin by using a device such as Phimo-Stop.

- A dorsal slit operation.
- A preputioplasty.

If you are uncertain if circumcision is the best treatment for you, please discuss your treatment options with your urologist.

For more information please visit www.brisbaneurologyclinic.com.au.

This is general information only. Please consult your doctor for more information and treatment options.

For appointments and enquiries please contact 07 3830 3300.

Smith, J. A., Howards, S. S., Preminger, G. M., & Hinman, F. (2012). *Hinman's Atlas of urologic surgery*. Philadelphia: Elsevier/Saunders.

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