

Treating phimosis

Dr Charlton states that phimosis is an absolute indication for male circumcision. Once this statement was true, but no more. The decade of the 1990s have seen a revolution in the treatment of phimosis.

Phimosis may be safely, effectively, and non-traumatically treated with topical steroid ointment with about 90 per cent success rate.^{1,2}

Those few cases that fail to respond to topical steroid ointment may be conservatively treated surgically with a simple, non-traumatic dorsal slit with transverse closure.^{3,4} Normal foreskin protective and sexual functions are preserved with this procedure. Circumcision is outmoded and contraindicated because of destruction of sexual function, trauma and high morbidity.

Practitioners today should be wary of performing a circumcision on a child. The circumcision of a child infringes that child's legal right to bodily integrity. The power of parents to consent to non-therapeutic destruction of their son's foreskin is being challenged by lawyers.⁵ A practitioner who carries out a neonatal circumcision today by parental request may be surprised to find him/herself a defendant in a suit brought by that patient when he reaches his age of majority.

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References

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In Response

I am grateful for the comments of the group 'Doctors opposing Circumcision' on my article relating to neglected areas of men's health. I was keen to mention this particular issue as there is a lot written on the subject of unnecessary circumcision and this confirms my own anecdotal experience as a GP. My observations have been that some practitioners refer to a surgeon too early. It may be that they do not have the experience or knowledge to explain to the child/patient and

their parent, usually a mother, that balanitis is a self-limiting condition and for many reasons circumcision is inappropriate. Yes, treatments such as steroid ointment should be considered, but most important is explanation. I concluded suggesting that guidelines should be made available for GPs and surgeons and in an ideal world, circumcision should be a very last resort and only performed where the person is able to give informed consent.

Dr Rodger Charlton