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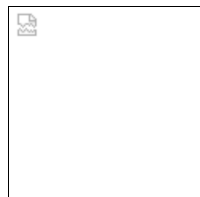
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HEALTH BEAT: PROCEDURE DEBATE

Circumcision circumspection Weigh the facts before making the call

By Judy Peres Tribune staff reporter Published January 9, 2007

To snip or not to snip? That is the question increasingly being asked of pediatricians.

Circumcision, a procedure once performed routinely on nearly all newborn baby boys in America, has become a matter of debate -- a choice new parents must make, rather than a given.

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"It's a pretty common question for both first-time and more experienced parents," said Dr. Poj Lysouvakon, co-director of the general-care nursery at the University of Chicago Hospitals. "Many have heard it's painful for babies, and some men who were circumcised as infants say they feel they were assaulted or violated.

"As a member of the American Academy of Pediatrics, which no longer recommends routine neonatal circumcision, I tell them it's a cultural issue and a personal decision."

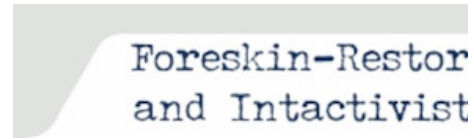
The established downsides of circumcision include pain, trauma and a risk of infection (as with any surgical procedure) and possibly reduced sensation, Lysouvakon said. On the benefit side, circumcision can prevent some urinary-tract infections in infancy; reduce the already-small risk of penile cancer later in life; and provide some protection against sexually transmitted diseases, including HIV, the virus that causes AIDS.

Circumcision, in which the foreskin of the penis is surgically removed, was introduced in the U.S. in the late 1800s as a remedy for masturbation. It became extremely common during the last century. But the of American babies being circumcised before leaving the hospital has gone from an estimated 85 percent in 1965 to 57 percent in 2004 (the last year for which data are available), according to the Centers for Disease Control and Prevention. In most other Western countries, circumcision is performed only for religious reasons.

Although most private insurers still cover the procedure, 16 states have stopped paying for elective circumcision under their Medicaid programs. They include California, Oregon, Washington, Arizona, Montana and Nevada. That could explain why far fewer newborn males are circumcised in the West than in other regions.

(A study published last year in the Journal of Urology also found significant ethnic and socioeconomic differences. Circumcision rates increase in direct proportion to income, and both whites and blacks are about four times more likely to be circumcised than Hispanics.)

Ethan, a Chicagoan who asked that his last name not be used, said he and his wife decided not to circumcise their two sons, now ages 5 and 1. "We didn't think it was a good idea to impose an operation on a baby that was not medically necessary," he said.



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Nevertheless, parents such as Ethan are still in the minority in this part of the country. According to the CDC, 80 percent of baby boys in the Midwest are circumcised before being discharged from the hospital, compared with 32 percent in the West.

Last month two studies from Africa were released showing that circumcision can halve the rate of men contracting HIV through heterosexual sex. Lysouvakon said the study might "lend more weight to the argument that infant males should be circumcised."

But opponents of circumcision, who have become increasingly vocal in recent years, point out that very few U.S. men are infected with HIV by female partners, and that practicing safe sex makes more sense than amputating a useful body part.

Advocates on either side of the circumcision divide disagree on how useful the foreskin is. "Intactivists" argue that half of the penis' sensual nerve endings are in the foreskin and that circumcised men (and perhaps their partners) have decreased sexual pleasure.

Although there is little solid evidence of that, there is a burgeoning group of circumcised men who feel they might be missing something. Ron Low is their savior.

Low, a 44-year-old Northbrook engineer, makes foreskin-restoration devices in his spare time. They are clones of an invention he used to "regrow" his own foreskin over a period of about three years. He says business is up at least 20 percent over a year earlier; in all, he has sold about 7,500 devices since 2003.

Low also is a U.S. distributor of a British import called SenSlip, a prosthetic foreskin that promises to provide pleasurable sensations and increase sensitivity over time. But he says his devices, the TLC Tugger (at \$50) and Your-Skin Restoration Cone (\$9), are better and cheaper.

"One SenSlip device [which costs at least \$12] lasts only a week or two, and then you have to replace it," Low said. "I'd rather promote something more permanent, which is growing new skin."

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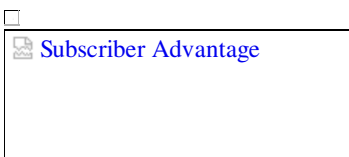
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