

## CIRCUMCISION

### Introduction

---

A circumcision may be performed for social and cultural reasons, or to treat phimosis (foreskin narrowing), which can be congenital or caused by chronic inflammatory skin conditions (balanitis xerotica obliterans BXO or lichen sclerosis). Phimosis can cause pain or skin tears during erections and infections due to trapped secretions and urine.

### What are the alternatives?

---

Frenuloplasty, Preputioplasty or Observation

### What does the procedure involve?

---

Under general anaesthetic, the tight ring and excess foreskin is removed. The foreskin of the penile shaft is then sutured close to the glans with 16 absorbable stitches. The stitches do not need to be removed as they dissolve in 2-4 weeks.

### What are the risks of surgery?

---

#### Common (>10%)

Reduced glans sensation and interrupted sleep due to nocturnal erections

#### Occasional (2-10%)

Bleeding

Infection

Irregular scar or wound dehiscence

#### Rare (2%)

Anaesthetic or cardiorespiratory problems requiring intensive care

### What should I do before surgery?

---

- Do not eat, drink, or chew gum for 6 hours before surgery
- If you are on blood thinning medication, discuss this with Dr Ooi

### What should I expect after surgery?

---

Please arrange for someone to pick you up and keep you company for 24 hours. Use simple pain killers as required and keep the sticky compressive dressing dry. After 2-3 days, remove the dressing by rolling or peeling it off the penis. Apply SOOV cream 6-8 hourly until the wound has healed. Avoid sexual intercourse and swimming for 4-6 weeks. Please contact Dr Ooi's rooms, the hospital, ward or nurse manager if you have any concerns, such as excessive pain, bleeding, wound issues, fever or feel unwell. General advice is also available on our website in the Procedures section.