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DEFENDING MALE GENITAL INTEGRITY

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CIRCUMCISION IN AMERICA 1997:

NO PAIN?

Pain Research Unethical

Canadian doctors influenced by drug company

Astra Pharmaceuticals recently paid researchers to test the safety and efficacy of its anesthetic cream (Emla) during newborn male circumcision. Physicians permitted a control group of infants to have their genitals cut without anesthesia. In the group receiving Emla, the study found that it reduced pain only 31% of the time and did not eliminate circumcision pain. Not surprisingly, the paid researchers concluded that the product should be used. Knowing that babies feel pain as acutely as adults, would this conclusion be acceptable if the patients were adult?

The research was reported in the April 24, 1997 New England Journal of Medicine by Dr. Gideon Koren and others at the Toronto Hospital for Sick Children. Koren and his team had earlier reported that the pain of infant circumcision had long lasting effects that become apparent in the form of higher pain responses among circumcised boys during vaccinations at 4 and 6 months.

An accompanying editorial by America's foremost circumcision advocate, Dr. Thomas E. Wiswell of Thomas Jefferson University, said the current way of doing the procedure "is still all too often barbaric." Regardless, Wiswell claimed that circumcision offers "clear health benefits." His position contradicts that of most major medical associations in Canada, Britain and Australia, as well as that of Edward O. Laumann whose recent study concluded that there are no medical gains from circumcision (see accompanying story). Even the present position of the American Academy of Pediatrics states that circumcision has only "potential" benefits and involves "inherent" disadvantages and risks. The following column by Deborah Pearce critiques this pain research. It was published in the May 2, 1997 Times Colonist (Victoria, BC).

Unethical Studies Hide Tissue Issue

Perhaps you noticed the headline in last Saturday's Times Colonist: "Infants feel pain as intensely as adults, circumcision study suggests." Doctors and other researchers at Toronto's Hospital for Sick Children and the Women's College Hospital took 68 baby boys, smeared an over-the-counter analgesic cream on the penises of 38 of them, but used an inert cream on the other 30. Then they amputated their foreskins the normal way: by strapping the baby down on a plastic board, and pinching, crushing, tearing, and slicing the delicate organ.

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NO GAIN.

Decreased Sensitivity, Increased Disease Risk

Surveys find no benefits and altered sexual function

Results from a survey of 545 circumcised men reveal that progressive sensitivity loss is a widespread complaint among such males, especially as they age. The recently updated report, *Awakenings: A Preliminary Poll of Circumcised Men*, first published in 1994 by the National Organization to Halt the Abuse and Routine Mutilation of Males (NOHARM), found that over 60% of respondents aged 30 to 49 reported loss of sensation in the glans (penile head) and 55% needed extraordinary stimulation to achieve orgasm. Over 10% of circumcised men aged 20-29 reported similar sensitivity loss and the need for gross stimulation techniques.

"The decrease in penile sensitivity caused by circumcision predisposes men to engage in behaviors offering more stimulation, such as masturbation and oral or anal sex," according to survey coordinator Tim Hammond. "Compromised sensitivity increases reliance on elaborate behaviors that can cause abrasion and bleeding, and reduces the likelihood of condom use, factors that increase one's risk for sexually transmitted diseases (STDs)." These findings agree with Edward O. Laumann's study, "Circumcision in the United States," published in the Journal of the American Medical Association (April 2), which found "circumcised men engage in a more elaborated set of sexual practices" and concluded "circumcision provides no discernible benefit and may in fact increase the likelihood of STD contraction."

"Amputating the foreskin externalizes the glans," Hammond explains, "leaving its moist mucosal surface unprotected and subject to drying out and keratinization (callusing), which leads to decreased sensitivity. This could explain why heterosexual men who are circumcised resort to behaviors offering more stimulation than vaginal intercourse." According to Hammond, "Circumcised respondents complained that, without the foreskin's gliding and lubricating qualities during intercourse, sufficient stimulation for orgasm could only be achieved by prolonged or exaggerated thrusting. This caused pain, abrasion and bleeding for both the male and his partner." Genital abrasion and bleeding during sex are recognized risk factors for contracting sexually transmitted diseases, including AIDS. Hammond says he is not surprised that, among developed Western nations, the U.S. has one of the highest newborn circumcision rates and one of the highest rates of STDs.

Supporting evidence that the foreskin may enhance sexual

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