

The Circumcision Decision- What does the “benefits outweigh the risks” really mean?**Andrew L Freedman, MD FAAP**

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Requesting a circumcision for your infant son remains a controversial decision and one which has engendered an increasingly animated public debate and strident advocacy. While for some it is a simple decision, others agonize trying to do the “right” thing. Pediatricians are often queried for their opinion and parents often resist answers that try to walk the line, spelling out pros and cons, instead they try to push their doctors to choose a side. Where should doctors go for advice; their own experience, a voluminous and conflicting scientific literature, vocal advocacy groups, or national guidelines.

As a service to its member pediatricians, the AAP has been publishing guidelines on infant male circumcision since 1971. These guidelines are periodically updated as new information becomes available and attempt to provide the most scientifically accurate assessment of the issues. The most recent guidelines were published in September 2012 (1,2) and its policy statement was widely disseminated in the medical community and widely reported in the lay press. However, how well was that policy really understood by the public or implemented by physicians?

The take home message of the report was widely reported as “the benefits of circumcision outweigh the risks.” Unfortunately that formulation was really all that was reported. But that was not the whole story. Unfortunately many took this as an endorsement that all boys should be circumcised. Because if the benefits outweighs the risk wouldn’t you want that for everyone?

To really understand this statement you have to understand the process that produced it. I had the honor of serving on that task force as the Urology representative over a period of several years. The task force starts without any preconceived notions or bias. We then identify the key areas that need extensive literature review, in particular areas that may have not been fully evaluated in prior reports as well as new areas of investigation. The literature is searched, reviewed, scored and synthesized. Individual chapters are written for the technical report and reviewed by all the members. From that a policy statement is constructed of the most salient findings.

So what does “benefits outweigh the risks” really mean? The full statement was that while we believed that the benefits of circumcision probably outweighed the risks, it was not by enough to recommend universal circumcision. However the benefit was sufficient that those who wanted a circumcision should be able to obtain it. This was in keeping with the previous statements that there was no “medical necessity” to circumcision. As I tell parents in my office all the time there are many things where the benefits outweigh the risks, being vegetarian, exercising regularly or simply double knotting your shoe

laces, but that does not mean we always choose to do that. But at the same time it is not trivial to state that those seeking a circumcision should be allowed to obtain one in an era where there are attempts to ban the procedure, there are barriers to access for many patients, and there are looming concerns about future workforce availability.

So why should we allow circumcision if it is not “necessary.” This speaks to the ethics behind circumcision. We believe the overriding ethical principle is “best interest of the child.” We recognize that circumcision has a role in people’s lives beyond the purely medical. Whether religious, cultural, family tradition, or aesthetics, we recognized that parents desire a circumcision for their child for a variety of non-health related reasons. And lastly we believe that in a multicultural society such as ours the best person to decide the best interest of the child in the non-health realms of their lives is a well-informed parent. For that reason, as long as the benefits outweigh the risks, we accepted that a parent can assess that this procedure is in the best interest of their child across all the dimensions of his life and obtain a safely performed circumcision. This ethical paradigm is not universally held. Our colleagues in Europe reject this and hold that the highest ethical standard is the right to bodily integrity. Based on that principle many are calling for abolishment of this procedure.

So in the end, the key is not that the benefits probably outweigh the risks. Nor is the key that there is only one right answer for everybody. There will never a clinical study that proves everyone or no one should have a circumcision. The best advice is to accurately inform parents of the risks and benefits, make them explore and articulate their reasons for desiring a circumcision, dispel any myths, and provide them the confidence to make a decision that they believe will be in the best interest of their particular child. Lastly, reassure them that whatever they choose there will be available the guidance and support to ensure the proper care to maintain a healthy penis.

Suggested reading

Task Force on Circumcision: Technical Report: Male circumcision. PEDIATRICS Volume 130, Number 3, September 2012

Task Force on Circumcision: Circumcision Policy Statement. PEDIATRICS Volume 130, Number 3, 585-586, September 2012