

Surgery for a circumcision in boys

Children's Hospital

Information for Patients, Parents & Carers

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What is a circumcision?

Male circumcision is the surgical removal of the foreskin. The foreskin is the roll of skin that covers the end of the penis.

When is a circumcision needed in boys?

A circumcision may be carried out for religious reasons or medical reasons but it is only carried out for medical reasons at the hospital.

The most common medical reason for needing a circumcision is a condition called balanitis xerotica obliterans (BXO). This affects the tip of the penis, causing the foreskin to become scarred. The tube which carries urine out of the body (urethra) may narrow making it more difficult for your child to pee (pass urine).

What does the surgery involve?

Circumcision is usually done as a day case operation under general anaesthesia. This means your child will be asleep during the operation.

During the operation, the foreskin is pulled forward and trimmed away. The skin edges are closed using dissolvable stitches. These will dissolve in time so will not need to be removed.

After surgery your child will need to have something to eat and drink, and pass urine before he can be discharged. This is so we can check there are no problems. We will also check that he is comfortable and able to move around the ward.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

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Is there a risk of any complications?

- **Wound infection** - can be treated with oral antibiotics and regular bathing. If the wound is infected it will become red and may discharge pus. Please seek advice from the hospital if unsure.
- **Bleeding from the wound** - minor bleeding will settle, however severe bleeding means you will need to come back into hospital. An operation may be needed.
- **Meatal stenosis** - the hole where urine comes out of becomes tight. This can easily be corrected but will need a further small operation.
- **Damage to the penis or urethra** - this is very rare but if it happens another operation may be needed.

Aftercare advice following discharge

After surgery, the advice below will help you care for your child at home:

- For babies/ toddlers it is better for them not to wear a nappy for as much of the day as possible; continue this for about 1 week.
- For older boys, no underwear and wearing loose fitting trousers, will be more comfortable for them e.g. tracksuit or pyjama trousers. Continue this until the pain is better and pain relief no longer needed.
- Local anaesthetic which is given in theatre will reduce pain for up to 8 hours. We advise that you give pain relief for the first 24 to 48 hours. On discharge we will discuss pain relief that can be given and what dose to give.
- Putting petroleum jelly (e.g. Vaseline) on the tip of the penis after your child has passed urine may help to ease pain, and stop clothes or a nappy from sticking to it.
- Some boys may have difficulty passing urine after this operation. If so, get them to have a bath in water which is not too hot, and encourage them to pee in the water.
- A warm bath 2 times a day can help your child feel more comfortable in the first few days after the operation.
- Bike riding and energetic play should be avoided for the first week. General play is fine if they feel able to.
- Encourage your child to drink plenty of fluids as this will make it easier for them to pass urine.
- You may see some stitches around the surgery site; these are dissolvable and can take a few weeks to dissolve, so will not need to be removed.

What to expect with the wound:

- It should heal by itself.
- It will have a certain amount of swelling for about 1 week.
- A small amount of oozing can be expected.
- It will look bright pink.

However, you should contact your GP or the ward for advice if the wound:

- starts to bleed.
- becomes red and more painful to touch.
- starts to discharge pus.

Contact details

Please contact Ward 10 on Tel: 0116 258 5362 if you need any advice or have any problems. You can also contact your GP for advice if needed.

If your child has no problems after surgery, they will not need to be seen again.

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