

Circumcision

SUNA Postoperative Care Task Force

Overview

Circumcision is the surgical removal of the foreskin (skin covering the end of the penis). It is a permanent procedure that cannot be reversed. This can be performed under a local block or under general anesthesia, and is an outpatient surgery.

Indications

Circumcision is offered to men for many reasons and can be a necessary part of care for men who have frequent urinary tract infections. Some reasons are:

- **Phimosis:** Tight foreskin that cannot be retracted to expose the head of the penis.
- **Paraphimosis:** Retracted foreskin that cannot be brought back to cover the head of the penis.
- **Balanitis:** Inflammation of the head of the penis.
- **Posthitis:** Inflammation of the foreskin.
- **Cosmetic or personal reasons.**
- **History of painful tearing of the penile skin when sexually active.**

What to Expect with Circumcision

Risks

Every surgery has some risk of infection, and infection is uncommon with this surgery. Any infection is treated on a case-by-case basis. You can expect bruising and swelling to the penis that will start 18 to 24 hours after the surgery, and gradually decrease over the following 1 to 2 weeks. Hematoma (collection of blood) at the suture line is possible but not common. Men may have increased sensitivity to the penis after the surgery. You may not find the initial appearance to your penis satisfactory due to swelling and bruising.

Expectations

Activity: No heavy lifting (anything over 10 pounds) for 2 weeks. You must avoid sexual intercourse and masturbation for 6 weeks. You should avoid high-impact activities, such as running, skiing, or boating, as well as activities that put direct pressure on the scrotum, such as riding a bicycle, motorcycle, ATV, or snowmobile, for 6 weeks.

Ice packs should be placed on and off the genitals for the first 24 hours. Fifteen minutes on and fifteen minutes off is the recommended schedule. Place a thin cloth or towel in between the skin and the ice pack. Do not place the ice pack directly on the skin.

Diet: You may return to your regular diet. You may have some mild nausea and possible vomiting for the first 6 to 8 hours after surgery. We recommend clear liquids and a light meal the first evening following surgery.

Wound care: Your dressing should be removed the day after the procedure. You will need to apply antibiotic ointment to the incision daily. In most cases, your incision will have absorbable sutures that will dissolve in the first 2 weeks. Expect some redness as the sutures dissolve.

Hygiene: You may shower after the dressing is removed. Avoid tub baths, hot tubs, and swimming for 6 weeks.

Complications/When to Call the Provider

- **Fever or chills (greater than 101 degrees F).** This may indicate an infection.
- **Your incision becomes red or swollen.**
- **Pain that is not controlled with medication.**
- **If you are unable to urinate.**
- **Large amounts of drainage from the incision site.**

**If you are unable to reach the office and are in need of immediate assistance, please proceed to the nearest Emergency Department.

Acknowledgment

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We hope you and all your family members may benefit from these handouts.

Resources

- Hohlfeld, A., Ebrahim, S., Shaik, M.Z., & Kredo, T. (2021). Circumcision devices versus standard surgical techniques in adolescent and adult male circumcisions. *Cochrane Database of Systematic Reviews*, 3, CD012250.
- Ravindraanandan, M., Fernando, H., & Aslam, S. (2019). Continuous suturing as a wound closure technique for circumcisions. *Journal of Clinical Urology*, 12(6), 470-473.
- Shabanzadeh, D.M., Clausen, S., Maigaard, K., & Fode, M. (2021). Male circumcision complications – A systematic review, meta-analysis and meta-regression. *Urology*, 152, 25-34.

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