

# ACORN

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## Editorial

Usually, an Aussie accent is a reliable indicator of the guy's status – almost certainly cut. But not for much longer. State by State, the public hospitals in Australia are closing their doors to any non-medical circumcision (see report page 12). Bizarrely, this Australian shut down coincides with the UN drive to promote mass male circumcision in Africa.

It is all reminiscent of the situation in the UK 60 years ago when, for reasons of economy, routine infant circumcision was discontinued. The doctors in Australia describe non-medical circumcision as 'cosmetic'. 'Prophylactic' is the more accurate descriptor – intervention now to prevent problems later. Many Australian men will suffer in the future as a result of today's decisions.

Of course, the doctors argue, the operation will still be available privately. But expense will immediately exclude a proportion of families; and, if UK experience is any guide, parents will soon be actively discouraged from seeking the operation, and be made to feel almost like child abusers. Fortunately, there are some robust defenders of circumcision in Australia, so perhaps common sense may yet prevail.

*Ivan Acorn*

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### A Matter of Technique

When the advantages of being intact are discussed, ease of masturbation is not necessarily high on the list. Yet the foreskin is the perfect masturbatory aid. Each foreskin is custom designed to fit the individual glans (although the design process sometimes goes astray). It takes little practice to learn how to draw the foreskin backwards and forwards, rubbing together the sensitive inner foreskin and the highly sensitive glans. The pre-cum fluid oozing from the Cowper's gland just inside the urethra is naturally spread by the back and forth action of the foreskin so that the glans and inner foreskin become fully lubricated. Then it is just a matter of adjusting the rate of movement so that sensation is prolonged until orgasm and ejaculation are desired, when the pressure and rate can be accelerated to bring about the desired end. How lucky, we might think, is the intact guy over his cut counterpart.

Indeed, in Victorian times, when masturbation came to be seen as intrinsically sinful and the cause of illnesses (such as mental and physical debility, heart disease, atrophy of the testes, dimness of vision, epilepsy, and insanity), excision of the prepuce was the first line of defence against the evil practice.

Circumcision was to be as complete as possible:

*"The glans gets tanned and loses most of its sensitivity through an early circumcision – and especially if the greatest possible amount of skin is removed – and great care should be taken to excise the delicate inner mucous membrane as totally as possible – thus we can get rid of the most sensitive and exquisite nerve endings. This reduces the penis' erotic sensitivity and arousal the most, and the removal of the freely moving skin deprives the boy of the ability to masturbate. It is also advisable to cut through the frenum, as this reduces the sensations of lust even further."*

However, as the vast majority of cut men will testify, circumcision is no bar to masturbation. It merely needs a different technique. But just how does the cut guy jerk off? Of course, the looser the cut, the more the guy can simulate the foreskin action by drawing the loose skin up over the glans. But, for the purposes of this article, let's consider the guy with the most radical cut – drum tight even when flaccid and frenulum completely eliminated.

Boys who are circumcised as babies have always had a foreskinless penis. When they find their cock and begin to explore, as young boys do at a very early age, they quickly learn the features of their (cut) penis which give them pleasant sensations and the ways in which they can increase and maximise their pleasure. For the guy cut post-puberty or in adulthood, he essentially has a new piece of equipment which he must get to know and learn how to operate. The immediate post circumcision period is an excellent time for this. Masturbation is forbidden for a short period and intercourse for a somewhat longer time. But this doesn't stop him getting acquainted with his new model, and gentle exploration is the first step towards a satisfactory masturbatory life post-circumcision.

The newly circumcised guy will have his glans permanently exposed for the first time. He will already be aware of how sensitive the glans is just by contact with dressings and underclothes. Touching and very light stroking will demonstrate just how much sensitivity there is in the glans. He needs to get to know each part of the acorn. As he moves gently from the tip of the glans down towards the ridge at the base of the head, he will find that the sensitivity increases and that stroking the sulcus, the groove between the head and the shaft, can be particularly rewarding. He can then move to the underside of the glans. He will soon find that the frenulum was not the source of stimulation as he perhaps thought before the op. The V-shaped groove where the frenulum once was is now exquisitely sensitive with an exposed sweet spot which many newly cut men rave about.

Then there is the inner foreskin. Those with a high cut will have been left with a good proportion of their inner mucosa. But even the lowest cut will have left a remnant of inner foreskin. Putting tension on the foreskin by pulling the shaft skin down towards the base of the penis can give a wonderful sensation. So, in the early stages (and as a variant later), newly circumcised boys can just use a very light touch and slide their fingers gently across the surface of their penis, stroking the head, the sulcus and the V-shaped groove, and tightening the skin of the shaft. For many guys, this is sufficient in itself to bring about a climax.

Once healing is complete, more robust techniques can be employed. Fisting is a popular option. In this the guy essentially uses his fist in the way that he previously used his foreskin. He holds the erect penis within a single fist and then moves the fist up and down so that the glans is being stimulated by the back and forth movement of the palm and fingers. The movement is the same as intercourse with the guy in passive mode whilst his partner thrusts the vagina or butt hole so that the penis goes deeply in and almost out again.

Another method is to use the palm of the hand to encase the glans whilst the fingers and thumb extend down the shaft to stimulate the inner foreskin and the sulcus. Pushing the fingers down the shaft then has the dual effect of putting tension on the mucosa and applying pressure to the glans by bringing the palm into contact with it. The fingers can move up and down the shaft alternatively increasing and decreasing tension. As an alternative to this method, the fingers can still be used to stimulate the shaft and inner mucosa, but the thumb rather than the palm is used to apply extra pressure to the glans.

However, the truth is that there are many different possible holds and each man will devise his own technique. And any method can be varied by using the left instead of right hand, or vice versa. But quite often, having found something which works, a guy will stick to that one technique for most of the time.

Then, of course, there is the question of lubrication (lube). For one reason or another – too much friction or too little skin – many guys prefer to use lube when they masturbate. Even some uncircumcised guys prefer the sensation of a lubricated hand sliding across their knob, particularly those whose foreskin is short and pulls back off the knob with an erection. Some guys always use lube, some never, and for some it is a matter of choice on the night (or whenever!) So

lube is not a requirement for circumcised guys to masturbate satisfactorily – it is an optional variation.

And which lube to use? Saliva is the most easily available, but soon dries out. Baby oil is wonderfully slippery, but for this reason tends to be soaked up by bedclothes etc – OK if you do your own laundry! Hand cream is a little more controllable whilst Vaseline is probably a little too thick to be the first choice of many. And however good it may feel at the time in the shower, soap or shampoo is not a good idea – the irritation afterwards may just not be worth it!

Probably best are the water based lubricants such as KY, Wet and ID Glide; or the silicone-based lubes which include Eros Glide and Liquid Silk. These are designed for the purpose and have the added advantage that, if masturbation is taking place as a precursor to safe sex with a partner, such lubes are not damaging to the condom.

So, once the lube is chosen, how is it used? Depending upon just how slippery it is, it can be poured into the palm of the hand or massaged onto the penis. The hand is used as a tube, sliding over the whole penis. This will mimic what it feels like to move the penis in and out of a woman's vagina in sexual intercourse. A much slower stroke than in dry masturbation is possible, with or without a foreskin – which also helps to make it feel like 'real' sex.

But this article is probably an example of teaching grandmothers to suck eggs. This is a topic on which every guy is an expert. So, for the next issue, I want lots of contributions from members. Let's hear about your favourite technique, your favourite lube – even your favourite fantasies – and for how many of you does that involve circumcision in some shape or form?! If everyone shares, who knows, we might all learn something new.

*Ivan Acorn*

## Further Observations On Sensitivity

**T**here **is** a reduction in sensitivity after the foreskin is removed. However, this has to be taken in context with many other factors such as overall 'feel' and appearance of the penis proudly displaying an enlarged glans with much reduced shaft mobility. Personally, I love the slightly bare feel of the glans in my pants especially if they are on the loose side and the penis can slide around in them.

I am one of a few men who can compare intercourse with a foreskin and without one. With a foreskin, my glans was hypersensitive and, as a lover, I was a dead loss. After a few strokes I would ejaculate and my girlfriend would be left high and dry with me instantly rehooding a glans so tingling with sensitivity that I didn't know what to do with it. Certainly unable to pay any attention to her.

Previous boyfriends had been circumcised and she had had good sexual relations with them and had always climaxed. She therefore knew the difference between the cut and the uncut cock and constantly brought up the subject of circumcision. Since I had always been very envious of my cut school friends, I decided that my foreskin would have to go, if only to have better sex. The loss of my foreskin was

the subject of an article in issue 5/2004, so I won't go into how that was achieved now. When I resumed sexual relations there was a slight reduction in sensitivity and I was able to last longer to the delight of my girlfriend who kept enthusing about its new look. From then on, from my late twenties, sex was a delight.

From my late sixties, however, sensitivity, and the ability to ejaculate during intercourse, has been more problematic. This I think has more to do with age than the fact that the glans is uncovered. Perhaps one of our uncut members in their seventies could comment on this. I do know from chance discussion with an uncut friend younger than me that his sex life is nil now, so I do think my problem is more (or completely) age related. Certainly I still get much pleasure from the fact that I am circumcised and, if I had the opportunity to regrow a foreskin, would reject it.

During my long sexually active life, I have never met any woman who either preferred the uncut cock or wasn't more than satisfied with my ability to satisfy her. In fact, due to considerations of cervical cancer and HIV etc, every woman I have known has been very pro-circumcision, and considered the cut cock much cleaner.

On pages 14 and 15 of issue 3/2007, Anthony – Devon, queries what a perfect circumcision looks like and comes up with a scar line close to the glans. This means the loss of all the sensitive inner skin which I feel is sad. The ideal in my view is to retain **all** the inner skin and to achieve as near invisible a scar as possible. This would ensure the retention of all possible sensitivity post-operatively. The circumcision to achieve this would initially involve severing the inner and outer skin at the top of the foreskin and then by cuff resection removing most of the outer shaft skin, joining the two layers at the base of the shaft near the hairline.

This reminds me of the pictures of D.B. – Notts (issue 3/2007) and his good sense in having a scar well down the shaft. I would particularly like to congratulate him on the way in which he cleaned up the ventral underside of his penis, so beautifully smooth now. His 'degree of disappointment' is, I suspect, as discussed above, age related.

One final consideration as to whether circumcision goes against nature. Many boys are born with short foreskins – or even without them – and naturally retract, leaving them dehooded by puberty.

*R.F.W. – Surrey*

## **My Dorsal Slit – And After**

**[In issue 5/2007, R.T. told how a medical examination had led to him being circumcised with a dorsal slit. Now he continues his story.]**

**A**t the time of my circumcision, my father was in the forces. It was therefore my mother's decision to have me circumcised by the dorsal slit method. Mother had found out about circumcision from my uncle, and it was he who took my dressings off after ten days. He also showed me how to move the foreskin so that

it was free of the glans. For urination, I just pulled the foreskin back over the shaft; if I didn't, I splashed all over the place. As I got older, the skin lengthened and hung underneath.

In 1974 I decided to have something done about my ugly penis. My wife encouraged me. It was the same then as now. I went to my doctor but he didn't seem interested in my quest. I was referred to the hospital but again no joy. I couldn't find anyone to re-circ me. After some months my wife came home from work with an address of someone who circumcised. A woman at work had given her the address. We rang this doctor and an appointment was made. It appeared he had been an army doctor. Being an army doctor, we thought he would be good. How wrong can you be.

We drove to this doctor's - I had an afternoon appointment. We were shown into a waiting room, and the doctor came in and introduced himself. He asked my wife if she was coming with me; she said "Yes". He took us through to the surgery. I was told to put this smock-like garment on and then to get on this couch. He opened the bottom half of the smock and examined my penis. He asked me when and how I was circumcised. When I told him, he said that a dorsal slit always had complications. He asked if I wanted doing properly and I said "Yes". The nurse brought a trolley over and the doctor injected my penis. I couldn't see what he was doing. After about 10-15 minutes, I couldn't feel anything. He was cutting my foreskin off with scissors and he seemed to take a long time doing me. I didn't feel anything. I was helped from the couch and re-dressed. He gave me some tablets for pain, and then we paid him and left after having a cup of tea. My wife said that she was sorry that I had had to be done but I replied that it was my choice.

When we got home I took a painkiller as it was beginning to hurt. I asked my wife whether he had taken it all off and she replied that he had, and more. She said that when he had cut my foreskin off, he had cut my frenulum out completely. She said that he had put in some stitches to stop the bleeding. He had also opened up my urethra. I asked how much and she said that I was cut underneath to my groove.

After the dressings were off I could see that I had been done by a 'butcher'. He had left some foreskin on but my urethra was open. The only thing that looked right was the frenulum cut. After some time I got used to it - it was much better than the dorsal slit in all ways.

The only thing now is that in time the skin has grown onto my glans; that is why I am looking for a good circumciser to give me a tight re-circ. I'm being cautious this time.

*R.T. - Spain*

## Happy And Proud To Be Cut

**[The following is an account of his circumcision from an internet contact of the Editor. The picture gallery overleaf shows the results of his operation.]**

I saw my first cut dick at the age of 6, and have been fascinated with the subject of circumcision ever since! I was so jealous of the guys with nice high and tight circumcisions, and I myself wanted to be circumcised so badly.

In my early twenties I went to see my GP about the possibility of getting circumcised, but he said he couldn't refer me to hospital because there was nothing wrong with my foreskin. So I left with nothing – which was a good thing actually because, as I later learned, the NHS circumcisions are usually very ugly because they are performed by urology students. At the age of 27, I finally realised that I couldn't be happy about my body unless I was circumcised. So, through the circlist website, I found a private clinic down South that performed circumcisions.

My dream eventually came true on Valentine's Day, 14th February 2005. The day of my circumcision – I will never forget it! It was like a second birthday for me, the day that I became a real man! That day I had to travel down south to a private clinic in Luton, near London. I was a bit nervous but feeling happy and looking forward to my circumcision! I knew that my doc was a very experienced circumciser who performs lots of circumcisions every day. He was very busy that day and I was one of the last patients to be seen.

Before me he circumcised a few babies, a couple of children and a couple of adults. Then it was my turn. The doctor asked to examine my penis. I have to add at this point that even though I always wanted my foreskin gone, it wasn't actually that bad looking. I suppose it was just a normal problem-free foreskin – it wasn't too narrow or too long – but I still wanted it gone! Anyway, the doc examined me, and at that point I told him that the style of my cut had to be high and tight. I stressed to him that I wanted it as tight as possible, and I even showed him a magazine picture of a guy with a very nice dick, and asked that the end result of my circumcision should look like this.

After that he took me to the operating room and asked me to strip from the waist down. I did that, and lay on the operating table. Doc and his male assistant were preparing my penis for the operation, covering it with a special anti-bacterial liquid and injecting my penis with anaesthetic. It was a bit uncomfortable. Then the assistant pulled my foreskin over the glans, he really stretched it, and at the same time the doctor crushed my foreskin with something that looked like a giant pair of scissors, and cut my foreskin off! I was so happy and relieved that this part was over, and I was finally circumcised!!! The anaesthetics were working so there was no pain. There was a little bit of blood as the doc was stitching the skin. Then he put a bandage on, leaving just my exposed dickhead to stick out of the bandage. The whole operation took 45 minutes to an hour.

I returned home the same day, and was back at work the following morning. There wasn't much pain, just a little discomfort, and obviously the dickhead was constantly rubbing against underwear which was a bit uncomfortable at first, and

took some time to get used to. In my case healing went quite slowly. Obviously my dick was all bruised and swollen, but I think I also developed an infection so I had to take a course of antibiotics.



I read before my circumcision that it took some guy only a couple of weeks to get back to normal after his cut; in my case it was more like a couple of months! Infection went away after the course of antibiotics, but swelling still stayed there for a number of weeks. I removed the stitches myself after two weeks so there was no need to go back to the clinic. I kept my cut bandaged for the first two or three weeks to keep the scars from rubbing against underwear, and I also had regular salty baths for my dick to promote healing.





I was able to have a wank carefully after a week, but it was about ten weeks before I could do all the sexual activities like before. I don't think it usually takes so long to recover after a circumcision. But although it did take me a while, all that wait was absolutely worth it! Once I was able to do all the sexual activities, I discovered that being circumcised is not only having the best looking penis that all the guys in the changing rooms are jealous of, but it's also having the best sex life!!!

For a couple of months before the circumcision I was trying to keep my foreskin permanently retracted, and going about my usual day with my glans exposed. It was a very unusual feeling, and even a bit uncomfortable because my exposed glans kept getting sore from permanent exposure, and I kept getting hard-ons. But, because of this practice, it wasn't a total shock for me to have my glans permanently exposed after the circumcision; but still it took another few months after the operation to get used to it completely. Now I'm used to it, and it feels so natural to me to have my permanently exposed dickhead rubbing against my underwear. It doesn't feel uncomfortable or sore anymore. In fact most of the time I don't even notice it, it's just right!

My doc has done a great job, and given me a very high and very tight cut with the frenulum completely gone! I am so happy that I had it done; now I feel like a real man with my glans proudly exposed at all times! My only regret is that I did not have it done much sooner. I can't believe that up until the age of 27 I had a foreskin covering my dickhead.

Before my circumcision I used to have a problem with premature ejaculation. My glans was too sensitive, and during penetrative sex I used to come too soon. Circumcision helped me to overcome this problem. My glans became slightly less sensitive due to permanent exposure, but I don't see it as a bad thing. For me it's been a great thing because now I don't have to worry about coming too soon. My sex life has improved 100 per cent because I can last for absolute ages now, and come when I choose to.

Talking about masturbation, I found that it got more pleasurable after I got circumcised, and my orgasms got more intense! I was cut high and tight Arab style, so a lot of inner skin was kept; maybe that's one of the reasons why the wanks are so good! I had to change my masturbation techniques slightly after the operation, I started to use lube because my cut was quite tight, even though I can do a dry wank because there is still a bit of skin movement. Now I concentrate on the scar around my penis during masturbation, and particularly the scar where the frenulum used to be. That's the most sensitive part of my penis, and touching and playing with that scar gives me unbelievable sensations!

It's been nearly three years since I got cut. I'm still as passionate as ever about the subject of circumcision. In the ideal world I would make it mandatory. That's one of the few things I like about America, even though in recent years circumcision rates have gone down, and it may be only a matter of time before uncuts outnumber cuts in the US. I hope that there will be a reverse process here in the UK, and more and more guys will be finding out about the benefits of circumcision, and getting cut! I'd very much like that!

As it is, I'm still loving my cut! After three years, the scar is fading, but there is still a lot of difference in colour, which I think will be always be there. Also my glans has started to flare out because it's been constantly exposed for nearly 3 years. I love the flared out look; now my dick looks like a real circumcised dick! I have had only positive comments from guys who have seen my cock in real life or in pictures. I am quite happy to show my circumcised cock in any situation, for example in changing rooms of my gym. I've been waiting and wishing to be cut for so long, and now I am so proud to be a circumcised man that I want the whole world to know my circumcision status. Since I got cut all I want to do is show it off! I haven't done a nude beach yet, but I'm hoping to do one this year, possibly in Spain.

I am glad to share my successful circumcision story, and to say how much happier I feel as a circumcised man, and I want to encourage other guys who are considering getting cut to go for it! It's such a great feeling to be circumcised. I'm so happy and so proud to be CUT!!!

## Tales Of Foreskin

[Taken from responses to a survey on [Fathermag.com](http://Fathermag.com)]

### Response 1

I was born in 1940. As a child growing up, I found out that my friends in the neighbourhood had different looking penises. They had a pink thing on the end of it. Also I found out my new baby brother was the same as them. I was worried that there was something wrong with my penis. I think I was about 4 when I was in the bath and my father had to go to the bathroom to pee. The toilet was in full view of the bath. He took out his penis and I saw that his was the same as mine. I also saw him move his extra skin down and it exposed the pink head. As time went by I found out that more boys had a penis like mine.

When I was a teenager at camp, the subject of circumcision came up. There were 30 kids in my cabin where we slept and someone suggested we all see how many of us were circumcised. It turned out that 17 were circumcised and 13 were not. I think that many boys in my age group born in the early 1940s were still left uncut.

Later in my life when I met the girl I was to marry, we didn't have sex until our honeymoon. I remember the erection I had that first time we had sex. The head on my cock was fully exposed. We both fell asleep after sex and we were naked. The next morning my wife woke up first and she thought that something had happened to my penis because the foreskin was pulled over the head and she didn't know anything about uncut cocks. When I told her about circumcision she was all right then. She had seen her brothers before and they were cut. She was glad mine wasn't cut and she liked playing with it. My wife and I had a great sex life with it being uncut. Also we had two sons and we left them uncut.

## **Response 2**

I was thirteen when I was able to pull back my foreskin all the way behind my glans. Prior to that I had a very tight and short foreskin, but had worked on it on my own for about a half year, occasionally with pain. I remember my glans being extremely sensitive at first, such as in the shower. By 16 I had widened my foreskin even further so that I was able to retract it comfortably and easily with a full erection. As my penis grew larger, my foreskin stayed the same length but widened further, covering only half of the glans. I enjoyed the sensation and decided to keep my foreskin completely retracted at all times, with a constantly bare glans. I've gone like this for 25 years now, and look circumcised even when flaccid as the foreskin stays behind the glans on its own and may even have become a little shorter. But then, I never had much foreskin in the first place, even before it became fully retractable.

I'm very comfortable, and my glans isn't overly sensitive at all as in the past due to daily rubbing against clothes. On the contrary, it's just right for me, and sex is wonderful as my glans stays bare during sex. Moreover, I can keep going longer before climaxing, making sex wonderful for my girl as well who is also pleased with the look and feel of my bare glans!

## **Response 3**

I am in my fifties and uncut. I was almost sixteen before I could completely retract my foreskin. I prefer to leave my glans covered as much as possible, and only retract the foreskin to rinse. My foreskin extends beyond my glans about a quarter to a half inch when my penis is soft. During erection, my foreskin still covers the glans completely, but I can retract it. It will not stay retracted, however, and rolls back over the glans about half way. I do not retract it for intercourse. During intercourse my foreskin has good movement, but never completely off the glans. The glans is at least partially covered at all times. My wife and I change positions a lot and we both have noticed that my glans stays mostly covered.

## **Response 4**

In our family, foreskin retraction happens quite early in life and I cannot remember when I could not. I do remember when my son's foreskin was first retracted. It was done by our GP and he screamed like hell. I remember mine being tighter than it is now but never problematical. It extends up to 2 cm beyond the glans depending upon temperature and tumescence. When erect, it usually does not completely retract though it has upon occasion. I have never found direct stimulation of the glans with anything dry pleasant. Manipulation of the foreskin over the glans is great and a bare glans in a vagina is super. On the other hand, after a shower I have on occasion forgotten to put the foreskin back over the glans and have got well into the day before I have realised that a slight discomfort is due to my bare glans rubbing on my clothing.

## **Response 5**

When flaccid, my foreskin covers my glans with about a quarter of an inch over. When erect about a quarter of the glans is exposed. I first retracted it

fully when I was eleven. It scared me silly! I didn't know the head existed. I was first given oral sex at 15. My head was so sensitive that it was unpleasant. It hurt! Nowadays (aged 40) it is less sensitive and oral sex is great.

Because I have always been curious about circumcision I have often gone days with my foreskin retracted. After day two the head gets much less sensitive. This feels OK, just different. When the head is less sensitive the rest of the penis seems to compensate. In other words, usually, when having intercourse, my head is so sensitive that I hardly notice the rest of my penis. After two or more days retracted, the head is so much less sensitive that I feel the whole shaft, not just the end. When I have exposed my glans for a few days and then have intercourse I find that I have to thrust harder to get enough stimulation to reach orgasm. This is OK if my partner wants 'rough' sex. If she wants slower, more gentle lovemaking, then it's better to have a more sensitive head.

Which is best? I don't know. I would love to be circumcised for a year, just to really find out.

### **Response 6**

One of my former boyfriends had a pretty long foreskin that overhung about half an inch when he was soft. When erect, the penis head was almost completely covered. Of course the skin could be retracted, but it kinda came back and covered the glans when released. When we had sex, one of us used to hold the foreskin back as we felt it was more agreeable for both of us when the foreskin was held back that way. There was more rubbing effect between the penile head and my vaginal walls.

My present boyfriend was circumcised at birth. The circumcision is pretty tight and when erect, there is no loose skin on the shaft. Sexwise, it's fantastic as I can really feel him inside me. I've also experienced other circumcised partners who were more loosely cut. During intercourse, there is no significant difference between a loosely circumcised man and an uncircumcised one.

## **Non-medical Circumcision Banned In Australian Public Hospitals**

In September, Victoria became the fourth Australian state to no longer provide circumcisions at public hospitals for non-medical reasons. Circumcisions will be performed only where doctors determine there is a need because of concerns over infections or disease. New South Wales, Western Australia and Tasmania had already implemented the change.

Victorian Health Minister Daniel Andrews said there was no medical evidence to support routine circumcision of newborn males. "In Australia and New Zealand, the circumcision rate has fallen considerably in recent years, and it is estimated that only 10 to 20 per cent of male infants are routinely circumcised," Mr Andrews said. "Both nationally and overseas, doctors agree there is no medical benefit to routine circumcision, and studies show the complication rate is around five per cent."

Mr Andrews said parents who wish to have their son circumcised for religious reasons could have the procedure done in private hospitals.

About 2,200 circumcisions were carried out in Victorian public hospitals in 2005-6, costing about \$2 million. Mr Andrews said that money could be used to fund more urgent elective surgery procedures. "It is important to ensure hospital services are prioritised towards treating patients who have a clinical need for surgery to improve their health," he said.

While recent studies of African countries suggested circumcision can reduce the rates of HIV, a report by the World Health Organisation concluded that in countries such as Australia, where HIV rates are low in the general population, limited benefit would result from routine circumcision, according to the Victorian government.

Victoria was followed in November by South Australia, one of the last states still offering 'cosmetic' circumcision. Health Minister John Hill stated: "The Health Department has a responsibility to ensure access to elective surgery is based on sound medical reasons. Cosmetic procedures such as liposuction, facelifts and male circumcision will only be provided if assessed and justified on true clinical grounds. This will improve the demand on beds, clinical resources and theatre time."

Australian Medical Association State President Peter Ford said circumcision was controversial and it was "not unreasonable" that other procedures take priority in a system under pressure. Patients already on the waiting list will still be able to have the surgery in the public system but anyone not allocated an appointment will not be eligible. Other procedures to be banned include breast enlargement or reduction, penile implant, hair transplant, facelift, gender re-assignment surgery and sterilisation reversal.

Queen Elizabeth Hospital surgery director Guy Maddern said it was 30 years or more since most purely cosmetic work had been performed in public hospitals. "It's making it clear that operations will not be offered for cosmetic reasons but only for medically indicated reasons," he said.

*Submitted by F.E. from Adelaide Now*

## **I'd Want To Forget About It Too**

**[from an internet blog: A Korean Life Teaching]**

**O**ne of my more annoying students has been getting on the nerves of all the teachers recently. He will do things just to piss us off over and over again.

When it came time to write homework on the board, the boy shouted he wouldn't be attending the academy next week. He was beaming with joy. I did what I always do when students tell me in advance that they would not be in class. I told everyone else we would have a huge party to celebrate their departure. I'm always very sarcastic about it.

I asked him why he wasn't going to be at school, and he said that he would be in the hospital. He had some kind of surgery scheduled. Of all the things he could have said, this had to be his reason. I had to give the boy credit. He was good at making his teachers feel sorry for him. I asked him if it was a serious surgery, what was wrong, if he was sick, and how long he would be gone.

He was completely oblivious to any of the details. He said he had forgotten what his parents had told him. He didn't know why he was going in, or what was wrong with him. The less he knew, the worse I felt. Why else would his parents keep details of a surgery from their children? It must have been some sort of serious surgery. He was still very happy about it all, and was looking forward to not coming to class. I wished him luck when he went home, then went into the head teachers' room to find out what was going on. If someone was going to miss class, the head teacher would know why.

"Do you know why that boy is going to miss next week's class? He said he had surgery and would be in the hospital. Why? What's wrong with him? Will he be okay?"

"Oh yeah," my head teacher responded, "he's getting circumcised."

Somehow, after his surgery, I think he'll be wishing he never missed school.

## Explaining

One of the toughest things to explain to my little nephew is why some people circumcise. I have to answer because he came back from school wanting to know why his friend did it. My nephew cannot accept religion as an excuse and he didn't get it anyway, so I told him it's easier if the boy is without the foreskin.

"Easier for what?"

"Easier to aim ..."

Of course we ended up arguing and laughing why the foreskin is the most useless piece of skin ever to develop in the history of the male anatomy. The eyelids are for protecting the eye and shutting off the lights at bed time, the lips are for kissing and wetting your stamps, but the foreskin ... doesn't serve any purpose, does it?

And where does the foreskin go after that? It's the same old question I ask about decaf coffee ... where does the caffeine go? "You know, in China, they'll eat anything" ... But quite unlikely, 'cos I still see those ex-Eunuchs' testicles hanging around the temples ... Or maybe it's re-cycled into some skincare or anti-aging products, like what they do with sheep's placenta.

For me, I don't really like the idea of trimming my little ... plus it feels like it has been shortened artificially. And with the underwear, I get double protection, but without the foreskin, it's back to one.

*From an Internet blog*

## Would You Consider Circumcision?

I never usually watch Seinfeld, but this episode is pretty interesting. In this episode Jerry and Elaine are the godparents of a newborn baby who is going to be circumcised. Now, I know that it is primarily a Jewish custom to perform circumcision, but would you consider it for yourself or your son? Just in case one does not understand what exactly happens at a circumcision, the foreskin of the penis is removed after the baby is 8 days old. This was done by Abraham in the Bible as a covenant with God. So, that is the background info.

Having that out there, would you do it? Before you say no, consider the following benefits for both males AND females:

1. Some older men develop cancer of the penis – about 1 in 1000 – fairly rare, but tragic if you or your son are in that small statistic. Infant circumcision gives almost 100% protection, and young adult circumcision also gives a large degree of protection.
2. Cancer of the cervix in women is due to HPV (the Human Papilloma Virus). It thrives under and on the foreskin from where it can be transmitted during intercourse. At least 20% of cancer of the cervix would be avoided if all men were circumcised.
3. Protection against HIV and AIDS. Circumcised men are 8 times less likely to contract the HIV virus. (The risk is still far too high and condoms and safe sex must still be used.) Two Ugandan tribes across the valley from one another were studied. One practised circumcision and had very little AIDS, whereas, it was common in the other tribe, who then also started circumcising. Infection thrived in the lining of the foreskin, making it much easier to pass on.

And if you care less about the ones before...

4. Lots of men, and their partners, prefer the appearance of their penis after circumcision. It is odour-free, it feels cleaner, and they enjoy better sex. Awareness of a good body image is a very important factor in building self confidence.

Think about it.

*Julia (Internet blog)*

## Battle To Save The Foreskin

When I walked down to the Capitol Building yesterday I was gobsmacked. The fact that there were a few protesters sitting out on the lawn with signs didn't surprise me. What better place to try and encourage a change in our laws. What surprised me was seeing signs encouraging an end to circumcision.

Now don't get me wrong, I'm far from being a prude. For example, when I lived in Oklahoma City, I once took part in a protest to try and keep an adult novelty store from being closed down by the religious right. I guess I just expected any protesters

in front of the Capitol Building to speak out for something more important. You know, like trying to put an end to the Iraq war.

What really got my attention was the sign that said “Circumcision is Torture.” Isn’t that a bit melodramatic? Maybe if I could remember being circumcised shortly after birth I would agree with that statement. A friend of mine decided to get circumcised as an adult, and after the local anaesthesia wore off he did complain about some pain, but not enough that I would consider what he did torture. He gladly did it for his girlfriend, and after things had healed he said he didn’t have any regrets.

I’m now looking forward to my next trip to DC just to see who is protesting.

*From an internet blog*

## Ode To My Husband’s Missing Foreskin

I never knew you. I wish I had.  
Someone said you were bad.  
Ripped you off before you were complete,  
Thought that bare glans looked so neat.

Now we deal with wet against dry  
and rely on KY.  
How much fun it would have been  
to slide you back and forth again.  
And see the pleasure in his eyes  
as his pressure starts to rise.

Circumcision robs more than one  
of the perfect design for fun.  
He doesn’t miss what he never had,  
so why does it make me so sad?

*Anonymous*

## Celebrity Status – Alistair Campbell

[by Jon Henley, the *Guardian*]

Although Ali Campbell’s official diaries have recently been published, there exists an earlier version. “She bit at pubic hairs as her warm mouth came to the end of its travels along my tumbling erection,” reads a typically acute insight from *Busking With Bagpipes*, one of three volumes in which, according to *TheFirstPost.com*, St Tony’s future spinmeister – then a kilted Cambridge undergrad – “shags his way from the icy wastes of Norway to the nudist beaches of the south of France”, playing the pipes and teaching English to pay his way. “Her shock at reaching the tip of my unclothed penis, and my delight as she peels back the foreskin,” reveals Ali in another perceptive analysis of Labour’s EU dilemma, “are preludes to Common Market copulation.” Heavens! If the dear boy showed such boundless talent at so tender an age, what dare we hope for from The Blair Years?



# ACORN

Issue  
Nº 2 2008  
Editor  
Ivan Acorn

## Editorial

To date, 85% of members have renewed for 2008 – a good tally, but I shall be pursuing the delinquents! Of those who have renewed, four fifths are circumcised and one fifth uncut, showing that the Society still has broad appeal. Interestingly, only one of the delinquents is uncut, so it cannot be a procirc bias in the newsletter which is responsible for their default.

Staying with statistics, I reprint on page 6 an article from *The Times* – rather more balanced than is usually the case. It also appeared on-line with the facility for readers to submit comments. Out of 33 comments posted, only six supported circumcision. Why is it that the anti-circumcision lobby is so much more vociferous and better organised? Is it that those who favour circumcision are usually circumcised themselves and comfortable with their status, whereas the antis have a cause about which they are more fanatical? The danger of course is that if circumcision is not better promoted, the anti voice will dominate; and then future generations will have no opportunity to enjoy the benefits of circumcision that their cut predecessors took for granted.

*Ivan Acorn*

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### Doctors and Circumcision

In the United Kingdom, the majority of baby boys retain their foreskins. Sixty years ago, the reverse was true. Then it was the norm, particularly in middle and upper class families, for the sons of the house to be circumcised – like their fathers.

The reasons for the change are well known. The newly created National Health Service was required to provide free health services to all. It could have been overwhelmed if this had included routine infant circumcision. Fortunately the *BMJ* article 'The fate of the foreskin' by Gairdner argued that foreskin adhesions naturally persisted until the age of five. Routine circumcision was therefore unjustified. Non-sequitur it may have been (in a previous Editor's Column I have described the article as intellectually shoddy) but it gave doctors a rationale for ceasing the operation. Today it is still the NHS position that routine infant circumcision has no medical basis. So parents seeking circumcision for their son will in all probability be shown the door unless they can point to an immediate medical problem that the operation will solve. Similarly, an adult male who decides that he wishes to be circumcised is more likely to be referred to a psychiatrist than a surgeon.

Parental preference has no status – the medical profession's fiat is absolute. But there are parents who are convinced that circumcision has prophylactic benefits; that the removal of the foreskin safeguards against future potential problems with phimosis and balanitis and confers protection against a number of sexually transmitted diseases, not least AIDS. There is evidence to support such claims and the parents' decision to seek circumcision can be judged entirely rational. But this holds no sway with the medical mafia.

Of course, some doctors are opposed to circumcision for ethical as well as medical reasons. The point is well made in an article by Mark Henderson in *The Times*: "I have an ethical objection to circumcising male babies. It strikes me as wrong to remove a perfectly healthy body part from infants who cannot possibly consent. There is no good evidence for medical benefit, and a small risk of complications. Most importantly, it cannot be undone. Were I a doctor, I would want no part in it."

A doctor who has such ethical misgivings can hardly be expected to wield the scalpel. But the situation is no different from that which pertains to abortion. There are many doctors and nurses who want no truck with that process. But they cannot just send the pregnant woman away empty handed. They must refer her on to a medical practitioner who does not have the same ethical objections. The same is not currently true with male circumcision. There is no requirement for a doctor to refer on to a practitioner more in sympathy with the procedure. But that could be about to change.

The General Medical Council has recently issued a document: *Personal beliefs and medical practice*. Whilst officially described as guidance, doctors are warned

that serious or persistent failure to follow it will put their registration at risk. The guidance concerns those situations where the doctor's beliefs are at variance with those of the patient. It gives specific examples of situations where this can occur, one of which is male circumcision. The relevant parts of the guidance are set out below.

The situation is clear. First, male circumcision for non-medical reasons is not proscribed by the GMC: "The GMC does not have a position on the issue." Second, if the doctor disagrees with male circumcision, he/she must tell the patient of their right to see another doctor: "If the patient cannot readily make their own arrangements to see another doctor you must ensure that arrangements are made, without delay, for another doctor to take over their care. You must not obstruct patients from accessing services or leave them with nowhere to turn." Thus in future, where parents seek circumcision for their young sons, they should not be turned away empty handed; they should be referred to a doctor more sympathetic to the procedure.

Doctors may argue that they do not know of doctors in favour of the operation. But this is where organisations such as *The Gilgal Society* come into play. Their excellent leaflets explain clearly the procedure of circumcision and its benefits. They also keep an up-to-date list of practitioners willing to perform the operation. A supply of such leaflets in every GP's practice could help doctors opposed to routine circumcision to satisfy the GMC requirements.

Over the past ten or fifteen years, the doctor – patient relationship has been gradually changing. The doctor can no longer pontificate from on high – the patient now has to be brought fully into the process and be part of the decision making. At the same time, doctors are encouraged to move away from just treating illness to promoting healthy life styles. Parents may well feel that circumcision has a part to play in ensuring the future health and well-being of their sons. If the GMC guidance is properly enforced, such parents should in future be helped in their quest to have the operation performed, rather than barriers being put in their way.

Perhaps when parents have a true choice, routine circumcision will once again come to be seen as a practical option for all babies. It may take time for the pendulum to swing back but, who knows, at some time in the future infant circumcision may even return to being the norm.

*Ivan Acorn*

### **Extracts from GMC guidance: Personal beliefs and medical practice**

#### **Circumcision of male children for religious or cultural reasons**

12. Many people within the Jewish and Islamic faiths consider male circumcision to be essential to the practice of their religion; they would regard any restriction or ban on male circumcision as an infringement of a fundamental human right. Others, including those who campaign against the practice of male circumcision, strongly believe that, because circumcision carries risks, it is wrong to perform the procedure on children who are not old enough to

give informed consent, unless it is undertaken to address a specific clinical condition.

13. The GMC does not have a position on this issue. We do not have general authority to determine public policy on issues that arise within medical practice – these are matters for society as a whole to determine, through the parliamentary process.
14. If you are asked to circumcise a male child, you must proceed on the basis of the child's best interests and with consent. An assessment of best interests will include the child and/or his parents' cultural, religious or other beliefs and values. You should get the child's consent if he is competent. If he is not, you should get consent from both parents if possible, but otherwise from at least one person with parental responsibility. If parents cannot agree and disputes cannot be resolved informally, you should seek legal advice about whether you should apply to the court.
15. If you are opposed to circumcision except where it is clinically indicated you must explain this to the child (if he can understand) and his parents and follow our advice on conscientious objection (paragraphs 21 – 25).

### **Doctors' personal beliefs**

21. Patients may ask you to perform, advise on, or refer them for a treatment or procedure which is not prohibited by law or statutory code of practice in the country where you work, but to which you have a conscientious objection. In such cases you must tell patients of their right to see another doctor with whom they can discuss their situation and ensure that they have sufficient information to exercise that right. In deciding whether the patient has sufficient information, you must explore with the patient what information they might already have, or need.
22. In the circumstances described in paragraph 21, if the patient cannot readily make their own arrangements to see another doctor you must ensure that arrangements are made, without delay, for another doctor to take over their care. You must not obstruct patients from accessing services or leave them with nowhere to turn. Whatever your personal beliefs may be about the procedure in question, you must be respectful of the patient's dignity and views.
23. You must be open with patients – both in person and in printed materials such as practice leaflets – about any treatments or procedures which you choose not to provide or arrange because of a conscientious objection, but which are not otherwise prohibited.

## **Circumcision Greatly Improves Sex**

**B**efore the age of 6 I had noticed that my father's penis was different from mine and I thought mine would be like his when I grew up, until my baby brother was circumcised. After that I hated my foreskin. My father had not been circumcised until just before he was married, so he wanted me to be cut as a baby, to save trouble in later life. My parents later told me that they had taken

me to the doctor to be circumcised but he, silly man, stretched my foreskin and convinced them that I didn't need to be cut.

There was nothing wrong with my foreskin. It wasn't too tight but I hated it even more when, at the age of 7 or 8, I discovered that my best friends had been circumcised and their penises looked and felt much nicer than mine. I remember playing with the penises of four friends, over 2 or 3 years, and was very envious of them as their penises felt so clean and soft and smooth. I actually sucked one. It was not until I was 10 that I got to know an uncircumcised friend well enough to see and touch his penis; I certainly was not tempted to suck it. He had a very long and fairly tight foreskin and his glans was red, slimy and cheesy, and that made me convinced that one day I would be circumcised. Also, about that time, my sister tactlessly mentioned that she preferred our brother's penis and wondered why mine wasn't neat like his. I think it was because I was envious of my brother that he and I were never close. This is a very good reason for RIC (routine infant circumcision) – I had four friends, two pairs of brothers, one in each pair was circumcised, and just like me and my brother, they never got on. I have a feeling that this is much more common than is realised, and I urge parents to insist that their sons are circumcised.

From the age of 11-12 until now I have discovered that all girls and women whom I have got to know well enough to ask about it have said that they prefer circumcised penises. Sadly I was not circumcised until after I was married and we discovered that it felt better for both of us when my wife held the foreskin back. Obviously that was not ideal, so I went to my doctor at last. He agreed to circumcise me free on the National Health Service but insisted that I would have to stay in overnight. I was embarrassed about what the nurses would say, so one lunch hour I popped out of the office to a Harley Street doctor who did the minor operation with less bother than a visit to the dentist. My wife couldn't wait to see the result when I got home that evening – obviously she could not see much that day because of the bandages but it healed quickly and very soon we were having greatly improved sex.

My second wife and all my lovers in between marriages have been glad that I was circumcised and several friends have been cut on my recommendation – one even said that his circumcision saved his marriage. Since my second wife left me, I have had one young Chinese lover who was thrilled with my penis as she had never seen a circumcised one before – she said it felt so much better for her than having a penis with a loose foreskin inside her, which was no better than with an old-fashioned washable condom, and she will insist that her future Chinese husband gets himself cut. Sadly she is back in China now.



Incidentally, I did not find it necessary to change my masturbation technique after circumcision, probably because I had always tried to hold the foreskin back. I do not like wet lubrication, but talcum powder is very good. Finally I stress that I have found the pleasure and sensations during sexual intercourse and masturbation far superior since I was circumcised. Personally I am glad that my frenum was not removed and I rather like to have it pinched and nibbled.

Well that is my story I hope you found it interesting. I'd be very interested to hear from anyone about circumcision either by letter or through email at RN-mail@tiscali.co.uk

*Rick*

## **Obituary – David Hunt**

**W**e were very sorry to learn of the death of David Hunt early in 2008.

David had been a loyal and active member from the very early days of Acorn. I believe that he was one of the people who responded to the instigating advert placed in Forum magazine by 'Tony Acorn'. The first meeting was at his house in Weston-super-Mare, where about ten like-minded men gathered to see what common ground they could find.

He went on to be the editor of the newsletter for many years, making sure that views were balanced and appropriate. I always felt that if there were too many articles in one direction then David would use a lot of licence to level things up.

He kept in touch with many people all over the world, which helped him to avoid becoming narrow minded or entrenched in his opinions. He travelled extensively and was very well liked.

During the time that David was chairman the group thrived and meetings were enjoyed by all. Whatever he set his mind to he did well and to the utmost of his ability.

*A.E. – Dorset*

## **Circumcision 'The Unkindest Cut Of All'**

**[an abridged version of an article by David Baker in *The Times*]**

**B**arbaric, mutilation, child abuse, freaks, nutters, obsessives. The language on both sides of the debate about infant male circumcision is not always temperate. Put together new-born boys, their penises, knives and two of the world's oldest religions and passions are likely to run high. While February saw the fifth International Day of Zero Tolerance to Female Genital Mutilation, marking a fairly united global campaign against the practice in females, the arguments about the removal of a male infant's foreskin seem mired in misinformation, accusations and despair.

What is clear is that there are very few medical indications nowadays for choosing circumcision over other procedures. Writing in the *BMJ (British Medical Journal)* last December, Padraig Malone and Henrik Steinbrecher, of Southampton University Hospital, found only two absolute indications for circumcision: a chronic skin condition called balanitis xerotica obliterans, which may have links with penile cancer, and some specific abnormalities and scarring on the foreskin. Beyond that, they say, problems such as phimosis, when the foreskin is too tight to be pulled back over the glans, and inflammation of the glans and foreskin caused by bacterial infections – both of which often see the surgeon reaching for their scalpel – can usually be treated non surgically.

Yet infant male circumcision continues on a wide scale. According to Malone and Steinbrecher, one male in six worldwide will be circumcised at some point in his life. In the UK, rates have dropped significantly since the 1930s and 1940s, when it was almost de rigueur for boys of a certain class to be circumcised. But today the NHS still performs about 10,000 circumcisions a year on boys aged up to 15. Add to that hard-to-count religious circumcisions carried out at home and, say campaigners against it, you end up with a lot of unnecessary trauma and risk.

However, circumcision does appear to offer some important health benefits, particularly with sexually transmitted infections. Research published last year from Kenya showed that circumcision had a significant protective effect against HIV infection – at least in countries where HIV is extensive and spread predominantly through heterosexual intercourse. Penile cancer also appears to be less common among circumcised men. And a 1999 review of past research, published in the *British Journal of Urology*, indicated that uncircumcised males were more prone to diseases such as syphilis and herpes simplex, which is enough to persuade some doctors that circumcision is the right course.

“When my boys were born,” says Dr Kirsten Patrick, a former hospital doctor and now an associate editor at the *BMJ*, “I did an enormous search of the literature and I thought [circumcision] was a good thing. It is much easier to do when they are small and less traumatic than waiting till later. I knew as a doctor that there was a way that they could go through this pain-free.” Patrick has no truck with circumcision away from the medical establishment. “Holding a baby down, with no anaesthetic, that’s dreadful,” she says. “There’s no way anyone should do that. But I am in favour of saying that there is benefit to circumcision and it should be regulated.”

One part of the country that is moving quickly in this direction is Walsall, where the local hospital now offers a weekend male-circumcision clinic. “We have a large Muslim community here,” says Dr Sam Ramaiah, director of public health for Walsall Primary Care Trust, “and we wanted to provide local children with a service that is safe and secure. The procedure takes place in hospital with local anaesthetic and is done by a trained surgeon. The advantage is that there is care available in case of complications and, if necessary, the child can stay in.”

Programmes such as this are unlikely to satisfy anti-circumcision campaigners – who say that the physical effects of circumcision on an infant are only part of the story. Norm-UK’s argument is that, for many men, circumcision reduces sexual

pleasure and that the trauma of childhood circumcision can last a lifetime. “The psychological side of this debate is not easy to pin down,” says Andrew Samuels, professor of analytical psychology at the University of Essex and a psychotherapist. “If it were possible to generalise accurately about the impact of infant circumcision you should be able to research it and find evidence of trauma in the circumcised population. But the research has not been done. So we are in a kind of not-knowing state.” But, he says, “it may well be a bigger act, more problematic, more potentially upsetting, not to circumcise in a culture that circumcises. I don’t think many Jews, for example, would deny the physical pain [of circumcision] but they might say that not to do it could lead to a psychologically distressing situation in which an uncircumcised boy might be denied a place in the group.”

Samuels, who is Jewish, feels it is time for a discussion within Judaism about how central circumcision is to Jewish identity. But he acknowledges that to get a frank discussion will need people to stick their necks out. “Things will change,” he says, “but over a fairly long time scale. In 25 years there may be plenty of uncircumcised Jews who will identify as Jews and be accepted as Jews and that won’t depend on their being circumcised or not.” Others are not so sure. Ritual circumcision stretches back before the origins of Judaism and Islam and is so entrenched in those religions that it will take a lot to shift it. “It can come as a surprise to many how custom and tradition are still powerful forces in liberal, secular societies,” says Justin Woodman, a lecturer in anthropology at Birkbeck College, University of London, who specialises in the anthropology of religion. “Circumcision is part of the politics of identity in a diverse and multicultural world. The act of cutting literally makes a line of division.”

## Exposing The Glans

I liked the Editor’s article in issue 1/2008 based on the internet contact. The guy had a particularly beautiful high and tight cut. Providing one is not into risky sex, the retention of the inner skin is ideal in my opinion, and I am only sad that I was not aware of this when I removed my own foreskin. Also, I think that total removal of the frenulum is essential to give tightness to the shaft skin. My recommendation is that a cuff resection circumcision should be done so that no inner skin is lost at all. (The guy in question has certainly lost a little from the tip.)

There was a programme on BBC3 recently about the penis. It ended with an exhibition of photographs of penises. I recorded it and examined the pictures in the exhibition very carefully. I was interested to see one or two nicely cut ones, and many with the skin fully or partly back; but of course the majority were pathetic uncut specimens. Near the end, we caught a bit of a discussion about wanking a cut cock so the subject of circumcision had obviously come up. The presenter had had a mould of his cock made showing a fully exposed well flared glans – obviously the result of a cut as a child. May I suggest that the *Acorn Society* contact the presenter to persuade him to make a programme discussing the merits and importance of circumcision. At worst he can only say no!

One final thing. I saw an article recently about a remote Indian tribe, the Zo’e, in the Brazilian rainforest. The members of the tribe were naked except that the



men had a strap around the penis shaft whose function seemed to be to hold back the foreskin. Even the young boys were wearing these and were sporting fully exposed glans. Has any member heard of this practice before or can they suggest any other purpose the strap might have?

*R.W. – Surrey*

## **Matt's Story**

I am 20 and from the UK. My penis is six inches when soft and nine inches when hard. It has always been big; my parents say it was huge even when I was a baby.

My Dad is Jewish (therefore cut at birth), my Mum isn't. They chose not to have me circumcised as a baby and let me choose for myself. I decided to get myself circumcised four years ago (when I was 16). I decided to have it done not for religious reasons (I've not been brought up Jewish myself) but for appearance and sexual reasons. My foreskin was long and wouldn't stay back even when I had an erection – it kept rolling forwards so I was really glad to get it removed. I had it done before I started having sex. By the time I was 16, I was ready to start and I thought asking a girl to have my foreskin inside her pussy or her mouth was too much to ask.

I'm bi-sexual. I have a regular girlfriend and we have sex several times a week. I have never had intercourse with another guy (and don't get turned on by this) but I have been wanked off by guys and I have wanked them off. I get turned on by guys' dicks, especially if they are like mine (big, thick and circumcised).

I think getting circumcised was a good decision to make and I would recommend it to anyone who is thinking of having it done. The glans is permanently exposed – it gets stimulated by rubbing against clothing all the while which feels great. I can often feel it being stimulated when I'm playing sport or running or even just walking up stairs. I love the feeling that I have no option of rolling skin over the end to protect it and cover it up – it's that exposed feeling I like. It doesn't bother me that being circumcised means I'm in a minority in the UK as most British guys never get their foreskin cut off – I guess only around 10% of guys are circumcised.

I don't have any frenulum left – it was completely removed when I was circumcised. For me the most sensitive part is the helmet (glans) – it is much more sensitive than the skin on my shaft. My glans hasn't lost any sensitivity in the 4 years since I was circumcised. It has maybe got a slightly thicker texture than before but it doesn't affect sensitivity during sex. When I masturbate, I can cum by just stroking the front of my glans.

I don't get why some circumcised men say it reduces the sensitivity. Being circumcised means the glans is permanently exposed and stimulated – increasing the sensitivity. My Dad was circumcised as a baby, and he says his glans is as sensitive now as when he was a kid. The only downside I guess is if you use your foreskin a lot to masturbate then obviously you're not going to feel that anymore

– as I'd wanked a lot before I was 16, it did take a few wanks to get used to the difference.

Of course it did take a couple of weeks to heal after having it done – not a lot of pain, just very sore – but it soon healed and now my penis looks as if it never even had a foreskin. My girlfriend says she much prefers the look of a circumcised penis – she has no objections to sucking it and playing with it and she says she can feel the rim of the glans stimulating her during sex. Also, as the shaft skin is now tight it increases the pressure and allows me to keep an erection longer.

When I had a foreskin I used to wash it once or twice every day. A few hours later it nearly always had gone sticky due to smegma. The smegma did indeed have a smell. I cannot speak for every man in the world who has a foreskin but having spoken to other lads about what it's like having a foreskin, they have told me that their glans also goes sticky and smelly due to smegma. Personally, I wasn't keen on the smell. Of course there may be other guys and girls out there who like the smell of smegma on a penis. Each to their own I guess. I certainly don't mean to offend anyone by using the word 'smell'. It is my personal opinion about how my penis used to be before I was circumcised.

I would certainly recommend circumcision. Whenever I have a son, I shall definitely have him circumcised. My brother is 15 and he now wants to be circumcised as well. To be honest it's probably better to have it done as a baby as it heals up quicker. But saying that, after the first couple of days of soreness it soon healed up – just couldn't wank for a couple of weeks. I've more than made up for it since though!!

Of course there are some cut guys who are really pissed off at not having had a choice (cut as babies). I respect their views but in reality I think they are obsessed with the idea of having a foreskin and believe that their sex life would be improved just having a little extra skin at the end of their dick. They get hung up on the thought that maybe the grass is greener for guys who have a foreskin. I can assure guys who were cut at birth that they are not missing out on anything by not having a foreskin. I have fantastic sex and powerful orgasms. Sure, you don't have the option of rolling skin backwards and forwards over your helmet, and my glans is dryer than before, but the feeling of having your helmet permanently exposed more than compensates. I don't get why some circumcised guys want to 'restore' their foreskin. The glans (helmet) is the most sensitive part – why would you want to cover it up?

*From posts at [www.lpsg.org](http://www.lpsg.org)*

## Nicole Richie Has Circumcised Rules

Nicole Richie will only date circumcised men. The *Simple Life* star insists it is very important to her that any potential boyfriend has undergone the private procedure – which involves the foreskin being surgically removed from the penis. She said: "The one thing I always look for in a guy is for them to be circumcised."

*From Times Square Gossip.com*

## Teaching Your Sons To Deal With A Fickle Foreskin

[By Dr. Kunio Kitamura, head of the Japan Family Planning Association]

Every second Saturday morning, a group of pre-school boys come into my clinic and, with their parents and brothers and sisters hanging around, the place becomes like a battle zone. They're there to attend a course called Bright Phimosis Treatment Without Surgery, and the place becomes like a virtual meeting place to discuss child raising. Phimosis is the condition where the foreskin can't be fully retracted over the head of the penis, and these little boys are seeking treatment for it without undertaking the common method in Japan of undergoing surgery.

Looking after the course is Dr. Shinya Iwamuro, a urologist who graduated from the same university I did (though a bit after me). Anybody who suddenly came into my waiting room would no doubt hear children's voices coming out of the consultation rooms. Sometimes, those voices might be cries, other times they may be screams at the doctor. For the visitor, they may wonder why. When the kids come out of the waiting room, they have looks of great satisfaction on their faces. "Hey, look at me, I peeled it off," is written on their faces as they look around the waiting room at their buddies. At the same time, the boy next in line to see the doctor is often nervous and can sometimes seem on the verge of breaking into tears. As the clinic is supposed to be for pre-school boys, anyone under 7 can go, and even though these kids are only young, their reactions show a glimpse of the competitive outside world that awaits them.

"What's important is keeping the penis clean. In the old days when everyone went to the public bath, neighbours used to teach kids how to peel back their foreskins, but children nowadays have had that opportunity taken away from them, so it's up to their parents to take the time to show their sons how to keep their penises clean. But so many fathers are caught up in the myths surrounding phimosis surgery they have no idea about what they should be doing to care for their own children's penises. Dr. Iwamuro is one of the rare physicians in Japan who has consistently argued that surgery is not necessary in dealing with phimosis. The message he has constantly preached to junior high and high school boys across the years is: "If the foreskin completely covers the head, it's phimosis, but if you can pull it back, you're OK. If you can pull it back, wash it, then put it back in again."

Most Japanese men still have a foreskin covering the head of their penis. It's not like there is an inordinately large number of Japanese with phimosis, but because circumcision is common soon after birth among followers of religions such as Christianity and Islam, men who've undergone this process appear to have avoided the problem of phimosis. So it's out of the question to consider phimosis to be a bad thing. And that has given the opportunity for loads of cosmetic surgeons to pop up in the media offering to perform surgery on boys to "cure phimosis and let you get back your chance at a bright and cheerful youth".

"With full body anaesthesia making surgery safer, there's a trend to push for phimosis surgery. But I have stubbornly insisted that surgery is unnecessary.

Finally, the number of doctors who think along the same lines as myself and disagree with phimosis surgery has increased to become a majority,” Dr. Iwamuro says.

So let’s hear Dr. Iwamuro’s advice on how little boys can learn how to retract their foreskins. There are three main points involved in pulling it back. They are:

SLOWLY peel back the foreskin, little by little as long as it doesn’t hurt and even if you touch the glans;

WHEN changing a young boy’s diapers, gently retract the foreskin and wash the penis head; and,

ENCOURAGE boys old enough to use the toilet by themselves that once they have pulled back their foreskin and had a pee, they should make sure after wiping that they put the head of their penis back in the position it was.

The reason why the foreskin can’t be retracted is because of such things as the gap at the end of the foreskin being too small (if you gradually force the glans forward, the foreskin opening will also widen) or the head of the penis is stuck to the foreskin. In the latter case in particular, it is necessary to have the foreskin surgically separated at a medical clinic. It’s not such a difficult procedure, involving only the separation of skin that’s stuck together. It’s a medical procedure the government recognizes. And, of course, the boy with the problem or his parents can always do it themselves.

In a large majority of phimosis cases, the solution can often be enough to have a father take the time to help his son. But if they are worried about pulling back their foreskins, they can always come to my clinic for a consultation. Of course, they will have to be a pre-schooler to be able to take part in the program.

## I Hate Being Circumcised

I’m 24 and I was circumcised in November 2007. I suffered with a tight foreskin for several years which was causing me pain during sex. The doctor recommended I have it removed. He told me I only needed the tip removing where it was tight.

On the day of my circumcision, I saw the surgeon beforehand and he told me it is usual to remove the entire foreskin not just the tip to reduce the chance of infection after the operation. So he removed all my foreskin. The big problem I’ve got now is that there is no sensitive skin left. The skin from my shaft was pulled right down and stitched just behind the head of my dick. From reading about circumcision styles I think this is called a low and tight cut. It is tight but I don’t think it’s too tight as it’s not painful when I get an erection.

My glans has lost feeling in it over the last few weeks. In the first couple of weeks after my circumcision it was very sensitive and I had no problems the first few times I had sex (I had to wait until it healed before having sex). It felt different than before but I enjoyed it and got off ok. A few weeks later and the texture of my glans toughened up. It’s now rough and leathery and isn’t giving me pleasure during sex. It’s as though it’s gone almost numb and has lost its sensitivity. My

doctor says it's normal for this to happen. I've tried using lube but it doesn't make any difference. I get an erection easily but it's as if I haven't got enough feeling to get off, either when I have sex or have a wank.

I constantly get the feeling my glans needs to be covered up but I have no skin left to roll down over it. It's constantly chafing in underwear. I usually wear boxers but after being circumcised I found my penis was moving around a lot and wondered if this was desensitising my glans. I've changed to wearing a jockstrap and although this stops my penis from moving, my glans is constantly touching the material and it's turned a sort of greyish colour as a result. Again my doctor says this is common.

For other guys who were circumcised as adults, have you also found a similar thing and what the hell can I do to get the feeling back in the head of my dick? I know some guys try foreskin restoration but this can take months or years and to be honest I don't think I've got enough skin left to try this. I'm perfectly happy with the way my dick looks. I've got a scar just behind the head of my dick but it is gradually fading and know it will fade more given time. It's the loss of feeling I cannot get used to. It's affecting me during sex in that I cannot get off. It's so frustrating. I have sex most days but I'm not getting a sexual release. I HATE being circumcised.

From [www.lpsg.org](http://www.lpsg.org)

## Call For More NHS Circumcisions To Cut HIV Rate

[By Emma Wilkinson from *Pulse*]

**M**en recently emigrated from countries with HIV epidemics, like sub-Saharan Africa, should be offered circumcision on the NHS, says a leading public health expert. He has also called for a UK trial to assess circumcision for HIV prevention in men who have sex with men.

Professor Harold Jaffe is head of the department of public health at the University of Oxford and was previously director of the US National Centre for HIV, STD, and TB Prevention. His warnings in *Sexually Transmitted Infections*, come after the World Health Organisation recommended scaling up access to male circumcision services in areas of the world with high prevalence, generalised heterosexual HIV epidemics. Three African trials have shown that circumcision halved the rate of HIV infection in heterosexual men.

Professor Jaffe said current UK practice was to discourage the procedure in adults but NHS bodies needed to re-examine their policies. He added that the yearly number of new UK HIV diagnoses had increased by 157% since 1997 and of the new diagnoses reported in 2006, 12% were in black African men and 36% were in men who have sex with men. 'New prevention strategies for these groups are urgently needed', he said. 'The UK has the opportunity to lead in revising its male circumcision guidelines in accordance with new African data and to develop data upon which to consider new circumcision strategies for men who have sex with men.'

Only 16% of UK men aged 16 to 44 have been circumcised. An estimated 30,000 circumcisions are carried out in England each year. A recent study of gay US men suggested more than half would be willing to be circumcised to reduce their risk of HIV infection

But Professor Jaffe's comments were dismissed by Dr Colm O'Mahony, past president of the British Association for Sexual Health and HIV and Consultant in Genito-Urological Medicine at the Countess of Chester Foundation Trust Hospital. He said: 'Anything that runs the risk of diluting the message that unprotected sex causes HIV infection is unhelpful to say the least. And data released last month suggests circumcision has no effect at all on male-to-female transmission.'

Dr Richard Ma, north London GP and member of the RCGP sex, drugs and HIV working party said: 'I don't think this will work in the UK. It's difficult to see how merely circumcising men who want to be circumcised is going to make any impact on HIV rates in this country – which are still relatively small.'

## Thoughts On Retraction From *Circlist*

**A**n Asian acquaintance told me that he retracted his foreskin just once – about age 12 – and that's where it stayed ever since. To him that's just the natural thing to do...

For all practical purposes it's just the same as a fairly loose circumcision. As for the age at which to do it – my friend did it as soon as he could retract his foreskin. The key thing is to do it before puberty, since then the penis will grow but the skin won't, so it will never cover the knob again.

*James*

**M**y brother, cousin and I, and others we have met or heard about later on, did the same thing. But some of us think it would be better to start earlier, just as soon as the foreskin is readily retractable.

Mothers, if for whatever reason you are going to delay or avoid circumcision for your son, consider this cost-less, painless and totally reversible alternative which provides all of the same benefits. Do him an important favor and help him get his foreskin pulled back off the penis head at the earliest possible age.

*Charles II*

**I** believe the key to a clean dick, in addition to general good personal hygiene, is not pissing through your hood. I recall retracting my foreskin to take a leak as a young pre-pubertal boy. I went through puberty around 11½ years old, and it was shortly after that I began peeling my skin back off the knob and LEAVING it back (so eventually it will stay back virtually all of the time), as I believe my dad did. I do remember him either telling me, or overhearing him say, that cut men got more sex or better sex than many uncut guys. I would believe that they DO get more head – after all, a woman (or man) going down on a guy can see what they're getting, and with fewer surprises, than with a lot of uncut dicks!

Allowing the foreskin to grow ALONG WITH the dick lets you use it for sex and for j/o, which I think is probably the ONLY advantage and benefit of being uncut. Also using it REGULARLY when you do start wearing it folded back behind the rim of the knob, as in jacking off several times a day (which I did in my adolescence), keeps the 'skin in shape, so there's enough there to be of benefit. The stretching of the foreskin over the expanded hard knob of an erection is one of the best sexual sensations a man can have, although I think cut guys develop their own set of erotic moves, so I don't think most of them suffer in any significant way the loss of their hoods. I also think uncovered (and/or circumcised) adolescent and adult dickheads get bigger and wider than dicks that are constantly hooded by a tight foreskin.

The more attention a male pays to his genitals, beginning at a young age, the better things will be. A boy doesn't need to be taught to j/o, but he should not be discouraged from enjoying it unless the venue is very inappropriate. This applies to both cavaliers and roundheads.

*Rip*

## Afghanistan

**[From AWAC – Afghanistan Without A Clue,  
a US airforce blog by Captain Doug Traversa]**

Hamid also wondered if I knew about the ceremony when a young man's (he points to his lap) is cut.

"Yes, that's circumcision," I said.

Hamid continued to make sure. "That is where some of his extra meat is cut off?"

I burst out laughing. "We wouldn't put it that way. The foreskin is cut off."

Yes, do you do this in America?"

Well, what do you know? There is actually something both countries do have in common. "Many boys are circumcised in America; however, it is becoming less popular recently, though I would say most boys do still get circumcised."

Why do they get circumcised?" he asked.

"Some for religious reasons, some for health reasons, and some just because they think it makes their boy look 'normal.' Why do you do it?"

"It is our religion."

"Yes, but what is the purpose, according to the Qu'ran?" I asked again.

"It is for cleanliness," Hamid replied.

"I think this is the first time we've found something so similar in both our cultures," I observed. "This is an historic occasion."

And as an additional bit of info, they circumcise up to age three. Ouch.

## The Knife Man

[Tales from the Emergency Department; in which a man who wallows in nostalgia, and secretly wishes he were a Victorian Knife Man rants about his work and what passes for a life.]

**M**y last patient was a painful one. He admirably demonstrated the ‘all mouth no trousers’ phenomenon, however. He was wheeled into the Department, covered in blood, laughing and shouting. Waving his blood stained hands about he was shouting, mostly at the female staff:

“Darlin’! Oi! Darlin’! Guess what I done! Go on! Guess!” \*\*Guffaw\*\*

“Nah, I ain’t tellin’ ya! You don’t even wanna know what I done, innit!”

What had he done? Torn his frenulum. This, for those not in the know, is the piece of skin on the underside of the glans penis, attaching it to the foreskin. It is essentially identical to the frenulum in the mouth attaching upper lip to gum. Sometime referred to as the ‘banjo string’.

I’ll leave it to your imagination how he said he did it. Tearing it is quite painful, and bleeds. A lot.. I should know.

His brash, loud exterior changed when I explained what we needed to do. The sentence contained the words ‘needle’, ‘injection’, ‘penis’ and ‘stitch’ in various order. Also ‘local anaesthetic’ and ‘sting quite a bit’. It wasn’t a warm, fuzzy sentence. No champagne and strawbobs here, either.

The repair was a breeze and, re-assured that he hadn’t left too much of his blood behind in his bedroom, we sent him packing. On a no-sex embargo. I half expect to see him back before the week is out...

*From the internet*

## My Freakish Willy Is A Nightmare

[by Joan Burnie, *Daily Record*, Scotland]

**Q.** I am circumcised. It was done when I was a baby so I was never asked whether I wanted it done. I don’t like it. I feel like a freak and I really don’t think people should be allowed to do this to their kids. My dad says it’s cleaner, but it’s ugly. I hide in the changing rooms after swimming because I know everyone will laugh if they see it. Can I get it put back to normal? I’m 13.

**A.** You haven’t said whether you were circumcised for health or possibly religious reasons. Either way, there is nothing freakish about it – not when there are millions of men around the globe who have had it done. I bet there are even a fair number in your school as well. Believe me, you won’t be the only one. However, when you are quite a bit older and have stopped growing, you do have the absolute right to find out whether it is possible to have the operation reversed.



# ACORN

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Ivan Acorn

## Editorial

Members may recall the news story early in June of detectives raiding three safe deposit centres in London and finding vast treasure stacked away, much of it the result of illegal activity. One of the premises involved was the Hampstead Safe Deposit Vaults, which houses the *Acorn* post box. For almost a week, our post box was inaccessible, guarded by armed police. Unfortunately, when I did at last regain access, no treasures had found their way to the *Acorn* address. But I am assured that normal service has now been resumed. So, some letters from members to celebrate the fact would be welcome.

One of the features in this issue is an extract from *Corsair* by Tim Severin. This is a fairly graphic fictional account of the circumcision of two converts to Islam. I think we all get a frisson when we suddenly find mentions of circumcision in our reading. So, when you do come across such incidents, please do let me know – either a reference to the book and page, or ideally a photocopy. Then we can all share the pleasure.

*Ivan Acorn*

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### Too little or too much?

Channel 4 has recently been broadcasting a series under the banner *Embarrassing illnesses*. Each programme focused on a different set of medical issues and patients, allegedly too shy to go to their own doctor, were nevertheless willing to bare all, often literally, before several million viewers. Unfortunately, I missed the last programme in the series which focused on men's problems. But the supporting website (<http://www.channel4embarrassingillnesses.com/video/consultations>) has a number of short 2 or 3 minute video clips that show patients undergoing diagnosis and treatment.

One such video that caught my eye was *Adult second circumcision*. I was intrigued. Second circumcisions tend to be a niche market for men who want to improve their penile aesthetics. I hardly expected the topic to appear in the medical mainstream. The patient was a rather jolly bearded gentleman in his late fifties or early sixties. He told the doctor that he had had a circumcision about ten years before to relieve a tight, painful foreskin. However, he was now suffering rashes and irritation on the glans. We were shown the offending organ and the skin of the glans did indeed look very red, scaly and sore. What we also saw was a substantial amount of foreskin – had this guy really been circumcised? The doctor diagnosed balanitis xerotica obliterans and, amazingly, a tight foreskin. Even after a circumcision, a phimotic foreskin remained which could not be fully retracted. Hence the inability of the patient to keep the area dry and clean and the resulting balanitis. The doctor recommended a second circumcision which the patient duly underwent. Three weeks later, the patient returned to the doctor for a check up. Both declared themselves well pleased with the result. Nevertheless, it was apparent that the guy was still not fully circumcised. There was still sufficient foreskin remaining to cover the lower third of the glans.

This raises the question – just how much foreskin should be removed during a circumcision? It is a subject on which the text books are surprisingly quiet. Surgical techniques are described but the degree to which the foreskin should be fully or only partially removed is rarely addressed. The circumcision chat lists discuss in painful detail the perceived advantages of high/low, tight/loose cuts. But this is a foreign language to most mainstream surgeons. Indeed, many patients referred for medical circumcision who attempt to discuss such matters with the surgeon are met with a blank wall of incomprehension. Even where the surgeon appears to listen, very often the patient wakes up to find that he has received the surgeon's standard cut and his wishes have been ignored.

Medical and religious circumcision are different. For Jews and Moslems, it is important that the male should bear a demonstrable sign of having undergone circumcision. It is necessary therefore for the glans to be fully exposed even when the penis is flaccid. The motivation for medical circumcision is different – there is a medical problem which has to be cured. Surgeons are by nature conservative. Because their trade is by nature invasive, they are trained to curb that invasiveness to the minimum required to solve the problem. The surgeon may well approach

circumcision with the intention of removing only the amount of foreskin required to relieve the condition. Unfortunately, this approach as far as circumcision is concerned may not be the best.

Medical circumcision is usually carried out to alleviate one of two conditions – phimosis or balanitis. Phimosis is the condition where the foreskin cannot be drawn back to uncover the glans completely. A variation is that the foreskin may be retractable when the penis is flaccid but not when erect. This condition is quite dangerous, since the foreskin may retract during erection but get caught behind the glans. It then forms a tight band in the sulcus and starts to strangulate the glans – a condition called paraphimosis. Phimosis is generally caused by the opening of the foreskin being too narrow. The surgeon may consider that if he removes the end of the foreskin, this will relieve the condition whilst still leaving the patient with sufficient foreskin to cover his glans – a partial circumcision. However, this approach fails to recognise that foreskins vary in shape. Some foreskins are short and loose, perhaps not even covering the glans. Some foreskins are long, extending well beyond the glans yet sufficiently loose to be fully retractable. The problematic foreskin is the one which tends to follow closely the contour of the glans. In such a situation, the phimosis extends the length of the foreskin. If the top half is removed, the bottom half is still too narrow to go over the crown of the glans; the phimosis persists.

Two other factors can come into play. First, any operation can cause residual scar tissue. Circumcision can cause a slight reduction of skin elasticity at the point of the scar. Such scarring can therefore exacerbate any residual phimosis. Second, if circumcision is carried out pre-puberty, the boy's penis will be thin and undeveloped. During puberty, the glans will grow and thicken. If a childhood circumcision has left sufficient foreskin to cover the glans, the glans may well outgrow the foreskin opening, thus causing a recurrence of the original phimosis. In cases of circumcision to cure phimosis, therefore, the surgeon is well advised to perform a complete circumcision by removing the whole foreskin so that the glans is permanently exposed.

Balanitis is an irritation and soreness of the foreskin and glans. The bacteria and thrush that cause this condition thrive in the damp conditions that exist under the foreskin. Usually, complete removal of the foreskin means that the whole area can be kept clean and dry, and a cure is almost certain. But a conservative cut that leaves sufficient foreskin to cover the glans, even if only partially, means that the potential for dampness and harbouring of bacteria remains. Again, the complete removal of the foreskin is the solution.

Is it possible to remove too much skin? Obviously, yes. If one takes the extreme where most of the shaft skin is excised, there will certainly be insufficient skin left to accommodate the penis. Erection will be difficult and painful, with skin being pulled up from the pubis and scrotum and with the danger of the skin tearing. But no surgeon will go to such extremes. In normal circumstances, there is sufficient elasticity in the skin to accommodate an erection, even if there is no apparent surplus skin when the penis is flaccid. In practice, a circumcision so tight as to cause problems is rare.

So how does the surgeon decide how much skin to excise? Many surgeons appear to work by eye. Such an approximate way of working means that a margin of error has to be built in so that a loose cut is almost certain to result. It is much better if the surgeon undertakes a simple measuring exercise and marks the places to cut accordingly. Suppose that a complete circumcision is required leaving one inch of inner foreskin. During the prep for the operation, the surgeon stretches the foreskin down the shaft of the penis, measures one inch down the shaft from the sulcus (the ridge under the rim of the glans) and marks the foreskin. He then stretches the foreskin up the shaft and marks the shaft skin at a point one inch down from the sulcus. This gives the two extremities for the operation and the surgeon removes the skin lying between the two marks. If a slightly tighter result is required, the surgeon can cut slightly outside the two marks thus removing slightly more skin than the original measure suggested and putting the remaining skin on a slight tension. If a slightly looser result is desired, the surgeon can cut slightly within the two marks.

No article about the circumcision operation is complete without mention of the frenulum. A short or tight frenulum (frenulum breve) can itself be a reason for circumcision although these days frenuloplasty without full circumcision seems to be more popular. The function of the frenulum is to replace the foreskin over the glans during detumescence. Once the foreskin is removed, the frenulum serves no useful purpose. There is the possibility that, if the frenulum is left, the removal of the foreskin and the consequent tightening of the shaft skin will put tension on the remaining frenulum, in effect causing frenulum breve. Leaving the frenulum can also cause skin bunching on the underside of the glans which can be aesthetically displeasing. It is probably best therefore if the frenulum is trimmed back or preferably excised completely during a circumcision.

So, to answer the question posed by the title. The removal of too little skin is a greater danger than the removal of too much. Anyone seeking circumcision for themselves or their sons should make their wishes explicit. It is little use using vocabulary such as high/low, loose/tight. Rather, ask for a complete circumcision that leaves the glans completely uncovered. Better still, find a surgeon who understands the purposes and aesthetics of circumcision. In that way a result both aesthetically pleasing and medically satisfactory is more likely to result.

*Ivan Acorn*

## A Matter Of Technique

When I was cut, very ably, by Dr Zarifa, he explained that sex would be just as good, but different. Being cut needs different techniques, but, in my opinion, is much better.

One pleasure in the weeks after I was cut was to feel my cock head drying out. I lost the oversensitivity I had had with my overlong and very loose foreskin. Now when I am limp I have no sensations, but when I am even slightly erect I have intense pleasure. This means that the lead up to any sort of sex is much more powerful than it was before. The whole of my glans is now more sensitive,

particularly where the frenulum was removed. In addition the edge of the head has flared a little and now gives great pleasure. As importantly, because I was cut high and tight, the shaft skin is also very sensitive when I am hard.

Before I was cut, I used to haul my foreskin back and work only on the head. Now I can stimulate my whole cock and the results are good. I can choose which bit of my cock to stimulate, and this changes not only from time to time, but also during each experience: one part will become over stimulated as another gains sensitivity. Penetrative sex is also more relaxing – condoms don't slip off any more!

To use lube or not to use lube? To use lube gives me much more immediate thrills, a dry hand gives gentler sensations. Both ways give intense orgasms which spread all down my lower body, where before it was a localised thrill round my cock.

*J.G. – Surrey*

## **A Family Tradition**

**A**s I was born in 1931 into a middle class family (my father was a solicitor), it is hardly surprising that I was circumcised as a baby. I have never had a problem with this – to me it seems a neat and hygienic solution. The majority of my contemporaries at Grammar School were also circumcised, as were my fellow officers when I had a short term commission during National Service.

So it was natural when my son James was born in 1959 that I asked the GP about circumcision. I was told that this was unnecessary and old-fashioned. The foreskin could be left to look after itself. I was disappointed but accepted the advice at face value. Not so my father. He was outraged by my doctor's attitude. His father had been circumcised, he was circumcised, I was circumcised, his grandson should also be circumcised. Even though I had sympathy with his point of view, I didn't see any way forward and, to end a heated discussion, I threw out the challenge: "OK, if it is so important, you find a doctor to do it."

I thought that this would be the last of the matter. But two weeks later my father telephoned to say that he had located a Jewish doctor in North West London who was experienced in circumcision and who was willing to treat Gentile babies. So a few days later, James was driven to the doctor's surgery and the deed was done. It really was a non-event. He whimpered a bit but soon settled down and within a few days he was healed. When his brother Stuart was born three years later, he made the same journey.

Fast forward thirty years and my first grandson, Sean, was born (to Stuart; James has given me two delightful granddaughters). I had the same conversation with Stuart as my father had had with me thirty years previously. But there was no moving Stuart. He saw no reason for circumcision and would not discuss the subject in any rational way. So Sean retained his foreskin.

It was ironic therefore that, when Sean was ten, that foreskin proved to be tight. Creams and stretching were tried but eventually the boy was referred for

circumcision. Resisting any temptation to say: "I told you so", I offered to arrange for the op to be done privately. I also suggested that the surgeon check out Sean's younger brother, Toby, now seven years old. Toby was found to have a marginally tight foreskin and in the end it was decided that they should both have the op together. It was done at the beginning of the Easter holidays which has led to a few family in-jokes every Easter about shelling Easter eggs.

I have since discussed their status with the boys and both declare themselves 'cool' with being circumcised. Their attitude was helped when a school friend of Sean's had to be circumcised at the age of sixteen, much to his acute embarrassment and his friends' ribald amusement. I think both Sean and Toby realised that they could have been in the same situation. Both have declared their intent, when they have sons, to have them circumcised as babies. I may not be around to see it, but I hope that they keep to their word. After all, with the last five generations of males all circumcised, it is now a family tradition.

*Anon*

## Experiences

I had an early obsession with circumcision. Indexes in medical books, in anthropology books, etc., were the first thing I looked at under the 'c'. If I had the money I usually bought the book whatever it was on. I learnt a lot about all sorts of things because I eventually read the whole book just because it had an entry on 'circumcision'.

Gyms, locker rooms, restrooms anywhere I could get a sighting I did; and I, from an early age, developed the precociousness to ask outright: "So, are you circumcised?" Some of my sister's boyfriends actually got offended by the question, but they soon learnt that if they weren't cut, there would not be second date with her. She wasn't obsessed, just not interested in a guy with a foreskin; eventually she had three daughters, so she wasn't able to pass on the family tradition.

I am RIC, and very happy with that. My glans is wider than the shaft and a traditional acorn shape. I know a couple of guys with severe phimosis (they're Irish and refuse even to discuss circumcision... sad) and their glans are tiny, stunted things trapped inside a tight foreskin. I am sure with a circumcision that would change, but who knows.

Also for me the aesthetic is the thing: a finely cut penis is a delight to behold (and hold). High and tight, low and loose and everything in between, just so long as the foreskin is gone. I didn't have the choice (parents are supposed to make good choices for their kids, and mine did in lots of other ways as well as circumcising me), but it seems to me that if a grown adult in full control of his faculties decides to have his foreskin removed just because he thinks it would look better then let him get it done.

*From Circlist*

## Picture Gallery



## Investigating The Difference

I became aware of circumcision at a young age, probably 4 or 5, from seeing my totally circumcised dad. He always went nude for a bit when getting ready for bed, so I had ample opportunity to observe it. Even at that age, I wished that my penis looked like his. He had a circumcision that left him no loose skin at all when soft. I suspect that he was circumcised as an adult and didn't like it. Thus my uncircumcised state.

Growing up, I not only knew which of my friends had been circ'ed and who hadn't, I knew exactly what type of circumcision they had. When I was 12 or so, I would ask my friends about being circ'ed and what it felt like to have their dick head out all the time. Most had no idea what I was talking about. I asked one friend this question and he didn't seem to have any interest or knowledge on the subject. Then one day we were urinating together and I pulled my skin back. Naturally we were checking out each other's cocks. His eyes about popped out of his head and he asked how I made my dick change like that. He had never known that guys with dicks like mine had a head like his hidden under loose skin. There we were, standing there holding our dicks, me with mine skinned back. I said: "Now our cocks look alike." Then I slid my foreskin up to touch the rim and ask him if he could do that. He was very tightly circumcised and was barely able to do it. Then, I let my foreskin roll over the rim just a bit and again asked if he could do that. At first he couldn't, then he wrapped his fist around the shaft so he could get a really firm grip on it and was able to roll a bit of skin over his corona. Then I pulled my ample skin over the glans and left it there. He pulled on his but to no avail. By then we were fully hard and he could no longer pull up enough to touch the rim, even when he wrapped his fist around it. The sight of a circumcised man trying to pull up some skin is still highly erotic for me.

After that we progressed to touching and checking out each other's equipment. I think he was as envious of my skin as I was of his ultra tight circumcision. I explained to him what circumcision was and he refused to believe that his parents would have that done to him. I replied that he must have a scar where they cut him. He admitted that he had noticed the brown ring and skin colour change on some guys. I even found a magnifying glass and examined his shaft, but he had no sign of a scar or skin colour change. I wanted him to ask his parents if he had been circumcised or not, but he wouldn't do it. To this day I wonder if he was circ'ed or was one of those rare guys born without a foreskin.

There was another kid I saw in the showers who didn't have a glans. His penis ended in a square blunt end with a round hole in the middle of it. The shaft skin just broke over the square edge of the blunt end of the shaft but didn't cover it. There was no doubt that he had somehow lost his glans. I finally got up nerve enough to ask him what had happened to the end of his dick. He told me that it had happened when he was circumcised as a baby. He had lost his glans and all of his inner skin but was still able to masturbate. The blunt end of his penis stump had become sensitive enough to allow him to orgasm when he rubbed it with a finger. I have never forgotten the sight of his truncated cock and have wondered how it worked for sex.

*From Circlist*

## Condoms Usage And Foreskin

Condoms are tricky enough to put on with most couples getting caught up in the 'which way does it unroll?' dilemma. Now, add the dilemma of foreskin for good measure and you may be in a whole new realm of frustration. Looking at some condom forums and reading what uncircumcised men are venting about



when it comes to slipping on condoms may make circumcised men count their blessings. The most common complaints seem to revolve around the condom 'bunching up' and/or slipping off. There was even a complaint about 'poking through' that I thought might need an entire essay to devote to.

Basic condom instructions for the uncircumcised man go something along the lines of this: pull back the foreskin, place the condom on the tip, pinch the very tip of the condom to squeeze out any excess air (and to leave a reservoir for the semen to accumulate) and unroll the condom until it reaches the base of the erect penis. Essentially, the only difference between a circumcised man and an uncircumcised man is the pulling back of the foreskin before unrolling the condom onto the penis. In theory, this is the way it should work, and maybe for most uncircumcised men it works just fine. However, if you are an uncircumcised man who is still having problems with condoms, read on for some helpful tips.

Once the condom is outside of the package and before you begin any rolling on, put a tiny drop of lubrication (always use water-based when using condoms) in the tip. This should work wonders when slipping the condom onto the shaft. This may also serve to make you more sensitive to the experience. As the condom instructions say, pull back the foreskin before slipping the condom on. Unroll the condom until it reaches the base of the shaft (do not forget to pinch the tip). Keeping the base steady, gently push on the foreskin until it is once again at the tip. This will allow the foreskin to have more 'breathing room' during sex. Putting a little water-based lubrication on the outside of the condom should also help with friction issues.

Some uncircumcised men who deal with the 'bunching up' of the condom swear by buying condoms that are a bit longer than actually needed. This allows some extra give on the condom so that the condom will be snug around the base and still have enough to work with to pull over the foreskin. Similarly, condoms with a large reservoir tip can also help. Test out different sizes and different types of condoms to find one which fits comfortably and suits both you and your partner.

Be patient. It may get frustrating if you are not wearing a condom that is comfortable. In the heat of the moment, you may be tempted to go ahead and have sex without a condom. After all, it's only once, right? Wrong. Condoms are still the number one line of defence against unwanted pregnancy and many sexually transmitted diseases. Recent studies have also indicated that uncircumcised men are twice as likely to get HIV from infected partners than their circumcised counterparts. As a rule, always practise safe sex.

*From the internet*

## **Intermarriage, Conversion And Circumcision**

**[by Rabbi Azriel Schreiber, [jewishanswers.org](http://jewishanswers.org)]**

**Q**uestion: My partner and I have been seeing each other for two and a half years now, and have recently been talking about marriage. I am Jewish (as are both of my parents), but he has no particular faith (although he says that he

understands and respects Judaism more than any other religion). I would like to marry him, but only in a synagogue. He is happy to convert to Judaism apart from one thing – he is 41 years old, and the prospect of a circumcision at his age is daunting to say the least. Is there anyway that he could convert and be married in a synagogue without first being circumcised? Please help, I want to bring my children up in a full Jewish household, but you love who you love...

**A**nswer: You are clearly an intelligent person, in love with a special person, and looking for a 'way out' to obvious difficulties. I think your last line is really the beginning. You wrote: "I want to bring my children up in a full Jewish household, but you love who you love..."

Experience, as well as the overwhelming evidence of studies, have shown that you are right – one needs a full Jewish home to keep families Jewish. It is also crucial to the long term closeness of the couple. Converts are full Jews, but they must be sincere converts. If you were out of the picture, would he still want to convert? That is a good indication of sincerity. Know that conversion is a serious thing.

Furthermore, it is crucial that your husband knows inside that he is a full Jew, and that your kids know their father is fully Jewish. Circumcision is central to Jewish law and to a male's Jewish identity. He'll never be part of the people without it. That being said, tens of thousands of adult men have gone through it. He should speak with other converts, as well as a mohel who performs adult circumcisions, to calm his fears.

## **A Tale From The Emergency Room**

**H**ere is yet another consequence of drinking to excess. One night stands can have many consequences that I guess don't seem like a big deal at the time – diseases, pregnancy, getting robbed, embarrassment, etc. One that many men might not think of is potentially serious but only applies to those men who are not circumcised. I am referring to the necessity of returning one's foreskin back in place after intercourse.

I had a young man come in one Sunday afternoon in severe pain. He did not tell the triage nurse the whole story since I am sure he was embarrassed. She thought he looked like he was having a kidney stone and sent him in. I asked what had happened and he told me his tale of woe. The night before in an intoxicated state of mind, he decided to hook up with someone he met at a bar. Their night was eventful for the fact that he hit a home run. Unfortunately, after his two minutes of bliss, he failed to return his foreskin back to its proper resting place. When he awoke in the morning he was in severe pain – I am sure made worse by the hangover. He said his penis was very swollen and he could not get the foreskin replaced (called a paraphimosis). When I looked, it was grim. I have seen these cases before but they are either in elderly demented nursing home patients where someone forgets to replace the foreskin after they put in a foley, or are in young men who come in within a few hours of the onset of the problem. He waited about 12+ hours. By now, it was so oedematous that every technique I tried failed. I packed the penis

in ice to reduce swelling, but even using both hands I still could not get the glans back inside. It looked terrible and was starting to get a bit cyanotic.

I called the urologist who also failed in doing it at the bedside. Meanwhile this guy was miserable – he got plenty of dilaudid but still looked like we were performing a civil war-style amputation on him! Anyway, eventually the urologist bit the bullet and performed a dorsal slit procedure. This required a particularly painful-appearing penile block for anaesthesia. I bet this guy was thinking as he left the dept, “I should never have had that 12<sup>th</sup> Corona!!!”

*From the internet*

## A Military Experience

A friend of mine has an uncle in an old people’s home near where I live. He usually goes to see his uncle every week but he was going abroad on business for a couple of weeks so I offered to visit instead. The uncle is crippled with arthritis but still has all his mental faculties. He was reminiscing about his time in Korea when he was doing National Service in the army. I asked whether it was true that the military required soldiers to be circumcised before they went overseas. This is what he told me.

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Lots of the soldiers I served with still had their skins so there was no compulsory circumcision. But I lost my skin when I joined up.

In those days, all boys had to do two years National Service in the forces unless they were medically unfit. A few months before you were 18, you had to go for an army medical. It was the usual thing – eyes, ears, chest and then you had to stand in front of the doc and pull your pants down whilst he felt your balls and examined your cock. He wrote something on my form and after I was dressed, a few of us were told to wait and see the doc. I thought perhaps I was going to be declared unfit and I started to worry I had some bad illness. But when I saw the doc, he said I had a tight foreskin and needed circumcising. He said it could be done before I joined up or could wait until I was in the army. He advised me to have it done before – I’d have more time to recover and my mates wouldn’t have the chance to mock me. So I said yes to having it done before.

I didn’t really know what the doc was talking about so when I got home, I went straight down the library and got out a medical book. When I realised what they were going to do to my cock, I wasn’t very happy, but there was nothing I could do about it.

I got a letter telling me to report to a military hospital a few weeks ahead and on the day I travelled there by train. I had to get there in the afternoon and the op would be the next day. There were nine of us in the ward, all there for the snip. The corporal nurse was a bit brutal, winding us up, telling us to have a good wank that night, because Major Pattern who would do the op wouldn’t leave us any spare skin to play with and he’d take our love string as well. We asked the nurse

whether he was circumcised himself and he said, no thanks, he was happy with his skin, thank you very much.

The next morning, a corporal nurse came round with shaving bowl and cut throat razor to shave our pubes and balls. It was a bit scary having cold steel so near the crown jewels – one slip and the marriage tackle would be gone. But he knew his job and we all soon looked just like plucked chickens down there. Then we put on gowns and were taken off to the theatre. It was done under a general so all I remember is a needle being stuck in my arm and then being woken up. Back in the ward, I wanted to check what had happened but my dick was covered in bandages. We stayed in hospital for four days altogether. On the third day, the dressings were replaced so I saw my new dick for the first time. It was horrible – bruised and swollen and bloody. I thought I'd been ruined for life.

After ten days, I had to go to the local hospital to have the stitches taken out. My dick still looked fairly awful and taking out the stitches was painful. And then I had to get used to my dick head being uncovered. I felt it every time I moved and it got so sore, I wished I had my skin back to cover it. But gradually it settled down, and my dick healed, so I could see what it was going to look like in future. The corporal was right. The major took all the spare skin and there was just a groove where my banjo string had been. But I soon found a new way to beat off and it was nicer because I could get at the dickhead. I've got a long dick with a large dickhead so losing my skin really makes my dickhead stand out. I used to get lots of admiring looks and there were no complaints about performance!

When we were in Korea, some of my mates had itchy skins and were very uncomfortable. At least I didn't have that trouble. If I hadn't been circumcised when I was, I would probably have needed it later, when I started having sex. So I wasn't very happy at the time, but later I was glad it was done when it was.

*Ivan Acorn*

## **Circumcision In Literature**

**[from *Corsair* by Tim Severin]**

**D**an and Hector have been seized by Barbary corsairs and sold into slavery in Algiers. To escape the horrors of the slave barracks, the two friends convert to Islam.

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“I hope that the abdal has a steady hand and a sharp razor,” said Dan on the morning that he and Hector were due to profess Islam. The two friends were at Turgut's mansion preparing for the ceremony the captain had called their sunnet. They had already paid a visit to one of Algiers's public bath houses and were putting on new white cotton gowns.

“Judging by the number of slaves from the bagnio who converted to Islam, the abdal must have plenty of practice in removing that piece of skin,” said Hector,

trying to sound more confident than he was feeling. "I'll be glad when it's over. It will put an end to all the jokes about being too sore to walk straight."

"...or make love again," added Dan.

"I wouldn't know," confessed Hector. "I've never been with a woman properly. Just had one or two encounters with village girls, but always brief and they never meant anything."

Together the two friends made their way to the mansion's central courtyard where a small group of the other servants were waiting for them. Spread on the ground was a large carpet, on which stood jugs of flavoured drinks and trays of food. Hector's tutor in calligraphy had already arrived and Hector caught a glimpse of the abdal, the specialist who would perform the circumcision, as he disappeared into a side room with his bag of surgical tools.

Moments later the captain himself appeared. He seated himself at one end of the carpet and invited his two colleagues to sit beside him with the abdal next to them. Dan and Hector were to be seated directly opposite. When his guests had eaten their fill and the trays had been cleared away, the captain beckoned Dan to come forward. He stepped into the centre of the carpet and stood facing his master. Turgut asked him formally, "Is it your wish to acknowledge the true faith?"

"It is, effendi."

"Then raise your finger and pronounce the shahadah loudly and clearly so that all may hear."

Obediently Dan did as he was told, and recited the words, "There is no god but God and Muhammad is the messenger of God." To murmurs of approval, the valet then escorted Dan away to the side room, even as the abdal quietly left his place and followed.

Next it was Hector's turn. Rising to his feet, he stepped into the centre of the carpet, and at the captain's prompting held up his finger and repeated the words of the shahadah, as Dan had done. Then to everyone's surprise, Turgut stepped forward and gave Hector a formal embrace. As he did so, he whispered in his ear, "Don't worry. It happens at once and is a wonderful thing as Allah has wished. Praise be to God." Then he stepped back, as his valet led away Hector for his circumcision.

To his alarm, Hector could not see Dan anywhere when he was ushered into the side room where the abdal stood waiting beside a low bed. The only other furniture in the room was a sturdy stool. "Do not be afraid," said the abdal. "Your friend is recovering next door, and will soon rejoin the celebrations. The pain is quickly over. You may lie on the bed or be seated on the stool, whichever you prefer. Osma, the valet here, will remain to bear witness."

"I prefer the stool," said Hector, his voice unsteady.

"As did your friend. Pull up your gown, and sit down then, with your legs spread apart."

Hector did as he was instructed and the abdal reached forward and took the young man's penis in one hand and gently teased forward the foreskin. Next, as Hector peered down anxiously, the abdal was holding in his free hand an instrument which Hector first thought was a set of dividers of the type he himself used when measuring distances across a map. But these dividers were made of wood, each limb flat-sided. Hector broke out in a cold sweat as he realised it was a clamp. Expertly the abdal closed the clamp upon the foreskin, nipping it tightly so that it could not retract. Hector shut his eyes and clenched his fists so that the nails dug deep into the palms of his hands. He sucked in air and held his breath, while hearing the soft murmur of a voice saying, "allahu akbarre". Then came an agonising spike of pain which made him gasp, and a shocking moment later the warm spurt of blood striking the inside of his thigh. Even as he quivered with the pain, he sensed the blessed pressure of some sort of poultice or bandage being pressed to his wounded manhood.

## A Question About Cleanliness

[from an Internet men's health forum]

**Q**uestion: When one has a lot of foreskin, and is trying to keep clean, what advice can you give? It is a real concern, and at 67, I have been working on a satisfactory approach to the cleaning for about fifty-five years. I have about eleven inches of skin covering about 5 inches of cock shaft. The first six can comfortably be retracted to behind the knob of the cock. In my particular instance, that is a point at which a little muscle circularly constricts enough so that I cannot pull the foreskin back to the base of my penis and pubes. When the cock is flaccid, usually, I can reach past the constriction and all the way back if I could reach, but not far enough to do the cleaning I would like to do. I tend to be allergic to some soaps and have gotten rashes, ouch. Also, it is a daily reach, Q-tips are useless, they are much too short. No finger can reach down far enough. What is a man to do? Other things are too abrasive. Help?

Answer 1: What I usually do is just retract the foreskin all the way down, until all the inner skin is exposed, and then wash. If soap gives you a rash, just use some lukewarm water. Have you tried a hypoallergenic soap? Don't know if this is of any help, but it works for me.

Answer 2: Wash regularly. Usually if I can, I tend to clean mine right after urination. I don't use soap much, just water. Piss can make it smell bad and start smegma build-up. When I say I clean mine after peeing, this is being referred to at home or in private bathroom. I do not mean cleaning your foreskin at a public restroom! hehehehe... which by the way is a great way to get laid if you stand there with your dick out at the sinks.

Answer 3: Uh, retract fully, wash clean. If you're not using a mild soap, a thorough wiping using warm water should do fine. If you're not able to retract at this age, there is a problem, and you need to get your penis checked out for possible phimosis.

## I Broke My Willy In Romp With The Missus

[An article by Ben Spencer in the *Scottish Daily Record*, 13 March 2007]

A red-faced husband had to have surgery after 'breaking' his manhood during sex. Robert McClenahan's pleasure turned to pain as he made love to his wife Emma. She said: "Basically, we were having sex and he missed and he broke his willy. We turned on the light and it was, well, bent."

With Robert, 38, writhing in agony, Emma, 32, rang the NHS Direct phoneline. She said: "They were all really giggling but said we should go straight to the accident and emergency department, which we did. A doctor said he should go home and put an ice pack on it."

The ice didn't help much, however, and Robert's pain got worse. Housewife Emma added: "The whole thing was really swelling more and more. It looked black. The skin was so tight, he couldn't retract it. Two days later, he had to go back in and they circumcised him."

Nursing assistant Robert has now recovered from the surgery. But he's still trying to live down the whole episode. Emma, of Colchester, Essex, said: "Everyone knows about it. He laughs about it now but he didn't at the time."

## My Fight Against The Slow And Painful Decline Of Circumcision

An interesting article from CNN about the decline of the circumcision rate in the US states: "According to a study by the National Health and Social Life Survey, the U.S. circumcision rate peaked at nearly 90 per cent in the early 1960s but began dropping in the '70s. By 2004, the most recent year for which government figures are available, about 57 per cent of all male newborns delivered in hospitals were circumcised. In some states, the rate is well below 50 per cent."

I mean, crap. Those who know me know that I am passionate about few things – creamed chipped beef, masturbating in front of a mirror, and, well, that's about it. Those and, of course, circumcision. I am about as pro-circumcision as they come. While the jury is still out about whether or not I can actually procreate a non-dragon child, if I do have a son, he will certainly be circumcised – even if I have to perform the operation myself or with the aide of a Franciscan monk and doctor named Michel. This is not because I believe in the health benefits of circumcision but for one simple reason: uncircumcised birds look totally fucking weird.

I, as you might have surmised, am circumcised. I am sure that when my parents made the decision to have me circumcised, it was based on a simple factor – that's just what you do. At the time of my birth in 1979, popularity of circumcision reached a record high in the United States at 85%. True, since 1979, new shit has come to light about circumcision, namely that all that stuff about it preventing penile cancer and facilitating genital hygiene may not be as true (or at least unassailable) as it was once thought. And as the CNN article implies, an increasing number of people view circumcision as unnecessary and potentially harmful.

I readily concede these points. But then there's this: uncircumcised birds look like aliens. Four of my buddies in college – out of a few dozen – were uncircumcised. They celebrated this and I admit, I was a little jealous of their exclusive little club and their weekly 'Guys With Covered Wagons' poker games. But still, being a member of an exclusive club – even one that played poker every Wednesday night and got those potato skins from Rogie's that were covered in sour cream – is not worth walking around with a penis that looks like a sausage.

Since I am circumcised, I intend for all of my male progeny to be circumcised as well, regardless of potential health benefit (although that'd certainly be a plus) or possible pain (don't be a pussy – I don't remember feeling a thing). The reason why I'd like my sons to be circumcised is that I don't feel that I could properly relate to them if we had different-looking birds.

I've seen my fair share of uncircumcised birds, both after Billy Joel concerts and in countless hours of pornography, and in short, they terrify me. Admittedly, my natural inclination is to fear and hate what I don't understand (dry ice, the Swedish language, love, etc), so when it comes to matters of the penis, a sensitive (get it?) topic to begin with, it should not come as a surprise that I have such a strong opinion in this matter. And I don't mean to overly come down on my uncut friends – if your parents were hippies or immigrants or poor or wanted women to recoil at the sight of your penis later in your life, that's fine, man. You know what I always say – when you're judgin', you're not lovin'. But I just don't see how there's any way, when the doctor asks my wife/girlfriend/driver whether or not we'd like our son to be circumcised, I'll say, "Fuck it – let him keep the alien bird. If he's anything like his old man, the women he'll be involved with won't be able to tell if it's a penis or a finger or a strong breeze anyway, so I might as well save the \$1200."

(I confess that I have thought about a scenario in which if I had two male children, one of them would be circumcised while the other would not. This would serve as a real-life science experiment to discover once and for all which is better: to be circumcised or to be uncircumcised. However, after spending a few weeks thinking about it, I came to the "duh" conclusion that both my theoretical male offspring would be so fucked up anyway (think: bat wings, fangs, etc) that they would not make for an ideal sample of the population and the experiment would be useless.)

Because I will surely have so little to bond over or talk about with my sons, at least I can ensure that our birds look the same. I can and I must. Statistics, CNN and the liberal media, and the influx of Asian and Latin American immigrants be damned - my sons are gonna get their birds chopped, just like their Pappy did. That, my friends, is an example of a true American standing up for what he believes in. God bless America, God bless me, and, most importantly, God bless my normal-looking bird.

(Well, it's kinda normal. It's just miniature, more like a toddler's than a grown man's. Which is really a matter we should tackle another day.)

*Jason Mulgrew, Internet blog*



# ACORN

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## Editorial

Many of you must have been wondering whether your copy of this issue had gone astray. My apologies for the long gap since issue 3. The main reason is that I have been extremely busy leading up to my recent retirement. Now that I am retired, I hope to be able to catch up a little with *Acorn Society* business and get two further issues to you before year end.

For anyone approaching retirement, the most frequent question is: "What are you going to do?" But the potential answer: "I hope to spend some time promoting the benefits of male circumcision" might raise some eyebrows. Yet it does disturb me that, in the United Kingdom, when Joe Public and his wife have a baby son, circumcision isn't even on the radar as an option. It would be good to change that perspective in some way. Watch this space!

Meanwhile, I still need more input from members. If any of you are interested in being interviewed for the magazine, in person, or by telephone, email or correspondence, please let me know. It is your newsletter, not mine.

*Ivan Acorn*

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## Correspondence

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### A Fateful Signifier

My recent reading has included *Arthur and George* by Julian Barnes. This is a fictionalised account of Sir Arthur Conan Doyle's involvement in the case of George Edalji who was wrongfully imprisoned for the mutilation of horses and other animals. The book contained a reference to another case of wrongful imprisonment – that of Adolph Beck.

In 1897, Beck was accused by a woman in the street of having swindled her of money and jewellery three weeks previously. The inspector assigned to the case learned that, in the past two years, twenty-two women had been defrauded by a grey-haired man who called himself 'Lord Wilton de Willoughby' and used basically the same modus operandi as Beck's accuser had described. These women were asked to view a line-up that included Beck, along with ten or fifteen men who had been selected randomly from the street. Because he was the only one with grey hair and moustache, he was quickly identified by the women as the man who had taken their clothes and jewellery.

Despite Beck's claims of innocence, he was charged with ten misdemeanours and four felonies. The felony charges were based on presumed prior convictions in 1877, when a man named John Smith had been sentenced to five years for swindling unattached women by using the name Lord Willoughby, writing worthless cheques, and taking their jewellery. He had disappeared after his release and it was assumed that Beck and Smith were one and the same.

Beck was found guilty and, despite maintaining his innocence throughout, was sentenced to seven years of penal servitude. In prison he was given John Smith's old prison number, D 523. England did not yet have a court of criminal appeal, but from 1896 to 1901 Beck's solicitor presented ten petitions for re-examination of his case. His requests to see the prison's description of John Smith were repeatedly denied. However, in May 1898 a member of the Home Office looked at the Smith file and saw that Smith was Jewish and thus had been circumcised, while Beck was not. This was the first piece of evidence that slowly swayed public opinion to the view that Beck's conviction was unjust. He was eventually paroled in July 1901 for good behaviour.

This case brought to mind a number of situations where the presence or absence of a foreskin has determined a person's fate. The film *Europa Europa* is based on the true life experience of Solomon Perel. The film starts with his Jewish Bris as an eight day old baby. But this is pre-war Russia, and his family is killed in a pogrom which he survives. Solly, a Jewish boy, becomes first a model Soviet student in Russia and then a member of the Hitler Youth, managing to pass himself off as a Nazi hero.

Solly's circumcised penis functions as the film's chief dramatic device. It is the one unalterable fact in his life. No matter how hard he tries to change his identity, his circumcision is the one vestige of Jewishness he can't deny. For example, a romance with a German girl, who wants to conceive a child for the Fuhrer,

proves depressing; he can't consummate the relationship because it would give him away. But he survives and at the end of the film, the real Solomon Perel is briefly seen living in Israel.

Solly was lucky. There must have been many Jews on mainland Europe who escaped the initial trawl but were eventually betrayed by and exterminated because of their lack of foreskin. It is perhaps interesting to speculate what might have happened had Hitler successfully invaded Great Britain. How long would it have taken the invaders to recognise that circumcision was not necessarily an indication of Jewishness, but rather a class identifier? Very few upper and middle class males sported foreskins in wartime Britain.

In 1947, as part of the move to independence, India and Pakistan were partitioned. The divide was largely along religious lines, but millions were caught the wrong side of the boundaries. Hindus decamped to India, Moslems to Pakistan. But there was also the equivalent of ethnic cleansing on both sides – with the foreskin, or the lack of it, often the signifier. During the worst days of the partition, Muslims would ambush trains and murder every uncircumcised male, because they knew these were Hindus. Hindus used the same method to identify Muslims for death.

Even today in parts of Africa, the possession or lack of a foreskin can be fatal in certain circumstances. In the violence that followed Kenya's disputed presidential election in December 2007, a notorious gang, the Mungiki, mutilated genitals in the name of circumcision. The attacks were touched off by opposition allegations that Kenya's president stole the election. Many of the mutilation victims belonged to the Luo tribe of opposition presidential candidate Raila Odinga. Traditionally, the Luo community does not practise circumcision, unlike most other Kenyan communities. The Mungiki draws mostly from President Mwai Kibaki's Kikuyu tribe for whom circumcision is a rite of passage. A gang member called forced 'circumcisions' simple revenge on Luos for attacks on Kikuyus since the election. A woman in Nairobi reported seeing five men harmed in this way, including at least two whose penises were cut off and thrown into a fire. A surgeon at Kenyatta National Hospital, the main government hospital in the capital, said he had operated on two men with injuries to their penises, at least one of whom was a Luo. 'There were cuts around the foreskin, probably an attempt at circumcision,' the doctor said. A mortuary assistant in Nairobi said out of 78 bodies brought to his facility since the fighting started, two adult males appeared to have been crudely circumcised before being hacked to death. John Holmes, the United Nations undersecretary-general for humanitarian affairs, said he also had received reports of genital mutilation.

Circumcision as a religious or tribal rite long predates circumcision for medical and health reasons. When conflict arises, it is not surprising that an easily identified signifier, like the presence or absence of a foreskin, should be used to identify 'the enemy'. There is much controversy in the West about whether circumcision is a useful prophylactic and whether it should be imposed on non-consenting babies. But at least all of us, whether cut or intact, can safely walk down the street without fear of attack because of our penile status.

Of course, were all males of the same status, then circumcision could no longer be a signifier. But the decision as to whether circumcision should be universal or whether all men should remain intact is likely to cause a war of its own!

*Ivan Acorn*

## Picture Gallery

In the last issue, there was discussion about the tightness of circumcision when the penis is erect. The following images show cuts where the skin is tight on the shaft and the frenulum removed, but little pulling on the ball sac or pubic skin – perfect cuts!



## Celebrity Circumcision

A couple of months ago I watched a very strange film by Peter Greenaway (is there any other kind?) called *The Tulse Luper Suitcases (The Moab Story)*. Greenaway is notorious for his liberal use of nudity, frequently male, in his films. This film was no exception and although I had difficulty making head or tail of it, I couldn't fail to notice Greenaway's attitude to the young male star, J.J. Feild. I've seen Feild recently in *Ruby In The Smoke* and *Northanger Abbey* on TV and I wonder how he feels about his early effort in this film. More than once, Feild's clothing comes off and the camera lingers, almost embarrassingly, on his cock which is well and truly circumcised.

A little research revealed that despite his very English voice he was born in Colorado which probably explains his circumcision. I don't know if one or both parents are American, but he can thank either of them for his status. I should also point out that other male characters in this odd film get their kit off, though as I've never heard of them it would be a bit pointless to say who they are and whether cut or not. The better-known actor Steven Mackintosh is also in the film and though I've read on one website that he is circumcised, strangely he's one of the few who keeps his clothes on. So sadly I can't confirm if the information is true.

*Peter – Manchester*

## A Ridge Too Far!

His mother's wish, it was supposed,  
He bore with pride the scar,  
The knob developed, well exposed  
Into a ridge too far!

His friends all rejoiced at the size,  
And nibbled it with care!  
The glans was huge, corona wise,  
With such a mighty flare!

"I've got a beauty," he confessed,  
"With it I am so pleased;  
Yes circumcision is the best,  
And not a whiff of cheese!"

"So thank you mother for that gift,  
That neat and dainty scar!  
With Dad and I, no body drift,  
We shared a ridge too far!"

*Anthony*

## Debating The Merits Of Circumcision

Some two years ago I reluctantly resigned from the *Acorn Society* due to my view that it should no longer sit on the fence but be positively promoting circumcision for males here in the UK where, sadly, these days there is generally an anti-circumcision policy and little support for the benefits of the procedure. Recently I was handed some back copies of *Acorn* by my good friend and current *Acorn* member R.W. – Surrey.

In one of those back numbers (Issue 1/2007, page 9) I was delighted to read no less than eight responses submitted after the editor kindly published my 'letter of resignation' in Issue 6/2006. I had, until now, naturally not seen these letters since I am no longer on the circulation list, but they make interesting reading. There seems to be a huge amount of support for my view that *Acorn* should be much more pro-circ – yes, even more than it has become under the current excellent editorship! This is also borne out by the results of the survey which appeared on page 3 of the same issue where the first 18 headings of preferred topics for the magazine were to do with circumcision and its techniques.

One or two wrote to say they thought that an active forum for debate should be maintained so that those who were uncircumcised could be allowed their say; otherwise there would be no debate at all. I believe these people to be incorrect. There is plenty to debate about our 'special' state of being circumcised, its various forms and procedures, good and bad experiences, etc. We who are cut have taken positive action to be circumcised (or in my case my parents thankfully did that for me), whereas the uncut man has done nothing to attain his status. It seems quite natural for all men who have had the operation to want to unite in belonging to a Society specially and solely for them ... as a keen rugby player you wouldn't want to join a club for golfers would you? Your balls would be the wrong shape and size anyway!!

It may be of interest to members of the *Acorn Society* to know that, as I mentioned I would, I did set up a Pro Circumcision Group. Pro-Circ members of the *Acorn Society* are encouraged to join this by going to our Internet site: [http://groups.yahoo.com/group/Pro\\_Circumcision\\_UK/](http://groups.yahoo.com/group/Pro_Circumcision_UK/) and applying to join by leaving a short message explaining your keenness on circumcision and membership of *Acorn*. The Group contains an active Message Board, interesting Polls, a Database of members who wish to get in touch with each other and of course an extensive Picture Gallery of cut cocks (plus some before-and-after shots).

At this time here in the UK we need all the support we can get in order to reverse the trend of the past few decades on this important matter. There are more than enough anti-circumcision and foreskin restoration pressure groups on the Internet, plus the medical profession and the Government combined with the NHS advocating non-circumcision policies as it is. We need to be proactive in promoting the many good medical and aesthetic reasons for male circumcision both for adults and neonatally (in my view quite the best time to be 'done'). Our

Pro-Circumcision UK Yahoo Group sets an example to others, which I hope the *Acorn Society* will also follow.

J.H. – Dorset  
(Past member of *The Acorn Society* for some 10 years)

## Don't Be Scared to Circumcise Your Baby Boy

By Bernadine Healy M.D.

I wouldn't discourage anyone from discussing and even questioning the merits of infant male circumcision. But it's a bit much to claim that the 2 million or more parents in the USA who have their infant sons circumcised each year – and the thousands of doctors and hospitals that enable the procedure – are guilty of child abuse and genital mutilation. Yet that's the heart of a debate in the 7<sup>th</sup> December [2007] issue of the *British Medical Journal*, in which head-to-head columns respond yea and nay to the somewhat pointed question: "Is infant male circumcision an abuse of the rights of the child?"

British National Health Service consultant Geoff Hinchley leads with a strong yes. He maintains that the procedure is male genital mutilation – akin to female genital mutilation and other kinds of infant abuse that are now illegal in countries like Britain and the United States. He asserts that the procedure damages young boys by decreasing penile sensitivity, something that has been disputed in recent medical reports, yet he ignores considerable medical evidence when he states outright that "the procedure will provide no medical benefit". He wants boys protected from the procedure and invokes the U.N. declaration on the rights of children, which directs governments to take legislative, administrative, social, and educational measures to protect children from all forms of violence, injury, or abuse. He's supportive of parents putting off the procedure until the child or young man can make the decision for himself.

There's no doubt that what emerged as a cultural and religious practice dating back thousands of years has been medicalised. Circumcisions have been routinely advised for decades based on the premise that they allowed for better hygiene and on evidence that cervical cancer was less common in women married to circumcised men. Since then medical studies have questioned some assertions in favour of circumcision, such as diminished risk of penile cancer. Other studies, however, have reinforced its considerable benefits, in particular a lower risk of harbouring and passing on sexually transmitted disease. Multiple clinical trials from Africa have shown that being circumcised cuts a man's risk of contracting HIV by well over 50 percent. Circumcision does not substitute for condoms, of course. But the findings are strong enough to put the Centers for Disease Control and Prevention and many public health mavens onto the circumcision bandwagon.

Before we overturn that cart, it might be better to focus on the question, "Does male circumcision bring enough medical benefit to justify risk?" Done properly, the medical and personal risks are minimal, if any. As I see it, the benefits are biologically plausible and are supported by the weight of current evidence. That

said, the known benefits are not strong enough to rise to the level of mandating the procedure as we do childhood vaccines. Thus, as it always has been, circumcision remains a parent's choice.

I encourage parents to review the existing information. If they decide they want to have their infant son circumcised, they should have it done by a professional who has experience in performing the procedure and in providing local anaesthesia so that the child experiences no discomfort. I caution parents, however, against delaying the decision until the child is old enough to decide for himself. Get real. Not many teenage boys would relish the discussion, let alone the act. Nor do I think they would have the perspective to weigh the medical pros and cons.

In a time when it is appropriate to question the use or overuse of certain medical procedures, however minor they might seem, having these discussions in medical journals and in public circles is healthy. What is not healthy in this free flow of ideas is to diminish the real abuse of female genital mutilation with a trumped-up portrayal of the 'abuse' that infant circumcision allegedly exacts on our helpless baby boys.

## **Don't Have A Fit When You See Your Boyfriend's Bits!**

**From an advice column in *Miami Hurricane***

**Q**uestion: I just started getting serious with this guy I've been seeing, and I really like him. I was a little surprised, however, when he took his pants off the first time we hooked up. His equipment is 'fully accessorized' and I'm not quite sure what to do with the extra parts. He doesn't seem to be at all ashamed or embarrassed, and although he's very hygienic, it still kind of freaks me out. Am I a horrible person for getting grossed out by this? Do I need to be doing anything different? This is new territory for me...

**A**nswer: There is absolutely nothing wrong with you for being caught off guard the first time you see an uncircumcised penis. It's perfectly understandable that you were startled when you realised your boy had a bun with his hot dog, but it's not really fair (and even a little shallow) to hold it against him and continue to be 'grossed out'. After all, the poor guy can't help it if his parents decided not to remove his foreskin when he was born. If you want to keep things up with this boy, you need to get over your aversion to uncircumcised men.

A good way to do this is to learn more about the practice of circumcision and its pervasiveness (or lack thereof) in our culture. Circumcision is most prevalent in the United States, South Korea, the Philippines, and the Jewish and Muslim faiths. A recent national survey found that 91% of men born in the 1970s and 83% of men born in the 1980s were circumcised. Compare that to the 11.7% of boys in their late teens and early twenties in the United Kingdom, and the near non-existence of the practice in South America. If you were a Scottish lass, you'd probably be grossed out if you saw a man that was circumcised.

One reason for the decline in circumcision in America is the vast growth in the Latin population. The practice of circumcision in Latin countries has, historically,



been much less common than here in the good ol' U.S. of A. Your guy's ethnic background or religion could be the reason for his extra bits and pieces.

Besides the traditional religious motivations, circumcision was once thought to be a preventative measure for certain penile problems (cancer, infection, etc), and promoted as good hygiene. Although the practice of circumcision is disputed, recent medical studies have found that circumcision may aid in decreasing the risk for some STDs, infections, and chronic conditions. Still, if an uncircumcised man takes care to keep himself clean, it shouldn't affect anything, in the bedroom or otherwise.

The more, uh, 'experience' you have with uncircumcised penises, the more familiar they will become. A little get-to-know-you time with your boy and his package is probably a good idea. And hey, it's not like I'm telling you to pull your teeth out – I should hope this is a pleasant experience.

Best of Luck!

## Cutting The Competition

*From The Economist*

Circumcision and other forms of male-genital mutilation are commonplace in many societies around the world. The origin of these practices, however, puzzles anthropologists and evolutionary biologists. They wonder what benefit they could bring, especially given the obvious risks of infection and reduced fertility.

Explanations have ranged from the pragmatic (a ritual that marks the beginning of adulthood and bonds men together) to the Freudian (having something to do with the pain of the separation from the mother). However Christopher Wilson, a neurobiologist at Cornell University, has a different idea. In a recent paper in *Evolution and Human Behavior* he suggests that male-genital mutilations are actually intended to prevent younger men from fathering children with older men's wives.

Dr Wilson takes his cue from sperm-competition theory, which suggests that males of promiscuous primate species have evolved features that maximise their own sperm's chances of fertilising an egg they might have to compete for. These features include large testicles which produce more sperm, and morphologically complex penises. Males of monogamous primate species, on the other hand, have smaller testicles and simpler penises. Human genitals are somewhere in between, perhaps reflecting the fact that people generally form pair bonds, but are susceptible to occasional bouts of promiscuity.

Some forms of genital mutilation have obvious effects on fertility. For instance, several African and Micronesian societies practise testicular ablation – the crushing or cutting off of one testicle. Some Australian aborigines engage in sub-incision, which exposes part of the urethra and thus causes sperm to leak out of the base of the penis. Circumcision does not have quite such clear-cut effects. But there are several ways it may affect fertility: most obviously, the lack of a foreskin could

make insertion, ejaculation or both take longer. Perhaps long enough that an illicit quickie will not always reach fruition.

Older men are in a position to form alliances with younger men – passing on knowledge, lending them political support and giving them access to weapons. By insisting that the young undergo genital mutilation of some form as a quid pro quo, an older married man can seek to ensure that even if he is cuckolded, he will still be the father of his wives' children. Of course, the older man has probably undergone genital mutilation too, and seen his own fertility reduced. But that, if anything, increases his incentive to make certain that the young bucks are similarly handicapped. And if all the older men in a society conclude this is a good thing, it will rapidly become a socially enforced norm.

To test this theory, Dr Wilson made several predictions. Among them, he suggested that mutilation is more likely to be practised in polygamous societies (since a man with several wives is more vulnerable to cuckoldry), and is especially likely in those polygamous societies where a man's co-wives live in separate households from their husband. It should also take place in a public ceremony watched by other men, to avoid cheating or free-riding. And there should be a strong stigma against men who refuse it.

To test his predictions, Dr Wilson looked at a database of 186 pre-industrial societies. Some 48% of the highly polygamous ones practised a form of male-genital mutilation, and the number rose to 63% when co-wives kept separate households. By contrast, only 14% of monogamous societies practised mutilation. Moreover, and also as predicted, the mutilations were almost always carried out in public, often as part of a coming-of-age ceremony at puberty, with strong stigma attached to uncut men.

Dr Wilson's paper does not definitely prove that sexual competition is at the root of male-genital mutilation. But it does provide a plausible explanation for a puzzling practice. It is not likely, however, to have much effect on attitudes toward circumcision. The men who enforce and undergo the rituals are no more aware of the underlying evolutionary motivations than of why their testicles are the size they are. Those who engage in the practice for religious reasons will surely continue to do so. Otherwise, most of the Western world has already largely abandoned routine neonatal circumcision, which is seen as an outdated and unfortunate medical fad. The exceptions are America, where more than half of newborn boys are still circumcised, and Africa, where circumcision helps to stop the transmission of HIV, the AIDS-causing virus. There, infection really is a far greater threat to the number of children a man might have than the loss of his foreskin.

## Why My Son Is Circumcised

I looked at a lot of information before deciding. The AMA report wasn't strong either way, just said there wasn't any reason to recommend it routinely. The Indian doctor said he'd done thousands, there was no real risk of anything serious happening, but you could tell he wasn't for it. Penn & Teller declared it "Bullshit!" But they seemed to be stretching the facts to justify a strong position.

My husband left the decision to me, although he leaned toward it for ‘cultural reasons’. As I’m used to American men born in the 60s and 70s, the natural way does look a bit off to me. Like Elaine said, “No ... personality.” But I also figured the absolute last thing that should matter about a man’s appearance there was how his mother feels about it.

My dad was against it. “Completely unnecessary”, he said. I asked about my brother. Well, that had been at my mom’s insistence. Back then, doctors said it was (eye roll) more hygienic. “But it’s not,” he said. “All you’ve got to do is wash. Your grandmother was a nurse. She raised 7 boys. None of them were.”

“Well, except for (eye roll) your Uncle Mike. But that didn’t happen until he was 14.”

Fourteen?

What happened was, he got an infection. So they removed it. But that doesn’t happen if you’re clean.

That settled it. I’m sure bad luck and/or genes played a role in my uncle’s unfortunate situation. And we plan to do our best to convince our son to be however clean one would have to be to prevent an infection of the foreskin. But, well ... the potential penalty seems to greatly outweigh the offence.

I did make myself watch. I figured I owed that to the little guy. He screamed pretty loud, but no louder than when he wakes up alone or gets bored.

*Posted by Spungen in an Internet blog*

## Adam’s Circumcision

**M**y grandson is now a man.

“Tell me Tok Mommy, will it be painful?” Adam, my eight-year-old grandson, asked me.

“Hmm, I don’t think so. You go ask Tok Abah,” I replied.

“Abang says it is not. But I don’t want to use a clamp. Abang says laser is better.”

That was a conversation between Adam and me. And the topic of discussion was circumcision – an important rite of passage marking a boy’s entrance into adulthood. You see, I don’t have a son and so I wouldn’t know the difference between using a clamp or a laser. I wonder if Adam himself knew the difference. I suppose he does after having talked about it with Nik Adam Haris, my sister Lalin’s eldest son. Twelve-year-old Haris, whom Adam refers to as Abang, was circumcised three years ago by the laser method.

I was told that the benefits of using a laser are: faster operation, limited or no bleeding, quicker healing, minimal post-op pain, pleasant experience and most aesthetically pleasing results.

“It is better because the wounds heal faster,” Lalin said.

Adam is the grandson whom I raised since he was a baby. My husband and I have been preparing him for this important journey in his life – that first step towards adulthood. We thought that the December school holidays would be a good time for Adam to be circumcised – there would be enough time for him to recuperate. Somehow we weren’t able to have it done during the first half of the holidays and had to settle for the second half. We chose Subang Jaya Medical Centre (SJMC) for Adam on the recommendation of our neighbours whose 12-year-old son had his done there recently. Secondly, it is near to our house. They also recommended to us the doctor who performed the surgery on Hisham.

So, last Friday we brought Adam to see Dr Zulkifli Laidin who assured us that it’d be okay for him to be circumcised this week because the wound would heal by the time school reopens. The day of the circumcision was fixed for the following Monday. The surgery was to be performed by Dr Zulkifli at SJMC, at 11.00am.

Adam was not to eat after 5.00am – five hours before the surgery. Why you might ask. After all it is a simple surgery. Not really...because his circumcision was to be done under general anaesthetic (G.A). We opted for G.A out of fear that he might get cold feet if the circumcision was done by conventional method. But of course the costs of having it done under G.A. is 10 times more than under local anaesthetic.

Adam was asleep by 10.00pm Sunday night after a dinner of Domino’s pizza. We wanted to make sure he had enough to eat. He was up by 7.30am the next morning, had his bath, dressed up and by 9.00am we were already on the 1<sup>st</sup> floor of SJMC’s North Tower, where the surgery would take place. I know Adam was quite nervous but he behaved very well. After the necessary registration and changing to hospital attire, he was wheeled into the operating theatre at 10.30am. And within 15 minutes the circumcision was complete. However, he was not out until an hour later when the anaesthetic wore off.

At about noon he was wheeled out of the day care surgery centre. There was my grandson, now a man! We had wanted him stay for the night at the hospital, but he was eager to come home. By 1.00pm we were already back.

*From the Internet*

## **A Mother’s Circumcision Regret**

I promised you something on circumcision. I’ve really been putting it off, because I wanted to create a post that was informative, factual, and covered all the bases. Unfortunately, I just don’t have the time. I will preface this by saying that I have not done a whole lot of research on circumcision. I’ve glossed over the information and retained the basic overview, but other than that, this post is completely anecdotal.

Son #1: I was 19 years old. This is not a very valid excuse, but it’s one that I use often for other issues as well. Take natural birth, for instance. I really had no idea that natural birth was something that a woman would actually choose to

do. I definitely was under the impression that natural birth was for someone who did not have access to pain medication. The same thing goes for circumcision. I had no idea that NOT circumcising your baby was an option you would choose unless you did not have the resources to do so. Many things you learn through life experience, and I didn't have much. I had never heard anyone talk about refusing circumcision. I had never known anyone who wasn't circumcised. I had never seen any literature on the subject. This was also nearly ten years ago, and the internet wasn't what it is today. We now have a wealth of information at our fingertips, and we are constantly bombarded with all sorts of new ideas.

Anyway. During my pregnancy I learned that DSHS (Medicaid) would not cover a circumcision. You would think this would have been my first clue that perhaps the procedure was not medically necessary. But no, I just relayed the information to my parents, who relayed the information to someone else and by the end of my pregnancy a wealthy older woman had gifted me the \$350 to pay for the procedure. The one smart thing I did was listen to my Dad, when he expressed an interest in having the baby circumcised according to Jewish tradition, on the 8<sup>th</sup> day of life. At that time, my Dad was the only real male in my life, and I figured "Hey, he has a penis, he probably knows what he's talking about more than I do". I later learned that Vitamin K levels spike on the 8<sup>th</sup> day of life, which aids in blood clotting. Wow those Jews are smart!

My obstetrician was appointed to do the circumcision in her clinic. She had explained that the baby would be given a topical numbing ointment to lessen the pain, and that the procedure would be quick. My father and I waited in the waiting room, admiring my sleeping babe in his infant carrier. My Dad read a book aloud to his first grandchild. The nurse came in to the room and took my son. I waited. And then I heard him screaming. It went on and on and I couldn't figure out why they weren't bringing him out to me. They said the procedure was quick. Why was he still crying? Had something gone wrong? I needed my baby NOW! I was panicked. They finally brought him out, wrapped in a blanket. His face was red and splotchy and he was furiously sucking on his hands. The nurse told me to nurse him for comfort. At that time, breastfeeding was not going well. I did the best I could, in a public waiting room, fumbling and nervous. I was given instructions and told to apply A&D ointment to a piece of gauze and apply it to his penis at each diaper change. The first time I peeked at his 'new' penis, I was shocked. He went into that clinic with a tiny, pointed penis. He came out of it with a short, fat, rounded thing. How did THAT happen? I shrugged it off.

Eighteen months later I gave birth to my second son. The same obstetrician, the same clinic. This time, I wasn't breastfeeding, and a bottle of formula was given after the procedure, which my newborn refused.

Luckily, we never had any problems with the circumcisions.

Six years later, I became pregnant with Rylan. I was totally armed with new information. I had chosen a homebirth, I was GOING to breastfeed, I had decided on cloth diapers, I was planning on co-sleeping, and I had purchased a sling. The only choice left to be made was circumcision. This time, I did something even stupider. And I have no excuse for it. I purposefully decided to be blissfully ignorant.

I knew where I could look for information and I ignored it. The Man wanted the baby circumcised and I figured "Hey, he's a man. It should be his decision". I did choose to tweak the system a little. I searched out a paediatrician who would inject local anaesthesia before performing the circumcision. The only thing that would hurt would be the quick jab of a needle. I also chose this certain paediatrician because he also used a plastibell, which would fall off when the penis was healed. No gauze, no ointment, no nothing. Lastly, this doctor preferred that the parents remain in the room during the procedure. I couldn't stand the idea of being there, but I insisted that The Man go. At least my baby would have someone familiar to comfort him. Once again, I sat out in the waiting room. I had nursed the baby in the car before we walked into the clinic. I figured he'd be set for awhile. My husband and my son left the waiting room to sit in an exam room for a long period of time, waiting for the doctor. By the time the doctor was available, my son was starving. My husband, wanting to be polite, did not call for me to nurse again. I waited and waited and waited. Finally, The Man appeared with our screaming baby. He was in a diaper, but nothing else, and my husband was clumsily trying to wrap him in a receiving blanket. He had been screaming so hard that The Man didn't even wait to dress him. I tried to nurse again, in another waiting room, with people gawking. I couldn't do it. We went to the car, we strapped the baby in, and he finally fell asleep, exhausted from the experience.

Again, the circumcision healed well. But after three experiences, all the same, I promised myself...never again.

This issue has come up for me a lot lately, since RyRy's four month long rash completely took over his genitalia. I wonder if it would have been this bad if there was foreskin to protect him. Foreskin serves a purpose! For an infant, it is there to protect them from urine and faeces and infection. It's not some random piece of skin. We are not imperfectly designed. Every last bit of us has been carefully crafted, with painstaking details. There is no reason for us to be doing this to our children. And furthermore, we have no right. At one point I had thought that if I should have a daughter, I would get her ears pierced as an infant. It looks so darling and I can imagine matching earrings to her outfits. Nowadays, I feel the same way about ear piercing as I do about circumcision. It isn't my body and it isn't my choice. Unless it is medically necessary, I have no right making those sorts of decisions for my child. I don't OWN them, after all. You wouldn't give your child a tattoo. You wouldn't give them a nose job if they were perfectly normal to begin with. Why are we permanently altering our little boys before they are able to make the decisions themselves?

Even if you are adamant about getting your son circumcised, make sure that you educate yourself on both sides of the issue. Learn from my mistakes. Don't be ignorant. Choose to be informed. For your sake and the sake of your children.

*From an Internet blog*

## Circumcised – Or Not?

One time many years ago when Nadler was a Rabbi in an orthodox community, it was discovered three days prior to a Bar Mitzvah that the young man in question's mother had not been Jewish at the time of his birth. The caterer and florist had been paid. The sanctuary was reserved and Nadler was to be the Rabbi. The ball was rolling. As Nadler, ever punny, put it, once you've paid the caterer, you're really loxed in. All this in mind, Nadler had to tell the parents that this 13-year-old boy would need an emergency circumcision. Luckily, he had already had one and the parents felt confident that this was enough.

Unfortunately, since he was not Jewish at the time of the circumcision, it was not valid. He would need to be checked to see if the medical circumcision had been as complete as that performed by a mohel would be. To check this, the penis needs to be erect. The parents were not pleased with how this was playing out. To ascertain all of this, three other Rabbis would also have to be present to examine the organ in question.

The circumcision, they announced, was complete. Unfortunately, for this boy, he still needed an emergency conversion before the Bar Mitzvah. This means that a pinprick of blood would have to be taken from the penis since it was already circumcised. As it turns out, this very small operation on the day before the Bar Mitzvah made for a very uncomfortable gait on the day itself.

*A story from Jewish.blogroll*

## The Real Logic Of Circumcision

**An article by David Aaronovitch**

Years ago someone (I forget who) told me it was because of the sand; men who live in deserts are liable to get grit where it most isn't wanted and where it unfortunately doesn't turn to pearls. So the religious leaders of the desert folk – who doubled up as wise persons and doctors – transformed a rather radical way of dealing with the possibilities of sub-preputial inflammation, into a supernatural injunction. QED.

In the past few weeks there has been a smattering of bris talk. There was the claim that circumcision diminished the chances of AIDS, though safe sex still seems to me to be a better and less contingent option. And there was the news about how an increasing number of Jewish men were reluctant to have their sons circumcised, possibly seeing the operation as a rather violent intrusion.

This chat just got me interested in the why of it all. Of course, to some believers, God told Abraham to do it, and what more do you really need to know? But it's the anthropology and the psychology that are really fascinating here – so if you want a pretend-medical discussion of penile hygiene or (heaven forbid) a women-prefer-X debate on genital aesthetics, look for the appropriate internet site.

All right; God made his covenant with Abraham. So why, any child would ask the ineffable, might a God, creator or created, want that particular covenant? Sand was one answer, both simple and glib, but theologically unsatisfying. There are other hot places where the local religions don't demand this particular form of sacrifice, or require it later in life, and other body parts one might modify to take account of weather conditions. Muslims are not enjoined to circumcision by the Koran. The prophets all did it (including, of course, Ibrahim/Abraham) and that provides sufficient precedent, with the operation often being carried out as part of an adulthood ceremony. But mark this, in Islam the practice is also apparently known as 'tahara', or 'purification'. Why?

To help readers who might be as ignorant as myself, I began a determined search for the Jewish theological explanation of the brit, covering many websites in the couple of hours I had available. On one, an American mohel explained that circumcision brought together spiritual and temporal in the most obvious way by being performed 'on the most physical part', thus joining the forces of body and soul in serving God. According to this rationalisation, the physical sort of represents the spiritual, and making an alteration in one part of the physical symbolises the alteration in the spiritual. The mohel argues furthermore that this part is somehow more physical than any other part. More than your finger (see Yakuza), your earlobe, your septum (look it up), and therefore more symbolic. And it is certainly true that pagan religions are devoid of symbols representing the earlobe. Even so, this sounds like an evasion to me, or a euphemism.

So I turned to the *being Jewish* website, which offered this elaboration. 'When Adam was created,' it informed me, 'he had no foreskin'. This was because, according to the author, everything in the Garden of Eden, such as food and clothing, 'was easily accessible'. After the Fall, however, everything became complicated and – *being Jewish* implied – Adam grew a foreskin. So when God looked around for a covenant with the chosen people, presumably, he decided to make their intimate persons 'easily accessible' again. Why, however, choose a covenant which half the people couldn't fulfil? It could have been decided that all Jews, male and female, should be shaven-headed. Rabbi Simmons, from *Ask Rabbi Simmons* has a more Melanie Phillips explanation. "In Kabbalistic terms," he says, "the foreskin symbolises a barrier which prevents growth." And why is that? Because, explains the rabbi, "it is a foundation of Judaism that we are to control our animal desires and direct them into spiritual pursuits. Nowhere does a person have more potential for expressing 'barbaric' behaviour than in the sex drive."

Freud's view of castration anxiety might well suggest a boy who believes that, should he sexually misbehave, the Dark Mohel of the Night will come back for the rest. One only has to read *Portnoy's Complaint*, however, to know that humanity has once again thwarted the designs of the Almighty. There is, of course, something else being suggested in all this – something which resonates with another recent debate. Men need the covenant because their rampant sexuality demands to be kept in check, while women have no such requirement. Females can help out, however, by refusing to inflame men's barbarous instincts. This is the logic of the bris and the burqa – lose one covering, gain another.



# ACORN

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## Editorial

**D**enmark may be about to ban circumcision for boys. The procedure would be forbidden until the age of 15 – the legal age in Denmark for a child to have sole jurisdiction over his own body. Interestingly, there would be no religious exemptions; indeed, this ban seems almost specifically directed against Judaism, Islam and any Christian sects where circumcision is a religious requirement.

If such a law is introduced, presumably there will be medical exemptions, otherwise boys with genuine phimosis will have to suffer ballooning prepuces until their fifteenth birthday! But any exemption will provide a loophole – what is the betting that Jewish babies will generally be found to suffer with phimosis. Either that, or such babies will be having an early holiday across the borders to a more sympathetic country.

Perhaps this is a test case for all European countries. Perhaps, if we wish to preserve the right for UK parents to choose infant circumcision, whether for religious or prophylactic reasons, the campaign that I call for in my Editor's column may not be a moment too soon in coming.

*Ivan Acorn*

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### Let's start a campaign!

Sixty years ago circumcision was routine for over half the male infants born in the United Kingdom. In the decades since, that rate has plummeted and today, unless the baby is born into a particular religious or ethnic community, he is likely to remain intact. Yet the arguments in favour of routine circumcision remain as potent today as they were sixty years ago, and many (some would argue all) men are disadvantaged by not having been cut at birth. Is the situation irredeemable? Not necessarily, but it would need a large, concerted campaign to turn the situation around. What might such a campaign look like?

There are three groups of people that need to be influenced: the media, the medical profession and the parents. The media is taken to encompass newspapers, magazines, television, radio and the web. The media would be vastly important in any pro-circumcision campaign. It would have three functions: first, to raise the profile of circumcision and place it in the consciousness of parents as an option for their baby; second to provide information about the procedure; third, to put a positive spin on the process and convince parents that it is the best option for their son.

Articles about circumcision already appear quite frequently in the UK press. Yet they are very rarely of the type that will lead parents to think that circumcision is a relevant option for their baby. Articles tend to be by Jewish fathers or mothers, agonising as to whether they should respect their religious tradition; or circumcised men bemoaning the loss of their foreskins and with it, allegedly, thousands of nerve endings; or reports from Africa on the use of circumcision to combat the AIDS epidemic, articles that rarely suggest any relevance to the western world. Instead, we need articles that will make an immediate impact on parents – articles with titles such as: Circumcision: the sensible choice for your baby boy.

Once awareness is raised, the internet is likely to be many parents' recourse for further information. Many of the current circumcision sites have a charged overlay, directed as they are towards adults seeking circumcision for psychological, aesthetic or sexual reasons. Such sites will probably deter many parents. What are required are factual sites that give positive information about the benefits of routine infant circumcision. It is important that the sites dedicated to infant circumcision should appear high in any Google (or other) search. People rarely get to page 2 of their search results, and parents will soon give up the hunt if the first few search results take them to anti-circumcision propaganda sites.

Baby care sites constitute another potential source of positive information. If the editors of such sites can be convinced to accept entries that discuss the merits of circumcision, that has the advantage that parents looking for general information about the care of their baby may light upon the topic of circumcision and learn of all the advantages of having their baby son cut.

But if the media does give a positive spin to circumcision and parents begin to seek the operation for their son, they will immediately hit a medical brick wall. GPs, with few exceptions, tend to be opposed to routine circumcision. They will therefore

seek to convince parents that it is medically unnecessary and barbaric, and will refuse cooperation in arranging the operation. Doctors need to be persuaded again of the medical benefits of circumcision – particularly in the prevention of phimosis and balanitis, in protection against HIV and other sexually transmitted disease, in facilitating hygiene and in enhancing the sexual experience.

It will probably be argued that the NHS cannot afford to offer routine circumcision to all male babies. But managers need to look more carefully at the economics. At least one in ten males will have problems with their foreskins, leading to the need for circumcision in childhood or later. A circumcision beyond infancy costs far more than ten routine infant circumcisions: the costs include initial consultations with the GP, with probably some ineffective treatment with cortisone creams first; the hospital consultations, the operation itself and the aftercare; not to mention the cost of sick leave during recuperation. Economically, the arguments favour the routine circumcision of babies.

Of course, this in part depends upon infant circumcision being provided at a reasonable price. The operation, whether carried out using the Plastibell or a clamp, is simple and quick. There is no need for high costs. There is no reason why parents should not make a reasonable contribution to the costs, provided that those who cannot afford it still have access to the service.

With respect to parents, the media is probably the most important factor in the first few years of any campaign. Unfortunately, because circumcision has now been out of fashion in the UK for almost 60 years, there is no longer a tradition of babies being circumcised. (The exception is probably amongst families where medical care is provided privately rather than through the NHS. There is some evidence that in such cases, circumcision has survived as the norm.) Fathers, even grandfathers, are now generally uncircumcised; mothers, even grandmothers, have no experience of circumcised men. Circumcision is therefore likely to be an alien concept. If circumcision can gradually be reintroduced, then the tradition will grow again. Circumcised fathers will seek to have their sons circumcised, just as happens in the USA. The question will turn from “Why are you having baby circumcised?” to “Why aren’t you having baby circumcised?” The UK will then start to be a circumcised nation again.

The above is a daunting agenda. But those against circumcision have formed themselves into a powerful lobby. They are excellent at placing articles in the media and are omni-present in terms of bulletin boards and discussion groups whenever the subject of male circumcision is raised – especially if the initial mention happens to be favourable. There is probably an equally large community that is in favour of male circumcision. The question is whether this community wishes to spend all its energies looking inwards, congratulating each other on their cut status; or whether they want to give other males the significant benefits they enjoy through circumcision.

Perhaps now, we are at a turning point with respect to routine circumcision. The proven protection that it provides against HIV infection offers a potent argument in favour. If we miss this opportunity, the United Kingdom will increasingly become the land of the uncut.

*Ivan Acorn*

## Are Women Interested?

[The following question and answer is taken from the October 2008 edition of *H & E Naturalist*. The question was submitted by the *Acorn* member, R.W. – Manchester.]

### **Question:**

I was interested in the question in the July issue about circumcision. To some people, circumcision is a fetish and raises all sorts of discussions for and against the practice – the naked glans versus the foreskin. I was circumcised at the age of three when it was considered the thing to do among certain classes, but nevertheless was still embarrassing to discuss.

Over the years I lost my embarrassment, especially when I became a naturist and saw how many men were circumcised. I know that many people consider it an improvement and I have also discovered that there are women attracted to men who are circumcised. They are called acuculophilic and a book has been published explaining this fascination with circumcision. I do not believe that any male should be circumcised at someone else's behest and that includes religious circumcision.

### **Answer:**

I have often thought it was about time a woman's view was sought on this issue and your letter has given me the opportunity. While circumcision might well be a fascination for some people, I don't think it can be classed as a fetish.

That word, from the Portuguese 'fetich', meaning sorcery or witchcraft, came from the Guinea coast of Africa where it was used to describe especially designated objects used in primitive tribal worship, often with some kind of magical or sexual connection. These weird-looking things were made of natural materials – feathers, animal hairs or skins, even pieces of human bones, but in modern times the description has been extended to include manufactured materials such as rubber, plastics and silk and satin, for instance. Even my own admitted fascination with shoes (leather, plastic, shiny metallic, heels etc) can be called a fetish these days, but circumcision – no, I don't think so.

What you are talking about here is something used more generally to describe objects or parts of the body that command intense sexual interest and is better referred to as an obsessive interest.

The word acuculophilic refers to the Greek word for acorn so it is easy to see the connection here, with the head of the top of a circumcised penis looking a bit like the fruit of the oak tree. But even though, as you say, a book has been written about it, I wonder just how many women there are who are obsessively attracted to circumcised men. To be quite honest, I don't think there are very many women – hardly any in fact – who are this way inclined. When a woman first meets a man, what comes through and is of most importance, is their character and personality, and whether a man is circumcised or not is one of the least important factors in a relationship.

You don't think to yourself: "I wonder if he has been circumcised and if he's not, he can take a running jump." Well, that's my experience anyway, as well as that of all the female friends and acquaintances I know.

Okay – in naturism, the penis is in full view, so we can see instantly if a man is circumcised or not, but exactly the same etiquette applies as if he were fully clothed. One thing I do agree on is that no man (or woman either) should be circumcised on a whim or some religious belief, although I do realise there may sometimes be exceptional circumstances to take into consideration.

It has been an interesting exercise dealing with your letter, but at the end of the day I would say that it is mainly men and not women that have the most interest in this subject.

[Note by R.W. – The book that I referred to in my letter was *An Innocent Obsession* by David Catesby. The book was compiled by David from notes left by his wife after her death in a motor accident. She was the main acuculophilic concerned, but many of her friends and associates were active in the subject of circumcision. My main criticism of the book is that it promotes circumcision as an aid to male hygiene but never mentions the protection circumcision offers to the male from unhygienic women.]

## The Right Thing To Do

As to the real logic of circumcision, I find it impossible to accept God telling some 90-something old man to circumcise himself with a sharp rock; I believe that it all came out of the weather and stinky guys facing the fact that cheese dicks smelled poorly and the foreskin which was a problem could be fairly easily removed, especially at the beginning of the second week of life. Don't forget that the largely Muslim Arabs also remove the foreskin (same weather).

Now, my father who was anti-semitic was heatedly opposed to circumcision; thus my operation at 29. This old guy believed that the largely Jewish medical doctors found a way to increase their pay during the Great Depression by advising circumcision for all boys at the princely rate of \$50 even though the whole delivery and prenatal care was \$100. Folks were having fewer children during the Depression Years and every male delivery was a very nice addition to the doctor's income. I know that the charge shrunk (poor choice of words) over the years because my cousin was circumcised for \$17 according to my aunt.

I had to convince my Jewish lawyer to circumcise his own son by telling him that it hurt a helluva lot more as an adult and no boy was about to have the conversation requesting same at a later date. I told him that I was sure that he was going to hang out with other Jewish boys and that it was a stupid move not to let him fit in. I reminded a nurse when I was having seven way bypass that she had never even asked her sons the question even though they were in a highly circumcised neighbourhood. I gave her food for thought, at least. The subject had come up when a Seinfeld rerun of the hilarious circumcision and bris was on in my hospital room and she chose to watch it, hooked by the lines that made her kind of vulnerable.

I still find it odd that society lets the woman have so much to say about the decision when they don't have to show their private parts anywhere near what guys have to. I am ashamed of our modern physicians who take no responsibility for advising anymore. It was the change of one vote on the small panel of the *American Medical Society* that left them in the "we don't recommend" position. I believe it was only about three people who made this decision but with our representative form of government folks never learn anymore because they do not read. I have the book of the physician who is still very sure that it is the right thing to do, and he was the chair of the committee for many years.

*Californian*

## Modifying My Cock

**F**or a long time my foreskin has been encircled by what became, over time, a series of very large piercings, originally occupied by a cluster of steel rings. Due to their interference with cock action, the rings were removed some time ago. With an erection, the said piercings created a ring of loose skin which visually interfered with the otherwise smooth shaft outline. It was also a bit of a nuisance in that it had to be held back to allow the glans rim to be effectively stimulated.

However, things have changed. With the use of a pair of small, tightly-gripped pliers, tightly knotted thread and a scalpel, over a couple of sessions recently I have cut away all my piercings; i.e. I have shortened my foreskin. OK, it's not exactly a total circumcision but it's a good start. The last cut made, and the sight of a bit of me, soft and cold on a piece of tissue on the table, was an amazing sensation.

I'm already finding it great to be (at least partially) free of foreskin. It is a real pleasure to know that my head is uncovered at all times – and for all time. I do still want to lose a bit of shaft skin to tighten it up.

Curiously, it occurs to me that when I got dressed in the morning, one thing I habitually did was to pull my foreskin forward. I'm not sure now why I ever did it, and dropping the habit was easy. What is it about circumcision that makes us want to expose and possibly desensitise our most sensitive part when it was never meant to be exposed – masochism? For example, my next goal is full exposure of my inner foreskin by tightening up the shaft to get it to stay pulled back.

I have always enjoyed being able to alter my cock, and although it has taken a number of years, I have my glans pierced, my urethral opening enlarged – held open by the end ball of a vertically placed barbell. I've had two Prince Alberts, both now cut/ broken away, adding to my sub incision. Although now somewhat faded, I did also once have my whole glans tattooed red. I also prefer the clean shaven look 'down there'. Of course my biggest change (?) is yet to come. I wonder if any other *Acorn* members have any advice to offer on the subject?

*R.M. – Suffolk*

## What's The Difference?

In the following photos, some guys are cut, some are skinned back. It isn't always easy to tell the difference.



## A Foreskin Is Not Just For Christmas

I met Saul at a gay disco when I was 19. I was in my first year at Uni and quite naïve and shy. To use a cliché, I was bowled over by him. He was ten years older than me, had money, was really good looking, suave, knowledgeable about books and films, and great in bed. Within two weeks I had moved in with him.

I realised early on that he had a thing about circumcision. When we were looking at porn mags or watching videos, he would make comments like: “God, that’s a great cut” or “That guy could really do with a good trim”. He was cut himself. He had a nice cock, about six inches but quite thick and a good sized glans – great to get your tongue round! I was uncircumcised with a rosebud foreskin that extended beyond the glans. Saul was never unkind about it – he didn’t slag it off as dirty or smelly or slimy, as I’ve sometimes heard foreskins described. But he would tweak it sometimes and say things like: “You’d be better off without that” or “If you’re not careful, I’ll take my scissors to that”. I just laughed it off as a joke.

One Sunday afternoon when we were snuggling up together after sex, he whispered in my ear: “Do you know what I would really like for Christmas?” (A few days earlier I had asked him for ideas for Christmas presents.)

“What?” I asked.

“Your foreskin!”

“Pardon?”

“Your foreskin!”

“What do you mean?”

“I’d like you to get circumcised.”

I had never really thought about circumcision. Most of the boys at school, most of the guys I had had sex with, were uncircumcised. Occasionally, you came across a cut guy – so what? I had never even asked Saul about when or why he had been circumcised. It was a non-issue.

But I was infatuated with Saul, it was obviously an issue for him, so, after thinking about it for a few days, I said “Yes”. Saul arranged for me to see a private doctor and to say that I was getting irritation from my foreskin. The doctor didn’t even ask me to drop my pants; he just wrote a letter of referral.

Saul came with me to the surgeon. When the surgeon examined me, he asked: “How much foreskin would you like me to remove?” Saul answered: “Oh, the lot! And the frenulum.” The surgeon looked quizzically at me, but I just nodded. In those days, I knew nothing about the different types of circumcision. I just thought a circumcision was a circumcision.

So I ended up with what I now know to be a high and very tight circumcision. As Saul said, with obvious pleasure: “You’ve been well and truly skinned.” Saul nursed me through the aftercare. I had very little pain. The only real discomfort was erections – I slept away from Saul for a couple of weeks! – and a very tender



glans, fully exposed for the first time. Once I was healed, we could have sex again – and it was hot. My circumcised cock gave Saul a fantastic turn-on. He loved to run his tongue round the scar and in the groove where the frenulum had been. He just couldn't give me enough blow jobs and every one was fantastic. I was in danger of ODing on oral!

A few weeks later, Saul ended it and threw me out. He said he was bored with the relationship. I was devastated. I was also very upset about my foreskin. I didn't mind being circumcised. It was neat and clean and sex was just as good as before. But I felt that I had been tricked out of my foreskin. I learnt later that Saul had done this sort of thing before. I don't think it was deliberate. He just liked guys younger than himself but didn't like their foreskins. So he persuaded them to dispose of them. He probably thought he was doing them a favour. But as far as I was concerned, I had sacrificed a permanent part of myself for a temporary relationship. After all, to adapt a phrase, a foreskin is not just for Christmas, it's for life!

*Andrew*

[The above article was put together by the editor from email exchanges with an internet contact.]

## **Forcible Retraction**

Since birth, my son had an undescended testicle that occasionally allowed gravity to prevail. He needed to have an orchioplasty: a surgical reconstruction of the testes. It was also recently discovered that along with the undescended testicle, he had an inguinal hernia. Both were to be operated on in our local Children's Hospital. We authorised ONLY these two necessary medical procedures.

Prior to the surgery, during our consultation with the surgeon, we specifically explained our two utmost concerns. One of our strongest concerns, aside from our son being put under anaesthesia and receiving a caudal epidural block, was that his genital integrity should not be compromised. We explained to the surgeon that we had made the educated decision to refuse to circumcise our son when he was born. One of the last things the surgeon said to us during the consultation was that it was a non-issue that our son was intact. He said absolutely nothing about adhesions, phimosis or retractability of the foreskin, all of which he later claimed to be the basis of his decision to perform this cruel procedure.

It wasn't until hours after the surgery, during a diaper change in a rest area on the way home from the hospital, that we realised, to our horror and disgust, that the surgeon had forcibly retracted our son's foreskin. Just as most babies' and toddlers' prepuces and glans are adherent in nature, our son's foreskin was only about halfway retractable and otherwise fused, prior to surgery. During his diaper change (post-surgery), we realised what had happened to our son, as his foreskin retracted completely, revealing blood, and a red, raw, open wound. Fortunately, the effects of the anaesthesia still had not worn off during this incident.

We were not asked permission to allow the surgeon to perform this barbaric procedure and certainly would not have given any authorisation to do so. We were not advised by anyone after the surgery (until the surgeon returned our urgent phone calls once we were back at home) that our son's prepuce was forcibly and surgically stripped away from his glans penis (just as a fingernail would be torn from the nail bed), prematurely exposing what should be an internal organ. The surgeon's excuse for performing this horrific procedure was that our son had a (phony and commonly over/mis-diagnosed in prepubescent boys) condition called phimosis, as well as adhesions and a build up of smegma. The definition of phimosis did not apply to our son and certainly shouldn't apply to anyone as young as our son. Our son's previous paediatrician, whom we trusted whole-heartedly with guidance on how to care for our son's intact penis and who had seen our son just prior to our move to another state, never raised any concern over phimosis, smegma build up or adhesions.

Because of the actions of the surgeon forcibly tearing the flesh of the balano-preputial lamina (which connects the foreskin and glans – the synechia membrane) and destroying the skin that is considered the first line of defence, our son has experienced swelling, redness, painful urination, sleepless nights and anxiety. Our son has been exposed to potential iatrogenic infection, adhesions and acquired phimosis. During his most recent bath, our son retracted his own foreskin no longer halfway, but about three-quarters of the way, revealing adhesions that have already re-attached the glans to the prepuce, preventing any further retraction. We can only hope this condition will resolve itself over time, allowing him natural, non-painful, full retractability by or near puberty as should naturally have happened. Although, it is disheartening to say, we have been advised by medical professionals and doctors that our son will probably need to have the foreskin surgically separated from the scar-connected glans in the future (as the synechia has already been damaged).

Our son is two years old and had many years before him for his foreskin to naturally separate from the glans in a non-traumatic fashion without any uninvited medical intervention. Our son has been traumatised. His body has been violated. He will likely suffer further physical, mental and emotional pain throughout life and consequently, require additional surgeries to correct his penis, all of which would have been avoided had the surgeon only performed the two authorised procedures.

*From the student doctor network*

## **Just How Drunk Do You Have To Be?**

**[From the internet blog of a triage nurse]**

**D**runk man in triage won't tell me why he is here, refuses to talk to anyone but the doctor, and "it better not be some God damn girl either". It's a small ER and we are not busy so I walk him back to a room even though I am annoyed and tempted to let him have a therapeutic wait.

Doctor (man) comes out of the room a few minutes later and he is chuckling and shaking his head. Apparently the man had gotten drunk a few days earlier and decided he wanted to be circumcised so he got out his trusty buck knife and trimmed off his foreskin. By now we are all cringing a bit. The doctor goes on to tell us that, as if that wasn't enough, a couple of nights later while drunk he decided to trim it up a bit and make it a little neater. Now it is terribly infected and he'll probably need surgery.

So we were all wondering, just how drunk DO you have to be to circumcise yourself? He ended up with a couple of surgeries, a suprapubic catheter and a prolonged hospital stay due to the infection and the DT's.

## Too Much

I like foreskin on men, but I have been with a few that just have too much of it. When they are soft, it can be rather ugly. I like appealing cocks – a guy can be attractive and have an ugly cock. That is a big turn off to me.

Don't get me wrong. I have gotten past the initial shock of an ugly cock, if it is clean, and smells good. Some guys with foreskin need to keep the thing clean. I am not giving a hummer to a guy with a smelly dick – it is just not going to happen.

When the cock is hard, the foreskin can be pulled back, exposing the head – if it has not grown too tight around the head. This can be a painful thing for the man with the foreskin. Some men have had the foreskin removed because of this.

I have to say I like a little foreskin; it gives my tongue something to do! As far as getting some of the foreskin removed, it can be done, and it is a rather minor surgery. Carlos had some of his foreskin removed – not all of it, just some excess. I have to say he did it to please me; I mean, I loved him anyway, but we have good communication between the two of us. It has made our sex life better. He said his excess foreskin was sometimes a nuisance, and caused him some pain. He says that sex is better now for him... So there you have my thoughts and my experience of it... Carlos has a very pretty cock now, soft or hard.

*From eroticstories.com*

## Circumcision Is An Art

Issue 2008-3 was as interesting as ever, but I seemed to detect some concern about the future of circumcision. Apparently, less circumcisions are being performed nowadays than, say, thirty years ago. It seems that the NHS abandoned the practice in the 1950s and even private practitioners are performing less circumcisions. It is an art in my opinion, and one that is less available due to a dearth of skilful people able to perform the operation.

It is an art, when one considers what is involved to achieve the result required through whatever technique or method is used. I watched Dr Z remove my frenulum and some skin from the shaft in August 2006 and appreciated his skill and

patience. I hope society does not lose the skilled men or women able to perform this service for those who desire or require circumcision.

I was circumcised in 1941 at the age of three, at the behest of my mother and due to phimosis. At first and for many years I was embarrassed by my circumcision because I knew I looked different from other boys who were uncircumcised at the time. It gave rise to some sniggers and ribald comments, as one would expect from certain members of our neighbourhood who didn't understand. As time passed I appreciated my circumcised condition more and more, especially after my re-circ in 2006. In my opinion, circumcision should be available to all boys and men, when they say they require it and not as an act of compulsion or for religious reasons. Males should have the last word on what happens to their bodies.

*R.W. – Manchester*

## Good Advice?

**[Taken from a medical advice column in the *Northwest Herald*, Illinois, USA]**

**Reader 1:** My husband and I are adopting a baby boy from another country. He will be around 8 months old when we bring him home. Please tell me the reasons to and the reasons not to have him circumcised. We're not sure of the health benefits of circumcision. We don't want to cause him any unnecessary pain.

**Doctor:** Circumcision is not necessary. The procedure is traumatic shortly after birth, when it is ordinarily performed, but it can be a serious discomfort for children your son's age. Follow your pediatrician's advice, but, in my opinion, circumcision can be avoided. Your job with your new child is to be supportive and prevent discomfort, not to start off on the wrong foot.

**Reader 2:** It never ceases to amaze me when adult men reject circumcision for newborns. The woman who wrote to you for advice on this subject because she was adopting a baby boy from another country asked for both pros and cons, but you gave her only the negatives. We all know that circumcision is not necessary, but an uncircumcised penis is never as clean as a circumcised one. I have been told this by almost every woman that I have been intimate with. And yes, I do bathe every day and before every date. But more than one long-term girlfriend has told me that it is very off-putting in bed.

I know this is not the one and only reason to have a baby circumcised, but men do not seem to want to admit that this can create problems in the bedroom. I also read years ago that almost all cases of cancer of the penis were associated with an uncircumcised organ. In the case of the woman who wrote to you, I would be more concerned that she was considering the procedure for a baby boy already 8 months old. In my opinion, it should be done shortly after birth to minimize discomfort or not done at all.

**Reader 3:** I agree. But circumcision is a very personal matter. In any case, uncircumcised men would do well to pay meticulous attention to cleanliness. If this doesn't work, adult circumcision is a viable option.

**Reader 4:** My father has just had surgery to remove a growth on his penis that was cancerous. It is believed that the cause was from not being circumcised. I, too, have problems caused by not being circumcised. My question is, what should I do? Is this treatable with medication, or is surgery necessary? I pray you can give me some guidance.

**Doctor:** Penile cancer is more common in men who haven't been circumcised than those who have. If you are having difficulties, such as chronic infection or cancer, you should see a urologist for advice and treatment. Although adult circumcision is uncomfortable for several weeks after the surgery, it may be your best option. Follow the specialist's suggestions.

## Circumcision For Converts

[A question, with answer by Shaykh Hamza Karamali from  
*SunniPath, the Online Islamic Academy.*]

**Q.** Can you explain the ruling regarding circumcision in the Shafii madhab? Is it wajib or even fardh? And does a new convert get circumcised according to Shafii madhab? I am asking for a brother who recently accepted Islam and follows the Shafii madhab and wants to know the ruling for him regarding the circumcision, since he would have to expose his awrah to another man.

**A.** All scholars agree that circumcision is a religiously praiseworthy act, but they differ regarding its obligation. The position of the Shafi'i school is that circumcision is obligatory, but other scholars have held that circumcision is merely recommended. Because of this difference of opinion, scholars are generally easy-going and gentle with recent converts to Islam on the issue of circumcision.<sup>[1]</sup> The most important goal with new Muslims is to preserve and nurture their newfound faith, and imposing difficult rulings such as circumcision on them early on may well drive them away from Islam altogether. If, of his own accord, a new Muslim insists that he wants to get circumcised, he will be doing something praiseworthy by scholarly agreement. It would be permissible for him to reveal his nakedness to the doctor to get circumcised, although this would have to be limited to the extent of the need.

And Allah knows best.

[1] Shaykh Amjad mentioned that the scholars of Hadramawt do not emphasize the issue of circumcision when calling desert Bedouins – most of whom do not get circumcised – to religious practice. Imam Hasan al-Basri used to say, “People – black and white – accepted Islam and whether or not they had ever been circumcised was never made a matter of investigation.”

## Australian Doctors Rethink Anti-Circumcision Stance

[By Jason Gale, bloomberg.net]

Australian health officials may want to encourage greater use of circumcision for infant boys as research shows the procedure can help prevent the spread of HIV, the country's top AIDS expert said at an AIDS conference in Sydney, Australia last year.

The surgical procedure performed on adult men in Africa reduced their chances of getting HIV through heterosexual intercourse by as much as 60 percent, according to the World Health Organization. The finding is encouraging doctors in Australia to rethink their opposition to the practice, David Cooper, director of the National Centre in HIV Epidemiology and Clinical Research in Sydney, said in an interview. "I think the stance will be softened and that pediatricians and obstetricians will explain to parents a more balanced view of the advantages and disadvantages of circumcision", Cooper said. Doctors are "looking at it with less disdain than they did several years ago".

After the Second World War, Australia conducted routine circumcision of all newborn boys, partly to avoid hygiene problems related to germs that can linger in unwashed foreskins. The millennia-old technique, which involves removing a sleeve of skin covering the tip of the penis, fell out of favour in the mid-1970s as doctors concluded that the risks of surgery outweighed the benefits. Data collected in 2004 showed fewer than one in eight Australian males are circumcised by six months of age. In the U.S., more than two-thirds of adult men have had the procedure, mostly in infancy. "There is always going to be a controversy about whether to be cut or uncut," said Cooper, who is also a professor of medicine at the University of New South Wales. "It's now pretty clear that it's a low-risk procedure and does have a lot of benefits in addition to protecting against HIV."

Circumcision, considered a rite of passage in some religions and cultures, is controversial because the surgery may introduce infection, and cause bleeding, nerve and tissue damage. Some researchers say it's unlikely to stem the spread of HIV in Australia, where 83 percent of the 16,400 people living with the virus are men who acquired it through sex with men, rather than heterosexual intercourse. "As most HIV infections in homosexual men occur after receptive anal sex, circumcision is unlikely to be an effective HIV prevention intervention in Australian gay men," researchers at the center said in a study presented at an AIDS conference in Sydney. "It's a very effective intervention, but you have to have a certain prevalence of the infection to make it an effective prevention strategy", Lewin said in an interview at the AIDS meeting. "In Australia, you would have to be circumcising a lot of men to prevent one case. I think as a strategy in Australia, it's unlikely it will be taken up."

When other circumcision-related health benefits are weighed, the procedure "could be recommended by doctors in Australia", said Robert Bailey, professor of epidemiology at the University of Illinois in Chicago, who led one of the circumcision studies in Africa. He continued: "Certainly parents ought to be fully informed of all

the benefits as well as the risks of circumcision. It is plausible that circumcision may reduce HIV transmission in men who have sex with men because circumcised men have a lower incidence of herpes and other ulcer-causing genital diseases that provide openings for HIV to enter and exit the body. Also human papilloma virus, the wart-causing virus linked with certain cancers, is less common in circumcised men. It is very well established that cervical cancer is much more common in the female partners of uncircumcised men, and penile cancer is less common in circumcised men.”

## Royston's Little Op

Royston has been having UTI problems since one month old. He's been through so many urine tests and has been under antibiotic since the first month. Yet each time, the urine test showed germ infection. After several tests and, with each time, a different germ being found, the doctor is beginning to suspect that Royston might not have UTI after all. He might be just having infection at his foreskin area. He has seen two paediatricians and both recommended circumcision for him. So, yesterday, we brought Royston to a doctor recommended by Raffles Hospital for the op.

At the clinic, the doctor begins by explaining to us how common circumcision is in the States and among some ethnic groups and how simple the process is. And given his age, he'll recover in a few days time. The op begins by the doctor using a marker to make a mark on his foreskin. That will be where he'll cut. After that, he stabbed Royston at the base of his penis with the anaesthetic jabs (yes, he really uses stabbing actions to pop the needle in). I think that is the most painful part of the op as Royston cries during the jabs. But I think the anaesthetic worked immediately because Royston is back to normal in a while.

The doctor then proceeds to use several pincers to pull on the foreskin and hold it in place. Next, he uses his ops scissors and cuts the extended foreskin away. And the final procedure is to put in a plastic ring around the penis to protect the wound for the next few days. That ring will automatically drop by itself in 4-6 days time.

The whole op took about ten minutes at the most and there's little blood. So not too scary. But for the next two days, my poor Royston might feel a little pain when the anaesthetic effect wears off. Hopefully with this op, his germ in urine problem will be gone and spare his body those antibiotic treatments. He'll go for his review and urine test next week. Hope for the best.

Oh ya, in case you want to know: the op cost me \$481 bucks!

*From an internet blog*

## Penile Washing After Sex Not A Substitute For Circumcision

Cleaning the penis after vaginal sex does not protect a man from infection with HIV, according to a study conducted in Rakai, Uganda and presented in the circumcision session at the Fourth International AIDS Society Conference in Sydney in July. Dr Fredrick Makumbi of Makerere University Institute of Public Health, Uganda, who presented the study, said that his study team had been surprised by this finding given that genital hygiene has long been thought to be protective against sexually transmitted infection. He emphasised that men who washed using soap a few minutes after intercourse had the highest risk of infection with HIV. He speculated that this could be because washing with soap and failure to dry resulted in wetness, increasing the chance of cells becoming inflamed and thus more vulnerable to infection with HIV. Dr Makumbi also suggested that washing soon after sex could remove enzymes in vaginal fluid that help neutralise HIV.

Three randomised controlled trials in Africa have shown that men who are circumcised have a lower risk of becoming infected with HIV. However, circumcision is not universally possible or acceptable, and genital hygiene has been suggested as an alternative. Therefore, investigators from the large Rakai circumcision trial analysed data from 2,552 uncircumcised, HIV-negative men to establish if post-coital washing helped to protect men against infection with HIV. Investigators interviewed men about their cleaning habits after they have sex. This was correlated to the incidence of HIV seroconversion during the study. During a total of 4,378 follow-up interviews, 83.0% of men reported cleaning after each time they had sexual intercourse. The HIV incidence in this group was not significantly different to that in the group who never cleaned, 1.69 per 100 patient years versus 1.22 per 100 patient years, respectively. When men who cleaned were asked how soon after intercourse they usually cleaned, almost half (49.2%) responded that they clean within three minutes. In this group of men, HIV incidence was 2.32 per 100 patient years. This was significantly higher than the incidence of 0.39 per 100 patient years among men who waited at least 10 minutes after sex before cleaning. That is to say that waiting 10 minutes before cleaning decreased the HIV incidence to less than 20% of that among men who washed right away.

Differences were also noted in HIV incidence depending on what cleaning method was used. Washing only, reported in 46.9% of interviews, was associated with an incidence of 2.20 per 100 patient years. Using a cloth and washing was used in 40.6% of cases and was associated with an incidence of 1.04 per 100 patient years. And using only a dry cloth, 12.4% of cases, was associated with the lowest incidence, 0.55 per 100 patient years ( $p = 0.0442$ ). In conclusion, the authors noted that while cleaning the penis after sex is common in this rural Ugandan population, caution should be taken in promoting it as an alternative to circumcision.

*Michael Carter & David McLay*



# ACORN

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Ivan Acorn

## Editorial

**A** Happy New Year! And apologies that this, the last newsletter of 2008, is a little late.

This edition has a European flavour. My editor's column talks of the Cutting Club, an internet club for circumcised men, based in Germany. There are well over 5000 cut men, mainly German, which is at least a start in creating a more circumcision friendly culture. There is also news of a Hungarian website promoting circumcision, plus an account from one Hungarian of how he lost his foreskin. All this is some antidote to the news from Denmark in the last edition about a possible ban on male circumcision for boys under 15 years of age.

Time passes, and once again we are at subscription renewal time. I hope that you have enjoyed the 2008 *Acorn* experience and have found at least something of interest in each newsletter. It is amazing how much there is to say on this subject that fascinates us all. Please check your details and let us have your payments. Unfortunately we can no longer accept postal orders. UK cheques or cash only please.

*Ivan Acorn*

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### The Cutting Club

For men absorbed by the subject of circumcision, the internet has been a god-send. Twenty years ago, guys with this interest were isolated. They felt that they were unique, peculiar even, in the nature of their preoccupation. Finding others with a similar interest was revelatory and indeed the *Acorn Society* was a trailblazer in this respect. It allowed members to explore openly their fascination with circumcision, an interest which previously they had felt necessary to bury. For many, it was simultaneously exhilarating and cathartic.

The coming of the internet has revealed just how ubiquitous the interest in circumcision is. This fascination transcends language, religion and age group and spreads across all continents. And why should this not be so? Circumcision is perhaps the oldest and is certainly the most widely practised surgery on males. Its survival from antiquity through to the present day is witness to its utility and to the benefits it is still seen to confer. Even today, circumcision is a life enhancing experience for many men. The removal of foreskin validates their masculinity.

Internet aficionados will be familiar with the many web based groups dedicated to circumcision. Typically, these are mailing lists where any member can send messages to all other members, exploring any aspect of the topic that interests them. The way in which messages are configured can differ from list to list. On some, you can explore a thread – a group of messages on a particular issue sequenced in date order; on others, all messages are placed in chronological order.

The Cutting Club is rather different. This is an internet club for cut men. It is based in Germany ([www.cuttingclub.de](http://www.cuttingclub.de)). However, it has English translations of the main pages and many of the members are either British or English speaking. There are two levels of membership. The basic level is free. The premium level costs €2 a month.

There are 5789 members overall and 214 in Great Britain. Members are asked to complete a short profile of themselves. This includes height, weight, body type, cock length and diameter, age when cut, style of cut, sexual tendency, and preferences with respect to sexual activities – active/passive in relation to wanking, mutual masturbation, oral and anal. Of course any or all of these fields can be left blank. Thumbnail photos can also be posted. Some members post no pics, some of face only and some of their members.

It is possible to sort through the members and select on criteria such as geographical location, age etc. Any of the members can be contacted by email via the website. One then has a choice as to whether to respond; and a dialogue and who knows what else can ensue.

There is a whole range of photo galleries on the site. In these a selection of (usually attractive younger) men display their bodies and more particularly their cocks – all well circumcised, of course. There is also a selection of videos in which those cut cocks are put through their paces in a variety of situations.

Some galleries and videos are available to all members but the full range can only be accessed by premium members. However, ordinary members can earn points by uploading stories or photos, and these points can then be used to access the premium member materials.

One feature of the home page is 'member of the week' in which a recent member, and particularly his member, is highlighted. There are also members' stories. These are usually outlines rather than detailed accounts. For instance, one member wrote:

"At the age of ten I was interested in what other boys had in their trousers for the first time. We compared our dicks while showering after going for a swim. My best classmate was circumcised and bragged about his dick and I asked myself why I hadn't been circumcised. That was the time when I wanted it too. I wanted to be like him and other circumcised boys in my class. A phimosis was diagnosed shortly after and fortunately I had to undergo circumcision anyway. I'm really honest about it. Even today I like circumcised boys better than the ones with a 'sausage casing'!"

There is also an advice section where a doctor (Dr Cutter!) sympathetic to circumcision answers any queries on the subject. For instance:

Q: I was circumcised eight years ago and I am satisfied with my foreskin-free penis. However, if I have an erection it hurts at the bottom side of the glans and the glans bends downwards. Is there anything I can do to make it better?

A: The frenulum actually does have merit in an uncircumcised penis. It keeps hold of the foreskin. Without the frenulum the foreskin, if it isn't a really tight one, would slide back and forth anchorlessly. Normally it should be possible to pull back the skin if the penis is fully erect without the frenulum dragging too firmly on the glans and causing tension.

However, 30 per cent of all uncircumcised men have a frenulum that is too short. If it is kept like that after a circumcision it often tenses at the bottom side of the glans = especially if the little ribbon is too short. In this case it will pull under the glans which will lead to distortion of the penis eventually. Empirically untreated cases like that lead to a break of the frenulum which is really painful and accompanied by heavy bleeding most of the time. Furthermore micro breaks can arise that can result in scars during the healing process. By further breaks the tissue can scar over again and the flexibility of the frenulum gets more and more limited. Only a full removal of the frenulum can avoid problems like these. A frenulum that has been removed this way will lead to an even skin surface and therefore is desirable for aesthetic reasons.

There are also a number of articles on aspects of circumcision. Recent additions include: *Circumcision does not repress appetite for sex* and *With a foreskin, there is a higher HIV-risk!*

What is perhaps most amazing about the site is that it is German based. It has always been thought that Germany, with its anti-semitic past, was a country where circumcision had made few inroads. If such an internet club can flourish in Germany, why isn't there an English speaking equivalent based in the UK or the USA? Perhaps, if there were an internet savvy member, the *Acorn Society* itself could sponsor such an innovation. Any volunteers?

Ivan Acorn

## A Hungarian Circumcision

I was circumcised as an adult, shortly after my 35<sup>th</sup> birthday, and I am very satisfied with the results of the operation, the look, the easy care etc. I am also very proud of my circumcised penis, I feel that it helped me to be more sure of my manliness.

In our country (Hungary), circumcision is very seldom performed. It is a usual rite among religious Jews, but most of the people of Jewish origin in our country have abandoned circumcision. Obviously, circumcision is performed for medical reasons to treat severe phimosis or other penile illness, but the operation is unknown as a social custom or a standard prophylactic measure. (I believe that none of my classmates at school was circumcised, except for possibly one boy.)

In our family circumcision was never mentioned nor practised. Like most boys, I was born with a tight foreskin that was loosened when I was 3. However, I had a lot of problems with my tightish prepuce and I highly disliked pulling it back and washing it. These sorts of troubles ended when I started to masturbate at around 13 with pulling the skin back and forth, and the regular motion of my foreskin over the glans made the opening large enough and the skin loose enough.

I first came across with the term 'circumcision' when I got Dr. Spock's best-seller, *Baby and Child Care* in my hands which was (then) advocating circumcision as standard care of the penis. (I understand that later he changed his views and was not recommending circumcision.) Though I cannot remember when I had first seen a circumcised penis, I do remember that I was very much impressed with the result of the operation. In later years I read as much on that subject as I could, including ethnographical books and travellers' memoirs on circumcisions among native Africans and Australians, books on religious customs (i.e. Jews and Muslims), as well as medical and sexual advisory books, pamphlets and popular Q&A publications. Thus I learned that circumcision is a social 'must' in the USA and in several other English speaking countries, and I also read personal accounts of men who chose to be circumcised as teens or adults.

From my readings I became an ardent (though quite silent) fan of circumcision, but I did not have the courage or the possibility to submit to circumcision. Nevertheless, I kept my foreskin retracted as often and as long as I could. (Actually, I wanted to try how it feels to be circumcised, plus I wished to look circumcised when changing for doing sports or in the showers.) Then, about four years ago I developed a tiny infection on my glans. First I was very scared of having something more serious (i.e. a cancer or the like), as I learned that the lack of circumcision

might result in such illness. (Actually, it was not sore or itching.) After two or three weeks, I went to see a friend of mine who became an MD. He looked at my penis and told me that it was a minor fungus infection. He gave me a prescription for a cream and suggested that I keep the foreskin fully pulled back until the infection disappeared. He explained that fungi, like normal mushrooms, grow in a warm and humid environment like underneath an un-retracted prepuce, while the bare glans always stays dry which prevents such infections. He added that this is the basic rationale behind circumcision among the people living under a hot climate, and he said that he would recommend circumcision if I was ready to go for that. I knew that he, though himself uncircumcised, was in favour of circumcision as a doctor. (We did actually discuss that issue years before. Then it turned out that his younger son had to be cut for health reasons.) Though I murmured something like "I am too old for it", in fact, I decided to have it done if and when I had the time and courage.

A few months later I called him and asked his help to find a urologist willing to do a circumcision without apparent medical reasons. He was not surprised at all; moreover, he said he supported my decision and agreed to help. Within a few days he assigned me to a well-known urologist in town, with whom I made the necessary arrangements and he performed the operation on a cold Friday morning in February 1996. I was circumcised under local anaesthesia, and the operation lasted only about half an hour. I received a tight bandage, and my penis looked like a mummy, fully covered with cloths.

After a brief rest I was able to go to work, so I did not miss a day. I felt no pain at or ever after the operation. (Actually, the surgery assistant told me that he underwent the same and the operation is a lot less painful after the late twenties than before.) To my surprise, the dressing was removed the following day. I was very excited to see the new look of my male organ. It was great. The glans was bare and free from any excess skin. It seemed to be a bit swollen, but the doc told me that it was normal. I was told to be careful when taking a shower and to avoid any situation that may cause an erection.

I received a low, fairly tight circumcision. The skin of the shaft was seamed to the skin right beneath the ridge of the glans, so I was left with no inner foreskin and the frenulum was also removed. I had no problems with getting used to the circumcised penis, as I had kept the foreskin fully pulled back for several months before the operation. I found that, though the skin of the glans became coarse and dry, I had lost no sensitivity at all.

The circumcised penis helps penetration, as there is no excess skin moving back and forth, so the contact with the female organs is direct and very exciting. I am still coming very soon, sometimes too soon. As circumcision is rare in our country, I was afraid about what my friends with whom I did sports would say about my circumcision. I expected they would laugh at me or pull my leg, but I experienced no negative reactions at all. They were a bit surprised, though they said they understood my reasons. I met my wife after my circumcision. She had had no experience with the circumcised organ before and she is very fond of my form. We agreed that if we have sons born (which we hope to happen a.s.a.p.) the boys will get circumcised before they leave the hospital.

As I am still very interested in circumcision, I have searched the topic on the Internet too. (It was long after my own circumcision.) I was very much amazed to stumble on the many anti-cut sites which made me a bit nervous about my decision, but I realised quite soon that the information they give is inaccurate and highly biased.

*Andras – Budapest*

## Hungarian Circumcision Website

The foregoing is an account of my circumcision in February 1996 at the age of 35. Two years later, I started to use the Internet. Naturally, the phrase 'circumcision' was one of the first things I searched on the net. I found an incredible amount of material there, in favour of circumcision as well as against it. I was quite surprised to learn that RIC is so hotly debated in the USA. I thought it was so much of an established social practice that it was beyond any dispute, just like breathing or eating, or just as smallpox vaccination.

I read through everything I could and I realised that most of the anti-circumcision propaganda is a simple lie, and thus very dangerous. Everything they wrote about being circumcised was so different from my own experience. In the meantime, I was pleased to find the pro-circumcision websites and I was thrilled to find many circumcised Hungarians as well.

I started browsing the Hungarian web, I think, in 2000, and then I found many discussion forums, 'ask the doctor' and FAQ places which dealt with circumcision. Having read them, I made a few findings:

- Many teenage boys and young men struggle with a variety of penis problems, mostly with tight foreskins.
- There is a lot of mis-information and lack of information about circumcision. Many men would not even know what exactly they cut off when a man gets circumcised nor what a circumcised penis looks like.
- Despite all of the foregoing, circumcision is not all that rare and unusual in Hungary.
- Non-medical and non-religious circumcisions are also something not unheard of in Hungary, so I was not a complete fool either when I got it done at 35, without any medical reason.

Reading was soon followed by writing, and I started responding to questions put up in discussion forums, and wrote private e-mails to those who asked about circumcision. In the course of my correspondence I have not only helped many boys and men, but I have also learned a lot. I also got into contact with Dr Ferenc Fekete who started his private men's health clinic in the early 1990s. He is now the most renowned specialist in adult male circumcision in Hungary and does about 120-150 circumcisions per year.

I have also realised from my correspondence that many boys and men do not even understand that they should go to a doctor and that the example of others, of those who have already had the operation, may be crucial for them in taking

the first step. Many of them find me with their questions, and now I often get questions from women whose husband, boyfriend or son has a problem.

The idea of the website is not my own, even though I have been of the view that a popular, though still professional, website could be very useful. A few years ago there was a short-lived trial, which was carried out by a young guy in his mid-20s who got circumcised in 2001, but that site became inactive after a few months. (The said page was revived last year by its owner; however, it has still been quite inactive to date.)

In early autumn 2005, I started to exchange e-mails with a young guy also in his mid-20s, who was up for circumcision that October. He was having it done partly from choice, partly because of a minor tightness. After his circumcision, he asked why not to create a properly done website; if I could supply the contents, he would be happy to do the IT parts, as he was working as a website designer. We started working, and quite soon we came up with the basic concept for the new website. We decided that our website:

- Should be nicely done in terms of graphical display, and should convey the idea of safety and cleanliness, and thus be appealing to the eye, trustworthy and convincing.
- Should be a site which a mother of a toddler boy or a young teenager may look at without any problems. Therefore, despite the fact that it is to be about the male genitalia, there should not be anything which is of direct sexual or pornographic content.
- Should clearly state that we do not give medical advice, so browsing through should not replace a visit to a doctor, even though all information on the page should be accurate and properly verified.

While doing the IT work on our future website, we continued collecting materials, and whenever I discussed circumcision with someone, I always made reference to the page in the making. We were both pleasantly surprised by the reception of the idea, and people always asked about when they should expect the page to be up and running. Once the test version was ready, we showed it to many people, and we got extremely good feedback.

Since we both had jobs, and the home page making was voluntary work, the whole process was quite slow. At one point, we sought help from another 'club member' and another IT specialist who completed the work for some money. (Otherwise, the whole exercise was done on a free of charge basis, except that we have to pay for the ISP to keep up the website.)

After about 18 month of work, we could open the page in August 2007. In the past 14-16 months, the website ([www.korulmeteles.hu](http://www.korulmeteles.hu), all in Hungarian) has proved to be immensely successful. It has also become very clear that this kind of information is very necessary especially as most young people now get their information via the Internet. Such information was not previously available in Hungarian.

There are about 3-5 new circumcisions every month which I help the guys to get through or help them after the operation. I also receive many personal accounts and even photos before and after, which I put onto the website. Honestly, I am very proud of it.

*Andras – Budapest*

[Editor's note: We will be publishing some of the personal accounts in future editions of the newsletter.]

## Denmark And Circumcision

**[In the Editorial, issue 5/2008, it was noted that Denmark may be about to ban circumcision for boys until the age of 15. R.W. responds.]**

**I**n my opinion, Denmark has got it just about right in banning the circumcision of boys until the age of fifteen. I would go even further; and ban circumcision until any boy or man requests it. All males should have the right to determine what happens to their bodies. Religious circumcision is an anachronism and not in keeping with the modern world.

If, or when, a boy decides to have a circumcision, it should be in full knowledge of the facts and not done at someone else's behest. It would be a great help if he was shown photographs of circumcised males with explanations of the different methods of obtaining a result. Personally, I think a circumcised penis looks a lot better than an uncircumcised one, especially when erect, but looks are not the only factor in this subject. Unless there is an urgent medical reason for the operation – let the male decide. The zealots have had their day!

*R.W. – Manchester*

## Tight Foreskin.....?

**Q.** I am 30 and I have a tight foreskin. I am stretching and after 2 weeks I am able to pull the skin when flaccid and hold the same at erection but there is a little discomfort as the skin gets tight and I end up masturbating. I use a lube while doing this. I see that the skin has definitely loosened up a little bit but still when erect it's not coming back. Shall I continue the same process or is there any better one?

**A:** One thing that really helps is to sit in a warm bath and the skin gets softer. Put the forefinger and the one next to it close together on the left hand, and slide the end of the foreskin over those two fingers while you are not erect. If you are erect, you won't be able to do it. Once you slide the end over the two fingers, spread the fingers to stretch the softened end of the foreskin. Don't do it to pain, but just until you can feel the stretching sensation. Do this a few times for several sessions of warm baths and you will find that the foreskin will retract completely on its own when you become erect. Don't force the skin back when it is still too tight, cuz it can get stuck behind the crown of the knob. If the knob starts to swell, that can be a problem.



Why not a shower? Because it's easier to do it sitting and relaxed, and it's easier to keep your gear under warm water to get the skin soft. When the job is all done and the skin slides back, go back to showering.

You have good gear and you are lucky to be natural. I thank my parents that I am too. You will have amazing detail sense of feel in your Love Life and good control because you can feel more of where you are progressing to control stimulation. Always keep the skin covered over the knob when not in use to preserve the high sense of feelings in the knob and the underside of the foreskin.

*From Yahoo! Answers*

## **Wearing It Bare**

**L**ike most uncut males, the masturbation method that I discovered at puberty and used into adulthood was moving the outer foreskin, with the inner foreskin fairly still on the head. I just assumed that jacking off was more difficult for my cut friends due to lack of a foreskin. Wanting to know how they did it and what they felt, I experimented. That's how, long before I started living skinned-back, I learned how to jack myself with the head of my penis bare.

I'd begin by pulling the loose skin all the way to the base and holding it there with the thumb and index finger of my left hand, simulating a circumcised look. With my right hand, I'd then stroke the skin on my shaft, moving it only enough to tug on the head on the backward stroke and not enough to push any over the rim on the forward stroke. I found this tugging on the head without even touching it was as stimulative as rubbing on it. I also found that my hard shaft itself was sensitive to stimulation in a duller but deeper way than the head. The three free fingers of my left hand, meanwhile, were free to play with my balls. When I'd want that additional zing to bring myself off, I'd rev up the tug rate and allow the index finger of my right hand to brush very lightly the sensitive underside of the head. This whole combination can give me a climax that I feel deeper in my internal sexual organs than just in my dick and its root.

For me, this method became the quickest way to jack off. I use it when I feel like raping my horny self to get a badly wanted orgasm as soon as possible. When I'm not as driven, and/or I have time to prolong my experience, I use the traditional method. Sometimes I make such slow, sweet love to the head of my dick and bask in its simple pleasure for so long that I almost don't care whether I orgasm or not. Sometimes when I choose to end a long session without allowing myself to come, my sexual high can last the rest of the day. Hey, I can come any time, but that's something really special! Everybody should try it once in a while. The key is deciding not to go all the way before you even start.

Skipping a few orgasms will not harm your body, so long as you ejaculate semen every week or so to flush out your system. Billions of men have practised tantric sex in India and Taoist sex in China for centuries. In both tantra and the Tao, beneficial forces are believed to accumulate in men during sessions of intercourse in which the male climax or certain of its aspects do not occur. Such men are allowed to come during sex, but the more times they opt not to, the more the

mystical benefits. Unfinished masturbation is a learning tool for those wishing to make their sexual reflexes voluntary in preparation for tantric or Taoist marriage. Neither India nor China seem to have suffered any lack of fertility as a result!

...but I digress. Before adopting the skinned-back lifestyle (only a few months ago), I'd usually do a combo. I'd enjoy the traditional rub for a while until I decided to come, then I'd switch to the bare-head tug to take myself to the more profound orgasm that it would give. Since beginning to wear it bare, I use the bare-tug method more than before. That doesn't mean that I don't roll it forward now and again for the traditional foreskin rub (especially when I'm not going to finish the job). The answer is that you can do it either way. You can use the time that it takes to train your foreskin to stay back to learn how to jack yourself without a foreskin. That way, if the hoped-for foreskin shrinkage happens, you'll still be a happy man with a happy dick.

Since wearing it bare, I have noticed no loss of sensitivity to stimulation. The inner surface of my foreskin was very tender when first exposed. I put up with it, and it very slowly got more used to touching clothes, but it still has a way to go. It was never erotically sensitive anyway, just tender skin. My glans is as sensitive as ever. I'd read that it would dry out, peel off, and toughen. All that happened was an almost unnoticeably slight peel of the epidermis, just one cell layer thick (like a slight case of windburn). That was in the first week. It's the same penis it always was – just bare-headed.

I enjoy nudism, although I'm rather new to it, and I look forward to showing off my new look next summer. That's what this is all about for me. Skinning back is a way to be and feel more naked

*Mike V (from the internet)*

## **But I'm Not Circumcised.....**

**A** Romanian man told me about his induction into the old communist Romanian army 20 years before the Iron Curtain fell. Daniel said his foreskin was short and tended to retract, giving him the appearance of being circumcised. Males in Romania usually were not cut, unless they were Jewish; he was therefore mistaken as a Jew when he was being inducted, totally nude, with about 100 others, none of whom were cut and most of whom joined in his persecution after the fun started.

Daniel said about half the Romanian army medical and clerical staff were females who started harassing him big time, handling his cock and balls roughly and generally taunting him because they thought he was Jewish, few of whom survived in Romania under the Nazis during WW2.

Probably fuelling this persecution, Daniel was not a communist party member, and kept wondering if he would wind up dead as this nude abuse spun out of control. You can imagine his horror at that moment – no titillation at all.

*George, U.S. Army 1962-1963*

## Picture Gallery



## What They Did To Me

I was not circumcised at birth as I was born in Russia, where the practice was unpopular and perhaps even unheard of or even illegal. My family emigrated to the USA when I was 8, and as soon as we got here, the home of the brave and the land of scalpel wielding surgeons willing and able to disfigure young boys, everyone around me started putting on the pressure to go and 'get cut'. I come

from a Jewish home and my natural whole penile status was seen as a mistake, an error that needed to be remedied immediately. Physically, there was absolutely nothing wrong with me, and yet every time I went to the JCC (Jewish community centre) pool and got in the showers, I was made to feel embarrassed or ashamed. For years before it actually happened, circumcision haunted me. My family made jokes about 'the axe' and I, being only 8 or 9, would cry myself to sleep sometimes, shaken by horror. I had nightmares about it. In fact, one of the reasons I let them talk me into it, much later, just before my Bar Mitzvah at the age of 13, was to finally get it over and done with. To rid the spectre floating constantly over my head (no pun intended).

I have since pretty much renounced my Jewish roots, but 6 years ago, when I was much more impressionable, ignorant, and naive, I was going to Hebrew school and kind of digging this whole religion thing. Part of me actually wanted to go through with the 'covenant with god', I wanted to sacrifice whatever necessary to have him on my side, and for the Jewish community to consider me 'really Jewish' and 'really a man'. So I let the rabbi and my father talk me into it. The night before the hospital appointment, I remember having crazy doubts, and then letting my father write the whole thing off as 'just a snip', a routine procedure, like getting a nail clipped.

We get to the hospital, me and another friend in an identical situation (another reason I let myself get talked into this, a good friend of mine was also doing it). This part is a bit difficult for me to think about but I guess I should just get it all out. Skip the initial proceedings and they're strapping me into the surgery bed. Yes, strapping me in, so I can't struggle. They talked me into doing it under local anaesthesia, I'm not sure how...something about money and possible complications. My dad didn't like the idea of me getting drugged up. This part drives me insane. Before any anaesthesia is applied, a female nurse comes up and begins the torturous preparation process. God this is awful, she's got a bottle of antiseptic in one hand and a firm grip on my poor, sensitive glans, which had until then never even seen the light of day. To tell you the truth, I don't think it had even fully separated from my foreskin yet. So here I am, howling like a madman, while this heartless woman is tearing the hell out of my penis, forcibly retracting the skin and dousing the head with abrasive chemicals. To add insult to injury, she not only ignores my complaints but blames it on me! Accusing me of being a dirty uncut unhygienic kid! How would she like it if I pulled out her clit hood and deadened her most sensitive parts with rubbing alcohol! God I think I've been slightly and unwillingly misogynistic ever since.

Anyway let's get to the actual thing of it. The rabbi shows up, the surgeon shows up and they get to work. I get a blindingly painful shot in my scrotum, yes you heard me, let's all wince, another one in the base of my penis, and another one somewhere else, I don't remember. I don't think the anaesthesia fully set in before they started but then again that's what I always think at the dentist's as well. In either case, what the doc called 'not pain but just pressure' amounted to the worst pain I've ever experienced in my life. A whole lot of tearing, screaming, cutting, and sewing up later, I was done and stumbling back to the car. I was

relieved and traumatized at the same time. I hadn't realized that the worst was yet to come.

My exposed glans had been wrapped up in tape, and within two weeks they expected me to take it off. Think about this, a primarily internal organ, which had been kept moist by the body for 13 years, is suddenly exposed to the elements and covered in dry cloth. What do you think happened? It fused. That's what happened. It took me 5 hours in a bloody bathtub to tear the cloth off, one painful millimetre at a time, and with each pull I remember seeing raw bits of my old glans coming apart and floating away. For weeks even a sudden blow of air would hurt. Don't even mention showering or urinating.

For me, that initial pain is hardly the worst of it though. In principle, that's how the glans should be, ultra sensitive. What maddens me is the fact that after all the trauma it underwent, the tearing and bleeding and exposure, it was forced to act in self defence and changed form, became essentially calloused. Forget the foreskin itself, it's important of course, but I realize now that more important to me was its use in keeping the most sensitive organ of my body in its proper state. Every time I look down at my dried up, wrinkled, bumpy glans I'm reminded of what they did to me.

*From [www.circumcisionquotes.com](http://www.circumcisionquotes.com)*

## The Kindest Cut

### How circumcision is the secret weapon in the battle against HIV/Aids

After weeks of waiting, Michael Phiri decided to take matters into his own hands. The 16-year-old from George Compound, a township outside Lusaka, was so anxious to be rid of his foreskin, and so frustrated after being turned away from the circumcision clinic at the local hospital for the third time, that he took a bread knife and did the job himself. The resulting bloody mess had one positive outcome; it sent him straight to the top of the queue for surgery, and he got his operation performed, as an emergency, by the urology specialist Kasonde Bowa. "He had made a good start, with a dorsal cut as far as the rim of the glans, but things had got difficult from there," a smiling Dr Bowa says, with admirable understatement.

As Zambia's leading expert on circumcision, Bowa tells this story to illustrate the soaring demand for the procedure that is sweeping Lusaka and other towns across sub-Saharan Africa, as word spreads of its remarkable preventive power. After 25 years of research and the expenditure of billions of pounds, it turns out that the oldest surgical operation in the world, performed since antiquity, is the best defence we have against HIV/Aids.

In crisp shirt and tie, despite the sweltering heat, Bowa tells me of the benefits of circumcision. We're standing outside his cluttered office at the University Hospital, where the exotic flamboyant trees that pepper this sprawling city shed their vermilion blooms on to the patients waiting in the shade below. Bowa started Zambia's first pilot project offering circumcision as a defence against HIV

in 2004. It was soon overwhelmed. “We were operating three afternoons a week but had such high demand that we were unable to cope. We needed more space and more staff.”

The simple act of removing a man’s foreskin reduces his risk of contracting HIV by about 60 per cent. The reason is that the moist underside of the foreskin is thickly supplied with Langerhans cells, a key route for entry of the virus into the body. Langerhans cells are also present in the glans (head) of the penis, but after circumcision the skin of the glans becomes drier and thicker, denying the virus an easy point of entry. Circumcision, if rolled out across the continent, offers the first real prospect of saving lives by preventing infection on a significant scale. Estimates suggest that if universal circumcision were introduced across sub-Saharan Africa, it could prevent 300,000 deaths in the next 10 years and three million deaths over the next 20 years. It is sometimes described as a “surgical vaccine” – with good reason.

Zambia has been among the first to offer the operation and pilot new services, and other countries are following its lead. Yet, globally, only 1 per cent of total AIDS funding is earmarked for male circumcision. Progress towards delivering the single most effective preventive measure yet discovered against the pandemic is agonisingly slow.

Across the road from Bowa’s office, what is believed to be the world’s first dedicated circumcision clinic outside a hospital or research programme is doing brisk business. Launched last year by the international charity, the *Society for Family Health*, following Bowa’s lead, the New Start centre is sited in an anonymous, dusty building behind the YWCA. Its appearance gives no hint of the pioneering work carried out within. This is deliberate; the charity fears that the service would be besieged if it were more widely advertised.

As I watch, John Banda, a shopkeeper, aged 29, climbs on to the table in one of the three operating rooms, clutching his green surgical gown and grimacing at the ceiling as Aggie Mahule, one of half a dozen nurses and clinical officers given two weeks’ training to carry out the procedure, injects local anaesthetic into the base of his penis. “Relax and feel at home,” says Aggie kindly as she swabs the surgical area with disinfecting iodine. John, fearful of the pain and, possibly, for his manhood, makes no response.

Next door in the ‘recovery’ room, Richard Chimuka, 31, a computer trainee wearing a black designer shirt and low-slung jeans, sits with his legs apart, looking relaxed and pleased that, for him, the operation is over. The surgery was over in 12 minutes – and no, it wasn’t painful, he says. Does it bother him that the operation was performed by two women? “Actually, I felt excited about it – like putting my painting in a gallery”, came the smooth reply.

It’s not difficult to persuade Zambians of the virtues of circumcision. It is already practised traditionally by the Luvale and certain other tribes in the North-Western Province, where the HIV rate is half that in the rest of the country (6.9 per cent of the population in the region is infected, compared with 14.3 per cent for the country as a whole). In Lusaka, one in five of the adult population is infected

(20.8 per cent), one of the highest rates in the world. Surveys have shown wide acceptance of the procedure and increasing interest among parents wanting the operation for their children.

More than 1,500 men have had the operation since the New Start clinic opened in August 2007, and more have been circumcised by mobile surgical teams that visit hospitals in Kafue and Kabulonga, an hour's drive from the city. This is good for them, but in the context of the country's epidemic – 100,000 new infections a year – it is like using a water pistol against a forest fire. In a week spent in Lusaka, I searched for any agency, charity or expert opposed to rolling out circumcision – and I could not find one. Among the dozen organisations I visit, all voice their support – only the level of enthusiasm varied.

“It is the most important defence against the disease that we have,” says Mannasseh Phiri, a GP and Zambia's best-known AIDS activist. “The trials have shown that it really does work, it is relatively easy to do and it is a lot cheaper than putting people on drug treatment.” Jeffrey Stringer, director of the *Centre for Infectious Diseases Research* in Lusaka, which is piloting a neo-natal circumcision service, tells me: “If we had a vaccine as effective as this, we would be jumping up and down in the streets. A 60 per cent protective effect is fantastic. It is one of the most effective preventive strategies we have.” Yet, as Steve Gesuale, head of the circumcision project at the *Society for Family Health*, points out, there is “very little funding from donors, very little government support and very little going on”.

Despite the lack of public support, the message about the benefits of the operation is reaching all levels of society. In Garden Compound, the densely crowded township close to the centre of Lusaka, the tiny Viro Clinic – “We prolong and save” reads the legend above the door – displays a poster in the window advertising male circumcision. Outside, the faded red and blue plasterwork is crumbling. Inside, the three cramped rooms contain a pot plant reaching almost to the roof, an examination couch doubling as the operating table, and a small fridge. Beside it, on a table, a teddy bear is propped against a broken clock, along with red plastic roses. Violet, the smiling receptionist, says demand for circumcisions has increased. “There are more in the winter [June and July] and in the evenings and early mornings when it is cooler. The wound heals better”, she says.

Interest in circumcision has spread beyond the capital, to the country's vast hinterland, according to Karen Sichinga, chief executive of the powerful *Churches Health Association of Zambia*, which runs one-third of all Zambia's hospitals, mainly in rural areas. “The demand is increasing in our mission health facilities”, she says. For Sichinga, the operation does not carry the moral dilemmas involved in handing out condoms or preaching abstinence, an important factor for a faith-based charity. But she, like some others, is cautious of treating it as the silver bullet, the “answer” to AIDS that has been so desperately sought for so long. “Science has proved that the benefits outweigh the disadvantages”, she said. “But you have to work hard to persuade people. Over 90 per cent of Zambia is Christian, not Islamic.”

From township clinics to mission hospitals in the furthest reaches of the country – all such facilities will need to be recruited if the target of 500,000 circumcisions

in five years, notionally set by the *Society for Family Health*, is to be achieved. Even that represents only half the number required to curb Zambia's HIV infection rate, calculated on the basis that four operations are needed to prevent one infection. Some experts, including Bowa, warn that even if the money is available, the vast increase in staff and facilities needed will take time to deliver. Others are more optimistic. Hospitals are already being used at weekends, with existing staff paid extra, and discussions are under way to hold circumcision clinics in the evenings. High-risk groups could be targeted first – the military, the police. It is not as simple as rolling out a vaccination programme, but there is already experience with cataract surgery, which is provided to hundreds of thousands of people across the world by staff with basic training, and circumcision providers from several countries in Africa have travelled to India to learn from the cataract experience.

*A shortened version of an article by Jeremy Laurance, The Independent*

## **Bris Avrohom**

**B**ris Avrohom is an organisation founded in 1979 to help Soviet immigrants assimilate into American life and lead them back to their Jewish roots. Today the organization has branches in Jersey City, Hillside, Old Bridge, Brooklyn, N.Y., Minnesota, Toronto and Ukraine.

*Bris Avrohom*, which means 'covenant of Abraham', provides financial and social support to newly immigrated Russian Jews, as well as classes and literature to help them reconnect with their history and customs. One of the most significant services provided by *Bris Avrohom* is the re-creation of Jewish customs and celebrations that immigrating Jews missed while living in their home countries. The services include performing circumcisions, or brissin, for babies and men who were never circumcised – the oldest so far was 75.

## **Law Fails To Reduce Number Of Botched Circumcisions**

**S**ix years after a law was brought in to try to stop circumcisions being performed outside of the Swedish health system, it is being estimated that 2000 boys a year are now being given the operation unlawfully. The National Board of Health and Welfare is blaming a lack of resources and poor information and is warning that many boys are suffering serious complications after the surgery.

It is now looking into ways to reduce the number of those undergoing the procedure illegally and says one problem is that many Muslims say they are met with suspicion when they arrange circumcisions in hospitals for their sons. The newspaper *Svenska Dagbladet* reports that only eight of Sweden's twenty county councils, which run local health services, offer the operation if it is solely for religious reasons.

*From Swedish Radio*