

## Evaluation of Non-Therapeutic Circumcision by Academic Medical Professionals

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### Abstract

In this study, our aim was to compare the current consensus circumcision approach with a survey given to academic medical professionals on circumcision to of male children in a country like Turkey with increased Muslim population. In Cologne district, Germany, a regional appellate court prohibited non-therapeutic circumcision on June 26, 2012. The court defined non-therapeutic circumcision as a violation of a child's bodily integrity and a detriment to the child's well-being. Moreover, the district court reported that circumcision done without stringent consent and is deemed a similar act to female genital mutilation. Non-therapeutic circumcision that is performed as a religiously, morally, or culturally motivated rite is not considered a bodily assault or psychologically traumatic act against a child. In addition, it is accepted as medically beneficial and is recommended by a high proportion of medical professionals in a survey that we conducted in Inonu University Medical Faculty in Turkey. According to this questionnaire, the percentage of medical professionals who believed that male circumcision is medically detrimental and medically safe was 2.1% (n:1) and 87.2% (n:41) respectively. Allowing non-therapeutic circumcision would have its benefits, including parental consent for families with the intent to decide on circumcision for religious, public, and moral motives. Legal prohibition of circumcision may prompt operations under inappropriate conditions, which might be destructive for children.

**Keywords:** Non-therapeutic circumcision, male child, academic medical professional

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## **Aim**

The topic of circumcision has spawned widespread debate in various countries. Previous literature clearly demonstrates that some groups accept circumcision as a negative procedure while some others see it in a more favorable light. In this study, we aimed to compare the previous approaches documented in the literature with the results of a survey we conducted among the academic medical professionals on the circumcision of male children in Turkey, a predominantly Muslim country.

## **Materials and Methods**

We conducted our survey on several of the Inonu University Medical Faculty. These faculty members have provided medical education in Malatya in the far east region of Anatolia as well as supported healthcare in Turgut Ozal Medical Centre.

Permission was obtained from the deanship of Inonu University Medical Faculty to conduct the survey regarding the evaluation of circumcision of male children by the medical doctors.

Out of 176 e-mail addresses (which could only be logged in via personal passwords and registered for the medical doctors working at Inonu University July 18, 2013), 159 e-mail addresses were obtained for the survey from the Inonu University web portal page. The survey about the circumcision of male children was sent to the academic medical professionals via e-mail.

The survey was prepared online and a link was sent in a corresponding e-mail to be answered by the relevant targets. After 3 months and no change in participant number, the survey was closed on November 7, 2013 for the assessment of the results.

The survey encompassed 2 sections and 20 questions in total. The first 5 questions regarded demographical data (age, sex, working period, religious views, having male children) and other 15 questions were used to reflect personal and professional views (benefits/harms of circumcision, appropriate age, whether it is recommended or not, etc) about circumcision.

## Introduction

Contradicting views have been demonstrated on the application of circumcision and the procedure because of religious motives and alleged medical benefits. On the other hand, the claims that the application is unethical and violates human and child rights constitute an ongoing debate among the scientific and civil community.

One of every 3 males get circumcision. The history of circumcision lies behind the old paleolithic age (BC 38000-11000). The report published in 2007 by the Centers for Disease Control and Prevention (CDC) in the USA stated that circumcision applied, especially on infant male children, was medically beneficial.<sup>1</sup> Besides, the complication rate that has arisen from infant circumcision has been reported as low as 0.2-0.6% in a study held by Morris et al.<sup>1-3</sup>

One source describes negative comments on circumcision as follows: "Non-therapeutic circumcision violates a boy's right to bodily integrity, the medically unadvantageous application has possible negative affect for the psychosexual development of circumcised boys due to substantial loss of highly erogenous circumcised tissue."<sup>4</sup> However, in some publications the effects of circumcision on sexual function was considered as debatable.<sup>5</sup>

Circumcision contradicts with the four main documents (Universal Declaration of Human Rights, the Convention on the Rights of the Child, the International Covenant on Civil and Political Rights, the Convention Against Torture) regarding the human rights.<sup>6</sup>

Circumcision could be justifiable as a normal procedure on grounds of parental rights and religious beliefs but with regard to someone's bodily integrity, it is considered as debatable in some literature. Legislation of banning the circumcision of the German government is known to set off from this point of view.<sup>4,6</sup>

Likewise in some fundamentalist Christian sect with the sinister rite of flagellation or whipping the all newborns, circumcision is seen as violation against children.

On the other hand, some people defend the idea that circumcision should be seen as a procedure assuring good hygiene, protecting from infections and preventing sexually transmitted diseases like HIV/AIDS.<sup>4</sup>

Although non-therapeutic circumcision is known to prevent urinary tract infections, AIDS, syphilis, HPV infection and penis cancer, medical authorities do not consider it as a necessary operation. It is recommended that a child be given the option to decide for themselves upon reaching adulthood.<sup>6,7-15</sup>

In a report published by Centers for Disease Control and Prevention (CDC) in 2007, diseases other than HIV/AIDS including urinary tract infection, phimosis, syphilis, Herpes, HPV infection, chancroid, penile cancer could be prevented by circumcision.<sup>1,16,17</sup>

Circumcision has also been documented to provide better hygiene and protect from infections, prevent sexually-transmitted diseases like HIV/AIDS as well as penile cancer by the American Academy of Pediatrics (AAP).<sup>17</sup>

Research showed that in African countries HIV/AIDS is detected 4 folds more in uncircumcised males in comparison to circumcised ones. This fact increased the rate of circumcision in these countries.<sup>17-22</sup>

World Health Organisation (WHO), United Nations (UN) and National Institutes of Health (NIH) and some African countries accepted circumcision procedure due to its protective effect against HIV/AIDS.<sup>16</sup>

The literature on circumcision has clearly revealed that authors have mixed views regarding the procedure and application. Due to the ongoing debate about the use of circumcision in medical practice, we conducted a research strategy to determine the overall sentiment of circumcision from medical professionals in the predominantly Muslim country of Turkey.

### **Non-Therapeutic Circumcision Application to Male Children and Ethics**

There is a clear difference between philosophical ethical approaches (secular) and post philosophical assessments in terms of philosophical basis of evaluating the circumcision.<sup>23</sup>

Ethical considerations belong to the post-philosophical period and evaluate circumcision within a framework of important titles including autonomy, informed consent, individual right, bodily integrity, free religious beliefs, and protection of the defenseless.<sup>23</sup>

Current ethical evaluations of infant male children's circumcision represent the effects of philosophical and post-philosophical periods.<sup>23</sup>

In Germany, the Cologne district court prohibited non-therapeutic circumcision in June 26, 2012. The court defined non-therapeutic circumcision as a violation of bodily integrity and a detrimental application to the children. Moreover, the court considered circumcision a procedure performed without informed consent from the male children and equivalent to female genital mutilation.<sup>5</sup>

Legitimate prohibition of circumcision of male children in Germany would promote secret practice of the procedure under inappropriate conditions which might cause devastating medical complications in the children.<sup>5</sup>

Particularly in European countries, circumcision is seen as a traumatic procedure assaulting bodily integrity and could turn into a risky religious rite if performed under non-medical settings.<sup>5,6</sup>

Circumcision is accepted as a traumatic process according to The Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV) published by the American Psychiatric Association. It is proposed that pain occurring during the procedure and the post-operational feeling of absence might induce trauma.<sup>24</sup>

Feinberg (philosopher) and Davis (ethicist) considered non-therapeutic circumcision as a violation of rights on the grounds of human rights and ethical principles. According to Feinberg and Davis, the harm that results from circumcision is remarkable and beyond the arguments of parental consent, religious freedom, and court decisions. They also annotated that an individual might disapprove the circumcision which was practiced under the parental consent after reaching the adulthood.<sup>25</sup>

Ethical comments regarding the circumcision are usually within the framework of 'autonomy' principle.<sup>12,26</sup> Circumcision performed without informed consent, violation of bodily integrity, and the traumatic nature of the process brings up the ethical arguments based on the autonomy principle.

However, when the circumcision performed after parental consent but without informed consent is evaluated according to the other important ethical principle 'principle of beneficence', it does not conflict with the principle owing to the fact that it might serve for a good cause like vaccinations in the childhood.<sup>27-29</sup>

## Results

Throughout the study, an e-mail including the link to a questionnaire was sent to 159 academic medical professional at Inonu University. The gender question was answered as male by 70.2% (n:40) and as female by 15.8% (n:9) while 14% (n:8) did not disclose any information.

The question regarding the religious beliefs ('Do you have any religious beliefs?') was replied as Islam by 82.5% (n:47), as negative 3.5% (n:2) and 14% (n:8) did not disclose the information.

Of the academic medical professionals that completed the survey, 59.6% (n:34) had male children and 24.6% (n:14) did not have male children. Some 15.8% (n:9) preferred not to answer the question.

The percentage of academics who thought that circumcision was medically advantageous and not advantageous was 89.4% (n:42), 4.3% (n:2), respectively. This question was not responded by 6.4% (n:3) of the faculty members.

The percentage of academics who thought that circumcision was medically detrimental was 2.1% (n:1), while 87.2% (n:41) thought it was not detrimental. This question was not answered by 10.6% (n:5) of the pollees.

It was determined that 59.6% (n:28) found circumcision at neonatal age as 'appropriate'. Other pollees thought it was inconvenient 21.3% (n:10), while 8.5% (n:4) did not have any idea, and 10.6% (n:5) did not answer this question.

53.2% (n:25) thought the most suitable age for circumcision was 0-2 ages, 4.3% (n:2) thought >2-4 ages, 14.9% (n:7) thought >4-6 ages, 21.3% (n:10) thought >6 ages, 2.1% (n:1) did not have any idea, and 4.3% (n:2) did not answer this question.

The percentage of academic medical professionals who shared the idea that circumcision is a necessary procedure performed for religious/social/moral motives was 87.2% (n:41), 6.4% (n:3) thought the opposite while 6.4% (n:3) did not answer the question.

Of the pollees, 89.4% (n:42) recommended circumcision as a medical procedure, 2.1% (n:1) did not recommend, 2.1% (n:1) did not have any idea while 6.4% (n:3) did not answer the question.

79.5% (n:35) mentioned that even circumcision was prohibited in a country of residency they would find a way to have circumcision due to their religious/social/moral motives while 9.1% (n:4) would not, and 9.1% (n:4) did not share any idea with 2.3% (n:1) did not answer the question.

The percentage of academics who believed circumcision has traumatic effects on children was 20.5% (n:9), 75% (n:33) did not believe while 4.5% (n:2) did not have any idea.

6.8% (n:3) encountered psychologically affected child due to circumcision during their professional career, 86.4% (n:38) did not while 6.8% (n:3) did not have any idea.

The percentage of academics seeing circumcision as a violation against male children was 2.3% (n:1), 95.5% (n:42) was not while 2.3% (n:1) did not answer the question.

The percentage of academics who accepted circumcison performed without informed consent but only with parental consent, thereby resulting in violation of human rights, child rights and ethical principles was 6.8% (n:3) while 81.8% (n:36) thought the opposite; 9.1% (n:4) did not have any idea and 2.3% (n:1) did not answer the question.

## Discussion

According to the survey we conducted among the academic medical professionals, 82.5% (n:47) of the medical professionals that believe in Islam accept circumcision as beneficial and highly recommended it.

According to these findings, 89.4% (n:42) believed circumcision has medical advantages while 2.1% (n:1) thought it was detrimental. 89.4% (n:42) asserted to recommend circumcision as a medical professional. Besides, the percentage of academics who thought circumcision was a necessary procedure that needed to be performed for religious/social/ moral motives was 87.2% (n:41). It could be concluded from our results that the positive views on circumcision of male children was predominant.

According to our study, the percentage of academics who believed in the existence of psychologically traumatic effects of circumcision on children was 20.5% (n:9), while 75% (n:33) thought the opposite or did not have any idea 4.5% (n:2). On the contrary, not having circumcision could induce psychological trauma in children in Turkey. In their study Yavuz et al. emphasized that considering the attribution of positive meanings such as 'being a male or grown-up' to circumcision, the application of the procedure at ages appropriate for perceiving the outcomes of circumcision and feeling different from others among a circumcised population, male children would less likely to be negatively affected from this cultural rite.<sup>30</sup>

A study performed in Sweden revealed that circumcision in children did not result in severe psychological conditions.<sup>31</sup> According to our study, the percentage of the academics confronted who believed circumcision psychologically affected children was 6.8% (n:3) while 86.4% (n:38) did not see any cases or did not have any idea 6.8% (n:3).

The percentage of academics accepting circumcision as a violation against children was 2.3% (n:1), while 95.5% (n:42) did not agree with this or did not answer the question 2.3% (n:1). A study conducted among African-American families revealed that circumcision at young age was thought to be beneficial by 96% of the participants.<sup>32</sup>

There are currently various vaccinations starting in the early infancy. These vaccinations could be painful, may result in infections, and may be applied without any informed consent from the individual. However, these became widespread because both medical authorities and families ultimately believe in their benefits.

According to a research done in African countries, 81% of women require their children to get circumcision.<sup>33</sup> Although circumcision in India is not a traditional procedure, 78% of females request circumcision of their male children.<sup>34</sup>

In our survey, we found that the percentage of academics who believed that circumcision performed without informed consent and parental motives as a violation of human rights, child rights, and ethical principles was 6.8% (n:3). However, 81.8% (n:36) thought the opposite, 9.1% (n:4) did not have any idea, and 2.3% (n:1) did not answer the question.

There is a vast difference between Europe and America in the opinions of the circumcision procedure. In the USA, 1.4 million newborns are circumcised each year while, in Europe this occurs occasionally. The percentage of circumcision performed for its medical benefits rather than for religious motives is 60%. In European countries circumcision is considered as unnecessary and expensive operation.<sup>17,24</sup>

Circumcision opponents claim that the procedure should be avoided due to the pain caused during the procedure. However, since 1980s local anesthetics have been used for circumcision procedures.<sup>24,35</sup>

In a study published by Yavuz et al., the complications might arise from circumcision were listed as pain, bleeding, swelling, and insufficient skin removal.<sup>30</sup> Ergin published that the most common complications seen after circumcision procedures was bleeding with a percentage of 1.1% (2 patients) and infections at 1.1% (2 patients).<sup>36</sup>

In Germany Cologne district court prohibited non-therapeutic circumcision in June 26, 2012. The court defined non-therapeutic circumcision as a violation of bodily integrity and a detrimental application to the children.<sup>5</sup>

Some invasive applications including piercing and tattooing could be applied to everyone from child age in secular countries. These applications are applied for purely aesthetic reasons and there are no legal regulations regarding these in the democratic countries.<sup>5,25</sup> When these applications were compared to circumcision, it could be reasoned that the legitimate prohibition of circumcision should be reevaluated.

## **Conclusion**

In particular, the literature opposing the circumcision is recommended to systematically review the subject again. These studies evidently represented personal experiences as well as used cross-sectional methods. An objective and meticulous reevaluation of the conclusions drawn from the brutal criticism about circumcision by the authors could yield positive outcomes.

Moreover, the approval of a decision taken by a court or a committee would be partial. A prohibitive approach would lead to the practice of circumcision, which has been applied for thousand years, under inappropriate conditions and this might result in detrimental medical conditions in children.

Belief in the medical advantages of circumcision would ease the decision making for a family who would normally intend to get circumcision for religious, social, and moral motives. In any case, it is less likely to see a child exposed to damage by own parents. Moreover, most parents would not even hesitate to donate own organs or tissues to their children in cases of medical necessity.

In a survey we conducted among the academic medical professionals in Inonu University in Turkey, we showed that non-therapeutic circumcision which is performed for religious, social, and moral motives is accepted as medically beneficial and is recommended by medical professionals. In addition, a high proportion of medical professionals felt that circumcision was not thought to be a cause of psychological trauma or considered a violation against children. Moreover, circumcision performed after parental consent but without informed consent was not considered as a compulsion or violation against human rights, child rights or ethical principles in our study. Therefore, it would be ideal for the authors with the strong criticism of circumcision to reconsider the topic objectively.

**Table 1: The Results Regarding the Recommendation for Circumcision from the Academic Healthcare Professionals**

	Academic Medical Professionals	
	n	%
Recommending circumcision	42	89.4
Not recommending circumcision	1	2.1
Having no idea	1	2.1
Did not answer the question	3	6.4
<b>Total</b>	47	100

**Table 2: The Evaluation of the Violation Criteria of Circumcision by the Academic Medical Professionals**

	Academic Medical Professionals	
	n	%
Seeing circumcision as a violation	1	2.3
Not seeing circumcision as a violation	42	95.5
Did not answer the question	1	2.3
<b>Total</b>	44	100

**Table3: The Evaluation of Circumcision of Male Children in Terms of Human Rights/Child Rights/Ethical Principles by the Academic Medical Professionals**

Violation against human rights/child rights	Academic Medical Professionals	
	n	%
Yes	3	6.8
No	36	81.8
No idea	4	9.1
Did not answer the question	1	2.3
<b>Total</b>	44	100

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