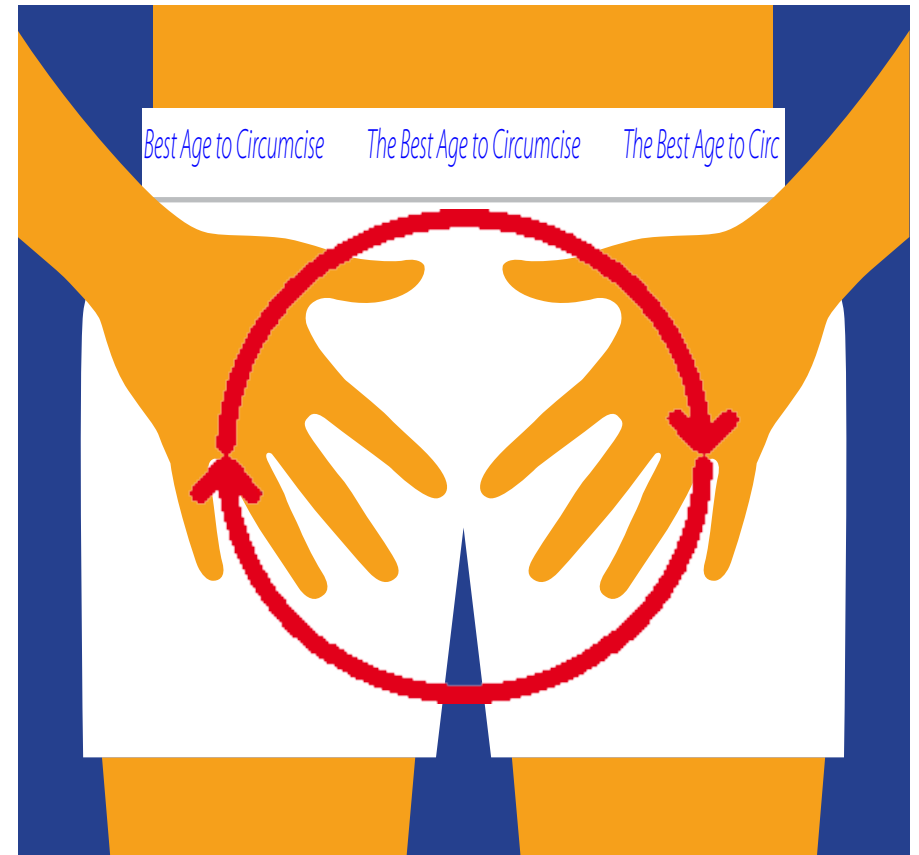


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The Best Age to Circumcise



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The Circumcision Helpdesk™ Web Sites
<http://www.circumcisionhelpdesk.org>
<http://www.circinfo.com>

Professor Dr Morris's Web Site
<http://www.circinfo.net>

The Circumcision Facts Web Site
<http://www.circfacts.org>

The Circlist Web Site
<http://www.circlist.com>

Recommended Reading

Contra-Indications on the Circlist web site

<http://www.circlist.com/glossarymale/m-anatdetail/contraind.html>

For all of the following, please visit the Files section of the Inter-Circ web site and find the relevant folder. The Files section of the web site is at:

<https://groups.io/g/inter-circ/files>

The files may also be downloaded from the Circumcision HelpDesk site at:

<http://circinfo.com/publications.php>

Circumcision Consent – An Introductory Guide

[Circumcision Consent](#)

Preparation for Infant or Childhood Circumcision

[Preparation for Infant or Childhood Circumcision](#)

Post Operative Care for Infant or Childhood Circumcision A Parent's Guide

[Infant or Child Post-Op Circumcision Care](#)

A Boy's Guide to His Own Care for a New Circumcision

[Boy's Own Guide \(for 9-12 year olds\)](#)

Preparation for a Teen or Adult Circumcision

[Preparation for a Teen or Adult Circumcision](#)

Post Operative Care for a Teen or Adult Circumcision

[Adult or Teen Post-Op Circumcision Care](#)

A Glossary of Terms Relating to Circumcision and the Genital Organs

[Glossary of Terms](#)

Please note that some of the above booklets may also be available in Spanish, but these are usually older versions than the English ones.

Recommended Links

Inter-Circ is not the only publisher of reliable information regarding circumcision. The following sites are recommended as they are based on medically correct information. Inter-Circ has no control over the content of external sites and does not vouch for their accuracy or continued availability.

Inter-Circ: The International Circumcision Forum

<https://groups.io/g/inter-circ>

The Best Age to Circumcise

Authors

Inter-Circ Moderation Team

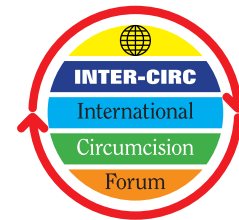
in conjunction with The Circumcision Helpdesk™

Medical Adviser

John Murray M.D.

Third Edition

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Inter-Circ: The International Circumcision Forum

is a volunteer-run pro-circumcision group. The purpose of the group is to make known the benefits of circumcision, to debate topical issues related to the subject and to offer advice both pre- and post-circumcision.

The Inter-Circ forum is located at:

<https://groups.io/g/inter-circ>

Disclaimer

Whilst every effort has been made to ensure the accuracy of the information contained within this publication, it is intended as a guide only and not as a source of complete or totally indisputable information.

The contents of this publication are not to be construed as 'medical advice', for which you must consult a registered medical practitioner; nor as 'legal advice', for which you must consult a qualified legal professional.

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Overall Summary

All conscientious parents should consider carefully the best age for the circumcision of their sons. This consideration needs to start as soon as they are aware that they will be having a boy.

The timing of some circumcisions may be dictated by medical need or by religious and cultural requirements in which case 'best age' is as soon as these become necessary.

The best windows of opportunity for elective circumcision prior to adulthood occur:

- Between 8 days and 3 months
- At the start of puberty (boundary between Tanner stages 1 and 2)
- At the change of school from primary to secondary

If circumcision is performed before 2 years old the boy is unlikely to have any memory of the surgery, but will do so if done after that age.

Infants do not usually require stitches (thus simplifying the operation) and they heal faster than older boys or adults.

Costs generally rise after early infancy and again at puberty and, more steeply, for adults.

Early circumcision avoids any legal uncertainties as to whether parents can insist on it being performed or whether a boy can refuse the operation, even if essential to cure current problems.

Circumcision performed after the first year doesn't provide the same reduction in risk of Urinary Tract Infection (UTI) afforded by neonatal or early infancy circumcision.

The disadvantages are greatest between the ages of 3 and 9. At all other ages, the advantages greatly outweigh them.

Where a boy has started regular schooling it may be best to slightly delay non-urgent circumcision to the next main holiday (e.g. Christmas, Easter or Summer) to avoid/reduce absence during healing. Secondary school boys take longer to heal and are best done in the longer Summer holiday.

Overall, the earlier a circumcision is performed the greater the total benefits and therefore performing it shortly after birth must be considered the primary time of choice unless over-ridden by specific religious or cultural requirements.

- Circumcision leaves a scar, prominently visible unless the circumcision is a very low one that places the scar close to the glans rim.
- The man will most likely have learnt to use his foreskin for masturbation and circumcision will necessitate him learning new masturbation methods.
- A major consideration for adult men is that if left until it becomes medically essential (perhaps through phimosis, scarring or persistent inflammation) the necessity may dictate the tightness and positioning of the final circumcision, rather than this being able to be chosen by the patient himself.
- Surgical complexity and healing time increase when one becomes an adult. Additionally the 'down time' during healing, in which some activities (including sex) are contra-indicated, can restrict one's lifestyle for several weeks.
- Leaving things until after sexual debut seriously eats into the long-term benefits.
- Costs inevitably increase, being typically 5 times those for an infant circumcision.

Advanced Years – 60 years and over

Advantages:

- There are no advantages in deliberately leaving circumcision until old age.
- In the final years of life, many men require assistance with personal care such as bathing. Especially in cases of severe dementia, circumcision may be the only practical way of maintaining genital hygiene. However, it would be much easier if the patient had been circumcised earlier in life!
- Being circumcised makes cystoscopy and the use of a catheter much easier for both doctor and patient. Both tend to become more necessary in this age group.

Disadvantages:

- Surgery of any sort can be somewhat more risky in older patients and healing time can sometimes be prolonged. However, provided only local anaesthetic is used, this risk is still very low.

Introduction

There has been a lot of discussion in the various circumcision related groups on the Internet regarding the best age at which to circumcise. This booklet aims to give some guidance as to the advantages and disadvantages of performing the circumcision at various ages and for certain conditions.

Circumcision can be carried out at any age from immediately after birth to extreme old age. This booklet covers all ages but primarily concerns the circumcision of boys and teenagers – in which age range parents have the prime responsibility for determining, and giving consent to, any form of medical treatment for their sons.

We will first consider some general matters affecting all, or most, ages and then consider age specific matters.

Parental Responsibility

Parents have a legal and moral responsibility to care for the health, wellbeing and education of their children until they attain an age and stage of development at which they can take responsibility for themselves.

Circumcision, like vaccination, permanently changes a boy's body but parents have a right to make such a decision on behalf of the boy because it is proven to have both long-term and short-term benefits, some of which are lost if delayed until the boy can decide for himself.

Age of Majority and Age of Medical Consent

Different countries (and in some cases different States/Provinces within the same country) have varying rules about the age at which one legally becomes an adult although in most places this is now at age 18.

There may be a different, younger, age at which minors nevertheless acquire complete responsibility for their own medical treatment (eg at 16 in the UK).

A right to refuse optional medical treatment, such as circumcision, may arise at an even earlier age than full self-responsibility, as a matter of law; in recognition of 'Competence'; or the local perception of medical ethics.

In some cases there may also be a 'grey area' in which a parent may be able to insist on a particular treatment but cannot veto a treatment that the young person chooses.

Circumcision in infancy or early childhood (before puberty) overcomes all possible legal uncertainties.

More information on Consent can be found in a separate booklet obtainable from the files section of the Inter-Circ or Circumcision HelpDesk web sites.

Medical Necessity

Irrespective of any potential disadvantages concerning a particular age, if a medical necessity arises then clearly the boy must be circumcised at that time. An example of such medical necessity, which could require circumcision within the first few weeks after birth, is severe phimosis causing obstruction of urine flow. Another is phimosis occurring during puberty which prevents proper daily hygiene,

There is also a very reasonable school of thought that, should a boy have to undergo surgery for some other condition, then circumcision at the same time will save the possibility of another surgical session for the boy. This is particularly true if the essential surgery is relatively minor but nevertheless requires general anaesthesia (e.g. tonsilectomy – so called ‘topping and tailing’).

Medical Contra-Indications

There are a few medical conditions in which circumcision is contra-indicated, or must be delayed until the boy is older. Of particular concern when considering neonatal circumcision are:

Premature Birth – Circumcision normally needs to be delayed until the boy has reached the point at which he would have been born at full term, and is thriving.

Failure to Thrive – A boy who is failing to thrive should not be circumcised until he has exceeded birth weight and is consistently putting on weight.

Hypospadias – This is a condition in which the meatus (piss slit) is displaced from its normal location at the end of the glans. Circumcision should not be performed until a paediatric urologist has assessed the condition, since the foreskin is usually required for any reconstruction.

Haemophilia – This hereditary bleeding disorder can prove fatal during any surgery, especially on an infant. If there is a history of haemophilia in the family then circumcision should not normally be carried out. In some cases it can, however, be done by laser techniques once the boy is older and

Adult – 18 (16) years and over (see page 3 regarding age of consent)

Adult circumcision will most likely be carried out either when the man decides that he wishes to be circumcised (for cultural reasons, a change of religious faith, to avoid possible future problems, as a lifestyle choice, or to satisfy a long-standing desire to be circumcised without parental involvement) or when a medical necessity, such as phimosis, dictates it.

Advantages:

- From the age of 18 (16 in Britain and some other countries) a man has full say as to whether or not he wants his penis circumcised: the consent of parents or guardians is definitely no longer required. They don't even have to know it has been performed.
- It can be easier for the surgeon to achieve the sort of cosmetic result desired by the patient (tightness and scar line positioning) when the penis is fully grown. However, an adult circumcision will never look quite the same as one done in infancy or early childhood.
- The foreskin can be used in masturbation for as long as the man prefers an uncircumcised penis.
- Circumcision may help to improve self-image as ‘a grown man’, and no longer ‘a kid with a foreskin’. The presence of an evident scar-line may contribute to this.
- Circumcision will probably result in better staying power in sexual intercourse and greater satisfaction for his partner.
- The health-promoting advantages of circumcision, for both himself and his partner, gain greater importance.
- With experiments in various sexual techniques, the hygienic advantages of circumcision, for both himself and his partner, are more important.
- He can accurately compare pre- and post-circumcision sensations during sex.
- Since the choice was entirely his own, he is unlikely to ever regret being circumcised.

Disadvantages:

- The glans has grown through puberty restricted by the foreskin, so it will never be as plump and flared as that on a penis circumcised earlier in life.

- The hygienic and health-promoting advantages of circumcision begin to have greater significance. The lad can be taught that circumcision helps with the bodily changes of adolescence, including the greater need for cleanliness.
- Circumcision can be promoted as a 'rite of passage' from 'boy' to 'man'.
- Circumcision can be explained as enabling his full sexual potential.
- He has more say in whether or not he wants to be circumcised, and medics will normally need to take his wishes into account.

Disadvantages:

- Interest in his sexual equipment is high, so the advantages of circumcision must be explained particularly convincingly and in detail.
- The boy will most likely have learnt to use his foreskin for masturbation and may resent losing it, which will necessitate him learning new masturbation methods.
- The whole matter is potentially much more embarrassing for the boy as it requires intimate examination at a time in his life when he is becoming more private.
- Circumcision will probably leave a well defined scar, unless the cut line is very low, with the scar at the coronal sulcus (where it will usually be invisible).
- The more powerful and frequent erections of adolescence may prolong the healing time and make it more uncomfortable.
- There will be significantly increased limitations on his activities during the healing process.
- The glans will not have been able to grow during puberty without restriction from the foreskin, and therefore will not be as bulbous as on a penis circumcised earlier in life, although sometimes there is further glans growth, especially if circumcision is done at the lower end of this age range.
- Parental authority to give consent is reduced by the duty of medics to consider the lad's wishes in accordance with the principle of 'Competence'. If circumcision is not voluntarily chosen, he may refuse it.

could tolerate loss of some blood. The advice of a haematologist should always be sought beforehand.

Ambiguous Genitalia – Circumcision should be delayed until it is certain that the child is, and will be brought up as, a boy.

Some additional contra-indications can be found on the Circlist web site at <http://www.circlist.com/glossarymale/m-anatdetail/contraind.html>

Religious or Cultural Requirements

Some religions (eg Judaism) and some cultural groups mandate circumcision at a particular age or stage of development. Except in an emergency, these religious or cultural requirements should always be complied with irrespective of other guidance regarding the particular age.

Where it is only required that circumcision be performed before a certain age or development point is reached (as in most branches of Islam which simply require circumcision before puberty), then the advice herein regarding the advantages and disadvantages of certain ages should be followed as far as possible.

Boy's Own Request

Except as noted later under 'Siblings' in respect of religious/cultural circumcision, if a boy requests circumcision then his parents should check that he genuinely understands what circumcision involves. Assuming that he does, and has freely requested it for himself, then it should be done as soon as possible whatever his age. If it is to be delayed, e.g. to the next major school holiday, then the boy should be kept fully informed of the reason and the procedure performed promptly at the chosen time.

Adopted Boys

It is important that an adopted child feels welcome in the new family. Circumcision shortly after arrival there may alienate the boy unless he himself already desires it.

Unless there are over-riding requirements, it is therefore desirable that a boy who is adopted at an age where surgery will be remembered (generally accepted as being from two years old) should be allowed a year to settle with his adoptive parents before being circumcised. The boy's age should then be taken into consideration according to the guidance herein.

If there is a pre-existing medical reason for him to be circumcised then the adoption agency, or his current guardians, should be asked to organize the circumcision well in advance of the adoption so that it is fully healed before he goes to his new family. No suggestion should be made to the boy that it is being done 'for the new family'.

Change of Parental Control

Situations sometimes arise where parents disagree over the circumcision of their son at birth and the boy is left uncircumcised, to the annoyance of the parent who favours circumcision.

If the parents subsequently split up, or one dies, and the boy is left in the sole care of the pro-circumcision parent it is only natural that they will then seek to have him circumcised.

Unless he is already requesting it without prompting, the boy (if over two years old) should be given at least a year to adjust to the new family situation before circumcision is performed; the boy's age then being taken into consideration according to the guidance herein.

One must be particularly careful if a step-parent comes into the boy's life that any subsequent decision to circumcise him is not seen by him as an unwelcome imposition by the new step-parent as this can alienate the boy against them.

Siblings

It is always desirable that siblings match one another in respect of their circumcision status. This is actually more important to most boys than whether or not they match their father (or even school mates).

If one boy in the family has to be circumcised for medical reasons, at whatever age, then there is a serious case to be made for all his male siblings to be circumcised at the same time, irrespective of their ages. It should be noted that some medical conditions, which may have led to one boy requiring circumcision, are hereditary and thus his siblings may later require circumcision in any case.

Only religious or cultural norms that require the younger boys to wait until they reach a specific age should over-ride this consideration – those norms (and why they must wait for their own circumcision) can, of course, be readily explained to the younger boys.

- He will remember having the operation when performed after about 2 years old.
- If he resists or strongly objects, a phobia for doctors and hospitals may develop.
- The scar may be more prominent than if circumcision is done in infancy.
- There will be some limitations on his activities during the healing process.

Before Puberty – 10-13 years

Advantages:

- At this age, interest in his sexual equipment increases, and the advantages of circumcision can be explained convincingly.
- The penis and foreskin are larger than an infant's, allowing greater surgical accuracy.
- The glans is free to develop fully during the adolescent growth spurt, unrestricted by foreskin, allowing a fuller, more bulbous glans to form.
- The adolescent growth spurt may advantageously tighten the shaft-skin.
- The boy can be told that circumcision is a preparation for the bodily changes of adolescence, including the greater need for cleanliness. It can also be promoted as a 'rite of passage' from 'boy' to 'man'.
- The decision is generally covered by parental authority to give consent.
- Healing is likely to proceed rapidly, less impeded by the powerful erections of puberty.

Disadvantages:

- The boy will most likely have learnt to use his foreskin for masturbation and may resent losing it, which will necessitate him learning new masturbation methods.
- The boy may object and resist if he doesn't want to be circumcised.
- Circumcision will probably leave an obvious scar.
- There will be some limitations on his activities during the healing process.

Teenage – Ages 14-16/17 years (see page 3 regarding age of consent)

Advantages:

- Glans growth has been largely completed, so the proper amount of skin to be removed can be correctly gauged more easily.

- The glans is permanently exposed and allowed to grow unrestricted. This will give the glans a full and plump look as a teen and adult.
- The decision is completely covered by parental authority to give consent.

Disadvantages:

- It is more difficult to gauge the proper amount of skin to be removed, because of the small scale of the foreskin and the variable effect of 'puppy fat'.
- Unless parents are scrupulous about changing the nappy/diaper as soon as it is soiled, there is a slightly increased risk of infection.
- The boy is beginning to become more self-mobile and may have to be restricted somewhat to prevent him hurting his penis during healing.
- The boy has no choice as to whether he is circumcised or not. A tiny minority may later dislike being done and incorrectly blame any sexual or social inadequacies they may have on being circumcised.

Early Childhood – 3-9 years

Advantages:

- It is easier to correctly gauge the proper amount of skin to be removed.
- An older boy may have some say in whether he wants circumcision done.
- The glans is free to grow unrestricted during the adolescent growth spurt. This may give it a fuller and plumper, more bulbous look in adulthood.
- The decision is covered by parental authority to give consent.

Disadvantages:

- Many medics are reluctant to circumcise boys of this age group because they are unlikely to hold still while it is done under local anaesthetic, and the risks of general anaesthetic are usually unjustified (unless circumcision can be combined with other essential surgery).
- Circumcision may be excessively traumatic psychologically because the boy does not appreciate the limited extent of the operation, so castration fears may be raised unnecessarily.
- The boy generally has no choice as to whether he is circumcised or not. A tiny minority may later dislike being done and incorrectly blame any sexual or social inadequacies they may have on being circumcised.

Late Circumcision of the Father

When a boy's father needs, or chooses, to be circumcised, the boy may question the difference in his appearance. Age appropriate information should be given to the boy about his father's change and, if possible, the boy should be asked if he'd like to have his penis changed to match his father. After matching male siblings, the next most important thing to many boys is to match their father – their role model.

Physical or Mental Incapacity

Parents of boys who are severely physically or mentally incapacitated should seriously consider circumcision before the boy reaches an age where he might be expected to look after his own hygiene. As the boy gets older, both he and those caring for him can be concerned if they have to attend to intimate washing under his foreskin. Circumcision makes life-long cleanliness almost a matter of course.

Boarding School

Whether because of family circumstances (eg military service or a foreign posting) or because parents believe the boys will receive a better education, a significant number of boys are sent to boarding schools. Some boys will attend a Prep School from age 8 whilst others will become a boarder at secondary school (particularly at a private school).

Several boarding schools (particularly Prep Schools) strongly recommend that their pupils be circumcised, whilst a few actually mandate it. They do this to reduce the amount of potentially embarrassing attention and supervision that staff need to give to the genital hygiene of the boys.

Whether the school actually expects it or not, and irrespective of other age considerations, it is desirable that all boys are circumcised before starting to board (particularly at a Prep School) to eliminate the extra attention which may otherwise have to be given to their genital hygiene.

It is likely that the majority of their new school mates will be circumcised too, and so a circumcised boy will tend to fit in better and be less likely to be teased for having a foreskin.

Anaesthesia

Some doctors and clinics will not circumcise a boy under a certain age (often six months) because they insist on using a general anaesthetic.

Whilst an anaesthetic should always be used for circumcision at any age (unless culturally forbidden or medically contra-indicated) there is normally absolutely no justification for using a general anaesthetic, as it carries a much higher intrinsic risk than the circumcision surgery itself and usually adds considerably to the costs. (See, however, the note under 'Medical Necessity' on page 4 regarding doing it if a general is required for other surgery.)

Circumcision is a simple, and relatively quick, external operation that can easily and safely be performed using a local anaesthetic (which is injected around the base of the penis). Where a boy may need to be calmed down or stopped from moving about during the operation, a supplementary sedative should be considered in preference to a general anaesthetic.

Different Ages (Advantages and Disadvantages)

So, when is the best age for elective male circumcision? What are the advantages and disadvantages at different ages?

Neonatal – Birth to 3 months

Advantages:

- It is easy to organise. Many maternity units and all Jewish mohelim are geared to neonatal circumcision, as are most specialist clinics.
- Infant circumcision maximises the total lifetime benefits and minimises the complexity (and hence cost) of the surgery.
- It ensures that the boy doesn't have to be circumcised at an older, less convenient, age for any reason.
- Healing is fast, usually being complete in about a week.
- The infant has no fear of the operation, and retains no memory of it. Later, as a boy he will grow up thinking that being circumcised is normal.
- A baby spends most of his time simply lying in his cot or carrier and so is not adversely affected by reduced mobility and restricted activities during healing in the way an older child would be.
- The risk of dangerous infant urinary tract infections (UTIs) is reduced approximately 10-fold. UTIs in infancy can result in severe and permanent damage to the immature kidneys and bladder.
- There may be a slight circumcision scar but often this is almost invisible, leaving the penis with a neat 'born without a foreskin' look.

- The glans is permanently exposed and allowed to grow unrestricted. This gives the glans a full and plump look as a teen and adult.
- The decision is completely covered by parental authority to give consent.

Disadvantages:

- If performed prior to 1 week old the boy may not have settled into a feeding routine, which may be further delayed following the circumcision.
- Prior to 1 week old the boy is not producing his own Vitamin K, which is needed for blood clotting and hence healing.
- It is more difficult to gauge the proper amount of skin to be removed, because of the small scale of the foreskin and the variable effect of 'puppy fat'.
- If performed in the birth hospital it may be done by a less experienced junior doctor with little concern for the comfort of the baby and aesthetic factors.
- Unless parents are scrupulous about changing the nappy/diaper as soon as it is soiled, there is a slightly increased risk of infection.
- The boy has no choice as to whether he is circumcised or not. A tiny minority may later dislike being done and incorrectly blame any sexual or social inadequacies they may have on being circumcised.

Infancy – 3 months to 2 years

Advantages:

- The boy has little or no fear of the operation, and retains no memory of it. He grows up thinking that being circumcised is normal.
- It ensures that the boy doesn't have to be circumcised at an older, less convenient, age for any reason.
- Healing is usually complete in a week or two at this stage of the boy's development.
- If done before 1 year old, the risk of dangerous infant urinary tract infections (UTIs) is reduced approximately 10-fold. UTIs in infancy can result in severe and permanent damage to the immature kidneys and bladder.
- There may be a slight circumcision scar but often this is almost invisible, leaving the penis with a neat 'born without a foreskin' look.