



# Circumcision in children

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You, the parents, have decided, perhaps together with your child, to proceed with a circumcision. During the procedure the foreskin of the penis is removed by a paediatric urologist.

Should you have further questions or doubts after having read this brochure, please do not hesitate to talk to a doctor or nurse from our team.

We would like to take this opportunity to wish your child a good and speedy recovery!

The Paediatric Urology Team



## LOOKING AFTER AN UNCIRCUMCISED PENIS

At a certain age boys should be taught that it is important to maintain good hygiene with respect to their penis, i.e. as soon as the foreskin can be fully and easily pulled back. When washing this intimate area they should regularly push the foreskin all the way back and properly dry it before moving it back into position.

The foreskin should never be forced when pulling it back because this could damage the glans of the penis.

If pulling back the foreskin is fraught with difficulty or if there is a cultural desire to do so, a decision can be made to perform a circumcision.



## WHAT IS A CIRCUMCISION?

During a circumcision the non-elastic skin around the glans of the penis is removed, resulting in the glans being visible.

UZ Leuven does not perform partial circumcisions, we always remove the entire foreskin.

Circumcisions can be performed in two ways:

- **A Plastibell circumcision.** This procedure is used for children up to the age of approximately 6 months. Further information is provided in the brochure entitled 'Circumcision in children using a Plastibell'.
- **Conventional circumcision.** This procedure is performed in children from the age of 6 months under a general and local anaesthetic. Further information on this topic is provided in this information brochure.



# WHEN IS CIRCUMCISION ADVISABLE OR NOT ADVISABLE?

## MEDICAL REASONS

In addition to traditions and cultural customs, there may be medical reasons to perform a circumcision.

### In children

- Phimosis: narrowing of the foreskin that can cause infections.
- Lichen sclerosus: a skin condition causing white patches on the foreskin and making it less flexible.

### In boys from puberty

- If it is difficult to pull back the foreskin from the glans.
- If problems are encountered with the foreskin during erections.

## CONTRAINDICATIONS

It is advisable not to consider circumcision (as yet) in children with any of the following congenital abnormalities of the penis:

- hypospadias
  - With this congenital abnormality the opening of the urethra is located at the bottom rather than at the top of the glans, or on the shaft of the penis.
- curving of the glans
- oedema or swelling
- micropenis

## MAKING A DECISION

Deciding whether or not to let your child have a circumcision can be a difficult process. It is important to weigh up the benefits and risks of the procedure.

Do you have further comments or questions? If so, please do not hesitate to contact the urology unit. Their contact data is included at the end of this information brochure.

## PREPARATIONS FOR THE PROCEDURE

Prior to the intervention you will have a consultation, together with your child, with the nurse and paediatric urologist. They will discuss the details of the procedure with you and perform a clinical examination of your child's penis. Obviously, you will also have the opportunity to submit any questions you might have.

**The procedure is not performed during this consultation.**



## SURGERY DAY CARE HOSPITAL

The **day before the procedure** we will contact you to notify you of the exact time of the procedure. We will also tell you when your child has to stop eating or drinking as it is important that your child should have **fasted** before the procedure.

### **Why does my child have to fast before the procedure?**

During the procedure the stomach contents could overflow into the airways. Any protective measures that would normally kick in will be suppressed by the medication that has been administered to anaesthetise your child during the procedure. If the stomach contents were to enter the lungs this could result in severe pneumonia.

If your child has not fasted beforehand when you check in the procedure may have to be postponed or cancelled.

On the **day of the procedure** you and your child need to report to the surgery A day care hospital at the Gasthuisberg campus.

If you are travelling by car, it is advisable to use parking Oost at the 'Het Teken' roundabout. The kiss-and-ride zone (K+R) of the surgery day care hospital only provides short term (maximum 45 minutes) parking to drop off or collect someone.

The day care hospital is accessed via the general reception hall (access Oost). You then need to proceed to the **orange street, gate 6, level -1**.

## Prescriptions and certificates

Check beforehand which certificates the urologist needs to complete, e.g. for the health insurance fund and/or school. When checking in on the day of the procedure, ask the doctor to complete these documents.

## THE PROCEDURE

One parent or guardian can stay with the child until they are asleep. A conventional circumcision is always performed under general anaesthetic. A local anaesthetic is also applied around the penis or around the nerves of the penis to ease the pain. Usually the anaesthetic will be effective up to 4 to 5 hours after it is injected.

Your child will also be fitted with a precautionary intravenous drip, which will be inserted when they are asleep and remain in place for a while after the procedure.

During the procedure the foreskin is detached from the glans and shortened. The skin is then attached or bonded behind the edge of the glans. Finally a bandage will be applied to the penis.

Any sutures applied to the glans will be absorbable, i.e. they will disappear naturally.

The administration of the anaesthetic and the procedure will take a total of 30 to 40 minutes.



## POTENTIAL COMPLICATIONS

Any medical treatment is associated with risks and complications. You will have been informed accordingly during the consultation. Do you still have questions or doubts? If so, please do not hesitate to ask the doctor or nurse for more information.

If you suspect that there is a problem, bring your child to A&E immediately. In the event of non-urgent questions you could take a few photographs and send them with your query by email to [urologie@uzleuven.be](mailto:urologie@uzleuven.be). The doctor or nurse will then try to respond as soon as possible.

The following complications may occur after the procedure:

- **Pain when urinating**  
Particularly the first few times after the procedure. This type of pain will disappear spontaneously.
- **Infection and/or fever**  
A wound can always become infected, although this tends to be rare with this procedure. If an infection does occur or your child develops a fever, always contact the doctor in charge of the treatment.
- **Bleeding after the procedure**  
The wound may still bleed slightly following the procedure. Usually, but not always, this will stop naturally. If it does continue you will have to try to stem the bleeding yourself, but if this is not successful you will have to come to the hospital.

- **Crust formation on the glans**

Crusts may develop on the glans, but you can apply Vaseline or a few drops of baby oil. If they don't disappear the doctor may prescribe an antibiotic ointment at the two week check-up consultation.

- **Surgical injuries**

The surgeons will operate with the utmost care and accuracy, but there is always a risk of a minor injury to the glans of the penis. Scar tissue can also develop.

## AFTER THE PROCEDURE

### DRIP

The precautionary intravenous drip will be removed after the procedure.

### BANDAGE

- The bandage must be left in place for **one to two days** but can then be removed. If it comes off more quickly, it isn't a problem. If the bandage is still in place after two days you can remove it yourself.
- Thereafter you can apply Vaseline or baby oil to the glans of the penis for **a period of two weeks**. This is particularly important if crusts develop on the glans.



- Once the bandage has been removed, from the second day after the procedure, your child can **shower or have a bath again**, preferably briefly and without using soap. You can wash the glans of the penis with baby oil rather than soap.
- On the **fifth day after the procedure** any **swelling** will be most noticeable. This is no reason to panic as it will disappear again naturally.
- The **glans will be particularly sensitive** during the first few weeks but again this will disappear naturally.

## MONITORING

On the day of the procedure an appointment will be made for you for a urology consultation two weeks later when the doctor in charge of the treatment will check the wound.

Even if the wound appears to be healing nicely, it is advisable to attend this consultation with your child.

## COST

The UZ Leuven website provides further information on the estimated cost depending on your insurance provider.

Visit [www.uzleuven.be/nl/kostenraming/besnijdenis-circumcisio](http://www.uzleuven.be/nl/kostenraming/besnijdenis-circumcisio) or scan the QR code.



## CONTACT DATA

You can contact the urology unit at UZ Leuven at any time.

### BY EMAIL

- [urologie@uzleuven.be](mailto:urologie@uzleuven.be)
- Use email if you have a non-urgent question and would like to include photographs. Please include: 'FAO paediatric urology' and your child's name and date of birth or registration number.

### BY TELEPHONE

- For medical problems following the procedure:
  - nursing consultant urology-paediatrics Jolien Delestinne  
tel. +32 (0)16 34 60 46
- To make an appointment:
  - urology secretariat  
tel. +32 (0)16 34 66 85

In the event of urgent problems always come to A&E as soon as possible.



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