



## NATIONAL ORGANIZATION OF CIRCUMCISION INFORMATION RESOURCE CENTERS

BOARD OF DIRECTORS

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### 2012 NOCIRC Fall Update

Greetings,

This has certainly been a busy summer for Intactivists, and some of what I have to report is good news. However, the recently released 2012 American Academy of Pediatrics (AAP) Technical Report on Circumcision is a huge disappointment to anyone who recognizes the inherent right of every child to his or her own body.

The “rights of the child” awareness is growing amongst ethicists, politicians, and medical organizations in Austria, Denmark, Finland, Germany, Norway, Sweden, The Netherlands, and Switzerland, who are calling for a ban of the practice. They have taken the issue out of the “medical” arena and put it where it belongs, in the arena of human rights. As Royal Dutch Medical Association bioethicist, Dr. Gert Van Dijk said in an interview, “On this side of the pond, we would never amputate a healthy part of a child to prevent a disease. It’s simply not an issue.”

The AAP Report, however, says the benefits outweigh the risks, although they admittedly don’t know the risks and harms because no records are kept. The AAP Report protects the personal, cultural, religious, and financial interests of its members while forsaking the babies they claim to serve. This Report will be an embarrassment to anyone connected with the AAP who recognizes a sales pitch for what it is. The AAP’s pitch ignores or minimizes the protective and sexual functions of the foreskin, the risks, pain, trauma, complications, life-long consequences of unnecessary surgery, and the ethical and human rights considerations of cutting off a normal body part of a non-consenting minor.

As if ignoring these important points wasn’t enough, the AAP’s Report relies upon medical reasons that were debunked long ago. Penile cancer? That was the fear of the 1930s; we know only one man in 100,000 will get cancer of the penis. UTIs? They occur in one boy in one hundred and can be treated with antibiotics, just as they are in girls. Cutting body parts off to prevent infection is irrational. Treat an infection if you get one but it’s better to learn how to promote health so as not to acquire an infection in the first place—first and foremost, stop fiddling with foreskins. The AAP Report suggests circumcision prevents many things, all of which already have been debunked.

The AAP Report says: “**Health benefits are not great enough to recommend routine circumcision for all male newborns...**” yet, it goes on to say, “...the benefits of circumcision are sufficient to justify access to this procedure for families choosing it and to warrant third party payment for circumcision of male newborns.” That’s the sales pitch: promoting insurance reimbursement. And, finally, the Report says, “It is important that clinicians routinely inform parents of the health benefits and risks of male newborn circumcision in an unbiased and accurate manner.” If the AAP physicians are as biased as the committee members, that will be impossible. But, media attention to the AAP’s Report and outpouring of dissenters to the AAP’s claims on the Internet are helping our cause!

In June, Intact America’s Georganne Chapin and I, along with David Smith, John Warren, Richard Duncker, and John Dalton from the UK, and Eeva Matsuke of Finland, attended the Royal Dutch Medical Association (KNMG) symposium on circumcision at the International Association of Bioethics conference in Rotterdam. The symposium was held just after a German high court’s June 25 ruling.

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The Cologne decision came after a Muslim doctor circumcised a four-year-old boy, who had complications and was taken for emergency care. The prosecutor's office filed charges against the doctor, who was found *not* guilty, so the prosecutor appealed to the high court, which determined that religious circumcision is a permanent and irreversible intrusion on the child and denies his right to religious freedom. The decision does not ban circumcision but postpones it until the person undergoing the procedure can give his own consent, if he so chooses.

The Cologne court decision and children's rights were discussed at the KNMG symposium, where circumcision to prevent HIV in Africa was introduced by the first speaker. The remaining presenters explained why the African studies are flawed and won't work, the ethical concerns of subjecting boys to a procedure with life-long, irreversible effects without compelling scientific evidence (the African studies have been marketed and commerce is driving the push for circumcision), that neonatal circumcision has no advantages while long-term complications have been found in up to 20% of circumcised infants, the frequent orgasm difficulties in men and a range of sexual difficulties, pain, and frustration in women, the cost to health services, and, perhaps, introducing alternative rituals. I mentioned brit shalom and a rabbi in the audience, when asked by Dr. van Dijk if he would consider performing a brit shalom, said he would. I said, "Change is happening right here!" Arie NiewenhuijzenKruseman, President of the Royal Dutch Medical Association, expressed fear that banning circumcision would drive the practice underground. I said, medicalizing circumcision legitimizes it *and* its inherent risks. The difference, Dr. Van Dijk says, is that Americans have circumcision and wonder if it will prevent HIV. Europeans have HIV and wonder what to do about it. So, Americans end up with circumcision and Europe has clean needles, safe sex programs, and a lower HIV rate!"

On July 25, following another herpes death (9/28/11) in New York, caused by a mohel sucking blood from the penis of a baby he'd just circumcised, Mayor Bloomberg said "There are certain practices that doctors say are not safe and we will not permit those practices to the extent that we can stop them. You don't have a right to put any child's life in danger, and this clearly does." Ultra-Orthodox New York City rabbis defended their right to perform the dangerous rite that in the past decade has hospitalized ten babies, caused brain damage in two more, and killed another two. Interestingly, the Israel Pediatric Association blasted metitzah b'peh, the blood-sucking ritual.

Interestingly, medical anthropologist, David Gisselquist, PhD, found data in the Rakai, Uganda, study showing intact males who waited ten minutes to wash after having intercourse had a lower HIV incidence than circumcised males. The authors of the study recorded the data but did not use it in their findings. The Rakai study is one of the three studies used to promote circumcision in Africa.

As I write this, we're just a month away from our Helsinki symposium, the 12<sup>th</sup> International Symposium on Law, Genital Autonomy, and Human Rights. Hopefully, we'll provide information that will embolden countries in that part of the world who are standing up for the rights of infants and children. Thanks to everyone who supports our efforts and helps us along the way. We couldn't do it without you!

With my very best wishes,



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