

Saskatchewan College of Physicians and Surgeons Memo Cautions Doctors

The Saskatchewan College of Physicians and Surgeons took a leadership role when it issued a February 20, 2002 memo, advising physicians to “accurately and effectively convey the message” that infant male circumcision is “not a recommended procedure.” Routine infant circumcision is not consistent with good medical practice, the memo advised, and parental consent for the operation may not be truly informed.

“The relatively high rate of newborn male circumcision in Saskatchewan (27.6%) stands in very sharp contrast to that in some other regions of the country,” according to the memo. “For example, in Nova Scotia the rate has dropped to 1.5% while in Newfoundland/Labrador it has dropped to 0.6%.”

“Such high infant circumcision rates in Saskatchewan in the face of an explicit caution from the CPS [Canadian Paediatric Society] is of great concern to the College of Physicians and Surgeons and ought to be a concern to all physicians who perform the procedure.”

The memo warns physicians who perform newborn circumcision, even for religious reasons, saying they “would be prudent to consult with and seek advice from the Canadian Medical Protective Association before proceeding.” See: www.infocirc.org/saskmemo.htm. ■

Ashley Montagu Resolution to End the Genital Mutilation of Children Worldwide

Join with Nobel Laureate Francis Crick, Jonas Salk, and other concerned individuals by endorsing the *Ashley Montagu Resolution to End the Genital Mutilation of Children Worldwide* at: www.MontaguNOCIRCpetition.org. ■

Arizona Legislature Ends Medicaid Funding of Circumcision

Arizona Medicaid coverage for routine circumcision ends July 1, 2002, as Arizona becomes the seventh state to stop payment for unnecessary surgery on male infants. The state joins California, Mississippi, Nevada, North Dakota, Oregon, and Washington by eliminating Medicaid funding from its new budget.

Judge Gives Go-Ahead to 18-year-old's Circumcision Lawsuit

Suffolk County, NY – Judge Leonard Wexler, U.S. District Court for the Eastern District of NY, denied the Defendants’ Motions to Dismiss for Failure to State a Claim in the precedent-setting case of William Stowell, a 20-year-old who, at 18, filed a civil suit against the physician who circumcised him as a newborn and the hospital where he was circumcised.

The case questions whether a physician can legally obtain consent from a mother debilitated by post-surgical pain and anesthesia, and also raises issues regarding removal of healthy, normal tissue from a non-consenting minor. The discovery planning conference was held June 3 before a U.S. magistrate. Another pretrial conference is scheduled for December 13, and fact-discovery ends March 6, 2003.

Depending on the facts and the jurisdiction, a male who was circumcised as an infant may be able to file a lawsuit of this type within one, two, or three years of reaching the age of majority (depending upon statute of limitation law of the state in which he was circumcised). The Stowell case has been featured on *Good Morning America*, in *Newsweek*, *The New York Post*, and numerous other radio talk show programs and news articles.

Mr. Stowell is represented by John L. Juliano of East Northport, NY, and David J. Llewellyn of Conyers, GA. Mr. Llewellyn regularly represents victims of circumcision throughout the country. ■

“Would you rather explain, in your living room, why you *did not* circumcise him or, in the courtroom, why you *did*?”

– Frank A. Cochran

Donations to the Frank A. Cochran Matching Legal Fund can be sent to NOCIRC, POB 2512, San Anselmo, CA 94979.

The Cervical Cancer Scare: Making Sense of a Flawed Study

A myth – debunked a half-century ago – that female partners of intact males are at greater risk of cervical cancer was resurrected by the *New England Journal of Medicine* when it published “Male circumcision, penile human papillomavirus infection, and cervical cancer in female partners” [Castellsague X, et al. *N Engl J Med* 2002 Apr 11;346(15):1105-12]. Authors of the study try to show a link between circumcision and a reduced risk of penile HPV infection in promiscuous men and a reduced risk of cervical cancer in their partners. Yet, they could only make this conclusion by employing statistical irregularities so egregious that no ethical journal should have accepted the article for publication. Errors include:

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Letter from the Editor

NOCIRC sponsored the 7th International Symposium on Human Rights and Modern Society: Advancing Human Dignity and the Legal Right to Bodily Integrity in the 21st Century at Georgetown University in conjunction with the annual Genital Integrity Awareness Week (April 1–7) in Washington, DC. The symposium was a tremendous success and culminated in a peaceful march to the Capitol steps, bringing greater public awareness to a crucial human rights issue. FOX and ABC television covered the events.

The day we returned from Washington, the *New England Journal of Medicine* published another study promoting the “circumcision prevents cervical cancer” myth. A press release prompted media promotion of the myth. Most calls to NOCIRC about the news were from discerning people who questioned the study’s validity, knowing safe sex, not amputation of normal body parts, is the way to prevent sexually transmitted diseases. While this study suggested alleged health benefits of circumcision, the *Journal of Urology* published a study about the sexual loss that results from circumcision. Decreased penile sensitivity and increased erectile dysfunction were the most frequent complaints of men circumcised as adults. Half reported no benefits from the procedure and 38% reported harm.

As the controversy heats up and as parents become more educated, our work becomes more important. Those who profit from genital cutting or cling to the dominant paradigm will grow more desperate to prove circumcision beneficial. Yet, we know that circumcision is based on fear, hurts babies, has risks, causes harm, leaves physical and psychological scars, and denies the right of a child to bodily integrity and self-determination. Our work will continue until those rights prevail.

Many state governments have already joined forces with child rights advocates by eliminating Medicaid funding for routine infant circumcision. For information about how you can help with the Medicaid Project, visit www.ICGI.org/Medicaid.

My thanks to all of you who are helping to make this world a safer place for infants and children.



NOTICE:

The NOCIRC Annual Report will no longer be automatically mailed, but will continue to be available on line in PDF format at www.nocirc.org/publish. Please feel free to download and copy as needed. A printed copy will be sent for a donation to NOCIRC of \$10 or more. Bulk pricing is available.

Flawed Study *continued from page 1*

- Data was pooled from Brazil, Colombia, Thailand, the Philippines, and Spain – all dissimilar, geographically separated populations with different religions, different sexual practices, and discrepancy in the incidence of HPV and circumcision status. This is statistically impermissible and deceptive.
- Circumcision status was self-reported, and physical examination of samples in Brazil, Thailand, and the Philippines showed an error of 5.3%, largely for circumcised men; thus a significant number of men should have been – but were not – reassigned as circumcised. The authors failed to verify the self-reported circumcision status of Columbian and Spanish samples.
- Men studied for HPV recovery were an unrepresentative sample of the male population; half were partners of women with confirmed cervical cancer.
- Authors failed to break down urethral and glandular samples. The test relies on recovery from mucosal cells, so the sampling of the glans in circumcised men, where there are no mucosal cells, was biased. HPV detection needs to be equated with HPV disease for results to have applicability.
- Of the men sampled for HPV, one-quarter of the samples were uninterpretable, which the authors failed to take into account. Treating this as a missing data problem, a significant association between circumcised males and cervical cancer in females could have been shown.
- Authors excluded several known confounders in the models.
- Authors’ data shows the greatest risk for HPV is being from Brazil. Men from the Philippines, whether circumcised or not, were at lowest risk. Country of origin explains the data better than circumcision status. With different country selection, the opposite impact of circumcision status could be demonstrated.
- Authors inappropriately used logistic regression for data reported in this study. Of 20 categories in the HPV recovery data, in which men were categorized by circumcision status and country, seven of the categories had five men or fewer – an insufficient sample size. Logistic regression cannot give a reliable result. Other than the results given by country, which have large variances, the data presented in this study are statistically uninterpretable.
- Authors provided an incomplete or inaccurate review of the medical literature, citing opinion pieces as though they were studies. Taking the results of the current study and combining them with previously published studies, using methods recommended for meta-analysis, the summary effect for both cervical cancer and HPV disease indicate circumcision status has no impact on either.
- The abstract reported HPV recovery results, using self-reported circumcision status, which the authors admit were less reliable than using circumcision status confirmed by physical examination.
- According to the abstract, a small subgroup of female partners were at greater risk for cervical cancer, but failed to report that for the entire population circumcision status was not a risk factor.
- The mixed data was entirely from other countries, but reports gave the impression that the data was applicable to the U.S. ■

Lawsuits and Legislation

AFRICA

Nairobi, Kenya – “Last year, we saved two school girls, and hope this year’s crusade will be successful,” said Ken Wafula. “FGC is a big health risk in this era of HIV/Aids and should be discarded.” *The East African Standard* (Nairobi), 11/13/01

Tanzania, East Africa – Amnesty International (AI), launched campaigns to eradicate FGC. Marry Munisi, High Court advocate, blamed the government, saying NGOs have been left to fight the inhuman practice. Governmental efforts to eradicate FGC are hampered by disregard to laws and perpetrators are not duly penalized. *Tomric News Agency* (Dar es Salaam), 12/5/01

AUSTRALIA

Melbourne – The Medical Practitioners Board of Victoria, investigating Dr. Christopher Towie for professional misconduct during a consultation in May 2000, was told Towie allegedly performed surgery on a 37-year-old, advising circumcision would bring success with women by making his penis appear bigger. *The Age*, 2/4/02

CANADA

Toronto, Ontario – A St. Catharines girl, now 13, went to police about the FGC performed on her 2 years earlier. Her mother and father were arrested and charged with aggravated assault. In Canada, FGC is prohibited by criminal code, except where “the procedure is medically necessary and performed by a doctor or where the subject is 18 years of age and consents to the procedure and no bodily harm results.” *Toronto Sun*, 2/15/02

ITALY

Florence – The Italian government will save 1.4 trillion lira in the first year with its national healthcare budget bill that specifies therapies and treatments that will no longer be provided, including “particularly vulnerable categories” such as circumcision. Health Minister Girolamo Sirchia said, “This long and meticulous work to indicate the basic levels of assistance will produce great advantages in clinics and healthcare organizations.” *Reuters Health*, 22/26/01

SOUTH AFRICA

Bisho, East Cape – A circumcision act, introduced by Health Minister, Max Mamase, lays down rules for the maintenance of hygienic conditions when circumcision is performed and calls for irresponsible traditional surgeons and nurses to be fined or imprisoned up to 10 years for contravening the act. He said the act was “long overdue” because the number of botched circumcisions is increasing all the time. *East Cape News* (Grahamstown), 10/25/01

Traditional leaders rejected the new circumcision act because it allows the involvement of women in the ritual. Chief Mwelo Nonkonyana, said leaders were “very disappointed” the bill was passed by the Bisho legislature, and that he would be the first to defy it when his son underwent the rite. “They can put me in jail, I’m not going to compromise on that. I even doubt if that act is constitutional. It’s a load of

rubbish and we reject it with the contempt it deserves.” *East Cape News* (Grahamstown), 10/26/01

TAIWAN

Taipei – A doctor was sentenced to six months’ imprisonment for cutting 1.5 centimeters off a man’s glans penis during circumcision. In a settlement, the victim received \$20,000. *Sapa-DPA*, 6/7/02

UNITED KINGDOM

London – Dr. Michael Harbinson was accused of coercing two mothers to have their babies circumcised and referring them to his friend, a retired surgeon. Mr. Peter Silverstone, accused of failing to anesthetize the babies (one suffered excessive bleeding), was found guilty of serious professional misconduct and struck off the medical register. *Telegraph*, 8/25/01

UNITED STATES

Sacramento, CA – A jury awarded \$1.42 million to a 7-year-old boy for a botched circumcision performed by a UC Davis Medical Center resident. The verdict exceeds the legal cap on medical malpractice awards because the hospital failed to obtain the parents’ permission. *Sacramento Bee*, 6/9/01

Lakeland, FL – The Florida Board of Medicine fined Dr. Eva Salamon \$5,000 for circumcising a baby without parental consent. Salamon must give a one-hour lecture on wrongful surgery, do 20 hours community service, and take 5 hours of continuing education in risk management. She must also pay costs of the investigation. *The Ledger*, 2/6/02

Atlanta, GA – Parents of a boy who lost a portion of his penis during circumcision agreed to settle their lawsuit for \$300,000, present value, according to Atlanta attorney David Llewellyn, who also settled two other wrongful circumcision cases in IL and CO this year. 2/2002

Whitchita, KS – A settlement between the parents of Asher Grisham was reached, and the baby will not be circumcised. Asher’s father, Rodney Grisham, 25, said. “Nobody is doing that to my son.” Circumcision, he added, amounts to sexual assault, so he filed a protection from abuse order to stop the procedure. *Whitchita Eagle*, 7/24/01

Worcester, MA – A judge in the Worcester Division of the Juvenile Court Department terminated the parental rights of a father, an Indian national living in the Commonwealth on a temporary work visa, who mutilated his 5-year-old daughter’s genitals. The girl can now be adopted without the father’s consent. 5/3/2002

Omaha, NE – On the day of trial, parents reached a \$1700 settlement with Chabid of NE, Inc., and Rabbi Mordecai Tarkeiltaub, a Chicago mohel, in a suit that alleged too much shaft skin was removed during their son’s ritual circumcision, causing scarring and curvature of his penis, according to Atlanta attorney, David Llewellyn. 5/1/02 ■

Circumcision Haiku
Ode to the foreskin
Woe to those who cut it off
Multiple lawsuits

Highlights from the Medical Literature

ACOG Statement Against Circumcision

The American College of Obstetricians and Gynecologists finds existing evidence insufficient to recommend routine neonatal circumcision. American College of Obstetricians and Gynecologists. Committee on Obstetric Practice. ACOG Committee Opinion. Circumcision. Number 260, October 2001. *Obstet Gynecol* 2001;98:707-8

Advances in Medical Ethics

Children should not be subjected to prophylactic interventions "in their best interests" or for public health reasons when there exist effective and conservative alternative interventions. Hodges FM, Svoboda JS, Van Howe RS. Prophylactic interventions on children: balancing human rights with public health. *J Med Ethics* 2002;28:10-6

Decision Making

Parental education, using the American Academy of Pediatrics brochure on circumcision about the medical indications and possible risks of circumcision, has no impact on the decision-making process. Binner SL, et al. Effect of parental education on decision-making about neonatal circumcision. *South Med J* 2002;95:457-61 [Is anyone surprised by this?]

Ancient History

The ancient Greeks and Romans prized the longer foreskin and considered a penis with a short foreskin to be afflicted with a deformity called lipodermos, a condition requiring medical treatment. Hodges FM. The ideal prepuce in ancient Greece and Rome: male genital aesthetics and their relation to lipodermos, circumcision, foreskin restoration, and the kynodesme. *Bull Hist Med* 2001;75:375-405

Infant Pain

Pain control after circumcision is necessary to promote neonatal comfort and improve mother-infant interaction. Macke JK. Analgesia for circumcision: effects on newborn behavior and mother/infant interaction. *J Obstet Gynecol Neonatal Nurs* 2001;30:507-14

Phimosis

- Local application of clobetasol propionate cream is a simple, safe, and effective treatment for phimosis in boys and avoids circumcision and its associated risks. ter Meulen PH, Delaere KP. A conservative treatment of phimosis in boys. *Eur Urol* 2001;40:196-9
- Even though the triamcinolone cream is less potent than the more commonly used 0.05% betamethasone valerate cream, it could effect comparable improvements in foreskin retractability after 6 weeks of treatment. Ng WT, et al. Treatment of childhood phimosis with a moderately potent topical steroid. *ANZ J Surg* 2001;71:541-3
- Local application of steroid cream to the phimotic foreskin may allow some degree of retraction and avert the need for circumcision. Topical steroid appears to be a safe and effective treatment for boys over three years of age with evidence of a tight preputial ring. Webster TM, Leonard MP. Topical steroid therapy for phimosis. *Can J Urol* 2002 Apr;9(2):1492-5

Circumcision Complications

Pyogenic granuloma, a benign vascular, inflammatory proliferation that appears following minor trauma in children, appeared in an infant following circumcision. Naimer SA, Cohen A, Vardy D. Pyogenic granuloma of the penile shaft following circumcision. *Pediatr Dermatol* 2002;19:39-41

Circumcision Status Errors

Researchers found that 15.6% of clinician reports on circumcision status disagreed with baseline reports. Disagreement was more common if both clinicians were women than if both were men. The magnitude of misclassification could bias results and indicates need for greater accuracy in reporting

circumcision status. Diseker RA, et al. Fleeting foreskins: the misclassification of male circumcision status. *Sex Transm Dis* 2001;28:330-5

Sexual Disadvantages and Consequences of Circumcision

Elective adult circumcision results in worsened erectile function and decreased penile sensitivity even if males wanted to be circumcised. Of the men, 38% reported harm. Fink KS, Carson CC, DeVellis RF. Adult circumcision outcomes study: effect on erectile function, penile sensitivity, sexual activity and satisfaction. *J Urol* 2002;167:2113-6

"The sensory pleasure induced by tactile stimulation of the foreskin is almost totally lost after its surgical removal. The surface of the exposed glans, as we know, has no capacity to receive and transmit any fine sensation of touch, heat, etc. Consequently, the fundamental biological sexual act becomes, for the circumcised male, simply a satisfaction of an urge and not the refined sensory experience that it was meant to be.

– C. J. Falliers, MD, Denver, *JAMA* 1970;214(12):2194

Historical Tragedy in Korea

- The 1945 circumcision rate in Korea was <0.1%. As a result of American military occupation, the South Korean rate now is approximately 60%. Mistaken, out-dated notions and physicians' lack of knowledge about phimosis seem to be contributing factors. Pang MG, Kim DS. Extraordinarily high rates of male circumcision in South Korea: history and underlying causes. *BJU Int* 2002;89:48-54
- Common beliefs of Korean parents about the prepuce or circumcision differ significantly from current medical knowledge, and these beliefs have a major influence. Oh SJ, et al. Knowledge and attitudes of Korean parents towards their son's circumcision: a nationwide questionnaire study. *BJU Int* 2002;89:426-32

Decreased Circumcision Among Muslim Immigrants to Norway

An estimated 672 boys are born to Muslim parents in Norway each year. Less than 50% of Muslim newborns are circumcised in local outpatient departments. Vaage S, Tasdemir I, Maehlum O. Experiences with ritual circumcision in Norway. *Tidsskr Nor Laegeforen* 2002;122:59-61

Debunking the "Foreskins-Cause-AIDS" Myth

- Evidence suggests circumcision has no impact on transmission rates from HIV positive men to their partners. The wisest course is to recommend risk reduction strategies of proven efficacy, such as condom use. Bonner K. Male circumcision as an HIV control strategy: not a 'natural condom.' *Reprod Health Matters* 2001;9:143-55
- The National Centre in HIV Epidemiology and Clinical Research, Sydney, Australia, concludes that intact and circumcised homosexual males, engaging in receptive or insertive unprotected anal intercourse, have equal rates of HIV. The foreskin is innocent of any role in HIV infection, and sites such as the anus and distal urethra are more likely locations of HIV infection. Grulich AE, Hendry O, Clark E, Kippax S, Kaldor JM. Circumcision and male-to-male sexual transmission of HIV. *AIDS* 2001;15:1188-9

Debunking the Cancer of the Penis Myth

There is no association between circumcision status and carcinoma in situ (CIS). Other factors positively associated with invasive carcinoma or CIS or both are injury to the penis, cigarette smoking, physical inactivity, and to a lesser extent, genital warts and other infections or inflammation of the penis. Tsen HF, Morgenstern H, Mack T, Peters RK. Risk factors for penile cancer: results of a population-based case-control study in Los Angeles County (United States). *Cancer Causes Control* 2001;12:267-77 ■

Medical Hall of Shame

Perpetrating the “Foreskins-Cause-AIDS” Myth

- An opinion piece and selective review of literature lead circumcision advocates to recommend circumcision in Africa. Quigley MA, Weiss HA, Hayes RJ. Male circumcision as a measure to control HIV infection and other sexually transmitted diseases. *Curr Opin Infect Dis* 2001;14:71-5
- Circumcision advocates call for more “evidence” to validate and promote circumcision. Bailey RC, Plummer FA, Moses S. Male circumcision and HIV prevention: current knowledge and future research directions. *Lancet Infect Dis* 2001;1:223-3
- Primary barriers to acceptance of male circumcision in the non-circumcising Luo tribe are cultural identification, fear of pain, excessive bleeding, and cost. Authors of this study claim men and women are eager for promotion of male circumcision and availability of circumcision services in health facilities. Bailey RC, Muga R, Poulussen R, Abicht H. The acceptability of male circumcision to reduce HIV infections in Nyanza Province, Kenya. *AIDS Care* 2002;14:27-40
- Edgar J. Schoen claims intact males are at higher risk of multiple hormonal and electrolyte abnormalities, renal scarring, decreased renal function and possible hypertension even though the one intact baby in his case report was cured of a UTI in 24 hours with standard antibiotic treatment. Schoen EJ, Bhatia S, Ray GT, Clapp W, To TT. Transient pseudohypoadosteronism with hyponatremia-hyperkalemia in infant urinary tract infection. *J Urol* 2002;167:680-2
- Ignoring contrary evidence, an opinion piece attempted to prove “substantial data exist to support ‘conclusions’ that intact males have greater incidences of urinary tract infections, ulcerative sexually transmitted infections, and increased transmission of human immunodeficiency virus.” Updegrave KK. An evidence-based approach to male circumcision: what do we know? *J Midwifery Womens Health* 2001;46:415-22
- Basic principles of statistical methodology were violated in a study that determined female partners of circumcised males are at lower risk for cervical cancer. Castellsague X, et al. Male circumcision, penile human papillomavirus infection, and cervical cancer in female partners. *N Engl J Med* 2002;346(15):1105-12 [See page 1.]
- *Pediatrics* provided Edgar J. Schoen, Thomas E. Wiswell, and Steven Moses yet another opportunity to attack the AAP Task Force and its findings. Schoen EJ, Wiswell TE, Moses S. Reply to Carole M. Lannon and the task force on circumcision. *Pediatrics* 2001;108:211. [No medical pre-text will substantiate the right to violate bodily integrity.] ■

World News

AFRICA

Ghana – Commissioner of Human Rights and Administrative Justice, Emile Short, called on the Inspector General of Police and Attorney General to strictly enforce 1998 laws criminalizing FGC. He condemned the alleged forced FGC of 5 girls. *Ghanaian Chronicle* (Accra), 12/11/01

Kapenguria, Kenya – Pokot men living on the Ugandan border have given up circumcising males because three decades ago, 30 boys, recovering from circumcision, were killed in a cross-border attack. Now, boys undergo an alternative ritual. *Reuters*, 1/10/02

Nairobi, Kenya

- In a first-of-its-kind ruling, 20 parents were fined for forcing their daughter to undergo FGC. The parents, pleading guilty to assault, were fined \$25 each or two months in jail. *LA Times*, 9/08/01
- Naomi Okul, chairwoman of the Kitale Education Centre for Women in Democracy, reported hospitalization of 21 girls, ages 9-14, after FGC. “Traditional operators used dirty knives and most girls have infections,” she said. The ritual, normally done during school holidays, was secret to evade interference. *BBC News*, 10/30/01
- Politician Jimmy Angwenyi declared he would finance FGC for willing girls. Intimidation would not stop the community from pursuing its cultural heritage, he warned, and, on the spread of AIDS, he said the solution lay in abstinence and seeking divine intervention. *The Nation* (Nairobi), 12/4/01
- Jimmy Angwenyi’s remarks in support of FGC were made as Parliament passed a Children’s Bill saying “No person shall subject a child to cultural rites, customs or traditional practices likely to affect negatively a child’s life, health, social welfare, dignity, physical or psychological development.” The National Council of Women condemned Angwenyi’s remarks as derogatory, primitive, and outdated. President Daniel Moi said “Anyone found circumcising a girl of 16 will go straight to jail but for girls above the age of 16 years, it is their choice to be circumcised or

not. Should they not want to be circumcised, they shall also be protected by the new law.” *Nation, Africa News*, 12/6/01

- Some 153 girls, ages 10-18, completed an alternative rite of passage at Cheparreria Catholic Church after a week of instruction about reproductive health and challenges of adulthood. About 30% of girls escaped FGC, a ratio that will increase, according to Thomas Ruto, an official of an anti-FGC organization. Plans are being initiated to help practitioners generate income through other sources. *The Nation* (Nairobi), 12/21/01
- At least 7 boys, ages 14-18, died while in seclusion or in hospitals where they sought treatment after circumcision. Keiyo traditional practice forbids initiates to seek medical treatment while in seclusion. The deaths complicate the ongoing debate over FGC, which was banned by President Moi. Catholic priest, Fr. John Chumop, urged the community to change traditions that are not compatible with modern society. *The Nation* (Nairobi), 12/27/01

Lagos, Nigeria – The Abia State House of Assembly passed a bill that states “No person shall circumcise any female child. No person shall prick any part of the female genital organ for the purpose of circumcision.” The law prescribes a fine or 6 years in prison or both for any convicted offender and similar punishment for any person convicted of discriminatory treatment against a female child that refuses to be circumcised. Chief Tony Kalu said “Even though the practice used to be part of our culture, we have to keep pace with civilization.” *AllAfrica.com*, 12/24/01

Dakar, Senegal – Authorities arrested 8 women and 5 men for circumcising more than 20 girls, ages 2-5 years, who were hidden among a group of young boys due for circumcision. FGC was banned 3 years ago, and NGOs are providing traditional doctors with loans to compensate for lost business. *BBC News*, 10/25/01

Nguerigne-Bambara, Senegal – For 27 years, Illinois-born Molly Melching danced, talked, and worked her way into Senegalese society, educating villagers so that they, and not outsiders, would take the initiative to end FGC. More than 400 villages have agreed, a first for Africa. *The Boston Globe*. 1/4/02

continues

Kampala, Uganda

- State Minister for Gender and Culture, Sam Bitangaro, opening a regional conference on HIV/AIDS, said he blames many of the infections on the civil strife and armed conflict, which put women and girls at the mercy of forced marriages and cultural practices like FGC. *Allafrica.com*, 12/11/01.
- President Yoweri Museveni has reduced cases of HIV/AIDS in his country from 30% in 1986 to just over 6% today. The disease, he said, is spread in three ways: unprotected sex, blood transfusions, and tribal customs such as circumcision. "In the African villages, once a lion comes to attack the village, you make an alarm, a very loud alarm, so that the whole village comes to attack the lion. That is what we did with AIDS." *The Courier Mail*, 3/5/02

FINLAND

Kuopio – Four Muslim boys were hospitalized after circumcision. The government is investigating. A 1999 ruling states that Finnish public health institutions are not obliged to perform non-medical male circumcision. *Helsingin Sanomat - International Edition*, 8/21/01

IRELAND

Dublin – African tribal doctors are under investigation for circumcising immigrant babies. One, a hemophiliac, needed blood transfusions. The father of the other boy complained in order to protect other children. Neonatal circumcision is not offered by hospitals, and Peter McKenna, master of Rotunda hospital, said "I am not convinced we should do it for social reasons. If it's medically necessary, then of course, but I don't think you should cut bits off of people without their consent." *The Sunday Times: Ireland*, 9/2/01

NORWAY

The Labour Party wants children checked for FGC, which carries a penalty of up to 8 years in prison. No one has been convicted of the crime, something of a paradox, according to Labour MP Signe Oeye, who proposes all children be checked once during both primary and lower secondary school. *The Norway Post*, 3/19/02.

The Norwegian Council for Medical Ethics' statement to the Norwegian Medical Association said ritual circumcision of boys is not consistent with principles of medical ethics laid down in the "Ethical Rules for Doctors," requiring doctors to uphold human health, and to cure, relieve, and comfort. Even with anesthesia, the procedure causes pain and has risks, and the child cannot give consent. The Council claims circumcision should not be publicly funded, and invited relevant religious leaders to work on replacing circumcision with symbolic rituals that do not involve surgery. *Journal of the Norwegian Medical Association* 2001; 121: 2994

SOUTH AFRICA

Dumisane Lubisi, Thohoyandou – A 10-year-old boy bled to death after circumcision. "Unfortunately, he was certified dead on arrival at the hospital," according to police spokesperson Captain Ailwei Mushavhanamadi. *African Eye News Service*, 6/26/01

Johannesburg – A new law to regulate circumcision procedures is being considered after 250 boys were hospitalized and 35 died. The Health Department vowed to take control of customary procedures before the next initiation season begins. *SABC Television News*, 7/30/01

Grahamstown, East Cape – Xhosa initiates died or were hospitalized as traditional leaders fought over who was to blame. Traditional Leaders chairperson, Mwelo Nonkonyana, lashed out at the government, saying that the provincial government had forced a "nonsensical" act to regulate traditional circumcision. Chief Zwelinzima Mtirara supported the act, saying "This slaughtering of our children is a horrendous crime which must be punished." *East Cape News*, 12/6/01

Queenstown – At least 52 initiates were treated for circumcision complications and three initiates died during the summer circumcision season. *News 24, East Cape, South Africa*, 12/11/01

Umtata – Thirty-five boys and young men were admitted to Umtata hospital after botched circumcisions, with 25 boys having infected penises.

Although a new circumcision act was passed, making it illegal for boys under 17 to be circumcised, traditional surgeons have been circumcising anyway. They were expected to receive heavy penalties. *South African Press Association Johannesburg*, 12/ 22/01

SWEDEN

Borås – A father was sentenced to 3 months in prison for assault and child abuse for taking his 6-year-old son to be circumcised without the mother's knowledge or consent. The circumciser, who performed the operation without talking to the mother, was acquitted. *Expressen*, 7/7/01

TURKEY

Istanbul – Kemal Ozkan expects to perform half the 3,000 circumcisions he did last year at the Circumcision Palace because of Turkey's economic crisis. Now, he demands payment in lira linked to a foreign currency to protect himself from the devaluation. *Associated Press*, 8/18/01

UNITED KINGDOM

British National Health Service Website – "There are no medical reasons for recommending routine circumcision in boys. Circumcision is fashionable in the USA, but the number of complications that occur – including death - outweighs the supposed advantages like avoiding problems such as cancer of the penis. Cancer of the penis is virtually unknown in those who wash regularly."

London

- Following an increase of African immigrants, the British Medical Association called on doctors to involve social services and child protection if families request FGC, which is illegal in the UK. *Reuters Health*, 8/20/01.
- Pravin Chaturbhai Patel, 52, who "guessed" rather than calculated the level of anesthetic he gave to a patient before circumcision, was charged with manslaughter. Andrew Ryan, 20, was given an overdose of local anesthetic, which led to convulsions, respiratory failure, and ultimately death. *Daily Telegraph*, 11/27/01

UNITED STATES

Phoenix, AZ – To save \$400,000 annually, the Senate voted against Medicaid funding for circumcision. *Capitol Medical Services*, 5/18/02

Petaluma, CA – The Intersex Society of North America (ISNA) honored the National Organization of Women (NOW) for becoming the first national feminist group to call for the right of intersex children "to choose and be properly and fully informed regarding cosmetic medical procedures involving their bodies or genitals." Executive Director Cheryl Chase said, "ISNA's mission is to end the shame and secrecy surrounding intersexuality, and putting a stop to unnecessary genital surgeries regardless of the child's sex is just one piece of that work." *ISNA Press Release*, 7/9/01

Des Moines, IA – The Senate passed a bill making FGC a felony, and anyone convicted will face up to 10 years in prison and \$10,000 in fines. *The Des Moines Register*, 2/27/02

Santa Fe, NM – A circumciser at St. Vincent Hospital allegedly showed up on Christmas Day, wearing a Santa Claus stocking cap, to circumcise two infants. How will the babies' encoded pain and trauma of the experience affect their reaction to the yearly appearance of the man in a red cap? *Anonymous report*, 12/26/01

Pryor, OK – Prosecutors filed felony counts against a man and a couple for allegedly binding the couple's 8-year-old boy and piercing his genitals with a hog ring. Jimmy Elrod, 36, Denise Elrod, 38, and Robert Crane, 37, were charged with injury to a child. Denise Elrod, the adoptive mother of the boy and his 9-year-old sister, told deputies the boy was tied up at night to stop him from masturbating, and that the hog ring was applied for the same reason. *KOCO-TV Eyewitness News*, 9/13/01

Aboard USS Peleliu – Surgeons on the American warship USS Peleliu in the Arabian Sea were seeking patients so they could hone their skills to deal with casualties from the U.S.-led military campaign against Afghanistan. The ship's surgeons performed more than 70 operations, including circumcision. *Reuters*, 11/2/01

ANNOUNCEMENTS

Stop Infant Circumcision Society will demonstrate at the U.S. Capitol during *Genital Integrity Awareness Week*, April 1-7, 2003. See: www.SicSociety.org

INTERNATIONAL SYMPOSIA PROCEEDINGS

Sexual Mutilations: A Human Tragedy.

Proceedings, 4th International Symposium on Sexual Mutilations, ed. by George C. Denniston & Marilyn Fayre Milos. 1997. www.amazon.com

Male and Female Circumcision: Medical, Legal, and Ethical Considerations in Pediatric Practice.

Proceedings, 5th International Symposium on Sexual Mutilations, ed. by George C. Denniston, Frederick Mansfield Hodges and Marilyn Fayre Milos. 1999. \$75ppd. NOCIRC, POB 2512, San Anselmo, CA 94979

Understanding Circumcision: A Multi-Disciplinary Approach to a Multi-Dimensional Problem.

Proceedings, 6th International Symposium on Genital Integrity, ed. by George C. Denniston, Frederick Mansfield Hodges and Marilyn Fayre Milos. 2001. \$58ppd. NOCIRC, POB 2512, San Anselmo, CA 94979

Tapes: 7th International Symposium on Human Rights and Modern Society: Advancing Human Dignity and the Legal Right to Bodily Integrity in the 21st Century. Recorded by Shelton Walden. Ordering information: 212-209-2984

BOOKS AND BOOKLETS

NEW! What Your Doctor May Not Tell You About Circumcision: Untold Facts on America's Most Widely Performed – and most Unnecessary – Surgery, Paul M. Fleiss, MD, and Frederick M. Hodges, DPhil. 2002. \$14.95. Available September 2002. New York: Warner Books. ISBN: 0-446-67880-5

Doctors Re-examine Circumcision, Thomas J. Ritter, MD, and George C. Denniston, MD. 3rd ed. (*Say No to Circumcision* retitled). 2002. \$15ppd. Bulk prices available. NOCIRC-PA, POB 103, Mountville, PA 17554

The Female Circumcision Controversy: An Anthropological Perspective, by Ellen Gruenbaum. 2001. Philadelphia: University of Pennsylvania Press. ISBN 0-8122-3573.8

Into Wholeness: The Path of Deep Imagery, Eligio Stephen Gallegos, PhD. 2001. \$15. Moon Bear Press, POB 468, Velarde, NM 87582 [Includes: "Journey to the Healing of My Woundedness"]

Male Circumcision and Female Circumcision Among Jews, Christians and Muslims: Religious, Medical, Social and Legal Debate, Sami A. Aldeeb Abu-Sahlieh. 2002. US\$44.50, clothbound. Shangri-La Publications, 3 Coburn Hill Rd., Warren Center, PA 19951, USA



"Victorious Babies" by Alex Steelsmith

NORM-UK: Alternatives to Circumcision; NORM News: The Journal of NORM-UK; Non-Surgical Techniques for Foreskin Restoration; Your Birthright: Your Foreskin and You. NORM-UK, POB 71, Stone, Staffordshire ST15 0SF, UK. Tel/Fax: +01785 814044

The Plague of Violence: a preventable epidemic, Mitch Hall. 2002. \$5ppd. Checkmate Press, POB 135, Vergennes, VT 05491. Tel: 866-923-9223 www.CheckmateNow.org

Sweet Dreams: A pediatrician's secrets for your child's good night's sleep, Paul M. Fleiss, MD, MPH, FAAP, with Frederick M. Hodges, DPhil. 2000. Autographed copy, \$14.95 plus \$3 S/H. NOCIRC, POB 2512, San Anselmo, CA 94979 [includes important non-circumcising information]

The What's Happening to My Body? Book for Boys, Lynda Madaras with Aria Madaras. 2000. \$12.95 plus \$3.50 S/H (\$1 extra for each additional book). New Market Press, 800-669-3903

VIDEOS

The 8th Day. 53 min. VHS. \$30ppd in US, \$50ppd outside US. Keren Markuze, POB 361425, Los Angeles, CA 90036. Tel: 323-936-6802

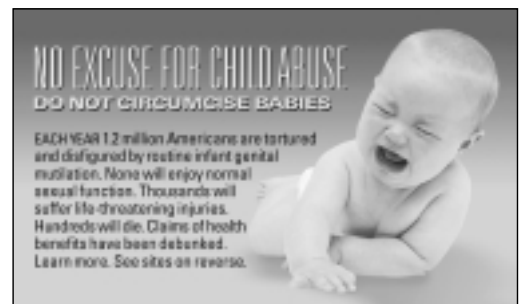
Circumcision? Intact Facts. 18 min. VHS. \$44.05. Enjoy Productions, 1435 Yarmouth, Suite 102-B, Boulder, CO 80304. Tel: 800-326-2082

Intact's Circumcision video
www.intact.ca

Facing Circumcision: Eight physicians tell their stories and discuss the ethical dilemmas of physicians who circumcise newborns. 20 min. VHS. \$25ppd. Nurses for the Rights of the Child, 369 Montezuma #354, Santa Fe, NM 87501. Tel: 505-989-7377

Restoration in Focus, 2001 Edition: An Instructional Video. 35-minutes. PAL format. NORM-UK, POB 71, Stone, Staffordshire ST15 0SF UK. In US, VHS format: www.noharm.org/focus.htm

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Bumper Stickers

<http://hometown.aol.com/gill6034>

Restore Yourself! A Handy Kit for Circumcised Men. \$27.95 ppd. 30-day money-back guarantee. Norm Cohen, NOCIRC of Michigan, POB 333, Birmingham, MI 48012. Tel: 248-642-5703

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Correction: The correct address for Elizabeth Heger Boyle (*NOCIRC Annual Report*, page 7, column 2) is boyle@socsci.umn.edu.

Your tax-deductible donation
will help ensure NOCIRC's continued success. Thank you.

Genital Integrity Awareness Week



The National Organization of Circumcision Information Resource Centers joined other members of the International Coalition for Genital Integrity – Doctors Opposing Circumcision, Nurses for the Rights of the Child, Attorneys for the Rights of the Child, the National

Organization to Halt the Abuse and Routine Mutilation of Males, the National Organization of Restoring Men, and others – at the Capitol to increase public awareness about the right of all children to bodily integrity, during Genital Integrity Awareness Week, 4/1–7/02.

NATIONAL ORGANIZATION of CIRCUMCISION INFORMATION RESOURCE CENTERS

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