

## MEDICAL BULLETIN

**TO:** OB-GYNS – MIDWIVES – BIRTHING CLINICS

**FROM:** NEONCIRC.ORG

**SUBJECT:** NEONATAL CIRCUMCISION AS PART OF AN OVERALL HIV PREVENTION STRATEGY

**SUMMARY:** STUDIES HAVE SHOWN THAT MALE CIRCUMCISION CAN SIGNIFICANTLY REDUCE THE RISK OF HETEROSEXUAL HIV INFECTION IN MALES. ADDITIONALLY, MALE CIRCUMCISION PROVIDES ADDED HEALTH BENEFITS SUCH AS THE PREVENTION OF URINARY TRACT INFECTIONS, REDUCED RISK OF CERTAIN OTHER SEXUALLY TRANSMITTED DISEASES AND PROTECTION AGAINST PENILE CANCER. THEREFORE, WE ARE ADVOCATING THE CIRCUMCISION OF ALL NEWBORN MALE INFANTS AS A MATTER OF GENERAL POLICY TO REDUCE THE LIFETIME RISK OF HIV INFECTION.

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Circumcised men are at a significantly reduced risk of heterosexual transmission of HIV compared with those who are uncircumcised.<sup>1</sup> Circumcision involves removal of the foreskin, which covers the tip of the penis, and typically is performed shortly after birth. Studies suggest that removal of the foreskin is biologically protective against HIV infection because the inner surface of the foreskin does not have the same protective layer as the outside, and is potentially more vulnerable to HIV. Although circumcision has been shown to be somewhat protective against Human Papilloma Virus (HPV) infection and by extension against the associated incidence of invasive cervical cancer, the difference in the rate of infection of other sexually-transmitted diseases was not statistically significant. This was in contrast to the reduced risk of HIV among circumcised men, which was highly statistically significant.

The immediate risks of neonatal circumcision are small. Any operative procedure, including circumcision, may be accompanied by infection of the wound or excessive bleeding. Studies have found a rate of early complications (mostly local infection and bleeding) of 0.19 percent for routine infant circumcision.<sup>2</sup> However, sporadic cases of operative misadventure have been reported in which the glans penis was damaged or partially amputated, or too much skin was removed from the shaft of the penis. Therefore, circumcision of infant boys should only be performed by qualified medical technicians with experience in the procedure.

Although male circumcision may reduce the per exposure risk of female-to-male transmission of HIV, circumcision alone cannot block HIV infection and should be accompanied by formal sexual education programs, including recommendations of abstinence and the use of condoms.

Additional information is available at <http://www.neoncirc.org> or via [info@neoncirc.org](mailto:info@neoncirc.org)

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<sup>1</sup>[http://www.idsociety.org/Content/ContentGroups/News\\_Releases/Circumcision\\_Reduces\\_Risk\\_of\\_Contracting\\_HIV\\_Study\\_Suggests.htm](http://www.idsociety.org/Content/ContentGroups/News_Releases/Circumcision_Reduces_Risk_of_Contracting_HIV_Study_Suggests.htm)

<sup>2</sup> Wiswell TE, Geschke DW. Risks from circumcision during the first month of life compared with those for uncircumcised boys. *Pediatrics* 1989; 83:1011-5