

HIV/AIDS

While many well-intentioned health organizations have cited African circumcision trials as reliable evidence that male circumcision is an effective tool in the fight against HIV/AIDS, these studies are misleading. For example, assuming the quoted 50-60% risk reduction was scientifically valid, this is a “relative risk” reduction, as opposed to an “absolute risk” reduction.

The absolute risk reduction in these studies was only 1.31%

– a significantly smaller number than the figure touted publicly. This misleading and unscientific data manipulation falsely implies that male circumcision is effective at preventing HIV/AIDS. Furthermore, these African trials contradict larger demographic trends with respect to circumcision and HIV/AIDS prevalence. For instance, the United States has a high circumcision rate but also has a significantly higher rate of heterosexual HIV transmission than other countries where circumcision is very rare.

Function

Most circumcising cultures are unaware of the sexual and mechanical function of the foreskin. The foreskin is richly innervated, erogenous tissue, containing thousands of sensory neuroreceptors, such as Meissner’s corpuscles. Many of the most sensitive regions of the penis are located along the inner prepuce and are needlessly amputated by circumcision. The prepuce also acts as a linear bearing mechanism, providing a unique gliding motion during sexual intercourse.



Ritualized removal of normal, healthy genital tissue from powerless infants is medically unethical. Bronze-age rituals must never trump rational scientific judgement, contemporary medical ethics, and the fundamental human right to bodily integrity.



**Children’s Health & Human
Rights Partnership
www.CHHRP.org**

Do you believe in circumcision myths?



***Dispelling common
misconceptions***



An evidence-based
approach from health care
professionals



“Keeping your son intact is healthy.”

For more than one hundred years, North American doctors have promoted infant circumcision as a prevention for illnesses ranging from infections to cancer to tuberculosis to deafness and clubfoot. As our ability to critically assess such claims to determine their validity has improved, medical authorities have changed their policies on this surgery. **No medical organization in the world recommends infant circumcision.**

However, many of the misconceptions and myths that this custom was built upon persist today and have the potential to negatively affect future generations. **Parents have the responsibility to protect their children from harmful practices that are not medically recommended.**

We now understand that infant circumcision is painful, damaging, risky, and unnecessary. Children, whether male, female, or intersex, are all equally deserving of their fundamental right to security of person as outlined in the Canadian Charter of Rights and Freedoms and the Universal Declaration of Human Rights. **Children’s human rights are violated when the foreskin is removed unless for truly emergent reasons.**

The intact penis requires no special care. **Only clean what is seen and never retract the foreskin.** In countries that practice proper intact care, like Finland, the rate of medically necessary circumcision later in life is 1 in 16,667, so if you’ve heard of someone who “needed” to be circumcised, it was very likely caused by premature forced retraction. Most boys are able to retract their foreskin by the end of puberty. Cleaning is a simple retract, rinse, replace at that point.

Reality Checks

Urinary Tract Infections

The bulk of the circumcision and urinary tract infection studies were so methodologically flawed—by failing to control for confounding factors such as breastfeeding—that no meaningful conclusions can be drawn from them. Breastfeeding your baby has been effectively proven to reduce the risk of urinary tract infections.

Penile & Cervical Cancer

The Canadian Cancer Society states: *“there is not enough evidence to recommend circumcision as a way of preventing cancer of the penis”* while the American Cancer Society points out that *“Research suggesting a pattern in the circumcision status of partners of women with cervical cancer is methodologically flawed, outdated and has not been taken seriously in the medical community for decades.”*

Sexually Transmitted Infections

While the entire body of medical literature gives no clear indication one way or the other whether circumcision protects against STIs, more recent studies have shown that the natural intact penis may offer **protection** against the contraction of various STIs, specifically gonorrhea, syphilis, genital warts, chlamydia, and HIV.

To review the literature, visit www.CIRP.org/library