# **Sutureless Circumcission: information for the patients** and parents.

When the foreskin won't retract

- · Phimosis, or preputial stenosis, is a term that usually means any condition where the foreskin of the penis cannot be retracted.
- · Most infants are born with a foreskin that cannot be retracted and the prepuce may be tight until after
- · A fully retractable foreskin occurs in 50% of ten year olds, 90% of 16 year olds and 98 to 99% of 18 vear olds.

#### **Causes of Phimosis**

Phimosis can be caused by failure of foreskin to loosen during growth, infections such as balinitis, deformities caused by trauma and diseases of the genitals.

### **Symptoms of Phimosis**

Phimosis is usually painless condition. Infection may result from an inability to carry out effective cleaning of the area in which case swelling, redness and discharge may all be present making the area tender and painful.

A very tight foreskin can cause problems during intercourse, urination.



#### **Paraphimosis**

An inability to pull back the foreskin into position over the head of the penis can cause pain, swelling of the head of the penis and the foreskin. It may cause restricted blood flow, causing the head of the penis to become dark purple in color. If this should occur emergency treatment is required.

## Inflammation Affecting Head of the Penis and Foreskin

Balanitis is an inflammation that affects the head of the penis and/or the foreskin.

Most common in men over 40 years old, Balanitis is a condition affecting about 11% of adult men and 3% of children. Balanitis is characterized by shiny red to orange plaque (area). It can also present as a yellow hue with red pinpoint spotting.

#### Signs Symptoms of Balanitis

Occurring only in uncircumcised men, balanitis causes the following symptoms:

- · Tenderness
- · Discharge from the penis
- · Impotence
- Swelling
- · Difficulty with passing urine
- · Inability to retract the foreskin

#### **Causes of Balanitis**

The causes of balanitis are not known for sure but include:

- Friction
- · Poor hygiene
- · Response to infection.
- · Various viruses and organisms can cause balanitis. These include HPV (human papilloma virus)
- · Chemical irritants (ie condoms) an allergic reaction
- · In overweight and obese men
- · Penis cancer
- · · · V Diabetes

#### **Complications of Balanitis**

The most common serious complication of balanitis is <u>phimosis</u>, an inability to retract the foreskin from the glans penis.

## **The Circumcision Operation**

In Ireland circumcision can be performed after 1 year of childs birth, this is recommendations from the college of anesthesia .

A straight forward circumcision will take about 5 to 10 minutes. When a circumcision is performed for medical conditions the procedure will take longer, we use a special medical glue to join the edges of the cut foreskin. In adults 3-4 desolvable stitches are used in addition.

The type of anesthesia used for circumcision will depend on the procedure being performed and on the patients age. Babies will often only have a numbing medicine along with a very short GA.

# **Post Operative Care and Complications**

Side effects of circumcision requiring medical attention include:



Blood loss in a small infant is potentially dangerous, slight bleeding including staining of the cloths/ nappies is ok. If the child or adult is continuously bleeding, apply pressure over the wound site as you hold a stick in your hand and contact the hospital where he had circumcision.

- · If a child fails to pass urine after 6 to 8 hours after the operation contact the hospital or local GP.
- · If swelling and redness around the top of the penis does not go or **gets worse** after a 3 to 5 days contact GP. Important thing here is progression of symptoms,if the symptoms are not progressing you can wait.
- · A yellow discharge( not staining of cloths) around the penis tip may indicate an infection (if it persists after 3-5 days). Its very unusual to get post operative infection and if it does, this usually settles with frequent washing and keeping it clean and dry.
  - · Usually antibiotics are not necessary but if the GP or your physician feels its necessary then you have to commence it.
  - · Calpol (Paracetamol) or Neurofen (Ibuprofen) is usually effective.
  - Start washing the wound after 36 hours of the operation.

Apply cream after washing, like pseudo cream, instillagel, or ordinary Vaseline. Over the Glans, to prevent scab formation.

How to Care for Your Wound After It's Treated With DERMABOND\* Topical Skin Adhesive

DERMABOND\* Topical Skin Adhesive (2-octyl cyanoacrylate) is a sterile, liquid skin adhesive that holds wound edges together. The film will usually remain in place for 5 to 10 days, then naturally fall off your skin.

The following will answer some of your questions and provide instructions for proper care for your wound while it is healing:

CHECK WOUND APPEARANCE

• Some swelling, redness, and pain are common with all wounds and normally will go away as the wound heals. If swelling, redness, or pain increases or if the wound feels warm to the touch, contact a doctor. Also contact a doctor if the wound edges reopen or separate.

#### **REPLACE BANDAGES**

- If your wound is bandaged, keep the bandage dry.
- Replace the dressing daily until the adhesive film has fallen off or if the bandage should become wet, unless otherwise instructed by your physician.
- When changing the dressing, do not place tape directly over the DERMABOND adhesive film, because removing the tape later may also remove the film.

#### **AVOID TOPICAL MEDICATIONS**

• Do not apply liquid or ointment medications or any other product to your wound while the DERMABOND adhesive film is in place. These may loosen the film before your wound is healed.

#### **KEEP WOUND DRY AND PROTECTED**

- You may occasionally and briefly wet your wound in the shower or bath. Do not soak or scrub your wound, do not swim, and avoid periods of heavy perspiration until the DERMABOND adhesive has naturally fallen off. After showering or bathing, gently blot your wound dry with a soft towel. If a protective dressing is being used, apply a fresh, dry bandage, being sure to keep the tape off the DERMABOND adhesive film.
- Apply a clean, dry bandage over the wound if necessary to protect it.
- Protect your wound from injury until the skin has had sufficient time to heal.
- Do not scratch, rub, or pick at the DERMABOND adhesive film. This may loosen the film before your wound is healed.
- Protect the wound from prolonged exposure to sunlight or tanning lamps while the film is in place.

If you have any questions or concerns about this product, please consult your doctor.

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