

The Frequency of Circumcision in Infants and Children in Diwaniah

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Abstract

Background: Circumcision is a central feature of islam and is recommended at an early age.

Objectives: To determine the frequency of circumcision in male infants and children from 1 day to more than 6 years of age in Diwaniah.

Materials &Methods: Hundred infants and children were randomly selected from each age group of the following : 1-40 days , 41 days-6 months , 6-12 months , 12-18 months , 18 months- 24 months , 25 – 36 months , 37 – 48 months , 49 – 60 months , 61 – 72 months and more than 72 months. The frequency of circumcision was determined in each group together with other variables.

Results: Six percent of infants between 1 day – 40 days were circumcised , 13 % of those between 40 days – 6 months. Most circumcisions were done by a male nurse and most of the families of the infants and children think that circumcision is better to be done at an older age group.

Conclusion: Sixty two percent of our infants and children up to the age of more than six years are circumcised , there is a need for an extensive education on early circumcision because of outstanding benefits of early circumcision.

Introduction

Circumcision is the removal of a fold of loose skin (the foreskin) that covers the glans of the unerect penis (1).Circumcision is a universal practice which is greatly influenced by cultural and religious tradition (2).Although no consensus exists among scholars regarding the origin of circumcision , some have suggested that Adam (puh) was the first to be circumcised and he did that after he was forgiven from eating from the tree. The first order of circumcision from the God was to the prophet Ibrahim (puh). Jesus (puh) was circumcised and he ordered his followers to do so but the Christians are not routinely circumcised. there are three different statements concerning the circumcision of our prophet Muhammed (pbuh) , one of them stated that he was probably born

circumcised. Historical references indicate that in the Babylonian and the Sumerian civilizations , circumcision was a tradition and clay tablets were found describing the process of circumcision 3500 BC. Egyptian mummies and wall carvings discovered in the 19th century offer some of the records of circumcision dating this procedure to at least 6000 BC. Other authors believe that circumcision developed independently in different cultures. For example on his arrival to the new world, Columbus found that many of the natives were already circumcised (3 ,4).

The indications of circumcision fall into 3 broad groups:

1. medical indications: these include: phimosis, paraphimosis , acute

balanoposthitis and non retractable foreskin in children

2. prevention of future diseases: the diseases that are possibly prevented by circumcision include: penile cancer , sexually transmitted diseases (syphilis, chancroid , herpes simplex) , HIV infection , urinary tract infection , cancer of prostate and cervical cancer.
3. traditional or religious dedication: circumcision of male children is a central feature of Islam and Judaism. Its also important in many African and new world cultures. In Judaism, its usually carried out at the eighth day after birth unless there is a danger to the child health (5).

The performance of circumcision is one of the rules of cleanliness in Islam. It is reported that the prophet Muhammed (pbuh) mentioned:

Five are the acts quite akin to Fitra: circumcision , shaving the pubes, cutting the nails , plucking the hair under the armpits and clipping (or shaving) the moustache(6).

Circumcision in Islam is recommended at an early age , the 7th day after birth, but it can be carried out up to 40 days after birth (7).

Historically circumcision has been a topic of emotive and often irrational debate (8). Circumcision has been practiced widely in western countries, in the USA it increased from 8% in 1870 to 56% in 1910. In Britain it rose from 19 % in 1914 to 22% in 1924 and 30% in 1930(9). From the mid-1940s to mid-1970s over 90% of boys in the USA and Australia were circumcised after birth. A trend not to circumcise started in the mid to late 1970s , after the American Academy of Pediatrics Committee for the newborn stated in 1971 , that there are no valid medical indications for circumcision (10).Several Anti-circumcision Lobby groups appear thereafter such as NOCIRC and UNCIRC , they even promote

procedures to reverse circumcision by stretching the loose skin on the shaft of the retracted penis or the use of surgery. This had led to genital mutilation (11).

With all this debate , there is a universal belief that the benefits of circumcision significantly outweigh the risks (12).

In Iraq , circumcision is a routine practice in all male Muslims but probably not in the other religions , however the timing of circumcision is not fixed and some delay might occur preventing making full use of the benefits of circumcision and in particular prevention of urinary tract infections. Its widely reported that most UTIs in boys aged 5 days to 8 months were in uncircumcised infants (13,14,15,16).

The aim of this study is determine the frequency of circumcision in infants and children in Diwaniyah and to explore the causes of delay in performing circumcision.

Materials and methods

The target of the study was male infants and children aged from 1 day to more than 6 years. The study sample was randomly selected from the following:

1. Infants and children attending the maternity and children teaching hospital in Diwaniyah for vaccination or having mild or simple illness.
2. Infants and children attending private clinics.
3. Children attending a kindergarten and primary school in Diwaniyah.
4. Infants and children of friends and relatives of the authors.

We selected 100 infants or children from each age group of the following:

Group I : from 1 day to 40 days

Group II: from 41 days to 6 months

Group III: from 6 months to 12 months

Group IV: from 12 months to 18 months

Group V : from 18 months to 24 months

Group VI : from 25 to 36 months

- Group VII : from 37 to 48 months
- Group VIII: from 49 to 60 months
- Group IX: from 61 to 72 months
- Group X: more than 72 months

Information were collected on each infant concerning the following : age , residence , educational level of the parents , economic status of the family , who did the circumcision (nurse , doctor , others) , the indications of circumcision in those with early circumcision and the possible causes of delayed circumcision. We consider the age from 1 day to 40 days as the ideal age for circumcision and circumcision after the age of 6 months is delayed. The duration of

the study extended from July 1st 2007 to February 1st 2008.

Results

The total number of the study group were 1000 infants and children , they were divided into 10 groups according to the age , 100 infants or children in each group. Most infants and children were from urban area (63.3 % versus 36.7 % from rural areas). The classification of the study group according to the residence is shown in figure 1.

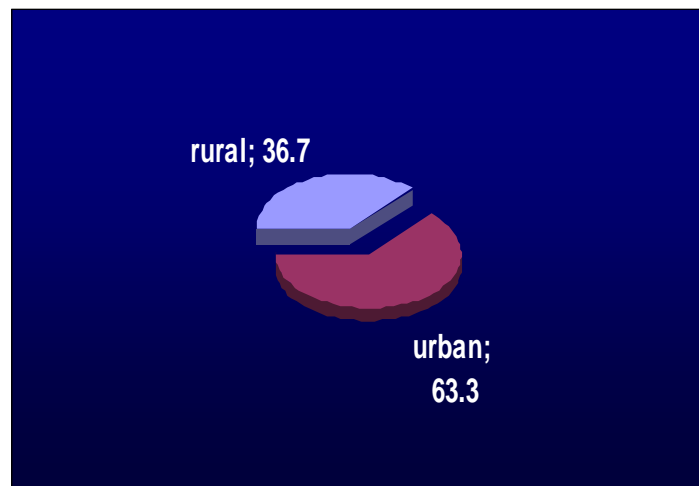


Figure 1. The residence of infants and children

Thirteen percent of the parents were illiterate, 31.9 % had primary school education, 23.05 % had secondary school education, 20 % had institute graduation

and only 12.05 % were graduated from colleges, the educational level of the parents of the study group is summarized in figure 2.

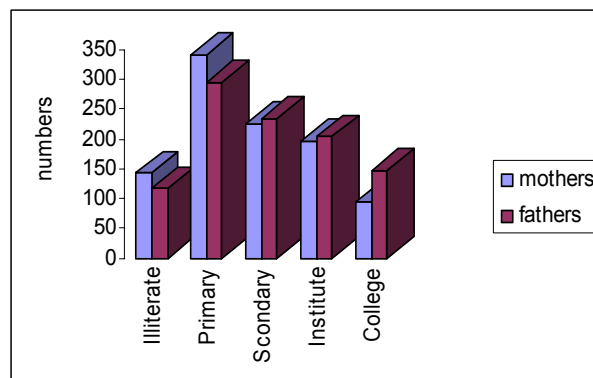


Figure 2. The Education Level of the parents

Most of the families were from the average economic status (63 %), 19 % from a good economic status , 12 % were from a very

good economic status and 6 % were poor, the economic status of the families of the study group is demonstrated in figure 3.

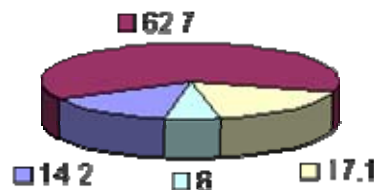


Figure 3. Economic Status of the parents

Male nurses did the circumcisions for 85.8 % of the study group while doctors or other persons did only 13.1 % of the circumcisions , figure 4.

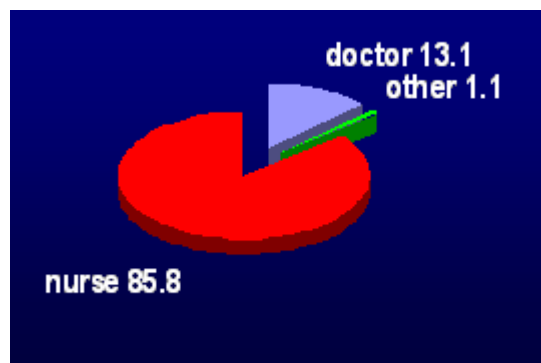


Figure 4. The Operator of Circumcision in the study Group

Only 6% of infants less than 40 days of age were circumcised , 13 % of those between 40 days and 6 months , the overall frequency of circumcision in the 1000

infants and children was 62 % , the frequency of circumcision in the study group is shown in figure 5.

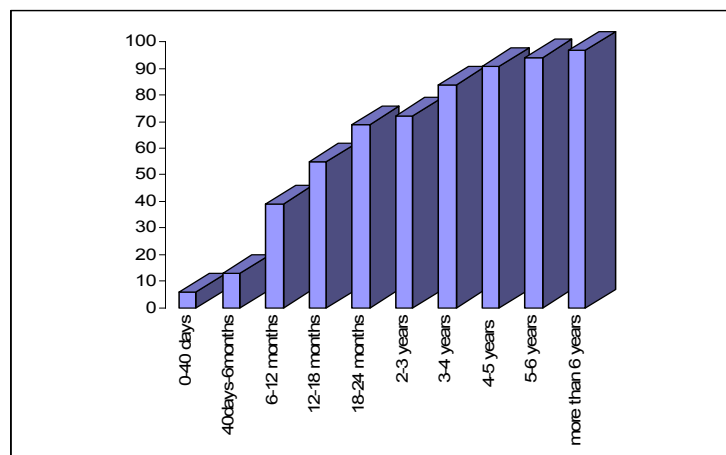


Figure 5. The frequency of circumcision in the study group according to the age Most of the families of the infants and children in this study thought that circumcision should not be done early and

is better if done at an older age group , the other causes of delayed circumcision in our study group are summarized in figure 6.

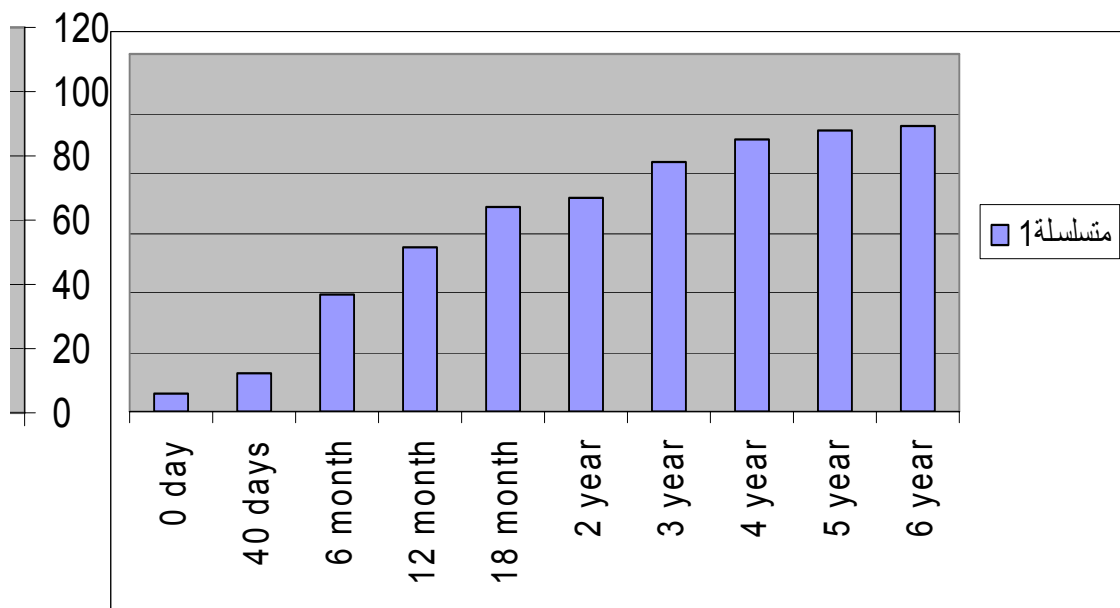
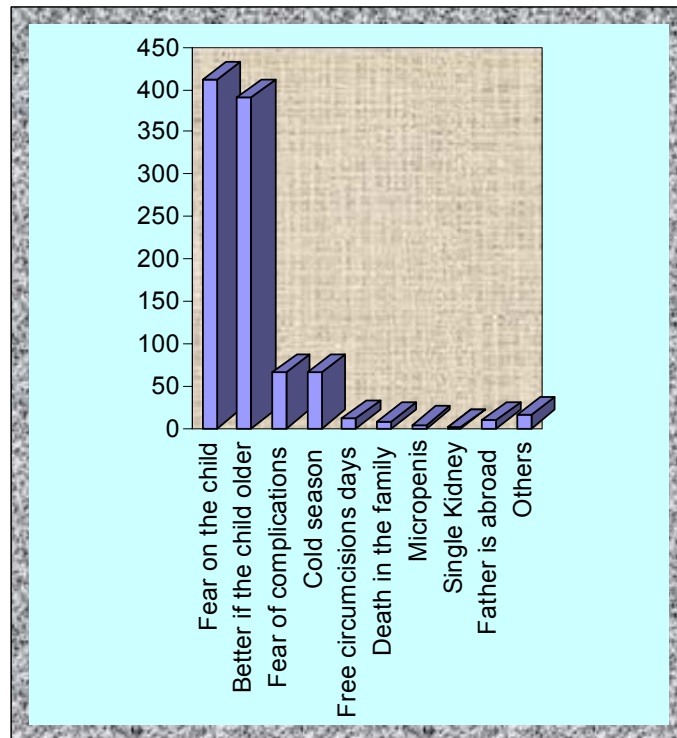


Figure 6. Causes of delayed circumcision in the study group

Most of the 19 early circumcisions in our study group were done for religious or

traditional causes (84.2 %) , the other 15.8 % were due to UTIs.

Discussion

There are no data to help estimate accurately the prevalence of circumcision in infants and children in Diwaniah. Currently , about one quarter of men in the world are circumcised largely concentrated in the USA, Canada, countries in the middle east and Asia with Muslim population and large portions of Africa(17). The greatest benefits of circumcision accrue the earlier in life the procedure is performed, if left till later ages , the individual had been already exposed to the risks of UTIs and carries a residual risk for other problems. Most literatures strongly advocates the neonatal period as being the best time to perform circumcision .It is safe, technically easy, and cheap. The infant needs no general anesthesia and no additional hospitalization (17,18,19,20,21).

Only 6% of our infants between 1 day – 40 days of age were circumcised , this figure is quite low when compared with 65.3% in the United States in 1999 and this was the highest rate of routine neonatal circumcision among the developed nations(22). The high proportion of individuals from urban areas (63.3% VS 36.7% from rural areas) is due to the study design and the place where it was done. There was no significant effect of the educational and economic status of the parents on the frequency of circumcision in our study group(figures 2,3).

Surprisingly , most circumcisions in our study sample were performed by male nurses (85.6%) (figure 4) and this is in contrast to the situation elsewhere where circumcision is practiced by surgeons, family practioners, pediatricians and obstetricians (22). The age at the time of circumcision in our study is considered late (98.1 % over the age of 6 months and 90.6 % over the age of one year are uncircumcised) and this will expose our infants and children to the risks of UTIs which are more likely to occur in the 1st year of life and in the uncircumcised infants(13,15,23) . The average was 12-fold higher , the absolute risk of UTI in uncircumcised boys is approximately 1 in 25 and in circumcised boys is 1 in 500 (24). The causes of delayed circumcision in our study group (figure 5) are closely related to traditional beliefs that (it is better if the child is old). The fear on the child and fear of complications which constitute 48.5 % of the causes of delayed circumcision are mostly linked to the painful and primitive procedure of circumcision done by male nurse using a frightening bone cutter , where pain , infections and difficulty of urination last more than one week , so the child should be old enough to tolerate these complications. Cold season which represent 6.7% of the of causes of delayed circumcision , is another funny cause as there is a false tradition here that all surgical procedures are better to be done during the hot season which facilitate the wound healing !.

The frequency of circumcision in the present study is comparable to that in USA and South Korea and more than that in other countries (figure 7) although these studies are mostly adult studies(25, 26).

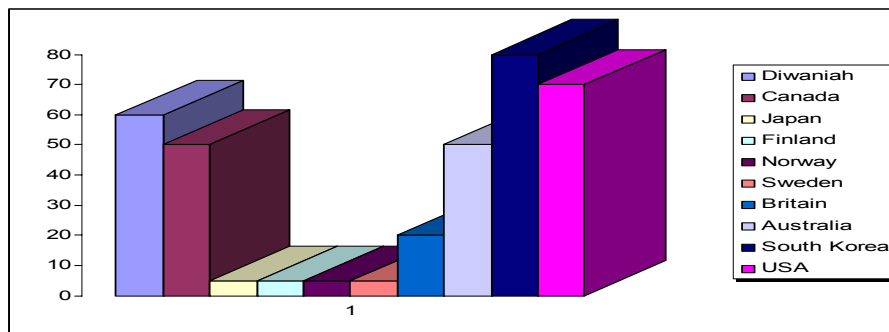


Figure 7. Frequency of circumcision in comparable to other countries

Conclusion and Recommendations

1. Most circumcision in Diwaniah are traditionally done after the age of one year.
2. The majority of circumcision procedures are done by male nurses and not doctors.
3. Most of the families think that circumcision is better to be done at an older age group.
4. There is a very little benefits of circumcision in the prevention of UTI in our children as it is done beyond the proper age.
5. There is a need for an extensive educational program on the benefits of early circumcision and this program should be directed first to the medical and paramedical staffs.

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