



HOW MALE CIRCUMCISION MAY BE AFFECTING YOUR LOVE LIFE

By Dr. Christiane Northrup © 2004

Circumcision, the surgical removal of the male foreskin, usually during the first few days after birth, is an emotionally charged subject that most people are reluctant to discuss openly, let alone objectively.

I know. As an obstetrician-gynecologist, I've performed hundreds of circumcisions, and I've been on the front lines of the circumcision debate for more than 25 years.

Though I've provided information on circumcision for expectant couples for years, it long ago became clear to me that the decision about whether or not to circumcise a boy is made from an emotional not a rational place. Still, the tide is turning as more and more people, both within and without the medical profession, rethink the entire subject.

In the spirit of science and compassion, I urge you to read this article with an open mind. It may well change the entire way you view circumcision.

A Risky, Painful, and Unnecessary Procedure

The sad truth is that throughout most of the 20th century, the American medical community has focused on finding reasons to remove the foreskin of newborn males instead of acknowledging Mother Nature's wisdom in including this highly sensitive tissue. Happily, more and more individuals are questioning circumcision's necessity and acknowledging its potential harm. Since 1980, the national circumcision rate has dropped by 30 percent, and an increasing number of physicians are finding the courage to refuse to perform the procedure.

This is precisely what happened in England, a nation formerly obsessed with circumcision. In the 1940s, following the release of information that supported leaving male babies fully intact, England's circumcision rate plummeted almost overnight to less than 1 percent. Similar information is beginning to gain ground here in the United States, so I'd like to share it with you.

To start with, babies feel pain the same way adults do. But the prevailing wisdom at medical schools has long

been that newborns can't feel pain and therefore don't experience it during their circumcisions. When I was a medical student, this is what I heard from my professors as well, although common sense told me it wasn't true. I watched placid newborns begin to scream and gasp in pain as the circumcision procedure began. Fortunately, it is finally accepted as a medical fact that circumcision is extraordinarily painful for newborns, who are born with full nociceptive (pain sensing) ability.

Furthermore, routine newborn circumcision has no health benefit. Though a wide variety of health advantages have been attributed to circumcision--decreases in the incidence of cervical cancer, AIDS, sexually transmitted diseases, and male urinary tract infection--the most up-to-date research has refuted all these justifications. In fact, the American Academy of Pediatrics issued a policy statement in 1999 saying there is not sufficient scientific data to recommend routine newborn circumcision. Given this, the number of insurance companies willing to pay for the procedure is also decreasing.

Though circumcision is relatively easy to perform, like any surgical procedure it has risks. The most common complication is hemorrhage, which is reported in as many as 2 percent of cases. Though rare, more disastrous complications can and do occur: "degloving" of the penile skin, which requires skin grafts and results in loss of sensation; destruction of the penis; and death from hemorrhage or infection.

Because there are no proven benefits for the procedure in the first place, these complications are all the more tragic. As respected obstetrician and gynecologist George Denniston points out, "Circumcision violates the first tenet of medical practice: 'first, do no harm.' According to modern medical ethics, parents do not have the right to consent to a procedure that is not in their son's best interest. The removal of a normal, important part of the male sexual organ is not in their son's best interest."

Uncircumcised is the Norm

The vast majority of the world's men, including most Europeans and Scandinavians, are uncircumcised. And

before 1900, circumcision was virtually non-existent in the United States as well--except for Jewish and Muslim people, who've been performing circumcisions for hundreds of years for religious reasons.

Believe it or not, circumcision was introduced in English-speaking countries in the late 1800s to control or prevent masturbation, similar to the way that female circumcision was promoted and continues to be advocated in some Muslim and African countries to control women's sexuality. As the absurdity of this position became apparent, new justifications, such as the prevention of cervical and penile cancers, received the blessing of the medical establishment. But these are justifications that science has been unable to support. Nor is there any scientific proof that circumcision prevents sexually transmitted diseases.

Also contrary to popular belief, the uncircumcised penis requires no special care. Many parents get hung up about how to "clean" the uncircumcised penis in an infant. Some are even told to retract the foreskin forcibly. This can cause pain and scarring, and it isn't necessary. The foreskin often does not retract naturally until a child is older--sometimes not until he is a teenager--but a boy can easily stretch and retract his foreskin gently over several months' time.

The Pleasures of Natural Sex

I've always felt that the male foreskin, one of most richly innervated and hyperelastic pieces of tissue in the male body, is there for a reason. Until recently, I didn't know exactly what that reason was. But now, thanks to Kristen O'Hara's well-researched book, *Sex as Nature Intended It*, I finally understand the reasons for the design of the penis and foreskin and how this design ensures optimal penile function, including this organ's ability to satisfy the female sexually. Most American women have not personally experienced the sensation of sex with an uncircumcised man because the majority of men in this country, especially those born before 1980, have been circumcised. But Kristen O'Hara's long-ago affair with an uncircumcised man was the spark that touched off years of research, the result of which is her eye-opening book. Consider the following:

The primary pleasure zones of the natural (uncircumcised) penis are located in the upper penis, which includes the penis head, the foreskin's inner lining, and the frenulum--the hinge of skin that connects the foreskin to the head of the penis. When a male is circumcised, some of the most erotically sensitive areas of the penis are removed: the foreskin

that normally covers the head of the penis (the glans) and some or all of the frenulum.

The frenulum contains high concentrations of nerve endings that are sensitive to fine touch. The glans was designed by nature to be covered all the time except during sexual activity. Upon erection, both foreskin layers unfold onto the upper penile shaft, leaving the highly innervated frenulum, glans, and inner lining exposed and readied for sexual activity. This is one of reasons why the penile tip is the focus of sexual excitement.

New scientific evidence shows that highly erogenous tissue equivalent to the female clitoris is located in the core of the penis, beneath the corona (the hook-like head of the penis) and coronal tip. This sensitive tissue extends all the way down the length of the penile shaft to the pubic mound, where it branches and continues into the pelvis and onto the pelvic bone in a manner analogous to the anatomy of the female clitoris. Though the penis contains nerves that are sexually excited by pressure, its tip contains the greatest density of these nerves and is therefore the most sexually responsive part, just as the tip of the clitoris is the most sensitive part. And like the tip of the female clitoris, the tip of the penis is sexually stimulated by the pleasurable sensations created by the massaging actions of the movement of the foreskin upon it during intercourse.

During intercourse, these exquisitely sensitive nerves of the upper penis both excite a man sexually and control the rhythm of penile thrusting. "When the natural penis thrusts inward, the vaginal walls brush against the erotically sensitive nerves of the glans, the foreskin's inner lining, and the frenulum, causing these nerves to fire off sensations of pleasure;" writes O'Hara. "The inward thrust of the penis keeps these pleasure sensations ongoing, but after these nerves have fired, the penis senses a reduction in pleasurable feelings, so it stops its inward thrust and begins its outward stroke in search of stronger sensations.

"During the outward stroke, the foreskin's outer layer slides forward to cloak the nerves of its inner lining, while the inner lining itself covers the frenulum" she continues. "Once covered, these nerves are allowed to rest from stimulation until the next inward thrust. As the foreskin moves forward on the shaft, it bunches up behind the coronal ridge, and may sometimes roll forward over the corona, depending upon the length of the stroke. This applies pressure to the interior tissue of the corona and coronal ridge where nerves that are excited by pressure send a wave of sexual excitement throughout the upper penis. The natural penis receives pleasure sensations from one set of sensory nerves on the inward thrust and a different set of nerves on the outward stroke. It can

maintain a continuous stream of highly pleasurable sensations by maintaining the right rhythm."

And intriguingly, because the area of sexual sensation is so localized in the tip, the penis only has to travel a short distance to excite one set of nerves or another. In other words, it doesn't have to withdraw very far to receive pleasure on the outward stroke. This allows the penis to stay deep inside the vagina, keeping the man's pubic mound in close and frequent contact with a woman's clitoral area, which increases her pleasure and a sense of closeness.

As part of the research for her book, Ms. O'Hara surveyed approximately 150 women--enough to make the study statistically reliable. Here's how one survey respondent described sex with a natural partner:

"Sex with a natural partner has been to me like the gentle rhythm of a peaceful but powerful ocean--waves build, then subside and soothe. It felt so natural, as if it were filling a deep need within me, not necessarily for the act of sex, but more in order to experience the rhythm of a man and woman as they were created to respond to each other."

The Sexual Consequences of Male Circumcision

After circumcision, the exposed head of the penis thickens like a callus and becomes less sensitive. And because erotically sensitive areas of the penis have been removed, the circumcised penis must thrust more vigorously with a much longer stroke in order to reach orgasm through stimulating the less sensitive penile shaft. In her study of women who have had sexual experiences with both natural and circumcised men, O'Hara notes that respondents overwhelmingly concurred that the mechanics of coitus were different for the two groups of men. Seventy-three percent of the women reported that circumcised men tended to thrust harder, using elongated strokes; while uncircumcised men tended to thrust more gently, to have shorter strokes, and to maintain more contact between the mons pubis and clitoris.

O'Hara's research makes the following sexual comparisons between the natural and circumcised penis.

The natural penis may be more comfortable for the vagina than the circumcised penis. The coronal ridge of the natural penis is more flexible; O'Hara likens it to the resiliency of Jell-O. The circumcised penile head is considerably harder--overly firm and compacted like an unripe tomato. This is because circumcision cuts away 33-50 percent of penile skin. As a result, the skin of the

penile shaft can get stretched so tightly during an erection that it pulls down on the skin covering the glans, compressing the tissue of the penis head. The abnormally hardened coronal ridge can then be very uncomfortable to vaginal tissue during intercourse.

Women sometimes experience a scraping feeling with each outward stroke and even report discomfort after intercourse or even the next day. The brain makes pain-relieving endorphins that may partially block any discomfort during intercourse itself. As a gynecologist, I can tell you that painful intercourse is a very common symptom in women, many of whom blame themselves or who feel that something is wrong with their sexual response.

The give of the natural penis, by contrast, allows for more bend and flex of the organ in the vagina, adding to a woman's pleasure and comfort. The abundant skin of the natural penile shaft further cushions the force of the coronal ridge in the vagina. In addition, the mobile skin of the penis is "grasped" by the ridges of the vaginal mucosa and held in place. The bunching and unbunching of penile skin during intercourse enhances a man's pleasure, but it also excites the woman. As one of O'Hara's survey respondents reported: "What I noticed was that my natural man got a lot of pleasure from deliberate, slow insertion and backing out because his foreskin would fold back and forth, which would excite me also."

Circumcised sex may cause the vagina to abnormally tense up and decrease its lubrication. Women report more problems with lubrication when having sex with circumcised men, possibly because of irritation from the harder tip and involuntary tensing against it, and also because the longer stroke length tends to remove lubrication from the vagina. Often an artificial lubricant is necessary.

Intercourse may also be painful for the circumcised man because his penis scrapes against the ribbed structure of tensed-up vaginal walls and becomes over stimulated from constant pressure. The degree of discomfort, if any, will depend upon the tightness of the man's shaft skin, the vigor of his thrusting, the duration of intercourse, and the amount of lubrication.

Circumcision may cause a man to work harder to achieve orgasm, resulting in emotional and physical distancing from his partner. When a circumcised man has sex, he may have to concentrate intensely on the erotic sensations he is receiving while simultaneously blocking out any uncomfortable sensations. Survey respondents often reported that their circumcised partners seemed to have to

work too hard to achieve orgasm. And because of the erotic tissue that has been removed, he can't enjoy the sensations leading up to orgasm or his partner's responses.

O'Hara makes a compelling argument that circumcised intercourse may frustrate the primordial subconscious that seems to know "real sex ain't this way." She also suggests that each circumcised experience has the potential to buildup negative memory imprints so that over time, repeated sexual encounters with the same partner may lead to negative feelings between the two that carry over into everyday life. If this sounds like an extraordinary leap, consider the question that O'Hara asks in her book: "Other things being equal, which couple is more likely to stay together--one enjoying delicious, satisfying sex or one whose sexual pleasure is being compromised in many ways?"

The Solution: Foreskin Restoration

Fortunately, there are alternatives for men (and their partners) who want to experience natural sex. This quiet revolution, called Foreskin Restoration, can be achieved through plastic surgery or non surgical methods. The latter work on the principle that skin stretches and grows under pressure just like abdominal skin when it stretches to accommodate pregnancy. According to O'Hara, whose husband stretched his foreskin over the course of several years, their sex life is better than ever, and neither can believe the difference that foreskin restoration has made. Many other men and women attest to this improvement as well. For more information, the following resources can be helpful:

National Organization of Restoring Men (**NORM**)
Web site: <http://www.norm.org>

For an initial information packet, send \$5 to cover printing and postage. For information on joining the support network or to learn the location of regional NORM groups send a request with a S.A.S.E. to R. Wayne Griffiths 3205 Northwood Dr. #209 Concord, CA 94520-4506 Tel: (925) 827-4077

The Joy of Uncircumcising! A restoration manual and more, by Jim Bigelow, Ph.D. (Contact UNCIRC, POB 52138, Pacific Grove, CA 93950).

Restore Yourself! A Handy Kit for Circumcised Men from NOCIRC of Michigan Web site:

www.RestoreYourself.com

P.O. Box 333, Birmingham, MI 48012

Tel: (248) 642-5703

Non-Surgical Foreskin Restoration, a Canadian Web site with a great deal of information:

<http://infocirc.org/top.htm>

What about Religious Circumcision?

I am not Jewish (or Muslim), but I can assure you that many Jews are rethinking circumcision. (I do not have any information about Muslims). As a matter of fact, two of the most well-researched and eloquent books on the harmful nature of circumcision have been written by Jewish men. For more information, I urge you to read *Circumcision: The Hidden Trauma* by Ronald Goldman, Ph.D., (Vanguard, 1997) and *Circumcision: An American Health Fallacy* by Edward Wallerstein (Springer Publishing, 1980).

For more information on the Jewish perspective, contact:

Circumcision Resource Center

Ronald Goldman, PhD, PO. Box 232 Boston, MA 02133

Tel. 617-523-0088

Web resource: www.circumcision.org/info.htm

I hope this has been an eye-opening article. I realize that circumcision may not have been the topic uppermost on your mind before you opened your issue this month, but it's my mission to bring you timely, life-enhancing information. My hope is that you'll weigh it and then make the wisest choice for yourself and your family.

