



PROFESSOR

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Circumcision

Circumcision is a procedure where the foreskin, the fold of skin covering the head of the penis, is surgically removed. This leaves the head of the penis (glans) permanently exposed. The operation is usually done as a short day-stay procedure under general or local anaesthetic.

Why would circumcision be recommended?

Circumcision may be suggested to treat a range of conditions, including:

- **Phimosis** – when the foreskin is too tight to retract
- **Recurrent infections** under the foreskin (balanitis)
- **Chronic inflammation** or skin changes, such as balanitis xerotica obliterans (BXO)
- **Warty growths**, including viral warts or Buschke–Löwenstein tumours
- Suspicious or cancerous lesions involving the foreskin

Prof Lawrentschuk will recommend this procedure if it is the most suitable and lasting treatment for your symptoms.

The procedure

The procedure typically takes **less than 30 minutes**. It is completed by Prof Lawrentschuk where he will make an incision just below the head of the penis to remove the foreskin. It is usually performed under a **short general anaesthetic**, but local or spinal anaesthetic may be used instead. The surgery can involve the use of the following:

- A local anaesthetic nerve block is also given to reduce discomfort after the procedure.
- **Dissolvable stitches** are used to attach the remaining skin - these fall away naturally within 2–3 weeks.
- A single dose of **antibiotics** may be given at the time of surgery if there are no known allergies - this helps to prevent any possible infections.

In some cases, Prof Lawrentschuk may use a small camera (urethroscope) to examine the inside of the penis during the procedure, especially if other abnormalities are suspected. This is very safe and brief.

Before surgery

You will be contacted 1-2 weeks prior to your scheduled procedure with your fasting and admission and time. You will also receive a link to complete your online admission forms.

It is important for you to advise the rooms if you are taking any **blood thinners** or any prescribed medications for **diabetes or weight loss purposes**.

Following surgery

Recovery at home

You will go home the same day in most cases. Some discomfort, swelling or bruising around the penis is normal. Please note the following:

- **Pain** is usually mild and well managed with paracetamol.
- **Avoid sexual activity** (intercourse and masturbation) for around four weeks.
- Some men feel **tightness** or **stretching** with early erections - this is expected and improves over time.
- The **stitches dissolve on their own** - you do not need to have them removed.
- The final appearance may take a few weeks to settle.
- To reduce pain, wear **loose-fitting clothing** for two to three days
- Please **do not swim** for 1-2 weeks

The procedure will not affect erections, ejaculation, sensation or fertility. Any dressing should fall off within 24 hours; if it does not, or if it becomes soaked with urine, you should remove it.

You must not drive for at least 24 hours after a general anaesthetic. You should only resume driving when you are alert, pain-free, and able to do so safely.

Possible side effects

Swelling of the penis (usually lasts for 2-3 days)	All patients
Increased sensitivity of the head of your penis (can last for up to 2 weeks)	Almost all patients
Permanently altered or reduced sensation in the head of the penis	Almost all patients
Infection of the incision requiring antibiotics or surgical drainage	1 in 50 – 1 in 100
Bleeding from the wound, occasionally requiring further procedure	1 in 50 – 1 in 100
Dissatisfaction with the cosmetic result	1 in 50 – 1 in 250
Swelling of excess skin requiring further surgery	1 in 50 – 1 in 250
Anaesthetic or cardiovascular problems possibly requiring intensive care	1 in 50 – 1 in 250

Alternative treatment options

In some cases, medical treatment may be trialled before surgery. This may include:

- Short-term use of **steroid creams**
- Altering **cleansing routines** and trialling antifungal or antibacterial washes

These measures may help temporarily, but they are often not a long-term solution. If the problem persists or recurs, circumcision is usually recommended for a definitive outcome.

When to seek help

Please contact **Professor Lawrentschuk's rooms** on (03) 9329 1197 or attend your nearest **Emergency Department** if you experience:

- Excessive bleeding
- Fever above 38°C, chills, or severe abdominal pain and/or nausea.
- Inability to urinate

Follow-up and monitoring

You will usually have a follow-up appointment with Prof Lawrentschuk or our Urology Nurse, Thili, within 6-8 weeks after surgery to assess your recovery and evaluate the need for further treatment or medication.