

# CDC: Circumcision benefits outweigh risks (Update)

2 December 2014, by Mike Stobbe



In this July 28, 2011, file photo, anti-circumcision activists Frank McGinness, right, and Jeff Brown rally against circumcision with about 25 protesters outside a San Francisco courthouse. On Tuesday, Dec. 2, 2014, U.S. health officials released a draft of the government's long-awaited guidelines on circumcision, which say benefits of the procedure outweigh the risks and health insurers should pay for it. (AP Photo/Noah Berger, File)

U.S. health officials on Tuesday released a draft of long-awaited federal guidelines on circumcision, saying medical evidence supports having the procedure done despite opposition from advocates who decry the pain, bleeding and risk of infections to newborns.

The guidelines stop short of telling parents to get their sons circumcised. That is a personal decision that may involve religious or cultural preferences, said Dr. Jonathan Mermin of the U.S. Centers for Disease Control and Prevention, or CDC.

But "the scientific evidence is clear that the benefits outweigh the risks," added Mermin, who oversees the agency's programs on HIV and other sexually transmitted diseases.

Circumcision is a brief medical procedure that involves cutting away the foreskin around the tip of the penis. Germs can grow underneath the foreskin, and CDC officials say the procedure can lower a male's risk of sexually transmitted diseases, penile cancer and even urinary tract infections.

The CDC started working on the guidelines about seven years ago, when a cluster of influential studies in Africa indicated circumcision might help stop spread of the AIDS virus.

"The benefits of male circumcision have become more and more clear over the last 10 years," said Dr. Aaron Tobian, a Johns Hopkins University researcher involved in one of the African studies.

The thinking on circumcision has swung wildly. It's been practiced by Jews and Muslims for thousands of years, but didn't become common in the U.S. until the 20th century. By one estimate, only 25 percent of U.S. male newborns were circumcised in 1900.

It gradually became the cultural norm, and in the 1950s and 1960s surpassed 80 percent. But then the trend reversed. Part of it had to do with changing demographics, as the U.S. population grew to include larger numbers of Mexican-Americans and other ethnic groups that didn't traditionally circumcise their children.

Also, opposition to the procedure was aided by the Internet and by the neutral stance of physicians groups. A wave of U.S. state programs stopped paying for newborn circumcisions. By 2010 the newborn circumcision rate was down to about 58 percent, according to one CDC estimate.

But more medical evidence came in supporting the procedure—particularly three rigorous and influential studies in Africa that looked at the spread of HIV and other sexually transmitted diseases in circumcised and uncircumcised men and their

partners.

In the new guidelines, the CDC says there is now strong evidence that male circumcision can:

—Cut a man's risk of getting HIV from an infected female partner by 50 to 60 percent.

—Reduce their risk of genital herpes and certain strains of human papillomavirus by 30 percent or more.

—Lower the odds of urinary tract infections during infancy, and cancer of the penis in adulthood.

Studies have not shown that circumcision will reduce an HIV-infected man's chances of spreading the AIDS virus to women. And research has not found circumcision to be a help in stopping spread of HIV during gay sex.

The guidelines say circumcision is safer for newborns and infants than for older males, noting the complication rate rises from 0.5 percent in newborns to 9 percent in children ages 1 to 9, according to the CDC. Minor bleeding and pain are the most common problems, experts say. For the next 45 days, the CDC will receive public comment before finalizing them next year.

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