

Barbara Kay on circumcision: A painless, live-saving surgery

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FULLCOMMENT

In 1970, some 97% of American males, and about 70% of Canadian males were circumcised. Those numbers have fallen dramatically, thanks in large part to ardent activism by anti-circumcision “rights” groups.

[Jackson Doughart believes](#) that the Canadian government should pass legislation that would prevent religious leaders and health-care legislators from performing or authorizing the ritual circumcisions of newborn children. He bases his argument on two often-adduced moral grounds: that the circumcision of infants violates their human rights, because they cannot give informed consent to the procedure, and that male circumcision is a “mutilation,” comparable to female genital mutilation (FGM), already outlawed.

Before addressing Mr. Doughart’s moral concerns, I stipulate to set aside any religious argument for our debate. I can assure Mr. Doughart that Jews, myself included, would unequivocally renounce the ritual of male circumcision if scientists provide a causal link between circumcision and increased risk for morbidity. But after 5,000 years of what is essentially a massive controlled study of Jewish and Muslim men, from which no negative effects can be ascribed to male circumcision, that is unlikely to happen.

Conversely, Mr. Doughart should stipulate to endorse male circumcision if it can be shown to decrease the risk for morbidity. Which it can.

The World Health Organization (WHO) recommends male circumcision on the basis of irrefutable evidence that it dramatically lowers the rate of HIV, not just in men, but in women and children (according to one British researcher, “The foreskin of the penis is a magnet for HIV.”)

The WHO’s bullishness regarding circumcision rests on a widely-hailed, uncontested South African study (randomized and controlled) concluding that “male circumcision provides a degree of protection against acquiring HIV infection, equivalent to what a vaccine of high efficacy would have achieved.” Extrapolating from the study, it is estimated that in the next 20 years, circumcisions in sub-Saharan Africa can prevent 6 million infections and 3 million deaths. The study “demonstrat[es] that surgery can be used to prevent an infectious disease.”

Yet Mr. Doughart shrugs off this miracle, claiming there are “far better ways” to eliminate HIV, like “educating youth about sexual health and condom use.” Actually, both have been tried. They don’t work in significant numbers (although sexual-fidelity campaigns have been effective: is Mr. Doughart on board for those?).

Passing to the moral realm, the argument of “informed consent” is easily demolished by the fact that we routinely vaccinate our children against disease without their consent for their own good. Even before we knew of the HIV connection, amongst those circumcising their sons, health and hygiene were always the reason. STDs are much more common in uncircumcised men, and circumcision causes a 12-fold reduction in the incidence of urinary tract infections. Complications from circumcisions performed by experienced surgeons and mohels are as rare as those springing from dental procedures or vaccinations: that’s to say, statistically negligible.

On to the pernicious myth that male circumcision, a 30-second procedure, is a “mutilation” and the obscene canard that it is the equivalent of sexist FGM. FGM is a horribly protracted and painful cutting of girls under terrifying circumstances, with the specific intention of eliminating the capacity for sexual pleasure, and rightly considered a criminal action. According to UNICEF, at least 100 million women have been genitally mutilated. Compared to their uncut peers, these women are 69% more likely to hemorrhage after childbirth, and up to 55% more likely to deliver a dead or mortally ill baby. For every 100 deliveries, the WHO estimates FGM kills one or two more children.

“Mutilation” is a disgusting word to apply to the excision of a non-essential bacteria trap, nearly painless and instantly forgotten (those who claim otherwise are fantasizing; no credible study demonstrates lasting effects). Unlike ordinary circumcised men, FGM victims know they have been mutilated in the real sense of the word. Feminists constantly remind us that men have all the power. If true, how is it that after so many thousands of years — coincidentally up to the advent of the sexual revolution and the privileging of erotic freedom over ethical mating — so many millions of intelligent and even powerful Jewish and Muslim males never spoke up about their alleged victimhood?

Set aside the rights-based rhetoric. It’s about sex: Circumcised men have greater pre-orgasmic endurance; non-circumcision permits more frequent ejaculations. What matters most to the anti-circumcision activists is their diminished pleasure with frequently changing sexual partners, as befits an era where the number of conquests is a more common metric of romantic success than long-term relationships. Our legislators have better things to worry about than this.

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