CIRCUMCISION: MYTH, RITUAL, OPERATION

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“It is a distinct pleasure for me to come before you to deliver the A.M. Ismail Oration. It is not merely the pleasure of meeting with the many friends and colleagues whom I have known for many years but the pleasure of nostalgic memories brought back by the name of Abdul Majid bin Ismail.

I was fortunate in being appointed a tutor in surgery early in my career, and took his group before the final examinations in a revision course in surgery. You know the kind of thing — all surgery in thirty-six easy lessons, a guarantee to pass the Final Professional Examinations. It was the first of such courses and there was always a full and responsive audience. I do not know what good I did them, but I do know that they taught me an enormous amount of surgery and I learnt the lesson through them that teaching could be the best form of learning.

I had already learnt early in my career that my best tutors would be my patients. The group that graduated in 1950 taught me that my next best tutors would be my students. My own teachers had, of course, a vested interest and a proprietorship in their students, but I do not think that they exceeded the benefits to me that accrued from my patients and students. From this group of seventeen graduates, there emerged distinguished surgeons such as Syed Mohammed Alhady, A.M. Ismail, Seow Li Jin and the late Goon Seck Mun.

I had the pleasure of meeting the Prime Minister Dato’ Seri (Dr) Mahathir Mohamad at a party given in his honour by his erstwhile colleagues in Singapore. As we shook hands he said, “I do remember your lecturing to us but I cannot recall what it was about”. I hastened to reassure him that what it was about was of no great moment. In fact I had forgotten what it was about myself. More than that, I was actively trying to forget some of the “all abouts” that I learnt and taught at the time as so much of it has become outmoded because of the great changes in outlook and technique that have accrued in the last thirty years.

When I was honoured by being asked to deliver this oration, I found myself at a loss for a subject. I have spoken often on subjects such as post-graduate surgical education, continuing education, medical organisation, medical ethics, surgery in prospect, surgery in retrospect, and felt that all these subjects had been flayed to the bone — particularly the subject of surgical training. Perhaps I have become cynical in coming to the conclusion that whatever method we choose to train surgeons, the good will inevitably remain good, the bad bad, and the indifferent indifferent. I had to find something new

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as a subject that had some medical interest and yet had, in its substance, aspects that were of historical or even philosophical meaning, and in doing so, rebut the accusation that has often been levelled against our profession, that we are educationally and intellectually stunted.

Many have an impression that the rite of circumcision began with the Hebrews. Such an assumption would be quite erroneous. An examination of the extensive literature on the subject reveals that it was (and still is) practised by its adherents for a period of some 5,000 years. It has been and is a widespread practice with a multitude of connotations – some correct and some assumed. The practice has quite independent origins in ancient tribes in America, Africa, Australia and not least the Middle East and the other areas in Asia.

It has been suggested by Elliot Smith that circumcision was practised by the “heliolithic” cultures, i.e., cultures that were given to the worship of the sun. For example, there is more than ample evidence that it was practised by the ancient Egyptians – but reserved only for the priests, warriors and those of royal blood. The oldest Egyptian mummies are about 4,300-years-old and these were circumcised. It is not known if some of the plebeians or the “hoi polloi” were also circumcised as their bodies were not embalmed and only their bones have been left. I have seen murals in ancient Egyptian tombs in Karnak, where the rite is clearly depicted. However, the Egyptian religion of old cannot be considered to be a purely heliolithic culture. The Egyptians had many gods and goddesses who were often depicted with animal heads and they seemed to have been obsessed with the underworld. In a short period in their history, Achenaton established a monotheistic religion. His god was the sun and the emanations from his deity were the sun’s rays. After his death, his successor Tutankhamun of museum fame reverted to the polytheistic culture.

Putting aside the theory that it was practised by the heliolithic religions, L.H. Gray, writing about 1910 states, “the operation may be said to be almost worldwide with the exception of Europe and non-Semitic Asia. The Indo-Germanic peoples, the Mongols and the Finno-Ugric races alone are entirely unacquainted with it. It can scarcely have been practised in pre-Aryan India, for there is no allusion to it in Sanskrit literature, and no trace of it in modern India, even by people untouched by Hindu civilisation”.

His statement that it was not practised by non-Semitic Asia must be called to question, for it was indeed practised by many peoples of Polynesian and Melanesian origins.

Some sort of circumcision rite was found to be practised in countries as far strung as Eastern Mexico, Tahiti, Tonga, Samoa, among Australian tribes especially in East New Guinea and other Melanesian districts and in Fiji. It is practised by many tribes in Africa. In contrast to this tribalism, we have the individual Pythagoras, who you will recall, invented the $a^2 + b^2 = c^2$ formula, who had himself circumcised “in order to thoroughly investigate Egyptian religious teaching”. This is an indication of its importance at that time as a qualification for initiation and introduction to a community.

I think at this stage we want to take cognizance of what is meant by the term “circumcision”. The origin of the word is simple enough. It comes from the Latin word “circumcido” which means “cut around”. It has been used loosely to involve a variety of practices in different parts of the world. It varies from a simple gash of the prepuce as in the American Continent and some Pacific Islands such as Tahiti and Samoa, to a dorsal slit of the prepuce as practised by some Australian tribes, or the simple tearing of the prepuce as in Tonga or Fiji. With some tribes the dorsal slit extended through the entire length of the dorsum of the penis to the skin of the lower portion of the abdomen. At the other extreme, there is the practice of ariltha or mika by some Australian tribes. In this procedure, the whole of the penile urethra is slit and laid open from the meatus to its junction with the scrotum. In other words, it was the creation of an artificial hypospadias. The subjects enjoined by this custom were not allowed to marry until ariltha was performed. No worthy explanation has been found for the object of this
procedure. With the Bani Chams, a tribe in Australia, circumcision “is represented ritually by a mock ceremony performed by a head priest with a wooden knife and connected with name-giving”.

The ultimate fate of the prepuce in times gone by may be of passing interest. Some African tribes cast it in the river and others buried it in the ground. The Turks used to bury it in the ground as did the ancient Levites when wandering in the wilderness of Sinai. Other practices make us feel more squeamish. With one tribe, the dismembered skin was soaked in brandy and was swallowed by the subject. With others, it was swallowed by the operator. In Madagascar at one time the participants were bypassed. The prepuce “was wrapped in a banana leaf and given to a calf to eat”. Another practice was for the lad to carry his dried prepuce with him to promote virility. The Tartars apparently excised a triangular piece of skin which was wrapped in cloth and kept by the mothers. However, if the mothers were dead or absent, the skin was merely thrown away. Superstitions abound in various practices. In one Australian tribe, the younger brother swallows the elder brother’s prepuce to make him tall and strong. This is of course related to primitive customs when the penis of a slain warrior was worn by the conquerors to add to their strength the courage of the dead. One tribe in Northern Queensland would string it to human hair and hang it around the mother’s neck to “keep the devil away”. Another tribe buried it beside a pool to make the water lilies grow.

In many different tribes, certain foods are forbidden and are taboo in association with the ceremony.

With most tribes it would seem that the ceremony was to be undertaken by all male members of the tribe. Mention has already been made that among the ancient Egyptians the rite was probably limited to royalty, priests and warriors. The Egyptians did not seem to attach any religious significance to the rite. In contrast, among the natives of Tonga, the highest chief was the one person exempted from the procedure because it was thought that his person should be above such an assault.

At various times in history, there was considerable opposition to circumcision. The Romans were especially averse to it. During their period of influence over Egypt, they devised very stringent rules to limit it only to descendants of priests and only on production of documentary proof. The Graeco-Romans sneered at the practice from the time of Horace onwards. One Roman emperor is said to have referred to circumcision as a barbaric custom of the Jews. However, he would have thought nothing of hurling malefactors to their death over the edge of a cliff, known as the Tarpeian Rock, overlooking Rome!

What was it that motivated so many different peoples, both so-called civilised and so-called primitive from so many parts of the world, to zoom on the genitalia and establish this peculiar rite in one fashion or another? Anthropologists have produced many theories for there are few legends or theories of its origin from the people concerned. When questioned, they would say, “It was done by our fathers”, – as good an answer as any to the practice even in modern times.

The first theory is that of hygiene and this theory may be eliminated because most of the people involved had hardly any concept of hygienic principles.

Some have suggested a sexual connotation – that it was a preparation for sexual life, a theory perhaps supported by the practice among some that one had to be subjected to circumcision before he was allowed to marry. It was also supposed to protect the individual from the perils of sexual relations. Some suggested that it was some form of sanctification of the generative faculties. While the philosophers Philo (in his De Circumcisione) and Maimonides maintained that the subject was to check lust, Sir Richard Burton on the contrary suggested that “removal of the prepuce blunts the sensitiveness of the glans penis and protracts the act of Venus”. There is no evidence, either physiological and psychological in modern thought, that can support either of these theories seriously.

The idea that it was a tribal mark can be entertained, for many tribes fashion scars on their chests and
faces as a form of tribal recognition. It certainly served this purpose for the ancient Hebrews in their tribal battles with their neighbours. The Philistines and the Canaanites were not circumcised. This enabled the Hebrews to identify their dead after battle and carry them away for proper burial.

We are left with two theories that may be seriously considered. One that it was a sacrifice of part of an organ that was responsible for the continuity of man — in fact, the immortality of the race. The other that it was a rite of initiation into the tribe. The fact that with many tribes it was done at or before puberty seems to suggest that it was a recognition of tribal membership and an acceptance of the lad’s forthcoming manhood. Whatever the truth of these theories, there seems to be a little evidence that circumcision in early times had a religious significance. If it did have this significance, this aspect of the practice has become misty and is buried in antiquity.

This discussion will not be complete if female circumcision is not given at least a passing mention. Indeed it is in this context that the term circumcision has its vaguest meaning and appears to be used even more indiscriminately than with male circumcision. Circumcision of the female was also practised by many tribes, and the varieties and degrees of this operation on the female have almost defined the word to mean an assault on the generative organs. The procedure varied with different clans from a simple incision or even a pin-prick to draw blood as a form of initiation, to a complete amputation of the clitoris with all its bloody and morbid consequences. The intention was to preserve a woman’s chastity by decreasing her sexual desires.

In a further development of this procedure, the labia minora were also excised. The Russian Skoptzy even excised the upper parts of the labia majora. The practice of infibulation goes even further. It consists of suturing together the labia minora to prevent illicit intercourse. The word owes its origin to the Roman custom of fastening a fibula or a clasp to ensure a woman’s purity. In parts of Africa, this rite is initiated before marriage after which the labia are forcibly separated. In some communities it is repeated as often as the husband is away from home. The scars consequent upon such procedures can only be imagined. The difficulties that they produce during parturition can be almost insurmountable. Various papers in the medical press bear witness to these problems. Compared to these practices, the chastity belt which became fashionable in Europe in medieval times was certainly a great advance in technological cunning.

The history of the evolution of circumcision from what seemed to be a tribal custom to a religious ritual, and its vicissitudes in the monotheistic religions, is a fascinating one.

The beginning of this story is in the Bible and starts with Abraham (known in our part of the world as Ibrahim). Abraham or Ibrahim lived in the City of Ur — often referred to as Ur of the Chaldees or Chaldeans — some 3,800 years ago. Ur was in Babylon, a centre of a great culture which was later to become Mesopotamia and is now Iraq. At the age of seventy-five, he moved to the land of Canaan where he communed with his One God.

When he was ninety-nine years old, Abraham entered into a covenant with God, an occasion that is best described in the original language of the Bible, "The Lord appeared unto Abraham and said unto him, I am the Almighty God, walk before me .... I will make my covenant between Me and thee .... And I will establish my covenant between Me and thy seed after thee in the generations for an everlasting covenant .... Every man child among you shall be circumcised .... Ye shall circumcise the flesh of your foreskin .... And he that is eight-days-old shall be circumcised, every man child in your generations .... The uncircumcised man child whose flesh of his foreskin is not circumcised that same shall be cut off from his people; he has broken my covenant”.

This part of the agreement which sounds more like a commandment was absolute and no exceptions were permitted.

Abraham therefore did as he was told and was circumcised when he was ninety-nine-years-old. On the same day, he circumcised his first born son Ishmael who was then thirteen-years-old. Ishmael in
Hebrew means “God will hear”. He is known here as Ismail which is after all what this oration is all about!

One year later when Abraham was a hundred-years-old, his wife Sarah, who was ninety-years-old and heretofore barren, bore him a son. He was circumcised on the eighth day according to the covenant and was called Isaac. Isaac in Hebrew is Itzhak and in Arabic Ishak. Itzhak in Hebrew means “he will laugh”, for Sarah said, “God hath made me to laugh, so that all that hear will laugh with me . . . . Who would have said that Sarah should have given children suck”.

So began a tradition that has lasted through the ages.

Scholars and critics of the Bible question the veracity of the whole story which they presume was composed much later from oral tradition. The account indeed does not form a continuous narrative. Rationalising the account, I have often speculated whether the spark of the idea of the ritual did not begin somewhere in Egypt when Abraham and his wife went there to escape a famine in Canaan.

I do not suppose we shall ever find the answer to these speculations. As the saying goes, “for those who believe, there are no questions, and to those who do not believe, there are no answers”.

The various references to circumcision in the Bible suggest the word had more than a physical meaning. In Hebrew the act of circumcision is termed milah but the ritual is referred to as tahor and its Arabic equivalent is tahur – which means to cleanse or to purify and explains the contemptuous reference by the Hebrews to the Philistines as “the uncircumcised”.

So also in the Bible, the word circumcision came to be used in different contexts. To be circumcised of heart was to be submissive to God. Jeremiah castigated the Israelites of his time who, though circumcised of flesh, were uncircumcised of heart. To be uncircumcised of ears was to be disobedient to God. Moses who was known to stutter said, “I am of uncircumcised lips and how shall Pharaoh hearken unto me?”

In Graeco-Roman times circumcision was proscribed by Antiochus Epiphanes and many mothers who had their sons circumcised suffered martyrdom. The Emperor Hadrian did likewise and this was one of the causes of a Jewish rebellion against Rome by Bar Kochba about the year 132 of the Christian era. In contrast, and also in Roman times, considerable interest was shown in conversion to Judaism although it was never really much of a proselytising religion. Conversion was more popular among women than men, who abhorred the prospect of a painful operation. Considerable controversy therefore arose and some authorities at the time allowed that, for proselytes, circumcision need not be a compulsory and a ritual immersion – that is to say baptism – would be sufficient.

The rite of circumcision is until today associated with the naming of the child and is an occasion for great rejoicing. However, it is not without its feelings of anxiety for the parents as to how their eight-year-old infant will withstand the procedure. But the babies seem to take it in their stride and the parents seem to benefit from, if not actually enjoy, the stress that the occasion creates. One father, when told that his infant son was crying, said, “Ah, that is very good for his lungs”.

With the advent of Christianity, which began as a sect of Judaism, the need for circumcision caused, as the Bible puts it, “no small discussion and disputation” among the early Christians. The Jewish faction insisted that the tradition should be preserved. In the interests of universalising the new religion, St. Paul and the disciples were loth to institute it for the gentile followers. St. Paul was anxious to retain the status quo for both Jew and Gentile. In his first Epistle to the Corinthians, he maintained that if a man was called by the message who was with the marks of circumcision on him, let him not remove them. If he was uncircumcised when he was called, then let him not be circumcised. “Circumcision is nothing and uncircumcision is nothing,” he said. To assuage the Jewish faction he
made his famous assertion in his Epistle to the Phillipians, “If any other man thinketh that he hath whereof he might trust in the flesh, I more: Circumcised the eighth day, of the stock of Israel, of the tribe of Benjamin, an Hebrew of the Hebrews: as touching the law a Pharisee”.

St. Paul was prepared to dismiss circumcision of the flesh as “made by hands”. The descendants of Abraham, he averred, were those who shared his faith and not only the external signs of his circumcision.

Finally the “apostles and elders” came together in Jerusalem in what came to be known as the “Apostolic Council” or the Council of Jerusalem and decided against the necessity for circumcision for gentile converts.

When Islam was established, the ritual of circumcision became ensconced in it. It may come as a surprise to many that there is no mention of the custom at all in the Koran.

It has been mentioned that circumcision was already an established tradition in the Middle-East among many of its ancient peoples. The practice was widely disseminated among the Arabs before their conversion to Islam. It seemed to have been a matter of some pride to the Arabs at that time, for after one of the Prophet’s battles, when one of the slain Thaqafites was found to be uncircumcised, great pains were taken to prove that he was a Christian slave and not a member of the clan.

Although circumcision is not mentioned, those who wished to justify it on the basis of the Koran quoted the 95th verse of the 3rd Sura, “Allah speaketh truth; So follow the religion of Abraham, the upright. He was not of the associators”. This, however, does not specify a practice but refers to Abraham’s faith in general.

Circumcision among Muslims might be attributed to Sunnah – that is to say a “pre-Islamic practice not abrogated by Islam” which subsequently became incorporated naturally into the Islamic tradition. Whether or not it was to be an absolute obligation was contested by various schools of thought. The Shi’ites considered it to be obligatory for all Muslims including the proselytes to Islam. Others were of the view that, “in the case of the convert from other creeds to whom the operation may be an occasion of great suffering, it can be dispensed with, although it is considered expedient and proper for all new converts to be circumcised”.

At different times among some communities the rite was not observed at all. All these variations and views can be considered to be purely academic – so much so that in recent times the Anglo-Islamic code stated that, “the court will not admit the claim of a male person to sue or defend as a Muslim if it appears that he has never been circumcised”.

Islam is a widely-scattered religion with millions of adherents distributed through many parts of the world with varying local traditions and customs. Islam has no central authority such as that vested by the Catholic church in the Vatican or by the Anglican church in the Archdiocese of Canterbury. Its practices evolved from many traditions relating to it in the form of Hadith or broadly speaking – teachings which were discussed by many schools of thought. Although the basic faith is centred around the Koran, the traditions and practices of the followers had therefore to be varied in their designs and precepts. In early Arabia circumcision was performed at puberty and this would be in keeping with the tradition of Ishmael, who was circumcised at the age of thirteen. The Prophet, however, is said to have selected for his grandsons the seventh day, if the day of birth is not to be counted, or the eighth day if it is. Some felt that failing the eighth day, it should be done on the fortieth day. Thus from the eighth day to the thirteenth year has given various communities a wide choice of the age at which the ceremony should be conducted. In equal measure the ceremonies, festivities and prohibitions vary considerably in different communities and it would take yet another oration to recount all of these. In all communities it is an occasion of great rejoicing for welcoming yet another believer to the brotherhood.

I have often wondered what effect this rite might have on the individual, the family and the community. I have found none. Both among Muslims
and Jews, it is thought of as no more than a ceremony such as a birthday or a wedding and is taken for granted. Indeed, in its deeply founded tradition, it is accepted as a rite that is virtuous if not sacred in its meaning. It is doubtful if there is any lasting effect on the circumcised individual.

In the Jewish system, circumcision is relevant only to an eight-day-old child. In spite of what Sigmund Freud might have to say on infant sexuality, I doubt if a deep impression on the infant is made by this, his first traumatic experience. The Muslim lad knows about the ceremony from his early childhood and has seen and attended many such ceremonies. He is conditioned to the idea, and not only accepts it, but indeed may look forward to it.

We shall now have to skirt the centuries to come to modern times, when the operation has become common in communities that practise it with no religious foundation.

In an editorial in the *British Medical Journal* of 5 May 1979, it was stated that in the United States of America some two million boys are born each year.¹ In some communities, some 80 or 90% are circumcised soon after birth. In the 1930s, about one-third of British boys were circumcised, but in 1975 the rate had dropped to something like 6%, which represents some 20,000 circumcisions a year. In a 1969 study conducted in Melbourne, Australia, it was estimated that about 70% of neonates were circumcised soon after birth.² In Canada, the incidence of neonatal circumcision varies from 2% to 70% in different districts.

The explosion in the popularity of this operation in the western world is certainly deserving of sound study. It should be noted, however, when referring to the western world that it is a common practice only in the English-speaking countries. It is not a common practice in Europe, Scandinavia or South America.

The reasons for this popularity can be attributed to notions of its hygienic advantages and its potential for preventing specific diseases. Foremost among these is the prevention of carcinoma of the penis.³ There is irrefutable proof that circumcision in early infancy provides almost complete protection from this disease. Early studies that showed that the disease was almost non-existent among circumcised Jews stimulated later investigations which showed that it is also rare in all who were circumcised in infancy regardless of ethnic origins. This abolished the theory propounded by some that the predilection to it was hereditary. Circumcision after infancy does not, however, seem to afford the same protection as neonatal circumcision. Its performance in early adolescence does not give protection to penile carcinoma and its incidence in such subjects is lower than in the uncircumcised. On the other hand, it has also been shown that carcinoma of the penis is rare in sophisticated communities where preputial cleanliness is diligently observed. In Sweden, for example, circumcision is unusual and the incidence of carcinoma of the penis is remarkably low, as indeed it is among those of a higher socioeconomic order in most European communities. The incidence of carcinoma bears a direct relationship to phimosis and inadequate cleansing. The theory that circumcision lends protection by eliminating a substantial portion of a cancer-bearing area can be dismissed. Cancers of the penis occur most commonly in non-preputial sites such as the corona glandis and the glans penis itself.

As is well known, carcinoma of the cervix in the female was found to be uncommon in Jewish women. This was attributed to the circumcised state of their partners. However, it has been shown by Kennaway that the data for this is inadequate.⁴ The present view is that the etiology of the carcinoma of the cervix is multi-factorial. Various factors have been incriminated and studied — such as early marriage; multiple sexual relationships; the role of the male partners; trauma caused by multiple child births; the role of oral and other contraceptives; the presence of dimethyl nitrosamines and even cigarette-smoking. Its causation by a herpetic virus now holds sway and can account for its high incidence among women who are subjected to multiple sexual exposures and therefore subject to the risk of herpetic infection.⁵

The enthusiasm for early neonatal circumcision
among obstetricians of today is attributed to the spectre of phimosis, which in turn has been accused of being the cause of both carcinoma of the penis and carcinoma of the cervix.

A popular belief was that it decreased the risk of venereal disease, especially syphilis. This was not confirmed by investigations, although there appears to be some evidence accumulating that circumcised subjects have a lower incidence of the latest variant of venereal disease, that is, herpes genitalis.

In his epoch-making paper, Douglas Gairdner, a paediatrician, writing in the *British Medical Journal*, 1949, established clearly that so-called phimosis was a natural state in the infant. The desquamation of the layer of epithelium that glued the prepuce to the glans penis only took place in the first three years. By the third year, only 10% of children had a non-retractible prepuce and only 6% in adolescence. He maintained that “after about three years of age, steps should be taken to render the prepuce of all boys retractible and capable of being kept clean”.

In an impressive study of 1,235 Chinese children by Lau and Ching of Hongkong, published in the *Singapore Medical Journal* in April 1982, the authors showed that the prepuce was not retractible in all infants up to the age of six months but the incidence of retractibility increased steadily. By the age of 12, over 82% of subjects had retractile prepuces.

Gairdner showed that some 10–19 deaths occurred annually between 1942 and 1947 in the United Kingdom, due to complications of circumcision such as hemorrhage, septicemia and in anaesthesia. These complications, however, had been attributed by others to the casual attitudes adopted to the procedure, which is often relegated to a junior member of the surgical staff, and also to poor pre- and post-operative care. Gairdner's plea that the operation was unnecessary made a big impact on the medical fraternity and accounted for the impressive decrease in circumcision rates in the United Kingdom.

Arguments for and against neonatal circumcision continue to rage incessantly in the medical press, as also indeed among the educated lay public. Its already established status in some countries makes for a demand for uniformity with the father and the siblings. I am sure that most of us surgeons have met with situations where a mother, usually young, produces her infant son and requests that he be circumcised. It would seem that it is always the mothers who make this request. The fathers appear to keep their distance on this issue. I was once confronted by such a mother. When I asked her why she wanted her son circumcised, she said, “Because I want him to look like his daddy”. I ask you, what argument can you muster against one so powerful?

In another personal experience, convention took precedence over religious consideration when an expatriate Jewish mother whose husband was a professor of philosophy asked me to circumcise her three-year-old son. As would be expected, the philosopher father held rather radical views. “Begone”, he had said, “with this primitive custom. I have no use for it”. As the mother was about to return to her country where there was a large Jewish community, she became apprehensive. It was not the religious aspect that worried her. “What will happen to my son,” she wailed, “when he goes swimming and camping with the boys? They will simply laugh at him”. Lest I be accused by the philosopher father of being an extreme reactionary, I suggested that she return to her large Jewish community, where gentle persuasion and reasoning might help change the father’s mind.

I have dealt with this subject in fact and in fancy. The fancy is all mine. It is the facts that concern us. Some of us may have known all of the facts. All of us certainly knew some of the facts. I do not think, however, that all of us knew all of the facts.

What judgement are we, of the profession, to make on the issue of circumcision?

Religious requirements have to be taken into account. Whatever may be said by surgeons, physicians, obstetricians, paediatricians, anthropologists and psychologists, Jews and Muslims will continue to circumcise their sons. It is a religious tradition, and religious traditions cannot be casually dismissed.
What are we to think of the medical aspects of circumcision? There are certainly medical indications for the operation for infants, adolescents and adults. The problem that besets us is in its use as a routine procedure, especially in the neonate. What are we to advise our patients? Obviously there can be no dogma on this subject any more than there is dogma in any clinical situation. Decisions have to be made by each individual doctor, just as he may be called upon to advise on any other condition to which there are opposing views. The subject of circumcision as a routine procedure is worthy of some deep thought. I have often found invaluable as a formula in making any therapeutic decision what has come to be known as the 'Golden Rule'.

About 200 years before the Christian era, a celebrated Rabbi or teacher named Hillel was asked by a would-be proselyte if he could expound the whole law while he stood on one foot. "Yes", said the sage, "what is hateful unto thee do not do unto others. That is the whole law. The rest is all commentary". 200 years later Jesus made the same observation but expressed it in a more positive fashion. He said, "So whatever you wish that men do to you do so to them". 500 years before Jesus, Confucius in The Analect said the same thing. This philosophy, in one form or another, appeared in the writings of Philo, Plato, Aristotle, Isocrates and Seneca. The Golden Rule is invaluable to us in coming to a decision; except that for medical practice I would prefer to have it put a little differently – "Whatever you consider hateful to those that are close to you, your parents, your brothers and sisters, your wife, your sons and daughters, do not do unto others". For we usually take lightly our personal welfare but never the welfare of those who are near and dear to us.

The joy of the practice of medicine comes in making the right decision, in giving the right advice and in seeing the seeds of one's thinking come to fruition. The permutations and combinations of medical conditions are legion. In the panorama of medical progress each problem solved gives rise to others even more obscure. This is as it should be. If the Almighty had not improvised these enigmas for us, our lives would become tedious to say the least. We can only base our thinking on the facts at hand, and we have many of these. Belonging as we do to a liberal profession, we are free as individuals to arrive at our own conclusions. Indications for many surgical conditions are now clear and do not require much cogitation. In others the issues are still in the twilight zone. For all the opposing views that are expressed, the issue of routine circumcision may still be considered to be in the twilight zone. It is in these twilight zones that we are maximally exercised. It is in these exercises that we find the challenges of our work. We can never tell when we start the day what new observation we shall make and what new contingency we shall meet, notwithstanding many years of experience. It is these mysteries that make our lives exciting, and it is in these excitements that we truly live.

Many years ago a friend of mine asked me why I did not go to the races. "Why", I asked, "should I want to go to the races?" "For excitement", he said. "My dear old friend", I said, "I have excitement all day long and every day. All I want to do when I get home in the evenings is to put up my feet and read a book". It was then that it struck me that my friend's life was barren and that he had to look for some vicarious excitement not related to his system of living.

Oscar Wilde once said, "To live is the rarest thing in the world. Most people exist and that is all".

I think I can speak for all of us when I say that we do live in our work and we do live in it every day. Occupied as we are by endless rounds of activity we become insensitive of the contribution that each passing day makes. One day seems to merge into another as do the weeks, the months and the years. It is my belief that it is the imperceptible trickle of each day's actions that surges into the flood that makes our total gratifying experience; and it is each day's experience that links the past to the future.

I cannot end better than by having this sentiment expressed by an old Sanskrit hymn, whose author is unfortunately unknown, in words that are inimitable.
"Listen to the Salutation of the Dawn,
Look to this Day,
In its brief course lie all the varieties and
realities of your existence
For today well lived makes every yesterday a
dream of happiness, every tomorrow a
vision of hope –
Look well therefore to this day."

REFERENCES


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