

UNWARRANTED PRESUMPTION

I can still remember the innocent way my father initiated a conversation that would permanently influence both our relationship and my self-image and bodily security forever. He was a loving father, intent on providing me with all the advantages that he lacked while growing up in the rural South. My father was born in his family's home, and was an intact male. His family was financially poor, and he received little routine medical as a child and teenager. Circumcision was not practiced in his Appalachian community, and he first became aware that that particular genital modification while serving as a U.S. Marine in WWII. His mother was opposed to routine infant circumcision, feeling it was damaging to complete male sexual satisfaction.

I was only eight years old, and was showering in preparation for bedtime. He sat across from the shower, and watched me wash my hair and body. When I touched my genitals to wash my penis, he asked me, "Does the skin over the end of your pee-pee ever bother you or hurt you?" My foreskin was easily and painlessly retractable at that point, and I had just

retracted my foreskin completely to wash my penis. Not understanding the enormous significance of the decision he was then wrestling with about my sexual future, I answered him without hesitation, “My pee-pee is fine, Dad. I like it the way it is, the way it feels, especially when I touch it or rub it up and down. It’s all O.K.” I then rinsed the soap off my penis with foreskin completely retracted, and finished by pulling my foreskin back up over my glans without any hesitation or discomfort. My father then slipped out of the bathroom, without voicing any further queries to me.

I was scheduled for an inguinal hernia repair later that year during my 2nd grade school spring vacation. I had just turned nine years old. My father, without any discussion with or explanation to me about his decision, arranged for our family physician to circumcise me for \$100 while I was still unconscious on the operating table, after the general surgeon had repaired my inguinal hernia. I remember waking up in a hospital bed, my penis in searing pain, my mind in confusion. What disaster had happened to my penis while I was asleep? After hospital discharge, I should have complained to my father in the months while my penis healed from its circumcision that “my pee-pee’s missing something, it’s

not right, it's not all there. Why is part of it missing now, Dad? Did I do something bad to make this happen? Did I make you mad enough at me to hurt me this way? Why did you hurt me like this?" But I wasn't intellectually mature enough to realize that I needed to openly question him about my missing curtains. To my misfortune, he never opened that essential discussion that would have empowered me to accept my genital alternation, and proceed with maturing into practical manhood. My father avoided providing any explanation of any of those questions from me during his lifetime, questions that I so desperately needed to be answered by him, questions that only he could answer.

After my purely cosmetic circumcision, I developed a nervous tic of rubbing my ears. I avoided allowing my father to ever see me nude again for the remainder of his life. I began suffering from nightmares in which I dreamed my body parts were being stolen away from me while I was asleep. I began hiding UNDER my bed at night for security, and would cover my penis with my hands to protect it from further diminution and damage by some unseen monster. These behaviors continued until I was well into my teenage years.

By the time I reached puberty, I had psychologically handled the terror and horror of my childhood loss of my foreskin by simply deciding that my circumcision had never happened, and that I was still genitally intact and retained my ‘curtains.’ I mentally refused to accept that my loving parents would ever allow ANYONE to sexually diminish and damage my sexual equipment and sexual options like that. It was my first serious girlfriend in college who would point out after our first episode of sexual intercourse that “you’ve been cut, part of the skin on your penis trimmed away. You’re just like my brother is, just like all the boys that I’ve ever seen are. I love the look of your parts, without any odor. I love the smooth feel of it, without any loose skin, whether it’s hard or soft. I love your prick, just the way it is, in my vagina, or in my mouth.” I was so upset by the truth when she enthusiastically described with complete approval what I felt was my obvious deformity, my mark of my inferiority, that I broke off our relationship the next day. The clipped penis she so openly adored and appreciated was one that I secretly despised. I wanted to be whole, intact, and complete!

I finished college and graduate school, and went on to enter medical school. I remained in denial for the

next two years about my circumcision status, even though the sophomore medical school lecture on male circumcision included pictures of circumcised penises virtually identical in appearance to that of my own penis. I simply refused to acknowledge that I had been 'cut and clipped' like the rest of my male peers. I refused to see the truth.

My denial delusions about my circ status abruptly ended during my OB-GYN rotation my junior year. One morning during the rotation, another junior student and I were assigned to do circumcisions on all the intact male newborns in the nursery before they were discharged with their mothers at noon that day. More than a dozen male newborns were brought in, and three had already been strapped into Circumstraint boards. The senior OB-GYN resident then demonstrated three different instrument techniques for the procedure, one method on one squalling infant at the time. He then told my partner and I, "I've showed you how to perform a standard circ, so now you can get started on these babies being discharged later this morning. Take your time, do it right, don't leave any loose overhanging skin. Tighter is better, so make sure you leave the glans

completely bared. If you do it now and do it right, they will never know they ever had a foreskin.”

I suspect that the senior resident noticed the distress and discomfort reflected on my face by then, so he concluded his surgical demonstration by continuing with a lecture on the benefits of possessing a circumcised penis. “Every boy deserves the advantages of a clean-cut and low maintenance penis, and this is your chance to give him one. You’re saving these kids a lot of trouble later on with their privates. Do these circs just like I showed you, and you’ll never hear a complaint from the parents when they see the kid’s equipment after he’s been cut. I’m here to watch and see that you get these boys off to a proper start in life, so get started clipping those dicks,” he chuckled. His candor was a genuine attempt to be humorous, while simultaneously reassuring us that we could and should be doing these elective genital surgeries.

As luck would dictate, he was then paged to leave the sound-proofed ‘cutting room’ to attend to an obstetrical emergency on the delivery ward. An attending OB-GYN professor immediately came into the ‘cutting room’ to replace the chief resident. He had been a medical school professor in Cuba, a physician refugee

who left Cuba when Fidel Castro took over political control that nation. The three infants who had been circumcised by the chief resident had been removed from their restraint boards, and genitally intact infants substituted for them. A wailing infant in his restraint board had been placed on the table in front of me, and the nurse asked me which type of sterilized circumcision instrument kit I wanted to use for that infant's circumcision. That was the moment when my years of denial about my childhood circumcision dissolved. Not only was I a victim of genital molestation, but I was now expected to become a genital molester myself! I refused to proceed. I turned to the Cuban OB-GYN professor, and said, "I can't do this, this isn't right, why are we doing this? How do we know this newborn will ever have any problems with his foreskin? This child has no immediate medical need to have his foreskin cut off!"

The professor laughed aloud, and then said to me, "You're right, he doesn't, but in the U.S., he's going to lose his prepuce as an infant so that he will look like his buddies. You are the first medical student I have ever come into contact with who realizes that the routine infant circumcision practiced in this country is simply cultural cosmetic surgery. You shouldn't do any medical

procedure that you cannot justify as essential and beneficial, and you should be able to define what those benefits are for yourself. If you were a Cuban medical student, you would not find yourself in this situation, since routine circumcision is not part of the culture in Cuba. Let the other student do all the cutting, and you will closely observe. I will assure the chief resident myself later about your satisfactory performance this morning.” At that point, my junior student partner (who had attended many a bris) offered to do all the circumcisions that both he and I were assigned to do that morning by the chief OB-GYN resident. So that the attending OB-GYN professor could authenticate my first-hand knowledge about RIC, I spent a very uncomfortable morning watching my fellow junior medical student mechanically amputate in assembly line fashion the normal, natural prepuces of more than a dozen infants as they squirmed and screamed in pain. True to his word, the OB-GYN professor born in Cuba kindly substantiated later that afternoon to our supervising chief resident that I had completed my required number of ‘circs’ in a competent manner.

I remained determined while in medical school and during my family practice residency NOT to be

manipulated or coerced into performing what appeared to me to be the socially accepted elective surgical assault on the male phallus. I considered it an unwarranted presumption that the parents of a child had the automatic right to impose on their child's physical genital heritage their own particular sexual customs or quirks. Without drawing attention to myself, I skillfully avoided doing any elective circumcisions on children during my family practice residency. The residency director didn't understand my ethical qualms about and moral reluctance to perform the circumcisions commonly requested, even demanded by parents for their healthy, normal male infants, but he graciously allowed me to complete my residency anyway without any negative comments.

My medical practice in the decades thereafter was an exercise in frustration, as I repeatedly tried to educate my patients that circumcision is unjustified cosmetic sexual surgery that should only take place after the child is grown and capable of making his own decisions about how much of his penis he wishes to retain. I observed that such decisions about the child's sexual future were not made on what the child might desire in his personal future, but only the genital

appearance that the parents and relatives determined was appropriate for the child. When I would mention to my male friends and relatives my opinion that children had a natural right to retain all their genital parts until they decided otherwise, I would receive bizarre responses that has nothing to do with the issue of children's intrinsic rights to intact bodies. Incredulous when I mentioned to someone that I wished I had never been circumcised, I was told on more than one occasion that I was anti-Semitic or intellectually retarded or culturally ignorant or medically unsophisticated or sexually inexperienced, even mentally ill. If I had not been a licensed physician, I'm sure they would never have even bothered to respond.

I am now retired from medical practice. I have two grown intact sons who both tell me that they are pleased to retain their foreskins. I also have an intact grandson, as well as one intact nephew. My father died before I thought to question him about how I came to be circumcised. I'm sure he would have told me that he simply assumed that I would want my penis to resemble that of my peers, that I would not want to be genitally different or unique. All the details of my childhood circumcision were reluctantly provided to me by my

mother a few years before she died, including the fact of a \$100 charge for my procedure. She purposely waited to tell me until after the family physician who circumcised me had died. She explained that she was concerned that I might lose my temper when I asked him about my 'snip.' She said, "I wanted to protect you from doing something or saying something you might later regret." She may have thought she was wise about waiting until that physician was deceased, but my mother kept me from ever attaining intellectual closure regarding all his reasons for cutting me.

What I also really needed, even required, was to hear from my father that he meant me no harm from my cultural circumcision. I interpreting my circumcision at age nine as a symbolic castration, an attempt by my father to emasculate me. I lived in fear that he would attempt more genital disfigurement, while I resided as a child and teenager in his home. Even though his decision to modify my intact genital integrity was based on false and biased information given to him by respected authorities, I was irreversible damaged by it. It required forty years to pass after his death, before I was able to fully forgive him for his unwarranted

presumption that I would ever desire to phallically resemble my male peers and friends.

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