

Tight foreskin (Surgical treatment of a child's tight foreskin= circumcision)

These instructions are intended for printing. The instructions contain sections to be filled in.

Circumcision is performed, if the foreskin is too tight and causes inflammations and urinary difficulties. However, the foreskin is saved with a dilating procedure, if possible. Such treatments include removing adhesions and a dorsal incision.

Procedure

The procedure is performed under general anaesthesia. Depending on the case, either the adhesions are removed, which ensures that the foreskin is fully retractable, or a dorsal incision is performed, in which a widening incision is made on the contracting part of the foreskin and the skin is sewn back together with a few absorbable sutures. In a circumcision the entire constricting scarred foreskin is removed.

Treatment of pain

The patient experiences pain in the wound for a few days. It is recommended to give regular pain relief to the child for the first few days after the procedure.

Paracetamol

Anti-inflammatory

Gel for topical pain relief can be applied to treat pain on the operated area.

Wound care

The sutures are absorbable and do not require removal. They absorb by themselves within 1–2 weeks. Shower the operated area with warm water twice a day and always when the child goes to the toilet. If the child experiences pain when urinating, showering with warm water helps. After the shower, you may apply a bland ointment or petroleum jelly (vaseline) on the operated area to prevent drying of the mucous membranes.

The area of the wounds does not require special protection. The child may go to sauna a week after the procedure. Choose loose-fitting clothes for the child and change the diaper of a baby

often enough. After the procedure, swelling, bruising, and discharge of tissue fluid may occur on the operated area for several days. This is a part of a normal healing process.

Recovery

The child requires rest and adult supervision on the day of the surgery. The child may move within the limits allowed by the pain. The child may go to day-care or school after 3–4 days, and should not participate in physical education for 2 weeks.

Contacts

If problems in healing arise, contact:

Day Surgery Unit on working days from 07.00–15.00 telephone 06 213 1552,
Emergency Department at other times telephone 06 213 1001, or
Health centre or child health clinic

Vaasa Hospital District • www.vaasankeskussairaala.fi/en • Telephone 06 213 1111

This instruction is intended for our patients who are in care relationship.