
Guidance for doctors who are asked to circumcise male children

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Introduction

Background

1. Issues raised by male circumcision have been drawn to our attention in two ways. First, by complaints that doctors had not provided an acceptable standards of practice when performing this procedure. We have also received inquiries about the ethics of the procedure, asking for our views on whether, and in what circumstances, the procedure would be acceptable for either religious or therapeutic reasons.
2. Circumcision raises difficult questions about the rights and freedoms of individuals. Many people maintain that individuals have a right to practise their religion unhindered. Others feel that it is unequivocally wrong to undertake a surgical procedure, with its attendant risks, on an infant who is unable to consent. These are not solely medical matters and we do not think they can be resolved by the medical profession alone. They are matters for society as a whole to decide. Nonetheless, we have a responsibility to protect patients and to guide doctors and we have therefore undertaken to provide guidance which sets out the principles of good medical practice for those doctors who are asked to perform circumcisions for religious or for medical reasons.
3. The following paragraphs set out the diversity of views on the issues, reflecting the response to our consultation amongst religious groups, civil rights and children's rights groups and the medical profession.

Rights and freedoms

4. Male circumcision is considered by many in the Jewish and Islamic faiths to be essential to the practice of their religion; they would regard any restriction or ban on male circumcision as an infringement of a fundamental human right. Many also believe that if doctors were prevented from carrying out the procedure, parents

would turn in greater numbers to individuals who lack the skills and experience to perform it safely and competently.

5. Others, including those who campaign against the practice of male circumcision, strongly believe that, because circumcision for non-therapeutic reasons carries risks, it is wrong to perform the procedure on children who are not old enough to give informed consent.

The legal position

6. In 1995 The Law Commission issued a consultation paper on consent in the criminal law. This paper argues that male circumcision is lawful in the UK, but this point has been challenged.

7. Article 24.3 of the UN Convention on the Rights of the Child (ratified by the UK Government in 1991) states that ratifying states should 'take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children'. However, this must be balanced against Article 9.2 of the European Convention on Human Rights, which protects the rights of individuals to practise their religion.

8. The legal position is untested in the context of circumcision and therefore remains unclear.

Views about harm and benefit

9. There is also a wide variation of views on the role of the medical profession. Many believe that doctors have a duty to provide the public with objective information about circumcision; and that they should be obliged to provide counselling to parents before, and after, circumcising their child. Others believe that doctors should not put undue emphasis on the risks of the procedure, because there is insufficient evidence to justify worrying parents about them.

10. Similarly, while there is a body of opinion that because circumcision has very few medical benefits, and the potential dangers to the child far outweigh these, circumcision is inappropriate under any circumstances. Other people believe that circumcision causes no harm, and may be beneficial; some would recommend performing the procedure routinely.

Conclusion

11. Our consultation demonstrated widely conflicting views in society, which neither doctors, nor the GMC can resolve.

12. We believe that the welfare of infants who are circumcised must be paramount, whatever the reason for undertaking the procedure. Any medical procedure must be undertaken in hygienic conditions, with appropriate pain relief and aftercare.

13. In drafting our guidance for doctors we have considered, as objectively as possible, all the views and information put to us. Our aim is to provide advice which will help doctors to provide a good standard of care for their patients.

14. Our published guidance does not specifically address the rights of children. However, many of the principles set out in our booklet [Good Medical Practice](#) are of broad application and should be followed by doctors when they are asked to perform circumcisions. The guidance which follows is based on the principles in this booklet.

Standards of practice for doctors asked to circumcise male children

15. If you decide to circumcise a male child you must:

- Have the necessary skills and experience both to perform the operation and use appropriate measures, including anaesthesia, to minimise pain and discomfort
- Keep up to date with developments in the practice of male circumcision including when the procedure is, and is not, necessary for medical reasons
- Explain objectively to those with parental responsibility for the child any benefits or risks of the procedure, taking into account the age of the child
- Explain to those with parental responsibility that they may invite their religious advisor to be present at the circumcision to give advice on how the procedure should be performed to meet the requirements of their faith
- Listen to those with parental responsibility and give careful consideration to their views. You are not obliged to act on a request to circumcise a child, but you should explain if you are opposed to circumcision other than for therapeutic reasons. You should also tell those with parental responsibility that they have a right to see another doctor
- Obtain the permission of both parents whenever possible, but in all cases obtain valid consent, in writing, from a person with parental responsibility before performing the procedure
- Provide appropriate aftercare