

Policy statement:	Circumcision
Status:	Group Prior Approval

Male circumcision is defined as the surgical removal of all or part of the foreskin of the penis.

M&SECCGs commission circumcision on a restricted basis and this procedure will only be funded for therapeutic reasons if the patient meets one of the following criteria:

- Suspicion or evidence of malignancy (use 2ww cancer referral pathway), dermatological disease (such as lichen planus or eczema) which is unresponsive to other treatment, where biopsy is required, and occasionally for selected patients with urinary tract infections (normally referred by a paediatrician)
- Traumatic foreskin injury where it cannot be salvaged.
- Phimosis (inability to retract the foreskin due to a narrow prepuce ring) in children when associated with recurrent infection. This does NOT include normal non-retractile foreskin of childhood.
- Adult phimosis, usually caused by recurrent balanitis or Balanitis Xerotica Obliterans (BXO)(chronic inflammation leading to a rigid fibrous foreskin).
- Paraphimosis (inability to pull forward a retracted foreskin).
- Balanoposthitis (recurrent bacterial infection of the prepuce).

There are several alternatives to treating retraction difficulties (e.g. steroid creams) before circumcision is carried out.

It is important that all those performing circumcision should follow the General Medical Council (GMC) guidelines.

Funding for patients not meeting the above criteria will only be made available in clinically exceptional circumstances.

Individual funding requests should only be made where the patient demonstrates clinical exceptionality.

Further information on applying for funding in exceptional clinical circumstances can be found on the CCGs' website.

References:

British Medical Association. The law and ethics of male circumcision: guidance for doctors. London: BMA,2006

Patient Information:

<https://www.nhs.uk/conditions/circumcision-in-men/>