

Postponed Circumcision Could Often Be Done Earlier

Susan London | October 21, 2014

Although most circumcisions are performed during infancy, many of those postponed could be performed earlier with lower cost and less risk to the patient, according to a study [published online](#) October 20 in *Pediatrics*.

"The large number of nonmedical postneonatal circumcisions suggests that neonatal circumcision might be a missed opportunity for these boys. Delay of nonmedical circumcision results in greater risk for the child, and a more costly procedure," the investigators write.

"For parents deciding whether to circumcise their unborn sons, health care providers can counsel them early in the pregnancy about the benefits and risks of neonatal circumcision compared with postneonatal circumcision. Providers can also foster continuing discussion, providing parents sufficient time to consider the health benefits of neonatal circumcision within the context of their own beliefs and preferences," the authors add.

Geoffrey D. Hart-Cooper, MD, from the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, and the Centers for Disease Control and Prevention, Atlanta, Georgia, and colleagues analyzed 2010 MarketScan claims data to study rates of circumcision among commercially insured males aged 0 to 18 years, and used diagnostic codes to assess clinical indications for the procedure.

In a birth cohort analysis of 222,546 male infants born in 2010, the investigators found that 65.7% were circumcised during the neonatal period, and another 2.1% of the cohort were circumcised by their first birthday.

Results of a cross-sectional analysis showed that of the total 156,247 circumcisions performed in 2010 among males aged 0 to 18 years, 93.6% were done in neonates and 6.4% were done in postneonates. Among those performed after the neonatal period, 46.6% were performed before the age of 1 year and 25.1% were performed for nonmedical indications.

The mean payment of \$1885 for a postneonatal circumcision was more than six times the \$285 mean payment for a neonatal circumcision.

In adjusted analyses, neonates were more likely to be circumcised if they were born in the north central or southern regions of the country (risk ratios, 1.42 and 1.38) or in rural areas (risk ratio, 1.32). They were less likely to be circumcised if their mother was a teenager (0.59), if their hospital stay was a day or less (0.90) or 6 or more days (0.47), and if they were born in the western region (0.64).

The largest shares of neonatal circumcisions were performed by obstetrician-gynecologists (47.4%) and pediatricians (29.0%).

"Studies are needed to assess reasons for nonmedical postneonatal circumcision, to identify possible barriers to neonatal circumcision, and to inform interventions to decrease the percentage of elective circumcisions that occur in the postneonatal period," the investigators conclude.

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