

# Intact America

## Children's Rights

<https://www.intactamerica.org/my-letter-to-the-american-academy-of-pediatrics/>

## Public Facing Advocacy Writing

Aug 31, 2012

On August 29, Intact America launched an email campaign, inviting our followers to tell the American Academy of Pediatrics what they think about the new Circumcision Task Forces Technical Report on [Circumcision](#). The Report, which concedes that the purported health benefits of infant circumcision are not great enough to justify *recommending* it, and that the risks of circumcision have not been adequately documented, somehow concludes that the benefits outweigh the risks. The Report also states that the decision to circumcise baby boys, who cannot consent to have this unethical, medically unnecessary surgery performed on their bodies, should be left to the parents, and, that parents non-medical decision to have their child's genitals unjustifiably altered should be abetted by having Medicaid and private insurance companies pay doctors to do the cutting.

**Heres my letter:**

Dear AAP Leadership,

***What were you thinking?***

***How can you approve a report that extols the benefits of removing the foreskin, a normal body part, without one single word devoted to the function of that body part, or why its there in the first place?*** How credible is such a report, which neglects to mention that the vast majority of the world's men are intact (or as the report says, uncircumcised), and that these men do just fine?

***What were you thinking when you deputized as co-author of the report a doctor who has openly boasted about [circumcising](#) his own son?*** The American Medical Association's code of ethics (AMA E8.19) states: Physicians generally should not treat themselves or members of their immediate families. In particular, minor children will generally not feel free to refuse care from their parents. In 2009, the AAP's own Committee on Bioethics clearly stated that pediatricians who treat their own children violate a fundamental professional [obligation](#).<sup>\*</sup> How can we trust the neutrality or the ethics of a Task Force member who so flagrantly violated his own organization's bioethical principles?

***What were you thinking when you named a specialist in adult sexually transmitted diseases to chair a Task Force to examine infant circumcision?*** Babies and children don't have sex, and thus they are not at risk of contracting an STD. It seems to me, by selecting this individual as chair, the Task Force already knew what it was looking to conclude.

***Would it not have been relevant for the Task Force to mention the limitations of its recommendations?*** Specifically, even if circumcision were to confer some protection from HIV for adult heterosexual men, as claimed by the studies cited, it was found to confer none for women, or for men having sex with men, or for intravenous drug users. ***And, again, it confers no protection for babies and children.*** Furthermore, ***shouldn't the Report have mentioned that if or when an adolescent or adult becomes at risk, there are other nonsurgical ways of avoiding sexually transmitted diseases?*** Shouldn't the words safe sex or condom or abstinence have appeared at least once in the Report?

Given the Task Forces unequivocal conclusion that the health benefits of newborn male circumcision outweigh the risks, ***are you not concerned by the Reports utter failure to address the risks? Specifically, how do you justify the contradictions and doublespeak in the following statements?***

*The true incidence of complications after newborn circumcision is unknown, in part due to differing definitions of complication and differing standards for determining the timing of when a complication has occurred (i.e., early or late). Adding to the confusion is the comingling of early complications, such as bleeding or infection, with late complications such as adhesions and meatal stenosis. (p. 772)*

*Based on the data reviewed, it is difficult, if not impossible, to adequately assess the total impact of complications, because the data are scant and inconsistent regarding the severity of complications. (p. 775)*

*The majority of severe or even catastrophic injuries [such as] glans or penile amputation, methicillin-resistant Staphylococcus aureus infection, urethral cutaneous fistula, glans ischemia, and death are so infrequent as to be reported as case reports (and were therefore excluded from this literature review). (p. 774)*

***Did you not notice any potential liability problems for the AAP and for pediatricians who circumcise that might arise as a result of the Report?*** For example, while discussing the Mogen clamp in its review of complications from particular circumcision techniques and tools, the Report says:

*There were no specific studies of complications because complications are rare; thus, one can only rely on available case reports of amputation. (p. 775)*

No note is made of the fact that the manufacturer of the Mogen is bankrupt, due to lawsuits resulting from these rare complications and amputations, and that any doctor sued for an adverse outcome from a Mogen will be on his own (unless, of course, he can implicate the AAP for failing to inform him of the facts). Also, the review of techniques and tools neglects to cross-reference a mention elsewhere of devastating burns that can occur when electrocautery is used in conjunction with the metal Gomco clamp. Sloppy, at best.

***Did anybody think to ask why no data has ever been found in the developed world showing a correlation between circumcision and disease?*** Since when is sub-Saharan Africa, with high rates of poverty, illiteracy, and disease, the gold-standard comparison population for American pediatrics? Did anybody wonder how it can be that Europe, where very few men have been circumcised, has lower rates of STDs and HIV than the U.S. and better overall health status, along with lower per capita health expenditures?

***Has the leadership of the AAP, knowing that a Task Force was preparing recommendations about infant circumcision, noticed that medical associations in European countries are increasingly calling for doctors to refuse to perform this surgery,*** on the basis that it is risky, medically unnecessary, and a violation of the child's rights? How can you completely ignore the principles and actions of your learned colleagues in other countries?

***Did anybody ask the Task Force to make sure its Report was consistent with other AAP policies, including the statement by the AAPs own Committee on Bioethics*** on Informed Consent, Parental Permission, and Assent in Pediatric Practice? The policy, still in effect, states in part:

*Proxy consent poses serious problems for pediatric health care providers. Such providers have legal and ethical duties to their child patients to render competent medical care based on what the patient needs, not what someone else expresses [The] pediatricians responsibilities to his or her patient exist independent of parental desires or proxy consent. (p. 315)*

***In placing the burden of deciding whether to circumcise their sons squarely on the shoulders of parents (who are not medical professionals), is the Task Force Report on Circumcision contradicting this statement on Informed Consent? By referencing religion and culture as valid elements in parental decision-making (p. 759), is the Report attempting to give doctors a free pass?*** Religion and culture (in the American context) generally lead to circumcisions, but human rights, medical ethics and the mandate to doctors to do no harm clearly lead to leaving a boy intact.

***Most important, have you not noticed the growing outcry among parents, complaining that they were duped by doctors into agreeing to allow harmful surgery to be performed on their baby boys? Are you ignoring the growing body of complaints from adult men protesting that they were robbed of an important part of their sexual anatomy, without their consent?***

***Are any of these considerations not relevant to the pediatrician who would strap down a helpless, screaming baby and cut off part of his penis?***

I look forward to your response.

Sincerely,

Georganne Chapin, MPhil, JD  
Executive Director  
Intact America

\* *Committee on Bioethics, Pediatrician-Family-Patient Relationship: Managing the Boundaries. Pediatrics 124(6), Dec. 1, 2009: 1685-88.*

Wow. Georganne, this is fabulous incisive, powerful. Excellent work! I hope this gives the AAP food for thought.

Hey RLI hate to dash your hopes, but if you think Georgannes fabulousincisive, powerful, (not to mention) excellent work! will give AAP food for thoughtyou had best get your head candledIT WONT!!

Sorry, to be so crudely bluntbut, we champions of the human foreskin just have to find other ways

@Gordus Knot. Sadly, I agree with you. Only 5-6 intactivists are MDs, and many of these are over 60 years of age. Robert van Howe and Michelle Storms are the only intactivists I know of who are clinical professors of medicine. These facts make it very easy for doctors to dismiss intactivists privately.

It is a tragedy that no American professor of pediatrics or of pediatric urology is a public intactivist. American pediatric urologists are the ambulances at the bottom of the cliff, and they refuse to reveal in the scholarly literature the extent of their caseloads that are due to circumcision revision and repair.

In 1975, the Nobel Laureate and secular Jew George Wald wrote a pioneering essay laying out his puzzlement at the Jewish and American obsession with circumcision. It was not published in full until 2012. Intactivism would be very different today were it perceived to have been begun by a Nobel Laureate in Medicine. But that was a Road Not Taken. Sigh

Yes, the AAP certainly has a LOT to answer for, including: Did anyone on the committee even have a foreskin?

Dan, in all likelihood, no. A predominance of AAP is made up of women and Jews.

The African STD studies were done mainly by Jews and underwritten in the main by Jewish Medical Organizations (WHO) and, to my surprise, Bill Gates charitable organization.

The circumcision device of choice for the mass circumcisions of the unsuspecting and ignorant natives is the PrePex, invented by a Jew and manufactured in Israel. (see: <http://www.prepex.com/Device.aspx>). Most all of the studies reports were generated by Jews or under

Jewish auspices

It should be pointed out these African studies were done on adult men. Neonates weren't included. I doubt whether their conclusions (even if not tainted), involving adult African men only would be germane to newborn American infant boys.

To say AAP's circumcision stance isn't buoyed by Religious and Financial interests, would be completely disingenuous.

So if you are looking for foreskins, you'll probably have better luck at a Synagogue, if the janitor is around.

With AAP's total disdain for the Human Foreskin, and their declared war against this odious piece of human male anatomy, I think the AAP should be referred to as the America Academy of Perverts.

Excellent! Thank you.

Congratulations on this Magnificent reply and challenge to the AAP.

This should really worry them.

One of their statements says that if the foreskin is not removed, parents should be given advice on caring for it.

What is this advice, and who do they think is competent to give it? Not them!

Excellent response. Thank you.

Thank you for all your hard work, Georganne. You have brought tears to my eyes. I would love to be more involved with this movement.

@earthymama3intactboys

Leaving your 3 sons intact is about the most helpful thing anyone could do to help the movement. You have brought tears to my eyes

It is apparent to me that the AAP Circumcision Task Force had two goals in preparing and publishing its report: 1) to ensure a revenue stream to physicians from third party payers, i.e., health insurers and government Medicaid programs, and 2) to provide a legal fiction that will protect physicians from law suits that may result from performing unnecessary and harmful surgeries. The carefully crafted language that does not specifically recommend the procedure, and lays responsibility for the decision on parents, makes my latter assertion perfectly clear.

Georganne, your letter is spot on, but I expect that you will receive no reply since you address issues that are not important to the authors of the report or to the AAP as an organization (trade advocacy group for medical workers.) The AAP got the headlines they wanted. This publicity alone will serve to permit them to continue their unethical practice. That was their strategy all along. Who reads a multi-page report? Most new parents are busy and only read the headlines. Shame on the news media for merely reprinting press releases instead of looking for the back story and uncovering the real motivations of the AAP.

Thank you so much! This is exactly what those who took the time to examine the report are thinking.

I will encourage everyone who cares about this issue to do what I did today, while interest is prevalent & many articles have appeared in the media: Write a letter to the editor of your local newspaper or on-line news source. Excerpting many of the cogent talking points, highlighting the lack of discussion of risk & ethics, & including information about the right to consent to surgery will get lots of interest. Put out your opinion: it matters! Below is my letter as an example (keep it short & to the point):

Shame on the American Academy of Pediatrics (AAP)! Doctors: Circumcision pluses outweigh risks 08/29/12 details their endorsement of a procedure that has questionable benefits but gives no information on the very real risks (both short- & long-term) of this surgery. They are failing in their duty to first, do no harm to their most vulnerable patients: newborns. Non-therapeutic circumcision removes healthy, functioning tissue without the consent of the patient, frequently without anesthesia or post-op pain relief. The rate has declined in the last 2 decades for good reason: parents have educated themselves about this unnecessary surgery & chosen to keep their sons whole. No other developed country dedicates scarce health resources to continuing this practice, & no other medical society endorses newborn circumcision. Parents, educate yourselves & protect your sons.

The AAP should be ashamed for using faulty & discredited studies to continue their revenue stream at the cost of their littlest patients.

Respectfully,  
Dana McCoy

Thank you Georganne for all of your out-front work on this. We all need to keep educating & speaking out. Be effective by getting the message directly to readers.

Way to go, Georganne! Excellent response!

It may be that the tawdry motive of the committee was to cover pediatricians' legal asses and keep an insurance stream flowing, but I nevertheless think that it is crucial to respond to this transparent report exactly as you have done, Georganne, pointing out the self-serving hypocrisy intrinsic in its language and conceptual frame, and slamming home the utter disregard for the clear and unambiguous ethical principle that is involved here.

The day will come when the general public will overcome its moral blindness and awaken and become responsive to this ghastly practice of mutilating boys' penises for no good reason, just as it became aware of the moral issues involved in second-hand smoke, despite the fact that doctors were pictured in ads smoking cigarettes as they consulted with patients back then. Even medical doctors need to be awakened from their dogmatic slumber.

Keep at it, Georganne! I support your great work and salute you personally. You are my heroine.

Thank you, Georganne, for your intelligent and thoughtful reply. I only hope that SOMEBODY actually takes the time to read it and, possibly, send you a response. However, I am not at all hopeful. As Dan Bollinger writes in his post, the AAP has a LOT to answer for, and most telling of all, his question, Did anyone on the committee even have a foreskin? I doubt the group even LOOKED at statistics on the incidence of STDs and HIV in uncircumcised men from Europe and Great Britain where infant mutilation among Christians is rare. Also, what about the Chinese? They don't circumcise and they are certainly doing all right these days!

Thank you Georganne for being the tiger on the tail of the AAP. It is great to have a learned advocate. My own reply was not as erudite, but hopefully succinct from a victims perspective.

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The attitude seems to be that you know better than me about my own body. It taints how I feel about doctors generally and the whole medical establishment in the U.S. I believe this is already a serious PR debacle for you-all and your stature will surely decrease as time advances and people talk.

At one time RIC was easy to minimize and was swept under the rug, and we were told all sorts of silly stories about the missing body parts. It is very difficult to hide something like this anymore. I think you must know that RIC impacts grown men. Continuing to support this outmoded practice is going to be more and more costly to your members as time goes on.

This is great Georganne. How on earth can they contradict themselves so obviously in numerous ways and not acknowledge it? Too bad more people are not looking closely enough into this statement.

Fantastic letter! You very clearly described the parallel universe in which the AAP lives.

Thank you Georganne,

I'd like to add one of the things that really burns me (has always) that from what I can gather, the only risks identified in the old statement only account for immediate procedural risks, and that despite their review they seem to have sidestepped any research on risks or complications. The risk analysis which I've referenced in the past seems to have been removed but is still used on the Canadian Pediatric Society parent site (Caring for Kids) it has a relatively nice comparison of intact risks and circ risks which I could nitpick, but was willing to settle for when people needed a neutral representation of the facts. <http://www.caringforkids.cps.ca/handouts/circumcision> The AAP included the same information in paragraph form in the Policy Statement and not on the parent informational pages.

Defining the risks, one would assume that we would be looking at the lifetime risks of circumcision, but it never seems as if that is so. It is a legal technicality of how medical risk is defined and allows them to discount meatal stenosis or sexual issues that do not show up till months or years after the procedure is completed. So the comparisons have always been unfairly structured with about 3 months during infancy on the circumcision side and a lifetime of intactness.

If I'm wrong or misunderstanding something, I'd like to know, but no where have I ever seen stats for meatal stenosis included as a risk for circumcision, but there are references that guess at rates for meatal stenosis that cite the cause as circumcision (or forced retraction). It is certainly a complication that might nullify any purported benefit of STDs

Just one example, I'm sure there are more.

Jessica

Thank you Georganne. I am happy to have 2 intact sons.

With our younger son, my husband and I have a small difference of opinion over rear facing car seats versus front facing car seats. In the past, I have used the AAP guidelines to support my side of discussion that the rear facing car seat is safer. The new AAP guidelines on circumcision, filled with bizarre details such as a suggestion to wash under the foreskin \*with soap\*, have greatly undermined my ability to use the AAP as an authority on anything. I am very greatly disappointed by the AAP task force and its document.

I totally agree. I will not consult or recommend the AAP policy on TV-watching, nutrition, anything anymore.

That is definitely something that really bothers me as well the AAP quotes good statistics and promotes extended rear facing, but ignores the non-biased statistics from other developed countries on circumcision in favor of their own privately funded circus in Africa. Thankfully I had already made my decision on both of those topics before the AAP even said anything. :/

AAP is recommending pulling the foreskin back and washing with soap!!!??? All that will do is cause phimosis that will require treatment, or they hope circumcision later on in life. No there is nothing they say that can be trusted. Proves the point thought outside of the US. The only thing that matters in the US is money, screw everyone's rights and what is actually best it's all about the money boy best of luck US parents, the AAP have sold and will continue to sell their souls for the money cutting brings in. At least we know Putin and Bashar are evil, the AAP seem to have better media managers

Thank you Georganne for your excellent letter!

With the AAP's 2010 attempt to promote genital nicking of girls, and now once again with the disgusting Circumcision Task Forces Technical Report on Circumcision the AAP displays contempt for children and puts their health and well being at risk.

Thank you for so thoroughly questioning these despicable hypocrites.

James, I fully expect the AAP to revisit and recommend FGC now that they are promoting MGC. There is a certain method to their madness.

A clear challenge to the AAP, where hopefully some of their members will take umbrage.

We need to help people understand that the AAP does not have the interests of its precious charges, but mainly the interests of its dues paying members. We also need to point out that circumcision for many operators is a compulsion, which puts it on a par with priestly pervers. And as much or more harm is done with the cutting. When this is understood, laws will be enacted to stop the tremendous harm that some doctors are doing to our children.

Yes. Its like before the age of science the high priests of medicine took over from the high priests of religion. And it stuck!

The best part of the AAPs new position statement on RIC is that they recommend that insurance companies cover the procedure but do not recommend the procedure. I never use the phrase greedy whores but if I did

Dan Susan Blank will have a foreskin. Some 150 million American women do, and apparently no one has the right to take it from them its propensity to smegma and infection notwithstanding. Thats one of the craziest things about all this

Laura, You are correct, Susan Blank is surely intact and hasnt had her clitoral hood (analogous tissue to the foreskin) forcibly removed.

Not all women can retract the hood and expose the glans clitoris, and this inability is quite normal if a woman can climax regularly during sexual encounters. Despite all the Vulva Pride that has been going around during the past 40 years (a cultural tendency that Betty Dodson, not Eve Ensler, began), many American women remain unaware that they have anatomical structures that are quite similar to those of intact men.

But the fraction of young unmarried women who are self-aware about their masturbation is rising. This fraction will find it easy to see how the bits sacrificed to RIC enhance the male sexual experience. I have never known a sex positive woman to be sex-negative about men. It is incredibly ironic that a woman who can retract her clitoral hood with pleasure has much more appreciation of the sexual nature of the male foreskin than most circumcised men do. Is this the unspoken driver of the fact that that most intactivists are women??

This is absolutely excellent. I can only hope you have submitted this riposte to major news outlets so it can be covered. I would love to hear the AAP being publically called upon to answer the points made above.

Natalie

I think it would make a great Huffington Post op/ed.

I have more questions for the AAP:

Did you ask the Task Force why they gave short shrift to ethics? (Or were you happy they didnt delve further?)

Did anyone at any time even consider for a moment the horror of promoting the already far to great number of 117 infant deaths from circumcision-related causes each year?

Did anyone on the task force, leadership, ethics committee, or legal department voice an objection to the obvious conflict of interest of soliciting unnecessary surgeries?

It is intentionally misleading that in the AAP policy statement Abstract they write: Specific benefits identified included PREVENTION of urinary tract infections, penile cancer, and transmission of some sexually transmitted infections, including HIV. (emphasis mine). Yet, in the very next paragraph under Policy Statement they step back and state: Benefits include significant REDUCTIONS IN THE RISK of urinary tract infection in the first year of life and, subsequently, in the risk of heterosexual acquisition of HIV and the transmission of other sexually transmitted infections. (emphasis again mine)

Will anyone in the media catch this and hold the AAP accountable?

The HPV infection rate in the university health center where I work is sky-high despite circumcision. Same for non-gonococcal urethritis/chlamydia. Cant people put 2 and 2 together? There are no preventative benefits. Totally false and misleading information being spewed out by the AAP. Its all about the money and power/control to make circumcision look normal. Discriminatory hate speech.

We need some investigative reporters to dig deeper into this bias and corruption at the AAP.

They brand men like a herd of cows. American men are such wimps to let their sons be subjected to this absurd surgery. If it were women tied down & cut, the Feminists would be howling all over the world. The male genitals are a cheap commodity. There is no argument too absurd for the circumcisers. They insult the appearance of the intact penis, claim that circumcision heals everything from body warts to HIV, and draw an illogical distinction between female & male genitals. Circumcision is the mark of a slave, not a free man.

Top Ten Tortures Less Painful Than Circumcision

10. Get knocked out by Mohammed Ali.
9. Pull out your fingernails.
8. Eat a pile of steaming bear phooey.
7. Skin yourself alive.
6. Fall into a vat of molten iron.
5. Get run over by a train.
4. Go through a sausage grinder.
3. Saw off your legs.
2. Poke out your eyes.
1. Go To Hell

~Dick-Scalper

Thanks for injecting some humor. RIC is not a funny topic and I am serious and I know you are serious about seeing the end of disfiguring genitals. Humor helps everything along.

The AAP statement says: It is important that clinicians routinely inform parents of the health benefits and risks of male newborn circumcision

WHAT? NO! The AAP has it backwards.

Clinicians must stop raising the issue to parents and U.S. hospitals must cease soliciting parents for newborn circumcision.

Medical associations must be pro-active in dispelling parents unreasonable medical and social fears about intact genitalia and physicians must refuse to perform unnecessary and damaging surgery on unconsenting children.

Any friends we have in the media should raise this as part of an investigation of the politics behind the AAPs circumcision task forces.

I agree 100% the medical industry presents parents with false choices and a false dilemma. You must decide right now whether to amputate parts of your sons genitals so we can discharge you and get you home.

Tim, the lamestream media cannot write about the foreskin/restoration without saying how funny it is.

You're absolutely right it isn't important to bring up circumcision if it isn't necessary. Every dot over every i in the AAP statement bugs me.

There is a terrific youtube video on decapitation. I'm sorry I don't have a link. The video spoofs precisely the debate on circumcision: listing more benefits than risks, everything.

It would be a scandal if anyone involved in this recommendation is Jewish or muslim. The objectivity of individuals belonging to a religion which believes that circumcision is mandated by God is obviously questionable. This would be a good starting point for investigative journalism.

Dr. Susan Blank and Dr. Freedman on the committee are Jews.

Thank you for your thoughtful critique. I think the AAP is out on a limb. The whole African study justification is going to fall like a house of cards and where will the AAP stand then? Has anyone seen any data about how much money is generated from RIC? Maybe it's time to follow the money and expose the real story.

I have some old data from some college papers I did back in the 2000s. In my home state of Utah, the most recent statistic available then [2000] was that an average circumcision price tag [Medicaid billing] was \$326. That was not including anesthesia, which is still rarely used as far as I know. Routine Infant Circumcision [RIC] is down a bit, but I just found a new article on the AAP's new stance that says roughly 1,000,000 boys are circumcised each year in the U.S, or about half of male neonates, which is probably conservative. So even with the old price tag conservatively doctors fees alone are \$326,000,000.

Then you have all the device manufacturers that have to turn a profit. Restraint manufacturers [Circumstraint], various crushing and cutting clamps, Sheldon, Gomco [are they still in business?] Accucirc, which I am ashamed to say is made in the state of Utah. Then the clamps where the foreskins blood supply is cut off and left to rot off like TaraKlamp and Plastibell. These are the ones that can give your son the galloping gangrene [Fourniers gangrene (gangrene of the penis and scrotum)].

I'd say \$500,000,000 is very conservative. Probably double that and you've got a more realistic estimate. And that is just in the U.S. These devices are no doubt available worldwide.

Unfortunately, circumcision falls into the category of The Big Lie, so preposterous and grandiose in its claims that Joe Public puts aside his normal skepticism. It's disgusting to realize that the pro-circ industry has twisted the AAP in bureaucratic knots with this convoluted statement, which implies support of RIC without actually stating it. The youtube video snip-snip (2005) includes a graphic video of the gruesome procedure. It should be required viewing for any parent before they subject their beautiful boy to this barbaric torture from another time.

~Dick-Scalper

Wonderful letter. I've already added Petrina Fadels letter to my website. May I add this one as well. (I'm sure it's already being shared all over the place.) Keep up the good work. Rosemary

It will be up to merciful mothers to spare their sons this humiliation. With a few exceptions, most circumcised men are so defensive they'll never own up to their loss.

~Dick-Scalper

Of course, you can add it. But I have to make one correction. It turns out that Susan Blank is a board-certified pediatrician; she just doesn't practice pediatrics. I'll do the edit tomorrow, so please wait. GC

Can someone please tell these evil people that every single month 40,500 men search for foreskin restoration on google. There are a lot of angry men out there. Look for the google keyword tool, and try your own searches. Think about that, every single month over 40,000 men want their foreskin back.

I want my foreskin back and I want someone held accountable.rjw nz

I wonder how many have found Foregen, an organization promoting foreskin regeneration (not restoration). It sounds like this procedure won't be done on many people if they don't receive a lot of donations. I wish companies manufacturing grafts from human foreskin could be forced to give money to the people who help men regrow it.

The reason is, if you just say circumcision is bad and permanent, people will go on doing it. If you say the tissue can be \_regrown\_, more people will value the tissue in the first place.

Hi Georganne. Sorry to contact you in this way. I know we've met before on one list or another, but I don't have an email saved for you. Would you please set up IntactAmericas donation page so that a dedication can be made? In other words, so that you can make a donation in someones name, dedicated as a birthday remembrance, Mothers Day remembrance, baby shower devotional, commemoration of the birth of a child, et cetera, et cetera? Thank you. Jerry

For tens of millions of adult American men and their spouses, the normal penis is bald 24/7. Consequently, many American doctors and medical school profs are incapable of using common sense and objectivity when thinking about the most sexual part of the male body. The AAP Task Force Report was silent about how circumcision destroys tissue that interacts directly with the vagina during intercourse, and that is the primary locus of sensation during masturbation and foreplay. The Report was silent about how foreskin motion enhances intercourse. Most American doctors are not ready to admit that their parents did something to them that detracted from their adult sexual experiences.

What people must realize the true nature of the AAP. No pro-circumcision advocate manipulated the AAP into promoting circumcision. The AAP is a business organization that tries to protect and promote the medical profession. It's all about making money, nothing more, but nothing less. It is well known by academics that most physicians lie about being doctors, since the true use of the title implies the person has earned a PhD. So their first lie is their title. Drug companies give physicians monetary rewards for promoting and prescribing drugs to their patients, and physicians are all too willing to go along with this practice. So most of the time, drug prescribing among physicians is not about patient health, but about money. Now turn to male genital mutilation. They cut the foreskin off for a profit. They then sell the foreskin for a profit. Companies then use the foreskin to engineer products, which they sell for a profit. This is an incredibly lucrative business. Most American physicians only care about turning a profit, so why do you think they would care if you disagree with MGM? The only way you are going to get them to listen is to attack their pockets. If you hit their profit margins, more are likely to listen. Is it not interesting that the US and Israel have the two least respected medical establishments amongst medical professionals elsewhere? It is about greed and corruption.

Merely wanna say that this is very beneficial , Thanks for taking your time to write this.

You must be [logged in](#) to post a comment.