

CircCurer Circumcision

Patient Information

The Richmond Urology Unit



The Patient Information Leaflets page on the Trust website is available on the link:
<https://www.wwl.nhs.uk/patient-information-leaflets> or scan the QR code.

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Introduction

CircCurer device use is a new method for male medical circumcision surgery, associated with advantages of high cosmetic satisfaction, avoiding cauterisation (diathermy), and quicker surgery. The lack of cauterisation is associated with quicker recovery, with reduced need for painkillers. We have recently reported all our cases in a UK national meeting, showing excellent patient feedback with 100% reporting high cosmetic satisfaction.

Male circumcision (medical) indications

- Persistent significant phimosis (tight foreskin) despite medical treatment +/- severe inflammation
- Recurrent infections (balanoposthesis)
- Significant symptoms e.g. pain/ difficulty during intercourse due to foreskin problem

Assessment in clinic

You will be reviewed by a urology specialist, who will assess the issue and the need for circumcision. The specialist will be able to advise on both surgical options and answer any questions. This information leaflet will be provided for reference.

Aims

Advantages of CircCurer Circumcision

- **Optimum cosmetic result:** precise 'machine like' incision
- **No cauterisation:** quicker healing and reduced need for painkillers after surgery
- **Quicker surgery:** 10 minute procedure (instead of 30 mins for standard surgery)
- **Ideal for Local Anaesthetic** procedure: removes cost, and risks/ side effects of a general anaesthetic

Risks

Disadvantage of CircCurer Circumcision

The main downside of this approach is the use of suture staples, which are placed to seal the wound after removing the foreskin. They are roughly 1/3 the size of paper staples. We expect most to fall off after 4-6 weeks during the healing process. However, some can remain and need removal to avoid burying in the wounds.

CircCurer is not recommended for a buried/ concealed penis.

We advise caution regarding CircCurer use in patients with erectile dysfunction, diabetes, and elderly patients, as the fall out of the staples can be slow.

Management and Benefits

Post operative management

- For Hospital staff:
 - Rest and observation for 30 mins in the ward after surgery.
 - If there is no additional bleeding and voiding, the patient can be discharged.
 - If gauze is contaminated by urine, replace to prevent infection.
- No heavy activities or sexual activity for 30 days to prevent incision tearing.
- **Pain:** The local anaesthetic wears off around 4 hours after surgery. Take pain killers (e.g. paracetamol or ibuprofen) regularly the same day, and as required from the following day.
- **Removal of all bandages 48 hours after operation:** leaving the incision open speeds up healing.
- Can shower after removing the bandage. Keep the wound dry after.
- You can apply Savlon with cotton swabs up to 4 times a day to clean the wound.
- **Staple Removal:** the staples should fall off automatically from 1 week, and usually completely within 4-6 weeks during the healing process.
 - Normal erections and mobility can facilitate this.
 - To optimise success of prompt staple removal, we advise patients to actively push them off or pull them out after 10-14 days (use tweezers or cotton buds).
 - For special cases where there are some staples still remain after 6 weeks, we advise contacting the hospital, so that the doctor can remove the staples.
 - **Avoid intercourse until the staples are all gone (or use a condom).**

Methods to promote healing

- Daily application of Sudocrem or MEBO ointment (from pharmacy) after surgery may be beneficial to promote wound healing.
- Bactroban and Erythromycin ointment can be used to prevent inflammation.

Follow up regime

- Advice and telephone contact (provided on discharge).
- Telephone appointments are arranged at 6 weeks. This can be face to face if the wound needs reviewing.

Please use this space to write notes or reminders.

Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

The Patient Relations/PALS Manager
Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust
Royal Albert Edward Infirmary
Wigan Lane
Wigan
WN1 2NN

Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the positives and negatives of each option for me?
3. How do I get support to help me make a decision that is right for me?



How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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