Assaulted and Mutilated
*A Personal Account of Circumcision Trauma*

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**Abstract:** The excessive removal of skin and mucosa is one of the most common complications of neonatal circumcision, yet the true frequency of this complication and its adverse effects on physical and psychological development has not been adequately documented. A personal account is presented of the lifelong trauma associated with a routine neonatal circumcision in which almost all penile shaft skin was removed in addition to the preputial skin and mucosa. The trauma of this iatrogenic injury exerted a negative effect on physical and psychological development, including sexuality, perceived place in society, and career. Reconstructive surgery to resolve the physical injury yielded disappointing results. Partial resolution of the psychological trauma has been achieved through a combination of ongoing counseling, successful litigation, and an emphasis by the victim on public education in regard to the detrimental effects of routine neonatal circumcision.

**INTRODUCTION**

I am a 27-year-old PhD scholar who was badly injured by a routine neonatal circumcision performed within days of my birth. For the last nine years, I have struggled to cope with this injury and seek legal redress for my suffering, while at the same time I have successfully pursued a career in medical science. I recently achieved a precedent legal victory in Australia with an admission of liability and AU $360,000 in damages for my injury. I view routine circumcision as an act of assault and a breach of human rights, and I am dedicated to the eradication of this unnecessary and potentially disastrous procedure.
1. OVERVIEW

This article is an account of my experience of the possible, and largely unpublicized, complications that can arise from routine neonatal circumcision. Circumcision and other forms of male and female genital mutilation originated in primitive societies and have been practiced for several thousand years. Despite this long tradition of mutilation, the resulting complications, injuries and deaths have been consistently unreported.

Ironically, many contemporary advocates of male circumcision claim that the historic development of this practice in primitive societies is evidence that male circumcision is beneficial to health. For example, circumcision advocates Szabo and Short\(^1\) claim that male circumcision is depicted in a controversial relief from the Old Kingdom tomb of Ankhmahor at Saqqara, Egypt.

This relief may be one of the oldest records of male genital mutilation in the ancient world, and dates from around 2400 BC.\(^2\)\(^3\) A number of trained Egyptologists, however, doubt this claim. A number of alternative interpretations have been offered by experts in the field. Some Egyptologists argue that this is a scene of a ritual shaving,\(^4\) while others suggest that it might be a scene of emergency dorsal slit surgery to relieve a case of paraphimosis.\(^5\) Even if genital mutilation is depicted in this relief, controversy exists over the similarity of this practice to circumcision, and its cultural significance to the Ancient Egyptians.\(^6\)

Regardless of the type of genital mutilation depicted in the Ankhmahor tomb relief, it is apparent that one man has been forcibly restrained. This can be interpreted as involuntary genital mutilation. The relief provides evidence that, since ancient times, it has been normal for individuals to be very unhappy and distressed when forcibly subjected to an act of mutilation. All forms and degrees of genital alteration, including circumcision, have always been a phenomenon that should be a matter of personal choice.

2. MAJOR LIFE EVENTS

I was born and circumcised in Western Australia in 1973, but was unaware of any genital abnormality as a young child. Because I was circumcised as an infant and not informed of this fact, I was not aware that my body had undergone any surgery. I had no reason to suspect that I had a penile problem until puberty. At the age of 18, in 1992, I underwent reconstructive surgery. The outcome of this surgery was exceedingly disappointing, and I attempted suicide six months later. In 1993, six months after the suicide attempt, I underwent further surgery.